**Message from the Scottish Faculty Chair - Working in the time of COVID-19 "I'm not loving it"**

I’m writing this while wearing surgical scrubs. The last time I wore them was when I worked in Obstetrics and Gynaecology in the 1990’s. This was not a post I relished, pipped only by my stint in a gherkin factory in Hamburg one rainy summer, on the list of all time least favourite work. This was for a variety of reasons, but the main ones were the 1 in 4 rota with a lively labour ward at night and working in a gynae clinic packed full of mostly unhappy women. They were not best served by 10 minutes of a solely biological approach to their difficulties. Happily my next post was in psychiatry where I was encouraged to spend time with patients and to think about them holistically which suited me a whole lot better.

Anyway this is what we’ve come to, needing to wear scrubs, and on some wards, gloves, masks and aprons to see children and young people in the children’s hospital. Fortunately Covid-19 has not taken its toll on children, with small numbers testing positive and no deaths under 15 years in Scotland. We do however need to wear the right PPE for those who are sick and it’s a challenge for us to adapt our therapeutic approach with most of our faces covered while wearing anonymous scrubs. For those who are in-patient or are shielding, the loss of physcial contact with families, friends and pets is hard going and there is no end in sight. Our work is also changed utterly with the need to socially distance ourselves from patients and colleagues. The hospital has been uncannily quiet with only on call paediatric staff coming in.

The speed and extent of how our services were transformed in the early days of Covid-19 is remarkable when we consider how in the past changing the NHS has been described as trying to turn an oil tanker. Categorising patients according to clinical need, moving from face to face consultations to working through telephone and video consultations and covering gaps in rotas was achieved around Scotland in just a couple of weeks.

The CAMHS medical workforce here has shown resilience, flexibility, creativity and positivity over the past few months. So, when I write that I am not enjoying my work as before, feeling like my usual Technicolor working world has been rendered sepia, these are my wistful musings alone.

I miss the hurly-burly of working in a busy place full of families and staff birrelling around corridors and clinical areas. I miss joining packed clinical meetings and impromptu chats over coffee .I miss working with families where our training, senses and physical presence allows us to connect intensely with them.

Our team does still meet each week, as many of us as can fit into a large room with socially distant desks, but no chocolate is passed around and there is much use of hand sanitiser and wipes. No chocolate!

These are indeed minor travails when compared to the reality of managing the Coronavirus in adult acute care settings. That the virus and the response to it affect disproportionately the most vulnerable among us is deeply troubling. It seems egregious to enjoy days at home which can only be described as idyllic during the exceptional weeks of sunshine in the west of Scotland. What is the word for the opposite of Schadenfreude? Weltschmerz perhaps? How is it that the Germans seem to have come up with some of the best words for complex emotions in the English language?

So as we ease out of lockdown into this new normal, we will need to continue the new way of working for the foreseeable future. I will never get to like it, but I am grateful to my fabulous colleagues, patients and families who have adapted heroically and will carry me along. Just as long as no-one says that technology is the answer to everything and no gherkins are involved

Dr Elaine Lockhart