



**THE QUEEN'S
HEALTH SYSTEMS**

Hawai'i Stroke Recovery Guide



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01 Legal Disclaimer

The information contained in this **Stroke Recovery Guide** is intended for general educational and informational purposes only. It is not intended to be, nor should it be considered, a substitute for medical advice, diagnosis, or treatment provided by a qualified health care professional. Always seek the advice of your physician, nurse, or other qualified health care provider with any questions you may have regarding a medical condition or treatment.

Never disregard professional medical advice or delay in seeking it because of something you have read in this guide. The inclusion of any product, service, or organization mentioned in this guide does not imply endorsement by the issuing health care organization.

While every effort has been made to ensure the accuracy of the information at the time of publication, medical knowledge is constantly evolving, and the health care organization assumes no responsibility for errors or omissions, or for any outcomes related to the use of this information.

In the event of a medical emergency, call **911**.

02 Welcome & Introduction

PURPOSE OF THIS GUIDE

We welcome you to the **Stroke Recovery Guide**. This resource was created to support you, your family, and your caregivers as you navigate the journey of stroke recovery. Experiencing a stroke can be overwhelming, and the recovery process may feel uncertain at times. Our goal is to provide clear, practical information and compassionate guidance to help you understand what to expect, how to manage your health, and how to access the care and support you need.

This guide reflects the most up-to-date standards of stroke care and rehabilitation. It also emphasizes the vital role of prevention, lifestyle changes, and emotional well-being in achieving the best possible recovery. Whether you are at the beginning of your recovery or further along your path, this guide is designed to be a trusted companion every step of the way.

HOW TO USE THIS GUIDE

This guide is organized into easy-to-read sections that address every phase of stroke recovery and care. You can read it from beginning to end or go directly to the sections that meet your current needs. Each section provides:

- **Information** about stroke types, causes, and treatment options
- **Practical tips** for managing recovery at home and in the community
- **Resources** to help you and your caregivers find additional support
- **Space for notes** so you can personalize your care plan and track your progress

We encourage you to use this guide in partnership with your health care team. It is not a substitute for medical advice but rather a tool to help you understand your care and feel empowered in your recovery journey.

Remember: every stroke survivor's journey is unique. Be patient with yourself, celebrate your progress, and don't hesitate to seek help when needed. You are not alone.

03 Understanding Stroke Recovery

Recovery from a stroke is highly individual. Some people recover quickly, while others require many months or years. This variability is normal. Recovery is influenced by stroke severity, overall health, and early access to rehabilitation therapies (American Stroke Association [ASA], n.d.-a).

WHAT IS A STROKE?

A stroke occurs when blood flow to a part of the brain is interrupted or reduced, preventing brain tissue from getting oxygen and nutrients. Brain cells begin to die within minutes. Prompt treatment is crucial to minimize brain damage and potential complications.

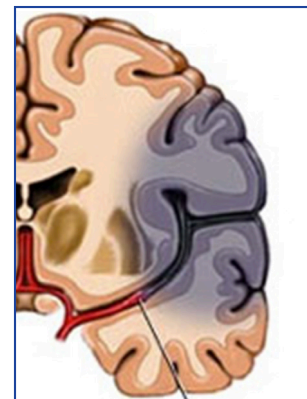
TYPES OF STROKE

Understanding the type of stroke, you've experienced can help in tailoring your recovery plan. The main types include:

1. Ischemic Stroke (Clot)

This is the most common type, accounting for about 87% of all strokes. It happens when a blood clot blocks or narrows an artery leading to the brain, causing a significant reduction in blood flow.

- **Thrombotic Stroke:** A clot forms in one of the arteries supplying blood to the brain.
- **Embolic Stroke:** A clot forms elsewhere in the body and travels through the bloodstream to the brain.

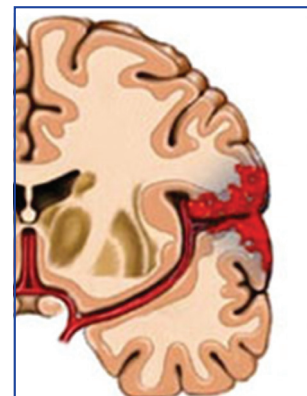


Ischemic Stroke:
A clot blocks blood flow to an area of the brain.

2. Hemorrhagic Stroke (Bleed)

This type occurs when a weakened blood vessel ruptures and bleeds into the surrounding brain tissue. The pressure from the leaked blood damages brain cells. Hemorrhagic strokes are less common but more deadly.

- **Intracerebral Hemorrhage:** Bleeding occurs within the brain.
- **Subarachnoid Hemorrhage:** Bleeding occurs in the space between the brain and the thin tissues covering the brain.



Hemorrhagic Stroke:
Bleeding occurs inside or around the brain tissue.

3. Transient Ischemic Attack (TIA) – “Mini-Stroke”

A TIA is a temporary blockage of blood flow to the brain. Symptoms are similar to those of a stroke but usually last only a few minutes and don't cause permanent damage. However, a TIA is a warning sign of a potential future stroke and should be taken seriously.

Understanding these types can help you and your health care team develop an effective recovery plan tailored to your specific needs. If you need further assistance or have specific questions about your recovery journey, please consult with your health care provider or reach out to the resources mentioned later in this guide.

