

Title: Goal Setting – A Guide to Occupational Based Goal Setting in Occupational

Therapy

Hosts: Mahek Bansal & Larissa Ferrari

# **Transcript:**

## **Mahek Bansal**

Welcome back to our new Possibilities podcast. Today we will be talking about occupation based goal setting. So we'll be diving into the purpose of goal setting in the OT process, occupation based goals versus skill based goals and how these look different and some goal setting tools that we often use in our clinic. So I guess we might just dive straight into it, Larissa, and talk about, yeah, what is the purpose of goal setting? Why do we do it?

#### Larissa Ferarri

Well, Mahek, I think for me, it's good to have occupation based goals and to define goal setting so we know what to do, what's our scope of practice? Where should we guide our therapy? In which way should we guide our therapy, and what should we focus on? At first, there are so many things when we are with a client, like we've spoke before in Paediatrics, there are so many things we can see when we are with our clients. So defining good goals are great, actually, to guide our sessions. What do you think, Mahek? Do you agree?

#### Mahek Bansal

Yeah, definitely. I think 100% to guide our OT process and our intervention plan, or what those next steps look like in our OT process. I think the other benefit is also to understand our scope of practice. Like we've talked about in our last episode, quite in depth, is that it's really important to support not only our clients, but the wider community about what our scope of practice is. And setting goals really early on in the process can make sure that we're working really well within our scope of practice and being really clear about the expectations and what OT as a service can offer. So I think that way, then when we sort of embark on the journey, we can keep checking back within ourselves to know that we're being guided by these goals which are within our scope.

## Larissa Ferarri

Yes, that's great, and that's exactly what I think. But then I wonder, how can we describe what are occupation based goals and skill based goals and how these two things, these two different things can help us in our setting? Would you like to start?

#### **Mahek Bansal**

Yeah. So I guess in terms of occupation based goals and skill based goals, they are sort of what they say. So it's all, I guess, in our wording of the way that the actual goal is written. So an occupation based goal, the goal itself really communicates and emphasizes the occupation towards what we're trying to achieve versus a skill based goal. Is really communicating and emphasizing the skills that we are trying to build through our OT process. So for example, if we take a simple example of dressing, it's a very common self care occupation that OTS address with all types of populations. An occupation based goal for dressing might sound like Larissa will be able to put on her t shirt independently by the end of the year. In that goal, we are showing that the goal is the occupation, which is dressing, it's putting on a shirt which is part of the dressing occupation.

#### Mahek Bansal



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A skill based goal might be looking at the skills required to complete that occupation. So for example, that might sound like Larissa will be able to remember and sequence all the steps required to be able to put her shirt on. So there I am emphasizing the skill required, which is an executive functioning skill for the dressing task. Both of them, both address dressing and that is what we're working towards. But the goal communicates either the occupation or the skill. Does that sort of make sense, Larissa?

## Larissa Ferarri

It makes a lot of sense to me. You've explained very well to me. Hopefully our listeners will also understand. But I think you were very clear; it is pretty straightforward. It's about the occupation and the skills necessary for you to perform that occupation. And even though we do work on the skills just to have that big picture, why are we working on these skills? Why are we working on the executive functioning in that situation, in that setting? We're working on the executive functioning because we want the dressing. So it's not only oh, let's work on sequencing skills, but for what? Why do we want to work on the sequencing skills? And that's when the occupation based goals help us to keep on track and keep within our scope of practice.

#### Mahek Bansal

Actually, as you were talking, was just thinking in my head another reflecting sort of on my own practice. I think starting out I was writing a lot of skill based goals. I think that's just what I learned in my past experiences and previous places I've worked and things like that. But when I sort of was understanding more about occupation based goals and the importance of these occupation based goals and changing in my own practice, initially it seemed like a big change. But the more I did it, I realized it's just a simple almost oftentimes just rephrasing using the same words in the goal, but just swapping them around and something like an easy one I just thought was like even something for handwriting. Occupation based goal could look like Larissa will improve her handwriting by building her finger and hand strength and fine motor skills, whereas a skill based goal could look like Larissa will improve her fine motor skills including finger and hand strength for handwriting tasks.

# Mahek Bansal

And I think just by having it swapping the way around and having that occupation first and then the skill secondary, I think it just creates that emphasis of, okay, this is what we are working towards, and these are the things that we're going to do to support that. It's exactly the same words but just sort of swapped around the other way.

