

# Jersey City Medical Center



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**RWJBarnabas**  
HEALTH

# 2016

## Nursing Annual Report



## Preface:

Nursing's progress at Jersey City Medical Center is steadfast with strong commitment to improving patient outcomes, enhancing the patient and family experience with compassionate care and supporting continued professional growth of all nurses. The 2016 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 and work of nursing guided by the Nursing Strategic Plan embody the 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 and are highlighted in this annual report.



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## **Transformational Leadership:**

Transformational nursing leadership at Jersey City Medical Center is the norm; permeating throughout Nursing! It enables the practice of nursing to continue to excel as all nurses are 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 improve 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 safe care transitions, improved patient outcomes and improved population health. The 2016 year provided a number of opportunities for nurses to transform their practice as they enhanced the lives of our patients, their families, and our communities.

**From Joseph Scott, FACHE, President & CEO**  
**Executive Vice President, Health Care Transformation, RWJBarnabas Health**



Mergers, Repeal Obama care, Tiered Hospitals and Providers, OMNIA Health plans. The only thing certain about healthcare these days is change.

2016 started with major changes impacting healthcare. The continued consolidation of healthcare in NJ began our year with Jersey City Medical Center joining the RWJ health system in 2016. In November, we elected a new President of our country who promised to repeal the Affordable Care Act. Insurance companies began to narrow the market and hospital and provider selective networks began to emerge. As we move into 2017, more changes are on the way, sure to alter the landscape and how health care is delivered to our patients.

The one constant in all of healthcare is our dedicated staff, who regardless of the external forces, are working tirelessly to ensure the best healthcare possible to our community. Whatever change comes our way, I know you will always be there to support our

mission of Enhancing Life. Every day we hear about nurses who live this mission. I receive countless letters of praise for the nursing staff who not only provide great clinical care, but also provide compassionate patient-focused service while connecting with our patients every day.

When I hear about the wonderful work you, our nurses, do and how you touch, impact, and successfully change the lives of the people we serve; I am reminded no matter what changes come our way, we will always be there to ensure the healthcare needs of our community are served at the highest level. Our dedication to this mission is validated by not only our continued Magnet® status but by the other achievements we have collectively worked so hard to accomplish. Validating our work with awards such as 11 consecutive Leapfrog A safety scores (JCMC is 1 of only 62 hospitals nationwide to achieve this recognition) is a tribute to your collective dedication.

Thank you for all you do.

## **A message from Rita Smith, DNP, RN, NEA-BC Chief Nursing Officer and Senior Vice President for Patient Care Services**

The predominant concept in healthcare and hospitals today is change – rapid change. We know next year we will not be providing care in the same acute care settings as we are today and we know we will be caring for today's patients in a wider variety of settings tomorrow. We will be in the sub-acute, in the home and in the primary care settings. This is an exciting time. This movement away from acute care toward prevention of illness and better management of chronic disease care is tightly aligned with the traditional training and philosophy of Nursing and we at Jersey City Medical Center embrace the challenge of creating new models of care delivery as we shift focus to ambulatory and preventive care.

Over the past year, guided by our Nursing Strategic Plan, we continued to prepare nurses for the changing paradigm by setting goals in five areas that will strengthen transitional care for our patients. These five areas include 1) Improve medication management, focused on patients' understanding of medication therapy and barriers which prevent compliance with their medication regimen; 2) Introduce and build motivational interviewing skills to ensure nurses are connecting in a meaningful way with patients as they collaboratively prepare for discharge; 3) Further development of the Continuum of Care model to include cross continuum care pathways with sub-acute care providers to support patients through the first thirty days post acute care discharge; 4) Increase the number of BSN and specialty certified nurses to ensure we optimize knowledge-based care and improved patient outcomes, and 5) Expand Cross Continuum Shared Governance.

Throughout the year, we have strengthened our shared governance structure, involving many more of our nurses in councils; where they are making decisions regarding their practice and their work environment. We have performed well toward meeting our goals, increasing the percent of BSN and/or graduate degree nurses to 87%, and the percent of specialty certified nurses increased to 42%. This is significantly higher than other Magnet® organizations and this contributes to our overall success in achieving quality care and excellent patient safety outcomes. Our well-prepared and committed nurses are poised to meet any demands we may encounter as we move to the new model of healthcare.

I am very proud of our nurses and I am pleased to present the 2016 Nursing Annual Report. I trust you will find the content of this report informative and that you will remain confident in nursing to meet the anticipated challenges presented by healthcare reform.



## Nursing Leadership 2016

Elenita Ajose, BSN, RN, ONC  
Director 6 West and Dialysis

Robert Akal MSN, 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, MSN, BSN, RN  
Manager Care Continuum

Karen Caldas, MSN, RN-BC  
Clinical Risk Manager

Vickie DeChirico MSN, RN, CIC  
Director Infection Control

Arlene Eastman MSN/MPH, RN, CEN  
Manager Emergency Department

Pamela Farley MSN, ACNP-BC  
Chief Nurse Practitioner

Marissa Fisher, BSN, RN  
Injury Prevention Coordinator

Claudia Garzon-Rivera, DNP, RN, CNL, CCRN  
Director of Nursing Clinical Excellence

Brenda Hall, MS, RN, NE-BC, CPHQ, CPPS, CFBE  
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, 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 Department

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

Allison McCabe BSN, RN  
Clinical Operations Manager

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

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

Kim Palestis MSN, RN, CEN, TCRN  
Clinical Resource Director

Sarju Patel BSN, RN  
Clinical Operations Manager

Vito Pascarella BSN, RN  
Clinical Operations Manager

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

Bianca Rosa BSN, RN  
Lead Clinical Operations Manager

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 Sardinas, DNP, MSN, RN-BC, NEA-BC  
Director of Education

Larissa Semenoff, MSN, RN, CNOR, NE-BC  
Director Cardiac Catheterization Laboratory /  
Perioperative Services / Endoscopy / Interventional Radiology

Cristina Simeone, BSN, RN  
Director of Critical Care Services

Varsha Singh MSN, APN-C  
Director Ambulatory Nursing

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



## Nursing Strategic Plan: In Motion

The three-year Nursing Strategic Plan, 2015 to 2017, continues to guide the collective work of Nursing Services and professional colleagues; Pharmacy, Case Management, Social Work, Respiratory Therapy, and Physical Therapy to support patients' safe care transitions from the hospital to home. The Nursing Strategic Plan is aimed at supporting patients' movement from one care setting to another, primarily to their home with a focus on medication management and improved population health.

The components of the Nursing Strategic Plan continue to be Medication Management, Motivational Interviewing, Cross Continuum Pathway, Maximizing the Caregiver's Role, and Cross Continuum Shared Governance. The Plan incorporates Nursing's mission, vision and values and aligns with the Organization's mission and priorities for care. As a Magnet® designated facility, the Magnet domains guide nursing's work in the ongoing pursuit of excellence in patient care delivery.

Throughout this 2016 annual report are highlights of Nursing's accomplishments in support of the Organization's Mission and Nursing's Strategic Plan.

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

The Strategic Plan will be in accordance with the Magnet Standards & the Organization's Mission, Vision, & values

Medication Reconciliation

Motivational Interviewing

Cross Continuum  
Care Pathway

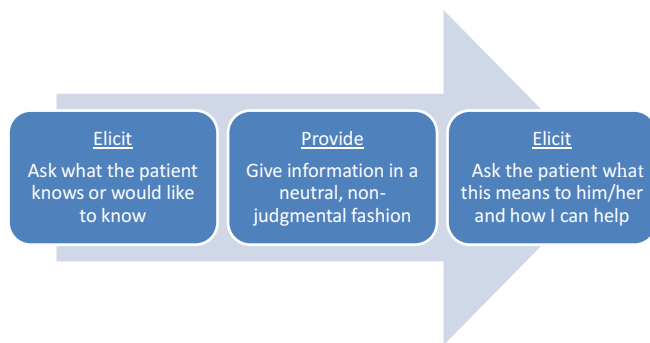
Maximize the  
Caregiver role

Cross Continuum  
Shared  
Governance

### Motivational Interviewing:

*A new approach to compassionate dialogue*

## Motivational Interviewing Basics



Motivational Interviewing (MI) was introduced to nurses along with representatives from social work and case management in a three-day workshop provided in June 2016. Motivational Interviewing is an evidenced based practice initially introduced in 1992 by Miller and Rollnick. The MI structure for conversations with patients serves as a tool to help nurses help patients to make changes for a healthier self. Motivational interviewing is part of the Nursing Strategic Plan supporting nursing's goal to improve patient outcomes. Motivational interviewing is a collaborative, goal oriented method of communication focusing on the language of

change. The intent is to strengthen personal motivation for commitment to a behavior change by eliciting and exploring a person's reasons preventing him or her from making the change (Miller & Rollnick, 2012).

The 5 East Short Stay/Observation Unit nurses with key nursing leadership, Erin Salmond MSN, RN, Maria Adams BSN, RN, and April Bacunawa BSN, RN and nurse educators Nicole Sardinas MSN, RN-BC, CCRN-K, NEA-BC and Ebony Samuel MSN-Ed, RN, RN-BC, NPD, Ingrid Brown MSN, RN and nurse care advisors from the Care Continuum along with interdisciplinary colleagues attended the three-day workshop provided by Annie Fahy RN, LCSW, M.I.N.T. member (Motivational Interviewing Network of Trainers).

Eleven 5 East nurses received the training providing the initial foundation for motivational interviewing skills. Focusing on patients with diabetes and/or congestive heart failure, the unit then proceeded into the application phase of observation and return demonstration with support from the Diabetic Nurse Educator and Unit's Nurse Educator. The project also includes post discharge support by the Nurse Care Advisors in the Continuum of Care Center. In 2017, data collection will begin to explore identifying a link between patients who have received motivational interviewing on the 5 East Unit and post-discharge with Care Continuum and their readmission rates.



Miller, W. R., Rollnick, S. (2012) Motivational Interviewing. (3rd Edition). New York: Guilford.

# Structural Empowerment

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

The professional practice model displays Nursing's framework for the delivery of exceptional care by nurses and the interdisciplinary care team (ANCC, 2013). At Jersey City Medical Center, the theory and concepts noted in the model reflect the Organization's Mission, Vision, and Values while also embracing the diversity of the patient population in our urban location. Members of the Magnet Champion Council take the lead in reviewing and updating the Model to ensure it remains current with our changing practice environment.

Jersey City Medical Center's Nursing Strategic plan focuses on medication management across the continuum of care for safe transition between care settings, reduced readmissions, and improved population health. This plan highlights the importance of providing evidence based care along the continuum to ensure patients have the knowledge and ability to maximize self care to reduce readmissions. The American Nurses Association (2013) identifies the integral role of nurses in the care coordination process is to improve care across patient populations and health care settings. JCMC's professional practice model (PPM) drives its nursing strategic plan and guides nursing practice.

Beginning in late 2015, clinical nurses from the Magnet Champion Council participated in the evaluation of JCMC's PPM. The PPM was redesigned in July, 2016 with an increased focus on patient centered family focused care and it identified care coordination as the primary care delivery model for JCMC nurses in all settings. This further aligned the PPM with the nursing strategic plan, emphasizing the important role nurses at JCMC have in providing safe and effective care across the continuum at all levels and in every setting.

American Nurses Credentialing Center. (2013). 2014 Magnet application manual. Silver Spring, MD: Author.

## Professional Practice Model (July 1, 2016 to Present):

The Professional Practice Model (PPM) is the driving force for nursing care - a schematic description of a theory, phenomenon, or system that depicts how nurses practice, collaborate, communicate and develop professionally to provide the highest quality care for those served by the organization (e.g., patients, families, communities)" (ANCC Magnet Manual pg.74)

**"Igniting Nursing Excellence":** Represents recognition of the impact of the PPM on nursing Practice at JCMC

**Patient Center Family Focused Care:** Nurses at JCMC recognize the vital role patients and family members play in the care and well being of the patient. Patient Centered Family Focused Care is the foundation that guides nursing practice and values at JCMC.

**Values:** The nursing department's strategic vision, missions and values are parallel to the organization's mission, visions and values.

**Professional Growth:** Nurses at JCMC embrace a culture of continuous learning and professional development through various onsite education offering, certification advancement, and academic progression opportunities.

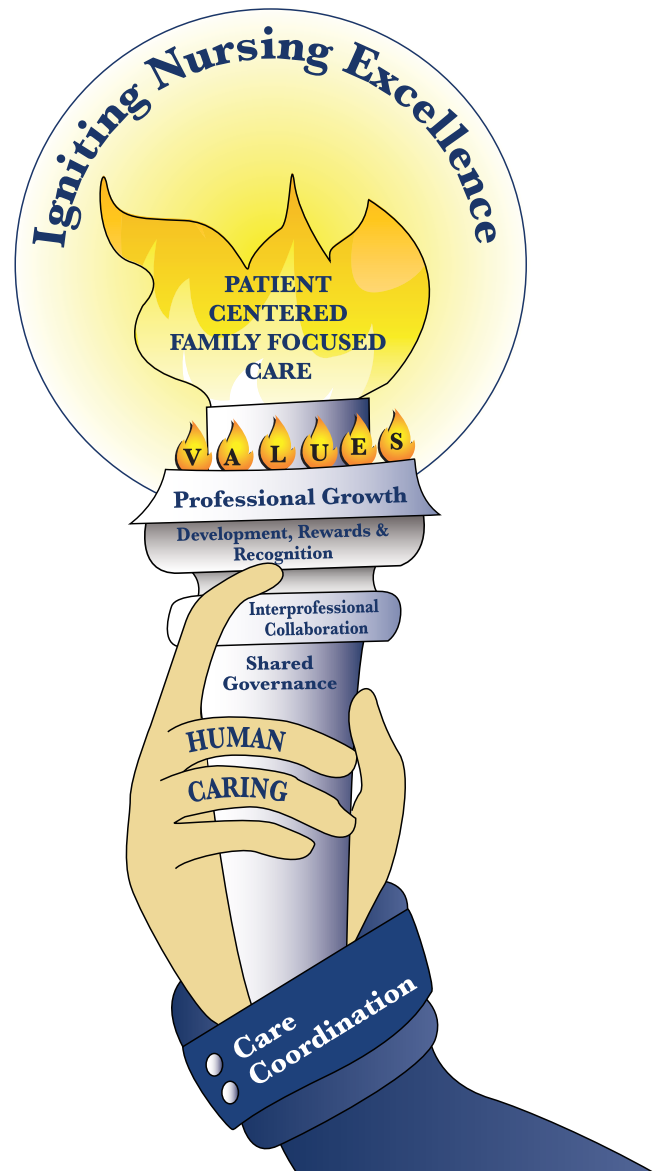
**Development, Rewards and Recognition:** Nurses are recognized and rewarded formally and informally by nursing leaders and peers for their contributions to nursing practice and patient centered family focused care

**Interprofessional Collaboration:** Nurses at JCMC collaborate with Interprofessional team members across multiple settings to ensure safe, effective, and timely care delivery across the continuum.

**Shared Governance:** Nurses at JCMC are involved in shared governance and shared decision making structures and processes that guide clinical practice standards, quality improvement, professional development, and research

**Human Caring:** Nursing practice incorporates the tenets of the nursing theorist Jean Watson and the Theory of Human Caring

**Care Coordination: (Care Delivery Model)** Nurses at JCMC coordinate the care of the patient throughout the continuum by partnering with various members of the Interprofessional team including the patients, and their family members. As the coordinator of care the nurse ensures that the patient's needs and preference are met overtime and across settings through the sharing of information, and activities between providers. Patient care goes beyond the acute care episode to also focus on the reasons for admission and transition from hospital to home.



## Structural Empowerment:

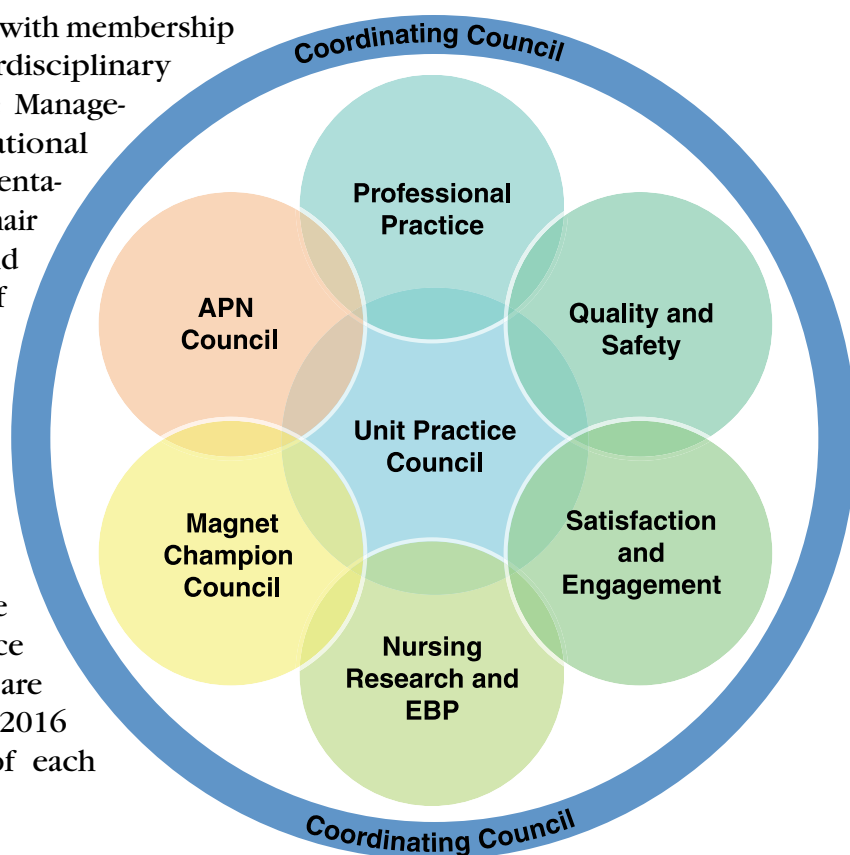
The Magnet® domain of structural empowerment depicts the many ways in which the practice environment at Jersey City Medical Center supports exemplary professional nursing practice. The functions within this domain facilitate care delivery which drives the attainment of quality patient outcomes. The cornerstone 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 inter-disciplinary 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 seven 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' 2016 accomplishments along with membership of each council.

