NHS Greater Glasgow and Clyde Response Form Inquiry into Long COVID - Scottish Parliament's COVID-19 Recovery Committee

Details on the current services available including information on how the Scottish Government funding has been used

Mainstream services have supported the NHSGGC response for Long COVID patient groups. However, there is recognition that patients may require either individual, peer and/or group support to manage their Long COVID symptoms. General Practice responses and lived experience feedback has determined the need for informed staff, individuals to support care coordination with community links, and a direct point of contact to access services.

Therefore, in planning Long COVID pathways within GGC utilising the SG funding, we used the body evidence from health professionals and service users, in addition to emerging clinical research. Mirroring the national strategic direction for current Long COVID Services across Scotland, NHSGGC has adopted a person-centred approach in order to provide a comprehensive Interdisciplinary approach to Long COVID services. These services will provide integrated care including assessment and interventions that include various rehabilitation strategies for individuals presenting with Long COVID symptoms. This approach primarily focuses on selfmanagement and supported self-management pathways. This NHSGGC Long COVID Adult service model utilises Band 7 OTs with advanced dual assessment skills in mental and physical health, in particular fatigue, cognition, vocational rehabilitation, anxiety and low mood. The OT team will be centrally managed and work across the 6 HSCPs as demand dictates. Referrals will be initiated by General Practitioners to ensure exclusion of other pathology as per SIGN guidance and the decision-making algorithm for Long COVID. Post holders will deliver assessment and intervention, supporting individuals to navigate and access other services as required. This will enable people to have confidence in managing their own condition with appropriate intervention and resources. The Respiratory Physiotherapy Service will increase its outpatient/community service capacity with the addition of specialist physiotherapy sessions to augment the current outpatient /community clinics and enable coordinated pathways for patients who experience breathlessness.

Any barriers to service development and provision

The potential of creating a gold standard service for this diagnostic group, and the potential inequity for other long-term conditions.

Non-recurring funding creates risk in recruitment or unintended destabilisation of other areas of workforce. Service planning and implementation also requires consideration of Exit routes for the service if funding is not established as recurring. In GGC this is planned with a legacy of self-management referral resources and apps, peer support groups established, and education bundles to support substantive HSCP staff teams.

Lead in recruitment time frames and notice periods for successful candidates coming into post.

Any examples of good practice

Building on current NHSGGC initiatives for Wellbeing conditioning management programmes that can be extended to support individuals with Long COVID. These programmes aim to enhance the individuals' resilience with graded activity and improve physical tolerance as part of a live active programme based on meaningful activity and wellbeing.

There is an emerging population of children and young people with Long COVID. A Paediatric OT post will extend the proposed model early intervention and prevention for Long COVID (physical and mental health) within Tier 2 Children's Services around targeted and universal work. This will support access to advice line for parents, provide clinical advice and strategies around this long term condition and essentially linking with education colleagues to address the increase in anxiety in young children with Long COVID or reduced socialisation.

Details of future plans for long COVID service provision in the short and medium term

GGC are completing our recruitment processes to all professional and support worker positions. Governance is provided via an identified implementation lead and implementation design group, which is multi-disciplinary with additional members from digital health, planning team and PEPI team. Service launch is proposed by the end of March 2023. GGC are represented in all Long COVID national service planning and expert clinical groups. GGC will utilise the agreed national app assessment C19 YRS and therefore contribute to the emerging national evidence base.