

DIGITAL PSYCHOSOCIAL SCREENING FOR ADOLESCENTS AND YOUNG ADULTS PROCEDURE [®]

DOCUMENT SUMMARY/KEY POINTS

- Adolescents and Young Adults (AYA) are at risk of adverse health events that can have lifelong effects. These can be identified and addressed through routine psychosocial screening
- Psychosocial assessment is considered as important as physical assessment in the AYA population
- Psychosocial screening can help clinicians identify strengths and vulnerabilities and establish care pathways for adolescents and young adults (AYA)
- As well as identifying strengths and vulnerabilities, psychosocial assessment provides an opportunity for education and health promotion with AYA patients.
- Young people are more likely to disclose vulnerabilities in a digital format
- This document outlines the processes involved in administering, reviewing and responding to areas of concern identified during psychosocial screening via the digital HEEADSSS (home environment, education/employment, eating, peer-related activities, drugs, sexuality, suicide/depression and safety) assessment tool, on a platform known as TickiT[®].

Approved by:	SCHN Policy, Procedure and Guideline Committee	
Date Effective:	1 st December 2021	Review Period: 3 years
Team Leader:	Network Manager, Youth and Diversity	Area/Dept: Priority Populations

CHANGE SUMMARY

- N/A – new document

READ ACKNOWLEDGEMENT

- Training Required – psychosocial training is required for all staff needing to use the Tickit® platform
 - HEEADSSS Assessment learning video resource:
<https://www.health.nsw.gov.au/kidsfamilies/youth/Pages/heedsss-videos.aspx>
 - My Health Learning - HEEADSSS “Getting the conversation started”
- Staff working with adolescents who are administering the HEEADSSS psychosocial tool using Tickit® are to read and acknowledge they understand the contents of this document.

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Purpose/Scope

Routine screening of psychosocial risk factors in adolescents has been recommended since 2008, by the Royal Australasian College of Physicians (RACP). [NSW Health Youth Health and Wellbeing Assessment guideline](#) recommends that a youth health and wellbeing assessment be conducted with every young person who attends a health service or hospital, particularly if it is the first time they are being seen. The most widely used youth health and wellbeing assessment tool in Australia and internationally is known as a HEEADSSS assessment. The HEEADSSS assessment covers: Home, Education and employment, Eating and exercise, Activities, hobbies and peer relationships, Drug use, Sexual activity and sexuality, Suicide, self-harm, depression, mood, sleeping patterns, and Safety and spirituality. The tool has been adapted for use in the SCHN context based on feedback from patients, carers and clinicians.

A recent publication (Ho et al, 2019) found that digital screening in adolescent patients at the SCHN who live with a chronic condition, elicited a higher disclosure rate through digital screening and provided a more consistent record of response compared to documentation from a semi-structured interview. Digital screening should **always** be followed up with an interpersonal interview.

Each department who uses digital psychosocial screening is responsible for ensuring that patients who are screened are appropriately followed up and need to develop their own internal workflows. **This guideline provides a framework to support teams to use the Tikit® platform, which provides a digital interface for screening and reviewing the HEEADSSS assessment tool. It should be used in conjunction with the [NSW Health Youth Health and Wellbeing Assessment guideline](#).**

Assessment Criteria

Best practice encourages the young person to complete the assessment in private and independent of their carer. A clinician is responsible for determining the appropriateness of using the HEEADSSS tool with the young person. As a guide, anyone over the age of 12 without a significant intellectual disability should be considered. When the assessment tool is given to the patient, they should be advised that their responses will be reviewed with their clinician and all concerning responses discussed. Privacy and confidentiality need to be discussed clearly, to be within the constraints of mandatory reporting obligations and requirements involving documenting in the eMR. The young person should be made aware that their responses are stored securely and will be uploaded to their medical record.

Patients should not be screened if they are:

- In an active state of behavioural disturbance
- Currently affected by drugs or alcohol
- Displaying aggressive behaviours
- Deemed at high risk of absconding

- Displaying advanced signs of escalating behaviour
- Have a significant physical or cognitive disability preventing the use of the digital platform
- Assessed to be unsafe to complete the assessment and do not have their own device
- Medically unstable
- Considered to be significantly negatively triggered by the assessment
- Not proficient in English and therefore unable to complete the assessment

Expected results

In reviewing the assessment, the young person might identify strengths and also risks. The [Youth Health and Wellbeing Assessment](#) guideline provides a list of resources to support clinicians (page 18 onwards).

