Checklist for new young person's referral

Name	D		e of referral	//
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Suggested actions	Yes	No	Comments	
Administration officer to alert clinicians of the adolescent/young person's referral				
Prioritise on the waiting list so that wait time is less than four weeks. Offer flexible appointments.				
Appoint a care coordinator from the team.				
Establish the degree of parental involvement and consent issues				
Allocate a consistent doctor for the first year of contact in the clinics				
Allocate consistent multidisciplinary team members for the first year				
Identify the individual's and/or parent/carer's preferred form of communication				
Identify relevant existing and previous services involved and obtain information				
Review any avoidable emergency admissions due to pain and establish an Emergency Department Management Plan (see Section 4 of the Toolkit)				
Liaise with GP and any existing paediatric service regarding management plan				
Refer to transition coordinator (see Section 5 of the Toolkit)				
Ensure a full multidisciplinary assessment, including psychology review				
Use HEEADSSS assessment/interview process (youth risk assessment tool) to review in full and plan: school, driving, study, work, sexuality, mental health, sleep, relationships and family (see Section 11 of Toolkit)				
Develop individual pain management plan with goals as defined through HEEADSSS process				
Maintain regular contact with patient/parent as agreed (pre-booked phone follow up)				
Link individual to appropriate resources (See Part 3 of the Toolkit) and the <u>ACI Pain Management</u> <u>Network resources</u>				
Complete transition readiness checklist with the patient				
Establish the need for school liaison and allocate staff				

