

Recreation Therapy Stroke Protocol Series

“There are more than 400,000 Canadians living with long-term disability from stroke, and this number will almost double in the next 20 years. The effects range from mild to severe disability, and can be obviously physical limitations or more subtle such as memory changes. Recovery can take months or years, even for milder strokes, and many people never fully recover.”

2017, Heart & Stroke¹

This first of its kind document is a result of the hard work of various Recreation Therapy and Stroke professionals including individuals from the Recreation Therapy Stroke Professionals Network of the Southwestern Ontario Stroke Network, Georgian College, St. Thomas Elgin General Hospital, Woodstock General Hospital, and the Chatham-Kent Health Alliance.

The need for evidence based recreation therapy has increased as the needs of our clients are becoming continually complex. Evidence based practice (EBP) across professions is known to improve quality of care, provide continuity of care, improve health outcomes, as well as, act as a cost savings measure. EBP provides an opportunity for Recreation Therapists to provide their clients with interventions that are rooted in research. These protocols should be used together with the therapeutic process, and our professional standards of practice.

This document is a compilation of student work from the Georgian College Therapeutic Recreation Post Graduate program which has been vetted by Faculty and professional Recreation Therapists currently working in the field. All of the program protocols were created by the student authors and include research evidence to justify their validity. As always, it is up to you as the Recreation Therapist to use these and other protocols as a tool to create positive change for your individual clients. These protocols, coupled with further research and your clinical judgment should align your clients well for success in their health goals.

This is a living document that will continue to grow and evolve. The committee plans to invite Recreation Therapists on an annual basis, to submit evidence based protocols for consideration for inclusion in this valuable resource. This invitation will occur every February to coincide with both Therapeutic Recreation Awareness Month and Heart and Stroke Month.

We encourage you provide us with feedback or suggestions for protocols for inclusion in future editions of this publication. Feedback can be provided by emailing swosn@lhsc.on.ca .

¹Heart and Stroke. (2017). Stroke Report. Retrieved from <https://www.heartandstroke.ca>

Program Protocol – Bringing it Back to Centre
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Program Title: Bringing it Back to Centre

Statement of Purpose:

- To experience an increased state of mental well-being while improving their physical functioning and balance

Program Description:

- Participants take part in a weekly mindfulness-based meditation and gentle yoga program.
- Program is organized and facilitated by an RT who will be accompanied by a certified yoga instructor to teach each yoga lesson
- Held in an accessible, safe and welcoming studio each week will start with a five-minute guided meditation followed by 35-minute gentle yoga class and closing with a five-minute independent mindfulness exercise
- The program is intended for outpatient stroke recovery victims, who are interested in increasing physical function, improving balance and learning mindfulness coping techniques

Client Needs Program will Address:

- Increase physical functioning (endurance, flexibility, strength, mobility, range of motion)
- Increase stability and balance
- Increase knowledge of mindfulness techniques in meditation and reflection to increase overall well-being and emotional wellness

Selection/Referral Criteria:

- Must be referred to this program
- Must be recovering from stroke and living within the community
- Should express interest in rehabilitation and addressing the needs listed above
- Must complete an intake test, and registration form
- Must provide the program fee of \$15 to attend all 8 sessions
- Require transportation to and from the Yoga studio and should make personal arrangements for this

Contradicted Criteria:

- Participant is uninterested in attending
- Participant is uncomfortable with yoga and mindfulness due to their own religious affiliation
- Participant is unable to provide the \$15 fee

Program Outcomes (goals):

- Experience an increase in physical functioning (primarily in endurance, balance and/or strength)
- Experience an overall sense of well-being or tranquility through the use of mindfulness activities

Content and Process:

Content	Process
Introductions (5 minutes) Outline Program Sessions (5 minutes) Guided Meditation (5 minutes) Gentle Yoga Class (shortened to 25 minutes) Independent Mindfulness Activity (5 minutes)	Introduce recreation therapist and yoga instructor, provide opportunity for participants to share their names/backgrounds/experiences as desired. Outline the focus of each session, and possible program outcomes Conduct guided meditation Conduct gentle yoga class Provide independent mindfulness activity to each participant, or allow them to use the remaining time to reflect or meditate quietly

Staff Requirements and Responsibilities:

- One certified RT, one certified yoga instructor – individuals are encouraged to work together to implement the program
- RT must meet with each participant prior to the program to have them register and complete the intake tests
- During facilitation of the program, RT will ensure accessibility standards are met, that all participants are registered correctly and feel welcome
- All staff: first aid and CPR certified

Program Evaluation:

- Verbal and nonverbal feedback from participants, their families and their care teams
- Completion of the program evaluation form “Bringing it Back to Centre” provided by therapeutic recreation services
- Increased physical functioning will be measured on an individual basis by having participants repeat the intake tests and recording any changes in individual scores

Research:

Schmid, A.A., Miller, K.K., Van Puymbroeck, M., & DeBaun-Sprague, E. (2014). Yoga leads to multiple physical improvements after stroke, a pilot study. *Complementary Therapies in Medicine*, 22(6), 994-1000. doi:10.1016/j.ctim.2014.09.005

- Physical benefits of yoga
- Object of the study was to assess any change in the pain, range of motion, strength and endurance of the subjects after 2 sessions of yoga per week for eight weeks

- Sessions focused on breathing, meditation, relaxation and different postures and were one hour in length
- This study also had participants who had already completed their post-stroke rehab but were able to have mobility impairment that required the use of a device
- Participants had enough cognitive abilities to answer questions and follow directions
- Baseline assessments were completed prior to the study and then conducted again after the eight weeks
- Participants demonstrated decreased pain scores, improved ROM and upper extremity strength as well as improved balance without improved lower extremity strength
- Improvements physically could help reconnect the mind and the body for further improvements

Schmid, A. A., Van Puymbroeck, M., Portz, J. D., Atler, K. E., & Fruhauf, C. A. (2016). Merging Yoga and Occupational Therapy (MY-OT): A feasibility and pilot study. *Complementary therapies in medicine, 28*, 44-49.

- Authors sought to see if yoga can help compliment OT goals of balance, balance self-efficacy, and fall risk factor management in individuals with stroke
- People with chronic stroke were included in the study if they: had sustained a fall or had fear of falling, were able to stand, and hand impaired balance and were at risk for falls
- An 8 week intervention program that had 16 sessions measured by the Berg Balance Scale

RT Signature and Date:

Appendices:

Acknowledgements

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