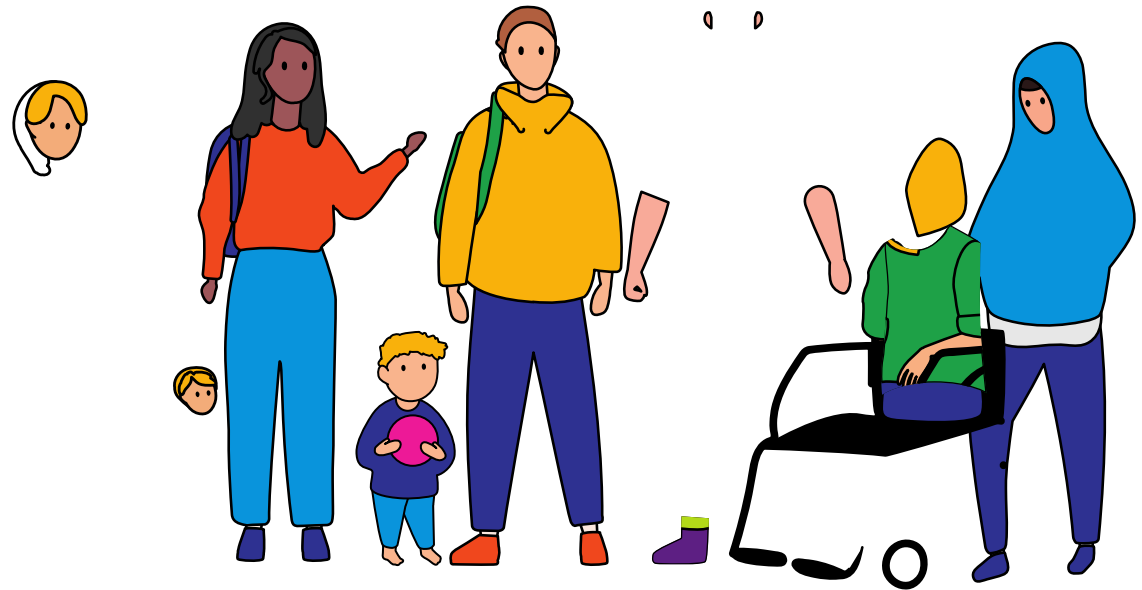


Post COVID Update

Stockton-on-Tees Health and Wellbeing Board

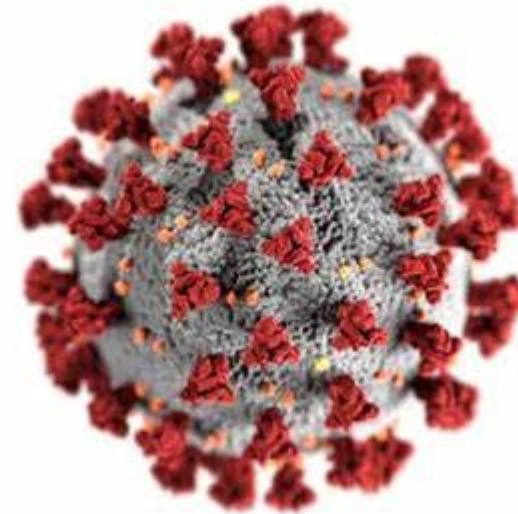
29th March 2023



Overview

Post COVID

- Definition
- Presentation
- Latest prevalence data
- New Research
- Post covid services



Post COVID Definition

NICE/WHO

NICE states that the term 'long COVID' is commonly used to describe signs and symptoms that continue or develop after acute COVID-19. It includes both ongoing symptomatic COVID-19 (from 4 to 12 weeks) and post-COVID-19 syndrome (12 weeks or more).

The WHO adds that the post COVID condition occurs usually 3 months from onset of the infections, lasts for at least 2 months, cannot be explained by an alternative diagnosis and impacts on everyday functioning. Symptoms may be new onset following initial recover or persist from the initial illness; symptoms may fluctuate or relapse over time.

What is Post COVID?

Clinical Picture

- Common symptoms include fatigue, shortness of breath, cognitive dysfunction (brain fog) but also other symptoms that generally have an impact on everyday functioning
- Symptoms may be new onset following initial recovery from an acute COVID-19 episode or persist from the initial illness
- Symptoms may also fluctuate or relapse over time
- Recovery is different for everyone due the wide ranging symptoms, especially for those with organ damage, research is ongoing into treatment

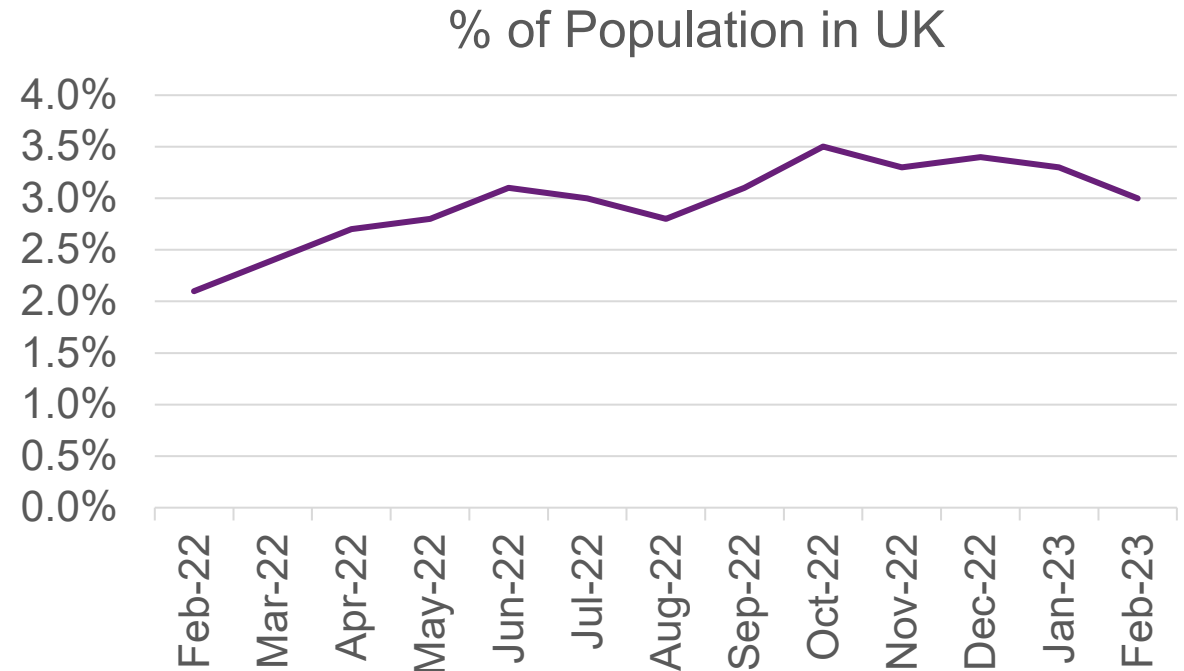
Post COVID Prevalence

Self reported, all ages, UK

Latest ONS release: 3% of population

Prevalence of self-reported Post COVID syndrome was greatest in people

- aged **35 to 49 years**,
- **females**,
- people living in more **deprived areas**,
- those working in **social care, teaching and education or health care**, and
- those with another activity-limiting **health condition or disability**.



