



CHECKLIST FOR TRANSITION: CORE KNOWLEDGE & SKILLS FOR PEDIATRIC PRACTICES

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POLICY STATEMENT - A Consensus Statement on Health Care Transitions for Young Adults With Special Health Care Needs (PEDIATRICS Vol. 110 No. 6 December 2002, pp. 1304-1306)

<http://aappolicy.aappublications.org/cgi/content/full/pediatrics;110/6/S1/1304>

This checklist addresses one of the critical first steps to ensuring successful transitioning to adult-oriented health care: the need for core knowledge and skills required to provide developmentally appropriate health care transition services to young people with special health care needs.

The HRTW National Resource Center believes these skills apply to all youth with and without a diagnosis.

Core Knowledge & Skills Checklist for Practices

| POLICY | YES | NO |
|--|-----|----|
| 1. Dedicated staff position coordinates transition activities | | |
| 2. Office forms are developed to support transition processes | | |
| 3. CPT coding is used to maximize reimbursement for transition services | | |
| 4. Legal health care decision making is discussed prior to youth turning 18 | | |
| 5. Prior to age 18, youth sign assent forms for treatments, whenever possible | | |
| 6. Written transition policy states age youth should no longer see a pediatrician | | |
| MEDICAL HOME | | |
| 1. Practice provides care coordination for youth with complex conditions | | |
| 2. Practice creates an individualized health transition plan before age 14 | | |
| 3. Practice refers youth to specific family or internal medicine physicians | | |
| 4. Practice provides support and confers with adult providers post transfer | | |
| 5. Practice actively recruits adult primary care /specialty providers for referral | | |
| FAMILY/YOUTH INVOLVEMENT | | |
| 1. Practice discusses transition after diagnosis, and planning with families/youth begins before age 10 | | |
| 2. Practice provides educational packet or handouts on transition | | |
| 3. Youth participate in shared care management and self care (call for appt/ Rx refills) | | |
| 4. Practice assists families/youth to develop an emergency plan (health crisis and weather or other environmental disasters) | | |
| 5. Practice assists youth/family in creating a portable medical summary | | |
| 6. Practice assists with planning for school and/or work accommodations | | |
| 7. Practice assists with medical documentation for program eligibility (SSI, VR, College) | | |
| 8. Practice refers family/youth to resources that support skill-building: mentoring, camps, recreation, activities of daily living, volunteer/ paid work experiences | | |
| HEALTH CARE INSURANCE | | |
| 1. Practice is knowledgeable about state mandated and other insurance benefits for youth after age 18 | | |
| 2. Practice provides medical documentation when needed to maintain benefits | | |
| SCREENING | | |
| 1. Exams include routine screening for risk taking and prevention of secondary disabilities | | |
| 2. Practice teaches youth lifelong preventive care, how to identify health baseline and report problems early; youth know wellness routines, diet/exercise, etc. | | |

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The opinions expressed herein do not necessarily reflect the policy or position nor imply official endorsement of the funding agency or working partnership