Fiscal Year in Review

We can be proud as we review this past fiscal year (July 1, 2015 through June 30, 2016)

With the start of a new fiscal year, we at UCHC can look back with pride on the many accomplishments of our outstanding staff. Founded on the core principles of our mission...caring, teaching, healing and improving, UCHC continues to enhance services to our patients in the NJDOC, JIC and Parole. The following highlights some of our most noteworthy accomplishments which were recently shared with NJDOC Commissioner Gary Lanigan.

Malpractice Lawsuits Continue to Decline

The number of lawsuits against UCHC has declined from a high of 16 in both 2009 (7/1/2009 to 6/30/2010) and 2010 to just 7 in 2015.

Areas for UCHC to reduce risk include:
1) patient safety, satisfaction and engagement, 2) quality improvement, 3) caring as the primary component of the UCHC mission, 4) partnership with patients on their health, 5) identifying risk and partnering with DOC in areas where DOC intervention may reduce risks (e.g. administrative watch upon return from a halfway house)

Lower Mortality Rate

Mortality rates over the past 4 years within NJDOC (exclusive of residence on the Special Treatment Unit) are estimated to be 38% lower than the mortality rate in the NJ general population in 2004. In spite of the aging population and increased number of inmates age 65+ the number of deaths annually have remained stable with slight variations.

Suicide Rates Remain Below The National Average

Suicide reduction efforts have resulted in a decrease in the number of suicides (average 4/year 2005-2010 to 2.6/year 2011-present). Interventions include: NJDOC limiting the use of single cell housing, increasing watch for inmates returning from halfway houses, and identifying and removing risks in the physical environment. The recent NJDOC reform of restrictive housing also reduces suicide risk.

Clinical Outcomes from The May Client Report

• 88.8% of patients with Hypertension are at or below the targeted 140/90 level, compared to only 52.5% of the US population considered to have their Hypertension under control.
• 79% of the NJDOC population diagnosed with HIV have an undetectable viral load compared to only 30% of those in the US living with HIV with an undetectable viral load.
• Since 2013 145 individuals with Hepatitis C have received treatment. Only 14 did not obtain viral suppression.
• A review of antipsychotic polypharmacy found only 3.2% of patients are being treated with two or more antipsychotic medications compared to a median world rate of 19.6%* and the limited use was justifiable in all cases.
• 54.4% of patients with Diabetes achieved good control (HgA1C<7) and only 16.4% were assessed as being in poor control (HgA1C>9).
• 64.3% of patients with Diabetes have reduced LDL levels ≤100.
• 72.1% of patients with Hyperlipidemia have reduced LDL levels ≤130.
• Average daily hospital census in the first 5 months of 2016 was 9.02 reflecting a continued downward trend in the use of inpatient hospitalization from a high of 12.4 in CY 2010.
Fiscal Year in Review (cont’d)

• 96.0% indicated all questions were answered
• 97.2% indicated the next steps of care were explained
• 95.2% reported being satisfied with their visit
• 69.2% indicated that they actually preferred telemedicine visits over onsite/clinic visits

Timely Completion of Specialty Consults
In CY 2014 the average monthly compliance rate for evaluations to be completed by medical specialists within the expected 60 days was 86.6%. In CY 2015 it increased slightly to 88.7%. In the first four months of CY 2016 it improved to 97.4%.

Reduction in Disciplinary Charges for Inmates on the Mental Health Roster
Between 2010 and 2015 the number of inmates on the Special Needs (SN) Roster receiving disciplinary charges dropped from 2,539 to 1,928 (24.1%). During this time period the SN roster population dropped from 3,297 to 3,038 and the rate of SN inmates receiving charges declined from .77 to .63 (18%).

This indicates the positive, measurable impact of providing the inmates with mental health (MH) treatment combined with training correction officers on understanding how mental illness can influence the behavior of those under their supervision.

Follow-up Sick Call Visits with Medical Providers
It has been a major challenge to consistently achieve the 97% level set by NJDOC for timely inmate appointments with medical providers after nursing sick call triage. As recently as FY 2015, UCHC reached the 97% threshold only 20 out of 50 weeks (40%) often due to ‘no-shows.’ With the assistance of NJDOC Director of Operations, Michelle Ricci, site Administrators and Majors, who began reviewing all ‘no-shows’ weekly in October, the numbers quickly dropped from approximately 160 to 40 per week. Most recently, the numbers are down to only 10-20 per week, with the majority resulting from scheduling conflicts.

From July through December 2015 UCHC achieved the required sick call threshold 17 of 26 weeks (68%). In FY 2016 through June the numbers improved to 22 of 25 weeks (88%).

Addressing Complaints Regarding Medication Lapses
Lapses in keep-on-person (KOP) medications have been a problem at the large, more complex prisons. This is partly due to the higher volume of medications being delivered to patients on units with significant restrictions on staff movement. Additionally, many of these locations are unable to accommodate medication carts. Four site-specific performance improvement (PI) teams have been charged with addressing this problem.

The extent of the problem has been a challenge to assess, as audits have been based upon documentation in medication administration records (MARs) where incomplete documentation may result from problems other than patients not receiving their medication. These include missing signatures or the creation of a second MAR following a patient transfer without the original.

In an effort to assess medication lapses in a standard fashion, an independent complaint process accessible to all inmates was used. Data was derived from inmate complaints reported to the Office of the Corrections Ombudsman, an entity independent of both NJDOC and Rutgers, which inmates could directly access by phone. Upon request, this Office shared with Rutgers their data on the number of medical complaints related to 1) delays in starting medications and 2) lapses in medications for the period of July 1, 2015 through June 30, 2016 (FY 2016).

In this past fiscal year there were a total of 1,309 medical related complaints to the Office of the Corrections Ombudsman. Of these complaints, 130 related to medication lapses and 36 were regarding delays in obtaining new prescriptions. Though not all were verified, they provided a fairly consistent measure reflecting the problem as perceived by our patients and the extent to which improvements are being made by PI teams.

Three of the four sites with PI projects focusing on medication lapses, Edna Mahan Correctional Facility (EMCF), Northern State Prison (NSP) and New Jersey State Prison (NJSP), had the most complaints related to such lapses or delays, with 54, 46, and 34 complaints respectively. The other site with a remarkable number was Southwoods State Prison (SWSP) with 14. However, SWSP has approximately double the volume of prescriptions compared to the other large sites. Statewide, the extent of these complaints account for only 0.03% of the annual prescriptions.

