

■ ■ **Jersey City Medical Center**  
■ ■ **Barnabas Health**

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**2015**  
**Nursing Annual Report**



**MAGNET**  
RECOGNIZED



## Preface:

The progress of Nursing at Jersey City Medical Center is steadfast with strong commitment to improving patient outcomes, enhancing the patient and family experience with care delivery and supporting continued professional growth of all nurses. The 2015 Nursing Annual Report presents highlights of the year's accomplishment through the framework of the American Nurses Credentialing Center's Magnet® program. At Jersey City Medical Center, a twice-designated Magnet® organization, the direction of nursing reflected in the Nursing Strategic Plan and the goals of each service area within nursing embody the four components of the Magnet® program; transformational leadership, structural empowerment, exemplary professional practice, and new knowledge, innovations, and improvements. These four components result in the empirical outcomes for patients and for nurses practicing at Jersey City Medical Center that are highlighted in this annual report.



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# Transformational Leadership:

Transformational nursing leadership at Jersey City Medical Center enables the practice of nursing to continue to excel with all nurses being supported in their professional growth by the organization and by the daily presence and active engagement of Rita Smith DNP, RN, NEA-BC, Chief Nursing Officer and Senior Vice President for Patient Care Services. Transformational leaders pave the way for others to excel by empowering them to take the lead thereby, synergistically expanding nursing's reach to touch the lives of patients in new ways while attaining professional growth. The vision of Dr. Smith's transformational leadership has guided the continued evolution of the nursing strategic plan which is aligned with the Organization's goal for greater population health and safe transitions of care. The 2015 year provided a number of opportunities for nurses to challenge their perspectives on practice in order to continue to meet the needs of patients and their families.

The nursing strategic planning process consisting of three retreats beginning in May 2015 was provided in collaboration with our academic colleague, Susan W. Salmond, EdD, RN, CNAA, CTN, Executive Dean at Rutgers School of Nursing, Rutgers, and The State University of New Jersey. Nursing staff and nursing leadership from all clinical areas joined with representatives from Pharmacy, Case Management, and Respiratory Therapy, participating to hear how the changing paradigm in health care leads to the current emphasis on population health, reducing hospital readmissions, and reducing cost of care. The changing focus from acute care while sustaining excellent clinical care processes to a model facilitating patients and their caregivers to safely transition home with reduced readmissions became the challenge for nursing and creates the foundation for the evolving nursing strategic plan.



## From Joseph Scott, FACHE, President and CEO



2015 was our best year ever. Together we have reached so many milestones. Our work is innovative and inspiring with a focus on always improving the care we give to our patients and the community. This doesn't happen by chance. It is our collective efforts, guided by our Mission and Values, to raise the safety, quality and satisfaction lead by a team of talented health care professionals most especially our nursing staff, which allows us to achieve these great results.

During the past year we continued our award winning strategies. We expanded our foot print in the community by opening the Women's Center at Grove Street, the Jersey City Medical Center at Greenville and the Cardiac Diagnostic Center in the heights. These facilities improved access for our patients. Next year we will expand even further in Hudson county by opening our new RWJBarnabas Health facility at Bayonne including a new free standing Emergency Department.

And it doesn't stop with just improved access. Our population health strategies are making a difference in the lives of our patients. The coordinated efforts of our Nursing Care Continuum Center reach patients after discharge for coordination of education and follow up needed to ensure patients are engaged and educated on their self-care needs. Our Wealth from Health navigators provide incentives to patients to ensure continued compliance. All of these efforts ensure patients are cared for in the right setting at the right time and often prevent hospitalizations, readmissions and returns to the Emergency Department.

We continue to focus on being a best in class acute care facility and our efforts are recognized. By focusing our team on improving patient safety we achieved our 8th consecutive A safety rating. Jersey City Medical Center is one of only 135 hospitals nationwide to achieve this accomplishment. Our clinical quality scores also continue to improve and we doubled our efforts to achieving being in the top 10 percent nationally. Our patient satisfaction scores are soaring and in the first quarter of 2016, we have achieved remarkable results.

As a management team we believe in employee empowerment and engagement. We value our employees as our most valuable asset. This was recognized not only by Magnet with our re-designation but also by achieving the Vision of Performance Excellence Award. As the President and CEO, I am proud to be a member of this great organization and I am thankful for all you do to improve the lives of the people we serve.

## A Message from Rita Smith, DNP, RN, NEA-BC, CNO

In 2015, the work of Nursing, directed by our strategic plan took a shift that will hopefully keep us focused on the future of healthcare, community wellness, improved outcomes in all CMS measures and strengthening Nursing's role in the provision of future healthcare in Jersey City.

In 2012, we embarked on a strategic plan that prepared us as leaders, helped us to restructure the department of Nursing and focused us on the care of patients and families. We successfully developed a new nursing structure, implementing the roles of Patient Care Coordinators, Directors of Professional Practice, Quality and Education under the direction of the Associate Vice Presidents (AVPs) of Nursing for Practice and Operations. We also instituted the Care Continuum department, utilizing telephonic software and stratification of illness to follow patients post discharge. This restructuring has had two years to mature and with development of our leaders and the collaborative leadership between the AVP of Operations and AVP of Practice has allowed us to achieve our goals.



All of this work positioned us to take a much focused approach with our strategic plan over the next two years. We recognize we need to work more intensely with patients and families across the continuum. We need to coordinate care, better assess the reasons for treatment failure in patients arriving in acute care and spend much more time on medication reconciliation and management. Improving medication management is widely recognized as a contributing factor to readmissions to acute care. Reducing time in hospitals is an outcome of success for our patients and goes a long way to enhancing life.

Our refocused strategic plan will also address motivational interviewing. Motivational interviewing, focusing on the reasons for patient behavior will significantly change how we assess patients and how we design teaching around their care. Understanding motivation of behavior is fundamental to effective care planning.

We are excited about this plan for the next two years. Our work will be multidisciplinary; partnering with clinical pharmacists, social workers, community health workers and physicians. We will develop stronger structures and processes that help us keep our patients well and managing their own health at home.

## Jersey City Medical Center Nursing Leadership 2015

**Elenita AJose, BSN, RN, ONC**  
Director 6 West and Dialysis

**Robert Akal, BSN, RN**  
Manager 7 West

**Margaret Ames, MPA, BSN, RN, NEA-BC**  
Associate Vice President of Nursing Operations

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

**Selina Bray, MSN, BSN, RN-C**  
Director 5 West

**Luanne Brogna, MSN, RN, CWOCN**  
Manager Wound Care

**Ingrid Brown, BSN, RN**  
Manager Care Continuum

**Ellen Brummer, MS, RN**  
Employee Health Services

**Karen Caldas, MSN, RN-BC**  
Clinical Risk Manager

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

**Marissa Fisher, BSN, RN**  
Injury Prevention Coordinator

**Claudia Garzon-Rivera, DNP(c), MSN, RN, CNL, CCRN**  
Director of Nursing Clinical Excellence

**Brenda Hall, CPHQ, CPPS, HACF**  
Senior Vice President of Safety, Quality, and Regulatory Affairs

**Jennifer Jones, MSN, RN CNL**  
Trauma Program Coordinator

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

**Mabel LaForgia, DNP(c), MSN, RN, CNL**  
Director of Nursing Research and Evidence-Based Practice  
and the Magnet Program

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

**Michele Lopez, MSN, RN, CEN, NE-BC**  
Director Emergency Room

**Rachele Mattaliano, MS, BS, RN-C**  
Quality Management Specialist

**Irene Ondieki, MSN, RN-BC**  
Director 7 East and 7 West

**Joanie O'Leary, APN, RN-C**  
Oncology Program Director

**Kim Palestis, BSN, RN, CEN**  
Lead Clinical Operations Manager

**Joanne Reich, DNP, RN, NEA-BC**  
Associate Vice President Nursing Practice

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

**Erin Salmond, MSN, RN**  
Director 5 East/6 East

**Pamela Santiago, MSN, RN**  
Manager 5 West

**Nicole Sardinias, DNP(c), MSN, RN-BC, NEA-BC**  
Director of Education

**Larissa Semonoff, MSN, RN, CNOR**  
Director Cardiac Catheterization Laboratory /  
Perioperative Services / Endoscopy / Interventional Radiology

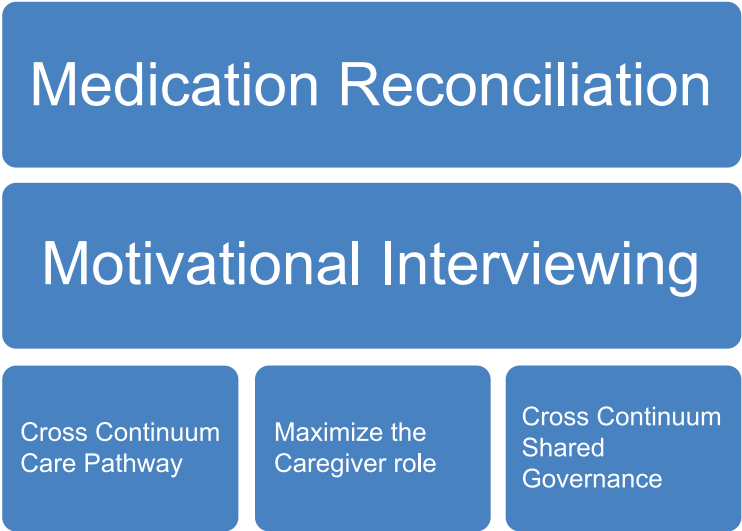
**Cristina Simeone, BSN, RN**  
Director of Critical Care Services

**Mariekarl Vilceus-Talty**  
**MA, BSN, NE-BC, RNC-OB, C-EFM, LNC**  
Director of Maternal Child Services

Nursing’s Strategic Plan:

The direction of the collective work of Nursing Services in meeting the continuously changing needs of our patient population to maintain healthy lives in our communities is depicted in the Nursing Strategic Plan: Medication Management across the Continuum of Care for Safe Care Transitions, Reduced Readmissions, and Improved Population Health. Nursing continues its goal to deliver evidence-based care to meet patients’ acute needs; however, this care is provided along a continuum to ensure our patients have the knowledge and ability to maximize self care which enables reduced readmissions. The acute care episode as the heart of healthcare has been replaced by the current focus on safe transitions of care to achieve reduced readmissions and improved population health. The American Nurses Association (2012) notes the integral role of nurses in the care coordination process to improve care quality and outcomes across patient populations and health care settings.

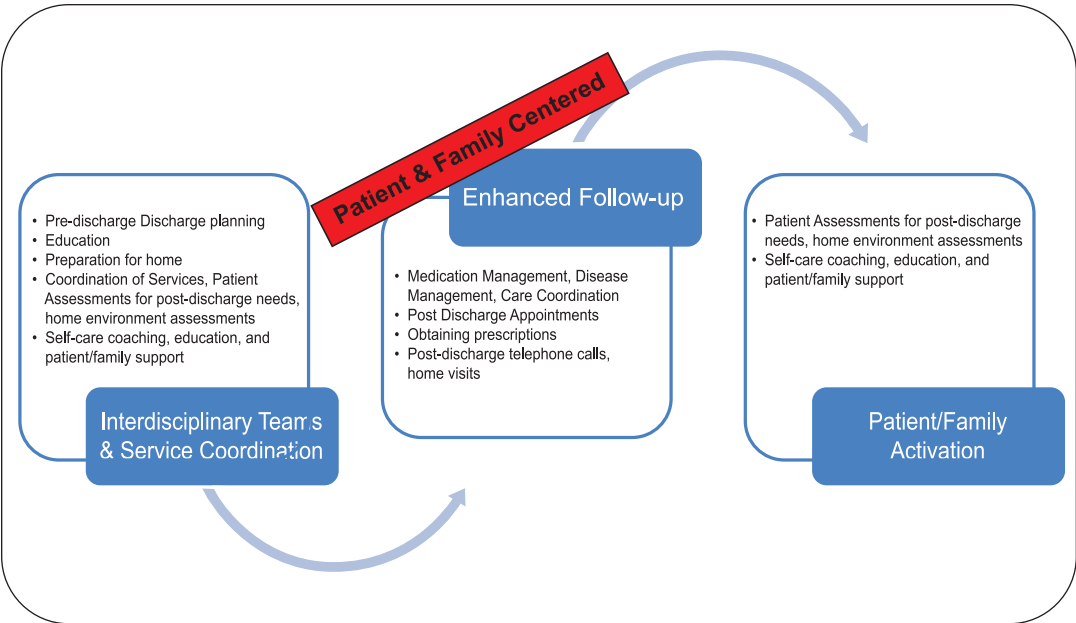
Medication Management Across the Continuum of Care for Safe Care Transitions  
2015 - 2017



The Nursing Strategic Plan is aimed at supporting transitions of care; patients’ movement from one care setting to another, primarily to their home with a focus on transitional care activities which supports our patients’ abilities to achieve positive outcomes (Naylor, et al., 2011). It is a multidisciplinary plan inclusive of partnerships with clinical colleagues, our physicians, pharmacists, case managers, and colleagues from community skilled care facilities.

The components of the Nursing Strategic Plan are Medication Management, Motivational Interviewing, Cross Continuum Pathway, Maximize the Caregiver’s Role, and Cross Continuum Shared Governance. The strategic plan incorporates Nursing’s mission, vision,

and values and aligns these with the Organization’s priorities for care. Nursing’s professional practice model illustrates these concepts and the strategic plan will bring these concepts to action. This annual report highlights some of the early work of the Nursing Strategic Plan.







## 2013 - 2015 Nursing's Plan Outcomes Snapshot

| Tracks  | Objectives   | Outcomes   |
|---|--|--|
| I: Design & Implement new model of care integrating pt./family/community & transitional care (Pt. Centered Family Care - PCFC). | Define a pt/family/community focused model that fosters engagement. Include pt/family in all aspects of care. Identify strategies/resources/infrastructure for PCFC  | <ul style="list-style-type: none"> <li>• PCFC Mc Strategies education, 2014 PCFC Interdisciplinary Conference</li> <li>• Increased use of language line</li> <li>• Increase use of EMMI, link from Soarian,</li> <li>• PCFC Workshop</li> </ul>  |
| II: Enhance organizational communication & promote collaborative interdepartmental teams  | Define shared rules & expectations r/t communication & reduce fragmentation of inter professional communication  | <ul style="list-style-type: none"> <li>• Display monitors implemented in strategic locations for announcements</li> <li>• Microsoft Outlook used for dissemination of meeting minutes</li> <li>• Increased use of Mc Strategies for Council meetings posting and tracking of members' activity</li> <li>• On-going staff Team STEPPS training implemented via orientation.</li> <li>• Improved use of pts' white boards</li> <li>• Practice Unite used to communicate with MDs</li> <li>• Enhanced Soarian to include documentation of pt's identification and consent of involved family member</li> <li>• Nursing councils increased use of Mc Strategies,</li> <li>• Increased Units with UPCs</li> </ul>   |
| III: Leadership Development & Support   | Achieve role clarity for new roles in leadership structure & promote success of new leadership model   | <ul style="list-style-type: none"> <li>• Implemented revised nursing structure to include: AVPs, Directors, PCCs, and Clinical Operations Managers.</li> <li>• Implemented PCC meetings with leadership topics - on both days &amp; night shifts</li> <li>• Implemented The Advisory Board leadership educational sessions</li> <li>• Encourage &amp; facilitate increased national board certification</li> <li>• Implemented national certified nurses' day recognition, implemented certification review course for nursing leadership for ANCC certification, Orthopedic certification, and neurovascular certification.</li> <li>• Daily bed board meeting implemented to reinforce daily interdisciplinary cooperation on resolving daily issues.</li> </ul> |
| IV: Improve Performance & Quality Outcomes  | Develop UPCs to be proactive in reporting and problem solving quality data <ul style="list-style-type: none"> <li>• Promote usage of uniform data to support PI and to share results with staff to increase transparency</li> <li>• Strengthen communication for effective reporting</li> <li>• Strengthen communication for effective reporting between RNs &amp; PCTs</li> <li>• Implement unit</li> </ul> | <ul style="list-style-type: none"> <li>• Unit level Nurse sensitive indicator data is a UPC standing agenda item</li> <li>• Developed unit specific nurse sensitive data graphs: Falls, CAUTI, CLABSI, VAE, Behavioral Health: Restraints.</li> <li>• Nursing Grand Rounds presented on Nurse Sensitive Indicators</li> <li>• Obtained tablets (SE, 6E &amp; 6W) for real-time documentation of vital signs and EKGs resulting in improved real-time documentation</li> </ul>  |

### References

American Nurses Association. (2012). *Care Coordination and Registered Nurses' Essential Role*. Retrieved July 26, 2015, from <http://nursingworld.org/MainMenuCategories/Policy-Advocacy/Positions-and-Resolutions/ANAPositionStatements/Position-Statements-Alphabetically/Care-Coordination-and-Registered-Nurses-Essential-Role.html>

Naylor, MD., Aiken, L.H., Kurtzman, E.T., Olds, D.M., & Hirschman, K.B. (2011). The importance of transitional care in achieving health reform. *Health Affairs*, 30(4), 746-754.

