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July 12, 2021



Preface to Proposed 2021 AANA Resolutions

Prepared by: AANA Resolutions Committee

Myra Branch, DNP, CRNA, APRN (Chair)
Michael DeBroeck, DNP, CRNA, MAJ, USAF (ret)
Jeffery Glasgow, MSN, CRNA
Robert Matthews, PhD, CRNA
Ann Miller, DNP, CRNA, APRN

Article XI of the AANA Bylaws requires that resolutions be received by the Executive Office at AANA 90 days before the Annual Business Meeting. However, Section 4 of this article does provide for the submission of designated Emergency Resolutions during the open hearing of the Resolutions Committee on Friday, August 13, 2021, during the virtual 2021 Annual Congress. Consideration of any Emergency Resolution by the membership shall first require a majority vote of the membership as to its proper designation as an Emergency Resolution.

It should be noted that anyone submitting an Emergency Resolution is requested to provide an electronic submission to the executiveunit@aana.com of the AANA so that it may be posted for those in attendance to visually see the resolution.

Resolution #2021-1

RESOLUTION REGARDING SALE OF AANA HEADQUARTERS AND ASSOCIATED PROPERTIES

WHEREAS, The AANA is the sole professional entity of CRNAs, who are the primary shareholders of the profession via the Association;

WHEREAS, in 1978 the membership voted to direct the AANA to not execute rental office space at 1500 Higgins Avenue, Park Ridge, IL, but rather negotiate and purchase office space to serve as headquarters of the AANA;

WHEREAS, growth of the Association necessitated the purchase of property at 222 South Prospect Avenue, Park Ridge, IL in 1992 to serve as the new headquarters of the Association;

WHEREAS, a campaign was established in 1992, which paid off the building mortgage with donations from members, the predecessor of the AANA Foundation, the Councils on Certification and Recertification, and state associations, setting the precedent as the members' building;

WHEREAS, the COVID pandemic has rendered business operations in a state of flux at present; and

WHEREAS, this resolution has the support of the majority of former AANA presidents, those individuals who led the AANA through its recent past, because they believe the proposed course of action is not in the best interests of the Association;

RESOLVED, That the AANA membership urges the AANA Board of Directors to acknowledge that the headquarters building of the AANA was purchased at the direction of the members, and supported by membership dues, contributions from individual members, state associations, the AANA Foundation, and non-dues revenue and was intended to benefit the Association; and that, since its acquisition, many members have come to consider the property as other than just a physical asset,

FURTHER RESOLVED, That the AANA membership expresses its strong desire that neither the AANA Board nor its CEO engage in the sale of AANA Headquarters before exercising due diligence in evaluating post-COVID business operational and member needs, current maintenance costs versus those of relocation, and the unintended consequences of leasing versus owning.

FURTHER RESOLVED, That the membership conveys how essential it considers open communication regarding this issue and, thus, recommends that the AANA Board of Directors agree to report its findings to the membership during the business meeting of the 2022 Annual Congress at which time, upon the proper filing of another resolution, the members could have the opportunity to vote on whether the BOD should sell or retain the property; and

FURTHER RESOLVED, That, in the interim, the AANA membership supports the Board of Directors and its CEO selling the property at 116 South Prospect Avenue and using the proceeds of this sale to offset upgrades, improvements, and relocation expenses to move AANA Insurance Services to AANA Headquarters.

RATIONALE:

The AANA Headquarters and associated property was purchased through membership dues, non-dues revenue, contributions by individual members, state associations, the AANA Foundation, and the Councils on Certification and Recertification. As a member-driven association, the AANA Board of Directors is elected to represent the membership; however, = decisions of this magnitude that involve the use of member dues and non-dues revenue and the selling of significant association assets warrant open dialogue, transparency, member input and membership vote.

COST ANALYSIS:

The cost analysis is neutral at this time.

PROPOSERS:

Bruce Weiner	37337	Janice Izlar	27177	Sandra Ouellette	18312
Garry Brydges	53219	Peggy McFadden	15972	Nancy Bruton-Maree	22375
Cheryl Nimmo	30830	Scot Foster	26951	Terry Wicks	39206
Juan Quintana	48692	Deb Geisler	32202	Wanda Wilson	20607
Brian Thorson	40740	Linda Williams	26269	Mark Haffey	53080
Dennis Bless	46012	Tom McKibban	27681	Dick Ouellette	18906
Jim Walker	43062	Patrick Downey	17256	Mary DePaolis Lutzo	17825
Debra Malina	48414	Larry Hornsby	37841	Sandra Kilde	17477
Sharon Pearce	43127				

Resolution #2021-2

A MEMBERSHIP DRIVEN RESOLUTION REGARDING THE FUTURE OF NURSE ANESTHESIOLOGY CERTIFICATION AND RECERTIFICATION

WHEREAS, The American Association of Nurse Anesthetists is the sole professional body for CRNAs, and is owned by members, who are thus the primary shareholders of the profession via the association.

