

The GAPNA Newsletter

The Official Publication of the Gerontological Advanced Practice Nurses Association. Founded in 1981

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President's Message

As we enter into the New Year, the economy and healthcare reform are top concerns for all of us. The upcoming weeks are sure to involve more debate and discussion, and we will need to be diligent and knowledgeable about inclusive language and the impact of proposed legislation. GAPNA has joined the NP Roundtable, an auspicious group made of representatives from a wide variety of nursing organizations who have engaged together to build a common agenda for legislative and regulatory change. Our own Charlotte Kelley represents us at the table and ensures that every discussion includes consideration of the issues that can impact our areas of practice.

It is anticipated that in 2010, the primary emphasis for healthcare will be on reducing costs and creating value in the health system. Top priorities will include the adoption of information technology that is interoperable, payment reforms, increased oversight and the number of governmental agencies, payment reforms, and an intense focus on community health and consumer demand.

With a focus on primary care, advanced care practitioners can expect to be in demand and there will be greater recognition on the federal level. Increased recognition will provide an opportunity to impact the practice barriers that are currently experienced in all practice settings and will most certainly bring continuing focus from physician groups.

Our organization is working on your behalf and will keep you informed of the evolving discussions regarding reform and the impact on practice. We will continue to utilize every opportunity to represent your interests and bring forward your concerns. We are and will continue to be the subject matter experts who know and understand the needs of an aging population. Our organization intends to grow and expand, to be dynamic, to address the needs of the patients we serve. Welcome to a New Year; be healthy and be happy.

Sincerely,
Pat Kappas-Larson
President, GAPNA



**Pat Kappas-Larson,
MPH, APN-C, FAAN
President, GAPNA**

LET GAPNA WORK FOR YOU!

Attention GAPNA Members!

Your GAPNA website has the latest updates, publications, and information. Be sure to regularly check the GAPNA website at www.gapna.org

GAPNA EXCELLENCE AWARDS

GAPNA announced the recipients of the **2009 GAPNA Awards for Excellence**, which are given in recognition of member's contributions to Advancing Excellence in Elder Care.

The **GAPNA 2009 Excellence in Clinical Practice Award** was presented to **Nikki Davis, MSN, RN, FNP-C**. Nikki is an energetic clinician committed to improving the processes for patient care. Nikki utilizes the team approach in the delivery of care and stresses cultural sensitivity in dealing with the diversity of individuals in her care. Nikki was instrumental in the formation of the Atlanta (now Georgia) Chapter of GAPNA and served as its President. Nikki is a Nurse Practitioner and Clinical Advisor for Evercare in Atlanta, GA. Nikki was nominated by Katherine Abraham.

The **GAPNA 2009 Excellence in Community Service Award** was presented to **James F. Lawrence, PhD, GNP-BC**. James has a history of community service achievement and advocacy in the geriatric community. Growing up in a family that operated a nursing home, James learned the importance of being an advocate, representative, caregiver and voice for the quality care of the older adult. He has championed causes in the community to set up the Jefferson Street Clinic & Shelter the older homeless adults and was instrumental in the implementation of a home based care service as an alternative for nursing homes in his hometown. James serves as faculty at Emory University's ANP and GNP programs. James was nominated by Genevieve Powell, Cathy Powell, and Kelley Tramell.

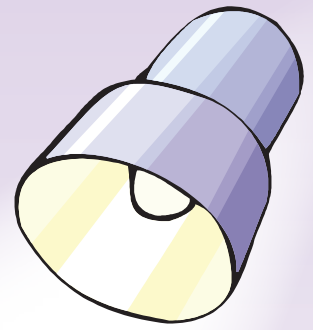
The **GAPNA 2009 Excellence in Education Award** was presented to **Evelyn Duffy, DNP, GNP/ANP-BC, FAANP** for extreme dedication to the promotion of gerontological curriculum for all nurses. Evelyn creatively and innovatively promotes gero nursing in the classroom and through podium and poster presentations at the local and national level. Evelyn is a proven role model to her students, and her love of educating students to care for the older adult is evident to her students. She has published and presented with her students in an effort to assist them to become confident professionals. Evelyn is an Assistant Professor and Director of the Adult/Geo NP Program at Case Western Reserve University. She also serves as the Associate Director of the Case Center on Aging & Health in Cleveland, OH. Evelyn was nominated by Laurie Kennedy-Malone and Alicia Wolf.

The **GAPNA 2009 Excellence in Leadership Award** was presented to **Kathleen Fletcher, MSN, RN, GNP-C, FAAN** in recognition of her 30+ years of proven leadership at the local, state and national level. Kathleen is recognized for her expertise, passion, and commitment to the care of the elderly and the nurses who care for them. Kathleen generously shares her time and expertise through active mentorship of health care professionals at not only the University of Virginia but also at the national and international level. Kathleen served as the President of NCGNP in 1996 and currently co-chairs the historical committee. She chaired the ANCC Board on Credentialing for Gerontology and served as an ANCC gero test item writer. At the State level, Kathleen has been appointed by two governors to positions that had direct impact on the care of the older adult. Kathleen Fletcher is the Director of Senior Services and Assistant Professor of Nursing at the University of Virginia Health System. Kathleen's nomination was supported by Courtney Lynder, Kathy Haugh, and Jonathon Evans.

GAPNA Chapter Excellence

In 2008 GAPNA implemented a Chapter of the year award. The **2009 GAPNA Chapter Excellence Award** was presented to the **Chicagoland Gerontological Advanced Practice Nurses**. The Chicagoland Chapter meets for quarterly Board and educational meetings and maintains regular electronic communication with its members. Over the last ten years, the chapter has maintained membership between 45-65 members. The chapter encourages committee membership and mentors students and new graduates to facilitate them to the new role by encouraging them to present at a program or attend the national conference. A leadership internship is offered providing financial support to attend the GAPNA national conference. The chapter provides an Annual Clinical Research to three recipients and a Student Internship Mentorship Award. Three chapter members serve as Chairs of GAPNA National Committees and many members have served on the Board of Directors over the years. The Chapter has standing Education and Membership Committees. Chicagoland Chapter Board Members are President Valerie Matthiesen, President-Elect Anne Maynard, Past-President Joanne Miller, Secretary Margaret Walkoz, and Treasurer Cindy Nissen.

FOR MORE INFORMATION ABOUT THE GAPNA EXCELLENCE AWARDS, PLEASE SEE PAGE 7 OF THE NEWSLETTER.



Member in the Spotlight:

Jennifer Serafin, RN, MS, GNP

In October 2009, Jennifer Serafin, GNP became the new chair for the Member Services Committee for GAPNA. Previously, she served as chair of the Nominating Committee for one year. She was elected as the Chapter President Northern California twice, and now is the chapter treasurer. Not only does Jennifer stay active with GAPNA locally and nationally, but she also is involved in the California NP organization as well.

Born and raised in Baltimore, Maryland, Jennifer graduated from the University of Maryland, School of Nursing as a BSN in 1995. During nursing school, she was able to witness many different APN roles in action. She was very impressed by the Cardiovascular NPs in one of her clinical rotations, thinking that she wanted to be just like them when she “grew up.” Another thing that impressed Jennifer about the nursing program at UMAB was they really reinforced that she should continue her education in nursing even after earning her BSN. After graduation, Jennifer worked as an RN for several years in Baltimore, but she yearned to do more in her nursing career and education. She applied to several NP schools all over the country, and particularly wanted to focus on Geriatrics. In the end, she chose to move far away from her family and friends, branching out to see what the west coast had to offer her.

In September 1997, Jennifer started the University of California San Francisco’s Gerontological Nurse Practitioner Program. While in the program, she continued to work at several Bay Area hospitals, gathering more varied nursing experience from working on different units like MedSurg and telemetry. Graduating from UCSF in June 1999, it took her several months to find a NP job. She is in her 10th year as a Geriatric NP at the Jewish Home for the Aged in San Francisco, a 420 bed long-term care facility that provides care for San Francisco’s frail older adults, including many Russian immigrants. In her current practice, she co-follows many long term care residents with staff physicians, and runs several on-site clinics with visiting specialists, which has allowed her to gain valuable clinical expertise as well as excellent physical exam skills.

Jennifer also serves as an Associate Clinical Professor at UCSF, which involves guest faculty teaching in the classroom, as well as providing hands-on expertise for students in the Health Assessment Skills Laboratory. Throughout her career at the Jewish Home, she has also served as clinical preceptor for countless graduate nursing students from several Bay Area schools.

It is our desire to highlight members of our organization through the Member in the Spotlight article in each newsletter issue. We encourage members to nominate colleagues who have and continue to do outstanding work in geriatric nursing. More information can be obtained from Executive Director Harriet McClung and newsletter editor Shelley Yerger-Hawkins.

Research Committee

**Joanne Miller, PhD, APN/GNP-BC,
Chair, Research Committee**

The Research Committee was very active at the GAPNA national conference and business meeting in October. There were six oral presentations and 20 posters of exciting and innovative research and clinical projects presented. Congratulations to the following authors and presenters for being selected as the best in their classification.