RISK FACTORS FOR STROKE

Some risk factors cannot be changed, but knowing them can help you stay vigilant:

- **Age:** Risk increases with age, especially after age 55
- **Sex:** Men have a slightly higher risk, but women tend to have worse outcomes
- **Family history:** Having close relatives with stroke increases your risk
- **Race/Ethnicity:** African American, Hispanic, and Asian populations have higher stroke risk

Many risk factors can be managed or prevented:

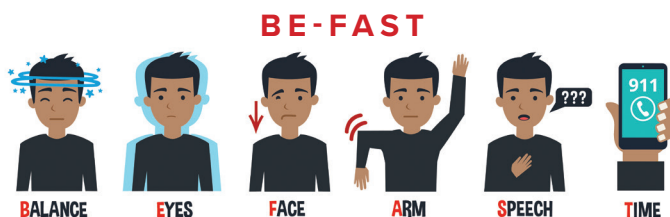
- **High blood pressure (hypertension)** – the most significant controllable risk factor
- **High cholesterol levels**
- **Diabetes**
- **Atrial fibrillation and other heart diseases**
- **Smoking and tobacco use**
- **Excessive alcohol use**
- **Obesity and physical inactivity**
- **Poor diet, especially high in salt and saturated fats**
- **Sleep apnea**

04 Signs and Symptoms of Stroke

RECOGNIZING STROKE WITH BE-FAST

A stroke is a medical emergency. Recognizing the warning signs quickly can save a life and reduce the risk of long-term disability. The acronym **BE-FAST** provides an easy way to remember the most common symptoms of stroke:

- **B – Balance:** Sudden loss of balance or coordination
- **E – Eyes:** Sudden changes in vision or loss of vision in one or both eyes
- **F – Face:** Facial drooping or numbness, especially on one side; an uneven smile
- **A – Arms:** Sudden weakness or numbness in an arm or leg, especially on one side of the body
- **S – Speech:** Slurred speech, inability to speak, or difficulty understanding others
- **T – Time:** Time to call **911** immediately. Every second counts!



Even if symptoms go away, they could indicate a **Transient Ischemic Attack (TIA)**, or “mini-stroke,” and should be evaluated by a health care professional immediately.

THE IMPORTANCE OF IMMEDIATE ACTION

Stroke treatment is highly time-sensitive. The faster a stroke is diagnosed and treated, the better the chance of recovery. Treatments such as clot-busting medications or surgical interventions can only be used within a specific window of time after symptoms begin.

If you or someone around you shows any signs of stroke, do not wait to see if symptoms improve. **Call 911 right away.**

Do not attempt to drive yourself or the person having a stroke to the hospital. Emergency medical services (EMS) can begin life-saving treatment immediately and get you to a hospital prepared to treat strokes.

Remember: Time Lost Is Brain Lost

Every minute matters. Quick recognition and action can mean the difference between a full recovery and long-term disability. **BE-FAST** can help you act with urgency and confidence if you ever witness someone experiencing stroke symptoms.

05 Stroke Emergency Action Plan (PATIENT FILLABLE TEMPLATE)

This page is for you and your caregiver to fill out and keep accessible at home.

Name: _____

Date of Birth: _____

Primary Stroke Doctor/Neurologist:

Name: _____

Phone: _____

Primary Care Provider:

Name: _____

Phone: _____

Emergency Contact #1:

Name: _____

Relationship: _____

Phone: _____

Emergency Contact #2:

Name: _____

Relationship: _____

Phone: _____

Medications List:

(Include name, dose, time)

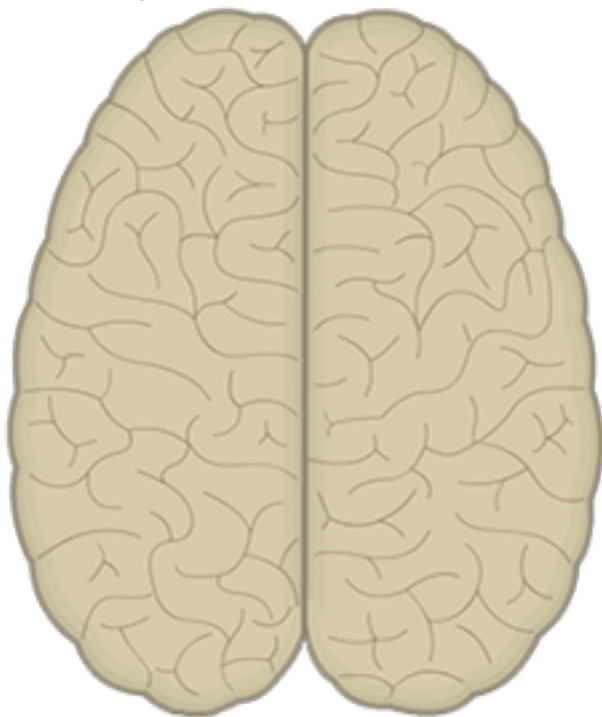
Medication Name	Dose	Route	Prescribed For

06 Where Was Your Stroke?

Ask your doctor, APRN, or the Stroke Navigator to show you.

