



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 Te Whatu Ora District. 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.

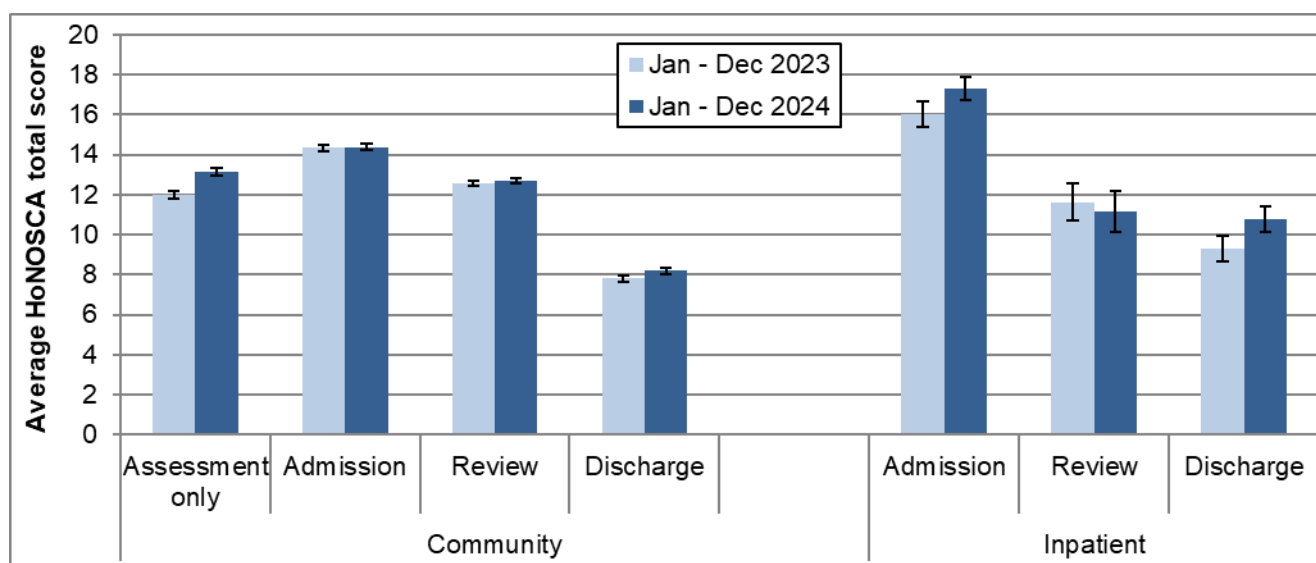
Data for tables and graphs was extracted 26 April 2025 from PRIMHD by Te Whatu Ora, then analysed and formatted by Te Pou.

Please note: For this period a few Te Whatu Ora Districts 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 Te Whatu Ora District 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 (13 items) by collection type: New Zealand, Jan - Dec 2023 and Jan - Dec 2024



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.

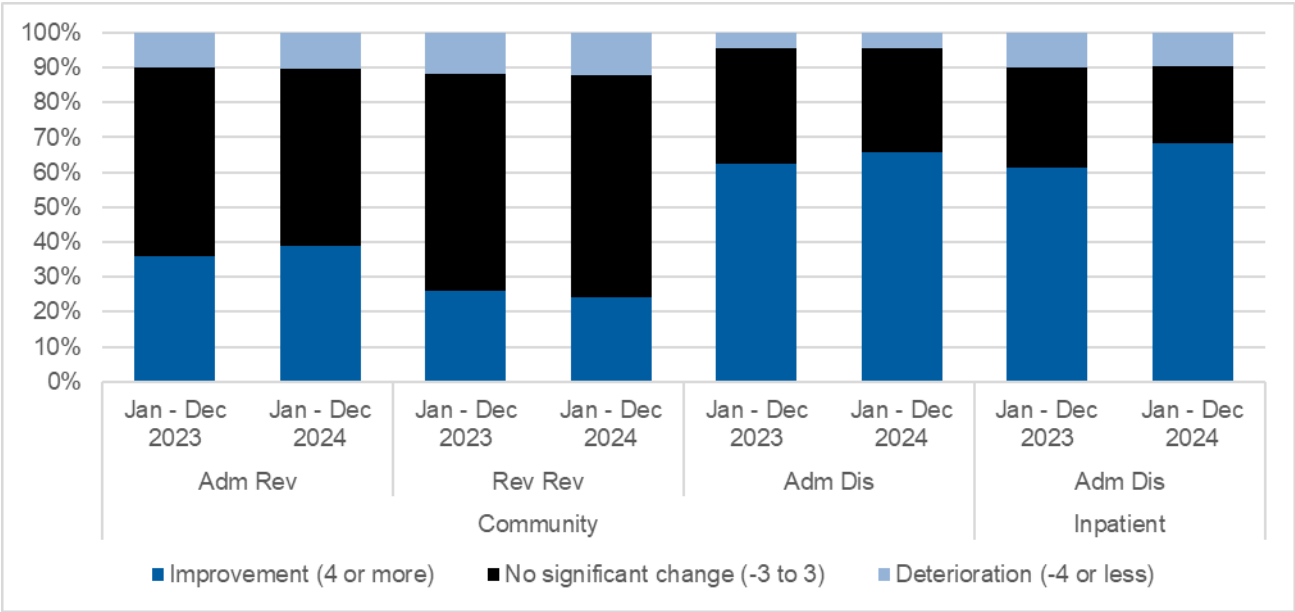
Table 1: Average HoNOSCA total score (13 items), by collection type and team: New Zealand, Jan - Dec 2024

Team Type	Assessment only			Admission			Review			Discharge		
	N	Mean	CI	N	Mean	CI	N	Mean	CI	N	Mean	CI
Community services												
Child and youth team	3,060	12.8	12.6-13.0	4,823	14.1	13.9-14.3	7,160	12.6	12.4-12.7	4,155	8.5	8.3-8.6
Community team	238	13.9	13.1-14.6	100	16.0	14.3-17.7	202	12.9	11.9-13.8	75	7.5	6.0-9.1
Early intervention team				28	13.5	10.3-16.7	40	12.7	10.2-15.1			
Eating disorders team	23	10.1	8.4-11.8	171	13.4	12.3-14.5	352	10.8	10.2-11.5	114	4.2	3.4-5.0
Forensic team	79	14.7	13.0-16.5	157	18.9	17.8-20.0	89	13.3	11.8-14.8	96	13.0	11.2-14.8
Kaupapa Māori team				28	16.5	14.2-18.8	37	16.6	13.9-19.3	39	11.1	8.1-14.0
Pacific people team				28	17.8	15.4-20.1	46	10.3	8.5-12.1			
Specialty team	601	14.6	14.1-15.1	581	15.1	14.5-15.7	1,345	13.8	13.4-14.2	914	6.8	6.4-7.3
Total	4,018	13.1	12.9-13.4	5,935	14.4	14.2-14.5	9,295	12.7	12.6-12.8	5,422	8.2	8.0-8.4
Inpatient services												
Child and youth team				541	16.8	16.1-17.5	152	10.5	9.5-11.6	380	10.6	9.9-11.3
Inpatient team				64	19.1	17.2-21.1				27	17.3	14.0-20.5
Specialty team				67	19.9	18.2-21.5				67	9.2	7.6-10.8
Total				690	17.3	16.7-17.9	171	11.2	10.2-12.2	481	10.8	10.1-11.4

