

COMBINED REHABILITATION IN THE COMMUNITY FOR PEOPLE WITH COPD & HEART FAILURE

Addressing Barriers & Gaps to Improve Access

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Outline

- > Local context incl. project rationale
- > Process of program development
- > 'Easy Breathers' Program
- > Lessons learnt
- > Critical success points

Southern Adelaide Region



- > 1/5th of population of South Australia
~340,000
- > High proportion of >65 yr olds
- > 3 public hospitals, private hospitals
- > Primary health services
- > 4 main community non-government providers & numerous private providers
- > One main 'gold standard' pulmonary rehab program
- > One small heart failure rehab program

Local Issues of Access

- > Existing 1:1 self-management programs or generic group programs
 - > Under-utilisation of existing rehab programs
 - > Transport, distance & parking significant barriers to access
 - > Programs run on certain days & times only
 - > Lack of programs specific to heart failure across the Southern Adelaide region
 - > Lack of programs in the outer southern suburbs
 - > Lack of options for people who have been at more intensive programs transitioning into community
- A need for programs that are more accessible in community e.g. location, timing

'Easy Breathers' Project

Aims:

- > To improve accessibility, suitability, efficacy & uptake of community-based rehabilitation & self-management support for clients with COPD & Heart Failure

Objectives:

To develop a program that is

- > Consistent with evidence-based practice
- > Transferable across a range of settings
- > Able to be delivered in a manner that ensures consistency, quality & safety
- > Trialled & evaluated within Southern Adelaide region
- > Builds onto & is complementary to current service environment

How did we go about developing it?

- > Project funded by the Australian Better Health Initiative (ABHI)
- > To increase the availability & promote the self-management support programs for people with chronic disease
- > Southern Health Project officer to drive project and engage with stakeholders

Relationship-building crucial

- > Intersectoral approach
- > Working group with stakeholders
- > Valuable in terms of:
 - relationships formed between referrers & providers
 - meeting together with common objectives & discussing a joint model
 - all having a sense of ownership over the model's development

Relationship-building & Partnerships

- > Consumer reference group
- > Evidence-based Best Practice Statements
 - General group elements
 - Staff competencies
 - Self-Management
 - Physical Activity
 - Education
 - Psychosocial support and screening
- > Ensured statements are realistic for community providers with limited resources

What is the 'Easy Breathers' Program?

- > An 8 week group program for people with COPD and Heart Failure
- > Elements of individualised physical activity, self-management support and education
- > A combined model in recognition of:
 - commonalities between HF & COPD rehabilitation (i.e. managing breathlessness)
 - minimum no. of participants feasibly required to run group programs

'Easy Breathers' Program

- > Designed to complement the more 'resource intensive' and 'Gold Standard' rehabilitation programs
- > Delivery manual to guide implementation
- > Refresher workshops for staff

How does it work in practice?

- > Community non-government providers well placed to run Program
- > Program piloted at two sites
- > Program evaluation
- > Program modified, based on findings
- > Has been rolled out at additional sites, and these will include future GP Plus health care centres & other regions

Program Outcomes

- > Encouraging trends towards improvements in :
 - **Exercise capacity** (Six minute walk test)
 - **Breathlessness** (Modified Medical Research Council Dyspnoea Scale, Modified Borg Dyspnoea or Perceived Exertion Scale)
 - **Quality of life** (Minnesota Heart Failure Questionnaire or St George's Respiratory Questionnaire)
 - **Psychological Distress** (Kessler Psychological Distress Scale (K10))
 - **Self management capacity** (Flinders Partners in Health Scale)
- > Participant & Provider Focus Groups: feedback very positive & encouraged ongoing provision of the Program

Case Example

Mrs X with COPD

Six Minute Walk Test (6MWT)

Distance Pre: 293m Post: 385m Change: +92m

6MWT Max Dyspnoea (0-10)

Pre: 6 Post: 4 Change: -2

St George's Respiratory Questionnaire

Pre: 50 Post: 40.8 Change: 9.2

Kessler Psychological Distress Scale(K10)

Pre: 15 Post:16 Change:1

Pt feedback: 'The course has helped me manage my lung or heart condition more effectively'- Strongly agree

Embedding into existing frameworks & pathways

- > Provider Panel established
- > Added to Southern Health's funded service options (hospital avoidance)
- > Service agreements with community providers of Easy Breathers Program
- > Others free to use resources and run Program

Lessons Learnt

- > Differing staffing mixes, levels of competence of providers & familiarity with tools
- > Over-recruitment beneficial
- > Hot weather implications & policy to provide direction

Critical Success Points

- > Combined model for COPD & heart failure working well
- > Relationship-building crucial
- > Embedding into existing service frameworks
- > Our role in capacity building & 'joining the gaps' between sectors

*I feel more energised when I go home.
I feel like it has really helped*

*There were lots of things I didn't realise that I didn't know,
especially around my medications*

*I've found I am looking forward to exercise and finding
opportunities to include it in my day*

I like the feeling that I'm not alone with my condition

I found my progress rewarding- felt stronger in myself

*I enjoyed meeting other people & the
social aspect of the program*

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