Over the past fiscal year the number of complaints have varied, but a downward trend has been noted. The number of complaints has declined from an average of approximately 19 per month in the beginning of the year, to an average of approximately 10 per month, indicating progress by the PI teams.

The PI teams continue to work on reducing lapses and delays in inmates receiving their medications, however, they may require further assistance from custody, especially in addressing potential access issues within close custody housing units. This is especially important in areas where deliveries are made without medication carts. The carts are an important tool in medication delivery as not having them impacts staff’s ability to organize and accurately complete the required documentation during medication delivery.

Jeff Dickert, PhD
Chief Operating Officer

Rutgers, The State University of New Jersey—UCHC Newsletter: January—June 2016 Page 2
Welcome!
Please join me in welcoming our newest team members here at the Central Office, Tessianka Hill and Wayne Purdy.

**Tessianka Hill**, RN, MSN, will serve as Program Manager - Infection Control. Tessianka comes to us from Henry J. Austin Health Center where she served as Supervisor of Nursing. She also was an instructor at Moe Shea Technical School. Ms. Hill will be leading the UCHC Infection Control Program. She received her MSN as a Certified Clinical Nurse Educator in 2013 and Family Nurse Practitioner from Maryville University.

**Wayne Purdy**, BS, will serve as Project Manager - Information Technology. Wayne comes to us from Cape Regional Medical Center where he served as the Information Systems Coordinator supporting Finance and Laboratory. He will take the lead supporting the technical components of our Telemedicine Program, serve as a liaison with the NIDOC Office of Information Technology and provide IT Support to UCHC Staff.

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**9th Academic & Health Policy Conference on Correctional Health**

The 9th Academic & Health Policy Conference on Correctional Health was held in Baltimore Maryland on March 17th & 18th. The conference brings together academicians, clinicians and policy experts to share ideas, build collaborations and disseminate their scholarly work.

This year’s conference had a strong UCHC presence with presentations by: *Drs. Arthur Brewer*, MD, Statewide Medical Director, *Jeff Dickert*, PhD, Chief Operating Officer, *Monique McCullough*, PharmD, Director of Pharmacy, *Marcia Mackenzie*, PhD, Clinician

Administrator, *Mechele Morris*, PhD, Director of Training, *Deepa Rajiv*, MD, Physician Specialist 1, and *Rusty Reeves*, MD, Director of Psychiatry.

UCHC presentations included:
- The Impact of Telemedicine
- Inmate Mortality and Morbidity
- Trauma Informed Care,
- Partnership with a 340B Provider
- Characteristics of Inmates Initiating Hunger Strikes

While all the conference presentations were well received, there were two stand out occurrences involving UCHC staff. One came when a student attendee made a special effort to seek out Dr. Monique McCullough. The student said that she felt compelled to share her enthusiasm over both Dr. McCullough’s presentation and commanding presence, which had influenced her to the degree that she had decided to broaden her career path. She said that this was something she had never considered until she witnessed, “an outstanding role model,” who inspired her to shoot for something higher professionally than she had ever imagined.

The second highlight was when a representative for the conference host, the Academic Consortium on Criminal Justice Health, which seeks to advance the science and practice of health care for individuals and populations involved with the criminal justice system, announced at the final plenary session that Dr. Arthur Brewer had been selected to join their Board of Directors.

Congratulations Dr. McCullough and Dr. Brewer, you are truly making a difference!

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**In the News: EMCF Music Therapy Program**

The March 8th edition of Rutgers Newsletter, *The Daily Targum*, featured an article “Rutgers Program Treats Prisoners with Mental Illnesses with Music” on the music therapy program for the women of C-Cottage at Edna Mahan Correctional Facility for Women (EMCFW) led by Karen Anne Melendez. Author Camilo Montoya-Galvez described the program as one, “that allows inmates to unshackle their emotions through songwriting, singing, playing instruments and most importantly, through a momentary escape from their daily routines.”

Deborah Heagan, intern and Drexel University graduate student highlighted the importance of offering inmates ways to channel their emotions through means that are not destructive and that will not get them into further trouble. “Karen gives them a safe place to express themselves, a safe way to build coping skills and also a safe place to smile.”

As she prepared for the upcoming spring concert, Ms. Melendez states, “Music is like a universal language that speaks to everyone. No matter where you are in life, there is always music.” The women of C-Cottage agree.


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The Music Therapy Program for the women of C-Cottage at Edna Mahan Correctional Facility for Women was also highlighted in June by local network news station WHYY.

Reporter Neema Roshania interviewed program director Karen Melendez and videotaped scenes from their Annual Summer Concert which this year featured a theme inspired by the late artist Prince. Ms. Melendez spoke of how music allows the women to have positive life experiences, something that was unique for many. Inmate Annette Harris described the music as helping her deal with the reality of living behind bars… “when you’re in music, you let yourself go, you know, for a moment.”

Since its inception the program has become a model for programs at prisons for women throughout the country. *Kudos Ladies!*


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Rutgers, The State University of New Jersey—UCHC Newsletter: January–June 2016
Prisoners Find Hope Through Music

By Patti Verbanas | February 22, 2016

A music therapy program at Edna Mahan Correctional Facility for Women directed by Rutgers helps inmates manage stress and seeks to reduce recidivism.

To an audience of fellow inmates and correctional staff, a woman read an original poem that told her story of loss and regret: “Being away from you tears me apart, and I know that I love you with all of my heart. So, I’ll do what it takes, and I’ll show in the end, that one day you’ll have back your mother again.”

Presented in a measured, lyric tone, the poem was as much an open letter from the woman to her daughter as it was a therapeutic form of creative expression.

“It took a lot of courage for her to put her feelings on paper and even more to say these words out loud in front of a group,” says Karen Anne Melendez, a board-certified music therapist at Rutgers University Correctional Health Care, who directs the music therapy program at Edna Mahan Correctional Facility for Women in Clinton. “Sometimes progress comes in tiny steps, sometimes in leaps and bounds.”

The poetry reading was part of a bi-annual concert, which incorporates original songwriting, singing of popular songs and spoken-word performances that inmates produce as part of their therapy.

