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Health Programs



2007

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**New Hampshire's Health Care
Transition Project**

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NH's Health Care Transition Project

A collaboration between Special Medical Services-Title V and NH Family Voices

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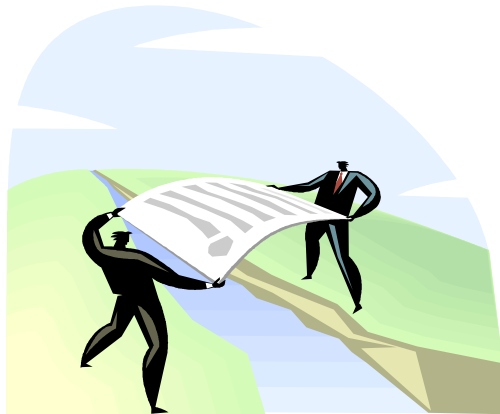
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Health Care Transition is not just a transfer of care



One
definition

Health Care Transition is the planned movement of teens/young adults with special health care needs from child-centered to adult-oriented healthcare.



What is the plan?
How does this happen?

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**A better
definition**

**Health Care Transition is a process that
prepares YSHCN to be ready to transfer
to an adult provider**

**Chronic condition
management**

Health promotion/self care

Access to resources/adult health care



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Stages of the Health Care Transition Process

- **ASSESSMENT**
READINESS of Youth and Family
TRANSITION Q/A and INTERVIEW
- **MOVING ON(Graduation)**
TRANSITION MEDICAL SUMMARY
for patient and adult provider
ADULT HEALTH CARE PLAN
ADULT PROVIDER arranged
- **PREPARATION**
TRANSITION CARE PLAN* for
patient, family and provider includes
OFFICE VISITS PLAN for provider
to highlight individual topics from
care plan
***anticipatory vs. intensive
transition services model**
- **RE-ESTABLISHMENT**
FACILITATED REFERRAL
completed with packet received by
adult provider
FIRST VISIT by patient to adult
provider



REPORT ON PATIENT STATUS IN THREE PRACTICES

Patient 1 21 yo/Down syndrome, congenital heart defect, pacemaker
Transition time period - 9 months

Patient 2 19 yo/Turner syndrome, mental health issues, recent onset DM type 1 High medical and educational needs
Transition time period - 18 months plus

Patient 3 24 yo/cong. cardiac disease/devel. issues Family was not open to the transition care plan but did work with practice to eventually transfer care to family practice within 12 months

Patient 4 20 yo/DM type 1 since age 18 mos, asthma Required intensive eval and education about DM management
Transition time period - 15 months

Patient 5 20 yo/spinal cord injury @ L5 Responded well to structure of two transition office visits
Transition time period - 11 months

Patient 6 21 yo/ADHD Too busy to make the “transition “ appointment with pediatrician, no help desired to find adult provider Still calling for med refill at 13 mos

