Glossary

HoNOS-ABI
Health of the Nation Outcome Scales for Acquired Brain Injury

Summary of rating instructions:

1. Rate each scale in order from 1 to 12
2. Do not include information rated in an earlier item except for item 10 which is an overall rating
3. Rate the MOST SEVERE problem that occurred during the previous 2 weeks
4. All scales follow the format

   0 = No problem
   1 = minor problem requiring no action
   2 = mild problem but definitely present
   3 = moderately severe problem
   4 = severe to very severe problem

Rate 9 if not known

1. Active Disturbance of Social Behaviour e.g. overactive, aggressive, disruptive or agitated behaviour, uncooperative, resistive, or disinhibited behaviour.
   - include such behaviour due to any cause. This scale rates antisocial acts. Rate passive disturbance of social behaviour, e.g. social withdrawal, under scale 9 or 10. Do not include bizarre but non-aggressive behaviour which is probably or definitely attributable to hallucinations or delusions, rated at Scale 6.

2. Self directed injury.
   - any self injurious behaviour which is not accidental, should be rated here; passive acts of self injurious behaviour, e.g. failing to take action to avoid a life threatening situation, are included here. In the case of accidental self injury any cognitive problem is rated at Scale 4 and the injury at Scale 5. 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 drunk driving are rated at Scale 5).

3. Problem drinking or drug use.
   - do not include aggressive / destructive behaviour, rated at Scale 1. Do not include physical illness or disability, rated at Scale 5. Do not include accidental misuse of alcohol or drugs (prescribed or otherwise) e.g. in the context of dementia.

   - Rate any problems with orientation, attention, planning and organisation, memory, language or visuo-spatial function. Do not include temporary problems (e.g. hangovers) which are clearly associated with alcohol or other drug use/medication use, rated at Scale 3.

5. Physical illness or disability problems.
   - include illness or disability from any cause, including epilepsy, that limits mobility, impairs sight, hearing or conscious level or otherwise interferes with personal functioning (e.g. pain). Also include adverse effects of medication and effects of drug or alcohol use. Disability resulting from fatigue and hypersomnia should be rated here.

0 = No problem of this kind during the period rated.
1 = Some overindulgence but within social norm.
2 = Occasional loss of control of drinking or drug use, but not a serious problem.
3 = Marked craving or dependence on alcohol or drug use with frequent loss of control, drunkenness, etc.
4 = Major adverse consequences/incapacitated from alcohol/drug problems.

0 = No problem of this kind during the period rated.
1 = minor problem requiring no action.
2 = M inor problems requiring no action (e.g. some difficulty with orientation in time; slightly distractible and slight problems with concentration; has difficulties prioritising tasks, attending to two things at once; a degree of forgetfulness but still able to actively learn new information; occasional errors in speech but do not disrupt meaning).
3 = M odest problems but definitely present (e.g. frequently disoriented in time; difficulty finding way in new or unfamiliar surroundings; has some difficulty concentrating, attention span is limited; difficulty organising complex tasks; definite problems learning new information such as names, recollection or recent events and the memory problems interfere with everyday activities; able to deal with simple verbal material but some difficulties with understanding, and/or expression of more complex language).
4 = M oderate problems (e.g. usually disoriented in time, often to place; has lost the way in a familiar place; attentional problems interfere with ability to think clearly; perseveration disrupts thinking at times; has difficulties organising everyday activities; new material rapidly lost; only highly learned material retained, occasional failure to recognise familiar individuals; expressive and/or receptive dysphasia).
5 = S evere problems (e.g. consistently disoriented in time and place; hardly capable of the simplest tasks eg. making a cup of tea; attentional problems disrupt thinking; severe perseveration; very poor memory, only fragments remain, loss of distant as well as recent information, hardly able to learn any new information, unable to recognise or to name close friends/families; no communication possible through language/inaccessible to speech).

0 = No significant physical health, disability or mobility problems during the period rated.
1. Minor health problem during the period rated (e.g. cold); some impairment of sight and/or hearing (but still able to function effectively with the use of glasses and/or hearing aid).

2. Physical health problem associated with mild restriction of activities and/or mobility (e.g. restricted walking distance, some degree of loss of independence), moderate impairment of sight and/or hearing (with functional impairment despite the appropriate use of glasses and/or hearing aid), some degree of risk of falling, but low and no episodes to date, problems associated with mild degree of pain.

