



# **Victoria Stroke Recovery Association**

**Part 1 of 5**

**Self Management Program**

**For Stroke Survivors and Care Partners**

**2024**

# Self Management

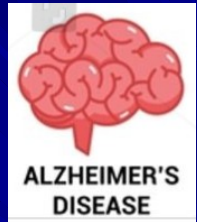


# Impact of Chronic Disease



*Chronic diseases include:* heart disease, cancer, **stroke**, arthritis, asthma, lung disease, diabetes, hypertension, osteoporosis, multiple sclerosis, Parkinson's disease...

Chronic disease results in pain, debilitation, disability, dependence, lost physical function, and less mobility, etc.



# Self-Management

What self - management means to a stroke survivor and/or care partner experiencing a chronic stroke disease is engaging in **activities** that protect and promote a **healthy life**, monitoring and managing the impacts of illness on **functioning, emotions** and **interpersonal relationships** and adhering to **treatment regimes**.



# Self-Management Program (SMP) Benefits for Stroke Survivors and Care Partners...

Builds **confidence** (self-efficacy) to perform 3 tasks

- Disease management
- Role Management
- Emotional Management

SMP can **change behaviors**,  
improved health status and  
health care utilization

A chronic disease SMP can

be a lifetime task. **One cannot not manage.**





# SMP Also Encompasses

The stroke survivor and **health professional team** working together



Often involves the **family and/or friends** as a support **team or network**



An holistic approach to wellness; **physical, mental, emotional, social, spiritual parts** are seen to be **interconnected** and need to be treated as a **whole person** for good health



Use of **Pro-active and Adaptive Strategies** that aim to **empower** the individual



# Stroke Survivors Increasingly Want to retain **Independence**

More stroke survivors believe...

- They have a **“right”** to take part
- They are **capable** of taking part with the right supports.
- Stroke survivor **assertiveness** is necessary... and needed.

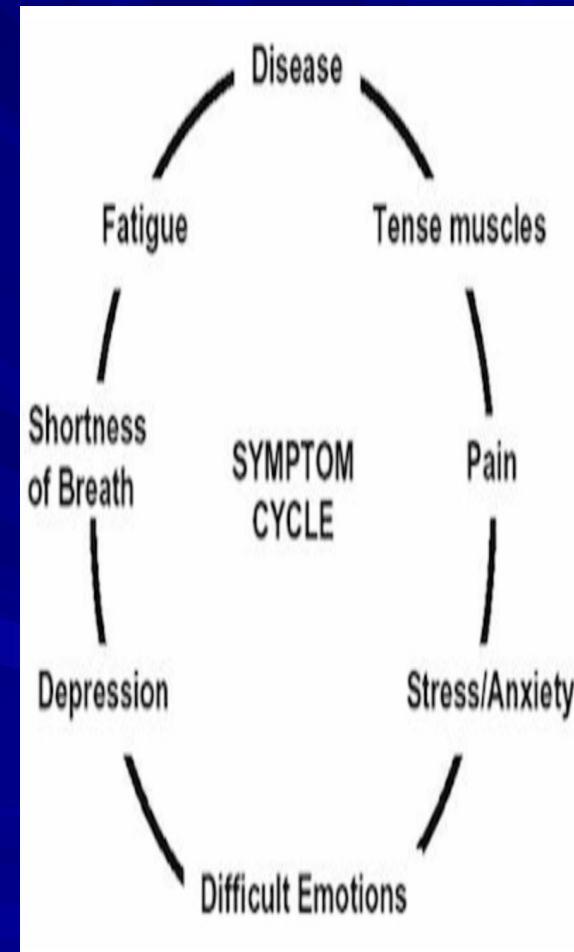


# Chronic Disease Self-Management Assumptions

Patients with different chronic diseases have **similar self-management problems** and disease related tasks.

Stroke survivor can learn to take **day-to-day responsibility** for their diseases.

Confident, knowledgeable stroke survivors practicing self-management will experience **improved health status** and **use fewer health resources**.





# Self Management Program Framework

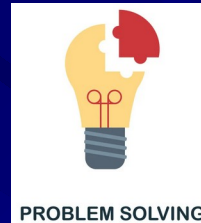
Stroke survivors **accept responsibility to manage** or co-manage their own disease conditions.

