COUNCILS

Addictions

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Current Activities:
• Tobacco Branch completed Tobacco Use Disorder Competencies & will offer all day pre-conference training.
• JAPNA Substance Use Special Edition to be published in January 2022. 33 manuscripts were received/reviewed.
• The 8 hour & 24 hour MAT Waiver Trainings issued 23,181 certificates & 23,822 certificates, respectively as of 09-24-2021.
• Webinars related to Opioid Use Disorder awarded over 2,250 contact hours with 3,762 individuals completing programs.
• 9 podium presentations & 20 posters related to substance use were presented at 2020 Virtual APNA Annual Conference.

If your council could advise the board on one thing that APNA should accomplish relative to your council’s area of expertise, what would it be?

Substance use disorders (SUDs) are ubiquitous to nursing, they cross all practice settings, ages, and disciplines. Nurses themselves are not immune to SUDs. As such the council would benefit from the board’s support in developing guidelines to comprehensively integrate education & clinical training related to SUDs into nursing programs of all levels, RN, BSN, APRN.

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Current Activities:
• Council Steering Committee members are on the Staffing Taskforce who are developing the APNA Psychiatric Mental Health Nursing Position paper guided by the ANA Staffing Principles. The Taskforce meets every other week. The first complete draft is just about completed. This will be submitted to the APNA Board for review. The draft will be shared with the APNA Administrative Council Steering Committee and Advisory Panel.
• The Steering Committee continues to meet monthly for networking, resource sharing, and support.

If your council could advise the board on one thing that APNA should accomplish relative to your council’s area of expertise, what would it be?

Help us attract nurses to the specialty. Too many nurses want to be PMHNPs and are leaving the services. Perhaps we need to promote alternative models of care and expand provision. Revise and promote the mentoring program.

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Current Activities:
• Monthly meetings
• Forming small groups to evaluate information regarding suicide in Children and Adolescents to then post EBP guidelines and references in files on Suicide and suicide prevention / intervention for the resource page.
• Council members have volunteered to review and update various topics/files for the resource pages, making sure links are live and information is the most up to date.
• Members were encouraged to submit abstracts and as a result council members will be presenting posters and presentations at the virtual APNA Annual Conference in October.
• Postings to the Member Bridge (Steering Committee, Advisory Committee and the All Purpose Discussion Forum) of links to articles, new guidelines and trainings of interest to C and A community.

If your council could advise the board on one thing that APNA should accomplish relative to your council’s area of expertise, what would it be?

We have been wishing we could work on content for a transition to practice for C and A practitioners. This has been a request from members as it is not deeply addressed in training programs. Discussion/consideration by the board would be our request.

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Traci T. Sims, DNS, RN, CNS/PMH-BC - Associate Chair

Current Activities:

- The Education Council (EC) supports expression of innovative teaching at both the undergraduate and graduate level. The EC has facilitated discussion in monthly meetings of each branch in addition to a monthly steering committee meeting. The EC has also used Member Bridge to engage in thoughtful dialogue with members and designing meaningful scholarly forums. Examples of the latter directly related to APNA meetings include pre-conference workshops (undergraduate and graduate branches) and podium presentations for the 34th and 35th annual APNA conference.
- EC explores pertinent topics of current interest and relevance to the psychiatric nursing and nursing education landscape. Constant change has facilitated broader discussions on themes our membership values. Such topics include addressing civility and power dynamics in care and educational settings, demonstrations of advocacy for vulnerable people and caregivers, and supporting dialogue in health promotion and recovery topics.
- EC supports ongoing and targeted examination of novel and emerging teaching approaches through soliciting recognized experts to speak to our branches.
- Representatives from EC support broader initiatives such as recommendations relative to PMH practice. Such activities informing drivers of practice (accreditation agencies and professional nursing organizations) provide insights and expert consultation relative to nursing “essentials” in educational development or addressing scope and standards of practice.
- Further, the EC strives to develop and maintain accessible evidence-based sources informing our membership, such as the Undergraduate and (developing) Graduate Education toolkits.

If your council could advise the board on one thing that APNA should accomplish relative to your council’s area of expertise, what would it be?

