



The Impact of COVID on Nurses (ICON) Qualitative Study

The Colt Foundation end of project
report September 2022

Professor Jill Maben and Dr Anna Conolly
on behalf of the project team*

* full team in Appendix 1

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Introduction

The origins of this study, which builds on a previous ICON survey (parent study) and two interviews with Sample 1 make this study complicated to report. We have explained the study origins and sampling further below (in background section). For clarity we provide a table here to indicate which data and analysis was funded by Colt Foundation.

Table 1: Project design and Colt Foundation commissioned data collected and analysed

Sample	Interview 1	Interview 2	Interview 3	Interview 4
ICON Survey	NOT Colt Funded: Used to sample participants for sample 1 and 2 for interviews			
Interview Sample 1			YES	YES
Interview Sample 2	YES	YES	n/a	n/a

Background

At the beginning of the pandemic an Impact of COVID on Nurses (ICON) survey was completed at three-time points by the nursing community in the UK, led by Associate Professor Keith Couper. We consider this study the ‘parent study’ to the project reported here because we sub-sampled from these survey respondents to get our first and second samples of nurses for interview for the Impact of COVID on Nurses (ICON) qualitative study. This qualitative study was initiated in June 2020 after the first wave of the COVID-19 pandemic in the UK. Conceptualised as a longitudinal qualitative study, 27 participants were interviewed in June 2020 (these participants are referred to as Sample 1). Twenty-

five of these participants were interviewed again in December 2020. The research with Sample 1 at this time was funded by the Burdett Trust and the Florence Nightingale Foundation.

Sample 1 interviews 3 and 4

After receiving the Colt Foundation funding 26 participants from Sample 1 were interviewed for a third time in August / September 2021 and 21 participants were interviewed for a fourth time in March /April 2022.

Sample 2 interviews 1 and 2

Twenty-three participants were purposively sampled from the survey (parent study) to include those not highly represented, if at all, in Sample 1. As before, sampling occurred through an opt-in method via the parent study survey (same as Sample 1). Sample 2 included children's ICU nurses, care home nurses, nurses from black and other ethnic minority backgrounds, nurses who were students during the outbreak of COVID-19 and other community nurses. Twenty-three participants were interviewed during August / September 2021 and 19 of these were interviewed again during March / April 2022.

Analysis

We organised data for analysis in two ways, which overlapped. Firstly, to facilitate the organisation of the data (Elliot, 2018) we used NVivo12 to develop inductive codes and subsequent themes across each of the two datasets (first and second interviews). Our systematic production and application of emergent codes enabled the reflection of the view of participants in, what has been espoused to be, a traditional qualitative manner (Elliot, 2018). Secondly, to avoid fragmentation of the data, which can occur with systematic coding, we wrote participant interview summaries, or pen portraits (Hollway & Jefferson, 2013) to preserve each participant's narrative. Mishler (1999) argues that narrative is an umbrella term, which covers a large and diverse range of approaches. Our narrative approach had some overlap with the earlier coding and theme generation stage of the analysis and included reading and preliminary coding to gain familiarity; finding connections in the data through successive readings and reflection, searching the text and other sources for alternative explanations and confirmatory and disconfirming data. Finally we wrote up an account of what has been learned, and illustrating (representing) the narrative arcs in the pen portraits, as well as selecting representative quotes (Hollway & Jefferson, 2013; Greenhalgh et al., 2005). As per longitudinal data analysis (Hermanowicz, 2013), each data set was subjected to within-wave analysis and data from each interview then compared with previous data from the same interviewee to facilitate both longitudinal and cross-sectional analysis.

Resources co-design

The project team developed a short film to share experiences with research participants at a face to face co-design day in August 2022 (see Appendix 2 for more details).

Summary findings

Nurses working at the front-line in all spheres (primary care, community hospitals, larger hospitals and those who have experienced redeployment) have struggled with the traumatic and distressing working practices experienced in altered care-landscapes with more critically ill patients. Building on our preliminary analysis of data from sample one at time points 1 and 2 (Maben et al., 2022), which identified systemic challenges, nurses' experiences of moral distress, and psycho-social impacts, we further explored the transitions and multiplicity of experiences encountered by the nurses across the trajectory of the pandemic. we have published widely to date (see Appendix 3 for details of project outputs).

