

Adolescent Health

Gerri Mattson, MD, MSPH, FAAP
Pediatric Medical Consultant
Children and Youth Branch

Several slides were borrowed or adapted from Dr. Chung, Duke and Ms. Jill Moore at UNC School of Government especially related to confidentiality



{ 1 }

Adolescence is not simply a time to brace for the worst and try to endure



It is full of developmental milestones and potential for growth – the normative is not risk and failure, but growth and achievement

Health behaviors established in adolescence profoundly influence adulthood morbidity and mortality

{ 2 }

Key slides from Dr. Chung's presentation

Adolescent Well Care Presentation

Richard Chung, MD

Dr. Richard J. Chung is the Director of Adolescent Medicine at Duke University Medical Center in Durham, NC, and is an assistant professor of pediatrics and internal medicine. Dr. Chung earned his medical degree at Yale University School of Medicine and trained in pediatrics and internal medicine at Duke prior to training in Adolescent and Young Adult Medicine at Children's Hospital Boston. Dr. Chung's clinical and research interests center on preventive and chronic disease care of adolescents and young adults. Dr. Chung is a Fellow of the American Academy of Pediatrics and a member of the Society for Adolescent Health and Medicine.



Several slides are included that are part of a quality improvement learning collaborative for family physicians & pediatricians working to improve health outcomes for adolescents in their practices.

{ 3 }

Objectives

- Define two strategies to increase engagement with adolescents and families to improve health outcomes
- Apply confidentiality strategies to deliver care in LHD child health practices with adolescents

{ 4 }

Adolescent Health

- Most adolescent morbidity and mortality are due to intentional and unintentional injuries and violence; alcohol, tobacco, and other drug use; mental health concerns/conditions (i.e. depression); risky sexual behaviors (leading to unplanned pregnancy and sexually transmitted infections), lack of exercise, and poor nutritional habits

{ 5 }

Health Prevention Themes



- Promoting Family Support
- Promoting Child Development
- Promoting Mental Health
- Promoting Healthy Weight
- Promoting Healthy Nutrition
- Promoting Physical Activity
- Promoting Oral Health
- Promoting Healthy Sexual Development and Sexuality
- Promoting Safety and Injury Prevention
- Promoting Community Relationships and Resources

National Prevention Strategy

- Healthy Physical, Social and Economic Environments
- Eliminate Health Disparities
- Prevention and Public Health Capacity
- Quality Clinical Preventive Services
- Tobacco-Free Living
- Reduce Alcohol and Drug Abuse
- Healthy Eating
- Active Living
- Injury-Free Living
- Mental and Emotional Wellbeing

{ 6 }

Use of Health Care

- Compared with other age groups, adolescents underuse the health care system
- Adolescent men are less likely than young women to seek health care
- Teens are more likely to use emergency departments, free clinics, and family planning clinics as their source of primary care
- Older adolescents are more likely to be uninsured than any other age group

{ 7 }



Barriers to Care

- Poor reimbursement
- Lack of time, training, and comfort
- Logistical challenges
- Perceived lack of confidentiality
- Sense of invincibility
- Misconception that adolescents are fully healthy

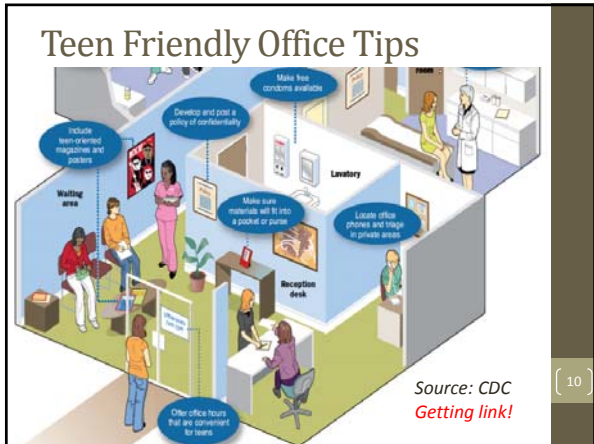
{ 8 }

Key slides from Dr. Chung's presentation

Teen Expectations for Providers

- Teens prefer health care professionals who are honest, knowledgeable, non-judgmental and experienced
- Teens want clinicians who treat all patients equally, who emphasize confidentiality and spend time alone with the teen
- Teens want clinicians who relate well to teens and ask open ended questions about a variety of psychosocial and behavioral health concerns and strengths (which are often about relationships, stress, emotions, etc.)

