



Volume 15, Issue 3: Winter 2012

Inside this Issue:

- [From the President: We Are The Change That We Seek](#)
- [Welcome to Our New Editor!](#)
- [Membership Committee Updates](#)
- [New Member Spotlight](#)
- [ISPN Board Member Delivers Keynote Presentation at 5th National DNP Conference](#)
- [ISPN Foundation Announcement](#)
- [ACAPN Division Update](#)
- [AGPN Division Update](#)
- [ISPCLN Division Update](#)
- [SERPN Division Update](#)
- [Netiquette for ISPN Listserve Users](#)
- [ISPN 2013 Annual Conference: San Antonio, TX \(PDF\)](#)

From the President: *We Are The Change That We Seek* Moving toward the Affordable Care Act as an APRN in PMHN

"Change will not come if we wait for some other person, or if we wait for some other time. We are the ones we've been waiting for. We are the change that we seek."

— Barack Obama (43rd and 44th President of the USA: 2008-2016)

I have been inspired by the words of President Barack Obama as well as the policies that he and his administration have sought to develop and implement through the Patient Protection and Affordable Care Act (PPACA, 2010). Access to care is only ONE piece of this policy. Consider this: the United States ranks 37th out of 191 countries in average life expectancy yet the US spend more on health care than any other nation in the world. Many health care scholars have questioned this paradox (Schroeder, 2007) and suggested that the road to better health does not depend upon better health *care*, but in correcting the inequity and lack of access to health care which then creates the disparity that exists across the United States in the 21st century. The social determinants of health are constructed by the distribution of money, power and resources at global, national and local levels (WHO, 2008) and although the US is in the top 10 richest countries in the world (Forbes, 2012), the number of Americans living in poverty—defined as about \$22,000 for a family of four—soared to 46.2 million last year, its highest level on record. The official poverty rate is 15.1 percent. In other words, one out of every six individuals lives in poverty in the US. Even more distressing is that the child poverty rate is 22 percent. According to the US Census Bureau, more than 50 million people were uninsured last year, which is approximately one in six US residents. The PPACA (2010) has notably decreased these numbers through the newly insured young adults, many of whom benefitted from a provision in the PPACA which requires that insurers let parents keep adult children on their plans up to age 26.

With 2014 looming on the horizon: the point whereby insurance companies cannot deny coverage for pre-existing conditions, for your child to be covered or because of your gender, we as APRNs in PMHN are the change that we have been seeking for our patients. We need to stand up and understand the issues, the challenges and needs that our fellow residents and neighbors will have now and in the future. We have the opportunity to continue to practice as a Clinical Nurse Specialist or as a Nurse Practitioner in the mental health specialty. And we need to be informed about this health care law as it unfolds over the next decade. Putting aside politics, I encourage you to be informed, enlightened and compassionate about what this means for all Americans. Below are several links to start the process of understanding what this law means and when it will take effect.

FACT SHEET: <http://www.whitehouse.gov/the-press-office/2012/06/28/fact-sheet-affordable-care-act-secure-health-coverage-middle-class>

FULL ACA DOCUMENT: <http://housedocs.house.gov/energycommerce/ppacacon.pdf>

TIMELINE: <http://www.whitehouse.gov/issues/health-care>

Change will not come if we wait for some other person, or if we wait for some other time. We are the ones we've been waiting for. We are the change that we seek. Seek and you shall find.

Warmest regards,

Victoria Soltis-Jarrett, PhD, PMHCNS/NP-BC

OFFICERS

President

Victoria Soltis-Jarrett, PhD,
PMHCNS-BC, PMHNP-BC
vsoltis@email.unc.edu

President Elect

Evelyn Parrish, PhD, APRN
evelyn.parrish@eku.edu

Secretary/Treasurer

Judith McComish, PhD, RN
jcmcomish@wayne.edu

DIVISION DIRECTORS

ACAPN

Margaret Scharf, DNP, PMH-CNS-BC, FNP-BC
scharfm@ghsu.edu

AGPN

Susan Benson, DNP, FNP, CNS, PMH
sueleebee@yahoo.com

ISPCLN

Susan Krupnick, MSN, APRN-BC, CARN
skrupnick@charter.net

SERPN

Sara Horton-Deutsch, PhD,
PMHCNS, RN
shortond@iupiu.edu

COUNCIL CHAIRS

Education Council

[open position]

Research Council

Laura Hein, PhD, RN, NP-C
hein@sc.edu

Practice Council

[open position]

Legislative Council

[open position]

EDITOR: CONNECTIONS

Angela McNelis, PhD, RN, ANEF
ammcneli@iupiu.edu



ISPN's visionary soul embraces personal and professional growth through the celebration of relationships, relational skills and collective humanity. Let us never neglect our relational rootedness. In facing contemporary harsh demands, let us progress forward, nurturing and leading all with whom we have to do; large and small, individuals, communities and cultures. "Let's bring soul to the whole of society!" Thomas Moore

~ Dr. Kathleen McCoy,
PMHNP/CNS/FNP-BC FAANP

President
 Follow me at: <http://twitter.com/ISPNPrez>
 Facebook: <http://www.facebook.com/ispnpsych>
 Want to ask a question? Make a comment?
<http://www.surveymonkey.com/s/feedbacktoISPNBOD>

[Back to Top of Newsletter](#)

Welcome to Our New Editor!



