Slido 1

What transition tool do you currently use?





The Leeds Teaching Hospitals NHS Trust

Alder Hey Children's NHS Foundation Trust

University Hospitals Birmingham NHS Foundation Trust

Imperial College Healthcare

Somerset NHS Foundation Trust

An introduction to Ready Steady Go Hello

Nigel Mills Burdett RNA (London)





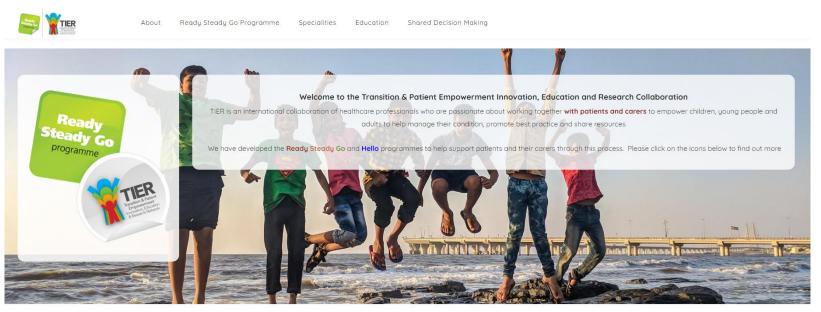


- Series of questionnaires/statements to prompt discussions
- Used to develop individualised Transition Plan
- Free!
- Online or paper
- Excellent resources
- Widely used
- Suitable for Paeds and adult services





<u>TIER Network - TIER Homepage</u> (readysteadygo.net)



Ready Steady Go Programme



Introduction booklet

NHS

Transition: moving into adult care

Information for young people and familie



for Nursing

What is transition?

In healthcare, we use the word "transition" to describe the process of preparing, planning and moving from children's to adult services.

Transition is a gradual process that gives you, and everyone involved in your care, time to get you ready to move to adult services and discuss what your healthcare needs as an adult are likely to be.

This includes deciding which services are best for you and where you will receive that care.

Transition is about making plans with you - and not about you.

We understand that moving away from a team of doctors and nurses that you have been with for many years can be scary but hopefully, by getting involved in the transition process, you will feel more confident and happier about the move.

Why do I have to move?

As you get older, you will find that some of the things you want to discuss or some of the care you might need is not properly provided by our children's services.

Adult services are used to dealing with all sorts of issues that may arise, such as higher education, travelling, careers and sex.

You may also find that you would prefer to be seen in a more grown-up environment, rather than the usual children's departments or wards.

When do I have to move?

There is no exact time that is right for everyone.

The purpose of this leaflet is to get you thinking about moving on and preparing for it.

Your doctors and nurses may have an idea about when they feel that you might be ready but it is important that you are involved in that decision.

Can I choose where I move to?

Part of the transition process should be helping you to look at where your ongoing healthcare needs can best be met and how this will fit in with your future plans.

Your consultant or family doctor (GP) will be able to give you information to help you make the best decision.

If there is a choice of places, it is a good idea to visit all of them and then decide which is best for you.

Who can help me get ready?

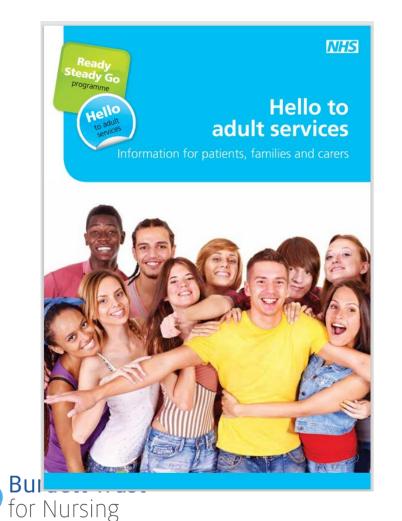
Your healthcare team will be able to give you information and support about moving on.

They can help you get ready for adult services by:

- Teaching you about your condition or illness, its treatment and any possible side effects
- When you are ready, seeing you on your own for part of the clinic appointment and working towards seeing you on your own for the whole clinic appointment
- Making sure you know when to get help and who to contact in an emergency
- Helping you understand how your condition or illness might affect your future education and career plans
- Making sure you know about the support networks available
- Making sure you understand the importance of a healthy lifestyle, including exercise, diet, smoking and sex.



Hello



We understand that learning you have a long-term condition can cause anxiety and be overwhelming.