## Structural Empowerment:

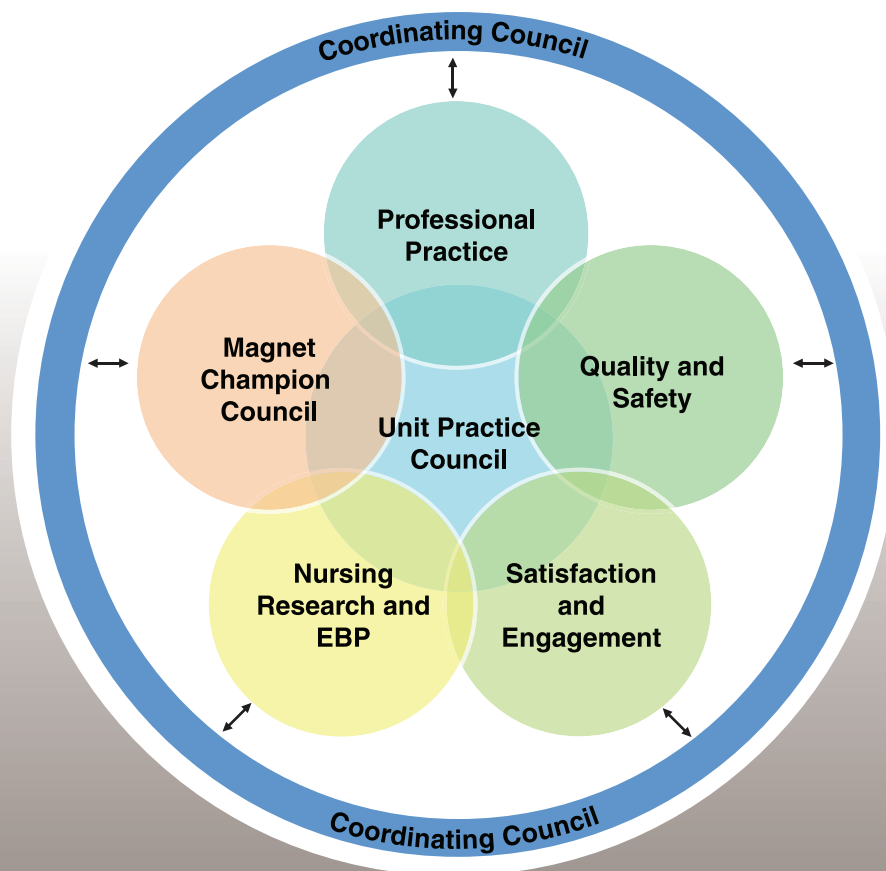
The Magnet® domain of structural empowerment depicts the many ways in which the practice environment at Jersey City Medical Center supports exemplary professional nursing practice. The functions within this domain facilitate care delivery which drives the attainment of quality patient outcomes. The cornerstone to structural empowerment is the engagement of nursing and interdisciplinary staff in the shared governance councils and the Organizations' committees.

## Shared Governance:

Shared governance is actively practiced and supported at Jersey City Medical Center with nurses from all units and with interdisciplinary membership. The shared governance process enables nurses and interdisciplinary colleagues to take ownership in elevating practice through the review and application of evidence-based literature to decision-making on clinical nursing policies and procedures, implementation of evidence-based projects, implementation of nursing research, introduction of new clinical products, and electronic documentation enhancements. Shared governance enriches the practice environment at Jersey City Medical Center.

There are six organization-wide councils with membership from inpatient and outpatient areas. Interdisciplinary members are from Pharmacy, Nutrition, Case Management, Informatics, and additional organizational members attend as warranted such as representatives from the Laboratory and Radiology. The chair persons of the organization-wide councils attend the Coordinating Council with Dr. Smith, Chief Nursing Officer and Senior Vice President for Patient Care Services and the Associate Vice Presidents of Nursing to ensure integration and alignment of shared governance activities throughout the Hospital. Each patient care area has a Unit Practice Council serving as the unit-level shared governance council where local, practice questions are addressed by the Unit's nursing staff with resources and assistance from nursing and clinical leadership. Below are highlights of the shared governance councils' 2015 accomplishments along with membership of each council.

**Nursing Shared Governance Structure**



## Professional Practice Council

The Professional Practice Council maintains standards of clinical nursing practice and clinical care delivery in accordance with evidence-based literature and regulatory requirements.



### Professional Practice Council members are:

|                        |                             |        |                             |                                    |
|------------------------|-----------------------------|--------|-----------------------------|------------------------------------|
| Regina O'Donnell, RN   | Chair                       | 6 East | Pamela Villaflor Navas, RN  | Cath Lab                           |
| Joanne Reich, DNP      | AVP Advisor                 |        | Corine Chou, RN             | Cardiovascular Intensive Care Unit |
| Mabel LaForgia, RN     | MPD Advisor                 |        | Shaden Mustafa, RN          | Intensive Care Unit                |
| April Bacunawa, RN     | 5 East                      |        | Debra Kelly, RN             | Endoscopy                          |
| Sally Kufczynski, RN   | 5 West                      |        | Christina Campaner, RN      | Emergency Room                     |
| Marlene Paredes, RN    | 5W                          |        | Anna Giron, RN              | Emergency Room                     |
| Rosanna Vales, RN      | 5W                          |        | Jocelyn Delacruz-Torres, RN | Neonatal Intensive Care Unit       |
| Brit Destefano, RN     | 6E                          |        | Chi Yuan, RN                | Labor & Delivery Unit              |
| Selena Sackroolar, RN  | 6E                          |        | Elise Campanella, RN        | Operating Room                     |
| Connie Meglioranza, RN | 6W                          |        | Lita Aguirre, RN            | PACU                               |
| Heidi Milad, RN        | 7E                          |        | Isabel Pitao, RN            | Renal Dialysis                     |
| Marissa Harris, RN     | 7E                          |        | Therese Boruta, RN          | Informatics                        |
| Yvette Bryant, RN      | 7W                          |        | Marc Monteith               | Education                          |
| Maria Evangelista, RN  | 7W                          |        | Jeanette Gerst              | Education                          |
| Rino Alcantara, RN     | Cardiac Catheterization Lab |        | Ashley Pianko               | Education                          |

## NJ CARE Act Goes Into Effect May 12, 2015

Ask inpatients if they would like to identify a caregiver who will help them when they are discharged home.

Be sure to include the designated caregiver in all discharge teaching.

Remember to complete the CARE Act Module on MC Strategies for additional information.

For more information talk to your Unit Director or contact Ingrid Cardenas at [icardenas@libertyhcs.org](mailto:icardenas@libertyhcs.org).



The Professional Practice Council reviewed, revised and developed several policies and procedures throughout the year. In keeping with the focus to support safe transitions of care for patients and responding to the New Jersey Care Act; the Council reviewed and approved a new process in which nurses assist patients to identify a designated care giver who will be involved in supporting and providing care assistance once the patient is home. Council members assisted their Unit staff members to understand their expanded role in the caregiver designation process. As a result, in 2015, up to 80% of Jersey City Medical Center patients identified a caregiver.

The Professional Practice Council also facilitated revisions to the Teach Back Tools that guide nurses in the provision and documentation of patient education on the key diagnoses of congestive heart failure, acute myocardial infarction, pneumonia, chronic obstructive pulmonary disease, diabetes and coronary artery bypass surgery.

## Quality and Safety Nursing Council

The Quality and Safety Nursing Council evaluates the quality performance metrics and reviews the nurse-sensitive indicators in order to maintain standards of clinical nursing practice and patient safety consistent with evidence-based practice and regulatory requirements. Ensuring excellence in nursing practice enables positive patient outcomes.



### Quality and Safety Nursing Council members are:

|                            |   |                           |                                      |
|----------------------------|---|---------------------------|--------------------------------------|
| Nicole Sardinas, Chair     | Education                                       | Corinne Chou, RN          | Cardiovascular Intensive Care Unit   |
| Elaine Castro, RN Co-chair | Emergency Room                                  | Aschel Curry, RN          | Operating Room                       |
| Joanne Reich, DNP          | AVP Advisor                                     | Amanda Dalioni, RN        | Labor & Delivery                     |
| Mabel LaForgia, RN         | MPD Advisor                                     | Jocelyn DelaCruz-Torres   | Neonatal Intensive Care Unit         |
| Shaakira Abdul Razzaq      | Nurse Resident Rutgers University – DNP student | Maria Devivo, Pharm D     | Pharmacy                             |
| Meghan Alcala, RN          | 6 West  | Pat DiBello, RN           | Operating Room                       |
| Prudence Arthur, RN        | Nurse Resident Rutgers University – DNP student | Samantha Dicken, RN       | Neonatal Intensive care unit         |
| April Bacunawa, RN         | 5 East  | Rebecca Frankel, RN       | Labor & Delivery                     |
| Therese Boruta, RN         | Informatics                                     | Sonia Freire, RN          | 6 West                               |
| Yvette Bryant, RN          | 7 West  | Claudia Garzon-Rivera, RN | Nursing Practice Clinical Excellence |
| Elise Campanella, RN       | Operating Room                                  | Rosemarie Gonzalez, RN    | 6 East                               |
| Ingrid Cardenas, RN        | Care Continuum                                  | Stacy Huamani, RN         | Emergency Room                       |
| Chi-Yuan Chang, RN         | Labor & Delivery                                | Ricky Jewell, RN          | Emergency Room                       |



## Quality and Safety Nursing Council members are: (cont)

|                           |   |                              |   |
|---------------------------|---|------------------------------|---|
| Jennifer Jones, RN        | Trauma Program                                  | Nancy Rodrigues, RN          | Diabetic Educator                         |
| Lukman Junaid, RN         | Nurse Resident Rutgers University - DNP student | Cynthia Rodriguez-Suarez, RN | Cardiac Catheterization Lab               |
| Debra Kelly, RN           | Endoscopy                                       | Nancy Rodriguez, RN          | Nurse Resident New Jersey City University |
| Kyungsuk Kim, RN          | 7 East  | Melissa Rosario, RN          | Emergency Room                            |
| Mabel LaForgia, RN        | Nursing Research & Evidence-based Practice      | Erica Rosser, RN             | 4 East                                    |
| Yelena Landa, RN          | Education                                       | Selena Sackroolar, RN        | 6 East                                    |
| Appendurai Laksmanan, RN  | Cardiac Catheterization Lab                     | Ebony Samuel, RN             | Education                                 |
| Elinore Lina, RN          | Cardiac Catheterization Lab                     | Kevin Scott, Pharm D         | Pharmacy                                  |
| Catherine Manza, RN       | Nurse Resident New Jersey City University       | Mustafa Shaden, RN           | Intensive Care Unit                       |
| Reyna Mateo, RN           | Patient Falls Clinician                         | Kokila Shah, RN              | Same Day Surgery                          |
| Concordia Meglioranza, RN | 6 West  | Tracy Smalls, APN            | Medicine                                  |
| Cynthia Messina, RN       | Case Manager                                    | Salemotou Sow, RN            | Labor & Delivery                          |
| Annette Morales, RN       | Educator  | Lorelei Thalla, RN           | 6 West                                    |
| Michelle Morales, RN      | Educator  | Rachelle Torres, RN          | 5 East                                    |
| Lucy Moreira, RN          | Labor & Delivery                                | Marie Ubiadas, RN            | 6 West                                    |
| Dan Murray, RN            | Stroke Program                                  | Sonia Villafior, RN          | 7 West                                    |
| Barbara Pangilinan, RN    | 5 West  | Kristine Villapando, RN      | Emergency Room                            |
| Radhika Patel, RN         | Nurse Resident Rutgers University - DNP student | Aurea Vallo, RN              | 6 East                                    |
| Isabelia Pitao, RN        | Renal Dialysis                                  | Jessica Velastegui, RN       | 6 East                                    |
| Sheila Ragoonanan, RN     | 5 West  | Darlene Washington, RN       | Preadmission Testing                      |

In 2015 the Quality and Safety Nursing Council expanded membership to include an Advanced Practice Nurse, Pharmacy and Informatics which supported the work implemented on review of the medication reconciliation process. Recognizing that patients' safe transitions of care are supported by safe medication management along continuum of care, the Council focused on the process of medication reconciliation. The Council reviewed the process and developed an audit tool for medication reconciliation. The medication management process begins with patients' use of medications at home through accurate medication history upon arrival to the hospital, implementation of medication regimes throughout the hospital stay, patient education on medications for use at home to facilitate continued safe medication self-management, and assistance for patients to obtain medications once at home.

The Council developed a monthly audit tool for each member to assess medication reconciliation practices on their units. The review revealed 80% of discharge medication reconciliations were completed and improved practice was supported to increase completion of the home medication lists upon arrival to the Hospital. The Council's work was presented in a poster session at the Northern New Jersey Evidence-based Research Consortium's Annual conference.

## Satisfaction and Engagement Council

| ANCC Category                        | Percent of Work Units above the National Average |
|--------------------------------------|--|
| Adequacy of Resources & Staffing     | 52.63%   |
| Autonomy                             | 63.16%   |
| Interprofessional Relationships      | 52.63%   |
| Leadership Access and Responsiveness | 52.63%   |

The Satisfaction and Engagement Council mentors and empowers staff to attain greater autonomy in all aspects of nursing through increased engagement and implementation of nurse driven goals aimed at ensuring patients' satisfaction with care and increasing nurses' satisfaction with their professional roles at Jersey City Medical Center. The Satisfaction and Engagement Council is acknowledged for providing annual Nurses' Week events full with recognition and thanks for nurse's commitment to providing patient care. The most recent nurse satisfaction survey conducted as part of the ANCC Magnet<sup>®</sup> designation program notes nursing satisfaction results for the majority of our units above the national average in four categories. Nursing satisfaction is measured on a repeated basis and feedback is reviewed and applied to ongoing work to maintain nursing satisfaction and engagement.

The Satisfaction and Engagement Council completed its first year as a Council blended from the two previous groups: Staff Satisfaction and Patient Engagement Councils. The aims to foster a patient centered care environment, to improve patient satisfaction and to improve staff satisfaction. The Council provided education to nursing staff on understanding the impact on the patient satisfaction scores for the Magnet<sup>®</sup> journey. The Council took a key role with assisting nursing leadership with the implementation of the innovative simulation "sim" labs aimed to be a fun but meaningful way for staff to learn and practice the "AIDET" approach to positive patient interactions at the bedside.



### Satisfaction and Engagement Council members:

|                            |                             |                   |                        |
|----------------------------|-----------------------------|-------------------|------------------------|
| Maria Adams, RN - Chair    | 5 East                      | Patrycja Wojewoda | NICU                   |
| Michelle Lopez, RN - Chair | Emergency Room              | Jessica Mercado   | 4E                     |
| Margaret Ames, RN          | AVP Advisor                 | Jean Tevara       | 4W                     |
| Stacy Newman, RN           | ED                          | Andrea Dirubba    | 4W                     |
| Kristine Villapando        | ED                          | Osaly's Bridson   | NICU                   |
| Ricky Jewell               | ED                          | Sheila Ragoonanan | 5W                     |
| Melissa Rosario            | ED                          | Joseph Bolante    | 5W                     |
| Stacy Huamani              | ED                          | Blythe Johnson    | PH-ACC                 |
| Karen Chung                | ED                          | April Bacunawa    | 5E                     |
| Stanley Owusu              | ED                          | Aurea Vallo       | 6E                     |
| Elaine Castro              | ED                          | Selena Sackroolar | 6E                     |
| Rosalie Gambito            | Special Procedures          | Maribel Labutong  | 6E                     |
| Appadural Lakshmanan       | Cardiac Catheterization Lab | C. Meglora        | 6W                     |
| Doreen Jones               | Cath lab                    | s. Freire         | 6W                     |
| Corinne Chou               | Cardiac Intensive Care Unit | Yvette Bryant     | 7W                     |
| Evelyn Alvarado            | Endoscopy                   | Kyungsuk Kim      | 7E                     |
| Prescila Alegre            | SDS                         | Ebony Samuel      | Education              |
| Desiree Cawley             | OR                          | Darryl Hippolito  | 7E                     |
| Patricia Dibello           | OR                          | Isabel Pitao      | Renal                  |
| Linda Gentile              | PACU                        | Ingrid Cardenas   | Continuum of Care      |
| Chi-Yuan Chang             | L&D                         | Mabel Laforgia    | Nursing Research & EBP |
| Salamatou Sow              | L&D                         | Reyna Mateo       | Leadership             |
| Jocelyn Dela Cruz-Torres   | NICU                        | Yelena Landa      | Education              |

## Nursing Research and Evidence-based Practice Council

The Nursing Research and Evidence-based Practice Council contributes to the nursing profession's body of knowledge through research endeavors. The Council raises staff members' knowledge and skills in nursing research and in review, appraisal and application of evidence-based practice literature.



