Happy Nurses Week!

Thank you for your amazing service and dedication over this past year. Your response to the fall disasters that kept on coming was unprecedented. You understood that the needs on the ground dictated response efforts. You responded by deploying to the scene, working remotely or locally to ensure that programs and services continued in communities nationwide.

We learned valuable lessons. There is an ongoing need for health and mental health professional leaders with Red Cross disaster experience. The many new volunteers who responded to the call for health professionals through direct deployment networks can help meet that need. Nurses and other health professionals who were not able to respond due to timing, needs on the ground or other factors can prepare now.

One nurse who deployed to a disaster returned enthusiastic about her experience. She compared her actual work to “CNA (certified nurse assistant) work.” I value the work of certified nurse assistants and I also have no doubt that this RN used her assessment skills and knowledge seamlessly to serve individuals affected by the disaster. My hope is that all of Red Cross’ nurse volunteers continue to recognize and value their knowledge and skills. This value is not dependent on a particular action or clinical skill; rather, the value is in the ability to assess and respond appropriately. A service-minded attitude is important in volunteer work. It is also important to recognize one’s expertise. If we are not aware of our assessment skills and the knowledge that guides our actions, our scope and service may be limited.

During the hurricanes, floods, and wildfires the need for blood products continued. About 38% of the population is eligible to donate blood and yet only about 10% donate. As nurses, we can collaborate with other health professionals to donate and/or increase awareness about the need for diverse blood donors.

Case management needs continue – in Disaster Cycle Services, International Services and Service to the Armed Forces. Many health professionals are unaware that Health Information Portability and Accountability Act (HIPAA) provides for the release of information to the Red Cross for individuals affected by disasters and for emergency communication to the military. You are helping change this by increasing awareness and advocating for individuals and families so that they can receive services.

While great strides have been made to reduce the number of deaths from measles and rubella, more than 315 children die daily worldwide from vaccine-preventable diseases. You are educating communities about the Measles and Rubella Initiative (M&RI). Nurse leaders are educating legislators about the M&RI and advocating for continued funding for the M&RI partner, Centers for Disease Control (CDC). You have also donated financially to support the effort through Nurses Supporting the Eradication of Measles & Rubella.

Nurses help mitigate the loss of life and suffering. We are more effective when we work together. Our knowledge, skills and attitude can effect positive change. This begins with an attitude of respect, openness and a holistic approach. You ask questions, listen and are open to challenging your perspectives. You seek evidence-based knowledge and develop skills so that you can respond with confidence. Your actions are solution-based and you maintain a focus on the overall purpose. I am
New Red Cross Survey Shows Many Americans Unprepared for Home Fires

Molly Dalton

According to a new survey by the American Red Cross, many people misjudge their ability to react to a fire in their home and miss taking critical steps to keep their loved ones safe.

In fact, 40 percent of people believe they are more likely to win the lottery or get struck by lightning than experience a home fire. Yet, home fires are the most common disaster people face in this country – the majority of the nearly 64,000 disasters the Red Cross responds to every year.

**MANY PEOPLE MISTAKEN ABOUT HOME FIRE FACTS**

The Red Cross survey found that many Americans have a false sense of security about their family’s ability to escape a home fire. More than three-fourths (80 percent) of people surveyed believe everyone in their household knows what to do when a smoke alarm goes off. But less than half of those surveyed have a home fire escape plan in place. And only half of the families that do have a plan have actually practiced it.

Home fire experts say that people have as little as two minutes to escape a burning home. However, the survey showed nearly 60 percent of people mistakenly believe they have much more time than is realistic.

**MORE SURVEY RESULTS**

- Even though many Americans admit to actions that could contribute to a home fire, only one out of four (27 percent) think that they are likely to experience a home fire in their lifetime.

- About 40 percent of people have forgotten to turn off a stove or oven, even though cooking is the leading cause of home fires and home fire injuries.

- More than one-third (34 percent) of people have used a stove, kerosene lantern or space heater to warm their home. Heating equipment is involved in one of every five home fire deaths.

- Some progress is being made. More people are replacing batteries (a 9 percent increase vs. 2015) and testing to make sure their smoke alarms are working (an 11 percent increase vs. 2015).

