



RUTGERS

Edward J. Bloustein School
of Planning and Public Policy

Fall 2019 Abstract Book



Internship Abstract

Traditional Internships

[Field Work Internships](#)

Internship Abstract

Title: Regional Disaster Workforce Engagement

Name: Pooja Abburi

Preceptors: Direct Supervisor: Ted Smith, Regional Workforce Manager; Project Supervisor: Lisa McGee, Deputy Regional Disaster Director

Agency: American Red Cross

Purpose: To refine, develop, and analyze Red Cross systems that document volunteer engagement across the New Jersey Region in order to streamline volunteer processes, data, and deployment.

Significance: The American Red Cross has been dedicated to serving people in need since its founding on May 21, 1881. They respond to an average of more than 62,000 disasters each year, 90% of which are home fires (the remaining percent representing natural disasters). About 95% of disaster relief workers are volunteers. The Red Cross relies on contributions of blood, time, and money from the public in order to support and service lifesaving disaster relief programs. The Workforce Engagement Team is an integral part of the American Red Cross in terms of overseeing the assignment and dispatch of all volunteers and staff. The upgrading and upkeep of Red Cross systems are essential to ensuring that the Red Cross delivers the most efficient response to disaster situations.

Method/Approach: A survey was constructed in order to evaluate volunteer engagement and feedback on different Red Cross services. The 2020 Regional Shelter Program Survey sought to track and enlist volunteers who would be willing to assist in mass care operations in the event of a large-scale disaster. A previous survey was used as a loose template to construct an improved version that would yield more efficient data. The necessity of each question was assessed and refinements were made to the formatting/wording in order to attain the most comprehensive response. In addition, the survey was transferred from SurveyMonkey and onto Microsoft Forms in order to more effectively integrate and share information within the Red Cross. The survey was sent to all Red Cross volunteers and staff (4,000+) in the state of New Jersey.

Outcomes/Results: A total of 4,300 staff and volunteers received the 2020 Regional Shelter Program Survey and 4.5% (194) responded within a 9 day period. Of the 194 respondents, 87% were willing to participate in the New Jersey regional shelter program. 40% of participants can volunteer in the North Jersey (Bergen, Essex, Hudson, Morris, Passaic, Sussex, and Warren County) territory, 26% can volunteer in Central Jersey (Hunterdon, Mercer, Middlesex, Monmouth, Ocean, and Somerset County), and 34% can volunteer in South Jersey (Atlantic, Burlington, Camden, Cape May, Cumberland, Gloucester, and Salem County).

Evaluation/Conclusion: The survey has only been active for 9 days and received 194 responses. This pales in comparison to the 2019 Regional Shelter Program Survey which received 376 responses over the course of 9 days. However, the seemingly low participation numbers for this year's survey can be attributed to the fact that it was distributed just before the holiday weekend. We hope to expect more responses in the following weeks in order to gain a more complete data set. The data obtained from this survey allows the Red Cross to identify and address regions that lack the necessary volunteer support. Moreover, they can develop emergency preparedness plans and allocate the appropriate training so that volunteers are ready for when the time comes.

Internship Abstract

Title: Student-Athlete Academic Support Program Implementation

Name: Natalie Acciani

Preceptors: William Banks, Director of Athletics

Agency: Camden County College

Purpose: To assist the Athletic Department in developing and implementing an academic support program for student-athletes to adhere to NJCAA eligibility requirements.

Significance: The NJCAA offers student-athletes the opportunity to participate in sports at the collegiate level while attending a 2-year institution. In order to maintain eligibility according to NJCAA requirements, student-athletes must pass 12 credits each semester and earn a minimum cumulative GPA of 2.0. For many athletes, a junior college offers the ability to obtain general college credits at an affordable cost while providing the opportunity to earn scholarship opportunities to a 4-year institution. However, many athletes struggle to maintain academic eligibility. Consequently, without the ability to play their sport, some athletes lose motivation and drop out completely. In the 2017-2018 school year, 13% of Camden County College student-athletes dropped out. Moreover, their loss of eligibility hurts their respective teams' chances at a winning season, and it also hurts the team's ability to recruit for future seasons. These consequences indicate a necessity for a program that focuses solely on helping student-athletes with the transition to college-level coursework and a demanding athletic schedule. A Student-Athlete Academic Support program (SAAS) will help them balance their new responsibilities at a higher level and successfully manage their academic and athletic challenges.

Method/Approach: Comprehensive research on similar academic support programs at 4-year universities was conducted to identify the best policies for Camden County College to model and implement. This research was then used to develop a pilot program for Camden County College that included a student-athlete study hall, individualized academic plans, progress reports, and monitored class attendance. A functioning website was created to outline the program as well as to organize meetings. Coaches and teams were informed individually of the program and asked for support in making it operate successfully. Rooms for study hall were reserved, and the study hall was monitored each evening after team practices. Progress reports were handed out and analyzed to monitor student class attendance, exam averages, and the number of completed assignments.

Outcomes/Results: Of the 14 athletic teams at Camden County, 7 actively participated in the program: Men's Basketball, Men's Soccer, Wrestling, Women's Basketball, Women's Soccer, Softball, and Tennis. 58% of the school's female athletes participated in the program compared to 56% of the male athletes. Men's soccer had the most team participation at 45%.

Evaluation/Conclusion: Satisfaction surveys will provide valuable feedback on the success of the program. These surveys will be filled out by student-athletes, team coaches, as well as the athletic department staff. A focus group of select student-athletes will also provide valuable information on ways to improve the program. These evaluations will help address areas that were successful, areas that need improvement, areas that the program overlooked, and areas no longer necessary to implement. Other valuable information will be collected by comparing statistics from the number of athletes who remain academically eligible after the 2019 fall semester compared to the 2018 fall semester.

Internship Abstract

Title: Personal Protective Equipment Compliance by Healthcare Workers

Name: Euginia Agyemang

Preceptors: Patricia Lafaro BS, RN, CIC, Director of Infection Prevention

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

Purpose: To observe healthcare workers comply with the Personal Protective Equipment policy of the hospital and to collect data based on observations.

Significance: Healthcare workers such as doctors, nurses, etc. in hospital settings can easily be at risk of getting infections or transferring pathogens from one patient to another. Healthcare personnel treat all types of infectious conditions, that is why it is important to comply with the hospital's Personal Protective Equipment (PPE) policy in order to prevent the exposure of microbiological hazards and the spread of diseases to other patients. According to the Centers for Disease Control and Prevention (CDC), the importance of enforcing compliance was identified during the worldwide outbreak of SARS when observations of PPE use among healthcare personnel showed potential unsafe practices when donning, using, and removing PPE. The appropriate use of PPE is significant to RWJ because it reduces the transmission of infectious diseases.

Method/Approach: Observations on various floors of the hospital were conducted to collect data based on healthcare workers' compliance with Personal Protective Equipment. The data was collected during an eight-week period. A spreadsheet was created to report data for 100 healthcare workers. The workers included doctors, nurses, technicians, transport, social service workers, therapists, and others. The spreadsheet addressed five types of results with a Yes and No provided under each: 1) Hands disinfected 2) Gown tied in the back 3) Gloves on 4) Gown and gloves grasped from the front and pulled away from the body 5) Hands disinfected. The sixth option which was mask/goggles was rarely applicable.

Outcomes/Results: Out of the sample size (n=100), that were observed while putting on PPE prior to entering isolation rooms, 93% disinfected their hands whereas 7% did not. Fourteen percent tied their gowns in the back and 86% either tied it in the front or left it hanging. 86% had on gloves compared to 14% who did not wear gloves. Also, of the sample size (n=91), that was observed on the donning of PPE, 92% properly grasped gown and gloves from the front away from the body and 8% did not comply. 92% disinfected their hands after removing PPE while 8% did not disinfect their hands. In addition, there were only 6 cases reported where putting on masks was applicable and healthcare workers complied as required.

Evaluation/Conclusion: Based on the results, more than half of the healthcare workers complied with hand hygiene and safe removal of gowns and gloves. However, a large fraction tied their gowns incorrectly or simply left it hanging. RWJ regulations require staff to comply with PPE rules. An effective approach to improve compliance with PPE will include training as needed for healthcare workers. Also, random audits would be conducted by infection prevention staff to verify compliance of PPE by healthcare workers.

Internship Abstract

Title: Lab Safety Audit Analysis
Name: Milena Amador
Preceptors: Direct Supervisor: Peter Skeels, Manager, Health & Safety Services
Agency: Rutgers Environmental Health & Safety (REHS)

Purpose: To evaluate the top three at-risk lab safety behaviors at Rutgers, The State University of New Jersey.

Significance: The Rutgers Environmental Health and Safety department is responsible for completing annual laboratory inspections. In 2018, REHS conducted 2525 lab audits of 708 Principal Investigators (PIs) in 103 buildings. Inspections are conducted to assist faculty and staff in identifying and correcting potential health and safety hazards and to identify unreasonable risks to laboratory personnel, students, and the campus community. According to the Occupational Health & Safety Administration, “More than 500,000 workers are employed in laboratories in the U.S. The laboratory environment can be a dangerous place to work. Laboratory workers are exposed to numerous potential hazards, including chemical, biological, physical, and radioactive hazards, as well as musculoskeletal stresses.” Analyzing the lab audits results for previous years can assist in identifying trends and narrowing down on most at-risk behaviors and practices.

Method/Approach: A thorough review of all completed lab audits for the previous three years was conducted. A total of over 180,000 rows were exported into a spreadsheet and filtered by lab audit questions. Then, each audit question further screened for the following answers: 1) yes, 2) no, 3) corrected, 4) unanswered 5) n/a. For each question, a complete tally of each answer set was calculated. After the data set was filtered entirely, a simple filter computing the items with a more frequent answer of “no” was applied. The top three questions with the highest number of “no’s” were documented as trended for years 2017-2019. The top three trending items included; question numbers 56,79, and 68.

Outcomes/Results: For question number 56, that is, “Are the eyewash stations accessible not impeded or obstructed, flushed weekly by lab personnel, maintained in sanitary condition, and inspected yearly”, a total of 38% (2017), 33% (2018), and 23% (2019) was recorded for answering “no” on the annual lab audits. For question number 79, “Are semi-annual PI Self-inspections being completed via the online PI inspection program”, a total of 31% (2017), 53% (2018), and 24% (2019) was recorded for answering “no” on the annual audit. Lastly, for question number 68, that is, “Is an up to date, completed caution sign (including emergency contact numbers) affixed to the laboratory door”, received a total of 24% (2017), 16% (2018) and, 14% (2019) was recorded for answering “no” on the annual lab audits.

Evaluation/Conclusion: Questions number 56, 79, and 68 all trended for the most answered "no's" in years 2017-2019. These results indicated a few weak points in Rutgers's lab safety procedures and practices. An informative newsletter with these findings and best practices are to be distributed to PI's and researchers. The goal of the newsletter is to increase awareness to provide educational and training material for a reduction in unsafe lab behaviors. The health and safety specialists for the university will also be informed of the results and therefore provide any necessary assistance to lab personal.

Internship Abstract

Title: Effectiveness of Vocational and Community Involvement for ASD.

Name: Rachel Amasah-Dsani

Preceptors: Vanessa H. Bal, Ph.D., Karmazin and Lillard Chair in Adult Autism

Agency: Rutgers Center for Adult Autism Services (RCAAS)

Purpose: Compare the RCAAS program to others using a literature review and present examples showing the types of supports provided in the RCAAS Supporting Community Access through Leisure and Employment Program, SCALE.

Significance: Adults with Autism Spectrum (ASD) continually face challenges finding competitive community-based employment. Employment outcomes among adults with ASD are poor with employment estimates in ASD range from 10% - 50% (Nicholas, 2015). Other evidence shows that even if individuals gain employment, the positions held by persons with ASD tend to be entry-level and possibly below their skill level (Nicholas, 2015). Other research indicates the gap and challenges surrounding employment for individuals with autism and the need to address them. One study by Nicholas and colleagues (2015), suggests that there are benefits from long term tailored supported programs that can improve the way of life for an adult with autism.

Method /Approach: Data for (N =3) participants were extracted and entered into REDcap database. Hours of support categorized as either Community -Based or Individuals Supports, Prevocational Training Services, Community inclusions or Supported employment services. These categories also had sub-categories to classify specific activities on a participant's day. Data from each participant's first and most recent three months in the program will be presented to show changes in types of supports over time.

Outcomes/Results: Evidence-based reports from literature searches demonstrate that with a successful program model adults with ASD can transition smoothly into employment. Project Search is an example of a successful model that demonstrates that individuals who receive specific vocational training intervention have better success in transitioning to employment than individuals who received supported employment only (Schall, 2015). Project Search provides both classroom instruction and time-limited community-based support on internships with partner businesses and companies. In contrast, the majority of RCAAS supports are provided in the community and are competitive employment opportunities sought on an individual basis.

Evaluation/Conclusion: Participants in the sample size, n =2 received different supports ranging from; community support, community inclusion, employment support, prevocational support. Direct support increase independence from the viewpoint that participant B showed an increase in support hours in one domain (community support). Also, participant A shows a dramatic decrease in community support, whereas participation B, shows a decrease in prevocational support, but an increase in community support because of increased work hours. The RCAAS program shows promises for vocational and community involvement for adults with ASD.

Internship Abstract

Title: Minority Aids Initiative Support Apparatus
Name: Miriam Anukam
Preceptors: Roger Lester, MPA, Managing Director
Agency: Preparing Adolescents & Adult Ideologies Now- (PAAIN)

Purpose: To analyze the direct counsel engagement of high-risk individuals living with HIV/AIDS in impoverished areas (Paterson, NJ) and promote a healthy lifestyle routine to improve the overall well-being of clients.

Significance: In Paterson, there is about 148,678 individuals living in this city with a poverty rate of 30% and about 1 in 7 living with HIV are unaware of their infection. Every-day presents a battle with having to live and cope with various diseases such as HIV/AIDS, Hepatitis B/C, Cancer, and Lung disease. PAAIN targets proper initiatives needed to be taken in order to ensure clients are regularly coming in and working diligently with case managers in establishing a healthy outlook for surviving the disease they are enduring. This evaluation aims to pinpoint what sectors clients feel need to be enhanced by NJPAAIN in promoting a consistent and healthy living practice. In the process, also re-directing other routes planned to be established to keep clients coming back for follow-ups for the progression of their overall well-being while living with a particular disease.

Method/Approach: Detailed surveys from the 2020 MAI survey system were drawn up strictly by the Minority Aids Initiative Department as based on the usual occurrences that are identified between clients and case managers. Questionnaires were made and data was retrieved from each client upon the completion of scheduled meetings with case managers. Most clients who are under PAAIN are under the umbrella of the Paterson area of New Jersey with a broad range of male to female and various age groups, i.e (18-24, 25-34, 45,54). Two different types of surveys were conveyed with a random sampling of who exactly received which questionnaire to complete upon each case meeting. All data was collected from each client and processed to show a comparison of each survey and a common denominator of clients living a specific type of disease.

