

Co-production of recommendations for a best-practice model of occupational therapy-led pulmonary rehabilitation

Key findings

From the experiences of people who participated in the pulmonary rehabilitation (PR) programme, 'Doing, Being, Becoming, Belonging' (Wilcock, 2006) provided a framework to understand the components important to them:

- Doing exercise and physical activity
- Being breathless
- Belonging as an individual within the group
- Becoming a person who lives with COPD.

From the experiences of people who participated in the pulmonary rehabilitation programme and of health professionals involved with the programme, ten good practice recommendations are summarised below:

- Informed person-centred decision-making about whether and when to attend and to start a thought process around occupation and exercise
- An individual initial assessment
- Supervised group exercise
- Group learning
- Facilitators who activate occupation
- Creation of habits through the programme
- Measurement of outcomes
- Follow-up which encourages sustainable occupations
- An accessible community venue
- A group with consistent members and facilitators

From the experiences of people who participated in the pulmonary rehabilitation programme and of health professionals involved with the programme, barriers to delivery include:

- Accessibility
- Optimising capacity
- Pre-programme information and waiting times
- Personalisation
- Multiple providers
- Barriers related to COVID-19

Project aims

1. To explore views and experiences of people who have accessed services after completion of an occupational therapy-led PR programme in order to identify facilitators and barriers to delivery and outcomes that are important to them.
2. To explore practitioner perspectives of an occupational therapy-led pulmonary rehabilitation programme in order to identify facilitators and barriers to delivery and outcomes.
3. To co-produce good practice principles for an occupational therapy-led pulmonary rehabilitation programme.

Background

There are an estimated 1.2 million people living with Chronic Obstructive Pulmonary Disease (COPD) in the UK (British Lung Foundation, 2021). Pulmonary Rehabilitation is established as an essential management strategy for COPD (Spruit et al 2013).

PR is accepted as a multi-disciplinary intervention with supervised exercise training being an integral part. Beyond this, there is limited consensus about the specific components essential to effectiveness, such as which professionals should be involved, what the exercise training should include and how long it should last (McCarthy et al 2015; Troosters et al 2019). Research which further investigates the most important components for people who access services and professionals is therefore essential.

A review of published studies yielded very few examples which specifically mention occupational therapy-led PR or occupational therapy interventions for the management of COPD (Walker et al 2016).

Methodology

A qualitative research design was employed using semi-structured interviews to understand individual perspectives of people with experience of one pulmonary rehabilitation programme within an NHS Trust in northern England.

Study Methods

To meet the first aim, individual telephone interviews were carried out with nine participants who had participated in the PR programme.

To meet the second aim, individual telephone interviews were carried out with six health professional participants who were involved with the programme. Participants included one respiratory consultant physician, two occupational therapists, two respiratory nurses and one occupational therapy assistant.

All interviews were audio-recorded and transcribed verbatim. Three analysts were involved in analysing the interview data using framework analysis.

Recommendations and conclusions

The understanding of the lived experience of participating in an occupational therapy-led PR programme, and the application of the *doing, being, belonging, becoming* framework could lead to a model of designing occupational therapy-led PR. The 10 good practice recommendations developed from the perspectives of people who accessed services and professionals could be used alongside this to develop programmes which can be described, replicated and evaluated.

The findings emphasise occupation as a central component of pulmonary rehabilitation, rather than the more commonly considered central tenet of exercise. This can lead to increased involvement and new roles for occupational therapists in this area. Occupation-focussed, co-produced models of pulmonary rehabilitation have the potential to improve adherence and completion which are significant challenges to current service delivery and barriers to positive outcomes for those who access services.

Publications

Bradley, G., Rooney, L. & Whitehead, P. (2022) Service user perspectives on engagement in an occupational therapy-led pulmonary rehabilitation programme: a qualitative interview study. *British Journal of Occupational Therapy*. DOI: 10.1177/03080226221103155

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