It is hard to believe that we are already half way through 2008! We are just a few months from our conference that promises to be one of our best yet! You all should have received the conference brochure at home. “Gateway to Quality: Improving Care for Adults Across the Continuum” – never has a conference title and theme embodied our organization in a more meaningful way. Kathy McCauley, PhD, RN-BC, FAAN, FAHA, Associate Dean and Professor at the University of Pennsylvania, School of Nursing is our Keynote Speaker. Dr. McCauley is part of the research team led by Dr. Mary Naylor that is defining care strategies for vulnerable elders, particularly with cognitive impairment and heart failure. I’m sure we will all be inspired by her words and that is just the beginning! This year we have tried to maximize the number of educational opportunities for our members with pre- and post-conference opportunities for beginners and experienced advanced practice nurses.

The conference title is also a reflection of our efforts as an organization to emphasize that our members provide care for adults in all setting and focus on quality, a mainstay of our profession. Not all of our members are gerontological nurse practitioners, many are trained in family or adult care or may be clinical nurse specialists, but all care for older adults providing our area of commonality. This has been a key issue that the board of directors has discussing this year. To that end, the BOD will be bringing a recommendation to annual business meeting to consider a name change that is more reflective of our diverse membership of advanced practice nurses.

While the conference planning committee, board of directors and staff are working very hard to plan and execute the conference, the full potential of the conference can only be realized with great attendance! Our ability to network and share experiences is truly what makes our conference so special. The conference provides many opportunities for social networking as well as the outstanding educational experiences. The NCGNP Foundation will once again, host a Fun Run/Walk and the Golf Tournament. We have a wine and cheese reception, our annual membership meeting, the awards reception and awards dinner. It promises to be an exceptional conference. I hope to see you all there!

Sincerely,

Deb Bakerjian, PhD, MSN, RN, FNP
President
Committee Reports

Health Affairs Committee: Retooling and Redesign of Health Care: An Overview

Pat Kappas-Larson, MPH, ARPN-C
Health Affairs Committee Chair

The United States today faces enormous challenges as the numbers of those needing health care increase, access decreases, and Congress demonstrates little focus on the nursing bills that are pending. The 110th Congress has 15,086 bills, resolutions, and amendments that have been introduced, yet as of this spring, only 188 have become law and none of them, except for some appropriations, has been related to addressing nursing.

As of the writing of this update from the Health Affairs Committee, it does appear that nursing educational programs will receive much-needed funding; however, vital bills, resolutions, and amendments affecting practice, safety, and access are going unaddressed. Gaining attention of our representatives in both the House and Senate has been problematic given the pending election, the war, and significant domestic issues. Additionally, it should be noted that the president has been in a veto mode and his budget for this fiscal year fostered a negative stance, even promoting zero funding for health care education and training programs.

While this is occurring, the Institute of Medicine released the report prepared by the committee on the Future Health Care Workforce or Older Americans that sets out a course of action to improve our nation’s readiness to care for an aging population. This report calls for fundamental reform in the way that care is delivered to older adults and puts forth a plan that requires expansion of the roles of those providing that care. The need for training in the principles of geriatrics and building expertise is addressed and highlighted. As this plan for retooling is implemented, we should see the promotion of new models of care, changes in reimbursement, and new Medicaid and Medicare programs. We need to be aware of and be positioned to impact the system redesign that can and will impact our practices.

Lastly, we also need to be aware of the movement to establish medical homes, an idea that is growing in popularity. The basic concept is that providing patients with a point of coordinated care by a provider who has in-depth knowledge of that patient will lead to better health outcomes. Currently, there are initiatives to incorporate the concept in federally-funded programs such as Medicare. The current Medicare demonstration and its expansion does not include NPs. We need to advocate for inclusion. For more detail both the ACNP and AANP websites have position papers for your review. While you are on those sites or the NCGNP website, you will also want to review the document on the Doctor of Nursing Practice as prepared through a coordinated effort or at least seven advanced practice organizations.

