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The official membership newsletter of the American Psychiatric Nurses Association

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## Message from the **EDITOR**

s you can see, the format and design of APNA News have been transformed! This fresh face gives the newsletter a bold new look and places a greater emphasis on our news and issues. Not only has the newsletter grown from an 8" x 11" letter to a tabloid, but it is also under the charge of the APNA National Office.The National Office Staff along with SAGE Publications, publisher of JAPNA, will be working to produce each issue.

As the APNA Secretary, I will serve as the Editor of the newsletter. If you have suggestions or ideas for the newsletter, please contact me! We want to make certain that your voice is heard in your newsletter. In order to

achieve this, an Advisory Panel of dedicated members has been created to work directly with the National Office Staff on content development. Our goal is to make the newsletter more dynamic, informative, current and reflective of the needs of the members.



Michelle Valentino

APNA News will continue with such standard sections as the President's Message, Board of Directors Summary, Treasurer's Report, and chapter reports. It will also feature new sections including Council Updates, Task Force Reports when needed, News from the National Office, a Chapter Spotlight, a member profile, and a new member roster. The roster will help us to know our membership better. We are also adding an events calendar and encourage chapters to submit information about their meetings and programs.

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## **APNA's 21st Annual Conference Off** to a Sunny Start

reetings from Florida! The sun is warm and the sky a brilliant blue. It's time for you to take out your calendar and flip to October. Don't worry. I do this with all our visitors. Now highlight the dates October 3rd through the 6th. Don't write anything yet.

As you know, this is our 21st Annual Conference, entitled "Innovation in Psychiatric Mental Health Nursing Practice, Education and Research". So, now for the news. Our hotel, the Gaylord Palms in Kissimmee, adjoins the convention center. It has 1,406 guest rooms and a soaring atrium that is 4.5-acres of glass! There are themed areas that give you a real feel for St. Augustine, Key West and the

Everglades. You might want to pack a camera for photos of the lush environments and alligators in the swamp. All employees or "Stars" (in Gaylord-speak) are very friendly and seem to enjoy their roles.

APNA's conference space at the expansive convention center has easy access and meeting rooms next to each other that are identified by city names such as Tampa, Sarasota, Naples, etc. Each of these rooms will be provided with laptops for the convenience of the speakers.

This is the first year that all abstracts came to us online. The process was great and the submissions for presentations and posters are

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The atrium features 4.5 acres of glass.



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Statements and opinions expressed in the articles of APNA News are those of the authors and not necessarily those of the association. APNA disclaims any responsibility or liability for such material.

# Summary of the Board of Directors' Meeting in January 2007

#### **Governance Policies**

The APNA Board of Directors approved a series of governance policies, which set the guiding principles for the Board. According to the policies, the Board concentrates on setting goals for the organization. Developing and recommending policies and programs are delegated to Task Forces, Councils, and Committees. The roles of each group are clearly defined in the policies along with the roles for each of the Board Officers, Members-at-Large, and the Executive Director. To review Governance Policies, visit the Members Only Section at www.apna.org.

As part of the Board duties, they reviewed the list of Committees, Councils, and Task Forces and assigned Board Liaisons to each. The Board also adopted procedures to be employed by the Nominating Committee, which deliberated in February 2007. The Nominating Committee was provided with position descriptions and qualifications for each member of the Board based on the governance policies.

#### **Financial Overview**

In reviewing our Finance Report, the Board noted that APNA received grants from industry sources for educational activities. As grants are received, the money is restricted or set aside to pay for the program expenses as they are incurred. The Board directed the Executive Director to develop a financial plan in which routine operating revenue and expenses are separated from grant related revenue and expenses. The Board also directed that future budgets be developed that balance operating revenues and expenses (See Treasurer's Report). At the halfway point in the current fiscal year, the organization continues to be on sound financial ground with current assets being 2.58 times current liabilities. This means that for every dollar APNA owes it has \$2.58 in the bank.

#### **ANCC**

The American Nurses Credentialing Center (ANCC) has elected to change the wording on certificates awarded to certified MHN's. The Board has written to ANCC stating APNA's dissatisfaction. A copy of the ANCC letter and APNA's response can be found at www.apna.org.

#### **21st Annual Conference**

For the 21st Annual Conference, the Annual Awards ceremony will be held as a dinner on Friday evening. The Board also directed changes to the program, which include:

- An Annual Meeting of Membership to allow the Board to report on activities and provide members an opportunity to ask questions. This meeting with be scheduled unopposed by any other session.
- A designated area for members to meet one-on-one with the Board. Board members will be available during all meeting times.
- A town meeting that allows members to address pertinent issues. This event will be unopposed and held just prior to the Annual Awards Dinner.

