

Positive HoNOSCA Change

Outcome

Youth are healthy, safe and supported

Measure

Number of youth with positive change on HoNOSCA

Type

Contributory measure

Relationship(s) to other frameworks

This measure is included in the Youth Mental Health Project Outcomes Framework.

Details for this measure can be located via Superu's social sector outcome indicators catalogue for NZ government's priority programmes which is located at: http://www.superu.govt.nz/outcomes_catalogue

Data is sourced annually via the New Zealand Health Survey.

This measure also assimilates to indicators included in the Vulnerable Children Outcomes Framework (which is currently under review due to the establishment of the new Ministry) – specifically: • Number and percentage of caregivers who are physically and mentally well And the Family and Whānau with children aged 0 – 5 years Framework - specifically: • Families and whānau are not affected by suicide or self harm • Children are developing well physically, cognitively, and emotionally and meeting their milestones

Rationale

Health of the Nation Outcome Scale Child and Adolescent (HoNOSCA) is a clinician rated tool developed by the United Kingdom Royal College of Psychiatrist's Research Unit to measure the health and social functioning of people experiencing severe mental illness.

HoNOSCA measures the symptom severity and social functioning across time. It has 15 items that measure behaviour, impairment, symptoms and social functioning. The items are rated on a scale of 0-4 and the results or changes in ratings are known as outcomes and may be attributed to services provided. The rating is made using a glossary that has detailed descriptors of level of severity and complexity. HoNOSCA should be completed by a qualified mental health professional (clinician) to rate a range of health and social domains for people receiving services from specialist mental health services. The clinician will use information obtained from comprehensive mental health assessments and routine clinical work to complete HoNOSCA.

Discussing ratings with service users is one way they can participate in their care and treatment, and it may allow for further conversations between the clinician and service user about recovery. HoNOSCA ratings are done by the clinician following an assessment as part of maintaining a service user's record, so the service user doesn't participate in the rating process, nor does the clinician use it as a structured interview. However, sharing HoNOSCA ratings with the service user as part of a collaborative care plan should be routine.

HoNOSCA ratings: • Assist with developing clinical pathways • Supports quality mental health assessments, intervention and recovery planning • Improves service delivery • Improves opportunities for whanau/family involvement.

Eligible population

Youth aged 10 to 19 years

Measure status

In development

Measure definition

Numerator

Number of youth who have completed the K-10 (Kessler Psychological Distress Scale) assessment in the last 12 months with a score of 12 or more

Denominator

Number of youth who have completed the K-10 (Kessler Psychological Distress Scale) assessment in the last 12 months

National target

In Rising to the Challenge: The Mental Health and Addiction Service Development Plan 2012-2017, the Ministry of Health directs a greater focus on outcome measurement and key performance indicators to help develop an outcomes culture in mental health and addiction services. The Ministry's strategy for HoNOSCA is to ensure good compliance with collections before introducing other mandated measures. The overall compliance target for HoNOSCA is 80 per cent and above for both inpatient and community settings.

Local target

Milestones to be decided by Alliance

Data Sources

NZ Health Survey

Data extracted from data sources

Information on the HoNOSCA tool can be located at: <https://www.tepou.co.nz/uploads/files/resource-assets/honosca-ebook-final.pdf>

Data availability

Survey data is collected continuously but findings are reported annually.

Measure calculation process

Refer to 'Data extracted from data sources' note above.

Relationship(s) to other measures

This measure is one of a number of mental health indicators which form part of the Minister's Youth Mental Health Project. Examples include:

- Proportion of youth aged 15 – 24 years diagnosed with common mental disorder
- Proportion of youth aged 15-24 years with a score of 12 or more on the K-10 (Kessler Psychological Distress Scale)
- Number of youth with positive changes on the mental health assessment tool.

Measure development notes

Data is captured at individual, regional and national levels by ethnicity and gender.

The HoNOSCA tool has a reasonable level of validity although some divergence in view has been observed between self rating and practitioner views.

Measure testing/piloting: This measure has been assigned a status of In Development for a period of 12 months during which time, the sector will 'test/use' the measure as it is currently defined and provide feedback to the SLM Team. Modifications to the measure definition may be made, prior to its status being updated to Active from 1 July 2018.

Implementation timeline: Measure is scheduled to move from a status of 'in development' to 'active' on 1 July 2018.

Reporting frequency: The Ministry will be responsible for gathering data and releasing information to Alliances.

Measure implementation group: TBC.