



## News Articles, Adolescent Health/Medicine, AAP Clinical Report

### Practical guidance for clinicians a highlight of updated joint report on transition

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The 2016 National Survey of Children's Health showed that only 15% of 12- to 17-year-olds received the support they needed in transitioning to an adult health care provider. These results remain low even with reports from the Academy and other national professional associations on improving the transition from pediatric to adult care in the medical home.

Youths, families and providers continue to experience the barriers to a smooth transfer and are looking for guidance on how to improve the transition process. As a result, the AAP - along with the American Academy of Family Physicians and American College of Physicians - have released an update of the 2011 clinical report *Supporting the Health Care Transition from Adolescence to Adulthood in the Medical Home*.

The updated report is available at <https://doi.org/10.1542/peds.2018-2587> and will be published in the November issue of *Pediatrics*.

Authored by a multidisciplinary group of pediatricians, internists, family and medicine-pediatric physicians, parents, young adults and nursing experts, the document reviews the growing transition literature since 2011. The guidance affirms the previous age-based algorithmic format, which begins with action steps at age 12 and extends through the transfer of care to an adult medical home.

While focusing on health care transition for *all* youths, the report also addresses the needs of special populations, such as those with medical complexity, intellectual and developmental disabilities, and behavioral health challenges. The report numerates principles of health care transition, including individual differences and complexities of youths and young adults that affect the transition process and a need for a distinct population health approach for these patients.

#### Structured approach beneficial

New data show that a structured transition approach significantly improves population health outcomes related to the following:

- adherence to care (self-care skills, quality of life, self-reported health),
- patient satisfaction (reduction in barriers to care) and
- utilization (decrease in time between last pediatric and first adult visit, increase in adult visits, decrease in emergency department visits and hospitalizations).

The report describes an evidence-informed, structured process with practical tools called the Six Core Elements of Health Care Transition that guide providers on how to offer transition services using the following approach:

- Transition/care policy
- Tracking and monitoring
- Transition readiness/orientation to adult practice
- Transition planning/integration into adult approach to care/practice
- Transfer of care/initial visit
- Transition completion/ongoing care

This framework has been shown to improve health care transition processes in primary care, subspecialty care,



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school-based health clinics and Medicaid managed care. In addition, the approach encompasses all three components for this critical transition: preparation, transfer and integration into adult health care.

Three versions of transition "packages" are outlined in the Six Core Elements approach: transitioning youths to an adult health care provider, transitioning to an adult approach to care without changing providers, and integrating young adults into adult health care. The packages also clarify the roles of pediatric, family medicine, medicine-pediatrics and adult providers in the process. Practices can customize all of the free tools based on patient needs and available resources.

The report concludes with broad recommendations for the future regarding infrastructure, education and training, payment and research.

*Dr. White, a lead author of the report, co-chaired the Transitions Clinical Report Revision Authoring Group. She is co-director of Got Transition: Center for Health Care Transition Improvement.*

### Resources

- [National Center for Medical Home Implementation](#)
- [Clinician toolkits, a coding and reimbursement tip sheet and other resources from the federally funded national center on health care transition](#)