



American Red Cross National Nursing Committee

How the Red Cross is Helping People During COVID-19

Molly Dalton

During the coronavirus pandemic, life's emergencies don't stop — and neither does the work of the American Red Cross.

From coast to coast, Red Cross COVID-19 missions focus on supporting community efforts to help those impacted. In addition to various support missions that are unique from state to state, and

more than 80 feeding missions across the country, a Virtual Family Assistance Center is available to assist anyone who has lost a loved one. To find out what COVID-19 missions are happening in your community, [contact your local Red Cross chapter.](#)

[To learn what the Red Cross is doing to support those in need during the pandemic, visit here.](#)

Be a Hero — Become a Red Cross Volunteer

Molly Dalton

Would you like to be a true hero and help your community? Become an American Red Cross volunteer.

The Red Cross depends on our hundreds of thousands of volunteers to help us fulfill our mission of alleviating human suffering during emergencies. Volunteers help staff blood drives, teach people lifesaving skills like First Aid and CPR, respond to home fires in the middle of the night and so much more. Sign up today to join their ranks as a Red Cross volunteer and be part of the lifesaving work we do.

We need volunteers to staff shelter reception, registration, feeding, dormitory, information collection and other vital tasks. We have both associate and supervisory level opportunities available.

DISASTER HEALTH SERVICES SUPPORT NEEDED If you are an RN, LPN, LVN, APRN, NP, EMT, paramedic, MD/DO or PA with an active, current and unencumbered license, the Red Cross needs your support. Volunteers are needed in shelters to help assess people's health. Daily observation and health screening for COVID-19-like illness among shelter residents may also be required. RNs supervise all clinical tasks.

There are many ways people can get involved, and we are looking for diverse volunteers of all ages and skill levels. Visit redcross.org/volunteertoday to learn more about volunteer opportunities and how to submit a volunteer application.

Roles are also available for Certified Nursing Assistants, Certified Home Health Aides, student nurses and medical students. We need volunteers who can provide care as delegated by a licensed nurse in shelters. This could include assisting with activities of daily living, personal assistance services, providing health education and helping to replace medications, durable medical equipment or consumable medical supplies.

SHELTER HELP NEEDED There is a special need for people to support sheltering efforts. Because of COVID-19, the Red Cross is placing those needing a safe place to stay in emergency hotel lodging when possible. If hotel stays aren't possible, then the Red Cross will open traditional shelters.

[More information is available here.](#) Be sure to review the [CDC](#) guidance for [people who are at higher risk for severe illness](#), consult your health care provider and follow local guidance. Our number one priority is the health and safety of our employees, volunteers and the people we serve.



Red Cross volunteers in Iowa, August 2020 and Texas, April 2020. Photos by (L- R) Dennis Drenner, Scott Dalton, Dennis Drenner; American Red Cross

COVID-19: more than 6 million cases in US, follow these safety steps Molly Dalton

More than 6 million people in the United States have now been infected with the coronavirus. Public health officials say it's still critical to follow COVID-19 safety guidelines. The American Red Cross offers steps you can take, based on Centers for Disease Control and Prevention guidance. Be sure to follow guidelines from your state and local public health officials.

1. Stay home if you are sick. Call your health care provider before you get medical care, except if you need emergency medical care call 9-1-1.
2. Cover your coughs and sneezes with a tissue, then throw the tissue in the trash. Use the inside of your elbow if a tissue isn't available.
3. Continue to frequently wash your hands for at least 20 seconds, especially after you have been in a public place or after blowing your nose, coughing or sneezing. Use hand sanitizer with at least 60 percent alcohol when soap and water aren't available. Avoid touching your eyes, nose and mouth with unwashed hands.
4. Continue to [social distance](#) by staying 6 feet away from others and to wear [cloth face coverings](#) in public, especially if you are at high risk for serious illness from COVID-19 (over age 65 or any age with [underlying medical conditions](#)).
5. Practice social distancing if using public transportation. Limit contact when running errands. If possible, use drive-through, curbside pick-up or delivery services to limit face-to-face contact with others. Maintain a physical distance between yourself and delivery service providers during exchanges and wear a cloth face covering.
6. Stay connected with phone calls, video chats or social media. If attending a small gathering of family or friends, stay at least 6 feet away from people you don't live with.
7. Avoid crowded places and gatherings. If you are in a crowded space, wear a cloth face covering, especially if social distancing will be difficult.
8. If you decide to visit a nearby [park, trail or recreational facility](#), first check for closures or restrictions. If open, consider how many other people might be there and choose a location

where it will be possible to keep at least 6 feet of space between yourself and other people who are not from your household.

9. Headed to the beach or public pool? Whether you're in or out of the water, stay at least 6 feet away from people you don't live with. Wear cloth face coverings when you are not in the water. Wash your hands often or use hand sanitizer. Avoid sharing items, such as food, equipment, toys, and supplies, with people who don't live with you.
10. Planning to travel this summer? Find out if your [state government](#) will require you to quarantine for 14 days when you get home. If you do get sick, people with COVID-19 need to stay home until they are [no longer considered infectious](#).

