



## Red Cross Responding to Hurricanes Harvey and Irma

Molly Dalton

Nearly three weeks after Hurricane Harvey devastated parts of Texas and Louisiana, thousands of people remain in emergency shelters, while many more are cleaning up their flooded homes. The Red Cross is providing shelter and comfort, food and relief supplies, health services, emotional support and spiritual care, along with financial assistance, to the hardest-hit areas.

Hurricane Irma caused widespread destruction in the Southeast and the Caribbean. The Red Cross has a massive relief effort underway across multiple states, Puerto Rico and the U.S. Virgin Islands, providing safe shelter to people in the path of Irma's fury. The Red Cross is part of a large team of agencies and organizations responding to provide help to those in need.

Some details of the response to Harvey and Irma as of September 19, 2017:

- The Red Cross and partners have provided more than 939,000 overnight stays in shelters.
- The Red Cross has served more than 3.2 million meals and snacks to people in need.
- More than 6,400 Red Cross disaster workers and 330 emergency response vehicles are on the ground right now, helping thousands of people affected by these storms.
- Mental health and health services professionals have provided more than 96,000 contacts to provide support and care to those affected.

- We've distributed more than 800,000 relief items like diapers, bug spray, cleaning supplies, coolers, and comfort kits that contain deodorant, toothbrushes, toothpaste and other hygiene items in Texas and Louisiana.
- More than 74 million hurricane and flood alerts have been issued through Red Cross mobile apps for Hurricanes Harvey and Irma. The apps provide shelter locations and real-time information so people can help protect themselves and their loved-ones.

Over 5,000 people responded in one week to the Direct Deployment link for health professional responders to deploy for Hurricane Harvey, which is an unprecedented response. The overall response to Hurricane Harvey was phenomenal. We usually receive several hundred volunteer applications each day. In one day there were 18,000 applications and in order to respond to the increased demand, we had to create alternative application processes. Volunteers and employees have been working around the clock to help deploy health professionals to the needed areas.

The Red Cross depends on financial donations to be able to provide disaster relief right now. Help people affected by Hurricane Irma or Hurricane Harvey by visiting [redcross.org](http://redcross.org), calling 1- 800- RED CROSS or texting the word IRMA or HARVEY to 90999 to make a \$10 donation.

### How can I help now?

- Encourage health professionals to become a [Volunteer](#) and take all necessary training to be ready to respond. Use Volunteer Connection to signal your availability for local shifts and disaster deployment.
- Consider volunteering in areas that do not require a health professional license. Health professionals bring their expertise and are helpful in a variety of roles, including sheltering and feeding, government liaison and leadership roles.
- Donate blood –there is an ongoing need for blood donors.
- For more information about health professional leadership opportunities, contact [RedCrossNurse@redcross.org](mailto:RedCrossNurse@redcross.org).

## Chief Nurse Initiatives FY 18

Linda MacIntyre, PhD, RN

The Chief Nurse Initiatives for fiscal year 2017 were successfully achieved due to the outstanding dedication and collaboration of Red Crossers. While there is much to celebrate, recent events across the globe are a reminder that continued compassionate responses are needed. The work that we do is based on the seven [Fundamental Principles of the Global Red Cross Network](#):

**Humanity** - The Red Cross, born of a desire to bring assistance without discrimination to the wounded on the battlefield, endeavors—in its international and national capacities—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.

**Impartiality** - It makes no discrimination as to nationality, race, religious beliefs, class or political opinions. It endeavors to relieve the suffering of individuals, being guided solely by their needs, and to give priority to the most urgent cases of distress.

**Neutrality** - In order to continue to enjoy the confidence of all, the Red Cross may not take sides in hostilities or engage at any time in controversies of a political, racial, religious or ideological nature.

**Independence** - The Red Cross is independent. The national societies, while auxiliaries in the humanitarian services of their governments and subject to the laws of their respective countries, must always maintain their autonomy so that they may be able at all times to act in accordance with Red Cross principles.

