Transition from child to adult health services: Clinician questionnaire

A. Introduction

What is this study about?

The aim of this study is to explore the barriers and facilitators in the process of the transition of young people with chronic conditions from child to adult health services.

Inclusions

Data is being collected on young people between 13 years and their 25th birthday, with a chronic condition, transitioning from child to adult health services. Data is being collected on the services provided to young people identified to us over an 18-month period, from 1st October 2019 - 31st March 2021.

Sampling

Eligible cases were identified from the hospital central record system (using ICD10 codes). Up to 15 cases per hospital have been selected for review

Who should complete this questionnaire?

This questionnaire should be completed by a member of the clinical team providing care to this young person. This may be in a community, secondary or tertiary, or mental health care setting.

The questions should be answered in relation to the care provided by your team to the young person, and should be completed in relation to the status of the patient/transition care received up to the 31/03/2021.

One questionnaire should be completed by each clinical team providing care to the young person.

Please do not include any patient identifiers in the free text boxes.

Definitions

A list of definitions can be found here:

https://www.ncepod.org.uk/pdf/current/Transition/Definitions%20Transition%20%20finalised.pdf

Questions or help

If you have any queries about this study or this questionnaire, please contact: transition@ncepod.org.uk or telephone 020 7251 9060.

CPD accreditation

Consultants who complete NCEPOD questionnaires make a valuable contribution to the investigation of patient care. Completion of questionnaires also provides an opportunity for consultants to review their clinical management and undertake a period of personal reflection. These activities have a continuing medical and professional development value for individual consultants. Consequently, NCEPOD recommends that consultants who complete NCEPOD questionnaires keep a record of this activity which can be included as evidence of internal/self directed Continuous Professional Development in their appraisal portfolio.

About NCEPOD

The National Confidential Enquiry into Patient Outcome and Death (NCEPOD) reviews healthcare practice by undertaking confidential studies, and makes recommendations to improve the quality of the delivery of care, for healthcare professionals and policymakers to implement. Data to inform the studies are collected from NHS hospitals and Independent sector hospitals across England, Wales, Northern Ireland and the Offshore Islands. NCEPOD are supported by a wide range of bodies and the Steering Group consists of members from the Medical Royal Colleges and Specialist Associations, as well as observers from The Coroners Society of England and Wales, and the Healthcare Quality Improvement Partnership (HQIP).

Impact of NCEPOD

Recommendations from NCEPOD reports have had an impact on many areas of healthcare including: Development of the NICE 'Acutely ill patients in hospital guideline' (CG50) – 'An Acute Problem' (2005). Appointment of a National Clinical Director for Trauma Care – 'Trauma: Who Cares?' (2007). Development of NICE Clinical Guidelines for Acute Kidney Injury, published 2013 – 'Adding Insult to Injury' (2009).

Development of ICS Standards for the care of adult patients with a temporary Tracheostomy, published 2014 – 'On the right trach?' (2014).

Development of guidelines from the British Society of Gastroenterology: diagnosis and management of acute lower gastrointestinal bleeding, published 2019 – 'Time to Get Control' (2015).

Development of the British Thoracic Society's Quality Standards for NIV, published 2018 – 'Inspiring Change' (2017).

This study was commissioned by The Healthcare Quality Improvement Partnership (HQIP) as part of the Clinical Outcome Review Programme into Child Health.

B. Organisation details

La.	Are you part of a clinical team providing regular healthcare to this young person? Please see definitions
	O Yes O No
lb.	If answered "No" to [1a] then: Please provide the details of the organisations where the young person's regular clinical team(s) are based. Please include the Trust/Health Board name(s) and the specialty of the team(s). This may be both within and outside of this organisation. Please do not provide clinician names
ple	you are not part of a clinical team who provides regular healthcare to this young person, ease return this questionnaire to your Local Reporter (hand your assignment back) who wil tify NCEPOD
Lc.	If answered "Yes" to [1a] then: Are there any other specialty teams regularly involved in the care of this young person?
	 Yes - within this organisation (physical, mental or community healthcare) Yes - physical healthcare outside this organisation Yes - mental healthcare outside this organisation Yes - community healthcare outside this organisation No Unknown
	Please specify any additional options here
	Please provide the specialty of any other healthcare teams providing regular care to this young person in this organisation Please do not provide any clinician names
.e.	If answered "Yes" to [1a] and "Yes - physical healthcare outside this organisation" to [1c] then: Please provide the details of the physical healthcare teams outside this organisation providing care to this young person (Trust/Health Board name(s) and specialty of the clinical team(s)) Please do not provide any clinician names
lf.	If answered "Yes" to [1a] and "Yes - mental healthcare outside this organisation" to [1c] then: Please provide the details of the mental healthcare teams outside this organisation providing care to this young person (Trust/Health Board name(s) and specialty of the clinical team(s)) Please do not provide any clinician names
.g.	If answered "Yes" to [1a] and "Yes - community healthcare outside this organisation" to [1c] then: Please provide the details of the community healthcare teams outside this organisation providing care to this young person (Trust/Health Board name(s) and specialty of the clinical team(s)) Please do not provide any clinician names

ne name of the yo	practice	
		he name of the young person's GP practice

C. Clinician details and structured commentary

Please answer the remainder of the questions in this questionnaire in relation to the care provided by your organisation (i.e. if under multiple teams, complete based on the care you provide from this team)

