

# Health & Well Being Board Community Sub Group

## 1<sup>st</sup> March 2022

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## Dr Dagmar Zeuner, Director of Public Health

Merton Public Health Intelligence Team

1<sup>st</sup> March 2022

Produced by Thomas Fraser & Amira Yunusa

**Due to the recent change in reporting (as of 31<sup>st</sup> January 2022) there are an additional 8% of cases identified in Merton for the duration of the pandemic. The data now includes possible re-infections (people who test positive again after 90 days).**

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# Summary of COVID cases, PCR testing, deaths, vaccinations and inpatient statistics

Domain	Indicator	Merton (previous 7 days)	Merton change	London (previous 7 days)	London Change
<b>Regional marker</b>	R value (11 <sup>th</sup> February)	-	-	0.8 to 1.1 (0.6 to 0.9)	↑
<b>Cases over last week</b> (5 <sup>th</sup> – 11 <sup>th</sup> Feb)	New cases (week ending 11 <sup>th</sup> Feb)	1,111 (1,642)	↓	36,585 (57,839)	↓
	7 day rate (per 100,000)	694.6 (947.4)	↓	552.8 (764.9)	↓
	7 day rate aged 60+ (per 100,000)	512.5 (506.9)	↑	343.6 (403.8)	↓
<b>Pillar 1 &amp; 2 PCR tests over 7 days</b> (27 <sup>th</sup> Jan – 2 <sup>nd</sup> Feb)	Number of people tested	7,465 (8,091)	↓	330,902 (351,461)	↓
	Test positivity %*	17.0% (17.6%)	↓	14.1% (15.3%)	↓
<b>Deaths</b> (29 <sup>th</sup> Jan - 4 <sup>th</sup> Feb)	Number of COVID-19 registered deaths	1 (6)	↓	135 (190)	↓
<b>Vaccinations</b> (as of 16 <sup>th</sup> Feb)**	Vaccine uptake in 12–15 years (% who have had at least 1 dose)	48.3% (47.9%)	↑	42.4% (41.9%)	↑
	Vaccine uptake in 18–24 years (% who have had 3 doses)	30.7% (30.1%)	↑	25.0% (24.4%)	↑
	Vaccine uptake in 50+ (% who have had 3 doses)	71.8% (71.6%)	↑	69.7% (69.6%)	↑
<b>Current inpatients in SWL hospitals</b> (as of 8 <sup>th</sup> Feb)	COVID inpatients	502 (502)	→	2291 (2468)	↓
	COVID patients in mechanical ventilator beds	15 (15)	→	139 (159)	↓

Please note: reporting periods are based on the latest data available from different sources.

\*Test positivity refers to the percent of people that tested positive, therefore if someone had multiple tests or tested positive multiple times in a reporting week they are only counted once.

\*\*Denominator based on NIMS population.

**Due to the recent change in reporting (as of 31<sup>st</sup> January 2022) there are an additional 8% of cases identified in Merton for the duration of the pandemic. The**

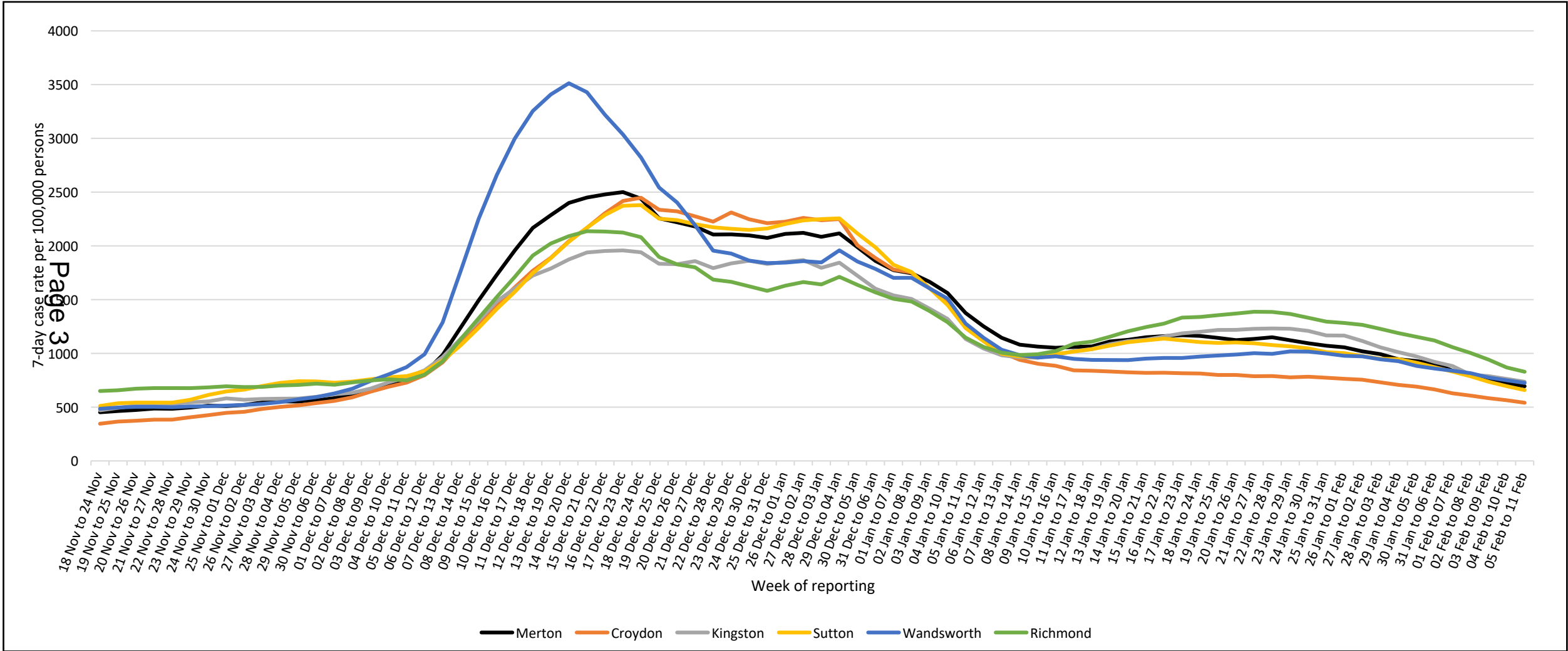
**data now includes possible re-infections (people who test positive again after 90 days).** Data as of 16<sup>th</sup> Feb; contains public sector information licensed under the Open Government Licence v3.0.

# Rolling 7-day case rate per 100,000 people in Merton compared to SW London boroughs

Source: Coronavirus (COVID-19) in the UK (<https://coronavirus.data.gov.uk/>)

Reporting frequency: Daily

**Key message:** Merton ranks 3 out of 6 for case rate per 100,000 among SW London boroughs



Due to the recent change in reporting (as of 31<sup>st</sup> January 2022) there are an additional 8% of cases identified in Merton for the duration of the pandemic. The data now includes possible re-infections (people who test positive again after 90 days).

Data as of 16<sup>th</sup> Feb (rates are presented up to and including 11<sup>th</sup> February). Contains public sector information licensed under the Open Government Licence v3.0.

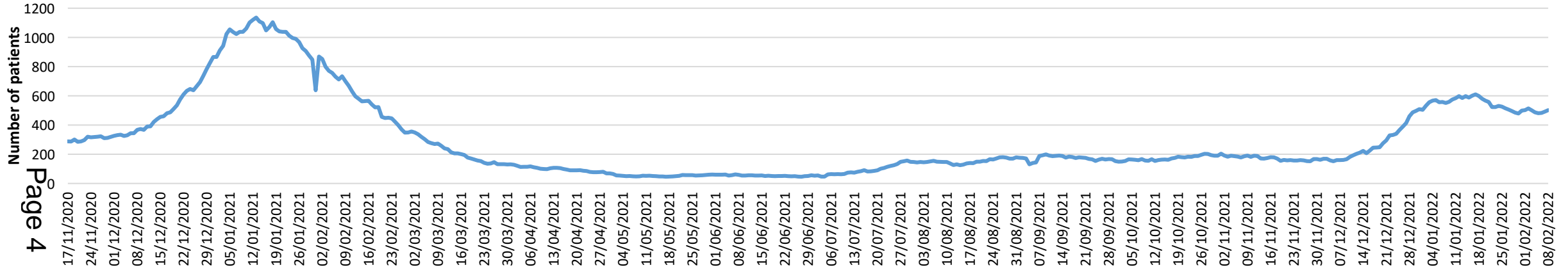
# COVID-19 hospital indicators for South West London

Source: Coronavirus (COVID-19) in the UK (<https://coronavirus.data.gov.uk/>)

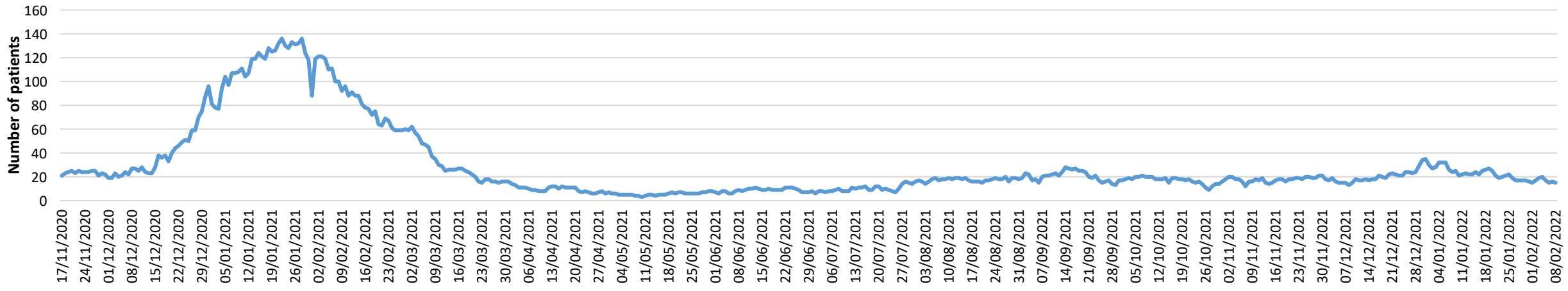
Reporting frequency: daily but inconsistent updates

**Key message:** The number of confirmed COVID-19 inpatients and the number of ventilated patients remains steady

### Confirmed COVID-19 inpatients in Southwest London NHS trust hospitals (Daily count of confirmed COVID-19 patients in hospital at 8am)