Melendez launched the music therapy program at Edna Mahan in 2005. Since then, it has become a model for female correctional institutions locally and across the nation.

Her patients are residents of “C Cottage,” which houses inmates designated as having “special needs” – women who require behavioral health care for conditions such as addiction, post-traumatic stress, chronic mental illness or personality disorders.

“These patients often are suffering from trauma and depression and can be aggressive, resist authority and have unstable personal relationships – symptoms that if left unaddressed may lead to violence,” says Melendez. “Music therapy gives them an opportunity to safely channel their anger and frustration, increase their self esteem, cope with stress and connect positively with others.”

Studies have shown that female offenders are good candidates for music therapy since they are more open than men to arts-oriented approaches to therapy, are eager to learn new skills and often want to improve their environments.

“Some patients want to actively engage in music, while others respond better to listening,” she says. “We also have patients who are more interested in art or writing, so their therapy is more based on writing poetry and songs or designing the decorations for the concert.”

Melendez and her interns use a variety of techniques to help inmates find an outlet for their emotions. For example, patients listen to music while meditating or practicing yoga, explore songs’ meanings in relation to their own lives, create rhythms as a team, join sing-a-long, play games like “Name that Tune” or learn an instrument. “The activities are geared to normalize the patients and get them stimulated about what is going on in the world,” says Melendez.

The therapy also allows patients to confront feelings they have suppressed and learn coping skills. “We see expressions of pain and sadness, but the music provides just enough support to allow them to have the chance to build on their strengths and blossom,” she says.

The concert preparation, lasting four to six weeks, helps the women build social skills. “Working constructively as a team toward a positive goal is something many of them have never experienced in their life,” Melendez says.

Since the start of the program, Melendez has produced 23 concerts – each with their own variations and surprises. For example, the most recent concert included a short, theatrical performance of Shel Silverstein’s “The Giving Tree,” produced by intern Deborah Heagen, who has a background in theater.

“This was the first time we included acting, which allowed the group to explore improvisation,” says Melendez. “We also assigned a patient who has a passion for writing raps to create the skit’s theme song. Allowing patients to actively participate shows them that they can experience joy in being creative.”

Melendez’s goal is that patients will continue to use music therapeutically on their own after they leave prison. “Participating in music therapy may be one of few times when a troubled person can constructively reflect on herself and choose a better way of living.’”

-Karen Anne Melendez

‘Participating in music therapy may be one of few times when a troubled person can constructively reflect on herself and choose a better way of living.’

Photo Courtesy of Karen Anne Melendez
Karen Anne Melendez and intern Deborah Heagen in front of decorations that female inmates created for a recent concert, titled “Happy.”

Left to Right: Interns Alyssa Gonzalez and Deborah Heagen, along with Karen Anne Melendez perform at the 10th Annual QI Fair, NIDOC Central Office Grounds, Trenton, December 2015.

Turn the page to read two poems featured in the EMCFW winter concert:

“Untitled Poem” by Z.K.
“If God had A Jewelry Box” by S.J.
I had the pleasure of attending the Edna Mahan Correctional Facility for Women “Winter Concert” which includes performances by the women housed on Cottage C. Two performances this year included original poems. I was so moved by them, I obtained permission to share with all UCHC staff.

Jeff Dickert, PhD, Chief Operating Officer

Untitled Poem
By Z.K.

I reflect on the things that I've done every day.
If I could, all your pain, I would take it away.
Now sober I feel all the hurt that I've caused,
your once perfect life, it had so become lost.
Life was so great, we sure had it all,
then I turned to the drugs and we both took the fall.
I picked up that pipe while I knew all along
something was soon to be terribly wrong.
You started to know of thing called neglect,
while I became filled with a life of regret.
The very first time that I ever smoke crack,
I love it so much there was no turning back.
Deep in my heart I knew what it would do,
that once perfect life, now a nightmare come true.
I'll tell you my story of how I got high,
it started each morning, I'd kiss you goodbye.
I sent you to school, then I'd be on my way,
to go cop my drugs, that was it for the day.
Completely smoked out by the time you got home,
I'd pretend I was cleaning while you played alone.
You found your escape, "Can I go to the park".
Here take my cell phone be home before dark.
As time went on things had soon gotten worse,
I put you aside and the drugs became first.
You watched and in time you knew something was wrong,
it was evident I had completely withdrawn.
Continuously asking me, "Mom, you ok?"
I'm not feeling good honey, go outside and play.
The things I was doing I caused you great harm,
I moved on to putting a spike in my arm.
It's something I swore that I never would do,
and then I was gone that's what stole me from you.
I couldn't provide so you went with your dad,
I remember that day how it hurt me so bad.
Not able to function, no more left to give,
empty, I no longer wanted to live.

If God had a Jewelry Box
By S.J.

If god had a jewelry box what would be in it?
What would it look like and where would it sit?
Would it sit up on a mountain high, almost touching
the sky or would it sit down low hidden by
racing doe? Would one be able to open it and see
what's on display? Maybe many people have driven
past it and looked the other way?

When the lid is closed do all of its contents sparkle
and shimmer throughout the day? I have a guess
I could be wrong but I think it's filled with
wonderful little charms. Each charm is unique,
friendly, precious and sweet, and will one day
stand on her own two feet. They will never
grow weak.

I missed you so much it just tore me apart,
to know that must have just broken your heart.
Everything gone, now just weekend visits,
struggling to stay clean but I just couldn't get it.
I'd hug you and kiss you and hold you so tight,
tell you I love you, then leave in the night.
You weighed on my mind, how those nights were so long,
I knew of your pain when you'd find I was gone.
Missing for days without even a call,
Your heart couldn't take it, you built up a wall.
When finally I did call, I'd hear in your voice,
"I know you’re not here because you made that choice."
Days turned to weeks and then weeks into months,
your smiles hid your pain they were all just a front.
You longed for the days when your mother was here,
but now when I call it just fills you with fear.
Because deep in your heart you know what time it is,
and you don’t understand why I put you through this.
Your anger turned inward had all turned to pain,
praying something would give and one day I would change.
Hospitals, rehabs, or always locked up,
like my name in the newspaper wasn’t enough.
Lying in bed as your cried through the night,
with pictures of us while you held them so tight.
Left to go on feeling hurt and alone,
I missed out on everything look how you've grown.
I long for the days when things were so good.
When I was a mother and did what I should.
What I would give to erase all of your pain,
to give back your life and start over again.
As the old saying goes, "You were dealt a bad hand,”
but for all my mistakes I will now take a stand.
And from this point on make it better for you,
with my choices, decisions, and things that I do.
Because being away from you tears me apart,
and I know that I love you with all of my heart.
So I'll do what it takes and I'll show in the end,
that one day you'll have back your mother again.

