“... HIS LENS OF LOVE AND COMPASSION IRRESPECTIVE OF THE LABEL ON THE BED.”

Covid Block at Mary Lott Lyles Hospital Chittoor District, Andhra Pradesh
Irrespective of the label on the bed...

A designated bed, an isolated bed, an ICU bed, an empty bed. These pictures have taken centre stage during the last few months of the ongoing pandemic. The wave has shifted to our smaller towns and cities.

Our mission hospitals located in the rural and semi urban areas have seen a surge of Covid symptomatic patients. They were ready. They were prepared. They delivered.

We as staff of CMAI have been privileged to be a part of their journey through these unprecedented times. Our palpable, visible support has been minimal, but we have tried to keep the connect, showcase their work and accompany them on this journey. The sudden amendments in the FCRA has further pushed us to look at a different way of functioning while keeping the mission, centric to any decision-making process.

The image of a hospital bed conjures up different thought processes for each one of us engaged in the healthcare ministry. For the administrator, the physical bed and its equipment is important. For the allied health professional, the tests related to the patient on the bed are important. For the nurse, the instructions to be carried out for the patient on the bed is important. For the chaplain, the personal connect with the patient is important. For the doctor, the cure of the patient is important. These functions are the ones that are visible and get the most discussion and attention. Our training programmes, webinars and discussions continue to ensure that these functions continue with no difficulties.

The pandemic, however, brought to surface the hidden roles of the same bed. The opportunity to feel the warmth of a caring staff member, the feeling of a trust that would not be broken, the expertise that came out of hard work to manage all aspects of the disease, the genuine interest in the preventive aspects and not only the cure, the welcome and acceptance which began at the gate with a smile and an infrared thermometer.

These roles became prominent during a pandemic for a hurting society and these are the strengths our mission hospitals have brought to the table. These are the roles which keep us true to our mission. Showing the love of Christ to the person on the hospital bed seeing each one through His lens of love and compassion irrespective of the label on the bed.
LFA: Kindly share your present occupation and association with CMAI?
Ella Sonawane: I am the Associate General Secretary and head Publications and Missions - ISPCK. I am associated to CMAI by virtue of being on its Editorial Board of the CMAI Publishing Committee.

LFA: Please share about your organization’s nature of work and its operations in India?
ES: The story of ISPCK began in 1710 when the Germans, Danish Lutherans and British Anglicans got together to establish the SPCK in India. The Society has been serving the Church in India since 1710.

It was registered in India as an autonomous self-governing body in 1958. In 1970, the 1958 Constitution was amended. Now the affairs of the Society are governed by an ecumenically constituted General Body, meeting triennially, and electing the Governing Body. Since then the SPCK has traversed through a long and rewarding journey of Indianisation and diversification and moved towards a transformational change from a single mission society to one of India’s largest multi ministry Christian communications organisation. This spectacular transformation is manifest in the strategic expansion of its footprint, in range, scale and scope of ISPCK ministries today. The Society has made a large contribution to the Indian social and spiritual fabric through multi-dimensional efforts in creating spiritual and...
societal capital. Over time the Indian SPCK has become a major contributor to the Indian Church with the wherewithal to serve as a value-based Corporate Christian Communication agency in the region, with a Prophetic and Proactive agenda. The Society works in close co-operation with other Christian communication agencies. Our vision is to create centres of excellence in Christian communication to impact communities in our context. The Society also engages in equipping churches, communities, and people through its inclusive training programmes.

LFA: Talking about the publications business or sector, do you agree that this took low priority due to COVID-19 and lockdown? What were the adverse effects?
ES: As in all sectors, publishing also took its toll. Though work on proposed publications continued as the team worked from Home (WFH) but books could not be published due to the Lock-down. The Press was closed and so there was no question of any publications per se. Once the unlock began things began to come on tracks but at an awfully slow pace. There was a back log which had to be recovered. This surely hit the sales of books and we are Distributors too so supply to schools as Service Providers hit an all-time low.

