The Goal-Based Outcome (GBO) Tool Guidance Notes

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"Setting goals makes you see where you need to go, makes you see what you are working on and what still needs to be worked on." February 2019



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Quote on front cover from Bromley & Westwood (2013, p. 43)

THE GOAL-BASED OUTCOME (GBO) TOOL GUIDANCE NOTES

Introduction

The goal-based outcomes (GBO) tool is a simple and effective method to measure progress and outcomes of an intervention. It grew out of work with children, young people and their families in mental health and emotional well-being settings but can be used in any setting, that is change-focused and goal-oriented – including adult and physical health contexts.

The tool tracks what is arguably *the* most important thing to measure in any intervention: "Is this helping you make progress towards the things that you really want help with?"

The term 'young person' is used throughout this document. It is used as shorthand to refer to any young person: 'child,' youth,' parent/carer', 'adult', who may come into contact with your service.

These notes are intended to give brief, essential guidance in using the GBO tool – for more detailed information on the GBO goals and goal-oriented practice, links to resources, further reading and different language versions of the GBO please visit www.goals-in-therapy.com.

This guidance is adapted and updated from Law and Jacob (2015) and Law (2018).

Guidance Notes

1. The goal-based outcome (GBO) tool

- The GBO tool is a simple and effective method to *measure progress* and outcomes of an intervention
- It can be used in any setting that is change-focused and goal-oriented
- It can be used to track progress **session-by-session**, or just as an **outcome tool**
- The GBO is a tool that *measures the changes most important to the person* you are working with
- The tool was devised in *children and youth mental health* services in the UK but has been used successfully **internationally** and across *adult and physical health* settings

2 Shaping and setting goals

- Goals should be agreed collaboratively between the therapist, counsellor, clinician or practitioner, working with the young person or family and the person asking for help
- Once a goal has been set it is possible to use any suitable (preferably evidence based) intervention to reach it
- The first step is to *identify potential goals* and then shape these into agreed goals for the intervention
- At the point where you feel the young person/family have told you enough initial information, it can be helpful to **start to introduce goals** by saying something along the lines of:
 - "That has been really useful to help me understand a little about what has brought you here today; next it might be helpful for us to think together about what your hopes for the future might be"
- What comes out of the following discussion can begin to be **shaped into goals**:
 - "So, from what you have told me so far, what would you say your main goals are from coming to this service? If we were to work together in a very helpful way, when we agree to stop meeting, what things would you hope to be different by that time, from how things are now?"
- Once a goal has been agreed it is useful to *write it down* in a sentence that summarises it ideally *using the young person's own language*
- **Helpful goals** tend to be future-focused, positively framed and realistic

- Goals could focus on:
 - Change goals goals that focus on something someone wants to be different or change in their lives – most therapy goals are 'change goals'
 - **Learning goals** getting ideas that might help with the issues even if these might not lead to (immediate) change
 - Exploration or understanding goals these might be goals that focus on the young person wanting to understand themselves better, or to explore who they are. These may lead to change but this is not the primary focus of the work
- Make sure the goal is **safe** for the young person and others
- Set up to three goals
- You can write the agreed goals on the GBO 'goals record sheet'

3 Rating goals

Once a goal has been set the next step is to get the initial (time 1 or baseline)
 rating for the goal. You may want to say something like:

"Ok, now we have agreed the goals you want to work on, it would be helpful to get an idea of where you are now with each of the goals. This will help us get an idea of where we are starting from, and what you have already managed to achieve, and it can help us keep track of how far you have moved on, at a later date"

- You may want to specify at this point how often you would expect to review progress towards the goal – every session, at review, at the end of the intervention, etc.
- You can *invite the young person to rate their goals* by saying something like:
 - "Taking your first goal: on a scale from zero to ten, where ten means that you have fully reached your goal, and zero means you haven't even begun to make progress towards it, and a score of five is exactly half way between the two, today what rating would you give your current progress towards this goal?"
- It can help to *make the scale visual* by showing the young person the GBO rating sheet with the numbers on, or by drawing a line on paper or a white board
- Younger children might prefer a visual metaphor such as a ladder with the numbers 0 – 10 on the rungs
- It is important to *have the ending of therapy in mind* at the first rating of goals. Make sure the young person understands that you do not expect goals to reach ten-out-of-ten, but you intend the work to help them move at least a little way along the scale
- Write the agreed ratings on the **GBO goal rating sheet**

4 If goals change

- **Goals can change** during the course of an intervention and the work should change focus accordingly, if this is helpful
- Use your *clinical judgement*, in conversation with the young person, before a
 decision to change focus is agreed
- Consider how *clinically helpful* it really is, if goals change regularly throughout an intervention
- It can be helpful to *discuss potential changes* in goals with a supervisor or a colleague
- Depending on the type of intervention you are working on with a young person, you may want to formally reset the goals and start rating the new goals
- Use your judgement as to whether it is helpful to continue rating the original goals