Approvers Unit Committee

The NCGNP Approver Unit approves continuing education for American Nurses Credentialing Center (ANCC) credit sponsored by any agency outside the national organization. Local chapters can obtain approval for continuing education programs, including one per year for up to eight units at no cost. Please also encourage your employers and other organizations to utilize the NCGNP Approver Unit. The ANCC requires an accredited approver or provider award 51% of continuing education units submitted for certification renewal. The application and guidelines can be found on the NCGNP website under “Continuing Education,” or follow this link: http://www.ncgnp.org/displaycommon.cfm?an=20. For questions, please contact Liz Macera at liz.macera@nursing.ucsf.edu or (415) 502-7774.

The National Conference for Gerontological Nurse Practitioners Approver Unit is accredited as an approver of continuing nursing education by the American Nurses Credentialing Center’s Commission on Accreditation.

Chicagoland Gerontological Advanced Practice Nurses

The first meeting of the Chicagoland Gerontological Advanced Practice Nurses was held November 14, 1997, with 16 in attendance. CGAPN celebrated its first ten years as a chapter on July 24, 2008, with forty members and guests attending the anniversary celebration aboard the Odyssey dinner cruise on Lake Michigan.
Medicare is looking for 12 communities across the country that can bring together a broad cross-section of community leadership, provide leadership, leverage resources, and recruit small and medium-sized primary care physician practices willing to provide the evidence that electronic health records (EHR) can improve the quality of patient care.

As many as 1,200 physician practices nationwide could be eligible for incentive payments of up to $58,000 per physician—up to $290,000 per practice—over the five-year life of the demonstration. Incentives would be based on a practice’s level of EHR use, and for reporting and performance on 26 clinical quality measures.

An entire community can benefit from the use of EHRs, which can help avoid drug interactions, redundant lab and diagnostic tests—meaning fewer medical errors and potentially lower costs. Medicare plans to announce the winning communities in June, 2008.

To learn more about the new EHR demonstration project, visit: http://www.cms.hhs.gov/DemoProjectsEvalRpts/downloads/2008_Electronic_Health_Records_Demonstration.pdf. Email EHR_Demo@cms.hhs.gov or EHR_Demo_communityselections@cms.hhs.gov for more information about community selection.

Position Available for Assistant or Associate Professor in Gerontological and Adult Nurse Practitioner Program

The University of North Carolina at Greensboro School of Nursing is announcing a new tenure-track position for an Assistant or Associate Professor in the Gerontological and Adult Nurse Practitioner Program. This person will teach largely in the Nurse Practitioner program.

Eligibility for licensure in North Carolina, national certification as either a GNP or ANP, and a doctorate in nursing are required. Teaching experience is required as well as a scholarly record of research and publication that would be expected of an Assistant or Associate Professor. Experience in Long Term Care or with frail adults preferred. Salary and rank will be commensurate with experience and credentials.

The UNCG School of Nursing is one of the largest nursing programs in North Carolina with over 1,300 students enrolled in BSN, RN-BSN, MSN, and MSN/MBA programs. A PhD program began Fall 2005 with a focus on health promotion and health disparities. Master’s concentrations include the Nurse Anesthesia, Adult/Gerontological Nurse Practitioner, Nursing Administration, and Nursing Education.

UNCG is a research intensive university offering over 20 doctoral programs. Please visit our website at http://www.ci.greensboro.nc.us.

Please send a letter of application; statement of teaching, research, and service activities; curriculum vita; representative publication reprints; and the names, addresses, telephone numbers, and e-mail addresses of three references to the following address:

Dr. L. Louise Ivanov
Associate Professor and Chair
Community Practice Department
UNCG School of Nursing
PO Box 26170
Greensboro, NC 27402-6170
(336) 334-5105 - llivanov@uncg.edu

Review of applications will begin November 1, 2008, and will continue until the position is filled. Position will be available August 1, 2009. EEO/AA.
May 2, 2008, NCGNP member Valisa Saunders, MN, APRN, GNP-BC, was presented the American Geriatrics Society (AGS) “Clinician of the Year” award. Valisa received the award at AGS’s Annual Scientific Meeting in Washington, D.C. for her dedication and contributions in the advancement of gerontology practice and quality of care. It is the first time a non-physician has received this award.

Saunders’ 25-year career as a GNP has focused on improving the quality of elder care in Hawaii. She was instrumental in developing the standard-setting nursing home rounding program in Hawaii for Kaiser Permanente, which officially launched in 1991. Today, nurse practitioners and physicians from various organizations throughout the Hawaiian Islands have implemented the program in which rounds, and timely phone access are made to over 25 nursing homes caring for over 1,000 elderly patients. The program has resulted in the decline of emergency department visits and hospitalizations of nursing home residents through early detection and treatment of medical problems in the facilities.

Ms. Saunders, who has been with Kaiser Permanente for most of her 24 years in Hawaii, helped pioneer the GNP role in the state through work to develop enabling regulations for Advanced Practice Registered Nurses, blending leadership and clinical roles and her work with students from the University of Hawaii. In 1986, she joined Kaiser Hawaii to help launch the Medicare Risk contract clinical program that including screening for high risk elderly, a case management program, hospital discharge planning using nurses (for the first time), interdisciplinary geriatric assessment, a home health service, and nurse managed foot clinics. She served as the Hawaii principle investigator for a Kaiser six region, three year “post-diagnosis, Dementia” program, and managed an outside contract to provide neighbor island geriatric assessment clinics for Native Hawaiians, with NPs for three years.

More recently Ms. Saunders has helped in spearheading Kaiser Hawaii’s Geriatric Primary Care service in Honolulu that sees complex geriatric patients in its clinics, or house calls at home, in care homes, foster homes, assisted living, or Hospice. She works with geriatricians, a geropsychiatrist, RNs, medical assistants, social workers, and pharmacists, and has easy access to other primary care providers and specialists via Kaiser’s Electronic Medical Records. Bridging the gap between traditional outpatient services and Hospice care for many Dementia patients, while avoiding unwanted hospitalizations is one of the goals of the service. “It’s requiring a major paradigm shift in how end of life care is conceptualized and delivered, in times when new resources are not easy to come by. Making Advance Directives counseling a high priority and advance care planning for dementia patients are starting to have a positive impact on providing the type of care that people really want,” according to Saunders. She says, “Most people don’t choose to die in the hospital when their time comes, but most still do. We’re determined to change the equation on the side of patient preference, and starting to see results.”

An expert in state, Medicare, and federal regulations governing APRNs, Saunders also regularly presents lectures to various nursing and gerontology groups and lectures at the University of Hawaii. She is the author of a book chapter on psychological disorders in the elderly, in the text *The Nurse Practitioner in Long Term Care: GUIDELINES for CLINICAL PRACTICE* (Jones & Bartlett publishers, 2007). She treats many cognitively impaired patients with behavioral symptoms in dementia and works hard to avoid using psychotropic drugs as chemical restraints, preferring the more time intense method of educating family and caregivers on behavioral and environmental interventions first.

Saunders has received numerous professional awards, including the Excellence in Clinical Practice Award from the National Conference of Gerontological Nurse Practitioners in 2004. Valisa developed the NCNGP website materials on regulatory issues and billing and coding for GNPs, and she presents these topics at the NCNGP annual pre-conference.

A native of Southern California, Valisa is a graduate of the UCLA School of Nursing where she received her BS and MN in nursing. She moved to Hawaii in 1984 with her husband and they recently celebrated their 30th wedding anniversary. They have a 16-year-old boy. When not attending her son’s swimming, cross-country, and track meets, she and her husband also swim regularly and competitively in open ocean swims.
Chapter News

Delaware Valley Chapter

The Delaware Valley Chapter continues to work to increase membership. Our last meeting was on Thursday July 10th and will be on treatments for COPD. If you are interested in joining please contact Suzanne Ransehousen at suzyr107@yahoo.com.

