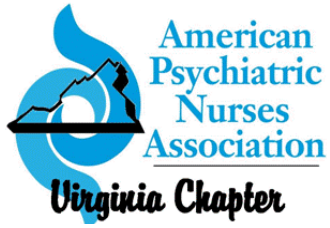

Virginia Chapter Newsletter October 2017

Virginia Chapter Board

President

Marian Newton, PhD, RN, CS, PMHNP, ANEF

Treasurer

Lynda C. Miller, RN, MSN, FNP-C, PMHNP

Conference Coordinator

Susan Jacobson, PMHNP, CNS

Secretary/Chapter Communications

Lorraine Anderson, PhD, RN, MPA

Board Members

Barbara Frechette, PMHNP-BC

Teresita Gonzales, MSN Ed., RN-BC

Lyons Hardy, CNS, NP

Jayne James, PMHCNS-BC, PMHNP(c)

Lora Peppard, PhD, DNP, PMHNP-BC

Michelle Tsai, DNP, PMHNP-BC

President's Message

Dear APNA Virginia members,

We are excited to announce that the APNA Virginia Chapter is now officially recognized as a chapter! Thanks in part to the 93 members who attended the August 11, 2017, Conference in Winchester, Virginia, *Suicide and Substance Use: Key Evidence and Strategies for Managing the Top Two Risks in Healthcare*. You each provided essential input, for our Virginia APNA Chapter to progress to active status both at the APNA October 2016 annual chapter meeting in Hartford and through last year's member survey. Thanks also to major commitment from Temporary Leadership Committee!

Your temporary leadership group is working in a deliberative and positive process to build a strong and sustainable APNA Virginia Chapter. We are excited to report APNA Virginia currently has 424 members, an increase of 100 in past year. We keep members informed with monthly minutes and Newsletters on the Member Bridge on the APNA website. This is our third newsletter.

The chapter leadership committee and program committee are amazing groups of motivated, dedicated, caring and professional Virginia APNA members! Please tell me if you would like to join us. We meet monthly on Friday 4:00-5:00 pm and need representation from southern Virginia! We also appreciate continual APNA staff support, who without their support, our tasks could not be accomplished. We also thank Mr. Nick Croce, Executive Director for APNA for his support and inspirational words to start our August 11, conference!!

I'm looking forward to continuing our work together,

Marian Newton
APNA Virginia Chapter President

Awards & Recognition

We'd like to recognize and celebrate Dr. Lora Peppard for receiving the following award at the APNA Annual Conference in Phoenix, Arizona:

2017 Award for Excellence in Leadership - APRN
Lora Peppard, PhD, DNP, PMHNP-BC

"Communities, states, and the nation at large need systems thinkers to streamline models of care and innovatively address complex problems within micro, meso, and macrosystems," says Lora Peppard. Her mission is to shape the future of psychiatric-mental health nursing by engaging students in the development and understanding of systems that perpetuate the field. For her systems approach to disseminating evidence-based practices to meet community needs, Lora Peppard is this year's recipient of the APNA Award for Excellence in Leadership – APRN.

Upcoming Events

Partnership for a Healthier Fairfax Fall 2017 Meeting

by Partnership for a Healthier Fairfax

"The Impact of Trauma on Health and Well-Being Across the Lifespan"

Presentation and panel discussion featuring members of our Trauma-Informed Community Network

DATE AND TIME

Thu, October 26, 2017
1:30 PM – 3:30 PM EDT
Registration begins at 1:15 p.m.

LOCATION

Stacy C. Sherwood Community Center
3740 Old Lee Highway
Fairfax, VA 22030

NEWS: Recent Event: Virginia APNA Chapter Conference

Suicide and Substance Use: Key Evidence and Strategies for Managing the Top Two Risks in Healthcare was presented, Friday, August 11, 2017 at Shenandoah University Harry F. Byrd, Jr., School of Business, Halpin-Harrison Hall; Winchester, VA

Keynote Speakers

Laura G. Leahy, DrNP, APN, PMH-CNS/FNP, BC Master Clinician in Psychopharmacology, Founder, APN Solutions, LLC Presented: "Neuroanatomy of the addicted brain and major neurochemicals and genetic factors related to addiction" and
Karen Vergano, RN, MS, PMHCNS, Diamond Health, "The Columbia Suicide Assessment"

Other Presenters

Patty Ferssizidis, PhD: "Skills for Managing the Continuum of Substance Misuse via Screening, Brief Intervention, and Referral to Treatment (SBIRT)" and Marian Newton PhD, PMHNP & Lora Peppard, PhD, DNP, PMHNP: "Setting the Stage for Success: Understanding the Value of Integrated Care Models for Substance Misuse and Suicide Risk Management."

Ninety-three registrants attended with profit after expenses of over $1200. The evaluations were positive regarding all speakers mostly in the highest evaluation range. Participants evaluated conference with high marks in terms of applicability to their work site, organization, quality of presentation from speakers, excellent food, and friendliness. It was exciting and meaningful to meet all of you outstanding APNA Virginia members from all over the state at this August 11, conference and to have meaningful discussions about the substance use disorder epidemic and potential interventions and outcomes. Thank you for your support Virginia APNA!

Save the Date:

Next APNA Virginia Chapter Conference: August 10, 2018, at George Mason University

Our strategy is to move this annual conference around the state each year

Education Highlight

Individual trauma results from an event, series of events, or set of circumstances that is experienced by an individual as physically or emotionally harmful or threatening, and that has lasting adverse effects on the individual's functioning and physical, social, emotional, or spiritual well-being. The individual's experience of these events or circumstances helps to determine whether it is a traumatic event.

http://www.samhsa.gov/traumajustice/traumadefinition/definition.aspx

RECOGNIZING TRAUMA

Know the Facts and Find Help for Survivors

Types of Trauma

- Violence
- Physical, sexual, and/or emotional abuse
- Witnessing or exposure to violence/abuse
- Neglect
- War zone & refugee experiences
- Traumatic grief
- Terrorism and torture
- Immigration experiences
- Traumatic medical procedures

Manifestations of Trauma

- Unexpected reactions/overreactions (anger, hostility)
- Distractibility (jittering, fidgeting, difficulty focusing)
- Anxiety or irritability
- Difficulty regulating emotions
- Avoidance of people/places/situations
- Difficulty sleeping
- Substance use or abuse
- Difficulty coping with change or unanticipated circumstances

Prevalence

Sixty percent of American children were exposed to violence, crime or abuse in their homes, schools and communities in the most recently completed comprehensive national survey.
National Survey of Children's Exposure to Violence (2008)

Exposure to violence is a national crisis that affects approximately two-thirds of our children. Of the 76 million children currently residing in the United States, an estimated 46 million can expect to have their lives touched by violence, crime, abuse, and psychological trauma this year.
Report of the Attorney General's National Task Force on Children Exposed to Violence (December 2012)

In another study, more than 68% of children and adolescents had experienced a potentially traumatic event by the age of 16. Impairments---including school problems, emotional difficulties, and physical problems---occurred in more than 20% of children who had been traumatized. In those who had experienced more than one traumatic event, the rate was nearly 50%.
Copeland, W.E., Keeler, G., Angold, A., Costello, E.J. (2007). Traumatic events and posttraumatic stress in childhood.

How Parents, Caregivers, and Friends Can Help Trauma Survivors

- Be a dependable source of hope and optimism for the survivor.
- Help the survivor identify healthy coping skills for the strong emotions they manage, such as exercise, writing in a journal, and mindfulness.
- Help the survivor develop supportive relationships and a sense of connection.
- Do your best to create a sense of safety and stability for the survivor of trauma.
- Seek out information and support related to the specific type(s) of trauma that have been experienced (see reverse).
- Know your role: Be a good listener, but do not ask for details about the trauma. Seek guidance from experts when appropriate.
- Behaviors related to a trauma history are often interpreted as deliberate. Caregivers should rely on *positive behavior management techniques* rather than harsh punishments that may escalate a situation and trigger fear and anger.
- If trauma symptoms have a negative effect on behavior, daily living, or school performance, consider asking school staff for guidance or counseling (see reverse).

Trauma-Informed Community Network

Member Corner

We would like to share your greatness to others in our Virginia Chapter.

If you would like submit information on your involvement in a particular program or you have information on programs in your area.

We want to hear from you.

If there is a psychiatric nurse, PMHNP, or PMHCNS that you feel needs to be in the spotlight, send the info in to be presented in our next newsletter.

Info should be sent to lmiller08@su.edu with

subject line: Member corner submission

APNA Resources

New Education to Address Opioid Use Crisis
The no cost educational sessions were designed to support nurses in all fields as they address the opioid use epidemic. | View

Suicide Assessment & Management Competencies
Psychiatric-Mental Health Nurse Essential Competencies for Assessment and Management of Individuals At Risk for Suicide | View

Tobacco Dependence Resources
Updated expert-vetted online resources from the Tobacco Dependence Branch of the APNA Addictions Council. | View

APRN State by State Practice Authority Guide
Interactive map providing information on PMH-APRN scope of practice, supervision, prescribing, and relevant legislation. | View

Scope & Standards of Psychiatric-Mental Health Nursing
The who, what, when, and where of psychiatric-mental health nursing practice. | View

Strategic Direction

WHOLE HEALTH BEGINS WITH MENTAL HEALTH

APNA's Core Purpose:

To be the unifying voice of psychiatric-mental health nursing

Mission

APNA Provides:

Quality Nursing Education
Resources for New Nurses
Collaboration

Vision

APNA Advocates with:

Position Statements
New Knowledge & Development
Consumer Collaboration
Clinical Practice
Recovery-Focused Care

Values

Empowerment | Inclusivity | Integrity | Collegiality
Innovation | Transparency | Stewardship