Best Research Presentation:

Physical Function as a Nurse-Sensitive Outcome in Hospitalized Older Adults, Marie Boltz, PhD, RN, GNP-BC and Elizabeth Capezuti PhD, RN, FAAN

Best Project Presentation: (Tie)

Interact II: Interventions to Reduce Acute Care Transfers, Laurie Herndon, MSN, GNP-BC; Alice Bonner, PhD, GNP; Joseph Ouslander MD and Gerri Lamb, PhD, RN, FAAN

Implementation of Standing Orders for Long Term Care Practice Call Center Reduces Number of Interruptions to Clinicians Seeing Patients in Long Term Care, Debra Radomski MSN, GNP-BC; Donna Hamby, RN, ACNP-BC; and Dawna Boudreaux, RN

Best Research Poster:

Promoting Self-Efficacy and Preparedness in Caregivers of Older Cancer Patients before Hospital Discharge, Cristina Hendrix DNS, GNP-BC, FNP; Richard Landerman, PhD; Amy Aberneth, MD; Joseph Moore, MD and Joey Misuraca, BSN

Best Project Poster:

Implementation of a Constipation Protocol, Denise Lyons, MSN, GCNS-BC and Patricia Curtin MD, FACP, CMD

There are plans to include more research topics and sessions in the 2010 conference. Keep watching for new developments and opportunities to receive and provide mentoring on writing, research, and project development for GAPNA members and students.

The Research Committee and GAPNA Board review any requests for access to GAPNA membership for surveys for data collection. It is important that GAPNA members see the results of their participation in the surveys. Please, see the abstract below for the results from a recent study. Also, watch for more details in the summer newsletter and GAPNA website on the research pre-conference on September 22, 2010, at the national conference and business meeting.

Primary Care Providers' Perceptions of Interpretation Services

Mary Sobralske, PhD, ARNP and Moon Lee, PhD

Washington State University Researchers

Major reasons for health care disparities are communication and language barriers among primary care providers (PCPs) and their patients. Studies dealing with language issues in healthcare reveal that language differences between healthcare professionals and patients negatively affect the healthcare process in various ways. Therefore, PCPs' perceptions of interpretation services in their clinical practice were examined. Issues in treating limited English proficiency patients when interpretation services were required were identified.

This exploratory, descriptive study used a national anonymous on-line survey for data collection. N=118 physicians, nurse practitioners, and physicians' assistants who responded to 28 questions pertaining to their experiences with interpretation services. Descriptive statistics of participants' responses included evaluation of standard deviations, frequencies, and means.

An interpreter was used on average 16 times per month. PCPs were satisfied; however, several problems affecting quality of healthcare were identified: trouble understanding the exact symptoms of patients and explaining the treatment, lack of knowledge of family, social, economic, and cultural factors that influence health and healthcare, difficulty understanding treatment preferences, spending too much time on translation, and the inability to establish trust and rapport with the patient. Those who used professional interpreters were more satisfied than those who used non-professional help.

This study provides a better understanding regarding communication needs in primary care when non-English languages are spoken. Using professional interpreters for clinical encounters should be encouraged among primary care facilities for their own benefit and efficiency. An expanded report of the study is available from marysobralske@wsu.edu.

The researchers would like to thank GAPNA members who participated in this study.

Nominating Committee

Beth A. Slutsky, GNP
Chair, Nominating Committee

A happy and healthy 2010 to all! As we move into the New Year, we encourage you to consider running for a position on the national level. We are seeking candidates for the following positions, beginning now: **President-Elect, Secretary, Director at Large and Nominating Committee** (2 openings). Please see the Call for Nominations on page 13 for details concerning the specifics of these positions as well as the application process.

Self-nomination is strongly encouraged. If you are interested or want to learn more about these positions, please contact any member of the Nominating Committee:

Beth Slutsky at bas1000@att.net • M.J. Henderson at mj@mjhsb.com • Kaci Jackson at porsche_rn@live.com

You may also contact the National Office at (866) 355-1392 or email gapna@dancyamc.com.

St. Scholastica professor honored by U of M School of Nursing:

Siobhan McMahon Teaches Future Nurse Practitioners to Care for Elders

MINNEAPOLIS/ST. PAUL (December 17, 2009)

Siobhan K. McMahon, assistant professor of nursing at the College of St. Scholastica, recently received the Star Award from the University of Minnesota School of Nursing Hartford Center of Geriatric Nursing Excellence. The award is presented annually to the outstanding fellow in the school's Faculty Learning about Geriatrics Program (FLAG).

Go to <http://www.nursing.umn.edu/AboutUs/News/News2009/SiobhanMcMahonHonoredbyUofMSchoolofNursing/index.htm> to read the full release.

Aneisha Tucker

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Newsletter Correction

In our winter issue article announcing the Foundation Awards, Alice Early, ANP, winner of the David Butler Spirit of GAPNA award, was erroneously reported as from the Chicagoland Chapter while she is actually a member of the Great Lakes Chapter.

