

Occupational therapy after stroke

After a stroke, you are likely to need help to regain your abilities, learn new skills and cope with any remaining disabilities. This process is called rehabilitation, and occupational therapy can support you along the way. This factsheet explains how occupational therapy can help, what the therapy involves and how you can arrange to see an occupational therapist.

What is occupational therapy?

Occupational therapy is an important part of your recovery and rehabilitation. It involves relearning everyday activities (occupations) to enable you to **lead a full and independent life**. It helps you regain the skills you need to do what you want. It may be that you need to regain the ability to do **day-to-day tasks** such as getting out of bed, washing or making a hot drink. Perhaps you would like to continue with a hobby that you had before your stroke such as painting or playing a musical instrument. If you worked before your stroke, occupational therapy can help you return to employment.

An **occupational therapist, often called an OT**, is a healthcare professional. Their role is varied and your therapist may not do everything mentioned in this factsheet, but understanding more about what they can do will help you to know what to ask for.

Occupational therapists often work with other members of the stroke team to make sure they can help with the full range of problems that stroke can cause. The team may include physiotherapists, speech and

language therapists, doctors, nurses and social workers (plus other specialists). This team is called the **multidisciplinary stroke team**. You may like to see our factsheets for more information, *F14, Speech and language therapy after stroke* and *F16, Physiotherapy after stroke*.

There are many places where occupational therapists work and you should see one while you are in hospital. You may also see one at a community centre or in your own home. Your therapist may be part of your health service, or they may be from the health and social care department at your local council (often called social services).

How can an occupational therapist help me?

Your occupational therapist can help you develop your skills and confidence to manage activities that are important to your health and wellbeing.

After your stroke you may be facing a **range of difficulties** that make it hard for you to do the things you would like. These difficulties can include physical problems, difficulties

Occupational therapy after stroke

with your memory or attention, problems with your vision or sensation and emotional problems such as anxiety or depression (low mood).

Your occupational therapist will work with you to find ways of overcoming any difficulties.

They might give you exercises to practise, help you find new ways of doing things or suggest equipment that could help.

Your therapist will help you **set goals** which will often be broken down into smaller, more manageable tasks. Your goal may be to walk to the local shop but you might start by walking to the front door, then down the path and so on, gradually building your confidence and abilities.

Depending on your needs, an occupational therapist may:

- assess your difficulties and explain them to you and your family
- suggest activities to improve your abilities and independence
- use and adapt everyday activities as part of your rehabilitation
- teach you strategies and techniques to overcome any remaining difficulties
- provide aids and equipment
- visit your home to check that it is suitable for you
- advise on the best way and the best time for you to return to work, which may include talking to your employer (with your permission) about how they can support you

- support your carers to be able to look after you.

What does occupational therapy involve?

Guidelines recommend that while undergoing rehabilitation in hospital, you should receive at least **45 minutes of occupational therapy at least five days a week** (plus any other types of therapy you need).

Early assessment and care

Firstly, your occupational therapist will **assess any difficulties you have** following your stroke. This is likely to cover movement in your hands, arms and legs, and any problems with sensation, vision and perception. They may also work with a psychologist to assess your thinking skills and identify any concentration or memory difficulties. Your therapist may ask you about your mood to see if you are feeling depressed or anxious. They can give you advice or refer you to another specialist. An important part of occupational therapy in this early stage is understanding your routines, hobbies and home environment.

During an occupational therapy assessment you will usually be observed doing everyday tasks such as washing or dressing, or making a hot drink in the kitchen. Your therapist may also use questionnaires or assessment packs to learn more about your difficulties.

Your occupational therapist should help you and your family understand these difficulties and how they may affect you now and in the future. Throughout the rehabilitation process your progress may be measured. This could be by using a numbered scale, or

by checking whether goals you've set with your therapist are being achieved.

Your therapist or other team members, such as assistants, should also teach you and your family or carers how to **look after your health** and make sure any help that is needed to do this is in place. Ultimately, the aim is to help you live as closely as possible to how you lived before your stroke.

Practising activities

A major part of your occupational therapist's role is to work with you to improve your ability to carry out the **activities of daily living**, sometimes called **ADL**.

Your therapist may use activities to assess further how your stroke has affected you, or they may alter an activity to help your recovery (for example your movement or concentration).

You should be given opportunities to practise activities in the most natural (home-like) setting possible. This may involve going to a special kitchen area to practise making a meal or cup of tea. If necessary, you may practise washing and dressing with the therapist.

As time progresses activities might be made harder to challenge you and to improve your stamina and confidence. Your therapist may teach you strategies to overcome any difficulties. For example, if you have a weakness in one arm, it will be helpful to dress your affected arm first.

