



Affiliated with Duke University Health System

# **Emergency Preparedness Education and Operations Plan (EPEOP)**

Updated **November, 2020**

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## A. Purpose

The Emergency Preparedness Education and Operations Plan (EPEO) is designed to help students, staff, and faculty respond appropriately when emergency conditions exist. Although events are unpredictable, this EPEO allows for immediate response/procedures thereby, minimizing danger to lives and property.

## B. Narrative

Watts College of Nursing is a corporate affiliate of the Duke University Health System (DUHS). Watts follows all policies and plans of the DUHS. The College is located at 2828 Croasdaile Drive Suite 200 Durham, NC 27705; this location is between Duke Hospital and Duke Regional Hospital and is not located on the campus of DUHS or Duke University. Resources as part of the DUHS are available to Watts College.

The administrative team comprising of the President, Associate Chief Executive Officer for Business and Administration and the Associate Chief Executive Officer for Academics are responsible for making any decisions regarding any disruption or change in the normal operations of the College. Decisions are made following those of the DUHS when to ensure the safety of students, faculty, and staff are maintained. The College may cancel classes/operations as deemed what is best for the student, faculty, and staff as Watts is a commuter College.

## Important Note

**If an individual is in need of immediate medical treatment, human lives are at risk, or a crime is being committed (including acts of violence) first call Police at 911 (if calling from a land line on Duke property) or 684-2444 (if calling from a cell phone). The acute situation should be managed first, and only after it is stabilized (or at the first opportunity) should the administrative channels of communication described in this document be implemented.**

## C. Watts College of Nursing Emergency Leadership Team (WCON ELT) Responsibilities:

1. Coordinate with DUHS officials based on the nature of the individual incident.
2. Serve as a central point for incoming and outgoing information on the emergency or crisis through the media, marketing, and communications departments at DUHS.
3. Develop an appropriate mechanism for communication of the emergency or crisis and update for internal constituencies.
4. Determine the appropriate response to the situation.
5. The first responsibility of leadership during a workplace emergency is to protect life and property by notifying the appropriate emergency response

personnel (Call 911, then Duke Police, DUHS leadership) as appropriate to the situation.

### Emergency Contact Information (See Appendix A)

The following provides an outline of position-specific responsibilities, as needed and applicable, of the WCON ELT members in the event of an emergency or crisis.

Position	Responsibilities
President	Overall responsibility for the WCON and makes strategic decisions in the event of an emergency or crisis. When logistically possible, the Associate Executive Business & Finance consults the President during the crisis or emergency about important decisions that impact the school.
Associate Executive Chief Business & Finance	Declares an emergency when required and is the highest level of authority during the emergency, serving as Incident Commander. Convenes the Emergency Leadership Team's opening meeting/conference call. Has authority and responsibility for WCON matters during the emergency. Also has specific authority and responsibility for WCON facility, administrative, human resources, IT, and business-related issues during the emergency. Will consult with the President as needed. Orders implementation of WCON emergency plans. Declares an end to the emergency and concluding dates for certain processes and procedures.
Associate Chief Executive Academics	Has authority and responsibility for WCON academic affairs related issues especially as it relates to faculty, students, classroom and clinical experiences, and impact upon class schedules. Functions as back up to the Associate Executive Chief Business & Finance during his absence and has back-up authority to activate the WCON ELT during the Associate Executive Chief Business & Finance's absence. When not serving as Incident Commander in the back up capacity, responsible for overall coordination of student, faculty, and administration issues.

#### D. Evacuate

- Leave building.
- Take personal belongings (keys, purse, cell phone, etc.).

- Assist those with disabilities.
- Convene in the back-parking lot.

Once safe, report all fires to Duke Police (919-684-2444)

## **E. Extended Power Outages**

In the case of an extended power outage, a generator system will provide very limited power for the building in the event of electrical failure. If classes need to be relocated or canceled, or if the outage will be extensive, the WCON ELT will work with those faculty whose classes will be impacted and will notify the College of such plans.