**Voluntary Service** - The Red Cross is a voluntary relief movement not prompted in any manner by desire for gain.

**Unity** - There can be only one Red Cross society in any one country. It must be open to all. It must carry on its humanitarian work throughout its territory.

**Universality** - The Red Cross is a worldwide institution in which all societies have equal status and share equal responsibilities and duties in helping each other.

These seven principles form the foundation of our work. We continue to serve across all business lines of service, as shown by a few examples of our work: In Biomedical Services there is a critical need for

blood donations and we are donating when able and recruiting diverse donors. Disaster Cycle Services is responding to support communities affected by wildfires and Hurricanes Harvey and Irma. International Services continues to partner to vaccinate children against measles and rubella. Preparedness Health and Safety Services continues to prepare certified nurse assistants through Nurse Assistant Training. Service to the Armed Forces continues to provide emergency communication to members of the military and offer casework to veterans, military members and their families. Health professionals and partners are engaged in all of these activities –serving individuals one by one and through leadership roles.

The Chief Nurse Initiatives FY 18 focus on recruiting and engaging health professionals across the enterprise to reach more people in more communities. We need health professionals with diverse backgrounds and expertise to effectively accomplish the work. We will continue to embrace Academic Service Learning and support new health professionals and students in this work.



Red Cross Chief Nurse Linda MacIntyre (front row, right corner) at a health professional town hall event in Long Beach, CA in March 2017.

The Chief Nurse Initiatives align with the following *IOM (National Academy of Science) Future of Nursing Goals*:

- Remove scope-of-practice barriers (i.e., nurses should practice to the full extent of their education and training) –Future of Nursing Report IOM Recommendation 1\*
- Ensure that nurses engage in lifelong learning - Future of Nursing Report IOM Recommendation 6\*

- Prepare and enable nurses to lead change to advance health (i.e., ensure that leadership positions are available to and filled by nurses) - Future of Nursing IOM Report Recommendation 7\*

The Fundamental Principles are the basis of this humanitarian service.

\* Institute of Medicine. (2010). *The Future of Nursing*:

## Update from the President of the National Association of Hispanic Nurses

Anabell Castro Thompson, MSN, APRN, ANP-C, FAAN



The rapid growth in the Latino population, and especially in the number of Latino youth, represents one of the most dramatic and important demographic trends affecting the United States. Working-age Latinos will age to become the first sizable wave of Latino

seniors. As a result, the health status and health behaviors of today's youth will play a central role in shaping the long-term health and healthcare needs not only of Latinos in the United States, but of all Americans.

For many Latinos, the lack of culturally competent care, poor understanding of how the healthcare system works and lack of accessibility and affordability result in significant barriers towards utilization. More than one-fourth of Latinos in the United States lack a consistent healthcare provider (medical home), and almost half don't see a medical professional at least once annually. Additionally, Latinos are more likely than members of other groups to delay healthcare for an illness or to drop out of treatment when symptoms disappear.

The National Association of Hispanic Nurses (NAHN) is the only nursing organization focused on Latino nurses. We have 49 chapters across 24 states

*Leading Change, Advancing Health.*

<http://www.nationalacademies.org/hmd/Reports/2010/The-Future-of-Nursing-Leading-Change-Advancing-Health.aspx>

*Editor's Note: Red Cross Chief Nurse Linda MacIntyre published an article in the July, 2017 issue of the American Journal of Nursing entitled "[The Growing Need for Diverse Blood Donors](#)". Check it out!*

and the District of Columbia; together we represent the voices of 180,000 Latino nurses in our country. NAHN is devoted to promoting safe, quality health care delivery to Latino communities and individuals, and we recognize excellence among Latino nurses, provide formal and informal mentoring opportunities, and generally serve as a center of excellence for our members. Our goal is to create a cadre of highly-qualified Latino nurses by advancing educational, professional and leadership skills and opportunities for our membership. In addition, we work to recruit additional Latinos into the nursing profession because, while Latinos represent 17% of the US population, less than 4% of the nursing workforce is of Latino descent.

