

## Hull Primary Care Addictions Service

### Sharon and Catherine – Case Managers



We're not sure our experience of working throughout lockdown is any different to anyone else's working in our service. We have all adapted to the most unique of years, trying to manage our work alongside our own personal experiences and like most people there have been struggles and triumphs.

We worked from home A LOT in 2020 and when we could, gradually returned to the GP practice we work from; dividing our time between the workplace and our dining room tables. At the start of all of this our priority was to ensure that our clients were assured of continuing contact, that we would continue to offer support to them and as a service we would do our best to make sure their treatment would remain consistent. How this would work we didn't know at the beginning; we went from seeing clients face to face in a GP practice to not seeing them face to face and working from our living rooms!

We learned how to adapt in order to deliver our service. All our clients were able only to have telephone contact due to limited technology. We provided weekly telephone contact to clients to begin with and as this "new way of working" progressed, moved to fortnightly telephone contact if the client was happy with this and funnily enough some were! For some clients we were the only outlet to share their feelings around recovery so it was vital we were there to listen.

We made sure that the surgery we work in were also assured of our presence albeit on the phone and at times from behind a mask. During Lockdown 1, my colleague and I supported the delivery of prescriptions to pharmacies to limit the footfall into the GP practice- go Cagney and Lacy! As we came through the first stage, we began to

slowly return to some kind of normal but always with mask, sanitiser, safe distancing and “have you got a temperature?”

We have made use of MS Teams to hold clinical review meetings with our GP in Shared Care and at times that were convenient for him as the vaccination programme began to roll out and his time was in demand. This creative way of working not only helped with clinical safety and was helpful to a client’s recovery but also reinforced a sense of team work. This connection via Teams helped to bring a sense of normality and definitely promoted efficiency as, we didn’t need to travel to said meeting. Whilst at home we could attend meetings, meet with colleagues’ online, complete training and still put a wash load on!

The telephone has at times been the only way of communicating with clients. It has been a challenge providing psycho social support to clients *only* in this way in the absence of face to face contact. Oddly, it has made us appreciate the power of sight. Without even thinking about it, we have become skilled at observing body language, unsaid tells, a deterioration or improvement in a person’s appearance and their overall demeanour. We discover so much without any words being said. Uniquely, we have also been able to mutually appreciate what a challenging period of time this has been. For some it has been a time to re-evaluate and make positive changes; for some clients this break from the “norm” has promoted their recovery and helped them make real progress.

Looking ahead, a combination of the old and the new way of working could work for us. Nothing compares to seeing a person *in person*, therapeutically it wins hands down. However, meetings online and training online does work alongside the benefit of not spending time in the car travelling, let’s not mention the roadworks!

This year has taught us that we are social creatures (most of the time) and personal connections are important to our emotional wellbeing.

Overall we have been luckier than most; We have continued to work, spent more time with my daughter and family and been part of a great committed team. Jog on COVID and here’s to a sun lounger with a broly in 2022