# Intrinsic motivation: the key to improving rehabilitation outcomes

# OR Take Charge and all that



Harry McNaughton



# The Take Charge team: 2005-2023



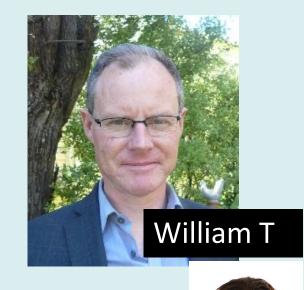


Anna R







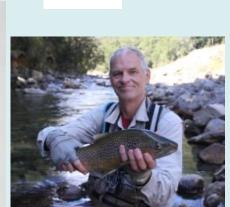


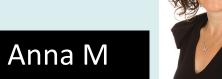














Harry

Geoff

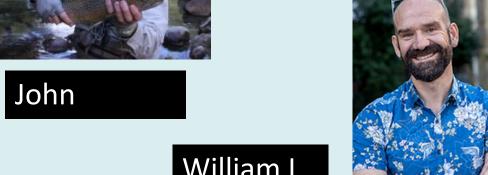
Alan

Api

Anna H



Mark



William L



The whole person needs rehabilitation, not just the part of them that has been damaged

The success of all rehabilitation depends on the patient

Howard Rusk, 'Father of modern rehabilitation'

# The Biopsychosocial model

## **BIOMEDICAL**

- Pathology
- Physical and sensory impairments
- Neuroplasticity
- Genetics

HEALTHY STATE

- Relationships& supports
- Socioeconomics
- Environment

- Experience & expectation
- Mood
- Motivation

**SOCIAL** 

**PSYCHOLOGICAL** 

## **BIOMEDICAL**

- Pathology
- Physical and sensory impairments
- Physical therapy and exercise
- Neuroplasticity
- Genetics

### SOCIAL

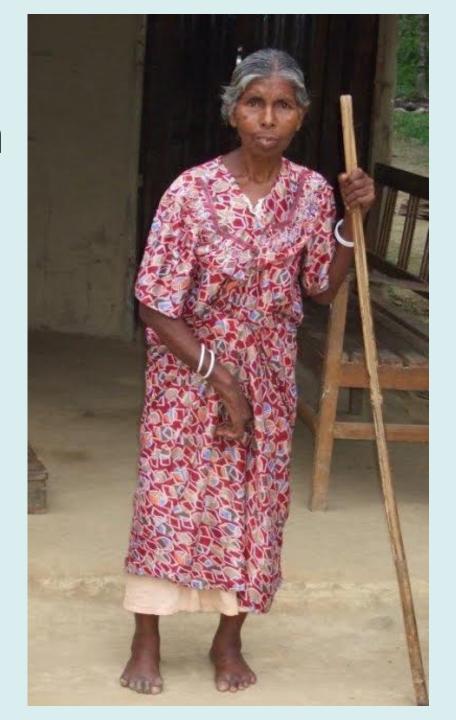
- Relationships & supports
- Socioeconomics
- Environmental barriers

### **PSYCHOLOGICAL**

- Experience & expectation
- Mood
- Motivation

**BIOMEDICAL** The large stroke **AVERT XX** randomised trials ICARE 0 RATULS 0 CIRCIT **LEAPS** ATTEND 0 **FOCUS** AFFINITY O **KEY for studies:** EFFECTS O evidence of benefit=  $\checkmark$ evidence of harm= XX EXTRAS 0 neutral study= 0 **PSYCHOLOGICAL** SOCIAL LoTS