Chapter News

Texas Gulf Coast Chapter

Liz Godlove, GNP, ANP

Gulf Coast GAPNA President

It has been an exciting year here in “almost sunny” Houston. Recently we voted on changing the name of our local chapter. We decided to follow the lead of the national organization and be all inclusive of the many APN roles. We are now officially the Gulf Coast Gerontologic Advanced Practice Nurses Association. We will have elections for new officers at our next meeting, and we hope to continue our present format of meetings, as requested by the members. We are also entering the electronic age by working on setting up a web site. We can't wait to invite the GAPNA board to view our site when it is all set up.

Chicagoland Chapter

Valerie Matthiesen, PhD

Adult/Geriatric APN

The Chicagoland Chapter hosted a successful dinner meeting on October 21, 2009, for geriatric advanced practice nursing students who are interested in working with older adults. More than a dozen APN students from four local nursing colleges met with CGAPN members to learn about various nursing roles and issues in geriatric practice. Many of these students joined the chapter and are now being mentored on the value of professional local and national membership following graduation.

This year the chapter initiated a Leadership Internship position which is for a current APN student or new graduate. Our first intern, Michael Meaney, a GNP who practices with a GI group at Northwestern Hospital in Chicago, is working with the CGAPN Board on special projects and attends all board meetings. He set up a members' only group on LinkedIn to provide for better member communication. The chapter hopes that by providing mentoring in leadership, our younger members will provide future leadership to the chapter and perhaps the national organization.

Looking for a Chapter Near You?

ARIZONA (SONORAN)

Mariam Guarino
Mguarino6@cox.net

MARYLAND (BALTIMORE)

Elizabeth Galik
galik@son.umaryland.edu

TEXAS (GULF COAST)

Elizabeth Godlove, GNP, ANP
elzgd1@earthlink.net

NORTHERN CALIFORNIA

Julie Dutton
jdutlog@comcast.net

MASSACHUSETTS (NEW ENGLAND)

Timothy P McGrath
tmcnurse@gmail.com

WISCONSIN (SOUTHEAST)

Lynn Maloney, RN, PhD., ANP-BC, GNP-BC
lynn@bluegoose.org

DELAWARE/PENNSYLVANIA

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mash0129@aol.com

MICHIGAN (GREAT LAKES)

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FLORIDA

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joannfisher@oslermedical.com

NORTH CAROLINA (TRIAD)

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GEORGIA (ATLANTA)

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OHIO

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sandra.jorgensen@case.edu

ILLINOIS (CHICAGO)

Valerie Matthiesen
vjmatth@aol.com

TENNESSEE (MIDDLE)

Jennifer Kim
Jennifer.kim@vanderbilt.edu

LOUISIANA/MISSISSIPPI (MAGNOLIA)

Dr. Lisa Byrd
Lbyrd3@comcast.net

TENNESSEE (MIDSOUTH)

Patricia Bader
P_bader@comcast.net



Interested in Starting a Chapter?

Contact GAPNA Chapter Services Specialist, Megan Menth at (866) 355-1392, (850) 471-7075, or e-mail her at megan.menth@dancyamc.com

AWARDS FOR EXCELLENCE NOMINATIONS

GAPNA invites members to submit a nomination for one of the following Excellence Awards:

GAPNA EXCELLENCE IN CLINICAL PRACTICE AWARD: This award for outstanding clinical practice should be to an individual who demonstrates a commitment to geriatric clinical practice. This award should be for an individual who demonstrates, through the use of geriatric principles, outstanding geriatric care that goes well beyond the traditional service role of their profession. The award highlights clinical practice as an important element of the mission of nursing professionals and singles out individuals who serve as examples of geriatric expertise.

GAPNA EXCELLENCE IN LEADERSHIP AWARD: This award for outstanding leadership should be to an individual who demonstrates a commitment to geriatrics; through direct care, education, research and/or XXX. This award should be for an individual who demonstrates the tenacity to advocate, through a variety of means, for geriatric education and care in a variety of settings that goes well beyond the traditional service role of their profession. The award highlights leadership as an important element of the mission of nursing professionals and singles out individuals who serve as examples of geriatric expertise.

GAPNA EXCELLENCE IN COMMUNITY SERVICE AWARD: This award for outstanding community service should be to an individual who demonstrates a commitment to service to the community. This commitment should be demonstrated through the development or participation in programs that go well beyond the traditional service role of their profession. The award highlights community service as an important element of the mission of nursing professionals and singles out individuals who serve as examples of social responsiveness on the part of the nursing community.

GAPNA EXCELLENCE IN RESEARCH AWARD: This award for research should be to an individual who demonstrates a commitment to research in nursing that benefits the geriatric community. This commitment should be demonstrated through the development or participation in research projects that emphasize or go beyond the traditional service role of their profession. The award highlights research as an important element of the mission of nursing professionals and singles out individuals who serve as examples of nursing scientists within the nursing community.

The award recipient must have a broad-based, continuing commitment to research as reflected in a variety of programs and initiatives which are responsive to the geriatric nursing community. This recipient may be active in conducting research, mentoring other researchers, and contributing to ongoing research of other nursing scientists.

