

# THE BEST STUDY

Best Evidence for Stroke Therapy

## Significance of the BEST Study to Allied Health

Uptake and application of the National Stroke Foundation's Clinical Guidelines is a critical success factor in improving the health outcomes of stroke patients, however recent audits highlight low levels of compliance nationally.

Allied health staff require support to implement the Guidelines in every day practice.

The online resource produced from the BEST Study will include written information, with links to existing online resources and instructional videos developed for this project. It will support staff to implement evidence based practice and will enable patients and caregivers to implement a self-management approach to upper limb or cognitive rehabilitation at home.

## The BEST Method

Data collection methods included a series of focus groups involving patients, caregivers & clinicians.

200+ patients from two regional health services will trial resources.

Outcome measures will include the COPM, the Stroke Self-Efficacy Questionnaire and the Stroke Impact Scale. Secondary outcome measures will include the ULPA and the PRPP.



## The BEST Collaborative Input – Clinician, patient & caregiver focus group outcomes

**CLINICANS REPORT** – Barriers to implementing the National Stroke Clinical Guidelines include: time and knowledge gaps in interventions / “The National Stroke Clinical Guidelines advise best practice, but not how you do the interventions, when you do it, how long and who with” / Clinicians have reported they would like to have a resource that has a summary of interventions to assist with clinical reasoning and an in depth “how to guide” of interventions (written and visual).

**PATIENTS REPORT** – Good motivation during inpatient rehab however decrease support when they get home / would like more written and visual resources at home / patients provided positive feedback of the BEST Study's aim and examples of projects resources.

Recruitment to the study is due to start April 2017

Removing barriers to evidence translation: Facilitating clinician and patient uptake of evidence-based stroke rehabilitation



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