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Transforming & Enhancing Pulmonary Rehabilitation: Cohort to Rolling

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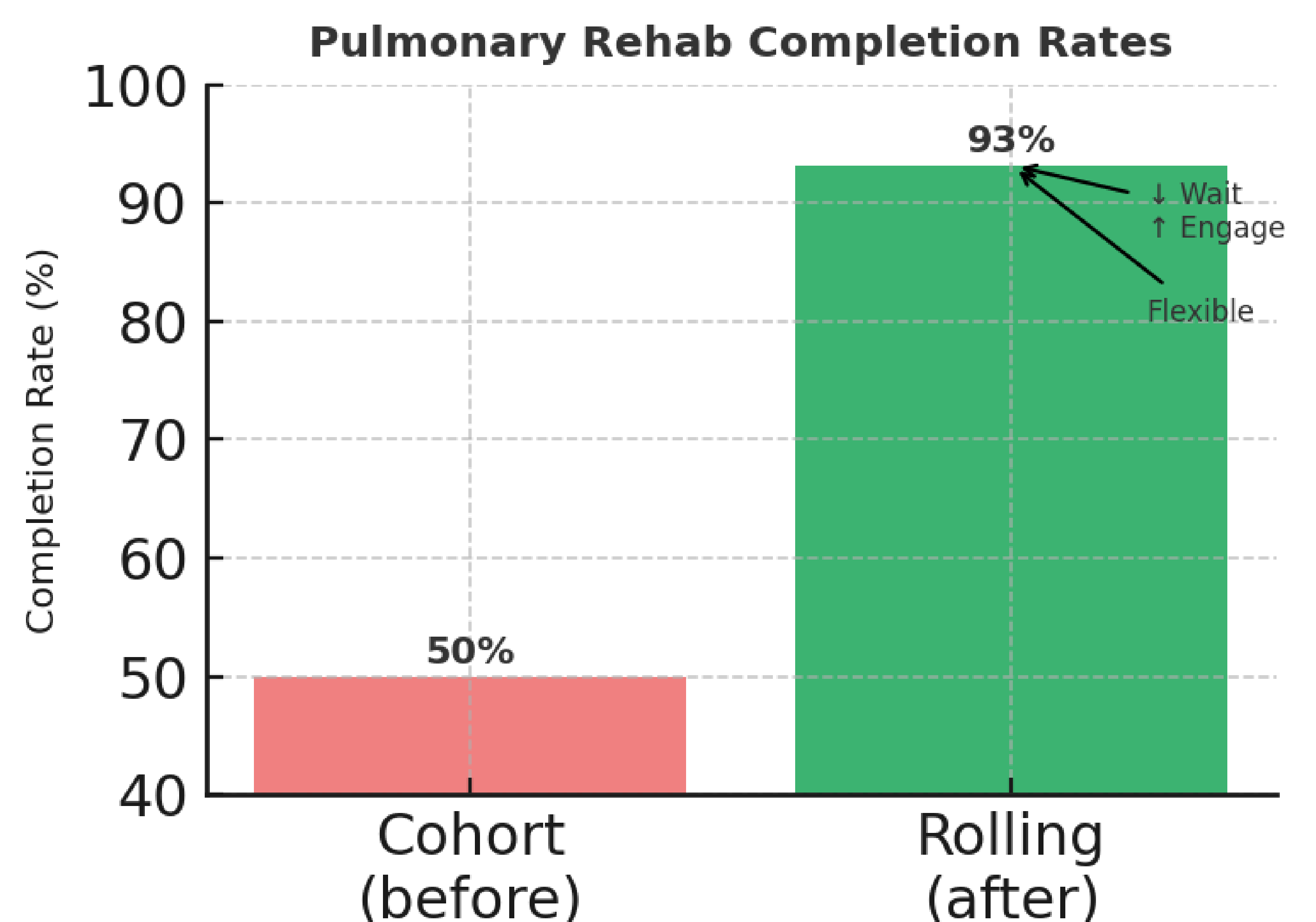
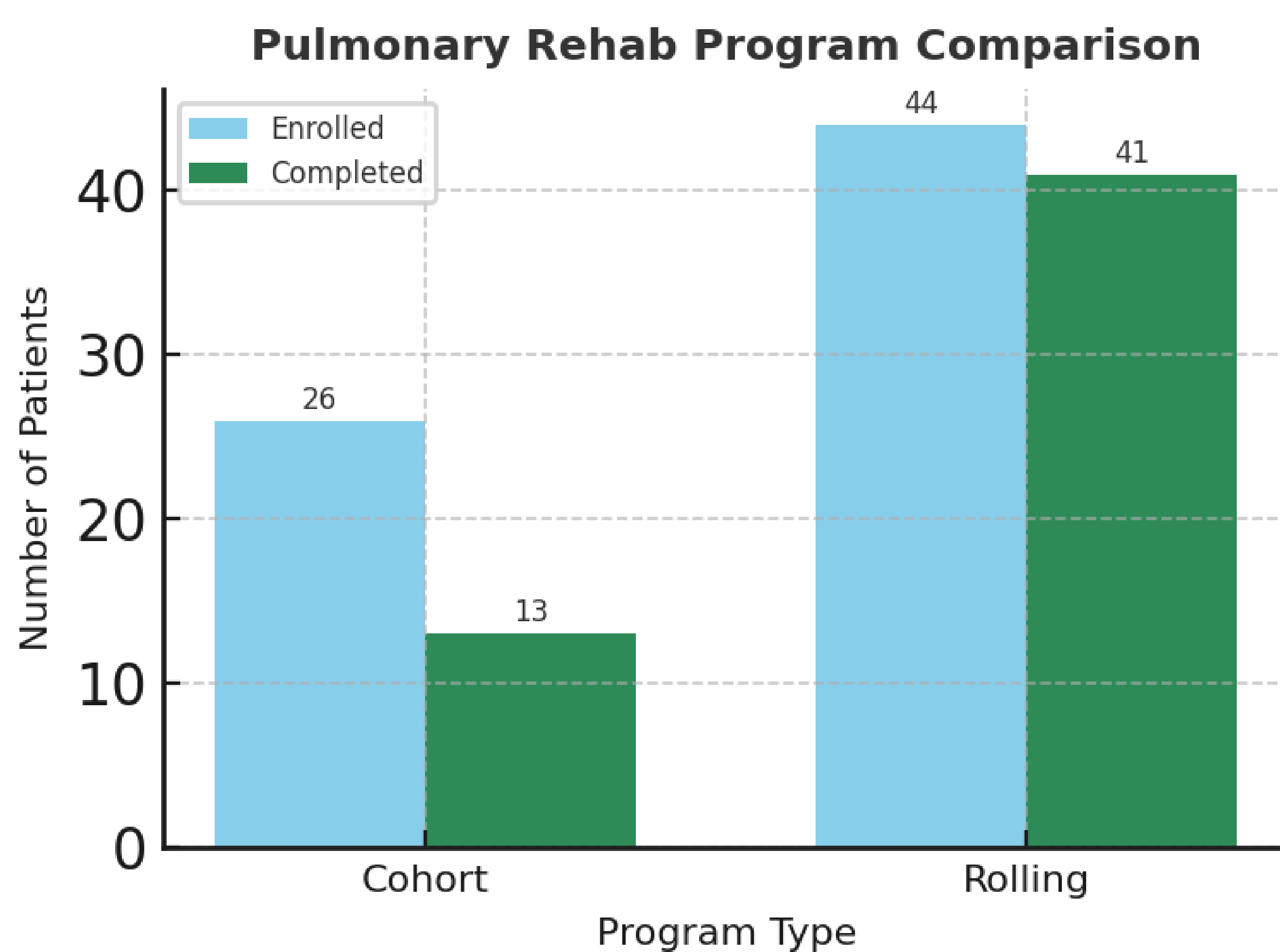
Introduction:

Pulmonary Rehab (PR) is the most efficacious & economical treatment approach to manage COPD symptoms. Waiting times and access to PR programs are barriers highlighted nationally. This initiative's aim is to reduce waiting times by modifying a cohort program to a rolling program & improve adherence to NCP's guidelines for repeated programs.

Method:

- Literature review & service audit focusing on attendance and wait time from referral.
- Screened waiting list & re-triaged with an opt in/out approach applied.
- A planned change over from the cohort PR program to a rolling approach was set.
- Paperwork to support the transition were designed: a class attendance record document and a patient risk assessment proforma.
- Increased PR Assessment appointments by 50% weekly to maintain flow to the program, as well as Post PR Assessment slots to facilitate a timely discharge.

Results:



Discussion:

Shown above, the rolling program demonstrated superior effectiveness in service delivery & increasing patient uptake compared to a cohort approach. Transitioning to a rolling program shortens waiting times, expands the access, ultimately enabling more patients to benefit from the intervention. Those attending a rolling program are more likely to reach completion compared to that of a cohort schedule. The rolling programme aligns with the NCP guidelines by enabling repeated enrolment to who meet the clinical criteria, and increased collaborative working with acute settings & community based referrers.

Conclusion:

The rolling PR program was significantly more preferable to service delivery & compliance. Further research and data collection will allow for increased accuracy in comparison.

*Special thanks to my colleagues on the Chronic Respiratory Team for their ongoing support to the PR service.
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