ISRCTN36352994 https://doi.org/10.1186/ISRCTN36352994

Sickness absence in NHS staff during the time of COVID-19

Submission date
04/08/2020

Recruitment status
No longer recruiting

Registration date
05/08/2020

Overall study status
Completed

Last Edited
01/09/2021

Condition category
Infections and Infestations

[_] Prospectively registered
[X] Protocol
[_] Statistical analysis plan
[X] Results
[_] Individual participant data

Plain English summary of protocol

Background and study aims
COVID-19 is a condition caused by the coronavirus (called SARS-CoV-2) that was first identified in late 2019. This virus can infect the respiratory (breathing) system. Some people do not have symptoms but can carry the virus and pass it on to others. People who have developed the condition may develop a fever and/or a continuous cough among other symptoms. This can develop into pneumonia. Pneumonia is a chest infection where the small air pockets of the lungs, called alveoli, fill with liquid and make it more difficult to breathe.

In 2020, the virus has spread to many countries around the world and neither a vaccine against the virus or specific treatment for COVID-19 has yet been developed. As of March 2020, it is advised that people minimize travel and social contact, and regularly wash their hands to reduce the spread of the virus.

Groups who are at a higher risk from infection with the virus, and therefore of developing COVID-19, include people aged over 70 years, people who have long-term health conditions (such as asthma or diabetes), people who have a weakened immune system and people who are pregnant. People in these groups, and people who might come into contact with them, can reduce this risk by following the up-to-date advice to reduce the spread of the virus.

A particular concern when such outbreaks occur is the risk to healthcare staff. National Health Service (NHS) Trusts in England collect data on sickness absence in an electronic staff record (ESR), which since early in the COVID-19 epidemic has used a code specifically for absence because of symptoms suggestive of COVID-19. The ESR also holds information on each staff member's sex, date of birth, ethnicity, occupation and department, as well as on absence for other reasons; and, more recently, the option to add the results of any antigen or antibody test results.

Who can participate?
NHS staff ESRs will be used to provide the data for this study.

What does the study involve?
Using routinely collected data from the period 2019 - 2020, we will explore the risk of sickness

absence ascribed to suspected Covid-19 according to sex, age, ethnicity, occupation and department and in relation to available antigen/antibody test results.

What are the possible benefits and risks of participating?
None

Where is the study run from?
Imperial College, London (UK)

When is the study starting and how long is it expected to run for?
August 2020 to March 2021

Who is funding the study?
The COLT Foundation (UK)

Who is the main contact?
Prof. Paul Cullinan, p.cullinan@imperial.ac.uk

Contact information

Type(s)
Scientific

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Additional identifiers

EudraCT/CTIS number
Nil known

IRAS number
284146

ClinicalTrials.gov number
Nil known

Secondary identifying numbers
IRAS 284146

Study information

Scientific Title
Occupational risks of COVID-19 in NHS staff; an analysis of sickness absence by ethnicity, professional role, age, sex and antigen/antibody test results

Study objectives
1. How have rates of sickness absence ascribed to suspected COVID-19 varied according to ethnicity, age, sex, and potential for occupational contact with SARS-CoV-2 as indicated by occupation and department? How are these related to available data on antigen/antibody test results?
2. How have rates of prolonged sickness absence ascribed to suspected SARS-CoV-2 infection varied according to ethnicity, age, sex, and potential for occupational contact with SARS-CoV-2 as indicated by occupation and department?
3. How have rates of sickness absence ascribed to mental illness and other causes unrelated to COVID-19, varied over the course of the epidemic as compared with 12 months earlier, and have changes differed by ethnicity, occupation and department?

Ethics approval required
Old ethics approval format

Ethics approval(s)
Approved 03/08/2020, Hampshire A Research Ethics Committee (c/o Level 3, Block B, Whitefriars, Bristol Research Ethics Committee Centre, BS1 2NT, UK; +44 (0)207 104 8196; hampshirea.rec@hra.nhs.uk), ref 20/SC/0282

Study design
Multicentre observational retrospective cohort

Primary study design
Observational

Secondary study design
Cohort study

Study setting(s)
Hospital

Study type(s)
Other

Participant information sheet
No participant information sheet available

Health condition(s) or problem(s) studied
COVID-19 (SARS-CoV-2 infection)

Interventions
National Health Service (NHS) Trusts in England collect data on sickness absence in an electronic staff record (ESR), which since early in the COVID-19 epidemic has used a code specifically for

absence because of symptoms suggestive of COVID-19. The ESR also holds information on each staff member's sex, date of birth, ethnicity, occupation and department, as well as on absence for other reasons; and, more recently, the option to append the results of any antigen or antibody test results.

Using electronic staff records from all NHS Trusts in England from January 2019 to August 2020, the researchers will explore the risk of sickness absence ascribed to suspected COVID-19 according to sex, age, ethnicity, occupation and department and in relation to available antigen /antibody test results.

Intervention Type
Other

Primary outcome measure
Number of staff recorded as having a sickness absence for COVID-19 measured using electronic staff records from all NHS Trusts in England from January 2019 to August 2020

Secondary outcome measures
Number of staff recorded as having a sickness absence for mental ill-health measured using electronic staff records from all NHS Trusts in England from January 2019 to August 2020

Overall study start date
01/08/2020

Completion date
01/03/2021

Eligibility

Key inclusion criteria
All NHS staff who were continuously employed at all NHS organisations in England from 1 January 2019 to the date when data abstraction begins.

Participant type(s)
Health professional

Age group
Adult

Sex
Both

Target number of participants
c. 800,000

Total final enrolment
959356

Key exclusion criteria

All NHS staff who were not continuously employed at an NHS organisation in England from 1 January 2019 to the date when data abstraction begins. In addition, agency staff, contractors, students.

Date of first enrolment
01/01/2019

Date of final enrolment
01/08/2020

Locations

Countries of recruitment
England

United Kingdom

Study participating centre
Imperial College London
1b Manresa Road
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United Kingdom
SW3 6LR

Sponsor information

Organisation
Imperial College London

Sponsor details
Exhibition Road
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Sponsor type
University/education

Website
http://www3.imperial.ac.uk/

ROR
https://ror.org/041kmwe10

Funder(s)

Funder type
Charity

Funder Name
COLT Foundation

Results and Publications

Publication and dissemination plan
Planned publication in a high-impact peer-reviewed journal.

Intention to publish date
01/04/2021

Individual participant data (IPD) sharing plan
The datasets generated during and/or analysed during the current study are not expected to be made available due to data protection.

IPD sharing plan summary
Not expected to be made available

Study outputs

Output type	Details	Date created	Date added	Peer reviewed?	Patient-facing?
Protocol file	version v1.2	30/06/2020	07/08/2020	No	No
Results article		30/08/2021	01/09/2021	Yes	No
HRA research summary			28/06/2023	No	No