

# Newsletter August/September 2020



### New Rehabilitation Committee

SSEEO has formed a new Stroke Rehabilitation Committee with the purpose of finding new approaches to stroke rehabilitation and help patients regain independence after stroke.

#### Stroke rehabilitation is vital!

Stroke or "brain attack" can affect your physical and mental function. For many stroke patients on Medicare, 'therapy caps' are a concern because of limits on outpatient speech, physical, and occupational therapies forcing beneficiaries needing therapy beyond the caps to pay out-of-pocket for costly care, or forgo additional therapy needed. Along with therapy caps, cultural and rural differences in post stroke rehabilitation outcomes are also a concern to many.

If you are a healthcare professional interested in joining the discussion, contact christine@sseeo.org



Stroke Rehabilitation Committee

# Stroke Matters

**Podcast Series** 

SSEEO has created these recordings to build community, provide support and share information.



The recent Self-Care series has two new podcasts:

Training the Brain and Telehealth/Telemedicine

### **5** Reasons Hospitals are Safe for Medical Emergencies

Although COVID-19 has changed the world, it hasn't changed the fact that hospitals are the safest place to be if there's a heart attack, stroke or other medical emergency.

Delaying the 911 call that gets you to the hospital can be dangerous - even deadly. Here's why the coronavirus shouldn't make you hesitate or doubt you need emergency help:

- 1. Hospitals are following infection control protocols to sanitize, socially distance and keep infected people away from others. In fact, many hospitals have separate emergency rooms, operating rooms, cardiac catherization rooms and ICUs for people with COVID-19 and for those people suspected to have the disease. Patients are often being met by workers in full protective gear as a precaution, and family member access is restricted.
- 2. Calling 911 immediately is still your best chance of surviving an emergency. It is SAFE for EVERYONE to call 911. It is SAFE for ANYONE to go to the hospital in an emergency. U.S. hospitals are no longer overwhelmed by COVID-19. You shouldn't worry about the system being able to provide adequate care.
- 3. Emergency room workers know what to do, even when things seem chaotic. Emergency rooms have made plans to ensure adequate staffing and keep patients and workers safe. This is their specialty and their strong suit; hospital workers are trained in disaster readiness and to get the job done in any situation.
- 4. Year in and year out, heart disease and stroke are the top two killers worldwide. Someone in the U.S. will have a heart attack and someone else will have a stroke every 40 seconds. More than 350,000 out-of-hospital cardiac arrests occur in the U.S. annually. Hospitals know exactly what to do in these instances to save lives.
- 5. **Fast care is the key to survival.** Minutes matter. People with blocked arteries or clots causing heart attacks or strokes need care quickly. The difference between life and death can be measured in minutes. With so little

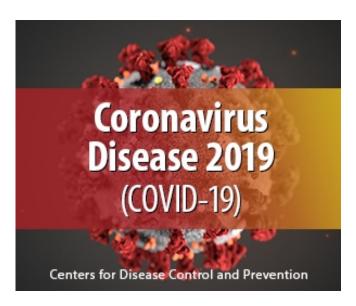
time to work with, and the extra time needed to ensure coronavirus safety measures, calling 911 quickly is more important than ever.

Call 911 if you or a loved one experiences heart attack warning signs - chest discomfort; discomfort in other areas of the body such as your arms, back, neck, jaw or stomach; shortness of breath; and other possible signs, like breaking out in a cold sweat, nausea or lightheadedness.

If you or a loved one has stroke symptoms, which you can remember with the acronym FAST: Face drooping, Arm weakness, Speech slurring or other difficulty, then it's Time to call 911.

If you find a loved one or anyone down and unresponsive (with or without a pulse), call 911 and start CPR right away.

American Heart Association News or www.heart.org



# **Christine Somberg, SSEEO Board Advisor**

SSEEO would like to welcome Christine Somberg, MS APRN-CNS, ACNS-BC, NEA-BC, as an Advisor to the Board. Christine is an advanced practice registered nurse working as a Director of Operations and Professional Development at Northwestern Medicine Lake Forest Hospital. As part of her role, she oversees the Wood-Prince Stroke Program at Northwestern Medicine Lake Forest Hospital which sponsors SSEEO and stroke survivorship initiatives. Christine has served as a nurse for over 30 years and is passionate about helping patients within the hospital and the community.

Christine has three grown daughters that are her pride and joy. She enjoys the outdoors, traveling and biking with family when she is not working.



**Christine Somberg** 

## Stroke Survivor to Survivor Program (SS2S)

SS2S stroke peer support calls have resumed at some area hospitals but other hospitals are struggling to get started. SSEEO would like to continue to support stroke survivors, caregivers and family members even if we are unable to make telephone peer support calls.

Please share your ideas or suggestions how SSEEO can help by emailing christine@sseeo.org.

Recent testimonial and outcome from a stroke survivor's friend:

"Hi there, I'm so happy to have found y'all! My friend (32 years old), suffered a stroke about 3 years ago and has been bounced around from (very bad) nursing home to (very bad) nursing home. She's struggling emotionally, and trying to live as independently as possible but has no resources. I was hoping to discuss any resources I could connect her with including the peer run phone support."

"Thanks so much for your reply! Attaching the form. It'll mean the world to her to talk to someone else who's been there."

"Thanks for the update! She was so excited to fill me in and sounds like it helped a lot. Please pass along a big thank you from me to Mark!"

-Sam

## **SSEEO**

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**Stay Connected** 

Together WE can make a difference.