There are three categories of results: green flags (or strengths), orange flags and red flags. The red flags are questions that relate to safety (e.g. sexual safety, safety at home, suicide, self-harm and general safety). The red flags need to be followed up in a timely and considered way by the clinician who has ordered the assessment.

Responsibilities

It is the responsibility of the clinician who requests the young person complete the assessment to review the results in a timely manner and determine and document an appropriate management plan. This ensures any risks are mitigated and comprehensive care can be provided.

Equipment and supplies

- An electronic device such a smartphone or tablet and internet connectivity are required to complete the assessment.

Procedure: Conducting digital screening

1. The young person is identified as appropriate for digital psychosocial screening by the clinician based on an assessment.
2. The clinician explains to the young person the purpose of the assessment and that the results will be uploaded into the eMR. They outline their responsibilities around mandatory reporting if any significant safety risks are disclosed. They may delegate this task to an appropriately trained administration officer.
3. The clinician orders a HEEADSSS assessment through the eMR. The HEEADSSS Assessment Quickstarts can be searched on Learning.Kids. You can search "HEEADSSS" or "HEADSSS" and both guides will be listed or found directly.

OR these Quickstarts can also be found here:

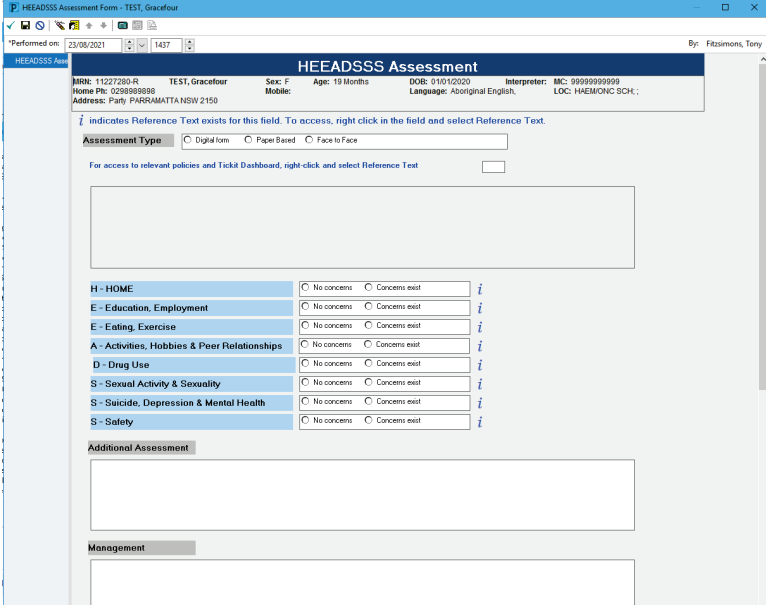
- Ordering a HEEADSSS Assessment:
<https://learning.schn.health.nsw.gov.au/ordering-heeladsss-assessment-request>
- Managing a HEEADSSS Assessment:
<https://learning.schn.health.nsw.gov.au/managing-received-heeladsss-assessment-survey>

4. When the assessment is complete, the results will appear in the eMR in the flowsheet/results section. There are 5 questions which have been identified as 'red flags' which will appear as alerts in the eMR until they are de-escalated by a clinician completing the ad hoc form. These concern areas of;

- a. Sexual safety
- b. Safety at home
- c. Self-harm
- d. Suicide
- e. General safety

5. The clinician will review the results in the eMR and document their detailed follow up assessment and plan using the HEEADSSS ad hoc form, noting if the risks remain or have been managed. The form can be found in multiple locations in the eMR including the Trapeze folder, AMU Service folder and the General Forms folder.

- If the risks are still requiring intervention, set these to "Ongoing risk"
- If all risks are managed, set these to "No ongoing risk". This resolves/removes the Alert from the patient Problem List.



The ad hoc form will create a note titled HEEADSSS Assessment in Documentation/ContinuousDoc

Reference

1. Ho, J., Fong, C. K., Iskander, A., Towns, S., & Steinbeck, K. (2020). Digital psychosocial assessment: An efficient and effective screening tool. *Journal of paediatrics and child health*, 56(4), 521-531.

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