

NURSING WITH A DIFFERENCE

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"Let Each Day Be Your Masterpiece". Galatians 6:9

POST EARTHQUAKE

NURSING SERVICES IN BHUJ KUTCH HOSPITALS

Dr. Viru H Bhudia

It was shocking news for me that an earthquake on 26 January 2001 had caused extensive damage and ruined Kutch.

Incomplete news on TV created more confusion.

My efforts to contact Private Transporters from Bhuj - 'had buses coming from Bhuj arrived?' 'What is the situation over there?' were unsuccessful.

We had heard that the bridge connecting Gujarat and Kutch Surajbari pul was affected. That huge numbers of patients were being shifted.

Every body was affected in one way or another, but still everyone was ready to help. This produced chaos in a disorganized uncontrolled situation.

At 3.00pm on 27 January, after wasting much time on formalities and in getting State Transport, the Ahmedabad New Civil Hospital Medical Team including Nurses started for Kutch taking the long route because of the damaged bridge. One team of Doctors and Nurses had already left by air.

We were 27 Nurses comprising Head Nurses, Staff Nurses, Male Student Nurses and myself from the College of Nursing. On arrival Director Dr. N.K Patel asked us to contact Dr. Chandarana Medical Superintendent in the G.K. General Hospital.

The Hospital had totally collapsed and the dead bodies of Nurses, patients and their relatives were still under the debris. We met the Nurses who felt helpless in the situation. They were very badly affected and still in shock. Their hearts were weeping like anything. We became just witnesses. We could say 'we are with you.' They felt some had come from among their senior friends with whom they could ventilate and express themselves.

We divided into two groups, joining for Nursing Services in temporary tent hospitals that had started on Jubilee ground and at the Jain Hospital. Casualties were heavy. The Military and some Voluntary Agencies had a very tough job. All the survivors were badly traumatized with fractures, spinal and other injuries some of whom were developing gangrene from being totally compressed under debris. Many pregnant women had premature deliveries.

We continued giving 'emergency medical and nursing services' at both places 24 hours per day from 28 to 31 January, receiving more than 1000 cases per day. Relief from round the clock service came only on the evening of 31 January.

While some orthopedic support and surgical interventions were carried out at the Jain Hospital, patients requiring major surgical intervention were referred to the Military Hospital at Bhuj or transferred to hospitals in other cities e.g., NCH Ahmedabad, Baroda, Mahesana, Bhavnager, Mumbai or Pune according to specific need and available transport. Those in the serious category were airlifted.

The France Medical Unit launched their Temporary Tent Hospital on the same campus – Jubilee Ground. This hospital attracted patients because of the better care that they provided; however, the Government chose to close this Unit.

By the time the various International Foreign Medical Agencies had installed their temporary tent hospitals at Bhuj we had those from France, Israel, The International Red Cross Society of Norway and Finland, Japan as well as the Indian Medical Association.

I went to meet Nurses in the Israel Medical Defence Corps Hospital which was launched at K.L.Patel Samaj Campus. Appreciating my approach and before leaving me with Head Nurse Mr.Yoram, Dr. Sonia stated ‘We need your help and cooperation’. When accepting my services the Head Nurse requested ten more Nurses who could speak English to translate for the Israel medical team from English into the local language as well as from Gujarate to English.

I undertook to be with them and to try to get Nurses from the Government Services. However, although the patients were the peoples of Bhuj, the local Government Authorities were unable to provide Nurses. The Israel team then requested general translators and were successful in securing the services of a good number of voluntary translators. This made their Medical and Nursing Services most effective.

I would like to highlight some of my experiences from working as Nurse Midwife in the Labor Ward and Unit of the Israel Defence Medical Corps Hospital:

Within a few hours they had completely installed their Medical Services. It was cohesive team work that demonstrated a well organized, systematic, interconnected, adequately equipped network to meet any medical, surgical, orthopedic, obstetric and gynecological, pediatric, as well as any casualty for both ‘in-patient’ and ‘out-patient’.