New APN Shared Governance Council - In 2016, a redesigned APN Council was introduced into the shared governance structure to provide APNs additional opportunities to demonstrate organizational influence through shared decision making.



Nursing 2016 Shared Governance Structure



## 2016 Shared Governance Council Highlights:

Charters  
Developed  
For all Shared  
Governance  
and Unit  
Practice  
Councils

Gap Analysis/  
Needs  
Assessment  
Completed  
with ANA  
Consultant

Magnet  
Writing  
Workshops  
held with  
nursing  
Leadership

Implemented  
New Nursing  
Peer Review  
Process

JCMC Shared  
Governance  
Structure  
expanded to  
include to  
include APN  
Shared  
Governance  
Council

Worked  
Collaboratively  
toward Magnet  
Re-designation  
Application  
Submission due  
date April 2017

## Professional Practice Council

The Nursing Professional Practice Council maintains standards of clinical nursing practice and patient care consistent with evidence-based practice and requirements of regulatory agencies.

### Purpose:

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



## Professional Practice Council Members Are:

Regina O'Donnell RN <b>Chair</b>	Cath Lab	Brit Destefano RN	Float
Bernadette Johnson RN <b>Co-chair</b>	6W	Shaden Mustafa RN	ICU
Yelena Landa RN, APN <b>Advisor</b>	ECPD	Elizabeth Gadziala RN	ICU
Joanne Reich RN, DNP <b>Advisor</b>	AVP Nursing Practice	James Pagaduan RN	ICU
Jessica Velastegui RN	5E	Elise Campanella RN	OR
Sally Kufczynski RN	5W	Debra Kelly RN	Endoscopy
Rossana Vales RN	5W	Christina Campaner RN	ER
Lisa Ryan RN	5W	Eric Blumenstyk RN	ER
Marlene Paredes RN	Behavioral Health	Isabel Pitao RN	Renal
Cynthia Pamintuan RN	5W	Therese Boruta RN, IT Informatics Site Manager	CIS
Ogechi Okaro RN	6E	Ingrid Brown RN Manager	Continuum of Care Center
Sean Lo RN	6E	Elisa Martinez RN Nurse Care Advisor	Continuum of Care Center
Connie Meglioranza RN	6W	Marc Montieth RN	Educator
Lillian Orellna RN	7E	Damaris Ratento	Critical Care
Yvette Bryant RN	7E	Lita Aguirre RN	PACU

## 2016 Goals and Accomplishments

Nursing Professional Practice Council	
2016 Goals	2016 Accomplishments
1. Review newly developed and updated plans of care to ensure plans are interdisciplinary, comprehensive, evidence based and easy to navigate.	<b>Goal Met</b> Reviewed and made recommendations on interdisciplinary plan of care (IPOC) <ol style="list-style-type: none"> <li>1. Alcohol Withdrawal</li> <li>2. CABG</li> <li>3. Chronic Pain</li> <li>4. Orthopedic</li> <li>5. CHF</li> <li>6. DM</li> <li>7. DVT/UTI</li> </ol>
2. Review and/or revise at least 3 nursing policies related to medication management, care transitions, family focused care, and population health.	<b>Goal Met</b> Reviewed several policies: Wound Policies (9) Infection Control (4) Oncology (3) Several others (11) <ol style="list-style-type: none"> <li>1. Post Mortem Care</li> <li>2. Management of Sequential Device</li> <li>3. Peripheral Access Device</li> <li>4. Admission of Patients to Patient Unit</li> <li>5. Transport of Patient to Another Facility</li> <li>6. CHG Bathing Wipes Policy</li> <li>7. Pain Management</li> <li>8. Nursing Referrals to Rehab</li> <li>9. Nursing Swallow Screening</li> <li>10. Nurse Initiated Lactic Acid and Blood Cultures for the Identified Severe Sepsis Patient/ Septic Shock</li> <li>11. Code Stroke and Teleneurology Response Policy</li> </ol>
3. Evaluate the impact of the nursing intervention on readmission rate on patients with COPD with LACE score greater than 11 or equal admitted in quarter 1	<b>Goal Met</b> The council members collected data on 140 patients, 22 were excluded because of technical difficulties (no documentation) Total of 118 patients were reviewed 23 patients were identified as high risks 19.5%
Other accomplishments: Dissemination of knowledge	<ul style="list-style-type: none"> <li>- During the Nurse's Week members participated in the recruitment of nurses for the NDPP.</li> <li>- PPC members joined the Community Outreach Program "Careers in Nursing" at JCMC August 10, 2016.</li> <li>- PPC member Lita Aguirre RN presented a poster board Nursing Research Day December 11, 2016</li> </ul>

## Quality and Safety Nursing Council

The Nursing Quality and Safety Council evaluates quality performance metrics and nurse sensitive indicators to maintain standards of clinical nursing practice and safety consistent with evidence-based practice and requirements of regulatory agencies.



### Quality and Safety Nursing Council Members are:

Claudia Garzon-Rivera RN, DNP <b>Chair</b>	Director of Clinical Excellence	Maria DeVivo Pharm D Pharmacy Director	Pharmacy
Mabel LaForgia RN, DNP <b>Advisor</b>	Director of Nursing Research EBP and Magnet Program	Rosemarie Gonzalez RN	6 West
Joann Reich RN, DNP <b>Advisor</b>	AVP Nursing Practice	Ricky Jewell RN	ED
Shaden Mustafa RN	ICU	Debra Kelly RN	PACU
Erika Kane PT	Physical Therapy	Kyung-Suk Kim RN	7 East
Luanne Brogna RN Wound Manager	Wound Prevention	Reyna Mateo RN Falls Prevention Coordinator	Nursing Practice
Joanie O'Leary APN Clinical Director	Oncology Services	Annette Morales RN Nurse Educator	ECPD
April Bacunawa RN	5 East	Michelle Morales RN Nurse Educator	ECPD
Therese Boruta RN, IT Informatics Site Manager	ICS	Isabel Pitao RN	Renal
Yvette Bryant RN	7 East	Sheila Ragoonanan RN	5 West
Elise Campanella RN	OR	Melisa Rosario RN	ED
Ingrid Brown RN Nurse Manager	Continuum of Care Center	Selena Sackroolar RN	6 East
Elaine Castro, RN	ED	Kokila Shah RN	SDS
Chi-Yuan Chang RN	Labor and Delivery	Tracy Small APN	Department of Medicine
Aschel Curry	OR	Lorelie Thalla RN	6 West
Jocelyn De La Cruz Torres RN	NICU	Michelle Dickerson RN Educator	ECPD
Rachelle Torres RN	5 East	Rebecca Frankel RN	4 West
Aurea Vallo RN	6 East	Sonia Freire RN	6 West
Cristina Villaflor RN	6 East	Stacy Huamani RN	ED
Kristine Villapando RN	ED	Yelena Landa RN Educator	ECPD
Samantha Dicken RN	NICU	Elinore Lina RN	Cardiac Cath
Concordia Meglioranza RN	6W	Lucy Moreira RN	Labor and Delivery
Cynthia Rodriguez RB	Cardiac Cath	Salematou Sow RN	Labor and Delivery
Slava Pikulin Pharm D	Pharmacy	Theresa Laflam RN Stroke Manager	Nursing Practice
Brit DeStefano RN	Float	Alyssa Lazo RN	Operating Room
Stephanie Hayes RN	ED	Vicki DeChirico RN Infection Control Director	Infection Control
Manza, Catherine RN	ED	Ogechi Okaro RN PCC	6 East
Rosangela Pavezzi		Jessica Velastegui RN	5 East
Clarisa Santos RN	6 East	Ashley Siegel RN	ED
Eric Blumenstyk RN	ED	Lillian Orellana RN	ICU
Marissa Harris RN	7 East	Heidi Milad RN	7 East

## 2016 Goals and Accomplishments

Quality and Safety Nursing Council	
2016 Goals	2016 Accomplishments
1. Develop, review, and revise nursing policies directly related to quality and safety, in collaboration with Policy Committee.	<b>Goal Met</b> <b>Revised 30 Policies</b> <ol style="list-style-type: none"> <li>1. Telestroke</li> <li>2. CHG Bathing</li> <li>3. Peripheral IV</li> <li>4. Adult Urinary Indwelling Catheter CAUTI</li> <li>5. Single Multi dose Vial</li> <li>6. Sequential Compression Devices</li> <li>7. Non-Violent Restraints/Violent Restraints</li> <li>8. Medication Administration Documentation &amp; Storage</li> <li>9. Critical Care CHG Bathing</li> <li>10. Transport of Patients to Another Facility for the Purpose of Diagnostic Testing or Special Procedures</li> <li>11. Executing Verbal and Telephone Orders</li> <li>12. Drawing Blood Cultures for Adults and Pediatrics</li> <li>13. Blood Glucose Monitoring</li> <li>14. Chemotherapy Extravasation</li> <li>15. Code Carts Exchange &amp; Maintenance</li> <li>16. Securing Endotracheal Tubes</li> <li>17. Oral Care of the Vented Patient</li> <li>18. Implanted Venous Access Port</li> <li>19. Nurse Initiated Lactic Acid &amp; Blood Cultures</li> <li>20. RRT</li> <li>21. Perioperative Autologous Transfusion</li> <li>22. 9 wound Care policies</li> </ol>
2. Monitor and evaluate compliance with CMS Conditions of Participation (COPs) related to nursing and safe environment of care.	<b>Goal Met</b> <ul style="list-style-type: none"> <li>• Audited, trended &amp; disseminated Medication Management compliance on various units</li> <li>• Real-time education provided to staff during audits</li> <li>• Council started using meeting time to perform audits</li> <li>• Improvement in 5 audit indicators have been noted for the month of December</li> </ul>
3. Monitor and evaluate adherence to medication management standards for all nursing units on a monthly basis	<b>Goal Met</b> Members conducted Medication Management Audits on various units <ul style="list-style-type: none"> <li>• 14 data point are included in audit, i.e. "are all medications locked and secured"</li> <li>• Med-Surg, Critical Care, &amp; Observation units audited</li> <li>• Real-time education provided during audits</li> <li>• Medication Administration Audit Results by Nursing Educators, on various units, are reported at council meeting               <ul style="list-style-type: none"> <li>o 8 indicators audited i.e. "Safely removes medication from Pyxis or medication cassette"; "documents medication administration in real-time"</li> <li>o An increase in percentage compliance was seen in all audit indicators.</li> </ul> </li> </ul>
4. Work collaboratively with the Clinical Value Analysis committee to evaluate the quality of clinical equipment	Clinical Value Analysis Committee restructured during 2016, meetings to resume in 2017
<b>Other Accomplishments:</b>	Shared results of quarterly NDNQI Prevalence Study data with all nursing unit representatives and provided color copy of graphs so that they could be shared at UPC council meetings & posted on unit.
5. Empower nursing staff to take ownership of pressure ulcer prevention measures	
6. Incorporate the staff nurse into product selection process.	Trial of silicone foam prevention dressing on 7East & 7 West. RN's completed evaluation forms on 2 competitive products. Results were tallied & shared with Barnabas system wide Wound Care Collaborative.
7. Reduce Falls & Falls with Injury	<b>Falls YTD:</b> <ul style="list-style-type: none"> <li>• 6W fall rate 2.19 met goal of 2.48</li> <li>• For the past 8 quarters, the majority of the units have achieved rates under the national mean for majority of the qtrs</li> </ul> <b>Fall with Injury:</b> <ul style="list-style-type: none"> <li>• Critical Care &amp; 6 West Zero</li> <li>• For the past 8 qtrs, all units have achieved fall injury rates below the National mean for the majority of the qtrs</li> </ul>
8. Reduce Unit Acquired Pressure Ulcer Injuries	<ul style="list-style-type: none"> <li>• 7west achieved ZERO HAPUs</li> <li>• 1st, 2nd &amp; 3rd quarter Pressure Ulcer Prevalence Study: majority of units had zero stage 2 or greater</li> </ul>



## Satisfaction and Engagement Council

The Satisfaction and Engagement Council serves to mentor and empower autonomy in all aspects of nursing through engagement and implementation of nurse driven goals with the purpose to increase satisfaction of both patients and staff.



### Satisfaction and Engagement Members Are:

Maria Adams RN- Chair	5 East	Patrycja Wojewoda RN	NICU
Michelle G. Lopez RN- Chair	ED	Odalys Bridson RN	NICU
Mabel LaForgia (Advisor)	MPD	Jessica Mercado RN	4E
Stacy Newman RN	ED	Shellinie Muneshwar RN	4E
Stanley Owusu RN	ED	Jean Tevari RN	4W
Elaine Castro RN	ED	Andrea Dirubba RN	4W
Jones, Doreen RN	Cath Lab	Blythe Johnson RN	PH-ACC
Appadural Lakshmanan RN	Cath Lab	Rachelle Torres RN	5E
Corinne Chou RN	CVICU	April Bacunawa RN	5E
Shaden Mustafa RN	Crit Care	Joseph Bolante RN	5W
Arti Pandya RN	ICU	Sheila Ragoonanan RN	5W
Claudia Golding RN	SDS	Catherin Manza RN	6E
Louise Ferreira RN	OR	Aurea Vallo RN	6E
Linda Gentile RN	PACU	Ogeehi Okero RN	6E
Chi-Yuan Chang RN	L&D	Brit Destefano RN	Float
Jocelyn Dela Cruz-Torres RN	NICU	Sonia Freire RN	6W
Yvette Bryant RN	7W	Heidi Milad RN	7E
Liting Wei RN	7W	Marissa Harris RN	7E
Fozia Ahmed RN	7W	Isabelita Pitao RN	Renal
Ebony Samuel RN	Education		

## 2016 Goals and Accomplishments

Satisfaction and Engagement Council	
2016 Goals	2016 Accomplishments
1. Merge Staff Satisfaction and Retention Council with Patient Engagement	<ul style="list-style-type: none"> <li>Satisfaction and Engagement Council (SEC) Created</li> </ul>
2. Strengthen /Establish member representation from all nursing units	<ul style="list-style-type: none"> <li>Consistent membership obtained from the following units: ED, 5E/ObS, CV/ICU, OR, L&amp;D/NICU, 6E/6W, 7W Renal PH-ACC, Areas to focus on 4E, 7E behavioral health, critical care, Cath lab, and float pool</li> </ul>
3. Improve employee survey participation	<ul style="list-style-type: none"> <li>2014 76% employee participation</li> <li>2015 80% employee participation</li> <li>2016 80% employee Participation</li> </ul>
4. Collaborate with other disciplines in efforts to enhance patient and staff experience	<ul style="list-style-type: none"> <li>Best Practice inventoried by unit completed.</li> <li>SIM Labs initiated.</li> <li>Overall HCAHP Engagement scores increased</li> </ul>

## Nursing Research and Evidence Based Practice Council

To contribute to the body of nursing knowledge through research endeavors and to foster staff member knowledge and skills in nursing research and evidence based practice



### Nursing Research and Evidence Based Practice Council Members Are:

David Forshtay RN	5W	Catherine Manza RN	
Rossana Vales RN	5W	Isabel Pitao RN	Dialysis
Selena Sackroolar RN	6E	Alexis Sweeny RN	
Maria Evangelista RN	7E	Elizabeth Gadziala RN	ICU
May Kho RN	ICU	Samantha Duke RN	ED
Ebony Samuel RN Educator	LNPDS	Erin Duby RN	5 E
Aguierre, Lita RN	PACU	Patricia Dibello RN	OR
Chi-Yuan Chang RN	L&D	Jennifer Kellow RN	NICU
Eleanor Silverman RN	Librarian	Mabel LaForgia RN	Nursing Research
Ogechi Okaro RN	6 E	Claudia Garzono Rivera RN	Nursing Excellence
April Bacunawa RN	5 E	Ingrid Brown RN	Care Coordination
Sean Lo RN	6 E	Regina O'Donnell RN	Cath Lab
Shaden Mustafa RN	ICU		
Jessica Irwin RN	ICU		

## 2016 Goals and Accomplishments

Nursing Research and Evidence Based Practice Council	
2016 Goals	2016 Accomplishments
1. Complete a literature review and survey clinical nurses to identify common barriers to completing medication reconciliation and the associated best practices. A synthesis of the Findings will be presented to nursing councils and nursing leadership	<ul style="list-style-type: none"> <li>Literature review completed by research council members.</li> </ul>
2. Develop a structured process to support shared governance council and unit practice councils when clinical inquiries arise by providing evidence based recommendations for change in practice	<b>Goal Met</b> <ul style="list-style-type: none"> <li>Collaborated with Amanda Mullane Clinical Nutrition Manager to choose the a malnutrition screening tool Evidence Based Table</li> <li>Questions from Professional Practice Council are presented to the Research Council for review</li> <li>Burning Questions are collected from Nursing units</li> <li>Provided input and guidance to Lita Aguirre and Maria Rufin with their implementation of the PASERO Opioid Sedation Scale in 2 West PACU</li> </ul>
3. Participate in joint article review, critique, and discussion during council meetings to increase council members' knowledge and skill in evidence based practice and research methodologies	<ul style="list-style-type: none"> <li>Council members participated in peer journal article review during the last 15 minutes of each meeting.</li> </ul>
4. Plan two main events per year to foster staff member knowledge and skills in evidence based practice through formal and informal interactive educational offerings	<ul style="list-style-type: none"> <li>The Nursing Research Council Hosted the 6th annual Nursing Excellence and Research Fun Fair on December 16th, 2016               <ul style="list-style-type: none"> <li>16 Poster presentations representing Nursing research, evidence based practice, performance improvement and clinical inquiry burning questions were presented</li> <li>107 attendees</li> </ul> </li> </ul>

## Magnet Champion Council

The Magnet Champion Council serves as practice leaders, role models, and advocates for nursing excellence. The members of this council represent all nursing units, and the greater nursing body at JCMC. They facilitate staff involvement in Magnet activities, and promote sustained engagement related to nursing practice and excellence.



