



RUTGERS

Edward J. Bloustein School
of Planning and Public Policy

Summer 2017 Abstract Book



Internship Abstract

Title: Middlesex County Wastewater Master Plan
Name: Jessica Alvarez
Preceptors: Mirah Becker, Director of Comprehensive Planning
Agency: Middlesex County Planning Department

Purpose: To update the 2008 Middlesex County Wastewater Master Plan

Significance: The purpose of the Wastewater Management Plan (WMP) for Middlesex County is to ensure the document adheres to the newest Water Quality Management Planning Rules, adopted November 6, 2016. The WMP is required for submittal to the New Jersey Department of Environmental Protection (NJDEP) under the New Jersey Water Quality Planning Act (N.J.S.A. 58:11A-1 et seq.) and Section 208 of the Federal Clean Water Act. Unlike other counties, Middlesex County has experienced sustained population growth for the last several decades. The population growth has led to an increase in development throughout the county. Centralized sanitary sewer infrastructure plays a vital role in the expansion of these areas. The wastewater planning process takes precaution to carefully study geographical areas that can be included in the sewer service area.

Method/Approach: Middlesex County is part of the Lower Raritan sewer service area. From here, GIS is used to assess the eligibility of the area. The areas are split into three distinct categories: assigned sewer service areas, unassigned sewer service areas, and environmentally sensitive areas. Assigned sewer service areas are areas of land that have sewer infrastructure that feed to a sewage treatment plant that treats the wastewater for discharge to surface water. Unassigned sewer service areas are zones mapped for future sewer service but do not have a designated treatment facility. Lastly, environmentally sensitive areas are at least 25 acres and consist of endangered or threatened species, wetlands, Natural Heritage Priority Sites, or Category One Special Water Resource Protection.

Outcomes/Results: Once the area is defined under these three categories, planners can then proceed onto the facilities themselves. Under the New Jersey Water Quality Planning Act, treatment facilities are to report their daily discharge to the NJDEP and County. The discharge number is then used to calculate the future flow projection. Each facility is assigned a permitted flow number. The existing flow, and permitted flow are responsible for the future flow projection. Future flow projections predict whether or not a facility will be able to withstand future wastewater demands as the population continues to increase.

Evaluation/Conclusion: The completed GIS map will allow Middlesex County to be in compliance with state regulations. The hardest challenge faced is reaching out to individuals and getting information on their facility. Overall, legislation is a slow and methodical process.

Internship Abstract

Title: Evaluation of Fall Prevention Procedures and Best Practices

Name: Nwakaego Amaechi

Preceptors: Direct Supervisor: Gina Kirchoff, (LNHA)
Project Supervisor: Lisa Slater, Director of Professional Education (MSN, RN)

Agency: Parker

Purpose: To identify what Fall Prevention procedures are used by all five homes within Parker, to evaluate which procedures model Evidence- based practices, Best- practices and could be modeled in the other homes.

Significance: According to the CDC, falls in elders (ages 65 and above) is an issue as it could be the start of many chronic diseases such as lack of confidence in their ability to be mobile, pain, depression and could eventually lead to death. When an elder falls, he or she is susceptible to a fractured hip, shoulder, rib or skin tear and more significantly, it leads to a lower quality of life for that individual. As per the Public Health Surveillance Data, 1 of 3 people age 65 and above fall every year, and that 1 of 5 falls causes serious injury and then expensive hospital visits at an average of \$30,000 per visit. While nursing homes by law are required to document all fall incidents, it is imperative that methods that model Best-Practices be established to prevent further falls.

Method/Approach: A compilation of fall incident report from two of the five homes (Parker at River Road and Parker at Landing Lane) shows that since the past year, the fall rate in each home have reduced by about 50%. Since all five homes seemed to have implemented successful fall prevention procedures, a survey was created with questions pertaining to how falls are prevented and or managed in each home. This survey was sent out to the Director of Nursing (DON) for each home prior to a scheduled interview which allowed them to answer the questions beforehand and prepared them for the discussion. The survey served as a tool to help develop more in-depth questions for each meeting. Meetings were conducted in person and real situations happening around the home at that time were used as perspective models.

Outcomes/Results: A total of five surveys were distributed; the results show that all five homes have implemented standard fall prevention procedures like frequent monitoring and using root-cause analysis to re-evaluate care plan methods when a fall happens. The survey results showed that once the nursing home implemented a procedure unique to the home, the fall rate was about 50% less. For example, Parker at McCarrick (post-acute rehab center) implemented “Team McCarrick” and when a fall happens, an announcement is made and this team gathers to ensure that the resident gets optimum care.

Evaluation/Conclusion: There have been a successful decrease in fall rate overall in Parker; though they were all interviewed differently, they all agreed on eliminating alarms and call bells and replacing them with modern day technological devices that can send sensory signals when an elder is in discomfort or need something.

Internship Abstract

Title: A Juxtaposition of Financial Aid Opportunities by School - Rutgers University

Name: Chima Asikaburu

Preceptors: Direct Supervisor: Andres Sierra, System Administrator
Project Supervisor: Andres Sierra, System Administrator

Agency: Research & Enrollment Information Services at the Office of Financial Aid, Rutgers

Purpose: To juxtapose the levels of financial aid offered to students in terms of availability and utilization by specific schools.

Significance: As of December 31st 2016, the total amount of unpaid student loans nationally stood at \$1.31 trillion, a \$31 billion increase from the previous year (FRBNY, 2017). Rutgers, the State University of New Jersey alone gave \$620 million in aid for undergraduate studies, the average financial aid offer being \$16,376 for an undergraduate. 78% of undergraduate students receive some form of aid at Rutgers, however not all financial aid opportunities are made equal. Some students are given more financial aid opportunities such as grants by belonging to specific majors, whether that is completely merit based or otherwise. A study found that merit-based aid programs actually reduce the probability that a student will earn a STEM degree (Sjoquist & Winters, 2015). The number of students in each undergraduate degree program at Rutgers University ranges tremendously and with over 100 undergraduate majors, an analysis by school is necessary.

Method/Approach: The 2016 - 2017 scholarship utilization reports for 4 different schools were analyzed with the cooperation of key Financial Aid Office personnel. Due to the confidentiality of some documents, certain information was not allowed to be published without the individual school's consent. The following schools were analyzed: The School of Planning and Public Policy, Environmental and Biological Sciences, Nursing, and Pharmacy.

Outcomes/Results: Results shown indicate the of number of scholarship opportunities including awards, prizes, and stewardships as well as the utilization rates (not including prizes) of said opportunities italicized in parenthesis where applicable. The school of Planning and Public Policy - 24 (*N/A*), Environmental and Biological Sciences- 152 (*45.9%*), Nursing - 15 (*N/A*), Pharmacy - 72 (*N/A*).

Evaluation/Conclusion:

Statistics for each school were vastly different when juxtaposed. The order of financial aid opportunities by number is as follows; Environmental and Biological Sciences -152 | Pharmacy - 72 | Planning and Public Policy - 24 | Nursing - 15|. The order of af schools based on the amount of scholarship funding available is as follows (values are confidential); Environmental and Biological Sciences, Pharmacy, Planning and Public Policy, Nursing, The order remains the same in regards to the total amount given to students for the 2016 - 2017. Although descriptive, this study is flawed on the basis that select schools were chosen and juxtaposition is only done for the 2016 - 2017 school year. Due to this limitation a trend or pattern can not be conclusively suggested given the data, for that a more holistic study is required.

References:

https://docs.google.com/document/d/1NoEOIpKuBfylTitbM_8z_n2SoBtZJ7wjBnl8uIC98qE/edit?usp=sharing

Internship Abstract

Title: Legal Internship
Name: Reema Borad
Preceptors: Lynn Vajda, Administrative Coordinator: Sales and Legal
Agency: LIMS Providing Company

Purpose: To sort through and analyze customer contracts for a company that provides Laboratory Information Management Systems (LIMS) to healthcare, pharmaceutical, and companies of other sectors that utilize laboratories and research centers.

Significance: According to the World Health Organization Regional Office for the Eastern Mediterranean, LIMS improve quality diagnostic testing, and are able to produce information regarding patient care, public health planning, and policy matters. Many contractual agreements between the LIMS providing company, and the company or public health department employing the technology, must be periodically reviewed to assess whether both parties have executed the contracts. The review of such contracts will help ensure both parties are legally protected, no party violates the agreement, and any circumstance that may affect the company's influence over their respective field is prevented.

Method/Approach: A qualitative type of approach was utilized in order to gather information needed to determine whether the contracts between the LIMS providing company, and the customer company or health agency were valid. Customer folders were thoroughly reviewed in order to determine the presence and successful execution of the Master Software and Services Agreement and the Software License Agreement by both parties; this was noted, and recorded on a spreadsheet. The collection of data that was accumulated will be used for future purposes as a type of reference for new contracts that may be drawn for additional partnerships, and to keep track of existing contracts and agreements.

Outcomes/Results: Of the total number of customer files on the computer database (1,757 files), 344 files (19.6%) contained executed Master Software Service Agreements, and 626 files (35.6%) contained executed Software License Agreements. The paper-based storage site of customer files contained 402 (22.9%) of the same files present in the computer database, as a form of backup records. Of the 402 paper-based customer files reviewed, 38 of those files (9.5%) contained Software License Agreements, while the replica file in the computer database, did not contain the same agreements.

Evaluation/Conclusion: 80.4% of the files in the computer database did not hold the Master Software and Services Agreement, and 64.4% of the files did not hold the Software License Agreements. The absence of agreements can be attributed to either misplaced records, contracts that were never drawn, or incorrectly placed company files in the database. This data conveys that certain contracts between the LIMS company and the customers may not be entirely secure, and further investigation will help determine the presence/location of the missing contracts, or the reason why the contracts do not exist.

Internship Abstract

Title: Expanding the Bloustein reach throughout South Jersey

Name: Matthew Burton

Preceptors: Direct Supervisor: Ann Marie Hill, Undergraduate Internship Coordinator
Project Supervisor: Kamila Pavezzi, Instructor of Professional Practice Internship Coordinator

Agency: Edward J. Bloustein School for Planning and Public Policy at Rutgers University

Purpose: To research multiple health administration and public health sites throughout south Jersey in order to expand the number of internship sites for future students.

Significance: There are many internship sites located within the Central New Jersey and Northern regions of the state. However, when it comes to the South Jersey region there are minimal internship sites for Bloustein students. The goal is to expand the number of internship sites within the South Jersey region in order to provide Bloustein students that live in that geographical area more internship opportunities. This project will help to expand the Bloustein brand because if more students work within the South Jersey region then more professionals will begin to know and have confidence in the Bloustein School. Looking to the future, health professionals who once did not know of us will recommend our students to fellow colleagues. Thereby growing the brand even further through networking and growing trust in the Bloustein School.

Method/Approach: Research was conducted in order to locate internship sites within the south jersey area. The sites focused on the four majors that Bloustein offers including the following; Public Health, Public Policy, Planning, and Healthcare Administration. Cold emails and cold calling was conducted in order to contact potential future preceptors. Providing them with information on the Bloustein School through Supervisor Responsibility sheets and the summer 2017 preceptor resources packet was key in helping future supervisors see what was expected of them.

Outcomes/Results: The number of internship sites within South Jersey have increased. We currently have seven sites across the area. I reached out to nine health professionals within the area and secured three thus far. Many internship sites with experienced professionals in their respective fields have now been added to the Bloustein majors database system. These professionals serve in healthcare administration, nursing, and clinician roles.

Evaluation/Conclusion: From the ranging degrees that Bloustein offers, future students will be able to allocate new resources in order to complete their future internship opportunity. Due to a special contract between Rowan University and Kennedy Health System, no student associated with an outside institution can intern at this health system. Also, due to Virtua Health System's policy, students are not able to contact employees directly with supervisor requests. However, Bloustein will become a driving force within the South Jersey area that is currently dominated by Rowan University and Stockton University.

Internship Abstract

Title: Medical Staff Services

Name: Michelle Castrillon

Preceptors: Direct Supervisor: Brenda Arrietta, Credentialing Manager
Project Supervisor: Kattia Martinez, Credentialing Specialist

Agency: Trinitas Regional Medical Center, Elizabeth, NJ

Purpose: To improve the verification process in the credentialing department in order to ensure the medical staff remains in compliance with state and federal regulations, accreditation bodies: the Joint Commission, Medical Staff Bylaws and Rules and Regulations.

Significance: The credentialing process, which includes maintaining current documentation on each practitioner, is a method of measuring physician competency and ultimately contributing to the quality of patient care and safety. Hospitals must remain in compliance with the state and federal regulations at all times. At Trinitas Regional Medical Center (TRMC) there are currently over 500 members of the medical staff who are managed by a team of three in the credentialing department. It is a priority for the credentialing department to closely monitor the records of medical staff because the hospital is subject to unexpected visits from Joint Commission and the Department of Health at any time. Any discrepancies found by the Joint Commission or the Department of Health depending on the severity of the discrepancy can have major consequences, which could result in the hospital losing their accreditation or the hospital may be subject to fines for failure to comply by regulations.

Method/Approach: TRMC uses the Medical Staff for the Web (MSOW) System to manage the medical staff electronic files. MSOW generates automatic emails to the practitioners requesting documents that are due to expire. The practitioners will receive three emails; fifteen days prior, five days prior and the day of the expiration for all expiring documents. Documents that have expirations include; medical license, controlled dangerous substance license (CDS), Federal Drug Enforcement Agency (DEA) license and medical malpractice insurance. These documents must be verified upon renewal and kept current in the credential file at all times. It is a state requirement as well as a bylaws requirement for Medical Staff membership and privileging. If a practitioner fails to maintain a current license or malpractice insurance, their privileges are automatically suspended and they cannot practice at the hospital until they can provide the credentialing office with evidence of current documentation.

Outcomes/Results: Expiring 7/31/2017 there are 26 malpractice insurances, 2 CDS licenses, 5 states licenses and 1 DEA license. Using the report I pulled from MSOW I faxed the offices of the appropriate medical staff member in the beginning of the month then I followed up a week later with a phone call and then I waited one more week to follow up with a third request fax. The result was 3 malpractice insurances that are still outstanding, and all CDS, state licenses, DEA are now up to date.

Evaluation/Conclusion: The emails generated automatically from the MSOW system are helpful, but 15 days prior to the expiration date is not enough time to start notifying the appropriate medical staff members to submit the renewed documentation. A more efficient system is pulling a report in the beginning of the month and start notifying within the first week of the month, instead of starting this process 15 days into the month, in comparison, to the month of June where 10 malpractice insurances were received 10 days into the month of July. Therefore, the process of starting to notify medical staff members sooner has proven to be more effective.

Internship Abstract

Title: 2018 Healthcare Equality Index Survey

Name: Muntarin Choudhury

Preceptors: Rayelle Hansen

Agency: Shore Medical Center

Purpose: To create and improve policies and practices for Shore Medical Center related to the equity and inclusion of their LGBTQ patients, visitors, and employees.

Significance: The Shore Memorial Hospital Institution, located in Somers Point, NJ, has not had set policies or procedures regarding offering non - discriminatory quality care for the LGBTQ community since their opening. Working on incorporating policies regarding this community, such as hospital rooming assignments and using the correct language, benefits both parties. The LGBTQ community benefits from unbiased treatment from hospital staff and the institution benefits from becoming more recognized amongst the LGBTQ community.

Method/Approach: The policies and procedures were created from scratch and reviewed by numerous higher ups throughout the hospital's management. Figuring out what to include in policies and what practices would be least controversial was learned from numerous webinars and research done online. Rayelle and I conducted research on the policies that various other hospitals incorporated and used that information as a base for our policies and procedures. Webinars based on these procedures and how to approach them were watched in order to gain knowledge regarding creating policies.

Outcomes/Results: The policies, practices, and procedures were reviewed and accepted by hospital management and then submitted to the 2018 Health Equality Index to be graded. The survey gives criteria regarding what exactly should be involved within our policies. This survey grades the policies and procedures we have created based on this criteria. A perfect score of 100 is required in order to achieve leader status. After submission of the survey, we have received confirmation that we have scored a perfect 100.

Evaluation/Conclusion: There was much involved in the creating and altering of these policies, practices, and procedures. It was an extremely long and complicated process due to the controversial nature of the topic. It required numerous alterations with the policies and sit downs with management to get the okay to submit certain documents. After receiving the perfect score, it came to our realization that exact impact this would have within the institution and the local community. The hospital will be recognized as a leading LGBTQ healthcare provider and will drastically improve its reputation.

Internship Abstract

Title: Analysis of Riverview Medical Center Patient Expiration Documentation Process

Name: Megan Coakley

Preceptors: Direct Supervisor: Kelli O'Brien
Project Supervisor: Kathleen Pouso, Kristine Rovell

Agency: Riverview Medical Center - Member of Hackensack Meridian Health System

Purpose: To analyze the process that Riverview Medical Center follows when a patient expires in the hospital and to propose new ways on how to improve on current expiration process policy.

Significance: As reported by the Centers for Disease Control, nearly half of the deaths that transpire in the U.S. each year occur in hospitals. In 2010, the CDC reported that 715,000 people died in hospitals. Due to this high volume of expiration within hospitals, it is important to have an effective and efficient policy in place to reduce errors and improve quality during the expiration process.

Method/Approach: An in-depth analysis of patient expiration documents was completed to determine areas of current weaknesses in the expiration documentation process. The data reviewed consisted of reports from 40 patients (January 2017 to June 2017): 10 who expired in the emergency department, 10 from ICU, 10 from the 3 East, and 10 random from throughout the hospital. Investigative protocol probed clinical expiration reports, administrative expiration worksheets, and the expiration record book. The data collected focused on 12 areas of interest: did death occur within 48 hours of surgery/sedation, was the death a M.E. case, was the M.E. notified, what was the disposition of the body, did the body call for a communicable disease alert, was the sharing network notified, was the sharing network representative notified, was the body suitable for the sharing network, did the sharing network get consent from the patient family, was the sharing network holding the body, was the body released, and was an autopsy requested. The data was consolidated in a spreadsheet and the number of unviable answers reported for each category was recorded. These "unviable answers" include questions left blank, questions not in line with pre-selected answers, or categories that had conflicting answers. The total number of unviable answers in each report was collected and recorded by unit in 4 categories; 0 unviable answers, 1-2 unviable answers, 3- 4 unviable answers, and 5 or more unviable answers. The recorded data for each unit was then grouped together to provide data for the entire sample.

Outcomes/Results: Of the sample size cohort (n=40), 0 reports had 0 unviable answers, 8 (20%) had 1-2 unviable answers, 22 (55%) had 3-4 unviable answers, and 10 (25%) had 5 or more unviable answers.

Evaluation/Conclusion: Of the reports analyzed, 100% had at least one unviable answer. As a result, it has been determined that the hospital's expiration process policy must be updated. The documents should be consolidated into one clinical sheet and one administrative sheet that records all necessary information based on further research into other legacy Meridian expiration forms and new Epic EHR system forms. Training should also be implemented to ensure consistency throughout all reports.

Internship Abstract

Title: Transition to a Patient Navigation Portal

Name: Alexis Consalvo

Preceptors: Christina Cancel, MBA

Agency: Englewood Hospital and Medical Center

Purpose: To transition from physical patient charts to an electronic database, the PN-Bot, in order to efficiently record and track cancer patients, treatments, schedules, and outcomes.

Significance: The Cancer Treatment and Wellness Center at Englewood Hospital was created in 2015. As the annual number of cancer patients treated increased, the Patient Navigation Program was created. This program was created in order for nurses and administrative personnel to track and manage cancer patient care and treatment schedules. Previously, patient information was recorded on paper, but it made scheduling and sending reminders to patients inefficient as well compiling group metrics such as cancer types impossible. Movement from paper to an electronic database would increase efficiency when recording patient data, which is concurrent with findings cited by the American College of Physicians, while also allowing for group data analysis to recognize trends, evaluate inefficiencies, and find solutions.

