



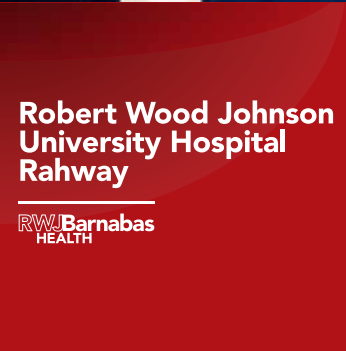
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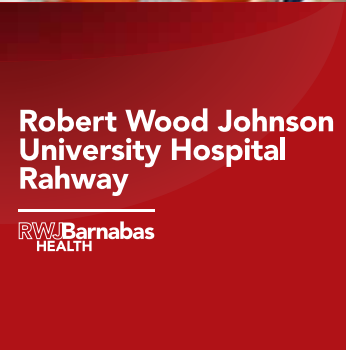
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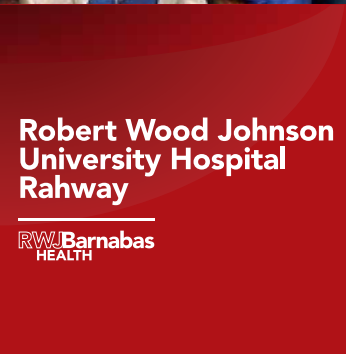
**Let's shape the
Future of Nursing
together.**



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■ Message from our President and Chief Executive Officer



We started 2021 with great optimism. Vaccines were available early in the year to help us in the battle against COVID-19. At last, a light at the end of the tunnel.

We transformed our conference room into a mega vaccination clinic so nurses, pharmacy staff and ancillary staff could administer vaccines to our community and employees. Clinics were open on weekdays, weekends, and evenings to accommodate as many people as possible. In addition to the clinic at the hospital, we operated vaccine clinics in the community. To encourage vaccination, we produced a video message from one of our nurses, who shared her own experience with COVID.

As more vaccines became available and more people got vaccinated, we were hopeful. However, the Delta and Omicron variants tempered that optimism, creating staffing shortages due to illness, limited testing supplies and medications and increased patient volume. Staff shortages meant long waits for outpatient and other services. On the inpatient side, staff members were sad and frustrated caring for very sick patients.

Although it's been difficult, our staff worked through the issues and asserted the need for calm, patience, and kindness. Once again, collaboration, resiliency and empathy helped us through the year. We supported each other in ways big and small. For example, our system created programs to help staff with issues associated with COVID. In addition, we encouraged the community to recognize the great care our staff has given patients, and they responded with letters of encouragement. I could not be prouder of the way our team faced each challenge.

In 2021, we opened 3E, our newly renovated medical-surgical unit named in honor of Dr. John and Christine Kline. While the COVID crisis delayed renovations, the opening of that unit – a showplace for the hospital – was a time to celebrate. Our staff loves the new unit, as do our patients.

To continue moving forward, we also began preparing for our transition to Epic, an electronic medical record system. It's a massive undertaking, but Epic maintains the largest electronic health record market share for acute care hospitals, so this enhancement will make communication easier among hospitals and healthcare systems.

The pandemic will continue to challenge us, but we will continue to adapt and respond to its many permutations. A strong team not only helps get the work done, but it supports and encourages its members. We hold true to the lesson we learned early on: you can get through anything if you work together as a team.

Sincerely,

A handwritten signature in black ink that reads "Kirk C. Tice". The signature is written in a cursive, flowing style.

Kirk C. Tice
President and Chief Executive Officer

■ Message from our Chief Nursing Officer



Healthcare has been challenged in so many ways over the last two years. In early 2021, we thought vaccines were the way out of the pandemic, but that was not to be.

In the early days of the pandemic, healthcare workers were national heroes, coming through for their communities and honored with parades, free meals, cupcakes and thousands of boxes of Girl Scout cookies. Then toward the end of 2021, in the early days of the Omicron variant, patience wore thin and it seemed healthcare workers had fallen from grace in the public's eyes.

However, even as the pandemic continued, we continued to drive innovations to address staffing, improve patient care, and resolve sourcing issues. As a result, our nursing practice, workflow and landscape remained dynamic and fluid. Nursing, Pharmacy, Plant Services, Registration and Admitting worked together to create a safe, seamless COVID-19 vaccine and booster clinic for adults and children. The clinic served thousands of people, including healthcare workers throughout our hospital system. Patient visitation continued to be a challenge, with restrictions changing as the number of COVID-positive patients fluctuated. Nurses worked with other areas of the hospital to help keep families connected with patients and staff through a variety of technical platforms. We also rolled out a new video translation service, which includes American Sign Language, so nurses have another tool to keep patients and their families informed. In contrast to our many high-tech tools, we resorted to an "old school" runner system to retrieve personal items left for patients by family members so nurses and nursing assistants didn't have to leave the busy floors. The nursing staff was grateful for this low-tech intervention.

A bright spot in the year was the reopening of 3E, our newly renovated medical-surgical unit. Nurses and techs helped move equipment and organize the newly renovated floor, which is as beautiful as it is functional.

For me, a true source of pride is the number of nurses who achieved advanced degrees during the two years of the pandemic. Two of our nurses achieved Doctorates of Nursing Practice, seven received Masters of Science, and 12 received their Bachelors of Science in Nursing. Eleven more nurses achieved clinical ladders. Many of our nurses received professional appointments on university boards to share their knowledge and skills with their peers.

By working together, sharing and supporting each other, we've come through for our community. A poster in our emergency department sums it up perfectly: You Matter. Our Staff Matter. Be Kind.

Sincerely,

A handwritten signature in black ink that reads "Ann Marie Shears".

Ann Marie Shears, MA, RN, NE-BC
Vice President of Patient Care Services
and Chief Nursing Officer



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Nursing Leadership



**Ann Marie Shears, MA,
RN, NE-BC**
*Vice President of Patient
Care Services and Chief
Nursing Officer*



**Deborah Gandy, MSN, MSA,
RN, CPHQ**
*Vice President of Clinical
Transformation and Integration*



Eric Kleinert, BSN, RN
*Administration Director of
Nursing Operations*



Helen Peare, BSN, RN
*Director of Ambulatory
Cardiac Services*



Victor Sanotsky, MS, RN
Director of Perioperative Services



**Kathleen Borenstein, DNP,
RN, CCRN-K**
*Director of Nursing
Education & Research*



**Jennifer Brown, MPA,
MSN, RN**
*Magnet Program Manager and
Nursing Practice Outcomes*



**Christine Meo, MSN,
APN, RN-BC**
*Nurse Manager Medical
Unit - 2A*



**Courtney Kovacs, MSN,
RN-BC**
Nurse Manager Medical Unit - 2E



Sandra Sanford, BSN, RN-BC
*Nurse Manager Telemetry
Unit - 3C*



Rose Caleen, BA, RN-C
*Nurse Manager Medical
Surgical Unit - 3E*



**Vanessa Kenney, E-MBA,
DNP, MSN, FNP, RN-BC**
*Nurse Manager Critical
Care Unit*



**Dawn Schanz, MSN,
RN, GNP, CNOR**
Nurse Manager Perioperative



Kristy O'Connor, BSN, RN
*ED Nurse Manager
Emergency Department*



**Mary Mulyk, MBA, BSN,
RN, CCM**
*Director of Medical
Management Case Management
& Social Services*



**Bernie Valenzuela, MBA,
MSN, RN, CCM**
*Assistant Director of Case
Management and Social Services*



2021 Nursing Annual Report

The nurses at RWJUH Rahway are committed to become a Magnet®-designated organization.

Magnet designation is the gold standard in nursing excellence and quality care. The standards for this designation are demanding and rigorous, focusing on best practices and outcomes. Magnet criteria concentrates on nursing structure and processes to achieve evidence-based components. By adhering to the tenets of Magnet, we're continually raising the bar for positive clinical outcomes and professional growth. Magnet designation is not given—it is earned. It encompasses who we are as nurses and our contribution to healthcare. The Magnet journey cannot be rushed or forced. It is a culture that empowers nurses.

Collectively, the nurses of RWJUH Rahway continue to create the culture, structure and processes to meet—and exceed—the standards of Magnet. This report highlights the impressive contributions of our nurses toward this shared goal.

2021: The International Year of Health and Care Workers

The World Health Organization (WHO) named 2020 the Year of the Nurse and Midwife to celebrate the 200th birthday of Florence Nightingale. However, in response to the global COVID-19 pandemic, the WHO extended the designation, naming 2021 the International Year of Health and Care Workers.

To show appreciation and gratitude for the unwavering dedication of healthcare workers in the fight against COVID-19, the theme for 2021 was Protect. Invest. Together. According to the WHO, the major tenets of the International Year of Health and Care Workers include:

Protect

- Health and care workers have protected the world during COVID-19, and we have a moral obligation to protect them.
- Health workers delivering new COVID-19 health care innovations and vaccines should have the requisite support and enabling work environment. Vaccinating health and care workers first is the right thing to do and the smart thing to do.

Invest

- The world is facing a global shortage of health workers. We must invest in education, jobs and decent work to protect the world from disease and achieve universal health coverage.
- Globally, 70 percent of the health and social workforce are women. Nurses and midwives represent a large portion of this group. We need to invest in gender equity.

Together

- We all have a role to play to ensure that our health and care workforces are supported, protected, motivated and equipped to deliver safe health care at all times, not only during the COVID-19 crisis.

The International Year of Health and Care Workers sought to raise awareness about the need to invest in health workers to improve health, equity and economic opportunities. This includes ensuring appropriate protection and work conditions, and making additional investments in health and care workers' education and employment.

Source: <https://www.who.int/campaigns/annual-theme/year-of-health-and-care-workers-2021>



What is a Nursing Professional Practice Model (PPM)?

Professional Practice Models provide a visual representation of nursing's contribution in an organization. Developed by RWJUH Rahway nurses, our model includes values and goals that define the professional nursing identity. It captures the professional elements and relationships that define the complex role of the nurse.