Specialty of the team providing care to the young person Which service does this team sit under? Paediatric service Adult service Adolescent service Unknown If not listed above, please specify here Please use the box below to provide a brief summary of this patient's major medical conditions, adding any additional comments or information you feel relevant. You shot be assured that this information is confidential. NCEPOD attaches great importance to this summary. Please give as much information as possible about the transitional care				
Which service does this team sit under? Paediatric service Adult service Adolescent service Unknown f not listed above, please specify here Please use the box below to provide a brief summary of this patient's major medical conditions, adding any additional comments or information you feel relevant. You show the assured that this information is confidential. NCEPOD attaches great importance to	Role within the young	g person's care/trans	sition team	
Please use the box below to provide a brief summary of this patient's major medical conditions, adding any additional comments or information you feel relevant. You show the assured that this information is confidential. NCEPOD attaches great importance to	Specialty of the team	providing care to th	ne young person	
Please use the box below to provide a brief summary of this patient's major medical conditions, adding any additional comments or information you feel relevant. You show the assured that this information is confidential. NCEPOD attaches great importance to	Which service does tl	his team sit under?		
Please use the box below to provide a brief summary of this patient's major medical conditions, adding any additional comments or information you feel relevant. You shows assured that this information is confidential. NCEPOD attaches great importance to	Paediatric service	Adult service	Adolescent service	Unknown
Please use the box below to provide a brief summary of this patient's major medical conditions, adding any additional comments or information you feel relevant. You shows assured that this information is confidential. NCEPOD attaches great importance to	f not listed above, pleas	se specify here		
his voung person		<u>-</u>		
	conditions, adding and se assured that this i	ny additional comme information is confid	nts or information you fee ential. NCEPOD attaches g	l relevant. You shou reat importance to
	conditions, adding ar be assured that this i his summary. Please	ny additional comme information is confid	nts or information you fee ential. NCEPOD attaches g	l relevant. You shou reat importance to
	conditions, adding ar be assured that this i his summary. Please	ny additional comme information is confid	nts or information you fee ential. NCEPOD attaches g	l relevant. You shou reat importance to

D. The young person's details

Please answer the questions in relation to the care provided up to the 31/03/2021 1. What was the age of the young person on 31/03/2021 Not Applicable ☐ Unknown Value should be between 13 and 24 2. Sex Male Other Female Unknown 3. Ethnicity White British/White - other O Black/African/Caribbean/Black British Asian/Asian British (Indian, Pakistani, Bangladeshi, Chinese, other Asian) Mixed/Multiple ethnic groups Unknown If not listed above, please specify here... 4. What underlying condition(s) does the young person have? (Please tick all that apply) Epilepsy ☐ Sickle cell anaemia ☐ Juvenile idiopathic arthritis Cerebral palsy ☐ Duchenne muscular dystrophy □ Spina bifida Post transplant patient (kidney, heart and liver) ☐ Autism spectrum disorder ☐ Rett syndrome ☐ Brain tumour (medulloblastoma) Type 2 diabetes and obesity □ Chronic kidney disease ☐ Unknown Please specify any additional options here... This question is repeated at the start of each section throughout the remainder of the questionnaire. It is acting as a filter to bring up the relevant questions in each section based on whether the young person is pre-/peri- or fully transferred. If you change the answer to this question at any point, your answers in the previous sections will be lost and you will need to go back and recomplete them before the questionnaire can be submitted. 5a. What stage of transition was the young person in on the 31st March 2021? Please see definitions Transition not started Preparing for adulthood

Peri-transfer from child to adult health servicesFully transferred from child to adult health services

Unknown

O Not applicable - diagnosed when already under adult health services

Please see d	n has not sta lefinitions		d" to [1a] t not?	inen:		
O Young po	ition service a erson won't e arers won't er ing condition n	ngage with th	ne transition			
If not listed a	above, please	specify here	·			
. If answered Please give	further det		u to [Ia] (en.		

If transition has not yet started for this young person, the diagnosis was made when already under adult health services or the stage of transition is unknown, please press the next button, and then submit the questionnaire.

E. The transition service*

Please answer the questions in relation to the care provided up to the 31/03/2021

vices ion F i-transfer)
ion F
ion F
ion F
i-transfer)
,
n child to adult health pecialty?
,
'Peri-transfer from child to
(Please tick all that apply)
Peri-transfer from child to

adult health servi Are other people	ces" to [1a] then: involved in the ca	paring for adulthood" or "Peri-transfer from child to re of the young person invited to attend transition
O Yes	O No	Unknown
adult health servi	ces" to [1a] then:	paring for adulthood" or "Peri-transfer from child to young person been discussed within this specialty?
○ Yes	O No	Unknown
		to [2e] and "Preparing for adulthood" or "Peri-transfer to [1a] then:
adult health servi Please give any fu	ces" to [1a] then: urther information	about the management of transition within your
adult health servi	ces" to [1a] then:	aring for adulthood" or "Peri-transfer from child to on is not managed under this specialty, why not?
	adult health servi Are other people meetings as requ O Yes If answered "Yes" adult health servi Has the transition O Yes If answered "Yes" from child to adult Why not? If answered "Yes" adult health servi Please give any for specialty (i.e. who	adult health services" to [1a] then: Are other people involved in the cameetings as required? Yes No If answered "Yes" to [2a] and "Prepadult health services" to [1a] then: Has the transition pathway for this Yes No If answered "Yes" to [2a] and "No" from child to adult health services" Why not? If answered "Yes" to [1a] then: Please give any further information specialty (i.e. what the team does,

