

Neuro Rehab Results Newsletter

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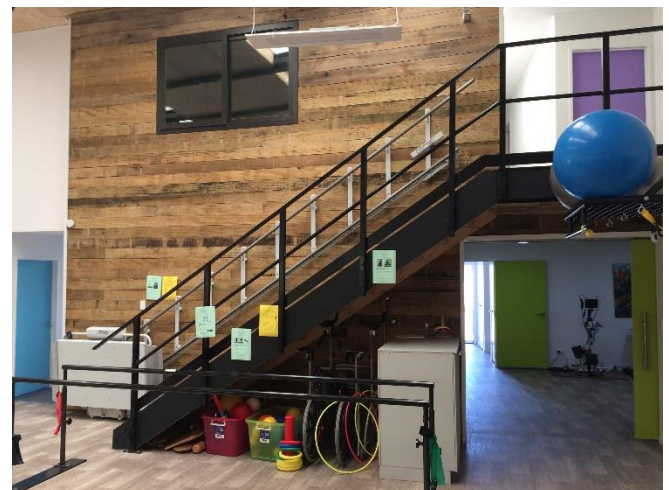
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Move to New Premises

It has been nearly a year since the last newsletter came out and that is almost entirely due to the fact that we bought premises in View Road, Wairau Valley and spent the second half of the year renovating it and then moved here in October.

We are really enjoying lots of features about our new clinic. The access is much flatter and there is more parking. Our waiting room is much sunnier. We've got some clever features like a sensor entrance door, an accessible kitchen and a wheelchair stair lift to access the upstairs. We've got more choice of treatment rooms and they all have more space than our previous clinic. We also like the touches of bright colour around and everybody loves the wooden feature wall in the gym.



If you haven't been in to our new clinic, please contact us to arrange a time to pop in to have a look. We'd love to show you around.



Client Profile: Ron Edgar

Can you tell us a little bit about yourself:

I was diagnosed with Motor Neurone Disease (MND) in 2002 and I plateaued after one year. I was using a motorised wheelchair, but was able to stand and transfer. In 2015, I had an accident in my motorised wheelchair, which capsized in a water-filled hole and tipped me onto my side. I sustained a C4 spinal cord injury; my left side is affected more than my right.



Ron and his wife Fay

Tell us about some of the things that are happening in your life at the moment:

- I live at home with my wife
- Apart from my right arm, I'm virtually disabled
- I have 24/7 care without which I wouldn't be able to function.
- I use a tablet and desktop computer – with a wireless headset to assist with using the keyboard. My speech is impaired at times secondary to the MND so this is an important form of communication to me.

Can you tell us a little bit about what you've been doing with each of the therapists you see.

- Speech Language Therapy: Sarah has been responsible for getting the tablet and helping to get it set up so I can use it to communicate. She also arranged for swallow studies at North Shore Hospital which showed that I was unable to eat/drink safely. As a result of that I now have a PEG feeding tube.

- Occupational Therapy: Shona has arranged the splinting for my arms to maintain the range in my elbows and wrists. I wear these splints at night. Shona has also been helpful liaising between all the therapists.
- Physiotherapy: In physiotherapy, I do exercises for my arms and legs. Without physio, I wouldn't have as much movement as I currently have. I'm delighted my programme has been extended. I've found the exercises to be very useful. I've gained movement in my legs that I didn't think I would achieve.



Ron during physiotherapy

What do you like best about rehab?

The frequent visits from the therapists helps break the monotony of living with a disability. I've found rehabilitation varied, which has made it more interesting to me.

What have you found helpful to stay focused on your recovery?

Frequent contact with therapists has been key. We have worked out an ongoing therapy plan that is helpful.

Spotlight on Rehab Techniques: OT

What is occupational therapy (OT)?

Occupational therapy supports people to achieve goals that hold meaning for them. The idea of occupation is applied in the broadest sense, so although it might mean returning to work, it also applies to meaningful activities people do during their day. For some people, this might be to eat independently, go to the supermarket or to be able to remember what they have done each day.

An occupational therapist, like Shona will focus on what you do and how you do it, she will ask a lot about participation. She will ask what do you do, how do you do it, what goes well, what is a problem for you, what do you want to do? She will assess how your physical and/or cognitive difficulties affect your participation in activities which are important to you – carefully observing you do a chosen activity. For example, preparing lunch reveals a lot of information about how you move and process information. Then, Shona will work with you to set goals that are specific to your important activities, and then will create a programme that will give you the tools and strategies to achieve them.

What happens in an OT session?

Occupational therapy is activity based and practicing activities in context is important so Shona will often work with you in your home, shed, bus or wherever you do things. Strategies may involve breaking an activity down and progressively practicing movements or parts of the activity. Using adaptive equipment and techniques to manage everyday tasks may also be included.

If you have cognitive difficulties, which may occur following a stroke or brain injury, Shona will develop and teach planning, organisational and memory strategies to help you to be more independent with tasks like grocery shopping or DIY. This mix of practical assistance, support, and problem solving enables you to achieve as much as you can.

Occupational therapy can make the world of difference to a person's sense of independence and purpose. The following is feedback from Garry Redshaw, who is a client, who achieved success after many practice sessions of feeding himself independently (spills included), tweaking equipment and technique, sessions focusing on using activities to increase upper limb movement and control and shows what it meant to him.

“Last night I managed to feed myself an entire meal from a dinner plate using the fork in the splint trick that you devised. People have no idea how much that means to me after being fed for almost three years... I was feeling like a foie gras goose! Thank you.”



Garry eating lunch



Some of you might have noticed that Jody Wilson, the general manager of Mobility Dogs has an office upstairs at the clinic. Suzie Mudge and Neuro Rehab Results have had a long association with Mobility Dogs and we all enjoy having Jody based here. If you have any questions about Mobility Dogs, please feel free to talk to her.

Jody.wilson@mobilitydogs.co.nz

Research Project: Developing a Measure of Therapeutic Relationship in Rehabilitation

What is a therapeutic relationship and why is it important?

Patients and therapists involved in rehabilitation both say that a therapeutic relationship is important. Research has found that when the relationship between patients and their therapists is good, patients get better outcomes.

How do we know when the relationship is good?

We have been developing a measure of therapeutic relationship to be used in research and also to help therapists to reflect on their relationship with clients.

What is the research about?

We need your help to refine this measure. We need to check that the questions make sense to people and that we are asking the right questions.

What will happen if I take part?

You will be interviewed by a researcher who will ask you a number of questions from the measure. As you answer these questions you will be asked to say out loud what you are thinking. You will also be asked about the format and wording of the questions.

Who can participate?

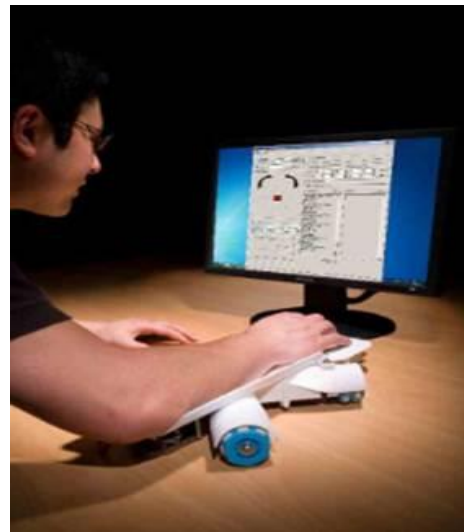
If you have a neurological condition and are or have recently been engaged in rehabilitation, then you are eligible to participate.

Who should I contact?

Christine Cummins, Researcher at AUT University; 921 9999 ext 7712 or chris.cummins@aut.ac.nz

RoboRover: A usability study

A robotic device called the RoboRover has been developed by Marcus James King of Callaghan Innovation and Richard Little of Exsurgo. It has been designed to assist with upper limb rehabilitation. This study will investigate how useful the device is for people with stroke and their therapists. The findings from this study will be used to further refine the device.



How can I help?

We would like you to be part of our test team and use the device one time and then let us know what you think about it. For example: are the instructions easy to follow? Can you perform the requested movements with the device?

Who can participate?

- People who have had a stroke more than six months ago
- If your arm movement has been affected by your stroke

Who should I contact?

If you want to take part or would like to know more you can contact:

Oscar Dolk-Arcus, Year 4 physiotherapy student at AUT University; phone 022 174 2326 or oscardolknz@gmail.com

Our exercise classes continue to be popular. Move! is on Wednesdays from 11am-12pm and is designed for people with Parkinson's Disease. Balance-Fit is for people at risk of falling and runs from 11am-12pm on Fridays. Please check out our website for more details <http://neurorehab.co.nz/therapy/> or contact us to talk about the classes 480 6464.

We are very grateful to all the AUT physio students that volunteer their time to assist with these classes.