

**Modernisation Initiative**

stroke services

Improving local healthcare

# ***Stroke Patient Handbook***

***For Patients, their carers,  
families and friends***

***Stroke Patient Handbook***

**Modernisation Initiative**

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# ***Acknowledgements***

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The Stroke Patient Handbook has been developed with the help and input of people who have had a stroke and their relatives, health and social care professionals working across Lambeth and Southwark and the voluntary sector. We would particularly like to say thank you to:

- The Modernisation Initiative Stroke Information Group.
- All the people attending our Join In events in Lambeth and Southwark.
- Stroke Northumbria for their generosity in sharing their work with us.

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# ***Introduction***

# About my handbook

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- This handbook is to help you keep a **record** of **your care**.
- This handbook is **confidential**. It may only be read or written in, with your permission.
- This is your handbook and you choose who to show it to but it may be useful if you **share it with the people involved in your care**. We recommend that you **take it with you to all treatments and appointments**.
- You can ask health and social care staff, for example, nurses 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.

# ***My details***

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## **My Contact details:**

Name:

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Address:

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Telephone:

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Mobile:

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Email:

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## **My next of kin/Emergency contact:**

Name:

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Telephone:

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Mobile:

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## ***My details***

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### **People I would like invited to meetings about my care:**

Name:

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Relationship:

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Telephone:

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Email:

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### **My Doctor's details:**

Name of GP:

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Name of practice:

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Telephone:

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Name of consultant:

.....

My NHS number:

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# ***Information about stroke***

**Stroke**

# What is stroke?

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A stroke happens when the **blood supply to** a part of the **brain is suddenly reduced**. No stroke is the same as another. **People** who have stroke are **affected** in **different** ways.

Symptoms **depend** on the **part** of the **brain** that is **affected**.

Generally this results in a reduction or loss of strength and sensation in the face, arm or leg. Some people have specific problems with communication, vision, balance, co-ordination, memory, concentration and vision.

This can make everyday activities such as dressing, washing, cleaning teeth, mobility and leisure activities difficult.

After a stroke, many people feel tired. Some people feel agitated, angry and upset. Some people are sad or feel depressed.

These are natural responses but sometimes injury to the brain can cause these feelings.

You may want to **talk** about your **feelings** to a **doctor** or **nurse**.

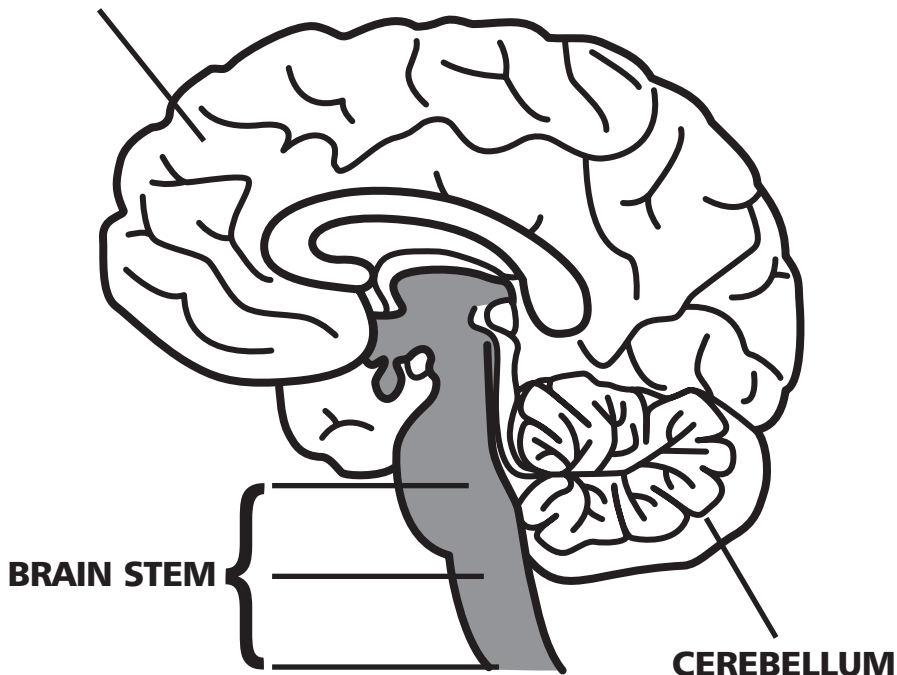
## What is stroke?

