

Additional guidance in the use of HoNOS in Perinatal Services

This guidance has been prepared in collaboration with the NHS Wales Perinatal Mental Health Network

HoNOS scale	Additional guidance notes
<p>1. Overactive, aggressive, disruptive or agitated behaviour</p> <ul style="list-style-type: none"> • <i>Include such behaviour due to any cause, e.g. drugs, alcohol, dementia, psychosis, depression, etc.</i> • <i>Do not include bizarre behaviour rated at Scale 6.</i> <p>0 No problem of this kind during the period rated.</p> <p>1 Irritability, quarrels, restlessness etc. not requiring action.</p> <p>2 Includes aggressive gestures, pushing or pestering others; threats or verbal aggression; lesser damage to property (e.g. broken cup, window); marked overactivity or agitation.</p> <p>3 Physically aggressive to others or animals (short of rating 4); threatening manner; more serious overactivity or destruction of property.</p> <p>4 At least one serious physical attack on others or on animals; destructive of property (e.g. fire-setting); serious intimidation or obscene behaviour.</p>	<p>Need to consider behaviours towards baby, including the potential for harm, as well as actual harm. Take into account behaviours such as:-</p> <ul style="list-style-type: none"> • Expressing frustration with baby • Shouting at baby • Being rougher with baby when caring for it • Thoughts of harming baby • Initial acts without actual harm (e.g. placing hands around neck) • Actual harm to baby
<p>2. Non-accidental self-injury</p> <ul style="list-style-type: none"> • <i>Do not include accidental self-injury (due e.g. to dementia or severe learning disability); the cognitive problem is rated at Scale 4 and the injury at Scale 5.</i> • <i>Do not include illness or injury as a direct consequence of drug/alcohol use rated at Scale 3 (e.g. cirrhosis of the liver or injury resulting from drink driving are rated at Scale 5).</i> <p>0 No problem of this kind during the period rated.</p> <p>1 Fleeting thoughts about ending it all but little risk during the period rated; no self-harm.</p> <p>2 Mild risk during the period rated; includes non-hazardous self-harm (e.g. wrist-scratching).</p> <p>3 Moderate to serious risk of deliberate self-harm during the period rated; preparatory acts (e.g. collecting tablets).</p> <p>4 Serious suicidal attempt and/or serious deliberate self-injury during the period rated.</p>	<p>No additional guidance</p>
<p>3. Problem-drinking or drug-taking</p> <ul style="list-style-type: none"> • <i>Do not include aggressive/destructive behaviour due to alcohol or drug use, rated at Scale 1.</i> • <i>Do not include physical illness or disability due to alcohol or drug use, rated at Scale 5.</i> <p>0 No problem of this kind during the period rated.</p> <p>1 Some over-indulgence but within social norm.</p>	<p>During pregnancy, base ratings on zero consumption being the norm.</p> <p>Also consider the impact of drinking and/or drug taking on parenting skills and abilities, such as:</p> <ul style="list-style-type: none"> • Ignoring the needs of baby • Forgetting to undertake baby-care tasks

