

*This document provides an overview of the goal-setting process using the short version of the Bangor Goal-Setting Interview (BGSi-Short). Further explanations about the goal-setting process can be found in the manual for the full version of the BGSi, available free of charge from the REACH website <http://psychology.exeter.ac.uk/reach/>.*

## The Bangor Goal-Setting Interview

### - Short version - Manual

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#### Background

The Bangor Goal-Setting Interview - Short (see Appendix 1) is an abbreviated version of the Bangor Goal-Setting Interview (BGSi, <https://psychology.exeter.ac.uk/reach/publications/>). It has been developed as part of the GREAT into Practice implementation study to support practitioners providing GREAT Cognitive Rehabilitation for people with dementia. It offers a structured format for eliciting individual goals and rating the interviewee's attainment in relation to the identified goals in a quick and straightforward manner, at the beginning and the end of an intervention, thus evidencing change in performance.

Identifying goals can be beneficial whenever there is a need or desire to achieve a change in behaviour. Goals are brief statements about a behaviour or activity that the individual wishes to carry out, achieve, or manage better. They are meant to represent something that can be changed to improve the current situation, however unsatisfactory or difficult it is, and so they can instil a feeling of being more in control of the situation. Working towards an inspiring but realistic goal keeps motivation high, and having a specific goal means it is easier to focus on relevant activities. This leads to more prolonged effort and better performance.

The BGSi is completed by the interviewer (Cognitive Rehabilitation Practitioner) and the interviewee (person with dementia) in a collaborative manner, using a conversational format. There are four steps involved in the administration of the BGSi, essentially reflecting the stages of a problem-solving process. Each of these steps is outlined in more detail below.

#### **BGSi Step 1 – Identifying areas to work on.**

This step is part of the initial assessment. In a detailed conversation about the interviewee's current situation the areas for improvement are identified within three pre-specified domains:

1. Managing in the home
2. Keeping in touch with family and friends
3. Engaging in meaningful and enjoyable activities

The conversation could focus on activities the person would like to do that he/she is not currently doing or would like to increase. Alternatively, a discussion can be based around activities the person used to do which he/she has stopped doing or is finding more difficult.

For each of the domains, begin with an open question and follow up with more specific prompts, if necessary. For example, the CR Practitioner might initiate discussions using the following general opening questions within each specific domain:

- Is there something you would like to start doing, resume doing, or do more of?
- Are there things you would like to manage better?
- Are there things that are challenging to do because of your difficulty (use the person's own way of describing this, e.g. poor memory)?
- How do you cope with your difficulty?

To enable people to identify goals you may include family members or care partners in these discussions. You can use the handout *Things you would like to do* (See Appendix 3).

### **BGSI Step 2 – Setting SMART goals and assigning goal attainment descriptors.**

This step is part of the initial assessment. Understanding, articulating and describing the problem and what is currently happening makes it possible to define specifically what to aim for in terms of change.

Ensure any activity or task selected as the basis for a goal is one that the person has the capacity and potential to undertake, either unaided or once appropriate additional resources have been put in place.

Consider what steps and actions are involved in any activities or tasks that might form the basis for selected goals, what skills are required to carry them out, and how this relates to the person's intrinsic capacity. It is important to understand both the capacity of the person and the demands of the activity; this will make it possible to identify where there is a mismatch and what extra support is needed to address this mismatch.

**SMART goals:**  
Specific  
Measurable  
Attainable  
Relevant  
Time-bound

It is then possible to define the goal statement. Goal statements are brief declarations about a behaviour or response that the person wishes to carry out or achieve (e.g. 'I will bake a cake once a week'). They should normally be statements about **observable, measurable behaviour**, and not about feelings or wishes. It is important that goals are **realistic and potentially achievable** within the time period that you define as relevant. This may involve developing a broadly expressed objective into a precise and focussed goal, conforming to SMART principles. This means the goal should be: **Specific, Measurable, Attainable, Relevant and Time-bound**.

**Goal attainment descriptors:** Specify what needs to happen in order to agree that the goal has been partially or fully achieved (goal attainment descriptors; e.g. where the goal is to bake a cake independently, 50% attainment could mean using ingredients that someone else has assembled in order to complete the remaining steps involved in baking a cake, on a weekly basis).

### **BGSI Step 3 & 4 – Rating readiness to change, initial and post-intervention goal attainment, and assigning goal attainment descriptors.**

This section is to record the person's views about how motivated he/she is to achieve the goal (completed at the initial appointment only) and how he/she is currently performing in relation to the identified goal (completed at the initial appointment and at the follow-up appointments). In the original BGSI, Step 3 relates to recording the initial ratings and Step 4 to the follow-up ratings. Note that these two steps were merged into one section in the BGSI-Short recording sheet.

**Readiness to change ratings:** Once you have identified the goal, ask the person with dementia to rate how ready he/she is to make changes in relation to these problems in order to improve the situation. This rating provides a check on the whether the identified goal is relevant and realistic. The **readiness to change ratings** can range from 1 (not ready to work on the goal) to 10 (extremely ready to work on the goal).

**Goal attainment ratings:** To assess the extent and direction of progress, the attainment rating is completed at the initial visit and repeated at subsequent time-points. The number and timing of follow-up assessments to assess progress is flexible and determined by your requirements. The **attainment ratings** can range from 1 (cannot do or am not doing successfully) to 10 (can do and am doing very successfully). A progress score can be calculated for the goals by comparing initial and follow-up ratings. Simply calculate differences in the attainment scores for the goal.

Where appropriate, an informant such as a relative or care partner, or a therapist, can also be asked to contribute an independent rating of the person's current level of attainment for a goal. To help explain the scales and complete the ratings you can use a visual representation of the rating scales (see Appendix 2).

Avoid goals where the baseline attainment rating is high and/or motivation to work on the goal is low.

#### **Goal attainment descriptors**

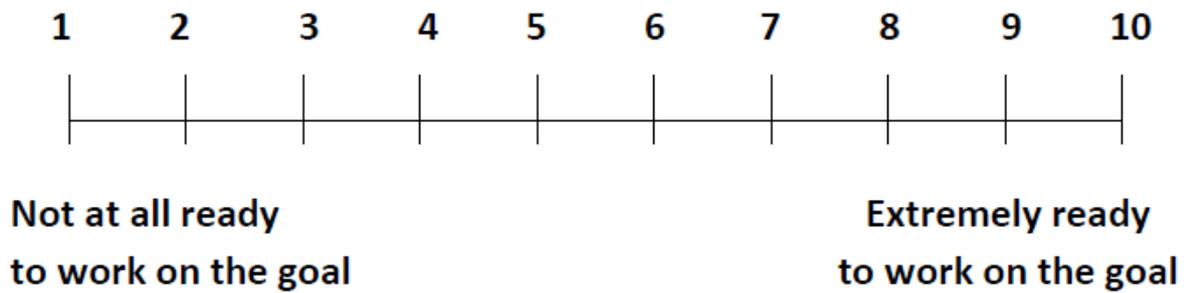
*How will you know when the goal has been achieved either partially or in full (25%, 50%, 75%)?*

At the follow-up evaluation, ask the person with dementia to describe his/her current activity in relation to the goal. You may also note the informant's description and you may make your own observations or obtain the views of anyone involved in supporting the person's progress with attaining the goal. Decide the extent of goal attainment (0%, 25%, 50%, 75% or 100%) by matching the current activity to the goal statement and goal attainment descriptors recorded in the initial interview.



## Appendix 2. Visual Rating Scales

Visual Rating Scale: Readiness to change



Visual Rating Scale: Attainment