We have developed the 'Hello to adult services' programme to help support you and help address any concerns you have.

Who is it for? You, if you have been diagnosed with a long-term condition.

What is it? A programme to help you gain knowledge and skills to manage your condition.

Why?

So you have the knowledge and confidence to manage your condition and are supported through the process.

How?

Your team will help you:

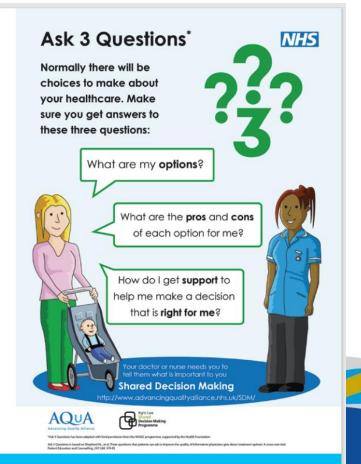
manage your condition

· learn about your treatment

 gain the confidence to ask questions and be involved in decisions about your care

- know when to get help and who to contact in an emergency
- stay informed about any support networks available.

Talk to your team about how you feel and any questions or concerns you might have. Information about the programme can be found at www.uhs.nhs.uk/OurServices/Childhealth/ TransitiontoadultcareReadySteadyGo/Hello-to-adult-services.aspx





RSGH

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NHS

Read

The Ready Steady Go transition programme - Steady

The medical and nursing team aim to support you as you get older and help you gradually develop the confidence and skills to take charge of your own healthcare.

Filling in this questionnaire will help the team create a programme to suit you. Please answer all questions that are relevant to you and ask if you are unsure.

Name:	Da	te:		Programm
Knowledge and skills	Yes	l would like some extra advice/help with this	Comment	
KNOWLEDGE				
I understand the medical terms/words and procedures relevant to my condition				
I understand what each of my medications are for and their side effects				
I am responsible for my own medication at home				
I order and collect my repeat prescriptions and book my own appointments				
I call the hospital myself if there is a query about my condition and/or therapy				
I know what each member of the medical team can do for me				
I understand the differences between children's and adult health care				
I know about resources that offer support for young people with my condition				
SELF ADVOCACY (speaking up for yourself)				
I feel confident to be seen on my own for some/all of each clinic visit and to ask my own questions				
I understand my right to confidentiality				
I understand my role in shared decision making with the healthcare team e.g. Ask 3 Questions*				
HEALTH AND LIFESTYLE				



• 8 themes

- 35 statements
- NB-don't rely on answers-they are a gateway to discussion



Transition Plan

DATE SECTION PROGRESS NOTES/GO	DALS	NOTES		Transition	programme	
				Name:	Hospital no:	
				Address:	DOB	Ste
					Transition start date:	Pa
					School/college:	
				Home tel no:	Mobile no:	
				Email: Diagnosis:	Mobile no:	
				Target date for transfer adult serv	íces:	
				Discharge summary completed:		
				Resources:	Date:	
				Transition leaflet for young people		
				Transition leaflet for parents/care	1	
				Other (please specify) Offer copy of clinic letters	Date:	
				MDT involvement	Lane	
				Youth worker		
				Social worker		
				Psychology		
				Specialist nurse		
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				Other		
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- Used to develop an individualised Transition Plan
 - Identify with YP where they need input/support
 - Plan how to provide input/support



The Ready Steady	Go transiti	on	progra	mme - He	ello
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Please answer all questions that					programn
Name:		Dat	ie:		
Knowledge and skills		Yes	I would like some extra advice/help with this	Comment	Hel
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I order and collect my repeat press book my own appointments	riptions and				
I know who to contact if I have an my health					
I call the hospital myself if there is my condition or treatment					
I know about resources for young with my condition					
SELF ADVOCACY (speaking up					
I feel confident to be seen on my o					
I understand my right to confident I understand my role in shared dec with the healthcare team e.g. Ask	ision making				
HEALTH AND LIFESTYLE					
I exercise regularly/have an active I	festyle				
I understand the effect of smoking alcohol on my condition and gene					
I understand what appropriate eat my general health	ing means for				
I am aware that my condition can and function e.g fatigue, sexual fu					
I know where and how I can acces accurate information about sexual					
I understand the implications of m drugs on pregnancy/parenting	y condition and				

or Nursing

- Assess knowledge of YP arriving into adult service (including new referrals)
- NB-start a Transition Plan



To consider

- Sent out in advance
 - Will they remember to bring it?
- While waiting pre clinic
 - Confidentiality
- Honesty
 - Check answers
- Who keeps a copy and where?