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No two people are affected in the same way so we assess and treat everyone according to how their stroke has affected them. Not all symptoms will be obvious immediately.

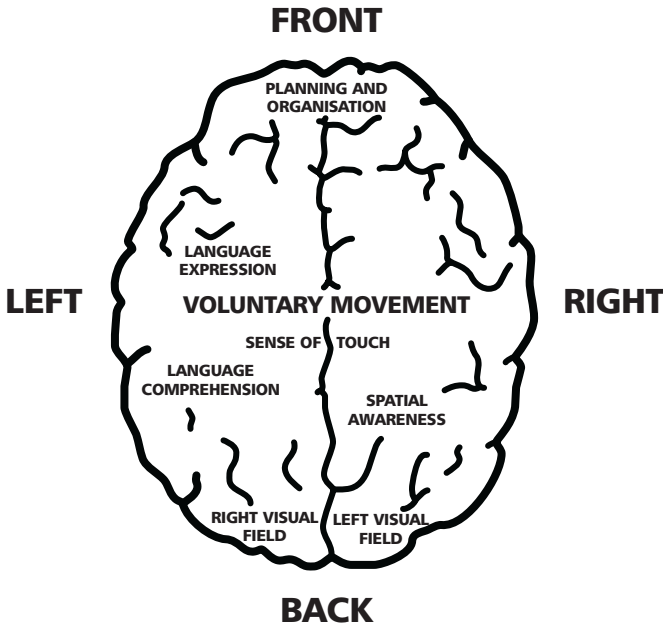
The **recovery** people make also **varies**.

**CEREBRUM**



# What is stroke?

Different areas of the brain are responsible for different functions. Your symptoms will depend on the part of your brain that has been affected. You may want to ask the **consultant** to **show you** where you have stroke.



If the left side of your brain is affected, you may have difficulty on the right side of your body (and vice versa).

When language is affected, the damage is usually on the left. You can ask the consultant to colour the picture above to show where you have stroke.

## **Information about stroke**

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### **What type of stroke did I have?**

**Blockages:** A blood clot can block a blood vessel in the brain. This is called a **thrombus** or an **embolus**.

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**Leaks:** Blood vessels can become thin or weak and begin leaking. This is called a **haemorrhage**.

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### **Some questions you may want to ask:**

What part of my brain has been affected?

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What does this mean?

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Why did I have a stroke?

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# **Information about stroke**

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My notes

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## **What happens now?**

You will have a health assessment from a team of stroke specialists. Working together, you will agree certain things that you want to achieve – these are called goals.

If you would like more information about stroke or your care, please ask a member of the stroke team who will be happy to help you.

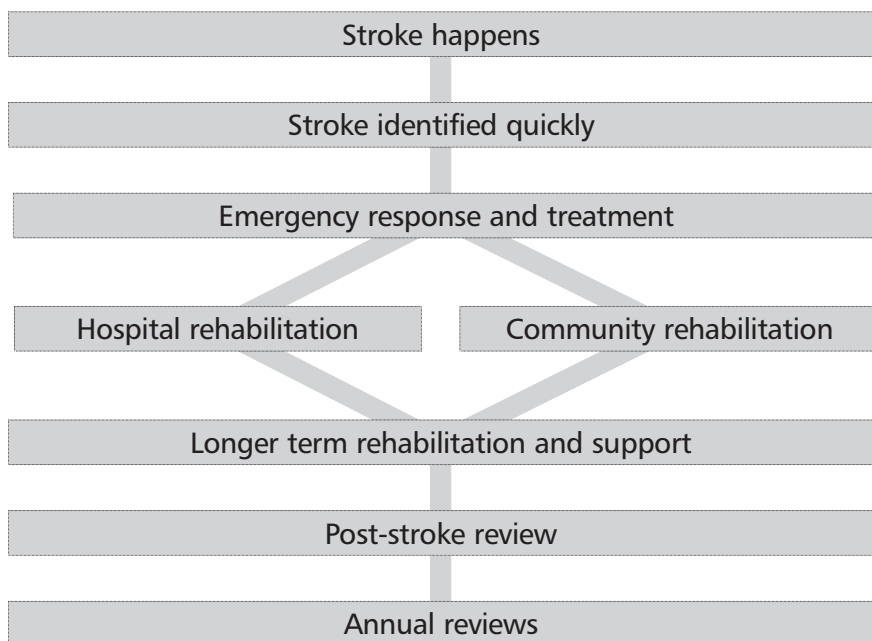
In this pack we have included a:

- list of stroke-related information available
- list of questions that people often ask
- useful contacts page

# The care pathway for stroke services

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The care pathway is a plan of care that shows the stages that you may expect in your treatment. Most people go into hospital following a stroke, but some people remain at home and have treatment in the community.



