



A guide to...

HEADSSS

What is a HEADSSS Assessment?

Patient Information

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What is the HEADSSS Assessment?

The HEADSSS assessment is part of our consultation with young people (12-16 years) presenting to this department. The letters each represent an area that as clinicians, we want to ensure we have asked about:

- Home
- Education
- Activities
- Drug / Alcohol use
- Suicidality / Self Harm / Self image
- Sex and relationships
- Safety and abuse

Why is it important?

Within emergency departments (EDs), we have less opportunity to interact with our young people as they have typically fewer health problems than during their younger years and so visit less. We know that this is a particularly vulnerable age group – not least because the desire to undertake more risky behaviours is a natural part of our developing into adulthood, but also because the long-term consequences are often not considered as important to them – they live in the present. Whilst this is all a normal part of ‘growing up’, it can result in difficulties on physical, mental and social levels.

To ensure that we are providing the best service we can to our young people, we want to optimise every interaction that we have together – we want to make **every contact count**. This means not only addressing the primary reason for their attendance, but ensuring that they are OK in general.

The **HEADSSS** tool was created to provide professionals with a structured approach to asking those essential but often sensitive questions that give us a good overview of the young person as a whole, rather than just focussing on the reason they have attended; the importance of this tool cannot be underestimated – it helps us to identify any heightened risk, any established or evolving difficulties and instigate / offer help if necessary.

These questions demand honesty in their responses – they can be uncomfortable for parents / carers to hear and sometimes young people can feel unable to answer due to embarrassment or fear of their loved one’s response. Evidence has already shown us that young people will answer more freely if away from their parent / carer and an audit completed within this department, supported this—perhaps surprisingly, it also demonstrated that parents/carers would rather leave to enable this part of the consultation to occur.

During their consultation, you may be asked to wait outside for the few minutes taken to complete this. If you would rather be present, then you are welcome to remain.