

<u>Meeting</u> Health Overview and Scrutiny Committee
<u>Date and time</u> Thursday 8th December, 2022 At 7.00 pm
<u>Venue</u> Hendon Town Hall, The Burroughs, London NW4 4BQ

Dear Councillors,

Please find enclosed additional papers relating to the following items for the above mentioned meeting which were not available at the time of collation of the agenda.

Item No	Title of Report	Pages
9	Post Covid Services Post Covid User Group (10 mins presentation and 10 mins discussion)	3 - 10

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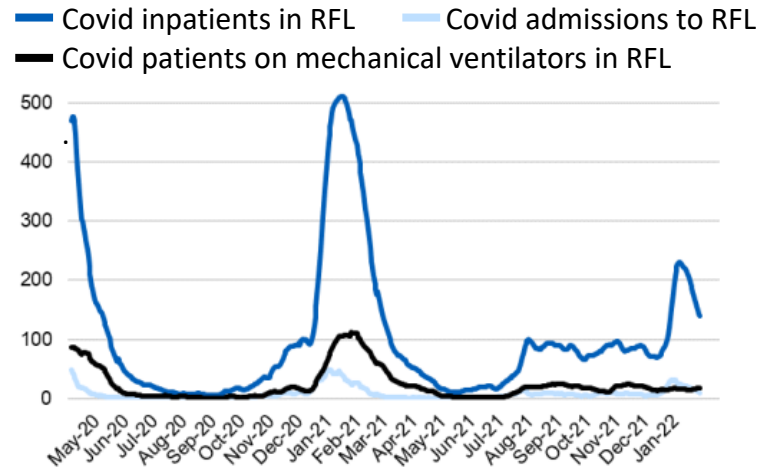
Post COVID-19 Syndrome in Barnet

Rapid summary of available data
March 2022

What do we know so far? Acute COVID

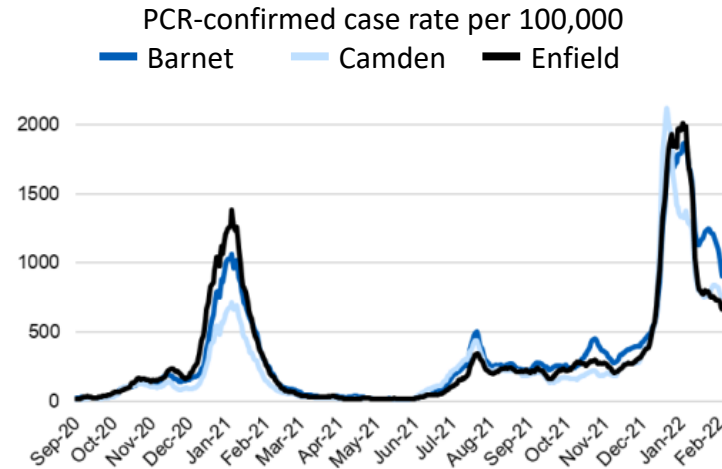
Key points

- Royal Free London saw 3,888 covid admissions in 2021, with 35% of these in January. Sadly, there were 573 deaths in hospital from covid patients in 2021
- All boroughs have seen the same overall trends in case rates, but there has been significant variation in rates between them
- Vaccine uptake is lower in London than in England, with Camden's uptake the lowest of the three boroughs



Covid at the Royal Free in 2021

- **3,288 covid admissions**, with 1,158 (35%) in January 2021
- A maximum of 520 inpatients with covid (11th January 2021, and a minimum of 10 (several days in May 2021)
- A maximum of 154 patients with covid on mechanical ventilators (28th January 2021) and a minimum of 1 (2nd May 2021)
- **573 deaths in hospital** from patients who had tested positive for covid in the last 30 days