Source: ONS Prevalence of ongoing symptoms following coronavirus (COVID-19) infection in the UK

New Vaccine Research

Does vaccination help prevent Post COVID Syndrome?

A review found that vaccination reduces chance of getting Post COVID syndrome if infected with COVID-19, protection increases with number of vaccination doses.

Vaccination significantly reduces the severity and duration of the symptoms of Post COVID syndrome and its impact on life

ONS research also highlights previous infection may reduce the risk upon reinfection.



Tees Active Post COVID Pilot

Physical Activity to Support Recovery

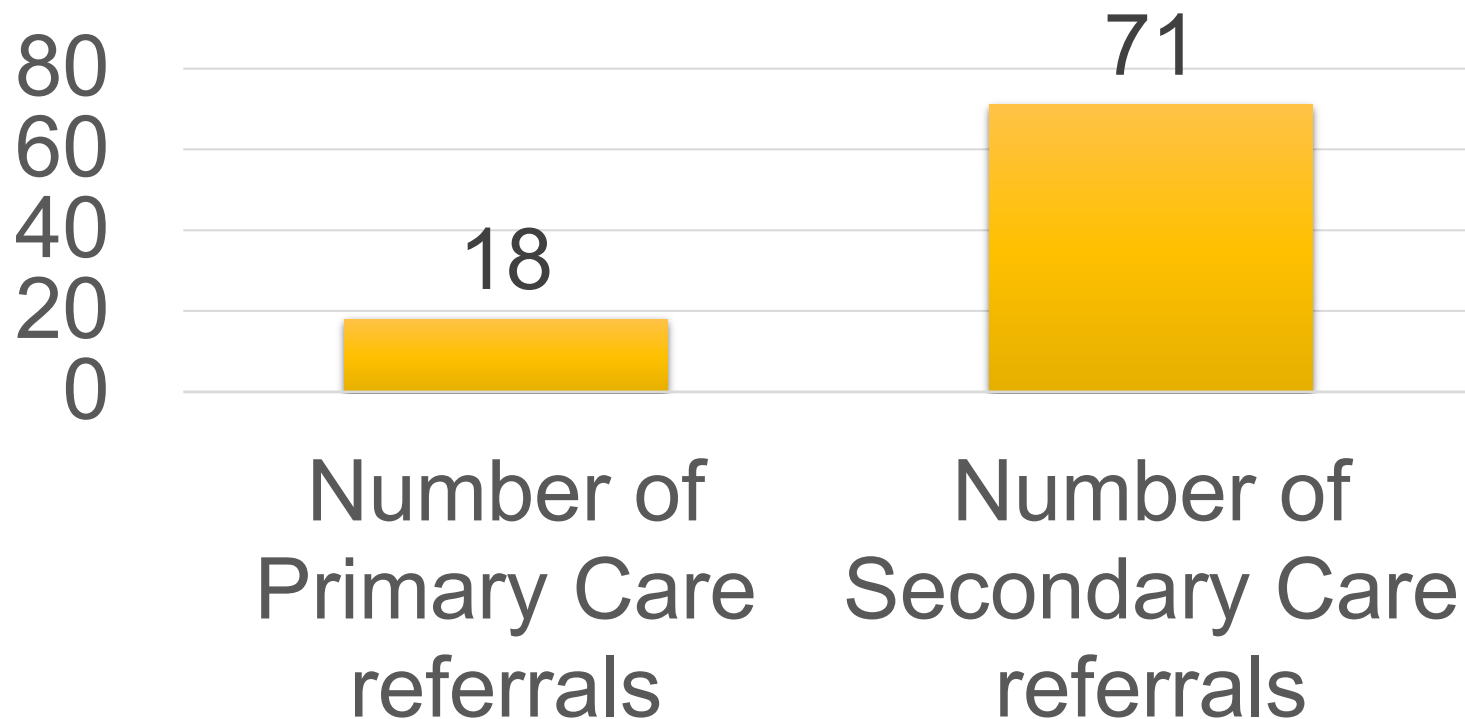
- Started in January 2022 with a total of 89 referrals to date
- Referral into the pilot stops 31st March 2023
- Adapted the Active Health programme to create 1 programme accessible to those suffering from on going COVID-19 symptoms
- More work planned to gain feedback and evaluate the pilot



