Assessment powered by NovoPsych

A Review of the Clinical Utility and Psychometric Properties of the ADHD Clinical Outcome Scale (ACOS) – Self-Report Version: Percentile Rankings and Qualitative Descriptors

The ADHD Clinical Outcome Scale (ACOS) – Self-Report Version was developed by Adamis and colleagues (2024). It is a 15-item routine clinical outcome measure of ADHD and related mental health problems and functional difficulties. This technical review provides clinicians with percentile rankings and qualitative descriptors to enhance the interpretation and clinical utility of ACOS scores.

View the ACOS on NovoPsych.com.au

Dr Simon Baker

Dr Carla Smyth

Emerson Bartholomew

Dr Ben Buchanan

Dr David Hegarty

December 2024

Developer

The ADHD Clinical Outcome Scale (ACOS) – Self-Report Version was developed by Adamis and colleagues (2024):

> Adamis, D., Singh, J., Coada, I., Wrigley, M., Gavin, B., & McNicholas, F. (2024). Measuring clinical outcomes in adult ADHD clinics: Psychometrics of a new scale, the adult ADHD Clinical Outcome Scale. BJPsych Open, 10(6), e180. https://doi.org/10.1192/bjo.2024.739

This document was developed by NovoPsych to review contemporary literature and to describe original scoring methodologies and to provide interpretation material, enhance normative data and provide qualitative descriptors.

Author Information

(not in authorship order)

Ben Buchanan DPsych

CEO, NovoPsych

Adjunct Research Fellow, Monash University, Melbourne, Australia

David Hegarty PhD

Head of Psychometrics, NovoPsych

Adjunct Professional Fellow, Southern Cross University, Coffs Harbour, Australia

Simon Baker PhD

Research Fellow, NovoPsych

Carla Smyth PhD

Research Fellow and Clinical Liaison, NovoPsych

Emerson Bartholomew MHealthPsych

Research Fellow and Psychometrician, NovoPsych

Correspondence

For inquiries about this document, contact:

Dr David Hegarty

Email: david@novopsych.com

Citation

Baker, S., Smyth, C., Bartholomew, E., Buchanan, B., & Hegarty, D. (2024). A Review of the Clinical Utility and Psychometric Characteristics of the ADHD Clinical Outcome Scale (ACOS) – Self-Report Version: Percentile Rankings and Qualitative Descriptors. Retrieved from: https://novopsych.com.au/assessments/outcome-monitoring/adhd-clinical-outcome-scale-acos-self-report-version

Open Source Licence

The information in this document can be used without permission by researchers and clinicians and distributed under an open source licence.

Description

The ADHD Clinical Outcome Scale (ACOS) is a 15-item routine clinical outcome measure of ADHD and related mental health problems and functional difficulties (Adamis et al., 2024). It is designed to assess the main symptoms of ADHD as well as co-occurring mental health difficulties (e.g., anxiety and depression) and challenges in daily functioning (e.g., difficulties with work and with everyday life).

The ACOS provides a total score representing the overall severity of symptoms and problems/difficulties associated with ADHD as well as a score for each of its four subscales.

- **Attention and Functional Difficulties**, which includes difficulties with attention, organisation, procrastination, work, and everyday life.
- **Hyperactivity/Impulsivity and Emotional Dysregulation**, which includes hyperactivity/restlessness, impulsivity, emotional fluctuation (ups and downs in mood), and temper/anger outbursts.
- **Co-occurring Mental Health Problems**, which includes anxiety, depression, and sleep problems.
- **Risk Behaviours and Interpersonal Problems**, which includes alcohol and drug use problems, self-harm, and tension in relationships.

The ACOS is suitable for adults as a self-report questionnaire or clinician-rated scale (see ADHD Clinical Outcome Scale (ACOS) – Clinician Version). Both versions provide a time-efficient means to assess and track changes in ADHD symptoms and related mental health problems and functional difficulties.

Psychometric Properties

The ADHD Clinical Outcome Scale (ACOS) was validated on a sample of 148 adults (mean age = 30.1 years, SD = 9.71 years; 45.3% male, 54.7% female) diagnosed with ADHD (Adamis et al., 2024). They had been referred to, and were recruited from, a tertiary specialist outpatient clinic for adult ADHD, and they all fulfilled diagnostic criteria for ADHD.

The sample's mean total ACOS score for the Self-Report version was 38.99 (SD = 12.1). These data are used to convert the respondent's total ACOS score to a percentile, providing useful information about the severity of their symptoms and problems/difficulties associated with ADHD relative to adults with ADHD.

The Clinician Version demonstrates strong psychometric properties, including evidence of concurrent validity with the WEISS Functional Impairment Rating Scale (WFIRS) and the Adult ADHD Quality of Life (AAQoL) scale as well as high internal consistency and good reliability. Exploratory factor analysis indicates that it has four factors:

- Attention and Functional Difficulties
- Hyperactivity/Impulsivity and Emotional Dysregulation
- Co-occurring Mental Health Problems
- Risk Behaviours and Interpersonal Problems

Both the Clinician Version and Self-Report Version demonstrate sensitivity to changes in the overall severity of symptoms and problems/difficulties associated with ADHD, making them suitable for routine measurement of clinical outcomes in adults with ADHD.

Scoring & Interpretation

The ADHD Clinical Outcome Scale (ACOS) yields a total score between 0 and 75, with higher scores indicating a greater severity of symptoms and challenges associated with ADHD. Each item is rated on a 6-point Likert-type scale from 0 to 5 reflecting the degree to which the individual has experienced a specific problem in the past 2 weeks.

The respondent's total ACOS score is expressed as a percentile based on normative data for adults with ADHD (Adamis et al., 2020), contextualising their score relative to the typical scores of adults with ADHD. For example, the 50th percentile represents the typical level of severity among adults with ADHD (i.e., "Moderately Severe"), while scores on the 90th percentile fall within the top 10% when compared to adults with ADHD and are considered "Severe".

