

HEALTH AND ADULT SOCIAL CARE OVERVIEW AND SCRUTINY COMMITTEE

9 DECEMBER 2021

LONG COVID

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Summary

This report seeks to outline the Kent and Medway understanding of Long Covid, including prevalence and current service arrangements. It will also outline planned future developments.

1. Budget and policy framework

1.1. Under the Local Authority (Public Health, Health and Wellbeing Boards and Health Scrutiny) Regulations 2013 the Council may review and scrutinise any matter relating to the planning, provision and operation of the health service in Medway. In carrying out health scrutiny a local authority must invite interested parties to comment and take account of any relevant information available to it, and in particular, relevant information provided to it by a local Healthwatch. The Council has delegated responsibility for discharging this function to this Committee and to the Children and Young People Overview and Scrutiny Committee as set out in the Council's Constitution.

2. Background

2.1. Long Covid (Post Covid Syndrome) is a new and emerging condition, which can have a significant effect on people's quality of life. There is no internationally agreed clinical definition or clear treatment pathway, and there is an evolving evidence base that continues to grow.

2.2. It is known that as many as 1 in 12 patients will find the recovery both prolonged and difficult. Although many people affected by Covid-19 will get better in the first 6-8 weeks of illness; some will still be struggling beyond this early phase and experience symptoms beyond 12 weeks and are defined as having Long-Covid or Post-Covid syndrome. It follows an unpredictable

waxing and waning course with many symptoms both physical and mental being linked to it.

- 2.3. These problems which may appear weeks or months after the start of the illness include: low energy & intense fatigue, breathlessness, aches and pains in muscles/joints, pains in chest & lungs, palpitations, alteration & loss of smell; stomach & bowel symptoms like nausea/abdominal pains/ diarrhoea; mental health problems like anxiety/depression; brain fog with sluggish memory and dizziness. Younger adults and occasionally children can also get affected.

3. Engagement and service planning

- 3.1. To make sure that the services being developed focus on what matters most to people with Long Covid, the CCG needed to find out about people's experiences particularly as it is a relatively new condition. We needed to know how it has affected them and their families, and what would help patients and families.

- Between March and May 2021 the CCG worked with community organisations, our partners in NHS hospital trusts and GPs, local authorities and Healthwatch to gather local views and opinions. We heard from 512 local residents through an online survey, patient experience workshops, one to one interviews and targeted focus groups. The findings were fed into the development of the Post Covid Assessment Service.
- The engagement findings suggested that the following steps are taken by the CCG and partners to support people in Kent and Medway in their recovery from Long Covid:
 - Provide a single point of contact for advice and recovery management – taking a whole person approach and having a single place to contact when symptoms fluctuate.
 - Establish patient led support groups – peer to peer support to help people manage and understand symptoms and to provide advice
 - Conduct an information campaign – so that GPs, other medical professionals, employers and the wider public understand the severity of Long Covid and its effects.
 - Provide employment and financial advice and support - as part of Long Covid assessment and recovery aids.
 - Provide ongoing mental health support – a strong component of recovery must focus on mental wellbeing.
 - a. Since May 2021 the CCG has built on this first phase of engagement and continues to engage with patients with experience of Long Covid as services are developed.
- Patient Reference Group - 2 meetings so far

- 2 patients sat on the Post Covid Assessment Service (PCAS) Steering Group – 5 further volunteered to sit on task and finish groups/ steering groups
- 5 patients sit on the Long Covid Delivery Group

3.2 We also work with other groups – Kent and Medway Facebook group, MTW Facebook group, East Kent Hospitals group

“It’s good that patients have been listened to. To start with we didn’t have a voice. Now I bring issues and they are taken away and I know I will get an answer” (Patient rep, PCAS)

