Rammya Mathew: Tough times ahead for a depleted workforce

Rammya Mathew GP

The recent changes to covid-19 restrictions indicate a new phase of the pandemic, where we are supposedly learning to live with the virus. Masks are not required, testing is no longer readily available to the public, and isolation has become optional rather than mandatory.

I’m sure that many businesses are pleased to see an end to testing and isolation, in the hope that covid-19 related absences among their workforce will now rapidly decline. But what about the NHS? Last month the remaining population controls against covid-19 ended. As a result, cases of covid-19 rose steeply throughout the population, leading to high absences rates among NHS staff as they were off sick or needed to self-isolate. This has inevitably meant cancelling operations, outpatient appointments, and diagnostic tests. We’re still declaring covid outbreaks on many of our wards—leading to fewer available hospital beds, which has a further detrimental impact on waiting lists and patient flow through the NHS.

When the message being relayed to the public is that the pandemic is virtually over and that the NHS is in some sort of accelerated recovery mode, it’s no wonder that patients have a low tolerance for more news of cancellations. It’s adding fuel to the fire, when public satisfaction with the NHS is already at its lowest recorded level since 1997.

Last week NHS England announced that infection and prevention control measures introduced during the pandemic were being relaxed, partly to help free up capacity in healthcare services to tackle the huge treatment backlog. I’m afraid that, no matter what infection prevention and control measures we take in the workplace, we’ll inevitably still be exposed to the virus in our lives outside work. This is crippling our ability to do the much needed catch-up work now facing almost every sector of the health service.

Worn-out NHS workers are the ones caught in the middle of this bind—either through being acutely unwell with covid and having to take time off or through being left to work in understaffed departments, unable to provide a decent service. I dread to think of the impact of long covid on top of this, as it’s yet to be fully felt or at least captured in available statistics—but recent data from the Office for National Statistics warn that many of the people affected will probably have symptoms for a year or even longer.

Suffice it to say, this is not the recovery that any of us had anticipated or hoped for. With a stretched, depleted, and unwell workforce, the NHS’s staff and its patients have tough times ahead.

Competing interests: None.

Provenance and peer review: Commissioned; not externally peer reviewed.