

## TRAINING ADULT RHEUMATOLOGY FELLOWS IN YOUNG ADULT TRANSITION AND TRANSFER SKILLS

Rebecca Sadun, MD, PhD; Duke University  
Gary Maslow, MD, MPH; Duke University  
Richard Chung, MD, Duke University  
Lisa Criscione-Schreiber, MD, MED; Duke University

**Background:** The transition from pediatric to adult healthcare is a vulnerable time for adolescents and young adults (AYA) with chronic conditions. Across the health professions, there is increasing data that inadequate transition care and abrupt transfer lead to AYA patients falling out of care and may result in severe health consequences. Although there are published best practice guidelines for AYA transition and transfer, curricula for teaching transition guidelines, skills, and utilization of transition tools have not yet been described.

**Objectives:** We designed and evaluated a workshop to teach adult rheumatology fellows key AYA transition care and transfer skills.

**Methods:** A 1-hour skills-based workshop on transition and transfer best practices was developed alongside an objective standardized clinical examination (OSCE) station in which trainees welcomed a young adult with lupus – and her parent – to a first visit in an adult clinic. Adult rheumatology fellows (n=19) from five institutions were asked to self-assess their ability to perform ten transition/transfer skills pre- and post-workshop on a Likert scale from 1 (“not at all prepared”) to 4 (“completely prepared”). The OSCE evaluation rubric assessed five transition/transfer skills on a Likert scale of 1-5, with 5 being the best performance. Twelve fellows were assessed de novo in the OSCE, and seven were evaluated by OSCE after workshop participation. Aggregated pre- and post-workshop survey responses were compared using Fisher’s exact test, and OSCE scores were compared using an unpaired *t*-test.

**Results/Outcomes/Improvements:** After participating in the workshop and OSCE, fellows reported feeling more prepared in all ten identified transition/transfer skills, achieving statistical significance in eight of the ten. In addition, OSCE performance was better in the group of fellows that participated in the workshop prior to the OSCE (average score of 4.3) than in the group that took the OSCE de novo (average score of 3.3,  $p=0.01$ ). Of the five transition skills measured by the OSCE, the three that manifested statistically higher post-workshop performances were: 1) highlighting differences between adult and pediatric care and setting expectations ( $p<0.01$ ); 2) placing the patient in the primary role and utilizing the parent for corroboration ( $p<0.05$ ); and 3) performing a confidential adolescent social history ( $p=0.01$ ). There was a trend towards improved performance for assessing AYA self-management skills, whereas there was no significant change in assessing barriers to transition and medication adherence. A control skill scored on the OSCE, assessing patient and parent understanding of the disease process, was not higher in the post-workshop group.

**Significance/Implications/Relevance:** This educational intervention increased adult rheumatology fellows’ confidence with many transition/transfer skills and their ability to apply transition best practices in a simulated transfer of care setting. Making this curriculum available to trainees in all fields and across medical professions could improve health outcomes for young adult patients transferring from pediatric to adult care in multiple settings. Further exploration is needed to determine optimal teaching strategies to train pediatric providers in supporting the development of AYA self-management skills, enhance communication between pediatric and adult providers, and equip adult providers with rapport-building skills for working with young adults.