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Dear Reader,

Welcome to the first SSNF newsletter of 2026!

The Scottish Stroke Nurses Forum is excited to start a new year and I expect, we are all thinking about what comes next.

The SSNF committee will be meeting soon to start planning for the year ahead including setting a date for the return of our stroke nursing conference later this year. We all may have thought about our own personal and professional goals for this year and we would love to be a part of demonstrating the great work you all do. SSNF will be looking for abstracts, posters and speakers and perhaps, 2026 is the year you take part!

This year, SSNF will be looking at the monitoring we do for those who receive thrombolysis. This is an exciting area for improvement but also an opportunity to apply new evidence to our practice. **Stroke ANP Trish Elder Gracie has summarised the evidence that is out there for us all.**

Our newsletter is also reflecting on some of the highlights of 2025, including UKSF! SSNF were able to contribute to the programme and showcase some of the exciting work and development in Scottish stroke nursing.

Lastly, please look out for new social media content from SSNF, with a **new LinkedIn profile**, we are hoping to share more informative and educational content, but also, highlighting our community of stroke nurses.

Watch this space...

Zara Tumblety
SSNF Chair

January Newsletter Content

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[Glass Half Full or Half Empty](#)

The Scottish Stroke Nurse Forum aims to bring theory to practice and with this in mind we have been looking at the results of the **The Optimal Post rTpa-iv Monitoring in Ischaemic stroke trial (OPTIMISTmain)** which was reported in May 2025 at the European stroke conference.

This is an important trial for stroke nurses and has the potential to release available nurse resource post thrombolysis treatment. Post stroke thrombolysis observations have not changed since the NINDS trial 1995 where thrombolysis versus placebo were compared for risk of intracranial haemorrhage (ICH).

[Read the full article](#)



[UKSF Update](#)

The UK Stroke Forum (UKSF) marked its 20th anniversary in Aberdeen, welcoming over 1500 delegates to the UK's largest multidisciplinary stroke

working closely with the National Stroke Nursing Forum (NSNF) to deliver a dedicated programme of nursing sessions.

A major highlight was the joint SSNF–NSNF workshop on the RCN Career Development Framework, chaired by **SSNF Chair Zara Tumblety** and with input from **SSNF Committee member Amanda Johnson (Chest Heart & Stroke Scotland)** who presented on CHSS elearning resources to support nurses' development. This was followed by a session on the priorities, roles and impact of stroke nursing across the UK, where Zara outlined Scottish priorities on behalf of SSNF. These sessions sat alongside wider UKSF content on stroke policy and voluntary sector support in Scotland, much of which reflects work SSNF members are involved in. It was great to see such a strong suite of sessions designed by and for the Scottish stroke community.

For the first time, SSNF hosted its own exhibition stand beside NSNF, creating a lively hub for networking, sharing resources and strengthening collaboration between our forums. SSNF also funded two members to attend UKSF. **Lynne Rennie (NHS Highland)** and **Gowri Saravanan (NHS Shetland)**, reflected on their UKSF experiences:

“Attending UKSF was such a rewarding experience for me. I loved the chance to connect with colleagues from across the country and share ideas. The talks were inspiring and gave me fresh perspective; the exhibition stalls were a real highlight as they provided so much information on new technology and innovative ways to improve stroke services. I left feeling motivated and excited about how I can bring these ideas into my own practice.” (Lynne)

'The UKSF Conference 2025 was exceptionally well organized, insightful, and inspiring. The sessions were highly relevant, and the speakers shared valuable perspectives that will positively impact our work. The networking opportunities were excellent, and it was a truly engaging experience overall. I especially appreciated the chance to meet face to face and connect with fellow Scottish stroke nurses.' (Gowri)



The joint NSNF–SSNF prize for the highest scoring nursing abstract was awarded to **Jo Claydon** for her work on prehospital video triage for stroke. The programme also included the first ever **Lived Experience Panel**, developed and chaired by stroke survivors, offering valuable insights into what helps stroke care feel genuinely safe and supportive. You can absolutely give it a bit more personality without tipping into anything inappropriate. And finally, we couldn't do a roundup of UKSF 2025 without saying a very happy 50th birthday to **SSNF Treasurer, Tom Jones**, who celebrated in style at UKSF with colleagues and a special musical performance from **Charlie Chung**. Not quite that Tom Jones... but still a evening worth singing about!

UKSF 2024 was a milestone year for stroke nursing, strengthening UK wide collaboration and ensuring that nursing leadership and lived experience remain central to the future of stroke care. Planning for UKSF 2026 will begin shortly, and SSNF would welcome your ideas. What would you find most useful to hear or learn about? Are there practical workshops you'd like included? Are you working on a service development, innovation or QI project you could share with the wider stroke nursing community?

