

## ADOLESCENTS SUCCESSFULLY *MOVING ON... WITH DIABETES*

PAM TALBOT*	MSc	Diabetes Care Program of Nova Scotia	Halifax	NS	Canada	Included
NATALIE SULLIVAN	BSW	Diabetes Care Program of NS	Halifax	NS	Canada	Included
ELIZABETH CUMMINGS	MD	Dalhousie Univ/IWK Health Ctr	Halifax	NS	Canada	Included
MARGARET DUNBAR	MEd, CDE	Diabetes Care Program of NS	Halifax	NS	Canada	Included

### BLINDED VERSION

**Purpose:** Successful transition from paediatric to adult diabetes care is a challenge, prompting over a decade of sustained provincial focus on facilitating this transition through the development of a provincial strategy inclusive of a standardised process accompanied by patient/provider forms, resources and, most recently, the addition of a transition coordinator. Tools were developed in collaboration with adult and pediatric diabetes teams, youth and parents. To determine if this focus resulted in change, transition rates were examined for youth with type 1 diabetes transitioning to adult care in 2006-2015.

**Methods:** Records from a Diabetes Registry were used to determine the proportion of youth with diabetes, 15-20 years of age at their last visit to a tertiary care paediatric facility in calendar years 2006-2015, who transitioned into adult care within 12 and 24 months.

**Results:** On average, 30 youth were transition candidates annually (N=308) with equal numbers of males and females. The majority (84%) were 17-18 years old. The rate of successful transition by 12 months after the last paediatric visit increased from 49% in 2006 to 76% in 2015 (57% increase), and by 24 months, from 63% to 90% (42% increase). There were larger increases in successful transitions in 2010 and 2015, coinciding with the release of Youth Transition Educator Resources and the introduction of a Youth Transition Coordinator.

**Conclusions:** Sustained focus on youth transition with standardized processes and supporting materials was associated with increased rates of successful transition to adult care.

### UNBLINDED VERSION

**Purpose:** Successful transition from paediatric to adult diabetes care is a challenge, prompting over a decade of sustained provincial focus on facilitating this transition through the development of a provincial strategy inclusive of a standardised process accompanied by patient/provider forms, resources and, most recently, the addition of a transition coordinator. Tools were developed in collaboration with adult and pediatric diabetes teams, youth and parents. To determine if this focus resulted in change, transition rates were examined for youth with type 1 diabetes transitioning to adult care in 2006-2015.

**Methods:** Records from the Diabetes Care Program of Nova Scotia Registry were used to determine the proportion of youth with diabetes, 15-20 years of age at their last visit to the IWK Health Centre in calendar years 2006-2015, who transitioned into adult care within 12 and 24 months.

**Results:** On average, 30 youth were transition candidates annually (N=308) with equal numbers of males and females. The majority (84%) were 17-18 years old. The rate of successful transition by 12 months after the last paediatric visit increased from 49% in 2006 to 76% in 2015 (57% increase), and by 24 months, from 63% to 90% (42% increase). There were larger increases in successful transitions in 2010 and 2015, coinciding with the release of Youth Transition Educator Resources and the introduction of a Youth Transition Coordinator.

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