Personalized Goal Setting in the Primary Care of Persons with Cognitive Impairment: Measuring what matters most

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- No conflicts of interest

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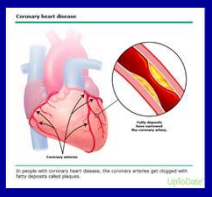
Goal-Directed Care: A new paradigm in patient-care Shifting from…



Disease-focused
- Identification and treatment of specific diseases

Patient goal-directed
- Care focused on achieving patient-determined outcomes

Reuben DB, Tinetti ME. NEJM 2012;366(9):777-779.; Tinetti ME, et al. JAMA Cardiology 2016;1(1):9-10.
Reuben DB, Jennings LA. J Amer Geriatric Soc 2019, epub

Photo source: www.UpToDate.com; Oklahoma Healthy Aging Initiative www.ohai.org

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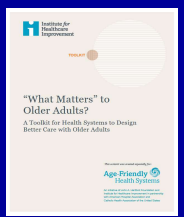
National attention on goal-directed care



Reuben DB, Tinetti ME. NEJM 2012;366(9):777-779.
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https://patientprioritiescare.org
https://www.ncqa.org/hedis/reports-and-research/
http://www.ihi.org/Engage/Initiatives/Age-Friendly-Health-Systems/Pages/default.aspx
https://www.cms.gov/Medicare/Quality-Initiatives-Patient-Assessment-Instruments/QualityInitiativesGenInfo/Downloads/CMS-Meaningful-Measures_Overview-Fact-Sheet_508_2018-02-28.pdf

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Why Focus on Patient Goals?

Disease-based Outcomes

- Address one condition
- Medical outcomes
- Population health goals
  - Universally applied
- Works for single disease; longer life expectancy
- May not capture what is most important to the patient

Patient-defined Outcomes

- Span conditions
- Medical & non-medical outcomes
- Personal health goals
  - Individualized
- Works for all patients; multiple chronic conditions; limited life expectancy
- Always patient-centered

Mold JW, Hamm R, Scheid D. Family Medicine 2003;35:360-4.
Reuben DB, Tinetti ME. NEJM 2012;366(9):777-779.
Tinetti ME, et al. JAMA Cardiology 2016;1(1):9-10.
Reuben DB, Jennings LA. J Amer Geriatric Soc 2019, epub

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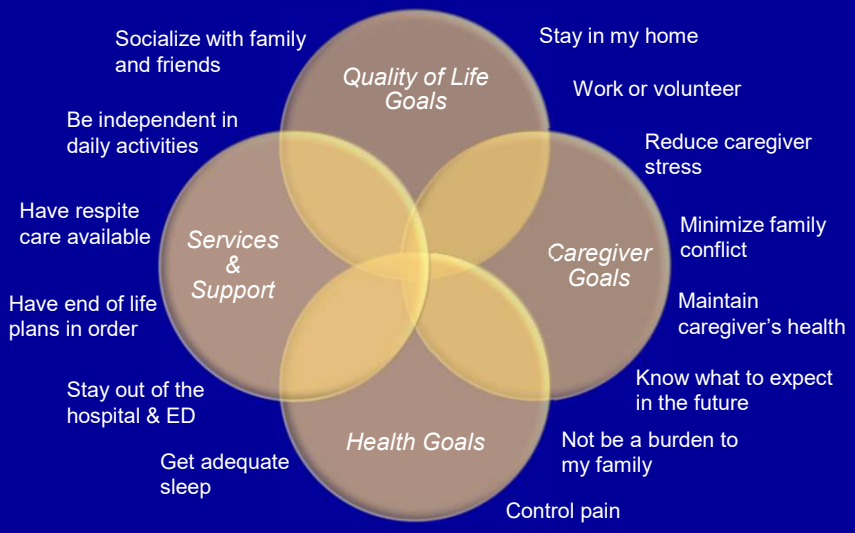
What matters most?

Findings from Focus Groups with Persons with Dementia and their Caregivers



Jennings LA, et al. Quality of Life Research.2017;26(3):685-93.

