TO ERR IS HUMAN... by Tracy Carlino

This statement, well known by many, is often used in health care when explaining or even justifying mistakes. In 1999, the Institute of Health published a landmark report that states that 98,000 patients die each year from preventable medical errors at a cost of ~ $28 billion annually, To Err is Human: Building a Safer Health System. The Institute concluded that it is not acceptable for patients to be harmed by the health care system that is supposed to offer healing and comfort – a system that promises, “First, do no harm.” No one would disagree with that statement, but humans deliver health care, and humans make mistakes. It is what we do after we make mistakes and catch the near misses that count. What the individual does as a professional and how the organization responds to mistakes are what make our environment a safe place to practice.

Promoting a culture of safety

As professional nurses, we have a code of ethics that we all need to practice and live by. The latest version, Guide to the Code of Ethics for Nurses (2015) published by the ANA clearly addresses the issue of safety and safe practice as a responsibility of professional nursing. Provision 3.4, professional responsibility in promoting a culture of safety, clearly articulates the role of the professional nurse in promoting patient health and safety. “The nurse is responsible for reporting any errors or near misses to the appropriate authority, ensuring disclosure of the errors to patients, and establishing processes to investigate these errors to prevent recurrence. The nurse also must not remain silent in the event of an error.” So what stops nurses and others from not speaking up?

Over the years, I have heard from some that the culture at Virtua is punitive, or more specifically, that if one speaks up they will be fired. As a nurse at Virtua now for over 30 years and a leader in nursing for over 20 years, this concern is troubling. In my tenure as a nurse executive, I can count on one hand how many nurses have been fired due to an error. Have nurses or others lost their jobs due to poor practice? Yes, they have, but not due to one error or mistake.

Continued on p. 2
Own the mistake
Nurses or other professionals lose their jobs because of repeat offenses and an inability to improve in their practice. In the cases of immediate termination, it is only because they were not truthful or tried to cover up the error. I tell you this because I know it to be true. Nowhere in our code of ethics does it say we will not be held accountable to our practice, but it is my word that if an error is made and the nurse speaks up, owns the mistake, and remediates the error, they will not lose their job over just one mistake or error. So what are the steps a nurse needs to take if an error is found or made?

Full disclosure is important
First, assess and ensure the patient is ok. This may include vital signs, a review of tests or rhythm strips, etc. This step would be specific to the type of error. Second, call the physician and using Situation Background Assessment Recommendations (SBAR), let the physician know the facts of the situation (the error, what, when, where, etc.), give any background information, review your assessment of the patient and make any recommendations you see fit. If the error is severe or if the patient is in distress, call the appropriate RRT or Code Blue. Third, notify the supervisor. Full disclosure and discussion of the error is important in preventing future errors or containing a potential problem that might be inherent in the process. Additionally, the supervisor can guide you through the appropriate next steps, which will include disclosure to the patient. Fourth, fill out an occurrence report using factual statements with as much information known at the time, including the SBAR information given to the physician. Lastly, document the error in the patient record, again, sticking to facts similar to the occurrence report. You can expect that your manager will follow-up with you regarding the error and discuss possible solutions to alleviate future errors. As a professional, we should always be open, honest and self-reflect on our errors, these are the only ways we will improve our practice and ensure the safety of our patients.

There are only bad processes
In closing, I want to leave you with what many have forgotten about the statement “to err is human.” This statement is a quote from Alexander Pope in his essay “An Essay on Criticism” that reads in full “To err is human, to forgive, divine.” To err IS human, and so we want to be able to put structures and processes in place to prevent as many errors as possible. That is why it is essential to report and review mistakes and near misses to see what steps can be put in place to prevent others from making the same mistake. After all, there are no bad people; there are only bad processes.

We need to be forgiven of our mistakes, not without ownership or accountability, but as humans who make mistakes. What we do after a mistake is made will be how we are judged and respected as professionals.

For more information on the Guide to the Code of Ethics for Nurses, go to the website below or find more information on the Vine under “VirtuaNurse.”

Virtua’s Nursing Recognition Council was created to recognize and celebrate our professional commitment to excellence throughout Virtua. Council members decided that it was important to standardize recognition events and celebrations throughout the organization so that nurses everywhere could participate and celebrate.

