Why Do Competencies Matter Anyway?

Kristine M. Gebbie, DrPH, RN
Torrens Resilience Institute
Flinders University
Australia
Nurses are needed in disasters and emergencies.

Common competencies make easier for each nurse to act responsibly, nurses to work together effectively and multi-professional teams to include nurses wisely.
What is a competency?

• A cluster of related knowledge, skills, and attitudes that affect a major part of one's job (a role or responsibility), that correlates with performance on the job, that can be measured against some accepted standards, and that can be improved via training and development*

• Will always have
  • Action verb - observable or measurable
  • Content - subject matter, specific task
  • Context - limitations or conditions of work environment

• Said differently: something we can see a nurse do, and can measure against a standard

An Example from Version 2.0:

- *The Level I nurse uses disaster terminology correctly in communication with all responders*
- What does this mean in practice?
  Co-workers who are higher in the disaster response team are referred to by position title, not usual job title or name:

   ‘My supervising nurse Juanita’ may be working as Logistics Supervisor and if you need to reach out for logistical support, ask for the title, not Juanita
Using common competencies

• In a system
  • assures that everyone who is expected to work together has the required ability

• By the profession
  • sets a standard against which performance can be measured
  • provides a solid description to convey to others what the profession brings to the response

• By an individual nurse
  • facilitates self-assessment
  • provides framework for advancement (if levels have been identified)
ICN Core Competencies in Disaster Nursing, Version 2.0

• Builds on the ICN *Framework of Competencies for the Generalist Nurse*

• Affirms practice consistent with national law and policy for nursing practice and disaster response

• Consistent with *Nurses, a voice to lead health for all* International Council of Nurses 2019.

• Introduces levels of disaster nursing practice

• Development included an international electronic survey
  • 154 responses from all parts of the world
  • 3 major nursing organizations providing a group response
Three levels of nurse

• Level I: Any nurse who has completed a program of basic, generalized nursing education and is authorised to practice by the regulatory agency of his/her country. Examples: staff nurse in a hospital, clinic, public health centre; all nurse educators.

• Level II: Any nurse who has achieved the Level I competencies and is/aspires to be a designated disaster responder within an institution, organisation or system. Examples: supervising or head nurse, nurse designated for leadership within an organisation’s emergency plan, a nurse representing the profession on a hospital/agency emergency planning committee; preparedness/response nurse educators.

• Level III: Any nurse who has achieved Level I and II competencies and is prepared to respond to a wide range of disasters and emergencies and to serve on a deployable team. Examples: frequent responders to either national or international disasters, military nurses, nurses conducting comprehensive disaster nursing research. *Note: competencies for this Level of nurse are not included in Version 2.0 at this time; many of the competencies expected at this level are common across disaster-associated disciplines.*
Competencies in 8 domains

Domain 1. Preparation and planning (actions taken apart from any specific emergency to increase readiness and confidence in actions to be taken during an event)

Domain 2. Communication (approaches to conveying essential information within one’s place of work or emergency assignment and documenting decisions made)

Domain 3. Incident management systems (the structure of disaster/emergency response required by countries/organizations/institutions and actions to make them effective)

Domain 4. Safety and Security (assuring that nurses, their colleagues and patients do not add to the burden of response by unsafe practices)

Domain 5. Assessment (gathering data about assigned patients/families/communities on which to base subsequent nursing actions)

Domain 6. Intervention (clinical or other actions taken in response to assessment of patients/families/communities within the incident management of the disaster event)

Domain 7. Recovery (any steps taken to facilitate resumption of pre-event individual/family/community/organization functioning or moving it to a higher level)

Domain 8. Law and Ethics (the legal and ethical framework for disaster/emergency nursing)
## Domain 1: Preparation and planning

<table>
<thead>
<tr>
<th>I.1.1 Maintains a general personal, family and professional preparedness plan</th>
<th>II.1.1 Participates with other disciplines in planning emergency drills/exercise at the institution or community level at least annually</th>
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<tbody>
<tr>
<td>I.1.2 Participates with other disciplines in drills/exercises in the workplace</td>
<td>II.1.2 Plans nursing improvement actions based on results of drill/exercise evaluation</td>
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<tr>
<td>I.1.3 Maintains up-to-date knowledge of available emergency resources, plans, policies and procedures</td>
<td>II.1.3 Communicates roles and responsibilities of nurses to others involved in planning, preparation, response and recovery</td>
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<td>I.1.4 Describes approaches to accommodate vulnerable population during an emergency or disaster response</td>
<td>II.1.4 Includes actions relevant to needs of vulnerable populations in emergency plans</td>
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<td>II.1.5 Incorporates Level 1 Core Competencies in Disaster Nursing in any basic nursing education program or refresher course</td>
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<td>Domain 5: Assessment</td>
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<td>I.5.1 Reports symptoms or events that might indicate the onset of an emergency in assigned patient/families/communities</td>
<td>II.5.1 Assures that all nurses have up-to-date information on potential emergency events and the process for reporting them if observed</td>
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<td>I.5.2 Performs rapid physical and mental health assessment of each assigned patient/family/community based on principles of triage and type of emergency/disaster event</td>
<td>II.5.2 Develops event-specific guidance on rapid physical and mental health assessment of individual patients/families/communities based on available information</td>
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<td>I.5.3 Maintains ongoing assessment of assigned patient/family/community for needed changes in care in response to the evolving disaster event</td>
<td>II.5.3 Includes principles of disaster/emergency triage in all assessment course taught in basic and continuing education programs</td>
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<td>II.5.4 Identifies event-specific vulnerable population(s) and actions needed to protect them</td>
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Using a Competency: I.4.2: the Level I nurse adapts \textit{action verb} basic infection control practices \textit{content} to the available resources \textit{context}

- Learning objectives to move a nursing student toward this competency would include
  - Knowledge
    - the germ theory of disease
    - methods of transmission of infectious organisms
    - means of disrupting transmission of organisms
    - influence of cultural practices on spread of micro-organisms
  - Skills laboratory experience
    - hand cleansing using a variety of methods
    - use of gloves and protective gowns or aprons
    - use of masks and breathing apparatus
  - Attitudes
    - commitment to minimizing infection in any disaster/emergency
    - sensitivity to cultural practices that should be taken into account in implementing infection control
We hope to see

• Adoption of Version 2.0 disaster nursing competencies by national nursing organizations, nursing educational programs, institutions employing nurses, and organizations participating in disaster/emergency response.

• Development of Level III competencies.

• Tools such as a toolkit on moving from a desired competency to a curriculum or teaching plan.

• Ongoing support for comments from the field to be assessed, with relatively minor editorial changes or content additions becoming Versions 2.1, 2.2, etc.

• Encouragement for nurses to continue publishing research and recommendations on the engagement of nurses in disaster/emergency response, with a focus on the applicability of these published competencies.

• A timetable for major review and development of Version 3.0.
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