

Smart Tips for Stroke Care: A healthcare providers guide

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How to use this Guide
This guide was intended/created for Personal Support Workers in the community. However, anyone interested in providing long term care in Ontario, including PSWs in the community, may find this resource useful. Each Smart Tip topic may be printed as a full document.

The goal of the Smart Tips resource is to highlight common issues for managing these changes. Each Smart Tip topic may be printed as a full document. The Smart Tips can be printed freely as a full document for your organizational needs.

For additional information about any of the topics covered in this guide, please contact your local Stroke Network, or your healthcare provider.

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Disclaimer:


- The information contained in these Smart Tips is for general information purposes only and is not intended to support your organizational policies/procedures. The Regional Stroke Networks of Ontario assume no responsibility for errors or omissions in the contents.
- These Smart Tips offer information designed for educational purposes only and are not a substitute for professional education, nor do they replace professional medical advice, diagnosis or treatment. Please consult with a physician or other appropriate health care providers regarding medical or health related diagnoses or treatment options.

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What is it?

- Resource designed for PSW's in LTC about stroke deficits and tips for safe and effective care
- 15 topics, each a single page, double sided
- Fully Illustrated
- Intended as a quick 'primer' on the topic

Completed June 2023!

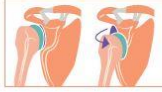


The Hemiplegic Arm and Hand


A stroke can cause weakness (hemiplegia) on the affected side. This can impact the ability to move the arm and hand, carry out functional tasks, or protect the arm from injury. Careful handling and care of the arm and hand can reduce pain and prevent complications. This is important because once it starts, pain in the arm and/or hand can become chronic and difficult to treat.

What you should know

- ✓ The shoulder is made up of small muscles and ligaments which support the joint. Many important nerves and blood vessels pass through it, making the shoulder, arm and hand vulnerable to injury.
- ✓ More than half of persons with hemiplegia will experience pain in their affected arm and/or hand. Pain may occur more frequently in persons who are dependent on others for transfers. The hand is likely to develop swelling if not well supported.
- ✓ Pain can interfere with mood, sleep, day to day activities, and overall quality of life.
- ✓ Following a stroke the arm and hand can have altered muscle tone. Both high tone and low tone limbs can cause pain:



A low tone limb will feel limp and heavy. A low tone hemiplegic arm is at risk of overstretching or tearing weakened muscles. This may cause a partial dislocation (subluxation of the shoulder), which is not correctable.



A high tone limb will feel stiff and tight. High muscle tone can pull the arm toward the chest wall, with a bent wrist and clenched hand. It can be very difficult to move the arm or hand, and to provide care. This can contribute to:




- Skin breakdown (underarm, hand)
- Difficulty in assisting with hygiene and dressing
- Limited range of motion (contractures)
- Shoulder pain

- ✓ A stroke can also cause altered sensation and perception (neglect) of the arm. As a result, a person with stroke can be unaware of the position of their arm. This can increase risk of injury. For example the arm could hang over the side of the wheelchair, injuring the shoulder as well as risking fingers getting caught in the wheel.

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The Hemiplegic Arm and Hand

Smart Tips - Always follow the care plan!

<h3>Positioning</h3> 	<ul style="list-style-type: none">• Be gentle when moving the arm or hand. Avoid pulling on the limb.• Ensure the affected arm and hand are always supported using pillows or other equipment when recommended in the care plan• In every position, ensure the elbow and forearm are placed away from the body. Keep the wrist straight or slightly extended and place the hand palm down with fingers open as much as possible.• See Smart Tips for Stroke Care- Positioning in a Chair and Positioning in Bed
<h3>Functional Mobility</h3> 	<ul style="list-style-type: none">• Never pull on the person's affected arm or lift from the underarm. Encourage the person to participate as much as they safely can. (See Smart Tips for Stroke Care- Mobility after Stroke and Transfers after Stroke)• When using a lifting device (Hoyer, ceiling lift) ensure the affected arm is positioned inside the lift sling, and supported in front of the body.• Ensure the arm is supported when the person is standing, transferring or ambulating.• If recommended by a therapist, apply an arm sling to support the weight of their hemiplegic arm during mobility activities.
<h3>Activities of Daily Living (ADL's)</h3> 	<ul style="list-style-type: none">• Be careful to always support the hemiplegic arm.• Move the arm and hand slowly and gently. This is especially important during tasks like bathing and dressing.• Monitor persons with high tone that have a clenched hand for hygiene and skin health. Look for finger nails digging in the palm (may need trimming), and cleanliness between the fingers.• Do not raise the arm above shoulder level unless the person can do so themselves.• Dressing Rule for stroke: hemiplegic arm should be "first on; last off".