### Magnet Champion Council Members Are:

Nicolle Reyes RN	6W	Elizabeth Ferrara RN	ED
Shaden Mustafa RN	ICU	Regina Scarinci LPN	Center for Comprehensive Care
Regina O'Donnell RN	Cath Lab	Serena Patel RN	ICU
Kate Guillermo RN	OR	Sarah Aboubakr RN	PCC L&D
Maribel Labutong RN	Continuum of Care Center	Mark Monteith RN	ECPD
Ricky Jewell RN	ED	Dominique Williams-Kemp RN	ER
Ebony Samuel LNPDS	ECPD	Oluwatosin Akindunbi RN	7 East
Ogechi Okaro RN	6 East	Alexander Goldsmith RN	7 East
Michelle Dickerson RN	ECPD	Daphne Chung RN	7 East
Educator		Alelei Costales-Konev RN	ICU
Samantha Duke RN	ED	Leah Dungee RN PCC	NICU
Stefanie Orrico RN	7 East	Nancy Awad RN	ICU
Sean Lo RN	6 East	Heidi Milad RN	7 East
Amelia Blanco RN PCC	6 West		
Mabel LaForgia DNP RN	Advisor		



## 2016 Goals and Accomplishments

Magnet Champion Council	
2016 Goals	2016 Accomplishments
1. Provide ongoing educational opportunities related to Magnet and nursing excellence	<p><b>Goal Met</b> Magnet Champion sponsored two main event related to Magnet and Nursing Excellence</p> <ul style="list-style-type: none"> <li>• <b>Attaining Nurse Certification Grand Rounds</b> on 3/18/16 from 12pm -1pm. Magnet champion hosted tables with information on variety national certification specialties.The event was attended by 24 staff nurses interested in nursing certification.</li> <li>• <b>Academic Community Outreach Event</b> -held on August 10, 2016 from 5:30 to 7:30pm in the JCMC Cafeteria.This event highlighted 14 nursing specialties presented by nursing staff and 4 Academic Institutions.This event was attended by 43 members of the community interested in learning about academic programs for entry into nursing.</li> </ul>
2. Create and maintain Magnet-related communication to department of nursing staff	<p><b>Goal Met</b></p> <ul style="list-style-type: none"> <li>• Information regarding Magnet activities communicated to UPC</li> <li>• Modified and redesigned the 2017 Professional Practice Model, with input from UPC members and unit staff, to be more progressive contemporary, simple, timeless, easy for nurses to understand and reflective of the nursing staff and the organization.</li> </ul>
3. Monitor and track measurable unit-specific Magnet Champion goals and outcomes	<p><b>Goal Met</b></p> <ul style="list-style-type: none"> <li>• Discussed and traced Unit Specific Magnet Champion Goals and outcomes during meetings.</li> <li>• Assisted in the design of unit Nursing Excellence Board for each Unit.</li> </ul>
4. Work collaboratively to collect evidence related to the Magnet document.	<p><b>Goal Met</b></p> <ul style="list-style-type: none"> <li>• Participated in coordinating the collection of 40 pictures for the Magnet Website</li> <li>• Selected the template for the Website Design</li> <li>• Participated in Brainstorming SOE sessions</li> </ul>

## Unit Practice Councils (UPC) Chairs

The Unit Practice Council Chairs Committee is a forum where the chairs of the units/department Unit Practice Councils (UPCs) come together to provide one another input and feedback on shared decision making topics related to clinical practice standards, quality improvement, staff professional development, and research. This council assists with the standardization of UPC structure and process and the integration of best practices amongst all UPCs

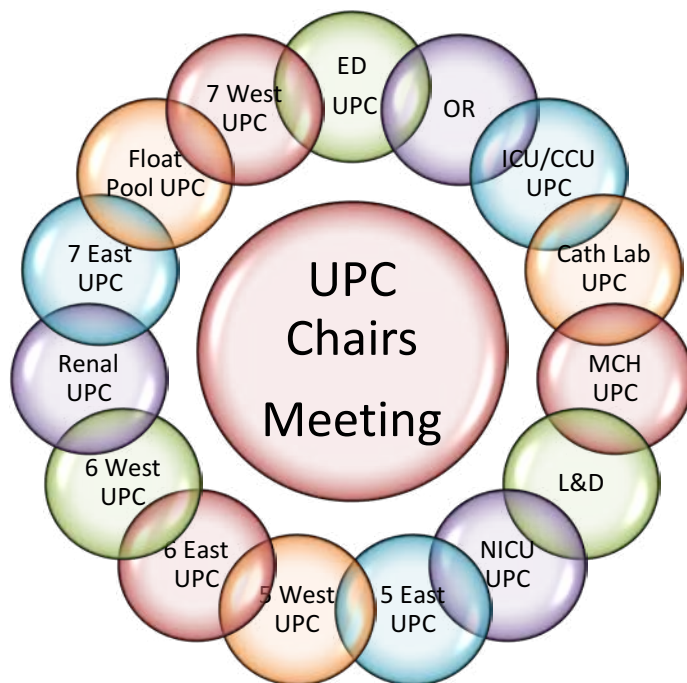


### The UPC chairs are:

Eric Blumenstyk RN,	ED	Sarah Aboubakr RN	L&D
Melissa Rosario RN	ED	Yvette Villegas RN	L&D
Julie Van Ness RN	ED	Sarah Bain RN	L&D
Shaden Mustafa RN	ICU	Isabel Pitao RN	Renal
Elise Campanella RN	OR	Rachelle Torres RN	5 East
Regina O'Donnell RN	Cath Lab	Brit DeStefano RN	Float Pool
Doreen Jones RN	Cath Lab	Jemima Bravo RN	6 West
Sujeiry Rosario-Villegas RN	NICU	Heidi Milad RN	7 East
		Marissa Harris RN	7 East
Patrycja Wojewoda RN	NICU	Jordan Almeda RN	7 West
Samantha Dimalanta RN	NICU	Catherine Manza RN	6 East
Janel Kennedy Santos RN	MCH	Sean Lo RN	6 East
Carlene Kohl RN	7 West		

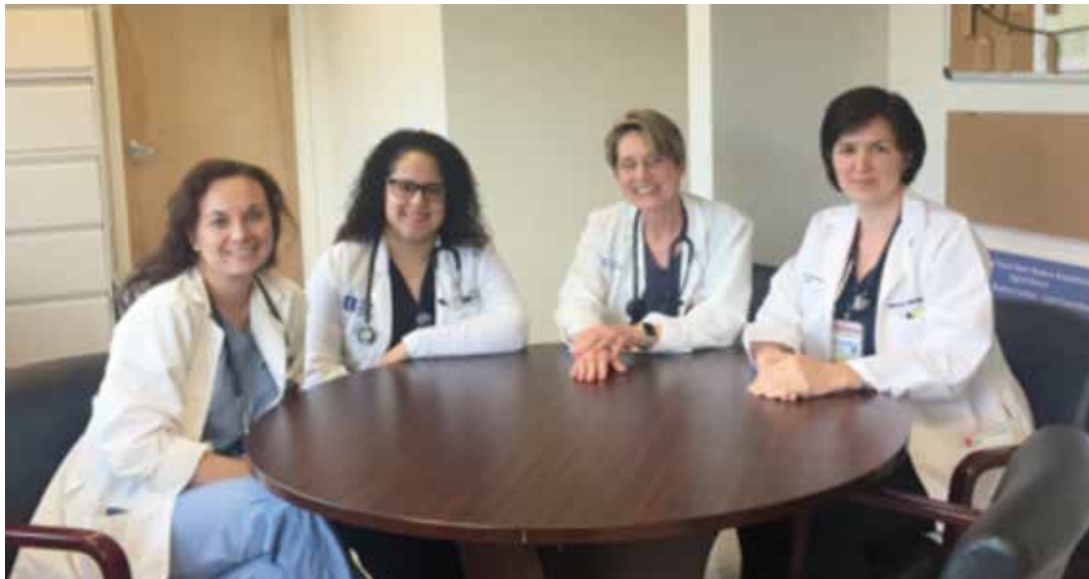
## 2016 Goals and Accomplishments

Unit Practice Council (UPC) Chairs	
2016 Goals	2016 Accomplishments
1. Obtain UPC representation from each shift per unit.	<b>Goal Met</b> <ul style="list-style-type: none"> <li>Increased participation and engagement of UPC chairs from all units.</li> </ul>
2. Identify and resolve barriers to the change of clinical practice.	<b>Goal Met</b> <ul style="list-style-type: none"> <li>Resolution tool was updated and distributed to the UPC tools</li> <li>Increase and encourage staff nurses to use the resolution tool when identifying barriers to clinical practice.</li> </ul>
3. Establish individualized unit specific goals for each units/ departments UPC that are current, relevant and aligned with the 2016 Nursing Strategic Plan.	<b>Goal Met</b> <ul style="list-style-type: none"> <li>UPC chairs and Nursing Directors Developed Charters for each unit to be reviewed at the beginning of each meeting                             <ul style="list-style-type: none"> <li>Completed from 100% of nursing units</li> </ul> </li> </ul>
4. Monitor and track measurable unit-specific goals and Nurse Sensitive Outcomes and discuss success and opportunities for improvement.	<b>Goal Met</b> <ul style="list-style-type: none"> <li>Standardized UPC agenda to include discussion of unit specific Nurse Sensitive Outcomes (i.e. falls, HAPU, HCAHP etc.)</li> </ul>



## Advance Practice Nurse Council – Newly formed in July 2016

The APN council provides clinical leadership and practice guidance through education, research, collaborative practice, consultation, and peer review. This Council promotes an opportunity for growth of a diverse group of nurse clinicians functioning in various advanced practice roles; through identification of areas for improvement and their resolutions. The APNC provides clinical advisory guidance to improve the quality of care integrating the scope of practice and standards of care within specialty clinical practice areas.



**Chair** – Jessica Marino APN, Department of Cardiology, Cardiac Catheterization Lab

**Co-Chair** – Tracey Smalls APN, Department of Medicine

### 2016 Goals and Accomplishments

Advanced Practice Nurse Council	
2016 Goals	2016 Accomplishments
1. Establish and solidify a shared governance structure for APNs	<b>Goal Met</b> <ul style="list-style-type: none"><li>• Chair and Co-Chair elective/designated</li><li>• Bylaws were finalized in 11/2016</li><li>• Consistent member attendance x 3 months</li></ul>
2. Establish a Peer Review process that is evidence based and incorporates the ANA peer review and Magnet standards	<b>Goal Met</b> <ul style="list-style-type: none"><li>• Guidelines established</li><li>• Peer review process started 11/2016</li><li>• Incorporated self evaluation with peer reviewer</li></ul>
3. Celebrated all APNs during National NP Week	<b>Goal Met</b> <ul style="list-style-type: none"><li>• Poster developed and displayed honoring 64 advance practice nurses for the high quality care they provide to JCMC patients</li></ul>

The advance practice nurses play a pivotal role in healthcare delivery at JCMC. Their role includes a blend of clinical expertise in managing health conditions with and added emphasis on disease and health management, bringing a holistic and comprehensive perspective to patient care. Advance practice nurses are employed in a variety of setting and specialties that span the continuum including the emergency department, department of medicine, oncology infusion center, Cardiac Cath Lab, Cardio Thoracic Surgery, Orthopedic Institutes, Palliative Care, Center for Comprehensive Care, Psychiatry, Anesthesia, and Labor and delivery.

## Advance Practice Nurses

Emergency Department	Department of Medicine	Labor and Delivery
Sharon Cahill NP Florence Drattler-Gold NP Yana Jeffers NP Jayne McCarthy NP Lisa Zamber-Costello NP Jan Stralkus NP Jessica Arauz NP Maria Bernardo NP Annabelle Layugan NP Laura Freire NP Odetta Suarez NP	Lea Delacruz NP Sherene Dunkley NP Pamela Farley NP Natasha Lawrence NP Marina Monpere NP Lisa Orphelia NP Tracy Small NP Rachel Snyder NP Devon Young NP	Sonia V. Lander Midwife Leslie D. Meneguzzo Midwife Melissa Peard Midwife
Oncology Infusion Center	Cardiology	Cardiac Cath Lab
Joanie O'Leary NP	Tara Gripenburg NP Mai-Ling Reyes NP Lori Pennel NP	Jessica Walsh-Marino NP Franca DiBrita NP Eliza Mae Tangonan NP Rittu Sukhraj NP
Anesthesia Department	Psychiatry	Center for Comprehensive Care
Samuel Baron CRNA Andrew Chua CRNA Suzanne Cottle CRNA Keesha Duncan CRNA Benedicta Espinosa CRNA Courtney Gray CRNA Carl Koch CRNA Jaime Konrad CRNA Lucas Alfredo CRNA Fred Pedergrass CRNA Karol Quiroga CRNA Diaba Diombera, CRNA Kelly Mallon, CRNA Vanessa Taha, CRNA Shanna Campbell, CRNA Donna Debelen, CRNA Catherine Dobres, CRNA Girlyn Garcia, CRNA Ronald Garabed, CRNA Courtney Gray, CRNA Danielle Samaniego, CRNA	Adrian Fox NP Chelsea Wood NP Jadira Amill NP Mark Canning NP Judith Marquet NP	Jessymol Manchery NP Janis Zadel NP Mark Angelo Lladas NP
CT Surgery	Palliative Care	Orthopedic Institute
Reshma Maniar NP Michelle Zaorski NP	Sheryl Ciccarelli NP	Nancy Frederic NP





## Measuring the level of Shared Governance:

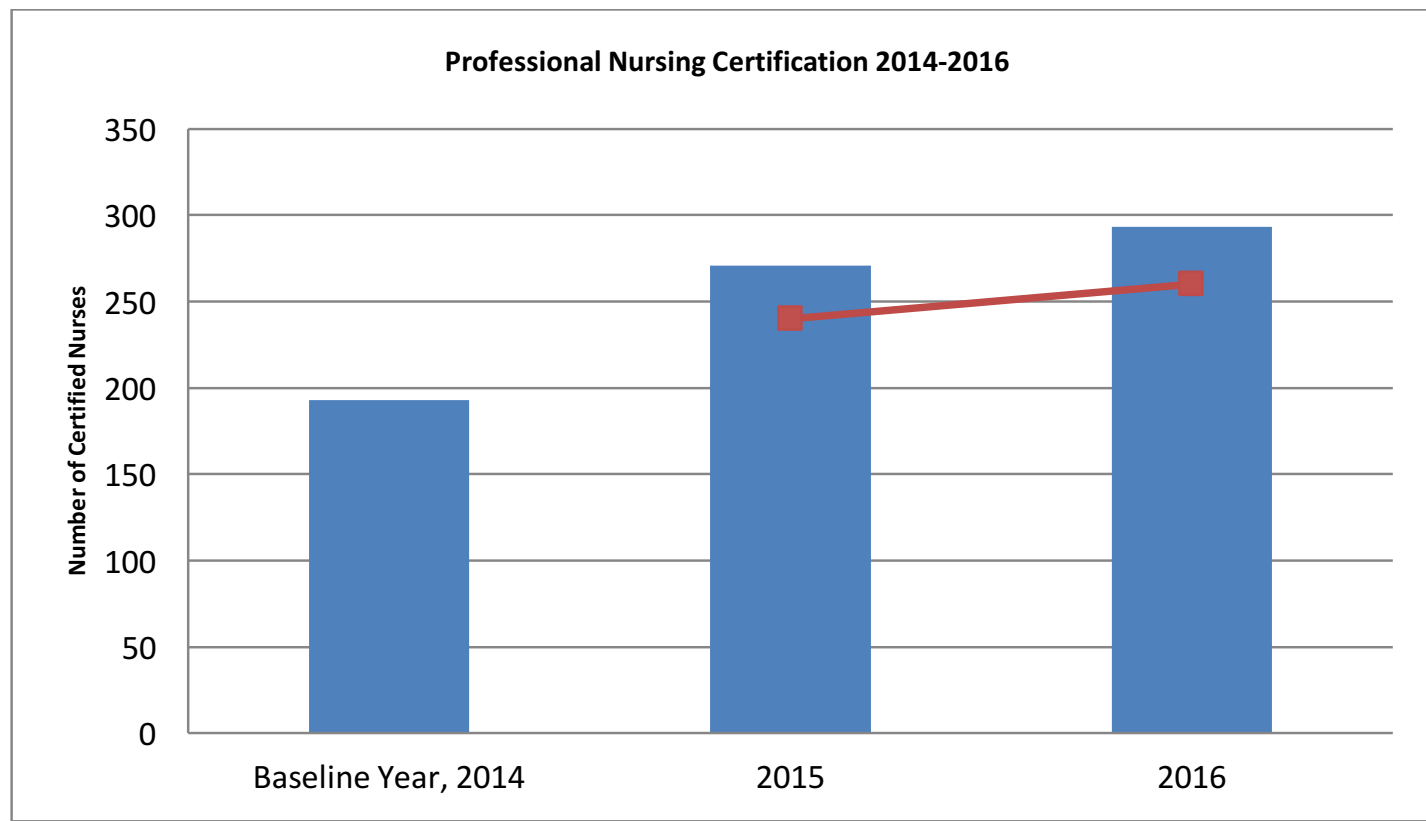
The Index of Professional Nursing Governance, IPNG, a validated and reliable tool to measure levels of shared governance, created by Robert Hess, RN, PhD, FAAN, Founder, Forum for Shared Governance, was administered during Nurses Week 2016 and will be repeated on an annual basis to measure growth in the level of nursing shared governance at JCMC. This initial, baseline survey revealed positive results of attaining the first level of shared governance. The Shared Governance Survey Results were compiled by Joanne Reich, DNP, RN, NEA-BC. The results were presented at the December Nurse Satisfaction and Engagement Council meeting and at Nursing Grand Rounds. This initial, baseline survey revealed positive results of attaining the first level of shared governance. Initial scores are noted below.

IPNG Scores JCMC – May 2016			
<i>IPNG Total and Subscale Scores First Survey</i>			
	First Survey 2016	Second Survey	
	Range	Mean	Mean
Total IPNG Score	173-344	182.57	
Subscales			
Nursing Personnel	45-88	35.59	<b>Shared Governance Levels</b>
Information	31-60	<b>34.47</b>	
Resources	27-52	<b>32.48</b>	
Participation	25-48	<b>27.10</b>	
Practice	33-64	<b>35.26</b>	
Goals	17-32	<b>17.67</b>	
Note: Shared governance scores are in boldface.			



## Increasing the number of nationally certified nurses

The Nursing Strategic Plan depicts the collective work of Nursing Services in meeting the continuously changing needs of our patient population and community. One of the core components of the nursing strategic plan is Maximizing the Caregiver Role which aims to develop and sustain a nursing workforce equipped to meet the challenges of healthcare delivery by increasing the proportion of nurses with certification.