- Americans overwhelmingly believe that smoke alarms can save lives, yet one out of ten (12 percent) people have had to give up buying other essentials for their families to purchase one.

These findings highlight just how critical the Red Cross Home Fire Campaign is in communities across the country. Launched in 2014 to save lives and help end home fire tragedies, the Red Cross and its partners have already installed more than 1.1 million free smoke alarms and reached 1 million children through preparedness programs. These efforts are already credited with helping to save 416 lives. Learn more.

**Supplemental Information about Survey Methodology**

The national public opinion survey was conducted for the Red Cross in August 2017 using the research firm Issues & Answers. The study was conducted among a national sample of 604 American adults. The total sample is balanced to be representative of the US adult population in terms of age, sex, geographic region, race and education. The margin of error for the total sample is +/- 4 percent.

The American Red Cross and HIPAA Disclosure (Surprise?!)  

Sharon Stanley, PhD, RN, SAF Nurse Consultant

A recent Red Cross webinar hosted by the Association of Public Health Nurses (APHN) presented information on how health care systems have the ability to communicate with the American Red Cross. The materials associated with that presentation are found on the Service to Armed Forces (SAF) intranet site (which requires Exchange access) and may provide some surprises to even our Red Cross healthcare professionals. Included on that website are a PowerPoint...
When a military family experiences a crisis, the American Red Cross relays urgent messages to service members stationed anywhere in the world, including on ships at sea, in embassies and in other remote locations. This service is provided 24/7, 365 days a year through the Hero Care Center. Sometimes, though, those communications are delayed because of a lack of understanding on the part of the health care provider or system around what HIPAA does and does not allow.

The U.S. Department of Health and Human Services’ [FAQ about HIPAA](#) explains (emphasis added):

“The HIPAA Privacy Rule permits a covered doctor or hospital to disclose protected health information to a person or entity that will assist in notifying a patient’s family member of the patient’s location, general condition, or death. See [45 CFR 164.510(b)(1)(ii)](#). The patient’s written authorization is not required to make disclosures to notify, identify, or locate the patient’s family members, his or her personal representatives, or other persons responsible for the patient’s care. Rather, where the patient is present, or is otherwise available prior to the disclosure, and has capacity to make health care decisions, the covered entity may disclose protected health information for notification purposes if the patient agrees or, when given the opportunity, does not object. The covered entity may also make the disclosure if it can reasonably infer from the circumstances, based on professional judgment, that the patient does not object. See [45 CFR 164.510(b)(2)](#).

Even when the patient is not present or it is impracticable because of emergency or incapacity to ask the patient about notifying someone, a covered entity can still disclose a patient’s location, general condition, or death for notification purposes when, in exercising professional judgment, it determines that doing so would be in the best interest of the patient. See [45 CFR 164.510(b)(3)](#).”

YOUR assistance is needed in getting the word out about the Red Cross HIPAA disclosure and here is how you can help do that. Using the materials that are already provided on the SAF intranet site you can:

1. Get the word out to health care providers in your community:
   - hospital discharge planners and case managers
   - nursing and physician organizations
   - community clubs that include health care professional membership
   - funeral directors

2. Reach out to the health community through:
   - live group presentations
   - webinars or conference call meetings
   - social media sites, email distribution
   - newsletters and other publication placement
   - adding Red Cross HIPAA disclosure info in the annual education required by health systems for employees (e.g., one slide for online training)

Please, remember that hospitals and physicians may disclose private health information to the American Red Cross in order to assist in the notification to service members of family emergencies. This disclosure is unrelated to any signed informed consent by the patient or the patient’s medical power of attorney. Help keep Red Cross emergency communications unimpeded by misunderstandings. Get the word out in your region!

