#### SCHOOL OF NURSING

#### THE UNIVERSITY OF TEXAS AT AUSTIN

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#### **COVER LETTER**

April 28, 2011

Dr. Eleanor Howell AACN Membership Committee One DuPont Circle, NW Suite 530 Washington DC 20036

Dear Dr. Howell,

I am very pleased to submit a nomination on behalf of The University of Texas at Austin School of Nursing for the Innovations in Professional Nursing Education Award 2011. The nomination of our School's innovation, "Disaster Nursing Preparedness and Response: The University of Texas at Austin Model", is within the institutional category of public school without an academic health center. I am very proud of our faculty and students who have r fostered a vibrant, exciting and inspiring disaster nursing program that has touched the lives of many and is seen as a role model for many academic nursing programs.

Please see attached the summary, description of our programmatic innovation, outcomes and evidence of our meeting award criteria.

Sincerely,

Alexa K. Stuifbergen, PhD, RN, FAAN

Dean

Laura Lee Blanton Chair in Nursing

James R. Dougherty Jr., Centennial Professor in Nursing

The University of Texas at Austin

# Project Title – Disaster Nursing Preparedness and Response: The University of Texas at Austin Model

# Summary

An innovative disaster nursing program implemented as part of our undergraduate and graduate curriculum and subsequently tested through four hurricanes has heightened disaster preparedness and response competencies among students and faculty. Our active Disaster Nursing Committee has served as the catalyst to lead faculty teams across programs and disciplines in curricular change. The Committee advances the notion that disaster preparedness knowledge and skills should be a responsibility of all nurses, as citizens and as professionals. As a result of the lessons learned in response to major U.S. hurricanes, an unprecedented Memorandum of Cooperation was forged between the City of Austin and The University of Texas at Austin which outlines the School of Nursing's integration into the mass shelter and mass immunizations plans of the community. The Memorandum reflects the trust and respect the community and University administration have for the nursing school and its disaster nursing program. Disaster/ emergency situations are incorporated in clinical case studies and mock exercises, thereby raising disaster nursing awareness at the formative levels. This model serves the nation's interest in service hours volunteered as well as the influence on over 800 students who have graduated and are now in practice. Students indicate through course program evaluations that they have learned essential disaster skills as well as leadership in practice and research. Findings have been widely disseminated in peer-reviewed publications and local, regional and national presentations.

# Description of the programmatic innovation and its outcomes

Following the events of September 11, 2001, Dean Dolores Sands encouraged faculty and students to recognize and appreciate their professional duty to be prepared for catastrophic emergencies in the community. In 2002, faculty reviewed the curriculum to identify where disaster content existed or was needed. While changes were developed, an interim disaster nursing elective course was offered to graduate and undergraduate students. The competencies published by International Nursing Coalition Mass Casualty Education (<a href="http://www.nursing.vanderbilt.edu/incmce/overview.html">http://www.nursing.vanderbilt.edu/incmce/overview.html</a>) provided the framework for teaching and research topics. Students participated in community wide mock disaster drills (trauma, smallpox immunization) as part of their course.

The heart of our programmatic innovation is the Disaster Nursing Committee. This committee includes faculty across programs (adult, psychiatric-mental health, pediatrics, maternity, public health, and systems), students across all levels from pre-nursing to graduate, and school staff. Committee members are appointed annually by the Dean to oversee the disaster nursing education, research and service within the school of nursing. The Committee is organized based on the Incident Command System (ICS) structure to demonstrate the importance of command, control and communication.

In 2006 the Committee developed a Disaster Mobilization Plan incorporating lessons learned from the Hurricane Katrina response. The plan addresses volunteer student and faculty safety and how clinical groups could be mobilized to fulfill clinical objectives while in medical needs shelters. This Plan is updated and approved annually.