The EC would like the board to continue being sensitive to forums and spaces supporting our total membership in disseminating information. For only one speaker in group (pre-conference) or podium presentations to obtain a discount relative to conference presentations represents an equity disparity and limits access for members fully interested to engage in the conference process.

Steering Committee

Sara Banzhaf, DNP, MSN, APRN-NP, PMHNP-BC
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David Sharp, PhD, RN
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Jacque Williams, MSN, RN

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Judy Rice DNP, MSN, PMHNP, FNP, CS
Luann Richardson PhD, DNP, FNP, PMHNP, FAANP
Bettina Riley PhD, RN
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<th>Name</th>
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<td>Pamela Rillstone</td>
<td>PhD, ARNP, CS, CT</td>
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<td>Juanita Roberts</td>
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<td>William Robertson</td>
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<td>Sally Rothacker-Peyton</td>
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<td>Lance Rounkles</td>
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<td>Emily Rude</td>
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<td>Mary Schuchman</td>
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<td>Amanda Schuh</td>
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<td>Beverly Sedlacek</td>
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<td>Sylvia Simeone</td>
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<td>Umeika Stephens</td>
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<td>Tiara Stepp</td>
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<td>Morgan Stock</td>
<td>MSN-Ed</td>
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<td>Charlotte Strahm</td>
<td>DNSc, RN, CNS</td>
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<td>John Sturtevant</td>
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<td>Lauren Sundergill</td>
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<td>Leslie Syrett</td>
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<td>Peter Taubbee</td>
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<td>Terri Tebo</td>
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<td>Pamela Terreri</td>
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<td>Anita Thompson Heisterman</td>
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<td>Miriam Thornton</td>
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<td>Kristin Tiernan</td>
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<td>Eleanor Tomas</td>
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<td>Michelle Tsai</td>
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<td>Michael Valenti</td>
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<td>Doris Van Byssum</td>
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<td>Judith Van Cleef</td>
<td>MS, RN-BC-Retired</td>
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<td>Dave Vander Ark</td>
<td>DNP, MSN, RN-PMH-BC</td>
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<td>Suzanne Van Hise-Fowles</td>
<td>RN, ADN, BA</td>
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<td>Dorothy Varchol</td>
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<td>Stephanie Verdeflor</td>
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<td>Karen Vergano</td>
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<td>Renee Vives</td>
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<td>Audrey Voss</td>
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<td>Paula Vuckovich</td>
<td>RN, PhD, PMHCNS-BC</td>
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<td>Carol Wahlstrom</td>
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<td>Kathleen Walker</td>
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<td>Kim Walker</td>
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<td>Gaynell Walker-Burt</td>
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<td>Rebecca Weaver</td>
<td>PMHNP</td>
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<td>David Welper</td>
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<td>Daniel Wesemann</td>
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<td>Candice Wilson</td>
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<td>Inessa Wise</td>
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<td>Inez Withers</td>
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American Psychiatric Nurses Association  

2021 Annual Activity Report
Mental Health Advocacy

Kathryn E. Brotzge, MSN, APRN, NP - Chair
Paula M. Bird, DNP, RN-C, NEA-BC - Associate Chair

Current Activities:

• Topics are collected from members at our Annual Meeting for the Council to address.
• Surveying the Steering Committee and Advocacy Board on specific issues.
• Creating tools for the website that aid in promoting member advocacy for Mental Health/Substance Abuse issues.
• Review the CMHA website to keep information current.

If your council could advise the board on one thing that APNA should accomplish relative to your council’s area of expertise, what would it be?

Monthly updates in the newsletter relating to advocacy. There has been coverage on certain issues previously. It would be beneficial to have a place where tools (for any council) are highlighted in the newsletter. For example a council update in each newsletter. Small column just highlighting a Council, link to the page, etc.