- Time
- Transition Plan
 - Who updates?
- Relevance to patient group
- If using paper versions-cost implications
- There is no 'pass or fail'





Slido 2

On their 16th birthday YP become responsible for signing their own Consent Forms.

Do you currently give YP and their families any information <u>in advance</u> to prepare them for this?





The Leeds Teaching Hospitals NHS Trust

Alder Hey Children's

University Hospitals Birmingham

NHS

Imperial College Healthcare

Somerset NHS Foundation Trust

Growing Up Gaining Independence (GUGI)



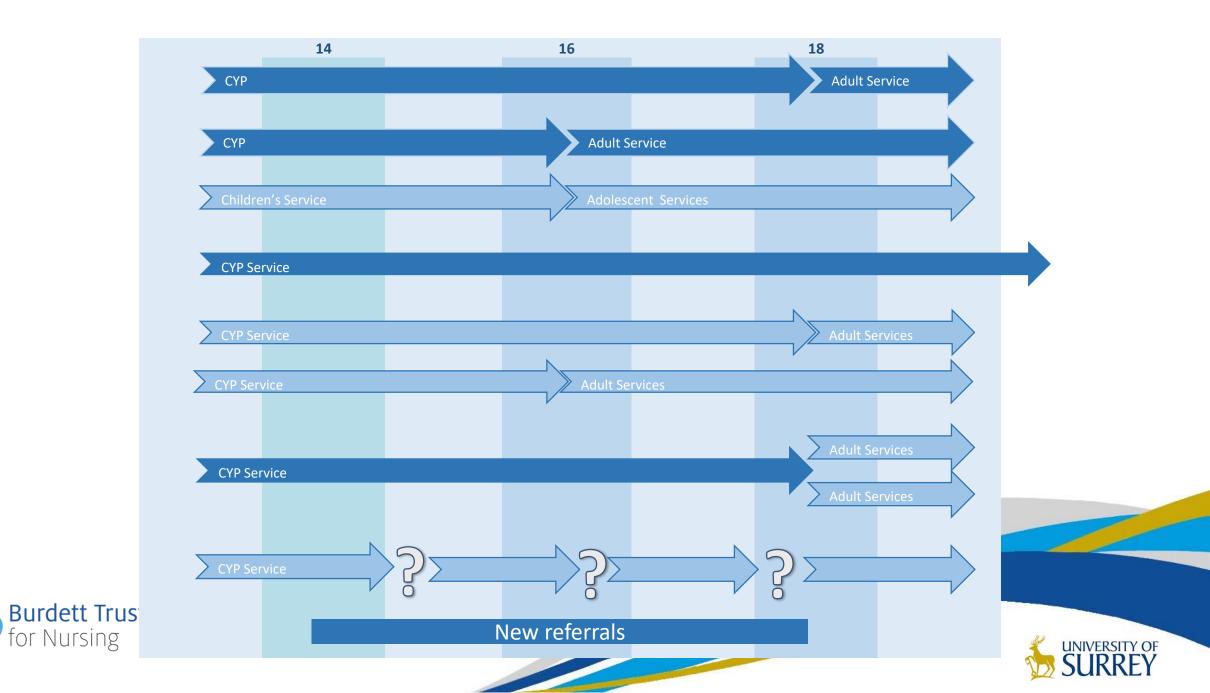


GROWING UP, GAINING INDEPENDENCE

- Simple framework to enable clinicians to encourage and support young people to develop the skills, knowledge and understanding associated with emerging adulthood, and to help prepare them for adult specialist healthcare if necessary (transition).
- Designed to work with other tools (RSG) or established good practice
- Can be used as a stand-alone tool







Considerations

- How many appointments between 14 and transfer to adult service?
 - Annual MOT type
- How much time in clinic to address RSG?
- Do we discuss MCA, consent, health communications etc before they are 16?
- Do we prepare families in advance for loss of Parental Responsibility, applying for Court of Protection Deputyship etc?





Slido 3

Where there are concerns relating to a young person's mental capacity, do you currently provide information to their families about Parental Responsibility and applying for Court of Protection Deputyship before their 18th birthday?