3a.	services" to [1a] then:	aduithood" or "Peri-transfer f	
	☐ A key/named worker☐ A social worker	☐ A youth worker☐ None of these	☐ A peer support worker☐ Unknown
	Please specify any additional o	ptions here	
3b.	If answered "A key/named of from child to adult health s What is the key/named wor	ervices" to [1a] then:	g for adulthood" or "Peri-transfer
	O Lead clinician O Unknown	O Clinical Nurse Specialist	O Youth worker
	If not listed above, please spec	cify here	
3c.	If answered "A key/named of from child to adult health so Where is the key/named wo	ervices" to [1a] then:	g for adulthood" or "Peri-transfer
	O Within children's services	○ Within ad adults services ○ Unknown	
	O Within both children's and	adults services O Unknown	
	If not listed above, please spec	cify here	
3d.	from child to adult health s		g for adulthood" or "Peri-transfer or?
3e.	If answered "A key/named of the from child to adult health so the key/named work	ervices" to [1a] then:	g for adulthood" or "Peri-transfer
	☐ Roald Dahl funding ☐ Unknown	☐ Burdett Nursing Trust fund	ing Other charity funding
	Please specify any additional o	ptions here	

F. The transition pathway

Please answer the questions in relation to the care provided up to the 31/03/2021

Please save the questionnaire as you work through this section

	age of transition was the ye e definitions	oung person in on the 31st March 2021?
O Prepai O Peri-tr O Fully t	· •	
For question	ns on patients who are full	y transferred, please scroll towards the end of the page
Approaching	g transfer (including prepa	nring for transfer and peri-transfer)
services' What age	" to [1a] then: e was the young person wl	od" or "Peri-transfer from child to adult health nen transition was first discussed?
If unknow	vn, please write 'Unknown'. If i	not discussed, please write 'Not discussed'
services'	" to [1a] then:	od" or "Peri-transfer from child to adult health th choosing when transfer to adult services should Unknown
Bb. If answe	•	od" or "Peri-transfer from child to adult health
services'	" to [1a] then:	od" or "Peri-transfer from child to adult health sition plan in place? (e.g. Ready Steady Go?)
O Yes	○ No	O Unknown

4b.	If answered "Preparing services" to [1a] and " Which plan is being us	Yes" to [4a] then:	Peri-transfer fro	om child to adult health	
	 Ready Steady Go HEADSSS Together for short live 10 step programme - Making healthcare wo Education Health Care Local transition plan Unknown 	Alder Hey ork for young people - N e Plan model - Council t			
	If not listed above, please	e specify here			1
4c.	services" to [1a] and "	Yes" to [4a] then:		om child to adult health	
	O Yes	O No	O Unknown		
5.	If answered "Preparing services" to [1a] then: Have there been annua			om child to adult health	
	O Yes O Not applicable - too se	O No		○ Unknown	
6a.	services" to [1a] then:			om child to adult health th their paediatric and adult	
	O Yes	O No	O Unknown		
6b.	If answered "Preparing services" to [1a] and " How frequently does/w	Yes" to [6a] then:		om child to adult health nics?	
	O Four times a year O Once every 18 month O Unknown	O Twice a years O Once every		Once a year As needed	
	If not listed above, please	e specify here			
7a.	services" to [1a] then:			om child to adult health outinely at every attendance?	
	O Yes	○ No	O Unknown	O Not appropriate	
7b.	If answered "Preparing services" to [1a] and "Is the young person:		Peri-transfer fro	om child to adult health	
	Seen first on their owSeen first with their pUnknown	n, then with their parer arent carer, then on th			
	If not listed above, please	e specify here			7

	If answered "Preparing services" to [1a] then: Has the young person	-		fer from child to adult health th adult services?
	O Yes O Not applicable - too s	O No		O Unknown
9.	If answered "Preparing services" to [1a] then: Does the young perso Please see definitions	-	r "Peri-trans	fer from child to adult health
	☐ A physical disability ☐ Both a physical and I ☐ Unknown	earning disability	_	rning disability isability
10.	services" to [1a] and " [9] then: If the young person ha	A learning disabilit as a learning disabi neir health care bee	ty" or "Both ility, has the	fer from child to adult health a physical and learning disability" to ability to make independent ad as part of transition planning? (i.e.
	O Yes	O No	O Unkn	nown
11b	O Yes If answered "Preparing services" to [1a] and "	O No g for adulthood" or 'Yes" or "No" to [11	Unkr r "Peri-transf La] then:	the planning for transition process? nown fer from child to adult health now this has gone well or barriers to
12a	services" to [1a] then:			fer from child to adult health g education or careers?
	○ Yes	O No	O Unkr	nown
	If answered "Prenaring			fer from child to adult health
12b	services" to [1a] and " How was this support			
12b	services" to [1a] and "			☐ Signposting to other services
12 b	services" to [1a] and " How was this support In person	provided? Careers Unknown		☐ Signposting to other services