Notes: N = number of collections in period. Average = average HoNOSCA (First 13 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 (13 items) for matched pairs by pair type and setting, New Zealand, Jan - Dec 2023 and Jan - Dec 2024



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 (13 items) for matched pairs by pair type and team, community New Zealand, Jan - Dec 2024

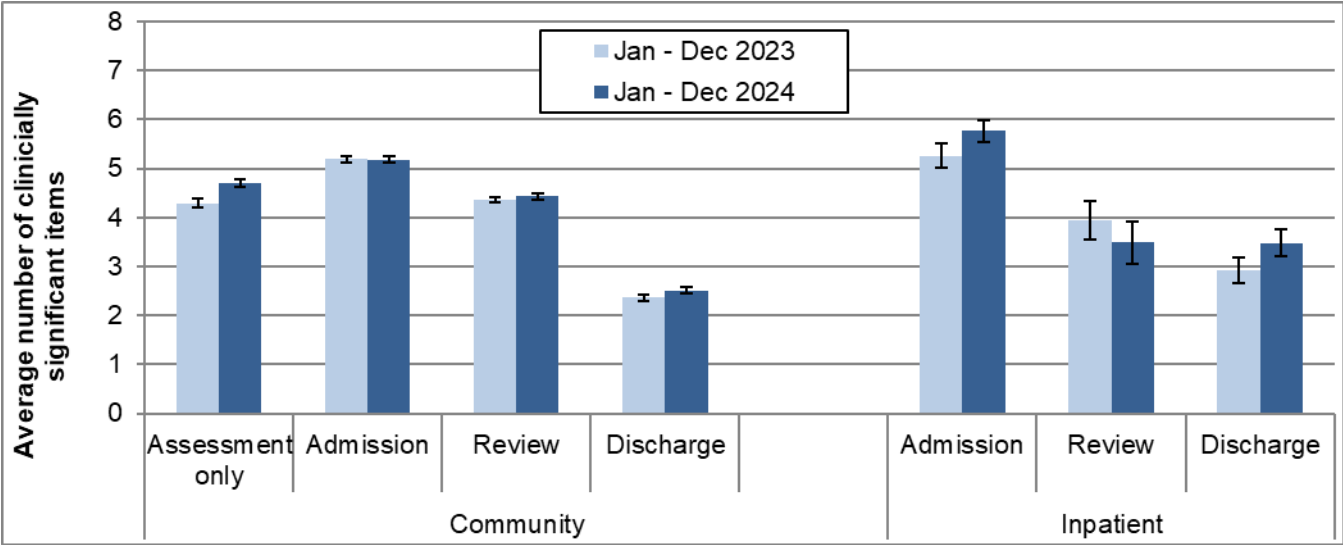
Team Type	Com Adm Rev				Com Rev Rev				Com Adm Dis			
	↓ Det	No SC	↑ Imp	N	↓ Det	No SC	↑ Imp	N	↓ Det	No SC	↑ Imp	N
Child and youth team	10%	51%	39%	896	12%	62%	25%	2,083	5%	30%	65%	2,109
Community team	12%	62%	27%	26	10%	74%	16%	73	7%	22%	71%	41
Eating disorders team	9%	45%	45%	44	11%	54%	35%	81	1%	21%	78%	68
Forensic team									4%	25%	71%	28
Specialty team	11%	51%	38%	136	11%	69%	19%	436	5%	29%	66%	263
Total	10%	51%	39%	1,129	12%	64%	24%	2,703	5%	30%	66%	2,535

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, Jan - Dec 2023 and Jan - Dec 2024



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.

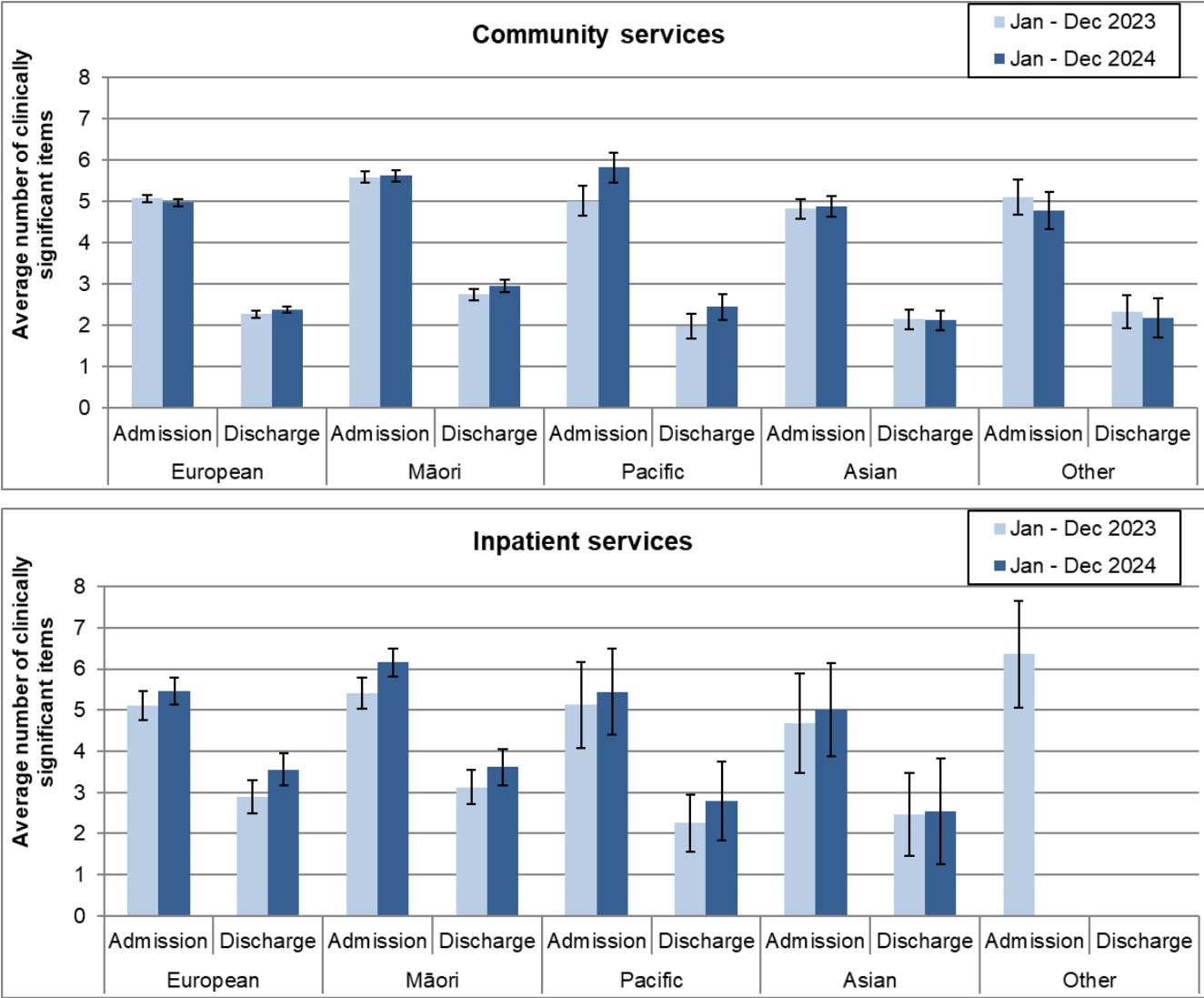
Table 3: Average number of clinically significant HoNOSCA items by collection type and team: New Zealand, Jan - Dec 2024

