



PRIMHD summary report – HoNOSCA

Health of the Nation Outcomes Scales – child and youth report for New Zealand

This report summarises national Programme for the Integration of Mental Health Data (PRIMHD) data submitted by district health boards (DHB). In particular, it presents Health of the National Outcomes Scale for Child and Adolescent aged 4 to 17 (HoNOSCA) data from services where HoNOSCA is the primary measure.

This report is organised into three major sections that provide information about:

- 1. Outcomes related information:** This provides indications about what changes have occurred for service users between entering and leaving the service. Outcome is assessed by comparing the group admitted and the group discharged from the service in the same time period. This should provide a reasonable indication of outcomes achieved unless the service user mix has changed significantly over the usual period for which service is delivered.
- 2. Service related information:** This provides information about the services, such as the overall severity of service users who use different services.
- 3. Collection completion and validity:** This details the completeness of the data set provided by your mental health services. This is important because it indicates how valid and reliable the data sets are likely to be. The less complete the data set, the less valid the information is likely to be.

In many cases the data is presented graphically for New Zealand, and then presented as a table for the individual team types (see team type classification factsheet).

The time period covered differs for the different data presented. See the title or the notes under the graphs or tables for information about the time period covered. Unless otherwise stated, the notes under the graphs also apply to the corresponding table.

For all graphs and tables, if there are less than twenty cases in the data set, then the information is not presented. This is because small samples frequently provide inaccurate and potentially misleading results. See the notes and user guide for other important information about the graphs and tables.

Where appropriate, the statistical **confidence interval** is presented. This is shown by error bars (small lines above and below the average) on the graphs, and a score range in some tables. As a rule of thumb, if the confidence intervals of two data points do not overlap, the two points can be considered to be significantly different. If the confidence intervals of the data points do overlap, we assume the points are not significantly different. It is important to note that statistical significance may not indicate a clinically significant difference.

See the associated user guide for more information about how to understand and use the data presented in this report.

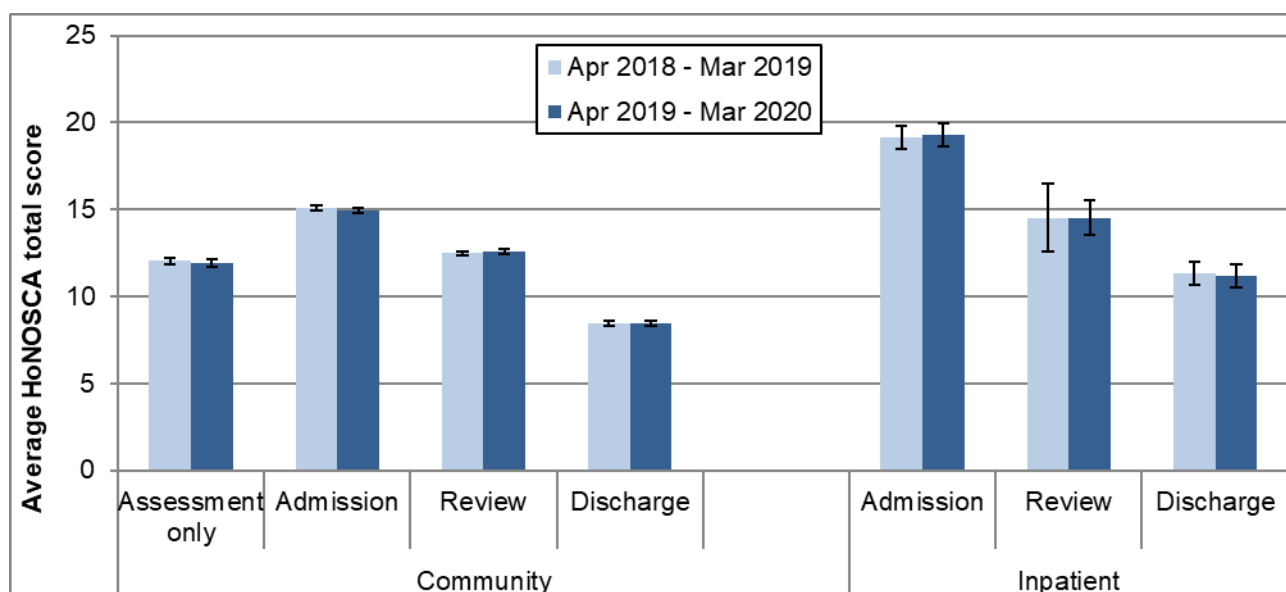
Data for graphs 11 and 12 was extracted 14 July 2020 from PRIMHD by the Ministry of Health and formatted by Te Pou. The data for graphs and tables 1 to 10 and 13 was extracted 2 July 2020 from PRIMHD by the Ministry of Health, then analysed and formatted by Te Pou.

Please note: For this period a few DHBs have incomplete data which will affect New Zealand totals.

1. Outcomes – changes in service user status

This section presents HoNOSCA data indicating the status of service users at different stages of their contact with DHB mental health services. Graph and Table 1, and Graph 2 show results from HoNOSCA total scores. Graphs and Tables 3 to 5b show results related to the percentage of HoNOSCA items in the clinical range. Table 6 shows results from the Index of Severity derived from HoNOSCA scores.

Graph 1: Average HoNOSCA total score (15 items) by collection type: New Zealand, Apr 2018 - Mar 2019 and Apr 2019 - Mar 2020



Notes: Error bars indicate the confidence intervals around the data point. If error bars overlap, the data points are not significantly different. Community discharge does not include discharge to an inpatient unit.

Interpretation: Decrease between admission and discharge is an indication of the outcomes achieved by the service user and service. The greater the decrease between admission and discharge, and the lower the average HoNOSCA score at discharge, the more positive the outcome.

Target: A greater decrease from admission to discharge and lower average rating at discharge.

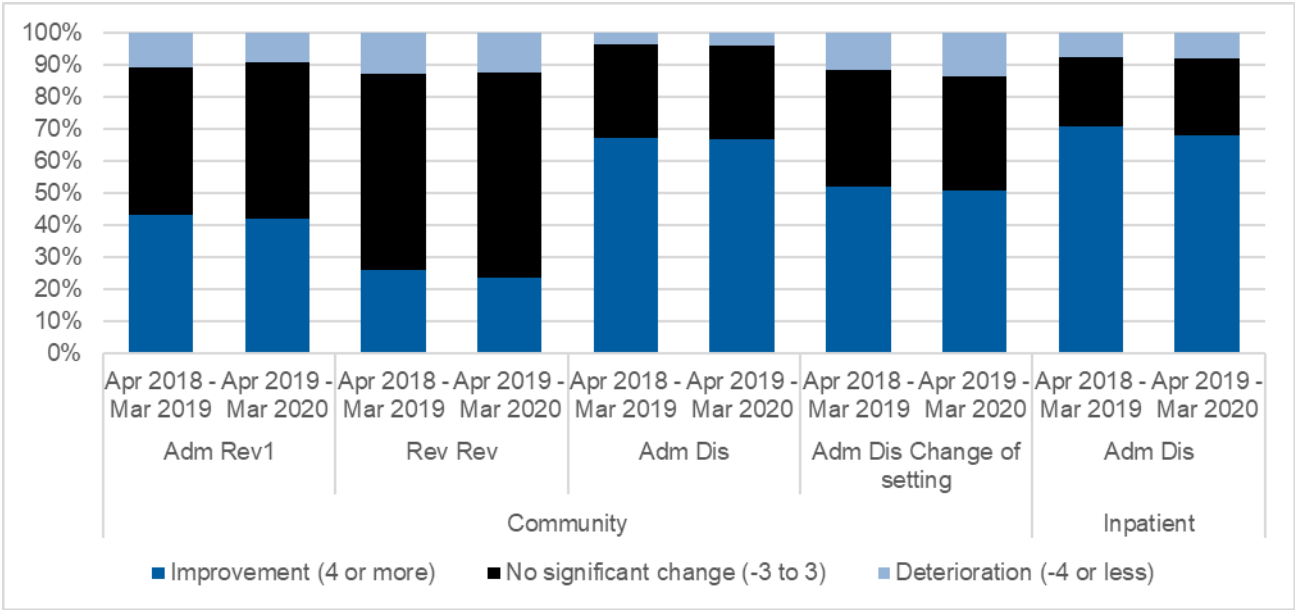
Table 1: Average HoNOSCA total score (15 items), by collection type and team: New Zealand, Apr 2019 - Mar 2020

