

SIX CORE ELEMENTS™

INTEGRATING YOUNG ADULTS INTO ADULT HEALTH CARE

For use by Internal Medicine, Family Medicine, and Med-Peds Clinicians

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Introduction: Integrating Young Adults into Adult Health Care

Got Transition®, the federally funded national resource center on health care transition (HCT), created the Six Core Elements of Health Care Transition™ 3.0 for use by clinicians to assist youth/young adults (with and without special health care needs) as they transition from a pediatric to an adult-centered model of health care.

Six Core Elements packages are available for:

1. Transitioning Youth to an Adult Health Care Clinician
2. Transitioning to an Adult Approach to Health Care Without Changing Clinicians
3. Integrating Young Adults into Adult Health Care

Aligned with the 2018 American Academy of Pediatrics (AAP), American Academy of Family Physicians (AAFP), American College of Physicians (ACP) Clinical Report guidance on HCT,¹ the Six Core Elements 3.0 define the basic components of HCT support, which in this package include establishing a transition and care policy/guide, tracking and monitoring progress, orienting young adults into the adult practice, integrating them into the adult practice, addressing key issues in the initial visits, and continuing with ongoing care.

The original Six Core Elements were developed following the release of the 2011 AAP/AAFP/ACP Clinical Report on HCT and tested in many practice settings and in Quality Improvement (QI) learning collaboratives using the Institute for Healthcare Improvement Breakthrough Series QI approach. The Six Core Elements 2.0 were released in 2014, with packages available for different clinical settings (pediatrics, family medicine, med-peds, and internal medicine) along with customizable sample tools and measurement options. Feedback was obtained from over 300 clinicians, youth/young adults, parents/caregivers, and public health experts to produce the updated Six Core Elements 3.0 in 2020.

- To implement the Six Core Elements of Health Care Transition 3.0, Got Transition recommends a QI approach to incrementally incorporate the tools as a standard part of care for youth and their parents/caregivers. An implementation guide to accompany this package is available at www.GotTransition.org/Implementation.
- Got Transition has developed two different measurement approaches — a Current Assessment of HCT Activities and an HCT Process Measurement Tool — to assess the extent to which the Six Core Elements are being incorporated into clinical processes. Both measurement tools, as well as a feedback survey for clinicians, are available at www.GotTransition.org/Measurement.
- Got Transition offers information about HCT payment at www.GotTransition.org/Payment.
- Got Transition also offers resources and information for youth/young adults and parents/caregivers as well as researchers and policymakers. More information is available at www.GotTransition.org.

Thank you for your interest in improving HCT of youth/young adults moving from pediatric to adult-centered care. Email info@gottransition.org with any HCT-related questions.

1. White PH, Cooley WC, Transitions Clinical Authoring Group, American Academy of Pediatrics, American Academy of Family Physicians, American College of Physicians. Supporting the health care transition from adolescence to adulthood in the medical home. *Pediatrics*. 2018;142(5); e20182587.

Side-by-Side Comparison

The Six Core Elements of Health Care Transition™ 3.0 are intended for use by pediatric, family medicine, med-peds, and internal medicine practices to assist youth and young adults as they transition to adult-centered care. They are aligned with the AAP/AAFP/ACP Clinical Report on Health Care Transition.¹ Sample tools, implementation guidance, measurement, and payment resources are available at www.GotTransition.org.

