Message from the President

My theme as APNA President is advocacy—each and every one of us needs to become an advocate for our specialty. For many, advocacy simply means an active engagement in dialogue with governmental legislators and regulators. While this is true, it is only the tip of the iceberg. More importantly, our message needs to be delivered to a much wider audience than a handful of legislators or regulators. We as psychiatric nurses know that language influences thought. How many times have we heard others describe mental health professionals as psychologists, social workers and psychiatrists? We are not in their thoughts, because we are not in their lexicon. We must be ever ready to remind others to include psychiatric-mental health nurses in their description of the behavioral health provider team. When we go to an educational meeting and there is not a nurse on the program, we need to ask why.

If there is a committee being formed at your hospital or health care organization, you should seek a seat at the committee. When we see stories or editorials about mental health in our local papers, we should write comments from the perspective of psychiatric nursing. If each of us does a small bit of advocacy in our local world, then together we will create a voice that cannot be ignored throughout the whole country.

At the national level we will continue to make the voice of psychiatric-mental health nursing (PMHN) heard. As your President I have been given unique and special opportunities to represent our organization and profession in a number of key and timely venues. In March I attended the annual meeting of the American College of Behavioral Health Leaders, formerly known as ACHMHAs (The American College of Behavioral Health Administrators). The room was electric as the meeting convened the day after the momentous Health Care Bill was signed. There are tremendous opportunities and challenges for the delivery of psychiatric-mental health care as this law is put into action through the regulatory process within the labyrinth of federal agencies.

On April 6 I was privileged to represent the APNA at a special reception co-sponsored by the Mental Health Liaison Group and Campaign for Mental Health Reform. APNA is an active member of both groups. The reception was held in honor of the induction of Pamela Hyde as the new Director of the Substance Abuse and Mental Health Administration (SAMSHA). Our presence at this meeting led to an invitation for APNA to participate in a special SAMHSA meeting on “Behavioral Health Workforce in Primary and Specialty Care Settings.”

At these meetings it was very apparent that the buzz is all about integrated care. Everyone is talking about how mental health and primary care must work together. The influx of 32 million people into the health care system is going to place a burden on the already overburdened system. The good news is that psychiatric nurses can play a key role in the diagnosis, treatment and recovery of these patients. The bad news is that not everyone fully appreciates the role of psychiatric nurses and the scope of what we can do. So then, what should we ALL do? Advocate, advocate, advocate—for our patients, ourselves, and our profession.

In that regard, I am pleased to report that APNA will once again have a visible presence at the upcoming 2010 annual meeting of the National Alliance on Mental Illness in Washington, DC July 1-5. APNA will have a booth in the exhibit hall and has been given a two hour block of time to conduct an “Ask the Nurse” session. APNA members Jean Robbins and Terry Shively will be leading this session on our behalf. It is through APNA’s presence and participation at such events that we can raise others’ awareness of psychiatric nursing.

When you advocate at your local level you will have the strength of the APNA committee system to assist you. Through our committee system we are engaging many members to study issues of importance to PMHN and to develop position papers, standards and programs that will advance our profession. This information is available to you and provides you with strong talking points when advocating at your local level. When you speak, you will speak with the collective wisdom and expertise of your 6,500 fellow members.

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Benefits & Services

APNA provides over 6,500 members with exceptional benefits to further their leadership potential and training opportunities.

Networking and Information Accessibility 24/7
- Stay informed with a free subscription to the print and online versions of our Journal of the American Psychiatric Nurses Association (JAPNA)
- Stay connected with the organization through our monthly newsletter, APNANews: The Psychiatric Nursing Voice
- Communicate and network with members using a members-only social networking tool called Member Bridge, including an extensive member directory, discussion forums, blogs, announcements, industry-related news, document-sharing, and more.
- Find position papers, publications and videos in our online Resource Center
- APNA CareerLine: Locate jobs specifically for psychiatric-mental health nurses
- Understand important issues related to psychiatric nursing with free issues of Counseling Points, available to download online

Professional Growth
- Overcome budgetary restrictions with online continuing education opportunities. Receive reduced rates on APNA programming available in your own home.
- Enhance your nursing knowledge with continuing education contact hours for psychiatric-mental health nursing
- Have an impact in your field by participating in volunteer committees, institutes, councils, and task forces
- Achieve recognition through the APNA Annual Awards
- Learn from nationally-recognized speakers and attend state-of-the-art workshops during the Annual and CPI Conferences
- Enhance your member experience by participating in local education and networking opportunities through your state chapter
- Apply for grants and scholarships from the American Psychiatric Nursing Foundation

Discounts
- Save $200 on general registration fees for the APNA Annual Conference and the Clinical Psychopharmacology Institute
- Download full-text articles of JAPNA at no cost (a savings of $25 per article)
- Reduced rates on APNA educational material
- Substantial special savings on certification, exams and review materials from the American Nurses Credentialing Center exclusively for APNA members.
- Discounts on Long Term Care coverage for yourself and your family members
- Special rates for nurses at the Walt Disney World Swan and Dolphin Resort
- Special rates for other association conferences and educational materials
- A 10% discount on publications offered by American Psychiatric Publishing, Inc.
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Our committees are called Institutes, Councils, Task Forces or simply committees. Regardless of the term, each is tasked with a specific area of PMHN to address and each is member-driven. At present there are 20 different committees operating in APNA. They range from the Board of Directors to reviewers of APNF Grant applications. Here are just a few highlights to give you an idea of the scope of activity in which your association is involved.

