

TZU CHI NURSING CARE

*With the Compassion of Bodhisattvas,
Where Ever Sufferings Are, We Are.*



The Cognition & Experiences of Tzu Chi Nursing Professionals to COVID-19 Disease Control & Prevention in Taiwan





By Liao Ru-Wen, Deputy Director, the Department of Nursing, Taipei Tzu Chi Hospital

Severe Pneumonia with Novel Pathogens (Coronavirus disease 2019, COVID-19) rapidly and widely spread to the whole world in 2020. Due to the adoption of strict epidemic prevention measures in Taiwan, infections could be stabilized in Taiwan. However, local COVID-19 cases began to surge in May 2021. The number of confirmed cases and deaths reached 14,590 and 836, respectively (Centers for Disease Control, Ministry of Health and Welfare, 2021). As of November 2021, a total of 247,472,724 people had been infected and 5,012,337 people had died of COVID-19 worldwide (WHO, 2021).

COVID-19 is caused by SARS-CoV-2 (Severe Acute Respiratory Syndrome Coronavirus 2). Common influenza-like symptoms can be accompanied by loss of taste and smell, diarrhea, or difficulties breathing (CDC, Ministry of Health and Welfare, 2021). Around one-third of all infected cases are asymptomatic (Gao et al., 2020). 81% exhibit mild to moderate symptoms (CDC, 2021; Gao et al.,

Basic Statistics

Gender	Number of People	%
Female	1,287	93.4
Male	91	6.6
Total	1,378	100.0
Age	Number of People	%
under 20	23	1.7
21~25	454	32.9
26~30	268	19.4
31~35	151	11.0
36~40	156	11.3
above 40	326	23.7
Total	1,378	100.0
Years worked in the hospital	Number of People	%
under 1	185	13.4
1.1~2	173	12.6
2.1~3	144	10.4
3.1~5	213	15.5
above 5	663	48.1
Total	1,378	100.0

2020). People are infectious the first few days after symptoms appear (Meyerowitz et al., 2021). Infections are mostly caused by exposure of the eyes, nose, or oral mucosa to oronasal secretions of patients (Meyerowitz et al., 2021). The main route of transmission is through droplets of oronasal secretions or aerosol infection. Aerosols can remain suspended in the air for several hours, which facilitates infections in improperly ventilated places (Meyerowitz et al., 2021). Based on the fact that this disease is highly contagious and routes of transmission cannot be blocked, various restrictions have been imposed to prevent crowding, reduce outdoor activities, or ensure mask-wearing outdoors and thereby slow down transmission of the virus. These restrictions have changed people's lifestyles (e.g., schools have switched to online learning).

Job Title	Number of People	%
Registered nurse	1,099	79.8
Deputy head nurse	49	3.5
Head nurse	60	4.3
Supervisor and above	22	1.6
Case manager / functional unit	52	3.8
Nurse Practitioner / senior RN	96	7.0
Total	1,378	100.0
Department	Number of People	%
Internal Medicine	248	18.0
Surgery	202	14.7
Pediatrics	46	3.3
Obstetrics & Gynecology	55	4.0
Intensive Care & ER	274	19.9
Functional Unit	21	1.5
Kidney Dialysis	45	3.3
Operating Room	102	7.4
Outpatient Clinic	211	15.3
Palliative Care	26	1.9
Administration	28	2.0
Psychiatry	40	2.9
Others	80	5.8
Total	1,378	100.0

Q1

Adjustments of your work contents during the epidemic?

(N = 1,378 multiple selections possible)

No noticeable changes, still at original post **65.9%**



Support in dedicated wards or quarantine facilities, care for confirmed COVID-19 patients or home quarantined citizens **15.2%**



Support at large vaccination stations and assistance in vaccination administration **15.6%**



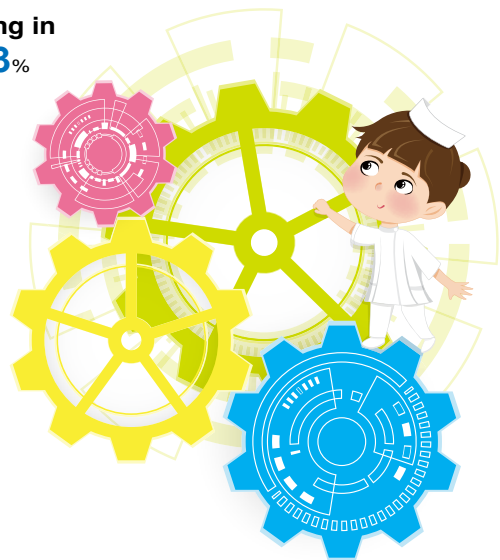
Assistance in TOCC and rapid antigen testing in entrance areas of medical institutions **12.3%**



Unit consolidation or assignment to a different division **10.7%**



Other **3.5%**



Since nursing personnel are at the frontline of patient care, they are at higher risk of getting infected. High-risk environments are prevalent in hospitals. Emergency Departments, large screening stations, quarantine facilities, the unintended presence of infected patients in outpatient departments, hospitalization of asymptomatic patients in normal wards, and dedicated wards for confirmed positive patients, or community vaccination stations pose risks of varying degrees. In line with the rising severity of the local outbreak, all major

Q2

Adjustments in the field of self-protective measures adopted by you during the epidemic?
(N = 1,378 multiple selections possible)

Increased frequency of hand-washing 92.5%



Mask-wearing at all times 97.1%



Reduced mass transportation usage and avoidance of outdoor activities 80.6%



Wearing of gloves when venturing outdoors 16.5%



Wearing of face shields when venturing outdoors 17.9%



Disinfection of purchased or delivered items before using them 43.3%



Other 0.6%



hospitals have implemented curtailment of services, which has resulted in changing work patterns of nursing personnel due to the shifting focus on anti-epidemic tasks. How does the epidemic affect nursing personnel? Are there any impacts other than potential changes in work patterns, daily life, school attendance of children, and work modes of family members?

During the first wave of the epidemic in Taiwan, an extremely tense period which lasted from the end of 2019 to the lifting of most restrictions in June 2020,

Taipei Tzu Chi Hospital faithfully fulfilled its duties and thereby contributed to minimizing the number of deaths. No one expected that a second wave would strike the country in full fury in May 2021. Fortunately, this second wave has already subsided (as of December 2021) and the COVID-19 alert was lowered from level 3 to level 2. Nursing manpower demands therefore shifted from support for rapid testing and dedicated wards to vaccination administration (Dated December 2021). In this issue, the Nursing Department at Taipei Tzu Chi Hospital explores in a Cover Story titled “Variables and Constants of the Pandemic” how the nursing staff of seven Tzu Chi Hospitals responded to the Level 3 alert in the wake of the relentless onslaught of the new variant and the rapid increase of local COVID cases after the local outbreak in 2021. They gradually learned how to view change as the new normal and minimize the impact of the pandemic on their work and daily life.

A total of 1,378 valid questionnaires were collected for this survey which firstly aims to determine whether work contents of our nursing staff have been adjusted during the pandemic. The completed questionnaires show that 65.9% of all nursing staff members are still at their original posts and their work locations have remained unchanged. In contrast, 34.1% state that their work environments and contents have seen significant changes as a result of the pandemic. 15.6% of this second group have been assigned to provide support at large vaccination stations and assist in the administration of COVID-19 vaccinations, while 12.3% assist in TOCC (travel history, occupation, contact history, & cluster history) screening and rapid antigen testing in the entrance areas of major medical institutions. 209 nursing staff members (15.2%) assist in the carrying out of tasks in dedicated COVID-19 wards or the government quarantine facility. Another 48 RNs have seen changes in their work routines (14 of them have been transferred to dedicated COVID-19 wards). While the work contents of a majority of our nursing personnel have remained unaffected, one-third of our nurses demonstrated a high degree of flexibility and resilience regarding their new duty assignments.

Mask-wearing Is the Best Protective Measure

In the wake of the rapidly spreading local outbreak, COVID-19 infections are no longer confined to the hospitals. Contact traces of confirmed cases can often be found in crowded locations such as daily means of transportation, shopping centers, and schools. Self-protective measures adopted by nursing personnel

Q3

Adjustment of your interactions with family members during the pandemic?

(N = 1,378 multiple selections possible)

Postponement of reunions with parents or in-laws requiring long-distance trips **27.9%**



No direct contact with family members living in the same household (communication by phone or video calls) **25.4%**



Utilization of serving spoons and chopsticks or taking turns at the dining table **30.5%**



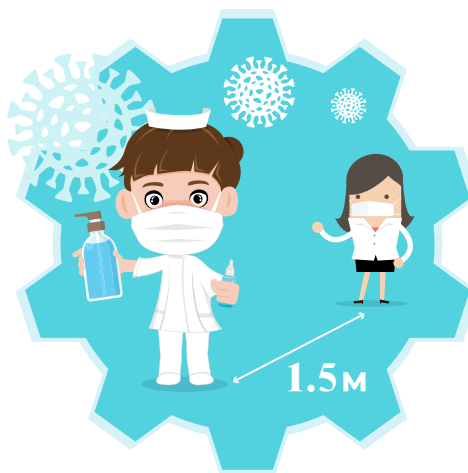
Relocation to the temporary dorm of the hospital and temporary separation from family members **8.7%**



No adjustments, interactions remain unchanged **44.4%**



Other **0.9%**



during the epidemic have also been adjusted in line with the rising pandemic alert level. 97.1% of all respondents state that they wear face masks at all times, while 92.5% have increased the frequency of hand-washing and 80.6% have reduced their mass transportation usage and avoid outdoor activities if possible. 43.3% of the surveyed nurses indicate that they disinfect purchased or delivered items before using them, while face shields and gloves are worn by 17.9% and 16.5%, respectively, when venturing outdoors.

Q4

**Adjustment of your learning styles (self development)
during the epidemic?**
(N = 1,378 maximum of three selections)

Participation in online video workshops 69.9%



Live-streaming-based teaching and learning 59.1%



Self-study approaches involving reading of books or online learning 29.6%



No time to study 6.4%



No adjustments, learning styles remain unchanged 17.6%



Other 0.0%



Due to its unique characteristics, COVID-19 is highly transmissible in crowded environments and difficult to guard against. As nurses at the frontline of the pandemic, we not only have to step up epidemic prevention measures but also adjust our self-protective behavior in our daily lives to prevent or stop the transmission of the virus and thereby protect our own health and that of our families.

Small Sacrifices Help Build an Epidemic Prevention Network That Protects Our Loved Ones

Nursing personnel are at a higher risk of contracting COVID-19 due to their work environments and work contents. In addition, numerous nurses have been infected in the SARS outbreak in Taiwan in 2003 and the COVID-19 pandemic overseas in 2020. Some of them even succumbed to their infections. In the face of the escalating local outbreak, nursing staff have adjusted their interactions with their family members to protect them. The survey results indicate that 55.6% of the respondents comply with social distancing regulations in their interactions with family members, while 30.5% state that they utilize serving spoons and chopsticks or take turns at the dining table. 27.9% of the surveyed nurses avoid long-distance trips and have postponed reunions with their parents or in-laws due to the epidemic. 25.4% of the surveyees don't have direct contact with family members living in the same household (they communicate with them by phone or video calls). 8.7% have chosen to live separately from their family members by staying in the temporary dorm of the hospital during the epidemic.

Due to its location in New Taipei City, one of the hardest hit areas of the local outbreak, Taipei Tzu Chi Hospital urgently set up five dedicated wards and the Xindian quarantine facility in May-June to accommodate confirmed COVID-19 patients. Many of the nurses who have been assigned to these dedicated wards are mothers who didn't shirk their duties after joining the medical care team. With a view to protecting their family members and children, they have chosen to stay at the hospital dorm and temporarily separate from their loved ones to minimize the danger of infections. The best way to maintain mother-child connections under these circumstances is through daily video calls after work. Manpower shortages during this anti-epidemic campaign could be avoided because these RNs bravely joined the medical care team.

In this Ever-changing Epidemic Knowing Yourself and the Enemy Is the Only Way to Conquer the Virus

As the local outbreak escalated, the Central Epidemic Command Center imposed limits on social gatherings to ensure social distancing and prevent cluster infections in indoor areas. As a result, professional training courses for nursing personnel including internships for nursing students had to be canceled or moved online. With a view to enabling real-time learning in the fields of COVID-19

transmission, protection, treatment, and medical care through the adoption of non-conventional methods, the hospital started to offer lived-streamed seminars.

This survey reveals that 82.4% of the respondents have experienced changes in their learning styles during the pandemic. 69.9% participate in online video workshops, while 59.1% rely on live streaming for their teaching or learning activities. These teaching modes transcend traditional approaches which require educators and learners to be present in the same educational environment. 29.6% of the surveyed nurses have switched to self-study approaches involving reading of books or online learning. 6.4% claim they have been too busy to study during the epidemic.

Stress-relieving Activities at Home Can Also Be Fun

In addition to changing the work modes of nursing personnel, the COVID-19 pandemic has also increased their stress levels. Due to restrictions on original activity patterns during the pandemic, stress-relieving leisure activities for nurses outside working hours have also been affected. Regulations have been put in place limiting short-, medium-, and long-distance trips or family outings. Most stress-relieving leisure activities have been confined to spaces inside people's homes. This is also borne out by this survey. During the epidemic, a majority of the staff (72.7%) watch TV programs or soap operas within their own four walls to release their stress or they sleep and rest at home (67.7%). 48.5% of the respondents report that the frequency of their purchases and online shopping has increased due to the pandemic. However, 21.3% and 14.9% of the surveyees have chosen to exercise and learn new skills such as advanced culinary and baking skills, respectively, to maintain their physical health and relieve their stress.

Feeling Cherished and Appreciated During the Epidemic

The local COVID-19 outbreak in 2021 hit all businesses hard and completely changed the lives and work routines of all staff members and nursing personnel in hospitals. It has also enabled us to reflect on how we view our profession as nurses. 44.8% of the respondents report that the epidemic has not affected their salaries or the income sources of the family. 34.2% feel that that their medical services which include caring for, comforting, and accompanying patients are highly valuable. 27.9% of the surveyed nurses believe that the epidemic has

Q5

Stress-relief strategies adopted by you during the epidemic ?

(N = 1,378 maximum of three selections)

Watching of TV programs or soap operas at home 72.7%



Increased frequency of purchases and online shopping 48.5%



Exercise 21.3%



Sleep and rest at home 67.7%



Unlocking of new skills such as advanced culinary, baking, and hairstyling skills 14.9%



Other 1.1%



highlighted the importance of holistic health care provided by RNs. 21.5% state that they take joy in being able to help people in need of medical care during the epidemic, while 20.8% felt their work was being cherished and appreciated. 19.6% believe that a rise in the quality of nursing care has been stimulated and brought about by the epidemic. 6.0% state that their resolve to continue to pursue their nursing career has been strengthening as a result of the epidemic.

Q6

Describe how you view your profession as a nurse after your experiences during this epidemic?
(N = 1,378 maximum of three selections)

I love my profession and take joy in being able to help people in need of medical care **21.5%**



I feel that our medical services including caring for, comforting, and accompanying patients are highly valuable **34.2%**



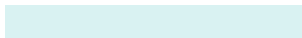
The epidemic has stimulated and brought about a rise in the quality of nursing care **19.6%**



Our work is cherished and appreciated **20.8%**



The epidemic has highlighted the importance of holistic health care provided by RNs **27.9%**



Our work and incomes are largely unaffected by the epidemic **44.8%**



My resolve to continue to pursue my nursing career has been strengthened **6.0%**



Other **8.9%**



It is however also evident that the surveyed nurses have different perceptions of the epidemic and its impacts. 8.9% of the surveyees indicate that the epidemic has increased their workload and fatigue in nursing and non-nursing fields. Some nurses even feel that their professionalism has not been given the deserved respect during the pandemic.

Even before the full containment of the COVID-19 pandemic, all hospital operations have been restored to their pre-epidemic levels. In addition to their routine duties, nurses maintain medical services related to the pandemic such as care for confirmed or suspected COVID-19 patients and assistance in screening and vaccinations. Numerous countries have chosen a new approach of co-existing with the virus based on the high number of fully vaccinated citizens. However, it is also evident that the number of infections and severe cases is on the rise again. The Taiwan Centers of Disease Control is therefore constantly adjusting its preventive measures accordingly. However, the ongoing search for a balance between reopening and continued restrictions is bound to have a wide-reaching impact on the work, leisure, and learning routines of nursing personnel. Although the epidemic has changed our daily lives, we may take solace in the fact that we can feel safe and at ease here in Taiwan. This epidemic is a heaven-sent opportunity for “Great Education”. It is our sincere hope that everyone will seize and humbly accept this opportunity for education bestowed by our destiny. We should not stray from the path of virtue in our learning efforts and rely on our solidarity and compassion to eradicate this devastating pandemic.

References :

<https://www.cdc.gov.tw/>

Center for disease control and prevention. (2021, Feb. 16). Interim Clinical Guidance for Management of Patients with Confirmed Coronavirus Disease (COVID-19). <https://www.cdc.gov/coronavirus/2019-ncov/hcp/clinical-guidance-management-patients.html>

Gao, Z., Xu, Y., Sun, C., Wang, X., Guo, Y., Qiu, S., & Ma, K. (2020). A systematic review of asymptomatic infections with COVID-19. *Journal of Microbiology, Immunology and Infection*. doi:10.1016/j.jmii.2020.05.001

Meyerowitz, E. A., Richterman, A., Gandhi, R. T., & Sax, P. E. (2021). Transmission of SARS-CoV-2: A review of viral, host, and environmental Factors. *Annals of Internal Medicine*, 174(1), 69 - 79. <https://doi.org/10.7326/M20-5008>

A Big Hug to a Patient in the COVID-19 Negative Pressure Isolation Room

By Chen Chen-Chen, NP of the Division of Oral Surgery, Taipei Tzu Chi Hospital

Apprehension

Body temperature of 39.3!! A high body temperature suddenly appeared in the daily text messages sent to the head nurse by the nursing personnel to report daily temperature readings. Flash back to May 18, when I started to experience symptoms such as fever, abdominal pain, headache, and discomfort on the first day after receiving my COVID-19 vaccination and had to take sick leave. I followed the latest news report on the current state of the epidemic in Taiwan and constantly received text messages notifying me of policy and manpower allocation updates announced by the hospital in response to the epidemic. I was deeply worried about the severe trials and challenges hospital environments would be facing. Thinking back on the SARS outbreak 18 years ago, I recalled scenes involving patients in the Zhishan Garden Quarantine Hotel in the Shilin District where I had been dispatched to provide medical support. I still had a fresh memory of the experience donning isolation gear with sweat running down my back and silently prayed for my speedy recovery since the hospital would need all the healthcare manpower available during this epidemic.



After entering the isolation ward in full protective gear, all tasks have to be completed before leaving the room (the inflatable doll which was created by the team to accompany the patient can be seen in the top right part of the image).

In response to the escalating local outbreak, the hospital temporarily suspended all its routine surgeries. The number of patients in the acute ward of the oral surgery department where I originally served therefore decreased. The most pressing duty was to increase the number of dedicated COVID-19 wards and reallocate the duties of the medical personnel. I was still on leave when the phone suddenly rang. The head nurse asked “Chen-Chen, can you help out in the dedicated COVID-19 wards? We have more and more confirmed patients in those wards...”

In the background, I heard the latest manpower planning announcements. At that moment, I was in the kitchen holding a scalding hot spatula.

After calming down my anxiety and composing myself, I discussed the support plan with my family. After confirming that someone would take over my family duties, I packed my bags and prepared myself to support my colleagues in the dedicated COVID-19 wards three days later.

Challenges

“42-year-old female with a history of diabetes, tested positive in a hospital in Sanchung, has experienced loss of appetite and breathing discomfort, oxygen saturation 94%, admitted to 10BXX”, “26-year-old female, pregnant with first child, due on August 5, to be admitted to a hospital for treatment after testing positive”



In addition to physical care, equal attention must be paid to the spiritual well-being of the patient.

. Messages like these about new patients being admitted to the hospital kept popping up in the official workplace group of the dedicated unit which aimed to give members a clear understanding of the latest developments in the ward. “Chen-Chen, can you confirm that the patient in 10BXX is scheduled to have his chest X-ray and COVID-19 NAT (nucleic acid) test,” “Chen-Chen, the patient in 10BXX had breathing discomfort and an oxygen saturation of 92% while on a nasal cannula last night!”, “The anesthesiologist and respiratory therapist in 10BXX are ready to intubate the patient. The consent form has been signed,” “Chen-Chen, a family member of a patient in 10BXX is on the phone at the Nursing Station. He wants to speak to Dr. Chiu about the patient’s current condition”... The team members were shuttling back and forth between the Nursing Station and the office, while call bells and phones were ringing in quick succession.

In the dedicated wards, the main source of stress was the inability to move back and forth between the Nursing Station and the patients in a problem-free manner. We had to rely on the cameras installed in the wards to communicate via the computer screens in the Nursing Stations or contact the patients via the ward message group. We had to gain a full understanding of the vital signs and special conditions of patients in the previous night and discuss therapy directions with the physician prior to his daily ward rounds. We then got ready to don our PPE and initiate the service procedures in the isolation wards. Simultaneous with the discussions, we had to record the contents on the patient lists which are printed out daily and create a memorandum which had to be attached to the glass window of the change room facing outward. The goal was to allow team members to get a clear understanding of daily treatment items from the corridor in a convenient manner before entering the isolation ward.

With a view to ensuring personal safety, we had to spend ten minutes to don and doff our full protective gear before entering and after leaving the isolation wards. We had to examine ourselves from head to toe in a mirror to ensure there were no holes and constantly remind ourselves, so we didn’t overlook any important steps. The standard procedures for donning and doffing PPE were time-consuming and troublesome, but the head nurse had mindfully created a poster and placed it on a wall to remind all staff members of these procedures. Every now and then, she exhorted us not to be negligent and take as much time as we needed to protect ourselves and the members of our team.

These cumbersome procedures which were repeated day in and day out made

us deeply appreciate the time and effort the hospital has been putting into the organization of PPE donning and doffing training for infection control to be prepared for all hazards and emergencies.

After joining the medical care team of the 4th dedicated ward of Taipei Tzu Chi Hospital on May 31, I kept wondering how long it would take to develop a chemistry between co-workers from different wards of the hospital and become familiar with the new equipment and work procedures.

It turned out that my worries were unfounded. The moment the computer printed out the patient list, we instantly rallied together, our nursing souls united by a powerful sense of vocation.

Relieve Suffering and Bestow Happiness

One of my patients, a 50-year-old woman, left a deep impression on me. Her younger brother got infected at work and ended up passing on the virus to 6 family members. The RN described to me what had happened the previous night: “Chen-Chen, the patient says she has no appetite and feels unwell. She kept yelling and banging her head against the bed while kneeling on it all night. She made so much noise that the patients next to her were protesting.”

As I got ready to don my PPE and enter the ward, I requested the patient’s consent over the intercom. As I entered the room, I saw her curled up in a kneeling position like a wounded little animal, eyes shut tightly and helpless... I felt a strong urge to protect her and went over to hug and comfort her by telling her: “No matter what difficulties you are facing, you are the most extraordinary person!” I was caught off guard when she suddenly burst out crying. Then she slowly opened up and confided in me what was weighing on her mind. She told me how she was suddenly identified as a potential contact, isolated, and rejected by her friends after testing positive. She then lost her job and was separated from her family member some of whom also tested positive. She was afraid she would die and never see her loved ones again... Her physical discomfort, state of despair, and lack of confidence in her recovery made her misery even worse. It sounded like the sufferings of being apart from loved ones in a despicable environment, the suffering of unsatisfied yearning, and the suffering of the five aggregates were overwhelming her, which explained her physical and mental exhaustion, her utter helplessness, and her mental breakdown.

I kept hugging her while she was telling her story. She gradually regained her



Chen Chen-Chen hugs the patient to comfort her (bottom left image). The patient expressed her gratitude by presenting Ms. Chen with a painting of her “guardian angel” created by herself.

composure, but suddenly asked me with a teary face and sobbing voice: “Everyone is afraid of us! Why aren’t you scared? You seem to know everything!” Her concern for my safety seemed to distract her from her own misery. She slowly lowered her guard and after accompanying her and listening to her story for a while, I was finally able to provide her with the knowledge she needed in her fight against the virus.

Through discussions with the attending physician, a psychologist, the head nurse, healthcare personnel, and social workers, we tried to determine how to make the patient feel fully cared for and how to help her maintain emotional contact with her loved ones by showing concern for each other. We were at her side helping her



The medical team of the dedicated isolation ward cares for the infected patients in a dedicated and fearless manner, which has been a source of solace and comfort for everyone.

relieve her physical discomfort, created short-term goals for her, and infused her life in the hospital with a sense of ritual. The goal was to help her gradually regain control over her life and jointly develop a blueprint for her road to recovery.

Gratitude and Giving Back

During their hospitalization, patients have to endure stress and disease in many different dimensions and often suffer breakdowns. The collective power and energy of our medical team enabled this patient to rebuild her self-confidence, restore her health, and safely leave the hospital. This fifty-year-old woman who had been a vegetarian for 30 years and an early childhood educator for 15 years, finally rediscovered the value and purpose of her life. Being a meticulous and cautious person, she slowly brought her own and her family's life back to normal through yoga, drawing, exercise, and continuing education over a period of two months. During a follow-up appointment, she personally presented this watercolor pencil painting which depicts her mental journey in the hospital and the scene of me hugging her as a gift. I was so deeply moved that my eyes blurred with tears. This is probably how she felt when I hugged her on her bed. Feeling loved is a source of great happiness.

"I solemnly pledge myself before God and in the presence of this assembly, to pass my life in purity and to practice my profession faithfully. I will abstain from whatever is deleterious and mischievous and will not take or knowingly administer any harmful drug. I will do all in my power to maintain and elevate the standard of my profession and will hold in confidence all personal matters committed to my keeping and all family affairs coming to my knowledge in the practice of my calling. With loyalty will I endeavor to aid the physician in his work and devote myself to the welfare of those committed to my care." My deep respect and admiration for Florence Nightingale arises spontaneously when this solemn pledge which is attributed to her and that we had to recite during our pinning ceremony resurfaces in my mind. I strive to stay true to my calling which is embodied in this vow by practicing our school motto of kindness, compassion, joy, and equanimity, boldly taking on challenges, and embracing diligent learning. I'd like to take this opportunity to congratulate the patients, my team members, and my family members who always quietly support me on their joint victory in this battle against the epidemic . It is wonderful to have you on my side.

The Support & Execution to the COVID-19 Vaccination Station in the New Taipei City Jing Si Halls

By Tsai Pi-Chueh, Supervisor, the Department of Nursing, Taipei Tzu Chi Hospital

After the breakout of COVID-19 pandemic in May 2021, people felt helpless and panic. Some news was released from Taiwan CDC in June that COVID-19 vaccines were available for the public. Our Dharma Master Cheng Yen directed us to devote ourselves toward social responsibilities. Under the guidance of the Supt. Chao You-Chen, Taipei Tzu Chi Hospital set up five vaccination stations at Jing Si Hall in the northern regions. Our Nursing Dept. Director Wu Chiu-Feng wholeheartedly assumed the responsibility of medical treatments. She asked us nursing supervisors to provide guidance and assistance to the planners of vaccination stations in Jing Si Hall.

For us, the supervisors, this was just the beginning. When would the vaccination start? How would the procedure be carried out? We had so many questions. After I got the assignment of Xindian Jing Si Hall, I contact the public sector person in charge, all sorts of problems solved.

The first group of people to receive the vaccines was people 85 years or older. It was a true test indeed. To ensure a smooth process, preparation is a must. How do we treat side effects after vaccination? An adequate supply of first



aid kits, oxygen tanks and oximeters is essential. Not having enough personnel to do vaccination is a problem. Our Nursing Dept. Vice Director Teng An-Na determined to recruit all nurses in the hospital, including those in the examination units. All supervisors in the nursing department brain-stormed and made an all-out effort to carry out this process. Simulation was done to explore different ways of inoculation, in order to fully prepare for the challenges of different possible scenarios. Volunteers assisted setting up stations in Jing Si Hall.

In charge of Xindian Jing Si Hall, I was grateful for Tzu Chi volunteers Mr. Wu Fu-Chuan and Ms. Chen Su-Nu. They helped set up the vaccination station as well as recruit volunteers. All participants carried a concerted effort to successfully accomplish this task of vaccination. But unexpected issues encountered. Organ transplant coordination nurse Yu Tsui-Tsui transmitted a video over for our reference that night. It was about the vaccination for seniors in Japan and dubbed “Umi-cho type vaccine injection”. In the video, seniors stay still and let the medical staff do the inoculations. I felt this method was practical. Then I passed along the video to Dir. Wu Chiu-Feng, who then held a meeting to discuss the feasibility of adopting this method. Indeed,



On July 3, 2021, Minister Chen Shih-Chung (middle) of the Ministry of Health and Welfare inspected the vaccine injection situation at Jing Si Hall in Xindian. Taipei Tzu Chi Hospital Supt. Chao You-Chen (2nd from right), Dr. Hsieh Chin-Lung (1st from right) of TIMA Taiwan, and Nursing Supervisor Tsai Pi-Chueh (left) accompanied and explained.

to consider for the safety of the seniors, it is wise to minimize their body movements. Therefore, I decided to adopt the Umi-cho vaccine injection at Xindian Jing Si Hall. Then I contacted Ms. Wang Shu-Gui, the Executive Administrator of Xindian Area. The plan was put in place on June 14. At the same time, we gathered all tools required for Umi-cho vaccine injection. We needed movable work benches and mobile chairs.

The vaccination inoculation was set in motion on June 15, Monday. Though not many people came, but we found that many seniors had mobility difficulty. I was so glad that we had adjusted and adopted a new method of inoculation. It was much safer for seniors while their physical stress was reduced. I had to monitor and ensure the entire process trouble-free. Incidentally, I became an instructor of health education for medical staff. I instructed them the procedure of vaccination inoculation and where they had to be mindful in the process. After inoculation, seniors stayed for 15 minutes for observation. They could leave if there were no signs of side effects. Volunteers would offer a pack of soybean drink produced by the Jing Si Abode as a token of blessing. Wishing wellness to everyone, the event at the Xindian Jing Si Hall was carried out with due diligence and vigilance from all.

The usable space at the Xindian Jing Si Hall is somewhat limited. So, 500 inoculations for half-day were planned originally. It was smooth sailing from the beginning to the end. After a few days, the team leaders of the local district asked if we could increase the capacity to 550. I thought it was alright to add 50 more. Unexpectedly, the final figure reached 600. We thought this goal was too high and not realistic. In the end, the entire process was a success. We were at ease finally. We eventually set the number of inoculations to 600 for a half-day event.

It was a period of experimentation for the first 3-and-a-half months. Setbacks occurs from time to time. Regardless of the weather conditions being hot or rainy, safety and comfort for seniors are the most important considerations. Volunteers worked to accommodate the ever-changing weather. Canopies were set up to protect people from the weather, and put away for any signs of typhoons. Every minor details was considered. Volunteers went all out to accomplish their tasks. Inoculation therapist and doctors put up with the extreme heat behind the non-breathable isolation gown. At completion of the tasks, their clothes were soaked in sweat. I did not have one complaint nor unpleasant remarks. Participants were delighted to talk about how effectively they completed their tasks. Some doctors would gently advised seniors that it was important to become a vegetarian. They encourage people to have a vegetarian diet.

As time went on, we started treating the younger generation for COVID-19 vaccination inoculation. We continue to stick to Umi-cho vaccine injection method. We set out to facilitate people as our top priority. There were many heartwarming anecdotes. Thanks to volunteers who worked alongside us. They really took care of members of medical staff. They provided fresh fruits and beverages daily. We were touched from the bottom of our hearts. Seniors and their families were impressed with the dedication of medical staff and volunteers. I clearly remembered this following incident. After an elder lady got the injection, she asked volunteers where to get a bamboo piggybank. She wanted to donate. Sister Chu Ming-Her dashed to find a bamboo piggybank for her. This lady pulled out a \$1000 bill (NTD) from her pocket and inserted into the bamboo piggybank. She kept thanking everyone. Her son who came with the mother also donated \$1000.

Love comes around in a circle. Humane deeds were common at Jing Si Hall. People with compassion were connected to this event. Everybody was devoted to end this COVID-19 pandemic in Taiwan. Wishing the pandemic comes to an end and wellness for everyone.

Volunteered to Be One Nursing Member of the Quarantine Shelter

Kuo Huai-En, RN, 3D Psychiatry ward, Taipei Tzu Chi Hospital

“There will be 30 new patients in the morning!” One senior nurse announced energetically to everyone, and we geared up and listened. Recalling the first day I checked in at the Platinum Enhanced Centralized Quarantine station in New Taipei City, I still remembered the feeling of anxiety before entering the door. For me, who was usually in the psychiatry ward, the coronavirus disease is like a familiar stranger, not to mention that this “stranger” is the common number one enemy in the world. If I said “don’t worry!” I could not even fool myself. In the early days of the newly established quarantine station, the number of new patients was very large every day. Everyone’s protective gowns were always soaked in sweat, wet and dry, and dry and wet, but the work morale was never extinguished. Every time we put on new work clothes and the protective gowns, it was like wearing a shining golden bell iron shirt. With courage, we shouldered the heavy responsibility and continued to fight.

“Good morning, have you checked your temperature and blood oxygen?” This was a must-do every morning. And then we continued caring for the patient’s symptoms. We asked each patient in details. Everyone in the quarantine station was assigned jobs automatically in the morning. We stuck to our posts, helped each other, assisted companions for protective clothing, and said, “If you’re tired, say so, change someone to wear the bunny suit!” Senior sisters helped the juniors to put the cool patch on their foreheads; the groups in pairs moved forward together harmoniously like two people in three legs. What binds us tightly was the sense of mission to nursing and patients.

When I was in the quarantine station, every day was like a brand new day. Those warm stories were vivid in my mind. I still remembered that emotional patient yelled



at our nurses on the other end of the phone, because he was irritated by his tobacco addiction. We thought for him with empathy and helped him with many methods. In the end, he waved his hands and bowed to us through the glass of the room, we appreciated each other. And I still remembered another patient who was always panicky and lonely on the phone. We practiced deep breathing and relaxation together through the phone. Eventually she was able to share with us the goodness about vegetarianism and her expectations for the future. At the end this A-yi's tears was no longer from anxiety and fear, it was for the cozy time we spent together. Every little thing became the most special love story in my heart.

"Ding dong... ding dong..." This was the ringing that patients had been waiting for a long time. Because standing outside the door were the nurses wearing protective gowns, they were ready to accompany the residents for their release orders. Seeing the residents with luggage ready and the eagerness to breathe fresh air, we handed them a blessing gift prepared by Taipei Tzu Chi Hospital with our sincere blessings. We waved to them with joy. Watching the anti-epidemic taxis with the patients and their hopes. At that moment, I remembered one Jing Si Aphorism that fits my mood very well: "Do your best - stick to your post; do your best - be diligent with sincerity."

