summer 2020

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for today's Christian nurses & midwives

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responding to COVID-19

- stories from the coalface
- uncertainty our new normality
- 6 ways to be a blessing in the workplace

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editorial

e've heard a lot about how this Covid season we're in is 'unprecedented'. The head of the Pentecostal church UK said this week 'Unprecedented times call for unprecedented prayer'. They certainly do, and it's been wonderful to see God's people galvanized to pray more. Throughout March, April and May we ran **COVID1900Prayer** every day at 7 pm check out our YouTube channel for our archive of all our daily prayer videos at *cmf.li/YTbCOVIDprayer*.

This season also calls for an 'unprecedented response' in healthcare workers. Throughout this *Spotlight* edition on *responding to Covid*, we gain a glimpse of some of the personal responses you amazing nurses and midwives are giving. From midwife Beth in the Philippines to Adi and Chelsea in ITU to Simone training to work in the London Nightingale hospital and Hannah nursing in the community. It may involve some risk – and John Greenall's article on the *call to risk* on page 21 is inspiring. It may involve working on a Covid ward, or it may involve working in another clinical area. It may involve lockdown at home. Wherever God has put us, it's about trying to be faithful to God there. Whatever our situation, it will definitely involve us daily having to put our trust in the Lord at this uncertain time, as Georgie encourages us to do on page 13.

I pray that through this edition, the Holy Spirit will work to help sustain, resource, refresh and inspire you in your own response to this 'unprecedented time.'

With every blessing,

Pippa



Pippa Peppiatt, CMF Head of Nurses and Midwives

Pippa trained as a nurse. She has planted a church for students with her husband, set up a charity for street kids in Uganda, and has been a Friends International Student Worker.

ways to survive lockdown

Pippa Peppiatt looks at some practical steps to keep sane during the lockdown



remember that you are not alone (even if self- isolating!) - God is with you (Joshua 1:9) With no option of going out in an

evening, spend a few minutes instead meditating on a Scripture, such as Romans 8:38-39. Let the knowledge of his love and presence calm and encourage your soul and mind.

stay connected with people

Maintaining healthy relationships with people we trust is essential for our mental well-being, so think about how you can stay in touch with friends and family while needing to stay at home. It's normal to feel a bit worried, scared or helpless about the current situation. Remember: it is OK to share your concerns with others you trust – and doing so may help them too. You could try phone calls, video calls or social media instead of meeting in person – whether it's catching up with people you usually see often or re-connecting with old friends.

keep a healthy lifestyle

Three of the best things you can do when under stress are get plenty of sleep, eat healthily and get exercise. So OK, the gym is shut, so you may need to get creative. In our home, my oldest daughter blasts out the music and leads us in aerobics every lunchtime (even if, in the absence of yoga mats, camping mats are being used instead).

have some fun! Be creative. From watching funny videos, sharing jokes, playing games, online quizzes, trying a new activity, virtual house parties, learning a new skill - the list is endless. Within my own family, so far we've cut each other's hair, celebrated virtual birthdays, had takeaway and film Fridays, sent each other the silliest memes, vines and videos, learning a new language and the violin (ouch!), and taught the ageing dog new tricks (who says you can't?!)

carve out some silence

Every day find at least a few minutes of solitude amid all the noise a crisis creates. In those silent times, you may want to pray and meditate on Scripture. That's wonderful. Do it.

But also, sometimes just sit in the silence. Let your mind wander. Watch the robin in the garden. Take some deep breaths. The silence will help you filter through what actually matters amidst all the noise.

Share hope People's spiritual instincts and questions get triggered in moments like these. A world struggling with death needs both the hope of resurrection and the power of a God who suffers with them. The appetite for the Gospel has been whetted like it hasn't been in years. Look for opportunities to share with others the Good News of Jesus and the peace that only our Prince of Peace brings.

Pippa Peppiatt is CMF's Head of Nurses and Midwives

Perhaps you want to talk to someone at CMF about how you are doing emotionally or spiritually. CMF have set up a **pastoral care and well-being programme** to offer free, confidential one-to-one support to any healthcare student or practitioner in the UK or Ireland.

If you would like someone from this team to listen to you, journey with you through this season and pray with you, we are available seven days a week. Most of the team are current or former clinicians, and all have experience in listening and pastoral care. We can also signpost you to other services if appropriate.

Email *wellbeing@cmf.org.uk* and leave your name and number so someone can give you a ring.

You don't have to be a CMF member to access this, and we aim to respond to everyone within 24 hours.

to be a blessing in the workplace

Esther Chevassut looks at how we can bless colleagues, patients and their relatives as they face the challenge of COVID-19

he Royal College of Nursing is known for this quote: 'This is where inspiration is met by frustration and where courage must outweigh fear. This is a profession where joy and sadness come in equal measure. This is challenging. This is rewarding. This is nursing.' That summary rings even more true during this extraordinary time of working in healthcare during the coronavirus pandemic. Whilst the world is in shutdown and under strict instruction to stay at home, we continue to go into work and serve on the 'frontline'. It is both a great privilege, as well as a daunting responsibility, to care for and treat the infected



and the anxious; to don and doff the PPE, and work in flexible ways in unfamiliar settings. As nurses, our call is to put the needs of the people in our care first; to serve them and work as a team for their good. You could say our call is to 'bless people'.

As Christians, we know blessing personally. We know that Christ is the ultimate, sacrificial, servant king, who humbled himself, dirtied himself and emptied himself for us. He has eternally healed us and truly blessed us with salvation, and life in its fullness. We have a treasure and a hope to share, a source of true blessing. As Christian nurses and midwives, we are blessed to be a blessing!

Humanly, it certainly is an overwhelming time. We are reliant on God to speak and to act through our feeble words and actions.

Here are some ways we can ask God to help us to be a blessing in the healthcare workplace at this time.

listen to people's concerns whilst being sensitive about when to diffuse unwarranted fear and anxiety Whether it's frustration over PPE, the fear of catching the virus or family at home catching it, fear of the future, low staffing, overwhelming work, etc. Listen to people and their concerns.

However, be aware of the effect of escalating anxieties in certain groups, and consider whether it may be right to speak to lift people's eyes up and out of a pit of spiralling fear.

Focus on truth: what we know and what don't we know. What we can do and what we can't do.

A calming voice can have a considerable impact. Acknowledge your colleagues' feelings of anxiety and validate their emotional experience. Remember, you don't have to agree with someone's feelings or choices to acknowledge their emotions are valid.

Show that you recognise their concerns and have listened to them by gently repeating their words back to them.

In your own speech, focus on the positive things, and affirm that you are working together as a team to protect each other and your patients at this time.

encourage your colleagues, in person or online

Paradoxically, during this time of social-distancing, you may have experienced social - deepening; people are drawn closer to one another in time of crisis. This could include your work team!

Despite the increased physical distance, as some members are redeployed whilst others are at home self-isolating, there are still many opportunities to deepen relationships with colleagues.

Make use of the technology: use WhatsApp groups, call one another or even try group Zoom video calls. Check-in with colleagues regularly and hear how they are finding the situation, especially those who are quieter on the group chat. Encourage one another after good and bad shifts; tell your colleagues how much you appreciate them.

Remind each other what a privilege it is to be a healthcare professional, especially at this time (and listen out for the Clap for Carers!).

As healthcare professionals, we are blessed to have a skill-set which is SO valued right now; many at home will be feeling restless, without a hands-on, helping job.

Remind each other of the joy it is to care for people as a profession and why you went into this field of work in the first place!

B meet patients' anxiety with peace Understandably, patients are likely to be more anxious than usual, especially if they have tested positive for coronavirus. Even more so if they require oxygen or ventilator support. With the death toll rising daily, many are understandably terrified by COVID-19.

For those who are hospitalised but don't yet have symptoms, there is often an acute (and justified) fear of contracting the virus whilst an inpatient.

Furthermore, the increased use of PPE, even for non-infected patients, exacerbates these fears and can be an additional barrier to good communication between patient and practitioner.

For those who are Covid-positive, the healthcare professionals caring for them are dressed head to toe in gowns, masks, gloves and visors. This visual reminder that they are It is both a great privilege, as well as a daunting responsibility, to care for and treat the infected and the anxious; 'untouchable', may reinforce their feelings of fear about being infected with a contagious virus and the seriousness of the state they are in.

Take any opportunity you can to show that behind all the PPE you are genuinely concerned and care for those you are looking after.

- Pause and listen to them.
- Explain the meaning of the words you are using.
- Explain that you're doing all you can and you will strive for their comfort and wellbeing.

Anxiety will impact one's physical, mental, emotional and spiritual health. So, remember a holistic approach to care and, especially as a Christian, may you be Christ's hands, feet, ears and voice.

> give relatives more time on the phone Currently, there is great anxiety

around being admitted to hospital, and when admission does occur, relatives find themselves in the challenging situation of being unable to visit their loved one.



If their loved one has tested positive or is having ventilator support, they will undoubtedly be scared and assume the worse; likely more so as they are unable to visit and talk directly with practitioners. You must give your patients' relatives extra time on the phone. As with patients and colleagues, listen to their concerns; validate emotions, but seek to diffuse unqualified anxiety with the truth of the situation; give clear explanations and frequent updates avoiding using medical jargon.

Put yourself in their shoes; practice empathy, show that you have the ability to share and understand their feelings.

Give reassurance that you and your team are doing all you can to provide the treatment their relative needs and support their wellbeing. Have the courage to be honest if their loved one is deteriorating. If, and when, difficult conversations around end of life arise, emphasise that your priority will be to ensure the comfort and dignity in the final stages.

share hope

What COVID-19 is bringing home, for many perhaps more soberly than ever before, is that we as humans are not in control. Much of what we naturally hold dearly, or have taken for granted, has been taken away from us or is crumbling before our eyes: businesses, economical security, comfort, community, health, certainty. This stirs the world to ask 'What is my foundation?' 'Where have I put my hope?' 'What does this all mean?'

I am drawn to Psalm 62:1-2 which says Truly my soul finds rest in God; my salvation comes from him. Truly he is my rock and my salvation; he is my fortress, I will never be shaken.

When faced with life and death in this acute way, big questions about the meaning of life arise. We are reminded that without God we cannot provide true hope, peace or assurance.

I urge you to take this season to pray for opportunities to share the hope you have far and wide. Be sensitive to opportunities arising for deeper conversations with your patients, their relatives and your colleagues.

Ask about your patient's spiritual health. Be open about what gives you hope in this uncertain time and perhaps why you are less anxious, even when going into a coronapositive ward. You don't need to be controlled by fear, because your foundation is not built

on yourself and your health. Our hope is built on our assurance of union with God, made possible through Jesus' sacrifice and righteousness.

Take the opportunity of the world being online to share hope. Invite people to church online, share videos and provoke conversations about Christ. He is our saviour, sustainer and source of strength.

To be a blessing in the workplace, you must draw from him and realign your heart to his. Take every opportunity throughout your working day to pray. Pray that you know God's strength and thank him for sustaining you. Pray for your patients and colleagues and for words to give them.

This is also a great time to connect with Christians in your workplace, to encourage one another to be lights for Christ.

As we care for people who may feel dirty and contagious, let's remind each other that our ultimate example of care is the sacrificial love of Jesus, who felt compassion towards us as we suffer with the disease of sin. There is nothing that we have done, or could do, to deserve his love. Yet, because of his love for us, he gave his life as a sacrifice so that we might have a right relationship with God and know the joy and hope of the Lord.

Let us then, in turn, love our patients and serve them with joy.

Esther Chevassut is a staff nurse in a High Dependency Unit and a CMF Associate Staff Worker for nurses and midwives

normality

Georgie Coster looks at how we find security in insecure and uncertain circumstances

e've heard a lot about how COVID-19 affects the lungs, often catastrophically. But what about the heart? This disease can expose issues of the heart we have been blissfully unaware of, and that can be painful.

The pandemic has disfigured life as we knew it in the UK, and our 'normality' is now characterised by uncertainty. How many people will die today? When will we flatten the curve? When will a vaccine be ready? And the more personal questions: How many of my colleagues will die? Will my family members all survive this? Will I? We don't know. We hate not knowing, don't we?

secrets exposed

The UK is not without its problems, but we're comparatively affluent, predictably rainy, and well vaccinated. In those circumstances, we trust God.

The last few months, however, with all their unanswerable questions, have brutally uncovered something festering in my heart, up to now successfully concealed by a relatively comfortable life. COVID-19, it turns out, is a revealer of truth. My once-compensating heart is suddenly in decompensated failure (metaphorically speaking). In the Bible, King David knew the feeling when he was surrounded by 'innumerable evils' and confessed, 'My heart fails within me'.¹

Uncertainty reveals where our heart is finding security. What are we trusting in? Safety nets litter our lives: Avoiding carcinogens, locking doors at night, effective vaccinations. But when we have never smoked and find a lump; when we lock the door, and an intruder climbs through the window; and when there is no vaccine, we remember the truth. The whole creation groans and labours with birth pangs.² The intensity and frequency of contractions are increasing.

Eating healthily is great, and locking doors is sensible, but helpful privileges can morph into an illusion of safety. Consequently, we are utterly shaken when an invisible virus reminds us that actually, safety in this world does not exist.

the object of our trust

The same David who felt his heart failing within him because of the dangerous world he lived in also knew there was one place of refuge.

'I will both lie down in peace, and sleep; For You alone, O LORD, make me dwell in safety.' Psalm 4:8

You alone, O Lord, make me dwell in safety. Not You and my burglar alarm. Not You and my airbag. Not You and the day that the vaccine is finally ready, and we can leave our homes in confidence.

no, you alone

I can't remember a day of my primary school career that didn't involve a game of Tag (or Tig). The only safety from lurking taggers was being 'on den' - be that a tree, a bench or a bin. There, you were untouchable.

Is David saying that trusting God gives us guaranteed immunity from disease, disaster and death? Is trusting Him like being on den? Of course not. Before he was crucified, Jesus told his disciples (and by extension, us), 'Here on earth you will have many trials and sorrows'. Why would he leave them on such a cheery note? As if hearing our question, Jesus says in the same verse, 'I have told you all this so that you may have peace in me'.3 We might ask how a life filled with difficulty and sadness can give peace. Don't miss his two final words. Trouble in the world. Peace in him. 'He himself is our peace.' 4 Our peace does not come from divine protection from all forms of suffering, but from trusting who our God is.

The big question COVID-19 has caused me to

ask is: 'Do I trust God?' My disturbing response was a resounding 'I'm not sure'. I always knew he was in control, but I've realised that isn't the same as trusting him. A god who is allpowerful but corrupt is not a god our hearts can rest in. Likewise, a god who is wonderfully kind but lacking authority is not a god who can be our peace. Trusting God means believing that he is both in control and thoroughly good.

God has used uncertainty to expose my suspicion of him and replace it with confidence that he is as kind as he is powerful. He is as powerful as he is kind. Hallelujah!

a process when panic strikes

Mistrust of God inevitably births panic, which in my experience is soon followed by an onslaught of worst-case scenarios parading themselves across the catwalk of the mind. It's tempting to stop these thoughts in their tracks and send them packing. Instead, here's a suggestion. When anxiety comes, allow yourself to go to your worst-case scenario. That will be different for each of us. Imagine Coronavirus has done its very worst. Are you able to say, 'It is well with my soul?' I've found it is possible, but only if I talk myself through two logical implications of God being both allpowerful and all-loving.

- My God is all-powerful and therefore [insert worst-case scenario] will only happen if he allows it to happen.
- 2. My God is all-loving and therefore if he allows [insert worst-case scenario] to happen it is for his highest glory and my highest good.

That simple two-step process has become my rescue remedy when uncertainty causes my doubting heart to panic.

Maybe, like me, this pandemic has exposed a mistrust of God of which you had been completely unaware. You were compensating in comfort, but COVID-19 has made you feel your heart is suddenly in end-stage failure. God is being gracious by bringing these things into the light and giving you a golden opportunity to renew your trust in him. Here on earth, we will have many trials and sorrows, but we can have peace because our God can be trusted.

'My flesh and my heart may fail, But God is the strength of my heart and my portion forever.' Psalm 73:26

Georgie Coster is CMF Associate Head of Nurses and Midwives and a staff nurse in an acute surgical unit

1.	Psalm 40:12	3.	John 16:33
2.	Romans 8:22	4.	Ephesians 2:14

people of the lamp

Stories of Nightingale during the Crimean War Walking among wounded soldiers on her night rounds Give us this romanticised image of 'The lady of the lamp'. And now in 2020, this, the 'Year of the Nurse', Marking her 200th anniversary I ask myself, what better image is there than this? Than of us too being people of the lamp? We might be in peacetime But we hear the pandemic's piercing war cry echoing across the world Breaking into our nation Advancing on our hospitals God, would we be carriers of your light in this darkness?

Because your everlasting light in us is like no other Light of the world, No shadows are cast in you You cut through Permeate everything Nothing can stand up against.



spotlight

Let there be light Oh God! Let there be hope. Let there be faith and love. Let there be healing and let there be an end to this virus.

And people might praise our efforts as nurses and doctors The media might applaud the sacrifices we make. But I'm reminded by you that it's not my light this nation needs The light my own strength could generate Would too quickly be snuffed out Would too quickly be burnt out. You, Lord, are my lamp¹ It's your light I carry Shine through me I pray

As the old hymn says, 'O light, all lights excelling Make my heart Thy dwelling; O Joy, all grief dispelling, To my poor heart come in'²

Bex Lawton is a paediatric nurse in Oxford

- 1. 2 Samuel 22:29
- Horatius Bonar 1808-1889, O light, all light excelling. bit.ly/2YegryE





love, peace + life

Pippa Peppiatt points us towards the source of peace in a time of crisis

t a time of crisis, we need to hear words of hope and be encouraged. There's no better place to start than God's word, and the passage I want to share is John 20: 19-22, when Jesus appears to his disciples after his resurrection:

On the evening of that first day of the week, when the disciples were together, with the doors locked for fear of the Jewish leaders, Jesus came and stood among them and said, 'Peace be with you!' After he said this, he showed them his hands and side. The disciples were overjoyed when they saw the Lord.

Again, Jesus said, 'Peace be with you! As the Father has sent me, I am sending you.' And with that, he breathed on them and said, 'Receive the Holy Spirit'.

love not fear

The disciples were hiding in a locked room for 'fear'. For them, it was fear of the Jewish leaders. Our lockdown is over a different cause, an unseen virus, but at times we feel the same fear that the disciples felt.

The Bible tells us that fear has to be treated drastically; it needs to be driven out. *How? By love, for 'perfect love drives out fear.* (1 John 4:18)

God is love.¹ And indeed it was God himself in the form of his resurrected son coming into this locked room in Jerusalem that caused the disciples' fear to go. Verse 20 tells us their fear turned to rejoicing!

As believers let's invite Jesus into every 'locked room' - whether your bedroom or study in home lockdown, or a hospital room, GP practice, or other places of work. Let's also invite Jesus into our squeezed and anxious hearts at this time. Turn our fear into prayer as we welcome the presence of God into each situation that we're in.

Jesus gave them his peace

He stood among them and said 'Peace be with you'. (John 20:19b)

Peace isn't a warm fuzzy feeling. Peace in the Bible is both harmony and a military term. For example, the peace mentioned in Philippians 4:4 is a peace to guard your heart and mind. It's like a sentry or an armed guard doing spiritual warfare on fear and anxiety.

Jesus knew the disciples needed his peace. He next shows them his wounded hands and feet- reminding them what he achieved on that cross. Death is defeated! We are restored in our relationship with Father. Harmony (or

peace) is offered us. And how much it cost Christ to achieve this peace for us!

God knows we need this peace too, just like the disciples. He knows nurses and midwives especially need his peace at this time.

As CS Lewis is alleged to have said 'Life with God is not immunity from difficulties, but peace in difficulties'

Jesus breathed on the disciples

Ironically, at this time we're almost viewing another's breath as potential death to us. The virus attacks through breathing on one another. I read in the news just today how a simple exhalation generates a small fastmoving cloud of gas that contains droplets, which can carry in the cloud over long distances.

We've almost got used to people walking around in public wearing face masks. We're desperate for more PPE in the hospitals. I heard from one of our lovely nurse members this week who works in an A & E department at a London hospital. They start the day with PPE to wear when seeing patients, but it's all run-out two-thirds of the way through the shift, leaving them exposed. You may have experienced something similar. There just aren't enough masks (or good enough masks) to help protect health workers from virus-positive patients breathing and coughing on them.

yet God wants to breathe on us God's breath is only life-giving. God's breath is healing. If you stand within two metres of God, his breath will refresh and restore you.

It's the *Ruach* breath of God that hovered over the deep in Genesis 1 and created life. In Genesis 2, God formed the man of dust from the ground and breathed into his nostrils the breath of life.

In Job 33:4 -it says 'the breath of the Almighty gives me life'. And in 2 Timothy 3:16, we read that even Scripture is breathed out by God; God's life-giving word.

Now here, in John's Gospel, Jesus breathes on the disciples to impart the Holy Spirit.

Whatever our situation, whatever our concerns, let's stop, close our eyes, take a few deep breaths, and quietly ask the Lord to breathe afresh on us. Receive his Spirit. Receive his love, his peace, and his life.

1. 1 John 4:8

a call to risk

John Greenall explores the call of Christ to take real risks in the service of his kingdom

t's the early hours of the morning, and I'm standing in a cholera camp looking at the scene around me. There are people everywhere – on beds, on benches, on the floor, even lying in wheelbarrows. Sunken eyes look up at me as I look at the line of IV drips and giving sets attached to patients, the stench of chlorine lingering in my nose. The number of people is overwhelming – there are around 700 patients in a camp with a capacity for 200.

Walking amongst them in the hastily erected tents is a team of nurses, doctors and medical students who are tending to the sick, cleaning up the vomit and diarrhoea, setting up IV drips for some and giving oral rehydration to others. One student is praying for a particularly sick elderly man. As I turn around, a 7-year-old is carried in – he looks about four, malnourished, barely breathing. A cannula is sited, and we pray he might live.

I wrote the above just over ten years ago during the cholera crisis in Zimbabwe. There were 98,585 reported cases and more than 4,000 deaths. The health service was overwhelmed. And yet in the middle of it all, something beautiful was happening. Christians were staying and caring for others in the harshest of circumstances. I found myself wondering, 'what drives people to be the hands and feet of Jesus, even though it might cost them?'

So, to our current situation with COVID-19. What might it mean for healthcare professionals in the coming days and weeks? Perhaps risking our mental and physical health; being isolated from our families; being placed in intolerable situations, and seeing people die horrible deaths. Whilst we are not called to burn out or be unwise, we may be called to risk ourselves and put others' needs before our own. My favourite parable is Matthew 13:44, where Jesus says, 'The kingdom of heaven is like treasure hidden in a field. When a man found it, he hid it again, and then in his joy went and sold all he had and bought that field.'

Imagine walking in a field and coming across a treasure that is worth far more than anything you can ever gain in this life. More than a home, a family, a good job, even the joy of helping people. And you go home, and you sell everything to buy that field. People ask you, 'What are you doing? What a foolish thing to do!' But you go away with joy because you have found something worth losing everything for.

Billy Graham knew the treasure he found, and he gave his life to it. Before he died, he said, 'Some day you will read or hear that Billy Graham is dead. Don't you believe a word of it. I shall be more alive than I am now. I will just have changed my address. I will have gone into the presence of God.'

Like many who have gone before him, he had faith in the all-providing, all-satisfying son of God, Jesus. He knew he was safe; he knew that God is on the throne and is sovereign over life and death, sickness and health. The reality is that we are safe. Whether in life or in death, we are eternally safe in him (John 10:28-30).

Every crisis brings both threat and opportunity. You can't untangle the two. Whilst threats surround us, so do opportunities for people to learn about Christian caring. Not only from Christians, perhaps but also from non-Christians who nevertheless bear the image of God and serve alongside us, perhaps not acknowledging the source of their empathy for fellow imagebearers.

So, let's be the hands and feet of Christ and show him to the world. 'Nothing makes the worth of Jesus shine more brightly than sacrificial love for other people in the name of Jesus. Laying down our lives for the good of others magnifies Jesus more than anything else'.¹

'Greater love has no one than this: to lay down one's life for one's friends.' (John 15:13)

Many great men and women have gone before us. Many of them medics and nurses. Many of the 245 million Christians who suffered high levels of persecution last year we won't have heard of. But we will meet them in heaven. Instead of asking, 'Why should I take risks for Jesus', many of them have said, 'How can I NOT risk myself for Jesus?'

Back to the cholera camp. I walked over to one of the final year medical students who had been co-opted to help and asked him why he was there. He replied, 'God is not a God who stands back and watches... Jesus is in this cholera camp, amongst the vomit and the diarrhoea, full of compassion for these people. I asked myself where Jesus would be at Christmas, and I knew he would be here, so I wanted to be here too.'

'For I am convinced that neither death nor life, neither angels nor demons, neither the present nor the future, nor any powers, neither height nor depth, nor anything else in all creation, will be able to separate us from the love of God that is in Christ Jesus our Lord' (Romans 8:38).

John Greenall is CMF's Associate CEO, and a practising paediatrician

1. Piper J. Risk Is Right: Better to Lose Your Life Than to Waste It. Wheaton: Crossway. 2013, 15

end of shift prayer

a template for spiritual self-care at the end of the working day The steadfast love of the Lord never ceases; His mercies never come to an end; they are new every morning; great is your faithfulness. (Lamentations 3:22-23)

prayer at the end of a shift, for those in healthcare, over the COVID-19 crisis. Read the words from 2 Corinthians

Praise be to the God and Father of our Lord Jesus Christ, the Father of compassion and the God of all comfort, who comforts us in all our troubles, so that we can comfort those in any trouble with the comfort we ourselves receive from God.

Become aware of God's loving presence.

Give thanks for this time to be in the presence of God who loves you.

Review the shift and notice your thoughts and feelings about it

- What has been the best thing about the shift?
- Where did you notice God's presence? give thanks
- What has been the most challenging thing

about the shift? how did God help you get through it and give thanks

- What pain are you holding from the shift?
 Lament and tell God about it with or without words let him hold you in the pain
- What is God's invitation to you now?
- Bring to God your prayer for your sleep and your needs for the day.

daily checklist

- Am I OK?
- Have I had Covid-free time?
- Have leaten?
- Have I exercised?
- Have I been still?
- Have I spoken to someone or debriefed?
- Who do I need to call or contact for my own wellbeing?
- How have I cared for myself and my own wellbeing?
- Bear in mind this is a marathon and not a sprint!

resources for the journey

- Lectio 365 24-7prayer.com/dailydevotional
- Pray as you go pray-as-you-go.org
- Look up look in look out *bit.ly/2wB8qll*

inspiration

a common endeavour

Heather Gilbert reflects on the ways in which the nation and the whole world are coming together to respond to COVID-19 iving in unprecedented times calls for unprecedented measures by us all. Whether we like it or not, we are all part of a global village fighting to put out the COVID-19 fire that is razing communities to the ground and sparking new hot spots anywhere and everywhere. There is no smoke without fire, as the saying goes. This couldn't be truer of the unrelenting crisis in which we find ourselves. Regardless of where the coronavirus began, its voracious tentacles continue to spread north, south, east and west, having no respect for gender, age, socioeconomic state, culture or faith.

The nursing response to the global pandemic of COVID-19 has been nothing short of aweinspiring. Where would we be without so many wonderfully dedicated nurses who give selflessly of themselves and their time, putting themselves, and subsequently their families, at great risk whilst doing so? Healthcare workers on the frontline are becoming exhausted, some even sleeping in hospital corridors so that they can return to work when needed. In the worst-hit areas like Italy, nurses and doctors are dying! The ultimate sacrifice. On Sunday 5th March 2020, Queen Elizabeth II made a televised speech to 'all the nations', a rare event, being only the fourth time during her reign that she has given such an unscheduled address. Her Majesty expressed her support and encouragement to all citizens of the United Kingdom, and indeed, around the world. She stated, 'This time we will join with nations across the globe in a common endeavour, using the great advances of science and our compassion to heal. We will succeed ... and that success will belong to every one of us.'

The caring and 'compassion to heal' practised by nurses around the world will undoubtedly help to move us forward, with hope for the future. We owe so much to so few.

If my people, who are called by my name, will humble themselves and pray and seek my face and turn from their wicked ways, then I will hear from heaven, and I will forgive their sin and will heal their land. Now my eyes will be open, and my ears attentive to the prayers offered in this place. (2 Chronicles 7: 14-15)

Heather Gilbert is an Australian nurse writing this blog originally for Nurses Christian Fellowship International – NCFI – at *ncfi.org/a-common-endeavour* testimony

stories from the COalface

Four nurses and a midwife share their stories of how COVID-19 has had an impact on them and their patients, and how faith in Jesus has seen them through.

the paediatric nurse on secondment

finished my first week of secondment at a different north



London hospital in the COVID 19 adult ICU. My GOSH, what a week! I'm not going to go into too much of what I've seen and dealt with because quite frankly I don't want to talk about it. Just know this is what we wear, so we can go through those doors at the back. Through those doors is a different world. Our hazmat suits literally leave you dripping wet in sweat. Our masks leave marks all over our faces. Gloves on gloves on gloves! But everything is to protect us.

As much as I hate wearing this PPE, I'm so glad it's saving my life so I can help care for my patients. All the patients coming through that door have COVID 19. A lot of them are quite young, and not all of them have an extensive medical history. All of them are VERY sick. Lots of them don't make it. The mortality is so high. Yet some do – we clapped one patient off to the ward yesterday.

Before we paediatric ITU nurses were redeployed to the adult ICU, the nurses in this unit had up to six ventilated patients each. Six! In comparison today, I had two very sick ventilated patients, and briefly, four when the other nurse went on break.

I never thought six months into being qualified that I would have volunteered to be seconded. However, I did, and I couldn't be more thankful to be able to help ease the pressure off of my adult nurse colleagues. Adult ICU nurses, you are absolute superheroes for what you have had to deal with the past weeks. Thank you for being so kind and welcoming and for having us as part of your team.

Chelsea Patten is a paediatric ITU nurse currently seconded to an adult ICU treating COVID-19 patients. This article is based on an interview she gave for the *voices from the frontline* podcast at *cmf.li/2xB5k7O*

the missionary midwife

A lthough there are only four cases of Covid so far known on our island, they are saying that we need to reduce the risk of transmission. So, we're reducing the number of antenatal checks that we are carrying out. This means that we've had to go through all our lists and prioritise who is about to give birth and getting close to term, who needs to have regular pre-natals,



and who has any other concerns that need following up. Additionally, in any contact with patients, we have to wear full PPE which isn't available. Consequently, we've been seeking out a tailor who might make up washable gowns that we can use. The girls living in the same house as me have been making up face masks for us to wear, which is not ideal. However, as the Department of Health said to me earlier, we just have to improvise and do the best we can with the available equipment.

Amongst the nurses and midwives from elsewhere working alongside me, there's been a mixture of fear and anxiety and mixed emotions. People are concerned about family and elderly relatives at home and not being near them. They are worried about how they're doing and how they're going to cope.

There's quite a big missionary community where we are, so we can come together, and we've got good support. There is also a level of fear, but definitely with a focus on God and trusting in him throughout this time.

One of the things to pray for the Philippines is that the outbreak will continue to be at lower levels. We don't know what's going to happen – it could become bigger, but they can't cope if it does. Pray that we'll continue to be vigilant and wise in the care that we provide. Pray for continued peace and trust and focus on God; that we'll be able to support each other and love each other so that there'll be less anxiety amongst people, especially those anxious about family back home.'

Beth is a missionary midwife in the Philippines

This article is based on an interview Beth did for CMF's voices from the frontline podcast mini-series. You can hear the original and subscribe to the series at cmf.li/3cVNFq/

the ITU nurse ife is not the same in ITU as of now. Mentally we are all apprehensive. It is a different thing, as you know, to assume that you



might get an infection from your patient when they are confirmed positive. Yet, you still go and care for them.

There is a dark side to PPE. When you wear a tight mask around your face, a hat, a face shield, a gown, two pairs of gloves, and something to protect your shoes, it is a totally different thing. You have, as nurses, to stay in that side room or unit for twelve and a half hours. It is really draining physically. You feel hypoxic because you can't really breathe normally – and you are

sweating inside. You can't even go to the loo because your patients are terribly sick. They are on maximum life support so you can't take your eyes off that monitor.

Pray for us, that we have strength and wisdom from above to deal with these situations because it is really challenging.

Yet, I have found help in Scripture in a few places that I would definitely love to share with my other colleagues. I was reading through Matthew 8:1-4. After Jesus preached, it was time for him to act, and he responded in a very beautiful way. When I read that he went down and touched a leper and he healed him and spoke to him a few words, that was really encouraging for me. Jesus was defying the norm, just as we are now doing, by caring for the sick, even though they are infectious. Jesus touched a leper, which was not accepted at that time. We are going in and helping the people in need who others fear to touch. That gave me a beautiful understanding of how we can show Christ through our work. Whatever we are doing as Christians in the healthcare professions, we can reflect him.

I have three night shifts back to back, so I was apprehensive, and a bit scared. But the word of God came to my mind. It's that bit where Jesus says that you shouldn't be anxious about tomorrow because tomorrow has its own worries in Matthew 6:34. What we must do is be the best that we can be today – to help the needy, help the vulnerable. People are scared and worried, and this is the right time to speak the gospel and point them to the word of God, telling them that there is real salvation there.'

Adi is an ITU nurse working in a total isolation unit for suspected Covid-19 patients

This article is based on an interview Adi did for CMF's voices from the frontline podcast mini-series. You can hear the original and subscribe to the series at cmf.li/2KZrm7e

the community nurse

he initial impact of COVID-19 hit my community nursing team when the

nursing team when the Hampshire hospitals cleared 50 per cent of their beds in preparation for the crisis. Discharge summaries were understandably rushed and often only read 'community nurses to support'. And with those words, we found ourselves standing in caring solidarity with not only the acute new hospital discharges being added daily to our list, but also with patients for whom the crisis has slow but long-reaching side-effects. The

cancer patients whose palliative chemotherapy is now cancelled; those on transplant lists who have been informed their operations are on hold; leg ulcer patients for whom vascular referrals are currently impossible; practice nurse patients too frightened to go to the surgery.

Alongside this, plans were made for an expected increase in palliative Covid patients wishing to die at home or, depending on how bad the crisis became, who may no longer have access to a hospital bed. But amongst the often anxious preparations, I have seen beauty in the communities in which I nurse. Families and neighbours offering to take on wound care and insulin injections to free up our nursing time; NHS volunteers delivering pharmacy supplies; food being dropped off outside my house and toilet paper outside my patients' homes.

My team is stretched with sickness and redeployment, but not yet stretched to capacity. Nevertheless, it still feels like the calm before the storm. And although we pray the storm won't hit with the force we once feared, whatever comes, our patients can trust the 'community nurses to support'.

Hannah Knight is a Community Nurse in Southampton

Please note that some of these stories were shared with us in early March, ahead of the peak of infections and deaths in April and subsequent changes in NHS and social care policy.

reflections & preparations

ow often have you recently thought 'it isn't

meant to be like this'? Many times recently, I've found myself thinking that. Yet recently I've also found much beauty in the way life has been. I've been confronted regularly by the changing season and marvelled at the wonder of creation; hearing the birds sing in London has to be my particular favourite. COVID-19 has also caused COVID-19 has placed many of us in situations we never thought we would be in

me to reflect on my journey so far as a nurse.

This time five years ago, I was in the middle of my elective in Bolivia, (incidentally found through CMF!). I was in a hospital with so few supplies yet with nurses who had so much knowledge and ingenuity. They strived to do the best for their patients, and their genuine care and compassion for each individual began shaping me as nothing else had done to that point in my training.

I came back with such a confidence that I could be a nurse, and such a humbling sense of gratitude for the provisions that I had in this country. Since then there have been a few times I wanted to throw it all in, not namely those first six months where I just felt that I was not a good enough nurse, that I didn't know enough to look after my patients.

But as time has gone on, I've learnt that I love what I do even in situations which I never thought I would be in, including The London Bridge terror attacks and the Grenfell Tower fire. I now find that I too can provide genuine care and compassion for the many patients I come in contact with in the Emergency Department.

COVID-19 has placed many of us in situations we never thought we would be in. I found myself part of a team of what at my hospital called 'surge nurses' to assist in ITU. I also completed the full induction training and clinical skills sessions to go and assist at the London Nightingale Hospital, which was to be the biggest ITU in the world. However, this was not to be, as thankfully the Nightingale is no longer needed; but we are prepared should it ever be needed again.

Celebrating Easter in lockdown and the season of spring has reminded me that there is hope, that there is new life. I'm also constantly reminded of the verse in Esther that says 'for such a time as this' (Esther 4:14). Wherever we are placed, it is certainly where we are meant to be for the time of COVID-19.

Simone Waitt a Staff Nurse in one of London's Emergency Departments

resources

COVID-19 resources & support from CMF

MF has been developing a range of online resources in response to the particular pressures created by the COVID-19 pandemic. Below we have listed those that may be of use to you and your church.

general resources:

- A prayer for the end of shift a downloadable prayer sheet for your notice board or fridge at *cmf.li/3d2EJQh*
- A seven-day guide to praying for Christian healthcare workers – another downloadable prayer sheet for your use and for others in your church wanting to

know how to pray for you and your colleagues at *cmf.li/3aPcSRS*

- How to care for healthcare workers in your church family – a two-page guide to practical and pastoral support for your pastor and church family to use at cmf.li/2SkFdsS
- When demand outstrips supply: A Christian view of the ethics of healthcare resource allocation during the COVID-19 pandemic – a downloadable briefing paper at cmf.li/2KIgafd

The talks and Q&A sessions from the CMF National Online Gathering How Long, Lord.



Finding hope in Christ in troubled times by Jonty Allcock and Dr Patrick Dixon on 25 April 2020 are available to download as podcasts or watch as YouTube videos – see

cmf.li/2020NOGLinks for these and other resources from the gathering.

The CMF Pastoral Care and Well-being

Programme can offer one-to-one support and are creating a range of written resources at *cmf.li/PCWP*. The Pastoral Care Team is made up of Christian nurses, midwives doctors with pastoral care training and experience, so they can balance knowledge of the stresses and pressures clinical practice with a keen understanding of pastoral and spiritual issues.

If you would like to talk to one of the Pastoral Care Team or to volunteer to help support other members, please email *wellbeing@cmf.org.uk* and ask them to phone or email you back.



And check out the **1st incision** podcast published on Friday 3 April which explains more about the vision and aims of the pastoral care and well-being ministry at *cmf.li/2KKqovO*



From March to May we ran a daily **#COVID1900Prayer** to pray on Facebook and Instagram live at 7 pm – see cmf.li/YTbCOVIDprayer for an archive of all the daily

prayer videos. You can still get the daily prayer updates via the CMF Feed on the PrayerMate app at *praynow4.org/christianmedicalfellowship*



Check out our **COVID-19 voices from the frontline** podcast series at *cmf.li/39WJGsC* – stories from Christian nurses, midwives, doctors, carers and others working at the coalface from around the world.

Our **COVID-19 blogs** give you different pastoral, practical, spiritual and ethical perspectives on the situation at *cmf.li/COVID19blogs*

And remember to follow our student nurses and midwives feed on Instagram instagram.com/cmf.student.nurses.midwives

A regularly updated list of these and all our available resources and other helpful materials from partner organisations can be found on our website at *cmf.li/covid19Res*



Voices from the frontline is a CMF podcast miniseries telling 40 stories from Christian healthcare professionals and others on the frontline of the response to the coronavirus pandemic here in the UK and in other parts of the world.

You can hear all the podcasts and subscribe to future episodes and updates for free via the CMF 1st incision podcast on your podcasting app of choice, or by visiting the podcast feed at cmf.li/39WJGsC

cmf.li/COVID19VFF