Know the symptoms of COVID-19, which can appear two to 14 days after exposure. They include, but are not limited to, fever or chills, cough, shortness of breath or difficulty breathing, fatigue, muscle or body aches, headache, loss of taste or smell, sore throat, congestion or runny nose, nausea or vomiting, and diarrhea.

If you have symptoms of COVID-19 and want to get tested, call your health care provider first. Decisions about testing are made by state and local health departments or health care providers. You can visit your [state](#) or [local](#) health department's website to look for the latest local information on testing.

For more information, review [CDC guidance](#).

CORONAVIRUS SAFETY

Follow these easy steps to help prevent the spread of COVID-19.



Disinfect surfaces around your home and work.



Wash your hands for at least 20 seconds.



Sneeze or cough? Cover your mouth.

Perfect Time to Prepare Your Household for Emergencies

Molly Dalton

September – National Preparedness Month – is just around the corner, the perfect time to get your household ready for emergencies. We're also in the midst of what experts say could be a busy hurricane season and the American Red Cross urges you to get ready now.



Red Cross volunteer Lynnette Gralak looks out the window of her ERV in Cedar Rapids, Iowa, August 2020. Photo by Dennis Drenner/American Red Cross.

Because of COVID-19, getting prepared will look a little different than in other years.

Disasters won't stop, even during a pandemic. With that thinking in mind, the Red Cross has tips to help you.

[MAKE A PLAN](#) In light of the coronavirus, you may have to adjust any previous plans you made. You may need to leave your home quickly and travel to a safe place outside the affected area. If authorities advise you to evacuate, be prepared to leave immediately with your evacuation kit ("go bag" of emergency supplies).

- Plan now if you will need help leaving or if you will need to share transportation.
- Ask friends or relatives outside your area if you would be able to stay with them. Check and see if they have symptoms of COVID-19 or have people in their home at higher risk for serious illness. If they have symptoms or people at higher risk in their home, make other arrangements. Check with hotels, motels and campgrounds to see if they are open. Find out if your local emergency management agency has adapted its sheltering plans.
- Check with the [Centers for Disease Control \(CDC\)](#) and update emergency plans due to Coronavirus.
- Plan ahead for your pets. Keep a phone list of pet-friendly hotels/motels and animal shelters along your evacuation routes. Remember, if it's not safe for you to stay home, it's not safe for your pets either.

[BUILD A KIT](#) Assemble two kits of emergency supplies and a one-month supply of prescription medication. Start with this basic supply list:

- **Stay-at-home kit** (2 weeks of emergency supplies):

Include everything you need to stay at home for at least two weeks with items such as food, water, household cleaning and disinfectant supplies, soap, paper products and personal hygiene items.

- **Evacuation kit** (3 days of supplies in a "go bag"): Your second kit should be a lightweight, smaller version that you can take with you if you must leave your home quickly. Include everything you need to be on your own for three days:
 - Food and water
 - Personal hygiene items
 - Cleaning and disinfectant supplies that you can use on the go (tissues, hand sanitizer with 60% alcohol and disinfecting wipes)
 - Cloth face coverings for everyone in your household who can wear one safely. Cloth face coverings are not a substitute for physical distancing. Continue to keep about 6 feet between yourself and others in public. Cloth face coverings should not be placed on young children under age 2, anyone who has trouble breathing or is unable to remove it without help.
 - Infant formula, bottles, diapers, wipes and diaper rash cream
 - Pet food and extra water for your pet
 - Cash or traveler's checks
 - Important family documents such as copies of insurance policies, identification and bank account records saved electronically or in a waterproof, portable container
- **1-month supply of prescription medication**, as well as over-the-counter medications like cough suppressants and fever-reducing drugs and any medical supplies or equipment you need. Keep these items together in a separate container so you can take them with you if you have to evacuate.

Some supplies may be hard to get, and availability will worsen in a disaster, so start gathering supplies now.

[BE INFORMED](#) Have access to weather alerts and community notifications. Be sure that you can receive official notifications even during a power outage. Always follow the directions of your state and local authorities.

- Use the [Red Cross interactive map](#) to identify likely disasters in your area.
- Learn about your community's response plan for each disaster and determine if these plans have been adapted because of COVID-19.
- Find contact information for state, local and tribal [governments and agencies](#), and for [state emergency management agencies](#).

- Because of COVID-19, stay current on advice and restrictions from your state and local public health authorities as it may affect your actions and available resources and facilities.

[TAKE A FIRST AID AND CPR COURSE](#) online to learn what to do in case emergency help is delayed. Download the Red Cross Emergency App for instant access to weather alerts for your area and where loved ones live. Expert medical guidance

COVID-19 and Preventable Diseases

The global pandemic caused by COVID-19 has impacted all our lives in so many ways that it is difficult to sometimes focus on other areas. As we all adjust to our new realities and take the appropriate measures to flatten the curve and mitigate transmission of the virus, we must not lose sight of other risks which may be closer than we think.