Exercises

Although the occupational therapist mainly

uses everyday tasks to assess and treat your difficulties, they might sometimes give you particular exercises or work to do to target a specific problem. Exercises will depend on the type of difficulty you have. For example, if you have movement problems, you might practise stretching your arm and hand, or focus on memory exercises if you have memory loss. The activities should be taught to you and anyone who will be caring for you.

Occupational therapy will help you increase your confidence with carrying out day-to-day tasks like washing or using your arm to lift something.

It is important to build up your activity levels so that you can return to doing things that are important to you. Your occupational therapist will advise on **activities and exercises for you to practise outside of therapy**.

Preparing for leaving hospital

Your occupational therapist will help you prepare for this. You may need to **visit your home** with the therapist to get some idea of how you will manage. Often, problem areas will not become apparent until you are in your own home environment. Sometimes the occupational therapist will visit your home without you, to check that you will be safe and to advise on any equipment needed to make your life easier.

Equipment

You might find special equipment helpful while you are in hospital, such as a non-slip plate mat or cutlery that is easier to hold. Occupational therapists may be able to give you some advice. You may also be given

equipment to prevent further complications or assist with your recovery, such as a splint to prevent your fingers curling up or a special glove to stop swelling in your joints.

After leaving hospital, you may need further aids and equipment to **make your home safer**. These could include a raised toilet seat or an additional handrail to help you climb stairs.

If you need a carer, it is helpful for them to be there when the therapist visits so they can be involved in planning, and be shown what to do.

Much of this equipment will be **loaned to you for free** by the NHS or your local council, for as long as it is needed. Any necessary minor adaptations to your home, which cost less than £1,000, will also be carried out free of charge.

If you need major adaptations to your home, you may be able to apply for a Disabled Facilities Grant (England, Northern Ireland and Wales). This grant is means tested. Ask your occupational therapist for more information. In Scotland, your local social services department can tell you about any grants that may be available to you.

When will my therapy end?

In the early stages after your stroke you should have as much therapy as you can manage. If a particular goal is not being met, the goal or therapy may be adjusted, or it may be decided that no further therapy will be helpful towards that goal.

When your therapy ends, the therapist should discuss the reasons why with you.

If you still have some difficulties when it ends you should be offered a **review** at a later date. After therapy has ended you may discover new problems or your situation may change. For example, your carer may become ill or you may move home. Your therapist should tell you how to get in contact with them in case this happens.

How can I find an occupational therapist?

If you were admitted to hospital after your stroke you should be assessed by an occupational therapist in the first few days.

If you did not see an occupational therapist whilst in hospital, or you did not go to hospital following your stroke, then your **GP** can refer you for occupational therapy or **you may be able to refer yourself**. You can also contact the **health and social care department of your local council** (often known as social services) who can arrange for a therapist to visit you at home to assess your needs.

Finding a private therapist

You may wish to see an occupational therapist privately. For instance, you may feel you could benefit from further treatment after your initial course has finished, or you may want to supplement your treatment. Let your therapist know that you plan to do this, both as a courtesy and also to ensure there is continuity of your treatment and goals.

Check that any potential therapist is registered with **The Health and Care Professions Council** (details on page 6). This will ensure that they meet the national standards of training and conduct.

Occupational therapy after stroke

The British Association and College of Occupational Therapists has a list of registered therapists. It is a good idea to ask to see a private therapist's up-to-date registration and insurance certificates.

You should also check that a therapist has recent experience of working in stroke rehabilitation. They may be able to give you references from other people they have worked with.

The therapist should agree **how much the therapy will cost**, the **number of sessions** you may need and **where they will take place** before they start working with you.

Useful organisations

All organisations are UK wide unless otherwise stated.

Stroke Association

Stroke Helpline: 0303 3033 100

Email: info@stroke.org.uk

Website: stroke.org.uk

Contact us for information about stroke, emotional support and details of local services and support groups.

The British Association and College of Occupational Therapists

Tel: 020 7357 6480

Website: www.cot.co.uk

The professional body for all occupational therapy staff in the UK. They have a number of specialist sections covering areas like neurological practice (which includes stroke) and independent (private) practice. They offer a list of private therapists and advice on choosing a therapist. **To find a private therapist in your area, call the Independent Practice Enquiry line on 0800 389 4873.**

The Health and Care Professions Council

Tel: 0845 300 4472 or 020 7582 0866

Website: www.hcpc-uk.org

Holds a register of health, psychological and social work professionals, including occupational therapists, who meet the national standards of training and practice.

Disclaimer: The Stroke Association provides the details of other organisations for information only. Inclusion in this factsheet does not constitute a recommendation or endorsement.

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For sources used, visit stroke.org.uk

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