Team Type	Assessment only			Admission			Review			Discharge		
	N	Mean	CI	N	Mean	CI	N	Mean	CI	N	Mean	CI
Community services												
Alcohol and drug team				120	13.7	12.4-15.1	119	11.3	10.0-12.6	109	9.0	7.7-10.3
Child and youth team	3,357	11.3	11.1-11.5	5,782	14.9	14.8-15.1	8,196	12.7	12.6-12.9	5,189	8.7	8.5-8.9
Community team	336	14.5	13.7-15.2	154	14.9	13.5-16.2	122	11.0	9.6-12.4	53	5.4	4.2-6.7
Early intervention team				28	15.3	13.0-17.6	62	12.1	10.3-14.0			
Eating disorders team	31	11.2	8.8-13.7	160	15.9	14.7-17.2	313	12.5	11.6-13.4	117	6.5	5.3-7.8
Forensic team	369	15.0	14.1-15.9	193	18.4	17.3-19.5	124	13.3	12.1-14.5	104	13.9	12.4-15.5
Kaupapa Māori team				47	14.9	13.0-16.7	118	13.5	12.4-14.7	35	9.9	7.9-11.8
Pacific people team				51	13.4	11.5-15.4	61	12.9	11.1-14.7	26	4.2	2.2-6.1
Specialty team	180	13.3	12.2-14.3	574	14.2	13.6-14.8	1,394	11.8	11.5-12.2	709	6.6	6.2-7.1
Total	4,314	11.9	11.7-12.1	7,122	15.0	14.8-15.1	10,525	12.6	12.4-12.7	6,358	8.5	8.3-8.6
Inpatient services												
Child and youth team				558	19.9	19.1-20.8	360	14.5	13.5-15.5	336	10.6	9.8-11.4
Eating disorders team				34	13.7	11.3-16.1				28	9.3	6.9-11.7
Inpatient team				126	18.4	17.1-19.7				85	15.4	13.4-17.3
Specialty team				86	17.5	15.7-19.2				56	9.1	7.6-10.6
Total				815	19.3	18.6-19.9	371	14.5	13.5-15.5	514	11.2	10.5-11.9

Notes: N = number of collections in period. Average = average HoNOSCA (15 item) score, CI = confidence interval for average score. Community discharge does not include discharge to an inpatient unit.

Interpretation: If confidence intervals for two scores do not overlap, then the scores have a statistically significant difference. It is important to note that statistical significance may not indicate a clinically significant difference.

Graph 2: Difference in HoNOSCA total score (15 items) for matched pairs by pair type and setting, New Zealand, Apr 2018 - Mar 2019 and Apr 2019 - Mar 2020



Notes: Shows the difference of the matched pair between the start and end HoNOSCA total score. Community admission to discharge includes discharge no further care and discharge other.

Interpretation: The graphs compare the time periods. Dark blue band indicates percentage improvement within the given time period, while black band indicates no significant change and light blue deterioration. Improvement = 4 or more, no significant change = -3 to 3 and deterioration = -4 or less.

Target: A greater percentage increase in improvement for both community and inpatient settings and a smaller percentage in deterioration.

Table 2: Difference in HoNOSCA total score (15 items) for matched pairs by pair type and team, community New Zealand, Apr 2019 - Mar 2020

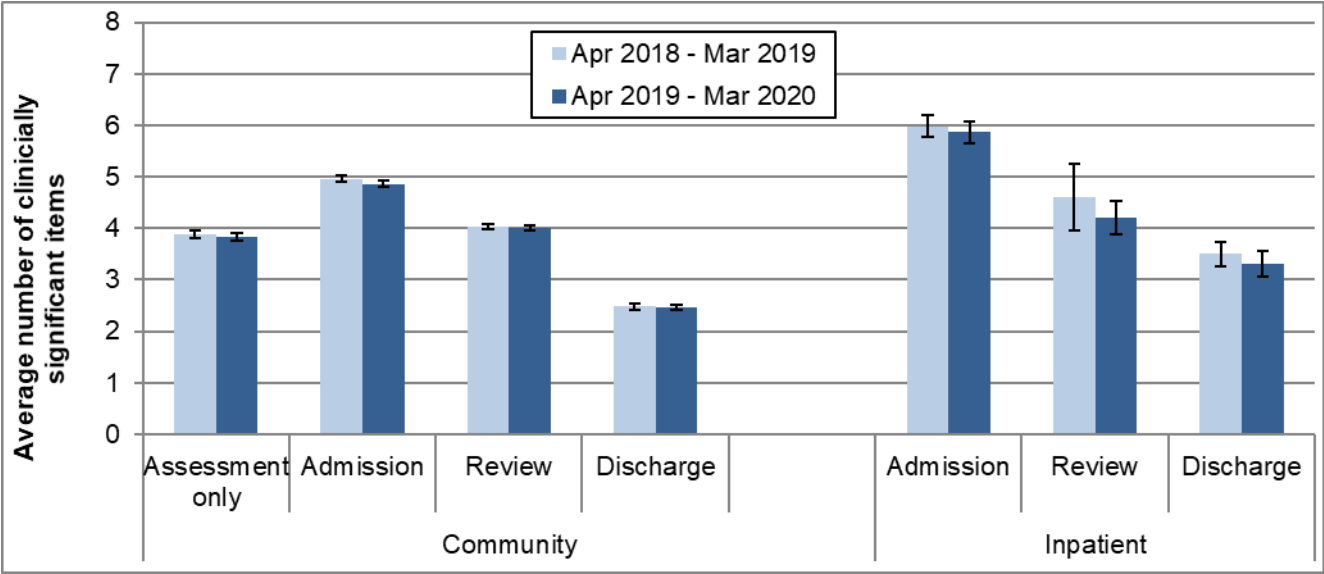
Team Type	Com Adm Rev				Com Rev Rev				Com Adm Dis				Com Adm Dis Change of setting			
	↓ Det	No SC	↑ Imp	N	↓ Det	No SC	↑ Imp	N	↓ Det	No SC	↑ Imp	N	↓ Det	No SC	↑ Imp	N
Alcohol and drug team	0%	58%	42%	36	6%	77%	17%	64	3%	58%	40%	73				
Child and youth team	10%	49%	41%	1,406	12%	64%	24%	2,855	4%	29%	67%	3,168	14%	34%	52%	448
Community team	11%	54%	34%	35	18%	60%	23%	40	6%	33%	61%	36				
Eating disorders team					14%	45%	41%	22								
Forensic team	10%	43%	47%	58	13%	58%	28%	120	3%	19%	78%	67	5%	52%	43%	21
Kaupapa Māori team	5%	24%	71%	21					7%	37%	57%	46	33%	19%	48%	21
Pacific people team					18%	61%	21%	28								
Specialty team					24%	44%	32%	34								
Total	8%	50%	42%	146	13%	66%	21%	557	6%	25%	69%	277	13%	38%	49%	78

Notes: Shows the difference of the matched pair between the start and end HoNOSCA total score. Community admission to discharge includes discharge no further care and discharge other.

Interpretation: Improvement (↑Imp) = 4 or more, no significant change (No SC = -3 to 3 and deterioration (↓Det) = -4 or less.

Target: A greater percentage increase in improvement for community setting and a smaller percentage in deterioration.

Graph 3: Average number of clinically significant HoNOSCA items by collection type: New Zealand, Apr 2018 - Mar 2019 and Apr 2019 - Mar 2020



Notes: Average number clinically significant items = the average number of items in the clinical range (2, 3 or 4) per collection. Community discharge does not include discharge to an inpatient unit.

Interpretation: Points are significantly different if error bars don't overlap. A decrease between admission and discharge is an indication of the outcomes achieved by the service and service user. A greater decrease between admission and discharge indicates a better outcome. A lower admission score could be indication of service users seeking out and being engaged by services at a lower level of severity.

Target: A greater decrease from admission to discharge and smaller percentage in clinical range at discharge.

