

## Youth Health Transition (YHT) Checklist and Timeline

Name: \_\_\_\_\_ Date Initiated: \_\_\_\_\_

Use clinical judgment as to which activities apply. Mark NA if item does not apply. Check <input checked="" type="checkbox"/> when item is complete.	Ages 14-15	Ages 16-18	Ages 19-21
<b>Independence</b>			
Introduce youth/family to the topic of transition and discuss clinic transition policy <ul style="list-style-type: none"> <li>Louisiana youth/family transition resources available at <a href="http://www.dhh.la.gov/cshs">www.dhh.la.gov/cshs</a></li> </ul>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Health Management - Encourage youth to take increasing responsibility for self-care <ul style="list-style-type: none"> <li>Assess youth's understanding of their health condition/medications/treatments</li> <li>MD/clinic staff meet with youth privately for part of the visit</li> <li>Encourage youth/family to complete a Transition Readiness Assessment</li> </ul>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>
<b>Transfer of Care</b>			
Discuss transfer to adult healthcare providers (age 16-19 per clinic policy) <ul style="list-style-type: none"> <li>review clinic timeline and provide adult physician referral(s)</li> <li>encourage family to schedule an appointment with identified provider prior to date of transfer</li> </ul>		<input type="checkbox"/>	<input type="checkbox"/>
Send medical record to identified adult healthcare provider prior to transfer		<input type="checkbox"/>	<input type="checkbox"/>
<b>Anticipatory Guidance - Adolescence (PCP)</b>			
Discuss safety concerns, health red flags and when calling 911 is indicated	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Discuss dental, nutrition/weight concerns	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Discuss social relationships, sexuality, mental/behavioral health	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>Family Support – Adolescence (PCP)</b>			
Assess youth's ability to make independent decisions concerning healthcare, finances, and independent living after age 18. *If supports are indicated, legal action is required for parents to maintain decision making authority. <b>Refer</b> family to Families Helping Families or CSHS Family Resource Center for resources: <ul style="list-style-type: none"> <li>tutorship information (guardianship/legal decision support options in Louisiana)</li> <li>list of area attorneys specializing in tutorship</li> </ul>	<input type="checkbox"/>	<input type="checkbox"/> *By age 17	
Discuss with youth and family future support needs and <b>refer</b> to Families Helping Families or CSHS Family Resource Center for resources: <ul style="list-style-type: none"> <li>peer support/community programs</li> <li>maintaining health insurance</li> <li>education after HS/job training/vocational rehab-LRS</li> <li>independent or supported living</li> </ul>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**Referral Contact:**

**Families Helping Families** (peer support and community resources)

**Jefferson** 504-888-9111

**Acadiana** (Lafayette) 337-984-3458

**Region 7** (Shreveport) 318-226-4541

**Crossroads** (Alexandria/Pineville) 318-641-7373

**Southeast LA** (New Orleans) 504-943-0343

**Southwest LA** (Lake Charles) 337-436-2570

**Northeast LA** (Monroe) 318-361-0487

**Greater Baton Rouge** 225-216-7474

**Bayouland** (Thibodaux) 985-447-4461

**Northshore** (Covington) 985-875-0511

**CSHS Family Resource Center – Room 2020 Children's Hospital New Orleans** – 504-896-1340

**GotTransition** – [www.GotTransition.org](http://www.GotTransition.org) (Health Care Provider and parent/youth resources)

**SmoothMovesYHT** – [www.SmoothMovesYHT.org](http://www.SmoothMovesYHT.org) (Teen transition health information website)

**Children's Special Health Services** –Youth and Family resources, TA for clinic Medical Home and Transition Programs 504-568-5055