Involvement and engagement began with a small group of nurse leaders looking to promote activities and recognize accomplishments of Nurses across Virtua. One of our first accomplishments was the implementation of “First Friday” celebrations, a day each month dedicated to team work and fun.

In a short time we have established some standard annual events and have taken responsibility for assisting with Certification Day and Doctors Day. The committee has increased involvement in the Nurse Excellence Awards process, and Nurses’ Week activities, often organizing many events in their facilities. Most recently, the Council was part of the committee that presented the first Annual Virtua Nurse Day.

This year, the Nursing Recognition Council agreed that Virtua nurses needed to give back to the community. The Council also wanted to highlight and support the great work already being done by nurses who already volunteer in the community. A “Volunteer Interest and Involvement Survey” was created to solicit nurses who wanted to join our efforts. This was offered at RBC Day, Nurses Day, and other events. Dozens of nurses signed up for volunteer activities and have since:

- Prepared and served meals at the New Vision homeless shelter.
- Arranged for a screening of “The Dark Side of the Full Moon” to promote awareness for post-partum depression and psychosis. This event included panel experts and survivors from the Providence House Domestic Violence Services of Catholic Charities who discussed domestic violence and abusive relationships.
- Participated in “Smile from Kara” an event to bring awareness to childhood cardiac disease in young athletes. Virtua staff screened attendees using EKGs.

The Nursing Recognition Council members are proud of their accomplishments and look forward to expanding membership, sponsoring events, and making meaningful contributions to our nurses and our communities.

Ferne Bell-Woodley
Co-chair

Destiny Little
Co-chair

Maria Minardi

Leslie Oleaga
The Future of Nursing, Leading Change, Advancing Health report, released by the Institute of Medicine (IOM) in 2010 made a recommendation to increase the number of bachelor prepared nurses to 80 percent by 2020. According to the article, a Bachelor of Science in Nursing (BSN) has been shown to increase leadership competencies and awareness of health policies; it showed improved interdisciplinary collaboration and encouraged systems thinking among nurses. These concepts, as well as the increased incorporation of evidence based care into their nursing practice, will ultimately lead to improved patient outcomes.

Good but not good enough
So, how far have we come towards reaching the goal set in 2010? Well in 2015, the IOM released a progress report on the implementation of the original recommendations titled “Assessing Progress on the Institute of Medicine Report: The Future of Nursing.” According to the report, there was a 17 percent increase in enrollment in pre-licensure BSN programs from 2010 to 2014. There was also an increase in enrollment in RN to BSN programs by 69 percent from 2010 to 2014. Overall, BSN-prepared nurses increased from 49 percent of the workforce in 2010 to 51 percent of the workforce in 2014.

Good, but not good enough. Despite the significant increase in RN to BSN enrollment, we still have a ways to go to get to the goal of 80 percent by 2020. To achieve this goal, we have to be innovative in our approach to removing barriers to academic progression, which can be summed up by two words: access and motivation. These are the leading barriers towards achieving a BSN.

Access due to schools needing to turn away qualified applicants because of lack of faculty, classroom space, and clinical placement sites. Motivation (or lack thereof) attributed to financial concerns, competing priorities, and a perceived lack of value in obtaining a higher degree.
It all starts with you
Overcoming these concerns will require a true collaboration between nurses in clinical practice and academia. Remember, as nurses we have the potential to have the greatest impact on meeting the demands of the changing healthcare landscape. To do that, each of us is responsible for our own growth and development as well as the development of our profession as a whole. We will be better able to drive our profession forward if we can figure out how to get closer to that 80 percent goal, and it all starts with you. If you do not have a BSN degree, now is the time to seriously ask yourself: why not? And if you do have a BSN degree, be encouraging and supportive to your peers. Our patients and our profession deserve us all to step up.

A force in healthcare
The BSN initiative is just one of several recommendations in the action oriented “Future of Nursing” reports which provide nurses with blueprints to drive our future. The IOM made this strong recommendation and has put nursing at the helm with regard to improving health outcomes. Here at Virtua, we believe this to be an achievable goal. Nursing is a significant force in healthcare: with more than 3 million in our profession, we make up the largest portion of the health care workforce with the greatest potential impact. You can do this! Go!