Nearly a two-month epidemic prevention mission in the quarantine station had come to a successful ending. I am glad that I had the opportunity to make contributions. I stood on the shoulders of Taipei Tzu Chi Hospital and became a small epidemic prevention soldier. Together, we shouldered the responsibility of fighting the disease. Every patient with their stories have become an indispensable heartwarming part of my nursing career. I hope one day the earth will have a beautiful movement for peaceful coexistence with the coronavirus, and that day is not far away.



Please Listen to Me,
Dear Head Nurse

My Head Nurse Guides Me like a Homey Light to a Lost Ship



During the epidemic period of more than a year, there was a family member who once scolded us busy nurses at the nurses' station. Next, he barged in without proper entry access! While I was lost, the Head Nurse came out from the office and talked to him with a firm and steady tone. She said, "Hello, Sir. I am the Head Nurse. Can I help you? Please do not speak loudly. This will scare our nurses. It's not good for care and safety!" The family member was clearly shouting and the Head Nurse was just asking him to not speak loudly. She went on to say, "You dress so nice and must be a respected boss. It also affects your image!" This worked. He listened and suddenly became polite, "Oh! I am impatient. Sorry! Sorry!" Our Head Nurse took action and calmed the storm at the nursing station.

Looking back at my short clinical career, there were many problems at the beginning. I had learning difficulties, couldn't adapt to the work environment, and didn't know how to get along with coworkers. Good thing the Head Nurse Chuang Yi-Ling always took the initiative with a warm tone and an encouraging attitude when I needed help and guidance, letting many disputes become an effective learning curve. I gradually learned to hold conversations with others, enhance knowledge and skill of a nurse. Also, even under stress, I now know how to listen and accompany patiently.

Before accepting the ISO External Audit last year, Head Nurse Chuang took us around to review the work environment, hoping to find any problems and needs, and come up with a solution together. I remember the Head Nurse saying, "It's your job. Focus on your convenience for clinical work. As long as it is reasonable and safe, I support." Letting go for us to find a solution. For example, modifying the flow by finding the fastest and most convenient way to improve work efficiency. During teaching discussions, unit affairs, policies review, the Head Nurse always listens carefully, analyzes from different angles, and guides me to reflect and explore. This allows me to practice critical thinking and proper communication skills in discussions.

I find that whenever we have difficulty or need assistance, the Head Nurse always fills the gap during emergencies to solve tough problems and face challenges that are different at work. She accompanies me like family.

I tell myself, "I want to keep on learning". Develop skills and knowledge from time to time, hoping to be able to give all-round assistance and spiritual care to colleagues at work. This is giving the best payback to the Head Nurse.



During this epidemic, in terms of patient care, I was not certain and even confused. The Head Nurse sensed my helplessness too. She took me step by step starting from understanding of the theory of viruses, to infection control principles, the hospital's policies, etc. This made my scared, unstable heart more steady and pointed the boat in the right direction. I became more confident in facing the epidemic.

I think the unit is like a big family. In such a busy working environment, everyone is under different pressure. In addition to giving care, you must also accept the emotions of family members. Without a good support, the body and mind may burst like a floodgate.

I want to thank the Head Nurse for taking me to adapt to the measures and policies in response to the spread of the epidemic, treating the clients and family members as family members with empathy and loving care. The Head Nurse reminded me that during the severe epidemic, don't let care lose warmth! She said, "Let the clients and family feel the warmth that I gave you. Light a bright, warm lamp for them on the way to healing".



From Head Nurse :

Winning People Hearts, Be their Strongest Support

By Chuang Yi-Ling, Head Nurse, 10A ward, Dalin Tzu Chi Hospital

In retrospect of the time when I first entered the nursing career, I was scared and felt helpless. Working in the ward, I did not know what to do. I followed the seniors and busied around with them. I am very grateful for their endless patience and thorough guidance back then. Although they were strict on me professionally, they were very caring and gentle about my life. They did things with protective and heartwarming intentions, which gradually calmed down a trainee's panic mind. With the seniors' guidance, I absorbed and learned from experiences. As a result, their strong support has made me stronger even under so much stress. I hope I can continue keeping up my spirit and take care of the juniors in terms of their work and life and work together in the path of nursing.

I remember when I worked with Jing-Wen. I was upholding a belief that we should not make any mistake when caring for a patient. So, when there were problems with nursing professional principles, I would analyze every pro and con at every level





of work seriously. At that moment, Jing-Wen would listen quietly and tilt down her head and try to recollect all the details happening in the nursing process. And the thinking was there anything she did not cover? Later on, I realized that although I tried hard to guide her but my facial expressions were otherwise. So, instead of talking with a serious face, I tried to be gentler and more relaxed to avoid the tension between us.

I treated Jing-Wen as my sister and wished she could absorb things like a sponge and become stronger. Jing-Wen always spent her vacation time asking for guidance from the seniors and self-learning. She was also willing to share her bottleneck, worries, and tiredness about her learning process with me. At this moment, I would listen attentively and hug her. When I heard Jing-Wen says, "It is great to have you! You have a magic power to make me relaxed...." This means that she has realized my effort in helping her. This is enough for me.

Nursing Heart, Family Affection

I must say that nursing work is not for everyone. When you deal with and handle each situation, you must not only manage it fast, decisively, and precisely, but also soothe the worries and anxious minds of the patients and their families. You may even need to deal with some irrational emotions. Even a single case is a precious life. Having a brave heart to face and contact with so many lives every single day is not something everyone is inherently born with. The heart needs to take tremendous stress and digest so many negative emotions.

Most of my colleagues left their hometowns and work in this city, sometimes I would cook some nameless dishes for them. I hid my love in my cooking. I hoped my love could be transferred to their hearts and warm up their days, letting them feel the home-like happy and caring moments.

I could still recall the day we successfully saved and transferred a patient in critical condition to the ICU unit. A few moments before the emergency call, I was making food. It was because Jing-Wen told me, "I wanted to eat mangos, but I don't know how to cut." I replied, "Yeah! You only need to know how to eat. I will be in charge of cutting it." Who knew at that moment, hardly someone pushed the office's door, then I heard, "Head nurse, there is a patient need to be tubed!" I put down everything on my hands and rushed

out and joint emergency care.

After the patient was out of critical condition and sent to the ICU unit, I heard Jing-Wen says, “Although we were exhaustedly busy, we felt happy to work and be busy together!”

It is true. It is a positive power from our team members working one-heartedly together. I could feel the bliss from our team. It was because I was acting like a mom who supervised sisters and daughters, a whole family, to implement a lifesaving mission!

I hope that Jing-Wen will not step back when encountering all sorts of training and negative problems in the future.

For the new coming sister and brother nurses, I will accompany them to walk through the difficulties and bottlenecks. We are all tiny screws located of an entity to protect and safeguard the health of any being.

I also want to remind every newly recruited nurse, when we are facing all the patients’ health problems, even involving in their last moments, we should know that the patients and their families may show their most vulnerable side. As a nurse, we don’t forget empathy and always be compassionate.

I hope during the difficult environment of the COVID-19 pandemic, we will not be step back. We should be strong and brave. Together we are one family. I will be here to be your strong backup.





