

Princeton House Behavioral Health

today

Making the
Kitchen a

FOOD

PHARMACY

page 3

Also in this issue:

**Cultivating Healing
Through Spirituality**

page 2

**Women's Art Exhibit
Showcases Collaboration**

page 4

**Gaining Dual Expertise
Through Nursing Residency**

page 6

Altered Books Hold Emotions

page 8



Cultivating Healing Through Spirituality

Sometimes behavioral health providers are hesitant to explore spirituality with patients because they may not feel well versed in discussions about religion. But spirituality and religion are not necessarily the same.

Throughout history, humans have engaged in religion through its structure, customs, and rituals to access spirituality. This is explicit spirituality, according to Imam Jawad Bayat, MA, ACPE, Certified Educator and Associate Director for Clinical Pastoral Education at Penn Medicine Princeton House Behavioral Health. Implicit spirituality, however, is something more personal that relates to the human experience – and it's worth exploring as part of the healing process.

"At its core, spirituality is something beyond your physical reach that conveys a sense of meaning, connection, or purpose in your life," explains Bayat. "I tell patients that if they've felt seen or heard, had a sense of warmth, or felt a connection to themselves, others, or something greater than themselves – that's the texture of spirituality."

"Implicit spirituality looks different for everyone," he adds. "You don't have to be somewhere specific to experience it, because the common denominator in every space and setting is yourself."

Through a Spirituality Group and more in-depth individual sessions, Bayat helps patients understand that spirituality is accessible to them. He empowers patients to recognize how they can use spirituality and interconnectedness in their journeys of recovery, helping them uncover resources within themselves to transform pain and suffering.

"These explorations help patients reveal their own sense of agency to know that they can change," says Bayat. "Once people understand this, they don't have to suffer in the same way they once did, which can be very liberating."

Opening the Door to Spirituality

When behavioral health providers open the door to exploring spirituality, the result can be more enriching discussions with a broader view of the whole person. Here's how, according to Bayat.

Start with your own self-inventory about spirituality. What brings meaning to your life?

Establish a safe space for discussion by including an intake question such as, "Do you see yourself as a spiritual or religious person?"

Maintain a curious approach in future sessions. Questions might include:

What sustains you?

When have you felt a sense of connection?

Where do you find peace or hope?

Check out resources such as *Spirit in Session: Working with Your Client's Spirituality (and Your Own) in Psychotherapy* by Russell Siler Jones.

Dig Deeper with our Podcasts

Visit princetonhouse.org/podcast to hear more from Bayat about spirituality and mental health.



Making the Kitchen a FOOD PHARMACY

When inpatients are admitted at Princeton House, maintaining good nutrition is often far down on their list of priorities. But throughout their stay, the nutrition team helps them re-engage with healthy foods and add valuable nutrition advice to their behavioral health toolkit.

“Eating regularly and staying hydrated means more consistent energy, better clarity, improved metabolism and medication absorption, and a better day overall – not to mention that serotonin production in a healthy gut can directly impact the brain,” says inpatient dietician Bhranti Desai, RDN.

Desai provides medical nutrition therapy for all inpatients, screens for nutrition risk factors, and coordinates any necessary interventions, including personalized support for those with food insecurities, eating disorders, food allergies, and medical conditions like diabetes. She facilitates weekly food therapy groups, keeping them simple and fun for participants. This includes the use of interactive modules available through The Gaples Institute, a nonprofit educational organization dedicated to advancing the role of nutrition in medicine.



Desai also collaborates with Director of Nutrition Support Mansi Parikh, MS, RDN, and Chef Robert Riccardi to ensure menu variety, cater to diverse tastes, and provide opportunities to explore new items, such as creole or tandoori foods.

“We’re helping patients rebuild the relationship they may have lost with food in diverse and flavorful ways,” says Desai, who often checks in with patients at mealtime to provide a supportive presence.

TOOLS TO USE BEYOND DISCHARGE

Inpatient care lays the groundwork for patients to maintain good nutrition beyond discharge. In fact, Desai recommends that patients view their own kitchen as a food pharmacy.

“Your kitchen can serve as a healing resource,” she says. “You can build on what’s there, and each small step translates into a positive health benefit. It’s not an all or nothing approach – rather, consistency matters.”



Desai provides patients with these tips for meal planning on a budget:

- ✓ Write down some food choices, aiming to hit all five food groups.
- ✓ Assess what’s in the refrigerator and add those ingredients to the list.
- ✓ Create meal ideas that incorporate both.
- ✓ Transition the information to a grocery list.
- ✓ Stick to the plan, even if it just covers a few days of the week.

“These approaches cut back on the number of items you need to buy at the store, while reducing the likelihood that you’ll opt for last-minute processed foods,” explains Desai.

She also suggests that patients:

- ✓ Use leftover vegetables to make soup.
- ✓ Check out local farmers’ markets for fresh ingredients.
- ✓ Buy frozen fruits and vegetables to use portions as needed without the risk of food going bad.
- ✓ Take advantage of digital resources like the recipe tool on myplate.gov.

“Patients leave Princeton House with menus and tips to use as a guide,” adds Desai. “We’re working to make healthy strategies accessible for the long-term.”

Art Exhibit

Highlights Return to



On the front door of the Princeton outpatient site, a colorful rendering of the Mona Lisa (*pictured left*) recently served as a welcoming entry point for patients with the words, “You are a masterpiece.” Inside, the walls and ceilings of offices, hallways, break rooms, and the lobby were filled with vibrant artwork produced by both patients and staff as part of an event celebrating the return of in-person treatment: the Women’s Program Art Exhibit.

Featuring the theme collaboration, the exhibit was coordinated by Senior Allied Clinical Therapist Jacqueline Pidich, LPC, ACS, LPAT, ATR-BC, ATCS, Primary Therapist Danielle Andersen, LAC, ATR-P, and master’s level Art Therapy Intern Katie-Lynne Lussier, with the support of Jamie Benjamin, MA, LPC, NCC, ACS, Clinical Manager of the Women’s Program at Princeton.

Art therapy is an integral component of each patient’s treatment plan at Princeton House – even continuing virtually throughout the pandemic. But now, patients are no longer limited to supplies they’d find in their homes. They’ve regained access to in-person collaboration and discussion along with a broad array of art supplies, including many donated by entities such as Pond Road Middle School in Robbinsville and Firmenich Inc. in Plainsboro.



Mobile created by Marisol Bonds, BSN, RN-BC with inspiration from patients



Patient artwork, including rocks collected on a mindful walk



Bird house created by a patient who identified Princeton House as their "safe space"



Positive affirmation collage

In-Person Treatment

Through a wings project (pictured below), patients expressed what they needed to fly in life, such as strength, resilience, and self-love. They learned new skills, including weaving, crocheting, paper quilling, and mask making. Collaborative projects included a kaleidoscope of flower mandalas and mobiles adorned with bright shapes.



Crochet art

"The process of creating artwork was very grounding for the team and for patients," says Benjamin. "This initiative set the tone that we're all working together toward the same wellness goals. The pieces came together to create something bigger than ourselves, and you could sense an elevation in mood as soon as we hung up the finished artwork."

“Art helps us come alive,” adds Pidich. “It’s visually stimulating, self-soothing, and self-motivating. Creating art requires trust in the process and a mindful focus on the present. Paired with the expertise of an allied health therapist, it supports individual treatment goals and can be empowering in the healing process.”



Spring-themed mobile created by staff



Turtle art created by a patient



Pictured with the wings project are (left to right) Danielle Andersen, Jacqueline Pidich, and Jamie Benjamin.



Collaborative artwork created by patients during "Mandala Mondays"

Nursing Residency Features Best of Both Worlds

Research shows that some new nurses may be hesitant to start their careers in psychiatric nursing as they're advised to first gain medical-surgical experience.¹ To meet this need and provide nurses with well-rounded expertise, Princeton House and Penn Medicine Princeton Medical Center have created a unique Hybrid Nurse Residency Program that features a combined psychiatric and medical-surgical rotation.

"It's an opportunity you don't see in many places," says Kari Mastro, PhD, RN, NEA-BC, FAAN, Director of Professional Practice, Innovation & Research for Penn Medicine Princeton Health. "Under Penn Medicine Princeton Health's umbrella, we have it all: the warmth of a community hospital paired with the innovation and growth that's inherent to our large, academic health care system."

Coordinated in partnership between Mastro and Robbi Alexander, PhD, APN, PMHCNS-BC, Administrative Director of Psychiatric Services at Princeton Medical Center, the 12-month residency program alternates between Princeton Medical Center's Medical Neurological Oncology unit and the Princeton House inpatient unit. New nurses work side-by-side with experienced nurses, receiving continuous support in an evidence-based practice setting.

The program also supports those who are interested in pivoting their careers to nursing, like Princeton House nursing assistant and driver Mavin Sakwa, RN.

"Working with nurse colleagues who are so passionate about their jobs has motivated me to join them," says Sakwa. "I'm gaining hands-on medical-surgical skills while still pursuing my interest in psychiatric nursing."

"There are no words to describe the people I work with," adds Johanna Dominquez, RN, a former Princeton House nursing assistant and residency program graduate who chose to maintain a role that alternates between the medical unit and psychiatric unit. "The support we receive here truly comes from the heart."



Why Psychiatric Nursing?

Here's how our own nurses feel:

“ Psychiatric nurses have a great gift: they learn how to formulate meaningful interpersonal connections that help patients and families move forward in life. Their primary tool? Themselves. They are the conduit for care. With this level of skill, you can go anywhere.”

— Robbi Alexander, PhD, APN, PMHCNS-BC

“ No matter where you serve as a nurse, everything you do involves tending to mental health. Having the foundation to care for both the mind and the body is so important.”

— Kari Mastro, PhD, RN, NEA-BC, FAAN

“ One of my first patients recently recognized me and told me what a difference I made in her life. That alone makes it all worth it.”

— Johanna Dominquez, RN



Princeton House receives excellent patient satisfaction scores for nursing!
Interested in joining our team? Visit princetonhouse.org/bhcareers.

1. Research includes several studies with Robbi Alexander et al.

Nurse Resident and Mentor to Present at APNA



The American Psychiatric Nurses Association (APNA) has accepted abstract proposals from two Princeton House nurses for poster presentations at the APNA 37th Annual Conference, to be held October 4-7 in Lake Buena Vista, FL. Nurse resident **Allyson Quay, BSN, RN** (left) will present "Improving Interdisciplinary Communication and Patient Care Through the Use of a HIPAA-Compliant App," and her

"I'm fortunate to have this opportunity, and it's thanks to the support and resources available across Princeton House," says Quay. "It's an inclusive environment where the team focuses not only on patient care, but also on staff well-being and the progression of your career."

mentor, **Stacy Horowitz, BSN, PMH-BC, CARN** (right) will present "Caring for Those Who Care for our Patients: Peer-Led Interventions to Address Staff Nurses' Work-Related Stress." Both nurses collaborated with Robbi Alexander, PhD, APN, PMHCNS-BC, Administrative Director of Psychiatric Services at Princeton Medical Center, to develop their abstract submissions.

Inpatient Nurse Receives Excellence Award

As part of the annual Penn Medicine Princeton Health Nursing Excellence Awards, Princeton House inpatient nurse **Sheila Troiano, RN** received the Rosalyn L. Watts Award for Community/Patient/Family Relationships for exemplifying the award's criteria, including promoting the health of the community, supporting an inclusive culture, improving lives through selfless and compassionate acts, and cultivating a healing environment. In the words of her nominator, Troiano is a caring and empathetic nurse leader whose selfless dedication to patients is boundless. She can often be seen going the extra mile to navigate a challenge, provide soothing reassurance, and make the unit a welcoming, healing place.



Pictured right: Sheila Troiano, RN (right) with Karyn Book, RN, MSN, Chief Nursing Officer, Penn Medicine Princeton Health.



Firefighter Award Bestowed on New Peer Specialist

Thomas Nunn, who recently joined First Responder Treatment Services at Princeton House as a Peer Specialist, was honored by the New Jersey Firefighters Mutual Benevolent Association (NJFMBA) with the Captain Mark Virag Brotherhood Award in April. Named in honor of the late past NJFMBA Sergeant at Arms, the award is granted to an NJFMBA member who has gone above and beyond to aid fellow members during a fire or other dangerous situation.

Thomas Nunn (left) at the award ceremony with Mark Virag's family members, Connor Johnson and Karen Johnson-Virag.

Coming from generations of first responders, Nunn is a career firefighter/EMT with the City of Clifton and has hospital Emergency Department experience. As a Peer Specialist at Princeton House, he provides patient support and first responder outreach training.

"What first responders are exposed to on the job can have a profound impact on their lives," says Nunn. "At Princeton House, they can share their story and struggles with those who have been through similar experiences, which really hits home."



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Altered Books Tell the Story of the RECOVERY JOURNEY

In art therapy sessions at the Moorestown outpatient site, patients transform books into an art form that may hold their deepest emotions on any given day.

“Some patients are hesitant to journal, especially if another person has read their private thoughts in the past,” says Senior Allied Clinical Therapist Jill Gardner, ATR-BC, LCAT. “Altered books can serve as a safer container for the past trauma and strong emotions that have been held for so long by the body.”

Gardner makes special visits to a nonprofit organization called The Book Thing of Baltimore to source the free books, ensuring that the content and length are appropriate for patients. During art therapy sessions, she asks participants to select a book and create a collage with their name on a blank page. Next, she guides them to find a page that includes a word, phrase, or sentence that holds meaning for them, and highlight those words by painting the rest of the page black.

From there, patients can select various art supplies to transform pages of their book. Since the books are convenient, portable containers, they can also work on them at home and after discharge.

“I’ve had patients come back to show me their finished books with a great sense of pride,” adds Gardner. “These unique works of art tell a moving story of the recovery journey.”

Patient art throughout this issue shared with patients' permission

