**Title: Cardiac rehabilitation service delivery in New Zealand in 2024: a national survey**

**Aim:**

Despite the known benefits of cardiac rehabilitation (CR), globally attendance rates are low. In New Zealand (NZ), CR accessibility is particularly pertinent for Māori living rurally, who are disproportionately impacted by cardiovascular disease compared to their urban peers. Home- and community-based CR services provide accessible and effective alternatives to hospital-based CR. The study aim was to explore the current delivery of CR in NZ.

**Method:**

Cardiac rehabilitation providers in NZ were invited to complete an online survey. The survey questions were informed by the NZ CR guidelines. Topic areas included: delivery of hospital, community and home-based CR and cultural considerations for service delivery.

**Results:**

27 of 37 CR providers (73%) responded. 85% provided hospital-, 56% provided community-, and 56% provided home-based CR services. While assessment tools and education topics were similar across service types, home-based services involved fewer health professions and less frequently included supervised exercise. Of the 15 providers offering community-based CR, 13 held these sessions in urban- and three held these sessions in rural-zoned settings. While all providers welcomed whānau to attend CR sessions only 19% included whānau in decision making. 63% provided resources in the patient’s preferred language and 30% provided a cultural liaison for Māori or Pasifika attendees.

**Conclusion:**

While community and home-based CR availability in NZ has increased, the lack of community-based CR in rural areas and less home-based exercise options indicate reduced availability of comprehensive, exercise-based CR for rural patients. The findings show variability in meeting cultural recommendations from the NZ CR guidelines.