The RWJUH Rahway Nursing Professional Practice Model

The patient and family encompassed by healing hands serve as the anchor for our model. Encircling our center are words that represent our care delivery system, patient-centered care. This model supports the framework of professional nurses in their everyday practice through leadership, collaboration, best practice and professional growth. It fosters the importance of superior patient care and unifies nursing practice and lifelong learning. These elements align with our organizational goals, mission and values.

Nursing Mission

To provide exceptional care and improve the health of our community with excellence in quality, service and access through compassionate care, education and community service.

Nursing Vision

Continuously strive for excellence in clinical quality, safety and service. Consistently provide patient-focused care in a family-oriented environment. We work to be trusted by patients, a valued partner in the community, and creators of positive change.

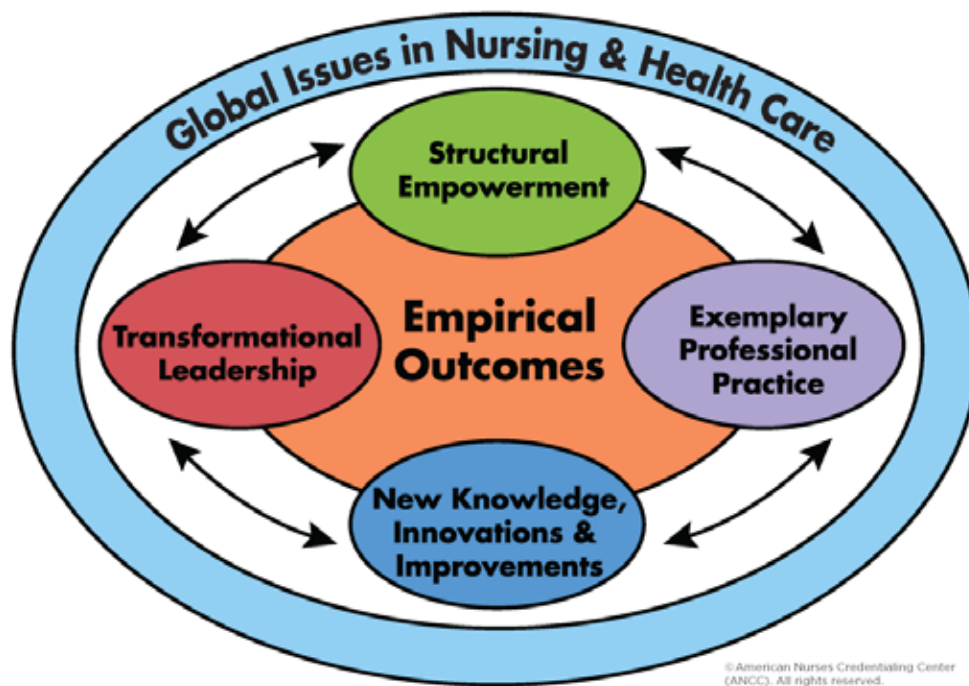
Nursing Values

Safety – We are committed to delivering our services in a safe environment that protects patients, staff and visitors by promoting high reliability behaviors.

Quality – We are committed to excellence, which is characterized by high performance, innovation, stewardship of resources, teamwork and regular evaluation service outcomes.

Collaboration – We trust our colleagues and physicians as valuable members of our healthcare team and pledge to treat one another with respect.

Dignity and Respect – We strive to meet the healthcare needs of the patients and families who reside or work within our community by affirming the unique and intrinsic work and treat all those we serve with compassion, kindness, dignity and respect, recognizing confidentiality and patient rights in our daily practice.



TRANSFORMATIONAL LEADERSHIP

At RWJUH Rahway, nurses at all levels and in all roles serve as transformational leaders. Through their vision, influence, clinical knowledge and strong expertise, they motivate and inspire others to take ownership for their roles, embrace the organization's vision and foster positive change. They have a unique ability to act as catalysts for change in nursing care practice.

RWJUH Rahway Advances its Magnet Journey Toward Nursing Excellence.

RWJUH Rahway's nursing staff continues its journey for Magnet® designation by strengthening its established structures and processes for best outcomes and focusing on cultivating areas of opportunity. Magnet designation is the highest and most prestigious credential for nursing excellence and quality patient care a healthcare organization can achieve.

This outcomes-driven credential brings both external prestige and wide-ranging internal benefits, including improved patient outcomes and nurse satisfaction and retention, and reduced costs, according to ANCC Magnet Recognition Program Magnet Manual, 2019 edition.

Our journey to create the ideal nursing practice environment started in 2019 with development of several foundational building blocks:

- Defining and communicating our nursing strategic goals
- Revising our professional practice model and the Nursing Department's mission, vision and values

- Developing nurse-sensitive indicator dashboards and monitoring tools
- Embracing the evidence-based ANCC Magnet® framework

As we pursue the credential for nursing excellence, our nursing department has advanced the journey with a readiness assessment conducted by external consultants in March 2021. The readiness assessment identified areas of strength, including:

- Financial support from organizational leadership toward monitoring of quality indicators and patient satisfaction metrics
- A tenured, visionary and highly visible Chief Nursing Officer
- Demonstrated visibility, accessibility and responsiveness in all levels of nursing leadership, with evidence of two-way communication strategies between nursing leaders and clinical nursing staff
- Shared decision-making structure
- Commitment to nurse professional development as evidenced by nurse

educators, online education programs, tuition reimbursement, support for academic progression and advocacy for nurses to obtain professional certification

Areas of improvement identified by the assessment and addressed by the Nursing Department in 2021 include:

- Creation of Magnet Boards to display dissemination of data and unit projects
- Development and implementation of nursing peer feedback to stimulate professionalism through increased accountability and self-regulation of the practice
- Continuing needs assessment survey to identify and prioritize continuing education needs
- Re-**VISION**ing of nursing's shared decision-making model to develop a more robust and focused version that empowers clinical nurses
- Building a foundation for our nursing research program, such as providing access to librarian services



**TRANSFORMATIONAL
LEADERSHIP**



Vaccine Clinic Helps Protect Nurses, Employees and Community from Severe COVID-19 Illness

In 2021, vaccines to protect against COVID-19 offered another level of safety for nurses, employees and members of the community. Vaccinating a large number of people, however, took coordination and teamwork.

An interprofessional team was tasked with planning and executing a vaccine clinic at RWJUH Rahway. This team, led by Barbara Mullery, Vice President of Human Resources and Support Services, included representatives from Nursing, Human Resources, Employee Health, Emergency Management, Facilities, Information Technology and Pharmacy. Together, they designed how the clinic would look and function, and identified areas for registration, vaccination and recovery.

“The team found space in a conference room, then worked to design the area to maximize efficiency,” explained Ann Marie Shears, MA, RN, NE-BC, Vice President of Patient Services and Chief Nursing Officer.

Adequately equipping the space meant installing internet access and computers, working with the N.J. Department of Health to run the necessary software to track each vaccination and constructing cubicles to separate the vaccination area from registration, among other tasks. In addition, Pharmacy had to purchase special freezers to keep vaccines cold.

After receiving their own vaccinations, nurses were recruited to administer COVID-19 vaccines to others and observe patients for adverse effects after vaccination. Clinical teams were on standby with code carts and resuscitation equipment just in case.

“It truly was a team approach to accommodate all shifts as well as the needs of the community,” Ann Marie said.

Clinic was originally open for employee immunizations from 7 a.m. to 7 p.m. in January and February. In March, the clinic was open on Wednesdays and Thursdays to accommodate both employees and the community and has remained open.

Vaccinations given:

Employee (includes Rahway and other System hospital employees): **2,465**

Community: **2,817**

Nurses who assisted in the vaccination clinic:

Jennifer Davila, RN
Quality Resource Coordinator
Onyekachi Festus, BSN, RN
Nursing Informatics
Rebecca Florczak, BSN, RN
Clinical Nurse ED
Sue Habling, RN
Clinical Nurse Critical Care Unit
Eileen Hodges, RN
Clinical Nurse Critical Care Unit
Eric Kleinert, MSN, RN
Director of Nursing Operations
Susan Lasko, BSN, RN-BC -
Clinical Nurse Cardiac Services
Nataliya Lizanets, BSN, RN, CNOR
Clinical Nurse Operating Room
Kristy O'Connor, BSN, RN
ED Nurse Manager
Eileen Parks, MSN, RN-BC
Clinical Nurse ED
Drupatie Ramlakhan, BSN, RN-BC
Clinical Nurse 2E
Victor Sanotsky, MS, RN
Director of Perioperative Services
Dawn Schanz, MSN, RN, GNP, CNOR
Nurse Manager Perioperative Services
Diane Strickland, MSN, RN, APN, CCRN
Employee Health
Marlene Ypil, BSN, RN
Clinical Nurse 3C

Innovative Planning Paves the Way for Monoclonal Antibody Clinic

Another tool in the arsenal to combat COVID-19 is monoclonal antibodies. For patients who have tested positive for the virus and have an elevated risk of severe illness, monoclonal antibodies can make the difference between hospitalization or healing at home.

When antibodies became available, nurses and other staff in the Emergency Department at RWJUH Rahway jumped into action to administer the life-saving infusions. They worked with Pharmacy to offer both monoclonal antibodies, Casirivimab-Imdevimab (Regeneron) and Bamlanivimab-etesevimab to eligible patients.

“Each day, the clinical coordinators worked together to develop a plan to infuse patients based on the number of patients who needed infusions at that time,” explained Kristy O'Connor, BSN, RN, Nurse Manager of the Emergency Department. “They developed an innovative plan to maximize the space we had available by building an ‘infusion room’ with multiple chairs in negative pressure rooms to help keep the nurses and other patients in the ED safe from the spread of the virus during infusion.”

The guidelines for clinical appropriateness of the treatment evolved as more doses and new monoclonal antibody formulations were developed to treat different virus variants. In general, to receive treatment, patients had to test positive for the virus in the ED or have a referral from their primary care physicians.

