

# PRIMHD OUTCOMES REPORT 6 - CLINICALLY SIGNIFICANT SUB-SCORES

## EXPLANATORY NOTES

NOVEMBER 2009 - VERSION 1

### WHAT ARE CLINICALLY SIGNIFICANT SUB-SCORES?

Sub-scores are created by combining individual items, (with the exception of Delusions/Hallucinations which is item 6 only), to create higher level groups, as shown in the table below:

HoNOS/HoNOS65+ Sub-Scores	Items	HoNOSCA Sub-scores	Items
Behaviour	1, 3	Behavioural	1, 2, 3, 4
Impairment	4, 5	Impairment	5, 6
Delusions/Hallucinations	6	Symptomatic	7, 8, 9
Depression	2, 7, 8, 9	Social	10, 11, 12, 13
Social	9*, 10, 11, 12	Information	14, 15

\* Item 9 appears in both Depression and Social

Clinically significant sub-score reports show, using percentages, any item which is clinically significant (has a score of 2 or more) within the sub-scores.

### WHY REPORT CLINICALLY SIGNIFICANT SUB-SCORES?

These reports aggregate the five clinically significant sub-scores of service users at each point in the collection cycle. The reports display the percentage of service users with a clinically significant item at each of these points. This methodology prevents issues in graphing unweighted sub-scores that contain different items.

### HOW ARE THEY CALCULATED?

Only valid collections are utilised, i.e. those with 2 or less items with a score of '7' or '9'. Clinically significant is identified as any item with a score of 2 or more. More than 50% of items within the sub-score must be valid before the sub-score can be calculated. If any one of the items in the sub-score is 2 or more then it is identified as clinically significant. If there are no items rated as 2 or more then the sub-score is not clinically significant.

### HOW CAN IT BEST BE PRESENTED?

The best way to present this information is in a bar graph comparing percentage in each sub-score that is clinically significant. Examples of this are shown overleaf. This data can also be presented as a table comparing the percentage in each sub-score that is clinically significant taking into account the number in each category across teams, reason for collection, ethnicity, etc.

### HOW CAN THIS INFORMATION BE INTERPRETED?

A high percentage of clinically significant items can indicate an area where the DHB may wish to focus to ensure they are meeting the needs of the service users in their service/team.

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### HOW CAN THIS INFORMATION BE USED?

The reports will have particular utility at the team and service level where their use will allow for better planning, monitoring and evaluation. At national and regional levels of reporting sub-score reports will enhance understanding of trends and patterns.

### LIMITATIONS OF THIS REPORT

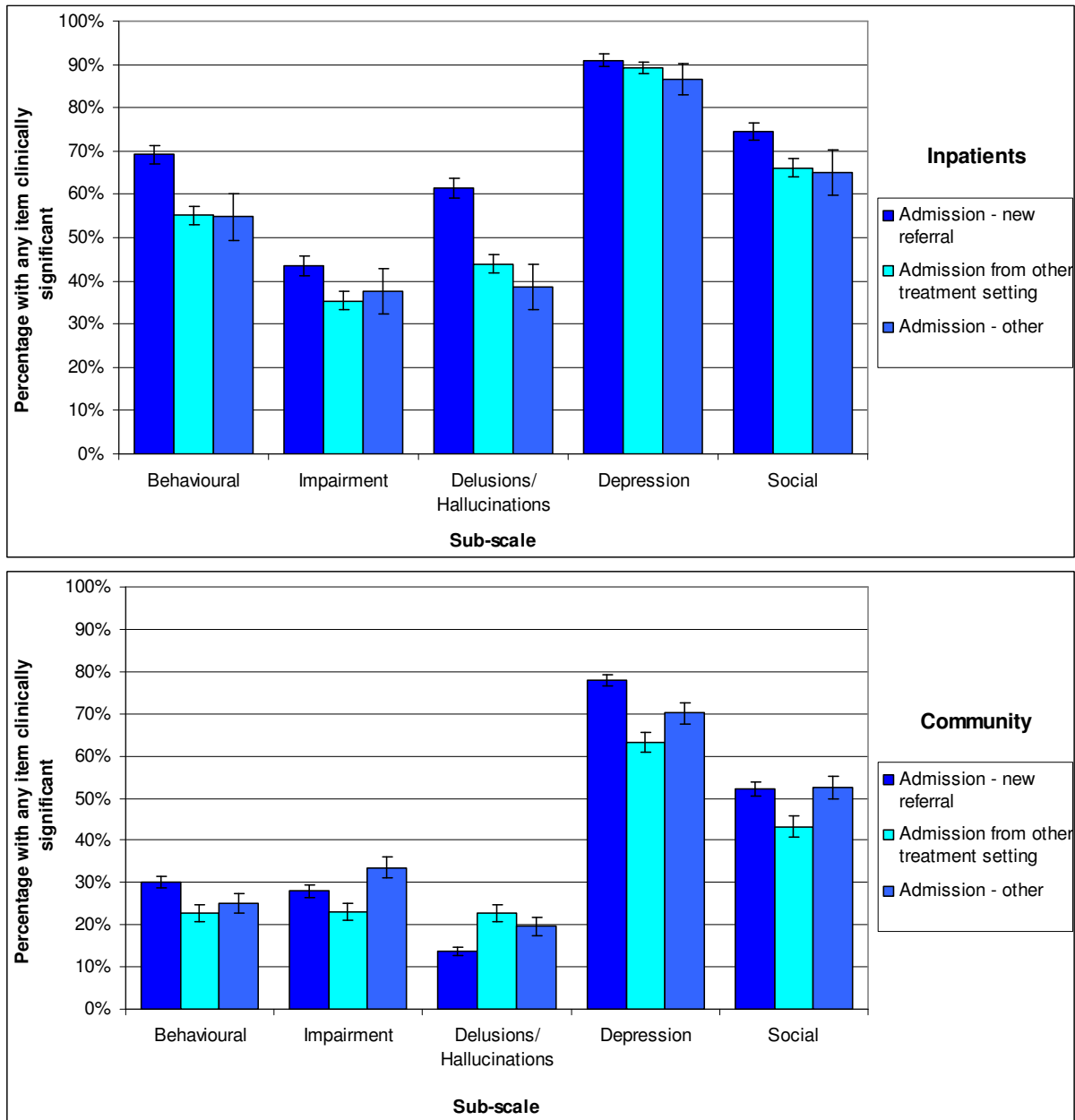
HoNOS does not measure everything. There could be a reason, other than what is covered in HoNOS, for a person to be in the service. This report should be used in conjunction with other PRIMHD Outcome Reports. These tables are not casemix adjusted to take account of the differences in the mix of service users between different teams and DHBs.

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**Figure 1: Percentage with any item Clinically Significant for the five sub-scores, by Admission Status and Setting, HoNOS**



Note 1: If any item which makes up the sub-scale has a score of 2 or more then it is counted as clinically significant.

Note 2: This report is not casemix adjusted.