With that in mind, the American Red Cross as part of the Measles & Rubella Initiative has been working with our partners to raise awareness of what could be one of the worst seasons of measles outbreaks in recent memory.

As a secondary impact of the global pandemic, immunization systems have been weakened in countries around the world. In efforts to slow the pandemic, preventative vaccination campaigns for other diseases have been postponed in numerous countries. As a result, it is estimated that more than 116 million children in 28 countries have not received the measles vaccine. In addition, a recent Pulse Survey designed to identify disruptions in routine immunization services due to COVID-19 shows that the impact on country-level systems is widespread. Of the 61 countries that completed the survey with country-level data, 52 (85%) indicated that the level of vaccination coverage has dropped since the start of the year. As immunization systems are strained, the number of children vulnerable to vaccine-preventable diseases continues to rise at an alarming rate. Health

and a hospital locator are included in the First Aid App in case travelers encounter any mishaps. These apps are available to download for free in app stores or at [redcross.org/apps](https://www.redcross.org/apps).

With the COVID-19 pandemic, planning ahead for potential disasters is more important than ever, so start preparing your household now and please stay safe.

James Noe, Sr. Program Officer, Measles & Rubella Initiative



Prince Osinachi receiving a measles vaccine during a measles & rubella immunization campaign in Nairobi, Kenya, 2018. His mother Lydia Odinga received a visit from Red Cross volunteer Felista Njenga, who convinced her to have him vaccinated at the local health center. "I volunteer because, as a mother, my desire is to have a healthier community free of diseases," Felista said. Photo by Juozas Cernius/American Red Cross.

experts are predicting that this situation will come to a head in the coming months as social distancing measures lessen and people begin to interact and once again transmit measles and other deadly diseases within their communities.

To shine light on this situation, the American Red Cross is mobilizing Nurse Advocates to meet with Congressional offices around the country. In August, Red Cross nurses

conducted virtual meetings with key lawmakers to inform them of the dire predictions and to offer the Measles & Rubella Initiative partners as resources to them so that they can learn more. U.S. leaders' support is needed now more than ever. Through this outreach it is our hope that lawmakers will be able to use the information to take decisive action to help the U.S. prevent and respond to these preventable deadly outbreaks.

COVID-19 is a serious health issue that requires proper attention and action, but as we deal with the pandemic we must also make sure that we are not ignoring other significant issues that put our families at risk. The Measles & Rubella Initiative is doing what it can to sound the alarm on this issue and as always appreciates the invaluable support that the Red Cross nurses bring to this work. Together we hope to mitigate the outbreaks and ensure that children everywhere remain happy, healthy, and measles free.

New MOU to Promote Resilience

I am delighted to announce the Memorandum of Understanding (MOU) between the American Red Cross and Fyera! Inc. and the Fyera! Foundation. The Fyera! organizations work closely with HeartMath Inc. and the MOU helps facilitate HeartMath's resilience training throughout the Red Cross.

I was looking for a way to give back to the dedicated Nursing Network Leaders for their first training in 2019. I asked Anne Naidoo Turner, DNP EL, BA, RN, CPHHA, HeartMath Certified Trainer and Red Cross Nursing and Health volunteer, to provide HeartMath training. Turner agreed and continues to support this work. Robert Browning, Co-Director for HeartMath Healthcare & Senior Master Trainer, and Sheva Carr, Heart Ambassadors CEO & Co-Director for HeartMath Healthcare graciously agreed to support Turner and integrate HeartMath training techniques throughout a two-and-a-half-day training.

HeartMath resilience techniques are evidence-based, easy to learn and many can be used "on the fly." The response from the nursing leaders was very positive. Some nurses used HeartMath tools during their shifts and reported that they found them very helpful. Several volunteers said they would like to learn more.

HeartMath Inc. is a nonprofit organization founded in 1991 to study the relationship between stress, emotions, and the functions of the heart and brain. They were particularly interested in self-regulation of emotions and resilience ([HeartMath/science](#)).

Their [website](#) states "Most of us have been taught in school that the heart is constantly responding to "orders" sent by the brain in the form of neural signals. However, it is not as commonly known that the heart actually sends more signals to the brain than the brain sends to the heart." Stress can lead to erratic heart rhythms that inhibit thinking, reasoning and decision-making. HeartMath tools and techniques are designed to foster coherent heart rhythms that increase personal resilience and cognitive function.

HeartMath training has been delivered across sectors –corporate, healthcare organizations, first responders, government, military and schools.

Linda MacIntyre, PhD, RN, PHN

Training goals addressed employee engagement, health, satisfaction/retention, change management, leadership/team synergy, quality/safety, productivity, resilience/stress management and wellness ([HeartMath](#)). Although HeartMath offers devices and technology, these are not required to learn the techniques.

The COVID-19 pandemic has increased awareness of the need for well-being and resilience. Relaxation alone is not enough. Individuals need resources to help renew their energy, sometimes during essential, but stressful work.