Method/Approach: The first step of this project was converting patient information from paper to an excel spreadsheet. Patient data was collected from Horizon Patient Folders, eClinicalWorks, Sci Solutions, and Athena.Net. Important information recorded includes patient ID numbers, cancer type, physicians overlooking care, scheduled appointments, and treatment type with initiation and completion dates. Following completion of the excel spreadsheet, patient information was added into the PN-Bot, the Patient Navigation Barriers and Outcomes Tool. The PN-Bot is an important transition since all navigated patient data to be tracked and added on one platform.

Outcomes/Results: Over 100 patients (n=152) were inputted into the PN-Bot. For the future, data within the PN-Bot will be utilized to track and navigate new cancer patients. Scheduling is more efficient as all patient appointments are recorded electronically in a list format, and navigators can manage patient reminders for upcoming appointments. On an individual level, the PN-Bot integrates technology when registering patients and eliminates the cumbersome nature of reading through patient charts. For group data analysis, important information such as the referral rates of specific physicians and average time between diagnosis and treatment start date can be analyzed in the PN-Bot.

Evaluation/Conclusion: Before the use of the PN-Bot, 286 patients were navigated using physical patient charts. Since the transition, 53% of the navigated patients have been inputted into the PN-Bot. Now, multiple navigators can access and add patient information electronically without sharing one physical chart. In the future, a complete transition from patient charts to the PN-Bot will occur for all 2017 patients and beyond, allowing more efficient tracking of patients and generating group data of the cancer patients at the Englewood Hospital Cancer Treatment and Wellness Center.

Internship Abstract

Title: Coronary Sinus Localization Via the Right Atrium by Intravascular Ultrasound (IVUS): Performance Assessment

Name: Anna Corbalan

Preceptors: Direct Supervisor: Santos E. Cabreriza, M.B.A.
Project Supervisor: Henry Spotnitz, M.D.

Agency: Columbia University College of Physicians and Surgeons, New York, NY

Purpose: Determine the feasibility of using IVUS (intravascular ultrasound) to locate the coronary sinus (CS) in the right atrium (RA) of the heart for the purpose of CS pacemaker lead insertion.

Significance: Cardiac resynchronization therapy (CRT) reduces morbidity and mortality in patients with congestive heart failure¹. Every year, about 100,000 permanent coronary sinus lead insertions are performed, with failure to cannulate the CS for left ventricular (LV) pacing 8%-13% of the time². When conventional endocardial lead insertion fails, an alternative is the epicardial approach. This can be complicated by the presence of scar tissue in reoperative patients. A previous study from this lab reported that intracardiac access to the CS via the RA is a feasible alternative route for LV pacemaker lead insertion³. This option may allow cardiac reoperative patients to undergo pacemaker insertion. Access to CRT will improve patient outcome and reduce the cost of healthcare delivery.

Method/Approach: An explanted porcine heart with chambers filled with saline to maintain anatomical shape was placed in a basin to simulate the heart in a supine patient. The tool used was the Volcano Visions PV.018 (Philips Volcano, United States) IVUS, imaging catheter with a frequency of 20 MHz and visual diameter depth of 2.4 cm. An incision was made into the right atrial appendage and an introducer catheter was advanced into the RA. A total of 5 insertion trials were made. For trials 1-3, the IVUS was inserted through the introducer, realtime video images were recorded, and then the IVUS was removed. The order of the procedures were recorded and time-stamped. In trial 4, a metallic 50 cm introducer guidewire was inserted retrograde through an epicardial incision in the CS and advanced by touch to where the CS opens into the RA. The IVUS was then reinserted and advanced until the guidewire was sighted on the imaging display. The wire was then pulled back and the CS ostium was visualized. In trial 5, the IVUS was reinserted as in trials 1-3. All trials were video recorded and qualitatively analyzed.

Outcomes/Results: In this study, it was noted that the depth of the imaging sector of the IVUS was not large enough for imaging the right atrium. The resolution provided was not clear enough to allow for accurate recognition of the anatomical internal structures of the RA, including the CS.

Evaluation/Conclusion: In this pilot study, locating the CS using IVUS alone was not possible. The method was limited by poor image resolution, an inability to steer the IVUS and lack of reproducibility. In conclusion, using present IVUS technology was not a feasible method for locating the CS for the purpose of guiding a pacemaker lead for CRT.

Citation: <https://docs.google.com/document/d/1tYfwsPs54Rx CZli8fSIuHxcYjUosj-mQckPggttReK5c/edit?usp=sharing>

Internship Abstract

Title: The Preclinical Project

Name: Margo Costidis

Preceptors: Holly Auer, Corporate Director of Communications

Agency: University of Pennsylvania Health System, Department of Communications

Purpose: To analyze news media coverage of and approach to “preclinical” research and obtain information to increase the return on investment of communications activities and strategy aimed at promoting this crucial area of research at Penn Medicine.

Significance: The Communications team desires to effectively and efficiently target its approach to media relations related to preclinical research – primarily, work in “basic science” laboratories that takes place prior to testing new tests and treatments in humans. Due to the complexity of these topics, it is more difficult to obtain media coverage of this work than for “clinical” research in humans. This project will lend a better understanding of how to package preclinical advances with research that is further along the continuum, to tell a comprehensive story about Penn Medicine’s “bench to bedside” research. It also will shed light into the mindset of the reporters and news outlets who publish the stories coming out of Penn Medicine to better pinpoint which outlets to pitch certain types of stories and ideas to.

Method/Approach: A three step qualitative approach to complete the project was outlined and implemented. First, to examine all basic and translational science news coverage tied to top-tier journal publications by using specific keywords to search the outlets: *New York Times*, *Washington Post*, *Boston Globe*, *Philadelphia Inquirer*, *National Public Radio*, and *Time*. Second, list key editors, writers, and reporters at news outlets with close ties with Penn Medicine to send consistent questions to inquire about how the outlets make coverage decisions related to preclinical topic areas. Third, to analyze these findings to identify trends and synthesize findings to map a more effective, targeted approach to work with the media to publicize preclinical research.

Outcomes/Results: This project is not yet completed and therefore, the data is not yet finalized. The data and information collected will enable human ability to make stronger, more informed strategic decisions about which journal publications to write press releases about. The outcomes will guide alternative publicity and packaging tactics for stronger interest for the media. Another potential result may be to limit the releases on basic or translational science topics strictly to top tier science journals. Initial trends noticed included visuals in pitches as well as human connection to the translational science piece to draw more attention and interest. Other trends will be analyzed and synthesized to guide a new road map for basic science publicity.

Evaluation/Conclusion: Although this project has not yet reached a defined conclusion, trends and ideas are beginning to emerge that are shaping Penn Medicine’s approach to preclinical communications in real time. A slide deck will be created at the end of this project to present to Penn Medicine senior leaders as a basis for new discussion about new approaches to basic and translational science media and publicity.

Internship Abstract

Title: Human Resources and Employment Policies in Passaic County, New Jersey

Name: Evan Covello

Preceptors: Supervisor: Barbara De Spirito, Director of Personnel
Supervisor: Lucinda Corrado, Director of Preakness Healthcare Center

Agency: Passaic County Human Resources Department, Paterson, NJ
Preakness Healthcare Center, Wayne, NJ

Purpose: To review, adjust policies, and possibly create employment policies that affect Passaic County employees as required.

Significance: Employment policy in Passaic County has major implications for 2,250 employees, and the over 500,000 citizens that those employees serve. With the policies in place, employee health is protected. According to the Occupational Safety and Health Administration, nearly 50-percent of injuries among nurses and nursing support staff were musculoskeletal disorders. Preakness Healthcare Center is a skilled 406-bed nursing facility that is owned and operated by the County of Passaic. Pursuant to the state law titled, "The Safe Patient Handling Act," the facility must provide a policy in order to protect the staff and well-being of residents. In order to be successful and abide by that law, facilities must create a policy and program to protect the employees in the Preakness Healthcare Center in Wayne, New Jersey.

Method/Approach: A committee within the Preakness Healthcare Center has been created in order to construct the policy and program for the facility. This committee must have 50-percent of its members being hands-on health care workers that represent the different disciplines at the facility. Some of the members will also be selected by the five collective bargaining agencies involved with the facility. For this, I helped to create the committee, and I have kept track of its membership. The committee conducted an initial self-assessment of the facility, based on materials from the Occupational Safety and Health Administration website, specifically to gather data in regards to the employees that have had musculoskeletal problems, and how those problems contribute to costs primarily due to lost workdays from on-the-job injuries. In the first committee meeting, we reviewed and assessed the facility's safe patient handling practices. During the interval before the second committee meeting, I created the first draft of the Safe Patient Handling Policy. This was critiqued in the second committee meeting.

Outcomes/Results: The policy created, by law, will include a requirement to assess the patient handling needs of every individual patient in the facility. It will also ensure that the policy changes are communicated to the Preakness Healthcare Center community, and to the staff with training and educational materials about safe patient handling. The committee will also have the task of providing evaluations and revisions to the policy over time. The committee will assess the usefulness of the equipment purchased, and determine if the program contributes to a decrease in on-the-job injuries due to unassisted patient handling.

[Works Cited](#)

Internship Abstract

Title: Management approach on patient outcome assessment

Name: Brittany Cuellar

Preceptors: Supervisor: Daniel Margolin DPM

Agency: Elite Management/ Leading Edge Medical Center

Purpose: To assess the patient outreach of Leading Edge Medical Center and how it affects the quality of care using patient feedback surveys.

Significance: Patient outreach is critical in making sure treatments are made available to potential patients at a new practice such as Leading Edge Medical Center. Quality of care depends greatly on the treatment getting to the candidates that would benefit most. By assessing which practices most effectively matches patients and treatments, Leading Edge Medical center can implement patient outreach programs that focus on quality of care. A study by McGlynn et al shows that “Overall, participants received 54.9 percent of recommended care”. Effective outreach programs are necessary to bridge that gap. It is particularly important in the alternative chronic pain management treatment offered at Leading edge Medical center because it can be a helpful vessel to combat the increasing opioid epidemic.

Method/Approach: A comparative study assessing the effect of different outreach practices on quality of care will be completed. The practices being compared are: Doctor referral forms, Online engagement and other miscellaneous material. The patient feedback surveys will be used to measure quality of care. The different practices will be compared to identify differences in quality of care. The feedback survey is used to determine which patients were from referrals and which were from other methods of outreach. For this study, quality of care is made up of three components. The first is pain reduction, measured by “Before your visit, rate your level of pain from 1-10” and “After your visit, rate your level of pain from 1-10”. The second is comprehension measured by “From 1-10, how well do you understand the treatments and procedures”. The final component is doctor attentiveness measured by “From 1-5, How do you feel the doctor addressed your concerns”.

Outcomes/Results: Out of 34 patients that filled out the feedback survey (n=34), 23 were referred by doctors, 8 received online material, and 3 responded with “other”. Those referred by doctors saw a 77% decrease in pain levels, compared to 71% and 72% by those who received online materials and other, respectively. There were no significant differences between methods of outreach in the reported levels of comprehension and doctor attentiveness.

Evaluation/Conclusion: Leading Edge Medical Center is a new practice, so the sample size for this study was rather small. Some preliminary conclusions can still be drawn. It seems when doctors refer patients, they report higher levels of quality of care. This result shows the effectiveness of doctor referrals in identifying possible candidates for treatment. A patient referred by another doctor is on average a better candidate for Leading Edge Medical center’s services.

[Citation Page](#)

Internship Abstract

Title: Sodexo Ambassador and Future Leader Intern- Healthy Schools, Healthy Generations Nutrition Program

Name: Crystal DeCaro

Preceptors: Ms. Nawal Maroun, Sodexo Director and General Manager of Long Branch District; Ms. Lorie Cragle, Sodexo Manager of Long Branch Middle School

Agency: Sodexo in Long Branch (9 separate schools/locations)

Purpose: “We rise” To provide and ensure that students from Kindergarten-12th grade (over 5,500 children) have a full and well-balanced meal on a daily basis as per the USDA guidelines; work to improve the quality of life for consumers.

Significance: According to the New Jersey Anti-Hunger Coalition (NJAHC), 1,190,000 people in NJ are food insecure, and about 400,000 are children. This program offers a unique opportunity for exposure to the leading provider of food and facilities management services in North America (rated 19th in the world). The program works to improve the quality of life through the promotion of health and wellness on a local, regional, and global scale (ran in over 80 countries). Local wellness policies are an important tool for parents, local educational agencies, and school districts in promoting student wellness, preventing and reducing childhood obesity, and providing assurance that school meal nutrition guidelines meet the minimum federal school meal standards.

Method/Approach: Through practical work experience on site as well as the use of service spirit, team spirit, and spirit of progress, I will improve the development of the National School Lunch Program (NSLP) through testing and evaluating the current menu and meal plan. Constant research will be used to provide the best in nutrition, nutrition education, and food service for the district’s thousands of children in school. Following the Team Nutrition initiative set forth by the USDA Food and Nutrition Service, the Sodexo Child Nutrition and Wellness program provides training and technical assistance for foodservice, nutrition education for children and their caregivers, and school and community support for healthy eating and physical activity.

Outcomes/Results: The end of the project will result in developing a creative full month’s menu that adds excitement for students, teachers, and parents while incorporating the USDA’s guidelines for a well-balanced and nutritious meal. In order to quantitatively measure the results, meal counts will be taken to evaluate whether there was an increase in the amount of students taking a meal (breakfast or lunch). Program recommendations such as added reading days to the younger students, after-lunch yoga sessions, and increased food taste testings and farmer market events will be assessed in order to qualitatively measure results of the Sodexo nutrition program. In addition, a yearly report will be completed that represents the district’s financial position, program improvements, and future events.

Evaluation/Conclusion: Concluding this internship, valuable industry experience will be gained while working with a leading school (of six) that have been awarded a Bronze HealthierUS School Challenge: Smarter Lunchrooms award (HUSSC: SL). Only 7% of schools throughout the United States are certified as HUSSC schools. The more meals accounted for, the more students are taking a well-balanced, full meal, which ultimately means the more healthy our community becomes. Therefore, Sodexo and their meal program has become a “home away from home” and is succeeding in changing the lives of our youth through nourishment, hope for a full and nutritious meal, and providing comfort.

Internship Abstract

Title: Central Intakes' effect on Improving Pregnancy Outcomes Across New Jersey

Name: Chioma Egekeze

Preceptors: Nancy Mimm DNP, MSN, APN-BC

Agency: New Jersey Department of Health

Purpose: To determine what services under central intake are being utilized the most by each county.

Significance: Central Intake was launched as a supplemental program within the Home Visitation Initiative (created by the Department of Children and families and the Department of Health in 2006) aimed towards allowing providers to refer pregnant women and their families to programs available in their county. The Single Point of Entry and Client Tracking (SPECT) system allows community health workers to track the information of patients as they use each service. Analyzing this data and correlating it with pregnancy risk factors, demographics and populations in each county, allows the Department of Health to have a better understanding on how to mobilize Community Health Workers to better serve their countries and also how to better distribute resources.

Method/Approach: The Single Point of Entry and Client Tracking system (SPECT) was used to retrieve data. Data included referrals made by physicians and the automatic application system. Pregnant woman's demographics were also collected. Program use by county was calculated. The needs of each community were then compared across 21 counties.

Outcomes/Results: High percentages of Black and Hispanic women showed high percentages of negative pregnancy risk factors, such as higher BMIs. There were fewer completions of referrals in counties with a higher Hispanic and Black demographic.

Evaluation/Conclusion: Why is there a such a large difference in completion rates for women of color when it comes to improving pregnancy outcomes? Black and Hispanic woman already start off with high rates of pregnancy risk factors that already give them a negative start once the ipo program begins. In order for the Central Intake system to improve it needs to do a better job of organizing its resources per each county and also it needs to address on how it can improve on risk factors before placing women in certain programs. In the future, I believe that it would be beneficial to survey some of the women in the programs to better understand their needs.

Internship Abstract

Title: Live Well-Vivir Bien Phone App- Body Mass Index (BMI) Calculator Needs Assessment

Name: Helda El-Temawi

Preceptors: Site Supervisor: Manuel Castaneda, Director of Community Health

Agency: New Brunswick Tomorrow (NBT)

Purpose: To analyze the depth of knowledge of Body Mass Index (BMI) within the community in New Brunswick, NJ and assess the need of a BMI Calculator within the Live Well-Vivir Bien phone application.

Significance: Based on the 2016 New Brunswick Community Survey, 48% of children and adolescents in New Brunswick are overweight or obese, compared to 21% nationally. Additionally, 29% of New Brunswick residents live with at least one person who has obesity. Evidence indicates a definitive issue with obesity, as it was found to be the #1 health issue in the 2012 and 2016 New Brunswick Community Survey. Literature has also shown that increasing awareness or knowledge of risk factors, specifically BMI, will improve the adherence of making lifestyle changes such as dietary changes and exercise.

Method/Approach: In conjunction with NBT's Director of Community Health, a validated survey was developed to test the knowledge of BMI and assess the need of incorporating a BMI calculator into the Live Well app. The questions were generated from a peer-reviewed literature study to determine the reasons why BMI was not addressed at patient/doctor visits. Surveys were distributed at community tabling events that are meant to promote the Live Well communications campaign. Data from 22 surveys were analyzed to assess how useful a BMI calculator will be on the app and justify the cost to funders.

Outcomes/Results: Of the sample size cohort (n=22), 72.7% were females and 27.3% were males, ranging from ages 15 to 66. Fifteen participants (68.2%) were concerned about being overweight, obesity heart disease and/or diabetes/high blood sugar for themselves or someone in their family and 12 participants (60%) are extremely interested in learning about how to take care of chronic health conditions. Fourteen participants (63.6%) have heard of the term BMI but do not know what BMI measures, opposed to the 8 participants (36.4%) who have not heard of the term. Sixteen participants (76.2%) do not know their own BMI. Eighteen participants (81.8%) have not discussed BMI with their doctor and 14 participants (63.6%) do not know what health risks are associated with a high BMI.

Evaluation/Conclusion: The results are representative of the 2016 New Brunswick Community Survey confirming that obesity is a serious health concern in the community. According to the survey, more than eight in 10 residents claim to actively exercise for at least 30 minutes, at least once a week and almost half of all residents report eating fruits/vegetables every day, each week. This is representative of the participants being interested in both exercise tips and healthy recipes. It is suggested that although participants find the BMI tool useful, a smaller percentage are likely to use the tool.

https://docs.google.com/document/d/1o46XHLA8YZOKkkttaBB2lsy3za8ltuxqR_zRraR1tik/edit?usp=sharing

Internship Abstract

Title: Sepsis Readmissions and Mortality Rates in New Jersey Hospitals

Name: Dara Elkholy

Preceptors: Direct Supervisor- Aline M. Holmes: Senior Vice President, Clinical Affairs Director

Agency: New Jersey Hospital Association , Princeton, NJ

Purpose: To assess data on how many sepsis patients are readmitted in NJ hospitals within 30 days and compare that to the rate of patients readmitted within 7 days and their mortality rate.

Significance: Sepsis is the most expensive reason for hospitalization. The Centers for Disease Control and Prevention (CDC) reports that the US spent \$20.3 billion dollars on hospital care for patients with sepsis. Sepsis is a life-threatening response to infection, which may lead to tissue damage, organ failure, and death. The New Jersey Hospital Association has reported that New Jersey's statewide inpatient severe sepsis mortality rate is about 30 percent, with a national rate from 20 to 50 percent. NJHA has launched the New Jersey 2015 Sepsis Learning-Action Collaborative with its goals to 1. Implement sepsis early recognition screening and standardized sepsis treatment protocols. 2. Reduce severe sepsis mortality rates in New Jersey by 20 percent.

Method/Approach: An excel sheet was created that included columns that were categorized into: total sepsis discharges, statewide 30 day readmission (total sepsis readmitted within 30 days, rate of sepsis 30 day readmission, readmitted sepsis with expired discharge status, sepsis 30 day readmission on mortality rate), statewide 7 day readmission (total sepsis readmitted within 7 days, rate of sepsis 7 day readmission, readmitted sepsis with expired discharge status, sepsis 7 day readmission on mortality rate), and time. The process of the data collection was through hospital discharge data that is sent to NJHA through a data intermediary.

Outcomes/Results: The total average of sepsis discharges equaled to 5,740 patients. The average of the total sepsis patients readmitted within 30 days came out to 210 patients compared to 82 patients within 7 days. The rate of readmitted sepsis patients within 30 days was 3.65% compared to 1.42% for 7 days. The rate of readmitted sepsis patients with expired discharge status within 30 days equaled to 69 patients and 37 patients within 7 days. The mortality rate for 30 day readmission equaled to 32.95% compared to 45.20% within 7 days.

Evaluation/Conclusion: The data results proved that sepsis patients readmitted within 30 days were greater than patients readmitted within 7 days. It also depicted that the mortality rate for sepsis patients readmitted within 7 days was greater than 30 days. It is important to take into consideration different disparities of those specified sepsis patients that may put them at a higher risk of being readmitted. The location of where a patient is discharged may also impact mortality. Evidence indicates that sepsis patients are being discharged too early. New Jersey hospitals should take these data into consideration to find a best practice solution to insure that patients are being diagnosed, treated, and educated appropriately.

References: <http://www.njha.com/quality-patient-safety/provider-resources/sepsis/>
<https://blogs.cdc.gov/safehealthcare/the-cost-of-sepsis>

Internship Abstract

Title: “Choose Your Cover” Skin Cancer Initiative

Name: Abraham Estrada

Preceptors: Division Head: John Dowd
Project Lead: Viviana De Los Angeles

Agency: The Middlesex County Office of Health Services

Purpose: To measure and analyze skin cancer screenings among uninsured community members and increase skin cancer awareness in Middlesex County.

Significance: It is estimated that one in five Americans will be diagnosed with some form of skin cancer in his lifetime making it the most common form of cancer today. (American Academy of Dermatology) Creating awareness of skin cancer is important in public health because according to the Skin Cancer Foundation 90% of nonmelanoma cancers are caused by ultraviolet exposure. Evidence suggests skin cancer rates could be lowered through practicing better sun safety guidelines. The “Choose Your Cover” initiative aims at helping individuals be better equipped for preventing skin cancer through education.

Method/Approach: A flyer was made for the purpose of promoting free skin cancer screenings that took place at the Milltown Municipal Pool Saturday July 22, 2017. Outreach efforts and follow up calls were made to partners such as Saint Peter's Hospital that provided a screening bus for privacy and patient comfort. Follow up emails were sent to confirm dates and times weeks prior to the event. Pre and post tests were administered throughout the screening process which allowed the gathering of medical and demographic information that will be used to analyze patterns and trends among genders, age, ethnicity, and insurance status. The screening events involved trained medical staff that implemented the screenings while health educators spread awareness of skin cancer and tips for sun safety. The screeners tested for basal cell carcinoma, squamous cell carcinoma, and melanoma.

Outcomes/Results: The sample size of this year’s event was 22 people. All of the participants were above the age of 18 years. It was reported that 2 participants were considered normal and 12 were referred. The 8 remaining participants were reported as inconclusive. Roughly half of the 22 participants received a referral note from the volunteer doctor that could be taken to a personal doctor for a medical follow-up.

Evaluation/Conclusion: This year’s participation increased by 16 more people than last year’s event. There was 4 times more participants referred this year compared to last year’s 3 people, however the referral percentage was similar at 50% because of a smaller sample size. Additionally last year’s event saw a better normal diagnosis turnout by one person. Skin cancer screenings will continue to be administered throughout Middlesex County for the purpose of increasing awareness and improving preventative measures.

Internship Abstract

Title: Hillsborough Township Community Profile 2017

Name: Dana Fuchs

Preceptors: Direct Supervisor: David Maski, PP, AICP, Planning Director

Agency: Hillsborough Planning and Zoning Department

Purpose: To create a community profile for Hillsborough Township to provide a basis for the reexamination of the Master Plan in 2018.

Significance: Every 10 years Hillsborough Township is required to reexamine its Master Plan. The Master Plan for Hillsborough provides information on land use and development, circulation, developments, historic preservations, farmland preservation, open space plans, and much more. Hillsborough is the largest township in terms of square miles in Somerset County. Since Hillsborough's population has been steadily inclining and expected by some estimates to be a little over 50,000 by 2040 the community profile provides a base of information for the planning and zoning department to update the Master Plan to manage projected growth.

Method/Approach: Data collection for Hillsborough has come mainly from the 2010 Census and the 2015 American Community Survey. Data were collected for not only Hillsborough, but also every border town (Branchburg, Bridgewater, East Amwell, Franklin, Montgomery, and Raritan Townships and Manville, Millstone, Raritan, and Somerville Boroughs). Data were collected for the surrounding towns in order to be able to put Hillsborough's information into perspective, see where we stand among other towns in the area, and to have something to compare Hillsborough to in the future in terms of development. The data included income statistics, population density, median age, housing types, residential permits, employment projections, and much more.

Outcomes/Results: Between the years of 1970 and 2015 Hillsborough Township changed drastically. In terms of population, it grew from 11,061 to 39,378, which makes it the third largest township in Somerset County. Hillsborough ranked fourth in Median Household Income with \$112,788 only behind Montgomery, Branchburg, Raritan Township, and Bridgewater. The number of multifamily residential building authorized permits grew from 0 in 2013 to 236 in 2015. The majority of people in Hillsborough hold professional, scientific, management, administration, educational; health or social services jobs and these are also the largest component of industries that are located in Hillsborough. In addition to this the core area of the township defined by the Norfolk Southern Rail Line to the north, the CSX rail line to south, Beekman Lane to the west and Route 206 to the east is the most densely populated area of Hillsborough.

Evaluation/Conclusion: Hillsborough Township is going to continue to grow in terms of population, employment. New Jersey being the most densely populated state it is important to regularly update municipal plans in order to sustain a growing population.

Internship Abstract

Title: Women's Views and Knowledge on Hypoactive Sexual Desire Disorder and Flibanserin

Name: Amanda Garleanu

Preceptors: Direct Supervisor: Gloria Bachmann, MD, Director of Women's Health Institute
Project Supervisor: Nancy Phillips, MD, Associate Professor

Agency: Women's Health Institute at Robert Wood Johnson University Hospital

Purpose: To discover how knowledgeable women are about hypoactive sexual desire disorder (HSDD) and whether they are aware of flibanserin, the only FDA approved medication for its treatment.

Significance: Sexual problems and dysfunctions, such as hypoactive sexual desire disorder (HSDD), are common in women of all ages. The Global Better Sex Survey conducted in 2005 found that approximately 57% of men and 58% of women (n=12,000) report not being fully satisfied with their sex life (Gutsche and Burri, 2017). Particularly, HSDD is the most widely recognized sexual complaint reported in epidemiologic studies (Jayne et al., 2017). In 2015, the Food and Drug Administration (FDA) approved flibanserin, a drug used to treat HSDD in premenopausal women (Gutsche and Burri, 2017). Since its release, there have been minimal surveys which have investigated women's knowledge and perceptions about HSDD and flibanserin.

Method/Approach: Female participants were recruited into the study while waiting for a gynecologic appointment in the Clinical Academic Building 4th floor Obstetrics/Gynecology Department at Robert Wood Johnson University Hospital. After the subjects were briefed about the survey and provided informed consent, the survey was administered by authorized personnel from the Obstetrics/Gynecology Department. The length of time every participant will take is dependent on how long it takes for each to complete the survey.

Outcomes/Results: Of the sample size cohort (n=133), 99 women (74.44%) were not aware that female sexual desire disorder is considered a medical condition before the survey, whereas 28 (21.05%) were. In response to the question of whether they think lack of sexual desire is a significant problem for women, thirty eight women (28.57%) responded "yes," thirteen (9.77%) said "no," fifty three (39.85%) believe "sometimes it may be," twenty five (18.80%) are "not sure," and four did not select an answer. One hundred and thirteen women (84.96%) have never heard of flibanserin before the survey, whereas fifteen respondents (11.28%) have. Of those fifteen respondents, fourteen women know it as the "Little Pink Pill," one knows it as "Flibanserin" and two others know it as "Addyi."

Evaluation/Conclusion: The data reveal that the majority of women are unaware of HSDD (n=99, 74.44%) and flibanserin (n=113, 84.96%). Therefore, more education regarding HSDD and flibanserin should be given to women. By addressing women's lack of knowledge of flibanserin, their potential need for the medication and their reservations about the medication, future diagnosis, counseling and treatment of women with HSDD may be improved.

Internship Abstract

Title: Evaluation of the Medical Reserve Corps of Middlesex County

Name: Emily Giarratano

Preceptors: Direct Supervisor: Lori Karabinchak: Middlesex County Reserves Corps

Agency: Middlesex County Health Services

Purpose: Identify possible areas of improvement for the communication methods of The Medical Reserves Corps of Middlesex County (MRC).

Significance: MRC is a local group of volunteers committed to improving public health, emergency response and resiliency of their communities.. Many MRC volunteers assist with activities to improve public health in their community by supporting prevention effort, and eliminating health disparities.As members of an MRC unit, volunteers are part of an organized and trained team that,in an emergency, get called upon first with little or no warning in order to tend to the community.

Method/Approach: The online survey approach was adopted after telephone contact was deemed unsuccessful due to low participation rates and responses. Over 100 members were contacted via phone and 10 people had responded to the survey. Possible areas of improvement for contact between MRC members and directors were identified. Questions were created in order to organize and streamline the member's affiliation with the MRC. Including ,the emergency preparedness methodology and the future training information. Each MRC participant was given the opportunity to take an online survey that collects data about the individual's standing within the MRC. Data taken from the survey were compiled into an excel spreadsheet and analyzed in order to determine the efficiency of the MRC's past contact methods.

Outcomes/Results: Of the sample size cohort (n=211), 44 members (95.7%) responded with 'yes', 1 members (2.2%) responded with 'no', 1 members (2.2%) claimed 'transfer'. 30 amount of members (68.2%) during emergencies preferred to be contacted on their cell phone, 1 amount of members (2.3%) preferred their home phone, 11 amount of members (25%) preferred their email, and 1 amount of members (2.3%) preferred their work phone. The usage of the MRC account was surveyed whereas 2 members (4.8%) had logged within the past month, 16 members (38.1%) had logged in the past six months, 4 members (9.5%) had logged in over a year ago, 18 members (38.1%) did not remember the last time they had logged in, and 4 members (9.5%) had never logged into their account.

Evaluation/Conclusion: Before the survey, 68 of the 211 members were know as "active members". After the survey 83 of the 211 members are now known "active members". A little less than half (35 members) are healthcare professionals.. Based on these preferences, email and virtual contact for some members serves as an effective strategy to enhance long-term adherence to the MRC.

Internship Abstract

Title: Improving Patient Retention and Satisfaction by Increasing Patient Flow through Marketing & Outreach Efforts.

Name: Melissa Gracias

Preceptors: Direct Supervisor: Dyann D'Esposito-Henske, DPT
Project Preceptor: Karen Hemmes, DPT

Agency: Ivy Rehab Physical Therapy - Westampton, New Jersey

Purpose: To Increase patient flow and improve patient retention at the Ivy Rehab - Westampton Clinic.

Significance: According to the Centers for Disease Control and Prevention, more than 1/3 of adults ages 65 and older fall each year. Falls are the leading cause of deaths due to injuries and the most common cause of nonfatal injuries and hospital admissions for trauma for the aging population (Bellamy, 2011). The benefits of physical therapy are numerous such as avoiding costly surgeries by pre-op therapy, reduction in pain, increased mobility, and many older patients can prevent falls by improving their balance (Gilbert, 2015). It is important for people of all ages who suffer from medical conditions that limit their ability to move and function to seek treatment from physical therapists. Outreach efforts to prospective patients and physicians can help decrease injuries, improve mobility, and educate patients on treatment catered to their needs.

Method/Approach: The therapists evaluated patients aged 25-80 years, that came to the facility for therapy due to joint and balance problems. The therapists examined clinical notes, assessments, and targeted ICD-10 codes to evaluate four specific diagnosis categories for patients that they were treating. Those are: total joint programs (Pre-Op and Post-Op), anterior cruciate ligament reconstruction (ACLR) programs, running programs, and vestibular programs. Data was collected year to date for 80 patients seen at the facility, and of those, 42 were new evaluations at the Westampton facility.

Outcomes/Results: From the sample of 42 new patients, all referred by physicians that were marketed towards, 32 post-operative patients (76%) were seen based on total joint diagnosis, 5 patients (12%) were ACLR, and 5 (12%) were due to running diagnosis.

Evaluation/Conclusion: Overall, the facility has seen a significant improvement in total joint related patient intake, specifically in the month of June. The facility has seen a 7.4% increase in post-op patients in June compared to May due to outreach efforts towards reconstructive physicians. Ongoing efforts such as patient follow-ups to physicians, scheduling luncheons with reconstructive physicians, and end of therapy surveys for patients will show effective ways to increase patient intakes and improve patient retention rates

Works Cited: <https://docs.google.com/document/d/1wDGZAiDwNVR1MFaLLtnRftVQYyR-GR4k5mYjDzWBDtI/edit?usp=sharing>

Internship Abstract

Title: Nonprofit Outreach for the Historic Preservation Grant Program

Name: Marie Guarino

Preceptors: Gardea Caphart, Budget Director
Caroline Pasion, Landmarks Preservationist and Grant Coordinator

Agency: New York City Landmarks Preservation Commission

Purpose: To target not-for-profits that are eligible to apply for a Historic Preservation grant and do outreach to encourage them to apply.

Significance: Since 1988, 215 nonprofits have applied for a Historic Preservation grant from the New York City Landmarks Preservation Commission (LPC). However, in recent years the number of applications has been dwindling. The purpose of the Historic Preservation Grant Program (HPGP) is to provide grants for facade restoration to low to moderate income homeowners and nonprofits that serve a low to moderate income community.

Method/Approach: In doing research for nonprofits to target for outreach for the grant program we went through a list of 3,497 charities in New York from the Charities Bureau. The first step was to narrow the list down to charities that are located in a historic district or are an individual landmark and who are located in a Community Development eligible census tract. The next step is to determine which of those charities are owners of the building they occupy. The remaining nonprofits are the ones that were targeted for outreach. While doing further research on previous not-for-profit grant projects, we noticed that the Historic House Trust has been the recipient of several grants over the years. We looked into all of the properties they manage and found that several are located in CD eligible census tracts, these are: Bowne House, Edgar Allen Poe Cottage, King Manor Museum, Kingsland Homestead, Lewis H. Latimer House Museum, Little Red Lighthouse, Valentine-Varian House, and the Van Cortlandt House Museum.

Outcomes/Results: Out of the 3,497 charities on the list only 65 were individual landmarks or in historic districts in a Community Development eligible census tract. Out of the 65 only 10 own their building and are therefore eligible for the grant. These are the 10 properties from the Charities Bureau list we would like to target for outreach: Dyckman Farmhouse Museum, King Manor Museum, Lewis H. Latimer House Museum, Morris-Jumel Mansion, Van Cortlandt House Museum, The Apollo Theater Foundation, Inc., Boricua College, Henry Street Settlement, Town Hall Foundation, Inc., YMCA of Greater New York (Harlem location). In addition, we would like to target the following HHT Properties: Bowne House, Edgar Allan Poe Cottage, Kingsland Homestead, Little Red Lighthouse, and the Valentine-Varian House.

Evaluation/Conclusion: We reached out to all of the charities on our list and received three applications from the Historic House Trust and awarded a grant to the Lewis H. Latimer house for window restoration and shutter repair and/or replacement. The Henry Street Settlement and Boricua College have reached out to us for more information about the program and have expressed interest in applying.

Internship Abstract

Title: Parkinson's Disease and the Role of Exercise Programs
Name: Elizabeth Hsu
Preceptors: Direct Supervisor: Cheylena Williams, APDA I&R Program Coordinator
Agency: Robert Wood Johnson Community Health Promotions Department

Purpose: To assess and measure the satisfaction of exercise programs offered for individuals suffering from Parkinson's Disease.

Significance: To date, there are approximately one million individuals suffering from Parkinson's disease in the United States. Parkinson's disease is a chronic, progressive disease that affects an individual physically, mentally, and socially. People suffering from Parkinson's disease benefit greatly from programs that assist them in holistically managing their illness. According to the American Parkinson Disease Association (APDA), exercise programs are a critical component in improving the lives of those with Parkinson's disease.

Method/Approach: Surveys were distributed in person and through email to participants of various exercise programs geared towards people with Parkinson's. Both qualitative and quantitative data were collected from this survey. The survey consisted of open-ended questions to assess how respondents felt about their social support, rehab, and attitudes about exercise programs in general. A 5-point ranking scale (with 1- being strongly disagree and 5- being strongly agree) was used to assess how participants felt the exercise programs affected their physical health and social well-being.

Outcomes/Results: From the qualitative questions, all of the participants in the survey reported improvements in physical well-being since starting their respective exercise classes. In fact, 80% of participants strongly agreed that the exercise programs improved their mobility and 48% strongly agreed that their balance improved. 15% of respondents stated that their quality of their life improved and that they experienced less shuffling and freezing, two common symptoms of Parkinson's. Through the qualitative assessment, many people stated "improved mobility, balance, less rigidity, and more energy".

Evaluation/Conclusion: Exercise plays a major role in boosting the mobility and overall well-being of individuals with Parkinson's disease. Participants not only feel improvement physically, but also experience enjoyment at being able to join others in the quest for coping with their illness. The improved components that derive from exercising slows the progression of the disease. Increased fundings and awareness for this type of program will continue to open the door for individuals with Parkinson's disease in living their life to the fullest.

References:

<https://docs.google.com/a/scarletmail.rutgers.edu/document/d/1uyOpMg4vn7logRajBHejZmoUrQi3r3P1j40TDI6qHi4/edit?usp=sharing>

Internship Abstract

Title: Diabetes and Food Insecurity Education

Name: Stephanie Iraheta, Student

Preceptors: Deborah Paulsen

Agency: Eric B. Chandler Clinic

Purpose: To provide the low-income spanish-speaking residents of New Brunswick education to manage their diabetes with their food insecurity issues.

Significance: According to the American Diabetes Association, the prevalence of total diabetes (both diagnosed and undiagnosed) among all Hispanic/Latino groups is roughly 16.9 percent for both men and women, compared to 10.2 percent for non-Hispanic whites (2014). Food insecurity is an issue that is also prevalent among Hispanics in America. According to the United States Department of Agriculture, 22.4 percent of U.S. Hispanic households are food insecure, which is significantly higher than the national average of 14% (2014).

Method/Approach: A majority of the diabetic patients in the Eric B. Chandler clinic were seen by the nutritionist in addition to their primary care doctor. The nutritionist provides the most adequate service in order for the patient to eat as healthy as possible. However, there are many patients that are food insecure and don't have the appropriate resources to get the adequate foods. The methodology used was learning from interpreting for spanish-speaking patients, finding what the issue is, and creating pamphlets for diabetic patients to address that issue. When the nutritionist sees that the patient is food insecure, the nutritionist gave the patients pamphlets and more information on ways in which they can receive help for themselves and their family. The pamphlets include local food pantries, how to read food labels, and what healthy foods to eat. The pamphlets were thoroughly explained to them in spanish so that they are absolutely clear with the instructions and how to get help.

Outcomes/Results: Creating pamphlets was an easy way for patients to learn general guidelines about food insecurity and diabetes. The pamphlets not only gave the patients information about their diabetes and food insecurities, but it provided a way for the patients to bring their nutritionist visit back home, and not forget everything that is told to them only once a year.

Evaluation/Conclusion: Future plans include more data collections on effectiveness of the pamphlets. In order to do this, surveys would be conducted and the survey data would be collected to determine effectiveness and satisfaction with the pamphlets overall.

Internship Abstract

Title: Cultural Heritage Day Forum

Name: Ashly Mae Javier

Preceptors: Melanie M. Ford, Director of the New Brunswick Senior Citizen Resource Center

Agency: New Brunswick Senior Citizen Resource Center

Purpose: To bring together the geriatric community of New Brunswick to raise cultural awareness and to provide an opportunity to celebrate the different heritages found within the resource center.

Significance: The changes in demography of the United States population presents new challenges in providing health care services to the aging population. A study from the *Clinical Interventions in Aging* journal emphasizes the importance of increased cultural sensitivity within the workplace. Challenges such as cultural barriers and stereotypes within the workplace can greatly influence the quality of care that is provided (551). In order to better serve the culturally diverse clientele of the New Brunswick Senior Citizen Resource Center, it is imperative to implement programs such as Cultural Heritage Day to eliminate stigma, and to provide seniors an opportunity to share their heritages with one another.

Methods/Approach:

The preparation for Cultural Heritage Day was senior-citizen driven and divided into several key subcommittees amongst the staff and members: Administration, Program, Decoration, and Recipe Book. The student intern was assigned to the administration committee, whose responsibilities entailed the collection and organization of the data on interested participants. The main task of the program committee was to compose the draft of the program as well as to remind participants about memorabilia deadline submissions and rehearsal dates. Throughout the planning period, the committees met twice a week to update the program and to ensure that the committee heads are on the same page. Finally, the pilot program was evaluated through a self-administered, paper questionnaire.

Outcomes/Results: A total of seventy members attended the program and of those seventy attendees, seventeen of those individuals participated in the program. The forum created an opportunity for members to share their heritage with one another through a cultural garb fashion show, cuisine, music, performances, and personal reflections. The results of the follow-up questionnaire reveal that a majority of the respondents: opinions on different cultures have “positively changed” after the program (95%), are “more interested in learning more about the different cultures around them”(100%), believe that there is adequate cultural sensitivity within the senior center (95%), that attendees felt very exposed to different cultures (70%); and that the respondents would attend/participate in similar future events (90%).

Evaluation/Conclusion:

The questionnaire responses indicate that the Cultural Heritage Program was successful in raising cultural awareness amongst the seniors. This information supports the notion that interventions such as this program can be helpful in better understanding the needs of the clientele.

Internship Abstract

Title: Sex Positive Planning
Name: Brittany Jeffrey
Preceptors: Founder/Executive Director: Stephanie Franklin
Agency: The Masakhane Center, Essex County, NJ

Purpose: Analyze the effectiveness of sex positive workshops among individuals between the age of 14 and 21 years of old in Newark, NJ.

Significance: Individuals between the ages of 14 and 21 are bound to experience various events that can dictate their decisions in life. Currently external forces can play a significant role in an individual's sex education. Roughly 75% of Internet users between the ages of 15 and 24 report turning to the Internet to find information on topics such as contraception and sexually transmitted infections (STIs) (Kachur, R., Mesnick, 2013). With nearly 30+ workshops designed for young people this program provides interactive and informative sexuality information on a weekly basis at local schools and organizations. Providing correct alternative routes to sex positive education. Students have responded to the information with such praise and gratitude. Thanking facilitators for the information and support provided. This is merely a stepping-stone for increased knowledge and informed decisions.

Method/Approach: Workshop participants have been assessed on their incoming knowledge on sexual health during their introduction to workshop series. After evaluating the participant's knowledge level through various activities and open discussions; workshops were built based on the information desired and what facilitators viewed as possibly confusing based on the answers provided and/or the questions asked. Workshop development consisted of warmers, introductions, two learning activities, a back activity, a closing activity, and local sexual health resources. This was the pre constructed plan to help assist during the workshop.

Outcomes/Results:

Among the many possible successes regarding sex positive education it has been shown thorough discussion an intense planning that creating a safe space and encouraging youth can broaden their viewpoints on sexual health.

Evaluation/Conclusion:

Upon the various workshops conducted and intense training that took place it is apparent that not all workshop participants will leave with the same understanding as the person sitting next to them. When looking to wrap up the time spent at The Masakhane Center post discussion testing and satisfaction surveys will be encouraged as a conclusive effort regarding the success of the sex positive education provided.

Internship Abstract

Title: Inflammation or Bacterial Responses caused by Leukocytosis
Name: Gaurav M. Kasabwala
Preceptors: Charumathi Rathnakumar, MD, Medical Director
Agency: Advanced Infectious Diseases Consultants LLC.

Purpose: To provide treatment and forestall cases by developing guidelines on whether an identification of a disease, or its cause of leukocytosis is an inflammatory response or a bacterial stress response.

Significance: A diagnosis of leukocytosis is given when the white blood cell count is above the normal range which can be a sign of an inflammatory response to an infection. Leukocytosis can be triggered by certain stimuli which includes surgery, exercise, trauma, certain medications, asplenia, smoking, obesity, chronic inflammatory conditions, and emotional stress. Symptoms of leukocytosis include fever, weight loss, bruising or fatigue (American Family Physician). A typical leukemoid reaction, however, occurs in the presence of an acutely stressful or inflammatory/infectious event, such as hemorrhage, hemolysis, febrile episodes, sepsis, trauma, pancreatitis, or Clostridium difficile infection. The normal adult leukocyte count ranges from approximately 4,000 to 10,000 cells/mm. Knowing whether the leukocytosis is due to an inflammatory response or a bacterial response can aide in the treatment process.

Method/Approach: Samples for the study were compiled by collecting all the facesheets of new patients that were seen in the hospital that week. The patients are then looked up on the electronic medical records of the corresponding hospital to see what diagnoses were given. All the patients that were then diagnosed with leukocytosis were compiled. Those patients were then categorized as having leukocytosis due to a bacterial stress response, inflammatory responses, both, or none by looking into their other diagnoses.

Outcomes/Results: Out of the random 100 patients that were examined and compiled, 15.4% were categorized as inflammatory response, 53.8% were categorized as bacterial stress responses, 15.4% were categorized as both, and 15.4% were categorized as neither.

Evaluation/Conclusion: Patients were more likely to have been diagnosed with leukocytosis because of a bacterial response than an inflammatory response.

Internship Abstract

Title: Fossil Fuel Infrastructure in Central New Jersey

Name: Christina Kim

Preceptors: Junior Romero, Central Jersey Organizer

Agency: Food and Water Watch, New Brunswick, NJ

Purpose: To improve and increase fossil fuel infrastructure awareness and advocacy amongst people living in Middlesex, Monmouth, and Somerset counties.

Significance: The Williams Transco gas pipeline is proposed to be 23.4 miles of fracked gas pipeline that would pass through Old Bridge, Sayreville, and the Raritan Bay. According to the World Wildlife Organization, gas pipelines are endangering bayshore marine life, tourism, and the environment. The Transco gas pipeline would transport methane gas through schools, residential areas, and the Raritan Bay. Construction of the pipeline would disturb 14,000 acres of habitats of many marine animals. The pipeline will increase public health, environmental, economic, and wildlife risks.

Method/Approach: Community members were informed about public meetings and rallies occurring around them. The Keyport event was a public meeting held to inform people about the dangers the Transco gas pipeline would bring to their community through a presentation and interactive dialogue. Community outreach began two weeks prior to the Keyport event by contacting 3,000 people through phone calls, 200 houses during canvassing, and 100 people through texting. In the end, a 130 people attended the event. Rallies were conducted to show Central New Jersey legislators the public's view about the fracked gas pipeline. To prepare for the rally we reached out to 3,000 people. They were informed about the event through canvassing and phone calls; they were encouraged to take action and become involved with the rally. Prior to these events a thorough community outreach recruitment process occurred. The community outreach included canvassing, telephone, and texting. A flyer with a map and a brief description about the dangers of the pipeline were given to people during canvassing. Important dates and events were shared to people through phone calls or texts. A comparison of the number of volunteers from May to August will show the success rate of these outreach techniques.

Outcomes/Results: In May there were 8,588 volunteers in Middlesex, 4,762 volunteers in Monmouth, and 2,872 volunteers in Somerset. Now there are 8,904 volunteers in Middlesex, 4,840 volunteers in Monmouth, and 3,012 volunteers in Somerset. In total, there are 534 more volunteers over the 2 months. The community outreach served as a way to not only recruit new advocates but to educate and further inform people in the community about the William Transco gas pipeline.

Evaluation/Conclusion: Canvassing, calling people using the telephone, or texting people made it possible to educate and recruit more advocates. An additional step that would improve Food and Water Watch is to have an evaluation or survey at the end of events to see if people are truly learning, find the events informative and getting involved.

Internship Abstract

Title: The Volunteer Program
Name: Younhee Kim
Preceptors: Heidi West Senior Specialist, Volunteer Program
Agency: CMMB HEALTHIER LIVES WORLDWIDE

Purpose: My work is the recruitment and processing of volunteer candidates and creating package materials for targeted partner engagement (Universities, Health Systems, Faith-based group and non-profit organizations). I expect to deliver messages to our partners about CMMB's work "targeting leading causes of illness and death among the most vulnerable women and children."

Significance: According to CMMB's FY16 annual report, 72 children out of every 1,000 do not survive to their fifth birthday and 654 women die from causes related to pregnancy or childbirth for every 100,000 live birth in Haiti, Kenya, Peru, South Sudan and Zambia on average. These rates are 14 and 50 times higher, respectively, than those in highly developed countries because of insufficiently resourced; preventive and health-seeking behaviors are not promoted adequately; and short-term remedial interventions are often fragmented or unable to address underlying causes of poor health such as malnutrition and poverty. By doing CMMB's Faith-based intervention and medical mission will initiative focus on changing this situation to save people's lives.

Method/Approach: CMMB's partnership approach is powerful. Collaborated with 500 partners, including 145 healthcare facilities, 46 government partners, and 54 partners in the field. I put effort on my project which is making completed version of package material for partner engagement like a press kit. By providing package material, I expect of approaching to more potential partners to be understood and engaged with CMMB medical intervention. To create package materials, I researched and studied about CMMB's retrospective reviews, medical intervention projects, and annual reports.

Outcomes/Results: The results of my work with the volunteer program are: recruiting people by sourcing and outreaching. Also, creating package materials for potential volunteer organizations or institutions. This partner engagement package generally include information about CMMB such as University Generals (internship and field volunteer descriptions, volunteer brochure, annual reports and publications), career fairs 2016, and health systems (CMMB's health care project and Children And Mother PartnershipS). CMMB's results according to a review of 2016 annual report are as follows: 2,741 health workers were trained and 686 Volunteers placed in 18 countries and 732 days of service from volunteers in 17 countries. 46,747 people had access to improved nutrition, including vitamin supplements and deworming treatments. 171,336 children provided with critical health services. 545,575 people supported with health services. 57,282 pregnant women received regular antenatal and postnatal checks up. 166,396 women received testing, counselling and treatment for HIV and support for gender-based violence. \$359 million worth of donated medicines and medical supplies distributed in 27 countries.

Evaluation/Conclusion: CMMB needs more strong institutional partnerships with universities and corporations to open doors to a community of potential volunteers who bring passion and dedication to the field, and work with CMMB to implement our CHAMPs programs effectively.

Internship Abstract

Title: Highlighting access to the CINJ Honest Broker
Name: Katie Kuang
Preceptors: Direct Supervisor: Frances Di Clemente, Research Analyst
Agency: Rutgers Cancer Institute of New Jersey

Purpose: To determine the obstacles keeping researchers at CINJ from using the ‘Honest Broker’ as a method of data investigation and offer possible solutions.

Significance: Patient privacy is always an underlying concern in healthcare. According to Boyd, et al. (2006) the increase in complexity of the IT environment, the aggregation of data and the desire of other entities trying to access this information, is putting tension on the ability to maintain this security. While there is a need to increase the security of patient’s protected health information (PHI), promotion of data usage in precision medicine is also required to advance research of treatments. The Honest Broker service at CINJ provides a solution to both concerns but requires researchers’ awareness of the service and the correct sequential steps in requesting and obtaining data for studies.

Method/Approach: Data was compiled about different organizations’ ‘Honest Broker’ service in order to compare and contrast to CINJ’s ‘Honest Broker’ service. The Honest Broker Administrator at CINJ was interviewed about the organization and challenges regarding its service that were not found online. Working in the Precision Medicine department allowed access to a limited number of researchers to be questioned about their awareness of the Honest Broker and how they gathered their data for research. Their answers were analyzed and compared for an intervention method to increase Honest Broker usage.

Outcomes/Result: CINJ’s Honest Broker consists of 6 out of 30 active Honest Brokers. There was limited access to researchers available for questioning due to the current reorganization initiative at CINJ, and the small pool of accessible researchers who work closely with Precision Medicine during the summer months. Five people were approached, 1 from each of the 4 labs that work closely with Precision Medicine, and a clinician. Of the sample questioned, 60% did not know that CINJ has a Honest Broker system and 100% did not have a clear understanding of the workflow associated with obtaining samples and data. Furthermore, researchers have developed their own improper methods of obtaining data as they were unaware of Honest Broker as the regulated method to obtain data when asked how they obtained their data. Mock ‘Honest Broker’ service request pages were developed as an intervention method to increase usage. To request data and samples, it takes 4 clicks in total on CINJ’s site as compared to 1 click on the mock ‘Honest Broker’ page which simplifies the request process. These pages were presented to Precision Medicine staff and the Honest Broker Administrator for evaluation. It was agreed that the proposed changes deemed merit for further review.

Evaluation/Conclusion: Upon analysis of the researchers questioned, people at CINJ need to be informed of the Honest Broker Service. Researchers were open to the idea of an informational seminar on Honest Broker. It is suggested that this seminar be held at the next quarterly staff meeting which has an attendance of over 200 employees and at tumor boards. In addition, there are various ways to obtain data and or specimens but usage of a local Honest Broker provides samples and data specific to NJ’s population and environmental exposure.

Internship Abstract

Title: Desi Rainbow Parents & Allies
Name: Bhupali Kulkarni
Preceptors: Aruna Rao, Associate Director
Agency: NAMI NJ

Purpose: To develop a support group and a curriculum through which to educate South Asian families of LGBTQ+ individuals.

Significance: LGBTQ+ people are three times more likely to face mental health related challenges, including depression and anxiety (NAMI 2017). According to the 2010 Census, New Jersey is home to over 725,000 Asians, and the South Asian population (people with origins in India, Pakistan, Bangladesh, Kashmir, Sri Lanka, Nepal, Bhutan, Myanmar, The Maldives, as well as their diasporas) is growing at the fastest rate (Wu, p. 1). SAMHAJ (South Asian Mental Health Awareness in Jersey) is a NAMI program which aims to address the specific needs of the South Asian population in New Jersey. However, there was very limited LGBTQ+ specific outreach until the creation of Desi Rainbow Parents & Allies (DRP).

Method/Approach: The idea for DRP originated from a group called Asian and Pacific Islander (API) Rainbow Parents in New York City. The beginning of the creation process included building relationships with other LGBT organizations in the area, outreach to local South Asian organizations as well as places of worship, connecting with LGBTQ+ mental health professionals, and speaking to families at community events. A Facebook page was created in June and an email newsletter was sent out during July, allowing the organization to keep in touch with its members on a regular basis.

Outcomes/Results: The final deliverable was the social media campaign, which included the Facebook page and the newsletter. The first planning meeting took place in November 2016 and was attended by five people. Currently, 35 people subscribe to the monthly newsletter and 180 people follow the Facebook page. This network consists of LGBTQ+ individuals, their parents, mental health professionals, and South Asian community members. A curriculum was developed for a regular phone support group. The first call will take place on September 3rd, 2017 and will feature a presentation by a Licensed Professional Counselor followed by a Q&A session. This series will allow for DRP to continue to address the specific needs of South Asian families in New Jersey.

Evaluation/Conclusion: The newsletter was sent out to 35 people directly. Community organizations, such as SALGA NYC, Garden State Equality, and API Rainbow Parents also helped spread it to their networks. This group is growing in size by the week, and since it was sent out, five parents have reached out for support. Although it has not taken place yet, attendance on the first phone support group will also indicate how much this program has grown.

[Link to references](#)

Internship Abstract

Title: Emergency Department Utilization Trends: Intimate Partner Violence and Alcohol Use

Name: Cindy Le

Preceptors: Direct Supervisor: Melissa Dichter, PhD, MSW, Assistant Professor
Project Supervisor: Shannon Ogden, MPH, Research Coordinator

Agency: University of Pennsylvania Perelman School of Medicine

Purpose: To identify trends in emergency department utilization among women with recent experiences of intimate partner violence and unhealthy alcohol use to inform interventions to reduce adverse health outcomes.

Significance: Approximately 42.2 million women in the U.S. experienced intimate partner violence (IPV) in the form of rape, physical violence, and/or stalking in their lifetime (Black et al., 2011). These women often engage in unhealthy alcohol use as a coping mechanism for their experiences of IPV. Unhealthy drinking increases the risk of poor physical and mental health outcomes. The emergency department (ED) is a critical setting for clinical interventions as women engaging in unhealthy drinking and IPV frequently use ED care (Doupe et al., 2012; Kothari et al., 2015). Identifying trends in ED utilization will improve interventions to reduce unhealthy drinking and adverse health outcomes among women experiencing IPV.

Methods: A literature review was conducted on occurrences of IPV and alcohol use related to ED use. Data were extracted from health system records of ED utilization for a cohort of 592 women in a randomized controlled trial from January 2011 to December 2014. Participants were recruited at an ED visit and reported experiences of recent IPV and unhealthy alcohol use. Data were cleaned by updating complaint codes to match their International Classification of Diseases (ICD) codes. Descriptive statistics were conducted in SAS to examine: a) rate of return to ED over one year, b) number of repeat visits, c) characteristics of patients who returned to ED d) reasons for visits, e) range and mean of number of visits.

Results: Over one year from baseline ED visit, more than half (52.2%;n=309) of the study cohort returned for a repeat visit. The number of return visits per person ranged from 1 to 30; the mean number of repeat visits was 1.47. Compared to those with no return visits, women who did have a return visit were more likely to experience: higher levels of IPV victimization, coercive control (36.8% vs. 27.1%), alcohol dependence (16.5% vs. 9.9%) and to be Black (79.5% vs. 66.2%), and have lower levels of education and income.

Conclusion: Women who experience IPV and unhealthy alcohol use are at risk of high rates of ED utilization. The data may not be easily generalizable for all repeat ED use given the IPV and alcohol use specialized population. Interventions to address IPV and drinking may serve to decrease need for ED use among this vulnerable population.

[References](#)

Internship Abstract

Title: Evaluation of a Chronic Disease Self Management Program

Name: Dunstanette Macauley-Dukuly

Preceptors: Claire Roudette

Agency: United Way of Essex & West Hudson

Purpose: To determine improvements in participants' self management following a six-week Chronic Disease Self Management Course (CDSMP).

