**Background/Problem Statement**

Our Hemophilia Treatment Center at Yale is centrally based in the Department of Pediatrics, where all patients with hemophilia or carriers of hemophilia are cared for throughout their lifetime, regardless of age. During the 2014 Patient Needs Assessment Survey, the lack of a clear transition process for patients was brought out as an area for improvement in our practice. Given that our hemophilia patients and families continue to receive their care from childhood through adulthood with the same providers, there is no physical transition of care that often accompanies the emotional and intellectual transition to accessing healthcare as an adult.

A change in our practice to include a more formalized transition process for these patients would make the concept of transition more apparent and allow for more open communication regarding the importance of taking responsibility for one's own health and healthcare needs.

**Global Aim**

We aim to improve adolescent transition in the Yale HTC.

**Specific Aim**

Increase the number of patients ages 18-22 years seen in comprehensive clinic that have discussed and documented age appropriate hemophilia transition and milestones. Will expand to patients aged 12-18 years in the next cycle of testing, once process is standardized.

**Objectives**

- Use in eligible patients in Comprehensive Clinic
- Future analysis of patient achievement

**Results**

It is great that you are doing this, I feel like I already know all of this stuff, but I guess there are other people my age who don’t.

- 18yo M with severe Hemophilia A
- I think people are going to respond well to the assessment, but what if they need help with something? Do you have handouts or pamphlets or something?

- 19yo F with moderate Hemophilia A
- This is great! Can I get a copy?

- 21yo M with severe Hemophilia A

**Summary**

The Yale HTC providers have developed an improved quality improvement capability through the Quality Improvement Learning Collaborative partnering with ATHN and The Dartmouth Institute Micsystems Academy (TDIMA).

Through careful reflection and self-assessment in the 5 P’s evaluation, the development of global and specific aims allowed the team to clarify our comprehensive clinic flow, choose and modify a patient assessment tool and develop our first PDSA cycle.

Successful implementation of the milestone tool within our clinics will allow us to better understand patient needs and provide optimal care to our patients and families.

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**References**