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Nineteen centres (13 adult) caring for 34% of the UK CF population remote monitoring between March - July 2020.

Method: We contacted CF nurses to explore service changes to routine their practice during this time.

Conclusions: The incidence among children with CF was less common than in adults, and there was a different age structure of children with COVID-19 among patients with CF and in the population. Pneumonia and fever and abdominal syndrome were more common in patients with COVID-19 with CF than in the general population.

P090
A UK survey on changes in managing people with cystic fibrosis during the COVID-19 pandemic
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Background: With the COVID-19 pandemic crisis, in the UK guidance on shielding to protect vulnerable individuals included minimising face-to-face (FTF) contact and visits to hospital for people with cystic fibrosis (pwCF). We undertook a UK-wide survey to study how CF centres adapted their practice during this time.

Method: We contacted CF nurses to explore service changes to routine outpatient care, emergency consultations, annual reviews (AR), and use of remote monitoring between March – July 2020.

Results: Nineteen centres (13 adult) caring for 34% of the UK CF population replied (response rate 35%). Eleven (58%) ceased routine FTF appointments until virtual clinics were implemented, in 1 centre solely by telephone. Six centres suspended AR, the remainder integrating them into virtual or emergency FTF appointments. All centres within the UK and this service will strengthen in time.

Conclusion: We definitely observed a negative trend in follow-ups of CF patients in the pandemic year. In our case it could also be partially caused by two serious earthquakes in the Zagreb area. Avoiding hospital arrivals and dropping out of usual follow-up practice due to fear of COVID-19 contagion may be responsible for more frequent CF exacerbations and poorer outcome for our patients in the future. Whether the observed lower compliance rate during the pandemic 2020 year result in more significant threat to our patients than COVID-19 itself remains to be seen.

P092
Embedding an electronic patient record into a developing UK service and impact during the COVID-19 pandemic - Blackpool Adult Cystic Fibrosis Service (BACFS)
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Objectives: In December 2019 our new Service Manager successfully led BACFS’ transition from paper records to an Electronic Patient Record (EPR) called EMIS The clinical team had intermittent EPR engagement with Trust IT and Governance for 3 years prior with limited progress. This summarises the team’s experience including impact during COVID-19.

Methods: A questionnaire was sent to the BACFS multidisciplinary team (n = 13) asking for success scores (0–10) for 11 key areas and comments on challenges, lessons learnt and future development.

Results: BACFS has successfully adopted EMIS and is now the principal recording system for CF clinical data, without which BACFS could not have worked remotely during COVID-19. The main challenges identified by users were IT authorisation/Governance delays, lack of suitable IT, staff knowledge and use during inpatient episodes. Key lessons learned were it needs a designated project manager, a team ready for change, appropriate technology and a deadline. Recurrent user development suggestions included improvements to templates and inpatient processes.

Conclusion: It has been a varied team experience yet hugely positive from a service perspective; EMIS has been pivotal for BACFS to function safely and effectively during COVID-19. None of the challenges were insurmountable.

P091
Regularity of check-ups at the cystic fibrosis centre in the time of COVID-19 pandemic
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Objectives: At our Cystic Fibrosis Centre (CF Centre) for children and adults it is the policy to see patients at least quarterly/year and have at least 4 respiratory samples cultured. We analysed the adherence to this regime in pandemic and regular circumstances.

Table 1. (abstract: P092)

| Question | Initial access to EMIS/set up | Initial training from IT | Ongoing support from IT | Peer support with embedding within BACFS | EPR format/template suitability | Enamelment of BACFS remote working during COVID | Ease of use/access for face to face outpatient Consultations | Ease of use/access for face to face outpatient Consultations | Ease of use/access for home visits | Ease of use/access for inpatients |
|----------|-------------------------------|--------------------------|------------------------|----------------------------------------|--------------------------------|-----------------------------------------------|-------------------------------------------------|-------------------------------------------------|--------------------------------|--------------------------------|
| Percentage success | 76% | 85% | 63% | 90% | 68% | 89% | 86% | 88% | 90% | 45% | 70% |