89 In total

Referrals to Service

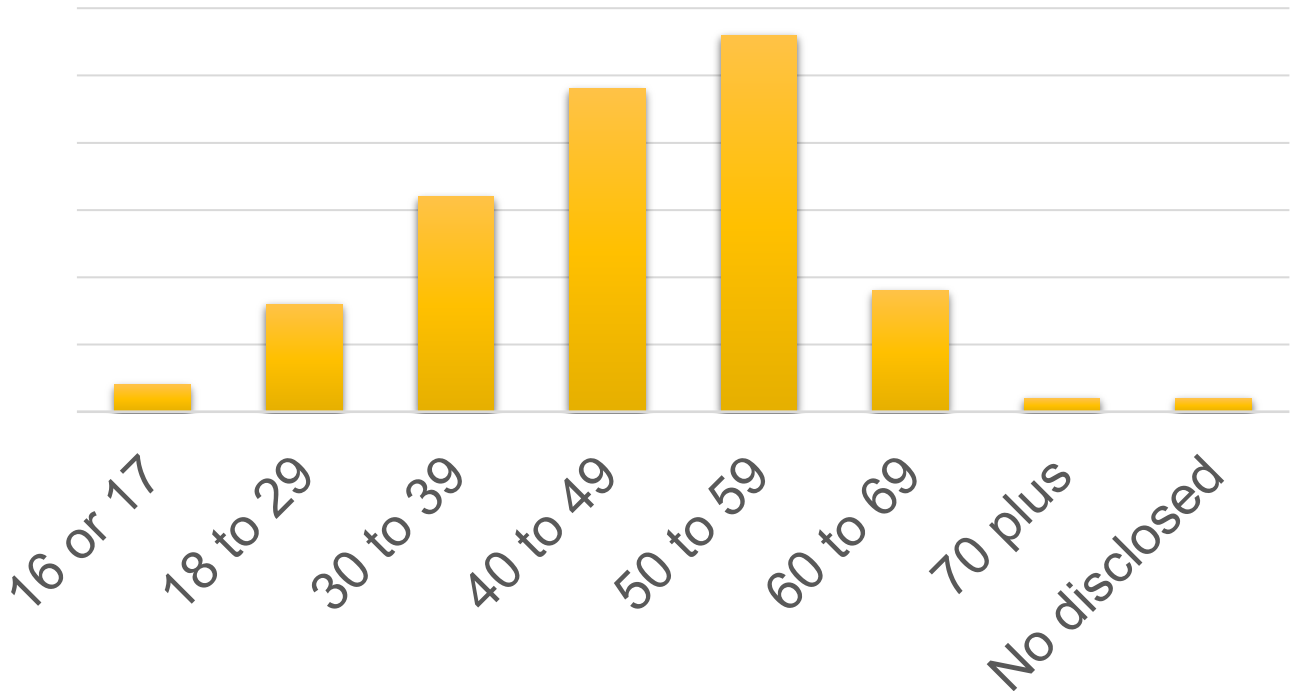
Referral Route



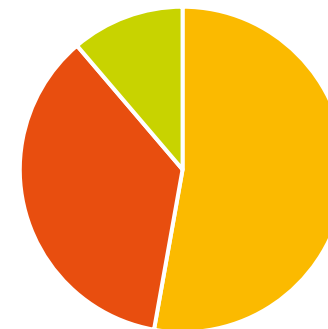
Post COVID Pilot

Demographic

Age

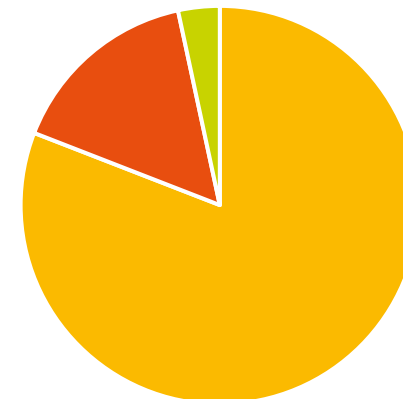


Gender



Female Male not disclosed

Ethnicity



White Not disclosed Asian or Asian British

Feedback

Initial early feedback

‘Really good’

‘more information on the content of the scheme before coming to tees active’

‘I’ve only joined the gym a couple of weeks ago however I can already feel the difference in my general health’

Further follow up planned...

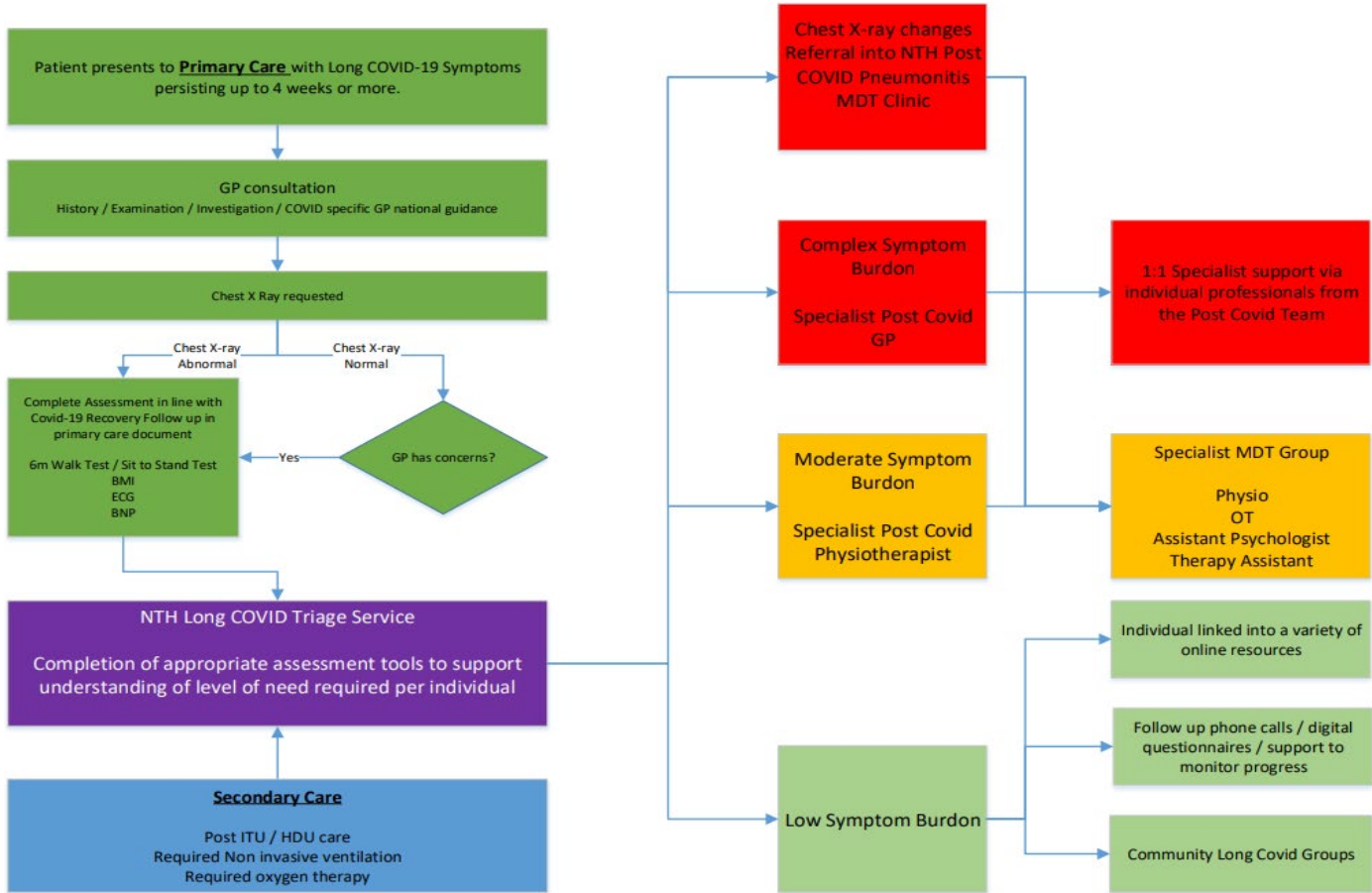
Summary

Post COVID

- New research show vaccines reduces risk of Post COVID syndrome, more research needed
- Tees Active Pilot has ended, alternative programme developed and adapted to enable those suffering to access a Tees Active service

