Methods: A cross-sectional study was conducted. Satisfaction was evaluated using an online survey with 14 questions about different components of the interview: greetings (n=2), gathering information (n=4), explanation of test results (n=3), shared decision-making in treatment planning (n=3), and empathy (n=2). A five-point scale was used to assess each question with 0/1 referred to as "not satisfied" and 5 to "totally satisfied". The mean score of each interview part is presented.

Results: Of 58 responders, 69% (n=40) had an appointment with oncologist in public clinics and 31% (n=18) in private clinics. The mean age was higher in public group, 39.8?11.9 vs 34.2?6.7 (p < 0.01). There were 87,5% females in public clinics group and 100% in private. The mean total satisfaction score was significantly lower among patients in public than in private clinics: 2.80?1.21 vs 4.31?0.84, respectively (p < 0.01). There were the following difference between public and private clinic groups in mean scores for each interview component: greetings – 3.15?1.40 vs 4.58?0.71 (p < 0.01), information gathering – 3.00?1.22 vs 4.54?0.71 (p < 0.01), test results explanation – 2.86?1.22 vs 4.14?0.89 (p=0.0001), shared decision-making in treatment planning – 2.29?1.39 vs 3.94?1.30 (p=0.0001), and empathy – 2.76?1.41 vs 4.3?0.91 (p=0.0001), respectively.

Conclusion: Cancer patients in Russia are more satisfied with communication with oncologists in private clinic setting than public hospitals. It can be due to limited time for interviews, lower doctor motivation, and common use of a paternalistic model in public clinics.

O.P.22
The use of AccuRx in collection of Friends and Family Test data in a primary care network

Presenter(s):
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Background: The NHS Friends and Family Test (FFT) is the largest single source of patient feedback in the world, having collected over 75 million pieces of feedback since its introduction in 2013. It is traditionally collected using paper forms after a service encounter. COVID-19 caused enormous disruption and change to primary care services across the world, and also reduced the ability of patients to give feedback about their significantly altered services. This project looked at the introduction of virtual delivery of the FFT to patients in a primary care network.

Approach: Feedback received by a primary care network from December 2019 to August 2020 was audited and compared to feedback received after the introduction of virtual FFT delivery via AccuRx software. Qualitative feedback from practice staff was collected regarding the implementation of the FFT.

Results: 61 pieces of feedback were collected per month on average prior to the introduction of virtual FFT collection across the network. Trial introduction of virtual FFT introduction in 3 practices which serve 54% of the network's patients also returned 61 pieces per month. Issues identified included patient accessibility, potential introduction of bias in feedback collection and unequal provision of FFT between centres within the network.

Implications: Virtual FFT collection offers an effective and COVID-secure way for practices to improve their collection of FFT data, of particular relevance when performing distanced consultations. Virtual FFT collection will now be introduced across this network. Further development areas include improving language accessibility, and automation to reduce administrative burden of data collection and reduce bias.

O.P.23
Communication as pillar for anxiety management in the nursing during the COVID-19: a scoping review

Presenter(s):
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The Coronavirus Disease - 19 (COVID-19) outbreak is generating changes and increasing of symptoms of anxiety in the general population, even in the health professionals. Among the health professionals, nursing stands out, as it is considered the backbone of the health system because they are on the front line of care in integral period with patients. This research aimed to map the production of knowledge on the strategies used for the management of anxiety, in nursing professionals, during the COVID-19, Severe Acute Respiratory Syndrome (SARS) and Middle East Respiratory Syndrome (MERS). The methodology adopted was a scoping review conducted in the BVS, EMBASE, PUBMED, CINAHL, PsycINFo, SCOPUS and Web of Science information sources. The review protocol is registered in International Prospective Register of Systematic Reviews under number CRD42020192918. A total of 31 studies were included in the review, and the interventions identified were based on communication as the role for the strategies of anxiety's management in the nursing team. The interpersonal communication was frequently mentioned, mainly to offer psychological support and exchange of experiences. However, intrapersonal communication was also efficient in the management of anxiety symptoms. The communication allowed the ramification of interventions into 5 groups, entitled: emotional support, social support, educational campaign, implementation of safety policies, and adoption of a positive coping style. The synthesis of evidence for the management of anxiety, based on communication, are essential to the mental health of nursing staff during the COVID-19, once through this synthesis, it was possible to identify the main interventions to manage anxiety, based on the power of communication, and such knowledge can be applied in the development of an anxiety management protocol for nursing professionals.