### Nursing Research and Evidence-based Practice Council members are:

|                                  |                     |                       |                   |
|----------------------------------|---------------------|-----------------------|-------------------|
| May Kho, RN - Chair              | Intensive Care Unit | Nicole Sardinas       | Nursing Director  |
| Selena Sackroolar, RN - Co-Chair | 6 East              | Isabel Pitao          | Renal             |
| Mabel LaForgia, RN               | MPD Advisor         | Ingrid Brown          | Care Coordination |
| David Forshtay                   | 5W                  | Romana Reyes          | OR                |
| Rossana Vales                    | 5W                  | Corinne Chou          | CVICU             |
| Bernadette Mandap                | 6W                  | Eleanor Silverman     | Librarian         |
| Maria Evangelista                | 7E                  | Ashley Pianko         | Nursing Education |
| Kyungsuk Kim                     | 7E                  | Ogechi Okaro          | 6 E               |
| Ebony Samuel                     | LNPDS               | Concordia Meglioranza | 6 W               |
| Yvette Bryant                    | 7W                  | April Bacunawa        | 5 E               |
| Chi-Yuan Chang                   | L&D                 | Heidi Milad           | 7 East            |
| Jennifer Kellow                  | NICU                | Shaden Mustafa        | ICU               |
| Claudia Garzon-Rivera            | Nursing Excellence  | Brit Destefano        | 6 East            |

The Nursing Research and Evidence-based Practice Council's successfully expanded membership to include a medical librarian, Eleanor Silverman, MLS, AHIP. The librarian provides assistance with literature searches and analysis of levels of evidence to support review of evidence-based practices. The Council successfully coordinated and hosted the 7th Annual Northern New Jersey Consortium for Nursing Research and Evidence-based Practice at the Jersey City Medical Center's Museum location at which several poster presentations were provided by nursing staff. The Opening address was provided by Rita Smith DNP, RN, NEA-BC, Chief Nursing Officer: How Nurses Impact Legislation to Support EBP and the Keynote address was given by Joanne Reich DNP, RN, NEA-BC, AVP Nursing Practice: Transitional Care Trends and Innovations. Additionally, the Council hosted the 5th Annual Nursing Excellence and Research Fun Fair at the Medical Center with 101 attendees and 21 posters presented!



### JCMC Podium Presenters:

- Risk Assessment for Readmission: A Retrospective Chart Review of Adult Patients Readmitted within 30 days using the LACE Index Tool – Selena Sackroolar BSN, RN

### JCMC Poster Presentations:

- Promoting National Orthopedic Nurse Certification on a Pilot Unit - Maria Jemimah Bravo BSN RN
- Improving the Medication Reconciliation Process – developed by Quality and Safety Nursing Council  
Presented by: Annette Morales BSN RN CEN and Michelle Morales MSN, RN-BC
- Empowering Nurses through Policy Development and Approval – developed by Nursing Professional Practice Council  
Presented by Regina O'Donnell BSN, RN
- Measuring Nursing Staff Satisfaction at JCMC – Developed by Nursing Satisfaction and Engagement Council  
Presented by Michelle Lopez BSN, MPA, RN and Maria Adams BSN, MPA, RN
- Introduction to Arrhythmia Interpretation - Marc Monteith MS, RN
- Evaluation of Designated Caregiver Documentation after Implementation of NJ Care Act - Ingrid Cardenas, BSN, RN
- 2015 HRSA Grant - JCMC and New Jersey City University Nurse Residency Program - Ebony M. Samuel, MSN-Ed., RN-BC
- Orthopedic Complex Reconstructive Institute (OCRI) Quality and Outcomes Registry - Wilfredo Yap Jr., MSN RN
- Improving the Nursing Clinical Peer Review Process - Mabel LaForgia MSN, RN, CNL







*Joanne Reich, DNP, RN, NEA-BC  
Keynote: Transitional Care  
Trends & Innovations*



*The Panel presentation moderated  
by Mabel Laforgia:*

*Panel presenters:*

*Michelle Wu BSN, RN, ONC  
Dione Sandiford, BSN, RN  
Ingrid Cardenas, BSN, RN  
Ruthanne Braddock, MA, RN, NEA-BC  
Elvira Usinowicz, MS, RN, CCNS*



*JCMC Nursing Leadership  
attendance at the Nursing  
Evidence Based Practice  
and Research  
Consortium Conference*

## Magnet Champion Council

The Magnet Champion Council educates staff members about the Magnet® Program and its members serve as guide during the Magnet® Program site visits at Jersey City Medical Center. Each Unit's Magnet® board is maintained by the champions. The boards spotlight nursing staff attainment of national certification, attainment of academic degrees and quality indicators related to positive patient outcomes. In 2015, the Magnet Champion Council began the process of reviewing the current nursing practice model in order to devise a new model reflective of the current focus within nursing on fostering safe transitions of care for patients. This review will follow the Magnet® standard on essential components for a professional practice model and ensure that clinical nurses are involved in the development, implementation, and evaluation of the professional practice model (ANCC, 2013).

### Magnet Champion Council members are:

|                             |  |                       |                                   |
|-----------------------------|--|-----------------------|-----------------------------------|
| Nicole Sardinas-Chairperson | Nursing Practice                         | Ricky Jewell          | Staff Nurse, ED                   |
| Shaakira AbdulRazza         | Rutgers (DNP)                            | Mabel LaForgia-Magnet | Program Director                  |
| Joanne Reich, DNP           | AVP Advisor                              |                       | Director of Nursing Research      |
| Mabel LaForgia, RN          | MPD Advisor                              |                       | and EBP Nursing Practice          |
| Sarah Aboubakr              | L&D/4West                                | Carmencita Larobis    | Staff Nurse, PACU                 |
| Maria Adams                 | 5E                                       | Laurie Lawrence       | Staff Nurse, ED                   |
| Victoria Aljure             | NJCU                                     | Michelle Lopez        | Staff Nurse, ED                   |
| Prudence Arthur             | NJCU                                     | Catherine Manza       | Nurse Resident, NJCU              |
| April Bacunawa              | 5East                                    | Edziel Menchavez      | Staff Nurse, 6East                |
| Maria Jemimah Bravo         | 6W                                       | Marc Monteith         | Nurse Educator, ICU/CCU/ Cath Lab |
| Elise Campanella            | OR                                       | Annette Morales       | Nurse Educator, ED/Float/IR       |
| Sylvia Caparros             | SDS/PAT/Endo/PACU                        | Michelle Morales      | Nurse Educator, 4E/4W             |
| Ingrid Cardenas             | Nursing Practice                         | Jamie Obrero (Fabros) | Staff Nurse, 6E                   |
| Desiree Cawley              | OR                                       | Regina O'Donnell      | Staff Nurse, Cath Lab             |
| Chi-Yuan Chang              | L&D/4W                                   | Radhika Patel         | Nurse Resident, Rutgers (DNP)     |
| Casey Cho                   | ICU                                      | Diana Perez           | RN-Continuum of Care Call Center  |
| Corinne Chou                | CVICU                                    |                       | Nursing Practice                  |
| Daphne Chung                | Education                                | Joanne Reich          | Assoc. VP, Nursing Practice       |
| Karen Chung                 | ED                                       | Nancy Rodriguez       | Nurse Resident, NJCU              |
| Alelei Costales-Konev       | ICU                                      | Chaya Rosenberg       | Nurse Educator, 5E/6E/6W          |
| Jocelyn DeLaCruz-Torres     | NICU                                     | Selena Sackroolar     | Staff Nurse, 6E                   |
| Patricia DiBello            | OR                                       | Ebony Samuel          | Nurse Educator, 7E/7W             |
| Michelle Dickerson          | NICU                                     | Maria Sequio-Manaois  | Staff Nurse, PACU                 |
| Leah Dungee                 | NICU                                     | Melanie Sicat         | Staff Nurse, 6E                   |
| Alysa Evans                 | ICU                                      | Freedaleen Suening    | Staff Nurse, 6W                   |
| Claudia Garzon-Rivera       | Director of Excellence, Nursing Practice | Pamela Villafior      | Staff Nurse, Cath Lab             |
| Rosemarie Gonzales          | Staff Nurse, 6E                          | Yvette Villegas       | Staff Nurse, L&D/4West            |

## Unit Practice Council

The Unit Practice Council led by Alyssa Evans RN, Intensive Care Unit



### Members of the Unit Practice Councils Chairs are:

|                       |                                |                       |                              |
|-----------------------|--------------------------------|-----------------------|------------------------------|
| Alyssa Evans, RN      | Organization-wide              | Marissa Harris, RN    | 7 East                       |
|                       | UPC Chair, Intensive Care Unit | Shaden Mustafa, RN    | Intensive Care Unit          |
| Margaret Ames, RN     | AVP Advisor                    | Jemimah Bravo, RN     | 6 West                       |
| Mabel LaForgia, RN    | MPD Advisor                    | Rino Acantara, RN     | Cardiac Catheterization Lab  |
| Isabel Pitao, RN      | Renal Dialysis                 | Patrycja Wojewoda, RN | Neonatal Intensive Care Unit |
| Selena Sackroolar, RN | 6 East                         | Yvette Bryant, RN     | 7 West                       |
| Heidi Milad, RN       | 7 East                         | Julie Vanness, RN     | Emergency Room               |

# The Educational Center of Professional Development:

The journey of professional practice from the novice level to the expert level of practice is described in the model of the stages of clinical competence through experiential learning in nursing as defined by Patricia Benner Ph.D., RN. (1984). This model guides the educational support of professional practice at Jersey City Medical Center.

Aligned with the mission of the Association for Nursing Professional Development (ANPD), The Jersey City Medical Center's Educational Center for Professional Development strives to grow, mentor, educate, lead, and inspire nurses in all aspects of the nursing profession. Facilitating growth starts from the first day a nurse is introduced into the care environment. Our nurse educators are experts in professional development, and certified in their clinical specialties. This knowledge allows them to develop customized evidence-based orientation plans for each new nurse, that take into account his or her unique experiences, knowledge level, and needs. A total of 221 staff experienced orientation, 154 of them being registered nurses. The customized orientations included a minimum of 1 week of classroom learning, in addition to specialty-specific coursework for Maternal Child Health, Neonatal Intensive Care, and

adult Critical Care areas. Every orientee was provided with an orientation progression plan, and paired with experienced preceptors to meet clinical learning outcomes. The areas that experienced the largest growth in new talent were the Emergency Department, adult Critical Care Division, 7E/7W, and Behavioral Health with the addition of the mental health worker role.

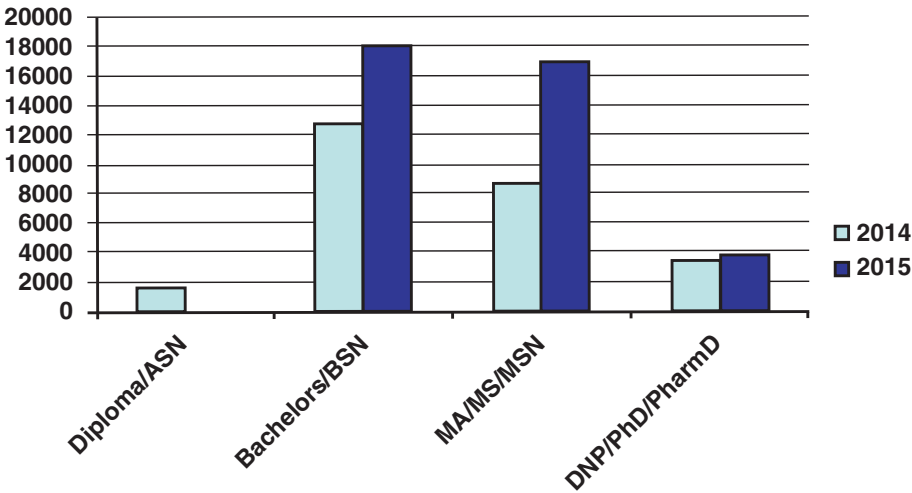
## Mentorship

Mentorship is an important aspect of professionalism, and its importance is highlighted by Provision 7 of the ANA Code of Ethics for Nurses. Provision 7 states that nurses can “advance the profession by serving in leadership or mentorship roles or on committees within their places of employment”. (ANA, 2015) JCMC nurses have served as mentors to students pursuing higher education in nursing from the baccalaureate to the doctoral level. Academic partnerships continue to thrive, and JCMC experienced an increase in total student clinical hours from 40,000 in 2014 to 49,316 in 2015. That's a 23% increase!

## Continuing Education

Continuing education is vital to sustaining nursing excellence, and best patient outcomes. As such, the Educational Center for Professional Development facilitated 1,193 live hours of education to 6,218 live attendees. These activities included full-day conferences, Nursing Grand Rounds, equipment training, competency skills validation, in-services at the point of care. Patient and family education continues to be a priority that is enhanced by tools such as EMMI, Nursing Reference Center, and Teach-back tools. Through your nurse-driven referrals, and high risk for readmission IPOC, our certified diabetes educator (CDE) was able to council patients on diabetes survival strategies and self-management techniques. The relationship continues upon discharge for many of these patients, as a number continue to attend free monthly self-management classes facilitated by the CDE, in collaboration with the continuum of care call center and wealth from health. Community outreach was also a priority, with 163 attendees over six activities.

CLINICAL ROTATIONS:  
CLINICAL HOURS BY DEGREE LEVEL



## Clinical Ladder

We believe in preparing our nurses for the future by providing the tools to lead today. As such, nurses are encouraged to climb the clinical ladder through membership in the Nursing Differentiated Practice Program (NDPP). Facilitated and led by an expert nurse educator, the NDPP program currently boasts 118 members. This is a 13.4% increase over 2014! The Pillar Ladder also continues to grow with 15 Department of Nursing members, and more expected for 2016. Part of the leadership journey includes validation of specialty expertise through professional certification. Jersey City Medical Center achieved a 40% increase in national certification of its nurses in 2015! In order to support staff to become certified, the ECPD partnered with the ANCC for the Success Pays program, and the Orthopedic Nursing Certification Board (ONCB) for the Retest for Success program. Both programs support success by allowing candidates to sit for examination up to two times at no additional cost.

## Certification Review Courses

### Orthopedic Nursing Certification:

The 6 West Unit, a 38-bed surgical unit under the leadership of Elenita Ajose, RN, ONC, and home of the Orthopedic Institute started the 2015 year with nurses needing to achieve national certification in the specialty. This was identified as the Unit's goal for 2015. With the support of nursing leadership, a two-day review course was provided. The National Association of Orthopedic Nursing (NAON) certification exam was provided to all Unit nurses through the American Nurses Credentialing Center's Retest for Success Program, in collaboration with the Educational Center for Professional Development, nurses were enabled to join the NAON at association member rates and were provided with NAON review materials. Staff requested and received schedule adjustments to prepare for the exam. The Unit's nursing leaders supported the nurses to overcome test-taking fears. Daily morning briefings included review of test topics! The Unit proudly notes 11 nurses achieved national certification in 2015!

### Nurse Executive Certification:

The American Nurses Credentialing Center's (ANCC) Nurse Executive and the Nurse Executive Advanced Review Course took place on September 18th and September 19th 2015. The course was taught by Dr. Al Rundio, content expert from ANCC. There were over 65 attendees from New Jersey and New York consisting of nurse leaders and nurses interested in furthering their careers in nursing leadership. Chief Nursing Officers, Directors of Nursing, Nurse Managers, Nurse Educators, and Patient Care Coordinators from Jersey City Medical Center, took part in the two-day course.

#### NE-BC and NEA-BC Staff

1. Margaret Ames - AVP Nursing
2. Michele Lopez - Director of Nursing
3. Dr. Joanne Reich - AVP of Nursing
4. Nicole Sardinas - Director of Nursing
5. Larissa Semenoff - Director of Nursing
6. Dr. Rita Smith - CNO/SVP of Patient Care Services
7. Mariekarl Vilceus Talty - Director of Nursing



## Neurovascular Nursing Certification:

Stroke Program Manager, Theresa Laflam, RN, NVRN-BC coordinated a two-day NVRN course on November 13th, November 14th 2015 and on-site certification exam on November 15th. The Acute Neurovascular RN Certification is a Magnet-recognized national certification exam.

The following topics were reviewed: Introduction to Acute Stroke; Anatomy & Physiology of the Neurovascular System; Reperfusion Therapy for Acute Stroke; Hemorrhagic Stroke Management; Neuro-imaging for Acute Stroke; Complications of Acute Stroke; Standardized Stroke Scales; Critical Care Management; Emergency Systems for Stroke Management; Secondary Stroke Prevention; and Stroke Center Certification.

A total of 23 Jersey City Medical Center nurses attended and 5 nurses from hospitals throughout the state attended. A total of 15 Jersey City Medical Center nurses achieved NVRN certification!

