

## Lungs in Action

(Exercise Maintenance Post Rehabilitation)

### Information for Pulmonary and Heart Failure Rehabilitation Clinicians

*Lungs in Action* is an exercise maintenance program designed for people with stable chronic lung conditions who have completed pulmonary rehabilitation. It is also suitable for people with stable heart failure (NYHA Class II & III) who have completed heart failure rehabilitation. For patients with moderate to severe COPD, a weekly community-based exercise maintenance class, supervised by a trained fitness instructor or exercise physiologist, combined with a home exercise program is an effective intervention for maintaining improvements following pulmonary rehabilitation.<sup>1,2</sup>

Lung Foundation Australia developed *Lungs in Action* in conjunction with experts in respiratory medicine, pulmonary rehabilitation, physiotherapy, exercise physiology, nursing and the fitness industry, in addition to consultation with patient advocates. At the end of 2011, *Lungs in Action* was extended to include graduates of heart failure rehabilitation (excluding NYHA Class IV) using a similar group skilled in heart failure management and rehabilitation.

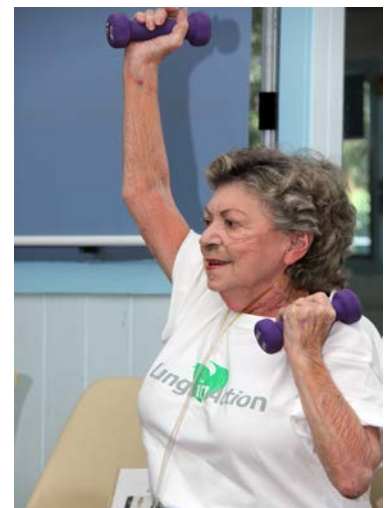
*Lungs in Action* is a fitness program that assists people maintain the benefits achieved through pulmonary and heart failure rehabilitation. *Lungs in Action* is not a health program and instructors are **not** trained to provide any medical advice (although some physiotherapists and accredited exercise physiologists may have scope of practice to move beyond these parameters). However, all instructors are trained to understand how to safely exercise clients with COPD or other chronic respiratory condition and heart failure. Blood pressure monitoring and measurement of oxygen saturation levels typically DO NOT occur in a *Lungs in Action* program. Instead, program guidelines, monitoring of perceived exertion and monitoring of symptoms combined with a tight referral process maintain the safety of the program.

People who complete pulmonary rehabilitation report significant physical and emotional gains and an improved quality of life, but find it difficult to comply with recommendations to continue with exercise without the ongoing support from a structured program or leader. *Lungs in Action* provides an essential structure that enables clients to maintain an exercise routine critical to keeping them well, socially connected and out of hospital.

*Lungs in Action* classes are flexible with an approved format (determined by credentialing criteria), held in facilities available to exercise professionals who are trained to work with people with respiratory disease and heart failure. The exercise classes could have a number of formats but must include walking, upper and lower body strength exercises, balance and stretching as this style of program has the highest evidence base.

To ensure the classes are as safe and supportive as possible for all participants involved there is a specific eligibility criteria and referral guideline that is enforced. These guidelines can be found on the Lung in Action website at: [www.lungsinaction.com.au](http://www.lungsinaction.com.au), or by contacting Lung Foundation Australia.

Lungs in Action instructors are physiotherapists, accredited exercise physiologists or qualified personal trainers, having Certificate III and Certificate IV in Fitness with a minimum of two years experience in the older adults specialty.