Also, let us know what you are doing. You can share your activities with your chapter, within the Nursing Network, and with SAF personnel. Your HIPAA-related activities can also be shared with the SAF Consultant at [RedCrossNurse@redcross.org](mailto:RedCrossNurse@redcross.org) (“SAF Consultant - HIPAA Training” on the subject line).
American Red Cross National Nursing Committee

American Red Cross SAF Nursing Network in Japan

Iris Ranola, Regional Program Specialist

American Red Cross Service to the Armed Forces (SAF) nurses in Yokosuka, Japan have been doing great work. Last year they partnered with the Navy base’s Morale, Welfare and Recreation (MWR) to host a Health and Fitness Fair. There were information booths where nurses provided health screenings, took blood pressures, tested glucose levels and provided general health tips. Multiple organizations hosted informational tables or provided fitness demo classes to promote healthy lifestyles. The Health and Fitness Fair was a great success. The nurses planned and coordinated the event from start to finish, recruiting and networking with organizations that wanted to participate. The American Forces Network (AFN) filmed a short video to promote the event and another short video during the event. The second one is posted on YouTube and features Donna Stachowicz, Pillowcase Project Lead and Nursing Network volunteer, at the Health and Fitness Fair. The enthusiasm she expresses for the event and for engaging local nurses is positively infectious.

The SAF nurses have established themselves and are often invited to provide health screenings or to assist with First Aid tents during base events and preparedness drills. The Nursing Network has a very close partnership with the Fire Department and fills a much-needed role in the community, providing medical assistance and triage during ship drills. The Fire Department holds monthly drills to simulate ship fires in which firefighters practice controlling the fire. The nurses are there to triage medical emergencies and to determine if further medical assistance would need to be summoned for any medical emergencies resulting from the exercise.

The Federal Nursing Service Council

Sharon Stanley, PhD, RN, FNSC Deputy to the Chief Nurse

One of the public duties of the American Red Cross Chief Nurse is membership on the Federal Nursing Service Council (FNSC). In fact, the American Red Cross is hosting the FNSC meetings through June 2019 for a period of 18 months. The group meets bi-monthly and Service to Armed Forces (SAF) has provided the space and coordination for that to happen, starting last January 2018.

The FNSC was organized in 1943 during the height of World War II to provide a means for easy exchange of information, provide mutual assistance in the consideration of nursing issues, and formulate recommendations regarding federal nursing. Originally composed of the Federal Nursing Chiefs, the Chief Nurse of the American Red Cross quickly joined the council due to the Red Cross’ historical involvement with the military in conflicts and wars. In 1996, FNSC was expanded to include the Reserve and Guard components of the military nursing services and in 2010 the Uniformed Services University of the Health Sciences Graduate School of Nursing became part of the Council.

Today, the Council seeks to enhance and strengthen its constituencies; to collaborate and enrich the environment for Federal nurses and those entrusted to their care; and to advance and explore professional issues and leadership. The Council membership consists of U.S. Army, Navy, Air Force, including Guard and Reserve, Public Health Corps, American Red Cross, Department of Veteran’s Affairs, and the Uniformed Services University of the Health Sciences Graduate School of Nursing.

The Council represents over 125,000 nurses with a beneficiary population exceeding 8.5 million. Nurses in the uniformed services address situations that are not prevalent in the civilian sector. FNSC is a forum to address nursing issues which are uniquely tied to caring for the military member, their families and veterans. The inter-service and inter-agency collaboration provided by

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FNSC allows for the sharing of best practices and for consensus building to promulgate policies of interest to our entire membership.

**FNSC MISSION:** Bring together Federal Nursing’s collective leadership and expertise to advance and strengthen professional nursing and enhance partnerships among federal agencies and the American Red Cross.

**FNSC VISION:** United to Address Tomorrow’s Health Care Challenges Today.

The FNSC is committed to:

- Recognize the impact of ethical practice on patient safety and the quality of care.
- Influence health delivery systems to eliminate preventable harm.
- Use and disseminate evidence-based practice principles to create more effective, efficient and safer healthcare environments.
- Optimize healthcare outcomes through interprofessional practice.
- Guide and disseminate policy through the translation of education and research.
- Ensure a collaborative and integrated nursing and other health professional response to advance quality health and wellness through partnerships.
- Influence the nursing leadership continuum.

So, what happens at these meetings? Basically, the group figures out how they can be on the same page to help each other make service delivery better for their respective populations. Disaster and humanitarian response is usually a topic du jour and the practice of nursing and health through models, strategic integration into care teams, and education are always underlying themes.

