It's all in your HEEADSSS:



Evaluating junior doctors' use of psychosocial assessment in adolescent admissions.

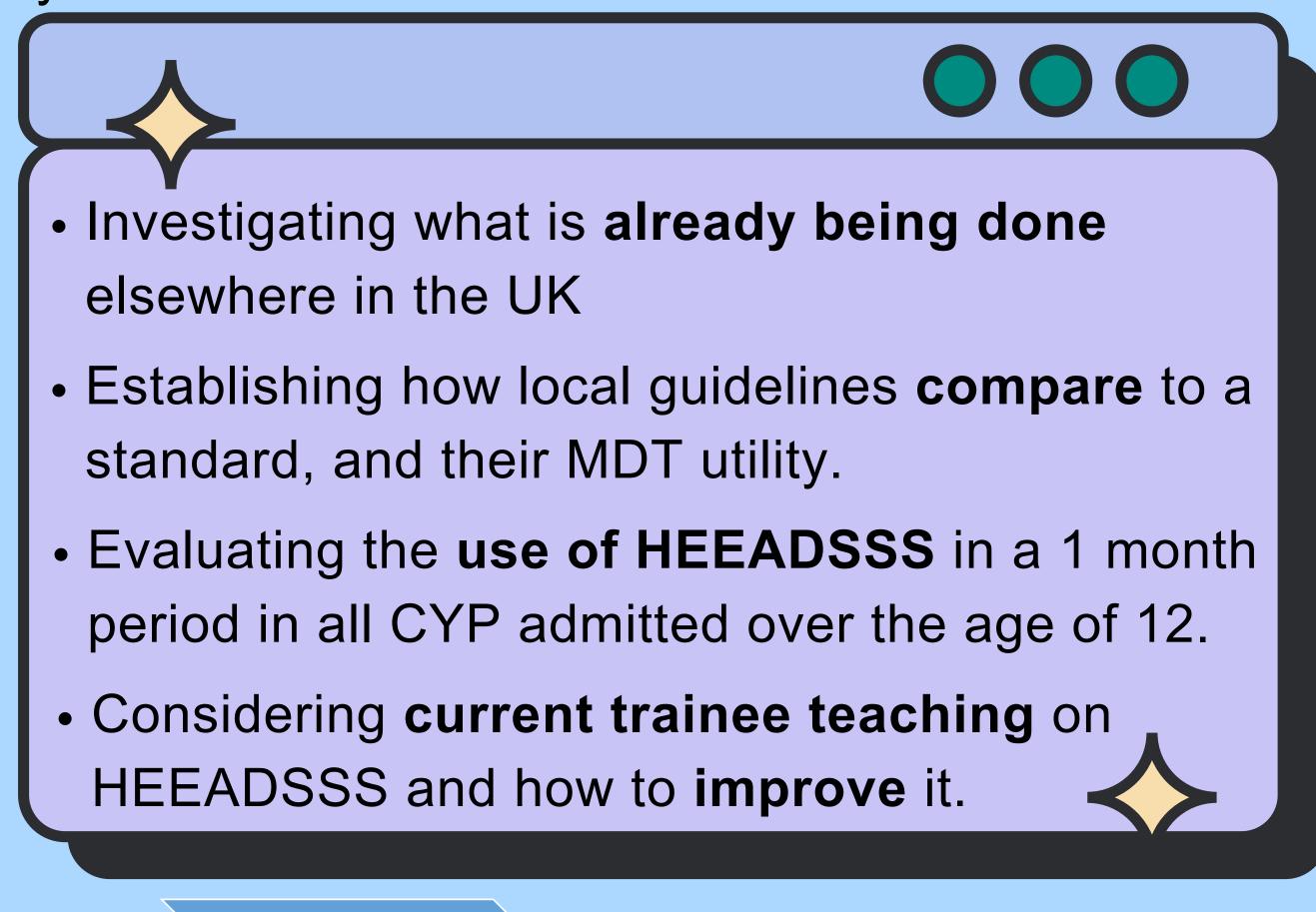
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Background and aims:

Lifestyle factors and socioeconomic disparities can impact physical and mental health in children and young people (CYP), as well as healthcare compliance (1, 2).

The RCPCH outlines aspirational aims to engage with psychosocial background of CYP (3).