Seek extra support

- ✓ All team members have a role to play in caring for the affected arm and hand. Occupational Therapists and Physiotherapists are experts in hemiplegia post stroke. It may be helpful to involve them in the person's care.

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Why was it created?

- TACLS (Taking Action for optimal Community Living after Stroke) Manual discontinued 2021
This left a gap!
- Cross-provincial working group formed to investigate the need, the desired format and then to create it
- LOTS of consultation, revision and input by end users and subject matter experts



Cognition After Stroke

Cognition refers to how a person thinks and understands. Cognition includes attention, orientation, memory, insight, impulse control, planning, problem-solving and decision-making. Cognitive changes can occur due to damage to the brain after a stroke. Mood, anxiety, fatigue, sleep, pain and medications are common factors that can also affect cognition after a stroke. As many as two-thirds of persons with stroke experience cognitive changes.

What you should know

- ✓ Changes to cognition are less visible than physical changes but can be just as or more significant.
- ✓ Individual impacts of cognitive changes vary from person to person
- ✓ Cognitive changes can affect safety and quality of life. People with cognitive changes may:
 - have difficulty remembering recent or past event (e.g. not remembering to call for assistance before getting up)
 - not always be aware of who they are, where they are and/or the date and time
 - be easily distracted (e.g. wandering off topic or task in conversation or requiring repetition of instructions)
 - need more time to think things through and respond
 - have difficulty recognizing their limitations and abilities
 - act quickly without thinking (impulsive)
- ✓ The above issues can cause distress to individuals with stroke, impacting mood, causing frustration and affecting daily activities
- ✓ Persons with cognitive changes function better with a structured routine that includes tasks that are meaningful to them

Smart Tips Always follow the care plan!

Your Approach as a Health Care Provider	
	<ul style="list-style-type: none">• Be patient• Speak slowly and clearly. Use communication tools as needed. (See Smart Tips for Stroke Care – Communication After Stroke/Aphasia)• Provide extra time to allow the person to understand and respond• Make eye contact to help the person remain engaged in the task• Collaborate with the person to establish a consistent routine• Confirm that the person understands what you are asking of them• Include the family in care

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Cognition After Stroke

Provide Guidance for Task Completion	
	<ul style="list-style-type: none">• Give short and simple instructions, one instruction at a time• Encourage or help the person to start the task• Break down the task into parts and focus on one activity at a time• Encourage the person to slow down• Repeat information and redirect as needed
Be Aware of the Person's Abilities	
	<ul style="list-style-type: none">• Get to know the person. Remember that they may not understand and appreciate their own abilities and limitations• Provide gentle reminders to the person of their current abilities since the stroke• Make sure the person is ready to participate (e.g. talking completed, pain controlled, glasses and hearing aids in place)• Supervise as necessary
Environment	
	<ul style="list-style-type: none">• Minimize noise and distractions (e.g. TV and radio)• Encourage the use of aids (e.g. calendars, journal, white board, daily plan)• Post reminders to promote safety (e.g. call for help, use your walker)• Help make the environment as safe as possible (e.g. call bell in place, mobility device nearby)• Help personalize their room (e.g. photos, familiar items)• Use labels and signs to help organize and locate items (e.g. picture of socks on drawer)

Seek extra support

- ✓ Cognition should be monitored post stroke to understand the person's abilities and develop a personalized care plan. You are the eyes and ears for the team.
- ✓ If you notice a sudden change in cognition, report it to your team immediately.
- ✓ Occupational Therapists are experts in cognition post stroke. It may be helpful to involve them in the person's care.