There is usually at least one guest speaker. For example, at our March 2018 meeting, David C. Benton, RGN, PhD, FFNF, FRCN, FAAN and the current CEO of the National Council of State Boards of Nursing (NCSBN) and previous CEO of the International Council of Nurses (ICN) from 2008-2015 joined us. He discussed possible collaboration opportunities between the FNSC and the NCSBN on topics of the Nurse Licensure Compact and advanced practice issues. At least once a year, there is a large partner meeting with representatives from many of the major nursing organizations that attend for update and initiative information exchange (e.g., AACN, ANA, AONE, NCSBN, NLN).

**FNSC 2017-2020 STRATEGIC GOALS:**

- Strengthen nursing leadership to drive positive change in health and health policy.
- Improve access, quality and safety to health and healthcare.
- Enhance partnerships to support readiness, skill sustainment and inter/intra professional collaboration.

The American Red Cross Chief Nurse presence as a Principal in the Federal Nursing Service Council is a wonderful tradition. More importantly, though, that presence brings awareness of Red Cross efforts in nursing and health across all of our business lines to the whole of the uniformed and federal health services. In return, the American Red Cross Office of Nursing and Health sustains important partnerships for action into the 21st century.

**WGU Education Discount Available**

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! From April 15 – June 15, 2018, volunteers can receive a 5% tuition discount and an opportunity to apply for the WGU Red Cross Partner Scholarship.

This offer is valid for all degree programs, including nursing/health professions, business, IT or teaching. Please visit [WGU.edu/redcross for more information](http://WGU.edu/redcross).
Florida Southern Gulf Chapter Recognizes Volunteer Nurses

Fifteen nurses were awarded their Red Cross nurse pins at the Florida’s Southern Gulf Chapter’s Annual Volunteer Recognition Banquet on April 5, 2018. Lil Doody, RN, Nursing Network Regional Nurse Leader, and Sylvia Taylor, Regional Volunteer Services Officer, have had great success this year engaging new and existing nurses and then recognizing them for their efforts. The Southern Gulf Chapter was able to respond effectively to 2017’s disasters, including wildfires, floods and Hurricane Irma, thanks in great part to these nurses’ dedication and commitment to the Red Cross:

Virginia Andrews, RN joined the Red Cross in 2017 and has been involved in casework and sheltering. Matt Bomace, RN, also involved since 2017, started during wildfire season and then stayed to help staff shelters during Hurricane Irma.

Beatrice Coccaro-Word, RN, ANP joined during the 2017 wildfires, assisted with health services with Irma and followed up on cases with some Spanish-speaking clients. Susan Craig, RN also joined in 2017, helping with sheltering, mass care, feeding with Irma and Florida floods.

Elliott Geffner, RN has been a volunteer since 2015, initially on the Disaster Action Team (DAT) in Miami and then transferred to the Florida Southern Gulf chapter.

Rene Janvier-Couto, RN has volunteered since 2016, working on sheltering during wildfires and Irma and since then has become the Chapter Health Reviewer.

Catherine Krupa, RN has been a Red Cross volunteer since 2005. She transferred from Alaska in 2015 and worked on sheltering post-Irma.

David McGrath, RN has been volunteering seasonally with the chapter since 2015; he helped with sheltering during Hurricanes Matthew and Irma.

Kelly Moorman, LPN has been a Red Cross volunteer since 2013. In 2018 he transferred to the chapter from Salt Lake City, UT and has to his credit nine deployments in Mass Care, Disaster Health Services (DHS), DAT and Individual Client Services.

Terilyn Morgan, RN joined the Red Cross during spring 2017, deployed to Louisiana for Harvey and then worked sheltering in Irma. She recently moved to Arizona.

Lawrence Ohleyer, RN has volunteered since 2014 with health services and DAT; he has had eight national deployments and is a nation responder for DHS.

Wendy Ohleyer, RN a volunteer since 2014, is a former DAT Lead and DHS Lead.

Patricia Smith, RN has volunteered since 2017 after she came to the wildfire evacuation center as a CERT team member. She became one of the most dedicated Red Cross shelter nurses following Irma.

