

TIPS & TOOLS for Everyday Living



A Guide for Stroke Caregivers

STROKE STRATEGY
of Southeastern Ontario



Ontario
Stroke
System

Cognitive & Perceptual	Mobility	Communication	Swallowing & Feeding
<p>Factors that can impact completion of activities of daily living (ADL's):</p> <ul style="list-style-type: none"> ◆ Difficulty planning & sequencing tasks ◆ Neglect (loss of awareness of the affected side) ◆ Apraxia (difficulty in making purposeful movement despite intact physical ability & understanding to perform tasks) ◆ Short attention span ◆ Decreased memory 	<p>Transfers from bed to wheelchair:</p> <ul style="list-style-type: none"> ◆ Client starting position--hips, feet & trunk. ◆ Caregiver(s) starting position--effective/safe ◆ Stroke arm--position/handling ◆ Movement--speed, client participation, caregiver co-ordination <p>Question: Has the client participated safely in transfer?</p> <p>Seating in wheelchair:</p> <ul style="list-style-type: none"> ◆ Hip position—side-to- side, front to back ◆ Trunk alignment--is the trunk straight/slumped/ twisted. ◆ Arm/hand--supported with shoulders symmetrical ◆ Head position--is head in the middle, eyes forward ◆ 90° - 90° - 90° rule--hips, knees, ankles flexed to 90° <p>Question: Does this seating position look normal/comfortable?</p>	<ul style="list-style-type: none"> ◆ Speaking style--tone of voice, speed, volume, length of sentences ◆ Positioning-- face-to-face ◆ Non-verbal communication--Calm, patient, frustrated, facial expression, body language ◆ Use of other communication methods aside from talking: (e.g. printing, pictures, drawings, alphabet board, gestures) ◆ Attentiveness to person's gestures, pointing ◆ Use of yes/no questions or choice questions ◆ Acknowledgement of difficulty ◆ Confirmation of person's response 	<ul style="list-style-type: none"> ◆ Environment--quiet, no distractions ◆ Body position--Upright, 90°, well-supported, head in midline, slightly flexed forward ◆ Oral care-- before and after eating ◆ Feeding--Eye level, small amount, slow rate, check mouth after for residue ◆ Conversation between bites ◆ Listen and look for--Coughing, throat clearing, choking, drooling, food falling out of mouth, trouble chewing, long eating time, wet, gurgly voice, complaints of pain, something sticking.

Tips & Tools to Help with Cognitive & Perceptual Challenges Impacting ADLs.....

1. SET THE STAGE: let the survivor know what you would like to do. Limit distractions. (short attention span)
2. PREPARE THE TOOLS: place them within reach, arrange them in the order they will be needed. (neglect)
3. POSITION PROPERLY: affected arm, you, the survivor. (neglect)
4. ENCOURAGE USE OF AFFECTED LIMB: assist as necessary (neglect)
5. CUE AND GUIDE: break task into small steps, demonstrate, be consistent, “hand over hand” guidance (decreased memory, short attention span, apraxia, difficulties with sequencing)
6. USE ASSISTIVE DEVICES: glasses, hearing aids, special prescribed equipment.
7. RECOGNIZE success and ENCOURAGE participation.

Note: Refer to Section 13: Activities of Daily Living in your Tips and Tools for Everyday Living Manual for further details.

Tips and Tools to Help with Mobility Challenges.....

Wheelchair Seating	Transfers
Hips well back in chair & centered	Think things through before you help with a transfer
90° rule	Use simple & concise instructions
Regularly remind or help move hips back in chair	Allow them time to think, do not rush, move slowly & gently
If you are having trouble seating someone comfortably, let the team know	Know their abilities & limits. Encourage participation as much as they can
Support the affected arm on a lap tray or other support	Provide only the assistance they need
Adjust foot rests	Assist their body to work as normally as possible
Does this look normal & comfortable?	Use good body mechanics, ask for help if needed, coordinate efforts with co-workers
	Never pull on the affected arm or under the shoulders

Tips & Tools to Help with Communication Challenges.....

Use short, simple sentences	Clarify topic
Use normal tone of voice	Print key words, use pictures, gestures, drawings
Use normal vocal volume	Pay attention to gestures & pointing
Speak face-to-face	Ask yes/no questions or choice questions
Use positive facial expressions & body language	Acknowledge difficulty
Remain patient & calm	Confirm and summarize the response

Tips & Tools to Help with Swallowing & Feeding Challenges.....

Check for correct texture	Check mouth after pills are provided ('chaser')
Minimize distractions	Elevate 60-90° for 1 hour after meals
Body position: Upright, 90°, well-supported, head in midline, slightly flexed forward	Don't comment on food textures that look undesirable to you (e.g. "Yuck"!)
Oral care before and after eating	Listen and look for: Coughing, throat clearing, choking Drooling, food falling out of the mouth Trouble chewing, long eating time Food residue in mouth Wet, gurgly voice Complaints of pain, something sticking
Feed at eye-level or below	
Small amounts--1 level tsp only	
Slow rate--wait for swallow before next bite	

Summary

- Work together to problem solve and develop a treatment plan.
- Inform each other of any changes.
- Everyone plays an important role.
- Remember other members of the health care team can be consulted such as OT,PT, SLP, and Social Work to further enhance services to improve the quality of life for the stroke survivor.



References & Resources

Heart & Stroke Foundation, Ontario Stroke Network & Ontario Stroke System. (2010). **Tips & tools** for everyday living: A guide for stroke caregivers. Toronto: Canada, Heart & Stroke Foundation of Ontario.

- www.strokestrategyseo.ca
- www.heartandstroke.ca/profed