



INTERNATIONAL COUNCIL OF NURSES

CORE COMPETENCIES IN DISASTER NURSING:

COMPETENCIES FOR NURSES INVOLVED IN EMERGENCY MEDICAL TEAMS (LEVEL III)



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Caption: Emergency Medical Team members caring for victims of Typhoon Haiyun in 2013.

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TABLE OF CONTENTS

AUTHORS.....	2
CONTRIBUTORS.....	2
DEDICATION	3
INTRODUCTION	4
BACKGROUND	5
Problem identification.....	5
CONTEXT FOR THE COMPETENCIES.....	5
Why Level III?	6
Why is important to set these competencies/standards for the profession?	6
Nurses taking the lead in their own competence development.....	7
Settings	7
ICN CORE COMPETENCIES IN DISASTER NURSING VERSION 2.0 – LEVEL III	8
REFERENCES.....	16

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DEDICATION

The *International Council of Nurses Core Competencies in Disaster Nursing* are dedicated in honour of Prof. Kristine Gebbie. She was an inspiration, expert and author behind much of the work.



Destroyed buildings in Haiti following the 2010 earthquake.

INTRODUCTION

Over the last decade, there have been numerous disasters and major emergencies that have profoundly impacted the lives of millions of people worldwide. To support these crises, national and international emergency medical teams (EMTs) are often deployed to assist disaster affected populations. EMTs are teams of healthcare professionals composed most frequently of doctors, nurses, psychologists and others to provide direct clinical care to people

affected by disasters and conflicts and to support local health systems. In agreement with the World Health Organization's (WHO) Global Health Emergency Health Workforce programme, any health professional coming from another country to practice health care in a disaster setting must be part of a team that is qualified, trained, equipped, resourced, and meets minimum acceptable standards to practice.



Benedikt Van Loo

Benedikt Van Loo, a Dutch nurse anesthetist (CRNA), working in Port-au-Prince, Haiti.

BACKGROUND

There have been concerns raised about the quality and standard of health care delivered by Emergency Medical Teams (EMTs) due to lack of preparedness. Issues identified include health professionals working outside of their scope of practice and license; lack of the basic capacities to be self-sufficient; lack of cultural awareness; delayed response to events; and poor coordination with local authorities and

other international agencies (Camacho et al., 2016; Hamilton, Södergård, & Liverani, 2022). Many lessons were learnt about EMTs' field hospitals after the catastrophic Haiti Earthquake in 2010 and the Ebola outbreak in West Africa in 2014. This would lead to the 68th World Health Assembly (2015) supporting the need to improve global surge capacity and the quality assurance of EMTs (WHO, 2015).

PROBLEM IDENTIFICATION

A foundational strategy recognised by experts to improve the quality and professional practice of deployed teams is to develop a coherent and standardised approach to education and training. The WHO Global Health Emergency Health Workforce programme makes this a mandatory requirement for EMTs seeking to receive accreditation. However, analysis of the situation has found that the quality of education and training programmes offered by organisations and

universities varies significantly in scope, curriculum, and quality across the world. Much of this has resulted from the lack of standards to guide education and training design (Camacho et al., 2016; Jacquet, Obi, Chang, & Bayram, 2014). These competencies developed by ICN seek to address this issue by developing a common and universal standard for nurses who are deployed for services outside of their normal work environment as a result of responding to a disaster.

CONTEXT FOR THE COMPETENCIES

The International Council of Nurses (ICN) *Core Competencies in Disaster Nursing Version 2.0* was released in 2019. At this time, the Level III competencies were not included but were recommended for future development. This work does not replace the Version 2.0 competencies, but completes them with the inclusion of the Level III deployed nurse, providing a unique focus on nurses involved in EMTs who are deployed to either national or international disasters.

ICN supports and follows the WHO Global Health Emergency Health Workforce programme. The ICN Disaster Competencies

Level III align with and build on the [WHO Classification and Minimum Standards for Emergency Medical Teams](#) by articulating a minimum standard of competencies required by nurses who are deployed as part of an established team to respond to disasters.

ICN also supports the EMT initiative (WHO, 2021) that requires all health professionals to be:

- licensed to practice in their home country
- specialists in their field and have suitable malpractice insurance, and
- registered (and obtain licensing) with national authority and lead international agency.

WHY LEVEL III?

Past experiences have shown that health professionals within teams that have been deployed to disasters do not necessarily meet the needs of the situation, or have the necessary knowledge, skills, attributes and professional ethics. Good intentions are not enough for an individual to be accepted on an EMT. There is a need for nurses seeking to be deployed to be adequately prepared and educated.