NAHN members advocate, educate, volunteer, seek partnerships, and conduct programming in the Hispanic community to improve outcomes, elevate literacy, heighten education and influence policy. We also work collaboratively with organizations like the American Red Cross and others to improve health equity and to create a future in which everyone, regardless of race or ethnicity, has the opportunity to be healthy. In this edition of this newsletter, I celebrate the contributions of the American Red Cross and their volunteers, and encourage our NAHN members to become involved and to join this worthy cause.

## Nurses Advocate for Global Measles and Rubella Funding

James Noe, Red Cross Program Officer, Measles & Rubella Initiative

With help from American Red Cross's National Nursing Committee (NNC), senior nurse leaders were recruited and trained to educate members of Congress in their home offices—specifically

requesting a \$10 million increase in funding for the [Measles & Rubella Initiative](#). The increase would fund the Centers for Disease Control and Prevention's purchase of vaccines as well as aid to



Pat Nordel and Susan Denavit.

countries at risk of measles and rubella outbreaks.

On May 5, two of the nurse leaders, Susan Denavit and Pat Nordel, advocated for increased support of immunization programs among members of Congress in Washington,

D.C. They were part of a team that met with 16 congressional offices to share information and build a case for why immunization programs are important to protect U.S. citizens and individuals around the world. Here's a short Q&A with the nurses:

### **Briefly describe how you reached out to members of Congress.**

**Nordel:** I contacted representatives in each office and asked to meet with them. Both offices were accommodating and I set up a meeting with each office.

**Denavit:** Thanks to great training and support by phone and email from the Red Cross's international team, I called my congressional representative's office. One office took my information and a week later, called me with an appointment time. I had a very good meeting with one of Senator Patty Murray's staff members, who was interested in the Measles and Rubella Initiative and Red Cross services in general. He took notes and asked if there was anything else they could do. Senator Murray has been very supportive of the Red Cross during her term. I was also able to visit Senator Jeff Merkley's office in Portland with the nurse leader there, who invited me to go with her. In both of the meetings I attended, the staff was interested, attentive and asked

questions, although they said they couldn't promise that there would be support for increased CDC funding.

### **Why is this project important?**

**Nordel:** This project is important because disease prevention and health promotion is important. To know that hundreds of thousands of children die each year from a preventable disease is mind-boggling. Vaccines are a cost-effective way to maintain health. Communities are devastated when outbreaks occur, both by the cost in lives and the cost to the economy. This initiative must continue its work eliminating measles. Its highly contagious nature makes exposure quite risky and the vaccines reduce deaths and improve the health of the communities.

**Denavit:** I believe it is important for both humanitarian and economic reasons. First of all, it saves lives. Second, prevention of illness uses far fewer resources than treatment of illness. Preventative care saves time, money, pain, grief, and disruption of families and communities and allows them to use resources to improve their lives. The Measles and Rubella Initiative is necessary in the United States and around the world because there are communities where not enough people are vaccinated to contain the spread of disease. I am most excited about the portion of this program that will spread the word about immunizing kids against a disease that parents don't think will affect them, until it spreads through unvaccinated communities. I also believe that helping other countries with vaccines is a moral obligation of our rich country as we are all in this together. With the world more connected, we must understand that other countries' problems are related to us. A disease spreading in one country will soon be spread worldwide. We have the resources to help and the obligation to do so.

## **Nursing Influence on Humanitarian Action** Chad Priest, JD, MSN, RN, Interim Regional Executive – Massachusetts Region Regional Executive – Indiana Region



The humanitarian sector is comprised of a unique and vibrant group of professionals from a multitude of disciplines. Humanitarian work is fundamentally collaborative,

requiring transdisciplinary thinking and action. While some aspects of our work fit neatly into discrete realms of traditional professions (e.g., psychologists providing post-disaster mental health services), many of our actions defy easy professional categorization (e.g., operating shelters, reconnecting displaced persons, etc.).