Ongoing support to nurses to prepare for national certification exams is provided through the American Nurses Credentialing Center's Test for Success program, provision of review sessions within specialty practice areas such as Oncology, Obstetrics, Orthopedics and Medical Surgical nursing. In 2016, the number of nationally certified nurses reached 293, nearly 30%.

JCMC recognizes the importance of achieving national certification and embraces those who have taken the journey to distinguish themselves in their nursing specialty. Yearly, JCMC recognizes nurses who have achieved national certification during National Certified Nurses Day™ on March 19th. Certified Nurses Day promotes awareness and invites nurses to advance their career through national certification. On Wednesday March 16th 2016, a poster displaying all of JCMC's nationally certified nurses' was placed in the lobby recognizing all of JCMC nurses with national certification. Rita Smith RN, NEA-BC Chief Nursing Officer, and Joanne Reich DNP, RN, NEA-BC Associate Vice President, Nursing Practice visited each unit and personally recognized all of

## Increasing the number of nationally certified nurses (cont)



JCMC's certified nurses. Every certified nurse received a personalized thank you. Rita Smith and Joanne Reich thanked each nurse for their continued commitment necessary for successful completion of certification examination or continued competency requirements for certification renewal. At the conclusion of the celebration, the names and certification of each nurse were proudly displayed on each unit or department. JCMC proudly recognizes JCMC certified nurses' for their contributions in accomplishing the strategic priority of contributing to a workforce that is experienced, highly skilled and prepared to take on the today's healthcare challenges.





# Certified Nurses Day

## A day to recognize certified nurses

### March 19th



## THANK YOU FOR YOUR DEDICATION TO NURSING EXCELLENCE 2017

### **ER**

**Certified Emergency Nurse**  
Campbell, Kelly  
Dionio, Pearl  
Eastman, Arlene  
Gerardo-Floresca, Lucila  
Gonzalez, Sajara  
Lopez, Anicia  
Lopez, Michelle  
Morales, Annette  
Newman, Stacy  
Notarfrancesco, Dianne  
Nystrand, Bethany L.  
Palomino, Karen  
Rosario, Melissa  
Scaletti, Tracy  
Villapando, Kristine  
Wilson, Cecelia

### **Certified Emergency Nurse & Medical Surgical Nursing**

Rodriguez, Juan  
**Progressive Care Nursing Adult**  
Hernandez, Diana

### **Certified Emergency Nurse, Certified Pediatric National Certification & Certified Critical Care Nurse**

Rin, Jorge  
**Neurovascular Registered Nurse Certification**  
Yoo, Helen

### **Certified Emergency Nurse & Certified Critical Care Nurse**

Olari, Adrian  
Westbrook, Eric  
**Medical Surgical Nursing Certification**  
Mangarelli, Katherine

### **Certified Emergency Nurse & Neurovascular Registered Nurse Certification**

Amorino, Dana  
Dejoya-Campanar, Cristina  
Kaczka, Darlene  
**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 Nurse**  
Loo, Kelly

### **Certified Nurse Operating Room**

Cabalfin, Senen  
Currie, Tami  
Dibello, Patricia  
Reyes, Romana  
Santos, Zenith-Cef  
Vellon, John  
Weaver, David

### **Certified Clinical Perfusionist**

Braswell, Deborah  
**Same Day Surgery**  
**Medical Surgical National Certification**  
Kokila, Shah

### **Endoscopy**

**Medical Surgical National Certification**  
Ligon, Luminada Loma  
**Cardiac Cath Lab**  
**Certified Critical Care Nurse**  
O'Donnell, Regina Lumibao  
Quiambao, Cherielyn  
Kulvicas, Jolanta

### **Certified Nurse Operating Room**

Semenoff, Larissa  
**PACU**  
**Certified Post Anesthesia Nurse**  
Aguirre, Lita Nina  
De Nieu, Madonna  
Larobis, Carmencita  
Mangubat, Maluz  
Uy-Villa, Maryan

### **Certified Post Anesthesia Nurse & Certified Emergency Nurse**

Sequio-Manaois, Maria Gina  
**Certified Critical Care Nurse**  
Caparos, Sylvia  
Dela Pena, Susan  
Gagarin, Flordeliza  
Lusara, Marcelina

### **Critical Care Division ICU/CVU**

**Certified Clinical Nurse Leader**

Mustafa, Shaden

### **Certified Critical Care Nurse & Certified Clinical Nurse Leader**

Darius, David  
**Certified Critical Care Nurse**  
Bautista, Ben  
Benito, Joy  
David, Lisa  
Dela Cruz, Carolyn R  
Druvhag, Anna  
Evans, Alysa  
Gordon-Lyles, Devon  
Hamdulla, Leonie  
Idrobo-Campos, Nelly  
Marcin-Neola, Viorica  
Melendez, Julia  
Narvaez, Nena B  
Noronha, Prema  
Rajaram, Calowtie  
Redondo, Mary  
Stillwell, Robert  
Terry, Geraldine  
Vales, Renee  
Villamil, Luisa

### **Neurovascular Registered Nurse Certification**

Kho, May  
Sarkis, Lavia  
**Certified Critical Care Nurse & Medical Surgical National Certification**  
Pagaduan, James

### **Certified Critical Care Nurse, Neurovascular Registered Nurse Certification & Advance Nurse Practice Certification**

Patel, Viloki  
**7E Medical Surgical**  
**Neurovascular Registered Nurse Certification**  
Bobadilla, Frank  
Orrico, Stefanie  
Oseagula, Justina  
Patel, Ankita  
Ramos, Bernadette

### **Certified Medical Surgical RN & Neurovascular Registered Nurse Certification**

Villacarlos, Jessette  
**WCC Wound Care Certified**  
Tabaka, Valentyna

### **7W Medical Surgical**

**Medical Surgical National Certification**  
Ondick, Irene  
Robert Akal  
**Certified Medical Surgical RN**  
Chin, Joycelyn  
Clark, Timothy  
Owusu-Sekyere, Richard  
Patel, Anitaben  
Villafior, Sonia

### **Medical Surgical Nursing Certification**

Roberts, Rachel  
Willams, Anita  
**6W Medical Surgical**  
**Orthopedic Nurse Certified**  
Ajose, Elenita  
Bhattacharya, Mounita  
Desai, Khushbu  
Madasz, Janis  
Johnson, Bernadette  
Pampo, Angelique  
Regis, Kathleen  
Suening, Fredaleen  
Tripathi, Gita

### **Medical Surgical National Certification**

Vergara, Leonida  
**Orthopedic Nurse & Medical Surgical National Certification**  
Ryan-Giglio, Bernadette  
Amelia Blanco  
Palces, Trijida  
Megloranza, Concordia  
Candalla, Olivia

### **The Orthopedic Institute**

**Advance Practice Nurse Certification**  
Nancy Frederic  
**Wound Care Program**  
**Certified Wound, Ostomy & Continence**  
Brogna, Luanne

### **6E Telemetry**

**Medical Surgical National Certification**  
Beating, Sara  
Degaun, Susan

Deleon, Luzviminda  
Devera, Vicky  
Gonzalez, Rosemarie  
Platero, Jenina  
Tangalin, Rolando  
Vallo, Aurea

### **Medical Surgical RN Certification**

Corpuz, LuzMarlou  
**5 East Peds/Obs**  
**Certified Medical Surgical RN**  
Demesa, Abigail  
Fuentes, Zenaida

### **Cardiac Vascular Nursing**

Abrams, Hermela  
**Medical Surgical National Certification**  
Bacunawa, April  
Bovgiry, Tatiana

### **Maternal Child Health Division**

**Nurse Executive, Inpatient Obstetric Nursing & Electrical Fetal Monitoring Certification**  
Vilceus-Talty, MarieKarl  
**4W Labor and Delivery**  
**Certified Breastfeeding Counselor**  
Williams-Namyslak, Sharon  
Powell, Tianna

### **Inpatient Obstetric Nursing Certification**

Chang, Chi Yuan  
Martinez, Libertad  
Taraski, Barbara  
**Inpatient Obstetric Nursing & Breastfeeding Counselor Certification**  
Orrico, Aurora  
Villagas, Yvette

### **Inpatient Obstetric Nursing, Electronic Fetal Monitoring, & Childbirth Educator Certifications**

DiRubba, Andrea  
**Inpatient Obstetric Nursing, Electronic Fetal Monitoring, & Breastfeeding Counselor Certification**  
Tevari, Jean

### **Inpatient Obstetric Nursing & Childbirth Educator Certification**

Ferdinand, Helen  
**Medical Surgical National Certification**  
Co, Maria Lusitania  
**Inpatient Obstetric Nursing & Electronic Fetal Monitoring Certification**  
Jarrett-Hery, Natak

### **4E Mother-Baby**

**Maternal Newborn Nurse Certification**  
Glover Marie  
Major, April  
Alves-Monia, Laura

### **Inpatient Obstetric Nursing Certification**

Abita, Alarcon  
Aboubakar, Sarah  
**Certified Breastfeeding Counselor**  
Alcantara, Maria Victoria  
Alvarado, Marilyn  
Fuller, Karen  
Gao, Maggie  
Gongora, Kerole  
Muneshwar, Shellmie  
Rios, Eufemia  
Tavares, Brandi

### **Maternal Newborn Nurse Certification & Certified Breastfeeding Counselor**

Aborde, Cielo  
Hernandez, Melissa  
Santos, Janel  
**Medical Surgical National & Breastfeeding Counselor Certifications**  
Castro, Yamila

### **Electronic Fetal Monitoring Certification**

Horn, Michelle  
**Maternal Newborn Nursing Certification & International Board Certified Lactation Consultant**  
Major, April

### **International Board Certified Lactation Consultant**

McCaun, Safiyaah  
Sutaria, Tulasi  
**NICU**  
**Neonatal Intensive Care Certification & Certified Breast Feeding Counselor**  
Almuete, Cyrida  
Dela Cruz-Torress, Jocelyn

Dungee, Leah  
Jodar, Meredith  
Wojewoda, Patrycja

### **Neonatal Intensive Care Certification**

Aure, Aure  
Ayala, Tara  
Beebe, Kathleen  
Bradson, Odahs  
Caraballo, Damaris  
Cerdan, Josephine  
Chen, Mitchell  
Del Rosario, Lisa  
Jenkins, Latina  
Laranjo, Gina  
Rebuston, Roselita  
Samson, Lucila  
Singh, Amanda  
Slagocka, Elzbieta  
Snell, Carmen  
Tinimbang, Nilda

### **Maternal Newborn Nurse Certification & Certified Lactation Consultant**

Barone, Nicole  
**Low Risk Neonatal Nurse Certification**  
Anthony-Garnett, Gwendolyn

### **Certified Breast Feeding Counselor**

Dicken, Samantha  
Gonzales, Feliza  
Hernandez, Melissa

### **Neonatal Intensive Care Certification & Certified Lactation Consultant**

Tikhonov, Olga  
**Certified Lactation Consultant**  
Stankovicova, Erika  
Morales Sotio, Jennifer

### **Nursing Professional Development & Perinatal Nursing Certification**

Morales, Michelle

### **Behavioral Health Services**

**Psychiatric and Mental Health Nurse**  
Babu, Babitha  
Bray, Selina RN-BC  
Cardoso, Jennive  
Davis, Taneja  
Fay, George  
Johnson, Blythe  
Pamintuan, Cynthia  
Santiago, Pamela  
Santos Kevin  
Silva-Bennett, Carmen  
Vales, Rossana

### **Psychiatric and Mental Health Nurse & Clinical Nurse Specialist**

**Pediatric Nursing**  
Paredes, Marlene  
**Adult Psychiatric -Mental Health Clinical Nurse Specialist**  
Santiago, Pamela

### **Education Center for Professional Development**

**Nurse Executive Certification & Certified Emergency Nurse**  
Lopez, M. Michele

### **Certified Critical Care Nurse & Advance Practice Nurse Certification**

Monteith, Marc  
**Nursing Professional Development & Medical Surgical Nursing Certification**  
Samuel, Ebony

### **Advance Practice Nurse Certification, Medical Surgical Certification & Neurovascular Registered Nurse Certification**

Landa, Yelena  
**Certified Post Anesthesia Nurse & Orthopedic Nurse Certified**  
Genille, Linda

### **Neonatal Intensive Care, Professional Development Certification, & Certified Breast Feeding Counselor**

Dickerson, Michelle  
**Risk Management**  
**Certified Professional in Healthcare Risk Mgmt & Medical Surgical Nursing Certification**  
Caldas, Karen

### **Nursing Administration**

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

### **Performance Improvement**

### **Nurse Executive, Certification for Professionals in Patient Safety, Healthcare Accreditation Certification, Orthopedic Nurse Certified, Gerontological Nursing, Medical Surgical Nursing Certification**

Hall, Brenda  
**Certified Rehabilitation RN**  
Rosenzweig, Bonnie

### **Oncology**

**Certified Critical Care Nurse & Advance Practice Nurse Certification**  
O'Leary, Joan

### **Care Coordination & Transition Management Certification**

Brown, Ingrid  
Perez, Diana  
**Medical Surgical National Certification**  
Labutong, Maribel

### **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 Emergency Nurse & Trauma Cert Registered Nurse**  
Palestis, Kimberly

### **Certified Conference Care Nurse, Certified Wound, Ostomy & Continence**

Lejarde, Marie Estelle  
**Certified Wound Care**  
Tabaka, Valentyna

### **Infection Control**

**Certified Infection Control**  
DeChirico, Victoria

### **Stroke Program**

**Neurovascular Registered Nurse Certification**  
Murray, Dan  
LaFlam, Theresa

### **Float RNs**

**Medical Surgical National Certification**  
Mones, Shirley  
**Oncology Certified Nurse**  
Rabara, Norma

### **Certified Tobacco Treatment Specialist & Certified Navigator Breast Nurse**

Ashley, Michelle  
**Oncology Nurse Certified & Certified Medical Surgical RN**  
Autar, Bashkarnand

### **Renal**

**Certified Nephrology Nurse**  
Bondoc, Nerissa  
Corpuz, Rolando  
Gelcane, Venerando  
Marasigan, Josefina  
Pitao, Isabella  
Rada, Margarita

### **Advance Practice Nurses**

**Certified Registered Nurse Anesthetists**  
Baron, Samuel  
Campbell, Shanna  
Chua, Andrew  
Cottle, Susanne  
Cowan, Elliott  
Dehelen, Donna  
Diobera, Diaba  
Dobres, Catherine  
Duncan, Keesha  
Espinosa, Benedicta  
Garabed, Ronald  
Garcia, Gilyn  
Gray, Courtney  
Koch, Carl  
Konrad, Jaime  
Lucas, Alfredo  
Mallon, Kelly  
Prendergass, Fred  
Quiroga, Karol  
Samaniego, Danielle  
Taha, Vanessa  
Ying, Diana

### **Nurse Practitioners**

Asuncion-Colonna, Dora A.  
Bernardo, Maria  
Bernardo, Mary  
Cabill, Sharon  
Ciccarelli, Sheryl  
DelaCruz, Lea  
Di Brita, Franca  
Drahtler-Gold, Florence

Dunkley, Sherene T.  
Farley, Pamela  
Fox, Adrian F.  
Gripenburg, Tara  
Jaraba, Michelle  
Jeffers, Yana  
Lawrence, Natasha R.  
Lladas, Mark Angelo  
Manchery, Jessymol  
Marquet, Judith  
McCarthy, Jayne  
Monpere, Marina  
Orphelia, Lisa  
Park, Seongae  
Pennel, Lori  
Petropoulos, Lisa  
Reyes, Mai-Ling  
Small, Tracy  
Suarez, Odette  
Tanganon, Eliza  
Walsh, Jessica  
Willphine, Mini  
Wood, Chelsea  
Young, Devon  
Zadel, Janis  
Zamber-Costello, Lisa  
Zaorski, Michelle

### **Nurse Midwife Certification**

Lander, Sonia V.  
Meneguzzo, Leslie D.  
Peard, Melissa

### **Inpatient Obstetric Nursing & Nurse Midwife Certification**

Gray, Suzette

### **Advance Practice Nurse & Certified Critical Care Nurse**

Maniar, Reshma

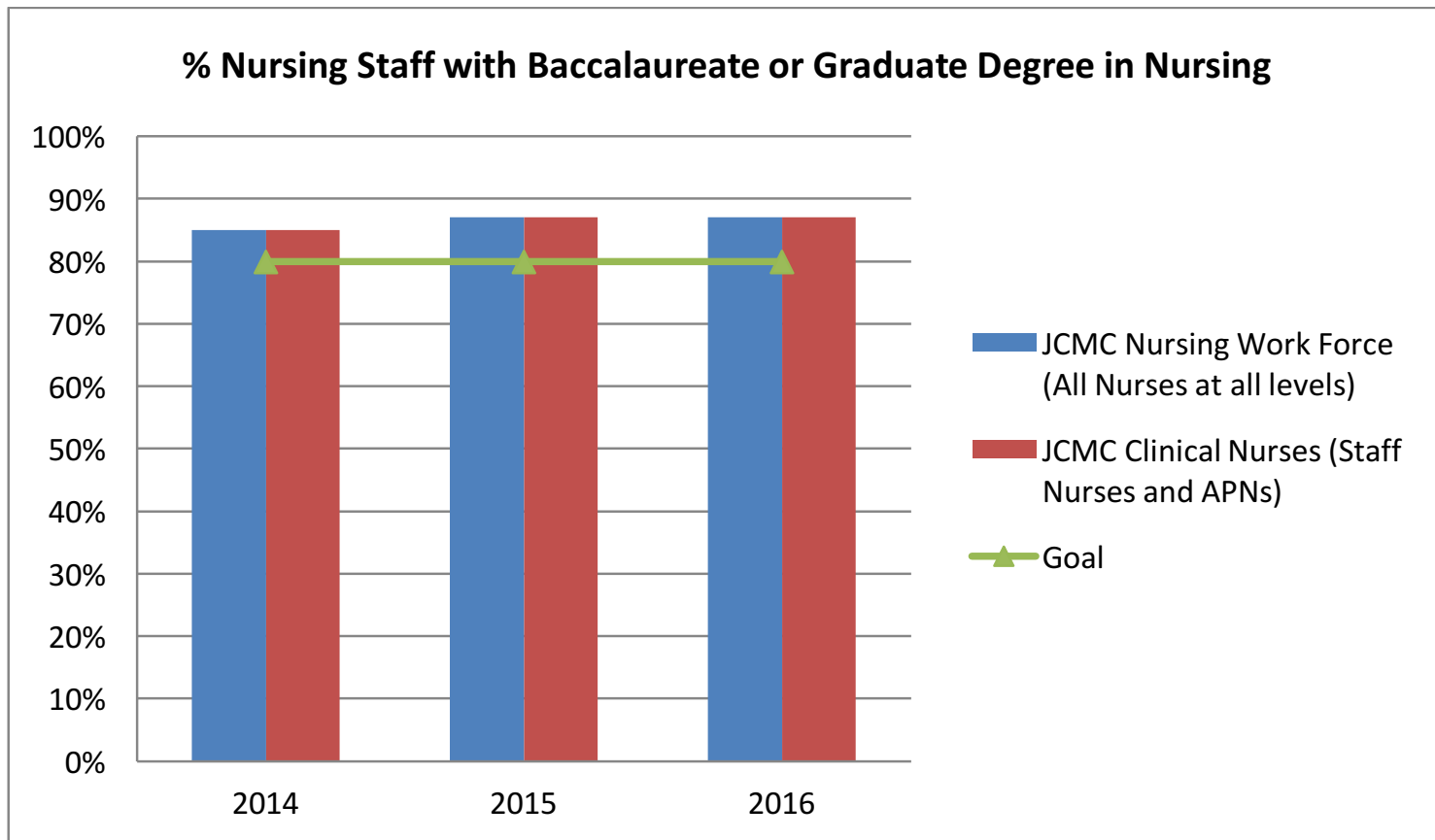


## Increasing the number of nurses with BSN and higher degrees

In accordance with the IOM report, The Future of Nursing (2010), Jersey City Medical Center values the importance of developing and sustaining a nursing workforce that is equipped to meet the challenges of today's health care delivery system. To maintain compliance with the IOM report's vision of increasing the proportion of nurses with baccalaureate degrees by 80 percent in 2020, the following goal was established:

- Sustain and maintain a nursing workforce that comprises of greater than 85% baccalaureate or graduate degree nurses employed at JCMC

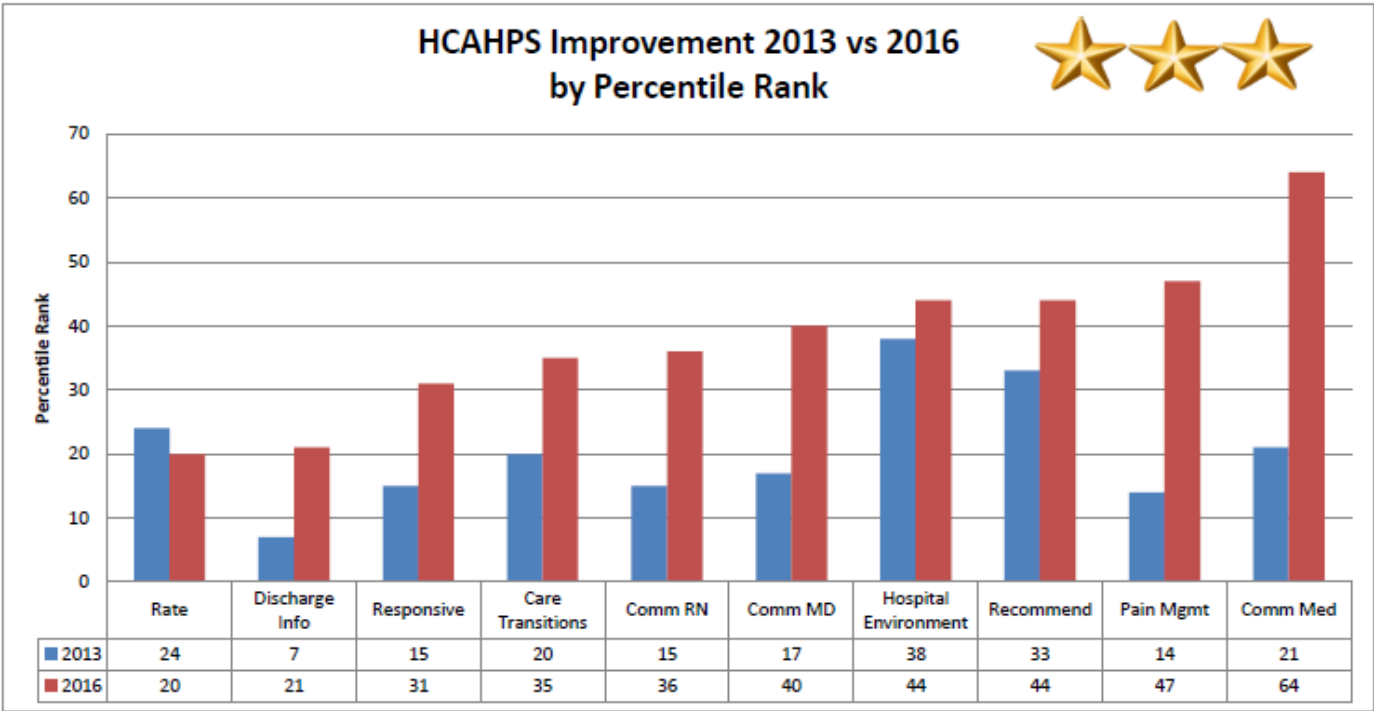
JCMC's commitment to this goal is evident in the Nursing Strategic Plan and in the current level of 87% of nurses having a Baccalaureate Degree.





# Engagement Highlights 2016

Under the leadership of Margaret Ames MPA, BSN, RN, NEA-BC, Associate Vice President of Nursing Operations, the Directors of Nursing and all nursing staff, our improvements in patient experience have moved JCMC to a 3 star recognition with CMS.



The majority of our units out-performed the mean in the four nurse sensitive questions required for Magnet designation.

Ambulatory Services improved the overall rating mean from 90.9 to 92.2, making JCMC the most improved in the system in this category.

Behavioral Health patient engagement is an exemplar, achieving an overall rating in the top decile.

Our Magnet Engagement Council Chairs participate in the hospital Engagement Council which provided alignment of goals and tactics with the RWJBH Prescriptive Plan for Engagement, resulting in the achievements outlined above.



Nurses as Preceptors

The Preceptor Course was held several times throughout 2016. Nurses attending represented various clinical nursing units having different levels of experience. We introduced the inception of the Preceptor Council which was developed in efforts to support our current and future preceptors to navigate through the preceptorship experience successfully. The first Preceptor Council meeting took place on April 29, 2016 with future dates to follow. The Preceptor Council is a forum “which will enable experienced nurses to apply knowledge, skills and tools required to be an effective preceptor of new staff and nursing interns within Jersey City Medical Center. With a view to meeting magnet standards and utilizing evidenced-based practice, we will effectively facilitate the competency of the new nurse.” (ANCC, 2014). The purpose of the Preceptor Council is to serve as an outlet to:

- 1) Exchange of ideas between preceptors
- 2) Open discussion on problem solving, communication skills and adult learning styles
- 3) Discuss measurable goals for the nurse orientees and nurse residents

2016 Members
Ashley Pianko
Barbara Pangilinan
Frank Bobadilla
Rossana Vales
Lita Aguirre
Regina O'Donnell
Melissa Hernandez
Christina Campaner
Linda Gentile
Ebony Samuel
Advisors
Dr. Joanne Reich
Dr. Mabel LaForgia

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

# Nurse Residency Program

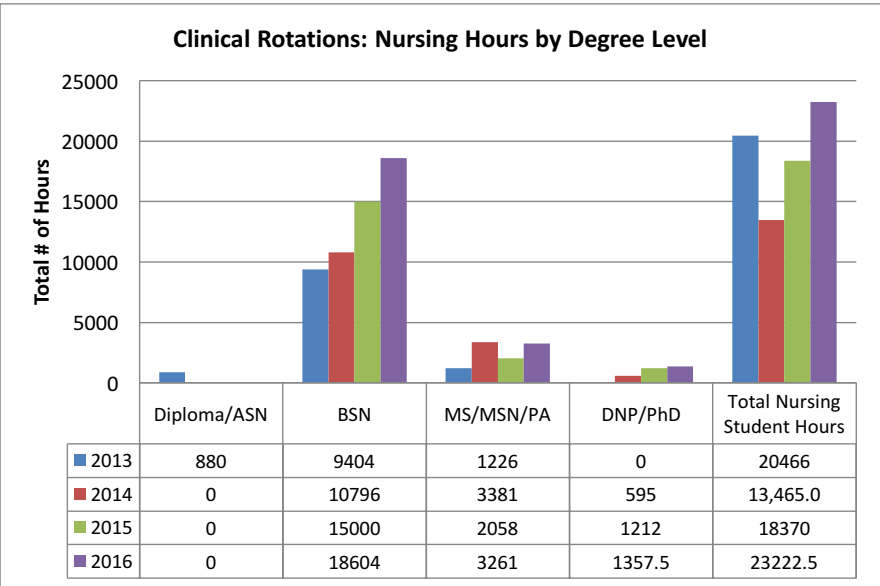
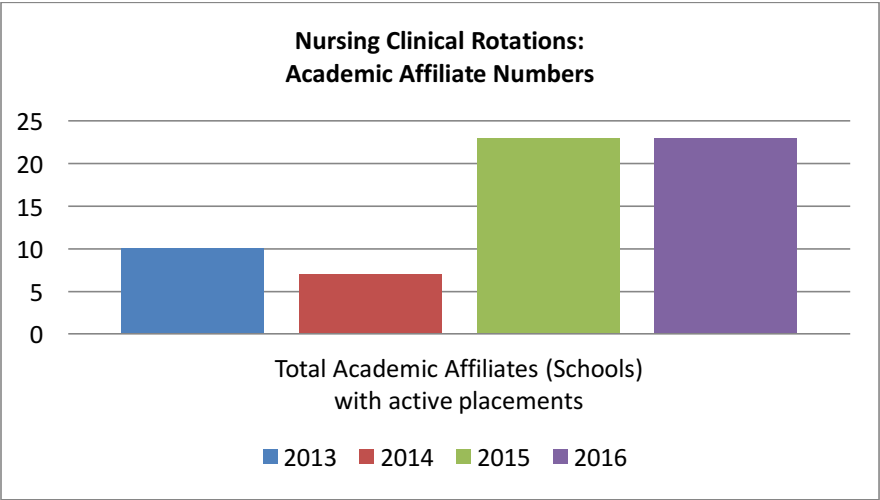
## Opportunities to Explore Formal Education Program

Through the Educational Center of Professional Development (ECPD) many opportunities to explore formal education are provided to nurses year round. JCMC has partnered with several universities and colleges to provide onsite support, and recruitment. Opportunities are provided for RNs to meet with college and university recruiters to discuss various academic programs. Representatives from traditional, online, and hybrid nursing programs have provided dedicated time on several occasions during lunch hours, Registered Nurse Orientation, competency fairs, shared governance council meetings and at the point of care. A Nurse Navigator from the NJ Action Coalition, whose main role is to assist nurses further their academic progression, has also provided dedicated time onsite to assist nurses navigate through various academic opportunities. These strategies are very well received by the nursing staff at JCMC.

## Increase in Academic Affiliations for Clinical Rotations

Currently JCMC has active academic affiliations agreements for BSN and MSN clinical rotations with 23 academic colleges and universities. This number of nursing academic partnerships and the number of nursing clinical rotation hours at the BSN and MSN level has increased steadily since 2015.

In 2014, JCMC decided to align its nursing affiliations with JCMC’s hiring practices and declined requests for new affiliations agreements with diploma and associate degree programs. The single remaining local diploma school of nursing contract was honored through the expiration date.



## Academic Partnership: New Jersey City University HRSA Grant Nurse Residency Program

JCMC supports seamless academic progression from the Associates to Baccalaureate nursing practice through our partnership with New NJCU on the HRSA grand-funded RN-BSN Nurse Residency Program. The goal of this Nurse Residency Program is to unite theory and practice simultaneously and develop prepared professional minority nurses for the workforce. JCMC worked collaboratively with NJCU to develop the program during the winter of 2014, and was approved for a 3 year grant in 2015. This program promotes RN-BSN transition into practice for ethnic minorities from Essex and Passaic Counties. This is solely for licensed RNs currently enrolled in the NJCU RN-BSN program, and offers credit hours to the students for the experience. Grant requirement include 900 clinical hours on site (at least 24 hours per week not to exceed 40 hours per week) at JCMC. Consistent support and mentorship is provided to the students by both the JCMC nurse preceptors and Nurse Residency Program Coordinators. An initial cohort of 7 students completed their residency experience in August of 2015, and successfully graduated with the Bachelor of Science in nursing degree. A second cohort of 7 students was accepted in November of 2015 and began their clinical residency in January of 2016. The third cohort of 9 students was accepted to begin residency in January 2017.



*The 2016 NJCU nurse residents' graduation held on August 3, 2016*

## The 2016 NJCU nurse residents and their nurse preceptors at JCMC are:

Name		Unit/Preceptor(s)
Fabiana Alvarez, RN	7 West	Jocelyn DeLeon, BSN, RN
Bedelyne Barthelus, RN	6 West (N)	Angelique Pampo, BSN, RN
Shakeira Braddy, RN	L&D	Elizabeth Jardines, BSN, RN
Alexa C Martinez, RN	L&D (N)	Sara Aboubakar, BSN, RN
Daniel Munoz, RN	ED	Antonio Viera, MSN, RN
Patricia Okorie, RN	PACU	Linda Gentile, BSN, RN
Naderge Zacharie	L&D	Salemat Sow, BSN, RN

## Academic Partnership – Rutgers University College of Nursing BSN to DNP

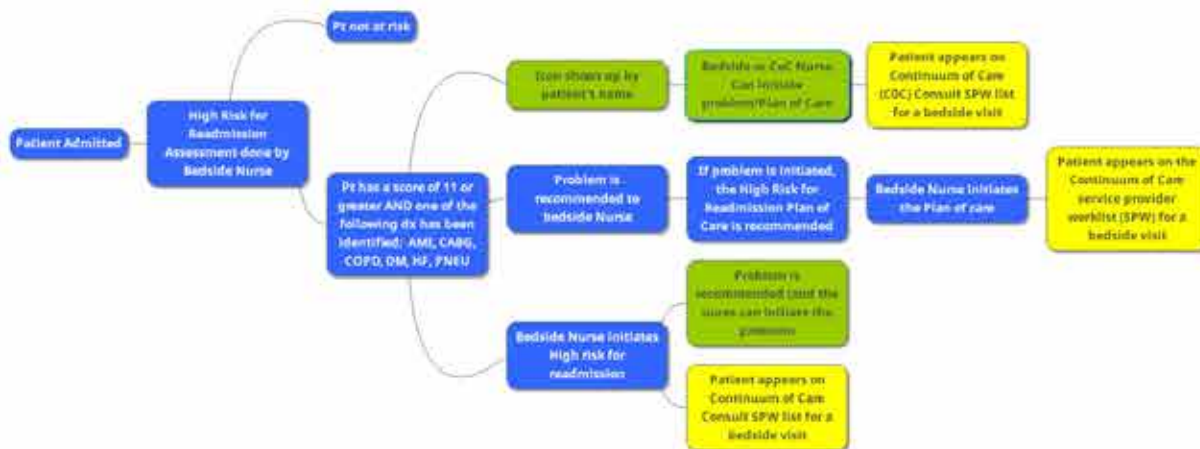
We also have a partnership with Rutgers University for their BSN-DNP program. This 12-week residency promotes immersion and transition into practice for the APRN/DNP role. Students receive credit hours for their experience. In 2015, four doctoral students were accepted into the 12-week organizational immersion experience at JCMC. Upon completion, they continued their learning through direct APRN preceptorships at JCMC's 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.





## CONTINUUM OF CARE CENTER

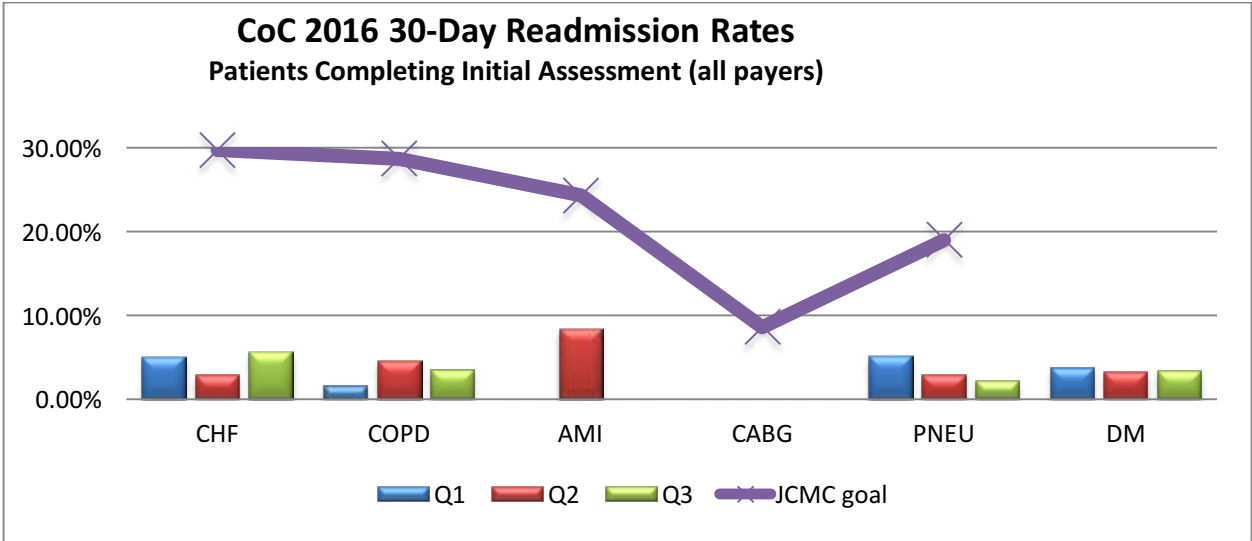
The Continuum of Care Center (CoC) continues to empower patients and their families to become our partners in managing their health after discharge while promoting lifestyle changes thereby improving patient outcomes and reducing readmissions. The program supports patients' safe transitions to home with an evidenced based program with four stages of telephonic outreach (Naylor, et. al, 2011). The CoC actively contributes to the success of the Nursing Strategic Plan's domains of improved medication management for improved transitions of care. The CoC welcomed into the team two Nurse Care Advisors: Maribel Labutong BSN, RN in July 2016 and Elisa Martinez (BSN, RN) in December 2016. The following algorithm depicts the process CoC utilizes to identify and to connect with patients at high risk for hospital readmission.



