Interdisciplinary Collaborative on Healthcare and Education Transition (ICHET): An Integrative Approach

Susan Horky, LCSW
Angela Miney, BA
John Reiss, PhD
Jeanne Repetto, PhD
Arwa Saidi, MB.BCh
Lisa Wolcott, LCSW
Today, we’ll discuss:

- ICHET composition
- Our main goal
- How we got started!
- What we have done
- Where we are headed
What is ICHET?
To expand the view of Transition to include collaborative planning between healthcare and education
ICHET’s Mission:

To enhance service, provide training and conduct research which supports the successful, comprehensive transition of youth and young adults with special healthcare needs and disabilities from pediatric to adult-oriented health care; from school to higher education and employment; and from adolescence to adulthood and the ongoing pursuit of dreams and ambitions.
How we got started:

- Jeanne and John conducted a study on educators’ awareness of and views about healthcare transition:

In parallel:

We came to realize that two, entirely separate, parallel processes were occurring in Education and Healthcare.
How we got started (cont’d)

- We saw that:
  - Healthcare and Education knew little about each other’s transition process
  - Similar words meant different things to each group
  - Each had goals for teens, that did not take into account the others work
What we have done

- Step 1: We discussed transition and learned what it means to each member/discipline
Education Transition

- Introduced as a federal initiative for students with disabilities in 1984

- Defined as “A change in status from behaving primarily as a student to assuming emergent adult roles in the community. These roles include employment, participating in post-secondary education, maintaining a home, becoming appropriately involved in the community, and experiencing satisfactory personal and social relationships...” (Halpern, 1994, p. 117)
Healthcare Transition

- The process of transitioning from child-centered (pediatric) to adult oriented health care

- Reiss and Gibson, 2002
  - Future orientation
  - Flexibility of timing in moving to adult healthcare
  - Gradually increasing responsibility in self management of healthcare needs
  - Development of a transition plan and celebration of transition
Healthcare Transition

- Consensus Statement on Health Care Transitions for Young Adults With Special Health Care Needs (AAP, AAFP, ACoP-ASIM, 2002)
  - All children should have continuity of care between pediatric and adult healthcare, with a physician explicitly responsible for facilitating the transition process
  - All medical students and physicians should be trained in transition
  - A medical summary should be prepared
  - Continuous health insurance should be available.
BECAUSE REAL LIFE IS HARD, AND IT'S MY JOB TO PREPARE YOU.

BUT IF IT'S GOING TO BE SO HARD, WHY NOT LET ME HAVE FUN NOW?
The Individualized Education Plan (IEP): Measurable postsecondary goals related to training, education, employment, and independent living along with needed transition services are required.
Healthcare Transition

- There are few universally applicable models for implementation of HCT
- The focus is on the specific skills that teens should acquire prior to transitioning to adult health care
- Healthcare transition proceeds in what is, at best, a fragmented way
- Education/vocation/recreation alluded to only in passing
My Transition Plan

**Patient Information:**
- Name:
- Date of Birth:
- Language Spoken:
- Contact Information:

**Objective of Transition Plan:**
- Improve self-care skills
- Develop independence
- Strengthen parent-child relationship

**Transition Timeline:**
- 3 months
- 6 months
- 1 year

**Transition Activities:**
- Physical readiness
- Emotional readiness
- Social readiness

**Transition Checklist:**
- Identified needs and goals
- Developed action plan
- Progress monitoring

**Sample Checklist Items:**
- Communication skills
- Medication management
- Self-care

**Sample Scores:**
- 1: Not at all
- 2: Somewhat
- 3: Mostly
- 4: Completely

**Feedback from Parents:**
- Suggestions for improvement
- Comments on progress

**Future Steps:**
- Regular follow-up appointments
- Communication plan
- Support network development

**Signature:**
- Date:

**Additional Notes:**
- Any additional information or comments

---

**Note:**
- This document is for informational purposes only and should not be used as a substitute for professional medical advice.
Education Transition

- Mandated by the Individuals with Disabilities Education Act (IDEA) of 1990, the IDEA Amendments of 1997, and the IDEA Improvement Act of 2004

- Transition services must be offered to students with disabilities by age 16 addressing the areas of (a) instruction, (b) community experiences, (c) employment, (d) postsecondary living skills, (e) functional vocational evaluation, and (f) related services.
Education Transition

- Compulsory monitoring of IEPs appropriate transition goals and evaluation of students outcomes
- Gradual inclusion of youth with (invisible) chronic illnesses
Healthcare Transition

- Included in HP 2020

- Most Departments of Health have a transition goals, programs and performance measures
Education Transition

TRANSITION PLANNING

1. □ Not Applicable: Student has not reached the age of 15 and transition planning is not required or appropriate at this time.
   □ This is either the first IEP to be in effect when the student turns 16 (or younger if appropriate and transition planning is needed) or the student is 16 or older and transition planning is required.

