Call the Stroke Helpline: 0303 3033 100

or email: info@stroke.org.uk



## Occupational therapy after stroke

This guide explains how occupational therapy can help your recovery and rehabilitation after a stroke. It explains what happens in occupational therapy and how to access it.

## What is occupational therapy?

Occupational therapy is an important part of your recovery and rehabilitation. It involves re-learning everyday activities 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 skills for daily 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, like painting or playing a musical instrument. If you worked before your stroke, occupational therapy can help you return to employment.

Occupational therapists (OTs) are qualified healthcare professionals. They 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 is often called the multidisciplinary stroke team.

You may see occupational therapists at different times following your stroke, depending on your needs. Occupational therapy may happen in hospital, or you might have it when your needs change at a later stage. Therapists can be based in different settings and locations. These include hospitals, community rehabilitation services, social services departments, wheelchair services, housing and mental health teams.

# 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, problems with memory and thinking, problems with your vision, changes in sensation and emotional problems such as anxiety or depression.

Your occupational therapist will work with you to find ways of overcoming any difficulties. They might give you therapeutic activities 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 prepare a meal for your family, but you might start by helping someone else in the kitchen, then preparing a snack for yourself, 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
- adapt activities and help you practise them to improve your abilities and independence. These may be personal care activities, or social and leisure activities
- teach you strategies and techniques to overcome any difficulties
- · provide psychological support
- if you need some physical support to move around, a therapist can advise your carer on how to help you safely
- provide aids and equipment, including wheelchairs
- visit your home to advise on any useful changes
- advise on the best way and the best time for you to return to work. This may include talking to your employer, with your involvement, about how they can support you
- help your carers to be able to support you

- assess the suitability of your accommodation
- contribute to the review of your long-term needs, whether this is at home, in a care home or nursing home.

## What does occupational therapy involve?

While you are in hospital, if you need occupational therapy you should receive at least 45 minutes every day, plus 45 minutes a day of any other types of therapy you need and can cope with.

### Early assessment and care

First, your occupational therapist will assess your strengths and abilities, and any difficulties you have following your stroke. This is likely to cover how you can manage daily activities, your movements, and any problems with sensation, vision and perception. They may assess your thinking skills and explore how this affects how you do things. 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 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 abilities.

Your occupational therapist should work with you to design treatment tailored to your needs. Together, you will set your goals for

success. The therapist can help you measure your success, for example by breaking down each activity into stages that you can achieve one at a time.

Your therapist or other team members, such as assistants, should also teach you, your family or carers how to look after your health. They should also make sure any help that is needed to do this is in place.

#### **Practising activities**

A major part of your occupational therapist's role is to work with you to improve your ability to carry out your usual activities.

These are sometimes called activities of daily living, and can include everyday tasks like dressing, cooking and shopping.

Your therapist may use activities to assess how your stroke has affected you, and find your strengths. They may alter an activity to help your recovery, or to make it easier for you to carry out.

You should be given opportunities to practise in the most natural and homelike setting possible. This may involve going to a kitchen area to practise making a meal or cup of tea. You may practise washing and dressing with the therapist.

As time goes on, activities might be made harder, to challenge you and 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 is helpful to dress your affected arm first.

### Therapeutic activities

The occupational therapist mainly uses everyday tasks to assess and treat your difficulties. For example, they might give you particular activities or work to do to target a specific problem, known as a therapeutic activity. Activities will depend on the type of difficulty you have. For example, if you have problems using your arm, you might practise a task that involves your arm and hand. You might focus on memory exercises if you have memory loss. The activities should be taught to you and anyone who will be involved in your care.

Occupational therapy will help you increase your confidence with carrying out day-to-day tasks like washing or cooking.

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 for you to practise by yourself.

#### Living independently

Your occupational therapist will help you develop skills so you can carry out activities as independently as possible. Some problem areas may not be apparent until you are in your own home environment. While you are in hospital, a therapist may help prepare and guide you and your family through the process of leaving hospital.

The therapist may conduct a home visit with you, so you can try out various tasks at home and check that you will be safe. They can advise on any equipment or help needed to make your life easier.

#### **Equipment**

Some people might find special equipment helpful, such as a non-slip plate mat, or cutlery that is easier to hold. You may need aids and equipment to make your home safer. These could include support for sitting, 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 how to use the equipment.

Some of this equipment can be loaned to you for free by the NHS or your local council, for as long as you need it. Any necessary minor adaptations to your home costing less than £1,000, will also be carried out free of charge. There may be a charge for adaptations over £1,000.

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?

Therapy aims to help you meet set goals, often within agreed timeframes. If a particular goal is not being met, the goal or therapy may be adjusted. Sometimes, if a therapy is not helping someone towards their goal, the person and their therapist might agree together to stop. When your therapy ends, the therapist should discuss the reasons with you.

