# Message From The President



Greetings one and all. Last month we celebrated Perianethesia Nurses Week. I hope that you were able to take advantage of the numerous educational opportunities that were offered across the state during that week and or month. NYSPANA is committed to offering our

members opportunities for not only continuing education, but a chance to network with fellow nurses in out specialty. In a world where technology allows us to reach across miles without leaving our living rooms, I still believe that having a face to face conversation with our fellow nurses remains an invaluable asset to gaining insight into how others practice and bring these ideas back to our work places to help improve the care we give our patients.

Please consider attending the ASPAN National Conference in Indianapolis April 3—May 4, 2017. The brochure can be found on line at <u>aspan.org</u> which can be accessed through the link on our NYSPANA website under the events tab.

I would also like to congratulate those members who became certified CAPA/CPAN and to those who renewed their certification. This reflects a commitment to providing quality care for our patients and to continuing education.

Respectfully Submitted,

Bronwyn Ship, BSN, RN, CPAN

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#### **Mission Statement**

The New York State Perianesthesia Nurses Association advances nursing practice through education, research and standards



#### **Board Members**



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Bronwyn Ship, BSN, RN, CPAN W: 585.396.6274 www.nyspana@gmail.com

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Barbara Ochampaugh, BSN, RN, CPAN www.nyspana@gmail.com

http://www.nyspana.net



Happy belated Perianesthesia Nurse's week. I hope each of you were able to celebrate our organization. ASPAN was founded to give voice and education to all phases of perianesthesia nurses. What started out small has grown into a worldwide premier organization. None of this was possible without the dedicated work of leadership and membership willing to step out of their comfort zone to grow, teach and learn. My wish is that each of you will think about where you can contribute to NYSPANA and ASPAN. NYSPANA needs new leaders to replace our retiring leaders. New York City, Binghamton and Syracuse needs officers to get their districts active. New York City is the site for the 2017 State conference. Help is needed to organize and work at the conference. There is no networking of education opportunities without the ability to hold a meeting. All Districts need hosts or hostess' willing to find a room and a speaker for a meeting. Please think about where you can contribute, visit the web site to learn what district you are in and who your leader is to contact. We wait to hear from you!

On a different note, I don't know where you fall politically. As nurses, we need to be aware of the issues on the federal, state and local level that affect our lives and those of our patients. Will the BSN in 10 finally be passed? Over 40 years in the making, it passed the assembly last year. Our student nurses need to be aware of this bill. It will affect their ability to obtain a job. Already magnet hospitals are requiring a BS degree and encouraging staff to return to school. Will the affordable care act be repelled? What happens to our newly insured, people with pre-existing conditions or currently being treated for diseases? IS there a replacement for it? Immigration and walls. Where do you stand on these issues?

Our voices are heard. It is easy to call and write to your legislative leaders. Go to the following web sites and you can contact your leaders on the state and Federal level. Please lend your voice to issues.

Assembly.state.NY.US www.NYsenate.gov www.senate.gov www.house.gov www.whitehouse.gov

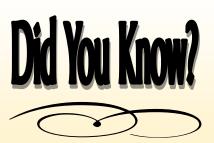
Respectfully Submitted,

Barbara Ochampaugh, BSN, RN, CPAN



Bronwyn Ship, BSN, RN, CPAN ● 4620 North Road ● Canandaigua, New York 14424





April 30 – May 04, 2017



#### **ASPAN Conferences**



# Happy Retirement Deb Kwacz, RN

VICE PRESIDENT

Thank you for your dedication.

# financial Report

Money Market Savings: \$22,243.98

Checking: \$23,381.91

Investment Account: \$16,463.33



#### **Constant Contact**

NYSPANA uses constant contact (an email marketer) to send out "blasts" to all members. Please notify Barb Ochampaugh (barbochampugh@verizon.net) or Bronwyn Ship (NYSPANA@gmail.com) for any district or state offerings.

Once I have their approval, I can send to all current NYSPANA members who have provided an email address.

Last year 13 blasts were sent announcing opportunities to serve, latest UP to Par edition, educational offerings and scholarship applications etc.

Please consider this option for your next event.

Cynthia Veltri Lucieer, BSN, RN, CAPA CVL54@hotmail.com

#### **NYSPANA** Website

www.nyspana.net

Website Administrator: Bronwyn Ship

Website Co-Editors: Susan Alati 
Sandra Price 
Susan See

Website Developer: Carrie Falzone • C: 585.329.8313 • carrie@verticalinsite.com



# New MYSPANA Certification Fall 2016



Aireen Brondo

Margaret Hickey

**Dual Certification** 

Alvin Magcalas

Norma S. Malto

John Paolo-Mendoza

Angela Patruno

D'juna Nichelle Peters

Patricia Flynn-Rogan

Christina Rubino

Casandra Ann Way

Lauren Zahradka

# 20 NYSPANA Members have Dual Certifications



Brandy Byrne

Ami E. Harris

Matthew Leo

Brenda Luke

**Dual Certification** 

Diane Sambo

**Dual Certification** 



# Recertified

CAPA: 138 Nurses

CPAN: 193 Nurses

And, Don't Forget... Certified Nurses Day, March 19



# Interruptions, Noise Level and Alarm Fatigue

As nurses and everyday people, our eyes and ears are constantly bombarded by sound and sights. We are looking and listening for pleasant things and on the alert for danger. In the perianesthesia environment we are assessing, listening for alarms and questions. We are surrounded with a cacophony of sights and sounds in whatever phase of perianesthesia nursing you work. We respond to questions and alarms while in the middle of tasks and resume the task we were attending too.

Interruptions are things that occur around us. Interruptions occur frequently during our daily activities be it at work or at home. Cell phones send messages to us all the time. Are interruptions beneficial or harmful to us? Research is being conducted to determine this answer. Not all interruptions are bad and are necessary for the care of the patient.

Nurses play a key role in safe delivery of care. Nurses need to make timely clinical decisions in an environment where the conditions are conductive for error. (McGinley) Research is showing that nurses are interrupted 3-6 times per hour. (McGinley) When we are interrupted at the wrong time there can be serious consequences. You are getting medications out and someone asks you a question. This can lead you to forget a medication or pull the wrong drug for the wrong patient. Speaking to a patient and you hear someone call for help is a good interruption. It does take time to recover from an interruption and go back to the task you were preforming before the interruption. (Carrier)

In a study by Potter, experienced nurses were interrupted the most frequently by inquiries from less experience staff. In this study the senior nurse accepted the interruptions as part of their work load. (McGinley)

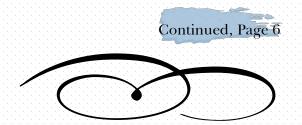
In a study by Westbrook, when interrupted in a primary task, once the interruption is taken care of, the primary task is resumed. The nurse may Barbara Ochampaugh, BSN, RN, CPAN

have been interrupted up to eight times before returning to the interrupted task. (Rivera & Karsh)

When we are interrupted from our primary task, memory of the task is erased to address the interruption. When returning to the primary task it is easy to not remember where you left off. (Rivera & Karsh)

Should all interruptions be eliminated? How can this be accomplished? There are "no interruption" zones, "Do Not disturb" vests, and "Medication Pass" time outs? These areas work well on nursing units, but in a busy open recover room how would you distinguish these areas. We frequently turn from one patient to another seamlessly and deliver safe patient care. We listen to the nurses' interactions next to us and are aware of a need for help. We go seamlessly from task to task or do we. How long does it take for you to return to the task you left? (Rivera & Karsh)

Do noise level have factor in distractions and interruptions? As the staffing levels increase and patients arrive in any phase of perianesthesia work, what happens to the noise level? Do you find yourself wishing everyone would be quite so you can calm a patient? Some units have placed Yacker trackers in the area in an attempt to soften noise levels. These are stop lights that change color based on the noise level and are a visible signal to soften the noise. Hush curtains are another new item on the market to quiet the area around a stretcher or bed.





## Interruptions, Noise Level and Alarm Fatigue (Con't)

Alarms are a distraction that need our attention. Eighty-five to ninety five percent of the alarms we hear are false. This conditions us to not respond to the alarms a condition called alarm fatigue. (Ensslin). To avoid alarm fatigue, you should adjust the monitor to your patient's parameters. Alarm fatigue causes the nurse to delay looking at the alarm and treating a potential problem. The lesson in this is to be aware of the interruptions around us. Be aware when returning to your original task that all the necessary steps are taken to avoid an error. Remember to err is human.

#### References

Carrier, L.M.(2009). What are the effects of getting interrupted? Going Concern accessed January 2017.

Ennsler, P.A. (2016). Do you hear what I hear: combating alarm fatigue. American Nurse today. Healthcare Media.

McGinley, P.( 2010). *Distractions and Interruptions: impact on nursing*. Patient Safety and Quality Healthcare. March-April.

Rivera, A.J & Karsh, B. (2010). *Interruptions and distractions in healthcare: review and reappraisal.* Quality& safety in healthcare. Aug. 19(4).304-312



#### Introduction of "comfort card" in perioperative area to improve patient experience and nursing communication

Team Leaders: Melanie Quinn RN, Schuyler Alsop MSN RN New York-Presbyterian Weill Cornell, New York, New York

Team Members: Toni Velasquez BSN RN, Amanda Bodinet RN, Magdalena Smith MA OCN, Sarah Flood BSN RN CCRN

#### Improving rn satisfaction of hand-off report from anesthesia to the PACU RN

Team Leader: Gregory Camacho RN MSN

New York-Presbyterian Hospital, New York, New York

Team Members: Rey Arnel Agudana RN, Laura Han RN CCRN

#### Universal protocol and time-out: a highly reliable tool for the promotion of patient safety

Team Leader: Magdalena G. Smith MA RN OCN New York-Presbyterian Hospital, New York, New York

Team Member: Hidelisa Billianes BSN RN

#### Understanding malignant hyperthermia

Team Leader: Magdalena G. Smith MA RN OCN New York-Presbyterian Hospital, New York, New York

Team Member: Melissa Alford BSN RN

Continued, Page 7







#### T minus 15 minutes: a peri-operative countdown to safety

Team Leaders: Aimee Dannaoui BSN RN CAPA CPHON, Laurina McMillan RN CAPA, Desiree Sokoli MSN RN APN FNP-BC NE-BC, Anna Szul BSN RN CAPA

#### Memorial Sloan Kettering Cancer Center, New York, New York

Team Members: Sabrina Brown, Service Coordinator (SA), Michelle Burke MSA RN CNOR, Director of Nursing Perioperative Services, Terri Cruz BSN RN OCN, Keisha Findley BSN RN OCN, Charles Gadsden, Patient Care Technician (PCT), Celeste Hamilton, Unit Assistant (UA), Amanda Harris, Unit Assistant (UA), Deonie Malcolm, Unit Assistant (UA), Mary-May Saulan MSN MPA RN CNOR, Lystra Swift MA RN CNOR, J. Patricia Walsh RN OCN, Roger Wilson MD, Executive Director of OR Operations, Kamille Woody, Unit Assistant (UA), Shokjean Yee MA RN CNOR

#### Improving patient outcomes by improving post-surgical antibiotic timeliness

Team Leaders: Peter Stoffan RN BSN, Alexandra Schuyler Alsop RN MSN New York-Presbyterian Hospital/Weill Cornell Medical Center, New York, New York

#### Improving patient and family satisfaction during the perioperative experience

Team Leader: Barbara U. Ochampaugh RN BSN CPAN

St. Peter's Health Partners Albany New York

Team Members: Deborah Marra RN BSN CPAN, Lisa Machovec RN

#### Does a colorectal bundle reduce surgical site infections?

Team Leader: Barbara Ochampaugh RN BSN CPAN St. Peter's Health Partners, Albany, New York

Team Members: Helen Krajick RN MS CNOR, Dawn Morrill RN, Jennifer Penton RN BSN, Amy Steenburgh RN

#### Now read this! The development of a presurgical manual to facilitate the orientation process

Team Leaders: Lori Gofter MS RN OCN CAPA, Monique Hodge BSN RN CAPA, Wanda Rodriguez RN MA CCRN CPAN, Desiree Sokoli MSN RN APN FNP/BC NE-BC

#### Memorial Sloan Kettering Cancer Center, New York, New York

Team Members: Jean Bivona BSN RN CAPA, Aimee Dannaoui BSN RN CPHON CAPA,
Kristyn DiFortuna MSN RN CNS CPAN, Christine Gillins-White BSN RN, Mary Irwin MA RN CAPA, Robina Kitzler MSN
RN AOCNS CCRN CPAN, Kathleen Lombardo MS RN AOCNS CAPA, Noelle Paul BSN RN OCN CAPA, Lenore Smykowski
MA BSN CPAN, Anna Szul BSN CAPA