2. Student Preferences/Interests – document the following:
   a) Was the student invited to attend her/his Planning and Placement Team (PPT) meeting? □ Yes □ No
   b) Did the student attend? □ Yes □ No
   c) How were the student’s preferences/interests, as they relate to planning for transition services, determined?
      □ Personal Interviews □ Comments at Meeting □ Functional Vocational Evaluations □ Age appropriate transition assessments □ Other ______________
   d) Summarize student preferences/interests as they relate to planning for transition services:

   ___________________________________________________________

3. Age Appropriate Transition Assessment(s) performed: (Specify assessment(s) and dates administered)

4. Agency Participation:
   a) Were any outside agencies invited to attend the PPT meeting? □ Yes with written consent □ No (If No, MUST specify reason as listed in the IEP Manual)
   b) If yes, did the agency’s representative attend? □ Yes □ No
   c) Has any participating agency agreed to provide or pay for services/linkages? □ Yes □ No (If Yes, specify) ______________

5. Post-School Outcome Goal Statement(s) and Transition Services recommended in this IEP
   a) Post-School Outcome Goal Statement - Postsecondary Education or Training:
      □ Annual goal(s) and related objectives regarding Postsecondary Education or Training have been developed and are included in this IEP
      __________________________________________________________
   b) Post-School Outcome Goal Statement - Employment:
      □ Annual goal(s) and related objectives regarding Employment have been developed and are included in this IEP
      __________________________________________________________
   c) Post-School Outcome Goal Statement - Independent Living Skills (if appropriate):
      □ Annual goals and related objectives regarding Independent Living have been developed and are included in this IEP (may include Community Participation)

6. Please select ONLY one:
   □ The course of study needed to assist the child in reaching the transition goals and related objectives will include (including general education activities):
   □ Student has completed academic requirements; no academic course of study is required – student’s IEP includes only transition goals and services

7. At least one year prior to reaching the age of 18, the student must be informed of her/his rights under IDEA which will transfer at age 18.
   □ NA (Student will not be 17 within one year) □ The student has been informed of her/his rights under IDEA which will transfer at age 18 □ No IDEA rights will transfer

8. For a child whose eligibility under special education will terminate the following year due to graduation with a regular education diploma or due to exceeding the age of eligibility, the Summary of Performance will be completed on or before: (specify date)

Parents please note: Rights afforded to parents under the Individuals with Disabilities Education Act (IDEA) transfer to students at the age of 18, unless legal guardianship has been obtained.
Okay... "How do you do. My name is Tarzan and I believe you are known as Jane."

"Allow me to introduce myself... I am Tarzan, Lord of the Jungle... And you?"

"You must be Jane... I am Tarzan. It's a pleasure to meet you."

"There she is."

"Me Tarzan! You Jane!

"Damn."
Education transition video
COLLABORATION: HEALTHCARE TRANSITION AND EDUCATION TRANSITION
You've been sitting here for hours. Where's your friend?

We're playing doctor.
Barrier’s to Educators’ including HCT in IEP

- lack of awareness of the HCT process (72%)
- lack of knowledge/information about HCT (64%)
- lack of funding (54%)
- lack of perceived mandate to include health issues (51%)
- perception that health issues are a low priority for transition IEPs (50%)

Repetto and colleagues (2008)
ICHET Model

Maintenance of Health for Positive Adult Outcomes

Advocacy

Planning

Collaboration

Instruction
What we have done, part II

- Class
- Presentations
- Poster
- Article submission
- Grant submission
- Pilot study???
Online Interdisciplinary Graduate Course: Healthcare and Education Transition
3 credits

Degree: Master of Arts in Education with a specialization in Healthcare and Social Work

Objective: EEX 6936: Health Care Transition (HCT) is designed to prepare professionals for leadership roles in healthcare and social work settings. This course integrates healthcare and social work theories, research, and practice to develop skills in coordination, management, and delivery of healthcare services. Students will learn to effectively address the needs of diverse populations and collaborate with interdisciplinary teams.