Browning and Carr were particularly interested in working with the Red Cross to support individuals affected by the Paradise Fire; however, they did not have a relationship with the organization at that time. During the April 2019 training, they met Anne Reynolds, who at that time led disaster recovery efforts. They were later introduced to Lisa Bennett, Executive Director, Disaster Services Workforce Readiness. Through the generosity of Browning and Carr's organizations, both Reynolds and Bennett became HeartMath Certified Trainers. Reynolds, Browning and Carr collaborated to provide additional grief support through the [Red Cross Virtual Family Assistance Center](#). Bennett is bringing HeartMath techniques to Disaster Cycle Services.

I am incredibly grateful to Kaiser Permanente for covering the cost of training for Richard MacIntyre, PhD, RN, FAAN, Professor, Samuel Merritt University & Red Cross Senior Nursing Consultant, Yvette Marie Miller, M.D., ABIHM, Executive Medical Officer and myself. I deeply appreciate Browning and Carr for their time, dedication and commitment to help the Red Cross further its mission.

A small group of Red Cross Resilience Instructors are available to provide virtual resilience training. This group is developing processes to request and deliver virtual training by HeartMath Certified Instructors free of charge within the Red Cross. Carr oversees a group of Heart Ambassadors and several are interested in becoming Red Cross volunteers to help deliver virtual resilience training for the Red Cross. Please contact RedCrossNurse@redcross.org for more information.

An Academic Service Learning Volunteer's Experience Kathryn Booth, MSN, RN, CNL

As a registered nurse currently working on my Doctorate of Nursing Practice (DNP) in Advanced Public Health at Rush University in Chicago, I am fulfilling my clinical requirement while gaining public health experience through Academic Service Learning (ASL) at the American Red Cross. I have been an

ASL volunteer since May. The American Red Cross serves as my clinical placement for the program; roughly half my time is spent (virtually) with National Headquarters and the other half is spent at the Greater Chicago Chapter.

Preparation for my ASL experience started last year. To confirm my clinical placement with Red Cross through Rush University's College of Nursing, a contract had to be prepared and reviewed. My advisor arranged a meeting with Red Cross Chief Nurse Dr. Linda MacIntyre and myself about eight months prior to my May start date to ensure this would be a good match. We followed up again two months prior to the start to confirm we were all still on the same page. Since May, I've been working on projects that contribute to the Red Cross' mission both nationally and locally.

I participated in a National Nursing Committee meeting, focusing on the Red Cross Chief Nurse initiatives at the system level and participated in sub-committee meetings discussing strategies to fulfill Red Cross goals across the different business lines. COVID-19 has obviously reprioritized some projects and it has been inspiring watching Disaster Health Services volunteers offer to help Biomedical Services, where the need has grown immensely. With help from leaders at National Headquarters, I am working on an independent self-study package for nursing students about blood donation and the importance of blood donor diversity. It includes pre- and post-test assessments and learning activities that can be done independently or shared in discussion with nursing faculty.

One meaningful activity I undertook that helped inspire me for that project was volunteering as a Blood Donor Ambassador at a local blood drive. The COVID-19 pandemic can make public volunteering or blood donation seem risky, but

volunteers and staff were diligent in ensuring safety protocols were followed - all chairs and stations were at least six feet apart, every station had hand sanitizer and extra gloves and everyone was temperature screened. As a nurse, it can sometimes feel like you're not giving your fullest potential when you're screening temperatures and asking donors how they're feeling... but as a nurse, a lot of information can be gleaned in that quick interaction, plus you're directly setting the stage for the donor's entire experience with competence and professionalism.

Some donors were apprehensive or nervous about being out during the pandemic. Some had questions or concerns. Some were relaxed and knew the process better than I did! I found that there was so much that could be assessed in those first few moments: Did someone take public transportation or did they drive their own car? Was there a language barrier when reviewing the questionnaires? Was there a barrier to downloading and navigating the blood donor app? Did donors come with support or alone? Considering the Social Determinants of Health and health literacy from a nurse's quick assessment can guide how they interact with a donor to make their experience less stressful and more rewarding. [Here you can learn more](#) about the need for Blood Donor Ambassadors [and for other urgently-needed volunteer positions](#). It's an excellent way to stay involved and meet some great people in your community.

Some of the activities I created for the blood donation self-study package build on considerations arising from these assessments: how can we be better prepared to answer questions at a drive; how can we communicate the importance of blood donor diversity; how can we educate someone about aspects of deferral without deterring them from future donations? Thinking about what our donors experience can help us improve their experience and engagement so that they'll want to return and will share their good experience within their communities.

While COVID-19 has made some of the local portion of my clinical work challenging, I've still been able to engage with an amazing group of

devoted and passionate Red Crossers. We've had virtual meetings with volunteers; our regional CEO Celena Roldan gives updates with a needed dose of positivity. It's also an opportunity for volunteers to "see" one another and introduce any new Red Crossers to the group. Meeting virtually has been an excellent way to still feel connected when we're apart.

Working locally as a Blood Donor Ambassador, I've



met some pretty great folks and learned more about what's going on at the local level. For example, our region has

recently been realigned and combined with a neighbor region. So we're ensuring workflows and communications are streamlined with respect to each region, instead of just taking over one or the other.