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One Approach to Goal-Directed Care: Goal Attainment Scaling

- Way to make a personalized health goal S.M.A.R.T.
  - Specific, Measurable, Attainable, Relevant, Time-bound
- Framework for care planning
  - Action Plan
- Measure goal achievement
  - Goal is individualized, measurement is standardized

Goal	Much less than expected (-2)	Less than expected (-1)	Expected goal attainment (0)	More than expected (+1)	Much more than expected (+2)	Action Plan
Interact more with grandkids	No contact with grandkids	Contacts grandkids every 2 months (current state)	Contact with grandkids monthly	Contact with grandkids bi-weekly	Contact with grandkids weekly	Make call schedule for each grandkid. Set reminder on phone.

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Can this work in primary care?

- PCORI methodology study
  - Goal setting feasible in dementia care management clinic
- NCQA demonstration project
  - Goal setting feasible with nurse and social work care managers
- Can goal setting be translated to *primary care?*
  - Nearly all persons with dementia receive care in primary care not in specialty care.

Jennings LA, et al. JAGS 2018;66(11):2120-2127
https://www.ncqa.org/hedis/reports-and-research/

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Study Objectives

- Determine the feasibility and acceptability of using goal-attainment scaling to 1) set health goals and 2) measure goal achievement with persons with cognitive impairment and their family caregivers in primary care.

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Methods: Participants and Setting

- Piloted goal setting with 36 patient-caregiver dyads
- Inclusion criteria:
  - Cognitive impairment (any stage); community dwelling
  - Family caregivers
- 12 clinicians
  - 4 MDs, 3 NPs, 2 PAs, 1 RN, 2 SWs
- 5 primary care clinics
  - 2 urban academic, 2 suburban, 1 rural

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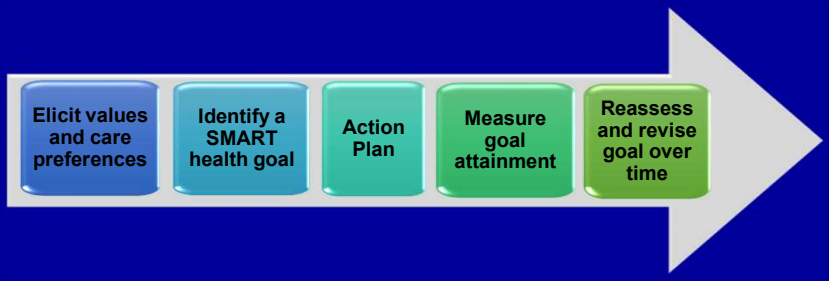
Methods: Goal Setting Intervention



- Complete goal setting during primary care visit
- One-month phone call with research assistant
- Three-month follow-up visit with clinician

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Methods: 3-Month Outcomes

- Goal attainment using 5-category scale
- Patient quality of life (QoL-AD), neuropsychiatric symptoms (NPI-Q)
- Caregiver burden (Zarit-12), quality of life (PROMIS)
- Interviews with patients, caregivers & clinicians
  - Value added to clinical care
  - Barriers to implementation in primary care

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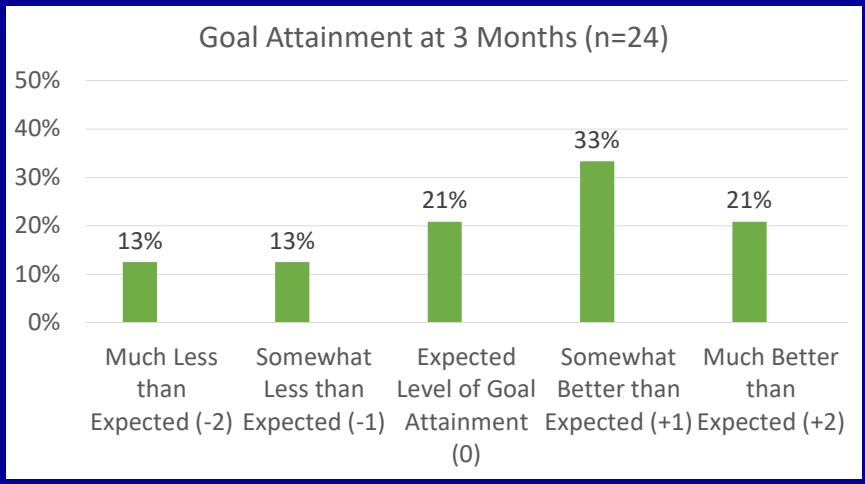
Results: Goal Attainment at 3M



13 75% met or exceeded expected goal attainment at 3 months.