### NVRN-BC Staff

1. Darlene Lapinski - ED
2. Chris Campaner - ED
3. Dana Amorino - ED
4. Helen Yoo - ED
5. Viloki Patel - Critical Care
6. Lavia Sarkis - Critical Care
7. May Kho - Critical Care
8. Tressa Kaitharath - 7 West
9. Stephanie Orrico - 7 East
10. Bernadette Ramos - 7 East
11. Jesette Villacarlos - 7 East
12. Jerilyn Padilla - 7 East
13. Justina Oseagulu - 7 East
14. Evelyne Williams - 7 East
15. Theresa LaFlam - Stroke Dept

## Oncology and

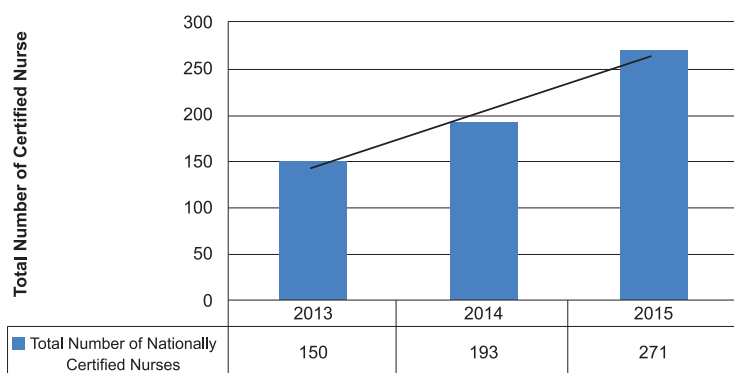
## Chemotherapy/Biotherapy Course:

The Barnabas Health Oncology and Chemotherapy/Biotherapy Course is a system-wide training course devised with close collaboration between Pharmacy and Nursing. It emphasizes application of best practice theory along with the hands on experience. In addition to didactic attendance and final exam, return demonstration of chemotherapy administration and IV push skills are mandatory requirements for successful completion of the course. The course was well attended by representatives of five BH sites including JCMC. There were experienced and new nurses from the infusion centers and oncology units, 7W. Everyone from JCMC passed the test with high scores, six nurses!

Additionally, The Course is geared towards new oncology nurses to provide a foundation for caring for patients with cancer. The course covered cancer biology, treatment, symptom management, oncologic emergencies, and patient/family care. The course provided the fundamentals of safe administration of chemotherapy and biotherapy.



Jersey City Medical Center Nationally Certified Nurses



## References

- American Nurses Association. (2015). *Code of ethics for nurses with interpretive statements*. Retrieved from nursingworld.org
- American Nurses Credentialing Center. (2013). *2014 Magnet application manual*. Silver Spring, MD: Author.
- Benner, P. (2001). (Commemorative Edition). *From Novice to Expert: Excellence and Power in Clinical Nursing Practice*. Upper Saddle River, NJ: Prentice Hall.



# Certified Nurses Day

A day to recognize certified nurses  
March 19th



THANK YOU FOR YOUR DEDICATION TO NURSING EXCELLENCE

## ER

Nurse Executive Certification & Certified Emergency Nurse  
Michele M. Lopez

## Certified Emergency Nurse

Gonzalez, Sajara  
Kaczka, Darlene  
Lopez, Anicia  
Olari, Adrian  
Notarfrancesco, Dianne  
Nystrand, Bethany L.  
Palomino, Karen  
Rodriguez, Juan  
Rosario, Melissa  
Ryan, Tara  
Scaletti, Tracy  
Sebastian, Peter  
Viera, Jorge  
Aristone, Christina  
Amorino, Dana  
Campaner-DeJoya, Christina  
Campbell, Kelly  
Chung, Karen  
Bassiacos, Amanda

Certified Emergency Nurse & Medical Surgical Nursing  
Rodriguez, Juan

Progressive Care Nsg Adult  
Hernandez, Diana

Certified Emergency Nurse, Certified Pediatric National Certification & Certified Critical Care RN  
Rin, Jorge

Neurovascular Registered Nurse Certification  
Amorino, Dana  
Campaner-DeJoya, Christina  
Kaczka, Darlene  
Yoo, Helen

Certified Emergency Nurse & Certified Critical Care Nurse  
Westbrook, Eric  
Gerardo-Floresca, Lucila

Medical Surgical Nursing Certification  
Mangarelli, Katherine

## Interventional Radiology

Certified RN Infusion, Medical Surgical National Certification & Advance Practice Nurse Certification  
Ventura, Sharon

Certified Critical Care Nurse  
Pilgrim, Terrence P

## OR

Certified Gastroenterology RN  
Loo, Kelly

## Certified Nurse Operating Room

Cabalin, Senen  
Currie, Tami  
Dibello, Patricia  
Dumo, Lilia  
Mc Corkle, Dianna  
Reyes, Romana  
Santos, Zenith-Cef  
Vellon, John  
Weaver, David

## Same Day Surgery

Medical Surgical National Certification  
Kokila, shah

## Endoscopy

Medical Surgical National Certification  
Ligon, Iliniada Loma

## Cardiac Cath Lab

Certified Critical Care Nurse  
Dela Cruz, Carolyn  
O'Donnell, Regina Lumibao  
Quiambao, Cherrilyn  
Kulvicas, Jolanta

Certified Nurse Operating Room  
Semenoff, Larissa

## PACU

Certified Post Anesthesia Nurse  
Aguirre, Lita Nina  
De Nieva, Madonna  
Gentile, Linda  
Larobis, Carmencita  
Mangubat, Maluz  
Uy-Villa, Maryan

## Certified Critical Care Nurse

Caparros, Sylvia  
Dela Pena, Susan  
Gagarin, Flordeliza  
Lusara, Marcelina

Certified Post Anesthesia Nurse & Certified Emergency Nurse  
Sequo-Manaois, Maria Gina

Orthopedic Nurse Certified  
Gentile, Linda

## Critical Care Division ICU/CVU

### Certified Critical Care Nurse

Bautista, Ben  
Druvhag, Anna  
Gordon-Lyles, Devon  
Hamdulla, Leonie  
Melendez, Julia  
Rajaram, Calowtie  
Rajaei, Roozbeh  
Stillwell, Robert  
Vales, Renee  
Benito, Joy  
David, Lisa  
Dela Cruz, Carolyn R  
Evans, Alysa  
Idrobo-Campos, Nelly  
Marcin-Neola, Viorica  
Narvaez, Nena B  
Noronha, Prema  
Patel, Viloki  
Terry, Geraldine  
Redondo, Mary

Certified Nurse Leader  
Mustafa, Shaden

Certified Critical Care Nurse & Clinical Nurse Leader  
Darius, David

Neurovascular Registered Nurse Certification  
Kho, MayAntoinette

Patel, Viloki  
Sarkis, Lavia

Certified Critical Care Nurse & Medical Surgical National Certification  
Pagaduan, James

## Stroke Program

Neurovascular Registered Nurse Certification  
Murray, Dan  
LaFlam, Theresa

## Float RNs

Medical Surgical National Certification  
Mones, Shirely

Oncology Certified Nurse  
Rabara, Norma

## Oncology

Certified Critical Care Nurse  
O'Leary, Joan

Certified Tobacco Treatment Specialist & Certified Navigator  
Breast Nurse  
Ashley, Michelle

Certified Medical Surgical RN  
Autar, Bashkarnand

## Infection Control

Certified Infection Control  
DeChirico, Victoria  
Plaskon, Mary

## Renal

Certified Nephrology Nurse  
Bondoc, Nerissa  
Corpus, Rolando  
Gelicame, Venerando  
Marasigan, Josefina  
Pitao, Isabella  
Rada, Margarita

## The Orthopedic Institute

Advance Practice Nurse Certification  
Jamie Farley  
Nancy Frederic

## Maternal Child Health Division

Nurse Executive, Inpatient Obstetric Nursing & Electrical Fetal Monitoring Certifications  
Vilceus-Talty, MarieKarl

## 4W Labor and Delivery

Inpatient Obstetric Nursing Certification  
Chang, Chi Yuan  
Taraski, Barbara

Inpatient Obstetric Nursing and Breastfeeding Counselor Certifications  
Villegas, Yvette

Inpatient Obstetric Nursing, Electronic Fetal Monitoring, and Childbirth Educator Certifications  
DiRubba, Andrea

Inpatient Obstetric Nursing, Electronic Fetal Monitoring, and Breastfeeding Counselor Certifications  
Tevari, Jean

Inpatient Obstetric Nursing and Childbirth Educator Certifications  
Ferdinand, Helen

Inpatient Obstetric Nursing, Childbirth Educator, and Nurse Midwife Certifications  
Gray, Suzette

Certified Breastfeeding Counselor  
Orrico, Aurora  
Williams-Namyslak, Sharon  
Powell, Tianna

## 4E Mother-Baby

Maternal Newborn Nurse Certification  
Abita, Alarcon  
Glover Marie  
Major, April  
Santos, Janel  
Alves-Monia, Laura

Certified Breastfeeding Counselor  
Alcantara, Maria Victoria  
Alvarado, Marilyn  
Fuller, Karen  
Gao, Maggie  
Muneshwar, Shellinie  
Tavares, Brandi

Maternal Newborn Nurse Certification and Certified Breastfeeding Counselor  
Aborde, Cielo  
Gongora, Kerole

Medical Surgical National and Breastfeeding Counselor Certifications  
Castro, Yamila

Electronic Fetal Monitoring Certification  
Horn, Michelle

Maternal Newborn Nursing Certification and International Board Certified Lactation Consultant  
Major, April

International Board Certified Lactation Consultant  
McCain, Safiyaah

Maternal Newborn Nurse Certification and Certified Childbirth Educator  
Rios, Eufemia

## NICU

Neonatal Intensive Care Certification  
Ayala, Tara

Beebe, Kathleen  
Bridson, Odalys  
Caraballo, Damaris  
Cerdan, Josephine  
Chen, Mitchell  
Del Rosario, Lisa  
Jenkins, Latina  
Larango, Gina  
Omay, Juni  
Rebustes, Roselita  
Samson, Lucila  
Singh, Amanda  
Snell, Carmen  
Tinimbang, Nilda

Neonatal Intensive Care Certification & Certified Breast Feeding Counselor  
Almuete, Cyrida  
Dela Cruz-Torres, Jocelyn  
Dungee, Leah  
Jodar, Meredith  
Wojewoda, Patrycja

Low Risk Neonatal Nurse Certification  
Anthony-Garnett, Gwendolyn

Certified Breast Feeding Counselor  
Dickens, Samantha  
Gonzales, Feliza  
Hernandez, Melissa

Neonatal Intensive Care Certification & Certified Lactation Consultant  
Tikhonov, Olga  
Slugocka, Elzbieta

Certified Lactation Consultant  
Stankovicova, Erika  
Morales Sotto, Jennifer

## 5 East Peds/Obs

Certified Medical Surgical RN  
Demese, Abigail  
Bacanawa, April

Cardiac Vascular Nursing  
Abrams, Hermela

Medical Surgical National Certification  
Labutong, Maribel

## Behavioral Health Services

Psy & Mental Health Nurse  
Bray, Selina RN-BC  
Santiago, Pamela  
Cardoso, Jennive  
Davis, Taneja  
Fay, George  
Pamintuan, Cynthia  
Johnson, Blythe  
Santos Kevin  
Babu, Babitha

Psy & Mental Health Nurse & Clinical Nurse Specialist  
Pediatric Nursing  
Paredes, Marlene

## 6W Medical Surgical

Orthopedic Nurse Certified  
Ajose, Elenita  
Bhattacharya, Moumita  
Desai, Khushbu  
Madasz, Janis  
Johnson, Bernadette  
Regis, Kathleen  
Tripathi, Gita

Medical Surgical National Certification  
Vergara, Leonida

Orthopedic Nurse & Medical Surgical National Certifications  
Ryan-Giglio, Bernadette  
Amelia Blanco  
Palces, Trijida  
Meghioranza, Concordia  
Candalla, Olivia

## 6E Telemetry

Medical Surgical National Certification  
Deleon, Luzviminda

Deguia, Susan  
Devera, Vicky  
Gonzalez, Rosemarie  
Platero, Jenina  
Tangalin, Rolondo  
Vallo, Aurea  
Beating, Sarah

Medical Surgical RN Certification  
Corpus, LuzMarilou

7E Medical Surgical  
Neurovascular Registered Nurse Certification  
Orrico, Stefanie

Oseagulu, Justina  
Ramos, Bernadette  
Vilcarlos, Jessette

Medical Surgical National Certification and Neurovascular Registered Nurse Certification  
Padilla, Jerilyn

Medical Surgical National Certification, Neurovascular Registered Nurse, & Pain Management Certifications  
Kaithaath, Treasa

WCC Wound Care Certified  
Tabaka, Valentyna

## 7W Medical Surgical

Medical Surgical National Certification  
Ondieki, Irene  
Robert Akal

Certified Medical Surgical RN  
Chin, Joycinth  
Clark, Timothy  
Coleman, Kecia  
Patel, Anitaaben  
Villaflor, Sonia

Medical Surgical Nursing Certification  
Roberts, Rachel  
Williams, Anita

## Education Center for Professional Development

Nurse Exec Advanced Certification, Certified Critical Care Nurse & Nursing Professional Development Certifications  
Sardinas, Nicole

Certified Critical Care Nurse & Advance Practice Nurse Certifications  
Monteith, Marc

Certified Emergency Nurse  
Morales, Annette

Certified Diabetic Educator  
Rodrigues, Nancy

Nursing Professional Development & Perinatal Nursing Certification  
Morales, Michelle

Progressive Care Nursing Adult Certification  
Pianko, Ashley

Neonatal intensive care, Professional Development Certification, & Certified Breast Feeding Counselor  
Dickerson, Michelle

Nursing Professional Development & Medical Surgical Nursing Certification  
Samuel, Ebony

Inpatient Obstetric Nursing Certification  
Ochoa, Ruth

Certified Nurse Operating Room  
Gerst, Jeanette

## Risk Management

Certified Professional in Healthcare Risk Mgmt & Medical Surgical Nursing Certification  
Caldas, Karen

## Performance Improvement

Nurse Executive, Certification for Professionals in Patient Safety, Healthcare Accreditation Certification, Orthopedic Nurse Certified, Gerontological Nursing, Medical Surgical Nursing Certifications  
Hall, Brenda

Certified Rehabilitation RN  
Rosenzweig, Bonnie

## Nursing Administration

Nurse Exec Advanced Certification  
Ames, Margaret  
Reich, Joanne  
Smith, Rita

Care Coordination & Transition Management Certification  
Perez, Diana

Certified Clinical Nurse Leader & Certified Critical Care Nurse  
Garzon-Rivera, Claudia

Certificate Holder in Fundamentals of Magnet & certified Clinical Nurse Leader  
LaForgia, Mabel

Gerontological Nursing Certification  
Mateo, Reyna

Certified Wound, Ostomy & Continence  
Brogna, Luanne

Certified Emergency Nurse & Trauma Cert Registered Nurse:  
Palestis, Kimberly

## Advance Practice Nurse

Advance Practice Nurse Certification  
Asuncion-Colonna, Dora A.  
DelaCruz, Lea

Dunkley, Sherene T.  
Eng, Nicole  
Farley, Pamela  
Fox, Adrian F.