An external partnership I've been able to make is with the American Society of Clinical Pathology (ASCP; headquartered in Chicago). The ASCP has been working with the American Association of Blood Banks (AABB) to help educate communities

on the critical importance of blood supply and blood donor diversity. Read more about their partnership [here](#). In partnership with ASCP, we'll be holding a virtual blood drive via a Red Cross *SleevesUp* campaign to coincide with their annual meeting conference. A *SleevesUp* campaign is an easy way to educate and encourage your colleagues, friends, and family to donate blood. Learn more [here](#).

The next project for my Red Cross ASL volunteer experience will involve assessing workforce resilience. My interest in resilience was inspired by working in the Caribbean on the island of Sint Maarten. The resilience a community must build to be able to endure annual hurricanes and tropical storms is remarkable. After a natural disaster, communities have a way of uniting in a way I've never seen in any other setting. While I've always been passionate about resiliency, I have a newfound respect after seeing what we've all faced through COVID. We've been helping our communities, but also each other. Red Cross workers need to have personal resilience to effectively meet community needs and I'll focus on this in my project.

If you've been able to build resilience in yourself, your family or your community during these difficult times, I'd love to hear from you! Email me at Kathryn.booth@redcross.org.

Youth and Young Adults Volunteer Across Red Cross Lines of Service

Himashi Liyanarachchi, American Red Cross National Youth Council

Through volunteer opportunities including Red Cross Clubs, the National Youth Council and local leadership positions, youth and young adults proudly make up about 15 percent of American Red Cross volunteers. With more than 800 Red Cross Clubs now active across the country and more than 43,000 youth and young adult volunteers, young people aged 13 to 24 play a significant role in achieving the Red Cross humanitarian mission at the local and national levels.

Alongside their peers, students are able to address the five lines of service by conducting various interesting and engaging service activities on and off campus. *Sound the Alarm*, an event where volunteers install free smoke alarms, encourages youth to engage in Disaster Cycle Services, as they raise awareness for home fire safety and

preparedness.

Many Red Cross Clubs have contributed to Biomedical Services by holding successful blood drives at their schools and community centers. They have supported International

Humanitarian Law (IHL) and our military members through Service to the Armed Forces. Some Red Cross Clubs have even made impacts on an international level with activities such as *Vaccinate A Village*, in which volunteers fundraise and raise awareness as Measles & Rubella



Another way to help: after recovering from COVID-19, 17 year old Ethan Hiew of St. Paul, MN donated convalescent plasma.

Initiative advocates.

The International Humanitarian Law Youth Action Campaign (IHL YAC) encourages youth and young adults to learn about the rules that govern modern warfare and educate their peers and participate in International Services. This year, through IHL YAC activities, they were able to collectively reach thousands of individuals and spoke with members of the International Committee of the Red Cross, U.S. Department of Defense and U.S. Congress.

Throughout the year, youth and young adults engage in Training Services using EDGE, a source that supports all internal staff training and course management for the American Red Cross. They also present to their communities after training to teach courses such as *Hands-Only CPR*, *The Pillowcase Project* and *Prepare with Pedro*, all programs promoting preparedness skills, especially for younger audiences.

Despite the global coronavirus pandemic, youth and young adult volunteers have continued to make an impact on their communities.

Whether it is by conducting Red Cross Ready webinars, attending the IHL YAC Virtual Summit, or continuing Red Cross Clubs in a virtual setting, the youth and young adults of the American Red Cross continue to effectively contribute to the Red Cross mission, inspiring their peers and community to take action as well. For more information visit our [website](#) and view our [Activity Guides](#) for more ways youth and young adults can get involved!



A Hands-Only CPR event was held at Pine Ridge High School's Health Expo in Deltona, FL. They taught 208 students and gained 66 new members. *Note: This photo was taken early in 2020, prior to COVID-19 being declared a pandemic and prior to guidance recommending social distancing and masks.*

The nomination period for national awards, including the Susan Hassmiller Nursing Award and the Ann Magnussen Award, is now open. Please consider submitting a nomination; *the deadline for both is September 28*. You can start now by learning more about these awards, their prerequisites, and the nomination process on the [Exchange](#). Questions? Contact RedCrossNurse@redcross.org.

Volunteer Services Diversity and Inclusion

Linda MacIntyre, PhD, RN, PHN, Chief Nurse

Humanity is the first [Red Cross fundamental principle](#): “The International Red Cross and Red Crescent Movement, born of a desire to bring assistance without discrimination to the wounded on the battlefield, endeavours, in its international and national capacity, to prevent and alleviate human suffering wherever it may be found. Its purpose is to protect life and health and to ensure respect for the human being. It promotes mutual understanding, friendship, cooperation and lasting peace amongst all peoples.”

