

# Community nurses and the 'new normal'.

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## Community Nurses and the ‘New Normal’... Covid-19 and Beyond

The Covid-19 pandemic has impacted our lives in unprecedented and dramatic ways few could have imagined. As we go to Press, numerically, new cases are broadly falling and a much-needed development around the use of Dexamethasone for the most seriously ill patients has come to light. The worst may or may not be behind us. Time will tell.

Looking forward, the profession will face enduring patient health issues which, regardless of a “second wave” recurrence or not, will need managed. Specifically, aftercare and support for those with long term symptoms post Covid-19, and the legacy of suspended health and social care for many other conditions.

During the pandemic, Primary Care and Community Nursing professionals, although less media newsworthy, have supported people who do not require hospitalisation for Covid-19 alongside the most vulnerable in our communities. Community nurses have faced challenges around a lack of personal protective equipment (PPE), lack of testing of staff and severe and chronic workforce shortages. There is general agreement that things cannot go back to being as they were. Covid-19 patients, post hospitalisation – for some, several weeks in ICU – will undertake a long recovery journey. New guidance from NHS England (June 2020) sets out an extensive and sobering list of the physical, psychological, neuro psychological and social implications termed as ‘Post Intensive Care Syndrome’. Patients and families affected will require long term home support from a system already stretched.

So what does this mean for community nursing and how can these challenges be addressed?

The NHS England Report (2020) emphasises the need to provide ‘normal care’ but identifies four new additional challenges;

- an increased number of patients with post-intensive care syndrome or similar
- maintaining infection control specific to Covid-19
- pressures on equipment (eg, oxygen cannisters, PPE) and staffing
- increased numbers of patients experiencing persistent psychological difficulties post-discharge.

Issues around infection control, pressures on equipment and managing persistent psychological difficulties linked to enduring and long-term illness are not new for community nurses. However, the context and difficulties linked to Covid-19 need careful specific consideration. There may be upskilling education needs within community nursing teams. The psychological impact of Covid-19, delays in treatment for people with illness such as cancer, organ failure and regular monitoring of long-term conditions is likely to be profound and community nurses will be the key contact for many. There is also a need for excellent cross-sector and disciplinary working to ensure the right care and support can be offered at the right time.

In conclusion, and very importantly, staff support - now and into the future - will be critical. Staff are at increased risk of infection both to themselves or passing it to others including their own families. Lockdown restrictions are likely to have impacted on important support networks such as that provided from Family and through School and Nursery provision. The

economic impact of Covid-19 may impact on close family members. Many staff will experience both personal and professional grief as a direct impact of this pandemic.

Caring for the Carers, both professional and lay (who provide substantial support at home) is critical if we are to manage this 'new normal' in community nursing. Challenging times ahead. Fostering resilience in community nurses requires resources, recognition and adequate support for the personal challenges they face amidst these extraordinary times and beyond.

#### Reference

NHS Publications approval reference: 001559 5 June 2020, Version 1 After-care needs of inpatients recovering from COVID-19, <https://www.england.nhs.uk/coronavirus/wp-content/uploads/sites/52/2020/06/C0388-after-care-needs-of-inpatients-recovering-from-covid-19-5-june-2020-1.pdf> Accessed 17/06/20)