#### **Task Force Updates**

The Scope and Standards Task Force reported that the final draft of the Scope and Standards document was submitted to American Nursing Association (ANA) and later approved. APNA is part owner of the copyright and will offer the Standards for sale directly from APNA.

The Chapter Task Force surveyed chapter presidents. They found that chapter presidents requested improved communication, the ability to provide continuing education credits during the programs, and methods to secure funding. Their findings are being considered in the development of programming for chapter presidents.

Margaret B. Halter, member of the Disaster Task Force, attended the Carter Center Symposium on Mental Health and reported on it in the January/February 2007 issue of APNA News. The Task Force also received a report from Linda Stalters, APNA Red Cross Representative.

The Child-Adolescent Certification Task Force developed a survey that will be sent to all practicing APRN's using the ANCC e-mail list of certified mental health nurses. The survey has been approved by the Kent State IRB and will be piloted with a small group initially.

The Board is in the process of establishing a Task Force to focus on violence and a Seclusion and Restraint Task Force, which will update the Seclusion and Restraint Position Statement and Standards of Practice.

## News from the NATIONAL OFFICE

#### **Member Notice**

APNA has suspended its message boards located in the Members Only Section at www.apna.org. Look for new message boards to become active in the coming months.

#### **Choice and Challenge Video Under Development**

APNA is working to update its popular service tool, the Choice and Challenge Video. The video is currently featured on VHS and a committee is working to release the information on a CD-Rom. The current inventory has been exhausted and will not be reordered. Once the revisions are completed, information will be available on our website.

#### **Spring Clean Your Membership Profile**

When members move and/or change positions, they need to log in the Members Only Section and update their membership profiles. By updating their contact information, it will allow members to receive important information from the National Office and their local chapters. For questions, please contact Patty Federinko, the APNA Membership Coordinator, at pfederinko@apna.org or (866) 243-2443.

# ANA Congress on Nursing Practice and Economics Approves Scope and Standards of Practice

he American Nurses Association's (ANA) Congress on Nursing
Practice and Economics has oversight responsibility to ensure the relevance of published nursing scope and standards and requires review of such documents every five years. In early 2004, the APNA and the International Society of Psychiatric-Mental Health Nurses (ISPN) appointed a joint task force to begin the review and revision of the documents, "Scope and Standards of Psychiatric-Mental Health Nursing Practice," published in 2000 by ANA (ANA, 2000).

A panel of psychiatric mental health nursing experts and ANA policy leaders was convened in August 2005 to review initial drafts and make recommendations. The selected panel members held leadership positions as psychiatric mental health nursing experts in various nursing organizations, including the APNA, ISPN, American Academy of Nursing, ISPN's Child and Adolescent Division, National Organization of Nurse Practitioner Faculty, and International Nursing Society on Addictions. The panel members represented psychiatric mental health nursing clinical administrators, staff nurses, and psychiatric advanced practice nurses.

In accordance with the recommendations from the experts, the revised document reflects the template language of the most recent publication of ANA nursing standards, "Nursing: Scope and Standards of Practice" (ANA, 2004). The introduction was revised to highlight the leadership role that psychiatric mental health nurses have in the transformation of the mental health system as outlined in the "President's New Freedom Commission Report of 2003," the commission was chaired by Michael Hogan (New Freedom Commission, 2003). The prevalence of mental health issues and psychiatric disorders across the age span and the disparities in access to care and treatment among diverse groups speak to the critical role that the specialty of psychiatric mental health nursing must continue to play in meeting the goals for a healthy society. Safety issues for patients with psychiatric disorders and the nurses involved in their care are major priorities for this nursing specialty in the context of fiscal constraints and disparities reimbursement for mental health services.

Development of the document, "Psychiatric Mental Health Nursing: Scope and Standards of Practice" included a two-stage field review process: I) review and feedback from the boards of APNA and ISPN and 2) posting of the draft for public comment at http://www.ISPN-psych.org

# Message from the **EDITOR**

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I would also like to take this time to express our gratitude to the former APNA News staff, Gail Stuart, PhD, APRN, BC, FAAN, and Jo Smith. They both have contributed greatly to APNA by producing a quality newsletter for many years. We only hope to do as effective job as they have done for us in the past.

Michele Valentino

Michelle Valentino, MSN, CNS, NP Secretary with links from the ANA website, http://nursing world.org, and the APNA website,

http://www.apna.org. Notice of the public comment period was distributed to nursing specialty organizations, state boards of nursing, schools of nursing, faculty groups, and state nurses associations. All groups were encouraged to disseminate notice of the postings to all of their members and other interested stakeholders. Ninety-three

people registered on the website during the posting period. Twenty-one comments and suggestions were received from individuals, faculty groups and state nurses association psychiatric nursing groups. The feedback was carefully reviewed and integrated as appropriate. The document was approved through the ANA process in early February 2006 and is currently in the publication process.