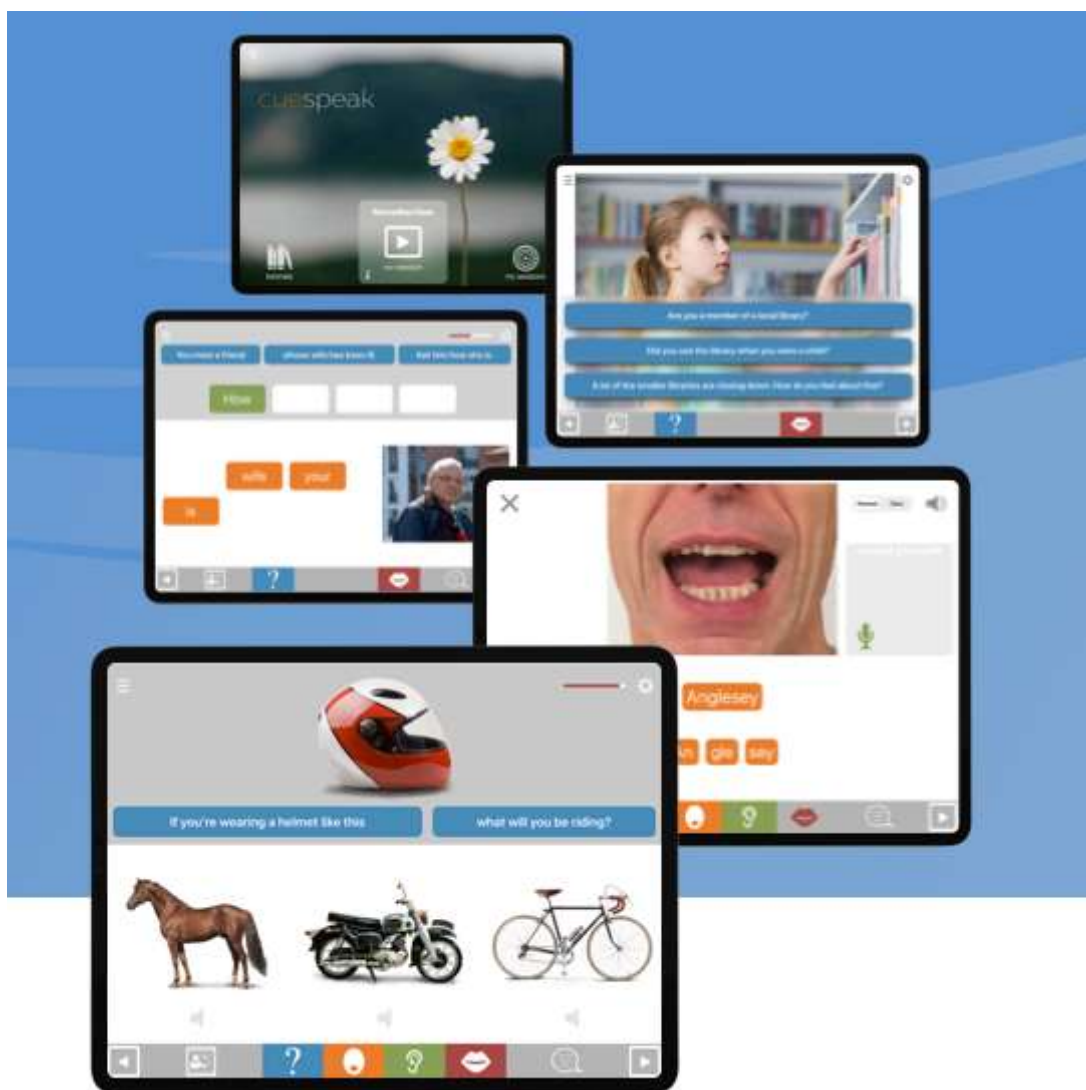
Please send any thoughts or suggestions to Lisa Kidd:

[Email Lisa Kidd](#)

The call for abstracts for posters and oral presentations will open in the coming weeks. If you have an idea but are unsure how to get started, Lisa is also

Registration for UKSF 2026 opens in July, and you can sign up for UKSF updates via the mailing list.

Join the UKSF Mailing List



[Cuespeak](#)

Cuespeak in the Stroke Unit and Out-patient Pathways at **Inverclyde Royal Hospital**. Cuespeak is a UK-developed, NHS-recommended speech and language therapy app designed specifically for adults with aphasia and apraxia following stroke. Its evidence-informed design makes it ideal for our stroke unit and for continuity of care into out-patient rehab, offering intensive practice that aligns with what we know works in aphasia therapy.