**Help Us Help You.** The feedback Lung Foundation receives is that Pulmonary Rehabilitation programs are overcrowded with “repeaters” due to the lack of appropriate maintenance programs available. In order to ensure the success of *Lungs in Action* in the community and to ensure appropriate continuity in support, the exercise professionals must gain support from the coordinator of their local pulmonary and heart failure rehabilitation programs. A pulmonary rehabilitation or heart failure rehabilitation physiotherapist or accredited exercise physiologist (AEP) must be willing to act as mentors to the *Lungs in Action* instructor and provide the following:

**Access for the instructor to observe a pulmonary rehabilitation class and a heart failure rehabilitation class** for the purpose of obtaining a better understanding of exercising clients with chronic obstructive pulmonary disease and heart failure. Also to observe, first-hand the importance of learning breathing techniques such as relaxed breathing, pursed lips breathing and recovery positions. It is recommended that potential *Lungs in Action* instructors visit a rehabilitation class at the beginning of a group intake and nearing the end of the course to witness the improvements obtained from rehabilitation. They are required to attend two pulmonary rehabilitation classes and two heart failure rehabilitation classes, or in the case where these programs are combined, they must attend a total of 3 classes. It is also useful for the instructor to visit each rehabilitation course intake to become known to the participants so as to assist with their transition into *Lungs in Action*. The mentor would fill out a core competency checklist for pulmonary rehabilitation and another for heart failure rehabilitation. This checklist guides a conversation between the instructor and the mentor to ensure that nothing slips through the cracks and provides an opportunity for the instructor to ask the mentor questions to cement their knowledge and understanding of these client groups. This would take approximately 30 minutes of the mentor’s time.

**Support, guidance and some minor supervision in the initial setting up of their *Lungs in Action* class.** The *Lungs in Action* instructor will receive training in how to safely exercise clients with chronic respiratory illness and heart failure. The *Lungs in Action* class design will be based on this training, the venue and equipment available and the range of abilities of the clients. It is critical that the mentoring physiotherapist or AEP is confident in the ability and style of the *Lungs in Action* instructor. Without this, the mentor will not be comfortable referring their valued clients into the program, post rehabilitation. To assist the mentor with the confidence building, the *Lungs in Action* instructor will provide the mentoring physiotherapist or AEP with a proposed program format for their input (this forms part of their written assignment). The mentoring physiotherapist or AEP is also required to attend the first session to check on the practical application of the written program (against a pre-designed checklist) and once the instructor is deemed acceptable, the mentors are encouraged to visit their clients in the class at anytime in the future. Successful programs have an ongoing professional relationship between the mentor and the instructor. This enables the instructor to refer the clients back to their mentor if any issues arise.

***Lungs in Action* programs are only established if a need exists.** Therefore if your rehabilitation program already has a maintenance program and you do not need a community based maintenance option there is no pressure to provide mentoring and Lung Foundation Australia informs the instructors that training is not available in their location. The *Lungs in Action* program exists to respond to the needs of the rehabilitation clinicians and patients.

For more information please don’t hesitate to contact Lung Foundation Australia on 1800 654 301 or email: [lungsinaction@lungfoundation.com.au](mailto:lungsinaction@lungfoundation.com.au)

References:

1. Ries AL, Bauldoff GS, Carlin BW, Casaburi R, Emery CF, Mahler DA, et al. Pulmonary Rehabilitation: Joint ACCP/AACVPR Evidence-Based Clinical Practice Guidelines. *Chest*. 2007 May; 131(5 Suppl): 4S-42S.
2. Spencer, L., Alison, J., & McKeough, Z. (2010). Maintaining benefits following pulmonary rehabilitation: a randomised controlled trial. *European Respiratory Journal* , 35 (3), 571-577.

This brochure is one in a series produced by Lung Foundation Australia to provide information on lung disease, its treatment and related issues. The information published by Lung Foundation Australia is designed to be used as a guide only, is not intended or implied to be a substitute for professional medical treatment and is presented for the sole purpose of disseminating information to reduce lung disease.

Any information relating to medication brand names is correct at the time of printing. Lung Foundation Australia has no control or responsibility for the availability of medications, which may occasionally be discontinued or withdrawn.

Please consult your family doctor or specialist respiratory physician if you have further questions relating to the information contained in this leaflet. For details of patient support groups in Australia please call 1800 654 301.