

# Transition Clinic Fact Sheet

## What is Transition?

Moving from paediatric health and school services to adult health services and post-school options is a major transition point in the life of a young person with intellectual disability or complex illness, and their family.

Young people with disabilities often have a number of health care providers and services, who may not be involved into adulthood. The clinic can be a useful introduction to adult health and disability services.

## Why have a Transition Clinic?

The most important thing about Transition Clinics is that everything revolves around the young person and their family. Everyone else brings their knowledge and expertise to a clinic but the best way forward will always be decided by what the young person and family/carers want and need to improve wellbeing and quality of life.

Holding a Transition Clinic in the school can be useful as teachers have usually known a young person for a number of years and can be an invaluable resource to provide information on their abilities and challenges.

## What will be covered in a Transition Clinic?

A 'whole of life' approach is used, where information on the young person's progress is shared and reviewed and different options discussed. Before you come to the clinic we suggest parents/carers look through the **Transition Checklist** (over page) and consider discussing it with their young person (where possible), and people involved in their care, to identify issues they would like to address.

## Who attends the clinic?

A number of people attend the clinic. School representatives might include the principal, class teacher and school counsellor. Health professionals usually include adult and paediatric doctors, and allied health professionals (occupational therapist, dietitian). Exactly how the health team is made up varies from clinic to clinic, depending on the issues being discussed. This will be an opportunity to meet our Adult Disability Team who may continue to provide medical care in the adult years.

## What happens after the clinic?

A Transition Plan will be developed during the clinic. A clinic letter with recommendations will be distributed to relevant parties. A follow-up appointment is usually arranged for the following year.

# Transition Clinic Checklist for Parents and Carers

Provided below is a list of some common transition issues that you may want to consider for discussion at the 'Multidisciplinary School Transition Clinic.

## Health services:

- Transition plan
- Health summary
- Referral to adult medical services

## Post School Options:

- Post school funding options (self-managed/package):
  - [www.adhc.nsw.gov.au/sp/delivering\\_disability\\_services/day\\_programs](http://www.adhc.nsw.gov.au/sp/delivering_disability_services/day_programs)
- Community participation program
- Transition to work
- Further education

## Disability Services:

- Respite
- Recreation options
- Accommodation
- Case management
- Individual and Family support
- Therapy
- Equipment services
- NDIS
- (Lists of private providers available)

## Government Supports:

- Carer's allowance and Carer's payment
- Disability support pension
- Companion card
- Taxi scheme discounts
- Enable NSW
- Continence aids assistance scheme (CASS)

## Other:

- Bank account
- Electoral roll
- Medicare card
- Leisure & physical activities
- Sexuality
- Guardianship
- Nominee approval (eg: with Centrelink)

*This document has been sourced from the MRID SchoolKit available online at [schoolkit.org.au](http://schoolkit.org.au). It was created as a tool to help run school-based medical clinics using the SchoolKit Clinic model and is copyrighted to the Metro-Regional Intellectual Disability Network.*