Council for Public Interest in Anesthesia: Bridging Patient Safety and Practitioner Wellness

Debra Malina, CRNA, MS, MBA, APN
Chair and Practitioner Representative
James Kelly, MHA, CHE
Healthcare Administrator Representative
Kristen Clark, RN, BSN
Student Representative

CPIA Mission:
Advocating the public interest in anesthesia safety.

CPIA Vision:
The recognized advocate for anesthesia safety and practitioner wellness.
The appellate body for the nurse anesthesia credentialing councils.

The Council for Public Interest in Anesthesia (CPIA) has the difficult task of safeguarding the public interest on issues where the professional association has strong interests that may vary with council opinion. However, in 2005, when the AANA asked the CPIA to consider expanding the scope of its work, the members of the council readily agreed to undertake the responsibility for the AANA Wellness Program, including the peer assistance advisors activities regarding substance abuse issues. The council believes the Wellness Program is a good fit with its focus on patient safety and advocacy functions and is in the best interest of the public. Studies have shown that provider wellness and work environment issues can have a significant impact on the quality of patient care.

The wellness role of the council continues the evolution of the CPIA since it was established by the AANA in 1974. The council has maintained multidisciplinary representation with the primary responsibility to monitor concerns involving public safety, quality care, risk management, and now, practitioner wellness, with emphasis on the perspective of the public interest. Facilitating education of the public and promoting communication among all health professionals and the anesthesia community continues as the focus of the council’s recommendations and activities. As such, the CPIA also acts as an autonomous appellate review body in the credentialing of nurse anesthetists and their educational programs, assuring validation and accountability of the nurse anesthesia credentialing mechanisms.

Acceptance of the wellness program by the CPIA will fulfill the recommendations of the AANA Wellness Advocate and the AANA Blue Ribbon Panel on Wellness. A primary goal is to identify a structure and process that assures the AANA Wellness Program has continuity over time. The CPIA is working to design the strategic framework for future wellness activities including marketing, budget allocations and communications. Further, the council is collaborating with the AANA to transition the activities of the peer assistance advisors without disruption of the important elements and continued work of that group.

The AANA has defined wellness as a balanced state of mental, spiritual and physical well-being. Broad goals for the CPIA and the program are to enhance CRNA self-assessment and awareness and to develop strategies that promote healthy lifestyles among our professional colleagues.

About the CPIA
The CPIA is made up of four CRNA practitioners, a CRNA educator, a hospital administrator, an anesthesiologist, a student, public members, and a member of our “community of interest.” At present, our public members are the president of the Consumer’s League and an airline pilot; our community of interest representative is a perioperative nurse consultant. Beginning with the 2007 fiscal year, a human resources advisor for a major hospital network and two new practitioners, one of whom is a former student representative to the council, will join the group. It is anticipated that changes in the structure of the council will include additional members to address the ongo-
ing work of the wellness program. Each member is elected to a three-year term, with eligibility to be elected to a second consecutive term. The student serves a one-year term. This varied group looks at anesthesia-related issues from a consumer advocacy perspective and the multidisciplinary backgrounds make for some lively interaction!

A Student Perspective
Kristen Clark, RN, BSN
The members of the council have multiple reasons for becoming involved with advocacy issues. For example, as a student I submitted a letter asking to serve as the student representative because I was eager to become involved with an organization that is committed to patient safety, public education, and delivery of quality care. I see patient advocacy as a critically important factor in becoming a professional anesthesia provider.

I am impressed with the purpose, projects, and multidisciplinary professionalism represented by the council members and the very real focus they bring to safeguarding the public interest. I am fortunate that I have the opportunity to bring the student perspective to the wellness initiatives and participate in creative ways to address patient safety.

The CPIA is regularly seeking new student members when terms expire. If you are looking to make a difference in this profession when school is done, you need not look very far. There are many opportunities to connect with people who share a similar passion for anesthesia and safe patient care. This council in particular is not only an advocate for the public interest, but also for the members of this profession in the interest of their health and well-being.

Further, students are highly encouraged to be active members of the AANA. It will be the very backbone of our livelihood and it needs support, contribution, commitment and involvement of its members to be successful. The dedication and hard work you put into school and study can be great assets toward strengthening this organization. Continue to grow and challenge yourselves after school is (finally) done; you will find that not only will you learn a lot and make an impact, but you will have fun too!

The CPIA: Reflections on My Experience
James Kelly, MHA, CHE
As a hospital administrator, I came to the council from a Nebraska community hospital. Serving on the council has emphasized the valuable service that CRNAs provide and the strong professional focus they have on advocacy, education, and anesthesia safety. It is very rewarding to be a member of the CPIA and I have been impressed with how progressive the council is in its pursuit of safety for the public.

