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'The Comfortable Position'

Positioning of the Stroke Arm

Quality Improvement Project

The Royal Bournemouth and Christchurch Hospitals

NHS Foundation Trust

Observation of poor inconsistent position of patient's arm for patients who had suffered significant paralysis following a stroke. Approximately 70% of stroke patients have altered arm function (RCP, 2012).

1. Problem



Shoulder pain prevalence estimates as high as 84%, occurring from 2 weeks to several months (NICE, 2013).

Evidence



Good arm position can help to prevent pain, contractures,

2. Size of problem

On average 10 out of 36 patients require good arm positioning. Almost 1/3 stroke ward patients.

3. Aim

All patients unable to independently move their stroke hand to their mouth to have their arm positioned correctly whilst in bed.

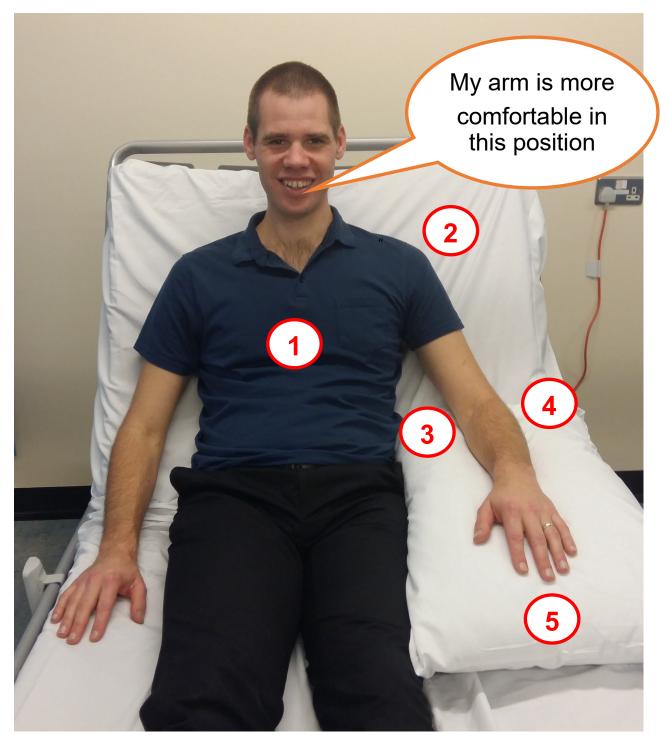
4. Baseline Measure

5 point checklist scale (Yes/No) developed from SIGN management of stroke guidelines (2010).

5. PDSA's #5b #5a #5c **ACT PLAN PLAN ACT PLAN ACT Best Guide** Assess effect Identify the Purposeful Assess effect Recommend poster above education of purpose problem areas of specialist similar specialist patients bed & in education cushion cushion Newsletter DO DO **STUDY STUDY STUDY** DO Repeat measure Even when 3/5, Used specialist 1 part of cushion Measure hourly 3/5 achieved, for a day cushion for 1 position lasted up used. Improved with only 41% for one day to 2hrs week & ave score to scored 100% 4.6/5 measure (5/5)

