



Original Research—CME

Patient-Centered Goal Setting in a Hospital-Based Outpatient Stroke Rehabilitation Center

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Abstract

Background: Goal-setting can have a positive impact on stroke recovery during rehabilitation. Patient participation in goal formulation can ensure that personally relevant goals are set, and can result in greater satisfaction with the rehabilitation experience, along with improved recovery of stroke deficits. This, however, not yet been studied in a stroke outpatient rehabilitation setting.

Objective: To assess patient satisfaction of meeting self-selected goals during outpatient rehabilitation following a stroke.

Design: Retrospective chart review.

Setting: Stroke patients enrolled in a multidisciplinary outpatient rehabilitation program, who set at least 1 goal during rehabilitation.

Participants: Patients recovering from a stroke received therapy through the outpatient rehabilitation program between January 2010 and December 2013.

Methods: Upon admission and discharge from rehabilitation, patients rated their satisfaction with their ability to perform goals that they wanted to achieve. Researchers independently sorted and labeled recurrent themes of goals. Goals were further sorted into International Classification of Functioning, Disability and Health (ICF) categories. To compare the perception of patients' goal satisfaction, repeated-measures analysis of variance was conducted across the 3 ICF goal categorizations.

Main Outcome Measure: Goal satisfaction scores.

Results: A total of 286 patients were included in the analysis. Patient goals concentrated on themes of improving hand function, mobility, and cognition. Goals were also sorted into ICF categories in which impairment-based and activity limitation–based goals were predominant. Compared to activity-based and participation-based goals, patients with impairment-based goals perceived greater satisfaction with meeting their goals at admission and discharge ($P < .001$). Patient satisfaction in meeting their first-, second-, and third-listed goals each significantly improved by discharge from the rehabilitation program ($P < .001$).

Conclusion: Within an outpatient stroke rehabilitation setting, patients set heterogeneous goals that were predominantly impairment based. Satisfaction in achieving goals significantly improved after receiving therapy. The type of goals that patients set were related to their goal satisfaction scores, with impairment-based goals being rated significantly higher than activity-based and participation-based goals.

Level of Evidence: III

Introduction

Rehabilitation is a multidisciplinary process that involves assessing impairment, setting goals, implementing rehabilitation techniques, and evaluating progress [1]. As a central tenant of rehabilitation, goal setting occurs when a patient and health care professional collectively decide on the outcomes that they would like to achieve during the patients' rehabilitation stay.

These outcomes are dependent on how and when rehabilitation interventions are carried out [1,2]. In stroke rehabilitation, both formal approaches (eg, documentation and follow-up of patient goals that often involve patient-reported grading systems to measure improvement) and informal approaches (eg, verbal discussions between the therapist and patients to determine the focus of therapy) to goal setting are used [3].

Previously, goal setting aligned with a biomedical model whereby decision making was often unilaterally driven by clinicians [4]; however, this approach often led to incongruent expectations between patients and clinicians. As a result, patients' goals were often unmet [5]. Goal setting has since shifted toward a "patient-centered" model that ensures that the rehabilitation plan takes into account the patient's needs and expectations while still adhering to clinical standards [6]. This process of setting goals involves health professionals, patients, and their family or caregiver, as appropriate [7]. Patient participation in goal formulation has been shown to have beneficial effects, resulting in the development of personally relevant goals, as well as greater satisfaction with the rehabilitation experience overall [8].

Both the 2013 Canadian Best Practice Recommendations for Stroke Care [9] and the 2010 American Heart Association [10] recommend that goal setting and treatment planning poststroke incorporate aspects of the International Classification Functioning, Disability and Health (ICF) framework. The ICF framework considers the following 3 categories: impairments to body structure and function; levels of activity; and participation [11]. In a subacute stroke rehabilitation setting, Leach et al [3] found that goals set by therapists were primarily based on level of impairment and activity limitations. In contrast, therapists described patients as being focused on achieving participation-based goals, although this was not measured within this study. Patient centered goal setting can be challenging, as patients may have difficulty understanding their own diagnosis, level of impairment, and opportunity for recovery, which often contributes to idealistic goals. Furthermore, goals targeting participation have been found to be challenging to establish within an inpatient setting, as they often are outside the context of a hospital [3,12].

The benefits of goal setting have been consistently demonstrated in the literature. Stroke survivors who achieve their rehabilitation goals are less likely to be depressed, demonstrate stronger self-efficacy beliefs, and have more positive perceptions of their participation within the community [13]. Conversely, nonattainment of goals has been shown to have a negative impact on patients' emotional well-being [14]. However, a patient's perception of attaining a goal can be a difficult construct to measure. The use of goal attainment measures has been criticized for involving potentially bias retrospective comparison of a patient's abilities before beginning rehabilitation. An alternative approach considers minimal clinically important differences in outcome measures administered during rehabilitation; however, this approach does not take into account what patients perceive to be a favorable outcome [15]. Because of these limitations, measuring patient satisfaction with the goals that they set during

rehabilitation has been one method applied to serve as a benchmark for patient success [16]. Specifically, measuring patients' satisfaction in their performance of specific goals both before beginning therapy and after therapy is a straightforward and realistic method of assessing patients' perception of their own progress. This method of assessing a patients' satisfaction with their abilities has been found to strongly correlate with patients' goal achievement, and has been put forth as a measurement method that can inform the value of health care [16,17].

Gaining an understanding of the types of goals that outpatients who have experienced a stroke commonly set during rehabilitation can help to ensure that rehabilitation is adequately designed for patients' needs, and that resources are appropriately available to help patients to achieve their goals. For example, understanding the goals that are commonly set by patients could ensure that appropriate therapists are available during outpatient rehabilitation. For clinical utility, we sought to gain both a focused understanding of the themes of goals and a broader conceptualization of patients' goals through categorizing themes of patient's goals in the impairment-based, activity limitation and participation based ICF groupings. Leach et al [3] have previously studied goal-setting practices within these 3 ICF framework categories in a small sample of stroke therapists; however, this has not yet been studied in stroke patients themselves. Furthermore, considering patients' satisfaction with their performance for specific goals that they set during rehabilitation has not been considered in an outpatient stroke sample. Therefore, our study sought to examine a large sample of patients with stroke deficits who were receiving hospital-based outpatient rehabilitation in an existing rehabilitation program. There were 3 objectives: to categorize the goals that patients wanted to achieve while in therapy; to classify patient goals within the ICF framework; and to compare patients' satisfaction scores on admission and discharge between ICF categories of goals.

Methods

This study was a retrospective chart review of individuals attending an outpatient stroke rehabilitation program. Ethics approval was obtained from the University of Western Ontario Research Ethics Board.

Rehabilitation Program and Dataset

The Department of Quality Management and Clinical Decision Support provided the chart numbers of all patients who were referred for therapy to the Comprehensive Outpatient Rehabilitation Program (CORP), a hospital-based, time-limited outpatient rehabilitation program in southwestern Ontario, Canada. Patients can

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