LFA: How did the editors, writers, proof-readers adapt to the sudden change in workplace option, like working from home? What were the issues and advantages?
ES: WFH was the only option for the Editorial department. Initially, it seemed fine but, in my experience, and I speak on behalf of my department too I think we are not really trained to WFH. There were no real working hours as household chores had to be factored in with no domestic help. Juggling between home and office work was indeed tough. So it would be more than the usual working hours. Having said this, I would say the advantages outweighed the disadvantages as we were most important, in the safe confines of our homes and could still work. We were in regular correspondence with our authors and each other. Some of us are still restricted to our homes and sometimes this is a little challenging as you cannot have face to face working time with your working colleagues. One is constantly on the phone or Zoom to coordinate work and try and meet deadlines during this pandemic which of course was a worry. Of course, this again was not in our control.

LFA: Many publications which were planned as per schedule got delayed. What were the possible plans and approach for next actions?
ES: The books to be published which were already in the Press stayed the way they were. There was a shift in what we envisaged versus the Pandemic. So instead we began reaching out to our authors who were already working on their projects to submit their work. But even here many of our authors who were travelling were stranded in places where they had no access to their work or projects at hand. At the same time, for many this time worked towards their advantage as they could complete their writings. This way we had enough on our plate. The next action is to reschedule our publishing strategy. And try and be back on track. On boarding, training, reskilling, upskilling as processed change, roles shift, organisations need to provide the right resources to train staff at scale.

LFA: From a publishers’ perspective, many journals and publishers have modified editorial procedures and policies to expedite quicker dissemination. Comments please?
ES: Covid -19 is here to stay and we need to alternate and find new avenues to reach out to readers and a wider audience. So yes, I would endorse this that we need to make a shift in our thinking and working styles to meet reader’s expectations.

LFA: In your view, did the online version or e-publication business thrive? Does it pose a threat to the printing & publications sector?
ES: With this Pandemic our ISPCK stores were closed and now even after the unlock there is hardly any footfall. Though we had e-publications, but we have increased digital publications to reach out to more people around the world. For us to not only survive and sail but to be ahead of the curve we not only need to be digitally driven and offer our publications to many more but also keep our existing readers. In fact, I have observed that more readers are taking on Kindle editions and slowly and eventually that will be the ‘new normal’ in India too. Authors are engaging with us to publish their work on a digital platform. Although print continues to be the preferred mode of content consumption, digital publishing is steadily gaining ground. eBooks and audiobooks are expected to gain increasing popularity as technology, reading and listening habits change. The question is are we ready to go deeper into digital publishing? Then we need to be prepared and trained.

LFA: What is CMAI’s experience for its publications in times of COVID-19 and lockdown? How did CMAI react and plan differently in this case?
ES: We need to re-strategize our publications and probably make it more viable for those who can read on devices. But we still need to think of those who do not have the ways and means to read digital versions. We may not get advertisers so the financial burden will weigh on CMAI like many other organisations who depend on this. Before COVID-19 we were undergoing a digital transformation, some at varying paces, but now as we enter the next normal, digital transformation is no longer a process or future end goal, it is actually a need that will define how organisations will continue to survive in today’s new era.
In the last couple of months, we at CMAI had the opportunity to interact with most of our mission hospitals. These 40 virtual meetings via Zoom brought together participation of 169 member institutions over nearly 75 hours of interactions.

We came across several instances of shortage of healthcare human resource, infrastructure and other essentials required to fight the pandemic, which has greatly stressed the leadership. The CEOs came forward to share stories of inadequacy, challenges and disheartenment also how the combination of healthcare workers’ resilience and innovations of the staff has continued the fight against Covid-19.

We were moved the most as the CEOs shared positive experiences and heart-warming stories. The mission hospitals have continued to respond to their calling of being available to serve the needy even in times of pandemic and fear.

These are experiences of real life heroes, and experiences of the people in the front line. These champions and stories are driving the impact of Member Institutions on ground, which vividly came into the spotlight during the CEO meetings.

We realised that such stories had huge potential to encourage and motivate both individual and institutional CMAI members and healthcare workers across the country.

The Department of Communications is now working in tandem with various regions, sections and committees of CMAI to further collaborate with the CEOs of mission institutions to gather facts and information on potential stories. These impact success stories will feature under a campaign titled “Beyond Covid-19.”