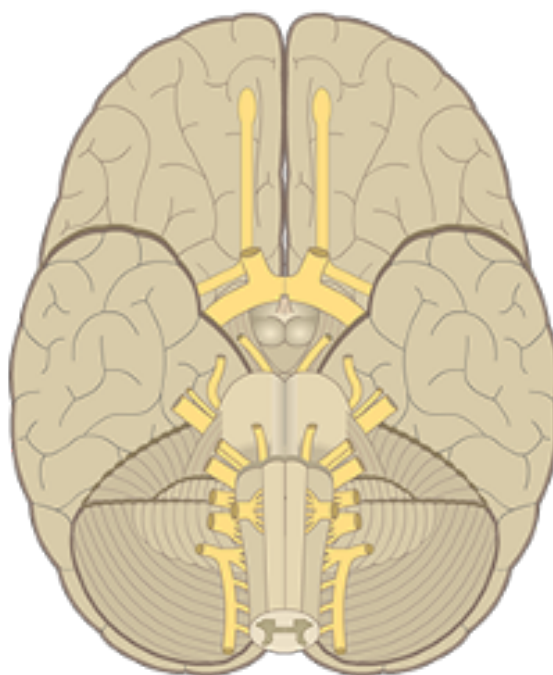
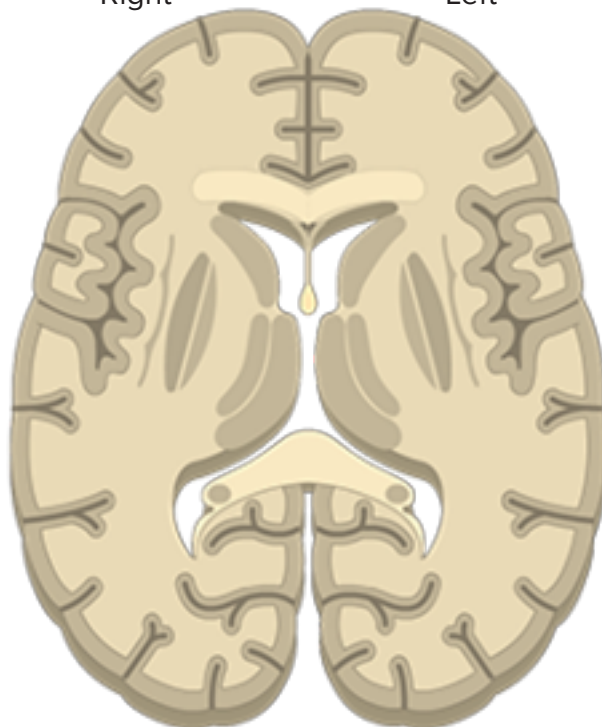
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07 Medications

Type of Medication, Purpose, Side Effects	Medication Names: Check which meds you take
Blood Pressure Lowering – lowers blood pressure and heart rate <u>Possible Side Effects:</u> low blood pressure (lightheaded), headache, slow or very fast heart beat, dry cough	☐ Amlodipine (Norvasc) ☐ Labetalol (Normodyne) ☐ Losartan (Cozaar) ☐ Metoprolol (Lopressor) ☐ Lisinipril (Prinivil, Zestril) ☐ Cardvedilol (Coreg)
Antiplatelets – slows blood clot formation by preventing platelets from sticking together <u>Possible Side Effects:</u> bruises, nosebleed, bleeding	☐ Aspirin ☐ Ticagrelor (Brillinta) ☐ Clopidogrel (Plavix) ☐ Prasugrel (Effient)
Anticoagulant – slows blood clot formation by reducing fibrin formation <u>Possible Side Effects:</u> bruises, nosebleed, bleeding	☐ Apixaban (Eliquis) ☐ Rivaroxaban (Xarelto) ☐ Dabigatran (Pradaxa) ☐ Warfarin (Coumadin) – requires blood work regularly
Cholesterol Lowering – reduces fatty substances in blood, anti-inflammatory effect on blood vessels <u>Possible Side Effects:</u> Gas, upset stomach, muscle soreness	☐ Atorvastatin (Lipitor) ☐ Simvastatin (FloLipid, Zocor) ☐ Rosuvastatin (Crestor) *avoid grapefruit and grapefruit juice
Blood Sugar Control – prevent or treat high blood sugar <u>Possible Side Effects:</u> Low blood sugar, lethargy, weakness	☐ Metformin (Glucophage)-pill ☐ Sitagliptin (Januvia)-pill ☐ Glipizide (Glucotrol)-pill ☐ Glyburide (Diabeta)-pill ☐ Insulin (Lantus, Humulin R, Novolin-N, Novolog)- injections

Tips:

Get a pill box and set a reminder on your phone to take your meds. Forgetting to take your medications or not getting your meds refilled on time is a common cause of patients coming back into the hospital with another stroke.

08 Blood Pressure

Lower Your Blood Pressure (BP): Maintaining a healthy blood pressure can significantly reduce your chances of having another stroke.

1. Get a Blood Pressure machine
2. Check your BP 2 times a day. First, in the morning before eating and taking medications. Second, in the evening before eating dinner or before bedtime. Make sure your feet are flat on the floor and you have given your body a few minutes to settle before taking your BP.
3. Keep a log of your BP numbers. Write down anything that may have contributed to your BP, such as eating a salty meal the night before.