Stroke survivors become **active participants** in a system of coordinated health care, interventions and communication.

Stroke survivors are **encouraged to solve their own problems** with information, but not orders, from professionals.

# Self Management Skills

Problem Solving



Decision – making



Resource Utilization



Care partner relationships



Action – planning

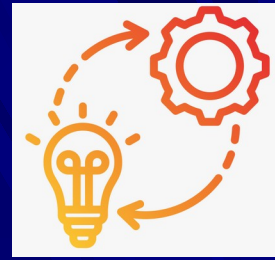


Self - tailoring





# Self Management Skills/Techniques



## Skills:

1. Problem Solving
2. Decision Making
3. Resource Utilization
4. Care Partner Relationships
5. Action – Planning
6. Self Tailoring

## Techniques:

- Medications
- Physical Activity
- Managing Fatigue
- Better Breathing
- Working with Health Professionals
- Using your mind
- Communication
- Healthy eating
- Understanding Emotions

# Self Management Means...

Taking care of your illness with **techniques/skills** from (using medicines, exercise, diet, technology, health care team partnerships)

Carrying out **normal activities** (life 101, chores, social life, etc.)

Managing **emotional changes** (anger, uncertainty about the future, changed expectations and goals, and depression)

*It means having a combination of ...*

**SKILLS, SUPPORT, PRACTICE AND CONFIDENCE**



# Remember:

You are the **Captain** of your Own Boat !



“You cannot control the direction of the Winds, but you can **adjust your sails**”





# **Victoria Stroke Recovery Association**

## **Part 2 of 5**

### **Self Management Program**

**For Stroke Survivors and Care Partners**

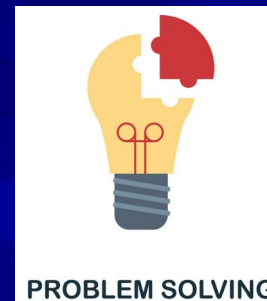
**2024**

# Agenda Part 2 of 5

Review of Self management

Skills and Techniques

Problem Solving



Decision Making

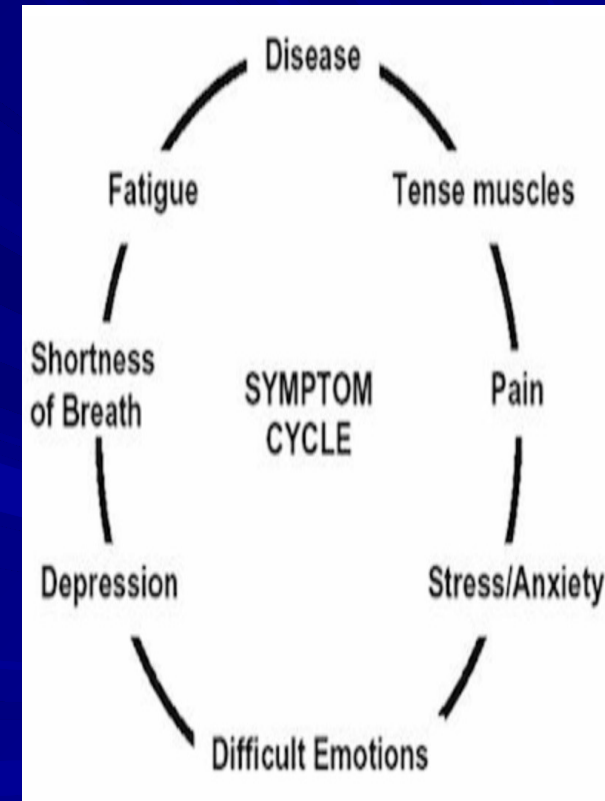


# Chronic Disease Self-Management Assumptions

Patients with different chronic diseases have similar self-management problems and disease related tasks.

Stroke survivor can learn to take day-to-day responsibility for their diseases.

Confident, knowledgeable stroke survivors practicing self-management will experience improved health status and use fewer health resources.



# Self Management Framework

Stroke survivors accept responsibility to manage or co-manage their own disease conditions.