12c.	services" to [1a	and "Yes" or "No" t	d" or "Peri-transfer from ch o [12a] then: y interested in how this ha	
12d	services" to [1a] then:	d" or "Peri-transfer from ch	
	O Yes	O No	O Unknown	O Not applicable
13.	services" to [1a	n] then: erson 'looked after'?	d" or "Peri-transfer from ch	nild to adult health
	O Yes	O No	O Unknown	
14a.	services" to [1a] then:	d" or "Peri-transfer from ch al care as part of the trans	
	O Yes	O No	O Unknown	
14b	services" to [1a	eparing for adulthoo n] and "Yes" to [14a] i n person have an soci		ild to adult health
	O Yes	O No	O Unknown	
14c .	services" to [1a	and "Yes" or "No" t	d" or "Peri-transfer from ch o [14a] then: y interested in how this ha	
15a	services" to [1a	n] then: erson routinely signpo	d" or "Peri-transfer from chosted to holistic services w	
	Yes	O No	Unknown	

a.If an serv deve	ices" to [1a] the ng appointment elop the skills for es	eers advice N ditional options h ring for adulthous en: ts, has the your or the self-man No ring for adulthous d "Yes" to [16a	ood" or "Peri-tranged person been gagement of their	Drug and alcohol support Unknown nsfer from child to adult health given the opportunity or encouraged to rhealth needs? nknown nsfer from child to adult health
a.If an serv Duri deve O Y	swered "Prepai ices" to [1a] the ng appointment elop the skills fo es swered "Prepai ices" to [1a] an	ring for adultho en: ts, has the you or the self-man O No ring for adultho d "Yes" to [16a	ood" or "Peri-tranged person been good been go	given the opportunity or encouraged to r health needs?
serv Duri deve O Y b.If an serv	ices" to [1a] the ng appointment elop the skills for es swered "Prepai ices" to [1a] an	en: ts, has the you or the self-man No ring for adulthod d "Yes" to [16a	ng person been g agement of their O Un pod" or "Peri-tran	given the opportunity or encouraged to r health needs?
b.If an serv	swered "Prepai ices" to [1a] an	ring for adulthod d "Yes" to [16a	ood" or "Peri-tran	
serv	ices" to [1a] an	d "Yes" to [16a		nsfer from child to adult health
	swered "Prepai		ood" or "Peri-trar	nsfer from child to adult health
			, , ,	rson engaging with this service?
serv		d "Yes" to [17a	ood" or "Peri-tran	nknown nsfer from child to adult health
			ood" or "Peri-trar	nsfer from child to adult health
serv	ices" to [1a] the	en:		from paediatric services?
is tn	es Inknown		O No	-

		years Not Applicable Unknown
Value should be no more to		
	nd "Yes" or "No" to [:	or "Peri-transfer from child to adult health 18a] then:
		or "Peri-transfer from child to adult health
	nd "Yes" to [18a] the equivalent specialty	n: for the young person to transfer to?
	O No	○ Unknown
services" to [1a] ar	ring for adulthood" (nd "Yes" to [18a] and ne young person tran	
O Primary care	O Unknown	
If not listed above, pl	ease specify here	
		or "Peri-transfer from child to adult health
services" to [1a] th		ioration of their condition within annuovimately 6
months either side		services, is there a plan of who they should
months either side contact?		
months either side contact? Yes	of transfer to adult	services, is there a plan of who they should
months either side contact? Yes ly transferred	of transfer to adult No	services, is there a plan of who they should O Unknown
months either side contact? Yes Yes Iy transferred If answered "Fully	of transfer to adult No No transferred from chi	services, is there a plan of who they should
months either side contact? Yes Yes Iy transferred If answered "Fully	of transfer to adult No No transferred from chi	Unknown
months either side contact? Yes Yes Ity transferred If answered "Fully	of transfer to adult No No transferred from chilyoung person discha	Unknown Id to adult health services" to [1a] then: rged from paediatric services?
months either side contact? Yes Yes Iy transferred If answered "Fully what age was the years to more to the should be no more to the contact."	of transfer to adult No No transferred from chilyoung person discha	Unknown Id to adult health services" to [1a] then: rged from paediatric services? years Unknown
months either side contact? Yes ly transferred If answered "Fully what age was the years to more the contact of the contact	of transfer to adult No No transferred from chilyoung person discha	Unknown Id to adult health services" to [1a] then: rged from paediatric services?
months either side contact? Yes ly transferred If answered "Fully what age was the years to more the contact of the contact	of transfer to adult No No transferred from chilyoung person discha	Unknown Id to adult health services" to [1a] then: rged from paediatric services? years Unknown Id to adult health services" to [1a] then:
months either side contact? Yes Yes Iy transferred If answered "Fully what age was the years the young peridentify any ongoir Yes If answered "Fully was the years the young peridentify any ongoir of the years t	transferred from children chil	Unknown Id to adult health services" to [1a] then: rged from paediatric services? years Unknown Unknown Unknown

