

Coronavirus Singapore

They're on the front line too

Besides doctors and nurses, other workers in hospitals have been under pressure amid the Covid-19 pandemic. Nadine Chua looks at their contributions and challenges



Ms Nurul Hadainah Muhammad Suhaimi checking a device intended for use in simulation training. PHOTO: CHANGI GENERAL HOSPITAL

She talks to grandparents from outside their flat

Ms Nurul Hadainah Muhammad Suhaimi, who works at Changi General Hospital (CGH), has not hugged her grandparents for more than a year.

Although the senior associate executive at CGH's Changi Simulation Institute is not in direct contact with Covid-19 patients, she worries that her maternal grandparents, who are both 85, will get infected with the coronavirus. For the past year, whenever she has visited them, she has stood in the corridor outside their flat, talking to them through a closed gate.

Speaking to The Sunday Times, she said: "When I bring them food, I also make sure to hang it at the gate instead of passing it to them directly. It is tough, but they are both very old and have serious health conditions like heart disease and hypertension."

"I don't want to risk (infecting them)... I don't want them to suffer."

Ms Nurul, 30, has been working at CGH for more than seven years. Since the pandemic hit last year, she has been taking precautions to protect those around her.

After returning home from work, the first thing she does is head straight for the shower.

Ms Nurul, who lives with her husband, brother and parents, said: "It has become a habit. When I get home, I make sure I don't hug anyone before taking a shower."

"My laundry load is separate from my family's. I even wash my hands before touching a light switch."

Her mother is 61 and her father is 65, and even though her entire family is fully vaccinated, the thought of them contracting Covid-19 is always at the back of her mind.

But while being a front-line worker is not easy, she finds her work fulfilling.

One of her major job scopes

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Mr Andy Tan (centre), NUH director of operations support services, with security officers Shanizar Abdul Majid and Nur Johan Amir. ST PHOTO: KEVIN LIM

Team converts NUH wards as Covid-19 ebbs and flows

In February last year, National University Hospital's (NUH) department of operations support services quickly converted normal wards into pandemic wards for Covid-19 patients.

The team's engineers, operational and security staff helped convert five general wards into pandemic wards. Three were reconverted to general wards subsequently, while two remained.

When the Covid-19 cases surged this year, the three general wards were again converted to pandemic wards. These wards house Covid-19 patients, and their conversion involves ensuring that the air supplied to and directed from it does not mix with that of other wards.

Twenty general rooms were also converted to isolation rooms last year, with three more converted this year.

Mr Andy Tan, 55, director of the operations support services at NUH, told The Sunday Times that it is imperative for the pressure regimes to be controlled in all isolation rooms. "This is to keep the Covid-19 virus contained and to prevent contaminants from migrating from the isolation room to the corridors or other areas of the hospital."

Under his supervision, engineers ensure that the air within an isolation room is extracted and cleaned by air filters.

Mr Tan, who joined NUH in November 2019, said ward conversions need to be done quickly and accurately. "Sometimes when

SWIFTACTION

Sometimes when there are more admissions, ward conversions are required immediately – even in the middle of the night.



MR ANDY TAN on meeting the surge in Covid-19 cases.

there are more admissions, ward conversions are required immediately – even in the middle of the night. The situation is always fluid, so we need to be nimble and adapt quickly," he added.

Mr Tan manages about 200 staff in the operations support services department at NUH with eight team leaders. They help to escort Covid-19 patients from wards to treatment areas and ensure equipment in the hospital such as security systems and ventilators are working properly.

Acknowledging staff fatigue as the workload increases, Mr Tan said: "We ensure our staff are given time to recharge, whether it is in the form of short breaks during shifts or taking days off. I think this is important because the Covid-19 journey will be long, but I believe the team will get through it together."

Nadine Chua

Supervisors don PPE to help tackle surge in cleaning jobs

Ms Yeo Shu Ming, 26, an executive at the National University Hospital's (NUH) environmental services department, oversees general and biohazard waste disposals as well as requests for cleaning of wards and rooms.

Since the onset of the Covid-19 pandemic early last year, there have been 50 per cent more requests for terminal cleaning of general wards, isolation wards and intensive care units.

And the number of cleaning requests has almost doubled since the spike in Covid-19 cases in August, added Ms Yeo.

Terminal cleaning of a patient cubicle involves wiping down all surfaces, including the bed, furniture and walls. It is done after a Covid-19 patient is discharged and before a new patient is admitted.

Ms Yeo said: "One challenge is manpower shortage. Because of the recent surge in community cases, more of our staff are getting health risk warnings and isolation orders."

