Youth Health and Wellbeing Assessment

Summary
This guideline presents the current best evidence for conducting a Youth Health and Wellbeing Assessment. It aims to inform practice for healthcare providers to achieve the best possible care in NSW.

This guideline is primarily targeted to clinicians caring for young people (aged 12-24) in a paediatric, adolescent or adult healthcare settings (in both hospital and community health settings). Clinicians are encouraged to take all appropriate opportunities to conduct Youth Health and Wellbeing assessment.

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Distributed to Ministry of Health, NSW Ambulance Service, Public Health System
Audience Clinical, Nursing, Emergency departments, Clinicians caring for young people (12-24 years old) in a paediatric, Adolescent, Adult healthcare setting (in both hospitals and community health settings)
PURPOSE
This guideline presents the current best evidence for conducting a youth health and wellbeing Assessment. Its purpose is to inform practice for healthcare providers to achieve the best possible care in NSW.

This guideline is primarily for clinicians caring for young people (12-24 years old) in a paediatric, adolescent or adult healthcare setting.

This guideline supports NSW Health’s commitment to implement appropriate psychosocial assessment tools, such as HEEADSSS, to assess and respond to the holistic health and wellbeing needs of young people outlined in the NSW Youth Health Framework 2017-2024 (PD2017_019).

KEY PRINCIPLES
Youth health and wellbeing assessments are important to assist clinicians to identify and respond early to areas of concern in a young person’s life that might affect their health and wellbeing.

The youth health and wellbeing assessment is not a diagnostic tool. It is a holistic, flexible approach designed to build rapport and engage with a young person in a clinical setting. The information gathered can then be used to directly address any concerns and/or refer a young person for a specialist response.

The most widely used youth health and wellbeing assessment tool in Australia and internationally is known as a HEEADSSS assessment.

Each letter of HEEADSSS reflects a major domain of a young person’s life. Capturing information in each domain helps reveal risks, behaviours and protective factors. It helps to identify areas of intervention where the clinician can work with the young person to achieve better health outcomes.

- H Home
- E Education and Employment
- E Eating and Exercise
- A Activities, Hobbies and Peer Relationships
- D Drug Use (cigarettes, alcohol)
- S Sexual Activity and Sexuality
- S Suicide, Self-Harm, Depression, Mood, Sleeping Patterns
- S Safety and Spirituality

In general, a youth health and wellbeing assessment (12-24 years old) should be conducted with every young person who attends a health service or hospital. Where appropriate young people in an adult or paediatric inpatient area within a hospital should have a youth health and wellbeing Assessment completed in conjunction with other screening assessment/admission processes.
Clinical judgement should be used to determine the appropriateness of the assessment for 12-24 year olds. This includes considering the young person’s health condition, maturity, the environment and health service context (for example, sufficient time or privacy may not be available in an Emergency Department context).

In general an assessment is done through conversation with a young person. On some occasions, where it is more appropriate a young person can be asked to complete the Youth Health and Wellbeing Assessment Chart (Appendix 1).

It is essential that clinicians/healthcare workers read and understand this guideline in particular Sections 6 to 11 of the Guideline.

- Section 6 Issues covered by a youth health and wellbeing assessment
- Section 7 When to conduct a youth health and wellbeing assessment
- Section 8 Youth health and wellbeing assessment flow diagram
- Section 9 Self-completed assessment using Youth Health and Wellbeing Assessment Chart
- Section 10 Setting up and concluding the assessment
- Section 11 Contraindications and cautions

**USE OF THE GUIDELINE**

This guideline should be considered when conducting Youth Health and Wellbeing Assessment with young people (12-24 years old) who attend a health service or hospital.

This document outlines the -

- approach that should be taken by NSW Health staff when conducting a youth health and wellbeing assessment (Sections 7 - 10)
- issues to consider when implementing the youth health and wellbeing assessment within different health settings and with different age groups (Sections 11 - 12)

A range of resources for workers are available to support Youth Health and Wellbeing Assessment when needed (Appendices 1 – 4).

The document should not be seen as a prescriptive set of rules to be applied without the clinical input and discretion of the managing health professionals. Each patient should be individually evaluated and a decision made as to appropriate management in order to achieve the best clinical outcome.

**REVISION HISTORY**

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<th>Version</th>
<th>Approved by</th>
<th>Amendment notes</th>
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<tr>
<td>February 2018</td>
<td>Deputy Secretary, Strategy</td>
<td>New Guideline to inform Youth Health and Wellbeing Assessment practice for healthcare providers to achieve the best possible care in NSW.</td>
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<tr>
<td>(GL2018_003)</td>
<td>and Resources</td>
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**ATTACHMENTS**

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1 PURPOSE

The guideline presents the current best evidence for conducting a youth health and wellbeing assessment. It provides information about the tools that can be used to conduct a youth health and wellbeing assessment, including HEEADSSS assessment interviews and the Youth Health and Wellbeing Assessment Chart (Appendix 1). The Chart is a NSW Health statewide form which gives an option for young people to self-complete a form on their health and wellbeing.