Nurses in the Emergency Department administered 584 monoclonal antibody infusions in 2021. “The entire ED team knew how this could be a game changer in the fight against COVID-19 and helping patients recover, it is with great pride to part of this team and healthcare innovation” says Kristy.



Interdisciplinary Rounds (IDR) Reduce Length of Stay (LOS) for Unassigned Patients

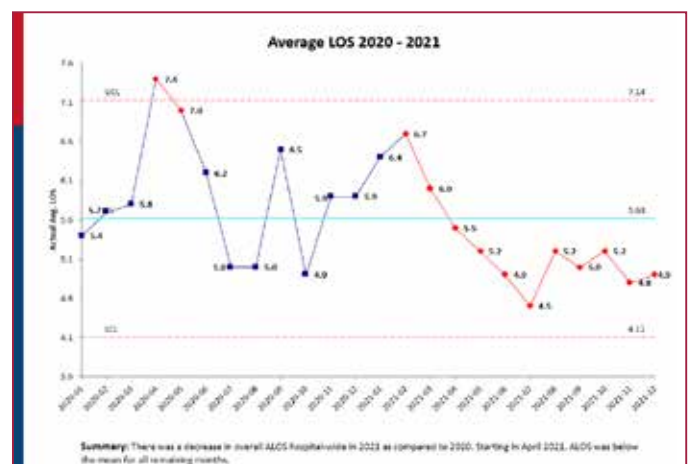
It was identified that 60% of admitted patients were unassigned patients, meaning they did not have a Primary Care Physician credentialed to admit and provide treatment. As a result their care and treatment was provided by Hospitalist Physicians.

To efficiently manage their care and reduce LOS, Dr. Carol Ash, Chief Medical Officer and Deborah Gandy, MSN, MSA, RN, CPHQ, Vice President of Clinical Transformation and Integration spearheaded along with Hospitalist Physicians, Nurses, Case Managers, Physical Therapists and other clinical staff redesigned unassigned patient IDR.

During IDR, the group discussed patients on their service list, expediting whatever care the patient needed to move closer to discharge, such as a change in medication or physical therapy to improve ambulation. In real time, Hospitalist Physicians access the medical record to enter appropriate orders or answer nurses' questions about the plan of care. In addition, each patient's anticipated day of discharge is listed on whiteboards in each patient room, so patients and their families are clear on the plan of care.

"The rounds hasten care because everyone is focused on the same goal: safe, timely discharge of the patient," said Ann Marie Shears MA, RN, NE-BC, chief nursing officer and vice president of patient care services. "Informing the patient about when they can expect to be discharged allows them to prepare for what's expected.

Since the rounds began, the redesigned IDR has yielded an overall one day decrease in the patient's LOS and starting in April 2021 the LOS was below the mean for the remainder of 2021.



Proactive Overhire Pool Will Help Fill Future Open Shifts

Transformational leadership often means anticipating—and preparing—for the future.

Nursing workforce trends have been the cornerstone of concern and discussion for the last several years and COVID-19 exacerbated turnover quicker than expected. Ann Marie Shears MA, RN, NE-BC, Vice President of Patient Care Services and Chief Nursing Officer and Eric Kleinert, MSN, RN, Director of Nursing Operations decided to proactively hire extra nurses to prepare for potential openings.

"Early in the pandemic, everyone was struggling with staff retention," Eric explained. "We looked for ways to have just-in-time staff to handle call-outs and open positions without having to use agency nurses to maintain staffing ratios."

Eric put together a financial report to detail the costs of creating an overhire float pool, and Ann Marie presented it to Human Resources. The request was approved at the next operations meeting.

"The cyclical return of COVID cases has created a national staffing crisis," Eric explains. "Many nurses are leaving the profession, and there's a lack of new candidates entering the profession. This pool helps us retain and support our frontline nurses with extra staff when needed."

"By understanding the changes in the workforce, it was easy for us to get approval to add positions to the float pool," Ann Marie said. "Everyone understood the immediacy of our needs. Proactively ensuring you have extra hands is the way of the future."

New Hypoglycemia Protocol Empowers Nurses

When 2E nurse Kaitlyn Malcolm, BSN, RN, saw an opportunity to better prevent hypoglycemia in patients with diabetes, she made the initiative her Clinical Ladder project—and changed policy at RWJUH Rahway in the process.

With the help of Courtney Kovacs, MSN, RN-BC, Nurse Manager on 2E, Kaitlyn identified that when a patient had hypoglycemia, nurses frequently had to call physicians for orders. Additionally, the protocol in place didn't reflect current clinical guidelines for treatment. Specifically, the treatment posed several issues, including:

- An antiquated IV push and IV fluid treatment was ordered for hypoglycemic patients
- No proactive hypoglycemia treatment orders were entered, causing delays in treatment
- The unit's nutritional areas weren't stocked with evidence-based hypoglycemia dietary needs

Kaitlyn reviewed evidence-based literature and revised the unit's protocol to help ensure the best outcomes for patients. The protocol helps nurses assess and identify the symptoms of hypoglycemia and then initiate appropriate treatment. She presented her proposal to the Professional Nursing Practice Council for feedback and approval. Kaitlyn then presented the protocol to RWJUH Rahway's Pharmacy and Therapeutics Council. She incorporated feedback from both councils before bringing the revised policy before the Medical Executive team for final input, feedback and approval. This interprofessional collaboration resulted in a revamped hypoglycemia treatment plan that incorporates nursing input and drives meaningful clinical change.

"Putting patients' care in the hands of the nurses, who are on the floor with patients 24 hours a day, will only improve outcomes," Kaitlyn said. "Instead of contacting the primary physician or the hospitalist for orders, we have a more time-effective protocol that gives us access to non-medical interventions that can be carried out immediately without a doctor's order."

The protocol includes a checklist that details to nurses exactly the amount of carbohydrates to give patients according to blood glucose level. This change helps prevent the overuse of dextrose, which was in short supply during the pandemic. Kaitlyn collaborated with Dietary and Food Services to develop hypoglycemia treatment kits for all floors. The kits include snacks with 15 to 30 grams of carbohydrates helps prevent rebound hyperglycemia.

"Without the checklist, it's instinctive to try to correct the problem as quickly and easily as possible by pushing dextrose or administering glucagon, but our resources will be better used by giving appropriate snacks," Kaitlyn explains.

Nurses throughout the organization were educated about the new protocol and nutrition kits, which were added to the dietary unit pars for easier compliance.

"By using an interprofessional approach, the healthcare team created a fluid workflow that positively affects nurse time management, nurse-physician-pharmacy partnership, and above all, improves hypoglycemia outcomes and patient safety," Courtney said.

Sharing Smiles to Strength Nurse-Patient Relationships

The ongoing COVID-19 pandemic continued to make caring for patients challenging. Many patients were isolated while in the hospital, and time with their families was limited. The only friendly faces that many patients saw were those of nurses, but those faces were hidden behind necessary personal protective equipment.

"It's been difficult for patients who have been kept behind closed doors, away from their families," explained Mary Jackson, Director of Patient Experience. "The only people they see are wearing masks, gowns, face shields and gloves. It can be incredibly frightening."

The staff of 2E worked with the Patient Experience Department to launch "Share Your Smiles," a campaign to show patients what their caregivers look like under all of that protective garb. Larger ID badges were created with photos supplied by each nurse. The photos became a way for many nurses to connect with their patients.

"The photos helped put patients at ease and reduce their anxiety," Mary said. "They became conversation starters, since some nurses used photos from special events in their lives, like weddings and vacations. It gave everyone something new to talk about."

Championed by several nurses, including 2E Nurse Manager, Courtney Kovacs, MSN, RN-BC, and clinical nurse Laura Makras, BSN, RN, the initiative then spread to other units.

"This project was transformative," Mary said. "It enabled nurses to better connect with their patients during a time when connections were difficult to make. It eased patients' suffering during a tough time."



Navdeep Kaur, BSN, RN & Laura Makras, BSN, RN



Providing Support and Education to Help Battling Nurse Burnout

Nurse burnout is defined as “a widespread phenomenon characterized by a reduction in nurses’ energy that manifests in emotional exhaustion, lack of motivation and feelings of frustration and may lead to reductions in work efficacy.” Now more than ever, nurses face abnormal burdens of work, stressful clinical conditions and emotional settings that challenge their ability to resist stress, resulting in burnout during a worldwide nursing shortage.

To combat burnout, RWJBH provided tools to support nurses, including mobile device apps, webinars and access to appropriate mental health providers. In addition, several initiatives were created at RWJUH Rahway to help support staff:

- Human Resources continued to provide pet therapy services in 2021, an effort that began in 2020 by clinical nurses.
- Jennifer Brown, MPA, MSN, Magnet Program Manager, coordinated with Lainie Messina, Regional Coaching Director for RWJBH, to provide an onsite and virtual presentation titled Battling Back from Burnout. Additional resources were provided for staff to explore.
- During a Professional Nursing Practice Council meeting, Inga Schwartz, MSN, RN, CNL, NREMT, of the Critical Care Unit, advocated for Crucial Conversations, a presentation by Fred Foley, Ph.D., psychologist with RWJBH’s Employee Assistance Program, The presentation educated staff on effective communication techniques when discussions involve high stakes, differing opinions and strong emotions. As a result of Inga’s advocacy, Jennifer Brown, MPA, MSN, Magnet Program Manager, worked with Dr. Foley to arrange multiple virtual presentations for all staff.



STRUCTURAL EMPOWERMENT

Structural empowerment promotes staff involvement in organizational structures that result in an empowered nursing professional practice. It increases nurse autonomy, promoting the highest levels of clinical excellence and professional practice. At RWJUH Rahway, nurses are supported and encouraged to continue professional development and promote positive change through collaborative partnerships. Recognition and acknowledgment of nursing contributions are celebrated throughout RWJUH Rahway.

Shared Governance at RWJUH Rahway

RWJUH Rahway nursing continues its vision for Magnet designation. Shared governance promotes professional practice environments while empowering nurses to help make decisions affecting themselves, their colleagues and their patients. Participation in shared governance has shown to be so important that hospitals seeking Magnet designation must demonstrate effective structures of shared governance.

