

## SCHEDULE 2 – THE SERVICES

### A. Service Specifications

<b>Service Specification No.</b>	11J/0256
<b>Service</b>	Post Covid Assessment Service
<b>Commissioner Lead</b>	Dorset CCG
<b>Provider Lead</b>	Dorset HealthCare NHS Trust
<b>Period</b>	1 <sup>st</sup> April 2021 – 31 <sup>st</sup> March 2022
<b>Date of Review</b>	31/03/2022

#### 1. Population Needs

##### 1.1 National/local context and evidence base

Emerging evidence and patient testimony is showing a growing number of people who contract COVID-19 cannot shake off the effects of the virus months after initially falling ill. Symptoms are wide ranging and fluctuating and can include breathlessness, chronic fatigue, “brain fog”, anxiety and stress. The NICE guideline scope published on 30 October 2020 defines post-COVID syndrome as signs and symptoms that develop during or following an infection consistent with COVID-19 which continue for more than 12 weeks and are not explained by an alternative diagnosis. The definition says the condition usually presents with clusters of symptoms, often overlapping, which may change overtime and can affect any system within the body. It also notes that many people with post-COVID syndrome can also experience generalised pain, fatigue, persisting high temperature and psychiatric problems.

A Post-Covid assessment Service should offer physical, cognitive, psychological and psychiatric assessments with the aim of providing consistent services for people with post-COVID syndrome (‘Long COVID’). These services should support those who need them, irrespective of whether they were hospitalised and regardless of whether clinically diagnosed or by a SARS-CoV-2 test.

#### 2. Outcomes

##### 2.1 NHS Outcomes Framework Domains & Indicators

<b>Domain 1</b>	<b>Preventing people from dying prematurely</b>	X
<b>Domain 2</b>	<b>Enhancing quality of life for people with long-term conditions</b>	X
<b>Domain 3</b>	<b>Helping people to recover from episodes of ill-health or following injury</b>	X
<b>Domain 4</b>	<b>Ensuring people have a positive experience of care</b>	X
<b>Domain 5</b>	<b>Treating and caring for people in safe environment and protecting them from avoidable harm</b>	X

##### 2.2 Local defined outcomes

- Individuals are able to access the service in a timely way
- Individuals return to previous level of independence and well-being
- Individuals are confident to manage their health in the long term
- Individuals have improved level of activity
- Individuals identify goals that matter to them
- Individuals return to meaningful occupation/work-based activity/participation

### 3. Scope

#### 3.1 Aims and objectives of service

To provide an assessment service for people identified and assessed in primary care with post covid syndrome.

#### 3.2 Service description/care pathway

Once investigations to exclude other causes have been undertaken, patients should be referred to the post COVID Syndrome Assessment clinics for consideration of Long COVID. The Ardens Post COVID assessment should be completed to assist this and an E-referral sent to the Dorset Post COVID Syndrome Assessment Clinic

- Children whose COVID related systems are lasting more than 4 weeks should be referred to the Dorset Post COVID Syndrome Assessment Clinic

The Dorset Post COVID Syndrome Assessment Clinic will undertake a remote MDT review of the patient based on the patient's history, examination, and investigations, which may include:

- First line advice, education on self-management strategies and access to appropriate resources including Your Covid Recovery
- Assessment and management of breathlessness / dysfunctional breathing – [www.physiotherapyforbpd.org.uk](http://www.physiotherapyforbpd.org.uk)
- Psychosocial assessment and management (including anxiety) with onward referral where required
- Early assessment of fatigue and implementation of fatigue management strategies in daily life
- Consideration of rehabilitation needs and onward referral where required.
- Consideration of a new diagnosis of venous thromboembolic disease (VTE)
- Symptom or palliative care management where required

#### 3.3 Population Covered

- The patient has signs and symptoms that develop during or following an infection consistent with COVID-19 which continue for more than 12 weeks
- No differential diagnosis identified
- All necessary and relevant investigations and tests should be completed before referral ( as per NICE Guidance 18/12/2020)
- Significant delay to physical recovery in the absence of other explanatory diagnoses/pathology
- Symptoms are having significant impact on psychological well-being
- The patient is unable to undertake and perform usual activities

#### 3.4 Any acceptance and exclusion criteria.

The service is not suitable for patients who have signs or symptoms that could be caused by an acute or life-threatening complication including:

- Hypoxaemia or oxygen desaturation on exercise
- Signs of severe lung disease
- Possible cardiac chest pain

Significant mental health symptoms, or at risk of self-harm/suicide

#### 3.5 Interdependence with other services/providers

**Interdependencies include but not limited to:**

- Acute services, especially respiratory and cardiology specialities when indicated
- Primary Care, to include support and training where indicated
- Dorset Chronic Fatigue Service
- Community rehabilitation services
- AECC University College, Bournemouth

#### 4. Applicable Service Standards

##### 4.1 Applicable national standards (e.g. NICE)

[Overview](#) | [COVID-19 rapid guideline: managing the long-term effects of COVID-19](#) | [Guidance](#) | [NICE](#)

NICE Clinical Case definitions. A set of definitions has been used to distinguish 3 phases following infection consistent with COVID-19, and to define the term 'long COVID'. These phases are defined below.

- Acute COVID-19: signs and symptoms of COVID-19 for up to 4 weeks.
- Ongoing symptomatic COVID-19: signs and symptoms of COVID-19 from 4 to 12 weeks.
- Post-COVID-19 syndrome: signs and symptoms that develop during or after an infection consistent with COVID-19, continue for more than 12 weeks and are not explained by an alternative diagnosis. In addition to the clinical case definitions, 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 postCOVID-19 syndrome (12 weeks or more).

The provider shall be responsible to update the relevant staff on the up to date standards, policies and guidelines.

##### 4.2 Applicable standards set out in Guidance and/or issued by a competent body (e.g. Royal Colleges)

As above

##### 4.3 Applicable local standards

As above. This includes any requirements by the Commissioner.

#### 5. Applicable quality requirements and CQUIN goals

##### 5.1 Applicable quality requirements

Not Applicable

##### 5.2 Applicable CQUIN goals

Not Applicable

#### 6. Location of Provider Premises

##### 6.1 The Provider's Premises are located at:

The service will be delivered either remotely or face to face dependant on clinical presentation and current service guidelines in relation to working within a covid secure environment.

#### 7. Individual Service User Placement

Not applicable

#### 8. Applicable Personalised Care Requirements

##### 8.1 Applicable requirements, by reference to Schedule 2M where appropriate

Not applicable