Like most of you reading this article, I am a nurse. I also happen to be an attorney. In my role as a regional executive in Indiana, I don't technically practice either of those professions. On the other hand, I'm always nursing and I'm always lawyering. This reflects a fundamental truth about professional education: it may not dictate what you do but it almost always informs how you think and approach your work.

We can never un-learn our educational socialization. As a nurse, I have a fundamental belief about the importance of community, and the impact of community on human health. This world view, formed by a lot of years of nursing undergraduate and graduate study, is impossible to shake. As a leader, I find myself often situating our resilience-building and response mission into public health and nursing frameworks as a way to organize work and create shared vision.

Nurses also understand humanity particularly well because we have been so close to it for so much of our formal education. We begin our education interacting with patients and our profession calls us to intimately attend to their needs in a range of settings. We are not merely accustomed to dealing with human needs and struggle; we are professionally trained to do so.

Of course nurses do not hold a monopoly on humanitarian influence. As a lawyer, I also instinctively see the work of the Red Cross through a lens of social justice and international norms. Quite literally, we uphold key elements of international treaties and our very existence as a movement is predicated on legal recognition of our mission. I rely on my legal education in innumerable ways to operate the business of our region and to ensure we can meet the needs of our communities.

For those who delight in identity politics, the humanitarian sector can be extremely frustrating. Our value as humanitarians rarely lies solely in our professional licensure or identification. Asgary & Lawrence (2014) identified those characteristics of experienced humanitarians, and professional identity hardly garnered a mention. The most notable shared characteristics of humanitarian workers were "a strong personal responsibility to

serve others and shared feelings of altruism." As many of you can attest from your own experience in the field, some of the most valued team members in our sector are those whose professional identities are either unknown or irrelevant. These are true utility players, workers who are able to seamlessly move between complex environments and alleviate human suffering using varied tools and techniques. Last year during deployment in North Carolina in response to Hurricane Matthew I encountered two amazing logisticians: one a secondary school teacher and the other a retired engineer. Neither had a professional background in logistics or supply chain management, but both were highly effective humanitarian workers. During the Ebola crisis while working in Liberia, I befriended one of the most amazing humanitarians I have ever met, an emergency manager from Medicins Sans Frontiers. She had no training in healthcare at all, yet she was instrumental in keeping the Ebola Treatment Unit open at ELWA hospital, which was critical to control of the epidemic.

It is frequently said that a nurse founded the American Red Cross, but Clara Barton wasn't your average nurse. Indeed, she wasn't your average human. She was the consummate transdisciplinary. She was guided not by her professional identity, but by the work she undertook and the organization she sought to build. Clara personified the characteristics of an effective humanitarian: she had a strong sense of personal responsibility and was a tireless advocate for those who needed support and assistance. She was also able to move seamlessly between complex settings, and adopt multiple personas (advocate, nurse, disaster worker) to accomplish objectives.

I believe that nursing, as a fundamentally humanitarian profession, is inexorably tied to the history and future of our movement. The opportunity before us is to recruit the next generation of Clara Bartons and support them as they serve communities throughout the U.S. and the world. As a nurse – and a humanitarian - I'm enormously proud to join all of you in this effort.

Asgary R, Lawrence K. Characteristics, determinants and perspectives of experienced medical humanitarians: a qualitative approach. *BMJ Open* 2014;4:e006460. doi: 10.1136/bmjopen-2014-006460.

## Retired RN Still a Red Cross Nurse

Ann Greenspun, RN, Immediate Past Co-Chair, ARC Blood Services of Southern California; Immediate Past Board Member, Santa Monica Bay Chapter

I am a retired RN. That is to say I no longer get paid. But after a long career working in coronary care units, emergency departments, on movie lots and as a school nurse, I have never lost the passion to serve and the love of medicine.

