PURPOSE:
Goal setting is essential to effective problem solving, a skill needed for patient self-management. Goals are desired outcomes to which effort is directed. It is important that goals be optimistic, yet realistic.

CONSIDERATIONS:
1. Clinical staff training in goal setting may be necessary.
2. Knowledge of motivational interviewing or coaching is helpful.
3. Goal setting is critical to patient self-management.
4. Goal setting is based on the psychological behavior change models: Health Belief Model, Self-Efficacy, Transtheoretical Model, and Health Promotion Model.

EQUIPMENT:
None

PROCEDURE:
1. A recommended goal setting guide is the SMART principle: Specific, Measurable, Achievable, Realistic and Time limited.
2. Assisting patient in setting goals requires helping them identify what changes they wish to see in their lives. This may include such things as returning to hobbies, resumption of roles such as babysitter, preparing meals for family. Helping patient/family begin to see beyond current level of health is key.
3. Helpful questions might include:
   a. Where would you like your health to be in 2 months?
   b. What are you currently unable to do that you would like to resume?
   c. What is a hobby you would like to do that you are currently unable to participate in?
4. Identify small, achievable steps needed to progress toward the goal. Include measurable steps to be taken to get to the goal. Each step should have a time limit placed on it to encourage evaluation and revision of the steps toward attaining the goal.
5. Goals should be written and shared with others vital to achievement of the goal such as clinicians, family members and significant others.

AFTER CARE:
1. Document goals and progress toward goals.

REFERENCES:


