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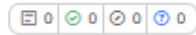
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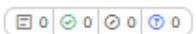
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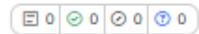
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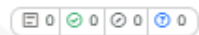
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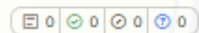
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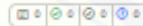
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VOL. 12 NO. 1 (2024): TRANSFORMING HEALTHCARE IN LOW-RESOURCE SETTINGS: A MULTIDISCIPLINARY APPROACH TOWARDS SUSTAINABLE SOLUTIONS, PART II

Transforming Healthcare in Low-Resource Settings

Nurses' experiences regarding nursing competence in the isolation wards during COVID-19 pandemic

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Arista Maisyarah

aristamaisyarah@unej.ac.id

Faculty of Nursing, Universitas Jember, Jember, Indonesia.

<https://orcid.org/0000-0001-7849-1186>

Eko Prasetya Widianto

Faculty of Nursing, Universitas Jember, Jember, Indonesia.

Syaifuddin Kurnianto

Faculty of Nursing, Universitas Jember, Jember, Indonesia.

<https://orcid.org/0000-0001-7060-9389>

Rizki Dwi Fibrilansari

Faculty of Nursing, Universitas Jember, Jember, Indonesia.

<https://orcid.org/0000-0002-7871-9783>

Abstract

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During the COVID-19 pandemic, it was essential for nurses to possess the necessary skills and expertise to provide care for patients in isolation wards designated for COVID-19 cases. This recognition of a nurse's experience could serve as a basis for establishing more precise competency standards for staff working in COVID-19 isolation wards. This study aimed to explore the experience of nurses with the competencies needed to care for COVID-19 patients in the isolation ward. The research design used was a phenomenological design as outlined by van Manen's phenomenological of practice. In-depth interviews were conducted using semi-structured questions involving six nurses in the COVID-19 isolation ward at Lumajang District Hospital. This study found seven major themes, namely nurses must have altruistic thinking, critical thinking to solve problems, the ability to work with teams, problem-solving thinking, the ability to handle emergency situations, have a caring attitude, and have the motivation to learn. The competence of nurses in the COVID-19 isolation ward should be established on a foundation of both hard and soft skills, which are essential for a nurse to deliver optimal care to COVID-19 patients. Efforts aimed at enhancing nurses' competencies should take precedence, enabling them to provide improved care and assist in addressing the ongoing public health challenges.

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Nurses' experiences regarding nursing competence in the isolation wards during COVID-19 pandemic

Arista Maisyaroh, Eko Prasetya Widiyanto, Syaifuddin Kurnianto, Rizeki Dwi Fibriansari

Faculty of Nursing, Universitas Jember, Jember, Indonesia

Abstract

During the COVID-19 pandemic, it was essential for nurses to possess the necessary skills and expertise to provide care for patients in isolation wards designated for COVID-19 cases. This recognition of a nurse's experience could serve as a basis for

Correspondence: Arista Maisyaroh, Faculty of Nursing, Universitas Jember, Jember, Indonesia.
E-mail: aristamaisyaroh@unej.ac.id

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establishing more precise competency standards for staff working in COVID-19 isolation wards. This study aimed to explore the experience of nurses with the competencies needed to care for COVID-19 patients in the isolation ward. The research design used was a phenomenological design as outlined by van Manen's phenomenological of practice. In-depth interviews were conducted using semi-structured questions involving six nurses in the COVID-19 isolation ward at Lumajang District Hospital. This study found seven major themes, namely nurses must have altruistic thinking, critical thinking to solve problems, the ability to work with teams, problem-solving thinking, the ability to handle emergency situations, have a caring attitude, and have the motivation to learn. The competence of nurses in the COVID-19 isolation ward should be established on a foundation of both hard and soft skills, which are essential for a nurse to deliver optimal care to COVID-19 patients. Efforts aimed at enhancing nurses' competencies should take precedence, enabling them to provide improved care and assist in addressing the ongoing public health challenges.