GAPNA EXCELLENCE IN EDUCATION AWARD: The Award for Excellence in Education recognizes an individual involved in the teaching and/or design of gerontological nurse practitioner curriculum or course content. The faculty member will demonstrate knowledge of the care of older adults and the ability to translate that knowledge to enhance students' understanding in innovative ways. The faculty member will encourage and inspire advanced practice students to develop their excellence in gerontology. In addition to excellence in teaching, the faculty member will exhibit excellence in practice and service to the community.

Deadline for Submission is June 1, 2010

To download an Award for Excellence nomination form visit www.gapna.org or contact the GAPNA National Office at gapna@dancyamc.com or call 866-355-1392

Attention Members:

Effective January 1, 2010, the Gerontological Advanced Practice Nurses Association (GAPNA) annual membership dues increased from \$75.00 to \$100.00. The increase in dues was announced at the GAPNA 2009 Annual Educational Conference & Business Meeting in Savannah, GA.

One of the benefits of GAPNA membership is the opportunity for you to be a member of a local chapter. The dues increase will provide paid memberships to all GAPNA members to join a local chapter. If you are already a member of a local chapter, you will no longer pay local dues. If you are not currently a member of a local chapter, you will have the opportunity to become a member of the local chapter closest to you. If you are not in an area where there is a local chapter, the additional funds from the dues increase will become GAPNA operating income with the provision that a stipend be provided to all forming chapters that have completed initial work for chapter charter. GAPNA members in areas where there are no local chapters are encouraged to contact the National Office for information about starting a chapter.

Your ongoing commitment to GAPNA and to the advanced practice nursing care for the older adult is very much valued and appreciated. Please feel free to contact Harriet McClung, GAPNA Executive Director, if you have any questions or concerns regarding your membership dues.

SAVE THE DATE

GAPNA 2010

*Join us in the
Land of Enchantment!
Coming Together to Meet the
Evolving Needs of Older Adults*

**Annual Educational
Conference
& Business Meeting**

September 23–25, 2010

Hyatt Regency Albuquerque
Albuquerque, NM

care • continuity • connection

GAPNA
Gerontological Advanced
Practice Nurses Association

The Gerontological Advanced Practice Nurses Association advances the practice of its members and the well being of the public through advocacy, dissemination of knowledge, and provision of member growth opportunities.

www.gapna.org

ADVANCING EXCELLENCE NOW IN PHASE 2!

Deb Bakerjian, PhD, RN, FNP

On October 22, 2009, the Advancing Excellence campaign rolled out their new goals and revealed the new and improved website at www.nhqualitycampaign.org. All nursing homes that want to continue to participate must re-enroll for the campaign. The campaign has set a goal of signing up 5,000 nursing homes by January 31, 2010. GAPNA members who work in nursing homes have an important role in making sure that all the nursing homes where you do work are part of the campaign. You can help them to choose goals, provide specialized training, or just be a champion for their quality improvement efforts!

The new and revised goals are now on the website with the new national targets for each of the goals (See Figure 1). In some cases, the goals have simply been updates; in other cases, they were enhanced and there are also two new goals. The new registration process allows each nursing home to evaluate and review the goal information, the resources that are available, and to determine where their nursing home measures on the clinical goals in comparison with the nation and their state PRIOR to choosing which goals they will work on this next two years. One thing that is new is that nursing homes will have to select a target for ALL goals chosen. This requirement exists because we found nursing homes that set targets performed better than those nursing homes that did not select a target. WE STRONGLY ENCOURAGE THE NURSING HOMES TO DISCUSS THE GOAL SELECTION WITHIN THEIR LEADERSHIP PRIOR TO SELECTING! Once the goals have been selected, you can't change them, although nursing homes will be able to change the targets. This should be an organization wide quality campaign. Involve the staff; get their input on what areas need the most work and make this a team effort!

Joining the campaign and selecting goals is very easy. There are three ways to join: as a nursing home, as a staff member, or as a consumer. Just go to the website at www.nhqualitycampaign.org, click on the right REGISTER TODAY button in the middle of the page. Only nursing homes can select goals; however, anyone can join the campaign and review the data. Profiles of each state are available that show statewide pressure ulcer, restraint and pain quality measures (QMs) compared to the national average and ranked relative to other states. The profiles also show the number of nursing homes in each state with pressure ulcer rates above 20% and restraint rates above 11%. This information is useful for Advancing Excellence LANEs and/or other statewide stakeholder groups to plan educational activities. (Go to www.nhqualitycampaign.org, click on PROGRESS and STATE. STATE PROFILES, listed at the top of the page, are available in PDF and PPT formats.)