Outcomes/Results: The data compiled focused on 38 clients who are currently living with HIV/AIDS. There is a provision needed to initiate pertinent coping skills for clients living with HIV. There was a clear correlation of those living in a poverty-stricken area that is more prone to not having a steady support system which ultimately leads to facing an unstable lifestyle. Of the two surveys distributed a direct split of 17 clients answered a common question on survey A on yearning for more directive on what to do when living with a disease. From survey B of 19 clients, the data acknowledged the major question of having someone who is unchanging to aid in keeping them on track with a lifestyle plan.

Evaluation/Conclusion: More than half of client respondents expressed the need for consistency when following a set plan to keep them upbeat when facing the perils of living with HIV. Most clients believe the biggest difficulty with living in Paterson is the lack of resources and much-needed help within this pauperized location. Various organizations in relation to Well of Hope must remain constant and exude more empathy while working rigorously to promote being in good health while living with any kind of disease. Clients put faith into Well of Hope to remain consistent in having a passion to keep those living with HIV/AIDS on the right track and continuously convey the continuum of self-care needed to be done with the help of this foundation.

Internship Abstract

Title: Empowerment Through Care Packages

Name: Sarah Chelli

Preceptors: John El-Maraghy, founder of ARM

Agency: Archangel Raphael Mission (ARM)

Purpose: To create hygiene care packages to distribute to homeless individuals in New Brunswick.

Significance: As of January of 2018, approximately 9,500 individuals in New Jersey were experiencing homelessness. The city of New Brunswick has the third highest number of homeless people in New Jersey. Despite this large homeless population, there are only three homeless shelters in New Brunswick. According to a 2017 study, unsheltered homeless individuals had reduced hygiene and self-care practices due to the lack of availability of sanitation services. This study demonstrates the need for hygiene and sanitation services to be provided in homeless shelters. Archangel Raphael Mission is an organization based in New Brunswick that provides health and hygiene services to those in need.

Method/Approach: A service-oriented event was created to address the issue of the lack of available hygiene supplies for homeless people in New Brunswick. House the Hub, an ARM-affiliated organization at Rutgers that is dedicated to serving the homeless population, used previous research to decide which hygiene supplies were necessary to include in the care packages. The executive board of the organization evaluated the funds needed for the event and the number of volunteers needed for assembly. House the Hub had a goal of creating 200 care packages that would be distributed at the Annual Community Dinner in December. Based on the goal and the need for more volunteers, the organization decided to collaborate with another club to cosponsor the event. Both organizations advertised the event and asked volunteers to donate a number of hygiene supplies. The hygiene care packaging event took place on Tuesday, November 5th.

Outcomes/Results: House the Hub cosponsored the event with Eta Sigma Gamma, a health education honorary society on campus. In total, there were 20 volunteers who participated in the event and 300 care packages were assembled. House the Hub provided \$200 worth of supplies and members from Eta Sigma Gamma donated approximately \$100 worth of supplies. Each care package had travel-size Band-aids, a razor, shaving cream, a deodorant stick, deodorant soap, Q-tips, floss, toothpaste, a toothbrush, shampoo, and a comb. Half of the care packages also included tampons.

Evaluation/Conclusion: The event exceeded the goals and expectations of the House the Hub executive board. The 300 care packages will be distributed to homeless individuals at the Annual Community Dinner hosted by ARM on Sunday, December 8th. For future events, House the Hub can provide more supplies in order to create more hygiene care packages. The organization can also make this a larger event by promoting more, partnering with multiple organizations, and/or partnering with a larger organization. With more partnerships, House the Hub can create more care packages and bring more awareness to the issue of homelessness in New Brunswick. Access to hygiene products empowers homeless individuals with tools to improve their hygiene, self-care, and overall health.

Internship Abstract

Title: Promotion for Women in STEM in different Universities

Name: Phoebe Chu

Preceptors: Research Manager & Interim Director: Crystal Bedley
Media Specialist: Patricia Munoz

Agency: Office for the Promotion of Women in Science, Engineering, and Mathematics

Purpose: To analyze how different universities promote women in STEM fields and try to adopt the best practices at Rutgers University.

Significance: Women are often underrepresented in STEM careers. About 35.5% of women earned a Bachelor's degree in all STEM fields (Catalyst 2019). Gender inequality in STEM fields must be resolved in order for women to gain fair treatment and opportunities. Our office supports the Rutgers University mission of outstanding teaching, research, and community engagement by promoting gender and racial equity in science, engineering, and mathematics (fields tend to be disproportionately male).

Method/Approach: A list of universities with women in STEM offices and student organizations was compiled. Terms used for searches included, Women in "STEM", "Science", "Medicine", "Engineering", "Mathematics", and "Computer science". The next step was to check for the office/ organization's mission, type of events they offer, and contact information. After all the information was gathered, a scan was created for each university. Information on "Human Resources" section was also included in the search. Terms used for searches in this section included "[school] lactation room", "[school] childcare" and "[school] elder care". Target audience for each program and organization was recorded as follows: Undergraduates, Graduates, Post-Doc, Faculty, and Staff. University scans are overviews of the universities' women in STEM programs and organizations.

Outcomes/Results: At the end of this project we found that all universities offer lactation spaces and childcare services and host an average of 15 promotion events for women in STEM per semester as seen on their website event lists. Out of the 34 universities we researched, more than 70% promoted community building through social events, such as ice cream socials and game nights. Other types of events included professional development workshops, panels, and networking. Most of the universities engage in K-12 outreach programs. There were far more resources for undergraduates than other populations. Based on the research, the Office compiled a list of recommendations. First, lactation room information to be more centralized. Secondly, more mentoring programs for undergraduates with graduate mentors and offer monthly lunches for them to come together and discuss topics important to women in STEM. Lastly it is recommended to do TEDx-style events where an all-female line-up of Rutgers researchers discuss their findings.

Evaluation/Conclusion: With all the information that was gathered for the university scans, the Office learned about different strategies to promote women in STEM careers. One thing that could have gone better during the researching stage was if organizations/programs had a more complete detailed site. Some organizations that were missing information that was needed. The next step to measure success is to adapt and implement some of these strategies here at Rutgers. Then after the events, the Office could give out surveys to students and see their evaluation of the event. Students could be asked if views on women in STEM has changed after the event. This will help the Office figure out what strategies work.

Citation: Catalyst, *Quick Take: Women in Science, Technology, Engineering, and Mathematics (STEM)* (June 14, 2019).

Title: Audience Evaluation Tool Improvement

Internship Abstract

Name: Matt Civile
Preceptors: Mark Cruz, Peer Education Coordinator
Agency: Health Outreach Promotion and Education

Purpose: To streamline assessment data HOPE workshop presenters receive through a revised evaluation form.

Significance: College students do not often receive effective education about healthy behaviors. Only 45% of college students reported using a condom for vaginal intercourse in spring 2019 (acha.org, 2019). In the same study, 10% of respondents have 0 servings of fruits and vegetables, and 14% of respondents reported “seriously considering suicide within the last 12 months” (acha.org, 2019). Peer education has been found to be one of the most effective ways to educate young adults. Having educators who look like their audiences allows for a trust that older educators are unable to share with their audiences. Success of peer education-led workshops is essential to get audiences to improve health outcomes. In the past, measurement of peer educator success has been conducted by complicated paper surveys. Similarly, the post workshop self evaluation was also outdated and contained too many open-ended questions. To clarify the analysis of the surveys, a simplified form was created that benefits both the audience and HOPE.

Method/Approach: A new assessment method was created in October 2019 for audience members to fill out that was easier for data analysis. Questions regarding health behaviors before the workshop and planned health behaviors as a result of the workshop were placed side by side so changes could be measured easily. The workshop evaluation was also revamped to include more multiple choice questions that were balanced with fewer open ended questions.

Outcomes/Results: The new audience survey has been approved by Mark Cruz, the Health Education Specialist and will be implemented next semester. The old form asked questions regarding an individual's health behaviors, but had no visual component with which to see the impact the workshop had on how individuals perceive their own health behaviors. Additionally, the new form asks more direct questions to understand what specific components of the workshop were most effective. The new form is both visually appealing and functionally efficient and will allow for a more in-depth analysis of peer education success.

Evaluation/Conclusion: The new audience survey will be handed out next semester, but in comparison to the previous version, the new version is much more user-friendly and will hopefully allow for better analysis. Peer education, especially in regards to an individual's health, is essential to the continued health of a young population. It is imperative that the HOPE peer education program continues the assessment of it's own program in order to best serve the student population at Rutgers.

Internship Abstract

Title: City of New Brunswick Mayor's Office

Name: Miya Davis

Preceptors: Head Supervisor : Keith Jones II
Department Supervisor for Housing Inspections: Alex Atkins
Fire Inspection supervisor : Dominick Quagliata

Agency: Housing Inspection, New Brunswick

Purpose: To create and analyze a fire inspection database and binders to improve efficiency and maintain currency of housing applications .

Significance: New Brunswick has over 4,000 residences with the median income of New Brunswick resident being 36,000 dollars a year. Many of New Brunswick residents can not afford to buy a house due to financial struggles. Therefore 94 percent of New Brunswick housing is rental units. Due to this fact many owners do not maintain these units. It is found in the New Brunswick 2015-2019 Consolidated Plan that the main violations in regards to housing is lack of complete kitchen, lack of complete plumbing, more than one person per room, cost burden and fire code violations.

The purpose is to protect the tenants from injury and making sure that their living conditions are safe. Many owners tend to neglect their properties leaving the tenants to fix issues that the landlords are responsible for. For 2019 year the fire department has only received 860 applications for fire inspection of one and two family rental units. That is only 26 percent of the 3,302 addresses of landlords that still need to come into the office and submitted a fire safety inspection application.

Method/Approach: Using the GIS system spatial search was conducted on all completed fire inspections on housing units in New Brunswick, New Jersey that passed the inspection process for the year 2019. These units consisted of one and two family houses that owners have come in and applied for fire inspections to insure that their units are up to code. After conducting the research the GIS search was imported into a pdf file. This file was used to create an excel database with two sheets separating the one and two family units . The excel spreadsheet incorporated all 3,302 one and two family rental units within New Brunswick. After, all addresses was imputed into excel the pdf file from the GIS system was used to see what units had passed inspection. This was then imputed into excel next to correlated address with the word done. This approach allows for the fire inspection to see what is completed and what still needs to be done and owner still need to come in an apply for inspection.

Outcomes/Results: The total population size n= 3,302 addresses, of that 2,574 was one family housing units, the remainder sample is 728 two family rental housing units. Of that the sample size 862 fire inspection application was processed. For one family units 334 of the 862 application has complete fire inspection certification and 196 two family units have been completed. The total applications completed out 860 is 540 resulting in a 62 percent completion rate for 2019 as of October 25.

Evaluation/Conclusion: Due to the overall outcome being 62 percent completion rate for the fire inspection of one and two family rental housing units. The results show that there is still 38 percent of one and two family housing units that still need to be inspected. It is determined that the current speed of inspection is successful based on application completed.

Internship Abstract

Title: New Jersey For All- Matched Giving Campaign
Name: Sowsan Deifallah
Preceptors: Direct Supervisor: Johanna Calle, Executive Director
Agency: Alliance for Immigrant Justice

Purpose: To support the agency's advocacy efforts by examining the donor relations database and developing the annual matched giving the campaign.

Significance: New Jersey is home to approximately 500,000 undocumented immigrants (Migration Policy Institute). Heightened national attention and Federal public policy directives have resulted in an increase in Immigration and Customs Enforcement (ICE) detentions and deportations. In New Jersey, ICE arrests have risen 42 percent since 2016 (Alvarado, 2019). New Jersey is home to three detention centers housing approximately 2,000 undocumented immigrants and asylum seekers. Approximately 52,000 young New Jerseyans or *dreamers* continue to fight for legal immigration status and assurances they will not be deported.

Additionally, undocumented immigrants are not eligible to obtain driver's licenses.

A port of entry, the tri-state area has a storied immigrant history. The Alliance for Immigrant Justice advocates on behalf of New Jersey's immigrant community. The organization has made progress. The work of the New Jersey Alliance for Immigrant Justice and its member organization resulted in a policy directive to end of 287 (g), the federal policy responsible for enabling detention and deportation. The organization actively works with state policymakers to protect the dreamers. The governor is ready to sign a bill allowing New Jersey's undocumented residents to obtain driver's licenses.

The organization is comprised of three principal staff members.

Method/Approach: In close collaboration with the executive director, the initial activity included analyzing the donor database, Nation Builder. An initial evaluation resulted in findings related to the use and effectiveness of the database with a focus on software and data management. Data was exported to create separate lists comprising donor profiles. A review of alternate donor software was conducted. Next, a strategy to develop leads through Facebook was developed. The content for the Matching Grant Campaign materials was created. The fundraising campaign will kick off on December 2, 2019.

Outcomes/Results: The examination of the organization's database revealed the agency's need for a protocol to manage data. The decision was made to move to a Customer Relations Management software. Match campaign content was finalized and readied for the kick-off.

Evaluation/Conclusion: For the organization to continue its critical policy work, resource development and administrative support are critical. In the absence of paid staff, strict protocols and user-friendly customer relations software are cost-effective strategies. Managing a giving campaign is time-intensive. The Alliance is short-staffed and could benefit from a paid, part-time resource position.

Internship Abstract

Title: Significant Weight Discrepancies Within Long Term Care Facilities

Name: Chetia Doucet

Preceptors: Greta Jo Payne MBA, LNHA

Agency: Catholic Health Group

Purpose: To identify significant weight loss and determine the causes of the weight loss within the long term care community.

Significance: Unintentional significant weight loss in the nursing homes can lead to higher morbidity rates, increase of bed sores, higher mortality and decreased quality of life for the elderly. Weight loss can be contributed to a number of clinical problems and can indicate low quality of care in nursing home facilities. A significant number of frail elders lose weight as a result of malnourishment, which is estimated to affect 35 and 85 percent of nursing home patients. It is important to recognize the clinical and administrative contributions of daily patient care to ensure that the greatest quality of life will be achieved in nursing home facilities.

Method/Approach: Residents with a significant weight decrease were identified. These residents were followed on a weekly basis to obtain weight, implement intervention and closely monitor to ensure proper interventions were in place and evaluated for effectiveness. Nursing staff, dietitians and administration collaborated to review policies as well as implement new policies on controlling and monitoring/tracking resident's weights. This team also met on a weekly basis to hold care conferences to discuss the progress of each identified resident.

Outcomes/Results: On unit E/F in the month of September, four residents identified with a significant weight loss. In the month of October four identified, two being a new case and two others being resolved from the month prior. Each resident with a noted weight loss was studied to conclude possible causes of weight loss. Weight losses were concluded as a desirable weight loss due to diagnosis of obesity and no found changes in meal consumption totals. Weight loss found possibly due to increased decline in health secondary to medical diagnosis of residents receiving hospice care. Weight loss as a result of the use of diuretic medications. Physician's discontinuation of medication for appetite stimulation was another identified possible cause of weight loss. Residents remained on weekly weight monitoring.