Stroke survivors become active participants in a system of coordinated health care, intervention and communication.

Stroke survivors are encouraged to solve their own problems with information, but not orders, from professionals.

*Sources: Stanford University Patient Education Center; Center for Aging (NCOA)*

# Self Management Means...

Taking care of your illness with a combination of skills and techniques (using medicines, exercise, diet, technology, health care team partnerships)

Carrying out normal activities (life 101, chores, social life, etc.)

Managing emotional changes (anger, uncertainty about the future, changed expectations and goals, and depression)

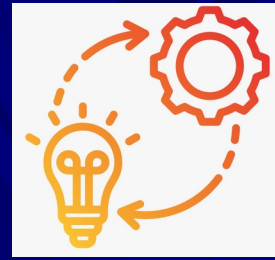
*It means having a combination of ...*

**SKILLS, SUPPORT, PRACTICE AND CONFIDENCE**





# Self Management Skills/Techniques



## Skills:

1. Problem Solving
2. Decision Making
3. Resource Utilization
4. Care Partner Relationships
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6. Self Tailoring

## Techniques:

- Medications
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**Skill:**

# **Problem Solving Process**



**PROBLEM SOLVING**

# Problem Solving Process

1) Clearly

**define**

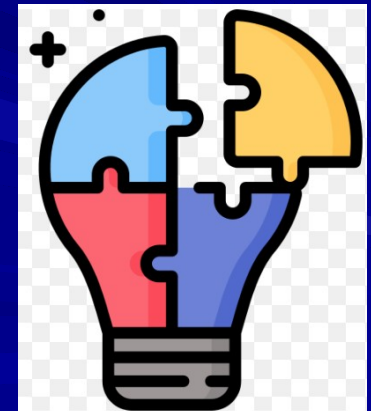
problem



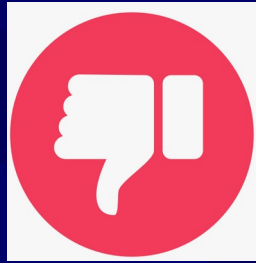
2) List **idea's**



3) **Select** an idea

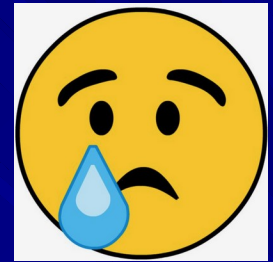


# Problem Solving Process (cont)



4) **Evaluate** results

5) **Substitute** another idea



6) Use **other resources**  
or **lastly accept** problem may  
**not be solvable now!**

**Skill:**

## **Decision Making Process**





# Decision Making Process

1) Identify **Options**

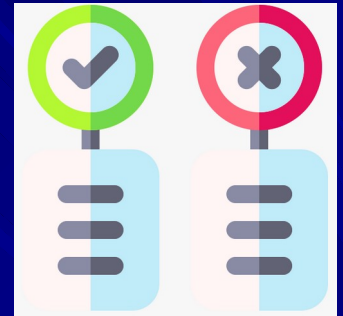
2) List **Pros and Cons** of each option

3) **Score** each statement (1 – 5)

4) Find **highest** cumulative score. **(+)**



5) **Gut Test** – what feels right for you.



DECISION MAKING:		SHOULD I SEE A PHYSIOTHERAPIST TO IMPROVE MY MOBILITY?	
PRO'S	SCORE (1-5)	CON'S	SCORE (1-5)
My doctor referred me	5	May not establish a good relationship	2
May help my mobility, prevent future falls	3	Can't preform exercises	3
Provide fall recovery techniques	4	Fall recovery technique don't work	3
Balance Improvement Exercises	3	balance get worse, falls increase	2
Teach Core Strength Exercises	4	core strength decreases	1
PRO'S TOTAL:	19	CON'S TOTAL:	11
PRO'S ARE GREATER THAN CON'S			
DECISION RESULT: SEE A PHYSIOTHERAPIST			
ASK THE QUESTION: "DOES THIS MEET THE 'GUT TEST' ?" – I feel that I need assistance, to prevent another fall			



# **Victoria Stroke Recovery Association**

**Part 3 of 5**

**Self Management Program**  
**For Stroke Survivors and Care Partners**  
**2025**

# Agenda Part 3 of 5

**Skills:**

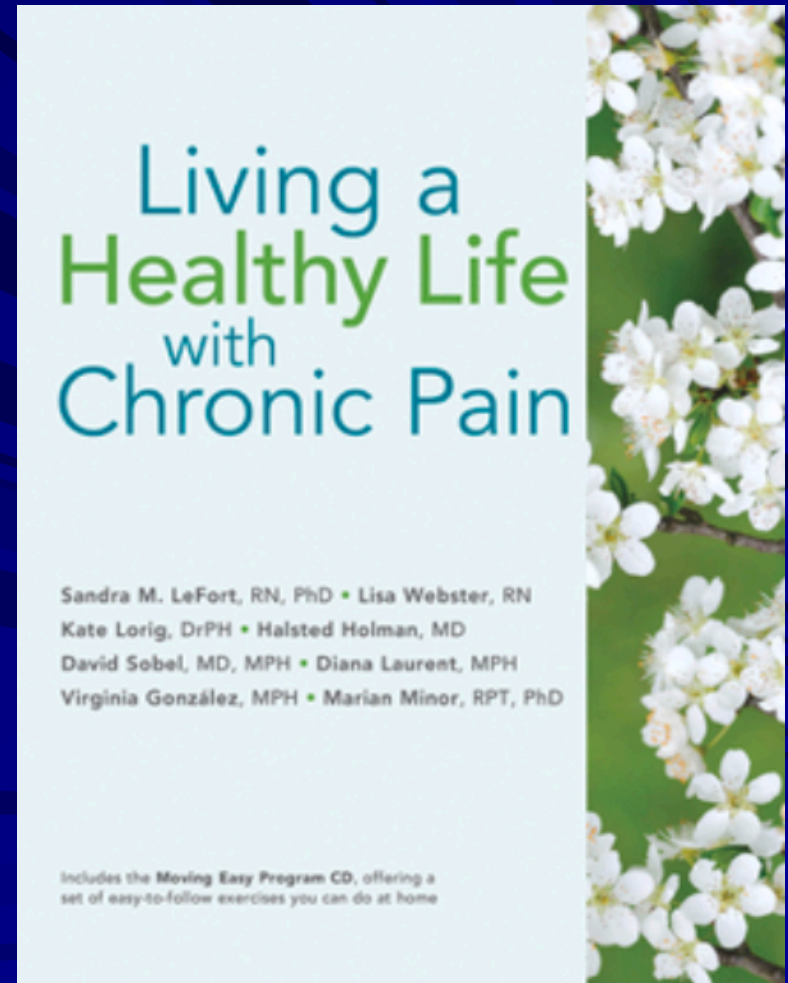
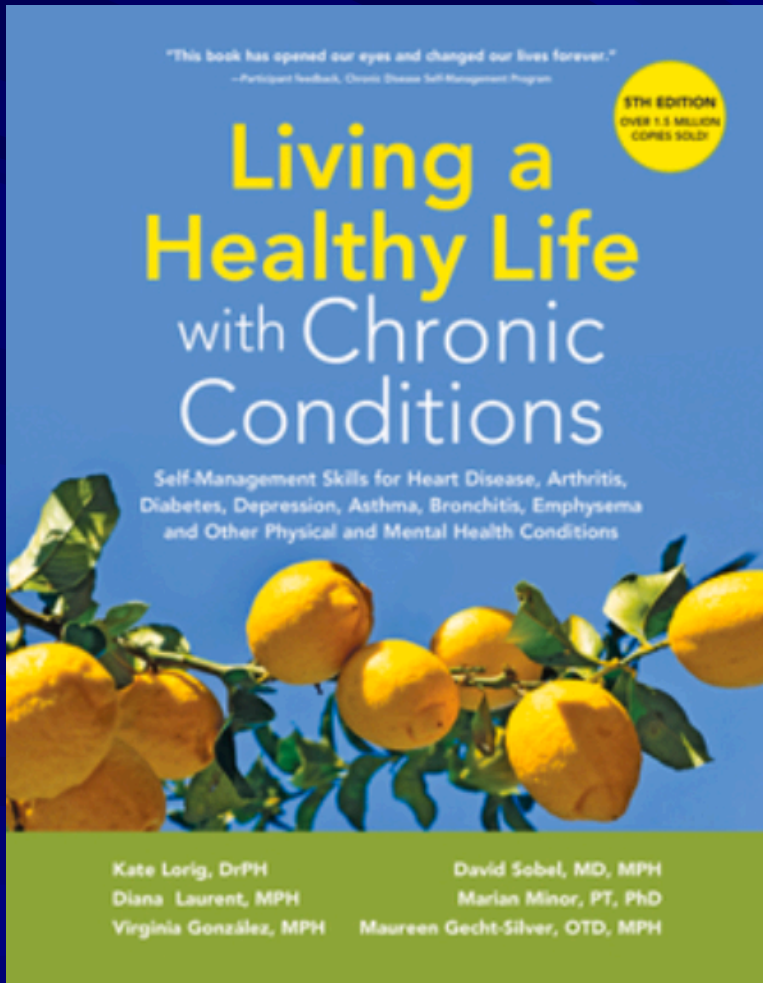
Resource Utilization