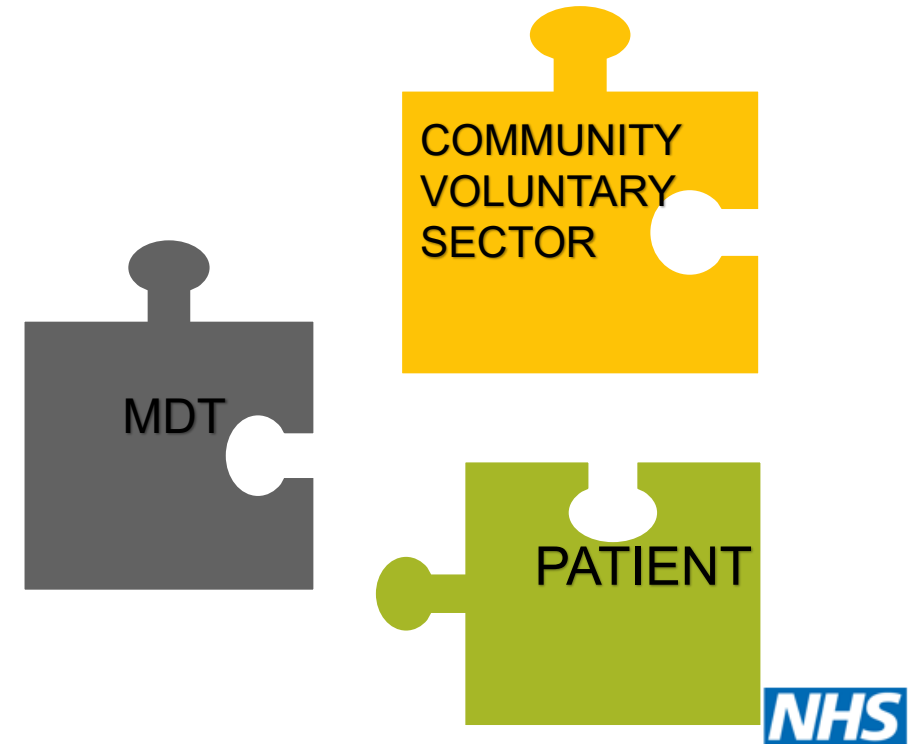
Thank you

NTHFT Post COVID Assessment Service

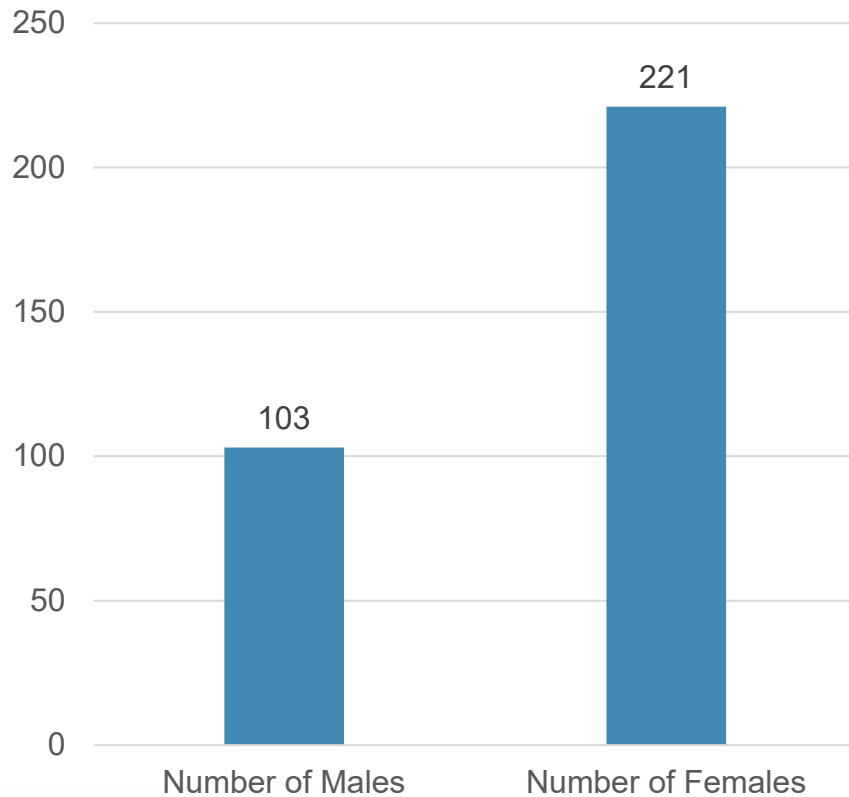


Post COVID Clinic Staffing

- Respiratory Consultant
- GP with Specialist Interest in Post Covid
- Respiratory Physiotherapist
- Senior Occupational therapist
- Clinical Psychologist
- Assistant Psychologist
- Specialist Therapy Assistant



Referrals by Gender and Age 1/5/22-31/10/22



North Tees and Hartlepool
NHS Foundation Trust

Age Groups	Numbers	%
19-24	8	3
25-34	21	6
35-44	64	19
45-54	105	32
55-64	78	25
65-74	39	12
75-84	8	2
85+	1	1

