

## Proper Planning and Networking are Key in Preparing for Disasters

**N**o individual is immune from natural or man-made disasters that occur with brutal swiftness. In a matter of minutes or hours we find ourselves moving from Maslow's Hierarchy of Self-Actualization to fulfilling basic needs of food, shelter, and water. A long-awaited concert is canceled abruptly for evacuation from your home. In times of disaster, nurses are expected to work on the front lines working countless hours in a row to ensure health care continues for those in need. Essential to delivery of care in a disaster is planning.

Planning is integral to nursing care being nested within the nursing process. Disaster planning seeks to anticipate emergencies that occur both with and without warning. Regardless of the cause, a disaster disrupts the lives of patients, families, communities, and nations.

### ANNA's Role in Planning Process

The American Nephrology Nurses' Association (ANNA) plays a key role in the planning process by positioning members to be prepared to respond to disasters when and where they occur. This happens through achievement of our goals of advocacy, recruitment and retention, membership, strategic alliances, scholarship, and leadership. In a disaster what should you expect from your Association?

**Advocacy.** As advocates we prepare our members as experts in nephrology nursing. As experts we must be ready to respond in an emergency in key areas to advocate for patient safety and well being. Rapid response is the expectation today. We continually strive to increase the effectiveness and efficiencies of communication. Our Association must actively support positioning members to advocate on the local, regional, national, and international arenas before, during and after a disaster to bring about the best outcomes.

An individual nurse's action while responding to an emergency may be the defining moment that an individual links with the health care system and decides "I want to be a nurse." The response of nephrology nurses to acute calls for help may be the defining moment in a nurse deciding to become a nephrology nurse or remaining a member of the Association. An example of the richness of our membership network is forever etched in my mind:

*A member, confronted with a performing continuous renal replacement therapy on children experiencing hemolytic-uremic syndrome (HUS) during an outbreak from Escherichia coli contamination, called several Association members. One member, receiving the call, responded with written procedures and verbal coaching. Another member identified that an unrelated patient was being transferred from the medical center dealing with the disaster to her hospital several states away. Through active coor-*



*dination, the responding member sent needed equipment back to the member requesting help in the returning ambulance the same day.*

**Recruitment and retention.** Individuals help us to recruit and retain members. ANNA provides the network to identify and mobilize resources to manage patients during a disaster. In a disaster, members connect with individuals who have expertise in one of nephrology nursing's clinical or functional areas. Members can also prepare for disasters through contacts with our Special Interest Group members available through our National Office in Pitman, NJ, or through the ANNAlink website.

**Value of membership.** The value of membership in identifying and mobilizing resources in acute circumstances is continuously shared by our members. Our organizational infrastructure supports both group and individual activities related to disaster management. Caroline Counts, the guest editor for this Disaster Management monograph, also represented ANNA on the Renal Research Institute, presenting on disaster management. Last year, your ANNA Board of Directors voted to endorse the "Disaster Preparedness for Dialysis Facilities" prepared by the Transpacific Network. The Board's decision was based on the work of the Professional Practice Committee in conjunction with the Disaster Management Ad Hoc Committee.

**Formation of strategic alliances.** It is essential for nephrology nurses to establish a presence in the community before a disaster occurs. ANNA members advocate for nephrology patients within Emergency Medical Systems (EMS), Network Workgroups and Healthcare Disaster Management Teams. Through formation of strategic alliances with other nephrology-related organizations, community groups and legislators, nephrology nurses prepare for disasters that we all hope will never occur.

**Scholarship and leadership.** Our focus on scholarship bring evidence-based practice to patients in a disaster. Recommendations for nutritional, medication, treatment, and transportation are drawn from research and practice experience. We continue to explore how we can strengthen information technology capabilities for knowledge management.

Nephrology nurses must be prepared and supported in disaster management efforts. We must continue to

### ANNA's Mission

ANNA will advance nephrology nursing practice and positively influence outcomes for patients with kidney or other disease processes requiring replacement therapies through advocacy, scholarship, and excellence.

expand our pool of volunteer leaders and strengthen our relationships with other health care providers in order to participate fully in leading disaster management efforts.

### **Conclusion**

Prioritizing and reprioritizing our activities is an everyday occurrence. When a disaster strikes, priorities shift dramatically to respond to the immediate, basic physiologic needs of our patients. ANNA must continue to seek every opportunity to prepare for and respond to acute crises. This monograph is one strategy to accomplish this goal!

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### **Reference**

American Nephrology Nurses' Association (ANNA). (2001). *ANNA Strategic Plan*. Pitman, NJ: Author.