To promote shared governance, nursing supports and encourages clinical nurses to participate in committees at the unit, hospital, and system levels. At RWJUH Rahway, these committees include the following.

Hospital Council/ Committee	Purpose	Elected Chair(s)	Facilitator
Falls Committee	Reducing patient's risk of harm or injury from falls as well as reducing patients' risk of falling while receiving care and services.	Sandy Sanford, BSN, RN-BC Jennifer Brown MPA, MSN, RN	Eric Kleinert, MSN, RN
Patient Family Education	Charged to prepare patients, families and caregivers for self-care and management after discharge	Judi Ervin, RN- BC	Mary Beth Puschak, MEd, RD
Professional Nursing Practice Council	Serves as a coordinating and information-sharing forum for all individual unit-based committees to ensure unit goals are in alignment with the nursing and organizational strategic plans and goals	Inga Schwarz, MSN, RN, CNL Peter Ruiz, RN	Jennifer Brown, MPA, MSN, RN
Skin and Wound Committee	Provides staff education for the reduction of skin and wound issues for better patient outcomes	Vicki Pontieri-Lewis, MS, RN, ACNS-BC, CWOCN	Vicki Pontieri-Lewis, MS, RN, ACNS-BC, CWOCN
Safe Patient Handling Committee	Ensures patient transfer/lifting is done safely and appropriately to protect both employees and patients from injury	Kristy O'Connor, BSN, RN	Ann Marie Shears, MA, RN, NE-BC
SCM End User Council	Integrates nursing practice and technology	Adriana Zamora, BSN, RN	Kachi Festus, BSN, RN



**STRUCTURAL
EMPOWERMENT**



Rebecca Florczak, BSN, RN



Beverly Ochia, RN



Michelle Uchin, RN



Dominique Yates

RWJUH Rahway Nursing Scholarship Recipients

Congratulations to 2021's Lillian Kellerman Nursing Scholarship

Recipients	Department
Rebecca Florczak, BSN, RN	Emergency Department
Beverly Ochia, RN	2A Nurse
Michelle Uchin, RN	2A Nurse
Dominique Yates	2E Nursing Assistan

Nurse Safety Coaches

At RWJUH Rahway, safety coaches uphold our culture as a high-reliability organization.

Nurse Safety Coach	Department
Simone Anckle, BSN, RN	2E
Denise Cherepanya, RN	Stress Testing
Jennifer Davila, RN	Quality
Maureen Disch, BSN, RN	Interventional Radiology
Judith Ervin, RN	Case Management
Rebecca Florczak, BSN, RN	ED
Beverly Focht, BSN, RN, CNOR	OR
Marlene Gamo, BSN, RN, CCRN	PACU
Samantha Lamsis, RN	ED
Patrick McNamara, BSN, RN	2E
Denise McTonic, RN	CCU
Blazena Ondrusova, RN	2A
Vidheeben Patel, BSN, RN	CCU
Yashi Patel, BSN, RN	2A
Sheela Thomas, BSN, RN-BC	2A

Nursing Excellence Awards

These peer-nominated awards are based on the Magnet principles of transformational leadership, structural empowerment, exemplary professional practice and new knowledge, innovations and improvements.

Transformational Leadership Award

Transformational leaders transform their organization's values, beliefs and behaviors. This requires vision, influence, clinical knowledge and strong expertise. Transformational leaders motivate and inspire others to take ownership for their roles, embrace the organization's vision and foster positive change.

Rose Tarantino, BSN, RN, CNOR Interventional Radiology

Rose Tarantino, BSN, RN, CNOR, was recognized for her open communication and enthusiasm for supporting positive change, encouraging initiatives and inspiring others. When staffing challenges prevented her from attending Professional Nursing Practice Council (PNPC), Rose advocated for additional staff to cover her during meetings. She is an enthusiastic nurse who continuously seeks to grow professionally. While pursuing her MSN degree, she continued her Clinical Ladder this year and inspired others in her department to apply as well. Also in 2021, she identified an increase in midline dislodgement rates. Along with Maureen Disch, RN, Rose investigated the increase and helped create educational materials and interventions to improve practice.

Structural Empowerment Award

Recognizing a committee or council that improves nursing practice, this award focuses on efforts to empower nurses to practice in a professional and autonomous manner to achieve the highest degree of clinical excellence and professional fulfillment.

The Falls Committee

In August 2020, Ann Marie Shears, MA, RN, NE-BC, Chief Nursing Officer, and Jennifer Brown, MPA, MSN, RN, Magnet Program Manager, identified gaps in practice that didn't align with the National Database of Nursing Quality Indicators. The committee, under the leadership of Eric Kleinert, MSN, RN, Director of Nursing Operations; Jennifer Brown, MPA, MSN, RN Magnet Program Manager; and Sandy Sanford, BSN, RN-BC, Nurse Manager of 3C began its work in March 2021. The committee supported nursing quality infrastructure and established a structure and process to improve outcomes. The team increased awareness to all hospital employees that preventing falls is everyone's responsibility. To communicate this message, the committee analyzed data on the post-fall huddle forms, launched the hospital-wide "Lessons Learned" newsletter, held the first Falls Month prevention event, and reviewed and updated fall prevention equipment. These efforts resulted in a 29% decrease in falls in 2021 compared with 2020.



Exemplary Professional Practice Award

This individual focuses on excellence, collaboration, quality, safety and best practices to realize extraordinary results through evidence-based care. The awardee provides respectful and compassionate evidence-based care through a comprehensive understanding of the role of nursing with patients, families, communities and the interdisciplinary team to continuously drive practice forward.

Adriana Zamora, BSN, RN

Adriana was nominated for her work to reduce unit-acquired pressure injuries (UAPI). When she noticed that eight patients on the unit developed pressure injuries in the first half of 2021, she spearheaded a performance improvement project to research why injuries were on the rise and develop interventions to stop the trend. She developed a checklist to help nurses—including new and agency nurses—provide more consistent skincare. After surveying nurses, Adriana learned that the unit's layout impeded good skincare practices. She assembled mobile skincare carts with all of the needed supplies, plus rulers to measure wounds. Adriana's nurse-level initiatives and interdisciplinary collaboration have led to a decrease in UAPIs and enhanced patient outcomes.

New Knowledge, Innovations and Improvements Award

This individual focuses on innovative practices, developing evidence-based care models to lead the organization in making changes that result in improved outcomes for our patients, their families and the communities we serve.

Theresa Gorringer, BSN, RN - 3E

Theresa was recognized for taking the initiative to reorganize, relabel and regroup the central supply items housed in 3E's clean utility room. Theresa rearranged items into "clinical systems" and created larger labels for more than 300 items. She used an innovative approach to solve a long-time problem. Now, nurses can find patient care items quickly when needed. This new system is a benefit to the entire 3E nursing team.

Friend of Nursing Award

This award recognizes an individual or department that demonstrates a commitment to the ideals, mission and vision of nursing and contributes to the long-term significance of nursing practice. This person or department is integral and supportive to nursing professional practice, maintains accountability for patient safety and produces positive interprofessional workflow that affects nursing in a significant way.

Nora Grillo, Nora Grillo, PT, DPT - Director of Rehabilitation Services

Nora is a visible leader who continues to be recognized for her collaboration with all disciplines. She incorporates her knowledge about safe patient mobility in many forums. She attends interdisciplinary rounds, reporting patients' mobility status to ensure a safe discharge to an appropriate level of care. She is an ad-hoc member of the Falls Committee and an active participant in apparent cause analyses and action planning when a fall is related to patient mobility. Because of her involvement, Physical Therapy (PT) purchased new gait belts for patient safety. In addition, Nursing and PT worked together to develop a new procedure for patients left in chairs after PT. Now, chair cushions with alarms let nurses know when patients get up. Nora also demonstrated safe patient handling equipment and appropriate body mechanics during Nurse Competency Day. She continues to be an active participant in the Safe Patient Handling Committee, offering suggestions for equipment that support providers and patients during patient transfers. Nora is approachable and willing to share her expertise to improve patient safety and outcomes.

Unit Administrator Award

This award recognizes Unit Administrators who maintain a seamless flow of the unit and are essential in keeping the unit centered and in sync with the organization. This team member exhibits leadership characteristics that amplify and strengthen the unit's goals and produce positive interprofessional workflow.

Amanda Rodriguez - 3C

Amanda is competent and willing to take on any task with a smile. She is the backbone of her unit, according to her nominator. She's trained newer unit administrators, establishing a culture of professionalism and a "how can I help you" attitude. Amanda is currently in nursing school and is always willing to learn new things and ask how else she can help. She functions not only as a unit administrator but also as a monitor tech and nursing assistant. She is truly hardworking.

CCT/Nursing Assistant Award

The CCT/Nursing Assistant Award recognizes an exceptional clinical care assistant or nursing assistant who provides support to nurses and patients in the organization through their communication skills, uses HRO tools to promote safety and performs day-to-day tasks with care and kindness. This individual enhances the nursing unit by accepting ownership and accountability of their practice, provides a friendly and professional bedside manner and is a team player for the unit's needs.

Nereyda Madrid De Hernandez - 2A

Nereyda was nominated by two people for being a helpful member of the 2A team. New to the team, she has a positive attitude despite taking on extra work at times. Described as an "angel in disguise," she often had to work the floor alone due to the staffing shortage. However, even with a high census and a heavy workload, she never complained. She is diligent and reliable, and collaborates with all nurses to provide quality patient care. In addition, Nereyda is often the first to help patients and staff members, which helps improve workflow. She is always available to lend a hand, has an outstanding work ethic and provides heartfelt care with every patient interaction, according to her nominators.





The DAISY Award for Extraordinary Nurses

Established by The DAISY Foundation, The DAISY Award® is an international recognition program that celebrates the extraordinary compassion nurses provide for their patients and families every day. Any RWJUH Rahway nurse who exhibits outstanding kindness may be nominated by anyone who experiences or observes their exceptional level of care. This includes patients, family members, colleagues, physicians and staff.