<p>2 Loss of control of drinking or drug-taking, but not seriously addicted.</p> <p>3 Marked craving or dependence on alcohol or drugs with frequent loss of control, risk taking under the influence.</p> <p>4 Incapacitated by alcohol/drug problem</p>	<ul style="list-style-type: none"> • Being unable to respond to the needs of baby due to levels of intoxication • Prioritising drug or alcohol use to the detriment of baby
<p>4. Cognitive problems</p> <ul style="list-style-type: none"> • <i>Include problems of memory, orientation and understanding associated with any disorder: learning disability, dementia, schizophrenia, etc.</i> • <i>Do not include temporary problems (e.g. hangovers) resulting from drug/alcohol use, rated at Scale 3.</i> <p>0 No problem of this kind during the period rated.</p> <p>1 Minor problems with memory or understanding (e.g. forgets names occasionally).</p> <p>2 Mild but definite problems (e.g. has lost the way in a familiar place or failed to recognise a familiar person); sometimes mixed up about simple decisions.</p> <p>3 Marked disorientation in time, place or person; bewildered by everyday events; speech is sometimes incoherent; mental slowing.</p> <p>4 Severe disorientation (e.g. unable to recognize relatives), at risk of accidents; speech incomprehensible; clouding or stupor.</p>	<p>No additional guidance</p>
<p>5. Physical illness or disability problems</p> <ul style="list-style-type: none"> • <i>Include illness or disability from any cause that limits or prevents movement, or impairs sight or hearing, or otherwise interferes with personal functioning.</i> • <i>Include side-effects from medication; effects of drug/alcohol use; physical disabilities resulting from accidents or self-harm associated with cognitive problems, drink-driving, etc.</i> • <i>Do not include mental or behavioural problems rated at Scale 4.</i> <p>0 No physical health problem during the period rated.</p> <p>1 Minor health problems during the period (e.g. cold, non-serious fall, etc.).</p> <p>2 Physical health problem imposes mild restriction on mobility and activity.</p> <p>3 Moderate degree of restriction on activity due to physical health problem.</p> <p>4 Severe or complete incapacity due to physical health problem.</p>	<p>Consider physical health problems in the previous 2 weeks related to both pregnancy and/or the birth. Include issues such as:</p> <ul style="list-style-type: none"> • Severe pain • Sickness • Difficulty walking • Restrictions resulting from e.g. Caesarian • Complications of existing health conditions (e.g. Diabetes) • Effects of haemorrhage (e.g. anaemia) • Impact of hysterectomy • Sheehan's syndrome • Sepsis (mastitis or wound infection) • Issues with continence • Thrombosis • Sexual dysfunction attributed to physical causes
<p>6. Problems associated with hallucinations and delusions</p> <ul style="list-style-type: none"> • <i>Include hallucinations and delusions irrespective of diagnosis.</i> • <i>Include odd and bizarre behaviour associated with hallucinations or delusions.</i> • <i>Do not include aggressive, destructive or overactive behaviours attributed to hallucinations or delusions, rated at Scale 1.</i> <p>0 No evidence of hallucinations or delusions during the period rated.</p> <p>1 Somewhat odd or eccentric beliefs not in keeping with cultural norms.</p> <p>2 Delusions or hallucinations (e.g. voices, visions) are present, but here is little distress to patient or</p>	<p>Include odd beliefs about the baby or being a mum</p> <p>Beliefs that baby belongs to someone else</p> <p>Believing baby is crying on purpose</p> <p>Delusions about baby being evil</p> <p>Not wanting to be in the same room as baby</p> <p>Hearing baby cry when baby settled</p>

<p>manifestation in bizarre behaviours, i.e. clinically present but mild.</p> <p>3 Marked preoccupation with delusions or hallucinations, causing much distress and/or manifested in obviously bizarre behaviour, i.e. moderately severe clinical problem.</p> <p>4 4 Mental state and behaviour is seriously and adversely affected by delusions or hallucinations, with severe impact on patient</p>	
<p>7. Problems with depressed mood</p> <ul style="list-style-type: none"> Do not include overactivity or agitation, rated at Scale 1. Do not include suicidal ideation or attempts, rated at Scale 2. Do not include delusions or hallucinations, rated at Scale 6. <p>0 No problem associated with depressed mood during the period rated.</p> <p>1 Gloomy; or minor changes in mood.</p> <p>2 Mild but definite depression and distress (e.g. feelings of guilt; loss of self-esteem).</p> <p>3 Depression with inappropriate self-blame, preoccupied with feelings of guilt.</p> <p>4 Severe or very severe depression, with guilt or self-accusation.</p>	<p>Need to consider issues such as:</p> <ul style="list-style-type: none"> Feeling guilty because they believe they are a bad mother Feelings that they are not doing enough for baby Feelings that they don't deserve a child
<p>8. Other mental and behavioural problems</p> <ul style="list-style-type: none"> Rate only the most severe clinical problem not considered at items 6 and 7 as follows. Specify the type of problem by entering the appropriate letter; A phobic; B anxiety; C obsessive-compulsive; D mental strain/tension; E dissociative; F somatoform; G eating; H sleep; I sexual; J other, specify. <p>0 No evidence of any of these problems during period rated.</p> <p>1 Minor problems.</p> <p>2 A problem is clinically present at a mild level (e.g. patient has a degree of control).</p> <p>3 Occasional severe attack or distress, with loss of control (e.g. has to avoid anxiety provoking situations altogether, call in a neighbour to help, etc.) i.e. moderately severe level of problem.</p> <p>4 Severe problem dominates most activities.</p>	<p>Ensure that you focus on the most severe problem in terms of the impact on the client. However, you do need to ensure that issues related to their perinatal condition are included.</p> <p>Ratings of H (sleep) should relate to not being able to sleep when baby is asleep.</p> <p>Any PTSD related symptoms are rated under D (mental strain/tension).</p> <p>Tokophobia should be rated under A (phobic).</p> <p>Include sexual problems attributable to psychological causes.</p>
<p>9. Problems with relationships</p> <ul style="list-style-type: none"> Rate the patient's most severe problem associated with active or passive withdrawal from social relationships, and/or non-supportive, destructive or self-damaging relationships. <p>0 No significant problems during the period.</p> <p>1 Minor non-clinical problems.</p> <p>2 Definite problems in making or sustaining supportive relationships: patient complains and/or problems are evident to others.</p> <p>3 Persisting major problems due to active or passive withdrawal from social relationships and/or to relationships that provide little or no comfort or support.</p> <p>4 Severe and distressing social isolation due to inability to communicate socially and/or withdrawal from social relationships.</p>	<p>Remember to include the client's relationship with baby.</p> <p>Also consider the impact of the client's perinatal problems on their relationships with others, e.g. a partners or significant other's understanding of/reaction to aspects of perinatal illness (e.g. struggling to care for baby) since this will have a negative impact on the quality of those relationships.</p> <p>Also partners or significant others who are not engaged in the care of baby because they don't see it as their responsibility will also have a negative impact on relationships.</p>

