

# Occupational Health Service

## Supporting Employees with Covid-19

### Guide for Managers

#### What is 'Post-COVID' and 'Long COVID'?

Nice guidelines have divided COVID-19 stages into **Acute COVID-19** (Signs and symptoms of COVID-19 for up to 4 weeks), **ongoing symptomatic COVID-19** (Signs and symptoms of COVID-19 from 4 weeks up to 12 weeks) and **Post-COVID-19 syndrome** (Signs and symptoms of COVID-19 persisting for more than 12 weeks).

The term 'long COVID' is commonly used to describe signs and symptoms that continue or develop after acute COVID-19. It includes both ongoing symptomatic COVID-19 and post-COVID-19 syndrome.

We are still learning about the impact of COVID-19, but we now know that:

- One in five people have symptoms after four weeks, and one in ten has symptoms for 12 weeks or longer.
- There is significant variation in symptoms between individuals and no defined diagnostic pathway for Long COVID.
- Long COVID symptoms can be unpredictable and symptoms fluctuate over time.
- Common symptoms include: fatigue – tiredness not improved by rest, breathlessness, muscle and joint pain, chest pain, cough and mental health problems including anxiety and depression.
- Other symptoms include headaches, difficulties thinking and finding the right words, heart and blood pressure problems, loss of smell, skin rashes, digestive problems, loss of appetite, sore throat, among others.
- Long COVID can have unusual patterns: relapses, and phases with new, sometimes bizarre, symptoms. An initially mild or even asymptomatic case can be followed later by severe symptoms impacting markedly on day-to-day activities.

A word of reassurance: although recovery from COVID-19 can be slow, many people improve with time, and treatments are expected to improve as more becomes known. Returning to work is part of the recovery, even if it must be flexible or involve reduced hours and pacing over many months.

#### The Manager's Overall Responsibilities

Your role is to support the returning worker by maintaining open communication and supporting work modifications where possible. You do not need to have all the answers.

The unpredictable and fluctuating nature of Long COVID means that some returning workers may need return to work support.

If you are not sure what to do or need help and advice, ask for help from other managers, OHR HR Advisor or Occupational Health Professional.

Everyone is different. Each person will require different levels of support depending on their role, their long term symptoms, their work environment, and personal situation. It is important to listen to the returning worker's needs and concerns, allow them to be proactive in making changes that allow them to manage their health and work, and work together to find solutions that work for them and your team.

Managers are encouraged to refer to the Management of Sickness and Absence Policy and Guidance <https://hr.gov.im/sickness-and-absence/sickness-absence-procedure/>.

### **Why are managers important in supporting return to work?**

The experience of being unwell, especially with Long COVID with its fluctuating and unusual symptoms, can be concerning both for the worker and the manager but it does not need to be – the advice in this leaflet will help you support your colleagues back into work.

As a manager you play a vital role in supporting your worker back to work. As a manager you are:

- Often the first point of contact for the worker
- Best placed to help them to feel valued and help them to retain a sense of identity when they are not at their best
- Able to put in place job modifications or work adjustments to enable them to cope with both job and health on their return

### **What should you do to help someone with long COVID-19 return to work?**

Everyone is different. Each person will require different levels of support depending on their role, their long-term symptoms, their work environment, and personal situation. It is important to listen to their needs and concerns, allow them to be proactive in making changes that allow them to manage their health and work, and work together to find solutions.

Following these steps will help plan what can be done, and enable you to give your returning worker the best chance of getting back to work safely, and staying at work.

**Step 1:** Stay in touch while the worker is absent from work.

- Maintain contact - let them know you are thinking of them. Agree how you will stay in touch (frequency; via phone or email).
- If the worker is off work for longer than 14 days, they will be required to provide a Drs Medical Certificate  
Note. If they do not supply this, ask them for it.

- Agree what to tell others. It is helpful to agree what information should be shared with colleagues and clients, but respect confidentiality.
- Discuss about occupational health (OH) referral. OH teams are well experienced in advising on adjustments and support, communicating advice to relevant managers after obtaining worker consent. Advice use of staff welfare for those feeling emotionally distressed.
- Give them permission to rest and recuperate. Many people feel guilty about being off work and this can hinder their recovery – let them know you are here to help and support, rather than ask them when they think they will be returning.

**Step 2:** Prepare for the worker's return.

- Some people may require medical clearance before returning to work - for example, where work involves high exertion or stress, safety-critical roles, or when workers have pre-existing health conditions that have deteriorated due to COVID-19.
- Put yourself in their shoes: How would you feel if you had been seriously ill and unsure about whether you would fully recover? Try to think about how the person might be feeling, what they might be concerned about and what their priorities might be.
- Arrange a return to work conversation to agree a Return Plan. Some workers may well experience fluctuating symptoms and may take time to be able to work at the same level as before. Be prepared to be flexible and for things to change over time – you may need to change the Plan.

**Step 3:** Hold a return to work conversation.

- Before the conversation think about modification to the job and duties that may be workable options and ask them to do the same. Make sure they come to the meeting prepared to tell how their condition might impact on their work, what tasks they feel able to do now and, importantly, what modifications will help them do (part of ) their job. Remind them to take advice from their doctors or occupational health (OH) on anything they should and should not do. It can be helpful to involve Human Resources or union representatives.
- During the conversation take time to check-in and set them at ease, ask how they are, ask if there is anything they are worried about and explore solutions. Talk about possible job modifications, work priorities, work schedule for the first weeks of their return – ask for their ideas. Explain that you will monitor and review how things are progressing. Discuss what the first day and week of work might involve. Agree on a Return to Work Plan that you are both comfortable with. It needs to be doable, so make sure it sets out who needs to do what and when. It also needs to be flexible because until you try, you will not know what works for you both. It is often good to share the Plan with OH, OHR, or possibly work buddies.