We look forward to listening to your stories because together we will be able to show impact which builds Trust and brings Hope.

Write to us at cmai@cmai.org

“"We encourage our Member Institutions to come forward and share stories. We envisage Beyond Covid-19 as a campaign to beautifully reflect our connection and journey together through these times."" 

- Dr Priya John, General Secretary CMAI
Disasters such as a pandemic can teach people something about how life should be lived. People prepare themselves for possible calamities held for them in the future. They have always searched for a meaning in their misfortunes in difficult times. It can be comforting to believe that things happen for a reason and there are learnings even in chaotic situations. Factors like hospital’s administration, coordination, ethical practice, harmonious relationships have a significant impact on the entire hospital management.

**Effect of hospital coordination:** There is a harmonious relationship between workers and workers inspired by the pride of the workers and the sense of mission hospitality showed strong unity and group consciousness. Therefore, there is a lot of use of moral force to create a hospital team spirit. Improving the level of hospital management is important.

**Hospital Competitiveness:** The hospital has also started the intense competition. Hospitals want to get better as medical service quality is competitive. This indicates the level of quality of medical service, medical technology has a level of medical ethics and emphasizes objectivity, impartiality, transparency and integrity.

**Hospital Ethical Practice:** Hospital ethical practice is the inspiration for business activities and their development. The process is systematically combined with hospital features to train medical staff. It is group consciousness as the goal of hospital development, a centralized expression of maintaining trust, hospital ethics strengthen the hospital’s personality. Hospital’s moral spirit is formed once becomes sustainable and permanent factors play a role of managing and consolidating hospitals. The specific phase of medical service and management behavior promotes the realization of the hospital crisis maintenance function.

**Ethical Quality of Hospital Administrator:** The moral quality of the hospital administrator has an impact on two aspects of management performance: One, the ethical quality of the manager is effectively guaranteed to encourage them to full responsibility and standard behavior and the good moral quality of managers is the spiritual power that wins the appeal.

In conclusion, ethical management is a new management model, which is an inevitable choice for the hospital management and innovation. The goal of maintaining ethical management is essential for the mission and value of the hospital, it is very important to build harmony and improve the relationship between doctors and patients, improve operations efficiency maintain consistency. These ethical factors have a great impact on image, purpose, competitiveness, coordination and in the overall development of a hospital.

**Updates from the Administrator’s Section //**

- CMAI/CMC Distance Diploma in Hospital Administration Education program for 2020-2021 admission process ended. We have 29 students enrolled. The aim of the course is to improve the management of mission hospitals in India through enhancing the skills, knowledge and abilities of the staff and administrators. Praise God for all the students enrolled and thank you for prayers.

- CMAI/NLSU Admission for “Medical Law and Ethics” batch 2020-21 also concluded. We have 24 students enrolled.

- Admission to CMAI’s “Laws on Hospital Administration for 2020-2021 also concluded. We have 21 students registered for this programme.

- The Virtual Administrators National Conference will be held in the month of November 2020.

**Hospitals Initiatives during COVID-19**

1. YMCA Health Centre Ranchi, carried out the last phase of the COVID 19 relief work in which 260 packets of food grains were distributed.
2. Emmanuel General Hospital, Narsipattinam provided food materials to the needy and distributed masks and sanitizers to the Municipal workers and the community.
3. CSI St. Mary’s Hospital, Khammam in Telangana provided nutrition supplies for 200 HIV patients.
4. Hulda Crawford Memorial Hospital, Vikarabad, Telangana distributed food packets to the patients and the needy.
5. Nireekshana Acet. Hyderabad distributed masks to 300 HIV patients. Nutrition supplies were distributed to 300 HIV patients.
In times like this, all are realizing the importance of Nursing. This year as we celebrated the International year of Nurses and Midwives, the pandemic added more depth and meaning to it. Due to the fear and the various protocols associated with taking care of patients infected with this novel virus, patients were isolated from their dear ones and became totally depend-ent on nurses.

