



Sample Health Care Transition Feedback Survey for Youth

Six Core Elements of Health Care Transition 2.0

This is a survey about your experience changing from pediatric to adult health care. You may choose to answer this survey or not. Your responses to this survey are confidential.

1. How often did your previous health care provider explain things in a way that was easy to understand?
 Always
 Usually
 Sometimes
 Never
2. How often did your previous health care provider listen carefully to you?
 Always
 Usually
 Sometimes
 Never
3. Did your previous health care provider respect how your customs or beliefs affect your care?
 A lot
 Some
 A little
 Not at all
4. Did your previous health care provider discuss with you or have an office policy that informed you at what age you may need to change to a new provider who treats mostly adults?
 Yes
 No
5. Did you talk with your previous health care provider without your parent or guardian in the room?
 Yes
 No
6. Did your previous health care provider actively work with you to gain skills to manage your own health and health care (e.g., know your medications and their side effects, know what to do in an emergency)?*
 A lot
 Some
 A little
 Not at all
7. Did your previous health care provider actively work with you to think about and plan for the future (e.g., take time to discuss future plans about education, work, relationships, and development of independent living skills)?*
 A lot
 Some
 A little
 Not at all
8. How often did you schedule your own appointments with your previous health care provider?
 Never
 Sometimes
 Usually
 Always
9. Did your previous health care provider explain legal changes in privacy, decision-making, and consent that take place at age 18?
 Yes
 No
10. Did your previous health care provider actively work with you to create a written plan to meet your health goals and needs?*
 Yes
 No
11. Did your previous health care provider create and share with you your medical summary?
 Yes
 No
12. Did your previous health care provider have information about community resources?
 Yes
 No
13. Do you know how you will be insured as you become an adult?*
 Yes
 No

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14. Did your previous health care provider assist you in identifying a new adult provider to transfer to?
 Yes
 No
15. Did your adult health care provider have your medical records before your first visit?
 Yes
 No
 Don't Know
 Have not had first visit yet
16. Did you feel prepared to change to an adult health care provider?
 Very prepared
 Somewhat prepared
 Not prepared
17. At what age did you change to an adult health care provider?

Age _____

18. How could your pediatric health care provider have made your move to an adult health care provider better?

Thank you.

*Adapted from the National Survey of Children's Health