{ 9 }



Communication is Essential

- Adolescent health problems are often rooted in risky behaviors that are discovered not with a laboratory test or a physical examination but through open communication between the clinician and the adolescent
- Strengths are important to highlight to help build resiliency and sustain appropriate healthy behaviors in teens and help support a successful health care transition

A Few Words About Addressing Health Care Transition

- ALL ADOLESCENTS must transition from pediatric to adult-centered care
 - There are an estimated 18 million adolescents, ages 18-21, and many more millions if you include adolescents ages 12-26 who are affected by transition from pediatric to adult care
 - 500,000 youth with special needs transition to adult health care annually
 - About 20% of adolescents have special health care needs in NC
- Majority of adolescents do not plan or prepare for self management and transfer to adult-oriented primary or specialty care
- Surveys of health care providers, youth and families show there is not a systematic way to support youth, families, and young adults in transition from pediatric to adult health

Adapted from slide from Dr. Patience White, co-director of Got Transition/Center for Health Care Transition Improvement/The National Alliance to Advance Adolescent Health

Transition Related Survey Results

- 51.3% of parents of children older than 12 years of age reported that their child's doctor or other health care provider have talked with their child about his/her health care needs as he/she becomes an adult (NC Child Health Assessment Monitoring Program Survey)
- 40% (US) vs. 44% (NC) of families of YSHCN between 12-17 years of age report receiving the services necessary to make transitions to adult health care (2009/10 National Survey of Children's Health)

13

Making the Case to Address Transition

Health is diminished without transition:

- Youth often unable to name their health condition, relevant medical history, prescriptions, insurance source
- Adherence to care is lower and medical complications are increased

Quality is compromised without transition:

- Youth, young adults, and families are dissatisfied about lack of preparation, information about adult care, vetted adult providers, communication between pediatric and adult providers, and sharing of medical information.
- Fragmented, discontinuous care and lack of usual source of care is common
- Medical errors are reported

Costs are increased without transition:

- Increased ER visits and hospitalizations, and more duplicative tests result

14

Slide adapted from slide from Dr. Patience White

AAP/AAFP/ACP Clinical Report on Health Care Transition

- In 2011, Clinical Report on Transition published as joint policy by AAP/AAFP/ACP
- Targets all youth, beginning at age 12
- Algorithmic structure with
 - Branching for youth with special health care needs
 - Application to primary and specialty practices
 - Extends through transfer of care to adult medical home and adult specialists

Age 12 – Youth and family aware of transition policy

Age 14 – Health care transition planning initiated

Age 16 – Preparation of youth and parents for adult approach to care (which includes addressing privacy and guardianship); discussion of preferences and timing for transfer to adult health care

Age 18 – Transition to adult approach to care

Age 18-22 – Transfer of care to adult medical home and specialists with transfer package

15

Adapted from slides from Dr. Patience White and Dr. Carl Colley
"Supporting the Health Care Transition from Adolescence to Adulthood in the Medical Home" (*Pediatrics*, July 2011)

State and National Work

- **Carolina Health and Transition (CHAT)** grant tools and materials from NC Title V and other partners to address health care transition for youth, families and providers. Information posted at: <http://mahec.net/innovation-and-research/special-initiatives/chat-project>
- MCHB's National Health Care Transition Center (*Got Transition*, led by Carl Cooley and Jeannie McAllister) developed materials (samples tools and health care transition indices) based on the Six Elements Core Elements using QI and learning collaborative model
- MCHB's new Got Transition grantee: The National Alliance to Advance Adolescent Health (*Center for Health Care Transition Improvement* with Peggy McManus and Patience White, Co-Directors): www.gottransition.org