As nurses, it is a unique opportunity for us to show the love of Christ and to the world. All the nurses across the world were working beyond the working hours keeping aside their personal needs and their responsibilities towards their families. Many have succumbed to the fatalities of COVID. However, our faith in God keeps us going with all the possible might because till date He remains our strength and support.

CMAI’s Nurses League Section, began this year with Ward Managers’ Training from July 2020. Twenty-eight participants from 11 mission hospitals across India are actively attending and participating in the training. The online classes will commence in October this year.

The positive response from the participants is a great encouragement for CMAI. Beyond these online classes, the training also contains sending the participants to institute of excellence for hands on skills. We hope that in good time the same is possible.

CMAI’s Nurses League Section, began this year with Ward Managers’ Training from July 2020. Twenty-eight participants from 11 mission hospitals across India are actively attending and participating in the training. The online classes will commence in October this year.

The 71st National Conference of Nurses League of CMAI has also been scheduled to be held from 17th-19th November 2020 via the virtual mode. We will soon publish the the brochure and all necessary details of the conference on CMAI’s website. Meanwhile, please block the dates in order to attend the conference.

Believers Church Medical College Received World Stroke Organization’s Angels Award

The WSO Angels Awards aims to provide practical support to improve stroke care globally, recognize and promote best practice in stroke care and share key learning around implementation of quality stroke care. This year Believers Church Medical College received the Gold category award as the only hospital in Kerala and one among top 7 hospitals in India.
Pastoral Care and Counselling
- Ms. Imtimenla Aier, Secretary - Chaplains’ Section

The struggles of the youth in relation to mental health is real. COVID-19 has made it more visible as the entire world is buzzing with so much of uncertainty and questions with the change it brought along with it. Young people are striving in every way to live an optimistic life but yet many are burdened, in need of physical, spiritual, social and emotional care. Most of the youths listen to their peers and look out for them for support.

As a response to this, CMAI and NCCI jointly organized an online training for young people under the banner “Ecumenical Youth Chaplains Training” from 21st September 2020 until 7th October 2020 within the age group of 20-35 years. The main objective of the training was to equip young volunteers/peer helpers where they will be trained to offer basic counselling by identifying people going through psycho-social and spiritual crisis. The care and counseling training is tailor made to enable young people to identify the holistic need of the other and attend to them as care givers.

The resource persons were: Rev. Paras Tayade, Dr. Kimneihat Vaiphai, Ms. Grace, Rev. John Nischal Kumar, Rev. Anita Khristy, Rev. Julias Khristy, Mr. Jianthaolung Gonmei, Ms. Wangshirenla, Mr. Supong Tzudir and Ms. Imtimenla Aier. The topics covered were basics of counselling, suicide, mental health and wellbeing, managing emotions, inter and intra-personal relationships, death and dying and grief counselling. Well-being of an individual as an outcome was emphasized by all the resource persons.

It was an honour to work with Mr. Jianthaolung Gonmei, Executive Secretary of Youth Concerns, NCCI and the team as we dealt with different realities of struggles young people go through on a daily basis.
Opportunities in Disguise
- Mr. Lyric Abraham, Secretary-AHP Section

Greetings from AHP Section.

In these unprecedented times where there are sufferings and chaos all around us, sometimes we feel alone and lost. What we should do is just focus into light, the ray of hope, the word of Lord. Hebrews 12:11 “All discipline for the moment seems not to be joyful, but sorrowful, yet to those who have been trained by it, afterwards it yields the peaceful fruit of righteousness.”

As our AHP executive met on 3rd of August 2020 we decided to focus on the opportunities in disguise. Our Vice Chairperson Mr Paul David Patric suggested for a series of webinars for AHP professionals. In this pandemic situation as we are now more connected virtually, we decided to explore the opportunities.

Our first CMAI_AHP webinar successfully conducted on 29th September 2020. Out of the registered 99 candidates around 65 to 70 AHP professionals attended the webinar. The webinar enriched by three experienced speakers in three different topics focusing on safety and protection in workplace.

CMAI Central Education Board also taking forward it’s duties by conducting exams for final years in the month of September and October during this adverse time. During the CEB conveners meeting on 2nd September each committee’s decided to follow strictly the Covid protocols specified by Central government as well as from the respective state government to conduct the examinations.

