



# Improving the delivery of cardiac rehabilitation in Australia

The Heart Foundation's Cardiac Rehabilitation Advocacy Strategy



# A critical step in a he

Heart disease is the leading single cause of death of men and women in Australia and affects 685,000 people.<sup>1,2</sup> Each year around 55,000 Australians suffer a heart attack.<sup>3</sup> On discharge from hospital, every patient should be referred to a cardiac rehabilitation program to start them on the road to recovery and ongoing management of their condition. But this is not happening.



Cardiac rehabilitation is a professionally supervised program usually lasting between 6 and 10 weeks. Supporting people with heart disease and other heart conditions, programs include physical activity, health education, counselling, behaviour modification strategies and support for self-management.<sup>4</sup>

Heart disease is a lifelong condition that needs ongoing management for patients to live longer and healthier lives.

## The issue

Repeat heart attacks are all too common and costly. A third of all heart attacks in Australia are repeat events and in 2010 the cost of these repeat events exceeded \$8 billion<sup>5</sup>. Cardiac rehabilitation can save lives and money, with research showing that it leads to improved patient outcomes, including fewer deaths and hospital readmissions<sup>6</sup>.

Cardiac rehabilitation programs are only effective if people attend. With estimated participation rates as low as 10-30% the benefits of cardiac rehabilitation are not being realised<sup>7</sup>. A recent UK modelling study found that increasing cardiac rehabilitation delivery to 65% of eligible patients resulted in a 10% reduction in emergency readmissions and saved over £30 million<sup>8</sup>.

The key challenges to improve the uptake of cardiac rehabilitation are well established and include:

- lack of referral to cardiac rehabilitation programs
- varied belief and support in the value of cardiac rehabilitation by the clinical profession
- emphasis on traditional cardiac rehabilitation models that can present barriers to patients who are younger, work, live remotely, have cultural or language needs or do not wish to attend a group format
- complex and unstable funding arrangements
- lack of data and performance monitoring.<sup>6, 9, 10</sup>

# Heart patient's journey

## Time for action

As part of the Heart Foundation *For all Hearts* 2013–2017 strategic plan, we have developed a strategy to improve cardiac rehabilitation service provision in Australia. The six key priority areas for action are:

1. Support national, state and territory efforts to integrate **referral** to cardiac rehabilitation services as a **standard component of cardiac care**.
2. Establish **uniform quality performance measures**, data collection and routine reporting.
3. **Increase public awareness** of cardiac rehabilitation and its benefits.
4. **Enhance health professional engagement** and education on the importance of cardiac rehabilitation.
5. Identify **funding reform** to drive service improvements and boost referral and participation.
6. Document and promote key principles and examples of good practice in the provision of **different models** of cardiac rehabilitation throughout Australia.

Collectively, these efforts will:

- increase patient participation
- reduce hospital re-admissions
- improve health and quality of life outcomes.

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Cardiac rehabilitation is the first, critical step on the road to recovery from a heart attack. We know it works. We need to make sure it works for everyone.

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Want to know more? Email [clinicalissues@heartfoundation.org.au](mailto:clinicalissues@heartfoundation.org.au)





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Supporting document: *Secondary prevention of cardiovascular disease: a call to action to improve the health of Australians* available at [www.heartfoundation.org.au/coronary-heart-disease](http://www.heartfoundation.org.au/coronary-heart-disease)

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