

4.19 Share your screen: A Virtual Pulmonary Rehabilitation Collaboration in CHO9

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Background: Virtual Pulmonary Rehabilitation (VPR) provides a viable alternative choice for those patients who are not able to attend face to face Pulmonary Rehabilitation (PR). With staff shortages in Respiratory Integrated Care (RIC) delivering face to face and virtual programmes is taxing. In an attempt to alleviate this burden a VPR programme shared by CHO9 staff and patients was trialled. **Method:** A shared drive was established for CHO9 Clinical Specialist Physiotherapists (CSP). Outcome measures, data collection, exercise progression, class and education schedules were agreed. Patients referred for VPR were assessed and enrolled by the CSP in their RIC area. Classes were delivered virtually twice a week on a rota basis. **Results:** 11 patients were assessed and enrolled in VPR between February and August 2024. 7 patients completed the programme. Positive clinical outcomes were achieved. Patients agreed that they enjoyed the variety of physiotherapists and would recommend the programme to others. All CSP agreed that sharing the delivery of VPR was efficient and effective. **Conclusion:** This test of change reduced the workload of delivering simultaneous face to face and virtual programmes whilst patients received a beneficial programme that they were satisfied with. **Disclosures.** The authors declare that they have no conflict of interest.