Significance: The United States has undergone an epidemiological shift from infectious diseases to chronic conditions, as stated by McKeown (2009). There is a need for those diagnosed to learn to manage these conditions on a daily basis, because many chronic conditions can be controlled through lifestyle changes. According to 2017 County Health Rankings, Essex County is ranked 20 out of 21 and Hudson County is ranked 13 out of 21 in health outcomes. In response to this data, United Way of Essex and West Hudson facilitated a six week CDSMP course designed by Stanford Patient Education Research Center to teach those with chronic conditions how to self manage.

Method/Approach: Each CDSMP participant was given an optional pre and post course survey that collected data by likert scale to learn how workshop attendees reported improvement in 6 areas: (1) self-rated health, (2) self-efficacy, (3) social/role activities limitation, (4) physical activities, (5) communication with the physicians, and (6) usage of emergency health services. Twenty-eight out of forty-two participants completed the pre course survey while twenty-six out of twenty-eight participants completed the post course survey. Data from the pre and post surveys were compiled into a spreadsheet and standardized based on Stanford's standards. Then, the means from pre and post surveys were used to calculate the percentage change before and after the workshops.

Outcomes/Results: Fourteen people declined participating in the pre survey, fourteen people did not complete the course, and two people declined taking the post survey. Participants reported improvement in the five of the six areas measured. For overall health, the mean increased 8.5%. For confidence in managing symptoms, the mean increased by 15.8%. For engagement in physical activity, the mean increased by 18.8%. For confidence in communication with physicians, the mean increased by 12.8%. Finally, for overall utilization of emergency services, the mean decreased by 69.6%. The one area that worsened was feeling limited from social/ role activities and the mean increased by 18.1%.

Evaluation/Conclusion: The limitations of the study were that not all participants who began were able to complete the entire six week course and consequently the post survey. This limitation contributed to the sample size (n=28) being too small to make a generalization about the effectiveness of the course. Participants reported an increase in feeling limited from social/ role activities. It is unclear whether those reports are due to a failure in CDSMP's design. A follow up survey could be conducted in 3 months to collect data on participants' improvement in self management, particularly on feeling limited from social activities.

<https://docs.google.com/document/d/1KNsQDvS3MPZetTQswt6BehObuw6h44EgktY3191e6Kc/edit>

Internship Abstract

Title: Communication Plan

Name: Sarah Maher

Preceptors: Direct Supervisor: Michele Capossela, Senior Manager, Patient Navigation

Agency: American Cancer Society, North Brunswick, NJ

Purpose: To develop a communication plan for designated Tier 2 and 3 hospital accounts in New Jersey through a virtual account management.

Significance: According to the American Cancer Society (ACS) as of 2017 in the United States alone, there will be an estimated 1.6 million new cancer cases. The American Cancer Society's mission is to free the world from cancer. To achieve the best outcomes for patients; ACS account managers work together with designated tier 2 and 3 hospitals to provide support to get accredited by the Commission on Cancer and American Colleges of Surgeons. By having an effective strategic communication plan between ACS account managers and hospital systems, it will help provide patients with necessary information regarding their health, finance and emotional wellbeing.

Method/Approach: A qualitative approach was taken in order to create a six month communication plan. By interviewing three account managers regarding what was needed to make virtual communication effective, feedback was provided on what is needed to make communications between ACS and hospital systems more effective and to be sent in a timely manner. In order to create the communication plan, a communication calendar was used to create the templates that would be sent out to hospitals each month. A post survey was sent out to the ten account managers in the North East region. It was a compilation of questions asking account managers to evaluate satisfaction and usage and if it would improve ACS virtual communications with designated tierd hospitals.

Outcomes/Results: Survey was released and completed by 10 account managers in the Northeastern region. Results regarding satisfaction levels showed that 80% of account managers were very satisfied with the communication plan, and 50% of the managers gave the plan 5 out of 5 to mostly likely use for virtual communication, while 50% gave it 4 out of 5 regarding the likeliness to use. Furthermore, 60% found it extremely helpful and 30% found it very helpful. In addition, 50% found it took very long to gather information, while 40% found it somewhat long before the communication plan was implemented. After using the communication plan, 50% found it "did not take long at all" to gather information and 50% found it did not take them "not so long" after using the communication plan.

Evaluation/Conclusion: Given the results of the post – survey, account managers found that the initial 6-month communication plan effective in their monthly virtual communication with tier 2 and 3 hospital accounts. Gathering information for each month took a great deal of their time therefor connection with tier 2 and 3 hospitals will improve with continuous virtual communications by using the communication plan.

Internship Abstract

Title: Outreach Strategy for South Asian Community to Meet Mental Health Needs

Name: Farah Mahmud

Preceptors: Amy Sutton (Executive Director), Manisha Narang (Mentor)

Agency: CSCCNJ

Purpose: Develop an outreach strategy for South Asians in Central NJ to meet their mental health needs.

Significance: This project is crucial for improving the mental health of South Asian cancer patients and their families in central New Jersey. CSCCNJ is a non-profit organization that provides mental health programs and education for cancer patients and their family/friends. CSCCNJ demographic data shows that there are over 300,000 Indian Asians in New Jersey, with a 72.7% growth rate in this state, yet less than 6% of the patients received annually are South Asian. This evidence shows that there are increasing numbers of South Asians who have unmet healthcare needs, but are not seeking out proper treatment. After further research, it has been identified that the lack of knowledge/awareness, as well as cultural barriers, are causing this discrepancy. South Asians lack recognition in current census data and are grouped with the general “Asian/Pacific Islander” category, therefore making it difficult to generate specific numbers regarding mental health issues. South Asians are one of the most difficult groups to reach due to the cultural stigma against mental health and terminal/chronic illnesses.

Method/Approach: The project plan includes developing a surveying method and analyzing and understanding the South Asian community’s healthcare needs and how to address them in a culturally appropriate way. The National Cancer Support Community has now, upon request, added a “South Asian” demographic category to its own survey that will be distributed in NJ in the future. The three main target goals for this project include: 1) conducting research and creating the literature review, 2) connecting with local South Asian organizations to build partnerships for program building, and 3) administering a new survey (that CSCCNJ chapter will distribute) to collect data and information.

Outcomes/Results: By the end of the project, there will be a collection of data on the South Asian mental health in this community. By utilizing the survey method, the data will be qualitative and quantitative information, and will include various questions that will give insight on how to educate this population on mental health and how CSCCNJ can improve their programs to fit the needs of these people. These results can revolutionize how this organization approaches mental health issues for cancer patients who have different cultures and races.

Evaluation/Conclusion: The expected outcome of this project is to meet the mental health needs of the South Asian population affected by cancer. With limited resources and only one staff member leading the project, this project is moving slowly and is currently going through the process of approval for the survey questions. The survey needs IRB approval, so there is a delay in progress, however there is hope to receive approval by the end of August, with plans to administer the survey in September. Therefore, the data will not be collected until the Winter, after IRB approval and distribution to local South Asians.

Internship Abstract

Title: Hospice Fundraising for Alternative Therapies
Name: Sabah Mahmud
Preceptors: Sara Culang, Manager Community Outreach and Volunteer Services
Agency: Stein Hospice, Somerset, New Jersey

Purpose: Launch a fundraising campaign to raise money to support alternative therapies for hospice patients, including: massage, music, and aromatherapy.

Significance: Hospice care relies solely on funding from governmental programs, insurance, grants, and donations. As a non-profit health service for the terminally ill and end-of life patients, the services provided by Stein Hospice are crucial to the last life experiences that these patients have. Unfortunately the alternative therapies programs that hospice provides does not have sufficient funds to offer all of the services on an ongoing basis. Stein Hospice not only offers clinical and medical supervision and home health aide, but also offers alternative therapeutic services to their patients including aromatherapy, music therapy, and massage therapy. These alternative therapeutic programs are in need of funding to be sustained over the next couple years. Fundraising efforts are needed to finance the costs of the alternative therapeutic programs since they are not covered by insurance, medicare, or medicaid. The direct mail fundraising campaign will focus on family and friends of past patients who experienced Stein Hospice care. Stein Hospice's goal is to continue to provide the therapeutic services to future patients so that their end-of-life experience can be as peaceful and relaxing as possible.

Method/Approach: A direct mail fundraising requires an understanding of the target recipients and their approach to donating. This campaign began with creating a list of participants from records of deceased patient's family and friends contact information. The next step was creating an empathetic letter asking for donations through trial and error. Multiple versions of the letter to test the format and content was created to find the most suitable letter to send for the final mailing list. Finally, all feedback and analysis of the donation amounts for use in updating the direct mail campaign for future fundraising attempts will be completed.

Outcomes/Results: The trial direct mail fundraising campaign will improve the understanding of how to market to the patient's bereaved family and friends for donations. By collecting and recording the feedback, Stein Hospice will be able to improve the direct mail letter and format while also understanding the cost limits and what to ask for in future donation requests.

Evaluation/Conclusion: The success of the direct mail fundraising campaign will be evaluated depending on feedback and donation returns from the mailings. Data will be collected on which study group and which letter format received the most donations.

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Internship Abstract

Title: Health Care Experience Evaluation Among Patients with HIV
Name: Christian Marin
Preceptors: Direct/ Project Supervisor: Cindy Leon, Public Health Representative
Agency: Eric B. Chandler Health Center

Purpose: To gather information on patient's experiences and propose service interventions to improve the patient services provided.

Significance: According to the Center for Disease Control and Prevention (CDC), in 2015, 39,513 people were diagnosed with HIV infection in the United States. The number of new HIV diagnoses fell 19% from 2005 to 2014. Black/African American men who have sex with men (MSM) and bisexual men accounted for the largest number of HIV diagnoses (10,315), followed by white MSM and bisexual men (7,570). Among Hispanic/Latino MSM and bisexual men, diagnoses rose by 24%. According to the New Jersey State Department of Health in 2015, there were a total of 4,398 individuals infected by HIV. Eric B. Chandler is one of the institutions that helps aid and support individuals from this community, they currently assist over 350 patients for HIV.

Method: A 33-question survey was distributed to the RN, LPN, and other program staff to be given to patients as they came in for their follow up medical visits. The survey evaluated the patient's experiences by looking at access to care, waiting for the services, the provider, and overall assessment of the facility. Surveys were distributed by program staff to avoid bias answers and were administered to patients, for the most part, prior to being seen by their medical provider. The survey was conducted in both English and Spanish at the health center's George Street location.

Results: Of the 126 participants, 54 (42.9%) were African American (Non-Hispanic) and 43 (34.1%) were Hispanic. Of those that rated their experience with a care provider, 109 (86.5%) believed that their care provider listened to them carefully. In regards to the wait assessment, 107 (84.9%) said that they thought the staff was working hard to keep their wait short and 119 (92.1%) agreed that the waiting time was acceptable. 97 (77%) of the participants would recommend this facility to a family member. However, 59 (46.8%) of the participants believed that the office hours were inconvenient.

Evaluation/Conclusion: The survey results varied in different areas, but for the most part patients provided positive feedback regarding services received at the health center. This is a good example of maintaining a positive relationship with the minority community due to the fact that most institutions have relatively negative relationships with their providers due to medical services and distrust with their providers. However it is important to continue providing these types of services to patients and improve upon the services already provided. In order to do so, surveys like these should continue to be implemented on a 6-month basis with a more open ended structure and direct questions to get more in depth opinion of the services provided.

Internship Abstract

Title: Community Health Improvement Plan 2.4
Name: Sadaf Memon
Preceptors: Serena Collado, Director of Community Health
Agency: Robert Wood Johnson University Hospital Somerset- Community Health Department

Purpose: Increase the respondents in Somerset County who participate in any physical activity by 3% by 2019 through educating corporate worksite wellness programs as well as recreational programs for the community.

Significance: The obesity rate in Somerset County in 2017 is 23% based on data from County Health Rankings. According to the 2015 Somerset County Community Health Assessment survey, 2,002 Somerset County residents were given telephone surveys as well as six focus groups were conducted. To increase residents who participate in physical activity in Somerset County by 3%, would mean 61 people would have to show evidence that they are physically active. Economic and societal consequences include high medical costs, lower productivity, and increased mortality and disability (Overweight and Obesity, 2016). According to the CDC, in 2016, the nationwide obesity related absentee ranged between \$3.38 billion and \$6.38 billion, signifying the importance of corporate worksite wellness programs.

Method/Approach: The community health department at RWJ Somerset has a HealthHike walking program at the mall. About 200 previously registered Health Hike walkers out of the 2,000+ members were called to see if they are interested in the program. Registered walkers are questioned to see if they are physically active and if not, are signed up for the challenge. Weekly, participants will report number of miles completed by showing evidence via smartphone apps such as FitBit or Health. At the end, participants who have completed the challenge will receive a prize. In order to incorporate worksite wellness programs, 3 companies (large, medium, and small sized) with proper worksite wellness programs will mentor 3 companies without worksite wellness, framing around cost savings. The mentorship program will start out with Brother, a company that wants to incorporate walking paths inside and outside the building. Robert Wood Johnson University Hospital Somerset will be mentoring Brother and will develop a model plan for other companies to frame their worksite wellness on.

Outcomes/Results: 32 people signed up and 22 people showed up for the summer challenge first meeting. According to this, 1.1% of the 3% goal is in process of being completed. The worksite wellness mentoring program model is underway with developing walking paths and mile trackers inside and outside the building.

Evaluation/Conclusion: Increasing the number of physical activity programs available for the community as well as increase participants will contribute to decreasing obesity in Somerset County and increase physical activity as well as further educate the community. Incorporating ongoing programs as part of already existing organizations will further engage and motivate the community.

Citations https://docs.google.com/document/d/1zBjp-ho7p2kvDMiL-3S14N7nUI_aY-Li2k6_zx6n4/edit?usp=sharing

Internship Abstract

Title: Healthy Corner Store Initiative: Improving Childhood Nutrition in Low Income Neighborhoods

Name: Robert Moncayo

Preceptors: Direct Supervisor: Sara Elnakib, Community Health Sciences Educator
Project Supervisor: Mariel Mendez, Community Health Sciences Educator

Agency: The Rutgers Cooperative Extension of Passaic County

Purpose: To improve access to healthier foods in low income areas of Passaic County by implementing changes to local corner stores in the neighborhood.

Significance: In the United States approximately 29.1 million people or 9.3% of Americans have diabetes. Likewise, heart disease is also the number one killer in adults and kills approximately 375,000 people each year (CDC, 2017). The problem is these are just two of the chronic diseases that can be prevented by better nutrition and a healthy lifestyle. Low-income communities around the country often illustrate a common problem leading to high levels of chronic disease among residents; food deserts. Defined by the USDA, food deserts are that lack fresh fruit, vegetables, and other healthful whole foods, usually found in impoverished areas. Given the food environment in the City of Passaic, the city as a whole is considered a food desert with no large grocery stores.

Method/Approach: In order to increase access to healthy foods and to create an environment where the healthy choice is the easy, economical choice, the Healthy Corner Store Initiative was implemented in the City of Passaic in January 2017. Six corner stores in Passaic joined the program, which provided the stores with a six-week training and necessary equipment such as refrigerators, produce baskets, shelving displays, and a blender among other to increase fresh fruits and vegetables. To evaluate the progress and sustainability stores, a Healthy Corner Store Scorecard was created. The scorecard assesses the store environment, quantity of healthy foods, quality of food, and what necessary changes need to be implemented.

Outcomes/Results: The corner stores have been improving since our initial store evaluations by increasing advertisements for healthy foods and placing healthy foods in more visible, eye-level places within the store. The program's long term goal is to decrease nutrition related chronic disease incidence among residents. However, the stores have already demonstrated an increase in the amount of produce and other healthy products available.

Evaluation/Conclusion: The stores vary in improvement based on the participation of the owner and attitude toward changing the store. Overall, the stores have seen improvements in the availability and awareness of healthy foods and produce. The Healthy Corner Store Scorecard will continue to be a way for people in the community to evaluate and offer feedback to their local community corner stores. This will allow store owners to make improvements based on the communities' needs.

Internship Abstract

Title: Youth Outreach and Preventative Health Education

Name: Daniela Morillo

Preceptors: Direct Supervisor: Kari Korhonen, Director of Social Services;
Project Supervisor: Francis Hoti

Agency: Art In Tanzania / Faraja Clinic

Purpose: To assess the needs of the community of the Madale area and develop a program that can potentially reduce the rate of preventable illness and support health education as well as facilitate a relationship between health providers and community.

Significance: HIV is the number one cause of death in the area of Tanzania, of the top 9 causes of death 7 of them are exacerbated and connected to HIV. Data from the THMIS 2010-2011 indicates that 67% of women and 50% of men had been tested for HIV at least once. However, Tanzania's UNAIDS 2014 progress report found in 2013 only 28.4% of people aged 15-49 had taken an HIV test in the past 12 months and knew their results. Furthermore, testing rates are declining, as this figure stood at 35.4% in 2012. Tanzania suspends U.S.-funded AIDS programs in a new crackdown on the homosexual population.

Method/Approach: The approach will be a development of a program that can be brought to the community and directed at education that can be effective. The goal will be finding a way to introduce information in a community that views the topic as taboo given the conservative nature of the Tanzanian people. From time in the community and visits to health centers the political climate does not allow for proper record keeping to be kept regarding HIV and treatments, meaning record and data keeping will not be very productive or fruitful to my program development.

Outcomes/Results: Developed a program that would allow for a balance between fear or repercussion and opportunity for education. We began with group meetings of 3 locals and in our last meeting we had organized upwards of 22 locals who came to ask questions and be educated. It was found that while teaching basic sanitation and health as well as preventive measures the program still needed the addition for the opportunity of suggestions and requests from the locals. What was found that locals would stay after in groups of one or two to ask questions privately rather than feel comfortable enough to ask these questions in public. To remedy this a question box was established with complete anonymity.

Evaluation/Conclusion: This allowed a relationship to be built between the locals, myself and the health providers. Healthcare providers could use the program as a proxy, locals could use it as a place of education with judgement and stigma and health care providers to become more informed about their needs population and how they could positively effect change in their community.

Internship Abstract

Title: Comparison of Member Engagement by Year
Name: Erica Mullen
Preceptors: Kara Sendell, Events Management & Internship Supervisor
Agency: Move For Hunger

Purpose: To analyze member engagement during the first six months of the year, comparing 2017 to 2016, using pounds of food donated as indicator of engagement.

Significance: More than 42 million Americans deal with food insecurity each year according to Feeding America. However, 40% of food produced ends up in landfills. With such a high rate of food insecurity paired with the large amount of food that is wasted, there is a need for extra food donations to reach local food banks rather than a dumpster. Move For Hunger is an organization that works with the relocation industry to collect food for food banks across the country and reduce food waste. Since the organization was founded, 8,000,000 pounds of food have been donated to food banks across North America. Identifying member engagement by the first half of the year is necessary to locate possible areas of improvement to increase food donations.

Method/Approach: An analysis of member engagement was done to determine member engagement using pounds collected as indicator. Data was collected from Salesforce. Information from completed food collections from the first six months of 2017 and 2016 was analyzed. Data obtained included type of food drive, pounds collected, the moving company involved, and where the food drive was held. This data was put into an Excel spreadsheet with three categories; Food Drive, Campaign/Repeat Event, or Fill-A-Truck. The moving companies involved in 2016 were separated into four categories based on pounds of food collected: 1-100 pounds, 101-500 pounds, 501-1000 pounds, and 1000+ pounds. The information from 2016 and 2017 was cross tabulated to show total pounds donated in the first six months of both years, and to analyze moving companies involved in both time frames.

Outcomes/Results: Of the first six months of 2016, 678,988.4 pounds of food were collected overall. In 2017, 1,165,751.5 pounds of food were collected during the first six months, a 71.69% increase from the first half of 2016. 58 moving companies were involved in the 2016 time frame. Of those, 53% also participated in 2017, with 74.2% in the 1000+ category for 2016. Whereas, 77.78% of members that have not participated in 2017 are in the bottom two categories, suggesting food collection success may lead to more engagement.

