

HoNOS SCORE SHEET:

NAME: _____

DATE: _____

HoNOS ITEMS:	SCORE ENTRY	SCORE 6/12	SCORE 12/12	SCORE END:
	DATE:	DATE:	DATE:	DATE:
A: Behavioural Problems				
1. Aggression				
2. Self-harm				
3. Drug & alcohol use				
B: Impairment				
4. Cognitive problems				
5. Physical illness h/caps				
C: Symptomatic Problems				
6. Hallucinations & Delusions:				
7. Negative symptoms				
8. Depressed Mood				
9. Depressed Mood with Melancholic features				
10. Loss of Pleasure				
11. Elevated Mood				
12. Other symptoms				
D: Social Problems:				
13. Relationships				
14. Activities of daily living				
15. Residential environment				
16. Occupational & recreational activities				
HoNOS SUBSCORES:				
A: 1-3 Behaviour (0-12)				
B: 4-5 Impairment (0-8)				
C: 6-12 Symptoms (0-28)				
D: 13-16 Social (0-16)				
HoNOS TOTAL SCORES:				
E: 1-16 (0-64)				
F: 1-14 (0-56)				
Onset of Symptoms:				
Problems with compliance:				