

TORRANCE, N., GRANT, A., ADAMS, N., MCIVER, E., DOUGLAS, F., KYDD, A., HERNANDEZ SANTIAGO, V., SKÅTUN, D. and KENNEDY, C. 2022. Mixed methods study of lived experience of long-term Covid-19 on NHS workers in Scotland. Presented at 2022 Faculty of Public Health conference: public health: lighting the path for the next 10, 20, 50 years, 12-13 May 2022, [virtual conference].

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2022

Mixed Methods Study of Lived Experience of Long-term Covid-19 on NHS workers in Scotland

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Background

- Many NHS workers have greater occupational risk of exposure to Covid-19 than the general population
- “Long Covid” (LC) is the name given by patients to describe the longer-term effects of Covid-19 infection
- Persistent symptoms include fatigue, “brain fog”, shortness of breath, chest pain and palpitations, joint pain, and many other diverse symptoms that can come and go. ONS estimate 1.7 million people in the UK (2.7% of the population) were experiencing self-reported LC (March 2022)
- This study aims to explore the experiences of LC in NHS workers in Scotland using a mixed methods approach incorporating an online survey and in-depth qualitative interviews.

Methods

- NHS workers across Scotland who self-report LC symptoms were invited to complete an online survey (June-Sept 2021)
- Recruitment was via social media, professional mailing lists and online support groups
- Questions included LC symptoms, physical and mental wellbeing and healthcare use
- Subgroups were invited for qualitative interviews (n=50) with follow-up after six months

Qualitative Interviews

- 50 in-depth qualitative interviews.
- Maximum variation sampling
- Framework analysis informed by grounded theory techniques in Nvivo
- Online interviews conducted with 20 nurses, 10 AHPs, 10 Drs, 8 Ancillary and 2 Admin

Results – Online survey



471 online questionnaires completed from NHS workers in 14 NHS Boards

- 226 (48%) Nurses (incl midwives & HCAs); 52 (11%) AHPs; 50 (11%) Ancillary staff; 37 (8%) Doctors; 106 (23%) Admin & other misc.
- 282 (60%) work in a hospital setting
- 298 (64%) had a Covid-19 test when they first had any symptoms. 68 (14%) were admitted to hospital
- 48% (n=227) had LC symptoms for over a year

Hard work

- Illness Work
- Biographical and identity work
- Emotional work
- Every day work



Illness work

- Strategies to manage symptoms
- Accessing health care
- Pursuing contact with GPs/health care professionals, pushing to be seen/listened to/taken seriously
- Lack of recognition & support; understanding & knowledge

You'll get better eventually..

Emotional work

Living with uncertainty/unpredictability and living with diagnostic uncertainty

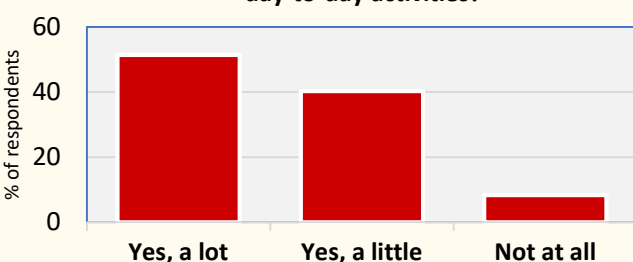
“When will these symptoms go?”
“Will they ever go?” “Will I be like this forever?” “Will new symptoms come along?”
“Is this long COVID or something else?”

- Depression, anxiety, guilt, stress, distress
- Not contributing as much to home and family life
- Not working in the NHS during the pandemic

Summary

- For some NHS workers the impact of LC on their physical & mental wellbeing has been catastrophic
- Some are unable to work, others work for fewer hours or have to do a different job

Do LC symptoms reduce your ability to carry-out day-to-day activities?



Health care use for LC symptoms

- 73% had contacted the GP practice
- 34% been to any hospital O/P clinic
- 38% were Dissatisfied with health care received

Work & finances

- 65% had taken sick leave
- 18% currently off work due to LC
- Duties at work had changed for a third
- 50% were worried about job security