Total ACOS Score

	Score	Percentile	Descriptor
Total ACOS (0-75)	43	63	Moderately Severe

Scores are also provided for the scale's four subscales:

- **Attention and Functional Difficulties** (Items 2, 6, 10, 14, and 15), which includes difficulties with attention, organisation, procrastination, work, and everyday life.
- **Hyperactivity/Impulsivity and Emotional Dysregulation** (Items 1, 3, 5, and 7), which includes hyperactivity/restlessness, impulsivity, emotional fluctuation (ups and downs in mood), and temper/anger outbursts.
- **Co-occurring Mental Health Problems** (Items 11, 12, and 13), which includes anxiety, depression, and sleep problems.
- **Risk Behaviours and Interpersonal Problems** (Items 4, 8, and 9), which includes alcohol and drug use problems, self-harm, and tension in relationships.

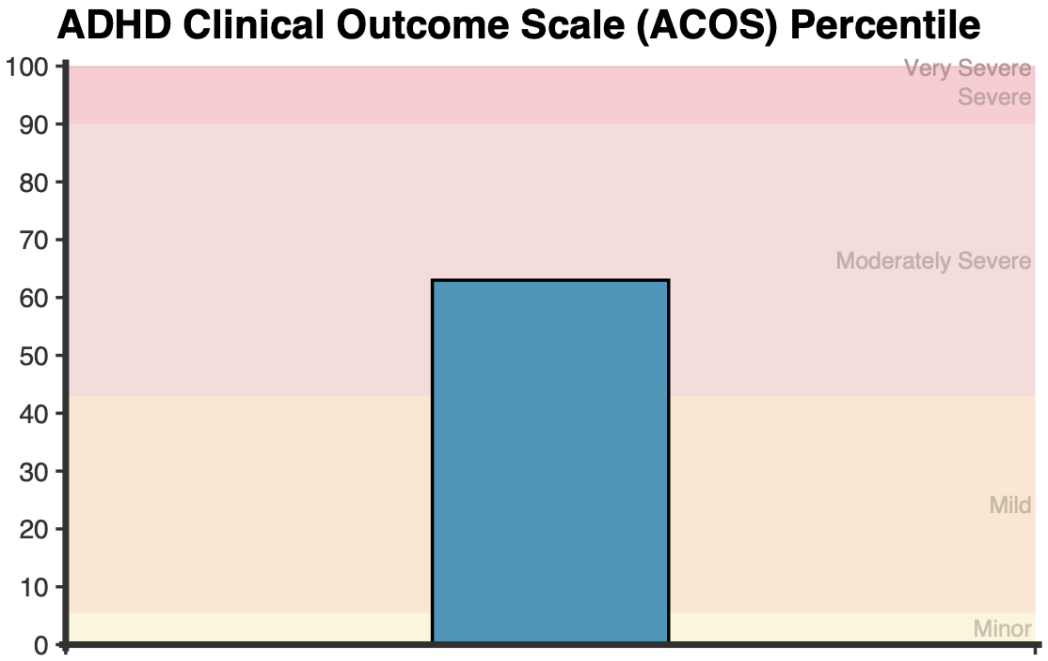
Subscale Scores

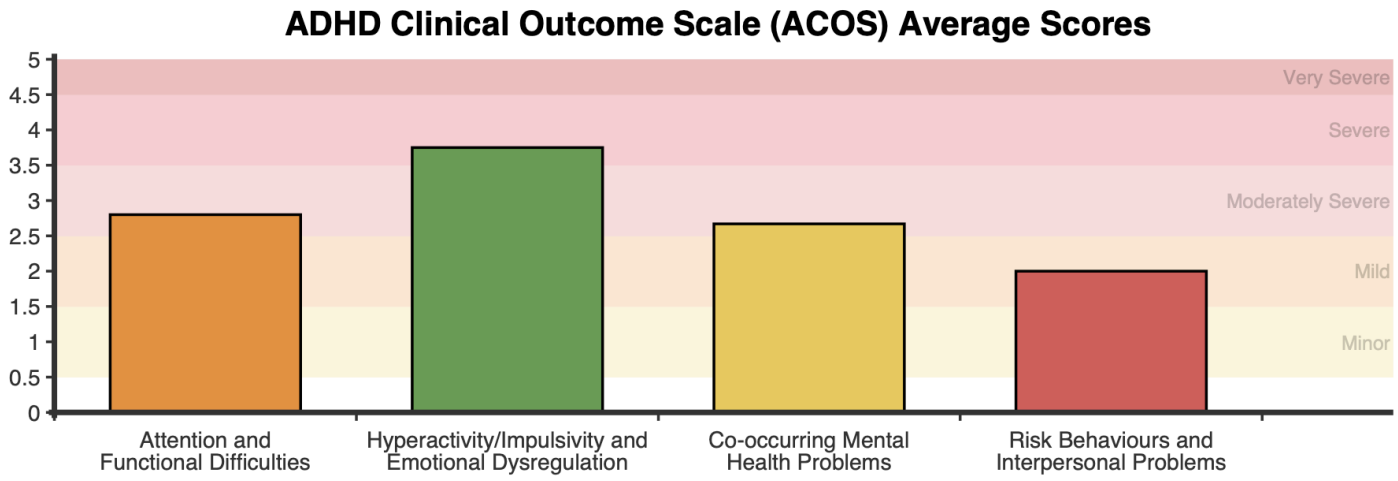
	Score	Average (0-5)	Descriptor
Attention and Functional Difficulties (0-25)	14	2.8	Moderately Severe
Hyperactivity/Impulsivity and Emotional Dysregulation (0-20)	15	3.75	Severe
Co-occurring Mental Health Problems (0-15)	8	2.67	Moderately Severe
Risk Behaviours and Interpersonal Problems (0-15)	6	2	Mild

The scoring approach uses qualitative descriptors to categorise ACOS scores. Each descriptor corresponds to a specific range of average scores reflecting the 6-point rating scale. The overall average score is calculated by dividing the total ACOS score by the number of items in the scale (i.e., 15). The average score for each subscale is calculated by dividing the subscale's score by the number of items in the subscale. The descriptors and corresponding score ranges are as follows.