A Bachelor of Science in Nursing (BSN) has been shown to increase leadership competencies and awareness of health policies; it showed improved interdisciplinary collaboration and encouraged systems thinking among nurses.
The 3 North Cardiopulmonary Unit at Virtua Marlton received the prestigious AMSN PRISM Award®, a relatively new honor recognizing exceptional nursing practice, leadership, and outcomes in hospital medical-surgical units across the country.

The award, which stands for “Premier Recognition In the Specialty of Med-Surg” is the first of its kind honoring medical-surgical nursing units in the United States. It is co-sponsored by the Academy of Medical-Surgical Nurses (AMSN) and the Medical-Surgical Nursing Certification Board (MSNCB). The award is given to outstanding acute care/medical-surgical units or adult/pediatric units classified as medical-surgical.

Officials representing AMSN and MSNCB presented the 3 North Cardio Unit with the AMSN PRISM Award plaque during a ceremony on October 18, 2016 at Virtua Marlton. Hoping to inspire nurses to strive for the highest levels of patient safety and quality, AMSN and MSNCB launched the award in October 2012. The award also reflects the compassion, commitment, and connection that characterize medical-surgical nurses.

Specifically, the award celebrates units that exhibit:
• Effective leadership
• Recruitment and retention of competent staff members
• Evidence-based practice
• Positive patient outcomes
• A healthy work environment
• Lifelong learning of unit staff members

There are more than 600,000 medical-surgical nurses practicing in the United States today, making them the single largest group of specialty nurses working in hospital settings, according to AMSN. Medical-surgical nurses oversee a broad spectrum of patient care responsibilities, another reason the acronym “PRISM” was chosen for the award.

The 3 North Cardiopulmonary Unit at Virtua Marlton is only the 14th unit in the nation and the third unit in New Jersey to be recognized. It is Virtua’s second unit to receive this award. Earlier this year, the 4A Acute Pulmonary Care Unit at Virtua Voorhees also received the honor.
Virtua Nursing is proud to be a participant of the DAISY Award for Extraordinary Nurses. The DAISY Foundation was established in 1999 by the Barnes family in honor of their son J. Patrick Barnes. Pat passed away from complications of Idiopathic Thrombocytopenia Purpura at the age of 33. His family was so impressed by the care and compassion that was given to his son by the nursing staff that they felt the best way to honor his memory was to honor nurses who do the same for others. DAISY is an acronym for “diseases attacking the immune system.”

Nurses at Virtua are nominated by their patients or their patient’s family members via the Get Well Network or nomination forms that are obtained in the hospital. These nominations are then voted on by their peers and one remarkable nurse is awarded the Daisy Award each month. Formal celebrations include unit recognitions, as well as a yearly get-together of all the recipients during Nurse’s Week.

Voorhees DAISY Award Winners
Back row: Mark Barnes FAAN (DAISY Foundation Co-founder/Chairman), Sanjay Cheulkar, Tracy Carlino, Morgan Strauss, Kari Sweeney, Donna Hale, Marianne Gervasi, Mike Smith, Barb Hansen, Linda Boyce, Jane Spruill, Karen Goldsmith, Bonnie Barnes FAAN (DAISY Foundation Co-Founder/President)
Front row: Lynn Richmann, Marny Matricardi, Cindy Keilman, Nancy Driscoll, Kelly Warren

Memorial DAISY Award Winners
Left to Right: Bonnie Barnes FAAN (DAISY Foundation Co-Founder/President), Jeanne Wolfrom, Carmen Robinson, Desiree Aragon, Dana Russo, Mark Barnes (DAISY Foundation Co-founder/Chairman), Anna Speaker, Gloria Barcelo-Sario, Yochobed Francis, Diane Jennings, Donna OBrien, Christine DiPascale, Lora Carberry

Marlton DAISY Award Winners
Back row: Bonnie Barnes FAAN (DAISY Foundation Co-Founder/President), Bill Lawson, Anthony Flaherty, Shannon Norcross, Caitlin Murray RN, Patrick Callahan, Deb Horn, Mark Barnes (DAISY Foundation Co-founder/Chairman)
Front Row: Nicole McFetridge, Jennifer Tiertan-Palermo, Stephanie Hummel, Nick D’Acqua
Magnet Champions are selected from throughout Virtua. The role of the champion is to educate their respective areas about our journey toward Magnet status. These dedicated nurses help ensure that colleagues are getting the Magnet-related information and answers that they need to feel comfortable supporting our efforts. Magnet Champions also help identify and encourage staff to share their stories about their professionalism and pride in nursing.