Evaluation/Conclusion:

Follow-up outreach efforts to movers involved in large quantity collections in both years should be made. More research can be done to determine best practices to holding a successful food drive, and included in further outreach to other movers. Campaigns accounted for the largest food collections in 2017 thus far, so separate efforts could include increased member involvement in campaigns.

Internship Abstract

Title: Developing an Action Plan: Mental Health Issues in the Asian American Community at Rutgers University-New Brunswick.

Name: Tiffany Ng

Preceptor: Direct/Project Supervisor: Francesca Maresca, Ph.D., CHES, Director of H.O.P.E

Agency: Health, Outreach, Promotion, Education (H.O.P.E.)- Rutgers Student Health, New Brunswick, NJ

Purpose: To identify the key issues that impact the mental health of International students and First-generation self-identified East Asian American students and develop an action plan for Rutgers University to address these issues.

Significance: Asian Americans have a 17.3% overall lifetime rate of any psychiatric disorder and a 9.19% 12-month rate, yet Asian Americans are three times less likely to seek mental health services than Whites. Asian American students at Rutgers University make up 24.4% of the population. Asian American college students experience a number of stressors, such as racial discrimination, pressure to conform to stereotypes, struggles with navigating multiple cultures, language barriers, lack of social support and academic struggles.

Method/Approach: The method included a literature review of 10 open ended pretested surveys and semi-structured interviews with key experts about how students utilize the mental health services offered at Rutgers. There were 345 students that were between the ages of 18-20 years old and self-identified as Chinese, Vietnamese, Korean, or a combination of these ethnic groups. The survey was based on their mental health utilizations factors and was divided into low-risk, medium-risk, and high-risk groups.

Outcomes/Results: Without specific questions relating to stigma, 40% of the participants reported family contributions to mental health stigma, 25% reported community contributions to mental health stigma, and 88% discussed the cultural mismatch between U.S (Western) and the Asian (Eastern) mental health services. Only 8.6% of the students interviewed sought any type of mental health services or resource compared to nearly 18% of the general population. The qualitative analysis identified three underutilization factors: Asian family contributions to mental health stigma, Asian community contributions to mental health stigma, and a mismatch between cultural needs and available services.

Evaluation/Conclusion: Asian international students at Rutgers underutilize counseling services from the interviews that were conducted. It is vital that students are oriented to the various on-and off-campus offices and resources available and that the services provided are culturally sensitive. The best practices for both population are to improve the staff's cultural competence, provide bilingual services, increase financial aid and create a campus climate that values Asian culture. The limitation to using surveys was that the participants may have underreported the prevalence of their help-seeking behaviors due to stigma. Evidence-based interventions should focus on raising mental health awareness in the Asian American community at Rutgers.

References:

https://docs.google.com/document/d/1vntwNnD8qksmj6_mUFpRIIR1QN5AH03Wx3MI0pFogLk/edit?usp=sharing

Internship Abstract

Title: New Brunswick Service List for Indigent Populations, NB SLIP

Name: Christiana Osawe

Preceptors: Margaret Drozd, MSN, RN, APRN-BC, Director, Community Health Services; Zachary Taylor MEd, CHES, Coordinator, Healthier Middlesex

Agency: Saint Peter's University Hospital, Community Health Services, New Brunswick, NJ

Purpose: To create a pocket-sized resource guide for the indigent population living in the greater New Brunswick area that may increase access to local social services and improve current living conditions.

Significance: In 2015, 43.9% of persons in New Brunswick lived below the poverty line, making this city the poorest in all of Middlesex County. The 2012 Community Health Needs Assessment (CHNA) for Saint Peter's University Hospital & Robert Wood Johnson University Hospital identified that elevated rates of unemployment, food insecurity, and even homelessness occur with high rates of poverty and are risk factors to poor health. Homelessness, and its precursor poverty, are public health issues that can effectively be tackled by increasing public access to affordable social services.

Method/Approach: After studying demographics from City Data, New Brunswick was identified as the poorest city in Middlesex County based on number of persons living below national poverty level. Literature reviews of studies of indigent populations as well as the 2016 Middlesex and Somerset Counties Community Health Improvement Plan (CHIP) and 2012 CHNA helped determine areas of most need. A meeting with the director of Coming Home helped target specific needs of persons in danger of losing their homes or currently without homes in the county. Utilizing data from the National Health Care for the Homeless Council, 211.com, and existing Middlesex County resource guides, a table of contents and possible cohort list was drafted. A brief questionnaire was devised to collect information from said organizations and to determine their service use patterns in 2016 before distribution of the guide. An approximate number of individuals who will have access to guide was determined using existing data from Saint Peter's University Hospital Community Health Services (SPUH CHS) screening sites in 2016.

Outcomes/Results: A total of 35 local social service organizations were originally listed to be included in the guide. 19 organizations were contacted with a survey, and 12 of the 19 returned it. 11 of the 12 organizations agreed to be included in guide. A total of 7 out of the 35 organizations declined. The survey generated that a maximum of 15,000 clients were serviced per organization in 2016 based on those that completed the survey. An estimate of 2,931 persons in New Brunswick and 7,536 persons of Middlesex County will have access to the guide based on SPUH CHS 2016 patient data. The NB SLIP guide, including the contact information for a total of 28 local social service organizations, will be printed and distributed through Saint Peter's to about 100 local sites by the end of 2017.

Evaluation/Conclusion: The NB SLIP will provide community members on-hand access to resources. This guide may be reproduced into multiple formats for distribution by Saint Peter's in the future. Local cohorts can ask incoming clients how they heard of their service to track if the guide is increasing service use patterns in these organizations. Annually, the SPUH CHS department may distribute a follow up questionnaire to participating organizations to ensure accuracy of information in the guide and update accordingly.

Internship Abstract

Title: Assessing the Effectiveness of Incentives and Rewards on Response Rates

Name: Carla Palomino

Preceptors: Karina Veliz, Research Coordinator

Agency: Bloustein Center for Survey Research

Purpose: To assess the effectiveness of incentives and rewards on the New York City, Michigan, and Maryland response rates for the Pregnancy Risk Assessment Monitoring Survey (PRAMS) research project.

Significance: In order to collect usable data for the PRAMS research project that is representative of the overall birth population, each project must reach a target response rate. This makes the use of incentives and rewards in survey research crucial when trying to reach target goals. According to Institute for Research in the Social Sciences, prepaid incentives yield significantly higher response rates than no incentives (IRISS,2012). To ensure that each project reaches their goals it is vital the BCSR implements best practices for incentive/reward usage. This research focuses on the differences between incentive/reward, and no incentive/reward projects in order to establish which practice is most effective in increasing respondent participation.

Method/Approach: The NYC project provides participants with an incentive prior to completion of the surveys, MI provides a reward after the completion of the survey, and MD does not provide either. An analysis on the mail/phone response rates per state was done to assess the effectiveness of incentives/rewards. Data from a sample of women (n=7,773) was exported onto an excel spreadsheet and then broken down into respective states.

Outcomes/Results: NYC had the highest overall response rate with 70.2%, MI followed with an overall 51.9% rate, and lastly MD with an overall 51% rate. When these results were further broken down, NYC which provides the incentive in the mail, resulted in the highest rate for mail surveys with a 51.1% rate. This was followed by Maryland with a 35.6% rate, and MI with a 30.7% rate. However, MI which provides a reward after the completion of the phone survey, resulted in the highest rate for phone surveys with a 20.2 % rate. This was followed by NYC with a 19.2% rate, and lastly MD with a 16.3% rate.

Evaluation/Conclusion: It can be concluded that incentives do yield the overall highest response rates. However, this works best when the incentive is mailed or offered prior to the survey being conducted. Additionally, the data reflect that rewards may yield higher response rates for phone interviews than incentives. Interestingly enough studies have shown that incentives yield the highest rates. While this may be true, when broken down into more specific terms, this conclusion does not always apply. To conclude, the field of survey research could benefit from a more in depth analysis of the factors that may influence a particular population to respond and the effects that incentives and rewards may have on these populations and the data collected.

Internship Abstract

Title: Turn-around time assessment

Name: Chilka Patel

Preceptors: Project Supervisor: Veronica Vasquez, MHA, CN-BA Nationally Certified Breast Cancer Navigator. Direct Supervisor: Dr. Barry Levinson, MD Medical Director of Medical Oncology. Juanita Fryar, Administrative Director of Medical Oncology.

Agency: Trinitas Regional Medical Center (Comprehensive Cancer Center)

Purpose: To analyze the turn-around time of diagnostic mammogram of abnormality to recommended core biopsy time.

Significance: Breast cancer is the most commonly diagnosed cancer in women. According to National Breast Cancer Foundation, each year it is estimated that about 246,660 women in the United State will be diagnosed with breast cancer, however more than 40,000 will die from this disease. A screening mammogram is one of the best methods to detect early breast cancer for women. Finding cancer early is when it is most treatable and the treatment works best, since the cancer is still small. Upon diagnosis of a suspicious mammography, follow up with patients is critical including diagnostic tests and core biopsy. Time to follow up has become an important factor in assessing quality of care for breast centers and hospitals.

Method/Approach: Breast Imaging-Reporting and Data System (BI-RADS) sorts the results into categories numbered 0 through 6. Weekly diagnostic mammograms executed in Q2 of 2017 (April, May, June), data were exported with recommended biopsy pending. Total of 46 women were categorized with BI-RADS 4 and 5 (suspicious abnormality or highly suspicious of malignancy). 46 women were documented in the excel spreadsheet with specific indicators such as: Name, MR#, race, ethnicity, age diagnostic date, biopsy date, biopsy procedure, biopsy results, and referring physician. Once the patients are categorized a BI-RADS 4 or 5, they are automatically given a biopsy date before leaving the center.

Outcomes/Results: The results of 46 women who were categorized BI-RADS 4 or 5 of Q2; In April, 12 were recommended biopsy of which: 2 were malignant, 5 were benign, 2 was recommended for surgical excision, and 3 were unresolved (patient who did not follow up for biopsy). In May, 13 were recommended biopsy of which: 3 were malignant, 9 were benign, 1 was recommended for surgical excision, and 0 unresolved. Lastly in June, 21 were recommended biopsy of which: 6 were malignant, 11 were benign, 1 were recommended for surgical excision, and 3 were unresolved.

Evaluation/Conclusion: In conclusion, the average wait time from diagnostic mammogram to core biopsy was 8.9 days. Of the 12 patients that were found with positive lesions, all were put through the health care system and within the national standard of care guidelines of the 46 women, a total 7 are pending as unresolved. A system of follow up was implemented by radiology to ensure patients adhered to doctor's recommendation to biopsy.

Internship Abstract

Title: A Plan to Increase Flu Shots for Rite Aid

Name: Zaid Rahman

Preceptors: Project Supervisor: Sandhya Katepalli, Pharmacist at Rite Aid
Direct Supervisor: Kate VanWhy, Pharmacist Manager at Rite Aid

Agency: Rite Aid (East Windsor, NJ)

Purpose: To create a systematic plan to increase the number of flu shots for Rite Aid and to promote prevention from the flu for local businesses and the general East Windsor community.

Significance: According to the CDC, the burden of seasonal influenza among adults aged 18-49 years was estimated to include approximately 5 million illnesses, 2.4 million outpatient visits, 32,000 hospitalizations, and 680 deaths. Flu in the workplace costs U.S. businesses approximately \$10.4 billion every flu season. These evidences indicate that there are many who still do not get the flu shot, and that there is a need in flu vaccination education. Reasons why people do not get the vaccination are misconceptions towards the vaccination, a lack of trust, and indifference. By creating a health education program, Rite Aid can address concerns that people have and develop a strategy to persuade customers and businesses to get the flu vaccination.

Method/Approach: A health education intervention was conducted to help persuade businesses and customers to get the flu vaccination. The first step was to do research on the flu and its vaccination, based on what customers needed help understanding and recommendations from Rite Aid staff. Businesses were then contacted to schedule flu clinics by sending emails, presenting flyers, and making telephone calls. After this, brochures and posters were created based on the misconceptions that customers had, and the feedback they provided on what they wanted to learn. An online survey and in store survey was conducted, which gave great insight into what customers were thinking. From these surveys and conversations, many customers agreed to the importance of getting the flu shot.

Outcomes/Results: More than twenty businesses were contacted, and about twenty customers are educated everyday. From the online and in person surveys, about 30% of responses said they have gotten the flu vaccination before, and 35% of responses said they will get the flu shot again this year. Most customers who were shown the brochure reacted positively, and with increased marketing, the goal is to get 1,230 shots. Last year Rite Aid, East Windsor did 1,180. Those who said they did not want to get the shot mostly used no insurance or a lack of trust in vaccines as reasons.

Evaluation/Conclusion: Posters, brochures, and contacting businesses serve as effective strategies to educate people about the importance of the flu vaccination. Rite Aid is able to reach over 100 customers per day. In the coming months, more surveys will be conducted and the number of flu shots being given per week will be monitored to make sure 1,230 shots are given. This will be the indicator to the effectiveness of the educational strategy that has been created.

Internship Abstract

Title: Health in All Policies Resolution

Name: Moustafa Ramadan

Preceptors: Direct Supervisor: Jeffrey C. Grosser, Public Health Officer

Agency: Princeton Health Department/Princeton Municipality

Purpose: To establish a Health in all Policy (HiAP) practice within Princeton in order to prioritize health considerations into all areas of policy-making and decision-making within the Municipality.

Significance: HiAP builds on the concepts of “health public policies” and “intersectoral action for health,” which were first introduced by the Alma-Ata Declaration (WHO, 1978). The goals of Princeton’s council for 2017 was to incorporate health considerations into decision making across all policy areas in order to provide a well run community. This strategy is to include health considerations in policy making across different sectors that influence health, such as transportation, agriculture, land use, housing, public safety, and education. Some health issues are so complex that they are best tackled not only by traditional health policy but also by policies and issues that affect the social determinants of health. For example, 2012, Los Angeles, a multiagency task force was tasked with developing and implementing policies to encourage safe walking, biking, and access to transit, providing access to outdoor physical activities.

Method/Approach: First, research regarding Health in All Policies was excessively done before reviewing HiAP with the Princeton Board of Health. It was determined that the best way to establish HiAP within Princeton was with a checklist. A checklist was created in order to introduce this initiative throughout the municipality as a step towards enacting it within Princeton. The checklist mainly focused on providing a basic understanding of HiAP as well as prioritize health concerns when making policies, addressing projects, or enacting decisions. Lastly there will be a resolution introduced to Princeton's Council in order to approve the initiative formally within the municipality.

Outcomes/Results: As of July 27th there has been expressed approval of this policy with the council as well as the Board of Health. The checklist has been shown to different community members, as well as stakeholders and departments. The checklist allows the user to emphasize health. However as of now this policy is in its early stages to provide concrete results.

Evaluation/Conclusion: This policy will direct the municipality by tackling social determinants of health. The outcomes will result in an awareness of issues affecting the community that will be addressed by a collaboration of different departments, stakeholder, and community leaders to ensuring positive health outcomes. Limitations observed were in the early stages because of the time restriction of meeting with different directors based off their schedules to introduce the policy as well as the checklist. Through this policy and the checklist there will eventually be a task force comprised of different stakeholder, community leaders, and municipal departments in order to prioritize the major issues and deal with them accordingly.

Internship Abstract

Title: Increasing Fruit and Vegetable Consumption
Name: Marquis Reece
Preceptors: Direct Supervisor: Serena Collado -Director, Community Health
Agency: Community Health RWJ-Somerset

Purpose: Expose youth to unfamiliar fruits and vegetables in order to increase the percentage of youth who are getting the daily recommended serving of fruits and vegetables in Somerset County by 2019.

Significance: Following a community-based needs assessment(2016-2019) conducted by the Healthier Somerset coalition, which took place in 2015, it was determined that 19% of youth get the daily recommended servings of fruits and vegetables. In an effort to reduce obesity within the county, increasing consumption of fruits and vegetables has become a major initiative. According to the USDA Nutrition Policy and Promotion Department people who eat more vegetables and fruits as part of an overall healthy diet are likely to have a reduced risk of some chronic diseases such as obesity, diabetes, high blood pressure, and heart disease.

Method/Approach: Community-based classes are conducted at two summer campsites that primarily serve children who normally receive free or reduced lunch in Somerset County. Children (ages 6 to 12) are educated on the health benefits associated with consuming fruits and vegetables by a licensed nutritionist and then offered 3 unfamiliar fruits(gooseberries, yellow watermelon, star fruit) and 3 unfamiliar vegetables(Tri- colored cauliflower, Jicama, and Kohlrabi) to try. A verbal pre-survey assessed the familiarity of kids with the fruits and vegetables being presented. A post-survey assessed which fruits and vegetables each child liked and if they would want to have them again in the future. Participants also received educational handouts discussing ways to incorporate more fruits and vegetables into the diet, recipes utilizing fruits and vegetables and an activity book about healthy eating and exercise.

Outcomes/Results: In the pre-survey no children were able to verbally identify the Jicama, Kohlrabi, Gooseberries or Starfruit and 2 children were able to identify the watermelon and 1 child was able to identify the cauliflower. Of the sample size cohort (n=93), 85 (91%) children liked yellow watermelon, 26 (28%) liked gooseberries, 34 (37%) liked star fruit. 8 (9%) children didn't like any of the fruits. 21(23%) liked tri-colored cauliflower, 17 (18%) liked kohlrabi, and 17(18%) children like jicama; 55(59%) children didn't like any of the vegetables. 66 (71%) Children said that they would want these fruits and vegetables again; 22(24%) children said they would not want to have these fruits or vegetables again. 5(5%) children did not answer the question; students were able to identify each item on post survey.

Evaluation/Conclusion: The majority of children were not familiar with the produce. After trying new items about 3/4 of the students said that they would want to have some of the items again. There was a greater willingness to eat fruits compared to vegetables. By increasing the knowledge of different fruits and vegetables youth are open to eating more items. In order to increase the affinity for new produce items in future programs, samples should be paired with a dipping sauce or incorporated in a recipe.

Internship Abstract

Title: An Analysis of a Survey on the Impact of Title VIII Funding for Nursing Students

Name: Kathryn Riman

Preceptors: Lauren Inouye, MPP, RN, Director of Government Affairs, American Association of Colleges of Nursing

Agency: American Association of Colleges of Nursing (AACN)

Purpose: To analyze a survey on the importance of Title VIII funds for undergraduate and graduate nursing students.

Significance: The Nursing Workforce Development programs (Title VIII of the Public Health Service Act [42 U.S.C. 296 et seq.]) have helped to bolster the nursing pipeline by increasing the number of nursing students, faculty and practicing nurses. Title VIII funding is instrumental to the growth of the nursing workforce. This is a timely issue as the demand for healthcare services continues to grow and the House of Representatives has proposed funding cuts for many Title VIII programs in its Labor, Health and Human Services, and Education Fiscal Year (FY) 2018 bill. Title VIII funding enables individuals to both attend undergraduate programs and return to graduate school to receive education at the master's or doctoral level. Furthermore, these doctorally educated individuals can serve as faculty, teaching future nurses. This survey was created by the AACN in 2014 to help identify the importance of Title VIII funding on recipient education and career goals.

Method/Approach: AACN distributed the survey via email to its member schools in late 2014. The schools distributed the survey to students receiving Title VIII funding for academic year 2014-2015. The 12 question anonymous survey was administered through SurveyMonkey. AACN analyzed the data in SurveyMonkey and Microsoft Excel.

