

Hull and East Riding Stroke Services

PATIENT INFORMATION PACK

This handbook is confidential. It may only be read or written in with your permission

We encourage you to share this with people who are involved in your care

New edition updated December 2015

BLOOD PRESSURE AND PULSE RECORDINGS:

DATE	READING	DATE	READING

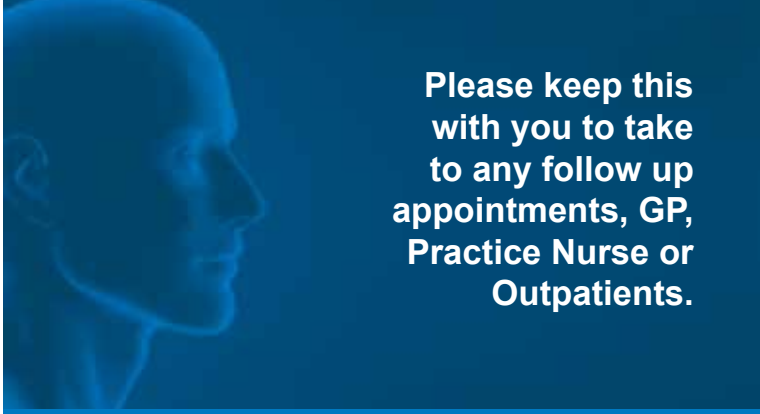
OXYGEN SATURATION

DATE	READING

**PULSE READING
KNOW AF. Y N**

DATE	READING

Stroke Risk Factor Management Plan



Please keep this with you to take to any follow up appointments, GP, Practice Nurse or Outpatients.

Patient Name:.....

Address:

Date of Stroke:.....

Type of Stroke you have had:.....

Community Stroke Nurse Co-ordinating Team,
Contact Number:

For explanations of any investigations you may have had, please refer to pages 10 to 13 of the information pack.

RISK FACTORS

There are some common problems, which can increase the risk of having a stroke. These include: High Blood Pressure, High Cholesterol, Diabetes Mellitus, Irregular Heartbeat (Atrial Fibrillation), Smoking, Heart and Vascular Disease, High Alcohol intake.

Our aim is to identify your personal risk factors and help you to reduce the risk with changes to your lifestyle and appropriate treatment.

Your risk factors have been identified as (tick):

- High Blood Pressure
-
- High cholesterol
-
- Diabetes Mellitus
-
- Atrial Fibrillation
-
- Smoking
-
- Vascular Disease
-
- Over weight
-
- Coronary Heart Disease
-
- High Alcohol intake
-
- Other

YOUR MEDICATION

Please remember to return any old prescription medicines to your Pharmacist. You should not take medicines previously prescribed before your admission to hospital as well as your new

prescription without consulting your Doctor or Pharmacist. Your Doctor will be sent information about your new prescription when you leave hospital.

Name & Strength of medicine	B/fast	Lunch	T/Time	Bed	Reasons for taking this medicine

N.B You can ask your GP to review your medication at any time

This Handbook

This handbook has been produced to provide as much useful information as possible for people who have had a stroke, their families and carers.



***East Riding of Yorkshire
Clinical Commissioning Group***



Hull Clinical Commissioning Group

Community based rehabilitation services are available to support stroke survivors and their carers. They offer advice, information and support and liase as needed with other Health and Social care professionals to ensure your care is well organised.

Community Stroke Team contact details:

[East Riding - \(01482\) 478835](tel:01482478835)


[Hull - \(01482\) 303669](tel:01482303669)

Please note this is not an emergency service but messages will be checked daily during normal working hours.

About This Handbook

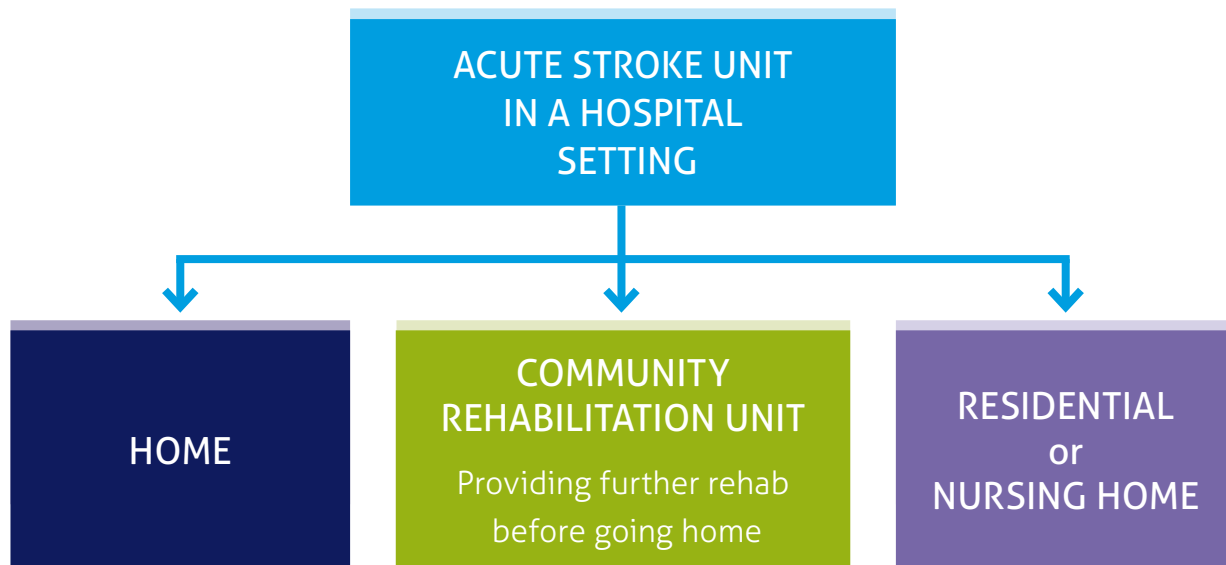
- This handbook is to help you keep a record of your care following a stroke.
- This handbook is confidential. It may only be read or written in, with your permission.
- We recommend that you take this handbook with you to all treatments and appointments, and share it with the people involved in your care.
- You can ask Health and Social care staff, for example, Nurses, Therapists and Social Workers to record information whenever you feel it would be helpful for you.
- You can also ask other people to write in it if it would be of use to you, for example a relative or friend.

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When you see this symbol  please refer to the useful contacts section located on page 42.

THE STROKE CARE PATHWAY

This flowchart demonstrates a typical pathway and some of the places you may encounter along your stroke journey.



You will be supported by Community Stroke Rehabilitation Services on your transfer from hospital to any of these places.

GOAL AND TREATMENT PLAN

These are the goals and exercises you are working on as part of your rehabilitation.

Please ask the rehabilitation team involved in your rehabilitation to write these in for you.

PROBLEM:

Date identified:

GOAL:

TREATMENT PLAN:

Signed by therapist:

Signed by patient:

Review date:

Date archived:

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INFORMATION ABOUT STROKE

WHAT IS A STROKE?

A stroke is a sudden interruption of the blood supply to a part of the brain. This is caused either by a blockage of a blood vessel or bleeding (a burst blood vessel).

The effects of a stroke depends on how much damage has occurred and what part of the brain has been affected, that is why no two people's strokes are exactly the same.

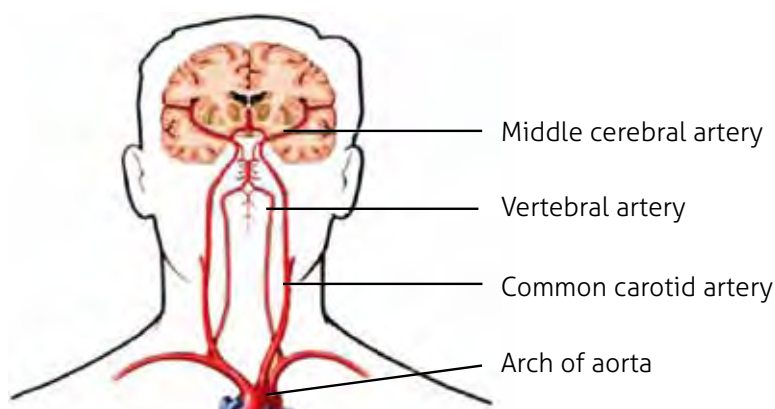
Commonly, there can be side affects such as the loss of use and altered sensation down one side of the body. There may be difficulties with communication skills including understanding language and also being able to verbalise effectively to other people. Sometimes the eyesight can be affected as well as performing everyday tasks such as problem solving and carrying out every day activities. It is also quite common for people who have had a stroke to have problems with their swallowing.

FUNCTIONS OF THE BRAIN



No two people are affected in the same way so it is important for each person to be assessed and treated according to how their stroke has affected them.

BLOOD SUPPLY TO THE BRAIN



STROKE PREVENTION

Risk factors which you can do something about yourself!


There are several major factors which are known to increase the risk of stroke, which we can do something about by making changes to your lifestyle.

These are:

- Smoking
- Lack of exercise
- Drinking too much alcohol
- Eating an unhealthy diet.

Other common causes of stroke include high blood pressure, high blood cholesterol levels, diabetes, irregular heart beat (Atrial Fibrillation), vascular disease (narrowing of blood vessels).

During your admission to the Acute Hospital, you will be screened to find out what your stroke risk factors are and the relevant treatment will be put in place.

For more information on reducing the risk, contact your Stroke Service/GP or order a free booklet from the Stroke Association, 'How to reduce your risk of a stroke.' 

BLOOD PRESSURE

High blood pressure (or Hypertension) puts strain on the blood vessels.

This can cause the vessels to thicken and deteriorate, and means that the heart has to work harder to push blood through. These changes can eventually cause serious problems, including stroke. It is important to take the medication prescribed that is helping to control your blood pressure on a long term basis.



What can you do?

- Get your blood pressure checked regularly
- Make changes to your diet to reduce salt intake, increase fruit and vegetables and reduce weight
- Ask to see your dietitian or GP for help.