4. Principles of Care

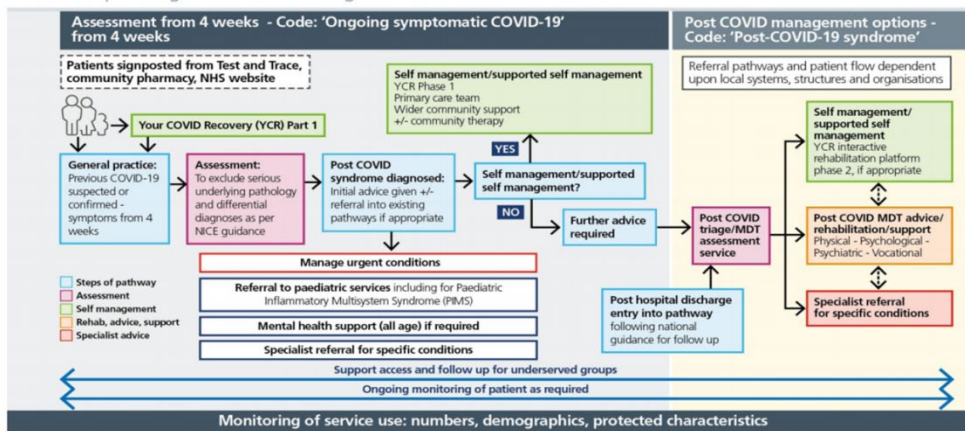
4.1 The National Institute for Clinical Excellence (NICE) has issued official guidance on best practice for recognising, investigating and rehabilitating patients with long COVID. The guideline makes recommendations in a number of other key areas, including:

- Assessing people with new or ongoing symptoms after acute COVID-19
- Investigations and referral
- Planning care
- Management, including self-management, supported self-management, and rehabilitation
- Follow-up and monitoring

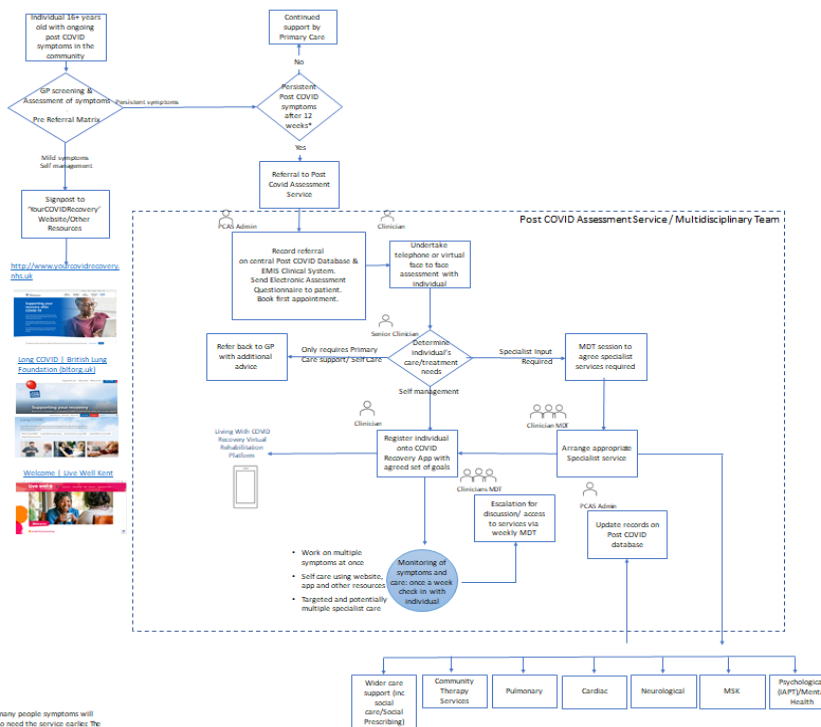
4.2 Key principles of care for Long covid:

- 1) Personalised Care: By listening to people and asking ‘what matters to you’ and providing a personalised plan
- 2) Multidisciplinary rehabilitative approach for physical, mental and social needs
- 3) Supporting and enabling self-care

Primary/community care post-COVID syndrome pathway all ages Incorporating NICE/SIGN/RC GP guidance 2020



Kent and Medway Post COVID Assessment and Rehabilitation Pathway



* Referral is most appropriate from 12 weeks as for many people symptoms will resolve by that point. There may be some people who need the service earlier: the timing should be based on individual need and is at the discretion of the assessing clinician. Referrals may be accepted from 4 weeks if acute or life threatening complications and alternative diagnoses have been ruled out.

5. Current service provision

5.1 Post Covid Assessment Service

5.1.1 Kent and Medway Post Covid Assessment Service opened on 14 May 2021. The service has received 1200 referrals since it opened, 331 (26%) of those being from Medway / Swale ICP area.

