Newark Beth Israel Medical Center & Children’s Hospital of New Jersey
Newark, New Jersey

Position Specification

Vice President/Chief Nursing Officer

CONFIDENTIAL

Prepared by
Christine Mackey-Ross, RN
C. Scott Sette
February, 2012

This Position Specification is intended to provide information about Newark Beth Israel Medical Center and the position of Chief Nursing Officer. It is designed to assist qualified individuals in assessing their interest.
Opportunity Summary – Renaissance and Renewal

In less than five years, Newark Beth Israel Medical Center (NBIMC) & Children’s Hospital of New Jersey (CHoNJ) has gone from a precarious fiscal position, to one with an operating margin of 5%, capable of sustaining and growing its offerings to the patient populations that it serves. This would be a huge success story for any institution, but for one with a large vulnerable patient population offering some of the most complex health services in the state (CMI 2.0), it is remarkable. NBI accomplished this goal while winning accolades for outcomes, quality and safety metrics and patient satisfaction from a variety of nationally recognized sources.

Is it a challenging urban environment? Does it still operate with great attention to financial performance? Is the push to be better constant? Yes, to all of these questions. However, when you enter NBIMC & CHoNJ, your immediate impression is one of friendliness and willingness to go the extra mile to help a patient, a visitor, or a colleague. NBIMC & CHoNJ is truly a place where miracles happen: this year saw the first heart transplant patient to deliver twins, anywhere in the country.

Nurses at NBIMC & CHoNJ are highly educated, with 63% prepared at the BSN level. A professional advancement model ensures ongoing development of new skill sets. The Magnet© journey has commenced, with a gap analysis underway. Overarching councils’ such as professional practice, are in place, but have not yet extended down into the individual unit level. Collegiality with physicians is evident and nursing competency is universally regarded as stellar.

NBIMC & CHoNJ is seeking a nurse executive who wants to advance patient care and professional nursing practice in collaboration with other committed colleagues; professional services, physicians, administrative leadership, medical and nursing trainees. Building on a solid foundation, this executive can continue to develop culture, strengthen the directors and managers, be another voice for patient care where decisions are made, maintain financial viability, increase the academic output and connect NBI at the national level.

This position is best suited for an individual who thrives in a high energy, multi-focal complex environment. Track record of successful leadership in commensurate settings required. Other contributors to success would be strong financial skills, high emotional intelligence, collaborative and transparent style, comfort level with high expectations and standards and the drive to attain them.
Barnabas Health Overview

Barnabas Health provides treatment and services for more than two million patients each year: 198,000 inpatients and Same Day Surgery patients; 452,000 Emergency Department patients; and 1.5 million outpatients; and delivers more than 18,300 babies annually. Its 18,200 employees, 4,600 physicians and 445 residents and interns are united in a mission to deliver the highest quality of care in the best possible environment.

Among the nationally renowned services are: New Jersey’s only certified burn treatment facility, world-class cardiac surgery services for adults; the oldest, most experienced heart transplant program in New Jersey, ranked by volume in the top 5 in the nation; the only lung transplant program in New Jersey; one of the country’s most comprehensive robotic surgery services; six nationally certified chest pain centers; accredited certified comprehensive and primary stroke centers; along with two kidney transplant centers which are in the top 10 of 240 programs in the country.

Included in the system are:
- Clara Maass Medical Center in Belleville;
- Community Medical Center in Toms River;
- Kimball Medical Center in Lakewood;
- Monmouth Medical Center in Long Branch;
- Newark Beth Israel Medical Center & Children’s Hospital of New Jersey in Newark;
- Barnabas Health Behavioral Health Center in Toms River; and
- Saint Barnabas Medical Center in Livingston.

The System also includes the Barnabas Health Outpatient Centers with the Barnabas Health Ambulatory Care Center in Livingston and the Saint Barnabas Family Imaging and Breast Center in Bedminster; ambulatory care facilities, a state-wide behavioral health network and comprehensive home care and hospice programs.

