



Cardio-Respiratory

The Multidisciplinary Long Covid Clinic for Staff: Te Whatu Ora -Taranaki

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2020/2021

- Research
 Overseas
- CRSIG/PNZ
- AHANZ
- WCPT
- Social media professional platforms

GUIDELINES

- NICE
- WCPT
- Long Covid Physio
- Long Covid Kids

2022

- Ad Hoc Rx increase
- Straw Poll May,
 Collab with Occ
 Health June
- AH Long Covid Group formed June
- Library/ Dataset
- TOR
- MDT Declaration
- TIER 1/2 model
- First pt seen11/6/22

2023

- Hub Meetings
- Clinical caseloads
- Solution focused
- Service priorities
- Achievements
- Data evolving
- Efficacy
- Education-
- Collaboration training, Local, National
- Presentations,
- Audits, reviews

Timelines: Te Whatu Ora Taranaki LC service

Long Covid impact on staff

UNDERLYING FEARS/ANXIETIES ABOUT HOME & WORK

DRIVEN HEALTHCARE WORKERS- A NEW LEVEL OF FATIGUE

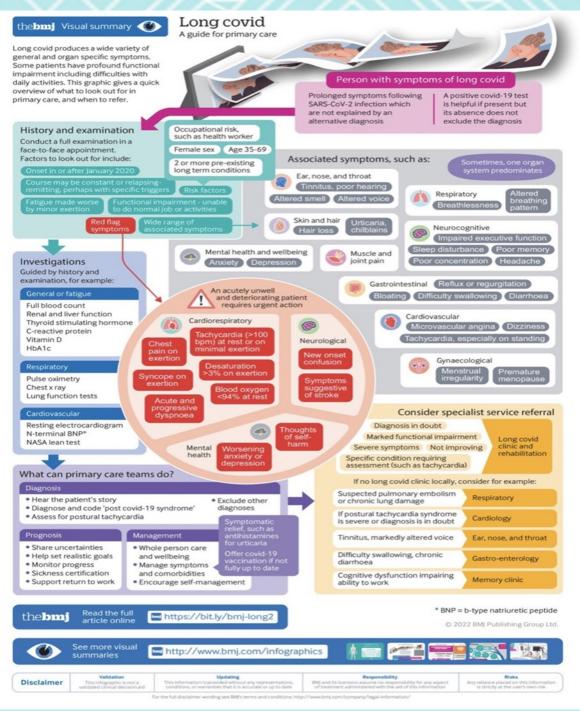
RTW- LINEAR MODEL OF WORKPLACE SUPPORT

MASKS COMPULSORY

DEPLETED WORKFORCE AND CULTURE/MINDSET OF COPING

MISINFORMATION CHAOS





Long covid—an update for primary care

BMJ 2022 ; 378 doi: https://doi.org/10.1136/bmj-2022-072117 (Published 22 September 2022) Cite this as: *BMJ* 2022;378:e072117