The DAISY Award® is a nurse recognition program based on what is most meaningful – stories of patient and family gratitude for the extraordinary compassionate care that they have received.

Examples of The DAISY Award criteria include:

- Exhibiting extraordinary compassion and kindness to patients and their families every day as an essential part of the healing process.
- Communicating in a calm, focused and caring way when patients and families may be experiencing the most difficult situation of their lives.
- Going above and beyond what is expected of nurses.

In 2021, Samira Castro, MSN, RN-BC, of 2E, earned the DAISY Award.

Samira has been a member of the RWJUH Rahway family for six years. During that time, she obtained her specialty certification and advanced her degree to a master's of science of nursing. She is a distinguished charge nurse and preceptor on her unit, and helps lead 2E's Unit-Based Council in building the ideal practice environment.

Samira's nomination comes from her peer who writes,

"You advocate for your patients and make sure all of their needs are met. If something is above your scope of practice, you make sure the correct person is made aware and appropriate changes are made to their care. You are the epitome of a nurse who goes above and beyond, not only for your patients, but also for your colleagues. You put your patients before yourself constantly and you push your younger colleagues to do better. When I work with you I feel like I have someone who will look out for me and someone who will support me when I need help. I constantly find myself saying, 'Samira makes me a better nurse,' because if I don't know something, you lead me into a room and we figure it out together.

There are many reasons why you are an amazing nurse, but one moment truly made a difference to a patient's entire family. You advocated that the patient be made comfortable during her hospital stay during a hard time during her hospitalization. Every single person involved in that patient's care was acknowledged. Even the CEO acknowledged our wonderful work, but you are the one who initiated the conversation to have the patient placed on comfort care. The family stated they are forever grateful for you because of the way you made a difference in the patient's last few weeks of life."

We are proud to name Samira the 2021 recipient of the DAISY Award.



Awards

Congratulations to the nurses who were recognized by outside organizations in 2021.

Nurse	Award
Kathleen K. Borenstein, DNP, RN, CCRN-K Director of Education and Research	Organization of Nurse Leaders of New Jersey Distinguished Award for Nursing Workplace and Environment Staffing Council Commission
Jennifer Brown, MPA, MSN, RN Magnet Program Manager	N.J. Council of Magnet Organizations Jan Moran Nursing Excellence Award

Professional Appointments

Several RWJBH Rahway nurses were tapped to serve on professional organizations in 2021. Congratulations to these nursing leaders.



Nurse	Organization
Kathleen K. Borenstein, DNP, RN, CCRN-K Director of Education and Research	Organization of Nurse Leaders of New Jersey Board of Directors Kean University Nursing Advisory Board
Jennifer Brown, MPA, MSN, RN Magnet Program Manager	Kean University Nursing Advisory Board
Vicky Pontieri-Lewis, MS, RN, ACNS-BC, CWOCN Wound Care Specialist	President-Elect of the National Wound, Ostomy, Continence Nurse Society
Rose Tarantino, BSN, RN, CNOR Clinical Nurse	Kean University Nursing Advisory Board

Presentations and Publications

RWJBH Rahway nurses often share their expertise with other organizations. In 2021:

- **Kathleen K. Borenstein, DNP, RN, CCRN-K, Director of Education and Research**, presented “Effective Communication” at the Organization of Nurse Leaders of New Jersey’s Nursing Workplace and Environment Staffing Council Commission’s educational program.
- **Vicky Pontieri-Lewis, MS, RN, ACNS-BC, CWOCN, Wound Care Specialist**, published “COVID-10 Skin Manifestations: A Guide for WOC Nursing Practice” in the September/October 2021 issue of Journal of Wound Ostomy and Continence Nursing.

2021 STAR Awards

The STAR program, RWJUH Rahway's long-standing hospital-wide employee recognition program, celebrates outstanding performance in clinical and non-clinical areas. This monthly recognition program is based on cards, letters and emails sent to the STAR committee from patients, family members and colleagues. The STAR Committee selects three STAR employees each month, along with a clinical and nonclinical STAR of the Year and a Department of the Year.

February

Jessica Ojibara, BSN, RN | 3E

Jessica was honored for her kindness, empathy, and most importantly, her ability to connect with a patient. A patient wrote, "Your nurse Jessica...she brought me a cup filled with candy along with a card to express sympathy about my husband's death." Jessica was able to connect with her patient and showed empathy, kindness, and compassion.



June

Adrianna Gomez, RN | 2E

Adrianna is celebrated for kind and attentive care and a positive manner. A patient wrote, "What a lovely, caring nurse. She was very attentive and listened to me. Adrianna stopped to check on me even without me ringing for her. This made me feel so nice to know that she was here if I needed her assistance."



July

Racquel Bisda, BSN, RN, CCRN | PACU

Racquel was celebrated for her skill, attentive care, communication skills and support of patients, families and co-workers. A family member wrote, "Racquel 'Rocky' was very attentive to the patient's, as well as the family's needs. She kept us informed and provided thorough information. She was very accessible and her response time was fantastic. She acknowledged and addressed all family concerns and made additional resources available to us. We were so lucky to have her treating my father."

December

Laura Makras, BSN, RN | 2E

Laura was honored for her kind, compassionate patient care. She received many letters from patients and families, but one in particular spoke volumes: "Laura took care of my father like no other nurse has ever taken care of him. We have had many hospital stays, but nothing compared to the service provided by Laura. She is so kind, compassionate and patient. She made a huge difference in my father's stay. We have never had a nurse that could connect with him like she did. She is an amazing nurse and we were so lucky to have her take care of my dad. Laura went over and above."





Educational Achievements

Congratulations to the following nurses who have continued lifelong learning in the nursing profession by advancing their degrees in 2021.

Name	Degree	Department
Ashley Austria, BSN, RN	BSN	3C
Samira Castro, MSN, RN-BC	MSN	2E
Jennifer Davila, RN	Associates	Quality Resources
Theresa Dobbin, MSN, CCRN, WCC	MSN	CCU
Magdalena Filipkowska, BSN, RN	BSN	PACU
Rachel Gomez, MSN	MSN	Pre-Admission Testing
Vanessa Kenney, DNP, MSN, MBA, FNP, RN	DNP	CCU
Eric Kleinert, MSN, RN	MSN	Nursing Operations
Courtney Kovacs, MSN, RN-BC	MSN	2E
Sneha Mathew, BSN, RN	BSN	2E
Ruth Mathew, MSN, RN	MSN	CCU
Kristy O'Connor, BSN, RN	BSN	Emergency Department
Eileen Parks, MSN, RN-BC	MSN	ED
Yashi Patel, BSN, RN	BSN	2A
Mobeen Rahman, BSN, RN	BSN	3C
Karen Vargas, MSN, RN	MSN	Stroke

Congratulations to the following ancillary staff who successfully completed their nursing academics to earn their degree and registered nurse license in 2021.



AMERICAN NURSES CREDENTIALING CENTER

CELEBRATE CERTIFIED NURSES



Professional Nursing Certifications RWJUH Rahway is proud to recognize nurses who have obtained board certifications and those who continue to maintain theirs.

2A

Jeanneth Malicay, BSN, RN, WCC
Susan O'Connell, RN-BC
Sheela Thomas, BSN, RN-BC

2E

Samira Castro, MSN, RN-BC
Emily Durso, BSN, RN-BC
Jerilyn Gascon, BSN, RN-BC
Susan Gelowitz, RN-BC
Drupatie Ramlakhan, BSN, RN-BC

3C

Heather Ramstedt, BSN, RN, PCCN
Arlene Turner, RN, ONC

3E

Arlene Caparruva, ADN, RN-C
Maria Catalon, BSN, RN-C

BARIATRICS

Dianne Errichetti, MSN, RN, ASMBS, NSHCCHC

CARDIAC CATH LAB

Maria Balo, BSN, RN, CCRN
Marlene Lopez, ADN, RN, CCRN
Fredrick Lavin, BSN, RN, RCIS, CFRN, CNML
Rolando Ceniza, MSN, RN, CCRN

CASE MANAGEMENT

Judith Ervin, RN-BC

CRITICAL CARE UNIT

Sangeetha Alexander, BSN, RN, CCRN
Theresa Dobbin, BSN, RN, CCRN, WCC
Buffy Onyeche, ADN, RN, CCRN
Meagan Rueda, BSN, RN, CCRN
Inga Schwartz, MSN, RN, CNL
Audrey Silovitch, BSN, RN, CCRN

EMERGENCY DEPARTMENT

Feven Amanuel, BSN, RN, PCCN
Madeline Merced, BSN, RN-BC
Eileen Parks, MSN, RN-BC
Todd Riccitelli, BSN, RN, CEN

EDUCATION

Frances Mal, MA, RN, NPD-BC
Vicky Pontieri-Lewis, MA, RN, ACNS-BC, CWOCN

EMPLOYEE HEALTH

Diane Strickland, MSN, RN, APN, CCRN

ENDOSCOPY

Heasun Lee, BSN, RN, CGRN

INFECTION PREVENTION

Emma Kariuki, BSN, RN, CIC

INTERVENTIONAL RADIOLOGY

Rose Tarantino, BSN, RN, CNOR

NON-INVASIVE CARDIAC SERVICES

Susan Lasko, BSN, RN-BC

OPERATING ROOM

Leonilo Delacruz, BSN, RN, CNOR, RFNA
Beverly Focht, BSN, RN, CNOR
Nataliya Lizanets, ADN, RN, CNOR
Leila Palaganas, BSN, RN, CNOR
Brigida Santiago, BSN, RN, CNOR, CRFNA

OUTPATIENT INFUSION

Diana Hopper, BSN, RN-BC

POST-ANESTHESIA CARE UNIT

Raquel Bisda, BSN, RN, CCRN
Marlene Gamo, BSN, RN, CCRN
Dorothy Haywood, MSN, RN, NBCSN
Lois Sancho, BSN, RN, CCRN
Valentina Ubush, MSN, RN, CPAN

