Finding the Positives From COVID-19 Within the “New Normal”

As I write this, I hope that the content will still be relevant by the time it goes to print. Pre-COVID this would not have been too much of a challenge, but such are COVID times that we find ourselves in a dynamic, ever changing and evolving state. I am sure many of you have found yourselves constantly planning and then replanning, as the unknown becomes known, and then changes again as we progress through 2020.

Looking towards the end of the year, I think it is important that we keep being kind to ourselves and others while acknowledging that we are living through extraordinary times. There is really no doubt that the COVID-19 pandemic is likely to be the most significant global event in our lifetimes.

Physiotherapists working across the healthcare system, whether frontline workers, researchers, advisors, policy makers, business owners, or those within professional associations or regulatory bodies, will have to continue to react quickly to significant, ongoing change at both macro and micro levels. This for the foreseeable future is the “new normal” rhythm to our world.

Thankfully, New Zealand’s cases remain low and, for the most part, under control. But I am sure the ongoing uncertainty makes many of us feel at times depleted and a little overwhelmed. We have all experienced loss and many of us will hold on going concerns about the potential for ongoing losses as we continue to move through the pandemic. I would encourage everyone to keep checking in with each other and supporting colleagues, friends, and family.

Already, resources are available that provide guidance on how to process these uncertain times as well as provide helpful insights on how to take the lead through these events. I have found J. Maybin’s *Leading through Covid-19: Managing our anxiety about loss* (Maybin, 2020) helpful, as it lends a wider perspective on how I have been feeling.

Whilst acknowledging the challenges COVID-19 has posed for all physiotherapists, I would also like to draw attention to some of the positives that are emerging from this situation. Health care is often criticised for its slow pace of change and inability to be innovative. However, crises create a necessity for change, and previously unsurmountable barriers are quickly overcome in addressing health emergencies. In my long professional healthcare career, I have never before witnessed the speed and degree that health care has had to change and adapt as it has during the COVID-19 pandemic.

There is no better example of this than the rapid enablement and implementation of telehealth through the New Zealand COVID lockdowns (Health Informatics New Zealand, 2020). In fact, lessons have been learnt, and it looks like future healthcare design will feature telehealth on a scale that could not have been conceived prior to the Level 4 lockdown.

The pandemic has not just demonstrated the potential to accelerate solutions. It has also forced health care to rapidly learn, test, and implement new ways of working, and this has included how we share research findings. The pandemic has created a need to rapidly explore, translate, and implement

research findings in the treatment and rehabilitation of COVID-19 patients. This wide sharing of information has created greater inclusion across health care as we learn from each other. It reminds us that we are part of a wider global workforce. I think that knowledge sharing has been a positive way of supporting each other to stay safe and helping our patients get the best possible care with limited resources across the world.

The value of sharing research and learning from each other has been seen in the utilisation of established digital platforms, which have been able to quickly respond. Examples of this are the development of rapid guidelines from Cochrane (Cochrane, 2020) and the easily accessible online e-learning modules through Physiopedia (Physiopedia, 2020). Organisations, such as World Physiotherapy, have been helpful in leveraging their global reach to the team of 670,000 physiotherapists across 122 countries by setting up information hubs (World Physiotherapy, 2020).

We have all been launched into using technology in new ways to compensate for physical distancing and the inability to travel. Communication methods, such as webinars, virtual conferences, and mobile apps, have been harnessed by the necessity to rapidly communicate information and stay connected. Boundaries, both professional and geographical, have loosened in the collaborative fight against COVID-19.

I am excited to see physiotherapy widely recognised in the international media as a profession that has been at the forefront of the treatment and rehabilitation of COVID-19 patients. COVID-19 has thrust a valuable spotlight on the everyday work of cardiorespiratory physiotherapy, which is sometimes not well-known or recognised by the general public (Ochagavia et al., 2020). It is encouraging to see the number of published physiotherapy articles on rehabilitation post-COVID-19 that involve collaboration across the world (Thomas et al., 2020).

As we continue to see pressure on healthcare and economic systems from the pandemic, I am convinced that physiotherapy will continue to demonstrate its value in supporting all patients within the healthcare system. I believe the physiotherapy profession is well placed to be at the centre of the delivery of value-based health care into the future. The challenge for us all is to stay resilient and embrace and implement the positive learnings and innovation that come from the COVID-19 pandemic.

“Tawhiti rawa tau harenga ake te kore haere tonu” – Sir James Henare.

We have come too far not to go further. We have done too much not to do more.

Annie Jones (She/Her) *NZRP, BSc(Hons) Physiotherapy, PGCert (Clinical Rehabilitation & Māori Health)*

Annie works as a clinical partner at the Accident Compensation Corporation (ACC). She is involved in providing subject matter expertise in rehabilitation across healthcare design projects and assists ACC to align with the health sector through external

relationship management across allied health organisations. Prior to this, she worked as the physiotherapy lead at Burwood Spinal Unit, Canterbury District Health Board. Annie is a board member of the New Zealand Rehabilitation Association. The opinions expressed in this editorial are the author's own.

Email: annie.jones@acc.co.nz

<https://doi.org/10.15619/NZJP/48.3.01>

REFERENCES

- Cochrane. (2020). *Coronavirus (COVID-19) – Cochrane resources and news*. The Cochrane Collaboration. <https://www.cochrane.org/coronavirus-covid-19-cochrane-resources-and-news>
- Health Informatics New Zealand. (2020, September 24). *ACC telehealth appointments soar during lockdown*. <https://www.hinz.org.nz/news/527607/ACC-telehealth-appointments-soar-during-lockdown.htm>
- Maybin, J. (2020, April 23). *Leading through Covid-19: Managing our anxiety about loss*. https://www.kingsfund.org.uk/publications/managing-anxiety-about-loss-covid-19?utm_source=social&utm_medium=linkedin
- Ochagavia, E., Lamborn, K., & Chulani, N. (2020, May 28). *How I help coronavirus patients to walk again* [Video]. The Guardian. <https://www.theguardian.com/world/video/2020/may/28/covid-19-rehab-the-journey-from-waking-up-to-walking-again-video>
- Physiopedia. (2020). *Physioplus*. <https://members.physio-pedia.com/learn/>
- Thomas, P., Baldwin, C., Bissett, B., Boden, I., Gosselink, R., Granger, C. L., Hodgson, C., Jones, A. Y. M., Kho, M. E., Moses, R., Ntoumenopoulos, G., Parry, S. M. Patman, S., & van der Lee, L. (2020). Physiotherapy management for COVID-19 in the acute hospital setting: Clinical practice recommendations. *Journal of Physiotherapy*, 66(2), 73–82. <https://doi.org/10.1016/j.jphys.2020.03.011>
- World Physiotherapy. (2020). *COVID-19 information hub*. World Confederation of Physiotherapy. <https://world.physio/resources/covid-19-information-hub>