TRANSITIONING YOUTH TO AN ADULT HEALTH CARE CLINICIAN <i>(For use by Pediatric, Family Medicine, and Med-Peds Clinicians)</i>	TRANSITIONING TO AN ADULT APPROACH TO HEALTH CARE WITHOUT CHANGING CLINICIANS <i>(For use by Family Medicine and Med-Peds Clinicians)</i>	INTEGRATING YOUNG ADULTS INTO ADULT HEALTH CARE <i>(For use by Internal Medicine, Family Medicine, and Med-Peds Clinicians)</i>
<p>1. Transition and Care Policy/Guide</p> <ul style="list-style-type: none"> • Develop a transition and care policy/guide with input from youth and parents/caregivers that describes the practice's approach to transition, an adult approach to care in terms of privacy and consent, and age of transfer to an adult clinician. • Educate all staff about the practice's approach to transition and distinct roles of the youth, parent/caregiver, and pediatric and adult health care team in the transition process, taking into account cultural preferences. • Display transition and care policy/guide somewhere accessible in practice space, discuss and share with youth and parent/caregiver, beginning at age 12 to 14, and regularly review as part of ongoing care. 	<p>1. Transition and Care Policy/Guide</p> <ul style="list-style-type: none"> • Develop a transition and care policy/guide with input from youth/young adults and parents/caregivers that describes the practice's approach to transition and an adult approach to care in terms of privacy and consent. • Educate all staff about the practice's approach to transition and distinct roles of the youth/young adult, parent/caregiver, and health care team in the transition process, taking into account cultural preferences. • Display transition and care policy/guide somewhere accessible in practice space, discuss and share with youth/young adult and parent/caregiver, beginning at age 12 to 14, and regularly review as part of ongoing care. 	<p>1. Transition and Care Policy/Guide</p> <ul style="list-style-type: none"> • Develop a transition and care policy/guide with input from young adults that describes the practice's approach to transition, accepting and partnering with new young adult patients, and an adult approach to care in terms of privacy and consent. • Educate all staff about the practice's approach to transition and distinct roles of the young adult, parent/caregiver, and adult health care team in the transition process, taking into account cultural preferences. • Display transition and care policy/guide somewhere accessible in practice space, discuss and share with young adult at first visit, and regularly review as part of ongoing care.
<p>2. Tracking and Monitoring</p> <ul style="list-style-type: none"> • Establish criteria and process for identifying transition-aged youth. • Develop process to track receipt of the Six Core Elements, integrating with electronic medical records (EMR) when possible. 	<p>2. Tracking and Monitoring</p> <ul style="list-style-type: none"> • Establish criteria and process for identifying transition-aged youth/young adults. • Develop process to track receipt of the Six Core Elements, integrating with electronic medical records (EMR) when possible. 	<p>2. Tracking and Monitoring</p> <ul style="list-style-type: none"> • Establish criteria and process for identifying transitioning young adults. • Develop process to track receipt of the Six Core Elements, integrating with electronic medical records (EMR) when possible.
<p>3. Transition Readiness</p> <ul style="list-style-type: none"> • Conduct regular transition readiness assessments, beginning at age 14 to 16, to identify and discuss with youth and parent/caregiver their needs for self-care and how to use health care services. • Offer education and resources on needed skills identified through the transition readiness assessment. 	<p>3. Transition Readiness</p> <ul style="list-style-type: none"> • Conduct regular transition readiness assessments, beginning at age 14 to 16, to identify and discuss with youth and parent/caregiver their needs for self-care and how to use health care services. • Offer education and resources on needed skills identified through the transition readiness assessment. 	<p>3. Orientation to Adult Practice</p> <ul style="list-style-type: none"> • Identify and list adult clinicians within your practice interested in caring for young adults. • Establish a process to welcome and orient new young adults into practice, including a description of available services. • Provide young adult-friendly online or written Frequently Asked Questions about the practice.

Continued

1. White PH, Cooley WC, Transitions Clinical Authoring Group, American Academy of Pediatrics, American Academy of Family Physicians, American College of Physicians. Supporting the health care transition from adolescence to adulthood in the medical home. *Pediatrics*. 2018;142(5); e20182587.

Side-by-Side Comparison (Continued)

