

Organization of care and services for
the prevention and management of
post COVID-19 conditions

English summary

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SUMMARY

Organization of care and services for the prevention and management of post-COVID-19 conditions

Introduction

Some people who contract severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2) experience one or more signs and symptoms that persist for several weeks to several months following infection. Given the number who have contracted the virus, the still-active transmission of the infection, and the impact of these signs and symptoms on quality of life and functional capacities, post-COVID-19 conditions could place additional strain on Québec's health-care system. To support its reflection on the offer of services to be recommended to adequately meet these needs, the Ministère de la Santé et des Services sociaux asked the Institut national d'excellence en santé et en services sociaux (INESSS) to prepare a state-of-knowledge report on the models of care and service organization currently in use or under development for preventing the persistence of COVID-19 symptoms and managing post-COVID-19 conditions.

Methodology

We conducted a systematic review of publications containing scientific and nonscientific data, information, positions and clinical recommendations from the literature on models of care and service organization for preventing the persistence of COVID-19 symptoms and managing post-COVID-19 conditions. Contextual information was also collected from the websites of Canadian governmental and paragonovernmental bodies. To gather information on the organization of services in Québec, those in charge of institutions, regional departments of general medicine and specific post-COVID-19 services in the health and social services system were invited to complete a questionnaire designed to identify service organization initiatives in progress or in preparation, and the issues and needs perceived by the system's different sectors. All of the results of the information gathering from the literature were discussed with a committee consisting of representatives from various professional bodies, clinicians with different types of expertise, and two individuals with a post-COVID-19 condition.

Results

From the available literature, together with its uncertainties, the contextual information and the consultations, INESSS arrives at the following findings:

- The models that focus on preventing the persistence of COVID-19 symptoms that were found in the literature are intended for individuals who have been hospitalized during the acute phase of the infection and are initiated during the hospital stay or at discharge. They are aimed at preventing the complications associated with the acute phase of the infection and the long-term sequelae. On the other hand, the more general management models that were found are

intended for anyone with persistent symptoms of SARS-CoV-2 infection, regardless of the infection's initial presentation. These models are aimed mainly at reducing persistent symptoms and their impact on the patient's quality of life.

- The models described in the literature for preventing COVID-19 symptom persistence and managing post-COVID-19 conditions have evolved since the beginning of the pandemic. However, whether focused on symptom persistence prevention or symptom management, these models and those recommended by learned societies and technology assessment agencies have several points in common, such as the need to evaluate the patient, individualized management, the involvement of professionals with different areas of expertise, referring the patient to the appropriate services, and considering at least three areas of intervention, namely, physical health, mental health, functional disabilities or social support. However, there are few data available for assessing the impact of the current models on patients, clinicians and the health-care system.
- In Canada, the organization of care and services for post-COVID-19 conditions varies from province to province. While Ontario seems to focus on integrating the management of patients with functional disabilities directly into the current health-care system, Alberta and British Columbia are relying on a few dedicated post-COVID-19 clinics. In Québec, the services available for individuals with post-COVID-19 conditions differ from one facility to another.
- Many of the models identified and described in the literature are based on centralizing the overall evaluation of patients and then referring them to the services that will meet their needs.
- In Québec, the services currently available for individuals with a post-COVID condition are focused mainly on rehabilitation. According to the consultations, these services only partially meet their needs, mainly because the capacity of these services falls short of the demand and the areas of intervention do not cover all the aspects of post-COVID-19 conditions, and because of the lack of knowledge about these conditions and the difficulty or time it takes to access a health professional with expertise in rehabilitation, mental health or social support. Some of the other issues raised were staff shortages, the connections between the levels of care and services, the required consult time, and regional differences in demand volume and resource availability.
- Various strategies for optimizing the management of Quebecers with post-COVID conditions were brought up, including addressing the issues mentioned above and providing financial support. In addition, according to the stakeholders consulted, it would be desirable if the government drafted clear guidelines to facilitate the organization of care and services in the different health and social services regions.

- Equity of access to care and services for individuals with complex conditions unrelated to COVID-19 and the costs associated with a new offer of care and services raise some concerns and merit consideration when putting it together.
- According to the stakeholders consulted, setting up a certain number of dedicated clinics would help meet the needs of persons with a post-COVID-19 condition. If this is done, these clinics should be able to rely on professionals with expertise in the different intervention areas mentioned above and be integrated into a defined care and services pathway. In addition, they should be supported by a strong front line, in other words, one that is equipped, trained and supported.
- According to the stakeholders, the following components of the models identified might be applicable and relevant to the Québec context:
 - Organization involving multiple levels of care and services to optimize access and permit the development of expertise, e.g., front-line services, specialized services, and dedicated clinics;
 - Accessible care and services for individuals who have had persistent symptoms for at least four weeks following confirmed or suspected SARS-CoV-2 infection, regardless of the initial presentation;
 - A routine follow-up, at least for those hospitalized during the acute phase of the infection;
 - A process whereby the patient is referred to a dedicated clinic by a health professional;
 - A virtual triage using a standardized form;
 - An in-person evaluation by health professionals based on the needs identified during the triage;
 - A virtual or in-person follow-up by a family physician, together with a medical specialist, if necessary, with the frequency of consults depending on need but not exceeding three months;
 - Self-management instructions accompanied by support services;
 - A multidisciplinary team consisting of a medical specialist, a family physician, an occupational therapist, a physiotherapist, a nutritionist, a psychologist and a clinical coordinator;
 - Clarifying the care and services pathways and giving priority to the existing pathways;
 - Contributing to research and to knowledge development.

Conclusion

Current knowledge about the optimal models of care and service organization for individuals with post-COVID-19 conditions is limited. However, the assessment of all the information found has revealed certain components common to the models in place in other jurisdictions, certain weaknesses in the current offer of services, elements that might be applicable and relevant to Québec practice, and issues that need to be considered. This information will be used to guide reflection on the organization of care and services in Québec for the prevention of COVID-19 symptoms and the management of post-COVID-19 conditions.

INESSS will take into account the information presented in this report, particularly the needs and expectations of Québec clinicians and patients, when updating its support tool for the clinical management of individuals with a post-COVID-19 condition.

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