GAS GOALS AT BURSLEDON HOUSE SURVEY OF PATIENTS DISCHARGED IN 2016

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Bursledon House is a 12 bedded residential highly specialised paediatric/psychiatric unit within the grounds of University Hospital Southampton, for children aged 0-16.

Patients with a range of mental health, paediatric or mixed paediatric/mental health problems are referred from a wide geographic area. The unit offers assessment and treatment of disabling illness using a biopsychosocial approach. Admissions range from short term assessments to longer term assessment, including rehabilitation.

Goal Attainment Scores (known as GAS goals) are one of the main outcome measures for young people following their stay in the unit, alongside the CGAS (Children's Global Assessment of Functioning). This method of scoring is collaborative and involves the whole MDT, and has been used since the 1960s.

There are around 50 goal templates in use at Bursledon House, which are adapted to the specific presentation. Up to 4 goals are set, depending on the young person's presentation and needs. Goals are set on admission by the MDT and scored upon discharge to indicate progress made.

An example of a GAS goal for Constipation and Soiling:

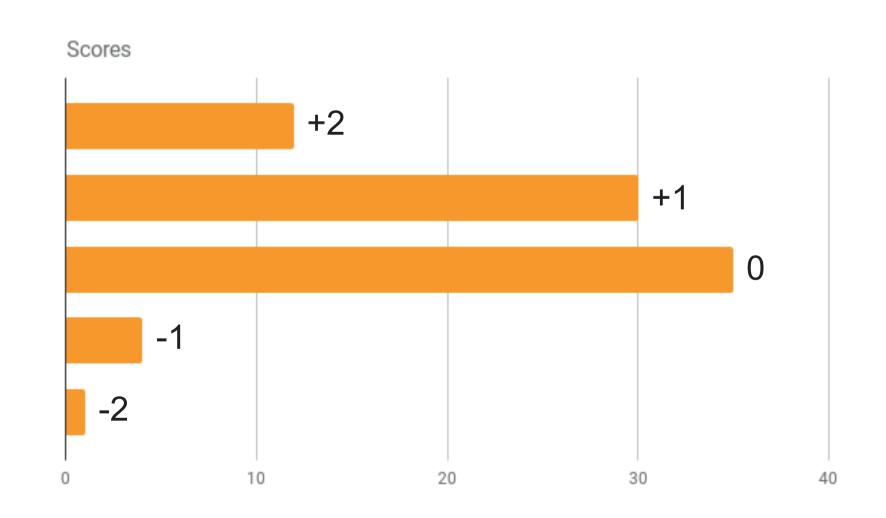
	Goal 1: Constipation and soiling
Much more than expected level of outcome (+2)	Opening bowels regularly. No soiling, fully responsible for toileting, no prompts required.
More than expected level of outcome (+1)	Able to respond to sensation to open bowels. No soiling with some prompting for toileting still required.
Expected level of outcome (0)	Regular toileting with prompting, out of nappies, no overflow soiling, occasional accidents.
Less than expected outcome (-1) and baseline function	Regular soiling most days. Reluctant to comply with toileting.
Much less than expected outcome (-2)	Refusing to sit on toilet. Soiling in pants/nappy daily. Lacking sensation/motivation.
Comments	Record stool type according to Bristol Stool Chart

Methods:

The following information was obtained from patients who had been discharged from the unit in 2016:

- Diagnosis
- Number of GAS Goals set
- Specific goals
- Scores





Discussion:

It is very positive to note that good outcomes i.e. scores of 0, +1 or +2 are achieved in 95% of occasions where data was available. A score of 0 describes a good outcome rather than a neutral one, and it may not be clear to stakeholders that this is a positive outcome, and what we are hoping to achieve during the admission.

Scores of +1 or +2 occurred in 52% of admissions, indicating excellent outcomes for patients.

All of the -1 scores were given on Goals 3 or 4, perhaps indicating the complexity of the cases where no significant improvement was made in the particular area during the admission. However, even patients who scored a -1 or -2 had scores of 0, +1 and +2 in other aspects, indicating the success of the admission in certain domains/ symptoms.

The vast majority of patients had 2 or more goals again demonstrating the complexity of their presentations.

No goals or scores were completed for only 1 out of 35 patients, and scores were not fully completed for a further 3.

This data could be compared to CGAS scores to further demonstrate outcomes achieved against a standardised measure.