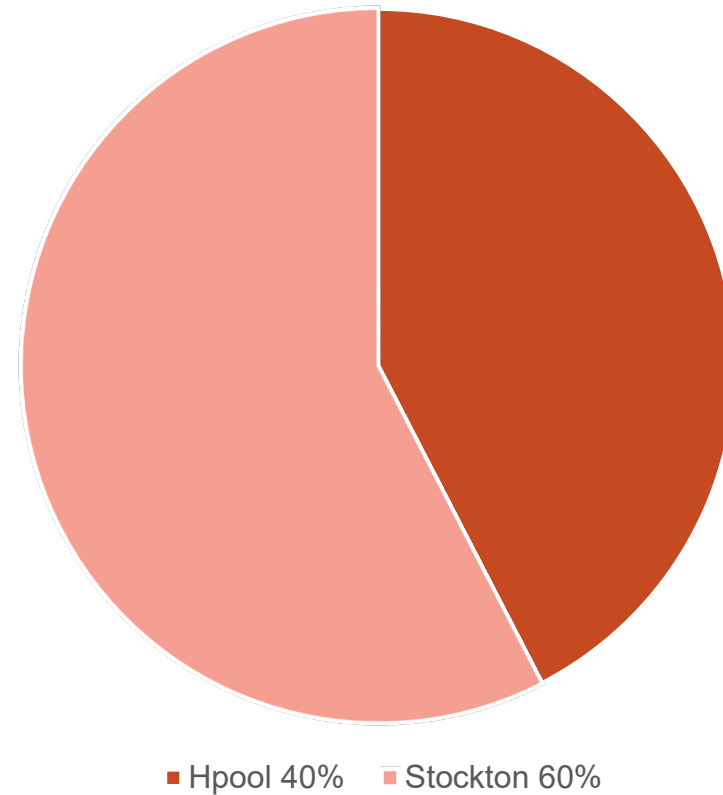


North East &
North Cumbria

Referral Demographics

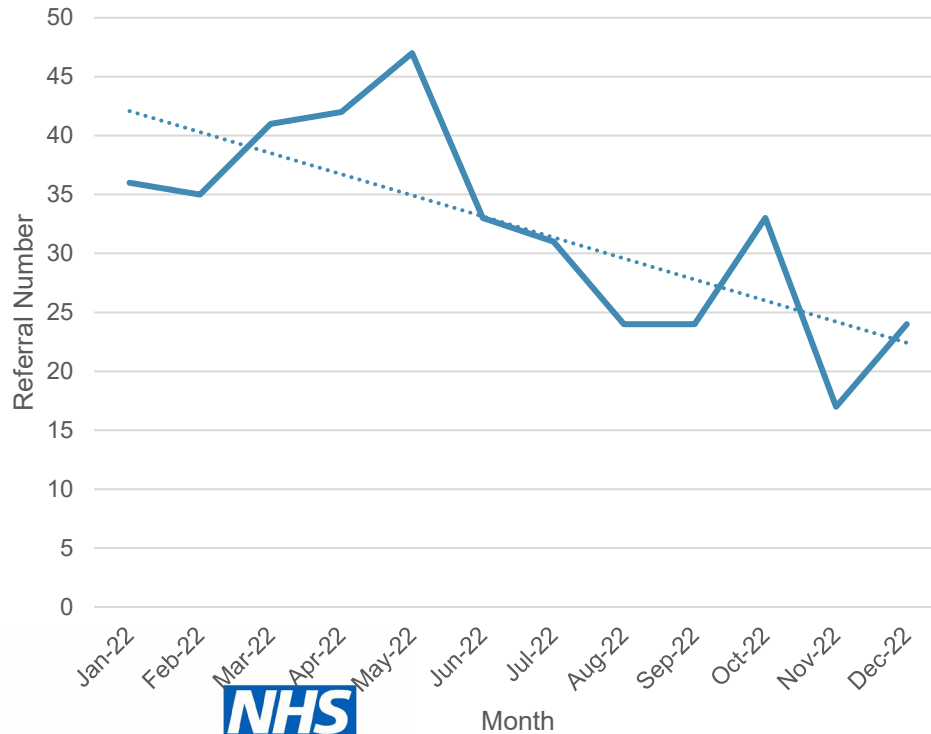
Referral Source	Total	%Total
GP	314	91
Consultant	32	9
Total	346	

Chart Demonstrating Referrals by Locality 2022



Referrals Continued...

Line Graph Demonstrating Change in Referral Flow



NHS
North Tees and Hartlepool
NHS Foundation Trust

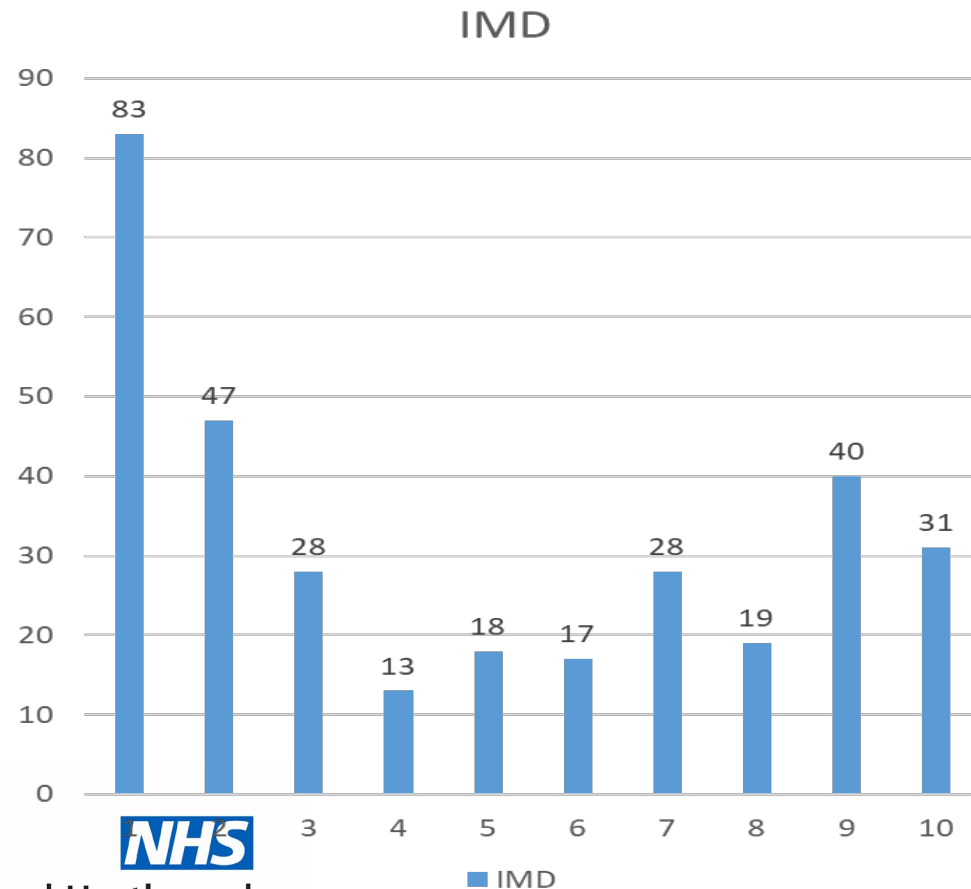
ONS Data 2022
Estimated Number of
Patients living with Post
Covid

Hartlepool – 723
Stockton – 1584
38% of estimated numbers
referred to service. This
represents those experiencing
large symptom burden as per
PHE presentation

NHS
North East &
North Cumbria

Referrals by IMD

1/5/22 – 31/10/22



North Tees and Hartlepool
NHS Foundation Trust

This demonstrates a breakdown of referrals by IMD.

More referrals from areas of higher deprivation.