3. Physical health problem associated with moderate restriction of activities and/or mobility (e.g. requires an aid - stick, zimmer frame or wheelchair - for independent mobility, or requires occasional help with mobility); more severe impairment of sight and/or hearing (short of Rating 4); significant risk of falling, ± one or more falls; problems associated with a moderate degree of pain; slight impairment of conscious level.

4. Major physical health problems associated with severe restriction of activities and/or mobility (e.g. chair or bed bound); severe impairment of sight and/or hearing (e.g. registered blind or deaf); high risk or falling, ± one or (usually) more falls because of physical illness or disability; problems associated with severe pain; moderate/severe impaired level of consciousness.

5. Problems associated with hallucinations or delusions or confabulations.

   - Include hallucinations or delusions or confabulations irrespective of diagnosis. Include odd or bizarre behaviour only if it can be attributed to hallucinations or delusions or confabulations (otherwise rate as scale 1). Do not include aggressive, destructive or overactive behaviours attributed to hallucinations or delusions or confabulations which are rated at Scale 1.

   0. No evidence of hallucinations or delusions or confabulations during the period rated.

   1. Somewhat odd or eccentric beliefs not in keeping, with cultural norms.

   2. Hallucinations (e.g. voices, visions) or delusions or confabulations are present, but there is little distress to patient or manifestation in bizarre behaviour, i.e. present but mild clinical problem.

   3. Marked preoccupation with hallucinations or delusions or confabulations, causing significant distress and/or manifested in obviously bizarre behaviour, i.e. moderately severe clinical problem.

   4. Mental state and behaviour is seriously and adversely affected by hallucinations or delusions or confabulations, with a major impact on the patient and/or others, i.e. severe clinical problem.

7. Problems with depressive symptoms.

   - 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. Rate associated problems (e.g. changes in sleep, appetite or weight; anxiety symptoms) at Scale 8. Depressed mood should be rated regardless of whether it might appear to be an "understandable" reaction to disability, or an endogenous depression.

   0. No problems associated with depression during the period rated.

   1. Gloomy; minor changes in mood only.

   2. Mild but definite depressive symptoms on subjective and/or objective measures (e.g. loss of interest and/or pleasure, lack of energy, loss of self-esteem, feelings of guilt).

   3. Moderate depressive symptoms on subjective and/or objective measures (depressive symptoms more marked).

   4. Severe depressive symptoms on subjective and/or objective grounds (e.g. profound loss of interest and/or pleasure, preoccupation with ideas of guilt or worthlessness).

8. Other mental and behavioural problems.

   Rate only the single most severe clinical problem not considered in Scales 6 and 7. Specify the type of problem by entering the appropriate letter. A phobic; B anxiety; C obsessive-compulsive; D stress; E dissociative; F somatoform; G eating; H sleep; I sexual; J other (specify).

   0. No evidence of any of these problems during period rated.

   1. Minor non-clinical problems.

   2. A problem is clinically present, but at a mild level e.g. the problem is intermittent, the patient maintains a degree of control and/or is not unduly distressed.

   3. Moderately severe clinical problem e.g. more frequent, more distressing or more marked symptoms.

   4. Severe persistent problem which dominates or seriously affects most activities.

9. Problems with relationships.

   - Problems associated with social relationships, identified by the patient and/or apparent to others / carers. Rate the patient’s most severe problem associated with active or passive withdrawal from, or tendency to dominate, social relationships, and/or non-supportive, destructive or self-damaging relationships.

   0. No significant problems during the period.

   1. Minor non-clinical problem.

   2. Definite problems in making, sustaining or adapting to supportive relationships (e.g. because of controlling manner, or difficult, exploitative or abusive relationships with carers), definite difficulties reported by patient / others / carers, but mild.

   3. Persisting significant problems with relationships; moderately severe conflict or problems identified within the relationship by the patient and/or apparent to others/carers.

4. Severe difficulties associated with social relationships (e.g. isolation, withdrawal, conflict, abuse); major tensions and stresses (e.g. threatening breakdown of relationship).


