My goal as president was to continue building upon the goals set by our prior President, Diane Kocovsky based on her participation at the NASPGHAN executive retreat in 2014. She along with the executive board at that time worked on a 3-5-year plan to move our organization forward. The action plan included creation of a Listserve supported through NASPGHAN, increasing APGNN involvement on NASPGHAN committees, APGNN collaboration when planning the 2016 Annual meeting, and working with NASPGHAN to offer ongoing continuing education to our members free of charge as a member benefit. These action items are aimed at increasing APGNN memberships and member engagement thus resulting in membership retention. I additionally had a goal of pursuing expanding opportunities for professional development of our members.

Our 6-12 months’ specific goals and outcomes included but were not limited to the following:

1) We have improved our APGNN membership experience by utilizing the NASPGHAN office more effectively. We have consolidated some of the services previously offered from our individual website, and instead have moved our members only section to a page directly on www.naspghan.org. By working closer with Margaret, Donna, and Kim, we have greatly reduced the frustrations and delays previously associated with new membership verification, renewals, and the identification and response from questions and concerns fielded through www.apgnn.org.
2) With support from NASPGHAN administration we have successfully maintained the APGNN Listserve, a membership benefit that has been consistently requested for many years. Although perhaps not as robust as initially expected, we have had steady use amongst our members and have seen many dynamic conversations about clinic topics, research opportunities, and educational programs be shared across the country by our members.
3) Defining APGNN membership base through utilization of the NASPGHAN membership directory and APGNN directory, surveying gastroenterology nurses (including current, past and nonmembers) to determine their needs from the organization and in particular to gauge interest in professional development opportunities. Although we have entertained the idea of pursuing formal certification, extensive evaluation and discussion with certifying organizations such as ANCC and ANA has determined this is unfortunately not feasible due to our small size and limited resources.
   a. Several options to foster professional development opportunities and thus strength the influence and membership benefits of APGNN have been suggested to pursue in the future including: APGNN Fellow program, formal mentorship opportunities, competency creation, and badging. Based on member interest and organizational resources we selected 2 options to dedicate our attention to: competency creation (Clinical Practice) and mentoring (Membership).
   b. The competency process began by a careful review of current resources and GI topics. Each topic will be explored and a competency package will then be created.
   c. To start the formal mentor process, we have identified our Past Presidents as ideal mentor choices, and have already scheduled a brainstorming meeting to move this forward. Once well defined, will create a formal plan for rolling this out to the members after the conference
4) APGNN members will continue to serve on NASPGHAN committees. Current NASPGHAN Committee Chairs will help APGNN to identify interested and willing members. This relationship will provide the opportunity to align APGNN committee initiatives with those of NASPGHAN.
   a. APGNN members have played a more active role on the following committees since September 2015: Research, Media, and IBD. APGNN members are reporting increased satisfaction with this participation. Changes have been made in some of our processes as a result of this involvement. We continue to develop the
relationship with Public Education Committee in an effort to publish GI Kids handouts in a timelier manner.

b. APGNN has become more engaged in recent NASGHAN Advocacy efforts and plans to continue to make this a priority as much as possible

c. NASPGHAN Members to date are not serving on APGNN committees. Through increased involvement in NASPGHAN Leadership activities however, physician mentors and advisors have informally been identified by active APGNN committee chairs.

5) APGNN President and Program Committee Chair have worked closely with Dr. Heubi in conference planning.

a. Our ability to attend an in-person planning meeting this year made creating our agenda and soliciting speakers much more dynamic. Our hope is that we can attend the 2018 NASPGHAN planning meeting in person if possible, as previous in person attendance was extremely beneficial to APGNN. We were able to leave the meeting with a larger speaker pool as well as a better understanding of how NASPGHAN produces their Annual Meeting.

b. APGNN will continue to collaborate with CPNP and NASPGHAN colleagues to ensure the Annual meetings are well received. This will hopefully be viewed by our membership as increased involvement and collaboration between the organizations, and will help build a congenial foundation to foster ongoing joint efforts and collaboration in the future.

Our 1-3 year specific goals included the following:

1) Having more formalized APGNN representation on NASPGHAN Foundation activities
   a. Alexandra Simonfay did include an APGNN member on the planning process of the Constipation Care Package expansion effort.
   b. Our Patient and family education committee has transferred numerous Patient and Family Education Documents for GI kids consideration

2) Ongoing involvement with NASPGHAN committees and with advocacy efforts

3) Continue to support enhanced member recruitment and retention
   a. Overall, our outcomes have been positive. We have increased our rate of new membership applications significantly since the annual meeting through the following initiatives:
   b. Buy 3 Get One Free-intended for NASPGHAN members and institutions that support their nurse’s membership
   c. APGNN Membership Booth at NASPGHAN-space complimentary from NASPGHAN
   d. We have provided a complimentary copy of the Handbook of Pediatric Gastroenterology to all members renewing their memberships prior to March. Moving forward, all new members will receive a complimentary copy while supplies last. Renewing members have the option to purchase for the price of shipping and handling.

4) Our Research Committee has become involved with the NOVEL Project. This is in its’ infancy stages. APGNN involvement will be based on our available resources and member interest.
   a. APGNN abstracts were submitted electronically again this year. The submission date now corresponds to the NASPGHAN submission date.
   b. Some challenges were identified with the process in regards to authorship (MD vs RN/ACP) which has been explored
   c. We received 3 submissions for the Susan G Moyer Research grant this year. The wonderful increased response is likely a direct effect of our Research Chairs presentation on research at the World Congress and their improved communication to participants offering mentoring and support through the process.
5) Our Past-President, Diane Kocovsky, has successfully collaborated with NAPNAP (National Association of Pediatric Nurse Practitioners) and we continue to work closely with NAPNAP as the provider for our Annual Meeting CEU’s. APGNN and NAPNAP now have a dual membership offering to procure and strength our collaboration and to hopefully recruit additional members to our organization.

6) Our Clinical Practice Committee creating 2 free e-learning modules to formally introduce at the Annual Meeting. One is on Basic Liver Care, the other is on Biliary Atresia.

7) We are exploring options to record our 2017 conference and offer it online for CEU credit for those unable to attend in person.
   a. Although costly it will add value to our member offerings and can also reach a larger audience based on our collaboration with NAPNAP

With the expanding support from NASPGHAN and the new energy of our current board however, we have had a very exciting and productive year. I am looking forward further enhancement of our current membership experience and hope that we will continue to work cohesively and complimentary with CPNP and NASPGHAN.

I want to thank the current and incoming APGNN Board members along with the membership at large for your ongoing support during the term of my presidency.

Respectfully Submitted,

Ryan Shonce, RN, MSN, FNP-C
APGNN President