CHOLESTEROL

Cholesterol is a type of fat (lipid) made by the body. It is essential for good health but too much cholesterol can lead to narrowing of blood vessels caused by fatty deposits called plaque and an increased risk of stroke and heart disease.

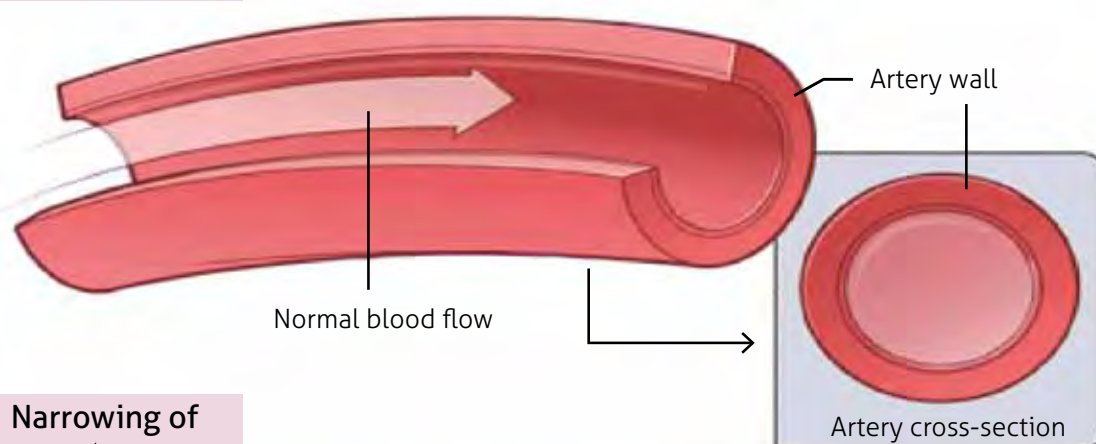
A good cholesterol level is below 3.5. Lowering cholesterol can be achieved by a combination of eating a low fat diet, drink less alcohol and taking exercise.

In addition to this, you may be prescribed a tablet called a 'statin'. These work by blocking an enzyme which is needed to produce cholesterol, lowering the amount of cholesterol in the blood stream.

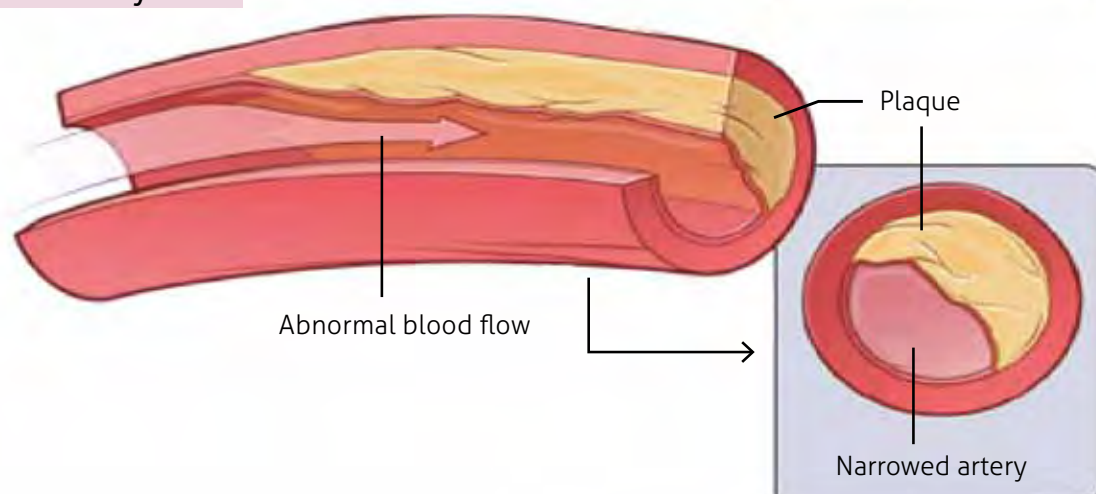
These tablets should be taken last thing at night. You should avoid drinking grapefruit juice or eating grapefruit if you are taking this medication.

Cholesterol levels are monitored by a simple blood test which is usually taken after a period of fasting.

A Normal artery



B Narrowing of artery



SMOKING

Smokers increase their risk of another stroke and many other smoking related diseases such as coronary heart disease (heart attacks) and chronic lung disease.



Stop smoking and you can significantly reduce your risk of stroke. It doesn't matter how old you are or how long you have been smoking. Nicotine in tobacco is very addictive and you may want help to support you to stop.

You can get help from:

- Hull and East Riding Smokefree ☎
- NHS Smokefree ☎

DIABETES

If you have been diagnosed with Diabetes it is important to know that good blood sugar control will help reduce your risk of further strokes.

Keeping blood sugar levels within a normal range (ask your GP or Nurse if you are unsure of your ideal range) can also reduce your risk of heart disease and other complications associated with diabetes. It is important to follow the advice of your doctor and to have your blood sugar levels monitored on a regular basis and to take any medication and dietary advice that has been given to you.



ATRIAL FIBRILLATION

Atrial Fibrillation is a fairly common condition where the heart beats irregularly, and can significantly increase the risk of stroke if left untreated.

Due to irregularity of the heart beat, blood is not pumped through the heart as effectively and blood clots can form within the circulation. If clots travel to the brain and block an artery, this causes a stroke.

If the heart beats too fast as a result of Atrial Fibrillation, it can be slowed down by medication.



Blood clot formation can be reduced by taking:

Warfarin - This type of drug is known as an anticoagulant. If your stroke has been caused by a blood clot originating from the heart, taking warfarin can reduce your risk of further stroke.

Warfarin treatment needs careful monitoring with regular blood tests to check how thin your blood is.

The blood test is called an INR (International Normalised Ratio) which is just a measure of how long it takes the blood to clot. The target range for most people with Atrial Fibrillation is 2-3. Treatment with warfarin is often life long.

For a number of reasons your doctor or consultant may decide to put you on a different range of antocoagulant tablets instead of Warfarin. These drugs are called Novel Oral Anticoagulants (NOAC) and patients on these do not require blood test monitoring. Examples of these drugs are Dabigatran, Apixaban and Rivaroxiban.

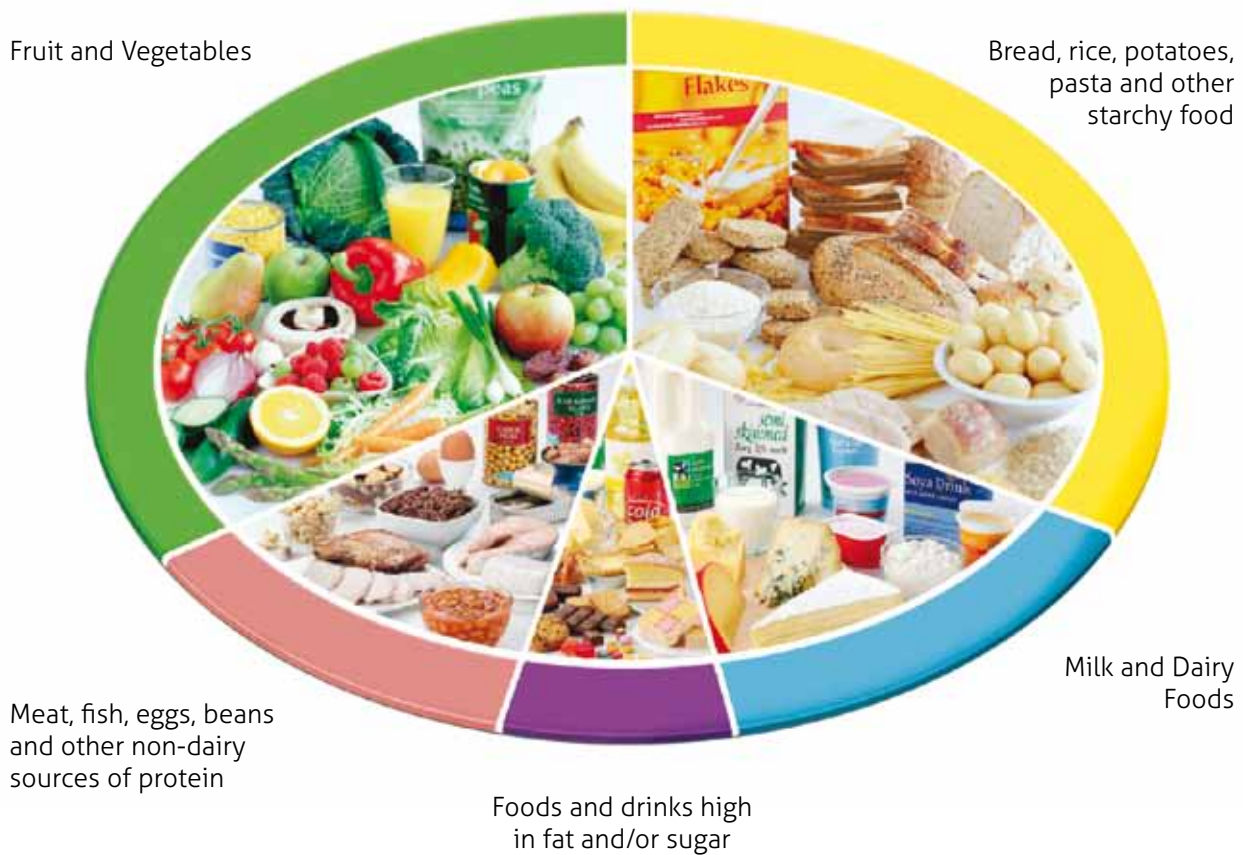
Your Doctor or Consultant will decide which treatment is right for you and this will depend on the type of stroke you have had.

Depending on what type of stroke you have had, medications such as Aspirin or Warfarin may not be suitable even if you have an irregular heart beat and no medication should be taken without the agreement of your doctor.

EATING WELL AND MANAGING YOUR WEIGHT

Dietitians can help in the secondary prevention of stroke by enabling people to take personal responsibility for their health by making more appropriate choices about food and lifestyle as an individual.