Steering Committee

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Allison Cotterman, RN, BSN
Hershaw Davis, Jr., MSN, RN
Kathleen Donahue, MA, RN
Jenise Farano APRN-FPA, PMHNP-BC, FNP-BC
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<td>Mekeshia Bates DNP, CRNP-PMH</td>
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<td>Douglas Bean RN-BC</td>
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<td>Doreen Berrios RN MSN FNP-BC</td>
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<td>Ann Blankenhorn DNP, MBA, RN, NEA-BC</td>
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<td>Mary Blase RN, APRN, CNS</td>
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<td>Kaye Blasingame RN, BC, MSN</td>
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<td>Tina Blevins RN-BC</td>
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<td>Mary Bollinger RN, BS, MSED</td>
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<td>Karen Bone MSN APRN</td>
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<td>Rachel Booker PMHNP-BC</td>
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<td>Jennifer Bowen Burgess DNP, APRN, PMHNP-BC</td>
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<td>Dolores Bray CRNP</td>
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<td>Julianna Brechtl RN, MA, LMHC</td>
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<td>Brian Brooker</td>
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<td>Yasamin Brown APRN</td>
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<td>Kelly M. Buckley</td>
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<td>Diane Burgermeister PhD, PMHCNS-BC</td>
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<td>Michelle Burke RN</td>
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<td>Gail Burmeister RN, MSN PMHCNS-BC</td>
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<td>Barbara-Ann Bybel DHA, MSN, NEA-BC, PMHNP-BC</td>
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<td>Nicole Byrd-Irving MSN, RN, CNLc</td>
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<td>Sandra Cadena PhD, APRN, PMHCNS-BC, CNE</td>
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Current Activities:
• The council is working on the second iteration of a position paper regarding psychotherapy and psychotherapeutic modalities for PMH-APRNs (in response to the submitted briefing paper).
• The council is working on a document on evidence-based psychotherapy and psychotherapeutic modalities (with plans to submit a briefing paper regarding developing a resource).
• The council is working on identifying the characteristics of mentors, instructors, supervisors, preceptors, and consultants (with plans to submit a briefing paper regarding developing a resource).
• The council discussed psychotherapeutic strategies to address COVID-19 recovery (as this is to be presented).

If your council could advise the board on one thing that APNA should accomplish relative to your council’s area of expertise, what would it be?

We believe that continuing to provide COVID-19 resources for PMH-RNs and PMHN-APRNs would be beneficial.

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Recovery

Constance Ann Noll, DNP, MA, PMHNP-BC, CRNP - Chair

Current Activities:
- Monthly meetings of the Steering Committee, engaging new members for more active participation, identifying members with leadership potential. Initial activity:
  - Revision of APNA Recovery page on website to confirm our stated vision and goals, remove outdated links and review current resources listed.
- Devised process for pilot of Google Alerts and other search engines for identification of Recovery oriented articles/best practices for PMH nursing, to post to APNA Recovery page after scholarly review by Steering committee; developed tool for review.
- Development of plan to ask for volunteers from the Recovery Advisory group to initially screen identified articles, this month potential volunteers were identified and process is underway. Goal is to activate and encourage participation of this group.
- Current possible collaboration with Education Committee for feasibility of joint project for education regarding Enhancing Empathy/Anti-Stigma; potential submission of white paper to APNA for approval.
- Current development of topic for activity in the next year, Pandemic Recovery and Resilience, development of a qualitative approach covering aspects of perspectives from clinical, education and lived experience; storytelling approach with literature review. Potential participants from Steering and Advisory groups.

If your council could advise the board on one thing that APNA should accomplish relative to your council’s area of expertise, what would it be?

Revision of the current Recovery to Practice educational module; with updates and enhancement from the pandemic experience.

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Brandy Mechling, PhD, RN, PMHCNS-BC - Chair
Karen Jennings Mathis, PhD, CNP, PMHNP-BC - Associate Chair

