



“this patient can’t be left alone”

Lillie Howard is one of three Partners in Care Home Health Aides who take care of the same patient, a woman confined to a wheelchair who communicates with her eyes and a signboard. Lillie works the 9 pm to 9 am shift. She and her patient were watching the “Today Show,” waiting for Keyleen Johnson, the next aide, to arrive. Lillie heard a loud boom, “then sirens running wild.”

Lillie knew it wasn’t thunder. The day was sunny and clear. Perhaps a truck collision? She glanced at the TV and saw a picture of a thick, black cloud billowing from the World Trade Center. She went out on the terrace and saw the same devastating sight, just blocks away.

Keyleen arrived and reported that there was smoke all over. As Lillie came in from the terrace, the other plane hit. “That’s not an accident,” she told Keyleen. “This looks like a suicidal thing going on.”

Lillie had no idea when she left that it’d be several days before she’d be back. It took her more than six hours to reach her home in Queens after a harrowing trip through lower Manhattan and nearly losing her way in the dark clouds of soot and smoke. There was no way she was going to get back to work for her 9 o’clock shift.

But Keyleen, Lillie and Yvonne St. Martin, the third home health aide, “all pooled together and made it work,” says Lillie. They all knew that “this patient can’t be alone.” Keyleen stayed with the patient until Thursday morning when Yvonne arrived with a police escort. Lillie managed to find her way around the police barricades to return on Sunday. She stayed until the following Tuesday morning.

Lillie, Keyleen and Yvonne are now back to their regular schedules. But while their schedules may be back to normal, the area still isn’t.

“It’s like a war zone,” Lillie says. “And there’s that smell. You get off the train and smell that charred, dead smell.” Just a few blocks away is “where the empty space is.”



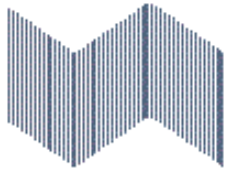
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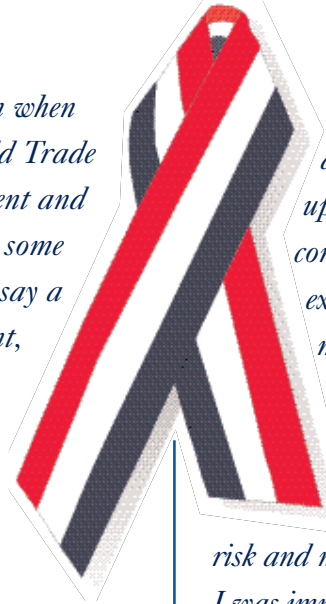


September 11 How VNSNY Responded

I was at a meeting in midtown Manhattan when word came that a plane had hit the World Trade Center. At first I thought it was an accident and the meeting continued although there was some unease. A short while later, a person came in to say a second plane had hit the other tower. At that point, we all knew it was a terrorist attack. People rushed to telephone their families and workplace. A radio in the background was announcing that there were other terrorist attacks underway and that all airports were closing down. As many as eight hijacked planes might be involved. There was speculation that the White House, Capitol and Pentagon were targets. Someone wondered if the Air Force would try to shoot down the remaining planes.

When I rushed out to head back to my office, there were hundreds of people in the street, all turned toward the World Trade Center where you could see the fire and smoke in the sky. Someone in the crowd gasped and announced that one of the towers had crumbled. People stared down Fifth Avenue in disbelief. A short while later, against the background noise of sirens and emergency vehicles racing south, the other tower collapsed. In the skyline where the World Trade Center had once stood triumphantly, there was now a vast hole.

As I headed uptown, I saw crowds of people running from Times Square and the Rockefeller Center complex because they feared those buildings might be another target for destruction. Most people were calm but also numb from the enormity and shock of what had occurred. While I had to only walk 30 blocks to get to my office, many people were headed toward



the Bronx and Brooklyn and had long treks ahead of them. Many shopkeepers were closing up and heading home as well. I could overhear conversations, particularly among young people, exclaiming that this could not be happening, it must be a movie that soon would be over.

When I got back to the office we set up a command center to deal with the crisis and how to deliver patient care to the most high risk and needy of our patients during this emergency. I was immediately impressed with the professionalism and determination of our staff. Despite their own emotional state and personal concerns, they were steadfast and anxious to help in any way possible. It was clear on September 11th and in the days that followed what an extraordinary VNS family we belong to. I agree with one of our nurses from Brooklyn who commented that we at VNS perform the best even in the worst of times.

The events of September 11th are still very much in our minds and our hearts as we try to regain our equilibrium. Here at the Visiting Nurse Service of New York, 24 of our employees lost family members. Six of these family members were firefighters, including William M. Feehan, NYC's First Deputy Fire Commissioner.

Despite our shock and grief, our nurses, therapists, social workers and home health aides did everything they could to be sure that their patients were taken care of and comforted immediately after the attack.

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“proud to be a nurse”

Lisa Heller, a nurse in our AIDS Long Term Home Health Care Program, had just walked into the VNS Brooklyn office when she heard people saying that a plane had hit one of the World Trade Center buildings. As the morning unfolded and more horrible details became known, Lisa did what thousands of other New Yorkers were doing at that time — she began contacting family members and friends to see if everyone was safe.

Lisa’s morning changed when Yvonne Eaddy, the Regional Administrator for the VNS Brooklyn office, got a call from the NYC Fire Department’s Emergency Medical Services that nurses were needed on the Brooklyn side of the Brooklyn Bridge to treat civilians who were coming over from Manhattan by the droves. Yvonne asked for volunteers.

At first, Lisa was uneasy about going. At that point, nobody knew what was happening. Two planes had flown into the World Trade Center. Another had just hit the Pentagon and there was a report that a fourth plane had crashed into the remote countryside of Pennsylvania. Rumors were rampant. “I had a moment of doubt,” confesses Lisa. “But then I thought, ‘Why am I a nurse if I’m not going to help in a time like this?’”

So Lisa along with several other VNS nurses from the Brooklyn office were taken by police car to the Brooklyn Bridge. There, they joined other nurses and doctors from the area to staff a makeshift triage center to treat civilians. Most of the injuries were bumps and bruises, smoke inhalation, and eye injuries. One woman who was pregnant went into labor.

After about an hour or so, a call went out for nurses and doctors to staff another triage center on the Manhattan side of the Brooklyn Bridge. Lisa volunteered as did many of her VNS nurse colleagues. They were driven across the bridge by a New York City transit bus. By now both World Trade Center towers had collapsed. Nothing could have prepared Lisa or the other nurses for what they were about to encounter.

Most affected were our 1,600 patients who lived in the downtown Manhattan area. Our staff overcame incredible obstacles, including the lack of transportation and communications to locate and treat their patients. They carried surgical masks, medicines, food, water, flashlights and radios to their patients. Some home health aides extended their shifts and stayed with patients confined to their beds for many hours, sometimes overnight, until a replacement arrived.

Nurses rushed to volunteer at triage centers. Community mental health counselors assisted people traumatized by the disaster and volunteered their services at the city’s crisis centers. They helped people from many different groups ranging from private companies and public agencies to the NYC public school system. In addition, our hospice bereavement counselors provided services to some of the families of firefighters and others who lost loved ones. These counselors will continue their efforts in the coming year through the city’s Project Liberty Program.

In the days and weeks following the World Trade Center tragedy, remarkable stories of staff dedication to our patients emerged from across the agency. In this special issue of *FrontLineFocus*, we feature some of these stories. Please note that these stories represent only a few of the many, many VNS people who maintained agency operations and supported disaster relief efforts during this sad and difficult time. In fact, whenever we interviewed someone for this issue, we often heard from them about other caregivers or support personnel that we should speak to. We’re only sorry that time and space did not allow us to include everyone’s story.

As you’ll see, the Visiting Nurse Service of New York is an organization whose resourcefulness and determination are evident no matter what threat and challenges we face.

Sincerely,

Carol Raphael
President and Chief Executive Officer

“It was just devastating,” says Lisa. “Everything was gray and covered with thick dust. There wasn’t a speck of color.”

The doctors and nurses arrived at the triage center, but it was already well staffed. Hoping to be more helpful, Lisa and some other VNS nurses began to wander about lower Manhattan, looking for a triage center that needed assistance. By now, most civilians were gone from lower Manhattan. Lisa and the other nurses saw the most atrocious and saddest things. Overturned cars. Millions of papers lying about on the street. Even a resume from someone’s desk. The group of nurses came to a firehouse near the World Trade Center. It was a heartbreaking sight.

“The firefighters were missing six of their men and they were pretty shell shocked,” says Lisa. “They looked like little kids who had just woken up from a bad nightmare. Yet they also seemed extremely determined to find their lost brothers.” The nurses checked the firefighters’ lungs and eyes and then moved on.

The group of nurses heard that a trauma center was being set up in Stuyvesant High School so they went there. Lisa spent the afternoon and evening at the high school, manning a station with other VNS nurses. There was a news blackout in the high school. At one point, someone ran into the building shouting, “Get out! Get out! There’s a bomb!” It turned out, though, it wasn’t a bomb at all. It was 7 World Trade Center: the building had just collapsed.

While at Stuyvesant High School, Lisa treated firefighters, EMS workers, and police officers for smoke inhalation and cuts and bruises and performed countless eye washes. But no civilian victims showed up. Lisa stayed at her station until about 11:30 at night. By then it was becoming increasingly clear what nobody had the heart to come right out and say — that there would be no survivors.

“I’m very proud to be an American,” says Lisa. “And very proud to be a nurse. I feel lucky that I had the knowledge and skills to be able to help on that terrible day.”



“flew down by bike”

Michael Soccio, an RN, was in the VNS office at 1250 Broadway when Angela Maloney, a coworker, got a call from her husband who worked at 1 Liberty Plaza down in the Wall Street area saying that a plane had flown into the World Trade Center. “The whole office,” says Michael, “went absolutely crazy.”

At around 11:00 am, the Manhattan Regional Administrator Ginny Field — just back from jury duty, which had been cancelled — came around asking if any nurses would like to volunteer to help staff triage centers down at the World Trade Center. Michael immediately volunteered.

Michael, who travels around the city by bicycle, was able to get down to the World Trade Center within minutes. He just flew down Second Avenue on his bike. At 14th Street, the police had set up barricades. Michael sailed right past the barricades. It was a different story, though, when he got to Duane and Lafayette Streets. There, Michael was stopped by national guards armed with machine guns. Michael showed the guards his nurse’s I.D. and had his nursing bag searched.

Michael helped set up a triage unit at Duane and Lafayette. For the next two hours, Michael and the other medical personnel at the triage unit waited for victims to be brought in — but none arrived. At around 1:00 pm, a police officer came over to the triage unit and told everyone that they were going to start receiving victims. “You’re going to have a long night in front of you,” said the police officer.

But still no victims arrived.

After about an hour, Michael heard that they couldn’t get the victims to them because crushed police and fire department vehicles were blocking the way. So the triage unit was asked to move to Ground Zero.

“I had never heard the term ‘Ground Zero’ before,” says Michael.

“I feel lucky that I had the knowledge and skills to be able to help on that terrible day.”

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The doctors and nurses were all given respiratory masks to put on. Then NYC buses arrived to take them into Ground Zero.

It was very frightening. The air was completely dark with thick smoke and there was destruction everywhere — blasted out building windows, demolished cars, debris in the streets, and thick grey silt on every surface imaginable. At one point, Michael saw an overturned donut cart on the sidewalk. Donuts were spewed out all over the street.

“It was like a war zone,” says Michael.

The buses were about one block from the World Trade Center, when they had to quickly back up — the third World Trade Center building was about to collapse. The buses then brought Michael and the other medical personnel to Stuyvesant High School, where Michael helped set up a triage center. He stayed there into the evening. At about 8:00 pm, with still no civilian victims showing up, Michael, numb, frightened, and shocked by all he had witnessed that day, left to go home.



“just being there changed my life”

Marietta Guido, a social worker for VNS CHOICE, was in a meeting. “Somebody walked in and said a plane had hit one of the towers. We were so immersed in our work on an intense case, it wasn’t until later the information started to sink in.”

“I come from a place where terrorism is an everyday thing and the way people deal with it is to ignore it,” says Marietta. She came to New York from Bogotá, Colombia where there were constant terrorist attacks by the different drug cartels. “The way I dealt with the World Trade Center attack was to go uptown to see one of my patients. When the subway stopped (between stations) for 10 minutes, I got in touch with the panic. Finally the train moved to the 59th Street station, then the subways shut down. I recall very vividly the sound of sirens that wouldn’t stop. I walked back to the office at 32nd Street feeling in shock and called the people I care for to make sure they were okay.”

“On Tuesday and Wednesday, I pretended I was okay; my feelings were elsewhere. On Thursday, I volunteered at the Armory at Lexington and 25th to be with families who were reporting loved ones who were missing. I could see the magnitude of the tragedy, the families and their pain, people with lists of five names. Never have I felt so useless and so speechless. Nothing I could say would bear their pain.

“Those families will never know they changed my life forever, but they really did. Just to be able to be so close to human beings who are in so much pain. Just being there, accompanying them, changed my life.”



“who’s here for supportive care?”

Alice Keating, VNS CHOICE Member Support Consultant, was in her car on the East River Drive going to a case conference in Brooklyn. “I hear Imus on the radio talking about a fire at the WTC. I think they’re talking about 1993 — their voices are calm and measured. Then they mention a hole in the building. “Traffic on the Drive came to a halt. Alice saw a low-flying plane. Just as she thought, “It’s going to hit the other building!” the plane slammed into the north tower.

Moments later there was a whirl of sound. Emergency vehicles sped past in the hastily cleared left lane. Traffic police eventually redirected Alice and the other drivers to the northbound lanes of a drive suddenly empty of cars but starting to fill with people fleeing from the financial district. Alice picked up two men and a woman and dropped them off on 14th Street where she lives.

Alice checked in with the office from home and was told not to come in. CNN, another tenant, had received a threat and the building might be evacuated. Alice and her husband decided to walk over to St. Vincent’s Hospital and donate blood. Hundreds of other New Yorkers had the same idea and the line stretched around the block. Alice then checked in with the emergency staging area for doctors and nurses. “They were mainly looking for med-surge people,” she said, referring to nurses who work in the medical and surgical units of a hospital.



“going to stay no matter what”

Patrick Luib, an RN and Performance Improvement Specialist, was in a staff meeting in Brooklyn when a nurse came back from the field with the news. Patrick managed to reach a friend at home who worked in one of the towers. After listening to her describe in vivid detail the horrors she'd seen from her 56th floor office, he went outside for a much-needed breath of fresh air. “The air was already polluted with a pungent odor,” Patrick says. “I noticed ash floating on this clear, sunny day.”

Patrick went back inside and saw that the receptionist had passed out. Her husband worked in one of the buildings. Everybody was in a state of shock.

Emergency Medical Services relayed a request for volunteers to help with triage efforts through the Brooklyn's Sheriff's Office.

Patrick, Erik Mortensen, RN, Lisa Baez, RN, and John Ide, the Spiritual Counselor for the hospice program, were among those who responded. They arrived at the foot of the Brooklyn Bridge to find VNS nurses Kathleen Martin, Joy Lee, Magalie Louis and Consuelo Celestine already at work in the midst of the chaos.

A steady flow of office workers evacuated from the Financial District filled the bridge. Some had been injured when the two planes slammed into the towers, sending a shower of broken glass and other debris onto the plaza and streets below. Others had been caught in the frightening clouds of ash and grit let loose by the towers' collapse. Some were in shock.

“A Hasidic man covered in ash from head to foot was shaking all over,” says Patrick. “We used a syringe from my nursing bag to irrigate his eyes. The other nurse held his hands and told him he was safe.”

Serious injuries were sent to another site for treatment. The nurses treated dozens of lacerations, eye irritations and cases of shock on the spot.

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“We were just waiting around until someone asked, ‘Who’s here for supportive care?’” Alice raised her hand.

Special help was needed for a young woman who worked at the WTC and who had 2nd & 3rd degree burns over 75% of her body. “She just walked in the door to go to work,” explains Alice, “and was engulfed by a fireball. She couldn’t understand what was happening.”

Alice was able to focus on the patient while the other doctors and nurses focused on cleaning and treating her burns. Her mission changed when the young woman’s husband arrived. He also worked in the WTC. That morning he was still at home taking care of their baby when he got word his wife was injured. “He was alone and beside himself,” says Alice.

“In a disaster, you have to get people to talk about it,” says Alice, calling on her experience in mental health and as an on-call disaster nurse. The husband was frantic about his wife, her injuries, whether she would live. He was also stunned over the devastating collapse of the two buildings. “They both knew so many people who worked in the towers,” said Alice. He was worried. “Who was all right? Who wasn’t? Who had they lost?”

Alice sat and listened intently as the man talked about his wife, their baby, and their life together. “She’s a fighter,” he said. Throughout the day, she relayed information back and forth, translating “medicalese” into plain English. Occasionally she’d get sent to the supply closet for more saline. They were using buckets of it to clean the young woman’s burns. On one such trip, Alice encountered one of emergency room nurses standing alone, sobbing.

Late in the afternoon, the decision was made to move the woman to the burn unit at New York-Cornell Hospital. “I told him her burns were compatible with life and this was the best place for her to be.”

The woman was transferred at 6:30 pm. At 7 pm Alice and the other volunteers were released.

As of November 6th, the young woman is still in the burn unit, continuing to be a fighter.

“One of the first patients I treated was a 25-year-old New York Stock Exchange worker. She still had her blue vest on. She had eye irritation and right arm pain, a possible fracture. We sent her to the hospital for x-rays. I held her hand as we waited together for an ambulance.

“The real disaster was across the bridge. As the numbers of patients started to decrease, we got permission from Emergency Medical Services to board a bus which took us to City Hall.” As the group searched for triage sites, they “started a journey we will never forget. The amount of ash and papers that littered the streets was incomprehensible. Stranded vehicles were covered with ash. We walked past Ground Zero. The thick gray ash had turned to mud. Boots and shoes littered the street from people running away. The heat was intense. Police and firefighters stood there waiting ...waiting because there was nothing anyone could do at the moment. The silence was profound.”

The triage sites they found were fully staffed. They were directed to a trauma center being formed at Stuyvesant High School and, along with several others, including a New York Times reporter, helped carry boxes of supplies to the school.

“They were just beginning to set up operations. We were split into teams and team B was sent up to the gymnasium to get some sleep so they could relieve our team in a few hours.

“Team A continued to organize stations — eye irrigation, operating room, burns, lacerations — with the hope that people would be coming. The nurses on Team B couldn’t sleep and came back down.

“A wave of people came running into the building from the streets. Someone screamed that a bomb had exploded, but in actuality, another building had collapsed. People started running. The nurses, though, all stayed at their stations. We were going to stay no matter what.

“I decided to assist in the eye wash station. IV bags were hung on lockers with benches in front for people to sit.”

Patrick’s experience in the field, where one has to be fully prepared, paid off again. In his bag he had one of

the few ophthalmoscopes, a device used to check the cornea, inner eye and retina, on the scene.

The relief workers would get one or two drops of local anesthetic in each eye, then each eye was flushed for five minutes. An hour later, they’d be back again. “I was impressed by the way the operation was running. Everyone was working in the same vein.” Patrick got on a first-name basis with one fireman who kept coming back to his station. “I joked with him about it, saying, ‘How’d you like it this time? Over the ears?’ as if I were a barber.”

The NY Times reporter noticed and took a picture of the pair.

Patrick worked until 10:30 p.m., waiting for survivors who never came. Two nurses were anxious to get home to their families and Patrick accompanied them to the Brooklyn Bridge. Erik and Consuelo worked overnight, Erik with relief workers at Ground Zero.

Near the bridge, Patrick was stopped by a reporter and film crew from WPIX. “I told her seven of us from VNS did the best we can in the worst of times. The next day a woman in the office said she sat at home watching the news, waiting for her husband who worked at the Marriott Hotel next to the WTC. She cried when she saw me and said, ‘I knew that the people down there were safe as long as you and the other visiting nurses were around.’”

The images and odors, experiences and feelings remain fresh to Patrick. On reflection, he says he takes “comfort in the way the agency responded. We all helped out in a very big way. The nurses who went to see their patients and listened to them recount their stories are heroes, too. I also take comfort in my relationships at work. This has only reinforced my belief that I’ve found my home at VNS.”

“A wave of people came running into the building from the streets. Someone screamed that a bomb had exploded, but in actuality, another building had collapsed. People started running. The nurses, though, all stayed at their stations. We were going to stay no matter what.”

*Visit our Web Site:
www.vnsny.org*



“walking to work over the Brooklyn Bridge”

Lily Ruan, a visiting nurse with VNS CHOICE, was driving to work in Chinatown from her home in Brooklyn. She learned about the attack when she got to the Brooklyn Bridge and found it closed.

“I went home and called all my patients. All were okay. The next day, though, the phones were out south of Canal Street.” Lily walked over the bridge to check on her patients, a pattern she followed for the next few days.

Everybody had electricity and water. One patient, though, had run out of medication. The prescription had no more refills and the doctor’s phone wasn’t working. Lily managed to get enough to tide the patient over from an obliging pharmacist.

Many of her patients were very worried. “Most were in the war. I tried to calm them. Some who’d been depressed for years now have a different attitude,” Lily says. “They’ve evaluated their lives and have decided to make an effort to be happy.”



“life changing for all of us”

Vince Corso, Coordinator for Spiritual Care & Bereavement Services for VNSNY Hospice Care, was in a team meeting. As reports came in about the first plane, the second plane, the first collapse, the second collapse, the team somehow managed to stay focused on patient care.

“Thanks to the nurses, social workers, chaplains, and volunteers,” says Vince, on September 11th and in the days following, “hospice services in the field never missed a beat. Patients were seen, medications given.”

Vince and VNSNY Hospice Care social worker Stephen Borow were asked to do a series of eight 90-minute crisis intervention sessions with the employees of the law firm, Cadwalader. With offices on Maiden Lane, they’d gone through the trauma of being near Ground Zero. Many had also lost friends and colleagues.

Between 350 and 400 people attended. “Each group was unique,” says Vince. “There were many young people with no experience of death or dying. They wanted to know what to say and do when one of their colleagues, whose husband was lost at the WTC, returned to work.”

After a reflection and guided meditation, Vince and Stephen provided an opportunity for people to react and talk about the kinds of emotions they were experiencing. “We also mingled in some education, ways to cope with the range of feelings. It was as helpful to me as the people we facilitated for.”

For VNS employees, Vince led about 10 memorial services in all five boroughs. The services included interdenominational prayer, a reading, an opportunity for people to talk about their feelings and anxiety, and to pray for people who had

died. “The services were quite moving. There were people who had lost family and friends. They could express grief and feel supported by fellow workers.

“It’s not so much the format as the willingness to be with people and give people a chance to talk. Anger, disbelief, fear...most of the healing comes from expressing feelings.”

Vince has also been working with others at VNS and the city to develop an organized bereavement outreach for the families of firefighters.

“People will bounce back,” Vince says. “We have the psychic and emotional wherewithal to go on. If you notice someone who’s not sleeping, increasingly irritable, out of character or frozen, don’t hesitate to reach out. Embrace the person next to you. This has been really life changing for all of us. Feed your soul. Do something beautiful and don’t feel guilty. Nourish yourself. Don’t get wrapped up in the news.”



“we were the lucky ones”

Carmel Tuths, Program Director for VNS CHOICE, saw the burning towers as she walked to work across 23rd Street. “People were standing there, silently staring up. I asked people coming up from the subway from downtown what had happened: ‘Terrorist attack.’ ‘Planes hit.’ I thought, ‘I have to get to work. There’s going to be mayhem.’”

“We sent five nurses down to Ground Zero. Four others were deployed to hospitals. We started doing assessments and had social workers start to do counseling with staff. Several had family members who worked there. One had an aunt who for was unaccounted for, then found in a hospital, 24 or 48 hours later. One nurse lost her best friend.

“Our nurses all pitched in and went out and worked. They’re troopers. They just all banded together. They all wanted to do what they do — which is taking care of patients.

“The home health aides were wonderful. Many slept over because they didn’t want to leave their patients alone without phones.

“We were the lucky ones ... there’s a lot of solace in being able to do something.”



“hardly been home”

Lisa Baez, VNSNY Hospice Care Team Manager, had just walked into her office in Brooklyn. The receptionist at the front desk told her the news. She made phone calls, first to family, then to fellow hospice workers.

“Visit or call your patients,” Lisa told her team, “and make sure they have all the pain medication they need.”

The Brooklyn Sheriff’s Office called to request volunteers to help staff a triage site at the Brooklyn Bridge. Several nurses went ahead in a police car. Lisa, Patrick Luib, Erik Mortensen and John Ides, collected gauze, saline and other supplies, then followed.

Thousands of people streamed across the Brooklyn Bridge from Manhattan. Some were totally covered in ash from the towers’ collapse. Many had lacerations from flying debris. Lacerations and eye irritations from all the soot in the air were treated on the spot. More serious cases were sent to another triage center at a nearby hotel where, by coincidence, an association of emergency room physicians was holding a conference.

When patients didn’t come to them, Lisa and another nurse went looking for them. As the stream turned to a trickle, some of the nurses went into Manhattan. Lisa went back to the office, and then ran out to buy some clothes for the coming days. She was afraid if she made it home to New Jersey, she might not get back to work. She was determined to be available for her patients when they needed her.

In the weeks since September 11th, she says, “I’ve hardly been home, maybe just once or twice a week.” With traffic still unpredictable, she continues to stay with family nearby. “We always keep in close contact with our hospice patients. They’ve needed a lot of emotional support as well as the reassurance we can give to them.”

“Our nurses all pitched in and went out and worked. They’re troopers. They just all banded together. They all wanted to do what they do — which is taking care of patients.”

Special Relief Fund to Aid VNS Employees

Sadly, 24 employees of the Visiting Nurse Service of New York lost family members in the World Trade Center tragedy. To help these families, VNS has created a special fund. If you would like to contribute, please send a check to:

VNSNY Employee Relief Fund

Attn: Lyle Churchill
107 East 70th Street
New York, NY 10021



“keeping in touch”

Marian Haas, Director, Human Resources, was on her way to a meeting. “Someone said a plane had hit. We thought it was a small plane, off-course.”

As news of the unfathomable events transpiring downtown reached Human Resources, they reached for the phones. “We were in touch with key program and department heads, the Chief Operating Officer, Vice President for Human Resources,” says Marian, naming a few contacts. HR helped with the flow of information, both in and out.

They sought out information about nurses and other staff working in the area near Ground Zero and below 14th Street. About who had missing loved ones. About where to send nurses who wanted to help.

They provided information for managers calling in for help in dealing with their staffs’ fears and anxieties. About transportation problems when the subways in Manhattan shut down.

“The day is such a blur,” says Marian. “It was just incredible something like this could happen. Not until the afternoon did it really sink in here.

“The nurses were so resourceful in finding out about patients, knocking on doors, checking with neighbors and superintendents. One nurse with a van drove others all around.”

The calls to those with missing loved ones was “tough but touching.” Besides seeing what kind of support VNS could offer them, “We wanted to make sure they knew our thoughts and prayers were with them.”

To Order Our Services:

To make a referral to the Visiting Nurse Service of New York, please call:

1-888-VNS-1-CALL
(1-888-867-1225)



“big hearts and special skills”

September 11th was primary day in New York City. Keri Hicks, Division Coordinator, Community Mental Health, saw the first plane hit while she was voting. “My polling place had a clear shot down Washington Street. I raced to get a cab to try to get to work. I knew we’d be busy.”

Keri’s group provides community mental health services for the city, including disaster-related services. “We called the city and told them we were available to assist. The initial 24 hours of any crisis, though, is really all about first response efforts. Mental health response begins a little later. The next day we got the call to be on alert.”

Community Mental Health Services (CMHS) has been involved with many disasters in the city. Social workers spent months working closely with the families of TWA flight #800, and they also provided counseling services after the horrible fire at the Happy Land night club. What happened at the World Trade Center, however, was “like nothing else in scope and emotion,” Keri explains. “We were affected tremendously by the events, and had to find a way to manage our own pain and grief and fears as we helped others.”

Community Mental Health staff are, in Keri’s words, “uniquely ready” to help. While many mental health professionals have clients or patients come to them, Community Mental Health goes wherever the situation takes them. “We’re used to working in stressful conditions. We’re used to working in other people’s spaces.”

The group has also donated countless hours at the family assistance centers, sending 8 to 10 social workers to work 8-hour shifts. Some employees are now giving 20-hours a week on their own time. “We have a lot of people with very big hearts and special skills so they can be really helpful.”

For the first time, CMHS has been responding to the needs of VNS employees as well, working closely with both Hospice and HR, running support groups in all 5 boroughs.

While continuing to deal with the immediate effects of September 11th, CMHS counselors are also gearing up to handle the expected influx of longer-term problems, particularly depression, in the months to come.



“hooking up patients and families”

Millie Bonizio, Patient Service Manager, Congregate Care, was sitting in her office at 1250 Broadway when her husband called, asking, “Did you hear the news?” “I was shocked. I said, ‘You’re lying, get out of here!’” Millie relates the story of one of her nurses, Andrea Dale, who was taking a few well-deserved days off and couldn’t be interviewed.

Andrea, a Congregate Care Nurse, lives and works downtown in what became known as the “frozen zone.” On September 11th, she watched the attack with horror from her apartment. After calling the office, she rushed down to one of her buildings, 310 Greenwich Street, which is right near Ground Zero.

By the time she made her way through the crowded streets, police had already started to evacuate the building. Andrea, who came to VNS from the police department, finagled her way in. Her patients are mostly elderly and some, including one 93-year-old, didn’t want to leave. There was no time for a discussion. The police didn’t even let one home health aide grab her purse before they rushed her and her patient out of the building.

Andrea, using a cell phone with terrible reception, tried to stay in contact with Millie, in an attempt to hook up patients with their families and arrange transportation out of the area. Those who had no families, or whose families lived out of town, were transferred to shelters.

All but one patient at 310 Greenwich was quickly accounted for. A younger woman, wheelchair-bound, couldn’t be found. “We knew she was okay,” says Millie. “She had talked to her mother, but we couldn’t physically find her.” Later VNS discovered the woman had made it to a hotel on her own.

During the following days, Andrea visited her patients in the shelters more as a comforter than as a nurse. She told Millie they were scared and finding it hard to sleep on cots. One patient only stayed a few days until her son arrived from Massachusetts. A cou-

ple in their 80s weren’t so lucky. They were there more than a week until 310 Greenwich reopened.

The residents of 80 North Moore and 40 Harrison were able to remain in their own apartments but faced other difficulties. Only emergency vehicles were allowed in the area. Most shops and businesses were closed. Andrea and other Congregate Care staff worked closely with the Red Cross to make sure the residents had food, medications and other supplies.

Andrea reported that many of her patients are trying to deal with both anxiety and guilt. They’re asking, ‘Why were we spared when so many young people died?’