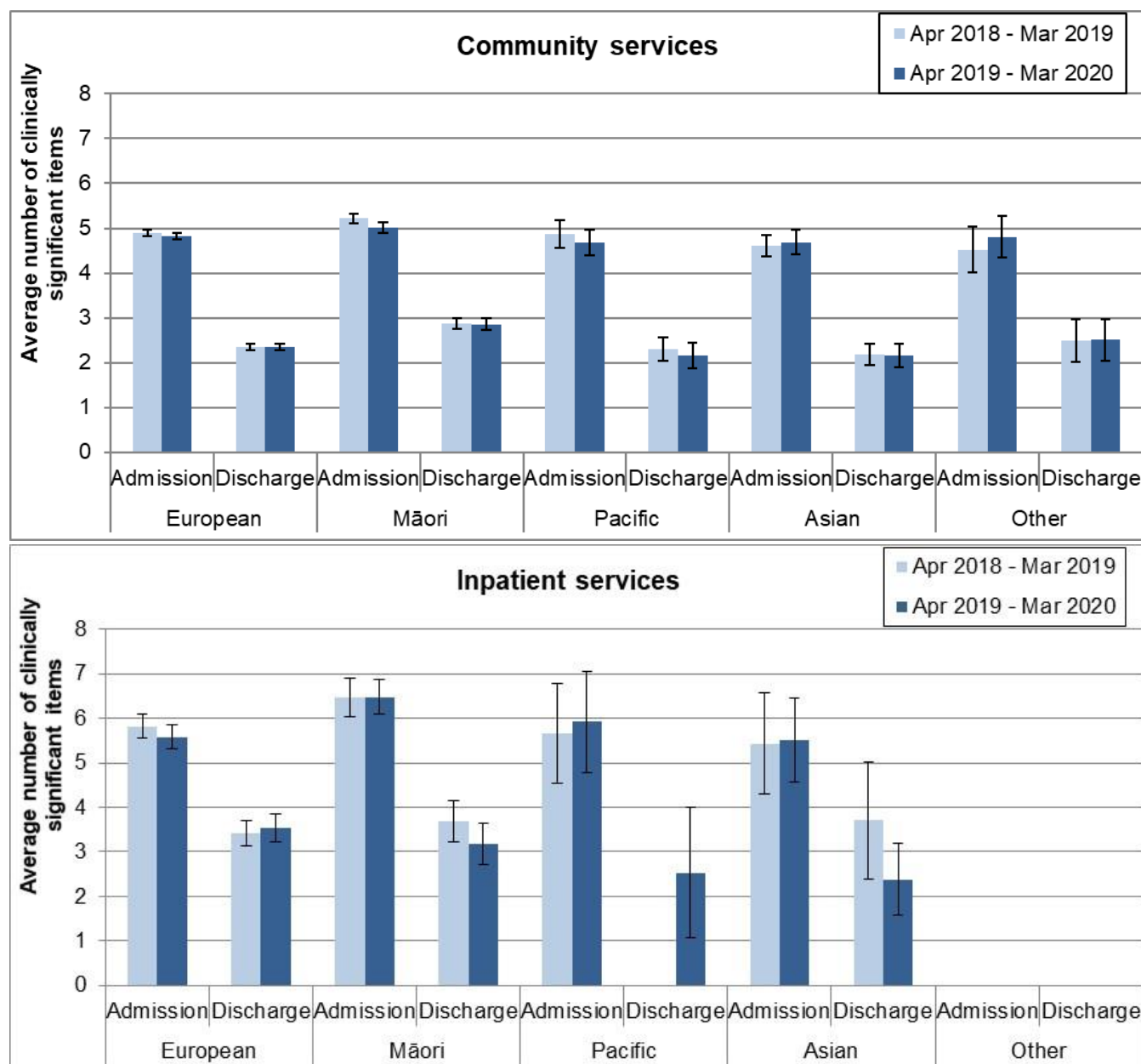
Table 3: Average number of clinically significant HoNOSCA items by collection type and team: New Zealand, Apr 2019 - Mar 2020

Team Type	Assessment only			Admission			Review			Discharge		
	N	Mean	CI	N	Mean	CI	N	Mean	CI	N	Mean	CI
Community services												
Alcohol and drug team				120	4.3	3.8-4.8	119	3.2	2.8-3.6	109	2.5	2.0-3.0
Child and youth team	3,357	3.6	3.6-3.7	5,782	4.9	4.8-4.9	8,196	4.1	4.0-4.1	5,189	2.6	2.5-2.6
Community team	336	4.6	4.4-4.9	154	4.7	4.3-5.1	122	3.3	2.7-3.8	53	1.5	1.1-2.0
Early intervention team				28	4.8	3.9-5.6	62	3.6	2.9-4.3			
Eating disorders team	31	3.9	3.0-4.9	160	5.1	4.7-5.6	313	4.0	3.7-4.4	117	1.7	1.2-2.1
Forensic team	369	4.6	4.3-4.9	193	6.0	5.6-6.4	124	4.4	4.0-4.9	104	4.4	3.9-5.0
Kaupapa Māori team				47	4.6	3.9-5.4	118	4.2	3.8-4.7	35	2.8	2.1-3.5
Pacific people team				51	4.3	3.5-5.1	61	4.4	3.6-5.1	26	1.1	0.4-1.8
Specialty team	180	4.1	3.7-4.5	574	4.6	4.4-4.8	1,394	3.8	3.6-3.9	709	1.8	1.6-1.9
Total	4,314	3.8	3.7-3.9	7,122	4.9	4.8-4.9	10,525	4.0	4.0-4.1	6,358	2.5	2.4-2.5
Inpatient services												
Child and youth team				558	6.0	5.7-6.2	360	4.2	3.8-4.5	336	3.2	2.9-3.5
Eating disorders team				34	4.5	3.6-5.5				28	2.8	2.0-3.7
Inpatient team				126	5.7	5.3-6.2				85	4.6	3.9-5.3
Specialty team				86	5.6	5.0-6.2				56	2.5	1.8-3.1
Total				815	5.9	5.7-6.1	371	4.2	3.9-4.5	514	3.3	3.1-3.6

Notes: N = number of collections in period. Average = average number of HoNOSCA items in the clinically significant range (ie scoring 2, 3, or 4). CI = confidence interval for average score. Community discharge does not include discharge to an inpatient unit.

Interpretation: If confidence intervals for two scores do not overlap, then the scores have a statistically significant difference. It is important to note that statistical significance may not indicate a clinically significant difference

Graph 4: Average number of clinically significant HoNOSCA items at admission and discharge by ethnic group: New Zealand, Apr 2018 - Mar 2019 and Apr 2019 - Mar 2020

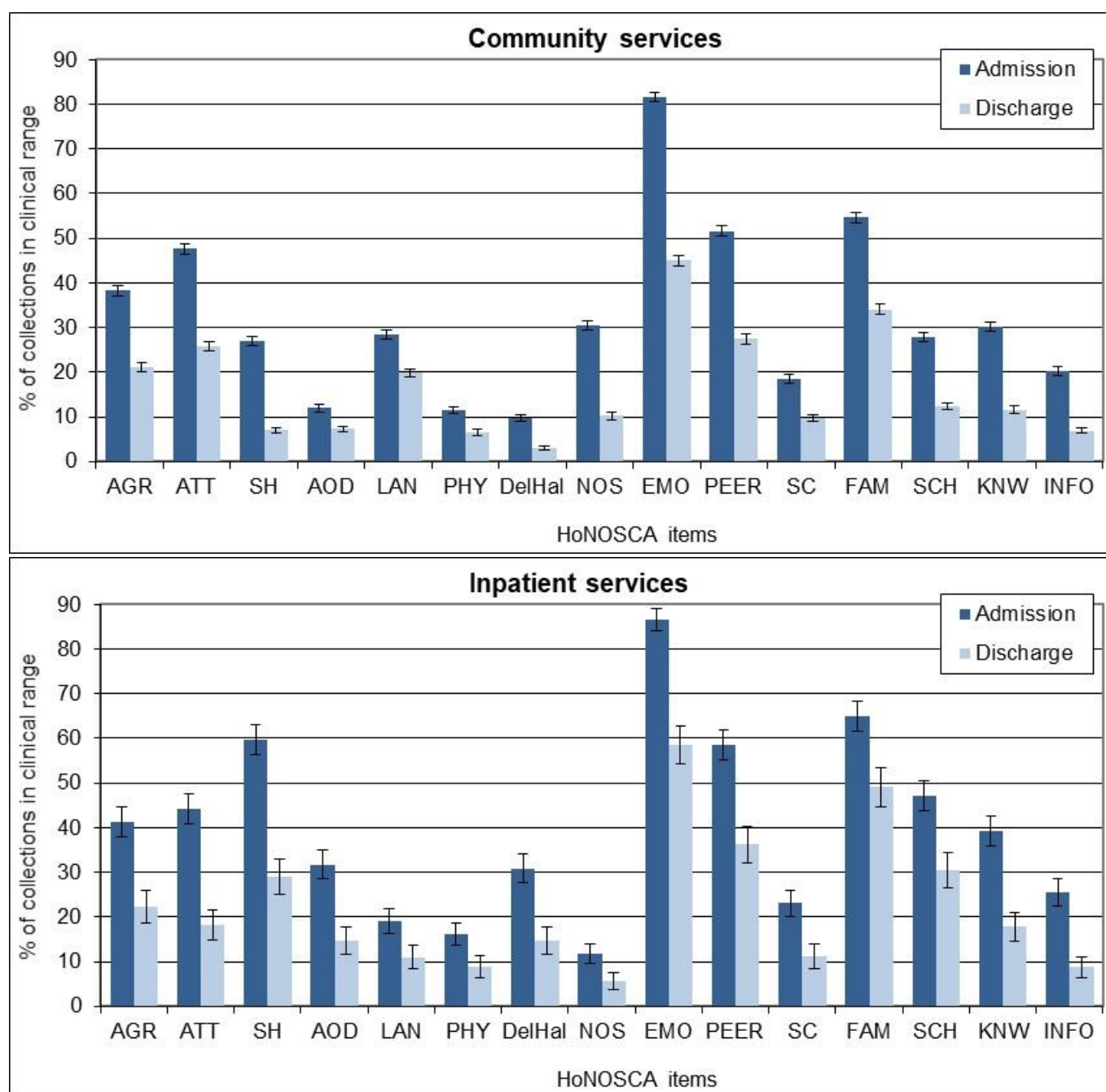


Notes: Average number of HoNOSCA items in the clinical range (2, 3 or 4). Community discharge does not include discharge to an inpatient unit.