Barnabas Health has created an affiliation agreement with the University of Medicine and Dentistry of New Jersey, School of Medicine, which allows for the development of clerkships and other clinical instruction opportunities for medical students at Saint Barnabas Medical Center and Newark Beth Israel Medical Center. The agreement also provides opportunities for research collaboration between the institutions.

Throughout Barnabas Health, its dedicated physicians, nurses and health professionals are committed to providing the highest quality of patient care and health education to the community and the region.
**Quality Focus**

At Barnabas Health, "I Am Quality" is the promise to you. It's the personal commitment to deliver the best care to patients, each and every day.

These days everyone claims to provide "quality healthcare." Barnabas Health has won numerous accolades and recognition for clinical excellence and extraordinary patient care, but is constantly striving to attain even greater quality outcomes.

To guide those efforts, a framework has been built to ensure patients' healthcare outcomes are consistent with best practices and personal choice and that all staff is aware of their role in attaining the highest levels of quality.

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**Newark Beth Israel Medical Center & Children’s Hospital of New Jersey Overview**

**Mission**

The spirit that infuses NBIMC and Children’s Hospital of New Jersey (CHoNJ) is its commitment to excellence. Its mission is to achieve this excellence through:

- The delivery of primary health care to all who need our service
- The provision of health care to patients drawn to the medical center because of specialty capabilities
- Meeting the undergraduate, graduate and continuing educational needs of health care professionals
- Education of those entering health care professions
- Physicians and staff, dedicated to compassionate care and healing, who enhance skills through education and research.
- The delivery of safe, clinically appropriate care in an environment focused on improving patient safety through a proactive approach
- Interacting with the highest integrity and commitment to regulatory compliance

**Vision**

NBIMC and CHoNJ will be the health care delivery system of choice, which provides outcomes demonstrating the highest standards of clinical practice and customer satisfaction.

**Values**

- **Culture of Responsibility:** Our employees take care of you. That means you can count on asking and receiving the information you need, the care you deserve, and a helpful, willingness to deliver care, no matter which Barnabas Health facility you visit.
Continuous Improvement: We listen to our patients, medical staff and employees, and analyze our own performance. We strive to continuously grow and improve care by applying best practices and developing new ways to deliver on excellence.

Culture of Quality: We not only look for ways to improve, we reward our employees and staff by recognizing outstanding care, excellence in clinical programs, extraordinary patient outcomes and bold leadership.

Medical Center

NBIMC, a 673-bed regional care, teaching hospital established in 1901, provides comprehensive health care services to its local communities and is a major referral and treatment center for patients throughout the northern New Jersey metropolitan area.

With more than 800 physicians, 3,500 employees and 150 volunteers, the Medical Center has over 250,000 outpatient visits and 26,500 admissions annually. It is one of two hospitals in New Jersey where heart transplants are in the top 5 by volume in the Country performed and the only hospital in New Jersey certified to perform lung transplants.

The Medical Center has New Jersey's most comprehensive Robotic Surgery Center; the State's first accredited Sleep Disorders Center; one of the largest electrophysiology programs in New Jersey; kidney transplantation; the largest hospital-based dental program in New Jersey and The Barnabas Health Heart Center at Newark Beth Israel Medical Center, which offers the best in cardiology services and cardiac surgery programs. In 2011, 63 heart transplants were performed here, which ranks as most in the state.

The hospital also offers the nationally recognized Pacemaker & Defibrillator Center; Frederick B. Cohen, MD, Comprehensive Cancer and Blood Disorder Center; The Center for Geriatric Health Care; and a Regional Perinatal Center, offering the highest quality maternity care for both normal and high-risk pregnancies.
Newark Beth Israel Medical Center is also home to Children's Hospital of New Jersey, the state's premier children's health facility; Children's Hospital provides state-of-the-art care in nearly 30 pediatric subspecialties. Treating ill and injured children from newborn to adolescent years, Children's Hospital also initiates preventive programs that promote wellness in the community.

