



**Jersey City  
Medical Center**

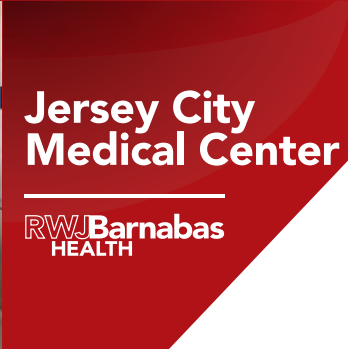
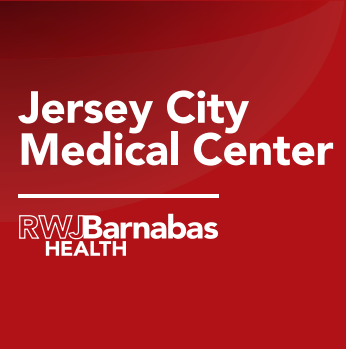
**RWJBarnabas  
HEALTH**



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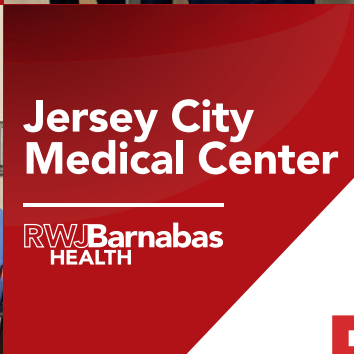


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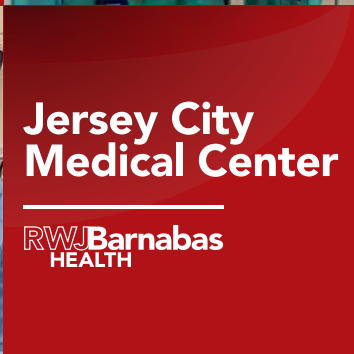
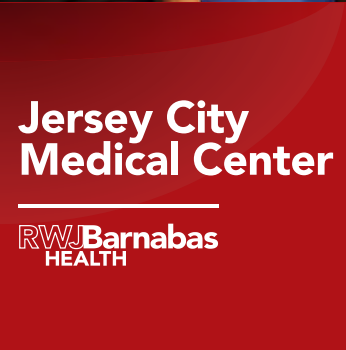
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**Let's shape the  
Future of Nursing  
together.**



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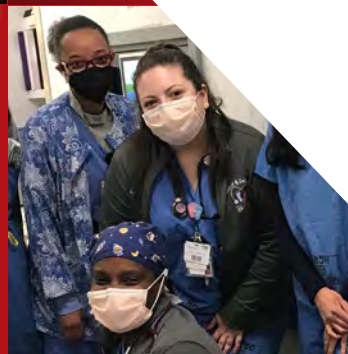
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*Note: Photographs of employees not wearing masks were taken outside of the patient care area during the coronavirus pandemic. Jersey City Medical Center, a facility of RWJBarnabas Health, follows the recommendations of the Centers for Disease Control and Prevention and state health and safety guidance, which currently includes social distancing and use of face coverings.*

## ■ Nursing Leadership 2021

**Margaret Ames, DNP, MPA, RN, NEA-BC**  
*Chief Nursing Officer and  
Vice President of Patient Care Services*

**Babitha Babu, BSN, RN**  
*Nurse Manager, Center for Comprehensive Care*

**Sherwin Balasia, BSN, RN, OCN**  
*Nurse Manager, Infusion Center*

**Renette Berteau, MSN, RN, CCRN**  
*Clinical Operations Manager*

**Therese Boruta, BSN, RN**  
*Manager, Clinical Informatics*

**Karen Caldas, CPHRM, MSN, RN-BC**  
*Director, Clinical Risk Management and Patient Safety*

**Shaun Conover, BSN, RN**  
*Director of Nursing, Greenville Primary Care*

**Vickie DeChirico, MSN, RN, CIC**  
*Director, Infection Control*

**Leah Dungee-Maignan, MSN, RNC-NIC, CBC**  
*Director of Nursing, Maternal Child Services*

**Arlene Eastman, MSN, MPH, RN, CEN**  
*Director of Nursing, Emergency Department*

**Pamela Farley, MSN, ACNP-BC**  
*Chief Nurse Practitioner*

**Marissa Fisher, BSN, RN**  
*Trauma Program Director*

**Claudia Garzon-Rivera, DNP, RN, CNL, CCRN-K, CPHQ**  
*Senior Nursing Director*

**Bernadette Johnson, MSN, RN, ONC**  
*Director of Nursing, 6 West and Renal Hemodialysis*

**Ternita Joy, MSN, RN, NE-BC**  
*Clinical Operations Manager*

**Theresa LaFlam, BSN, RN, NVRN-BC**  
*Nurse Manager, Stroke Program*

**Mabel LaForgia, DNP, RN, CNL**  
*Assistant Vice President, Nursing*

**Rani Lau, BSN, RN, NVRN-BC**  
*Nurse Manager, 7 East*

**Kelly Loo, MSN, RN, CGRN**  
*Director of Nursing, Surgical Services*

**Michele Lopez, MSN, RN, CEN, NE-BC**  
*Director Educational Center for Professional Development*

**Allison McCabe, MSN, RN**  
*Director of Nursing, Critical Care*

**Jennyfer Morel, MPA, BSN, RN, CCCTN**  
*Nurse Manager, ASC*

**Kimberly Palestis, DNP, RN, CEN, TCRN, NEA-BC**  
*Assistant Vice President, Nursing*

**Vito Pascarella, BSN, RN, NHDP-BC**  
*Lead Clinical Operations Manager*

**Sarju Patel, DNP, RN**  
*Director of Nurse Engagement & Magnet Standards*

**Joanne Reich, DNP, RN, NEA-BC, CPHQ**  
*Vice President of Safety, Quality, and Regulatory Affairs*

**Bianca Rosa, BSN, RN**  
*Nurse Manager, 7 West*

**Bonnie Rosenzweig, BSN, RN, CRRN**  
*Quality Management Specialist*

**Erin Salmond, DNP, RN**  
*Director of Nursing, 5 East/6 East*

**Rodolfo Sangalang, DNP, RN, NEA-BC**  
*Director of Nursing, PACU,  
Catheterization Lab & Ambulatory Services*

**Pamela Santiago, MSN, RN**  
*Director of Nursing, 5 West*

**Valentya Tabaka, MBA, BSN, RN, WCC**  
*Nurse Manager, Wound Care*

**Brian Weil, BSN, RN**  
*Clinical Operations Manager*

## ■ Message from our President and Chief Executive Officer



Dear Jersey City Medical Center Nursing Staff,

We have entered a remarkable period of growth and achievement, following the most consequential health event of our times. This year, Jersey City Medical Center's annual nursing report highlights and reaffirms the tremendous contributions of our entire nursing team – the level of skill, professionalism, and compassion that each one of you demonstrates wholeheartedly to all our patients and their families, and to each other, as colleagues.

Jersey City Medical Center is steadfast in our mission of advancing innovative strategies in high quality patient care, education and research to address both the clinical and social determinants of health. With the opening of the Madeline LoRe Foundation Infusion Center, the expansion of our Emergency Department, the addition of new ambulatory sites throughout Hudson County and other service enhancements, and offering social impact programs such as the Green Apple Rx Food Farmacy and the Trauma Recovery Center, we are meeting the healthcare needs of the communities that we serve. And, of course, none of these programs and services are possible without our amazing nursing team, always critical and integral to achieving success with every endeavor.

This nursing team is the best! Jersey City Medical Center is a three-time recipient of the Magnet Award for Nursing Excellence, the highest honor bestowed for nursing care in the nation. As we pursue the Magnet designation for a fourth time, the extraordinary impact and involvement of our nursing team in patient care and hospital operations overall has already been well proven.

On behalf of our patients, families, community members, and colleagues, I extend my gratitude to you, our outstanding nursing professionals. We are so proud of you and thank you for all that you do.

A handwritten signature in black ink, appearing to read "Michael Prilustky". The signature is fluid and cursive, with a long horizontal stroke extending to the right.

**Michael Prilustky**  
President and Chief Executive Officer  
Jersey City Medical Center



## ■ Message from our Chief Nursing Officer



Every day, across our inpatient, acute care main campus and outpatient patient care areas, the Jersey City Medical Center nurses provide exceptional care to our patients, families and communities. Nursing Theorist, Jean Watson, RN, PhD has said, "...the act of caring is the first step in the power to heal."

Our nursing staff, including our APRNs and formal nurse leaders, were a central light in the darkness of the pandemic. You were most often and for longer periods of time at the bedside with our Covid patients and other patients who needed care at such a challenging time. For a second year, you were courageous and skillful in work you did.

Nursing remains the most trusted profession in the nation and yet nurses are highly concerned about their ability to provide the best care possible faced with a staffing shortage. We, at RWJBarnabas Health, and the nursing profession, will pivot to meet this need and the path chosen needs to be one ensures the high quality outcomes that you have delivered at our Magnet designated organization. Using our shared governance approach to nursing practice we will persevere and innovate to meet the needs of our nurses and our patients.

Join me in appreciating the outstanding professionals and team members that we work alongside daily!

With great sincerity and humble thanks,

*Margaret Ames*

**Margaret Ames, DNP, MPA, RN, NEA-BC**  
Chief Nursing Officer and  
Vice President of Patient Care Services

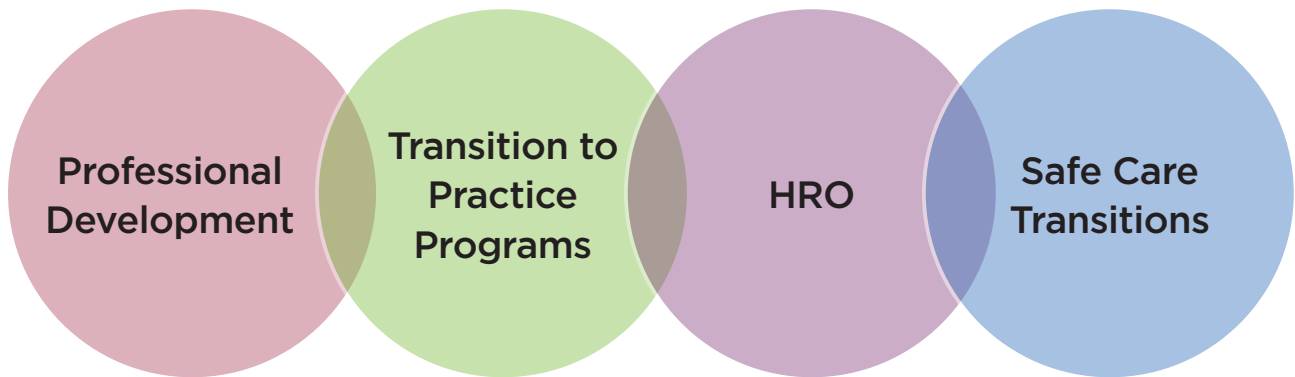


# Nursing Strategic Plan 2018 – 2021

The 2018 – 2021 nursing strategic plan is vital to moving the nursing division along the path of nursing excellence. Using the Magnet manual as a roadmap, this strategic plan focuses on clinical excellence through the high reliability organization process for safety and quality while maintaining a commitment to supporting continued professional development and safe care transitions for patients.

## Goals:

1. Improve patient outcomes and nursing retention through Practice Transition programs.
2. Reduce patient readmissions through inter-professional and cross-continuum collaboration for safe care transitions.
3. Enculturate High Reliability into nursing structure, support, tools, mentorship, and evaluation through analysis and reporting.



## Priority Initiatives:

1. Practice Transition Program (PTAP)
  - Successfully Implement a nationally accredited RN residency transition to practice program
2. CMS Star Readmission Team to reduce 30 day readmissions
  - Reviewing current readmission data
  - Literature Review
  - RWJBH Site Visits
  - Explore new model for inter-professional team focus on patients at high risk for readmissions
  - Continue focus on Medication Management across the continuum with complete & accurate home medications list upon admission
3. Enculturate High Reliability into Nursing
  - Education and training
  - Integrate into Shared Governance Councils: charters with patient outcome focus
  - Clinical Leadership: a department/unit will present their patient outcomes
  - Quarterly unit showcase meetings with the CNO with a focus on the unit's patient outcomes
4. Partner with Ambulatory to promote excellence in ambulatory nursing practice
  - Implement bi-monthly Ambulatory Shared Governance Council and Integrate into JCMC Shared Governance Structure
  - Review and achieve data requirements for Nurse Engagement, Patient Engagement, and Nurse Sensitive Indicators
5. Increase percentage of all nursing staff and nurse leaders certified by 2020.
6. Sustain > 80% RN with BSN Degree or higher





**TRANSFORMATIONAL  
LEADERSHIP**



# The guiding force of JCMC's Nursing Professional Practice Model

The professional practice model (PPM) displays the nursing framework for the delivery of exceptional care by nurses and the interdisciplinary care team. The PPM depicts how nurses' practice, collaborate, communicate and develop professionally to provide the highest quality care for the patients, families, and communities they serve (ANCC, 2021).

At Jersey City Medical Center, the theory and concepts noted in the model reflect the Organization's mission, vision, and values while also embracing the diversity of the patient population in our urban location. Members of the Magnet Champion Council take the lead in reviewing and updating the Model to ensure it remains current with our changing practice environment; emphasizing the important role nurses at JCMC have in providing safe and effective care across the continuum and in every setting.

## Jersey City Medical Center's Nursing Strategic Plan

The strategic plan continues to focus on care transitions and practice transition for sustained professional practice excellence and improved patient outcomes. JCMC's professional practice model (PPM) drives its nursing strategic plan and guides nursing practice.

*American Nurses Credentialing Center. (2021). 2023 Magnet application manual, Silver Spring, MD.*







MATERNAL FETAL  
MEDICINE

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# STRUCTURAL EMPOWERMENT

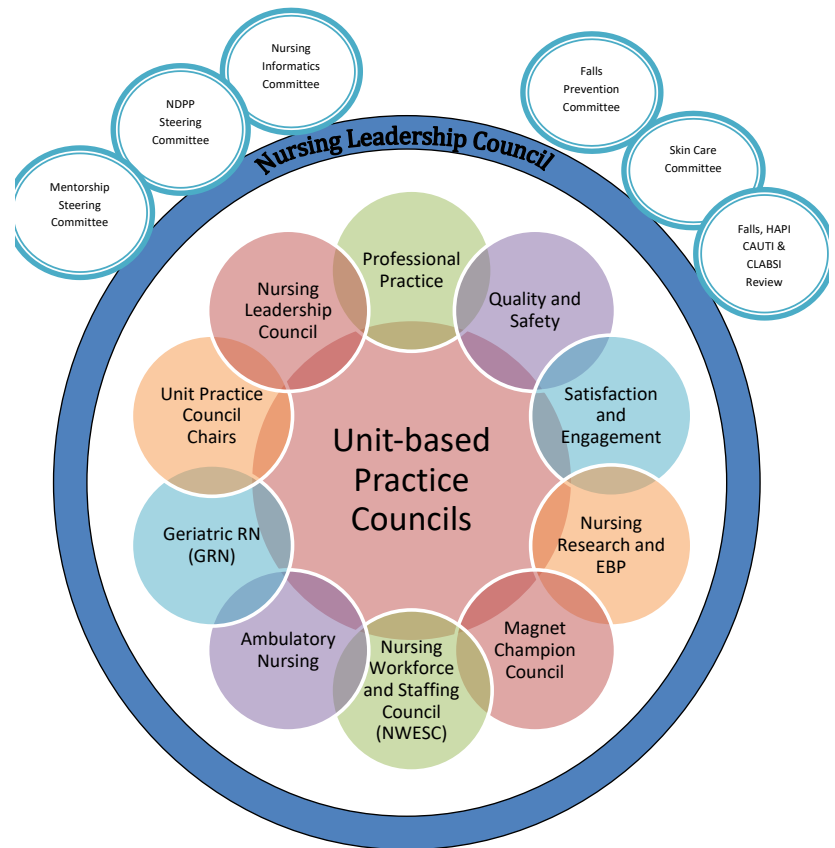


# Shared Governance at Jersey City Medical Center

## Promoting a culture of Nursing Excellence at JCMC

Jersey City Medical Center utilizes a robust shared governance structure, which embodies the commitment to shared decision making for professional practice.

This model empowers nurses throughout JCMC to make decisions about clinical practice standards, quality improvement, staff and professional development, and research.



## Professional Practice Council

**Chair:** Regina O'Donnell, MSN, RN, CCRN

**Advisor:** Mabel LaForgia, DNP, RN, CNL

### Council Purpose:

- The Professional Practice Council facilitates improvements to nursing practice in alignment with strategic priorities and goals within the organization.
- Serve as a forum to exchange best practices that have the potential to impact clinical areas across disciplines.

