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## Strategies to Prepare Nursing Students to Respond to Disasters

Cheryl K. Schmidt



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Historically, nurses have readily responded to people needing assistance during and after disasters. Nurses possess the skills to provide emergency care, psychological support, and leadership during a wide array of natural and manmade disasters, including fires, hurricanes, tornadoes, floods, earthquakes, pandemics, and terrorist events. Nursing students experience the same desire to respond to dis-

asters, but they do not yet have the professional license required to function without faculty or preceptor supervision. This article will discuss strategies to prepare nursing students to respond to disasters, including activities that may not require direct supervision.

### Renewed Interest in Disaster Planning

In the past, many nursing programs may have included information about "disaster nursing" in one of their courses, usually in a community health or a medical-surgical nursing course. They may have simply assigned the textbook chapter on the topic as required reading or had a brief discussion in a lecture, reserving the majority of class time for topics guaranteed to be on NCLEX.

However, since September 11, 2001, there has been a renewed interest in covering content about disaster nursing in both theory and clinical courses. Instead of merely pointing out the location of the disaster manual on clinical units during orientation, faculty and clinical staff now spend more time discussing the specific roles nursing students would play during emergencies. Health care facilities and community leaders often invite nursing students to actively participate in disaster drills, usually in the role of "victim." Content on disaster-related topics, such as triage categories, has begun to appear in NCLEX review textbooks and on standardized examinations, such as HESI and NCLEX. During recent site visits, both the American Association of Colleges of Nursing's Commission on Collegiate Nursing Education and the National League for Nursing Accreditation Corporation have begun assessing whether nursing programs are including disaster preparedness content in their curricula.

During Hurricanes Katrina and Rita in 2005, nursing students and faculty throughout the country sought opportunities to respond directly to the needs of those affected. Some nursing programs in adjacent states or in unaffected regions of the Gulf Coast states mobilized teams of faculty and students to travel to affected communities or shelters, where they were able to provide care to families. For example, in Arkansas, over 70,000 evacuees were housed in American Red Cross shelters and church camps throughout the state. Some nursing faculty and students volunteered to assist with health assessments, collecting and distributing donations, and providing psychological support (that included hugs!) to people who had lost everything but their lives. Other nursing programs held fundraisers or collected donations to send to the Gulf Coast region. In some circumstances, nursing students were unable to participate in relief efforts because of lack of training or specified roles for unlicensed nursing students. Others expressed frustration over their inability to deliver supplies they had collected, such as nursing uniforms and stethoscopes, because of the lack of appropriate transportation.

### Federal Funding Requirements for Disaster Preparedness

A recent development is the requirement that any agency applying for federal disaster preparedness funding verify that its employees are certified in selected courses describing the National Incident Management System (NIMS). Various levels of training are required depending upon the role that the employees will play during disasters. For example, IS-700 – Introduction to the National Incident Management System and IS-00 – Incident Command System are the two lowest level courses that are suggested for first responders in community settings and first receivers in health care settings. More advanced courses are required for those filling supervisory roles. This "NIMS-compliance" will be required for community agencies to receive future disaster preparedness funding. If nursing students become NIMS-certified before graduation, health care facilities would not need to add this training to their new graduate orientation program. NIMS training is available online at no cost through [www.fema.gov](http://www.fema.gov). It can be easily added to a nursing program by counting it as part of clinical hours even if no separate disaster course is offered in the curriculum. Other training that can be provided as part of the nursing curriculum or as a project of the local Student Nurses Association chapter is American Red Cross (ARC) Disaster Training. Certified faculty can be invited to provide the classes, or faculty can become ARC volunteers and certified instructors and provide the training at their convenience.

The goal is to avoid the large numbers of Spontaneous Unaffiliated Volunteers (SUVs) who have emerged during pre-

vious disasters. These SUVs, eager though they may be, actually hinder relief efforts because agencies need to conduct background checks and provide rapid, modified training at the height of the disaster. The ideal would be for the ARC and other response agencies to maintain a roster of certified volunteers available prior to a disaster. The numbers and types of volunteers could be matched to appropriate disaster response agencies in each community. For instance, a nursing program could prepare its nursing students and faculty to volunteer in a shelter in the local community. When a disaster occurs, the American Red Cross, Salvation Army, or other agency sponsoring the shelter would have a readily available supply of volunteers who already know their system. In some instances, nursing programs may be able to certify nurses who work in such shelters as adjunct or volunteer clinical faculty, allowing them to supervise nursing students in the absence of regular faculty members.

### NSNA Resolutions

As early as 2003, the National Student Nurses' Association (NSNA) House of Delegates adopted a resolution suggesting that ARC training be included in nursing curricula and followed up on that commitment by offering ARC disaster training during the 2004 convention. **[Author's question to Judy: I think it was offered more than one year, or perhaps at convention and Midyear in the same year. Would Diane remember?]** In 2003, the House of Delegates also adopted a resolution supporting the development and implementation of educational programs to inform nursing students and nurses about the smallpox virus and the potential complications of the smallpox vaccine. In 2004, the House of Delegates supported a resolution to raise awareness of Post-Traumatic Stress Disorder (PTSD) in the aftermath of a crisis, expanding upon its 2000 resolution to increase community awareness about PTSD in military veterans. Finally, in 2006, the House of Delegates passed a resolution directing the Board of Directors to develop protocols to prepare nursing students to respond to disasters and coordinate donation efforts among nursing programs throughout the country.

In August 2006, several members of the NSNA Board of Directors traveled to Louisiana and Mississippi to talk with nursing students and faculty about how they were affected by the hurricanes. I presented a workshop at Charity-Delgado School of Nursing in New Orleans about strategies to prepare nursing students for disasters, and the attendees completed the draft of a survey that will be posted by NSNA to gather data from nursing students throughout the country. The responses will be used to develop a guidebook describing how nursing students can prepare themselves and their families for disasters. It will also describe methods that nursing programs can use to prepare their programs and their nursing students for future disasters.

### Training and Education of Nursing Students

Preparing nursing students to respond to disasters can range from simply encouraging them to attend disaster training offered in the community all the way to offering a required course on disaster preparedness in the curriculum. Faculty and administrators in each nursing program must decide what is feasible for their program. Since the Spring Semester of 2002, I have taught a lecture on "Biological, Chemical, and Nuclear Terrorism: Recognition and Response" in my Community Health Nursing course, and added "Preparing Yourself and Your Family for Disasters" the following year. In

2007, I will double the lecture content on disaster preparedness from three to six hours, and add "Pandemic Influenza: Are We Ready?" In the clinical component of the course, I have been certifying my senior nursing students in the ARC Introduction to Disasters and Community First Aid courses since 2004. Because our students must maintain CPR and AED certification throughout the program, I can delete those sections of the First Aid course, allowing me to fit both courses into one clinical day. In the Spring Semester 2007, I will be teaching ARC Shelter Operations and Disaster Health Services during a second clinical day in the Community Health Nursing course. These four courses will prepare our students to volunteer in ARC shelters and service centers after graduation. As an added bonus, any nursing student who volunteers for 10 or more hours for the ARC while still in school may earn the prestigious Student Nurse pin developed by the ARC in collaboration with the NSNA. Since the 2005 hurricane season, the ARC has begun requiring background checks for volunteers. As an excellent example of collaboration, the **[Author's question to Judy: Please provide the name of Tod Uhlman's school-cannot recall the name]** has negotiated with their local ARC chapter to accept the background checks required by the Florida Board of Nursing instead of requiring duplicate checks for their students who become certified in ARC disaster training. I will discuss this same arrangement with our ARC chapter in Arkansas for any students who wish to register as official ARC volunteers after taking the disaster courses.

In Arkansas, the Division of Health has practiced its mass vaccination clinic and dispensing protocols for the past few years by administering thousands of influenza vaccinations in several counties simultaneously. They follow the same protocols that would be used for the distribution of antibiotics after an anthrax attack or administration of the smallpox vaccine after an outbreak. Our students and faculty routinely volunteer for these events, which involve them in a vital community service while they are learning and practicing the emergency preparedness protocols. Nursing programs in other states can collaborate with community agencies to participate in similar disaster preparedness exercises. A network of community organizations, called Volunteer Organizations Active in Disasters (VOAD), operates in most states and can be contacted to find out which organizations would like participation by nursing students and faculty during disasters. VOAD could also acquaint nursing students with organizations when they are conducting a community assessment during their community health nursing course.

### Conclusion

Preparing our students to respond appropriately to disasters is no longer optional. The decisions now must revolve around the best methods to provide that education in each of our programs. Publishers are beginning to provide textbooks in this area (Langan & James, 2005; Veenema, 2003), but most of the information is already available at no additional cost through excellent Web sites (such as [www.cdc.gov](http://www.cdc.gov) and [www.fema.gov](http://www.fema.gov)). The American Nurses Association will be hosting a national conference in June 2007 to bring nursing experts to the table to discuss disaster preparedness. Watch the NSNA Web site ([www.nsna.org](http://www.nsna.org)) for the survey that will gather data about disaster preparedness from nursing students throughout the United States, and encourage your students to respond. NSNA will notify Deans and Directors regarding the availability of the promised guidelines about pro-

tools for involving nursing students in disasters and helping them collect and distribute donations.

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#### References

- Langan, J.C. (2005). *Preparing nurses for disaster management*. Upper Saddle River, NJ: Pearson/Prentice Hall.
- Veenema, T.G. (2003). *Disaster nursing and emergency preparedness for chemical, biological, and radiological terrorism and other hazards*. New York: Springer Publishing Company.

## Convention Update

**Faculty Pre-Convention Workshop  
Innovative Strategies to Evaluate Learning Outcomes  
Wednesday, April 11 • 9:00 a.m. – 4:00 p.m.  
Sponsored by NSNA  
and the National League for Nursing**

As learning environments and teaching methods evolve, nurse educators must reconsider how to effectively evaluate the achievement of learning outcomes. Think beyond multiple-choice examinations. Join us in exploring other approaches, such as journaling, critiquing, portfolios, concept mapping, simulations, and video and audio taping to help assess various learning domains and critical thinking. Six continuing nursing education hours will be awarded for this program by the National League for Nursing, an approved provider through the International Association of Continuing Education and Training (IACET).

Continental breakfast, breaks, and lunch are provided with the separate registration for this Pre-Convention faculty development workshop.

#### Workshop Objectives

- Discuss uses, advantages, disadvantages, and issues related to innovative evaluation strategies.
- Match evaluation strategies to the appropriate learning domains.
- Differentiate between formative and summative evaluation techniques.
- Appreciate that a multiplicity of evaluation strategies can provide a complete picture of learners' abilities.
- Determine how to utilize multiple evaluation strategies and still ensure NCLEX® success.

#### Speakers

*Patricia Mahoney, MSN, RN, CNE*

Ms. Mahoney has been a nurse educator for over 30 years, has presented national workshops on test development, curriculum design, program evaluation and teaching strategies, and participated in the development of the practice

analysis and the test blueprint for the NLN Nurse Educator Certification Exam.

*Tracy Ortelli, MS, RN*

Ms. Ortelli currently serves as coordinator for the National League for Nursing's Academic Nurse Educator Certification Program. Prior to this, she worked in the development of computer adaptive test items for a major testing service organization for the NCLEX® RN and NCLEX® PN examinations. Ms. Ortelli has 15 years experience in clinical nursing practice and several years experience as a nurse educator.

#### Faculty Lounge and Cyber Cafe

The Florida Hospital invites faculty to relax in the Faculty Lounge, a quiet spot to network and enjoy refreshments and conversation with colleagues. The Faculty Lounge and Cyber Café is open Thursday, April 12, from 8:30 a.m. – 3:00 p.m.; Friday, April 13, from 10:00 a.m. – 3:00 p.m.; and Saturday 10:00 a.m. – 1:00 p.m. *Sponsor: Florida Hospital*

#### Convention Registration Deadlines

Mail and FAX: March 19, 2007

Online: March 26, 2007

#### Housing Deadline

March 12, 2007

#### Hotels

Marriott Anaheim (Headquarters Hotel) – Rooms start at \$99.00 per night plus tax and city fees  
<http://marriott.com/property/propertytype/LAXAH?groupCode=nsnnsnb&app=resvlink>

Hilton Anaheim – rooms start at \$103 per night plus tax and city fees  
[http://www.hilton.com/en/hi/groups/personalized/snaahhh\\_ns/index.jhtml](http://www.hilton.com/en/hi/groups/personalized/snaahhh_ns/index.jhtml)

#### Member Registration Fees (advance registration)

Visit <https://nsnamembership.org/>

Convention – \$85

NCLEX – \$60

Convention and NCLEX – \$105

**For more information,  
visit the NSNA Web site ([www.nсна.org](http://www.nсна.org)).**

- Budgeting Information
- General Convention Information
- Program Details
- Tentative Schedule
- Convention Alert: Everything You Need to Know to Prepare for Convention

Need convention brochures? Send an email to [nsna@nsna.org](mailto:nsna@nsna.org) with the number of brochures you need, your name, complete mailing address and the school you attend. Brochures will be sent out starting mid-January.

*Once you have finished with this newsletter,  
please pass it along to share with a colleague or friend.*

# DEAN'S Notes™

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## Call for Posters • March 1-2, 2007

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*Nursing Economic\$*, The Journal for Health Care Leaders, is accepting Poster Presentations for its DC Summit, March 1-2, 2007. Join your nursing colleagues from around the country at this high-energy, interactive leadership summit. Located in Crystal City, VA, just minutes from our nation's capitol, the Nursing Economic\$ DC Summit will bring together influential nurse decision-makers from hospitals and schools of nursing, as well as community-based agencies.

Posters should reflect the objectives of the Summit and describe experiences in:

- Executive and nurse faculty partnerships;
- Best practices in financing, goals, relationships, and skill sets; or
- Skills to partner and establish relationships in a competitive marketplace for individuals and institutions.

Share your insights with your colleagues, and develop new strategies for your institution. Email your poster abstract to *Nursing Economic\$* Education Director Sally Russell, MSN, RN, MSNCB, today at russells@ajj.com

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