Lawrence, Natasha R.  
Lladas, Mark Angelo  
Manchery, Jessymol  
Marquet, Judith

Petropoulos, Lisa  
Small, Tracy  
Suarez, Odette  
Walsh, Jessica

Young, Devon  
Zadel, Janis  
Cahill, Sharon  
Drattler-Gold, Florence  
Jeffers, Yana  
McCarthy, Jayne  
Zamber-Costello, Lisa

Martinez, Christina

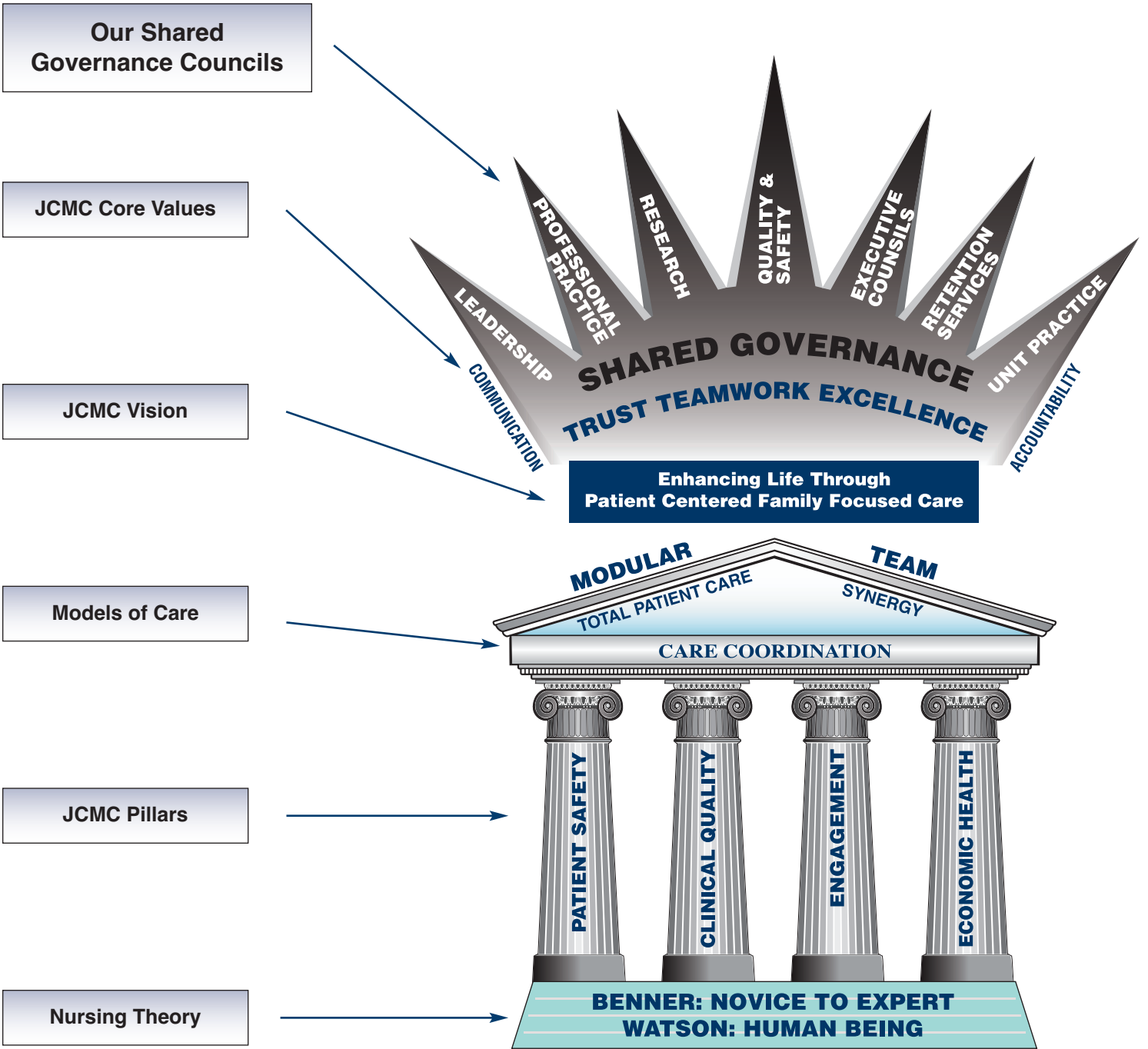
Certified Clinical Perfusionist  
Braswell, Deborah

Advance Practice Nurse & Certified Critical Care Nurse  
Maniar, Reshma



# Professional Practice Model:

The professional practice model displays the organization’s framework for the delivery of exceptional care by its nurses and interdisciplinary care team (ANCC, 2013). At Jersey City Medical Center the theory and concepts depicted in the professional practice model reflect the Organization’s Mission, Vision and Values while also embracing the diversity of the patient population. The model guides the care delivery process. In the latter part of 2015 the professional practice model began to undergo review by the Magnet Champions Council in order to ensure the model’s continued evolution to keep pace with the changing healthcare focus on care coordination. The existing model and the evolving model are proudly noted below:



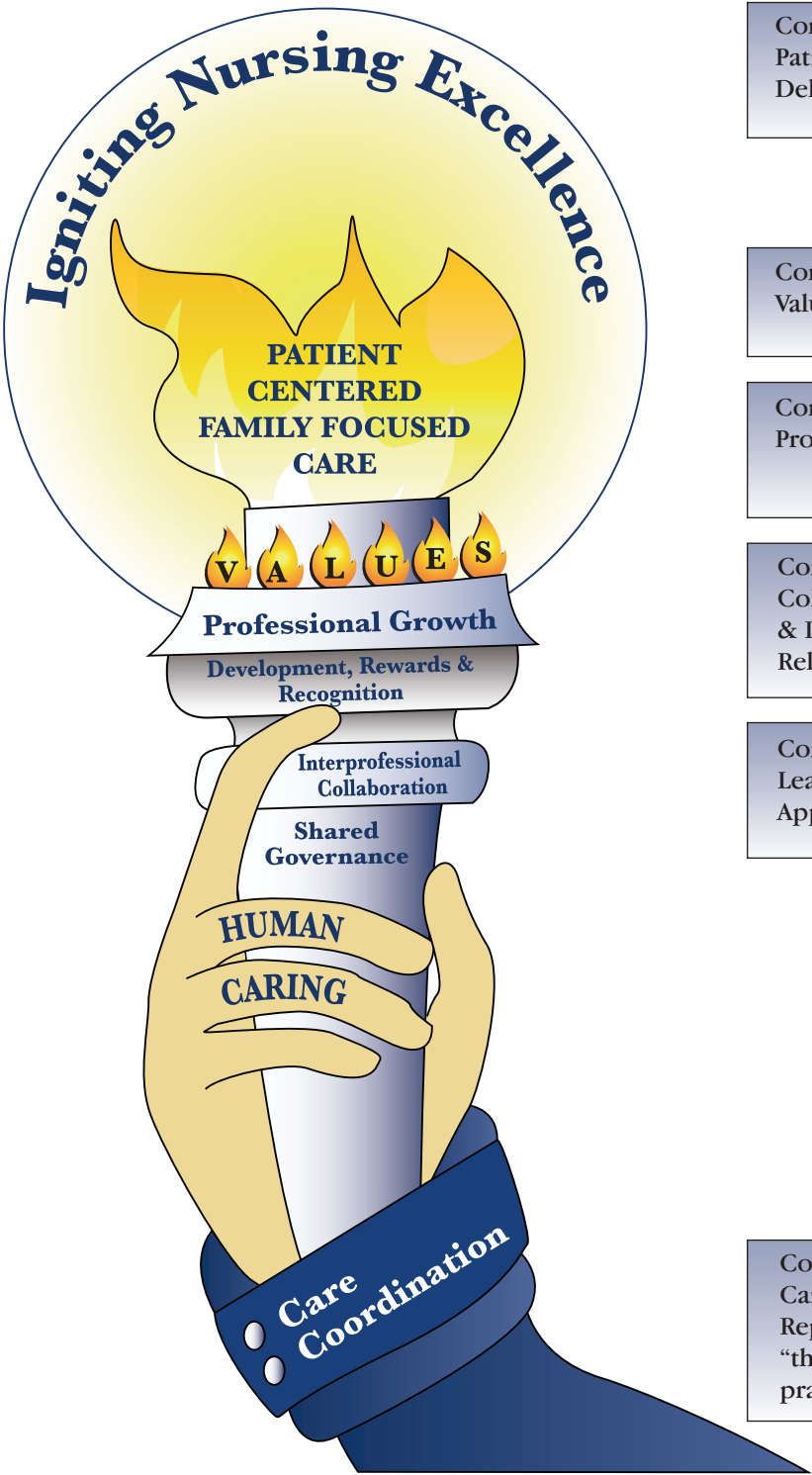
The Evolving Professional Practice Model:

Halo with “The Spirit of Nursing Excellence” represents recognition of the impact of the PPM on nursing practice

Flames signify our core values and our patient delivery system “lighting the way” for nursing excellence

Torch signified our relationship to the Statue of Liberty and the cultural diversity of the JC population

Nursing Theorist-Jean Watson Theory of Human Caring depicted by “caring hands of the nurse”



Core Component #4  
Patient Care  
Delivery System

Core Component #1  
Values

Core Component #2  
Professional Growth

Core Component #3  
Collaboration  
& Interdisciplinary  
Relationships

Core Component #5  
Leadership Governance  
Approach

Core Component #6  
Care Delivery Model.  
Represented at wrist as  
“the pulse of nursing  
practice”



Care Coordination:

Care Coordination has taken a pivotal role in the delivery of care at Jersey City Medical Center as the Organization is committed to supporting population health within the community. Facilitating safe transitions of care is the focus of the Nursing Strategic Plan and the implementation involves a multidisciplinary approach. The nurse-led Call Center, Continuum of Care, completed its second year of service in 2015 and in 2016 is poised to expand.

The Continuum of Care Center supports patients' transition of care to their home setting through application of an evidence-based program of four-stages of telephonic support along with use of the TeachBack education process that was initiated during the hospital stay. The TeachBack educational framework is used in the inpatient setting as well by nursing (Peter, Robinson, Jordan, Lawrence, Casey, Salas-Lopez, 2015). The Care Continuum nurses conduct bedside visits prior to discharge to inform patients of the program. Many patients and their families have been assisted through targeted education on disease management, assistance with obtaining follow-up provider appointments, transportation to appointments, and filling prescriptions.

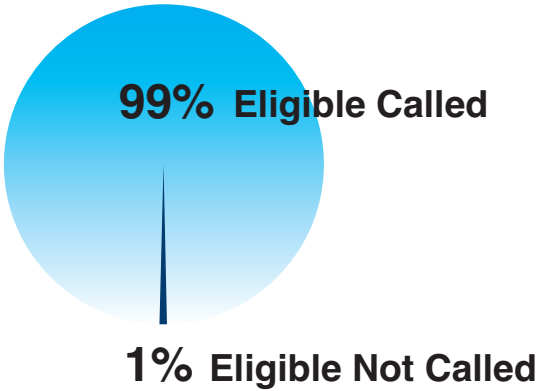
The Vision of the Care Continuum program is to empower patients and their families to become our partners in managing their health along the continuum of care while promoting healthy lifestyle changes.

The goal of the Care Continuum program is to provide support patients and families by care coordination, improving patient outcomes and reducing 30-day readmissions.

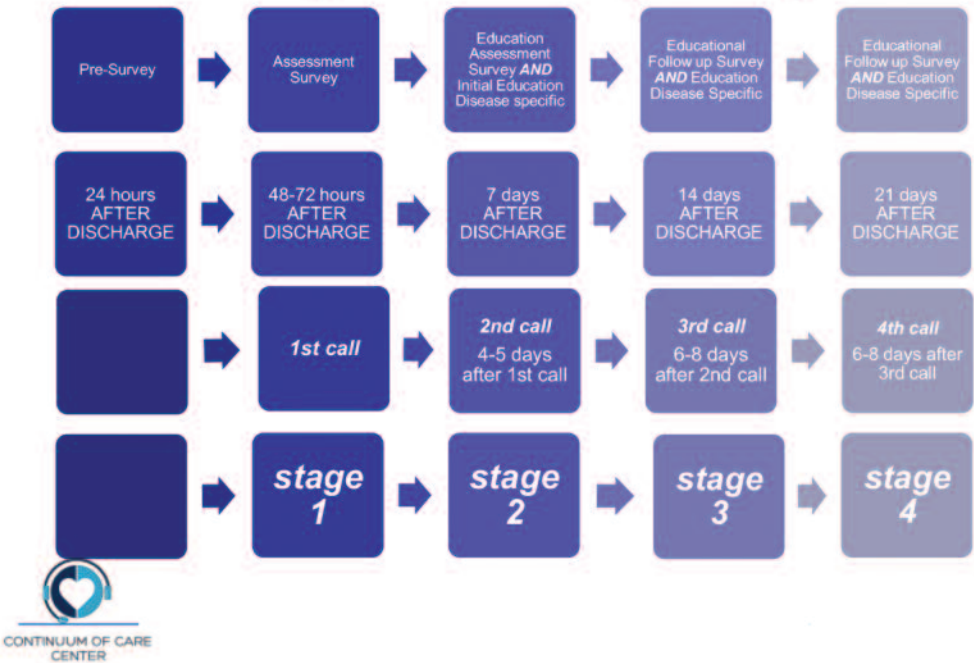
The evidence-based model is below:

In 2015, the Care Continuum program reached out to more patients with calls increasing by 25% from a total of 2,816 calls in 2014 to 3,521 calls in 2015. There were nearly 1,000 patients reached by the Care Continuum in 2015. Over 380 patients received assistance with making follow-up physician appointments and over 80 patients received help with their managing their medications.

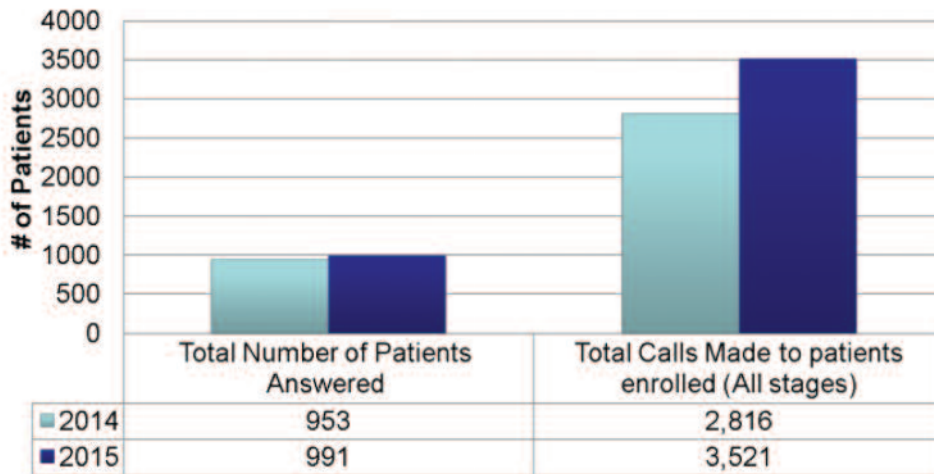
Patient Eligibility  
Percent of Eligible Patients Called



30 Day Follow Up Program



## INCREASE PATIENT CONTACTED & TOTAL CALLS



**Connect  
Patients and  
Caregiver to  
necessary  
resources**

386 Physician  
Appointments  
made

83 Patients  
Assisted with  
Medications

Assistance  
provided to 66  
Caregivers  
(Inbound  
Caregiver Act  
Calls)

12 Patients  
provided with  
complex  
services  
(transportation,  
homeless, meals  
on wheels, etc.)



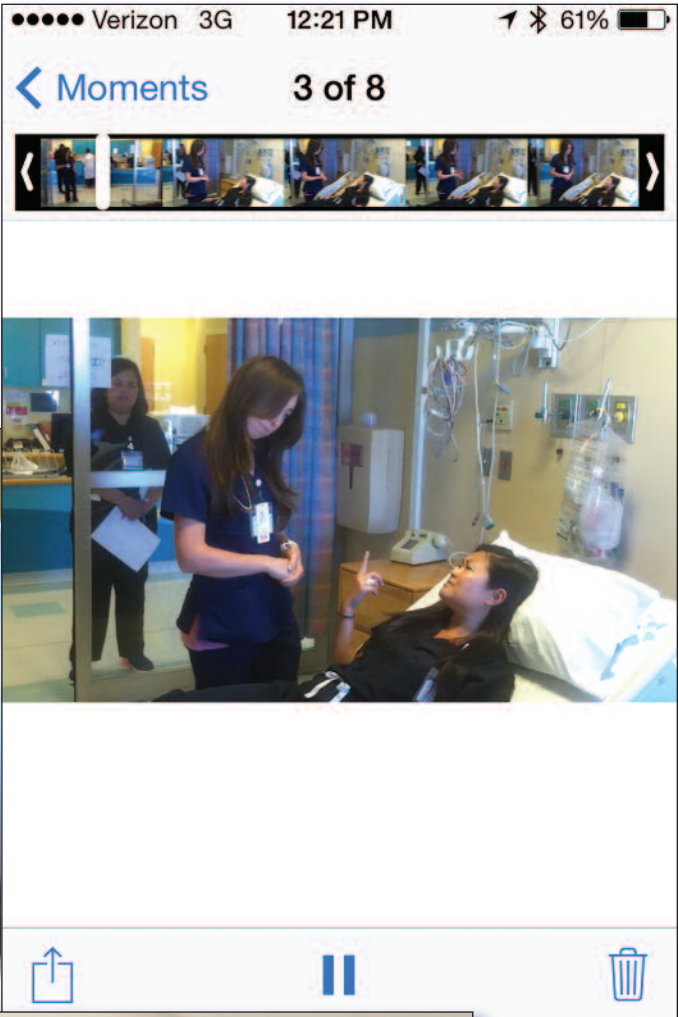
CONTINUUM OF CARE  
CENTER

# Simulation Lab for Improving the Patient Experience:

Nursing leadership and nursing staff throughout the Organization focused on improving the patient experience and did so with some fun, innovation, and use of evidence-based practice. In 2015, the focus on the patient experience was sharpened by the provision of education on the power of empathy and knowing how empathy differs from sympathy. The Associate Vice President of Nursing Operations, Margaret Ames, MPA, RN, NEA-BC led this effort in collaboration with The Barnabas Health System and with the assistance from the Satisfaction and Engagement Council. The Empathy training was provided to over 2,000 of Jersey City Medical Center staff.

Nursing continued its work on improving the patient experience with the introduction of the “sim labs”. Training began at Jersey City Medical Center by Press Ganey in May 2015. The sim labs then rolled-out to the Patient Care Coordinators (PCCs) and the Satisfaction and Engagement Council members. Unit nursing

leadership and nursing educators collaborated to implement the sim labs. Nursing staff, registered nurses and patient care technicians, responded to spontaneous “patient” interactions during video-taped hourly rounding sessions. The participants were able to immediately view their video-taped sessions for self-analysis and also received peer feedback on the simulated hourly rounding bedside visit. The video-tape then was promptly deleted. In 2015, a total of 178 nurses and patient care technicians participated from Units such as 7 West, 7 East, and 6 East.





## Introduction of a new care model in Behavioral Health:



5 West Behavioral Health Staff

In 2015, the behavioral health department transitioned from the use of Patient Care Technicians (PCT's) to Mental Health Workers (MHW's). The MHW's brought a new skill set to the unit that enhanced our patient care. The inpatient MHWs provide care to the patients and maintain a safe environment under the direct supervision of the Registered Nurse. Training was developed after detailed review with the Director of Nursing, Selina Bray, MSN(c), BSN, RNC and the Nurse Educator of the Behavioral Health Unit which prepared them for their role. Their responsibilities include but are not limited to: group and individual patient supervision, organizing and facilitating group programs, providing patient support, assisting with ADL's (i.e., feeding, bathing, toileting, ambulating, etc.) & taking and recording vital signs. MHWs hold a Baccalaureate degree in psychology, social work or a health related field. The transition from PCT to MHW helped increase our engagement scores by 5% overall. They have been a great asset to the unit and many are taking on unit based pillar ladder projects to help further enhance our overall programming on the unit.







## Hospital to Home

In keeping pace with the intentions of the Affordable Care Act to reduce hospital readmissions and to support the goal of improving population health; Nursing took the lead to implement the High Risk for Readmission Assessment tool; LACE. The LACE tool, an evidence-based assessment, will identify patients' risk for readmission when presenting with signs or symptoms of six diagnoses: Congestive Heart Failure, Acute Myocardial Infarction, Chronic Pulmonary Obstructive Disease, Coronary Artery Bypass Surgery, Pneumonia, or Diabetes. The tool then enables the multidisciplinary team to proactively work with patients and their caregivers from the day of arrival (Wang, et al., 2014). The high risk for readmission assessment and linked electronic referrals to interdisciplinary colleagues went live in September 2015.

- Length of Stay – Anticipated
- Acuity of Admission/observation
- Co Morbidities
- ED Visits with any of the noted diagnoses

The LACE tool implemented included a medication screening tool to help identify patients who will receive a bedside visit from the pharmacists via an automatic trigger embedded within the tool. Outcomes of the assessment triggers needed referrals to Case Management, Social Work, Remedy Partners, Wealth from Health, the Diabetic Nurse Educator, and to the Continuum of Care Call center in order to provide assistance to patients to safely transition to home.

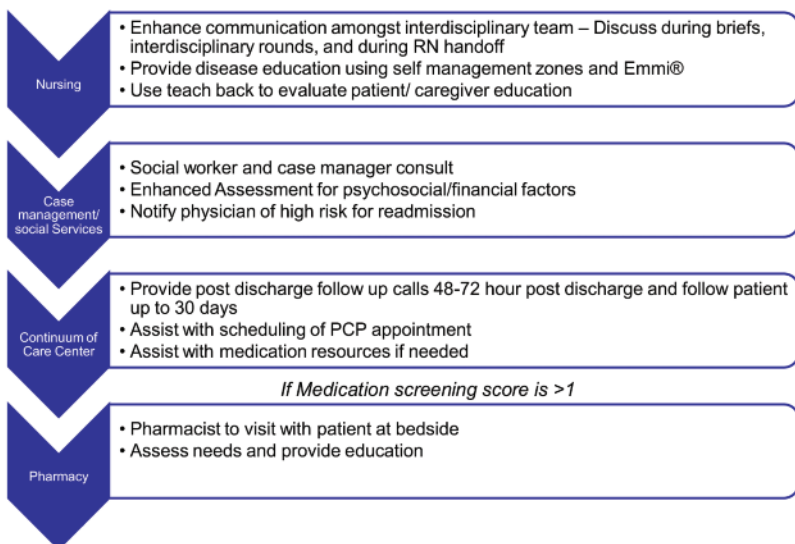
In 2015, an average of 80 patients received bedside visits and education from the pharmacists based upon the High Risk for Readmission Assessment.

### What is done with the score?

- The Modified LACE score of 11 or greater with symptoms of at least one of the 6 diagnosis:
  - Triggers a “high risk for readmission Interdisciplinary Plan of Care (IPOC)
    - Referral for Case Management
    - Referral for Social Worker
    - Referral for Continuum of Care Call Center
    - Notification to physicians
- Medication screening Score >1
  - Triggers a pharmacy consult

Score will be available to all providers in Clinical Summary!

### Lace Score $\geq 11$



## Supporting Nursing Students' transition into the Profession: Nurse Residency

### Rutgers University HRSA Grant Curriculum Topics at Jersey City Medical Center

Education for New Nurses  
DSRIP Population Health  
Quality Indicators  
Standards/Regulatory  
Outpatient Department  
APN Experience (Acute)  
Discharge/Case Management  
Nursing Leadership  
Patient Safety Initiatives  
Clinical Documentation

Jersey City Medical Center continued to support seamless academic progression from the Associates to Baccalaureate degree nursing practice through our partnership with New Jersey City University on the HRSA grand-funded RN-BSN Nurse Residency Program. New Jersey City University (NJCU), Passaic County Community College, Essex County Community College (ECCC), and Jersey City Medical Center partnered to create an innovative one-year RN to BSN program with a concurrent 900-hour residency component. The enhanced one-year program, supported by a \$897,000 HRSA grant allows students to put theory into practice by teaming them with a preceptor nurse at Jersey City Medical Center for an intensive, hands-on clinical experience. The goal of the program is to address the projected nursing shortage anticipated in 2020, and to focus on RN candidates representing ethnic minority groups at each of the community college partners. An initial cohort of 7 students completed their residency experience in August 2015, and successfully graduated (photo included) with the Bachelor of Science in Nursing degree. Each graduate cited her residency experience at Jersey City Medical Center as a major factor in her success. A second cohort of 7 students was accepted in November of 2015, and will begin the clinical residency in January of 2016. To fulfill the grant's requirement of 900 hours the nurse residents will be on-site at JCMC at least 24 hours per week. Consistent support and mentorship is provided by the JCMC Nurse Residency Program Coordinator, Ebony Samuel MSN-ED, RN-BC, JCMC Nursing Staff and the New Jersey City University Program Coordinator-Dr. Joyce Wright.



Furthering the theme of nurse mentorship, JCMC partnered with Rutgers University for the inaugural BSN-DNP residency program. Four doctoral students were accepted into the 12-week organizational immersion experience at JCMC. Upon completion, they continued their learning through direct APRN preceptorship at the Center for Comprehensive Care clinic. The ultimate objective is to prepare these candidates to become practitioners and leaders in primary care, which aligns with the Institute of Medicine's Future of Nursing report recommendations.





**Maternal Child Health:  
Labor and Delivery, Maternity and  
Neonatal Intensive Care:**

The nurses and physicians are successfully implementing the Baby Friendly Hospital Initiative of Baby Friendly, USA, Inc part of the World Health Organization (WHO) and the United Nations Children’s Fund (UNICEF) to support increased breastfeeding by maternity and neonatal patients. The Baby Friendly Hospital Initiative serves to help staff, patients and their families fully appreciate human milk fed to newborn’s through the mother is the normal way for infants to be nourished. Breast milk feedings supports lower risks for certain diseases and improved health outcomes for both mothers and babies.

In 2015, 100% of MCH nurses including those newly hired completed the required didactic education and 98% completed the clinical education component. Additionally, 100% of our neonatologists and close to 90% of our obstetricians completed the education.

A Community Lactation room opened on first floor, painted, furnished, and supplied with pumps, wipes, a television tuned to the baby channel and door signage in order to provide a quiet, private and soothing room for mothers who are visitors to the Medical Center to breast feed. A NICU family focused breast feeding support group through a nursing differentiated practice program project was implemented in March 2015.

A Baby Friendly 10 Steps Journey hospital-wide Baby Friendly Fair was held in cafeteria to bring awareness of the journey with a raffle of three \$50 gift cards for completing all ‘ten steps of the journey. There were two internal winners and one community member winner!

The nursing staff implemented Baby Friendly focused admission packets in MCH with all relevant information detailing resources, support for breastfeeding and rooming-in information.

2015 MCH Breastfeeding results:

|  |            |
|--|------------|
| Prenatal Breastfeeding class attendance                            | 27 couples |
| Postpartum breastfeeding class attendance                          | 220        |
| Combination Feedings:  | 86%        |
| Initiation of breastfeeding:                                       | 92%        |
| Skin to Skin (MCH)   | 89%        |
| Exclusive human milk consumption<br>(1st 7 feeding days NICU)      | 84%        |
| Last 3 months of 2015 exclusive<br>human milk (1st 7 feeding days) | >90%       |

## Sim Wars 2015:

The JCMC team “Lady Liberty” became the 2015 the Northeastern Interprofessional SimWARS Team Competition beating the Newark Beth Israel (NBI) reigning champions and three other teams from within Barnabas Health in November 2015. This double-elimination competition challenges clinical interdisciplinary healthcare teams to compete against each other in simulated patient scenarios.

The simulation itself is designed as an interdisciplinary training program for obstetrical providers, where participants review teamwork and communication principles associated with TeamSTEPPS, demonstrate specific skills for managing obstetrical emergencies and discuss the complications, risk factors, and appropriate documentation associated with obstetrical emergencies.



Lady Liberty was lead by Drs Elisheva Cohn and Hannah Bailey with nurses Barbara Taraski RN, Lucy Moreira RN, and Carolina Moreira RN. This course was especially designed to foster interdisciplinary teamwork and communication. Judged by a panel of experts “Lady Liberty” used exemplary teamwork to clinch first place in a variety of scenarios.

The champions were determined through a combination of audience responses and the judges scoring.

## Advanced Practice Nurses:

As collaborating healthcare team members in support of Jersey City Medical Center’s mission of enhancing life through better health, the Department of Medicine Advanced Practice Nurses (APNs) play a pivotal role in the health care delivery service. The Department of Medicine APN staff includes: Lea DelaCruz, MSN, ACNP-BC, Franca Di Brita, MSN, FNP-BC, Sherene Dunkley, MSN, ACNP-BC, Pamela Farley, MSN, ACNP-BC, Chief Nurse Practitioner; Natasha Lawrence, DNP, ACNP-BC, Rachel Makowski, MSN, ACNP-BC, Marina Monperre, MSN, AGNP, Lisa Petropoulos, MSN, APN-C, Tracy Small, MSN, FNP-BC, Mona Williams-Gregory, DNP, ACNP-BC, and Devon Young, MSN, AGNP. Their collaborating physician is Dr. Douglas Ratner, Chairman of Medicine and Medical Director ACO. The Department of Medicine nurse practitioners see inpatients for the Avery Service physicians. Daily NP responsibilities include, but are not limited to, taking a detailed patient history, performing physical exams and discussing preventative health measures with the Avery service inpatients. APNs order, interpret, and evaluate diagnostic tests to identify and assess a patient’s clinical illnesses and health care needs. In addition, they prioritize and record physical findings, and formulate plans and prognoses, based upon patients’ conditions. The APNs prescribe and recommend medical or other forms of treatment such as physical therapy, respiratory therapy, or related therapeutic procedures and assist with discharge planning.

Research supports preventative care, care coordination for chronic diseases, and continuity of care lead to cost containment and better patient outcomes. Nurse practitioners work closely with attending and consultative physicians nursing staff, case managers, social workers and the remaining members of the collaborative team to achieve reduced length of stay, improved patient experience and to prevent readmissions. In 2015, the nurse practitioners implemented a geographic care delivery model. A designated nurse practitioner was assigned to each of the following units: 6 East, 6 West, 7 East, and 7 West. The geographic model has shown improved quality of care and decreased length of stay due to the increased continuity of care and the increased availability of the APN with patients and their families and with increased presence and collaboration with the nursing staff. The Department of Medicine APNs also embraced the use of the electronic documentation system’s on-line order entry and will be instrumental in further transitioning to the on-line charting and ePrescribing in 2016.





## Nursing Case Managers:

Clinical case managers continue to focus on reducing length of stay and avoiding clinical denials the placement of patients in the “right level of care” from the Emergency Department and improving transitions of care to the community. Improvement of patient flow and the reduction of readmission rates via improved patient/family engagement and “shared decision making” has been the goal.

In 2015 100% of our case managers passed the system- wide Interqual Guidelines exam to utilize nationally recognized criteria to recommend and guide patients to the “right level” of care including transition to the community. Good patient flow throughout the patient's stay results in the best care possible at the right cost. A pre-access nurse reviews patients admitted through other points of entry, i.e. cardiac cath lab, surgery, the observation unit and has assisted in maintaining a reduced Observation LOS during the past 2 yrs.

We continued our efforts outside the hospital walls to engage multiple community agencies/homecare and post acute care facilities. These partnerships have been significant in helping to reduce readmission rates from skilled nursing facilities. Sharing “the right information at the right time” and collaborating on benchmark readmission tools re: early warning signs, SBAR communication, and palliative care have been instrumental in our mutual success. Bi-monthly meetings with our partners are held to share root cause analysis, research based best practices and an avenue to brainstorm about process and care improvement.

As we move forward the role of the case manager in helping patients safely transition and maintain optimum functioning in the community will be more crucial than ever before . Our relationships with the Wealth from Health program, the Continuum of Care Call Center and Remedy Partners/Bundled Care Project have evolved as we spread our efforts toward new diagnostic populations and begin to pick our “preferred providers” with the best outcomes. As a result of the coordinated care, HCAHPS Care Transitions scores have increased by 10% in 2015!

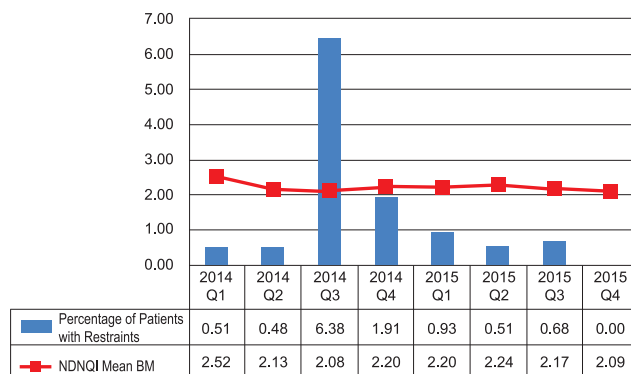
## Decreasing Patient Restraint Utilization:

Improving nursing practice related to using restraints in the adult medical surgical and behavioral health population continued in 2015. The focus of the work on restraint usage was to ensure that hospital standards were consistent with current Federal and State regulations. As a result of a review of the latest regulations and evidence-based practice, restraint policies and the electronic medical record documentation were updated. In order to review and reinforce the new standard updates, a revised restraint audit tool was developed. The restraint audit tool is completed for each restraint episode by nursing staff. The audit tool assists in monitoring compliance with the established restraint standards. In addition to the completion of the restraint audit tool, validation restraint usage rounds are also performed which provides an opportunity to reinforce standards and answer questions staff may have regarding the updated policies and practices.

Restraint prevalence has also been monitored through the NDNQI Restraint Prevalence Study, in which Jersey City Medical Center has participated for several years. Participation in the NDNQI Restraint Prevalence Study allows the monitoring and restraint usage comparison on a national level. Barbara Pangilinan, RN Manager, Behavioral Health conducts the

Restraints Prevalence Study on a designated day, each quarter on the Medical-Surgical, Telemetry-Pulmonary, Behavioral Health, and the Critical Care Units. The graph titled, “Hospital –Wide Patients with Physical Restraints,” demonstrates restraint usage below the NDNQI national benchmark mean for five consecutive quarters.

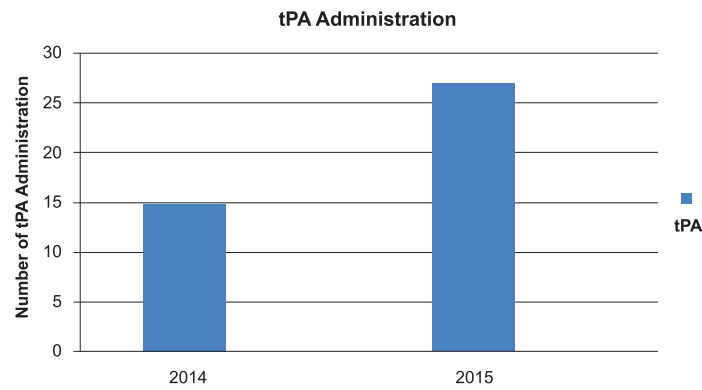
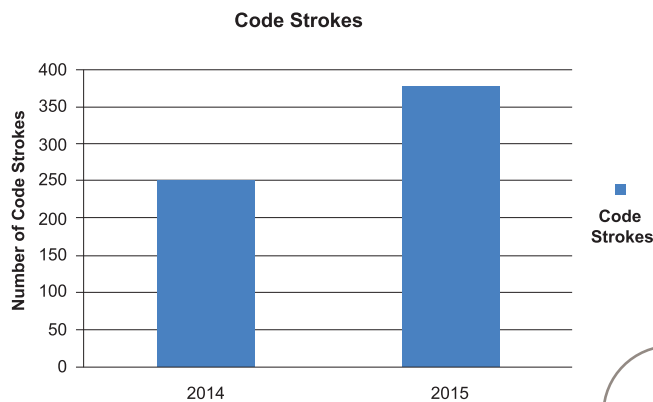
**Hospital-Wide Patients with Physical Restraints (Limb and/or Vest)**



# The Stroke Program:

Lead by Theresa LaFlam, BSN, RN,NVRN-BC and Dan Murray, NVRN-BC, Jersey City Medical Center provided care to 379 patients with stroke or stroke symptoms. Education was provided in August 2015 to all residents and care of stroke patients along with Core Measures are taught in nursing orientation as well as provided to Medical Surgical, Critical Care and Emergency Department nurses on an annual basis.

