

Patient details (label)

Date: / /

Bolton

NHS

Time:

NHS Foundation Trust

Name:

Ward/Dept:



Health Promotion Assessment

SMOKING

Do you smoke? (if 'NO' ask next question) Have you ever smoked? (if 'NO' go to alcohol questions)

If quit, how long? days weeks months years Level II request

→ Would you like some advice or support to help you stay stopped? unsure

DIET Would you like any advice or support about improving your diet? unsure

PHYSICAL ACTIVITY Would you like any advice or support to help you get more physical activity? unsure

WEIGHT Would you like any advice or support regarding your weight? unsure

Height cm Weight kg BMI = waist circ. cm

MENTAL HEALTH During the last month, have you often been bothered by feeling down, depressed or hopeless? unsure

& WELLBEING During the last month, have you often been bothered by having little or no pleasure in doing things? unsure

Would you like any advice or support with your mental health and wellbeing?

ALCOHOL AUDIT C	0	1	2	3	4	Score	1 Ltr Cider	7.5	More than 50 units consider referral to Alcohol Team (bleep 3033)
	Never	Monthly or less	2-4 times per month	2-3 times per week	4+ times per week		1 pint/1 can	3	
How often do you have a drink containing alcohol?							1 Bottle (larger cider/alcopop)	1.5	
How many units of alcohol do you drink on a typical day when drinking?	1-2	3-4	5-6	7-9	10+		1 glass wine	3	
How often have you had 6 or more units if female, or 8 or more if male, on a single occasion in the last year?	Never	Less than monthly	Monthly	Weekly	Daily or Almost daily		1 Bottle wine	10	Men 3-4 units per day; max 21 per week
							1 glass spirit	2	
							1 Bottle spirit	30	Women 2-3 units per day; max 14 per week
• Scoring: 0-6 no action required	Total:-						Total Units per week		

• Score 7 or above is AUDIT - C positive - deliver brief advice - consider completing full audit tool.

• All dependent drinkers requiring detoxification - please refer to Hospital Alcohol Team on day of admission (obtain consent for referral)

SEXUAL HEALTH If you think you may have been exposed to a sexually transmitted infection, we advise you make a screening appointment as soon as possible at the sexual health clinic. (details on leaflet) Give 'Your Health, Your Choice' leaflet

Confirm patient has agreed to be referred

Smoking Cessation Diet Physical Activity Weight Mental Health & Wellbeing Alcohol

Keep top section of this form in the patient's record. Further information on 01204 462168 email: boltonhht@nhs.net

Please detach slip & send to Hospital Health Trainer Project at St Peters House Bolton.

This patient has requested advice/support for the items ticked.

Smoking Cessation Diet Physical Activity Weight Mental Health & Wellbeing Alcohol

Patient Details (label)

GP Name:
Surgery Address
Tel:

Referred by:
Dept / Ward:
Date:
Tel:

Exercise Recommendations	Waist Circumference	
<p>For General Good Health</p> <p>5 x 30 Minutes per week (150 mins) (can be in multiples of 10 mins)</p> <p>.....</p>	<p>Increased risk Men: 94cm (37") Women: 80cm (32")</p> <p>Substantial risk Men: 102cm (40") Women: 88cm (35")</p> <p>Asian descent Men: Substantial risk is 88cm (35") Women: Substantial risk 80cm (32")</p>	
<p>For weight management</p> <p>40-60 mins per day of moderate intensity e.g. brisk walking, cycling</p>		
Alcohol Recommendations	Classification	BMI
<p>Men: 3-4 units per day; maximum 21 units per week</p> <p>Women: 2-3 units per day; maximum 14 per week</p> <p>Minimum of 2 alcohol-free days per week</p> <p>Binge drinking: 8 units for men; 6 units for women (twice daily amount in one session)</p>	Underweight	<18.5
	Normal range	18.5 - 24.9
	Overweight (pre-obese)	25 - 29.9
	Obese class I	30 - 34.9
	Obese class II	35 - 35.9
	Obese class III	>40.0

Have health promotion instructions/leaflets been given prior to discharge

Please list any booklets given to patients

Your Health: Your Choices

Other (*Please Specify*)

.....

Notes