Exploring physiotherapists’ experiences in delivering care remotely to adults with Cystic Fibrosis during the COVID-19 pandemic in the United Kingdom.

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Background

The pandemic resulted in a rapid change in physiotherapy service delivery for people with Cystic Fibrosis (CF), with the transition from face-to-face to remote provision. Exploring the experiences of physiotherapists during this time is important to understand the barriers and enablers to care, but also to identify the areas that worked well and the successes of remote provision that may be utilised to support service delivery in the future.

Research Question: *What are physiotherapists’ experiences in delivering care remotely to adults with cystic fibrosis during the COVID-19 pandemic in the United Kingdom?*

Methods

Qualitative, interpretive methodology was used to collect data via semi-structured interviews with three participants (all females) in December 2021. Participants were recruited from across the UK via the professional networks. Interviews were completed on-line and digitally recorded and transcribed verbatim. Thematic analysis was undertaken. Member checking was completed.

Main Themes

Delivering Care in the Pandemic

Physiotherapists and Pandemic Era

Post- Pandemic Era (Suggestions)

Conclusion

The findings reflect the changes that physiotherapists working in the pandemic in CF services experienced. Several positives were reported including convenience for staff and patients; opportunity to see more patients; patient preference for remote consultations. Negatives were the absence of hands-on opportunity as part of the physiotherapy assessment, and the concern regarding reliability of home assessment tools. Concerns were also evident regarding the transitioning of patients from paediatric to adult services, and whether remote means best facilitated this.

Implications for practice

Looking to the future, staff adaptability was identified as a main key element for success and amelioration of use of remote assessment tools. The importance of offering a hybrid clinic; the essential role of education of the patient to ensure adherence; set of criteria for who needs to be assessed by virtual or in-person means were also all significant findings. These add to a limited evidence base on this topic, with the findings offering valuable insights into the opportunities for post-pandemic care of adults with CF.

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Ethical approval was granted in November 2021 from the School of Health Care Sciences Research Ethics Committee, Cardiff University.