Ways to lower your BP include:

- Consuming less than 1500 mg of salt (sodium) per day and avoiding salty food items including table salt, soy sauce, fish sauce, and canned meat.
- Increasing physical activity. Try something active that you enjoy doing at least 30 minutes per day. This can include walking, dancing, swimming, and yardwork.
- Weight loss of as little as 5-10 lbs. can lower your BP significantly.

Blood Pressure Category	Systolic mm Hg (upper number)		Diastolic mm Hg (lower number)	What to do
Low	Less than 100	and	Less than 60	Consult your doctor. If you are dizzy or lightheaded you need to go to the ED.
Normal 	100-120	and	Less than 80	No action needed.
Elevated	120-129	and	Less than 80	Consult your doctor.
High Blood Pressure Hypertension Stage 1	130-139	or	80 - 89	Consult your doctor.
High Blood Pressure Hypertension Stage 2	140 or higher	or	90 or higher	Consult your doctor.
Hypertension Crisis	Higher than 180	and/or	Higher than 120	Consult your doctor immediately. If you are having a severe headache or other symptom of concern, call 911 or go to the ED.



09 What Happens After Discharge

DISCHARGE PLANNING INFORMATION

Depending on your level of ability after the stroke, the team will discuss what the next step will be after your hospital stay. Our Case Managers and Social Workers are experts in discharge planning.

TYPES OF THERAPY SETTINGS

Acute Rehab Facility

- You or your loved one live and sleep at this facility temporarily.
- Duration of stay: 1-4 weeks, average of 2 weeks, and the duration of stay depends on person's progression in rehab.
- Physical, Occupational, and Speech sessions are considered “intensive”, requiring the person to be able to tolerate 3 hours of therapy a day.

- Doctors and nurses oversee the care of the person.
- Required for acceptance to this facility: A plan for where you or your loved one will live and who will support you or your loved one after the rehab duration, as well as insurance approval.

Skilled Nursing Facility

- You or your loved one live and sleep at this facility temporarily.
- Duration of stay: 1 week to 3 months, depends on person's progression in rehab—if he or she has met the rehab goal or if he or she stops participating in the therapy and the number of days at a skilled nursing facility used previously within the year.
- Physical, Occupational, and Speech sessions are 45 minutes to 1 hour per day, up to 5 days a week.
- Doctors and nurses oversee the care of the person.
- Required for acceptance to this facility: A plan for where you or your loved one will live and who will support you or your loved one after the rehab duration, as well as insurance approval.

Home Health Care

- You or your loved one live and sleep at home.
- Requirements: Person must be homebound (physically unable to leave the house). The person's Primary Care Provider must be willing to oversee the plan of care while the person is receiving home health services. You will need a Primary Care Provider appointment ASAP.
- The agency will call the family/person within 24 hours of discharge from the hospital to set up a "Start of Care Initial Visit".
- Physical, Occupational, and Speech Therapists come into the home up to 3 times per week for 45 minute sessions.
- Home health agencies also have Registered Nurses available if medically necessary.
- For homebound patients, telehealth options for doctor's visits may be helpful or you may want to find a "house call primary care provider".

Outpatient Therapy (PT, OT, SLP)

- You or your loved one live and sleep at home.
- Requirements: a referral from your primary care physician for the specific therapy type (physical, occupational, and/or speech therapy).

- See your Primary Care Physician ASAP for the referral.
- Physical, Occupational, and Speech Therapy sessions are typically 2-3 times per week, ranging from 30-60 minutes per session.
- At the first Physical, Occupational, and Speech Therapy session, the therapist will give you or your loved one a better understanding of what to expect and how many sessions he or she will need.

PHONE NUMBERS

QMC Operator	808-691-1000
Patient Financial Services.....	808-691-4210
Medical Records.....	808-691-4361
Patient Relations.....	808-691-4602
Stroke Navigator.....	808-691-7766

AFTER THE HOSPITAL

After you leave the hospital, you are not alone. Our team is here for you.

Contact our QMC Stroke Navigator at 808-691-7766 if you have questions or concerns.





10 Rehabilitation and Stroke Journey: What to Expect

Rehabilitation often begins in the hospital and may continue at home or in a rehab center. Common therapies include:

- **Physical therapy (PT)** to regain strength, movement, and balance
- **Occupational therapy (OT)** to relearn activities of daily living
- **Speech-language therapy** to improve speech, language, swallowing, and cognition

ACUTE CARE

- Immediate focus on stabilization and preventing further brain damage.
- May involve imaging tests, medication, or surgery.



ONGOING CARE

- Regular follow-ups with neurologists and therapists.
- Access to outpatient rehabilitation services and support groups.

RECOVERY TIMELINE

- **First Few Weeks:** Stabilization and early therapy.
- **1–3 Months:** Intensive rehabilitation and goal setting.
- **6–12 Months:** Progress toward independence.
- **Beyond 12 Months:** Continued adaptation and long-term recovery.

AEROBIC ACTIVITY

What is it?

Aerobic exercises are activities that increase your heart rate and breathing, improving cardiovascular endurance.

Recommendations

Engage in **moderate-intensity aerobic activity** for at least **150 minutes per week**, or **75 minutes per week** of vigorous activity. This can be broken down into sessions of **20–60 minutes per day, 3–7 days per week**.

Rehabilitation is a critical component of stroke recovery, aiming to help survivors regain as much independence and function as possible. The American Heart Association and American Stroke Association emphasize the integration of both aerobic and muscle-strengthening exercises into rehabilitation programs, as each plays a unique role in recovery.