## Message from the PRESIDENT

f APNA was a member of the 3rd estate, we could start our message with great headlines: "Leading Psychiatric Nurses Organization on the Cutting Edge" or perhaps "Psych Nurses Know Where It's At". This message (without the journalistic bombast) is a continuation of a series of discussions that we hope will produce dialogue and action (and JAPNA articles) about APNA's priority issues, in this case, depression—particularly trauma-induced depression. Depression is an equal opportunity disorder affecting about 121 million people worldwide (World Health Organization [WHO], 2007a). Currently WHO is focusing on increasing





eanne Clement

Barbara Drew

global awareness of depression, producing and disseminating resources to improve treatment and conducting multi-site intervention studies to improve the treatment of depression in primary care settings.

A message focused on depression and trauma is extremely relevant given recent headlines that call attention to continued trauma suffered by our war wounded at a facility that should be state of the art. Research tells us that PTSD and major depression occur frequently following traumatic exposure (O'Donnell, Creamer, & Pattison, 2004). How many of our wounded soldiers currently have, or will develop trauma induced depressions? The men and women at Walter Reed have experienced severe traumatization of mind and body in combat, and some have been re-traumatized in what should have been an environment of help and support.

A separate, but connected story hit the newspapers on March 5, 2007: Thomas Eagleton died at age 77. Despite a long and illustrious career as a three-time Senator, Lieutenant Governor of Missouri and assistant prosecutor, Mr. Eagleton is best known for the 18 days he shared the 1972 Democratic ticket with George McGovern as Vice-Presidential candidate. He was forced to resign from the ticket, not necessarily for having depression, but for the sin of seeking treatment for it. Has much really changed?

Thirty-five years after Eagleton's forced resignation, depression is recognized as one of the top causes of disability and a leading contributor to the global burden of disease. More is known about the genetics and neurobiology of depression since 1972. There are evidence based guidelines for effective treatment. However, fewer than 25% of persons affected by depression have access to treatment (in some countries less that 10%) (WHO, 2007a). Even if treatment is sought, it is usually in primary care settings where in 30%-70% of people with depression the diagnosis is either missed or under treated (Möller & Henkel, 2005). What will the statistics look like for our soldiers and others exposed to the continuing stresses of war and terror—including the families?

One thing we can count on is that when these individuals and their family members seek health care they will do so mainly in primary care settings, presenting with physical symptoms. Parenting skills may be decreased in the aftermath of trauma (Banyard, Williams, & Siegel, 2003), thus affecting the health and well being of the children in military families, not to mention the domestic violence that may occur, further traumatizing children.

We in APNA have an opportunity to make a difference through networking and collaborating with our primary care colleagues. For example, we can follow WHO suggested activities that include presenting workshops on diagnosis and treatment of trauma related depression (2007b). While writing our articles for JAPNA, we can do companion pieces with a primary care colleague for inclusion in their journals. We can reach out to our sister specialty organizations to collaborate on program development for our members. The researchers among us can focus on multi-site intervention studies as best practices develop for interventions in primary care for individuals experiencing post-traumatic depression and their families. We who have the skills to recognize and intervene with persons with trauma related depression have an obligation to educate and assist our colleagues to provide the most cutting edge treatment possible.

Grane a. Clement

Jeanne Clement, EdD, APRN, BC, FAAN President-Elect Darlara L Stew

Barbara Drew, PhD, APRN, BC President

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# Report from the TREASURER

his is my first opportunity to extend my appreciation to the APNA membership for having confidence in me to serve as your Treasurer for the next two years. I am honored to have been chosen and I pledge that I will work to maintain your confidence. Larry Plant did an excellent job during his two years. He and the APNA Board of Directors spent the previous year working to assure that appropriate controls were in place so that we can all have confidence in the information contained in our financial statements.

As our new Treasurer, my role is to build on that foundation and to work with the finance committee to oversee the financial affairs of APNA. During the APNA Board of Directors' Meeting in January, we voted to institute an audit committee. The purpose of the APNA Audit Committee is to ensure the annual audit is conducted in an efficient, cost-effective and objective manner. The committee will oversee the organization's financial systems and control systems; and the committee will also recommend the appointment of the external auditor. The creation of audit committee is mandated for publicly held companies. We feel as a not-for-profit we can place an added measure of oversight by instituting an Audit Committee.

The Audit Committee will be comprised of the Treasurer, the four APNA Board Members at-Large and two APNA members who do not serve on the Board. Our meeting will be conducted via conference call and use an Internet meeting program to share information during the calls. The committee will receive the report form the auditors and report its finding and recommendations to the entire Board. Members who are interested in serving on this committee should send a letter of interest to Nicholas Croce, APNA Executive Director, at

ncroce@apna.org. Please provide a brief description of your relevant experience in financial management.