Team Type	Assessment only			Admission			Review			Discharge		
	N	Mean	CI	N	Mean	CI	N	Mean	CI	N	Mean	CI
Community services												
Child and youth team	3,060	4.6	4.5-4.7	4,823	5.1	5.0-5.2	7,160	4.4	4.3-4.5	4,155	2.6	2.5-2.7
Community team	238	5.2	4.9-5.5	100	5.5	4.9-6.1	202	4.5	4.1-5.0	75	2.6	1.9-3.2
Early intervention team				28	4.5	3.3-5.8	40	4.1	3.2-5.0			
Eating disorders team	23	3.6	2.8-4.4	171	4.7	4.3-5.1	352	3.6	3.3-3.9	114	1.3	0.9-1.6
Forensic team	79	5.4	4.7-6.2	157	6.7	6.2-7.1	89	4.8	4.3-5.3	96	4.9	4.2-5.7
Kaupapa Māori team				28	5.9	5.0-6.8	37	5.8	4.7-6.9	39	3.4	2.3-4.6
Pacific people team				28	6.9	6.0-7.8	46	3.6	2.8-4.4			
Specialty team	601	5.1	4.9-5.3	581	5.2	5.0-5.4	1,345	4.7	4.6-4.9	914	2.0	1.9-2.2
Total	4,018	4.7	4.6-4.8	5,935	5.2	5.1-5.2	9,295	4.4	4.4-4.5	5,422	2.5	2.4-2.6
Inpatient services												
Child and youth team				541	5.5	5.3-5.8	152	3.2	2.8-3.7	380	3.4	3.1-3.7
Inpatient team				64	7.1	6.3-7.8				27	6.7	5.3-8.0
Specialty team				67	6.7	6.1-7.4				67	2.5	1.8-3.1
Total				690	5.8	5.5-6.0	171	3.5	3.1-3.9	481	3.5	3.2-3.8

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, Jan - Dec 2023 and Jan - Dec 2024

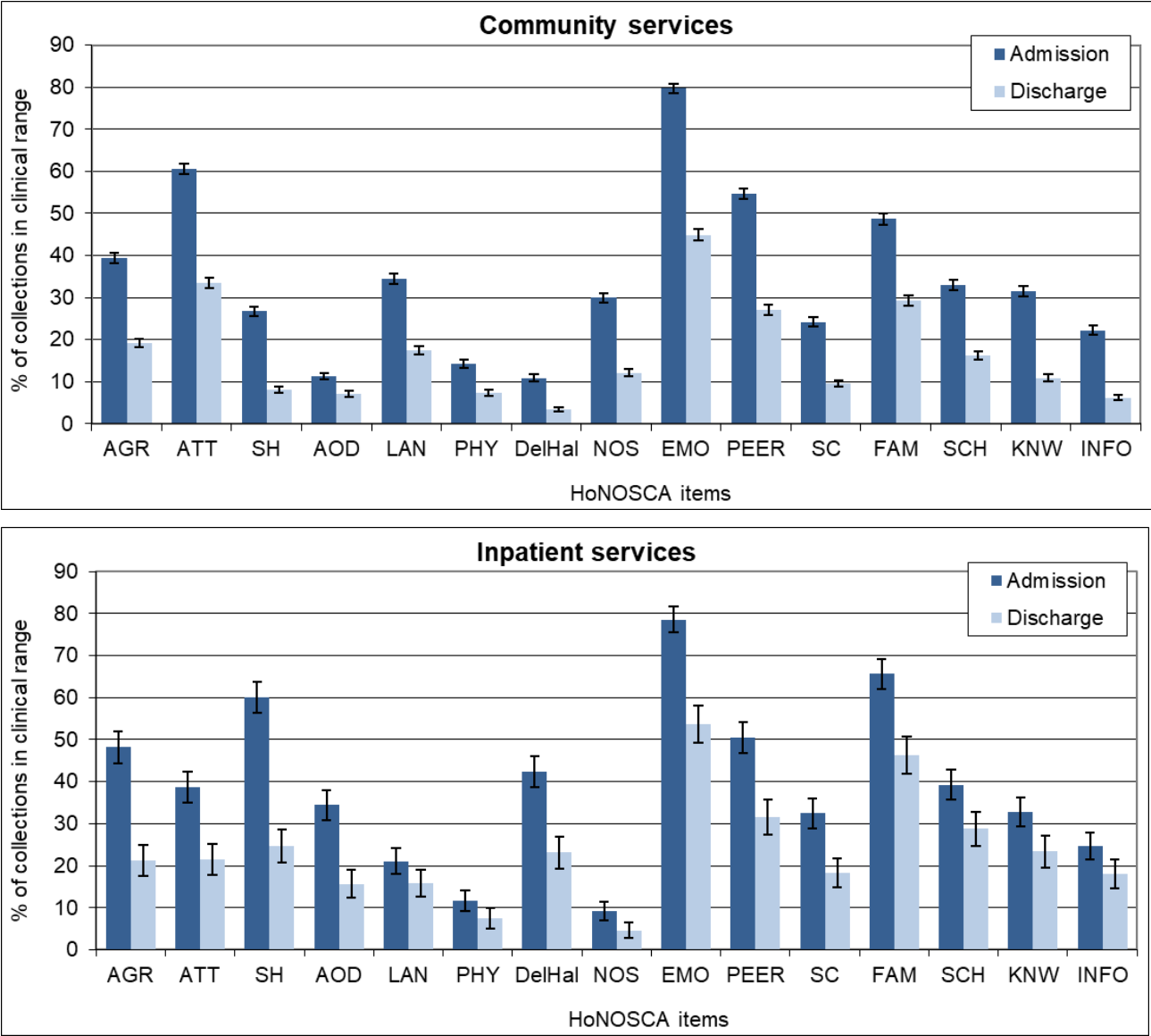


Notes: Average number of HoNOSCA items in the clinical range (2, 3 or 4). Community discharge does not include discharge to an inpatient unit.

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, Jan - Dec 2024



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 Jan - Dec 2024

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
Child and youth team	4,822	4,153	39%	20%	62%	36%	27%	8%	9%	6%	35%	18%	12%	7%	9%	3%
Community team	100	75	39%	20%	52%	29%	55%	14%	29%	9%	23%	9%	15%	8%	19%	3%
Early intervention team	28		25%		46%		11%		39%		26%		0%		61%	
Eating disorders team	171	114	21%	3%	35%	10%	22%	3%	4%	3%	6%	2%	58%	15%	51%	16%
Forensic team	157	96	81%	61%	71%	53%	19%	10%	65%	42%	48%	39%	15%	9%	4%	7%
Kaupapa Māori team	28	39	57%	23%	75%	54%	26%	10%	14%	15%	30%	26%	21%	5%	4%	3%
Pacific people team	28		68%		93%		25%		4%		32%		11%		7%	
Specialty team	580	914	38%	14%	55%	24%	28%	9%	12%	7%	39%	13%	18%	7%	12%	4%
Total	5,933	5,418	39%	19%	61%	33%	27%	8%	11%	7%	34%	17%	14%	7%	11%	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
Child and youth team	32%	13%	80%	46%	55%	29%	22%	10%	48%	30%	31%	16%	32%	11%	23%	6%
Community team	17%	15%	88%	49%	56%	23%	23%	11%	54%	36%	38%	16%	31%	9%	24%	8%
Early intervention team	11%		50%		43%		21%		43%		38%		29%		14%	
Eating disorders team	15%	6%	85%	39%	34%	5%	60%	5%	35%	10%	22%	5%	20%	4%	6%	1%
Forensic team	18%	5%	75%	54%	62%	46%	21%	22%	70%	48%	68%	41%	43%	37%	35%	32%
Kaupapa Māori team	33%	8%	79%	55%	70%	36%	30%	28%	54%	41%	37%	21%	43%	16%	25%	5%
Pacific people team	46%		93%		81%		61%		82%		54%		21%		18%	
Specialty team	21%	8%	77%	38%	58%	21%	29%	8%	49%	26%	39%	14%	29%	8%	21%	5%
Total	30%	12%	80%	45%	55%	27%	24%	10%	49%	29%	33%	16%	31%	11%	22%	6%

Inpatient services

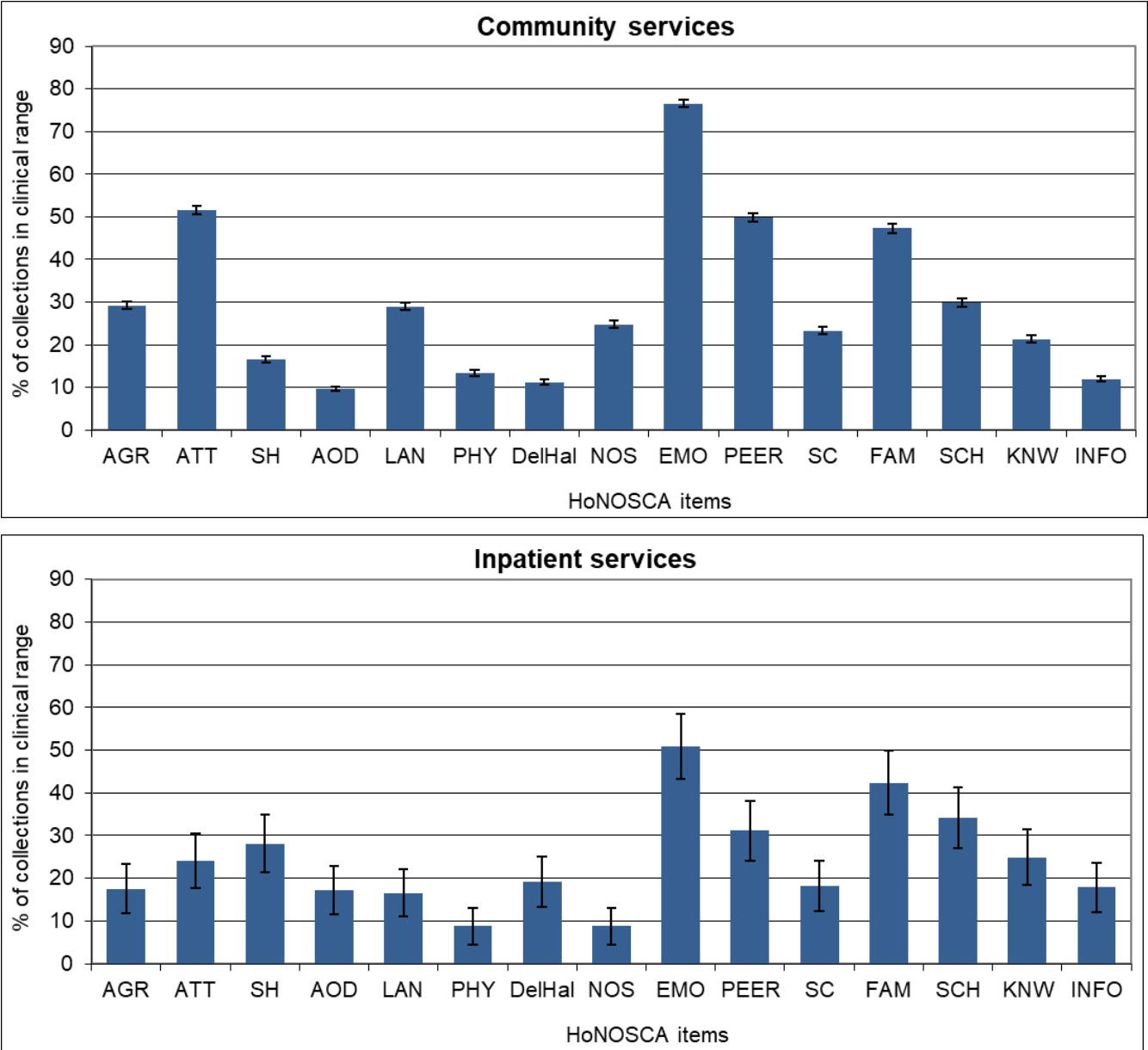
First 7 HoNOSCA items																
Team name	N		AGR		ATT		SH		AOD		LAN		PHY		DelHal	
	Adm	Disch	Adm	Disch	Adm	Disch	Adm	Disch	Adm	Disch	Adm	Disch	Adm	Disch	Adm	Disch
Child and youth team	541	380	48%	21%	37%	20%	63%	27%	33%	14%	20%	16%	10%	7%	39%	23%
Inpatient team	64	27	52%	41%	52%	44%	54%	26%	39%	41%	19%	19%	14%	15%	52%	30%
Specialty team	67	67	52%	12%	45%	18%	52%	12%	46%	13%	33%	15%	13%	9%	66%	22%
Total	690	481	48%	21%	39%	21%	60%	25%	34%	16%	21%	16%	12%	7%	42%	23%
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	8%	4%	77%	55%	49%	32%	31%	17%	63%	46%	34%	27%	31%	23%	23%	18%
Inpatient team	11%	19%	86%	81%	62%	62%	41%	41%	81%	81%	52%	64%	52%	67%	47%	44%
Specialty team	13%	4%	82%	34%	51%	18%	40%	16%	72%	31%	62%	25%	31%	10%	22%	6%
Total	9%	5%	79%	54%	50%	32%	32%	18%	66%	46%	39%	29%	33%	23%	25%	18%

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, Jan - Dec 2024



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.

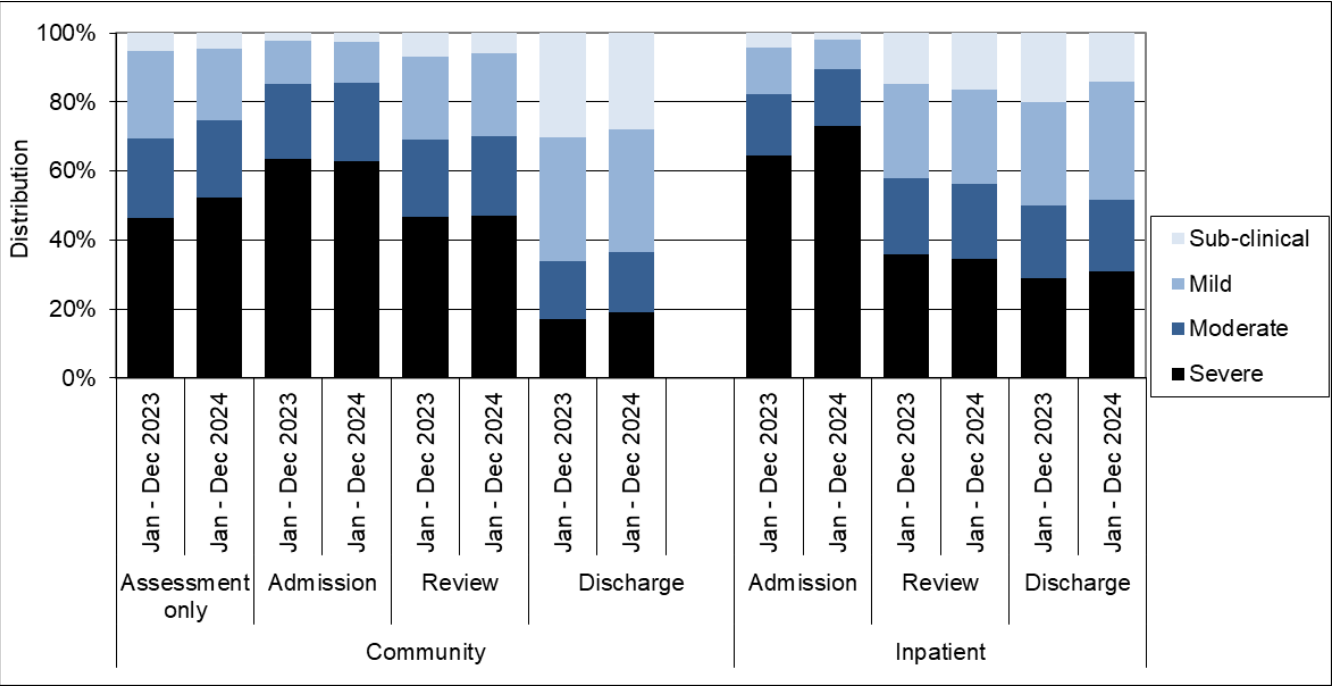
Table 5b: Percentage of collections in clinical range on each HoNOSCA item (review collections) by team: New Zealand, Jan - Dec 2024

Team type	N	AGR	ATT	SH	AOD	LAN	PHY	DelHal	NOS	EMO	PEER	SC	FAM	SCH	KNW	INFO
Community services																
Child and youth team	7,153	29%	53%	16%	8%	30%	12%	9%	27%	77%	50%	22%	47%	29%	22%	12%
Community team	202	33%	46%	18%	23%	24%	14%	20%	18%	75%	53%	22%	50%	25%	20%	14%
Early intervention team	40	13%	33%	3%	28%	40%	20%	53%	3%	45%	58%	23%	30%	33%	23%	18%
Eating disorders team	352	12%	26%	13%	3%	9%	35%	44%	13%	79%	25%	43%	26%	18%	11%	5%
Forensic team	89	74%	55%	8%	55%	34%	11%	7%	2%	58%	51%	20%	62%	37%	7%	6%
Kaupapa Māori team	37	46%	57%	30%	14%	26%	14%	8%	27%	92%	70%	35%	59%	46%	36%	28%
Pacific people team	46	43%	61%	0%	9%	13%	9%	2%	7%	59%	46%	28%	43%	24%	13%	4%
Specialty team	1,344	30%	52%	21%	13%	30%	15%	12%	21%	76%	53%	27%	52%	38%	22%	13%
Total	9,287	29%	52%	17%	10%	29%	13%	11%	25%	77%	50%	23%	47%	30%	21%	12%
Inpatient services																
Child and youth team	152	15%	20%	28%	14%	15%	9%	18%	8%	49%	28%	19%	40%	30%	25%	18%
Total	171	18%	24%	28%	17%	17%	9%	19%	9%	51%	31%	18%	42%	34%	25%	18%

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, Jan - Dec 2023 and Jan - Dec 2024



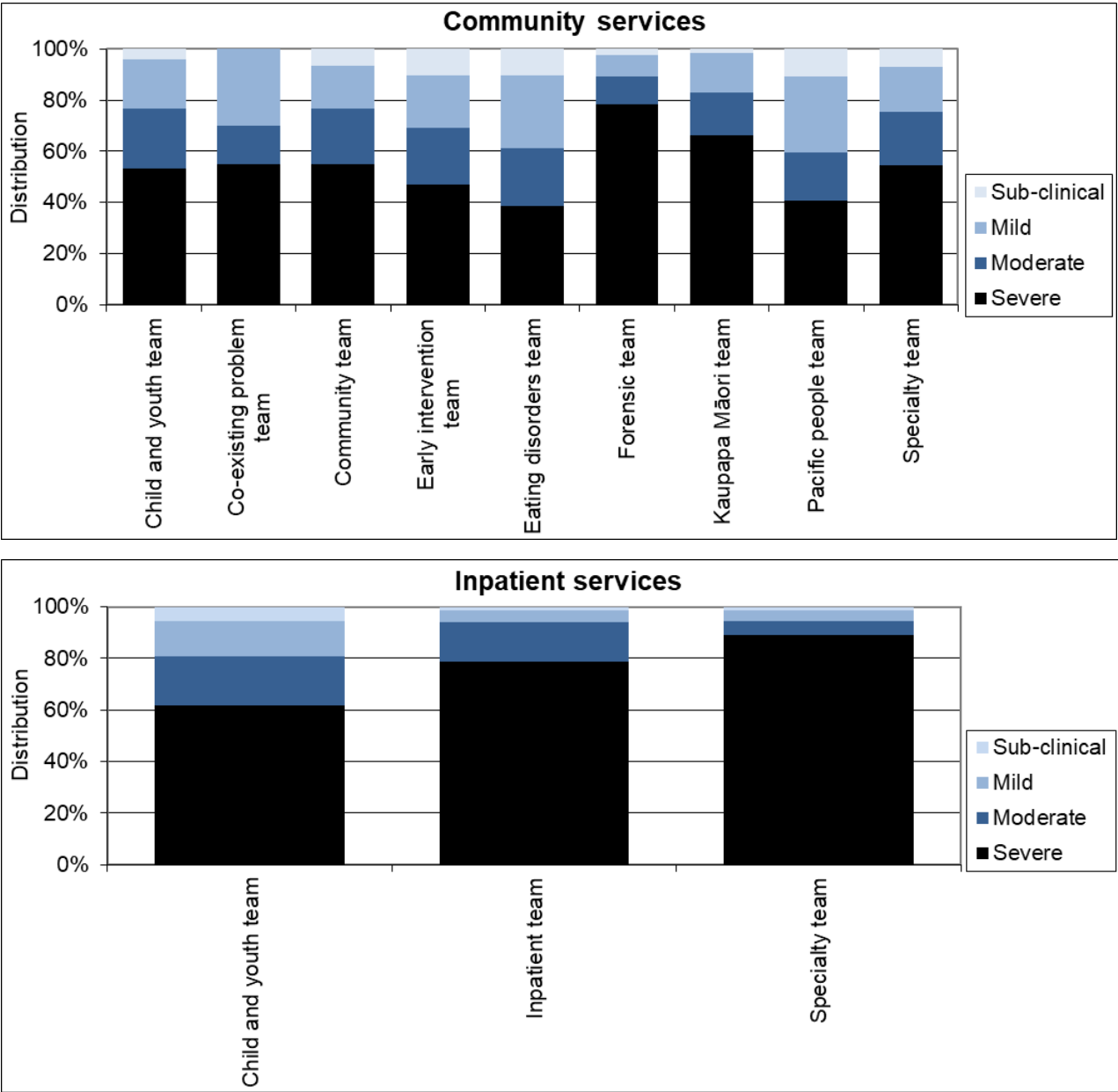
Notes: Community discharge does not include discharge to an inpatient unit. Index of Severity: Sub clinical = all items <2, mild = at least one item >1 and all items <3, moderate = at least one item >=3, severe = at least 2 items >=3 using first 13 items.

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 Te Whatu Ora District 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, Jan - Dec 2024



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.

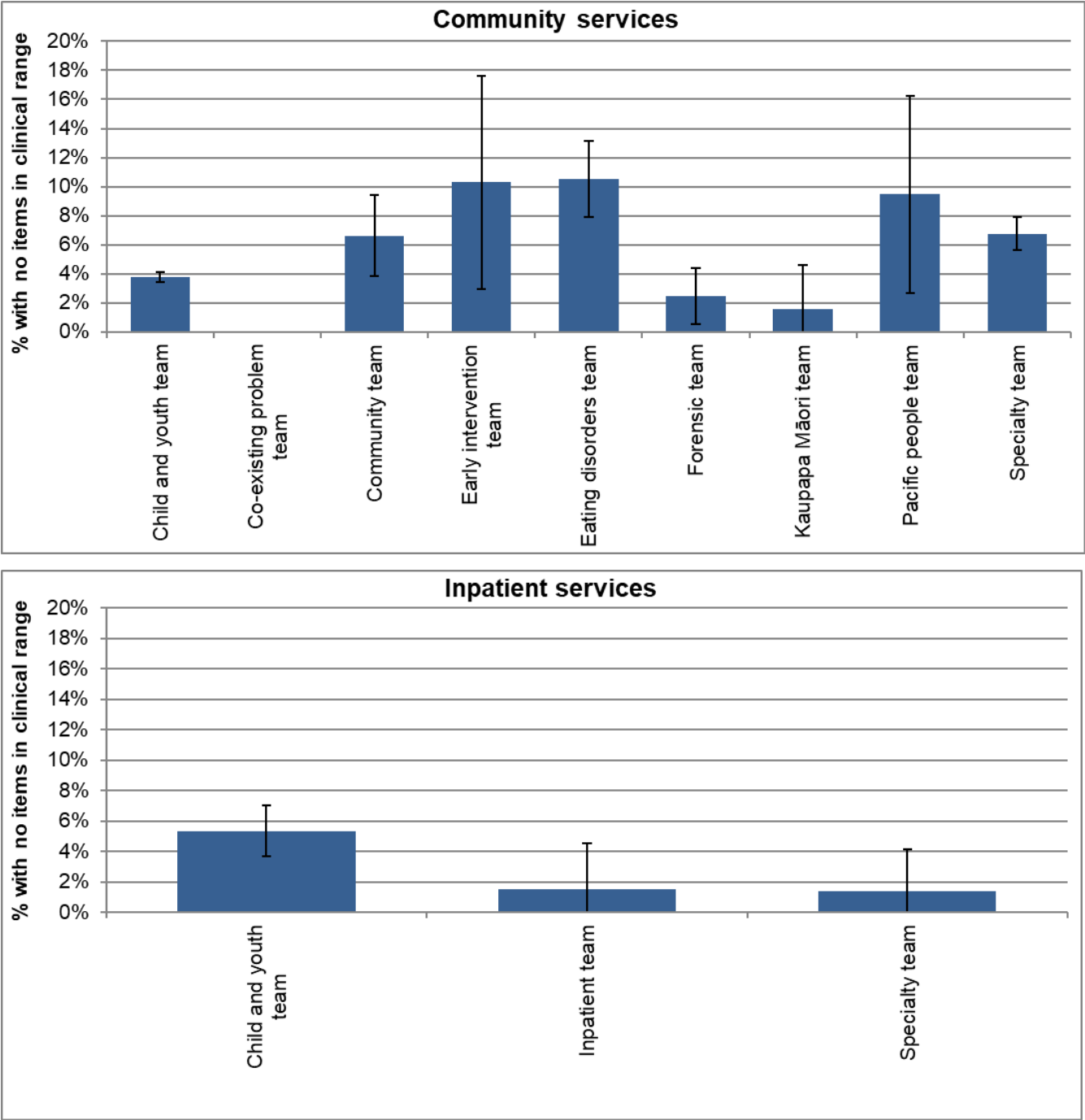
Table 7: Index of Severity for HoNOSCA by collection type and team: New Zealand, Jan - Dec 2024