## **F. Severe Weather**

- Staff in “essential service” positions report to or remain at work.
- Staff in “delayed service” positions do not report to or remain at work.
- Those traveling should use only priority roads, sidewalks, and walkways during periods of severe weather.
- Use caution while traveling around campus as surfaces may be icy, slick, or blocked. Sloped surfaces, stairs, ramps, and paths not identified as the preferred route of travel should be avoided.

## **G. Tornadoes**

- Stay inside until danger has passed.
- Seek shelter on the lowest building level, interior rooms or hallways with interior walls. Use interior spaces with short spans. Stairwells, bathrooms and closets are good spots.
- Put as many walls as possible between you and the exterior of building.
- Avoid windows and doors with glass panels.
- Avoid interior and exterior doors.
- Avoid areas where chemicals are stored. Chemicals and cleaning supplies should be removed from areas designated for shelter use.
- Unsecured items (shelving, supplies, wall lockers, etc.) should either be secured or removed from shelter areas.
- Stay away from entrances. All doors around a shelter area should be closed and secured during a tornado warning.

- Monitor <https://emergency.duke.edu> or call 919-684-INFO for updates.
- Wait for “all clear” by police or university officials.
- **For more information, visit:** [ReadyNC.org](https://www.readync.org) and [ncem.org](https://www.ncem.org).

## H. Hurricanes

- Secure any outdoor furniture or other loose items that could pose a danger in high winds prior to the storm.
- Ensure all windows and exterior doors are closed prior to the storm.
- Any flooding or property damage should be reported to the appropriate maintenance unit so crews can respond quickly. Unless a situation is life-threatening, crews may wait until after dangerous winds have subsided before responding.
- Any potential safety-related issues, such as downed trees or power lines, should be reported immediately to Duke Police at 911 or 919-684-2444.
- Monitor <https://emergency.duke.edu> or call 919-684-INFO for updates.

## I. Extreme Heat

- Stay hydrated. Drink water regularly throughout the day.
- Avoid caffeine.
- Limit outdoor activity to morning or evening hours.
- If outdoors, stay in the shade as much as possible.
- Keep track of outdoor temperatures and personal comfort levels to know what temperatures feel too hot.
- Dress in lightweight, light-colored cotton clothing.
- If you start feeling significantly weakened, take a break.
- Should issues arise with HVAC resources, faculty, staff, and students may be sent home to work or conduct classes.

## J. Winter Weather

- Staff in “essential service” positions report to or remain at work.
- Staff in “delayed service” positions do not report to or remain at work.
- Those traveling should use only use priority roads, sidewalks, and walkways during periods of severe weather.

- Use caution while traveling around campus as surfaces may be icy or slick. Sloped surfaces, stairs, ramps, and paths not identified as the preferred route of travel should be avoided.
- Decisions regarding closure or delay will be made by the President, Associate Chief Executive Business & Finance, and Associate Chief Executive Academics.

Monitor <https://emergency.duke.edu> or call 919-684-INFO for updates.

## K. Fire

- a) When dealing with a fire, use the **RACE** acronym to remember how to proceed:

**R**-emove persons in danger. Exit through stairwell; do not use elevator.

**A**-ctivate alarm (Code Red) **AND** dial 911.

**C**-lose doors and windows.

**E**-xtinguish fire. Have person knowledgeable of incident and area assist emergency personnel.

- b) In the event of a small fire that requires the use of a fire extinguisher, use the **PASS** acronym to remember how to safely and effectively put out the fire:

**P**-ull the pin and hold the extinguisher with the nozzle pointing away from you.

**A**-im low. Point the extinguisher at the base of the fire.

**S**-queeze the lever slowly and evenly.

**S**-weep the nozzle from side to side.

Once you are safe, report all fires to Duke Police (919-684-2444)

## L. Crime Prevention

- Don't walk alone at night and avoid unfamiliar, dimly lit areas.