Smart Tip for Stroke Care 2022 was created and revised by members of the Regional Stroke Network of Ontario. The working group includes subject matter experts from the stroke without charge of the network and other stakeholders. Smart Tip, Regional Stroke Network of Ontario, 2022.

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Benefits

- Free, downloadable as a complete booklet, or as individual guides
- Single page per topic
- Quick info
- Intended for PSW's in Community and LTC but useful for many other caregivers both professional and informal

Smart Tips for Stroke Care

Fatigue After Stroke


Fatigue is a feeling of tiredness or lack of energy and is one of the most common effects of stroke. The signs of fatigue are not always obvious but it can have a significant impact on the person's ability to function day to day and participate in activities.

What you should know

- ✓ Fatigue after stroke:
 - Can affect up to half of persons with stroke
 - Often starts in the first few weeks after a stroke but can happen at any point
 - Is different from the typical tiredness that everyone feels from time to time. After a stroke, even tasks like moving, thinking, talking – can take more effort than it did before
 - Is not necessarily related to activity, does not always improve with rest and the person may constantly feel exhausted
 - May affect a person's quality of life and relationships, as family and friends may not understand how genuinely exhausted the person is
 - Can be mistaken for depression. However, it is important to know that fatigue and depression are different, and each problem needs to be recognized and managed separately (See Smart Tips for Stroke Care- Depression After Stroke)
- ✓ The intensity of fatigue does not seem to be related to the type or severity of the stroke. A person with a very mild stroke can experience fatigue.
- ✓ Other factors can have an impact on fatigue after stroke. These include:
 - Noisy or busy environments
 - Complex activities such as social events, bingo, etc.
 - Poor sleep or breathing problems while asleep (e.g. sleep apnea)
 - Poor nutrition
 - Pain
 - Some medications
 - Other medical conditions (e.g. thyroid problems)

Smart Tips

Always follow the care plan!

Encourage & Support	
	<ul style="list-style-type: none">• Encourage good communication by asking the person about their level of fatigue before, during and after an activity• Encourage participation in activities the person enjoys, even if only partially or for a short time

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Fatigue After Stroke

 Promote Healthy Habits	<ul style="list-style-type: none">• Adequate sleep (keep a regular sleep schedule)• Nutrition (Eat a healthy diet, drink enough water and avoid alcohol)• Exercise (even small amounts can help improve fatigue over time)
 Plan Ahead	<ul style="list-style-type: none">• Have the person identify which activities are the most important to them, and plan to complete those activities first• Help the person to do tasks in a way that uses less energy, such as sitting when possible• Organize the environment to make tasks easier, such as having the necessary items close by• Plan activities for when the person will have the most energy. Balance periods of activity with periods of rest. Plan extra time to accomplish a task• Don't push the person to do too much if they're having a "better day". This may leave them exhausted for the next day or two• Recognize that everyone's level of fatigue will be different and that fatigue can be unpredictable
 Celebrate Success	<ul style="list-style-type: none">• Observe the person's progress over time and highlight the success they've had in using strategies to manage their fatigue• Remind them of what they can do instead of focusing on what they can't

Seek extra support

- ✓ Fatigue after stroke is common but is manageable when using a team approach
- ✓ Occupational Therapists and Physiotherapists can help with strategies to manage fatigue. It may be helpful to involve them in a person's care
- ✓ Tell the team if you notice a change in a person's fatigue level and seek medical advice for any conditions that may be contributing to fatigue

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Want more info?

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Download it at:

<https://www.corhealthontario.ca/resources-for-healthcare-planners-&-providers>

Under “Stroke- General”