**Front row**
1. Lorena Russo
2. Kristin Pilong
3. Lauren Dupont
4. LaToya Myers
5. Jeannette Conrad
6. Suong Nguyen
7. Kim Lane

**Middle row**
1. David Meyer
2. Stephanie Runner
3. Amanda Radyshewsky
4. Christine Pawliczek
5. Lauren Demarco
6. Donna Siegmeister
7. Kathy Giesen-Cotter
8. Maria Minardi

**Back row**
1. Kevin Lyons
2. Kay McConnell
3. Vicki Casey
4. Kandice Hudgins
5. Zaituni Murphy
6. Alyssa Patane
7. Mary Carter
8. Gail Miller
9. Diane Kelchner
10. Michael Kolodziej

**ADVANCED PRACTICE COUNCIL AT VIRTUA**

Cheryl Wilson, APN

The Advanced Practice Council is a council that represents Advanced Practice Nurses (APN) and Physician Assistants (PA) within the Virtua system. Advanced Practice Nurses at Virtua work in family practice, women’s health, urgent care, long term care, and acute care. Most recently, APN’s have joined the hospitalist role in our acute-care settings at night, as well as having an APN managing the care of patients in the intensive care unit (ICU). We are proud to say our APN’s in the ICU also intubate patients and insert central lines. We have close to 100 providers in our council with new practitioners joining regularly.

Per the New Jersey Board of Nursing anyone wishing to identify themselves as an APN must have certification from the board as a Nurse Practitioner or Clinical Nurse Specialist. APNs and PAs both have prescriptive privileges and work together with physicians to provide high quality evidenced-base care.
Nursing professional development is a specialized nursing practice that facilitates the professional development and growth of nurses along the continuum from novice to expert as described by Benner (Harper & Maloney, 2016). Professional development, as a specialty of nursing practice, is defined by standards, based on research, and critical to quality patient and organizational outcomes.

Mentoring is one avenue for professional development. It aids in recruitment, retention, and the promotion of a healthy work environment. A mentor is a role model and advocate who motivates the mentee and supports his or her career development by sharing experiences and knowledge.

Mentors provide information, advice, support and ideas. Typically, mentors and mentees have long-lasting relationships.

A new Virtua registry (available 4th quarter 2017) will allow our nurses to sign-up to be a mentor, mentee or both. 

A new Virtua registry (available 4th quarter 2017) will allow our nurses to sign-up to be a mentor, mentee or both. We will “match” you to your specific requests. A Mentoring Roadmap with toolkits and other documents are already located on the Center for Learning >>STAR University share drive. More information on mentoring will soon be available.

Professional Development Through Mentorship
Congratulations to the 2016 PDAP Recipients on Your Accomplishments!

The Virtua Nurse Professional Development Advancement Program (PDAP) is a performance-based advancement program in place at Marlton and Voorhees that exists to promote, support, recognize and reward individual RNs as they grow within the role of the registered nurse.

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NONDISCRIMINATION AND ACCESSIBILITY REQUIREMENTS – ACA Section 1557

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- Provides free language services to people whose primary language is not English, such as qualified interpreters
- Information written in other languages

If you need these services, contact the Virtua Access Center at 1-888-Virtua-3, TTY 1-888-847-8823 or the Corporate Compliance Officer at 856-355-0722. If you believe that Virtua Health, Inc. has failed to provide these services or discriminated in another way on the basis of race, color, national origin, age, disability or sex, you can file a grievance with: Office of Corporate Compliance at 20 West Stow Road, Suite 9, Marlton, NJ 08053, Telephone 856-355-0722. You can file a grievance in person or by mail, fax, or email. If you need help filing a grievance, contact Corporate Compliance Officer – Susan Hatch, 20 West Stow Road, Suite 9, Marlton, NJ 08053.