Care Partner Relationships



# SMP Library Books





# VSRA Website

## [www.victoriastrokerecovery.org](http://www.victoriastrokerecovery.org)



PROGRAMS ▾ RESOURCES

COMMUNICATION  
SKILLS

APHASIA

GROUP EXERCISE

CARE PARTNER  
SUPPORT GROUP

MUSIC THERAPY

SELF  
MANAGEMENT

**Self-  
Management  
Program**

# Agenda Part 3 of 5

## Skills:

- Fall Prevention
- Resource Utilization

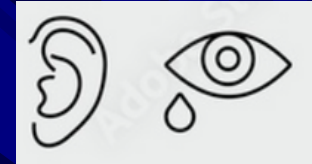


# Reduce the risk of Falling

1. **Exercise**



2. Have your **vision and hearing checked**



3. Take care of your **feet**



4. Make your **home safer**



5. Talk to your **health care provider**



# Fall Prevention



- **Exercise**
  - Increase muscle strength and joint flexibility to improve balance and posture—examples are in the *Living a Healthy Life* book.
- **Have your vision and hearing checked**
  - Annually and correct as necessary. People with poor hearing or vision fall more often.
- **Take care of your feet**
  - Wear shoes that have a low, sturdy heel, fit well, have non-slip textured soles that support your feet.
- **Make your home safer**
  - Make sure there is good lighting and keep areas where you walk tidy.
  - Have handrails on both sides of stairs.
  - Check that all carpets are fixed firmly to the floor and remove small throw rugs.
  - Have grab bars put next to the toilet and tub and use non-skid mats.
  - Have telephones or a personal emergency alert pendant accessible in case of an emergency.
- **Talk to your Healthcare Professional**
  - Report falls, near falls and if you are afraid of falling.
  - Review all your medications – prescription and over the counter.
  - Have your balance checked.
  - Report any dizziness or confusion and have your blood pressure checked. Low blood pressure can make you dizzy or groggy when you stand. Take a minute and stand up slowly to get your balance.



## FALL PREVENTION FOR SENIORS

### SAFETY TIPS



EXERCISE  
REGULARLY



GET YOUR VISION  
AND HEARING  
CHECKED



REVIEW  
MEDICATIONS  
WITH YOUR  
DOCTOR



WEAR WELL  
FITTING SHOES



IMPROVE  
LIGHTING



MAKE ITEMS  
ACCESSIBLE

### SAFE HOME



INSTALL HANDRAILS  
AND GRAB BARS



REMOVE CLUTTER  
AND CORDS  
FROM FLOOR



USE  
NON-SLIP MATS



MIKELUCKOVICH  
11-15-24  
@ATC.com  
The Atlanta Journal-Constitution

SO CUTE! HE THINKS  
HE'S STEERING!..