- If you are being followed, go to the nearest populated, well-lit location and call 911. If you are walking, cross the street away from the person and go somewhere else, such as a convenience store.
- If a person confronts you and demands money or possessions, law enforcement officials suggest giving what is demanded and creating a safe distance.
- Lock your car when away and secure your belongings.
- Alert police to strangers or suspicious activity in your area.
- Don't leave valuables unattended.
- When you park, do not leave personal property and valuables (i.e. laptops, purses, GPS systems) in plain view.
- Do not leave the building at night alone, call someone to walk you to your car.

## **M. Armed Intruder**

### **1. Get Out:**

- Have an escape route and plan in mind.
- Leave your belongings behind.
- Keep your hands visible.

### **2. Hide Out:**

- Hide in an area out of the active shooter's view.
- Block entry to your hiding place and lock the doors.

### **3. Take Out:**

- As a last resort and only when your life is in imminent danger.
- Attempt to incapacitate the active shooter.
- Act with physical aggression and throw items at the active shooter.
- Call 911 when it is safe to do so.

## **N. Report a Crime**

You are strongly encouraged to report suspicious activity or crime in a timely manner to Duke Police at 9-1-1 or (919) 684-2444 or by using our online reporting option. Timely reporting of information assists in keeping Duke University & Health System safe and secure. You may also report non-emergency matters anonymously through CrimeStoppers, Silent Witness or the investigations unit.

## Reporting Options

### 1. When reporting a crime, please be ready to provide information such as:

- A brief description of what occurred
- Where the incident occurred
- When the incident occurred
- Whether the suspect(s) had a weapon
- Where and when the suspect(s) were last seen
- What the suspect(s) looked like
- Gender
- Race
- Age
- Height
- Weight
- Hair Color/length
- Clothing including shoes worn
- Facial Hair
- Tattoos, scars

Need a copy of a criminal report? Visit or contact Records Department at 502 Oregon Street, or call (919) 684-4602.

### 2. Online reporting for non-emergency incidents

To report non-emergency reports online, including thefts, vandalism and concerning behaviors (such as suspicious activity or inappropriate behaviors), visit Online Reporting, but remember --- if a crime is in progress, or an emergency, dial 9-1-1.

## O. Infectious/Communicable Disease - Outbreak/Epidemic/Pandemic

**Definition** - To avoid confusion on the type of public health situation the following definitions are used:

- **Outbreak:** a sudden rise in the incident of the disease and typically confined to a localized area or group of people.
- **Epidemic:** an outbreak of a contagious disease that is more severe and less localized. The disease spreads quickly and affects many people at the same time.
- **Pandemic:** a widespread epidemic of a disease that occurs over a wide geographic area and affects an exceptionally high percentage of the population.

The following guides are intended to minimize exposure, maintain critical services, sustain critical activities, protect assets, and return to normal operations as quickly as possible:

**1) Planning activities prior to an infectious and communicable disease outbreak**

Planning is the first step in preparing to manage the consequences of an Infectious and communicable disease outbreak. It can help to reduce the spread of disease, decrease the numbers of deaths and hospitalizations, help maintain essential services, and reduce the disruptions due to a disease outbreak. WCON guidance on communicable disease planning efforts, prior to an outbreak, is two-fold:

- a) Reduce illness and death due to a communicable disease among students, faculty, staff and the campus community;
- b) This plan will allow emergency operations, response and overall business continuity that maximizes our students' ability to complete their studies while minimizing the impact of disruption and economic loss.

**2) Communication Plan for Infectious Communicable Disease**

In the event someone at WCON is affected by an infectious communicable disease outbreak, WCON will work with DUHS/DRH media and communications for all communication with regards to preparedness, response, and dismissal. WCON will use the following methods of communication: individual emails, texts, phone calls, or via the college regular email system.

**3) If any individual has been diagnosed with an infectious and communicable disease at Watts College of Nursing (WCON), the following is a planning objectives list:**

- Provide essential guidance to each student.
- Provide essential tools and resources for academic continuity.
- Provide informational resources to the college to support awareness, health and well-being.
- Maintain essential functions and support services.
- Provide isolation/quarantine protocols.
- Provide vaccination locations on campus if needed.
- Provide support for students, faculty, and staff.