Course Overview:

Welcome to EEX 6936: Health Care Transition (HCT) - An Interdisciplinary Approach. This course is designed for professionals in healthcare and social work who wish to enhance their knowledge and skills in the management and delivery of healthcare services. The course covers a range of topics, including the healthcare system, patient-centered care, and ethical considerations. Students will engage in discussions, assignments, and projects that focus on interdisciplinary collaboration and evidence-based practice.

Course Structure:

- Week 1: Introduction to Healthcare and Social Work
- Week 2: The Healthcare System
- Week 3: Patient-Centered Care
- Week 4: Ethical Considerations in Healthcare
- Week 5: Leadership in Healthcare Management
- Week 6: Interdisciplinary Collaboration

Assignments:

- Modules 1-5: Weekly Assignments
- Week 6: Final Project

Exams:

- Module Quizzes
- Midterm Exam
- Final Exam

Grading:

- Participation and class attendance (10%)
- Weekly assignments (20%)
- Module quizzes (15%)
- Midterm exam (20%)
- Final project (25%)

Course Coordinator:

Dr. Jane Smith
Department of Healthcare and Social Work
University of Florida
Email: janesmith@ufl.edu

Contact Information:

For questions or comments, please contact the course coordinator at janesmith@ufl.edu or call (352) 273-5555.

References:


For more information, visit the course website at https://www.ufl.edu/college-of-education/health-care-transition.
The Interdisciplinary Collaborative on Healthcare and Education Transition (ICHET): An Integrative Approach

Jeanne Repetto, PhD1, Susan Horky2, MSW, LCSW, Angela Miney, BA2, John Reiss, PhD3,
Arwa Saidi MB, BCH1

Department of Special Education, University of Florida College of Education, Gainesville, FL1
Department of Pediatrics, University of Florida College of Medicine, Gainesville, FL2

INTRODUCTION

• People with CF are living well into adulthood, necessitating preparation for independent self-management of their CF and preparation for participation in a vocational or career choice.
• Health Care Transition (HCT) and Education Transition (ET) exist as parallel processes.
• Health care providers do not know about ET and rarely include educational/vocational items in a HCT plan.
• Education professionals do not know about HCT and rarely include health issues in an ET plan.
• Integration of HCT and ET could enhance, and make more effective, the transition experience for teens, families and professionals from both disciplines.

BACKGROUND/NEE

HCT is still in its infancy. Although the need for HCT has been clearly identified, few standardized approaches to HCT have been developed or evaluated (Kennedy & Sawyer, 2008).

• Few articles mention educational or vocational aspects of transition and virtually none fully incorporate this into HCT.
• The Individuals with Disabilities Education Act (IDEA) of 1990 as well as amendments in 1997 and 2004, mandate transition services for students with disabilities by the age of 16, addressing instruction, community experiences, employment, post-secondary living skills, vocational training and related services.

METHODS

• Development of the Interdisciplinary Collaborative on Health Care and Education Transition (ICHET).
• ICHET’s mission is “to enhance service, provide training and conduct research which supports the successful, comprehensive transition of youth and young adults with special healthcare needs and disabilities from pediatric to adult-oriented healthcare; from school to higher education and employment and from adolescence to adulthood and the ongoing pursuit of dreams and ambitions.”
• Members include educators, physicians, social workers, family members and policy experts.
• Other interested professionals are invited to attend, and have attended, ICHET meetings.
• Members meet bi-weekly to plan and implement collaborative activities and to explore the communication challenges inherent in bringing education and healthcare together. During these meetings an online graduate course, articles, research projects and other activities are developed.

APPROACHES

Integration of ET and HCT

CONCLUSIONS

• Healthcare Transition and Education Transition should be integrated, depending on the capabilities of the systems and the individual teen’s unique needs.
• Each profession has much to offer the other. Coordination/collaboration will save time and energy and will make the process better for the teen and family.
• Good health leads to increased ability to work and play, better preparation of students for their futures, less frustration for teachers, less administrative/system time spent on helping students make up missed days/work, so both fields will benefit.

REFERENCES

• Kennedy A and Sawyer S. Transition from pediatric to adult services, are we getting it right? Curr Opin Pediatr 20: 403–409
Title: Field Testing the Interdisciplinary Education-Health Care Transition (E-HCT) Model
Where we are headed...