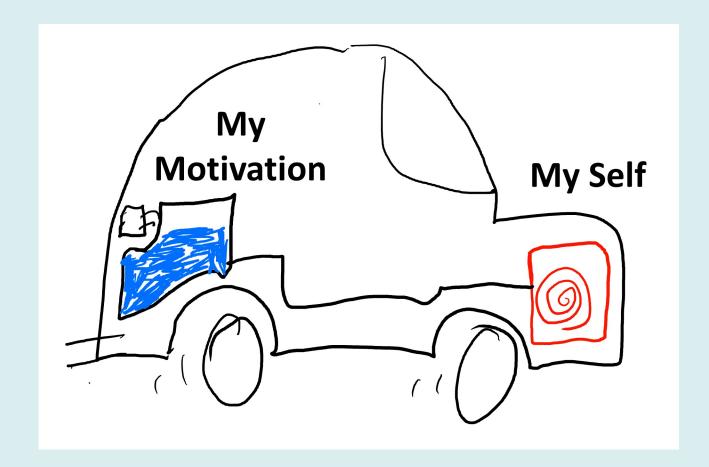
# Runa



India PUNJAB UTTARAKHANDY HARYANA RÚNACHAL PRADESH New Delhi UTTAR नई दिल्ली PRADESH (Kathmandu काठमाडौँ SIKKIM Bhutan RAJASTHAN Lucknow ASSAM BIHAR MEGHALAYA Bangladesh MADHYA PRADESH India JHARKHAND TRIPURA T o medabad WEST BENGAL CHHATTISGARH Myanmar (Burma) ODISHA Naypyitaw Naypyitaw MAHARASHTRA Mumbai နေပြည်တော်

Borgang,

Assam,



## **Fuel ingredients:**

AMP-C

**A**utonomy – I have choices

Mastery – I can do this

**P**urpose – Where I want to go

**C**onnectedness – My support crew



### Taking Charge of your life after Stroke

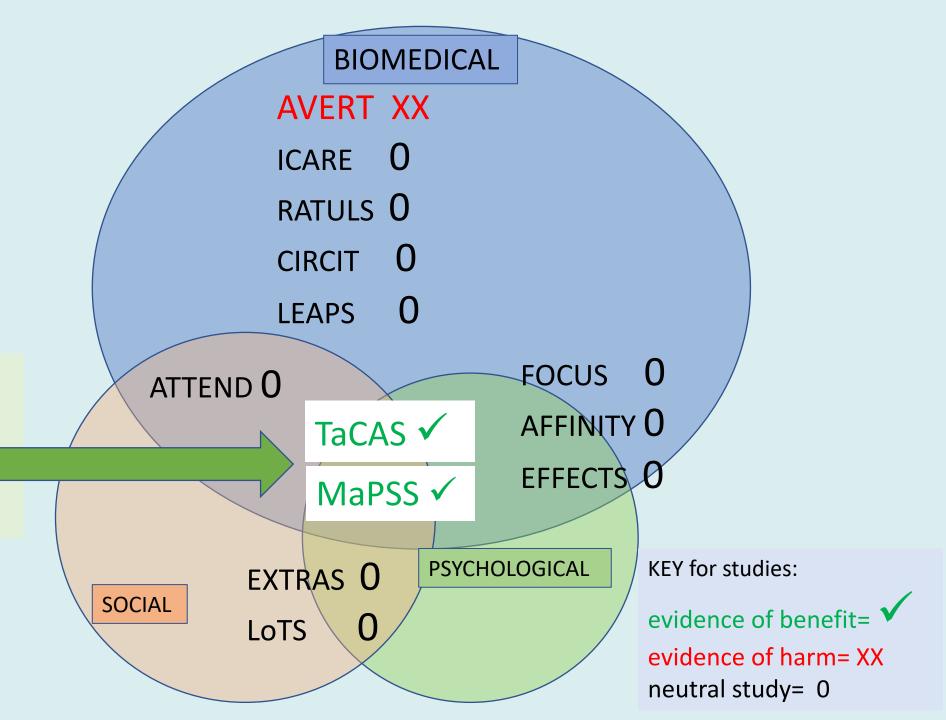
The Workbook

MaPSS 2011
N = 172
Māori and
Pacific,
stroke

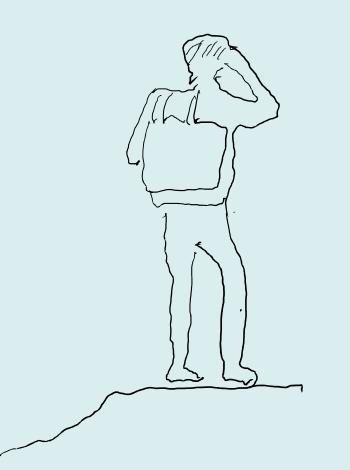
TaCAS 2019 N = 400Mainly NZ
Europeans, stroke

