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State School Nurse Consultants

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By Sylvia Byrd, RN, MPH, NCSN, Director School Health Services Program, Florida Department of Health

Q: What is the role of the school nurse in disaster-preparedness and emergency planning? How can I gain the knowledge and skills I need to feel competent?

A. Although schools in the United States have not been the target of terrorists, they have been the sites of some of the most sensational behavior-related disasters. Even post-mortems conducted by the press almost always find missed opportunities for prevention or for initiation of a coordinated response by officials, uncovering areas where attention to clues, threats, and unusual behaviors as well as good disaster preparedness plans could have made a tremendous difference in morbidity and mortality. Prompted by these sensational episodes of negative coverage, widespread horror, sorrow and anger, and genuine concern for the safety of students, U.S. schools have taken on the challenge of making schools safer. Efforts to prevent these disasters include staff training, crisis management plans, providing mental health counseling and referrals when indicated, safer building designs, decreasing the size of schools, implementing programs to prevent bullying, and treating all threats seriously until proven otherwise.

Discussions with school health nurses and school officials indicate that in many instances, the planning for disaster preparedness did not include school nursing participation, even though they are often written into plans as a health resource at the time of an event. Even when the nurse role is considered, there is often failure to consider the ramifications of disasters that may require quarantine or evacuation for extended periods. Provisions for food (especially for students with diabetes), water, and routine

and emergency medical supplies may be necessary. Each state has its own set of risks for disaster depending on its climate, location, industry, and so forth. Florida's geography, with its extensive coastline, temperate to tropical weather, international airports, and high migration increase the risk of both natural and manmade disasters.

Why is it important for the unique contribution of the nurse to be recognized and utilized in disaster preparedness planning? School health personnel in all states report an increased number of students with special health needs. Of the 2.5 million students in Florida's public schools, nearly 300,000 have a chronic condition that may require daily medication or treatment or that may be exacerbated by environmental disturbances or by anxiety related to disastrous events. In a disaster, these children may need medications, treatments, or readiness to respond to injuries. Department of Education data indicate that approximately 400,000 students have special education or health needs. Many of these students require assisted mobility, facilitated breathing and communication, or frequent treatments such as suctioning for airway maintenance. Nursing contribution to planning and preparedness is critical to ensure support for injured, ill, and emotionally upset students and faculty.

How One State Tackled the Issue

In 2003, taking advantage of a small window of opportunity to access funding to provide school nurse training and to increase nursing visibility and involvement in disaster preparedness, the Florida School Health Program Office submitted a proposal to the Department of Health, Office of

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Disaster Preparedness (ODP), for statewide training for school nurses. The initial proposal was overly ambitious from an economic standpoint. After several attempts to make it fit the available funding, the ODP decided to fund

in the Northwest Florida Panhandle. In addition, a 1-day media event was provided at NSEU to kick off the initiative. The workshops were open to 100 participants in each region. In each, the attendance was filled to capacity with waiting lists and good representation from the target

the proposal in the 2003–2004 funding cycle. In the meantime, convinced that this was an idea whose time had come, the School Health Program also collaborated with the Florida Association of School Nurses (FASN) to bring the training to more than 160 school nurses at the annual education conference in January.

The goals of the proposal were to (a) increase the awareness of the potential for school site disasters of natural and manmade origins; (b) encourage dialogue between nurses, schools, and community planners; and (c) give nurses the tools to become a part of the planning process for prevention and response. To address these goals, the proposal provided for four to six 2-day regional trainings for school nurses using the National Association of School Nurses (NASN) *Disaster Preparedness Curriculum for School Nurses*. On Day 1, nurses would receive the school nurse-specific training. Day 2 would consist of a facilitated forum with speakers, panel discussions, and small group

audience. School nurses were the largest single group in attendance. Facilitated discussion groups were given a disaster scenario to develop a response or a plan.

The School Health Program and ODP charged the nurses with becoming a part of school safety teams and participating in school and community planning. School and community planning teams were encouraged to invite and involve school nurses. As a result of these interdisciplinary, interagency workshops, 60% of the nurses who responded to a mini-survey indicated that they have been invited to participate in planning activities. Another 20% indicated intentions to be proactive in getting involved in local planning.

Lessons Learned

Even though the initial plan was to include only school nurses on the first day of the training, the inclusion of non-nurses promoted awareness of the need for health services support in maintaining health, treating ill and injured facul-