

## Theme 1: Innovation in models of care

**Mr Andrew Smith, South West Healthcare**  
**Ms Renee Jervies, South West Healthcare**

[awsmith@swh.net.au](mailto:awsmith@swh.net.au)

**Abstract title:** *Community transition: Bridging the gap from hospital to community service*

---

**Introduction:** At South West Healthcare (SWH) we have found it difficult to transition clients from our hospital based specialised exercise classes into community exercise groups. SWH conducts classes in various areas including cardiac and pulmonary rehabilitation, hydrotherapy, general exercise and balance classes.

**Objectives:**

- To keep clients exercising after they are discharged from hospital based exercise programs.
- Promoting lifestyle change and self-management.
- Reducing hospital admissions in high admission areas, such as falls and chronic conditions.

**Methods/Approach:** Initially we attended and researched available community options. It was determined that a lack of appropriate level classes existed in the community. To address this we have introduced general exercise and balance specific classes at the council owned and operated local gym.

**Results/practice implications:** The project created better pathways from our more specialised classes such as cardiac and pulmonary rehabilitation to community classes. Appropriate clients progressed from these specialised programs to our general exercise class. These clients were encouraged to be independent with their programs, better preparing them for community exercise classes. Follow up calls were made to these clients to determine if the community transition was successful. Results were encouraging with 69% of clients participating in community exercise classes after discharge from SWH classes and 73% reporting they were exercising for at least 30 minutes three times per week. The next phase of this project is to use information provided on the program to further improve outcomes for clients.

**Conclusion:** Community transition for exercise is possible, but requires strong relationships with community organisations and a streamlined approach. Clients need to be nurtured through the process of transitioning from hospital based classes where they feel comfortable to unfamiliar community classes.

## **Biography**

Andrew is an exercise physiologist with a Masters of Exercise Science (Strength and Conditioning). He has been employed in the health and fitness industry for 12 years and 2 years in the hospital system as an Exercise Physiologist. From working in both these areas he is interested in addressing the gap of transitioning clients from using the hospital gym to the health industry gym.