TRANSITIONING YOUTH TO AN ADULT HEALTH CARE CLINICIAN <i>(For use by Pediatric, Family Medicine, and Med-Peds Clinicians)</i>	TRANSITIONING TO AN ADULT APPROACH TO HEALTH CARE WITHOUT CHANGING CLINICIANS <i>(For use by Family Medicine and Med-Peds Clinicians)</i>	INTEGRATING YOUNG ADULTS INTO ADULT HEALTH CARE <i>(For use by Internal Medicine, Family Medicine, and Med-Peds Clinicians)</i>
<p>4. Transition Planning</p> <ul style="list-style-type: none"> • Develop and regularly update the plan of care, including readiness assessment findings, youth's goals and prioritized actions, medical summary and emergency care plan, and, if needed, a condition fact sheet and legal documents. • Prepare youth and parent/caregiver for an adult approach to care, including legal changes in decision-making and privacy and consent, self-advocacy, and access to information. • Determine need for decision-making supports for youth and make referrals to legal resources. • Plan with youth and parent/caregiver for optimal timing of transfer from pediatric to adult care. If both primary and subspecialty care are involved, discuss optimal timing for each. • Assist youth in identifying an adult clinician(s) and provide linkages to insurance resources, self-care management information, and community support services. • Obtain consent from youth/parent/caregiver for release of medical information. • Take cultural preferences into account throughout transition planning. 	<p>4. Transition Planning</p> <ul style="list-style-type: none"> • Develop and regularly update the plan of care, including readiness assessment findings, youth/young adults' goals and prioritized actions, medical summary and emergency care plan, and, if needed, legal documents. • Prepare youth/young adult and parent/caregiver for an adult approach to care, including legal changes in decision-making and privacy and consent, self-advocacy, and access to information. • Determine need for decision-making supports for youth/young adult and make referrals to legal resources. • Plan with youth/young adult and parent/caregiver for optimal timing of transfer from pediatric to adult specialty care, if needed. • Provide linkages to insurance resources, self-care management information, and community support services. • Obtain consent from youth/young adult/parent/caregiver for release of medical information. • Take cultural preferences into account throughout transition planning. 	<p>4. Integration into Adult Practice</p> <ul style="list-style-type: none"> • Communicate with young adult's pediatric clinician(s) and arrange for consultation assistance, if needed. • Prior to first visit, ensure receipt of transfer package, including final transition readiness assessment, plan of care with transition goals and prioritized actions, medical summary and emergency care plan, and, if needed, legal documents, condition fact sheet, and additional clinical records. • Make pre-visit appointment reminder welcoming new young adult and identifying any special needs and preferences.
<p>5. Transfer of Care</p> <ul style="list-style-type: none"> • Complete transfer package, including final transition readiness assessment, plan of care with transition goals and prioritized actions, medical summary and emergency care plan, and, if needed, legal documents, condition fact sheet, and additional clinical records. • Confirm date of first adult clinician appointment. • Prepare letter with transfer package, send to adult clinician, and confirm adult clinician's receipt of transfer package. • Communicate with selected adult clinician about pending transfer of care. • Confirm the pediatric clinician's responsibility for care until youth/young adult is seen by an adult clinician. • Transfer youth/young adult when their condition is as stable as possible. 	<p>5. Transition to Adult Approach to Care</p> <ul style="list-style-type: none"> • Address any concerns youth/young adult has about transferring to an adult approach to care. • Clarify an adult approach to care (shared decision-making, privacy and consent, access to information), adherence to care, preferred methods of communication, and health literacy needs. • Conduct self-care skills assessment if not recently completed and discuss young adult's needs for self-care and how to use health care services. • Offer education and resources on needed skills identified through the self-care skills assessment. • Review youth/young adult's health priorities as part of their plan of care. • Continue to update and share with youth/young adult their medical summary and emergency care plan. 	<p>5. Initial Visits</p> <ul style="list-style-type: none"> • Prepare for initial visit by reviewing transfer package with appropriate team members. • Address any concerns young adult has about transferring to adult care and take into account any cultural preferences. • Clarify an adult approach to care (shared decision-making, privacy and consent, access to information), adherence to care, preferred methods of communication, and health literacy needs. • Conduct self-care skills assessment if not recently completed and discuss their needs for self-care and how to use health care services. • Offer education and resources on needed skills identified through the self-care skills assessment. • Review young adult's health priorities as part of their plan of care. • Update and share with young adult their medical summary and emergency care plan.
<p>6. Transfer Completion</p> <ul style="list-style-type: none"> • Contact youth/young adult and parent/caregiver 3 to 6 months after last pediatric visit to confirm attendance at first adult appointment. • Elicit anonymous feedback from youth/young adult and their parent/caregiver on their experience with the transition process. • Communicate with adult practice confirming completion of transfer and offer consultation assistance, as needed. • Build ongoing and collaborative partnerships with adult primary and specialty care clinicians. 	<p>6. Ongoing Care</p> <ul style="list-style-type: none"> • Assist youth/young adult in connecting with specialists and other support services, as needed. • Continue with ongoing care management tailored to each youth/young adult and their cultural preferences. • Elicit anonymous feedback from youth/young adult and their parent/caregiver on their experience with the transition process. • Build ongoing and collaborative partnerships with specialty care clinicians. 	<p>6. Ongoing Care</p> <ul style="list-style-type: none"> • Communicate with pediatric practice confirming completion of transfer into adult practice and consult with pediatric clinician(s), as needed. • Assist young adult in connecting with adult specialists, as needed, and provide linkages to insurance resources, self-care management information, and community support services. • Obtain consent from young adult for release of medical information. • Continue with ongoing care management tailored to each young adult and their cultural preferences. • Elicit anonymous feedback from young adult on their experience with the transition process. • Build ongoing and collaborative partnerships with other primary and specialty care clinicians.