Sample 1 insights

Out of 27 participants, sample 1 contains 21 nurses who were primarily hospital based and 18 who were redeployed, many to ICU. For those who were redeployed, the lack of training prior to their redeployment and their lack of choice regarding where they would be redeployed impacted greatly on their emotional wellbeing. In their recent interviews these nurses' have expressed their disillusionment and their intentions to leave the NHS or to find non-patient facing roles. Pandemic unpreparedness within the NHS, for example in regard to PPE supplies, and staff shortages, exacerbated by staff absences due to COVID-19, made an extremely difficult situation almost untenable for many nurses. We have published and presented from this work extensively (see papers published below for more details and those in preparation / under review). Data from interviews 3 and 4 (funded by Colt) are reported in the overall longitudinal paper where the data has been combined for reporting with sample 2 (see Conolly et al under review).

Sample 2 insights

Sample 2 contains 5 nurses from black and other ethnic minority group, 5 nurses who were students during the first and second waves of the pandemic, 6 nurses who worked in care homes, 7 community nurses and a children's ICU nurse. Black and other ethnic minority nurses referred to a sense of having to work regardless of the increased risks to their health posed by COVID. Many of these participants referred to having friends or family who were COVID deniers or anti-vaxxers and they talked about the stress this placed on their psycho-social wellbeing after having witnessed their patients' suffering

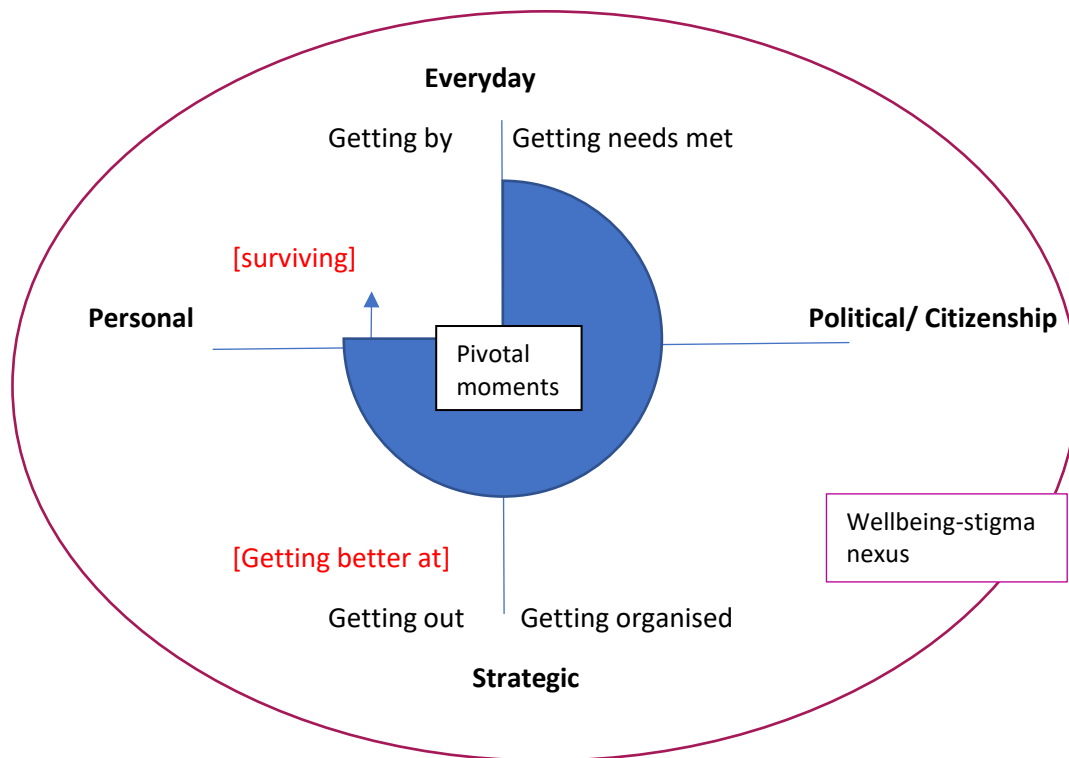
due to COVID (see Kelly et al., forthcoming). The student nurses spoke about having a unique perspective during the pandemic as an outsider on hospital wards, with many feeling able to raise concerns during the pandemic. They referred to the difficulties of paid placements during the pandemic and being treated like healthcare assistants, and then felt criticised for not attempting to learn enough required nursing skills. Community nurses frequently referred to the massive organisational changes which were delayed by the pandemic and then pushed through in the autumn of 2020. These changes meant that nurses had to reapply to continue to work in their own jobs, adding to their sense of being de-valued which was already high after the sacrifices they made during the pandemic whilst doctors refused to visit patients at home. Nurses' who worked in ITU (not re-deployed) also confirmed the trauma they had experienced and the impact of this on their mental health and wellbeing – with some (as in sample 1) moving to non-patient facing roles or seeking to leave the NHS as a way of managing work stress and burnout and the impacts of trauma (Conolly et al., under review; Maben et al. 2022).