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Results: Patients and Caregivers

- High care satisfaction after goal-setting
  - 100% felt goal setting was helpful in planning for future
  - 96% felt process was different from usual care
  - 92% planned to continue to work on goals after study
- Mean caregiver burden lower at 3 months
  - 14.7 (SD 9.9) vs. 11.7 (SD 10.0), p=0.098
- No difference in patient or caregiver quality of life
- Goal setting discussions ranged 8 to 45 minutes (Mean 24 minutes, SD 10)

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Patient and Caregiver Perspectives about Goal Setting

Themes	Example Quotes
Covered care domains beyond medical needs	*"My goal was more personalized than strictly medical; I did some soul searching." (person with cognitive impairment)*
Gave clinician a better sense of patient's needs	*"We discussed some personal issues with a professional that we wouldn't otherwise have had the opportunity to address." (person with cognitive impairment)*
Helped set expectations	*"Helped me to realize limitations and what was possible to accomplish." (child caregiver)*
Empowered caregivers; encouraged caregiver self-care	*"Allowed me to finally attend a support group by making it an actual goal, rather than something I just think I need to do, but never do." (spouse caregiver)*

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Clinician Perspectives about Goal Setting

Themes	Example Quotes
Improved understanding of what was important to patients	*"It does help you to pay more attention to the individual instead of focusing on just the medical side." (NP)*
Aligned treatment recommendations with goals	*"It clearly defines where we're headed, and it allows you to target care towards what's important to the patient." (RN)*
Longer visit length was a barrier to use	*"It's an extra step in our work-up that often is not done because of time constraints." (MD)* *"…if you have too much else going on in the visit, it's difficult." (MD)*
Goal attainment scaling takes practice	*"The first one or two was daunting in that I hadn't done it before…" (PA)*

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Goal Attainment Scaling: Advantages vs. Challenges

Advantages	Challenges
Goals are specific, measurable	Clinician time constraints
Goals are personalized; meaningful to patients	Scaling takes training and practice
Goals can be revised	Culture of disease-based care
Facilitates care planning	Unrealistic goals
Patients/families like it	Goals of and for others (e.g., family, clinician)

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Summary

- Goal-oriented approach to care
  - Helps patients achieve what is most important to them
- Goal attainment scaling
  - Feasible for persons with cognitive impairment in primary care
  - Adds value and time to clinical care
- Ongoing study to refine approach and facilitate wider use

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Questions?

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Results: Participant Characteristics

Person with cognitive impairment	M (SD) or N (%)
Age	78.8 (11.9)
Female	23 (64%)
White, Non-Hispanic	30 (83%)
Montreal Cognitive Assessment, range 0-27 (lower score=greater impairment)	13.8 (9.2)
Bristol Activities of Daily Living, range 0-44 (higher score=greater impairment)	15.7 (13.9)
Number of medications taken daily, range 0-26	9.2 (6.4)
Caregiver	
Female	27 (75%)
Spouse of patient Child of patient	17 (47%) 14 (39%)
Lives with patient	24 (67%)
College educated	24 (67%)

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Example Goals and Scaling

Goal	Much less than expected (-2)	Less than expected (-1)	Expected goal attainment (0)	More than expected (+1)	Much more than expected (+2)	Action Plan
Get out of the house more often	Doesn't get out of the house, stays home most days. (current state)	Go with daughter to pick up grandson once a week	Go with daughter to pick up grandson 2X/ week. Stay out 30 min.	Go with daughter to pick up grandson and go get a coke 2X/week. Stay out 45 min.	Go with daughter to pick up grandson and go get a coke 3X/week. Stay out 60 min.	Daughter will facilitate getting patient out of house more often. Encouraged to call provider if difficulty.
Get adequate sleep	Less than 4 hours of sleep at night	Gets 4 - 5 hours of sleep (current state)	Get 6 hours of sleep	Get 7 hours of sleep	Get 8 hours of sleep	Change bath to evening. Start melatonin. Neurology referral for nighttime hallucinations

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