Evaluation/Conclusion: It is necessary to monitor weights properly to ensure residents of long term care facilities are receiving required nutritional needs. Nursing, dieticians, dietary and administration are responsible to ensure that the proper implementations are in place. Monitoring weights decreases morbidity rates, body breakdown while increasing quality of life and ensuring the optimal level of health is assured. Weight monitoring in the long term care facilities is an ongoing process. Resident's will continued to be monitored and healthy weights maintained by implementation of proper personalized interventions.

Internship Abstract

Title: An Assessment of Appointment Return and the Importance of Prevention Education

Name: John Fenton, Intern

Preceptors: Katherine Varchenko, DMD and Business Owner

Agency: Brunswick Dental Group of East Brunswick

Purpose: To analyze follow-up appointment rates and propose educational interventions to increase patient return and overall oral health.

Significance: Appointment cancellations are a frequent occurrence in dental offices. Surveys report that over 10% of annual dental appointments get cancelled (Dental Economics, 2014). Often times, these patients also fail to reschedule. Common issues such as cavities, decay, gum disease, toothaches, cracked or impacted teeth, and proper alignment are examples of problems that will only get worse when treatment is delayed. The number one cause of missed appointments is forgetfulness, followed by financial insecurity, transportation issues, and fear (British Dental Journal, 1998). Failure to attend or reschedule appointments leads to a delay in treatment, negatively impacting their oral health. Good oral hygiene is a lifelong commitment and Brunswick Dental Group aims to ensure that every patient is put in the best position to achieve it.

Method/Approach: An anonymous contact preference form was distributed to patients between the ages of 15 and 73 at the conclusion of their appointments. Patients were instructed to select all options they felt pertinent to improving return rates. Contact options were separated into two sections, reminder method and reminder frequency. Reminder method options were: appointment card presented when appointment is made, phone call reminders, text message reminders, or no additional reminders. Reminder frequency options were: once (at date next appointment was made), monthly, biweekly, day before appointment, or other. Monthly, frequency options were noted to begin three months before the appointment date and biweekly reminders were to begin approximately six weeks prior. Additionally, patients were given a printout displaying common dental issues that are simple and easy to treat if diagnosed on time.

Outcomes/Results: Of the sample size cohort (n=81), 64% of patients over 45 preferred all reminder methods. 71% of patients under 45 preferred solely text message reminders and 86% preferred either text messages or phone call reminders. 77% of patients over 45 preferred monthly, biweekly, and day before appointment frequency reminders equally. 54% of patients under 45 preferred biweekly reminders and 74% preferred both biweekly and day before appointment reminders.

Evaluation/Conclusion: More than half (n=44, 54%) of all patients preferred multiple reminder methods. Nearly 85% of all patients preferred biweekly and day before appointment frequency reminders. While slight disparities in preferred reminder methods were observed, the data shows it may be based on technological preference. Observing reminder frequency we can see that the majority of patients desired multiple reminders in the weeks leading up to their appointment. Increased reminder frequency on any or all reminder methods will serve as an effective strategy to (a) reduce patient appointment cancellation rates, (b) improve their long term oral health, and (c) reduce financial burden on future treatments. Ongoing monitoring of appointment cancellations will be undertaken to ensure continued improvement in the future. In addition, patients will be given a satisfaction survey at their next appointment.

Internship Abstract

Title: Impacts of Charity Foundation X on the Citizens of Nigeria
Name: Moriya Frankel
Preceptors: Direct Supervisor: Cynthia Pelayo, Vice President
Agency: Ipsos in North America - Corporate Reputation Service Line

Purpose: To analyze the opinions of citizens in Nigeria on how Charity Foundation X is impacting their country and to determine if trust has been established between the foundation and the citizens.

Significance: Nigeria is a country located in Africa that consists of over 190 million people and struggles significantly in the battle against preventable diseases. Among the top ten causes of death in Nigeria, lower respiratory infections, neonatal disorders, HIV/AIDS, and malaria are listed (CDC, 2019). Charity Foundation X focuses on finding solutions to critical global public health issues and plays an important role in improving situations in struggling countries, like Nigeria. This study aims to determine what areas Nigerian citizens feel Charity Foundation X has been most successful, where their interventions can advance, and if Charity Foundation X has the full trust of Nigerian citizens to fix these issues.

Method/Approach: Country-specific questionnaires were prepared ahead of the survey launch and programmed through a data processing group. Data was collected through in-home paper surveys in Lagos, Oyo, Abuja, Kano, Bauchi, Enugu and Rivers, both rural and urban areas. Primary sampling units (PSUs) and secondary sampling units (SSUs) were selected randomly by Fieldwork Coordinators to fulfill the sample requirement. Those not in the 18-99 age range or a resident of Nigeria were terminated from the study. Data is then coded, processed, and delivered to the client.

Outcomes/Results: When given aided awareness, 530 (49.7%) of the total sample size (n=1066) answered that they did not know of Charity Foundation X. When asked about the biggest issues facing Nigeria today, 657 (61.6%) selected unemployment, wages, and jobs followed by poverty and inequality of health (52.8%). 308 (28.9%) respondents selected “supporting activities to reduce poverty and improve healthcare in the developing world” as the main mission of Charity Foundation X but 409 (38.3%) respondents see Charity Foundation X’s biggest success as their improvement of public health in the developing world. 396 (37.1%) of respondents believe Charity Foundation X should focus more of its efforts on both the people of Nigeria and other people around the world. Of the respondents that selected that they had at least some knowledge of Charity Foundation X (n=425), 239 (56.2%) said they had above average trust of the foundation and 149 (35.1%) had average trust.

Evaluation/Conclusion: Almost half of the Nigerian respondents are unaware of Charity Foundation X and the work that it does. Most Nigerians believe the biggest issues in their country have to do with poverty and the workforce but do not rank these issues as Charity Foundation X’s biggest successes in their country. Respondents believe Charity Foundation X’s work should be spread more equally between Nigeria and other people around the world but remain trustworthy and confident that the foundation along with other international charity foundations will be diligent in helping the people of Nigeria.

Internship Abstract

Title: PDGM & CMS regulations to change home health services for the better.

Name: Jennifer M. Goddard

Preceptors: Deana M. Weiser, OTR/L Associate Director

Agency: BAYADA Home Health Care- Cherry Hill

Purpose: To comply with Patient-Driven Groupings Model (PDGM) Centers for Medicare & Medicaid regulations and provide better quality care to clients through a collaborative patient-centered approach to care.

Significance: The Centers for Medicare and Medicaid Services have implemented new regulations for home healthcare for January 2020. These regulations will have a significant impact on the reimbursement structure. CMS is looking for a more patient-centered team approach, to ensure patients receive the best quality care.

Under PDGM these significant changes will take place:

- Reimbursement will shift to 30-day billing periods instead of the previous 60. Each 30 day period of payment is classified as an early or late period. The first 30 periods being early, paying at a higher rate and subsequent 30 day periods as late. Length of stay will be a major factor in reimbursement and the number of therapy visits no longer be included in payment determination. Payment differentials will be based on the admission source. Referrals being either physician office or institution, community referral sources being reimbursed at lower rates.
- OASIS assessments will expand to include impairment levels and clinical groupings. The payment grouping mix is expanding from 153 combinations to 432. Patients are classified into 1 of 12 clinical groupings based on their primary diagnosis. Patients are now assigned a functional score, placing them into a low, medium or high-risk category.

Method/Approach: Observation of clinical staff huddles, organizational tools were used to organize patient information, patient goals and scheduling of patient visits. Clinical staff collaborate to meet patient goals and to prioritize patient safety through the platform zoom. A collaborative approach to patient care helps to better organize care, meet patient goals and allows all clinicians to fully understand each individualized case as it is presented.

Outcomes/Results: Changes and tools for PDGM have been in place since June 2019, in 30 of 90 Bayada offices. Rehospitalizations decreased from 18% to 11% since that time and collaboration has been successful. Utilization did not increase but rather held steady, as visits were structured in a manner to better meet patient goals and their most pressing clinical needs.

Evaluation/Conclusion: CMS regulations established improvements in the way Bayada organizes patient care. A more collaborative approach has helped to keep those needing higher levels of care from readmission at higher rates. Although true predictions can not be made fully at this time on its success, patient care is likely to improve even more by the end of 2020.

Internship Abstract

Title: Improvement of Rutgers Cell and DNA Repository
Name: Augustine Graziano
Preceptors: Christopher Pombo, Laboratory Researcher III
Agency: Rutgers University Cell and DNA Repository (RUCDR)

Purpose: Improvement of synergistic flow and freezer maintenance at RUCDR to improve work dynamic, control, measurement accuracy, and technician accuracy.

Significance: Rutgers University Cell and DNA Repository is a College of Pathologists Accredited (CAP) Laboratory. Guidelines and mandates must be periodically checked, updated, revised, tested, and improved. According to CAP, essential guidelines include to “continuously improve identification, improvement, and correction of errors.” According to the National Institute of Health, laboratory equipment errors occur between “0.012-0.6% of all test results,” which can be attributed to wide scale diagnosis, preservation, or result errors . Improved periodic maintenance, along with enhanced systematic diagnosis and corrections made, diminished the error gap.

Method/Approach: There are two annexes with an array of cryogenic freezer tanks at RUCDR. A retrospective review of previous data logs from June 2019 to August 2019 was conducted for the cryogenic freezers. A review of freezer maintenance, records, and measurement accuracy was tested and assessed. An Excel spreadsheet , and new data log was created for the freezers and their maintenance. A new form was created with distinct categories and benchmark tests to assure quality. Distinct categories and “checkups” for the technician to measure on the form included “Freezer ID #”, “Date Scraped” “Measured Temperature” and “Functionality” to ensure the most accurate specimen safety and preservation. A personal interview with a group of 6 laboratory technicians was conducted and the results were analyzed so technician satisfaction was ensured

Outcomes/Results: Of an informal qualitative assessment of laboratory technicians, all were generally pleased with new measurement protocol to ensure specimen safety. The gap in equipment error could never fully be closed due to various aspects of human error such as misreading of data, misinterpretation of data, and errors in assessment; however, ensuring updated maintenance and revision of key forms linked to functionality have improved the error gap. Technician error and missed recordation was reduced fully in the three months studied and doubled efficiency (with regards to random human error or 9% of errors associated with this equipment), as there was no form or system for quality assurance beforehand.

Evaluation/Conclusion: Effective strategies and the use/implementation of new and improved lab safety ensured that sample management, data recordation, and accuracy of a diagnosis are all of the highest quality. Maintaining and updating protocol for maintenance functionality combated the errors attributed to equipment malfunction or misrecording.

Works Cited

Internship Abstract

Title: Distinguish Food Inspection Compliance Through Restaurant's Type of Cuisine
Name: Deisy Guzman
Preceptors: Direct Supervisor: Yojana Rubiano, REHS, Health Educator
Agency: North Bergen Public Health Department

Purpose: Utilize data from inspection reports to map and identify correlations between food handling violations and types of restaurants in Hudson County.

Significance: Safe food handling is an important process in preventing illnesses. Food inspections play an important factor in ensuring the public's safety by enforcing the safety of all consumed goods that are distributed through food establishments. With a variety of restaurants located in the Hudson County, this study was on West New York, Secaucus, and Guttenberg. Inspection reports demonstrated whether or not food establishments were in compliance with the state's sanitary code. Furthermore, this study also aimed to correlate inspection results with food handling affairs among restaurants' type of cuisine.

Method/Approach: Forty-five restaurant inspection reports were collected from August 2nd to October 29th, from West New York, Secaucus and Guttenberg, New Jersey. Information gathered was separated into 'satisfactory' and 'unconditionally satisfactory'. Once separated, it was broken into the following categories, according to the restaurant's type of cuisine: Italian, Latin American, Asian, or Middle Eastern.

Outcomes/Results: Forty-five restaurants were categorized as follows: 7 Italian, 11 American, 17 Latin American, 3 MiddleEastern, and 7 Asian. The correlation between food handling compliance and restaurant's type of cuisine was compared. The restaurants with the highest violations were Latin American (41%) and Italian (43%). The restaurants with the lowest number of violations were Middle Eastern (0%), American (9%), Asian (14%).

Evaluation/Conclusion: This project concluded that restaurants serving Latin American and Italian cuisines are more likely to be issued an "unconditionally unsatisfactory" compared to others in the Hudson County Area. With an area that is overfilled with restaurants of all types of cuisines, the North Bergen Health Department will have access to statistics to help shape and better understand the association among food compliance and different types of restaurants. During the process, it was hypothesized that multiple violations from food establishments were due to lack of communication, training, effort, and in some cases, language barriers.

Internship Abstract

Title: Completion of NCQA Internal Audit Requirements

Name: Nathaniel Hansen

Preceptors: Direct Supervisor: Belinda Doyle Puglisi, Corporate Director of Managed Care, RWJBH
Project Supervisor: Lynn Francisco, Payer Services Coordinator, CSH

Agency: Children's Specialized Hospital (CSH) an RWJBH affiliated facility

Purpose: To complete the National Committee for Quality Assurance (NCQA) internal audit requirements prior to submission of Credentialing Accreditation to NCQA, allowing corrections to be made as needed within the electronic credentialing systems and reevaluating day-to-day processes.

Significance: Auditing the internal credentialing system of ECHO is crucial to becoming NCQA eligible as the system's accuracy of providers has not yet been updated. NCQA is a nationally recognized credentialing organization that measures quality within healthcare organizations. Individual credentialing may take up to six months to verify and complete, this process includes delays and waitlists, which increases costs for Children's Specialized Hospital. Delegated credentialing through the ECHO system allows providers to be submitted to delegated payers via monthly rosters. This will allow providers to go through the credentialing process faster than the individual credentialing plan. The information that is credentialed includes provider demographics such as licensures, addresses, PAR payer information, and hospital affiliation. Streamlining the ECHO credentialing system will eliminate waitlists, so Children's Specialized Hospital will be reimbursed for their services.

Method/Approach: An accurate electronic credentialing system audit will ensure a successful NCQA application process. This role included assisting staff with internal auditing and make corrections to meet NCQA certification requirements. A re-audit of the policies and procedures assures validity and attains attention to detail. Correct and complete audits on the 129 providers through ECHO and Excel allows for initial NCQA application submission as well as allows the CRPN to move forward with Delegated Credentialing with additional managed care payers. These efforts allow the CRPN to become an accredited CRPN through NCQA.

Outcomes/Results: My 10 audit projects have been completed to date include Provider Locations audit (80%) , NJ State Licensure audit (91%), DEA Licensure audit (97%), CDS Licensure audit (97%), Board Certification (48%), Hospital Affiliation Provider audit (70%) , Payer Providers audit (56%) , Physician Grid Payer (76%), SS Death Master (99%) and CAQH audit of 98% accuracy. They average out to 81% accuracy for the overall system. These audits will then lead and tie together to ensure the credentialing plan for NCQA standards have been met. When the CRPN audits are finalized then the CRPN can submit its application to NCQA. The completed audits' key aspects of the electronic credentialing system will result in the efficiency of the providers accurately reflected on monthly rosters and reports submitted to the managed care payers where delegated credentialing agreements exist.