- "No Problem" (average score of 0-0.49) (total score of 0-7)
- "Minor" (average score of 0.5-1.49) (total score of 8-22)
- "Mild" (average score of 1.5-2.49) (total score of 23-37)

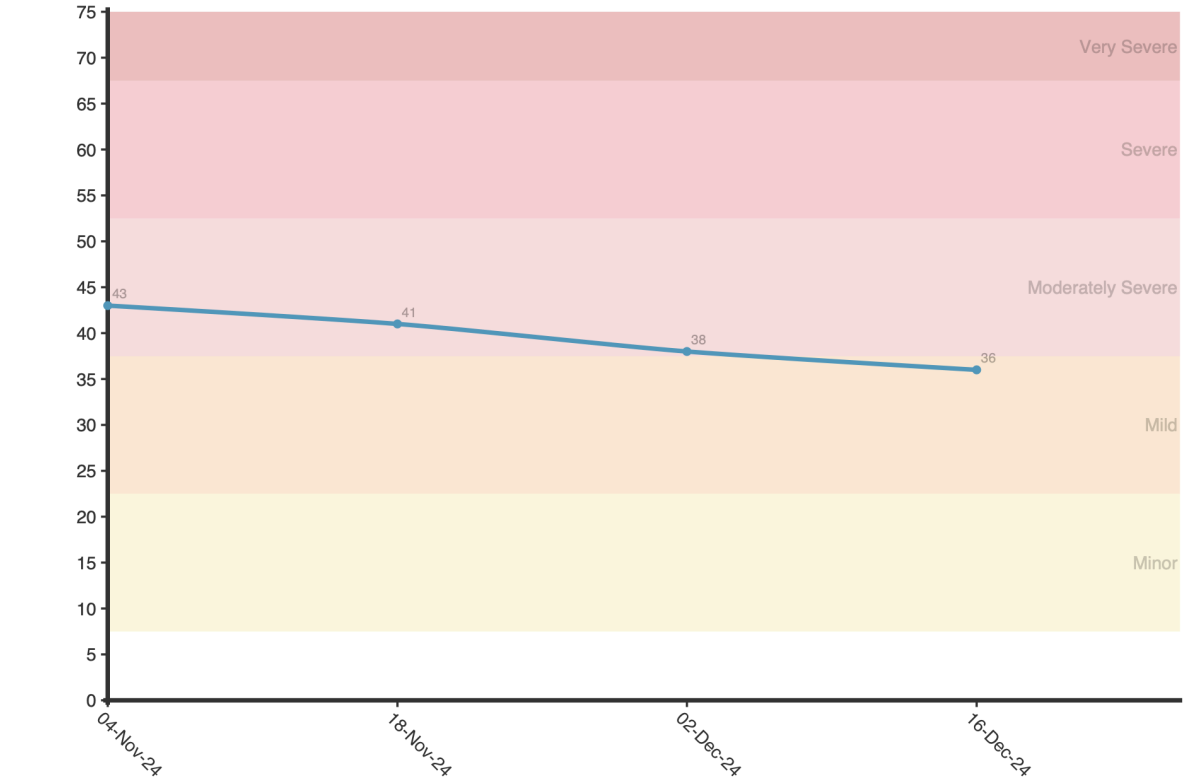
- "Moderately Severe" (average score of 2.5-3.49) (total score of 38-52)
- "Severe" (average score of 3.5-4.49) (total score of 53-67)
- "Very Severe" (average score of 4.5-5) (total score of 68-75)