The circumstances opened up new opportunities like online teaching, CMAI_AHP Section planning for Training of Trainer programme for Allied health professional tutors focusing on techniques of online coaching.

I would also take this opportunity to invite you all for the 18th Allied Health Professionals Virtual National Conference, Scheduled from 10th, 11th and 12th November. (3:00 to 6:00 PM each day). More details will reach you soon, request every AHP section member’s to support and participate in this unique online national conference. It’s another rare opportunity for all of us to attend the National conference from the luxury of our home.

As the saying goes “Every Problem is an Opportunity in Disguise”, only thing we need is the faith in Lord Almighty and the change in perspective of approaching the problem.
The Looming Pandemic - Burnout among Healthcare Workers  -Dr. Abhijeet Sangma, Secretary-Doctor's Section

As Christian healthcare workers, our understanding of work entails a sense of vocation and not merely a profession. Being called to care for patients is fulfilling God’s call to be a Christian in the healthcare sector. Our identity as a Christian is expressed in our vocation.

The medical field is in a crisis. This pandemic has exposed many gaps in our healthcare system, yet, medical professionals are responding to this crisis with unprecedented selflessness, resilience and compassion.

According to a 2018 Harvard report physicians’ burnout is a public health crisis that urgently demands action. The issue of physicians’ burnout was an epidemic even before the Covid-19 pandemic.

Understanding Burnout //
According to a 2018 Harvard report physicians’ burnout is a public health crisis that urgently demands action; almost half of the doctors reported troubling symptoms like depression, exhaustion dissatisfaction etc. The issue of physicians’ burnout was an epidemic even before the Covid-19 pandemic.

Burnout is generally described as an exhausted state in which a person loses interest in a particular activity and even in life in general. Burnout is a state of emotional, physical, social, and spiritual exhaustion. Burnout, most of the times, is the result of our self-reliance. We often take the role of saviour upon ourselves rather than trusting God to accomplish His will. Another cause of burnout is a lack of self-care. When we do not take care of ourselves, we fail to understand how much God values us.

Understanding Work //
Work is part of our calling (Genesis 1:28; 2:15; Colossians 3:23; 2 Thessalonians 3:10). Concern for people besides self and family is something that gives us a sense of meaning and purpose. As Christians, we are also expected to be self-sacrificial, at times giving beyond ourselves. God does not equate our acceptability or our identity with our work. He showed the importance of rest on the seventh day of creation and with Sabbath (Genesis 2:2-3; Exodus 20:8-11; Mark 2:27). As Christians, we are also expected to be self-sacrificial, at times giving beyond ourselves. God does not equate our acceptability or our identity with our work. He showed the importance of rest on the seventh day of creation and with Sabbath (Genesis 2:2-3; Exodus 20:8-11; Mark 2:27).

In one of the instances while having a busy day, Jesus invited His disciples away from the crowds for a time of rest (Mark 6:31). Jesus said to come to Him with our burdens and take His yoke instead.

Understanding Spiritual Well-being, Understanding Jesus //
We recover from burnout by entering God’s rest. We avoid burnout the next time by staying in tune with God’s specific direction for our lives. We do the work He calls us to, and we do it with all our hearts, but we do not go beyond the limits He has set. We accept His rest because it is the gracious gift of a loving and wise Father. To persevere—to continue in our calling without burning out—we must remain focused on Jesus. We must stay connected to the Vine (John 15:1-17). When we are in a lively relationship with God and fill our cup from Him, God equips us for what He calls us to (Hebrews 13:20-21; Ephesians 2:10). When God continually fills our spirit, it is impossible to dry up and burn out.

There are studies, which links spiritual well-being to avoiding burnout. More we are spiritually vibrant; it lessens the chances of burnout. When we are in a lively relationship with God and fill our cup from Him, we are more likely to stay within the boundaries God has set for us and not to work ourselves beyond what He would ask. Jesus said, “Come to me, all you who are weary and burdened, and I will give you rest. Take my yoke upon you and learn from me, for I am gentle and humble in heart, and you will find rest for your souls. For my yoke is easy and my burden is light” (Matthew 11:28–30). The ultimate solution for those currently experiencing burnout is to find refreshment in Christ. If you have experienced His rest in your life, do share your story with us, so that many more can learn from your experience and be blessed!

