

Sample Goals for the Health Care Transition Readiness Assessment for Students with an IEP

If a student has responded “No” or “I want to learn” to any of the items on the Health Care Transition Readiness Assessment, please use the following sample goals as a guide when creating goals in the IEP transition plan.

HCT READINESS ASSESSMENT ITEM	SAMPLE GOAL
MY HEALTH	
I can name my disability, medical, or mental health diagnosis (e.g. diabetes, depression).	With instruction from the special education teacher/school counselor/school nurse, student will be able to say aloud and/or spell out and/or enter into their cell phone the name(s) of their medical or mental health diagnosis(es), with ___% accuracy, by the end of the IEP cycle.
I can name 2-3 people who can help with my disability, medical, or mental health needs in an emergency.	With instruction from the special education teacher, student will be able to input their emergency contacts’ information on their phone and name and identify the contacts in their phone when asked, with ___% accuracy, by the end of the IEP cycle.
Before a doctor’s visit, I prepare questions to ask.	With instruction from the special education teacher and Got Transition’s resource, student will prepare and practice asking a few questions to their doctor before their next appointment, with ___% accuracy, by the end of the IEP cycle.
I know to ask the doctor’s office for accommodations, if needed.	With instruction from the special education teacher, student will know which accommodations they need to request at a doctor’s office, with ___% accuracy, by the end of the IEP cycle.
I have a way to get to my doctor’s office.	With instruction from the special education teacher, student will know how to plan transportation to their doctor’s office ahead of time, with ___% accuracy, by the end of the IEP cycle.
I know the name(s) of my doctor(s).	With instruction from the special education teacher, student will be able to input their doctor’s contact information on their phone and name and identify their doctor in their phone when asked, with ___% accuracy, by the end of the IEP cycle.
I know or I can find my doctor’s phone number.	With instruction from the special education teacher, student will be able name and identify their doctor in their phone when asked, with ___% accuracy, by the end of the IEP cycle.
I know how to make my doctor’s appointments.	With instruction from the special education teacher, student will learn to know how to call their doctor’s office or use an online portal to schedule a future appointment, with ___% accuracy, by the end of the IEP cycle.
I carry my health information with me every day (e.g. insurance card, emergency phone numbers).	With instruction from the special education teacher, student will keep their insurance card safely in their wallet/backpack or take a photo of it and store it on their phone and be able to retrieve the insurance card when asked, with ___% accuracy, by the end of the IEP cycle.
I know my food allergies.	With instruction from the special education teacher/school counselor/school nurse, student will be able to say aloud and/or spell out and/or enter into their cell phone the name(s) of the foods they are allergic to, with ___% accuracy, by the end of the IEP cycle.

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<i>HCT READINESS ASSESSMENT ITEM</i>	<i>SAMPLE GOAL</i>
MY MEDICINES	
I know the name of the medicines I take.	With instruction from the special education teacher/school counselor/school nurse, student will be able to say aloud and/or spell out and/or enter into their cell phone the name(s) of their medicines, with ___% accuracy, by the end of the IEP cycle.
I know the amount of the medicines I take.	With instruction from the special education teacher/school counselor/school nurse, student will be able to say aloud and/or spell out and/or enter into their cell phone the dosages of their medicines, with ___% accuracy, by the end of the IEP cycle.
I know when I need to take my medicines.	With instruction from the special education teacher/school counselor/school nurse, student will be able to identify at what time to take their medicines, with ___ % accuracy, by the end of the IEP cycle.
I know how to read and follow the direction labels on my medicines.	With instruction from the special education teacher/school counselor/school nurse, student will be able to identify, read, and follow the directions on their medicines, with ___ % accuracy, by the end of the IEP cycle.
I know what to do when I run out of my medicines.	With instruction from the special education teacher/school counselor/school nurse student will learn to call their doctor's office or pharmacy to ask about medication refills, with ___ % accuracy, by the end of the IEP cycle.
I know my medicine allergies.	With instruction from the special education teacher/school counselor/school nurse, student will be able to say aloud and/or spell out and/or enter into their cell phone the name(s) of the medicines they are allergic to, with ___% accuracy, by the end of the IEP cycle.