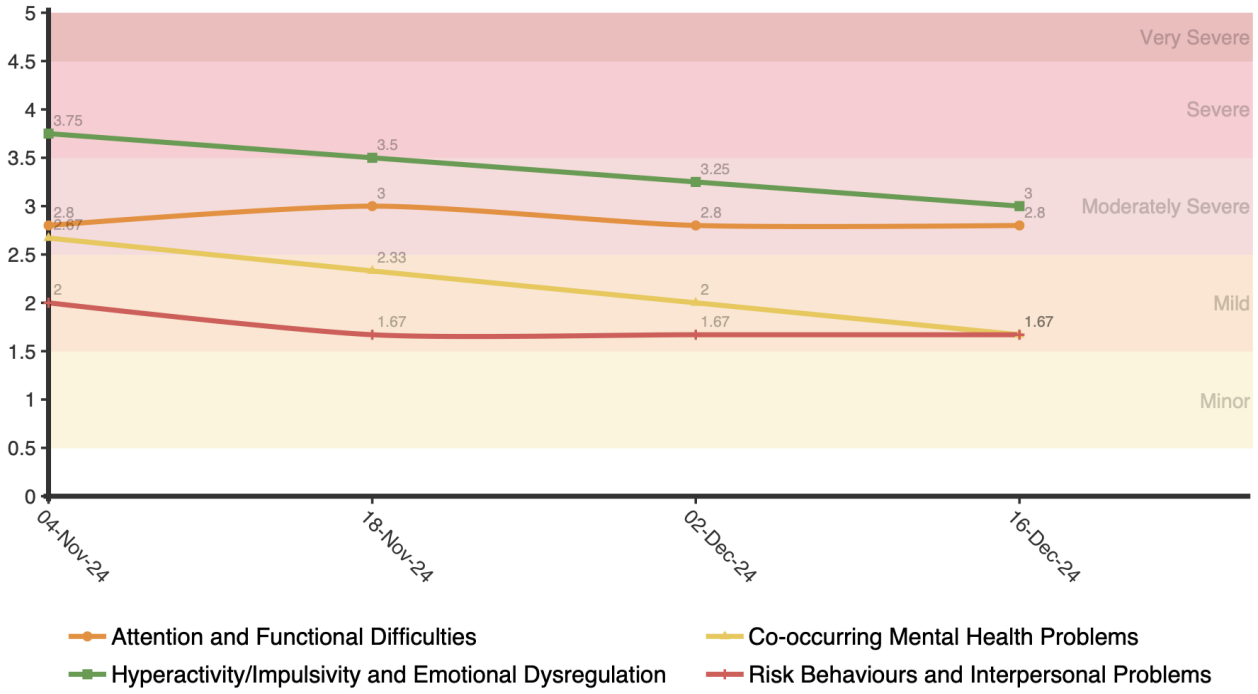


On first administration, graphs are presented showing the respondent's total ACOS as a percentile and the respondent's average score for each subscale. If administered more than once, longitudinal graphs are presented for the total ACOS score and the average scores for each subscale, indicating if there have been any changes in these scores over time. A meaningful change in overall severity is defined as a change of 6 or more points in the total ACOS score based on a Minimally Important Difference (MID) calculation (i.e., a 6 or more point increase indicates a significant increase; a 6 or more point decrease indicates significant reduction; and less than a 6 point change indicates no significant change).

ADHD Clinical Outcome Scale (ACOS) Score



ADHD Clinical Outcome Scale (ACOS) Average Scores



Supporting Information

Percentile Calculations

The mean total ACOS score for the Self-Report version was 38.99 (SD = 12.1) (Adamis et al., 2024). NovoPsych has used this mean and standard deviation to convert ACOS scores to percentiles, as shown in Table 1, according to the following equation.

$$Percentile = 100 \times \Phi((x - M)/SD)$$

Where:

- x is the score
- M is the mean
- SD is the standard deviation
- Φ is the standard normal cumulative distribution function

This equation first standardises the score to a z-score by subtracting the mean and dividing by the standard deviation, then converts the z-score to a percentile by applying the standard normal cumulative distribution function and multiplying by 100.

The percentiles contextualise each score relative to typical scores among adults with ADHD, offering a clearer perspective on how the respondent's severity level compares to that of adults with ADHD.

Percentile Table

Table 1. Percentiles for total ACOS scores relative to adults with ADHD.

Total Descriptor	Total Score	Total Percentile
	0	0.06
	1	0.08
	2	0.11
	3	0.15
	4	0.19
	5	0.25
	6	0.32
	7	0.41
Minor	8	0.5
	9	0.7
	10	0.8
	11	1
	12	1.3
	13	1.6
	14	1.9
	15	2.4
	16	2.9
	17	3.5
	18	4
	19	5
	20	6
	21	7
	22	8
Mild	23	9
	24	11
	25	12
	26	14
	27	16
	28	18
	29	20
	30	23
	31	25
	32	28
	33	31
	34	34
	35	37
	36	40

	37	43
Moderately Severe	38	47
	39	50
	40	53
	41	57
	42	60
	43	63
	44	66
	45	69
	46	72
	47	75
	48	77
	49	80
	50	82
	51	84
	52	86
Severe	53	88
	54	89
	55	91
	56	92
	57	93
	58	94
	59	95
	60	96
	61	96.6
	62	97.1
	63	97.6
	64	98.1
	65	98.4
	66	98.7
	67	99
Very Severe	68	99.2
	69	99.3
	70	99.5
	71	99.59
	72	99.68
	73	99.75
	74	99.81
	75	99.85

Descriptors

In addition to percentile rankings, NovoPsych has established qualitative descriptors for specific ranges of the total ACOS score and ACOS subscale scores.

Each descriptor corresponds to a specific range of average scores reflecting the 6-point rating scale. The overall average score is calculated by dividing the total ACOS score by the number of items in the scale (i.e., 15). The average score for each subscale is calculated by dividing the subscale's score by the number of items in the subscale. The descriptors and corresponding score ranges are as follows.

- "No Problem" (average score of 0-0.49) (total score of 0-7)
- "Minor" (average score of 0.5-1.49) (total score of 8-22)
- "Mild" (average score of 1.5-2.49) (total score of 23-37)
- "Moderately Severe" (average score of 2.5-3.49) (total score of 38-52)
- "Severe" (average score of 3.5-4.49) (total score of 53-67)
- "Very Severe" (average score of 4.5-5) (total score of 68-75)

The score ranges, and corresponding percentiles, are highlighted in different colours in Table 1.

Interpretive Text

The interpretive text for the ACOS follows a structured format that adapts based on the respondent's scores. The text begins with an overall statement about the respondent's ADHD symptoms and challenges, categorising their total score into one of six severity ranges: No (or "-"), Minor, Mild, Moderately Severe, Severe, or Very Severe. This statement includes a specific percentile comparison to a reference group of adults with ADHD.

> *"The responses on the ADHD Clinical Outcome Scale (ACOS) indicate that the respondent has been experiencing <"No" | "Minor" | "Mild" | "Moderately Severe" | "Severe" | "Very Severe"> symptoms and challenges associated with ADHD in the past 2 weeks. The total ACOS score is on the XXst/nd/rd/th percentile when compared to adults with ADHD."*

Additional context is then provided based on the classification of the total score.

For No/"-" scores:

> *"A score in this range indicates that, overall, the respondent has been experiencing no or few problems associated with ADHD."*

For Minor scores:

> *"A score in the "Minor" range indicates that, overall, the level of severity is below what is typically experienced by adults with ADHD."*

For Mild scores, the interpretation varies based on the percentile:

> Below 25th percentile:
> *"A score in this range indicates that, overall, the respondent has been experiencing mild problems, but the level of severity is below what is typically experienced by adults with ADHD."*
>
> 25th percentile or higher:
> *"A score in this range indicates that, overall, the respondent has been experiencing mild problems at a level that is consistent with adults with ADHD."*

For Moderately Severe scores, the interpretation varies based on the percentile:

> 75th percentile or lower:
> *"A score in this range indicates that, overall, the respondent has been experiencing moderately severe problems at a level that is consistent with adults with ADHD."*
>
> Above 75th percentile:
> *"A score in this range indicates that, overall, the respondent has been experiencing moderately severe problems at a level that is above what is typically experienced by adults with ADHD."*

For Severe or Very Severe scores:

> *"A score in this range indicates that, overall, the respondent has been experiencing <"severe" | "very severe"> problems associated with ADHD, and that their score falls within the top XX percent when compared to adults with ADHD."*

For repeated/follow-up assessments, the text includes information about changes since the initial assessment. This includes the direction and magnitude of change in the total score, interpreted against a calculated Minimally Important Difference (MID) threshold that defines clinically meaningful change.