Introduction

The world was shocked by the infectious disease caused by the acute respiratory syndrome coronavirus 2, which was first identified in Wuhan in early 2020, in Hubei Province.^{1,2} This disease is called coronavirus disease 2019 (COVID-19). COVID-19 rapidly spread globally, and the World Health Organization (WHO) officially declared the COVID-19 outbreak a pandemic on March 11th, 2020. There is an increase every year, resulting in a pandemic. Psychiatric aspects of healthcare workers during the COVID-19 pandemic in Surabaya, Indonesia^{3,4} have a wide reach both socially and economically. The COVID-19 pandemic has underscored the vital role of nurses who must confront challenges in an ever-evolving situation, including the application of adequate skills and knowledge and addressing symptoms caused by COVID-19 to provide effective care.⁵ Although there are impacts for those working in the health sector, especially healthcare professionals (HCPs) who have direct or indirect contact with COVID-19.⁶ The acute symptom coronavirus 2 (SARS-CoV-2) is a type of coronavirus that causes coronavirus disease 2019 (COVID-19).

The World Health Organization reports that there are more than 22,000 medical workers spread across 52 countries and territories declared infected with the coronavirus (COVID-19).⁷ The spread of the severe acute respiratory syndrome coronavirus (COVID-19) has gripped the international community. COVID-19 is having a devastating impact on healthcare workers around the world, with a frontline healthcare provider fatality rate of 1.4%.⁸ Based on the number of nurse deaths in Indonesia during January–July 2021, Indonesia has lost more than 300 nurses due to

COVID-19. In hospitals, nurses play a more dominant role in providing health services to patients.⁹ Nurses have an important function in ensuring the quality of services based on a biopsychosocial and spiritual approach, as well as in executing and emphasizing the importance of patient safety through their duties and responsibilities.¹⁰ The role of nurses is substantial in delivering health services to patients, and their professional behavior is linked to patient recovery.¹¹ Work-life balance among professionals, including health professionals, is key to better efficiency.¹²

COVID-19 is found to have potential airborne transmission. The process of diagnosing COVID-19 is complicated, involving sampling in the patient's ward. During this process, various factors can be disturbing, such as the distance between the patient and the sampler, the use of a protective mask or oxygen by the patient, the patient's activity, coughing, and sneezing during the sample collection, air movement, Air Conditioning (AC), the type of sampler, sample taker, storage conditions, and transfer.¹³ Nurses must understand the care and management of COVID-19, including knowledge of the risk factors for transmission, diagnosis, and nodules.¹⁴

Health workers play an important role in preparing for the handling of COVID-19 patients, carrying out complete and adequate treatment to cure and reduce the rate of disease spread.¹⁵ The World Health Organization (WHO) has emphasized the exceptionally significant burden on healthcare workers dealing with the pandemic and stressed the urgent need to prevent its impact on their health.¹⁶ Nurses, who are at the forefront of treating COVID-19 patients in isolation wards, must possess appropriate infection prevention and control knowledge and skills.¹⁷ They should continually update themselves and stay informed about the latest developments related to COVID-19. Thus, the involvement of nursing management in handling COVID-19 to prevent transmission and care for patients in the isolation wards is urgently needed.¹⁸

Although the majority of people who contract COVID-19 have only mild or no complications, about 14% develop severe illness that requires hospital care and oxygen support, and 5% need to be treated in an intensive care unit.² In the context of the COVID-19 pandemic, the mental well-being of nurses has become increasingly pressing, given the high work pressures they are experiencing. The prevalence of mental well-being issues among nurses has significantly risen as the pandemic continues, with a majority of nurses reporting high levels of stress, fatigue, and an increased risk of mental disorders.¹⁹ Conversely, concerns about nurses' adequate skills and soft skills have also become a primary focus, considering the rapid changes in COVID-19 treatment protocols and the prevalence of certain skill deficiencies in some cases that could impede the effectiveness of care.^{20,21}

With the increasing cases of COVID-19, nurses are facing challenges in fighting the disease. Therefore, it is important to study the experience of nurses regarding the competencies they must have while caring for COVID-19 patients.

