

Introductory pack
2025



Teen Health Check

Improving primary care for young people





Contents

<i>Introducing the Teen Health Check</i>	3
<i>How is a Teen Health Check undertaken?</i>	3
<i>What's in the Teen Health Check?</i>	4
<i>Keeping a record</i>	7
<i>Some issues and challenges</i>	8
<i>Summary</i>	9
<i>Resources and support</i>	9

Introducing the Well Centre's Teen Health Check

The Well Centre's innovative, youth friendly primary care service has the 'Teen Health Check' as a fundamental touchstone.

The Well Centre's Teen Health Check

A biopsychosocial assessment that improves communication with young people and provides a full picture of their lives, allowing design of bespoke interventions that address issues and risk factors. The Teen Health Check was specifically designed for use in the primary care context.

When young people first arrive at the service, a trained GP or Health and Wellbeing Practitioner spends 40 minutes undertaking a systematic biopsychosocial assessment of the issues and challenges that the young person is facing at the time of referral. This provides the context for the presentation, and a framework for assessing progress and change. It means that the approach taking responds to the young person 'in the

The Teen Health Check shares a family resemblance to some other existing instruments for use with adolescents, such as the HEADSS¹, but unlike them is not framed primarily as a risk assessment. Instead, it has been developed as a conversation aid; a way of introducing important topics in an approachable way in order to improve communication and disclosure by adolescents.² The Teen Health Check is also the only one of its kind to be designed specifically for the UK's unique primary care context.

How is a Teen Health Check undertaken?

Undertaken by the general practitioner (GP) or other practice staff, the Teen Health Check is a structured set of 'conversation starters' alerting the staff to current medical problems, lifestyle, risk factors and safety.

It is designed for use in the first session when young people are referred to the service. In the form used at the Herne Hill Practice this currently takes around 40 minutes, but it can be modified and adapted for different situations. Other adaptations are entirely possible and indeed it is critical that new services have an instrument that works specifically for them, rather than adopting the original wholesale.

The Teen Health Check is undertaken in a GP consulting room. The GP (or, in some cases, Health and Wellbeing Practitioner) will have the Teen Health Check template open on their screens, but the intention is that this forms a flexible and adaptable framework for a face to-face discussion, rather than a structured interview schedule. Generally the form of the questions is up to the GP and can be less formal than suggested in the template; the template is to some extent constrained by the EMIS system. It is not expected that practitioners would use the template without training that sets the context and suggests recommended practice. Experienced GPs are likely to use the Teen Health Check as a heuristic device, focusing in on some areas that they can tell are going to be

¹ Goldenring JM and Rosen D (2004) Getting into adolescent heads: an essential update. *Contemp Pediatr.*, 21-64

² Lamb S, Hagell A, Wolfe I (2020) G524 The teen health talk – a feasibility study in the use of a biopsychosocial assessment tool for adolescents in primary care, *Archives of Disease in Childhood* 2020;105:A185.

critical, and skimming over others that may be less relevant in the current case. But overall, it will remind them that these are all important areas to consider when assessing the young person in front of them.

Once the Teen Health Check is completed, the practitioner and the young person will jointly discuss what young people want out of their engagement with the service. The case will then be taken to a multidisciplinary team triage meeting for a decision

on a treatment programme tailored specifically to the young people's needs. That might be delivered in house, or might involve referral to other local service providers such as youth or sports groups.



What's in the Teen Health Check?

Topics covered include any significant past medical history, current medication, risk behaviours, sleep and mental health, safeguarding and living arrangements. An overview of current content is presented in the below. It is also expected that some basic demographic information will have been captured by the service's booking in procedures.