Current Activities:
The Research Council supports APNA collaboration, development, and dissemination of psychiatric nursing research and to advance evidence-based practice as a core competency of professional psychiatric nurses.
The Research Council’s Strategic Plan is consistent with the APNA Strategic Direction, Goal I: To develop and disseminate knowledge to advance evidence-based psychiatric mental health practice.
Examples of how the Research Council is meeting our objectives:
• For the last year, the work group, the Research Priorities Workgroup, has worked on an assessment of the research priorities in the specialty. Two deliverables have resulted: 1) a brief paper submitted to the Board of Directors (BOD) describing findings from the workgroup’s assessment of research priorities designated by major funding entities (e.g., NIH, SAMHSA) and 2) a manuscript comparing the above and what evidence has been published in peer-reviewed psychiatric nursing journals for the year 2020.
• On behalf of the Research Council, an abstract will be submitted for the annual conference, each year addressing a topic on research and evidence-based practice, funding, or other topics addressing member needs pertaining to the council’s objectives. This year, Dr. Karen Jennings Mathis led a work group, in submitting an abstract which was accepted for a pre-conference interactive panel about how to make psychiatric nursing research innovative and significant.
• Research Council conducted an annual review of grant applications and made recommendations for proposals to be funded. The chair and associate chair examine and provide feedback on the required reports that show progress for those funded projects. Moreover, this past year, the Research Council reviewed and revised the research priorities to be used for grant applications.
• The Research Council created a workgroup, Practice Research Integration and Member Engagement (PRIME), which resulted in a monthly feature in Member Bridge that highlights a researcher’s current publication of research or evidence-based practice.
• The chair and associate chair host our Council’s meeting at the annual conference (virtual in 2020 and 2021) to inform APNA members of the Research Council’s initiatives and offer guidance or mentorship when appropriate.

If your council could advise the board on one thing that APNA should accomplish relative to your council’s area of expertise, what would it be?

We need additional collaboration between the BOD and our Council to ensure that the scientific integrity of grant proposal applications is stellar and the best choice for funding.

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Safe Environments

Ellen W. Blair, DNP, APRN, PMHCNS-BC, NEA-BC - Chair

Current Activities:

- Completed our goals with a project of updating resources and literature (with an annotated bibliography) for the Key Components of Safety Tool Kit. This insures the most up to date information for APNA membership.
- An APNA Council for Safe Environments (CSE) manuscript, entitled “Delineating Quality Indicators of Inpatient Psychiatric Hospitalization”, was accepted for publication in JAPNA. In this paper, we identified the need to define “quality” measures which directly impact perceived safety on inpatient settings. 9 Domains were identified that appeared to be significant to a “quality” unit: Unit Structure, Program elements, staffing, engagement, evidence-based practice, quality monitoring, patient satisfaction, and staff engagement.
- The CSE revised the Position Paper on Violence. Focus is on general overview and impact of violence, and the role of the PMH.
- Added 3 new members to the Steering Committee.

If your council could advise the board on one thing that APNA should accomplish relative to your council’s area of expertise, what would it be?

Continuing to support the CSE Steering Committee on assisting with appts to committee members, posting minutes and other documents as needed.

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2021 Annual Activity Report

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Diversity, Equity, and Inclusion Advisory Committee

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Erica D. Joseph, DNP, APRN, PMHNP-BC, NP-C - Associate Chair

Current Activities:
Erica Joseph and I continue to meet to share information and monitor if our charge from the APNA BOD is being met to develop our work products. Our current DEI activity is listed below.

- The entire committee is now meeting separately as Group 1 and Group 2 to review the APNA Position papers.
- Group 1 members are reviewing Position Papers 1 - 8. Group 2 members are reviewing papers 9-17. Both groups have met in September and have the minutes posted on the DEI Committee Member Bridge site.
- We did no sharing of information between the groups prior to the individual meetings. However, afterwards a similar pattern emerged from the groups.
- This pattern included the following: the introduction regarding APNA's purpose of the papers, how they are to be developed, and papers themselves need to include language that is more explicit regarding DEI issues related to psychiatric and mental health nursing.
- The groups will continue to meet during October in order to begin making specific language recommendations addressing bullet point # 4. Information will also be shared between the Groups after individual meetings. A time be also be set for the end of October for groups to meet together and assess next steps.

If your council could advise the board on one thing that APNA should accomplish relative to your council’s area of expertise, what would it be?

Feedback regarding the current activity presented above.

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Mekeshia Bates DNP, CRNP-PMH
Larisa Belisle PMHCNS
Leslie Binford DNP, RN, PMHNP-BC
Nicole Brodrick DNP, PMHNP-BC, RN
LaTonya Carroll DNP, APRN, CNP, PMHNP-BC, FNP-C, CPNP-PC
LaTonia Chalmers RN, MSN, PMHNP-BC
Somatra Connolly
Neuromodulation Task Force

Paula Bolton, MS, CNP, ANP-BC - Co-Chair
Donna Ecklesdafer, RN, MSN - Co-Chair

Current Activities:
- Finalized ECT Policy Statement (approved at APNA Board Meeting in July)
- Continued to meet monthly to review literature on TMS
- Began outline of draft of TMS Policy

If your council could advise the board on one thing that APNA should accomplish relative to your council’s area of expertise, what would it be?

