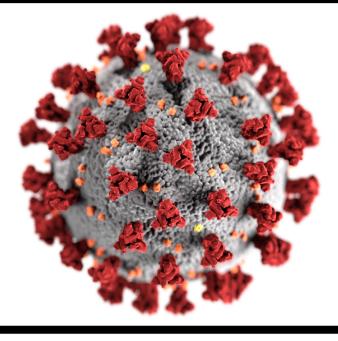
Learning from patients and communities about long COVID: A pilot intervention in primary care

Background

10-30% of people experience persisting long COVID symptoms after acute **COVID** infection



Patients and clinicians both struggle to understand and respond to this chronic phase of the pandemic

Project Objective and Design

How might we create an educational intervention to increase the capacity and confidence of primary care clinicians caring for people with long COVID?

25

interviews with people with long COVID

15

interviews with mental health, community health workers, lawyers, physicians, nurses

pilot groups of residents and clinicians

Intervention Components

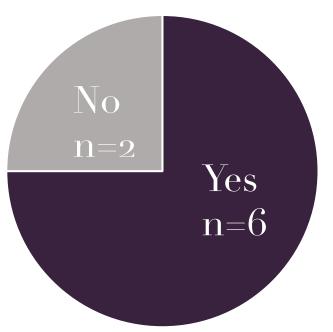
From interviews with people with long COVID and those who care for them, we created a 15-minute film with emotional testimony and actionable strategies for clinicians caring for people with long COVID

Patient Experiences with Long COVID



Outcomes

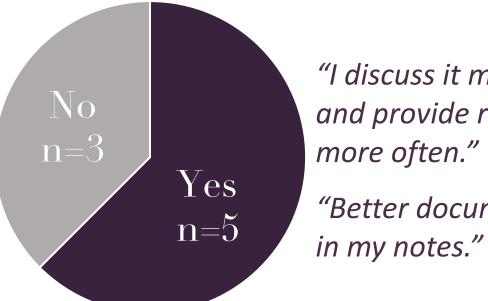
Changes in clinicians' ideas about long COVID since date of intervention



"I'm more aware that this" syndrome is something that my patients might be dealing with but not necessarily vocalizing this concern to me."

"I think about asking about it" more at routine patient appointments."

Changes in clinicians' approach to helping people with long COVID

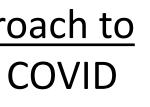




Jane Evered, PhD, RN, Sarah Davis, JD, MPA, Briana Patrick, MS, Claire Maske, Sarina Schrager, MD, MS, Linda Park, PhD, MSSW, Mary Henningfield, PhD, Alice Yuroff, PhD, Rachel Grob, PhD, MA

Catalyst film





"I discuss it more often and provide resources

"Better documentation

Conclusions and Relevance

- 1. We demonstrated how close partnerships can facilitate the development of a patient experience intervention in the US healthcare context.
- 2. Discussions during the pilot intervention helped us refine the intervention. For example, clinicians confirmed that they would like having paper copies of resource sheets to distribute to patients along with an EMR dot phrase for adding to after visit summaries.
- 3. Though many clinicians in this pilot had not had a lot of experience with long COVID, we had robust discussions at all intervention sessions. Post evaluation survey results revealed changes in ideas about long COVID and how to best help people managing it.





This project was made possible by the UW-Madison Institute for Clinical & Translational Research (ICTR) with support from NIH-NCATS Clinical and Translational Science Award (CTSA) 1UL1TR002373 and funds through a grant from the Wisconsin Partnership Program at the University of Wisconsin School of Medicine and Public Health Program, Wisconsin Partnership Program (WPP 5129). Interviews with people with long COVID were funded by a Department of Family Medicine and Community Health Small Grant. We wish to additionally acknowledge patient project advisors, Jennifer Reidner and Carrie Schmidt.

School of Medicine and Public Health Department of Family Medicine and Community Health