



Healthcare Provider Guidelines - Transitioning Independent Youth to Adult Healthcare

This guideline identifies key tasks that healthcare providers can do to help youth and their family prepare for adult healthcare.
Each age level lists new tasks that would be done in addition to the items in the previous age.

Note: Not all tasks are applicable to everyone. Unless denoted as a time sensitive task*, use age as a guideline only.

	At around ages 12-14 yrs	At around ages 14-16 yrs	At around ages 16-17 yrs	At around age 17+ yrs
To Discuss:	<ul style="list-style-type: none"> <input type="checkbox"/> Inform youth and family about transitioning to adult care at 18 - <i>Transition Roadmap</i> <input type="checkbox"/> Transition tools and resources <input type="checkbox"/> Lifestyle choices that could impact health and/or medical condition at each visit (i.e. diet, exercise, mental health, smoking, sexuality, etc.) <input type="checkbox"/> Finding a family doctor (at each visit until youth has one) 	<ul style="list-style-type: none"> <input type="checkbox"/> How medical condition can affect future independence (i.e. ability to drive, education, career) <input type="checkbox"/> How medications can react with other medications, street drugs and alcohol <input type="checkbox"/> Confidentiality, informed consent, and patient rights at each visit <input type="checkbox"/> Community resources that support transition to adulthood <input type="checkbox"/> Keeping track of health information 	<ul style="list-style-type: none"> <input type="checkbox"/> The differences between pediatric and adult care for your clinic <input type="checkbox"/> Adult Home Care – Self-Managed Care (SMC) versus Vendor Services <input type="checkbox"/> Adult Funding* i.e. Assured Income for the Severely Handicapped (AISH) <input type="checkbox"/> Updating any medical equipment <input type="checkbox"/> Post secondary education/ career/ programs and documents required for accessibility services 	<ul style="list-style-type: none"> <input type="checkbox"/> Where care is being transferred, the process and contact info <input type="checkbox"/> Healthcare options between youth's last pediatric and first adult appointments <input type="checkbox"/> Advance Care Planning <input type="checkbox"/> Medical and dental insurance* coverage after youth turns 18 <input type="checkbox"/> Supported Decision-Making option available through Adult Guardianship & Trusteeship Act
To Do:	<ul style="list-style-type: none"> <input type="checkbox"/> Identify transition patients (12 -18 yrs) <input type="checkbox"/> At each visit assess transition support required and refer as needed (i.e. translator, allied health, adolescent medicine, community resource, etc.) <input type="checkbox"/> Develop a transition plan in collaboration with youth and family <input type="checkbox"/> Document the transition plan and track progress – Transition Tracker <input type="checkbox"/> Provide transition information package 	<ul style="list-style-type: none"> <input type="checkbox"/> Review transition plan and track progress at each visit – Transition Tracker <input type="checkbox"/> Send medical reports to pediatrician and/or family doctor from each visit 	<ul style="list-style-type: none"> <input type="checkbox"/> Work with family to identify adult provider (if they have a preference) and collaborate with adult service to ensure smooth transfer of care <input type="checkbox"/> Ensure final pediatric clinic visits are booked <input type="checkbox"/> Send referral and <i>Medical Transfer Summary</i> to adult healthcare providers 	<ul style="list-style-type: none"> <input type="checkbox"/> Complete the <i>Medical Transfer Summary</i> and provide a copy to: <ul style="list-style-type: none"> <input type="checkbox"/> Youth and Parent <input type="checkbox"/> Pediatrician <input type="checkbox"/> Family doctor <input type="checkbox"/> Adult specialists <input type="checkbox"/> Confirm first adult appointment is attended <input type="checkbox"/> Follow up with youth to ask about first adult appointment <input type="checkbox"/> Discharge from clinic
Support by:	<p>Informing or reminding youth and family annually about the:</p> <ul style="list-style-type: none"> <input type="checkbox"/> Transition Readiness Checklist(s) 	<ul style="list-style-type: none"> <input type="checkbox"/> Referring youth/family to a transition workshop <input type="checkbox"/> Offering youth the choice to meet with healthcare providers on his/her own at each visit 	<ul style="list-style-type: none"> <input type="checkbox"/> Giving youth opportunities to participate in medical decision-making at each visit 	<ul style="list-style-type: none"> <input type="checkbox"/> Following up with youth/family to facilitate attachment if appointment wasn't attended