> *"Since the respondent was first assessed on [Date], the overall severity of symptoms and challenges associated with ADHD has <"significantly decreased" | "not changed significantly" | "significantly increased">, with a X point <"change" | "decrease" | "increase"> in the score. A meaningful change in overall severity is defined as a change in the total ACOS score of X or more points based on a Minimally Important Difference (MID) calculation."*

The text then describes any subscales that score in the Moderately Severe, Severe, or Very Severe ranges (hereafter referred to as "notable" subscales). These subscales are presented in order of severity, first by classification (Very Severe followed by Severe then Moderately Severe) and then by average score.

The names of the four subscales are:
- Attention and Functional Difficulties
- Hyperactivity/Impulsivity and Emotional Dysregulation
- Co-occurring Mental Health Problems
- Risk Behaviours and Interpersonal Problems

For each notable subscale, the text includes:
- The subscale's classification
- The subscale's items and their ratings, presented in order of severity

> *"The responses on the <**Subscale Name**> subscale indicate that the respondent has been experiencing <"Moderately Severe" | "Severe" | "Very Severe"> problems in the past 2 weeks. The items were rated as follows:"*

Special consideration is given to the self-harm item/question (Item 9) if it receives a rating/score greater than zero. If so, the score is classified as Minor, Mild, Moderately Severe, Severe, or Very Severe and is described in the interpretive text.

> *"The response to Item 9 indicates <"Minor" | "Mild" | "Moderately Severe" | "Severe" | "Very Severe"> problems relating to **self-harm**. It is recommended that the respondent and their clinician discuss this further to determine any necessary support or next steps."*

Developer

Adamis, D., Singh, J., Coada, I., Wrigley, M., Gavin, B., & McNicholas, F. (2024). Measuring clinical outcomes in adult ADHD clinics: Psychometrics of a new scale, the adult ADHD Clinical Outcome Scale. BJPsych Open, 10(6), e180. https://doi.org/10.1192/bjo.2024.739

References

Adamis, D., Singh, J., Coada, I., Wrigley, M., Gavin, B., & McNicholas, F. (2024). Measuring clinical outcomes in adult ADHD clinics: Psychometrics of a new scale, the adult ADHD Clinical Outcome Scale. BJPsych Open, 10(6), e180. https://doi.org/10.1192/bjo.2024.739

Assessment Questions

NovoPsych

ADHD Clinical Outcome Scale - Self-Report Version (ACOS-Self)

Instructions:

During the past 2 weeks, how troubled have you been by

		Not at all	A little	Somewhat	A lot	Very much	Extremely
1	Hyperactivity /restlessness	0	1	2	3	4	5
2	Pay attention when doing things	0	1	2	3	4	5
3	Temper /anger outburst	0	1	2	3	4	5
4	Problems with alcohol and drugs	0	1	2	3	4	5
5	Ups and downs in your mood	0	1	2	3	4	5
6	Organising things	0	1	2	3	4	5
7	Impulsivity	0	1	2	3	4	5
8	Tension in relationships	0	1	2	3	4	5
9	Self-harm	0	1	2	3	4	5
10	Postponing things	0	1	2	3	4	5
11	Anxiety problems	0	1	2	3	4	5
12	Depression problems	0	1	2	3	4	5
13	Sleep problems	0	1	2	3	4	5
14	Study / work difficulties	0	1	2	3	4	5
15	Difficulties in the everyday personal life	0	1	2	3	4	5

Developer Reference:

Adamis, D., Singh, J., Coada, I., Wrigley, M., Gavin, B., & McNicholas, F. (2024). Measuring clinical outcomes

NovoPsych

in adult ADHD clinics: Psychometrics of a new scale, the adult ADHD Clinical Outcome Scale. BJPsych Open, 10(6), e180. https://doi.org/10.1192/bjo.2024.739

Administer Now

Assessment powered by NovoPsych

Sample Results

Assessment powered by NovoPsych

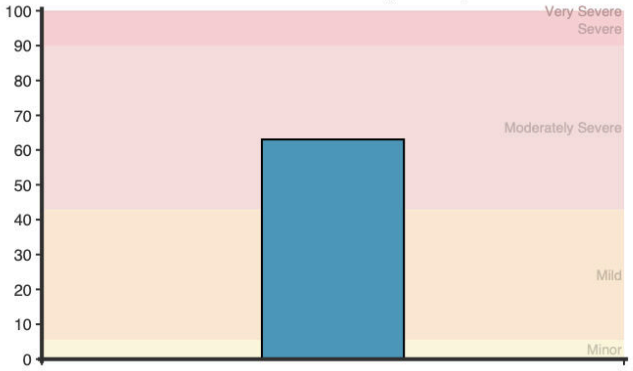
ADHD Clinical Outcome Scale - Self-Report Version (ACOS-Self)

Client Name	Generic Client	*Date administered*	4 Nov 2024
Date of birth (age)	1 Jan 1990 (34)	*Time taken*	2 min 58s
Assessor	Dr Simon Baker		