Why is it important?

Aerobic exercise helps:

- Improve walking ability and balance.
- Enhance cardiovascular health, reducing the risk of a second stroke.
- Boost mood and cognitive function.

Examples:

- Brisk walking.
- Stationary cycling.
- Swimming.
- Water aerobics.

MUSCLE-STRENGTHENING ACTIVITY

What is it?

These exercises involve working against resistance to build muscle strength and endurance.

Recommendations

Perform **moderate- to high-intensity muscle-strengthening activities** on at least **2 days per week**.

Why is it important?

Strength training helps:

- Counteract muscle atrophy from inactivity.
- Improve the ability to perform daily activities.
- Enhance overall mobility and reduce fall risk.

Examples:

- Using resistance bands.
- Light weightlifting.
- Bodyweight exercises like squats or wall push-ups.

COMBINING BOTH FOR OPTIMAL RECOVERY

Integrating both aerobic and strength-training exercises provides comprehensive benefits:

- Enhances cardiovascular and muscular health.
- Supports neuroplasticity, aiding brain recovery.
- Improves overall quality of life and independence.

Note: It's essential to tailor exercise programs to individual capabilities and consult with health care providers before starting any new exercise regimen.

11

Alternative and Supplemental Therapies

In addition to conventional therapies, supplemental approaches can help:

- **Aquatic therapy:** Exercising in water reduces joint stress and improves mobility (HydroWorx, n.d.)
- **Yoga:** May improve balance, flexibility, breathing, and relaxation; proven helpful in small stroke rehabilitation studies (Lawrence et al., 2019)

These therapies should complement—not replace—your primary stroke rehab program.

My Stroke Recovery Tracker (PATIENT WORKSHEET)

Use this to track your recovery progress. Bring this to appointments.

Name: _____

Date of Stroke: _____

Date	Exercise Goal	Completed Therapy	Notes

MILESTONES TO CELEBRATE

- First time walking ____ feet _____
- First speech therapy session completed _____
- First day without assistance _____

Keep going! Every small step matters.

13 Financial, Legal and Advance Care Planning Resources

Recovering from a stroke can be financially and legally complex. Medical bills, rehabilitation costs, insurance navigation, and long-term care planning can add stress during an already difficult time. The following resources are intended to help patients, families, and caregivers access financial assistance, legal guidance, and advance care-planning support.

NATIONAL RESOURCES

American Stroke Association (ASA)

The ASA offers comprehensive information on managing the financial aspects of stroke recovery, including:

- Insurance guidance and understanding coverage
- Assistance programs for therapy, medications, and equipment
- Financial planning tools for stroke survivors

Website: <https://www.stroke.org/en/life-after-stroke/recovery/managing-your-stroke/finances-insurance-and-assistance>

Social Security Disability Insurance (SSDI) and Supplemental Security Income (SSI)

If your stroke has left you unable to work, you may qualify for federal disability benefits:

- **SSDI:** For individuals with sufficient work credits
- **SSI:** For individuals with limited income and resources, regardless of work history

How to apply:

- Online: <https://www.ssa.gov>
- Phone: 1-800-772-1213
- In person: Local Social Security office

Applications require medical documentation, provider statements, and work history. Determination may take several months.

Veterans Affairs (VA) Benefits

U.S. military veterans who experience a stroke may be eligible for additional services through the Department of Veterans Affairs, including:

- VA health care and rehabilitation services
- Disability compensation

- Long-term care programs
- Caregiver assistance programs

How to access VA benefits:

- Visit <https://www.va.gov>
- Call 1-800-827-1000
- Contact your local VA Medical Center or VA benefits counselor

HAWAI'I-SPECIFIC FINANCIAL ASSISTANCE AND BENEFITS

Supplemental Nutrition Assistance Program (SNAP)

Provides food assistance to eligible low-income individuals and families through an Electronic Benefit Transfer (EBT) card.

- Apply online via PAIS: <https://pais-benefits.dhs.hawaii.gov>
- Phone assistance: 1-855-643-1643

General Assistance (GA)

Provides financial aid to adults aged 18–65 without minor dependents who are temporarily disabled and unable to work.

- Benefit amount: approximately \$348 per month
- Apply via [PAIS portal](#) or by phone at 1-855-643-1643

Med-QUEST (Hawai'i Medicaid)

Med-QUEST provides health coverage for eligible low-income residents, including:

- Hospital care
- Physician visits
- Rehabilitation services
- Long-term care

Website: <https://medquest.hawaii.gov>

Phone: 1-877-628-5076

LONG-TERM CARE MEDICAID (LTC MED-QUEST)

Qualifying for Long-Term Care Medicaid generally requires **two components**:

- Meeting financial eligibility criteria
- Meeting “level of care” criteria

Application processes may vary depending on whether the individual is in the hospital, skilled nursing facility, or community setting.



MEDICAID ELIGIBILITY AND APPLICATION SUPPORT

Elevate Patient Financial Solutions (EPFS) – The Queen’s Medical Center

A third-party agency that assists with:

- Medicaid eligibility screening
- Long-Term Care Medicaid applications
- SSDI applications

Phone: 808-691-4210

Email: ElevatePFS@queens.org

ADVANCE CARE PLANNING AND LEGAL PREPARATION

Advance care planning helps ensure that health care wishes are known and respected if a person becomes unable to speak for themselves.

