

Rehabilitation of Stroke Survivors with Severe Disabilities: An UK Perspective

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About 50% of all stroke survivors in the UK remain severely disabled (mRS ≥ 4) depending on healthcare services, even though, 22% survive a severe stroke (NIHSS >10). Although overall functional improvement is evidenced after a severe stroke, the impacts of rehabilitation are unclear with only limited objective data available on functional recovery. As a consequence, provision of rehabilitation post-hospital discharge remains vague. Several variables influence the process determining suitability for rehabilitation after stroke, however, decision-making in practice for rehabilitation was underdocumented. In addition, caregivers' experiences of rehabilitation for severe stroke survivors was not explored. The purpose of the study was to investigate hospital-based decision-making for provision of rehabilitation post-stroke for people with severe disabilities, measure patient-recovery in the first six months and investigate the pathway of care from caregivers' perspective. Methods: Qualitative data were collected using semi-structured interviews with hospital staff and caregivers of stroke survivors with severe disabilities. Patient outcomes were measured for severe stroke survivors and rehabilitation provided was recorded over the first six months post-stroke using an observational design. Qualitative and statistical analysis was completed for respective datasets and triangulated for final interpretation. Results: Rehabilitation for stroke survivors with severe disabilities was evidenced as disjointed and lacking a client-focus, despite a complex process of decision-making. 69% of the cohort improved significantly with functional abilities in the first six months with a noticeable involvement of healthcare professionals. Rehabilitation was valued by caregivers, although, mistrusts on the healthcare system was evident. Conclusions: The evidence of a significant functional improvement in severely disabled stroke patients is valuable in guiding the effective use of rehabilitation resources. The potential complexity in decision-making and inadequacies in the provision of rehabilitation services highlighted the need for incorporating service users' knowledge in shaping future models of care for severe stroke survivors and their caregivers.

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