

Introduction

With an ageing population and improving acute care, increasing numbers of Australians are surviving stroke¹. However, 87% of stroke survivors face limitations to their activities of daily living², and over 30% are under 65 years of age³, and potentially face decades living with the effects of their stroke.

To help stroke survivors navigate life after stroke, Stroke Guidelines recommend the use of generic or stroke-specific self-management programs in the community⁴. However, there is currently little literature exploring the impact of incorporating aspects of self-management into hospital services. Recent research recommends that: *'Research is required to explore a new model of stroke self management which is integrated across secondary, primary and community care and adopts a whole systems approach.'* (Parke et al 2015, p 20)

Purpose

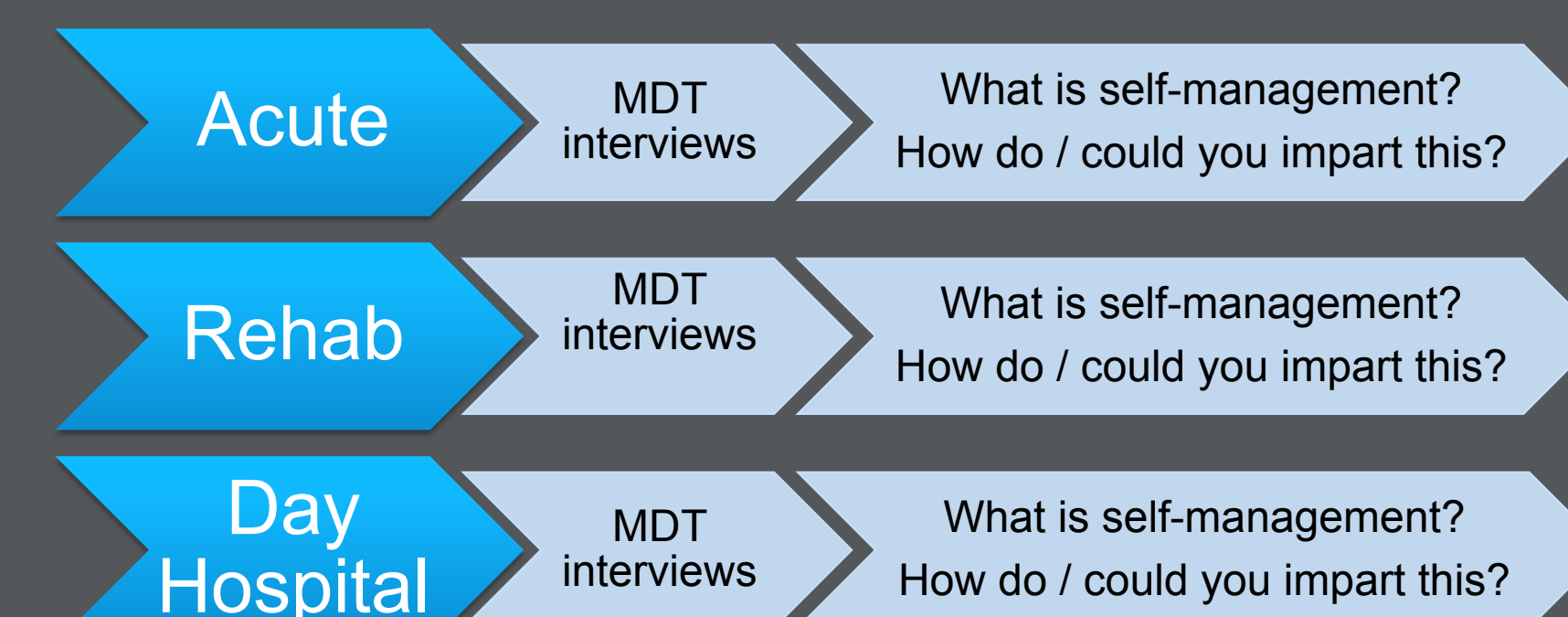
A program of research is planned to explore how self-management is conceptualised in a hospital service, which elements are currently evident, and whether there is value or feasibility in incorporating any other aspects of self-management. The links between these self-management components and those existing in community services will also be considered.

Methods

- A descriptive, qualitative design will be used across 2 studies.
- Purposive sampling will be used to recruit staff (study 1), stroke survivors and carers (study 2) across three hospital stroke programs at the Princess Alexandra Hospital: the acute stroke unit, geriatric and rehabilitation unit, and the day hospital service.
- Semi-structured focus groups and interviews will explore elements of self-management represented in figure 1. Interviews will be recorded, transcribed and thematic analysis will be used to identify key themes.

Planned studies

Study one: **staff** perspectives across hospital stroke services



Study two: **patient / carer** perspectives across hospital stroke services

- Reflections on self-management interventions in the acute service.
- Reflections on self-management interventions in acute and inpatient rehabilitation services.
- Reflections on self-management interventions in acute, rehabilitation and day hospital services.
- Reflections on self-management interventions across hospital and community experiences.