Materials and Methods

Research design

This study employed a phenomenological design as outlined by van Manen's phenomenology of practice.²² The aim was to explore nurses' experiences during the development of competencies needed to care for COVID-19 patients in the isolation ward. Hermeneutic phenomenology is a human science and philosophi-

cal method that allows the study of a phenomenon through lived experience.^{22,23} The phenomenon is described in terms of phenomenological themes.²² Formulating thematic knowledge involves interpreting the meaning of a lived experience represented in the phenomenological text as approachable in terms of meaning units, structures of meaning, or themes.²² In short, a theme is a conceptual formulation or a categorical statement that possesses phenomenological power when it allows for the development of phenomenological description.

The researchers consisted of four individuals who were lecturers from the University of Jember. Two of them are female, AM as the lead researcher, and RD, while the other two are male, EP, and SK. All four researchers have experience conducting research on COVID-19 and qualitative research,^{19,24-29} and there have been two books published related to COVID-19.^{30,31} The four researchers were involved in drafting, analyzing data, and formulating results and conclusions, while three researchers (AM, EP, and RD) collected data through interviews. Researchers and participants do not have a working relationship because participants are clinical nurses in hospitals, and their work does not overlap with the researchers' work.

Study participants

Participants were selected from two hospitals in Lumajang, each with a COVID-19 isolation ward for patient care. Thirty nurses who met the inclusion criteria were chosen. The criteria included having at least a diploma in nursing education, being a registered nurse working directly with COVID-19 positive patients in a hospital setting, having a minimum of three months of experience in a specific isolation ward, and having voluntarily agreed to participate and provided informed consent for the research. Out of the 30 isolation ward nurses who met the inclusion criteria, only six participated; the others did not meet the requirement of having worked in the isolation ward for at least three months and did not agree to provide informed consent. No participants were dropped from the data collection process, as all six selected participants completed the study.

Top of Form

Variable, instrument and data collection

Interested participants were provided an explanation of the study process. The participants determined the time for the interview process after signing the agreement. This study was conducted from August to October 2020. The data collection method involved open interviews with the participants, and the results from the verbatim transcripts were analyzed using Van Manen's approach 2015,²² in a Zoom meeting room.

The participants selected for this study were six nurses working in the special isolation ward at the COVID-19 Referral Hospital, Lumajang Regency. Data collection occurred through interviews using semi-structured questions lasting 45-60 minutes, and audio recordings were made with informed consent. Each participant was given the opportunity to freely express their ideas about their personal experiences and views. The main question posed to the participants was, "How was your experience caring for COVID-19 patients?" All participant interviews were verbally transcribed. No repeated interviews were conducted, and only chats were recorded, transcribed verbatim, and validated by re-listening to the recording and re-reading by researchers. All researchers collaboratively analyzed, reviewed, and discussed each interview and transcript. Phrases obtained from the collected data were checked repeatedly to ensure consistency, then coded and organized into themes that were developed. This study utilized

inductive content analysis to analyze the thematic analysis data based on Van Manen 2015.²²

Data analysis

The process of data analysis followed six steps outlined by Van Manen's approach.²² These steps include i) understanding the nature of lived experience in this study (*i.e.*, "How was your experience caring for COVID-19 patients?"), ii) investigating the participants' experiences through semi-structured interviews, iii) reflecting on essential themes by carefully and repeatedly reading the entire interview transcripts (statements, words, and phrases) line-by-line to develop initial themes, iv) describing the phenomena through the art of writing and rewriting, by re-reading the initial themes and constantly revising and refining thoughts, v) maintaining a strong and oriented relation to the phenomenon by reflecting back the themes with the research question, and vi) balancing the research context by considering both the part and the whole themes, isolating thematic statements to develop final themes that represent the lived experience. All themes or findings were then translated from Indonesian into English in the text. During the analysis, AM, EP, SK, and RD used both Indonesian and English to discuss and translate the findings with the other researchers. The translation decisions were guided by the framework of Abfalter et al. 2020.³² Categories were grouped based on similarity, and three main themes were generated to maintain the validity and reliability of the analytic research results. The researcher collected data independently, and these themes were discussed until saturated data results were obtained. In determining the final theme, the researcher also analyzed it through peer review. Henceforth, the participants' results will be abbreviated with the letter "p" in their writing.

