

# Townsville Upper Limb Retraining



# 3 Day Evidence-Based Workshop

This workshop focuses on helping therapists to minimise upper limb impairments post-stroke, & increase engagement in activities. The workshop will be of interest to occupational therapists & physiotherapists from hospital & community based settings, who teach adults following stroke & acquired brain impairment, as well as university lecturers.

### Key Learning Objectives include:

- Name the essential components (invariant kinematic features) of normal reach & manipulation.
- Recognise common compensations when observing people with stroke/ brain injury attempting to reach for & use everyday objects; understand & explain why these compensatory strategies should be discouraged during practice.
- Discuss factors thought to contribute to the development of muscle overactivity/spasticity, & strategies to prevent these secondary problems.
- Explain the relationship & differences between spasticity/overactivity, muscle length changes, missing essential components & compensations.
- Plan & conduct an observational analysis & motor training session with a person who has had a stroke
- Name key factors that affect motor learning, & how these factors can be modified to enhance learning & increase intensity of practice.
- Use an electrical stimulation machine to stimulate paralysed muscles.
- Discuss evidence related to various interventions including constraintinduced movement therapy & mirror therapy to improve motor recovery & function of a person's upper limb.

Friday 29<sup>th</sup> September -Sunday 1<sup>st</sup> October 2023



- Alliance Rehabilitation 139 Boundary Street, Railway Estate
- \$990.00 (inc GST) Morning Tea, Lunch & Afternoon Tea Provided on all days.
- To make a booking email: events@alliancerehab.com.au or Call 07 4772 1219

LIMITED SPACES - BOOK NOW



# **Upper Limb Retraining Workshop Presenters:**



Dr Annie McCluskey
PhD MA DipCOT FOTARA

Occupational therapist, health services researcher and educator. She has 30+ years experience in stroke and brain injury rehabilitation.



Karl Schurr

Physiotherapist, MAppSc. BAppSc

Clinical experience in stroke and brain injury rehabilitation for 30 years+ in Australia and the UK.

## **Workshop Timetable**

Time	Day 1 - Friday 29th Sept	Time	Day 2 - Saturday 30th Sept	Time	Day 3 - Sunday 1st Oct
8.00	Housekeeping, introductions; workshop overview	8.00 Session 5	Implications of evidence for clinical practice: A case example. Muscle length changes & spasticity. Interventions including stretching, splinting, casting, positioning & botulinum toxin	8.00 Session 9	Evidence of Therapy Effectiveness -Lectures interspersed with videos & practical: (i) Electrical stimulation (ii) Mental practice
8.30 Session 1	Analysis of normal movement: Essential components of reach & grasp (cup, pen, cutlery, brush). Anatomy revision.				
				10.15	Morning Tea
10.00	Morning Tea  Analysis of Abnormal Movement: Missing components & compensations with videos. Allocate groups.	9.30 Session 6	Training Ideas & Being an Effective Coach 2: With videos Morning Tea	10.30	Session 9 continued – (iii) Constraint therapy (iv) Mirror box therapy
Session 2		10.10			
		10.30 Session 7	Training Ideas / Being an effective Coach 2 (continued) Setting up the Physical Environment to Optimise Practice: Videos /practical	12.15	Lunch
12.15	Lunch			1.00 Session 10a	Clinical Session 3: Groups review practice & goals for stroke participant from Day 2. Re-measure performance. Progress practice.
1.00 Session 3	Being an Effective Coach 1: Focus on goal setting, feedback, practice intensity & measurement, with feedback				
		12.15	Lunch	2.00	Stroke participants have a
2.15 Session 4a	video.  Demonstration 1: Analysis & training of stroke participants 1 & 2; provision & set-up/ video of overnight practice by tutors  Afternoon Tea	1.00 Session 8a		short break. Groups verbal handover to group, including sug for training. Plan tas analyse, equipment sequence of coache	short break. Groups provide verbal handover to the next group, including suggestions for training. Plan tasks to
		1.40	Groups meet for 15-20 mins to plan for Clinical Session 2 (eg Equipment needed; tasks to analyse; sequence of coaches)		sequence of coaches
3.15				2.15 Session 10b	Clinical Session 4: Groups analyse & train another stroke participant. Aim for 300 repetitions. Audiorecord coaching. Observe & record other coaches giving feedback. Set-up /video takehome practice.
3.30	Demonstration 2: Analysis &				
Session 4b	training of stroke participants 3 & 4; provision & set-up/ video of overnight practice by tutors	2.00 Session 8b	Clinical Session 2: Groups assess /analyse (20-30 mins) together, then take turns training a new stroke participant. Aim for 300 repetitions. Write up / video overnight practice for hospital/home.		
4.30	Large group discussion & questions. Evaluation form. Round robin with each person stating "One thing I learnt			3.00	Working afternoon tea –
					Groups meet to discuss session including coaching
5.00	today" FINISH	3.30	Working afternoon tea – Meet in small groups to discuss	3.30	Discussion as a large group/ Qs arising over 3 days. Statement of goal intentions. Evaluation form. Round robin with each person stating 'When I return to work next week, one thing I will do is"
		4.00	(Evaluation form). Meet for debrief & discussion as a large group. Round robin with each person stating 'One thing I learnt today"		
				4.00	FINISH
		4.30	FINISH		

Alliance Rehabilitation is a specialised private allied health service providing rehabilitation and disability care. Our high-quality, interdisciplinary supports focus on optimal recovery, capacity building and provide timely and efficient care for our participants.





