REACH-OUT

Caring for the Healthcare Workforce Post-COVID-19

About REACH-OUT

REACH-OUT was a research programme launched in 2022 through a partnership between the NHS Race and Health Observatory and UK-REACH (the UK Research Study into Ethnicity and COVID-19 Outcomes in Healthcare Workers). The study was conducted in collaboration with the Universities of Leicester, and University College London.

The programme aimed to:

- Estimate the prevalence of long COVID among healthcare workers (HCWs) globally and in the UK.
- Characterise the clinical syndrome and its most common symptoms.
- Understand the medium- and long-term impacts on the mental, physical and occupational health of diverse HCW communities.
- Generate evidence to inform policy recommendations to support workforce recovery.

Main Findings

Prevalence and Symptom Burden

40%

had long COVID

globally · avg. 22 wks follow-up (multi-study)

26.5%

still affected

globally · at 12-month follow-up

~1 in 4

UK HCWs

UK nationwide cross-sectional cohort

UK study periods

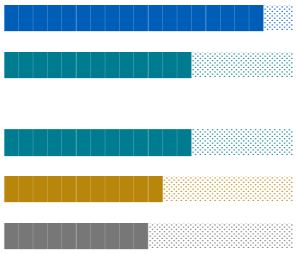
Dec 2020 – Mar 2021:
23.0% with symptoms ≥5 weeks

Oct 2021 – Oct 2022:
27.0% with symptoms ≥12 weeks

Most Common Long COVID Symptoms (Global)

The five most common long COVID symptoms reported by HCWs globally were:

Symptom	%	Prevalence (%)
Fatigue	35%	
Neurological symptoms (brain fog, headaches)	25%	
Loss of taste and/or smell	25%	
Muscle pain (myalgia)	22%	
Shortness of breath (dyspnoea)	19%	



Risk Factors

The HCWs most likely to report long COVID in UK questionnaire studies were:

Individual Factors	Occupational & Contextual Factors
• Female sex • Pre-existing comorbidities (self-reported) • Severe acute COVID-19 at initial infection	• Nursing, allied-health, or administrative roles • Fewer vaccine doses - a dose-response relationship was observed, with each additional dose associated with lower odds of long COVID • Ethnic and migration background - some minority groups showed lower overall prevalence, but symptom profiles appeared to be shaped by cultural norms and reporting patterns

Impact on the Workforce

Findings from qualitative interviews showed that long COVID contributed significantly to absenteeism, presenteeism and reduced productivity among HCWs. HCWs affected by long COVID described the response from NHS organisations as 'inconsistent and insufficient'.

Absenteeism	Presenteeism	Reduced Productivity
HCWs took prolonged unplanned sick leave due to relapsing symptoms	HCWs attended work while unwell, with reduced capacity and cognitive impairment	Diminished output placed strain on colleagues covering gaps

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Lived Experience

Interviews with HCWs with long COVID, support network members (household members, neighbours, colleagues) and their managers, showed four defining themes:

01 Unpredictable Symptoms

HCWs described challenging cycles of relapse, overwhelming fatigue and cognitive 'brain fog' that made planning work and daily life extremely difficult.

02 Guilt, Stigma and Blame

HCWs internalised pressure to 'keep going' and feared being perceived as malingering, leading to delayed help-seeking and worsening of symptoms.

03 Limited Clinical Understanding

Clinicians and managers reported ongoing uncertainty about prognosis and evidence-based management, which undermined effective support for affected staff.

04 Need for Improved Workplace Adjustments

Phased returns to work, redeployment options and more flexible arrangements were identified as critical needs, alongside recognition of the burden placed on colleagues covering gaps.

Methods

REACH-OUT used a mixed-methods design comprising three complementary research work packages:

1 **Systematic Review and Meta-Analysis**
Global estimates of long COVID prevalence among HCWs; identification and clustering of symptoms.

2 **Quantitative Survey Study**
UK prevalence estimates from HCW questionnaires, examining variation by age, sex, ethnicity, migration status, vaccination status and occupational role.

3 **Qualitative Research**
In-depth interviews with HCWs, their families and colleagues, and managers to understand lived experience and develop evidence-based policy recommendations.

NHS RACE & HEALTH OBSERVATORY
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UCL

Publications

Select publications arising from the REACH-OUT:

Al-Oraibi A, Martin CA, Woolf K, Nellums LB, Tarrant C, Pareek M. **Patterns of long COVID symptoms among healthcare workers in the UK and variations by sociodemographic, clinical and occupational factors: a cross-sectional analysis of a nationwide study (UK-REACH).** *Journal of the Royal Society of Medicine. 2025.* doi.org/10.1177/01410768251389692

Al-Oraibi A, Tarrant C, Woolf K, Nellums LB, Pareek M. **The impact of long COVID on UK healthcare workers and their workplace: a qualitative study of healthcare workers with long COVID, their families, colleagues and managers.** *BMC Health Services Research, Vol. 25, p.519. 2025.* doi.org/10.1186/s12913-025-12677-x

Al-Oraibi A, Woolf K, Naidu J, Nellums LB, Pan D, Sze S, Tarrant C, Martin CA, Gogoi M, Nazareth J, Divall P, Dempsey B, Lamb D, Pareek M. **Global prevalence of long COVID and its most common symptoms among healthcare workers: a systematic review and meta-analysis.** *BMJ Public Health, Vol. 3, Issue 1, p.e000269. 2025.* doi.org/10.1136/bmjph-2023-000269

Al-Oraibi A, Martin CA, Woolf K, Bryant L, Nellums LB, Tarrant C, Khunti K, Pareek M. **Prevalence of and factors associated with long COVID among diverse healthcare workers in the UK: a cross-sectional analysis of a nationwide study (UK-REACH).** *BMJ Open, Vol. 15, Issue 1, p.e086578. 2025.* doi: 10.1136/bmjopen-2024-086578