

The annual state of CPNP report

Rex Lott

Our 16th Annual Meeting is now on the record. What a positive experience!! Thanks to the Program Committee (chaired by Jody Malhotra), the Recertification Editorial Board (chaired by Sarah Melton) and the many others (most especially the CPNP Staff – Brenda Schimenti, Greg Payne, and Vanessa Wasser) for the endless hours of effort they put in to make this a successful meeting full of stimulating programming. Once again, The Broadmoor proved to be a wonderful venue for our meeting; several of us realized that the resident deer remembered us from our last meeting!!

I know that there are members who could not attend that Annual Meeting, and there are members who needed to depart early and could not attend our annual Town Hall meeting to discuss the “State of CPNP”. I’d like to review some of the information that we presented at the Town Hall meeting and refer you to the [Town Hall slide deck and minutes](#).

CPNP is strong! Your organization is growing and evolving to meet members’ (your) needs. We now boast a membership of over 1300 people. CPNP’s Board of Directors focused on three top priorities for 2012-2013. We were able to report significant progress on each of these at the Town Hall Meeting:

1. **Advance existing relationships and establish new relationships with other organizations.** Our long-standing relationship with NAMI continues. Although the CPNP Walk for NAMI had to be cancelled this year, registrations were strong and, with matching funds from CPNP, we donated over \$4,000 to NAMI. CPNP continues to be well-represented on the BPS Psychiatric Pharmacy Specialty Council. Our specialty continues to grow with 80 individuals achieving initial BCPP status in 2012. The CPNP Foundation continues to focus attention on examining the relationships between community pharmacists and persons with mental health conditions as well as on holding a Summit Meeting with various stakeholders. The goal of the Summit meeting will be to increase access to Comprehensive Medication Management (CMM). Our newly-created Government Affairs Council has worked very hard to strengthen CPNP’s relationships with the Joint Commission of Pharmacy Practitioners and the Pharmacy Stakeholders Group. In addition, we have established a partnership with ACCP in their

initiative to achieve provider recognition for qualified pharmacists who provide CMM.

2. **Maximize the visibility of existing CPNP resources.** The Movement Disorders Training DVD has become more widely available via Amazon.com and through Training Resource Campus (an electronic training portal heavily used by researchers and clinical trial organizations). Alternate uses of the BCPP Examination Review and Recertification Course are growing. It is being used as a university textbook this year; 3 to 4 companies use it for employee education; and our partnership with the American Psychiatric Nurses Association has resulted in their endorsement of the product and an additional market. The Mental Health Clinician has had a tremendous impact on the visibility of CPNP and its content on our website is highly visible. Thirty percent of all visits to cpnp.org start in the MHC! We are now seeing approximately 15,000 visits yearly to the CPNP website. A new resource is in development. This will be an online Case Series; stay tuned for details. We expect to see the first cases later in this year. Our information/education efforts are getting attention; people are learning what neuropsychiatric pharmacists bring to the table!!
 3. **Nurture the culture of volunteerism to help grow future leaders.** Clearly, CPNP is volunteer-driven. Committee and Editorial Board members, the Board of Directors, and the Past President’s Council lead the organization with the invaluable assistance of CPNP’s staff. In addition, ad hoc volunteers who review abstracts for posters and awards, peer review articles for MHC or other products, Annual Meeting speakers, recertification authors, field testers for recertification products, authors of articles, and all of you who post stimulating content to our listserve help make CPNP the successful, engaging organization it is.
- Despite the challenges that face individuals and organizations (the economy and unemployment, government budget cuts and travel restrictions for some of our members, healthcare legislation, and changes to industry support) our profession and specialty enjoys solid fundamentals that enable CPNP to move forward and evolve to meet our members’ needs.
- **Our specialty and its infrastructure are strong.** There are now a total of 758 BCPP’s. In 2012-2013, 54 new psychiatric pharmacy residency positions were

created (39 PGY2 positions and 15 PGY1 positions). The VA's Interprofessional Mental Health Education Expansion Initiative funded development of new VA-based residency programs (32 PGY2 positions and 13 PGY1 positions). Overall there are currently 2,694 PGY1 positions and 692 PGY2 positions in the ASHP Accreditation Process. This year, there were nearly 800 applicants for the 692 PGY2 positions; 600 of the positions matched. Of the PGY2 positions in the Match, 50 were Psychiatric Pharmacy positions; 37 of those positions were filled at Match (prior to "Scramble"). Early commitments to PGY2 programs are increasing.

- **Recertification of BCPP's through CPNP is strong.** Nearly 1000 CPNP recertification products were sold in 2012, and early sales in 2013 are on pace with previous years.
- **CPNP membership and meeting attendance are strong:** Almost 500 people attended this year's Annual Meeting.
- **CPNP's Committees and Volunteer Participation are strong.** We have more volunteers for committee service than positions. Our committees are maturing; most of their efforts are now based on standing charges, and they are transitioning from brainstorming and planning to successful implementation of programs and processes (e.g., Student Chapters and Writing Support Groups). More committee efforts involve peer review which takes them to the next level of excellence. Even though we can't assign all who volunteer to committees, our members are taking advantage of the ad hoc volunteer opportunities that arise.

And now, the future. Your Board of Directors has identified their 3 major priorities for 2013-2014:

1. **Launch a new 3-year strategic plan that is both aggressive and attainable.** This plan is in development now and will be released and implemented by the end of 2013.
2. **Become active participants in defining the future of our profession through government affairs.** CPNP's partnership with ACCP in seeking provider recognition is a major undertaking that will involve a great deal of education, information and energy. Our Government Affairs Council will be actively taking the lead in this effort, but we may need rapid volunteer response from membership.
3. **Reinforce and increase awareness of CPNP membership benefits.**

As part of the process of looking toward to the future, we completed the ceremonial Transition of Officers at the Town Hall Meeting. Although Julie Dopheide won't actually assume the office of President until July 1, she received her gavel of office during the Transition Ceremony. She will do a great job of leading us to achieve our priorities and goals. Other incoming members of the Board of Directors will be Ray Love (At-Large), Chris Thomas (Treasurer), and Stan Weber (Advisory Appointee). Steve Burghart will be continuing on the Board as Incoming President-Elect while Jerry McKee, Megan Ehret and Gary Levin will conclude their terms.

Please remember that, even if you weren't able to attend this year's Annual Meeting, next April will be here before you know it. We'll look forward to seeing everyone in Phoenix for our 17th Annual Meeting. Mark your calendars now for April 27-30 at the Arizona Grand!!

'Til next month.

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