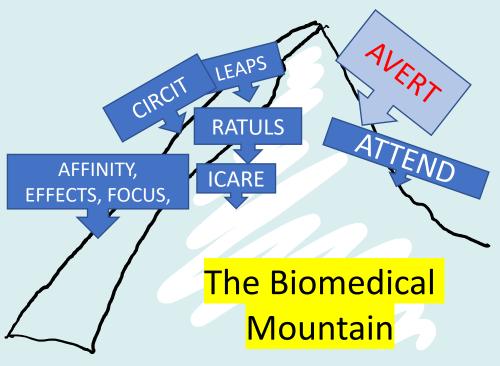


Taking Charge
after COPD 2022
N = 56
COPD admission

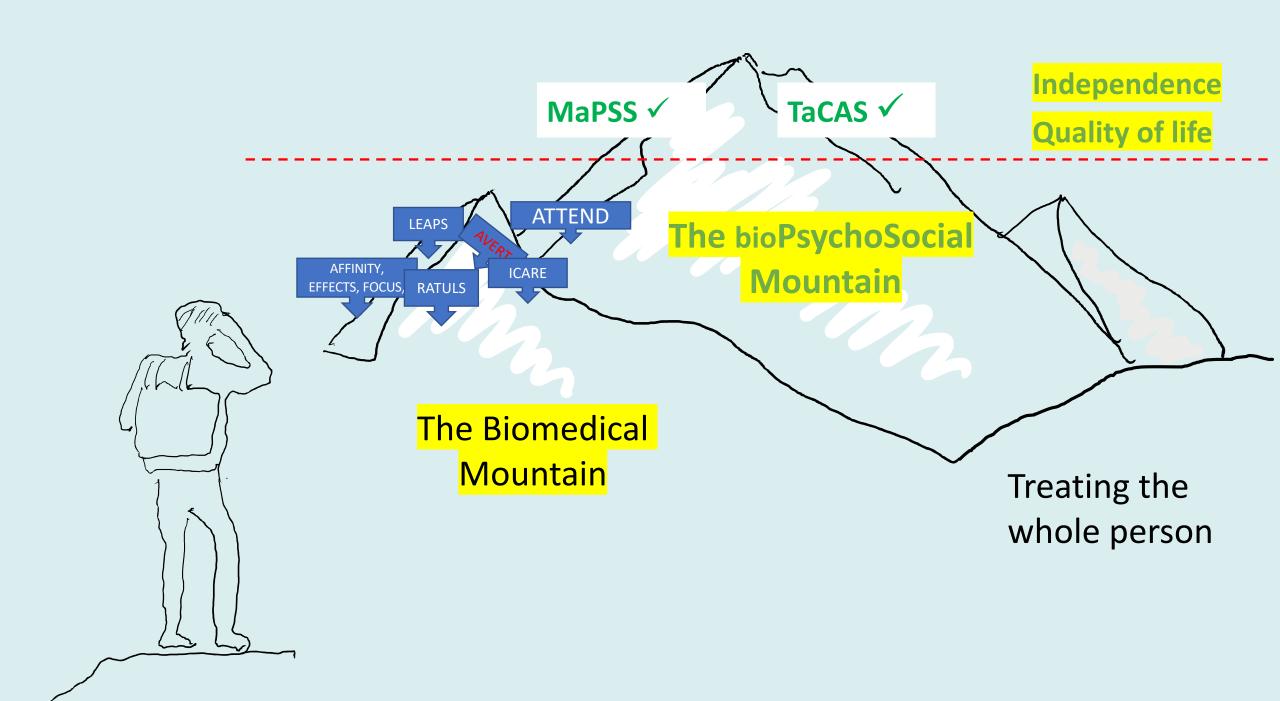


The bioPsychoSocial approach

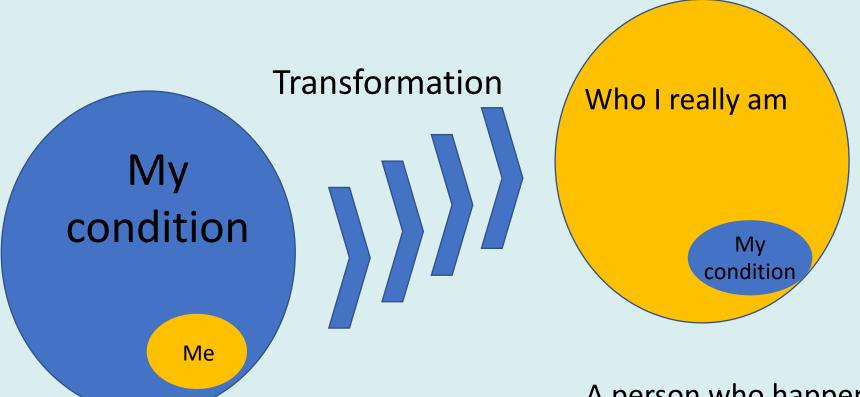




Treating the damaged part



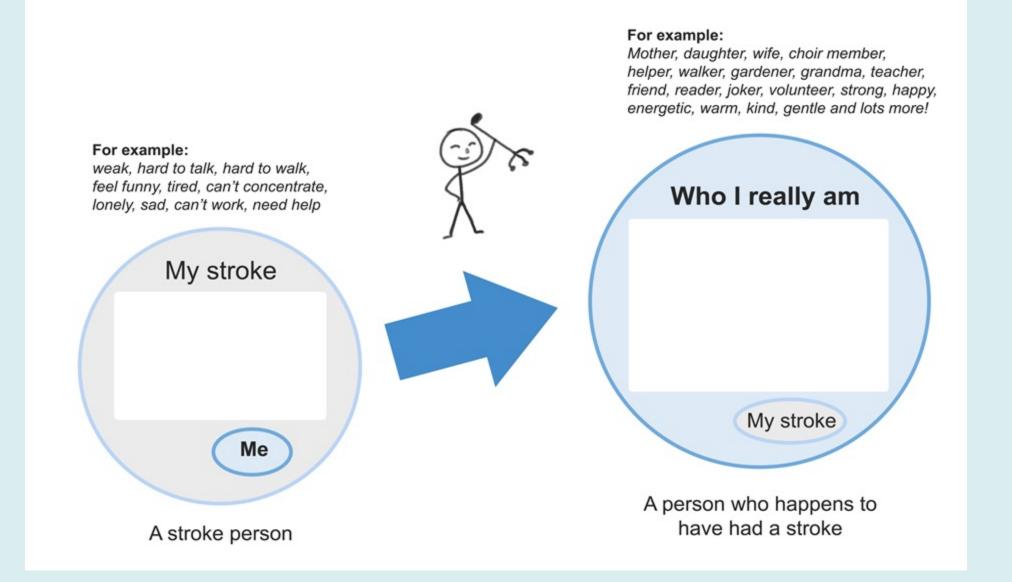
# What Take Charge is all about



A stroke/TBI/MS... person

A person who happens to have a (medical) condition

## Taking charge







### Taking Charge after Stroke

Overall hopes, aims, aspirations for next 12 months

- 1.
- 2.
- 3.
- 4



#### Main fears

- 1.
- 2.
- 3.



### What would my 'Best Day' look like?

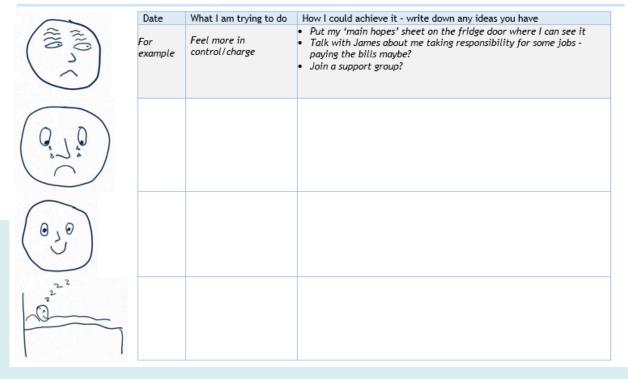


Draw a picture of your best day here. Friends and family may also want to draw something.

