

CORRESPONDENCE

Infection control strategies of medical institutions in response to COVID-19

1 | PREFACE

The government of Taiwan has taken a proactive approach in responding to the COVID-19 pandemic, with only 393 confirmed cases and 6 deaths so far, most of which have been people returning from overseas.^{1,2} Here, we would like to share the experience of our contingency team of Kaohsiung Municipal Siaogang Hospital which we hope will be useful for other medical institutions.

1.1 | The latest information

We implemented the government's epidemic prevention policy, including tracking travel history through National Health Insurance cards and mask rationing into the hospital access control system. This was achieved through patient education by using graphic design (posters), dynamic images (video), social media (Facebook, Line, YouTube), the hospital's official website, hospital halls, elevators, and other places (Figure 1). The information is updated daily in real time, to prompt the public and staff to comply with the latest epidemic prevention measures in the hospital, and remind them of the importance of implementing personal health management and protection.

1.2 | All wards monitor people accompanying the patients: Wearing masks/temperature measurement/hand washing/travel, occupation, contact and cluster history

1. Masks.
2. Washing hands.
3. Travel, occupation, contact and cluster (TOCC).

(1) Implementation method:

- a. After admission, the nurse in charge will investigate the TOCC of the patient and those accompanying the patient and record the data.
- b. When the people accompanying the patient change, the nurse on duty will assist in re-establishing the TOCC.

(2) Audit:

- a. The unit's head nurse checks daily whether the TOCC has been registered.
 - b. The head nurse on duty checks the completeness of the TOCC record of each unit of the hospital on a daily basis, including whether the registration of the address is correct.
4. Measure body temperature: The nursing station measures the temperature of the people accompanying the patient once a day during the day shift. The night shift tracks whether the people accompanying the patient have a fever or upper respiratory tract symptoms, and records these data in the nursing record. The unit's head nurse checks whether the temperature of the accompanying people has been actually registered.

1.3 | Education and training of caregivers in Kaohsiung Municipal Siaogang Hospital

In order to ensure that the care workers have correct knowledge on the prevention of severe special infectious pneumonia, the "Management Practices for Care Workers" were formulated in accordance with the announcement of the Ministry of Health and Welfare in February 2020. Kaohsiung Municipal Siaogang Hospital designed a training course according to these specifications to educate all care workers, including self-employed, native, and foreign workers. The training course allows caregivers to complete the "Form of Self-Assessment of Care Literacy" and protective education before taking care of patients. We also provide multi-language education and training versions including Chinese, English, Thai, Vietnamese, and Indonesian versions so that caregivers can better understand the content of education and training.

1. Education and training

The care attendant can complete the education training by using the website (<https://youtu.be/Ig77s3iZDXE>) or by QR code. The care

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VPN inquiry (English version)

1. 您14天內有出過國嗎?
Have you ever traveled abroad within the past 14 days?
2. 家人或同住者14天內有出過國嗎?
Has any of your family members or cohabitants ever traveled abroad within the past 14 days?
3. 您有發燒嗎?
Have you had a fever?
4. 您有呼吸道症狀
(咳嗽、流鼻涕、鼻塞、喉嚨痛...等)嗎?
Have you had any respiratory symptoms (coughing, runny nose, stuffy nose, sore throat, etc.)?

Breaking news from Kaohsiung Municipal Siaogang Hospital Epidemic Prevention Team

In order to protect all subjects' health, all guests who need to receive physical examinations must act accordingly as listed hereunder.


1. Guests who enter Taiwan are required to stay in quarantine for 14 days, and should verify that no symptoms of the Covid 19 or concerns of infection appear before they enter the hospital for physical examinations.
2. Guests who have contacted newly arrived travelers from abroad or suspected infected cases should postpone physical examinations until the test results of those contacts show no risks of infection.
3. Guests who develop such symptoms as fever, cough, sore throat, olfactory disorder, diarrhea, body aches, and fatigue should seek diagnoses and treatment at medical institutions or clinics, to ensure no risks of Covid 19 infection before entering the hospital for physical examinations.

高雄市立小港醫院 關心您

ANNOUNCEMENT

To implement the epidemic prevention policy
Please be sure to **cooperate with the physical examination** and **put on a mask when entering the hospital**

WARMLY REMIND YOU



Please seek immediate medi-

Patient's/visitor's Guide Map

COVID-19 Prevention Team Effective from April 1, 2020		Traveled abroad within 14 days (Including self and cohabitant)		
		Negative	Positive	
forehead temp $\geq 37.5^{\circ}\text{C}$ or Ear temp $\geq 38^{\circ}\text{C}$ displayed any of the following symptoms Respiratory symptoms Ageusia or Anosmia	Negative	Patient/ Patient's companions	Allowed to enter outpatient dept.	Quarantine Special Service
	Negative	Other	Entry is allowed in the hospital	No entry in hospital
	Positive	Patient/ Patient's companions	Quarantine Special Service*	Area B of Emergency
	Positive	Other	No entry in the hospital	No entry in hospital

*Quarantine Special Service Office hours: Monday to Friday, from morning to afternoon. Please visit the Examination Dept of the Emergency, if you need quarantine specialist services during other period.

PhotoGrid

FIGURE 1 The posters of latest information

attendant can also review the class repeatedly to increase familiarity. The training focuses on:

- (1) Recognize and understand the symptoms of severe special infectious pneumonia.
- (2) Recognize and understand notice and cooperation policies for home quarantine and home isolation for potential cases of serious special infectious pneumonia.
- (3) Recognize and understand the correct method and timing of hand washing.
- (4) Recognize and understand the correct method and timing of wearing masks.

2. Management measures


- (1) The details of each care attendant will be registered. Their TOCC information will be recorded in the system so that it can be tracked in order to provide a reference for the Health Bureau for future epidemic investigations.
- (2) In order to understand the effectiveness of the education and training program for the care attendants, the nursing station randomly checks the correctness of wearing masks and washing hands of three people every day. If anyone fails the assessment, nursing staff will teach him or her until the procedure is correctly being performed.
- (3) Formulate work specifications for caregivers to prevent cross infection, such as:

- a. During service time, the care attendant should take responsibility for attending to the patient, and should not leave the care area of the patient. In addition, it is forbidden to gather and chat in other wards, corridors, stairwells, and so on.
- b. The care attendant should not go to the hospital to care for patients during home isolation or home quarantine.
- c. If the care attendant has a fever, respiratory symptoms or other physical discomfort, they should temporarily suspend patient service.
- d. The care attendant must fill in the "Form of Self-Assessment of Care Literacy," and sign and write the evaluation date on the form for any new care cases.

We hope that our experience will be helpful for other medical institutions.

CONFLICT OF INTEREST

The authors declare no potential conflict of interest.

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