

# Cystic Fibrosis our focus

## Churchill Hospital, Oxford adult CF service

The Oxford adult CF service is medium sized, and historically slow to grow, but is apparently on the cusp of expansion in patient numbers. The service is in a long overdue period of transition to new premises. The move must include outpatient and inpatient facilities, with adequate provision for *Burkholderia cepacia complex* and *Mycobacterium abscessus*. Staff allocation appears “just enough” but will soon be inadequate if expansion occurs at the predicted rate.

Service users identified the accessibility of the CF team and its advice and communication as an area of excellence, as well as the cross-infection measures in place in the outpatients facilities. Areas for improvement identified included the food, the ward facilities and cleanliness, and the inpatients service including communication by ward staff, the hospital building and car parking facilities. Users also felt that the continuity of ward doctors and knowledge-sharing with other consultants need improvement.

Good practice examples identified by the panel include the consultant-led service with its robust auditing and guidelines and strong research profile, the commitment of the allied health professionals, and the communication, knowledge and availability of the CF team, as noted by the patients.

Key recommendations from the panel include ring fencing the CF service as respiratory medicine is integrated into the acute medicine service, addressing staffing levels and grading, and clear budgetary lines for provision of basic equipment such as nebulisers.