Narrow the gaps in stroke prevention: Nursing on the move

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Stroke @ OPD : Gaps

Patient

- Poor recognition of Stroke warning signs
- Delay seeking treatment
- Unaware of risk factors such as
  - Ateroscherosis, Dyslipidemia, Obesity
  - Tobacco, Alcohol, Stress

Staff

- Less emphasis on Prevention (1° & 2°)
- Time & Place issues

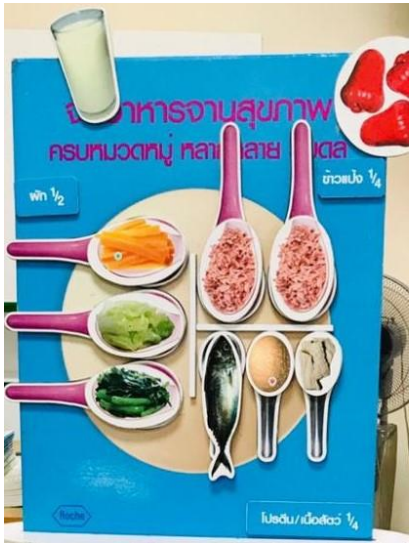
Initiative @ OPD

1. Create Health Corner @ OPD
2. Provide Health Information:
   - –General people (Relatives, Check up)
   - –Risk groups (Persons at risk)
3. Allocate Nurses for Public Education
4. Participate in Stroke Campaigns

1.Health Corner @ OPD

Create new corner at OPD &
Design new stroke pamphlets

2.Stroke Information:General People



2.Stroke information

General people
(Stroke information)
Relatives accompany patients ~ 150 persons/day (daily)
Interested People ~ 120 persons/each session (every 2 months)

Expected Outcomes
Stroke awareness + self management skills >90%
Satisfaction > 95 %

3.Public Education for Stroke Prevention

(Risk groups: Risk reduction)

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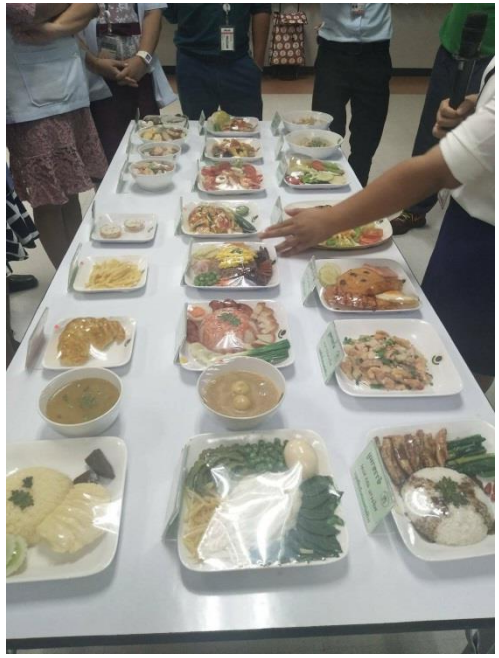


Stroke Education (Risk reduction)

OUR STAFF
(At risk)

- Screening at risk (BMI ≥25 kg/m^2) + BP + Blood test
- 3,500 persons of 16,000 are at risk (22%)
- 1,500 persons attend health programs (2 hour a week)
- Follow up every 3 months

Patient at risk ~ 10-15 persons/day (daily)

Expected Outcomes

- 50 % of participants have lower BMI (then to ≤ 23)
- 50 % of participants have stroke literacy

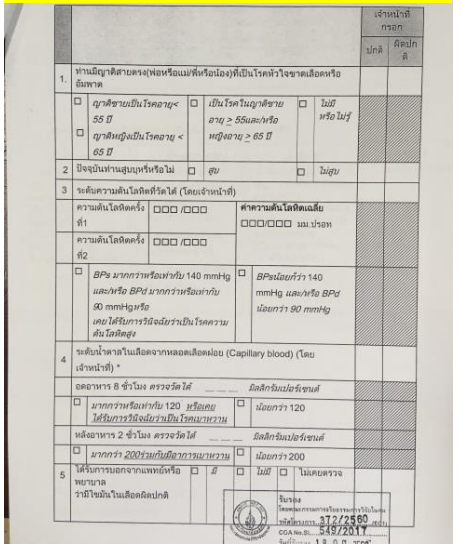
Corporate Social Responsibility (CSR)

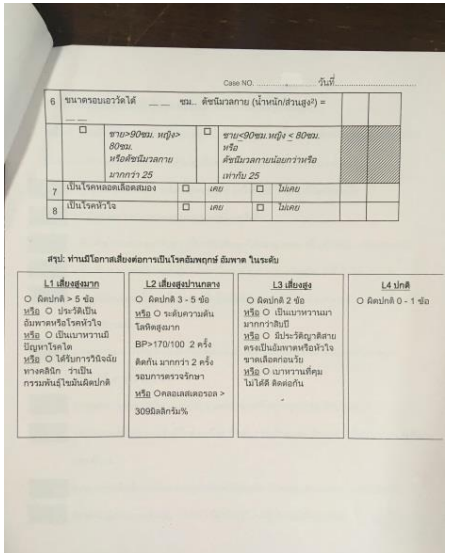
Stop Stroke Campaigns

ศูนย์โรคหลอดเลือดสมองศิริราช

CSR for People

Risk screening form





Summary

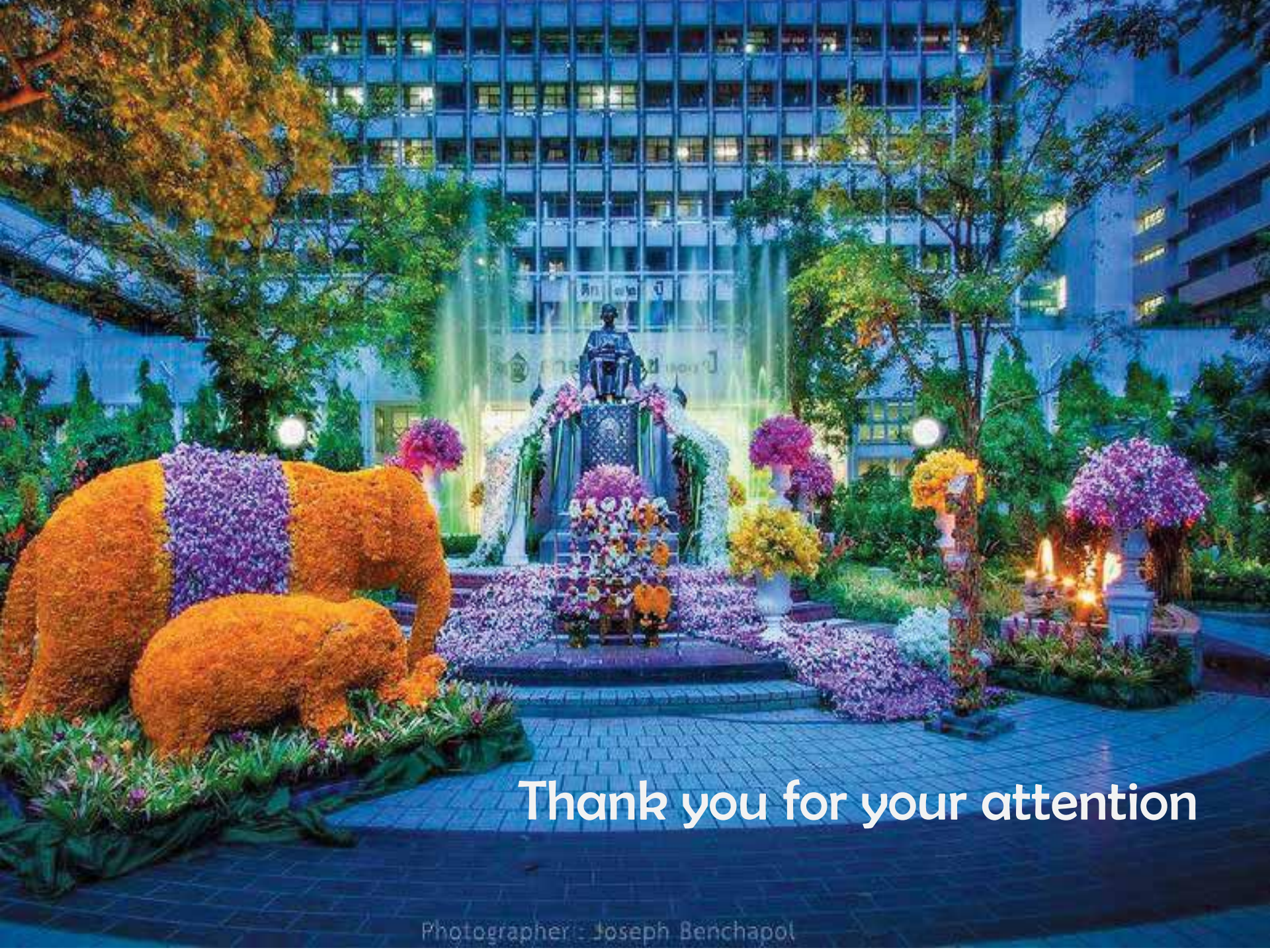
OPD Nurses:

1) Triage +Treatment
2) Care + Follow up
3) Disease Prevention

Summary

Future Plans

- Use digital health to link data more systematically
- Create App to follow up individuals (e.g. health behaviors, treatment adherence)


Thank you for your attention
Photographer : Joseph Benchapol