Implementation of a Pediatric to Adult Epilepsy Transition Clinic

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Purpose

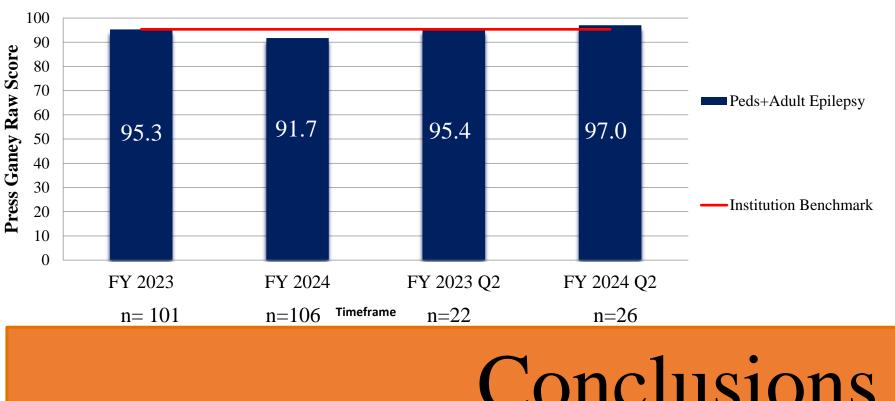
The implementation of a pediatric-to-adult epilepsy healthcare transition clinic (HCT) aims to improve the patient experience by delivering comprehensive care during the transition from pediatric to adult care.

Background

- Epilepsy is a complex condition that often requires comprehensive care across the lifespan.
- Adolescence is a fundamental time to lay the foundation for good health practices.
- Healthcare Transition (HCT) aims to improve adolescents' ability to manage their healthcare, effectively use health services, and ensure an organized process to facilitate transfer to the adult epilepsy setting.
- Lack of Structured HCT:
 - Non-adherence to the treatment plan
 - Discontinuity of care
 - Higher healthcare service utilization
 - Patient dissatisfaction
- Patient experience has a positive association with ۲ outcomes.
- HCT offers comprehensive approaches that address psychosocial concerns and focus on improving patient experience through holistic support and effective communication.

An NP-led comprehensive HCT clinic using the Six Core Elements approach was piloted at an ambulatory epilepsy clinic at an academic institution in central Virginia from October to December 2024.

The primary measure was to compare patient experience before and during the pilot, using data collected by the Press Ganey Patient Experience SurveyTM. The survey looked at pediatric and adult patients in the neurology clinic with an epilepsy diagnosis. LIKELIHOOD OF RECOMMENDING



- •
- promote sustainability.

Methods

SIX CORE ELEMENTS[™] APPROACH AND TIMELINE FOR YOUTH TRANSITIONING FROM PEDIATRIC TO ADULT HEALTH CARE



Results

Conclusions

The secondary measures pertained to specific patients scheduled in the Epilepsy HCT clinic. EHR data was used to evaluate attendance, access to healthcare providers, seizure action plan completion, and ED/Hospital Admissions.

Scheduled	12	Percentage
No Show	5/12	42%
Attended	7/12	58%
Seizure Action Plan Offered	7/7	100%
Seizure Action Plan Completed	3/7	42%
Access to HCP/My Chart	5/7	71%
Emergency Department/Admission	0/12	0%



HCT clinics provide age-specific education that improves patient knowledge and communication with the neurology team.

Further quality improvement cycles are necessary to look at the patient experience in adolescents with epilepsy through alternative surveys.

Will reevaluate the literature to address psychosocial concerns in this population to



SCHOOL of NURSING

References