As of December 2016, the CoC called 1651 patients. The percent completion for the first stage has increased from 62% in 2015 to 70% in 2016. During the post discharge phone call patients receive assistance with medication management and scheduling appointments and transportation to their primary care provider.

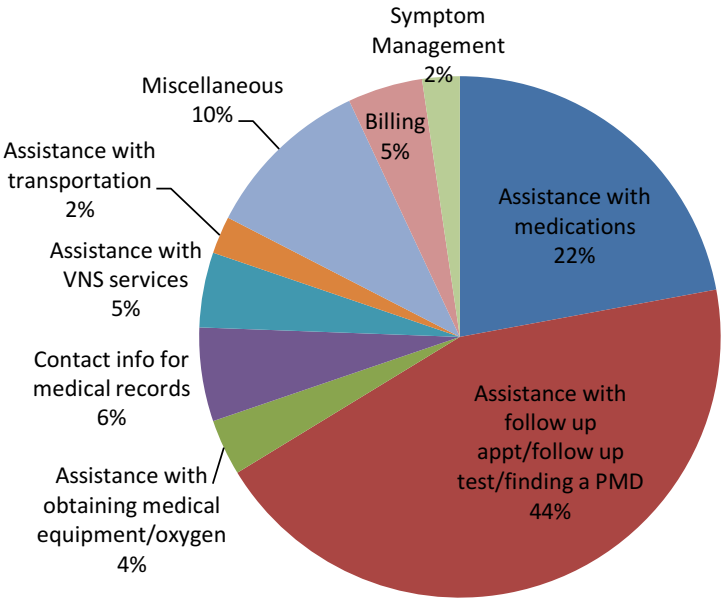
Naylor, M.D., Aiken, L.H., Kurtzman, E.T., Olds, D.M., and Hirschman, K.B. The importance of transitional care in achieving health reform. Health Affairs, 30, no.4 (2011) : 746-754.

CoC 2016 30-Day Readmission Rates for patients, all payers by Quarter -Patients completing initial assessment



The Continuum of Care Center also supports patients’ caregivers for post discharge care coordination needs. The NJ CARE (Caregiver, Advise, Record and Enable) Act is a law requiring hospitals to allow patients to identify a person whom they choose to assist in any after-care that the patient may need at home. The designated caregiver can be family, friends, spouse, partner, neighbor or anyone who has a significant relationship with the patient. Caregivers assist patients with many day-to-day care activities such as managing medication schedules/administration, providing wound care, operating equipment and other health maintenance tasks. The CARE Act went live at JCMC in May 2015 and throughout 2016, CoC provided caregiver support in various domains noted.

**Reasons for Inbound Calls to JCMC CoC Team:  
Jan-Aug 2016**



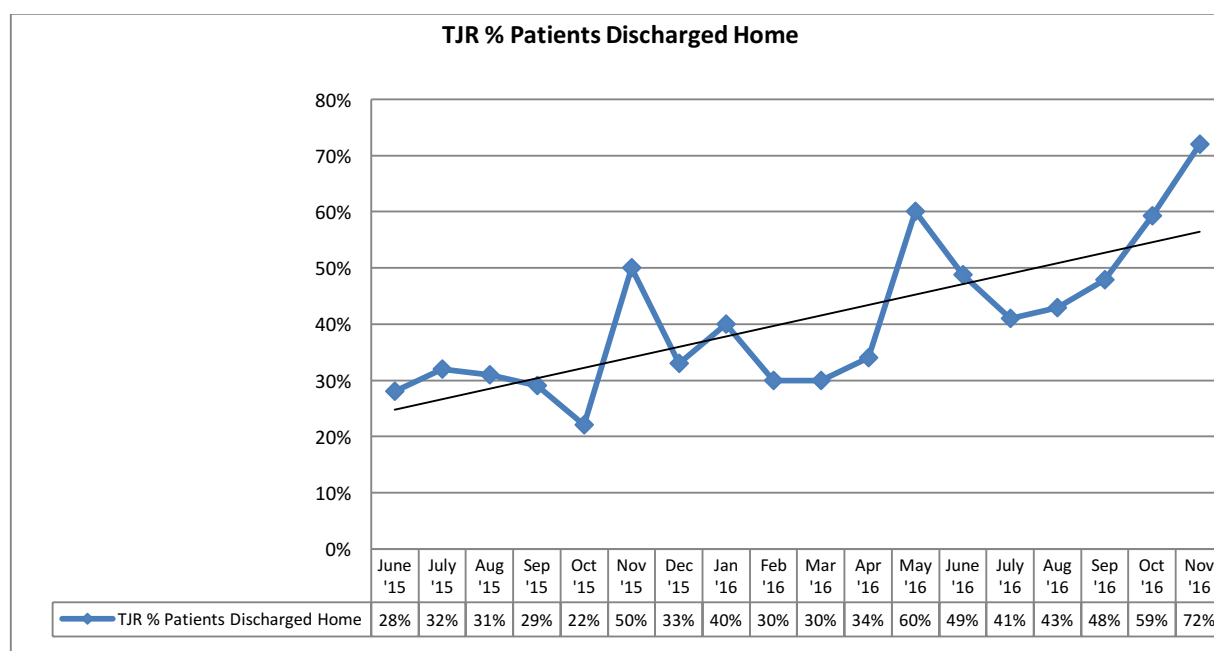
## Home after Orthopedic Surgery

The Orthopedic Institute (TOI) continues to provide services to spans the continuum from pre-hospitalization to post acute care for patients scheduled for Total Hip Replacement (THR) and Total Knee Replacement (TKR) Surgeries. These services focused on coordination of pre-admission testing, weekly pre-hospitalization patient education classes, patient navigation throughout hospital stay, and post discharge follow up aimed at optimal outcomes and reduced readmissions. The following 2016 strategies/initiative described below were instrumental in improving the safe transition of patients from the hospital to home.

A comprehensive preoperative joint replacement patient education course was developed and implemented for patients and their family member or friend, identified as the patients “coach” during the recovery process. The interdisciplinary team lead by Nancy Frederic MSN, APN and Elenita AJose BSN, RN, Director of 6 West, along with Susan Murphy BSN, RN, Jodi Gittleman, MA, CCC-SLP, Claudia Monterrosa, LSW and Dr. Frank Liporace, Chairman of Orthopedics. The comprehensive joint replacement course occurs every Thursday and is scheduled on the same day as the patient’s preadmission testing to ensure optimal care coordination.

Specific aspects of nursing care that are discussed include administration of medication, adequate and timely rendering of care, assistance with ADLs, and procedures to ensure safety. The Case manager discusses patient discharge related concerns and the patients are provided with information about resources available to them in the hospital and in the community. A home self assessment checklist is provided to the patients in order for the social worker and case manager to properly gauge the needs of the patient at home, and whether discharge to a facility is necessary. The assessment includes identification of a coach and primary care giver at the home, and also a brief description of the living environment including amount of steps and type of bathroom. This information is used to anticipate patient needs and provide all homecare equipment including shower chairs, commodes, walkers and canes.

Lastly, signs and symptoms of complications are discussed, as well as prevention methods for each complication in order to ensure compliance. The last portion of the class is an open discussion forum, at which point an all-question follow-up is provided, and oversights are identified. The patients are given time to speak one on one with the Nurse Manager Nancy Frederic in order to address any private concerns , such as lifestyle changes they may have to undergo and other intimate matters.



## Community Outreach

Academic Community Outreach Event – The Academic outreach event was held on August 10, 2016 from 5:30 to 7:30pm in the JCMC Cafeteria. This event highlighted 14 nursing specialties presented by nursing staff and 4 Academic Institutions. This event was attended by 43 members of the community interested in learning about academic programs for entry into nursing. JCMC nurses welcomed each attendee and introduced them to the nursing profession. Each nursing specialty and Academic setting had their own table display and presented their specialty via oral presentation or poster presentation.



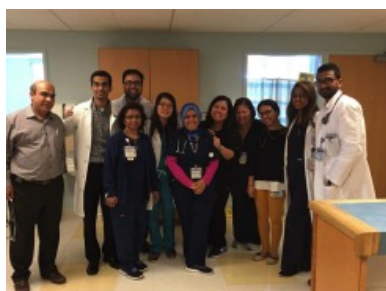


## Oncology Services

Under the collaborative leadership of Joanie O'Leary, MSN, AGPCNP-BC, CCRN-K, OCN, Director of Oncology Services and Irene Ondieki MSN, RN-C, Director of 7 West and 7 East, significant accomplishments were achieved in attaining excellence in oncology nursing practice. Throughout 2016, nurses from the Infusion Center and 7 West continued to achieve Chemotherapy/Biotherapy certification. Additionally, two nurses achieved national Oncology Certification Nursing Corporation (OCN) board certification and the Oncology Nurse Navigator attained national, NCBC certification.

Throughout the year, 15 community outreach events were held to provide education and support to community members and their loved ones lead by Michele Ashley and Joanie O'Leary with our nurses participating. Below are some highlights of the events.

### 7W Inpatient Oncology



### Jersey City Community Navigator

- Completed training as a community navigator for the office of welcoming community
- Volunteers to connect immigrants and refugees to services in Jersey City



### Lung Cancer Screening Program

- ACR Accreditation
- Nurse Navigators are Certified Tobacco Treatment Specialists
- Free Baseline Screening
- Collaboration with NJ Quit Line and ACS



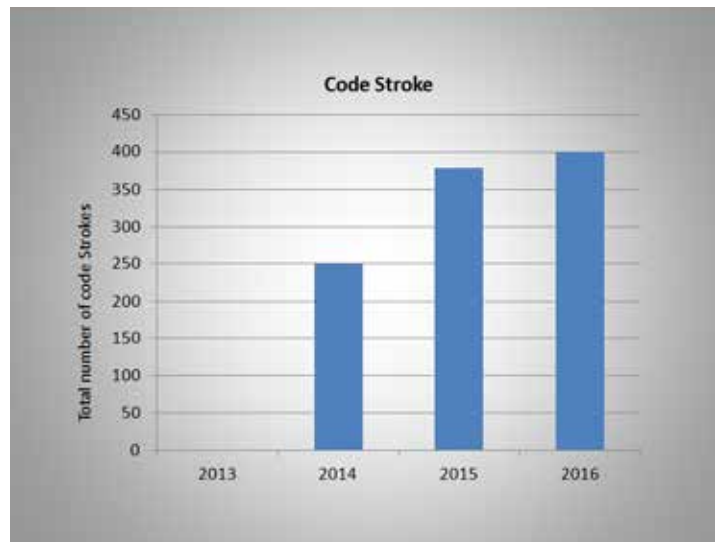
### First Annual Survivorship Symposium





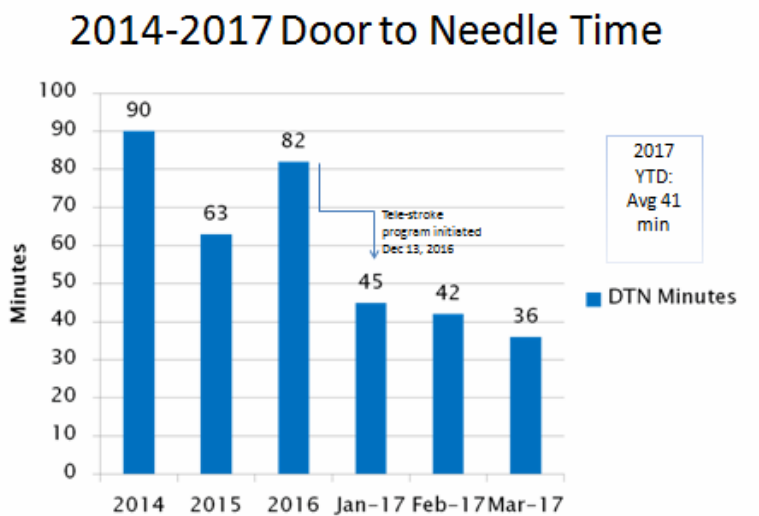
## The Stroke Program

The Stroke Program continued to provide prompt evidenced base care to patients and in 2016 expanded to include Teleneurology services. The multidisciplinary program, lead by three nurse leaders; Varsha Singh APN-C, Theresa LaFlam BSN, RN, NVRN-BC, and Dan Murray RN, NVRN-BC provided care to a total of 356 patients with stroke or stroke symptoms, increased from 2015.



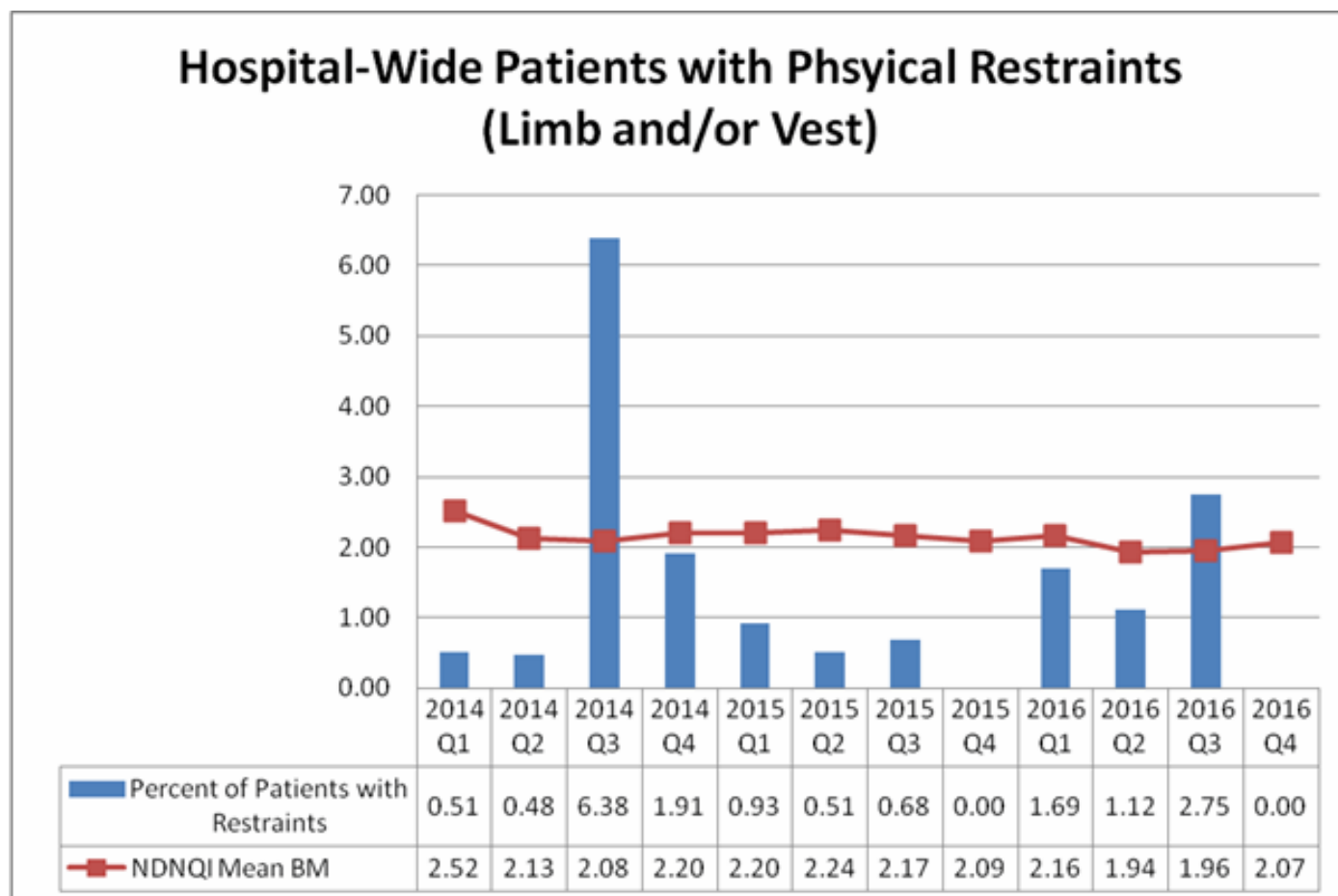
Education on evidence based stroke care, consistent with the American Heart Association and the American Stroke Association was provided to residents and nurses. Outreach education was provided to members of the South Asian community by Dan Murray RN, Varsha Singh APN-C, and Dr. Kahn in May and in November.

In collaboration with Robert Wood Johnson (RWJ), Teleneurology Services for Code Stroke was introduced to Jersey City Medical Center. Following policy revisions and extensive training for medical, nursing and radiology staff; Teleneurology Services went live on December 13th and has resulted in decreased door-to-needle times for patients receiving tPA administration.



## Decreasing Patient Restraint Utilization

Improving outcomes related to restraint usage in the adult medical surgical and behavioral health population continued in 2016. Nursing staff continue to reduce restraint usage with some units having been successful in eliminating restraint usage in accordance with our values of patient and family centered compassionate care. Nurses collaborate with medical staff, clinical staff and patients and families. Restraint prevalence continues to be 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, Behavioral Health RN 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 seven consecutive quarters.