To support this humanitarian mission, American Red Cross National Headquarters Volunteer Services is engaged in four diversity and inclusion



(D&I) workstreams:

- Increase recruitment activities geared towards diverse audiences and recruitment of new diverse volunteers
- Increase the number of volunteers reporting demographic information
- Increase the number of D&I committees with all committees implementing their D&I Plan
- Foster a culture of inclusion and belonging and support the process to assess organizational D&I health for the volunteer workforce

Nursing and Health leaders are supporting the fourth workstream, fostering a culture of inclusion and belonging and helping to assess the organizational diversity and inclusion health of the volunteer workforce. Considerations for this work include the following:

- Changing culture takes time
- Focus on Red Cross Fundamental Principles
- Engage volunteers, field and Subject Matter Experts in the process and in critical steps

Donna Mazyck, MS, RN, NCSN, CAE, Executive Director of the National Association of School Nurses and National Nursing Committee Chairperson stated that “People want to see people like them and belonging comes from meaningful

work.” One project associated with this work is to collect volunteer stories and share these widely. More information will be forthcoming; in the meantime you can send comments and stories to RedCrossNurse@redcross.org.

Bob Seitz, Nurse Expert on the Scientific Advisory Committee

Laurie Willshire, MPH, RN

If you are reading this article, there’s an excellent chance that you’ve taken one or more American Red Cross training courses on how to respond in an emergency, whether it’s in a medical setting or in the community. Did you know that there’s a nurse who spends a significant amount of time ensuring that Red Cross course content reflects current scientific evidence and best practices?



So how did he reach this point in his career?

Perhaps the seeds were sown when he took Red Cross First Aid as a Boy Scout or when he later taught Red Cross CPR. Perhaps it took root when he volunteered with his local fire department back in 1978, which led to him working as an EMT and then a medic with the ground and air medical industry. After many years, he still felt

he could do more if he could increase his knowledge and ability to care for people, so he went back to school and became a registered nurse in 1998. He continued to serve on helicopter flight crews, this time in a dual role as a medic and a nurse, and found that being a nurse expanded his understanding of the critical care aspects and his ability to provide medical care to his patients. In 2000, he joined the faculty at University of Pittsburgh, where he has been able to merge his commitment to education with his skill in teaching. He is currently an assistant professor in the Emergency Medicine Program of the School of Health and Rehabilitation Sciences. As he says, “I’ve traveled the world, but Pennsylvania is home.”

S. Robert “Bob” Seitz, MEd, RN, NRP, is a long-time member of the Red Cross Scientific Advisory Council (SAC), and currently serves as vice-chair of the SAC’s First Aid Sub-Council. According to the Red Cross, “The American Red Cross Scientific Advisory Council is a large panel of nationally recognized experts drawn from a wide variety of scientific, medical, and academic disciplines. This expert guidance ensures that Red Cross practices and recommendations align with the latest evidence-based knowledge in science and medicine.”

As vice-chair of the First Aid Sub-Council, Bob Seitz ensures members of the Sub-council have what is needed to fulfill the mission: making sure Red Cross materials and guidance reflect the latest research and best practices in all aspects and levels of first aid, from self-care to lay response to Emergency Medical Services or other health professionals’ response. He works with his fellow Sub-council members to identify knowledge gaps and key questions that have not already been answered by experts. Seitz and the other Sub-council members perform extensive literature searches and stay current with the latest guidance from the International Liaison Committee on Resuscitation (ILCOR). This helps the Sub-council achieve its goal of increasing information access and providing rapid updates to Red Cross training content that reflect changes in the science, rather than focusing on the traditional five-year cycle for revising Red Cross materials.

Seitz was asked to join the Scientific Advisory Council in 2007 and has high praise for this group and its collaborative efforts. He strongly believes that the SAC increases the benefit of what the Red Cross does to serve the community and the general public and says that he is “very humbled” to be a part of this group of individuals.

Seitz has found that being a nurse is an asset in his role as a SAC member, and now as a Sub-council vice-chair. He points out that nursing traditionally has focused on a holistic approach to patient care, with nurses not only meeting a patient’s needs for the physical aspects of an illness or injury, but also addressing psychological and spiritual components. This well-rounded approach to addressing the patient in an all-inclusive manner is a hallmark of the scope of care that nurses provide. While the

SAC seeks to identify and address specific questions from an evidenced-based position, Seitz promotes a holistic consideration as well.

Seitz shared some thoughts about the challenges facing nurses today: “Increasing patient care loads, the expanded use of patient care technicians in place of nurses, ever-increasing documentation requirements, and greater automation through technological advances reduce opportunities for nurses to provide direct patient contact and care, particularly outside of the critical care environment. This has the potential to decrease

Nursing’s relevancy and sideline our ability as nurses to meet the patient’s physical, mental and emotional needs from a holistic position.”

As he says, “We should never forget why we are nurses – for the patients and communities we serve. It’s easy in this day and age to lose focus. We must act as a profession and remember why we are here and what we are meant to do.”

To learn more about the American Red Cross Scientific Advisory Council and its research, go to <https://www.redcrosslearningcenter.org/s/science>.

