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'All changed, changed utterly'

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Editorial

‘All changed, changed utterly’

Michael Trimble

This has not been an auspicious time to take over as editor of the journal. I had been asked before, had tried to avoid it, but then eventually gave in. I had met with my predecessor for a brief handover just before lockdown, before it all changed. “Changed, utterly changed”, Yates’ words, of course, refer to Easter 1916 but they seem appropriate to describe life in light of Covid-19. And what changes we have seen, particularly in the realm of our work, in healthcare and healthcare education and training. Whether in General Practice or hospital specialty it is ‘utterly changed’.

We have also witnessed how the profession has risen to this challenge: hospitals re-profiled, staff re-deployed, volunteers returning from retirement. We have all become amateur virologists. It would churlish to mention only the medical teams as we have seen nurses, allied healthcare professionals, and carers all step up to the mark.

Our trainees have seen their training programmes and research projects suspended as they are sent to cover acute wards. Our students have found themselves sent home from placements, while educators rapidly devise novel distance-learning programmes and discover how to teach on Zoom.

The pandemic has raised many questions about how to manage coronavirus cases, both clinical and ethical. Concerns regarding the fair allocation of critical care support and the establishment of ceilings-of-care lead to the establishment of the COVID-19 HSC Clinical Ethics Forum. The resulting guidance, the COVID-19 Guidance: Ethical Advice and Support Framework can be found online. Thankfully, the worst-case scenario with rationing of ICU beds did not arise but there have been many other issues to consider: the effect of the coronavirus response on patients with other healthcare needs, the reciprocal duty of care of Trusts towards their staff, e.g., in the provision of adequate Personal Protective Equipment. The over-riding emphasis of the guidance is that *everyone matters*. The work of the Forum is far from over and it has been reconstituted as the HSC Regional Clinical Ethics Forum.

And so, to the Journal; I must first thank my predecessor, John Purvis, for his work in editing the UMJ for the past five years. I now have an inkling as to how much work this involves. I am reminded of the words of the teacher in Ecclesiastes – “Of making many books there is no end, and much study wearies the body.” I must thank those who have continued to submit manuscripts, those who have reviewed manuscripts and also my sub-editor, editorial assistant and the team at Dorman and Sons printers. I must apologise to those who have been

waiting to see their work in print. The lockdown period has meant that we have missed the May edition and so this year there will only be two issues. This means that some material that would have appeared in May has been pushed into the September issue and therefore other material will have to wait until next year before it can be published. I hope you will bear with me on the learning curve of editing the journal and hope too that the next six months will seem more normal than the last.

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