Overview: Integrating Young Adults into Adult Health Care

1 TRANSITION AND CARE POLICY/GUIDE

- Develop a transition and care policy/guide with input from young adults that describes the practice's approach to transition, accepting and partnering with new young adult patients, and an adult approach to care in terms of privacy and consent.
- Educate all staff about the practice's approach to transition and distinct roles of the young adult, parent/caregiver, and adult health care team in the transition process, taking into account cultural preferences.
- Display transition and care policy/guide somewhere accessible in practice space, discuss and share with young adult at first visit, and regularly review as part of ongoing care.

2 TRACKING AND MONITORING

- Establish criteria and process for identifying transitioning young adults.
- Develop process to track receipt of the Six Core Elements, integrating with electronic medical records (EMR) when possible.

3 ORIENTATION TO ADULT PRACTICE

- Identify and list adult clinicians within your practice interested in caring for young adults.
- Establish a process to welcome and orient new young adults into practice, including a description of available services.
- Provide young adult-friendly online or written Frequently Asked Questions about the practice.

4 INTEGRATION INTO ADULT PRACTICE

- Communicate with young adult's pediatric clinician(s) and arrange for consultation assistance, if needed.
- Prior to first visit, ensure receipt of transfer package, including final transition readiness assessment, plan of care with transition goals and prioritized actions, medical summary and emergency care plan, and, if needed, legal documents, condition fact sheet, and additional clinical records.
- Make pre-visit appointment reminder welcoming new young adult and identifying any special needs and preferences.

5 INITIAL VISITS

- Prepare for initial visit by reviewing transfer package with appropriate team members.
- Address any concerns young adult has about transferring to adult care and take into account any cultural preferences.
- Clarify an adult approach to care (shared decision-making, privacy and consent, access to information), adherence to care, preferred methods of communication, and health literacy needs.
- Conduct self-care skills assessment if not recently completed and discuss their needs for self-care and how to use health care services.
- Offer education and resources on needed skills identified through the self-care skills assessment.
- Review young adult's health priorities as part of their plan of care.
- Update and share with young adult their medical summary and emergency care plan.

6 ONGOING CARE

- Communicate with pediatric practice confirming completion of transfer into adult practice and consult with pediatric clinician(s), as needed.
- Assist young adult in connecting with adult specialists, as needed, and provide linkages to insurance resources, self-care management information, and community support services.
- Obtain consent from young adult for release of medical information.
- Continue with ongoing care management tailored to each young adult and their cultural preferences.
- Elicit anonymous feedback from young adult on their experience with the transition process.
- Build ongoing and collaborative partnerships with other primary and specialty care clinicians.



Sample Transition and Care Policy/Guide

[Adult Practice Name] welcomes you to our practice. We want you to have high quality care that meets your unique needs, including any special health care needs.

We put you in the center of your own health care. The doctor is your partner in meeting your health goals. We will keep all details about your care private. By law, you are an adult at age 18. We will only discuss your health information with others if you agree. Some young adults choose to involve their parents/caregivers or others in their health care choices. To allow your doctor to share information with them, consent is required. We have these forms at our practice. For young adults who have a condition that limits them from making health care choices, the office will share with parents/caregivers options for how to support decision-making. For young adults who are not able to consent, we will need a legal document that describes the person's decision-making needs.

We ask that new young adults joining our practice send a medical record from their past doctor(s) before the first visit with us. Having your information before you come for the first time helps us be sure we don't miss any details. This will make the experience better for you. We make every effort to work with your past doctor(s) so the move goes well for you. We will help you find community resources and specialty care, if needed.

Your health matters to us, and we look forward to having you join us. If you have any questions, please feel free to contact us.



