



## **Best Practices for Community Midwives re: Hospital Transfers**

How pregnancy, birth, and postpartum will unfold can be unpredictable. Understanding this and remaining flexible about one's birth plan, can minimize trauma for birthing parents and their families if they need to change provider and setting. Preparation by the midwife throughout the course of care can help make a transfer experience, when necessary, more positive for clients.

Smooth Transitions™ seeks to improve the transfer process by enhancing communication between community midwives and hospital providers and staff. One of the program's primary goals is to build a collaborative model of care that puts birthing families at the center when they need to access hospital-based care. Because these transfer situations can be stressful for everyone involved, the more fully-informed one's clients are about what to expect in the event of a transfer, the more likely it is that the midwives and the hospital providers and staff will be able to work together to give these families the respectful, high-quality care they deserve.

### **Preparing Midwifery Clients for the Possibility of a Hospital Transfer**

- **During the initial consultation visit:**
  - **Discuss your scope of care/practice** (i.e. normal/low-risk). Consider sharing any risk-screening [guidelines](#) you use in your practice. Be clear about your intention to engage with clients in a process of [shared decision-making](#) throughout their care and to allow ample time for questions and discussion about their options
  - **Review common reasons for transfer** (antepartum, intrapartum, postpartum, and for newborns)
  - **Describe your transfer relationship** with local hospitals/providers

- **Share your practice's statistics** for antepartum, intrapartum, postpartum, and newborn transfer (*adjusting for parity*).
- **Throughout the course of care:**
  - **Be attentive** to any negative feelings the client may express about hospitals and the possibility of a transfer. Address any specific concerns/fears the client may have and refer for counseling, as needed, to process any unresolved birth trauma or sexual abuse history that might increase the client's reticence about giving birth in the hospital with an unknown provider.
  - **Be sensitive** to any cultural preferences and issues related to race, sexual orientation, and sexual identity and offer to help ensure that your client receives respectful, responsive, and appropriate care in the event of a hospital transfer.
  - **Knowing** your practice's limits, understanding and communicating the receiving provider/hospital policies, and clearly presenting options with time for questions and processing will increase client satisfaction with any type of transfer of care if it is needed.
- **As your client nears term:**
  - Encourage them to **take a tour of the hospital** they would most likely transfer to if a complication were to arise either in labor or postpartum. Transferring to an environment that is familiar can reduce anxiety. If the hospital has developed a document that explains the care they offer, share it with your client.
  - Encourage them to **draft a birth plan specifically for hospital transfer**. Reviewing this plan together provides another opportunity to check in about any fears they may still have about the possibility of a transfer.
  - Many clients use online tools to develop their birth preferences/plans. Since these plans typically include language about routine hospital-based interventions (induction, augmentation, epidural, cesarean section, etc.) that clients were hoping to avoid by planning to give birth at home or in a birth center, **it's important to explain that these interventions may be necessary tools in the event of a transfer**. You might want to frame this discussion by noting that transferring to the hospital is *not* a failure—it is accessing appropriate tools at the right time.
  - Have your clients **pack a hospital bag**, just in case. Transfers can be hectic, even if they're non-emergent, and having one less thing to do at that moment can be helpful.
  - **Revisit in detail your practice's plan for transfer and emergency situations**. This has the potential to be a stressful topic but it will give you a chance to

convey how prepared you are to handle these events. Clients generally feel better when they have information ahead of time rather than being surprised in the moment.

- **Clarify what your role will be in the event of a transfer** including receiving provider communication; how records/information will get shared with the hospital provider and staff; whether you will stay at the hospital and support/advocate for the client; what the course of care with you will look like after discharge from the hospital.

### **During a transfer:**

- Direct, provider-to-provider communication is best. Ideally this hand-off occurs face-to-face, at the bedside, with both nursing and the client involved. **If the hospital your client is transferring to participates in Smooth Transitions, follow the transfer protocol** for that particular hospital which will offer guidance on roles, expectations, communication, and client records.
- **If the transfer is emergent**, Smooth Transitions has a [911 Protocol](#) that is a helpful tool for initiating and communicating with EMS.
- If possible, **stay in contact with your client** throughout the entirety of their hospital stay to help them navigate decisions and make sure they receive the intended care.
- **Make yourself available for communication** with the hospital and staff, especially regarding discharge and course of care for your client after discharge.
- Before you leave the hospital, a brief de-brief with the receiving provider may be helpful, particularly if any of the interactions during the transfer have been stressful. This is **not** necessarily the time to give pointed feedback—you can do that through the Smooth Transitions [Community Midwife Survey](#). Rather, it's an opportunity to build a mutually respectful relationship by expressing gratitude for any aspect of the transfer that went well.

### **After a transfer:**

- Even under the best of circumstances, transfers can be disappointing, even devastating for clients. **Always check in with clients** after a transfer to assess how they are doing emotionally. Because their feelings often shift over time, it's important to do this more than once during the postpartum period.
- **Offer mental health resources as needed** for additional support.
- **Encourage them to complete the Smooth Transitions [Client Survey](#)** to share their transfer experience (positive, negative, or mixed). Let them know their feedback is valuable and will be heard by hospital leadership and used to improve future transfers.

- It is also important for you, the community midwife, to provide your perspective on the transfer by **filling out the Smooth Transitions [Community Midwife Survey](#)**.

**Lastly:**

- **Attending the regular Smooth Transitions Perinatal Transfer Committee (PTC) meetings** (virtually or in-person) at the hospitals where you transfer to will:
  - 1) ensure you have the latest information about that hospital's protocols
  - 2) provide an opportunity for you to give and receive feedback about transfers
  - 3) help build relationships with hospital providers and staff.
- If you are unable to attend the PTC meetings, **stay in touch with the Community Midwife Liaison** for the hospitals you transfer to and share any concerns you may have.