https://www.bmj.com/content/378/bmj -2022-072117/infographic

Gold Standard Care: Best Practice

Provide appropriate environment

Triage to clear cloaking and provide symptom focus

Screen for Red flags

Provide an MDT response

Have Co-ordinated referral pathways

Have Multi-option management approach

Provide Integrated care

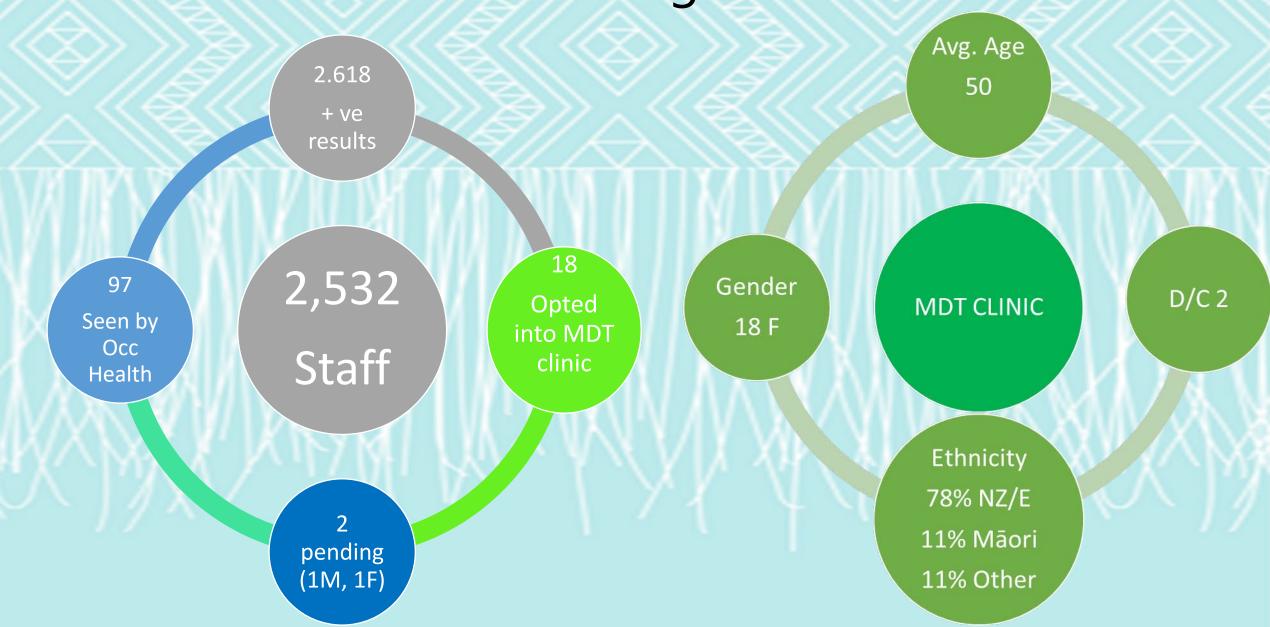
Recognition of long Covid as an umbrella term

Separate clinics for children

Return to work/return to school support

Research funding

Te Whatu Ora -Taranaki Long Covid Clinic for staff



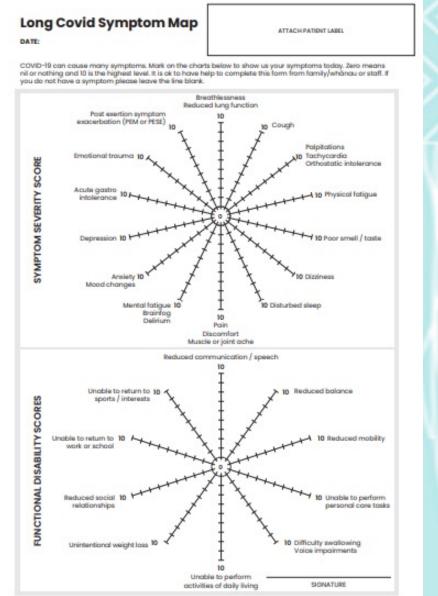
The Post COVID-19 Functional Status Scale

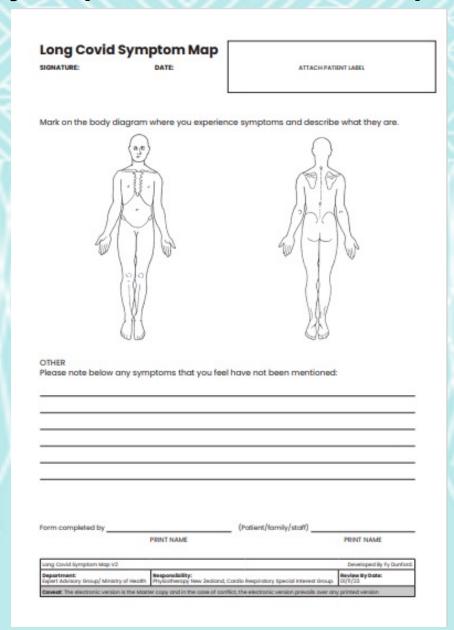
Post COVID-19 Functional Status Scale and Post COVID-19 Symptom Checklist (albertahealthservices.ca)