Do you know what's inside God's jewelry box? You
are, I am, we are. So when you feel the pressures
of life get you down remember Gods love surrounds.
He has provided you with his protection all
throughout the day and he has given you very
special people to help you during your stay.

Not everyone gets to sit in this special box. Why not?
Because it only has a few slots. Believe me, I've
casted my lot and I've lost, lots! So, I understand
that God has his own perfect plan. How do you know this
you may ask? I know because I've been apart of the class.

God has a jewelry box and his precious charms are under
lock and key. Just waiting for the day when they can go home
free.

Permission to print poems granted by each author. No part may be reproduced in any form or by any means without the prior written permission of the author. For more information contact Karen Anne Melendez, LPC, NCC, MT-BC at EMCFW.
Correctional Nurse Tales from Jails and Prisons: That Chest Pain Complaint

By LORRY SCHOENLY, PhD, RN, CCHP-RN, CCN-M

The following article appears on correctionalnurse.net and is reprinted with author permission. To view the original article as well as others visit http://correctionalnurse.net/correctional-nursing-tales-jails-prisons-chest-pain-complaint/

Laura Mish, RN, works in a medium security prison with an average daily population of 3300 male inmate. Here is one of her correctional nursing tales. Read another of Laura’s tales here.

The Background

Having been a correctional nurse at a state prison for nearly 16 years, I have many stories to tell. Some are sad, some are funny, and then there are those that you will never forget. They change your perspective, not only on correctional nursing, but on nursing in general. I have learned invaluable lessons from many of my inmate patients. Here is one you might like.

The Tale

I was working evening shift one day as the compound nurse, and was called to medical in one of the buildings in general population for an emergency sick call. I was told that there was an inmate coming to medical with chest pain. He arrived shortly thereafter and I began to get information from him about his pain. I noted that he was only in his early 30’s. He told me that he was experiencing a feeling of pressure in the middle of his chest that had started earlier in the day. He said that the pain was getting worse as the day went on, but he denied any other symptoms, including pain radiating down his arm or shortness of breath. While assessing him I noted that he was not diaphoretic, and did not seem to be in acute distress. His blood pressure was slightly elevated, but nothing of urgency. At the time I was considering a cardiac issue, but considering he had no other symptoms, I also thought he could be experiencing atypical chest pain. I had asked him if he ever had this type of pain in the past, and he stated that he had not. I thought that possibly he could have a muscle strain since he did tell me that the previous day he had been in the gym area working out.

In an instance such as this, it is very easy to dismiss the issue as muscle strain since he had been exercising, but something told me to do an EKG anyway. The EKG started to print out, and when I saw the results I was SO glad that I had decided to do the EKG. At that moment this inmate was in the process of having an acute MI! I looked over at him and saw that he was suddenly becoming very diaphoretic. I called the LPN to come and sit with him, and I told him “I’ll be right back” and practically ran out of the room! While I was calling 911 I asked the LPN to give him aspirin and nitroglycerin, and to recheck his blood pressure. I went back in to him and apologized for my abrupt exit from the room, and told him what was happening. Within a short period of time the paramedics arrived and their EKG also showed an acute MI, so he was quickly transported to the local ER.

About 2 weeks later I was working in our Extended Care Unit when I saw him. He had been housed in there after returning from the hospital. He immediately recognized me, and thanked me for acting so quickly in getting him out of there and to the hospital. He told me that he had to have an angioplasty done immediately after arriving in the ER that day, and said that the doctor in the ER told him that if too much more time had passed before he got to the hospital, his situation would have been very bleak. Turns out he had a major artery that was almost completely blocked! He returned to general population after his stay in the Extended Care Unit and had no further problems.

The Lesson

I often think about this situation, and remind myself to look further into symptoms that an inmate is experiencing. I could have very easily dismissed his chest pain as a muscle strain, but I’m so glad I went a step further and did an EKG. I hope that my story will one day be of help to someone, and be an example of how immediate medical attention and taking that extra step can save someone’s life!

Article reprinted with permission from the author.

"Is Correctional Nursing for You?: Quick Start for Correctional Nurses (Volume 1)" by Larry Schoenly is available on Amazon in Kindle and print formats.

Rutgers Professor Teaches at Northern State Prison and East Jersey State Prison

Rutgers classics professor Emily Allen-Hornblower has presented lectures at NJ Symphony Orchestra performances and served as a consultant on the History Channel, but beginning last year she got hooked on “one of the most deeply rewarding experiences” of her career, bringing her expertise to students in a New Jersey state prison. Starting with a western civilization course at Northern State Prison (NSP) she chose to continue teaching inmates and next taught world civilization at East Jersey State Prison (EJSP). The experience had a profound impact on the students as well as the teacher judged by the comments:

“This changed the way I think about the future,” one student wrote about Gilgamesh. “It helped me understand that the consequences of my acts don’t only affect me.”

“The most important thing I learned is our interconnectedness to our past and to each other,” he wrote. “The happiness, pain, and tragedy felt by those yesterday touches us today. This connection knows no boundaries and has no limits. It cares nothing about race and gender.”

See entire article at: http://news.rutgers.edu/feature/state-prison-rutgers-professor-teaches-classics-and-inspires-convicts/20160407#Vw6mHWb2aUJ

Michele Morris, PhD,
Director of Training
Have a letter to share?

