

# VOCATIONAL REHABILITATION FOLLOWING STROKE

**STROKE CLINICAL NETWORK MASTERCLASS**

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# INTRODUCTION AND HOUSEKEEPING

- **Why is work important?**
- **What is Vocational rehab?**
- **National clinical stroke guidelines and Nice rehab guidelines**
- **What does intervention look like**
- **Working with employers to get the right outcomes**
- **Case studies**

## WHY IS WORK IMPORTANT

- Working, whether paid or unpaid, is good for our health and wellbeing
- Research indicates that high levels of sickness absence and health-related unemployment lead to poor health outcomes and increased reliance on the state
- Establishing a place in the open labour market seems to enhance recovery
- Returning to work has been identified as an important rehabilitation goal after stroke.
- 1 in 4 stroke survivors are people of working age, less than half of these people return to work.
- People of working age who have had a stroke are up to three times more likely to be unemployed 8 years after their stroke

## WHAT IS VOCATIONAL REHABILITATION

- Vocational rehabilitation is a process that enables people with disabilities or health condition or an impairment to get back to doing the things they love and make them tick
- You could be working with people with a physical, cognitive, perceptual or psychological problems which are effecting their ability to work or participate in a chosen occupation
- Returning to work
- Returning to voluntary work
- Career change
- Moving from paid to voluntary work

## POLICY AND GUIDELINES

- **Strokes cost the economy £9billion per year**
- **NICE Stroke Rehabilitation Guidelines; Return to work is highlighted as a rehabilitation outcome and should be identified as soon as possible, regularly reviewed and actively managed**
- **National Clinical Guidelines for Stroke calls for specialist rehabilitation services capable of meeting the specific health, social and vocational needs of people with stroke of all ages;**
- **In 2015 85% of post acute services do not commission VR services**

## WHAT DOES INTERVENTION LOOK LIKE

- **Establish previous roles**
- **Assess current needs - what needs working on to return to work?**
- **Support patient with decision making**
- **Establish home rehab programme**
- **Work with employer – AHP advisory fitness to work report**
- **Educate patient and employer about reasonable adjustments, condition and symptoms**
- **Once in employment regular reviews to manage issues as they arise.**

## WORKING WITH EMPLOYERS TO GET THE RIGHT OUTCOME

- **Getting a contact – either a manager, HR, Occupational Health**
- **Speaking over the phone, and meeting up in the workplace**
- **Looking at the environment, is help required? Access to work**
- **Can any home working be incorporated?**
  
- **Disability employment advisor**
- **The Shaw Trust**

## WHERE TO TURN IF IT ALL GOES WRONG

- **Keep lines of communication open**
  - Try not to be confrontational with employers
  - AHP Advisory Fitness for Work Report
- **Unions**
- **ACAS**



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