Children's Hospital of Chicago®

Final transition of youth to adult hemophilia (7) Ann & Robert H. Lurie and thrombophilia treatment centera single center transition care project

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Introduction

Youth with chronic health conditions including bleeding and clotting disorders face barriers to a successful transition from a pediatric to an adult healthcare system. Barriers range from individual challenges like difficulty paying for parking, to organizational barriers such as complex phone trees and long hold times. In the past three years (2012-2015), 24 youth from our center successfully transferred their care to adult Hematology providers; however, 25% were at least initially unsuccessful. Thus, we piloted a project to aid our youth in this final step of the transition process, transfer to adult care.

Objectives

The objectives of this pilot project were to:

- 1) Facilitate the final step in the transition process, transfer of care from a pediatric to an adult Hematologist.
- 2) Encourage bi-directional conversation regarding transfer of care among pediatric and adult Hematology providers.

Methods

This is a single center pilot project. Youth were identified via our database and approached for participation between July 2015-July 2016. The youth were provided additional supports for their final step in the transition. Each youth completed a Likert-type questionnaire at the end of the visit with the adult provider to help determine the strengths and barriers to a successful transition process. The adult Hematology providers were also given questionnaires to provide their feedback.

Interventional tools For Youth	Interventional tools For Adult Providers
Assistance calling to make the first adult appointment (in person or conference call)	Welcome letter introducing this program and the supports provided to youth and provider sent to adult Hematologist
Appointment reminders (via shone and mail)	Pertinent medical information communicated to adult Hematologist prior to visit
Transportation vouchers and discussion of logistics for the irst appointment	Full medical record sent to adult provider's office via medical records
Assistance completing medical ecords forms	Pertinent medical summary letters brought to the first appointment by pediatric provider
Portfolio given for organizing new information	Pediatric team member present for at least part of the first visit to answer questions
Accompaniment to the first adult Hematology appointment	Pediatric provider contact information sheet given for follow up questions
Celebratory coffee and treat at Starbucks	Celebratory coffee and treat from Starbucks
515 Starbucks gift card for completing questionnaire	\$15 Starbucks gift card for completing questionnaire

Results

- ---Youth reported that having a pediatric provider call with them to schedule their first adult Hematology appointment was a significantly beneficial support provided through this project (87% responded "Strongly Agree")
- ---Providers responded the most important aspect of this project was receiving the patient's medical information (75% responded "Strongly Agree").
- ---75% of adult providers reported they "Strongly Agree" this project has increased the likelihood they will contact the pediatric provider in the future.
- ---100% of chart reviews thus far show all youth having transferred care through this project have had successful transitions as evidenced by no pediatric Hematology encounters in their medical records (telephone calls requesting refills, return visits, or ED visits related to their bleeding/clotting disorder).

Conclusions

- ---Successful transition from pediatric to adult care is a significant clinical issue that requires increased efforts in the final step of the process.
- ---Limitations: 1.Small sample size. 2. Participation only offered to youth transitioning to one adult center (Northwestern Memorial Hospital).
- ---Based on our results, we speculate that youth likely encounter significant barriers when trying to schedule the first adult Hematology appointment, and adult Hematology providers often do not receive medical information in an organized or timely manner for the youth's first appointment.
- ---Further research to refine quality initiative interventions regarding this final step of the transition process and monitor results over longer periods of time will be beneficial.

Youth identified and elicited for project Youth assisted in scheduling first appointment Anticipatory and logistical guidance given

Appointment reminders sent Transportation vouchers provided Medical information sent and communicated

Celebration of the transition at Starbuck's Portfolio given to organize new information Youth accompanied to first appointment

References:

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Poster Category: Multidisciplinary-Capacity Building