Evaluation/Conclusion: The project for NCQA accreditation is still ongoing to become an accredited Credentialed Provider Network (CRPN) with NCQA. Continuous internal auditing of the credentialing systems is crucial for the CRPN because of NCQA and other managed care payers audits schedules.

Internship Abstract

Title: Healthy Housing and Health Outcomes Assessment

Name: Marcus Henry

Preceptors: Yesenia Hernandez, Program Coordinator, Ana Bonilla Martinez, CHES Program Coordinator

Agency: Robert Wood Johnson University Hospital- Community Health Promotions Program

Purpose: To analyze housing issues and their impact on health outcomes for New Brunswick residents and propose solutions and interventions to improve housing quality and overall health.

Significance: An unhealthy and unsafe housing environment can lead to worse health and economic outcomes. Household hazards, such as mold, lead paint, pest infestations, and other unsanitary conditions can greatly deteriorate the health of adults and children over time and can manifest themselves into bigger problems in the future. Residents in New Brunswick visited the emergency room 150% more than the average Middlesex resident between 2008-2012. Residents in New Brunswick visited the emergency room 150% more than the average Middlesex residents between 2008-2012. RWJ University Hospital is committed to serving the community and focuses on preventative care, not symptom care.

Method/Approach: The New Brunswick Healthy Housing Collaborative worked with four community health workers to conduct outreach, home assessments, peer education, and collect surveys from city residents. The 77 question survey collected the 7 data points of the 7 principles of a healthy home. NBHHC targeted two area neighborhoods known as the Esperanza and Unity Square neighborhoods in New Brunswick. One hundred and thirty surveys were collected between 2018-2019.

Outcomes/Results: Out of the 130 families that were visited, 24% reported having a family member with asthma, and 48% of those had to make visits to the emergency room for an asthma attack. Of the participants with family members with asthma 39% reported having cockroaches, 19% report having rodents, and only 55% knew if air filters had been changed in the last year.

Conclusion: Because only 9% of participants are homeowners, they don't have full control on what repairs or improvements can be made within or around the property. Within some lease agreements, changing anything could lead to breach of contract and cause the tenant to lose their security deposit. If New Brunswick residents visit the emergency room at Saint Peter's University Hospital or RWJ Hospital with asthma related issues, members of the NBHHC could be sent to the homes of the patient do an evaluation with their consent. Successes of the NBHHC will be recorded by follow up visits and surveys to evaluate the changes that occurred within the home and of the changes made in the patient's health.

Internship Abstract

Title: Cosmic Medicine Research

Name: Sana Kamal

Preceptors: Dr. Gloria Bachmann - Professor of Obstetrics and Gynecology and Medicine and Associate Dean for the Women's Health Institute

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

Purpose: To conduct an evaluation on cosmic medicine research to see how effective it is on patients.

Significance: Cosmic medicine is a form of healing using mental states, vibrations, and energies of the body. It is widely used in China, Japan, India and Africa. It's a practice that has been dated back to the 3rd century BCE from Chinese Philosophy. There are many different parts to cosmic medicine including Qui (Chi), yin and yang, vibrations of the body, mental states, energies, and the pineal gland. Is a branch of medicine that has been around for hundreds of years and is accepted in multiple other countries something we should implement in the American Healthcare system? One study showed how including an hour of qigong healing (healing using energy) in cancer patients improved their quality of life by 8.23 points, which is seen to be a clinically and socially significant difference (B. Oh, et al). This evidence indicates that cosmic medicine can make a positive difference in patients' lives.

Method/Approach: In order to determine whether or not Cosmic Medicine should be used in the United States, comprehensive research was done on various methods of cosmic medicine. Different aspects of Cosmic Medicine included qigong healing, vibrations of the body, and chi. Qigong healing and vibrations of the body (specifically called theta wave healing) were the only aspects of Cosmic Medicine that had peer reviewed research done, and so those were the two focal points researched. Studies were all added to a google doc where all interns could review and evaluate to see if the study was significant or not significant and if the method of healing was thoroughly proven to be something beneficial for the patients as well as possible for hospitals to implement.

Outcomes/Results: Many studies on cosmic medicine were done in the early 2000s and still had not had any of their data posted. Almost all studies said "Results will be posted" but when looking at when they were done, they were done between 2004 and 2009, meaning their results were probably never going to be posted. Eventually two studies with results were found that revolved around qigong healing. Qigong healing is healing using energy. One of the studies showed that one hour of qigong healing in cancer patients improved their quality of life by 8.23 points, which is medically significant. The second study followed a man with multiple chronic conditions who underwent four plus hours of qigong healing. After ten sessions of intensive qigong as well as an hour of daily qigong, the patient stopped using all of his medication (eight in total), lost 35 lbs, edema in his legs went away as well as his symptoms for asthma and allergies. Lastly, PSA levels dropped from 11 to 4 (normal).

Evaluation/Conclusion: From the studies evaluated so far, Medical Qigong does have a positive impact on patients and their healing. Research is constantly being updated though, and so this is subject to change. When research is finished, evaluated data will be brought to the doctor in charge of this initiative at the Robert Wood Johnson Hospital to see if this data can be brought up to the hospital board so that an initiative on Cosmic Medicine can be started at the Robert Wood Johnson Hospital.

Internship Abstract

Title: Psychosocial Support for Development Professionals By Addressing Vicarious Trauma

Name: Jake Konig

Preceptors: Bobby Irven, Senior Communications Associate and Julie Kedroske, Technical Advisor, Ultra-Poor Graduation Initiative

Agency: BRAC USA, New York City

Purpose: To develop a comprehensive mental health resource guide in conjunction with an office wide presentation that deals with the negative side effects of Vicarious Trauma.

Significance: According to the Headington Institute, Vicarious Trauma is the process of change that occurs when one cares about other people who have been hurt, and feel committed or responsible to help them. Over time this process can cause negative changes in psychological, physical, and spiritual well-being. Whether working with ultra-poor households in Uganda, or working inside the Rohingya refugee camps in Bangladesh, professional staff working in environments of intense human suffering can incur trauma in the aid worker. Research conducted by the Hilton Coalition reports that humanitarian and development aid workers are vulnerable to experiencing negative symptoms as a result of this trauma, including burnout, anger, guilt, sadness, insomnia and in extreme cases, PTSD. Studies indicate that these effects can be mitigated and treated if organizations implement a mental health framework for their staff, and the goal of this project is to help build out such a framework for BRAC USA.

Method/Approach: The approach in building out this framework will be carried out through three primary methods. Firstly, an extensive literature search will be conducted from sources that includes but is not limited to: The Headington Institute, the Hilton Coalition, the CHS Alliance and the Konterra Group. Secondly, staff members will be asked to complete an anonymous survey utilizing likert scales to measure their experiences and outcomes as a result of their work. Lastly, one on one interviews will be conducted with staff members from each respective team to finalize the qualitative aspect of the research.

Outcomes/Results: The outcomes of the anonymous survey and 1:1 interviews yielded results that show that like what was found in the literature review, the development practitioners at BRAC USA have been impacted by Vicarious Trauma, and that there is room for improvement in regards to psychological well being. On a Likert scale of 1 (representing the most psychologically healthy) to 5 (representing the least psychologically healthy) 59% of staff recorded scores of 4 or 5 (50% and 9% respectively) of experiencing feeling less effective at work due to being overwhelmed or emotionally distracted. To continue, 32% of staff recorded scores of 4 or 5 (18% and 14% respectively) of feeling emotions of guilt, which is one of the main symptoms of Vicarious Trauma. It is also important to note that 32% of staff recorded scores of 4 or 5 (14% and 18% respectively) of experiencing symptoms of Hyperarousal (such as nightmares, difficulty concentrating, being easily startled, and/or sleeping difficulties) or similar repeated intrusive thoughts regarding their work.

Evaluation/Conclusion: Springboarding off of these results, several steps are being implemented that will build an environment of psychological safety for present and future BRAC USA staff. These include adding psychological preparation sessions before embarking on field trips as well as including psychological debriefs in PLL meetings on return of field trips. Office wide informative sessions on how to prevent and treat Vicarious Trauma are also being scheduled to educate staff and leadership.

Internship Abstract

Title: Success Stories Document for the Neighborhood Revitalization Tax Credit Program

Name: Dana Ladd

Preceptors: Bradley Harrington

Agency: New Jersey Department of Community Affairs

Purpose: To promote the Neighborhood Revitalization Tax Credit Program (NRTC) by constructing a “Success Stories” document for the 2018 finished Grant periods for our NRTC funding receivers.

Significance: The NRTC program is designed to foster the revitalization of New Jersey's distressed neighborhoods. The program provides business entities an 80 percent tax credit for funds provided to nonprofit entities carrying out comprehensive revitalization plans. 60 percent of the tax credit funds must be used for activities related to the development of housing and economic development. NRTC funds have enabled neighborhood organizations to have an extensive impact on their locale through the implementation of housing development, employment training opportunities, arts installations, community events and much more. With that said, although the impact has been great, the program itself is not well known among the masses. A Success Stories Document is a highly effective means to demonstrate the impressive work that has and will continue to be done thanks to the collaboration of private and public entities to enliven neighborhoods encouraged by the NRTC program. The document also aims to serve as the main attractor for more neighborhoods and investors to participate in the Program in the future. The successful projects that have sprouted from NRTC funding speak volumes on their own, the Success Stories document serves as the stage for them to shine.

Method/Approach: The Success Stories Document is a compilation of 10 participating neighborhoods throughout NJ. The end of the year reports completed by the nonprofit organization that was awarded the grant money from the NRTC program were read and then summarized into single page documents for each organization. The pages each included pictures of the programs and projects that were implemented during the grant period, a description of some of the most successful projects and the organization’s information and logo.

Outcomes/Results: The outcome of the Success Stories document is a 17 page document that outlines the cover page, table of contents, 10 individual pages for the 10 non-profits awarded NRTC grant money deemed to be most appropriate and impactful and an appendix with all of the organizations listed and the money they were awarded.

Evaluation/Conclusion: Once the Success Stories document is approved for public release, it will be a vehicle for increased publicity of NRTC, allowing DCA to better showcase the program with vetted information (text and photos). It will also allow other interested parties, including NRTC grantees, to use it to positively demonstrate neighborhood-based community development efforts. Finally, it will be a template for future versions of the document.

Internship Abstract

Title: Developing Lead Abatement Policy in New Jersey
Name: Brooke Lockwood
Preceptors: Colin Emerle, Legislative Legal Advisor
Agency: New Jersey Department of Environmental Protection (DEP)

Purpose: To track the political process of New Jersey's recent push for lead abatement and water quality improvement.

Significance: There are an estimated 350,000 lead service lines in New Jersey that carry drinking water into homes, schools, and offices. Lead exposure is known to cause significant neurological impairment. These lead service lines disproportionately impact low-income, meaning the median household income is 80% or less of the median statewide household income, urban areas. This happened most famously in Newark where in the summer of 2019 there was a crisis over lead leaching into the water, preventing many citizens from being able to use their tap water. The issue of lead is one that relates to public health, and in 2017, 5-7% of children aged 6 to 26 months living in Newark, Irvington, and East Orange were found to have blood lead levels exceeding the federal limit (Flanagan, 2019). There has been a recent push for lead abatement after decades of discussion which culminated in an announcement by Governor Phil Murphy in which he launched a multi-billion dollar initiative to replace all lead service lines by 2029, with the goal of environmental justice.

Method/Approach: A review of the DEP's statutory authority to regulate water systems was conducted in order to understand whether legislation needed to be established to achieve the governor's goals. Preliminary research was conducted via an internet search in order to determine whether other states had laws that could be used to improve New Jersey's Water Quality Accountability Act. After the governor announced his goal to replace all lead service lines within the next 10 years, secondary internet research was conducted to determine if other states were doing lead service line inventories and how they were conducted. This research was synthesized into a datasheet of related bills. Issues in lead abatement and concerns regarding how the policy will be executed by the DEP were considered and synthesized into a policy memo.

Outcomes/Results: The final policy memo provides an analysis of research findings relating to the scope and challenges of replacing lead service lines, strategies that other states have sought to apply to manage their own water systems, and the needs of the agency in order to effectively manage this issue. After analyzing 14 states that have a policy that at least suggests the development of a lead service line inventory, it was determined that Michigan had the most thorough statute that New Jersey could model, which included a full inventory and annual consumer confidence reports. As lead abatement laws are introduced to the legislature, considerable concerns include the cost, data system management, and physical disturbance to property.

Evaluation/Conclusion: The DEP has established statutory authority to require regular site mapping and lead abatement planning through the Clean Water Act. The development of a lead service line inventory guidelines by the DEP would best be modeled after Michigan's model. As the DEP develops their statutory and regulatory procedures they will continue to monitor how other states are managing their lead problem in order to establish a stringent system of removing lead service lines within the decade.

Internship Abstract

Title: Addressing Unmet Mental Health Needs in the LGBTQIA Community
Name: Indira Malladi
Preceptors: Meredith Blount, Executive Director, National Alliance on Mental Illness (NAMI)
Agency: National Alliance on Mental Illness (NAMI), North Brunswick, New Jersey

Purpose: To engage with mental health organizations in New Jersey to find out where there is the greatest need for additional services for the LGBTQ community and to identify the best way for NAMI NJ to help address these unmet mental health needs.

Significance: LGBTQ people are at a higher risk than the general population for suicidal thoughts and suicide attempts. According to King et al. (2008), LGBTQ adults have a two-fold excess risk of suicide attempts compared to other adults. High school students who identify as lesbian, gay, or bisexual are almost five times as likely to attempt suicide compared to their heterosexual peers (Kann et al., 2016). 48% of all transgender adults report that they have considered suicide in the past 12 months, compared to 4% of the overall US population (James et al., 2016). Additionally, sexual and gender minority people experience higher rates of eating disorders, body dissatisfaction, and obesity compared to the general population (Fenway Institute, 2018).

Method/Approach: A spreadsheet was compiled in order to guide outreach to organizations which can provide insight into the best way for NAMI NJ to support the LGBTQ community. This tool was also used to collect and analyze stakeholder feedback. Of the 45 organizations (n=45) which received an outreach email or phone call, five have provided feedback for NAMI NJ (11.1%). Represented among those five stakeholders is one licensed clinical social worker, one policy consultant from county government, one support group facilitator, one activist, and one subject matter expert.

Outcomes/Results: The overarching theme that emerged was a need for housing and caregiver supports. LGBTQ teens and LGBTQ older adults were the two populations most frequently cited by stakeholders as being in urgent need of services. Sub-themes for LGBTQ teens included housing support and family support group services. Subthemes for older adults included cultural competency training for nursing home and home care staff. The major deliverable of this project is to create a webpage about NAMI NJ's LGBTQ initiative, including a culturally responsive introduction to the initiative and resource clearinghouse.