Email UCHCnews@ubhc.rutgers.edu
with the subject “Letter of Appreciation”
OR
Fax: (609) 341-9380, attn. UCHCnews “Letter of Appreciation”

Mail Call: Letters of Appreciation

Dr. Arthur Brewer,
Medical Director
University Correctional Health Care
RE: Clinical Experience at Edna Mahan Correctional Facility

Dr. Brewer,

I am a Nurse Practitioner student at Rutgers School of Nursing (formerly UMDNJ’s School of Nursing) and recently completed a clinical internship with your exceptional healthcare team at the Edna Mahan Correctional Facility. I had the pleasure of working with and learning from Dr. Brainbridge, Dr. Petrillo, Dr. DiBenedetto, and Nurse Practitioner Mary-Joan Barr along with the wonderful nursing and administrative staff at the facility. The level of compassion, empathy, and extraordinary level of care towards their patients is unrivaled by the private sector.

The level of passion the providers displayed while I worked with them was invigorating and motivating. As role models and mentors, they provided insight, not only into correctional medicine and women’s health, but into the challenges healthcare providers and their patients have to navigate on a daily basis. Their expectations of me as a student, were fair but challenging, and allowed me to build upon my knowledge of women’s health each shift.

The entire staff of the Edna Mahan Correctional Facility demonstrated patience, expertise, and high levels of professionalism throughout my clinical experience. They impressed upon me that regardless of who or where we care for our patients they deserve the best and most compassionate care we can provide.

Thank you for allowing me this experience and I hope you may allow other students to share in the wisdom and knowledge of your staff.

Best Regards,
(Student Name)

7 Attitudinal Foundations of Mindfulness*

As you read this, take a moment to pay attention to the present moment. What do you see in front of you? What do you hear? What do you smell, taste, and feel? It is so easy for us to lose sight of the present moment and get caught up in the hustle and bustle of everyday life.

In order to orient to the concept of mindfulness we need to start by cultivating the 7 attitudinal foundations: Non-judging, Patience, Beginner’s Mind, Trust, Non-striving, Acceptance, and Letting Go. As we begin our journey of mindfulness, we will take a look at one foundation each week.

Your Employee Assistance Program (EAP) is available to help if you find you are having difficulty “letting go” of a particular concern. Counselors are available to work with you in learning various relaxation strategies and managing stress or other issues that affect your personal or professional life.

Contact the EAP at (800) 327-3678, to speak with a counselor or to arrange an appointment.

Sarah Ben Younes-Millot, LCSW
Rutgers, UBHC Employee Assistance & Student Wellness Programs
242 Old New Brunswick Road
Suite 330
Piscataway, NJ 08854
(732) 235-5930

Congratulations Drs. Tepper, Cassidy and Francis, Stephanie Procell and Karen Melendez... Well done!!!

Jeff Dickert, PhD
Chief Operating Officer

UCHC Praised by NJDOC Commissioner

A staff member from Rutgers’ Government Affairs Office present at state budget hearings on Monday, May 2nd shared with me that, “at every opportunity, Commissioner Lanigan praised the work being done by your organization for its outcomes and the efficiency over the last eight years or so doing that work. There was a good 15 minutes of discussion about health care behind the walls - how much it costs, who is delivering the care, the contract, why the academic model works, etc.” Great work. Thank you!

Jeff Dickert, PhD
Chief Operating Officer
Christopher Kosseff Retires March 4, 2016

Christopher Kosseff retired effective March 4, 2016. Prior to his departure he remarked at various staff meetings that his greatest accomplishment was the leadership role he played in the initiation and growth of UCHC. He went on to say, “Saying goodbye to UBHC and UCHC is quite difficult for me. I am deeply committed to our mission, to our clients and to you — my soul and heart will always be with you.” For myself, it’s been an honor to have worked for and with Chris for the past 16 years and I will greatly miss him.

Jeff Dickert, PhD
Chief Operating Officer

To the RBHS Community:

It is with mixed emotions that I share the news that Chris Kosseff, president and chief executive officer of University Behavioral Health Care, has informed me of his plans to retire at the end of 2015.

Chris began in 1980 as a senior rehabilitation counselor with the organization that would become the University of Medicine and Dentistry of New Jersey. With the past few years at RBHS, he has now been with the organization for a total of 35 years. Chris has headed UBHC since 1997. Under his leadership, UBHC has become one of the largest providers of behavioral health care in the country, expanding to correctional health care with the founding of University Correctional Health Care, and providing a wide variety of peer counseling services including veterans, enlisted members of the armed forces, police officers, and mothers of special needs children.

In addition, for several years prior to the 2013 merger, Chris served as senior vice president for administration at UMDNJ, managing Human Resources, Facilities Planning and Construction, Physical Plant, Emergency Management and Workplace Health and Safety.

Chris has been a major asset to RBHS and while we are saddened to see him leave, we wish him the best in his retirement.

We have already begun planning for the succession of UBHC leadership and will be naming a search committee to lead this process in the very near future. We will be conducting a national search, assisted by a national search firm, in order to identify the very best person for the position.

Sincerely,
Brian L. Strom, MD, MPH
Chancellor, Rutgers Biomedical and Health Sciences

A video message from Chris Kosseff regarding his retirement:
https://youtu.be/0r7S-UP7Dg

View Chris Kosseff’s “Celebration” themed retirement video featuring messages from UBHC & UCHC staff. UCHC staff are featured at 2:54, 6:41 and 8:19.
http://www.chriskosseff.com/retirementvideo

Ravi Maharaj, Film Director/Producer, UBHC Training Department

Introducing...

Frank Ghinassi

The following email, sent by Chancellor Strom in May 2016, has been updated where necessary to reflect an appropriate timeline.

Frank A. Ghinassi, PhD, ABPP has been appointed to the position of President and Chief Executive Officer of University Behavioral Health Care (UBHC) and University Correctional Health Care (UCHC).

Dr. Ghinassi (previously held) positions of Vice President for Quality, Patient Safety, Regulatory Compliance and Health Information Management at Western Psychiatric Institute and Clinic of the University of Pittsburgh Medical Center Presbyterian Shadyside, where he also served as a member of the executive management group, as well as associate professor of psychiatry at the University of Pittsburgh School of Medicine. A licensed psychologist and board certified executive coach, Dr. Ghinassi formerly served as the Chief of Adult Psychiatric Services at Western Psychiatric Institute and Clinic/University of Pittsburgh School of Medicine, as Clinical Director of the Mental Health Division of the May Institute in Boston, and as Director of Mood and Anxiety Partial Hospitalization and Residential Services at McLean Hospital/Harvard Medical School. While in Boston, he was an Instructor in Psychology in the Department of Psychiatry at Harvard Medical School and was actively involved in the training of Pre- and Post-Doc psychology interns and fellows.