<p>10. Problems with activities of daily living</p> <ul style="list-style-type: none"> • <i>Rate the overall level of functioning in activities of daily living (ADL): e.g. problems with basic activities or self-care such as eating, washing, dressing, toilet; also complex skills such as budgeting, organising where to live, occupation and recreation, mobility and use of transport, shopping, self-development, etc.).</i> • <i>Include any lack of motivation for using self-help opportunities, since this contributes to a lower overall level of functioning.</i> • <i>Do not include lack of opportunities for exercising intact abilities and skills, rated at Scales 11-12.</i> <p>0 No problems during period rated; good ability to function in all areas.</p> <p>1 Minor problems only (e.g. untidy, disorganised).</p> <p>2 Self-care adequate, but major lack of performance of one or more complex skills (see above).</p> <p>3 Major problems in one or more area of self-care (eating, washing, dressing, toilet) as well as major inability to perform several complex skills.</p> <p>4 Severe disability or incapacity in all or nearly all areas of self-care and complex skills.</p>	<p>Remember to consider the problems the client may be experiencing in relation to care of baby both in terms of basic physical care as well as being organised to undertake more complex activities with baby, such as going out.</p>
<p>11. Problems with living conditions</p> <ul style="list-style-type: none"> • <i>Rate the overall severity of problems with the quality of living conditions and daily domestic routine. Are the basic necessities met (heat, light, hygiene)? If so, is there help to cope with disabilities and a choice of opportunities to use skills and develop new ones?</i> • <i>Do not rate the level of functional disability itself, rated at Scale 10.</i> <p>NB: Rate patient's usual accommodation. If in acute ward, rate the home accommodation. If information not available, rate 9.</p> <p>0 Accommodation and living conditions are acceptable; helpful in keeping any disability rate at Scale 10 to the lowest level possible, and supportive of self-help.</p> <p>1 Accommodation is reasonably acceptable although there are minor or transient problems (e.g. not ideal location, not preferred option, doesn't like the food, etc.).</p> <p>2 Significant problem with one or more aspects of the accommodation and/or regime (e.g. restricted choice; staff or household have little understanding of how to limit disability, or how to help use or develop new or intact skills).</p> <p>3 Distressing multiple problems with accommodation (e.g. some basic necessities absent); housing environment has minimal or no facilities to improve patient's independence.</p> <p>4 Accommodation is unacceptable (e.g. lack of basic necessities; patient is at risk of eviction or 'roofless'; or living conditions are otherwise intolerable) making patient's problems worse.</p>	<p>Ensure adequate consideration of accommodation in terms of the needs of baby. Is the accommodation fit for occupation by a young infant and life with a young child? Has baby got their own room that is warm and safe? Is the living environment safe for a young infant? Is there easy access with a pram to and from the accommodation?</p>
<p>12. Problems with occupation and activities</p> <ul style="list-style-type: none"> • <i>Rate the overall level of problems with quality of daytime environment. Is there help to cope with disabilities, and opportunities for maintaining or improving occupational and recreational skills and activities? Consider factors such as stigma, lack of qualified staff, access to supportive facilities, e.g.</i> 	<p>Consider the availability/accessibility of parenting based activities, baby groups, support for parenting, activities for mum with crèche, ability to go out and meet other parents within groups.</p>

staffing and equipment of day centres, workshops, social clubs, etc.

- *Do not rate the level of functional disability itself, rated at Scale 10.*

NB: Rate patient's usual situation. If in acute ward, rate activities during period before admission. If information not available, rate 9.

- 0 Patient's day-time environment is acceptable: helpful in keeping any disability rated at Scale 10 to the lowest level possible, and supportive of self-help.
- 1 Minor or temporary problems (e.g. late giro cheques; reasonable facilities available but not always at desired times, etc.).
- 2 Limited choice of activities, e.g. there is a lack of reasonable tolerance (e.g. unfairly refused entry to public library or baths etc.); or handicapped by lack of a permanent address; or insufficient carer or professional support; or helpful day setting available but for very limited hours.
- 3 Marked deficiency in skilled services available to help minimise level of disability; no opportunities to use intact skills or add new ones; unskilled care difficult to access.
- 4 Lack of any opportunity for daytime activities makes patient's problems worse.