Priority Need

Improve health care transition to all aspects of adult life for adolescents and young adults with special health care needs.

NPM

NPM 12 - Percent of adolescents with and without special health care needs, ages 12 through 17, who received services necessary to make transitions to adult health care

Objectives

1. By September 30, 2019, 100 percent of CMS Title V staff will receive transition-specific education and training annually as evidenced by electronic reporting systems.

2. By September 30, 2019, increase by 10 percent the number of providers who receive transition-specific education, training, and resources as evidenced by verbal, written, and/or electronic reporting.

3. By September 30, 2019, document the baseline number of educators who receive transition education, training, and resources as evidenced by electronic reporting systems for baseline assessment.

4. By September 30, 2019, document percentage of children and families who accessed Department sponsored transition-education websites as evidenced by electronic reporting systems.

5. By September 30, 2019, 75 percent of youth and families with special health care needs will report having access to community-based resources necessary to facilitate and achieve successful health care transition when surveyed.

6. By September 30, 2019, increase youth with special health care needs voice in transition program activities as evidenced by a 5 percent increase in the type and number of youth-led health and education transition-specific activities.

Strategies

1. CMS Title V staff will receive transition education during orientation and annually with completion documented through an electronic reporting system.

2. Providers are provided with transition education, training, and resources. Promote the six core elements of health care transition per national guidelines.

3. Educators are provided with transition education, training, and resources.

4. Assess, develop, monitor, improve quality, and promote public access to transition-specific, age-appropriate education materials to support the aspects of health, work/school, self-determination, and self-management for children with special health care needs.

5. Assess, develop, monitor, improve quality, and promote community-based resources and other supports necessary to facilitate and achieve successful health care transition for patients and families with special health care needs.

6. Promote growth in the youth voice and program involvement at the community, state, and national level for health and education transition-specific activities.

ESMs

| ESM 12.1 - Number of pediatric providers in Florida who have practices that have a Health Care Transition (HCT) policy or youth with readiness assessment (with physicals) and plans of care. | Inactive |
| ESM 12.2 - Percent of satisfaction of access for youth with special health care needs who report having access to community-based resources necessary to make transition to adult health care. | Active |

NOMs

NOM 17.2 - Percent of children with special health care needs (CSHCN), ages 0 through 17, who receive care in a well-functioning system