

This situational assessment explores the current challenges and opportunities for improving access to pulmonary rehabilitation (PR) for seniors with chronic obstructive pulmonary disease (COPD). COPD is a leading cause of hospital admissions and reduced quality of life among older adults. However, participation in PR programs remains low due to various personal, structural, and environmental barriers. This assessment examines the impact of the current situation, identifies key factors influencing access, and highlights potential actions that can be taken to support more inclusive and effective rehabilitation options for this vulnerable population.

## **1. What is the situation?**

### **Impact on health outcomes and societal costs:**

Chronic obstructive pulmonary disease (COPD) is one of the leading causes of hospital admissions and mortality among older adults. Without timely access to pulmonary rehabilitation (PR), seniors with COPD often experience more frequent exacerbations, reduced physical capacity, and a lower quality of life. These outcomes also contribute to increased healthcare costs due to emergency visits and prolonged hospital stays (Camp et al., 2015; Sami et al., 2021).

### **High-risk populations:**

Seniors living on low incomes, in rural or remote areas, or with multiple chronic conditions face the most significant barriers to PR. These individuals are often excluded from traditional, facility-based programs due to geographic distance, mobility limitations, or lack of transportation (Fien et al., 2022; Mendes Xavier et al., 2022).

### **High-risk settings or opportunities for intervention:**

Regions with poor transportation infrastructure or limited access to specialized respiratory care are especially high risk. However, they also present key opportunities for innovative approaches like home-based or telehealth PR. Community centers, senior residences, and home care services may serve as effective access points for delivering these programs (Chopra et al., 2024; Aburub et al., 2024).

### **Local stakeholder perspectives and capacity to act:**

Healthcare providers, public health teams, and community-based organizations are aware of the importance of PR and express interest in expanding access. However, limited funding, staffing shortages, and digital infrastructure challenges often prevent them from offering or supporting alternative delivery models.

### **Community needs and interests:**

Many seniors strongly prefer managing their condition from home, especially when it helps them stay independent. Feedback from older adults and caregivers indicates that they value flexible, accessible, and supportive PR programs that accommodate their physical, social, and technological needs (Sami et al., 2021).

## **2. What influences are making the situation better or worse?**

### **Negative influences and behaviours:**

Barriers to PR participation include lack of transportation, low awareness of PR, and discomfort using technology. Some healthcare providers may not consistently refer patients due to limited time or knowledge of available options (Camp et al., 2015).

### **Underlying causes and protective factors:**

Common causes include limited mobility, cognitive or physical comorbidities, and fragmented communication within the healthcare system. On a broader level, funding gaps and policy limitations make expanding or sustaining non-hospital-based PR difficult. Positive factors include caregiver support, technology access, and trusted relationships with healthcare professionals (Fien et al., 2022).

### **Organizational strengths and weaknesses:**

Some organizations have experience offering virtual care and have partnerships with community agencies. These relationships can support wider PR access. However, challenges

such as insufficient staff, training gaps, and limited funding still pose barriers. Opportunities include collaborating with senior-focused organizations, while potential threats include a lack of infrastructure or sustained financial support.

### **3. What possible actions can you take to address the situation?**

#### **Current or past initiatives:**

Programs such as the INSPIRED COPD Outreach Program (Nova Scotia Health, n.d.) in Canada have demonstrated that home-based PR models can improve health outcomes and reduce hospital use. Other initiatives have combined exercise guidance, virtual check-ins, and printed educational materials to support people with COPD who cannot attend in-person sessions (Aburub et al., 2024; Chopra et al., 2024).

#### **Evidence to support action:**

Strong evidence shows that home-based and virtual PR programs are effective. These programs have been shown to improve symptoms, exercise capacity, and overall quality of life when supported by structured follow-up and personalized education (Mendes Xavier et al., 2022). These models are particularly valuable for seniors who experience barriers to facility-based care.

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