

PPS-PCP Launch Parallel Residency Curriculum on Adolescent-to-Young Adult Health & Transition Care

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Manila, Philippines – The Philippine Pediatric Society (PPS) and the Philippine College of Physicians (PCP) officially rolled out their groundbreaking Parallel Residency Curriculum on Adolescent-to-Young Adult Health & Transition Care during a hybrid event. This milestone addresses a critical gap in healthcare: the transition of healthy adolescent as well as patients with chronic conditions from pediatric to adult care systems. Dr. Wilfredo R. Santos, PPS Vice President, representing our PPS President Dr. Cesar M. Ong, and Dr. Nemencio A. Nicodemus Jr., President of PCP, led the ceremony with key stakeholders from both specialties.

The Parallel Residency Curriculum addresses the issues of all adolescents-to-young adults, both apparently well and those who are chronically ill. The approach for the first group emphasizes largely on preventive and promotive health, and avoidance of risk-taking behaviors using a structured self-management skills program, where HEADSSSS assessment, a psychosocial screening tool, figures most relevant during data-gathering. The second group, consisting of chronically ill patients growing into the adolescent stage & as young adults, similarly focuses on shying away from risk-taking behaviors but with additional consideration of taking care of their chronic conditions. The structured program for the latter is usually led by a multidisciplinary team.

The Challenge and the Solution

According to the 2016 and 2020-2021 National Survey of Children's Health in the United States, moving to adult healthcare is difficult for 83% of youth with special health needs and 86% without special health needs. The challenges include pediatricians' reluctance to let go due to lack of training in health care transition (HCT) and adolescent-to-young adult (AYA) issues, barriers from the health system including patients' reluctance to leave their pediatrician, and internists' lack of training in both HCT/AYA issues and childhood-onset diseases.

To address this challenge, both medical societies joined forces to create a residency curriculum that emphasizes healthcare transition to be purposeful, planned and timely from child to adult model health care. This underscores that successful transition requires deliberate planning and continuity of care, not merely transferring patients from one doctor to another. The speakers emphasized that structured transition programs are essential, and the PPS-PCP guideline provides institutions with a standardized framework to integrate

transition care into residency training programs. In addition, the collaborative development of this parallel curriculum has strengthened the critical partnership between PPS and PCP, creating the inter-specialty coordination essential for effective transition care. From literature, having a successful AYA health transition care showed increased adult visit attendance, improvement in adherence to care, improved self-care skills, improved perceived health status and quality of life, and decreased hospitalization rates. This will also adhere to the life-stage approach of Universal Health Coverage, promoting preventive health care, and providing continuity of quality health care throughout the lifespan.

Pediatric and Adult Medicine Perspectives

Dr. Emma A. Llanto, Chair of the PPS Adolescent Health & Transition Care Committee, presented the pediatric perspective emphasizing capacity building using a shared management model that moves from childhood care to adolescence and young adulthood with shared decision making and self-management. The first consultation and beyond should establish continuous relationships with patients, explain confidentiality and its limits, actively encourage lone consultation, remain open and assume nothing, and continue psychosocial screening and health promotion. Pediatric care must prepare all children for the adult model of care, including preventive health care for well children and those with special health care needs.

Dr. Daveric A. Pagsisihan, Member of the PCP Residency Training Committee and Chair of the PCP Subcommittee on Transitioning, presented the internal medicine perspective focusing on the continuum of care from pediatric to adult health care. This includes providing preventive health care for all young adults, continuing care for those with chronic illnesses from childhood, and managing non-communicable diseases. The infrastructure development requires policies, joint clinics, linkages through joint conferences, training programs, and curriculum development. The transition map shows progression from pediatric clinics through transition clinics to internal medicine clinics for comprehensive care.

Collaborative Development and Implementation

The curriculum development was a collaborative effort from August 2021 to January 2022, involving the Philippine Society of Adolescent Medicine Specialists (PSAMS). The online course includes eight comprehensive modules developed by a team of experts covering all aspects of adolescent and young adult health and transition care. The team also included Dr. Melflor A. Atienza, Dean of the National Teachers Training Center for Health Professions at the University of the Philippines Manila, serving as consultant.

A robust panel discussion followed the presentations, moderated by Dr. Vanessa Maria F. Torres-Ticzon, President of the Philippine Society of Adolescent Medicine Specialists. The distinguished panel included Dr. Madeleine Grace M. Sosa, Chair of PPS Hospital Accreditation Board (HAB) Subcommittee on Curriculum, Dr. Cherry T. Abu, Chair of PCP Residency Training Committee, Dr. Anna Karenina V. Causapin, Assistant Secretary of the PPS Inc & HAB, with Dr. Emma Llanto, Dr. Daveric Pagsisihan, and Dr. Melflor Atienza. Our guest speakers addressed questions about implementation strategies, resource requirements, and best practices for establishing transition care programs across the Philippines.

The Curriculum

The curriculum is built on the Six Core Elements™ approach with a structured timeline. Starting at age 12-14, healthcare providers develop and share transition policies. From ages 14-18, they track progress using registries, assess self-care skills and offer education on identified needs, and develop HCT plans with medical summaries. Between ages 18-21, patients transfer to adult-centered care and adult practices. Finally, from ages 18-23, transfer completion is confirmed, and patient feedback is elicited.

The guideline provides comprehensive infrastructure requirements including mandatory elements such as transition policies, transition champions, transition registries, adolescent/joint transition clinics, and young adult clinics. Optional elements include transition coordinators and social service workers. Adolescent clinics can be separate or integrated with designated times, while young adult clinics should operate during afternoon to early evening hours or Saturdays with longer appointments and reviewed attendance policies.

This parallel residency curriculum represents a paradigm shift in Philippine medical training. For the first time, residents in both pediatrics and internal medicine will receive comprehensive, standardized training in adolescent-to-young adult health and transition care. This collaboration aims to reduce healthcare discontinuity, improve health outcomes for adolescents and young adults with chronic conditions, enhance patient and family satisfaction, foster stronger collaboration between specialties, and establish the Philippines as a leader in transition care within Southeast Asia.

Commitment to the Curriculum

The formal ceremonies featured declarations from both societies committing to curriculum implementation and a ceremonial exchange of curriculum manuals between Dr. Santos and Dr. Nicodemus, joined by Dr. Melinda Atienza from PPS HAB and Dr. Abu from PCP. This exchange symbolized the collaborative nature of the initiative. Attendees participated in a

Commitment Wall Signing, demonstrating their collective endeavor to improve transition care throughout the Philippines. The event concluded with both Dr. Santos and Dr Nicodemus declaring that the "...parallel residency curriculum shall be implemented immediately".

For the PPS, the implementation guidelines will be incorporated in the revised Hospital Accreditation Manual which will be disseminated during the HAB Summit on April 27, 2026. PCP will also disseminate its own guidelines during a pre-convention session in May 2026.

Masters of Ceremonies: Dr. Edwin V. Rodriguez (PPS) and Dr. Rodney M. Jimenez (PCP)

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