Evaluation/Conclusion:

Partnership building, as measured by the number of invitations received to attend stakeholder events, indicates viability of, and community interest in, a NAMI initiative for LGBTQ mental health needs. Two out of the five stakeholders who provided feedback also extended invitations to upcoming events and meetings (40%). The small number of stakeholders who agreed to provide feedback (n=5) is a limitation of this study. Further outreach that is guided by stakeholders' personal references would yield greater response rates than "cold-calling". A needs assessment survey can be developed to gain a better understanding of the needs of older adults.

Internship Abstract

Title: Protecting Freshwater Streams in New Jersey
Name: Cierra McClendon
Preceptors: Sophia Hull, Clean Water Associate
Agency: Environment New Jersey, New Brunswick, NJ

Purpose: To classify freshwater streams in New Jersey as Category Ones so they can be protected under the The Murphy Administration and the New Jersey Department of Environmental Protection. The protections, called Category One, ensure waterways cannot be measurably degraded and have 300 foot buffer protections around their banks to reduce run-off pollution.

Significance: In the entire world, only 3% of the water is freshwater and that includes water that is frozen in the glaciers. Freshwater is viewed as an unlimited resource; however, it is one that is being depleted. The lack of water is apparent as we are experiencing droughts. In fact, by 2025 two-thirds of the world's population will be facing water shortages. Given the severity of water scarcity, it is increasingly important to protect freshwater and preserve its quality. Freshwater, specifically in New Jersey, needs to be protected, from developers and pollutants, but also to maintain the aquatic habitat and sustain life in New Jersey. Not only can we drink that water and use it to water crops, streams are important as they provide natural protection from flooding.

Method/Approach: In order to get the water upgraded, Environment New Jersey has three main strategies: grassroots tactics, advocacy tactics, and visibility tactics. Grassroots tactics included contacting people who have supported Environment New Jersey in the past and inviting them to come to our events, voice their concerns to the New Jersey Department of Environmental Protection, and write letters to the governor. For advocacy tactics, Environment New Jersey hosted a Cooper River Press Conference in which mayors, councilmen, and Senator representatives were present. For media tactics, several news outlets were contacted to cover the Cooper River Press Conference. Letters to editors in local newspapers were also written and submitted. All of the tactics have been ways to increase visibility, gain public support, and demonstrate the ways in which we promote our cause.

Outcomes/Results: Our advocacy and media tactics have been successful. Mayor of Pennsauken Betsy McBride, a representative for Cory Booker, and local councilman from Camden all came out to the Cooper River Press Conference. As a result of the media grassroots tactics, the Press Conference was coveted and was published in [The Philadelphia Inquirer](#), [KYW Radio](#), [Courier Post](#), and [Blue Jersey](#).

Evaluation/Conclusion: The grassroots tactics implemented will be deemed successful in a few different ways, each varying in scale. For example, the media tactics were a success as some Letters to the Editors were published and the Press Release received media coverage. But overall, success will be measured if The Murphy Administration approves our recommendations to upgrade the river's status to Category One. If that happens, we can conclude that advocacy via media and politics can be useful and impactful.

Internship Abstract

Title: Facility Contracts and Liability Coverage
Name: Allison McKee
Preceptors: Cherylyn Murphy, Administrator; Toni Leonard, Volunteer coordinator
Agency: Holisticare Hospice

Purpose: To make sure all contracts and liability coverage that are associated with Holisticare are current.

Significance: This project is important because without current contracts, the nursing staff does not have access to patients within the facilities Holisticare is contracted with. There is no liability coverage at this time within Shorrock Gardens, so our nursing staff can not care for our patients at that facility.

Method/Approach: The data was sorted alphabetically from the contract binders that stores all of our personal contract information along with the liability coverage. This information is stored in a personal file within the office. All 60 contracts from A through Z were audited properly and updated frequently. The contract starts off with the valid date and time that the contract was authorized at. It specifically states all policies and regulations regarding that specific facility. It is about a 30 page contract and on page 22, you will find the administrators from Holisticare signiture as well as the administrator from the facility. Without these prominent signatures, the contract is not valid. All new contracts will be filed and any contracts that are expired or lack liability coverage will be contacted and confirmed to reassure that Holisticare Hospice of NJ has all advised contracts for future facility coverage.

Outcomes/Results: As a result of this project, there were 15 contracts that were found negligent and 45 that were completed. With those that were incomplete, I had to make sure that there were signed contracts and liability insurance coverage papers in both the contract book and the private file cabinet. This cabinet is only open for authorized users. If they were filed, I would have to make copies of the missing information to match both the book and the files. If they were unable to be found, I had to get in touch with the administrator to sign the missing file and have it expedited over to our office. After the files are faxed over it is filed and the contract is then completed. As a result, some of the contracts failed to complete all of the requirements. This includes; current liability insurance coverage for ALL facilities Holisticare Hospice of NJ partner with and current contracts signed by Cherlyn, Holisticare Administrator, and the facilities administrator.

Evaluation/Conclusion: There were some problems contacting administrators from different facilities for liability coverage and current contracts. Without an updated agreement, Holisticare can not proceed with their assigned duties. For those facilities that they did not have finished paperwork with, it was more or less of a hassle to receive the correct information needed for filing. To avoid this problem in the future, track progress by keeping up with the facilities paperwork weekly so that there is no room for any errors, considering hypotheticals, and asking for feedback would create a more organized environment to proceed with this project.

Internship Abstract

Title: Healthy Homes and Health Insurance

Name: Natasha Medina

Preceptors: Mariam Merced, Director of Community Health Promotions Program,
Ana Bonilla-Martinez, B.S., CHES, Program Coordinator

Agency: Robert Wood Johnson University Hospital, Community Health Promotions Program

Purpose: Analyze reported health data provided by participants of the Healthy Housing Collaborative

Significance: New Brunswick has a high immigrant population, with 53% identifying as Hispanic and 35.5% living in poverty. Low income families often have to compromise their health and living conditions to accommodate their budget. Understanding residents' insurance status, eating habits, and medical history, will provide the RWJUH Community Health Promotions Program with a better understanding of the daily decisions families have to make.

Method/Approach: The Healthy Housing Collaborative, a program supported by RWJUH, Saint Peter's University Hospital, New Brunswick Tomorrow, and the Middlesex County Office of Health Services, conducted home visits to assess the conditions of the home that affect health. Community Health Workers serve as peer educators and case managers. After the initial home visits, the Healthy Homes Initiative - BUILD Follow-up questionnaire was conducted to collect more data on the health and eating habits of the participants. This follow-up questionnaire has multiple questions relating to the conditions of the residential home and on the health of the residents. Fifty-eight questions covered topics such as mold presence, pests, general nutrition of the family, health insurance, and where do they go for health related concerns.

Outcomes/Results: All of the 107 clients identified as Hispanic/Latino. All speak Spanish at home while 53.% are bilingual (English and Spanish); although most bilingual individuals reported were children. Forty-six percent of the adults do not have a primary doctor or medical home, and 50.47% of these adults do not get health services as recommended. The other 54% reported using either Eric B. Chandler, or Saint Peter's Family Success Center. Seventy-one percent of adults do not have health insurance with many depending on charity care, while 92.9% of the population of Middlesex County has health insurance. Only 38% had vegetables four or more days of the week. Eleven percent of respondents eat red meat 4 or more days, 29% drink sugary drinks 4 or more days, and 25% eat fruit less than 4 days of the week.

Evaluation/Conclusion: With all of the clients identifying as Hispanic/Latino and only 57 people able to speak both English and Spanish, there is a language barrier for their care for those who can afford it. Having to accommodate their own nutrition for a budget makes having a primary doctor much more important. The lack of nutrition can create future health issues and since 46% of New Brunswick adults do not have a primary doctor this can create high healthcare costs. Preventative care, along with a well balanced diet can improve health outcomes, and understanding resident's budget limitations will enable healthcare providers to create appropriate programs to target this population.

Internship Abstract

Title: Reorganization and Completion of Client Files
Name: Maham Mohyuddin
Preceptors: Direct Supervisor: Adam Najib, Attorney and Project Supervisor: Mike Lee, Paralegal
Agency: Najib, Kim & Feliz

Purpose: To obtain missing documentation necessary for the completion of client files and to use the documentation obtained to compile a demand letter.

Significance: In personal injury cases, clients are looking for financial compensation for injuries endured due to the actions or negligence of someone else. The demand letter is prepared prior to the litigation process. It is a collection of all medical bills and treatment undergone by a client to illustrate sustained injuries in relation to the lawsuit. A demand letter marks the beginning of financial negotiations with the insurance company. Upon receiving a demand letter, the insurance company can either accept, deny, or make a counter-offer to the claim. In order to obtain a favorable settlement of the case without having to file a lawsuit, the demand letter must be very effective. According to David Goguen, J.D., a general rule is to demand 75-100% higher than the amount you would be satisfied with. Therefore, it is vital to organize the client's information neatly and send out the demand letter in a timely manner in order to facilitate settlement negotiations and give yourself the best chance of ending up with a fair settlement.

Method/Approach: In order to identify which current cases are ready for the preparation of their demand letter, calls were made to the client regarding the status of their treatment. Upon receiving updates from clients, those that completed their medical treatment were labeled as cases that were ready. Now began the process of collecting medical records and bills necessary. Within the office's web-based outliner, WorkFlowy, a section regarding updates on each client's medical records and bills were added beneath each client. The contact numbers of each medical provider and their preferred method of receiving records and bills requests were included. As providers were contacted to find out the status of records and bills, any and all updates were added to the new section in WorkFlowy. Once these documents were sent over, medical records were assessed and bills were calculated then summarized within the demand letter under the following categories 1) Liability 2) Injuries 3) Diagnostics 4) Surgical Procedures 5) Dates of Treatment 6) Bills/Total Charges.

Outcomes/Results: Currently, 8 client demand letters have been completed and sent out for settlement negotiations, some of which have moved onto the litigation process. There are 3 clients whose demand letters are still incomplete and being worked on. By creating a separate WorkFlowy section for records and bills, the document request process has been much more efficient. Recording all updates on each record and bills request allows the firm to easily locate the documents that are still missing.

Evaluation/Conclusion: The new system for all new cases within the office is to make note of the client's medical providers as they still continue going to treatment. Through the new WorkFlowy section that was created there is now a place to record which doctors clients are going to and the providers' contact information prior to the need to request the client's medical records or bills. As a result, completing this information and recording it before the need for the demand letter arises allows the firm to provide documents and information on our client's behalf in a timely manner. An evaluation of the success of the new process showed a 25% increase in efficiency in the amount of time it took for demand letters to be completed.

Internship Abstract

Title: Maternal-Child Nutrition and Obesity Research

Name: Mary Faith Monaco

Preceptors: Dr. Gloria Bachmann - Professor of Obstetrics and Gynecology and Medicine and Associate Dean for the Women's Health Institute

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

Purpose: To evaluate, existing literature, pertaining to maternal-child relationship with nutrition and obesity.

Significance: Childhood obesity is a threat to global health and epidemic in developed and developing nations. Lifelong chronic illness is a large concern as a result of childhood overweight/obesity. Over the past 20 years in developed and developing nations, prevalence rates of childhood overweight/obesity have dramatically increased. In order to create prevention programs for childhood obesity, there is a need for further research with a special emphasis on prospective modifiable risk factors such as nutrition practices of mothers and their children.

Method/Approach: A study collected data from children ages 9 to 12 years and their mothers from Washington, DC, and Santiago, Chile. The 246 children (U.S. =125, Chile =121) and 217 mothers (U.S. =116, Chile =101) that were included in the study were required to complete the consent forms and measurements before participating. The questionnaire for both mother and child included 50 items in a five-choice Likert scale format. Higher scores for the mothers and children indicate healthier nutrition practices. Measurements including BMI were calculated for all children in the study as well. Another study compared the quality of mother-child relationship at various ages (15 months to 36 months) with BMI when children were 15 years of age.

Outcomes/Results: U.S. mothers had fewer healthy nutrition practices compared to Chilean mothers. 57.3% of children in the U.S. sample had a BMI above or on the 85th percentile compared to 37.5% of children in Chile. 35.2% of U.S. children and 10.8% of Chilean children were found to be obese. More Chilean mothers (n=26) obtained a college degree than U.S. mothers (n=39). It was found that mothers who had graduated college had children with a lower BMI. Another study showed that obesity was prevalent in 26.1% of the children who experienced poor maternal-early child relationships and 15.5% for children with better relationships. It was also found that adolescent obesity was related to maternal education and lower household income.

Evaluation/Conclusion: The studies evaluated indicate mothers significantly impact their children in regards to nutrition and quality of the relationship. Future research in childhood obesity should focus on mother and child nutritional habits as a unit instead of individually. Pairing the maternal and child nutrition practices is expected to have a more profound impact that will help decrease chronic illness which is a consequence of childhood overweight/obesity. The data from this study will be included in an obesity booklet as an ongoing project at the Women's Health Institute at RWJ.

Internship Abstract

Title: Program Development Intern
Name: Andrea E. Namkung
Preceptor: Direct Supervisor: Galina Kourteva, Gallery President
Agency: Alfa Art Gallery, 108 Church St. New Brunswick, NJ 08901

Purpose: To create a new program to introduce students to the fine art world by collaborating with artists.

Significance: Alfa Art Gallery is a space and platform for those in the fine art world to showcase their art. By providing this space for local artists as well as those in other states and overseas, Alfa makes fine art more accessible. On top of providing the physical space to hang up art, the gallery also takes videos of the exhibits that we have so that those who cannot make it to our opening receptions, can view it on YouTube. And due to the highly regarded reputation of the art gallery, we are able to implement a student program to better incorporate audiences of a wide range, whether they are new to the art world or a veteran.

Method/Approach: To focus on the relationship of Alfa and college students, the fall 2019 interns opted to create a mentorship opportunity titled “Mentorship Hour”. By reaching out to Rutgers University, Middlesex County Community College, and Montclair University students, we aimed to pair a student with one of our artists in the fall exhibition and also invite them to our opening reception on November 1st, 2019. By putting up flyers, personally contacting student circles, and inviting peers who would be interested, we scheduled an interview between the artists and students. There was a set of guiding questions and approved questions that the students were able to ask the artists.

Outcomes/Results: The mentorship program was successful in pairing two interested students with two of our featured artists. A recent graduate from Rutgers University was paired with Lauren Curtis. A current senior at Montclair University was paired with Nick Savides. Both interviews and interactions were recorded and once edited, will be put up on the art gallery’s YouTube channel and website. Both the students who participated and interested students have offered to send out future invitations for this same program so that it can make it past its pilot year.

Evaluation/Conclusion: Art galleries normally have a reputation for not being accessible for an audience of all ages and backgrounds. The pilot year of “Mentorship Hour” prompted templates for more versions of it that would include not only college students but local high schools and middle schools. Thanks to our two student participants this year and the videos, the art gallery now has more promotional material to supplement future years of this program. The recorded interviews will also be put up on Lauren Curtis’ and Nick Savides’ personal websites to further promote this opportunity.