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INDIVIDUALS WITH LIMITED ENGLISH PROFICIENCY LANGUAGE ASSISTANCE SERVICES

Spanish
ATENCIÓN: si habla español, tiene a su disposición servicios gratuitos de asistencia lingüística. Llame al 1-888-VIRTUA-3 (1-888-847-8823).

Chinese/Mandarin
注意：如果您使用繁體中文，您可以免費獲得語言援助服務。請致電 1-888-VIRTUA-3 (1-888-847-8823).

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ATENÇÃO: Se fala português, encontram-se disponíveis serviços linguísticos, grátis. Ligue para 1-888-VIRTUA-3 (1-888-847-8823).

Gujarati
ગુજરાતી ભાષા બોલતા હોવાની ક્ષેત્રમાં ફ્રી હોવા મળે છે. કે હુણા ચલાયું હોવું પ્રાઇમરી ભાષા ની પ્રશ્નોને સમજવા માટે આ સેવા મળી રહી છે. 1-888-VIRTUA-3 (1-888-847-8823).

Polish
UWAGA: Jeżeli mówisz po polsku, możesz skorzystać z bezpłatnej pomocy językowej. Zadzwoń pod numer 1-888-VIRTUA-3 (1-888-847-8823).

Italian
ATTENZIONE: In caso la lingua parlata sia l'italiano, sono disponibili servizi di assistenza linguistica gratuiti. Chiamare il numero 1-888-VIRTUA-3 (1-888-847-8823).

Tagalog
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Arabic
تتوفر مساعدات للمساعدة في اللغة العربية التي تحتاج إلى مساعدة في اللغة العربية. اتصل بالمكتب البحت أو 1-888-VIRTUA-3 (1-888-847-8823).

French Creole
ATANSYON: Si w pale Kreyòl Ayisyen, gen sèvis èd pou lang ki disponib gratis pou ou. Rele 1-888-VIRTUA-3 (1-888-847-8823).

Russian
ВНИМАНИЕ: Если вы говорите по русскому языку, то вам доступны бесплатные услуги перевода. Звоните 1-888-VIRTUA-3 (1-888-847-8823).

Hindi
यदि आप हिंदी बोलते हैं तो आपके लिए मुफ्त में भाषा सहायता सेवाएं उपलब्ध हैं। 1-888-VIRTUA-3 (1-888-847-8823) पर कॉल करें।

Vietnamese
CHÚ Ý: Nếu bạn nói Tiếng Việt, có các dịch vụ hỗ trợ ngôn ngữ miễn phí dành cho bạn. Gọi số 1-888-VIRTUA-3 (1-888-847-8823).

French
ATTENTION: Si vous parlez français, des services d'aide linguistique vous sont proposés gratuitement. Appelez le 1-888-VIRTUA-3 (1-888-847-8823).

Urdu
کل بھیہ دستیاب ہیں۔ مفت خدمات کے لئے کہا کہ اسم کو آپ کو آپ کو پیش کیا جاتا ہے۔ 1-888-VIRTUA-3 (1-888-847-8823).
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You’re a Virtua Nurse – share it with pride.

Write to NursesNews@virtua.org if you want a magnet to display.

VirtuaNurse

VirtuaNurse welcomes contributors and editorial review board members. Contact Dorothy Boresky at NursingNews@virtua.org.

This issue highlights the VirtuaNurse experience beyond traditional sites like our hospitals. The Virtua nursing team spans every medical specialty and environment where care is delivered. We’ll continue to explore more VirtuaNurse experiences over time.

IT’S OFFICIAL: VIRTUA NURSES HAVE THEIR OWN DAY

Virtua feels the art of caregiving starts with nursing, so we made a commitment to celebrate our nurses’ dedication to clinical excellence. On September 26, 2016, New Jersey Senator Diane Allen, of the 7th Legislative District and the NJ State Legislator, designated the 4th Thursday of every September as “Virtua Nurse Day”. This proclamation acknowledges our caring culture, patient loyalty and exemplary nursing practices system wide.