WHEREAS, The American Association of Nurse Anesthetists (AANA) is involved in setting standards for the CRNA credential.

WHEREAS, The American Association of Nurse Anesthetists (AANA) has recently rebranded to the American Association of Nurse Anesthesiology through a successful membership vote on the 2020 Resolution: Rebranding the Profession.

WHEREAS, The nurse anesthesiologist concept has gained formal and informal recognition throughout the nation and within the CRNA community including 5 different State Boards of Nursing who have now approved the use of the term nurse anesthesiologist (New Hampshire, Florida, Arizona, Alaska and Idaho).

WHEREAS, “Certified Registered Nurse Anesthetist” and “Certified Registered Nurse Anesthesiologist” are now both approved as synonymous titles by the American Association of Nurse Anesthetists (AANA).

WHEREAS, The resolution process exists so that AANA members may express their collective voice on pressing issues impacting the profession.

RESOLVED, The AANA requests through this Resolution that the NBCRNA, as the nationally recognized certification body for CRNAs, approve both titles, “Certified Registered Nurse Anesthetist” and “Certified Registered Nurse Anesthesiologist”, and recognize them as synonymous to each other as the official CRNA credential and certification.

FURTHER RESOLVED, That the AANA further requests that the NBCRNA provide the AANA with an update on the requests detailed in this Resolution by March 31, 2022 so that the AANA Board, if necessary, can explore any and all actions that could be taken to help implement these critical recommendations as what’s in the best interest for the future of the profession. The AANA Board is called upon to present any and all further actions to the membership for consideration before implementation. The AANA Board is also asked to update the members on the status of this Resolution request by the 2022 Mid-Year Assembly.

RATIONALE:

Over the past 5 years, professional titles for many professions – physicians, CRNAs, dentists, physician assistants, and anesthesiologist assistants – have been a subject of intense discussion in the United States and throughout the global medical community. The members of the AANA must be prepared to thrive in a changing landscape, which includes an evolving strategy to define ourselves to stakeholders.

Accordingly, in 2018, the AANA formally recognized nurse anesthesiologist as a descriptor for CRNAs. In 2019, the AANA formally recognized nurse anesthesiologist as a synonymous title. Since the recognition of synonymous titles, 5 different State Boards of Nursing have recognized the use of the term nurse anesthesiologist through their Boards of Nursing (New Hampshire, Florida, Arizona, Alaska and Idaho). In 2020, the AANA membership also passed a resolution to rebrand the profession and national association to the American Association of Nurse Anesthesiology.

The AANA serves as the national “umbrella” body for CRNAs, and CRNAs are in various states of recognition

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throughout the country. The NBCRNA serves as the national certification body for CRNAs, and the time has come for the NBCRNA to illustrate that it's in line with the evolution of the profession by certifying both AANA approved synonymous titles: certified registered nurse anesthetist and certified registered nurse anesthesiologist as the official CRNA credential.

This resolution begins the process with the NBCRNA to address the issue of synonymous titles within the CRNA profession. Further, this resolution addresses the synonymous nature of the two titles discussed, and as such allows encourages a complimentary, rather than a legal replacement, within the APRN Consensus Model.

COST ANALYSIS:

There would be no cost to the AANA with this resolution as any cost associated with the NBCRNA adding an approved synonymous title to the CRNA credential would be the responsibility of the NBCRNA as an independent certification body.

PROPOSERS:

1. Jonathan Alvarado – AANA #111586
2. James Stockman – AANA #086764
3. Michael Hunt – AANA #085089
4. Jennifer Banek – AANA #089814
5. RJ Wingman – AANA #052896
6. Gus Powell – AANA #070504
7. Mike MacKinnon – AANA #082345
8. Maria Konen – AANA #76200
9. Rae Ritter – AANA #092924
10. Michael Tran – AANA #077710
11. Stephen Blanchard – AANA #50792
12. Tracy Young – AANA #053475
13. David Hidalgo – AANA #71463
14. Erik Rauch – AANA #076461
15. Jennifer Schmitt – AANA #103776
16. Scott Rigdon – AANA #80312
17. Karyn Karp – AANA #41170
18. Kellie Deeter – AANA #078107
19. Kendra Stockman – AANA #070572
20. Jeff Molter – AANA #051171
21. Joe Rodriguez – AANA #090294
22. Betsy Majma – AANA #051823
23. Ali Baghai – AANA #082695
24. Joe Romero – AANA #100562
25. Tom Baribeault – AANA #105917
26. Jill Mason-Nguyen – AANA #055076

Resolution #2021-3

A MEMBERSHIP DRIVEN RESOLUTION REGARDING THE FUTURE OF NURSE ANESTHESIOLOGY EDUCATION AND CLINICAL TRAINING

WHEREAS, The American Association of Nurse Anesthetists is the sole professional body for CRNAs, and is owned by members, who are thus the primary shareholders of the profession via the association.

WHEREAS, CRNAs are full-scope anesthesia professionals who are able to provide independent expert-level anesthesia, pain management, and perioperative services.

WHEREAS, The American Association of Nurse Anesthetists (AANA) and the Council on Accreditation of Nurse Anesthesia Educational Programs (COA) supported the Full Scope of Practice Competency Task Force (FSOPCTF) to make evidence-based recommendations intended to continue to prepare nurse anesthesia graduates to meet the needs in all types of practice settings for today and tomorrow.

WHEREAS, The Full Scope of Practice Competency Task Force final evidenced-based recommendations were recently published on the AANA website for all members to review ([https://www.aana.com/docs/default-source/practice-my-aana-web-documents-\(members-only\)/fsopctf-report-executive-summary-for-release-final.pdf?sfvrsn=9bed7f27_2](https://www.aana.com/docs/default-source/practice-my-aana-web-documents-(members-only)/fsopctf-report-executive-summary-for-release-final.pdf?sfvrsn=9bed7f27_2)).

WHEREAS, The American Association of Nurse Anesthetists (AANA) has recently rebranded to the American Association of Nurse Anesthesiology through a successful membership vote on the 2020 Resolution: Rebranding the Profession.

WHEREAS, “Certified Registered Nurse Anesthetist” and “Certified Registered Nurse Anesthesiologist” are now both approved as synonymous titles by the American Association of Nurse Anesthetists (AANA).

WHEREAS, The American Society of Anesthesiologists now officially uses the term Physician Anesthesiologist to describe their members to the general public.

WHEREAS, The resolution process exists so that AANA members may express their collective voice on pressing issues impacting the profession.

RESOLVED, The AANA requests through this Resolution for the adoption of all Full Scope of Practice Competency Task Force final recommendations ([https://www.aana.com/docs/default-source/practice-my-aana-web-documents-\(members-only\)/fsopctf-report-executive-summary-for-release-final.pdf?sfvrsn=9bed7f27_2](https://www.aana.com/docs/default-source/practice-my-aana-web-documents-(members-only)/fsopctf-report-executive-summary-for-release-final.pdf?sfvrsn=9bed7f27_2)) by the Council of Accreditation for Nurse Anesthesia Programs (COA) by March 31, 2022 with the goal that every CRNA Education Program has them implemented within the next 5 years (March 31, 2027).

The AANA also requests the Council on Accreditation of Nurse Anesthesia Programs (COA) to define CRNA as “certified registered nurse anesthetist” and “certified registered nurse anesthesiologist”, and to recognize the terms as conceptually interchangeable and synonymous titles just like the AANA does.

Lastly, the AANA requests the COA to update their documents and definitions to change the term “anesthesiologist” when being used to refer to a physician to “physician anesthesiologist.”

FURTHER RESOLVED, That the COA is asked to provide the AANA with an update on the requests detailed in this Resolution by March 31, 2022 so that the AANA Board, if necessary, can explore any and all further actions that can be taken to help implement these critical recommendations as what’s in the best interest for the future of the profession. The AANA Board is called upon to present any and all further actions to the

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membership for consideration before implementation. The AANA Board is also asked to update the members on the status of this Resolution request by the 2022 Mid-Year Assembly

RATIONALE:

The CRNA profession has hit a pivotal point in its history. The anesthesia market due to supply and demand healthcare economics has led to a critical need from national employers for CRNAs to be able to provide full service anesthesia upon graduation from CRNA education programs. It is the responsibility of the profession to ensure it can meet the public's need for anesthesia care. The AANA and its members as the national professional body have led the way in increasing the profession's educational standards by creating the Full Scope of Practice Competency Task Force Final Recommendations for CRNA education programs.

The COA as the national education accreditation body also needs to illustrate that it supports the national need for evolution of CRNAs to full-service anesthesia providers by adopting all the AANA Full Scope of Practice Competency Task Force Final Recommendations. It also needs to illustrate that it is evolving with the profession in regard to its use of professional titles by adopting the AANA approved synonymous titles and updating its terminology in its formal documents accordingly.

This resolution begins the process with the COA to address the issues of educational standards and synonymous titles within the CRNA profession in accordance within the legal framework of the APRN Consensus Model.

COST ANALYSIS:

There would be no cost to the AANA with this resolution as any cost associated with the COA adopting all the AANA Full Scope of Practice Competency Task Force final recommendations would be the responsibility of the COA as an independent accreditation body.

PROPOSERS:

1. Jonathan Alvarado – AANA #111586
2. James Stockman – AANA #086764
3. Michael Hunt – AANA #085089
4. Jennifer Banek – AANA #089814
5. RJ Wingman – AANA #052896
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