Internship Abstract

Title: The Vaccine against the Human Papillomavirus

Name: Aydee Ospina

Preceptors: Direct Supervisor: Margaret Drozd, MSN, RN, APRN-BC, Director CHS,
Robert LaForgia, CHIP Coordinator

Agency: Saint Peter's Community Health Services

Purpose: To measure Human Papillomavirus (HPV) vaccination knowledge among Latino parents by administering a pre-test, providing education and administering a post-test.

Significance: HPV is the most common sexually transmitted infection, some strains may be harmless while others lead to genital warts and cancers. HPV vaccine assists in reducing the odds of contracting the infection. The CDC recommends that children get the vaccine between the ages of 11 and 12 (CDC 2019). According to the Journal of Immigrant and Minority Health (2016), vaccination rates remain low in the growing Latino children population while there continues to be large HPV-associated cancer disparities in the general Latino population. In addition, Latinas have the highest rate of cervical cancer in the U.S, approximately 66% higher than non-Hispanic whites. Latino immigrants suffer from numerous barriers to healthcare access including: health literacy, language, cultural discordance, legal and economic issues which have the potential to negatively impact their children's access to preventative care. Saint Peter's University Hospital provides services to a large Latino population. Healthcare providers at Saint Peter's want parents to provide their children with the HPV vaccine in order to address the disparities.

Method/Approach: In order to potentially increase vaccination rates amongst the Latino population it was decided to educate parents about the HPV vaccine. A bilingual presentation was created with information about the HPV vaccine including: when it should be given, what it prevents, and how the infection can be transmitted when children don't receive the vaccine. Pre-tests and post-tests in Spanish and English were administered to see what people knew about the HPV vaccine and then assessed for increased knowledge after the educational presentation. The test included three multiple choice questions that were the same for the pre and post-test. The tests were administered to 19 people, predominantly Spanish-speaking, at a community event. The questions included: what is HPV, to who and when should the HPV vaccine be given.

Outcomes/Results: Out of the 19 participants, 53% did not pass the pre-test with 42% answering at least one question incorrectly, and 11% answering two questions incorrectly. After education, the post-test was administered to the 19 participants. Results from the post-tests captured that all participants were able to answer all three questions correctly. Due to the disparities among the Latino population the bilingual HPV educational poster will continue to be utilized by Community Health Services.

Evaluation/Conclusion: The pre-test results demonstrated a lack of knowledge about HPV. The post-test results demonstrated that increased knowledge about the HPV vaccine had occurred due to the education provided to the participants. This demonstrates that by educating parents about HPV in the community, in their native language, it could potentially lead to an increase in HPV vaccination rates in children. The bilingual tool for teaching about HPV will continue to be utilized in Community Health Services at Saint Peter's University Hospital allowing for the Latino community to continue to be educated and given resources.

Internship Abstract

Title: Breast Cancer & Radiation Treatment Research 2018

Name: Jevante Parris

Preceptors: Direct supervisor: Linda Veldkemp, Chief Physicist/ Administrative Director
Project Supervisor: Clarissa Henson MD, Doctor in Radiation Oncology

Agency: Trinitas Comprehensive Cancer Center

Purpose: To evaluate the impact of the new ASTRO guidelines on the use of hypofractionation and conventionally fractionated radiation therapy in urban and underserved populations.

Significance: In March of 2018, the American Society for Radiation and Oncology (ASTRO) issued clinical guidelines for use of hypofractionated whole breast irradiation therapy in breast conservation treatment. Compared to conventionally fractionated radiation therapy, hypofractionated radiation therapy delivers a higher daily dose of radiation therapy over a reduced number of weeks typically 3 to 4 therapy weeks versus 5 to 6 weeks with conventional radiation. At Trinitas Comprehensive Cancer Center (TCCC) in Elizabeth, NJ, both conventional fractionated radiation therapy and hypofractionated radiation are performed. It was hypothesized that as a result of the new guidelines, increase use of hypofractionation would be observed in 2018.

Method/Approach: A retrospective review was performed on all women receiving breast conservation therapy at TCCC for curative intent with radiation start dates between January 2017 through December 2018. Whole breast radiation fractionation schedules included 1. Standard fractionation 1.8- 2.0 Gy daily to whole breast, with or without a boost and 2. Hypofractionated radiation therapy 2.5-2.66 Gy daily whole breast with or without a boost. Whole breast conventional and hypofractionated radiation therapy were delivered with 3D- conformal therapy with Varian Eclipse treatment planning system. Fractionation schedules were reviewed in six-month intervals from January 2017- June 2017, July 2017- December 2017, January 2018- June 2018 and July 2018 - December 2018. Standard fractionation, hypofractionation and APBI were compared during each 6-month interval.

Outcomes/Results: From January 2017 and December 31, 2018, 74 women received radiation therapy for breast conservation therapy with one woman receiving bilateral breast radiation therapy. Also, from January through December 2017, 42 whole breast radiation treatments were delivered of which 37 were conventional fractionation and 5 hypofractionation. In the year 2018, 33 whole breast radiation treatments were delivered, 26 via conventional fractionation and 7 via hypofractionation. Hypofractionation use overall was 12% in 2017 and 21% in 2018. In the last 6 months of 2018, hypofractionation was utilized 33%.

Evaluation/Conclusion: The ASTRO whole breast radiation guidelines were published in May of 2018. While being observed there was an increased use of hypofractionation from 12% in 2017 to 21% in 2018, conventional fractionation remained the predominant treatment modality for whole breast radiation therapy at the institution. Reasons for not using hypofractionation may be secondary to patient's stage and need for axillary nodal irradiation, large breast size and skin separation and physician preference. In addition, accelerated partial breast irradiation (APBI) is offered at the institution and use of this altered fractionation therapy may have impacted the number of women receiving hypofractionated therapy. In the last 6 months of 2018, the use of hypofractionated radiation therapy has yet to be reported but will continue to monitor the use of hypofractionated radiation therapy at the institution in 2019 as there is an expectation to see further increases in utilization of hypofractionation schedules in the future.

Internship Abstract

Title: Client Satisfaction Survey Report

Name: Neel Patel

Preceptors: Earl Lipphardt, Administrator

Agency: Journey To Wellness

Purpose: To gain a deeper understanding of how Journey to Wellness's clients are doing post-treatment and implement changes based on the feedback.

Significance: The loss of a patient due to dissatisfaction can result in a loss of \$200,000 in revenue over the lifetime of a practice. 53% of patients say they value great customer service from healthcare providers. Evidently, providing the best quality of care is essential in the healthcare industry. At Journey to Wellness patient satisfaction is the highest priority. In order to know what the clients want and have an edge over the competitors, it is important to listen to the clients' feedback. One way of doing this would be to have patient satisfaction surveys. Surveys give clients a way to voice their opinions and tell us how their experience can be enhanced or they can let us know what we did well.

Method/Approach: Journey to Wellness uses an EHR system called ZooBook. ZooBook has a follow-up survey already built into each client's profiles, but the surveys were never administered to clients. For all of the clients that were discharged in the 6 month period from March 2019 to August 2019, phone surveys will be conducted. After the surveys are complete, the results will be logged in the client's profile and all of the data will be compiled into a report. All of the data will be put into a spreadsheet to find trends and correlations that can help improve the client experience at Journey to Wellness.

Outcomes/Results: Out of the 218 clients discharged from Journey to Wellness from March 2019 up to September 2019, only 36 clients responded to the phone surveys. Out of the 36 clients that responded, 63% completed the treatment program while the rest were discharged without completing their treatment plan. Out of all the discharged clients that had a discharge reason listed (n=202), 129 clients (64%) did not complete their treatment plan. Of those 129 clients, 42 (32.5%) had numbers that were no longer in service. Journey to Wellness provides a variety of outpatient levels of care. Outpatient 1, Outpatient 2, Intensive Outpatient, and Partial Care (in increasing levels of care). Only Outpatient 1 had more clients complete their treatment plan than not complete it. Clients were asked to describe their family situation, living situation, and physical health since discharge by saying if it is better, same, or worse since discharge. 50% (n=36) said their family situation is better since discharge, while 50% said living situation was better and 55.5% said their physical health was better since discharge.

Evaluation/Conclusion: The sample size was definitely a limitation. There was about a 16% response rate. For future purposes, discharge surveys should be given to clients as a part of the discharge process before they leave the facility. Clients were more likely to respond to the survey, if they completed their treatment at Journey to Wellness. Based on the number of people that did not complete their treatment plan and had numbers that were out of service, it can be assumed that they lost phone coverage due to inability to pay, were arrested, rendered homeless, etc. Clearly, the number of clients that are completing their treatment is alarming, especially at Outpatient 2 and above. In the short term, the discharge criteria needs to be reevaluated so that less clients are leaving without completing treatment plan. In the long term, treatment plans need to be revised so that clients stay and complete their treatment.

Internship Abstract

Title: Global Service Request Portal
Name: Tulsi Patel
Preceptors: Anwar Syed, ESC Production Control Team Lead
Agency: Colgate-Palmolive, Piscataway NJ

Purpose: To create a central tool (portal) for incoming global service requests and analyze requests that ESC troubleshoots.

Significance: According to research, in any technological organization some of the most common issues that occur are integration, security risks, back ups and lack of strategic planning. All of these issues are reported to one main department before being escalated to the appropriate people for troubleshooting. In this process, facilities from all over the world are communicating, primarily through email, for assistance on technological issues. This can cause an overflow of emails that creates clutter and delay in fast troubleshooting. The Enterprise Service Center at Colgate receives approximately 250 emails a day. Of the 250 emails, approximately 20-25 emails are common issues such as OSS requests, Printer requests and RFC connections. The significance behind this project is that it will dramatically reduce the number of emails from global users and increase team efficiency.

Method/Approach: Manual evaluation of emails was conducted using filters in Google Mail to determine the common emails received. Of the 250 monthly emails, the most common issues reported globally that can also be automated were Printer Requests, OSS Connections and RFC connections. To simplify this process, a central portal was created for users to report these issues on a Google form using LumApps. On the back end, user responses are recorded onto a Google Sheet. Then, Google App Script is used to organize the sheet and send out automated emails to users upon the status of their request. In addition, Google App Script is used to create a dashboard as a monitoring tool to eliminate emails sent to the inbox.

Outcomes/Results: Success of portal will be determined based on the email metrics. If the email count is lower than 250 emails a day, then the portal is beneficial for team productivity. In the month of September there was a total of 24,573 emails sent to the inbox. Of the total number of emails, there were approximately 254 emails a day that were actual technical issues, including approximately 22 (8%) OSS, RFC and Printer Requests total. In November, there was a total of 24,565 total emails sent. Approximately, 241 emails were technical issues and 16 (6.6%) of those emails were either OSS, RFC or Printer Requests.

Evaluation/Conclusion: Since the creation of the portal, there has been a 0.05% decrease in emails for technical issues sent per month. There has been a total of 1.4% decrease in emails for OSS, RFC and Printer Requests. Though this change is minor, a major factor that is not considered in these results is time. As with implementation of any process, there is a transition period that needs to be taken into account. Many users were unaware of the service portal initially and still emailed the inbox for their requests. In the months to come, users will be more informed of the new process, further decreasing the total number of emails sent per month. In addition, team members must also be responsible for informing the users of the new portal instead of taking their requests via email. Overall, in order to fully measure and ensure the success of the service portal, metrics must be calculated over a longer period of time.

Internship Abstract

Title: Database on School Enrollment and Spending Data

Name: Jessica Resnick

Preceptors: Direct Supervisor: Amanda Melillo, Research Associate
Project Supervisor: Mark Magyar, Associate Director of Policy Development

Agency: New Jersey Senate Majority Office

Purpose: To create a database on all public and charter schools, grades pre-k through 12 in New Jersey and spending data for the purpose of a study to conduct school district regionalization.

Significance: Education spending in New Jersey encompassed \$28.5 billion of the total \$65 billion that New Jersey collected in State taxes and local property taxes last year. School property taxes totaled \$14.85 billion in FY 2018 and made up 52.4 percent of the total property tax bill. The New Jersey Economic and Fiscal Policy Workgroup recommends merging all K-4, K-5, K-6, K-8, and K-9 school districts into K-12 regional districts to improve the quality of education and promote efficiency. This recommendation will hopefully reduce administrative costs of education without hurting the services provided to students. The purpose of creating the database is to determine which school districts would be successful in a study of school district regionalization.

Method/Approach: In order to determine what schools can be regionalized data is needed to examine costs, diversity, enrollment, and health benefit plans. To obtain this data a few things can be done. The first step is to contact the Office of Legislative Services within the statehouse and inquire if they have the data or can obtain it for us. The next step, if the first one does not work out is to contact the municipality or school district directly to see if the data is available to send to us. If the data is not available from completing these steps, an OPRA (Open Public Request Act) request would need to be filed, which was the last resort as it could take a while for the request to be completed. After the data was obtained, the next step was to pick out the most important pieces of data and compile spreadsheets on those. The next step was to create the spreadsheets listing all the municipalities, counties, and school districts and then inserting correct columns from the obtained data in order to ensure that the needed data is centralized and easier to review.

Outcomes/Results: The data compiled showed a need for school district regionalization. The Department of Community Affairs as well as the Department of Education did not have any database related to price per student and diversity. The outcome of this database showed the importance of creating a database, as it does not exist, and is needed for this study.

Evaluation/Conclusion: Similar to many policy projects, regionalizing school districts is not something that the outcome of this project right away. The database has proven to be a useful tool for the office, researchers, and policymakers to visualize the status of public education in the State. Previously, the data needed was not in a centralized location, now that it is, it makes the policy process easier. Data tools like this, should be used more regularly across the state to ensure a clearer and more efficient policy process.

Internship Abstract

Title: Implications of Commercial Waste Zones In New York City
Name: Jonathan Rivera
Preceptors: Direct Supervisor: Edward Amador, MPP | Agency Supervisor: Twila Evanson LCSW
Agency: Office of New York City Councilmember Robert E Cornegy Jr.

Purpose: To evaluate the potential impact of restructuring the commercial waste industry in the city of New York and analyze the implications of the policy directive.

Significance: The New York Department of Sanitation (DSNY) introduced a proposal to overhaul the current state of the commercial waste zone industry which would require approval by the City Council of New York. Currently they operate in a minimally regulated industry which has been categorized as ineffective and unsafe. Waste Carters routes can often overlap with as many as 54 different companies servicing the same block within the same day. The Commercial Waste Zone proposal would attempt to mitigate these inefficient routes to reduce overall traffic as well as curb greenhouse gas emissions of the CWZ plan.

Method/Approach: In September 2019, a 500-page report from the NY Department of Sanitation categorized and listed the logistical and environmental factors that served as the data for this study. The quantitative data that was sourced from the impact study was categorized an Excel spreadsheet regarding, Economics, Environmental and Social qualifiers. Economic factors were based on operational & development costs and increased prices were contrasted against potential benefits such as transparent consumer pricing and industry reform. Environmental costs such as waste not effectively being removed due to decreased transportation vehicles were weighed against decrease of greenhouse gas emissions and pollutants and improvement of overall air quality. Social factors such as unemployment and effective monopolies were weighed against traffic reduction and increased public health and safety.