The guideline is not a prescriptive set of rules. It should be applied with clinical input and discretion of the managing health professionals. Each patient should be evaluated and a decision made as to appropriate management to achieve the best clinical outcome.

The guideline is primarily for clinicians caring for young people (12-24 years old) in a paediatric, adolescent or adult healthcare setting.

This guideline was developed by a representative group of senior youth health and paediatric clinicians.

2 SCOPE

This document outlines:

- the approach that should be taken and tools that can be used by NSW Health staff to conduct youth health and wellbeing assessments with young people
- issues to consider when conducting a youth health and wellbeing assessment within different health settings and with different age groups.

Youth health and wellbeing assessments are important to assist clinicians to identify and respond early to areas of concern in a young person’s life.

3 DEFINITIONS

Young person: an adolescent or young adult from 12 to 24 years.

Youth health and wellbeing assessment: a psychosocial assessment which covers a range of issues that are known to impact on a young person’s health and wellbeing including health risk behaviours, social and environmental factors, and protective factors.

HEEADSSS assessment: a recommended tool for conducting youth health and wellbeing assessments, usually conducted as a face-to-face interview with a young person.

Youth Health and Wellbeing Assessment Chart: a NSW Health State Health Form, based on a HEEADSSS assessment, which can be self-completed by a young person. This is used in circumstances where a face-to-face youth health and wellbeing assessment cannot be conducted.
4 CONTEXT

Most health problems that young people experience are psychosocial. This means they emerge as a consequence of health-risk behaviours, mental health problems and exposure to social and/or environmental risk factors. These factors can increase risk and have an impact on the health and wellbeing of the young person now and in the future.

A youth health and wellbeing assessment is a holistic, flexible approach that takes account of adolescent development and young people’s needs. It helps clinicians build rapport and engage with a young person while systematically gathering information about their life.

There is a range of screening and assessment tools used with young people that are designed around specific concerns such as mental health, drug and alcohol use or medical conditions. A youth health and wellbeing assessment is not a diagnostic tool.

Capturing information across a range of issues helps to reveal risks, behaviours and protective factors. The assessment is used to identify areas for intervention where a clinician can work with a young person to address concerns and achieve better health outcomes, including referral for a specialist response where needed.

5 OPTIONS FOR CONDUCTING A YOUTH HEALTH AND WELLBEING ASSESSMENT

In NSW Health, the following are the preferred options for clinicians when conducting a youth health and wellbeing assessment:

1. **Face-to-face HEEADSSS assessment interview** (see section 6 below) with a young person (focussing on some or all of the domains as needed); and/or

2. **Youth Health and Wellbeing Assessment Chart** in conjunction with review and follow up by a clinician. This Chart is based on a HEEADSSS assessment and provides an option for a young person to self-complete a form about their health and wellbeing.

The process used for undertaking a youth health and wellbeing assessment will often depend on the setting. For example what can be done in a youth health service is different to an Emergency Department.

If a clinician/healthcare worker follows option 2, it is mandatory to use the Youth Health and Wellbeing Assessment Chart which is an approved State Health Form. If concerns are identified, a face to face consultation will always be required.

All youth health and wellbeing assessments, identified concerns, action plans and referrals should be documented in the patient record according to the local system and protocol.

‘NSW Health will implement appropriate psychosocial assessment tools, such as HEEADSSS, to assess and respond to the holistic health and wellbeing needs of young people’

NSW Youth Health Framework 2017 – 2024
6 ISSUES COVERED BY A YOUTH HEALTH AND WELLBEING ASSESSMENT

Any youth health and wellbeing assessment should cover the range of psychosocial issues that can impact on a young person's health and wellbeing.

HEEADSSS assessment is the most widely used youth health and wellbeing assessment tool in Australia and internationally (Klein et al 2014). HEEADSSS is usually conducted as a face-to-face interview.

HEEADSSS is a mnemonic that stands for the following domains in a young person's life:

- **H** Home explores a young person's home situation, family life, relationships and stability
- **E** Education and Employment explores sense of belonging at school/work and relationships with teachers/peers/workmates; changes in performance
- **E** Eating and Exercise explores how they look after themselves
- **A** Activities, Hobbies and Peer Relationships explores their social and interpersonal relationships, risk-taking behaviour, as well as their attitudes about themselves
- **D** Drug Use (Cigarettes/Alcohol) explores the context of substance use (if any) and risk-taking behaviours
- **S** Sexuality Activity and Sexuality explores their knowledge, understanding, experience, sexual orientation and sexual practices; it explores any risk-taking behaviour and/or abuse
- **S** Suicide, Self-Harm, Depression, Mood, Sleeping Patterns explores risks of mental health problems, strategies for coping and available support
- **S** Safety and Spirituality explores sun screen protection, immunisation, bullying, abuse, traumatic experiences, domestic violence, risky behaviours, beliefs/religion: what helps them relax