### Confirmed number of COVID-19 inpatients in mechanical ventilator beds in Southwest London NHS trusts

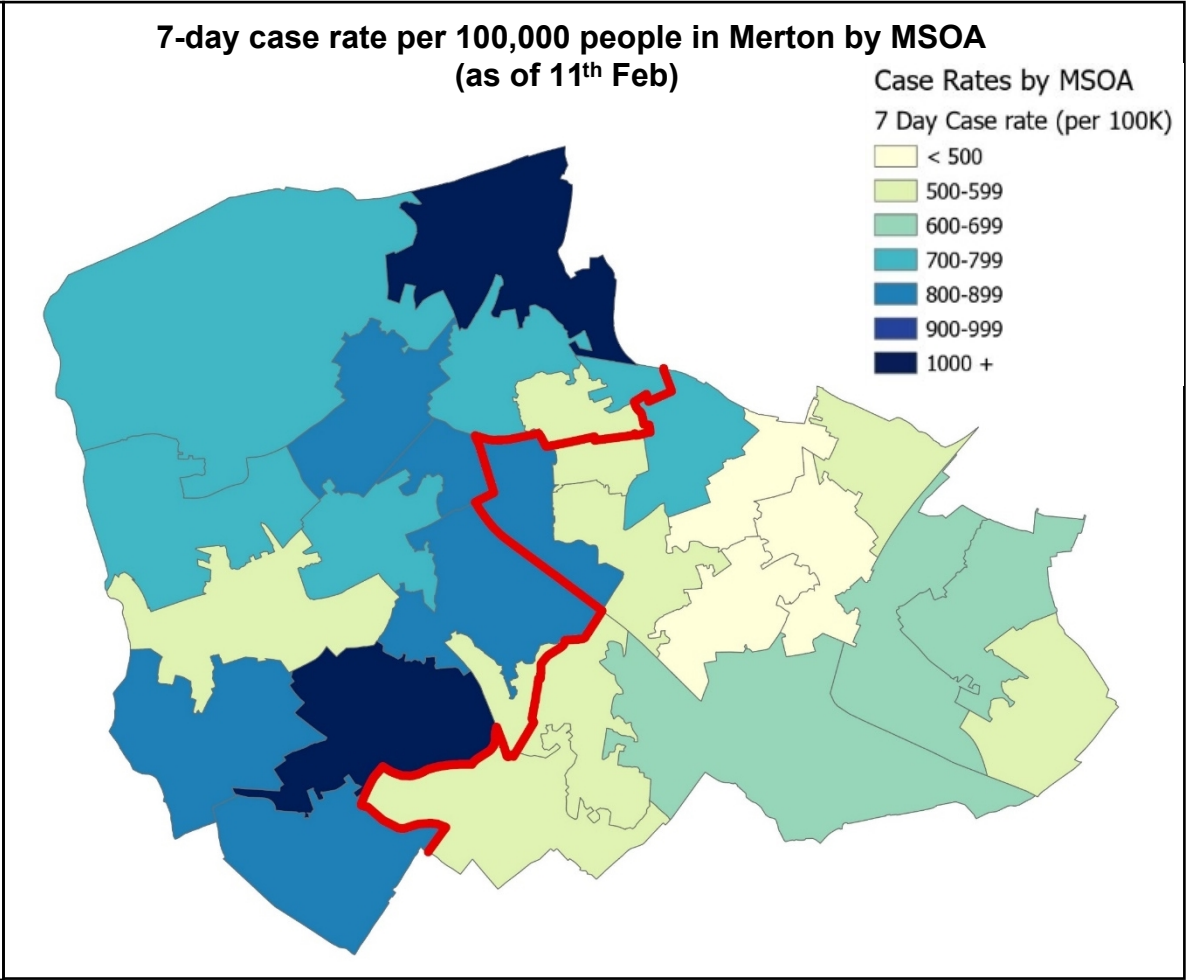
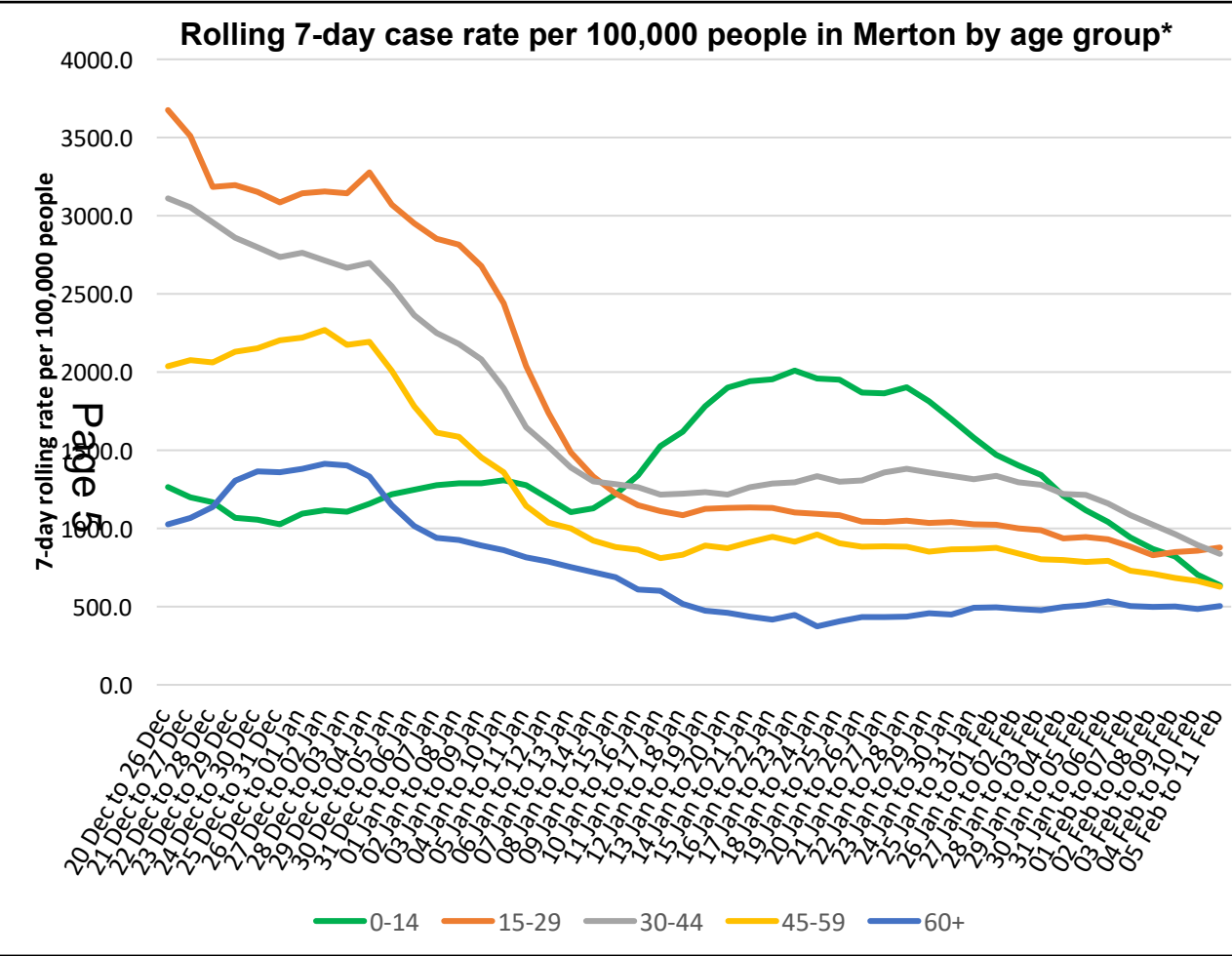


# COVID-19 cases in Merton by age and geography

Source: Coronavirus (COVID-19) in the UK (<https://coronavirus.data.gov.uk/>)

Reporting frequency: daily

**Key message:** case rates are highest among 15-29 years and 30-44 years and are higher in west versus east Merton



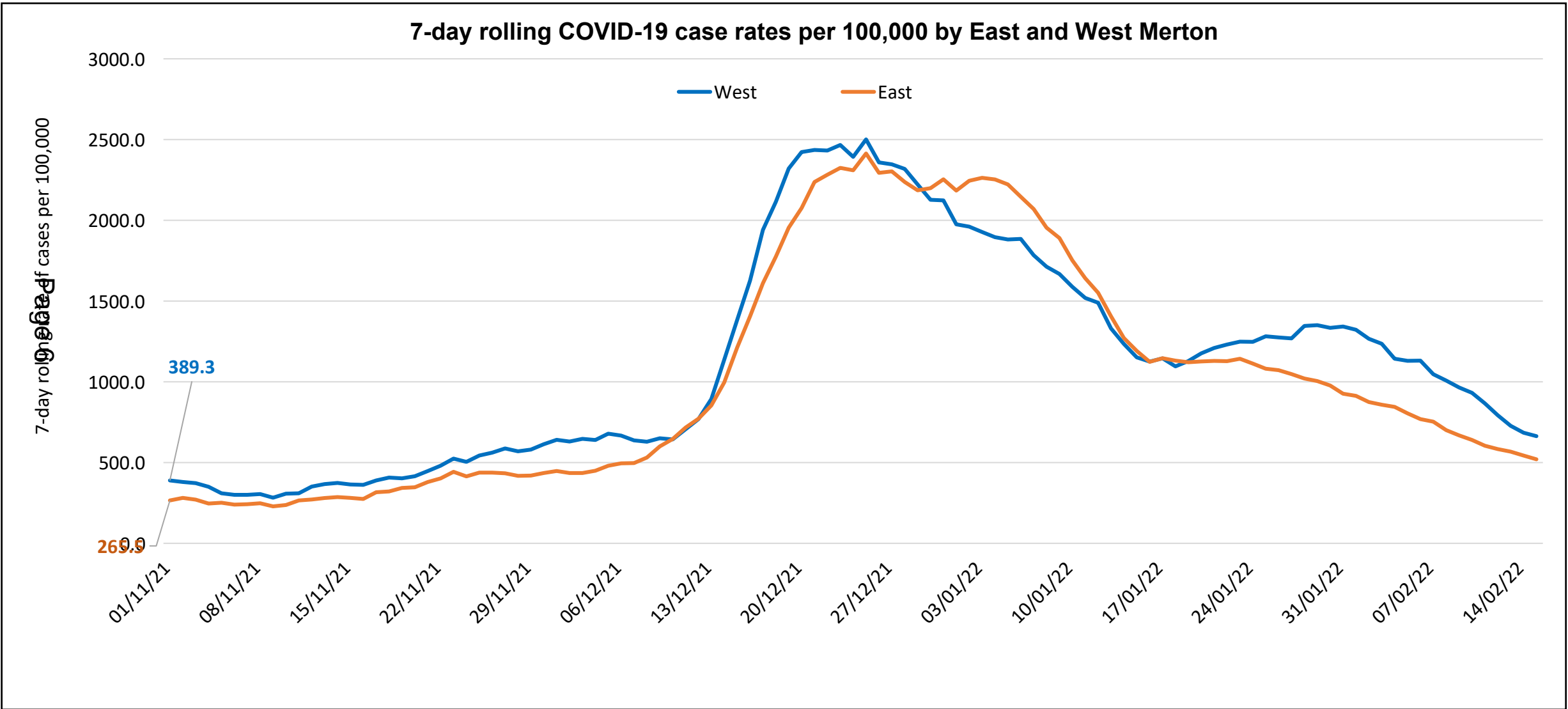
\*Rolling 7-day case rate per 100,000 is calculated using the number of people testing positive (source: Coronavirus (COVID-19) in the UK; <https://coronavirus.data.gov.uk/>) and Merton population estimates (source: GLA Housing-led identified capacity model estimates for 2021).