All patients and carers will receive information about stroke. All patients will be given a personal health plan.

## ***A-Z list of stroke-related information***

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There is a lot of **information** available about stroke and support.

In this section of the handbook we have provided you with an **A-Z** list of **factsheets** produced by The Stroke Association (a national charity for people with stroke).

You can order leaflets directly from the **Stroke helpline 0845 3033 100** (open Monday to Friday, 9am to 5pm) or print copies off their website **[www.stroke.org.uk](http://www.stroke.org.uk)**

Alternatively, ask a member of staff to help you.



## ***A-Z list of factsheets***

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Accommodation after stroke  
Alcohol and stroke  
Aspirin and stroke  
Balance problems after stroke  
Benefits  
Booklist (details on books)  
Carotid endarterectomy  
Catalogues for aids and equipment  
Cognitive problems after stroke  
Communication problems after stroke  
Complementary therapy  
Computers and software  
Depression after stroke  
Diabetes and stroke  
Diet and stroke  
Driving after stroke  
Epilepsy after stroke  
Financial assistance  
Gentle exercise  
Grandpa's had a stroke (details about stroke for children)  
Hemiplegia and stroke  
High blood pressure and stroke  
Holiday information

### ***A-Z list of factsheets (continued)***

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Leisure activities after stroke  
Migraine and stroke  
Occupational therapy after stroke  
Pain after stroke  
Physical affects of stroke  
Physiotherapy after stroke  
Private treatment  
Psychological effects of stroke  
Sex after stroke  
Smoking and stroke  
Speech and language therapy after stroke  
Stroke and children  
Stroke and continence  
Stroke and South Asian people  
Stroke and wheelchairs  
Stroke explanation for children  
Stroke in African-Caribbeans  
Stroke in younger adults  
Stroke: a carers guide  
Subarachnoid haemorrhage  
Swallowing problems after stroke  
Taste changes after stroke  
Telephone linked alarm systems

## ***A-Z list of factsheets*** *(continued)*

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Transient Ischaemic attack

Visual problems after stroke

Women and stroke

## **Further information**

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Some other organisations producing **information** for people with **Stroke and Aphasia** are:

### **Different Strokes**

Information and support for people under 50

Telephone: **0845 130 7172**

Website: **[www.differentstrokes.org.uk](http://www.differentstrokes.org.uk)**

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### **Connect**

The communication disability network

Telephone: **020 7367 0840**

Website: **[www.ukconnect.org](http://www.ukconnect.org)**

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### **Speakability**

Supporting people living with aphasia and their carers

Telephone: **080 8808 9572**

Website: **[www.speakability.org.uk](http://www.speakability.org.uk)**

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# ***My personal healthcare plan***

Healthcare plan

## ***My personal healthcare plan***

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Working with healthcare professionals you will agree certain things that you want to achieve – these are called goals.

You may find it helpful to **write down** your **goals** and achievements and **share them** with **family** and **carers**. They might be able to **help**.

You can ask the person you are working with to help you.

# ***My personal healthcare plan***

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**Where am I now?**

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**Where do I want to be?**

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**How am I going to get there?**

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Agreed by me

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Healthcare professional

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Review Date

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# ***My personal healthcare plan***

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**Where am I now?**

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**Where do I want to be?**

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**How am I going to get there?**

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Agreed by me

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Healthcare professional

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Review Date

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# ***My personal healthcare plan***

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**Where am I now?**

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**Where do I want to be?**

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**How am I going to get there?**

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Agreed by me

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Healthcare professional

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Review Date

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# ***My personal healthcare plan***

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**Where am I now?**

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**Where do I want to be?**

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**How am I going to get there?**

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Agreed by me

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Healthcare professional

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Review Date

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# *My medication – medication I take at home*

Start date	Prescribed by	Name & strength	Time(s) taken   			Reason I take this	Any reaction

***My medication – medication I take at home***

Start date	Prescribed by	Name & strength	Time(s) taken   	Reason I take this	Any reaction

## ***Support and contact details – all agencies***

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There may be a number of different services and people working with you at different times. It might be useful for them to write down what they do and their contact details.

