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Do older people set goals?

**A study to determine the impact of a goal
facilitation tool on home based support services**

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**A thesis submitted in fulfilment of the requirements for the degree of Doctor of
Philosophy in Health Science, The University of Auckland, 2010**

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Abstract

The primary purpose of the study was to assess the impact of a designated goal facilitation tool on health related quality of life, social support and physical function among a sample of 205 community dwelling older people referred for home based support services (HBSS). A comprehensive model was developed to consider the complex interactions inherent within the healthcare and social system within which the study occurred. One specific purpose of the model was to determine how the use of the goal facilitation tool facilitated the implementation of core components of a 'restorative model' of support for older people living in the community.

The participants were cluster randomised to either an intervention or control assessor (NASC). The intervention arm involved the participant completing the goal setting tool with a NASC. This established the aims of the rehabilitation episode. The participants in the control group received a standard assessment of needs. Following this the clients from both groups were referred to a HBSS organisation for service delivery. The NASC staff randomised to the intervention and all HBSS coordinators attended a standardised training programme prior to the start of the trial.

The main finding was a significantly greater change over time in Health Related Quality of Life (as measured by the two component scores of the Short Form 36 Survey (SF-36)) in the intervention group ($p < 0.0001$ for physical component and 0.001 for mental component). The intervention group also showed significant improvements in physical function over time, as measured by the Short Physical Performance Battery (SPPB), compared to the control group ($p = 0.003$). There was no difference in social support over time between the two groups ($p = 0.09$). The degree of trust between NASC and HBSS coordinators was measured using standardised questionnaires and shown to be of crucial importance in optimising outcomes for the participants and was included in the model of analysis of change in SPPB and the physical component score of the SF-36. There was a marked variation across HBSS providers in terms of the types of services provided to the participants and there was a difference in the ability of the different intervention group NASC to facilitate goal directed services.

The study findings contribute to a greater understanding of the factors necessary to implement improvements in the services provided to older people receiving assistance in the home and highlight the complex interaction between the client, their family / whānau, the assessment and service delivery organisations and the direction provided by local and national policies and directives.

Acknowledgements

Firstly I would like to thank those who participated in the study. The older people, their families and the NASC and provider coordinators were fantastic. The chance to be welcomed into the homes of the participants was a great honour.

I acknowledge the financial support provided by the New Zealand Health Research Council through the award of a Disability Research Placement Programme PhD Scholarship. In addition the support provided by The School of Nursing was very much appreciated and without the assistance, advice and encouragement of Judy Kilpatrick, the head of the School, it would not have been possible to complete this work. I owe enormous gratitude for the unremitting encouragement and support provided by Ross Smith, Jenni Coles, Diana Dowdle and Bev Blake from Counties Manukau District Health Board.

I am indebted to my supervisors; Professor Martin Connolly and Associate Professor Paul Rouse, for skilfully guiding my thinking throughout the research process, and for countless hours spent checking my manuscript. In addition the advice and guidance received from Elizabeth Robinson around analysis of the data was of inestimable value.

The assistance provided by my wonderful brother Matthew throughout the process was epitomised by the eight hours spent formatting the document whilst on an international flight. I am grateful to Dinah Walker and Lois Palmer for their hard work and wonderful attitude while collecting data and performing the baseline and follow-up assessments. I would also like to thank my family on the other side of the world: my parents and sisters, Helen and Dina, were there for me every step of the way in my journey to submission. Finally I am forever in awe of the patience shown by my wife, Annabel and my two children Oliver and Libby who have endured my three years of thesis composition and data analysis. It will be great to get our lives back.