In addition to working with the Audit Committee, I will also be working with the Finance Committee to build the budget for the next fiscal year. In building the budget, we have instructed management to produce a financial plan that places our unrestricted operations in balance over the next fiscal year. These are the funds related to dues, overhead and net revenue from programs such as the Annual Conference and the Clinical Psychopharmacology Institute. We



DOROTHY E. HILL

continue to provide services and programs through our restricted funds from grant and sponsorship, and we have instructed management to produce budget plans that show these programs over the life of the program as well as for the current year. In accordance with General Accepted Accounting Principles (GAAP), grant and sponsorship revenue will be recognized in the year in which it is pledged or received. The corresponding expense will be reported in the year in which the program actually occurs. In the past, we reported the results to you on a

single year. However, we feel that a single-year report only offered part of the story. The multi-year budget will produce a more complete picture of future financial position.

By continuing to build on our financial controls and improving our budgeting and forecasting methods, we will keep APNA viable financially and capable of meeting it goals and objectives.

Dorothy E. Hill, RN, C Treasurer

## Council **UPDATE**

# **Advanced Practice Becomes APNA's Newest Council**

By Beth Phoenix

In upcoming issues, we will highlight activities of one or more of APNA's Councils. This month's focus is on the Advanced Practice Council.

n the interests of better serving APNA members engaged in advanced practice, the APNA Board of Directors recently expanded the Advanced Practice
Committee to a council. The Advanced
Practice Council (APC) is one of eight councils, which includes the Nurse-Psychotherapist
Council, Research Council, African American
Council, Gero-Psych/Long Term Care Council,
Administrative Council and Forensic Psychiatric
Nurses Council and the newly established
Government Affairs Council.

The purpose of APC is to monitor and respond to the changes in health care policy and the practice environment that effect advanced practice nurses in psychiatric/mental health roles (APRN-PMH). This is achieved by the following methods:

- Collecting information about factors affecting APRN-PMH practice. Means of doing so include the legislative update published in JAPNA, the APRN interactive session at the APNA Annual Conference, and other efforts on an as needed basis in response to requests from the Board, individual members and other entities such as government agencies.
- Assisting APNA APRN-PMH members who are experiencing unreasonable constraints on their practice, such as inappropriate restrictions on reimbursement or admission privileges. This assistance often takes the form of directing the APRN-PMH, insurer or regulator to appropriate informational resources, or may involve more direct advocacy.

- Providing consultation to the Board on issues related to advanced practice.
- Developing and updating statements or position papers.
- Developing and/or publicizing resources to support APRN-PMH practice.

As APC undergoes a transition from a committee under the APNA Division of Practice to a council, the group plans to improve its communications infrastructure. APC has also established a Steering Committee to create a procedure for members to join the Council and develop means to facilitate communication with the Council members using the APNA website.

Currently, APC is collecting information for its Legislative Update article and is seeking assistance from members across the country in identifying legal and regulatory changes in your state that affect APRN-PMH practice. Also, the Steering Committee is seeking one additional member, preferably someone residing in the northwest quadrant of the United States. To be considered, APC will need a CV and a brief statement of interest. For both requests, please send information to Beth Phoenix, Chair, Advanced Practice Council, at beth.phoenix@nursing.uscf.edu.

#### **Advanced Practice Council Members**

Beth Phoenix, RN, PhD (Chair)
Ruth 'Topsy' Staten, PhD, ARNP-CS (Board Liaison)
Leslie Robbins, PhD
Pat Cunningham, PhD
Nancy Hanrahan, PhD, RN, CS
Darcy Koehn, MSN
Patty McCoy, ARNP, CS
Christine Tebaldi, MS, APRN, BC
Susan Weeks, MSN

# Annapolis Coalition Creates Report on Behavioral Health Workforce Development

ail Stuart, PhD, APRN, BC, FAAN, former APNA News Executive Editor, currently serves as the Chair of the Board of Directors for the Annapolis Coalition on the Behavioral Health Workforce. While serving on the Annapolis Coalition Board, she has worked with more than 5,000 individuals to release the report, "Action Plan for Behavioral Health Workforce Development". The Action Plan is the culmination of a two-year effort to create a national strategic plan to strengthen the mental health and addictions workforce.

The Annapolis Coalition is a not-for-profit organization committed to promoting the development of the behavioral health workforce. The Coalition assembled many of the nation's foremost leaders in workforce development to guide the planning process and review research and workforce analyses and formulate recommendations. With funding from the Substance Abuse and Mental Health Services Administration (SAMHSA), the Annapolis Coalition developed the Action Plan to bridge those sectors and the traditional professional disciplines. The plan places major emphasis on expanded roles in the "workforce" for persons in recovery, youth, family members, and community coalitions in caring for themselves and as educators of the traditional workforce.