Kōkua Mau – Advance Care Planning in Hawai‘i

Kōkua Mau is Hawai‘i’s trusted resource for:

- Advance Directives
- POLST forms
- Palliative care education

- Hospice care education
- Dementia and advanced illness planning

Kōkua Mau means “Continuous Care” in Hawaiian.

Website: <https://kokuamau.org>

Important Clarification on Legal Authority

Advance Directives and POLST forms do not authorize decision-making regarding finances or assets.

Financial institutions typically require:

- A **Durable Power of Attorney** or **General Power of Attorney**, or
- Court-appointed guardianship/conservatorship, or
- A death certificate

Hospital social workers and medical teams are not permitted to provide legal advice on financial power of attorney documents. Families are encouraged to consult an attorney or estate planner.

LEGAL ASSISTANCE RESOURCES (HAWAI‘I)

Legal Aid Society of Hawai‘i

Provides free or low-cost civil legal services to eligible individuals.

Website: <https://www.legalaidhawaii.org>

Phone: 1-800-499-4302 (Neighbor Islands)

Hawai‘i State Bar Association – Legal Assistance Resource List

Helps the public locate affordable legal representation.

Website: <https://hsba.org/find-a-lawyer/legal-assistance>

Hawai‘i State Judiciary – Self-Help Centers / Access to Justice Rooms

Provides free legal information and limited assistance statewide.

Website: https://www.courts.state.hi.us/general_information/access_to_justice_rooms_self_help_centers

Kaua‘i Pilot Program

Volunteer attorneys provide limited legal information by phone on Mondays and Thursdays (10:00 am – 12:00 pm, except holidays).

Phone: 808-909-2836

Caregiver Support and Community-Based Services

Caregivers play a vital role in stroke recovery. Supporting a loved one after a stroke can be physically, emotionally, and financially demanding. The resources below are designed to help caregivers access education, respite, emotional support, and practical assistance while maintaining their own health and well-being.

Caregivers may benefit from:

- Educational materials to better understand stroke and recovery
- Respite care to provide temporary relief
- Peer support to reduce isolation and stress (American Stroke Association [ASA], n.d.-a)

Caring for a loved one after a stroke can be both rewarding and challenging. Fortunately, numerous resources are available to provide support, education, and respite for caregivers.

NATIONAL CAREGIVER SUPPORT RESOURCES

American Stroke Association (ASA) – Caregiver Resources

The ASA offers comprehensive caregiver-specific information, including education, self-care strategies, and connections to local support services.

Website: <https://www.stroke.org/en/help-and-support/for-family-caregivers>

Caregiver Action Network (CAN)

A national nonprofit organization providing free education, peer support, and resources to family caregivers.

Website: <https://www.caregiveraction.org>

Family Caregiver Alliance (FCA)

Provides online support groups, educational materials, and a caregiver navigator tool. FCA also offers culturally responsive caregiving resources.

Website: <https://www.caregiver.org/resource/stroke>

VA Caregiver Support Program

For caregivers of U.S. military veterans, the VA offers training, peer mentoring, and respite care services. Eligibility and services vary.

Website: <https://www.caregiver.va.gov>



HAWAI'I-BASED CAREGIVER SUPPORT RESOURCES

Hawai'i Community Caregiver Network (HCCN)

Offers caregiver classes, support groups, and resources to help caregivers maintain their own well-being while caring for loved ones.

Website: hawaiicaregivers.org.

Project Dana

Provides non-medical assistance to kūpuna with instrumental activities of daily living (IADLs).

Services include:

- Friendly visitation
- Home services
- Meal delivery
- Transportation
- Grocery shopping

Website: <https://www.projectdana.org>

Phone: 808-945-3736

The Caregiver Foundation

Provides caregiver education, resources, and assistance with daily money management tasks.

Website: <https://thecaregiverfoundation.org>

Phone: 808-625-3782

City & County of Honolulu – Department of Elderly Affairs (Senior Helpline)

Acts as a central navigation resource for elder care services and eligibility screening. Strongly recommended for families seeking home care services when not on Medicaid.

Website: <https://www.elderlyaffairs.com>

Phone: 808-768-7700

Gimme a Break

A caregiver-focused organization emphasizing self-care, resilience, and emotional survival for caregivers.

Website: <https://gab808.org>

Phone: 808-754-3787

Catholic Charities Hawai'i – Phone-A-Friend Program

Provides regularly scheduled phone calls to seniors who live alone or are socially isolated.

Website: <https://www.catholiccharitieshawaii.org/phone-a-friend>

Phone: 808-527-4777

AGENCIES SUPPORTING IN-HOME CARE, PLACEMENT, AND COMMUNITY LIVING

Families seeking private hire caregivers, adult day programs, assisted living, or residential care options may find the following referral agencies helpful. Services are generally provided at no cost to families.

Care Sift

Offers free one-on-one senior care advocacy and placement support.

Website: <https://caresift.com>

Nursing Home Partners

Registered Nurse–led senior care placement advisors offering education and placement assistance.

Website: <https://nursinghomepartners.com>

Elite Care Finders

Provides personalized, concierge-style senior care referrals at no cost to families.

