P135 DELIVERING A RHEUMATOID ARTHRITIS REMOTE MONITORING SERVICE DURING THE COVID-19 PANDEMIC: THE PATIENT’S PERSPECTIVE

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Background/Aims
Rheumatoid arthritis (RA) is a chronic inflammatory condition fluctuating between unpredictable episodes of joint pain, stiffness and disability and low disease state or remission. The traditional outpatient model can lead to patients in disease remission being seen more frequently than necessary and with missed opportunity to capture disease flares. A remote monitoring service (RMS) was co-designed with RA patients which uses SMS communication to deliver the Rheumatoid Arthritis Impact of Disease (RAID) tool on a monthly basis whilst offering patients 2-way text message contact outside of hospital-based care.

Methods
Access to hospital-based rheumatology care was dramatically restricted during the COVID-19 pandemic. 126 patients engaged with the remote monitoring service between January 2019 to September 2020 were sent a satisfaction survey in October 2020. The survey used a combination of 5-point Likert scales and open questions to rate confidence in statements focused on four aspects of the RMS during the COVID-19 pandemic: 1. managing data 2. managing flares 3. managing me 4. managing appointments.

Results
48.4% (61/126) patients responded to the survey. Managing data: 93.4% of patients who responded to the question strongly agreed/agreed data was safe and used for the purpose of care. 91.8% strongly agreed/agreed RAID responses were reviewed by the RMS monthly. 90.1% strongly agreed/agreed the RMS would contact them to review care if needed. Managing flares: 85.9% strongly agreed/agreed they could text into the RMS if having a flare of their condition. 75.4% strongly agreed/agreed they received the care needed using the RMS. 61.41% patient strongly agreed/agreed using the RMS helped manage flares better than before using the service. Managing me: 74.0% strongly agreed/agreed the RMS had made access to care easier. 82.0% strongly agreed/agreed the RMS helped them to feel looked after outside of hospital care. 72.0% strongly agreed/agreed the RMS looked after emotional well-being as well as physical health. 80.0% strongly agreed/agreed the RMS helped them to feel cared for during the COVID-19 lockdown period. Managing appointments: 43.8% strongly agreed/agreed rheumatology appointments were not always when needed. 39.6% strongly agreed/agreed they would
consider deferring an appointment if well as an appointment approached. 79.2% strongly agreed/agreed they would be offered an appointment when needed. 72.9% strongly agreed/agreed a telephone or video consultation is an acceptable alternative to attending a hospital appointment.

Conclusion

RA patients using a remote monitoring service during the COVID-19 pandemic rated it highly for supporting flare management and emotional well-being, providing remote care and ensuring data security. Regular, remote capture of asynchronous patient data has the potential to facilitate flexible and responsive appointment scheduling to support the self-management of patients with rheumatoid arthritis and in delivering care when it is needed the most.

Disclosure

M.J. Martin: None. T. Garrood: None.