Kimberly Stache, RN, also involved since 2017, has worked with DHS, Mass care, sheltering and DAT.

Tanya Wilkie, RN was a Red Cross instructor in New Hampshire who came to South Florida to check on her home following Irma. She worked shelters in Irma, joined the chapter’s health services and also does presentations to recruit new volunteers.

Seventeen cheers for the great work of Sylvia Taylor, Lil Doody and the team of awesome nurses at the Southern Gulf Chapter!

The Tiffany Windows: Revealing Mabel Boardman’s Memories  Jean Shulman, RN

The tour of the American Red Cross National Headquarters building, dedicated “In Memory of the Heroic Women of the Civil War” often includes an opportunity to view the magnificent Tiffany windows.

Through the years, different explanations on the meaning of these windows have been printed. In a 1925 report, Mabel Boardman, secretary of the American Red Cross Central Committee, recalled her role in their creation.

“I drew the interior plans for the building, which were practically carried out by the architects.
Believing that the big room should have some marked feature in it, I decided on three large stained glass windows. These are among the three largest in the country. For the center one, I thought the Red Cross knight helping a wounded comrade would be a suitable figure.

“As the building was to the women of both the North and South, I thought for one window the symbolic figure of St. Filomena, the name Longfellow gave to Florence Nightingale, with attendant maidens, would make a beautiful window.

“I did not know what to suggest for the other window and spoke of it to Mr. Elihu Root, who was then in the Senate and who was always a great friend to the Red Cross. He suggested Una, who in Spenser’s The Fairie Queen, married the Red Cross knight.

“These windows, which were made by the Tiffany Glass Company, cost $10,000. I asked the Women’s Relief Corps of the North and the Daughters of the Confederacy, if they would like to give, each, a window in memory of the women of their section of the country. They not only agreed to this but on the proposal of the Daughters of the Confederacy, united in giving the middle window, each organization contributing $5,000.”

Mrs. Adolphus Busch, of St. Louis, donated $15,000 to finish and furnish the room with crimson curtains and rugs, including furniture on display today.

Henry S. Eddy produced the colored drawings of the subjects. The three panels are dedicated to the concept of Mercy. The center panel includes the famous Tiffany rough-cut “jewels” of glass embedded in the work. An early description explains, “These lovely panels can be appreciated when the light of the late sun shines through them, turning the rich colors to warm melting hues imparting a warmth and depth to the stately figures that make them seem almost alive.” At the time of the dedication, special lighting was installed to provide illumination in the absence of natural lighting.

Henry Wadsworth Longfellow wrote the 1857 poem “Santa Filomena” to honor the work of Miss Nightingale in the Crimea. The following stanzas help us understand Miss Boardman’s choice for one panel.

Lo! In that house of misery
A lady with a lamp I see
Pass through the glimmering gloom,
And flit from room to room […]

A lady with a lamp shall stand
In the great history of the land,
A noble type of good,
Heroic womanhood.

Nor even shall be wanting here
The palm, the lily, and the spear,
The symbols that of yore
Saint Filomena bore.

Here are descriptions of the windows from 1919.
At the left stands St. Filomena, who was famed for her miraculous powers of healing, a stately, fair-haired figure with a youthful face and wistful violet eyes. Her robe is gray and her hands rest lightly on the Red Cross shield at her feet. Behind her stand her handmaidens, Mercy, Hope, Faith, and Charity, coming down a woodland glade with flowers growing at their feet. Hope bears a banner with the symbolic anchor, Faith a torch, Mercy a flagon of wine and Charity a basket of fruit. Blue-gray skies and billowy clouds form the background, which is common in the three windows, imparting a continuity, not only in color but in atmosphere, lending a soft neutral tone to the whole that but enhances the richness of the deeper and stronger pigments. This, the west window, was the gift of the Women’s Relief Corps of the North.