“we got calls from China, Hong Kong, Malaysia”

For Amy Hop-Yee Mung, a Patient Services Manager who works in the VNS Manhattan office at 1250 Broadway, September 11th wasn’t a good day to begin with. Ginny Field, her Regional Administrator, was on jury duty and a member of Amy’s team — Team 16 — was out on vacation. (Amy manages a team of 13 nurses who provide home health care services to approximately 365 patients in lower Manhattan, including Chinatown. Three other teams — Teams 12, 14 and 15 — also provide home health care services to lower Manhattan.) And then, at about 8:50 am, Amy got a frantic call from one of her nurses saying she had just seen a plane crash into the World Trade Center.

Like many people when they first heard the horrific news, Amy thought it was an accident. As more and more details became known and the scope and gravity of the catastrophe grew, Amy and the other Patient Service Managers immediately began contacting the nurses who were out in the field. They wanted to make sure their nurses were safe and to let them know what had happened. As it turned out, half of Team 16’s nurses had witnessed the event firsthand.

“Can you work in the field?” Amy asked each nurse on Team 16. She knew that they were only human

and that, having seen such a nightmarish thing, it might be difficult for them to continue to care for their patients. But each of Team 16's nurses — including one who had a cousin who worked in the World Trade Center and had not been heard from — stayed on duty. (Five of the nurses helped staff triage units.) Amy told all of the Team 16 nurses to call and check on their families and make sure they were all safe.

"I asked my nurses to stay in touch with me and call every two hours," says Amy.

Within the first hour of the attack, all bridges and tunnels into Manhattan were shut down. Subways and trains stopped running. People were streaming across bridges on foot to get home. By the end of the day, some subways and trains had begun running again on a limited schedule. A number of Team 16's nurses live out on Long Island or, like Amy, in New Jersey. They were worried that if they went home that night, given the uncertainty of the situation, they might not be able to get back into Manhattan the next day to care for their patients.

Amy felt the same way — as did other VNS nurses. The agency began calling hotels to see if it could get rooms for the nurses. But because thousands of people were stranded in the city, it was difficult to find a hotel that wasn't booked solid. Three rooms were finally located at the Warwick Hotel at 54th Street and Sixth Avenue. Amy and six nurses stayed in one of the rooms.

The majority of the patients in lower Manhattan are elderly and frail. Many speak only Chinese or Spanish and quite a few are bed-bound. In the days following September 11th, most were without electricity and phone service and a number didn't even know what had happened. They smelled smoke outside their buildings, and, not surprisingly, they were terribly frightened. The nurses on Teams 12, 14, 15 and 16 made a special point of checking in on each patient, even if the patient was not scheduled to be seen. The nurses wanted to make certain that all of their patients were safe. They also wanted to ease the patients' fears and provide them with the latest news.

"Around this time, we began receiving calls from worried family members who live overseas," says Amy. "We got calls from China, Hong Kong, Malaysia. Since there was no phone service in lower Manhattan, the family members had no way of finding out if their parents or grandparents were safe. So they called us. We were able to tell them that we had already checked on their family members."

Many of the elderly patients that Teams 12, 14, 15 and 16 provide home health care services to live in buildings that have high concentrations of other elderly residents. After checking in on their own patients, the nurses looked in on how the building's other elderly residents were doing. The nurses also helped out in other ways as well. One nurse gave an elderly patient a shower. Since no businesses were open in lower Manhattan, some nurses walked up to pharmacies

above 14th Street to fill their patients' prescriptions. (They also checked to see if any other elderly residents in the building needed their prescriptions filled.)

Due to the fires at the World Trade Center, the air quality in lower Manhattan was particularly

bad. On Thursday, September 13th, Ginny Field, who was back at work because her jury duty had been cancelled, was able to find 200 industrial respiratory masks ("the good ones," says Amy, "the ones with filters"). Since phone service was out and the nurses were all out in the field, it was impossible to reach them. In order to get the masks to the nurses as soon as possible, Millie Moy-Thompson, a per diem nurse, drove Amy down into lower Manhattan so Amy could hand the masks out to the nurses. Amy knew all of her nurse's rounds — she knew the streets the nurses were likely to walk down and the times they were likely to be there. Amy gave each nurse a mask as well as masks for each nurse's patients.

When you speak to Amy about September 11th, she goes out of her way to stress that it was a team effort that got them through those difficult days. "Everyone pitched in," says Amy. "Even VNS nurses who didn't work in Manhattan. They came in and helped us out so our nurses could get a rest."

"The nurses on Teams 12, 14, 15 and 16 made a special point of checking on each patient, even if the patient was not scheduled to be seen."
