PSYCHOPHARMACOLOGY CE:
YOU WANT MORE THAN JUST A COUPLE HOURS SITTING IN A CLASSROOM.

Pharmacology continuing education helps you meet requirements for recertification. That’s important. But what about adding the meaningful interactions you need to apply what you learn to your practice? What about hearing from presenters that understand your role in health care? The APNA Clinical Psychopharmacology Institute (CPI) was created for nurses, by nurses. And now you have two options: CPI West, March 17-18 in San Diego, California and the 16th Annual CPI, June 7-10 in Baltimore, Maryland. Both offer face-to-face pharmacology CE that will meet certification requirements and provide interactions with colleagues that will help you do meaningful work.

These programs will offer interdisciplinary perspectives on topics like:

- The neurobiology of the adolescent brain and how it relates to behavior, risk of illness, and interventions
- Shared decision making in pharmacotherapy management
- Cognitive inflammation issues in mood disorders
- Weighing the benefits and risks of cannabnoids for psychiatric illnesses
- How psychotropic medications impact the bone

Visit www.apna.org/CPI to learn more, register, and join others saying...

“None of the other conferences that I have been to have covered this area and it is extremely useful information that is very difficult to come by.”

“I realized that meds I commonly use (and I think others do too) were not necessarily the best choices. There seems to be ‘myths’ around these meds that we didn’t realize.”

“I feel like I have so much to bring back to my colleagues to discuss.”

PRESIDENT’S MESSAGE

Dear Colleagues,

You may have heard that the APNA membership recently passed several amendments to the APNA bylaws. This is an exciting step forward for our organization. These amendments will ensure greater opportunities for you to get involved and will enable continued support at the local level through the APNA Chapters. These amendments also keep your association agile, responsive, and able to meet your needs. You can find a detailed look at the amendments at www.apna.org/BylawsVote.

I’m keeping this message brief because the rest of this newsletter is jam-packed with updates and opportunities you’ll want to know about. Read on to learn about the many exciting things underway in your APNA community!

Linda Beeber, PhD, PMHCNS-BC, FAAN
**Q: What was it like to serve on the APNA Board of Directors?**

It was a transformative experience. I had previously served in leadership capacities both within and outside of APNA, but this was different. This was serving with other psychiatric-mental health nurses to support, in a big way, a profession I’m very passionate about. It was eye-opening to participate in discussions and decisions where the needs of the psychiatric-mental health nurse were the priority. We took our legal duties – duty of care, duty of loyalty, and duty of obedience – very seriously. But we also found joy in the positive impact we were making. I am coming away from the experience with many meaningful relationships and renewed enthusiasm for all that we can accomplish together.

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**Q: From a time standpoint, what should one expect as a Board member?**

The Board has three face-to-face meetings - February, June, and October. We have evening conference calls once per month. We also have ongoing discussions online in our private Board of Directors community on Member Bridge. We are constantly responding to what needs to be addressed so that APNA is able to meet evolving needs.

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**Q: What advice to you have for someone interested in running for a position on the APNA Board?**

*Do it!* Submitting your name via the Call for Nominations is easy. When deciding who is put on the slate, the Nominating Committee will look at your APNA leadership experience, how you describe your leadership style and potential contributions, and your CV. Think about the leadership experience you have within APNA and how that has attuned you to the organization. Read the APNA strategic direction and mission and purpose. Look at the discussions in the all-purpose discussion forum. Then think about the perspective you bring and how it applies to the entire membership. Remember that serving on the Board is not about furthering niche interests but about considering the needs of the whole profession.

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**Q: Anything else you’d like to add?**

It can be daunting to put your name forward, but well worth it. There are many routes available to develop your leadership experience within APNA, from your chapter to the councils to submitting an abstract to present at the APNA Annual Conference. It’s a two-way street, too. As you share help make strategic decisions, you are honing your leadership skills and gaining a big picture perspective. I wouldn’t take back any of the time I have given!

Visit [www.apna.org/CallforNominations](http://www.apna.org/CallforNominations) to learn more.
Stepping Outside of Her Comfort Zone

I wanted to become more actively involved with APNA and challenge myself by stepping outside of my comfort zone to submit an abstract for the annual conference. I had never submitted an abstract before, nor had I ever attended a national conference. It seemed like an incredible opportunity for both personal and professional growth. From a nursing practice standpoint, I was proud of the work that we were doing at my hospital surrounding inpatient psychiatric nursing suicide risk identification. I was passionate about the project and believed it was valuable work worth sharing with colleagues at the national level.

Sharing an Innovative Tool

My abstract topic was the development of our hospital’s Nursing Suicide Risk Inventory (NSRI) tool. At the time, I was a clinical nurse spearheading the tool’s design as chair of our hospital’s Psychiatric Nursing Practice and Nursing Informatics Committee. I knew that APNA’s Essential Competencies in the Assessment and Management of Suicide Risk had been instrumental to our tool’s development. Bringing the tool to the APNA Annual Conference seemed like the natural “next step”. Though the NSRI was still in production the month before the abstract deadline, the work we were doing was innovative and I felt inspired to complete the abstract proposal.

A Presentation that Spoke to a Clinical Priority

As psychiatric nurses we can all agree that suicide prevention is one of our most important - if not most important - clinical priorities and that suicide prevention is uniquely challenging given suicide risk’s dynamic, fluid, and unpredictable nature. We developed the NSRI because, at the time of the project’s initiation, there were no daily, evidence-based, nursing-specific suicide risk tools for the inpatient psychiatric setting. That was both shocking and frustrating for us. We passionately aspired to take a first step in addressing that gap through the NSRI’s creation - and I believe attendees respected the initiative.

Prompting an Important Conversation

My hope is that the session triggered an important conversation about what more we can be doing to improve the integration of technology, research, and practice. We are living through a big moment in psychiatric nursing. There is so much room for innovation. APNA took on an incredible amount of initiative and responsibility when they developed the field’s first-ever set of evidence-based psychiatric nursing competencies in suicide risk assessment and management. Our vision behind the NSRI was to develop our field’s first-ever electronic risk identification, documentation, and communication tool. If anything, my sincere hope is that the session inspired nurses to return to their organizations asking "what more can we do?"; "what can we create?". Because we are all change agents.

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Brynne Calleran, BS, BSN, RN-BC continued from page 3

A Professionally Transformative Experience
Presenting in Phoenix is a memory that I will never forget. It is an experience that has changed me personally and professionally. Admittedly, I was incredibly intimidated going into my first conference presentation. However, once you arrive, you realize you are surrounded by so many like-minded, passionate nurses who share your enthusiasm for making patients' lives better. It is a supportive, innovative, energizing, academically stimulating, and inspiring community.

One of the Best Decisions You Can Make
We are the future of our field. And we each have important experiences to bring to the table that are uniquely ours. Submitting abstracts and engaging in the APNA community at the conference-level is an opportunity to share in the success and growth of psychiatric nursing. Last year, albeit somewhat terrified, I submitted my first abstract. It was undoubtedly one of the best decisions I have made in my career thus-far. I cannot encourage members enough to feel similarly empowered! You will not regret it!

Learn more about submitting an abstract for the APNA 32nd Annual Conference at www.apna.org/CallforAbstracts.
Submission Deadline: March 5, 2018