Practice and pregnancy during COVID-19

IN CONVERSATION WITH

Francesca Lynch

The global COVID-19 pandemic has had a significant impact on each of us, both personally and professionally. We have had to adapt the way we live and work and find our 'new normal'. **Francesca Lynch**, Senior Paediatric Audiologist at Guy's and St Thomas' NHS Foundation Trust, and expectant mother, tells us about her own experience of living and working through the pandemic.



Francesca Lynch, BSc,

Senior Paediatric Audiologist, Children & Young People's Audiology Centre, Guy's and St Thomas' NHS Foundation Trust, UK.



Tell me a little about yourself and the impact of COVID-19 on you personally?

I am a Senior Paediatric Audiologist and have been working at the Children & Young People's Audiology Centre at St Thomas' since 2015.

I found out that I was expecting my first baby about a month before the COVID-19 outbreak, and what was initially a very exciting time for myself and my family, quickly turned into a daunting prospect. There were a number of uncertainties around seeing family, work and also the level of antenatal care I could expect.

Initially there was limited evidence-based guidance on the potential impact of COVID on expectant mothers and unborn babies, and no clear guidance as to whether it was safe for me to continue in my patient-facing role. So, based on the thoughts of myself and my partner, and with the support of my management team, it was agreed that I would self-isolate, and work from home.

As the pandemic progressed, further guidance became available and, as such, I have continued to work remotely, carrying out remote care appointments throughout COVID-19.

How as life been working from

home over the last six months? I feel very fortunate that our service has quickly adapted to integrate remote care appointments into our pathways. Prior to this, I was concerned that, with over six months left to work before I went on maternity leave, the amount I could contribute from home would be limited.

The development of these remote care pathways has meant that I have been able to deliver over 400 patient consultations virtually since May, which has not only given me much needed structure to my days at home, but also allowed me to continue to contribute to the service at a level that I am comfortable with. Without having this structure to focus on, the last six months would have been a lot more challenging mentally.

Were there any downsides to working at home for such a long time?

There are, of course, challenges of being at home full time, and I definitely experienced cabin fever initially. I have mainly missed the social aspect of work and face to face interactions with colleagues and patients. However, our team implemented weekly video meetings which not only helped keep me up to date with the frequent changes that were being made to the service, but also helped to keep me connected with the team. It was also interesting finding out about the experiences of my friends and colleagues who had been redeployed to help in other areas of the Trust. That said, as my pregnancy has progressed, I have been grateful for a more restful time, more time with my husband, and I have definitely not been missing the commute!

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What changes brought on by COVID do you think should continue?

Our service covers a large area of south London, and some families travel long distances to reach us. Feedback from parents is that that the expense of travel, as well as time off work and school for regular appointments is significant. Parents tell me that remote care appointments have helped to alleviate some of these challenges, particularly in cases where there are no new hearing concerns. Being able to adjust individual review timeframes based on feedback from patients and parents is not only more convenient for families, but has allowed the service to prioritise those patients most in need of urgent face-to-face care, and reduce the number of unnecessary patient visits to the hospital.

From an audiologist's perspective, I have enjoyed the interactions with families, and both I and other colleagues have noted that families, and in particular teenage patients, are much more open and comfortable during remote care discussions than they are during face-to-face appointments. This has led to thinking about long-term service development, and how we can best take advantage of the technology now available to us when redeveloping our permanent care pathways.

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Finally, what is your lasting reflection on being an audiologist in self-isolation during COVID-19?

Overall, my experience of home working and remote care appointments has been overwhelmingly positive given the circumstances. Having a clearly defined role within my team, even though I can't be present in person, has made the adjustment to home working during COVID-19 more manageable. During a time where there has been a lot of uncertainty, having daily structure, feeling like I am making a significant contribution and continuing to deliver in my role has made the experience much more positive!

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