Special Rookie Nurse during COVID-19

By Hsieh Yi-Wen, Ambulance Special Nurse, Kuanshan Tzu Chi Hospital



COVID-19 spread swiftly over the whole world in 2020. However, in Taiwan, under the great efforts of the entire population, we maintained the excellent result of zero indigenous infection. The first case of indigenous infection was detected in May of 2021. Ever since that time, the scenes of the pandemic that were only seen in the news before became a reality in our daily life.

I graduated from Tzu Chi University in 2019, majored Nursing. After my graduation, I worked in Hualien Tzu Chi Hospital as a Medical Intensive Care Unit nurse (ICU). After about a year and a half, a job opening was available in Kuanshan Tzu Chi Hospital. Kuanshan is closer to my home town. For that reason, I applied for a transfer in March 2021 and became an Ambulance Special Nurse.

The experience I gained from my services in the ICU was a big plus for my new job in the ambulance. Other than the skills to care for the severe illness, in ICU, I also learned how to interact with all types of people. Under the highly pressurized environment of the ICU, one often has the expression of “Dead Eyes”.

Hsieh Yi-Wen (right) was transferred to Kuanshan Tzu Chi Hospital as an ambulance special nurse. Not long after she took the new job, COVID-19 threatened, protective equipment were required on the job.



Working in the Intensive Care Unit of Hualien Tzu Chi Hospital. Exhausted at the end of the shift. Hsieh Yi-Wen's "Dead Eye" was captured by a colleague.

But the knowledge one gained from there not only help you to face different kinds of crisis. It also helps building up confidence in the nursing career. Even though there were no real COVID-19 cases while I was in Hualien Tzu Chi Hospital, the administration provided simulations for staff training. All medical personnel must seriously handle the simulated cases as real patients. That included the handling of protective gears and contact and treatment of patients.

In those drillings, we would following the procedures and put on all the protective equipment outside of the classroom. After the simulation, we would then step out of the classroom and removed the protective gears. Even though we were not very familiar with the procedures and proceeded with the drilling



slowly at the beginning, we all followed the instructions step-by-step. After all the protective equipment were removed, we would step toward an instructor, holding an purple flash light to search for residual “virus” that were carried out from the classroom. The “viruses” were corn flour with fluorescent agent that was spread all over the simulation room. If our protective gears were not put on carefully, those tiny corn flour were be carried out of the room by our clothing and easily detected by the purple flash light. From these drillings we learned how to prevent the virus to spread, absolutely.

Not too long after I transferred to Kuanshan Tzu Chi Hospital, indigenous infection exploded in Taiwan. The event deepened the difficulty of my new job.

Special nurses are always on 24 hours alert. Every time, when a hospital transfer notice arrives, the first thing we do will be to put on all the isolation equipment. This requires a certain amount of time to do. Even though the ambulances are equipped with air conditioners, but with the heavy protective gears on, we still suffer under the heat. In addition, the movement of the vehicle becomes a burden in carry out our nursing care tasks. For example, the task of intubation for sputum, it is a normal task in a hospital ward. But inside an



ambulance, one needs to first turn on the power of the suction machine to avoid over consumption of electricity in the car, the machine is usually turned off. The poser is turned on only needed. Then one needs to connect the surgical tube with the sputum suction machine. We also have to put on the special gloves and remove the inner tube of the suction machine. All these details need to be performed in a moving vehicle, before the actual task of sputum suction can be performed. Inserting the suction tube under the moving ambulance is a major challenge. The first time I took such an assignment, I just could not control my own hands. In other words, the tube just behaved like a disobeying dancing dragon. Sometimes, it took a long time just to locate my target, and, many other times because of the traffic condition (sudden brake of the car) my target just jumped away after I have carefully aimed it. In all these occasions, the sterilized tube would be contaminated and all the preparations needed to be repeated.

In the case of hospital transfer, even though the patient has no related symptom and with clean record of contact (TOCC, travel history, occupation, contact history and group gathering), we still need to wait for COVID-19 quick screening test results to arrange for a transfer. To transfer to another hospital





the on duty special nurse need to confirm the negative test result before leaving the vehicle. Usually, if the patient can talk, I would conduct a detail discussion of his (her) medical history before transferring him to another hospital. During the pandemic oral communication is often hindered by the face mask and/or the transparent face shield.

Seize This Mount, Express Your Appreciation

Once I was helping to transfer a senior patient with pneumonia. His screening test result was negative. For safety reasons, I put on all my protective gears before boarding the ambulance. The patient was an old male and not accompanied by any family members. He looked at me and curiously asked me, “How am I? Am I infected with the strange disease?”

I understood what the old gentleman meant by strange disease. He learned COVID-19 from the TV news broadcast. Even though his test result was negative and he has no contact history, his case should be simply pneumonia. But there were cases when negative turned positive. In addition, for hospital transfer, we could not rule out the possibility of exposing to positive patients in the other hospital. So, we needed to be careful all the time. I told my patient that his x-ray results look like he just infected with ordinary pneumonia. But the old gentleman was still very worried and said, “If I am going to die, don’t perform any life-saving aids.”

The number of confirmed cases and deaths were announced daily in the news. Even in the county of Taitung, people watched the news constantly. Mentally, my patient was affected by the news. I tried to comfort the old man and told him not to worry too much, we will transfer him to the hospital in town for more careful check. The doctors in the hospital will then evaluate his conditions and discuss the details with him. I tried to talk authoritatively in order to calm down the old patient before me. However, my face shield seemed too distant from him. I therefore reached him with my hands. Even with my gloves and all the protective equipment between us, the old gentleman seemed to feel my warmth.

When our ambulance arrived safely at the designated hospital, usually the patients and their family members would greet us with thanks. Even though the words were simple, “Thanks for your careful accompany on the way,” I was moved by their sincerity.

Quiet often, the family members were accompanying the patient. In those



Seeing the medical personnel with protective gears, the patients were confused. The special nurse not only has to pay attention to the patient's vital numbers, she also needed to calm down the patient's mind.



occasions, I would tell the patient that their companions deserve more thanks.

Whether it is in the ambulance or in the hospital ward, in our profession, details of interaction between people are revealed in front of our eyes. I think people tend to hide their feelings in front of others. Also in the nursing profession, we realize that unexpected things can occur at any instant. Therefore, we should not hesitate to express your feelings clearly to our love ones. Bless the world, bless Taiwan, let all people be safe, be healthy and distant from the pandemic.



My Iron Man Hero Dream Fulfilling in ER

Wu Yan-Chen, RN, Emergency Room, Hualien Tzu Chi Hospital



“Health Bureau EMOC (Emergency Medical Response Center) Bulletin announced a train overturn accident with large number of injuries requiring immediate medical care from all four major hospitals in Hualien.” On April 2, 2021, a seemingly ordinary day made a drastic turn with this announcement. It became the most unforgettable day in my ER nursing career.

It was around 10:00am when I received the news from the ER Nursing Group messaging system of the Hospital. I was just up from my bed since I worked the night shift the day before. Immediately, I contacted all my colleagues. Everybody was getting ready and heading to the hospital to respond to the emergency. When I arrived at the hospital, I found all the midnight shift senior nurses were still there. They were there ready to respond, just like the day shift workers. They directed us to change, to check in. There were many doctors, nurses, administrative staff and volunteers. It seemed like the entire hospital was on the move.