7 WHEN TO CONDUCT A YOUTH HEALTH AND WELLBEING ASSESSMENT

In general, a youth health and wellbeing assessment should be conducted with every young person who attends a health service or hospital, particularly if it is the first time they are being seen. It is recommended that this be done for **all young people aged 12 – 24 years**. Where appropriate a young person should have a youth health and wellbeing assessment completed in conjunction with other screening assessment/admission processes. For example, in a paediatric or adult inpatient hospital setting a youth health and wellbeing assessment may be conducted alongside the admission form, statewide Paediatric Risk Assessment form, Paediatric Nursing Care Plan, or relevant adult risk assessment screening tools and care plans.
As noted above, there are two preferred options for undertaking a youth health and wellbeing assessment. The advantage of a face-to-face HEEADSSS assessment is that it can be tailored to the maturity of the young person and the particular issue that has led to their presentation. This is particularly useful when asking questions about sensitive issues such as sexual activity and drug use.

If there is only a short period of time in which to assess the young person, the clinician can start a HEEADSSS assessment as part of building rapport with the young person.

If the clinician starts the assessment as a conversation with the young person, they do not need to complete a comprehensive assessment at one meeting. They can pick up the conversation at the next meeting. Alternatively, where care is being provided by more than one clinician at one point in time, the clinician who initiates the youth health and wellbeing assessment as a conversation should let the young person know that they will pass information on and the assessment can be continued by another clinician.

There are some exceptions to the recommendation to routinely conduct a youth health and wellbeing assessment, such as when a young person is too unwell, or they have a significant cognitive impairment.

In providing healthcare for young people, a psychosocial assessment is as important as a physical examination. Young people in general welcome an opportunity to be able to address their healthcare in the context of their day to day life and normal psychosocial development.

The flow diagram below sets out the decision-making process about conducting youth health and wellbeing assessment.

**In general, a youth health and wellbeing assessment should be conducted with every young person aged 12-24 years who attends a health service or hospital.**

**Clinical judgement should be used to determine the appropriateness of the assessment. This includes considering the young person’s health condition, maturity, the environment and health service context (for example, sufficient time or privacy may not be available in an Emergency Department context).**
8 YOUTH HEALTH AND WELLBEING ASSESSMENT FLOW DIAGRAM

*Young person aged 12-24 years old presents to healthcare facility

Is it appropriate to conduct the assessment? (eg. well enough, cognitively competent, privacy)

No

Reassess appropriateness throughout admissions or visit

Yes

Are you able to conduct a face to face interview

No

*Use the self-completed Youth Health and Wellbeing Assessment Chart

Yes

Conduct a HEEADSSS Assessment

Any concerns identified?

No

Document in patient’s healthcare record

Yes

Review identified concerns and actions taken as appropriate

Provide appropriate response and document

Any concerns identified?

No

Document in patient’s healthcare record

Yes

Review identified concerns and actions taken as appropriate

Provide appropriate response and document

*Use clinical judgement to assess appropriateness for under 14 year olds and young people with a disability. Young people with a disability may require support to complete the form.
9 SELF-COMPLETED ASSESSMENT USING YOUTH HEALTH AND WELLBEING ASSESSMENT CHART

The Youth Health and Wellbeing Assessment Chart has been designed to be completed by young people in hospitals and community settings. The Chart reflects the domains in a HEEADSSS assessment. Copies of the Chart can be ordered through the Local Health District/Specialty Health Network Print Manager.

Before using the Chart, consideration should be given to the particular needs of young people with low literacy or English as a second language and young people with a disability. In these circumstances it is preferable for the HEEADSSS conversation to take place in person, providing support and using an interpreter when needed. Clinical judgement should be used to determine the appropriateness of any section of the assessment Chart for 12-14 year olds.

The Chart is not intended to replace a face-to-face HEEADSSS assessment. Rather, it offers a way to identify risk and protective factors for the clinician to then follow up with the young people and their family (as appropriate). For example, if there is only a short period of time in which to assess the young person, asking the young person to complete the Youth Health and Wellbeing Assessment Chart before they meet with a clinician can enable the clinician to use time more efficiently.

It is essential that all information provided by a young person on a Chart is reviewed by a clinician and an appropriate response made, such as a referral if necessary. This will usually require a conversation with the young person to clarify the information and to assess the level of risk and protective factors. The last clinician or healthcare worker who reviews the final assessment is to sign the Chart.

It is not recommended that young people be asked to complete the Youth Health and Wellbeing Assessment Chart if there is no capacity or process agreed for reviewing and responding to the information provided by the young person.

10 SETTING UP AND CONCLUDING THE ASSESSMENT

When conducting a youth health and wellbeing assessment, the clinician should use a consultative approach that communicates to the young person that the young person is an active partner in their healthcare and that they are in a safe and non-judgemental environment. This communication style is established when the clinician seeks consent to conduct a psychosocial assessment and explains confidentiality and its exceptions at the start of the consultation or meeting.