Website: <https://www.elitecarefinders.com>

Vencer Health (Home Care App)

A mobile platform designed to help caregivers find affordable home care providers.

Website: <https://www.vencerhealth.com>

Ho'okele Home Care – Vivia Program

Provides team-based in-home care with no minimum hour requirements.

Website: <https://hookelehomecare.com>

FOOD ASSISTANCE FOR SENIORS

Access to nutritious food is an important part of recovery and overall health.

Hawai'i Meals on Wheels

Operates in coordination with the City & County of Honolulu Elderly Affairs Division.

Eligibility generally includes:

- Age 60 or older
- Living within the service area
- Being homebound and unable to shop or prepare meals independently

Website: <https://hmow.org>

Access via Senior Helpline: 808-768-7700

Lanakila Meals on Wheels

Provides meals to homebound seniors, caregivers in need of respite, and households with younger individuals with disabilities.

Payment options may include insurance coverage, Medicaid/ADRC referrals, private pay, or SNAP EBT.

Website: <https://lanakilapacific.org/mealsonwheels>

CAREGIVER BURNOUT SELF-CHECK QUIZ

Caregiver Burnout Self-Check

If you answer “Yes” to 3 or more, please consider contacting your care team for support.

Question	Yes / No
I often feel physically exhausted.	
I have trouble sleeping or focusing.	
I feel overwhelmed by caregiving tasks.	
I’ve lost interest in hobbies I used to enjoy.	
I feel isolated or alone.	
I feel irritable or frustrated more than usual.	
I neglect my own health appointments.	
I don’t have regular breaks or help.	

Remember: Taking care of yourself is part of caring for your loved one.

For resources, visit [American Stroke Association Caregiver Support](#)

Stroke, Brain Injury, and Dementia Support Resources

Connecting with others who have experienced stroke can provide emotional support, practical advice, and a sense of community for both survivors and caregivers.

NATIONAL SUPPORT RESOURCES

American Stroke Association (ASA) – Stroke Support Group Finder

A searchable directory of in-person and virtual stroke support groups across the United States.

Website: <https://www.stroke.org/en/stroke-support-group-finder>

Stroke Family Warmline

Provides information, emotional support, and resources from trained professionals.
Phone: 1-888-4-STROKE (1-888-478-7653)

Pacific Stroke Association (PSA)

Offers monthly virtual support groups for stroke survivors and caregivers.

Website: <https://pacificstrokeassociation.org/stroke-support-groups>

HAWAI'I-BASED SUPPORT GROUPS

The Queen's Medical Center – Stroke Survivor Support Group

Open to stroke survivors across all Hawaiian Islands. Meetings include guest speakers, focused topics, and peer discussion.

- Virtual Meetings: <https://www.queens.org/events/qmc-stroke-survivor-online-support-group-virtual>
- In-Person Meetings: <https://www.queens.org/events/qmc-stroke-survivor-online-support-group>

REHAB Stroke Club – Rehabilitation Hospital of the Pacific

Provides support and social engagement opportunities for stroke survivors in Honolulu.

Website: <https://www.rehabhospital.org>

Aloha Independent Living Hawai'i – Peer Support Groups

Provides peer support for adults with disabilities, including stroke survivors.

Website: <https://www.alohailhawaii.org>

Brain Injury O'ahu Support Group (BIOSG)

Offers support for individuals with brain injuries, including stroke-related injuries.

Website: <https://biausa.org/find-bia/hawaii>

John A. Burns School of Medicine – Support Group Resource Hub

Lists current support groups related to stroke, brain injury, caregiving, mental health, and spinal cord injury.

Website: <https://pdc.jabsom.hawaii.edu/resources.html>

DEMENTIA AND COGNITIVE CARE RESOURCES

Stroke survivors may experience cognitive changes or develop dementia-related conditions. These resources provide education, caregiver support, and clinical services.

Hawai'i Circle of Care for Dementia (Catholic Charities Hawai'i)

Provides training, webinars, programs, and online resources related to Alzheimer's disease and related dementias.

Website: <https://www.catholiccharitieshawaii.org/hawaii-circle-of-care-for-dementia>

Alzheimer's Association – Hawai'i

Offers free support groups, education, and resources for individuals living with Alzheimer's and other dementias and their caregivers.

Website: <https://www.alz.org/hawaii/support>

Kōkua Mau – Alzheimer's & Advanced Dementia Resources

Provides additional guidance on advance care planning for individuals with dementia and Alzheimer's disease.

Website: <https://kokuamau.org/kokua-mau-resources/advanced-dementia-resources-and-issues>

Hawai'i Dementia Initiative

A statewide coalition working to improve dementia awareness, care, and caregiver support.

Website: <https://hawaiidementia.org>

Queen's Geriatric Services

Offers comprehensive geriatric care across outpatient, inpatient, long-term care, and home-based settings.

Website: <https://www.queens.org/locations/hospitals/qmc/services/geriatric>

16 Adult Day Health Programs

Adult day health programs provide daytime supervision and assistance for older adults, allowing family caregivers to work, attend appointments, or rest. Programs typically involve out-of-pocket costs; some may accept Medicaid or VA benefits.