The Action Plan includes an Executive Summary, Strategic Goals, a Reference Guide and detailed implementation tables. The tables can serve as a blue-print for action by individuals, organizations, government agencies and community coalitions.

For more information, download the "Action Plan for Behavioral Health Workforce Development" at www.annapoliscoalition.org.

## Hawaii Native Wailua Brandman Becomes Civic Leader, **Author**

In upcoming issues, we will select an individual to profile in an effort to highlight the achievements of our members.

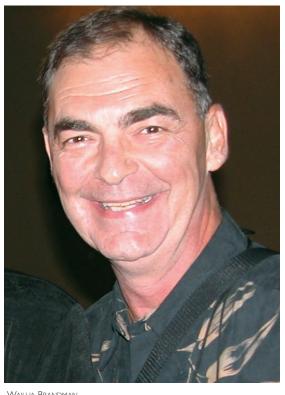
ailua Brandman, MSN, APRN-Rx, BC, PMH, CNS/NP, was influenced to become a mental health nurse after a 5th grade field trip to the Iowa State School and Hospital. There he witnessed nurses offering a helping hand to their patients and he wanted to do the same.

Wailua began his career by earning an AAS in Nursing at El Centro College in 1972, a BS in Special Studies in Psychology degree from St. Francis College in 1975, a MSN from Yale University School of Nursing in 1994. The following year, he received a post-master's certificate from the California State University at Long Beach's Adult Psychiatric Nurse Practitioner program. His academic success prepared him for his current position as the co-Medical Director at Freedom Recovery Services and a clinical instructor for the University of Hawaii's School of Nursing and Dental Hygiene. He also provides psychotherapy, psychopharmacological therapy and Holographic Memory Resolution in private practice in Honolulu.

Along with his professional experience, Wailua serves as President of the new Hawaii Association of Professional Nurses (HAPN) and Chair of the APNA's Zeneca Best Practices Award and Media Relations Committee. He also resides on the Board of Directors for the APNA, Hawaii Chapter, which he co-founded in 1997.

Wailua's hard work and dedication to mental health nursing has not gone unnoticed. Wailua won the Leadership Achievement Award from El Centro College, the Virginia Henderson Scholarship Award from Delta Mu Chapter and the Leadership Award from Gamma Psi Chapter-at-Large of Sigma Theta Tau, International, the State Award of Excellence Nurse Practitioner from the American Academy of Nurse Practitioners, a Community Service Award from the Laguna Beach Community Clinic and was recognized by the Hawaii House of Representatives.

In a career that spans more than 35 years, Wailua is most proud of the first article he published, which discussed intersubjectivity in a group setting. He also coauthored a chapter on complimentary/alternative approaches for APNA's text for Advance Practice PMH nurses. This year, he anticipates publication of his book for the lay public teaching energy concepts and emotional health.



Wailua Brandman

## **APNA** Welcomes Its **NEW MEMBERS**

Below are the names of the newest additions to the APNA family. If you know any of these people, please give them a warm welcome.

#### **Military Stations**

Heather Lyon James Stryd

#### **Arizona**

Dawn Benford Dercia Inniss Michelle LeBlanc Jan Wilson

#### **California**

Stephen Brown Grace Cooper Erin Dunn Hui Yong Fassihi Anthony Hawkins John Joslyn Theresa Markle Maya Pridgen Ezekiel Sanchez Kurt Walton Dy Wolpert

#### Colorado

Rachel Jene Debra Pollick Cynthia Warriner

#### Connecticut

Doreen Beattie Carole Castagna

#### **Florida**

Barbara Blevins Donna Dillon Jo Irving Susan Kostopoulos Jonathan Simkins Martha Snider

#### Georgia

Angelika Avery Katherine Pfeiffer Maria Rodney

#### Hawaii

Beatrice King

#### Iowa

Kay Froehner

#### Idaho

Carrie Bowman

#### Illinois

John Barfield Yolanta Kreklow John Lewin Charlene Mudd Carmen Romano Jeanette Rossetti Diane Semprevivo

#### Indiana

Doris Scott Mindy Smith-Miller

#### Kansas

Jamie Malone Elaine Rolfs

#### **Kentucky**

Anna Hume

#### **Massachusetts**

Erin Ackland Laura Curtis Teresa Henry Gwen Hotaling

#### Denise Hubert David Klee Lisa Langhammer Courtney Marchetti Patricia Miskella Megan Morrison

#### **Maryland**

Darlyn Scott

Virginia Byer Nicole Comuntzis Joseph Davenport Joanne Hoyle Carolyn Mcdaniel

#### Maine

Susan Cullen Stephanie Partridge

#### **Michigan**

Teri Davis Jeana Saccaro Terri Waisanen Lisa Workman

#### Minnesota

Terry Dobmeier Kristin Doyle Jennifer Grenell Beverly Linnes Vicki Mortensen Michelle Ramerth