The Teen Health Check – structure and content

BACKGROUND:

- Introduction, including explanation of confidentiality procedure
- Referral information & home GP, if not already in the system
- Accommodation status (*living with family or in other situations*)
- Employment status (*in education, in employment*)
- Young carer status
- Known to social services
- Consent to use anonymised data for research
- Safeguarding concerns

EDUCATION:

- Name of school/university/college
- Are they enjoying school
- Attendance and problems at school/college

MEDICAL HISTORY:

- Any current medical condition
- Current medication
- Drug allergies
- Disability
- Other information (*free text*)

SUBSTANCE USE:

- Alcohol consumption
- History of family alcohol misuse
- Alcohol advice/brief intervention delivered (*at this point*)
- History of substance misuse
- Current drug use
- History of drug abuse
- Drug advice/brief intervention delivered (*at this point*)
- Smoking and vaping status (*including cigarettes, passive smoking, vaping, e-cigarettes*)
- Smoking and vaping cessation advice given (*at this point*)

BMI, DIET & EXERCISE:

- Self reported height and weight, BMI calculation
- Diet health education given (*at this point*)
- Self reported eating problem, eating habits
- Physical exercise
- Exercise education delivered (*at this point*)

SEXUAL HEALTH:

- Sexual activity
- Sexual orientation
- Gender issues
- HPV status
- Age of menarche/any menstrual problems
- Assessment of Fraser competence for consent

SEXUAL HEALTH (CONTINUED):

- At risk of sexually transmitted infection Chlamydia screening (*delivered at this point if necessary*) [*and screen for CG?*]
- Advice about long acting reversible contraception delivered (*at this point*)
- History of unprotected sexual intercourse
- Sexual health advice delivered (*at this point*)
- Overall rating of high sexual risk behaviour

MENTAL HEALTH:

- Sleep pattern
- Mood patterns / depression / social isolation
- Self harm
- Suicidal thoughts, suicidal ideation or history of suicide attempt
- History of significant mental illness in the family
- Stressful life events (*and free text for other trauma*)
- Family history of autism/ADHD
- Diagnostic codes; potential diagnosis (*up to 3; note that the current Herne Hill EMIS template has links to a wide range of mental health resources and tools for diagnosis including the WHO-5 Wellbeing Index; PHQ9, GAD7, Liebowitz social anxiety scale, Autism Spectrum Quotient, CHOCI questionnaire, OCI Questionnaire, Trauma and ADHD scales, RCADS, IAPT phobia scale*)
- On the CAMHS waiting list/currently seeing any form of counsellor

The Teen Health Check – Outcome

- Referral for in-house multidisciplinary review
- Referral to other agencies / social prescribing
- End of engagement (*discharged from follow up*)

End of engagement is followed by completion of a feedback form, a WHO-5 rating of wellbeing, and a discharge letter back to the referrer.



Keeping a record

An EMIS Teen Health Check template has been designed which provides prompts and records responses. EMIS is software for electronic patient record systems used in primary care, acute care and community pharmacy in the UK. Approximately half of GP practices across the UK use EMIS Health software.

EMIS templates are add-ons or additional 'pages' designed to capture consistent, accurate data on various specific topics, and they are intended to streamline and speed up consultations. Ardens (a third party clinical software provider) has created a wide variety of templates covering many clinical areas, including long term diseases, minor illness, nursing procedures, common conditions, and reception. All Ardens templates follow the same format. Once opened, on the left hand side is a list of the different pages, on the right will be the details of the page you have selected, with a number of different variables and drop down boxes. They are not designed to require every question to be answered; clinicians can skip around and use them as they prefer. The data are saved with the patient records and can be extracted afterwards for analysis.

Currently the Teen Health Check is set up as a local template that is only operated through the Well Centre's originating primary care practice at Herne Hill, but the intention is that a shareable version should be available that other practices can tailor to their own local needs. Alternatively, similar templates could be built in other widely used GP data systems such as SystmOne.

Some issues and challenges

The Teen Health Check is a valued and central part of the Well Centre model. Initial testing with other primary care services suggested that it was useful and improved the focus on this age group in addition to improving communication. The abridged version was judged to be feasible to use it within a 10 minute consultation and was also a useful training tool for junior staff. Young people were positive about a professional taking an interest in their health beyond the presenting complaint and agreed the topics covered were relevant and important.