16

Adapted from slide from Dr. Patience White

Role of ERNs in Adolescent Health

- ERNs will be providing preventive services for adolescents ages 11-20 years
- This comprehensive assessment will include:
 - Comprehensive history and physical assessment
 - Developmental/behavioral/psychosocial surveillance which includes an assessment of risks and strengths
 - Brief clinical intervention (using motivational interviewing) with adolescent
 - Strengths based anticipatory guidance for the adolescent and parents
 - Confidential care
 - Health Care Transition

17

2014 Recommendations for Preventive Pediatric Health Care
 American Academy of Pediatrics
 Bright Futures
 The recommendations in this statement represent the consensus of the American Academy of Pediatrics (AAP) and Bright Futures. These recommendations are based on the best available evidence and are subject to change as new information becomes available. The recommendations are intended to guide clinical practice and are not intended to be used as a legal standard of care. For more information, visit www.brightfutures.org.

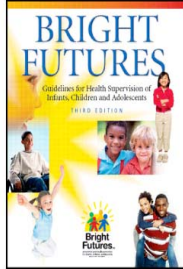
Service	0-1	1-2	2-5	6-11	12-17	18-24
Immunizations
Vision screening
Lead testing
...

18

Bright Futures Services for Adolescents (age 11-21 years)

Health Supervision

- Comprehensive History
- Physical Examination
- Surveillance of Development
- Screenings
- Immunizations



19

Adolescent Screenings

- Hearing and vision every three years after age 10 years or based on risk
- Behavioral Health: Recommend depression screening using PSC-Y or Patient Health Questionnaire Modified for Teens at every adolescent visit
- Risk based:
 - Anemia: *Low Fe diet or menstruation*
 - Lipids: ESMM Reference Guide based on personal medical and family history and BMI
 - STI and Pregnancy

20

Adolescent Screening

- Sexually Transmitted Infections

*Bright Futures recommends HIV screening between 16-18 years for all adolescents (even if not sexually active)

CDC's STI Screening Recommendations: If you are sexually active, be sure to talk to your healthcare provider about STI testing and which tests may be right for you.

- All adults and adolescents should be tested at least once for HIV.
- Annual chlamydia screening for all sexually active women age 25 and under, as well as older women with risk factors such as new or multiple sex partners.
- Yearly gonorrhea screening for at-risk sexually active women (e.g. those with new or multiple sex partners, and women who live in communities with a high burden of disease).
- Syphilis, HIV, chlamydia, and hepatitis B screening for all pregnant women, and gonorrhea screening for at-risk pregnant women at the first prenatal visit, to protect the health of mothers and their infants.
- Trichomoniasis screening should be conducted at least annually for all HIV-infected women.
- Screening at least once a year for syphilis, chlamydia, gonorrhea, and HIV for all sexually active gay men, bisexual men, and other men who have sex with men (MSM). MSM who have multiple or anonymous partners should be screened more frequently for STIs (e.g., at 3 to 6 month intervals). In addition, MSM who have sex in conjunction with illicit drug use (particularly methamphetamine use) or whose sex partners participate in these activities should be screened more frequently.

21

See full CDC handout Feb 2013

Communication


- Shake the teen's hand first and make eye contact
- Converse, don't interrogate
- Be specific and clear; avoid jargon
- Listen in a non-judgmental manner
- Accentuate the positive
- Avoid closed-ended questions
- Pay attention to non-verbal cues
- Give the impression that nothing can surprise you

25

Key slides from Dr. Chung's presentation

Confidentiality

Minors (< 18 yo) are legally authorized in most states to access confidential health care related to contraception, pregnancy, STIs, substance use, and mental health concerns without parental consent



26


Key slides from Dr. Chung's presentation

Confidentiality in NC General Statute

§ 90-21.5. Minor's consent sufficient for certain medical health services

<http://www.ncleg.net/gascripts/statutes/statutelookup.pl?statute=90-21.5>

Handout to this presentation



See also Jill Moore document:

<http://www.sog.unc.edu/sites/www.sog.unc.edu/files/Minors-May%202013.pdf>

27

Breaking Confidentiality

- Act in the best interests of the patient (*beneficence*) and document well
- Justifying Disclosure
 - Someone is at significant risk of serious harm
 - Only disclosure can prevent harm
 - The harms avoided must justify harm of the breach
- Allow the patient to help decide to whom and in what manner the information should be told