Additionally, stroke education was provided to close to 450 community members for stroke recognition and stoke prevention. The effects of continued education and support resulted in increased number of Code Strokes which brings targeted care to the patient's bedside immediately and increased instances of tPA administration within an improved time frame, decreasing door-to-needle time by 33 minutes.



## Innovative Practice:

In 2015 Nurses' innovative practice changes and/or projects were recognized as part of an hospital-wide program called The Innovation Tank, A Breath of Fresh Thinking, under the leadership of Brenda Hall, CPHQ, CPPS, HACF, Senior Vice President of Safety, Quality, and Regulatory Affairs. A sample of the innovative ideas are noted here.



**AWESOME idea!!**

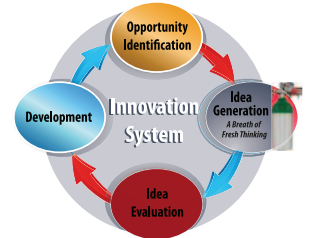


“The neonatal unit can be a very noisy and stressful place for babies and their families. The goal of my project is to evaluate the impact on existing noise levels and their sources within a neonatal intensive care unit at JCMC. The evidence shows that babies experiencing good quality sleep are more stable, grow quickly and efficiently, and have a shorter recovery period\*.”

Nana C. Figueroa, RN  
NICU Staff RN/NDPP Level II  
Department: Nursing

## The Innovation Tank A Breath of Fresh Thinking...

Supporting Innovation at Jersey City Medical Center



**AWESOME idea!!**



“I didn’t sense that the classic approach to group education was having a real impact, so I started using Conversation Map education tools. These use visual learning techniques to spark active dialogue between patients and educators. Patients feel heard, supported, and empowered to become willing partners in their own care.”

Nancy Rogriguez, BS, RN, CDE  
Certified Diabetes Educator  
Department: Nursing Education

AWESOME idea!!

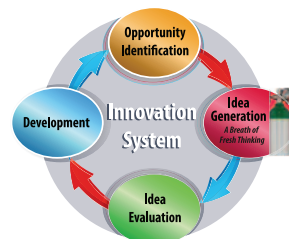


**Project Objective:** Arranging and supporting certification review activities for RNs on 6 East "It is crucial for nurses to master their skills in order to enhance patient care and family satisfaction. This in turn will help the hospital distinguish itself from competitors, hence the drive to increase the number of PCCN certified nurses.

Ogechi Okaro, RN  
Registered Nurse/NDPP Level I  
Department: 6 East Telemetry

## The Innovation Tank A Breath of Fresh Thinking...

Supporting Innovation at Jersey City Medical Center



AWESOME idea!!



"I created a model of blood vessels out of cardboard tubes to help explain what arteries look like, and their impact on strokes. I used this tool during a community health fair titled, "How does a stroke occur?"

Dan Murray, RN, NVRN-BC  
Stroke Program Coordinator  
Department: Nursing Practice



## Innovative Practice: (cont)

**AWESOME idea!!**



“Together we can break the silence and bring a voice to intimate partner violence” We are combating Intimate Partner Violence (IPV) by raising community awareness, improving healthcare provider assessment, and promoting referrals to acute and community resources.

Annette Morales, BSN, RN, CEN

Nurse Educator - Emergency/ NDPP Leader Level II &

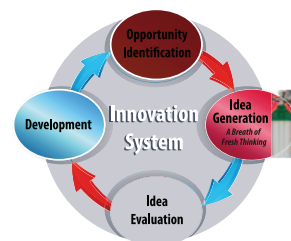
Michelle Morales, MSN, RN - BC

Nurse Educator - Educator - Maternal Child Health/ NDPP Leader Level II

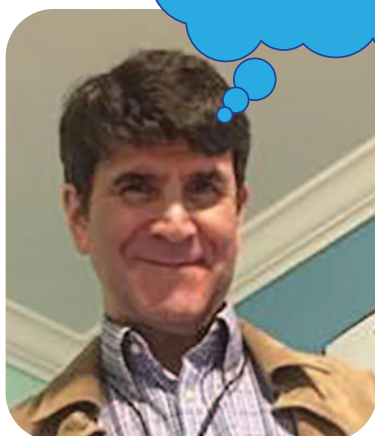
Department: Nursing Education

## The Innovation Tank A Breath of Fresh Thinking...

Supporting Innovation at Jersey City Medical Center



**AWESOME idea!!**



Project Objective: Creation and editing of a quarterly nursing publication called The Kaleidoscope. "I would like to see Kaleidoscope publish stories that highlight nursing innovation and achievement.

David Forshtay, RN

Registered Nurse/NDPP Level II

Department: 5W Behavioral Health

**References:**

American Nurses Credentialing Center (ANCC). (2014). Magnet Model components and sources of evidence: exemplary professional practice. ISBN 978-1492358800

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Peter, D., Robinson, P., Jordan, M., Lawrence, S., Casey, K., & Salas-Lopez. (2015). Reducing readmissions using teach-back. *Journal of Nursing Administration*, 45(1), 35-42. doi: 10.1097/NNA.0000000000000155.

Wang, H., Robinson, R.D., Johnson, C., Zenarosa, N.R., Jayswal, R.D., Keithley, J., & Delaney, K.A. (2014, August). Using LACE index to predict hospital readmissions in congestive heart failure patients. *BMC Cardiovascular Disorders* (7), 14-97 [http://doi: 10.1186/1471-2261-14-97](http://doi:10.1186/1471-2261-14-97)

## Empirical Outcomes:

The vital contributions nurses and their multidisciplinary colleagues make to improving patient outcomes and to improving organizational effectiveness are seen as empirical outcomes within the Magnet® Program model. Several sources of empirical outcomes are noted within the next pages.

Zero harm, zero tolerance, and perfect care are terms reflective of current healthcare; however, these expectations are not new. Nightingale (1860) in her book, *Notes on Nursing*, wrote that a primary responsibility of every nurse, particularly surgical nurses, is prevention “prevention of fever, hospital gangrene, and purulent discharge from any source” (p. 127). The following sections highlight the work by nursing and clinical colleagues to improve patient outcomes.

### Reducing Patient Falls:

Patient falls with or without injury occurring in the acute-care hospital setting is one of the more prevalent adverse events for adult patients (Hill et. al., 2010). Nursing practice aimed at reducing patient falls encompasses assessing patients’ risks for falls upon admission and throughout the hospital stay, and implementing measures to prevent falls (Quigley & White, 2013).

The Interdisciplinary Falls Committee consisting of membership from all patient care areas of registered nurses, patient care technicians, and physical therapists led by Reyna Mateo, RN and Claudia Garzon-Rivera, MSN, RN, CCRN, CNL and nursing leadership from all Units, made several evidence-based practice changes that lead to decreasing the number of falls in some areas. In 2015, there were twelve fewer falls in all Medical Surgical Units combined. Challenges continue to

exist in some areas however, the work began in 2015 will support further improvements in 2016. The goal continues to be to reduce falls to below the national benchmark as measured by the National Database for Nursing Quality Indicators (NDNQI) and to eliminate patient falls.

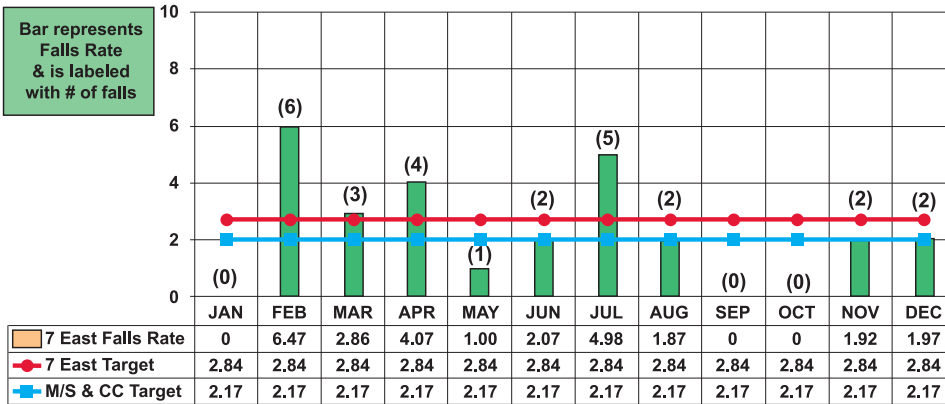
The 7 East Medical Surgical Unit, led by Irene Ondieki MSN, RN-BC and Robert Akal, BSN, RN-BC is acknowledged for having 11 less falls in 2015 from the previous year. The Emergency Department, under the leadership of Michele M. Lopez, MSN, RN, CEN, NE-BC achieved an 18% decrease in the number of patient falls from 2014 due to all staff focusing on making the environment safer for patients.



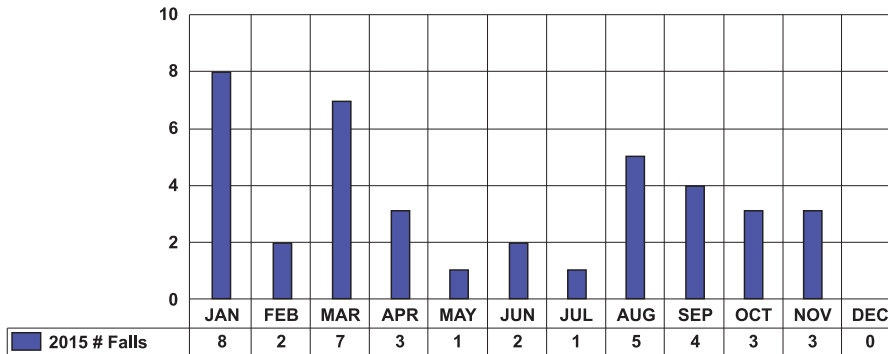
*The Interdisciplinary Falls Committee*

## Reducing Patient Falls: (cont)

**FALLS 2015 7 EAST**



**FALLS 2015 EMERGENCY DEPARTMENT**





The evidence-based practices implemented along with education of all staff are:

Fall alarms are designed to help nurses monitor patients at fall risk. While alarms are not a guarantee against falls, the appropriate use of alarms in combination with multidisciplinary strategies make up a large piece of the “fall prevention” puzzle.

- Proactive daily rounding throughout the Medical Surgical, Critical Care and Behavioral Health units was initiated with Reyna Mateo, nursing staff and nursing leadership.
- Developed Fall intervention selections based on Fall Risk scale in Soarian Clinical, the electronic documentation tool.
- Developed a Soarian Fall Assessment/Intervention Report for fall validation audits
- Community Outreach education was provided by Reyna Mateo on September 29, 2015, on fall prevention at a senior citizen center in Jersey City along with Wealth from Health personnel. On June 10th 2015, fall prevention education was provided at the Easter Seals of NJ in Bethune Community Center in Jersey City. Total community attendance was 220 members!
- Developed and Presented Humpty Dumpty Pediatric Fall Assessment Scale Poster at the Research & Excellence Fun Fair - May 8th.



The John Hopkin's Fall Risk Assessment Tool is utilized with adult patients upon admission and throughout the hospital stay.

- The Bed/Chair Posey Alarm was implemented Medical Surgical, Critical Care, Telemetry/Pulmonary and on the 5 East Unit following successful product trial and evaluation by the nursing staff.
- The Emergency Department successfully evaluated and implemented the Stretcher Posey Alarm and use of the yellow blanket based upon evidence-based criteria.

### **INDICATIONS FOR POSEY STRETCHER ALARMS AND YELLOW BLANKETS IN THE ED**

The use of fall alarms should be based on specific patient criteria and/or risk factors.

Patients who score as a Moderate Fall Risk or High Fall Risk qualify for the visual cue of a yellow arm band and a yellow blanket.

#### **Criteria and Fall Risk Factors:**

- Confusion or Disorientation (e.g. forgets to use call bell or ask for assistance, can't remember or follow instructions).
- History of frequent falls or s/p fall
- Intoxicated or Sedated (e.g. substance abuse)
- Seizures (chief complaint or new onset)
- Impaired mobility/Unsteady gait demonstrates unsafe bed, chair, wheelchair or toilet transfers; use of assistive devices

## Nursing's role in reducing hospital acquired infections:

It is estimated that 1.7 million hospital acquired infections (HAIs) occur every year in acute care hospitals; infections such as catheter associated urinary tract infections (CAUTI) and central line associated blood stream infections (CLABSI). Urinary tract infections are viewed as the most commonly occurring HAI (Bernard, Hunter, & Moore, 2012). Urinary tract infections are associated with the use and care of indwelling urinary catheters. The incidence of a catheter associated urinary tract infection (CAUTI) impacts the overall health and morbidity of patients and is a focus for performance improvement efforts.

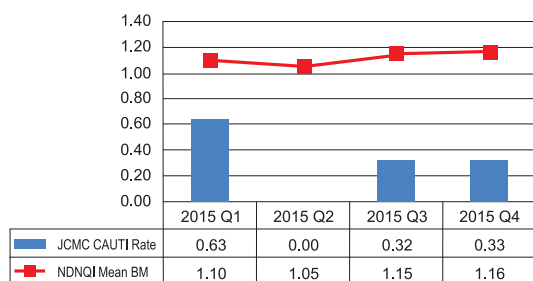
The work to reduce HAIs is a collaborative effort led by Nursing's Infection Prevention Practitioners, Vickie DeChirico, MSN, RN, CIC and Maryann Plaskon, RN, BSN, CIC along with the nursing leadership and nursing staff.

The CAUTI Reduction Steering Committee implemented several evidenced based practice changes to support nurses in reducing catheter associated urinary tract infections. The nursing policy was updated in June and includes a nurse driven protocol for removal of indwelling Foley catheters and use of the bladder scanner to determine patients' ability to void following catheter removal. Clinical electronic documentation was also expanded to capture more relevant data. The committee also implemented updated products that included use of a smaller catheter size. Simulation training for nurses was also implemented to support skill validations.

In 2015, the Medical Center continued to be below the National Database of Nursing Quality Indicators (NDNQI) benchmark mean. The catheter associated urinary tract infections rate is calculated by the number of urinary tract infections in patients with indwelling urinary catheters divided by the number of indwelling catheter days x 1000. Throughout 2015, Jersey City Medical Center's CAUTI rate remained below the national benchmark of Teaching Hospitals in the National Databank of Nurse Quality Indicators (NDNQI); the databank that Jersey City Medical Center contributes to.

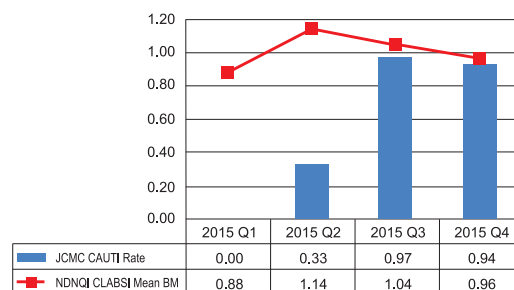
The efforts to eliminate hospital-wide central line associated blood stream infections (CLASBI) were reinforced under the leadership of Vickie DeChirico, MSN, RN, CIC and Maryann Plaskon, RN, BSN, CIC. Core reviews of any events were reviewed in order to identify opportunities to improving our care processes. The swabcap and biopatch use along with interdisciplinary collaboration on implementation of the CLASBI bundle of care measures remained a focus throughout the year which contributed to the CLASBI occurrence rate remaining under the national benchmark.

