

Healthcare Transition

Frequently asked questions answered!

1. What is transition?

Healthcare transition is the purposeful planned process of empowering and supporting children and young people with long-term conditions when moving from children's centred services to an adult orientated service. The process addresses the medical, psychosocial and educational/vocational needs of young people.

2. What is the age range for transition?

In LTHT transition starts around 11 years old and continues until the young person is firmly engaged within the receiving adult service up to approximately 25 years of age.

3. Do we need joint clinics with adult teams?

Some services in LTHT have joint or transition clinics which they find very useful but you don't need to have joint clinics to deliver good transitional care to young people and their families.

4. Who needs to lead transition?

Anyone can take a lead role in coordination of transition within the service. For young people it is helpful if it is someone who has the most contact with them and who they can have open and honest communication with. This could be a specialist nurse, doctor, youth worker, physio, OT etc.

5. What documentation do we need to use?

In LTHT we use the Ready Steady Go (RSG) and Hello documentation to assess the young person and parent's level of knowledge about their care, condition and medications but also to identify areas of need that could be addressed. From the documented RSG assessment a transition plan should be completed and placed in the notes with a copy being given to the young person. It is important that plans are made alongside the young person reflecting their thoughts ideas and aspirations.

6. Do Young People have to be seen alone for clinic appointments?

Young people should be given the opportunity to be able to talk to professionals without a parent or carer present however this should not be mandated, as for some young people this can create added pressure at a difficult time in their lives.

7. What if they are not ready to move at 16yrs?

Good transition that starts at around 11 years should mean that most young people will be ready to move to the young adult or adult service at about 16 years of age however for exceptional reasons some may not. Following the Go assessment if a young person is deemed to be unable to move to the receiving services this should be recorded in the notes communicated to the MDT and discussed at governance. The young person's details should be placed on the transition risk register and the transition lead informed. The young person would continue to be supported and monitored until they move and are fully engaged with the receiving service.

8. Does a young person still need transition if their care is transferred to the GP?

Yes.

9. Does a young person still need transition if they keep the same consultant?

Yes.

10. What do we do if we don't have enough staff or time?

Providing a transition programme for young people is more about the way we communicate with them, to assess their knowledge in our clinical conversations rather than telling them what is happening we are including them in decision making. Planning and preparing young people from an early age should mean they are less resource intensive in the young adult and adult services, as they are more engaged with services and more able to self-manage their condition as much as possible.

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