5 Session-by-session monitoring of goals

- Goals can be rated every session using the GBO to track progress throughout an intervention
- Use your judgement, in conversation with the young person, about when in a session the *right time to rate goals might be* – usually this would be in the first half of an appointment
- It might be helpful to introduce rating of goals each session by saying:
 - "OK, let's have a look at where you feel you are now, with the goals we agreed on at the start of the work together. Let's look at goal one first, which was to... (insert goal summary sentence) on a scale from zero to ten...etc..., today how would you rate your progress on that goal?"
- Once the rating has been obtained it may be helpful to compare it to last week's rating and discuss as appropriate
- Keep a record of progress by writing the ratings on the GBO goal progress
 chart
- By connecting the ratings on the GBO goal progress chart you can create a simple run chart that can be shared with the young person and/or in supervision
- Tracking and discussing progress regularly allows the therapist and young person to monitor progress together

- When using the GBO session-by-session, the intention should be to rate goals
 every time you meet with the young person. However, there may be times
 when it is not possible, or when it does not feel clinically helpful to rate goals in
 a session use your clinical judgement, in conversation with the young person,
 to decide whether to skip rating for a session
- Sharing the information in sessions can lead to helpful discussions about
 what, and who is helping the young person to reach a goal and how this
 progress can be maintained. Conversely it can flag if there appears to be no
 progress, or if things appear to be moving away from a goal. This can lead to
 helpful discussions about what or who else might help

6 Lack of progress towards goals

- If there is a *lack of progress towards goals* it can be helpful to revisit the goals themselves:
 - Are the goals set at the start of therapy still **relevant to the young person?**
 - Has the context around the young person changed and affected their goals?
 - Are the goals **too ambitious?**
 - Are they **focused** enough?
 - Does the young person understand how the therapy might help them reach their goals?

7 Psychometric properties

- The GBO is an 'ideographic' measure, this means that as everyone's goals are different and unique to them, so what is measured using the GBO is unique or particular to that person
- The GBO scoring is 'ipsative', meaning that changes in ratings are compared to the initial ratings by the person. You are comparing the ratings with themselves, rather than with some external 'objective' change score
- The tool has good 'face validity', in that it makes sense to people using it, that
 it is measuring progress to their goals
- Changes in GBO ratings have been shown to correlate well with symptom change measures using other tools such as the SDQ (see Wolpert et al 2012)
- The GBO has a suggested reliable change index (RCI) of 2.45. (Edbrooke-Childs et al. 2015)



In coming to this service, what are some of the problems you want help with or goals you want to get to? (List up to three goals)

Goal Number	Goal Description	
1		
2		
3		
If you have any o	ther goals, please list them here	
Completed by (Service ID/NHS number:
Other (please specify):		Name: (optional) Date



How close are you to the goals you want to get to?

On a scale from zero to ten, please circle the number below that best describes how close you are to reaching your goal today.

Remember a score of zero means no progress has been made towards a goal, a score of ten means a goal has been reached fully, and a score of five is exactly half way between the two

	T GO	AL										
Enter brief des	cription	of goal a	and goa	l numbe	er as reco	orded o	n the G o	oals Rec	ord She	eet		
					Half way 1	to reaching	this goal					
Goal not at all met	0	1	2	3	4	5	6	7	8	9	10	Goal reache
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inter brief des	cription	of goal a	and goa	l numbe	er as reco	orded o	n the G o	oals Red	ord She	eet		
					Half way	to reaching	this goal					
Goal not at all met	0	1	2	3	4	5	6	7	8	9	10	Goal reache
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		of goal a	and goa		er as reco	oraea o	n the Go	ouis nec				
		of goal a	and goa			to reaching		Juis nec				
		of goal a	and goa	3				7	8	9	10	Goal reache
Enter brief deso	cription 0	1			Half way 1	to reaching	this goal				10	Goal reache
Goal not at all met	0 y (tick b	1 pelow):			Half way 1	to reaching 5	this goal	7	8	9	10	Goal reache
Goal not at all met Completed b Child/you	0 y (tick b	1 pelow):			Half way 1	to reaching 5	this goal	7		9	10	Goal reache
Goal not at all met	0 y (tick b	1 pelow): on			Half way 1	to reaching 5 Se	this goal 6 rvice ID	7	8	9	10	Goal reached

Goals and goal-based outcomes (GBOs) Goal progress chart

This is one of up to three goals to track.

You can turn this chart on its side for a quick look at progress over the sessions.

Goal No:

GOAL:

Session	Date Today I would rate progress to this goal: (please circle the appropriate number below)								v)			
		Remember a score of zero means no progress has been made towards a goal, a score of ten means a goal has been reached fully, and a score of five is exactly half way between the two										
1		0	1	2	3	4	5	6	7	8	9	10
2		0	1	2	3	4	5	6	7	8	9	10
3		0	1	2	3	4	5	6	7	8	9	10
4		0	1	2	3	4	5	6	7	8	9	10
5		0	1	2	3	4	5	6	7	8	9	10
6		0	1	2	3	4	5	6	7	8	9	10
7		0	1	2	3	4	5	6	7	8	9	10
8		0	1	2	3	4	5	6	7	8	9	10
9		0	1	2	3	4	5	6	7	8	9	10
10		0	1	2	3	4	5	6	7	8	9	10
11		0	1	2	3	4	5	6	7	8	9	10
12		0	1	2	3	4	5	6	7	8	9	10

Whose goal is this (tick below):	Service ID/NHS number:					
Child/young person						
☐ Parent/Carer						
Practitioner						
Other (please specify):						
	Name: (optional)					

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