Years ago, when my children were young, I borrowed a Resusci-Anne from the Red Cross to train students. That was my first contact with the wonderful people of the Red Cross. Later, as a high school nurse, I witnessed them in action after a destructive wildfire in the Malibu area displaced many residents. The incredible volunteers in a Red Cross shelter had a positive impact on the high school teens. As for me, I enrolled in Disaster Action Team training and was hooked.

The work that followed the 1994 Northridge Earthquake and, in 2005, assisting victims of Hurricane Katrina arriving on the west coast served to reinforce my conviction of the indispensable significance of the Red Cross. Having joined our local Santa Monica Bay Chapter and eventually becoming its chair, I tried to find



ways we could do it better.

Our chapter conducted weekly blood drives but there was no communication with Blood Services. I also found it frustrating that we could only administer first aid at shelters despite the fact that we had ICU- and ER-trained nurses. I joined the regional Southern California Biomed Board and the American Red Cross National Nursing Committee. Through my participation and that of others on these and other boards, our advocacy finally resulted in nurses now being able to work at a level appropriate to their training. Over time, communication also improved between chapters and Blood Services, eventually leading to the creation of a national Blood App and One Red Cross.

I said I'm retired, but I'm not retiring. I love to be involved and for my efforts to have meaning. And I don't consider myself to be a nurse leader. I am a member of a large integrative team which incorporates the talents and interests of many for one goal: to serve those in need.

## Jane Delano Student Nurse Scholarship Awarded to Athena Plichta

Elizabeth Kazmier, BSN, RN, CRRN

Athena Plichta, a nursing student in the RN to BSN program of the University of Louisiana at Lafayette, was awarded the 2017 Jane Delano Student Nurse Scholarship.

Plichta has been a Red Cross volunteer at the U.S. Naval Support Activity station in Naples, Italy, since September, 2016. After joining the Disaster Action Team (DAT) she was inspired to create a prototype "Disaster/Survival Kit in a Bottle", a kit with items to sustain a person for 24-36 hours inside a clear water bottle. She and the Station Volunteer Partner created an informational brochure about the local DAT's initiatives and mission with contact numbers for local resources, which can be provided to sailors



and their families who are new to the area. Plichta was recognized as the Volunteer of the Month in January, 2017.

Plichta's daughter wanted to start a high school Red Cross Club so Plichta volunteered as its Youth Engagement Partner. In addition, she volunteers with the Red Cross' Nurses and Allied Health Network at the base's hospital, which includes assisting the school nurse at the elementary school several times per month. As a member of that network, Plichta has also attended community events on behalf of the Red Cross and interacted with the public, educating on topics such as heart health, hand washing and smoking cessation. She was awarded a Volunteer Certificate of Appreciation in spring of 2017.

Next year the high school's Red Cross Club will work on Vaccinate a Village, which Plichta says she is passionate about. In the future she hopes to pursue a combined MSN/MPH with a focus on global health initiatives.

The Regional Program Manager, Gretchen C. Jucha, reported that Plichta has had an "immense impact" at the Naples station, and said, "The support she provides is apparent through helping brief the community on the services we provide, providing intelligent insight at Disaster Action

Team meetings, maintaining consistent communication between the youth volunteers and office staff, strengthening our relationship with the hospital through her reliability, and capturing our volunteers in action through photography. Even more outstanding, however, is her selfless engagement and underlying positivity that has become contagious to those who work with her..." In a relatively short amount of time, Athena Plichta has made significant contributions to her local Red Cross and to her community.

### A Bit of Nurse Assistant Training History Found in Donated WWII-Era Memorabilia

Patricia Hadley

The Oakland Red Cross office in California received an intriguing box of WWII memorabilia from the daughter of Suzanne Herrick nee Hiller who volunteered as a nurse's aide for the Berkeley chapter of the American Red Cross. During WWII, hospitals across the nation suffered a severe shortage of nurses due to the need for nurses to serve in the military.

