

The Ready Steady Go transition plan - Go



The Ready Steady Go programme will help you manage your condition and look after yourself.



Please answer all the questions that are relevant to you and ask if you are unsure.



Your medical team and family will help you along the way.



Name: _____

Date: _____

Knowledge and skills	Yes	I would like some help	Comment
KNOWLEDGE - WHAT I KNOW			
I am confident in my knowledge about my condition and its management			
I understand what is likely to happen with my condition when I am an adult			
I look after my own medication			
I order and collect my repeat prescriptions and book my own appointments			

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Knowledge and skills	Yes	I would like some help	Comment
 I call the hospital myself if there is a question about my condition or treatment			
SELF ADVOCACY - SPEAKING UP FOR YOURSELF			
 I feel confident to be seen on my own in clinic			
 I understand my right to confidentiality			
 I know it is important to be involved in any decisions about me			
 I know how to use 'Ask 3 Questions'			
HEALTH AND LIFESTYLE - LOOKING AFTER MYSELF			
 I understand it is important to exercise for my general health and condition			

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Knowledge and skills	Yes	I would like some help	Comment
 I understand the risks of alcohol, drugs and smoking to my health			
 I know what food is good for me and not good for me			
 I know how my condition can affect me as I get older			
 I know where I can get information about sexual health			
 I understand the impact of my condition and medication on pregnancy and parenting			

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Knowledge and skills	Yes	I would like some help	Comment
DAILY LIVING			
 I can look after myself at home - like dressing and washing myself			
 I can make my own meals and snacks			
 I can stay away from home overnight and know what I should do if I want to go on holiday			
 I know which benefits I can claim			
 I can or am learning to drive			

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Knowledge and skills	Yes	I would like some help	Comment
SCHOOL AND WHEN I LEAVE SCHOOL OR COLLEGE			
 I have had work or volunteering experience			
 I have a plan for the future			
 I know the impact my condition could have on my plans			
 I know what to tell a future employer about my condition			
 I know who to contact for advice			

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Knowledge and skills	Yes	I would like some help	Comment
LEISURE - MY FREE TIME			
 I can use public transport and get to the shops, leisure centre or cinema			
 I see my friends outside of school or college			
MANAGING EMOTIONS - MY FEELINGS			
 I know how to deal with mean comments and bullying			
 I know someone I can talk to when I feel sad or fed-up			
 I know how to deal with emotions such as anger or anxiety			

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Knowledge and skills	Yes	I would like some help	Comment
 I am comfortable with the way I look			
 I am happy with life			
TRANSITION			
 I understand why I am on the 'Ready Steady Go' programme			
 I know the plan for my care when I am an adult			
 I have met the adult team who will be looking after me			
 I have all the information I need about the adult team who will be looking after me			

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