## Larissa Ferarri

That's very interesting that you've mentioned that and you're right. And I think from my point of view, that with time that becomes so natural that you keep referring back one to another. I personally, sometimes, depending on what I'm focusing on, my session, I keep swapping them around. But that's the thing. The key is always there. The occupation is always there. And I guess once you get more confident with what you're looking at and what you're working on, it's not play, but it's kind of play with the words and put your first goal first and then how you're going to achieve that goal, which is probably by working on the skills. So it was a great observation, Mahek. Thank you for that.



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# Mahek Bansal

No, and I guess where you're talking about Larissa like communicating that occupation first, I think it's not only for us to explain our scope, but I think it's also for others to understand the goal. Like for people who aren't health professionals, which are a lot of the clients and parents that we work with, or people who aren't OTS and might not are in other health professions. When they're reading our goals or when they're trying to understand our goals, it's much easier for them to know, oh, yes, they're working on dressing. Yes, they're working on handwriting rather than, oh, they're working on finger dexterity and bilateral coordination and all of these skills that are underlying that we might be addressing in order to achieve the goal. So I think it's also us being able to communicate really clearly what we're trying to achieve. And I personally think that's easier when we're talking about occupations rather than skills.

### Larissa Ferarri

And that reminds me of episode one in which we explain how it's important for the parents, the family, the community, the carers to understand what we do and what the occupation in occupational therapy means. So again, is advocating for what we do and helping people to have a better understanding of our scope of practice as well. As we're going through this conversation about occupation, I was thinking if we could bring up some occupational based tools we use and how we can use these tools again to help the families to choose the priorities, choose the goals, identify the strengths and the challenges, and make sure we're both speaking the same language.

# Larissa Ferarri

That makes sense in terms of goals.

### Mahek Bansal

Yeah, definitely. So I think two of the most common ones that we use in our practice is the Canadian occupational measure of performance, the COPM, and also the goal attainment scale, the GAS. So maybe, Larissa, if you want to start us off by explaining a little bit about the COPM and what it is and how it works.

# Larissa Ferarri

Yes, I personally really like the COPM. The COPM is really good for that first session for me in my practice from my experience. The parents will have a list of occupation and they're going to score these occupations. And at the end of this tool they're going to set up their priorities. And then they're going to give a priority list. So let's say they have some options in self-care, in mobility and other daily living activities. Then they're going to score the ones they've scored poorly. They're going to set up as priorities. And within these five priorities we're going to choose goal number one, goal number two, go number three and so on.

## Larissa Ferarri

That's why I really like as a reflection for the families because then they can think about each one of the biggest areas of performance they want to work on, and they can score and set priorities. But then basically that COPM is that. But moving forward, once we have this first



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goal decided with the families, I really like the GAS because it's almost like breaking this. And I'll leave that to you, Mahek, to explain a little bit about it.

## Mahek Bansal

Yeah. So the GASI think, a really great goal setting and outcome evaluation tool. So how the GAS works is you have basically ratings. It starts at minus two, then minus one, zero, plus one, plus two. So you write the current performance, the current level of performance for your goal or the occupation you're trying to address as minus two and your goal is written as zero. And basically your other levels, minus one is maybe you haven't achieved your goal fully, but you've made a little bit more progress than when you started. And then plus one and plus two are you have exceeded your goal. What I really like about the GAS is it breaks up the goal into smaller chunks and smaller steps. And so it's not like either you've achieved the goal or not, but it actually shows some of that progress that you're making towards the goal.

### Mahek Bansal

Maybe for some reasons the goal hasn't been fully achieved but it doesn't show that it's all been for nothing. You can show that there has been some progress and you can also because it, I guess, assigns the numerical value to the different steps of the goal. It makes it easy as an outcome evaluation because then you can look back and say, okay, I was at minus two, I'm now at zero. So I've actually gained two points, or I've gained one point, I've gained four points. So that can also help evaluate our own services or I guess our intervention.

# Larissa Ferarri

That's great because actually this is not something we hear a lot to have outcome measures in occupation based tools because overall they can be quite subjective or with time they might slightly change. And the initial assessment is also subjective as well. But at the same time, it's good just to have that outcome measure for us to show our family, to guide our practice and to know where we are at in that goal.

# Mahek Bansal

Yeah, and I think in terms of the GAS, what I like is that it's also very, I guess, customizable in the sense that it's up to you to use your clinical reasoning to write the goals and to figure out what those steps are going to be. So whether it's going to be based on the level of support right now they're doing it with moderate support and then minimal support and then just verbal prompting. And you can sort of do it that way. Or if it's like a dressing task and maybe it's about the steps, they can do two steps independently, then they can do four steps independently. So because it leaves it up to you to use your clinical reasoning, it means that you can, I guess, adapt it for the client to meet the needs of the client that you know is going to be achievable and realistic, which I think is really lovely.

