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Notes

Nursing Management

Maintaining Management During Disaster: The COVID-19 Edition

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1. *Mitigation* entails initiating measures to eliminate or reduce the dangers of a disaster before it occurs. This requires extensive analysis of risks and vulnerabilities in a community, whether it be a city or a health-care institution.

2. *Preparedness* is taking actions to prepare for effects of a disaster. Stocking up on food and supplies and practicing disaster plans are part of this stage.

3. *Response* occurs during the actual disaster and includes rescue and care for survivors. Emphasis is placed on not only saving lives, but also preventing further damage.

4. *Recovery* (the stage we all look forward to) includes actions to return to a normal state. This involves cleaning up, securing financial assistance, and planning to protect the organization from any further effects of the disaster. (p. 21)

In February, the Centers for Disease Control and Prevention (2020) announced all U.S. hospitals should be prepared for possible arrival of patients with COVID-19 by ensuring staff are trained, equipped, and capable of practices needed to:

- Prevent spread of respiratory diseases, including COVID-19 within the facility.
- Promptly identify and isolate patients with possible COVID-19 and inform correct facility staff and public health authorities.
- Care for a limited number of patients with confirmed or suspected COVID-19 as part of routine operations. Potentially care for a larger number of patients in the context of an escalating outbreak.
- Monitor and manage any healthcare personnel who might be exposed to COVID-19.
- Communicate effectively within the facility and plan for appropriate external communication related to COVID-19. (p. 1)

Management Functions

The rapid spread of COVID-19 did not provide U.S. healthcare institutions much time to institute these practices. Instead, nurse managers now must focus on hour-by-hour functioning to maintain safety for all. The key to efficiency and productivity is management, which is never truer than during a crisis. Too often, the foundational functions of management are forgotten during a crisis and our systems may produce more chaos than was already present. The functions of management

Disasters and crises are extremely stressful and push healthcare professionals to their limits. Too often, foundational functions of management are forgotten during a crisis but should be reviewed and applied before and during a disaster.

I have had the honor of writing this journal's "Nursing Management" column for almost 20 years. One of my first articles, written shortly after September 11, 2001, carried the message that nursing managers must be equipped for a direct or indirect attack on healthcare facilities. Unfortunately, at this 2020 date, we are faced with a threat that is affecting all healthcare facilities in the United States and around the world. Unlike a direct military attack, we had prenotification about COVID-19, but ensuing public fear and rapid spread have made preparation and treatment more challenging for all healthcare facilities.

The World Health Organization (2020) defined disaster as "a serious disruption of the functioning of a community or a society causing widespread human, material, economic, or environmental losses, which exceed the ability of the affected community or society to cope using its own resources" (para. 41). Disasters, which come in many forms and sizes, were classified traditionally as either natural disasters (flood, tornado, earthquake) or man-made disasters (explosion, chemical spill, mass casualty event). Recently, disasters also have been classified as a cyber attack or an infectious disease that overwhelms a community, hospital, and services for several days or weeks (Nielson, 2018). Disasters create unprecedented demand for resources and personnel. Job roles and responsibilities must shift, and flexibility becomes the word of the day. Resources, as we are witnessing, are exhausted quickly. We must be innovative, learn to prioritize, and be vigilant of supply numbers.

Preparedness

Emergency management to decrease potential loss during a disaster includes four stages: mitigation, preparedness, response, and recovery (Nielson, 2018).

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Guiding Principles

The American Organization of Nursing Leadership (2017) published guiding principles for the role of the nurse leader in crisis management. The guiding principles below can be used to define the role and position of nursing leaders.

- Nurse leaders are trained in media relations and understand tenets of good communication.
- Leaders are skilled critical thinkers, collaborative and able to manage ambiguity.
- Nurse leaders project calm, confidence, and authority in all situations. They are also empathetic to how people react to loss, challenges, and uncertainty.
- Nurse leaders are prepared to review and practice the organization's crisis readiness plan with nursing staff.
- The chief nursing officer is a member of the senior leadership team, whose role is defined clearly and sought by colleagues, particularly during a crisis. (p. 1)

This is a time of uncertainty in our world. We must understand things likely will not be normal for a long time. Our current crisis is extremely stressful and pushes people to their limits. Now is a time that calls for leaders and managers to show their human sides as well. As the renowned Dr. Karlene Kerfoot (2019) noted, "...the essence of nursing is to manage through the chaos to save lives and prevent adverse outcomes. When chaos hits, it takes a village to maintain patient safety and staff effectiveness. Burnout and moral injury can be the fallout of ineffectively handling everyday staffing; in emergencies the challenge is greatly exaggerated. (p. 256)

We are nurses! We are strong! MNS

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should be reviewed and applied before and during a disaster.

1. *Planning*. The management planning process is one of forecasting and decision-making. Planning is always future-oriented and planning for disasters is now an essential function for all managers in healthcare institutions.

2. *Organizing*. The purpose of organizing during a disaster is to establish a division of labor and a chain of command. The Society of Human Resources Management (2020) suggests a systematic plan for approaching emergencies should involve understanding of the universe of hazards that may occur, followed by assessment of the probabilities of these occurring disasters. Plans should be focused on elements with the highest degree of probability. Lack of organization during a disaster results in additional, unneeded chaos.

3. *Directing*. Staff require clear direction to initiate and maintain action. Successful directing depends on appropriate delegation, communication, and training. In a disaster, pre-designated staff must receive not only a list of their exact duties, but also the authority to fulfill their duties so action is not delayed. The Centers for Medicare & Medicaid Services require healthcare organizations to develop and execute an effective communication plan for use during a disaster (Moore, 2019). We must be prepared to ensure communication is coordinated and accurately delivers factual information. With effective communication systems in place, managers then can begin coordinating.

4. *Coordinating*. Coordination of effort involves synchronizing activities toward desired goals. Coordination occurs only through strong, effective leadership and management that organize, direct, and control staff efforts.

5. *Controlling*. Control is a manager's duty to ensure staff performance corresponds to plan. All managers exercise control by establishing standards, measuring performance against standards, and correcting deviations from standards. Nothing seems to cause a breakdown in system functioning more than a manager who has lost control. A management style that emphasizes cooperation, participation, and fairness is based on personal example and is the best way for a manager to influence the work of others during a disaster. During a crisis, when leaders must act quickly to correct problems, an autocratic, directive leadership style is efficient and effective. Disasters are not the time for debate and discussion to reach consensus.

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