

Title of Intervention: Training Caregivers of Stroke Victims

Intervention Strategies: Individual Education, Supportive Relationships

Purpose of the Intervention: To provide training for caregivers in skills essential for the daily management of disabled stroke survivors

Population: Primary caregivers of stroke patients

Setting: Stroke rehabilitation unit in Bromley, England; health care facility-based, home-based

Partners: Stroke Rehabilitation Unit of Hospital

Intervention Description:

- Individual Education: Caregivers received 3-5 education sessions depending on need. Each session lasted 30-45 minutes. The session included targeted information on stroke and tailored hands-on training. Training included lifting and handling techniques, facilitation of mobility and transfers, continence, nutrition, positioning, gait facilitation, personal activities of daily living and communication.
- Supportive Relationships: A hospital team conducted a “follow through” session at home to adapt skills to the home environment. Counseling and advice were given about local resources.

Theory: Not mentioned

Resources Required:

- Staff/Volunteers: Nurses, therapists
- Training: Not mentioned
- Technology: Not mentioned
- Space: Space for individual education sessions and hands-on learning
- Budget: Not mentioned
- Intervention: Stroke information, equipment for hands-on training
- Evaluation: Questionnaires

Evaluation:

- Design: Randomized controlled trial
- Methods and Measures:
 - Patient and caregiver demographics
 - Patient stroke subtype
 - Modified Rankin scale, Bathel Index, Frenchay Activities Index measured patient function
 - Hospital anxiety and depression scale for patient's mood
 - EuroQol visual analogue scale for patient and caregiver quality of life
 - Estimations of pre-stroke function and quality of life
 - Patient death or institutionalization outcome
 - Caregiver health profile, functional status and quality of life measurements
 - Frenchay activities index for caregiver function and social activities
 - Caregiver hospital anxiety and depression scale
 - Caregiver burden scale for emotional health

Outcomes:

- Short term Impact: There were no significant differences between training and control group for functional abilities. Caregivers in the training group had higher satisfaction with rehabilitation and instruction in looking after the patient. Caregiver training was associated with significant cost reductions over one year.
- Long Term Impact: There were no significant differences between training and control group for mortality or institutionalization. Patients with caregivers in the training group had significantly improved quality of life and mood at 3 and 12 months. There was a significant reduction in burden of care and significant improvement of quality of life and mood of caregivers at 3 and 12 months.

Maintenance: Not discussed

Lessons Learned: Training caregivers in basic skills is feasible during stroke rehabilitation. Training reduces burden of care, anxiety and depression in caregivers. It also improves quality of life and satisfaction with care among caregivers. Training improves quality of life and mood in patients and caregivers. Caregiver training has the additional advantage of reducing the costs of stroke care.

Citation(s):

Kalra, L., A. Evans, et al. (2004). "Training carers of stroke patients: randomised controlled trial." *BMJ* 328(7448): 1099.