Some of the questions you may want to ask:

- What **service** is going to support me?
- How can I **contact** them?
- **When** will I receive this service?
- What **support** or **help** is planned for me?

# **My services and support**

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**Example**

<b>Service</b>	<b>Contact</b>
Social Services	Joe Bloggs 020 XXX XXXX
<b>When</b>	<b>Support</b>
wednesday 01/XX/0X 8.30am	Arrange help at home to get dressed

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<b>Service</b>	<b>Contact</b>
<b>When</b>	<b>Support</b>

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## ***My services and support***

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<b>Service</b>	<b>Contact</b>
<b>When</b>	<b>Support</b>

<b>Service</b>	<b>Contact</b>
<b>When</b>	<b>Support</b>



## ***My services and support***

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<b>Service</b>	<b>Contact</b>
<b>When</b>	<b>Support</b>

<b>Service</b>	<b>Contact</b>
<b>When</b>	<b>Support</b>

## *My services and support*

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<b>Service</b>	<b>Contact</b>
<b>When</b>	<b>Support</b>

<b>Service</b>	<b>Contact</b>
<b>When</b>	<b>Support</b>

# ***Appointments List***

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Date	Time	Who with	Where

# ***Appointments List***

Date	Time	Who with	Where

## ***Appointments List***

---

Date	Time	Who with	Where

# **Appointments List**

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Date	Time	Who with	Where

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# ***Questions people often ask***

Questions

## **Questions you might like to ask**

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It is sometimes useful to **write down** the **questions** you want to ask **before** your **appointment**.

These are a list of **questions** that **people** often **ask**.

You may want to use the rest of the space to write down your own questions and the answers you receive.

### **Recovery**

- How will rehabilitation help me?
- What can I do to help recovery?
- Who else can help me?

My notes

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## Treatment and tests

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- What are the **results** of my **tests**?
- Are there any **risks** or **side effects** of my tests, therapy, medication?
- Can I take homeopathic medicines?
- Can I take other **cultural/traditional** or herbal **medication**? For example African, Chinese
- Can I take convalescent medicine/drinks from the Caribbean?
- Are there **other treatments** that might help but are **not** through the **NHS**?
- Can I take over the counter medicines?
- Do I have to take the medicine all the time or can I stop when I feel better?

My notes

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## Rehabilitation and therapy

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- **What rehabilitation** and therapy will I receive?
- **How long** will my **rehabilitation** and therapy continue **for**?
- How can I get more **therapy** once I have been **discharged**?
- What **exercises** can I do?
- What **support** will my family and friends get to help me with exercises?

My notes

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### ***Help at home***

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- Will I be able care for myself or will I need help?
- Who are the people who will come into my home?
- Will I still be able to look after my family, or will I need help?
- What information do I need if I'm going into a care home?
- Will my needs be assessed? When will I receive a written copy of my care plan?
- Is there someone that will help me to fill out forms?
- Will I have to pay for some services?
- Why do I have to pay for services
- Who will help me with practical things like shopping, bathing and going to bed?
- Who can help me with meals?
- Does my GP know I've had a stroke?
- Who do I contact if I have a complaint about services?

## ***Aids and equipment***

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- Who will help me get a wheelchair or commode?
- Who will help me make changes to my home, such as installing/having a ramp or handrail?
- How will I manage in an emergency? How do I get an alarm system?

My notes

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## Help for my carer

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- When will the person caring for me receive an assessment of needs?
- What will happen if my carer needs a break?
- If my family or friends want some more information or support, where can they go?

My notes

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## Support

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- Is there someone that I can talk to who has had a stroke?
- How can I meet other people who have had a stroke?

My notes

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## ***Work and leisure***

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- Will I be able to drive?
- How can I learn new skills?
- How can I get back to work?
- Will I still be able to have a sexual relationship?
- Is my fertility likely to be affected?
- Will I be able to travel?
- Will I be able to drink alcohol?

My notes

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## ***What happens next?***

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- What happens next? When do I next see you?

My notes

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## **Questions you might like to ask**

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Use this space to write down any other questions you may have:

*(Dotted lines for writing questions)*





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***Staying healthy  
and reducing  
the risk of  
another stroke***

## ***Staying healthy and reducing the risk of another stroke***

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There are things you can do to reduce your risk of having more strokes and help you stay as healthy as possible. Some things you can take care of yourself, others may include medical treatments from your doctor.

Some things make you **more likely** to have **another stroke**.

