

‘ My World’ Health Needs Assessment Practitioner form	
<p>Family and Friends Who do you live with? Who is important to you? Do you help to look after anyone? Who worries about you? Tell me about your friends?</p> <p><i>Tell me about your home, your siblings/family? Do you share a bedroom?</i></p>	
<p>My feelings What are you good at? Tell me about school. What do you enjoy about school? Is there anything you worry about? Who do you talk to if you are worried How do you feel today? (use pictures) Why?</p> <p><i>What have you enjoyed doing this week? What makes you feel happy? What makes you feel sad? Other emotions might be discussed – e.g. anger/excitement/frustration</i></p>	
<p>What I eat Tell me what you ate for breakfast today/ what you ate yesterday? Do you know what you need to eat to stay healthy?</p> <p><i>What is your favourite food?</i></p>	
<p>Wishes If I could grant you could have three wishes, what would they be?</p> <p><i>If tomorrow was different, how would it look?</i></p>	
<p>My Health Have you been to the dentist? When? How often do you brush your teeth? Do you do it by yourself or does anyone help you? (under 8s) Have you been to the opticians? When? Glasses? Do you do similar things before you go to sleep each night – what are they? Do you get to sleep ok/wake in the night/have bad dreams? Do you share a bedroom?</p> <p><i>Can you see the classroom board? When was the last time you were unwell and not able to go to school? Did you see the doctor when you were poorly? Do you take any medicine? Do you know how to keep clean? Do you like a bath or shower? How often? Do you know about the changes that happen to your body as you grow up? Who do you talk to if you have questions about growing up?</i></p>	<p>Height:</p> <p>Weight:</p>
<p>My Free time What you do after school and at the weekends? Who do you do it with?</p> <p><i>Note any exercise – Do they walk to school? Explore how active the child is Is there anything you would like to do that you don't do already? Do you know how to stay safe online?</i></p>	
<p>Practitioner Observations Was the child wearing correct shoes? Were clothes clean, in good condition and appropriate for the weather? Did the child appear to be clean? What was the child's interaction with you like? – eye contact/smiling/processing/speech/engagement Was the child able to follow instructions? If seen with the parent, what did you observe about the interactions between parent and child, e.g. warmth, responsiveness, how they talk about their child.</p>	