# How can I get access to 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. After leaving hospital, you might see an occupational therapist at a community-based unit or in your own home. Your therapist may be part of your local health service, or they may be from the health and social care department at your local council (often called social services).

You should have a review about six months after your stroke to check if your needs have changed, and you may able to access more help at this point. If you have difficulties at any time, you can ask your GP to refer you for help.

You can also contact the health and social care department of your local council (often known as social services) to arrange for an assessment by a therapist. In some areas you may be able to refer yourself, and your therapist should tell you how to get in contact with them after you stop therapy.

### Finding a private therapist

You may wish to see a private (independent) occupational therapist. 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. If you have an NHS therapist, let them know that you plan to do this, both as a courtesy and also to ensure there is continuity of your treatment and goals. It is possible to receive private and NHS care, provided they take place at a separate time and place.

Check that any therapist is qualified and is registered with the Health and Care Professions Council (see *Other sources of help and information*). The Royal 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.

## Where to get help and information

#### From the Stroke Association

#### Talk to us

Our Stroke Helpline is for anyone affected by a stroke, including family, friends and carers. The Helpline can give you information and support on any aspect of stroke.

Call us on **0303 3033 100**, from a textphone **18001 0303 3033 100** or email **info@stroke.org.uk**.

#### Read our publications

We publish detailed information about a wide range of stroke topics including reducing your risk of a stroke and rehabilitation. Read online at **stroke.org.uk** or call the Helpline to ask for printed copies.

## Other sources of help and information

#### **Health and Care Professions Council**

Website: www.hpc-uk.org

Tel: 0300 500 6184

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

#### **Royal College of Occupational Therapists**

Website: www.rcot.co.uk

**Tel**: 020 7357 6480

## **Professional Practice Enquiries Service:**

020 7450 2330

The professional body for all occupational therapy staff in the UK. They have a number of specialist sections covering areas like neurological practice, including stroke and independent (private) practice. They offer a list of private therapists and advice on choosing a therapist.

Occupational therapy after stroke					
Your notes					

## **Keeping in touch**

At the Stroke Association, we understand that the impact of a stroke can turn everything upside down in an instant, not just for the stroke survivor but for their loved ones too.

We are proud to be the leading stroke charity in the UK, changing the world for people affected by stroke. As you may know, our vital work covers many areas, including providing support and information to stroke survivors and their families, funding research into stroke treatment and care, and campaigning to raise awareness of stroke.

We are determined to conquer stroke, but we cannot do it alone.

Keep in touch and find out more about our work. This includes groundbreaking research developments, other services that might benefit you and opportunities to get involved with appeals, campaigns or volunteering for the Stroke Association.

To keep in touch, either fill out our online contact form at **stroke.org.uk/signup** or complete your details below and send them to our freepost address:

Freepost RSZL-SAUL-GRBK
Keeping in touch
Life After Stroke Centre
Church Lane
Bromsgrove
Worcestershire B61 8RA

Your contact deta	ils			
l am a:  □ stroke survivor  □ carer  First name:  Surname:  Address:	☐ family/friend☐ other	<ul> <li>I would like to receive Stroke News:</li> <li>□ online (we'll email you to let you know when an online copy is available)</li> <li>□ by post (we'll send you a free copy)</li> <li>□ I'm happy for the Stroke Association to keep in touch with news updates and ways to get involved</li> </ul>		
Town/city: County:		I'm happy to be contacted by:  (please tick all that apply)  □ post □ telephone □ email		
Postcode:		You can change or stop the way we contact you at any time by calling our friendly Supporter Care team		
Email:		on <b>0300 330 0740</b> , or by emailing supportercare@stroke.org.uk.		
Telephone number:				

#### **About our information**

We want to provide the best information for people affected by stroke. That's why we ask stroke survivors and their families, as well as medical experts, to help us put our publications together.

#### How did we do?

To tell us what you think of this guide, or to request a list of the sources we used to create it, email us at **feedback@stroke.org.uk**.

#### **Accessible formats**

Visit our website if you need this information in audio, large print or braille.

#### Always get individual advice

Please be aware that this information is not intended as a substitute for specialist professional advice tailored to your situation. We strive to ensure that the content we provide is accurate and up-to-date, but information can change over time. So far as is permitted by law, the Stroke Association does not accept any liability in relation to the use of the information in this publication, or any third-party information or websites included or referred to.

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www. the information standard. org

We rely on your support to fund life-saving research and vital services for people affected by stroke. Join the fight against stroke now at **stroke.org.uk/fundraising Together we can conquer stroke.** 

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