

DATA EXTRACTION FORM GOAL ATTAINMENT SCALING (GAS)

Name reviewer: _____ Date: _____

Goal Attainment Scaling definition

We will only include the papers when:

- One or more individual goals have been established by the patient or by one or more researchers or practitioners, either with or without input of the patient, prior to the intervention. The goals do not have to be devised by the patient/researcher, as long as the goals are individually chosen per patient.
- At least 2 points on the scale are described precisely and objectively, so that an unfamiliar observer can determine whether the patient lies above or below that point. Also, the scale has to consist of at least three points (e.g. more than just goal attained – goal not attained).

We will also include papers when:

- Goals have not been weighed
- There was a limit to the amount of goals that could be chosen
- The scale does not go from -2 to +2
- The formula for calculating a summary T-score as described by Kiresuk & Sherman (1968) is not used

I. GENERAL INFORMATION

Reference number: _____

First author: _____

Year: _____

II. IS THE INTERVENTION A DRUG?

yes / no

If no: continue with question V.

If yes: continue with question III

III. DESCRIPTION OF STUDY

- a) What is the goal of the study?

b) What is the design of the study?

c) PICO:

Patients: _____

Intervention: _____

Control group: _____

Outcome(s): _____

d) Number of participants:

e) If stated in the article, why is GAS used in this population?

f) Is GAS used as a primary outcome measure or as a secondary outcome measure?

Primary outcome / Secondary outcome

IV. PRACTICAL ISSUES

a) How are goals established?

- By the patient alone
- By the practitioner alone
- By the patient & practitioner together
- Other:

b) Is it clear how many goals are established per patient?

yes / no

If yes:

- Mean amount of goals established in the sample..
- Minimum amount of goals..
- Maximum amount of goals..

c) Was there a maximum amount of goals allowed?

yes / no

d) What ratings are used? (E.g. -2 to +2)

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- e) Analysis: Are ratings summed up using the formula as proposed in Kiresuk & Sherman (1968)?

$$T = 50 + \frac{10 \sum w_i x_i}{\sqrt{(1 - \rho) \sum w_i^2 + \rho (\sum w_i)^2}} \quad \text{yes / no}$$

If not, how is the data summarized?

- f) Are goals weighed according to their value for the patient? yes / no

If yes, how?

V. IS THE VALIDITY/REPRODUCABILITY/RESPONSIVENESS REPORTED?

Yes / no

If yes: continue the data extraction form.

If no: you have finished the data extraction.

VI.

- a) Is *face* validity assessed (for example: have researchers superficially checked whether GAS is an adequate instrument to measure goal attainment)? yes / no

If yes, how and result?

- b) Is *content* validity assessed (for example: have experts judged whether GAS is an adequate instrument to measure goal attainment)? yes / no

If yes, how and result?

c) Is *construct* validity assessed (for example: is GAS correlated with other questionnaires)? yes / no

If yes, how and result?

VII. REPORTING OF REPRODUCIBILITY

Has an *intra-rater* test-retest been done: yes / no

If yes, result: _____

Has an *inter-rater* test-retest been done: yes / no

If yes, result: _____

VIII. ASSESSMENT OF RESPONSIVENESS

Was responsiveness assessed: yes / no

If yes, method and result: _____

IX. ADDITIONAL REMARKS