Learning from a Serious Incident in 2018 highlighted the importance of the documentation of controlled drugs. A detailed audit was conducted in July 2019. The main areas for improvement across the trust were around documentation in the CD order book and CD register. An action plan was agreed between nursing education and pharmacy departments to support best practice. This included the development of digestible best practice guidance to be displayed in medicine storage rooms, revision of policy and education roll out which took place in September 2019. Changes have been made and through the audit process we have improved our standards.

- % of all standards met
  - Jul 2019 80%
  - December 2019 85%
  - August 2020 90%

Feeding back audit results quickly and visually has been useful. Thankyou to all pharmacists and ward staff who have supported this work. We have made changes and reduced risk in this area.

82 EVALUATION OF THE MEDICINES MATTER NEWSLETTER IN GOSH

Ka Yu Yung, Great Ormond Street Hospital

10.1136/archdischild-2020-gosh.82

Introduction Improvements in cystic fibrosis (CF) care have resulted in improved outcomes, specifically many children maintain lung function in the normal range. Nonetheless there are children with poor outcomes, and there is a need for a more comprehensive multi-factorial measure that summarises the overall health status in this new era of CF care. Objective To define phenotypically distinct clusters of pediatric CF patients that are linked to different health outcomes by using basic machine learning algorithms. Method Data from the Toronto CF Clinical Database were used to define phenotypic clusters based on a broad variety of patient-descriptive variables. A Partitioning Around Medoids (PAM) clustering method was iteratively carried out on different combinations of the variables until a maximum distinction between outcome measures could be identified, which included time to recurrent event analyses for both pulmonary exacerbations and hospital admissions. The results were validated in GOSH CF clinical data housed within the GOSH-DRIVE DRE.

83 A MULTIVARIABLE COMPOSITE OUTCOME TO DEFINE DISEASE SEVERITY IN CHILDREN WITH CYSTIC FIBROSIS

Nicole Filipow, Gwyneth Davies, Eleanor Main, Sanja Stanojevic, Great Ormond Street Hospital and University College London ICH BRC, Dalhousie University

10.1136/archdischild-2020-gosh.83

Abstracts

CONTROLLED DRUGS STORAGE AND IMPROVEMENT

Andrew Pearson, Hong Thoong, Rasha Shamshah, Ka Yu Yung, Great Ormond Street Hospital; GOSH

10.1136/archdischild-2020-gosh.81

Improvements in cystic fibrosis (CF) care have resulted in improved outcomes, specifically many children maintain lung function in the normal range. Nonetheless there are children with poor outcomes, and there is a need for a more comprehensive multi-factorial measure that summarises the overall health status in this new era of CF care. Objective To define phenotypically distinct clusters of pediatric CF patients that are linked to different health outcomes by using basic machine learning algorithms. Method Data from the Toronto CF Clinical Database were used to define phenotypic clusters based on a broad variety of patient-descriptive variables. A Partitioning Around Medoids (PAM) clustering method was iteratively carried out on different combinations of the variables until a maximum distinction between outcome measures could be identified, which included time to recurrent event analyses for both pulmonary exacerbations and hospital admissions. The results were validated in GOSH CF clinical data housed within the GOSH-DRIVE DRE.

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