She said that in September, the manpower shortage was so keenly felt that team supervisors had to don personal protective

50%

Increase in cleaning requests for general wards, isolation wards and intensive care units since the start of the Covid-19 pandemic last year.

equipment and clean the wards themselves.

And during last year's circuit breaker in May, the external vendors the team worked with said they could not collect and dispose of the hospital's biohazard waste on time as members of their staff were affected by dormitory lockdowns.

Ms Yeo had to scour NUH for an appropriate, unused room to hold the waste to ensure it was safely kept away from patients and other healthcare workers while waiting for disposal services to resume.

But Ms Yeo said the team has learnt to deal with the unexpected. She said: "We have been trained for this, and so we know what to do, and we do it because it is our job."

Nadine Chua



Assistant supervisor Maala Maria Antonette (right) packing snacks such as fruits and packet drinks into carts at Tan Tock Seng Hospital. ST PHOTO: GIN TAY



Senior pharmacist Neo Zhi Yang once found himself working 12 days straight during the circuit breaker last year. PHOTO: COURTESY OF NED ZHI YANG

Patients' verbal abuse makes the job even tougher

Mr Neo Zhi Yang, 31, has found it hard getting verbally abused by the people he has been trying to help. But the senior pharmacist at Singapore General Hospital (SGH) tries to be understanding, knowing that the pandemic has hit everyone hard.

"It could be due to the uncertainties of Covid-19. And because of that, some patients get anxious and visibly agitated," he said. "But I am thankful for other patients who spoke up for me when such incidents happen."

On top of that and the extra workload since the onset of Covid-19, he had to worry about his pregnant wife. She gave birth to a boy three weeks ago, the couple's first child. Mr Neo, who is on paternity leave, told The Sunday Times that Covid-19 last year led to more time spent at work and less time with his family and friends. During the circuit breaker last year, he once worked 12 days straight.

When one of SGH's five pharmacies closed temporarily for the ramping up of the hospital's medication delivery service in April last year, Mr Neo took on added responsibilities. He estimated that his patient load increased by around 70 per cent since then.

"Last year was pretty overwhelming because Covid-19 was new to everyone. There was an increase in workload, and I think many of us felt burnt out and exhausted. Coupling that with unkind patients really made it stressful at times too."

But things improved this year. "We are now better adjusted to the situation and are much more familiar with the workflow. It is still not easy, but we have learnt to work around any problems we may have," said Mr Neo.

He said one challenge was the disruption to medicine supply due to shipment delays. "When this happens, we will inform patients and reassure them about the efficacy of the alternative brand. We will highlight changes in the medication appearances and ensure they are aware of their dosage regimen."

When Covid-19 cases surged in August, his workload remained manageable. But the safety of his family continues to be on his mind. "I definitely worry. But I know that mentally, I have to be strong. There may still be some dark days when work piles up, but I love my job. I want to help people, and that keeps me going every day."

Nadine Chua

She hasn't gone back to see her family in nearly 2 years

For two years, Mrs Maala Maria Antonette has not gone back to the Philippines to see her family.

In July last year, her husband had open-heart surgery in the Philippines. Then, in May this year, his mother died from Covid-19. Mrs Maria, 47, had to mourn for her mother-in-law through video calls.

Mrs Maria is an assistant supervisor at Tan Tock Seng Hospital's (TSH) food and beverage services. Before Covid-19, she managed inpatient meal service operations. Her team of 10 was responsible for coordinating around 5,500 inpatient meals a day.

But since the pandemic began, her job scope and responsibilities have expanded. She said: "Aside from managing inpatient meals, we also coordinate with external vendors to provide about 1,200 daily meals to staff working at TSH and the National Centre for Infectious Diseases."

Mrs Maria said these staff meals are for those on duty and unable to purchase meals due to time or operational constraints.

At the height of the pandemic and during last year's circuit breaker in April and May, Mrs Maria found herself working 12-hour shifts. "We had to support all the healthcare workers who were working into the night to tend to Covid-19 patients," she told The Sunday Times.

While things settled down in the first half of the year, there was a 75 per cent increase in the number of requests for staff meals in the general wards and outbreak wards from July to October.

"We have certainly gotten busier since cases surged. When we receive additional staff meal order requests, we have to keep vendors updated and coordinate the deliveries," Mrs Maria said.

Even though her workload has increased, her motivation continues to be her family.

She video-calls her husband, 48, who works as a graphic artist, and their two daughters, aged 20 and 22, every night before bed and every morning before heading to work.

"Emotionally, I am trying to be stable and I am trying to be strong. I can't tell my girls I miss them so much because I need to be strong for them," she said.

The last time Mrs Maria took leave was in December 2019, when she flew back to the Philippines to visit her family.

