# HEEADSSS Assessment

<table>
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<tr>
<th>Title of Guideline (must include the word “Guideline” (not protocol, policy, procedure etc))</th>
<th>Guideline for the use of the HEADSSS psychosocial assessment in young people</th>
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</thead>
</table>
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| Directorate & Speciality | Family Health; Adolescent |
| Date of submission | Dec 2016 |
| Date on which guideline must be reviewed | Dec 2019 |
| Guideline Number: | 2138 |
| Explicit definition of patient group to which it applies (e.g. inclusion and exclusion criteria, diagnosis) | This guideline applies to all young people aged 10 to 19 years |
| Abstract | Formal structure for the assessment of young people under 18 years. |
| Key Words | HEADSSS Adolescent |

## Statement of the evidence base of the guideline – has the guideline been peer reviewed by colleagues?

1a meta analysis of randomised controlled trials

2a at least one well-designed controlled study without randomisation

2b at least one other type of well-designed quasi-experimental study

3 well –designed non-experimental descriptive studies (ie comparative / correlation and case studies)

4 expert committee reports or opinions and / or clinical experiences of respected authorities

5 recommended best practise based on the clinical experience of the guideline developer

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<th>Consultation Process</th>
<th>International assessment tool</th>
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<td>Target audience</td>
<td>All staff working in Children’s Hospital</td>
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This guideline has been registered with the trust. However, clinical guidelines are guidelines only. The interpretation and application of clinical guidelines will remain the responsibility of the individual clinician. If in doubt contact a senior colleague or expert. Caution is advised when using guidelines after the review date.
Summary of changes for new version:

1. Change of HEADSSS to HEEADSSS
2. Update of introduction
3. Addition of section on eating behaviours
4. Update of safety section
5. Change of terminology (teenager to young person)
6. Addition of weblink to e-LFH

Statement of Compliance with Child Health Guidelines SOP

This guideline has had only minor changes made and therefore this version has not been circulated to all for review. A previous version had been approved by circulation to senior team members.

Martin Hewitt
Clinical Guideline Lead
15 December 2016
Adolescents and the HEEADSSS Assessment

Effective communication with young people presents a number of specific challenges and requires empathy, mutual trust and respect. This guideline provides some guidance on specific consultation skills that should be employed when seeing young people. It is known that:

- Confidentiality is greatly valued by teenagers who are in contact with health care professionals however young people have a poor understanding of the limits of confidentiality
- Psychosocial morbidities (such as obesity, smoking and risky sexual behaviour) often co-exist in young people.
- Young people with chronic illness are more at risk of psychosocial morbidity
- than their healthy peers.

The HEEADSSS assessment, is a widely used psychosocial assessment which addresses health risk behaviours and resilience factors for young people. It has a yield of around 1 in 3 (this is much higher than other child health screening tools eg newborn examination which has a yield of around 1 in 20)

Meeting the Teenager and their Family for the First Time

It is important to concentrate on building a rapport from the outset of the consultation. The way in which you approach the young person may set the tone for the rest of the consultation.

It is helpful to meet the young person outside the consultation room

- Greet the adolescent first (remember to shake their hand)
- Ask the young person to introduce the rest of the family
- Begin by seeing the young person on their own and then bring in the family.

A major advantage of seeing young people on their own is that increases the chance that we can understand their perspective, concerns and agenda. In some circumstances it may be appropriate to see the young person with their parents/carers first and then to see the young person alone (for example when the young person has had a seizure or collapse and third party witness account is required.. Rarely, you might need to speak with the parents alone before speaking to the young person. In such cases ensure the teenager understands why this is necessary.

Assuring Confidentiality

It is essential to assure young people that the content of your conversation will remain confidential, and that you will not discuss things with their parents without permission. It is important to state that confidentiality cannot be assured if the young person is at risk of harm (eg physical/sexual abuse or self harm) or if others would be at risk of serious harm.

“Anything we talk about today is confidential. That means I cannot tell others, including your parents, about it without your permission. The only exceptions would be if I thought you, or someone else, was at risk of serious harm. In that case I would need to tell someone else.”

Building rapport

This can be done by:

- Asking developmentally appropriate questions and avoid medical jargon
  - Open ended questions for older adolescents
  - Give alternatives for younger teenagers (eg which do you prefer maths or PE)
- Start with non-threatening topics (for example, if self harm is the presenting problem start with some questions about home or school)
- Listening to the teenager and giving them the chance to tell their story (resist the urge to jump in too soon to clarify)
- Take their concerns seriously – do not minimise their concerns
- Avoid lecturing teenagers – criticise the activity not the young person
- Minimise note-taking during the consultation
- Try not to make assumptions based on limited evidence (for example, that a sexual partner is of the opposite sex)
**The HEEADSSS Assessment**

**Home and relationships**
Who lives at home with you? Do you have your own room?
Who do you get on with best/fight with most? Who do you turn to when you feeling down?

**Education and employment**
Are you in school/college at the moment? Which year are you in?
What do you like the best/least at school/college? How are you doing at school?
What do you want to do when you finish?
Do you have friends at school? How do you get along with others at school?
Do you work? How much?

**Eating**
Are you worried about your weight or body shape? Have you noticed any change in your weight recently? Have you been on a diet? Do you mind telling me, how?

**Activities and hobbies**
How do you spend your spare time? What do you do to relax?
What kind of physical activities do you do?

**At this stage - reassure about confidentiality**

**Drugs, alcohol and tobacco**
Does anyone smoke at home?
Lots of teenagers smoke. Have you been offered cigarettes? How many do you smoke each day?
Many people start drinking alcohol as teenagers. Have you tried or been offered alcohol?
How much/how often?
Some young people use cannabis. Have you tried it? How much/how often?
What about other drugs, such as ecstasy and cocaine?

**Sex and relationships**
Are you seeing anyone at the moment? Are they a boy or girl?
Young people are often starting to develop intimate relationships? How have you handled that part of your relationship?
Have you ever had sex?
What contraception do you use?

**Self harm, depression and self image**
How is life going in general?
Are you worried about your weight?
What do you do when you feel stressed? Do you ever feel sad and tearful?
Have you ever felt so sad that life isn’t worth living? Do you think about hurting or killing yourself? Have you ever tried to harm yourself?

**Safety and abuse**
Do you feel safe at school/at home? Is anyone harming you? Is anyone making you do things that you don’t want to? Have you ever felt unsafe when you are online or using your phone?
Remember, this is a screening tool. It can be done well within 5-6 minutes. 1 in 3 HEEADSS assessments have been shown to pick up a problem in young adults, which could potentially be offered support to meet

In the e-learning for healthcare portal, there is a video example of a HEEADSS assessment which you might find to be useful.

www.e-lfh.org.uk/

Via the e-LFH portal got to the Adolescent Health Programme (AHP) > AH 04 - Communication and Consultation with Young People > 04_003 Gathering Information and Exploring Sensitive Issues

Examing Young People

Ask the teen whether they would like a parent present. Consider whether you need a chaperone.

Remember to ensure privacy for the teenager during the examination

Remember to:
- Plot height/weight and BMI
- Make an assessment of pubertal development
- Explain what you are going to do before you do it

References


