

Walking the way to Health

Part 1

"The British Association for Cardiac Rehabilitation endorses the 'Walking the way to Health' Initiative. The Association commends appropriate walking as part of a comprehensive cardiac rehabilitation programme".

Part 2

"Patients discharged from hospital (*Phase II*), participating in a clinically run outpatient programme (*Phase III*) or discharged from Phase III (*Phase IV*) who have been advised to walk on a regular basis and have received documentation to that effect from the clinical team, should be able to access 'health walks' led by volunteer walk leaders. Where the clinical team has specified the distance to be walked and/or the level of effort involved, it should be the responsibility of the local scheme providers to ensure that the recommendation can be met within the range of walks available. The National Service Framework (*for Coronary Heart Disease, Chapter 7 page 9; 37*) recommends that a record of the treatment plan agreed with the patient should be given to the patient and a copy sent to the primary care team. A patient held record of this type represents an ideal method for ensuring that walk leaders only accept individuals for whom a walking programme has been identified as clinically appropriate."

Part 2 can be used as a mini protocol to ensure that cardiac patients who join walks (*whatever the phase of their rehabilitation*) have effectively been screened as safe to undertake a walking programme. Where local hospitals are not currently giving patients on discharge a good indication of how far and at what level of effort individuals should be walking, WHI local scheme providers have an opportunity to liaise with the health professionals and to let them know what documentation is required. For example a booklet which bears no name or indication of what the individual is being advised to do would not be a satisfactory 'passport' into a walking programme, as it could be literature generally available to the public. In contrast, if a booklet is clearly intended as physical activity advice to the individual either on discharge to Phase II, as home based exercise during Phase III or specifically for long-term maintenance in Phase IV - and it bears the patient's name - it should constitute an indication that the person has been clinically screened and is considered safe for walking.

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