In addition to the State Profiles, anyone can access publically reported nursing home-specific data and view comparisons of nursing homes' performance compared to national and state performance as well as performance and trends over a period of time. The data come from the MDS and are published quarterly on the Advancing Excellence Web site. This data is public information and is available to anyone. (Go to www.nhqualitycampaign.org, click on PROGRESS and NURSING HOME. Then click on the PUBLIC QUALITY MEASURE TREND GRAPHS. Look for the drop-down menu called STATE and click. Choose the State you are interested in and then select the Nursing Home.) All nursing homes that are Medicare-certified are listed.

Nursing Homes that participate in the Advancing Excellence Campaign have access to a special set of data that provides more precise information and shows comparisons of performance over time, comparisons to state and national performance and comparisons to goals that the nursing home has set. (Go to www.nhqualitycampaign.org, click on PROGRESS and NURSING HOME. Log-in to view your nursing home's data.) Watch the news box on the homepage of the Advancing Excellence Web site for a special Webinar to review the data, how to access it, and how to use it.

REMEMBER...

NURSING HOMES THAT JOINED THE CAMPAIGN IN PHASE 1 DID BETTER ON THE CLINICAL GOALS AS MEASURED BY CMS, THAN THOSE NURSING HOMES THAT DID NOT JOIN. THE NURSING HOMES THAT JOINED AND SET A TARGET DID EVEN BETTER!

The campaign has updated the resources available on the website. The resources for the clinical goals are evidence based and have been reviewed by CMS Licensing and Certification and are consistent with CMS standards. All of the past webinars are still on the website. Most of the resources have been developed by the Technical Assistance Workgroup (TAW). This interdisciplinary group is made up of clinicians from all over the U.S. who meet together regularly by teleconference throughout the year to work on the campaign resources. In this next year, the TAW will really be focusing on developing additional resources for the new goals and in making the existing resources more functional for nursing home staffs. GAPNA members, who are interested in participating in the TAW, please email Deb Bakerjian at debra.bakerjian@ucdmc.ucdavis.edu.

(continued on page 10)

ADVANCING EXCELLENCE NOW IN PHASE 2!

(continued from page 9)

FIGURE 1: ADVANCING EXCELLENCE PHASE 2 GOALS

ENHANCED GOAL 1 – Staff Turnover: Nursing homes will take steps to minimize staff turnover in order to maintain a stable workforce to care for residents. **(Now measures CNA, RN, LVN, DON, NHA)**

REVISED GOAL 2 – Consistent Assignment: Being regularly cared for by the same caregiver is essential to quality of care and quality of life. To maximize quality, as well as resident and staff relationships, the majority of Nursing Homes will employ “consistent assignment” of CNAs. **(New definition)**

GOAL 3 – Restraints: Nursing home residents are independent to the best of their ability and rarely experience daily physical restraints

GOAL 4 – Pressure Ulcers: Nursing home residents receive appropriate care to prevent and appropriately treat pressure ulcers when they develop.

REVISED GOAL 5 – Pain: Nursing home residents (long and short stay) will receive appropriate care to prevent and minimize episodes of moderate or severe pain.

NEW GOAL 6 – Advance Care Planning: Following admission and prior to completing or updating the plan of care, all NH residents will have the opportunity to discuss their goals for care including their preferences for advance care planning with an appropriate member of the healthcare team. Those preferences should be recorded in their medical record and used in the development of their plan of care.

GOAL 7 – Resident/Family Satisfaction: Almost all Nursing Homes will assess resident and family experience of care and incorporate this information into their quality improvement activities. **(Updated resources)**

NEW GOAL 8 – Staff Satisfaction: Almost all nursing homes will assess staff satisfaction with their work environment at least annually and upon separation and incorporate this information into their quality improvement activities.

GAPNA at NP Roundtable

Charlotte Kelley, MSN, GNP, ARNP

In December, GAPNA was included in the NP Roundtable. The Roundtable is an informal discussion group of NP organizations: American Association of Nurse Practitioners (AANP), American College of Nurse Practitioners (ACNP), National Association of Women’s Health (NAWH), National Association of Pediatric Nurse Practitioners (NAPNAP), National Association of Nurse Practitioner Faculty (NONPF), and GAPNA. Although the other organizations have their Executive Directors or CEOs sitting on the Committee, GAPNA Secretary Charlotte Kelley represents GAPNA.

The purpose of the weekly phone conference is to keep the organizations abreast of the ever changing policy climate at the Capitol. The group works through its lobbyist to ensure that policy is monitored to improve the access to health care for patients. One example of monitoring efforts is ensuring policy reflects provider neutral language. Another such example was the response of the nursing community to the AMA Scope of Practice Module regarding nurse practitioners sent out in December. Through proactive and collective work including all nursing organizations, a letter was written and signed by 27 nursing organizations and sent in response to the AMA request for input. This letter may be viewed in the Health Affairs section at www.GAPNA.org. Another ongoing “work in process” is outlining barriers to practice and a remedy for intervention either by change in statute or law. The never ending attention needed to ensure NP practice to provide access to care for patients nationally will keep the group busy in the future. As this is written, Congress is writing the biggest change in the healthcare delivery system since Medicare, and we are working diligently to keep a finger on the pulse of healthcare.