**For more specific information regarding COVID-19 please see Appendix A**

**P. Business Continuity**

By focusing on the development planning efforts needed to ensure that WCON's critical functions remain operational during disruptive incidents. Business Continuity is part of the Emergency Preparedness Education and Operations Plan (EPEOP) phase to the recovery stage. The administrative team is responsible for providing proper business continuity planning that improves the WCON's chances of minimizing losses from interruptions by keeping the college operation business running.

## **APPENDIX A – Emergency Contacts Information**

### **1) Students / Staff / Visitor Injuries**

Respond to injured and report incident:

#### **Within Medical Center:**

- MC Risk Management - (919) 684-3277
- Nights and Weekends - (919) 970-8001

#### **Outside Medical Center:**

- Duke Police - (919) 684-2444
- Exposure Hotline (biological, chemical, radiological) - (919) 684-8115
- Employee Occupational Health & Wellness (EOHW) - (919) 684-3136
- Poison Control - (800) 222-1222
- Corporate Risk Management - (919) 684-6226
- Workers' Compensation - (919) 684-6693
- Occupational & Environmental Safety - (919) 684-2794

### **2) Employee Work-Related Injuries/Illnesses**

- If emergency care is needed, go to a DUHS Emergency Department or call 911
- All work-related injuries/illnesses regardless of the severity must be reported to your supervisor/faculty.
- Obtain care for non-life-threatening injuries through EOHW. When EOHW is closed, employees may seek treatment at Duke Urgent Care or a DUHS Emergency Room.
- All work-related exposures to blood or body fluids are to be reported immediately through the Employee Blood/Body Fluid Hotline, (919) 684-8115 or 115 from a campus land-line phone.

**Employee Occupational Health & Wellness (EOHW) (919) 684-3136**

**Workers' Compensation - (919) 684-6693**

### **3) Watts Executive Leadership Team Emergency Contacts**

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## **APPENDIX B**

### **American Association of Colleges of Nursing (AACN) COVID-19 Guidelines**

#### **Academic Nursing Education Goals**

- To protect the health and well-being of faculty, students, and staff.
- Schools vary considerably in geographic location, size, and structure, and the recent surge in COVID-19 cases has placed some communities at very high or high risk.
- Schools may be more restrictive than local public health agencies require.
- Decision-making should be guided by what is feasible, practical, acceptable, and tailored to the needs of each community.

#### **Guiding Principle for Schools**

- The more an individual interacts with others and the longer that interaction, the higher the risk of COVID-19 spread.
- Until we have an effective treatment, vaccine, or achieve herd immunity (70-90% of the entire population having been infected) in the U.S., schools should maintain non-pharmaceutical interventions (NPIs) for the protection of faculty, staff, and students.
- Key NPI considerations for schools include: masking, low-density and social distancing, continuous hand hygiene, staying home when sick, cleaning and disinfecting, and heightened situational awareness. Consistent implementation of the entire suite of NPIs will reduce transmission of the virus.

#### **Assessment of Campus Risk**

Lowest Risk: Faculty and students engage in virtual-only learning activities and events.

- Lowest Risk: Residence halls closed where feasible.
- More Risk: Residence halls are open at lower capacity and shared spaces are closed (e.g., kitchens, common areas).
- More Risk: Small in-person classes, activities, and events. Individuals remain spaced at least 6 feet apart and do not share objects (e.g., hybrid, virtual, and inperson class structures or staggered/rotated scheduling to accommodate smaller class sizes).

- Highest Risk: Full-sized in-person classes, activities, and events. Students are not spaced apart, share classroom materials or supplies, and mix between classes and activities.

### **Alert Levels**

#### **Very High Alert:**

- Stay at Home Orders – Stay at home orders are in place, schools and non-essential businesses are to remain closed, and individuals are expected to practice self-isolation.