- **High blood pressure** – effective drug treatment can bring blood pressure down
- **Cholesterol** – can be corrected with diet and tablets
- **Smoking** – help is available to make stopping smoking easier
- **Diabetes** – if you are diabetic, good control of blood sugar is essential
- Being **overweight**
- Drinking too much **alcohol**
- Lack of exercise

## ***Staying healthy and reducing the risk of another stroke***

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The following pages are about **your** own **risk factors** and the **changes you can make** to lower your chances of having another stroke.

If you want to **talk** to your **GP** about your **risk factors** and what you can do together, it is a good idea to **book** a **double appointment**.

***My stroke risk factors are***

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**My notes**

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## **Managing high blood pressure**

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**High blood pressure** (hypertension) is the single most important **risk** factor for **stroke**.

Good blood pressure control is essential, ideally aiming for **140/85** or below. There is evidence that getting your blood pressure as low as possible leads to a reduction in stroke of as much as 40%.

Just because you are on tablets it doesn't mean you have good control. You will often take a combination of tablets to control your blood pressure. If you have any questions, please ask your doctor.

**Tips** for getting **control**:

- Get your **blood pressure checked** at your GP's surgery
- Keep going back until it is under control
- **Don't stop** taking your **medication**. There are lots of drugs so if one doesn't suit another will

## **My blood pressure**

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Blood pressure is measured using two numbers. For example 120 over 80, this is written "120/80".

Measures can be recorded in your clinic, GP surgery or at home with a home blood pressure monitor.

You will be given a target to get your blood pressure to.

### **My blood pressure target** \_\_\_\_\_

Date	Reading	Next check

## **Managing high cholesterol**

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**Cholesterol** is a **type of fat** (lipid) made by the body. It is essential for good health and is found in every cell in the body.

**Too much** can lead to the narrowing of blood vessels and an **increased risk** of **stroke** and heart disease.

A **good** cholesterol level is **below 3.5**. Recent evidence suggests that lowering cholesterol reduces the risk of further stroke by 27%.

Lowering cholesterol can be achieved by a combination of eating a **low fat diet**, drinking **less alcohol** and **exercise**.

**Medication** is usually a tablet called '**statin**', for example pravastatin, simvastatin. These work by blocking an enzyme which is needed to produce cholesterol, lowering the amount of cholesterol in the blood stream.

Cholesterol **levels** can be **monitored** by a simple **blood test**.



## ***My Cholesterol***

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You may want to talk to your GP and make a plan to reduce your cholesterol.

Target less than **3.5**

Date	Reading	Date	Reading

## **Lifestyle changes**

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### **Smoking**

Smokers **increase** their **risk** of recurrent **stroke** and many other smoking related diseases such as coronary heart disease 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 **stop**.

You can also get **support** from your **GP** surgery **or** by ringing the following numbers.

#### **Lambeth PCT Stop Smoking**

Helpline: **0800 856 3409**

Web: **[www.letsgiveitup.com](http://www.letsgiveitup.com)**

#### **Southwark PCT Stop Smoking**

Helpline: **0800 169 6002**

Web: **[www.southwarkpct.nhs.uk](http://www.southwarkpct.nhs.uk)**

#### **NHS Smoking**

Helpline: **0800 169 0169**

Web: **[www.giveupsmoking.co.uk](http://www.giveupsmoking.co.uk)**

# ***My plan to quit smoking***

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**Where am I now?**

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**Where do I want to be?**

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**How am I going to get there?**

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Agreed by me

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Healthcare professional

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Review Date

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## **Healthy eating and weight control**

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To help prevent or control high cholesterol, blood pressure and weight follow a healthy eating plan.

- 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)
- Eat more **fruit and vegetable** (5 portions per day)
- **Cut down on sugar** and **sugar foods and drinks**
- Use **less salt** and avoid salty food.

**Talk** to your **GP** or **practice nurse** about a healthy diet for you or referral to a dietician.

### **Exercise**

Discuss an **exercise plan for you** with your physiotherapist or talk to your GP about exercise programmes.

### **Alcohol**

Don't drink more than the recommended daily consumption of alcohol.

- Men – 3-4 units per day
- Women – 2-3 units per day

**1 unit = half pint of beer/1 small glass of wine/1 shot of spirit**

# ***My diet and exercise plan***

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**Where am I now?**

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**Where do I want to be?**

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**How am I going to get there?**

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Agreed by me

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Healthcare professional

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Review Date

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## **Managing diabetes**

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You may have developed diabetes as a result of your stroke or you may have been diabetic for many years. If this is a new diagnosis, you should have been seen by the **diabetic specialist nurse** to give you **help** and **advice** on diet, monitoring your diabetes and treatment.

