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# Cardia and Pulmonary Rehab Programs for First Nations People

Initiative Type

Service Improvement

Status

Deliver

Added

11 May 2024

Last updated

11 May 2024

URL

<https://clinicalexcellence.qld.gov.au/improvement-exchange/cardia-and-pulmonary-rehab-programs-first-nations-people>

## Summary

This initiative involved a new model of service delivery, whereby a partnership between Hospital Health Services and community-controlled Aboriginal and Torres Strait Islander primary healthcare

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organisations enabled the establishment of new Cardiac and Pulmonary Rehabilitation Programs within the Institute for Urban Indigenous Health (IUIH) Network for First Nations people. This Network is comprised of the five Aboriginal and Torres Strait Islander Community Controlled Health Organisations (ATSICCHO's) who operate as a regional collective with IUIH providing leading strategic direction and coordination.

Through a multidisciplinary team, specialised cardiac and pulmonary rehabilitation is provided to First Nations people as a culturally capable alternative to hospital cardiac and pulmonary rehabilitation, particularly for those not currently accessing treatment.

The specialised rehabilitation programs are supported by the IUIH System of Care that supports clients to access a wide array of holistic health services and programs designed to meet community needs and strengthen pathways for clients to self-manage their health needs in a self-led manner.

The Rehabilitation Programs are a multidisciplinary exercise and education program delivered by a range of health professionals including Accredited Exercise Physiologists (AEPs), Physiotherapists, Enrolled Nurses (ENs) and Aboriginal and Torres Strait Islander Allied Health Assistants (AHAs).

Clients also have access to a range of other Allied Health Professionals, including Dietitians Occupational Therapists, Pharmacists, Social Health (Social Work and Psychologists), Podiatrists, Optometrists, Speech Therapists and Audiologists.

Referrals are received from ATSICCHOS, Queensland Health and Primary Health General Practitioners and Specialists. The client journeys through a multidisciplinary assessment to then determine their goals and health needs. This is a First Nations-led partnership, with unique challenges and solutions to working across the whole health sector and outcomes for clients.

## Key dates

Jul 2023

## Implementation sites

Metro North, Metro South, Gold Coast and West Moreton HHSs

## Partnerships

Institute for Urban Indigenous Health (IUIH), Aboriginal and Torres Strait Community Health Service, Metro North, Metro South, Gold Coast and West Moreton HHSs

## Key Contacts

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## Aim

Through a multidisciplinary team, the Cardiac and Pulmonary Rehabilitation Programs provide specialised cardiac and pulmonary rehabilitation to Aboriginal and Torres Strait Islander people not currently accessing treatment, as a culturally capable alternative to hospital rehabilitation and for high acuity Aboriginal and Torres Strait Islander people who commence rehabilitation in hospital and could subsequently transition into the Institute for Urban Indigenous Health IUIH service.

## Benefits

Investing in the IUIH to deliver these services to First Nations people in South-East Queensland has:

- supported the delivery of culturally appropriate service models in the community closer to home
- provided culturally appropriate alternative care pathways for: community-based Pulmonary Rehabilitation programs for people who have had surgery or an acute health episode
- enhanced access and adherence to recommended treatment, and support hospital discharge
- reduced likelihood of emergency department presentations, Did Not Attends for outpatient and surgical care, and of hospital readmission
- enabled the IUIH to free up the own source revenue utilised to deliver these services for investment into services and programs not supported by Commonwealth or State government grantsThe program effectively and adequately achieved value for money by allowing clients to access Pulmonary Rehabilitation close to home which increases the likelihood of reducing hospitalisations, increasing client access to the IUIH System of Care and increasing clients' abilities to self-manage their pulmonary conditions. Anecdotally, the program has improved attendance and access in comparison to mainstream programs not specifically designed for

## **Background**

It is well documented that mainstream services are not always well attended by Aboriginal and Torres Strait Islander people due to a range of issues including transport and culturally safe practice. Establishing these services within the community-controlled sector is one way to increase access and culturally responsive care.

## **Solutions Implemented**

Outcomes from the project:

- support the delivery of culturally appropriate service models in the community closer to home
- provide culturally appropriate alternative care pathways for: community-based rehabilitation programs for people who have had surgery or an acute health episode
- enhance access and adherence to recommended treatment, and support hospital discharge
- reduce likelihood of emergency department presentations, Did Not Attends for outpatient and surgical care, and of hospital readmission
- enable the IUIH to free up the own source revenue utilised to deliver these services for investment into services and programs not supported by Commonwealth or State government grants.

## **Evaluation and Results**

Types of evaluation included ATOMIC Goals, K5, 6MWT, WHODAS, 5 x sit to stand, and Partners in Health.