‘People believe us’: Retired nurse offers help during coronavirus pandemic

Amanda Cuda, April 4, 2020 Updated: April 5, 2020 8:42 a.m. | Connecticut Post

GREENWICH — It’s hard for Stephanie Paulmeno to not be on the front lines in a health crisis.

Paulmeno, 72, of Old Greenwich, has been a nurse for almost 52 years in various capacities, including as the director of community health planning for the Town of Greenwich. In that position, her responsibilities included helping to prepare the town for possible outbreaks of the avian flu and sudden acute respiratory syndrome, also known as SARS.

Even after retiring in 2009, Paulmeno has been active in her field, starting a small public health consulting firm.

But when the COVID-19 pandemic hit Connecticut, Paulmeno felt helpless. As hospitals prepped for a huge influx of patients linked to the illness, she longed to lend a hand. Yet her age and underlying health problems — including a heart condition — meant she was at high risk for the illness and couldn’t work directly with patients.

Read selections from our Sunday coronavirus special

“I felt so useless,” Paulmeno said. “As a nurse, I had all these skills, and there was nothing I could do.”

However, she soon realized that, even though she couldn’t physically be in a hospital, she could still contribute from a distance. Paulmeno began writing articles that separated valid, evidence-based research on COVID-19 from fraud and conjecture — including the myth that circulated about gargling warm water would help fight COVID-19.

She’s also started doing conference calls with senior groups, providing them with information about symptoms, how to protect themselves, how to prepare in case they get too sick to properly inform family of their end-of-life choices and other crucial topics.
“It’s been phenomenal,” Paulmeno said. “(The seniors) are so appreciative.”

She plans to do other projects, too, such as distance monitoring patients who have been diagnosed with COVID-19 for the Greenwich Department of Health. In Paulmeno’s view, these are all jobs to which she is ideally suited.

“Who’s better than a nurse at infection control and health education?” she said.

Indeed, though retired nurses might be limited by their age and other risk factors, there’s still plenty they can do, said Julia Rosa, 69, of West Hartford, who chairs the Connecticut Nurses Association’s Retired Nurses Group. Rosa said she hasn’t specifically heard any requests from nurses about their options for helping, but she knows there is interest.

“We need tighter communication” about how to get involved, she said.

Like Paulmeno, Rosa is reluctant to get on the frontlines, but is trying to help in any way she can. She’s contacted her local health department and signed up for the Connecticut Medical Reserves, run through the state Department of Public Health. So far, the only request she’s gotten was to help in a long-term care facility, which she had to decline.

“I honestly felt terrible about it, but I’m no help to anyone if I get sick,” Rosa said.

At some point, Paulmeno and Rosa said, the need for medical assistance at the state’s hospitals and health care centers that older retired nurses might be required to help, regardless of their personal risk. “We haven’t been faced with that yet, but we may,” Rosa said.

In the meantime, nurses such as Paulmeno continue to help out wherever they can.

“I’ve been so busy,” she said. “People are so eager for information and people trust nurses. People believe us.”