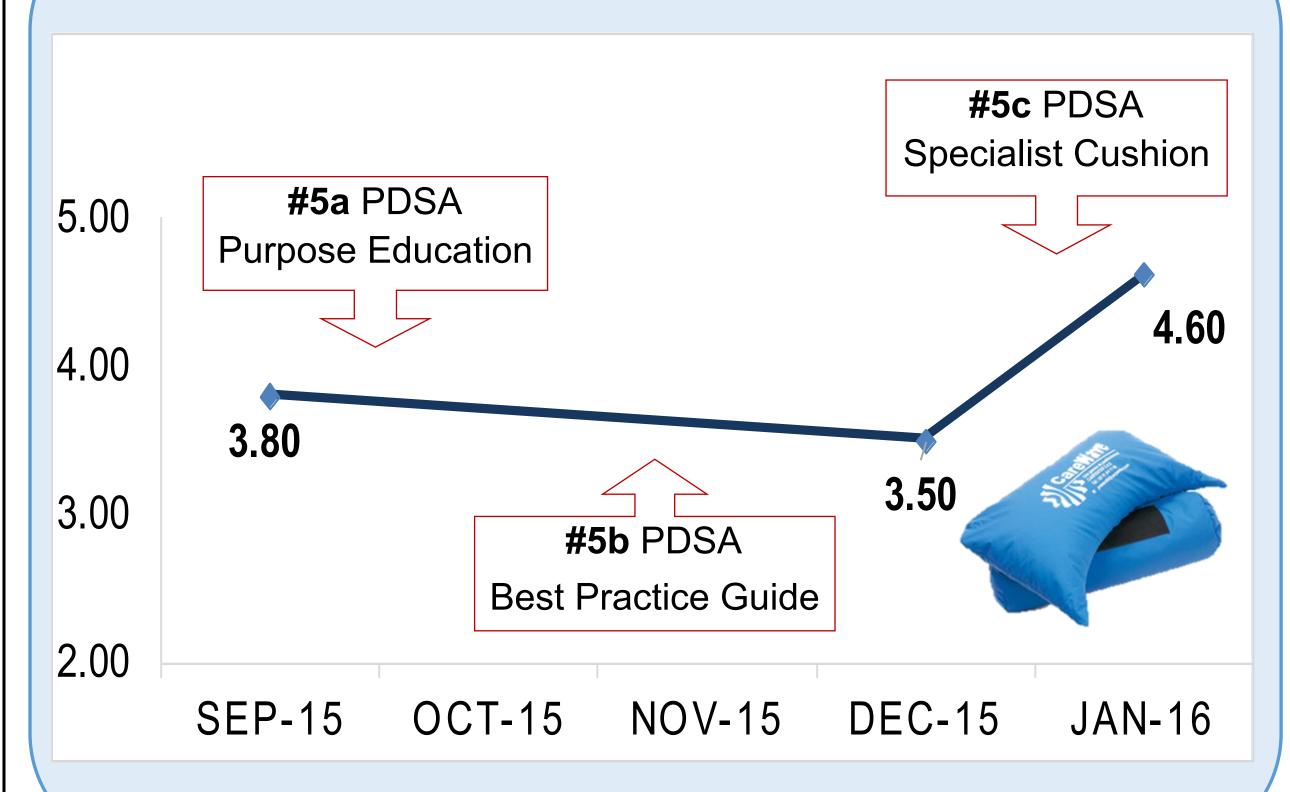
Best Practice to Positioning the Affected Arm

- 1. Trunk straight and in midline
- 2. Affected **Shoulder** protracted
- 3. Affected **Shoulder** abducted (aligned with body)
- 4. Affected **Arm** bought forward
- 5. Fingers extended



Reference: Scottish Intercollegiate Guidelines Network (SIGN) (2010). Management of Patients with Stroke: Rehabilitation, Prevention and Management of Complications and Discharge Planning Publication 118. Edinburgh: NHS Quality Improvement Scotland.

6. Results / Run Chart: Average Total Score



7. Summary

Staff more aware of the good arm position, with each section evenly scored and 4 out of 5 points achieved.

Specialist cushions might promote better positioning of the stroke arm.

Contact details

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References

Scottish Intercollegiate Guidelines Network (SIGN) (2010). Management of Patients with Stroke: Rehabilitation, Prevention and Management of Complications and Discharge Planning, Publication 118. Edinburgh: NHS Quality Improvement Scotland.

Royal College of Physicians (RCP)(2012) National clinical guideline for stroke, 4th edition Intercollegiate Stroke Working Party, England.

National Institute for Health and Care Excellence NICE (2013) Stroke rehabilitation in adults, Clinical guideline, England.