The whole Medical Team including Nurses seemed to be partners for services. There were Cadres but everybody was willing to do any job to accomplish patient care. They demonstrated much concern for the culture and customs of the people while caring for each patient. I became a member of their Team.

On 2.2.2001 they planned a field visit tour of the various hospitals launched to get an over-view of the situation. When Colonel Dr.Yehuda and Dr. David asked me to act as guide, I felt they had accepted me as a useful resource person for local information. Later Brigadier General Giora Martonovits, Surgeon General IDF Medical Corps expressed appreciation for my efforts to make the field trip meaningful. I accepted his invitation to join them on their special weekly prayer day and dinner.

Nurses and Doctors were committed and dedicated in their duties. They followed total patient care and practiced primary nursing. They were sincere, self-directive and responsible. They were tall and tough, but with humanity and a kind heart that was not ‘one off’ or for ‘show’ but was a reality in every experience. Patients were very happy under their services. We could read their faces and unspoken expressions.

I really enjoyed working with the Israel Team of Doctors and Nurses whose concern was for each patient

Long stories could be written about those interesting experiences.

I really wanted our Indian Nurses to have the opportunity to learn from this team while they were here with us but I could not get the Government to act so that more Nurses could avail this opportunity.

The Israel DFMC team was aware of the temporary nature of their services and started planning to transfer patients where they could receive their final care and recovery period. Dr.Yehuda asked me to join in planning for this settlement.

We went to the International Red Cross Society Hospital on the campus of Lalan College as the IDFMC authorities felt the medical and nursing team of this hospital may have better care. I was introduced as a special Resource Nurse and useful person. Nurse Experts Mariana and Live expressed their need of a Resource Nurse and requested I join with them as early as possible.

Next day 4.2.2001 I joined the International Red Cross Society Hospital supported by Norway and Finland explaining the need for a letter to my Government to continue working with them. They produced this within no time and I worked with them as Nurse Coordinator for Local Nurses. The plan was for one year.

This was a 350 bed hospital running with 120 indoor patients and heavy OPD and Casualty services. Government Nurses were coming on deputation from all the main hospitals throughout Gujarat e.g., Ahmedabad, Valsad, Surat, Mahesana, Vadodhra, Bhavnager, Jamnager, and Junager.

Because of weekly (maximum 15 days) deputation there was a rapid turnover of Nurses causing instability in Nursing Services and extreme difficulty in training for adapting to a disaster type situation. Gaps occurred as a result of these factors combined with the uncertainty of which group of Nurses would change and when. Patients suffered.

Government was requested by the Red Cross Hospital authority to supply some local permanent Nurses so that the Hospital services could be stabilized and patients could receive more appropriate care.

I perceived no responsible response. It may not be fair to discuss non cooperative attitudes. I found that the Authorities for the International Red Cross Hospital understood the situation and took the decision to run the hospital.

Their expert Nurses and staff had a meeting. I attended as a member of the team. Dr. Richard, Chief Coordinator of the International Red Cross Society wrote the letter for my deployment. Then Dr. Poul and Nurse Expert Live met with the Commissioner of Health and presented the proposal for my duties at the Red Cross Hospital.

When I found that the Government Authorities were not happy for me to work effectively with foreign hospitals I informed them that if the Government does not deploy me I may not be able to stay for much longer; but during this time would help the Nurses to give their best to each patient.

We were having great job satisfaction even though working in a very distressing situation and under severe constraints. My service in Nursing with these International teams to the peoples of Kutch took place from 28 January to 10 February 2001.

My last link before returning to my workplace was an invitation to the Israel Defence Medical Corps Hospital closing ceremony.

	<p><i>Having learned so much while working with these organizations I wish that we could benefit from the In-service Training for this type of situation that they are so very willing to provide us.</i></p> <p><i>I am now working to establish Nursing Squad Services. If any Nurse wants information regarding this or is willing to share their expertise with us please write to:</i></p>	
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