



Oifig Ceannasaí Oibríochtaí,  
Oibríochtaí Pobail, Cúram Príomhúil

Seomra 243, Ospidéal Dr Steevens,  
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19<sup>th</sup> July 2022

Deputy Colm Burke,  
Dáil Éireann,  
Leinster House,  
Kildare Street,  
Dublin 2.

**PQ 38260/22 – To ask the Minister for Health if he will outline in detail the way that his Department plans to ensure the Model of Care plan published in September 2021 is fully implemented in all chosen sites; if consideration will be given to updating the plan to reflect the emerging knowledge of the neurological nature of the condition; and if he will make a statement on the matter.**

**- Colm Burke**

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Dear Deputy,

The Health Service Executive (HSE) has been requested to reply directly to you in the context of the above Parliamentary Question (PQ 38260/22) which you submitted to the Minister for Health for response.

The HSE recognises the need to provide follow up support and care for patients experiencing prolonged signs and symptoms of Covid-19. In response to this it has developed an Interim Model Of Care (MoC) for Long Covid which was finalised in September 2021. The aim of the MoC is to provide a national approach to the provision of services and supports for patients experiencing prolonged symptoms of Covid-19. It sets out a framework for the provision of these services and supports spanning General Practice, Community Services, Acute Hospitals and Mental Health Services. The resultant Interim MoC recommended the development of:

1. Eight Post-Acute Covid clinics
2. Six Long Covid clinics
3. A tertiary referral neurocognitive clinic for those with complex neuro-cognitive/neuropsychological symptoms

The HSE wishes to advise that an Implementation Group led by Integrated Operations, commenced in September 2021 and the establishment of post-acute and Long COVID clinics within each of the hospital groups is a priority. Executive Oversight Committee led by the Chief Operations Officer and Chief Clinical Office is also in place to ensure the realisation of clinics at all hospital sites.

In some incidences the designated hospital sites are providing Long Covid and Post-Acute clinics on an interim basis while awaiting recruitment of full staffing as per the MoC. They have been established in response to local need and are leveraging existing resources and capacity. The HSE is now working with these sites to expand their resources to ensure they can meet the requirements of the MoC and what is required within a local context. It is also working with sites that do not already have access to designated clinics so that these can become operational.



As this is an interim Model, the approach to implementation will be agile and flexible, as there may be a need to change and adapt services based on learnings from clinics, new and emerging evidence and current and future demand for service. As clinics become fully operational, the HSE will be collating metrics such as waiting lists, numbers of patients treated and numbers of clinics operating. This information will be key to informing any required expansion of clinics and/or the development of additional clinics at other hospital sites.

In addition to the above, the HSE also wishes to advise that the Chief Clinical Officer has met with HIQA who have agreed to carry out a review the evidence in relation to Long COVID working with the HSE team.

I trust this information is of assistance to you.

Yours sincerely,

A handwritten signature in black ink, appearing to read 'Seán McArt'.

**Seán McArt**  
General Manager Primary Care  
National Community Operations