Looking into the faces of Exhausted Providers and seeing the need for Community Self-Sufficiency

Despite the State of North Carolina’s early nation-wide request for Emergency Medical Assistance Compact (EMAC) nurse teams even before the Hurricane Florence even made landfall on September 14, 2018 and a speedy deployment of our nursing team from Vermont, the local public health department nurses we were assigned to relieve had been living and working in their shelter and caring for over 300 people all day every day for five days straight.

This is a story about the critical importance of community self-sufficiency during major emergencies. Public health staff must have the training and community support to set up shelters, order supplies and equipment and attend to the immediate medical needs of an ever-expanding number of shelter guests.

Outside help can take days to arrive

Med surge/mass care preparedness efforts must especially plan for the earliest part of the response period when shelters will have the fewest number of trained staff with little or no outside help and will experience the greatest number of residents with the greatest needs.

Training Health Occupations students in healthcare emergency preparedness will prepare them to be better providers

What can students participating in recovery efforts do to make themselves aware and/or better prepared?

• Health occupations students should become volunteer members of the American Red Cross (ARC) and Medical Reserve Corps (MRC) to apply academic learning and expand understanding of providing care during low resource, high need events.
• Peer-to-peer learning and mentoring opportunities should be encouraged among students who have volunteered during disasters to share lessons and experience learned during emergency response.

How can universities and relief agencies prepare students for the challenges of disaster relief?

• Nursing schools need to teach health care emergency preparedness as a core learning element.
• Health occupations curricula need to teach the concept of medical surge and its application.

Benefits and takeaways from my Hurricane Florence response experience:

• Provided an excellent review and expansion of concepts of med surge nursing, family nursing, acute care nursing, etc. in a new setting.
• Highlighted critical importance of planning for local self-sufficiency for the first 96 hours.

What can universities and colleges do to support similar efforts in the future?

• Schools and universities should provide work study funding for student participation in volunteer emergency preparedness activities such as ARC and MRC participation.
• Colleges and universities and other professional organizations conferring continuing professional education credit (i.e. CME, CNE, CEU, etc.) to professionals should develop a system to provide credit to those serving as volunteer providers during declared emergencies as a means of making disaster volunteering more attractive to working professionals.

David A. Casey, MA, RN
University at Albany, School of Public Health Master of Public Health Online - Public Health Practice, first year dacasey@ualbany.edu