However, there are some challenges that come with its use. The first is that by setting it within an existing GP data system such as EMIS, the response codes are bounded by the limits of the predetermined codes in the system. Second, the full version is long, and so is used in a flexible and responsive way. This is entirely appropriate for clinical information gathering purposes, but means that there are limits to using the results for research purposes. We explain these challenges in a little more detail below.

Restrictions posed by SNOMED (Systematised Nomenclature of Medicine) codes: As an EMIS template, we are bound by the SNOMED codes available to us in setting up the answer choices. As the codes were not made with youth health in mind, they are often unsuitable. They can also be old fashioned or badly phrased. One clear example of this relates to the rating of adverse childhood experiences (ACEs) within the current template. SNOMED codes were not designed to record ACEs and so 'close approximations' have to be used to reflect trauma. This can be clumsy and also may miss out some key headings we would want to reflect. Solutions include adding more free text boxes (which take time for clinicians to complete), or) or pegging a separate ACEs questionnaire to the template (which becomes complicated and will often not be completed as a result). There's no solution to this problem at the moment but it is worth clinicians being prepared to be sympathetic to the limitations in the current coding framework while they familiarise themselves with the template.

Use of Teen Health Check for research as well as clinical practice: The THC template can be – and is – used for a range of purposes. The risk is that if it is expanded to cover all bases and serve all purposes it grows into something unwieldy, and it is unlikely to work both as a clinical tool and also a research instrument at the same time. This means that the data that are captured are not systematic or representative of the client group. Again, there is no immediate solution to this but it is worth being aware of the purpose to which you are using it and the limitations this might pose for then using it in a different way at a later stage.

Our review of the template suggests these are the primary uses:

- **As a conversation prompt**, to ensure that salient information for understanding youth health is covered. The emphasis here is often on the 'background' factors such as living situation. If things arise anyway, the questions do not necessarily need asking and the data may not be recorded.
- **To ensure a rounded picture of an individual client's needs.** To make sure all the important health topics are covered including, for example, sexual health, physical health and mental health. There are some issues we want to make sure we raise with young people that we might not with other age groups.
- **To guide clinical decision making:** To help lead to the right diagnosis for the individual and the right course of action

⁴ Lamb S, Hagell A, Wolfe I (2020) G524 The teen health talk – a feasibility study in the use of a biopsychosocial assessment tool for adolescents in primary care, Archives of Disease in Childhood 2020;105:A185.

- **To identify need for brief interventions:** Such as on substance use, diet or exercise, all very critical for youth health.
- **To streamline & focus data collection:** To shape systematic collection of data on the cohort of young people being seen by a service, in order to understand, for example, how well clients represent the local population, or how well the service is getting to young people at risk of health inequalities. Unlike some of the other purposes, this requires that all questions be answered, or the data will not be robust.

Summary

The Teen Health Check is the framework and guidance for a biopsychosocial assessment of a young person's health and living circumstances. It forms the bedrock of the Well Centre model and is undertaken at the start of the patient journey. It informs the development of a treatment plan and establishes a basis of understanding, trust and confidentiality.

It is currently designed as a 40 minute assessment recorded in an EMIS template. In order to complete the Teen Health Check in this time it needs to be used in a flexible way. Practitioners need to be trained in youth-friendly communication skills, and to understand why and how they will use the information.

Resources

[The Well Centre and Teen Health Checks](#) (video)

[What to expect at the Well Centre](#) (video)

[The Teen Health Talk](#) (animation)



Thank you for your interest in the work of the Well Centre

To find out more about how to build the Well Centre approach into your own primary care service, please contact John Poyton, CEO, Well Centre Charity john.poyton@wellcentrecharity.org

Visit the Well Centre Charity's website wellcentrecharity.org.uk



©2025. The Well Centre Charity. All Rights Reserved.

Charity Number 1206780. Company Limited by Guarantee Company number 14761776.

Registered Address: 74 Herne Hill, London, United Kingdom, SE24 9QP