Sample Individual Transition Flow Sheet

Preferred name _____ Legal name _____ Date of birth _____

Primary diagnosis _____ Social/Medical complexity information _____

WELCOME AND ORIENTATION

Contacted young adult before first visit to welcome and answer questions _____
Date

Transfer package received from pediatric clinician including: _____
Date

- Transfer letter, including date of transfer of care
- Final transition readiness assessment
- Plan of care, including transition goals and prioritized actions
- Medical summary and emergency care plan
- Guardianship or health proxy documents, if needed
- Condition fact sheet, if needed
- Additional clinician records, if needed

Orientation materials shared with young adult _____
Date

Transition and care policy/guide shared/discussed with young adult _____
Date

ADULT MODEL OF CARE

Discussed changes in decision-making, consent, and privacy (e.g., medical records) in an adult model of care _____
Date

Discussed legal options for supported decision-making, if needed _____
Date

SELF-CARE SKILLS ASSESSMENT

Conducted self-care skills assessment _____
Date Date Date

PLAN OF CARE/MEDICAL SUMMARY AND EMERGENCY CARE PLAN

Updated and shared the medical summary and emergency care plan _____
Date Date Date

Included self-care goals and prioritized actions in young adult's plan of care _____
Date Date Date

Updated and shared the plan of care, if needed _____
Date Date Date

Discussed needed self-care skills _____
Date Date Date

ONGOING CARE

Communicated with pediatric clinician to confirm transfer of care and arrange for consultation, if needed _____
Date

Arranged for specialty consultation, if needed _____
Date

Elicited anonymous feedback from young adult about the HCT supports received while transitioning to adult care _____
Date

Sample Transition Registry

A transition registry can be used to track and monitor young adults as they integrate into adult care. This sample registry can be customized as needed. A registry can be on paper, an Excel spreadsheet (see below), or — if possible — integrated into the electronic medical record.

Name	DOB	Age	Primary Diagnosis	First Appt	Next Scheduled Appt	Communicated with Pediatric Clinician	Transfer Package Received	Contacted YA Before First Visit	HCT Policy/ Guide Shared with YA	Self-Care Skills Assessment Conducted	Self-Care Skills Education/ Counseling Provided	Updated HCT Plan of Care Shared with YA	Updated Medical Summary and Emergency Care Plan Shared with YA	Age 18 Privacy and Consent Changes Discussed	Supported Decision-Making Discussed (If Needed)	Feedback About HCT From YA
(Instructions)				(Date or Blank)	(Date or Blank)	(Yes or Blank)	(Yes or Blank)	(Yes or Blank)	(Yes or Blank)	(Date or Blank)	(Date or Blank)	(Date or Blank)	(Date or Blank)	(Date or Blank)	(Date or Blank)	(Yes or Blank)
Mary Smith	07/04/01	18 Y	Asthma	01/02/20	12/01/20	Yes	Yes	Yes	Yes	01/02/20	01/02/20			01/02/20	01/02/20	Yes
Billy Jones	09/02/01	18 Y	Anxiety	04/01/19		Yes	Yes	Yes	Yes							
Susan Cue	12/25/99	20 Y	Asthma	04/01/18	03/01/20	Yes	Yes	Yes	Yes							
Terrence Train	01/17/99	21 Y	Epilepsy	01/10/20	07/15/20	Yes	Yes	Yes	Yes	01/10/20	01/10/20				01/10/20	Yes
Devin Carn	06/17/98	21 Y	Diabetes	01/21/19												
David Crockett	08/18/97	22 Y	HIV	03/01/20	06/01/20	Yes	Yes	Yes	Yes	03/01/20	03/01/20	03/01/20	03/01/20		03/01/20	Yes
Tom Sawyer	04/02/01	18 Y	Spina bifida	03/01/19	03/01/20											
Jen Lawrence	01/03/95	25 Y	Epilepsy	04/01/19	04/15/20											
Sasha Jones	02/12/94	26 Y	Autism	03/01/17												
Enrique Montoya	02/03/01	19 Y	Diabetes	12/01/19		Yes	Yes	Yes	Yes	12/01/19	12/01/19	12/01/19	12/01/19			

HCT - health care transition, YA - young adult

Sample Welcome and Orientation of New Young Adults

[Adult Practice Name] is pleased to welcome you into our practice. Our practice places young adults in the center of their own health care. This means that our doctors do not discuss your care with anyone unless you ask that we do. We understand that some young adults involve parents/caregivers or others in their health care choices. To allow others to be involved in your health care choices, you will need to complete a signed consent form. These forms are available at the practice. For young adults unable to provide consent, we will need legal forms about their decision-making needs.