Psychosocial assessments can be completed and actioned using the Goldenring & Rosen "HEEADSSS" framework (4). We therefore aimed to evaluate and improve completion of this by:



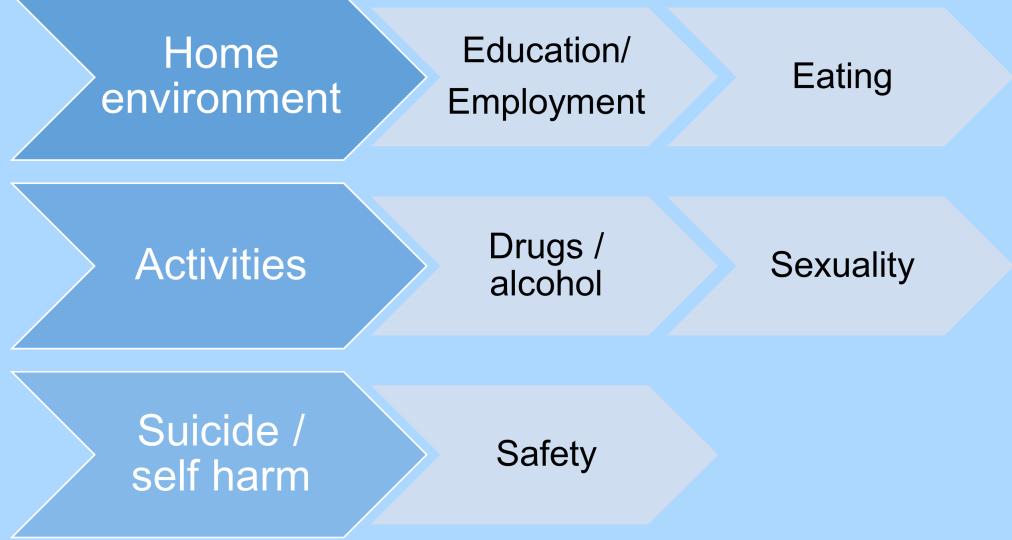
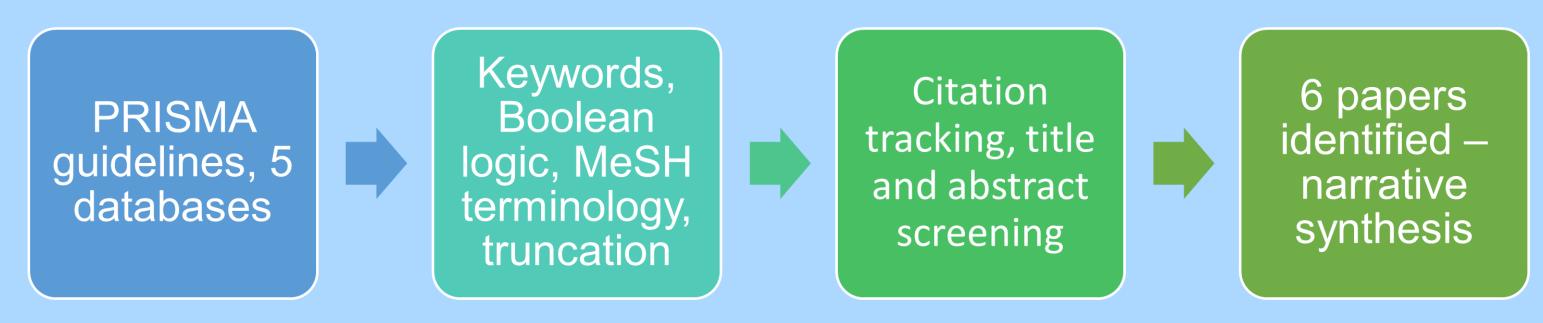


Figure 1: HEEADSSS acronym

Methods:

A rapid systematised review investigating use of psychosocial assessment in other UK-based centres was completed:

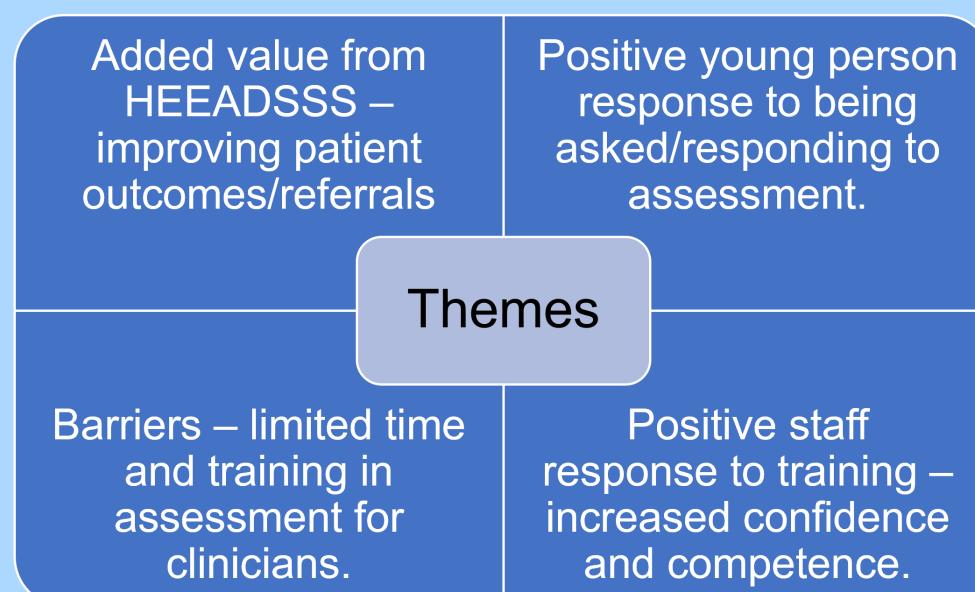


A round table discussion with 4 clinicians of varying stages and Health Youth Workers evaluated current HEEADSS proforma and current available trainee teaching on psychosocial assessment.

A **retrospective audit** of notes from a 1 month period evaluated completion of HEEADSSS assessments in CYP over 12 admitted to an inpatient ward.

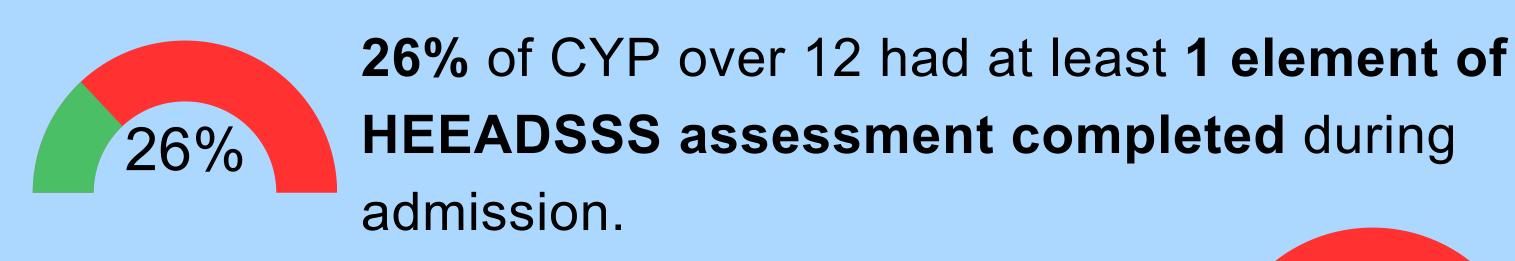
Results:

Results from the literature review highlighted **4 major themes** (5 - 10).



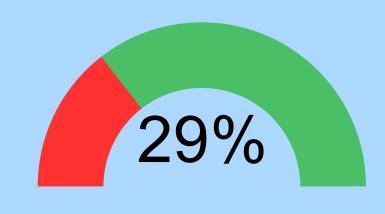
The local assessment proforma was **updated** to include more questions on **sleep**, **screen time** and **violence in the neighbourhood**.

38 CYPs notes were audited, highlighting:



Only 10% of CYP over 12 had a full HEEADSSS proforma completed during their admission.

All children with assessments complete were admitted due to mental health concerns.



29% of CYP over 12 presenting with mental health concerns had no HEEADSS assessment completed.

All HEEADSSS assessments resulted in action, commonly, specialist referral.



We created a **5 part eLearning module** utilising **connectivist** learning pedagogy (11) and rolled it out for trainees with **positive** initial feedback.

Re-audit of HEEADSSS assessment completion 3 months post introduction is awaited.

Conclusions:

- Literature suggests all CYP over 12 should have psychosocial assessments in secondary care.
- We found low rates of completion of these assessments.
- Assessments facilitate children accessing further support.
- Junior clinicians would be more confident with teaching interventions.
- We hope to **further examine** the efficacy of the teaching intervention implemented.

References:

