



# PRIMHD summary report – HoNOSCA

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



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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.

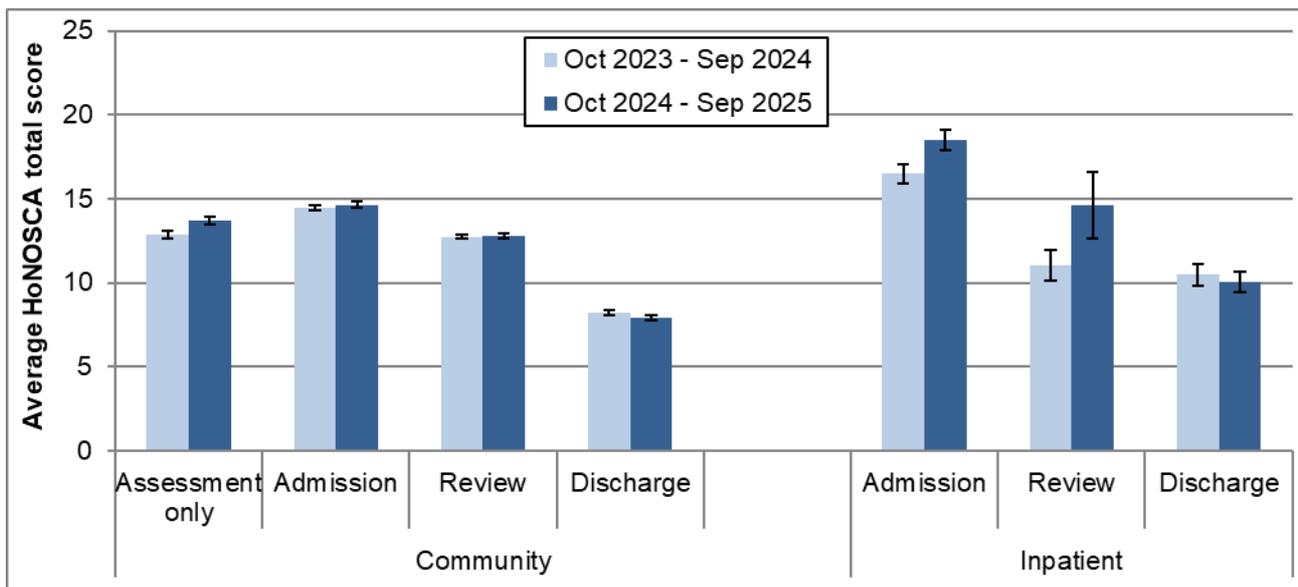
Data for tables and graphs was extracted 26 January 2026 from PRIMHD by Te Whatu Ora, then analysed and formatted by Te Pou.

*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, Oct 2023 - Sep 2024 and Oct 2024 - Sep 2025**



**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.

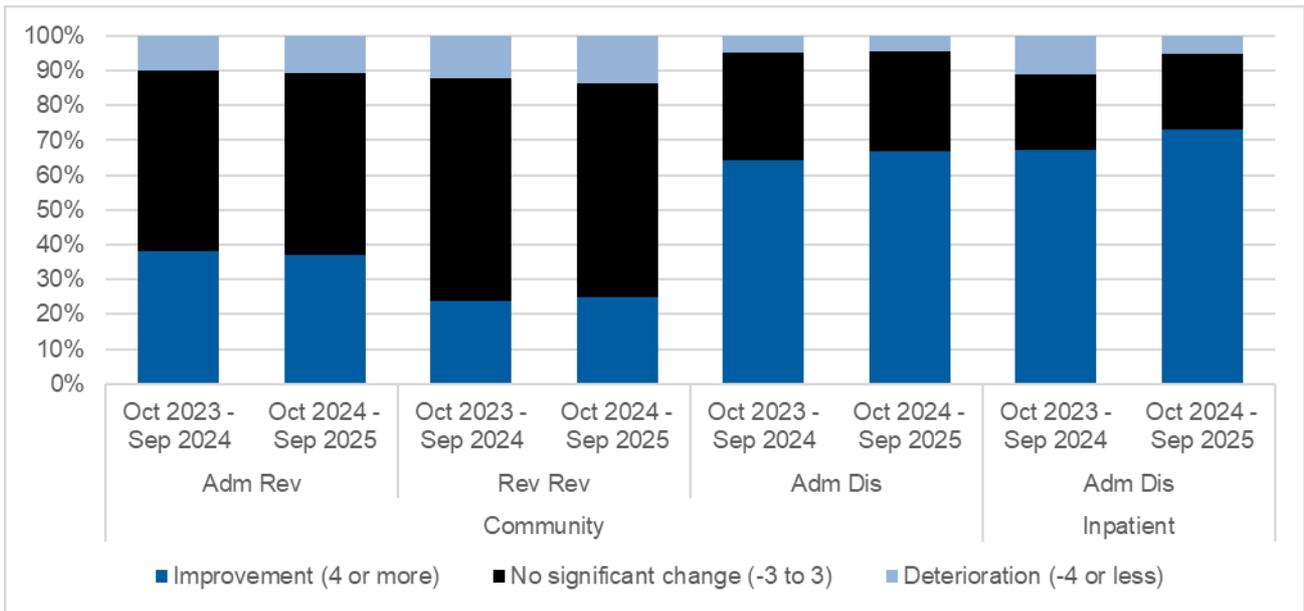
**Table 1: Average HoNOSCA total score (13 items), by collection type and team: New Zealand, Oct 2025 - Sep 2025**

Team Type	Assessment only			Admission			Review			Discharge		
	N	Mean	CI	N	Mean	CI	N	Mean	CI	N	Mean	CI
<b>Community services</b>												
Child and youth team	2,683	13.2	12.9-13.4	4,475	14.4	14.2-14.5	6,604	12.6	12.4-12.7	4,004	8.1	7.9-8.2
Community team	229	13.7	13.0-14.5	61	19.7	17.3-22.0	101	15.1	13.3-16.8	41	6.1	4.4-7.9
Early intervention team				29	14.3	11.0-17.5	75	13.7	11.6-15.8			
Eating disorders team	24	13.2	11.1-15.3	164	13.9	12.8-15.0	351	10.7	10.0-11.4	121	6.1	5.1-7.0
Forensic team	75	14.4	12.5-16.3	163	17.9	16.9-18.8	115	13.9	12.8-15.0	99	10.6	9.0-12.2
Kaupapa Māori team							58	13.9	12.0-15.8	42	10.8	8.0-13.6
Pacific people team				26	14.1	11.5-16.6	92	11.6	10.4-12.9			
Specialty team	750	15.5	15.0-16.0	709	15.4	14.9-16.0	1,781	13.7	13.4-14.0	885	7.3	6.8-7.7
<b>Total</b>	<b>3,775</b>	<b>13.7</b>	<b>13.5-13.9</b>	<b>5,662</b>	<b>14.6</b>	<b>14.5-14.8</b>	<b>9,189</b>	<b>12.8</b>	<b>12.6-12.9</b>	<b>5,232</b>	<b>7.9</b>	<b>7.8-8.1</b>
<b>Inpatient services</b>												
Child and youth team				501	18.3	17.6-19.0	50	14.9	12.7-17.1	439	9.6	9.0-10.2
Inpatient team				58	19.9	17.9-22.0				30	17.8	13.6-22.0
Specialty team				77	20.1	18.5-21.6				81	9.2	7.9-10.5
<b>Total</b>				<b>660</b>	<b>18.5</b>	<b>17.9-19.1</b>	<b>58</b>	<b>14.6</b>	<b>12.6-16.6</b>	<b>564</b>	<b>10.0</b>	<b>9.5-10.6</b>

**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, Oct 2023 - Sep 2024 and Oct 2024 - Sep 2025**



**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, Oct 2025 - Sep 2025**

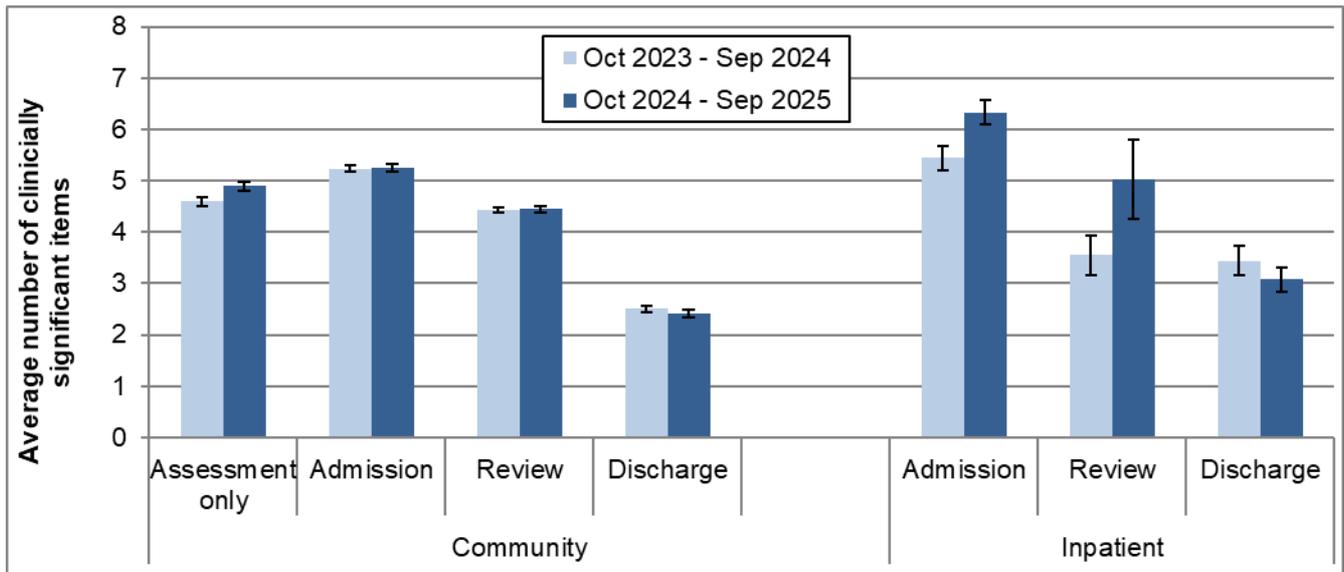
Team Type	Com Adm Rev				Com Rev Rev				Com Adm Dis			
	↓ Det	No SC	↑ Imp	N	↓ Det	No SC	↑ Imp	N	↓ Det	No SC	↑ Imp	N
Child and youth team	10%	51%	39%	848	13%	60%	27%	1,865	4%	29%	67%	2,001
Community team					11%	66%	23%	35	0%	31%	69%	26
Early intervention team					33%	48%	19%	21				
Eating disorders team	7%	56%	38%	45	11%	70%	19%	103	2%	28%	70%	53
Forensic team									3%	13%	83%	30
Pacific people team					21%	34%	45%	29				
Specialty team	13%	57%	30%	212	15%	65%	20%	637	7%	31%	62%	275
<b>Total</b>	<b>11%</b>	<b>52%</b>	<b>37%</b>	<b>1,163</b>	<b>14%</b>	<b>61%</b>	<b>25%</b>	<b>2,711</b>	<b>5%</b>	<b>29%</b>	<b>67%</b>	<b>2,413</b>

**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, Oct 2023 - Sep 2024 and Oct 2025 - Sep 2025**



**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.

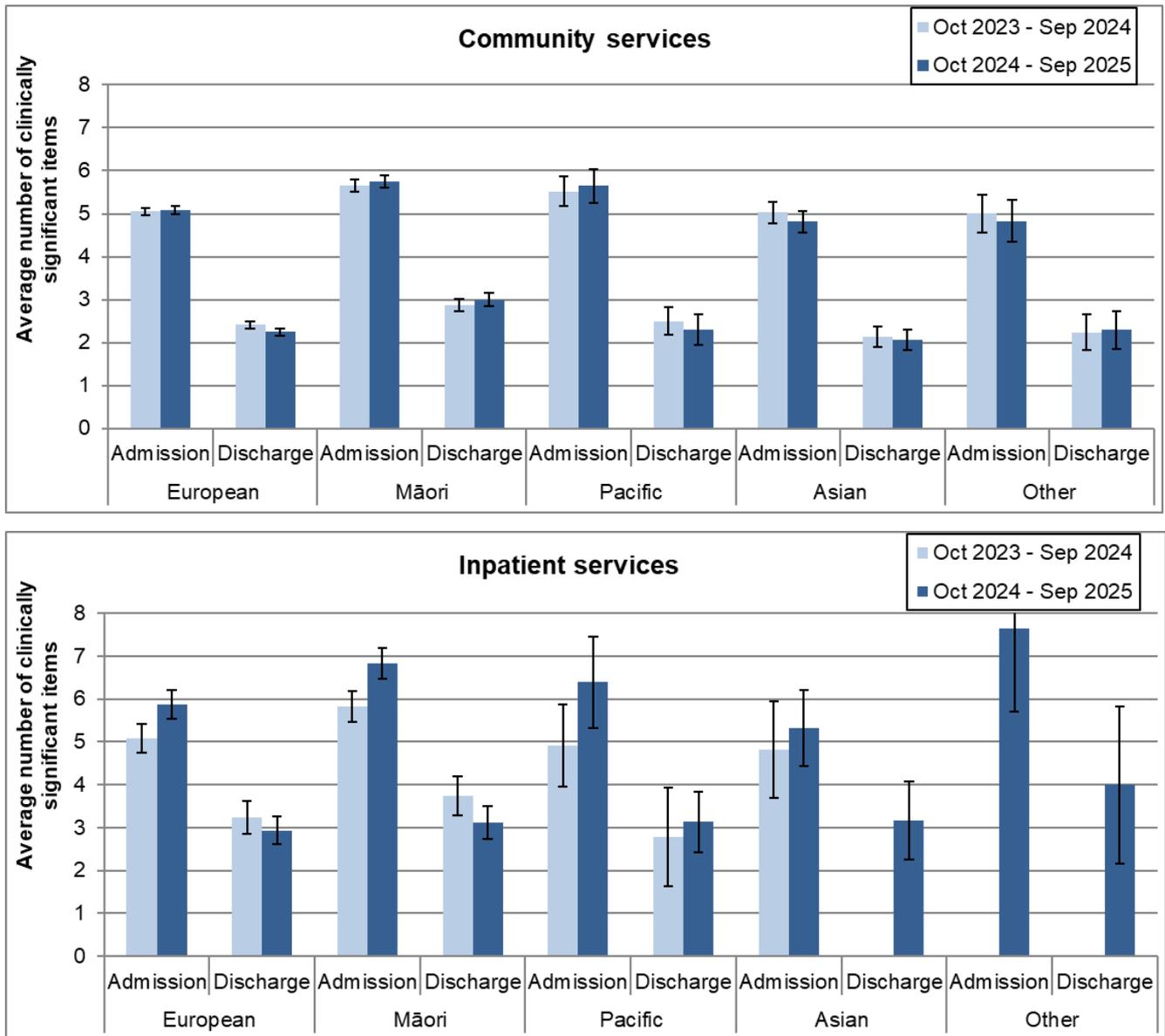
**Table 3: Average number of clinically significant HoNOSCA items by collection type and team: New Zealand, Oct 2025 - Sep 2025**

Team Type	Assessment only			Admission			Review			Discharge		
	N	Mean	CI	N	Mean	CI	N	Mean	CI	N	Mean	CI
<b>Community services</b>												
Child and youth team	2,683	4.7	4.6-4.8	4,475	5.2	5.1-5.2	6,604	4.4	4.3-4.5	4,004	2.4	2.4-2.5
Community team	229	5.1	4.8-5.5	61	6.7	5.9-7.5	101	5.4	4.8-6.1	41	1.9	1.2-2.5
Early intervention team				29	4.9	3.6-6.3	75	4.6	3.8-5.3			
Eating disorders team	24	5.0	4.0-6.1	164	4.9	4.4-5.3	351	3.4	3.2-3.7	121	1.6	1.3-2.0
Forensic team	75	5.3	4.4-6.1	163	6.5	6.1-6.9	115	4.9	4.5-5.3	99	4.0	3.3-4.7
Kaupapa Māori team							58	4.8	4.0-5.6	42	3.2	2.2-4.3
Pacific people team				26	5.2	4.1-6.3	92	4.3	3.7-4.8			
Specialty team	750	5.4	5.2-5.5	709	5.6	5.3-5.8	1,781	4.7	4.6-4.8	885	2.2	2.1-2.4
<b>Total</b>	<b>3,775</b>	<b>4.9</b>	<b>4.8-5.0</b>	<b>5,662</b>	<b>5.3</b>	<b>5.2-5.3</b>	<b>9,189</b>	<b>4.4</b>	<b>4.4-4.5</b>	<b>5,232</b>	<b>2.4</b>	<b>2.4-2.5</b>
<b>Inpatient services</b>												
Child and youth team				501	6.3	6.0-6.5	50	5.2	4.3-6.0	439	3.0	2.7-3.2
Inpatient team				58	6.7	6.0-7.5				30	5.9	4.3-7.4
Specialty team				77	6.8	6.2-7.4				81	2.5	1.9-3.0
<b>Total</b>				<b>660</b>	<b>6.3</b>	<b>6.1-6.6</b>	<b>58</b>	<b>5.0</b>	<b>4.3-5.8</b>	<b>564</b>	<b>3.1</b>	<b>2.8-3.3</b>

**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, Oct 2023 - Sep 2024 and Oct 2025 - Sep 2025**

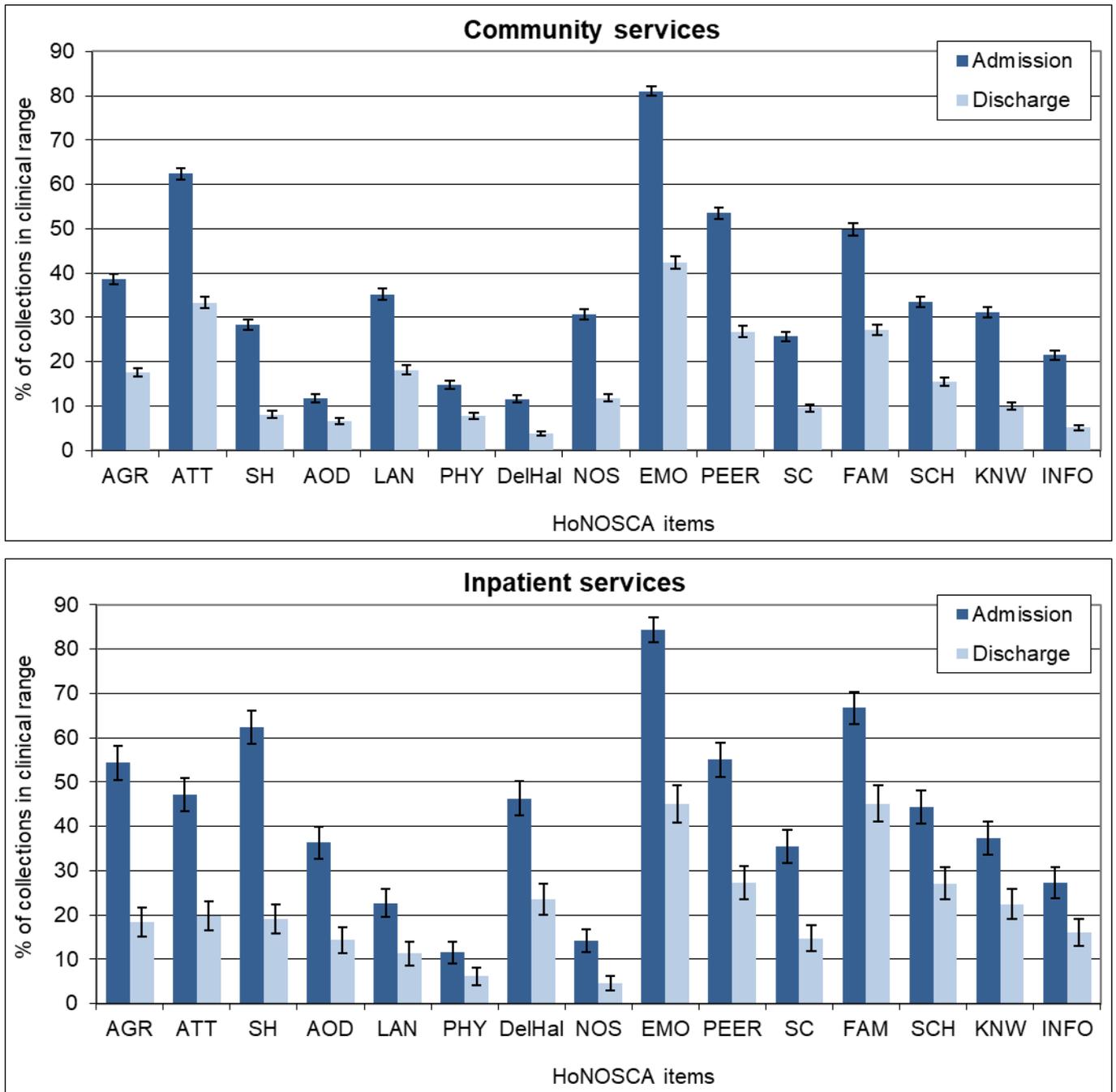


**Notes:** Average number of HoNOSCA items in the clinical range (2, 3 or 4). Community discharge does not include discharge to an inpatient unit.

**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, Oct 2025 - Sep 2025**



**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 Oct 2025 - Sep 2025**

**Community services**

<b>First 7 HoNOSCA items</b>																
<b>Team name</b>	<b>N</b>		<b>AGR</b>		<b>ATT</b>		<b>SH</b>		<b>AOD</b>		<b>LAN</b>		<b>PHY</b>		<b>DelHal</b>	
	<b>Adm</b>	<b>Disch</b>	<b>Adm</b>	<b>Disch</b>	<b>Adm</b>	<b>Disch</b>	<b>Adm</b>	<b>Disch</b>	<b>Adm</b>	<b>Disch</b>	<b>Adm</b>	<b>Disch</b>	<b>Adm</b>	<b>Disch</b>	<b>Adm</b>	<b>Disch</b>
Child and youth team	4,472	4,001	37%	18%	63%	35%	29%	8%	10%	5%	35%	18%	13%	7%	9%	3%
Community team	61	41	52%	17%	72%	22%	52%	10%	32%	5%	27%	15%	18%	2%	43%	7%
Early intervention team	29		34%		45%		3%		31%		37%		10%		55%	
Eating disorders team	164	121	20%	1%	30%	14%	22%	8%	6%	2%	7%	2%	57%	12%	54%	18%
Forensic team	163	99	81%	50%	69%	46%	15%	7%	69%	40%	53%	26%	11%	7%	9%	6%
Kaupapa Māori team		42		14%		48%		10%		7%		39%		10%		2%
Pacific people team	26		50%		81%		8%		4%		23%		12%		0%	
Specialty team	709	885	40%	15%	63%	26%	32%	8%	11%	9%	40%	17%	17%	11%	12%	5%
<b>Total</b>	<b>5,658</b>	<b>5,228</b>	<b>39%</b>	<b>18%</b>	<b>62%</b>	<b>33%</b>	<b>28%</b>	<b>8%</b>	<b>12%</b>	<b>7%</b>	<b>35%</b>	<b>18%</b>	<b>15%</b>	<b>8%</b>	<b>12%</b>	<b>4%</b>
<b>Second 8 HoNOSCA items</b>																
<b>Team name</b>	<b>NOS</b>		<b>EMO</b>		<b>PEER</b>		<b>SC</b>		<b>FAM</b>		<b>SCH</b>		<b>KNW</b>		<b>INFO</b>	
	<b>Adm</b>	<b>Disch</b>	<b>Adm</b>	<b>Disch</b>	<b>Adm</b>	<b>Disch</b>	<b>Adm</b>	<b>Disch</b>	<b>Adm</b>	<b>Disch</b>	<b>Adm</b>	<b>Disch</b>	<b>Adm</b>	<b>Disch</b>	<b>Adm</b>	<b>Disch</b>
Child and youth team	34%	13%	81%	44%	53%	28%	23%	9%	49%	28%	31%	15%	31%	10%	21%	5%
Community team	28%	7%	92%	39%	54%	20%	31%	7%	59%	24%	50%	11%	44%	0%	26%	0%
Early intervention team	3%		52%		50%		29%		41%		52%		41%		21%	
Eating disorders team	15%	7%	83%	50%	34%	10%	67%	12%	39%	9%	28%	12%	18%	3%	8%	2%
Forensic team	13%	4%	74%	43%	63%	36%	19%	10%	76%	50%	66%	35%	25%	24%	25%	21%
Kaupapa Māori team		10%		41%		43%		33%		31%		29%		8%		3%
Pacific people team	42%		81%		76%		42%		50%		35%		12%		8%	
Specialty team	22%	7%	82%	36%	58%	24%	33%	11%	53%	25%	41%	18%	34%	10%	26%	5%
<b>Total</b>	<b>31%</b>	<b>12%</b>	<b>81%</b>	<b>42%</b>	<b>54%</b>	<b>27%</b>	<b>26%</b>	<b>10%</b>	<b>50%</b>	<b>27%</b>	<b>33%</b>	<b>15%</b>	<b>31%</b>	<b>10%</b>	<b>22%</b>	<b>5%</b>

## Inpatient services

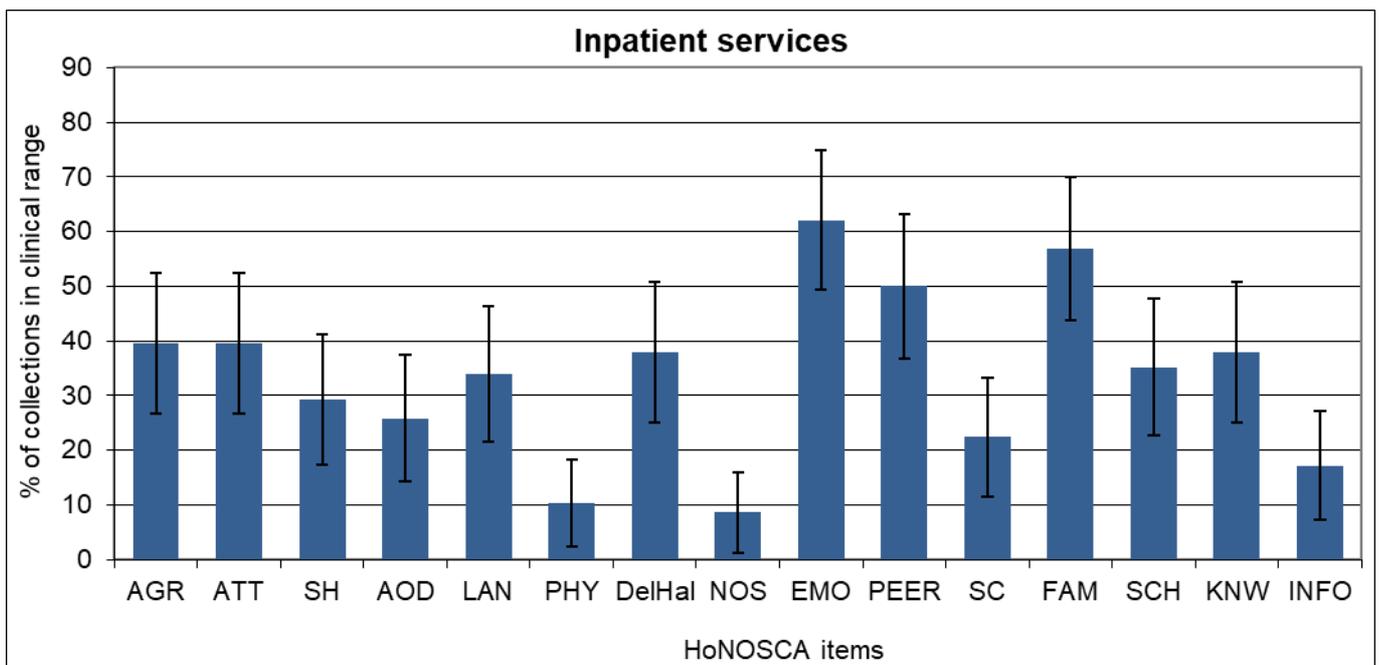
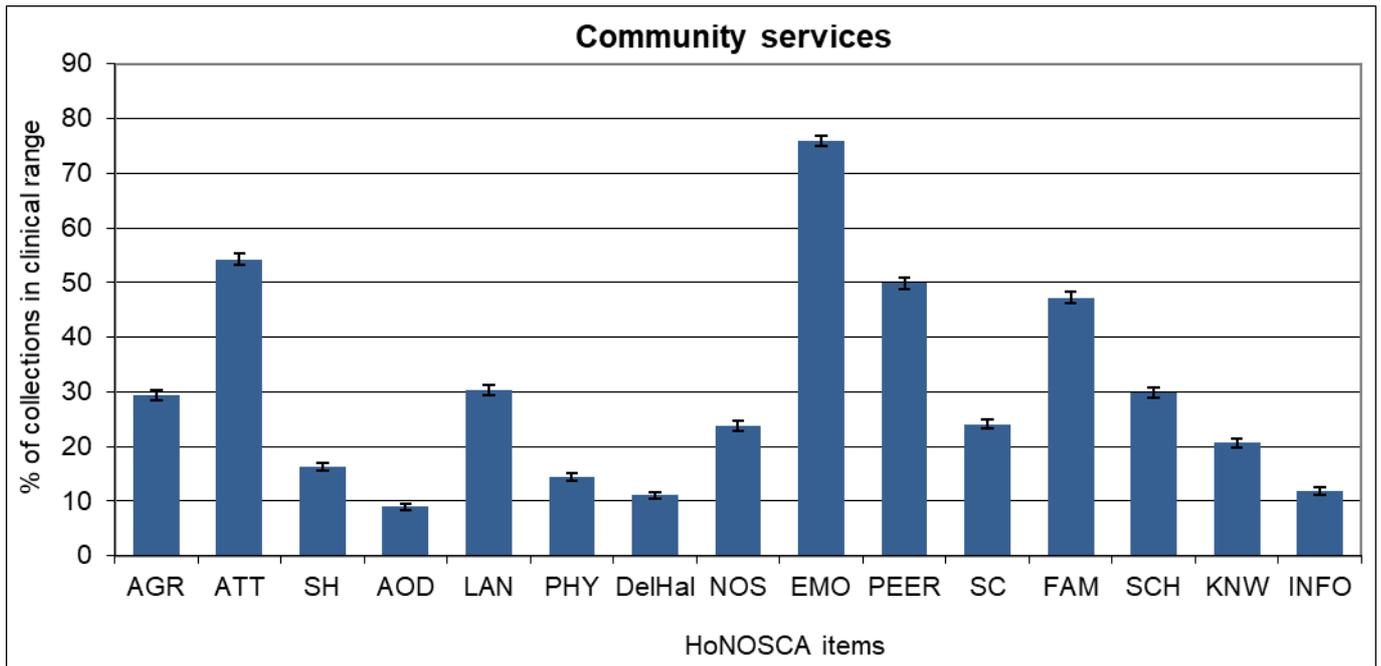
First 7 HoNOSCA items																
Team name	N		AGR		ATT		SH		AOD		LAN		PHY		DelHal	
	Adm	Disch														
Child and youth team	501	439	55%	18%	45%	19%	67%	20%	35%	12%	22%	10%	9%	5%	44%	23%
Inpatient team	58	30	53%	30%	64%	40%	48%	33%	41%	50%	27%	21%	16%	17%	48%	53%
Specialty team	77	81	53%	12%	55%	14%	57%	12%	47%	19%	22%	11%	19%	10%	62%	20%
<b>Total</b>	<b>660</b>	<b>564</b>	<b>54%</b>	<b>18%</b>	<b>47%</b>	<b>20%</b>	<b>62%</b>	<b>19%</b>	<b>36%</b>	<b>14%</b>	<b>23%</b>	<b>11%</b>	<b>12%</b>	<b>6%</b>	<b>46%</b>	<b>24%</b>
Second 8 HoNOSCA items																
Team name	NOS		EMO		PEER		SC		FAM		SCH		KNW		INFO	
	Adm	Disch														
Child and youth team	12%	3%	85%	44%	55%	26%	37%	13%	67%	46%	42%	26%	37%	24%	28%	17%
Inpatient team	16%	23%	84%	70%	60%	53%	29%	37%	69%	63%	51%	42%	40%	30%	36%	34%
Specialty team	25%	5%	83%	36%	50%	23%	36%	14%	68%	32%	50%	28%	36%	10%	22%	5%
<b>Total</b>	<b>14%</b>	<b>5%</b>	<b>84%</b>	<b>45%</b>	<b>55%</b>	<b>27%</b>	<b>35%</b>	<b>15%</b>	<b>67%</b>	<b>45%</b>	<b>44%</b>	<b>27%</b>	<b>37%</b>	<b>22%</b>	<b>27%</b>	<b>16%</b>

**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, Oct 2025 - Sep 2025**



**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.

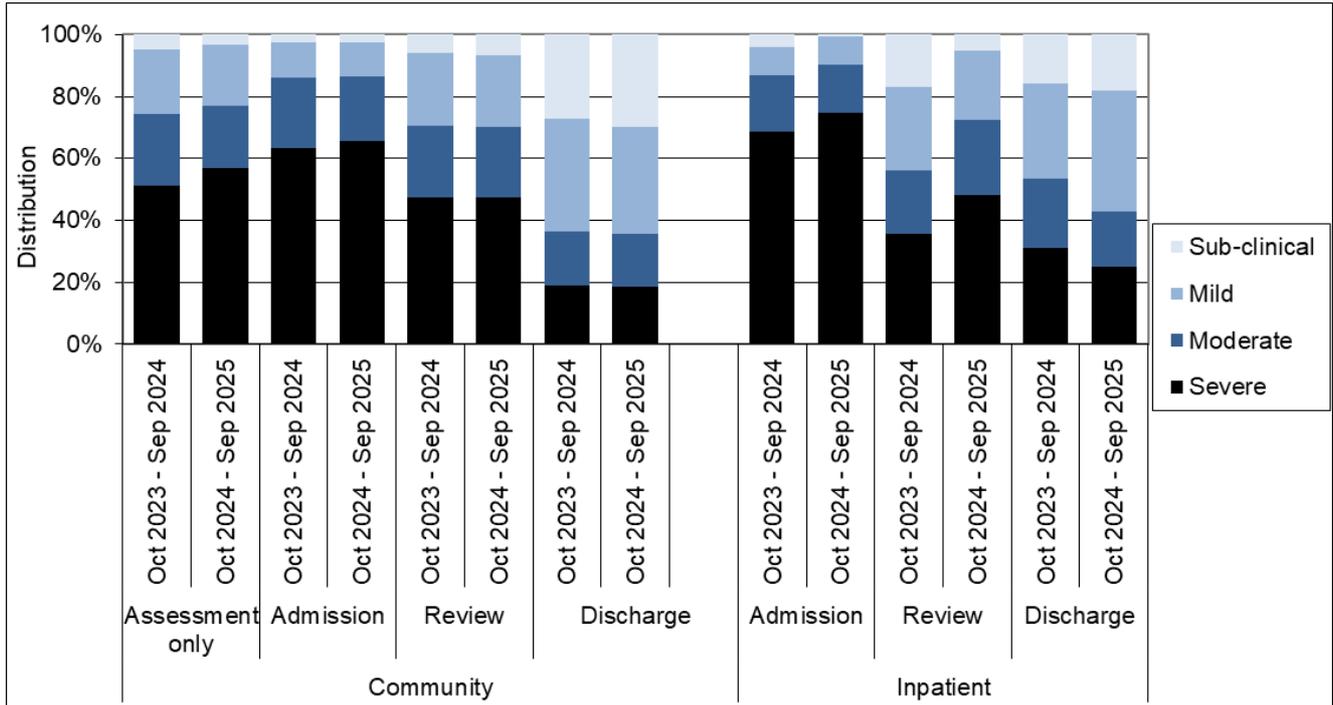
**Table 5b: Percentage of collections in clinical range on each HoNOSCA item (review collections) by team: New Zealand, Oct 2025 - Sep 2025**

Team type	N	AGR	ATT	SH	AOD	LAN	PHY	DelHal	NOS	EMO	PEER	SC	FAM	SCH	KNW	INFO
<b>Community services</b>																
Child and youth team	6,600	29%	56%	16%	8%	31%	12%	8%	27%	76%	51%	22%	47%	29%	21%	12%
Community team	101	35%	34%	30%	19%	31%	26%	31%	15%	81%	65%	26%	51%	43%	39%	24%
Early intervention team	75	25%	43%	5%	23%	31%	16%	50%	5%	59%	55%	27%	41%	45%	30%	12%
Eating disorders team	351	6%	22%	10%	1%	9%	39%	48%	14%	77%	20%	44%	27%	16%	8%	4%
Forensic team	115	64%	66%	6%	50%	40%	10%	6%	5%	62%	55%	20%	67%	33%	10%	4%
Kaupapa Māori team	58	41%	69%	23%	26%	28%	12%	3%	12%	81%	50%	21%	52%	29%	21%	14%
Pacific people team	92	46%	66%	8%	4%	17%	3%	4%	20%	72%	49%	27%	54%	21%	23%	12%
Specialty team	1,780	31%	53%	20%	10%	33%	17%	12%	19%	78%	52%	29%	51%	35%	22%	12%
<b>Total</b>	<b>9,184</b>	<b>29%</b>	<b>54%</b>	<b>16%</b>	<b>9%</b>	<b>30%</b>	<b>14%</b>	<b>11%</b>	<b>24%</b>	<b>76%</b>	<b>50%</b>	<b>24%</b>	<b>47%</b>	<b>30%</b>	<b>21%</b>	<b>12%</b>
<b>Inpatient services</b>																
Child and youth team	50	40%	40%	32%	28%	38%	10%	38%	8%	58%	50%	22%	58%	41%	38%	20%
<b>Total</b>	<b>58</b>	<b>40%</b>	<b>40%</b>	<b>29%</b>	<b>26%</b>	<b>34%</b>	<b>10%</b>	<b>38%</b>	<b>9%</b>	<b>62%</b>	<b>50%</b>	<b>22%</b>	<b>57%</b>	<b>35%</b>	<b>38%</b>	<b>17%</b>

**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, Oct 2023 - Sep 2024 and Oct 2025 - Sep 2025**



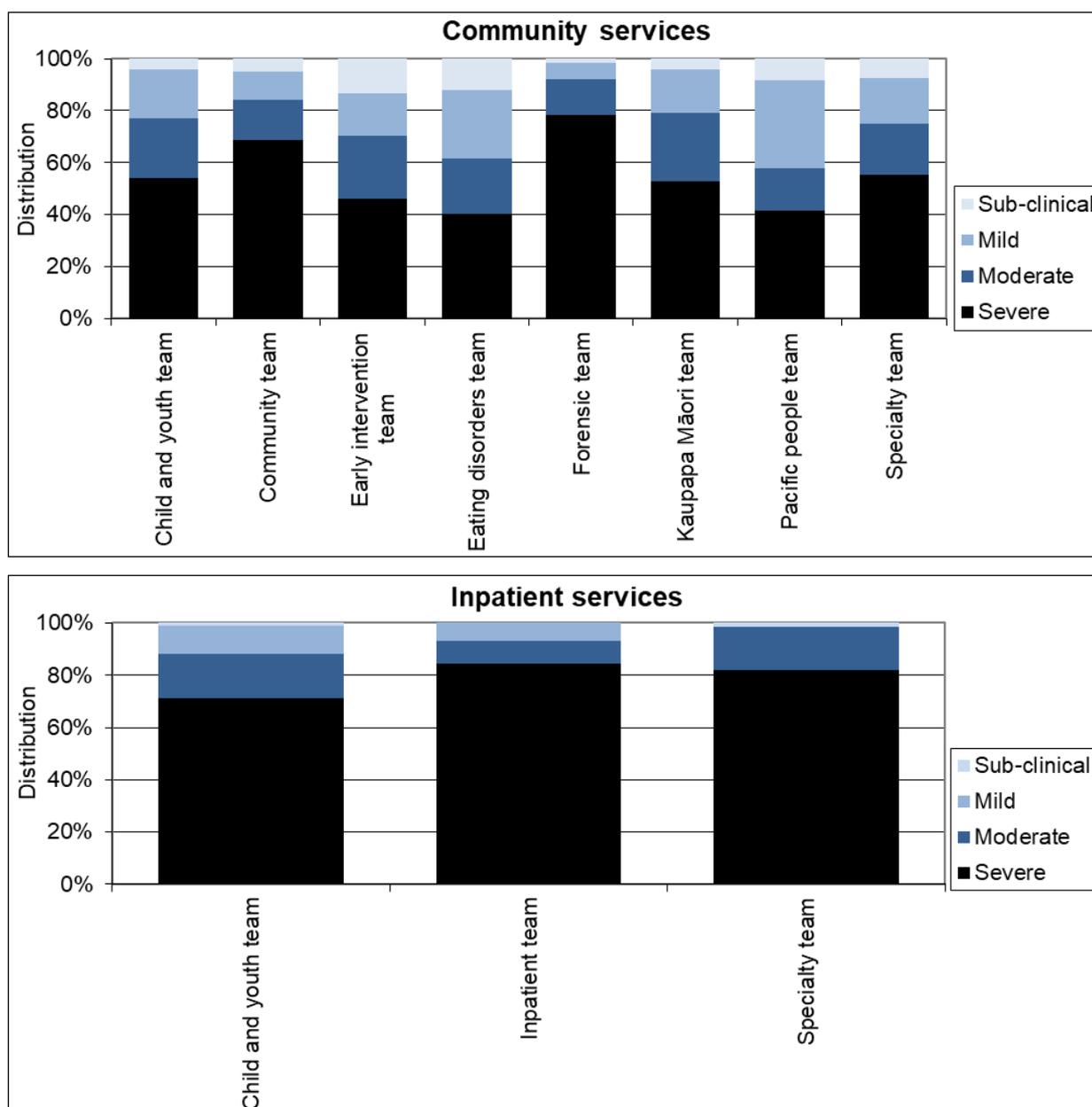
**Notes:** Community discharge does not include discharge to an inpatient unit. Index of Severity: Sub clinical = all items <2, mild = at least one item >1 and all items <3, moderate = at least one item >=3, severe = at least 2 items >=3 using first 13 items.

**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, Oct 2025 - Sep 2025**



**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.

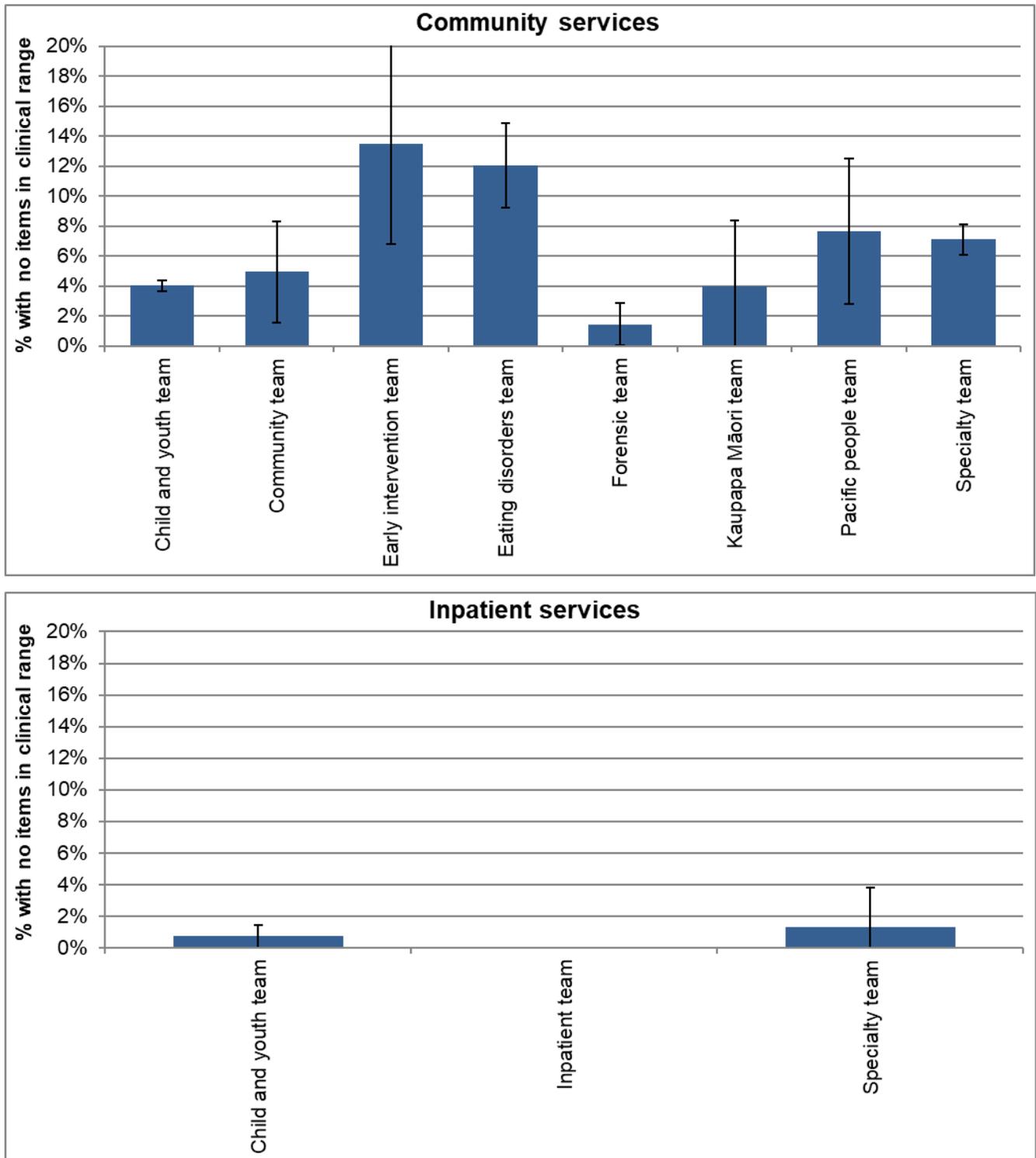
**Table 7: Index of Severity for HoNOSCA by collection type and team: New Zealand, Oct 2025 - Sep 2025**

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	
<b>Community services</b>																					
Child and youth team	4%	23%	20%	53%	2,683	2%	11%	23%	64%	4,475	6%	24%	23%	47%	6,604	27%	36%	18%	19%	4,004	
Community team	0%	12%	23%	65%	229	0%	7%	16%	77%	61	8%	14%	15%	63%	101	37%	24%	17%	22%	41	
Early intervention team						14%	10%	28%	48%	29	13%	19%	23%	45%	75	61%	17%	17%	6%	18	
Eating disorders team	4%	13%	25%	58%	24	9%	12%	23%	57%	164	14%	33%	20%	33%	351	36%	42%	12%	10%	121	
Forensic team	3%	15%	19%	64%	75	1%	4%	9%	86%	163	3%	10%	20%	68%	115	22%	25%	18%	34%	99	
Kaupapa Māori team											5%	21%	26%	48%	58	26%	29%	19%	26%	42	
Pacific people team						8%	23%	12%	58%	26	9%	37%	17%	37%	92						
Specialty team	2%	11%	19%	68%	750	5%	10%	15%	71%	709	8%	21%	22%	49%	1,781	41%	28%	13%	17%	885	
<b>Total</b>	<b>3%</b>	<b>20%</b>	<b>20%</b>	<b>57%</b>	<b>3,775</b>	<b>2%</b>	<b>11%</b>	<b>21%</b>	<b>65%</b>	<b>5,662</b>	<b>7%</b>	<b>23%</b>	<b>23%</b>	<b>47%</b>	<b>9,189</b>	<b>30%</b>	<b>35%</b>	<b>17%</b>	<b>19%</b>	<b>5,232</b>	
<b>Inpatient services</b>																					
Child and youth team						0%	10%	16%	73%	501	6%	18%	24%	52%	50	18%	41%	18%	23%	439	
Inpatient team						0%	7%	9%	84%	58						7%	20%	20%	53%	30	
Specialty team						1%	0%	16%	83%	77						26%	38%	16%	20%	81	
<b>Total</b>						<b>1%</b>	<b>9%</b>	<b>15%</b>	<b>75%</b>	<b>660</b>	<b>5%</b>	<b>22%</b>	<b>24%</b>	<b>48%</b>	<b>58</b>	<b>18%</b>	<b>39%</b>	<b>18%</b>	<b>25%</b>	<b>564</b>	

**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, Oct 2025 - Sep 2025**



**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, Oct 2025 - Sep 2025**

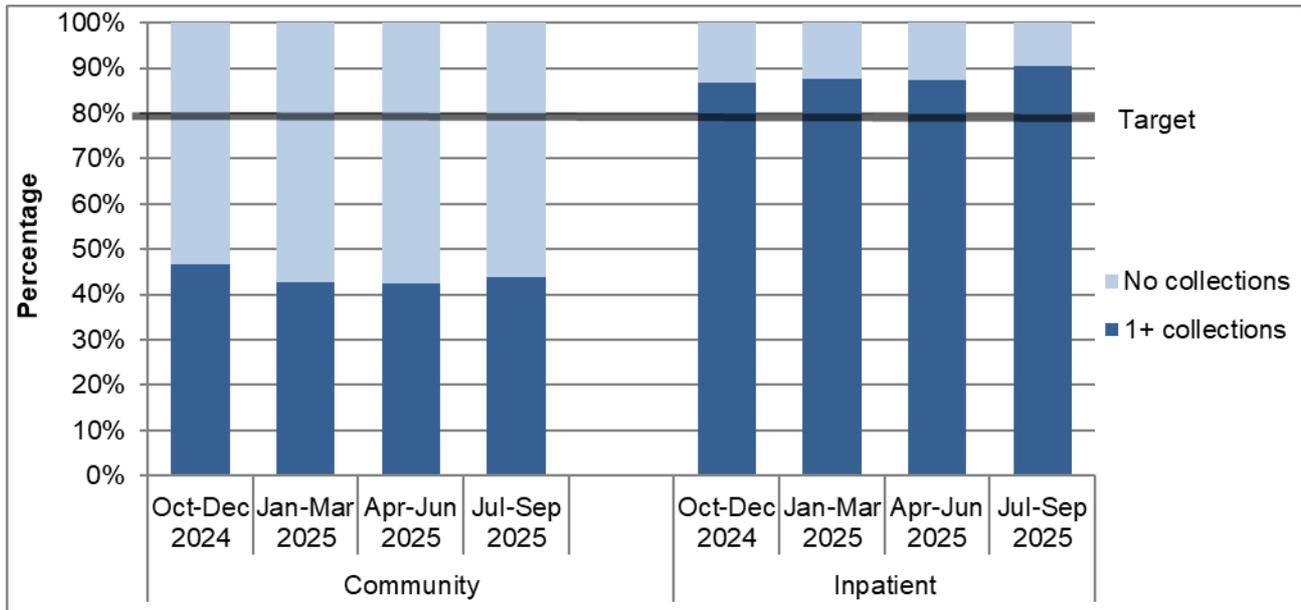
Team type	Number of collections with no items in clinical range	Percentage with no items in clinical range
<b>Community services</b>		
Child and youth team	446	4%
Community team	8	5%
Early intervention team	14	13%
Eating disorders team	62	12%
Forensic team	4	1%
Kaupapa Māori team	3	4%
Pacific people team	9	8%
Specialty team	177	7%
<b>Total</b>	<b>724</b>	<b>5%</b>
<b>Inpatient services</b>		
Child and youth team	4	1%
Inpatient team	0	0%
Specialty team	1	1%
<b>Total</b>	<b>7</b>	<b>1%</b>