Interpretation: Points are significantly different if error bars don't overlap. Decrease between admission and discharge is an indication of the outcomes achieved by the service and service user. A greater decrease between admission and discharge indicates a better outcome. A lower admission score could be indication of service users seeking out and being engaged by services at a lower level of acuity.

Target: A greater decrease from admission to discharge and smaller percentage in clinical range at discharge.

Graph 5a: Percentage of collections in clinical range on each HoNOSCA item (admission and discharge collections): New Zealand, Apr 2019 - Mar 2020



Notes: Percentage of service users in the clinical range (2, 3 or 4) for each HoNOSCA item. Community discharge does not include discharge to an inpatient unit.

Interpretation: The longer the bar, the more prevalent the difficulty measured by the item is amongst service users. A greater decrease in the length of the bar from admission to discharge suggests a better outcome for the difficulty measured by the item. Items that show medium to high frequency and less change may suggest possible targets for service improvement.

Target: A greater decrease from admission to discharge and smaller percentage in clinical range at discharge.

Table 5a: Percentage of collections in clinical range on each HoNOSCA item (admission and discharge collections) by team: New Zealand Apr 2019 - Mar 2020

Community services

First 7 HoNOSCA items																
Team name	N		AGR		ATT		SH		AOD		LAN		PHY		DelHal	
	Adm	Disch	Adm	Disch	Adm	Disch	Adm	Disch	Adm	Disch	Adm	Disch	Adm	Disch	Adm	Disch
Alcohol and drug team	120	109	45%	22%	27%	13%	20%	9%	73%	50%	21%	13%	1%	1%	10%	6%
Child and youth team	5,780	5,187	38%	22%	50%	28%	27%	7%	9%	6%	29%	22%	10%	6%	8%	3%
Community team	154	53	29%	6%	26%	8%	45%	12%	12%	10%	20%	8%	32%	9%	14%	2%
Early intervention team	28		14%		57%		14%		32%		37%		4%		39%	
Eating disorders team	160	117	14%	4%	34%	9%	19%	6%	5%	6%	8%	3%	49%	12%	54%	16%
Forensic team	193	104	73%	53%	58%	49%	14%	8%	59%	41%	42%	33%	8%	4%	12%	3%
Kaupapa Māori team	47	35	45%	23%	38%	31%	30%	11%	7%	6%	19%	11%	6%	0%	6%	6%
Pacific people team	51	26	47%	4%	47%	8%	12%	8%	4%	0%	25%	4%	2%	8%	8%	0%
Specialty team	573	708	33%	11%	38%	14%	33%	8%	14%	5%	25%	10%	11%	7%	9%	3%
Total	7,119	6,354	38%	21%	48%	26%	27%	7%	12%	7%	28%	20%	11%	6%	10%	3%
Second 8 HoNOSCA items																
Team name	NOS		EMO		PEER		SC		FAM		SCH		KNW		INFO	
	Adm	Disch	Adm	Disch	Adm	Disch	Adm	Disch	Adm	Disch	Adm	Disch	Adm	Disch	Adm	Disch
Alcohol and drug team	9%	3%	63%	40%	33%	10%	12%	6%	46%	36%	30%	16%	33%	16%	17%	13%
Child and youth team	32%	11%	83%	47%	53%	29%	18%	10%	54%	35%	27%	12%	30%	12%	20%	7%
Community team	19%	2%	78%	36%	40%	23%	22%	2%	60%	28%	27%	10%	28%	2%	23%	0%
Early intervention team	7%		68%		43%		26%		54%		37%		25%		21%	
Eating disorders team	31%	9%	90%	34%	34%	17%	68%	11%	46%	21%	21%	5%	28%	9%	14%	7%
Forensic team	19%	10%	62%	43%	56%	46%	13%	5%	70%	71%	53%	39%	42%	28%	40%	28%
Kaupapa Māori team	26%	29%	83%	49%	54%	17%	13%	9%	57%	46%	35%	31%	39%	9%	11%	3%
Pacific people team	12%	4%	75%	23%	53%	8%	29%	8%	65%	23%	22%	4%	18%	8%	12%	4%
Specialty team	28%	7%	77%	34%	51%	20%	16%	9%	54%	27%	30%	13%	27%	7%	17%	4%
Total	30%	10%	82%	45%	52%	27%	18%	10%	55%	34%	28%	12%	30%	12%	20%	7%

Inpatient services

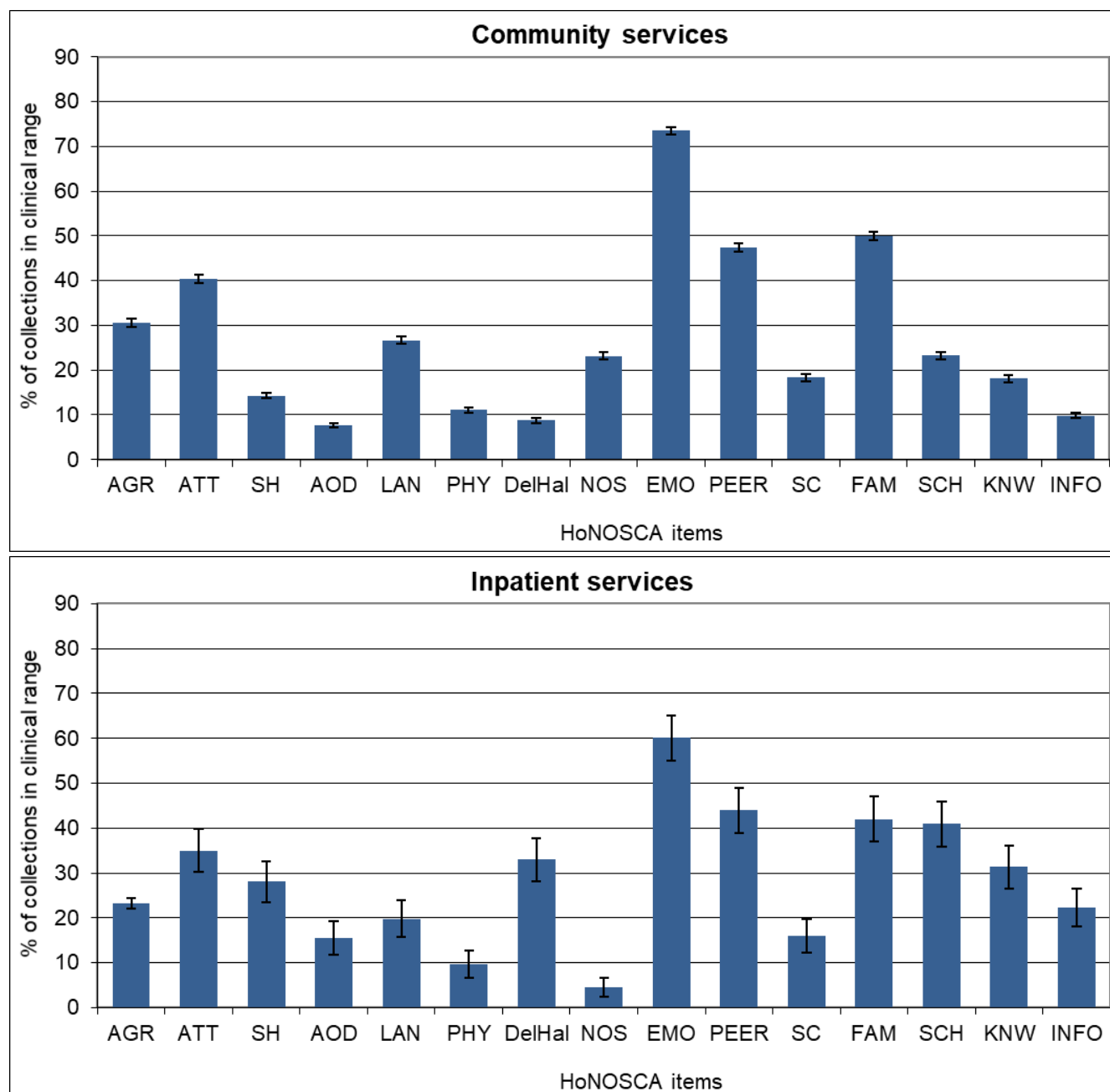
First 7 HoNOSCA items																
Team name	N		AGR		ATT		SH		AOD		LAN		PHY		DelHal	
	Adm	Disch	Adm	Disch	Adm	Disch	Adm	Disch	Adm	Disch	Adm	Disch	Adm	Disch	Adm	Disch
Child and youth team	558	336	40%	21%	47%	20%	60%	30%	33%	15%	20%	10%	13%	6%	29%	15%
Eating disorders team	34	28	18%	11%	44%	7%	29%	18%	6%	4%	6%	0%	62%	32%	47%	25%
Inpatient team	126	85	53%	33%	40%	20%	64%	40%	28%	20%	18%	18%	16%	11%	29%	18%
Specialty team	86	56	37%	14%	31%	11%	64%	18%	36%	16%	13%	11%	15%	7%	38%	7%
Total	815	514	41%	22%	44%	18%	60%	29%	32%	15%	19%	11%	16%	9%	31%	15%
Second 8 HoNOSCA items																
Team name	NOS		EMO		PEER		SC		FAM		SCH		KNW		INFO	
	Adm	Disch	Adm	Disch	Adm	Disch	Adm	Disch	Adm	Disch	Adm	Disch	Adm	Disch	Adm	Disch
Child and youth team	10%	4%	87%	60%	62%	35%	24%	10%	66%	47%	48%	27%	44%	17%	30%	9%
Eating disorders team	9%	7%	82%	50%	33%	18%	26%	29%	35%	36%	32%	14%	24%	33%	0%	0%
Inpatient team	14%	15%	87%	67%	58%	55%	17%	15%	63%	65%	41%	49%	29%	24%	18%	14%
Specialty team	17%	4%	88%	50%	44%	25%	23%	5%	65%	46%	52%	30%	26%	2%	16%	2%
Total	12%	6%	87%	59%	59%	36%	23%	11%	65%	49%	47%	31%	39%	18%	26%	9%