As a hospital devoted only to children, Children's Hospital provides an atmosphere of caring and warmth that compliments the extraordinary medical care that is delivered by medical and surgical specialists who are all dedicated exclusively to children's health. Among the hospital's comprehensive inpatient and outpatient pediatric services are a state-designated Regional Perinatal Center, Pediatric Intensive Care Unit, Pediatric Emergency Department, neonatal Sudden Infant Death Syndrome (SIDS)/Apnea Center; Valerie Fund Children's Center for Cancer and Blood Disorders; Neonatal Intensive Care Unit with New Jersey's only pediatric ECMO unit, HIV/AIDS treatment for children, and a Spina Bifida program. A 19-bed critical care unit, expanded Child Life programs, meditation areas and a resource room for parents are also part of the Children's Hospital.
Newark Beth Israel Medical Center & Children's Hospital of New Jersey
Vice President/Chief Nursing Officer

Newark Beth Israel by the Numbers

<table>
<thead>
<tr>
<th>Newark Beth Israel</th>
<th>FY Last</th>
<th>FY/YTD Current</th>
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<tbody>
<tr>
<td><strong>Financial Data</strong></td>
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<tr>
<td><strong>Revenues</strong></td>
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<td>Net Patient Revenues</td>
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<td><strong>Operating Data</strong></td>
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<tr>
<td>Licensed Beds</td>
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<td>Operating Beds</td>
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<tr>
<td>Average Daily Census</td>
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<tr>
<td>Admissions</td>
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<td>Patient Days</td>
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<td>ALOS – Hospital Wide</td>
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<td>Total Paid FTEs</td>
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<tr>
<td>Case Mix Index, Medicare</td>
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<td>FTEs/AOB</td>
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<tr>
<td><strong>Other Data</strong></td>
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<tr>
<td>Payor Mix</td>
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<tr>
<td>Medicare</td>
<td>24%</td>
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<tr>
<td>Medicaid</td>
<td>16%</td>
<td>13%</td>
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<td>Commercial/Managed Care</td>
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<td>52%</td>
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<td>Self-Pay</td>
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<td>11%</td>
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<td>Percentage IP Business (hospital)</td>
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<td>75%</td>
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<td>Percentage OP Business (hospital)</td>
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<td>25%</td>
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<tr>
<td><strong>Nursing Data</strong></td>
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<tr>
<td>Staff Beds</td>
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<td>RN FTE</td>
<td>711.75</td>
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<td>1,327.62</td>
<td>1,261.94</td>
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<td>Percentage BSN</td>
<td>58%</td>
<td>63%</td>
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<td>Turnover Rate</td>
<td>9.52</td>
<td>8.91</td>
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<tr>
<td>Vacancy Rate</td>
<td>1.92</td>
<td>2.18</td>
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<tr>
<td>Overall Tenure (yrs)</td>
<td>11.5 yr</td>
<td>11.4yr</td>
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</table>
Medical Staff

Physicians, employed & voluntary, are actively involved in quality, safety and the aspects of their practice which impact hospital operations and profitability. Almost 60% of the admissions to the institution begin in the Emergency Department and bed management and throughput is an ongoing process.

Nursing is universally held in high regard by the medical staff and considered technically very strong, especially in the subspecialty areas. Physician leaders are advocates for the Magnet© journey, currently in its early phases, for which there is a dedicated coordinator. Many of those interviewed expressed a desire for further advances in collaborative practice and cross-educational offerings.

The CRIMSON© program is in early implementation and will be utilized to maximize departmental and individual physician performance around fiscal, quality, safety and satisfaction measures.

Length of stay (6.9) continues to be an improvement target, complicated by difficult patient placement. There are currently about 190 residents & fellows who have NBI as a teaching site.

Department of Nursing

The department at NBIMC & CHoNJ is led by the CNO, supported by 12 Directors.

