

Abstract

Emergency Nursing's Perception of Disaster Preparedness

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Background/Significance: Disaster preparedness training is variable across the nation and the perceptions of each emergency nurse's level of preparation may be dependent on many different factors.

Purpose: A prospective survey study was completed with the intent to determine nursing's perception of disaster preparedness and to determine which, if any, factors that may influence that perception.

Methods: A descriptive quantitative survey using demographic variables as well as Likert-scaled questions measuring the comfort level of the nurse's preparation for a disaster was sent to all emergency nurses working for the Oregon Providence Health System.

Results: Sample size of 103 (86% female) participated in the study. Serial regression analysis revealed comfort for those nurses who had previously been in a disaster would be able implement disaster protocols in the ED as well as in triage ($p=0.003$ and $p=0.02$, respectively). Comfort in setting up disaster equipment was related to taking disaster coursework and serving on a disaster committee ($p=0.03$ and $p=0.01$, respectively). Disagreement in feeling comfortable in teaching colleagues about disaster preparedness was related to taking disaster preparedness coursework ($p=0.02$) and serving on a disaster preparedness committee ($p=3.6 \times 10^{-6}$). Disagreement in comfort level in answering any questions about disaster preparedness was related to taking disaster preparedness coursework ($p=0.03$) and being a member of a disaster preparedness committee ($p=0.008$). Composite analysis revealed significant effects of nurses' perception of disaster preparedness was by taking disaster preparedness coursework ($p=0.01$), serving on a disaster preparedness committee ($p=0.006$) and having experience in a disaster ($p=0.04$).

Conclusions: The strongest factor in nurse's perceptions of comfort related to disaster preparedness was the membership of a disaster preparedness committee ($p=0.006$) with the highest coefficient level of 0.27. A broader examination of this would include a wider geographical area as well as an expanse of various health systems.