# Idea sheets: cover physical, emotional, communication, financial, stroke prevention, information needs, supports

For example telephone  Do some practice runs with James  Arrange for Elsie to call me  Use a tape recorder or something so I know what I sound like?	Date	What I am trying to do	How I could achieve it - write down any ideas you have
			Arrange for Elsie to call me
	dor's		

Emotional issues like feeling anxious, worried, stressed, depressed, helpless



# Traditional goal-setting vs Take Charge

Traditional Goal setting	Take Charge
Generic goals tailored to the individual	Completely personal
Structured	Loosely structured
Teacher/coach/counsellor	Reflecting the person's own thoughts
Clinician talking	Facilitator listening, not talking
Focus on what is do-able	Focus on what the person wants
Complete plan of future action	No written plan at the end of a session is OK
'SMART'	Anti-SMART
(Specific/Measurable/Achievable/Realistic/Timed)	
Time limited (often 45 min)	No time limit (often 45 – 90 minutes)

#### Übersetzung

#### "Taking Charge After Stroke A training manual for facilitators"

Take Charge training manual v7

von Diplom-Dolmetscherinnen Monika Ebinger und Ursula Dörken mit Adaptationen durch Prof. Martin Ebinger Dezember 2022

### Восстановление после инсульта (TaCAS)

Информационная брошюра

#### Insuldijärgne taastusravi (TaCAS)

**Õpperaamat** 

#### Capítulo 2. ASSUMINDO O CONTROLE Parte I

#### Como o AVC afetou você?

Uma pessoa com AVC

Por exemplo: Me sinto fraco, esquisito, cansado, é difícil de falar, difícil de andar, não consigo me concentrar ou trabalhar, me sinto sozinho, triste, preciso de ajuda.

Meu AVC

#### Quem é Você?

Por exemplo: Mãe, filha, esposa, cantora, ajudante, viajante, jardineira, professora, amiga, leitora, brincalhona, voluntária, forte, alegre, enérgica, calorosa, gentil, e muito mais.



### Taking Charge after Stroke (TaCaS)

Ako prevziať zodpovednosť po CMP

But.....

Better tools?

Dose and timing

TBI and other 'cognitive' conditions?

Implementation

Who should the facilitators (not) be?

More studies



The whole person needs rehabilitation, not just the part of them that has been damaged

The success of all rehabilitation depends on the patient

Howard Rusk, 'Father of modern rehabilitation'

## Contact

• Harry McNaughton <a href="https://harrymcn100@gmail.com">harrymcn100@gmail.com</a>

Take Charge website for all materials and articles:

https://bit.ly/3ysp1KM

# The Take Charge team: 2005-2023



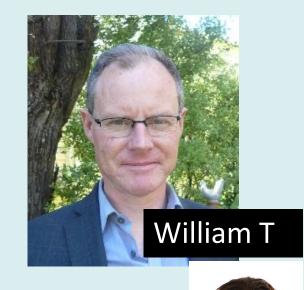


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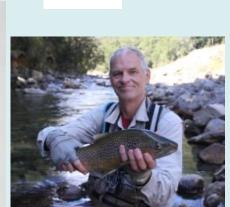


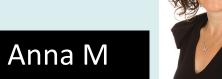














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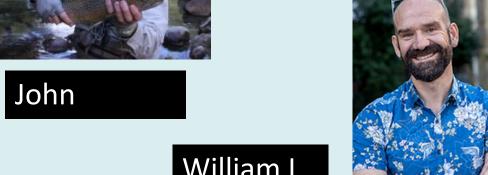
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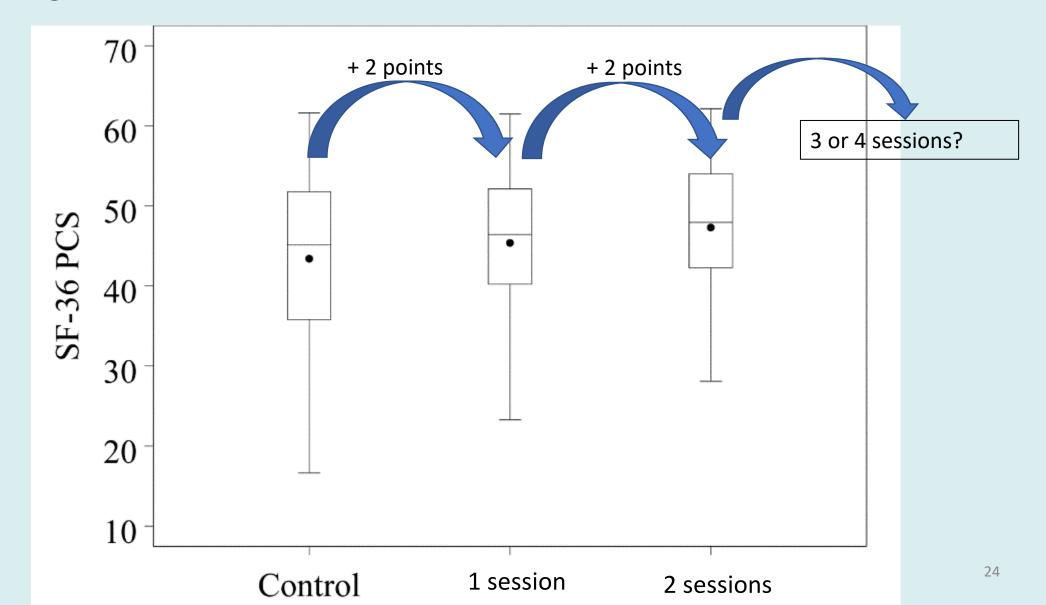