What sets Cuespeak apart is how quickly we can build bespoke therapy programmes tailored to each person's goals and level. The app provides

personalise content (e.g., family names, significant places) and adjust difficulty so sessions stay relevant and appropriately challenging.

In the stroke unit, Cuespeak enables structured, independent practice between therapist visits. Sessions run automatically at the press of a button, meaning patients can be safely left to work through targeted exercises—maintaining therapeutic intensity even in the therapist's absence. The app's clear prompts, built-in feedback, and adaptable settings also make it a practical tool for trained volunteers supporting communication practice on the ward, helping to reinforce strategies and keep patients engaged.

Post-discharge, many patients choose to continue with Cuespeak and purchase the app for use at home. Crucially, we can link to their app remotely: clinicians create and send session updates over the internet and receive usage data and results back, allowing us to lead and refine home programmes without requiring frequent in-person visits but still enabling us to provide intensive therapy.

Cuespeak has become an invaluable part of our speech and language therapy pathway at Inverclyde Royal Hospital. Its flexibility, clinical depth, and ability to deliver personalised therapy make it an effective tool across the stroke unit and into community-based rehabilitation. By enabling independent, intensive practice, supporting volunteers on the ward, and allowing clinicians to guide therapy remotely after discharge, Cuespeak helps us maintain continuity, reduce barriers to practice, and empower patients in their recovery. Ultimately, it enhances both the quality and reach of our service—ensuring that patients can keep progressing, wherever they are in their rehabilitation journey.



Rainbow Garden

The Larkfield Unit at Inverclyde Royal Hospital is home to stroke services, the Neurorehabilitation service and Older People's Service wards for Inverclyde. The IRH Rainbow Garden has become a firm favourite with patients, their families, visitors and staff members alike.

The project was the brainchild of **Specialist Stroke Occupational Therapist Sandra Forbes**, who came up with the idea after taking a patient outside for some fresh air and to have privacy to Facetime his son in 2020.

"The patient had just transferred to the Larkfield Unit, and I thought some time outside would be beneficial," said Sandra, "but it looked very, very sad. There was no colour, and the wishing well in the middle had rotted.

"I wanted to make it a nicer place and thought, do you know what, it wouldn't take much to make it lovely."

Sandra spoke to the company that maintained the garden, Bellrock, to make sure they had no objection to the work, and as well as giving Sandra their blessing, they also donated £200 for bedding plants and gave the team the tools they needed.

Then it was down to work with the help of staff from the hospital, who had been persuaded by Sandra – "I basically coerced them," she joked – to lend a hand.

Following the introduction of the garden, local business, groups and volunteers have given up their time, made donations or even provided items to be used in the space. The community engagement has transformed it into a tranquil haven, where people want to spend time, especially in the summer.

said.

“There was one lovely donation from a family whose relative had been treated at the unit following a stroke. They have given us a bench with a table and companion seat. It was such a nice gesture.”

“It’s still a work in progress,” Sandra said, “but it’s so lovely that people can use it properly, and enjoy it.

“We named it the IRH Rainbow Garden, which seemed fitting after COVID.”

Sandra thanked everybody from the hospital and beyond who do so much to help this ongoing project.

“It has been such a fantastic team effort,” she added, “and to see the whole community rally round and help has been wonderful.



The Cardwell Garden Centre donate a Christmas Tree and our Stroke Specialist Nurse Helen McIntyre donated an Evergreen Gonk, and decorations were also hung inside rooms and corridors in the unit.

“We were delighted to get the festive period underway by lighting up the Rainbow Garden, giving patients, staff and visitors a space to enjoy from the warmth of the Larkfield Unit.

When Spring and the good weather comes, the Larkfield Unit's outside space will be a hive of activity.

Dogs for Good

DOGS FOR GOOD

"I feel I have benefitted so much from the Dogs for Good study." - JM

"I could do this 3 or 4 times a day." - KR

"I feel so energised after the sessions." - AC

19 Sessions

12 Patients

8 Weeks

Dogs for Good and Inverclyde Royal Hospital

Animal Assisted Stroke Rehab Block Two

An initiative integrating animal-assisted services into stroke rehabilitation using structured activities and guided interactions with the dog, designed to support motor, cognitive and emotional recovery.

Early feedback suggests participants moved closer to their individual goals while working with the dogs.

For making life possible

Dogs for Good, Registered Charity in England & Wales: 1092969
Registered in Scotland: SC939828



Scottish Stroke Nurses Forum Newsletter is supported by Chest Heart & Stroke Scotland

If you have an article you would like to submit for the next newsletter please contact melissa.grieve@chss.org.uk

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