		child to adult health services" to [
re you aware	of any other issues in	the transition pathway for this ye	
r e you aware) Yes	of any other issues in No	Unknown	oung person?
re you aware) Yes answered "F	of any other issues in No No ully transferred from o	the transition pathway for this ye	oung person? 1a] then:
re you aware) Yes answered "F	of any other issues in No No ully transferred from o	the transition pathway for this you Unknown Child to adult health services" to [oung person? 1a] then:
e you aware Yes answered "F	of any other issues in No No ully transferred from o	the transition pathway for this you Unknown Child to adult health services" to [oung person? 1a] then:
re you aware) Yes answered "F	of any other issues in No No ully transferred from o	the transition pathway for this you Unknown Child to adult health services" to [oung person? 1a] then:
re you aware) Yes answered "F	of any other issues in No No ully transferred from o	the transition pathway for this you Unknown Child to adult health services" to [oung person? 1a] then:
e you aware Yes answered "F	of any other issues in No No ully transferred from o	the transition pathway for this you Unknown Child to adult health services" to [oung person? 1a] then:
e you aware Yes answered "F	of any other issues in No No ully transferred from o	the transition pathway for this you Unknown Child to adult health services" to [oung person? 1a] then:
e you aware Yes answered "F	of any other issues in No No ully transferred from o	the transition pathway for this you Unknown Child to adult health services" to [oung person? 1a] then:

G. Communication with the young person and their parent carers

Please answer the questions in relation to the care provided up to the 31/03/2021

1.	What stage of t		ung person in on the 31st	March 2021?	
	O Fully transfer	adulthood from child to adult healt red from child to adult h		es	
Fo	r questions on p	patients who are fully	transferred, please scroll	towards the end of the page	!
Аp	proaching trans	fer (including prepar	ing for transfer and peri-t	ransfer)	
2a.	services" to [1a] then:	d" or "Peri-transfer from c		
	O Yes	O No	O Unknown		
	services" to [1a Please give furt	and "No" to [2a] the			
2c.	services" to [1a Have the young] then:	d" or "Peri-transfer from co ers been copied into any co care?		
	O Yes	O No	O Unknown	Not applicable	
3a.	services" to [1a Has the young O Yes O No] then:	d" or "Peri-transfer from c		
	O Unknown O Not applicable	e - too soon in the trans	ition process		

3b.	If answered "Preparing for adulthood" or "Peri-transfer from child to adult health services" to [1a] and "Yes" to [3a] then: How was this done? (Please tick all that apply)
	☐ Jointly developed care plans ☐ Deciding how they would like a parent carer to be involved ☐ Unknown
	Please specify any additional options here
4a.	If answered "Preparing for adulthood" or "Peri-transfer from child to adult health services" to [1a] then: Were the young people's parent carers involved in the transition process?
	✓ Yes✓ No✓ Unknown✓ Not applicable - too soon in the transition process
4b.	If answered "Preparing for adulthood" or "Peri-transfer from child to adult health services" to [1a] and "Yes" to [4a] then: How was this done? (Please tick all that apply)
	 ☐ Involved in completing transition documentation ☐ Attended parent groups ☐ Attended transition appointments with the young person - always ☐ Attended transition appointments with the young person - sometimes ☐ Attended transition appointments with the young person - occasionally ☐ Attended transition appointments without their young person ☐ Unknown
	Please specify any additional options here
	Ily transferred If answered "Fully transferred from child to adult health services" to [1a] then: Are you aware of any issues with communication during the process of transition from child to adult health services for this young person?
	○ Yes ○ No ○ Unknown
5b.	If answered "Fully transferred from child to adult health services" to [1a] and "Yes" to [5a] then: Please give any further details:

H. MDT working & the coordination of care

Please answer the questions in relation to the care provided up to the 31/03/2021

Please save the questionnaire as you work through this section

1. What stage of Please see defin		oung person in on the 31st March 2021?				
Fully transfeNot applical	or adulthood r from child to adult heal erred from child to adult					
Unknown For questions on patients who are fully transferred, please scroll towards the end of the page						
Approaching trai	nsfer (including prepa	ring for transfer and peri-transfer)				
services" to [1	la] then:	od" or "Peri-transfer from child to adult health of multiple hospital based clinical teams?				
O Yes	O No	Unknown				
	la] and "Yes" to [2a] t	od" or "Peri-transfer from child to adult health hen:				
		teams Unknown				
services" to [1	la] and "Yes" to [2a] t	od" or "Peri-transfer from child to adult health then: ed across the different teams?				
O Yes	O No	Unknown				
services" to [1		od" or "Peri-transfer from child to adult health and "Yes" to [2c] then: s undertaken?				
services" to [1	la] then:	od" or "Peri-transfer from child to adult health of a community based services? (not primary care)				
O Yes	O No	O Unknown				