Write to us at cmai@cmai.org

Webinars organized and attended by CMAI

1. CMAI Webinar for Allied Health Professionals was organised 29th September 2020
2. Safety in Radiology Imaging Department Covid 19 Precautions for MRD Personal Personal Protective Equipment for Lab Staff.
3. 34th Annual Course on Sick & Suffering Pastoral Care started on 14th October 2020 under the theme this year “Let us Consider”.
4. Webinar on “Decoding the FCRA amendment bill” organized by CMAI exclusively in collaboration with Financial Management Services Foundation (FMSF) for Member Institutions was held on 1st October 2020.
5. CMAI and NCCI organised a webinar on Pastoral Care in COVID times – Preparing for the Good Work.
As a hospital of the Church of North India, Evangelical Mission Hospital Tilda strives to show Christian love through quality healthcare. Located in Chhattisgarh, India, Evangelical Mission Hospital Tilda serves a rural population who have few healthcare options, and aims to provide the best quality care. The local population around the hospital is all praises of Dr Dennis David, an orthopedic surgeon from CMC Vellore. This team’s dedication towards the needy is successful in bringing people from even nearby villages.

**Success Story - Limited Resources, Unlimited Care**

“The hospital staff is kind, humble and generous. We are treated like a family member. This makes us continue to come to the hospital and pay attention to their suggestions and instructions” – a village resident.

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**Success Story - Unstoppable**

Dr. George Mathew, CEO, Shanti Bhavan Medical Centre, Simdega, Jharkhand recalls his challenges and experiences even today and attributes to recovering from becoming a Covid hospital as nothing less than a miracle. Earlier this year, the local administration declared his general hospital as COVID 19 hospital. With limited resources, smaller team, no proper instructions but with dedication, teamwork and faith all hurdles were crossed. The hospital was successful in treating a total of 1073 positive cases and 820 patients recovered and went home. Dr Mathew shared these positive experiences during at a ICMDA webinar titled “Facing COVID19 in Remote & Resource Poor Location” on 3rd September 2020.

“We witnessed that they inadequate knowledge, skills and plenty of fear. In the midst of all that to create a facility of 50 beds, prepared the team, make their own PPE’s, draft protocol & SOPs while keeping the staff safe is commendable. It was tough but had to be done.” – a webinar attendee
Ms. Joyce Christian an individual member of CMAI working at District Civil Hospital in Saurashtra, Gujarat was honored with the ‘Corona Warrior’ award from the Honorable Chief Minister of Gujarat, Shri Vijaybhai Rupani, on 15th August 2020 at 74th Independence Day celebration function at Gandhi Nagar.

During the COVID-19 pandemic lockdown, she worked in the Covid ward as a Department In-charge for two and a half months with 10 - 12 hours of daily duty without a day of absence.

“I am delighted to receive this award from the Chief Minister. Those 12 days inside the isolation department wearing the PPE regularly is not an easy task at all. Today, receiving this award I dedicate this to all the frontline healthcare workers who are even right now fighting this pandemic.” – said Joyce
The main function of CMAI’s Communication Department is to disseminate information to the CMAI membership. It informs members of the past and prospective activities, discusses views on various issues related to health and healing ministry. It speaks on behalf of CMAI to people who are interested and committed to promote holistic healing to all. The regular CMAI publications related in this period were:

Publication: Footsteps
This is brought out by Tearfund, London. CMAI prints both English and Hindi language editions in India for local distribution.
English print run: 12k
Hindi print run: 1k

Being the voice of CMAI

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Publication: Christian Medical Journal of India.
CMAI’s official publication, which has a readership in India as well as abroad.
Released edition: No. 35.2
Theme: “Violence in Medical Field”

Publication: Life for All
LFA is the quarterly newsletter of CMAI that knits our network together with news, reports from the field and important announcements.
Released edition: No. 195
Period: January-March 2020

(To view past editions visit our website www.cmai.org/publications)