2010 GAPNA Foundation Awards Notice

Mary Pat Rapp, PhD, RN

The GAPNA Foundation, Inc. Board of Directors would like to recognize and thank members and chapters that accepted the challenge to make a donation to the Foundation. We appreciate your support and enthusiasm for our mission of promoting research, scholarship, and education for advanced practice nurses who serve older adults.

The Foundation is accepting applications for travel and education scholarships to be awarded in New Mexico. Access details on the application process and the awards by going to the GAPNA website (www.GAPNA.org) and clicking on the Foundation link. The Foundation supports the David Butler Spirit of GAPNA Award, the Student Travel Award, and a Research Award.

The Spirit Award recognizes a GAPNA member who demonstrates an outstanding commitment to the organization and actively supports the mission of GAPNA. This scholarship offers a stipend up to \$2000.00 to be applied towards registration at the annual GAPNA symposium, travel, and lodging.

The Student Travel Award recognizes the research or clinical project of one advanced practice nursing student and offers a stipend up to \$2000.00 for registration, travel, and lodging at the annual 2010 conference.

The Foundation will collaborate with the Research Committee and will choose the award recipient from the abstracts submitted to the Research Committee. The Research Award supports research of members, including student members. The intent is to assist members with some of the costs associated with the research project.

Thanks to MJ Henderson and her cadre of willing volunteers, we had a variety of successful fund raising events in 2009. We are pleased to announce the Foundation will organize similar and/or additional events for 2010. Mark your calendars for the Golf Tournament and the Fun Run, then check the GAPNA newsletter and conference registration for additional events.

The GAPNA Foundation is supported entirely through donations from individuals, organizations, and corporate donors that are accepted at any time throughout the year. Donations are 100% tax deductible and should be made payable to The GAPNA Foundation, c/o Eric Joh, Esq., 4600 North Ocean Boulevard, Suite 206, Boynton Beach, Florida 33435.

Adult – Gerontology Competencies

GAPNA Invited to Join Expert Panel

Evelyn Duffy, DNP, GNP/ANP-BC, FAANP

Susan Mullaney, MS, APN, GNP-BC

GAPNA has been engaged with the American Association for Colleges of Nursing/New York University-Hartford Institute Initiative Group in developing the Adult-Gerontology Nurse Practitioner (NP) competencies to define the NP role as part of the Consensus Model. Evelyn Duffy has served as GAPNA's representative on this expert panel. In 2009, the expert panel met and drafted the initial competencies which were later reviewed by a content validation group. On January 7-8, 2010, the expert panel reconvened with the purpose of the meeting to review the final draft of the Adult-Gerontology NP competencies preparing for changes stemming from this Consensus Model. The team, including representatives from American Association of Colleges of Nursing (AACN), National Organization of Nurse Practitioner Faculty (NONPF), New York University Hartford Institute, Centers of Geriatric Nursing Excellence (CGNE), American Academy of Nursing (AAN), American Nurses Credentialing Center (ANCC), the American Academy of Nurse Practitioners (AANP), and GAPNA worked to review, edit and confirm the competencies. Moving forward, the group will seek endorsement of the changes from the stakeholders and then disseminate them with the purpose of retaining geriatrics or the care older adults as a specialty that is beyond the scope of the Adult-Gerontology NP. GAPNA is working on developing a strategy to take the lead in defining this specialty area of care for older adults. As this strategy and plans are developed, GAPNA will keep GN readers updated.

Heartland Care Partners Gives the Gift of GAPNA!

GAPNA is very pleased to offer a heartfelt welcome to the nurse practitioners from HCR ManorCare. During National Nurse Practitioner Week, November 8-14, 2009, Heartland Care Partners showed its appreciation for its 71 HCR ManorCare nurse practitioner employees by presenting each employee with the gift of a one-year GAPNA membership.

GAPNA would like to thank Heartland Care Partners for choosing to recognize the importance of providing quality venues for professional development through membership in GAPNA. Heartland Care Partners took advantage of GAPNA's group membership program to provide its employees with this very special gift. If you are interested in learning more about the GAPNA group or corporate membership programs, contact the GAPNA National Office at 866-355-1392 or 850-471-7075.

HCR ManorCare is a leading provider of short- and long-term medical and rehabilitation care. Care is provided through a nationwide network of skilled nursing and rehabilitation centers, assisted living facilities, outpatient rehabilitation clinics, and hospice and home care agencies.