But as the fight against the pandemic rages on, the last thing on her mind is taking a break. She said: "I can't think about clearing leave at this point. I am proud of the work I do, and I need to make sure everything is settled here before going back home to see my family."

Nadine Chua

14 more people die of Covid-19; infection growth rate dips below 1

Michelle Ng

There were 2,304 new Covid-19 cases yesterday, down from 3,099 a day earlier, said the Ministry of Health (MOH) in its daily report. The Covid-19 weekly infection growth rate dipped slightly to 0.98, down from 1.04 on Friday.

Fourteen more people, aged between 61 and 94, have died of complications linked to Covid-19, MOH said.

All of them, except for a partially vaccinated case, had various underlying medical conditions. The infection growth rate had been below one for nine straight days, before it rose to 1.04 on Friday.

This was due to fewer swabs having been done over the Deepavali public holiday at Public Health Preparedness Clinics and polyclinics.

The infection rate refers to the ratio of community cases in the past week over the week before. A rate that is more than one suggests that the number of new weekly infections is still increasing.

The latest deaths take Singapore's total number of Covid-19 fatalities to 576.

Yesterday's new infections comprised 2,179 cases in the community, 120 in migrant worker dormitories and five imported cases. Among the community cases, there were 388 people aged 60 and above.

The total number of cases in Singapore now stands at 235,480. There are currently 253 Covid-19 patients.

Another 141 beds are occupied by those with non-Covid-19 conditions and 134 beds are empty.

Two new cases were reported yesterday at the Institute of Mental Health, bringing the number of cases in that cluster to 422.

Other clusters under close monitoring are Iman Childcare (Woodgrove), Ban Heng @ Pelangi Village, Jenaris Home @ Pelangi Village, Safari House Preschool (Tay Poh) and Surya Home in Buangkok.

These clusters each reported one to five new cases.

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Submitting vaccination proof to be easier for US travellers

Those heading to S'pore via VTL and cannot produce digital cert can provide other proof

Wallace Woon

Those travelling from the United States to Singapore who wish to use the Vaccinated Travel Lane (VTL) scheme but have difficulties producing a digitally verifiable vaccination certificate can now submit other documents to prove their vaccination status.

They can produce a physical vaccination record and a letter signed by the vaccination provider, said the Civil Aviation Authority of Singapore (CAAS) yesterday. The letter should contain the personal particulars of the traveller as well as details about his vaccination.

They can also provide a digital vaccination record retrieved through their state's or local health authority's public health database, said Ms Margaret Tan, director of airport operations regulation and aviation security at CAAS.

Singapore citizens and permanent residents do not have to apply for a Vaccinated Travel Pass before travelling back, Ms Tan said in response to media queries. They can show the physical or digital record of vaccination before departure at the airline check-in counter and to the immigration authorities on arrival in Singapore.

Short- and long-term pass holders who are unable to upload vaccination documents when applying for a Vaccinated Travel Pass can apply to the Immigration and Checkpoints Authority's Safe Travel Office with the physical or digital documents attached.

The move is in response to reported difficulties by Singaporeans in the US in using the VTL to enter Singapore. This is because some US vaccination records are not recognised as official proof by the authorities here.

Ms Tan said CAAS is currently able to verify digital vaccination certificates issued in 15 of the 16 VTL countries, with the exception of the US, which does not have a national system of standardised proof of vaccination. Fourteen of

them have a national system for the issuance of such certificates.

"Canada does not have a national system but has recently developed a standardised proof of vaccination in the Smart Health Card (SHC) format that is secure and verifiable," she added.

In the US, there are multiple issuers including individual states, pharmacies and supermarkets, said Ms Tan. "For the US, we currently accept vaccination certificates that are issued in the SHC format by trusted issuers in the US on the Common Trust Network or Vaccination Credential Initiative."

The SHC standard is the predominant format used by individual states, she said. There are currently nine states issuing SHCs.

"When we started the VTL for the US, five states, namely California, Hawaii, Louisiana, New York and West Virginia, were issuing SHCs."

Since then, four more states – Colorado, New Jersey, Utah and Washington state – have started issuing SHCs. Another six – Arizona, District of Columbia, Maryland, Mississippi, North Dakota and West Virginia – are in the process of doing so, while Connecticut, Massachusetts and Oklahoma have started testing the system, she added.

CAAS is working with third-party issuers that do not administer vaccination but provide users with a digital vaccination record, she said. These issuers check and verify vaccination records submitted by users, for example, with state vaccination registries, often for a fee.

"We are not able to accept the digital certificates issued by third-party issuers which do not do such checks," she said. As the SHC is rolled out to more states and more credible third-party issuers come on board, CAAS expects most travellers from the US to be able to produce a digitally verifiable vaccination certificate within the next one to two months, said Ms Tan.

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