### **Outcomes**

The school was mobilized for Hurricanes Katrina/Rita and Gustav/Ike to help in the sheltering over 12,000 disaster refugees from New Orleans and Galveston. Students and faculty staffed general and medical needs shelters, helped set up triage centers, conducted disease surveillance in convention centers and manned telephone triage linked to six major shelters across the city. Public health student nurses made home visits as part of the recovery efforts. During Hurricane Ike a health clinic was established within the general shelter to ease the burden on local emergency rooms. Faculty supervised advance practice nursing students who triaged over 450 people, treated non-emergent conditions and referred urgent cases. Over 800 service hours were performed saving the city and county well over \$20,000 in nurse labor cost.

Noting the evacuees' expressed discomfort and fear of being sheltered with thousands of strangers in a large convention center, students said they learned to affirm the intrinsic dignity of people who have diverse physical, psychological, spiritual and social needs and to appreciate the indispensable services nursing can bring to persons, families, groups, and the community.

#### **Award Criteria**

# Catalyst for change within the curriculum

The Committee serves as disaster nursing resource for curriculum development across all levels within the School of Nursing. Most of the principles and information necessary for the development of competence in disaster nursing are included in all basic nursing education programs (INCMCE, 2003). The following courses include disaster content and contextual case studies:

<u>Undergraduate Students</u> – Communication in Health Care; Ethics; Global Health; Adult Health Nursing, Aging, Health Assessment; Spanish for Health Care Professionals; Mental Health Nursing; Public Health Nursing; Care of Childbearing and Childrearing Families

<u>Graduate Students</u> – Advanced Health Assessment; Adult Health Clinical Nurse Specialist Acute Care and Psychiatric Mental Health NP Courses

As a catalyst for change within the curriculum, we have not only developed a service learning model implementing best practices in nursing education, but we have also trained faculty from the UT Schools of Pharmacy and Social Work so that they may engage students in disaster response activities. Additionally, we contributed to an American Nurses Association policy paper 'Adapting Standards of Care under Extreme Conditions: Guidance for Professionals During Disasters, Pandemics, and Other Extreme Emergencies', which addresses individual health professionals who find

themselves providing care during an extreme emergency under difficult circumstances and questioning whether standards of care can be realistically provided

#### Sustained achievement of desired outcomes

Since its inception in 2001, our committee's goal has been to educate and prepare students to respond in an organized and effective manner in the event of a disaster through a carefully designed system. Our system has redundancy and succession plans to ensure continued efficacy. Additionally, interest across the nation and internationally has helped us monitor and evaluate our program and its development to share information on the process and outcomes.

# Has potential for replication and dissemination

Focusing on school of nursing based response to a community disaster (versus a hospital based response), we were invited to present our model at the Schools Aligned for Emergency Responsiveness (SAFER) conference in New Orleans. Attendees included faculty from schools of nursing in Louisiana, Texas, and Mississippi and representatives from Washington DC. There have been nine publications to date (5 in peer-reviewed journals) and local, regional and national presentation. The model will be presented at the International Council of Nursing in Malta, May 2011 at the Disaster Forum. See website http://www.utexas.edu/nursing/dp.

# Involved teams of faculty across programs and disciplines

In the event of deployment following disaster, the School of Nursing will mobilize and coordinate the response of the three health professional schools (Nursing, Social Work, Pharmacy) on campus. With nursing, social work and pharmacy working together, we can provide targeted services such as nursing care, medications, and mental health services with less confusion. In addition, the Committee is diverse and represents teaching, service and research of the school by specialties.

## Consistent with AACN's mission and vision

The Disaster Nursing Program has been implemented, tested and improved to demonstrate the integration of disaster competencies into a nursing curriculum and to be recognized as an asset to the community. Our innovation has increased public interest and nursing visibility across the campus, community, region, and the nation. The disaster nursing innovation provides context to help students develop skills as critical thinkers and ethical decision makers.

# Demonstrates advancement of professional nursing education

The Committee has plans to conduct systematic study on the most critical elements for a school of nursing's response to a community disaster response, create a theoretical model, and offer it for discussion, debate and scientific inquiry. Members of the Committee have served on thesis and doctoral committees on topics involving nursing's important roles in disaster preparedness and response.