Preparing for the worst

Nurses on the front line

A first-person column by Linda Spencer

In everyday life, public health nurses seem almost invisible as they work in communities to promote health and prevent disease. But in times of emergency, these nurses assume leadership roles to create strategies and find resolutions to imminent challenges.

Trained as a disaster nurse, I volunteered at the Red Cross Center on Monroe Drive during Hurricane Katrina, helping process and get aid for victims of the storm. In all, approximately 120,000 people flooded Red Cross Centers in Atlanta, seeking aid. The first casualties arrived by plane from New Orleans hospitals, some with no diagnosis, no treatment plan, and no medicine. Some of the patients included unaccompanied children. We found beds in local hospitals for the sick and set up shelters for those who were mobile and homeless.

Normal Red Cross policies stop short of providing medical care. However, many of the people in the shelters had health problems that needed attention, so the Red Cross allowed us to bring in Emory physicians to treat hypertension, diabetes, and all manner of chronic problems. Emory nursing faculty and students also provided 24/7 support for the Salvation Army shelter on North Druid Hills Road and in Emory’s own hospitals.
to handle the influx of evacuees.

Responding to emergency situations such as Katrina has long fallen in the disaster nurse’s portfolio, but in recent years, with threats of bioterrorism, impending pandemic flu, and the recurrence of Category 5 hurricanes, the need for nurses trained in emergency response has escalated. Recognizing this need, the U.S. Department of Health and Human Services provided a grant to the Nell Hodgson Woodruff School of Nursing to design a program to train nurses to handle a wide scope of emergencies. The resulting master’s program in Public Health Nursing Leadership is the only one in Georgia and one of only a few in the country to offer a detailed focus on emergency preparedness.

The U.S. government has made preparation for terrorism a priority, yet until recently the health care sector was left out of these preparations. Input from health care professionals is critically important in developing plans for response to disasters and terrorism. Public health nurses in particular can contribute significantly to the design of disaster response. For example, if nurses had had proper training in disaster preparation before 9/11, they could have played a larger role in the emergency response to that national catastrophe, communicating with disaster management teams and helping with standard triage.

Leadership in tumultuous times requires creativity. And public health nurses call on creativity and training to provide care with limited resources in nontraditional settings to large numbers of patients under stress. Nurses trained in disaster preparation are essential in managing mass smallpox vaccination sites, administering medicines from the Strategic National Stockpile, or assisting with health care in the aftermath of a community contamination by a toxic substance or infectious agent.

Biologic or chemical terrorist attacks require more sophisticated response than that provided by traditional health care delivery systems. Because release of a biologic agent may fail to be identified immediately, victims may be scattered far and wide before the first symptoms appear. Public health nurses are key players to assess patients during such a crisis. However, recognizing a chemical attack and working for and in the community under such circumstances would challenge the resources of most nurses.

The Public Health Nursing Leadership Program at Emory takes on this challenge by having students complete three semesters of courses in topics such as epidemiology, environmental health, health policy, terrorism and public health preparedness, disaster nursing, and public health nursing. Students spend one class suiting up in biohazard safety suits to see what it is like to deliver CPR or give a shot under such conditions. In addition to core master’s level work in the classroom, they complete 500 clinical hours in the community with agencies such as the American Red Cross, CARE, The Carter Center, and state and local health departments.

Graduates of the program receive an MSN in Public Health Nursing Leadership and may complete 32 additional hours in the Rollins School of Public Health leading to a dual MSN/MPH degree. They go on to work in the community, such as two recent graduates who were hired straight out of school to be assistant chief public health nursing officers for Georgia.

When Katrina struck in the fall of 2005, Emory was already training nurses with an emergency preparedness focus. One of the students, assigned to disaster health services at the Red Cross, walked headlong into the middle of Katrina’s chaos and finished his clinical hours with on-the-job training in one of the worst national disasters we’ve ever experienced. Since that time, the nursing school has trained 20 students, with eight more in the pipeline, a small but growing cadre of nursing professionals trained to mitigate disasters. These public health nursing leaders will be on the front lines when the next catastrophe strikes.

Disaster nurse Linda Spencer shares her expertise with students who are training to respond to health care needs during emergencies.