#### Missouri

Helen Waters

#### Mississippi

Stacy Patterson Katherine Raines

#### North Carolina

Charles Edwards S. Worth Bodie Kathleen Carroll Vicky Goodson Delita Shearl Kelly Southard Joann Sumner Lex Turner Katheryn Walker

#### Nebraska

Cheryl Richards

#### New Jersey

Lynn Falanga Mary Garvin Cindy Johnson Doreen Kiernan Constance Martell Jennifer Petrunis

#### New Mexico

Barbara Trembley

#### Nevada

Nanci Quinn Ney Suguna Vijayalaxmi

#### New York

Elizabeth Bailey Valerie Cavallo Lisa Cregan Loraine Fleming Linda Louise Ford Claudia Melendez

#### Ohio

Virginia Abbett

Felicitas Ateghang Dorothy Brown Barbara Eaton Sharon Groves Rosanne Hickman Vicki Hornbeck lanet Miner Lois Nicholson Renee Pennington Kathy Royer Jean VanCauwnbergh

#### **Oregon**

Andrea Vink Sarah Williams

Sheila Webster

Nancy Weigand

#### **Pennsylvania**

Erin Brown Laura Correll Patricia Dantonio Anna Defebbo Annie Lattanzio-Hale Heather Rivers Donna Selinsky Bridget Urda Lorraine Winsey Mina Yindra

#### **South Carolina**

Janet DiNatale

## **South Dakota**

Lynn Facile

#### Tennessee

Caryn Addonizio Michelle Beeler

Kimberly Kuhn Rebecca Lynch Josh Poche Diana Richmond lo Wade Connie Warren Melissa Woody

#### **Texas**

Mary Gray Bobby Greenwood Rebecca Jensen Valerie Talenda Kentoinette Wright

#### **Virginia**

Bridgette Andrews Barbara Frechette Wendy Lilliston-Hernandez

#### Washington

M. Gibson Trudi Levy Richard Broach Alyssa Czakowski

#### West Virginia

Kathleen Banks Miriam Brancat

#### **Wyoming** Carol Maden

## **APNA's 21st Annual Conference Off to a Sunny Start**

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The hotel registration area at the Gaylord Palms Resort.



A luxurious St. Augustine suite in the hotel.

outstanding. I can't believe how wonderful this conference will be, because of all of you! Thank you, Thank you!

I should keep our two keynote speakers a secret till my next letter, but I am terrible with secrets. So here goes. President George Bush set up the New Freedom Commission on Mental Health. Our first speaker is Dr. Michael Hogan, one of the former Commissioners assigned to provide key recommendations to the President. His goal took many paths before completion. Our second guest speaker has many skills and has worked in the field of fund raising and public relations. Since her son's near-lethal suicide attempt, Gail Griffith, author of Will's Choice: A Suicidal Teen, A Desperate Mother, & A Chronicle of Recovery, has become a strong mental health advocate. We have much to

learn from her family battle with depression. Gail also wrote an article for the Washington Post titled, "The Fear of No Right Answer." OK everyone, you have to wait for more information. The abstracts will be reviewed by the committee and then handed over to the 21st Annual Conference Committee for tracking and placement in the program. Here is another first, the process will be paperless! I didn't say painless, I said paperless. We have a few things to learn first.

OK, back to the calendar. On Thursday evening, write "Arabian Nights Dinner Show". We're going to have a wonderful dinner and a show with romance and beautiful horses. The best rated show outside of Disney! Check this off on the APNA registration form if you wish to attend. At this writing, we have 300 tickets available that include trans-

portation. The regular admission is \$52.90 plus tax. Without transportation, our cost is only \$45.00 for both. Is this great or what! On Friday night, write in "Awards Dinner." You'll have to wait to hear more about this special night later.

While packing the sunscreen, shorts, bathing suit and conference clothes, don't forget to pack something nice to wear to the dinner on Friday. A few more quick thoughts: The Gaylord provides free transportation to Walt Disney World, which is only 5 minutes a way. When you come in to Orlando International Airport, Mears Transportation is there to help you get to your hotel. If you purchase a round trip ticket, the cost for transportation is discounted.

Now that you've updated your calendar, stay tuned because there are more details to follow!

# Chapter SPOTLIGHT

# **Arizona Chapter Now Offers CE Credits**

he APNA, Arizona Chapter received a provider number to offer continuing education (CE) contact hours for its Annual Conference. The Arizona Chapter's Board of Directors initiated this process in October 2006 with the California Board of Registered Nursing and received the provider number in mid-December.