Но	w much is the patient currently affected in their everyday life by COVID-19?
Ch	eck the box beside the most accurate description and see below for appropriate resources and services.
Co	nsider pre-existing conditions and whether there are changes from baseline (pre-COVID-19 infection) function.
	No limitations = PCFS Score 0
	No symptoms related to the COVID-19 infection.
	Negligible limitations = PCFS Score 1
	Can perform all usual duties/activities, although still has persistent symptoms e.g. cough, loss of taste/smell.
	Slight limitations = PCFS Score 2
	Siight iiintations - Ford Score 2
	Occasionally needs to avoid or reduce usual duties/activities/work or needs to spread these over time due to symptoms. May require occasional assistance to complete activities due to persistent symptoms e.g. minor headache/fatigue, muscle aches.
	Occasionally needs to avoid or reduce usual duties/activities/work or needs to spread these over time due to symptoms. May require occasional assistance to complete activities due to persistent symptoms e.g. minor
	Occasionally needs to avoid or reduce usual duties/activities/work or needs to spread these over time due to symptoms. May require occasional assistance to complete activities due to persistent symptoms e.g. minor headache/fatigue, muscle aches.
	Occasionally needs to avoid or reduce usual duties/activities/work or needs to spread these over time due to symptoms. May require occasional assistance to complete activities due to persistent symptoms e.g. minor headache/fatigue, muscle aches. Moderate limitations = PCFS Score 3 Unable to perform all usual duties/activities/work due to symptoms e.g. chest pain, moderate fatigue/brain fog,
	Occasionally needs to avoid or reduce usual duties/activities/work or needs to spread these over time due to symptoms. May require occasional assistance to complete activities due to persistent symptoms e.g. minor headache/fatigue, muscle aches. Moderate limitations = PCFS Score 3 Unable to perform all usual duties/activities/work due to symptoms e.g. chest pain, moderate fatigue/brain fog, nerve pain.

Klock FA, Boon GLAM, Barco S, et al. The post —COVID-19 Functional Status Scale: a tool to measure functional status over time after COVID-19. Eur Respir J 2020; in press (https://doi.org/10.1183/13993003.01494-2020).

The Symptom Map-directing symptom-lead response





hp8627 - long covid symptom map v4.pdf (health.govt.nz)

Process: Occupational Health referral to the Staff Long COVID Clinic – Te Whatu Ora Taranaki

Identify
staff
member
who is
unwell for
greater than
7 days post
initial
infection

Occupational Health Support initiated Occupational Medicine Specialist Review 12 weeks post initial COVID infection confirmed with ongoing COVID symptoms present unexplained by alternate Diagnosis

Occupational Medicine specialist and Occupational Health CNS collaboration PCFS score to measure impact. PCFS 0-2 self management goal.
Supported by Occ Health.
PCFS 2-4 Occ Health initiate Long COVID clinic referral

Long COVID
symptom
map
explained
and
completed
by affected
staff
member

Referral
completed by
Occupational
Health CNS
to Long
COVID Clinic
Symptom
map
attached to
referral

