33rd Annual Agatha Hodgins Award for Outstanding Accomplishment

Diana Quinlan, CRNA, MA
Introductory Remarks by 2007 President Terry Wicks, CRNA, MHS

To recognize Certified Registered Nurse Anesthetists who have furthered the art and science of nurse anesthesia, the Agatha Hodgins Award, the highest accolade given by the AANA, was established in the mid-1970s.

Tonight, the Agatha Hodgins Award goes to Diana Quinlan, a CRNA for more than three decades. Diana Quinlan works full time as a lecturer, author, and consultant in peer assistance education.

Diana has dedicated countless hours of both personal and professional time to assisting and educating nurse anesthetists and other healthcare providers with addictions, and in particular, chemical dependency. Diana was a charter member of the AANA Peer Assistance Advisors Committee and served as chairperson for more than a decade. A well-known speaker and researcher, she has presented papers before audiences outside the nurse anesthesia profession at more than 100 professional national and international meetings, bringing the issue of substance abuse by anesthesia personnel to the world stage.

Diana has been an advocate for wellness almost as long as she has been a nurse anesthetist. Her contributions to the profession can be measured in lives saved, morbidities avoided, and families and careers salvaged. And she did all of it with the highest respect and concern for those who are members of the recovering community.

With your compassion as a human being and nurse anesthetist, you have left a profound legacy to the nurse anesthesia profession. On behalf of the AANA members and Board of Directors, I am honored to present you with the 2007 Agatha Hodgins Award.

Acceptance Remarks by Diana Quinlan
Agatha Hodgins would be justifiably proud of the direction our organization has taken in recent decades to respond to workplace hazards that may impact patient safety.

We, too, should be proud of our AANA for having the vision to establish the Ad-Hoc Chemical Dependency Committee that organized the first meeting for nurse anesthetists on drug impairment, developed a position statement, and created a "Well-Being Manual" at a time when advocacy was still a buzz word in the nursing community. Networking efforts with other nursing organizations supported the advocacy movement that enabled the development of non-public alternative to discipline so that most CRNAs now have options available for confidential assistance in their state.

Hundreds of our colleagues have gratefully received assistance from their peers to overcome disorders that impair their personal and professional lives. This aid did not come from just one person, or one committee. It came from many caring colleagues who made the life-changing experience of recovery possible.

In the early 1990s we established a network of state peer advisors to act as resources. We are grateful for all of those who have served their colleagues over the last two decades in this unique capacity.

The Peer Assistance Hotline has been active for over 10 years with calls numbering in the thousands. Our website has grown into one of the most used resources by the peer assistance community at large. Coworkers and managers who seek resources for their colleagues should be applauded, and I am especially encouraged by those who bravely seek advocacy for themselves. Anesthetists In Recovery was formed over 20 years ago and most recently became an online group for CRNAs across the country to support each other with their experiences and hope.

Many CRNAs and student anesthetists have conducted research in substance abuse and other work-related issues that have directly benefitted our members. Recent efforts have given us new direction to more closely examine needed policy.

The untimely death of Jan Stewart, CRNA, ARNP, sent a wake-up call to many of us. Her legacy includes a wellness initiative that has inspired an expert resource panel, a wellness lecture series, and an award-winning DVD series called "Wearing Masks". The work of your peer assistance advisors over the years could not have been possible without the exceptional AANA staff support and mentorship of Rita Ruppa, RN, MA, and, most recently, Sandra Tunajek, CRNA, DNP.

By this award you acknowledge the efforts of all who have assisted my work as a peer assistance advisor these last 20 years, but more importantly the work that has promoted patient safety by giving hundreds of CRNAs opportunity for effective intervention, treatment, and re-entry. My family frequently endured my absence and irritability while I answered hotline calls, and I am extremely grateful for their understanding.

I am extremely honored by this recognition and thank God for his grace and guidance as I followed my passion to help CRNAs and their families find new hope while attempting to preserve their careers and this profession.