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Suffolk and North East Essex
Long Covid Assessment Service

'It was lovely, feeling that I wasn't alone and there are others, experiencing the same as me; It was a safe place to talk without feeling judged or that my symptoms aren't real with huge amounts of empathy'

Our Challenge

At the first clinical assessment, patients had very similar questions and needing to emotionally offload was very important and meant there was limited time to support patients to self-manage their symptoms. We needed to maximise efficiency. We faced challenges around clinician recruitment, wanted to reduce waiting times and increase uptake of our digital offer. It was clear patients were craving peer support so we introduced VGCs.

Our Group Clinic Design

The Long COVID service care coordinator team recruited all patients with digital connection and equipment; approximately 80 per month.

They collected patients information for the discussion board: when each person had COVID; whether they had hospital or ITU admission and their main concerns.

The VGC takes 90 minutes and the clinician join for approximately 60 minutes of that time. Up to 8 patients attend and we run 2 sessions per week.

The admin team facilitate and clinical input rotates between the Clinical Lead (band 7) and assessment team (band 6 AHP/Nurse) The model follows the standard VGC flow, with the addition of a commitment to download our "Living with" APP included in our patient agreement. After the VGC, all patients get a 1:1 assessment and access to our In-house management programme as required. This covers: vocational rehabilitation, financial advice, creative health (English National Opera singing, music, art, creative writing therapy), a sleep programme and specialist referrals to chronic fatigue, wellbeing and respiratory physiotherapy support. There is also 1:1 follow up at 3 and 6 months, as well as access to content and direct messaging with the team through the "Living With" app.

Results Board

- Fatigue
- Breathlessness
- Sleep
- Wellbeing
- Work and Pain

What Changed & Improved?

Efficiency and Access

- Patients feel more connected to the service sooner. Waiting time to first clinical contact have reduced from 7-8 weeks to 4 weeks 1:1 appointments achieve more and focus on next steps and a personalised self management plan
- Patients make connections between symptoms that they may not have previously recognised as being part of Long COVID, and gain a deeper understanding of the condition
- Patients are connected with specialist interventions e.g. sleep programme, vocational rehabilitation much sooner.
- Engagement with "Living With" app has increased by 25%
- Great admin with digital skills have been critical to our success

Clinical Impact

- Shorter waiting times has reduced anxiety for patients
- Patients are able to start applying self management advice sooner and before 1:1, which helps them prepare and make better use of that time
- A perfect consultation model for facilitating peer support and learning

Psycho Social Impact

- Patients value peer support and sharing experiences with others highly. It validates their experience and symptoms
- They get ideas and learn what has proved helpful for other members of the groups
- Individuals in the group offer verbal and written support to each other. It can be quite emotional
- Patients gain hope of getting better with support and feel more positive.

Experience of Care

Patients report that it is nice to know they are not managing this condition on their own and their symptom aren't being brushed aside. They feel encouraged to learn early on about the wide range of support they have access to.

The clinical team feedback report it being a privilege to hear the patients' experiences and to see the support they offer each other, which is really moving.



"The group clinic helps people connect with the clinical team and know we are here for them throughout their recovery"