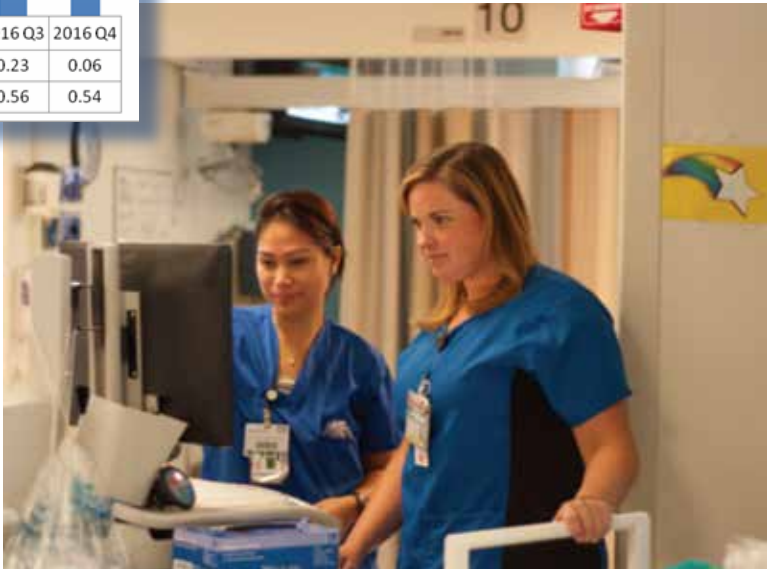
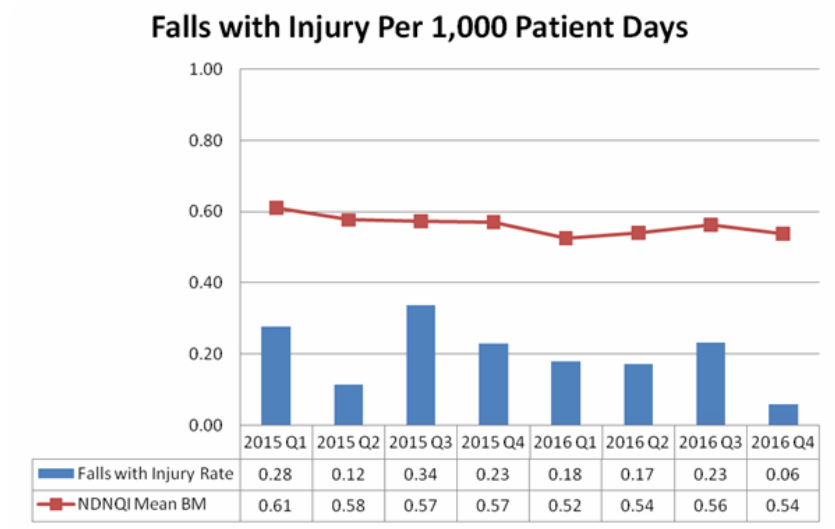
# Reducing Patient Falls

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, BSN, RN and Claudia Garzon-Rivera, DNP, RN, CNL and nursing leadership and nursing staff from all Units, made several evidence-based practice changes that lead to decreasing the number of falls in some areas. In 2016, the following areas, 6 West Surgical Unit, under the leadership of Elenita AJose BSN, RN, ONC, the Medical Intensive Care Unit with the leadership of Cristina Simeone BSN, RN and the 5 West Behavioral Health Unit, lead by Selina Bray MSN, RN-C, each ended the year under the NDNQI benchmark for falls. The Falls with Injury rate was maintained below the NDNQI benchmark for eight consecutive quarters and is noted below. 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 strive to eliminate falls.

Hill, A., Hoffman, 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

Quigley, P. A. & White, S. V. (2013). Hospital-based fall program: Measurements and improvement in high reliability organizations. *The Online Journal of Issues in Nursing*, 18(2). doi: 10.3912/OJIN.VOL18NO02MAN05



## Prevention of Hospital Acquired Pressure Ulcers

Jersey City Medical Center takes pride in enhancing the lives of its patient population by providing evidence-based, safe, quality care in achieving the best outcomes. The hospital measures several nursing quality indicators and participates in performance improvement initiatives, of which the prevention of hospital acquired pressure ulcers (HAPU) is included. Hospital acquired pressure ulcers are nursing sensitive indicators which are, for the most part, avoidable. Nurses can implement best practices to prevent the incidence of hospital acquired pressure ulcers. To monitor and nationally benchmark hospital acquired pressure ulcer rates, Jersey City Medical Center participated in National Database of Nursing Quality Indicators (NDNQI) pressure ulcer prevalence study on quarterly basis.

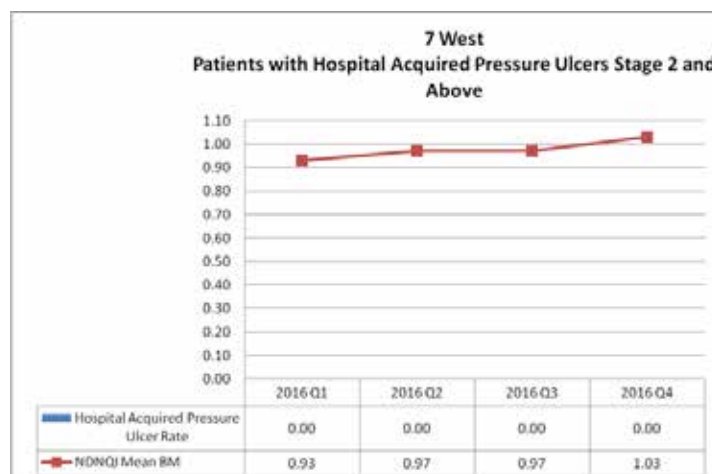
Evidenced based practices are essential to providing optimal skin care for all patients. Luanne Brogna MSN, RN, CWOCN and Valentyna Tabaka, MBA, BSN, RN, WCC work closely with all nurses through daily patient rounding and provision of education. In 2016, with the leadership of Irene Ondieki MSN, RN-C, Director of 7 East and West, the nurses' steadfast commitment of prevention of hospital acquired pressure ulcers was evident by the Unit having achieved zero hospital acquired pressure ulcers for the year. Several evidenced based practices implemented in 2016 included updated education on wound staging and the new NPUAP pressure injury definitions, evaluation and introduction of a new silicone prevention dressing, updated wound care



policies, and successful proposal for implementation of new beds for improved pressure redistribution surfaces resulting in new beds arriving at Jersey City Medical Center as of July 2016.



Congratulations to the 7 West Unit nursing staff under the leadership of Irene Ondieki MSN, RN-BC and Robert Akal MSN, RN for having achieved zero patient hospital acquired pressure ulcers stage 2 or above in 2016!





## CAUTI Reduction Strategies

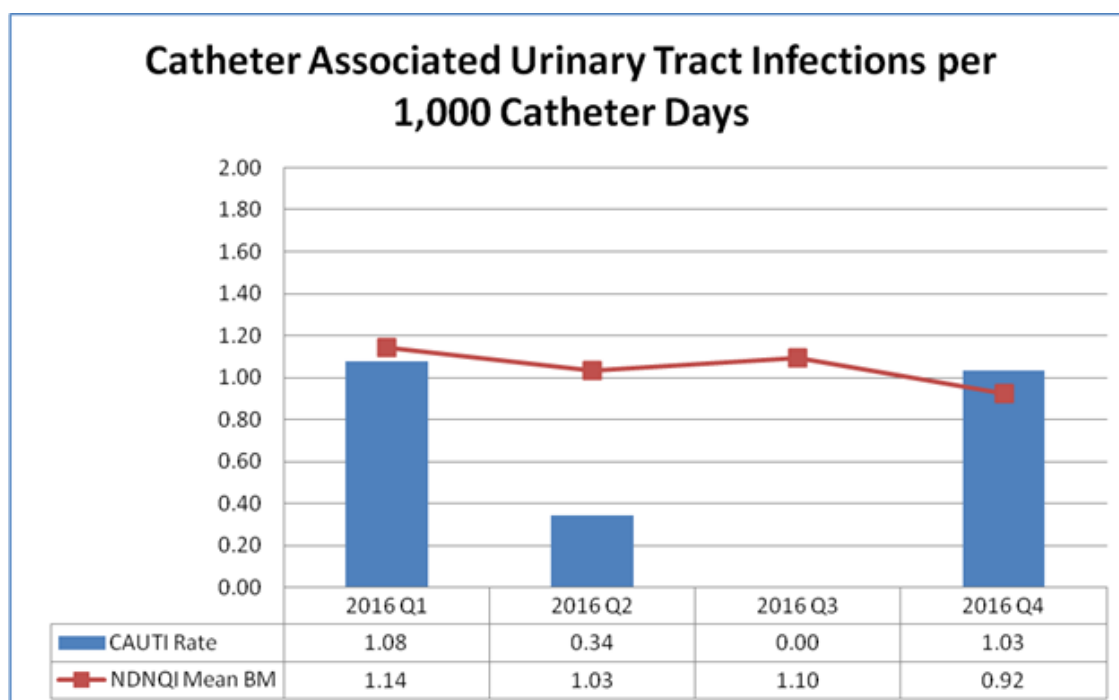
Nursing's role in the prevention of healthcare acquired infections:

It is estimated that 1.7 million healthcare acquired infections (HAIs) occur every year in acute care hospitals; infections such as catheter associated urinary tract infections (CAUTIs) and central line blood stream infections (CLABIs). The occurrence of healthcare acquired infections impacts the overall health and morbidity of patients and reducing and eliminating HAIs continues to be an organizational goal.

Prevention of HAIs is a collaborative effort lead by Nursing Infection Prevention Practitioners, Vickie DeChirico MSN, RN, CIC and Maryann Plaskon BSN, RN, CIC along with nursing leadership, nursing staff, our medical staff and clinical services colleagues.

The CAUTI Reduction Steering Committee supports the use of evidenced based practices such as use of smaller urinary catheter sizes, use of the bladder scanner to determine patients' ability to void following catheter removal, and reinforcing the evidenced based nurse driven protocol for removal of the urinary catheter as patients' conditions warrant. In August 2016, the nursing policy was updated to support these practices.

In 2016, the Medical Center continued to be below the National Database of Nursing Quality Indicators (NDNQI) benchmark mean for teaching hospitals for the majority of the year. 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.



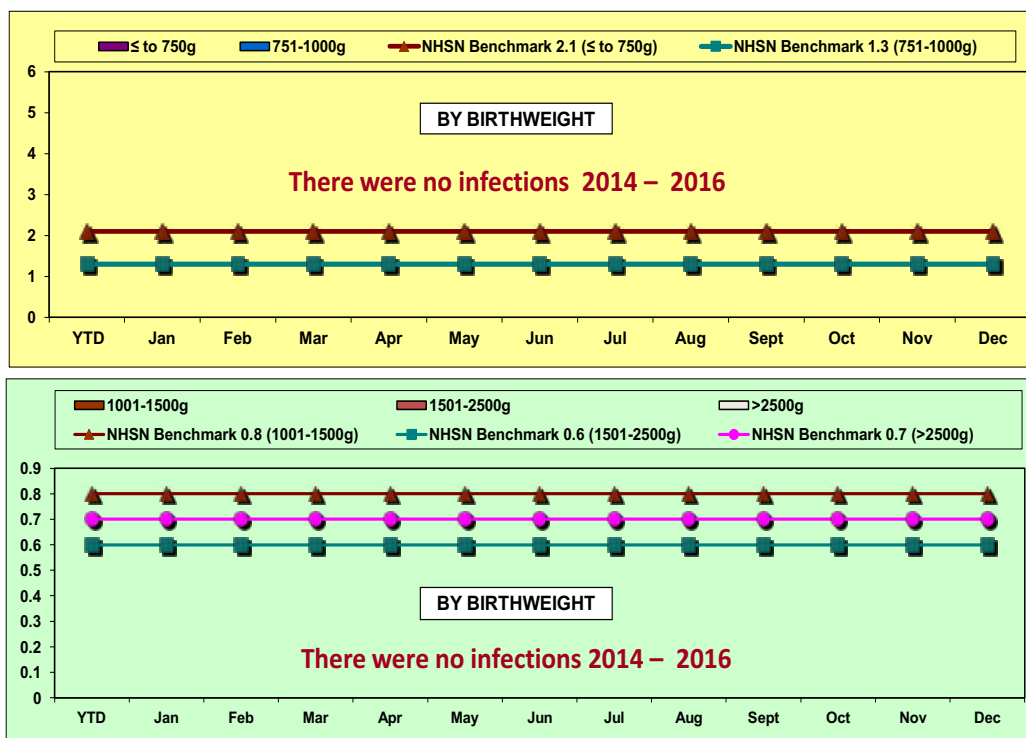


The neonatal intensive care unit (NICU) is a specialty unit providing highly specialized care to premature and compromised term newborns. The NICU infant is susceptible to infections such as central line associated blood stream infections (CLABSI) because of their fragile immature immune system. According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



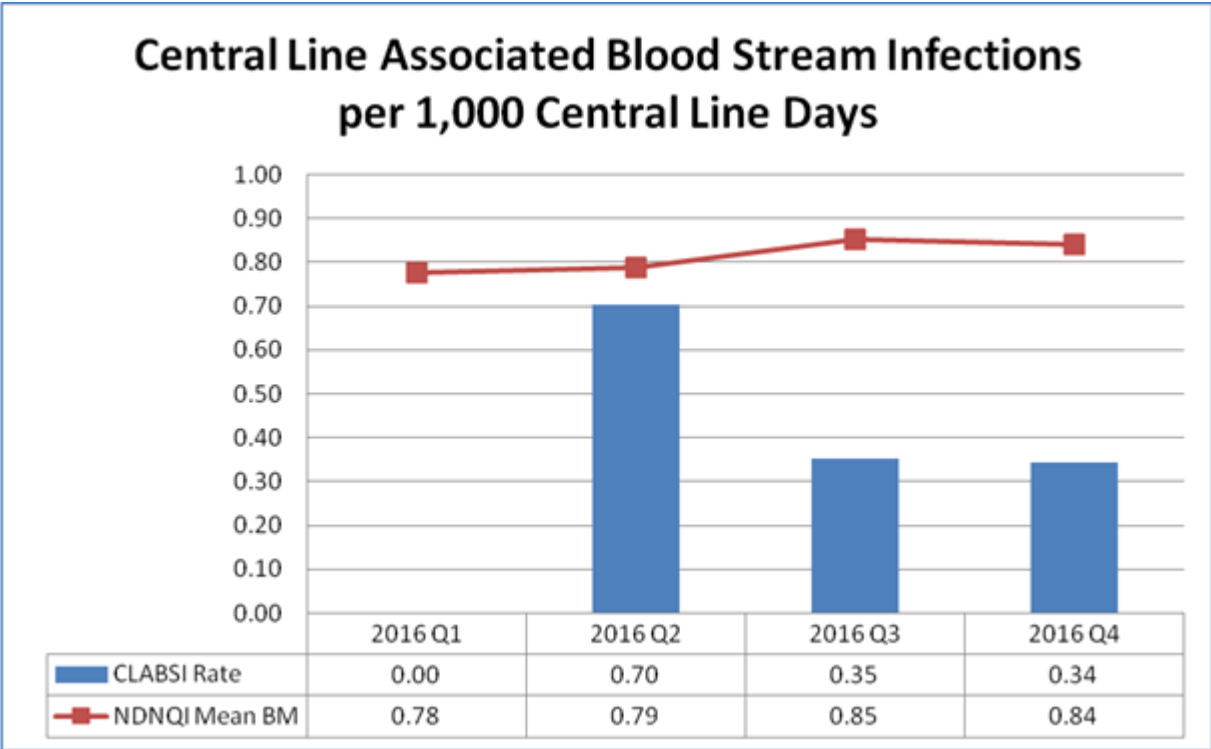
Mariekarl Vilceus-Talty MA, BSN, NE-BC, RNC-OB, C-EFM, LNC, Director of Maternal Child Services and Michelle Dickerson, MSN, RN, NICU Educator along with the NICU nurses and neonatologists work together to implement evidence based practices: Use of central line bundle as recommended by IHI which includes five key components: hand hygiene, maximal barrier precautions upon insertion, Povidone iodine for skin antisepsis, optimal catheter site selection, and daily review of line necessity with prompt removal of unnecessary lines.

### NICU CLABSI (by Birthweight) 2014 - 2015 - 2016



CLABSI Overall Results

Prevention of central line associated blood stream infections (CLASBIs) continued to be a focus in 2016. Evidenced based practices such as use of the swab cap and biopatch continued along with a collaborative effort among all practitioners to decrease use of central line catheters when feasible. In April 2016, a new policy supported implementation of the evidenced based practice of daily bathing of Critical Care patients with chlorhexidene gluconate for universal decolonization. Continued team commitment and focus lead to the Medical Center being below the NDNQI benchmark for teaching hospitals as noted.



## Safe Patient Handling

The Safe Patient Handling (SPH) Committee was re-instated in 2016 by Joanne Reich, DNP, RN, NEA-BC and co-chaired by Ruth Ochoa MSN-Ed, RN, Nurse Educator. This committee is comprised of nurses, patient care technicians, transporters, environmental services, Human Resources, Physical Therapy, Biomedical Engineering, EMS, and Purchasing.

The goals of the committee are:

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

The Committee started the year with a plan to include revising the existing policy with updated information on current patient lift equipment, updating the patient information brochures in English, Spanish and Arabic, updating the safe patient handling equipment in collaboration with Purchasing and Store Room and reinstituting a regular schedule of SPH equipment preventative maintenance and repairs in collaboration with Bio Medical Engineering and the Equipment Vendor. All of these goals were achieved in 2016. An essential component of SPH is validating staff competence with SPH equipment on an annual basis. This process was implemented with the ongoing support of the Nurse Educators and our Unit Super Users, 463 nurses and 220 technicians were validated in 2016. This committee will continue in 2017.