Dietitians interpret and communicate the science of nutrition in a practical way to enhance the quality of life of individuals and groups in health and disease.



- Eat regular meals
- Limit fatty foods (biscuits, cakes, pastries, red meat, hard cheese, butter and foods containing coconut or palm oil all tend to be high in saturated fats)
- Try to eat five portions of fruit and vegetables a day
- Try to reduce your intake of sugary foods and drinks
- Try to reduce your salt intake and avoid salty and processed foods.



ALCOHOL

Research has shown that heavy drinking increases the risk of stroke.

Regular, heavy drinking can raise blood pressure to consistently high levels and this increases the risk of stroke.

Men should not regularly drink more than 3-4 units of alcohol a day and women should not regularly drink more than 2-3 units a day.

'Regularly' means drinking this amount everyday or most days of the week. It is also recommended that both men and women should have at least two alcohol free days each week. Your health is at risk if you regularly exceed recommended daily limits.



1 unit = approximately:

- Half a pint of ordinary strength lager, beer or cider
- A pub measure of spirit
- A small glass of wine (125ml)
- One bottle of 'alcopop' is between 1.5 and 2.7 units depending on the bottle size and alcohol strength.

GENERAL INVESTIGATIONS YOU *MAY* HAVE

BLOOD GLUCOSE

Glucose is the sugar that is found in the blood. It is important that your blood glucose level is at the right level because if it is too high it can increase the risk of stroke. If you have been diagnosed as being diabetic you will receive further information about your treatment plan.

ANGIOGRAM

This test helps to show up blood vessel on an X-ray. A special dye, which is injected into the blood vessels, is used. This test shows if there is any narrowing of the blood vessels.

CHOLESTEROL LEVEL CHECK

Measuring your cholesterol level involves a blood test (please ask the doctor or nurse about fasting for this test). This test needs to be done at regular intervals as decided by your doctor.

CAROTID DOPPLER SCAN OF THE CAROTID ARTERIES

This test looks for narrowing of the blood vessels in your neck and can help the doctor decide whether further treatment is necessary. A probe is placed against your neck and sound waves are used to assess the width of your blood vessels and whether there is any fatty obstruction in them.

COMPUTERISED TOMOGRAPHY SCAN (CT SCAN) OF THE HEAD

A CT scan is a special kind of X-ray of your brain and involves you lying down on a couch. As the machine passes around you, this test tells the doctor what sort of stroke you have had so that he can prescribe the appropriate treatment for you.

MAGNETIC RESONANCE IMAGING (MRI) AND MAGNETIC RESONANCE ANGIOGRAM (MRA) SCAN

Magnetic Resonance Imaging (MRI) can provide a more detailed brain scan if required and the MRAngiogram can show up the main blood vessels in the brain. This can help the doctor to decide whether or not any further treatment and intervention is needed.

GENERAL INVESTIGATIONS YOU *MAY* HAVE

24 HOUR ECG TAPE

This is a heart tracing that is set up to record your heart rate and rhythm for a 24 hour period. This is helpful to pick up episodes of occasional irregular heartbeat that may be occurring.

ECHOCARDIOGRAM

This test involves a sound probe being placed against the chest wall and sound waves are used to assess the thickness of the heart wall. This test measures whether the heart is functioning properly.

PLASMA VISCOSITY (PV)

This blood test looks at the number of cells in a given volume of blood so that your doctor can assess whether your blood is too thick and therefore has difficulty in flowing through your blood vessels.

Full Blood Count is measured by a blood test and identifies the number of red and white blood cells in your blood and whether there are any abnormalities (i.e. anaemia).

Biochemical Profile - This tests all the biochemical elements in the blood and whether they are in the normal range.

THYROID FUNCTION

The thyroid gland is an organ situated in the front of the neck. The function of the thyroid gland is to produce a hormone, which controls the rate of metabolism, which is the way your body uses food for energy. If you have too much thyroid hormone in your blood, your pulse may become fast and irregular which will increase the risk of suffering a second stroke.



TERMINOLOGY

This is a list of some of the terms you may hear. Of course, only some of these may be relevant in your particular case. This list is not exhaustive and you should always ask for explanations of any thing you do not understand.

Aneurysm: A balloon-like swelling on a blood vessel wall which may burst suddenly, usually causing a subarachnoid haemorrhage.

Angiogram: A technique in which an image of blood vessels is obtained by injecting dye into the blood stream.

Anti-coagulant: A type of drug, which may be used to reduce the likelihood of blood clots forming.

Atheroma or atherosclerosis: A condition in which fatty deposits build up in the blood vessels. This restricts and disrupts the flow of blood and can contribute towards a stroke.

Atrial fibrillation: An irregular heart rhythm. This condition is a risk factor for stroke.

Carotid Endarterectomy: An operation to reduce the chance of stroke in people who have a narrowing in one of the arteries in the neck. These arteries supply blood to the brain and the narrowing means the artery is more likely to be blocked by a clot, causing a stroke.

Cerebral/cerebro: Refers to the brain.

CT Scan: A scan, which enables doctors to examine cross-sections of the brain and to build up a picture of the damage, caused by a stroke. CT stands for computed tomography, a non-invasive X-ray method.

Doppler or duplex scan: An ultrasound scan, which uses reflected sound waves to build up an image of the body.

Dysarthria: Slurred or distorted speech due to changes in the control of muscles in the mouth and throat.

Dysphagia: Difficulty in swallowing.

Dysphasia or aphasia: A condition where the stroke has affected the person's ability to use or understand speech, and his or her reading and writing skills.

Dyspraxia or Apraxia: Difficulty in planning and carrying out a series of actions. This can affect speech or movement. It is not caused by weakness or paralysis of the muscles or by failure to understand.

ECG (electrocardiogram): A routine test, which measures the rhythm and activity of the heart.

TERMINOLOGY

Echocardiogram: An ultrasound scan which uses reflected sound waves to build up an image of the heart to show things like clots or abnormalities of the heart valves.

General physician: A doctor who deals with a wide range of conditions but who may have special experience in certain areas such as stroke.

Geriatrician: A doctor specialising in the treatment and care of older people.

Hemiparesis: Weakness or partial paralysis on one side of the body.

Hemiplegia: Loss of the power of movement on one side of the body.

Hypertension: High blood pressure.

Intra-cerebral haemorrhage: Bleeding from a blood vessel within the brain.

Ischaemic stroke: A stroke caused by a blood clot, which disrupts the blood supply to part of the brain.

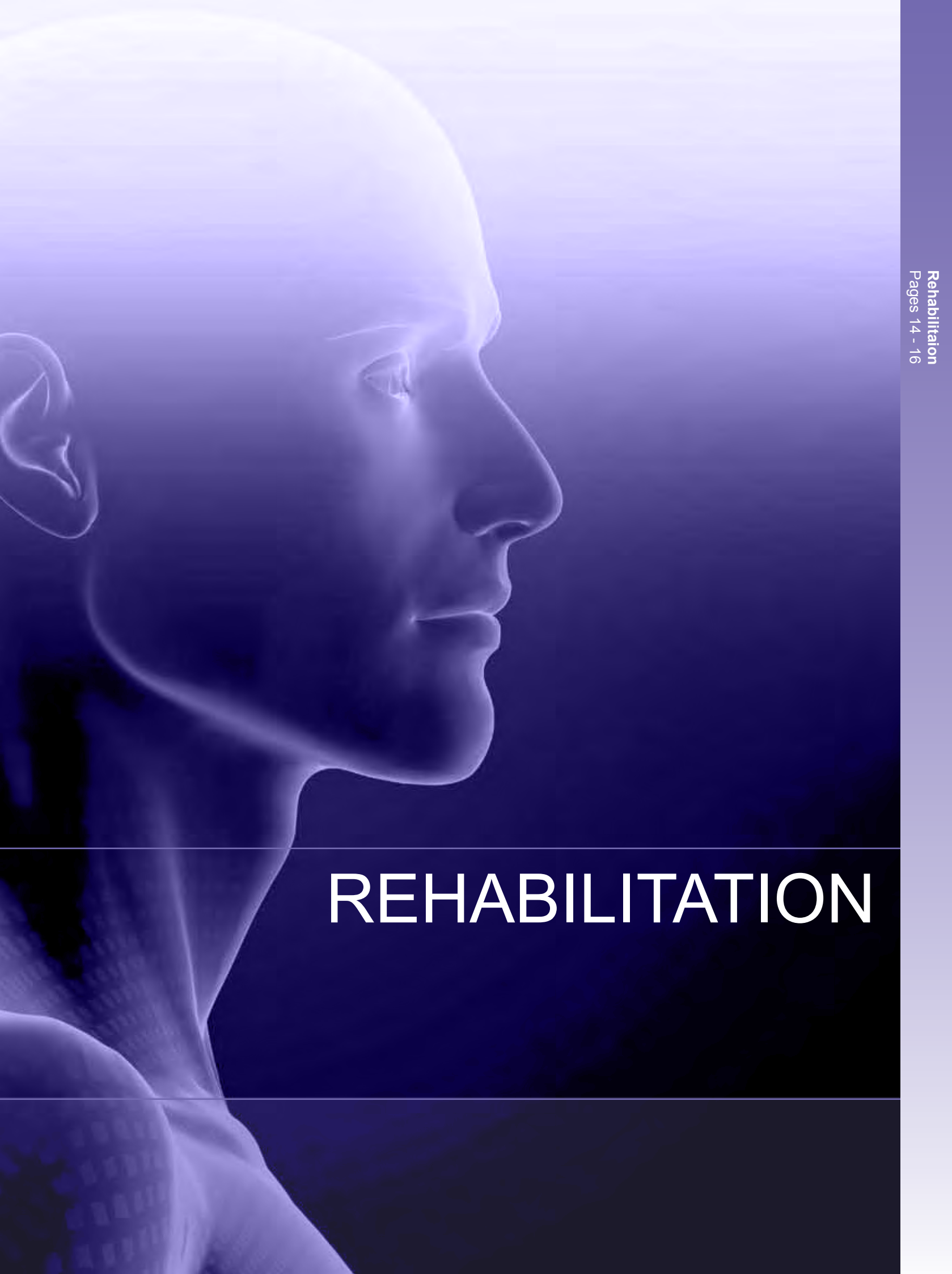
MRI scan: A type of scan which can be used to produce more detailed images of the brain than a CT Scan. MRI stands for magnetic resonance imaging.