If a parent or carer is in attendance with a young person, a clinician should normally seek to have some time alone with the young person to conduct a HEEADSSS assessment. This should only occur if the young person is comfortable and the clinician considers it is appropriate for their age and level of understanding. This process needs to be managed sensitively and it can be useful for the clinician to reassure the parent or carer that it is normal practice with adolescents and that they will be brought back at the end of the session. Where the young person agrees, information can then be shared with them.
Similarly it is important that young people are supported to complete the Youth Health and Wellbeing Assessment Chart and that they have privacy to do so.

The HEEADSSS assessment is designed to move from less sensitive areas to more sensitive areas. However, it is important to remember that for some young people, the first item ‘HOME’ can be a difficult and highly sensitive area. It is useful to seek permission to ask sensitive questions prior to asking them.

Clinicians can use the *We Keep it zipped* youth friendly confidentiality resources to explain confidentiality to young people. The resources consist of a poster, a pocket-sized card and an online fact sheet.

The *We keep it zipped online fact sheet* covers:

- how personal health information is kept private
- when young people can make a decision about their own health
- situations where information needs to be shared.

To access these resources:

To order the *We keep it zipped* poster and pocket-sized card, please contact your Local Health District/Specialty Health Network’s Print Manager.

The HEEADSSS assessment is a flexible framework rather than a rigid series of questions and it should not be used as a checklist. The clinician should inquire into the domains in a young person’s life in a way that responds to what the young person says and does in the interview and takes account of the age and maturity of the young person.

This assessment enables the clinician to:

- build rapport
- weigh the risk factors and the protective factors in the young person’s life in order to look for opportunity to intervene earlier
- recognise the young person’s competencies
- identify strategies and supports e.g. “Who can you talk to when you’re feeling down?”

It is important for a clinician to avoid an interview that reinforces the young person’s problems or difficulties.

Appendix 2 contains information on education and training resources for staff who work in youth and non-youth specific healthcare services about adolescent health and development and conducting HEEADSSS assessments.
At the end of a youth health and wellbeing assessment a clinician should have a profile of:

- the young person’s psychosocial health
- specific risk and protective factors in their life
- areas for possible intervention.

The healthcare worker then has a strong basis on which to provide opportunistic health promotion information and early intervention, and negotiate further action with the young person. This includes options for accessing and referral to further support and services.

Appendix 3 contains a list of useful youth health resources and contacts for health professionals/healthcare workers, including emergency information.
Appendix 4 contains health-related resources and contacts for young people.

11 CONTRA-INDICATIONS AND CAUTIONS

A young person’s maturity level and understanding should always be considered when undertaking youth health and wellbeing assessment. The safety of young people is also a central part of this decision, particularly if there is potential for an escalation of conflict with parents should they become aware of risk taking behaviours. If time or privacy is not available to adequately address issues (for example if the parent insists on staying with their child) then the clinician may need to discuss issues generally and provide referral information as needed.

Risk factors and risk-taking behaviours occur in a context of development, and of protective factors and behaviours. When risks are identified and discussed with a young person, strengths and assets should also be identified and acknowledged.

Risk factors and risk-taking behaviours can change over time. The risks identified at one particular time in a young person’s life through a youth health and wellbeing assessment cannot be assumed to stay at the same level over time. The clinician should review the issues and actions identified in any previous assessments and then engage the young person in a conversation about any changes that have taken place in their life since they were last seen and whether actions were completed.

Culture and language must always be considered. It is important however that the clinician does not make assumptions about behaviours based on a young person’s cultural or religious background.

Respecting the difference – be aware of cultural differences of Aboriginal people. Refer to your local Aboriginal liaison officer or for further information see NSW Health Communicating positively – A guide to appropriate Aboriginal terminology.

If the clinician becomes aware of any concerns that relate to child protection and/or domestic violence, the mandatory reporter guide should be used and local child protection procedures followed.

If risks are identified relating to child protection, Child Wellbeing and Child Protection Policies and Procedures for NSW Health (PD2013_007) should be followed.
For risks identified relating to suicidality a health professional should follow NSW Health Policy on Clinical Care of People Who May be Suicidal (PD2016_007).

12 DOCUMENTATION

All youth health and wellbeing assessments, action plans and referrals should be documented in a young person’s patient record in line with local processes.

a. Community and youth health setting

Where other records systems are used in community settings, appropriate documentation should be completed and saved on the patient record in line with local community clinical documentation processes.

For example the HEEADSSS assessment is included as a tool in various sections within Community Health and Outpatient Care (CHOC) patient records system, including the:

- Community Adolescent Assessment (12-24 years old) form, and
- Out of Home Care Psychosocial and Mental Health Screen (for 12-18 year olds)

Notes can be made in each relevant section of CHOC. A management plan can also be recorded and agreed with the young person that can be updated as required.

If an assessment is made by using the Youth Health and Wellbeing Assessment Chart, the completed Chart (signed by reviewing healthcare worker) should be documented and filed in a progress note.

b. Young people in a hospital setting

Where appropriate, young people in an adult or paediatric inpatient or outpatient service should have a youth health and wellbeing assessment completed in conjunction with other screening or assessment.

