

## 1. Dignity, Value & Worth: People First, Disability Second

Attitude is shown in many ways. Youth who have grown up with health issues have experienced a range of feelings and a range of responses from others.

Your office is the place they should receive full respect and dignity and not feel they are being pitied. Routinely check to ensure that all staff, including you, use "People First" language in both speaking and writing. Seek guidance from a youth leader.

## 2. Informed Decision-Making: Assent to Consent

Children and youth who have known health issues need to know how to manage them at an early age. Whenever possible, involve them in decision-making at an early age. Living with intense issues can be a positive experience as one can learn creative problem solving.

Encourage children and youth to bring questions to their appointments, or to fax or email questions before or after visits. At the beginning of your interview, ask for a status report: How is school, friends, fun times and then health issues. When permission signatures are required, encourage minors to co-sign as evidence of "assent."

Promote the practice of carrying a one-page medical summary along with their insurance card. Practicing these skills at an early age is essential.

## 3. Appointments: Balancing Health, Living & Learning

Some youth have numerous medical providers who assist in coordinating their comprehensive care. Trying to arrange medical appointments that meet health needs and that do not put a dent on youth's learning time, plus meet your office schedule, requires some flexibility. Try to avoid assigning next appointment dates, unless the youth know their educational and recreation dates to avoid.

Encourage "tweens & teens" to make their own appointments. They will need to clear available dates with their families, school and recreation schedules. Encourage staff to be patient and flexible when "tweens & teens" calls in for an appointments.

## 4. Youth Centric: Access & Appearance

When you have an inviting office design and décor, you send a welcoming signal that you want your patients to be part of your practice. Waiting rooms are standby areas that can be calming or not. Cluster-seating with wide aisles ensures that everyone has space to move around. Avoid seating areas that are in rows.

Are there pictures/posters that reflect diversity and varying abilities that represent the community? Does the receptionist greet patients first before asking them to show their insurance cards? Are the parking spaces for people with disabilities wide enough for vans with lifts? Are these spots far from garden areas that restrict exit space? Is the entrance easy to access, even during bad weather? Is the bathroom spacious, equipped with hand bars, and has a changing table?

## 5. Got an Idea? Information & Solutions Bank

Among other reasons, people come to your office to get answers. Appointment times are often time-limited; why not allow your patients to take advantage of the "wait time"?

Encourage children and youth, and their families, to post questions and solutions on index cards on a bulletin board. On a quarterly basis these could be typed in a "newsletter" that promotes wellness and stress reduction.

Could you place a computer in the waiting room to allow connections to support groups and other information sources? Filters can be installed to make sure visiting offensive web sites or chat rooms is prevented.

## 6. They Don't Need You as Much Anymore

While we attempt to be objective, it's hard not to get close to those who have been through more than one near death experience. The goal is to maximize health and reduce sickness and secondary disabilities. Issues of letting go are not limited to families.

The more you promote self-determination in your patients' health care, the more likely it is that they will have longer periods of wellness and will be out living their lives. This is the best compliment you can receive.

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HRTW Phase II Projects are currently active in Arizona, Iowa, Maine, Mississippi, and Wisconsin.

*The opinions expressed herein do not necessarily reflect the policy or position nor imply official endorsement of the funding agency or working partnerships*