A competent workforce is a key part of any nation's disaster response and infrastructure. A nurse working at Level III of competence in disasters is more likely to lead a multi-disciplinary

workforce group in a disaster, in different jurisdictions or borders. A person working at this level needs to be able to critically appraise the environment, and to question existing mechanisms as required. These nurses need to be adequately prepared prior to deployment and understand the psychosocial consequences of re-entering society. The *ICN Core Competencies in Disaster Nursing Level III* is a framework for ensuring that nurses have a standard of abilities and capabilities required for a nurses role within an EMT. Improving professional competency is fundamental for nursing practice and has a direct relationship with improving the quality of patient care and promoting public health.

WHY IS IT IMPORTANT TO SET THESE COMPETENCIES/STANDARDS FOR THE PROFESSION?

Many countries are seeking to improve health care delivery and the continuing expansion of disaster nursing education is no exception. Relevant policies and professional standards are required to promote the inclusion of sustainable advanced nursing practice roles (ICN, 2020). Developing new and more advanced roles for nurses (by nurses) can improve access to care for many communities worldwide (Delamaire and Lafortune, 2010). Furthermore, understanding

advanced nursing practice roles relative to the broader team in disasters means the scope of practice, knowledge requirements and skill development needs to be clearly articulated (Chief Nursing and Midwifery Officers Australia, 2020). This shared understanding leads to improve workforce flexibility and assists in generating a substantiable supply of Level III nurses who can work across boundaries and jurisdictions.



A wounded victim of the 2018 March of Return in Gaza is treated by a doctor and nurse.

NURSES TAKING THE LEAD IN THEIR OWN COMPETENCE DEVELOPMENT

Nurses are often the largest component of a communities' professional health workforce. An OECD (2016) report found that 80% of nurses stated they were over-skilled for their roles, with many stating artificial barriers prevent them from working to their full capacity. Nurses can do more, but their skills are not fully appreciated or utilised. Due to the dynamic changes in the perception of how nurses provide care it is important that the competencies and boundaries

of professional standards are informed and led by nurses (ICN, 2020). Thus, nurses must translate new research findings to the practice environment and into nursing education, and from nursing education into practice and policy. Nurses need to be seen and accepted as leaders and see the nursing profession as something they can shape and develop rather than something that happens to them, both at the organisational and national level.

SETTINGS

EMTs respond to both national and international crises. They come from governments (civil and military), non-governmental organisations, international humanitarian networks (e.g. International Red Cross and Red Crescent Movement, Médecins sans Frontières), United Nations contracted teams and the private sector.

Nurses are often deployed first and represent the largest number of health care professionals who are deployed in EMTs for disasters. For

example, in the WHO Classification and Minimum Standards for Emergency Medical Teams (2021), for inpatient wards there is a minimum nurse-patient ratio of 1:8 for every shift. There is also a requirement of doctor-nurse ratio of 1:3.

Nurses serve as an essential resource and can hold a wide range of roles in EMTs including clinicians, policy makers, educators, researchers and leaders.



Aoife Ni Murchu on board the Aquarius which provides search and rescue services for migrants at sea.

ICN CORE COMPETENCIES IN DISASTER NURSING VERSION 2.0 – LEVEL III

The *ICN Core Competencies in Disaster Nursing* have been developed and supported by international experts in the subject. ICN believes there is a strong base for the adoption of these competencies by governments, EMT organisations, regulatory authorities and educators. Although not covered in this paper, evaluation and accreditation of courses and participants to ensure that the competencies have been achieved should be adopted and implemented.

The competencies were developed for application by nurses and apply to one of three levels of nurse, defined as:

- **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.**
- **Level II: any nurse who has achieved the Level I competencies and is or aspires to be a designated disaster responder within and institution, organization or system.**
- **Level III: any nurse who has achieved both Levels I and II competencies and is prepared to respond to a wide range of disasters and emergencies and to serve on a deployable team.**

The competencies of Level I and Level II nurses were outlined in the *ICN Core Competencies in Disaster Nursing 2.0* released in 2019. These *Competencies for Nurses involved in Emergency Medical Teams* supplement those expected of the practicing nurse as defined by ICN. Basic expectations – such as practice that is respectful of the values and dignity of individuals and communities – are not repeated here. At all three levels, the nurse begins as a novice in each competency, but is expected to achieve and maintain proficiency as defined by applicable national standards, workplace quality assurance standards or nursing organisation standards. Any competency is useful only if the nurse commits to acquire and regularly use and improve performance in the competency.