This may be done through a face-to-face conversation and/or use of the Youth Health and Wellbeing Assessment Chart with review and follow-up. The method of assessment, whether face-to-face or by Chart, should be recorded on the Electronic Medical record as per local processes and the completed Chart (signed by reviewing healthcare worker) should be filed in the medical record. Any action taken as a result of the assessment should also be included on the medical notes.

In the interests of patient care it is critical that contemporaneous, accurate and complete documentation is maintained during the course of patient management from arrival to discharge.
## 13 APPENDICES - RESOURCES TO SUPPORT YOUTH HEALTH AND WELLBEING ASSESSMENT

<table>
<thead>
<tr>
<th>Appendix 1</th>
<th>Youth Health and Wellbeing Assessment Chart (example only)</th>
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<tbody>
<tr>
<td>A Chart for completion by young people in conjunction with review and follow up by a clinician.</td>
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<tr>
<td>To order this Chart, please contact respective Local Health District/ Specialty Health Network's Print Manager.</td>
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<tr>
<td>A full version of the Chart can also be viewed on the NSW Health website. Search for 'Youth Health and Wellbeing Assessment Chart'.</td>
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<th>Appendix 2</th>
<th>Training and development for workers</th>
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<td>Education and training with regards to adolescent health and development for staff who work in both youth and non-youth specific healthcare facilities.</td>
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<th>Appendix 3</th>
<th>Useful resources for workers</th>
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<td>This list consists of a range of youth health resources and contact for health professionals/ healthcare workers working with young people, including emergency information.</td>
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<th>Appendix 4</th>
<th>Youth health resources and contacts for young people</th>
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<tr>
<td>This is an example of relevant health information healthcare workers can provide for young people.</td>
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<tr>
<td>It is essential that health services know the other local services that support young people and how to refer to them. Young people should be provided with relevant, up to date and accurate health information.</td>
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Appendix 1: Youth Health and Wellbeing Assessment Chart
### Youth Health and Wellbeing Assessment (12-24 Years Old)

**Facility:**

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<th>PARENT NAME</th>
<th>NR</th>
<th>MALE</th>
<th>FEMALE</th>
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**ADDRESS:**

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<th>LOCATION/WARD</th>
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**COMPLETE ALL DETAILS ON ATTACHED PATIENT LABEL HERE**

### Education/Employment

- Do you attend school/AFE/Unversity/other education?  
  - [ ] **YES**  
  - [ ] **NO**  
  - If **YES**, where?  

- Do you have a job?  
  - [ ] **YES**  
  - [ ] **NO**  
  - If **YES**, for how many hours per week?  

- How do you feel you are coping with study/work?  
  - [ ] Well  
  - [ ] OK  
  - [ ] Not well  
  - [ ] Not at all  

- How many days of study/work have you missed in the last month? ______  
  - Why? __________

- If you don’t have a job, do you have a source of money?  
  - [ ] **YES**  
  - [ ] **NO**

### Eating and Nutrition

- Are you ever worried about your body image, weight or diet?  
  - [ ] **YES**  
  - [ ] **NO**

- Is anyone else worried about your body image, weight or diet?  
  - [ ] **YES**  
  - [ ] **NO**

- If **YES**, what have you done about these worries?  
  - __________

### Activities and Leisure

- Do you pay sports or exercise?  
  - [ ] **YES**  
  - [ ] **NO**

- What activities do you enjoy in your free time?  
  - __________

- Who do you enjoy spending time with?  
  - __________

- On average, how much time do you spend with friends that are NOT school or work related?  
  - __________

### Sleep

- What time do you go to bed?  
  - __________  
  - Wake Up? __________

- Do you have any sleeping problems?  
  - [ ] SOMETIMES  
  - [ ] OFTEN  
  - [ ] NEVER

### Mental Health

- Are you ever worried about your mood, anxiety or mental health?  
  - [ ] **YES**  
  - [ ] **NO**

- Is anyone else worried about your mood, anxiety or mental health?  
  - [ ] **YES**  
  - [ ] **NO**

- Have you or are you experiencing any form of bullying including online?  
  - [ ] **YES**  
  - [ ] **NO**

- In the past 12 months, have you thought about or done things to harm yourself?  
  - [ ] **YES**  
  - [ ] **NO**

- Have you ever spoken to anyone about your mood, anxiety or mental health?  
  - [ ] **YES**  
  - [ ] **NO**  
  - Whom __________

**Page 2 of 4**

**NO WRITING**

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**Issue date:** February-2018
<table>
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<tr>
<th>Substance</th>
<th>Not At All</th>
<th>Once or Twice</th>
<th>Monthly or More</th>
<th>Weekly or More</th>
<th>Daily</th>
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<td>Marijuana/Cannabis</td>
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<td>Hallucinogens (e.g. LSD, ketamine, mushrooms)</td>
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<td><img src="image19.png" alt="Image" /></td>
<td><img src="image20.png" alt="Image" /></td>
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<tr>
<td>Inhalants (e.g. glue, petrol, aerosols)</td>
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<td>Stimulants (e.g. speed, ice, cocaine)</td>
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<tr>
<td>Rital (e.g. Mdma, ecstasy)</td>
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<td><img src="image34.png" alt="Image" /></td>
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<tr>
<td>Opioids (e.g. heroin, oxycodone, oxone)</td>
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<tr>
<td>Other:</td>
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Have you ever injected drugs? **_NO_**
Are you worried about your substance use? **_NO_**
Is anyone else worried about your substance use? **_NO_**

**Relationships and Social Health**

Do you have any questions about your relationships? **_NO_**
Are you currently in a relationship? **_NO_**
Have you ever been engaged? **_NO_**

**Other Information**

Do you have a trusted person you can talk to if you have any problems? **_NO_**
Who is this person (e.g. friend, parent)?