Dr. Ghinassi received a BA from the Indiana University of Pennsylvania, a MA from Duquesne University, and a PhD from the University of Akron. He completed a psychology internship and fellowship at the McLean Hospital/Harvard Medical School. His research interests include the implementation and evaluation of evidence based treatments for mood disorders, quality of care and performance measurement metrics, and models for data feedback in changing practices in behavioral health. He has served as a co-investigator on National Institute of Mental Health (NIMH), Substance Abuse and Mental Health Services Administration (SAMHSA), and foundation research grants.

A frequent invited presenter at national professional meetings and conferences, Dr. Ghinassi has served on SAMHSA planning committees, CMS commissioned technical expert panels, and serves as chair of the National Quality and Performance Measurement Committee for the National Association of Psychiatric Health Systems, where he was the 2007 recipient of the National Quality Award for his leadership on key projects, committees and expert panels aimed at improving the measurement and delivery of behavioral healthcare.

Since 2003, Dr. Ghinassi has served as a Player Development Educator and Evaluator for the National Football League and as a psychologist for the Pittsburgh Steelers, the Pittsburgh Penguins and for a number of local college and university departments of athletics. He has also long served as a member of the Adjunct Faculty at the Center for Creative Leadership, an international institute for the enhancement of corporate leadership and executive coaching.

Dr. Ghinassi (joined) Rutgers University in July where he will oversee a vision for UBHC which will blend excellence in research with its tradition of high quality clinical care delivery and in the process transform Rutgers University into an international leader in behavioral health.

As we welcome Dr. Ghinassi, please join me in thanking Interim President and CEO Rosemarie Rosati for her leadership and dedication to UBHC, its staff, and patients during this time of transition.

Sincerely,
Brian L. Strom, MD, MPH
Chancellor
Rutgers Biomedical & Health Sciences
Skills Fair & Nurses Celebration:
AWYCF & GSVC

Albert C. Wagner and Garden State Youth Correctional Facilities’ medical staff held their annual skills day and nurses celebration Wednesday, May 4, 2016. Staff were treated to breakfast and lunch, as well as a goodie bag raffle.

We hear there was a large turnout and staff really enjoyed the event!

Pictured Above:
Darneth Amantique, RNM (AWYCF/GSVC); Marie Thompson, DNM (GSVC); Lisa Johnson, DNM (AWYCF)

Pictured above: Lisa Johnson, DNM (AWYCF); Patricia Collins, RN; Beatrice Iloka, RN; Tamika Harris, Secretary III; Jane Aldoshoff, RN; Isha Howard, Med. Tech.; Marie Thompson, DNM (GSVC); Darneth Amantique, RNM

Several UCHC staff members passed the national Examination for Professional Practice of Psychology:
James Tschirner, PsyD (SSCF)
Virginia Finner, PhD (GSVC)
Elizabeth Mullen, PsyD (GSVC-Columbus House)

Alyson Hermstead, LPN
Kasey Furr, LPN
Danyelle Medley, LPN
Darneth Amantique, RNM
Francine Pasch, ICN

After completing Suicide Awareness training with officers at Edna Mahan Correctional Facility for Women (EMCFW), Dr. Carol Christofis was approached by a CO who told her that in 15 years of sitting through this training, hers was the most interesting he had ever attended.

Dr. Christofis said what was most meaningful to her was when a different CO shared that after having been in her class, he sat down for a long conversation with his daughter who had threatened suicide not too long ago. He felt the open communication was helping toward ensuring that she wouldn’t hurt herself - which he said he never would have done otherwise.

Manfred S. Guttman Award
The Oxford Textbook of Correctional Psychiatry has been recognized with the 2016 Guttman Award. UCHC Drs. Rusty Reeves and Arthur Brewer are among the contributors to this celebrated text in our field.

The Manfred S. Guttman Award, established in 1975, recognizes an outstanding contribution to the literature of forensic psychiatry in the form of a book, monograph, paper, or other work published or presented at a professional meeting between May 1 and April 30 of the award year cycle. The award is from the American Psychiatric Association (APA), co-sponsored by the American Academy of Psychiatry and the Law (AAPL).

Verice M. Mason Community Service Leader Award

Christopher Koss, retired President and CEO of Rutgers University Behavioral Health Care (UBHC) and University Correctional Health Care (UCHC) was the 2016 recipient of the Verice M. Mason Community Service Leader Award. The award is presented annually to an individual who has personified, led and provided the vision for an organization, and to the organization served, for extraordinary commitment to improving the health and welfare of the citizens of New Jersey. Chris received this award at the 2016 Edward J. III Excellence in Medicine Awards held on May 4, 2016.

Edited excerpt from the program:
Accepting on behalf of Rutgers University Behavioral Health Care is President and Chief Executive Officer (retired) Christopher O. Koss. Mr. Koss was responsible for a statewide system of academically based mental health and addiction services across New Jersey. In 1996 when he assumed responsibility for this system, the operating budget was approximately $50 million per year, with the majority derived from Medicaid reimbursements. In 2015, the budget was $246 million, with a dramatically diversified portfolio. Although all of the core clinical services remain vibrant and serve the academic and clinical missions, the range of services now includes correctional health care, an administrative services organization, a statewide suicide prevention hotline, a clinical research and training institute and peer operated helplines for service members, veterans, mothers of children with special needs, law enforcement officers and child protection workers.

RE: Employee Recognition

The UCHC Executive Leadership team encourages the use of “Shout Outs” in the newsletter as a form of Employee Recognition.

The Leadership Team understands there are many achievements and day-to-day activities contributing to successful operations and deserving department recognition.

Newsletter editing staff are happy to provide assistance in drafting “Shout Out” wording. Please indicate such in your email request.

Send “Shout Out” via email to UCHCnews@ubhc.rutgers.edu
with the subject “Shout Out”

Jeff Drabot, PhD, Chief Operating Officer

“Shout Out” criteria:
• The person(s) being recognized must be part of Rutgers-UCHC
• Event/situation must be directly related to current work responsibilities; or
• Achievement in current profession and/or educational area of study (i.e. promotion, presentation, publication, licensure, advanced degree, etc.); or
• A Rutgers University, NJDOC, JIC, Parole or other client related event; or
• An act of heroism or bravery; rendering life-saving aid such as a Good Samaritan.
If your legal name changes, you must notify the UCHC Central Office as well as make the change online at http://my.rutgers.edu.