Hawai'i Department of Health – Adult Day Health Centers

Website: <https://health.hawaii.gov/ohca/medicare-facilities/adult-day-health-centers>

Adult Day Care Centers

Website: <https://health.hawaii.gov/ohca/files/2020/10/Adult-Day-Care-Centers-10-2020.pdf>

Alzheimer's Association – Adult Day Center Guidance

Website: <https://www.alz.org/help-support/caregiving/care-options/adult-day-centers>



Transportation Support in Hawai‘i

Reliable transportation is essential for medical appointments, therapy, and community participation.

The Handi-Van (City & County of Honolulu ADA Paratransit)

Provides transportation for individuals unable to use TheBus independently.

Website: <https://www8.honolulu.gov/dts/thehandivan>

Phone (assessment scheduling): 808-538-0033

Assessment Location:

First Insurance Center

1100 Ward Ave., Suite 835

Honolulu, HI 96814

Disability Parking Permit (City & County of Honolulu)

Applications are submitted at Satellite City Halls (appointment required).

Website: <https://health.hawaii.gov/dcab/disability-parking-permits/city-and-county-of-honolulu-disability-parking-permit-information>

Appointment assistance: 808-768-4325

Catholic Charities Hawai‘i – Transportation Services

Provides door-to-door transportation for seniors aged 60 and older.

Website: <https://www.catholiccharitieshawaii.org/senior-services/transportation-services-program>

Access via Elderly Affairs Division Helpline: 808-768-7700

Additional information:

Catholic Charities Senior Services Helpline: 808-527-4777

Transportation Friends for Kūpuna (TFK)

Provides free transportation and escort services for seniors on O‘ahu.

Website: <https://www.catholiccharitieshawaii.org/transportation-friends-for-kupuna>

Culturally Relevant Resources for Stroke Survivors in Hawai‘i

Aloha Independent Living Hawai‘i

Disability peer support and independent living skills statewide.

Website: <https://www.alohailhawaii.org>

REHAB Hospital of the Pacific – Stroke Support Group

In-person and virtual options in Honolulu.

Website: <https://www.rehabhospital.org>

Native Hawaiian Healing (Lomilomi Massage)

Traditional massage for comfort & relaxation.

Note: This does not replace medical care. Always consult your provider.

Language Access Resource Center (State of Hawai‘i)

Free hospital interpretation services for non-English speakers.

Website: health.hawaii.gov/ola/free-interpreter-help-in-multi-languages

Dial 211 – Aloha United Way

Statewide resource line for housing, food, transportation, financial aid, and caregiver support.

Call 211 or visit auw.org/about/211-hawaii.

19 Research and Clinical Trials

Stroke survivors may qualify for research studies or new treatments. Participation can provide access to emerging therapies and contribute to advancements in stroke care.

NATIONAL RESEARCH OPPORTUNITIES

ClinicalTrials.gov

Searchable registry of ongoing stroke-related clinical trials

Website: <https://clinicaltrials.gov>

STRIVE Study (Stroke Research Initiative to adVance Equity)

A longitudinal study focused on stroke survivorship and caregiver outcomes.

Website: <https://www.medstarhealth.org/blog/strive-stroke-survivor-study>

Michigan Stroke Transitions Trial (MISTT)

A PCORI-funded study examining post-stroke transition support programs.

Website: <https://www.pcori.org/research-results/2014/comparing-programs-support-stroke-survivors-and-their-caregivers-during-transition-home-hospital-or-rehabilitation-facility-mistt-study>

National Institute of Neurological Disorders and Stroke (NINDS)

Database of NINDS-sponsored clinical trials.

Website: <https://www.ninds.nih.gov/health-information/clinical-trials/find-ninds-clinical-trials>

HAWAII-BASED RESEARCH OPPORTUNITIES

The Queen's Medical Center – Comprehensive Stroke Center

Participates in research and clinical trials aimed at improving stroke care and outcomes.

Project RAPID Hawai'i

A statewide collaboration focused on improving acute stroke care and access to mechanical thrombectomy.

Website: <https://health.hawaii.gov/nt/stroke/project-rapid-hawaii-a-statewide-collaboration-on-acute-stroke-care>

Hawai'i Stroke Coalition

A statewide nonprofit organization focused on improving stroke outcomes through education, advocacy, and community programs.

Website: <https://hawaiistrokecoalition.org>

Hawai'i Department of Health – Neurotrauma Program

Provides assistance and resources for individuals and families affected by neurotrauma, including stroke.

Website: <https://health.hawaii.gov/nt>

Glossary of Common Stroke Terms

Aphasia: Difficulty speaking or understanding language after a stroke.

Dysphagia: Trouble swallowing safely.

Embolic Stroke: A blood clot travels from another part of the body to block a brain artery.

BE-FAST: Reminder to recognize stroke symptoms (Balance issues, Eye/vision changes, Face drooping, Arm weakness, Speech problems, Time to call 911).

Hemorrhagic Stroke: Bleeding in or around the brain due to a burst blood vessel.

Ischemic Stroke: The most common type of stroke caused by a blocked blood vessel.

Neuroplasticity: The brain's ability to form new connections after injury.

NIH Stroke Scale (NIHSS): A scoring system used by clinicians to measure stroke severity.

Rehabilitation: Therapy programs to help you regain strength, movement, and communication after stroke.

Transient Ischemic Attack (TIA): A brief, warning stroke (sometimes called a mini-stroke) that resolves but signals high risk of future stroke.

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