On May 1, 1943, in a coordinated effort with the Red Cross, Alta Bates Hospital in Berkeley set up a nine-bed training ward where volunteers received 80 hours of training so that they could assist the few available nurses in their many duties. These volunteers worked in hospitals, blood donation centers, schools, and wherever their skills were



Suzanne Hiller (left) and her sister

needed including the aftermath of the Port Chicago explosion (one of the deadliest stateside military incidents to take place during WWII). Eighteen-year-old Suzanne Hiller wanted to help with the war effort, so she and her sister took the new training program at Alta Bates Hospital and did their volunteer work there.

The program they volunteered for was called the Red Cross Volunteer Nurse's Aide Corps. It began during WWI under similar circumstances and was reinstated at the request of the Office of Civilian Defenses during WWII. By 1945, 212,000 of these

volunteers across the country had put in 42 million hours of service. These statistics give a sense of the value of people with nursing skills during difficult times.

Alta Alice Miner Bates, the founder of Alta Bates Hospital, was an early pioneer for women's rights. She was the first nurse anesthetist in the Bay Area and started the hospital, later to be named after her, in 1905 as an 8-bed sanitarium for women and infants. It also served as a nursing school. A picture from the box shows Suzanne Hiller with her graduating nurse's aide class; Miss Alta Bates is featured front and center in full uniform. Also in the box was a letter from Alta Bates Hospital written after the war, asking Suzanne to please continue her work at the hospital as a volunteer or for a salary. We don't know if she took them up on the offer, but we do know that after she was married in 1946 and living in Ohio she continued to volunteer for the Red Cross.



Alta Bates (front center left) with Suzanne Hiller's graduating class.

The box also contained a uniform including two pairs of white nurse stockings and a newsletter. It is the *Anniversary Edition of the Red Cross Nurse's Aide News Bulletin* from the Berkeley Chapter dated



The uniform

February, 1945. It lists a timeline of events starting in 1942 that is a testament to the amazing ability of the Red Cross to mobilize and get this vital program up and running, from procuring donations to graduating 1,764 nurse's aides.



A certificate recognizing Hiller's meritorious service during WWII.

Suzanne Herrick saved some meaningful items from her volunteer experience as a Red Cross nurse's aide, and her daughter, in sharing them with the Oakland Chapter, has shared a little piece of Red Cross history with the rest of us.

## The Benefits of a Living Trust

Candace Roosevelt, MAN, MBA

Many people establish revocable living trusts to which they transfer most of their assets. They are entitled to the income of the trust and also to the principal, if needed, and they reserve the right to change or revoke the trust during life. Usually, the person who creates the trust serves as the initial trustee, and provides for a successor trustee in the event of incapacity.

A living trust offers these benefits:

- Privacy, unlike a probated will which can be accessed by the public.
- Assets in the trust not subject to the probate process.
- Way to dispose of real estate located in another state without opening ancillary probate proceedings in that state.

The main disadvantage would be the cost of establishing and maintaining the trust. You should also keep in mind that a living trust will not reduce your income and estate taxes, and that the trust does not eliminate the need for a will.

Finally, remember that a disposition of assets

through your living trust is equivalent to a bequest in a will. If you already have a living trust, and you would like to include the American Red Cross in your plans, you may have your attorney draft a simple amendment to the trust. If you are in process of creating one, you may, of course, include such a provision. A gift through a living trust, like a bequest in a will, can be unrestricted, can be for a designated purpose, or can create an endowment.

For information on making a gift through will or trust contact Gift Planning Officer, Candace Roosevelt, at 617-274-5247 or [Candace.Roosevelt@redcross.org](mailto:Candace.Roosevelt@redcross.org)

AMERICAN RED CROSS National Nursing Committee Heritage Committee Members: Vivian Littlefield, Chair; Elizabeth Kazmier, Editor; Donna Jensen, Associate Editor; Committee Members/Contributors: Molly Dalton; Donna Dorsey; Marie Etienne; Linda MacIntyre; Candace Roosevelt; Cheryl Schmidt; Jean Shulman; Jean Van Voorhis



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**Thank you!**