The *ICN Core Competencies in Disaster Nursing* are organised within eight domains which have been updated from those used in *ICN Core Competencies 1.0* based on research and experiences over the intervening years. The domains include:

- **Domain 1: Preparation and Planning** - actions taken apart from any specific emergency situation to increase readiness and confidence in actions to be taken during an event
- **Domain 2: Communication** - approaches to conveying and updating essential information within one's place of work or emergency assignment and documenting actions taken, and decisions made
- **Domain 3: Incident Management** - the structure of disaster/emergency responses required by countries/organisations/institutions and actions to make them effective and efficient
- **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** - steps taken to facilitate resumption of pre-event individual/family/ community/organisation functioning or moving it to a higher level
- **Domain 8: Law and Ethics** - the legal and ethical framework for disaster/emergency nursing



GENERAL PROFESSIONAL NURSE	ADVANCED OR SPECIALIZED NURSE	ADVANCED NURSING PRACTICE – SPECIALIST IN DISASTERS
<p>Level I: any nurse who has completed a programme of basic, generalised nursing education and is authorised to practice by the regulatory agency of his/her country.</p> <p>Examples of Level I include staff nurses in hospitals, clinics, public health centres; all nurse educators.</p>	<p>Level II: any nurse who has achieved the Level I competencies and is or aspires to be a designated disaster responder within an institution, organisation or system.</p> <p>Examples of Level II include supervising or head nurses; nurses designated for leadership within an organisation’s emergency plan; nurses representing the profession on an institution or agency emergency planning committee, preparedness/ response nurse educators.</p>	<p>Level III: Any nurse who has achieved both Levels I and II competencies and is prepared to respond to a wide range of disasters and emergencies and to serve on a deployable team.</p> <p>Examples: Authorised responders to either national or international disasters. They may be part of Emergency Management Teams from different sectors including governments (civil and military), non-governmental organisations, international humanitarian networks (e.g. International Red Cross and Red Crescent Movement, Médecins sans Frontières), United Nations contracted teams and the private sector.</p>
DOMAIN 1: Preparation and Planning		
<p>I.1.1 Maintains a general personal, family and professional preparedness plan</p>	<p>II.1.1 Participates with other disciplines in planning emergency drills/exercises at the institution or community level at least annually</p>	<p>III.1.1 Assumes a leadership role in planning, implementing and/or evaluating emergency drills/exercises at the institution or community level</p>
<p>I.1.2 Participates with other disciplines in drills/exercises in the workplace¹</p>	<p>II.1.2 Plans nursing improvement actions based on results of drill/exercise evaluation</p>	<p>III.1.2 Supervises implementation of identified improvement actions</p>
<p>I.1.3 Maintains up-to-date knowledge of available emergency resources, plans, policies and procedure</p>	<p>II.1.3 Communicates roles and responsibilities of nurses to others involved in planning, preparation, response and recovery</p>	<p>III.1.3 Recognises and manages common nursing-specific roles in emergency/disaster situations</p>

¹ Some drills/exercises done in a basic educational setting may not involve other disciplines

GENERAL PROFESSIONAL NURSE	ADVANCED OR SPECIALIZED NURSE	ADVANCED NURSING PRACTICE – SPECIALIST IN DISASTERS
<p>I.1.4 Describes approaches to accommodate vulnerable populations during an emergency or disaster response</p>	<p>II.1.4 Includes actions relevant to needs of vulnerable populations in emergency plans</p>	<p>III.1.4 Ensures the inclusion of all likely vulnerable/at risk populations in disaster/emergency plans and all drills/exercises</p>
	<p>II.1.5 Incorporates Level I core competencies in Disaster Nursing in any basic nursing education programme or refresher course</p>	<p>III.1.5 Ensures the effectiveness of Levels I & II Core Competencies when used in events and drills</p>
		<p>III.1.6 Advocates improvements to Core Competencies when need is identified</p>
		<p>III.1.7 Ensures deployable team preparation includes adequate materials for documentation, supply access and resources</p>
		<p>III.1.8 Contributes expert experience and knowledge to development of disaster nursing education programmes</p>
<p>DOMAIN 2: Communication</p>		
<p>I.2.1 Uses disaster terminology correctly in communication with all responders and receivers</p>	<p>II.2.1 Plans for adaptable emergency/disaster communications systems</p>	<p>III.2.1. Directs and implements communications systems applicable to assigned role in drill/exercise/event</p>
<p>I.2.2 Communicates disaster-related priority information promptly to designated individuals</p>	<p>II.2.2 Includes emergency communication expectations in all orientation of nurses to a workplace</p>	<p>III.2.2. Delivers event-specific information through all established systems</p>
<p>I.2.3 Demonstrates basic crisis communication skills during emergency/disaster events</p>	<p>II.2.3 Collaborates with disaster leadership team(s) to develop event-specific media messages</p>	<p>III.2.3 Proposes needed improvements in communications during emergency drill/exercise/event</p>