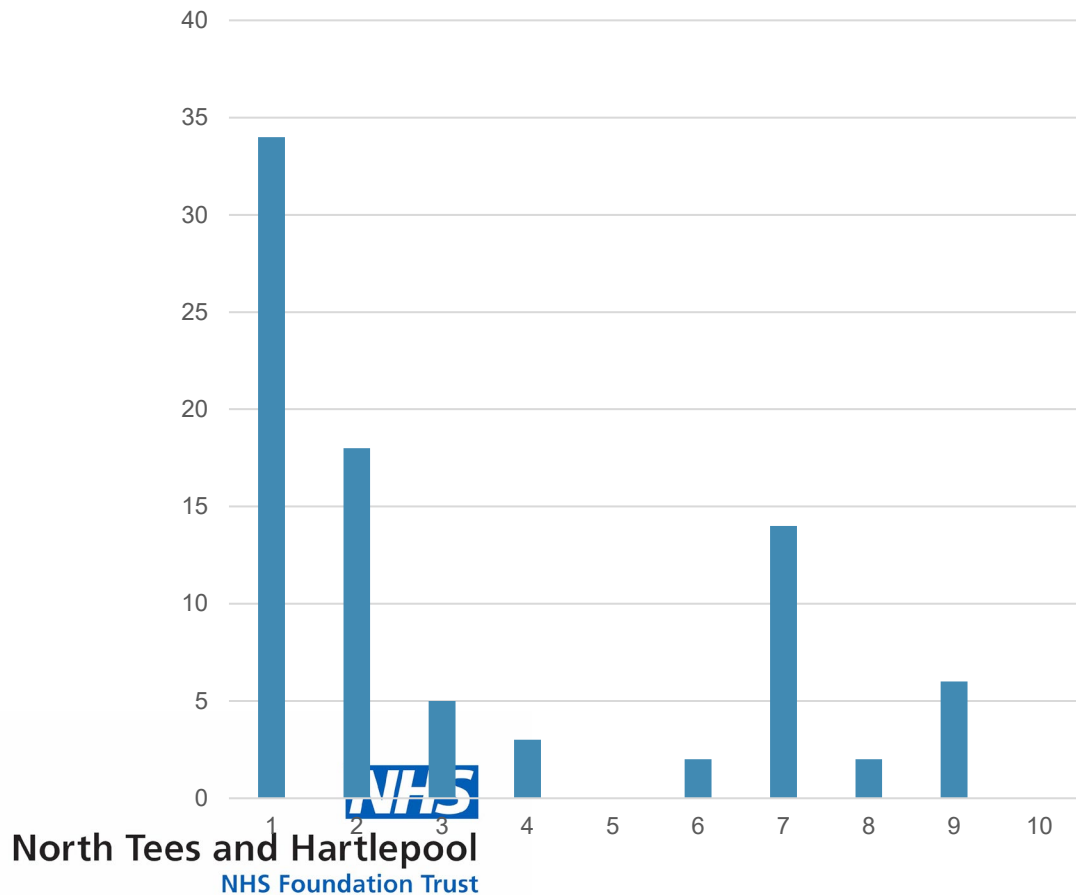
1 - 5 = 189

6 - 10 = 135

NHS
North East &
North Cumbria

DNA's

Service DNAs by IMD score



72 appointments missed throughout the whole service.

Represents 3.9% of all appointments.

Most are forgotten appointments.

Actions to achieve reduction in DNA numbers:

- Appointment reminder via SMS for clinics and groups.
- Phone call reminder for home visits.
- Option of telephone appointment

Post Covid Recovery Groups

The next 7 slides provide further information about the groups.

Cover both Stockton and Hartlepool sites

6 week course

- Education sessions including GP introduction
- Introduction to exercise / activity
- Peer support

Outcome measures

Referral on to Community / Voluntary sector



Group demographics

Looked at first 75 patients

- 52 Females (69%)
- 23 Males (31%)

Locality

- Hartlepool 35
- Stockton 40

Age range

- 30 - 75 (youngest and oldest)

This reflects the referral demographics to our service shown in a previous slide
Gender, locality and age range.

Group Outcome Measures

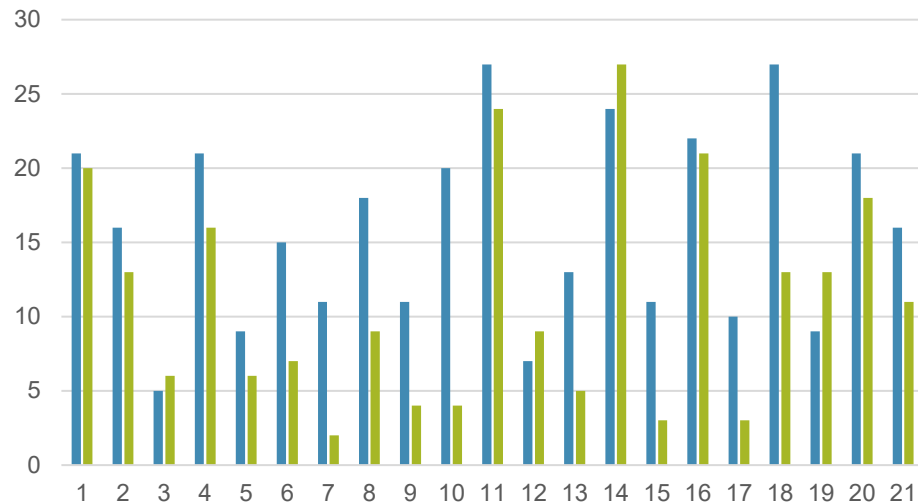
Bench marking against regional and national services.

- Evaluation completed on Post Covid Groups
- PHQ9 / GAD7 – anxiety and depression scale
- MFIS – modified fatigue impact scale
- 6MWT – 6 minute walk test
- Patient feedback forms

PHQ9 / GAD7 /MFIS / 6MWT are carried out Week 1 and repeated Week 6

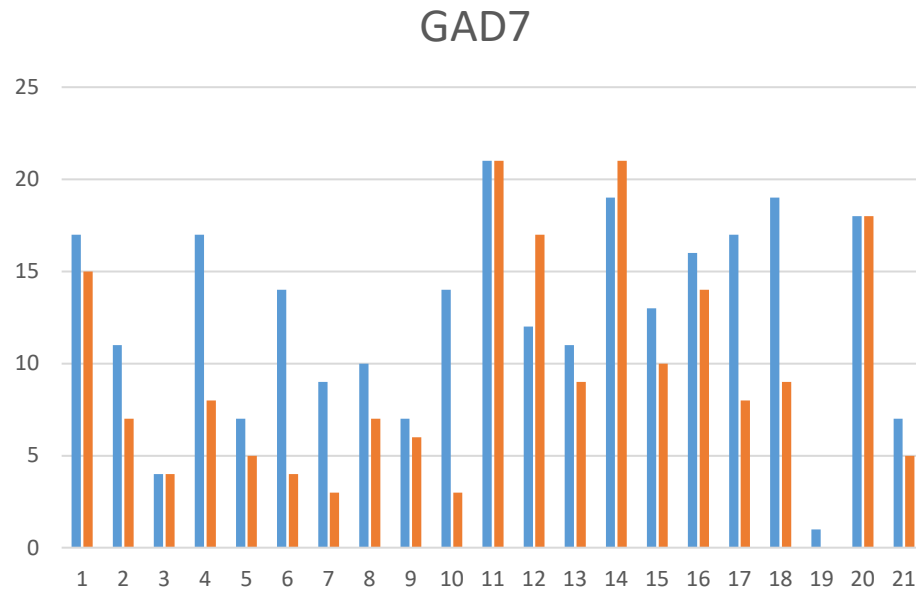
Outcome Measures

PHQ9



17 patients had a reduction in score (improved anxiety symptoms)
4 patient demonstrated an increase in their score at Week 6 and were offered 1-1 session with Psychology team.

