

## **Good Practice Guide.**

### **Working with people who have had strokes and their carers - Practitioners' checklist.**

#### **Before the stroke**

We would like you to:

Give clear accessible information about what causes strokes and how they can be avoided.  
Give practical advice on lifestyle risks such as weight control, stopping smoking and healthy lifestyles.

If you can't give that advice, make sure you know how people can access it locally.  
Ensure the right health checks are made, such as blood pressure monitoring.

#### **When the stroke happens**

Explaining what has happened.

We would like you to:

Speak to us as individuals, not over our heads or just to our relatives.

Take time, listen and reassure.

Be available for appointments so everything can be explained in an unhurried way.

Make sure you can explain what a stroke is.

Make sure you can explain the signs and symptoms of stroke.

Make sure you can explain what will happen next.

Check that we have understood.

Use simple, clear language, explaining any technical terms.

Do not solely use words . use drawings and visual representations, books and leaflets.

Be aware of the types of information available and use the most appropriate ones for the situation.

Give any information in a sensitively timed way.

Help us to make a list of questions to ask the right member of staff.

#### **Hospital care and getting ready to go home**

We would like you to:

Communicate in ways that we can understand . maybe using diagrams, writing or pictures, and check that we have understood.

Try different ways of helping patients, carers and staff to communicate . e.g. white boards by each bed and pictures of food, drink etc. for us to point at if we cannot say the words.

Treat everyone as an individual and in a holistic way, each of us is different.

Help us with menus and ordering meals rather than doing it for us.

Try not to hurry us.

Ask if we are in pain and help us to manage it, not just with medication. Consider other things that might make the pain worse, such as posture and movement.

Give information on the different members of staff before we go home, e.g. doctors, nurses, therapists, stroke coordinators, social workers.

Plan going home with us (patient and carer) and ensure that we have a care plan.

Help us learn the skills we will need at home and build up our confidence.

Continue to help and motivate us in our homes.

## **Back Home - Recovery**

We would like you to:

Try to avoid making assumptions about what we can or cannot do, based on gender, age, relationships etc.

Share information (with our permission) with relevant professionals in the hospital and the community, to ensure that all services involved have an up to date picture of our health situation, so that we don't have to continuously repeat our history.

Help us to access exercise programmes and self help clubs geared to the needs of people living with stroke.

Make sure you know where emotional help, including counselling, is available.

Make sure that suitable follow up arrangements have been made after hospital discharge and the initial rehabilitation period.

Make sure that all practice staff, district nurses, therapists and social workers have access to up to date information on stroke and local services.

## **Impact on carers and family**

We would like you to:

Involve carers in care planning discussions . especially discharge planning.

Make sure carers are aware of the Stroke Team, who's who and what their roles are.

Make sure carers have information about relevant community services.

Inform carers of their entitlement to an assessment of their own needs . including their ability to care.

Ensure that carers under the age of 16 are put in touch with the appropriate children's service for an assessment of their needs.

Ensure that carers have access to training about the physical and emotional impact of stroke, lifting and handling and looking after yourself.