NURSING SUPERVISORS

Elvera Baez, DNP, RN, APN-BC
Ann Cornell, MSN, CRNP, ONS
Lorraine Martino, MSN, RN, NE-BC
Henrietta Udeh, MSN, RN, PMHNP-BC

NURSE MANAGER

Rose Marie Caleen
Courtney Kovacs
Christine Meo
Sandra Sanford
Dawn Schanz
Vanessa Kenney



Back row - Ann Marie Shears, MA, RN, NE-BC; Dru Ramlakhan, BSN, RN-BC; Renee Daly, BSN, RN; Sue Gelowitz, RN-BC; Maureen Disch, RN; Rose Tarantino, BSN, RN, CNOR; Terry Gorrige, BSN, RN; Kathy Borenstein, DNP, RN, CCRN-K
 Front row - Adriana Zamora, BSN, RN; Robin Coughlin, BSN, RN; Razel Abuan, BSN, RN
 Not pictured - Kaitlyn Malcolm, BSN, RN; Navdeep Kaur, BSN, RN

The Nursing Clinical Ladder

The Magnet framework guides nurses to build the ideal practice environment, with criteria that include valuing professional development and recognition. The clinical ladder program was developed to recognize and promote:

- Professional development
- Quality patient care
- Job satisfaction
- Nurse retention

RWJUH Rahway leaders support and applaud nurses on the clinical ladder program for outstanding nursing practice at the bedside and within the organization. Nurses can climb the clinical ladder by participating in performance improvement and/or nursing research projects and distinguishing themselves as experts in their clinical settings. This advancement recognition improves job satisfaction and increases staff retention.

LEVEL ONE	LEVEL TWO	LEVEL THREE
Renee Daly, BSN, RN (2E)	Razel Abuan, BSN, RN (3E)	Navdeep Kaur BSN, RN (2E)
Maureen Disch, RN (1R)	Theresa Gorrige, BSN, RN (3E)	Dru Ramlakhan, BSN, RN (2E)
Sue Gelowitz, RN-BC (2E)	Rose Tarantino, BSN, RN, CNOR (1R)	Adriana Zamora, BSN, RN (2A)
Kaitlyn Malcolm, BSN, RN (2E)		Robin Coughlin, BSN, RN (2A)

Community Outreach

Kaitlyn Malcolm, BSN, RN | 2E

Diabetes Education Events

The CDC notes just over 1 in 10 adults have diabetes and 1 in 3 are pre-diabetic. Kaitlyn Malcolm, BSN, RN, of 2E, recognized that nurses can impact patient care outside the hospital. In partnership with Donna Mancuso, Director of Marketing and Community Education at RWJUH Rahway, Kaitlyn helped present information sessions for people with diabetes, including those who are pre-diabetic. The outreach team includes nurses, physicians, registered dietitians and pharmacists. "I educate patients holistically about treatments, provide information about lab work and medications, and offer support," Kaitlyn said. "I encourage group members to ask questions, and I guide my lesson around the information they're seeking. Since participants' information levels vary, I provide as individualized and specific information as possible." When appropriate, Kaitlyn encourages participants to share their health concerns with a physician, dietician or specialist.

Karen Vargas, MSN, RN

Stroke Education

According to the CDC, stroke is a leading cause of death in the United States and is a major cause of serious disability for adults. In 2021, RWJUH Rahway hired Karen Vargas, MSN, RN, into the role as stroke coordinator. In alignment with our nursing strategic plan, Karen provided community education throughout 2021 in various venues across all age groups, including senior centers and Boy Scouts of America Millstone pack.

Sandra Barcia, RN | 2E

Effects of COVID-19 on the Hispanic/Latino Community.

2021 RWJUH Rahway hired Patrick Koslecki into the role of Director of Diversity, Equity and Inclusion. Patrick teamed up with Sandra Barcia, RN, of 2E, to provide education to staff on the impact of COVID-19 on the Hispanic/Latino population. During the first year of the pandemic, coronavirus ravaged the families of this population. In alignment with our nursing strategic plan, nursing wanted to establish cultural awareness to help provide better care.

Adrianna Gomez, RN | 2E

LGBTQ Queer Empowerment Hour

In December, Adrianna Gomez, RN, of 2E, partnered with our Director of Diversity, Equity and Inclusion to participate in "Queer Empowerment Hour" hosted by Union County Office of LGBTQ Affairs. Adrianna was part of a panel discussion to promote LGBTQ awareness for disparity in healthcare, challenges members of the LGBTQ community face and educate on mindful practice to build bridges. Adrianna notes, "I'm passionate about this community and wanted to contribute toward building a better and brighter future for everyone."

Terry Gorringer, BSN, RN | 3E

Relay for Life

Terry Gorringer, BSN, RN, of 3E, served as captain of RWJUH Rahway's Relay for Life team. She coordinated this outdoor event for the American Cancer Society in June at Rahway River Park. Relay for Life helps promote awareness, find a cure and help those battling cancer. Terry's passion for this event stems from a personal tragedy.

Feven Amanuel, BSN, RN, PCCN | ED

Community Handwashing Event

COVID-19 turned the world upside down in 2020 and continued to challenge us in 2021. Despite these challenges faced, the nursing team was committed to educating the community. Ann Marie Shears, MA, RN, NE-BC, Vice President of Patient Services and Chief Nursing Officer, and Jennifer Brown, MPA, MSN, RN, Manager of the Magnet Program, wanted to share the importance of handwashing to combat the spread of the virus. Donna Mancuso, Director of Marketing and Community Education, helped find a venue and coordinated with the City of Rahway so RWJUH Rahway Emergency Department clinical nurse Feven Amanuel, BSN, RN, PCCN, could educate children and their families on proper handwashing techniques.

Emergency Department

Build a Backpack Initiative

After the outpouring of support from our community during the pandemic, the Emergency Department (ED) wanted to give back. In 2021, many families struggled financially as they transitioned their children back to in-person learning. Lauren Trattner, DO, Emergency Department physician, and Kristy O'Connor, BSN, RN, ED Nurse Manager, led our Build a Backpack Initiative. more than 170 backpacks were collected for elementary, middle school and high school students. The backpacks went to clients of the Rahway Food for Friends Food Pantry and local schools.

Hospital Event

Running with the Devils

On October 24, RWJUH Rahway employees participated in RWJBarnabasHealth's Running with the Devils 5K Run & Wellness Walk. This event supports the commitment of both RWJBarnabas Health and the New Jersey Devils to build healthier communities by promoting healthy, active lifestyles and world-class healthcare. 100% of proceeds from the event was used to support Healthcare Heroes in their efforts to protect and build healthier communities.

Karen Vargas, MSN, RN | Stroke Coordinator

Front row: Hetal Kumar, David Stuhlmiller, MD; Lauren Trattner, D.O.; Janine Grayson, MD; Megan Disch, BSN, RN.
Back row: Mike Teehan, PA; Mityanand Ramnarine, MD; Kristy O'Connor, BSN, RN | Emergency Department.

Kaitlyn Malcolm, BSN, RN | 2E Clinical Nurse

Terry Gorringer, BSN, RN | 3E Clinical Nurse





COMMUNITY OUTREACH

EXEMPLARY PROFESSIONAL PRACTICE

Exemplary professional practice is the basis to move nursing practice forward through nurse empowerment, advocacy and partnering with interprofessional teams, patients and families. RWJUH Rahway nurses uphold safety and regulatory standards while striving for excellence in quality outcomes by facilitating positive practice change.



RWJUH Rahway Receives an 'A' from The Leapfrog Group

In fall 2021, RWJUH Rahway earned an "A" rating from the Hospital Safety Score by The Leapfrog Group. The report graded 70 acute care hospitals in New Jersey, and only 30 facilities earned an A rating.

The Leapfrog Hospital Safety Grade is a peer-reviewed hospital ratings program based on a hospital's ability to prevent medical errors and harm to patients. The Hospital Safety Grade is one of the nation's highest measures for patient safety, and an "A" demonstrates the commitment of physicians, nurses, and staff towards providing patients and their families with the utmost quality care and safety hospital experience.

"Achieving an 'A' is an amazing achievement. Achieving this distinction is a testament to the skill and dedication of our nursing team for their commitment to prioritize patients and their safety," said Ann Marie Shears, MA, RN, NE-BC, Vice President of Patient Care Services and Chief Nursing Officer.

"We are pleased and proud of this distinction – our eighth. Patient safety is our focus and it's an ongoing journey that demands continuous attention," said RWJUH Rahway President and Chief Executive Officer Kirk Tice.



Bariatric Program Receives National Accreditation

RWJUH Rahway's surgical weight loss program earned accreditation from the Metabolic and Bariatric Surgery Accreditation and Quality Improvement Program (MBSAQIP®), a national quality program of the American College of Surgeons (ACS) and the American Society for Metabolic and Bariatric Surgery (ASMBS).

As part of the certification, the bariatric program underwent an extensive site visit by a bariatric surgeon, who reviewed the center's structure, processes and clinical outcomes data. The program met essential criteria for staffing, training, facility infrastructure and patient care pathways.

"Accreditation confirms that the hospital's metabolic and bariatric patients receive interprofessional medical care, including pre- and postoperative care tailored for patients with obesity," explained Bariatric Coordinator Dianne Errichetti, MSN, RN, ASMBS, NSHC-CHC. "This approach has been shown to improve patient outcomes and long-term success."

The program also participates in a national data registry that publishes semiannual reports on the quality of its surgical outcomes and identifies opportunities for quality improvement. The MBSAQIP standards, Optimal Resources for Metabolic and Bariatric Surgery, are published by the ACS and the ASMBS.

Pictured are Bariatric Coordinator Dianne Errichetti, MSN, RN, ASMBS, NSHC-CHC, bariatric surgeon Anish Nihalani, MD, FACS, FASMBS, and Program Administrator Gloria Sarceno.



