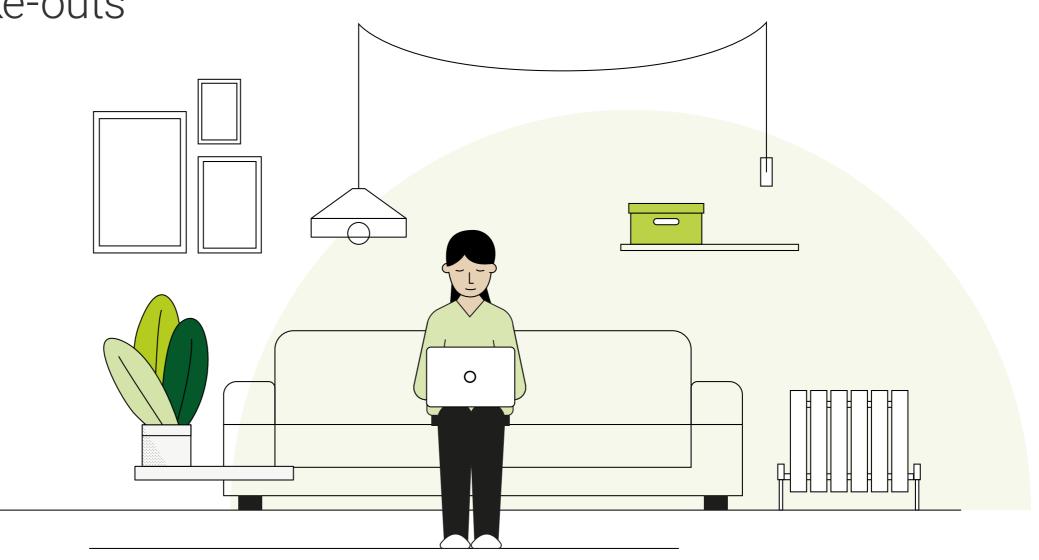
### Get Winter Ready Webinar:



Managing the Post-COVID Impacts on Business Our Summary Take-outs

Introduction





### Introduction

When it comes to Long COVID, or Post-COVID-19 Syndrome in the workforce – how can we get winter ready and manage the impacts on businesses? We held a webinar with leading experts from our Wellbeing Advisory Board to discuss a wide range of issues within this topic.

In this summary guide to the webinar, we've compiled key take outs with the aim of enabling HR managers and advisers to refer back to the information, to aid understanding of Long COVID/Post COVID-19 Syndrome in the workplace, and to offer ongoing support and learning. To hear the full responses from all of the panel members, the webinar recording is available to re-watch here:

Re-watch webinar

- 3 Meet the panel
- 4 Key take-outs

### Meet the panel

Our webinar panel featured a number of members from our Group Protection Wellbeing Advisory Board; which is a collective of experts who work across the health and wellbeing spectrum. Specialities covered include Occupational Health, Vocational Rehabilitation, GP Practice and Group Protection Consulting.



#### **Vanessa Sallows**

Claims and Governance Director

Legal & General Group Protection

With over 30 years' experience working in the NHS, private industry and the protection market, Vanessa is passionate about the psychology of work, what prevents individuals from working during periods of ill-health and helping people return to 'good work'.

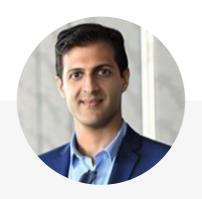


#### **Debra Clark**

Head of Specialist Consulting

Towergate Health & Protection

Debra has been in the employee benefits industry for over 25 years, working in a number of specialist intermediary roles. She has recently been recognised for her commitment to mental health by Cover magazine in their annual awards, winning the Mental Health and Wellbeing Champion category in 2022.



#### **Dr Tarun Gupta**

Chief Medical Officer, Legal & General UK Protection

With a wealth of experience working in the NHS and private sector as a GP, Clinical Commissioner and Occupational Physician; Tarun serves as a resource for the claims and clinical teams and provides medical opinion, assessment and interpretation on complex cases.



#### **Beverly Knops**

Executive manager of Vitality360 / specialist Occupational Therapist

Vitality 360

Beverly has spent the majority of her career working with people experiencing persistent pain and fatigue, including 29 years with the North Bristol NHS Trust (NBT). A trustee of the British Association of Clinicians working in ME/CFS (BACME), she is passionate about sharing knowledge and skills with other health professionals.



#### **Dr Julie Denning**

Managing Director
Working To Wellbeing and
Chair of the Vocational
Rehabilitation Association

A Chartered Health
Psychologist and Cognitive
Behavioural Therapy
(CBT) therapist; Julie has
significant experience
designing and delivering
vocational rehabilitation
services that support
people with long term
conditions to self-manage
symptoms and return to
the workplace when ready.
As Chair of the VRA she
promotes access for all to
vocational rehabilitation.