At our practice, you have the right to:

- Be treated in a caring way
- Have things explained in a way that you understand
- Make your own health choices
- Talk to your doctor alone
- Have access to your medical information

In turn, make sure to:

- Keep appointments or cancel them in advance
- Tell us about your current symptoms and health history to help us treat you
- Ask questions about your care
- Follow treatment plans that you develop with your doctor
- Know what your insurance covers

Below is a list of frequently asked questions and answers about our practice. If you have a question that is not listed below, feel free to ask any of our staff. We look forward to having you in our practice.

- Are health services confidential?
- What services does the practice provide (including preventive, sick and chronic care, and, if offered, sexual health, mental and behavioral health, wellness programs, and other specialty care)?
- Where is the office located (including map and nearest public transportation)?
- What doctors are available to care for young adults?
- What are the office hours (including walk-in options, if available)?
- Are there after-hours call-in options?
- What if I need to refill my medicines?
- How do I access my medical record?
- Do you share an after-visit summary with me?
- How do I contact my doctor (e.g., by text, phone, or email)?
- How do I make, change, or cancel an appointment?
- What insurance is accepted?
- What should I bring for my first appointment?
- What resources are available to help me learn about wellness and self-care (e.g., nutrition and fitness classes, support groups, special apps or websites, local community resources)?



Sample Plan of Care

This sample plan of care is created jointly with the young adult to set goals and outline a plan of action that combines health and personal goals. Information from the self-care skills assessment can be used to develop goals. The plan of care should be updated often.

Preferred name

Legal name

Date of birth

Primary diagnosis

Secondary diagnosis

WHAT MATTERS MOST TO YOU AS A YOUNG ADULT? HOW CAN LEARNING MORE ABOUT YOUR HEALTH NEEDS AND LEARNING HOW TO USE HEALTH CARE SUPPORT YOUR GOALS?

Young Adult's Prioritized Goals	Transition Issues or Concerns	Actions	Person Responsible	Target Date	Date Completed

Clinician/Care staff name

Date plan created/Updated

Clinician/Care staff contact information

Clinician/Care staff signature

Young adult signature



Sample Medical Summary and Emergency Care Plan

This document should be shared with the young adult.
Attach the immunization record to this form.

CONTACT INFORMATION

Preferred name

Legal name

Date of birth

Preferred language

Address

Cell phone/Home phone

Best time to reach

Email

Best way to reach (text, phone, email)

Health insurance and/or plan

Group and ID numbers

PLEASE SOME SPECIAL INFORMATION THAT THE YOUNG ADULT WANTS THEIR NEW HEALTH CARE CLINICIAN TO KNOW (e.g., favorite hobby).

EMERGENCY CARE PLAN

Limited decision-making legal documents available, if needed

Disaster preparedness plan completed

Emergency contact

Relationship

Phone

Preferred emergency care location

Common Emergent Presenting Problems	Suggested Tests	Treatment Considerations

Sample Medical Summary and Emergency Care Plan

(Continued)

ALLERGIES AND PROCEDURES TO BE AVOIDED

Allergies	Reactions

To Be Avoided	Why?
<input type="checkbox"/> Medical procedures	
<input type="checkbox"/> Medications	

DIAGNOSES AND CURRENT PROBLEMS

Problem	Details and Recommendations
<input type="checkbox"/> Primary Diagnosis	
<input type="checkbox"/> Secondary Diagnosis	
<input type="checkbox"/> Behavioral	
<input type="checkbox"/> Communication	
<input type="checkbox"/> Feeding & Swallowing	
<input type="checkbox"/> Hearing/Vision	
<input type="checkbox"/> Learning	
<input type="checkbox"/> Orthopedic/Musculoskeletal	
<input type="checkbox"/> Physical Anomalies	
<input type="checkbox"/> Respiratory	
<input type="checkbox"/> Sensory	
<input type="checkbox"/> Stamina/Fatigue	
<input type="checkbox"/> Other	

MEDICATIONS

Medications	Dose	Frequency	Medications	Dose	Frequency

Sample Medical Summary and Emergency Care Plan (Continued)