- 5.1.2 Before referring to the Post Covid Assessment Service, a patient's GP may carry out further tests depending on symptoms, so any alternative diagnosis can be ruled out and also to decide if referral to the Post Covid Assessment Service would be suitable.
- 5.1.3 Once referred, the Post Covid Assessment Service will get in touch and a team of professionals will assess a person's condition and provide support in accessing services to support recovery.
- 5.1.4 The PCAS team is resourced on an anticipated weekly referral of 60 patients.
- 5.1.5 Each patient pathway includes:
- A 1hr initial assessment
 - A Multi-disciplinary Team Meeting (comprising of Nurse, PCAS GP, Psychologist, physiotherapist)
 - Follow up call post-MDT
- 5.1.6 The aim is for patients to be assessed within six weeks, unless they chose to delay assessment for personal reasons. However, the service is still experiencing a significant number of referrals. We are working with Maidstone and Tunbridge Wells NHS Trust / West Kent Primary Care, who provides the service, to continually monitor demand and service capacity. Additional resources are being deployed to support patient throughput.
- 5.1.7 Following assessment the service gives advice and guidance and makes relevant referrals suitable to the patient.
- 5.1.8 Key self-management advice is given and the WHO Support for Rehabilitation Self-Management after Covid-19 is utilized for:
- Managing Breathlessness
 - Managing problems with voice
 - Managing eating, drinking and swallowing
 - Managing problems with attention, memory and thinking clearly
 - Managing activities of daily living
 - Managing stress and problems with mood
 - When to contact a healthcare professional
- 5.1.9 Common onward referrals include:
- IAPT
 - Social Prescribing
 - Your Covid Recovery – Guided Rehabilitation with the virtual support of a physiotherapist
- 5.1.10 There is also some need for onward referral to specialist secondary care services most commonly respiratory, cardiology, neurology and ENT.

6. Developing Long Covid Services 21/22

6.1 Kent and Medway CCG are committed to expanding support for patients with Long Covid, support the reduction of inequalities and reduce service and outcome variation.

6.2 An Integrated Long Covid Delivery Network has been convened and comprises of partners across the system with the following key aims and work plan:

a. Expanding Treatment and Support

6.3 Identify gaps in current assessment, treatment and rehabilitation Long COVID service offer and develop options but in the context of the wider service needs including:

- Continued development of PCAS to include face to face assessment capacity
- A care co-ordination and case management approach and capacity for patients with Long Covid
- Patient peer support offer
- Vocational support
- Carer Support
- Menu of rehabilitation options including virtual and face to face options
- Agreed pathways with acute trusts for those requiring specialist opinion

b. Children and Young People

- Establish clinical support and pathways with CYP Hub
- Improve data collection and understanding of K&M CYP Long Covid cohort
- Work with local CYP clinical network to increase understanding and awareness of CYP Hub/Pathways

c. Enhancing Primary Care Services - Support the implementation of the Enhanced Service including:

- Development & delivery of educational opportunities for Primary Care
- Targeted approach to promotion of and referrals to Long Covid Services
- Supporting Improved coding and therefore intelligence and understanding of need

d. Continue ensuring that patient engagement and co-design is at the heart of the K&M response to Long COVID:

- Feedback on Post Covid Assessment Service
- Engagement relating phase 2 services development

- Promote and increase utilization of your covid recovery and other self-care support tools

7. Risk management

7.1 There are no significant risks to the Council arising from this report.

8. Financial implications

8.1 There are no financial implications to Medway Council arising directly from the recommendations of this report.

9. Legal implications

9.1 There are no legal implications to Medway Council arising directly from the recommendations of this report.

10. Recommendation

10.1 The Committee is requested to note the content of this report.

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Appendices

None

Background papers

NHS.uk website information on Long COVID
<https://www.nhs.uk/conditions/coronavirus-COVID-19/long-term-effects-of-coronavirus-long-COVID/Nhs.uk>

NHS England and NHS Improvement website information on Long COVID
<https://www.england.nhs.uk/coronavirus/post-COVID-syndrome-long-COVID/>

NICE COVID-19 rapid guideline: managing the long-term effects of COVID-19
<https://www.nice.org.uk/guidance/ng188>

Your COVID Recovery

<https://www.yourCOVIDrecovery.nhs.uk/>

National Institute of Health Research – Funded research into COVID-19

<https://www.nihr.ac.uk/researchers/manage-your-funding/funded-research-into-COVID-19.htm>

Royal College of General Practitioners – Resources for GPs

https://elearning.rcgp.org.uk/mod/page/view.php?id=11512&_ga=2.14873968.711735455.1615980427-643992121.1603279467

Health Education England – Knowledge and library Long COVID page

<https://library.nhs.uk/long-COVID/>

Post COVID-19 syndrome: What support can patients expect from their GP?

The Faculty of Occupational Medicine has produced guidance for return to work for patients with long-COVID

<https://www.fom.ac.uk/media-events/publications/fom-guidance>