#### **High Alert:**

- State-By-State Reopening – Institutions and communities can operate low-density environments. Institutions are open, but there are significant prevention policies in place, which may include limitations on meeting sizes, enforced PPE equipment use, and selective quarantining/self-isolation for high risk, symptomatic, and virus-exposed individuals.

#### **Moderate Alert:**

- Protections in Place – Institutions and communities can operate moderate-density environments. Institutions are open and protective measures are still actively in place. The underlying threat of outbreak remains, but testing and prevention methods are robust enough to allow some policies to be relaxed.

#### **Low Alert:**

- New Normal – Institutions and communities can operate high-density environments. Once vaccines and/or treatments are approved for the coronavirus, prevention practices can be fully lifted. It is likely that even when immune protection is established, social interactions will remain changed for a duration of time and re-engineered processes and new technologies will persist, so long as they are functional.

### **Considerations for Gradual Resumption of Activities**

- Once a university decides to begin its gradual resumption of on-campus activities, they should be limited to those that require a person to be present.
- Any and all activities that can be accomplished at home via telework should continue to be done at home until local public health officials deems it safe to return to campus.
- Persons should only be on campus for the time necessary to accomplish required on-campus activities.

- Face coverings should be mandatory on campus except in very limited circumstances, cleaning procedures should be greatly augmented, and social distancing should remain the rule.
- Central to these guidelines is an understanding that some members of a community face a greater risk from COVID-19 than others.
- Faculty, staff, and students may need to seek accommodations or adjustments as warranted by their individual circumstances.

### **Cloth Face Coverings**

- Recommend and reinforce use of cloth face coverings among students, faculty, and staff. Face coverings should be worn as feasible and are most essential in times when physical distancing is difficult. Individuals should be reminded frequently not to touch the face covering and to wash their hands. Information should be provided to all students, faculty, and staff on proper use, removal, and washing of cloth face coverings.
- Note: Cloth face coverings should not be placed on anyone unable to remove the cover without assistance.
- Cloth face coverings are meant to protect other people in case the wearer is unknowingly infected but does not have symptoms. Cloth face coverings are not surgical masks, respirators, or other medical personal protective equipment (PPE).
- This section applies to campus settings and does not apply to students entering clinical settings where higher level PPE will be required.

### **Staying Home or Self-Isolating when Appropriate**

- Once back on campus, educate students, faculty, and staff on when they should stay home or self-isolate in their living quarters.
- Actively encourage students, faculty, and staff who are sick or who have recently had close contact with a person with COVID-19 to stay home or in their living quarters (e.g., dorm room). Develop policies that encourage sick individuals to stay at home without fear of reprisals and ensure students, faculty, and staff are aware of these policies. Offer virtual learning and telework options, if feasible.
- Students, faculty, and staff should stay home when they have tested positive for or are showing symptoms of COVID-19.
- Students, faculty, and staff who have had recent close contact with a person with COVID-19 should also stay home and monitor their health

## **Personal Protective Equipment for Clinical Experiences**

- Schools should be actively procuring, storing, and developing a plan for allocating PPE.
- Schools should plan for the costs for procuring additional supplies of PPE.
- Educational programs should be put in place for faculty, students, and staff on how to properly don, use, and doff PPE in a manner to prevent self-contamination.

## **Ensure Continuity of Education and Research**

Review plans for the continuity of teaching, learning, and research. Implement e-learning plans and distance learning options as feasible and appropriate.

