

# Supporting people living with Long COVID in Saffron Health Partnership

# VIDEO GROUP CLINIC CASE STUDY



General Practice: supporting people living with Long COVID in video group clinics

## What we did



“Interactions with others in similar situation were affirming and enabling”

## What changed and improved?

### OUR CHALLENGE

Saffron Health Partnership is a practice of 17,000 patients in Leicester where there are high COVID infection rates. The team recognised that many people living with Long COVID were not presenting at the practice, and were feeling unsupported. Leicester CCG introduced a direct enhanced service, which provided resource for the team to set up video group clinics (VGCs).

### OUR GROUP CLINIC DESIGN

A student and GP registrar screened all COVID positive patients on the practice list for Long COVID. All GPs also referred suspected cases. The facilitator set up the VGCs and prepared results boards. The GP took group questions; spoke to each individual, and used 'Your Covid Recovery' to review common symptoms and evidence from BMJ. A second clinician ran a Mindfulness exercise. The facilitator supported documentation by entering group consultation and Long COVID read codes; summarised actions for each patient, including referrals for: bleeding time, chest X-ray, echocardiogram and to pulmonary rehabilitation, specialist Long COVID clinic, 'Let's Talk' and IAPT, and noted requests for Fit Notes, and signposting to health coaches or care navigators.

### RESULTS BOARD

#### LONG COVID

Fatigue  
Shortness of breath  
Mental wellbeing  
Work and activities of daily living  
Appetite and weight  
Others: Brain fog, pain, memory  
Referrals we agreed  
My actions to keep well

### EFFICIENCY GAINS

- LONG COVID screening is tricky as many people do not present to the GP
- 6-7 people was a great size for VGC. DNA rates are high. It is safe to invite 10-12 people

### CLINICAL IMPACT

- Education around diagnosis and symptoms improved identification and care. Screening for LONG COVID made the team question more systematically
- It is essential to screen medically and exclude physical disease. We uncovered cases of severe anaemia and under treated hypothyroidism disguised as LONG COVID
- Pacing and adapting daily activities, using motivational interviewing and CBT was particularly powerful with this group

### PSYCHO-SOCIAL IMPACT

- As they shared experiences, there were powerful epiphanies and shared moments of truth when individuals realised their symptoms were genuine
- The group dynamic helped participants acknowledge and deal with uncertainty and fear. Mutual support was important
- Most people had returned to work but were struggling. Fit notes informed employers and facilitated reduced hours & adaptations to help with pacing & ongoing symptoms

### EXPERIENCE OF CARE

- Lots of positive feedback; interaction with others in a similar situation was affirming and enabling. VGCs were transformative for this group and the impact was palpable
- There were some technical issues accessing MS Teams on the day
- Positive transference (empathetic understanding) from the group
- 'It's the best thing I have done this year' (GP)

“It has taken a lot of effort to get it together, and this VGC is best thing I've done this last year” GP

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