Although Arizona does not require CE credits to re-license, many nurses moving to Arizona—the fastest growing state in the country—will want to maintain their licensure in states where such requirements exist. Furthermore, all American Nurses Credentialing Center (ANCC) certified psychiatric nurses may obtain one-half of their hours for recertification with non-ANCC CE credits.

The Arizona Chapter's first program offering CE credit is entitled, "Methamphetamine and the Psychiatric Patient". This one-day program will be held in Tucson, Arizona in the fall. For more details, please request a brochure at splipera@flash.net or visit the Arizona Chapter webpage at www.apna.org.



The hotel atrium features a Key West theme.

# Task Force **REPORT**

## Seclusion and Restraint Task Force Working Towards New Goals

n 1999, APNA took the lead by forming a Seclusion and Restraint Task Force to ensure that the organization would be responsive to its member's interest by providing a guiding framework for the use of seclusion and restraint. The Centers for Medicare & Medicaid Services (CMS), formerly Health Care Financing Administration (HCFA), interim rule had just been published and there was a great deal of concern and questions regarding the direction of the rule.

Under the leadership of Lynn DeLacy, a Task Force was formed that included 15 APNA members actively practicing in different settings and with a diverse population of clients. The work was voluminous and completed electronically, which culminated in the position paper and standards of practice, "Seclusion and Restraint: Position Statement & Standards of Practice" (2001).

This year finds the Task Force once again with an opportunity to take the lead. The CMS has just put forth their final rule in January 2007. While most of the original work is timeless in its concepts, we will ensure it is a dynamic product by reviewing it and revising it as needed to meet the current and promote future practices.

The APNA Board of Directors has requested a revitalization of the Task Force with Lynn accepting the chair position once again and Marlene Nadler-Moodie as Board Liaison. A call for committee members has been sent to members. The members of the Task Force anticipate their work be completed and ready for use by or before APNA's Annual Conference in October.

# New Task Force Established to Focus on Workplace Violence

orkplace violence has been linked to decreased job performance and job satisfaction, as well as increased absenteeism and mental health issues among doctors, nurses, and other health care professionals. Nurses are exposed to, or

health care professionals. Nurses are exposed to, or victims of, abuse in multiple ways and from several sources including patients, visitors, other nurses or physicians.

In the APNA Strategic Plan, violence is identified as a prevalent mental health care issue. The APNA Board of Directors has approved the creation of a task force on violence that is charged with developing an APNA position statement on workplace violence and recom-

mending programs that APNA can put in place to serve as resources for nurses.

The Violence Task Force will be chaired by Michelle Valentino, MSN, CNS, NP, APNA Secretary. It is expected that the work will be conducted through conference calls and e-mail correspondence. The Task Force will make its preliminary report to the Board in October 2007.

If you are interested in serving on the Violence Task Force, please send a letter stating the reasons for your interest and a brief description of your experience and expertise. Letters should be addressed to Michelle Valentino and sent in care of Nicholas Croce, APNA Executive Director, at ncroce@apna.org.

# Dr. Josepha Campinha-Bacote Selected as Speaker for CPI Program

PNA's 5th Annual Clinical Psychopharmacology Institute (CPI) scheduled for June 21-23, 2007 in Cambridge, Massachusetts will feature Josepha Campinha-Bacote, PhD, MAR, APRN, BC, CNS, CTN,

FAAN, as one of its keynote speaker. Josepha is President and Founder of Transcultural C.A.R.E. Associates, which provides clinical, administrative, research, and educational services related to transcultural health care and mental health issues.

Josepha received her B.S. from the University of Rhode Island, her M.S. from Texas Women's University, a M.A. in Religion/Theology from Cincinnati Christian University, and her Ph.D from the University of Virginia. She is Board Certified by the American Nurses Credentialing Center as a Clinical Nurse Specialist in Adult Psychiatric & Mental Health Nursing, certified by the Transcultural Nursing Society as a Certified Transcultural Nurse, and holds a Certificate of Authority from the Ohio Board of Nursing to practice as an Advanced Practice Clinical Nurse Specialist. In addition, she holds the academic title of adjunct faculty at several universities and is on faculty at Case Western University in

Cleveland, Ohio.

During her career, Josepha has been the recipient of several national and international honors and awards, which include the Distinguished Lecturer Award from Sigma Theta Tau International, the 2004 Transcultural Nursing Society (TCNS) Leadership Award, the Ethnic/Racial Minority Fellowship Award from the National Institute of Mental Health and most recently the 2006 Lifetime Achievement Diversity Award from the University of Rhode Island and the 2006 Minority Health Knowledge Award from the Ohio Commission on Minority Health. She is also a Fellow of the American Academy of Nursing and in 2005 was inducted into the TCNS as a Transcultural Nursing Scholar.