It is with great sadness I report the resignation of Shari DuGuay, MSN, RN, CAPA, NE-BC, president of District 10. The District thanks her for her dedication and leadership these past years. You will be missed.

~~~ Barb Ochampaugh



Susan See, RN, President of District 9 has resigned.



#### Amy L Dooley, MS, RN, CPAN ASPAN Regional 4 Director

#### I am a Novice!

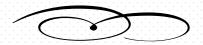
Many of the surgical services nurses I have met have had long tenures in nursing. The traditional path of medicalsurgical nursing to critical care then transferring to surgical services was one that many of us have followed. Thankfully with the baby boomers retiring and the millennials anxious to get to their ideal jobs, that pathway is not the only way to get into PACU or ambulatory surgery. We see med-surg nurses coming right into the critical care area of the PACU, and being successful, I might add. This new mindset coalesces with President Bickertstaff's theme "Energizing Generations: The Race to Distinction"1. Her focus is to embrace change and welcome these new energetic nurses into our midst.

Change happens to all of us whether it is desired or just occurs. We sometimes are the instigators and sometimes not. As us baby boomers continue to show up every day for work sometimes things have to change. You might get "bored" of the routine, you might find yourself less tolerant of those in need, you might decide enough is enough so you begin to think "what's next?" As a tenured PACU nurse with lots of experi-

ence I took a look at my career path and decided that change was necessary. Was I going to move to the ambulatory setting? Were my talents going to be used in the pre-admission Testing area? My nurse manager was a good sounding board for listening to my goals and where my trajectory would be. Low and behold several months into this process the position of clinical educator for PACU, Amb Surg, and PAT became available. With encouragement from my colleagues I applied for the position, was interviewed, and was offered the I accepted the position with great enthusiasm. This is what I was looking for, felt ready to take on the challenge, and feel I can bring a positive presence to my colleagues.

This brings me to the title of this article. We are all familiar with Patricia Benner's work with the Novice to Expert stages of clinical competency. This is a new position for me, I have never been a hospital based clinical educator before, and never been considered part of a leadership team. Technically I would be classified as a novice. However, I have been an educator as clinical faculty at a local college for 6 years using

educational techniques along with evaluation tools and orienting new students to the RN role. Maybe I would classify myself as an advanced beginner. As I continue through my orientation I am in awe of the person moving on and all she has accomplished. She makes it look so easy. I listen, ask questions, and write EVERY-THING down as she seamlessly switches from orientations to competencies to committee work. It will be important for me to embrace not only the tenured nurses but also welcome the millennials into our surgical services units and tailor their orientation in a method and style that works for them. As I continue to grow in position you can be assured that I will tap into the expertise of many of my ASPAN colleagues. Don't be surprised if I call and ask for advice.



References: http://www.aspan.org/About-Us/Presidents-Page





#### **ABPANC**

#### **CERTIFICATION**





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#### **Questions? Contact ABPANC**

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PH: 800-6ABPANC

FAX: 212-367-4256

Email: abpanc@proexam.org

Website: www.cpancapa.org







CPAN® / CAPA® Study Questions of the Week

Test Blueprints

Study References (Appendix D)

Webinars

**Study Tips** 

12-Week Lesson Plan

Mind Mapping Study Guide

**Certification Candidate Handbook** 







### Up to Par Submissions

Please send all of your articles of interest, district news, events and photos to NYSPANA newsletter Editor for the July newsletter edition of **Up To Par** by June 01, 2017.

www.nyspana@gmail.com



#### NYSPANA Educational Funding Plan

#### Susan Alati, BSN, RN, CAPA

At the October 2016 NYSPANA Board meeting, the board members revised the educational funding plan. The previous method was based on a point system which was difficult for members to understand, use and obtain funding while the new plan has been simplified.

<u>Primary Purpose:</u> To establish an educational funding plan to help cover expenses for educational conferences, certification, and recertification for NYSPANA members

<u>Policy Statements:</u> The goal of the Educational Funding Plan is to provide scholarships to NYSPANA members at large and to be used for educational purposes related to perianesthesia nursing, CPAN/CAPA certification, and/or recertification

Prerequisites for application are:

Current active member in ASPAN/NYSPANA; minimum of 13 months Current practice, at least 500 hours annually, in the care of patients in some phase of perianesthesia care, or in the management, teaching, or research of perianesthesia care

Funds granted are based on the number of applicants, availability of funds and the degree to which the program is related to perianesthesia nursing. The NYSPANA BOD determines the total amount of monies awarded annually. Any unspent funds will be carried forward to the next quarter.