Continue to support the meeting of our task force to develop policy statements and then some checklist guidelines for nurses working in this area.

Steering Committee
Tammy Cohen DNP, MA, BSN, RN, APRN, PMHNP-BC
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Melinda Walker BSN, RN, BA
Dawn Walters MS, RN
Rick Yakimo PhD, APRN, PMHNP-BC

Personality Disorders Cluster A Task Force

Diane H. Esposito, PhD, ARNP, PMHCNS-BC - Chair

Current Activities:
- Compiled final draft of Essentials for Cluster A
- Team meeting with Cluster B and C
- Sent document draft out to Advisory Panel
- Reviewed feedback on Zoom Call with Steering Committee

If your council could advise the board on one thing that APNA should accomplish relative to your council's area of expertise, what would it be?

Looking forward to bringing project to completion, and making resource available to members
### Steering Committee

<table>
<thead>
<tr>
<th>Name</th>
<th>Title / Affiliation</th>
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<tbody>
<tr>
<td>John Chovan, PhD</td>
<td>DNP, RN, CNP, CNS</td>
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<tr>
<td>Angela Delgrande, PhD</td>
<td>PMHNP-BC, CNS</td>
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<tr>
<td>Paula Alexander-Delpech,</td>
<td>PhD, PMHNP-BC, APRN</td>
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<td>Roxanne England, MS</td>
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<td>Dr. Dawn Goldstein, PhD</td>
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<tr>
<td>Dr. Camellia Ann Herisko,</td>
<td>RN, MSN, CRNP, DNP</td>
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<tr>
<td>Kevin Ann Huckshorn, PhD</td>
<td>MSN, RN, ICRC</td>
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<td>Lindsey Irwin, RN</td>
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<td>Joseph Keifer, PsyD</td>
<td>BSN, RN</td>
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<td>RN</td>
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<td>Jennifer Lucy Lamb</td>
<td>PMHNP-BC, MN</td>
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<td>Heather A. Muxworthy, DNP</td>
<td>PMHNP-BC, LLC</td>
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<td>Julene Dorothy Smith</td>
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<td>Janet R. Thelen</td>
<td>MSN, PMHNP-BC</td>
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<td>Jessica Ann Whelan</td>
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### Advisory Panel

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<td>Sally Alexander</td>
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<td>Cheyanne Burns</td>
<td>BSN, RN, PMHNP-BC</td>
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<td>Alicja Cebulak</td>
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<td>Emily Cervantes</td>
<td>BSN, RN</td>
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<td>Kevin DiGuglielmo</td>
<td>MSN, PMHNP-BC</td>
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<td>Susan Evans</td>
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<tr>
<td>Michelle Fuhrmann</td>
<td>RN, BSN</td>
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<tr>
<td>Jenette Gerst</td>
<td>MSN, PMH-BC, NPD-BC</td>
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<td>Ivan Giannou</td>
<td>RN-BC</td>
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<td>George Gilchrist</td>
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<td>Dee Dee Hecht-Hewit</td>
<td>BSN, RN, PCC-s, CRC, LSW, PMHNP</td>
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<td>Erica Hinds-Campbell</td>
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<td>Blessing Lawski</td>
<td>PMHNP, RN-BC</td>
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<td>Donna Linette</td>
<td>DNP, RN, NEA-BC, HN-BC, NEA-BC</td>
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<td>Deanna Ludwig-Bos</td>
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<td>Rachel Matz</td>
<td>RN</td>
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<td>Haley Meier</td>
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<td>Evelyn Nwaigwe</td>
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<td>Tammi Packer</td>
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<td>Mary Pushchak</td>
<td>BSN, RN, PMH-BC</td>
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<td>Ria Rivera</td>
<td>RN</td>
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<td>Lexxus Soristo</td>
<td>BSN, RN</td>
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<td>Michael Steele Jr</td>
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<td>Richard Sullivan</td>
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<td>Mary Ann Tapanero</td>
<td>BSN, RN, CRRN</td>
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<td>Robyn Welch</td>
<td>RN, MSN</td>
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### Personality Disorders Cluster B Task Force