Mark



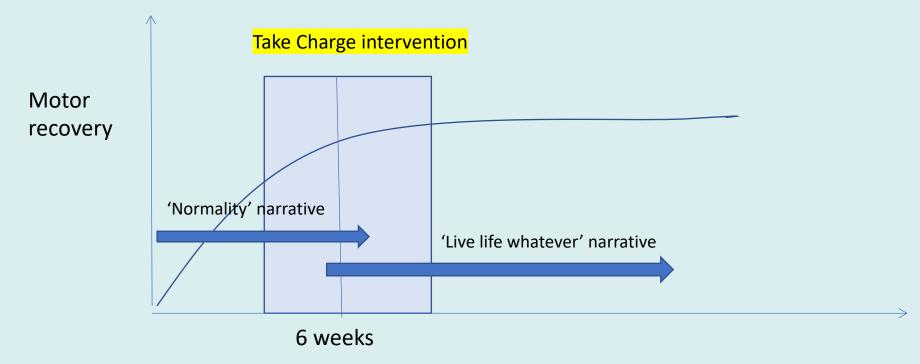
William L

## Take Charge after stroke: 2 sessions better than 1

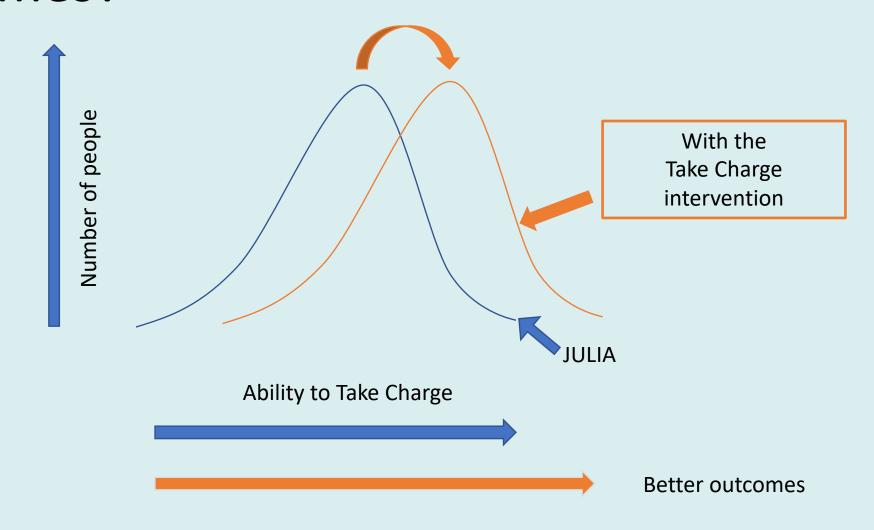


# Take Charge: timing

- Stroke dogma: 95% of motor recovery complete by 12 weeks 'plateau' effect
- So how can an intervention at 3-16 weeks improve outcomes at 12 months?



# Better ability to Take Charge = better outcomes?



# "But we are doing this already"

- Probably not
- Review:
  - Rosewilliam S, Roskell C, Pandyan A. (2011). A systematic review and synthesis of the quantitative and qualitative evidence behind patientcentered goal setting in stroke rehabilitation. Clin Rehabil, 2011;25,:501–14



The clipboard test

