

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





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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%**



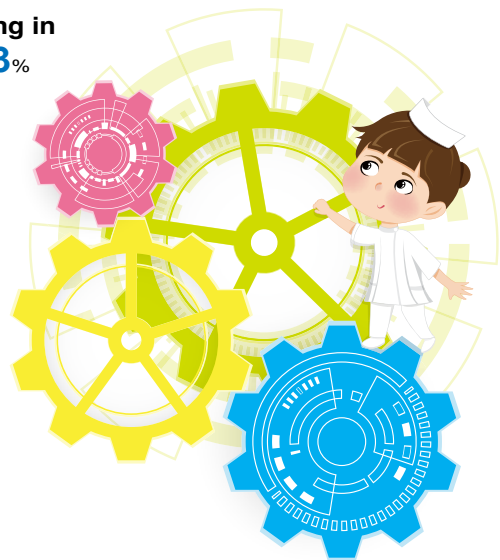
Assistance in TOCC and rapid antigen testing in entrance areas of medical institutions **12.3%**



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%



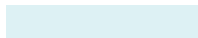
Reduced mass transportation usage and avoidance of outdoor activities 80.6%



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%**



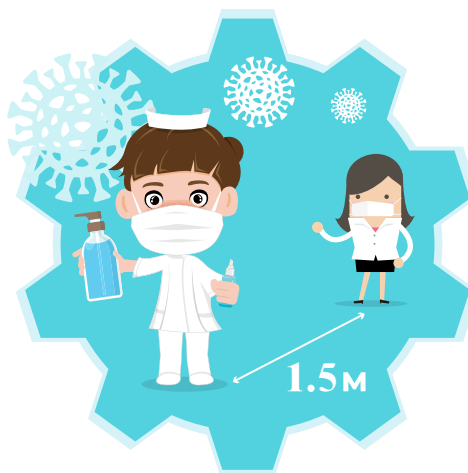
Relocation to the temporary dorm of the hospital and temporary separation from family members **8.7%**



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%**



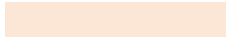
I feel that our medical services including caring for, comforting, and accompanying patients are highly valuable **34.2%**



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%**



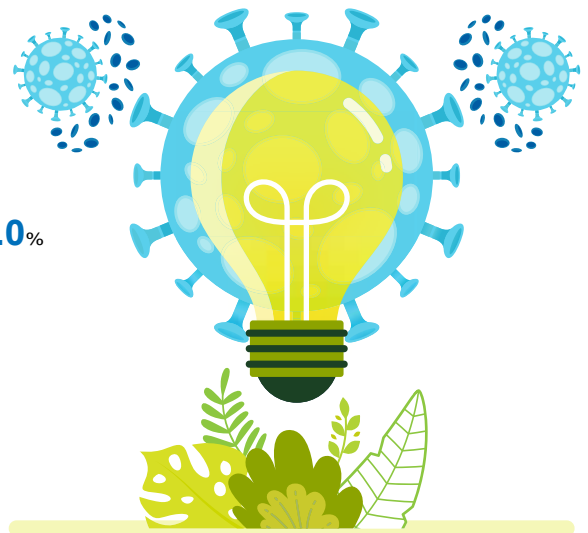
Our work and incomes are largely unaffected by the epidemic **44.8%**



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.

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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.