



UNIVERSITY HOSPITAL

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@ UH

Heart and Soul

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WELCOME FROM SHEREEF ELNAHAL, PRESIDENT & CEO



As healthcare professionals, each of us has learned to deal with some degree of uncertainty in our daily lives. Entering 2020, however, please be aware of one certainty: Change is coming to University Hospital. That is not a choice, but an imperative.

A new strategic direction is being charted to insure we continue to provide the highest quality of care and safety for our patients, more closely engage our employees, and better manage our revenues and expenses. This is a journey that will require each of us to play their part. Having met so many of you personally since becoming President and CEO, I am confident that you are ready to join on this journey.

You will be learning more in the weeks ahead about a healing ceremony, a community-wide

On the Cover: U.S. Surgeon General Dr. Jerome Adams with Labor & Delivery patient Zaimah Madison and her newborn

event devoted to our front-line employees to fully engage in our change initiatives. This will be an opportunity for all of us, working together, to affirm as a group the commitments we hold personally to One Goal. One Passion. Every Patient. Every Time.

A key challenge before us is the imminent visit by The Joint Commission to conduct our tri-annual reaccreditation survey. Intensive preparations are now underway to insure we can prove our commitment to quality care and safety. For the longer term, we are implementing the Shared Governance model to discover and share best practices at the bedside.

A further challenge faces us all. That is the need to improve our financial position. That will be achieved not by cutting corners. Rather it is about how we utilize our resources, act on new opportunities, and attract new patients.

My goals have been to build a culture of trust that has long eluded University Hospital and to set in motion strategic initiatives that will make a difference for our patients, our employees and our community. I intend to continue regular communication with all of you to keep you abreast of our achievements as well as our challenges.

We are all in this together.

Follow Dr. Elnahal  **@ShereefElnahal**



UH PROGRAM ACHIEVES DRAMATIC RESULTS WITH OPIOID-DEPENDENT BABIES

A program developed at University Hospital to treat babies born dependent on opioids has dramatically reduced the overall reliance on drug-based interventions and the amount of time the babies have to remain in the hospital following birth.

“We are sending babies home sooner, with superior results,” said UH President and CEO Dr. Shereef Elnahal.

Called NASTOP (Neonatal Abstinence Syndrome Treatment & Observation Protocols), the program has successfully reduced the average length of stay for babies treated for neonatal abstinence syndrome by more than 50 percent, from more than 42 days to fewer than 20 days. NASTOP has also shortened the duration for neonatal abstinence treatment by more than 70 percent, reducing the overall reliance on drug-based interventions.

NASTOP was developed at UH by Dr. Salma Ali in response to the growing impact of the opioid epidemic among newborn babies.

“We are incredibly proud of the work that we have done here to standardize care and improve the health outcomes for our newborn patients that are suffering from NAS,” said Ali, a neonatologist. “Through NASTOP, we have created a culture of compassion, understanding, and healing for the mother-baby dyad suffering from NAS.”

Neonatal Abstinence Syndrome (NAS) occurs in newborn babies who are exposed to opioids or related drugs while in the mother’s womb. These withdrawal symptoms typically occur two to three days after birth, and can include tremors, seizures, excessive irritability, temperature instability, poor feeding habits, vomiting, and dehydration.

Incidents of NAS have greatly increased nationwide in the last decade; New Jersey rates roughly doubled during that time period, with more than 600 cases reported annually.

“The impact on babies in the womb is an often-overlooked effect of the opioid epidemic,” said Elnahal. “NASTOP is an amazing program that has shown real results in short order.”

NASTOP provides a standardized protocol for UH providers to identify, treat, and manage infants suffering from NAS. The program requires caregivers

to assess the newborns’ status and update the whole care team every three hours. Based on these assessments, NASTOP provides clear criteria for the escalation, adjunct therapy, and weaning of pharmacological interventions.

These guidelines ensure that pharmacological interventions are consistent between various providers and ensures continuity and standardization of care.

SWEENEY VISITS HVIP PROGRAM



New Jersey Senate President Steve Sweeney (D-Gloucester) visited UH’s Hospital Violence Intervention Program (HVIP), which has become a state model, meeting with President and CEO Dr. Shereef Elnahal and Dr. Stephanie Bonne, the program director.

“It is great to see this team of people working together to end the cycle of gun violence that afflicts some of our most vulnerable and underserved communities in New Jersey,” said Sweeney. “That is why violence intervention programs like this are so important. They create hope in tragic situations.”