A Thank You to Jean Waldman Shulman, Nursing Historian and Scholar

Nancy McKelvey, MSN, RN, Former Chief Nurse

For more than two decades, Jean Shulman, RN has been educating, inspiring and entertaining us with American Red Cross history, especially Red Cross nursing history and nurses. Tracking Jean’s Red Cross tenure provides an exceptional example of the mutual benefits and value that volunteer service brings to the individual and the recipient(s) of the service, whether that means individuals, an organization or a community.



Jean Shulman (L) and former Chief Nurse Nancy McKelvey with Jane A. Delano Memorial in Red Cross Square at National Headquarters.

After nursing school at Johns Hopkins and prior to coming to the Red Cross, Jean had led a busy life as wife of a physician and medical school dean, rearing their four children, working at the hospital and being involved in many and various community activities. In addition, she went back to college and earned a degree in history, which had always been a passion of hers.

Jean’s Red Cross volunteer service began in 1994 after she and I reconnected at our 30- year Johns Hopkins Hospital School of Nursing reunion. Jean’s husband had recently died and her youngest daughter was away attending college. When Jean mentioned she was looking for some community involvement, I told her the Red Cross National Headquarters had many options and that I was currently looking for someone to volunteer in my office. At the time, I was working in Human Resources as Wellness Coordinator with primary responsibility for screening, advising and

monitoring the health of International delegates and Service to Armed Forces (SAF) contract employees and managers stationed out of the U.S. She accepted my offer, but stated she just wanted some routine responsibilities, like filing. **What a journey followed that initial filing experience!**

Soon after she began her “mostly filing position” at Red Cross, Jean moved with me to the recently reinstated national headquarters Office of Nursing, then headed by Chief Nurse Cynthia Vlasich. She began volunteering almost full time, helping administer the Nurse

Enrollment Program and answering the historical inquiries that were directed to the Office. Many of the inquiries were prompted by a deceased nurse’s relative finding the Red Cross Nurse badge along with the notice that “The nurse, relative, or administrator of the estate, should return the badge to National Headquarters or the nurse may choose to be buried with the badge.” The returned badges were frequently accompanied by a request for more information about the nurse’s Red Cross involvement.

Responding to these inquiries was no easy task in the days before digitized records and the existence of the internet, but Jean became adept at interpreting the more than 300,000 enrollment cards and using the already outdated microfiche machine. She familiarized herself with the 1922

Lavinia Dock, et. al. *History of American Red Cross Nursing* and Portia Kernodle's book from 1949, *The Red Cross Nurse in Action: 1882-1948*, as well as collecting an extensive personal nursing history library. She discovered that the *American Journal of Nursing* had included a regular Red Cross column and learned that the U.S. National Archives, located 45 minutes away in Maryland, held much of the Red Cross archival material, where she spent hours ordering and waiting for the numbered boxes. I believe these became her foundational source materials in the early days, but soon she would expand her scope.

One day, Cynthia asked Jean to follow up on a fax requesting information about a WWI Red Cross nurse named Agnes Von Kurowsky. Jean faxed back the nurse's Red Cross enrollment number and the places and dates where Agnes had served. Almost immediately, she received a follow up fax that included a "Shepperton Studios, England" logo and Richard Attenborough's name. This was only the beginning of an exciting adventure that resulted from Jean's historical research abilities and interests.

It turned out that the inquiry related to gaining information for the film *In Love and War* that was to be produced and directed by Richard Attenborough. Specifically, the initial requests were made to help define the character of Agnes Von Kurowsky (to be played by Sandra Bullock), a Red Cross nurse who was said to be Ernest Hemingway's inspiration for the romantic interest in his classic, *A Farewell to Arms*. Although the initial queries related to Von Kurowsky, nurses and nursing, Jean's responses demonstrated broad knowledge of the time period and the Red Cross that would prove helpful to several of the film's departments including script, costumes and art/props. For example, I recall Jean providing a full set of the specifications for making a Red Cross jeep and obtaining a period-specific Hershey bar wrapper.

Several months after the first request, Jean received a call from her film contact who inquired meekly, "Do you mind if I ask how old you are?" Jean assumes they may have feared she was in her 80's or 90's and knew the information first-hand. When told she was 50ish, Jean's contact said with

relief that Richard Attenborough would like to meet her when he was in New York or Montreal and that tickets would be at the airport for her. When Jean met Lord Attenborough, he acknowledged the research she had been doing and, much to her amazement, he asked if she would consider continuing on location with them during filming of the movie. Subsequently, Jean spent months on location in Italy, England and Montreal as a volunteer "Technical Advisor." Along with Attenborough and stars Sandra Bullock and Chris O'Donnell, Jean even had her own named director's chair.

While on location, Jean provided ongoing technical information and advice. She tells a story about the day that Attenborough was directing Bullock to sit on O'Donnell's bed. Without thinking, Jean let out an involuntary gasp and told him, "That would never have happened!" The director listened. Jean was also responsible for bandaging and even has a cameo appearance in a surgical scene.

After *In Love & War* was completed in 1996, Richard Attenborough made a donation to the American Red Cross in Jean's name; it was designated to be used for Red Cross nursing history. Conveniently, the donation coincided with the organization's plans to establish a Red Cross Museum at National Headquarters and helped facilitate a decision to make the Nursing Room the first exhibit space to be developed.

