

# SUPPORTING SUSTAINED RETURN TO WORK AFTER LONG COVID: Insights from Teachers

## WHAT IS LONG COVID?

In the UK, around 2 million people report having Long Covid - this means they still have symptoms more than three months after having the COVID-19 virus. Long Covid (referred to here as LC for short) can affect many body systems. It causes a wide range of symptoms which can be very debilitating and have devastating effects on people's lives, including their ability to work. People who work in frontline critical service jobs have been especially affected by LC.

## THE RESEARCH

We wanted to understand experiences of LC for police officers, nurses, and teachers, and the impact it has had on their ability to work. Our aims were to find out:

1. What has made it easier or more difficult for people with LC to return to and thrive at work.
2. How managers and employers have tried to support employees with LC and other illnesses, and how people in management or leadership roles can be supported too when an employee has LC.

For the **teacher sample**, we interviewed 19 members of the teaching profession working in public sector schools in Scotland when they became unwell with LC and 5 people in line manager and senior leadership roles.

We outline the key recommendations from the research on page 1 and report the main findings in more detail on pages 2 and 3.

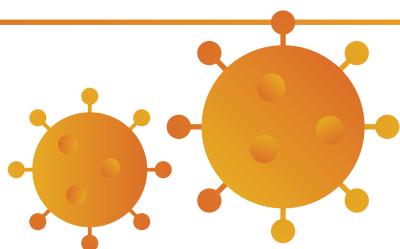
## WORK STATUS AT TIME OF INTERVIEW:



**10** Returned to teaching  
(few in original role with no workplace adjustments or reduced hours)



**9** Did not return to teaching  
(career break / left service / redundancy / ill health retirement)



## RECOMMENDATIONS :

1. **Exploring ways to increase flexibility in teaching would support sustained return to work** for people with energy limiting or episodic conditions, such as LC. This includes considering extended phased returns rather than the standard 4-week period.
2. **Regular reviews of workplace adjustments** required by teachers with LC (or other similar conditions) **would help to ensure they are appropriate and being observed.**
3. **There is a need to provide managers with training or resources designed to improve their understanding of LC (and other episodic illnesses) and the ways they can affect employees' capacity to work.** Specifically, managers should be helped to understand: i) the episodic nature of LC symptoms; ii) the high price that people pay for prioritising getting to work - often this means other areas of life have to be put on hold; iii) the significant impact on mental health, particularly if people can no longer do the roles they have been so strongly committed to; iv) how to improve return to work measures/pathways that retain valued, skilled and experienced staff and aid their recovery.
4. **Managers of teachers with LC would benefit from greater organisational support** when faced with balancing the needs of individual teachers returning to work after illness alongside the wider demands of the school.
5. **Supportive workplace relationships are vital to sustained return to work.** People with LC stressed the importance of managers and colleagues who: i) trust and believe them, by taking their account of LC and its effects seriously; ii) listen and ask supportive questions to make a genuine effort to understand LC and its impacts; and iii) help identify health needs proactively and collaborate on a return to work plan.

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## KEY FINDINGS

### THE DEVASTATING IMPACT OF LC

The majority of teachers with LC that we interviewed had been off sick for a sustained period and only five were able to return to their original role without any workplace adjustments.

All teachers with LC talked about the significant negative impact that their symptoms had on their capacity to do their job. Many had ongoing debilitating symptoms that varied over time in unpredictable ways, making it hard to know how to return to and stay in work.

*I gradually built up my time, I went back to work. And I didn't get any better [and] I started to feel worse. I managed but that was literally all I was doing was working [...] And then I'd come home in agony, um, I'd be crying, I'd go to my bed.*

- Teacher 10

The perceived limited scope for flexibility within teaching workplace practices and policies was a key barrier to returning to teaching with LC.

*Reasonable adjustments at work were something that was discussed [...] But because, like for me, it was the noise [...] what adjustments can be made there? [...] I can't teach all day - well, your contract is to teach all day, so, what adjustments could be made there, do you know?* - Teacher 05

### THE IMPORTANCE OF INCLUSIVE & SUPPORTIVE RESPONSES FROM MANAGERS & COLLEAGUES

Teachers with LC talked about **supportive and inclusive responses** from managers and colleagues as being vitally important. Examples included:

i) Managers and colleagues working with teachers with LC to look for opportunities for flexibility within workplace policies and structures.