	services" to [1a] and '	"Yes" to [3a] then:	eri-transfer from child to adult health based care for this young person?
	Registered healthcar Carers (NHS) Family/parent carers Unknown		Registered healthcare staff (other provider)Carers (other provider)Self care
	Please specify any additi	ional options here	
	services" to [1a] and '	"Yes" to [3a] then:	eri-transfer from child to adult health e hospital and community teams
	O Yes	O No	○ Unknown
	services" to [1a] and '	ng for adulthood" or "Po" "Yes" to [3a] and "Yes" to how this is underta	
4b.	services" to [1a] then Is the young person room of Yes If answered "Preparing services" to [1a] and the services of the servi	: egistered with a GP? No ng for adulthood" or "Pe "Yes" to [4a] then:	eri-transfer from child to adult health O Unknown eri-transfer from child to adult health in the hospital records? O Unknown
4b. 4c.	services" to [1a] then Is the young person re Yes If answered "Preparin services" to [1a] and Are the young person Yes If answered "Preparin services" to [1a] and Yes	egistered with a GP? No g for adulthood" or "Pe" "Yes" to [4a] then: 's GP details recorded No g for adulthood" or "Pe" "Yes" to [4a] then:	 Unknown eri-transfer from child to adult health in the hospital records? Unknown eri-transfer from child to adult health
4b. 4c.	services" to [1a] then Is the young person re Yes If answered "Preparin services" to [1a] and Are the young person Yes If answered "Preparin services" to [1a] and Yes	egistered with a GP? No g for adulthood" or "Pe" "Yes" to [4a] then: 's GP details recorded No g for adulthood" or "Pe" "Yes" to [4a] then:	Unknowneri-transfer from child to adult healthin the hospital records?Unknown
4b. 4c. 4d.	services" to [1a] then Is the young person re Yes If answered "Preparin services" to [1a] and Are the young person Yes If answered "Preparin services" to [1a] and If the young person is Yes If answered "Preparin services" to [1a] and If the young person is Yes	egistered with a GP? No g for adulthood" or "Pa" "Yes" to [4a] then: "S GP details recorded No g for adulthood" or "Pa" "Yes" to [4a] then: s at college or universit No g for adulthood" or "Pa" "Yes" to [4a] then: en involved with the tr	 Unknown eri-transfer from child to adult health in the hospital records? Unknown eri-transfer from child to adult health ty, are they registered with a GP there?
4b. 4c. 4d.	services" to [1a] then Is the young person re Yes If answered "Preparin services" to [1a] and hare the young person Yes If answered "Preparin services" to [1a] and hare the young person is Yes If answered "Preparin services" to [1a] and hare the young person is Yes	egistered with a GP? No g for adulthood" or "Pa" "Yes" to [4a] then: "S GP details recorded No g for adulthood" or "Pa" "Yes" to [4a] then: s at college or universit No g for adulthood" or "Pa" "Yes" to [4a] then: en involved with the tr	 Unknown eri-transfer from child to adult health in the hospital records? Unknown eri-transfer from child to adult health ty, are they registered with a GP there? Unknown Not applicable eri-transfer from child to adult health
4b. 4c. 4d.	services" to [1a] then Is the young person re Yes If answered "Preparin services" to [1a] and Are the young person Yes If answered "Preparin services" to [1a] and If the young person is Yes If answered "Preparin services" to [1a] and Have primary care becattending MDT meetin Yes If answered "Preparin services" to [1a] and Yes	egistered with a GP? No g for adulthood" or "Peres" to [4a] then: 's GP details recorded No g for adulthood" or "Peres" to [4a] then: s at college or university No g for adulthood" or "Peres" to [4a] then: s at college or university No g for adulthood" or "Peres" to [4a] then: en involved with the trangs) No	O Unknown eri-transfer from child to adult health in the hospital records? O Unknown eri-transfer from child to adult health ty, are they registered with a GP there? O Unknown O Not applicable eri-transfer from child to adult health ransition process for this young person? (E.g. O Unknown O Not applicable eri-transfer from child to adult health 'to [4d] then:
4b. 4c. 4d.	services" to [1a] then Is the young person re Yes If answered "Preparin services" to [1a] and Are the young person Yes If answered "Preparin services" to [1a] and If the young person is Yes If answered "Preparin services" to [1a] and Have primary care becattending MDT meetin Yes If answered "Preparin services" to [1a] and Yes	egistered with a GP? No g for adulthood" or "Po" "Yes" to [4a] then: "s GP details recorded No g for adulthood" or "Po" "Yes" to [4a] then: s at college or university No g for adulthood" or "Po" "Yes" to [4a] then: en involved with the trangs) No g for adulthood" or "Po" "Yes" to [4a] and "Yes" nvolved? (Please tick aspondence	O Unknown eri-transfer from child to adult health in the hospital records? O Unknown eri-transfer from child to adult health ty, are they registered with a GP there? O Unknown O Not applicable eri-transfer from child to adult health ransition process for this young person? (E.g. O Unknown O Not applicable eri-transfer from child to adult health 'to [4d] then:

4f.	services" to [1a]	and "Yes" to [4a] to ments, is the young	od" or "Peri-transfer from ch hen: patient encouraged to acc	
	O Yes	O No	Unknown	
4g.	services" to [1a] Please give any	and "Yes" to [4a] to further details rega	od" or "Peri-transfer from ch hen: rding the involvement of pi s gone well or barriers to th	rimary care (we are
5a.	services" to [1a] If the young per	l then: son is known to mul	od" or "Peri-transfer from ch Itiple services in the commu Dianning which involves all	unity (including social care
	O Yes	O No	O Unknown	Not applicable
5b.	services" to [1a]	eparing for adulthoo and "Yes" to [5a] t ails as to how this is		nild to adult health
6.	services" to [1a]	then: person have a treat	od" or "Peri-transfer from chemic ment escalation plan (e.g.	
	O Yes	O No	Unknown	O Not applicable
7a.	services" to [1a]	then: person have a life li	od" or "Peri-transfer from ch	nild to adult health
	O Yes	○ No	O Unknown	