{ 28 }

Key slides from Dr. Chung's presentation

Breaking Confidentiality

- Specific situations
 - suicidal or homicidal ideation
 - abuse or neglect
 - substance abuse or other harmful behaviors with clear risk to safety
 - reportable disease
 - legal proceedings
 - violent injuries



{ 29 }

Key slides from Dr. Chung's presentation

Bright Futures on Confidentiality

“Health care professionals should inform adolescent patients and their parents of the practice’s terms of confidentiality, as well as any exceptions, such as patient safety. Ultimately, clinical judgment, ethical principles, and moral certitude guide decisions about individual cases.”

{ 30 }

Key slides from Dr. Chung's presentation

Incorporating Confidentiality

- Lay out the course of the visit
- Review your policy with both the patient and parents
- Explain how it fosters responsibility and autonomy
- Be clear that the policy applies to all adolescent patients and is the established standard of care
- Delineate when it needs to be broken
- Validate the parent's role in ensuring the patient's well-being and the importance of communication

31

Key slides from Dr. Chung's presentation

"The conversation we have alone will be private, meaning nothing will be shared with anyone else. This is to make it easier for you to talk freely about your life. However, if it is clear that your life or someone else's is in danger, we will involve your parents after first discussing how to tell them about it."

32

Key slides from Dr. Chung's presentation

Supporting the Parents

- Parents often struggle with adjusting to their child's adolescence
- Educate them as to how they benefit from their child receiving confidential care
- Stress the importance of parent-child communication
- Parents are not the enemy and the point isn't just to "keep secrets" from them
- The point is to respect the adolescent's privacy
- Alienating parents from the care of their children is in no one's best interest

33

Key slides from Dr. Chung's presentation

Risks and Safeguards

- Hallways and waiting rooms
- Big fluorescent handouts
- Medical records
- Payment for services
- Ancillary staff
- Pharmacists
- Mail, phone calls, emails, texts



Key slides from Dr. Chung's presentation

{ 34 }

Keys to Providing Confidential Care

- Understand what it is, why it's important, it's limits, and how to explain it to patients
- It only begins in the room; there is much more
- Establish a clinic policy and make sure others understand it and follow it
- Troubleshoot any obstacles encountered
- Get feedback from your patients

Key slides from Dr. Chung's presentation

{ 35 }

The History

- After the parent or guardian leaves, revisit the issue of confidentiality
- The teen should remain dressed throughout this portion of the visit (not in a gown)
- While being sensitive to age and development, it is important to be very specific and explicit
- Use a patient-centered approach; sometimes acne trumps whatever is on your agenda

Key slides from Dr. Chung's presentation

{ 36 }



- Teach the adolescent about his or her body
- Maintain verbal communication throughout, offering feedback and reassurance with any normal findings
- Consider a chaperone for *any* sensitive exams if either the patient or the provider desire it

{ 37 }

Key slides from Dr. Chung's presentation

Guidance for LHDs

Responding to Requests for Minors' Protected Health Information: Guidelines for N.C. Local Health Departments from Jill Moore, UNC School of Government, 2013:

<http://www.sog.unc.edu/sites/www.sog.unc.edu/files/Minors-May%202013.pdf>

{ 38 }

Handout to this presentation

Group Discussion

Confidentiality is a major component of our approach to the adolescent

- How will you establish confidentiality guidelines with the adolescent?
- How will you explain the need for seeing the teen privately and confidentially to the parents?
- For what instances would you break confidentiality with the team?