Ethical clearance

The code-meaning approach is a strategy for evaluating saturation in empirical testing. In this method, reaching a complete comprehension of the codes serves as an indicator of saturation rather than relying on code counting. Using this method, any issues (or codes) that are identified during an interview are reviewed and noted. Subsequent interviews are then conducted to determine whether any additional nuances, dimensions, or elements of the code are identified. This process continues until no new issues are identified and the code has reached saturation. Saturation of codes can occur at several locations within the dataset.³³⁻³⁵ The decision to stop collecting new data or involving additional participants was made as the existing phenomena had consistently been depicted similarly by each participant. Even if new participants were included, their responses would likely be the same since they all come from a country with similar treatment characteristics, namely Indonesia. In-depth interviews with nurses working in the COVID-19 isolation ward were conducted as part of our research. Six participants' data was gathered, and we discovered that our findings had reached a level of saturation, where the patterns and themes that emerged had become consistent and there was no significant additional information. This research has undergone ethical scrutiny by the ethical committee of the Faculty of Dentistry, University of Jember, with reference number 933/UN25.8/KEPK/DL/2020.

Trustworthiness

To ensure the trustworthiness of this study, peer review was conducted by experienced researchers and experts to guarantee the absence of bias or preconceived notions during the analysis and development of themes. Audits and notes on methodological issues and decisions were made to ensure dependability. Member check-

ing was also performed, where the study's findings were sent to participants for validation. As a result, no changes were made to the findings, and all researchers concurred with the results.

Results

Characteristics of participants

In Table 1 explain that participants in this study were six nurses who worked in the COVID-19 Isolation Ward at the COVID-19 Referral Hospital and had at least three months of experience caring for COVID-19 patients. All participants were married, with the majority being male. The average age of participants is 30 years old, with a minimum age of 26 and a maximum of 35. The average time of experience caring for COVID-19 patients among participants is six months.

Study findings

Seven themes developed from the data: nurses must possess altruistic thinking, critical thinking to solve problems, the ability to collaborate with teams, problem-solving skills, the capacity to handle emergencies, a caring attitude, and the motivation to learn. These themes are illustrated by the responses provided below.

Theme 1: Have altruistic thinking

This theme focuses on selflessness and concern for the welfare of others, depicting altruism. Identified in the theme of having an altruistic spirit are humanistic concerns and sympathetic tendencies. In this regard, participant statements can be seen below:

"Once, I went down with complete hazmat from 7 pm to morning... the problem was the patient's condition was bad; the baby was 8 months old, had seizures, and the fever continued not to go down even last night until the apnea was three times... until resuscitation too... cramped, hot, stuffy... I just feel... but I can't bear to see the baby's mother crying all the time... let me stay alert, at least I can make the family comfortable with my arrival." (P5)

"Yes, actually, the usual procedure must limit speech when using level 3 PPE... what else should the mask have three layers... Surgical masks, N95 and again covered with surgical masks... yes, it feels tight, hard to breathe... but it's impossible when you see a patient who doesn't want to eat... stressed because I can't sleep... Yes, finally, we motivate, we cheer up, in the end, we talk a lot too heheheheheh (laughs)...." (P6)

Table 1. Characteristics demography of respondents.