GENERAL PROFESSIONAL NURSE	ADVANCED OR SPECIALIZED NURSE	ADVANCED NURSING PRACTICE – SPECIALIST IN DISASTERS
I.2.4 Uses available multi-lingual resources ² to provide clear communication with disaster-affected populations	II.2.4 Develops guidance on critical documentation to be maintained during disaster or emergency	III.2.4 Assures the collection of essential key clinical and action information during an emergency drill/exercise/event
I.2.5 Adapts documentation of essential assessment and intervention information to the resources and scale of emergency		
DOMAIN 3: Incident Management		
I.3.1 Describes the national structure for response to an emergency or disaster	II.3.1 Participates in development of organisational incident plan consistent with national standards	III.3.1. Ensures that community/organisational/unit emergency plan is consistent with national/state/territorial standards (as applicable)
I.3.2 Uses the specific disaster plan including chain of command for his/her place of education or employment in an event, exercise or drill	II.3.2 Participates with others in post-event (actual or exercise) evaluation	III.3.2 Directs event-specific role-related training and/or reviews for all involved clinical staff
I.3.3 Contributes observations and experiences to post-event evaluation	II.3.3 Develops action plans for improvement in nursing practice based on event assessment	III.3.3 Ensures post-drill/exercise/event evaluation is completed
I.3.4 Maintains professional practice within licensed scope of practice when assigned to an inter-professional team or an unfamiliar location	II.3.4 Includes emergency planning guidance when reassigning staff or including unfamiliar colleagues or volunteers	III.3.4 Assures implementation of post-event individual, unit and organisational improvement plans
DOMAIN 4: Safety and Security		
I.4.1 Maintains safety for self and others throughout disaster/emergency event in both usual or austere environment(s)	II.4.1 Implements materials that support nursing decision-making that maintains safety during disaster/emergency events	III.4.1 Ensures availability of systems and equipment in collaboration with response team to promote responder safety during emergency drills/exercises/events
I.4.2 Adapts basic infection control practices to the available resources	II.4.2 Provides timely alternative infection control practices applicable within limited resources	III.4.2 Ensures adherence to infection control practices suitable to the event/environment

² Resources include such things as interpreters, signs or pictures

GENERAL PROFESSIONAL NURSE	ADVANCED OR SPECIALIZED NURSE	ADVANCED NURSING PRACTICE – SPECIALIST IN DISASTERS
I.4.3. Applies regular assessment of self and colleagues during disaster event to identify need for physical or psychological support	II.4.3 Collaborates with others to facilitate nurses' access to medical and/or mental health treatment, and other support services as needed	III.4.3 Promotes access to essential medical/ mental health services for all responders to any drill/ exercise/event
I.4.4 Uses PPE ³ as directed through the chain of command in a disaster/ emergency event	II.4.4 Explains the levels/ difference in PPE and indications for use to nurses and others	III.4.4 Implements the correct use of PPE for self and others applicable to the drill/ exercise/event
I.4.5 Reports possible risks to personal or others' safety and security	II.4.5 Creates an action plan to address and correct/ eliminate risks to personal or others' safety and security	III.4.5 Collaborates to modify action plan to minimize newly identified risks during drill/ exercise/event
DOMAIN 5: Assessment		
I.5.1 Reports symptoms or events that might indicate the onset of an emergency in assigned patients/families/ communities	II.5.1 Assures that all nurses have up-to-date information on potential emergency events and the process for reporting them if observed	III.5.1 Gathers data and provides information on environmental or other potential emergencies with resource links to at-risk/ vulnerable parties
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	II.5.2 Develops event-specific guidance on rapid physical and mental health assessment of individual patients/families/ communities based on available information	III.5.2 Monitors, implements, and communicates event-specific assessment of exposed/potentially exposed individuals/ communities including identified vulnerable populations
I.5.3 Maintains ongoing assessment of assigned patient/family/community for needed changes in care in response to the evolving disaster event	II.5.3 Includes principles of disaster/emergency triage in all assessment courses taught in basic and continuing education programmes	III.5.3 Assures involved responders maintain skills in disaster/emergency triage
	II.5.4 Identifies event-specific vulnerable population(s) and actions needed to protect them	