There is a system Senior Vice President, Patient Care Services position, to which this position has a dotted line reporting relationship held by Ms. Nancy Holecek, a long standing Barnabas Health leader. Other corporate system resources, formulated in a Nursing Executive Council format, available to the CNO include individuals dedicated to: Recruitment & Retention, Education, Practice & Quality and Finance & Budgeting.

As a system, much work has been done to standardize nursing policies and practice between member institutions. Education, orientation and ongoing competency preparedness are corporately driven functions. NBI is just beginning the transition from a hospital decentralized education model to a hospital centralized approach, the ten APNs will retain the local CNO as their direct line of accountability. This approach has been particularly effective in assuring timely completion of annual recertifications and core competency evaluation. In addition, it will create consistency of role definition and protect the unit-based APNs from being utilized in direct patient care. Orientation is a sophisticated process that takes into consideration the experience of the new employee, plus the area of specialization to which they are being assigned.

Workforce management is a strategic process, with tight controls placed on productivity and staffing, but with no compromise to quality. The Kronos system capabilities are being expanded. There is a focus on forecasting needs based on market trends and a vibrant program for professional advancement and the development of internal talent is in place. There are no bargaining units representing professional nursing staff at NBIMC & CHoNJ. Nurse’s aides and unit clerks are represented by 1199 & the operators & engineers by local 68.
NBI is attractive to nurses for a variety of reasons: its academic nature, the warmth of its personnel, the complexity and range of services offered and the constant focus on quality improvement. Like many other academic centers, turnover occurs at the 2-3 year mark, since those who have spent time at the institution are sought after recruits for institutions all over the state. Turnover at NBI is no higher than any other member facility, despite the urban setting and the complexity of the environment.

A nursing model was developed in conjunction with representatives from throughout the system. There is much sharing of best practices among nurse leaders within the system. The nursing research at NBIMC has begun and is being expanded. It follows the Hopkins model and has resulted in publications and presentations. There are several units in the system engaged in TCAB work, including the surgical unit at NBIMC & CHoNJ.

Barnabas Health selected the Cerner platform for the electronic health record and NBI is slated to be one of the last implementations, scheduled for February, 2013. Much of current documentation, with the exception of the ED and OR, is still done in a paper format.

Patient satisfaction is a key strategic imperative for the system and NBI has often led the enterprise with their scores. The global target is for all hospitals, in all areas to be in the 90th percentile. The Studer model informally provides the framework for this initiative. Nurses are involved in “rounding with a purpose” and the executive team, led by the President & CEO’s example, does engage in regular rounding. Nurses are also implementing bedside reports. Fourth quarter HCAPHS were the best of 2011, but still have pockets that need improvement to meet the 90% goal.

Employee satisfaction is carefully monitored and supported by an internal blog, which is a useful social media tool both to hear employee concerns and disseminate information.

The caliber of the Nursing Department was affirmed by an October, 2010 JCAHO survey in which there were no recommendations for the Provisions of Care Chapter.
The Position

Overview

Reporting to the President & CEO of NBIMC & CHoNJ, the Vice President/Chief Nursing Officer serves as a member of the senior management team for NBI. In this role he/she is accountable for participating with senior leaders in establishing the strategic plan for the medical center, overall financial sustainability, the quality and patient safety outcomes of patient care and growth and integration of the healthcare delivery system.

The SVP/CNO has oversight for the development of the leadership roles for nursing and the structure of the department. She/he ensures adherence to the policies, protocols and standards of practice for the discipline of nursing in all areas of the medical center. Operational responsibility includes budget preparation, employee and labor relations, quality and patient safety outcomes for all inpatient care units and collaborative responsibility in the emergency departments. In addition he/she is responsible for appropriately integrating nursing practice, education and research within NBIMC & CHoNJ.

The SVP/CNO, together with colleagues, assures that respectful, competent, compassionate patient care is uniformly provided to patients. Working with other System colleagues, Medical Center executives and Physician Service Line Leaders, he/she works to achieve institutional goals and objectives.
Goals and Objectives – Measures of Success

The following, listed in no particular order of significance, have been identified as areas of priority for the new executive in the first 12-18 months of their tenure:

Relationships/Culture

- Gain a working knowledge of all the component parts of NBIMC & CHoNJ and its leadership team.
- Establish presence and credibility with the NBIMC & CHoNJ President & Chief Executive Officer, administrative colleagues, medical staff, nursing staff and its leadership, and other key constituents.
- Quickly establish an effective partnership and communication mechanisms with the President & CEO.
- Continue to hardwire a culture of customer service to patients, their families and professional colleagues.
- Visible and engaged as the nursing executive; seen as a nurse advocate.
- Be a visible, vibrant champion for best patient experience, highest quality of care and a performance improvement culture.

Operations

- Evaluate the current nursing structure and its leaders, redefining roles and responsibilities, as necessary, mentoring and developing where able, replacing where essential.
- Establish strong, engaged, accountable Managers and Directors, perceived as resources by staff and by physicians.
- Assess skill mix and role definitions to maximize appropriate utilization of professional and supporting staff. Encourage an integrated team approach that recognizes the contribution of those at all levels.
- Engage administrative and physician leaders of service lines to collaborate and coordinate on policies, procedures and processes of care.
- Continue the integration of technology into nursing process, maximizing use of the Cerner EMR, scheduled for implementation in February 2013.
- Attain the target goals for performance on HCAHPS, NDNQI, other publically reported metrics and institutional goals for quality, safety and outcomes.
- Ensure nurses in outpatient and procedural areas are integrated into nursing’s educational and professional practice initiatives.
- Ensure the promotion of nursing excellence and recognition in all areas, not just specialty care units.
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- Continue to hardwire a continual readiness approach to regulatory compliance.

Finance

- Meet budget, productivity and growth targets.
- Establish a collaborative relationship with the CFO; improve the financial acumen of nursing leadership to increase cost-effective care delivery; engagement in budget preparation, consistent variation management, fluency utilizing productivity metrics and flexible staffing and mastery of business plan development.
- Collaborate to improve patient throughput and reduce length of stay.

Strategic

- Engaging nursing leadership and staff, create, communicate and implement a nursing vision and strategic goals, aligned with those of the system and hospital.
- Work to advance a collaborative practice model, encouraging increased dialogue, education, research and publication with physicians and other professional colleagues.
- Assess the status of the Magnet© journey and create action plans for continued progress.
Candidate Qualifications

The following describes the desired profile for the new Vice President/Chief Nursing Officer at Newark Beth Israel Medical Center:

Education

- Licensed or able to gain licensure in the state of New Jersey.
- Minimally prepared at the graduate level. Acceptable areas of study; nursing, public health, finance, business, healthcare administration, legal. If undergraduate degree is not in nursing, graduate degree in nursing is required.

Skill Set

- Vision and strategic planning: Capable of inspiring staff to engage in developing and implementing a sustainable, embedded vision for nursing based on continued development of professional practice.
- Operations orientation: Can work to assist Directors and others in the attainment of operational targets.
- Relationship based: Creates collaborative partnerships with key constituents (peers, direct reports, physicians, and nursing staff) that result in an engagement-driven approach to strategic planning, goal attainment and daily operations.
- Change management: Can lead an organization through a transformational process, managing anxiety, resistance, and the inevitable conflict that arises from such situations. Capable of “selling” the vision and engaging key stakeholders in the process.
- Systems thinker: Capable of visualizing the linkages between component parts of the whole and “connecting the dots” that lead to the desired outcome. Advocates for nursing, but holds a global enterprise viewpoint.
- Preventive Labor Relations: Maintain non-union status of RN staff in a region where most RN's are unionized.
- Mentor: Capable of educating and guiding a leadership team to increased levels of performance. Patient and compassionate approach, but simultaneously holds individuals accountable for their performance.
- Performance improvement: Utilizes techniques such as LEAN, Six Sigma, rapid cycle change and others to effect sustainable process improvement.
- Physician relationships: Visible, approachable and transparent to practitioners. Works towards development of a collaborative practice model. Engages Chairs and other physician leadership in decision making.
Financial acumen/business skills: Able to prepare, read and analyze financial reports; fluent in budget preparation and variance analysis; expertise in productivity systems and staffing models. Always brings proposals forward with the required financial documentation for justification and discussion.

