

How has the COVID-19 pandemic enhanced my clinical and non-clinical skills?

It truly has been a strange time. As I sit here writing this, we are only just coming out of a year of multiple lockdowns, surges, peaks, rising death tolls and the long-awaited rollout of the covid vaccine. However, even though a year has passed, there are still uncertainties about what the future holds. I will never forget the helplessness I felt when I received multiple calls from my family in Italy asking questions about this deadly virus back in January 2020. Much like many others working in healthcare, I knew that this virus was going to hit us soon and we needed to prepare.

As anaesthetists it meant that we were going to be part of the frontline. Most of us were scared and worried. However the adrenaline and fear of the unknown kept us motivated and encouraged. Like many other hospitals our trust was forced to cancel elective operations. We took this opportunity to prepare our staff whilst the workload and covid admissions allowed us to. We were running daily drills for multiple skills such as intubation, proning, donning and doffing. Our Intensive Care team supported us with sessions on how to crosslink skills and the use of alternate ventilator settings which I had previously not been familiar with. My clinical skills curve steadily rose day by day on how to look after extremely unwell patients. Soon after, I was filling shifts in the ITU, also helping with roles of other professionals such as HCA and nursing tasks.

On the anaesthetic side we also learnt how to work in new ways – personal protective equipment and lateral flow tests had become part of our daily routines. Patient pathways were coordinated as green and amber to avoid any cross-infection. Being the airway fellow in my hospital meant that the anaesthetising of COVID-19 patients for tracheostomies became a frequent occurrence. I learnt how to become more efficient in transferring patients with their ITU ventilators and how to support the surgeons in performing safe tracheostomy changes whilst avoiding any unnecessary disconnections or haemodynamic compromise.

But now moving onto non-clinical skills which I believe are indispensable for our profession. Firstly, let's talk about team working. From the very start of the pandemic we were faced with creating and enhancing new teams. I was suddenly intubating with the assistance of

scrub nurses as ODPS and runners whilst recovery nurses had turned into intensive care nurses overnight. Staff were scared and anxious especially for those who were suddenly faced with performing a role they weren't doing before. I strongly believe that it lies within our profession and responsibility to lead and look after our colleagues. Simple acts of kindness such as ensuring everybody knew each other at the beginning of the shift and distributing roles was key in our team working. I ensured that I was supporting staff and continuously teaching and encouraging staff to return to work the following day.

Second, it is needless to say how difficult communication has become with the use of face masks and other multiple layers of PPE. Closed loop communication and clear speaking suddenly became of highest importance.

Lastly, human factors and wellbeing have played a tremendous role in the last year and taught all of us how to adapt to the 'new normal'. If there is anything the last year has taught us, it is that we need to remember that we are human and we need to look after ourselves and our colleagues. We have seen and dealt with traumatic events and we need to process the past so that we can move forward. Social distancing rules and lockdowns led to a lot of isolation and loneliness. And whilst we are in the process of seeing the steps of lockdown ease, there will be an aftermath of mental health wounds to be dealt with. As part of the post covid rebuild I want to help and support my NHS colleagues at the forefront. Covid has taught me that simple gestures like bringing in cake to the department and listening to colleagues can help with wellbeing whilst also enhancing team working. If I was to win this competition, I would use the money to implement further wellbeing strategies in our department including the introduction of a wellbeing notice board and stress-release furniture, such as bean bags and a massage chair.

Moving forward, several lessons have been learnt in the last year on both clinical and non-clinical levels. We are still not fully through it.