³ Personal Protective Equipment

GENERAL PROFESSIONAL NURSE	ADVANCED OR SPECIALIZED NURSE	ADVANCED NURSING PRACTICE – SPECIALIST IN DISASTERS
DOMAIN 6: Intervention		
I.6.1 Implements basic first aid as needed by individuals in immediate vicinity	II.6.1 Assures that emergency plans and institutional policy include the expectation that basic first aid can be administered by all nurses	III.6.1 Ensures the quality and frequency of basic first aid and related skills in organisation to which attached
I.6.2 Isolates individuals/families/clusters at risk of spreading communicable condition(s) to others	II.6.2 Includes organisationally specific guidance on implementation of isolation in an emergency	III.6.2 Implements isolation protocols as needed by the specific drill/exercise/event
I.6.3 Participates in contamination assessment or decontamination of individuals when directed through the chain of command	II.6.3 Describes the range of CBRNE ⁴ exposures and the exposure-related decontamination methods to be used	III.6.3 Ensures that interventions for identified vulnerable population(s) are implemented
I.6.4 Engages patients, their family members or assigned volunteers, within their abilities, to extend resources during events	II.6.4 Plans for expanded patient, patient’s family or volunteer participation in extending resources in emergency/disaster plan	III.6.4 Implements the correct use of CBRNE decontamination procedures relevant to a drill/exercise/event
I.6.5 Provides patient care based on priority needs and available resources	II.6.5 Guides implementation of nursing reassignments within an organisation’s emergency plan	III.6.5 Supervises volunteer participation if planned or added by leadership team in drill/exercise/event
I.6.6 Participates in surge capacity activities as assigned (e.g. mass immunisation)	II.6.6 Guides nursing participation in surge activities when required by event	III.6.6 Assures that nursing role contributions and assignments within activated emergency plan are clearly communicated to all involved in drill/exercise/event
I.6.7 Adheres to protocol for management of large numbers of deceased in respectful manner		III.6.7 Ensures nursing participation consistent with requirement of host jurisdiction when deployed across jurisdictional lines
		III.6.8 Supervises implementation of protocol for respectful and safe management of deceased, and the surrounding environment

4 Chemical, biological, radiation, nuclear, explosive

GENERAL PROFESSIONAL NURSE	ADVANCED OR SPECIALIZED NURSE	ADVANCED NURSING PRACTICE – SPECIALIST IN DISASTERS
DOMAIN 7: Recovery		
I.7.1 Assists an organisation to maintain or resume functioning during and post event	II.7.1 Communicates nursing roles, responsibilities and needs to leadership throughout the recovery phase	III.7.1 Supervises transition of clinical services from emergency activities through to recovery and mitigation processes
I.7.2 Assists assigned patients/ families/ communities to maintain or resume functioning during and post event	II.7.2 Maintains up-to-date referral resource lists and adds event-specific modifications as needed	III.7.2 Ensures that recovery-related resource information and evidence is available to responders
I.7.3 Makes referrals for ongoing physical and mental health needs as patients are discharged from care		III.7.3 Ensures de-briefing for patients, families, communities, response teams
I.7.4 Participates in transition de-briefing to identify personal needs for ongoing assistance		III.7.4 Ensures referrals to needed post-event mental and physical care for patient, families, response teams
DOMAIN 8: Law and Ethics		
I.8.1 Practices within the applicable nursing and emergency-specific laws, policies and procedures	II.8.1 Participates in development of emergency-specific policy and procedure guidance for nurses within the organisation/institution	III.8.1 Leads in the implementation and applies laws/policies/ procedures as they relate to the deployment environment
I.8.2. Applies institutional or national disaster ethical framework in care of individuals/families/ communities	II.8.2 Participates in the development of disaster/ emergency frameworks for allocation of resources (e.g. staff, supplies, medications)	III.8.2 Prioritises resource allocation within event-specific environment, health system capacities and established local/ regional/national framework
I.8.3 Demonstrates understanding of ethical practice during disaster response that is based on utilitarian principles ⁵	II.8.3 Develops guidance for nurses expected to apply utilitarian principles in practice during emergency and disaster response	III.8.3 Promotes and supports application of utilitarian principles for practice during response activities as needed

⁵ Utilitarian principles place highest value on actions that lead to the greatest good for the greatest possible number of persons, rather than actions that are prioritised based on the needs of any one individual.

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