Diabetes can be treated with diet alone, tablets called 'oral hypoglycaemics' for example metformin, gliclazide, or daily injections of insulin. **Good blood sugar control** is **essential** following a stroke to **reduce** your **risk of further strokes**. You can also reduce your risk of heart disease and other complications of diabetes by keeping your blood sugar at the **normal level** which is **between 4-7 mmol/l**.

Your control can be **monitored every few months** by taking a blood sample and checking your HbA1C.

This **blood test** gives your doctor a good guide to your average blood sugar over the past few months.

# Staying healthy and reducing the risk of another stroke

## Target HbA1C less than 7%

If your target is not being achieved, you may need different treatment to help you. Talk to your GP if you would like more information.

## Monitoring my HbA1C

HbA1C – the blood test which gives an accurate indication of your diabetes control

Your target <7%

Date	HbA1c
Treatment	

## **Managing an irregular heart rate** *(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 the 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.

The irregular heart beat can be controlled by tablets called digoxin.

Blood clot formation can be reduced by taking **asprin** or **warfarin**.

**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 by 70%.

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

**This blood test is called an INR. The target range for most people is 2-3. Treatment with Warfarin is often lifelong.**



# ***Staying healthy and reducing the risk of another stroke***

If you have any other check ups you may want to use this page to keep a record of the dates.

## ***My check ups***

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### **Eyes**

My last check up

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My next check up

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### **Ears**

My last check up

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My next check up

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### **Urine**

My last check up

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My next check up

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### **Blood**

My last check up

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My next check up

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### **Feet**

My last check up

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My next check up

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## ***Stroke – know the warning signs***

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The signs of stroke are:

- Facial weakness
- Arm or leg weakness
- Speech problems
- Loss of sight in one eye

A stroke is a **medical emergency**

If you see the signs of a stroke **act FAST** and call **999**

# ***Terminology – What do the different words mean***

## ***What do the different words mean?***

---

This is a list of some of the medical words you may hear. If there are other words you would like to know the meaning of, please ask.

**Aneurysm:** a balloon – like swelling on a blood vessel wall which may burst suddenly, usually causing a bleed into the brain causing a type of stroke. (Known as a subarachnoid haemorrhage)

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

**Atheroma:** a condition in which fatty deposits build up in the blood vessels, this restricts and disrupts the flow of blood and can contribute towards stroke.

## **What do the different words mean?**

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**Carotid endarterectomy:** an operation to reduce the chance of stroke in people who have a narrowing in one of the arteries in the neck. This operation widens the arteries. These arteries supply blood to the brain, the narrowing means the artery is more likely to be blocked, causing a stroke.

**Cerebral:** refers to the brain.

**Cerebral embolism:** a stroke, which is caused by a clot which has travelled from the heart or from a vessel leading to the brain.

**Cerebral haemorrhage:** bleeding from a blood vessel into the brain or surrounding area.

**Cerebral infarction:** is due to an area of the brain in which cells have died because the blood supply has been cut off by a stroke. This type of stroke is due to a blockage of a blood vessel.

**Cerebral thrombosis:** a stroke caused by a clot, which has blocked a blood vessel.

## **What do the different words mean?**

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**Cerebrovascular disease:** any condition affecting the blood vessels of the brain.

**CT scan:** a scan which takes pictures of cross sections of the brain and builds up a picture of the damage caused by a stroke.

**Carotid Doppler scan:** an ultrasound scan which uses reflected sound waves to build up an image of the carotid artery in the neck.

**Dysarthria:** your speech sounds distorted or slurred. This is because the stroke has affected control of the 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 understand speech, speak, read and write.

**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 but by difficulties with coordinating and sequencing.

## **What do the different words mean?**

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**ECG (Electrocardiogram):** a routine test, which measures the rhythm and activities of the heart.

**Echocardiogram:** an ultrasound scan which uses reflected sound waves to build up an image of the heart which may detect clots or abnormalities of the heart valves.

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

**Hemiplegia:** loss of the power of movement on one side of the body.

**Intra-cerebral haemorrhage:** bleeding from a blood vessel inside 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 produces a more detailed image of the brain (MRI stands for magnetic resonance imaging)

## **What do the different words mean?**

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**Neurologist:** a doctor specialising in disorders, which affect the brain and the nervous system.

