**Clinical eLearning** 

# Redeploying nurses during times of crisis The immediate value of virtual education





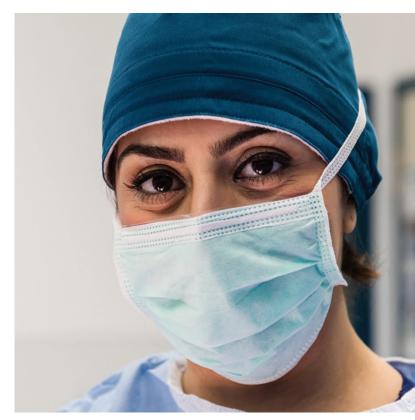
Tammy Purcell, MSN, RNC-OB Clinical Nurse Executive, Elsevier

Global medical emergencies and other health disasters can overwhelm hospitals and clinics with the volume of critically ill patients requiring care and treatment. Threats to public health and pandemics place caregivers in the midst of crisis as they face perilous decisions regarding their patients, as well as their own personal safety. At the forefront of these challenges are nurses who must perform atypical duties as they redeploy into care areas that are experiencing an influx of ailing patients.

The novel coronavirus has turned hospital procedures and responsibilities upside down. Because many hospitals have postponed elective surgeries and procedures to make room for additional emergency and ICU beds for the influx of new patients, more nurses are needed in specific specialties of care, often in unfamiliar assignments.

Nurses at every level are being redeployed and asked to care for patients and perform clinical skills that are not their normal specialty. This requires upskilling knowledge, procedures and testing as they take on new clinical areas caring for unfamiliar patient populations.

In Massachusetts, where over 3,700 people have already been hospitalized with confirmed or suspected coronavirus, nurses at every level are getting new assignments. At Tufts Medical Center, nurses who generally work in operating rooms have been cross-trained to swab patients or help in the ICU. At Beth Israel Deaconess Medical Center, nurses who typically practice in outpatient clinics have been trained to assist in the emergency department or ICU. At Mass General, over 2,100 employees have been redeployed. At Brigham and Women's Hospital, more than 1,200 have received temporary assignments.<sup>1</sup>



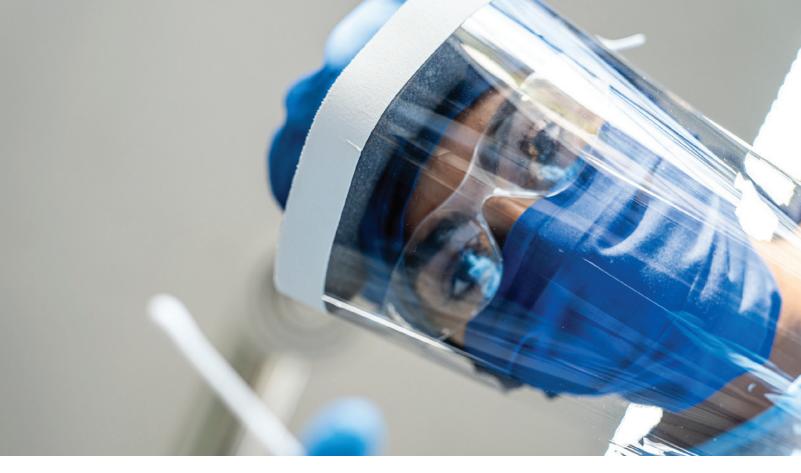
While redeploying nurses can alleviate the staffing problem, a lack of critical care skills and emergency experience can not only jeopardize patient safety and compromise outcomes, but also add to the risk of nurse burnout.

"Even before this crisis hit, burnout levels among clinicians were escalating at alarming rates," says Cynda Rushton, professor at Johns Hopkins School of Nursing. "This pandemic has stressed an already stressed healthcare system. It's a time of great stress and uncertainty.""

"These are definitely unprecedented times for everybody," said Lori Cunningham, director of talent acquisition at Beth Israel Deaconess Medical Center, where 1,100 employees are on the redeployment list and 650 already have new assignments."



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### Preparing nurses for new challenges

Across the country, hospitals are scrambling to upskill nurses to new specialties and to prepare them for the physical and emotional challenges they'll face. Strategies vary depending on the nature of the organization.

Allegheny Health Network, an eight-hospital system based in Pittsburgh, PA, redeployed a number of practicing RNs to the front lines who typically work in operating rooms or ambulatory sites. Nurses were assessed for the best unit placement and now work as "nurse extenders," supporting their assigned nurses and meeting patient needs.

Those nurses reassigned to acute care must pass a cardiac dysrthymia reading test and take a virtual 4-hour inpatient refresher course. The virtual training is supplemented by in-person education led by ICU nurse educators. Nurses must also shadow a member of the unit for at least one shift.<sup>iv</sup>

At Gunderson Health System in La Crosse, WI, internal clinical leaders recommended training resources on topics for each tier of service. Through this process they found an online ventilator training class, hospitalist skills training and videos from leaders in family medicine on the assessment of respiratory disease. They supplemented internal trainings with vetted videos and resources and will turn to in-person shadowing in the ICU and emergency department as necessary. <sup>v</sup>

### "Make sure you have all the best internal and external training resources collated... and consider what trainings you can repurpose."

 Jon Zlabek, Gunderson Chief of Medical and Clinical staff. <sup>vi</sup>



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### The value of immediate education

Virtual, evidence-based education is more important now than ever before, not only to promote patient care, but to reduce nurse burnout. Online learning that standardizes knowledge with evidence-based education empowers consistent patient care, regardless of experience. Upskilling can help reduce the added risk of burnout for nurses as they learn necessary skills that elevate their competence and confidence in their performance.

Elsevier can help organizations better prepare for current and future crises through a suite of online, evidence-based nursing education that builds skills proficiency. Developed in partnership with leading nurse associations, Elsevier's Clinical eLearning empowers nurses with the skills and self-assurance needed to deliver consistent, high-quality care during these challenging times. "Our evidence-based solutions have been very successful in helping to prepare, guide and support nurses in transition during this uncharted pandemic event. I'm hearing from the front lines how organizations are using virtual lessons to efficiently and effectively educate their nurses in new specialties as they continue to adapt to this health crisis."

– Tammy Purcell, Clinical Nurse Executive, Elsevier.

### Prepare your nurses for uncertainty

Successful redeployment programs encompass virtual evidence-based education, as well as tools that address the mental health of the care team, to encourage high-quality, standardized patient care..

Discover how Elsevier's Clinical eLearning can empower your nurses during these uncharted times with online, evidence-based education.

#### References

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