

Position Statement – AANA Vice President
Paul W. Santoro CRNA, MS

Once again I am honored to come before the AANA membership, this time, for consideration as your next Vice President. As a member of this distinguished association for over twenty-five years I have had the distinct honor of serving on numerous committees and task forces, as Regional Director during the “Supervision Battles” of 2000-2002 and now as current AANA Treasurer actively involved in the State Organizational Development Committee (SODC) and Commission on Anesthesia Economics and Reimbursement (CAER). Throughout my career, I have brought passion, vision, integrity and an entrepreneurial spirit to the pursuit of high quality, cost efficient anesthesia care and professional advocacy.

Although the specific challenges which we face change over time, there are certain fundamental constructs which I believe transcend time and the detail of any given issue. I have applied these principles toward the development of one of the largest CRNA owned and operated groups in the country and have been honored as an Ernst & Young Entrepreneur of the Year Finalist for the Central Great Lakes Region in 2007.

Continuous Infrastructure Development

It has been my steadfast belief in business and in association management, that our continuous investment in enhanced operational capabilities is critical to long term success. At both the national and state levels, these investments must encompass the human, business process and technologic aspects of CRNA practice and association management.

I applaud the efforts of the ad hoc Committee of Leadership Development for their efforts with state leadership as well as those efforts within the Executive Unit of our Park Ridge office. Through these investments in human capital, our state and national leadership become increasingly effective and derive greater professional satisfaction from their service. I support a redoubling of these efforts.

Although the SODC has made great strides in assisting state associations with certain aspects of their infrastructure through the Organizational Health Allocation, I believe a re-examination of our current approach is warranted. Building upon past success, we now have the opportunity to focus on

improving the operational capabilities of our state associations. By addressing the business processes of our state associations and leveraging technology, much of which we currently have at hand, it is my firm belief we will forestall many state level challenges to CRNA practice and become more effective when Strategic Reserve Fund action becomes necessary.

Fiscal Conservatism

As President of a large rapidly growing, private practice anesthesia group employing both physicians and CRNAs and as the largest single shareholder in an anesthesia billing and consulting company, I am accountable to over one hundred fifty families on a daily basis. This is a responsibility I take extremely seriously. Likewise, as a member of the AANA Board of Directors and current Treasurer I have been entrusted by the members with not only their hard earned money but managing many aspects of their professional future. As a fiscal conservative, I understand the balance between financial oversight, prudent expenditure and internal reinvestment. When to spend and how to spend are skills I have learned well. I have been humbled and honored by your trust this past year and pledge continued diligence in building the financial resources of our national and state associations.

Strategic Relationship Management

I believe, we as CRNAs and the AANA are at a unique period in history, likely unparalleled in both threat and opportunity. Today, the United States spends more on health care than any country on earth, nearly 16% of GDP. Despite this tremendous drain on our economy, almost 50 million of our citizens lack health insurance and by many measures the quality of our healthcare lags behind those who spend much less. The vast majority of our citizens consider our healthcare system “broken”. Most assuredly how we pay for healthcare will change.

Within this dynamic socio-economic-politico environment, it is critical we develop and skillfully manage our organizational relationships as we will accomplish nothing standing alone. Traditionally we have looked to nursing, non-physician healthcare providers and political allies on both sides of the aisle. I believe, we must now expand our vision to include potential, less obvious allies – interest groups representing business, senior citizens, consumer driven healthcare, healthcare quality, insurance and yes, even

physician groups with whom we have significant difference. By emphasizing the right organizational working relationships and embracing organizational differences we can expand the number and nature of our collaborative relationships. We must attempt to see problems as a whole, examining how the parts fit together and how any one decision will affect another. The avoidance of a “zero sum game” mentality, if we win they loose and vice versa, is essential for success in a climate wracked with rapid and unpredictable change.

As an integrative, entrepreneurial thinker with a deep passion for the profession of nurse anesthesia, I have the experience, skill and commitment to ably represent the AANA membership in uncertain times. I now respectfully request the honor of your vote for AANA Vice President.