Many who had an opportunity to visit the museum will recall the room's centerpiece, a large glass cabinet with hundreds of nurse badges surrounding the poster of a Red Cross nurse cradling a wounded soldier. Jean recalls Red Cross President Elizabeth Dole being moved to tears the first time she saw the exhibit. The room also displayed Jane Delano's and other Red Cross nurse leaders' artifacts and uniforms, as well as the iconic pictures of the Red Cross Town & Country Nurses. Jean worked side by side with the volunteer directors and the curator



Jean had a cameo appearance in the movie. All the nursing uniforms were based on a WWI American Red Cross nurse uniform.



Jean in the Red Cross Museum (1997-2005) by a wall of Red Cross Nurse badges and a poster from 1918.

from museum conception to actualization, including locating pertinent artifacts, identifying photos and researching and writing about the activities of identified nurses whose badges were included on the centerpiece.

When the organization hired Steven Shulman as

their first museum Executive Director in 1998, Jean's involvement with the museum and historical collections intensified as the museum's space and scope of activities were expanded. Working at the museum, she continued to have a focus on nurses and nursing. Jean and Steven Shulman married and worked together on Red Cross history for a few years.

After the museum was closed in 2005 because of the organization's financial position, the Shulmans moved to Hollywood, Florida where Jean continued combining her historical interests with volunteer service. She volunteered with the Holocaust Documentation and Education Center, transcribing testimonies from Holocaust survivors' audio recordings. In addition, she did research on Florida Public Health Nurse pioneers for Professor Christine Ardan who was writing her dissertation and has recently published an award-winning book, *The Public Health Nurses of Jim Crow Florida*. During the course of her historical investigations, Jean made note of many Red Cross nurse stories, notably about the contributions of African American nurses and about nurse involvement during the Spanish influenza epidemic.

In 2013, the Shulmans returned to Washington, D.C. when Steve began a new job as the Executive Director of Cultural Tourism D.C. and Jean began increasing the time she spent on Red Cross history, with a special interest in the WWI era.

Spanning more than two decades, Jean's volunteer work in the Chief Nurse's Office assisted the Chief

Nurse and the National Chair of Nursing in highlighting the importance of nurses to the Red Cross. She provided detailed information about Red Cross nurses and their historical involvement, which showcased the important contributions of nurses and their potential to further the Red Cross mission. Jean has contributed many articles about Red Cross nurse leaders and nursing history for the Red Cross National Nursing Committee's newsletter, *Nursing Matters, Past and Present*, helping to document Red Cross nurses' important historical contributions and to bring them forward into the present. She also was able to find wonderful historical images of Red Cross nurses to illustrate her articles. Jean's newsletter articles highlighted, celebrated and made known the richness, relevance and forward-looking contributions of Nursing's past. Vivian Littlefield, who chairs the committee responsible for the newsletter's publication, said "I will forever be grateful for Jean's knowledge and skills as well as her dedication and commitment to make the *Nursing Matters, Past and Present* newsletter successful and what Nursing was and is known."

In recent years, not only has Jean written newsletter articles, but she has continued to help respond to historical inquiries. Susan Watson, Red Cross Archivist and Manager of Historical Programs & Collections commented, "Jean's work is amazing. To say that she conducts historical research or responds to historical inquiries doesn't adequately cover what she does. I am fascinated watching the process she uses to solve a complicated, obscure question. It's like magic!" Susan commented that Jean's passion for history and her institutional memory, together with her knowledge of sources and historical research methods are what lead people who request information to respond with comments such as this recent one: "Thank you seems so inadequate, but thank you very much. You have helped to make his story begin to come to life for him."

Jean has announced her retirement from the newsletter committee and from regularly writing nursing history articles for *Nursing Matters, Past and Present*. She and her articles will be greatly missed. It is with deep gratitude and appreciation that we have had a chance to learn from a master historian, committed scholar and nurse colleague.

WGU Scholarship Available to Red Cross Employees and Volunteers

Did you know that Western Governors University offers special benefits to Red Cross employees and volunteers? Classes start the first of every month, so give them a call when you are ready to begin!

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degree programs, including nursing/health professions, business, IT or teaching. Please visit WGU.edu/redcross for more information.

The Red Cross does not provide endorsement of academic institutions, but works with organizations to share opportunities with Red Cross employees and volunteers.

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Candace Roosevelt, MAN, MBA

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For more information, please contact Gift Planning Officer, Candace Roosevelt at 617-306-3875 or candace.roosevelt@redcross.org.

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Sometimes people think bequest gifts have to be very large to be meaningful. Nothing could be

AMERICAN RED CROSS National Nursing Committee Heritage Committee Members: Vivian Littlefield, Chair; Elizabeth Kazmier, Editor; Committee Members: Molly Dalton; Bill Darr; Donna Dorsey; Marie Etienne; Linda MacIntyre; Candace Roosevelt; Cheryl Schmidt



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Thank you!