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# COVID-19 7-day case rates in East and West Merton

Source: UKHSA Covid-19 Situational Awareness Explorer

Reporting frequency: daily



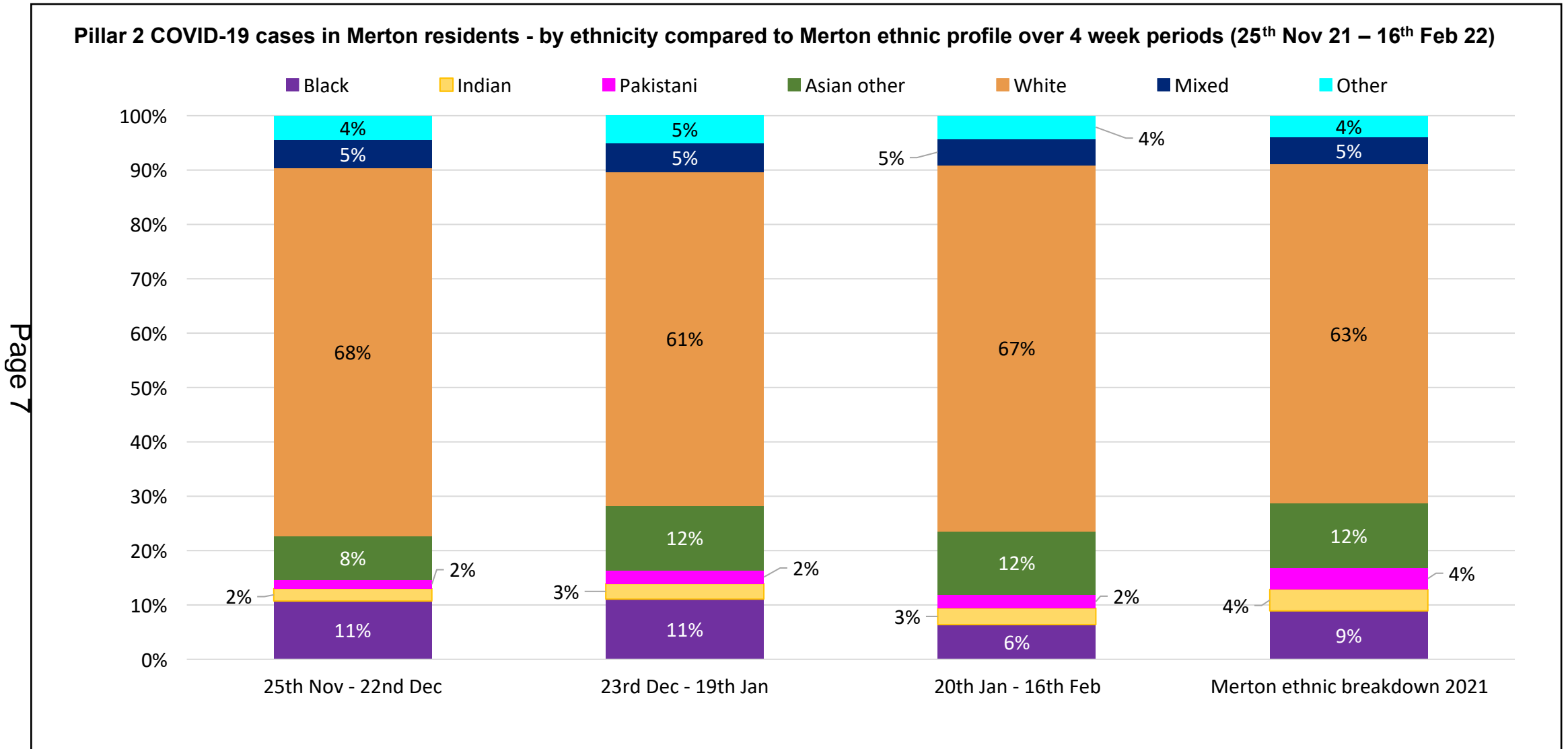
Due to the recent change in reporting (as of 31<sup>st</sup> January 2022) there are an additional 8% of cases identified in Merton for the duration of the pandemic. The data now includes possible re-infections (people who test positive again after 90 days).

Data as of 16<sup>th</sup> Feb (rates are presented up to and including 15<sup>th</sup> Feb)

# COVID-19 cases in Merton by ethnicity

Source: UKHSA Covid-19 Situational Awareness Explorer

Reporting frequency: daily



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Due to the recent change in reporting (as of 31<sup>st</sup> January 2022) there are an additional 8% of cases identified in Merton for the duration of the pandemic. The data now includes possible re-infections (people who test positive again after 90 days).

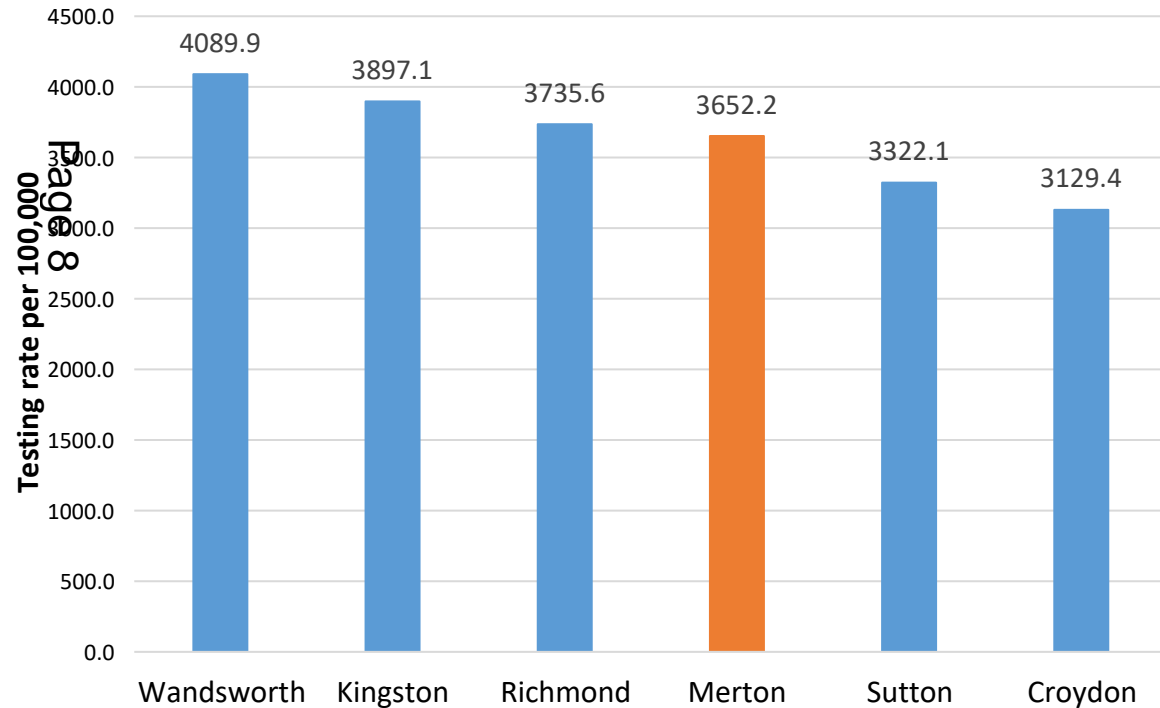
# COVID-19 testing & positivity in Merton compared to SW London boroughs

Source: UKHSA Weekly statistics for NHS Test and Trace (<https://www.gov.uk/government/collections/nhs-test-and-trace-statistics-england-weekly-reports>)

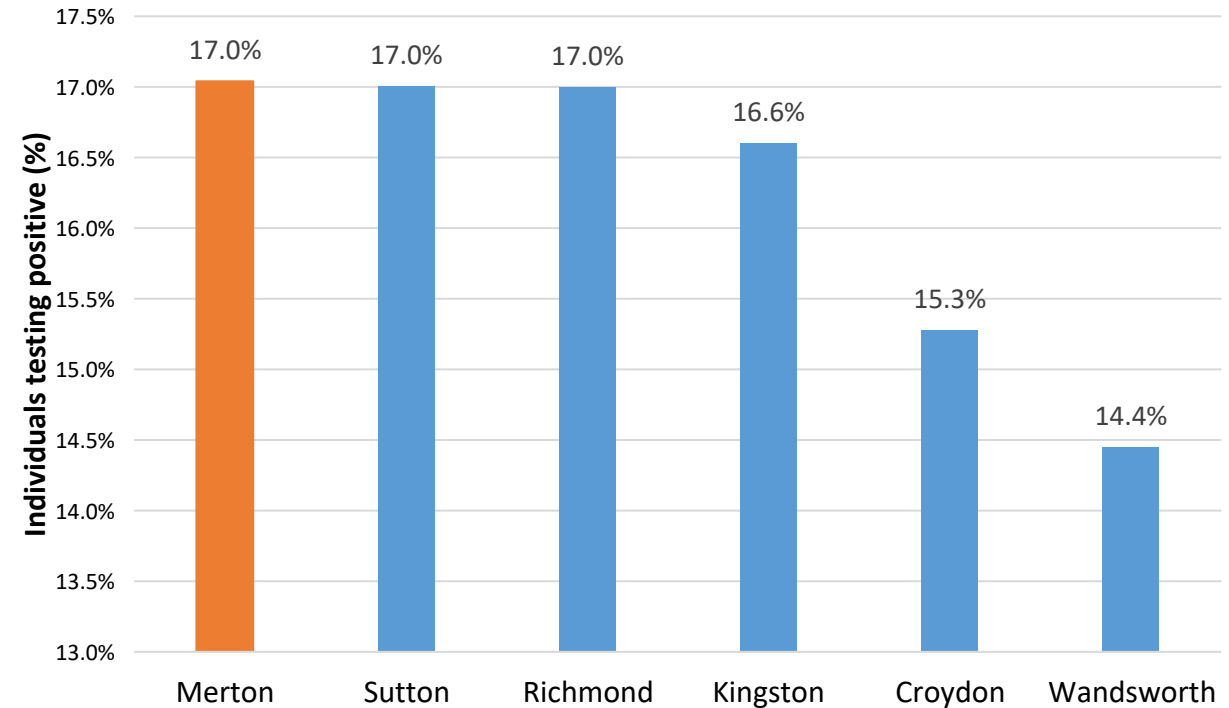
Reporting frequency: weekly

**Key message:** Merton ranks 4 out of 6 for testing rate per 100,000 people and has high positivity equal to Sutton and Richmond compared to SWL boroughs

**Weekly testing rate\* per 100,000 people in SWL  
for week ending 2<sup>nd</sup> Feb  
(Pillar 1 & 2, PCR in all ages)**



**Weekly test positivity in SWL  
for week ending 2<sup>nd</sup> Feb  
(Pillar 1 & 2, PCR in all ages)**



\*Testing rate per 100,000 is calculated using the number of people tested (source: UKHSA weekly statistics for NHS Test and Trace report) and SWL borough population estimates (source: GLA Housing-led identified capacity model estimates for 2021).

Please note both the test rates and positivity presented on this slide are person-based, not test-based (if someone had multiple tests or tested positive multiple times in a reporting week they are only counted once). Data as of 16<sup>th</sup> Feb (date of latest available UKHSA report published on 10<sup>th</sup> Feb). Contains public sector information licensed under the Open Government Licence v3.0.



