

# Goal attainment in youth care in the Netherlands. Effectiveness of needs led care

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**Background.** In recent years effectiveness has been a 'hot item' in youth care in the Netherlands. Some articles claim that *vraaggericht werken*, needs led work<sup>1</sup> is a method of the past: the only thing that matters is effectiveness. However, it is the other way around. There is enough evidence to show that needs led care significantly increases the effectiveness of care.

Needs led care and effectiveness are connected. For effective social care the attitude of the social worker is important. An open attitude is necessary; open and respectful to the needs and possibilities of parents and children. The social care worker supplies his expertise, but attunes it to the ideas of the client. He tries to achieve consensus with the client on the definition of the problem, the exact demand for help, the approach, the goals and the items to work at.

If we look at the three criteria for effective care - fewer drop out cases, satisfaction and goal attainment - we observe a direct connection with needs led care.

Fewer children dropping out of the programme is an important criterion. What percentage of the clients reaches the finish? The amount of clients that drop out of care too soon should be reduced. At the start, but also during the care process it is important to check with the client if the care still meets the needs and expectations or if the programme should be adjusted.

A second criterion is client satisfaction. It is essential to question clients about their opinion and perception of the care given. How do clients appreciate the social care? In the Netherlands we have a system of measuring client satisfaction called the *C-toets*, the Client test, a client feedback system. The results can be used as a starting point for developing a better care programme.

The third criterion for effective care is goal attainment. It is important to decide with the client on what the goals of the care should be and to check regularly to what extent these goals are being achieved. Goal attainment is the next step in needs led care.

**Purpose.** In this paper I aim to show the connection between needs led care and goal attainment. In the Netherlands the client (a family or child) comes to the youth care office with a problem. Ideally the social care worker has an open, needs led attitude and tries to clarify the problem together with the client. The problem is converted to a care need. The care need is the main point of the care. In dialogue with the client the goals of the care are determined. These goals are translated into understandable language. They are goals the client wants to reach and they are formulated positively and SMART (Selective, Measurable, Acceptable, Realistic and Time-tied).

It is not only important to determine goals, it is also important to discuss with the client in which way the problem is to be tackled: with family care, by individual coaching or by admitting the client to a day care and treatment centre?

**Method.** In consultation with the care provider, the general goals are translated into concrete working goals. There has to be a structural relation between the goals of the youth care office and the working goals in the care plan.

The realization of the goals is measured with the client, the social worker from the youth care office and the social worker from the care provider on a regular basis. The Goal Attainment Scale (GAS) is used:

- 1 situation deteriorated
- 0 start situation
- +1 situation improved
- +2 goal gained
- +3 situation improved more than expected

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<sup>1</sup>. The term '*vraaggericht werken*' is difficult to translate. 'Question focused' is the nearest we can get to it. In other articles the terms 'client centred', 'needs oriented' and 'needs-led' are also used. In this paper we have chosen to use the term 'needs led', because this term describes a way of working that is most similar to '*vraaggericht werken*'.

The aim of goal attainment is to arrange the primary process in such a way that the treatment is most effective. The goal attainment approach involves the client with results, but also clarifies which part of the plan does not work and should be changed. Are the goals realistic, is the treatment suitable?

Goal attainment information can also be valuable to the organisation itself. For instance, goals can be classified as conditional goals, diagnostic goals and 'real' goals. The organisation can try to increase the percentage of real goals. Goals can also be classified as to field of behaviour, emotion, cognition, body, surroundings, family or individuality. Consequently, it becomes identifiable what kind of goals the organization uses and which of those are most successful. Benchmarking with other organizations is made possible.

But before it is used as targeting information, goal attainment should be a thing of the client and the care worker.

**Findings.** Research in Holland has shown that clients and care workers have a positive attitude towards goal attainment. Working with goal attainment is important, but we must realize that 15% of the results of the care are dependent on methods and techniques and for 85% on aspects which have to do with needs led work. It is important to invest in the use of goal attainment and to consider the first results not as facts but as matter for discussion. Which works out well, which should be improved, which do we find notable? Policy as well as professionals should aim principally at:

- training the youth care workers:
  - to use the attitude of needs led work
  - to formulate SMART goals in dialogue with the client
  - to translate goals into the language of the client
  - and to use the GAS to score the results
- discussing the results (type of goals, percentage of 'real' goals, how come that one treatment is more effective than the other, etc.) and using this feedback to improve the working methods

The principle is: develop first, benefit later.

**Recommendations.** It would be interesting to hear from participants of other countries how they know if the care is effective. Do they use the GAS or do they have other instruments to see if the goals of the care are met? It is important to invest in methods we can use to measure if the care is effective.

Effective care is what care workers and clients work for.

## **References**

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