And it means that we can utilize this in so many different ways. And I think the same goes for the COPM in the sense of, I guess the part of the COPM where you have to rate your current level of satisfaction, your current level of performance, and you have to rate how important that goal is to you. All those numerical values can also be used as an outcome measurement because then you can six months, three months, six months down the track, try again and



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rate it again and see what does that look like and if there are any changes and what does that mean.

#### Larissa Ferarri

Yeah, and I think you've just explained the main difference between them. So like with a GAS, you have different expected outcomes, and you write them down, whereas with the COPM you use a numeric value to quantify your level of performance and satisfaction with your goal. But overall, I really like both tools. They are really amazing, and we both have access and use both of them in our practice.

#### Mahek Bansal

And do you know what the other thing for the COPM is that I think it has a really strong place in paediatrics because not only can you get the parent or the carer rating and feedback, but it's actually quite adaptable to use with the child. So I found it really interesting in my practice for children that are able to support them, to try and rate as well their level of satisfaction, their importance, and their perceived level of performance and compare it almost to the parents and say look, yes, the parent has concerns, but also our client is a child. So how can we incorporate goals that are important to them? And often you'll see some big discrepancies between the level of particularly, I think, the level of importance to some of the goals between parent and child, where parent thinks that some things are very important and the child's like, oh, well, it's not that important to me and it's really interesting and valuable information to know

## Mahek Bansal

But also where the COPAM goes through the different occupations. It's easy for that to also be child friendly, if not in words, but in pictures. So I've done it a lot with kids where I'll have pictures of different occupations and we'll talk about put it in a pile of easy, medium hard, or I can do it by myself, or it's something I want to work on. So I think it's something that's really valuable as well as a goal-setting tool to use with the child, which I think can be overlooked a lot in paediatrics as well.

# Larissa Ferarri

Yes, it's true. And the part that you said about the pictures, that's really great. That was a great giveaway for the people who are listening. We need to adapt and make sure our clients understand what we're asking them to do. Sometimes it can be quite complex to set goals with them. I feel with some of my clients, it's almost like they have no idea, or they struggle to identify, or they struggle to communicate these goals. And then when we try to adapt and find different ways to support that communication, it's really helpful for them to speak up for themselves. And as we're focusing a little bit on these occupation-based tools and goals, I think it's also important as well to address both goals. For example, I had a parent setting up three goals with me and then the child brought me a goal that was not brought by the parents.

# Larissa Ferarri

And then I've spoke to the parents, and it was actually quite beautiful the way the child put the child said that this child wanted to improve the English. And it was actually by adapting and trying to use activities for us to engage in a meaningful conversation that I figured out



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that actually was to speak up. So how beautiful is when we enable our clients to identify their needs.

#### Mahek Bansal

Yeah. And I think it supports the parents and the carers to also learn a lot about their child and have another level of understanding. I think also sometimes the goals between them can cross over, but for different reasons, there's a different motivation behind it. So I think it's just that sort of using goal setting to be our exploratory tool at the start to understand more about our clients and our families, set those priorities, and then priorities that are within the scope of our practice, and then use that to guide the next steps in our OT process. And using these awesome goal-setting tools that can also be outcome measurements that we can sort of check in after a period of time and see where we're at, revaluate our goals, set some new goals and go from there.

### Larissa Ferarri

You've said something about having similar goals, but with different things that are motivating the goals. So maybe we should talk about then the skills assessment tools because we might be working on very similar skills that can be addressing both the parents and the children's goals.

#### Mahek Bansal

Yeah, that's a great point, Larissa. And I think often now that you're sort of talking about those skills, I think the other part where we have to really consider goal setting and I guess occupation based goals versus skill based goals is when we're using assessments and how assessments fit in with our goal setting. I think that this is a whole other conversation that we've already got planned in a couple of episodes, but I think it links in nicely to our goal setting. Because what I find sometimes is especially when we're using a lot of skill based assessments and we're using it with whatever clinical reasoning we have, it can make it tricky sometimes to then adjust into occupation based goals or it can be easy to fall into the hole of skill based always having skill based goals if we're being guided by skill based assessments.

# **Mahek Bansal**

So what I mean by that is I find if I use a fine motor assessment for example, if I find that my client got difficulties or is scoring below average on finger dexterity, then it can be easy to write a goal around improving finger dexterity for self-care tasks, where now I'm in a skill based goal rather than taking that next step to say, okay, what does that mean for occupation? And what does that mean for the priorities of the family? What do you think, Larissa?

### Larissa Ferarri

What you're saying is that I can identify what are the challenges or the concerns using skill assessments, but the main thing is, how am I going to use this finding and correlate it to what the family or the child brought as a goal. So let's say in this specific client, you are talking about the finger dexterity assessment. Let's say the mums really concerned with his handwriting and buttons because he wears shirts to go to school four times per week. So



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then you can assess this. For example, we can work on two goals. This child is going to work on dressing himself and doing buttons independently by improving the finger dexterity or any other skills that are related to this task? Is that what you're saying?

#### Mahek Bansal

Yeah, 100%. I think that the way that we use assessments and the type of assessments that we use are very closely linked to the goals that we set and the way that we word our goals. And I think it's on us as OTS to be really mindful and use our clinical reasoning to make sure that skill based assessments are an awesome tool and can give really valuable insight. But we need to make sure that we're communicating how we're using it and what we're finding from it in an occupation based way so that, again, it's really easy for everyone to understand. It's easy to measure, it's easy to see, because we can see how well this child is doing with their buttons or how well this child is doing with their handwriting, rather than the parent trying to comment on how good their finger dexterity is.

Now, that, I think, then falls back to us as the professionals to make sure that we're sort of regularly checking in with ourselves around the wording, around that.

#### Larissa Ferarri

I think you gave us a lot of food for thought. I think that was a great example, and I think it requires a lot of practice to come to that reasoning. It's not something that even though we might do occupational therapy course or Uni or Master program, we would assume that this is easy. But I personally think that it's not. It required a lot of time, a lot of practice, a lot of observation. It requires a lot of brainstorming about what we do in our scope of practice. So it's really important that you're saying that. Mahek yeah.

## Mahek Bansal

And to your point, Larissa, I think for me, I went through a process, and I still go through a process of relearning sometimes, where I think, especially in the sense of the framework that I was taught, even in university, was, in reflection, quite a skill based approach. And so for me, it's that constant. I had to think about how do I actually change and sort of flip it around? And it's a very, in the beginning, active thought process and active checking in and really trying to read it. Okay, no, that's still skill based. Okay, let me try again. Let me try again until it becomes a little bit more natural, and that comes through experience. And there's still some areas of OT that I find it hard with occupation based goals particularly. I think sometimes when I'm working on regulation and engagement and using a Dir floor time approach, that sometimes I have to really be actively thinking about my wording around those, because it is this constant reflection and learning, and it just doesn't happen overnight.

#### Larissa Ferarri

You just read my mind because I was thinking that maybe talking about the challenging areas to define occupation based goals might be a good topic for, actually, a new episode. So I'm wondering if we should put a survey on our social media and people could tell us what are the main challenges when defining occupation based goals, and maybe we can do a whole episode based on this topic. What do you think?



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# Mahek Bansal

Yeah, that sounds good. Maybe we need to put ourselves in the hotspot after doing all this talking and try and come up with some occupation based goals for the ones that people say are tricky, which I'm sure we'll find tricky, too. But we can try and be up for the challenge. Larissa why?

# Larissa Ferarri

Because we love a challenge.

#### Mahek Bansal

We do love a challenge. Okay, so I think we might just wrap it up there because I think we could keep talking forever. But we have got some more episodes planned to continue this conversation. But it was great to sort of chat through goal setting as a whole, what the purpose of goal setting is. And we touched base Larissa on it being important to define our scope, to define the next steps and the OT process and be really clear with our expectations about OT and then chatting through what an occupation based goal versus a skill based goal looks like and how they're different. And we talked a lot about how it can be sort of a simple change of words. And then, of course, going into those goal setting tools, the COPM and the Gas, they're both amazing. They both have really great strengths as goal setting tools and as outcome measurements.

#### Mahek Bansal

And then, I guess, yeah, the constant reflection that happens as an OT, but that's what keeps us evidence based. It keeps us providing the best possible service for our clients.

## Larissa Ferarri

That's how we build amazing relationships with our clients and help them to do what they want, they need and they desire to do.

# Mahek Bansal

Exactly. So until next time, we look forward to talking to you again.

# Larissa Ferarri

Yes. See you next time. Bye bye.