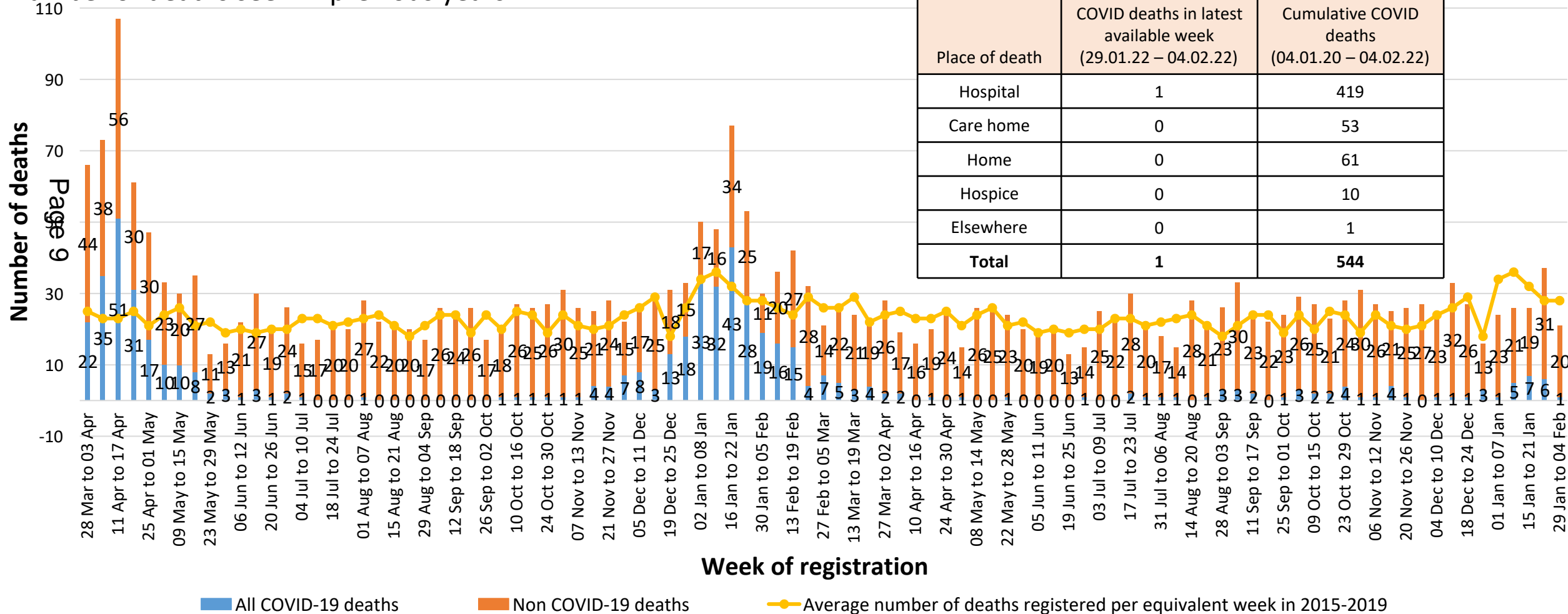
# Number of deaths of Merton residents by week of registration

Source: ONS death registrations and occurrences by local authority and health board

(<https://www.ons.gov.uk/peoplepopulationandcommunity/healthandsocialcare/causesofdeath/datasets/deathregistrationsandoccurrencesbylocalauthorityandhealthboard>)

Reporting frequency: Weekly

**Key message:** There was a slight increase in COVID-19 deaths registered during January though this did not exceed the average number of deaths seen in previous years

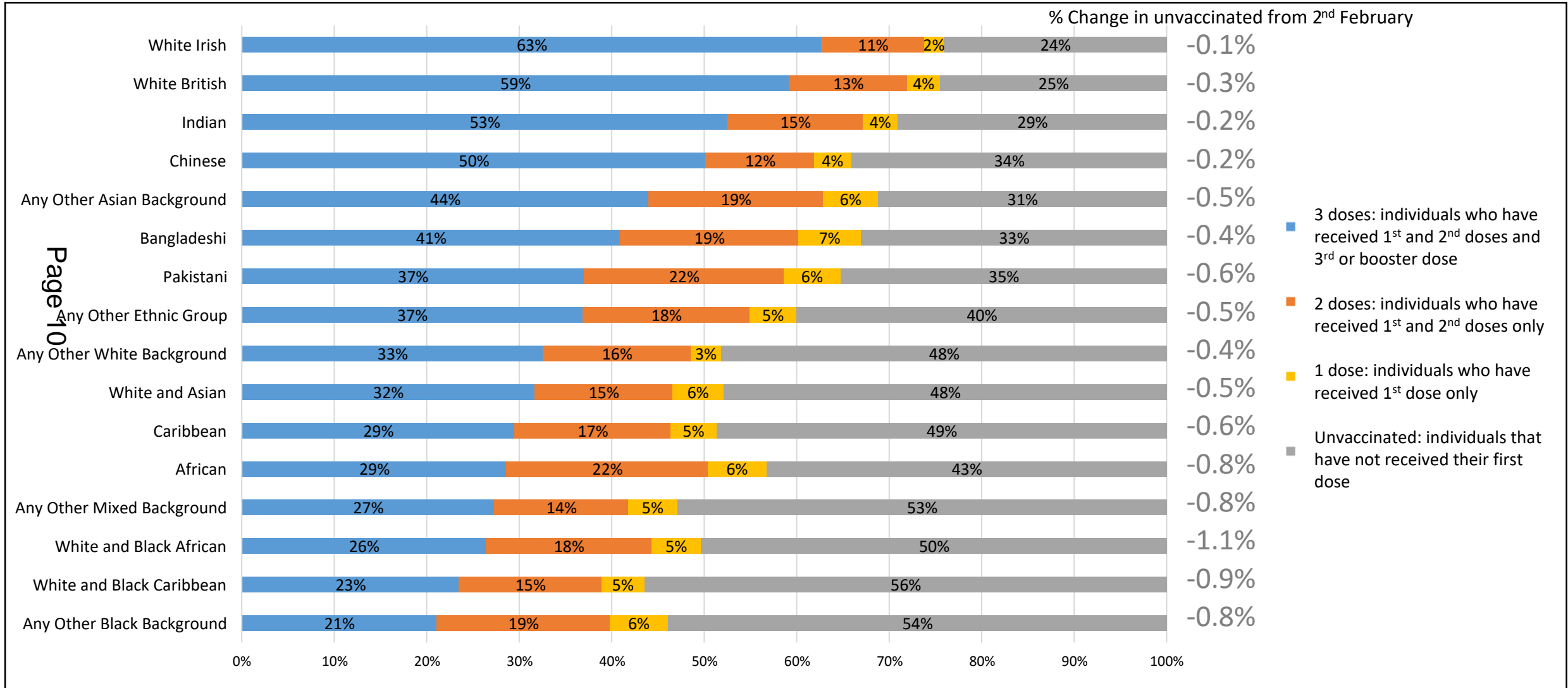


# COVID-19 vaccination uptake by ethnicity

Source: UKHSA Covid-19 Situational Awareness Explorer

Reporting frequency: Daily

**Key message:** The unvaccinated population continues to decrease across all ethnic groups



Data using NIMS population for 12+ year olds as the denominator.

Data as of 16<sup>th</sup> Feb

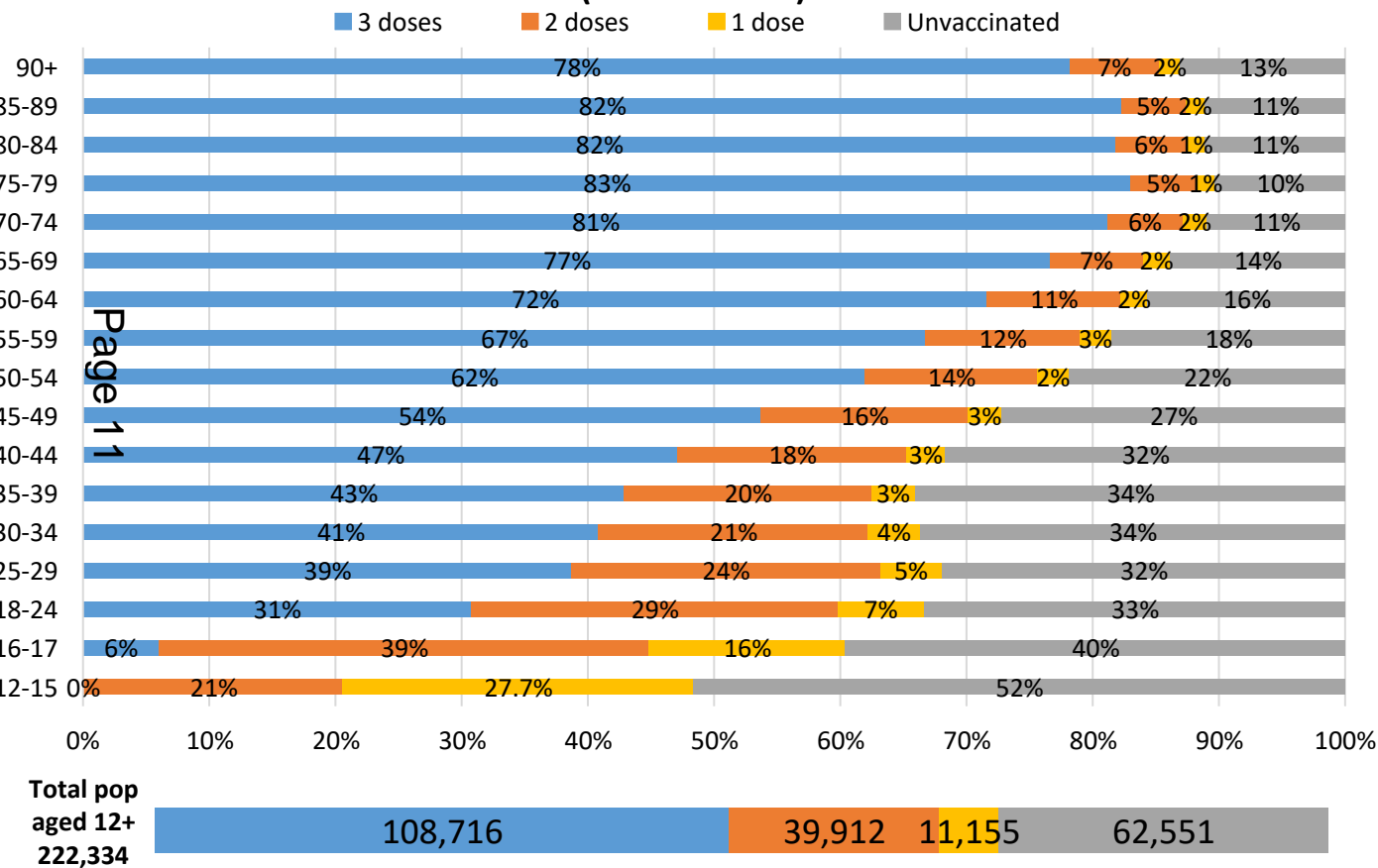
# COVID-19 vaccination uptake by age group and geography

Source: Coronavirus (COVID-19) in the UK (<https://coronavirus.data.gov.uk/>) and NHS England COVID-19 vaccinations report (<https://www.england.nhs.uk/statistics/statistical-work-areas/covid-19-vaccinations/>)

