

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 – Walk Together, Strong Together

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Reviewed & Revised: September 2023

Program Title: Walk Together, Strong Together

Statement of Purpose:

- To improve social skills, physical mobility and aid in facilitation of community integration

Program Description:

- Participants of Walk Together, Strong Together will participate in a morning leisure stroll with fellow post-stroke companions, later accompanied with activities and refreshments. The program will take place at a local Recreation Centre, with the last session meeting spot at a local conservation area. This program is ideal for outpatient stroke survivors who are looking to increase their physical activity levels and broaden their support networks within the community. Therapeutic Recreation staff will be available to ensure safety during the walking program.

Client Needs Program Will Address:

- Reduce risk of social isolation
- Increase physical activity
- Broaden support network
- Community integration skills

Selection/Referral Criteria:

- Participants must be cleared for activity by a physician and have transportation
- Participants must be able to walk independently with or without gait aid
- Participants must have suffered a stroke in the past 2 years

Contradicted Criteria:

- Participants no longer are interested in attending the program
- Participants behaviour does not allow for meaningful participation in the group
- Participants no longer meet the selection criteria for the program

Program Outcomes (goals):

- Participants will attend 75% of the sessions after the 4 weeks of programming
- 70% of participants will report that they feel they have a stronger support network as a result of the program
- 60% of the participants will state they will continue with walking after the program
- 70% of the group will report that they feel that this group will increase their future involvement in the community

Content and Process:

Content	Process
<p>Week #1 (Monday) – Travel</p> <ol style="list-style-type: none"> 1. Introduction to program 2. Guest speaker from Heart & Stroke foundation of Canada 3. 15-minute walk 4. Debrief walk 5. Light snacks and refreshments 	<ul style="list-style-type: none"> • Group icebreaker – Pick a straw • Presentation from heart and stroke representative • Walk around facility or indoor track • Discuss challenges, feelings, and overall experience of walk/presentation • Have tea, coffee and snacks
<p>Week #1 (Wednesday & Fridays)</p> <ol style="list-style-type: none"> 1. Greeting 2. Walk 3. Debrief walk 4. Social time 5. Light snacks and refreshments 	<ul style="list-style-type: none"> • Meet at facility, welcome participants, and review schedule • Walk around facility or indoor track • Discuss challenges, feelings and overall experience of walk/presentation • Discuss places travelled and experiences • Have tea, coffee and snacks
<p>Week #2 – Board Game Theme (Monday, Wednesday and Friday sessions)</p> <ol style="list-style-type: none"> 1. Greeting 2. Walk 3. Debrief walk 4. Social time 5. Light snacks and refreshments 	<ul style="list-style-type: none"> • Meet at facility, welcome participants and review schedule • Walk to local park or destination • Discuss challenges, feelings and overall experience of walk • Play desired board or card games • Have tea, coffee and snacks
<p>Week #3 – Craft Theme (Monday, Wednesday and Friday Sessions)</p> <ol style="list-style-type: none"> 1. Greeting 2. Walk 3. Debrief walk 4. Social time 5. Light snacks and refreshments 	<ul style="list-style-type: none"> • Meet at facility, welcome participants and review schedule • Walk to local park or destination • Discuss challenges, feelings and overall experience of walk • Play desired board or card games • Have tea, coffee and snacks
<p>Week #4 – Music Theme</p> <ol style="list-style-type: none"> 1. Greeting 2. Walk 3. Travel to Recreation Centre 4. Debrief walk 5. Social time 6. Light snacks and refreshments 7. Evaluation & Closing (Friday session only) 	<ul style="list-style-type: none"> • Meet at local conservation area, welcome participants, and review schedule • Complete various trails at destination • Travel back to local recreation centre • Discuss challenges, feelings and overall experience of walk • Discuss and listen to music from various decades (i.e. 60s, 70s, 80s) • Have tea, coffee and snacks • Survey evaluation of program

Staff Requirements and Responsibilities:

- Recreation Therapist and an additional staff member
- Staff have knowledge in regards to stroke, as well as symptoms and challenges relating to it
- All staff: first aid and CPR certified

Program Evaluation:

- Level of attendance of individual participation to program – number of clients who achieved 75% attendance
- Verbal and nonverbal feedback – observations made by staff during the program
- Roses and thorns debrief at last session, participants will describe positive and negative aspects of the program

Research:

Spencer-Cavaliere, N., Bowtell, D., & Langager, M. L. (2014). Informing therapeutic practice through the walking program experiences of rehabilitation clients with stroke and traumatic brain injury. *Therapeutic Recreation Journal*, 48(3), 247.

- 17 individuals within a rehab centre that were diagnosed with a stroke or a traumatic brain injury were encouraged to participate in a therapeutic walking program together
- Throughout the program, participants were able to find camaraderie, since many began to feel a sense of comfort, understanding and support from others who had gone through similar experiences
- Overall motivation for the program increased and social isolation was reduced

Gordon, C. D., Wilks, R., & McCaw-Binns, A. (2013). Effect of aerobic exercise (walking) training on functional status and health-related quality of life in chronic stroke survivors: a randomized controlled trial. *Stroke*, 44(4), 1179-1181.

- Randomized control trial was conducted with 128 stroke survivors
- Study consisted of an intervention group who walked 30 minutes, 3 times a week for 12 weeks and a control group who received message to their affected side
- 36 item short form health survey was used to assess health related quality of life as well as a 6-minute walk test for endurance
- Results showed a significant difference in the distance walked during the 6-minute walking test, an improvement in the physical health component on the short form health survey
- Overall, aerobic walking improves the quality of life in terms of physical health and should be included as a health promotion strategy for stroke survivors

RT Signature and Date:**Appendices:**

Acknowledgements

This document was made possible through the generous contributions from the following members of the SWOSN Recreation Therapy Stroke Professional Network - Protocol Subgroup

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