# Self Management Skills/Techniques



## Skills:

1. Problem Solving
2. Decision Making
- 3. Resource Utilization**
4. Care Partner Relationships
5. Action – Planning
6. Self Tailoring

## Techniques:

- Medications
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**Skill:**

**Resource  
Utilization**



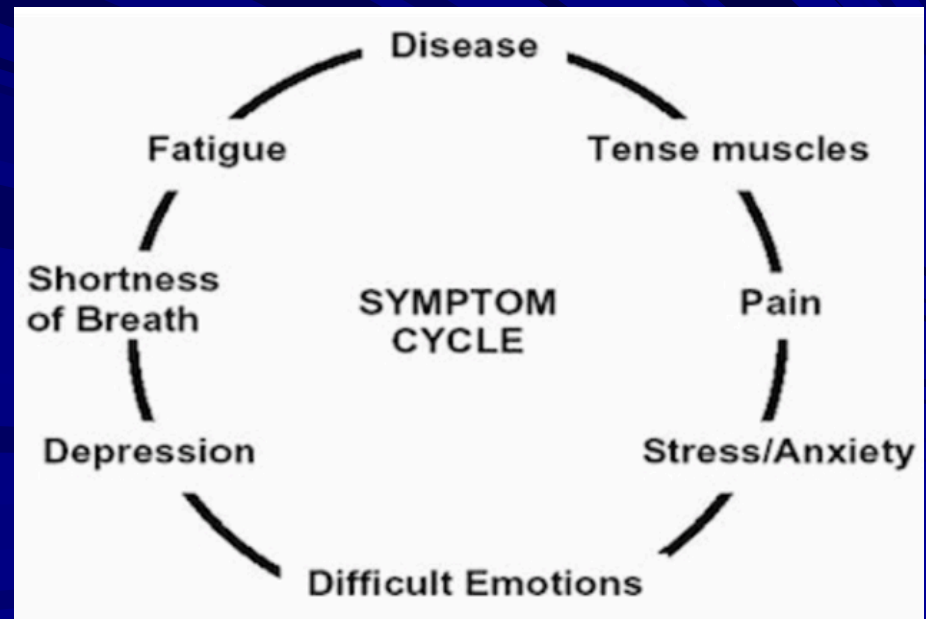
**EFFICIENT  
RESOURCE USAGE**

# Resource Utilization

Select tool or technique that **best fit** the symptoms you are experiencing

Give the technique a chance say **two weeks** and re evaluate

**Combine** techniques  
**Journal** effects of tool





# Self Management Skills/Techniques



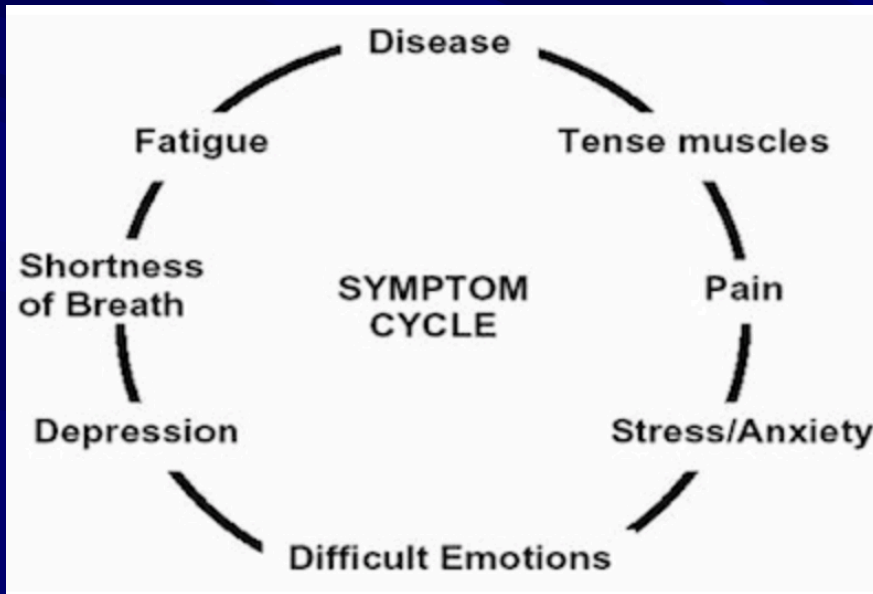
## Skills:

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# Self Management Skills/Techniques



## • Medications

- Physical Activity
- Managing Fatigue
- Better Breathing
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# Treatment Evaluation?





