AVAPL Annual Meeting
Orlando, FL
August 3, 2012
8 am – 9:50 am
Peabody Orlando Hotel
Plaza International Ballroom K

1. The meeting was called to order by Dr. Fischer.
2. Minutes – the minutes of the 2011 Meeting were approved
3. Financial and Membership Report – Dr. Landes

**BALANCE (8/1/2011)** $33,401.31

**Deposits**
- DUES 19952.38
- APA Gift 1000.00

**Expenditures**
- Mid-winter meeting 2012 8245.25
- APA Business Meeting 2011 3187.04
- BEA Trip 2756.00
- Grief and Bereavement 131.23
- Administrative (stamps, mailings, etc.) 378.00
- Refund for 2x payment 70.00

**Profit** 7440.31

**BALANCE (8/1/2012)** $39,586.17

**LEADERSHIP CONFERENCE 2012 (8/1/2011-8/1/2012)**

**BALANCE (8/1/11)** $20639.70

**Deposits**
- Conference Fees 43900.64
- Vendors 1400.00

**Expenditures**
- Westin Expenses, Supplies, (37860.33)
- Student Dinner, Scholarships, Awards

**Profit** 7440.31

**BALANCE (8/1/2012)** $28080.01
MEMBERSHIP – AVAPL (2011-2012)
Total Members          340
Renewals                   230 (67.65%)
New Membership       80  (23.53%)
Students                      30  (8.82%)

4. Results of the 2012 AVAPL Elections – Dr. John Klocek was elected President Elect

5. Dr. Fischer gave a brief report on the 2012 Mid-Winter Meetings – Appreciation given to Dr. Jeff Burk for his assistance. GS 14' and 15' remain an issue though there has been an increase in these numbers with Hybrid 38. Workload and productivity expectations are being developed. Discussion occurred regarding how AVAPL can best partner with VACO in terms to meet the needs of our veterans. The Executive Committee felt expressed concerns were listened to and heard. APA briefed the Executive Committee on its Strategic Plan which included support for psychologist leading interdisciplinary teams, accessing training opportunities, and increase the budget for research. Time was also spent briefing the Executive Committee on the planned visit to the Hill. The Executive Committee met with majority and minority staffers from the House and Senate. Emphasis was placed on the role psychologists play in treatment with EBPs, research and team leadership. The last day was spent meeting with Veteran Service organizations.

6. Dr. Fischer and Dr. Garcia reported on the 2012 VA Psychology Leadership Conference. The 2013 Leadership Conference is tentatively planned for mid-May. There has been positive feedback received regarding the breakout session format. Ideas for topics may be sent directly to Dr. Garcia. Given the current travel restriction policy, special approval may be required and OMHS has offered to assist if this is needed.

7. Dr. Elmore and Dr. Kelly (APA) – Discussed the upcoming September Summit on Military families. This will include collaboration with the private sector. The Joining Forces Initiative will support veterans and their families. Much effort has been placed on funding VA research with a special emphasis on SUD, AIDS and VA/DoD. A VA Research Report was completed six years ago but never released.

8. Awards:
   - Antonette Zeiss Distinguished Leadership Award: Daniel R. Kivlahan, Ph.D.
   - Leadership Award: Amy E. Street, Ph.D.
   - Professional Service Award: Mark Hinterthuer, Ph.D.
   - James Besyner Early Career Award: Samuel S. C. Wan, Ph.D.
   - Special Contribution Award: Lisa A. Brenner, Ph.D., ABPP
   - Past-President: George Shorter, Ph.D.
9. President's Address - Dr. Fischer reported on the progress made in achieving the goals set at the beginning of her term as President:

(1) **Open dialogue about how EBTs are determined and rolled out with the premise that VA psychologists should have input into what treatments they select and use in treating our veterans.** That dialogue happened and questions were asked and discussed during the mid-winter meetings with Dr. Zeiss, Dr. Schohn, and Dr. Karlin and she reported she was satisfied with the answers. Psychologists are not being mandated to offer only prescribed therapies or follow a cook book approach to treatment. The type of therapy used is based on the veteran's needs and preferences in collaboration with the therapist.

(2) **Strengthen AVAPL recruitment efforts of new and early career psychologists and continue to highlight the importance of succession planning in AVAPL to assure that an organized leadership transition occurs with the maximal "transfer of training" to the next cohort of Psychology Leaders.** An Early Career Group was started that now has a listserv, a Facebook page, and a list of interested EC psychologists. A very successful dinner occurred at the VA Psychology Leadership Conference in April in San Antonio and the first guests were Bob and Toni Zeiss.

(3) **Continue and strengthen the VA psychology conference “as it is critical in re-energizing experienced staff and inspiring new VA psychologists.”** This was achieved with much of the credit going to Manny Garcia and the committee.

(4) **Obtaining full medical staff privileges for psychologists continues to be a major issue.** It was discussed on conference calls but not much action was taken. It is an issue that needs continued attention because veterans are best served when psychologists are full members of the medical staff and take their place at the table with other doctoral level independent practitioners.

(5) **Challenges are facing VA Mental Health with the anticipation that there will be budget constraints in the near future many services are now decreasing MH staffing or not backfilling positions.** Priorities will need to be set within mental health services and MH must engage in "strategic partnering" with other parts of the health care system to in order to continue to offer high quality services to veterans. Data will need to show what does work. Questions need to be asked and feedback provided to our VA leadership about what works and doesn't work. This is an ongoing issue.
Dr. Fischer concluded by stating, "The year was short (although sometimes it felt very long) but I am satisfied that the Ex Board, wrestled, discussed, debated, and sometimes argued about how to develop policies and procedures that best serve VA psychologists in serving our veterans. What is has been amazing to me (not that I didn’t know this already) is that VA psychologists, all of whom have more duties and responsibilities than they can possibly handle in whatever capacity they work, still take the time to discuss/debate/make suggestions about issues that affect their ability to provide veterans with the highest quality and most accessible healthcare, and provide students, interns and Fellows excellent training. VA psychologists are a passionate and pretty amazing bunch of people. It has been my honor to serve as AVAPL President this year.

10. Passing the "Mantle" to the New President – Dr. Mary Levenson donned the Leadership sweatshirt and assumed the Presidency of AVAPL.

11. New President's Address – Dr. Levenson thanked the membership for the opportunity to lead the organization. She emphasized the importance of psychologists working together and getting to know their colleagues within their VISN as well as within focused areas. Psychologists have become fragmented often because we do not know each other. AVAPL includes only 50% of psychology leaders across VHA. There are 157 Psychology leads. There are five stations with no identified lead. A list of Psychology program managers both in the field and in VACO is needed. A primary goal in the coming year will be to further define and build the Psychology community. This may include the use of technology to mainstream meetings to those than cannot attend.

12. Open Floor Discussion of AVAPL Strategic Priorities was led by Dr. Fischer and Dr. Levenson. Focus of discussion was on new psychologists now being hired into the system and the importance of mentoring. A list serve is available for early career psychologists but there is little activity to date. Also discussed was the importance of the role of the Psychology Lead if a Chief is not present as this is a requirement in the Handbook.

13. Dr. Levenson adjourned the meeting.

Stephen Cavicchia, Psy.D.
Secretary