HEALTH CARE CLINICIANS

Clinician's name _____ Primary/(Sub)specialty _____

Clinic or Hospital _____ Phone _____ Fax _____

Clinician's name _____ Primary/(Sub)specialty _____

Clinic or Hospital _____ Phone _____ Fax _____

PRIOR SURGERIES, PROCEDURES, AND HOSPITALIZATIONS

Date _____ Surgery/Procedure/Hospitalization _____

Date _____ Surgery/Procedure/Hospitalization _____

BASELINE

Vital Signs: *Height* _____ *Weight* _____ *RR* _____ *HR* _____ *BP* _____

Neurological status _____

MOST RECENT LABS AND RADIOLOGY

Test _____ Result _____ Date _____

Test _____ Result _____ Date _____

Test _____ Result _____ Date _____

EQUIPMENT, APPLIANCES, AND ASSISTIVE TECHNOLOGY

- Gastrostomy
- Tracheostomy
- Suctions
- Nebulizer
- Communication Device
- Adaptive Seating

- Wheelchair
- Orthotics
- Crutches
- Walker
- Other(s): _____

- Monitors:
- Apnea
 - O₂
 - Cardiac
 - Glucose

Sample Medical Summary and Emergency Care Plan (Continued)

SCHOOL AND COMMUNITY INFORMATION

<i>Agency/School</i>	<i>Contact person</i>	<i>Phone</i>
<i>Agency/School</i>	<i>Contact person</i>	<i>Phone</i>
<i>Agency/School</i>	<i>Contact person</i>	<i>Phone</i>

IMPORTANT NEXT STEPS

Next step(s)

Next appointment(s)

Young adult signature *Date*

Print name *Phone*

Clinician/Care staff signature *Date*

Print name *Phone*

Sample Self-Care Skills Assessment for Young Adults

Please fill out this form to help us see what you already know about your health, how to use health care, and the areas you want to learn more about. If you need help with this form, please ask your parent/caregiver or doctor.

Preferred name _____ Legal name _____ Date of birth _____ Today's date _____

SELF-CARE IMPORTANCE & CONFIDENCE *Please circle the number that best describes how you feel now.*

How important is it to you to manage your own health care?
 0 | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10
 not _____ very

How confident do you feel about your ability to manage your own health care?
 0 | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10
 not _____ very

MY HEALTH & HEALTH CARE *Please check the answer that best applies now.*

	NO	I WANT TO LEARN	YES
I can explain my health needs to others.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I know how to ask questions when I do not understand what my doctor says.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I know my allergies to medicines.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I know my family medical history.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I know when and how to get emergency care.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I know where to get medical care when the doctor's office is closed.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I carry important health information with me every day (e.g., insurance card, emergency contact information).	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I know I have full privacy in my health care at age 18.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I know I have to sign a form if I want others at my visit and to allow them to see my medical records.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I know at least one other person who will support me with my health needs.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I know how to find my doctor's phone number.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I know how to make and cancel my own doctor appointments.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I have a way to get to my doctor's office.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I know how to get a summary of my medical information (e.g., online portal).	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I know how to fill out medical forms.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I know how to get a referral if I need it.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I know what health insurance I have.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I know what to do to keep my health insurance.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

MY MEDICINES *If you do not take any medicines, please skip this section.*

I know my own medicines.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I know when I need to take my medicines without someone telling me.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I know how to refill my medicines if and when I need to.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

WHICH OF THE SKILLS LISTED ABOVE DO YOU MOST WANT TO WORK ON?



How to Score the Self-Care Skills Assessment for Young Adults *(For Office Use Only)*

The purpose of the self-care skills assessment is to begin a discussion with young adults about health-related skills. Scoring is optional and can be used to follow individual progress on gaining these skills, not to predict successful outcomes.

This scoring sheet can be filled out to score a young adult’s completed self-care skills assessment or it can be used as a scoring guide to refer to when marking the score on their completed assessment.

Each response can be converted to a score of 0 (No), 1 (I want to learn), or 2 (Yes). Because not all young adults are taking medicines, numbers in “My Health & Health Care” and “My Medicines” should be calculated separately.