Notes: Percentage of service users in the clinical range (2, 3 or 4) for each HoNOSCA item. Community discharge does not include discharges to an inpatient unit.

Interpretation: The higher the percentage, the more prevalent the difficulty measured by the item is amongst service users. A greater decrease between admission and discharge suggests a better outcome for the difficulty measured by the item. Items that show medium to high frequency and less change may suggest possible targets for service improvement.

Target: A greater decrease from admission to discharge and smaller percentage in clinical range at discharge.

Graph 5b: Percentage of collections in clinical range on each HoNOSCA item (review collections): New Zealand, Apr 2019 - Mar 2020



Notes: Percentage of service users in the clinical range (2, 3 or 4) for each HoNOSCA item on review collections. Due to most admission being less than 91 days, the data set for review collections in inpatient settings is relatively small.

Interpretation: The longer the bar, the more prevalent the difficulty measured by the item is amongst service users.

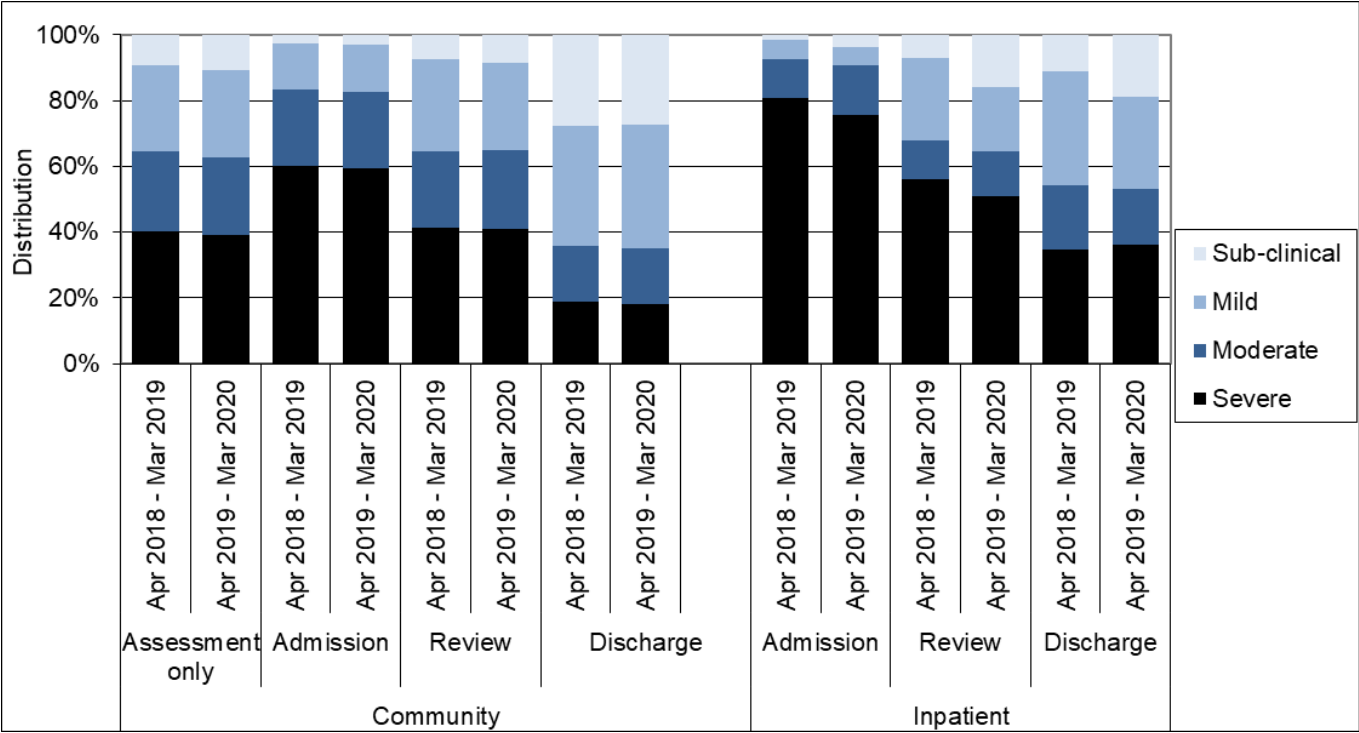
Table 5b: Percentage of collections in clinical range on each HoNOSCA item (review collections) by team: New Zealand, Apr 2019 - Mar 2020

Team type	N	AGR	ATT	SH	AOD	LAN	PHY	DelHal	NOS	EMO	PEER	SC	FAM	SCH	KNW	INFO
Community services																
Alcohol and drug team	119	27%	16%	16%	54%	11%	3%	7%	3%	55%	25%	7%	46%	19%	22%	12%
Child and youth team	8,193	32%	42%	14%	6%	29%	10%	7%	24%	75%	49%	18%	50%	23%	19%	11%
Community team	122	20%	23%	27%	18%	17%	15%	6%	19%	57%	33%	9%	45%	22%	9%	9%
Early intervention team	62	13%	39%	2%	11%	41%	16%	35%	15%	56%	44%	19%	34%	24%	10%	3%
Eating disorders team	313	14%	21%	14%	5%	6%	33%	51%	26%	73%	28%	48%	41%	17%	14%	9%
Forensic team	124	55%	52%	8%	34%	30%	6%	2%	11%	52%	44%	4%	70%	30%	31%	25%
Kaupapa Māori team	118	38%	46%	14%	8%	26%	9%	9%	30%	72%	53%	17%	46%	32%	21%	3%
Pacific people team	61	41%	59%	2%	8%	23%	10%	11%	10%	79%	52%	41%	59%	23%	10%	10%
Specialty team	1,393	26%	35%	17%	7%	22%	13%	7%	24%	71%	46%	18%	50%	22%	14%	6%
Total	10,516	31%	40%	14%	8%	27%	11%	9%	23%	73%	47%	18%	50%	23%	18%	10%
Inpatient services																
Child and youth team	360	23%	35%	28%	15%	20%	9%	33%	4%	59%	44%	16%	42%	41%	31%	22%
Total	371	23%	35%	28%	15%	20%	10%	33%	5%	60%	44%	16%	42%	41%	31%	22%

Notes: Percentage of service users in the clinical range (2, 3 or 4) for each HoNOSCA item on review collections. Due to most admission being less than 91 days, the data set for review collections in inpatient settings is relatively small.

