

Membership 2016: 3,402

Board of Directors:

President – Carolyn Clevenger Past President – Pam Cacchione President-Elect – Katherine Evans Treasurer – Michele Pirc Secretary – Dawn Marie Roudybush Member-at-Large – Linda Keilman Member-at-Large – Valerie Sabol

Committees with Chairs:

Awards Committee – Amy Imes Conference Planning Committee – Cathy Wollman Communications Committee – Jennifer Serafin Education Committee – Natalie Baker Health Affairs Committee – Evelyn Duffy Historical Committee – Kathy Fletcher, Trudy Keltz Chapter Leadership Committee – Joan Michelle Moccia Nominating Committee – Joan Carpenter Practice Committee – Meghan Routt Research Committee – Pat Vermeersch

SIGS with Chairs:

Hospice/Palliative Care SIG – Caroline Duquette House Calls SIG – Phyllis Atkinson Leadership SIG – Joan Carpenter PAC/LTC SIG – Kanah May Lewallen Transitional Care SIG – Lauren Van Saders Cross Cultural Care SIG – Jennifer Serafin, Kate Aldrich GeroPsych Nursing SIG – Megan Simmons Veterans Care SIG – Marianne Shaughnessy

GAPNA Award Winners:

Established Chapter Excellence Award – Great Lakes Chapter Special Interest Group Excellence Award – Post-Acute Care/Long-Term Care SIG Excellence in Clinical Practice – Angelica Brown Excellence in Community Service – Clarice Wasmuth Excellence in Education – Lynda A Mackin Excellence in Leadership Award – Nikki Davis Excellence in Research Award – Linda Beuscher Health Affairs Scholarship – Deborah Wolff-Baker

Foundation Board of Trustees:

Chair – Nancy Wilens Vice Chair – Joanne Miller Secretary – Anna Dowd Treasurer – Suzanne Ransehousen Resource Development – MJ Henderson, Nikki Davis Administrative Affairs, Bylaws – Jennifer Serafin Board Member Emeritus – Barbara Phillips GAPNA Foundation Registered Agent – Erik Joh, Esq.

GAPNA Foundation Award Winners:

Research/Clinical Project Scholarship Award: Valerie Gruss Christine Robbins Research poster: Dorothy Wholihan Education poster: Ju Young Shin Clinical Project Awards: Valerie Sabol GAPNA Center for Clinician Advancement (United Health Group) Grant: Karen Wickersham AMDA Foundation Futures Program Educational Grant: Michele Pirc Dave Butler Spirit of GAPNA Award: Trudy Keltz

National Office Staff:

Executive Director – Michael Brennan Association Services Manager – Jill Brett Director of Marketing – Jack Edelman Registration Manager – Danielle Little Conference Manager – Laura Smith Education Director – Rosemarie Marmion Education Coordinator – Kristina Moran Director of Online Learning and Innovation, Administrator of On-line Community, GAPNA Exchange – Celess Tyrell

Newsletter Editors:

Carol Bartoo, working with Ken Thomas, editor from AJJ

Platinum Strategic Partners:

Strategic Partners:

Avanir pharmaceuticals Eisai

Acadia Sunovion Xeris pharmaceuticals

GAPNA Sponsors

Merck, Sanofi, Janssen, Santyl, Sunovion

Annual Dues:

Member Category	Description	1 Year	2 Years	3 Years
Regular	(advanced practice nurse)	\$100.00	\$190.00	\$285.00
Associate	(interest in GAPNA)	\$100.00	\$190.00	\$285.00
Retired	(advanced practice nurse)	\$75.00	N/A	N/A
Student		\$60.00	N/A	N/A

Geriatric Nursing, GAPNA Section Editor(s):

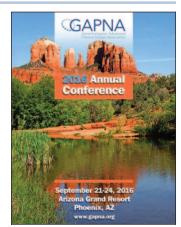
Valerie Sabol Melissa Batchelor-Murphy

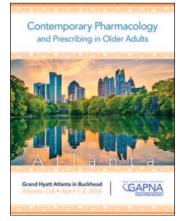
GAPNA Website Editor:

Lacey Stevens; Assistant editor Jennifer Kim

GAPNA Accomplishments:

- 35th Annual Conference was held September 21-24, 2016 at the Arizona Grand Resort, Phoenix, AZ.
 - 450 registrants, 380 members, 62 non-members
 - 482 Pre-cons (010-9, 020-79, 030- 159, 040-181)
 - 26.5 CE with 14.08 pharmacology credits.
 - GAPNA Gives Back: SCOOP (Southeast Community Outreach for Older People); birthday gifts, pill boxes, stress balls, t-shirts, note pads.
- 2nd Annual Pharmacology Conference, "Contemporary Pharmacology and Prescribing for Older Adults," was held March 31 – April 2, 2016, at the Grand Hyatt Atlanta in Buckhead, Atlanta GA
 - 334 registrants, with 243 members and 91 non-members
 - 11.5 CE offered, with 11.5 pharmacology.
 - GAPNA Gives Back: partnered with the Atlanta Housing Authority's Healthy Aging campaign to improve healthy lifestyle practices.
- GNP Task Force: investigating certification options. Name changed to Professional Recognition Task Force.
- Chapter annual financial reports for the previous calendar year will now be turned in February for the controller to file taxes. Annual reports will continue to be turned in July.
- The BOD updated and posted GAPNA's strategic plan and mission and vision statements.
 - Increased readership of GAPNA's newsletter due to the new online format.
- White Paper Consensus Statement: list of endorsements continues to grow. 150 copies given out at GSA. A copy sent to ANA President.





- Optum CCM (Commission for Case Manager) and House Calls gave a GAPNA membership as a benefit to their employees which added 817/849 APRNs to GAPNA's membership.
- Created new membership survey.
- Three-year migration plan from Prolibraries to Digitell for CEUs.
- Created March Member Madness where chapters compete to most renewals or new members from Feb15 to March15, based on percentage.
- Became a member of Hartford Center for Gerontological Excellence (HCGE) Two members represented GAPNA at The Society for Post-Acute and LTC (AMDA) Annual Conference.
- Approved two new chapters: Heartland on 12/17/2015, and Seattle 2/18/2016.
- GAPNA currently has its own Webpage, Facebook- and Twitter pages, and LinkedIn account. Rosaria Mineo, the Social Media and Marketing Manager at GAPNA's National Office, put together a social media primer. View "*Getting Social with GAPNA*" in the Chapter Resources section. The primer is a valuable tool for members who are new to social media or feel like they may be missing out on some of the great ways social media can be used to enhance your GAPNA membership experience. It is also a helpful resource for chapter and committee members who are interested in setting up their own social media channels.
- A conference app was available at both conferences to allow access to speaker materials, live updates, a photo feed, maps, etc. It also allowed attendees to communicate with others at the conference in real time.
- GAPNA Online Library allowed conference attendees free access to conference sessions, to print conference handouts, do CNE evaluation and access to their CNE certificate.

GAPNA Committees at Work:

<u>Awards Committee</u> held multiple meetings throughout the year to plan strategies for the Excellence Awards. The effort paid off with 43 nominations.

<u>Conference Planning Committee:</u> no report submitted.

<u>Communications Committee</u> was busy impacting GAPNA online services with identifying changes and updates for the website, monitoring participation in social media (Facebook, Twitter, Linked In), utilizing an App to increase participation at conference, and following the changes to the Newsletter for improved viewership. The committee also provides support for the Geriatric Nursing journal.

<u>Education Committee</u> focused on improving preceptor skills with a revision of the Preceptor tool kit on the website along with providing a presentation during conference. Members were involved with providing input for outside groups requesting their expertise as Geriatric Nurse Practitioner educators. The committee also coordinated with the Research committee to improve the call for abstract for presentation at the conference with the positive outcome of more abstracts and more posters.

<u>Health Affairs Committee</u> continues to support the GAPNA members by participating in advocacy groups that make an impact on the patient population we serve. The committee provided input and followed ongoing legislation such as the VA Nurses Manual that allows VA NPs full practice authority and the Reauthorization of the Older American's Act that provides grants to states for older adults programs and education in the field of aging.

<u>Historical Committee</u> continues to work on archiving GAPNA history with Center for Nursing History and University of Virginia. Chapters have started working with the committee for submission.

<u>Chapter Leadership Committee</u> welcomed two new chapters: Heartland and Seattle. Meeting guests included representatives from the Awards Committee, Health Affairs, Foundation Grants, and AJJ to help Chapters design a Facebook page. Other guests included a variety of SIG representatives. Successful roll out of the first Membership challenge, "March Madness," with Southern CA winning the challenge. Reached out to others interested in forming new chapters. Developed a Chapter Toolkit to include successful Student Night Out contributions. 10th year anniversary name tag ribbons for New England, North Carolina, and SW Wisconsin. Shared resources to enrich Chapter meetings.

A successful virtual "GoTo" meeting shared. Chapter Map updated with the year each Chapter was established. Newsworthy section on Agenda created. Newsletter article contribution.

<u>Nominating Committee</u> has yearly challenge of coordinating the election for open positions on the Board of Directors and encouraging participation in the election. Also, identified and corrected an error in the GAPNA bylaws for the Board's attention.

<u>Practice Committee</u> had poor membership and engagement. Temporarily suspended by Board on October 15, 2015 and then put on hiatus by Board on December 17, 2015.

<u>Research Committee</u> met multiple times and developed ad hoc committees to target areas of improvement for GAPNA. The areas included the Research Committee exhibit booth, a "Cash Cab" game that increased interaction, improving the awards program for the poster and podium presenters and meeting with the Education Committee representatives to improve the call for abstract for presentation at the conference with the positive outcome of more abstracts and more posters. The Research Booth provided free consultations to assist attendees with their research/clinical project.

GAPNA SIGS at Work:

<u>Hospice/Palliative Care SIG</u> is a small but dedicated group that prepared a Pre-Con presentation at GAPNA conference 2016. They also presented three journal club articles as part of their meetings. Also, they began work on a resource list for the GAPNA website.

House Calls SIG no report submitted.

<u>Leadership SIG</u> made additions to the GAPNA website for the Online Leadership Toolkit Modules on "Ethical and legal issues in leadership," as well as "leadership core resources and references." They also prepared for a presentation at GAPNA conference 2016.

<u>PAC/LTC SIG</u> is a large group that updated two clinical practice links on the website. They have been building bridges to have an APRN presence with the Society for Post-Acute and LTC Medicine (AMDA). A part of their calls are discussions of "hot topics" for this practice setting. They also serve as a resource for GAPNA and other related organizations.

<u>Transitional Care SIG</u> discussed different settings and roles APRNs are playing in transitional care in different areas of the country. They submitted a presentation proposal for GAPNA conference 2016 and an essay highlighting their SIGs and the role SIGs can plan in GAPNA members' practices.

<u>Cross Cultural Care SIG</u> transitioned from the LGBT Focus Group. This was their first year as a SIG so they began by establishing goals and a mission. They then published an article in the newsletter and planned a session for GAPNA conference 2016.

<u>GeroPsych Nursing SIG</u> made progress on multiple initiatives, including a position paper on geropsychiatric nursing as a subspecialty, a manuscript for GN, and a resource list. They had several submissions to the GAPNA newsletter, prepared for a geropsych Pre-Con at GAPNA conference 2016, and distributed a survey on possible geropsych topics.

<u>Veterans Care SIG</u> was formed at the conference.

Health and APRN Influences:

- LACE is working on APRN role and specialty roles.
- Colleagues at AARP continue to endorse the role of the APRN including GNPs in their policy book, currently under revision. New language in the policy book will include specific language calling for changes in policy to allow APRNs to order home health and hospice, and conduct initial visits in skilled nursing facilities, among other positive moves forward.
- July 2016, the proposed rule change published in the *Federal Register* to allow full practice authority for advanced practice nurses in the Veterans' Administration (VA) (the nation's largest employer of APRNs). This proposal (RIN: 2900-AP44 Proposed Rule Advanced Practice Registered Nurses [81 Fed. Reg. 33155, May 25, 2016]) authorizes NPs to practice to the top of their education and preparation without physician supervision in all areas of practice with the exception of prescribing controlled drugs, which remains under the authority of the federal Controlled Substances Act. As of August 31, 2016, VHA employs 940 Physician Anesthesiologists (physicians), 5,444 Nurse Practitioners, 937 CRNAs, and 386 Nurse Specialists. Nurse Practitioner is currently #3 in the top 5 difficult to recruit and retain nurse specialites.
- On July 22, 2016, President Obama signed the Comprehensive Addiction and Recovery Act (CARA) into law. CARA authorizes qualified nurse practitioners (NPs) and physician assistants (PAs) to become waivered to prescribe buprenorphine in office-based settings for patients with opioid use disorder (OUD) for a five-year period expiring in October 2021.

GAPNA Chapters: 21