MY HEALTH & HEALTH CARE <i>Please check the answer that best applies now.</i>	NO	I WANT TO LEARN	YES
I can explain my health needs to others.	0	1	2
I know how to ask questions when I do not understand what my doctor says.	0	1	2
I know my allergies to medicines.	0	1	2
I know my family medical history.	0	1	2
I know when and how to get emergency care.	0	1	2
I know where to get medical care when the doctor’s office is closed.	0	1	2
I carry important health information with me every day (e.g., insurance card, emergency contact information).	0	1	2
I know I have full privacy in my health care at age 18.	0	1	2
I know I have to sign a form if I want others at my visit and to allow them to see my medical records.	0	1	2
I know at least one other person who will support me with my health needs.	0	1	2
I know how to find my doctor’s phone number.	0	1	2
I know how to make and cancel my own doctor appointments.	0	1	2
I have a way to get to my doctor’s office.	0	1	2
I know how to get a summary of my medical information (e.g., online portal).	0	1	2
I know how to fill out medical forms.	0	1	2
I know how to get a referral if I need it.	0	1	2
I know what health insurance I have.	0	1	2
I know what to do to keep my health insurance.	0	1	2
MY MEDICINES <i>If you do not take any medicines, please skip this section.</i>			
I know my own medicines.	0	1	2
I know when I need to take my medicines without someone telling me.	0	1	2
I know how to refill my medicines if and when I need to.	0	1	2

My Health & Health Care Total Score: _____ /36

My Medicines Total Score: _____ /6

Sample Content for Initial Visits with Young Adults

These are suggestions of content to be covered during the first three visits with new young adults. Ideally, up to three of these points should be discussed at each visit. When discussing these points, make sure to explain information in a way that the young adult can understand, and ask them to let you know if something is not clear or if they have other questions about starting in your practice.

Acknowledge to the young adult:

- You have received/read their records and have communicated with their prior clinician and want to ask additional questions to understand their health needs or concerns more completely.
- You understand that making the change from their pediatric practice to a new adult practice can be stressful, and you want to discuss their concerns.

Discuss with the young adult:

- How they can contact you and the office with questions (e.g., text, email, or phone) and what they should do if the office is closed and they have an urgent health need.
- The office FAQs, including services provided (e.g., sexual and behavioral health) and office hours (e.g., walk-in options).
- Goals for the clinician/young adult relationship and the importance of getting regular feedback and input about their care.

Explain to the young adult:

- All visits and their medical records are confidential; they make their own choices about their health care and are seen alone unless they want to give permission for their parent/caregiver or others to be present at the visit and/or to see their medical record.
- How they can access their medical records.
- The office policy about keeping, canceling, and rescheduling appointments.

Sample Health Care Transition Feedback Survey for Young Adults

This is a survey about your experience with your new adult doctor or other health care provider. Your answers will help us improve our health care transition process. Your name will not be linked to your answers.

DID YOUR ADULT DOCTOR OR OTHER HEALTH CARE PROVIDER...	YES	NO
<i>Please check the answer that <u>best</u> fits at this time.</i>		
Explain the transition process in a way that you could understand?	<input type="checkbox"/>	<input type="checkbox"/>
Address any of your concerns about your move to a new practice/doctor?	<input type="checkbox"/>	<input type="checkbox"/>
Give you guidance about their approach to accepting and partnering with new young adults?	<input type="checkbox"/>	<input type="checkbox"/>
Provide written or online information describing their hours and services?	<input type="checkbox"/>	<input type="checkbox"/>
Explain the changes that happen in health care starting at age 18 (e.g., changes in privacy, consent, access to health records, or making decisions)?	<input type="checkbox"/>	<input type="checkbox"/>
Help you gain skills to manage your own health and health care (e.g., understanding current health needs, knowing what to do in a medical emergency, taking medicines)?	<input type="checkbox"/>	<input type="checkbox"/>
Help you make a plan to meet your health goals?	<input type="checkbox"/>	<input type="checkbox"/>
Update and share your medical summary with you?	<input type="checkbox"/>	<input type="checkbox"/>
Explain how to reach the office online or by phone for medical information, test results, medical records, or appointment information?	<input type="checkbox"/>	<input type="checkbox"/>
Advise you to keep your emergency contact and medical information with you at all times (e.g., in your phone or wallet)?	<input type="checkbox"/>	<input type="checkbox"/>
Help you find adult specialists, if needed?	<input type="checkbox"/>	<input type="checkbox"/>
Help you find information about health insurance options, if needed?	<input type="checkbox"/>	<input type="checkbox"/>

Overall, how satisfied are you with your experience with your adult doctor or other health care provider?

- Very
 Somewhat
 Not at all

Do you have any ideas for your doctor or other health care provider about welcoming new young adults into their practice?