Interpretation: The higher the percentage, the more prevalent the difficulty measured by the item is amongst service users.

Graph 6: Index of Severity ratings for HoNOSCA by collection type: New Zealand, Apr 2018 - Mar 2019 and Apr 2019 - Mar 2020



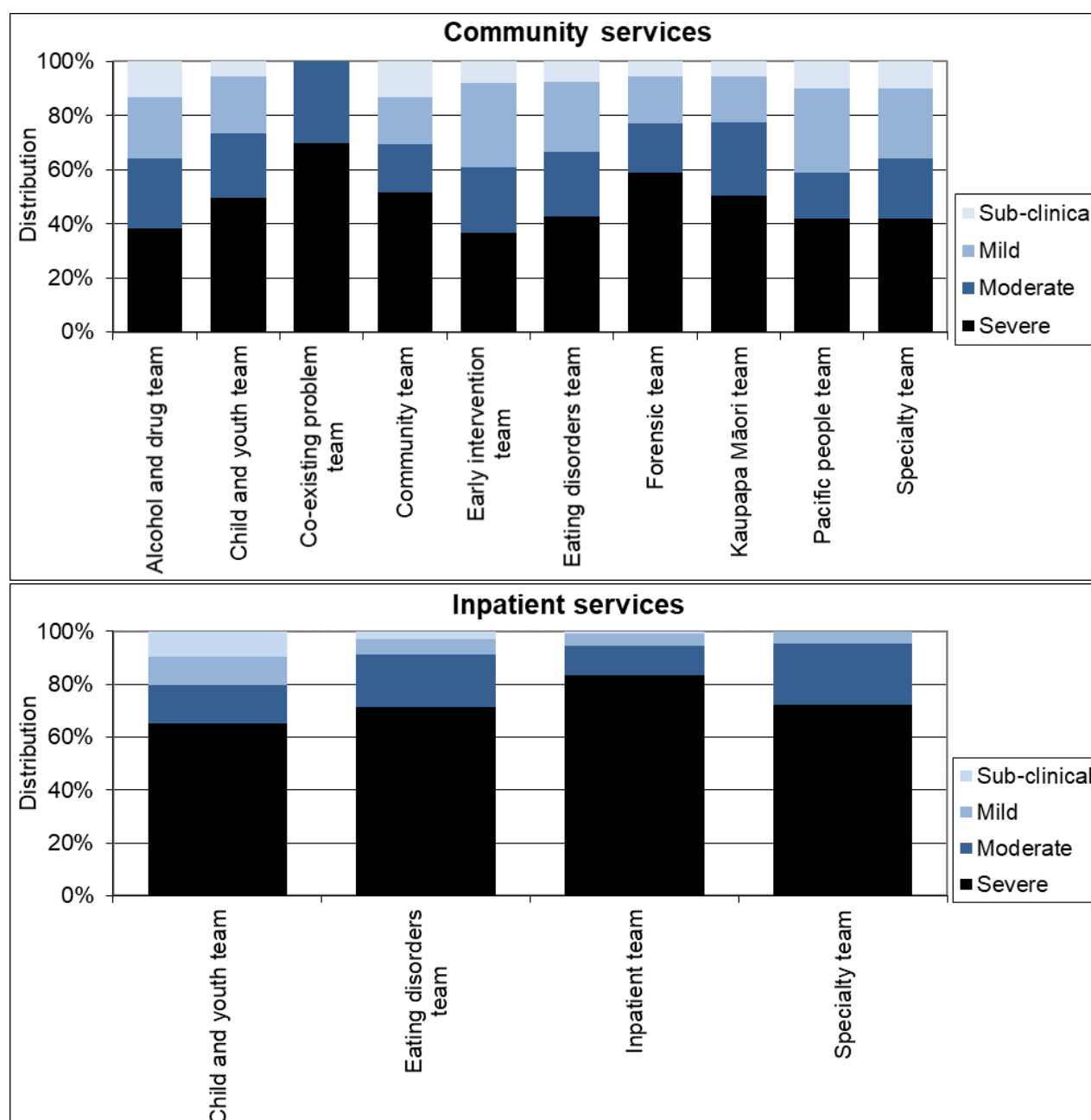
Notes: Community discharge does not include discharge to an inpatient unit. Index of Severity: Sub clinical = all items <2, mild = at least one item >1 and all items <3, moderate = at least one item >=3, severe = at least 2 items >=3 using first 13 items.

Interpretation: Darker bars indicate higher overall level of severity. More positive outcome is shown by larger decrease in darker sections of bar between admission and discharge.

2. Other measures of service activity

This section presents HoNOSCA data indicating the status of service users at different stages of their contact with DHB mental health services. Graph and Table 1, and Graph 2 show results from HoNOSCA total scores. Graphs and Tables 3 to 5b show results related to the percentage of HoNOSCA items in the clinical range. Table 6 shows results from the Index of Severity derived from HoNOSCA scores.

Graph 7: Index of severity for HoNOSCA (admission and review collections) by team, New Zealand, Apr 2019 - Mar 2020



Notes: Only data related to collection at admission and review is included so that results reflect the severity of service users during their engagement with the service. Index of Severity: Sub clinical = all items <2, mild = at least one item >1 and all items <3, moderate = at least one item >=3, severe = at least 2 items >=3 using first 13 items.

Interpretation: This graph gives an impression of the overall severity of the caseload for different teams at admission. The longer the darker bar, the higher the overall severity of the team's caseload.

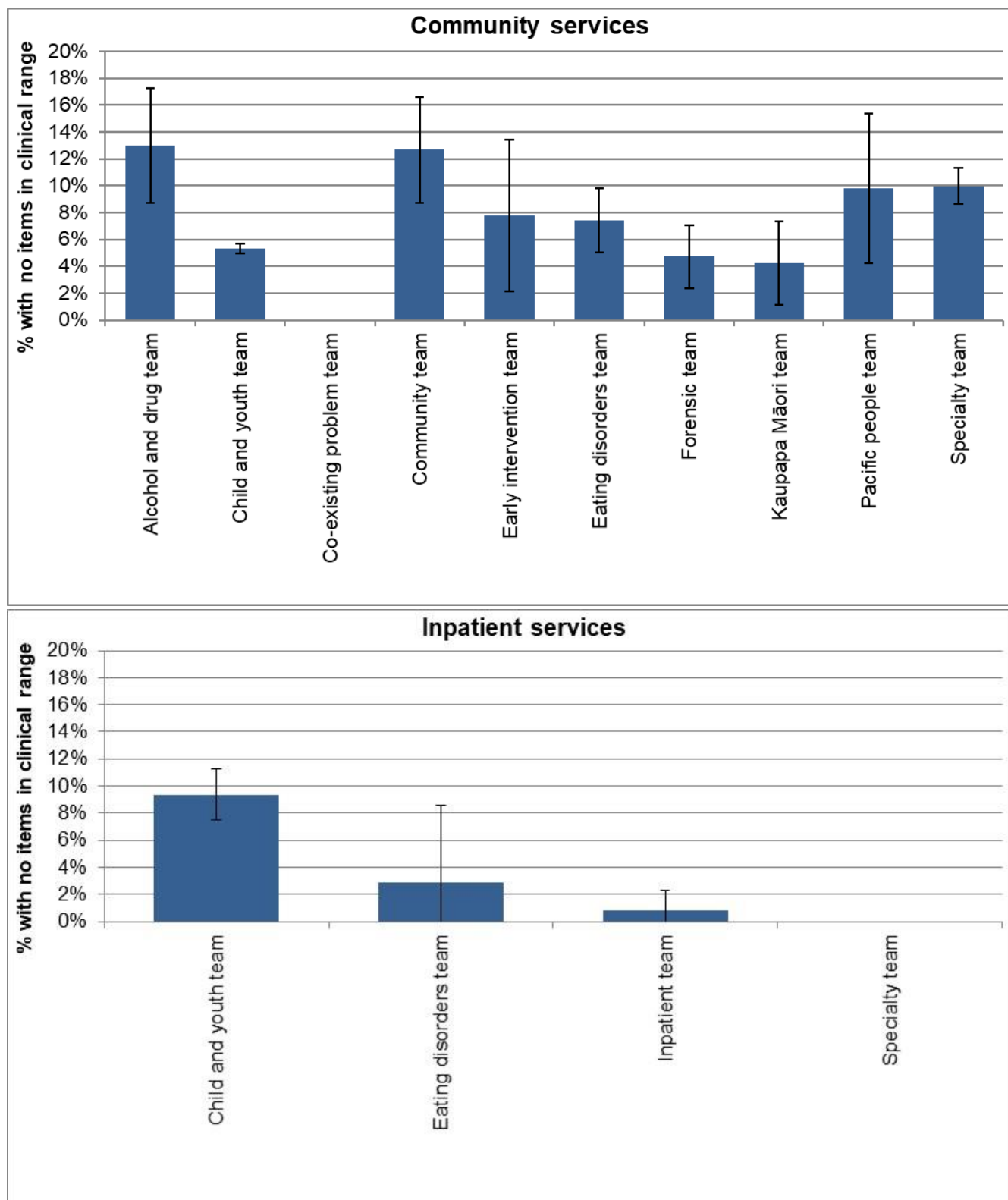
Table 7: Index of Severity for HoNOSCA by collection type and team: New Zealand, Apr 2019 - Mar 2020