**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.

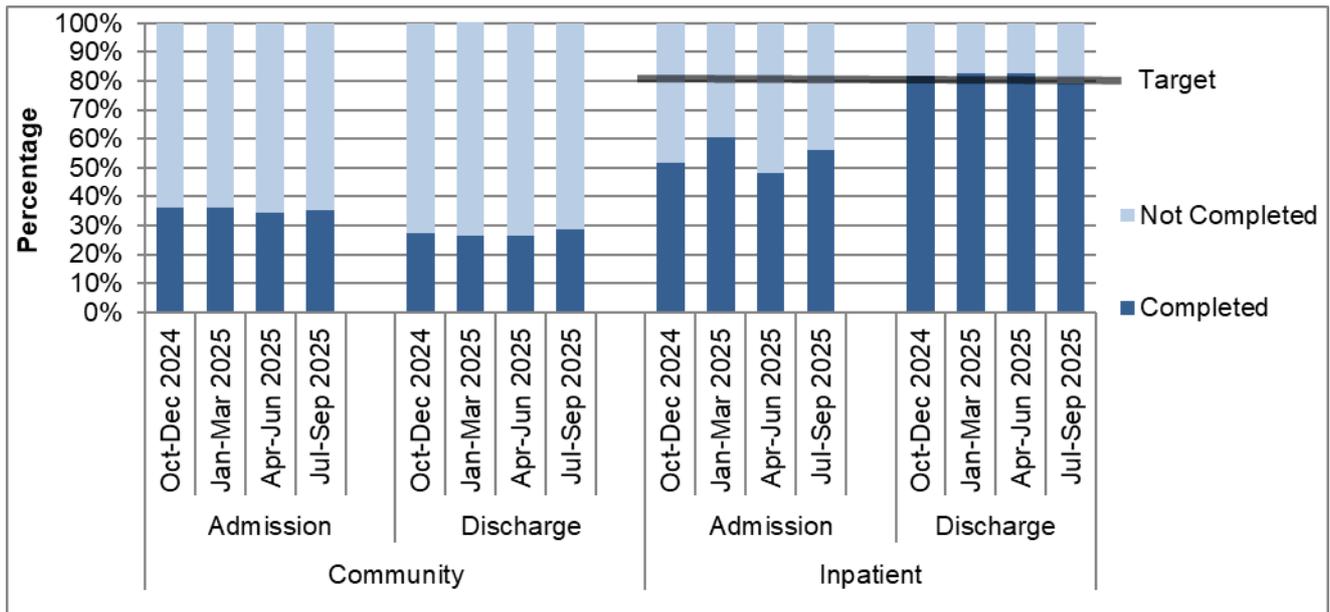
**Graph 9: Percentage of service users with at least one collection during the period in a quarter: New Zealand, Oct 2024 – Sep 2025 (4 to 17 years)**



**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.

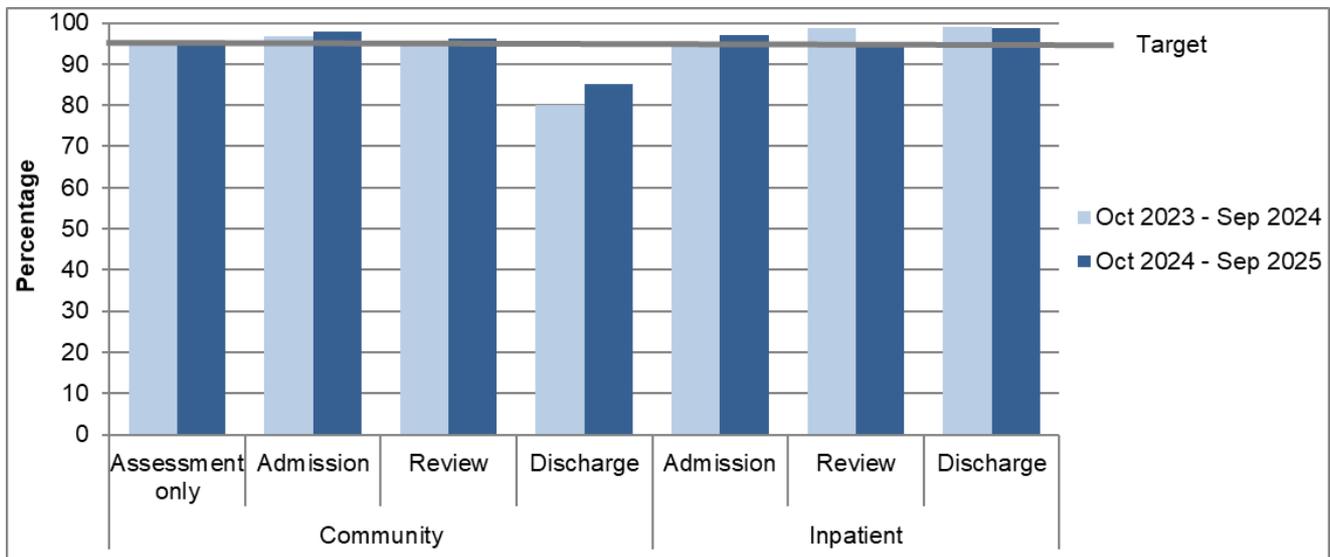
**Target:** To meet or exceed the target shown on the graph for the percentage of service users with at least one collection within the period.

**Graph 10: Percentage of service users with admission and discharge collections completed by quarter: New Zealand, Oct 2024 – Sep 2025 (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, Oct 2023 - Sep 2024 and Oct 2024 - Sep 2025**



**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, Oct 2025 - Sep 2025**

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	
<b>Community services</b>																			
Child and youth team	2%	4%	14%	966	1,030	1,059	1,187	1,429	1,063	1,062	1,063	977	1,072	1,035	1,013	1,561	1,023	1,023	19,451
Community team	5%	9%	29%	30	34	31	43	38	35	32	36	33	42	32	31	66	40	43	487
Early intervention team	0%	16%	13%	1	1	2	1	14	1	2	3	2	6	3	3	42	18	14	144
Eating disorders team	4%	1%	5%	13	12	20	17	13	10	13	14	13	12	10	10	25	9	10	704
Forensic team	9%	3%	25%	41	45	46	56	79	44	47	43	44	52	48	49	91	97	101	540
Kaupapa Māori team		9%	9%	10	10	12	13	12	11	11	14	11	10	11	10	10	14	14	130
Pacific people team		1%		1	1	1	2	1	1	1	1	1	2	1	1	3	1	1	133
Specialty team	3%	4%	20%	295	319	324	372	448	323	341	334	300	341	333	323	599	354	355	4,721
<b>Total</b>	<b>2%</b>	<b>4%</b>	<b>15%</b>	<b>1,357</b>	<b>1,452</b>	<b>1,495</b>	<b>1,692</b>	<b>2,034</b>	<b>1,488</b>	<b>1,509</b>	<b>1,509</b>	<b>1,381</b>	<b>1,540</b>	<b>1,473</b>	<b>1,440</b>	<b>2,400</b>	<b>1,557</b>	<b>1,562</b>	<b>26,327</b>
<b>Inpatient services</b>																			
Child and youth team	2%	6%	1%	3	3	3	28	63	5	6	11	4	25	3	22	199	18	32	1,006
Eating disorders team				0	0	0	0	0	1	0	0	0	0	0	0	1	0	0	29
Inpatient team	9%		9%	0	1	0	2	10	0	0	2	0	5	3	2	18	13	8	96
Specialty team	0%		0%	0	1	0	1	1	0	1	1	0	1	0	0	18	0	0	159
<b>Total</b>	<b>3%</b>	<b>5%</b>	<b>1%</b>	<b>3</b>	<b>5</b>	<b>3</b>	<b>31</b>	<b>74</b>	<b>6</b>	<b>7</b>	<b>14</b>	<b>4</b>	<b>34</b>	<b>6</b>	<b>25</b>	<b>241</b>	<b>32</b>	<b>43</b>	<b>1,308</b>

**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.