## New Knowledge, Innovation & Improvements

### Current Active Nursing Research Projects

#### Nursing Research and Evidence Based Practice 2016

JCMC 2016 IRB Approved Nursing Research Studies
<b>Protocol Title:</b> OrthoComplex Reconstructive Institute (OCRI) Quality and Outcomes Registry (Quantitative Study) <b>Principal Investigator:</b> Dr. Liporace, Mabel LaForgia, Nancy Frederic <b>IRB Approval Date:</b> 4/1/16 (Renewal date)
<b>Protocol Title:</b> Analysis of a Patients Perception of Barriers to Utilization of the Patient Portal (Qualitative Study) <b>Principal Investigators:</b> Helen Fox McCloy and Mabel LaForgia <b>IRB Approval Date:</b> 7/13/16
<b>Protocol Title:</b> The Influence of a Nursing Residency and Baccalaureate Curriculum on Critical thinking and Clinical Decision Making in Diverse Associate Graduate Nurses (Quantitative Study) <b>Principal Investigator:</b> Ebony Samuel <b>IRB Approval Date:</b> 7/13/16
<b>Protocol Title:</b> Exploring the Antecedents to Early Mobility to Prevent Hospital Patient Falls (Descriptive Correlational retrospective multisite study) <b>Principal Investigator for JCMC:</b> Mabel Laforgia <b>IRB Approval Date:</b> 10/10/16
<b>Protocol Title:</b> Implementation of Depression Screening in Primary Care of Adults <b>Principal Investigator:</b> Mary R. Bernardo <b>IRB Approval Date:</b> 9/1/16
<b>Protocol Title:</b> Chemotherapy effects on brain structure, neurophysiology and psychomotor behavior in breast cancer patient (Study Recruitment) <b>Principal Investigators:</b> Lisa Calabrese, Co-Investigator: Joan O'Leary <b>IRB Approval Date:</b> 10/10/16
<b>Protocol Title:</b> Preceptorship in NJ Magnet Hospitals: A descriptive Study <b>Principal Investigator:</b> Claudia Garzon-Rivera <b>IRB Approval Date:</b> 10/26/16
Evidence Based Projects
<b>Project Title name:</b> The inclusion of Family Member in Performing Passive Range of Motion. Project Implemented by: Maikel Herrera CVICU RN <b>Research Council Approval Date:</b> 7/6/17
<b>Project Title name:</b> CTICU discharge education Pamphlet. Project Implemented by: Corrine Chou RN, MICU <b>Research Council Approval Date:</b> 7/15/16

## Nursing Research Fun Fair

The Nursing Research Fun Fair took place on December 16, 2016. Since 2010, the Nursing Research Council elected to enhance learning of the research and evidence based process by sponsoring a yearly “Nursing Research Fun Fair” Event. This Staff nurse led event focuses on disseminating the organizations research evidence based practice and quality improvements using an interactive approach. Clinical nurses creatively disseminate the organizations nursing research, Evidence Based Practice and Quality Improvement projects and demon-

strate how they influenced nursing practice on their individual units or departments. The goal of this event is to increase awareness and knowledge regarding JCMC’s integration of research, best evidence, clinical practice guidelines and patient values into daily practice. The forum is well received and attended by over 100 clinical and non clinical employees at JCMC



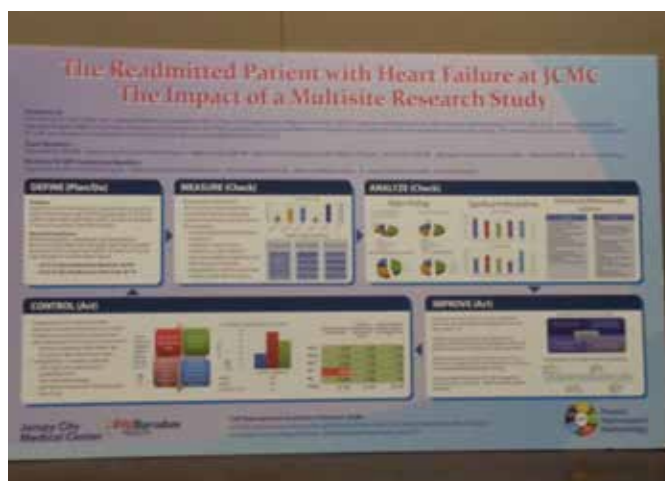
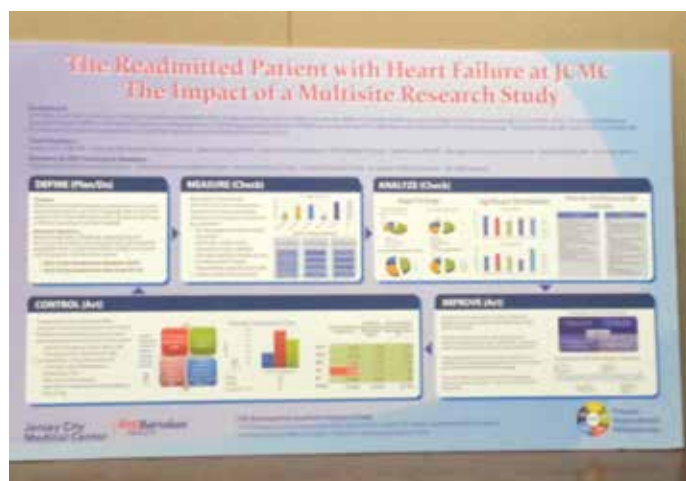


Poster Presentation	
1.	<b>Title:</b> Unit Practice Council Evaluates Evidence Based Practice <b>Type of Project:</b> Evidence Based Practice <b>Presented by:</b> Shaden Mustafa MSN, RN, CNL <b>Unit:</b> ICU
2.	<b>Title:</b> Implementing PASERO Opioid Sedation Scale in 2West PACU <b>Type of Project:</b> Burning Question – Literature Review <b>Presented by:</b> Lita Aguirre BSN, RN, CPAN and Maria Rufin BSN, RN <b>Unit:</b> PACU
3.	<b>Title:</b> Reducing Central Line Associated Blood Stream Infections (CLABSI) NICU <b>Type of Project:</b> Performance Improvement <b>Presented by:</b> Jennifer Kellow <b>Unit:</b> NICU
4.	<b>Title:</b> Does Using Teach Back Reduce Readmissions <b>Type of Project:</b> Burning Question – Literature Review <b>Presented by:</b> Ingrid Brown BSN, RN <b>Unit:</b> Continuum of Care Center
5.	<b>Title:</b> The Readmitted Patient with Heart Failure at JCMC: The Impact of a Multisite Research Study <b>Type of Project:</b> Performance Improvement <b>Presented by:</b> Diana Perez MSN, RN <b>Unit:</b> Continuum of Care Center
6.	<b>Title:</b> Orthopedic Complex Reconstructive Institute (OCRI) Quality and Outcomes Registry <b>Type of Project:</b> Nursing Research Study <b>Presented by:</b> Nancy Frederic MSN, APN, RN , Mabel LaForgia DNP, RN, CNL <b>Unit:</b> Orthopedic Institute
7.	<b>Title:</b> Increase Total Joint Replacement Patient Discharge to home <b>Type of Project:</b> Performance Improvement <b>Presented by:</b> Nancy Frederic MSN, APN, RN <b>Unit:</b> Orthopedic Institute 6West
8.	<b>Title:</b> Early Mobilization Intervention Post Orthopedic Surgery Evidence Based Project <b>Type of Project:</b> Evidence Based Practice <b>Presented by:</b> Mikhail Kolomoitsev BSN, RN – Rutgers MSN Student – Clinical Leadership <b>Unit:</b> 6 West
9.	<b>Title:</b> Improving the Application of Intermittent Pneumatic Compression Devices in SDS <b>Type of Project:</b> Evidence Based Practice <b>Presented by:</b> Patricia DiBello BSN, RN, CNOR <b>Unit:</b> SDS
10.	<b>Title:</b> Behavioral Health Patient Satisfaction <b>Type of Project:</b> Performance Improvement <b>Presented by:</b> Presented by Rosanna Vales <b>Unit:</b> 5 West
11.	<b>Title:</b> Benefits of relaxation while at work for bed side nurses in reducing workplace burnout <b>Type of Project:</b> Burning Question – Literature Review <b>Presented by:</b> Varsha Singh MSN,APN-C <b>Unit:</b> Nursing Practice
12.	<b>Title:</b> Assess the Predictive Value of the Johns Hopkins Fall Risk Assessment Tool and the Wilson Sims Fall Risk Assessment Tool in a Psychiatric Inpatient Unit <b>Type of Project:</b> Nursing Research Study <b>Presented by:</b> Reyna Mateo BSN, RN-BC, Falls Prevention Coordinator and Dr. Claudia Garzon-Rivera DNP, RN, CCRN, CNL, Director of Clinical Excellence <b>Unit:</b> Fall Prevention



## Current Active Nursing Research Projects

13. <b>Title:</b> Preceptorship in NJ Magnet Hospitals: A Descriptive Study <b>Type of Project:</b> Nursing Research Study <b>Presented by:</b> Claudia Garzon-Rivera DNP, RN, CCRN, CNL <b>Unit:</b> Nursing Practice
14. <b>Title:</b> Barriers and Facilitators to Sustaining Quality Improvement Related to Nurse Sensitive Indicators in the Acute Care Setting; A Qualitative Descriptive Study <b>Type of Project:</b> Nursing Research Study <b>Presented by:</b> Claudia Garzon-Rivera DNP, RN, CCRN, CNL & Mabel LaForgia DNP, RN, CNL <b>Unit:</b> Nursing Practice
15. <b>Title:</b> Exploring the Antecedents to Early Mobility to Prevent Hospital Patient Falls <b>Type of Project:</b> Nursing Research Study <b>Presented by:</b> Mabel LaForgia DNP, RN, CNL <b>Unit:</b> Nursing Practice
16. <b>Title:</b> Advancing Research and Evidence Based Practice through a ten year collaborative journey of Magnet Designated Hospitals <b>Type of Project:</b> Evidence Based Practice <b>Presented by:</b> Mabel LaForgia DNP, RN, CNL <b>Unit:</b> Nursing Practice



## Publications

Kim Palestis, MSN, RN, CEN, TCRN  
Clinical Resource Director

Palestis, K. (2016).

Active Shooters: What Emergency Nurses Need to Know. *Journal of Forensic Nursing* 12(2). 74-79

Mabel LaForgia DNP, RN, CNL

Director of Nursing Research, Evidence Based Practice and the Magnet Program

Centrella-Nigro, C., Bognar, L., Burke, K., Faber, K., Flynn, V., LaForgia, M. (May-June 2016).

The readmitted patient with Heart Failure. *MedSurg Nursing*, pg. 163+

## A Book is born!



Michelle Dickerson

MSN-Ed, RNC-NIC, RN-BC, CBC, Perinatal Nurse Educator,  
authored and published a clinical handbook:

Neonatal Pain Management for Nurses!

Michele continues to make strides to the  
support the nurses with evidence based practice.



# Recognition & Rewards

## Nurse 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 18, 2016. A new category was announced in 2016: Excellence in Care by a Nursing Care Technician acknowledging the vital contributions our patient care technicians make to quality care and to a positive patient experience. A total of 47 nominations were received and reviewed by Nurse Engagement and Satisfaction Council to select the award recipients.



The theme for the 2016 ceremony was Continuing Professional Advancement. The ceremony was opened by Joanne Reich DNP, RN, NEA-BC, Associate Vice President of Nursing Practice, emphasizing the underpinnings of the Magnet® Program domains which guide our nursing practice. Joe Scott, FACHE, President & CEO welcomed award nominees, their friends and families and staff to the recognition luncheon and acknowledged the excellence in patient care delivery provided by all nominees. Margaret Ames MPA, BSN, RN, NEA-BC, Associate Vice President of Nursing Operations provided an overview of the impact of engagement and maintaining excellence in the patient experience.

Mable LaForgia, MSN, RN, CNL, CCRN presented an overview of the impact of the Magnet designation journey and Ricky Jewell RN, Magnet Champion Council member, shared his work in leading the redesign of the JCMC Nursing Professional Practice Model.

The ceremony was highlighted by Rita Smith, DNP, RN, NEA-BC, Chief Nursing Officer who reinforced the value of nurses continuing professional advancement and then introduced the keynote speaker.

## Nurse Excellence Awards



The keynote address was provided by Judith Schmidt MSN, RN, ONC, CCRN, American Nurses Association Delegate, NJSNA Vice President, NJSNA Region 6 President, and Chief Executive Officer of the New Jersey State Nurses Association.



Below are the names of the nurses who helped making the program a success!

### Planning Committee

Joanne Reich RN  
Mabel LaForgia RN  
Ebony Samuel RN  
Michelle G. Lopez RN  
Varsha Singh APN  
Stanley Owusu RN  
Stacey Newman RN  
Heidi Milad RN  
Elaine Castro RN  
Doreen Jones RN  
Appadural Lakshmanan RN  
Corrine Chou RN  
Shaden Mustafa RN  
Arti Pandya RN  
Claudia Golding RN

Louise Ferreira RN  
Linda Gentile RN  
Chi-Yuan Chang RN  
Jocelyn Dela Cruz-Torres RN  
Patrycja Wojewoda RN  
Odalys Bridson RN  
Jessica Mercado RN  
Shellinie Muneshwar RN  
Jean Tevari RN  
Andrea Dirubba RN  
Blythe Johnson RN  
Maryann Uy-Villa RN  
Rachelle Torres RN  
April Bacunawa RN  
Joseph Bolante RN  
Sheila Ragoonanan RN

Aurea Vallo RN  
Selena Sackroolar RN  
Ogeechi Okero RN  
Brit Destafano RN  
Sonia Freire RN  
Yvette Bryant RN  
Fozia Ahmed RN  
Marissa Harris RN  
Isabelita Pitao RN

### Support by:

Patra Clark  
Jenna Camacho



## The 2016 Excellence Award recipients are:

### TRANSFORMATIONAL LEADERSHIP

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Irene Ondieki, MSN, RN, BC  
Director of Nursing 7 East & 7 West

### EXEMPLARY PROFESSIONAL PRACTICE

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Sylvia Caparros, RN  
Post Anesthesia Care Unit

### STRUCTURAL EMPOWERMENT

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Lita Aguirre, BSN, RN  
Post Anesthesia Care Unit

### Empirical Outcomes

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Adrian Salandanan, RN  
7 East

### NEW KNOWLEDGE, INNOVATIONS & IMPROVEMENTS

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Michelle Dickerson, MSN,  
Nurse Educator, NICU

### EXCELLENCE and CARE NURSING CARE TECHNICIAN

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2016 Recipient Cassandra Houghton, PCT, Emergency Department







## Daisy Award Recipients

The Daisy Award is a nationwide program celebrating extraordinary clinical skills and compassionate care provided by nurses every day. The Daisy Foundation was established in 2000 by the family of Patrick Barnes who died at the age of 33 of complications from the autoimmune disease idiopathic thrombocytopenia purpura (ITP). Daisy is an acronym for diseases attacking the immune system. Patrick's family started the Foundation in their son's memory. A goal of the Foundation is to recognize extraordinary nurses who make a difference in the lives of people. Patients, families, visitors, nurses, physicians and fellow employees can nominate a deserving nurse by completing a nomination form. The nominations are reviewed by the Nursing Quality and Safety Council. The nominations must reflect and demonstrate the importance of compassionate communication and delivery of quality and safe nursing care. The winners are selected on a monthly basis.

The Daisy award recipients receive a Daisy pin and a Daisy certificate. The winner also receives the "Healer's Touch" sculpture. To honor the award recipient, the Daisy Banner is displayed on the recipient's unit for one month.

2016 Daisy Winners:

*December 2016 - Lauren Giles, RN from 6 West.*



*November 2016 - Anna Giron, RN from the Emergency Department.*



## Daisy Award Recipients

2016 Daisy Winners:

*October 2016 - Lilia Sardonas, RN from 5 East Observation/ Pediatrics Unit.*



*September 2016 - Adrian Calde, RN from the Emergency Department.*



*July 2016 - Agnes Allado, RN from the Same Day Surgery Unit*



## Daisy Award Recipients

2016 Daisy Winners:

*June 2016 - Aurea Vallo, BSN, RN-BC from 6 East Telemetry Unit*



*May 2016 - Damaris Caraballo, RN from the Neonatal Intensive Care Unit*



*April 2016 - Franca Dibrita MSN, APN, CNL, Cardiac Cath and Emergency Department*





## Daisy Award Recipients

2016 Daisy Winners:

*March 2016 - Usha Parekh BSN, RN 7 West*



*February 2016 - Yelena Landa NP-C RN-BC, 7East & 7West Nurse Educator*



## Appointments and Service on External Organizations

An essential component of our Mission to Enhance Life within our communities is for nurses to provide leadership on community and professional organizations. This section highlights nurses who have provided leadership on external boards and/or organizations in 2016.

Rita Smith DNP, RN, NEA-BC CNO and Senior Vice President Patient Care Services	Organization of Nurse Leaders of New Jersey: Board Member and Chair of Political Advocacy Committee (PAC). Advisory Board member New Jersey City University School of Professional Studies President-elect New Jersey Council of Magnet Organizations <ul style="list-style-type: none"> <li><i>Recipient of the 2016 Distinguished Service Award for the Organization of Nurse Leaders of New Jersey</i></li> </ul>
Brenda Hall MS, RN, NE-BC Senior Vice President of Safety, Quality, and Regulatory Affairs	Board of Trustees for Midatlantic Alliance for Performance Mentor for American College of Healthcare Executives of New Jersey Board RWJBH Leadership Alliance
Margaret Ames, MPA, RN, BSN, NEA-BC Associate Vice President Nursing Operations	Research Committee of Organization of Nurse Leaders of New Jersey
Joanne Reich DNP, RN, NEA-BC Associate Vice President Nursing Practice	Bayonne High School Board of Education Advisory Board of the Academy for Health and Medical Sciences Communication and Growth Committee of New Jersey Council of Magnet Organizations
Mabel LaForgia DNP, RN, CNL Director Nursing Research and Evidenced Based Practice and the Magnet Program	Vice President –elect New Jersey Council of Magnet Organizations
Michele M. Lopez, MSN, RN, CEN, NE-BC Director Emergency Department	Advisory Board - Pre-Hospital Medicine Program, Jersey City Medical Center/ Hudson County Community College
Vickie DeChirico MSN, RN, CIC	Membership Chair Board of Directors for Northern New Jersey Association for Professionals of Infection Control and Epidemiology
Claudia Garzon-Rivera DNP, RN, CCRN, CNL Director Nursing Clinical Excellence	Innovations Committee of New Jersey Council of Magnet Organizations
Ebony Samuel MSN-Ed, RN-BC, NPD Nurse Educator	Vice President Ramapo College of New Jersey EOF Advisory Board Education Committee New Jersey Council of Magnet Organizations
Michele Dickerson PhD (c), RNC-NIC, RN-BC, CBC Nurse Educator	Education Provider Committee National Association of Neonatal Nurses
Mariekarl Vilceus-Talty MA, BSN, NE-BC, RNC-OB, C-EFM, LNC Director Maternal Child Services	Communications and Growth Committee New Jersey Council of Magnet Organizations
Elenita Ajose BSN, RN, ONC Director 6 West and Dialysis	Advisor Hudson County Chapter, Philippine Nurses Association
Rachele Mattaliano MS, BS, RN-C	Advisory Board Sovereign Nations Federal Credit Union

