Information systems: Experience working with IS applications as they relate to the clinical areas and to the organization as a whole. Experience with Cerner would be ideal. Understands the need to integrate technology into practice, but not at the expense of the effectiveness of either.

Benchmark management: Familiar with multiple approaches to benchmarks; balanced scorecard, core measures, HCAHPS, NDNQI and can establish, manage and improve performance in those areas, encompassing quality, safety and satisfaction. Metrics driven.

Professionally integrated: Involved with regional and national professional associations. Keeps self current with national trends in the healthcare industry and in nursing practice.

Cultural competence: Comfortable leading a multi-ethnic workforce in an urban environment.

Leads through influence: does not require direct authority to engender change. Capable of building strategic partnerships with others who are integral to success.

Personal Style/Characteristics

Style: Leadership presence; individual who likes to be visible and, through rounding, is known to members of the patient care team; in touch with nursing and is accessible, with a roll-up-your-sleeve attitude and a reputation for follow-through; holds individuals accountable, mentors where needed, seeks physician involvement and alignment; fosters a sense of teamwork; optimistic and enthusiastic; results oriented; transparent with information; extraverted and confident, with ego in check; mature, calming, stabilizing effect within the organization.

Values: Has high personal standards of professionalism and infuses those into the organization; trustworthy, transparent with information, high level of personal integrity and honesty; passionate about the organization’s mission and providing the best for patients and their families; known for strength of character. Restless, not satisfied with the “status quo.”

Communication: Excellent written and verbal communication skills in large and small groups and with a variety of constituencies; able to modify approach to target audience; good at instilling horizontal and vertical communications throughout the department; relationship builder with all stakeholders; consistency of message, regardless of audience; transparent when able; participatory decision making style, but decisive when necessary; understands the varying levels of education and competency, modifying the message accordingly; solid interpersonal and relational skills. Able to both lead and teach others how to have “critical conversations.”

Autonomous: works with little direction, seeks counsel when necessary.
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- Quality/Service Champion: motivated by a desire to “raise the bar” for patients, employees, and physicians. Passionate about relentless excellence.
- Energy/Presence: strong work ethic and a willingness to “take the extra step.” Individual who gains momentum and strength from interaction with others.
- Politically Astute: diffuses “turf” issues. Assists in the implementation of key initiatives by being aware of which leaders need to participate in and support a decision, and then working to ensure their endorsement and engagement. Respectful of NBIMC & CHoNJ history, but not paralyzed by it.
- Collaborator: Seeks out and engages the multiple stakeholders involved in decision making, ensuring inclusion of individual positions, but advocating and ensuring the best outcome for the entire enterprise, not any individual component. Leads across multi-disciplinary teams.
- Problem-solver: becomes a “go-to person,” known for action and outcomes, without being reactive.
- Information seeking: will reach out to others and utilize corporate resources.
- Comfortable with complexity: able to navigate competing priorities and matrix accountabilities.
- Time sensitive: responds to deadlines, comfortable with a rapid pace of change and the relentless pursuit of excellence.
The Community

Newark is located in the heart of New Jersey's Gateway Region, approximately 8 miles west of Manhattan. Its location near the Atlantic Ocean on Newark Bay has helped make its port facility, Port Newark, the key container shipping facility for the New York metropolitan area, and the largest on the East Coast. It is the home of Newark Liberty International Airport, the first municipal commercial airport in the United States, and one of the busiest today. Newark is headquarters to numerous corporations such as Prudential Financial and PSEG. It is home to several universities including University of Medicine and Dentistry of New Jersey, Rutgers University, New Jersey Performing Arts Center, professional hockey and basketball teams, and New Jersey Institute of Technology, as well as numerous cultural and sports venues.