Do you have any other worries you would like to talk about? **_NO_**

Details:

Completed by: **_NO_** Young Person **_NO_** Someone else:

Your name: ___________________________ Signature: ___________________________

Date: ______/____/____

END OF QUESTIONS - THANK YOU

NO WRITING
<table>
<thead>
<tr>
<th>Health Professional</th>
<th>Referral Made By</th>
<th>Date</th>
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<tr>
<td>Aboriginal Liaison Officer</td>
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<td>Adolescent GNC or Youth Nurse</td>
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<td>Adult Mental Health Service</td>
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<td>Carer Support Service</td>
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<td>Child and Adolescent/Youth Mental Health Service</td>
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<td>Child Protection Family Community Service</td>
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<td>Child Wellbeing Unit</td>
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<tr>
<td>Social Work</td>
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</table>

Was a Healthcare Interpreter used? □ YES □ NO
Details

Any concerns raised about Child Protection and/or Domestic and Family Violence then USE MANDATORY REPORTER GUIDE AND ACTIVATE LOCAL CHILD PROTECTION RESPONSE/PROCEDURE

Name: 
Signature: ____________________

Designation: ____________________ 
Date: __________/________/________

Page 4 of 4 NO WRITING
Appendix 2: Training and development

1. My Health Learning - HEEADSSS “Getting the conversation started”

My Health Learning Course Code: 99482031:
Duration: 30 Minutes: Published: Dec 2015

This module explores ways a health worker can use the HEEADSSS framework to engage a young person in a conversation that will assist with meeting their health and well-being needs.

Objectives
After completing this module workers will be able to:
- recognise the value of the HEEADSSS tool to engage, build rapport, and empower a young person to be an active partner in their own health
- use HEEADSSS to identify risk and protective factors that impact a young person's health
- confidently provide appropriate support and follow-up which assists in meeting the health and well-being needs of young people.
2. HEEADSSS assessment - working effectively with young people videos

**HEEADSSS assessment - working effectively with young people** is a video learning resource for health professionals about how to use HEEADSSS conversations to engage with young people and do a holistic health and wellbeing assessment. NSW Health workers can also view these videos as a learning pathway on [My Health Learning](https://my.health.nsw.gov.au) (Course codes: 159949091, 160031090, 160031203 and 160031204).

Visit the [NSW Health website](https://www.health.nsw.gov.au) for the four short videos:
- Video 1 – When HEEADSSS conversations with young people are crucial
- Video 2 – What a young person may bring to the conversation
- Video 3 – Useful tips for HEEADSSS conversations
- Video 4 – Developing a responsive management plan

3. Essential Youth Healthcare Skills training workshop

The *Essential Youth Healthcare Skills* one day face-to-face workshop aims to develop the skills of health professionals to:
- engage, assess and respond to the health needs and risks of young people
- reduce barriers to young people accessing health services

The workshop has been developed as part of the Youth Health Training Initiative being implemented by the Maternity, Child, Youth and Paediatrics Unit to make quality training in core youth health skills more widely available to NSW Health staff.

Trainers within Local Health Districts and Speciality Health Networks conduct these one day workshops.

Visit the [NSW Health website](https://www.health.nsw.gov.au) for more information on Youth Health and Wellbeing Training including the *Essential Youth Healthcare Skills* workshops.
4. Youth Health Resource Kit: An Essential Guide for Workers

The Youth Health Resource Kit assists workers to deliver effective and youth-friendly health services.

This Resource Kit contains information about:
- the specific health needs of young people (aged 12-24), including those who are most vulnerable
- skills and practical steps workers can use to respond effectively to young people.

Each section of the Kit is written by topic experts and has been carefully reviewed.

The Kit is useful for a wide range of health workers, with different skills and level of experience.

5. NSW Youth Health Framework 2017-2024

The NSW Youth Health Framework 2017-24 (PD2017_019) supports NSW Health to consider the health and wellbeing of young people aged 12 to 24 years when planning and delivering services.
Appendix 3: Useful resources for workers

Youth health resources and contacts (Please note that this is not an exhaustive list)

For urgent help

24/7 Phone helplines
Kids Helpline (up to age of 25 years) 1800 55 1800
Lifeline 131 114

Health services

Aboriginal Medical Services (AMS)
Provide a range of health services, including free medical services, social and emotional wellbeing support, sexual health, dental health) for the local Aboriginal & Torres Strait Islander communities. They can also help you get a Medicare card and give you general advice.