### Key Take-outs

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### 1. Definition of Post-COVID



#### Vanessa

NICE\* uses the following clinical definitions for COVID-19 and Post-COVID:

- Acute COVID-19 signifies the signs and symptoms of COVID-19 for up to 4 weeks.
- Ongoing symptomatic COVID-19 refers to the signs and symptoms of COVID-19 from 4 to 12 weeks.
- Post-COVID-19 syndrome describes signs and symptoms that develop during or after an infection consistent with COVID-19, continue for more than 12 weeks and are not explained by an alternative diagnosis.

The term Long-COVID was a patient created name prior to the launch of the NICE guidelines in December 2020, in which the term Post-COVID was used.

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### 2. Numbers in the working population

#### Vanessa

An estimated 2.3 million people living in private households in the UK (3.5% of the population) were experiencing self-reported Post-COVID as of 3 September 2022\*.

Symptoms adversely affected the day-to-day activities of 1.6 million people (72% of those reporting Post-COVID. 342,000 (15%) reported that their ability to undertake their day-to-day activities had been "limited a lot".

Those aged 35 to 69 have reported the highest rates of Post-COVID, with over 5% of all the people in that age group saying they have been suffering symptoms for more than four weeks and about 4% reporting symptoms for more than three months.

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<sup>\*</sup>National Institute for Health and Care Excellence

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## 3. How the workplace has changed since COVID-19

#### Debra

Most workplaces have changed. **Some of that has been in terms of** physical spaces. In other ways, this has been more cultural. You no longer have one traditional idea of working from home, a physical workplace, or out on the road. Today, it's much more hybrid. **Probably** the biggest change has been in employees' expectations and what they're looking for from their workplace. In most situations, employee expectations have increased. Work and life became much more blurred during the pandemic, and therefore people are bringing more of their homelife into work and expecting work to support both parts of life. Employees have also started to reflect on what's really important to them. We've had the great resignation and quiet guitting where people suddenly had a sense of their own mortality. Family, health, wellbeing rose to the top of the pile. By default, they expected their workplace and employer to place more emphasis on this too. Irrespective of COVID, we think the workplace has moved on three years, with a new generational mix. Gen Z has very different expectations. They're looking for businesses that share the same values and strong culture. We see much more focus on equality, diversity and inclusion, and also the wellbeing agenda, corporate social responsibility and the environment. In order to attract and retain the right people, workplaces need to adapt and provide what people are telling them they want.

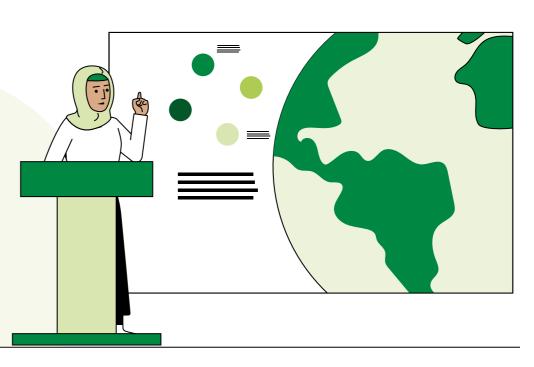


## 4. Perceptions of COVID / Post-COVID in the workplace

#### Debra

Perceptions are mixed, which comes from a mixed understanding of the conditions and the virus. There are still a lot of unknowns. We still don't know how it will impact people in the workplace long term. We still have people who are unsure about vaccines. Symptoms can be very varied. There are still some people questioning whether Post-COVID exists.







## 5. Flexible working enabling more people to access the workplace

#### **Beverly:**

For years, I've been working with people who have symptoms not dissimilar to those of Post-COVID. We have tried to negotiate with employers to make working from home possible. We've met a huge amount of barriers for years, and suddenly overnight that changed. Everybody had to work from home and the technology really supported that. I think that has enabled people to ask to do things differently. If I focus on the voice of the people I see — having that flexibility, being able to work at home, take more rest breaks, to not feel people are looking at them, getting up and stretching, lying on the floor even ... being able to do that in their own home has made a massive difference. We need to look positively at this enabling people to work who may not have been able to before or would have been off more, for longer periods of time.





