

## **Curricular Threading of Disaster Nursing Education**



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#### Abstract

Nursing educators nationwide have heeded the call to action for improved inclusion of disaster nursing education in prelicensure programs. Recurrent events continue to demonstrate the unique role of the profession in disaster preparedness and response. Although regulatory bodies such as the American Association of Colleges of Nursing (AACN) and the National Council of State Boards of Nursing (NCBSN) acknowledge the need for inclusion of disaster preparedness content within prelicensure education and testing, few models exist on how this inclusion might look and how it is threaded throughout the curriculum.

#### Objectives

The purpose of this presentation is to share the results of methods used to integrate disaster nursing throughout the nursing curriculum for a Midwestern undergraduate nursing program. Specific examples of integration methods, student feedback, and lessons learned will be explored.

#### Literature Discussion





ny Curricular Threading? (Callister, L. C., Bond, A. E., Matsumura, G., & Ingum, S. (2004)

Repeated encounters (i.e. spaced content, review, and practice) support various forms and

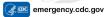
revers on earning.

A Wursing schools are challenged in the delivery of content heavy material. Threading encourages an integrated theme within a program of study and is present in every course level.



### Preparedness Month 2014





#### Methods/ Procedures

Faculty at the selected Midwestern School of Nursing were surveyed on the presentation of disaster nursing concepts within traditional nursing courses across their 3-yr nursing curriculum. Content categories were determined based on guidelines of nursing practice established by:

- International Council of Nurses (ICN)
- · Association of Community Health Educators (ACHNE)
- Centers for Disease Control and Prevention (CDC)
- · International Coalition for Mass Casualty Education (INCMCE)
- American Medical Association- National Disaster Life Support Foundation (AMA-NDLSF)
- · World Health Organization (WHO)
- · American Red Cross (ARC)

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The content categories included 49 major concepts/ items related to:

• Risk reduction, disease prevention, and health promotion

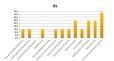
- · Policy development and planning
- · Ethical practice, legal practice, and accountability
- · Communication and information sharing
- · Care of communities
- Care of individuals and families
- · Psychological care
- · Care of vulnerable populations
- · Long-term care needs



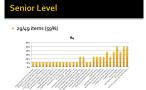
#### Results

#### Sophomore Level

- 11/49 items (22%)



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#### Significant overlap of concepts related to:

- ethical practice
- · communication

#### Assessment of families

- Implementation of care for communities
   Implementation of care for families
- · Long-term care needs- community recovery
- Reporting potential disaster/emergency cases or events to local, state, and federal public health systems
- Initiate disaster patient care and referrals
   Initiate population based disaster care and referrals Institute appropriate steps to limit spread of an agent, including
- infection control measures, decontamination techniques and use of appropriate personal protective equipment
- Describe at the pre-disaster, emergency and post-disaster phases the essential nursing care for: individuals, families, special groups (e.g. children, elderly, pregnant women, and communities).

#### Identify possible indicators of a mass exposure (i.e, clustering of individuals with the same symptoms.

- Describe general signs and symptoms of exposure to selected chemical, biological, radiological, nuclear, and explosive agents (CBRNE).
- Assess the immediate physical response of the individual, family, or community following a MCI.
- Assess the long-term physical response of the individual, family, or community following a MCI.
- Describe evaluation activities such as tabletop drills.

#### Discussion

The creation of a curricular thread demonstrates commitment to content and creates an integrated theme for undergraduate nursing students. This process is acknowledged as an effective approach for the intentional focus of selected nursing concepts (e.g. cultural diversity, evidence based practice, etc.). Unfortunately, when students only receive content in one course (or have the perception of content being connected to only one course) they may experience limited comprehension and ability for application of that specific concept.

Although required by accrediting bodies (e.g. AACN) to be included within the curriculum, the focus of disaster concepts are often limited to community health nursing courses where students may receive a disconnected view of the subject as it related to overall nursing practice. The threading of disaster nursing concepts can be similarly applied to nursing curricula as in the recent QSEN movement. Although some threads are introduced and explored at different points in the curriculum (based on level of knowledge and experience) the goal is to allow students to see the connection and bridging of concepts for improved nursing knowledge, skills, and abilities. The intentional integration of disaster nursing concepts provide a unique opportunity for the long term education of prelicensure students and promotion of community engagement for disaster preparedness and emergency response for professional nursing.

#### Acknowledgements

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