

Guest Editorial

Transition, Part 2

Much of my introduction to the issue of transition to adult care was given in the prologue to the previous issue (Volume 7, Number 1, 2014). In this follow-up issue, we hope to provide readers with more insight into the world of transition to adult care. We know transition to adult care is complex and time consuming. For this reason, there have arisen many transition clinics that specialize in transitioning patients. We begin by describing one of these clinics, with special attention to the complexity of patients that are served there. This is representative of the increased complexity of the population served at many of these clinics, and demonstrates well the need for efficiency in providing transition care. In addition, we know that while complex medical conditions make transition difficult, complex social situations are often more predictive of transition outcomes. This point is shown in the next article for one specific condition. Teams that are designed to provide a full medical home and support the whole family may be better positioned to improve transition outcomes. Rehabilitation providers are often a large part of patients' medical homes, and the next article looks at a large national data set to show transition outcome differences between patients who saw rehabilitation providers and those that did not.

To facilitate clinical research and determine best practices for transitioning our youth, we need to know the relevant outcomes. One such framework for looking at transition as a whole was presented in the last issue, and in this issue we present a framework for looking at outcomes, created with the inclusion of a young adult with a chronic illness.

While we strive to determine best practices around transitioning, we also look to educate and motivate providers to deliver transition services. The ability of busy primary care physicians to locate resources critical for their patients are a determining factor of whether our youth receive transition care. The next article shows a process taken by one chapter of the American Academy of Pediatrics to improve the use of transition tools. This included developing a toolkit and creating a training module that qualifies for Maintenance of Certification credit.

Finally, we end by looking at transition from a policy and advocacy standpoint. The Affordable Care Act addressed some of the major issues facing young adults. However, many issues still remain, and some recommendations are presented for further advocacy on a local, state, and federal level.

Much work is occurring in transition, yearly conferences, and selected abstracts from the 2013 Healthcare Transition Research Consortium are included to demonstrate the variety of work ongoing in transition. The hope of these two special themed issues was to introduce the readers to the field of transition and areas of study including assessment, models of care, frameworks for research, and advocacy efforts. We hope that the articles provoked discussions and introduced new ideas for all providers caring for our young adults as they make the leap into the adult world.

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