Great Lakes Chapter

Alice Early, MSN, ANP-BC
President, Great Lakes Chapter

The Great Lakes Chapter’s June meeting featured Dr. Kornacchione speaking on COPD. He was sponsored by GlaxoSmithKline. Twenty two people attended the meeting. We held elections at the business meeting. Our new secretary is Judy Wheeler and President-Elect is Alice Early. Our Great Lakes Chapter Excellance Award Criteria was finalized and accepted by the members. We will select and then honor our chapter’s first award recipient at our September meeting. Plans for our first annual geriatric conference “A Day Well Spent: Advancing Excellance in Geriatric Care” are continuing. Our one-day conference will be held on October 25, 2008, at the Marriott's Dearborn Inn in Dearborn, Michigan. For further information, please contact Alice Early at ame626@aol.com.

Magnolia Chapter of Gerontological Advanced Practice Nurses (MagGAPN)

Lisa Byrd, PhD, CFNP, Gerontologist
President, MagGAPN

The Magnolia Chapter had a great meeting in the Mississippi area with the inception of a Long Term Care Consortium. MagGAPN met with other key players in LTC such as pharmacists, administrators, and physicians to find ways to meet our mutual goals of improving care to patients in this setting. It will be a new collaboration which will meet quarterly in the central Mississippi area. We also met in Alabama for their first meeting with our group; we had a great turnout and learned about overactive bladder treatment therapies. We plan a future meeting in the Louisiana area to include the third aspect of our group. We would like to invite anyone in the Mississippi, Louisiana, or Southern Alabama area who wants to join our local chapter to email me at LByrd3@comcast.net for information and to be included in our communication network.

New England Chapter NCGNP Update

Katherine Howard, RN, BC-GNP
President, New England Chapter NCGNP

We all met on June 4, 2008, for a dinner/business meeting. Barbara Resnick, PhD spoke on “Evaluating functional capability and developing exercise programs for your mature clients.” The dinner program was well attended and the feedback was very positive. We were able to recruit members to assist with executive functions and the development of an educational committee.

The executive group will be getting together for a strategic planning meeting on Sunday August 17 at 11 a.m. at the 99 Restaurant on Route 20 in Marlboro, MA. Interested members are welcome to participate. RSVP to Katherine Howard, Chapter President at kynp@thehow.com.

Our next business meeting will be held at the NCGNP Annual Meeting in St. Louis – look for the poster announcing the information at the information board at the conference or on this website if we find a location sooner.

Finally, we are planning an educational meeting in November in Milford, Massachusetts. Be on the look out for further details.

Northern California Chapter of NCGNP

Jennifer Serafin, RN, GNP

Greetings from the Northern California Chapter of NCGNP! We are very excited, as we are publishing an article regarding our pamphlet on “Tube Feeding in Dementia” that we created in 2005. It should be printed in Geriatric Nursing in the next coming months. It discusses how we developed this pamphlet in our chapter. Since this first project was so successful, we are working on another pamphlet regarding CPR in the elderly.

We continue to strive and provide education to our members. Our full day CE Event in February 2008 had information on ordering lab tests, palliative care programs, the wound vac, geriatric foot diseases, and the management of anemia. This was an extremely successful event, and we plan to have another full day CE event in 2009. At our May 2008 meeting, we learned about Arixtra and UTIs.

Our next chapter meeting will be at the National Conference in September. Our next quarterly meeting will be in November!
Volunteers Needed as Advancing Excellence in America’s Nursing Homes Extends!