### Goals:

- Review, revise, and approve policies and procedures and standards of care related to nursing practice.
- Collaborate with interdisciplinary team to improve the delivery of quality patient care.
- Participate in the review and communication new clinical products and equipment impacting nursing practice.

### Objectives:

- Establish consistent membership and engagement from all nursing units.
- Implement best nursing practices to improve safety, services, and quality outcomes for patients, families, and populations served.
- Active participation and contribution in the System wide PNPC to support the strategic goals in nursing practice.

### Expected Outcomes:

- Implement and maintain standards of clinical nursing practice consistent with Magnet Recognition Program standards, evidence-based practice and regulatory requirements.
- Provide high level oversight for achieving excellent outcomes in patient quality and safety, patient satisfaction, and staff engagement



**Membership:**

- Open to all RN's in all nursing units at JCMC
- All nursing units are represented
- Interdisciplinary members

**Membership List:**

<b>Name</b>	<b>Unit</b>
Agnes Allado, BSN, RN	Same Day Surgery
Laura Alves, MSN, RN	Mother/Baby
Maria Bravo, BSN, RN	Operating Room
Mary Jane Geagoni, BSN, RN	Medical Surgical Unit I
Alelei Konev, BSN, RN	Endoscopy
Sean Lo, BSN, RN	Informatics
Shaden Mustafa, MSN, RN	Critical Care
Justina Oseagulu, BSN, RN	Behavioral Health
Marlene Paredes, BSN, RN	OP Behavioral Health
Maria Rufin, MSN, RN	PACU
Cristina Simeone, MSN, RN	Director, Clinical Resources
Amanda Tobias, BSN, RN	Behavioral Health
Elizabeth Trelles, BSN, RN	Telemetry 6E
Heidi Wiertzema, MSN, RN	Education Department

**2021 Goals**

Serve as a forum to exchange best practices that have the potential to impact clinical areas across disciplines

To provide high level oversight for achieving excellent outcomes in patient quality and safety, patient satisfaction, staff engagement and fiscal accountability.

Collaborate with nursing and interdisciplinary team to improve the delivery of quality patient care.

Support the Magnet 2021 re-designation process by supporting the 2019 standards

Review, revise and approve policies and procedures and standards of care related to nursing practice.

Collaborate with interdisciplinary team to improve the delivery of quality patient care.

Participate in the review and communication of new clinical products and equipment impacting nursing practice

**2021 Accomplishments**

Reviewed, revised, and approved 3 policies related to nursing practice.

- Care of patient's with latex sensitivity
- Therapeutic Phlebotomy
- Survivorship Care Plan

Sustained consistent membership and engagement from staff nurses on different units, nursing education, clinical nurse resource director, pharmacist and lab

Dissemination of information regarding best practices from the system-wide Professional Practice Council.

Recommendations on best practices during the COVID 19 pandemic: Barcode Medication Administration at the bedside during COVID-19 pandemic. Modified process of posting COVID-19 patient armbands to room doors to minimize the necessity to disinfect equipment and minimize patient and caregiver exposure to virus

Nursing practice discussions on best practices on CAUTI and CLABSI prevention

Approved the utilization of Extended IV tubing and IV pump placed outside the patient's room and the use of IV line holder

Collaboration with Laboratory department and Pharmacy improving blood culture collections, Heparin dosing and Vancomycin IV monitoring

Assisted in 2021 Magnet activity-Nurse Excellence Award Ceremony

Member participation at the Community Outreach Program toward health promotion and disease prevention.

# Quality & Safety Council

**Chair:** Shaden Mustafa, MSN, RN

**Advisor:** Claudia Garzon-Rivera, DNP, RN

**Council Purpose:**

To evaluate nursing quality performance metrics and nurse sensitive indicators to maintain standards of clinical nursing practice and safety consistent with evidence-based practice and requirements of regulatory agencies.

**Goals:**

- Contribute to the nursing strategic plan goal to reduce the number of CAUTIs, CLABSIs, Falls, Falls with Injury, and HAPIs
- Contribute to the organizational strategic plan goal to improve the delivery of care related to nursing quality and safety

**Objectives:**

- Members will conduct CAUTI and CLABSI monthly unit audits and disseminate trends and reinforce standards of care to UPC
- Members will serve as CAUTI, CLABSI, Falls, Falls with Injury, and HAPI prevention champions
- Members will review outcomes related to Nurse Sensitive Indicators monthly and disseminate results to UPC
- Members will develop, review, and/or revise policies directly related to quality & safety in collaboration with the Policy Committee quarterly

**Expected Outcomes:**

- Improve 5 target priority areas from audits i.e. CAUTI, CLABSI
- Maintain Nurse Sensitive Indicators below the established benchmark for at least 3 of the 4 quarters
- Review and/or revise at least 4 nursing policies related to medication safety, clinical equipment, and/or patient safety.

**Membership List:**

<b>Name</b>	<b>Unit</b>
Claudia Garzon-Rivera, DNP, RN	Senior Director of Nursing
Shaden Mustafa, MSN, RN	Critical Care
Mabel LaForgia DNP, RN	AVP, Nursing Administration
Chi-Yuan Chang, BSN, RN	L&D
Brit Destafano, BSN, RN	Float
Theresa LaFlam, MSN, RN	Stroke Manager
Treesa Panjikunnel, MSN, RN	Stroke Coordinator
Vicki DeChirico, MSN, RN	Infection Prevention
Willie Cruz, CIC	Infection Prevention
Aurea Vallo, BSN, RN	6E
Amanda Tobias, BSN, RN	5W
Alelei Konev, BSN, RN	Endo
Eric Blumenstyk, BSN, RN	ED
Catherine Manza, MSN, RN	Nursing Educator
Yeonette Gaskin, BSN, RN	7W
Heidi Wiertzema, MSN, RN	Nursing Educator
Patrycja Wojewoda, BSN, RN	NICU
Regina O'Donnell, MSN, RN	Cath Lab
Sandy Moreau PharmD, BCPS	Pharmacy
Sean Lo, BSN, RN	Informatics
Dominique Williams-Kemp, MSN, RN	Nursing Educator
Cristina Simeone, MSN, RN	Clinical Resource Director
Jenna Bartholomew, BSN, RN	Wound Care Coordinator
Valentyna Tabaka, BSN, RN	Wound Care Manager
Kathleen Ansay, MSN, RN	Endo
Elizabeth Trelles, BSN, RN	6E
Justina Oseagulu, BSN, RN	5W
Anabela Cunha Almeida, BSN, RN	Oncology
Maria Rufin, MSN, RN	PACU
Rani Lau, BSN, RN	7E Manager
Maria Jemimah Bravo, BSN, RN	OR



## 2021 Goals:

Improve target priority areas from CAUTI Prevention audits

Overall Percent Compliance for Urinary Catheter Protocol- Sustaining 98%

Target Priority Audit Areas

- Incontinence care documentation 95% (new)
- Urine flow unobstructed (i.e. tubing kinking, no dependent loops, bag not overfilled)-Sustaining 97%

## 2021 Accomplishments

### Top CAUTI prevention areas:

1. Is there an order and indication
2. Nursing documentation for clinical indication
3. Is indwelling urinary catheter in place as per nurse driven protocol
4. Is the indwelling urinary catheter secured with stat-lock device
5. Is closed drainage system intact
6. Is urine flow unobstructed
7. Is urine collection bag below level of bladder
8. Foley Care provided at least once per shift (new-added September)
9. Incontinence Care provided (new-added September)

Improve target priority areas from CLABSI Prevention audits

Overall Percent Compliance for CLABSI Prevention Protocol-Improving to ↑95%

Target Priority Audit Areas

- Nursing Documentation of Central Line Need-Trending up to ↑96%
- Chlorhexidine Sponge Dressing (Biopatch) & Transparent Dressing Intact-Trending up to ↑97%

### Top CLABSI prevention areas:

1. Type of Central Line & Insertion Location
2. Date of Insertion
3. Nursing documentation for indication of Central Line
4. Nursing documentation for site condition
5. Nursing documentation for drainage
6. Nursing documentation for patency
7. Daily CHG Bath (newly added in October)
8. Central Line ports with Swab Caps
9. Biopatch & Transparent Dressing Dry & Intact
10. Dressing date/time within 7 days
11. Extension devices (end caps) without visible blood
12. All IV bags dated every 24 hrs
13. Separate port for TPN (including lipids)
14. All continuous tubing changed every 96-hours
15. All intermittent tubing changed every 24 hours

Maintain Nurse Sensitive Indicators below the established national benchmark (NB) for at least 3 of the 4 quarters

### Falls-Inpatient Units

### Inpatient Falls

2021 Goal 1.65 (2020 falls rate of 1.94)

Total Fall #/Rate: 141/1.90

Although 2021 goal not reached rate is under the 3Q2021 NDNQI National Benchmark Mean

Inpatient Falls with Injury

2021 Goal 0.14 (2020 13 falls with injury rate of 0.18)

Total Fall with Injury #/rate: 18/0.24

Although 2021 goal not reached rate is under the 3Q2021 NDNQI National Benchmark Mean

### Falls with Injury

NDNQI 4Q19-3Q21 (consecutive quarters-2Q20 not reported)

Outperforming:

7E: 7 of 7

7W: 7 of 7

6E: 5 of 7

6W: 7 of 7

CCU: 7 of 7

ICU: 6 of 7

Neonatal: 7 of 7

4E: closed

3E: 4 of 6

5W: 7 of 7

### Falls-Ambulatory Units

2019 Total # of falls 66

2020 Total # of falls 75

2021 Total # of falls 78

**Falls-Ambulatory Falls with Injury**

2019 Total # of falls with Injury 5  
 2020 Total # of falls with Injury 9  
 2021 Total # of falls with Injury 7

NDNQI 4Q19-3Q21 (consecutive quarters-2Q20 not reported)

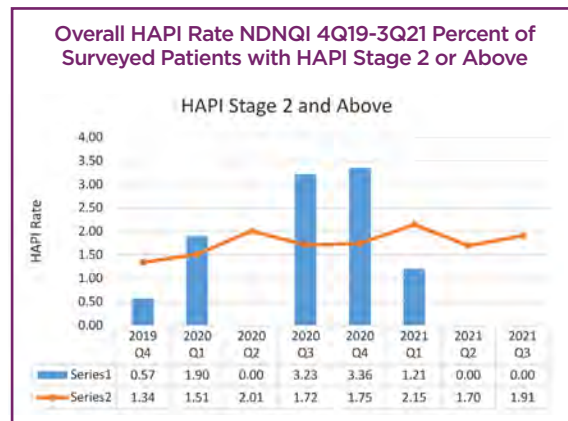
Outperforming:  
 PESS: 4 of 5  
 ED Satellite: 3 of 4  
 Main ED: 3 of 4  
 ATU: 5 of 5  
 CCC: 4 of 4  
 5E: 6 of 6  
 Cath Lab: 5 of 5  
 IR: 5 of 5  
 Endo: 5 of 5  
 Infusion: 5 of 5  
 Renal Dialysis: 6 of 6  
 ASC: 4 of 4  
 PACU: 5 of 5  
 PAT: 6 of 6  
 SDS: 6 of 6

Maintain Nurse Sensitive Indicators below the established national benchmark (NB) for at least 3 of the 4 quarters

**Reduce HAPIs**

NDNQI 4Q19-3Q21 (consecutive quarters-2Q20 not reported)

Outperforming:  
 CCU: 4 of 6  
 ICU: 5 of 6  
 7E: 6 of 6  
 7W: 5 of 6  
 6E: 2 of 6  
 6W: 4 of 6  
 Neonatal: 6 of 6



Maintain Nurse Sensitive Indicators below the established national benchmark (NB) for at least 3 of the 4 quarters

**2021 Stroke Report**

**2021**

Door-To-Needle YTD Goal: 45 minutes or less in 50% of eligible patients

4/6 eligible pts received Alteplase <45 min Average: 43 minutes

Stroke Education

NB: 93.6% JCMC: 97.4%

Dysphagia Screening NB: 83% JCMC: 92%



<p>Maintain Nurse Sensitive Indicators below the established national benchmark (NB) for at least 3 of the 4 quarters</p> <p><b>CAUTI</b></p>	<p>NDNQI 4Q19-3Q21 (consecutive quarters-2Q20 not reported)</p> <p>Outperforming:</p> <p>CCU: 6 of 7</p> <p>ICU: 3 of 7</p> <p>7E: 7 of 7</p> <p>7W: 7 of 7</p> <p>6E: 6 of 7</p> <p>6W: 5 of 7</p>
<p>Maintain Nurse Sensitive Indicators below the established national benchmark (NB) for at least 3 of the 4 quarters</p> <p><b>CLABSI</b></p>	<p>NDNQI 4Q19-3Q21 (consecutive quarters-2Q20 not reported)</p> <p>Outperforming:</p> <p>CCU: 5 of 7</p> <p>ICU: 3 of 7</p> <p>7E: 7 of 7</p> <p>7W: 6 of 7</p> <p>6E: 5 of 7</p> <p>6W: 6 of 7</p> <p>NICU: 7 of 7</p>
<p>Review and/or revise at least 4 nursing policies related to medication safety, clinical equipment, and/or patient safety.</p>	<p><b>Policies Updated or Created:</b></p> <ol style="list-style-type: none"> <li>1. Insertion and Maintenance of Central Venous Catheters (CVC)</li> <li>2. Adult Urinary Catheter Insertion, Maintenance &amp; Automatic Discontinuance</li> <li>3. Continuous Bladder Irrigation</li> <li>4. Nurse Initiated Lactic Acid and Blood Cultures for the Identified Severe Sepsis/Septic Shock Patient Adult</li> <li>5. Peripherally Inserted Central Catheter (PICC) Insertion with Ultrasound Guidance using 3CG Modified Seldinger Technique (MST)</li> </ol>
<p><b>Process Updates/Approval</b></p>	<ol style="list-style-type: none"> <li>1. Restraint Audit Data</li> <li>2. Restraint Audit Updates</li> <li>3. Reinforcement of Restraint Requirements</li> <li>4. Fall prevention audits and plans</li> <li>5. CAUTI/CLABSI prevention audits and plans</li> <li>6. Bard SureStep Foley Best Practice Virtual Training</li> <li>7. Bard SureStep Foley Insertion Virtual Training</li> <li>8. Bard SureStep Foley Maintenance Virtual Training</li> <li>9. DigniShield Stool Management In-service</li> <li>10. Lobes of the Brain Stroke Defecits Overview</li> <li>11. Safety Alert - Baxter Pump</li> <li>12. Safety Alert - ChloroPrep Shortage</li> <li>13. Safety Alert - Sodium Citrate Vacutainers</li> <li>14. SBAR - Linen Loss</li> <li>15. SBAR - Communication CVC Kits</li> <li>16. SBAR - Foley Catheter Kit Supply Disruption</li> <li>17. Care Considerations of Older Adults</li> <li>18. SBAR - Needles and Syringes</li> </ol>

# Satisfaction and Engagement Council

**Chair:** Sonia Freire, BSN, RN

**Advisor:** Mabel LaForgia, DNP, RN, CNL,  
Assistant Vice President, Nursing  
Sarju Patel, DNP, RN, Director of Nurse Engagement  
& Magnet Standards

**Council Purpose:**

To promote resilience and nursing excellence through engagement and implementation of nurse driven goals with the drive to increase satisfaction for both patients and staff.

**Goals:**

- SEC will Host the Virtual/ In-Person Nurse Excellence Awards by November 2021
- SEC will update the process for Nominating a deserving RN for the Daisy Award
- SEC will Host a Daisy Award celebration for the Daisy award winners and recognize all nominees
- Create/execute Nurse’s Day agenda
- Simplify the very complex NDPP Clinical Ladder Application and Advocate for nurses to participate
- Encourage new members to join and sustain attendance in the SEC meetings
- Promote and encourage nurses to participate in Nurse Satisfaction Survey

**Objectives:**

- Establish consistent membership and engagement from all nursing units.
- Implement best nursing practices to improve safety, services, and quality outcomes for patients, families, and populations served.
- Active participation and contribution in the System wide PNPC to support the strategic goals in nursing practice.

**Accomplishments:**

- SEC hosted the Virtual/ In-Person Nurse Excellence Awards in November 2021
- SEC successfully restructured the Daisy Award Nomination Process in lieu of the Pandemic

- SEC Facilitated In-Person as well as Virtual Nurses Day activities
- 15 new Nurses are now enrolled in the NDPP Clinical ladder
- The Nurse Satisfaction Survey for 2020 had 97% response rate

**Membership:**

- Open to all RN’s in all nursing units at JCMC
- All nursing units are represented
- Interdisciplinary members

**Membership List:**

Name	Unit
Sonia Freire, BSN, RN	SDS
Brittany Smith, BSN, RN	L&D
Aurea Vallo, BSN, RN	6E
Regina O’Donnell, MSN, RN	Cath Lab
Erica Francisquini, BSN, RN	6E
Catherine Manza, MSN, RN	Education
Dominique Williams-Kemp, MSN, RN	Education
Laura Alves, MSN, RN	3E
Justina Oseagulu, BSN, RN	5W
Doreen Jones, BSN, RN	Cath Lab
Jessica Zigman, BSN, RN	ICU
Maria Jemimah Bravo, BSN, RN	OR
Ngozi Oguejiofo, BSN, RN	CCU
Alelei Konev, BSN, RN	Endo
Maria Rufin, MSN, RN	PACU
Evangel Anyakoha, BSN, RN	6W
Katlyn Carter, BSN, RN	CTICU
Sarju Patel, DNP, RN	Director of Nurse Engagement and Magnet Standards



# Nursing Research and Evidence Based Practice Council

**Chair/Advisor:** Mabel LaForgia, DNP, RN, CNL  
(January to June 2021)

**Chair:** Amanda Tobias, BSN, RN, PMH-BC  
(July 2021 to December 2021)

**Council Purpose:**

- The Nursing Research and Evidence Based Practice Council facilitates contribution to the body of nursing knowledge through research endeavors within the organization
- Fosters staff member knowledge and skills in nursing research and evidence-based practice

**Objectives:**

- Utilize and promote the use of Johns Hopkin evidence-based practice tools
- Review and approve policies related to nursing research
- Increase council member’s knowledge and skill in evidence-based practice and research methodologies
- Cultivate an environment of clinical inquiry that will encourage increased number of nursing research studies and implementation of best practices at JCMC

**Expected Outcomes:**

- Complete one shared research project or evidence-based practice project in 2021

**Membership:**

- Open to all JCMC RN’s in all nursing units
- Interdisciplinary collaborations

**Membership List:**

Name	Unit
Mabel LaForgia, DNP, RN	Nursing Administration
Kimberly Palestis, DNP, RN	Nursing Administration
Britanny Haliani, MLS	Director, Medical Library
Amanda Tobias, BSN, RN	Mental Health Open Unit
Kathleen Ansay, MSN, RN	Nursing Education
Maria Jemimah Bravo, BSN, RN	Operating Room
Christopher dela Victoria, MSN, RN	Nursing Education
Michelle Dickerson, PhD(c), RN	Nursing Education
Sean Lo, BSN, RN	Informatics
Arvee Lopez, MSN, RN	Nursing Education
Blythe Johnson, BSN, RN	OP Behavioral Health
Barno Makhamadaliyeva, BSN, RN	CTICU
Matthew Mero, BSN, RN	PACU
Regina O’Donnell, MSN, RN	Cardiac Catheterization Lab
Justina Oseagulu, BSN, RN	Mental Health Open Unit
Kavita Peter, MSN, RN	Nursing Education
Maria Rufin, MSN, RN	PACU
Lismary Suarez Quintanilla, BSN, RN	Intensive Care Unit
Elizabeth Trelles, BSN, RN	Post Intensive Care Unit
Janielle Viuya, DNP, APN	Geriatric NP, NICHE Coordinator
Heidi Wiertzema, MSN, RN	Nursing Education

**2021 Goals:**

Review and approve at least 4 research and EBP activity involving nurses at JCMC
Complete one nursing research project and disseminate the findings internally and externally
Develop a structured process to support shared governance council and unit practice councils when clinical inquires arise by providing evidence-based recommendations for change in practice
Plan at least one main event per year to foster staff member knowledge and skills in evidence-based practice through formal and informal interactive educational offerings

**2021 Accomplishments**

Reviewed research and EBP activity involving JCMC nurses, including pain management protocol in critical care unit, non-pharmacological prevention of delirium among older adults, restructuring the UPC to improve decisional involvement of staff nurses, medication management audit, rapid response communication, gamification and using fitness tracker to improve health of the nurse, and overcoming barriers to achieve nurse certification.
The Nursing Research Council has an ongoing IRB-approved council project called “A qualitative analysis of the lived experience of workplace violence on nurses and nursing personnel and their transition back to the workplace.” The sub-committee called Nursing Assault Research Team completed the Focus Group activities and transcripts.
Discussed steps to improve nursing process at JCMC, step-by-step guide to having a clinical ladder project, and the Institutional Review Board (IRB) process.
Planned and conducted First Virtual Nursing Research Fair on August 19, 2021. Seven researchers presented their findings. Chief Nursing Officer Dr. Margaret Ames was the main speaker, and multiple representatives from varied disciplines participated. A survey was conducted after the event to quantify quality of content, effectiveness, and organization in order to conduct better events in the future.



# Magnet Champion Council

**Chair:** Nicolle Reyes, BSN, RN

**Advisor:** Mabel LaForgia, DNP, RN, CNL,  
Assistant Vice President Nursing

Sarju Patel, DNP, RN, Director of Nurse Engagement  
& Magnet Standards

**Council Purpose:**

To facilitate staff involvement in Magnet activities, and promote sustained engagement related to nursing practice and excellence in both inpatient and ambulatory units

**Objectives:**

- Recruit consistent membership from all in-patient units and ambulatory areas
- Implement strategies to support an ongoing environment of nursing excellence and professional growth such as updating Magnet RNO presentation, developing a booklet describing JCMC shared governance structure and process
- Promote nursing professional certification
- Update unit Magnet boards at a minimum of quarterly

**Expected Outcomes:**

- Increase engagement from nurses in ambulatory setting in nursing councils and other shared governance activities
- Maintain up to date unit specific goals
- Achieve 55% nursing professional certification by 2020
- Sustain greater than 80% BSN degrees

**Membership List:**

Name	Unit
Nicolle Reyes, BSN, RN	6 West
Regina O'Donnell, MSN, RN	Cath Lab
Amanda Tobias, BSN, RN	5 West
Justina Oseagulu, BSN, RN	5 West
Maria Jemimah Bravo, BSN, RN	OR
Liliana Segovia, BSN, RN	Critical Care
Julie Pacillo, BSN, RN	7 East
Sarah Michelle Mercado, BSN, RN	6 West
Stefanie Orrico, BSN, RN	7 East
Sarju Patel DNP, RN	Director of Nurse Engagement and Magnet Standards

**2021 Goals:**

Support the Magnet 2021 redesignation process by supporting the new 2019 standards
Mentor and partner with the ambulatory councils to support and create awareness about the shared governance council and its activities
Support ongoing environment and expectation of nursing excellence and ongoing professional development and growth. Implement two strategies that will increase nurses' knowledge and engagement in shared governance
Partnership event with professional organizations promoting nursing in the community

**2021 Accomplishments**

Ongoing support of Magnet Champions in doing showcases which highlights the goals and accomplishments of each floor which aligns with the new 2019 magnet standards
Developed a shared governance pamphlet which can aid in spreading awareness of shared governance councils as early as during RNO
Sustained greater than 80% of nurses having their BSN degree and promoted nursing certifications
Active participation with volunteering with the with Sigma Theta Tau in promoting nursing in middle schools and actively tapping different organization for community work (PNANJ - Hudson subchapter)

# Unit Practice Councils (UPC) Chairs

**Chair:** Brit Destefano, BSN, RN

**Advisor:** Mabel LaForgia, DNP, RN, CNL,  
Assistant Vice President Nursing

Sarju Patel, DNP, RN, Director of Nurse Engagement  
& Magnet Standards

**Council Purpose:**

The Unit Practice Council (UPC) Chairpersons' Council is a forum where the chairs of each department's UPC come together to provide input and feedback on shared decision-making topics. These topics relate to clinical practice standards, quality improvement, staff professional development, research and other issues identified during unit based UPC meetings. This council assists with the standardization of UPC structure and process and the integration of best practices amongst all UPCs.

**Objectives:**

The UPC is a forum "in which nurses are formally organized to make decisions about clinical standards, quality improvement, staff professional development, and research" (ANCC, 2014)

**Expected Outcomes:**

Achieve at least 75% attendance and participation of UPC chairs from each unit/department. Establish individualized unit specific goals for each units/ departments UPC that are current, relevant and aligned with the 2020 Nursing Strategic Plan.

**Membership List:**

Name	Unit
Regina O'Donnell, MSN, RN	Cath Lab
Alelei Costales-Konev, BSN,RN	Endo
Maria Rufin, MSN, RN	PACU
Elizabeth Trelles, BSN, RN	6 East
Stephanie Ricciardi, BSN, RN	ICU
Maria Jemimah Bravo, BSN, RN	OR
Justina Oseagulu, BSN, RN	5 West
Brit Destefano, BSN, RN	Float
Julie Pacillo, BSN, RN	7 East
Sarju Patel, DNP, RN	Director of Nurse Engagement and Magnet Standards

**2021 Goals:**

To support unit UPC chairs with their UPC meetings/ensure UPC meetings are happening each month.

Increase collaboration between UPC chairs and unit leadership.

Monitor and track measurable unit-specific goals and Nurse Sensitive Outcomes and provide action plans for improvement.

Bridging the gap between council/units and leadership.

**2021 Accomplishments**

Utilized GoTo online meetings to ensure UPC council meetings continued during covid-19 in-person meeting restrictions.

Re-established utilization of UPC resolution tool.

Members identified Nurse Sensitive Indicators during unit based UPC meetings and implemented strategies for improvement.

Collaboration with nursing leadership through participation in nursing leadership council.



# Nurse Workplace Environment and Staffing Council (NWESC)

**Chair:** Barbara Pangilinan, BSN, RN

**Advisor:** Margaret Ames, DNP, RN

**Mission:**

To promote and sustain a healthy workplace environment for the nurses of Jersey City Medical Center

**Council Purpose:**

This Nursing Shared Governance council was formed as part of an innovative pilot program created by the Organization of Nurse Leaders (ONL) of NJ's Advocacy Committee. This program is designed to empower nurses to create a work environment best suited for patient safety. This statewide initiative includes nine participating hospitals in New Jersey. This council supports staff nurses and nurse leaders ensuring best patient outcomes by openly discussing best practices for a healthy and effective workplace environment.

**Goals:**

- Increase NWESC membership in staff nurses in all nursing departments
- Maintain 51% active membership of staff nurses from various work settings, including ambulatory settings.
- Continue to deepen the council's knowledge of the nursing work place environment and factors influencing the health work environment

**Objectives:**

- Educate new members on the synergy model of environment: skilled communication, true collaboration, effective decision making, and authentic leadership
- Campaign and vet new members for the council
- Continue to review and advise on workforce indicators, such as productivity, OT, and vacancies
- Educate and promote the importance of self-care to enhance and maintain resiliency

**Accomplishments:**

- Activated new members for the council consisting of different nursing departments: PACU, CTICU, Ambulatory Care, 5West, Education, Nursing Administration.
- Enrolled new members in NWESC's educational sessions for the synergy model of environment for the coming year.
- Older staff members have a deeper knowledge of nursing productivity and how various factors such as OT, UPTO, FMLA, Intermittent FMLA, and vacancies affect it
- Nursing units scored above the national average in the benchmarked Nursing Engagement Survey.

**Membership List:**

<b>Name</b>	<b>Unit</b>
Margaret Ames, DNP, RN	Nursing Administration
Diego Castro, RN	7 East
Shaun Conover, BSN, RN	Greenville Primary Care
Darby Debonis, BSN, RN	7 West
Leah Dungee, MSN, RN	DON, MCH
Rochelle Hreczny, BSN, RN	CCU
Rochelle Lizo, BSN, RN	7 West
Allison McCabe, MSN, RN	DON, Critical Care
Stanley Owusu, BSN, RN	Nursing Finance
Kimberly Palestis, DNP, RN	AVP, Nursing
Barbara Pangilinan, BSN, RN	5 West
Sarju Patel, DNP, RN	Director of Nurse Engagement & Magnet Standards
Maria Rufin, MSN, RN	PACU
Gianna Sandomenico, BSN, RN	5 West
Melanie Sicat, BSN, RN	NJ Family Center, HIV Network
Caitlin Sweeney, BSN, RN	L&D
Julie Tran, BSN, RN	L&D
Heidi Wiertzema, MSN, RN	Nursing Education



## Jersey City Medical Center Advanced Practice Nurses

Advanced practice nurses play a pivotal role in health care delivery at JCMC. Their role is a blend of clinical expertise in managing health conditions with an added emphasis on disease and health management, bringing a holistic and comprehensive perspective to patient care. Advanced practice nurses are employed in a variety of setting and specialties that span the continuum including the emergency department, department of medicine, cardiac catheterization lab, psychiatry, anesthesia, cardiology, center for comprehensive care, anesthesia and labor and delivery.

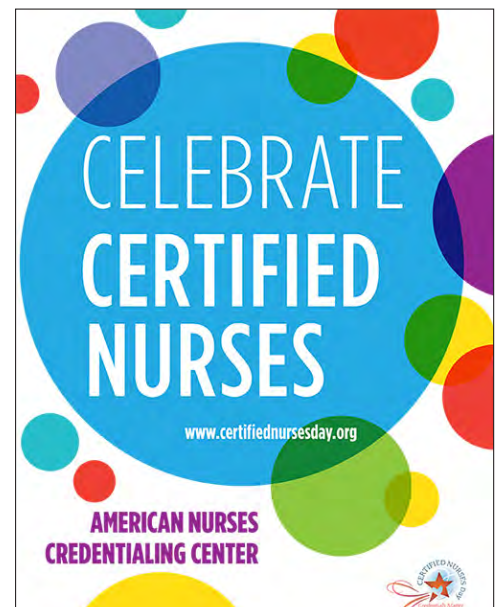


AMERICAN NURSES CREDENTIALING CENTER

**CELEBRATE  
CERTIFIED NURSES**

### CERTIFIED NURSES DAY

JCMC recognizes the importance of achieving national certification and embraces those who have taken the journey to distinguish themselves in their nursing specialty. Yearly, JCMC recognizes nurses who have achieved national certification during National Certified Nurses Day™ on March 19th. Certified Nurses Day promotes awareness and invites nurses to advance their career through national certification. On Friday, March 19, 2021, Margaret Ames, DNP, RN, NEA-BC, Chief Nursing Officer and Vice President, Nursing & Patient Care Services, recognized all JCMC's certified nurses. Every certified nurse received a thank you card. JCMC proudly recognizes certified nurses' for their contributions to a maintaining a workforce who is experienced, highly skilled and prepared to take on the today's healthcare challenges.



## Increasing the number of nurses with baccalaureate or higher degrees in nursing

Jersey City Medical Center recognizes the contributions of nurses with a baccalaureate or higher degree in nursing. In accordance with the National Academies of Sciences, Engineering, and Medicine report, *The Future of Nursing* (2021), nurses with a BSN or higher degree are better able to provide care in the current complex healthcare environment. JCMC continues to surpass its goal of having greater than 90% of nurses with a baccalaureate or higher degree in nursing. We proudly acknowledge the increasing number of nurses prepared at the master's degree and doctorate levels.



## JCMC Nursing Degree Statistics

JCMC Nursing Workforce Degrees (All Nurses at all Levels)

Degree	2017	2018	2019	2020	2021
Diploma	10	10	10	11	10
ADN	74	59	59	57	67
BSN	534	564	545	527	612
MSN	100	133	127	147	124
DNP	8	10	10	15	17

## % of Total RN Workforce with BSN or Graduate Degree in Nursing



	2017	2018	2019	2020	2021
% of Total RN Workforce with BSN or Graduate Degree in Nursing	89%	91%	91%	91%	91%

## Recognition and Rewards



IN MEMORY OF J. PATRICK BARNES

### RN DAISY WINNERS FOR 2021:

#### January

Monica Michael      Labor & Delivery

#### February

Agnes Allado      Same Day Surgery

#### March

Jessette Villacarlos      7 East

#### April

Suzanne Dee      Cardiac Cath Lab

#### June

Jennifer Rivera      Cardiac Cath Lab

#### July

Ashley Beer      Labor & Delivery

#### August

Kristian Adap      Cardiac Cath Lab

#### September

Deexa Patel      7 East

#### October

Jenny Ruiz      Cardiac Cath Lab

#### November

Joshua Octaviano      6 West

#### December

Michael Stanek      Cardio Thoracic ICU

## Daisy Awards

The Daisy Award is a nationwide program celebrating extraordinary clinical skills and compassionate care provided by nurses every day. The Daisy Foundation was established in 2000 by the family of Patrick Barnes who died at the age of 33 of complications from the autoimmune disease idiopathic thrombocytopenia purpura (ITP). Daisy is an acronym for diseases attacking the immune system. Patrick's family started the Foundation in their son's memory. A goal of the Foundation is to recognize extraordinary nurses who make a difference in the lives of people. Patients, families, visitors, nurses, physicians and fellow employees can nominate a deserving nurse by completing a nomination form. Nursing Satisfaction and Engagement Council reviews the nominations. The nominations must reflect and demonstrate the importance of compassionate communication and delivery of quality and safe nursing care. The winners are selected on a monthly basis. The Daisy award recipients receive a Daisy pin and a Daisy certificate. The winner also receives the "Healer's Touch" sculpture. To honor the award recipient, the Daisy Banner is displayed on the recipient's unit for one month.





# Nurse Excellence Awards

JCMC is committed to recognizing the exceptional practice and commitment of its nursing staff. Nursing staff are supported in their professional development and opportunities for recognition by peers is provided. Each year our nursing staff nominates their peers who's performance exemplify the characteristics of Transformational Leadership, Exemplary Professional Practice, Structural Empowerment, New Knowledge Innovations and Improvement, and Empirical Outcomes. Our patient care technicians also nominate peers who exemplify the highest standards of patient care for the Excellence and Care award. Additional colleagues are also honored with our Interprofessional Collaboration award. Our 2021 awards ceremony was held on November 12, 2021, both virtually and at various locations through the hospital campus.

## 20th Annual RWJBH JCMC Nurse Excellence Awards

### The Nominees Are.....

#### TRANSFORMATIONAL LEADERSHIP

Rino Alcantara, Cath Lab  
Nancy Awad, NICU  
Anne Bernardo, 6W  
Jemimah Bravo, OR  
Macy Buhl, 5E  
Anabela Cunha, Rad Onc  
Jan Danipol, 7E  
Abigaile DeMesa, 5E  
Leah Dungee, MCH  
Arlene Eastman, ED  
Nana Figueroa, NICU  
Erica Francisquini, 6E  
Renu Jain, 3E  
Albina Ketoeva, 6E  
Jolanta Kulviccas, Cath Lab  
Catherine Manza, Education  
Kyleigh Melick, ICU  
Alexandra Beth Miller, ICU  
Myeongae Park, 3E  
Vito Pascarella, COM  
Bijal Patel, ICU  
Khushbu Patel, 6W  
Melanie Pingol, 3E  
Bianca Rosa, 7W  
Rodolfo Sangalang, Cath Lab  
Pamela Santiago, 5W  
Hoang Tran, ICU  
Janielle Viuya, Nursing Admin  
Brian Weil, COM  
Jessica Zigman, ICU

#### STRUCTURAL EMPOWERMENT

Lisa Avery, L&D  
Yvette Bryant, 7W  
Carmen Larobis, PACU  
Michelle Lopez, ED  
Marissa Lortz, 5W  
Regina O'Donnell, Cath Lab  
Kavita Peter, Education  
Charles Spears, ICU  
Amanda Tobias, 5W

#### NEW KNOWLEDGE, INNOVATIONS & IMPROVEMENT

Sherwin Balasia, Infusion Center  
Jeffery Balmaceda, Cath Lab  
Anne Bernardo, 6W  
Maria Cabrera, ICU

Alyssa Favara, ED  
Kristy Fernandez, ICU  
Diana Girgis, ICU  
Priscilla Hurtado, 6E  
Ricky Jewell, 5W  
Barno Makhamadaliyeva, CTICU  
Jessica Mercado-Cintron, 3E  
Jenny Ruiz, Cath Lab  
Amanda Tobias, 5W  
Elizabeth Trelles, 6E

#### PARTNERS IN EXCELLENCE INTERPROFESSIONAL COLLABORATION

Janeth Bedoya, Social Work  
Allison Boyanovski, ICU  
Maria Cabrera, ICU  
Dr. Ritu Chandak, 5W  
Willie Cruz, Infection Prevention  
Nicole Delisio, Physical Therapy  
Nancy Floom, Social Work  
John Gomez, 5W  
Frances Ibay, Occupational Therapy  
Brian Kiernan, 5W  
Dr. Jared Krok, Internal Medicine  
Carmelo Ocfemia, Respiratory  
Maria Sasot, 5W  
Hyojung Seo, Social Work

#### EMPIRICAL OUTCOMES

Rino Alcantara, Cath Lab  
Charina Bantugan, 7W  
Katelyn Carter, ICU  
Darby Debonis, 7W  
Priscilla Hurtado, 6E  
Jennifer O'Donnell, 5E  
Gina Sequio-Manaois, PACU  
Valentyna Tabaka, Nursing Admin  
Heidi Wiertzema, Education

#### EXEMPLARY PROFESSIONAL PRACTICE

Marie Victoria Alcantara, 3E  
Ada Augustyhiak, ICU  
Aschel Curry, OR  
Lea Dela Cruz, NP  
Franca DiBrita, Cath Lab  
Alyssa Favara, ED  
Erica Francisquini, 6E  
Kate Guillermo, ICU  
Priscilla Hurtado, 6E

Kyung Kim, 7E  
Jolanta Kulviccas, Cath Lab  
Theresa LaFlam, Nursing Admin  
Stefanie Orrico, 7E  
Barbara Pangilinan, 5W  
Vito Pascarella, COM  
Bernadette Ramos, 7E  
Stephanie Ricciardi, ICU  
Jennifer Rivera, Cath Lab  
Maria Rufin, PACU  
Joseph Sackey, 7E  
Geraldine Terry, ICU

#### PARTNERS IN EXCELLENCE CARE TECHNICIAN/MENTAL HEALTH WORKER

Delia Alvarez, 7W  
Edwin Alvarado, Cath Lab  
Oliva Belinda Antido, 6W  
Malgorzata Anuszkiewicz, ICU  
Esolyn Atkins, 6E  
William Barnes, 5W  
Angel Charles, Transport  
Rosanna Espirito, L&D  
Maria Elliott Francis, 5W  
Cassandra Houghton, ED  
Janelle Lebron, 5W  
Krystal Marion, 3E  
Iris McLoughlin, Central Sterile  
Darlene Parham, ICU  
Hiral Parikh, 5W  
Angelica Paulino, L&D  
William Perez, ICU  
Gary Pitao, ED  
Olivia Robinson, 5W  
Hely Rodriguez, 5W  
Millicent Rodriguez, OR  
James Solano, 7W  
Rose Syphrett, ICU  
Leo Torres, ED  
Amos Waruru, Cath Lab  
Karen Whitaker, Wound Care

# NURSE EXCELLENCE • AWARDS •



**Award Ceremony  
was held on:**

**November 12, 2021  
2:00 - 4:00 pm**

## **2021 Nurse Excellence Award Recipients are:**

### **Transformational Leader:**

Janielle Viuya, DNP, RN, Nursing Administration

### **New Knowledge and Innovations and Improvement**

Elizabeth Trelles, BSN, RN, 6E

### **Exemplary Professional Practice**

Priscilla Hurtado, BSN, RN, 6E

### **Structural Empowerment**

Regina O'Donnell, MSN, RN, Cath Lab

### **Empirical Outcomes**

Rino Alcantara, MSN, RN, Cath Lab

### **Partners in Excellence and Care Award**

Iris McLoughlin, Central Sterile Processing

### **Interprofessional Collaboration Award**

Janeth Bedoya, MSW

### **Interprofessional Contribution**

#### **Influencing Patient Care**

Mariana Escate, RD, CNSC

Amy Calderone, RD, CNSC

Rachel Pacala MS, RDN, CNSC

### **Achieving Strategic Priorities**

2020-2021 Nursing Preceptors

### **Rita Smith DNP, RN "Get Back to School"**

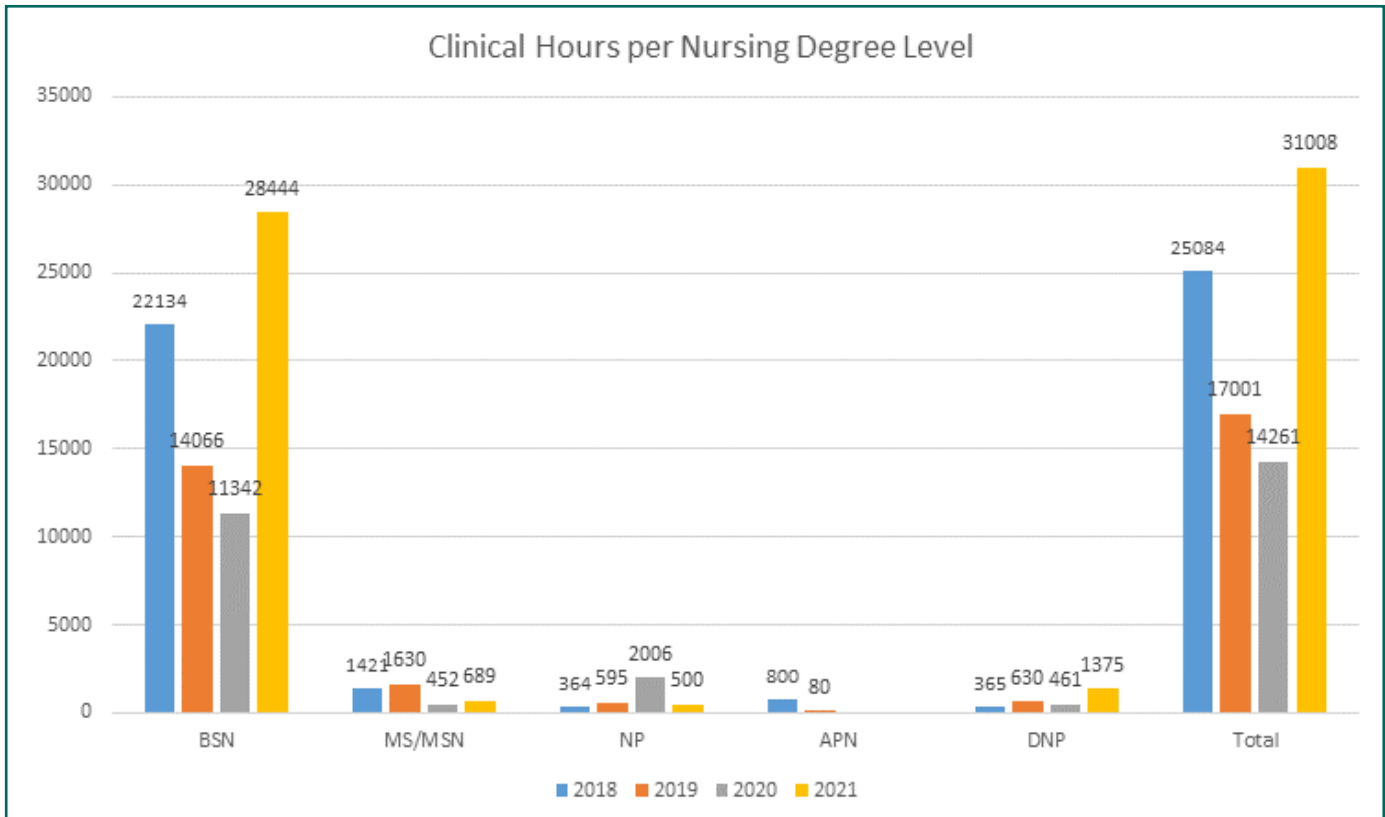
Edwine Jean-Baptiste, BSN, RN, L&D

## Educational Center for Professional Development

Our nurse educators in the Education Center for Professional Development (ECPD) support the learning needs of our nursing and allied employees in our organization, our academic partners, and the community through a variety of planned education opportunities. An abundance of opportunities exists to engage our employees, students, and community needs including formal classes, orientation programs, unit-based in-services, coordination of computer-based learning, webinars, one-on-one instruction, competency assessment, simulation, and virtual learning.

The nurse educators proudly support the shared governance councils by serving as resources to the council members. Additionally, nurse educators partner with the unit leadership team ensuring education is provided to support new unit-based initiatives and the consistently delivery of evidenced based care at the bedside. Feedback from our nursing and patient care technicians is solicited each year through the annual learning needs assessment survey. The ECPD team utilizes this feedback to develop programs to meet the learning and professional development needs of our employees.

Despite the pandemic challenges of 2021, the EDPC conducted 175 live classes with a total of 1,644 participants. Computer based learning classes allowed our nurse educators and employees to stay on track to meet our orientation and training targets for 2021, with a total of 1,915 learners participating in computer based on- line classes. Nurses attended live courses and computer-based curriculums in our learning management system MC Strategies® and were awarded a total of 3212 contact hours towards their professional development! Our nurse educators are most proud of the successful onboarding and orientation on 195 RNs and 175 agency RNs in 2021 to support the staffing needs of all our units and promoting the safe delivery of care at the bedside.







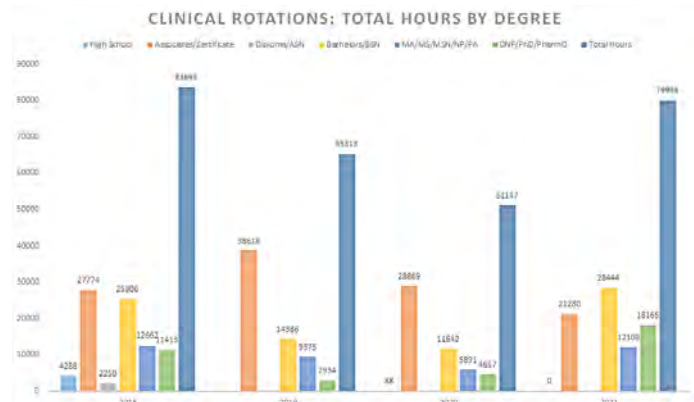
**EXEMPLARY  
PROFESSIONAL  
PRACTICE**

## Academic Affiliations

JCMC prides itself as an academic institution with a mission of supporting the learning and clinical experiences of undergraduate and graduate students in all areas of healthcare. The Education Center for Professional Development (ECPD) oversees the school affiliation process with our corporate team and the coordination of the clinical experiences. Clinical rotations include both nursing and a broad range of clinical programs of health care professionals. Throughout 2021, the ECPD maintained close communication with our executive leadership team and our academic partners, relaying and enforcing updates to policies and procedures to make certain our students in all specialties were safe and up to date on changes to regulatory guidelines.

In 2021, the ECPD oversaw forty five active school affiliation agreements. Proudly, our organization had a total of 79,998 hours of student clinical hours completed under the preceptor guidance of JCMC and RWJBH employees. Our largest growth in clinical hours was in the Doctorate of Nursing Practice Program, a total of 1,375 precepted student hours, the highest amount tracked in the past four years.

Members of the ECPD, Human Resources and our Executive Nursing Leadership team held recruitment events in 2021 with our academic partners to recruit nursing graduates from our academic partners. We look forward to our continued relationships with our nursing schools and the opportunity to hire from both our nursing and professional studies programs the future workforce of JCMC and RWJBH.



## Practice Transition Accreditation Program (PTAP)

The Practice Transition Accreditation Program, also known as the Nurse Residency Program, prepares nurses for the successful transition from the role of student nurse to the role of competent, confident, professional nurse. The nine-month nurse residency program is designed for nurses with less than one year of nursing experience. The program is based on the requirements of the American Nurses Credentialing Center (ANCC) Practice Transition Accreditation Program standards. Established with our first cohort of nurse residents in September of 2018, our program received “Accreditation with Distinction” honors in February 2020. We are currently preparing for our re-accreditation cycle in 2023. The nurse residency program incorporates the unit-based nursing orientation, planned learning experiences such as simulation, role play, computer-based classes, wellness programs, debriefing sessions, knowledge assessment validations, and skills labs to increase clinical knowledge adaptation. The nurse educators, preceptors, managers, and directors continue to support the learning needs and professional development of our nurse residents by promoting enculturation into our organization by supporting nurse residents to become involved in our councils, our mentorship program, and the nurse differentiated ladder program. In 2021, we welcomed 72 nurse residents into the following participating specialties: Critical Care, Emergency Department, Med-Surgical Units, Surgical Unit, Observation Unit, Post Intensive Care Unit, Behavioral Health, Neonatal Intensive Care, Mother Baby. The Educational Center for Professional Development looks forward to growing its program each year. Congratulations to all our nurse residents on their successful transition into nursing practice.



## Oncology Services

### Oncology Services - Let's Beat Cancer Together

On August 2, 2021, with the continuing significant investments and enhancements in health care for residents of the communities it serves, Jersey City Medical Center (JCRC), an RWJBarnabas Health facility, in partnership with Rutgers Cancer Institute of New Jersey, the state's only National Cancer Institute designated-Comprehensive Cancer Center, opened the Madeline Fiadini LoRe Foundation Infusion Center that expands the hospital's delivery of multidisciplinary, comprehensive cancer care that is close to home in Hudson County.

The facility's opening is possible in large part thanks to the philanthropic generosity of the Madeline Fiadini LoRe Foundation for Cancer Prevention. The Infusion Center boasts of 8 beautifully laid out infusion bays, 2 private rooms, 5 exam rooms alongside with an in-house lab and pharmacy to support an efficient work space.

### Multidisciplinary Approach

Moving into this new space presented some workflow challenges for the team but at the same time, it also opened up many opportunities for improvement. The Infusion Center's multi-disciplinary team that is comprised of the Medical Oncologists, Oncology Nurses, Nurse Navigators, Social Worker, Clinical Research Coordinator, Pharmacists, Practice Manager, Front desk, Registration staff, Authorization specialist, and Environmental staff is now finally housed under one roof. Moreover, the Infusion center has also added new leaders to the team including Jenny Andrews, MHI, as the Assistant Vice President of Oncology services and Sherwin Balasia,BSN, OCN, as the Clinical Nurse Manager.

The forming stages of the Infusion Center was supported through a team building activity initiated by Dr. Stefan Balan, Chief of Oncology Line Services in JCRC and was presented by Mr. Robert Lawrence Friedman, senior trainer of the RWJBH Employee Assistance Program. During this 1 hour session, the group cohesively defined that an effective team has to be relaxed and casual yet supportive, inclusive and provides an empathic environment that promotes transparency and reliability. This team building exercise reinforced the infusion centers goal in providing excellent patient care through meaningful collaboration





## Awards

JCMC earned National Accreditation from the Commission on Cancer (CoC) of the American College of Surgeons, a three-year accreditation, as well as the prestigious CEO Cancer Gold Standard Award. This reflects the organizations commitment in providing excellent cancer care.

## Oncology Training And Competency Building

Establishing familiarity among the team members is crucial in operating the new space. So, once a week, each assigned discipline was invited to speak to the nursing team huddle to highlight their role in cancer care and share some of their ongoing programs with the group. In addition, various speakers within the multi-disciplinary team have been tapped to engage in clinical education sessions to help build and reinforce the competency of the oncology nursing team. One of them is Anabela Cunha- Almeida, BSN, OCN, clinical care coordinator in JCMC Radiation Oncology. She gave the team an overview of the role of nursing in Radiation Oncology with focus on patients receiving both chemotherapy and concurrent Radiation therapy

The growth of patient volume in the infusion center influenced the growth of the oncology nursing staff, hence a third infusion RN was hired as well as a Practice RN to specifically serve the oncology clinic. Together with the Oncology nurse educator, Catherine Manza, MSN, B.Ed, RN, CMSRN, GRN, the oncology competency training for nurses was standardized through the ONS chemotherapy and Biotherapy course. This was validated through the annual oncology competency training that was held in the infusion center's conference room attended by oncology nurses from the hospital.

## Quality Initiatives

### Fall Prevention and Management

Patient safety is paramount in every clinical nursing practice and one of the quality metrics for the infusion center is fall. The Oncology team partnered with the senior nursing student from Felician University and revitalized the outpatient Infusion Center's Fall prevention and management initiatives.

Several interventions were made in the areas of communication, visual cues and equipment, which were presented as a Capstone Project and witnessed by nursing leaders Mabel La Forgia, DNP, RN, CNL, Assistant Vice President of Nursing and Sarju Patel, DNP, MSN, RN, Director of Nurse Engagement and Magnet Standards.

## Process Improvement Project

### e-Oncology Huddleboard

One of the goals of the Infusion Center is to ensure that every patient is ready to be infused when they arrive for their appointment. This led to the creation of the e- Oncology Huddleboard. This tool displays needed information based on priority that identifies potential barriers to a seamless patient experience. The system reduces wait time for patients to begin infusions, which improves workflows, standardizes the order process, decreases provider interruptions and ultimately eliminates missing orders. The Oncology Nurse, Administrator, Practice Manager, Pharmacist and Authorization Specialist all work to enter the variables in the huddleboard and present it during the 3 Pm Huddle where the list of patients for the following day is thoroughly reviewed.

### Let's Beat Cancer Together.

Oncology Nursing is a truly dynamic specialty and the opportunity to provide an excellent cancer patient care in this infusion center is a blessing to behold. The oncology team remains committed in constantly looking for ways to improve patient care, as we help heal the community one patient at a time.



## The Stroke Program

Jersey City Medical Center (JCMC) is designated by the New Jersey Department of Health and Human Services (NJDHSS) as a Primary Stroke Center. The Stroke Program continued to provide evidenced-based care to patients, including our Teleneurology services. In June 2019, JCMC was nationally certified as a DNV Primary Stroke Center Program, and recertified in July 2021.

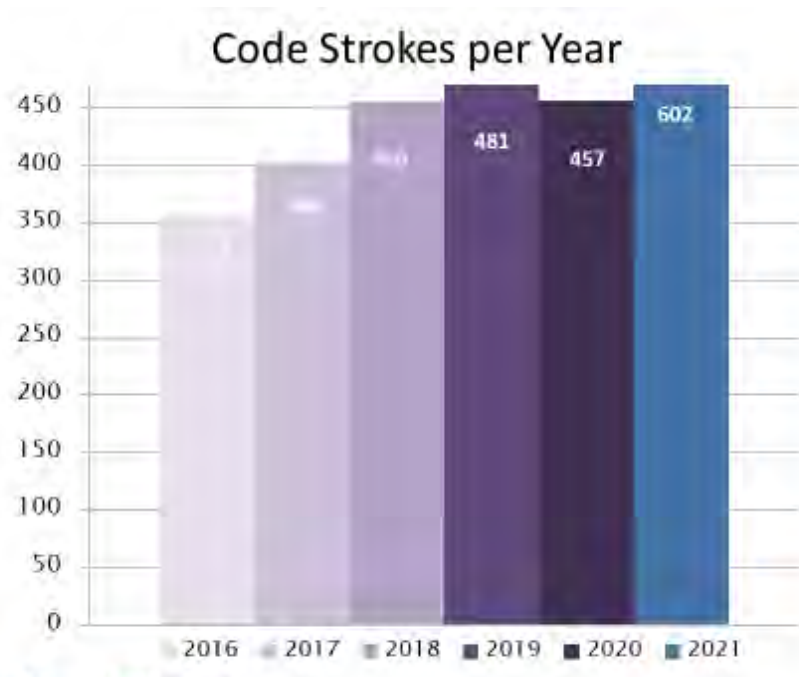
The multidisciplinary program, led by our Medical Director, Musaid Khan, MD, and two nurse leaders; Claudia Garzon-Rivera, DNP, RN, CNL, CCRN-K, CPHQ and Theresa LaFlam, MSN, RN, NVRN-BC, Stroke Program Manager, along with nursing and medical staff, provided care to over 600 patients with stroke or stroke symptoms.

Stroke care is a coordinated response across the continuum of care which includes pre-hospitalization care by our Emergency Medical Services (EMS), our Emergency Department, and both inpatient and outpatient services. Jersey City Medical Center strives to provide excellent award-winning care while maintain their commitment to continuous improvement and innovation.

JCMC is on target to receive the American Heart Association/American Stroke Association (AHA/ASA) Gold Plus Award for quality stroke care for eleven consecutive years, from 2011 through 2021!

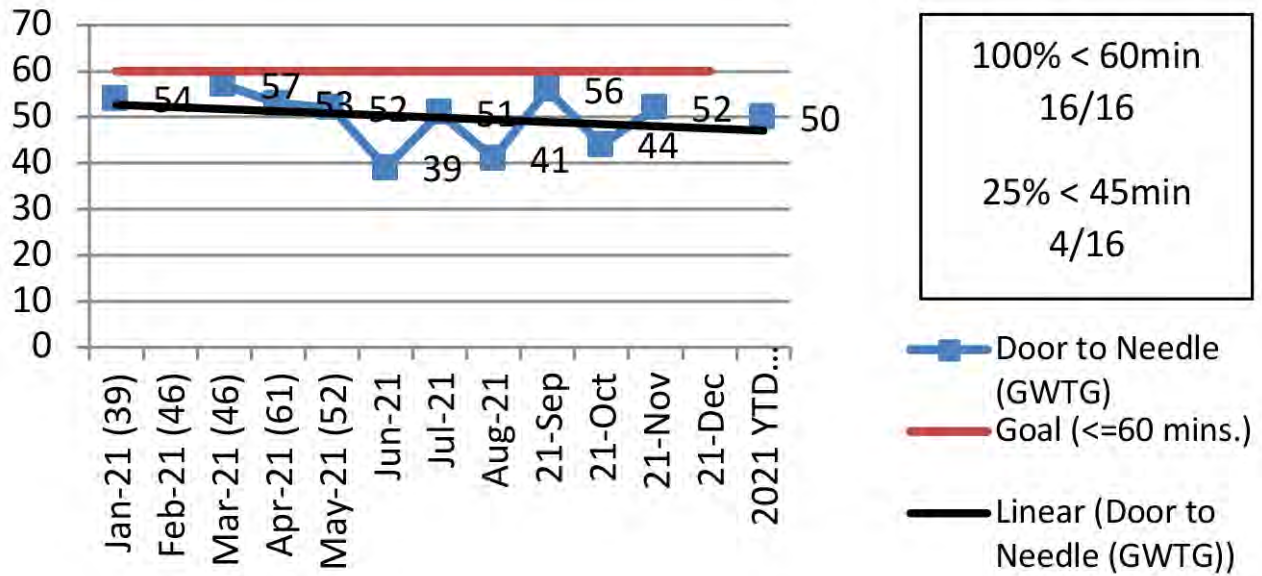
The Stroke Interdisciplinary Committee which is led by Theresa LaFlam, Stroke Program Manager, and Dr. Musaid Khan, Stroke Program Medical Director, and encompasses membership from Nursing, Medical Providers in the Emergency Room, Pharmacy, Radiology, 7E the designated Stroke Unit, Rehab Services, Laboratory, and EMS reviewed the 2021 Alteplase door-to-drug data and identified areas for improvement. Changes in the door-to-drug process along with ongoing review, monitoring, and communication of the data assisted in achieving a 7% decrease in times from 2020 data. This decrease in door to needle times includes record door-to-needles times of 31, 39, and 44 minutes. 100% of all eligible patients received Alteplase in less than 60 minutes. Excellence Awards were presented to ED Physicians and ED staff for teamwork and patient safety.

The Stroke Program provides education to the community on stroke prevention, risk factors, and recognition of stroke symptoms. In order to increase recognition of stroke symptoms in the community, Theresa educated several groups on the BEFAST stroke tool which emphasizes the importance of calling 911 because stroke is an emergency. The BEFAST tool spotlights stroke symptom recognition for loss of balance, vision loss, facial droop, weakness in one arm or leg, and slurred speech. Theresa collaborated with JCMC Nursing staff and Population Health to present stroke education to the community virtually during the COVID pandemic.

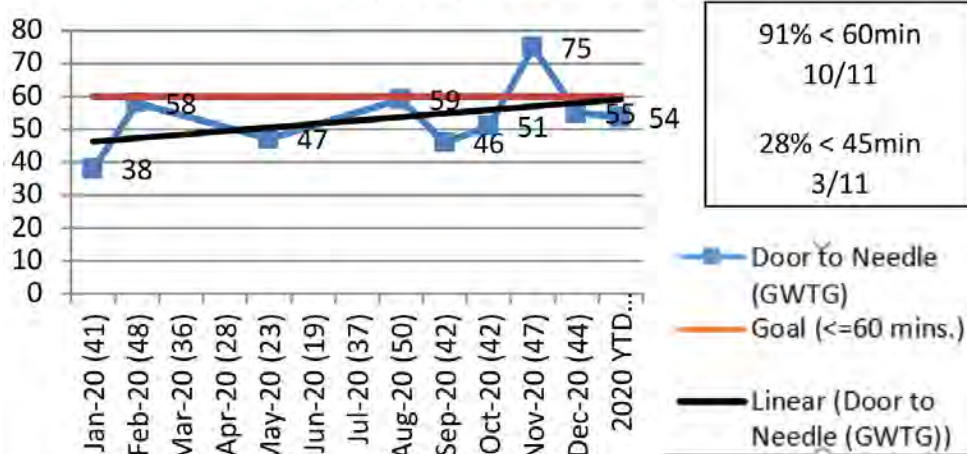


Theresa LaFlam, MSN, RN and Musaid Khan, MD

**JCMC QM7 Measures  
Door to Needle Average  
(Goals  $\leq$  60 mins in 75% AND  $\leq$  45 mins in 50%)  
January 2021-December 2021**



**JCMC QM7 Measures  
Door to Needle Average  
(Goals  $\leq$  60 mins in 75% AND  $\leq$  45 mins in 50%)  
January 2020-December 2020**





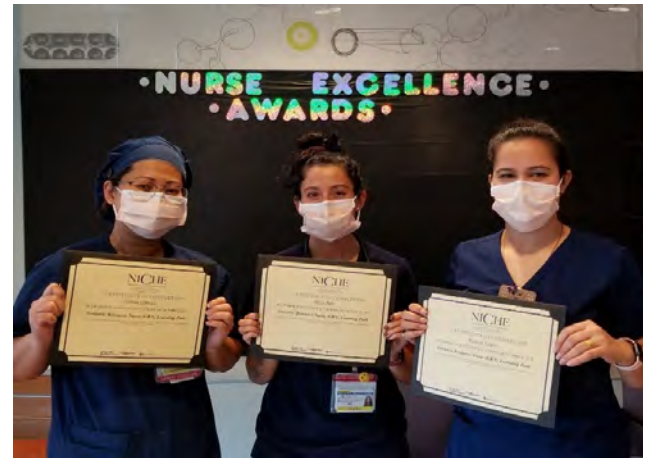
# NICHE™

Our Geriatrics Vision Statement is “Our mission is to improve health and wellness of the older adult through patient-centered and family focused care and communication, striving to maintain their independence while treating them with compassion and dignity.”

Jersey City Medical Center (JCMC) is proud to be a “Senior-Friendly” hospital recognized by the Nurses Improving Care for Healthsystem Elders (NICHE) program. At Jersey City Medical Center, our interdisciplinary team understands the unique health care challenges faced by older adults and offer services to help them maintain their independence to live longer, healthier lives. Our Geriatric Resource Nurses (GRNs) and Geriatric Patient Care Associates (GPCAs) are present throughout JCMC and are trained deliver age-sensitive care to older adults and their families.

## Geriatric Education Programs

Older adult patients have complex care needs associated with age related changes and multiple chronic conditions. Team education is crucial to achieving improved clinical outcomes for the hospitalized older adult. When hospital staff members attend educational programs in geriatric care as teams, they are better able to support one another as they translate lessons learned into everyday practice.



## Geriatric Resource Nurse Council

The Geriatric Resource Nurse (GRN) Council's goal is "to improve geriatric patient outcomes by implementing evidence-based geriatric nursing protocols for best practice." GRNs are the foundation of system-wide improvement to achieve positive outcomes for hospitalized older adults. All GRNs and Geriatric Patient Care Associates (GPCAs) are members. GRNs serve as the link between primary RNs and the Geriatric Care Team.

The GRN Council is the newest shared governance council at JCMC, established in February 2021. Janielle Viuya, DNP, APN, AGACNP-BC, GERO-BC, GRN, serves as council chair. The GRN Council reviews geriatric care changes related to nursing practice such as bedside delirium screening tools. The GRN council also ensures GRNs and GPCAs follow role requirements set forth by the NICHE program.

### Geriatric Resource Nurses

Alyssa Balacuit, BSN, RN	Erica Francisquini, BSN, RN	Theresa Glinoga, BSN, RN	Elizabeth Ann Trelles, BSN, RN	Jessica Velastegui, BSN, RN
Amanda Zielinski, BSN, RN	Darby Debonis, BSN, RN	Roshna Thapa, BSN, RN	Maya Barr, BSN, RN	Maribel Labutong, BSN, RN
Bibi Mangar, BSN, RN	Cinthia Duran Rivera, BSN, RN	Jan Dinopol, BSN, RN	Adrian Salandanan, BSN, RN	Elaine Buno, BSN, RN
Jennifer O'Donnell, BSN, RN	Priscilla Hurtado, BSN, RN	Jillian Swisher, BSN, RN	Kaitlin Crowley, BSN, RN	Damaris Ratemo, BSN, RN
Kathryn Pfeiffer, BSN, RN	Brittany Smith, BSN, RN	Kyung-Suk Kim, BSN, RN	Cristina Villaflor, BSN, RN	Jessica Heo, BSN, RN
Macy Buhl, BSN, RN	Anne Bernardo, BSN, RN	Laura Weintraub, BSN, RN	Katrina Garcia, BSN, RN	Albina Anatolievna Ketoeva, BSN, RN
Mariekris Silva, BSN, RN	Ashlee Tadeo, BSN, RN	Pamela Akinboyewa, BSN, RN	Arvee Lopez, MSN, RN	Sonia Freire, BSN, RN
Matthew Mero, BSN, RN	Vina Articono, BSN, RN	Yeonette Odetta Gaskin, BSN, RN	Concordia Meglioranza, BSN, RN	Rani Lau, BSN, RN
Mollie O'Connor, BSN, RN	Joshua Octaviano, BSN, RN	Diego Castro, RN	Alana Lai, BSN, RN	
Zenaida Fuentes, BSN, RN	Kathleen Misleng, BSN, RN	Niccolo Fornier, BSN, RN	Janielle Viuya, DNP, APN	
Lisa Ryan, RN	Thelma Nyaboga, RN	Doris Bzurto, BSN, RN	Trixia Aguinaldo, BSN, RN	
Alexandra Maida, RN	Jodette Bayani, BSN, RN	Kimberly Tan, BSN, RN	Catherine Manza, MSN, RN	

### Geriatric Patient Care Associates

Abigael Luistro	Jessica Perez	Caren Manoti	Eunice Musumali	Palmy Jovial
Harriet Ondari	Sufia Akhter	Marie Mervil	Precious Iroegbu	James Solano
Andrea Andrade	Bebe Bhikham	Edward Williams	Kimberly Batts	Verlaine Gressau
Janelle Lebron	Anamie Crantiello	Daena Delille	Patricia Thompson	Eva Logro
Roxanne Agosto	Jakeline Santamaria	Otaniyen Odigie	Arlene Carreon	Dianne Mangalindan
Nafi Diagne	Catherine Salonga	Pauline Wanjala	Kaley Mangalindan	Prathiba Sapkota
Tana Dautaj	Gyriciah Douglas	Elaine Jamison	Kanny Milton	Glenell Garcia
Juana Brito	Jackie Miller	Kezia Danda	Alexander Ignacio	Delia Alvarez
Paul Dacula				

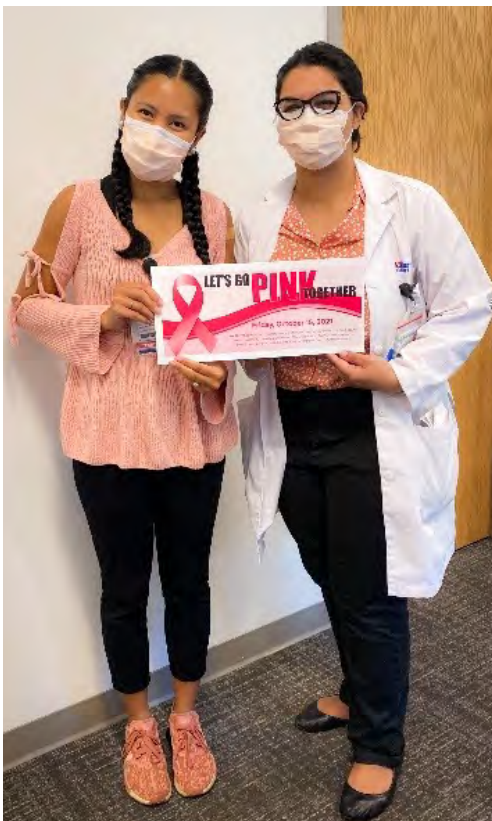
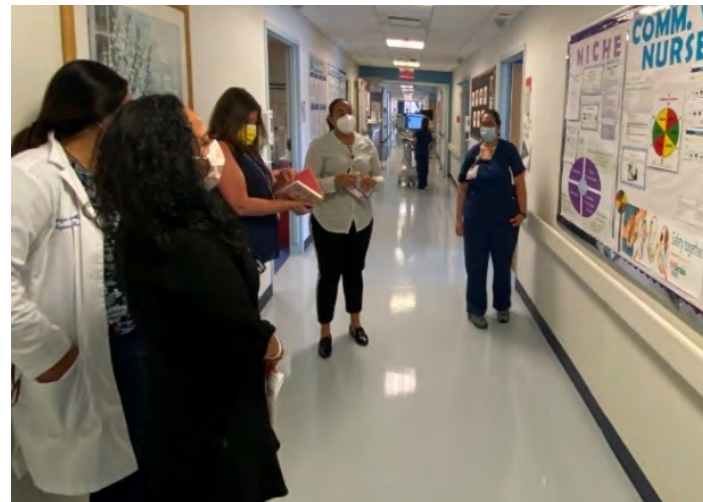
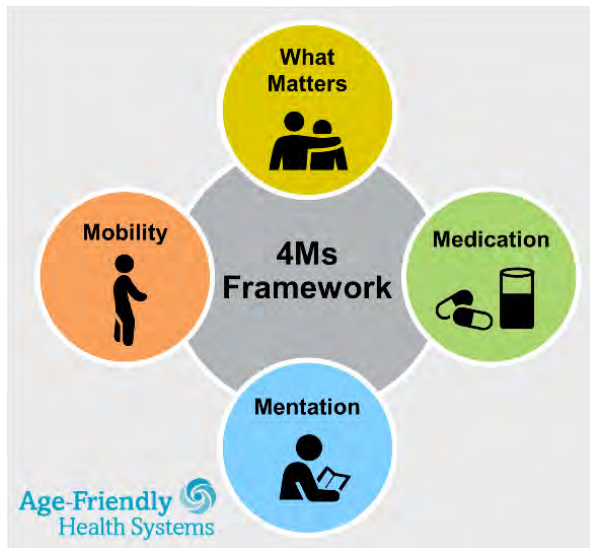




# Age-Friendly Health Systems

Becoming an Age-Friendly Health System entails reliably providing a set of four evidence-based elements of high-quality care, known as the “4Ms,” to all older adults in your system: What Matters, Medication, Mentation, and Mobility.

JCMC together with RWJBH hospitals are on a journey to become an Age-Friendly Health System. An example of focusing on Medication, one of the “M”s of Age-Friendly Care, was JCMC celebrating World Delirium Day.





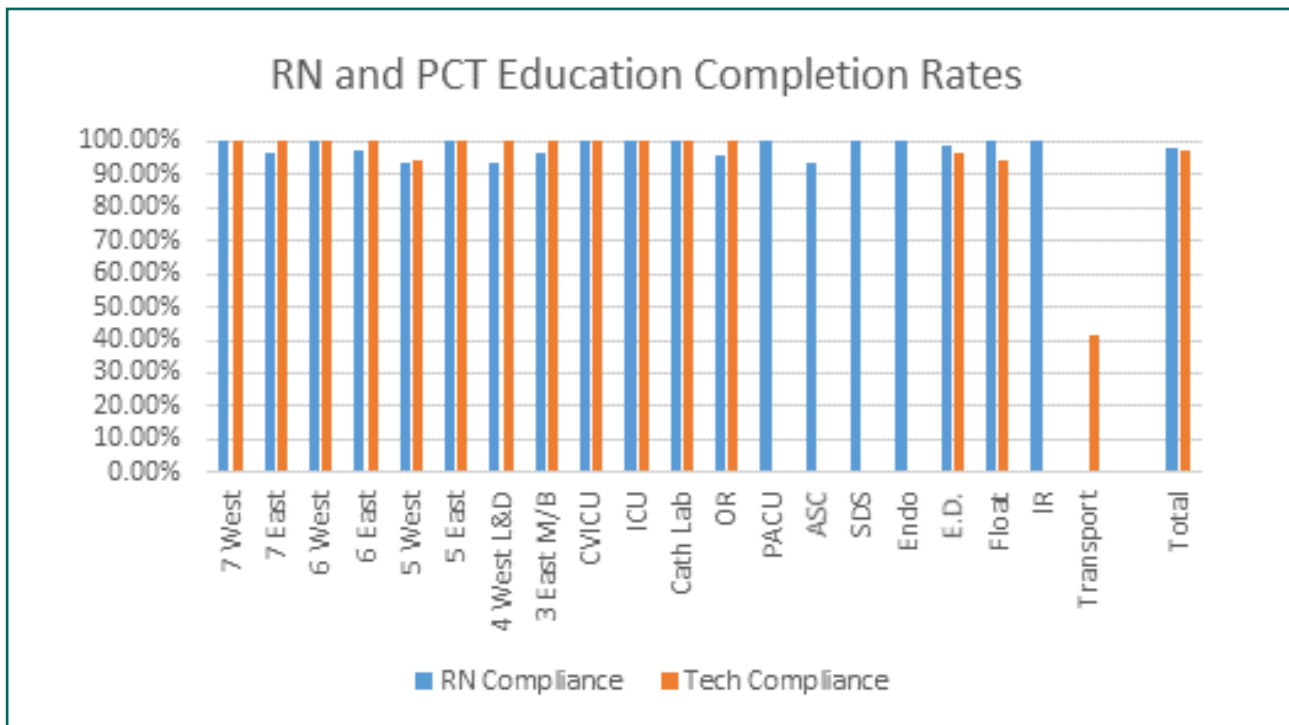
## Safe Patient Handling

The Safe Patient Handling (SPH) Committee is chaired by Mabel LaForgia, DNP, RN, CNL. The Committee is comprised of Nurses, Patient Care Technicians, Transporters, Environmental Services, Human Resources, Physical Therapy, Biomedical Engineering, EMS, and Purchasing.

The goals of the committee are to:

- Promote the safety and comfort of our patients
- Improve the quality of life for our patients by promoting patient mobility and independence
- Help to prevent musculoskeletal injuries in our healthcare providers
- Support the culture of safety and patient dignity during lifts and transfers
- Enhance patient outcomes

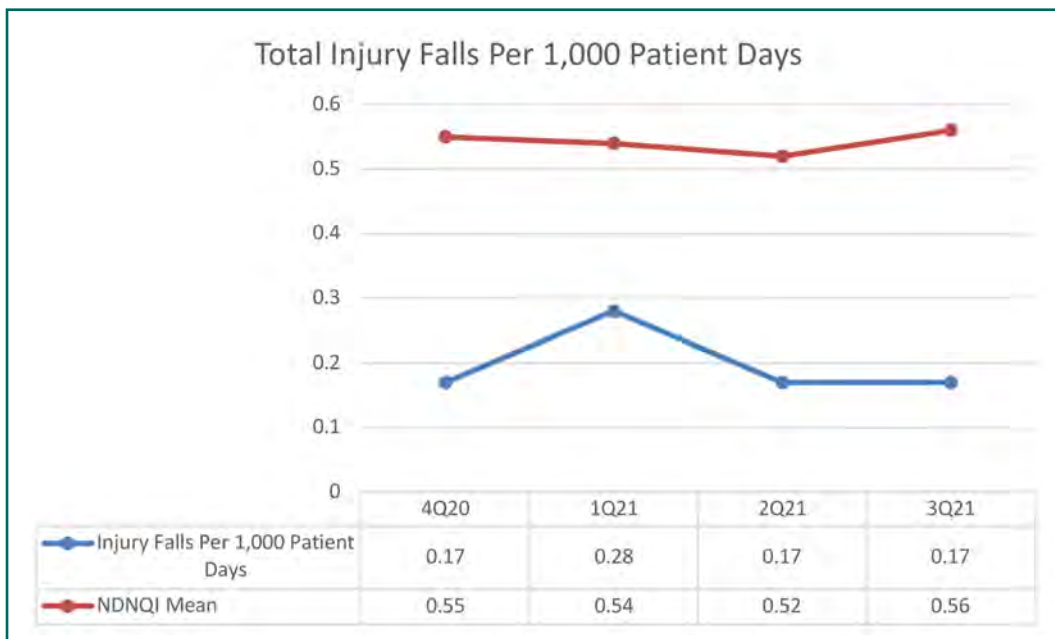
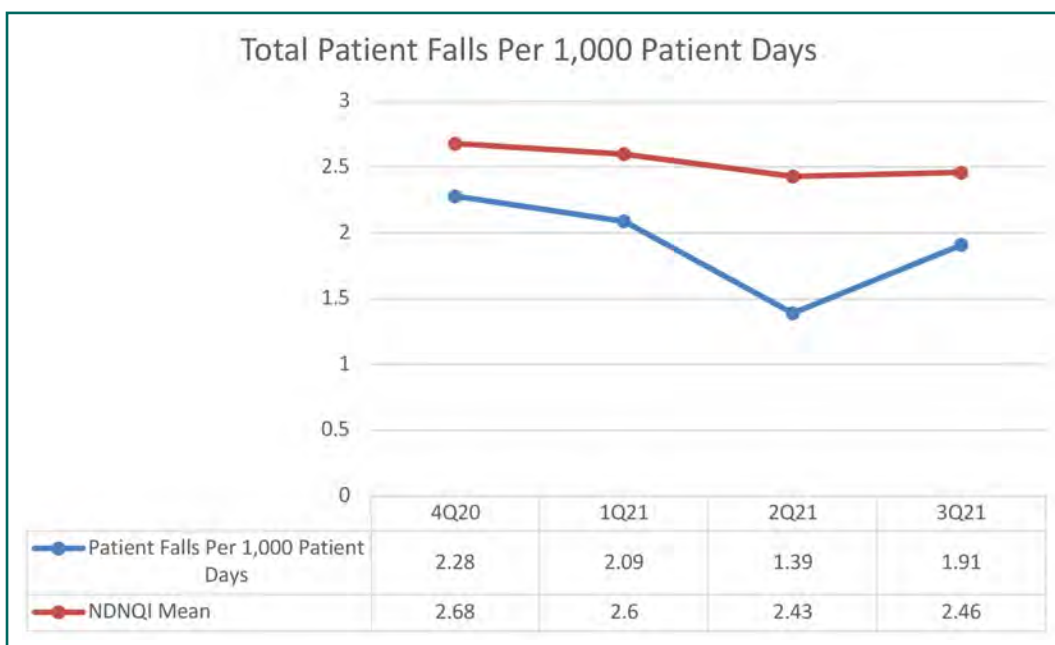
The committee had many accomplishments in 2021. One of the major accomplishments was validation of staff competence in the use of equipment as follows: RNs 98.65% (510/559) and PCT/MHW/Transporters 96.9% (219/226).



## Reducing Patient Falls

Nursing interventions aimed at reducing patient falls and falls with injury encompasses assessing patients' risks for falls upon ED triage, admission, and throughout the hospital stay, as well as implementing patient specific fall prevention measures. These measures include keeping high fall risk patients safe while toileting by having staff stay with the patients. Specific fall prevention interventions also include medication review of high risk medications, visual fall prevention cues such as high fall risk sign outside the room and on the patient's communication board. These visual cues reinforce the partnership between staff and patients in fall prevention. The Interdisciplinary Falls Committee consisting of membership from all patient care areas including nursing leadership, patient care technicians, physical therapists, which was led by Claudia Garzon-Rivera, DNP, RN, CCRN-K,

CNL, CPHQ, and now led by Sarju Patel, DNP, RN, continue to review and reinforce the use of evidence-based practices to decrease the number of patient falls and patient falls with injury. In addition, fall case reviews are conducted on a weekly basis. The lessons learned from the case reviews are disseminated to nursing staff. In attendance at the meetings are Nursing Educators, AVP of Nursing, Director of Nursing and ancillary staff as required. The focus of the case reviews is to learn what could have been done differently in terms of potential systemic barriers and to provide staff support. The lessons learned from the case reviews are shared during unit safety huddles. One of the takeaways of the case reviews is the need to have fall prevention alarms easily available for staff.



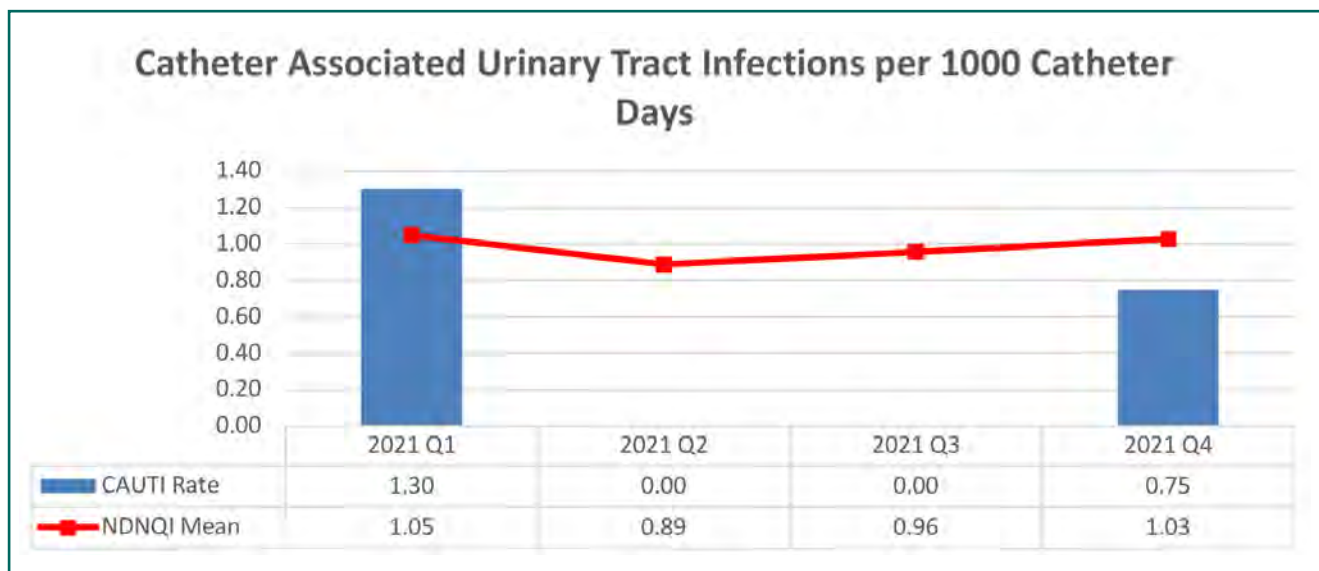
## Reducing Catheter Associated Urinary Tract Infections (CAUTIs)

Decreasing Catheter Associated Urinary Tract Infections is a nurse sensitive indicator, which JCMC nurses have continued to keep a primary focus. Primary strategies for CAUTI prevention include a focus on daily assessment of need for a urinary catheter as well as weekly observations on the maintenance of the urinary catheter. The CAUTI Steering Committee meets monthly to review best practices, identify opportunities, track and trend data and drive key tactics to achieve a reduction in CAUTIs. Claudia Garzon-Rivera, DNP, RN, CNL, CCRN-K, CPHQ Senior Nursing Director and Vickie DeChirico, MSN, RN, CIC, Director of Infection Prevention along with physician and nursing representation are members of the committee. Nancy Holecek, MSN, RN, Executive Vice President and Chief Nursing Officer, RWJBH, CNE System led the CNO Collaborative to standardize and drive best practices. Administrative support has contributed to the success in decreasing CAUTIs. Successful strategies implemented include:

- Daily rounding by the Patient Care Coordinators (PCCs) in collaboration with providers for necessity of the urinary catheter using the CAUTI rounding log
- Use of a standardized methodology for surveillance and data management
- Weekly urinary catheter maintenance bundle audits are performed by the PCC/Charge RN to reinforce best practices for line maintenance and submitted to Claudia Garzon-Rivera, DNP, RN, CNL, CCRN-K, CPHQ Senior Nursing Director for daily review
- Monthly discussion and analysis of audit data during nursing Quality and Safety council led by Shaden Mustafa, MSN, RN, CCRN, CNL, NVRN
- The number of Critical Care urinary catheters in place, their indication and their plan for removal are reported by the Allison McCabe, MSN, RN Critical Care Director during the Administrative Safety Huddle
- Urinary catheter rounds conducted by Claudia Garzon-Rivera, Senior Nursing Director and Vickie DeChirico, MSN, RN, CIC, and Willie Cruz, CIC, Infection Prevention

Success in the reduction of the 2021 CAUTI rate is also attributed to the updated Urinary Catheter Indication & Removal Nurse Driven Protocol, which was updated by the Quality & Safety Nursing Council and approved by the CAUTI Steering Committee. The updated protocol allows nurses autonomy in the removal of urinary catheters that no longer meet a current indication. In addition, the post catheter removal bladder residual volume was increased. Bladder volume post removal of the urinary catheter is a quantitative indicator that the patient may need to have a urinary catheter re-inserted. These strategies have led to a decrease in the use of urinary catheters and improved maintenance prevention bundle.

Nursing along with the interdisciplinary team decreased the CAUTI rate and outperformed the NDNQI national benchmark mean in 2Q21, 3Q21, and 4Q21.

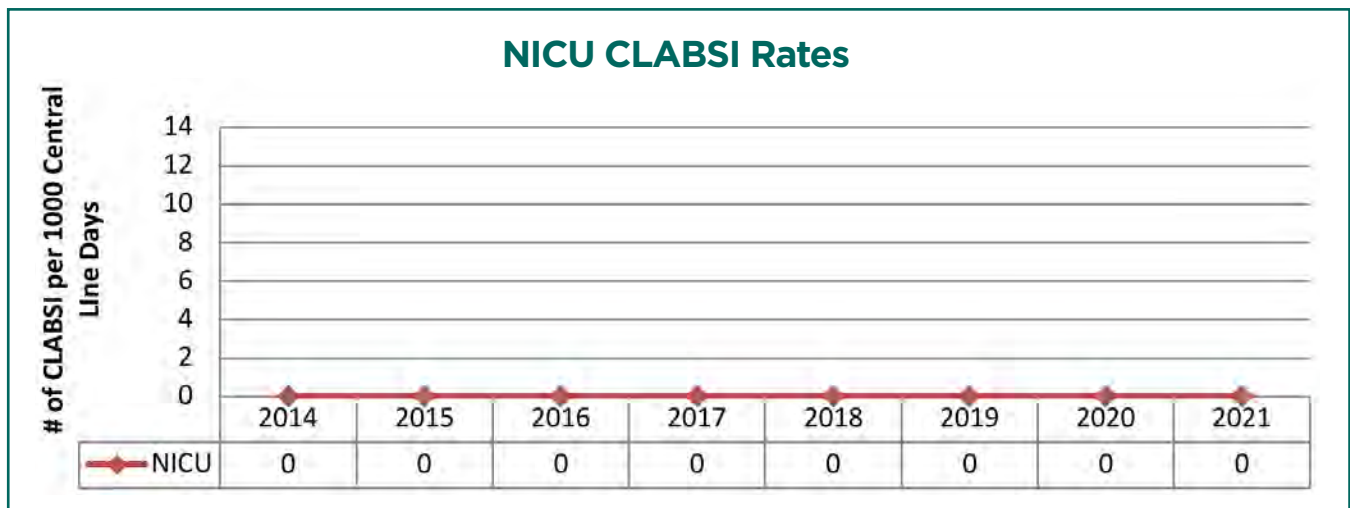




## NICU CLABSI EIGHT Years Free!

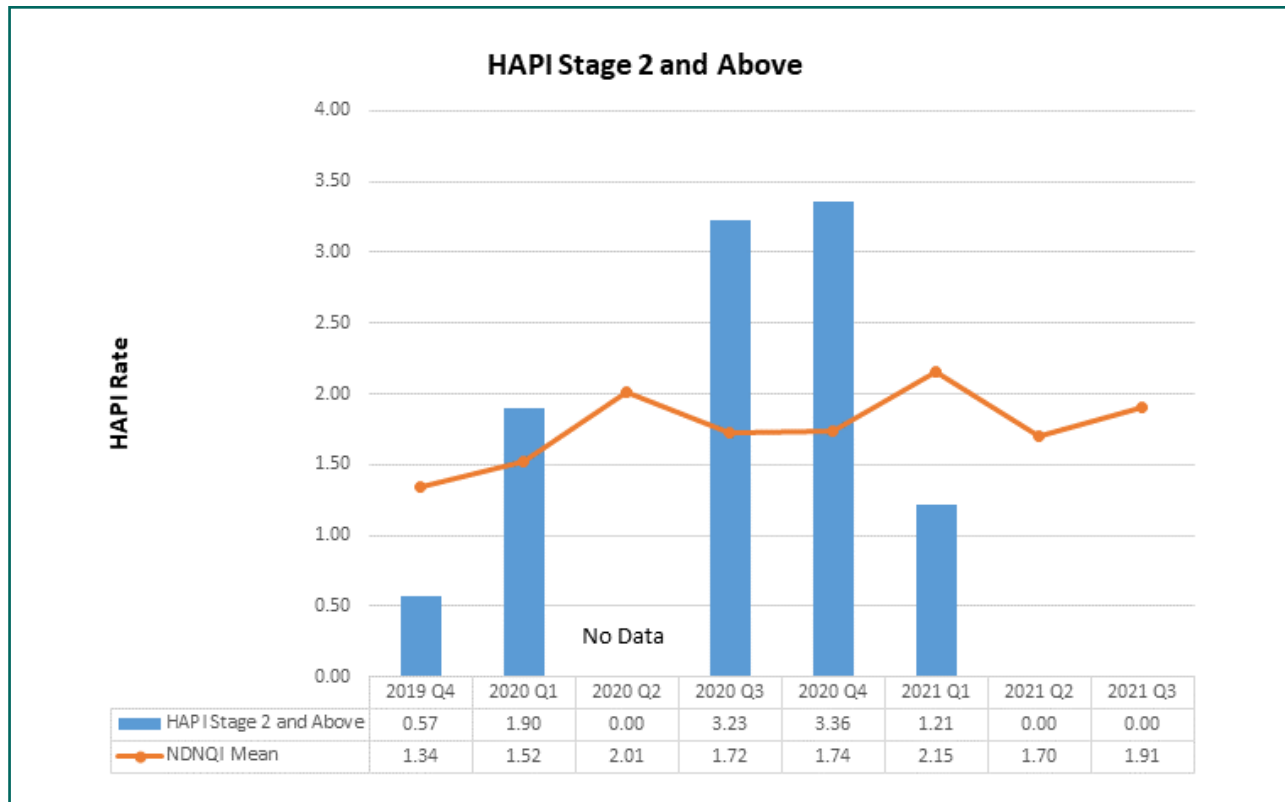
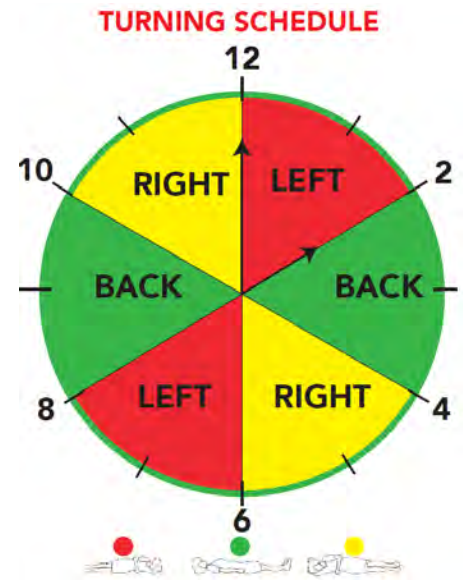
The Neonatal Intensive Care Unit (NICU) is a specialty unit providing highly specialized care to premature and compromised term newborns. The NICU infant is susceptible to infections such as central line associated blood stream infections (CLABSI) because of their fragile immature immune system. According to the National Association of Neonatal Nurses (NANN), a CLABSI occurs when an infection develops from a bacteria or other microorganism which has entered the bloodstream through a central line. CLABSIs are preventable hospital acquired infections that are significant contributors to infant morbidity and mortality. There are many published guidelines such as central line bundles for interventions, supporting the implementation of evidence based strategies effectively reducing CLABSI rates. An evaluation of organizational standards of practice for the neonatal population and incorporating them into the NICU professional practice model and care delivery system continues to significantly impact clinical outcomes.

Leah Dungee-Maignan, MSN, RNC-NIC, CBC, Director of Maternal Child Services, Michelle Dickerson, MSN, RNC-NIC, RNC-MNN, NPD-BC, CBC, NICU Educator, Vicki DeChirico, MSN, RN, CIC, along with the NICU nurses and neonatologists work together to implement evidence based practices: Use of the central line bundle as recommended by IHI which includes five key components: hand hygiene, maximal barrier precautions upon insertion, Povidone iodine for skin antiseptis, optimal catheter site selection, and daily review of line necessity with prompt removal of unnecessary lines. These evidence-based strategies have led to no occurrences of CLABSI's since October 13, 2013.



# Reducing Hospital Acquired Pressure Injuries

Eliminating patient pressure injuries is a goal, which nurses and Patient Care Technicians (PCTs) continue to focus on in all clinical areas. Injuries to patients' skin can contribute to increased morbidity and increased length of stay. In an effort to eliminate Hospital Acquired Pressure Injuries (HAPIs), the RNs, along with the assistance of the PCTs, perform careful integumentary assessments, provide timely pressure injury interventions, and communicate findings with the interdisciplinary team, which includes the Wound Care Clinicians, Registered Dieticians, Physical Therapists, Surgical and Medical providers. The following HAPI preventions are vital in the efforts to decrease the incidence of HAPIs: 2 RN head to toe skin integrity assessment upon admission and transfer to unit; silicone border prevention dressing for patients at risk; specialty beds; and pressure injury prevention validation rounding by Nursing Leadership and Wound Clinicians. In addition, HAPI case reviews are presented by clinical nurses and Registered Dieticians along with the support of Nursing Leadership. The lessons learned from the case reviews are disseminated to nursing staff and Registered Dieticians. In attendance at the meetings are Nursing Educators, Nursing AVPs, Senior Nursing Director and ancillary staff as required. The focus of the case reviews is to learn what could have been done differently in terms of potential systemic barriers. The lessons learned from the case reviews are shared during unit safety huddles. Furthermore, the implementation of the "Turning Clock" continued throughout the year. Initially it was implemented on 7 West and has continued in 6 East Telemetry Unit, 5 East Observation Unit, Critical Care Units and 6 West Surgical unit. The concept of the "Turning Clock" is to remind staff and patients of the laterality in which the patient should be lying on every 2 hours. According to the "Turning Clock," at 7am the patient should be lying on their left side while at 9 a.m. the patient should be laying on their back. Repositioning and offloading pressure points is one of the key strategies in reducing HAPIs. Pressure injury prevention interventions are also validated on a monthly basis through the Pressure Injury Prevalence Studies, which are conducted by a team of RNs and led by Valentyna Tabaka, MBA, BSN, RN, WCC and Jenna Bartholomew, BSN, WCC. The outcomes of the prevalence study enable staff and nursing leadership to keep HAPI reduction front and center.





Additionally, clinical staff have the opportunity to join the Interdisciplinary Skin Wound Care Committee which is another forum to support staff in providing evidence-based pressure injury prevention interventions and wound care. The Committee Chair is Valentyna Tabaka, MBA, BSN, RN, WCC and is co-chaired by Jenna Bartholomew, BSN, RN, WCC. These Wound Clinicians provide members with knowledge on the latest products, interventions to treat wounds and prevent pressure injuries as well as monthly data and updates from the System Wound Collaborative. The Skin Wound Care Committee members are responsible for approving the “Turning Clock” trial on 7 West and recommending additional units adapt this initiative. Members include Clinical Nurses, PCTs, Registered Dieticians, and Physical Therapists. Members represent the Medical-Surgical, Critical Care, and specialty areas.

HAPI results reflect the determination of the interdisciplinary team who together continue to decrease our HAPI rate and aim for zero HAPIs. For the past 8 consecutive quarters, JCMC has outperformed the national benchmark for five of the 8 quarters. In addition 1Q21, 2Q21 and 3Q21 HAPI rates have decreased and outperform the national benchmark.



## 2022 Interdisciplinary Skin Wound Care Committee Members

Claudia Garzon-Rivera, DNP, RN	Senior Nursing Director	Albina Ketoeva, BSN, RN	6E PCC
Valentyna Tabaka, BSN, RN	Wound Care Manager	Erica Francisquini, BSN, RN	6E PCC
Jenna Bartholomew, BSN, RN	Wound Care Coordinator	Elizabeth Trelles, BSN, RN	6E RN (UPC Chair)
Priscilla Hurtado, BSN, RN	Wound Care Nurse	Aurea Vallo, BSN, RN	6E RN
Kathleen Ansay, MSN, RN	5E & 6W Educator	Katrina Garcia, BSN, RN	7W PCC
Catherine Manza, MSN, RN	7E & 7W Educator	Catherine Sapang	Administrative Assistant
Anne Bernardo, BSN, RN	6W RN	Palmy Jovial	ICU PCT
Angela Larobis, RN	6W RN	Wanda Hilliard	CTICU PCT
Hinchel Tindoc, BSN, RN	7W RN	Mariana Escate	Dietician
Kristine Marquez, BSN, RN	7W RN	Amy Calderone	Dietician Manager
Roshna Thapa, BSN, RN	7E RN	Sarah Hines	Physical Therapy Manager
Mollie O'Connor, BSN, RN	5E RN	Stephanie Dotterweich	Physical Therapist
Julia Walter, RN	CTICU RN	Oliva Cruz Antido	6W PCT
Kristy Fernandez, BSN, RN	ICU RN	Delia Alvarez	7W PCT
Heidi Milad, BSN, RN	7E PCC	Rosario Syphrett	ICU PCT
Kyleigh Melick, BSN, RN	ICU PCC	Takima Murrell	6W PCT
Alelei Costales-Konev, BSN, RN	ENDO RN	Michael Hall	6W PCT
Kelly Barnhill, BSN, RN	ICU RN		

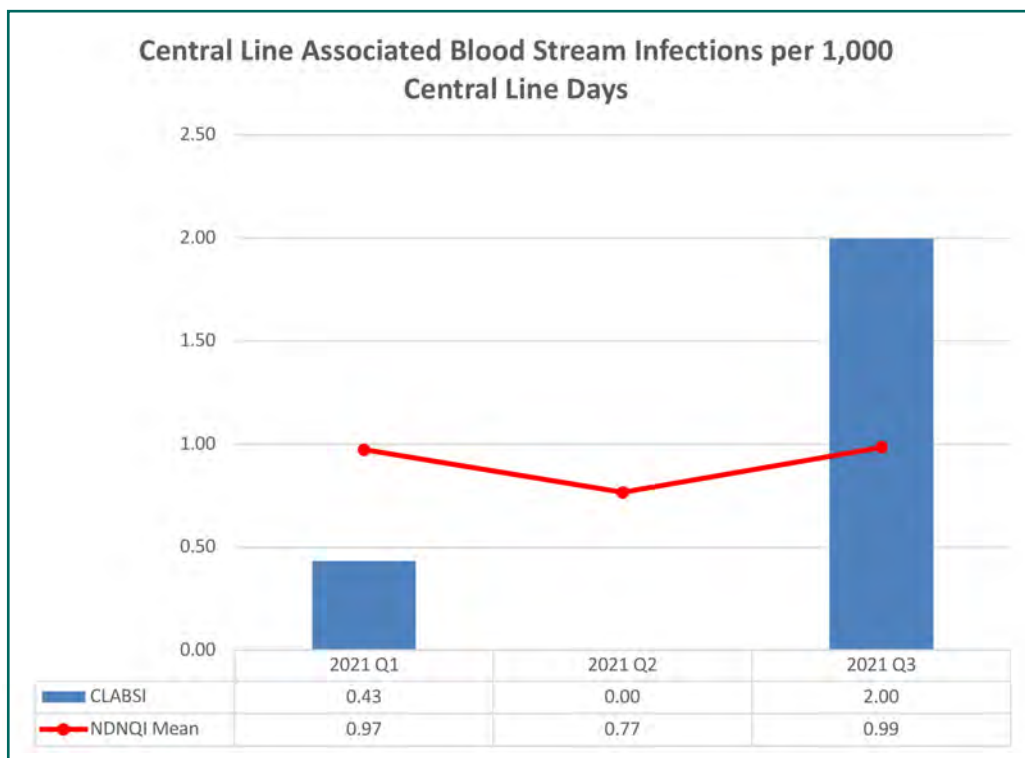
## Reducing Central Line Associated Blood Stream Infections (CLABSI)

Decreasing Central Line Associated Blood Stream Infections continue to be strategic priority in 2021. Primary strategies for CLABSI prevention focused on daily assessment of need for central line and minimizing the duration by prompt removal when no longer needed. A CLABSI Steering Committee which Claudia Garzon-Rivera, DNP, RN, CNL, CCRN-K, CPHQ, Senior Nursing Director and Vickie DeChirico, MSN, RN, CIC, Director of Infection Prevention Director of Infection Control and physician and nursing representation are members review best practices, identify opportunities, track and trend data and drive key tactics to achieve a reduction in CLABSI. Successful strategies implemented include:

- Daily rounding by the Patient Care Coordinators (PCCs) in collaboration with providers for necessity using the CLABSI rounding log
- Use of a standardized methodology for surveillance and data management
- Weekly central line bundle audits are performed by the PCC/Charge RN to reinforce best practices for line maintenance
- Monthly discussion and analysis of audit data during nursing Quality and Safety council led by Shaden Mustafa, MSN, RN, CCRN, CNL, NVRN

- The number of Critical Care central lines in place, their indication, the number of femoral central lines and their plan for removal are reported by the Allison McCabe, MSN, RN Critical Care Director during the Administrative Safety Huddle
- Focus on renal central lines: maintenance of catheter and length of time
- Central line maintenance rounds conducted by the Infection Prevention Practitioners

There was a CLABSI rate increase in 3Q21 related to renal dialysis central line catheters. Case reviews conducted by the clinician bedside nurse, nurse educator, Nursing Directors, the Infection Prevention Practitioners and the Senior Nursing Director revealed a focus on renal central line maintenance was needed. A revamping of the renal central line maintenance competency was completed by the Renal Educator Kavita Peter, MSN, RN, which helped to support nurses with prevention interventions. Also, additional observation rounds on renal dialysis central line maintenance are conducted.



## Nursing Differentiated Practice Program (NDPP)

The NDPP is a voluntary program that provides an opportunity for all nurses from novice to expert across all specialties to embrace and enact the Magnet model principles. The NDPP fosters professional development of nurses and nurse leaders. The goals of the NDPP program are aligned with the Nursing Strategic Plan, the Magnet Program and the JCMC-RWJBH Organizational Strategic Plan. The NDPP supports the over-arching Mission, Vision, and Shared Values of the JCMC-RWJBarnabas Health System and the Philosophy of Nursing and the American Nurses Credentialing Center Magnet Standards.

The NDPP has four distinct levels of membership criteria, with each level allowing nurses degrees of autonomy to meet the membership criteria.

Level 1 is designed as an introductory level to the NDPP program. This level introduces nurses new to the organization of novice nurses to the NDPP program and our shared governance model. In 2021, Level 1 had two members.

Level II members begin their journey into professional growth by implementing practice change. At this level, members are required to participate in an evidence-based practice project or act as the UPC Chair for the unit. Nurses collaborate with their managers, directors, and other leaders on projects of their interest that align with our Nursing Strategic Plan and execute the project. In 2021, there were

14 nurses on Level II of the NDPP. Examples of Level II projects in 2021 included: “Reducing CLABSI Rates in the ICU,” “AIM Bundle-VTA Prevention in MCH,” and “Perceived Value of National Certification in BH Unit in an Urban Acute Care Magnet Hospital.”

Level III members are involved in shared governance and their evidence-based projects are outcome focused with metrics providing the measurement of success of their implementation. Projects for Level III should maintain rigor for publication. In 2021, three nurses were on Level III of the NDPP and projects included: “ED Orientation Program,” “Child and Health Literacy” and “NICU Evacuation.”

Level IV, the highest level of the NDPP had three members in 2021. Level IV provides long term members an opportunity to be challenged for professional and academic growth. A masters in nursing is the minimum education requirement. Projects at this level must have a demonstrated impact on nursing. Members of this level had the following projects: “NICHE- Geriatric Outcomes,” “Cardiac Cath on Time Start” and “Mentorship Program.”

In 2022, the NDPP Steering Committee and our nursing leadership has a goal to increase membership on all levels and across all specialties. Our organization is proud of the work each member of the NDPP contributes and looks forward to the continued success of each member of the NDPP.

2021 Clinical Ladder			
NDPP RN	Dept.	Project Title	Estimated Date of Completion
<b>Level One</b>			
Bernardo, Anne	6W	UPC Co-Chair	February 2022
Francisquini, Erica	6E	Unit PCC	June 2021
<b>Level Two</b>			
Cardenas, Jasbeidy	3E	Hemorrhage AIM Bundle	June 2021
DeStefano, Brit	FLOAT	Medication Management Audits	December 2022
Diez-Presilla, Katia	3E	Hemorrhage AIM bundle	June 2021
Favara, Alyssa	ED	Combating Sepsis in the Emergency Department -- Sepsis Champion	March 2023
Kim, Kyung Suk	7E	Medication Education Audit	June 2021
Makhamadalieva, Barno	CVICU	Implementation of the CPOT Tool in CC	January 2023
Monia-Alves, Laura	3E	AIM Bundle-VTA Prevention in MCH	June 2021
Mustafa, Shaden	ICU	Reducing CLABSI rate in ICU	
Oseagulu, Justina	5W	UPC Chair	
Ricciardi, Stephanie	ICU	UPC Chair	January 2023
Sweeney, Caitlin	L&D	Perinatal Bereavement	June 2022
Sypher, Jaime	L&D	Nitrous Oxide	June 2022
Tobias, Amanda	5W	Perceived Value of National Certification in BH Unit in an urban acute care Magnet hospital	June 2021
Trelles, Elizabeth	6E	UPC Chair	December 2022
<b>Level Three</b>			
Lopez, Michelle G	ED	ED Orientation Program	May 2022
Paredes, Marlene	5W	Child and Adult Health Literacy	June 2020
Wojewoda, Patrycja	NICU	NICU Evacuation	December 2022
<b>Level Four</b>			
Viuya, Janielle	ADMIN	NICHE/Geriatric Outcomes	December 2022
O Donnell, Regina	CCL	Cardiac Cath on Time Start	June 2022
Dickerson, Michelle	ECPD	Mentorship Program	June 2022





# New Knowledge, Innovations and Improvement

Jersey City Medical Center | RWJBarnabas Health

**Happy Nurses Week**

Pizza Party Donated by  
**JCNM Foundation**

Unit: COLONY PLAZA CLINIC (2)

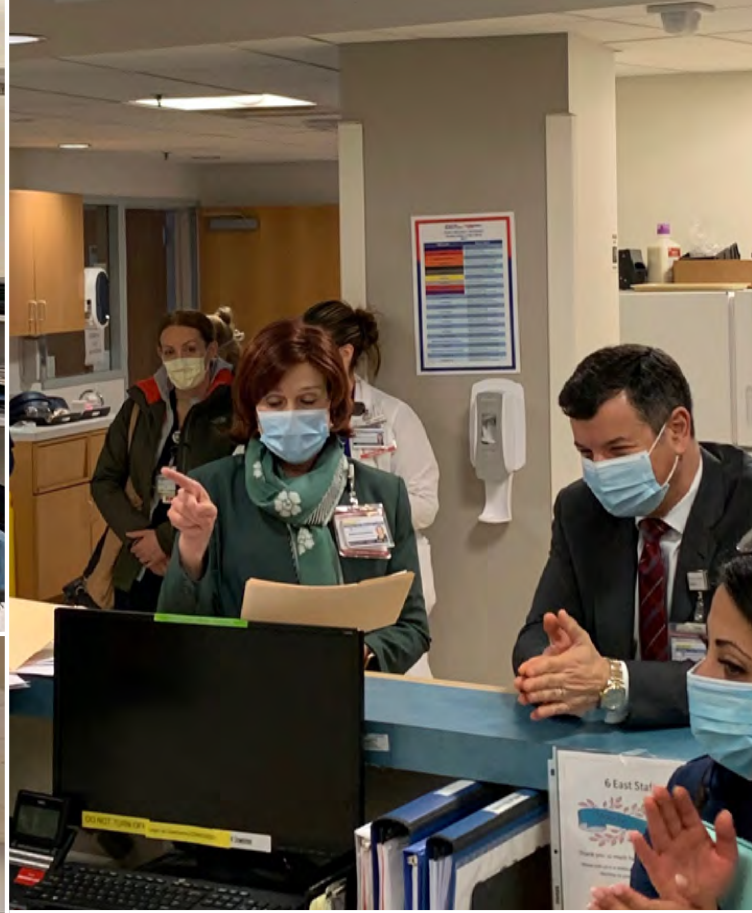
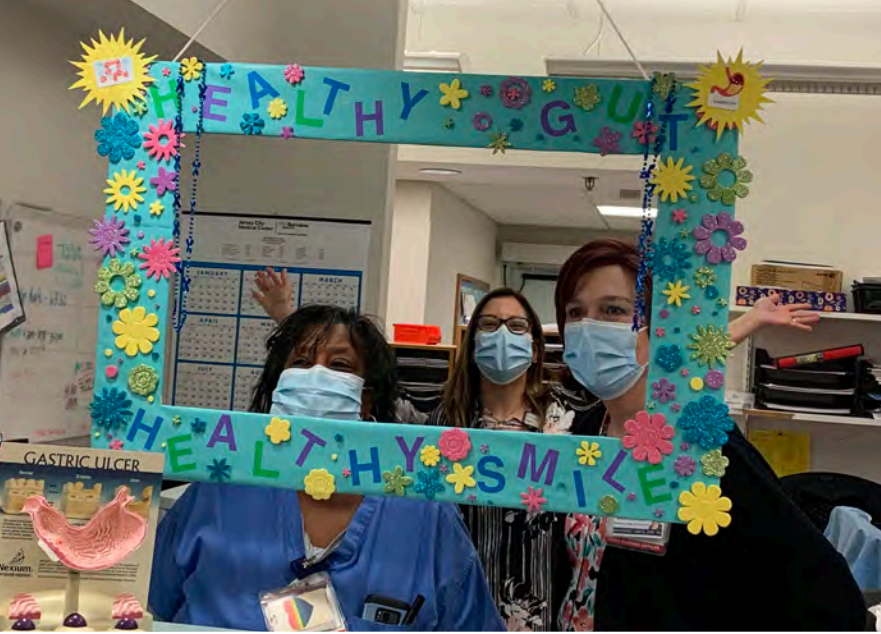
YEAR OF THE NURSE 2021

Please ensure social distancing while you enjoy this great party.

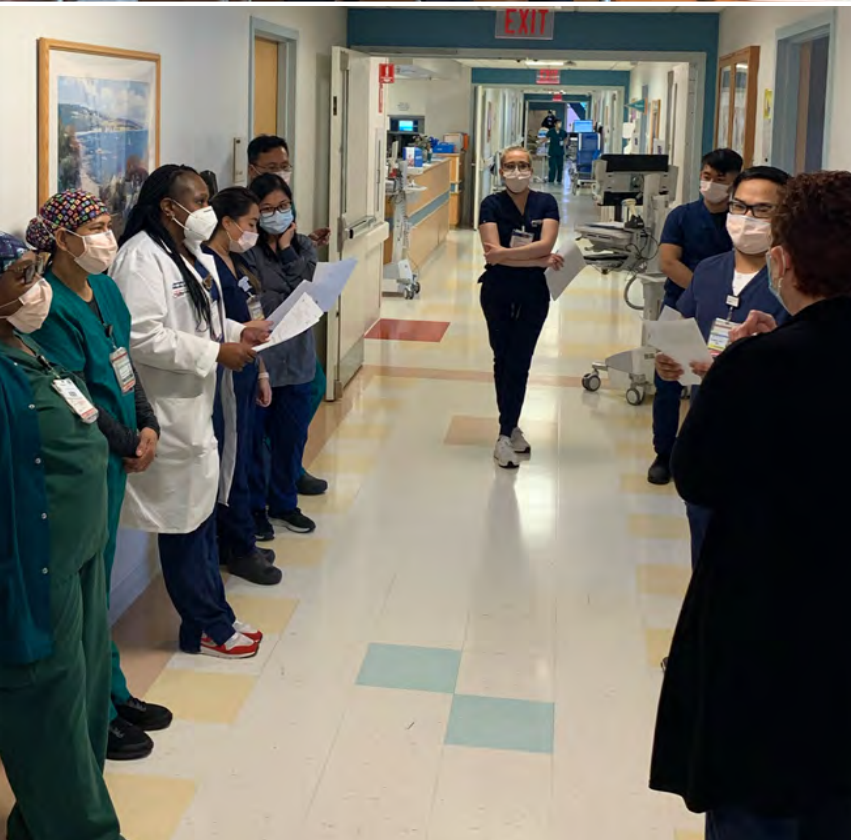




















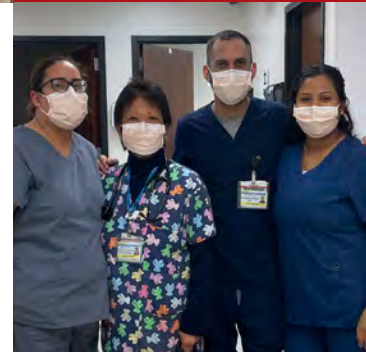






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