Oncology Nurses: First, Second, and Always Responders

Our hearts go out to our Gulf and Atlantic Coast neighbors who were battered by the harrowing effects and destructive aftermath of hurricanes Harvey and Irma, which made landfall with historically destructive force in late August and early September. The estimated cost to rebuild and recover is staggering (Federal Emergency Management Agency [FEMA], 2017; Ward, 2017). These disasters will change the infrastructure of nearly all aspects of how Gulf and Atlantic Coast communities function: housing, healthcare delivery, public health safeguards, transportation, utilities, schools, retail businesses, and local and county government (FEMA, 2017).

The 2017 hurricane season prompts us to review our readiness for disasters (American Red Cross, 2017; FEMA, 2017; U.S. Department of Health and Human Services [USDHHS], 2014). Disaster preparation related to oncology healthcare issues includes, but is not limited to, making sure patients and facilities have access to medical records and medications, establishing a system to reschedule missed treatments, managing treatment side effects from afar and with limited supplies and broken communication systems, and developing strategies and policies to deal with contaminated water and other sources of infection (Tariman, 2007; USDHHS, 2014). In any disaster, the human toll of surviving can be crippling and overwhelming (FEMA, 2017; Veenema et al., 2016). The experience of our Gulf and Atlantic Coast colleagues reminds us to be more aware, equipped, and ready to deal with the crisis of natural disasters, whether they are hurricanes, floods, fires, tornadoes, earthquakes, or crises yet to be named (American Red Cross, 2017; FEMA, 2017). Those providing and maintaining health care call on many skills and competencies to care for others, including planning, mitigation, response, and recovery (Baack & Alfred, 2013; Veenema et al., 2016). As always, oncology nurses are a vital force, leading and rallying support and care for those in crisis.

Mark Fucanan, RN, a clinical nurse on the G17 stem cell transplantation and cellular therapy unit at MD Anderson Cancer Center in Houston, experienced Hurricane Harvey firsthand. Mark shared the following insights about the efforts of his colleagues and nurses across the country.

I expected MD Anderson employees to go above and beyond by offering to share living space in makeshift rooms on our hospital units during storm “ride out” conditions, allowing others to borrow their phones to contact loved ones, sharing food, and working overtime shifts for as many as five consecutive days to meet the needs of the patients until the Recovery Team was able to access the flooded streets to the hospital. What I didn’t expect was the overwhelming support from other hospitals that have oncology nurses. Almost instinctively, post-Hurricane Harvey, I received calls from oncology nurses in New York and California communicating with their hospital’s...

"Oncology nurses are a vital force, leading and rallying support and care for those in crisis."
From the Editor

We are truly witnessing something very special. (M. Fucanan, personal communication, September 4, 2017)

Additional insight from Mark about the impact of Hurricane Harvey on the Houston community and the healthcare providers at MD Anderson can be found in his blog at http://bit.ly/2w1BPdj.

Another colleague from MD Anderson, Kelly Brassil, PhD, RN, AOCNS®, ACNS-BC, the director of nursing research and innovation, shared some of her thoughts in the aftermath of Hurricane Harvey.

Natural disasters are similar to cancer in that they don't discriminate in whom they afflict; however, socioeconomically challenged communities are often most impacted and may need additional resources over longer periods of time to recover. As nurses, we are inherently trained to cope with challenges as they emerge and to serve the most vulnerable. Support of ravaged communities is needed long after the cameras have gone, social media has moved on, and it is fashionable to do so.

Use the evidence-based tools of our profession to identify compassion fatigue, and potentially post-traumatic stress among those who have weathered this storm. Recognize that the most important sphere of influence is around you, whether that is protecting your family in your home, assisting neighbors on our streets, volunteering at shelters in our communities, or riding out and recovering from the storm in the clinical setting. Each of these roles is equally important and impactful and allows us to harness the qualities of compassion, selflessness, and leadership that are inherent in the nursing profession. (K. Brassil, personal communication, August 31, 2017)

The ONS Foundation has established an oncology nurse emergency response initiative for oncology nurses in the impacted areas. The initiative will provide education and leadership awards that support our nursing colleagues as they continue to provide excellent oncology care as well as rebuild their communities. More information on that and other relief efforts can be found in Figure 1.

Let us applaud all nurses who help in these disaster-stricken areas. They represent the many healthcare providers who heroically serve their and our communities, no matter the conditions.

Ellen Carr, RN, MSN, AOCN®, is a clinical educator in the Multispecialty Clinic at the University of California San Diego Moores Cancer Center. Carr can be reached at CJOINeditor@ons.org.

The author takes full responsibility for the content of the article. No financial relationships relevant to the content of this article have been disclosed by the editorial staff.

References


Keywords

nursing profession; preparedness; volunteer

Digital Object Identifier

10.1188/17.CJON.527-528