{ 39 }

Confidentiality Resources

- See Jill Moore Guidance for LHDs
 - There are always proposed changes to the Minor Consent law that will impact services for adolescents
- Each agency should have policies & procedures in place to address confidentiality
- ERNs should work with experienced clinicians to become comfortable with having both the confidentiality discussion and how to approach sensitive subjects with teens

40

Bright Futures Forms



Pre-Visit Forms

- 11-14 years the **Parent** completed form is recommended to assure health risk assessment
 - The older child should also be encouraged to complete the **Patient** completed form
- 15-20 years the **Patient** completes the form
- Identifies parental and adolescent concerns
- Identifies health risks

41

Bright Futures

Visit Documentation Sheets



Risk Assessment	Anticipatory Guidance
<p>GENERAL</p> <p>Site meets with family <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Has family member able to help for form help <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Is respondent able to make independent decisions <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>EDUCATION</p> <p>Grade: _____</p> <p>Performance <input type="checkbox"/> N/A</p> <p>Attendance <input type="checkbox"/> N/A</p> <p>Homework <input type="checkbox"/> N/A</p> <p>HEALTH</p> <p>Eats regular meals including adequate fruits and vegetables <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Drinks non-alcoholic fluids <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Calories correct <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Has concerns about help or appearance <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>ACTIVITIES</p> <p>Has friends <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>At least 1 hour of physical activity/week <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Sports team (except for leisure) less than 2 hours/week <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Has someone participate in community activities/volunteer <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>EMERGENCY (obtain phone numbers)</p> <p>Uses information/technology <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>SAFETY</p> <p>Home is free of violence <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Uses safety/protective equipment <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Has peer relationships free of violence <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>SEX</p> <p>Has had oral sex <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Has had sexual intercourse (vaginal, anal) <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>SOCIOEMOTIONAL HEALTH</p> <p>Has hope to enter into work <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Displays self-confidence <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Has problems with sleep <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Gets depressed, anxious, or irritable/mood swings <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Has thoughts about hurting self or suicidal thoughts <input type="checkbox"/> Yes <input type="checkbox"/> No</p>	<p>GENERAL</p> <p>Physical, academic and social skills <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Emotional well-being <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Family support <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Community support <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Health status <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Behavior <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Substance use <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Sexual activity <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Violence <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Self-harm <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Suicidal thoughts <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Depression <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Anxiety <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Stress <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Resilience <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Problem-solving skills <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Decision-making skills <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Communication skills <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Interpersonal skills <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Self-management skills <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Goal setting <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Time management <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Organization <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Planning <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Problem-solving <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Decision-making <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Communication <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Interpersonal <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Self-management <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Goal setting <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Time management <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Organization <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Planning <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Problem-solving <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Decision-making <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Communication <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Interpersonal <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Self-management <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Goal setting <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Time management <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Organization <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Planning <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Problem-solving <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Decision-making <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Communication <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Interpersonal <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Self-management <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Goal setting <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Time management <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Organization <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Planning <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Problem-solving <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Decision-making <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Communication <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Interpersonal <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Self-management <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Goal setting <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Time management <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Organization <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Planning <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Problem-solving <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Decision-making <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Communication <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Interpersonal <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Self-management <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Goal setting <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Time management <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Organization <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Planning <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Problem-solving <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Decision-making <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Communication <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Interpersonal <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Self-management <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Goal setting <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Time management <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Organization <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Planning <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Problem-solving <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Decision-making <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Communication <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Interpersonal <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Self-management <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Goal setting <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Time management <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Organization <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Planning <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Problem-solving <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Decision-making <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Communication <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Interpersonal <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Self-management <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Goal setting <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Time management <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Organization <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Planning <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Problem-solving <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Decision-making <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Communication <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Interpersonal <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Self-management <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Goal setting <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Time management <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Organization <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Planning <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Problem-solving <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Decision-making <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Communication <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Interpersonal <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Self-management <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Goal setting <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Time management <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Organization <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Planning <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Problem-solving <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Decision-making <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Communication <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Interpersonal <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Self-management <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Goal setting <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Time management <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Organization <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Planning <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Problem-solving <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Decision-making <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Communication <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Interpersonal <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Self-management <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Goal setting <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Time management <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Organization <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Planning <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Problem-solving <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Decision-making <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Communication <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Interpersonal <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Self-management <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Goal setting <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Time management <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Organization <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Planning <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Problem-solving <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Decision-making <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Communication <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Interpersonal <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Self-management <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Goal setting <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Time management <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Organization <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Planning <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Problem-solving <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Decision-making <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Communication <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Interpersonal <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Self-management <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Goal setting <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Time management <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Organization <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Planning <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Problem-solving <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Decision-making <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Communication <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Interpersonal <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Self-management <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Goal setting <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Time management <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Organization <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Planning <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Problem-solving <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Decision-making <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Communication <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Interpersonal <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Self-management <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Goal setting <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Time management <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Organization <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Planning <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Problem-solving <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Decision-making <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Communication <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Interpersonal <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Self-management <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Goal setting <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Time management <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Organization <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Planning <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Problem-solving <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Decision-making <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Communication <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Interpersonal <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Self-management <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Goal setting <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Time management <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Organization <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Planning <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Problem-solving <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Decision-making <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Communication <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Interpersonal <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Self-management <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Goal setting <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Time management <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Organization <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Planning <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Problem-solving <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Decision-making <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Communication <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Interpersonal <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Self-management <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Goal setting <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Time management <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Organization <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Planning <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Problem-solving <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Decision-making <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Communication <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Interpersonal <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Self-management <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Goal setting <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Time management <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Organization <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Planning <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Problem-solving <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Decision-making <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Communication <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Interpersonal <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Self-management <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Goal setting <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Time management <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Organization <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Planning <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Problem-solving <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Decision-making <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Communication <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Interpersonal <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Self-management <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Goal setting <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Time management <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Organization <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Planning <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Problem-solving <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Decision-making <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Communication <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Interpersonal <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Self-management <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Goal setting <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Time management <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Organization <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Planning <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Problem-solving <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Decision-making <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Communication <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Interpersonal <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Self-management <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Goal setting <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Time management <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Organization <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Planning <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Problem-solving <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Decision-making <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Communication <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Interpersonal <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Self-management <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Goal setting <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Time management <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Organization <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Planning <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Problem-solving <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Decision-making <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Communication <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Interpersonal <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Self-management <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Goal setting <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Time management <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Organization <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Planning <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Problem-solving <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Decision-making <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Communication <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Interpersonal <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Self-management <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Goal setting <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Time management <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Organization <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Planning <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Problem-solving <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Decision-making <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Communication <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Interpersonal <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Self-management <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Goal setting <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Time management <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Organization <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Planning <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Problem-solving <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Decision-making <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Communication <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Interpersonal <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Self-management <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Goal setting <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Time management <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Organization <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Planning <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Problem-solving <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Decision-making <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Communication <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Interpersonal <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Self-management <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Goal setting <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Time management <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Organization <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Planning <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Problem-solving <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Decision-making <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Communication <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Interpersonal <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Self-management <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Goal setting <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Time management <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Organization <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Planning <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Problem-solving <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Decision-making <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Communication <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Interpersonal <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Self-management <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Goal setting <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Time management <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Organization <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Planning <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Problem-solving <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Decision-making <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Communication <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Interpersonal <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Self-management <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Goal setting <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Time management <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Organization <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Planning <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Problem-solving <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Decision-making <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Communication <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Interpersonal <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Self-management <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Goal setting <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Time management <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Organization <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Planning <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Problem-solving <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Decision-making <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Communication <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Interpersonal <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Self-management <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Goal setting <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Time management <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Organization <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Planning <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Problem-solving <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Decision-making <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Communication <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Interpersonal <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Self-management <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Goal setting <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Time management <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Organization <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Planning <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Problem-solving <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Decision-making <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Communication <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Interpersonal <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Self-management <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Goal setting <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Time management <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Organization <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Planning <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Problem-solving <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Decision-making <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Communication <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Interpersonal <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Self-management <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Goal setting <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Time management <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Organization <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Planning <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Problem-solving <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Decision-making <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Communication <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Interpersonal <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Self-management <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Goal setting <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Time management <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Organization <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Planning <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Problem-solving <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Decision-making <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Communication <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Interpersonal <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Self-management <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Goal setting <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Time management <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Organization <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Planning <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Problem-solving <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Decision-making <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Communication <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Interpersonal <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Self-management <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Goal setting <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Time management <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Organization <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Planning <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Problem-solving <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Decision-making <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Communication <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Interpersonal <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Self-management <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Goal setting <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Time management <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Organization <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Planning <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Problem-solving <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Decision-making <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Communication <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Interpersonal <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Self-management <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Goal setting <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Time management <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Organization <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Planning <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Problem-solving <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Decision-making <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Communication <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Interpersonal <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Self-management <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Goal setting <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Time management <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Organization <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Planning <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Problem-solving <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Decision-making <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Communication <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Interpersonal <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Self-management <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Goal setting <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Time management <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Organization <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Planning <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Problem-solving <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Decision-making <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Communication <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Interpersonal <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Self-management <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Goal setting <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Time management <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Organization <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Planning <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Problem-solving <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Decision-making <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Communication <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Interpersonal <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Self-management <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Goal setting <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Time management <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Organization <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Planning <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Problem-solving <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Decision-making <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Communication <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Interpersonal <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Self-management <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Goal setting <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Time management <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Organization <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Planning <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Problem-solving <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Decision-making <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Communication <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Interpersonal <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Self-management <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Goal setting <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Time management <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Organization <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Planning <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Problem-solving <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Decision-making <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Communication <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Interpersonal <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Self-management <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Goal setting <input type="checkbox"/> Yes <input type="checkbox"/> No</</p>