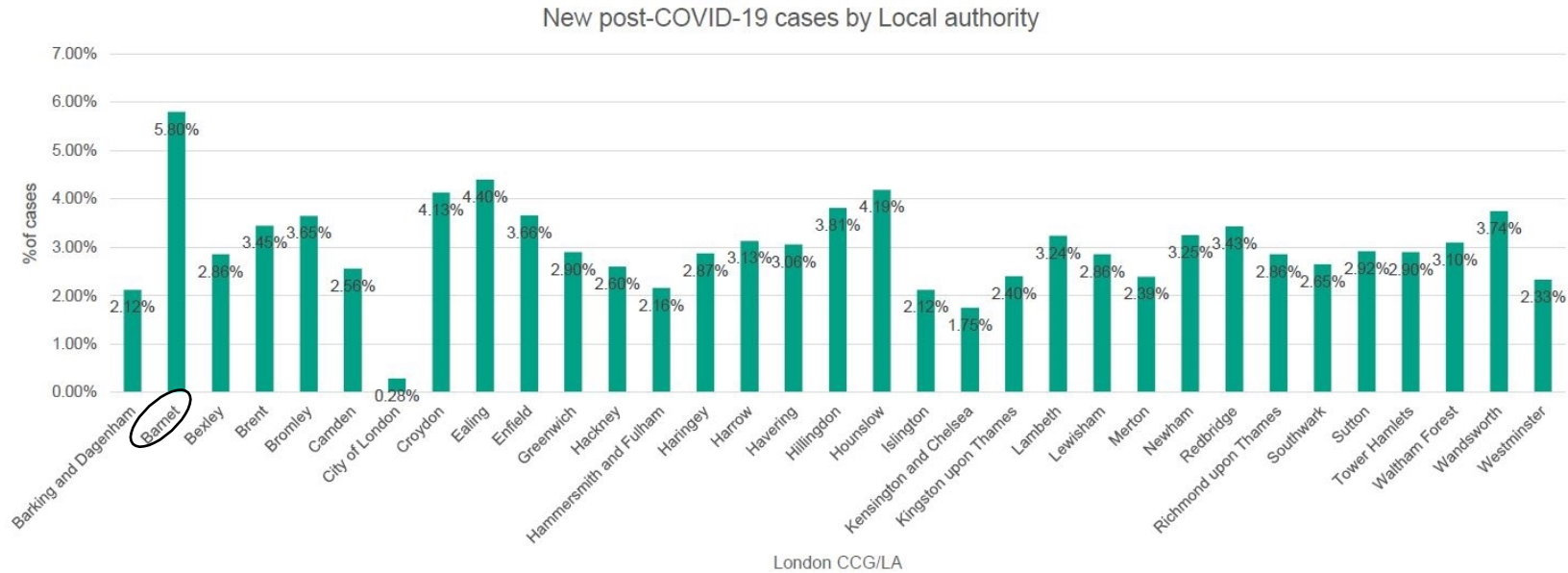
Covid in the community in 2021

While all the boroughs have followed similar trends, rates of PCR-confirmed cases have varied, with no single borough seeing consistently higher or lower rates.

Vaccine uptake

Vaccine uptake is lower in London than in England. As of early Feb 2022, Camden has the lowest uptake (65% first dose, 58% second, 41% third/booster), Enfield has very similar levels to London (69%, 63%, 44%), and Barnet has slightly higher figures (72%, 67%, 49%). By contrast, the England rates are 91%, 84%, 65%.

What do we know so far? Post COVID Syndrome (PCS)