Neurologist: A doctor specialising in disorders which affect the brain and the nervous system.

Transient ischaemic attack (TIA): A brief episode often called a mini-stroke, which occurs when the blood supply to part of the brain is temporarily cut off. There may be symptoms such as problems with speech, weakness in limbs down one side or blindness in one eye but they will disappear within 24 hours. A TIA is a warning sign that you are at risk of a stroke. Anyone who experiences any of the symptoms of a TIA should consult a doctor immediately so that steps can be taken to reduce the chance of having a full stroke.

Subarachnoid haemorrhage: A type of stroke caused by bleeding from a blood vessel into the space between the brain surface and one of the covering membranes.

Vascular: Refers to the circulatory system of blood vessels. The arteries carry oxygen and nutrients from the heart to the different parts of the body and the veins remove waste products.



REHABILITATION

REHABILITATION TEAM

Following your stroke there may be activities that you are no longer able to carry out. These activities may be things which you previously did easily and without thinking. Rehabilitation is aimed at helping you to achieve independence in carrying out these activities again. This may involve many different types of treatment and therapy requiring hard work and commitment on the part of patients and carers as well as from health workers.



The rehabilitation team is made up of many professionals who will work together with you and your carer to help you to regain as much independence as possible in the activities which are important to you. Treatments may include Physiotherapy, Occupational Therapy, Speech and Language Therapy and Dietetics and the rehabilitation plan devised for you may be delivered by therapists, therapy assistants or nursing staff in conjunction with you and your carers. This may involve therapists showing you and your family how you can practise activities or exercises within your daily routine to help you achieve maximum benefit.

PHYSIOTHERAPY

Physiotherapists use specific exercises to help you regain as much normal movement as possible such as walking, balance, moving an affected arm and hand, and learning to use both sides of your body again. It is best to start physiotherapy as soon as you are medically stable, early treatment helps to prevent complications due to immobility such as chest infections and joint or muscle stiffness and constipation.

If you are confined to a bed or chair, the therapist will start by correcting and varying your position to improve your posture, balance and comfort. As you progress, the therapist may work with you on more complicated and demanding exercises to help you achieve longer term goals. The therapist will also be able to advise you on the use of aids, such as splints (e.g. foot/ankle supports) and walking sticks. With your consent, your therapist will encourage a member of your family, or main carer, to attend the rehabilitation sessions with you.

OCCUPATIONAL THERAPY

Occupational Therapists work with you using participation in purposeful activity to help you to become more independent in your ability to carry out your essential and valued daily activities. These may include SELF CARE activities such as getting washed, dressed, moving around your home and on and off your furniture, managing

your medication, shopping and preparing and eating meals; LEISURE activities such as reading, gardening, writing, driving and socialising; PRODUCTIVE activities such as paid or unpaid work, money management, housework. Our aim is always your independence but we also aim to support you to cope with your changing ability to perform your valued activities.

This may involve assessing your ability to carry out the activities and any difficulties with attention, memory, vision, perception, mood and physical changes such as strength, coordination and sensation. It is well recognised that the use of familiar activities promotes the greatest functional recovery following stroke and therefore the occupational therapist and other members of the care team will be encouraging you to be involved in these activities as soon as you are medically stable. The therapist will establish with you your goals and develop a treatment plan using their skills in task analysis to determine the best activities to help you achieve your agreed goals.

SPEECH AND LANGUAGE THERAPY

The Speech and Language Therapist will work with you if you have any difficulty which affects your ability to communicate. The therapist will start by assessing your communication skills, including your ability to understand spoken language, to think of the correct words, produce clear speech sounds and read and write. Goals to improve your ability to communicate will then be agreed with you, which you will be able to work towards both in therapy sessions and with family and carers. This may include helping you to use strategies in order to communicate your message in a different way when you are not able to get your message across with your speech, e.g. using pictures, word lists, gestures or drawing.

Speech and Language Therapists will also work with you if you have any swallowing difficulties. They will give you advice on how to reduce the risk of food and fluid going the wrong way when you swallow and so help to prevent chest infections or pneumonia. This may involve giving you strategies to use when eating and drinking and advising you on the safest consistencies of food and drink.

SPECIALIST NURSING

Stroke Nurse Specialists are trained to support your clinical plan of care after stroke. They will ensure that your planned investigations are carried out, provide advice and support with medication and any other clinical post stroke complications. They monitor your identified stroke risk factors including signs of infections, swallowing problems and pain management and provide close monitoring of patients in community based rehabilitation.

They work closely with the Therapy Team and also provide long term support for the physical and psychological needs of stroke survivors and their carers in the community.

REHABILITATION ASSISTANTS AND CARERS

Assistants and Carers work with Nurses and Therapists to support the rehabilitation plans for every patient, helping to maximise their recovery.

THE ROLE OF THE SOCIAL WORKER

As a stroke can have long term implications for both the client and their family, Social Workers can provide support to help people to adjust to the changes that may result. Talking through problems and exploring emotional needs can help people to cope better and to make the necessary adjustments to their lives and fully engage in treatment plans and diet changes that might be required.

The Social Worker can provide information on local services, benefits and housing advice and make referrals to other agencies for equipment for independent living including Telecare and aids for sensory impairment.

The Social Worker may attend reviews and home visits in preparation for discharge planning. The Social Worker may continue to visit following your discharge home from hospital to ensure a smooth transition, or following transfer from the rehabilitation unit to the home environment. Where continued social support is required a referral can be made to Adult Social Services.

CLINICAL PSYCHOLOGY

Clinical psychologists can support you with the psychological consequences of stroke. Many changes happen as a result of a stroke and people adjust to this differently. If you are finding this difficult, Clinical Psychologists can support you with this. Family members and carers can also struggle, and Clinical Psychologists can work with them as well as the person who had the stroke.

Psychological difficulties such as depression and anxiety are common after stroke. These difficulties can impact on your recovery and rehabilitation, therefore it is important to get support with this as soon as possible. Clinical Psychologists can work with you directly or can work with other members of the rehabilitation team to support you.

After a stroke it is common for people to feel 'muddled' or have specific cognitive difficulties, such as problems with memory, concentration, planning or problem solving. Formal neuropsychological assessment by a Clinical Psychologist can increase understanding of specific strengths & difficulties. This can then be used to find strategies to help you, your carers and the rehabilitation team make adaptations to reduce the impact of these problems.



LIFE AFTER STROKE

COMMON PROBLEMS AFTER A STROKE

FEELING TIRED

Many people complain of feeling tired after they have had a stroke. This is a common complaint and can last for quite a long time in some people. Recovering from a stroke can be very hard work as the person is having to re-learn new skills and this takes a lot of mental and physical effort. It is important to eat well, drink plenty of fluids and take regular periods of rest to help with your recovery process.

FRUSTRATION

When everyday activities that were previously easy to do become difficult after a stroke it is unsurprising that the stroke survivor becomes frustrated. Sometimes this frustration builds up into anger at the situation which has resulted from the stroke. This can become difficult to manage for everyone and help should be sought from Stroke Support Nurses and the Occupational Therapist who may be able to reduce frustration by adapting activities.

CHANGES IN MOOD AND POSSIBLE PSYCHOLOGICAL EFFECTS AFTER A STROKE

No-one plans to have a stroke and it always happens suddenly so there is no warning and no time to get used to the idea. This can result in some people feeling devastated and that their life has changed. As people start to recover and gain back some of the functions that they had lost initially, they feel much more positive. It is quite natural to feel low in mood and this is a normal reaction to this situation. It is important to feel able to ask the stroke teams any questions you may have and to get the reassurance you need to help you cope.

The stroke team will monitor how you are feeling on a continuing basis and provide additional support to you and your family to help you cope with these changes should this be required. Some people find that after a stroke they feel differently about things that happen on a daily basis. Some carers and family members find that their loved one acts differently after their stroke.

Stroke may have significant impact on the survivors abilities and as a result their view of and confidence in themselves. It is therefore not surprising a period of adjustment is needed. The majority of stroke survivors are able to readjust to life as it is after the stroke. However, some stroke survivors find that they need a little help to make that adjustment.

DEPRESSION

Stroke survivors understandably often become disheartened after their stroke. However, this may progress into depression which makes it difficult for the stroke survivor to engage in rehabilitation or in daily life. Your GP or a member of the stroke team will be able to advise about appropriate treatment which may include talking therapies or medication.

ANXIETY

Some stroke survivors find that they feel very uncertain about general daily life after their stroke. This is understandable following the often sudden onset of a large change in their abilities. However, this can develop into an anxiety based condition which prevents them from making progress in rehabilitation and completing daily activities. Again, your GP or a member of the stroke team will be able to advise about appropriate treatment which may include talking therapies or medication.

All members of the medical and rehabilitation staff will be happy to discuss any concerns you may have about changes in you or your loved ones reactions or behaviour since the stroke.

COGNITIVE DIFFICULTIES

A stroke often affects how the stroke survivor understands the world around them. This includes how you see and hear, how your brain recognises people and objects, how it remembers and organises information. These difficulties are not visible when looking at the person but are just as disabling as, for example, being unable to use your arm.

The Occupational Therapist or a Clinical Psychologist can help to identify and explain the problems which are occurring for the stroke survivor and can help to adjust activities and routines to optimise their independence.

SEIZURES FOLLOWING STROKE

Approximately 15% of stroke survivors will have seizures at some point after a stroke. It is more common in people who have had a very big stroke.

Symptoms of seizure may include periods of vacant episodes, twitching or jerking of muscles and limbs and sometimes loss of consciousness for short periods.

If you have any of the above, discuss them with your GP and if he/she thinks you are having seizures then you will be treated with medication and monitored closely.