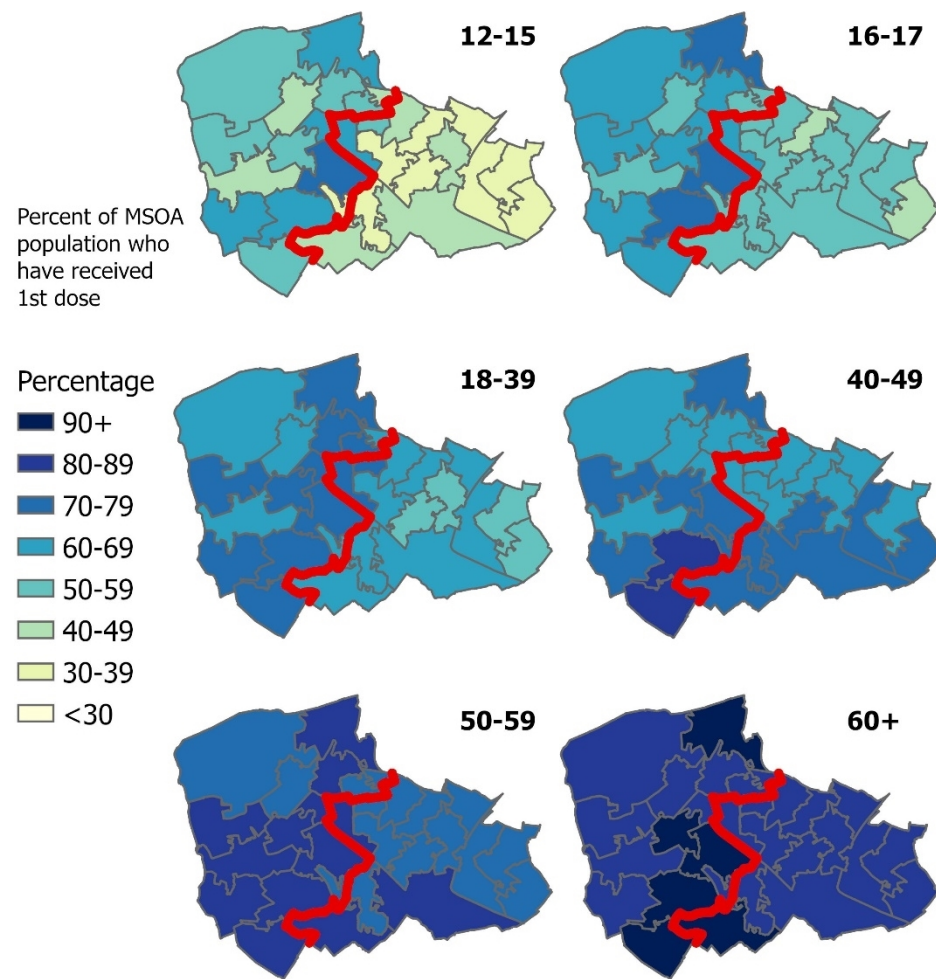
Reporting frequency: Weekly

**Key message:** Vaccination uptake is lowest among younger age groups

**Vaccine uptake by age band among Merton residents\* (as of 15<sup>th</sup> Feb)**



**Percentage of Merton residents by age group and MSOA that have received at least 1 dose of Covid-19 vaccination**



\*Data using NIMS population as denominator. 3 doses: individuals who have received 1<sup>st</sup> and 2<sup>nd</sup> doses and 3<sup>rd</sup> or booster dose. 2 doses: individuals who have received 1<sup>st</sup> and 2<sup>nd</sup> doses only. 1 dose: individuals who have received 1<sup>st</sup> dose only. Unvaccinated: individuals that have not received their first dose. Fewer than 1% of 12-15 year olds have received a booster dose.

# COVID-19 Update

## Merton Vaccination Equity Update

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Health and Wellbeing Board Community Subgroup

1<sup>st</sup> March 2022



South West London  
Clinical Commissioning Group



KEEP  
MERTON  
SAFE



# Merton COVID-19 Vaccination Equity Framework

**Aim: To achieve equitable COVID-19 vaccine uptake for Merton residents**

**Approach: Promote equitable vaccination in Merton via four enablers:**

## 1. Reducing barriers to access

Make access to vaccines as easy and convenient as possible.

## 2. Communication and engagement

Working with communities, including the underserved; strength-based approach; co-production.

## 3. Partnerships and governance

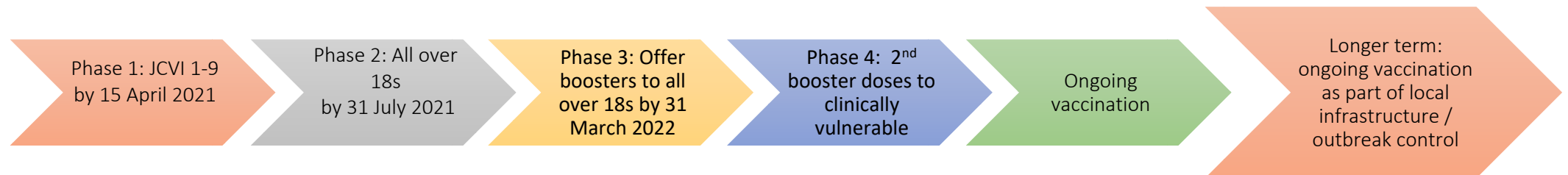
Commitment to whole systems working – recognising no one partner can achieve effective vaccine equity alone.

## 4. Make best use of data, information and insight

Evidence-based interventions; learning from data (qualitative and quantitative); transparency - sharing with the public.

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### Vaccination Timeline:



# COVID-19 Vaccination Guidance Update (updated 23/02/2022)

## *Clinically Vulnerable:*

- **Children 5-11 at high risk:** Eligible for first and second dose. Interval between primary doses is 8 weeks. Booked locally by registered GP practice.
- **Young people 12-17 at high risk:** Eligible for first, second and booster dose. Interval between primary doses is 8 weeks and booster 12 weeks from 2<sup>nd</sup> dose. Can book on national NHS booking system.
- **People aged 5 and over living with someone immunosuppressed:** Eligible for first dose and second dose at 8 weeks.
- **Immunosuppressed 12+:** Eligible for a 3<sup>rd</sup> dose 8 weeks from 2<sup>nd</sup> dose and then a booster dose 12 weeks from 3<sup>rd</sup> dose.

## *Healthy children and young people:*

- **12-17 year olds:** Eligible for a first dose or second dose. Second dose offered 12 weeks from the first dose or 12 weeks after positive COVID test, whichever is later. Currently not eligible for booster programme.
- **16-17 year olds:** Eligible for a booster dose 12 weeks from the 2<sup>nd</sup> dose.

## *Adults:*

- **People 18+ year olds:** Eligible for first and second dose. Interval between primary doses is 8 weeks. Eligible for booster dose at 12 weeks.

## *Recent Changes:*

- No longer a requirement for healthcare workers and adult social care workers to be fully vaccinated by the 1<sup>st</sup> April 2022 deadline.

## *NEW Cohorts being introduced in April 2022:*

- **Healthy 5-11 year olds:** Eligible for first and second dose. Interval between primary doses is 12 weeks.
- **Clinically vulnerable and 75+:** Eligible for a 4<sup>th</sup> (2<sup>nd</sup> booster) dose 6 months from last booster dose.

# Vaccination uptake by age group

ONS as of 24/02/2022

**Overall: 418,919** Vaccinations given in Merton

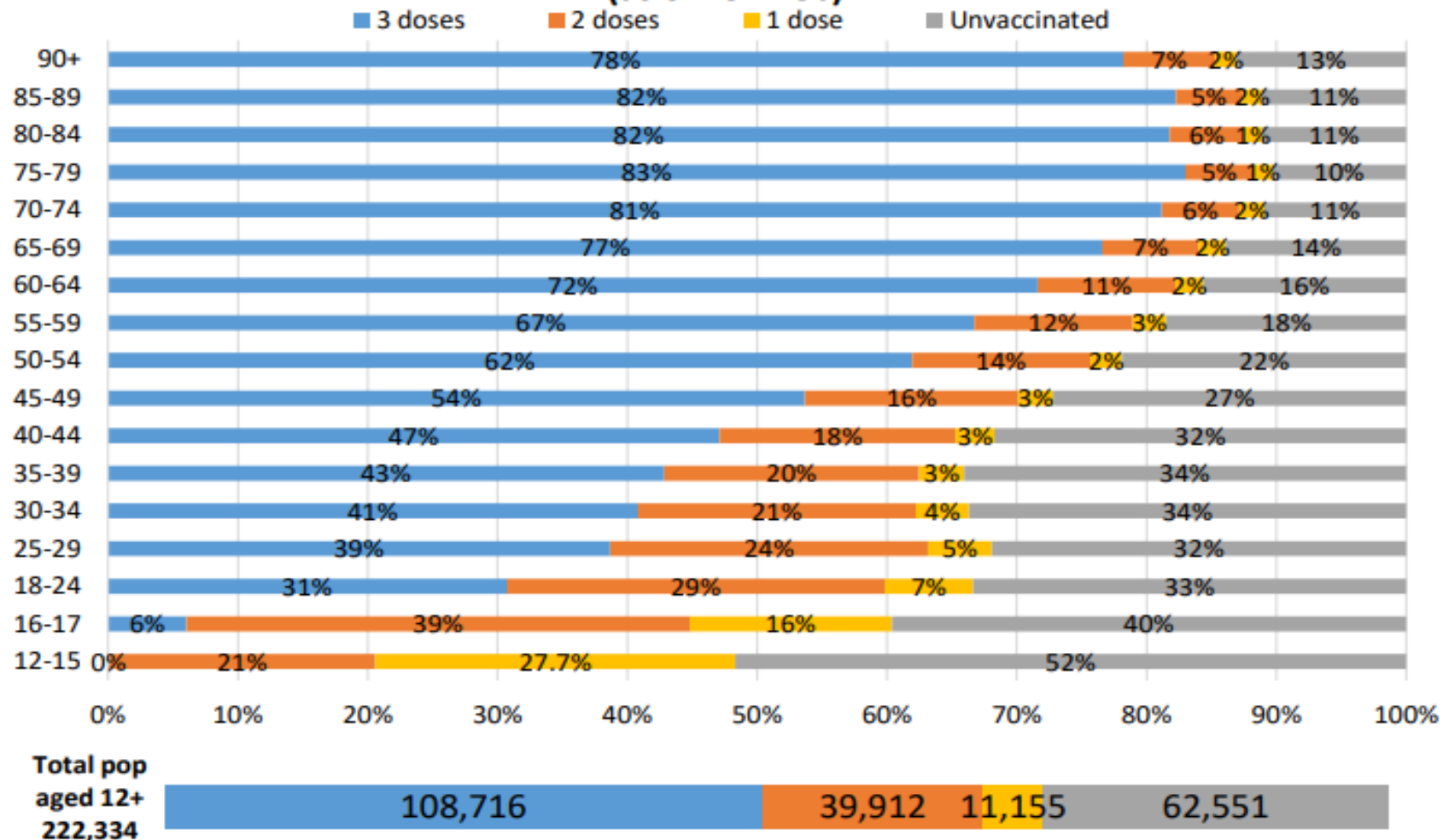
**72%** of residents 12+ have received at least the 1<sup>st</sup> dose of the COVID vaccine (**159,982 residents**)

**67%** of residents 12+ have received 2<sup>nd</sup> doses of the COVID vaccine (**149,158 residents**)

**49.4%** of residents 12+ have received a booster/3<sup>rd</sup> dose of the COVID vaccine (**109,779 residents**)

**62,475 residents remain unvaccinated.**

**Vaccine uptake by age band among Merton residents\* (as of 15<sup>th</sup> Feb)**



\*Data using NIMS population as denominator. 3 doses: individuals who have received 1<sup>st</sup> and 2<sup>nd</sup> doses and 3<sup>rd</sup> or booster dose. 2 doses: individuals who have received 1<sup>st</sup> and 2<sup>nd</sup> doses only. 1 dose: individuals who have received 1<sup>st</sup> dose only. Unvaccinated: individuals that have not received their first dose. Fewer than 1% of 12-15 year olds have received a booster dose.