The Advancing Excellence in America’s Nursing Homes started out to be a two-year campaign but recently announced that it will be extending indefinitely. This announcement follows results that show nursing homes that have signed up for the campaign and set targets for improvement have improved at a greater rate than those nursing homes who have not participated in the campaign. These results have engendered the confidence of Acting CMS Administrator Kerry Weems, who has promised continued support for the campaign for at least the next two years.

Those of you with practices in nursing homes should become involved in this campaign. You can do this in at least two ways: signing up as an individual member of the campaign and secondly by getting involved with your state LANE. The LANEs need advanced practice nurses to provide expert clinical guidance in the LANE activities. LANEs coordinate a variety of different kinds of activities to provide education and support to nursing homes on the eight campaign goals. As a reminder, those goals are to reduce pressure ulcers, reduce restraints, better manage pain for short stay and long stay patients, set targets, monitor resident satisfaction, reduce staff turnover, and increase the use of consistent assignment of staff.

It is easy to get involved in the campaign. Go to the campaign website, www.nhqualitycampaign.org, click on Nursing Home Staff on the left and then click on the Join Today! button. Once you get to the sign-up page, you can also click to allow the LANE to contact you for participation. There are many opportunities for APNs who join the LANEs including developing leadership skills, teaching, and collaborating with other health professionals in the LANE. I strongly encourage those of you to volunteer for a worthwhile cause and become a change agent to improve the quality of care and the quality of life of our older adults in nursing homes.
New Considerations For Managing Osteoporosis In Long-Term Care

An Evidence-Based Approach

Abstract
Recent studies show that it is safe to assume that most women in LTC facilities are at a high risk for osteoporotic fractures and should be on therapy. Despite these alarming statistics, many patients are not being treated. This presents a viable opportunity to improve residents’ quality of life and reduce costs associated with fractures.

Determining which bisphosphonate products will provide the best outcomes for residents can be a difficult process because extrapolating clinical trial data from the long-term care population can be problematic. The evolving standard for efficacy in osteoporosis therapy is fracture reduction and early onset of protection at all fragility sites. These endpoints may not have been adequately studied in the clinical trials. Also, the lack of head-to-head data further complicates the evaluation of these agents. Integrating real-world data into the process offers many benefits together with new challenges. The goal of this program is to provide clinical and real-world evidence to better evaluate the differences in bisphosphonates.

Program Faculty

**William Simonson, PharmD, FASCP, CGP**
Independent Consultant Pharmacist
Immediate Past Chair, commission for Certification in Geriatric Pharmacy
Past President, American Society of Consultant Pharmacists
Suffolk, VA

**Rebecca Jackson, MD**
Associate Dean for Clinical Research, College of Medicine
Professor Medicine, Division of Endocrinology, Diabetes and Metabolism
Interim Director, Ohio State University Center for Women’s Health
Ohio State University Medical Center
Columbus, OH

Learning Objectives

- Cite the incidence of osteoporosis and identify the morbidity, mortality and cost factors associated with fractures in long-term care facilities
- Discuss the importance of early fracture reduction in this population
- Compare and contrast the differences in efficacy of the bisphosphonates for fracture reduction
- Define the value of real-world data for evaluating osteoporosis therapies and the implications for long-term care residents

Target Audience

*Geriatric Nurse Practitioners or Nurses that work in the long-term care setting.*

This activity has been developed and provided by Health Insights and is supported by an educational grant from The alliance for Better Bone Health, a collaboration between P&G Pharmaceuticals and sanofi-aventis US.

Accreditation

Health Insights is an approved provider of continuing nursing education by the PA State Nurses Association, an accredited approver by the American Nurses Credentialing Center’s Commission on Accreditation and is provider approved by the California Board of Registered Nursing California Provider # CEP 12643.

This activity will provide 1.0 contact hour of continuing nursing education credit (of which 0.5 credit hour is pharmacology).

There is no fee for this activity.

Access this educational activity at: www.healthinsightsllc.com
The NCGNP
Newsletter
NATIONAL CONFERENCE OF GNPS, INC.

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