In addition, Josepha has given more than 1,000 national and international presentations. She currently serves as a consultant to several national institutes and centers including the National Center for Cultural Competence (NCCC) in Washington, DC and the Health Resources and Services Administration (HRSA) Managed Care Technical Assistance Center of the U.S. Department of Health and Human Services.

## Calendar of **EVENTS**

#### April 13-14, 2007

State Conference
APNA, South Dakota Chapter
Bridges Convention Center
Chamberlain, SD
Contact: http://www.apna.org/membership/chapters.html

#### **April 20, 2007**

Workshop Featuring Mary Moller APNA, Indiana Chapter Primo's West Plainfield, IN Contact: http://www.apna.org/membership/ chapters.html

#### May 4, 2007

State Conference APNA, California Chapter Holiday Inn San Diego Zoo Area, CA Contact: www.calapna.org

#### May 4, 2007

Celebration Day and Program
Pennsylvania State Nurses Association,
District 6
Lakeview Restaurant
Greensburg, PA
Contact: Sharyn Gesmond at (412)678-8229

#### May 5, 2007

State Conference APNA, California Chapter Scripps Mercy Hospital San Diego, CA Contact: www.calapna.org

#### May 18, 2007

State Conference

APNA,TN Chapter

Rothchild Catering and Conference Center Knoxville, TN

Contact: http://www.apna.org/membership/chapters.html

#### June 21-23, 2007

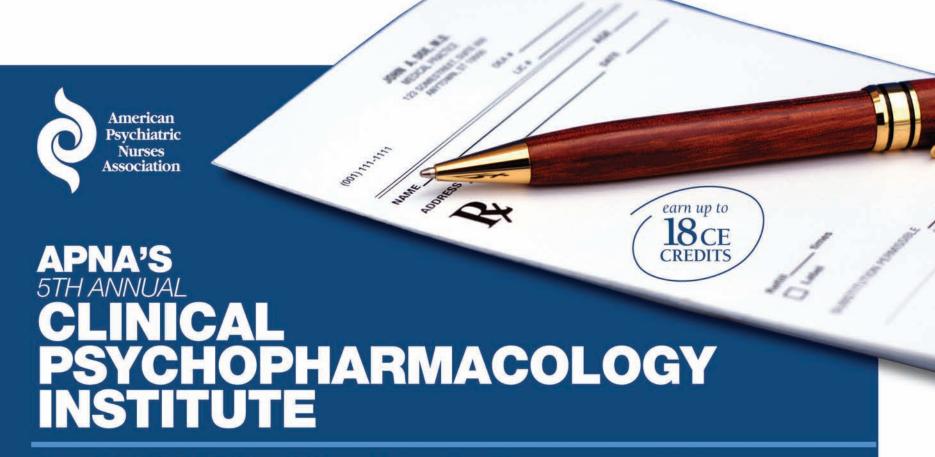
5th Annual Clinical Psychopharmacology Institute APNA

Hyatt Regency
Cambridge, MA
Contact: www.appa.

Contact: www.apna.org

#### October 3-6, 2007

21st Annual Conference APNA Gaylord Palms Resort & Convention Center Kissimmee, FL Contact: www.apna.org/annualconference/ generalinfo.html



June 21-23, 2007 | Cambridge, Massachusetts

CPI is designed for those interested in enhancing their knowledge of current psychopharmacologic approaches in the treatment of individuals with psychiatric disorders.

## THE INSTITUTE OFFERS:

- > Intense Study with Expert Faculty
- Breakfast, Lunch, and Handout Materials
- > Challenging and Timely Content
- State-of-the-Art Science with Clinical Implications

# **KEYNOTE SPEAKERS INCLUDE:**

#### DR. PETER F. BUCKLEY,

Professor and Chairman in the Department of Psychiatry at the Medical College of Georgia in Augusta

#### DR. JOSEPHA CAMPINHA-BACOTE,

President and Founder of Transcultural C.A.R.E. Associates, which provides services related to transcultural health care issues

### **REGISTRATION FEES:**

APNA Members: \$495

Nonmembers: \$695

Join APNA Today: \$615

That's a saving of \$80 off the nonmember rate!

### **REGISTRATION DEADLINE: JUNE 7, 2007**

For complete details and the registration brochure, visit APNA's website at www.apna.org or call (866) 243-2443.

Continuing Education Credit: Hours of continuing education credit are determined by the number of sessions attended. The Clinical Psychopharmacology Institute will offer a maximum of 18 total contact hours. Contact hours will meet ANCC requirements for continuing education. An application has been submitted to the Virginia Nurses Association Continuing Education Approval Committee. Please call Patricia Black at American Psychiatric Nurses Association for more information about contact hours.