

HEALTHCARE TRANSITION

INFOGRAPHICS BY
RARE REVOLUTION

THE CHALLENGES



In the UK, the NHS advises that the **planning of adult care services** process should begin **when the child is 13 or 14**, and should be **tailored to fit the needs of the child**.¹



Medical

When **transitioning from paediatric to adult services**, many young people said they had been **'dropped'** and **not taken seriously**. Challenges include:

- little to **no guidance** after discharge from paediatrics on **how to navigate** the move into adult services
- **no clear, smooth handover** with no opportunity to meet with **new doctors** before the transition
- **feeling alone**, as there is often very limited signposting to support groups that could help
- **poor communication and coordination** between hospital trusts and specialists



Independence

Many young people frequently deal with a **lack of support** and preparation for **everyday independence** as they grow, these include:

- using **public transport links** after years of organised and regular school transport
- managing **money and finances**
- **navigating work** experience, jobs or careers
- balancing **disclosure of needs** with **fear of losing opportunities**
- managing **multiple hospital appointments** and **services without support**



Educational

Transitions in education—from primary to secondary, from college to university, can often be a **traumatic experience** for a young person. Challenges include:

- a sudden **drop from one-to-one** or tailored support to less or **no support**
- educational bodies **ignore the requests** of students or parents **unless an HCP is involved**
- teachers displaying negative or **discouraging attitudes** toward students
- Educational, Health and Care Plan (**EHCP**) or **one-to-one support is often removed** at higher education



Self-advocacy

From **adolescence**, young people are typically expected to **self-advocate in complex systems** and situations, which can affect confidence. Challenges include:

- knowing and **understanding medical terms**
- reading and **signing important documents**
- **attending meetings** and appointments alone
- repeatedly **explaining needs to professionals** who don't always listen
- many are given **no choice** but to **prove themselves** to receive even **basic care**

MEDICAL TRANSITION TIPS



Keep your own medical journal

It's **easy to forget information** once you leave the room, so always **take a notebook or tablet** into key meetings to record important information.



Have the discussion

Set aside **time to talk** about your **healthcare plan and medical history** with someone who was present in your childhood years (a parent or guardian).



Know your rights

You are entitled to have an **advocate present** with you at appointments and meetings. You can also contact the **Patient Advocacy Liaison Service (PALS)** if you have any concerns, complaints or questions about your care.



Build a support system

Form a **circle of people** who can help and **support you**. This could be friends, family, charities and peer support groups.



Be organised

Keep an **organised file** of any hospital letters and documents together with **appointment dates and information**. Be sure to keep a succinct summary of your protocol, any medication you regularly take and any known allergies or symptoms.



Take your time

It's important **not to be pressured** into making **difficult medical decisions**. Take the time to understand what you think is best for your health.



Self-care

Practice **self-care** after appointments. This could be having a **favourite drink**, spending time with **loved ones** or watching your **comfort TV show**.

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References

1. [nhs.uk/social-care-and-support/caring-for-children-and-young-people/moving-from-childrens-social-care-to-adults-social-care](https://www.nhs.uk/social-care-and-support/caring-for-children-and-young-people/moving-from-childrens-social-care-to-adults-social-care)