**Sherry J. Lindsay, ARNP - Chair**

**Current Activities:**
- We are finishing up the Essentials document with a target goal of completion in 1 month
- We have recently held three combined meetings of the Steering committee and Advisory panel in which we are integrating the Advisory panel suggestions
- A group has volunteered to work on editing
- Another person has offered to develop case studies

**If your council could advise the board on one thing that APNA should accomplish relative to your council’s area of expertise, what would it be?**
Thank you for all of your assistance. I have some members who would like to continue to work on the project after we submit the essentials document. I have encouraged them to network and submit information at conferences. Any other options for them?

**Steering Committee**

Elizabeth Blondeau, BS, RN-BC  
Brynee Delaney Calleran, MSN, BSN, BS, RN-BC  
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Dana Frank, RN  
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Richard Sullivan BSN, RN, CMSRN
Colleen Sveum MSN, MBA, BSN, RN
Michael Tayag RN
Personality Disorders Cluster C Task Force

Shirlee P. Davidson, MSN, RN - Chair

Current Activities:
• Document on Cluster C "Essentials" is complete and has been reviewed by advisory and steering committees.
• Introduction to project is complete
• Waiting for Cluster A and B to complete their "Essential" documents.
• Will put A, B & C together in final document which will be reviewed by chair people before submitting to APNA

If your council could advise the board on one thing that APNA should accomplish relative to your council’s area of expertise, what would it be?

When we send in final "essentials" document to APNA, we hope the reviewers will look at it carefully and give feedback. We want this to be as perfect a document as possible that will be helpful to general nurses and to nurse practitioners, educators and anyone interested in increasing their knowledge in the area of patients with personality disorders.

Steering Committee
Florence Cristina Brooks, RN
Grashika Devendra
Ayako Garduque
Brayden Nicole Kameg, BSN, RN, CARN
Lynne Sparks Mann, MSN, RN, CNE
Roberta Lesli Mowdy, PMHNP-BC
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Gwendolyn Porche, RN
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Farid Uddin  
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Advisory Panel  
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Richard Sullivan BSN, RN, CMSRN  
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Seclusion and Restraint Task Force  
Ellen W. Blair, DNP, APRN, PMHCNS-BC, NEA-BC - Co-Chair  
Evelyn J. Perkins, MS, PMH-BC, NE-BC, RN - Co-Chair

Current Activities:
• 90% of Steering Committee have attended monthly Zoom  
• Steering members selected content of interest among the 6 Standards of Care  
• 6 work groups will meet monthly to review content areas and make recommendations if needed.  
• Timeline to complete reviews is Dec 1. Documents will then be pushed out for Advisory Panel to review and give feedback.  
• Documents will be submitted to BOD by Feb 1, 2022.

If your council could advise the board on one thing that APNA should accomplish relative to your council’s area of expertise, what would it be?

Include Acknowledgements from 2015-2021in the Standards of Practice.

Steering Committee  
Julie Abfalter, BSN, RN-BC  
Diane E. Allen, DNP, PMHRN-BC, FACHE(Ret)  
Kelly Nikles Bryant, MS, BSN, RN, NPD-BC, NEA-BC  
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Marie McDougall RN
Tanna McKinney MSN, RN-BC
Debra Millett DNP, MSN, MBA, RN-NEA, RN-BC
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John Parker MS, RN
Melissa Patton MSN, BSN, RN
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Michael Polacek DNP, RN, NPD-BC
Sally Powell RN
Rebecca Puchkors MSN, RN, PMH-BC
Georgina Reid MSN, RN
Shirley Repta PhD, RN, MBA
Donna Riemer RN
Amy Rushton DNP, PMHCNS-BC
Marianne Siewers APRN
Liliana Simmons MSN, MA, PMHNP-BC, PHN
Susan Smith RN-BC
Brandi Stanley MSN, RN
Christopher Stephan-Jones MSN, BSN, RN-BC
Sarah Stout, DNP, PMHNP-BC
Tijuana Terrell
Chioma Uzoma APRN, MSN, PMHNP
Dave Vander Ark DNP, MSN, RN PMH-BC
Sharon Ward-Miller APRN
Tamsyn Weaver DNP, RN, PMHNP-BC
Michele Whitaker BSN, RN, E-RYT
Roy Wilms RN, MS, MA, BC
Janet Wray APRN
Staffing Inpatient Units Position Paper Task Force

Celeste M. Johnson, DNP, APRN, PMH CNS - Chair

Current Activities:
Taskforce has met twice monthly since Sept. 2020
Paper has been drafted
We are reviewing the draft and recommendations
Plan to have it ready to submit to the Board for early December.

