Clinical Post COVID Society

British Society of Physical & Rehabilitation Medicine

c/o Royal College of Physicians
11 St Andrews Place
London
NW1 4LE
Registered charity number 293196

Wednesday 4th March 2025

Re: The uncertain future of Post Covid Service.

We are writing on behalf of the Clinical Post Covid Society and Long Covid Charities to strongly advocate for the continuation of the Long Covid (or Post-Covid) Service. We are concerned the discontinuation, or substantial reduction of this service would have perilous consequences for people living with Long Covid in your area.

Long Covid has not gone away. The ONS reports there are more than 2 million individuals in England and Scotland living with Long Covid, an increase on the previous year's figures, including 111,800 children aged 3-17. More than 30% of individuals have been unwell for at least 3 years, and people continue to develop Long Covid de novo (30% of cases started in the last year). Although routine COVID-19 testing has reduced, negatively impacting GP coding of the condition, incidences of circulating viruses proliferate and the numbers of people living with post viral illness is increasing. Combined with other post-acute infection conditions (PAIC) and their long-term sequelae (such as ME/CFS, dysautonomia/postural tachycardia syndrome (PoTS) and Fibromyalgia), a staggering 8% of the UK population is affected (>5 million individuals). These individuals are going to continue to need expert treatment to recover.

Long Covid is affecting previously fit, healthy working and school aged individuals and is extremely disabling - a Lancet study reporting worse health-related quality of life scores than patients experiencing heart failure, multiple sclerosis and end-stage renal disease. More than 700,000 people in the UK have significant symptoms which affect their daily life and ability to work. The economic burden to the UK is enormous- estimated to be > £12 billion annually for Long Covid. This figure is estimated to be closer to three times that for all PAIC combined. Supporting people to stay in and return to work remains a government and NHSE priority.

The discontinuation or substantial reduction of the Post Covid Service would risk losing the dedicated workforce and their specialist skills treating Long Covid and post viral conditions developed over the last 5 years. Clinicians have worked at pace to acquire high levels of expertise, successfully delivering timely, holistic and integrated community-based care for multimorbidity, that reduces pressure on primary and emergency services and prevents multiple referrals into single-disease / organ specialities. These clinicians have gone above and beyond to develop skills and services in what was a new condition and respond to the needs of the local population. This model of care aligns with the future direction of the NHS outlined in the 10 Year Plan and Darzi Report recommendations and is highly valuable to your ICB and local population.

NHS Long Covid services add value, with proven outcomes, more effective healthcare utilisation (£225.83 savings in outpatient care per person after entering into a Long Covid Service- NHSE data) and improved rates of return to economic productivity. Long Covid NHS commissioning guidance states that:

- Dedicated services should continue to be offered to support people suffering ongoing effects of COVID-19 infection.

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- Early intervention is predicted to support more effective recovery.
- Learning from the Long Covid model has the potential to bring transferable benefits to the management of other long-term conditions and aligns strongly with the population health approaches being adopted by ICBs.

Previously ringfenced funding for adult Post Covid services has been added to ICB baselines for 2025/26. For CYP (children and young people) services, existing SDF (service development funding) has been moved to ICB core allocations. For children and young people, unlike in previous years, we are aware of examples where hitherto regional funding has been split across ICBs.
Crucially, for both adults and children and young people, funding has not been withdrawn but now sits with the ICBs to support services.

Recognising that services must evolve to accommodate all post viral conditions, a potential decision to decommission or reduce Long Covid services represents a patient safety issue, failing to meet the ongoing health needs of the local population. These patients have multiple system involvement, catered for by the dedicated Long Covid services. This cannot be currently replicated by other single condition services, nor can they cannot be absorbed by existing community rehabilitation services, or already under resourced ME/CFS or PoTS services without the funding and pathway to do so. The reality is, that without maintaining funding levels for Long Covid care, be that in a standalone or integrated service, the vast majority of people living with Long Covid will be unable to access vital treatment.

In line with the NHS 10 year plan, current post Covid commissioning guidance, and government policy statements, we urge you to engage with people living with and the clinicians supporting Long Covid services in your area, to use their knowledge and skills to rethink healthcare provision for this condition. There is a time critical opportunity to utilise these funds, to expand the benefits of Long Covid services to all those affected by post viral and multimorbidity conditions.

We trust that you will continue to support the those who desperately need this service and affirm the Clinical Post Covid Society and Long Covid Charities remain ready to support you and your workforce to deliver this essential care.

Yours sincerely

The Clinical Leadership Group of the Clinical Post Covid Society.

Long Covid Support

Long Covid Kids

Long Covid SOS

PoTS UK

ME Association