Outcomes/Results: Environmental benefits outweighed the low number of potential costs. The total amount of Vehicle Miles Traveled by carters would drop by 50%. The benefits from this include less congested roads, improved air quality and a significant reduction of emissions. Data suggested an increase in organic and recycling collection Economic costs were mixed to NYC as it did not require additional budgeting for implementation however the program would force businesses out of competition reducing both small business and tax revenue. Transparency in consumer pricing did not outweigh the overall increase of prices that the program would bring. Social costs will lead to unemployment of up to 6% for field workers and reduce the number of carter companies in the industry from 95 to 68 Benefits include safety policies accident reduction and improving public health

Evaluation/Conclusion: The Commercial Waste Zone program was voted upon and passed by the City Council of New York on October 30th 2019. The environmental implications of this program are inherently a net benefit according to the policy impact study published by the New York Department of Sanitation. However, the costs to socioeconomics and employments are too severe to overlook in place of progressive policy. A decrease of six percent of field workers equates to a reduction of approximately 160 employees. A cost-benefit analysis by New York City officials should be conducted prior to implementation to account for the negative externalities associated with unemployment of undereducated laborers as well as legalized monopolies.

Internship Abstract

Title: Multi Beneficial Adaptive Sports and Recreation
Name: Angela Seas
Preceptors: Javier Robles, JD, Director
Agency: The Center for Disability Sports, Health, and Wellness

Purpose: To research how adaptive sports impact communities and those who participate, and plan an open event where these activities, as well as informational workshops, are offered.

Significance: Across the country, people with disabilities look for ways to maintain their health. Regardless of ability, adaptive sports and recreation are a great outlet for people to get moving, and to lower their risk of other physical or mental health issues. Additionally, those with disabilities are seen to experience significant health disparities due to a prone sedentary lifestyle (Braza, D.W., Iverson, M., et. al, 2018). Being able to participate with others with conditions similar to yourself can greatly affect one's quality of life. For those that do see the importance of inclusive sports, nationally recognized chapters from The Disabled Sports USA provide services that all individuals with a wide range of disabilities to join a team that plays a sport best suited for them, (Disabled Sports USA, 2015).

Method/Approach: A thorough review of five scholarly articles as well as three non-profit organizations information containing both qualitative and quantitative data pertaining to adaptive sport, participants with a disability, and research of current locations who cater to those with disabilities was completed through the Rutgers University Library database. Peer-reviewed writings, as well as the noting of one in-person interview from a member of the benefitting community, were collected. Facts regarding the blind community as well as the impaired mobility community were listed. Once compiled, qualitative data regarding the two focus communities was utilized in the decision making regarding the coordination of the event. Additionally, documented registration distinguishing between participant and community volunteer were collected in an electronic and in-person sign-up.

Outcomes/Results: The compiled information regarding adaptive sport, participant wellness, and community benefits resulted in the support of pushing for greater availability to adaptive sports. Collected readings indicate that adaptive sports of any kind can provide protection from depression, suicidal ideation, substance abuse, and secondary health problems. Gathered information concerning adaptive sports was taken into account for the design of the adaptive sports event. Implementations from gathered research and interviews impacted the floor layout, locations of activities, vendor products, anticipated number of volunteers, and workshop information presented to participants. Additionally, it was noted that events that are adaptive and open to the public allow for community integration and socialization between all members of the community.

Evaluation/Conclusion: A post-event process evaluation was fulfilled by the Director of the Center for Disability Sports, Health, and Wellness and board members to evaluate the event process and its overall success. Evaluations indicated that the two focused groups of those with either visual or mobility impairment were met in regards to accessibility, mobility, and functionality of the event. The gathering of information regarding the specific adaptive sports hosted showed to be beneficial in the planning and executing of an adaptive sports event. The collection of two personal interviews also was supported, as the information gathered regarding their experiences was implemented for the event so other's alike could benefit. Key necessities for events such as the one hosted included accessible parking, clear and accessible walkways, ample room between activities, and guides to help those who are visually impaired.

Internship Abstract

Title: Domestic Violence Awareness and Outreach in Vulnerable Populations
Name: Varsha Shrinet
Preceptors: Navneet Bhalla, Executive Director, and Anam Naqvi, Outreach Coordinator
Agency: Manavi

Purpose: To increase awareness of the services that Manavi has to provide to survivors of gender-based violence in New Jersey while maintaining operational aspects of the organization, such as grant work.

Significance: Manavi is a culturally specific domestic violence agency. The organization provides services, such as advocacy, the 24/7 hotline number, aid in multiple South Asian languages and dialects, connecting them to legal and immigration aid, and providing transitional housing, to anyone in need. There are some disparities in those that utilize these services. Not many college-aged survivors ask for aid even though the organization is located in a college city and some people in different areas of New Jersey and the Tristate area are not aware of Manavi could benefit from being aware. By targeting and informing these groups, Manavi can aid a much broader scope of people to connect with the help they might need.

Method/Approach: The methods for increasing awareness is through outreach work and programs related to Manavi. Outreach approach includes advocating in areas with prominent South Asian populations, creating workshops and groups that target college-aged students. We also increased our use of social media and online platforms to increase involvement. I also worked alongside the operational aspects of Manavi and making sure that it gets all the exposure needed. Expanding on the last point, Manavi is also broadening the scope of the grants to which the organization applies to. This allows the organization to target other groups and have the proper means to efficiently and effectively do so.

Outcomes/Results: Manavi has instilled a number of changes that will, in the long run, increase awareness. We visited six college campuses and held workshops and student groups that has led to a better awareness of the organization. We met with store vendors and patrons in Jersey City and Iselin (both areas have prominent South Asian populations) to make sure that Manavi is recognized as an organization that people can reach out to when in need. The social media accounts were posting actively and there is a recurring email newsletter to let individuals know of upcoming events and what we have done that month. During the internship, a new grant cycle began and as the previous grants came to a close, we landed a new grant for Manavi that targets a new group that Manavi has not worked with, which will lead to a broader pool of involvement.

Evaluation/Conclusion: Outreach and awareness is difficult to measure in quantifiable and tangible terms. We worked on multiple outreach campaigns and we saw an immediate increase in acknowledgement of Manavi on those campuses that we can hope leads to higher involvement. On social platforms, there was an increase of social engagement. Working with different grants, Manavi has been able to work in different communities in the New Jersey and the Tristate area. Additionally, Manavi is doing more outreach and engaging men as allies, which, historically, has not been done at the organization before. There has also been a number of support groups and educational groups for younger populations, including Rutgers University which has led to the better name recognition of Manavi in the community.

Internship Abstract

Title: Healthy Spaces; Promoting Healthy and Resilient Communities

Name: Sarah Souaid

Preceptors: Aldina Hovde, MSW, Program Director of Healthy Spaces Program
Brittany Johnson MPH, Senior Program Managers

Agency: NJ Chapter, American Academy of Pediatrics

Purpose: To increase awareness and implement the Healthy Spaces Program in Communities with high rates of Adverse Childhood Experiences (ACE).

Significance: The CDC and Kaiser Permanente conducted a longitudinal study in which it found out that there is a correlation between the number of ACEs experienced and the greater the change of poor outcomes in later life such as heart disease, obesity, depression, substance abuse/smoking. In addition, it was found that ACEs are highly interrelated- most people who experienced one type of ACE, also experienced others. Another study conducted by The Burke Foundation in 2016 showed that in New Jersey, approximately 782,000 children under the age of 18 have experienced one or more ACEs and more than 18% of children have experienced multiple ACEs. Through research, it was found that Camden, Cumberland, and Cape May rated the lowest in Child and Family Economics, Child Health, Safety and Wellbeing, and Education. As a result, these counties have the highest rates of ACE scores as there are higher rates of economic disparities.

Method/Approach: The Healthy Spaces program involves a three-pronged approach that is trauma informed and includes resilience-building practices, all based on ACEs science- 1) Pediatric Learning Collaborative, 2) School Resiliency Teams and 3) Community Collaborative. The key prong is the Community Collaborative which brings community members together to see how each community differs in needs and how to address it. It is important to not be prescriptive when going into a community but to tailor the program around the needs of the community. For Cumberland County, the initial meeting for this prong took place on November 21, 2019, combining prosecutors, detectives, superintendent, principal and members of other non-profits to discuss ACE prevention and resilience. In preparation for the community collaborative, a two-pager was created to address the specific needs and vulnerabilities of Cumberland County to be handed out at the meeting.

Outcomes/Results: A total of 27 Cumberland Community Leaders attended the Community Collaborative meeting people were in attendance at the Community collaborative program. A survey was conducted post-conference to specify the effectiveness of the meeting. The survey asked two questions- "Do you feel that this Healthy Spaces Community Collaborative meeting was valuable?" and "Did the Community Collaborative meeting help you to better understand ACES?" All seven respondents answered yes. In addition, all seven respondents recommended community leaders to partake in the community collaborative.

Evaluation/Conclusion: After the initial 6 months of the collaborative, NJAAP will identify 1-2 champions to lead each Community Collaborative to ensure the continuance of the program while giving the responsibility back to the community. To maintain support, leaders will be connected to one another via Zoom video conference to share ideas and updates, strategize solutions to challenges encountered, and highlight success in addressing ACEs and fostering resilience.

Internship Abstract

Title: Patient Satisfaction Survey Opportunities for Improvement

Name: Nicole Sweeney

Preceptors: Lenka Fata - Benefits Manager

Agency: UNITE HERE HEALTH (UHH)

Purpose: To analyze patient satisfaction surveys in the UHH - Health Center for areas of improvement.

Significance: Patient satisfaction surveys are an important indicator for measuring the quality of health care. Patient satisfaction affects clinical outcomes, patient retention, and medical malpractice claims. It affects the timely, efficient, and patient-centered delivery of quality health care. According to the Institute of Healthcare Improvement “, 95 percent of patients are willing to recommend ways for the healthcare organization to improve.” The UHH was built for the participants of Local 54, these surveys are a crucial tool that allows the administration to maintain open communication with the participants to see what is working well and where improvements can be made.

Method/Approach: Examine patient satisfaction survey data from September 2018 through October 2019; allowing for 14 months of data to be analyzed. The data from the surveys were entered into a spreadsheet tallying the satisfaction of the patient’s entire experience. Wait times were evaluated for booking an appointment, sitting in the waiting room, and waiting for the physician to see them. Additionally, patients were asked what they liked best and what suggestions they have for improvement.

Outcomes/Results: Both qualitative and quantitative results were tallied and analyzed from the patient satisfaction surveys in order to offer an effective plan of improvement. Of the sample (n=462), 79% were satisfied with the wait time. This includes time to get an appointment, time in the waiting room, and time in the exam room. 82% were satisfied with the office convenience such as the location, hours of operation, and cleanliness. 98% were satisfied with the office staff. 88% were satisfied with their physician. This accounts for the amount of time the physician spent with the patient, answering questions in a way the patient understands, explaining why tests are being ordered, and prescriptions are being prescribed. Two open-ended questions were also on the survey, they include “what do you like best about the health center?” and “do you have any suggestions for improvement?” The most common answers to the first question include no cost to the patient, great staff, and everything is located in one place. The most common answers to the second question include long wait time, more services (such as dental and podiatry), and longer hours on the weekend. As well as presentations at the worksites to update members on all of the available services at the health center.

Evaluation/Conclusion: UHH is thriving at providing quality health care that is saving money while keeping patients satisfied. The staff and the physicians are what the members enjoy most about the facility. Suggestions for improvement can include expediting the eligibility pass system. This is where the wait time is too long. An additional staff member should be designated to the eligibility station during peak hours. Another option would be to create an app that members can download to their phones that keeps up to date eligibility information in real-time. Another opportunity for improvement would be to send out electronic patient satisfaction surveys instead of the paper surveys that are currently used. Lastly, monthly worksite visits can be helpful to keep the members up to date of the available services and utilizing electronic communications such as FaceBook and text blasts when new services become available. Continued tracking of patient satisfaction surveys will be needed to conclude the effectiveness of the proposed suggestions.

Internship Abstract

Title: Mental Health Social Programs for New Jersey Veterans
Name: Tatenda Samakande, Intern
Preceptors: Meredith Blount, Executive Director, National Alliance on Mental Illness
Agency: National Alliance on Mental Illness (NAMI), New Jersey

Purpose: To analyze, develop and make partnerships with mental health programs for veterans throughout New Jersey and monitor their effectiveness after veteran deployment.

Significance: The United States has continuously been in combat with many countries for more than a decade and thus far veterans have been at the forefront of these wars and caused them to suffer from various mental illnesses. According to the United States of Veterans Affairs, statistics revealed that as a result of mental illnesses, suicide rates for those who have served are on the rise. Among veterans, suicide rates are 1.5 times greater than the average American citizen. They also account for 14% of suicides even though veterans only make up 8% of the countries population (2017). One of the challenges that research data has publicized is the unwillingness of veterans to participate in fear of being viewed as helpless. That is why it is important to utilize outreach programs that are appealing to veterans in order to lower the rates of suicide.

Method/Approach: Suicide prevention methods such as outreach programs are one of the common ways to spread awareness of mental illness in this particular group. At NAMI NJ the focus is on community partnerships throughout the state of New Jersey to address new ways to treat mental illness not only for the veterans but also their family members. Organizations such as NAMI NJ and other mental health programs seek to extend ways to present outreach programs by proposing to partner the different mental health organizations together. Mental health programs connected through community partnerships allow veterans with similar experiences the opportunity to be part of a team with other veterans who are seeking help.

Outcomes/Results: Research done on mental health programs indicate their effectiveness in combatting mental illnesses like PTSD, depression and anxiety which could lead to suicide if untreated. Physical activities incorporated into the programs include fishing, skiing, hiking, etc. Using these wide range of activities and techniques improves the physical, emotional and cognitive well being of the veteran by providing a new skill for them to learn. The ability to heal from their wounds comes from interacting with people who they can relate to.

Evaluation/Conclusion: The compiled research conducted through mental health programs demonstrates that they are significantly beneficial in aiding veterans and families. However, access to these programs has been limited due to the immense pressure on the VA and its lack of resources. The Military Veterans and Family Advisory Council at NAMI is conducting a meeting that analyzes the need for more of the partnerships to programs in New Jersey. VA representatives from all across New Jersey look forward to exchanging ideas and implement local partnerships into their programs to ensure that veterans do not have to travel far distances in order to participate in these services.

Internship Abstract

Title: E-cigarette Products and Vaping Health Risks Knowledge Assessment

Name: Anuujin Ulziiitugs

Preceptors: Direct Supervisor: Cheryl Policastro, BSN, RN-BC
Project Supervisor: Margaret Drozd, MSN, RN, APRN-BC

Agency: Saint Peter's University Hospital Community Health Services

Purpose: To assess the public's awareness about vaping products and their health risks.

