

A Single Center Study Evaluating Barriers to Transferring Care to an Adult Congenital Heart Disease Program and Pediatric Cardiologists' Perception of a Transition Program

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Background: Transitioning to adulthood and the eventual transfer of care from pediatric cardiology to an adult congenital heart disease (ACHD) program is a crucial step for patients with congenital heart disease. The Wisconsin Adult Congenital Heart Disease (WAtCH) program transition team sought to explore and identify barriers to transfer of care and how our site's pediatric cardiologists perceive our transition program.

Methods: The transition team sees patients aged 16 and older while in clinic seeing their pediatric cardiologist. An anonymous survey was sent to 19 pediatric cardiologists regarding their overall impression of the transition program, the topics discussed during transition visits, their comfort level transferring care, and barriers to transferring care.

Results: 64% of responders perceived the transition visits as helpful, 55% perceived them as important and 9% perceived them as a waste of time. 89% of cardiologists feel completely comfortable transferring their patients to the ACHD program and 22% feel somewhat comfortable. When asked, "what were the reasons for transferring to the ACHD program", 89% replied age, however, 67% of cardiologists indicated that the time of transfer also depends on other individual patient characteristics. The most significant barriers reported were "patient does not want to transfer" in 44% and "the family does not want to transfer" in 56% of responders. 100% of responders indicated that at the time of transfer "patients understand the need, but have questions or concerns". The most common critique was the perception that discussion of transition and ultimate transfer should occur at later ages (n=2 responders).

Conclusions: In a single site study regarding the perception of a transition program, pediatric cardiologists seem to generally look favorably upon a transition program and find it helpful. Patient and family hesitancy were noted as the largest barrier to transfer into the ACHD program.