Outcomes/Results: There were 1,036 total responses. A majority of the recipients (63.16%) were enrolled in a Bachelor in Science of Nursing (BSN) degree program and were not serving as a faculty members (84.21%). The survey found that most students receive \$1,001.00-\$3,000.00 in funding per year (57.89%). Title VIII funding paid for 75% or more of student's tuition, books, or other fees (31.58%). The top two uses for Title VIII funding were covering tuition and paying for books and other educational materials. For 73.68% of students, the availability of Title VIII funds made a difference in their decision to enter nursing school with 94.74% of students attending school full-time. Over two-thirds (68.42%) of students aspire to practice in a large urban hospital, a community hospital or in a rural and underserved area as an RN.

Evaluation/Conclusion: It is essential that federal policymakers and the public understand the impact of Title VIII to ensure the continued funding of these programs. The limitations of this survey include limited multiple choice questions and short responses that may not accurately capture the experiences of the undergraduate and graduate nursing students. Future strategies for data collection should be refined in order to maximize the sample size and the external validity.

Internship Abstract

Title: Major Themes of the Transitioning to College: An Exploration of the First-Year Experience Study

Name: Jerlene Rodriguez

Preceptors: Francesca Maresca, PhD, CHES, Director of H.O.P.E.

Agency: Rutgers Health Services: Health Promotion Outreach and Education (H.O.P. E.)

Purpose: To identify the major themes of students' first year experience and transition to college to further understand the overall college experience and its impact on wellness.

Significance: The first year experience is pivotal in determining success in college. The transition into college is influenced by multiple factors internal and external to college like peer relations and family influence. Sirgy, et. al.(2007) created the Quality of College Life Scale (QCL) which examines the importance college life satisfaction not only as a measure of student success but also a model for policy change for members of larger community. In exploring the first-year transition, HOPE and the Division of Student Affairs can address barriers to a successful transition into college. Information will not only help understand the college experience of students at Rutgers University New Brunswick but will give insight into the concerns and interests of the college student experience throughout the U.S.

Method/Approach: First-year students were interviewed starting in their first semester and continuing through their second semester, second year for up to three interviews. Students were grouped into specific cohorts such as traditional, LGBTQ, transfers, commuters and first generation. Interview recordings from the second year were transcribed and analyzed for common themes. The Transitioning to College Study includes an online quantitative survey and qualitative one-on-one interviews. For this project, only data from the one-on-one interviews were used. Interview recordings were grouped by first, second, or third interview. Once all interviews were transcribed, all transcriptions were examined and analyzed to identify major themes. Themes were analyzed to determine influence on students' overall success or barriers to success in college.

Outcomes/Results: Major themes identified include: the presence of a mentor figure, encouragement from professors that exceed a classroom setting, a support system specific to friends and maternal influences, cultivating a busy schedule to enhance academic success, time management skills, office hours as a tool for success, and importance of a routine. Some barriers to success include lack of peer connections, coursework overload, difficulty in first-year courses like biology, making lasting relationships, and difficulty navigating a large campus. These findings will contribute to the development of interventions and programs to assist students in the transition to college at Rutgers and beyond. Findings specific to cohorts included the major themes as well as more individualized findings.

Evaluation/Conclusion: While inclusive, the choices of cohort groups can be expanded to develop a clearer understanding of what indicates and can improve adaptation, resilience, and success among groups aside from those included in this study. A post-test can be effective in further determining students' experiences following the transition to college in order to assess changes in overall success and wellness as college years progress. Enhancement of major themes identified and eliminating the barriers to success for students overall can improve not only success but also the wellness of students at Rutgers University and beyond.

Internship Abstract

Title: Parental Opinions and Knowledge of Youth Concussions
Name: Paul Scalici
Preceptor: Diana Starace, Coordinator, Injury Prevention Program
Agency: Robert Wood Johnson University Hospital, New Brunswick

Purpose: To measure parental attitudes and knowledge surrounding youth concussion protocols and policies, as well as propose ways to improve their knowledge and understanding of these subjects.

Significance: Every New Jersey school district, private or public, that participates in interscholastic athletics must have a policy concerning the prevention and treatment of sports-related concussions. According to FAIR Health, concussion diagnoses in adolescents has risen by about 500% from 2010 to 2014. Much of this increase may be attributed to increased awareness and better diagnosis; however there is no doubt that concussions in the youth population are on the rise. Despite the drastic increase in concussion prevalence throughout youth sports, many parents do not have the knowledge necessary to properly manage a child's concussion, which could lead to more severe and long term issues. It is imperative for concussions to be treated with a "team effort". Everyone including doctors, parents, teachers, coaches, and even the athlete themselves needs to be involved to maintain proper treatment, attention and accommodations are met to insure a full recovery.

Method/Approach: A brief survey was devised and distributed to parents during an educational workshop at a Malcolm Jenkins Foundation Football Camp, and at the Somerset Patriots All-Star game. A total of 88 surveys were collected to measure parents' overall knowledge of concussions, awareness of their school's "Return to Play" and "Return to Learn" policies, their child's concussion history, and their understanding of when a child is ready to resume activity. For comparative purposes, parents of high school and middle school students were combined into one group.

Outcomes/Results: Data were collected for 129 children. Among those children, 17 have suffered a concussion. Of parents with a child who suffered a concussion, 63% stated their child's school has a "Return to Play" policy, while 50% stated there is a "Return to Learn" policy. Comparatively, 40% of parents of children who were not concussed stated their child's school has a "Return to Play" policy, while 34% stated they have a "Return to Learn" policy. Lastly, 85% of all parents surveyed whose children have not had concussions correctly answered that a youth athlete is ready to return to play only after a doctor clears him/her, compared to 53% of parents of children who've had concussions.

Evaluation/Conclusion: Parents who have a child with a history of a concussion were more likely to know about school "Return to Play/Learn" policies. However, just over half of these parents correctly stated a child is only ready to return to play after a doctor clears them. These findings also suggest that, for the most part, parents are not well informed on "Return to Play/Learn" policies. A more beneficial strategy may be for schools to provide a required program for parents to complete prior to their child participating in interscholastic sports.

Internship Abstract

Title: Implementing Ergonomically Efficient Practice in the Workplace

Name: Ernest Sobieski

Preceptors: Direct Supervisor - Carla Jacome, Human Resource Manager
Project Supervisor: Kenneth Brown, Plant Manager

Agency: Cintas Corporation - Union, New Jersey

Purpose: To make the workplace more ergonomically efficient for employees repeatedly doing the same motions using the Stage of Change (SOC) Framework.

Significance: Injuries in the workplace from repetitive motions continue to be one of the top work place injuries every year. Specialized ergonomically efficient equipment and how to properly use it creates a viable avenue to avoid repetitive injuries in the workplace. A study by The National Academy of Sciences in the United States shows that repetitive stress injuries result in a cost of over \$20 billion every year (2017). Using Prochaska and DiClemente's Stage of Change (SOC) Framework to gradually implement ergonomically favorable practices presents the opportunity to drastically diminish repetitive motion injuries (Rothmore, et al. 2015). The Stage of Change approach will be discussed and applied to combat injuries regarding repetitive stress.

Method/Approach: In order to combat workplace injuries, vulnerable employees prone to repetitive injuries were identified. Workers who are working in positions that are based on hourly performance were found to be ideal. They were chosen because during the course of an hour they are performing the same motion as many times as possible. The employees work an eight hour shift and were observed an hour before their lunch break each time. This timeframe was found to be ideal, as the most repetitions throughout the day occurred during this time. An hourly observation everyday was conducted for two weeks on the following positions: Bulk Linen Folder, Hanging Line Partner.

Outcomes/Results: The ergonomics plan is ongoing and has proved to be a viable tool in preventing repetitive strain injuries. Previously identified employees that were found to be vulnerable for these injuries are performing their job more efficiently. Upon observing these employees using ergonomically efficient equipment, there has been no reported injuries involving repetitive strains. Surveys with the workers has revealed satisfaction that the company is taking preventative steps to ensure their safety.

Evaluation/Conclusion: In conclusion, the proposed ergonomics plan is an immense step in the right direction in preventing repetitive strain injuries. Collaboration will need to continuously occur between maintenance and plant management to ensure all ergonomically correct equipment is working properly. The change of equipment is a start, but much more can be done to change the safety culture within the facility. Taking proper precautions to analyze poor work practice can ultimately reduce injuries in all forms in the workplace. Lastly, using specific equipment specifically for increasing ergonomic efficiency should be implemented across the board in all industries to protect and ensure safety to the workforce.

<https://docs.google.com/document/d/1tV915G4M8eKDpOCstnibFoLJWmIhygrqAd4o8NnrjE/edit>

Internship Abstract

Title: Assessment of Patient Transportation Needs in Order to Access Healthcare
Name: Jonathan Spektor
Preceptor: Luba Chigirinsky, Site Director
Agency: Key To Life, New York, NY

Purpose: To examine the transportation needs of patients who need health care services and to better improve transportation access.

Significance: Research has shown that a correlation exists between patients' overall level of health and access to healthcare (Garnica, 2016). Although many individuals may possess health insurance and a willingness to seek care for chronic and acute illnesses in order to improve their overall level of health, some of these individuals are unable to being that they lack access to transportation (Mao & Nekorchuk, 2013). Furthermore, some individuals who do have access to transportation spend several hours getting to and from various health centers (Mao & Nekorchuk, 2013). Experiences such as these may cause patients to not pursue follow up treatments which will result in an overall decline in their level of health.

Method/Approach: Patients will be asked to fill out a questionnaire about the transportation options they rely on for travelling to various healthcare appointments. In addition to this, on-site Social Workers and facility staff who regularly meet with patients will inquire about patients' transportation options and identify any patients who require or may possibly require assistance with obtaining reliable transportation. The Social Worker will assist any patients who do not have reliable transportation for health care visits by arranging medical transportation, paid for through insurance or various other forms of transportation such as Access-A-Ride, a transportation option for people with disabilities and/or limited mobility.

Outcomes/Results: One of the missions of KTL is to help patients improve their overall quality of life by improving their overall health. This project aims at reducing the burden posed by one of the largest barriers to healthcare, transportation. As of July 27th, 2017 data were collected on approximately 95% of patients. This data show that roughly 35% of persons surveyed rely upon public transportation, including public transportation options for people with disabilities, 22% use their own private vehicle; 15% rely on family for transport; approximately 14% use private transportation options such as taxis, and 13% of persons surveyed reported using more than one transportation option on a regular basis. It has been suggested to conducted a follow-up survey in 3 and/or 6 months to monitor changes.

Evaluation/Conclusion: This project has helped educate patients about their transportation options and reduce not only this burden, but also any attributed stress. It is known that patients who rely on public transportation to get to and from medical treatments are more likely not to attend follow-up appointments. Due to this, social workers will target these patients in particular and seek more reliable forms of transportation for them. Hopefully, by doing so more patients will become compliant with attending follow up care appointments.

Internship Abstract

Title: Connecticut Outreach and Assessment of Men Who Have Sex with Men (COAM)
Name: Terrence W. Spencer
Preceptors: Project Supervisor, Heidi Jenkins, Section Chief for TB, HIV, STD, & Viral Hepatitis
Agency: Connecticut Department of Public Health

Purpose: To gather sexual health concerns from the “men who have sex with men” (MSM) population that will be used to develop a website as a resource to decrease HIV health disparity.

Significance: In Connecticut, the majority of newly diagnosed HIV cases were reported among men (75%), half of those cases were MSM (46%) and (41%) were black from the years of 2010-2014 (CDPH, 2016). A portion of that MSM population are concerned about anonymity. Compared to traditional methods of outreach, online outreach [surveys] has been an effective tool used by public health agencies to reach populations that are (1) looking for sex, (2) providing a form of anonymity when discussing sexual questions, and (3) reaching isolated populations where other methods of outreach cannot (BHOC, 2017).

Method/Approach: A literature review was conducted to see the methods and outcomes of online outreach for MSM. First-person interviews were given to healthcare providers and community organizers to assess the HIV health disparities in Connecticut. A list of those interviews/responses were then coded (NVivo software) and utilized for the online questionnaire. The survey consisted of the coded list and previous public health surveys. The 30 day survey consisted of 12 questions using Qualtrics software and posted on websites and popular dating apps.

Outcomes/Results: A total of 52 surveys were started with 31 surveys completed. Eighteen people identified white/caucasian (39%), 18 people identified black/african-american (39%), 6 people identified hispanic/latino (13%), 4 Other (9%). Respondents reported lack of info about HIV medications and pre-exposure prophylaxis/PrEP (40%) as the highest concern with health care. Loneliness (65.63%) was reported as a common personal concern. Hartford (35.48%) was the most common location that people sought care. In terms of social media/dating app usage, Facebook received 26 responses (40.63%) and Grindr received 21 responses (25.61%). Information about sexual health (22.83%) and locations where to get PrEP (18.48%) were main topics that need to be on the public health website.

Evaluation/Conclusion: Of the total surveys (n=52), medical facilities, PrEP/HIV medications, and insurance options are the primary topics advised for the website. In terms of dating app usage, Grindr received 21 responses (25.61%) but the majority of black respondents had used Jack'd. The completion rate for the questionnaire was (60%) which may be due to respondents worried about confidentiality, lack of incentives or focused on dating/personal needs. A portion of the population did indicate that they travel out of state for their sexual health needs (New York City/New Jersey). An assessment would be needed to see the reasons for the trend in out-of-state care.

Internship Abstract

Title: Prior Authorization Workflow Assessment
Name: Rachel Suchocki
Preceptors: Susan Ellis, Patient Care Coordinator, BSN, CCM
Agency: Cape Regional Physicians Associates

Purpose: To analyze gaps or delays in workflow for electronic medication refills and prior authorizations (PA) to provide best practices for improved workflow between retail pharmacies and CRPA.

Significance: In the United States the World Health Organization estimates about 50 percent of patients do not adhere fully to their medication treatment leading to 125,000 premature deaths and billions in preventable health care costs (Surescripts, 2012). Since the adoption of eprescribing there has been a 10% increase in patient first-fill medication adherence. Medications that require review need more interaction between the care team resulting in delays in therapy and patient dissatisfaction (Bresnick, 2014).

Method/Approach: Detail current and previously used workflows for prescription prior authorization throughout the offices to identify the most time consuming sections of the process. Then analyze the data on a monthly basis on both practice and provider level to assess for the most effective path of processing. The offices use Allscripts Professional EHR which has an integrated option for processing prior authorizations electronically (eAuth), currently trialing at one location. Track the current workflow of prescriptions in that office to recommend implementation throughout the system or other means of best practice to increase patient satisfaction.

Outcomes/Results: Previously each of the 12 offices required the staff to complete the PA requests. In March of this year, CRPA hired a specialist to complete the requests for 4 of the offices, allowing the lower volume offices keep their PA's in house, and one office to trial eAuth. From April 1st to July 31st the specialist has processed 575 PA requests with 313 (54%) approvals and 262 (46%) denials and in addition reviewed 99 erroneously sent requests. The total time spent on processing was 260 hours or an average of 24 minutes per request. While tracking the electronic process, out of the 17 total requests 14 (82%) processed through the system correctly with an average time of processing of 6 minutes.

Evaluation/Conclusion: The eAuth system is an effective tool. The function has decreased processing time and allows the provider to explain the need of a prior authorization to create a realistic time of medication fill, in turn reducing patient call volume and improving patient satisfaction. After research, the process has many moving parts that require attention before implementation can take place. The pharmacy coverage of the patient needs to be entered into the EHR system correctly in order for the formulary check to be accurate. Prior workflow did not require pharmacy coverage to be inputted, so a new process to add in coverage details is necessary. Further workflow adjustments and tracking of the eAuth function to identify the triggers for errors, has led to the development of an action plan to implement the remaining 12 offices to eAuth capability.

https://docs.google.com/document/d/1YVd9rpa9Om0mc2OrVrcAjxtRdwDhqWKneIyN3P4mu4w/e/dit?usp=drive_web&usp=docs_home&ths=true

Internship Abstract

Title: Assessing Safe Kids Middlesex County's Social Media Impact
Name: Muneeba Syed
Preceptors: Diana Starace, Coordinator, Injury Prevention Program
Agency: RWJUH Trauma and Injury Prevention Department, New Brunswick

Purpose: To analyze the current social media presence of Safe Kids Middlesex County (SKMC) in order to propose new methods to increase followers, likes, reach, and engagement in the future.

Significance: Preventable injuries are the #1 killer of kids in the United States and 8,000 families lose a child to these injuries each year. Safe Kids Worldwide has been working to reduce these injuries since 1988 and has reduced the U.S childhood death rate from unintentional injuries by 60 percent. However, nine million children in the United States are still treated for injuries in emergency departments every year. In today's world, parents are using social media outlets such as Facebook, to not only communicate with each other, but also to obtain knowledge to keep their family safe and healthy. Therefore, it is important to utilize social media and the tools it provides to spread awareness on injury prevention.

Method/Approach: The first step was an assessment of the best practices for increasing the presence of SKMC on social media. This was done through a conference call with the *Safe Kids Worldwide* Digital and Social Media Manager. Online research was also conducted to discover best practices of utilizing Social Media to further injury prevention messages in the community. Next, followers and engagement on Facebook were analyzed by utilizing the Insights tool. Data was collected from July 18, 2015 to July 21, 2017 and were entered in excel to further evaluate and compare. Lastly, a meeting was conducted with the Robert Wood Johnson Barnabas Health (RWJBH) Social Media Manager to discuss best methods of utilizing a Like Campaign and Boosted Posts to promote more followers and engagement on the page.

Outcomes/Results: In September 2015, SKMC had experimented with boosting posts on the 4th, 11th, and 25th of the month. During this time, the correlation between Boosted Posts and increases in page likes more than doubled by the end of the month. Furthermore, on weekdays, it was found that majority of followers were online between 7:00 a.m.-10:00 a.m., and 4:00 p.m.-6:00 p.m. On weekends, the majority of followers were online between 7:00 a.m.-9:00 a.m., and 6:00 p.m.-8:00 p.m. Event pictures had the most reach and engagement (post clicks, reactions) and safety tip articles had the least reach and engagement. Additionally, a budget of \$500 has been approved by RWJBH to set up a Facebook business account for SKMC. Content for a Like Campaign and Boosted Post have been developed and provided to the RWJBH Marketing Department, to be initiated during the month of August 2017.

Evaluation/Conclusion: The information analyzed and gathered from Facebook's Insight tool will be used to best determine the type of content to "boost" and post in the future. This will also allow for the budget set to be utilized in the most efficient manner. In addition, the effectiveness of the Like Campaign and Boosted Posts will be measured and compared after approval has been obtained.

Internship Abstract

Title: New- Multi-model Approach to Pain in the Total Hip, Knee and Bilateral Knee Replacement Patients

Name: Mariam Taj

Preceptors: Supervisor: Kyala Pascual, Joint Coordinator
Dustin Connelly, Director of Operation

Agency: Robert Wood Johnson University Hospital, New Brunswick, NJ

Purpose: To analyze the effects of a change to a multi model approach to pain management on narcotic use and walking distances of Orthopedic patients with Knee and hip replacement.

Significance: Managing the pain following the TJA (Total Joint Arthroplasty) presents a big challenge to orthopedic specialists. Although there are many approaches to dealing with the pain, multimodal pain therapy has shown an exceptional improvement in controlling pain perioperatively. The multimodal approach to analgesia refers to the treatment of pain using different classes of drugs each with its own mechanism for mitigating the sensory of pain. The American Society of Anesthesiologists recommend the use of multimodal analgesia whenever possible during the perioperative setting. Despite this, narcotic pain medications are still overused for TJA patients. Thus, we designed a study to analyze the effects of pain management on narcotic use and walking distances of total Knee and total Hip replacement patients by examining our previous approaches to our new Multi-modal approach.

