

Measuring what matters: learning from goal-based outcomes data analysis

CORC Regional Seminar Series: April 2019



Plan for this talk

- Background
- Research questions:
 - What goals are being set?
 - How to measure with rigour
 - How to consider goals alongside standardised measures
- How we addressed the research gap
- Implications
- Discussion



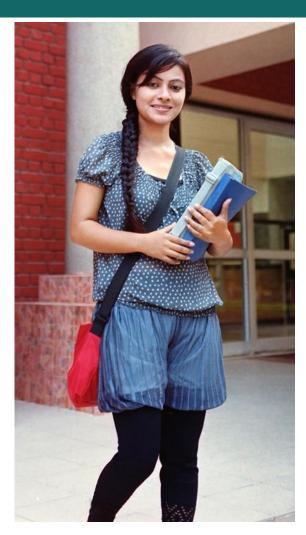
Background

- Mental health is a latent construct, no "hard" outcomes (Wolpert et al., 2014)
- Range of measures available
- Standardised measures might not capture all aspects of care, e.g. coping, resilience
 - Important especially when symptoms not expected to improve (Batty et al., 2013)
- Challenge of idiographic measures
 - How to analyse the data
 - How do they fit with standardised measurement?



Background: Value of tracking goals

- Good face validity (Toto et al., 2015;
 Levack et al., 2015; Moran et al., 2012)
- Most people want to set goals (Cooper & Norcross, 2016)
- Increased communication and shared agreement
- Motivates patients to participate in care discussions
- Parents of children with goals are more likely to be satisfied with care (Jacob et al., 2015)
- Person centred

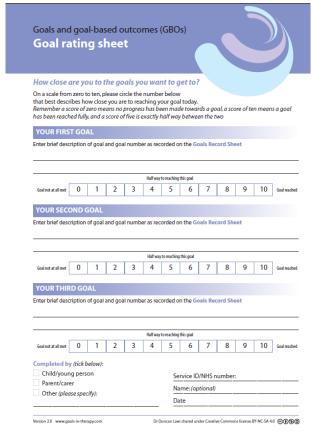




Background: Goal-Based Outcome Tool

Goal-Based Outcome Tool (GBO)

Goals and	goal-based outcomes	(GROs)
	cord sheet	(GBOS)
Cours	.cord slicet	
In coming to the	nis service, what are some of	the problems you
	or goals you want to get to	
Goal Number	Goal Description	
1		
2		
3		
If you have any of	her goals, please list them here	
Completed by (
Parent/carer Other (please specify):		Service ID/NHS number:
		Name: (optional)
		Date





What goals are being set: Background

- Need to know what goals are set at the outset of therapy
- No other published taxonomies based on GBO
- Adult taxonomies e.g. (Grosse Holtforth & Grawe, 2002)





- Three taxonomies: child-led goals, parent-led goals, jointly agreed goals
- Child led:
 - 3 Overarching themes:
 - Relationship/interpersonal: listening and understanding
 - Coping with specific problems and symptoms
 - Personal growth & functioning: understanding and improving self
 - 25 goal categories within these themes



- Three taxonomies: child-led goals, parent-led goals, jointly agreed goals
- Parent led:
 - 4 overarching themes:
 - Listening, talking, understanding and relationships
 - Managing specific difficulties
 - Improving self or life
 - Parent-specific goals
 - 19 subthemes within these themes



- Jointly agreed:
 - 5 overarching themes:
 - Managing specific issues
 - Talking and listening; communication with family and peers
 - Self-confidence and understanding; hopes for the future
 - Parent-specific goals
 - Hobbies
 - 19 sub themes within these themes



Most common themes:

Child-led

- 1. Managing negative mood
- 2. Confidence
- 3. Personal growth

Jointly agreed

- 1. Parent goals
- 2. Understanding, managing and expressing emotions
- 3. School and learning

Parent-led

- 1. Better sleep routine
- 2. "Inappropriate" behaviour
- 3. Strategies to manage behaviour



What goals are being set: Implications



- Taxonomies that can be used for data analysis
- Comparisons highlight the importance of ensuring the voice of the young person is heard and included in goal setting
- Further taxonomies created since,
 e.g. Rupani et al., 2013
- Recovery means different things to different people – goal setting provides opportunity for people to express what this looks like



How to measure with rigour: Background

- Bespoke nature of goals = difficult to aggregate
- Goals not been used for aggregate data analysis to date
- Need to consider a way to rigorously analyse goal data in line with standardised measures of outcome





How to measure with rigour: Findings

- Found more movement in goal change scores than in standardised measures of symptomology (SDQ) and global functioning (CGAS)
- Internal consistency .71 (T1) and .73 (T2) found
- Proxy of reliable change 2.45 points



How to measure with rigour: Implications

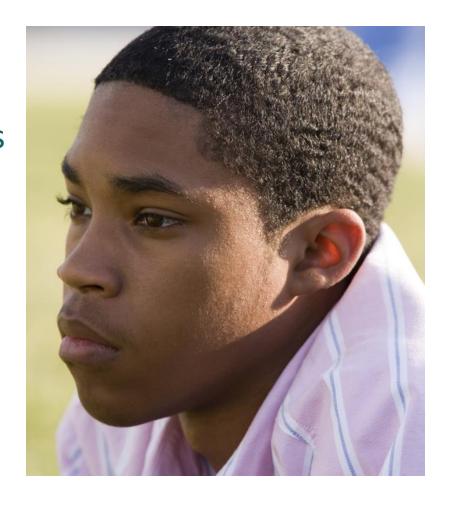
- More movement in goals because focus on patient's perception of recovery?
- Proxy of reliable change (3
 points to be conservative)
 "measurable change" to be
 trialled nationally by NHS
 England





How to consider: Background

- Recovery is bespoke to the individual
- Use of idiographic measures alongside standardised measures is encouraged (Edbrooke-Childs, et al., 2015; Wolpert, et al., 2014; Sales, et al., 2007; Green, 2016)
- What does that look like?





How to consider: Findings

• Mapped

Be calmer

Co-operation

Inappropriate behaviour

Be calmer

Hyperactivity

SDQ

SDQ

Parent framework only

to items on commonly used standardised measures

- Majority overlapped, some differences: existential factors, understanding, thinking and future planning
- Consider using goal theme to select standardised measure



How to consider: Implications

- Gain useful insight into what change might look like for the individual (e.g. 'good enough')
- May be helpful to track goals especially where symptoms are not expected to improve
- Could use goal content to choose measures for individualised outcome tracking
- Consider goals as both useful clinical feedback tools and as outcome measurement alongside other standardised outcome measures to ensure a breadth of information





Summary

- Important to think about purpose of using of goals and how to analyse data (e.g. by theme for individual/ team change or aggregate at higher level)
- Goal-based outcomes have a unique position alongside standardised measures
- Created taxonomies of child-led, parent-led and jointly agreed goals for data analysis
- Suggested a way to more rigorously analyse aggregate goal analysis (measurable change)
- To consider perceived recovery and how goals can help explore and measure it



Questions/comments



https://goals-intherapy.com/goals-and-goalsbased-outcomes-gbos/



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