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# Return to work after long COVID - an evidence review

### 17th December 2021

An evidence review, 'Return to work after long COVID: Evidence at 8th March 2021', undertaken by an international group of experts states that return to work for an individual with long COVID often needs involvement of the recovering worker, employer, line manager, health professionals and (where available) occupational health professionals to facilitate appropriate return to work and support at work.

Professor David Fishwick, HSE's Chief Medical Adviser said that: "Drawing together the evidence base is really important to define the best way forward for workers suffering from long COVID, to best help them feel better and return to work healthy."

A return-to-work plan for individuals with long COVID could include: a phased return, flexible work, time off for rehabilitation and medical appointments, fatigue management strategies, adapting work tasks, etc. A SOM toolkit includes step-by-step advice on how to do this - available to download at <a href="https://www.som.org.uk/sites/som.org.uk/files/COVID-19">https://www.som.org.uk/sites/som.org.uk/files/COVID-19</a> return to work guide for managers.pdf

"Long COVID patients experience persistent symptoms after the acute infection that prevent them from resuming their normal lives and work," says Professor Lode Godderis who led the study, specialist in occupational medicine (KU Leuven) and Director of the Service for Prevention and Protection at Work (IDEWE). "It is important, in addition to searching for the causes, to help people to resume their daily activities and work. A multidisciplinary approach is therefore necessary including support in getting back to work, because we know that after three months of incapacity it becomes increasingly difficult to return to work."

Some people recovering from COVID-19 still experience symptoms weeks or even months after their infection which can impact on their daily functioning, including their ability to work. Return to work is complex and will differ for each individual. SOM was pleased to see NHS England offer return to work support including occupational health in clinical pathways for long COVID clinics. SOM considers that occupational health professionals should play an active role in the return to work.

Working is generally good for health. Return to (adapted) work needs to be prepared and can be an effective part of the rehabilitation. Occupational health professionals, where available, should develop a close and trustful relationship with all stakeholders to initiate a return to work. The worker with long COVID should be allowed to be actively involved in (re)designing his/her work.

SOM understands that for most businesses, helping workers return safely and productively will be a challenge. Its advice is for businesses to plan for any return, and any plans should have the agreement of managers, human resource professionals, the workers themselves and the unions that represent them.

OD Consultant Lesley Macniven FCIPD, contracted COVID-19 in March 2020 and became an early campaigner for patient group Long Covid Support. As Chair of their multi-disciplinary Employment Group, who are balancing advocacy and their own, paced return to professional work, Lesley summarises what the group have learned in 2021: "Patient groups like ours have built up significant expertise on managing long COVID. It is evident one size can't fit all, and we must allow workers flexibility and support to listen effectively to their own bodies. Workers need to convalesce, then recuperate through a very gradual, phased return to work (over many months if absence has already been prolonged) to allow a sustainable return."

# **Notes for editors**

### Long COVID

An estimated 1.1 million people living in private households in the UK (1.7% of the population) were experiencing self-reported "long COVID" (symptoms persisting for more than four weeks after the first suspected coronavirus (COVID-19) infection that were not explained by something else) as of 5th September



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2021; this is up from 970,000 (1.5%) as of 1st August 2021, reflecting increased COVID-19 infection rates in July 2021. See:

https://www.ons.gov.uk/peoplepopulationandcommunity/healthandsocialcare/conditionsanddiseases/bulletins/prevalenceofongoingsymptomsfollowingcoronaviruscovid19infectionintheuk/7october2021

The report uses the name 'long COVID' and so do the NHS webpages for the public and NICE <a href="https://www.nice.org.uk/guidance/ng188">https://www.nice.org.uk/guidance/ng188</a>. The report also discusses on page 8 that different names and definitions are in use. The report is free to download from the HSE website.

Some people recovering from COVID-19 still experience symptoms such as fatigue, fever, and cognitive dysfunction for weeks (5% to 36% of people) or even months (5% to 15% of people) after their infection. This is commonly referred to as long COVID. Long COVID is potentially a serious Illness, with broad negative consequences for the individual suffering from it, as well as at the societal level. In addition, financial and employment consequences are arising and elevated levels of sickness absence and presenteeism are to be expected.

#### **KU Leuven**

The Centre for Environment and Health is part of KU Leuven Department of Public Health and Primary Care, a multidisciplinary department with a focus on community health, best practice and health policy. The Centre has a long tradition and extensive experience in assessing the exposure to environmental agents studying the underlying mechanisms of environment related disease development and developing biomarkers.

The IDEWE Group is made up of IDEWE, Belgium's largest external service for prevention and protection at work, and IBEVE, which specialises in safety and the environment. For more than 50 years, nearly a thousand of its experts have worked to support and advise over 35,000 employers and 822,000 employees on the creation of safe, healthy working environments.

## **About The Society of Occupational Medicine**

The Society of Occupational Medicine (SOM) is a multi-disciplinary professional society whose membership includes over 1,850 OH doctors, nurses, physiotherapists, occupational therapists, and technicians. SOM Patrons are Lord Blunkett, Dame Carol Black, and Sir Norman Lamb.

### About occupational health (OH):

- OH helps people of working age access and stay in appropriate work and live full and healthy working lives despite underlying disabilities or health conditions. Occupational clinicians help employers reduce sickness absence and increase productivity by providing advice on best practice and how to comply with legal duties such as the Equality Act 2010 and Health and Safety legislation. They advise on fitness for work, return to work programmes, workplace adjustments to enable people with health conditions to return to/remain at work, suitable alternative work, and early retirement due to ill health.
- OH clinicians interpret the instructions of the government and the most up-to-date clinical evidence to support businesses in keeping their workforce well. They use their combination of clinical expertise and deep understanding of how health affects work to empower managers and employers to make the right decisions, at the right time, to ensure the health both of their employees and their businesses e.g. what employers should do when workers are pregnant and what steps managers should take with their older and more vulnerable employees.
- The need for robust and increasing OH services in many sectors has been highlighted during the COVID-19 crisis. The need for advice from OH on all aspect of business policy, the adequacy of control and how to protect our workers continuing to face the public has never been greater.

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