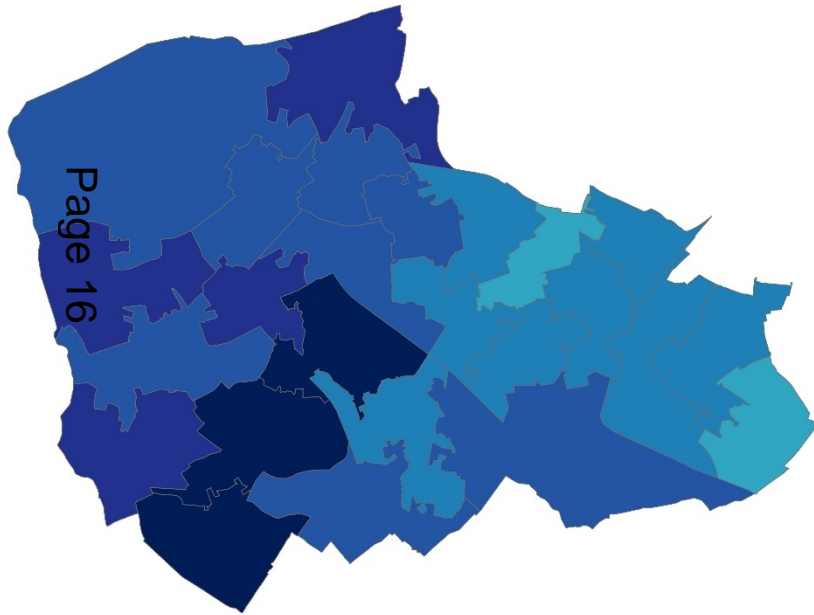
# COVID-19 vaccination uptake (12+ years) in Merton by MSOA

Source: Coronavirus (COVID-19) in the UK (<https://coronavirus.data.gov.uk/>)

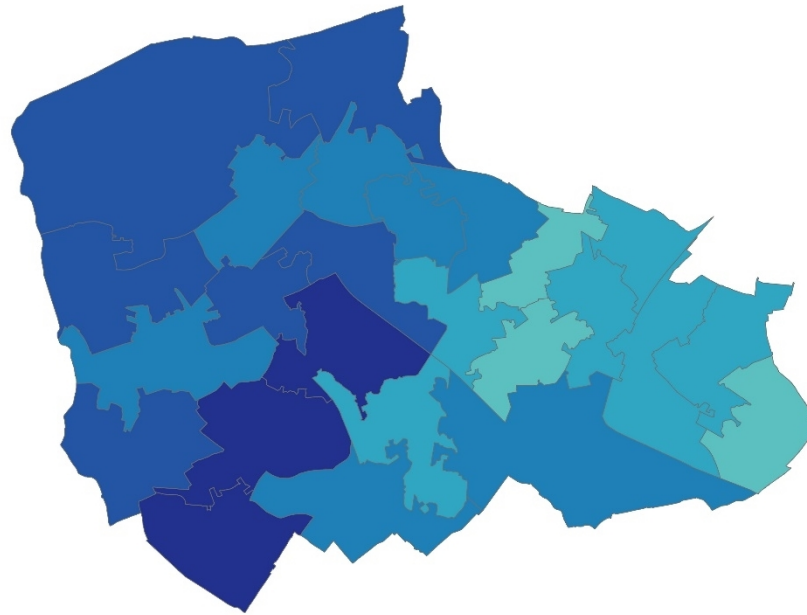
## Key messages

Vaccination uptake is higher in West versus East Merton, for all three doses

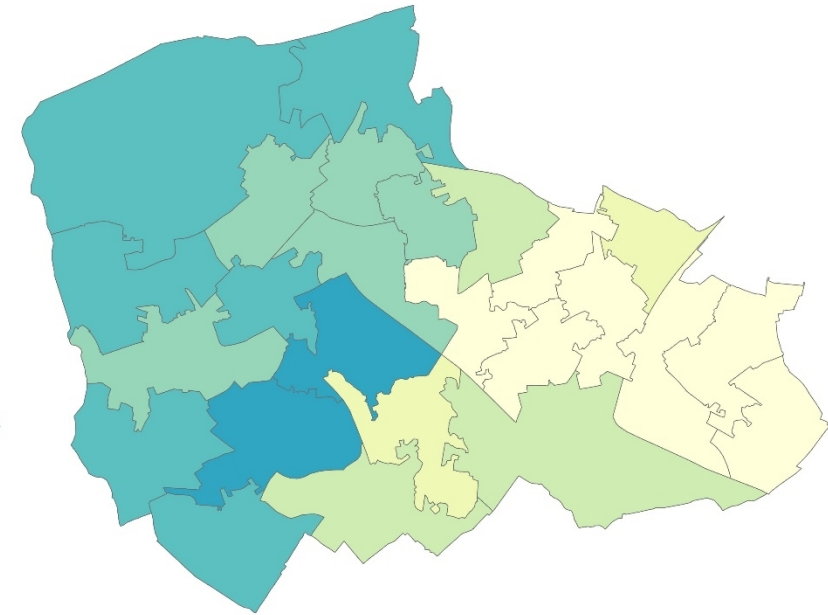
Percentage of Merton residents by age group and MSOA that have received at least 1 dose



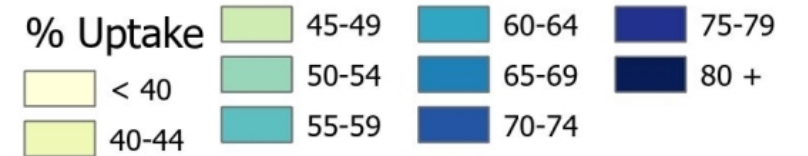
Percentage of Merton residents by age group and MSOA that have received at least 2 doses



Percentage of Merton residents by age group and MSOA that have received the booster dose



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Data using NIMS population for 12+ year olds as the denominator.  
NB: booster dose uptake is <1% among 12-15 years as of writing. Therefore, the map showing booster dose by MSOA will be skewed by the number of under 18 year olds there are in each MSOA.

Data as of 15<sup>th</sup> Feb  
Contains public sector information licensed under the Open Government Licence v3.0.



# COVID-19 vaccine uptake by dose in SWL boroughs – for everyone over 12 years 4<sup>th</sup> Mar 2022

Source: Coronavirus (COVID-19) in the UK (<https://coronavirus.data.gov.uk/>)

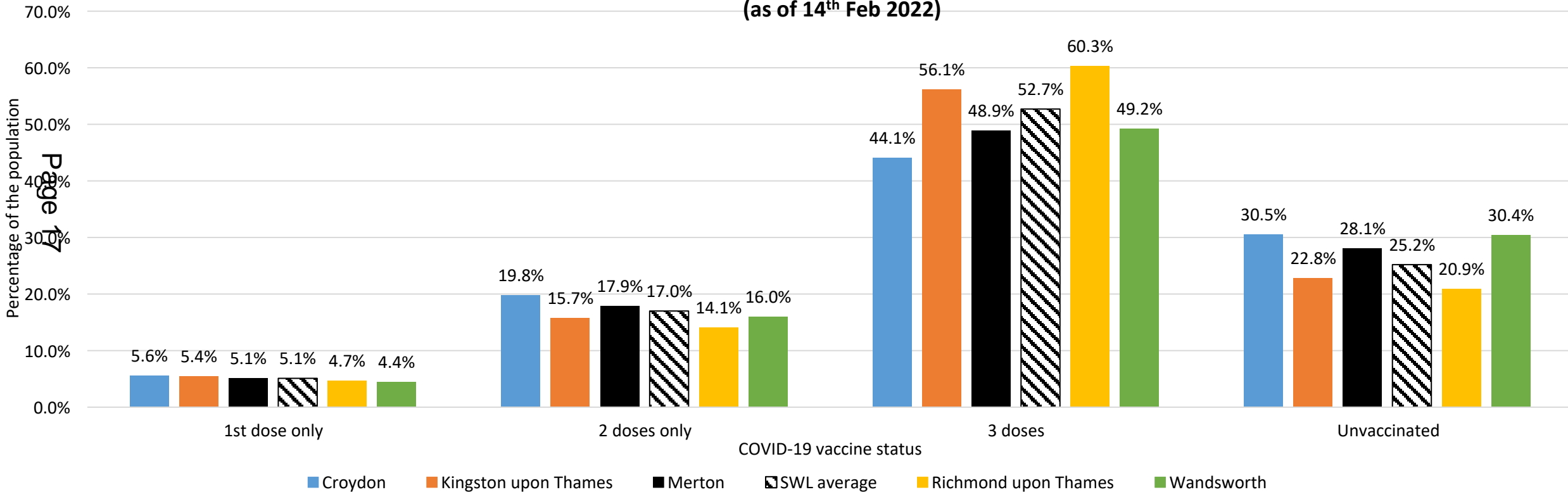
## Key messages

Uptake of dose 1 and dose 2 in Merton residents aged 12 or older is similar to the average uptake across SWL boroughs

Merton ranks 5th lowest out of SWL boroughs for dose 3 uptake

The percentage of unvaccinated residents is slightly higher in Merton compared to the average across SWL boroughs

**% of SWL boroughs by COVID-19 vaccination uptake among 12+ years**  
(as of 14<sup>th</sup> Feb 2022)



1 dose: individuals who have received 1<sup>st</sup> dose only

2 doses: individuals who have received 1<sup>st</sup> and 2<sup>nd</sup> doses only

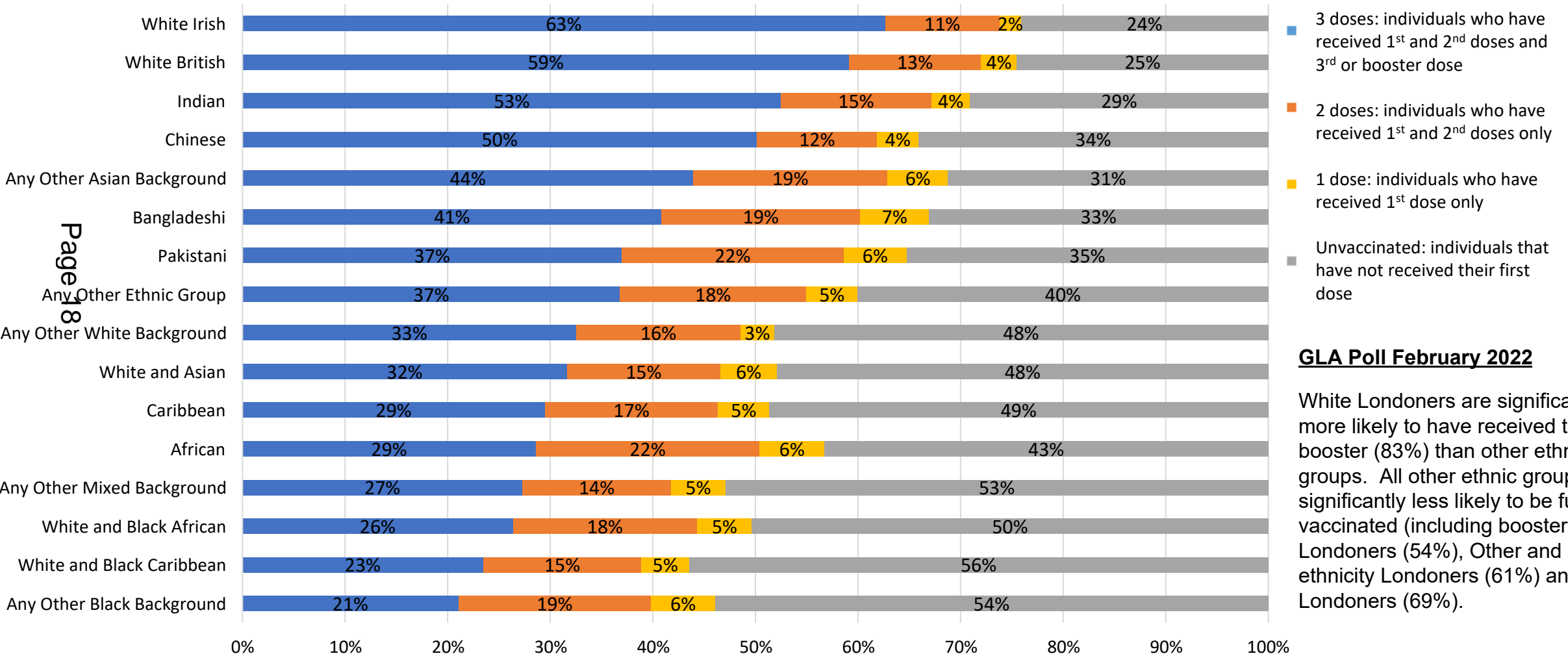
3 doses: individuals who have received 1<sup>st</sup> and 2<sup>nd</sup> doses and 3<sup>rd</sup> or booster dose

# COVID-19 vaccination uptake by ethnicity in Merton

Source: UKHSA Covid-19 Situational Awareness Explorer

## Key messages

The percentage of unvaccinated people is higher among ethnic minority residents compared to white Irish and white British residents



### GLA Poll February 2022

White Londoners are significantly more likely to have received the booster (83%) than other ethnic groups. All other ethnic groups are significantly less likely to be fully vaccinated (including booster); Black Londoners (54%), Other and Mixed ethnicity Londoners (61%) and Asian Londoners (69%).