The right panel is the gift of the United Daughters of the Confederacy. It tells the story of noble women and noble deeds. The graceful Una from Edmund Spenser’s allegorical epic, *The Fairie Queen*, is the central figure, her apron filled with roses, symbolic of good deeds. Una is the personification of Fortitude and Truth. One attendant bears a white banner with a golden heart, representing helpful love. Another carries a cross, and one a lamp—the lamp of wisdom. A young woman kneels in front of Una, holding a shield with a Red Cross in the center. This shield inspired the design of the Tiffany Award, the highest recognition that an American Red Cross staff member can receive. Although some Red Cross legends refer to the central figure as St. Elizabeth of Hungary, Miss Boardman’s personal recollections and writings support the inspiration from Spenser’s work.

The center panel, the joint gift, represents the time of the crusades. A good Samaritan in armor, the Red Cross knight, is giving a healing draught to a wounded comrade. Above, as if in a mirage, ride armored horsemen, some carrying spears, some white banners with the emblem of the Red Cross. This scene illustrates the Red Cross in war, riding side by side with the armies and providing aid to the wounded. The colors of this window are rich beyond description.

In World War II, the lights for the windows were removed for security purposes. Then the Assembly room became necessary office space for war work and the windows were dismantled and stored in the subbasement. Craftsmen working on the Washington Cathedral reinstalled the windows to the remodeled Board of Governor’s Hall in time for the American Red Cross Convention held in Washington, D.C. in 1953.

In 1996, in a special memorial ceremony in honor of Carolyn Scholl’s 26-year career with the American Red Cross, the Tiffany windows were illuminated once again. A plaque near the windows reads in part,

> A life dedicated to the humanitarian ideals of the American Red Cross symbolized by the permanent lighting of the Tiffany Windows. Let these images of compassion shine through the darkness for all in need.

Although the windows are now 101 years old, visitors continue to appreciate the exceptional beauty of these treasures symbolizing help and humanity.
Charitable Giving - It’s More Than Just a Tax Deduction

The new tax law, effective January 1, prompted a lot of conversation about deductions and tax brackets. Lost in the discussion has been the wide variety of benefits that lead donors to make a charitable gift in a particular way.

Take a charitable gift annuity, an arrangement whereby in exchange for a contribution the Red Cross agrees to make fixed payments for life to one or two annuitants. The amount paid is based on the age of the person(s) receiving the payments. When contributing for a gift annuity you receive an immediate income tax charitable deduction and, depending on the size of your contribution and whether you have mortgage interest or state taxes you can itemize, you may realize tax savings from that deduction.

But many donors find the other benefits of a gift annuity to be of equal or greater value. What are those?

- **Increased cash flow** - Common assets used to fund a gift annuity are from savings, CDs, or long-term appreciated stock. What quality do they share? They are usually not generating much in interest or dividends. While in making the contribution, you are giving away the asset, the cash flow from that asset likely will increase significantly – for example, the annuity rate for a 65 year-old is 4.7 percent and for a 75 year-old it is 5.8 percent.

- **Tax free payments** - When cash is contributed, the payments received from a gift annuity will be part tax-free and part ordinary income. The tax-free portion lasts for a period of years, determined by your life expectancy at the time the gift is made.

- **Capital gains tax avoidance/deferral** - When appreciated stock owned long-term (i.e. one year or longer) is contributed, some of the capital gain – the portion attributable to the charitable gift being made – is avoided. An added benefit, if the donor is the annuitant, is that the capital gain included as part of the payment stream is taxed over the donor’s life expectancy, rather than upfront in the year in which the stock is contributed. Depending on how much appreciation is in the stock, the gift annuity payments may still include a tax-free portion, and there will be a portion taxed as ordinary income as well.

If a gift annuity sounds right for you, we’ll be happy to provide specific information on the payments you’d receive. We’d also be glad to talk with you about gift options that can provide other benefits that might fit with your needs, allowing you to best align your charitable, financial, and estate planning goals. For information on establishing a charitable gift annuity contact Gift Planning Officer, Candace Roosevelt at 617-306-3875 or candace.roosevelt@redcross.org

Help us get in touch with and recognize other current and former Red Cross Nurses!

Please send the email, phone, and address of your friends and colleagues to us at RedCrossNurse@redcross.org. Share this newsletter via email, Facebook, Twitter and your preferred social media. Go to http://www.redcross.org/about-us/our-work/nursing-health/nursing-network and select a link under “View Previous Issues of Nursing Matters.”

Thank you!