Total ACOS Score

	Score	Percentile	Descriptor
Total ACOS (0-75)	43	63	Moderately Severe

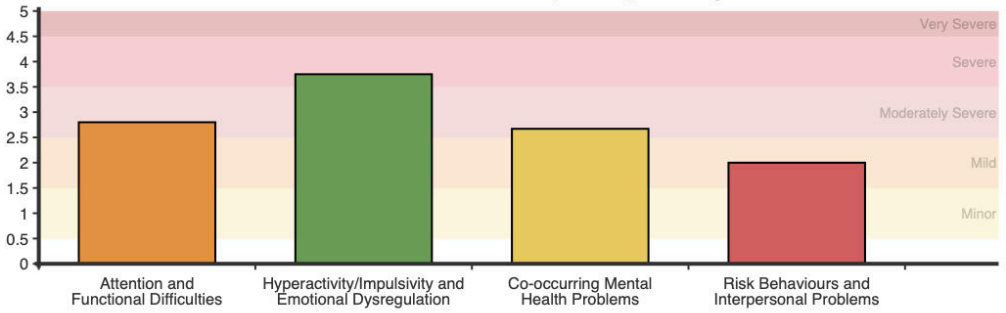
ADHD Clinical Outcome Scale (ACOS) Percentile



Subscale Scores

	Score	Average (0-5)	Descriptor
Attention and Functional Difficulties (0-25)	14	2.8	Moderately Severe
Hyperactivity/Impulsivity and Emotional Dysregulation (0-20)	15	3.75	Severe
Co-occurring Mental Health Problems (0-15)	8	2.67	Moderately Severe
Risk Behaviours and Interpersonal Problems (0-15)	6	2	Mild

ADHD Clinical Outcome Scale (ACOS) Average Scores



Assessment powered by NovoPsych

Client Name	Generic Client

Interpretation

The responses on the ADHD Clinical Outcome Scale (ACOS) indicate that the respondent has been experiencing Moderately Severe symptoms and challenges associated with ADHD in the past 2 weeks. The total ACOS score is on the 63rd percentile when compared to adults with ADHD. A score in this range indicates that, overall, the respondent has been experiencing moderately severe problems at a level that is consistent with adults with ADHD.

The responses on the **Hyperactivity/Impulsivity and Emotional Dysregulation** subscale indicate that the respondent has been experiencing Severe problems in the past 2 weeks. The items were rated as follows:
- *1. Hyperactivity /restlessness (Very much)*
- *5. Ups and downs in your mood (Very much)*
- *7. Impulsivity (Very much)*
- *3. Temper /anger outburst (A lot)*

The responses on the **Attention and Functional Difficulties** subscale indicate that the respondent has been experiencing Moderately Severe problems in the past 2 weeks. The items were rated as follows:
- *2. Pay attention when doing things (A lot)*
- *6. Organising things (A lot)*
- *10. Postponing things (A lot)*
- *15. Difficulties in the everyday personal life (A lot)*
- *14. Study / work difficulties (Somewhat)*

The responses on the **Co-occurring Mental Health Problems** subscale indicate that the respondent has been experiencing Moderately Severe problems in the past 2 weeks. The items were rated as follows:
- *11. Anxiety problems (A lot)*
- *12. Depression problems (A lot)*
- *13. Sleep problems (Somewhat)*

Scoring and Interpretation Information

For comprehensive information on the ADHD Clinical Outcome Scale (ACOS) - Self-Report Version, see here.

The ADHD Clinical Outcome Scale (ACOS) yields a total score between 0 and 75, with higher scores indicating a greater severity of symptoms and challenges associated with ADHD. Each item is rated on a 6-point Likert-type scale from 0 to 5 reflecting the degree to which the individual has experienced a specific problem in the past 2 weeks.

The respondent's total ACOS score is expressed as a percentile based on normative data for adults with ADHD (Adamis et al., 2020; Baker et al., 2024), contextualising their score relative to the typical scores of adults with ADHD. For example, the 50th percentile represents the typical level of severity among adults with ADHD (i.e., "Moderately Severe"), while scores on the 90th percentile fall within the top 10% when compared to adults with ADHD and are considered "Severe".

Scores are also provided for the scale's four subscales:

- Attention and Functional Difficulties (Items 2, 6, 10, 14, and 15), which includes difficulties with

Assessment powered by NovoPsych

Client Name	Generic Client

Scoring and Interpretation Information (cont.)

attention, organisation, procrastination, work, and everyday life.

- Hyperactivity/Impulsivity and Emotional Dysregulation (Items 1, 3, 5, and 7), which includes hyperactivity/restlessness, impulsivity, emotional fluctuation (ups and downs in mood), and temper/anger outbursts.

- Co-occurring Mental Health Problems (Items 11, 12, and 13), which includes anxiety, depression, and sleep problems.

- Risk Behaviours and Interpersonal Problems (Items 4, 8, and 9), which includes alcohol and drug use problems, self-harm, and tension in relationships.

The scoring approach uses qualitative descriptors to categorise ACOS scores (Baker et al., 2024). Each descriptor corresponds to a specific range of average scores reflecting the 6-point rating scale. The overall average score is calculated by dividing the total ACOS score by the number of items in the scale (i.e., 15). The average score for each subscale is calculated by dividing the subscale's score by the number of items in the subscale. The descriptors and corresponding score ranges are as follows.

- "No Problem" (average score of 0-0.49) (total score of 0-7)

- "Minor" (average score of 0.5-1.49) (total score of 8-22)

- "Mild" (average score of 1.5-2.49) (total score of 23-37)

- "Moderately Severe" (average score of 2.5-3.49) (total score of 38-52)

- "Severe" (average score of 3.5-4.49) (total score of 53-67)

- "Very Severe" (average score of 4.5-5) (total score of 68-75)

On first administration, graphs are presented showing the respondent's total ACOS as a percentile and the respondent's average score for each subscale. If administered more than once, longitudinal graphs are presented for the total ACOS score and the average scores for each subscale, indicating if there have been any changes in these scores over time. A meaningful change in overall severity is defined as a change of 5 or more points in the total ACOS score based on a Minimally Important Difference (MID) calculation (i.e., a 5 or more point increase indicates a significant increase; a 5 or more point decrease indicates significant reduction; and less than a 5 point change indicates no significant change).

Client Responses

		Not at all	A little	Somewhat	A lot	Very much	Extremely
1	Hyperactivity /restlessness	**0**	**1**	**2**	**3**	**4**	**5**

Assessment powered by
NovoPsych

Client Name	Generic Client

Client Responses (cont.)