As of the 2010 United States Census, there were 277,140 people, 94,542 households, and 61,641 families residing in the city. The population density was 11,458.3 inhabitants per square mile. The racial makeup of the borough was 26.31% (72,914) White, 52.35% (145,085) African American, 0.61% (1,697) Native American, 1.62% (4,485) Asian, 0.04% (118) Pacific Islander, 15.22% (42,181) from other races, and 3.85% (10,660) from two or more races. Hispanic or Latino of any race was 33.83% (93,746) of the population.

Newark has a humid subtropical climate that borders on humid continental, with cold winters and hot, humid summers. Its proximity to the ocean has a moderating effect. Also, being near to the Atlantic Ocean means Newark tends to have warmer winters than cities at a similar latitude or even somewhat further south, such as Chicago, Columbus, Pittsburgh, and St. Louis. The January average is 31.3 °F, and temperatures down to the 15 °F range are not uncommon, though they rarely fall to 0 °F or below. With a seasonal total of 26 inches, snow cover does not usually remain for long. Spring in the area is of reasonable length and relatively devoid of temperature extremes. Summers are warm and humid, with a July average of 77.2 °F, and highs exceeding 90 °F on an average 25 days per year. Heat advisories are not uncommon during the summer months, particularly July and August, when temperatures can reach 100 °F with high humidity. The city cools off at a moderate pace during autumn.

Newark has over 300 types of business. These include 1,800 retail, 540 wholesale establishments, eight major bank headquarters (including those of New Jersey's three largest banks), and twelve savings and loan association headquarters. Also, Newark is the third-largest insurance center in the U.S., after New York City and Hartford, CT.

For more information about Newark, please visit the following sites:

http://www.ci.newark.nj.us/
http://en.wikipedia.org/wiki/Newark,_New_Jersey
Timeline and Interview Process

The preliminary timetable for completion of the CNO search at Newark Beth Israel Medical Center:

<table>
<thead>
<tr>
<th>EVENT</th>
<th>TIME FRAME</th>
</tr>
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<tbody>
<tr>
<td>Project start-up</td>
<td>January 12-13, 2012</td>
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<tr>
<td>Candidate development by Witt/Kieffer</td>
<td>January – March</td>
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<tr>
<td>On-site candidate paper review meeting</td>
<td>Week of March 12 or 19</td>
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<tr>
<td>1st round candidate interviews on-site with 4 or 5 individuals</td>
<td>Late March - Early April</td>
</tr>
<tr>
<td>Additional referencing of finalist candidates</td>
<td>April</td>
</tr>
<tr>
<td>2nd round candidate interviews on-site with 2 or 3 individuals</td>
<td>Late April</td>
</tr>
<tr>
<td>Selection of candidate of choice and negotiation of offer</td>
<td>Late April – Early May</td>
</tr>
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Selected candidates should plan to hold the above dates in the event they are invited by the committee to participate in the interview process.
Procedure for Candidacy

The search process is currently underway and will continue until the position is filled.

Please direct all nominations and resumes to Christine Mackey-Ross, RN and Scott Sette via email to: CNO_NBIMC@wittkieffer.com. Electronic communication preferred; written communication may be sent to:

C. Scott Sette                      Christine Mackey-Ross, RN
Witt/Kieffer                          Witt/Kieffer
10375 Richmond Ave., Ste 1625        7733 Forsyth Blvd., Ste 2025
Houston, TX  77042                    St. Louis, MO 63105
713/266-6779                          314/862-1370

"Newark Beth Israel Medical Center is an Equal Opportunity Employer."

Discover Thought Leadership at www.wittkieffer.com

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