**EXEMPLARY
PROFESSIONAL
PRACTICE**



Maureen Disch, RN, and Rose Tarantino, BSN, RN, CNOR

Education Decreases Unintentional Midline Catheter Removal

In 2020, clinical nurses Rose Tarantino, BSN, RN, of Interventional Radiology and Bill Toth, BSN, RN, of 2E, developed RWJUH Rahway’s midline catheter insertion program to decrease central line bloodstream infections, resulting in an increase in midline insertions.

Then in 2021, Rose and Interventional Radiology clinical nurse Maureen Disch, RN, identified an upsurge in accidental dislodgements of midlines. Dislodged midlines can impact patient care by increasing the risk of infection and potential length of stay, while decreasing patient satisfaction by subjecting patients to repeat procedures.

Rose and Maureen investigated and tracked the reasons for dislodgement and began education in-services to each nursing unit, explaining the purpose of midlines and reviewing best practices for securement and preventing dislodgement. Their actions resulted in a month-over-month decrease in incidents.

Maureen notes, “I really enjoyed going to each unit to provide education and receive feedback from other nurses. I felt that it helped build relationships.”

Both Rose and Maureen earned their Clinical Ladder Awards with this project.

Reducing HAPIs Requires a Team

According to The Joint Commission, Hospital-Acquired Pressure Injury (HAPI) result in patient harm and is one of the biggest challenges hospitals face on a daily basis. HAPIs impact patients’ lives and is financial burden for the hospital. HAPIs are a Nursing Sensitive Indicator and is a potentially preventable condition.

In early 2021, nurses on 2A identified an increase in hospital-acquired pressure injuries (HAPIs), due to several contributing factors, such as COVID-19, turnover of staff, and on-boarding new graduates and supplemental staffing. Concerned by an increase in HAPIs on their unit, Adriana Zamora, BSN, RN, and Robin Coughlin, BSN, RN, proposed a solution to remind nurses of the patient’s skin integrity bundle.

“Throughout the pandemic, we tried to provide the best patient care, but to minimize exposure to COVID-19, we limited our time in patient rooms,” Robin Coughlin, BSN, RN explained. “Unfortunately, our unit had one of the highest HAPI rates in the hospital. We were doing skin checks poorly.”

The nurses created a skincare checklist that was added to each patient’s chart. The checklist included areas to log Braden scores at admission, reminders to document skin integrity using photos, and a menu of preventive measures to consider, such as repositioning or using TruVue® Heel Protector boots (see story on pg. 29). Use of the checklist was discussed during daily morning huddles and staff meetings and showed improved compliance with internal nursing performance improvement audits.

As a second layer of intervention, Robin and Adriana implemented a skincare bundle that included different approaches to skin assessments, such as two-nurse skin



Robin Coughlin, BSN, RN & Adriana Zamora, BSN, RN

checks and turning and repositioning. They also created a portable “skin cart” for staff that houses needed supplies for appropriate wound care treatments, thus improving workflow for nurses.

“Agency nurses appreciated the checklist because it explained our skin check process and set clear expectations,” said Christine Meo, MSN, APN, RN-BC, Nurse Manager on 2A.

“Skin assessments are a very important part of patient care,” explained Adriana Zamora, BSN, RN. “We started with the checklist, and while it did help guide documentation and two-nurse skin assessments, it didn’t improve our HAPI scores, so we implemented the skincare bundle to fill in some of the gaps.”

Robin and Adriana submitted their project to earn them both Clinical Ladder Awards for Level Three.

Sepsis Checklist Improves Clinical Compliance

Patients who develop sepsis infections have a higher mortality rate. To better standardize the treatment of sepsis, nurses and physicians collaborated to create a checklist to improve compliance.

“Early identification and intervention are key to saving the lives of septic patients,” said Eric Kleinert, MSN, RN, Director of Nursing Operations. “We had order sets in place, but certain aspects of the protocol were still being overlooked.”

Eric worked with Kristy O’Connor, RN, Nurse Manager of the Emergency Department at RWJUH Rahway, to create a checklist for clinical staff to reference when caring for a sepsis patient. Using the acronym BLASTS, the checklist outlines the key elements of treating a septic patient:

- B**lood cultures
- L**actic acid
- A**ntibiotics
- S**aline
- T**iming (Check blood pressure after saline bolus)
- S**upportive documentation

The multidisciplinary Sepsis Committee reviews every failure that occurs and everyone involved with the case is re-educated about sepsis best practices.

The sheet was first trialed in the emergency department before being rolled out hospital-wide. The goal of the BLASTS checklist is help clinical providers improve mortality outcomes which the Sepsis Committee will continue to monitor into 2022.

The BLASTS sheet was first presented to the Sepsis Committee, which had a lot of feedback. Then, Eric and Kristy worked with ED clinical nurses, including Megan Disch, BSN, RN, Dominica Loffreno, RN, Matt Kearns, RN, and Becky Florczak, BSN, RN, and emergency medicine physicians Lauren Trattner, DO, and Mityanand Ramnarine, MD, to further refine the tool.

“This tool empowers nurses and other providers to recognize the early signs and symptoms of sepsis to initiate work up more quickly,” Kristy explained. “The sheet serves as a resource to verify that all sepsis criteria are being carried out.”

Falls Reduction is a Collaborative Attitude

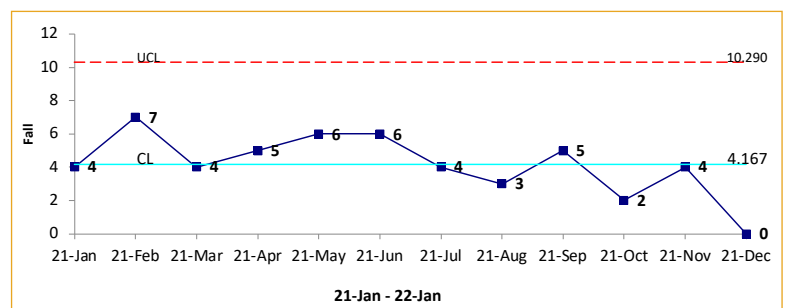
Patient falls is a nursing-sensitive indicator and is a required metric of submission for ANCC Magnet® candidacy. To reduce falls and improve outcomes in alignment with Magnet standards, Ann Marie Shears, MA, RN, NE-BC, Vice President of Patient Care Services, and Jennifer Brown, MPA, MSN, RN, Magnet Program Manager discussed creating a Falls Committee in 2020. However, this initiative was delayed by the COVID-19 crisis. In 2021, after an increase of falls during the previous year, the focus on falls was renewed. Eric Kleinert, MSN, RN Director of Nursing Operations, Jennifer Brown, MPA, MSN, RN, Sandy Sandford, BSN, RN-BC 3C Nurse Manager spearheaded the the creation of Falls Committee. As a result of collaborative efforts and laser-focused attention, there was a 22% reduction of falls in 2021 when compared with 2020, exceeding the nursing strategic goal of 10%. Additionally, nursing units outperformed national benchmarks in the National Database of Nursing Quality Indicators (NDNQI).

Structure and processes that contributed to these results include:

- Creation of Post-Fall Huddle Forms for in-depth review and analysis of each event
- Alignment with NDNQI fall definition and reporting
- Development of Falls Committee with clinical nurses from each unit
- Assessment of fall prevention equipment

- Procurement of evidence-based products and equipment
- Implementation of audio/visual call bell system and fall-prevention equipment
- House-wide education on new equipment and heightened awareness
- Monthly lessons learned newsletters
- Observance of Falls Prevention month with education and in-service

After adding falls prevention equipment to our current call bell system, it was evident that the system’s technology was too outdated to perform effectively. Nursing staff will research new equipment and seek senior leadership support for the purchase in 2022.





New Boots Provide Leg Up on Pressure Injuries

In its continued quest to find ways to improve patient care, the Nursing Department partnered with Vicki Pontieri-Lewis, MS, RN, ACNS-BC, CWOCN, inpatient Advanced Practice Nurse for wound, ostomy and continence nursing to research best practices to reduce pressure injuries in the Critical Care Unit (CCU).

“Prior to 2021, critical care patients were given foam boots to protect their feet from pressure injuries,” explained Kathleen K. Borenstein, DNP, RN, CCRN-K, Director of Nursing Education and Research at RWJUH Rahway. “However, recent evidence showed that a newer product—the TruVue® Boot—performed better at preventing injuries to the heel and outer areas of the foot.”

Vicki Pontieri-Lewis, MS, RN, ACNS-BC, CWOCN, was familiar with the TruVue boot, which attaches to the patient’s foot with

Velcro. She advocated for the product to nursing leadership, then helped train staff on appropriate use, including other ways to offload the heel from the bed. The change was supported by wound care nurses, nurse educators and wound care champions, who discussed the new product during patient huddles.

Use of the boots began in spring 2021, and the unit saw a significant decrease in pressure injuries as a result. In addition, patients no longer complained that the boots were uncomfortable.

“Nurses looked at the evidence, and the outcomes for the boot were favorable,” Kathy said. “The boots are also easy to use, which is always key. Leadership can make changes, but if the staff nurses don’t find value in the change, they’re not going to use the product. In this case, it’s a great product, so there’s good adoption.”

Research shows peer feedback “stimulates professionalism through increased accountability and promotes self-regulation of the practice” and encourages staff to take an active role in monitoring and improving unit-based quality and safety outcomes.

Peer Feedback is Practice-Focused

The ANCC Magnet® Program standards are evidence-based. One of many components nurses must adhere to is peer feedback. The American Nurses Association (ANA) defines peer feedback as the “process by which practicing RNs assess, monitor, and make judgements about the quality of nursing care provided by peers as measured against professional practice standards”.

In 2021 RWJUH conducted a Magnet Readiness Assessment. The findings identified the need for peer feedback for all Registered Nurses at all levels. Using the six principles based on ANA guidelines, Nurse Leaders in collaboration with Human Resources created the policy and peer feedback evaluation form. In alignment with shared decision-making clinical nurses of the Professional Nursing Practice Council (PNPC) in September of 2021 was given the policy to review and provide input before dissemination.

In addition to incorporating peer feedback during annual appraisals, nursing established its first professional growth plan for clinical nurses to help with professional development and mentorship.

