The service requires no additional resources and therefore does not require any significant investment.

The approach taken here is scalable. Centres looking to set up a similar service model are advised to:

- Ensure patients are at the forefront of care and that services are built around and their healthcare journey.
- Frame the service improvement around the term “adolescent” to help engage both paediatric and adult teams, as adolescents present specific challenges.
- Identify consultant rheumatologists with an interest in the 16–25 age group who are willing to advocate the service model in adult rheumatology.
- Assess what resources are available and work out how these can be deployed best to aid transition to adult services.

**PATIENT FOCUS AND SATISFACTION**

- The aim of the transition service at Sheffield is to provide individualised DAH.
- The service encourages self-management to support teenagers’ transition to adult care.
- An annual event is held with patients, as an opportunity for them to provide ideas on improvements to the service.
- The sports centre clinic was introduced based on feedback from the young adult patients who said they did not feel comfortable attending hospitals.
- Results from a patient satisfaction survey of the uveitis service demonstrated that:
  - 100% of parents and 91% of patients felt “very satisfied” with the information provided by the clinic.
  - 100% of patients and 84% of patients felt “very satisfied” that the information about future arrangements was clear and understandable.
  - 60% of parents and 75% of patients felt “very satisfied” that an adolescent-friendly environment had been created.
- In response to this feedback, the site decided to redecorate the waiting area as part of a wider redevelopment project, to create a more adolescent friendly environment.
- 80% of parents and 91% of patients thought that the attitude of staff was “very good”.

**REFERENCES**