How to Create an Intervention Plan
Using Goal Setting

This guide presents the basics of goal setting and how to use goal setting to set up an intervention plan for your NeuroPI project. This approach is supported by numerous studies and has been shown to reliably motivate people to complete challenging tasks.\(^1\)\(^-\)\(^5\) The steps below correspond with the NeuroPI plan fields provided in Stage B of NeuroPI.

As the name implies, the core of goal setting is the goal. A goal is the aim of an action, that is, you are asked to attain a specific standard of proficiency within a specific time period. For example, you might find that you only ask 50% of your Parkinson’s patients about falls. Your new goal may be to achieve 75% in the next 3 months. Research has shown that simply setting a goal does not motivate one to attain it.\(^6\) Additional actions must be taken to motivate change are discussed below.

1. **Identify measures that need attention**
   An important aspect of goal setting is that the goal should be measurable.\(^1\) All of the measures meet this criterion, and your work in Stage A has created baseline data for your practice. This data will help you identify measures that you may consider for your intervention plan.

   To identify measures for your intervention plan, look for your lowest performance scores. If peer data is available, look for measures below the peer range. The next steps will help you narrow your focus.

   **Action:** Indicate the measures you would like to work with for your intervention plan.

2. **Read the measure background information available in Stage B**
   Stage B provides resources for each measure. Review them for background information and practical steps for implementing an intervention plan.

   **Action:** Note information on your plan that may be important for your intervention.

3. **Find the time needed for plan implementation**
   In order to change behavior you will need resources; for the NeuroPI measures these may include paper and pencil (or a computer) for charting your progress and time for you and your staff. Since time is a critical resource in medicine, you may want you and your team to read articles for physicians on time management such as “We’re creatures of habit – time management ideas for physician-managers” by Adkins (1988):\(^6\)

   http://findarticles.com/p/articles/mi_m0843/is_n6_v15/ai_8347459/?tag=content;col1

   and “Time management: a review for physicians” by Brunicardi and Hobson (1996):\(^7\)

   http://www.ncbi.nlm.nih.gov/pmc/articles/PMC2608106/
Time is a critical factor in determining how many measures to select for your intervention plan. For your first intervention you may want to implement one to four measures. This will help you learn critical information for subsequent interventions.

**Action:** Record the time saving strategies for you and your team in your plan.

4. **Create a challenging goal with a deadline**

Effective goals are challenging and time bound. Research has shown that asking employees to “do their best” is ineffective. Employees will interpret “best” in their own way, and no change will occur. An easy goal will motivate employees for a short time but not impact your organization, and employees will immediately reject an impossible goal. Only a challenging, but achievable, goal will motivate one for a long time period (approximately 3 to 4 months).[^1][^3]

Although it is possible to pursue more than one goal at a time, there is always the danger that you and your staff will be overwhelmed and abandon the plans. The safe upper limit is three to four goals.

**Optional: Consider completing a concurrent PIP Feedback module project**

Another requirement in ABPN’s Part 4 of the Maintenance of Certification (MOC) is the Feedback module. Diplomates must survey at least five patients and five peers who are familiar with their clinical activity over the last three years and initiate an improvement plan. Resources are available in Stage B of NeuroPI for your convenience if you elect to complete these projects concurrently.

**Action:** Set challenging goals with deadlines on your plan for each measure you will investigate.

**Optional Action:** Send Feedback forms to your peers and patients.

5. **Get goal acceptance from your staff**

If incorporating staff, goal setting does not work unless your staff accepts the goal. The critical time for acceptance is when you first meet with your employees to present the intervention plan. Here are steps to take:

- Ask your staff to accept a new, challenging goal. Show them the baseline data and the new goal with the deadline. Describe the Measure and how changes in behavior will be measured.
- Let your staff know that participation is voluntary; it will be your job to convince your staff to accept the goal.
- “Sell” the goal to your staff. Let them know the benefits for the organization and why they should participate. The goal setting program should be seen as fair and reasonable.
- Let your staff know that you believe they can meet the goal. If they need time or skills training you will provide these. Never critique your employees or say that they may not be able to meet the goal.
- Ask your staff to help you create an intervention plan. Their experience in the work place will provide invaluable ideas.
- Take the time to answer all questions from your staff. Assure you staff they can attain the goal and that you will provide support. Let you employees know that achieving the goal is a valued outcome. You do not need to provide monetary rewards for these goal setting programs. Money is appropriate for goals that require an extraordinary effort or tasks that require changes in job responsibilities.[^3]

**Action:** Call a meeting with your staff and set the new goal using the principles outlined above.
6. **Create an intervention plan**
Given that the measures require you and your staff to adopt new behaviors, ask your staff for strategies that will help you attain the goal. For example, they might think of ways to remind you to ask Parkinson’s patients about falls and to document the responses. (The Case Study illustrates this process.) If more than two people are on your team, decide what each person needs to do to attain the goal. Everyone should know their role.

Once you have met with your staff and generated ideas you may implement the intervention plan.

**Action:** Record the intervention ideas in your plan.

7. **Get goal commitment from your staff**
It is very easy for the staff to reject the goal after the initial meeting. Typically the goal is dropped because of the many pressing issues that arise in a clinic or hospital. It is your responsibility to keep your staff committed to the goal program. Here are a few suggestions:

- If you hold weekly or daily meetings with your staff, review the results of the goal setting program.
- If you see that the progress has stalled or declined, hold a meeting with your staff. Encourage your staff to generate new ideas and strategies.
- If your staff needs additional resources or time, promptly help them.

You may find that your staff complains that the goals are too aggressive and not achievable. Do not give up the goal unless there are obvious and pressing reasons. (For example, a physician or staff member has left to take a new position.) Ask your team for suggestions on how to remove a roadblock. Encourage your team to generate new ideas; if your staff needs additional resources, provide them as soon as you can. You can also break down the goal into a group of smaller goals. For example, see if your team can reach 75% of the goal; they may be able to attain the goal in smaller steps.

**Actions:** Note the new strategies and action in your plan.

8. **Provide feedback**
The American Board of Psychiatry and Neurology states that a performance plan must have data collection at two points: before and after the intervention. If the data collected after the intervention does not show improvement, you may want to collect more data. For goal setting to work employees need feedback on their performance over time relative to the goal.

**Optional: Consider collecting more data if you do not meet your goal**
If your team continues to work on the measure, create a chart that shows progress toward the goal. The horizontal axis shows time and the vertical axis shows performance as a percentage. Feedback should be aligned with the measure and your practice. For example, if you see five Parkinson’s patients a week you can update the chart weekly. The chart should be displayed in a place where you and your staff can see it daily.

**Action:** Collect the data for the second observation; share the data with your team.

**Optional:** If you do not meet the goal immediately after the intervention, you may collect more data. Place the data on a chart and display it where it is visible to your team.

9. **Reward your team**
Congratulate your team and celebrate! Remember the goal setting project during employee appraisals.
Action: Review your plan to see what you have learned and what insights you may be able to apply to your next NeuroPI project.

REFERENCES


6. Adkins B. We’re creatures of habit – time management ideas for physician-managers. Physician Executive. Nov-Dec 1989 http://findarticles.com/p/articles/mi_m0843/is_n6_v15/ai_8347459/?tag=content;col1