The Institute for Mental Health Advocacy (IMHA), chaired by Christine Tebaldi (MA) and Peg Halter (OH), has assigned members to monitor 26 separate organizations that impact PMHN and provide reports back to the IMHA. This information will be used to inform other APNA committees as they carry out their responsibilities. It will also be used to keep you informed as you advocate in your local area for PMHN. The more informed we are the more effective our message will be. We expect the number of organizations being monitored to grow over time.

The Tobacco Dependence Council, chaired by Daryl Sharp (NY) and Susan Blaakman (NY), is providing us with a wealth of resources that you can find on our website. The work of this council is gaining great respect for PMHN. The APNA was recently recognized by Steven Schroeder, MD, Head of the Smoking Cessation Leadership Center, as an example for all health care organizations to follow. Our leadership in this area is enhancing our reputation and image.

APNA is partnering with ISPN for the LACE (Licensure, Accreditation, Certification, and Education) Implementation Task Force. Together our organizations are looking to the future and how to best position PMHN to conform to the model but in a way that will assure viability for PMHN well into the future. This task force is comprised of 17 members on a Steering Committee and 88 members on an advisory panel, 72 from APNA and 16 from ISPN. It is co-chaired by APNA members Barbara Drew (OH), Pat Cunningham (TN), and ISPN member Mary Jo Reagan Kobinski. This group assures that the other nursing specialties involved in LACE are provided with the facts about PMHN to aid this larger group in making informed decisions about the future of advanced practice nursing.

Our newest Task Force, Recovery to Practice is being co-chaired by Georgia Stevens (MD) and Mary Ann Boyd (IL). This task force was put in place to submit a proposal to evaluate the current level of recovery practices engaged in by psychiatric nurses and to develop a national recovery curriculum for psychiatric nursing. We are pleased that APNA was selected as a recipient of a five year contract. We are also pleased that, in creating the RFP, SAMSHA set aside one of the five arms of this study for psychiatric nurses. The other four arms are psychiatry, psychology, social work and the consumer. A key component of this initiative is the development of a Consumer Advisory Panel (CAP) that will advise the APNA Board of Directors in matters involving consumers. APNA is now part of the nationwide consumer motto “Nothing about Us without Us”. I am serving as the board liaison to the CAP. There are currently 7 key nationally known consumers on the steering committee: Moe Armstrong, MA (CT), Gayle Bluebird, RN (FL), Eric Arauz, MA (NJ), Deborah Fickling, BS (NM), Holly Dixon (ME), Carol Kviler (NJ), Mary Jensen, RN, MA (IL). The full CAP will be comprised of 15 members. Watch the APNA website for ongoing updates. Involvement with consumers will provide us with a direct channel of information to help strengthen our programs and services.

There are many other activities that are ongoing but our space is limited, so here is a brief look into some future initiatives. In response to member requests, a Child & Adolescent Council is in the beginning stages of development. There are issues related to scope of practice, certification and work force development that this council will play a key role in addressing. Watch for a call for volunteers very soon.

Finally, as noted early in this message, integration with primary care is the new buzz. This has prompted the development of a new task force to look at the unique contributions made by psychiatric nurses in a variety of co-located, integrated, and other models in which psychiatric nurses are working in non-traditional settings. This will also involve a call for interested members. It will result in information that will be useful to you in your local area to help implement successful programs that will rely on PMHN.

Our future success depends on our collective efforts to speak with authority and passion about the role and unique contributions that we as psychiatric nurses play in the delivery of mental health services. It is a challenge, but we would not have become psychiatric nurses if we were not up to a challenge. Every day thousands of people benefit from our expertise and passion. Let's apply some of that same passion and energy to advance PMHN by collectively broadening the scope and influence of our national organization—the American Psychiatric Nurses Association.

Serving as your president is the greatest professional thrill of my life and I thank each and every one of you every day. Until the next newsletter...

Mary D. Moller

Mary D. Moller, DNP, APRN, PMHCNS-BC, CPRP, FAAN
Registration opens in June 2010 for the premier event in psychiatric mental health nursing – the **APNA 24th Annual Conference**, October 13-16, 2010 in Louisville, Kentucky. Network with colleagues from around the country, attend excellent educational sessions and panels, and meet with your fellow APNA committee, council, and task force members!

**CE contact hours:** This year’s conference will offer up to 26.5 contact hours Wed – Sat. If you are looking to recertify, we will be repeating the ANCC Review courses for the PMH NP and PMH nurse. This course will be held on Mon & Tues and will offer an additional 14 contact hours. Check out the ANCC Course + Conference Package registration option and receive a substantial discount for attending both!

**Registration Highlights:** This year you can register online using your APNA member ID and last name, and your information from the APNA database will automatically appear in the name and address fields! Also, you can register for sessions individually instead of by track – *this is only available online*. To assist you in selecting your sessions, the target audience will be listed next to each session title.

Learn more at [www.apna.org/AnnualConference](http://www.apna.org/AnnualConference).