

Ref: 1173118

From: Chang, Daniele L HLTH:EX <Daniele.Chang@gov.bc.ca>
To: XT:Flatt, Alexandra HLTH:IN <aflatt@phsa.ca>
Sent: August 19, 2020 11:04:42 AM PDT
Attachments: 1173118- Ms. Flatt.pdf

Good morning,

Attached please find correspondence from Dr. Ian Rongve, Assistant Deputy Minister of the COVID Response & Health Emergency Management Division, British Columbia Ministry of Health.

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1173118

August 19, 2020

Alexandra Flatt
Vice President, Pandemic Response and
Chief Data Governance and Analytics Officer
Provincial Health Services Authority
1333 West Broadway
Vancouver BC V6H 4C1

Dear Ms. Flatt:

Thank you for submitting a business case on behalf of PHSA related to the creation of a time-limited Post-COVID-19 Provincial Clinical Program.

The Ministry of Health supports the implementation of this program. Recent evidence indicates an emerging need for post-acute COVID care. However, at this time, we are unable to provide the requested funding.

I want to thank you for your organization's work on this business case, and for your ongoing work in the fight against the COVID-19 pandemic.

Sincerely,

Ian Rongve, Ph.D.
Assistant Deputy Minister

**MINISTRY OF HEALTH
DECISION BRIEFING NOTE**

Cliff # 1173118

PREPARED FOR: Ian Rongve, Assistant Deputy Minister, COVID Response and Health Emergency Management - **FOR DECISION**

TITLE: Post-COVID-19 Provincial Clinical Program Business Case

PURPOSE: To make an informed decision regarding the Post-COVID-19 Provincial Clinical Program Business Case

BACKGROUND:

The BC Centre for Disease Control (BCCDC) has reported over 4,000 diagnosed cases of COVID-19 in BC as of August 13, 2020, but research in BC estimates the actual number people who have contracted COVID-19 could be eight times higher.¹

There is currently no cure or treatment for COVID-19. Increasing evidence shows that people are suffering from lingering symptoms after the acute phase of the illness has passed. Ongoing problems include fatigue, a racing heartbeat, shortness of breath, achy joints, foggy thinking, a persistent loss of sense of smell, and damage to the heart, lungs, kidneys, and brain.² A study from the Severe Acute Respiratory Syndrome (SARS) outbreak in 2012 found that 40 percent of survivors experienced symptoms of chronic fatigue following the illness.³ Evidence is also showing an increase in morbidities and mortality in people with pre-existing cardiovascular conditions.⁴ An online survey of almost four million people globally indicates that 10 percent of people reported persistent symptoms 25 days after diagnosis, and five percent reported still feeling unwell one month later.⁵

The short, medium and long-term consequences of COVID-19 remain unclear. In BC, there is currently no standardized follow-up or care for people who have had COVID-19, and it is likely falling to primary care providers and other specialists to support patients individually. Provincial Health Services Authority (PHSA) has submitted a business case to the Ministry of Health to create a time-limited Post-COVID Provincial Clinical Program (the Program). PHSA has requested a total of \$4,330,226 over three fiscal years.

DISCUSSION:

The goal of the Program is to ensure people recovering from COVID-19 continue to receive evidence-informed care when and if they need it. A provincial approach coordinated and managed centrally, closely connected to research, would enable rapid

¹ Government of BC (2020) *COVID-19: Going Forward*. Retrieved August 13, 2020 from https://news.gov.bc.ca/files/Covid19-Modelling_Update.pdf

² Carfi, A., et al (2020) Persistent Symptoms in Patients After Acute COVID-19. *JAMA* 324(6):603-605.

³ Lam, M. et al (2009) Mental Morbidities and Chronic Fatigue in Severe Acute Respiratory Syndrome Survivors: Long-term Follow-up. *Arch Intern Med.* 2009;169(22):2142-2147.

⁴ Yance, C.W. et al (2020). Coronavirus Disease 2019 (COVID-19) and the Heart—Is Heart Failure the Next Chapter? *JAMA Cardiology* doi:10.1001/jamacardio.2020.3575.

⁵ COVID Symptom Study (2020). How long does COVID last? Retrieved August 13, 2020 from <https://covid.joinzoe.com/post/covid-long-term>.

evidence generation and dissemination for other patients in BC and elsewhere. PHSA is proposing a hub and spoke model where they manage a centralized coordination unit while working with specialized clinics in each health authority and leveraging existing services including primary care networks, research and academic networks. This multidisciplinary approach is consistent with the Province's priority of team-based care, including what is in place for other complex illnesses in BC (such as PHSA's Complex Chronic Diseases Program).

The business case does not indicate how many patients the Program is expected to treat. With over 4,000 diagnosed in BC to date and the estimate that potentially over 30,000 people have contracted COVID-19 thus far, over 3,000 British Columbians and counting could benefit from such a program.

This Program provides an opportunity for the province to be a leader in centralized clinical care management that is actively learning from the evidence. The clinical data collected, including questionnaires and referrals to services, will be complimentary to the databases and bio banks that are already in place.

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Option 2: Support the development of the Post-COVID-19 Provincial Clinical Program and direct PHSA to fund internally or by leveraging other funding sources.

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RECOMMENDATION:

Option 2: Support the development of the Post-COVID-19 Provincial Clinical Program and direct PHSA to fund internally or by leveraging other funding sources.



