

**From:** [REDACTED]  
**To:** [LEVY, David \(NHS ENGLAND - X24\)](#)  
**Subject:** Re: Long covid services L&SC  
**Date:** 30 November 2023 08:18:56

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Thankyou David

I am reassured that you understand the complexities of care required, and that the clinical leaders can work together for the most effective and efficient service for these patients in LSC.

Best Wishes

[REDACTED]

[REDACTED]  
Deputy Medical Director (Transformation)  
East Lancashire Hospitals NHS Trust  
Tel: 01254 734097

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

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**From:** LEVY, David (NHS ENGLAND - X24) <dlevy1@nhs.net>

**Sent:** 29 November 2023 15:56

**To:** [REDACTED] O'BRIEN,  
Sarah (NHS LANCASHIRE AND SOUTH CUMBRIA INTEGRATED CARE BOARD)  
<sarah.obrien19@nhs.net>

**Subject:** RE: Long covid services L&SC

[REDACTED]

Good afternoon

Thank you for your email

I am told the NHSE national and regional team are looking at some additional funding for 24/25

Until we have their decision there is a proposal to integrate the care of these patients

If additional funding is available I suspect that decision will be reviewed

I am aware of the more complex needs of some of these patients- [REDACTED]

Best wishes

David

Dr David Levy

Medical Director

Lancashire and South Cumbria Integrated Care Board

[REDACTED]  
[REDACTED]  
Executive Assistant: Sandra Lewis

[REDACTED]  
[sandra.lewis3@nhs.net](mailto:sandra.lewis3@nhs.net)

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**From:** [REDACTED]

**Sent:** 28 November 2023 07:50

**To:** LEVY, David (NHS ENGLAND - X24) <dlevy1@nhs.net>; O'BRIEN, Sarah (NHS LANCASHIRE AND SOUTH CUMBRIA INTEGRATED CARE BOARD) <sarah.obrien19@nhs.net>

**Subject:** Long covid services L&SC

This message originated from outside of NHSmail. Please do not click links or open attachments unless you recognise the sender and know the content is safe.

Dear David and Sarah

It has come to my notice that Lancashire and South Cumbria ICB intend to decommission Long COVID Services and integrate these patients into current services.

I am contacting you as a clinical leader and as a physician who works with these patients as part of our Pennine Lancashire MDT for Long COVID.

Firstly as a member of the National Clinical Reference Group for Long COVID I am aware that the continuation of these services based around an MDT is planned be part of NHS England operating framework for 2024/5.

Secondly in being part of a team providing and coordinating care for these patients I know the complexity of their conditions with this multisystem disorder, often in addition to other health conditions. This requires the input of a range of professionals and specialities, that in my opinion can only be provided through the coordinating role of a specialist MDT whose members have knowledge and experience of the condition. This not only gives a consistent approach for these patients, limiting inputs to evidence based interventions, I also believe it reduces healthcare utilisation by these patients who otherwise would have multiple speciality and professional referrals around each of their symptoms or organ systems and many additional contacts with primary care to try and coordinate this, but without the expert knowledge. It is also an area of emerging evidence that requires specialist leadership.

I do of course recognise the financial challenges faced by the Lancashire South Cumbria system and that difficult decisions will need to be made. However decommissioning Long COVID services would increase health and care costs, let alone leave these patients without the support they need, and reduce the chances of their return to the productive lives they seek.

It is essential that you consider these facts in any commissioning decisions and engage with the wide range of clinical professionals who are providing this care.

Yours sincerely

[REDACTED]  
[REDACTED]  
Deputy Medical Director (Transformation)

East Lancashire Hospitals NHS Trust

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