

## **Free Parking for Parents of Infants in the NICU: A Collaborative Approach with Families**

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### **Introduction/Background:**

Parental presence and active participation in caregiving improves both short- and long-term outcomes in preterm infants requiring NICU care.<sup>1,2</sup> Parents also experience benefits, including lower rates of depression, reduced levels of stress, increased confidence in parenting and responsiveness to infant cues, and improved attachment to their infant.<sup>3,4</sup> The provision of free parking is one means of helping parents to be active partners in the care of their infant. It is also one of several accessibility interventions described in the NIDCAP Federation's NICU Nursery Certification Criterion Scales (NNCCS).<sup>5</sup> There has been limited research into this intervention to date.<sup>6</sup> No association has been found between the provision of free parking, increased parental presence, and length of stay but there are confounding variables which limit the applicability of this particular study.

This presentation outlines the steps we have taken to secure free parking for parents in our NICUs, in conjunction with the Family Advisory Council Team (FACT).

### **Objectives:**

Participants will know that:

1. Active parental participation in care should be considered part of the treatment provided for preterm infants.
2. Facilitating parents' presence in the NICU should be a high priority objective for improving care and outcomes.
3. Free parking is one method which may increase parental presence and participation in care.
4. Strategies used in our attempts to acquire free parking for parents.
5. Work in progress and our plans to achieve this goal.

### **Approach:**

A previous attempt to secure free parking was made in 2011 during the first World Prematurity Day. Presentations were given on this topic and a petition was signed by families and staff at all NICU sites across the city. Unfortunately, systemic changes at senior managerial levels meant that the petition was not presented to the appropriate authorities.

This initiative became a priority project in 2016 on our NICU FACT, which includes parents and staff who work on various initiatives through a progressive and collaborative approach. Our first

task was to gather data regarding parking usage and parental perceptions. Parents are currently eligible for discounted monthly parking passes for sale at \$71CAD. This compares to the daily parking charge of \$14.25CAD. We performed a cross-sectional survey of parents with infants admitted in two level 3 NICUs.

Results of the survey:

Of 51 families who completed the survey,

1. 38 (74.5%) used the hospital parkade regularly during their infant's hospitalization.
2. 25 (65.8%) of those parents paid for parking by the month at some point.
3. At least one parent spent an average of 7.3 hours per day with their infant (range 2-24 hours).
4. The cost of parking affected the *duration* of time spent with their infant for at least one parent in 14 (34.1%) families.
5. The cost of parking affected the *frequency* of visits to the NICU for at least one parent in 12 (29.3%) families.

Participants stated that obtaining monthly passes was complicated, given the unexpected and emergent obstetrical admission for some. They also described the parking office as difficult to find, located outside of the main hospital, and having restrictive hours of operation.

In addition to this survey, free parking has been discussed in several other forums, leading to this topic being placed on our hospital's Operational Plan and Priority list of key issues. We have also partnered with the Pediatric Cardiology FACT to form a joint working group to address this subject.

### **Comprehensive Summary/Conclusion:**

We have identified that parking is a barrier to parental presence and active participation in care of their infant. A joint working group has been created to carry this initiative forward.

The joint working group will:

1. Establish qualifying criteria for free parking and a consistent process for distribution of passes.
2. Investigate sources of funding, including corporate and foundation sponsorship.
3. Streamline the parking process and work towards an electronic parking system.
4. Plan an audit to determine whether free parking increases parental participation in care and improves outcomes for infants and families
5. Plan an economic evaluation to determine whether free parking leads to overall cost savings to the health care system.
6. Design further studies to identify other barriers to parental participation in care of their infant and interventions to remove these barriers.

We wish to have discussion with attendees at the NTM, with respect to others' experience and successes/challenges regarding free parking for parents, so that our working group can use this collective experience to make this a successful initiative.

The authors have no financial relationships with commercial entities to disclose.

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