		Not at all	A little	Somewhat	A lot	Very much	Extremely
2	Pay attention when doing things	0	1	2	**3**	4	5
3	Temper /anger outburst	0	1	2	**3**	4	5
4	Problems with alcohol and drugs	0	1	2	**3**	4	5
5	Ups and downs in your mood	0	1	2	3	**4**	5
6	Organising things	0	1	2	**3**	4	5
7	Impulsivity	0	1	2	3	**4**	5
8	Tension in relationships	0	1	2	**3**	4	5
9	Self-harm	**0**	1	2	3	4	5
10	Postponing things	0	1	2	**3**	4	5
11	Anxiety problems	0	1	2	**3**	4	5
12	Depression problems	0	1	2	**3**	4	5
13	Sleep problems	0	1	**2**	3	4	5
14	Study / work difficulties	0	1	**2**	3	4	5
15	Difficulties in the everyday personal life	0	1	2	**3**	4	5

Assessment powered by
NovoPsych

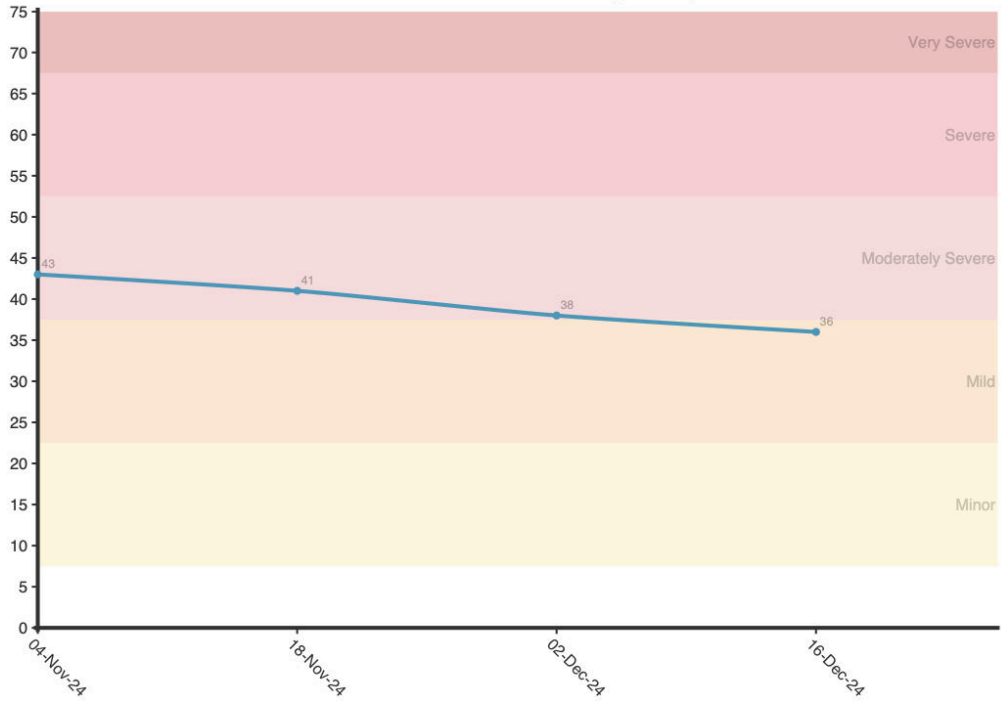
ADHD Clinical Outcome Scale - Self-Report Version (ACOS-Self)

Client Name	Generic Client	*Date administered*	16 Dec 2024
Date of birth (age)	1 Jan 1990 (34)	*Time taken*	2 min 36s
Assessor	Dr Simon Baker		

Total ACOS Score

	Score	Percentile	Descriptor
Total ACOS (0-75)	36	40	Mild

ADHD Clinical Outcome Scale (ACOS) Score



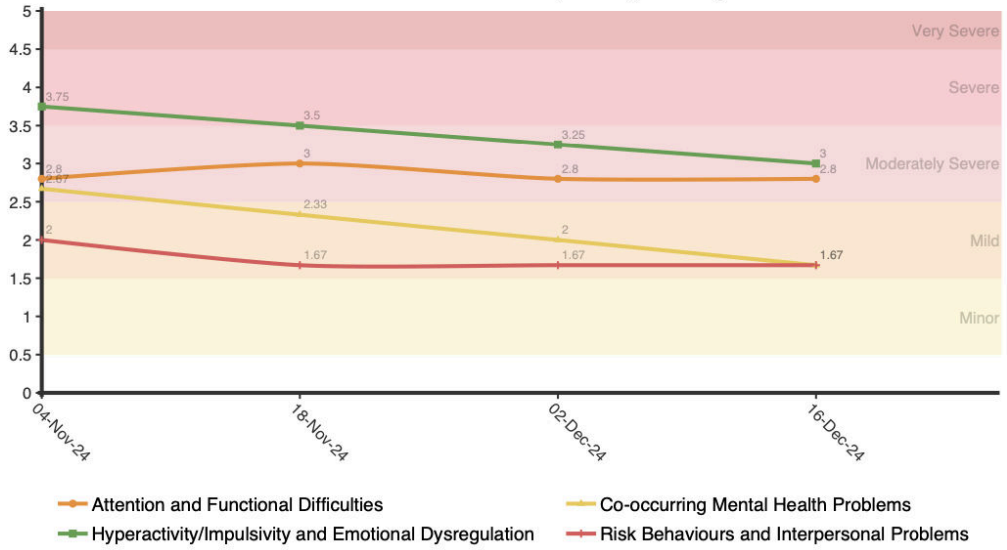
Assessment powered by
NovoPsych

Client Name	Generic Client

Subscale Scores

	Score	Average (0-5)	Descriptor
Attention and Functional Difficulties (0-25)	14	2.8	Moderately Severe
Hyperactivity/Impulsivity and Emotional Dysregulation (0-20)	12	3	Moderately Severe
Co-occurring Mental Health Problems (0-15)	5	1.67	Mild
Risk Behaviours and Interpersonal Problems (0-15)	5	1.67	Mild

ADHD Clinical Outcome Scale (ACOS) Average Scores



Interpretation

The latest responses on the ADHD Clinical Outcome Scale (ACOS) indicate that the respondent has been experiencing Mild symptoms and challenges associated with ADHD in the past 2 weeks. The total ACOS score is on the 40th percentile when compared to adults with ADHD. A score in this range indicates that, overall, the respondent has been experiencing mild problems at a level that is consistent with adults with ADHD.