To Resolve Payroll Issues...
1. Contact your payroll timekeeper. In most departments this is the unit support staff.
2. If your payroll timekeeper is unable to assist you, contact your supervisor, or in their absence, the regional manager/administrator.

Educational Assistance Program
The Educational Assistance Program application must be submitted to Campus Human Resources Benefits Services Office after the course is completed. Course pre-approval forms are no longer required.

Applications submitted without the required documents will not be accepted. See application for list of required documentation.

Mileage
Mileage reimbursement rate for CY 2016 is 54 cents per mile (x .54)
Mileage reimbursement rate for CY 2015 was 57.5 cents per mile (x .575)

Problems with UCHC
Pagers/Cell Phones
Report all problems to Lisa Chasar,
UCHC Central Office,
(609) 292-4036 x5211
or email Lisa.Chasar@rutgers.edu

All UCHC Staff,

Litigation, unfortunately, is commonplace in prisons. Most litigation against staff comes to naught, however, all requires attention.

In such matters you would be directly served a summons or complaint. Supervisors, peers and support staff are not authorized to accept service/sign off on an Affidavit of Service on behalf of another employee. However, supervisors should assist to arrange a meeting with the individual being served a summons or complaint.

If you are asked to sign a litigation or claim for the name "University Correctional Health Care" and no specific staff name is assigned – DO NOT SIGN OR ACCEPT. This type of claim/litigation must be served upon the Office of the Secretary to the Board of Governors as follows:

Rutgers, The State University of New Jersey,
Office Secretary of the University
7 College Ave, Room 111
New Brunswick, 08901-1280

I've Been Served!? What should I do?

Problem With Your Paycheck
Eff ective January 1, 2016 UCHC established color coded scrubs according to discipline for positions receiving a clothing allowance. Assigned colors are as follows:

<table>
<thead>
<tr>
<th>APNS</th>
<th>White Lab Coats</th>
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<tbody>
<tr>
<td>RNs</td>
<td>Navy Blue Scrubs</td>
</tr>
<tr>
<td>LPNs</td>
<td>Burgundy Scrubs</td>
</tr>
<tr>
<td>Dental Assts/Hygienists</td>
<td>Hunter (Dark) Green Scrubs</td>
</tr>
<tr>
<td>Non-licensed (Tech/Aid/Phleb)</td>
<td>Ceil Blue Scrubs</td>
</tr>
</tbody>
</table>

**LOOK**

One easy-to-remember email address to send all newsletter tips, ideas and correspondence:

UCHCnews@ubhc.rutgers.edu

**Office 365 Migration**

*Take advantage of the training resources of Rutgers Connect!* These training resources will assist you by demonstrating how to replicate the functions of your previous mail system as well as introducing you to new Office 365 features.

**Guides and Documentation**

Learn how to set up Rutgers Connect with mail clients, send email from an alternate email address and other basics to get you started with your new account.

https://oit.rutgers.edu/connect/guides

**Webinars**

Approximately one hour long, online sessions are taught live by an instructor. Webinar attendees are welcomed to bring any questions they may have regarding Office 365. Topics currently offered that UCHC staff may find useful include:

- **Email and Calendar on the Go**
  - Access your mail and calendar from anywhere and on any device using OWA, your online portal to your inbox and completely synced with your Connect emails on your PC, smartphone or other devices.

- **Storage with OneDrive**
  - OneDrive for Business is the place where you can store, sync and share work and school files in the cloud. OneDrive for Business lets you update and share files from anywhere and work on Office documents with others at the same time through co-authoring.

Use the link below to register for the webinar sessions you are interested in:

http://rutgers.cpxportal.com/event/

**Training Courses**

Self-paced modules allow you to walk through specific Office 365 topics. These courses can be accessed at any time and allow you to customize a lesson plan to meet your specific training needs. Training courses can be found at:

http://rutgers.cpxportal.com/courses/

**NEW**

Suggestions? Ideas? Leadership Wants to Know!

The UCHC Leadership Team created improveUCHC@ubhc.rutgers.edu as an avenue to communicate with UCHC Central Office Leadership. This electronic communication method is available for you to send your ideas any time, day or night. All suggestions are monitored and forwarded to the UCHC Leadership Team for review, without revealing your identity unless you direct us otherwise.

Your valued input will help us better manage our programs and become better managers ourselves, so we invite you to use this Performance Improvement initiative. We hope to hear from you soon!

**11th Annual Statewide QI Fair**

**Wednesday, November 2nd**

Sign-in 12:30 pm

Harris Auditorium

NJDOC Central Office, Trenton

**IMPORTANT DATES!**

**Project Registration Deadline:** Monday, October 3rd

**Deliver Project, Summary & Minutes to Central Office by Friday, October 14th**

*NEW*

correspondence:

**Did you know?**

You don’t need to be involved with a project to attend the QI Fair. Come on out and see what it’s all about! Be sure to get your supervisor’s permission prior to registering.

**Attendance Registration Form**

attached to end of Newsletter.

Keep an eye on your email for information!

Hope to see you there!

UCHC NJDOC NJJJC NJSPB
## UCHC Central Office Phone Numbers/Extensions

**Main Number:** 609-292-4036  
**Fax Numbers:** 609-341-9380, 609-943-5449, 609-341-3399

### Executive Administration Staff:

<table>
<thead>
<tr>
<th>Name</th>
<th>Office</th>
<th>Cell</th>
<th>Pager</th>
<th>Email @ubhc.rutgers.edu</th>
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<tbody>
<tr>
<td>Jeff Dickert</td>
<td>x5242</td>
<td>732-580-1055</td>
<td></td>
<td>dickerje</td>
</tr>
<tr>
<td>Shirley Lee</td>
<td>x5228</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Arthur Brewer</td>
<td>x5224</td>
<td>609-313-4185</td>
<td>brewerar</td>
<td></td>
</tr>
<tr>
<td>Rich Cesvaco</td>
<td>x5241</td>
<td>201-407-3114</td>
<td>732-396-6768</td>
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</tr>
<tr>
<td>Magie Conrad</td>
<td>x5229</td>
<td>908-930-4025</td>
<td></td>
<td>conradmmp</td>
</tr>
<tr>
<td>Lisa DeBilio</td>
<td>x5223 or 732-235-3356 (Piscataway)</td>
<td>debatedilla</td>
<td>haweswa</td>
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<tr>
<td>Tony Hawes</td>
<td>x5237</td>
<td>609-405-7450</td>
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<tr>
<td>Hal Moeller</td>
<td>x5210</td>
<td>609-503-1684</td>
<td>moellehc</td>
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</tr>
<tr>
<td>Rusty Reeves</td>
<td>973-465-0068 x4241</td>
<td>973-632-3194</td>
<td>reeveisedo</td>
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<tr>
<td>Andrew Youngblood</td>
<td>x5231</td>
<td>609-218-0697</td>
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<td>youngbarn</td>
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### Support Staff:

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<td>Lore, Veronica “Ronnie”</td>
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<td>Sweet, Susan</td>
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### Central Administration Staff: (alpha order)

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<td>LaPenta, Christina</td>
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<td>973-281-3467</td>
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<td>Torres, Jose</td>
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### Psychiatry Administration

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<th>Office</th>
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<tr>
<td>Anthony Tamburello</td>
<td>856-459-7000 x8333</td>
<td>609-410-0266</td>
<td>609-324-3215</td>
<td>tamburac</td>
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### Mental Health Clinician Administrators

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<tr>
<td>Mitch Abrams</td>
<td>973-465-0068 x4242</td>
<td>917-887-5206</td>
<td>732-396-6920</td>
<td>abramsmsi</td>
</tr>
<tr>
<td>Harry Green</td>
<td>856-459-7224</td>
<td>732-512-8846</td>
<td>609-229-0688</td>
<td>greenha</td>
</tr>
<tr>
<td>Marci MacKenzie</td>
<td>x5216</td>
<td>201-407-3097</td>
<td>732-396-6767</td>
<td>mackenna</td>
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<tr>
<td>Ellen Zupkus (JJC)</td>
<td>609-324-6296</td>
<td>201-407-3117</td>
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### Regional Medical Directors

<table>
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<tbody>
<tr>
<td>Hesham Soliman</td>
<td>x5233 or 609-298-0500 x1451</td>
<td>609-238-0513</td>
<td>856-223-2320</td>
<td>solimahe</td>
</tr>
<tr>
<td>William Briglia</td>
<td>856-459-7000 x7221</td>
<td>856-701-6362</td>
<td>856-223-2320</td>
<td>brigliwaj</td>
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<tr>
<td>Sharmalie Perera</td>
<td>732-574-2250 x8305</td>
<td>609-238-0993</td>
<td>609-229-0675</td>
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### Regional Schedulers

<table>
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<tr>
<td>Rebecca Cozzens</td>
<td>856-459-8034</td>
<td></td>
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<tr>
<td>Samantha Pezzella</td>
<td>856-459-8753</td>
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<td>pezzelss</td>
</tr>
</tbody>
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**TRAVELLING / OFF-SITE CENTRAL ADMINISTRATION PERSONNEL**

### Psychiatry Administration

- Anthony Tamburello 856-459-7000 x8333 609-410-0266 609-324-3215 tamburac

### Mental Health Clinician Administrators

- Mitch Abrams 973-465-0068 x4242 917-887-5206 732-396-6920 abramsmsi
- Harry Green 856-459-7224 732-512-8846 609-229-0688 greenha
- Marci MacKenzie x5216 201-407-3097 732-396-6767 mackenna
- Ellen Zupkus (JJC) 609-324-6296 201-407-3117 zuypkusel

### Regional Medical Directors

- Hesham Soliman x5233 or 609-298-0500 x1451 609-238-0513 856-223-2262 solimahe
- William Briglia 856-459-7000 x7221 856-701-6362 856-223-2320 brigliwaj
- Sharmalie Perera 732-574-2250 x8305 609-238-0993 609-229-0675 pererash

### Regional Schedulers

- Rebecca Cozzens 856-459-8034 cozzennen
- Samantha Pezzella 856-459-8753 pezzelss

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Print & Save!
University Correctional Health Care

c/o NJ Department of Corrections
Bates Building, 2nd Floor
Whittlesey Road & Stuyvesant Avenue
P.O. Box 863
Trenton, NJ 08625
Phone: (609) 292-4036
Fax: (609) 341-9380

Employee Assistance Program
1-866-EAP-UBHC (1-866-327-8242)
http://ubhc.rutgers.edu/eap/

Don’t be shy!
Have an idea for a future publication, one time article or interested in becoming a regular contributor to the UCHC Newsletter? Please let us know!

Send all news correspondence to:
UCHCnews@ubhc.rutgers.edu

Editor-in-Chief: Mechele Morris, PhD
Mechele.Morris@rutgers.edu

Production Editors: Jennifer VanEmburgh
Jenn.VanE@rutgers.edu
Shirley Lee
Shirley.Lee@rutgers.edu

EAP is just a phone call away...

Did you know that anyone in your household is eligible to use the EAP?

All services are provided by your employer and free to you and the members of your household.

All services are confidential.

No information is shared with anyone without a written release from you.

Individuals and couples are seen for a variety of reasons such as: personal difficulties, relationship concerns, anxiety, depression, grief, stress and substance abuse.

We can help with family issues such as: parenting, single parenting, blended families and elder care.

Whatever your concerns, we are here for you.

Submit articles by November 15th for the next Newsletter
UCHCnews@ubhc.rutgers.edu
Ongoing UCHC Continuing Education Log

Year: ________

Name: ____________________________  Site: ____________________________

Position: __________________________

*** PLEASE PRINT CLEARLY***

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Once you complete this form submit a copy to your site Data Control Clerk/Secretary for entry into the UCHC Database.

Keep a copy (along with attendance verification for each activity) for your personal records.

Note: Staff meetings can be included as continuing education activities provided a signed attendance log is maintained.
REGISTRATION FORM

TO ATTEND THE FAIR

2016 Performance Improvement Fair

“We Care, We Heal, We Teach, We Improve”

12:30pm to 3:30pm

Name
Title
Facility
Phone
Email