**Transient ischaemic attack (TIA):** Often called mini-strokes, which occur when the blood supply to part of the brain is temporarily cut off. They present just like a proper stroke but the symptoms get better very quickly, often within a few minutes. There may be symptoms such as a weakness in limbs down one side, problems with speech or blindness in one eye. TIA should be taken very seriously because 1 in 4 people go on to have a proper stroke within the following few weeks. If you think you may have had a TIA then go straight to casualty you should expect to be seen by a specialist in a clinic and have had all the necessary tests within a maximum of a week. With the right treatment it is often possible to prevent any further problems.

**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.





***Modernisation Initiative***

stroke services

Improving local healthcare

# ***Useful contacts***

## **Useful contacts**

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Here is a list of contacts you may find useful. You may want to write down the name and telephone number of the person you talk to in your notes.

### **Hospitals**

#### **Guy's and St Thomas'**

Telephone: **020 7188 7188**

**[www.guysandstthomas.nhs.uk](http://www.guysandstthomas.nhs.uk)**

#### **King's College Hospital**

**[www.kch.nhs.uk](http://www.kch.nhs.uk)**

Telephone: **020 3299 9000**

My notes

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## **Primary Care Trusts (PCT)**

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Primary care trusts (PCTs) are responsible for the planning and commissioning health services for their local population.

They have **information** and **contact details** for local health and social care **services** in your area.

### **Lambeth PCT**

**[www.lambethpct.nhs.uk](http://www.lambethpct.nhs.uk)**

Telephone: **020 7716 7100**

### **Southwark PCT**

**[www.southwarkpct.nhs.uk](http://www.southwarkpct.nhs.uk)**

Telephone: **020 7525 0400**

My notes

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## ***Patient Advice and Liaison Services (PALS)***

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If you need information, support or advice about your hospital or Primary Care Trust services you can contact the Patient Advice and Liaison Service (PALS).

### **Guy's and St Thomas'**

Telephone: **020 7188 8801**

**[www.guysandstthomas.nhs.uk](http://www.guysandstthomas.nhs.uk)**

### **King's College Hospital**

**[www.kch.nhs.uk](http://www.kch.nhs.uk)**

Telephone: **020 3299 3625** or **020 3299 3601**

### **Lambeth PCT**

**[www.lambethpct.nhs.uk](http://www.lambethpct.nhs.uk)**

Telephone: **0800 587 8078**

### **Southwark PCT**

Telephone: **0800 5877 170**

**[www.southwarkpct.nhs.uk](http://www.southwarkpct.nhs.uk)**

My notes

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## **Community Rehabilitation Teams**

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Some people will be referred to community rehabilitation teams for therapy after their stroke. You may be referred by the hospital or your GP.

### ***Lambeth***

#### **Lambeth Community Care**

Telephone: **020 7411 5840**

#### **Pulross Centre**

Telephone: **020 7411 6610**

#### **Whittington Centre**

Telephone: **020 8243 2500**

### ***Southwark***

#### **Southwark Adult Neuro Rehabilitation Team**

East Dulwich

Telephone: **020 7525 3483**

Fax: **020 8693 6760**

My notes

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## **Social Services**

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Social services provide personal care if you need it when you are living at home.

### ***Lambeth***

London Borough of Lambeth  
Telephone: **020 7926 1000**  
**[www.lambeth.gov.uk](http://www.lambeth.gov.uk)**

### ***Southwark***

London Borough of Southwark  
Telephone: **020 7525 5000**  
**[www.southwark.gov.uk](http://www.southwark.gov.uk)**

My notes

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## **Department for work and pensions**

***(Benefits Advice via Job Centre Plus Offices)***

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### **Benefits Enquiry Helpline for people with disabilities**

Telephone: **0800 88 22 00**

**[www.direct.gov.uk](http://www.direct.gov.uk)**

### **Job Centre Plus call centre – find work or make a claim to benefit**

Telephone: **0845 607 3051**

**[www.jobcentreplus.gov.uk](http://www.jobcentreplus.gov.uk)**

### **Pension Credit Helpline**

Telephone: **0845 6060 265**

**[www.direct.gov.uk](http://www.direct.gov.uk)**

### **Disability Living allowance/Attendance allowance helpline for general information and claim enquiries**

Telephone: **08457 123 567**

**[www.direct.gov.uk](http://www.direct.gov.uk)**

My notes

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## ***Support and help when you get home***

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Contact details for national voluntary organisations that offer a range of support for people who have had a stroke, their families and carers.