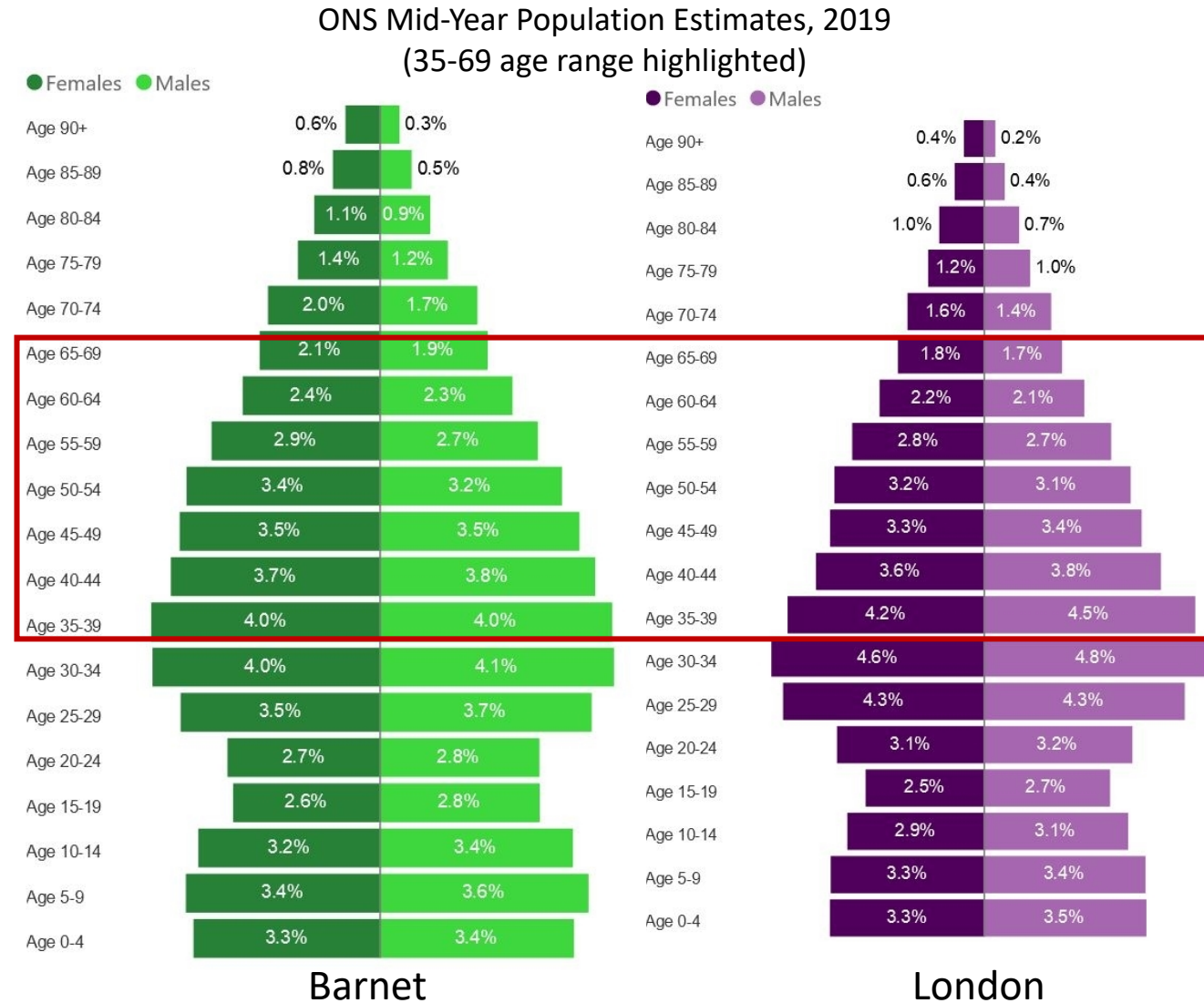


- From Nov 2021-Feb 2022 Barnet had the greatest proportion of GP-recorded post-COVID syndrome (PCS) in London (5.8%)
- In the 2021 ONS PCS projections, Barnet was expected to have the highest proportion of PCS in London (4.43%). However, Barnet's GP-recorded PCS makes up an even higher proportion of total PCS cases in London (5.8%). This is a percentage point difference of +1.37%.
- The difference as a percentage point between the ONS projection and the GP-recorded PCS share of Long COVID for the London region was greatest for Kingston Upon Thames (+1.96%) and Sutton (+1.92%), followed by Barnet (+1.37%)
- The percentage of the local authority population with PCS (ONS 2021 projection) for Barnet is 0.47%. This is similar to Kingston Upon Thames, Richmond Upon Thames, Sutton & Hounslow. The OHID Needs Assessment did not provide a GP-recorded PCS figure for percentage of the population with PCS and it did not provide a raw figure for GP-recorded PCS. Therefore, no comparison between the ONS projection and GP-recorded figure is possible at this time.
- ONS Infection survey data predicts that 7.5% of people who test positive for COVID-19 self-report symptoms of PCS (August 2021).

Post COVID-19 Syndrome Non-Modifiable Risk Factors

Barnet's older, less deprived population have lower rates of some of the known risk factors for PCS. The borough has a slightly higher proportion of white residents and rates of recorded PCS are known to be highest in those from a white background.