   Rate the overall level of functioning safely in activities of daily living (ADL); e.g. problems with basic activities of selfcare such as eating, washing, dressing, toilet - also complex skills such as budgeting, recreation, use of transport. Include any lack of motivation for using self-help opportunities, since this contributes to a lower overall level of functioning. Do not include lack of opportunity for exercising intact abilities and skills, rated at Scales 11 and 12.

   0. No problems during the period rated; good ability to function effectively in all basic activities (e.g. continent - or able to manage incontinence appropriately, able to feed self and dress) and complex skills (e.g. driving or able to make use of transport facilities, able to handle financial affairs appropriately).

   1. Minor problems only without significantly adverse consequences; e.g. untidy, mildly disorganised, some evidence to suggest a decline from previous functional level (especially with regard to complex skills) but still able to cope effectively.

   2. Self care and basic activities adequate though prompting may be required, but difficulty with more complex skills (e.g. problems organising and making a drink/meal, deterioration in personal interests especially outside the home situation, problems with driving, transport or financial judgements).

   3. Problems evident in one or more areas of basic self-care activities (e.g. needs some supervision with dressing and eating, occasional urinary incontinence or continent only if toileted), inability to perform several complex skills in safety. Consistently requires prompting to perform activities.

   4. Severe disability or incapacity in all or nearly all areas of basic and complex skills, or lack of safety in any area (e.g. full supervision required with dressing and eating, frequent urinary/faecal incontinence).

11. Problems with living conditions.

   - Rate overall severity of problems with the quality of living conditions / accommodation and daily domestic routine taking into account the patient’s preferences and degree of satisfaction with their circumstances. Are the basic necessities met (heat, light, hygiene)? If so, does the physical environment contribute to maximising independence and minimising risk, and provide a choice of opportunities to facilitate the use of existing skills and the development of new ones? Do not rate the level of functional disability itself which is rated at Scale 10.

   NB: Rate the patients usual accommodation. If in acute ward, rate the home accommodation. If in rehabilitation unit and close to discharge, rate confirmed discharge accommodation.

   0. A accommodation and living conditions are acceptable; helpful in
keeping any disability rated at Scale 10 to the lowest level possible and minimising any risk, and supportive of self-help, the patient is satisfied with their accommodation.

1 - Accommodation is reasonably acceptable with only minor or transient problems related primarily to the patient’s preferences rather than any significant problems or risks associated with their environment (e.g. not ideal location, not preferred option, doesn’t like food).

2 - Basics are met but significant problems with one or more aspects of the accommodation and/or regime (e.g. lack of proper adaptation to optimise function relating, for instance to stairs, lifts or other problems or access); may be associated with risk to patient (e.g. of injury) which would be otherwise reduced.

3 - Distressing/multiple problems with accommodation; e.g. some basic necessities absent (e.g. unsatisfactory and/or unreliable heating, lack of proper cooking facilities, inadequate sanitation), clear elements of risk to the patient resulting from aspects of physical environment.

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 and/or placing them at high risk of injury.

12. Problems with activities.
- Rate the overall level of problems with the quality of the day-time 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, lack of funding, lack of access to supportive facilities e.g. staffing and equipment of day centres, social clubs etc. Do not rate the level of functional disability itself, rated at Scale 10. Do not rate if the patient refuses to take part, or is too antisocial to take part, in activities which are nevertheless available, rated at appropriate scale.

NB: Rate the patient’s usual situation. If in acute ward, rate activities during period before admission. If in rehabilitation unit and close to discharge, rate confirmed discharge arrangements.

0 - Patient’s day-time environment is acceptable; helpful in keeping any disability rated at Scale 10 to the lowest level possible and maximising autonomy.

1 - Minor or temporary problems e.g. good facilities available but not always at appropriate times for the patient.

2 - Limited choice of activities; e.g. insufficient carer or professional support; useful day setting available but for very limited hours.

3 - Marked deficiency in skilled services and support available to help optimise activity level and autonomy, little opportunity to use skills or to develop new ones; unskilled care difficult to access.

4 - Lack of any effective opportunity for day-time activities makes the patient’s problems worse or patient refuses services offered which might improve their situation.

Amended from HoNOS 65+ by Simon Fleminger on behalf of the UK Psychiatrists Brain Injury Group June 1999