If your council could advise the board on one thing that APNA should accomplish relative to your council’s area of expertise, what would it be?

Discuss the recommendations with the taskforce and develop a plan to implement the recommendations.

Task Force Members
Avni Cirpili DNP, RN
Kathleen Delaney PhD, PMH-NP, RN
Suzie Marriott MS, RN, PMH-BC
Janette O’Connor MS, BS, BSN, RN, PMH-BC
R. John Repique DNP, RN, NEA-BC

Tobacco Treatment Nursing Competencies Task Force

Carol A. Essenmacher, DNP, NCTTP - Chair

Current Activities:
• Task force meetings continued weekly for planning and task completion
  o Completed development, internal, and external reviewed the 13 Nursing Competencies for Treating Tobacco Use and Dependence
  o Competencies and supportive literature (300+ peer-reviewed articles and resources) were posted on APNA Resources page in November, 2020
  o Submitted 4 abstracts for annual conference sessions
  o All four sessions accepted for 2-hour (each) in-person conference sessions, then modified for virtual format
  o Constructed an initial manuscript for publication in JAPNA; needed major revision
  o Significantly revised original manuscript & resubmitted; resulting the following peer reviewed manuscript has been accepted for publication (possibly in special issue on addictions) in JAPNA:
  o Discussion of next steps to implement Nursing Competencies: need pilot study and/or other research completed to validate competencies
• Tobacco Dependence Branch meeting held monthly
Meeting dates/time changed to once a month right before Tobacco Task Force meetings, as attendance had been very poor. Change in meeting dates & times did not change or improve attendance. Alternate meeting ideas are being discussed:

- Suggestion: set a monthly meeting date (24 hours) for “Tobacco Dependence in the Spotlight” dialogue: more of a virtual format, would accommodate several time zones, may make “meeting” with and/or dialogue about the topic easier for the membership, and have an “Ask the Tobacco Champions” Q&A
- Above format may be replicated for other groups struggling to meet

Actions & Updates needed:
- Update Tobacco and Smoking items in Resources page
- Develop a sustainable method for literature sharing/reviewing (i.e., rather than a book club have a monthly Tobacco article or resource review)

Tobacco Dependence Branch and Task Force Chair (Carol) Membership and participation in the SCLC National Partnership for Behavioral Health. Currently Co-Chair of Interventions Development Committee. SCLC and APNA leadership met in September to discuss initial activities for collaboration.

Task Force Members
Sara Adams PhD, CNE, MSN, RN
Carolyn Baird DNP, MBA, RN-BC, CARN-AP, CCDPD, FIAAN
Julia Houfek PhD, APRN-CNS, BC
Marchell Spielmann ARNP, FNP-BC, PMHNP-BC
Barbara Warren PhD, RN, APRN-CNS, PMH-BC, FNAP, FAAN

Workforce Task Force

Angela M. Gerolamo, PhD, APRN, BC - Chair

Current Activities:
We are in the process of analyzing the RN data and will soon begin to draft the report for the BOD. Back coding the other responses for several items in the RN and APRN survey took significantly more time that we anticipated, however, we are grateful to have had the opportunity to work with the Scholars on this task. We await the APRN data files from Hugh, the consultant. We hope to have a draft of the report by late October/early November.

If your council could advise the board on one thing that APNA should accomplish relative to your council’s area of expertise, what would it be?

APNA should widely disseminate the findings from the RN and APRN surveys as dissemination to key stakeholders will be critical to inform development of programs and policies that address the behavioral health workforce.

Task Force Members
Kathleen Delaney, PhD, PMH-NP, RN
Bethany Phoenix, PhD, RN, CNS
Amy Rushton, MSN, RN, PMHCNS-BC
Janette Stallings, MA, MSN, BSN, APRN, PMHNP-BC