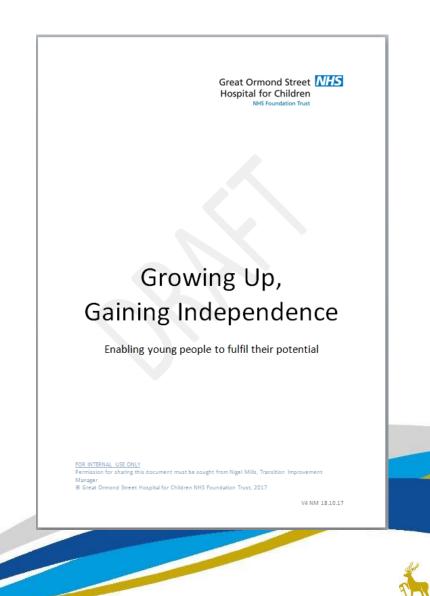
Growing Up, Gaining Independence

• 2-part strategy promotes preparation for adulthood not just to adolescent or adult services

1) Generic

2) Specialty Specific

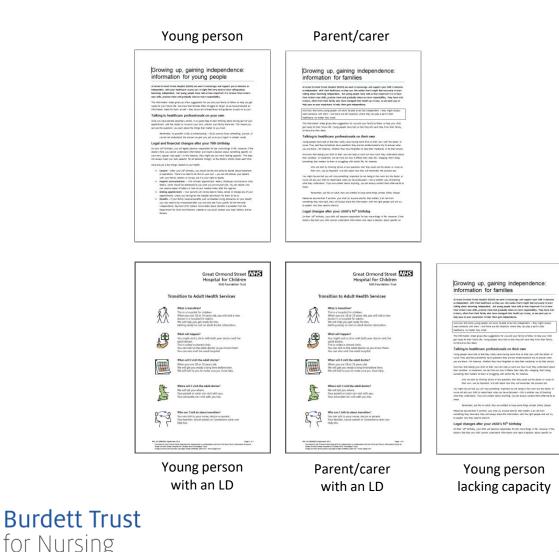
- Relevant regardless of:
 - whether or not they will transfer to adolescent or adult services
 - specialty
 - presence of a Learning Disability or Additional Needs
 - Prognosis



UNIVERSITY O



GUGI Part 1-Generic



Given at 1st appropriate appointment after 12th birthday

Young People with a Learning Disability or additional needs may need support and/or information in alternative formats to facilitate understanding.



Part One: To be completed before 16th birthday

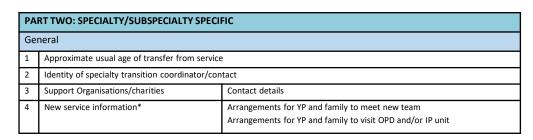
- Encourage young person to see healthcare professionals without parent/carer present
- 2. Legal and financial
- 3. Health and development
- 4. Medical History (General)
- 5. Managing appointments
- 6. Local service changes/Primary Care changes

1	Encourage young perso	n to see healthcare professionals without parent/carer present
-	Encourage young perse	Confidentiality explained
The	following domains must	started by 14 years and completed before 16 at the latest:
2	Legal and financial	Legal changes @16 years (MCA)
-		Consent/rights
		Hospital communications
		Taking ownership of health records
		Financial
		DLA/PIP
		Insurance travel/health
3	General health and	Alcohol
	development	Diet
		Drugs
		Exercise
	Mental health and well-being	
		Relationships
		Sexual Health
		Smoking (including e-cigarettes)
4	Medical History	Any injuries/ other significant illnesses
	(General)	Immunisations
		Allergies
		Significant family illnesses
5	Managing	Making
	appointments	Fitting in around college/work/holidays etc.
		Cancelling/changing
		Keeping records of
		Implications of non-attendance
		Appropriate use of 111/999/A&E/ER/GP
		If going to university or working away from home discuss
<u> </u>		benefits/negatives or registering with new GP
6	Local service changes	Age local paediatric services end
		Loss of paediatrician
		Change of community nursing team Recommend sees GP



Part two: (sub)specialty

- 1. Usual age of transfer from service
- 2. Identity of specialty transition coordinator/ contact
- 3. Support organisations
- 4. New service information
- 5. Medical history (Chronic illness/disability)
- 6. Medication knowledge/ medical equipment
- 7. Support Organisations/ charities