Variables	n	%
Sex		
Male	4	66.67
Female	2	33.33
Married status		
Married	6	100.0
Single	0	0
Age of nurse	Mean 30.33	
	Mean 30.33	
Nurses experience in COVID-19 ward	Mean 6.167	
	Mean 6.167	

Theme 2: critical thinking to solve problems

This theme focuses on critical thinking, which means generating new and valuable ideas. This theme implies that nurses must have a responsive, sharp, and mature mind when dealing with unexpected conditions while caring for COVID-19 patients, especially in situations with limited resources. The critical thinking of nurses during the care of COVID-19 patients is identified with the sub-theme of wearing hazmat suits. Help from healthcare teammates takes time. When a patient needs emergency assistance, nurses must act immediately to save the patient. This action encourages nurses to think critically, as seen in the participant statements below:

"I received the report directly. A friend called from the delivery ward. Then, the midwife had gone to the COVID ward. We went down first, saw that the baby's head was out. I never had the experience of assisting childbirth alone; yes, we had to help. We installed underpads. Ordinary beds are not specifically for giving birth. Finally, we helped with our simple style, heheheh (laughs), using the science of nurses. It was the first experience of a male nurse assisting childbirth..." (P5)

"When we checked SpO₂, 80% of the patients were very short of breath. At that time, the ventilator was not ready. We immediately used double oxygen, nasal and NRBM, double oxygen, using central oxygen and cylinders. Thank God, the saturation can go up to 92%" (P1)

The participants' statements above reveal that they must be equipped with various basic skills in helping patients. Not only emergency skills but also other basic skills such as essential delivery assistance, critical care skills, and other abilities that must be trained before they are deployed in the field of the COVID-19 ward.

Theme 3: Ability to collaborate with a team

Collaboration with the team is a key competency, in addition to basic nursing skill competencies. The ability to collaborate with the team means working in coordination with all health workers involved in handling COVID-19 patients. This collaborative ability determines the quality of performance in the isolation ward because the heavy workload must be evenly distributed, not burdening only a few team members but shared to reduce the workload and achieve the common goal of providing the best care for COVID-19 patients. This theme is evident in the participant quotes below:

"The important thing is that team members don't talk much. They can immediately understand and already know their respective duties. It would be nice if we didn't tire so quickly and worked faster because of mutual understanding heheheh (laughs)." (P3)

"That's good; the team of doctors also always provides suggestions about some medicines if there is an emergency with the patient... so we can act quickly on the patient... it is very suitable to work like that..." (P1)

The results of the interviews above indicate that collaboration between team members in treating COVID-19 patients is necessary to produce practical, fast, and accurate work.

Theme 4: having problem solving thinking

Problem-solving is the fourth theme identified in this interview. This theme implies that nurses must always be creative and innovative in recognizing the problems and current conditions of the COVID-19 patients being treated. They should view these conditions as dynamic rather than static, aiming to achieve optimal

patient care. COVID-19 patients require longer treatment times than similar cases. Participants' statements regarding this theme can be seen below:

"Looking at the patients, they seemed bored. I couldn't bear it. I compared myself to them... so, I finally invited the patients and staff to help turn the garden at the back into a sports ground. ...badminton rackets...chess and banners with motivational writing...Thank God, many patients feel at home. The back garden is not boring anymore." (P3)

The participants' statements above reveal that they have to take a special approach to situations that are rarely encountered when treating COVID-19 patients in the hospital. This can be observed in the phrase "change function."