One challenge the council has had beyond its interest in safety has been its role within the AANA. I believe taking on the wellness initiative will strengthen that relationship and that the council can play an even larger leadership role in the AANA—one that will greatly benefit the members and the public.

Thoughts on Independence, Autonomy and Fresh Perspectives
Debra Malina, CRNA, MS, MBA, APN
Serving as chair of the council, I am now winding up my second term. I was not sure what to expect when I began as a practitioner representative. I certainly believed that it is important that a multidisciplinary body provides variable, sometimes conflicting, perspectives on crucial issues concerning patient safety. Further, a professional association has a responsibility to educate and inform the public about the safety of its practitioners and ongoing efforts to maintain the highest standards of care and promotion of consumer safety.

The CPIA role as a proactive advocate representing the voices and input from multiple resources is a valuable and much needed service to the public and to our professional colleagues. I have not changed my mind since that time and have been privileged to meet, work with, and befriend, a wonderful group of individuals. I have learned so much from my colleagues on the council: for example, that there really are two sides (or four or six) to every situation; how the impact of one simple activity can have wide-ranging implications, and about selfless people who participate simply because they want to make a positive impact. My life has been enriched because of the other council members.

I consider the work the CPIA to be very important. The autonomous appellate function it serves preserves the integrity of the nurse anesthesia profession and our professional association. The council renders independent decisions wholly separated from any influence by the AANA or the other councils. The composition of the council provides much needed ‘outside’ input. It ensures that the work of the council more widely reflect issues important to the entire anesthesia community and are not simply the association’s self-conceived ideas.

continues on p. 32
Patients, CRNAs, other healthcare professionals, and institutions are all consumers of anesthesia patient safety; the council composition reflects that very constituency. Every member is encouraged to bring their ideas and special interests to the table. During my tenure, the CPIA is the first council to perform strategic planning, render recommendations to the Board of Directors on issues related to the impaired practitioner and disability issues, look at the human-factor aspects of medical errors and develop brochures on herbal supplements, anesthesia and children, and patient's own involvement in their anesthesia experience. The CPIA has issued alerts related to 'stacking' monitors on top of anesthesia machines and participated in the SIPP (Surgical Infection Prevention Project). I strongly encourage member participation in the council selection process. All you need is an interest in your profession, and in your personal growth.

An Outstanding Track Record
The Wellness Program endeavor reinforces the long history of the council’s involvement in consumer education and patient safety. Projects that the CPIA has developed or participated in are:

- Patient brochures: Conscious Sedation: What Patients Should Expect; Preparing for Your Child's Surgery: A Parent’s Role; Herbal Products and Your Anesthetic; and others.
- Support for creation of the American Society of Anesthesia Technologists and Technicians.
- Placement of automatic cardiac defibrillators on commercial airliners.
- Nurse Anesthesia Overseas/Health Volunteers Overseas.
- Exhibiting at the National Patient Safety Foundation (NPSF), Rural Health Association, and Institute for Healthcare Improvement.
- Providing lecturers at the NPSF and Association of Perioperative Registered Nurses (AORN).
- Publication of the Quality Review in Anesthesia, which summarizes recent risk management issues and articles from current literature.
- Participation in the national SCIP (Surgical Care Improvement Project).
- Annual presentation of the Public Interest in Anesthesia Award to an entity who has demonstrated exceptional contribution to anesthesia patient safety. Past recipients include Jeanette Liska, PhD (anesthesia awareness), Robert Helmreich, PhD (human factors), Doni Haas, RN (disclosure in risk management), Jeffrey Cooper, PhD (medical simulation).
- Liaison with the Practice and Public Relations committees of the AANA on issues and projects of common interest.
- making recommendations to the AANA Board of Directors on issues related to practitioner disability, chronic pain, and neurocognitive function.

A Look Ahead—and an Invitation
2006 is very much a transition year for the CPIA. In addition to our prior work, the new scope of responsibilities will broaden our activities and the impact of what we do. Patient safety and practice issues are not always harmonious. The council will continue to monitor trends in patient safety, review and update patient education resources, and focus on practitioner information and wellness issues. The 2006 CPIA Annual Report is a summary of all these activities and will be available at the AANA Annual Meeting, Cleveland, Ohio, in August.

We encourage those who may be interested in expanding their horizons to consider applying for a position on the council. Feel free to contact any member to answer any questions you may have. To request additional information or applications to serve, contact Sandra Tunajek, CRNA, DNP, at stunajek@aana.com or Julie Rice at jrice@aana.com.