If answered "Preparing for adulthood" or "Peri-transfer from child to adult health services" to [1a] and "Yes" to [7a] then: Does/did the young person have an advanced care plan (ReSPECT form/ceiling of care) for their life limiting condition (including palliative care and admission to ICU)? Please see definitions O No O Unknown				
O Yes	O No	O Unknown		
services" to [1a Please give an	a] then:	d" or "Peri-transfer from child to adult health about how the transition process is joined up across s young person		
If answered "F Has the young	person transferred to	child to adult health services" to [1a] then: adult health services across all clinical teams?		
If answered "F Has the young O Yes	person transferred to No			
If answered "F Has the young O Yes If answered "F then:	person transferred to No	o adult health services across all clinical teams? Unknown		
If answered "Fe Has the young Yes If answered "Fe then:	person transferred to No	o adult health services across all clinical teams? Unknown		
If answered "F Has the young O Yes If answered "F then:	person transferred to No	o adult health services across all clinical teams? Unknown		
If answered "F Has the young O Yes If answered "F then:	person transferred to No	o adult health services across all clinical teams? Unknown		
If answered "F Has the young O Yes If answered "F then:	person transferred to No	o adult health services across all clinical teams? Unknown		
Has the young Yes If answered "Fethen: Why not?	person transferred to No ully transferred from	o adult health services across all clinical teams? Unknown		

10b	If answered "Fully transferred from child to [10a] then: Which teams were involved with the care of	adult health services" to [1a] and "Yes" to f this young person at the point of transition?
	(Please tick all that apply)	tins young person at the point of transition.
	 ☐ Hospital-based paediatric team - secondary of Hospital-based adult team - secondary care ☐ Hospital-based adult team - tertiary care ☐ Community team - adults ☐ Social care 	Hospital-based paediatric team - tertiary care Community team - paediatrics Primary care Unknown
	Please specify any additional options here	
10 c.	team - tertiary care" or "Community team - If hospital-based paediatric team or commu	- secondary care", "Hospital-based paediatric paediatrics" to [10b] then:
	○ Yes ○ No	○ Unknown
10 d	If answered "Fully transferred from child to [10a] and "Hospital-based paediatric team team - tertiary care" or "Community team - If hospital-based paediatric team or commustay involved?	- secondary care", "Hospital-based paediatric paediatrics" to [10b] and "Yes" to [10c] then:
10e	If answered "Fully transferred from child to [10a] and "Hospital-based paediatric team team - tertiary care" or "Community team - If hospital-based paediatric team or community team involved?	- secondary care", "Hospital-based paediatric paediatrics" to [10b] and "Yes" to [10c] then:
10f.	If answered "Fully transferred from child to [10a] then: Are you aware of any issues with the engage process of transition from child to adult her	gement of any of these teams during the
	○ Yes ○ No	O Unknown
10g	If answered "Fully transferred from child to [10a] and "Yes" to [10f] then: Please indicate for which teams there were that apply)	adult health services" to [1a] and "Yes" to problems with engagement: (Please tick all
	 ☐ Hospital-based paediatric team - secondary of Hospital-based adult team - secondary care ☐ Hospital-based adult team - tertiary care ☐ Community team - adults ☐ Social care 	Hospital-based paediatric team - tertiary care Community team - paediatrics Primary care Unknown
	Please specify any additional options here	