Longitudinal analysis

Through close analysis of our data set (including the final two Colt funded sample 1 interviews and the two sample 2 interviews) we have been able to conceptualise the nurses in our sample into four analytical categories (see Figure 1) which has been written up and reported in a journal paper (Conolly et al., under review):

- 'Getting by' Those who continue in their roles as a nurse unchanged, including those who retire and then return to do bank shifts in the same setting.
- 'Getting needs met' – Those who prioritised their own wellbeing through sick leave or unpaid leave E.g. Those who took sick leave for a prolonged period (or periods) with a view to returning to work.
- 'Getting organised' - speaking out or contacting union.
- 'Getting out' or job-hopping. Those who wanted to shift from hospital-based working to community based working (or vice versa) or wanted to take a less clinical role, e.g. not patient facing.

Figure 1: Diagram conceptualising our longitudinal data in four analytical categories



Those who ‘got their needs met’ or ‘job hopped’ frequently referred to having a ‘pivotal moment’ (moment of realisation). ‘Pivotal moments’ frequently involved a significant incident which made the nurses feel undervalued. For example, Isabella suggested:

‘There was a pivotal moment where (...) the new manager (...) we had a meeting with the ward’s management (...) it just felt like a bit of an ambush, and there was just no recognition of all that we do, and I work, I slog from the minute I arrive to the minute I leave (...) I just felt it was very much, like, “Yeah, but you’re not doing enough.” And I really felt overwhelmed by that (...) and I thought, ‘I’ve got nothing else to give. I’m really just trying to keep it together (...) I just can’t give any more (...) I just felt overwhelmed and undervalued. Went home that evening, my son was home from Uni and I just cried in his arms’.

Impact on Participants

Our participants felt highly motivated to participate in the research (which helped our good longitudinal retention rates) and share their reasons why:

“...I made a decision to talk about that experience because I wanted an accurate snapshot of what I had been through” Sarah

“...It allowed me that opportunity to just take a pause... consolidate ...and think about my thoughts,” Gaby

“...It was good to stop and think... we’ve just been on a... train really that doesn’t stop” Becky

“...it was very cathartic... it really helped me...analyse my own feelings and helped me...move on from them” Isabella

APPENDICES

Appendix 1: Composition of the ICON (Impact of COVID-19 on nurses) qualitative study team

Professor Jill Maben

Dr Anna Conolly

Dr Emma Rowland

Professor Ruth Harris

Professor Daniel Kelly

Professor Bridie Kent

Professor Keith Cooper

Appendix 2: Developing outputs and resources

A project co-design workshop was held in August 2022 with a sample (n = 10) of ICON sample 1 and 2 participants. The sample comprised 2 nurses from black and ethnic minority backgrounds, 2 community nurses, 1 care home nurse, 1 student nurse, 1 mental health nurse, 1 worked in a rehabilitation hospital, 1 worked in ICU outreach, 1 worked on a hospital ward (was redeployed), 1 health visitor (was redeployed) and 1 research nurse (was redeployed). During the morning we presented a film we had developed, of three participant case studies, to initiate discussion. Discussions were also facilitated by participants bringing artifacts that symbolised their experiences during COVID-19. In the afternoon world café discussions were held with three stations, where participants discussed and ordered strategies to support well-being according to their importance to them. Each participant moved around every station: Strategies for individuals, strategies for managers and strategies for the organisation. Discussions were recorded via Dictaphone and photos taken of strategy boards and written up.

Appendix 3: Outputs to date

Academic papers in press /accepted /under review attributable to Colt funding:

- Maben, J. and Conolly, A. (in press). Lessons for structure, workplace planning and responding to emergencies from nurses in the COVID-19 pandemic. In R. Williams, V. Kemp, K. Porter, T. Healing & J. Drury (Eds.), *Pandemics, Major Incidents and Mental Health: The Psychosocial and Mental Health Aspects of Health Emergencies*. Cambridge: Cambridge University Press. In press.
- Abrams, R., Conolly, A., Rowland, E., Harris, R., Kelly, D., Kent, B., & Maben, J. (Accepted). Organisational disregard and silence: Nurses experiences of speaking out during the Covid-19 pandemic, *JAN*, *Accepted for publication*.
- Conolly, A., Abrams, R., Rowland, E., Harris, R., Kelly, D., Kent, B., Couper, K. & Maben, J. (under review). 'There was a pivotal moment'. The dynamics, transitions, adaptations and trajectories of nursing at the front-line in the UK during the COVID-19 pandemic: A longitudinal qualitative study, *Journal of Health and Social Behaviour*. Under review.