Progress

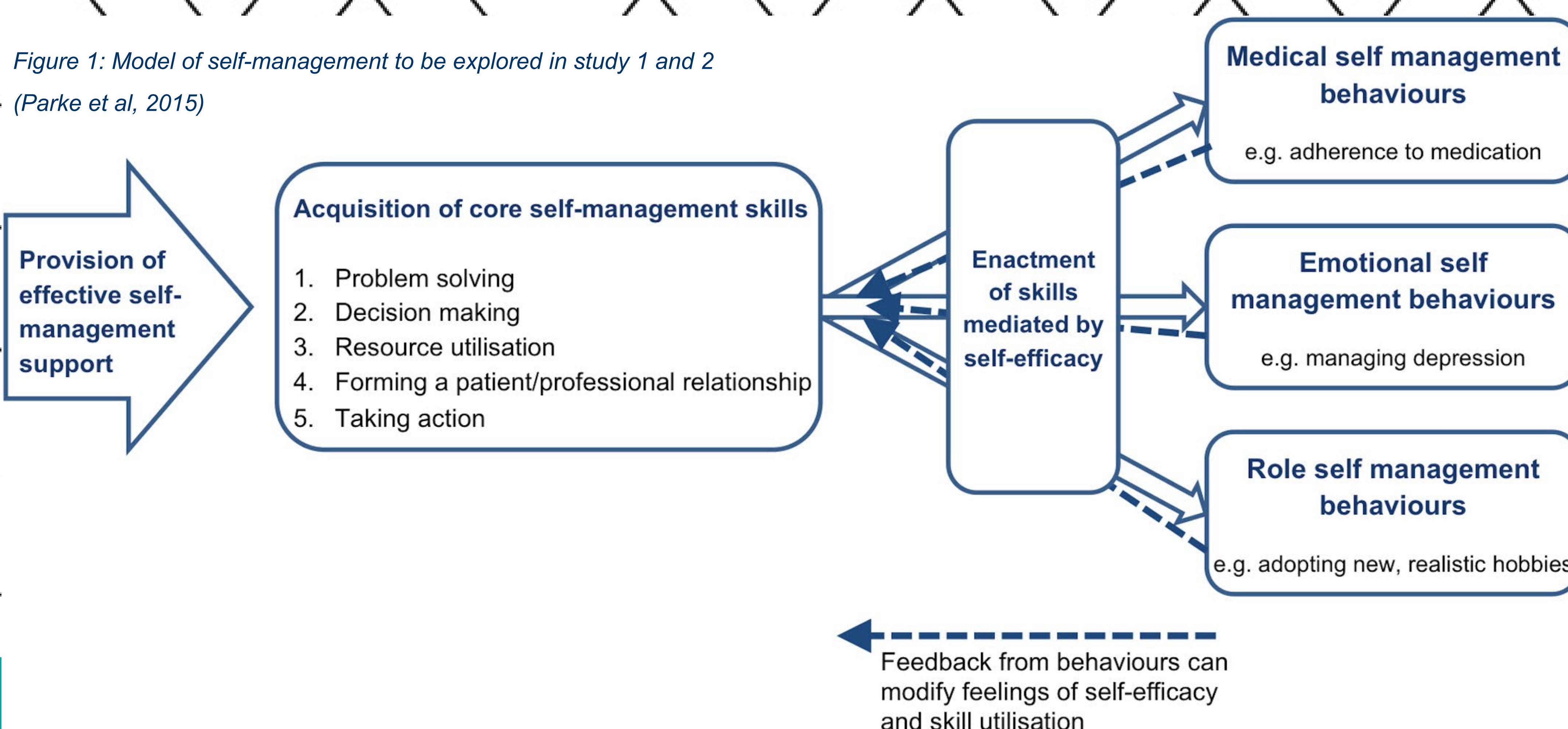
- Partnership developed with Griffith University School of Occupational Therapy.
- Ethics application commenced for study 1.

Expected Results

We expect to better understand how hospital stroke services contribute to a stroke survivor's self-management journey.

We also hope to identify whether any changes to the hospital stroke services could optimise self-management outcomes for stroke survivors.

Figure 1: Model of self-management to be explored in study 1 and 2 (Parke et al, 2015)



Literature Cited

1. Australian Institute of Health and Welfare. (2013). *Stroke and its management in Australia: An update*.
2. Stroke Foundation. (2016). *National Stroke Audit, Rehabilitation Services Report*.
3. Deloitte Access Economics. (2013). *The Economic Impact of Stroke in Australia*.
4. Stroke Foundation. (2017). *Guidelines for stroke management 2017*.
5. Parke, H., Epiphaniou, E., Pearce, G., Taylor, S., Sheikh, A., Griffiths, C., Pinnock, H. (2015). Self-management support interventions for stroke survivors: A systematic meta-review. *PLoS ONE*, 10(7).

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