# Evaluation Treatments ???'s

1. **Where** did I **hear** about this ?
2. Were people who got better **like me** ?
3. Could anything else explain these **positive results** ?
4. Does treatment suggest stopping taking other medication or treatment ?
5. Does treatment suggest **not eating certain foods** ?
6. Can I think of any **possible dangers/harm** ?
7. Can I **afford** it ?
8. Am I willing to go to the **trouble/expense** ?

# Agenda Part 4 of 5

- **Care Partner Relationships**
- **Action Plans**
- **Self Tailoring**





# **Victoria Stroke Recovery Association**

## **Part 4 of 5**

### **Self Management Program**

**For Stroke Survivors and Care Partners**

**2025**

# JAZLYN J

## GETS A GOAL



IF JAZLYN EVER  
NEEDS A PLACE TO SKATE,  
SHE CAN ALWAYS SKATE  
ON MY ICE RINK!  
WALTER GRETZKY

RENNÁ BRUCE AND ROBIN OAKES



I can remember Wayne skating on the ice rink I built in our back yard. All the other kids in the neighbourhood would want to go to the mall or the movies, but Wayne would spend hours and hours skating in between pylons or shooting at the net. All those hours of practice and keeping his mind on his goal paid off very well, because he became a pretty good hockey player!!!!

There will always be obstacles that may pop up along the journey of success, but always remember, just like Jazlyn... to keep your eyes on your goal, think positively, be the best you can and more than anything else, have **FUN**.

If Jazlyn ever needs a place to skate, she can always skate on my ice rink!

*Walter Gretzky (Wayne's Dad)*

*Best Wishes  
Walter Hufsky*



# Agenda Part 4 of 5

- **Care Partner Relationships**



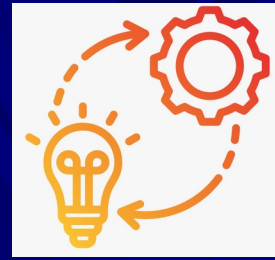
- **Action Plans**







# Self Management Skills/Techniques



## Skills:

1. Problem Solving
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3. Resource Utilization
- 4. Care Partner Relationships**
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## Techniques:

- Medications
- Physical Activity
- Managing Fatigue
- Better Breathing
- **Working with Health Professionals**
- Using your mind
- **Communication**
- Healthy eating
- Understanding Emotions

**Skill:**



Care Partner  
Relationships



# Care Partner Relationships

Healthcare professionals



Spouse and Family



Friends

Neighbors, co-workers

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# Communication Technique

1. Identify **Issue**



2. Express your **feelings**;



1. Use “I messages” Not “you messages”
2. Use “When this happens... I feel...”

3. **Listen** attentively



4. **Clarify**



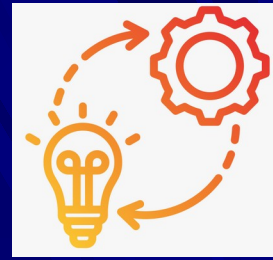
**Skill:**

# **Action Plans**





# Self Management Skills/Techniques



## Skills:

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## Techniques:

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# Action Plan Benefits

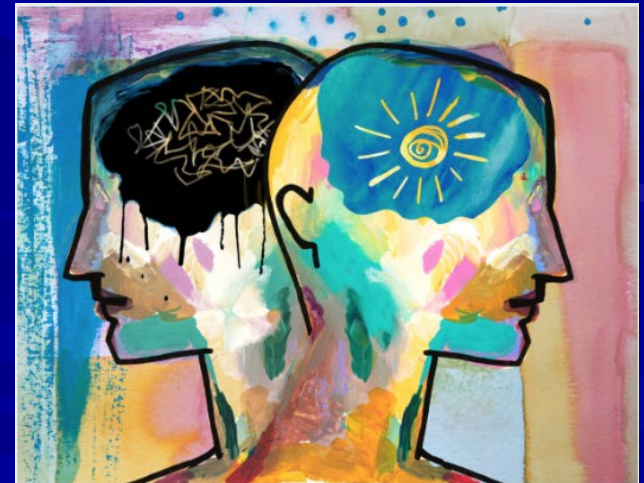
**Confidence** – Self Efficacy



**Behavioral** change



Method to adopt **new skills**  
**& techniques** which modify  
and alter disease symptoms