The UH program served as the framework for legislation signed into law recently that requires all level I and II trauma centers in New Jersey to establish HVIPs.

Thanking Sweeney for the visit, Elnahal said, “Violence is a public health issue, and we believe the best opportunity for treatment is by providing timely interventions and community based support.”

UH, FIRST LADY TAMMY MURPHY WELCOME U.S. SURGEON GENERAL



U.S. Surgeon General Dr. Jerome M. Adams has launched a national listening tour on the maternal health crisis and made his first stop University Hospital, where he was welcomed by New Jersey First Lady Tammy Murphy and UH President and CEO Dr. Shereef Elnahal.

Adams toured the hospital, including the Labor and Delivery suite, and met with UH employees, before moderating a panel discussion with healthcare providers, State and local leaders, and other stakeholders on the efforts underway in New Jersey to address maternal health issues.

“Strengthening maternal health across the nation is a top priority of mine, so I was thrilled to moderate this panel and dialogue with leaders in

New Jersey who are paving the way in improving maternal healthcare in the state,” said Adams. “University Hospital has proven to be a shining example of maternal healthcare in New Jersey, and I am excited to see how this hospital and the Garden State will continue to build upon this strong foundation.”

First Lady Murphy has made maternal health a signature issue, spearheading the Nurture NJ initiative.

“Improving health outcomes for New Jersey’s mothers and babies requires a comprehensive, collaborative approach with our local, state, and federal partners,” said Murphy (opposite page top left). “Through our Nurture NJ initiative, we

are committed to reducing infant and maternal mortality and morbidity and ensuring equitable maternal and infant care among women and children of all races and ethnicities.”



“Dr. Adams’ visit today is a testament to the incredibly high level of care our skilled clinical team provides,” said Elnahal. “At University Hospital, we take care of complex and high-risk pregnancies on a daily basis, and we are incredibly proud to have some of the best health outcomes in the State.”

With over 40 clinic physicians and labor & delivery registered nurses, University Hospital annually handles more than 1,600 deliveries and more than 24,000 prenatal patient visits. The Regional Perinatal Center handles the most complicated pregnancies and most medically fragile newborns. UH has one of the lowest C-section rates in New Jersey, and has achieved the most successful rate of vaginal births after C-section (VBAC) as well as the lowest episiotomy rate.



A LOOK BACK AT THE HOLIDAYS

The December holidays were celebrated in festive fashion at University Hospital with the traditional employee Holiday Party, a musical performance by an Arts High School quartet (*below*), and a surprise Christmas Eve visit to pediatric patients from legendary Newark hip hop artist Dupré “DoltAll” Kelly.

President and CEO Dr. Shereef Elnahal assisted Kelly on Christmas Eve as he distributed gifts of toys (*opposite page, lower right*) to children in the pediatric unit, then returned Christmas Day with his family to show appreciation to UH employees working the holiday.





Food and Nutrition Services prepared a feast of holiday treats for the Holiday Party that were served by managerial employees and community volunteers from the Hospital Auxiliary (*above*). Dennis Boos (*opposite page, left*), Director, UH Emergency Preparedness Center, emceed a raffle of gift baskets donated by different units throughout the hospital.



BEST FOR LAST

The accreditation survey by The Joint Commission is now just a short time away. We asked four UH employees what they are doing to prepare:



Michael Kortbawl, Chief Nuclear Medicine Tech (Radiology)

“It’s important to bring the National Patient Safety Goals to the attention of our staff so that everyone is well-versed in them. We want to make a big focus on hand hygiene. There’s low-hanging fruit that we want to be concerned about, like making sure our floor stock is not expired or in the close-expired range, especially with medications.”



Cornell Gresham, Storeroom Clerk (Food & Nutrition)

“We’re taking a lot of containers out of boxes, putting them in the racks, making sure everything, particularly the floors, are clean. We’re taking temperatures to make sure we’re up on all that. It’s an hour, two hours every day.”



Akwasi Amponsah, Attending Anesthesiologist (Anesthesiology)

“We’re keeping up with identifiers, allergies, prior issues with anesthesia, and ensuring compliance with all anesthesia texts to make sure they’re right.”



Lakeishia Burt, Customer Service Rep (Patient Experience)

“I’m working to remember the difference between ‘PASS’ and ‘RACE’ (for emergency preparedness). I’m making sure things are in stock in the ER waiting area, such as masks, sanitizers and gloves.”