Academic papers in preparation attributable to Colt funding:

- Conolly, A., Rowland, E., Abrams, R., Harris, R., Kelly, D., Kent, B., Couper, & K. Maben, J. (Forthcoming). The 'undoing' and 're-doing' of nurses' derealisation: Exploring the effects of the heroic keyworker discourses on nurses in the UK during the COVID-19 pandemic, *In preparation*.
- Conolly, A., Maben, J., Abrams, R., Rowland, E., Harris, R., Kelly, D., Kent, B., & Couper, K. (Forthcoming). 'Researching distressing topics ethically: reflections on interviewing nurses during the Covid-19 pandemic', *In preparation*.
- Kelly, D., Conolly, A., Abrams, R., Rowland, E., Harris, R., Kent, B., & Maben, J. (Forthcoming). *An exploration of nurses' views on anti-vaxxers and COVID-deniers: the impacts of anti-science populism during the pandemic*. *Journal of Advanced Nursing*. In preparation.
- Conolly, A., Rowland, E., Abrams, R., Harris, R., Kelly, D., Kent, B., & Maben, J. (Forthcoming). *The invisible face of nursing during the COVID-19 pandemic and beyond: can Haraway's cyborg thesis be used to account for and help increase nurses' visibility and / or value?* *Journal of Advanced Nursing*. In preparation.
- Conolly, A., Abrams, R., Harris, R., Kelly, D., Rowland, E., Kent, B., & Maben, J. (Forthcoming). Support for nurses: what worked and what did not during the COVID-19 pandemic, *In preparation*.

Conference papers attributable to Colt Funding

- Conolly, A., Maben, J., Abrams, R., Rowland, E., Harris, R., Kelly, D., & Kent, B. 'There was a pivotal moment'. The dynamics, transitions, adaptations and trajectories of nursing at the front-line in the UK during the COVID-19 pandemic: A longitudinal qualitative study'. Workforce, Organisation and Wellbeing seminar, University of Surrey, November 2022 Conference
- Conolly, A., Maben, J., Abrams, R., Rowland, E., Harris, R., Kelly, D., & Kent, B. 'Shouting into the ether': Nurses experiences of speaking out during the Covid-19 pandemic' Workforce, Organisation and Wellbeing seminar, University of Surrey, November 2021 Conference
- 'Shouting into a void': Nurses experiences of speaking out during the Covid-19 pandemic. Sigma Dublin June 2022
- 'What is the matter with me?' or a 'badge of honour': Nurses' constructions of resilience during Covid-19. Sigma Dublin June 2022
- RCN research conference September 2022 Symposium of papers:
 - The impact of COVID-19 on the wellbeing of the UK nursing and midwifery workforce during the first pandemic wave: A longitudinal survey study
 - Nurses' shifting narratives of nursing at the front-line during the trajectory of the COVID-19 pandemic: A longitudinal qualitative study
 - So what can we do?: Key COVID-19 challenges and development of guidelines and strategies to support nursing staff during future high-stress situations.

Initial film made for co-design day in August

- The Impact of COVID-19 on nurses (ICON) Research Study 2020-22: Three case studies from longitudinal interview data. Available at: <https://youtu.be/AluNelAVQCw>

Future Impact Plans

- Develop an **intervention(s)** to support health professionals' well-being post pandemic and in future pandemics
- Future impact suggested by ICON participants and conference audiences:
 - Create a film or documentary
 - Historical archiving of the data transcripts and possibly the audio recordings to capture a historical moment in time (exploring ethics on this and with the Royal College of Nursing archives)

Other Project outcomes to date (attributable to Florence Nightingale Foundation and Burdett Trust funding)

Academic papers

- Conolly, A., Abrams, R., Rowland, E., Harris, R., Kelly, D., Kent, B., Couper, K. & Maben, J., (2022). 'What is the matter with me?' or a 'badge of honour': Nurses' constructions of resilience during Covid-19, *Global Qualitative Nursing Research*. 9: 1–13. <https://doi.org.10.1177/23333936221094862>
- Maben, J., Conolly, A., Abrams, R., Rowland, E., Harris, R., Kelly, D., Kent, B., & Couper, K. (2022). "“You can't walk through water without getting wet”": Exploring nurse distress and psychological health needs during Covid-19', *International Journal of Nursing Studies*. <https://doi.org/10.1016/j.ijnurstu.2022.104242>

Editorials

- Rasmussen, B., Holton, S., Wynter, K., Phillips, D., David, J., Rothmann J., Skjoth, M., Wijk H., Frederiksen, K., Ahlstrom, I., Anderson, J., Harris, R., Conolly, A., Kent, B., Maben, J. (2022). We're on mute! Exclusion of nurses' voices in national decisions and responses to covid-19: an international perspective. Guest editorial. *Journal of Advanced Nursing*. <http://doi.org/10.1111/jan.15236>
- Conolly, A. (2022). The effect of stress levels on nurses' performance during the COVID-19 pandemic. Commentary editorial. *Journal of Research in Nursing*. <https://doi.org/10.1177/17449871221075800>

Parliamentary select committee reports

- Maben, J., Conolly, A., Abrams, R., Harris, R., Kelly, D., Kent, B., Rowland, E., & Couper, K. (2021). *What has the impact of the COVID-19 pandemic been on levels of workforce stress, resilience, burnout and the accessing of support across the NHS and social care sectors?* Unpublished report for the Parliamentary Select Committee hearing on nurses' wellbeing.
- Maben, J., Conolly, A., Abrams, R., Harris, R., Kelly, D., Kent, B., Rowland, E., & Couper, K. (2021). *BAME Nurses experiences during Covid-19*. Unpublished report for the Parliamentary Select Committee hearing on nurses' wellbeing.

Blog

[The ICON interview study: Stigma and Support during Covid-19 – Florence Nightingale Foundation \(florence-nightingale-foundation.org.uk\)](https://www.florence-nightingale-foundation.org.uk)

Conference presentations /seminars

- Conolly, A., Maben, J., Abrams, R., Rowland, E., Harris, R., Kelly, D., Kent, B., & Couper, K. 'Nurse distress and psychological health needs during Covid-19' Royal College of Nursing, September 2021 Conference
- Conolly, A., Maben, J., Abrams, R., Rowland, E., Harris, R., Kelly, D., Kent, B., & Couper, K. 'Exploring nurse distress and psychological health needs during Covid-19' Annual Torbay and South Devon Clinical School May 2021 Conference
- Dr Emma Rowland, Dr Anna Conolly, Dr Ruth Abrams, Professor Ruth Harris and Professor Bridie Kent, Professor Daniel Kelly, Dr Keith Couper and Professor Jill Maben "Researching Distressing Topics Ethically: Reflections on Interviewing Nurses during the Covid-19 Pandemic". Qualitative Research symposium, Bath University, February 2022
- Maben, J., Conolly, A., Abrams, R., Rowland, E., Harris, R., Kelly, D., Kent, B., & Couper, K. (2021). *The ICON (Impact of Covid on Nurses) longitudinal qualitative interview study: exploration of nurse distress and psychological health needs*, paper given to the RCN Conference, September 2021 (online).
- Maben, J., Conolly, A., Abrams, R., Rowland, E., Harris, R., Kelly, D., Kent, B., & Couper, K. 'Nurse distress and psychological health needs during Covid-19' Royal College of Nursing, September 2021 Conference. Maben, J., Conolly, A., Abrams, R., Rowland, E., Harris, R., Kelly, D., Kent, B., & Couper, K. (2021) 'Exploring nurse distress and psychological health needs during Covid-19' Annual Torbay and South Devon Clinical School May 2021 Conference.
- Maben, J. on behalf of the project team (2021) (invited speaker) The Impact of Covid on Nurses (ICON) study: "You can't walk through water without getting wet"- Covid trauma, support and recovery. Difficult Lung Disease Conference. October 21st 2021.
- Maben J. on behalf of the project team (2021) (invited talk). *Exploring nurse distress and psychological health needs during Covid-19: The Impact of Covid on Nurses (ICON) qualitative study*. Seminar University of Durham 30th June 2021 (online).

Press release picked up in Nursing Times

Speaking out - <https://www.nursingtimes.net/news/workforce/special-investigation-the-voice-of-nursing-on-mute-01-12-2021/>