Risk Factor	Barnet	London Region
Age: <i>Prevalence of PCS is greatest in those aged 35-69 years</i>	<ul style="list-style-type: none"> 50.62% of the population is between the ages of 35-69 (ONS, 2019). Of those working age, there is a larger proportion who are 50-69 yrs compared to London. 	<ul style="list-style-type: none"> 57.95% of the population is between the ages of 35-69 (ONS, 2019) Compared to Barnet, there is a larger proportion who are 35-50 yrs compared to Barnet.
Ethnicity: <i>There is ongoing research to understand the relationship. At present, rates of recorded PCS are highest in those from a white background.</i>	<ul style="list-style-type: none"> 64% of Barnet's Population is white (ONS, 2019). The proportion of the population that is white increases with age 	<ul style="list-style-type: none"> 60% of London's population is white (ONS, 2019). The proportion of the population that is white increases with age
Deprivation: <i>PCS prevalence is predicted to be higher in more deprived areas.</i> <i>*Healthcare utilisation is higher in less deprived areas which may impact recorded prevalence</i>	<ul style="list-style-type: none"> Barnet has less income deprivation than 20 London boroughs and more income deprivation than 11 (IMD, 2019) 	



(List of Risk factors taken from the OHID London Long COVID Needs Assessment, 2022)

Post COVID-19 Syndrome Risk Factors

Barnet has higher rates of some modifiable risk factors (coronary heart disease, hypertension) and similar rates of others (high BMI, diabetes, mental health need)

Caveat: “Risk factors” may not be causal – they may indicate a shared cause

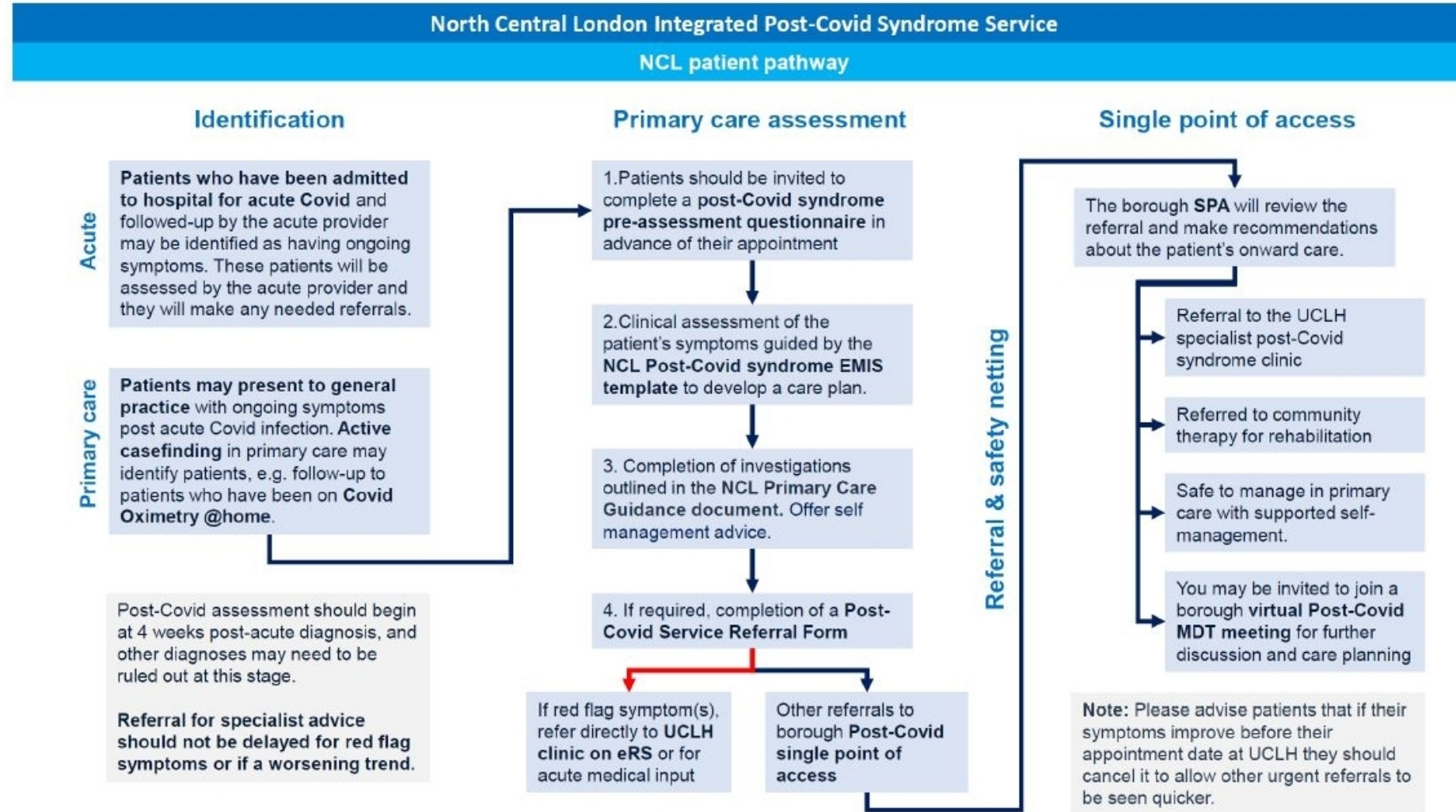
Modifiable risk factors		
Risk Factor	Barnet	London Region
Obesity: <i>A higher BMI has been associated with higher rates of PCS</i>	57.7% of residents are overweight or obese (similar to London)	55.7% of residents are overweight or obese
Pre-existing Health Conditions: <i>Moderate evidence to support that hypertension was the most common comorbidity. Diabetes and high cholesterol also have an increased risk of PCS.</i>	<ul style="list-style-type: none"> 2.4% of Barnet residents have coronary heart disease (higher than London) 6.6% have diabetes (similar to London) 11.5% have hypertension (higher than London) 	<ul style="list-style-type: none"> 1.9% of residents have coronary heart disease 6.7% of residents have diabetes 10.8% of residents have hypertension
Mental health: <i>Increasing evidence to support poor mental health as being part of PCS.</i>	<ul style="list-style-type: none"> 1.8% of Adults are in contact with secondary mental health services (similar to London) 	<ul style="list-style-type: none"> 2.2% of Adults are in contact with secondary mental health services

