

Here we meet Gary Spencer, a band 4 fitness instructor working as part of the Impact+ team, at the University Hospital of Derby and Burton.

Gary has been involved in Pulmonary Rehabilitation (PR) for 6 years.

How did you first become involved in Pulmonary Rehabilitation (PR)?

My initial role was with Derbyshire Community Health Service as a Therapy Support worker which I did for 3 years. University Hospitals of Derby and Burton took over South Derbyshire's PR contract. I was TUPED across to a role as a Fitness instructor.

What attracted you to work in this area?

Having worked in the fitness industry for 10 years I have always enjoy seeing the changes exercise brings to people. I took a GP referral course and that sparked a real interest in how exercise impacts on long term conditions.

Who are the other members of your team?

We are an integrated respiratory care team, made up of specialist nurses, Respiratory Physiotherapists, Occupational Therapists, Fitness instructor, Respiratory Assistant, Administrator and supported by Respiratory Consultant.

There is a great deal of cross over where you help and support each other in different situations. We have MDT meetings to discuss our patients. A good example of how we work together as a team is those occasions when a patient may not be ready for PR but would benefit from a Seated Home Exercise Programme. In this case the Physiotherapist would come on a home visit to ensure everything is safe. For the next couple of months I would provide support to that patient.

Your role is so varied, could you highlight some of the key elements?

Working alongside our Respiratory physiotherapist to triage and assess patients takes a good bit of time in between the programmes.

In the session I would be leading the warm up/cool down and supervising and encouraging the patient to complete the exercise prescription we have individually

prescribed them. I also play a part in the talk we give like maintenance and lifestyle.

I also make calls to follow-up patients who have not been well or have not attended to see how they are feeling and offer support.

It would be useful to hear more about the exercise programme.

To start an assessment we do the ISWT and 1 RPM test. This helps us with our programme for treadmill speed and ensures we have the correct weights for the patient.

We aim to do 20 minutes continuous cardiovascular exercise and follow a weight prescription that builds muscular endurance.

The focus of the early stages of the programme is good technique. I take more of a lead when comes to the exercise side answering question and suggesting new exercises. The respiratory physiotherapist takes more of a lead when comes to the management of the patient and education side of PR. It works really well.

Where is the programme based?

We have a central base within the community hospital and we also take the programme to the community at many locations around South Derbyshire. We follow the same programme at many different gym facilities like William Gregg Leisure Centre, AnyTime Fitness and Evisa Fitness and have built partnerships with different centres. We recently got a report from one of the community gyms that showed 25% of patients joined the gym after doing the PR programme. This has given patients the confidence to be in gym environment. I also go out to look at different and new venues for future PR with the Physiotherapist.

How has COVID-19 changed the programme?

We are doing face-to-face classes at present (June 2021). Pre Covid we had 12 patients on a course but now due to social distancing it is only between 6 and 10 patients depending on the size of the room. Inevitably, COVID has also impacted our hygiene and infection control and changed the way we clean, and record the details of the cleaning before, during and after each session. I worked alongside the other Fitness instructor to develop a virtual Pulmonary Rehabilitation exercise programme in the summer of 2020. We have done this with face assessments followed by telephone support

where I would encourage, make suggestion for exercise and Physiotherapist would discuss the presentations on Microsoft teams.

Perhaps you can you share your experience with a particular patient?

We try and make the 6 weeks of PR a really positive experience. We have lots of fun and over the 6 weeks we build up really good patient relationships. We had one lady who was very anxious patient and would not exercise as she was trapped in the cycle of breathlessness and was doing very little. Over the 6 weeks at PR she discovered what she could do and made huge improvements. Then 12 months later I bumped into her and at the leisure centre where she had been swimming - it was such pleasure to see the real smile on her face.

How do you see PR services developing within respiratory?

Over the last 6 years I have learnt so much from the Respiratory Physiotherapist, Nurses, Occupation Therapist, Respiratory Physiotherapist and Respiratory Assistant. Integrated care works well. There is so much knowledge, experience and skills pooled together in one team and it is a really effective of working. I think more PR teams will work in this way in the future. I feel the patient experience is far better with the combined resource of care.

Do you have any particular advice for someone considering working in PR?

You see many different patients that are all on different journeys. Pulmonary Rehabilitation is the patient's launch pad. Your role is to have a lot enthusiasm, enjoying class to weather leading of assisting. In 6 week you can get such amazing opportunity to make a difference to that patient.

What do you see as the benefits of connecting with respiratory organisations like BTS?

As a team we have found that BTS guidelines have helped us a great deal when we started the service and shaping it into the service it is today. We have shared our progress with online programme on twitter, ACPRC, BTS and Respiratory Futures. Sharing of experiences is key for learning and development

Contact details

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If would like to share your experience of working in Pulmonary Rehabilitation, please email Louise Preston:
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