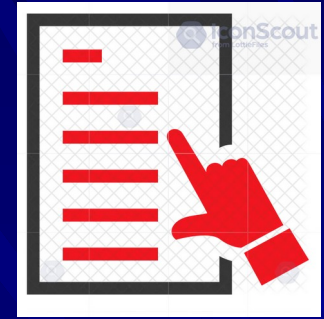
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# Action Plan Benefits (cont)

**Valuable process** for organizing efforts, ensuring efficiency, increase chance of positive outcomes relative to stroke survivor symptoms .



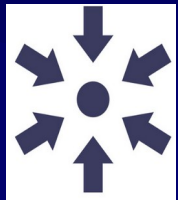
# Parts of an Action Plan:



1 – **What YOU want to do**



2 - **Achievable**



3 – **Specific**; What?, How much?, When?,  
How Often?



4 – **Confidence level** ( 7 or more of 10)

# Bill - Example Action Plan

**Goal: to lose weight**

- Something YOU want to do? **Drink More Water**
- Achievable? **Yes**
- Action Specific? **Yes**
- Answer the Questions?
  - What? (specific Action) **Drink water**
  - How Much? (time, distance, amount) **One litre of bottled water**
  - When? (time of day or which days of week) **early in day, M., W., F..**
  - How often? (number of days in the week) **3 days per week**
- Confidence? (level of 7 or more) **8**

# John - Example Action Plan

- Something YOU want to do? **Lose Weight (~ 5 Lbs)**
- Achievable? **Yes**
- Action Specific? **Yes**
- Answer the Questions?
  - What? (specific Action) **Walking**
  - How Much? (time, distance, amount) **one mile**
  - When? (time of day or which days of week) **morning**
  - How often? (number of days in the week) **5 days per week**
- Confidence? (level of 7 or more) **9**

# Action Plan Benefits

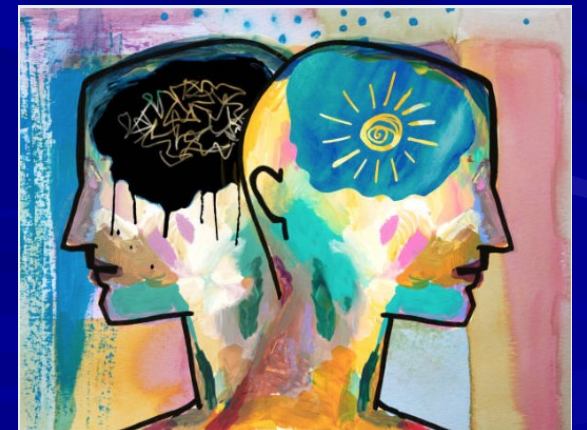
**Confidence** – Self Efficacy



**Behavioral** change



Method to adopt **new skills**  
**& techniques** which may  
modify and alter disease symptoms



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### My Action Plan

In writing your action plan, be sure it includes all of the following:

1. What you are going to do (a specific action)
2. How much you are going to do (time, distance, portions, repetitions, etc.)
3. When you are going to do it (time of the day, day of the week)
4. How often or how many days a week you are going to do it

Example: This week, I will walk (what) around the block (how much) before lunch (when) three times (how many).

This week I will \_\_\_\_\_ (what)  
\_\_\_\_\_ (how much)  
\_\_\_\_\_ (when)  
\_\_\_\_\_ (how often)

How sure are you? (0 = not at all sure; 10 = absolutely sure) \_\_\_\_\_

Comments

Monday \_\_\_\_\_

Tuesday \_\_\_\_\_

Wednesday \_\_\_\_\_

Thursday \_\_\_\_\_

Friday \_\_\_\_\_

Saturday \_\_\_\_\_

Sunday \_\_\_\_\_

Living a Healthy Life  
with Chronic Pain  
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