## 6. Invisible illnesses and unseen struggles

#### **Beverly:**

I think it's difficult with invisible conditions. What I spend a lot of time doing as a therapist is saying to people, you need to say something. You might need to find a way to be able to explain this. I was talking to someone just this week who was saying, "My employer and line manager don't understand that I'm really struggling." But when she meets with those people, she wants to pretend she's ok, because she's really scared of being vulnerable, or not having capacity. When she meets with me, I see her as she is. When she meets with them, she combs her hair, puts some lipstick on, wears a colourful scarf, makes herself look a bit brighter, alive. For the 20 minutes she's talking to them, she seems alert, because she saves all of her energy for that meeting. They go away thinking she's doing really well, so let's ramp her hours up. Meanwhile, she has to lay down for three hours, and is feeling upset that she's now expected to do more. Something has gone wrong in that **communication.** I work with the clients essentially to be more open. Communication on all sides is really important to find out the real impact on people's lives.

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## 7. Watching out for differences in employees

#### Debra

When we think about companies that are providing really effective support, and staff knowing that it's ok for them to admit they're struggling in some way. It very much comes from top down. Line managers are critical. They are the ones that notice when someone hasn't turned their camera on if they normally do. If someone hasn't brushed their hair. If someone is a bit reserved or overcompensating.

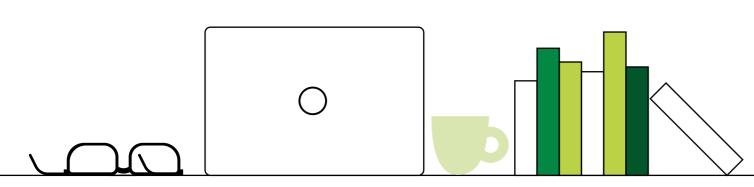
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### 8. How can a Line Manager support?

#### Debra

A company that supports staff well, has line managers that are empathetic and will listen non-judgementally. They're as educated as they can be. It doesn't matter that they can't label it as Post-COVID. All they need to know is they've got a member on their team who is struggling. Then it flips back to an open, honest culture, where an employee can divulge openly, and share the whole truth. The line manager then needs to know about the support that's provided by their organisation. Resources and services. Post-COVID pathways. There's a lot of support out there, people who are line managers might not realise it's available. There's a job to be done in signposting and knowing where they can signpost. Finally, a line manager, an employee and businesses should work out a plan, together. It's about personalising, being empathetic and encouraging people to be honest with you.

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## 9. How can employers support, and how does this vary from person to person?

#### Tarun:

There are two aspects here. First is, early identification that something isn't quite right, and then being able to signpost that person to the relevant support. If you have access to occupational health, that's a great gateway into understanding the problems being caused for that individual in the workplace and what we can do to



support them. Second, it's important to not label someone with a condition and assume that everyone is of the same severity within that group. Much like any other chronic condition, simply having a diagnosis doesn't necessarily tell you much about how that can impact your life or particular role. A line manager will be familiar with your role and responsibilities. The NICE definition states that you'll have symptoms ongoing - it doesn't state the severity. In occupational medicine we consider reasonable work adjustments and refer to relevant legislation, such as the Equality Act 2010. What we also want to ensure is that people aren't excluded from work based on a diagnosis, without understanding how it's impacting upon their particular role. Symptoms and capacity might change over time. Line managers have a vital role to play in simply understanding barriers to work, can they be overcome, and if so, what do I need to do to help them? Staying in touch and keeping individuals engaged in work whatever their situation is important.



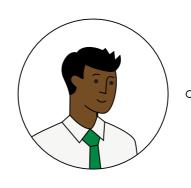
## 10. Importance of a structured return to work programme



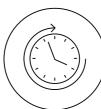
#### **Beverly:**

You need a plan. You need a structure that everyone buys into, with a monitoring and review process. A lot of this is around good work behaviours. Because of symptoms, maybe someone can't work in the way that they used to. It's so important for the individual to have boundaries. Start and finish at the time agreed. Take a break – even if that's two minutes. Taking a long lunch break. Going for a walk. There are things we could all benefit from. Employers aren't asking for a huge amount of difference. You're asking for someone to work well. And working well is good for our health. It is modelling of good work behaviours. Taking more breaks can actually make someone more productive. In summary, it's about clarity, a good, agreed plan, and knowing that a lot of measures are actually 'normal' measures.





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## 11. The importance of functional recovery



#### Julie

It's understanding from three different perspectives, in terms of the ideas of chances of relapse and providing continued support. Think at an individual level – we need to make sure that as an organisation we're providing functional restoration. That we're enabling people to manage their symptoms. To hopefully have some recovery from some of those symptoms, and if not, accepting them and deciding how to work with them in a work context. How can we transfer functional restoration achieved at home to the workplace, with an understanding of the job role? Intertwined with this, we need good line manager support. Plus with employee vocational rehabilitation it can help to have an advocate between the employer and employee. The person that smooths the pathway. Line managers need help, and that's what vocational rehabilitation specialists can provide. The third level is about really good workplace procedures, from policy to culture.