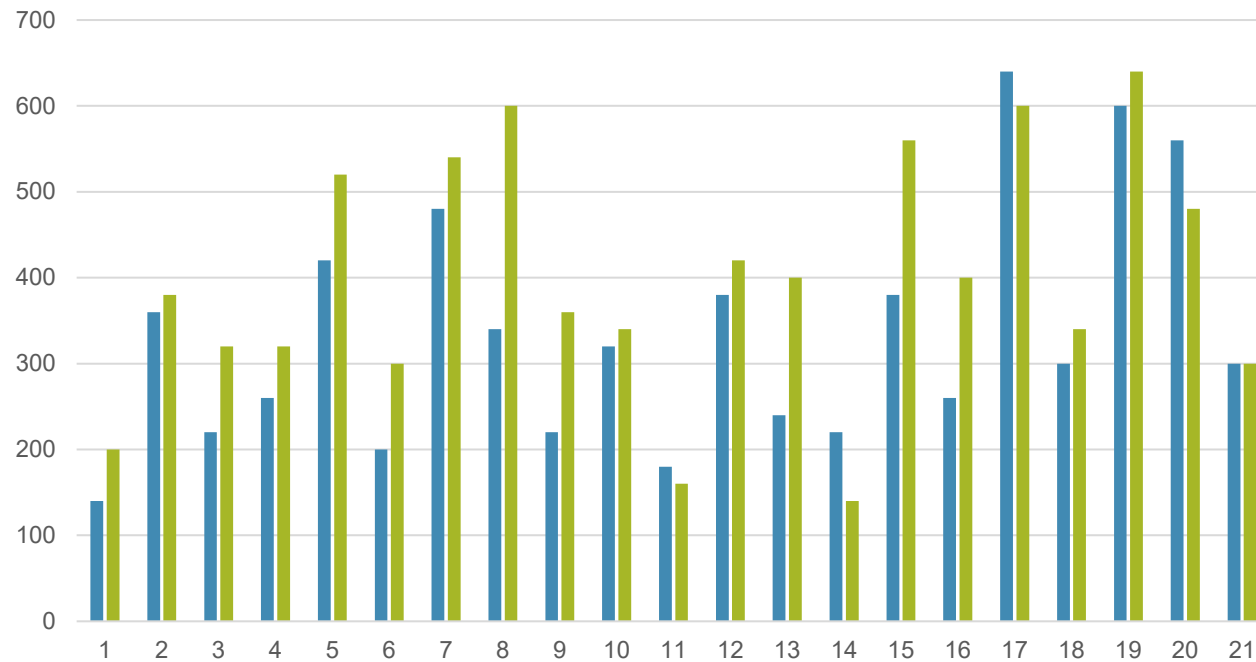
Outcome Measures



17 patients demonstrated a reduction in score (improved depression symptoms)
2 patients showed an increase in score and were offered 1-1 session with the Psychology team as were the 2 patients reporting no change.

Outcome Measures

6 MWT



16 patients increased their walking distance.

14 achieved the MCID target.

4 patients scores reduced.



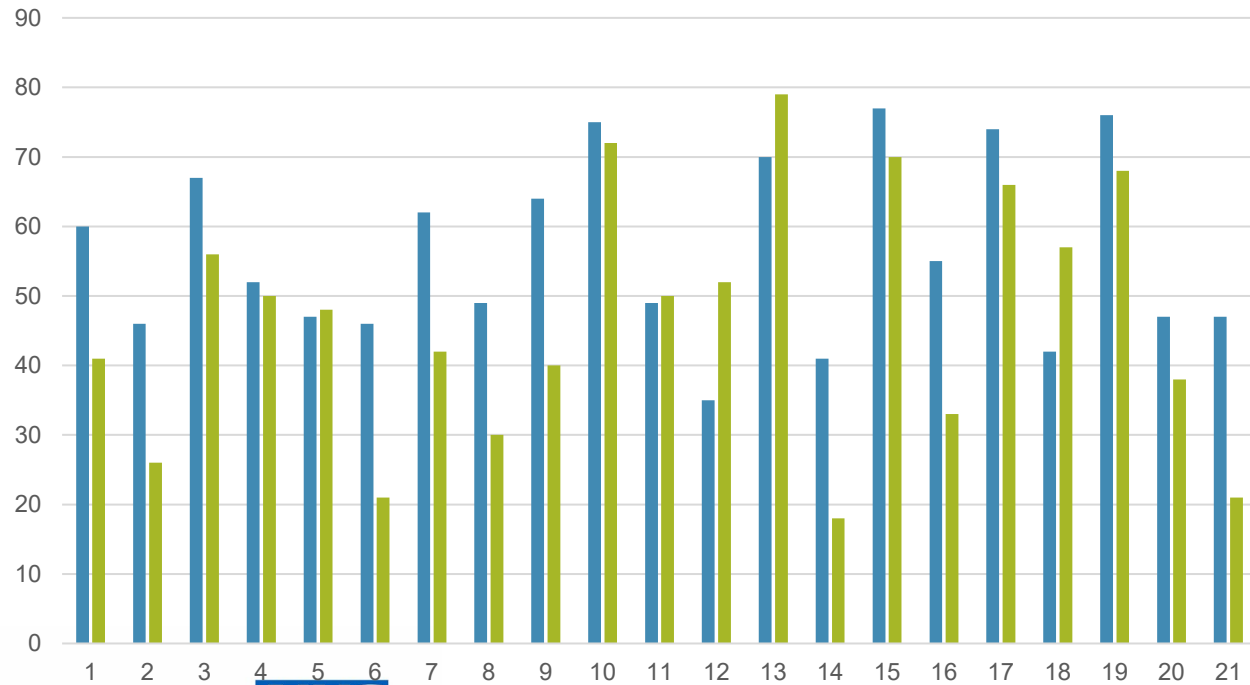
North Tees and Hartlepool
NHS Foundation Trust



North East &
North Cumbria

Outcome Measures

MFIS



North Tees and Hartlepool
NHS Foundation Trust

The overall outcome is one of improvement.

16 patients scores decreased (indicating improvement of fatigue symptoms)

5 patients scores increased
15 patients attended all 6 sessions.

Where scores have increased patients will continue with an element of 1:1 support from one of the team.



North East &
North Cumbria

Group Feedback

- Hearing the advice and information provided
- Learning coping strategies
- Meeting other people with Long Covid
- Extremely informative, learned a lot
- Really enjoyed today very, very helpful
- Looking forward to next week
- Knowing that you are not on your own
- Sad that it is finishing



Onward Referrals

- Referral onto
 - Tees Active Post Covid Programme – project ends 31/3/23
 - Hartlepool Health and Wellbeing Team
 -
 - Voluntary Sector - Catalyst / Resilience Team / Community Connect
 -
 - Community Hubs / Navigators
- Social Prescribers

Service Developments

- Reviewing the service, we recognized a need for more support with mental health wellbeing and as such are expanding psychology input to our service.
- A lot of the patients being referred into the service are increasingly more complex and as such most of the referrals are triaged to the GP led MDT clinic pathway.
- As the number of referrals continue to decrease, we are looking at other services that we can possibly integrate with to provide individuals with the appropriate education and management. One such service is Pulmonary Rehab. We need to learn more about the Pulmonary Rehab groups as the outcome measures that we have from our groups has demonstrated far better / higher results than we would have expected in a relatively short period of time.
- Work is ongoing with the Survey Lead from our Trust looking at capturing qualitative and quantitative feedback post groups.
- Friends and family test are handed to patients post MDT clinic appointment as online return rates were poor.