GAPNA FOUNDATION DONOR OPPORTUNITIES

Each year members and friends of the GAPNAF pledge to give a certain amount annually to support research and educational activities of advanced practice nurses working with older adults. Currently the Foundation has five levels of donors:

PLATINUM LEVEL

(\$2000.00+)

GOLD LEVEL

(\$1000-\$1,999.00)

SILVER LEVEL

(\$500-\$999.00)

BRONZE LEVEL

(\$100-\$499.00)

FRIENDS OF THE FOUNDATION

(\$25-\$100.00)

SUSTAINING DONORS

With the long view in mind, Sustaining Donors pledge a specific amount of financial support given over 10 years.

CORPORATE DONORS

Corporations donate at least \$5,000 or more for the year.

ENDOWMENTS

Endowments are being developed as an option for tax-deductible donations.

Donations to GAPNAF

The GAPNA Foundation
c/o Eric Joh, Esq.
4600 North Ocean Boulevard
Suite 206
Boynton Beach, Florida 33435

CALL FOR NOMINATIONS

2010 Elections

Deadline is April 1, 2010

President-Elect: The President-Elect serves as a member of the Board of Directors and performs the following functions: performs duties as assigned by the President; automatically assumes the office of President at the end of the President's term or in the event of a vacancy in the office of President; develops a thorough understanding of the bylaws and policies of the Society, and *Robert's Rules of Order*, Newly Revised; works closely with the President; develops and prepares goals for upcoming term as President; establishes contact with the National Office staff for the operation of the Society; recognizes and advises of changing outside influences which may affect the decisions of the Board; participates in the development and implementation of the strategic plan; contributes articles to newsletter as required; completes other duties as assigned. Travel is required and expenses are reimbursed as set by GAPNA policy. This is a three year commitment: first year as President-Elect, second year as President, and third year as Immediate Past President.

Secretary: The Secretary serves as a member of the Board of Directors and performs the following functions: records the proceedings of all official meetings of GAPNA; notifies the GAPNA membership of the annual meeting and any other special meetings; accepts responsibilities and assignments as delegated by the President; participates in the development and implementation of the strategic plan; contributes articles to newsletter as required; and completes other duties as assigned. Travel is required and expenses are reimbursed as set by GAPNA policy. This is a two year commitment.

Director-at-Large: The GAPNA Director-at-Large serves on the Board of Directors and performs the following functions: assume responsibilities delegated by the President and/or Board; participate in the development and implementation of the strategic plan; contribute articles to newsletter as required; assist to orient the new Director-at-Large; complete other duties as assigned. Travel is required and expenses are reimbursed as set by GAPNA policy. This is a two year commitment.

Nominating Committee Member (2): The Nominating Committee oversees the elections process, solicits and screens applicants, and presents a slate of candidates to the membership for voting. The business of the Nominating Committee is conducted via conference calls; travel is not required. Nominating committee members may not run for office whilst serving on the nominating committee. The candidate receiving the most number of votes will serve for two years, the second year of the term as Chair of the Committee. The candidate receiving the second most votes will serve a one year term.

NOMINATION AND CONSENT STATEMENT

A candidate must have been an active member of GAPNA for a minimum of one year preceding nomination. Nomination does not guarantee that a person's name will appear on the final slate.

Full Name _____ Credentials _____

Current Position _____ Work Phone _____

Affiliation _____ Home Phone _____

Address _____ Fax _____

City _____ State _____ Zip _____

E-mail _____

I am willing to serve in the office of _____ if selected for nomination and elected by the membership.

Signed, _____ **Member, GAPNA** **Date** _____

A Complete Candidate packet includes the following:

1. A **one-paragraph** biographical statement that includes the following information:
 - Your professional educational background
 - Your current job title and a brief description of your current responsibilities
 - Past GAPNA positions, committees, or projects in which you were involved
2. A **250 word statement for inclusion with the ballot** describing what you hope to achieve through the office you seek and what you hope GAPNA would achieve through your service. **Statements exceeding 250 words will be cropped at the 251st word.**
3. A **passport type photograph for inclusion with the ballot. Electronic photograph preferred**
4. Your **curriculum vitae** or resume

**Return your COMPLETE CANDIDATE PACKET to the
GAPNA National Office by April 1, 2010 to:
GAPNA National Office • 7794 Grow Drive • Pensacola, FL 32514
or Fax (850) 484-8762**

The GAPNA

Newsletter

Gerontological Advanced Practice Nurses Association

7794 Grow Drive • Pensacola, FL 32514

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Associate Director of CWRU Center on
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VOLUNTEERS

Are you interested
in serving on a
GAPNA Committee?
Contact the GAPNA
National Office at
gapna@dancyamc.com
or call 866-355-1392
to request a call for
volunteers form.

Please send your change of
address and corrections to
gapna@dancyamc.com

Visit our website at
www.gapna.org

Next Newsletter Deadline:
April 4, 2010

Send articles to
barbara.callan@dancyamc.com

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