**Hospital-Wide Catheter Associated Urinary Tract Infections**



*The central line associated blood stream infections*

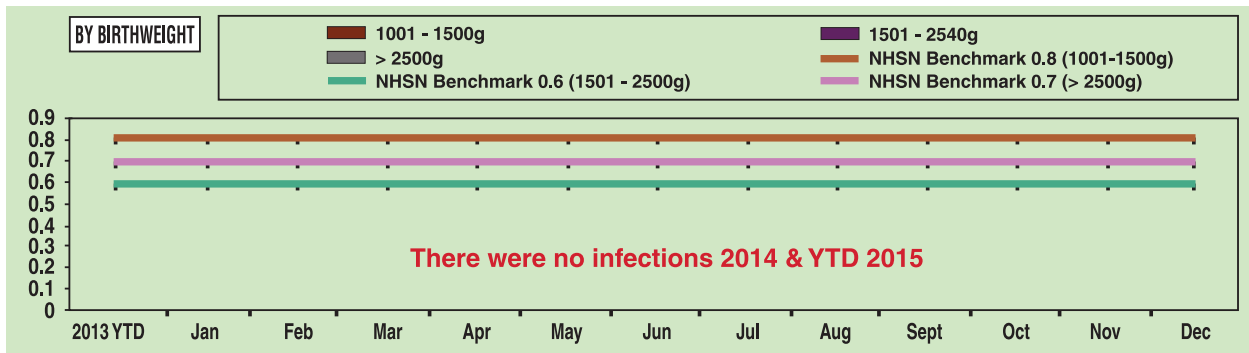
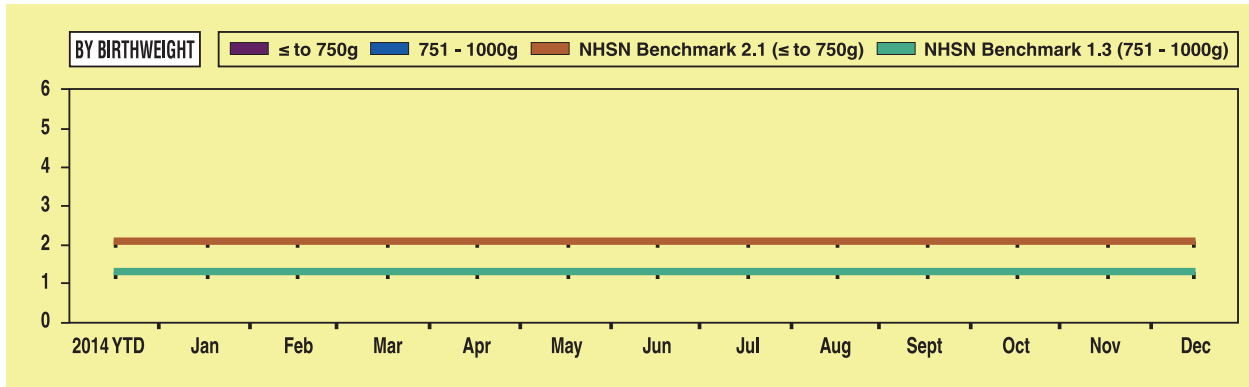
**Hospital-Wide Central Line Associated Blood Stream Infections**



*The 6 West Surgical/Orthopedic Unit is recognized for having zero CAUTIs in 2015!*

The Neonatal Intensive Care Unit is applauded for having two years without a central line associated blood stream infection in each birthweight category from 1,001 grams to > 2,500 grams!

## NICU CLABSI (by Birthweight) 2014 vs 2015



**References:**

Bernard, M.S., Hunter, K.F., & Moore, K.N. (2012). A review of strategies to decrease the duration of indwelling urethral catheters and potentially reduce the incidence of catheter-associated urinary tract infections. *Urologic Nursing*, 32(1), 29-37.

Hill, A., Hoffmann, T., Hill, K., Oliver, D., Beer, C., McPhail, St., Brauer, S., & Haines, T.P. (2010). Measuring falls events in acute hospitals: A comparison of three reporting methods to identify missing data in the hospital reporting system. *Journal of the American Geriatric Society*, 58(7), 1347-1352. doi: 10.1111/j.1532-5415.2020.02856.x

Nightingale, F. (1860). *Notes on nursing*. New York, NY: Cosmo Classics.

Quigley, P.A. & White, S.V. (2013). Hospital-based fall program: Measurement and improvement in high reliability organizations. *The Online Journal of Issues in Nursing*, 18(2). doi: 10.3912/OJIN.Vol18NO02MAN05



## New Knowledge, Innovation, and Improvements: 2015 Nursing Research Studies/EBP Projects

**Project:**

Impact of Nursing Unit Workarounds on Patient Quality of Care

**Investigator:**

May Kho, BSN, RN

**Significance:**

This was multisite national NDNQI study exploring work around on hospital nursing units and the link between nursing related clinical outcomes such as pressure ulcers, infections and falls at the unit level. The study also evaluated the impact of workarounds on nurse satisfaction.

**Project:**

NECC Discharge Planning Study

**Investigator:**

Theresa Laflam, MSN, RN

Erica Kane, PT

Dan Murray, BA, RN

**Purpose/Significance:**

The purpose of the study is to identify key factors that determine a patient's discharge location and to document the factors that influence the selection of post acute care. The study consists of a survey completed by a discharge planner & PT on 20 consecutive stroke patients

**Project:**

OrthoComplex Reconstructive Institute  
(OCRI) Quality and Outcomes Registry

**Investigator:**

Wilfredo Yap, MSN, RN

**Significance:**

Orthopedic specific registries are inconsistent and unstandardized. The registry is an essential component of the growth and understanding of patient outcomes following orthopedic procedures by the principal investigator, Frank Liporace, MD.

**Project:**

Multidisciplinary Interventions to Improve Inappropriate  
Withholding of Basal Insulin

**Investigator:**

Sandy Liu, Pharm D

Nancy Rodrigues, RN

**Purpose/Significance:**

Objectives of this study were to improve inappropriate withholding of basal insulin (reduce inappropriate withholding of basal insulin by 15%) and reduce fasting glucose in 6 East Telemetry Unit of Jersey City Medical Center by implementing multidisciplinary interventions

**Project:**

Barriers and Facilitators to Sustaining Quality Improvements  
in Nurse Sensitive Indicators in the Acute Care Setting

**Investigator:**

Nicole Sardinas, MSN, RN

Claudia Garzon-Rivera, MSN, RN

Mabel LaForgia, MSN, RN

**Significance:**

The overall purpose of the study is to explore the relationships among nurse participation in professional certification, clinical advancement programs (CAP), presence of work engagement and empowerment, and selected patient and nurse outcomes in Magnet and non-Magnet facilities

**Project:**

The LACE Index Tool: A Retrospective Chart Review  
of Patients Readmitted within 30 days

**Investigator:**

Selena Sackroolar, BSN, RN

**Significance:**

The purpose of this retrospective chart review is to determine which LACE index scores are most frequently seen in patients readmitted at JCMC as well as to determine if these scores correlate with current research findings. The LACE Tool was implemented for all adult patient effective October 2015.

**Project:**

Measure the impact of Emmi program viewing  
on Client patient HCAHPS scores.

**Investigator:**

Mabel LaForgia, MSN, RN

**Significance:**

The purpose of this evidence based project was Measure the impact of Emmi program viewing on Client patient HCAHPS scores. It was found that Patient who viewed Emmi were more satisfied then patients who did not view Emmi

## Dissemination of Research and Evidence Based Practice

Many of JCMC Nurses shared their research and evidence based practices during internal and external Research Conferences.  
**5th Annual Nursing Excellence and Research Fun Fair**

**Jersey City Medical Center - May 8th 2015**

**Theme:** “Year of Ethics”

- 21 Poster Presenters
- 101 Participants

**7th Annual Joint Northern NJ Evidence Based Practice Consortium Conference**

**Location:** Jersey City Medical Center - September 24th 2015

**Theme:** “Transitional Care”

**Opening Note:** “How Nurses Impact Legislation to Support Evidence Based Practice”

Dr. Rita Smith, DNP, RN, NEA-BC, CNO

**Key Note:** “Transitional Care” – Dr. Joanne Reich, DNP, RN, NEA-BC, AVP

**Podium Presenter:**

- Risk Assessment for Readmission: A Retrospective Chart Review of Adult Patients Readmitted within 30 days using the LACE Index Tool – Selena Sackroolar, BSN, RN

**Poster Presentations:**

- Promoting National Orthopedic Nurse Certification on a Pilot Unit - Maria Jemimah Bravo, BSN, RN
- Improving the Medication Reconciliation Process – developed by Quality and Safety Nursing Council – Presented by: Annette Morales, BSN, RN, CEN and Michelle Morales, MSN, RN-BC
- Empowering Nurses through Policy Development and Approval – developed by Nursing Professional Practice Council - Presented by Regina O'Donnell, BSN, RN
- Measuring Nursing Staff Satisfaction at JCMC – Developed by Nursing Satisfaction and Engagement Council Presented by Michelle Lopez, BSN, MPA, RN and Maria Adams, BSN, MPA, RN
- Introduction to Arrhythmia Interpretation - Marc Monteith, MS, RN
- Evaluation of Designated Caregiver Documentation after Implementation of NJ Care Act  
Ingrid Cardenas, BSN, RN
- 2015 HRSA Grant - JCMC and New Jersey City University Nurse Residency Program  
Ebony M. Samuel, MSN-Ed., RN-BC
- Orthopedic Complex Reconstructive Institute (OCRI) Quality and Outcomes Registry - Wilfredo Yap Jr., MSN, RN
- Improving the Nursing Clinical Peer Review Process - Mabel LaForgia, MSN, RN, CNL

**The Barnabas Health Nursing Research Council Annual Research Conference**

**Location:** Newark Beth Israel Medical Center – November 10th 2015

**Theme:** Innovations & Empowerment”

- 20 RNs Attendees from JCMC
- 1 Podium Presenter – Selena Sackroolar, BSN, RN – 6 East
- 9 Poster Presentations

| Poster Title:  | Presenter/Department-Council  |
|--|---|
| Pain Management  | Lita Aguirre, RN, and Bernadette Mananghaya - <b>6 West &amp; PACU</b>                    |
| Wealth from Health® Program: Incentives for Healthy Living                           | Jennyfer Morel-Carvajal, BSN, RN - <b>Wealth from Health</b>                              |
| Evaluation of Designated Caregiver Documentation after Implementation of NJ CARE Act | Ingrid Cardenas, BSN, RN - <b>Care Continuum</b>  |
| Introduction to Arrhythmia Interpretation  | Marc Monteith, MSN, RN - <b>Nursing Education</b>   |
| Orthopedic Complex Reconstructive Institute (OCRI) Quality and Outcomes Registry     | Zadith Pino - <b>The Orthopedic Institute</b>   |
| Promoting National Orthopedic Nurse Certification on a pilot unit                    | Maria Jemimah Bravo, BSN, RN - <b>6 West</b>  |
| Empowering Nursing Staff through policy development and approval                     | Regina O'Donnell, BSN, RN - <b>Professional Practice Nursing Council</b>                  |
| 2015 HRSA Grant- JCMC and New Jersey City University Residence Program               | Ebony Samuel, MSN, Ed., RN-BC - <b>Nursing Education</b>                                  |
| Measuring Nursing Staff Satisfaction at JCMC   | Maria Adams, RN & Michelle Lopez, RN - <b>Satisfaction and Engagement Nursing Council</b> |





## Recognition and Rewards:



### NJ COMO Appointments

In November 2015, we proudly announced Rita Smith DNP, RN, NEA-BC, SVP and Chief Nursing Officer and Mabel LaForgia, MSN, RN, CNL Director of Evidence Based Practice, Nursing Research, and the Magnet Program, were elected as President and Vice President of the New Jersey Council of Magnet Organizations, Inc (NJ COMO). The NJ COMO organization is comprised of nursing representatives of the State's Magnet designated organizations. The organization serves to champion New Jersey as a premier state for high quality patient outcomes and to support the State's Magnet organizations' commitment to professional nursing excellence through partnerships, collaboration, research, and positive empirical outcomes.



### Nursing Excellence Awards:

Jersey City Medical Center is committed to recognizing the exceptional practice and commitment of its nursing staff. Nursing staff are supported in their professional lifelong development and several opportunities of staff-driven recognition are presented.



Each year, nursing staff nominate their peers who exemplify the practice categories of Transformational Leadership, Exemplary Professional Practice, Structural Empowerment, New Knowledge, Innovations, and Improvements and Empirical Outcomes. The 15th Annual JCMC Nurse Excellence Awards was held on November 20, 2015. A total of 44 nominations were received and reviewed by Nurse Excellence Awards Committee. The Professional Practice Council reviews the nominations to select the annual

award recipients. In 2015, the first Community Colleague in Nurse Excellence Award was given to Donna Mincieli-Butto, RN, School Nurse for Saint Dominic's Academy in Jersey City. Ms. Mincieli-Butto, RN observed stroke-like symptoms in one of her 17 year old students and called 911. The student arrived at Jersey City Medical Center and received immediate stroke care. Because of Ms. Mincieli-Butto's quick response, the young patient is home to further recover from her stroke and received home schooling in preparation to attend college in 2016.

The ceremony was highlighted by Rita Smith, DNP, RN, NEA-BC, Chief Nursing Officer who opened the session with reflections on the impact of nursing on the patient experience and care transitions.

Mable LaForgia, MSN, RN, CNL, CCRN presented an overview of the impact of the Magnet designation journey and the impact of Mag-net on the daily practice of nursing at JCMC.

The keynote address was provided by Michele L. Dickerson, MSN-Ed, RNC-NIC, RN-BC, CBC who shared her compassionate and inspiring life story leading her to the profession of nursing; "Paige's Story".



# 14<sup>th</sup> ANNUAL JCMC NURSE EXCELLENCE AWARDS

*The Nominees are.....*

■ ■ Jersey City Medical Center  
■ ■ Barnabas Health

## TRANSFORMATIONAL LEADERSHIP

Maria Adams-PCC SEast  
Robert Akal-Acting Manager 7W  
Michelle Dickerson- Nurse Educator NICU  
Claudia Garzon-Rivera- Dir. Clinical Excellence  
Gina Laranjo- RN NICU  
Kimberly Palestis- Clinical Operations Manager  
Sarika Patel- RN ICU  
Mariekadi Vilceus-Talty-Director of MCH

## EXEMPLARY PROFESSIONAL PRACTICE

Maria Adams-PCC SEast  
Doreesha Armstrong -RN ED  
April Bacunawa- RN SEast  
Analyn Bautista- RN CVICU  
Odalys Bridson- RN NICU  
Christina Campaner-RN ED  
Aschel Curry- RN OR  
Abigail DeMesa- RN SE  
Dan Murray- Coordinator Stroke Program  
Diana Perez- Cont. Care Call Center  
Lisa Williams-Peace-RN ICU

## STRUCTURAL EMPOWERMENT

Maria Adams- PCC SEast  
Ingrid Cardenas- Manager Cont. Care Call Center  
Alysa Evans- RN ICU  
Michelle G. Lopez- RN ED

## NEW KNOWLEDGE, INNOVATIONS

### & IMPROVEMENT

Maria Adams-PCC SEast  
Prescilla Alegre- RN OR  
Megan Hany- RN ICU  
Blythe Johnson-RN Out Pt. BH  
Theresa Lafiam- Manager Stroke program  
Melissa Hernandez RN NICU  
Stacy Newman- RN ED  
Regina Pena- RN 6W  
Selena Sackroolar- RN 6East  
Elabeta Slagoka- RN NICU

## EMPIRICAL OUTCOMES

Maria Adams-PCC SEast  
Christian Garcia- RN SW  
Maikel Herrera- RN CVICU  
Michelle G. Lopez- RN ED  
Lucy Moreira- RN L&D  
Arti Pandya-RN ICU  
Viloki Patel- RN ICU  
Tracy Scaletti- PCC ED  
Larissa Semenov- Director of Ambulatory Services  
Alexandra Strayhorn-RN ED  
Valentyna Tabaka-RN 7E

*Please join us in congratulating the 2015 nominees!*



**The 2015 Award recipients are:**

### Empirical Outcomes:

Alexandra Strayhorn RN, Staff Nurse Emergency Department

### Exemplary Professional Practice:

Aschel Currie RN, Registered Nurse, Operating Room

### New Knowledge, Innovations, & Improvements:

Selina Sackroolar RN, Registered Nurse, 6 East Telemetry Unit

### Structural Empowerment:

Michelle G. Lopez RN, Staff Nurse/Scheduler, Emergency Department

### Transformational Leadership:

Mariekarl Vilceus-Talty RN, Director of Nursing, 4E/4W Maternal Child Health





## Daisy Award:

The Daisy Award is a nationwide program celebrating extraordinary clinical skill 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. The nominations are reviewed by the Nursing Quality and Safety Council. The nominations must reflect and demonstrate the importance of compassionate communication and the 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 nomination 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.

## DAISY Winners and Nominees:

### 2015 DAISY Winners

|                                |                  |                                |
|--------------------------------|------------------|--------------------------------|
| Rebecca Stumpf - 7 West        | <b>January</b>   | Staff                          |
| Bianca Rosa ED                 | <b>February</b>  | Family of Patient              |
| Theresa LaFlam Stroke Dept Mgr | <b>March</b>     | Staff                          |
| Elinore Lina - Cath Lab        | <b>April</b>     | Patient                        |
| Regina O'Donnell - Cath Lab    | <b>May</b>       | Patient                        |
| Joesph Sackey - 7 East         | <b>June</b>      | Staff                          |
| Mary Laracy - 7 East           | <b>July</b>      | Case Manager and Social Worker |
| Marvin Angeles - 6 East        | <b>August</b>    | Family of Patient              |
| Michael Fernandez - 6 East     | <b>September</b> | Family of Patient              |
| Josie Floro - L&D              | <b>October</b>   | Family of Patient              |
| Mary Otchere - 6east           | <b>November</b>  | Patient                        |
| Maggie Goa - 4east Post Partum | <b>December</b>  | Patient                        |
| Vivian Chang - 4 West L & D    |                  | Patient                        |