Team type	Assessment only					Admission					Review					Discharge				
	Sub	Mild	Mod	Sev	N	Sub	Mild	Mod	Sev	N	Sub	Mild	Mod	Sev	N	Sub	Mild	Mod	Sev	N
Community services																				
Alcohol and drug team						8%	26%	28%	39%	120	18%	20%	24%	38%	119	29%	28%	18%	24%	109
Child and youth team	12%	30%	24%	34%	3,357	2%	14%	23%	60%	5,782	8%	26%	24%	42%	8,196	25%	39%	18%	18%	5,189
Community team	4%	12%	21%	63%	336	6%	11%	21%	62%	154	22%	25%	14%	39%	122	42%	36%	4%	19%	53
Early intervention team						0%	21%	39%	39%	28	11%	35%	18%	35%	62	54%	25%	5%	16%	117
Eating disorders team	13%	10%	32%	45%	31	1%	19%	24%	56%	160	11%	30%	24%	36%	313					
Forensic team	5%	14%	22%	58%	369	2%	11%	15%	72%	193	10%	27%	23%	40%	124	9%	31%	20%	40%	104
Kaupapa Māori team						4%	6%	23%	66%	47	6%	21%	29%	44%	118	17%	37%	31%	14%	35
Pacific people team						12%	27%	14%	47%	51	8%	34%	20%	38%	61	62%	15%	15%	8%	26
Specialty team	10%	19%	22%	48%	180	6%	17%	22%	55%	574	12%	29%	23%	36%	1,394	42%	33%	13%	12%	709
Total	11%	27%	24%	39%	4,314	3%	14%	23%	60%	7,122	9%	27%	24%	41%	10,525	27%	38%	17%	18%	6,358
Inpatient services																				
Child and youth team						5%	6%	15%	75%	558	16%	19%	14%	51%	360	20%	29%	17%	34%	336
Eating disorders team						3%	6%	21%	71%	34						14%	43%	14%	29%	28
Inpatient team						1%	5%	11%	83%	126						12%	16%	16%	55%	85
Specialty team						0%	5%	23%	72%	86						23%	30%	18%	29%	56
Total						4%	6%	15%	76%	815	16%	20%	13%	51%	371	19%	28%	17%	36%	514

Notes: Sub = sub clinical, Mild = mild, Mod = moderate, Sev = severe on Index of Severity. Only admission collection data is included so that results reflect the severity of service users during their engagement with the service. Index of Severity: Sub clinical = all items <2, mild = at least one item >1 and all items <3, moderate = at least one item >=3, severe = at least 2 items >=3 using first 13 items. Community discharge does not include discharge to an inpatient unit.

Interpretation: Larger percentages in the columns to the right for each type of collection, the higher the overall severity of the team's caseload.

Graph 8: Collections with no HoNOSCA items in clinical range: New Zealand, Apr 2019 - Mar 2020



Notes: Includes admission and review collections. Shows percentage of service users with all HoNOSCA items less than two, ie no HoNOSCA items in the clinical range.

Interpretation: There are a variety of reasons that may make it appropriate for service users to remain in the service even though they show no HoNOSCA items in the clinical range. However, teams showing a larger or substantial percentage of service users with no HoNOSCA items in the clinical range could benefit from reviewing these cases to ensure that the service remains appropriate for this service user.

Table 8: Collections with no HoNOSCA items in clinical range: New Zealand, Apr 2019 - Mar 2020

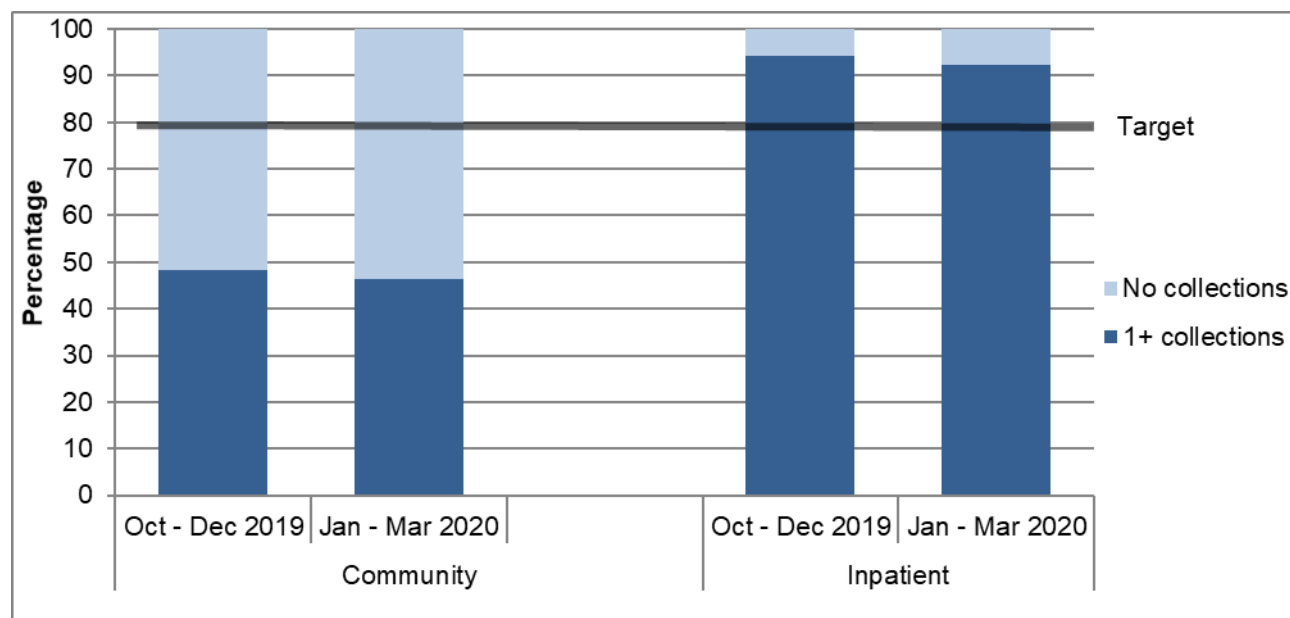
Team type	Number of collections with no items in clinical range	Percentage with no items in clinical range
Community services		
Alcohol and drug team	31	13%
Child and youth team	746	5%
Co-existing problem team	0	0%
Community team	35	13%
Early intervention team	7	8%
Eating disorders team	35	7%
Forensic team	15	5%
Kaupapa Māori team	7	4%
Pacific people team	11	10%
Specialty team	196	10%
Total	1,083	6%
Inpatient services		
Child and youth team	86	9%
Eating disorders team	1	3%
Inpatient team	1	1%
Specialty team	0	0%
Total	89	8%

Notes: For further information see notes for graph 8.

3. Collection completion and validity

This section presents information about the completeness and validity of the data on which the remainder of this report is based. It also shows the current targets for the variables presented.