- To find ways to help integrate HCT and ET:
  - Planning
  - Instruction
  - Collaboration
  - Advocacy

Repetto et al, submitted for publication, 2010
Planning

- Medical information is included as a basis for IEP goals
- IEP team is extended to include medical personnel
- Career goals are an explicit part of HCT planning
Planning

- Health care planning includes how to manage health while also working.

- Educational/personnel provide resources and technical assistance to healthcare personnel.

- HCT occurs at time of graduation, where appropriate.
Instruction

- Links between health and work are clearly identified
- Students are given health-related self-determination and advocacy skills training
- Medically related work/school adaptations and accommodation are identified
Instruction

- Academic skills and curriculum materials that can be used to aid self management of healthcare are developed.

- Develop HCT teaching modules, sample transition IEP goals, and program guidelines with supporting forms.
Methods of communication among service providers are provided.

Education and healthcare educate each other on their disciplines’ culture and language (e.g., website, workshop, pamphlet).

Methods to accommodate HIPAA and FERPA restrictions are implemented.
Collaboration

- Delivery of transition-related services is coordinated and shared between health and education

- Inservice and preservice education to teach professionals about HCT and ET are provided (e.g., online courses for credit or CEUs; workshops, pamphlets)

- Family members are part of E-HCT team
Collaboration (cont’d)

- Transition-related information and training is provided in a coordinated manner.

- Families’ strengths in facilitating E-HCT are identified.

- Healthcare team provides ongoing support to parents and family members during the transition process.
Advocacy/Policy

- Develop policies and procedures for communication and coordination of services among school and medical personnel at national, state and local levels

- Convey the need for E-HCT through inservice, pamphlets, case studies, and advocacy by families, students and professionals
Advocacy/Policy

- Provide staff development for healthcare professionals and educators on E-HCT
- On-going evaluation of E-HCT procedures and programs is in place
- Health and education professionals advocate for the expansion of current funding/mandates to include E-HCT.
<table>
<thead>
<tr>
<th><strong>What educator’s need</strong></th>
<th><strong>How healthcare can help</strong></th>
</tr>
</thead>
<tbody>
<tr>
<td>Maintenance of health for optimal educational and vocational success</td>
<td>Education about skills needed to maintain health</td>
</tr>
<tr>
<td>Identification of skills that will aid students in maintaining health</td>
<td>Education about skills needed to maintain health</td>
</tr>
<tr>
<td>Understanding of restrictions to student learning/working and types of accommodations that may be necessary</td>
<td>Provision of information about health restrictions and accommodations needed</td>
</tr>
<tr>
<td>Information about maintenance of health insurance</td>
<td>Education about health insurance</td>
</tr>
<tr>
<td>Psychosocial support in transition process</td>
<td>Provision of psychosocial support to family</td>
</tr>
<tr>
<td>Assistance with health concerns about student</td>
<td>Provide help with health concerns</td>
</tr>
<tr>
<td>What HCPs need</td>
<td>How educators can help</td>
</tr>
<tr>
<td>-------------------------------------------------------------------------------</td>
<td>--------------------------------------------------------------------------------------</td>
</tr>
<tr>
<td>Helping patients learn to manage illness/disability</td>
<td>Teach skills to be used in self-management of health (math, planning/organizing/life skills) and tie to healthcare</td>
</tr>
<tr>
<td>Helping patients learn to manage medical appointments</td>
<td>Teach skills to be used in self-management of health (math, planning/organizing/life skills) and tie to healthcare</td>
</tr>
<tr>
<td>Teaching patients to communicate effectively with team (in visits, and calling clinic if symptoms increase)</td>
<td>Teach strong written and verbal skills, teach assertiveness, build confidence, and tie to healthcare</td>
</tr>
<tr>
<td>Teaching patients to manage insurance coverage</td>
<td>Teach strong written and verbal skills, teach assertiveness, build confidence, and tie to healthcare</td>
</tr>
<tr>
<td>Teaching patients to order medications</td>
<td>Teach skills to be used in self-management of health (math, planning/organizing/life skills) and tie to healthcare</td>
</tr>
<tr>
<td>Accessing services for disabled (e.g., student office for disabilities) and knowledge of vocational resources</td>
<td>Teach about services/accommodations; help plan for work and school</td>
</tr>
</tbody>
</table>
Thank you!

Questions?