### **The Stroke Association**

Supports people living with stroke and aphasia

Telephone: **0845 30 33 100**

**[www.stroke.org.uk](http://www.stroke.org.uk)**

### **Different Strokes**

Information and support for people under 50

Telephone: **0845 130 7172**

**[www.differentstrokes.org.uk](http://www.differentstrokes.org.uk)**

### **Connect UK**

Communication disability network for people with aphasia

Telephone: **020 7367 0840**

**[www.ukconnect.org](http://www.ukconnect.org)**

### **Speakability**

Supports people living with aphasia and their carers

Telephone: **080 8808 9572**

**[www.speakability.org.uk](http://www.speakability.org.uk)**

Contact details of voluntary organisations that can help you find services and provide advice in Lambeth and Southwark.

### ***Lambeth***

#### **Age Concern**

Telephone: **020 7733 0528**

**[www.aclondon.org.uk](http://www.aclondon.org.uk)**

#### **Citizens Advice Bureau**

Telephone: **020 8674 8993**

**[www.citizensadvice.org.uk](http://www.citizensadvice.org.uk)**

#### **Disability Advice Service**

Telephone: **020 7738 5656**

### ***Southwark***

#### **Age Concern**

Telephone: **020 7701 9700**

**[www.aclondon.org.uk](http://www.aclondon.org.uk)**

#### **Citizens Advice Bureau**

Telephone: **0870 121 2016**

**[www.citizensadvice.org.uk](http://www.citizensadvice.org.uk)**

#### **Southwark Disablement Association (SDA)**

Telephone: **020 7701 1391**

#### **Dulwich Helpline**

Telephone: **020 8299 2625**

**[www.dulwich-helpline.org.uk](http://www.dulwich-helpline.org.uk)**

## ***Expert Patient Programme***

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The Expert Patient Programme (EPP) is a **free** course that aims to **help people** living with any **long term health condition(s)**.

Groups of 6 to 16 people meet over **six weeks**.

The topics talked about include:

- Dealing with **pain** and extreme **tiredness**
- Coping with feelings of **depression**
- **Relaxation techniques** and exercise
- Healthy eating
- **Communicating** with family, friends and health professionals
- **Planning** for the **future**.

The sessions are run by trained tutors who are also living with a long term condition.

### ***Lambeth***

#### **Expert Patient Programme**

Telephone: **020 7716 7198**

### ***Southwark***

#### **Expert Patient Programme**

Telephone: **020 7733 2231**

**[www.expertpatients.nhs.uk](http://www.expertpatients.nhs.uk)**

# Travel

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Contact details of organisations that provide transport at a reduced cost.

### **Dial-a-Ride**

Door to door service for disabled people who cannot use public transport

Telephone: **0845 999 1999**

**[www.tfl.gov.uk/dial-a-ride](http://www.tfl.gov.uk/dial-a-ride)**

### **Taxicard**

For people with mobility impairment which makes travelling on tubes, buses and trains difficult.

Telephone: **020 7484 2929**

**[www.taxicard.org.uk](http://www.taxicard.org.uk)**

### **Capital Call**

If you are a member of the Taxicard scheme you can join capital (minicabs)

Telephone: **020 7275 2446**

### **Freedom Pass**

Allows free travel on London Underground and buses at certain times of the day

Telephone: **020 7747 4858**

**[www.freedompass.org](http://www.freedompass.org)**

## ***Support for carers***

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Information and support for your relative or friend who will help look after you at home.

### **Carers UK**

Telephone: **020 7490 8818**

**[www.carersuk.org](http://www.carersuk.org)**

### **Lambeth Carers**

Telephone: **020 7733 9600**

**[www.lambethcarers.org.uk](http://www.lambethcarers.org.uk)**

### **Southwark Carers**

Telephone: **020 7708 4497**

**[www.southwarkcarers.org.uk](http://www.southwarkcarers.org.uk)**

My notes

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# Useful contacts

You may wish to use this space to record the details of any other useful contact.

Name:

Address:

Telephone:

Website/Email:

Name:

Address:

Telephone:

Website/Email:

# Useful contacts

Name:

Address:

Telephone:

Website/Email:

Name:

Address:

Telephone:

Website/Email: