



The Role of Nursing During Public Health Emergencies & Opportunities for the Future

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Nursing is a key profession for disaster preparedness, response and recovery

- Nurses are ideal to serve in a wide variety of roles across the disaster cycle (preparedness, response, recovery). Nursing...
 - Represents the largest segment of the healthcare workforce in the US, and most other countries [1]
 - Is the most trusted profession in the US [2]
 - Comes with a basic skill set that supports rapid engagement in emergency response functional roles as needed
 - Is strongly connected to their communities (58% work in hospitals, 42% community based entities [3])

Emergency vs. disaster

- Emergency: lower magnitude event/disruption that requires immediate response and resources are available to respond
- Disaster: larger magnitude event/ disruption that requires response and available resources do not match what is required to respond
- COVID-19 is a public health disaster



Public health emergencies

- NDMS defines a public health emergency as: "*a) a disease or disorder [that] presents a public health emergency (PHE); or b) a public health emergency, including significant outbreaks of infectious disease or bioterrorist attacks*" [4]
- COVID-19 pandemic has resulted in widespread illness, as well as social and economic disruption across the US and the world
- Historically, disadvantaged communities are at greater risk in pandemics, and this is also true today [5]

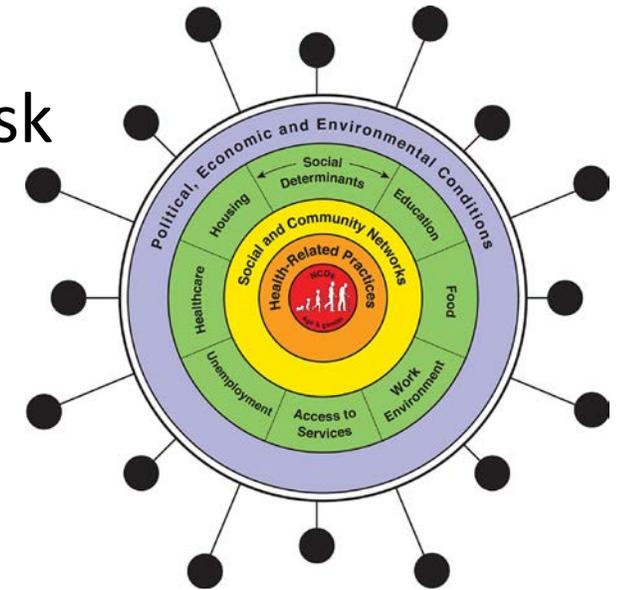


Fig 1. The syndemic of COVID-19. Bambra C, Riordan R, Ford J, *et al.* The COVID-19 pandemic and health inequalities. *J Epidemiol Community Health* Published Online First: 13 June 2020. doi: 10.1136/jech-2020-214401

Specific Nursing Roles in Pandemics: Prevention & Response [6]

Public/ Community Health Nurses

- Contact tracing
- Case investigation
- Community assessments
- Community education
- Screening
- Telephone hot line services / telehealth
- POD: Mass vaccination / mass testing
- Home care (direct care, or supervise)
- Mass care center duties
- Community based infection control
- ICS: Many emergency response functional roles

Acute Care Nurses

- Triage
- Direct patient care (usual or crossover assignments in hospital, alternate or mass care sites)
- Patient/ family education
- Case reporting / syndromic surveillance
- Hospital based infection control

APRNs

- Diagnose and treat in different settings
- Telehealth
- Surveillance and case reporting
- Develop treatment protocols
- Health education and counseling

Volunteer organizations

- American Red Cross
- Medical Reserve Corps
- DMAT /teams

Policy

Strategic Planning

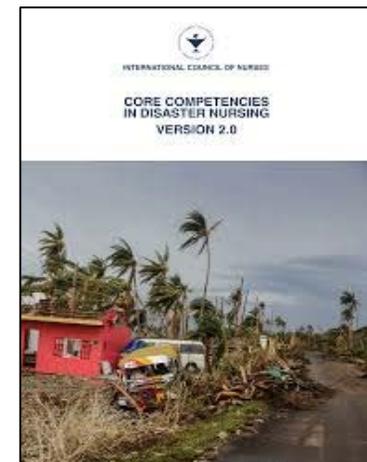
Emergency Management



- Overall, professional nurses *come to the table with basic skills that support rapid adaptation* to a wide variety of emergency response functional roles
- Health system planners often omit *planning for the surge capacity staffing of nurses* (numbers and types) for acute care AND community settings
- Many of the required skills and capabilities of nurses responding during COVID-19 trace back to *basic fundamentals of nursing* (infection control, correct use of PPE, therapeutic communication, assessment, teamwork). *However, most of nursing education focuses on use of such skills in the acute care setting*
- Need to better prepare nurses to work in austere conditions, using crisis standards of care

- Surprising *gap in basic knowledge of epidemiology*--which is required for understanding pandemic prevention, detection and response
- Current *nursing education contains little critical and emergency care content*, this hinders rapid cross assignments and rapid up skilling during surge needs
- Healthcare *worker responder safety is paramount*
 - Appropriate protocols
 - Adequate types and quantities of supplies equipment
 - Appropriate training
- *Leadership and communication is essential*, especially during times of uncertainty & lack of resources; need to assure “care for the care takers”

- **Plan for an increase in the numbers and types of pandemics** (*urbanization, large social gatherings, mass transit/ travel, increased global population density will fuel such increases*)
 - **Expand undergraduate nursing curricula to include:**
 - *Content & clinical rotations through emergency, critical care and public health nursing*
 - *All hazards disaster preparedness*
 - *Basic principles of epidemiology*
 - **Review nursing program curricula in the context of the International Council of Nurses Core Disaster Nursing Competencies (v 2.0, 2019) [7]**
 - *Where there are gaps, enhance the curriculum*



- ***Continuing education for existing workforce*** (practitioners and faculty): disaster management, epidemiology, community based infection control.
 - **Develop national CED programs**, open access, free of charge .. Completion of series can earn a certificate?
- ***Convene a national task force to address*** development of a model for surge capacity for disaster nursing workforce for all disasters
 - Can be used to guide States
- Advocate for federal funding to support ***a disaster nursing network*** across the US (and Affiliated Territories) to seed and develop the field, and implement a plan to assure responder [8,9]
- Use lessons learned from COVID-19 about nursing preparedness to ***galvanize national level action*** [10]

Conclusion

- The World Health Organization has declared 2020 to be the Year of Nursing and Midwifery
- The roots of modern day nursing are in disaster nursing and community health for the underserved
 - Florence Nightingale was a disaster nurse, with multiple emergency response functional roles: care provider, trainer, manager, statistician, consultant
 - Lilian Wald founded the Henry Street Settlement and was a pioneer in community health nursing and today what we call population health
- Across the globe *nurses have been an essential component* of COVID-19 pandemic response
- ***We must remember our roots, and continue to cultivate nursing capacity for pandemic prevention, preparedness, response, and recovery!***



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