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																				
Child and youth team	5%	23%	22%	49%	3,060	2%	12%	24%	62%	4,823	5%	24%	23%	47%	7,160	25%	37%	18%	20%	4,155
Community team	1%	11%	22%	66%	238	5%	6%	17%	72%	100	7%	22%	24%	47%	202	28%	33%	17%	21%	75
Early intervention team						14%	14%	21%	50%	28	8%	25%	23%	45%	40					
Eating disorders team	0%	39%	35%	26%	23	9%	19%	24%	48%	171	11%	33%	21%	34%	352	46%	35%	12%	7%	114
Forensic team	1%	11%	27%	61%	79	2%	6%	7%	85%	157	3%	12%	17%	67%	89	15%	25%	15%	46%	96
Kaupapa Māori team						0%	11%	14%	75%	28	3%	19%	19%	59%	37	21%	33%	26%	21%	39
Pacific people team						0%	18%	14%	68%	28	17%	37%	22%	24%	46					
Specialty team	3%	13%	22%	62%	601	6%	12%	17%	65%	581	7%	20%	23%	50%	1,345	41%	32%	13%	14%	914
Total	5%	21%	22%	52%	4,018	3%	12%	23%	63%	5,935	6%	24%	23%	47%	9,295	28%	36%	17%	19%	5,422
Inpatient services																				
Child and youth team						2%	9%	18%	71%	541	18%	29%	22%	31%	152	12%	38%	22%	29%	380
Inpatient team						2%	5%	16%	78%	64						4%	7%	22%	67%	27
Specialty team						1%	4%	6%	88%	67						30%	25%	18%	27%	67
Total						2%	8%	17%	73%	690	16%	27%	22%	35%	171	14%	34%	21%	31%	481

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, Jan - Dec 2024



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, Jan - Dec 2024

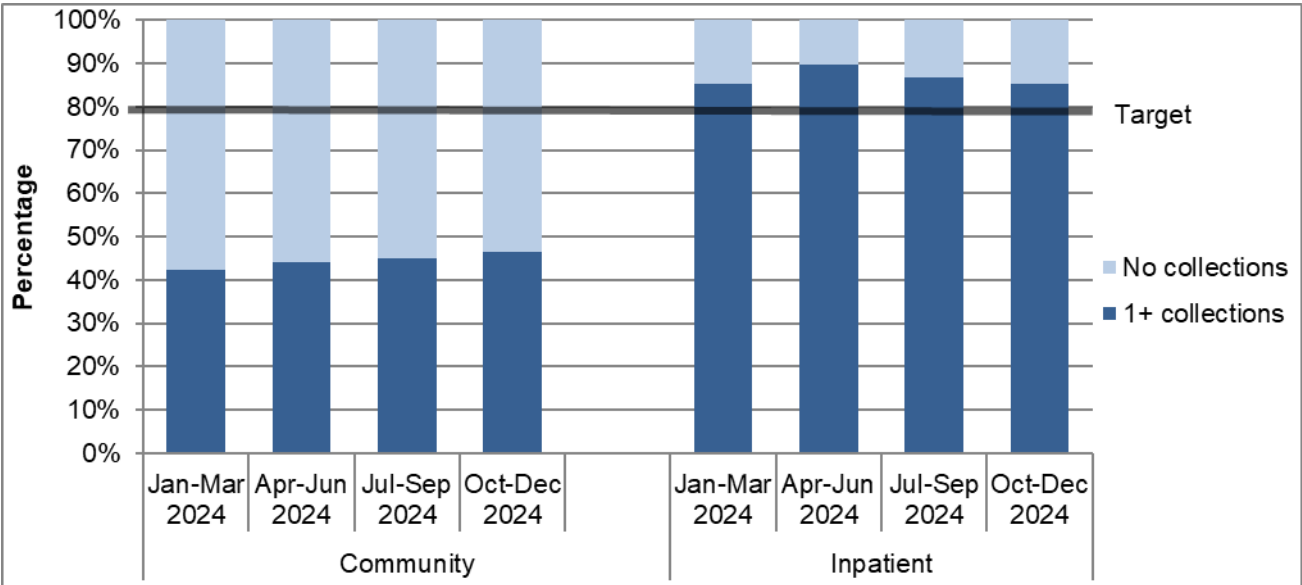
Team type	Number of collections with no items in clinical range	Percentage with no items in clinical range
Community services		
Child and youth team	451	4%
Co-existing problem team	0	0%
Community team	20	7%
Early intervention team	7	10%
Eating disorders team	55	11%
Forensic team	6	2%
Kaupapa Māori team	1	2%
Pacific people team	7	9%
Specialty team	130	7%
Total	677	4%
Inpatient services		
Child and youth team	37	5%
Inpatient team	1	2%
Specialty team	1	1%
Total	40	5%

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.