# What has gone well and what have we learned?

## What went well?

**Engagement & Communication:** Supported different community organisations to address concerns around vaccine safety through webinars.

- Highlights includes working with BAME Voice, Polish Family Association and schools
- weekly COVID newsletter reaching over 100,000 residents

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## **Community Networks:**

- Young Inspectors
- COVID Champions: adults, young adults, under 18s
- **Merton Pandemic Community Outreach grant recipients.**
- **Primary and Secondary schools**
- Working with St Helier's antenatal team to promote COVID vaccinations.

## **Vaccine Accessibility:**

- Held over 40 pop up vaccination clinics since September 2021 in a range of community settings such as mosques, churches, temples, hostels and community centres - targeting those who are underserved.

## **Learning:**

- Engagement sessions with the local community couple with a pop-up vaccinations lead to higher conversion rates.

# Vaccine pop up sites

- New Horizon Centre – Pollards Hill
- Power Centre Church – Mitcham
- Nelson Health Centre – Wimbledon
- Baitul Futuh Mosque – Morden
- Holiday Inn Hotel – Colliers Wood
- St Olave's Church – Mitcham

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# What were the challenges and what have we learned?

## What were the challenges:

- Increasing vaccine uptake in younger age groups 12-30.
- Increasing vaccine uptake in young pregnant women.
- Increasing vaccine uptake east of the borough and in specific BAME groups.
- Immunising asylum seekers and homeless people.
- Identifying the most clinically vulnerable and prioritising immunisations for them, such as: housebound and care home patients.

## Learning:

- Continue to work with SWL CCG to support vaccine pop-up clinics.
- Increase the number of Pharmacy vaccination sites for long-term sustainability and improved access.

Going forward focus on targeted engagement with groups that have the lowest vaccine uptake using our following programmes of work:

- COVID champions programme
- Young inspectors programme
- We are also planning to commission Peer Education Project to work closely with 16-30 year olds.
- NEW Vaccine champions programme

# Community Vaccination Champions Programme

The 'Community Vaccine Champions' scheme has been funded by the Department for Levelling Up, Housing and Communities, providing £485k to promote vaccine uptake amongst hard-to-reach communities in Merton.

Funding is to support a range of activities, including: developing engagement strategies and developing a clinician contact service to improve COVID vaccine uptake.

## Three main components:

1. Network of networks – a network of trained champions who will meet on a regular basis to work with us to understand and then share key messages with their own networks. We will take a 'vaccination plus' approach utilising the opportunity of engagement with communities and individuals on vaccinations to also talk about COVID-19 resilience, recovery, wellbeing and prevention.
2. On-street engagement – trained and community led on-street engagement, delivering brief interventions and signposting to vaccination clinics. These interventions would again take a vaccination plus approach and contribute to reducing health inequalities.
3. Clinical contact – Enabling clinicians to attend vaccine champions sessions and for clinicians to attend our on-street engagement to access trusted advice and answer questions about vaccines.

# What are the new challenges?

- Downward trajectory for vaccination as most people who were keen on vaccination have had theirs
  - Challenges of reaching out to those who have made a conscious decision to not get vaccinated – this will be resource intensive
- Continued access to COVID-19 vaccination in light of vaccination sites closing down
- Delivery of any new autumn COVID-19 vaccination campaign if advised by the JCVI
- Development of detailed contingency plans to rapidly increase capacity if there was a surge or new variant of concern.

# Role of the HWBB going forward

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In light of the HWBB subgroup winding down, we recommend that the HWBB oversees the delivery of the vaccine equity plan.



# Long COVID

## Health and Wellbeing Board – Community Subgroup

1<sup>st</sup> March 2022

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### Purpose of this item:

- ✓ provide an update on estimates of the burden of Long COVID
- ✓ update the board on the emerging evidence and the 'known unknowns'
- ✓ set out the role for Primary Care of managing Long COVID
- ✓ discussion and proposed and next steps

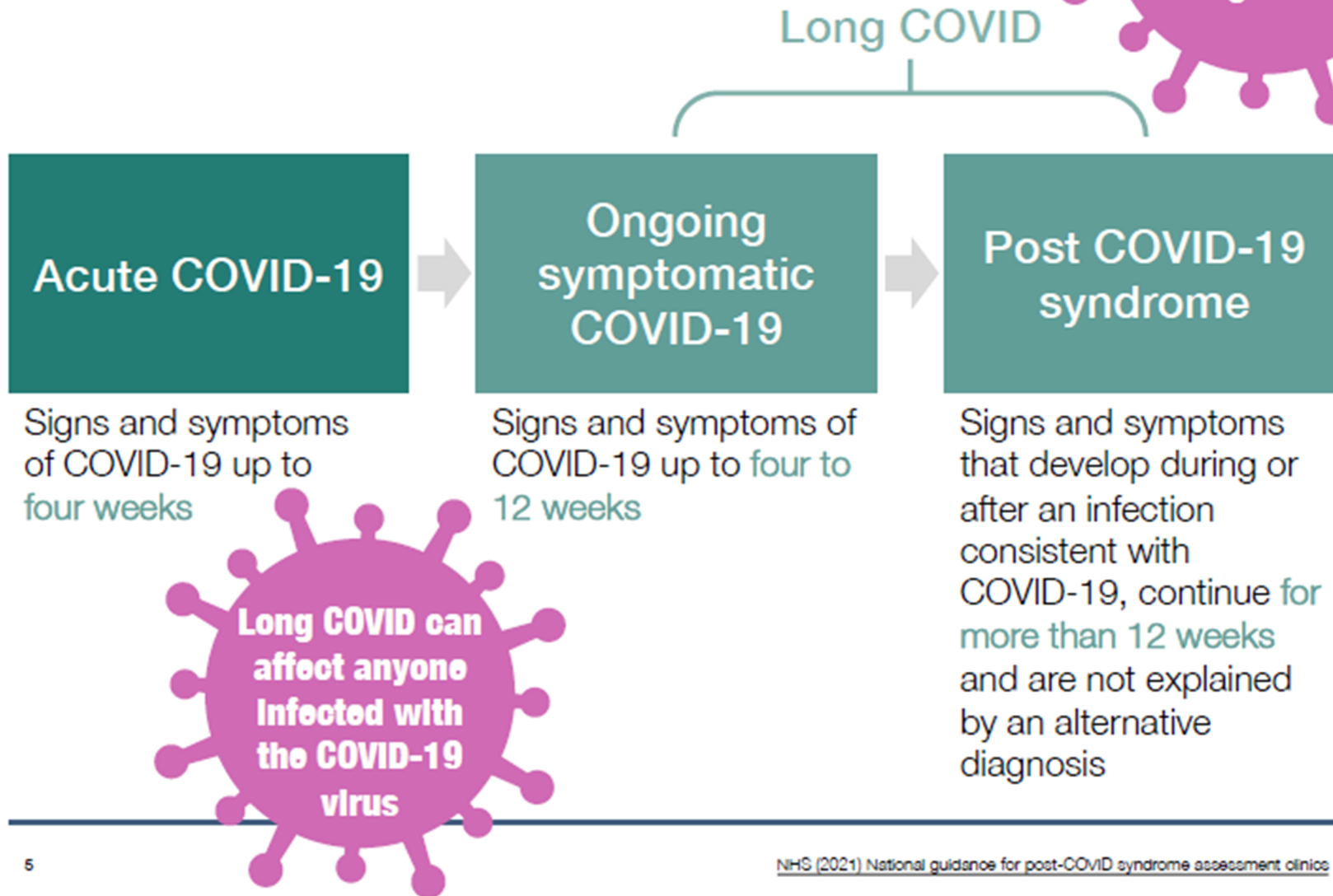
Barry Causer – Public Health Lead for COVID Resilience (LBM)

Dr Amanda Leyland-Naylor – GP Trainee (LBM)

Monica Koo –Public Health Intelligence Specialist (LBM)

Mike Procter – Director of Transformation (SWLCCG)

# Clinical definitions



# Estimating the burden of Long COVID

Several models have been developed by UKHSA and the NHS

- These estimate new Long COVID cases and demand for Long COVID services

However:

- The models do not include the impact of vaccine rollout and changes to COVID treatment protocols
- There are no prevalence models yet, as evidence on recovery is still being collected

# Estimated number of people living in private households with self-reported long COVID in the UK

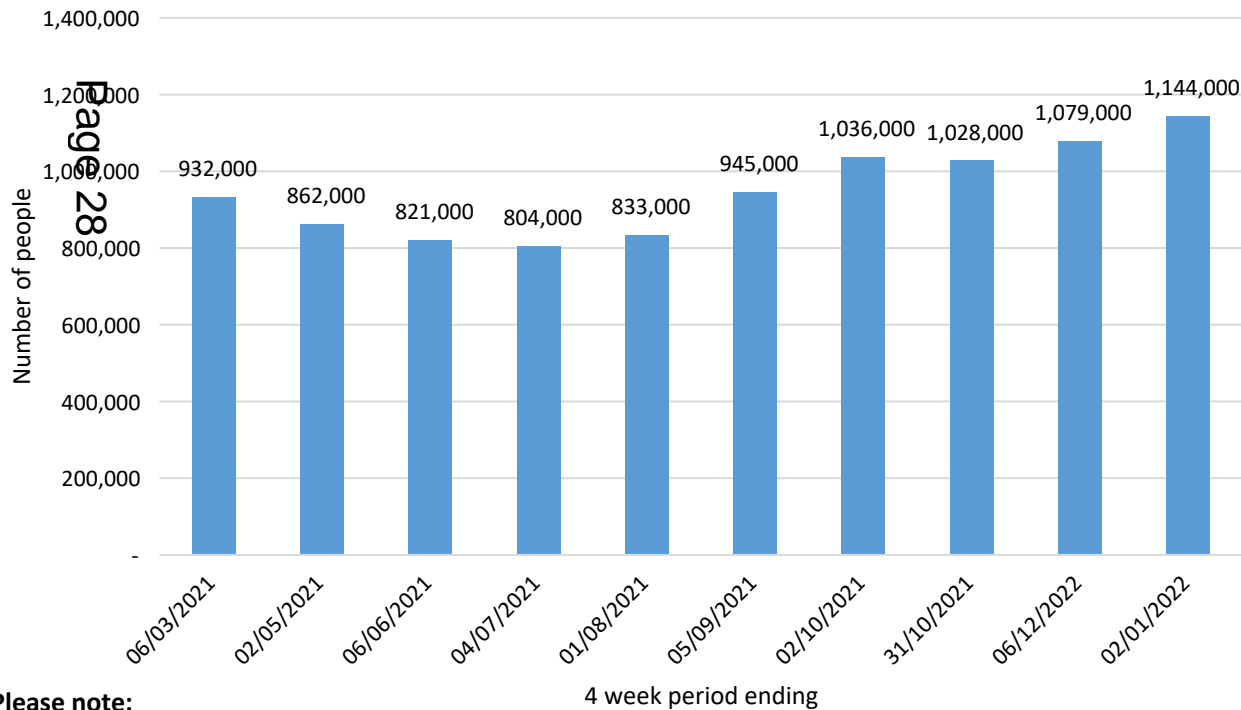
Source: ONS UK Coronavirus (COVID-19) Infection Survey data published on 3<sup>rd</sup> Feb 2022