August 19, 2020

Approved/Not Approved
Ian Rongve
Assistant Deputy Minister

Date Signed

Program ADM/Division: Ian Rongve, COVID-19 Response and Health Emergency Management Division
Telephone: 250 516-3411
Program Contact (for content): Gina McGowan, Director, Planning
Drafter: Carrie Murphy
Date: August 12, 2020

LEGISLATIVE SESSION - FACT SHEET

Post COVID-19 Interdisciplinary Clinical Care Network (Recovery Clinics)

TOPIC

In partnership with the regional health authorities, patients, and research organizations across BC, Provincial Health Services Authorities Post COVID-19 Interdisciplinary Clinical Care Network (PC-ICCN) aims to support the best possible outcomes for people who have experienced serious cases of COVID-19, through best practices, education, and research. Three Post COVID-19 Recovery Clinics have been established to date under the PC-ICCN umbrella.

CURRENT SITUATION

- Much is still unknown about the long-term impacts of COVID-19, with research suggesting some people experience symptoms long after they have passed the infectious stage. It is estimated by international studies that 75% of hospitalized patients and 10% of non-hospitalized patients will require follow-up care.
- BC has established care for people with post COVID-19 symptoms, including interdisciplinary clinics, supports for primary care providers, and resources to help those affected manage their symptoms.
- The PC-ICCN is the first network of its kind in Canada to standardize post COVID-19 care across health authorities and integrate real-time research into clinical care. Researchers involved in the PC-ICCN are affiliated with a wide range of institutions, including the BC Academic Health Sciences Network; Simon Fraser University Faculty of Health Science; University of British Columbia, Faculties of Medicine and Nursing and the School of Population and Public Health; Canadian Institutes of Health Research ; Michael Smith Foundation for Health Research; BC SUPPORT Unit; and the Canadian COVID-19 Prospective Cohort Study.
- The PC-ICCN provincial approach ensures that people in BC receive truly evidence-informed care from a group of committed physicians and interdisciplinary specialist teams with a common aim to improve outcomes for both patients and the system.
- The PC-ICCN aims to support the best possible outcomes for people recovering from lingering symptoms after COVID-19 infection, through research, education, and care.
- A core element of post COVID-19 research is PC-ICCN's patient registry and biobank. When a patient visits a Post COVID-19 Recovery Clinic (PCRC), a standardized set of tests are performed. If a patient agrees, biological samples from these tests can be used for research and stored in a biobank to support research.
- Patients will also be able to fill out questionnaires and be linked to several other research opportunities.
- COVID-19 survivors with complex presentations who do not receive adequate and evidence-based recovery care are at risk of lifetime disability and chronic diseases such as cardiovascular, respiratory, kidney disease and the known burden of depression and psychological impacts of chronic disease. These, in the aggregate, will lead to a high burden of care for patients, families and the health-care system.
- The PCRCs offer an opportunity to reduce hospital re-admissions for lingering COVID-19 symptoms and an opportunity to coordinate specialist referrals and reduce redundant lab and diagnostic testing. Working together as a network, the PC-ICCN can learn from and plan for the short, medium, and long-term resource needs for the population recovering from COVID-19.

KEY FACTS

- In April 2020, the PC-ICCN was conceived of and formalized in the fall of 2020. It was not designed as a long-term solution and is expected to continue to the end of March 2022, with a determination to be made at that time whether a further extension is required or if usual care teams and research processes can support the work.
- There are three PCRCs in BC under the PC-ICCN umbrella: St. Paul's Hospital, Vancouver General Hospital, and the Jim Pattison Outpatient Care and Surgical Centre in Surrey.
 - A clinic at the Abbotsford Regional General Hospital is being officially launched in July 2021 (following a soft launch in May 2021), and there are development plans for Interior Health Authority and Vancouver Island Health Authority clinics. It is estimated that the Interior Health clinic will launch in September, while the launch date for the Vancouver Island Health clinic is not yet known.

LEGISLATIVE SESSION - FACT SHEET

- The PC-ICCN is working with the Provincial Health Services Authority Office of Virtual Health and regional health authority virtual health teams to leverage virtual care when patients recovering from COVID-19 cannot attend one of the established PCRCs.
- As of May 4, 2021, 656 patients have visited post COVID-19 recovery clinics in BC and 1,400 people have registered. Of the visits to date:
 - 135 were to the Jim Pattison Outpatient Care and Surgery Centre in Surrey.
 - 235 were to Vancouver General Hospital.
 - 277 were to St. Paul's Hospital in Vancouver.
 - 9 were to the Abbotsford Regional General Hospital (as part of a soft launch ahead of the official launch of the clinic).
- Patients access PCRCs for a finite period of time, between 6 and 18 months depending on clinical status.
 - The PCRC model of care is to see hospitalized patients at 3, 6, 12 and 18-months post-symptom onset.
 - All other patients are seen at 3-6 months for follow-up.
 - Discharge occurs at 6, 12, or 18 months depending on the severity of the illness.
- PCRCs offer unique care and leverage existing resources and care pathways while helping patients and their General Practitioners navigate this new disease. These clinics save the health-care system the costs of multiple specialist referrals, redundant lab and diagnostic testing, and costs for patients to travel to obtain these services.

FINANCIAL IMPLICATIONS

- N/A

Approved:

May 27, 2021 – Ian Rongve, ADM, COVID Response and Health Emergency Management Division