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Post COVID-19 Syndrome Other Risk Factors

- Individuals who reported more than five symptoms in the first week of active COVID were significantly more likely to experience PCS (ONS).
- PCS prevalence is estimated to be higher in women than men (ONS).
- ONS analysis from the COVID-19 Infection survey found that 1st vaccine dose reduced odds of self-reported PCS by 12.8% and the 2nd vaccine dose reduced odds by a further 8.8% (Sudre et al.) Barnet's vaccine uptake rates are slightly higher than London's.

What services are available in Barnet?



Nationally, it has been found that PCS care can be complex with significant variation between areas. The [BMC's Health Service Research](#) found that 32% of those with self-reported PCS had not been able to access all of the healthcare they thought they needed. Furthermore, many patients with PCS expressed concerns that their primary care clinician did not recognise their condition, did not know how to diagnose it and did not know how to manage it.

Feedback from Barnet's PCS Clinic Staff

Data collection & reporting:

- Clinicians raised concerns about how Long COVID was being measured (GP-recorded, those accessing services, ONS projections & NHS projections will all differ and have varying degrees of accuracy)
- Clinicians raised concerns that Barnet PCS data is missing from the NCL rapid needs assessment and service update meetings (all other NCL boroughs have data reported). Work is ongoing to understand why this might be.
- Identified need to work closely with NCL CCG when trying to understand the NCL pathway and what the main challenges are

How do nationally identified risk factors compare with those seen in the community clinic?

**please note that no service data was shared. Statements below were anecdotally shared.*

- Almost everyone is in the 25-50 age range – very few in that older working age group, and maybe one or two over 70
- “Not just white women” using service – range in terms of ethnicity, gender

What makes Barnet different?

- Anecdotally, clinicians felt that in NCL, Barnet has the greatest demand for PCS services
- Clinicians felt Barnet's referral pathway to the community service was significantly easier than in other boroughs – more liberal about who they'll accept, better staffing levels and shorter wait times (3-4 weeks rather than 6 months)
- The community clinic has a strong relationship with primary & acute care. For example, an acute trust staff member said it was too complex for them to refer to the PCS community clinic directly, whereas in Barnet, the PCS clinic receives referrals directly from acute care.
- Strong links with UCLH – Community clinic staff speaks highly of referral pathways into UCLH, whereas anecdotally others have experienced high barriers to being seen by UCLH