

DISASTER AND EMERGENCY PREPAREDNESS FOR ALL HAZARDS

Description

The United States Department of Homeland Security's *National Response Framework* describes a disaster as “any natural or manmade incident, including terrorism, which results in extraordinary levels of mass casualties, damage, or disruption severely affecting the population, infrastructure, environment, economy, national morale, or government functions.”¹ Optimal care for disaster patients is best achieved using a systematic, standardized approach.^{2,3} The best method for preparing to manage all types of disaster events is an all-hazards, capability-based approach to preparedness.¹

Hospitals are an essential link in the community response system for emergency preparedness planning. The emergency department is a primary entry point into the hospital system, which is frequently the initial facility-based patient-care area for victims of disasters.³ As a result; emergency nurses may routinely encounter patients exposed to hazardous materials. These patients may present announced via the emergency medical system or as the result of a single event unrelated to a disaster and be unannounced, arriving via private vehicle. As a routine precaution, emergency nurses' awareness to and screening for the potential of hazardous exposure can assist in mitigating the extent of damage, injury, and/or patient complications.⁴

ENA Position

The position of the Emergency Nurses Association is that:

1. Emergency nurses play a pivotal role in the disaster preparedness process.
2. Emergency nurses collaborate with their community response partners to develop, implement, and evaluate disaster preparedness strategies.
3. Emergency nurses develop a personal and family preparedness plan.⁵
4. Emergency nurses actively participate in ongoing emergency preparedness education and training to include the all-hazards approach.
5. The development of emergency preparedness guidelines, policies, and procedures is based on evidence-based practice.⁶

Background

In 2013, the Pandemic and All Hazards Preparedness Reauthorization Act was signed into law in an effort to prepare the United States for public health emergencies and disasters.⁷ Disaster

preparedness planning requires involvement at all levels: personal, facility, local, state, regional and national. Vital elements of that planning include prevention, protection, response, recovery and mitigation.^{1,2,8} Basic to that planning is the completion and systematic review of a hospital and community hazard vulnerability analysis (HVA).⁹ The HVA assists in identifying and preparing for certain hazards that may be a risk to a particular hospital or community, such as floods, hurricanes, fires, and hazardous materials exposures.⁹ Considerations include personnel safety, incident command structure, disaster triage, syndrome surveillance, hazardous materials awareness and response, use of personal protective equipment, self-sustaining ability, and other relevant topics.^{1,10,11} All-hazards planning also includes the needs of vulnerable populations, including communication, transportation, evacuation, shelter, supplies, mental health, chronic disease, and consideration of populations with animals.^{12,13}

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This Position Statement combines and replaces All Hazards (2/2012) and Hazardous Material Exposure (10/2009) Position Statements.

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Position Statement

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