

## Call for Disaster Preparedness Specialty Loudens After Orlando Attack



Sue Anne Bell, PhD, RN, FNP-BC

The June mass shooting at a nightclub in Orlando, Florida, highlighted the potential need for a specialty in disaster preparedness in nursing.

Sue Anne Bell, PhD, RN, FNP-BC, clinical associate professor at the University of Michigan School of Nursing and a member of ENA's Emergency Management and Preparedness Committee, incorporates disaster preparedness into her curriculum.

"One big challenge in undergraduate nursing education is we tend to focus more on the individual patient rather than the community at large," Bell said. "Students also have so many requirements, and focusing on a theoretical disaster rather than a practical skill is a challenge."

Yet she insists it's also a priority to teach the next generation of nurses to prepare for any hazards, be it an active shooter, a technological disaster or a natural catastrophe.

### Training Resources

She has noticed an uptick in graduating students seeking a disaster management role in an emergency department or critical care setting.

Bell advises interested students to volunteer with their local Red Cross chapter or become involved at the hospital level on its emergency preparedness committee. Her own introduction to the emerging specialty was acceptance to a disaster medical assistance team, a federal entity composed of medical personnel and designed to be a rapid response element until federal or contract resources are mobilized.

"A strong point I always make to new grads and nursing students is to complete the National Disaster Life Support certification

courses and get involved in DMAT," Bell said. "DMAT's application standards are rigorous. It's a federal appointment requiring a security clearance, and you're regarded as federal employees upon deployment."

### Adopting a Boy Scout's Mentality

Regardless of certification, the need for mass casualty preparation is a reality for any nurse.

"In Orlando, one of our greatest assets goes back to why we went into nursing – bringing care and compassion to the city and individuals," Bell said. "After that, nurses can bring preparedness at the institutional level through drills, mock disasters, simulations and certifications."

The tenets of disaster nursing are mitigation, preparedness, recovery and response. Mitigation and preparedness ideally should be a daily part of patient encounters, Bell said, whether that's familiarizing patients with [www.ready.gov](http://www.ready.gov) or inquiring about their family communication plans and readiness kits. She said an excellent read is *Five Days at Memorial: Life and Death in a Storm-Ravaged Hospital*, which describes nurses' preparedness activities, including nurses who organized their own families' safety in advance so they could care for victims of Hurricane Katrina.

As speculation increases about the possibility of an attack targeting hospitals, Bell urged nurses to familiarize themselves with ENA's workplace violence documents.

"It takes an incident to bring awareness," she said. "Typically, we focus on preparation, and there's a quiet period in the media. Without attention, support for implementing programs disappears. After a disaster, everyone wishes they were more prepared. If we can reach a sustainable level, that's key to success."

By Robin Hocevar

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