



PARTNERSHIPS COMMITTEE

9th NOVEMBER 2021

REPORT TITLE:	LONG COVID
REPORT OF:	IAN DAVIS, COMMISSIONING MANAGER – PLANNED CARE, NHS WIRRAL CCG

REPORT SUMMARY

This paper informs the Partnerships Committee on the development of the nationally prescribed local Long COVID Multidisciplinary Teams (MDT) and Wirral CCGs commissioning of a local Long COVID MDT.

RECOMMENDATION

Partnerships Committee is recommended to note the nationally prescribed commissioning arrangements for Long COVID MDT's and Wirral CCGs commissioning of a Wirral Tier 3 Long COVID MDT.

SUPPORTING INFORMATION

1.0 REASON FOR RECOMMENDATION

- 1.1 This report is for the information of the Partnership Committee. It is therefore recommended that the Partnership Committee notes the report.

2.0 OTHER OPTIONS CONSIDERED

- 2.1 This is a report for information and therefore does not present options for consideration or recommendation.

3.0 BACKGROUND INFORMATION

- 3.1 NHSE/I ensured the rapid establishment of clinics to manage long COVID, by publishing commissioning guidance in November 2020 <https://www.england.nhs.uk/coronavirus/wp-content/uploads/sites/52/2020/11/C1248-national-guidance-post-covid-syndrome-assessment-clinics-v2.pdf>, and allocating funds to local health systems. Liverpool University Hospitals Foundation Trust (LUHFT) was appointed in November 2020 as the lead provider for Cheshire & Merseyside and they developed a long COVID assessment service available for primary care teams to refer in to.
- 3.2 Since the injection of additional funds from NHSE/I in August 2021 and the need to expand the service into a full assessment and treatment service, the model across Cheshire & Merseyside has changed to meet those requirements. The new model and service is a place based model with each of the nine places in Cheshire & Merseyside offering a clinical face to face MDT service to the patients within their geographical area.
- 3.3 Wirral Community Health and Care NHS Foundation Trust (WCHC) is the lead provider of the Wirral Tier 3 place-based MDT for Long COVID, WHCH will provide or co-ordinate treatment as appropriate, ensuring an individualised patient focus and ensuring that individuals are referred to the right support. Citizens Advice Wirral are sub-contracted to provide the social prescribing component. Separate funding arrangements are already in place for the provision of Psychology and Respiratory components of the MDT

Approach & Service Model

- 3.4 Patients will be able to access the assessment service following a referral from their own GP. The service will be available for patients with signs and symptoms that develop during or after an infection consistent with COVID-19, continue for more than 4 weeks and are not explained by an alternative diagnosis. The offer is in line with NICE guidance published in December 2020 <https://www.nice.org.uk/guidance/ng188> and will be delivered in line with the Tier 3 elements of the Cheshire & Merseyside long COVID Assessment & Treatment Service Specification.
- 3.5 The service will follow a patient centred model with a focus on recovery and rehabilitation rather than traditional disease centred approaches. This integrated

MDT approach aims to co-ordinate patient centred care across different services and to reduce the appointment burden for patients by managing cases on a local and an individual basis.

- 3.6 The service MDT will consist of a core membership of Occupational Therapy, Exercise Physiologist, Nursing, Social Prescriber and General Practitioner. The extended MDT may also include a Speech and Language Therapist and Dietician as part of service development once patient need is further understood.
- 3.7 It will be a clinic-based model supported by capacity for appropriate treatment/rehabilitation and home visits. Initially to be based on with 3 MDT clinics per week with the ability to flex within funding available if required based on patient referral numbers.
- 3.8 In situations where there is an interface with existing services, there will be a clear clinical handover.
- 3.9 The patient's GP will be communicated with throughout the process and will receive a comprehensive report at the point of discharge or referral to tier 4. The patient (and their representative as appropriate) will be fully involved in the development of their care plan.
- 3.10 The MDT will assess and coordinate any ongoing health and social care requirements.
- 3.11 Clinics will be held from WCHC premises at Victoria Central Hospital in Wallasey.

Key Performance indicators

Key performance indicators as outlined in the Cheshire & Merseyside long COVID Assessment & Treatment Service Specification which include:

- Total number of people referred into each Place MDT
- Waiting times from GP referral to MDT clinical assessment
- Waiting times for treatment to commence (such as psychology)
- The numbers of patients who are referred into the Tier 4 service
- The outcome of each patient
- The number of people discharged fully from the service
- The number of people who required further care
- Detail of patient complaints, PALs raised and compliments

Mobilisation

- 3.12 The transfer of patient referrals from LUHFT to WHCH took place on 4 October 2021. WCHC has contacted referred patients and commenced the first MDT for patients on 21 October 2021.
- 3.13 Go live for GP referrals is expected to commence in early November 2021, once the first batch of patients transferred from LUHFT have been seen.

4.0 FINANCIAL IMPLICATIONS

4.1 None as a direct result of this report.

5.0 LEGAL IMPLICATIONS

5.1 None as a direct result of this report.

6.0 RESOURCE IMPLICATIONS: STAFFING, ICT AND ASSETS

6.1 None as a direct result of this report.

7.0 RELEVANT RISKS

7.1 None as a result of this report. Risk registers are produced to cover this activity and appropriate mitigations have been taken against any relevant risks.

8.0 ENGAGEMENT/CONSULTATION

8.1 None as a direct result of this report.

9.0 EQUALITY IMPLICATIONS

9.1 This report is for information and no EIA is required.

10.0 ENVIRONMENT AND CLIMATE IMPLICATIONS

10.1 The provision of a local MDT on Wirral for Long COVID will mean that patients no longer have to be referred to Liverpool for assessment. They will be able to benefit from a service offer closer to their homes.

11.0 COMMUNITY WEALTH IMPLICATIONS

11.1 None as a direct result of this report.

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APPENDICES

N/A

BACKGROUND PAPERS

National guidance for post-COVID syndrome assessment clinics
COVID-19 rapid guideline: managing the long-term effects of COVID-19