Theme 5: ability to handle emergencies

The fifth theme that can be explored from the results of interviews with participants is being able to handle emergencies. This theme implies that the basic skill that nurses must prepare for dealing with COVID-19 is an emergency. Patients can experience apnea at any time, leading to a life-threatening condition. Nurses must be skilled in dealing with and able to think quickly and calmly in situations that can occur at any time. Participants' statements regarding this theme can be seen below:

"If the baby has seizures, we immediately give him anticonvulsant drugs and febrifuge injections. The doctor's instructions are there. We need to give them according to the patient's updated condition... while we consult together." (P5)

"We are given therapy; we must have therapy. Our cooperation is very close. Without any special doctor's instructions, if the blood pressure is good, furosemide self-injection, we immediately report it too, so we are given flexibility for emergency conditions, more freedom." (P2)

The statements of the participants above reveal that they are given the autonomy to make decisions in an emergency because helping patients in an emergency is a race against time. Delay in making decisions and taking action can be fatal for the patient. This is reflected in the sentences "while we are consulting for a walk together" and "more freely."

Theme 6: must have a caring attitude

Being supposed to have a caring attitude is one that can go much further. It involves nurses providing empathy, compassion, and sincere appreciation to COVID-19 patients while accompanying them through difficult and critical times during treatment. This was revealed from the participant statements below:

"We treat them like our own family, so remember our mothers... yes, we greet them, we talk to them, help with meals... bathe... change diapers... they need attention." (P6)

"Spending time with patients... they don't want to eat. Don't talk to them.. let us cheer up.. sometimes they have thoughts as if they were abandoned by their families, they never visit them.. so we motivate them again." (P4)

The participants' statements show that COVID-19 patients not only need skilled actions but also that a nurse must have a sincere heart without pretension, demonstrating a caring attitude in their daily interactions with patients. This is expressed in the words "need attention" and "a bit long with the patient."

Theme 7: Have motivation to learn.

The last theme was expressed by participants in the sense of nurses having an extraordinary curiosity to master the care of

COVID-19 patients by reading more and updating their scientific knowledge to enable the best care for these patients.

“Caring for COVID-19 patients is a ‘challenge.’ Enthusiasm for upgrading new knowledge involves seeking information by exploring the internet, not giving up easily. Learning to continuously update knowledge and gaining insights from experience is crucial. Opportunities presented by COVID-19 are viewed as challenges for learning and becoming more skilled than others.” (P4)

“You need friends, you need complex knowledge. For example, ICU basics; for example, yesterday you had to teach a little about what to do with a ventilator, so you end up reading a lot and reading again, and keep on studying enthusiastically hehehe... (laughs)” (P2)

The entry above suggests that nurses in the COVID-19 isolation ward must have high motivational competencies to learn new things, increasing their knowledge and skills to provide accurate nursing care for COVID-19 patients. This is expressed in the words “keep updating knowledge,” “learn more,” and “read a lot.”

Discussion

In Theme 1, it can be observed that participants in this study, such as P5, demonstrate a profound level of concern for patients experiencing poor health conditions, even when facing significant physical discomfort. Additionally, participant P6 also depicts their high spirits in providing care and emotional support to patients, despite facing challenges with personal protective equipment. Having altruistic compassion is an important component that a nurse must have to treat patients. Without self-compassion skills, nurses will feel compelled to care for patients.³⁶ The compassion of nurses for patients enhances their understanding of general conditions and motivates them to deliver nursing care with empathy, improve patient comfort, and uphold professional care standards.³⁷ Individuals who exhibit altruistic behavior tend to have a high level of sensitivity and are more positive, cooperative, and happy in their interactions with others. Altruism can also diminish skeptical and aggressive attitudes when helping those in need.³⁸ The success of a nurse in providing health services is determined by how she interacts with patients. The nurse-patient relationship can reflect kindness, compassion, longevity, gentleness, love, concern, cooperation, responsiveness, and concern, all of which contribute to the services provided to patients.³⁹ Researchers opine that a nurse’s success in delivering healthcare services is highly dependent on the quality of the nurse-patient relationship, which involves compassion, attentiveness, collaboration, and responsiveness, collectively enhancing the level of care. The altruistic behavior of nurses reflects exceptional dedication to patient well-being, overcoming task barriers, and contributing to a positive patient experience.