Graph 9: Percentage of service users with at least one collection during the period: New Zealand, Oct – Dec 2019 and Jan – Mar 2020 (4 to 17 years)

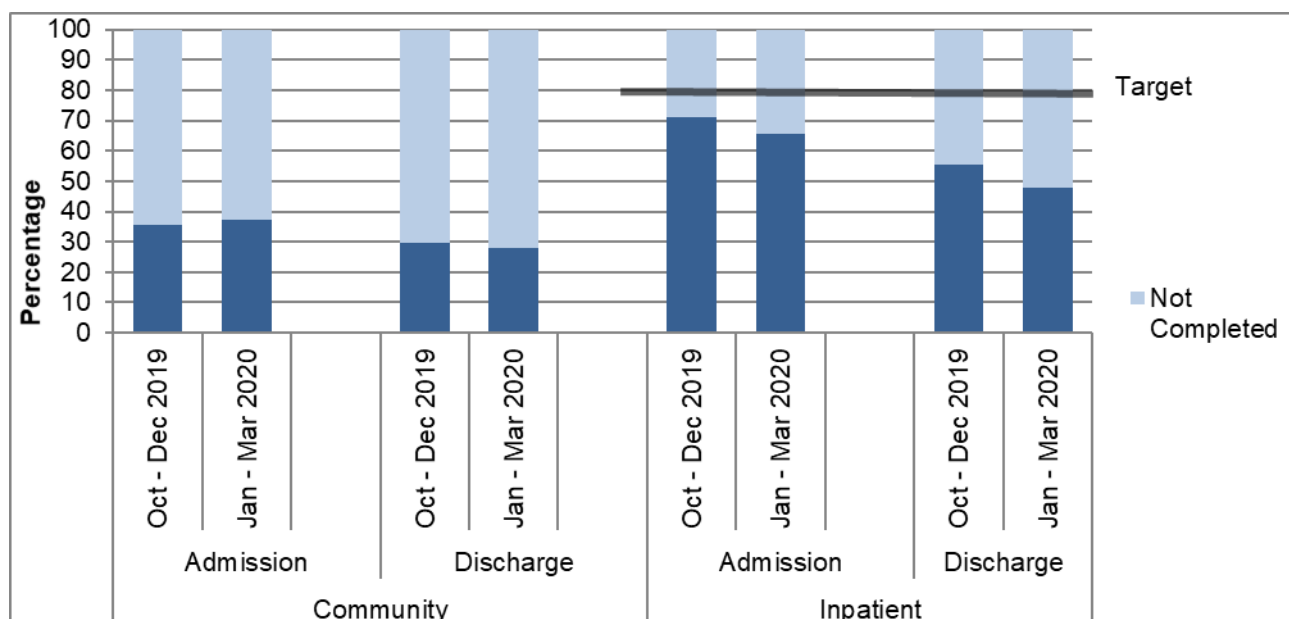


Notes: Community compliance is affected by crisis teams doing triage or brief assessment type activity which is not a comprehensive assessment.

Interpretation: The longer the dark part of the bar, the more completely the data set includes all service users, and the more meaningful and representative the graphs, tables, and analyses using these data will be. This data is approximate due to movement of service users between teams and similar variations; however, it does provide a reasonably accurate representation of completion of measures. Only data with valid collections is included.

Target: To meet or exceed the target shown on the graph for the percentage of service users with at least one collection within the period.

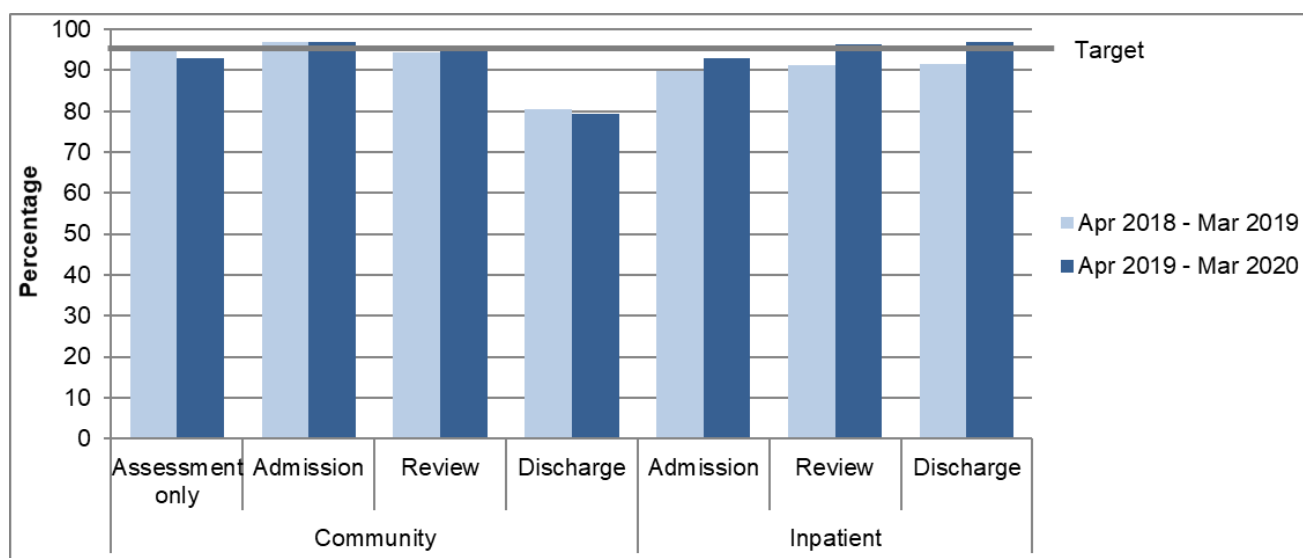
Graph 10: Percentage of service users with admission and discharge collections completed: New Zealand, Jan – Mar 2020 (4 to 17 years)



Notes: Community compliance is affected by crisis teams doing triage or brief assessment type activity which is not a comprehensive assessment.

Interpretation: The longer the dark bar, the larger the percentage of admission and discharge that had the relevant data collection type. Data is approximate due to movement of service users between teams and similar variations; however, it does provide a reasonably accurate representation of completion of measures. Only data with valid collections is included.

Graph 11: Percentage of valid collections, HoNOSCA: New Zealand, Apr 2018 - Mar 2019 and Apr 2019 - Mar 2020



Notes: Valid = Two or fewer of the 15 items scored as unknown or missing. Discharge excludes collection types for lost to care, discharge dead and brief episode of care. Collection in drug and alcohol teams is not required, therefore AOD data is excluded.

Interpretation: The longer the dark lines, the higher the percentage of valid scores.

Target: Aim for 95% valid collections.

Table 11: Invalid collections by team, by HoNOSCA item: New Zealand, Apr 2019 - Mar 2020

Team type	% Invalid			Number of invalid ratings by HoNOSCA item															Total Number
	Adm	Rev	Dch	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	
Community services																			
Child and youth team	2%	4%	14%	1,324	1,404	1,421	1,604	1,796	1,404	1,413	1,472	1,370	1,463	1,419	1,381	1,817	1,441	1,424	24,338
Community team	11%	10%	28%	62	70	62	85	90	77	70	76	68	83	72	71	118	93	89	786
Early intervention team	3%	0%		3	4	2	3	5	2	2	2	3	2	3	2	9	4	3	107
Eating disorders team	0%	0%	9%	15	15	16	19	16	15	16	16	15	15	15	15	19	16	15	664
Forensic team	3%	7%	15%	31	36	38	53	75	42	43	41	41	43	41	48	89	204	210	870
Kaupapa Māori team	8%	7%	30%	22	24	23	24	32	21	21	24	23	25	22	21	25	24	25	229
Pacific people team	2%	3%	26%	13	13	13	13	14	13	13	13	14	14	13	13	14	15	14	164
Specialty team	7%	7%	44%	1,031	1,052	1,037	1,080	1,070	1,046	1,043	1,049	1,018	1,042	1,036	1,030	1,086	1,064	1,051	4,290
Total	3%	4%	21%	2,501	2,618	2,612	2,881	3,098	2,620	2,621	2,693	2,552	2,687	2,621	2,581	3,178	2,861	2,831	31,462
Inpatient services																			
Child and youth team	9%	4%	3%	39	35	48	93	90	41	43	49	43	103	48	61	228	79	97	1,328
Eating disorders team	0%		0%	0	0	0	0	0	0	0	0	0	1	0	0	0	2	2	63
Forensic team				1	1	1	2	2	1	0	2	1	2	2	1	6	5	7	25
Inpatient team	5%		5%	1	3	1	3	5	3	1	3	4	6	5	5	22	15	11	215
Specialty team	2%		0%	0	0	1	3	4	1	1	1	0	0	0	2	8	6	4	144
Total	7%	4%	3%	41	39	51	101	101	46	45	55	48	112	55	69	264	107	121	1,781

Notes: Per cent (%) invalid collections = the percentage of collections that had three or more of the 15 items scored as unknown or missing. Number of invalid ratings by HoNOSCA item = for each of the HoNOSCA items, the number of collections for which that item was unknown or missing. Discharge excludes collection types for lost to care, deceased and brief episode of care. Collection in drug and alcohol teams is not required, therefore AOD data is excluded.

Interpretation: The lower the per cent invalid, the higher the percentage of valid scores. The lower the number of invalid collections by HoNOSCA item, the more collections that have valid data on that HoNOSCA item.

Target: Aim for 95% valid collections (5% invalid collections) or better. Aim for as few invalid items as possible, with all items having a similar validity rate.