

Occupational therapy after stroke



Stroke Helpline: 0303 3033 100
or email: helpline@stroke.org.uk

This guide is about the role of occupational therapy in 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 relearning everyday activities to enable you to lead a full and independent life. It helps you regain the skills you need for day-to-day activities and other things you want to do.

It may be that you need to regain skills for daily tasks such as getting out of bed, washing yourself 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, registered, healthcare professionals. They often work with other members of the stroke team to 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 be offered it when your needs change at a later stage in your recovery. 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 (OT) help me?

Your occupational therapist (OT) 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, and emotional problems such as anxiety or depression.

Your OT 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 OT will help you set goals that are important to you. Your goals can 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 up your confidence and abilities.

Depending on your needs, an occupational therapist may:

- Assess your difficulties and help you and your family understand them better.
- Adapt activities and help you practise them to improve your abilities and independence. These may be personal care activities such as showering, or social and leisure activities.
- Teach you strategies and techniques to overcome difficulties.
- Provide psychological support, and refer you for specialist help if you need it.
- 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 and assess the suitability of your accommodation.
- Advise on the best way and the best time for you to return to work. This may include talking to your employer, with your consent, about how they can support you.
- Help your carers to be able to best support you.
- 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, you will be assessed to find out if you need therapy. You should receive all the therapy you need and can cope with, for up to 45 minutes every day, although this amount can vary depending on your needs. If you are finding it difficult to access the therapy you need, call our Helpline for advice and information.

Early assessment and care

First, your occupational therapist (OT) 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 ability to move, and any problems with sensation, vision and perception. OTs 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 OT should work with you to agree a rehabilitation plan tailored to your individual needs. Together, you will set your goals for success. They can also help you deal with any setbacks that arise. 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, will 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 day-to-day activities. These are sometimes called activities of daily living, and can include everyday tasks like dressing, cooking and shopping.

Your OT may use activities to assess how your stroke has affected you. 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, learning how to manage your energy levels if you experience fatigue, or how to remember things.

Therapeutic activities

The OT 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 moving your arm and hand in a particular way. You might focus on memory exercises if you have memory loss. The activities will be taught to you and anyone who will be involved in your care.

Occupational therapy will help you increase your confidence with carrying out the day-to-day tasks that are important to you.

It is important to build up your activity levels to help you regain as much independence as possible. Your occupational therapist will advise on activities for you to practise by yourself.

Living independently

Your OT 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, an OT may help prepare and guide you and your family through the process of leaving hospital.

They will ask about your home environment, such as the height of your chairs and bed, what kind of bath or shower you have and whether you have stairs. The therapist may do 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, the layout of your home, or help needed to make your life easier and safer.

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 rail 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. The occupational therapist can give advice if you need adaptations to your home. Many areas of the UK will fund minor adaptations to your home, but your occupational therapist will be able to tell you what is available in your area.

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. In Scotland, your local social services department can tell you about any grants that may be available to you.

Find out more in our guide to equipment for independent living and mobility stroke.org.uk/equipment, and accommodation after stroke stroke.org.uk/housing-support.

When will my therapy end?

Therapy aims to help you meet your personal goals, often within agreed timeframes. If a particular goal is hard to reach, you may agree with your therapist to adjust it, or focus on another goal. Sometimes, if 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 (OT)?

If you were admitted to hospital after your stroke, you should be assessed by an occupational therapist within the first few days. After leaving hospital, you might see an occupational therapist at a community-based unit or in your own home. Your OT 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 be 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 your local council to arrange for an assessment by a therapist. In some areas you may be able to refer yourself, and your OT 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) OT. 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 OT, 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

Helpline

Our Helpline offers information and support for anyone affected by stroke, including family, friends and carers.

Call us on **0303 3033 100**, from a textphone **18001 0303 3033 100**
Email helpline@stroke.org.uk.

Read our information

Get more information about stroke online at stroke.org.uk, or call the Helpline to ask for printed copies of our guides.

My Stroke Guide

The Stroke Association's online tool My Stroke Guide gives you free access to trusted advice, information and support 24/7. My Stroke Guide connects you to our online community, to find out how others manage their recovery.

Log on to mystrokeguide.com today.

Other sources of help and information

Health and Care Professions Council

Website: hcpc-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: rcot.co.uk

Tel: **020 3141 4600**

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

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

This guide contains general information about stroke. But if you have a problem, you should get individual advice from a professional such as a GP or pharmacist. Our Helpline can also help you find support. We work very hard to give you the latest facts, but some things change. We don't control the information provided by other organisations or websites.

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Every five minutes, stroke destroys lives. We need your support to help rebuild them. Donate or find out more at stroke.org.uk.

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