5	Knowledge of medical history relating to	Investigations, tests & results
	chronic illness/disability	Treatments (including future treatment options)
		Implications for:
		Life-style choices
		Career options
		Family planning
6	Medication knowledge/ medical equipment	What/when/why (if appropriate)
		Side effects/potential interactions
		Conception/contraception/alcohol etc.
		Arranging repeat prescriptions
		How/when to order
7	Dates	Last appointment with CYP service
		1st appointment with new service (if available)
		When new service will take over care and/or become 1st point of contact





New service information

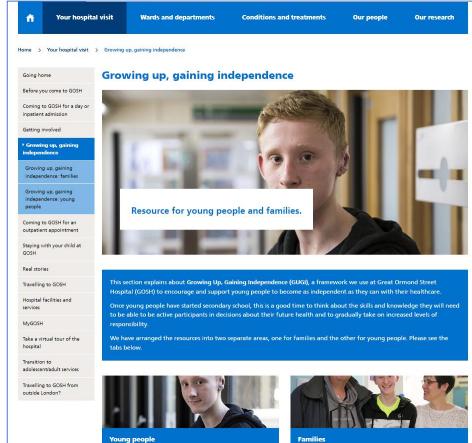
- 1. What they do
- 2. Who/how to contact
- 3. Clinics/OPD/Day-case
- 4. Inpatient admissions (if applicable)
- 5. Young person/young adult groups
- 6. LD and additional needs provision

What they do	Conditions treated by service	
Who they are	Consultants	
	Clinical Nurse Specialists	
	Allied Health Professionals	
	Administrative Team	
Who/how to contact	For appointments	
	In emergencies	
	For general queries	
	If running late for an appointment	
Clinics/OPD/Day-case	Location	
	Travel	
	Bus/rail/parking etc.	
	Available times	
	Evening/weekend clinics?	
	Procedure/process for	
	Booking in	
	Pre clinic tests (bloods etc.)	
	Who they will see in clinic (i.e. Consultant or SpR etc.)	
	Who they will see in clinic (i.e. age of other patients)	
Inpatient admissions (if	Specialty or general ward?	
applicable)	Age range of patients	
	A&E admissions?	
	Visiting hours info	
	TV/Wi-Fi access etc.	
Young person/ young adult groups	Are there any Specialty/Trust Groups available to join?	
LD and additional needs	Who to contact	
provision	How to contact	





https://www.gosh.nhs.uk/your-hospitalvisit/growing-gaining-independence/





Great Ormond Street NHS Hospital for Children

Growing Up, Gaining Independence: information for families of young people with a Learning Disability

At Great Ormond Street Hospital we encourage and support young people to become as independent with their healthcare as they can be. Some people might always need someone else to help them manage their healthcare and to make health-related decisions for them. How these decisions are made and who can make them changes as people get older.

This information sheet provides information for families about decision-making when their child is unable to make decisions for themselves once they are 16. While your child is under 18 years old you may hold Parental Responsibility for them. Anyone with Parental Responsibility can manage decisions on their child's behalf, although certain aspects of this change when your child reaches 16 years old.

What changes do I need to be aware of?

When your child reaches 16 years of age they will fall under the Mental Capacity Act. This means that they must be assumed to be able to make decisions for themselves, including health-related decisions such as giving consent for examinations, treatments and tests.

If your child is aged between 16 and 18 you will only be able to make these decisions for them if they lack the mental capacity to do so and you have Parental Responsibility for them. You may not be able to make all health-related decisions on their behalf.

What is mental capacity?

Having mental capacity means being able to use and understand information necessary to make a decision and to communicate that decision. Someone who is able to do this is said to have capacity and someone who is not able to do this is said to lack capacity.

When is capacity assessed?

Capacity is decision-specific and each decision must be considered separately. This means your child's capacity must be assessed every time a decision has to be made. Capacity can vary according to how complicated the decision to be made is. For example your child might have capacity to decide what to wear or eat, but lack capacity to make complex health-related decisions. It is possible for someone to temporarily lack capacity due to ill-health, medication or stress.

How is capacity assessed?

The Mental Capacity Acts says that someone must be able to do all of the following:

- Understand the decision that has to be made and all the information relevant to that decision
- Retain the information long enough to make the decision
- Balance the information (weigh up the pros and cons)
- Communicate their decision

If you child is unable to do any of the above they will be assessed as lacking capacity for that decision at that time.

Who assesses capacity?

When the decision involves a medical procedure or treatment the healthcare professional involved will usually assess your child's capacity and will do this by talking to you and your child.

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Any Questions?