Tees Valley ICB Post COVID Services Evaluation & Next Steps

Relevant National Guidance

- The NHS plan for improving long covid services – July 2022
- Long COVID Toolkit; advice and resources for healthcare professionals – July 2022
- National Commissioning Guidance for Post COVID services – July 2022
- Long COVID Multi-agency Support Framework – January 2023

Patient Experience Survey & Learning

Post COVID-19 Syndrome Survey – 2023

- January-February 2023
- 77 respondents with symptoms ongoing for:
 - 4-12 weeks: 13%
 - 12+ weeks: 74%
- Most commonly experienced symptoms after 12 weeks similar to previous survey: fatigue and reduced ability to be physically active. However two additional symptoms reported: muscle aches and weakness, and poor sleep.
- Tees Active service was commissioned to support with being physically active. 72% of respondents advised that physical activity levels have affected their day-to-day lives.
- To assist with management of fatigue, the Post COVID Assessment Service offer education sessions within the groups and appropriate patients are signposted to the CRESTA clinic fatigue webinars, which have been specifically designed for Post C-19 patients.
- To assist patients with reduced/poor sleep the group sessions also provide information on sleep hygiene by the Psychologist and handouts given to patients at clinic. The FT team are also exploring the use of the Sleepstation digital platform.

Patient Experience Survey & Learning

- 80% of respondents to this survey were aged between 35-65.
- Similarly to the previous survey, 79% of respondents noted that their mental wellbeing had been affected by their ongoing symptoms.
- Access to self-help resources significantly improved – 73% of respondents advised that they had accessed some form of self-help support. This can be improved via Health Champions and VCSE organisations.
- 74% of respondents are not aware of the Your COVID Recovery website. Similarly 79% of respondents were not aware of the NENC ICB website.
- 62% of respondents accessed the main NHS website for information.
- 30% of respondents have been formally diagnosed with Long COVID/Post COVID Syndrome.
- 96% of respondents have been vaccinated against COVID-19.

Patient Experience Survey & Learning

- 30% of people reported accessing social media pages/groups to gather information and 65% of these found this information very helpful.
- When asked whether people sought out alternative self help information the following were noted:
 - Private chronic fatigue specialist
 - Google forums
 - Private meditation and body and mind courses.
- Overall 62% of respondents feel that there are not enough self-help resources available, so it is clear that this needs further development and reach across local communities.
- Alternative suggestions were sought and feedback included:
 - Access to helplines to reduce isolation.
 - Greater employer awareness of Post COVID Syndrome.
 - Exploration of advertisement opportunities on TV or social media.
- It is encouraging that when asked for preferred methods of receiving information the most common response (65%) was dedicated webpages, as this is already in place but needs refining.

Patient Experience Survey & Learning

- 52% of people did not access their GP for support.
- 20% of people who accessed their GP were referred to the Post COVID Assessment Service, but 21% felt that they were provided with no information. Despite GP engagement around self-help resources, only 5% of people were directed to this.
- Majority of people felt that the help from their GP was helpful: 61%.
- 94% of respondents did not access any community services e.g. Tees Active.
- In total 23% of respondents were referred to the NTHFT Post COVID Assessment Service, and 100% of these have already had initial contact.
- 82% of people found organising their appointment easy or very easy.
- 59% reported that support from the Post COVID Assessment Service was very helpful or helpful.
- For those who did not think that the intervention was helpful some of the key reasons were a lack of onward referral to appropriate service and lengthy waits between appointments.

Health Inequalities

The Long COVID Multi-Agency Support Framework for ICS's equips commissioners with tools and resources to better support Post COVID Syndrome patients with a view to reducing health inequalities. The resources/tools that are provided can be utilised locally.

Some of the key HI's outlined within this are:

- **Health:** People from ethnic minority groups are more likely to report being in poorer health and to report poorer experiences of using health services than their white counterparts. The COVID-19 pandemic has had a disproportionate impact on ethnic minority communities, who have experienced higher infection and mortality rates than the white population.
- **Employment:** Unemployment has risen exponentially during the COVID-19 pandemic, and has consistently been found to have a negative impact on a range of health outcomes. This has had a disproportionate impact on black and minority ethnicities.
- **Income:** Income influences health directly through the goods and services that people buy which can support, or damage, their health. The effects of Long-COVID may leave a patient without a reliable source of income. Those living in the most deprived deciles have between a 50- 65% greater prevalence of conditions such as learning disabilities, chronic lung diseases, serious mental illness and obesity when compared to the least deprived decile.
- **Peer support:** Individuals may feel more comfortable asking for and receiving support when it comes from a culturally sensitive service that is tailored more to their background.

Post COVID Assessment Clinic Activity v Expected Prevalence

Prevalence:

ONS estimates 3%; this is self-reported for symptoms ongoing past 4 weeks.

BMJ estimates 1%; for symptoms ongoing past 12 weeks.

BMJ (Greenhalgh)	COVID no long term symptoms					79-89%
	Unwell after 3 weeks					10-20%
	Unwell after 12 weeks					1%

Applying this to the Tees Valley anticipates that there will be:

Hartlepool: 723 patients

Stockton: 1,583 patients

Activity between April 2021 and January 2023 has been collated and NTHFT data has been pulled from this.

- 888 referrals have been made and 749 accepted; an acceptance rate of 84%. This is 38% of BMJ North East & North Cumbria estimated prevalence for Hartlepool and Stockton.

Next Steps

The patient engagement survey has provided us with detailed information and recommendations related to the provision of self-help resources, which will be explored. This will include:

- Inclusion of further information regarding anosmia, fatigue and sleep.
- Consideration of alternative ways of advertising self-help support in local pharmacies and online.
- Further awareness raising with VCSE colleagues to share self-help resources.
- Building on the survey work continue to link with VCSE colleagues to ensure that information is shared with as many people as possible across the local community, to reduce Health Inequalities.

This is not only related to self-help resources but ensuring that people are aware of the Post COVID Assessment Service and how they can access this.

All of the above will be fed into a Tees Valley Post COVID Evaluation Report.

The Tees Valley Post COVID Steering Group will develop and undertake actions identified within the evaluation.

Next Steps (continued)

Recognising the national guidance for Post COVID Syndrome and NHS England commitments to addressing health inequalities, the ICB will take guidance from NHSE and support local services to reduce HI with various interventions including:

- improving service-level data to help identify inequalities in access, experience and outcomes
- all services having a robust inequalities plan in place which are reviewed as required in the national commissioning guidance for post COVID services
- making every contact count by using opportunities in other healthcare settings to signpost people to post COVID services
- using social prescribers to support people with the socio-economic impacts of COVID, as set out in the national commissioning guidance for post COVID services

NHSE Commitments:

- NHS England and Health Education England will roll out a long COVID training programme for healthcare professionals from autumn 2022.
- Post COVID services should enrol at least one clinician in the long COVID training programme by March 2023.
- NHS England will review the future model for long COVID services, informed by latest evidence.
- Further funding for 23/24 has been committed to; local areas are awaiting information on locality splits.

End of presentation, thank you for listening