To find your local AMS in NSW go to Aboriginal Health and Medical Research Council
www.ahmrc.org.au (search under Members) or phone 02 9212 4777

General practitioners, hospitals or pharmacy
Search for your local service at National Health Services Directory on www.nhsd.com.au or Healthdirect Australia www.healthdirect.gov.au offers free after hours support on 1800 022 222

Youth Health Services
Headspace: www.headspace.org.au
NSW Health funded Youth Health Services: www.health.nsw.gov.au (search for 'Health Services for young people')

Health information and services by topics

Child protection
NSW Health Child Wellbeing Unit 1300 480 420
- The Child Wellbeing Unit phone line is open between 8.30am and 5.00pm, Monday to Friday.
- After hours please leave a message or use the After Hours Contact Form to provide some specific information about your concerns for a child or young person. The CWU will always respond on the next business day, using the contact details you provide.


Confidentiality
We keep it zipped Youth Friendly Confidentially resources
www.health.nsw.gov.au
search for 'Youth Friendly Confidentiality resources'

Disability
Family and Community Services Ageing, Disability and Home Care- Post School Programs

Family and Community Services Ageing, Disability and Home Care- Resources to support young people with a disability

National Disability Insurance Scheme
www.ndis.gov.au

Medicare card resources
Youth-friendly Medicare card resource
(eg. how young people can get their own Medicare card under different circumstances)
www.health.nsw.gov.au
search for 'Medicare Card resources'
Alcohol and other drugs information and services
your room

Alcohol Drug Information Service
(a confidential, anonymous information, advice and referral service)

Quit Smoking:

Mental Health
NSW Mental Health Line
24-hour mental health telephone access service

Beyond Blue
Reachout
Headspace

Parenting
I've been there (information for young parents)
Parent Line (Information and counselling for parents with young children)
Raising Children Network
(Teenage pregnancy and parenting as a teenager)

Supporting students in schools
Education public school

Sexual and reproductive health
Sexual Health Infolink
Information and referral line staffed by specialist sexual health nurses

Play Safe
Family Planning NSW

Sexual assault and domestic/family violence
Sexual Assault, Domestic and Family Violence Counselling service
NSW Domestic and Family Violence line
NSW Rape Crisis Centre

NSW Health Sexual Assault Services

Transition care for young people with chronic illness
Agency for Clinical Innovation (ACI) Transition Care Network
Trapeze (Sydney Children’s Hospitals Network)
General health information and healthy lifestyle support
- Health issues and services: [www.healthdirect.gov.au](http://www.healthdirect.gov.au) or [1800 022 222](http://1800 022 222)

Other Support

LGBTI young people
  Metro Support: 02 8594 9555
  *Rural: 1800 184 527 (3pm -12am)
- Qlife: [www.qlife.org.au](http://www.qlife.org.au)
  1800 184 527 (3pm-12am)
- GLBTI national counselling service

Homeless/housing
- Link2Home (24/7)
  The service is for people who are homeless or who are worried they will become homeless, as well as for advocates acting on a person's behalf.
  NSW statewide homelessness information, assessment and referral telephone service: [www.housing.nsw.gov.au](http://www.housing.nsw.gov.au) search for 'link2home'
  1800 152 152

Young carers
- Carers Australia: [www.youngcarers.net.au](http://www.youngcarers.net.au)
- Carers NSW: [www.carersnsw.org.au](http://www.carersnsw.org.au)
- Mental health carers NSW: [www.arafmi.org](http://www.arafmi.org)
- Young carers NSW: [www.youngcarersnsw.org.au](http://www.youngcarersnsw.org.au)
Appendix 4: Resources for young people

Youth health resources and contacts
(Please note that this is not an exhaustive list)

For urgent help

24/7 Phone helplines
In case of fire, medical or police emergency, dial 000
Kids Helpline (up to age of 25 years) 1800 55 1800
Lifeline 131 114

Health services

Aboriginal Medical Services (AMS)
Provide a range of health services (including free medical services, social and emotional wellbeing support, sexual health, dental health) for the local Aboriginal & Torres Strait Islander communities. They can also help you get a Medicare card and give you general advice.

To find your local AMS in NSW go to Aboriginal Health and Medical Research Council www.ahmrc.org.au (search under Members) or phone 02 9212 4777

General practitioners, hospitals or pharmacy
Search for your local service at National Health Services Directory on www.nhsd.com.au or Health Direct Australia www.healthdirect.gov.au. Health Direct Australia offers free after hours support on 1800 022 222

Youth Health Services
Headspace: www.headspace.org.au
NSW Health funded Youth Health Services: www.health.nsw.gov.au (search for ‘Health Services for young people’)

Health information and services by topics

Alcohol and other drugs information and services
your room yourroom.health.nsw.gov.au
Alcohol Drug Information Service, 02 9361 8000 (Sydney) or 1800 422 599 (Rural, regional NSW)
Quit Smoking: www.icanquit.com.au