*Anyway, it [my phased return to work] did work [...] Just the slowness of it and the fact that I felt that I had an input into what was happening... and I was the one able to say, "Yes, I can do that this week" or "No, I don't feel I can do that this week, I'll just stick with what I did last week."* - Teacher 10

ii) Work relationships that involved trust, sensitivity, being made to feel like a valued and included member of the team.

*I've got a really good faculty, I love them all. They're really good people I know I can depend on and they have also been very supportive, saying, "Listen, don't worry about it. We'll [...] take care of things."* - Teacher 18

iii) Difficult conversations and decisions about leaving teaching being handled with sensitivity, compassion and acknowledgement of the personal loss experienced.

*Being a support for learning teacher was a really big part of who I was. And just, I don't know, yeah, just acknowledging that [and] that you're not forgotten [...] but even just going in and having a cup of tea with the headteacher, meant a lot to me.* - Teacher 02

Responses, **behaviours and practices which were unsupportive and unhelpful** included:

i) Dismissive attitudes among managers / colleagues (often linked to limited understanding & knowledge of LC).

ii) An unwillingness to give due consideration to requests for workplace adjustments, giving the inflexibility of teaching as justification.

iii) Disregarding the need for workplace adjustments, especially in times of increased staffing pressures.

*I had to fight for basic things, like when I went back [the] department was on the [upper] floor so I had to fight for a lift key, because they expected me to walk up three flights of stairs and I couldn't breathe when I got to the top of them. I was still expected to do cover [for other teachers], so you're going from one class to another to another. I asked if cover could be sent to me [...] and I was told no.* - Teacher 12



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## LOSS OF, AND CHANGES TO, PROFESSIONAL IDENTITY

Most participants talked about their role as a teacher being closely tied to who they were as a person. As a result of LC, the majority had experienced a loss of, or changes to, their professional identity, such as feeling they were not the teacher they once were because they had been forced to change their teaching practices to accommodate symptoms. For those who could not return to teaching, there was a more profound loss of identity and detrimental impact on mental health.

*I was the typical type A personality. [...] I'd get up early, I would go to work. I absolutely loved my job [as a primary school teacher] [...] my life's completely unrecognisable [now. I'm not well enough to work and I have] this feeling of being like a ghost. It was like I was there [at school] one day and now I'm just gone. - Teacher 01*

## THE IMPACT OF PRESSURES ON PUBLIC SECTOR ORGANISATIONS

All managers and many teachers spoke about the organisational challenges they had observed within teaching and across public service organisations more generally.

Managers talked about the challenges involved in supporting teachers who were off on long-term sickness absence while also meeting the organisational demands of the school.

*You get a member of staff come to you and reveal to you that they've had a [diagnosis] I don't think you could pretend that you don't carry that with you. But I suppose that the balance to that is always [...] the impact on wider staff. So you flip from [...] being quite upset at what you're hearing to that almost tactical "Right, operationally I need to put something in place to manage that" [...] Like a lot of leadership roles, you're trying to balance the two of those things up. - Manager 03*

Some spoke about having to reduce their own non-contact time to cover classes because there were often no other options.

Senior leaders and managers highlighted that the current system is precarious, especially given challenges in the recruitment and retention of teachers:

*Flexibility is quite difficult [in teaching], although I firmly believe it's something that we as a profession are going to have to look at going forwards in order to make us more, perhaps more appealing in that respect. - Manager 05*

## USEFUL RESOURCES

NHS Inform, Long-term effects of COVID-19 (Long Covid) | Guidance on Long Covid, NASUWT | Long Covid: A Manager's Guide, Society of Occupational Medicine | COVID-19 return to work guide For recovering workers, Society of Occupational Medicine | Long Covid and return to work: What works?, Society of Occupational Medicine

## ABOUT THIS STUDY

This briefing is based on research funded by the Chief Scientist Office (grant no: HIPS/23/08). The research team included:

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