



## South African Health Review 2018 Series

### Chapter 12: Perceptions on and quality of clinical practice guidelines for stroke management in a rural health district

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#### EMERGING PUBLIC HEALTH PRACTITIONER AWARD

- Stroke is a catastrophic illness, with around 360 South Africans suffering a stroke each day, of which 110 die and 90 are left with a life-changing disability, thus causing stroke to be the leading natural cause of disability and the fourth most common cause of death.
- Due to the absence of a cure for stroke, rehabilitation aims to restore function in individuals who have suffered a stroke. People living in rural areas are more vulnerable to developing stroke than their urban counterparts due to disparities in healthcare services and availability of healthcare providers. South Africa still lacks dedicated stroke units that concentrate services and care expertise for stroke survivors, and this is more acute in rural areas.
- A multi-disciplinary team approach is needed for stroke management due to the varied symptoms that survivors present with, including slurred speech, numbness, blurred vision, weakness or paralysis, severe headache, and confusion. The efforts of allied rehabilitation practitioners, guided by clinical practice guidelines (CPGs), are critical in assisting stroke survivors to achieve or maintain optimal physical function.
- Rehabilitation practitioners involved in the management of stroke include physiotherapists, occupational therapists, speech therapists and audiologists. However, it has been reported that therapists working in rural areas often lack access to continuous professional development (CPD) activities that assist in keeping them up-to-date with new knowledge on specific topics, including stroke. To fill this gap, CPGs contextualised for rural therapists are required so that therapists are able to provide the best up-to-date clinical interventions for stroke patients.
- Clinical practice guidelines are scientifically developed statements to assist clinical practitioners with clinical decision-making, thereby reducing disparities in patient care. Clinical Practice Guidelines assist with evidence-based information for the management of specific medical conditions, including stroke.
- A study was conducted among 16 rehabilitation therapists employed in three primary healthcare district hospitals in rural Mpumalanga to ascertain the knowledge, attitudes and practices towards CPGs in the treatment of stroke and possible strategies to improve guideline implementation and uptake. The therapists were selected based on their involvement in stroke rehabilitation. The quality of existing stroke CPGs was also assessed using the international Centre for Allied Health Evidence (iCAHE) guideline assessment tool.
- Twelve of the 16 participants had never been exposed to the CPGs previously. The remaining four participants had either been exposed to the guidelines at university, through their supervisor, or at provincial level, e.g. through the provincial physiotherapy forum.

- The results indicate that the therapists had a positive attitude towards the CPGs. Participants suggested that the guidelines could improve the rehabilitation process, assist in comprehensive patient management, and provide increased learning and updated information.
- Two main themes emerged regarding stroke CPG practices: in terms of patient care, therapists stressed the importance of educating families to conduct home-care programmes, and in terms of barriers to the utilisation of guidelines, they stressed the importance of taking a holistic approach to patients.
- Therapists suggested various strategies to improve the dissemination and implementation of stroke CPGs. These suggestions included staff training, and changing the design and content of the current clinical guidelines disseminated in rural district hospitals. According to the therapists, these initiatives are currently not in place and would play a major role in improving the implementation of CPGs in their local context.
- The study showed that therapists in rural Mpumalanga have limited knowledge and awareness of stroke CPGs. Rating of these guidelines by the therapists also provides insight into why therapists who have been exposed to the guidelines do not use them.
- Two further findings were the need to develop multi-disciplinary stroke CPGs, and the importance of considering the context (in this case rural) when designing and implementing clinical guidelines.
- Recommendations include the review and revision of the clinical practice stroke guidelines provided to rural therapists, taking into account the human and material resources in rural areas; and the development of a clear strategy and plan of action to disseminate and promote implementation of the guidelines.

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