SEX AFTER STROKE

Coming to terms with what has happened to you takes time and initially you will have been focusing on the more functional aspects of your stroke such as learning to walk, talk and take care of yourself.

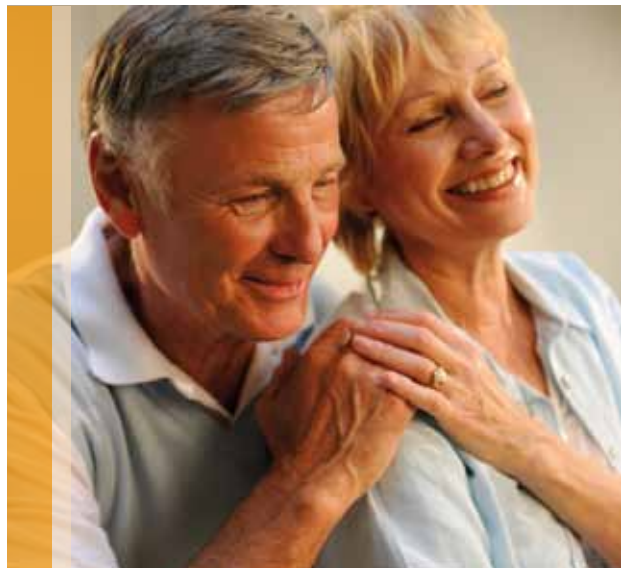
Further down the line your mind may turn to more personal matters such as establishing or renewing a sexual relationship. If being sexually active was important to you before your stroke, it is likely that you will feel that way again. However, there may be some physical or emotional issues that now have to be considered.

Stroke affects everyone differently and to different degrees so it is very unlikely for two people to have exactly the same experience.

This section looks at some of the issues involved in being sexually active after stroke and will hopefully answer some questions that you may have.

The common fear following a stroke is that having sex will bring on another stroke. There is no reason why after a couple of weeks you cannot begin to have sex if you feel ready to do so. If you feel unsure about having sex, arrange to speak to your GP.

Having a stroke does not have to mean the end of being sexually active, although changes may be involved. Physically, stroke can affect men and women in different ways.



DECREASE IN LIBIDO

Both may find that libido (sex drive) is lessened due to tiredness, anxiety, depression, doubts about self image and concerns for the future. A woman may find that sexual arousal takes longer after her stroke. There may be a loss of sensation or a degree of vaginal dryness, which may hinder sexual activity.

A man is more likely to be concerned if he finds he is unable to achieve or sustain an erection. This can happen after a stroke for many reasons but it is also common after any serious illness. After a stroke, even if one side of the body has been affected, the nerve processes involved on the unaffected side are usually enough to sustain an erection.


BLOOD PRESSURE

Many people worry that having sex will raise their blood pressure too high. In fact sex only affects your BP in the same way as exercise does. It is very rare for strokes to happen during sexual activity, but if this is worrying you, you should speak to your doctor for reassurance.

Unfortunately, some blood pressure lowering drugs can cause difficulty with erection in some men.

Therefore, it is vital that you discuss this with your doctor so that something can be done about it. Your doctor may be able to prescribe tablets in some cases to help with erection difficulty.

If you or your partner have any concerns or require further information regarding sexual activity after stroke, there are a number of ways you can get further advice and support:

- You can talk to any of the staff within the stroke service
- Discuss with your GP
- Discuss with a member of the Community Stroke team
- Relate offer a free sexual counselling therapy advice service 

You can also speak with your GP about sexual erectile dysfunction.

MEDICATION

If you are concerned that some of your medication may be interfering with your sexual performance, please discuss this with a member of the team or your GP who may be able to advise different medication or treatments.

DRIVING AND MOBILITY

Stroke can affect an individual's ability to drive safely in a number of different ways, including physical strength, decision making skills, vision, reactions and concentration.

GROUP 1 ENTITLEMENT ODL – CAR, MOTORCYCLE


TIA – No need to notify DVLA, must not drive for 1 month.

Stroke – Must not drive for 1 month. May resume driving after this period if the clinical recovery is satisfactory and after discussion with your GP. There is no need to notify DVLA unless there is residual neurological deficit 1 month after the episode; in particular, visual fields defects, cognitive defects and impaired limb function. Minor limb weakness alone will not require notification unless restriction to certain types of vehicle or vehicles with adapted controls is needed. Adaptations may be able to overcome severe physical impairment. Seizures occurring at the time of a stroke or in the ensuing 24 hours may be treated as provoked for licensing purposes in the absence of any previous seizure history or previous cerebral pathology.

Please seek further advice and support from the stroke team.

GROUP 2 ENTITLEMENT VOCATIONAL – LORRIES, BUSES, TAXIS

Stroke or TIA – Licence refused or revoked for 1 year. After this time licensing may be subject to satisfactory medical reports.

For further information contact the DVLA. 

The stroke rehabilitation team will relay any assessment findings related to driving skills to your GP to support them in their overall assessment with regards to driving skills.

A driving assessment may be recommended before you drive again. If you need to have a driving assessment this will be carried out by the Regional Driving Assessment Centre (RDAC). This is based at Highlands Health Centre, Lothian Way, Bransholme, HU7 5DD.

The stroke team will relay findings of their assessments to your GP.

You will need to advise your insurance company about your stroke or TIA.

WHEELCHAIRS

Wheelchairs are supplied through the NHS wheelchair service on a long term loan basis. A referral from your GP or Hospital Doctor is needed to access the service.


You will be assessed by a Therapist for your wheelchair to make sure you are supplied with the most appropriate model for both you and your carers needs.

The assessment will take into account factors such as whether you can push the wheelchair yourself or need to be pushed by a carer, your height and weight and that of your carer, how often the wheelchair will be used and where the wheelchair will be used.

You will be assessed for the correct model of wheelchair for your needs and any other associated equipment such as a cushion or special armrest.

Currently the Wheelchair Service does not provide self operated powered wheelchairs for outdoor use.

The NHS Wheelchair Service also offers a voucher scheme where, as an applicant for a wheelchair assessment you may be eligible to have a voucher which can be used with 'top-up' funds of your own to buy a wheelchair privately from a recognised supplier. This 'partnership option' includes maintenance funds for a three year period. At the end of this period the wheelchair is the property of the user and wheelchair services have no responsibility for the chair.

Alternatively you may want to hire a wheelchair as a temporary measure or for a special occasion and there are several local outlets which offer this service. 

Please see the list overleaf for full details of outlets.



HULL**Age UK, Hull**

Porter Street, Hull HU1 2RH

Tel: (01482) 324644

British Red Cross

Maritime House, Kingston Street,

Hull HU1 2DB

Tel: (01482) 499840/499830

Hull Council of Disabled

75 Ferensway, Hull HU1 3UW

Tel: (01482) 326140

R and S Mobility

120 Courtney Street, Hull HU8 7QF

Tel: (01482) 320289

Right Care Mobility

Vulcan Street, Clough Road, Hull HU6 7PS

Tel: (01482) 476400

Shopmobility

Main Deck (Princes Quay Shopping

Centre), Hull HU1 2PQ

Tel: (01482) 225686

The Wheelchair Hire Company

48 Highfield, Sutton, Hull HU7 4TR

Tel: (01482) 709099

Travel Extra

(within Hull Train Station)

Tel: (01482) 212832

BEVERLEY**Age UK, East Riding**

16 North Bar Within, Beverley HU17 8AX

Tel: (01482) 869181

HORNSEA**Lions**

6 New Road, Hornsea HU18 1PF

Tel: (01964) 536400

BRIDLINGTON**Woodcocks Mobility**

1 Manor Street, Bridlington YO15 2SA

Tel: (01262) 675243

MARKET WEIGHTON**Independent Living Centre**

Unit 7 Brookfield Business Park YO43 3PU

Tel: (01430) 873506

DRIFFIELD**Access Centre**

Exchange Street, Driffield YO25 6LJ

Tel: (01377) 240600

WITHERNSEA**Lions**

The Lion Shop, 189 Queen St HU19 2JR

HEDON

Please see **British Red Cross** centre in the Hull section above for main office number.


RETURNING TO WORK

After the acute illness phase and a period of rehabilitation you may feel that you would like to return to work. Your ability to return to your previous job will depend on the residual effects of your stroke and the type of job you did. Your GP and/or stroke specialist physician can help to decide if you are well enough to return to work. You should also discuss this and any options for returning to work with your employer.

Some options to consider include:

- Planned phased return
- Part-time work
- Change of post
- Transport to and from work

You may not be able to carry out the duties of your previous post but under the Disability Discrimination Act (1995) your employer is required to make reasonable adjustments to your working arrangements or conditions to ensure that you are not treated less favourably than other employees. An occupational health specialist can provide your employer with a report about the type of work you could return to.

The employment advisor at your local Jobcentre can give advice about disability, retraining and transferable skills. The Disablement Resettlement officer (also at the Jobcentre) can give advice and guidance also. 



jobcentreplus

EAST RIDING TRANSPORT

Getting around the East Riding and into the nearby shopping centres and to hospital appointments might be a problem for someone who has had a stroke.

The organisations listed below may offer a solution. In all cases call ahead of time for more information or to book. Some may have restricted hours.

MEDIBUS

Operated by East Riding of Yorkshire Council passenger services.

Provides door to door transport for medical appointments.

Tel: **08456 445 959**

BEVERLEY COMMUNITY LIFT

Individual car transport (Beverley only) and minibus facilities with wheelchair access for appointments and shopping trips. Office hours: Monday to Friday, 9am - 12noon.

Car Service: **(01482) 868082**

Minibus service: **(01482) 888226**

bclift.org.uk

HART (HOLDERNESS AREA RURAL TRANSPORT)

MiBUS service.

Beverley/Driffield: **08456 445949**

Goole: **(01405) 780344**

GOOLE GOFAR

Minibus and car service (wheelchair accessible) appointments, etc.

Tel: **(01405) 780344**

MOTORVATION

Hull and East Riding Wheelchair Accessible Transport

Tel: **(01430) 422809**

BUS SERVICES (EYMS)

Most buses are now wheelchair accessible. To check if the bus on the route you wish to take is wheelchair accessible please call: **(01482) 595959**

Stagecoach Hull: **08431 166932**

LIBERTY WALLETS

If you have difficulty with speech and/or communication these can be used to alert the bus driver that you may need assistance.

Tel: **(01482) 393939**

HULL TRANSPORT LINKS

BRITISH RED CROSS

Transport and escort service

Tel: (01482) 499 830

EAST HULL COMMUNITY TRANSPORT

Dial-a-Ride and minibus hire

Tel: (01482) 719600

H2H (Home to Hospital)

For people needing transport from home to hospital (Hull Royal Infirmary or Castle Hill Hospital).

East Hull Tel: (01482) 719604

West Hull Tel: (01482) 217006

WEST HULL COMMUNITY TRANSPORT

Tel: (01482) 217 006

GOING ON HOLIDAY?

After a stroke, a change of scene can be therapeutic in itself; however, holidays are generally not advised until 6-8 weeks after your stroke.

If you intend to fly it is always advisable to seek advice from your GP and be aware that your holiday insurance may be affected.



Your stroke nurse or rehabilitation professional will have a variety of information on a handout about holidays for people with disabilities. Please ask one of them if you would like to access this information in more detail.

TOURISM FOR ALL (FORMERLY HOLIDAY CARE)

An information service for people with disabilities wishing to take a holiday break.

Tel: 0845 124 9971

AUTOMOBILE ASSOCIATION (AA)

Publishes the AA Guide for the disabled traveller. Free for members.

Tel: 0800 262 050

Web: www.theaa.com

Email: customer.services@theaa.com



SOCIAL CARE AND SUPPORT

CARER SUPPORT NETWORKS



East Riding Carers Support ☎

Hull Carers Information ☎

They both offer:

- Practical and emotional support
- Information
- Advice
- Carers Support Groups
- Sign posting
- Home Visits
- Drop-ins across the East Riding (Contact ER Carers Support Service for information and venues) or in Hull at 30 King Edward Street
- Short Breaks
- Carers Assessments

All drop-ins offer complementary therapies, an opportunity to speak to a support worker, advice, information and provide an opportunity to talk to and get to know other carers in similar situations.

If you need help with aids, adaptations, welfare rights, home care, please contact:

East Riding Social Services ☎




Hull Social Services ☎



BENEFIT ENTITLEMENT INFORMATION

If you have had a stroke or look after somebody who has had a stroke, you might be entitled to one or more of the following:

Contact the benefits agency for:

- Carers allowance
- Personal Independent Payment (PIP) 
- Attendance Allowance (over 65) 
- Employment and Support Allowance
- Working Tax Credit or Pensioner Tax Credit 

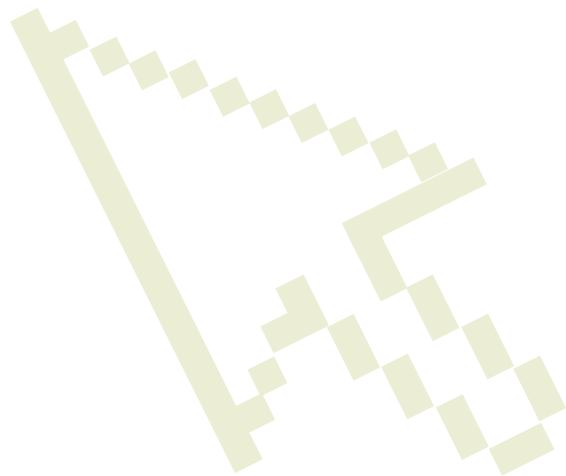
Contact your local council for:

- Council Tax Benefit or Housing Benefit
- Blue parking badge

Your social worker may also be able to advise you on how to claim.

DIRECT PAYMENTS/PERSONAL BUDGETS

These are payments made direct to you so that you can pay for the support you need, based on a Social Service assessment. You decide who is going to give you that support and how they will do it. You'll need to sign an agreement with Social Services.



EAST RIDING OF YORKSHIRE COUNCIL SOCIAL SERVICES



There are a number of services that are provided by East Riding of Yorkshire Council that are there to help to support you and your carer. There are eligibility criteria for financial assistance but everyone is entitled to an assessment of need and carer's are entitled to a carer's assessment.

You may need help with aids (equipment), adaptations to your home, arranging social care support, housing information, benefits, respite care etc.

ADAPTATIONS

If you only need simple equipment or minor adaptation you may be able to obtain these by self assessment. If you have more complex needs then an assessment visit will be required by a member of the Disability Resource Team.

SOCIAL CARE

Having an assessment will help you determine what help you may need but does not mean you have to take any specific service if you don't want to. The assessment is confidential and will be arranged at a time and place to suit you, usually your own home and you are able to have your family, carer or friend with you if you wish.

To request an assessment you should telephone **(01482) 393939** or visit a customer service centre to make a referral. Customer service centres are located in Anlaby, Beverley, Bridlington, Brough, Cottingham, Goole, Hedon, Howden, Hornsea, Market Weighton, Pocklington and Skirlaugh. Please see overleaf for a list of customer service centres.

EAST RIDING CUSTOMER SERVICE CENTRES

ANLABY

East Riding Leisure Haltemprice
Springfield Way, Anlaby HU10 6QJ

BEVERLEY

Cross Street, Beverley HU17 9BA

BRIDLINGTON

Town Hall
Quay Road, Bridlington YO16 4LP

BROUGH

The East Riding Petuaria Centre
Centurian Way, Brough HU15 1AY

COTTINGHAM

Civic Hall
Market Green, Cottingham HU16 5QG

DRIFFIELD

Council Offices
West Garth, Driffield YO25 6PT

GOOLE

Council Offices
Church Street, Goole DN14 5BG

HEDON

2 New Road, Hedon HU12 8EN

HESSLE

Hessle Centre
Southgate, Hessle HU13 ORB

HORNSEA

75 Newbegin, Hornsea HU18 1PA

HOWDEN

69 Hailgate, Howden DN14 7SX

MARKET WEIGHTON

The East Riding Wicstun Centre
Old Magistrates Court, Beverley Road
Market Weighton YO43 3JP

POCKLINGTON

The Pocela Centre
Station Road, Pocklington YO42 2QU

WITHERNSEA

243 Queen Street
Withernsea, HU19 2HH

When your details are taken and depending on your circumstances you may be directed to an organisation best suited to meet your needs or referred to one or both of the seven Adult Care Management Teams or the Disability Resource Team or both.

Please call **(01482) 393939** or visit www.eastriding.gov.uk for full contact details of the centres above.

HULL CUSTOMER SERVICE CENTRES

Kenworthy House

Hull City Council
98-104 George Street, Hull HU1 3DT
Tel: **(01482) 331000**
Textphone: **(01482) 300349**

The Wilson Centre CSC

Hull City Council
Alfred Gelder Street, Hull HU1 2AG
Tel: **(01482) 300300**
Textphone: **(01482) 300349**

Holderness Road CSC

Hull City Council
The Mount, Holderness Road HU9 2BN
Tel: **(01482) 300300**
Textphone: **(01482) 300349**

Ings CSC

Hull City Council
The Ings Centre, Savoy Road HU8 0TX
Tel: **(01482) 300300**
Textphone: **(01482) 300349**

Bransholme Customer Service Centre

Bransholme Health Centre
 Goodhart Road, Hull HU7 4DW
 Tel: (01482) 300300
 Textphone: (01482) 300349

The Orchard Centre

Hull City Council
 Orchard Park Road, Hull HU6 9BX
 Tel: (01482) 300300
 Textphone: (01482) 300349

INFORMATION POINTS**Bethune Avenue Information Point**

54 Bethune Avenue, Hull HU4 7EJ
 Tel: (01482) 300300
 Email: HS.WestHullAreaHousing@hullcc.gov.uk

Bilton Grange Information Point

13 Greenwich Avenue, Hull HU9 4UX
 Tel: (01482) 300300
 Email: bilton.grange@hullcc.gov.uk

Greatfield Information Point

34-36 Elmbridge Parade, Hull HU9 4JU
 Tel: (01482) 300300
 Email: greatfield.housing@hullcc.gov.uk

Longhill Information Point

112 Shannon Road, Hull HU8 9PD
 Tel: (01482) 300300
 Email: longhill.housing@hullcc.gov.uk

The services listed below may be of interest to people who have had a stroke and their carers.

LIFE LINE

Provides up-to-date Telecare to support/reassure and maintain an individual's independence to remain at home. The team provide up to date Telecare with a 24 hour response to emergencies from our control centre operators and community based responders. ☎

WARM ZONE

Are you able to keep warm at home? There are services which can help with home heating systems and insulation and in some circumstances may be grant funded for older or disabled people. ☎

HOME IMPROVEMENT OR DISABLED FACILITY GRANTS

Older and/or disabled people may be eligible for assistance to adapt or improve their home. If you are eligible a member of the Disability Resource Team may refer you. ☎

EAST RIDING LEISURE CENTRES

Physical activity can be important for a stroke patient to aid recovery; your Community Stroke Nurse or GP can advise you.

East Riding Leisure centres offer a wide range of activities for every level of ability. Each centre has qualified fitness instructors that can adapt an exercise programme to meet the needs of each individual. Those marked with * have staff available who have additional qualifications related to exercise after a stroke. For more information about the activities available please contact your nearest leisure centre.

EAST RIDING LEISURE CENTRES

East Riding Leisure Beverley
Flemingate, Beverley HU17 0LT
Tel: (01482) 395230
eastringleisure.co.uk/beverley

Bridlington Sports Centre
Gypsy Road, Bridlington YO16 4AY
Tel: (01262) 678077
bridlingtonsportscentre.co.uk

East Riding Leisure Driffeld *
Bridlington Road, Driffeld YO25 5HZ
Tel: (01377) 257480
eastringleisure.co.uk/driffeld

East Riding Leisure Francis Scaife
Burnby Lane, Pocklington YO42 2QE
Tel: (01759) 305052
eastringleisure.co.uk/francisscaife

East Riding Leisure Goole
North Street, Goole DN14 5QX
Tel: (01405) 769005
eastringleisure.co.uk/goole

East Riding Leisure Haltemprice *
Springfield Way, Anlaby, HU10 6QJ
Tel: (01482) 652501
eastringleisure.co.uk/haltemprice

East Riding Leisure Hornsea
Broadway, Hornsea HU18 1PZ
Tel: (01964) 533366
eastringleisure.co.uk/hornsea

East Riding Leisure South Cave
Church Street, South Cave, HU15 2EP
Tel: (01430) 422132
eastringleisure.co.uk/southcave

East Riding Leisure South Holderness
Station Road, Preston HU12 8UY
Tel: (01482) 897609
eastringleisure.co.uk/southholderness

East Riding Leisure Withernsea *
Station Road, Withernsea HU19 2QA
Tel: (01964) 614000
eastringleisure.co.uk/withernsea

HULL LEISURE SERVICES

Reduced cost Tonic cards for the over 60's are available that will provide access to all swimming pools, gyms and many keep fit and other sessions through a monthly payment.

Contact (01482) 300300 for your nearest leisure centre opening times and programme of events or see list below.

HULL LEISURE CENTRES

Albert Avenue Pools

Hull Culture and Leisure
Albert Avenue, Hull HU3 6QE
Tel: (01482) 614826

Beverley Road Baths

Hull Culture and Leisure
250 Beverley Road, Hull HU5 1AN
Tel: (01482) 615986

Costello Stadium

Hull Culture and Leisure
Anlaby Park Road North, Hull HU4 6XQ
Tel: (01482) 331315
Fax: (01482) 331321
Textphone: (01482) 300349
Kingston Fitness Suite: (01482) 331314

East Hull Pools

Hull Culture and Leisure
Holderness Road, Hull HU9 1EA
Tel: (01482) 331303

Ennerdale Leisure Centre

Hull Culture and Leisure
Sutton Road, Hull HU7 6EA
Tel: (01482) 331136

Woodford Leisure Centre

Hull Culture and Leisure
Holderness Road, Hull HU8 8JU
Tel: (01482) 331322





Hull

City Council

Following your stroke, we know you and your carer will need lots of help and support to aid your recovery. Hull City Council aims to offer the best possible services we can to people of all ages to make rehabilitation easier.

We provide services and support in the following areas:

- Specialist stroke units
- Specialist Social Worker
- Rehabilitation care
- Home care support
- Support for carers
- Aids and adaptations
- Welfare support
- Extra care housing
- Leisure and culture services
- Community Transport

Care Management

Hull City Council's care management teams can help answer your questions about anything to do with adult care. You may find you need extra help and support in your own home, adaptations to help you live more independently, housing information or welfare support. The care management teams will give you information and guidance to suit your needs.

To make it easier for you, there are four care management teams available in north, east, west and central Hull. For more information or to speak to the care management team in your area call **(01482) 300300 - press 5**.

OTHER ADVICE AND HELP

FIRE SAFETY

Humberside Fire and Rescue Service offer free home fire safety checks to identify any fire hazards in your home and offer advice on how to improve fire safety.

For more information, telephone the Community Protection section on:

Hull: **(01482) 832900**

East Riding: **(01482) 398539**

LEGAL ADVICE

The Community Legal Advice Service offer advice and support on problems as diverse as welfare benefits and tax credits, debt, employment, housing, community care, family law and immigration.

You can ring their legal advice helpline free on **0845 345 4345**.

Advocacy services

HEADWAY

The Headway UK Helpline exists to provide information, advice on sources of support, find local rehabilitation services or offer a listening ear to those experiencing problems. Headway Helpline staff are available to be contacted on: **0808 800 2244**.

For Hull and East Riding please contact **(01430) 430720**

Information about brain injury, including useful publications is also available on Headway's website at headway.org.uk

CLOVERLEAF ADVOCACY SERVICES

The service includes a combination of open access advocacy groups, both in hospital and in the community, and one to one specialist confidential advocacy.

Hull: **(01482) 880160**

AGE UK HULL

Advocacy service for people with memory problems; advocate will help people to obtain/remember information and make choices, they also will attend meetings with you and see your voice is heard by others.

Tel: **(01482) 591533** or **(01482) 324644** (based at Hull Age Concern, Porter Street).

DAY CENTRES THAT CAN BE ACCESSED VIA ADULT SERVICES

There are a number of day centres both in Hull and the East Riding. Day centres aim to improve health and well being, promote activeness to simulate physical and mental well being.

For more information please call:

East Riding: **(01482) 393939**

Hull: **(01482) 300300**



USER AND CARER REPRESENTATIVES FOR STROKE

There are stroke survivors who can offer empathy, understanding and friendship. For further details please contact The Community Stroke Teams for Hull and East Riding.

THE STROKE ASSOCIATION



The Stroke Association provides a number of services and particularly a range of information booklets and an informative website for all ages.

Stroke Helpline: **0303 303 3100**

Tel: **020 7566 0300**

Textphone: **020 7251 9096**

stroke.org.uk

The Stroke Association, Stroke House, 240 City Road, London EC1V 2PR

DIFFERENT STROKES



People of working age and under may wish to contact the Different Strokes Website for additional support and networking with younger people.

Tel: **0845 130 7172**

Fax: **(01908) 313501**

youngstrokes.co.uk

9 Canon Harnett Court, Wolverton Mill, Milton Keynes MK12 5NF

CONNECT UK



Communication disability network for people with aphasia.

Tel: **020 7367 0840**

ukconnect.org

SPEAKABILITY



Supports people living with aphasia and their carers.

Tel: **080 8808 9572**

speakability.org.uk

N.B. Your speech therapist can give you the contact details of your local speech ability group

STROKE CLUBS

Numerous stroke clubs have been set up within Hull and East Riding to offer you and your carer an opportunity to meet others whom have had a stroke, their carers and to get involved in activities that are both interesting and enjoyable.

All the clubs offer friendship and are often helpful to individuals who may feel that they are the 'only ones' to have been through the life changing event that is stroke. If there is a club listed below that is near you and you would like to go along to see what it is all about, you can either contact the person listed by that particular club, or just go on the day and introduce yourself!

STROKE CLUBS IN KINGSTON UPON HULL

OK Stroke Club

When: First Monday of the month. 11.30am - 1.30pm

Venue: Goodfellowship Inn, Cottingham Road, Hull HU5 4AT

Contact: Mervyn Ketley **(01482) 712483** or, Joyce **(01482) 376483**

Stroke Club Juniors

(This is a group formed for the needs of the younger stroke survivors aged 65 and under.)

When: First Wednesday of the month. 1 - 3pm

Contact: Paddy **(01482) 830676** or, Sue **(01482) 223432**

Freedom Stroke Club

When: Last Friday of the month. 11am - 1.00pm.

Venue: Freedom Centre, Preston Road, Hull HU9 3QB

Contact: Cheryl **(01482) 781215**

STROKE CLUBS IN EAST YORKSHIRE

Beverley Stroke Club

When: First Monday of the month. 12noon - 2pm

Contact: Judi and Tony Newlove **(01482) 864882**

Beverley Cherry Tree Centre

When: Last Thursday of the month. 1 - 3pm.

Venue: 117 Cherry Tree Lane, Beverley

Contact: **(01482) 871993** (Press 1)

Bridlington Stroke Club

When: First Wednesday of the month. 1 - 3pm.

Contact: Pauline and Raymond Joyce **(01262) 401552**

Driffield Stroke Club

When: First and third Tuesday of the month. 2 - 4pm

Venue: Cass Hall, King Street, Driffield YO25 6QW

Contact: Janet Jefferson **(01377) 256343**

Holderness Stroke Club

When: Third Tuesday of the month. 11am - 12.30pm

Venue: The Shores, Promenade, Withernsea, HU19 2DL

Contact: Mary Pridding **(01964) 613512** or **07815 807136**, Beryl Whitton **(01964) 612609**, Marianne Mead **(01964) 612101**

IMPROVING LIFE IN THE EAST RIDING OF YORKSHIRE FOR PEOPLE AGED 50+

Age UK East Riding of Yorkshire is your local charity; we provide help and advice to older people. ☎



Our services include:

Good Neighbour Scheme - The Good Neighbour Scheme run by Age UK East Riding provides support in your community, your home and by telephone and includes a befriending service.

Telephone Shopping Service - Internet shopping pilot scheme.

IT Basic Computer Skills Training - Helping you enjoy the benefits of current technology, accessing internet services to keep in touch with family and friends.

SPIC and SPAN - We offer a professional, friendly and quality cleaning service to anyone over the age of 50.

Advice and Information - Help with knowing your rights and benefit entitlement. Help with completing benefit application forms in selected areas.

Community Groups and Events - We aim to raise awareness of Age UK East Riding's services, and support groups in the community wishing to establish regular drop in sessions, coffee mornings or other activities.

Volunteering Opportunities - Opportunities to develop new skills whilst helping others.

Wheelchair Hire - Wheelchairs for hire: Current rates – daily £3.00, weekly £18.00.



INFORMATION, ADVICE AND SERVICES IN HULL FOR PEOPLE AGED 50+



Health Promotion - We are very keen on raising awareness of health issues. Leaflets are available at our Porter Street office. We have awareness sessions and campaigns to promote better health opportunities for older people. The Age UK Hull Falls Prevention team particularly focus on helping people improve their health and quality of life so that they are less likely to fall.

Information and Advice - Anyone ages 50+ can contact us for advice or information on housing, benefits, health, social issues, personal problems and many other issues that may affect them or their family's lives.

Healthy Living Centre - The purpose built Healthy Living Centre was opened with the intention of extending the range and scope of activities available to older people in Hull and to contribute to the health and well-being of the over 50's and also provide a range of services relevant to the older generation.


This goal has been achieved largely due to the effort of dedicated staff, volunteers, the support of the local authority, the CCG, local people and the business community of Hull.

The Healthy Living Centre features a multi-gym fully equipped with free weights and cardiovascular exercise machines such as cross trainers, exercise bikes and treadmills. A wet room consisting of a hydro-pool, jacuzzi and steam room that can help to ease conditions such as arthritis and osteoporosis. Social, educational and fitness classes are run for all and include line dancing, tap dancing, yoga, Tai Chi, zumba, circuit training, carpet bowls, local history plus many more.

OTHER SERVICES


A fully licensed 80 seat restaurant, open Monday to Friday between 9am and 2.30pm, offers low cost healthy meals and snacks. The charity shop sells good quality clothing, toys, bric-a-brac etc. whilst the IT suite provides the opportunity to 'surf the net'.

A chiropody clinic is available by appointment two days each week.

In addition we have Day Services and an advice office based at the Holderness Road Methodist Church, and a Home Support Service allowing older people to stay independent in their own homes by providing care and support. 



USEFUL CONTACT NUMBERS

 Please see list of useful contacts below marked as per the telephone symbol throughout this care package.

Page Ref.	Company	Contact Number	Website
4	Stroke Association	0303 3033 100	www.stroke.org.uk
6	Hull and East Riding Smokefree	0800 915 5959	www.readytostopsmoking.org.uk
6	NHS Smokfree	0800 022 4322	www.nhs.uk/smokefree
20	Relate	0300 100 1234	www.relate.org.uk
20	Hull and East Yorkshire Relate Centre	(01482) 329621	www.relatehull.org.uk
21	DVLA	0300 790 6806	www.gov.uk/contact-the-dvla
22	Hull and East Riding Wheelchair Service	(01482) 336774	www.humber.nhs.uk/services/wheelchair-service
24	Jobcentre Plus	0345 606 0234	www.gov.uk/contact-jobcentre-plus
27	East Riding Carers Support	0800 971 6844 or (01482) 396500	www2.eastriding.gov.uk/living/care-and-support-for-adults/carers/
27	Hull Carers Information	(01482) 222220	www.chcphull.nhs.uk
27	East Riding Social Services	(01482) 393939	-
27	Hull Social Services	(01482) 300300	-
28	Personal Independent Payment (PIP)	Helpline: 0345 605 6055 Textphone: 0345 601 6677	www.gov.uk/pip/overview
28	Attendance Allowance	Helpline: 0345 605 6055 Textphone: 0345 604 5312	www.gov.uk/attendance-allowance/overview
28	Working Tax Credit	Helpline: 0345 300 3900 Textphone: 0345 300 3909	www.gov.uk/working-tax-credit/overview
31	Life Line	Hull: (01482) 614300 East Riding: (01377) 256264	-
31	Warm Zone	Hull: (01482) 612908 East Riding: (01482) 396278	-
31	Home Improvement or Disabled Facility Grants	(01482) 393939	-
40	Age UK East Riding of Yorkshire	(01482) 869181	www.ageuk.org.uk/eastriding
41	Age UK Hull	(01482) 324644	www.ageuk.org.uk/hull

Please see list of useful contacts regarding services in Hull and the East Riding.

Company	Contact Number	Website
Hull and East Yorkshire Hospitals NHS Trust	(01482) 875875	www.hey.nhs.uk
The York Hospital	(01904) 631313	www.york.nhs.uk
Scarborough General Hospital	(01723) 368111	www.yorkhospitals.nhs.uk
North Lincolnshire and Goole NHS Trust	(01405) 720720	www.nlg.nhs.uk
Doncaster Royal Infirmary	(01302) 366666	www.dbh.nhs.uk
East Riding Community Hospital	(01482) 886600	www.humber.nhs.uk
Stroke Services (Hull and East Riding)	(01377) 208718	www.humber.nhs.uk/services/stroke-service
Hull Council of Disabled People	(01482) 326140	www.hcdp.karoo.net
Lifeline Services Hull	(01482) 614300	-
Lifeline Services East Riding	(01377) 256264	-
Hull City Council	(01482) 300300	www.hullcc.gov.uk
East Riding of Yorkshire Council	(01482) 393939	www.eastriding.gov.uk

Please see below list of website that may be helpful to you or your carer.

www.direct.gov.uk

The place to find government services and information.

www.carersuk.org.uk

Expert advice, information and support for carers.

www.hullcc.gov.uk

For all Hull City Council information, what's on in Hull, Hull City Council councillors, jobs and all council services.

www.differentstrokes.org

A registered charity providing a unique service to younger stroke survivors throughout the United Kingdom. Run by stroke survivors, for stroke survivors.

www.strokesassociation.org.uk

The only UK wide charity solely concerned with combating stroke in people of all ages.

www.ageuk.org.uk

The UK's largest charity working with older people.

www.ageukhull.org

Age UK Hull are a local, independent charity and offer a range of services and support locally.

www.eastriding.gov.uk

East Riding of Yorkshire Council website.

www.ageukeastriding.org.uk

Age UK East Riding: promoting independent living and active ageing in the East Riding of Yorkshire local services for local people.

www.choiceandrights.org.uk

An organisation run by and for disabled people in Hull and the East Riding of Yorkshire. Identifies and challenges discrimination.



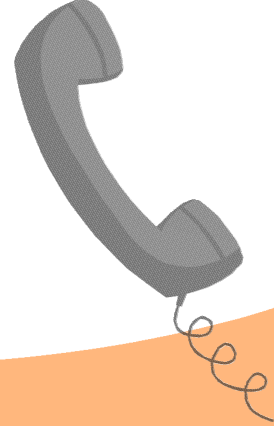
A series of horizontal blue lines for taking notes, spanning most of the page width.

One community, many languages

East Riding of Yorkshire Council will, on request, provide this document in Braille, large print or an audio version.

If English is not your first language and you would like a translation of this document in any of the following languages, please telephone the number shown.

العربية	01430 457341	Arabic
廣東話	01430 457343	Chinese
français	01430 457344	French
كوردی سورانی	01430 457345	Kurdish Sorani
Latviešu	01430 457465	Latvian
Lietuviškai	01430 457466	Lithuanian
پښتو	01430 457346	Pashtu
polski	01430 457467	Polish
português	01430 457468	Portuguese
Русский	01430 457469	Russian



If your preferred language is not English, or if you would like this document in a format for people who are blind or have sight problems, we can make arrangements to help you.

Please contact: 01482 672156

Textphone: 01482 315747

Nëse dëshironi ndihmë me këtë document, ju lutemi telefoni 01430 457351

如果您能對此文件提供幫助，請致電：

01430 457352

Eğer bu döküman ile ilgili olarak yardım istiyorsanız, lütfen 01430 457353 numaralı telefonu arayınız.

Potrzebujesz pomocy w zrozumieniu tego dokumentu? Zatelefonuj pod 01430 457367

If you would like this document in your language please tick the box and send it in an envelope to:

Bengali

আপনি যদি এই চিঠি নিজের মাতৃভাষায় পেতে ইচ্ছুক হ'ন তাহলে দয়া করে বক্সে টিক্ করার পরে খামে ভরে এই ঠিকানায় পাঠান:-

Chinese

如果您想要一份是用您的母语写成的这封信，请在空格内打钩，并把这张纸装入信封（免贴邮票）寄到下列地址：

French

Si vous voulez recevoir cette lettre dans votre langue, veuillez cocher la case et envoyer la lettre dans une enveloppe à l'adresse :

Latvian

Ja vēlaties šo vēstuli saņemt latviešu valodā, lūdzu atzīmējiet ar krustiņu un nosūtiet aploksnē uz sekojošu adresi:

Polish

Jeżeli chciałbyś otrzymać ten list w swoim języku, to proszę odhaczyć ramkę i wysłać w kopercie na adres:

Russian

Если Вы желаете получить это письмо на родном языке, пожалуйста отметите с крестиком в клетке, положите в конверт и посылайте по адресу:

Turkish

Bu mektubu kendi dilinizde isterseniz, lütfen kutuyu işaretleyip zarfın içinde adrese gönderiniz:

Swahili

Ikiwa, unahitaji hi barua kwa lugha yako kamili, tafadhali weka tiki hapa kwa kisaduku hiki, na uweke barua kwa bahasha usiweke sitampu ya posta. Na utume kwa:

Arabic

إذا رغبت الحصول على نسخة من هذه الرسالة مترجمة إلى لغتك، من فضلك ضع إشارة في المربع و ضعها في ظرف و أرسلها إلى العنوان التالي:

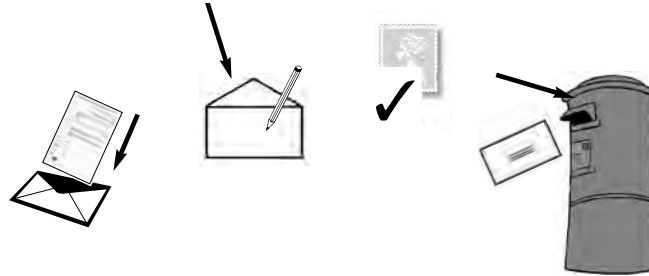
Farsi

اگر این نامه را به زبان خودتان میخواهید، لطفاً مربع مربوطه را علامت زده و آنرا داخل یک پاکت نامه گذاشته و به آدرس پستی رایگان زیرپست کنید:

Kurdish

ئەگەر ئەم نامەیهت دەوێت بە زمانی خۆت تکایە نیشانە لە چوارچۆیهکە بە دە وەله زەر فیکێ نامەدا بینێرە بۆ:

Address: Community Care Services, Language Request, Brunswick House, Strand Close, Beverley Road, Hull, HU2 9DB



The information in this document can also be made available in other formats as appropriate. Please return this completed form to the address mentioned above.

I would like to receive the information in the following format:

Alternative Format	Tick	Alternative Format	Tick
Large print	<input type="checkbox"/>	Audio cassette tape	<input type="checkbox"/>
Computer disk	<input type="checkbox"/>	Face-to-face conversation	<input type="checkbox"/>
British Sign Language	<input type="checkbox"/>	Braille	<input type="checkbox"/>
Makaton	<input type="checkbox"/>		<input type="checkbox"/>
Email (your address)			
Other method (please explain)			<input type="checkbox"/>