

Optimization of Telenursing in Combating COVID-19: Preparation for Transitioning from Pandemic to Endemic Era

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ABSTRACT

COVID-19 conducted the worst impact in many aspects, especially in Health Care Workers (HCW) as a first liner. Abundant quantities of people infected by COVID-19 were far beyond the hospital's capability in many areas, thus making them neglected and generating an unpleasant favor toward HCW. Approval of a new strategy is needed to overcome those problems, which telenursing has a role in it. However, are there any aspects that could make it feasible in Indonesia? Bear in mind that this practice is not favored here. This editorial was carried out to explain what was happening and what action could be taken to solve it.

Keywords: nurse; telenursing; COVID-19; information technology; communication; remote monitoring

Nurses play a significant role as frontline fighters during COVID-19 pandemic management in various mechanisms, such as gatekeepers to screen suspected patients, tracing unit, caregiver, and post COVID-19 rehabilitator (Çelebi et al., 2020). However, during its implementation, those direct or high-risk activities prolonged the duration of interaction between nurses and patients, thus making them vulnerable to it. Although those events were minimized by using personal protective equipment (PPE), the strict-protective suit could promote another problem such as fatigue and discomfort for the nurse and propagate a negative stigma from the patient's point of view (Bagcchi, 2020). Hence, a good strategy must create a better outcome for both sides, safety and comfort for the nurse, and also satisfaction for the patient.

The hospital should only be used by those who are severely or critically ill because of COVID 19, and it could reduce the number of beds occupied, thus improving the health care that was being delivered. Prevention of the health system's collapse by reducing the scale of patient visits related to COVID-19 as much as possible became the central premise to adopt telenursing in our system. As the act of adaption about nursing care during a pandemic, telenursing could be used to treat a patient with mild or moderate symptoms of COVID-19. Nurses were uniquely assigned to give education about COVID-19 disease, eradicate inappropriate information related to the policies of COVID-19, and serve excellent psychological support. One important thing

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to note is that much improper information has already circulated in our community; hence, the person or even familial approach must be taken to rule out incorrect information (Souza-Junior et al., 2016).

Telehealth nursing, commonly known as telenursing, is the use of communication and information technology to transfer data relevant to nursing practice remotely by immediate real-time interaction or remote monitoring (Fronczek & Rouhana, 2018). Currently, telenursing is generally practiced in many countries around the world (Digin & Zeynep, 2021; Firouzkouhi et al., 2021; Galiero et al., 2020; Heo et al., 2021; Herliani et al., 2021; Kord et al., 2021; Raesi et al., 2021; Rajab Dizavandi et al., 2021; Rodrigues et al., 2021). However, unfortunately, this practice is not widespread in Indonesia now. The absence of a law that regulates telenursing specifically conduce an obstacle during its development, thus making it far left behind if compared with another telehealth practice, in this case, is telemedicine. However, both of them pose a different role in the action.

Pandemic era COVID-19 puts the hospitals or health caregivers in some areas on the brink of collapse because the mismatch number between HCW capability and patient demands could be helped as many as possible telenursing. Telenursing could help the patient obtain immediate primary health care, acquiring proper treatment remotely away from hospitals. Telenursing could also induce better nursing care by reducing the risk of transmission for the nurses. Lastly, from the nurse-managerial point of view, the digitalization of nursing practice could improve health care quality by reducing the cost, human resources, and material needed to afford holistic care.

Declaration of Interest

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