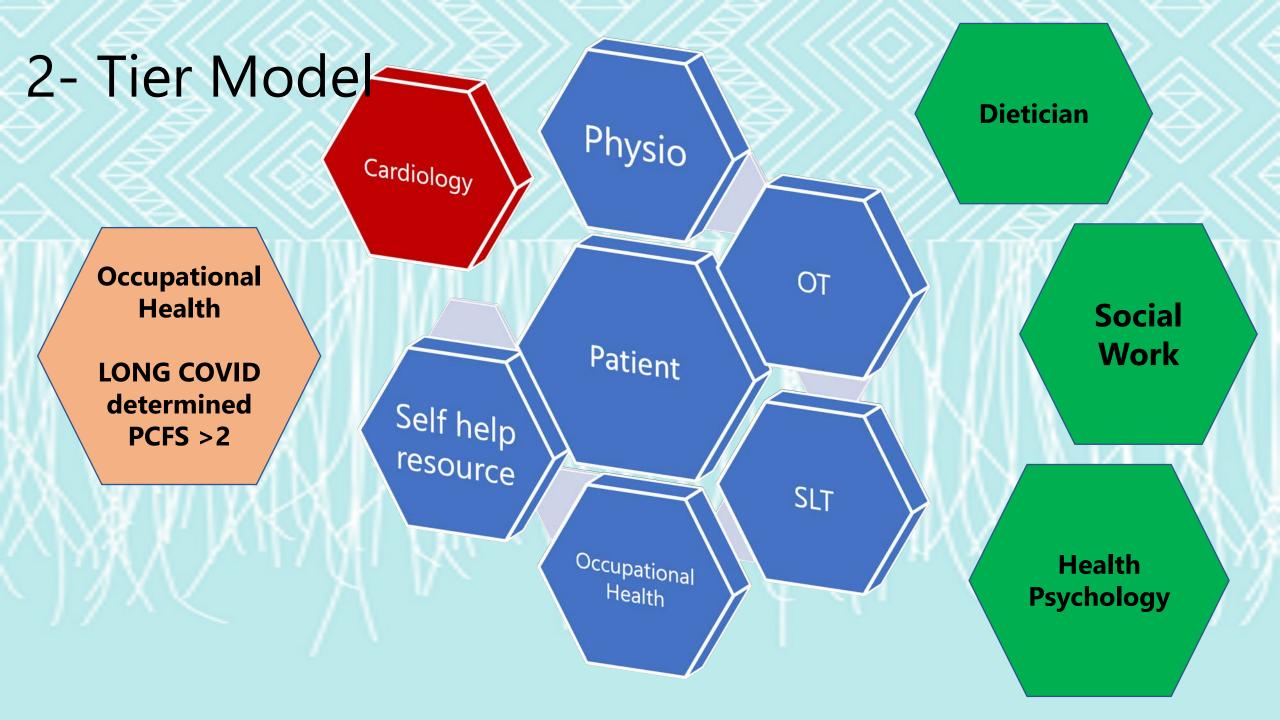
Ongoing support to staff member with MDT meetings with Long COVID Clinic group – working together for desired goal

Criteria: Long
Covid Dx; Opt in
consenting;
willing to
participate and

engage.

Place for PCFS here
Occ Health
determine impact

Place for Symptom
Map here:
Occ Health Pre
send or assist to
complete



Users of this service tell us.....

100% those attending have expressed positive engagement experiences with the clinic. (OH)

I'm back in control of me

I feel valued....
Like the organisation cares about me

I know what to do now, how to help myself....

I am so grateful that my manager understands

They helped me to see how I've changed and progressed visually

The time taken for me has given me hope

My Wairua is returning

Information feels safe and at my pace

Our Vision:

- Nationally supported funding and research for clinics
- Tool evaluation development for the NZ context
- Validation and clarity around NZ numbers
- Equitable access and clear pathways to Long Covid clinics
- Supported resourcing of NZ based information
- Adoption of overseas learnings where practical
- Sustainable staffing; acknowledging scope of practice
- Targeted support to vulnerable groups
- Build Primary /Tertiary relationships
- Build Private/public relationships

References

Alberta Health Services. Rehabilitation and Allied Health Practice Considerations Post- COVID-19

<u>Rehabilitation & Allied Health Practice Considerations Post COVID-19 Working Documents</u>

(albertahealthservices.ca)

Alberta Health Services. The Post COVID-19 Functional Status Scale <u>Post COVID-19 Functional Status Scale</u> and <u>Post COVID-19 Symptom Checklist (albertahealthservices.ca)</u>

Klock FA, Boon GLAM, Barco S, et al. The post –COVID-19 Functional Status Scale: a tool to measure functional status over time after COVID-19. Eur Respir J 2020; in press (https://doi.org/10.1183/13993003.01494-2020).

Ministry of Health. 2022. Clinical Rehabilitation Guideline for People with Long COVID (Coronavirus Disease) in Aotearoa New Zealand: Revised December 2022. Wellington: Ministry of Health. The Symptom Map. https://www.health.govt.nz/system/files/documents/publications/hp8627_-

long_covid_symptom_map_v4.pdf

Munblit D, Nicholson T, Akrami A, Apfelbacher C, Chen J et al. A core outcome set for post-COVID-19 condition in adults for use in clinical practice and research: an international Delphi consensus study. Lancet Respir Med. 2022 Jul;10(7):715-724. doi: 10.1016/S2213-2600(22)00169-2. A core outcome set for post-COVID-19 condition in adults for use in clinical practice and research: an international Delphi consensus study - PubMed (nih.gov)