Sex

- Orientation
- Sexual activity
- Contraception history
- Pregnancy history
- Prior STIs
- Prior victimization and exploitation

STI risk assessment: use of condoms, number of partners, types of sexual behaviors

46

Key slides from Dr. Chung's presentation




Safety

- Alcohol or other substances
- Safety devices
- Physical conditioning
- Interpersonal conflict resolution
- Avoiding weapons and/or practicing weapon safety

47

Key slides from Dr. Chung's presentation



Safety

If emotional, physical, or sexual abuse is suspected, determine circumstances and the presence of physical, emotional, and psychosocial consequences

Be aware of local laws about mandated reporting

48

Key slides from Dr. Chung's presentation

Suicide

Red flags include declining grades, family dysfunction, abuse, substance use, previous suicidality

Directed screening will be discussed in a separate Learning Collaborative

Key slides from Dr. Chung's presentation

Patient Health Questionnaire-9 Modified for Teens (PHQ-9)

- 13-item youth self-report questionnaire
- **Designed to detect symptoms of depression in adolescents**
- **Four additional questions added to the 9 questions screen regarding suicidal thinking and behavior have been added to the PHQ-9**
- Takes 5 minutes to complete and score
- Validated and widely used; one of the two depression screens recommended by the U.S. Preventive Services Task Force (USPSTF)

Incorporating Mental Health Screening Into Adolescent Office Visits | PHQ-9

http://c.ymcdn.com/sites/www.mpcanet/resource/resmgr/behavioral_health/psy-y%2011.27.12.pdf

Tailoring Health Messages for Teens

- Health literacy research demonstrates that individuals cannot hear, understand, and apply more than 3 messages per session
- Barriers to health literacy and use of information include:
 - Language (i.e., complicated words, jargon) and culture
 - Immaturity of pre-frontal cortex
 - Confidentiality
 - Relationship with parents (involving parent when possible)
 - Environmental
- Common Factors (HELP) Motivational Interviewing strategies
 - Empower the teen
 - How he/she can make a difference in his/her own health
 - Offer options, not unsolicited advice

55

Engaging Adolescents: You Can HELP=

Hope, Empathy, Language, Loyalty,
Permission, Partnership and Plan

<http://vimeo.com/emergentpictures/engaging-adolescents>

56

Brief Clinical Intervention

- Ask permission
- Ask open-ended questions, listen, and summarize
- Use “unhealthy weight” or “weight issue” rather than “obese” or “fat”
- Focus on eating behaviors rather than diets
- Limit counseling to two or three elements
- Assess motivation and confidence
- Confirm next steps—follow up / referral
- Ensure that the patient will come back

57

Obesity example: Dr. Chung Adolescent MOC presentation

Questions or Comments?

gerri.mattson@dhhs.nc.gov
919-707-5622



{ 58 }