- Maintain academic program requirements (credits and clinical hours) whenever possible and resist pressure to graduate students early, particularly when all requirements (both didactic and clinical) have not been fully met.
- Ensure continuity plans address how to temporarily postpone, limit, or adapt research-related activities (e.g., study recruitment or participation, access to labs), and eventually reopen in a manner that protects the safety of researchers, participants, facilities, and equipment.
- Use existing infrastructure and services (e.g., Blackboard, Skype, WebEx, Zoom) to support efficient transition of classes from in-person to distance-based formats. This may include using strategies such as faculty check-ins, recorded class meetings or lectures, and live class meetings.
- Use other student support services such as online library services, print materials available online, phone- or internet-based counseling support, or study groups enabled through digital media.
- Triage technical issues if faced with limited IT support and staff.
- Plan for the potential lack of student access to computers and the Internet at home or in temporary housing. Commit to ensuring web accessibility for all students
- Support diversity, equity, and inclusion initiatives to ensure engagement of all students throughout the pandemic.
- If, after extensive consultation with public health officials and with input from faculty, students, and staff, schools decide to resume in-person activities for students, it is important to consider flexibility for those who cannot or do not wish to return to school in the fall. Nurses by virtue of their chosen career are exposed to infectious agents and need to learn protective actions, therefore, students should be encouraged to return to their clinical settings if safety measures are in place.

### **Clinical Placements and Patient Interactions**

- Student nurses are valuable members of the healthcare team.
- Placements and level of involvement in the patient care arena is determined by school policies that consider well-established transmissibility data and morbidity/mortality data. We still lack critical data on transmissibility, morbidity, and mortality.
- Therefore, it may be advisable, in the interest of student safety, to limit student direct care of known or suspected cases of COVID-19 infection until better epidemiologic data are available. For now, other than limiting direct care of COVID-19 patients, clinical students should continue their roles as part of the care team.
- Areas of community spread need to consider options.
- Develop contingency plans should future restrictions on clinical placements occur.
- These plans may include the expanded use of simulation and virtual reality, telehealth, the use of online resources for teaching clinical care, and online group chat features.
- Simulation provides students with opportunities to practice their clinical and decision-making skills through various real-life situational experiences. Use of in-person instruction in simulation centers must include access to and appropriate use of PPE for all students, faculty, and staff, and social distancing should be maintained.

### **Clinical Placements and Personal Protective Equipment**

- Schools of nursing are encouraged to reach out to their clinical partners to discuss challenges with identifying clinical placement sites to optimize availability and equity in assigning students across schools.
- Schools of nursing are encouraged to consider non-hospital-based settings for expanding opportunities for student clinical placements. Long-term care and other rehabilitation facilities, home care, federally funded healthcare clinics, addiction treatment centers, and senior housing are potential settings for clinical placements.
- Additionally, day care centers, schools, and shelters may be considered in order to expand the number of potential training sites for students.
- Public health departments, the Medical Reserve Corps, the American Red Cross, and other National Voluntary Organizations in Disaster are potential partners that

not only provide students with a valuable learning opportunity but allow for students to safely participate in COVID-19 response activities.

- All of these student clinical placements must require the use of PPE and ensure that students and the faculty supervising them can access appropriate levels and amounts of PPE. Concerns are resurfacing regarding the potential shortage of PPE in the U.S. as the pandemic spreads, so schools should act now to procure sufficient supplies. Some schools are partnering with their engineering departments to provide plastic face shields through the use of 3D printers.

### **Emotional/Mental Health Support**

- Everyone is affected by the pandemic, and the academic nursing community is encouraged to follow the three C's of disaster response: Communication, Collaboration, and Cooperation. Working together, we can strengthen our contribution to the response effort, sustain business continuity, and build our resilience for future events. Schools of nursing are encouraged to remain vigilant of the emotional and mental health burden that this outbreak is creating on faculty, students, and staff, and should ensure that resources (both face to face and virtual) are available for anyone who needs support.

## **References**

- *Emergency or Crisis Management Plan, Duke School of Nursing*, <https://nursing.duke.edu/faculty-staff-resources/school-nursing-emergency-information-center/emergency-or-crisis-management-plan>
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- *National Center for Immunization and Respiratory Diseases (NCIRD)*, Identifying the source of the outbreak, July 1, 2020, <https://www.cdc.gov/coronavirus/2019-ncov/cases-updates/about-epidemiology/identifying-source-outbreak.html>
- *What to Do in an Emergency*, Duke University, <https://emergency.duke.edu/what-to-do/>
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