<https://www.ons.gov.uk/peoplepopulationandcommunity/healthandsocialcare/conditionsanddiseases/datasets/alldatarelatingtoprevalenceofongoingsymptomsfollowingcoronaviruscovid19infectionintheuk>

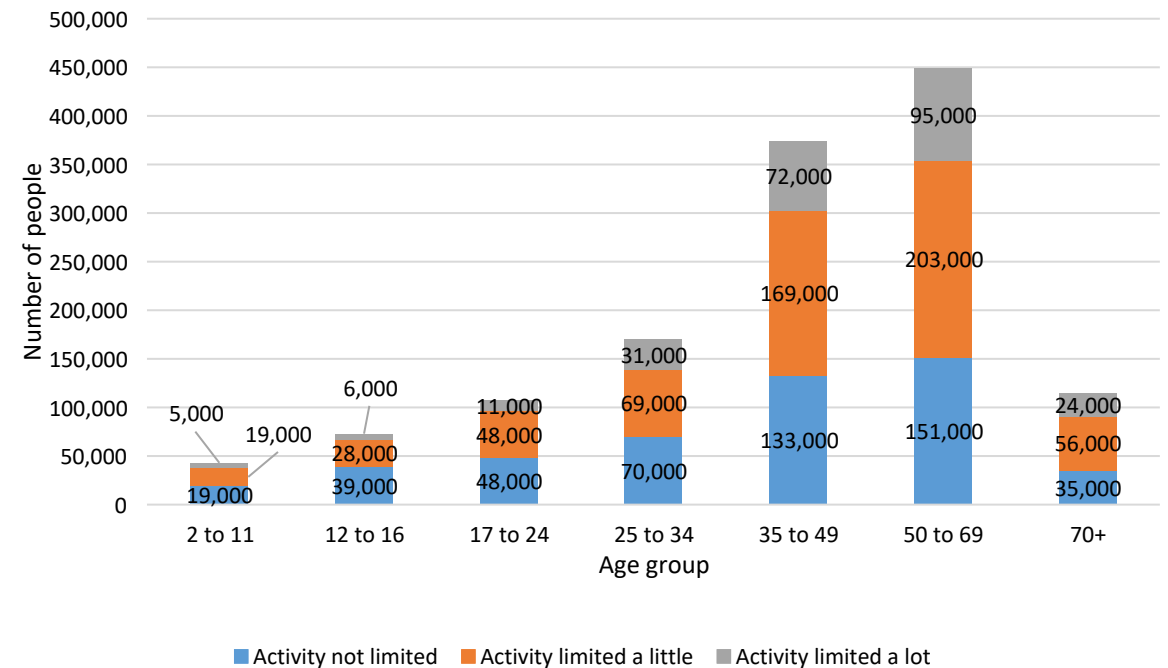
## Key message:

- Around 1.14 million people living in private households in England are estimated to have long COVID
- The estimated number of people living with long COVID in England has been increasing since August 2021
- A greater number of 35-49 and 50-69 year olds reported that long COVID limited their daily activities in some way

Estimated number of people living in private households with self-reported long COVID of any duration in England



Estimated number of people living in private households with self-reported long COVID by activity limitation (4 week period ending 2<sup>nd</sup> Jan 2022)



## Please note:

- Estimates relate to self-reported long COVID experienced by participants, not clinically diagnosed ongoing symptomatic COVID-19 or post COVID-19 syndrome.
- Estimates do not include those in communal establishments such as halls of residence, prisons, schools, hospitals, or care homes. Estimates do not account for differing rates of infection between groups. Observed patterns in prevalence rates may therefore partly reflect patterns in coronavirus infection, rather than providing evidence for differential risk of long COVID following infection.
- Cause-and-effect cannot be inferred from these results as observed statistical associations may be due to several unaccounted factors.

Enquiries: [amira.yunusa@merton.gov.uk](mailto:amira.yunusa@merton.gov.uk)

# Estimated prevalence of long COVID in Merton

Source: ONS UK Coronavirus (COVID-19) Infection Survey data published on 3<sup>rd</sup> Feb 2022 and GLA population estimates for 2021 for Merton

(<https://www.ons.gov.uk/peoplepopulationandcommunity/healthandsocialcare/conditionsanddiseases/datasets/alldatarelatingtoprevalenceofongoingsymptomsfollowingcoronaviruscovid19infectionintheuk>)

## Key messages:

- There are approximately 4211 Merton residents living with long COVID
- Women and individuals aged 35-69 are more likely to be living with long COVID
- The presented figures are currently the best available estimates, with a high level of uncertainty

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	Estimated prevalence in the UK	Estimated number of Merton residents*
All people	2.1%	4211
2 to 11	0.5%	149
12 to 16	1.9%	246
17 to 24	1.8%	273
25 to 34	1.9%	567
35 to 49	2.9%	1476
50 to 69	2.8%	1218
70+	1.3%	248
Men	1.8%	1788
Women	2.3%	2419

\*The sum of presented estimates by age or sex do not sum to the total, as age and sex-specific prevalence estimates were applied separately. In other words, the actual number of Merton residents in each age or sex category may differ due to differences in population between the UK and Merton.

## Please note:

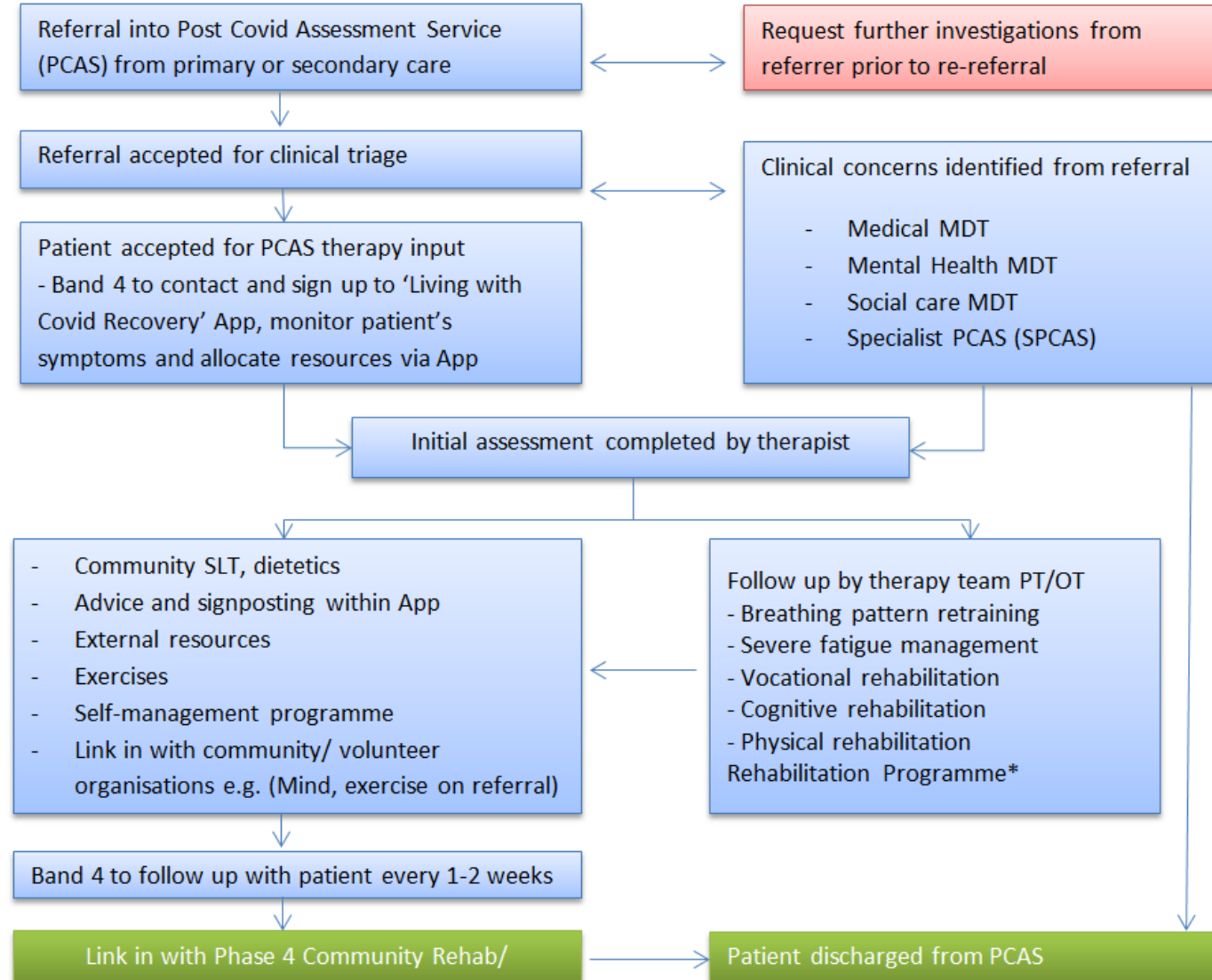
- Estimates relate to self-reported long COVID experienced by participants, not clinically diagnosed ongoing symptomatic COVID-19 or post COVID-19 syndrome.
- Estimates do not include those in communal establishments such as halls of residence, prisons, schools, hospitals, or care homes. Estimates do not account for differing rates of infection between groups. Observed patterns in prevalence rates may therefore partly reflect patterns in coronavirus infection, rather than providing evidence for differential risk of long COVID following infection.
- Cause-and-effect cannot be inferred from these results as observed statistical associations may be due to several unaccounted factors.

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# Emerging evidence and the known unknowns

- Emerging evidence
  - Impact of vaccination – vaccinated people are less likely to develop symptoms of Long COVID following infection and Long COVID symptoms improve after vaccination
  - Impact on CVD - increased long-term risk for a wide range of cardiovascular disorders, even for individuals who were not hospitalised
- Lots we don't fully understand and evidence is emerging
  - Delta v Omicron – too early to understand differences
  - NHSE London undertaking a number of rapid reviews
    - Impact on employment
    - Children and Young People
    - Overlap in symptoms of PCS and menopause

# Patient Pathway



# Role of Primary Care in Managing Post COVID

- General practice plays a key role in supporting patients with long term symptoms of COVID-19. This includes assessing, diagnosing, referring where necessary and providing longer term holistic support of patients
- Merton GP practices have signed up for a Post Covid Enhanced Service which support practices to plan their workforce, set up, training needs and infrastructure in order to support patients with this new condition
- Based on the data there is a gap between estimated prevalence and patients visiting their GPs
- As of 31<sup>st</sup> December 21, 20 practices had registered 2859 patients as having had COVID-19 but only a small number with a confirmed diagnosis of PCS.
- More than 100 patients had been signposted to either the Your Covid Recovery App ([www.yourcovidrecovery.nhs.uk](http://www.yourcovidrecovery.nhs.uk)) and/or the Post Covid Assessment Service



# Proposed next steps and discussion

- Continue to focus on Long COVID whilst we transition to ‘living safely and fairly with COVID-19’
- Take ‘vaccination plus’ approach e.g. vaccination champions also raise awareness of Long COVID.
- Participate in Peer Review (at ICS level) and complete NHSE maturity matrix for case finding.
- Conduct a Health Equity Audit on Merton PCS service; focussing on holistic response and patient voice; identifying key actions for community case finding.
- Utilise existing Governance structures to focus on Equity for Long COVID e.g. HWBB, Merton and Wandsworth PCS Steering Group and MHCT.

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