Since the respondent was first assessed on 04 November 2024, the overall severity of symptoms and challenges associated with ADHD has significantly decreased, with a 7 point decrease in the score. A meaningful change in overall severity is defined as a change in the total ACOS score of 6 or more points based on a Minimally Important Difference (MID) calculation.

The responses on the **Attention and Functional Difficulties** subscale indicate that the respondent has been experiencing Moderately Severe problems in the past 2 weeks. The items were rated as follows:

Assessment powered by NovoPsych

Client Name	Generic Client

Interpretation (cont.)

- 2. Pay attention when doing things (A lot)
- 6. Organising things (A lot)
- 10. Postponing things (A lot)
- 15. Difficulties in the everyday personal life (A lot)
- 14. Study / work difficulties (Somewhat)

The responses on the **Hyperactivity/Impulsivity and Emotional Dysregulation** subscale indicate that the respondent has been experiencing Moderately Severe problems in the past 2 weeks. The items were rated as follows:
- 1. Hyperactivity /restlessness (A lot)
- 3. Temper /anger outburst (A lot)
- 5. Ups and downs in your mood (A lot)
- 7. Impulsivity (A lot)

Scoring and Interpretation Information

For comprehensive information on the ADHD Clinical Outcome Scale (ACOS) - Self-Report Version, see here.

The ADHD Clinical Outcome Scale (ACOS) yields a total score between 0 and 75, with higher scores indicating a greater severity of symptoms and challenges associated with ADHD. Each item is rated on a 6-point Likert-type scale from 0 to 5 reflecting the degree to which the individual has experienced a specific problem in the past 2 weeks.

The respondent's total ACOS score is expressed as a percentile based on normative data for adults with ADHD (Adamis et al., 2020; Baker et al., 2024), contextualising their score relative to the typical scores of adults with ADHD. For example, the 50th percentile represents the typical level of severity among adults with ADHD (i.e., "Moderately Severe"), while scores on the 90th percentile fall within the top 10% when compared to adults with ADHD and are considered "Severe".

Scores are also provided for the scale's four subscales:

- Attention and Functional Difficulties (Items 2, 6, 10, 14, and 15), which includes difficulties with attention, organisation, procrastination, work, and everyday life.

- Hyperactivity/Impulsivity and Emotional Dysregulation (Items 1, 3, 5, and 7), which includes hyperactivity/restlessness, impulsivity, emotional fluctuation (ups and downs in mood), and temper/anger outbursts.

- Co-occurring Mental Health Problems (Items 11, 12, and 13), which includes anxiety, depression, and sleep problems.

- Risk Behaviours and Interpersonal Problems (Items 4, 8, and 9), which includes alcohol and drug use problems, self-harm, and tension in relationships.

The scoring approach uses qualitative descriptors to categorise ACOS scores (Baker et al., 2024). Each descriptor corresponds to a specific range of average scores reflecting the 6-point rating scale. The overall average score is calculated by dividing the total ACOS score by the number of items in the scale (i.e., 15). The average score for each subscale is calculated by

Assessment powered by NovoPsych

Client Name	Generic Client

Scoring and Interpretation Information (cont.)

dividing the subscale's score by the number of items in the subscale. The descriptors and corresponding score ranges are as follows.

- "No Problem" (average score of 0-0.49) (total score of 0-7)

- "Minor" (average score of 0.5-1.49) (total score of 8-22)

- "Mild" (average score of 1.5-2.49) (total score of 23-37)

- "Moderately Severe" (average score of 2.5-3.49) (total score of 38-52)

- "Severe" (average score of 3.5-4.49) (total score of 53-67)

- "Very Severe" (average score of 4.5-5) (total score of 68-75)

On first administration, graphs are presented showing the respondent's total ACOS as a percentile and the respondent's average score for each subscale. If administered more than once, longitudinal graphs are presented for the total ACOS score and the average scores for each subscale, indicating if there have been any changes in these scores over time. A meaningful change in overall severity is defined as a change of 5 or more points in the total ACOS score based on a Minimally Important Difference (MID) calculation (i.e., a 5 or more point increase indicates a significant increase; a 5 or more point decrease indicates significant reduction; and less than a 5 point change indicates no significant change).

Client Responses

		Not at all	A little	Somewhat	A lot	Very much	Extremely
1	Hyperactivity /restlessness	0	1	2	**3**	4	5
2	Pay attention when doing things	0	1	2	**3**	4	5
3	Temper /anger outburst	0	1	2	**3**	4	5
4	Problems with alcohol and drugs	0	1	**2**	3	4	5
5	Ups and downs in your mood	0	1	2	**3**	4	5
6	Organising things	0	1	2	**3**	4	5
7	Impulsivity	0	1	2	**3**	4	5
8	Tension in relationships	0	1	2	**3**	4	5

Assessment powered by
NovoPsych

Client Name	Generic Client

Client Responses (cont.)

		Not at all	A little	Somewhat	A lot	Very much	Extremely
9	Self-harm	**0**	1	2	3	4	5
10	Postponing things	0	1	2	**3**	4	5
11	Anxiety problems	0	1	**2**	3	4	5
12	Depression problems	0	1	**2**	3	4	5
13	Sleep problems	0	**1**	2	3	4	5
14	Study / work difficulties	0	1	**2**	3	4	5
15	Difficulties in the everyday personal life	0	1	2	**3**	4	5