11:10am, April 2, 2021, Dr. Lin Chin-Lon (left), CEO of Tzu Chi Medical Foundation and RN Wu Yan-Chen (right) rushed (from the ER of Hualien Tzu Chi Hospital) to the Clearwater accident scene for disaster medical relief.

I was assigned to assist Doctor Lin Chin-Lon, CEO of Tzu Chi Medical Foundation. We were responsible to contact EMOC to collect disaster medical assistant equipment from the Disaster Medical Assistant Team (DMAT). With all the disaster equipment, we then went directly to the accident site – the north entrance of the Great Clearwater Tunnel. On the



way to the site, my mind was very perturbed. I had never witnessed the aftermath of a disaster. I could not image what would be in front of me at the scene. All I could do in the vehicle was to tell myself to do my best.

The accident site was a big mess. Twisted metal trains, countless injuries, noises of crying and screaming, and voices of the relief personnel. When we arrived at the medical station, senior nurse Kao Li-Cheng and emergency doctor Lin Yu-Kuan were already there for emergency relieve. Under the direction of the station commander, Dr. Lin Chin-Lon, we started to join their efforts without any delay.

However, the on-site scene of a disaster was totally different from the environment of the hospital. Due to the insufficient facility, equipment and supplies, our capability was limited. What we could do were the initial screening of the injuries and evaluating/classifying of their situations. The activities including testing the patients'

breathe, their vital signs and ability to move. Based on these screenings the injured were then be classified and then sent to the appropriate hospitals.

To my surprise, even in such a noisy and confusing situation there were orders amidst the chaos. Volunteers followed instructions of the medical personnel to classify injuries. Some passengers with minor injuries asked to take care of others with trauma injuries in order to save resources for survival. This made me realized the beauty of the true human nature. During a disaster, most people are willing to support and cheer up each other, whether strangers or not. That warmed up a sad environment. I felt the warmth of our society - the willingness of self-sacrifice of the people around us. A long and sad day finally ended in darkness. The relief teams dissolved one-by-one, and the tired medical teams returned to their hospitals slowly. However, this unusual day deeply locks in my mind, forever.

I graduated from Tzu Chi University with a nursing degree. After graduation, I selected ER nursing as my career. In the emergency room, we face unexpected incidents daily. For example, an unconscious patient without the accompanying of anyone, came into the ER. How could we figure out his problem? His condition may get worse at any instant. What would be the proper treatment and care? A good ER nurse needs not just special skills but a clear mind with logical thinking, and attentive to patients. One needs to continuously evaluate a patient's need and adjust the care treatment accordingly. Recalling my early days, I was often nervous, panic and sometimes standing there didn't know what to do. Fortunately, there were many senior nurses provided their helping hands and direct me toward the right direction. Slowly, I picked up the essential skills and started to perform my tasks independently.

Thanks for the support and guidance of my good classmates, good colleagues and senior nurses for all the helps that accompanying my growth and thriving.

Emergency medicine is very challenging. I do not regret for my choice. I always imagine being in the front line to save lives. My experience tells me that I still have a lot to learn. My heart tells me: "I am ordinary, but I want to put on the iron armor and become an Iron Man". I will continue to improve myself and become a perfect nurse, which is my initial resolve.



The Precious Companionship of Tzu Chi Parents

By Yu Zhi-Yi, RN, 8A Ward , Taichung Tzu Chi Hospital

For a long time, “volunteers” have been a major characteristic of Tzu Chi Hospital seen by the world. Tzu Chi volunteers regard Tzu Chi Hospital as their home and take turns to “go home” to do their duties. My first impression of Tzu Chi was not the blue shirts and white pants, but Tzu Chi volunteers in blue shirts and “blue” pants!

That was August 8, 2009, the Morakot 88 Typhoon, and I still remember it vividly. Two days of heavy rain caused serious flooding in the south, and aboriginal villages were severely damaged by landslides. Fortunately, my hometown was flooded only to one story high, and our entire home was not destroyed. When flooding receded, everywhere was covered with mud as far as I could see. The original gray asphalt road was covered with mud overnight. This disaster had deeply affected the hearts of the local villagers. How could such a home be restored?

Immediately, a group of Tzu Chi volunteers in blue shirts and blue trousers appeared, and I felt the thousand hands started moving! Walking in the muddy soil, one could not lift the feet out. These volunteers are all older than me, some of them are old enough to be my grandpa and grandma. Even as they struggled, they worked for several days during the clean-up. They came to the disaster-stricken areas to give not only their dedication and labor, but also to comfort people in the disaster-stricken areas. They said, “We are all just raising our hands and feet to do one thing. These two hands can reach out to hug people, to comfort the world, and to embrace the



suffering: “Don’t be afraid, don’t be afraid.” This is my first impression of Tzu Chi “volunteers. Wherever there is great difficulty, there are Tzu Chi volunteers.

During my job search, I visited Taipei Tzu Chi Hospital, and I saw beautiful figures of volunteers wearing vests throughout the hospital, serving seniors who arrived at the hospital with tea and snacks to people in need, listening to patients for their pain, and gently comforting with words and smiles. The most impressive thing is that a sister said: “Don’t worry about coming to work far away, you are all my children. Don’t be afraid of being wronged in the outside world, we are your parents, and we are your strongest support.” These words



soothed my heart. I chose to take up a career at Taichung Tzu Chi Hospital, which is close to my home, because of these words.

Due to fate, I went from surgery to internal medicine ward, and I faced the same patients in the oncology department, but I felt that every cancer patient who came to the internal medicine department all had to face and endure painful treatments. In their process of fighting cancer, we must provide the most attentive care. But the time pressure could sometimes cause friction because we did not understand the intentions expressed by the other party. Whether it was between medical staff, and patients or family members, all were possible. Fortunately, we had a group of medical volunteers who understand the emotions of the patients and accompany them. They also understand the needs of our medical staff. They accompany us to grow and provide selfless care. With their backing, we can continue to provide warm-hearted care.

I have always been thinking about leaving. And now I have entered my 7th year of nursing career. Perhaps as mentor parents often say, “Giving a little more love will make hard work no longer hard work. Our love will sublimate into an invisible driving force, allowing us to face all kinds of clinical trials bravely and fearlessly.”

Recently, due to the pandemic, medical institutions have strictly controlled personnel. Medical volunteer services have also been suspended. At Tzu Chi Hospital, I have become used to the existence and the interaction with mentor aunts and uncles. They have become our right hands and left hands. Now they suddenly disappear due to the pandemic, which made us hard to adapt.

But the enthusiasm of the volunteers cannot be quenched by the pandemic. Even in the cold winter, the resident volunteer mentor aunts would visit us and ask if we eat well and warm enough. Like a mother, they worried that we might be hungry. They served us hot fragrant noodles and fruit. In such busy work, we could feel the love of mentor aunts; the most often said by the mentor aunts: “We are family.” For me, who worked away from home, such words brought me great warmth. Sometimes I felt big pressure and could not take more, I switched my thoughts. Fortunately, there were a group of medical volunteers who contribute silently. They warmed my heart and motivated me to continue working in Tzu Chi.