Reimbursements will be given based on the following criteria:

Relevance to the individual's needs

Previous receipt of funds

Total amount requested in relation to funds available

Timeliness of application in relation to anticipated date of educational program

All applications must be complete and received for review at least four weeks prior to the educational program/certification/recertification. No applications will be considered after the established guidelines.

The President, Vice President, Secretary, and Treasurer based on the current financial status of the educational fund, will determine the amount of money granted to an individual during any given calendar year (maximum \$250.00). Applicants are restricted to the total maximum of \$250 per calendar year. Applicants may apply every other calendar year for funding. The money awarded is non-transferable

Continued, Page 11



#### NYSPANA Educational Funding Plan

(Continued)

<u>Procedures:</u> Applications for funding are reviewed by the Executive Board to determine qualification and the amount to be awarded Once approved, the money will be awarded to the recipient upon written verification of the following:

Certification/Recertification

Successfully passing the CPAN/CAPA exam (copy of certificate) Successful completion of the recertification process Proof of payment receipt

#### **Educational Funding**

Copy of contact hours received at completion of educational program

Proof of attendance of the educational program

Proof of payment receipt

Submit a summary of the educational experience attended within four weeks after attendance

Announcement of the educational recipient will be published in Up to Par newsletter/ NYSPANA website

A copy of the application is available on the www.website NYSPANA.com under membership.

The NYSPANA Board meets twice a year in March and October. Any suggestions or ideas are appreciated and are brought to the board members at the next meeting.

E-mail ideas to: Susan Alati, CAPA, BSN, RN NYSPANA Treasurer @ salati@rochester.rr.com.

President and Vice President position for District 10 (Albany and surrounding areas)

This is a great ways to network with other perianesthesia nurses from your area (district level) or across NYS (state level). Please contact Barb @ barbochampaugh@verizon.net

for any questions. Or, call 518..525.5032

No requirements are necessary, just the willingness to lead the district, help plan programs and willing to give your time and talent to the organization.

#### **NYSPANA** Editor

Chris Deitrick • www.nyspana@gmail.com



#### **District 14 News**

District 14 has been busy with activities supporting our local community, supporting our local perianesthesia nurses and networking with other nursing professional organizations. Our district donated unused spiral notepads to a local charter school.

We are proud to announce our 20<sup>th</sup> Annual One Day Conference celebrating PANAW on February 11<sup>th</sup> was a huge success, with 116 attendees. We honored our members by giving them a \$20.00 registration fee. Presentations included Diabetes – Don't Sugar Coat It, Opioid Overdose Prevention, Invasive Therapies for A-Fib, Palliative Care: Navigating Serious Illness, Deep Brain Stimulation, and Surgical Implications for Patients with Rheumatologic Diseases. Our 50/50 raffle and raffle for a donated ceramic leaf by Rosanne Kolb collected \$300. These proceeds were donated to the Go Red for Women campaign for the fight against women's heart disease. Take a look on the NYSPANA Facebook page for photos.

Plans for our spring educational offering are being finalized. We are looking for nominations for upcoming elections in April for President and Secretary, if any district member is interested please email: nyspana.d14@gmail.com. A summary of responsibilities and duties of each position is available, along with mentorship from previous officers.

Submitted by
Sally Sackett BSN RN CAPA
District 14 President.

#### District 14 Committee Planners for the 20th Annual PANAW Conference



Joanie Morse, Kari Alicea-Santiago, Sandy Price, Sally Sackett, Sue Alati, Cindy Lucieer, Judy Sears & Kathi Peers

#### NYSPANA District Officers\*



#### District 1 Long Island

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Tina Stoebe, MS, RN, CPAN C: 631.835.8917 W: 631.476.2729 ts77838690.1more01@gmail.com

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Doreen Dozier, MHA, RN, CAPA

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MaryAnn Servidio, MSN, RN, CAPA

#### TREASURER

Carol Cramer, MSN, RN-BC, CPAN, CAPA



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PRESIDENT VICE PRESIDENT SECRETARY TREASURER

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Cheryl Barnes, RN

#### TREASURER

Sandy Lowery, RN

**PRESIDENT** Positions VICE PRESIDEN



#### District 13 Syracuse

#### PRESIDENT

Jean Roach, RN jean.roach@sjhsyr.org

VICE PRESIDENT SECRETARY TREASURER



#### District 14 Rochester

#### PRESIDENT

Sally Sackett, BSN, RN, CAPA C: 585. 208.6340 sally.sackett@gmail.com

#### PRESIDENT ELECT

Sally Sackett

#### SECRETARY

Sandra Price, MS, RN, CAPA

#### TREASURER

Kathi Peers, BSN, RN, CAPA

#### NOMINATING CHAIR

Kari Alicea-Santiago, BSN, RN, CAPA



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Any changes/updates in District Officers may be emailed to Bronwyn Ship: www.nyspana@gmail.com