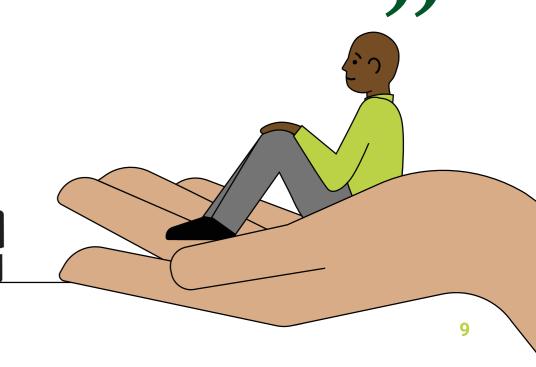
## 12. Employers have to "walk the walk" not just

talk about it

#### Julie

Make sure there is a structure in place to support someone returning to work. Once, we were working with a lady to return to work. She was all set – apart from the car parking space that was about 10 minutes away from the office. That was going to be quite a big problem. The stumbling block was, the employer refused to give a blue badge parking space right outside the front door. It proves the need for supporting on a case by case basis. Eventually, she had the space temporarily, and later used the walk from the car park as part of her rehab. Employers need to 'walk the walk' in terms of support, not just talk about it.





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## 13. Audience questions #1 How does the review and rehabilitation process work for cognitive issues?

#### Julie

There are different approaches. You could carry out a cognitive assessment to understand where someone is at. Then put in various specific interventions tailored to the results of the assessment. Or you can work with someone, ask them what they are experiencing, and work with their responses. The main thing is, supporting people to understand the extent of their symptoms, to get a thorough understanding from a clinician's perspective, to understand how those symptoms are playing out in their day to day life as well as their work life, and putting into place various strategies to either come to terms with it, or strategies to help with symptoms such as concentration. It's never a one-size fits all, and it's all about what the individual needs.



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# 14. Audience question #2 Do people make a full recovery or are you seeing people who need to find a new type of role due to impairment?

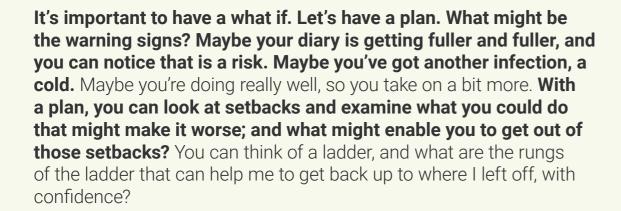
#### **Beverly:**

We are seeing people who have made a full recovery. It is very hard to predict. People who were in ICU for weeks and weeks have made a full recovery. And I've seen people who experienced a much less acute stage at the beginning, and they're still struggling with fatigue. It's hugely variable. We always talk about optimising recovery rather than cure. We always talk about, let's look at what progress you've made and how you move forward. We're always looking at their existing role and how we can help them to do that. For some people, having Post-COVID, or any other long-term condition, really makes them think about what they want to do in life. I've seen people on a steady progression back to their role and they decide to stop to reassess. I see that change as a positive outcome.

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### 15. Warning signs of relapse

#### Beverly







### 16. Post-COVID trends in the workplace

#### **Tarun**

I would say there are two different trends going on. There is still ongoing recognition and diagnosis of Post-COVID from GPs, and other clinicians, which is having an impact upon employees in terms of attendance. There is also ongoing development and progress in terms of the types of reasonable workplace adjustments that can be offered. We're getting better at managing conditions. Like other chronic conditions, once we have more information and a better understanding, we get better at managing them, both clinically and from an occupational health perspective. On the whole, my opinion is Post COVID is not going away, but it is becoming both better recognised and better managed.



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#### 17. Concluding Takeaways



#### Debra

"I think I have to represent the companies. There is a job to be done. If a business isn't profitable then it's not going to be there. I think businesses need to work on their culture and providing an environment where people can be open and honest is the best way. So, if something isn't working or a job function needs to change, you can have that conversation knowing you're both coming from a good place, knowing you want to do right both for the business and the individual."



Julie
"No one size fits all."



#### **Beverly**

"I'm going to keep it simple and say, model good work behaviour, and take a lunch break tomorrow."



#### **Tarun**

"It doesn't have to be a full recovery.

Take into account what your employee can do from a functional perspective and think creatively about how they can be supported at work, to realise their full potential."

#### Find out more

To hear the full responses from all of the panel members, the webinar recording is available to **re-watch here** 

Find more about our **Wellbeing Advisory Board here** 

Our **dedicated microsite is here**. If you have any related questions, please contact your account manager. Thank you for reading.