Reflections on the Covid-19 pandemic - Cath Comley

The first inkling that I was going to be more involved with Covid than I had originally thought was when a letter arrived from the NMC. As I left the register five years ago or less would I be prepared to re-join under emergency legislation. Obviously, I immediately said yes and within forty-eight hours had my old PIN number back.

The second thing that happened was that the NHS organisation I work for was asked to lead the community swabbing response. I immediately offered my services because by then it was clear that Covid was going to pose unprecedented challenges to the NHS. Within four days we were undertaking training. The training was for the nurses in the team a refresher of donning and doffing in theatres nearly 30 years ago. Within five days we were running our first drive up swabbing clinic for frontline clinicians and their households.

One thing that training at The London taught me was the ability to adapt to every situation. This held me in good stead as the drive-up clinics meant I could be swabbing a Consultant one minute then a child the next. Swabbing is the same regardless of age, but the approach is as you can imagine is very different! For the older children it was very much 'Mum tells you not to put things up your nose well guess what I am going to do'. Basically, turning it into a huge joke. For the younger ones it was a matter of distracting them or suggesting that they might want to show a younger sibling there was nothing to be scared of. Sometimes it worked and sometimes it most definitely didn't!

The other half of our role was providing a swabbing service to our Care Homes. There were usually two of us- clean nurse/dirty nurse all over again. It certainly took me back. The approach was different depending on the residents and their mental/physical health. I sat with one lady with dementia whilst we had a sing then she happily let me do her swabs. Staff had been convinced that she wasn't going to let me swab her. Our swabbing teams work meant that outbreaks in homes were identified early and appropriate steps taken.

Our Covid response allowed me to make a difference in two ways. It allowed frontline clinicians to return to work quickly if they or anyone in the household had a negative swab. Equally it identified those who needed to isolate. For our Care Homes it meant if an outbreak was identified then appropriate support could be offered to them.

Our team consisted of colleagues from Public Health, office-based staff from our local hospital and staff from the Clinical Commissioning Group where I work. This meant we all bought different experiences to the team. However, the one thing that we all had in common was a common aim of ensuring that we provided a first-class service to the people of Stockport. This I believe we did.

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