

# Transition et Transfert: quelques exemples à l'étranger

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Espace Maladies Rares, Maladies Chroniques et Handicap*



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# Medicine - Pediatrics Transition Care Program

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## Medicine - Pediatrics Transition Care Program

The UCLA Med-Peds Transition Care Program helps children with chronic conditions smoothly transition to adult healthcare. Program serves children (ages 12 to 25 years old) requiring either specialized medical care for complex conditions (e.g., transplant, lupus, sickle cell disease) or coordination of healthcare and community-based services.

Our services are available in our UCLA hospitals or in our outpatient office in the Peter Morton Building at 200 UCLA Medical Plaza, located on the Westwood campus.

We provide:

- Transition needs assessments and referrals
- Assistance identifying adult health providers (primary care and specialists)
- Assistance securing insurance, if eligible
- Help improving patient self-care skills
- Patient educational and vocational resources

For more information, contact Debra Lotstein, M.D., M.P.H., director of the Med-Peds Transition Care Program, [dlotstein@mednet.ucla.edu](mailto:dlotstein@mednet.ucla.edu) or call number below.

For more information, [visit our page in the Division of General Pediatrics](#) or contact us at the phone number below.

### CONTACT INFORMATION

**Telephone Number**  
(310) 312-9057



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## Transition Care

GENERAL AND COMMUNITY PEDIATRICS

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Down syndrome, spina bifida, cerebral palsy, autism, intellectual disability

### YOUTH TO ADULT TRANSITION SUPPORT CLINIC

Are you a youth age 11-22 with special health care needs like a chronic condition, illness or disability?

Do you have questions about how to prepare for your adult life?

If so, then you may benefit from the services offered by the Indiana University School of Medicine Center for Youth & Adults with Conditions of Childhood (CYACC) at Eskenazi Hospital.

CYACC provides transition consultation, education and care coordination across all diagnoses including youth with physical and/or intellectual disabilities, and/or chronic illness. Referrals are accepted from subspecialists, primary care physicians, community agencies or families themselves. Our five most frequent patient diagnoses include Down syndrome, spina bifida, cerebral palsy, autism and intellectual disability.

Our transdisciplinary team of social workers, nurses, and medicine-pediatric physicians provides clinical visits four half-days per week and care coordination during the remainder of the week. As a patient attending the clinic, you can expect to visit once per year as you make progress toward adulthood. The team will work with you to develop a portable medical summary and transition plan to help you achieve your goals.

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## Transition of Care - Adolescents and Young Adults

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**Preparing young adults for a successful transition into adult-focused care.**

## Transition Services for Emerging Adults

Children's Hospital Los Angeles offers support for adolescent and young adult patients with chronic illnesses and disabilities to prepare them for adulthood and their transition to adult-focused care. A successful transition occurs when providers, families and patients work in partnership to ensure as smooth a passage into adult life as possible and access to quality adult care.

**Our transition programs focus on empowering patients approaching adulthood with:**

- Knowledge about their conditions and how to manage them
- Skills to advocate for themselves
- Resources to help them realize social, educational and vocational goals.

Our specialists have expertise in offering age-appropriate transition support to emerging adults who will be responsible for navigating adult healthcare systems themselves and independent living.

**Core components of these programs include:**

- Coaching patients to understand their diagnosis, condition and treatment
- Provide patients with skills and support to manage their condition, adhere to treatment requirements, communicate effectively with their providers
- Understanding each patient's unique needs and abilities, and putting strategies in place to promote self-care early on
- Empowering and preparing young people to manage their own care, live independently and seek the resources they need for successful transition
- Teaching patients to advocate for themselves, navigate adult care systems and to help them become confident pursuing their adult life goals
- Supporting parents in the transition process
- Provide support and guidance to families of selected patients with complex care needs



## Services

Our transition services include programs representing multispecialty partnerships, as well as programs offered to patients in specific subspecialty clinics.

**Transition programs currently available at Children's Hospital Los Angeles include:**

- **Adolescent Transition Clinic (My VOICE)** – A partnership between Adolescent Medicine and the following subspecialty clinics. Currently, My VOICE offers transition support for patients with the following conditions:
  - Congenital Heart Disease
  - Cystic Fibrosis
  - Kidney Transplant
  - Liver Transplant
  - Heart Transplant
  - Rheumatological disorders
- **Cancer**  
Our LIFE Program offers support to our cancer survivors.
- **Cystic Fibrosis**
- **Endocrinology**  
Our LEAP Program supports patients with type 1 diabetes.
- **General Pediatrics**  
Provides support for patients with complex illnesses and disabilities.
- **Rheumatology**  
Provides support for families learning to live with rheumatological diseases.
- **Sickle Cell Disease**
- **Solid Organ Transplant Center (Heart, Liver, Kidney)**
- **Spina Bifida Clinic**

## Resources

- [Helpful websites](#)
- [Chronically Ill Students Entering College](#)

Transition resources and educational materials also are available to Children's Hospital Los Angeles patients and families at the [Family Resource Center](#).

Transition to adult health services A A 

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## Transition News

### [Congratulations 2014 RCH Graduates!](#)

Posted on [May 22, 2014](#)

On behalf of the Transition Support Service, we would like to congratulate each of the 50 young people who 'graduated' from the RCH on April 3<sup>rd</sup> 2014. We hope your new journey into the adult world is full of good health and fantastic adventures. This is the first time that such an event has been staged at the RCH and it was a great success! We were lucky to have some fantastic speakers including Professor Susan Sawyer, Director of the Centre for Adolescent Health who delivered an inspiring address to our graduates. It was also wonderful to have Professor Christine Kilpatrick, CEO of the RCH, present our graduates with their certificates.

Thank you to all families, friends and staff who provided their support on the evening. Many staff shared their personal messages for our graduates too and this was very much appreciated by all who attended.

We look forward to doing it all again next year in 2015. Watch this space!

For now, farewell and congratulations RCH graduates of 2014!

Bec Peters  
Youth Mentor  
Transition Support Service





June 2014

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# Ronald McDonald Learning Program Conference: H.E.L.P

Posted on November 7, 2013

Ronald McDonald Learning Program Conference: H.E.L.P (Health, Educators, Learners, Practitioners)

In September, the Transition Support Service team travelled to the Gold Coast to present at the Health, Educators, Learners, Practitioners conference. It was a jam packed 3 days with many informative and interesting presentations. We met psychologists, school educators, clinicians and other inspirational speakers doing amazing work to help young people with chronic health conditions from all over Australia.

The Transition Support Service do a lot of work in collaboration with the Ronald McDonald Learning Program (RMLP) so it was a great opportunity to see and celebrate some their successes. The RMLP offers an educational support package which includes up to 40 fully funded individual tutoring sessions for young people with a chronic illness/disability. This program is vital in supporting the educational needs of the young people that we work with who need that extra support due to hospital stays, procedures, appointments and sick days.