

## A NURSE'S EXPERIENCE OF COVID 19, CANCER AND WORKING FROM HOME

### BY ANNE WAREING

I began this year with a new job, new uniform and a plan for returning to work as a nurse after my diagnosis and treatment for Non-Hodgkin's lymphoma in 2019. I was looking forward to taking another step forward and putting into action the advice that my coaching sessions with WWC had given me so that I could work effectively whilst also managing my ongoing immunotherapy treatment.

And of course, we all know what happened next ... within 4 weeks of my start date my workplace had treated the first patients infected with COVID 19 in the UK. Having worked in the NHS throughout the era of SARS and Ebola I, like everyone else, clung to the hope that this virus wouldn't spread and disrupt the plans I had made.

However, as the news bulletins became saturated with information about COVID 19 one of my jobs at work was to contact patients to advise them not to come into hospital for routine appointments. Now I was back at work I wanted to remain so and work alongside colleagues as I would have done previously before my diagnosis.

Then a message from a friend living in lockdown in Italy and some calls from my family made it clear that this virus would put me once again on a different trajectory to that of my colleagues. The most important risk assessment now became my own and I will be eternally grateful to the charitable sector for how responsive they were to the evolving situation, issuing clear direct advice via websites and helplines. Consequently, a week before the Prime Minister's announcement I rang my manager to discuss how I would be able to work safely. It was a difficult conversation for me, particularly as I had only worked within the department for a few weeks. However, my previous coaching sessions had prepared me, and my manager accepted my request to work from home, even though COVID 19 numbers were at this time still relatively low.

So began another "new normal"....

Working from home was not something I had previously done, nor imagined doing, during my nursing career. However, there were lots of queries and my initial work involved helping others interpret the government guidelines which I had applied to myself. I realised how fortunate I was to have an employer that did not challenge why I needed to work from home during COVID 19, as I spoke with other people who were not in the same position. There were also some practical issues to deal with such as quickly adapting my home and resolving IT and technical issues. Emotionally, I also felt guilty that I was not on the frontline and separated from colleagues during their challenging times too.

Gradually my role settled into conducting outpatient clinics via telephone. As a patient myself I know there are positive and negative aspects to virtual clinics. As a professional I acknowledge that patient assessment is rather different via telephone however the clinics did enable us to maintain contact with the majority of our patients. However, when I resumed my own treatment, I know I was relieved to see and be amongst the nursing staff on the oncology day unit again.

One of the biggest revelations about working from home for me was how exhausting it could be, even though I no longer had the challenge of a commute. I realised it was just as important now for me to rest and recuperate as I had discussed previously during my coaching sessions.

The other key issue has been making time to talk with colleagues; our conversations initially focussed upon work problems and occurred on an adhoc basis. However, during a virtual coaching session my coach reminded me of the importance of keeping in touch regularly with colleagues, the department and the organization as a whole. My immediate team established regular debriefs and I found that my colleagues enjoyed and valued this time as much as I did.

Although this year has undoubtedly been tough it has enabled me to acquire skills which I may need again if I have a relapse in my condition. Furthermore, having been classified as “extremely vulnerable” I have experienced the fears and uncertainties that COVID 19 has brought to all aspects of people’s lives which has enriched my professional skills and expertise. More widely, I hope that the NHS will integrate flexible working options to all levels and locations of the organization so that people with cancer and long-term conditions can continue to work throughout treatment should they wish to do so.

As 2020 draws to a close it has been yet another unprecedented one for me – and how often has that word been used this year! However, I am sure that the struggles of 2019 have sustained me during the low times of this year. Moreover, I am proud that I have managed to return to work - supporting patients and colleagues - at a time when it was needed more than ever, albeit in a different way to that I had envisioned.