Method/Approach: A retrospective study of 183 total hip, knee and bilateral knee patients, who met our inclusion and exclusion criteria were evaluated. Of the total 183 patients, 89 patients were from the previous multi-modal pain management regimen from November 2015 through January 2016 and the 94 patients were included from the new multi-modal pain management regimen from February through April 2016. Research practice investigated clinical notes and reports on the patient's pain level scores from 0-10, Walking distances postoperative surgery day until their discharge and other demographic information. The enrolled patients were followed until duration of their hospital stay, typically 2 to 3 days unless readmission occurs.

Outcomes/Results: A total of 183 patients were enrolled in this study. Out of this number, 89 patients were enrolled from previous multimodal pain regimen and 94 were enrolled from the new multi-modal regimen. With the change in the multimodal pain regimen there was a 52% decrease in narcotic use, a 53% increase in walking distance, higher pain levels with therapy sessions but they received more therapy sessions on average.

Evaluation/Conclusion: Narcotics were decreased by half (53%) for the total hip and total knee replacement patients in the new multimodal pain regimen with a 53% increase in walking distance post surgery. The new Multimodal pain regimen will serve as an effective strategy to (a) significantly lower dependencies on narcotic, and (b) accelerating patient mobilization.

Internship Abstract

Title: Early Childhood Comprehensive Systems Collaborative Improvement and Innovation Network Early Childhood Developmental Screening in Middlesex County

Name: Margaux Taylor

Preceptors: Project Supervisor: Stephanie Michael, Community Education Coordinator
Direct Supervisor: Ediza Lahoz, County Council for Young Children Coordinator

Agency: Prevent Child Abuse - New Jersey

Purpose: To determine access, availability, and use of early childhood Developmental Screening tools for children in Middlesex County.

Significance: Early childhood Developmental Screening tools--like ASQ (Ages and Stages Questionnaire)--are used to determine if children are reaching their developmental milestones and to create plans of actions if the milestones are not being met through Early Intervention. However, there are parents that are not aware of early childhood screening tools or the importance of the tools. Additionally, there are parents that may not have easy access to the tools. The CDC explains that in the United States “many children with developmental disabilities are not identified before age 10, by which time significant delays already might have occurred and opportunities for treatment might have been missed.” According to Gilmore, Lin, Pratswata et al. (2007), “at birth, [the brain] already has about all of the neurons it will ever have. It doubles in size in the first year, and by age three it has reached 80 percent of its adult volume.”

Method/Approach: A survey was utilized to help estimate the use and understanding of developmental screening tools. The survey was sent to parents of children 0 to 5 years of age in Middlesex County. In addition to asking questions directly related to Developmental Milestones, we also asked questions about the child’s education and regular physician in addition to stress levels of guardians.

Outcomes/Results: There were 28 valid responses to the survey (n=28). Three parents (11%) have not discussed developmental milestones while 25 (89%) did have some discussion of developmental milestones. Three parents (11%) have not made a checklist about their child’s milestones while 25 (89%) have made a checklist about their child’s milestones. Eleven parents (40%) reported that their child never had a developmental screening while 17 parents (60%) reported that their child had a developmental screening. None of the parents who listed that their child had a developmental screening listed more than one age. Eleven parents (40%) reported that they have not heard of Early Intervention.

Evaluation/Conclusion: The majority of parents were aware of developmental milestones and developmental screenings. However, children in Middlesex county are not getting multiple Developmental Screening done during the 0-5 age range.

Internship Abstract

Title: Success of Physical Therapy in the Treatment of Common Injuries

Name: Kristen Varra

Preceptors: Direct Supervisor: Douglas Klein, MPT, Clinical Director

Agency: Cape Regional Physical Therapy-Seaville Office

Purpose: To better understand the relationship between injury type and recovery time by comparing patient charts.

Significance: This project evaluates the positive outcomes of Physical Therapy, a modern and innovative solution to treating common injuries. Physical therapy utilizes a combination of stretching, massage therapy, and exercise routines to achieve recovery. The overall goal of physical therapy is to obtain measureable, functional outcomes that allow patients to return to their normal routines including but not limited to sports, work, and recreation. Patients are encouraged to incorporate exercises and stretches into their routines at home to retain treatment outcomes.

Method/Approach: Sixty patients will be analyzed and 5 body parts will be examined: ankle, back, shoulder, knee, and thoracic and lumbar spinal areas. Patients fill out an initial evaluation in the beginning of their treatment describing injury location, pain level on a scale of 1-10, and restrictions resulting from their injury. Each body part has its own form including a back index, lower extremity functional scale, and the Quick DASH index for shoulder injuries. Depending on the injury type and prognosis, reevaluations are filled out every four to six weeks to track progress until the patient is discharged. Patients work with their therapist in order to establish outcome driven goals for the patient to achieve. The success rates of physical therapy will be reported by the length of recovery time, the number of patients who met their goals, and which injuries display the highest rate of success from physical therapy.

Outcomes/Results: Thoracic and lumbar spinal injuries displayed the least successful rates for recovery with just two cases being post surgical. Knee and ankle injuries displayed equivalent rates for recovery success, with three cases of knee patients being post surgical and four cases of ankle patients being post surgical. 70% of patients with knee injuries took from eight to twelve weeks to recover, suggesting that knee injuries had the slowest recovery rate. The patients who appeared to benefit the most from physical therapy treatments were those with shoulder injuries. There may be an arguable advantage to this, however, as five of these patients were post surgical, which may have the potential to positively impact their recovery. Patients with back injuries were shown to have the fastest recovery times, with 50% of patients being discharged after just six weeks of treatment.

Evaluation/Conclusion: In an effort to analyze the success of PT treatment, a wide scope of injury types were observed, including: Shoulder dislocation, anterior cruciate ligament (ACL) tear, herniated disc, subluxation of the ankle tendon, acute spinal cord injury (SCI), and equinus. The range of success rates for recovery of each body part was found to be high: 90% for shoulder injuries, 80% for knee injuries, 60% for lumbar and thoracic injuries, 80% for ankle injuries, and 70% for patients with back injuries achieved a full recovery.

Internship Abstract

Title: Parker Information Communication Efficiency Assessment

Name: Aishwarya Venkatesh

Preceptors: Harry Glazer, Senior Manager of Communications
Lisa Slater, Director of Professional Education

Agency: Parker - Aging Services Provider

Purpose: To revise, disseminate, promote participation, and analyze the results of the annual Employee Survey of Internal Parker Communications

Significance: Effective communication is essential towards having a productive workplace or company, regardless of field. At Parker, the vision is to make aging a part of life. In order to fulfil its vision, Parker must engage efficiently amongst its employees. Evidence shows that positive communication can boost employee morale, foster team building, and can lead to innovative ideas. This will allow them to be more focused and passionate about their work. Therefore, it is important to obtain feedback from employees in order to maximize efficiency of communication within the organization.

Method/Approach: The 2016 Parker Employee Communications Survey was used as a template to create a new survey for 2017. The questions were qualitative and asked employees to assess the effectiveness of the information they received. There were descriptive questions that characterized the employees while keeping them anonymous; and would in turn be used to make a Cross Tabulation in order to assess what individuals from different groups (like locations or departments) felt about organizational communication. The final data would ultimately be used to make changes in policy or practice at Parker to better communicate with the employees.

Outcomes/Results: There was an extensive series of findings through the employee survey. The sample size was large (n=361) and contributed information on 6 Parker locations and 19 departments. The largest response came from the Monroe, McCarrick, and River Road locations as well as the dining, nursing, administrative, and housekeeping departments. About 62.4% of employees felt well informed, 34.8% somewhat informed, and 2.8% not informed. Around 75% of employees check email and 47% check the Electronic Bulletin Boards daily. Close to 86% of employees feel like their supervisors communicate effectively with them and about 64% attend quarterly general staff meetings.

Evaluation/Conclusion: Although there are overall differences between communication method preference, it is interesting to note the nuanced data from specific locations and departments. For example, Monroe felt the least informed and did not check emails daily. Different locations preferred different modes of communication from emails to supervisors to EBB. This held true for departments as well. As such, it has been concluded that it is prudent to deliver suggestions that are specific to different locations or departments. There were, however, themes that were consistent through Parker including the necessity for more in person communication and standardization of information throughout the locations.

Internship Abstract

Title: Requirements of Participation Compliance Assessment

Name: Fatima Wahaj

Preceptors: Andrew Harris, LNHA

Agency: Bridgeway Care and Rehabilitation Center (Bridgeway Care), Hillsborough, New Jersey

Purpose: To assess compliance with requirements for participation in the Federal Register promulgated by the Centers for Medicare and Medicaid Services (CMS), and to improve this compliance rate.

Significance: According to the United States Department of Health and Human Services, Centers for Disease Control and Prevention, the older adult population is more susceptible to illnesses and death, and face issues such as impaired mobility, diminished sensory awareness, multiple chronic health conditions, and social and economic limitations more than any other age demographic. CMS recognizes the vulnerability that the older population faces and the stigma associated with the old substandard nursing homes derived from the elimination of almshouses in 1935. Due to these factors, the 1972 Social Security reforms established requirements for facilities, which are financially supported by Medicare and Medicaid, to improve the overall standard of nursing homes.

Method/Approach: A compilation of all the new Long-Term Care Requirements of Participation (RoP) promulgated in the Federal Register was documented onto an excel spreadsheet and divided into the three phases of compliance to assess Bridgeway Care's starting point of compliance. The three phases of compliance symbolize the deadlines for each new RoP that skilled nursing facilities have to meet. The spreadsheet was made in an effort to assess which policies, education plans, and/or in-services were in the process of becoming compliant with federal regulations, which ones were not at all observed, nor in compliance with new regulations, and which ones were entirely reformed, approved and compliant with new federal regulations. A formula was entered into excel to calculate the percentage of policies, plans and/or in-services that were not yet started, in process, and completed prior to the project, and at the end of the project in each phase of requirements.

Outcomes/Results: Phase 1 regulations displayed a 30.4% increase in fully compliant Bridgeway Care policies over the course of 2 months, which was the highest percentage increase of compliance in comparison to Phase 2 and Phase 3 policies. Phase 2 compliance regulations displayed a 25.3% increase in fully compliant policies. Lastly, Phase 3 requirements displayed the lowest percentage of acceptable policies implemented by Bridgeway Care with only an 11.5% increase in compliance.

Evaluation/Conclusion: In an effort to meet the deadlines of compliance implemented by CMS, the policies were completed in priority order with attention focused primarily on Phase 1 requirements, then Phase 2 requirements, and finally Phase 3 requirements. Non-compliant policies will continue to be updated and finalized at biweekly RoP meetings. Longer biweekly RoP meetings have served as an effective strategy to increase the rate of compliance as they address multiple minor requirements that surveyors from CMS place less emphasis on, as well as the few major requirements of participation that need more qualitative time to construct and develop.

Internship Abstract

Title: Diabetes Self-Management Program Initiatives in Faith Based Organizations

Name: Rachel Wetzel

Preceptors: Margaret Drozd MSN, RN, APRN-BC Director, Community Health Services.
Stephanie Peluso-Riti, BSN, RN, CEN Community Health Services,
Zachary Taylor, MEd, CHES, Coordinator Healthier Middlesex.

Agency: Saint Peter's University Hospital, New Brunswick, NJ

Purpose: To identify target locations and propose Diabetes Self-Management Programs at faith-based organizations to promote self care and appropriate use of health care facilities.

Significance: In 2010 the Patient Protection and Affordable Care Act legislated that non-profit hospitals must complete a Community Health Needs Assessment (CHNA), and identify an implementation strategy to address those needs every three years. According to our 2016 CHNA, 8.9% of people in the combined county sample reported a diagnosis for diabetes. The American Diabetes Association states that people with diagnosed diabetes incur average medical expenditures of about \$13,700 per year, of which about \$7,900 is attributed to diabetes. Those who participate in the Stanford based self-management programs have shown to decrease emergency department visits as well as reduce healthcare costs within a year.

Method/Approach: Identified possible geographic target locations by analyzing data of a previous Saint Peter's project "Increasing Accessibility to Self-Management of Chronic Disease Programs in Middlesex County". Englishtown, Helmetta, Jamesburg, Manalapan, Monroe, Old Bridge, Sayreville and Spotswood were identified as target areas for DSMP classes. Outreach to faith-based organizations in these areas was conducted via email and phone calls to discuss interest in a DSMP class. Interested organizations were connected with appropriate partners of Saint Peter's to facilitate the program at the faith-based sites. Those that declined the program were distributed a survey to assess why they did not want to participate. The survey has four questions that measures an organization's satisfaction with the DSMP on a scale of 1 to 5, with 1 being the lowest and 5 being the highest.

Outcomes/Results: There were 42 faith-based organizations located in the 8 towns. Of those organizations, seven showed interest in the DSMP initiative. Three of those established a program, thus, projecting that at least 30 people will complete the program. Results of the survey show that 50% were dissatisfied with the time commitment of the DSMP for 2.5 hours each week, 50% were dissatisfied with the six week timeline of the program, 33% were dissatisfied with the amount of people needed to participate in the DSMP, and 50% were satisfied with the material covered by the DSMP.

Evaluation/Conclusion: Survey results about why organizations rejected the program will be sent to Stanford for consideration of a revision to their program. After speaking with various leaders of faith-based organizations they state that the program is not flexible and that they feel they cannot meet the program standards.

Internship Abstract

Title: Standardized Process within the Privacy Department

Name: Shaina Williams

Preceptor(s): Sharmaine Forde-Miller, Government Information Specialist, Assistant Privacy Officer, and Freedom of Information Act (FOIA) Officer.

Agency: Veterans Hospital, East Orange NJ (EOVA)

Purpose: To create a formal standardized process for the effective and efficient execution of the privacy functions and duties.

Significance: The EOVA privacy office consists of two full-time employees that are responsible for responding to privacy outages, subpoena, and amendments to patient and employee information to name a few. Most of these requests are time sensitive and must be addressed immediately. The goal is to respond to 97% of all requests within a specific timeframe. Currently the EOVA privacy office's response time is less than 40%. This low response rate has led to many complaints from veterans and increased staff frustration which has led to less job satisfaction.

The goal is to create a formal standardized process for the effective and efficient execution of the privacy functions to reduce the % of unmet deadlines from 60% to less than or equal to 45% unmet by December 2017 at the EOVA privacy office.

Method/Approach: The first step is to identify all the critical activities, perform process mapping which entails a start to finish documented high level process of the critical activities, this included any dependencies on other departments and systems. We will then analyze the information to identify the gaps, immediate solutions, and possible implementation of the recommended changes. To test the success of the changes, we will track the response time for improvement (timeliness of response = # of unmet requests by deadline / # of received requests).

Outcomes/Results: So far, we have completed two process mapping activities for all critical privacy office tasks, and identified the gaps and opportunities to streamline the process that were identified. Analysis of the information has not been completed. It will require at least 6 - 12 months to complete process mapping, review, and recommendations for changes.

Evaluation/Conclusion: We have concluded that process mapping is necessary and will require time and resources to complete. Based on the number of privacy officers in the EOVA location and survey of other privacy departments across the US, we found that the systems needs updating (they cannot share information easily) to track responses more efficiently, and the average number of privacy officers in each location (1-2 employees) will not successfully handle the high number of requests they receive. Based on these finding, it has been concluded that at a minimum, additional staff is needed to manage the workload and reduce the number of unmet responses.

Internship Abstract

Title: Aquatic Safety Workshop for Parents & Special Needs Children

Name: Sunaina Yenamandra

Preceptors: Kaylee McGuire Manager Community Recreation Programs
Laura Kompany, Director of Clinical Support & Services

Agency: Children's Specialized Hospital (CSH)

Purpose: Develop water safety training workshop & materials for parents and children with special needs.

Significance: Children with Autism Spectrum Disorder (ASD) exhibit a wide spectrum of symptoms, compromised skills, and levels of disability. These children demonstrate poor motor skills, compromised physical proficiency and other developmental delays. Accidental drowning accounts for 90% of total deaths in the United States in children with ASD, of age 14 and younger. Analysis of death records shows that children with ASD are twice as likely to die from drowning compared to the general pediatric population. A parent training workshop will be an effective tool to promote awareness of this issue.

Method/Approach: A comprehensive literature research was conducted to determine the drowning statistics in children with ASD. The research served as an important source in identifying the most important areas of concern in drowning to develop the survey: 1) Risk factors of drowning 2) Information to prevent drowning 3) Importance of CPR training 4) Survival skills. A questionnaire with multiple choices for answers to be scored with points was determined as the best form of a survey and was drafted. This survey served as the foundation for the workshop aimed to increase overall awareness of parents regarding water safety and an increased risk in children with special needs. Additionally, email blasts, handouts and informal discussion with the parents also contributed to providing information to parents about water safety.

Outcomes/Results: A audio-visual presentation was decided as the introduction of the workshop. An age appropriate video emphasizing safety was identified : https://www.youtube.com/watch?v=XpQ_Tepyuz0 The literature review and the identification of risk factors helped in drafting a parent survey. This survey is the foundation of the workshop aimed to increase overall awareness of parents regarding water safety in children with special needs. Research determined that the CPR certification of American Red Cross is the most suitable for this workshop. The workshop also will include incentives for parents to come together for this event. A list of local theatres for a night of free movie tickets and local YMCA to offer a free one month membership has been created and stored electronically.

Conclusion: A research backed and planned workshop with incentives offered to parents to be CPR trained and be active participants in the program is expected to be a very effective tool to promote water safety.

Internship Abstract

Title: National Emergency Preparedness Month
Name: Dennis Zuraw
Preceptors: Sherie Wolpert M.P.H., Carrie Johnson
Agency: Middlesex County Office of Health Services, Preparedness Division

Purpose: To increase general emergency preparedness in Middlesex County residents by expanding an existing awareness campaign that educates the public.

Significance: The Center for Disease Control and Prevention reported that 48% of Americans do not have emergency supplies. Middlesex County has approximately 800,000 residents, and those that are at-risk are generally defined as young, elderly, disabled, and non-English speaking residents. Given the concern that approximately 385,000 Middlesex County residents would not be prepared during a natural or manmade disaster, this can pose an extreme burden to a coordinated response effort. It is imperative to focus on the personal responsibilities of the general public in order to minimize the damage and lasting effects a disaster can have on a community as well as decrease the amount of resources used for aid and relief.

Method/Approach: A stand-alone presentation was prepared in an easy to digest, stand-alone format, and showcased at county libraries and retailers. This presentation is intended to be displayed without the need of a representative and includes a variety of take-home material, supplied by both the county as well as FEMA. The information provided was geared towards the general public, as well as at-risk populations. In addition to providing a list of simple household items that can be gathered and stored for an emergency, the public was given literature to take home for future reference. The audience was also educated about existing programs, classes, and volunteer organizations that aid in times of emergency.

Outcomes/Results: In 2016, a presentation was placed at four select Wal-Marts in varying locations throughout Middlesex County. The presentations reached 25 residents in terms of an interaction and distribution of take home materials. For 2017, in addition to the 4 Wal-Mart locations, it has been arranged to place a presentation board in each of the county's 25 municipal libraries. Assuming that each of the presentations reach an average of 25 residents in all of the 2017 locations, it is projected that there will be an increase of approximately 625 residential interactions.

Evaluation/Conclusion: Overall, this project will increase the Office of Health Services' reach to residents, and was easily implemented with minimal additional costs. The numbers of residents reached, although approximations, show to be a dramatic increase. Moving forward, it is suggested that a more accurate method to track respondents, such as a web page providing access to materials is suggested. This web page should include a hit-counter in order to measure website traffic, and include information in a detailed, printable format. Additionally, this web page can be shared on various social media platforms so residents can share the information with close family and friends.