In Theme 2, which revolves around critical thinking to solve problems, as expressed by P5 and P1, it is evident that nurses must possess a diverse set of fundamental skills to care for patients. This includes emergency skills and other foundational abilities such as childbirth assistance, critical care, and various other competencies. Knowledge, experience, competence, critical thinking, and standards of thought in the nursing process are integral components of professional nursing practice, enabling nurses to deliver comprehensive care tailored to the needs of patients.⁴⁰ According to a study conducted by Grase et al. in 2021, critical thinking ability is a crucial skill for nurses in problem-solving and selecting the best interventions for patients, which develops as they gain experience

in patient care. In practice, nurses’ knowledge and experience are utilized to enhance their critical thinking abilities in providing appropriate nursing care.⁴¹ In line with previous research on critical thinking, it is emphasized that nurses need to step out of their comfort zones. Nurses should cultivate their skills through diverse deductions and training, maintaining consistency in using their ideas and critical thinking, and staying updated on new developments in the nursing field. This ensures that when faced with limitations in various situations, they can address them with alternative approaches.⁴² The researcher’s opinion is that in the context of critical thinking in nursing care, nurses need to be trained in various foundational skills and must possess critical thinking abilities to respond quickly and effectively in emergency situations for the well-being of patients.

In Theme 3, the interview results highlight the importance of team collaboration in managing COVID-19 patients. Participant P3 emphasizes the need for each team member to understand their respective roles and efficient cooperation to address the heavy workload. Participant P1 also underscores the significance of communication and collaboration with the medical team for swift and accurate actions in emergency situations. According to the research conducted by Li S, Wang Y, Xue J, et al. in 2020 and Poortaghi S, Shahmari M, Ghobadi A in 2021, team collaboration can be defined as the effort of two or more individuals working together to achieve specific goals. In this context, teamwork is measured by aspects such as cooperation, influence, support, problem-solving, and negotiation and is influenced by factors such as team composition, norms, leadership, communication, empowerment, and recognition.^{43,44} Teamwork comprises five components: team leadership, shared performance monitoring, mutual backup behavior, adaptability, and team orientation. Collaboration and teamwork can expedite tasks and minimize errors. In a team, each member should assist others in achieving the goals.^{45,46} According to the researchers, team collaboration in the management of COVID-19 patients is not just a necessity but a policy that enables a profound understanding among team members, which can enhance patient care, productivity, and positive working conditions. In situations that demand swift and accurate performance, team collaboration becomes the key to achieving the best outcomes.

In Theme 4, regarding problem-solving thinking, the understanding that COVID-19 patients require longer treatment times provides a context for innovative actions, such as transforming gardens into sports fields and providing entertaining activities to alleviate patient boredom, as mentioned by participant P3. In solving problems in the context of nursing care, nurses must possess fundamental decision-making skills that not only impact the nursing care management process but also serve as a key to enhancing change planning capabilities. Therefore, nurses, whether in staff or leadership positions at all clinical levels, should have effective problem-solving and decision-making abilities.^{47,48}

Nurses need to address issues related to COVID-19 patients with creativity and innovation, seeking unconventional solutions, such as the example of transforming gardens into sports fields, to meet the psychological needs of patients and ensure their well-being.

In Theme 5, interviews emphasize the nurse’s ability to handle emergency situations while caring for COVID-19 patients. Participants, including P5 and P2, highlight the need for speed, calmness, and autonomy in decision-making when facing critical conditions such as apnea. Effective collaboration and nurse empowerment are key to responding quickly to emergency situations to prevent fatal consequences for patients. In a medical emergency situation, a team needs to provide a quick and responsive