Confidentiality
We keep it zipped Youth Friendly Confidentially resources: www.health.nsw.gov.au (search for ‘Youth Friendly Confidentiality resources’)

Disability
Family and Community Services Ageing, Disability and Home Care- Post School Programs www.adhc.nsw.gov.au/sp/delivering_disability_services/post_school_programs
National Disability Insurance Scheme www.ndis.gov.au
Medicare card resources
Youth Friendly Medicare card resources: www.health.nsw.gov.au (search for ‘Medicare card resources’)

Mental health
NSW Mental Health Line (24/7) 1800 011 511
Beyond Blue www.youthbeyondblue.com
Reachout www.reachout.com
Headspace www.headspace.org.au

Parenting
Parenting- I’ve been there for your young parents www.ivebeenthere.org.au
Parenting- Information and counselling service for parents with young children www.parentline.org.au 1300 1300 52
Raising Children Network raisingchildren.net.au (search for Teenage pregnancy and parenting as a teenager)

Supporting students in schools
Education -public school www.schools.nsw.edu.au (‘our school at a glance’ - an A to Z of information about public schools)

Sexual and reproductive health
Family Planning NSW www.fpnsw.org.au Talkline 1300 658 886
Sexual Health www.playsafe.health.nsw.gov.au

Sexual assault and domestic/family violence
Domestic Violence and Sexual Assault Helpline www.1800respect.org.au 1800 737 732
NSW Rape Crisis Centre www.nswrapecrisis.com.au online counselling or phone counselling 1800 424 017
NSW Health Sexual Assault Services: www.health.nsw.gov.au (search for ‘Sexual Assault Services’)

Transition care for young people with chronic illness
Trapeze- www.trapeze.org.au 02 8303 3600

General health information and healthy lifestyle support
Health coaching www.gethealthynsw.com.au
Health issues and services www.healthdirect.gov.au or 1800 022 222
Our health our way resources www.health.nsw.gov.au (search for ‘Our health our way’)
Tips for healthy living www.makehealthynormal.nsw.gov.au
Your Health Link www.yourhealthlink.health.nsw.gov.au (Check out ‘Youth plus 12-25’)

Other support
Homelessness/Housing
Link2home: www.housing.nsw.gov.au/help-with-housing/specialist-homelessness-services/find-a-service/link2home or 1800 152 152 (24/7); The service is for people who are homeless or who are worried they will become homeless, as well as for advocates acting on a person’s behalf.

LGBTI youth
Qlife – GLBTI national counselling service www.qlife.org.au 1800 184 527 (3pm-12am everyday)

Young carer
Carers Australia www.youngcarers.net.au
Carers NSW www.carersnsw.org.au (search for ‘young carer’)
ON FIRE (hosted on One Door Mental Health website) www.onedoor.org.au/services/youth-support/on-fire
Appendix 5: References


Appendix 6: Working Party

Sandra Babekuhl (chair)  Paediatric Clinical Nurse Consultant, Children’s Healthcare Network, Northern Region
Camilla Askie        Clinical Practice Improvement Coordinator, John Hunter Children’s Hospital
Jacqueline Ballard   Paediatric Clinical Nurse Consultant, Children’s Healthcare Network, Western Region
Danielle Bos         Paediatric Clinical Nurse Consultant, Children’s Healthcare Network, Southern Region
Kate Butler          SCHN Network Manager-Quality, Sydney Children’s Hospitals Network
Chrissy Ceely        Network Manager Patient Safety, Sydney Children’s Hospitals Network
Dr Sally Gibson      Manager, Youth Health and Wellbeing, Maternity, Child, Youth and Paediatrics, NSW Health
Heather Grigg        Clinical Nurse Educator, Paediatrics, Royal North Shore Hospital
Margaret Hayes       District Coordinator, Child and Youth Health, Children Young People and Families Services
Chelsey Helliwell    Paediatric Clinical Nurse Consultant, ACT Health
Nicola McKay         Paediatric Clinical Nurse Consultant, Children’s Healthcare Network, Western Region
Kylie Stark          Nurse Manager, Emergency Department, Sydney Children’s Hospitals Network – Randwick
Prof Kate Steinbeck  Medical Foundation Chair in Adolescent Medicine, Academic Department of Adolescent Medicine, The University of Sydney
Kate Tolley          Clinical Nurse Consultant, Youth Health, Northern Sydney Local Health District
Wui-Ken Yap          Policy Officer, Youth Health and Wellbeing, Maternity, Child, Youth and Paediatrics, NSW Health

Consultation:
Clin Prof David Bennett  Former Senior Clinical Advisor, Youth Health and Wellbeing, Maternity, Child, Youth and Paediatrics, NSW Health

Acknowledgements
The Youth Health and Wellbeing Assessment Chart draws in particular on the Youth Care Plan developed by the Royal Prince Alfred Hospital, Sydney Local Health District and the Youth Care Plan developed by the Royal North Shore Hospital, Northern Sydney Local Health District. The success of these Youth Care Plans provided impetus for the development of the Youth Health and Wellbeing Assessment Chart.