	do you see the young	person: (Please	• • • •
In an adult clinicUnknown	O In an ado	lescent clinic	O In a young adult clinic
If not listed above, ple	ease specify here		
). If answered "Fully t	trancforrod from child	to adult health	n services" to [1a] then:
			e.g. the young person is attending
Is there evidence of			
Is there evidence of appointments)	f engagement with ad		e.g. the young person is attending
Is there evidence of appointments) O Yes	f engagement with ad		e.g. the young person is attending
Is there evidence of appointments) Ores One Not applicable - to	f engagement with ad No no soon transferred from child	ult services? (e	Unknown Services" to [1a] then:
Is there evidence of appointments) Yes Not applicable - to	f engagement with ad No no soon transferred from child	ult services? (e	Unknown Services" to [1a] then: nts in adult care (DNA)?
Is there evidence of appointments) Ores One Not applicable - to	No No No No consider transferred from child son missed three or mo	ult services? (e	Unknown Services" to [1a] then:
Is there evidence of appointments) Yes Not applicable - to a	No No No No consider transferred from child son missed three or mo	ult services? (e	Unknown Services" to [1a] then: nts in adult care (DNA)?
Is there evidence of appointments) Yes Not applicable - to the street of the street	No Soo soon transferred from child son missed three or mo No Soo soon transferred from child son missed three or mo The soon soon	ult services? (e to adult health ore appointmen	Unknown Services" to [1a] then: nts in adult care (DNA)?
Is there evidence of appointments) Yes Not applicable - to the state of the state	No N	ult services? (e to adult health ore appointmen to adult health y hospital adm	Unknown Unknown Services" to [1a] then: Ints in adult care (DNA)? Unknown Services" to [1a] then: In services" to [1a] then: In services to [1a] then: In services to [1a] then:
Is there evidence of appointments) Yes Not applicable - to the street of the street	No Soo soon transferred from child son missed three or mo No Soo soon transferred from child son missed three or mo The soon soon	ult services? (e to adult health ore appointmen	Unknown Unknown Services" to [1a] then: Ints in adult care (DNA)? Unknown Services" to [1a] then: In services" to [1a] then: In services to [1a] then: In services to [1a] then:
Is there evidence of appointments) Yes Not applicable - to a	No N	to adult health ore appointment of the description	Unknown Services" to [1a] then: Ints in adult care (DNA)? Unknown Services" to [1a] then: Ints in services to [1a] then:
Is there evidence of appointments) Yes Not applicable - to a	No N	to adult health bre appointment of adult health y hospital adm	Unknown Services" to [1a] then: This in adult care (DNA)? Unknown Services" to [1a] then: This issions following transfer to adult This is services to [1a] then:
Is there evidence of appointments) Yes Not applicable - to a	No N	to adult health bre appointment of adult health y hospital adm	Unknown Unknown Services" to [1a] then: Ints in adult care (DNA)? Unknown Services" to [1a] then: Issions following transfer to adult In services" to [1a] then: It services to [1a] then:
Is there evidence of appointments) Yes Not applicable - to Is answered "Fully to Has the young persons of the Has the young persons services? Yes Yes If answered "Fully to Has the young persons services? Yes Are you aware of an from child to adult Yes	No N	to adult health ore appointment of the description of calculation of calculations of calculati	Unknown Unknown Services" to [1a] then: Ints in adult care (DNA)? Unknown Services" to [1a] then: Issions following transfer to adult In services" to [1a] then: It services to [1a] then:
Is there evidence of appointments) Yes Not applicable - to the state young person of the services? Yes Not applicable - to the state young person of the services? Yes Yes It is answered "Fully to the state young person of the services? Yes Are you aware of an from child to adult Yes b.If answered "Fully to the services of	No N	to adult health ore appointment of adult health y hospital adm Unknown to adult health rdination of cases young person Unknown to adult health to adult health to adult health	Unknown Unknown Services" to [1a] then: Ints in adult care (DNA)? Unknown Services" to [1a] then: Issions following transfer to adult In services" to [1a] then: In services to [1a] then:
Is there evidence of appointments) Yes Not applicable - to see the see these: If answered "Fully to Has the young person of the see these of applicable - to see the see these of the see these of applicable of the see the see of applicable of the see	No N	to adult health ore appointment of the adult health of calculation	Unknown Services" to [1a] then: Ints in adult care (DNA)? Unknown Services" to [1a] then: Inssions following transfer to adult In services" to [1a] then: In services" to [1a] then: In services to [1a] and "Yes" to
Is there evidence of appointments) Yes Not applicable - to services? If answered "Fully to Has the young person of the services? Yes Yes If answered "Fully to Has the young person of the services? Yes If answered "Fully to Are you aware of an from child to adult of Yes If answered "Fully to Has the young person of the services? If answered "Fully to Has the young person of the services? If answered "Fully to Has the young person of	No N	to adult health ore appointment of the adult health of calculation	Unknown Services" to [1a] then: Ints in adult care (DNA)? Unknown Services" to [1a] then: Issions following transfer to adult In services" to [1a] then: Issions following transfer to adult In services" to [1a] then: In services" to [1a] then: In services" to [1a] and "Yes" to In hospital and community care In community and primary care

ease give any fu			

I. Quality of transition process

Please answer the questions in relation to the care provided up to the 31/03/2021

		oung person in on the 3	31st March 2021?
Preparing for aduPeri-transfer fronFully transferred	ulthood n child to adult hea from child to adult	t health services	ervices
or "Fully transferre	ed from child to	adult health services" to	o [1a] then:
O Yes	O No	O Unknown	
or "Fully transferre	ed from child to		
or "Fully transferre In your opinion, wi	ed from child to hat one thing wo	adult health services" to	o [1a] then:
	Please see definition Transition not state Preparing for adde Peri-transfer from Fully transferred Not applicable - of Unknown If answered "Preparing or "Fully transferred in your opinion, is, person? Yes If answered "Preparing or "Fully transferred in your opinion, is, person? Yes If answered "Preparing or "Fully transferred in your opinion, with your opinion opinion, with your opinion opinion, with your opinion opinion, with your opinion	Please see definitions Transition not started Preparing for adulthood Peri-transfer from child to adult he In the process person? Yes Transition not started Preparing for adulthood Peri-transfer from child to adult he In the process person? Yes Transferred from child to adult to adult he Or "Fully transferred from child to adult	Transition not started Preparing for adulthood Peri-transfer from child to adult health services Fully transferred from child to adult health services Not applicable - diagnosed when already under adult health services Unknown If answered "Preparing for adulthood", "Peri-transfer from or "Fully transferred from child to adult health services" to In your opinion, is/has the process of transition working/werson? Yes No Unknown If answered "Preparing for adulthood", "Peri-transfer from or "Fully transferred from child to adult health services" to Please give further details If answered "Preparing for adulthood", "Peri-transfer from or "Fully transferred from child to adult health services" to result to adult health services to result

THANK YOU FOR TAKING THE TIME TO COMPLETE THIS QUESTIONNAIRE

By doing so you have contributed to the dataset that will form the report and recommendations due for release in March 2023