Product Change Reduces Trach-Related Pressure Injuries

When the staff of 2E noticed that some patients had developed medical-related device pressure injuries under their tracheostomy (trach) sites, they worked with respiratory and wound care staff to brainstorm a solution for better wound care.

Prior to 2021, the wounds of patients with cardiopulmonary issues who required trachs were packed with gauze. However, several patients developed pressure injuries. The unit's skin champions Olga Levytska, RN, Marisa Cipriano, RN, and Renee Daly, BSN, RN, brought the issue to their Unit-Based Committee meeting. They discussed the matter with RWJUH Rahway's Respiratory Department and Wound Care Coordinator to gain further feedback about their options. Vicki Pontieri-Lewis, MA, RN, ACNS-BS, CWOCN RN, Wound Care Coordinator, recommended using a pre-cut foam dressing instead of gauze.

"It was thoughtful of the nurses to troubleshoot better ways to take care of patients and advocate for a better product," said Courtney Kovacs, MSN, RN-BC, Nurse Manager of 2E. "They took the initiative to educate themselves, then collaborated with respiratory and skincare experts to find a solution."

They developed the new policy and worked with the Products Committee to make sure the new dressing was available. Huddles were used to inform nurses about the product change. In addition, the Education Department developed a one-hour course delivered by Veronica Jones, MSN, RN, regarding wound care for trach patients.

Since the change, the unit has not experienced any trach-related pressure injuries. Additionally, in the last eight quarters 2E outperforms national benchmarks with National Database of Nursing Quality Indicators for Percent of Surveyed Patients with Hospital Acquired Medical Device Related Pressure Injury.



Outcomes on 2E	
	Number of Pressure Injuries
2020	2
2021	0



Caitlyn Fagan, RN

Skin Integrity Resources

Outperforming national benchmarks for hospital-acquired pressure injuries (HAPIs) is one of the required measures for ANCC Magnet® Designation and is an indicator of the quality of care nurses provide. Wound care is a challenging specialty and requires dedicated resources and skill.

Clinical nurse Caitlyn Fagan, RN, of 3C, participates on the Wound Care Committee and identified that her colleagues would benefit from a resource book to help with nursing

care and practice. She developed a resource binder, titled, "Skin Care Resources" that contained resources such as algorithms, policies and procedures, products, and landmark measures to help nurses with their practice. The staff of 3C implemented their resource binder and aimed their interventions at preventing pressure injuries. Due to their diligence and care, 3C's HAPI Nursing Sensitive Indicators continued to outperform National Database of Nursing Quality Indicators™ benchmarks.

Caitlyn collaborated with RWJUH Rahway's newly onboarded Wound Care Coordinator, Vicky Pontieri-Lewis, MA, RN, ACNS-BS, CWOCN, president-elect of the National Wound, Ostomy, Continence, Nurse Society, to ensure the resources were evidence-based. By the end of the year the resource binder was adopted by all units.

Reducing CAUTIs Through Audits, Education, and Heightened Awareness

In 2021, RWJBarnabasHealth's Chief Nursing Officers were asked to take meaningful steps to reduce catheter-associated urinary tract infections (CAUTIs), a nursing sensitive quality indicator. To do this, Nursing Leaders wanted to raise awareness not only about ways to prevent CAUTIs, but also how to reduce the use of urinary catheters.

To do this, nursing champions were identified, trained with the medical device company Bard, which conducted a pre-education audit to assess how foleys were used on the floors. Nurses were observed inserting catheters using simulators, and each nurse completed an online education session to fill any gaps in knowledge. Each unit's foley champions continued to audit catheter use monthly and discuss any issues at Unit-Based Committee meetings.

"RWJUH Rahway's nursing team understands CAUTIs are preventable. For the last eight quarters we have outperformed against the national benchmark of the National Database of Nursing Quality Indicators demonstrating our nurses dedication and commitment towards preventing CAUTIs and patient integrity."

~ Jennifer Brown, MPA, MSN, RN
Magnet Program Manager



NEW KNOWLEDGE, INNOVATIONS, AND IMPROVEMENTS

RWJUH Rahway nurses continually seek new knowledge and innovations, integrating evidence-based practice and research into clinical and operational processes. They embrace the spirit of inquiry to discover innovative best practices for patients and care environments.

Renovated 3E Unit Offers Patient- and Nurse-Focused Upgrades

A renovated 3E opened for patients in early May with a host of amenities for both patients and staff.

The design and layout of the unit were developed by an architectural team, including RWJUH Rahway's Engineering Department. The nursing staff played an essential role in the construction, including the aesthetic visual appeal of the unit and the design of its eight private and eight semi-private patient rooms, which can accommodate joint and bariatric surgery patients.

Nurse-friendly upgrades include:

- Computers in every patient room, alleviating for mobile computer carts
- Eleven computers at the nurses' station (an upgrade from the previous unit, which had four)
- In-room body lifts to help with the ambulation of surgical patients
- In-room dialysis capabilities
- Telemetry capabilities
- A multipurpose room with large-screen, interactive TV for meetings, education or therapy
- A work station at the end of the hall, complete with a handwashing sink

"With the expansion of the nurses' station and the increased number of computers, nurses and doctors work more harmoniously since no one is waiting to document," explained Rose Caleen, BA, RN-C, Nurse Manager of 3E. "In addition, we're able to keep the hallways clear of equipment and clutter now that we have more storage and no longer need mobile computers."

Now, soothing music plays from 8 a.m. to 8 p.m. on the unit, disguising the sounds common in a busy hospital. Other patient amenities include flat-screen TVs in each room and large bathrooms, while their families can now enjoy a family lounge—a first for the unit—and a nourishment station. In addition, all rooms have new, energy-efficient windows and tiled in-room sinks.

The unit is dedicated to Dr. John Kline and his wife, Christine, philanthropic champions of the hospital.



**NEW KNOWLEDGE,
INNOVATIONS AND
IMPROVEMENTS**



Better Interpreting Service Contributes to Better Outcomes

Keeping patients and their families informed is essential for building trust between clinician and patient. In 2021, the Patient Experience Department introduced an enhanced interpretation system.

Prior to 2021, nurses speaking with non-native speakers used telephones to connect to an interpreter and relay information to patients in their language of choice. While the system worked, it was impersonal.

Now, using My Accessible Real-Time Trusted Interpreter (MARTTI), nurses connect with interpreters via iPad video. Nurses can use MARTTI to gain patient consent, answer questions and explain the next steps in the care plan. Patients can see the certified medical interpreter while he or she speaks in one of 60 available languages.

“It makes all the difference in the world to speak in a patient’s native language,” explained Mary Jackson, Director of Patient Experience.

“Now, effective communication starts in ED and follows the patient throughout their stay.”

The new system is easier to use, which has boosted its adoption, and includes more advanced features than the previous system. It was first rolled out in the Emergency Department. Now, 30 devices are available throughout the hospital.

A Cleaner, Better Organized Clean Utility Room

When the nurses of 3E moved back into their newly renovated unit, Central Supply organized and supplied the unit's clean utility room. However, the room wasn't organized in a manner that reflected how nurses gathered supplies, and staff found that labels on bins were difficult to read; Thus leading to an inefficient workflow.

Terry Gorringer BSN, RN, and Razel Abuan, BSN, RN, volunteered to reassemble their clean utility room to a more efficient design to help with workflow. Terry and Razel helped to declutter, reorganize and relabel all of the items stocked in the room. To do this, they removed every item and then grouped them by system, such as gastrointestinal, genitourinary, dressings and patient care. Large, easy-to-read labels were added to each bin.

"The entire nursing staff on the unit has expressed their gratitude for the newly reorganized area," said Rose Caleen, BA, RN-C, Nurse Manager of 3E. "It has saved each staff member time and has improved nurse satisfaction."

Adding New Cancer Treatment Requires Interprofessional Training and Collaboration

Hospitals add new services to their offerings frequently. So when a new, potentially life-saving chemotherapy procedure was added at RWJUH Rahway, nurses worked with several departments to get up to speed on how to handle and administer the radioactive therapeutic safely.

Trans-arterial chemoembolization (TACE) is a non-surgical treatment for liver cancer that uses microscopic beads of chemotherapy to block the supply of blood to the tumor while simultaneously destroying tumor cells. Performed in the Cardiac Cath Lab, TACE special equipment is used to protect those handling the chemotherapy agent. The procedure, which can be curative or palliative, also requires that nurses administer pre-antibiotics, hydration and pain medications to patients during treatment.

"There are a lot of moving parts to performing TACE. It requires collaboration between cross-functional teams," said Sheetal Patel, PharmD, BCPS, Director of the Pharmacy.

Introducing the procedure in October 2021 required teamwork among Interventional Radiology and Cath Lab clinical nurses and staff from Pharmacy and Hematology/Oncology. Nurses had to learn how to safely handle the drug, prepare it in the IV room, and administer the beads via a catheter. No radioactive material can vaporize or leak during the process, so a checklist of equipment and steps was developed, and nurses attended education sessions hosted by pharmacy staff.





Second Telemedicine Robot Enhances Neurological Care

In response to the increased need for access to comprehensive neurologic care, the nursing team advocated for a second telemedicine robot—and secured a grant to fund the purchase.

Neurologists are a precious resource, and it's difficult for patients to access neurological care on weekends, holidays, and early mornings. As a primary stroke center, RWJUH provides stroke care via telemedicine through a partnership with Rutgers Robert Wood Johnson Medical School. By purchasing a second robot, the hospital can now provide neurological consults in addition to the stroke telemedicine program, assuring that patients get quality, evidence-based neurology services. The grant-funded robot interfaces with the patient and a neurologist working remotely to perform general neurological consults.

“This technology now allows us to offer comprehensive neurological services 24 hours a day, seven days a week,” said Deborah Gandy, MSN, MSA, RN, CPHQ, Vice President of Clinical Transformation and Integration. “We can offer neurological consults anywhere at any time.”

The robot was funded by a generous grant from the Northfield Bank Foundation.



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