Transitioning Home: OT with the High-Risk Infant after NICU Discharge

Allison P. Smith, PhD, OTR/L, BCP, SWC

- What’s the Problem?
  - Most infants who are admitted to the NICU are at high risk for disruptions to occupational performance within the family unit
  - The transition home from the NICU is a vulnerable time where parents are stressed and the infant needs to integrate into the family system with minimal support
  - Despite this need, there is often a delay before initiation of therapy services or some infants never receive services despite present delays (Nwabara, Rogers, Inder, & Pineda, 2016)

- A high risk infant is...
  - Infants who are at “an increased risk for neurodevelopmental morbidity” (American Academy of Pediatrics [AAP], 2004, p. 1378)
  - According to the AAP, there is evidence that specific diagnoses, medical interventions, and social or environmental factors lead to evidence of neurodevelopmental delays indicating a need for follow up (AAP, 2004)

- Why are these infants high risk?
  - Neurologic immaturity, abnormality, and vulnerability affecting:
    - NICU Environment is NOT normal in many ways
  - High Risk Infants have many Long Term deficits
    - Motor delays
    - Cognitive deficits
    - Sensory processing difficulties
    - Social emotional challenges

- The Transition
  - AAP recommends criteria for discharge from the NICU based on the infant’s physiologic stability, including: stable respiratory status, ability to maintain body temperature in home-like environment, and oral feeding (at breast or bottle) to support a sustained pattern of weight gain (Bell et al., 2008)

- Role of OT in the NICU and during transition home:
  - Occupations are “everyday activities that people do as individuals, in families and with communities to occupy time and bring meaning and purpose to life” (AOTA, 2014, p. S5)
- **Co-occupations** are shared occupations that involve two or more individuals, including parenting activities involving the caregiver and the infant (AOTA, 2014)

- Therapeutic Implications for Infant Transitioning Home
  - Can use Role of OT in the NICU as a guide for supporting transition home from occupational perspective
  - OTs should focus on occupational performance of the infant and family within daily routines
  - Support the caregiver to:
    - carryover of skills learned in the NICU after discharge into the home environment
    - be able to recognize and support “the infant’s ongoing and potentially changing needs and behaviors” (AOTA, 2018)

- What are the priorities during the transition Home?
  - Parent-Infant Bonding
  - Feeding
  - Bathing, Diapering, Dressing
  - Sleep
  - Development & Play

- Conclusion
- The occupational therapist can support the transition home by:
  - Assessing the effects of the physical environment, caregiving practices, positioning, feeding, and nurturance on the infant’s neurobehavioral organization and sensory-motor skills
- Occupational therapists should provide individualized services to alleviate an ongoing mismatch and the stress of the transition home by:
  - Identifying individual infant and family strengths and vulnerabilities
  - Finding ways to address priorities for the infant’s occupational engagement throughout the continuum of care from NICU admission, discharge, and transition to home
  - Supporting families to gain competence and confidence in co-occupations with their infant
References