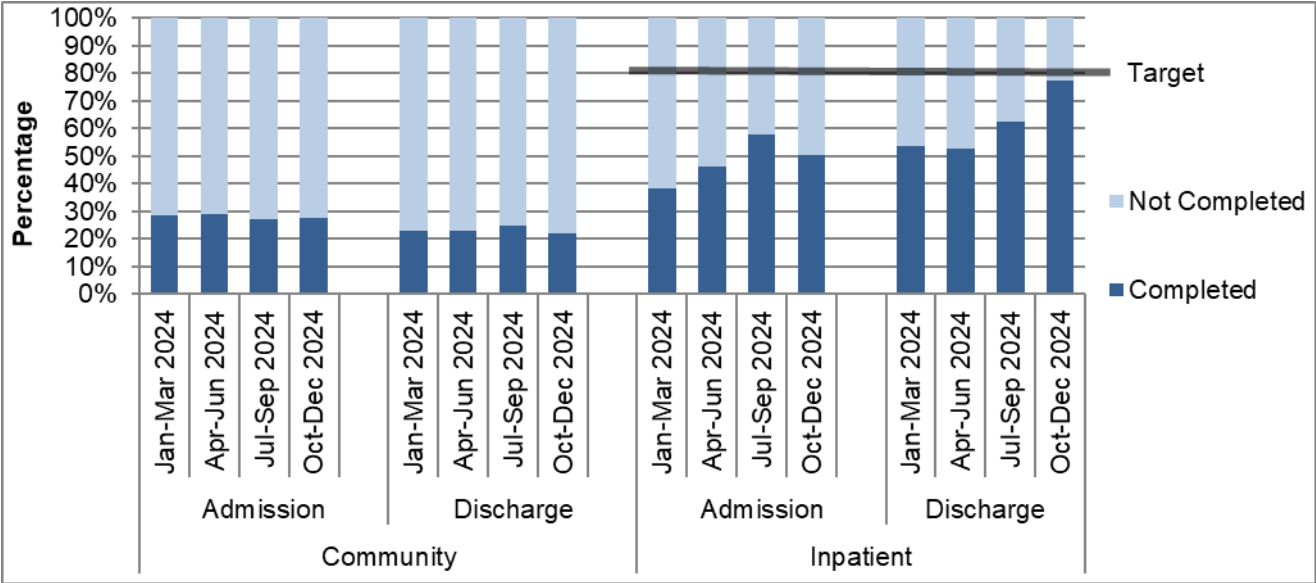
Graph 9: Percentage of service users with at least one collection during the period in a quarter: New Zealand, Jan – Dec 2024 (4 to 17 years)



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.

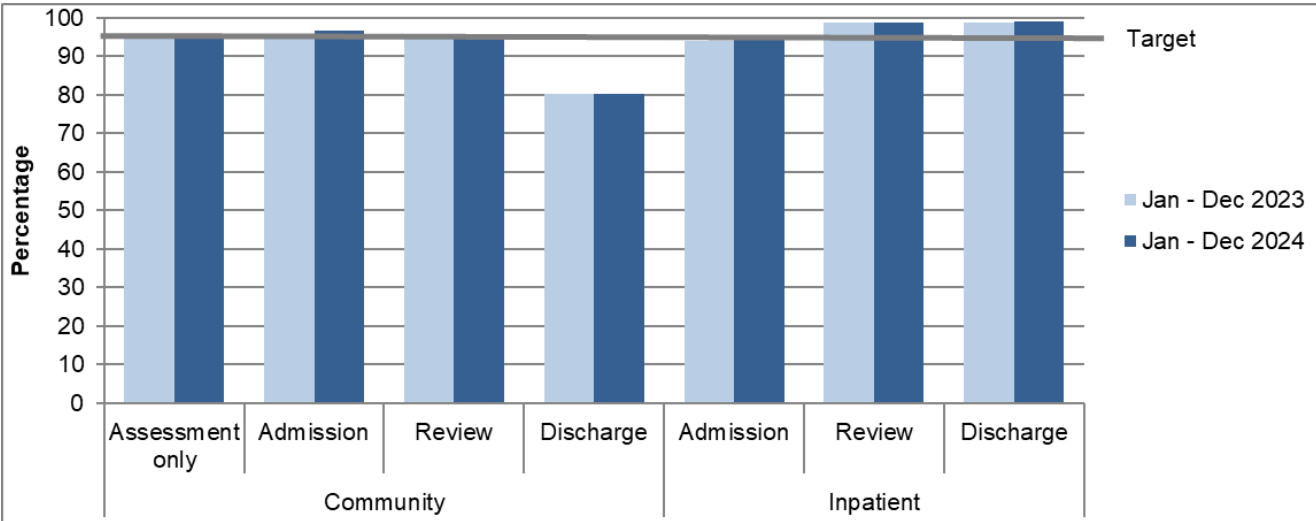
Target: To meet or exceed the target shown on the graph for the percentage of service users with at least one collection within the period.

Graph 10: Percentage of service users with admission and discharge collections completed by quarter: New Zealand, Jan – Dec 2024 (4 to 17 years)



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, Jan - Dec 2023 and Jan - Dec 2024



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, Jan - Dec 2024

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%	18%	1,313	1,376	1,405	1,522	1,826	1,385	1,453	1,426	1,310	1,442	1,387	1,338	2,001	1,388	1,375	21,031
Community team	10%	9%	31%	59	71	73	94	86	71	64	66	63	75	70	62	112	79	80	709
Early intervention team	3%	11%		2	2	3	4	10	2	3	6	2	3	2	1	18	7	7	88
Eating disorders team	2%	1%	9%	16	15	26	20	21	15	17	16	17	21	16	14	25	16	17	692
Forensic team	19%	0%	34%	60	67	67	71	106	72	69	71	66	70	81	73	101	163	169	548
Kaupapa Māori team	3%	3%	26%	13	12	14	14	17	13	12	18	14	14	14	12	14	15	13	122
Maternal mental health team				1	1	2	9	6	1	10	7	1	4	5	1	5	1	1	25
Pacific people team	0%	0%		0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	90
Specialty team	4%	10%	25%	489	514	511	579	640	520	515	525	493	549	522	506	770	553	546	4,230
Total	3%	5%	20%	1,953	2,058	2,101	2,313	2,712	2,079	2,143	2,135	1,966	2,179	2,097	2,007	3,046	2,222	2,208	27,538
Inpatient services																			
Child and youth team	5%	1%	1%	3	5	2	41	62	11	12	16	3	32	7	18	248	26	37	1,103
Forensic team				0	0	0	1	1	1	0	1	0	0	0	2	5	2	4	21
Inpatient team	7%		4%	1	2	2	3	7	1	1	1	1	4	2	1	13	5	2	96
Specialty team	0%		0%	0	1	0	0	0	0	0	0	0	2	0	0	8	0	0	138
Total	5%	1%	1%	4	8	5	45	70	13	13	18	4	39	9	21	274	33	43	1,376

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.