Significance: E-cigarettes have become the most commonly used tobacco product among children and adolescents in the United States since 2014. According to the 2019 National Youth Tobacco Survey, over five million middle and high schoolers use vaping products. The newness of vaping products restricts the amount of information available about its long-term health effects, however, incidence rates of e-cigarette, or vaping, product use associated lung injury (EVALI) have emerged in 2019 which indicate the severity of health effects. As of November 20, 2019, there have been 2,290 cases of lung injury and forty-seven deaths across the United States with 77 percent of the patients being under the age of thirty-five (CDC). This project aims to measure the public's knowledge and awareness about the health risks associated to vaping.

Method/Approach: A pre and post-test was designed to evaluate the public's knowledge about the fundamentals of e-cigarettes and vaping such as what the devices are, what chemicals are known to be in them, and what health effects have been correlated to vaping according to the Centers for Disease Control and Prevention. Both knowledge assessments were composed of the same seven true-or-false statements or questions. The tests were distributed at the Great American Smoke Out event on November 21, 2019 to attendees before the educational slideshow presentation. Then, the tests were collected and the data was exported to a spreadsheet and organized based on responses to evaluate the results.

Outcomes/Results: Eight tests were rejected from the sample size because they did not have a matching pre-test or post-test to evaluate differences. A t-test was used on the remaining 34 paired test to determine the difference. The average number of questions answered correctly prior to the presentation is 6.18 out of 7, and the average number of questions answered correctly after the presentation is 6.74 out of 7. When finding the mean of the difference between each participant the total number of correct answers increased by 11.12 percent and the range in differences from the tests were between -14 percent and 40 percent. The variance of correct answers decreased post-presentation from 82 percent to 26 percent. The question that was missed most often was Question #3 which asked true or false to the statement, "E-cigarettes are approved by the FDA as a tool to quit smoking traditional cigarettes". Thirty-five percent of the sample size answered incorrectly to this question.

Evaluation/Conclusion: The high variance among answers prior to the presentation indicates that the audience had varied perceptions about vaping and its health effects. The decrease in variance after the educational presentation suggests that the audience were more in agreement about the facts about e-cigarettes and vaping. The increase in correct answers post-test compared to the pre-test demonstrates the increase in the public's knowledge and awareness through health education and promotion. However, there were limitations within the results due to missing tests and the results of the knowledge assessment may be bias because at least half of the sample size were working professionals in the public health field.

Internship Abstract

Field Work Internships

Internship Abstract

Name: Sabeen Aslam
Position: Care Coordinator Intern
Preceptor: Daria Osherov
Agency: Memorial Sloan Kettering Cancer Center, Basking Ridge

Work Duties: Work duties for a Care Coordinator Intern in Radiology include checking patients in for radiology scans, making confirmation calls for appointments in the upcoming two business days, and triaging questions both in person and on the phone. Care coordinators serve as a liaison between patients, caregivers, technicians, clinical staff, administrative staff, Office Coordinators, and outside parties. Some assignments specific to radiology are mastering knowledge of the different modalities offered at Basking Ridge and explaining these modalities to patients. Additionally, it is crucial to protect patient information and adhere to Joint Commission National Patient Safety Goals at all times.

Techniques: An inquisitive nature and diligence are crucial to achieve excellence in this internship. After learning a new skill or new information, it is good practice to walk through these details again in order to become well-versed in them. Additionally, noticing common questions allows one to incorporate these clarifications into a daily routine.

People Skills: Developing people skills is arguably the most important aspect of the Care Coordinator role at Memorial Sloan Kettering. It is key to afford each patient the right to respect, attention, and care despite how many are seen in one day. Teamwork among colleagues and care for patients yield good results when the care team has a “can-do” attitude and understands the patient as a human. There are often requirements of scans that can be uncomfortable for patients. Wait times can also be frustrating, and many patients commute from far away. Care Coordinators must take all of these details into consideration when offering solutions and explaining policy to patients at MSK.

Results: Success can be measured by patient satisfaction with the help they received. While hard to describe with measurable facts, this can be observed through the patient’s body language and tone. Another important element is providing clear next steps for anyone who needs help. Following up on patient requests even when not explicitly asked results in clarity for anyone involved. Patients respond well when their needs are anticipated and they are treated with attention and care. Another measure of success is when multiple tasks are handled efficiently by the team when the department gets busy.

Lessons Learned: The need for clear communication in this role is paramount, as it helps keep patients safe and comfortable. It also keeps staff members informed, which creates a seamless visit for patients. Familiarity with all resources available at MSK are essential in answering questions and concerns from patients and caregivers. There are often exceptions to any rule one may learn, and intuition can be a reliable companion in the process. Trusting one’s intuition can allow one to catch missed information, notice gaps in a patient’s scheduling or treatment plan, and ensure patient privacy.

Internship Abstract

Name: Katherine Fink
Position: Care Coordinator
Preceptor: Frantz Fleurissaint, Assistant Manager, Outpatient Operations
Agency: Memorial Sloan Kettering Cancer Center - Bergen

Work Duties: Care Coordinator duties involve greeting and checking in patients. Patients are reminded of all scheduled appointments for that day and provided with any paperwork to fill out prior to being directed to the proper waiting area. All questions that patients may have about their appointments are answered in order to make them feel welcomed and comfortable.

Techniques: To check patients in, a variety of platforms are used, including Cadences for all appointments, RIS-IC for radiology-specific appointments, and CIS for laboratory appointments. CIS requires that patients have lab orders written that are currently marked as “on hold”. RIS-IC contains a form that must be printed for each patient, and other radiology forms must be completed by the patient at check-in for every scan. The east entrance, where I am stationed, is where the majority of our 500-600 patients enter through each day, so it is essential to be proficient in all the different systems used.

People Skills: As I am often a patient’s first interaction with anyone in person from Memorial Sloan Kettering, it is essential to be friendly and welcoming to each patient that comes in the door. As well, it is essential to be an active listener. Since Care Coordinators are stationed at the front desks, patients often turn to us for advice on any problems they may be having, and it is essential to listen to them thoroughly and try to point the patient in the right direction. Finally, strong communication skills are required. Communicating all the details of an appointment and anticipating any potential issues before they occur is key to making sure the patient’s visit goes smoothly.

Results: Performing faster, more efficient check-ins in which patients were queued properly in all systems is the quantitative part of my internship. However, other successes were seen more in patient and staff interaction. Through my time stationed at the east entrance, I have become very friendly with many patients who have frequent treatment schedules. Many patients have been excited to tell me about updates in their care, sharing their successes in treatment with me, and have expressed gratitude at me taking the time to learn their names. Being able to form these relationships with patients has been the most successful part of my internship.

Lessons Learned: The biggest skill I have gained from this internship is strong communication skills. Being able to effectively utilize in-person interactions, phone calls, Skype messenger, email, and all of the health systems is an essential part of being a Care Coordinator, and a skill I am happy to have gained. I have learned how to handle high-stress situations, and how to comfort patients during what is often the hardest part of their life. Every interaction I have had with a patient has been a learning experience for me in patient care, and I hope to take these lessons with me in my future endeavors.

Internship Abstract

Name: Kevin Fisher
Position: Office Coordinator Intern
Preceptor: Laura Antoine, Neuro-Oncology Assistant Manager
Agency: Memorial Sloan Kettering Cancer Center, Manhattan (Neurology Department)

Work Duties: My work duties mainly pertain to providing administrative support to Dr. Ronald Blasberg, his research lab and miscellaneous task through the department. I work with other office coordinators to help schedule and confirm patients' tests, appointments, and procedures. I also ensure that patients and their family members issues and concerns are handled in a timely and courteous manner. Of the administrative tasks that I perform, they include, faxing, scanning patient documents, and labeling documents for medical record submission. I also make sure clinic preparation is done by creating preclinic summaries and prepping patient documents for doctors that want information about the patient before their appointment. For Dr. Blasberg and his lab, I help procure items for the lab, prepare and send expense reports as well as maintain Dr. Blasberg's calendar.

Techniques: To ensure that patient privacy is protected according to HIPPA requirements, it is crucial to have the caller/person answering the phone identify the patient's information spoken over the phone. One way is confirming the spelling and DOB of the patient. Another key technique to protect patient privacy is to work with one patient at a time to make sure you don't confuse patients. Taking notes during conversations is another technique that documents everything and helps keep you organized. When working with projects, focusing on one project helps complete it with speed and efficiency, with limited mistakes. Working on one thing at a time also helps avoid becoming too overwhelmed when there are many tasks to complete.

People Skills: Having emotional intelligence and customer service skills, allows for the patient to stay calm and informed. Patients deserve to be reassured by an Office Coordinator that they are there for their wellbeing, is diligent, calm and knows what they are doing. Teamwork is also a very important skill to have when working as an Office Coordinator. If someone is overburdened with time sensitive tasks, teamwork is a great solution. Assisting overwhelmed coworkers can help improve the quality of work, and the interpersonal connections in the office.

Results: By using emotional intelligence, customer service, and team collaboration, I have been able to succeed in the Office Coordinator position. I make fewer mistakes and have a higher quality of work. Also, my interpersonal relationships with the Office Coordinator team have improved. One testament to my success has been the fact that I assumed two additional physician offices to provide administrative support. I can also say I have been successful due to my successful status during my initial evaluation.

Lessons Learned: One lesson I've learned from the internship is that keeping calm in high pressure situations is highly beneficial. Being able to talk to patients without getting nervous reassures the patient that all their concerns are going to be met and addressed in a timely fashion. Another lesson I've learned is to not rush things. By rushing, it is more likely that mistakes will happen. I've realized that if I am overwhelmed and something pressing needs to get done, it is better to use teamwork and ask for assistance.

Internship Abstract

Name: John Lee
Position: Care Coordinator Intern
Preceptor: Sonya Mathew, Assistant Manager at Outpatient Operations
Agency: Memorial Sloan Kettering Cancer Center, Rockefeller Outpatient Pavilion

Work Duties: Care Coordinators are assigned to warm welcome, which entails patients being checked in for appointments, accommodating any special needs, and providing patients with appropriate paperwork while answering questions. This ranges from financial to patient consent forms which are filled out prior to seeing a physician or nurse. Ostomy nurses are also notified when patients arrive because their schedules are slightly different.

Techniques: Care Coordinators use many different applications to ensure efficient transition from check in to appointment. These systems include Cadence, CIS, and Medical Record forms. These applications help to check in patients, print forms, and update information regarding patients' pharmacies and external doctors. It is important to note how necessary preparation is for each day in clinic. It slows down the process when checking in add-on patients and can cause further wait times. Pre-printing medical forms for each expected patient is essential in order to prevent delays.

People Skills: Communication and positive body language is crucial. The check in desk makes sure that patients are heard and assisted with any needs. The difference between friendly conversation and apathy towards patients can make or break their day. Each and every patient is going through their own personal battle. An act of kindness does not have to be grandiose to matter. Eye contact with a smile can go a very long way. Understanding and sympathizing with their situation can help patients feel less alone and more at ease.

Results: Confidence when speaking with patients and making small talk helps to relieve stress and doubts. It can be as simple as complimenting their name or asking about their commute. Also, great strides were made in the clinical aspect of the internship. After taking the time to read each patient form, it is much easier to explain them as well as differentiate what is for the clinic and what is for the patient. Success is not always measured through statistics, and this is the case with Care Coordinators. Verbal feedback is a major indicator of success. Kindness is not taken for granted. Many patients openly express gratitude which is a humbling experience.

Lessons Learned: An important lesson is that people are really strong. Cancer is not your common cold nor is it a walk in the park, yet the patients' positivity continues to shine. So many patients have a great sense of humor, and it really shows with their jokes and positive attitudes. It helps to get the nervous jitters out of the way as well as put a smile on the clinical staff's faces. It makes all the difference when working with patients who are going through an extremely difficult time in their lives. Ultimately, Care Coordinators should treat patients like family and ensure the best patient experience.

Internship Abstract

Name: Michael Murray
Position: Office Coordinator
Preceptor: Lisa Cozza, Assistant Manager, Hospital Operations
Agency: Memorial Sloan Kettering Cancer Center

Work Duties: There are two formal work responsibilities of an office coordinator at Memorial Sloan Kettering Cancer Center. The first is to ensure that patients are assisted in a timely and courteous manner by functioning as the primary contact for the practice where you are working. The second is to schedule patient's tests, appointments, and procedures. Although these are the only job responsibilities that are listed, I have found that those only scratch the surface of what a typical day includes. Based off of my experience, I have found that what is truly the most important job responsibility of an office coordinator is the ability to listen and have compassion for our patients. Very frequently, patients call the office to discuss matters that are more closely related to their personal lives than their treatment. Although it may not seem like a very high priority at that moment, taking the time to listen to each patient and making them feel like more than a number is the real top responsibility of an office coordinator.

Techniques: Electronic medical record (EMR) reconciliation is an important technique office coordinators use to ensure that each patient visit is properly documented and billed correctly. By making sure each doctor has completed and signed notes for each patient visit, we help ensure that our patients are receiving the highest quality care possible.

People Skills: Office coordinators need to be able to empathize with patients and understand that most are going through the toughest period of their lives. To that end, office coordinators must know how to listen and be compassionate, while also getting the information they require from every patient they encounter.

Results: On a personal level, I have become a lot more confident in my ability to successfully form relationships with all different types of people. I have improved my ability to act calmly under pressure, and think clearly about what course of action I must take to address each patient's most pressing needs. More importantly, I am not afraid to ask for help when I need it.

Lessons Learned: I have learned that people are people no matter where you go. I have seen doctors and patients form such close bonds, to the point where it almost makes me wonder whether they knew each other outside of the hospital setting! For my part, I have learned that there aren't any "stupid" questions in a hospital. When you are involved in a cancer patient's treatment, you need to double and triple check that you are doing your part correctly.

Internship Abstract

Name: Shivani Nandha
Position: Department of Medicine Office Coordinator Intern
Preceptor: Supervisor: Alexis Folz & Allison Manley; Mentor: Ruth Seixas
Agency: Memorial Sloan Kettering Cancer Center

Work Duties: I work as a liaison for patients and doctors to ensure quality patient care. Along with being a liaison, I provide additional help and support to office coordinators. Some of the additional help I provide includes; covering phone lines, confirming patient appointments, completing a pre-clinic summaries, and submitting radiology/pathology requests.

Techniques: This position has multiple responsibilities but the main one is centered around patient care. Focusing my attention on patients and ensuring I am getting all their information and message correctly is crucial. Quality patient care is centered around ensuring patient messages are being answered effectively and efficiently.

People Skills: The most important “people skill” is being an active listener so that the patient does not have to repeat themselves. During busy hours I interact with office coordinators to provide additional support. Another skill that is important is communication, whether it is communicating with patients, doctors or office coordinators.

Results: I feel more confident when speaking to patients on the phone. It’s a very sensitive matter when it comes to cancer patients and so you want to make them feel comfortable and be empathetic but also keep yourself mentally strong. This internship has made me feel more confident and comfortable as well as helped enhance my skills when it comes to communication and multitasking.

Lessons Learned: There are many lessons I have learned so far, the main one is how to mentally keep yourself together. It’s very easy to get emotional when dealing with patients going through a tough time, and so the lesson I have learned is how to keep myself mentally together while while also providing my help and support to patients.