response to life-saving efforts for the patient at a highly critical stage, supported by specialized training. Mulya, Widya et al. suggest that in a medical emergency situation, a team should respond promptly and effectively to life-saving efforts for a patient at a highly critical stage, leveraging specialized training.^{48,49} The job demands caregivers have skills such as the ability to work in a variety of situations, agility in understanding problems, and coping skills by finding solutions to problems or distractions. Nurse communication skills can develop knowledge and ideas and build cooperative relationships. This ability can improve the quality of nursing care.⁵⁰ They were also influenced by past patient experiences, indicating that as working nurses age, they gradually become more conscientious and manageable through years of experience working as nurses.⁵¹ As health workers who deal directly with patients, nurses must have many skills. One of them is interpersonal skills to communicate with patients. Communication is a complex process that involves behavior and allows a person to interact with other people and the environment. Nurses with skills in therapeutic communication can easily develop trusting relationships with clients, prevent legal problems, and increase professional satisfaction in nursing services.⁵² A high-impact simulation experience, as participants share insights related to their nursing experience, is suggested for reflecting on and recording potential extraordinary events to maintain reasonable ethical care.⁵³ The researchers expressed the view that participants believed autonomy in decision-making during emergencies offered essential flexibility, ensuring swift and effective responses in treating COVID-19 patients.

In Theme 6, it is evident that a caring attitude for nurses goes beyond technical skills. P6's statement underscores the significance of offering empathy, compassion, and appreciation to COVID-19 patients. P6 stressed the importance of treating patients like family, offering moral support, and assisting with daily activities. Similar sentiments were expressed by P4, emphasizing the value of spending time with patients, providing motivation, and expressing concern for their feelings. This is imperative for elevating the quality of human resources and the overall standard of hospitals, given that nurses constitute the most vital resources within healthcare facilities. In the realm of nursing services, where patients frequently grapple with diverse physical and psychological challenges such as pain-related anxiety, irritability, anger, and concentration difficulties, it becomes crucial for nurses to exhibit elevated levels of caring behavior.⁵⁴ Through offering attention, sensitivity, and a profound caring attitude towards the patient's condition and needs, nurses can address these concerns comprehensively, thereby fostering a care environment conducive to optimal patient recovery.^{54,55} Nurses are expected to stay abreast of advancements in various sciences. They apply knowledge that frequently evolves with the changing times, enabling them to deliver healthcare services to patients in alignment with contemporary demands.^{43,56} The necessity for a caring attitude extends beyond the technical aspects of care, embodying a sincere intention to enhance the well-being of patients and address their emotional needs, especially during challenging and critical moments in the caregiving process.

In the final theme, it is evident that interview participants express a strong desire to enhance their knowledge and skills in caring for COVID-19 patients. P4's statement highlights the enthusiasm to confront challenges and stay updated by exploring the internet. P2 adds that nurses require comprehensive knowledge, including the fundamentals of the ICU, and must approach learning with high enthusiasm, seeking information through reading and drawing from experiential learning. In delivering health services to

the community, it is crucial to possess a service-oriented attitude and paradigm, coupled with sufficient skills and knowledge that require ongoing enhancement.⁴⁰ Nurses are expected to stay abreast of advancements in various sciences. They apply knowledge that frequently evolves with the changing times, enabling them to deliver healthcare services to patients in alignment with contemporary demands.³⁹ Nurses in the COVID-19 isolation ward demonstrate a commitment to ongoing learning and updating their knowledge to deliver optimal care for patients, reflecting a strong motivation to enhance their competence.

Conclusions

The findings of this qualitative research unveil seven themes related to nurses' care for COVID-19 patients in isolation wards. These themes encompass altruism, critical thinking, team collaboration, problem-solving, emergency management, and caring attitudes. Nurses demonstrate their dedication to delivering the best care by prioritizing patient well-being over personal comfort, applying critical and innovative thinking to tackle complex situations, collaborating with multidisciplinary teams, emphasizing problem-solving, playing a pivotal role in emergency situations, and displaying profound caring attitudes. This research highlights the significance of a holistic approach to the care of COVID-19 patients, encompassing both technical and emotional aspects, and underscores a commitment to continuous improvement of knowledge and skills. In summary, it exemplifies nurses' efforts to address the challenges posed by the COVID-19 pandemic and the importance of comprehensive, patient-centered care.

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