**Step 4:** Provide support during the early days of the return to work.

- Make sure you are available to welcome them back on the first day.
- Give them permission to take things slowly to start with as this will prevent them feeling overwhelmed and reduce the risk of further absence.
- Remind them of the work priorities, schedule, and modifications you have agreed and check these are in place and working well.

- Ensure that the returned worker is updated on any new changes that have been made to the way work is done, introduced to new colleagues, recent news etc.
- Arrange regular check-ins to talk through how they are managing their health and work.

**Step 5:** Provide ongoing support and review regularly.

This is where it is a bit different from usual return to work. Because the symptoms after COVID-19 fluctuate and change over time, it is even more important that workloads/job modifications are regularly reviewed. If available, regular review of progress following return to work with an Occupational Health Professional is recommended. This way you can anticipate problems and ensure that your colleague has the best possible chance of managing any ongoing symptoms and staying in work.

- Communicate regularly and openly – arrange check-ins to see what is working and what needs to be reviewed.
- Review workloads and agree to gradually increase the duties as time goes on – sometimes this will mean over months rather than weeks. For some people, a successful return will be more likely if this is at a slow pace. This is likely to prevent relapse and further absence. For a few, ongoing symptoms may mean that they are unable to meet the requirements of the job – if so, it could be time to talk about a change of duties or redeployment.
- Seek advice from OHR, where appropriate. Interim policies on COVID-19 may need to be implemented, particularly about sickness absence and the need to support rather than penalise those who need an extended period of absence or modified duties.
- Extended absence or modified work may have implications for staff training, please consider how this could affect training requirements, particularly in regulated professions.

### **Examples of job modifications**

There are lots of possible modifications or small changes that can make it easier for returning workers to manage their health and their work. Occupational Health Professionals see the best results when manager and worker figure this out together. Be flexible. Do not be afraid to make suggestions and encourage ideas from your colleague. Obviously, you may not be able to accommodate every suggestion, but usually it is possible to find workable modifications to suit the job. The key thing is to have a plan you both agree on.

Workers may need a gradual return to work ('phased return'). A standard 6 weeks phased return programme (<https://hr.gov.im/sickness-and-absence/phased-return>) may not be adequate in Long COVID. A longer programme may need to be considered. Discuss options with OHR and OHS.

For those workers with fatigue symptoms remote working and 'pacing' (i.e. working with rest breaks as determined by symptoms) is important. Some workers may be able to continue their full hours, for others a planned reduction of working hours could be more effective.

Sometimes workers with Long COVID can relapse if they overdo it, perhaps not until days later. You will need to be guided by the worker (and be aware that they too are still learning how to live and manage with their symptoms).

Modifications should be tailored to the individual and will depend on what their specific symptoms and limitations are, how they affect their ability to do things and the job role. Individualised recovery and rehabilitation plans are necessary. Some of the following may seem obvious, but it is useful to formalise these to ensure that they happen.

- Alterations to the timing of work (starts, finishes, and breaks)
- Alterations of hours worked e.g. shorter days, days off between workdays.
- Alterations to shift work e.g. consider suspending late or early shifts and/or night duty, so the individual works when at their best.
- Alterations to the patterns of working e.g. pacing, regular and/or additional breaks
- Alterations to workload e.g. » fewer tasks than normal within a time: more time to complete usual tasks and not to work to tight deadlines.
- Temporary changes to duties or tasks ('altered tasks').
- Support: clear line of help – someone to ask or check with; a 'buddy' system; time off for healthcare appointments and not working in isolation.
- Clear objectives and review mechanisms.
- Working from home part of the time where possible
- Regular checks on whether the symptoms are fluctuating.
- If you think the medical condition is likely to be considered a disability, the employer may have extra legal requirement to make reasonable adjustments.
- Seek advice from OH/OHR.

### **How can Occupational Health Services help you and your returning worker?**

Occupational Health Professionals recognise that when duration of illness is long, returning to work too soon or to a full workload can cause relapse. They can help in the following ways:

- Carry out an individualised assessment, generating an individualised recovery and rehabilitation plan and ensuring relevant medical investigations have been performed.
- They are experienced in assessing employees with new health conditions, poorly understood conditions, and at evaluating the impact of symptoms on functioning
- Contribute to an individualised workplace/task risk assessment with you and your colleague
- Consider safety of the individual worker and their co-workers
- Put in place health surveillance if adjustment to standard health assessment is required for some other risk.

## References

<https://www.som.org.uk/covid-19-return-work-guide-managers>

<https://www.nice.org.uk/guidance/ng188/resources/covid19-rapid-guideline-managing-the-longterm-effects-of-covid19-pdf-51035515742>

<https://hr.gov.im/sickness-and-absence/sickness-absence-procedure/>

Managing Covid related symptoms during sickness absence:

<https://youtu.be/3fHeLbDo40U>

Return to work rehabilitation:

<https://youtu.be/29KcxHJb4qU>

Managing ongoing Covid related symptoms in the workplace:

<https://youtu.be/JNUBmWJgFms>

Supporting staff with ongoing Covid related symptoms to return to work: advice for managers:

<https://youtu.be/bryRdjIzqRM>

**Issued by Occupational Health  
Office of Human Resources  
Cabinet Office  
April 2022**