Dr. Angela McNelis

ISPN volunteers continue to offer time and energy to the association! Dr. Angela McNelis, of Indiana University, has agreed to take on the role of ISPN Connections Newsletter editor.

As the new Editor, Dr. McNelis will help expand the newsletter content in order to make it more relevant to our members. Additionally, Dr. McNelis will help integrate the newsletter with other existing ISPN communication channels including the website, ISPN Listserve, broadcast email and Facebook page.

In order to make this transformation a success, we need your help. Please contact us with relevant content, suggestions for articles and information on upcoming news events. Contact us at info@ispn-psych.org.

We would also like to thank Dr. Beverly Hart for her many years of dedication and effort to the Connections Newsletter. *Thank you Dr. Hart for keeping the fire burning!*

[Back to Top of Newsletter](#)

From the Membership Committee

The Membership Committee Needs Your Help with Recruitment

International Society of Psychiatric - Mental Health Nurses
 2424 American Lane, Madison, WI 53704
 Phone: 608-443-2463 • Toll-free: 1-866-330-7227
 Fax: 608-443-2474 or 2478 • E-mail: info@ispn-psych.org

Top Ten Reasons for Joining ISPN... Now:

1. Students: \$25 student membership rate, scholarship opportunities, publication workshops (we actively encourage grad students to present), resource to DNP/PhD programs.
2. Military: reduced membership rate for active military or reserve.
3. Newsletters, Position Statements, White Papers, Scholarship and Grant Opportunities.
4. Three Peer-reviewed journals:
 - Archives of Psychiatric Nursing
 - Official Journal of the ISPN Division of ISPN www.psychiatricnursing.org
 - Journal of Child and Adolescent Psychiatric Nursing
 - Official Journal of the ACAPN Division of ISPN <http://onlinelibrary.wiley.com/journal/10.1111/j.1524-6033.2014.00491.x>
 - Perspectives in Psychiatric Care (PPC)
 - Official Journal of the ACPC Division of ISPN <http://onlinelibrary.wiley.com/journal/10.1111/j.1524-6033.2014.00491.x>
5. Activity cards to an exciting head annually each spring for 2 important events when membership and quarterly convene at The Annual Psychopharmacology Institute and ISPN Annual Conference.
6. Conferences are smaller, warmer and less rushed than others, enhancing reflection through small nurturing groups, both formal and informal. It also provides a good and solid start for students with deeply discounted student conference and membership fees.
7. ISPN membership is truly diverse with national and international influence and considerable presence, with chances to converse directly with unique thinkers and thought opinion leaders in Psychiatric Mental Health Nursing.
8. Active committee structure encourages membership participation.
9. ISPN needs YOU (Students, Military, International APNs) to enrich our membership.
10. With all the above noted, the best part is relationship! Relationship in the organization thrives all year through the bridges ISPN builds in through membership activities and distance links.

ISPN Recruitment Poster - copies available upon request

The ISPN Membership Committee has produced a Recruitment Poster and is asking the help of our membership in displaying this poster in Schools of Nursing. Upon your request they will mail a hard copy (11 x 14) of the poster. The poster includes a blank space to insert your business card as the local contact and a pad of tear off sheets containing ISPN contact information. Additionally, we will send you copies of ISPN membership brochures to distribute at APN conferences, workshops, classes or meetings you may be attending.



The International Society for Psychiatric Mental Health Nurses has played a vital role in my successful transition from a masters student to an independent psychiatric nurse practitioner. Through membership, I have gained a supportive network of experienced advanced practice psychiatric nurses who have provided me with mentorship and encouragement. ISPN has been an invaluable resource and continuously enrich my clinical practice.

~ Holly Hillburn, MS, RN, PMHNP-BC



It's a tough job being a nurse who engages with brain disordered people. It's made easier with alliances with affirming colleagues around the world who share the same values and are willing to share their expertise and experience of change.

~ Susan Lee Benson, DNP, PMHCNS/FNP-BC



I have found the annual ISPN conferences extremely valuable. The plenary sessions they provide touch upon relevant topics that enhance my role as an educator and clinician. In addition, I have found the organization has helped me experience a sense of camaraderie with my peers. I look forward to continuing the supportive mentoring and networking that ISPN provides.

~ Barbie Frechette, DNP, PMHNP

Please send an email to the Membership Chair, Cynthia Handrup at chandrup@sbcglobal.net to request a poster and brochures. A .pdf of the poster is available for your use in an electronic bulletin board or on your personal web site.

In order to track the effect of the poster on membership growth, please let Cynthia Handrup know if you are using the .pdf on a website, social network site, or electronic bulletin board.

Thanks so much for your help with this.

What Is the International Society of Psychiatric Mental Health Nurses?

The International Society of Psychiatric Mental Health Nurses (ISPN) is a professional organization for individuals involved in the advanced practice of psychiatric-mental health nursing. ISPN members are involved in developing platforms for information sharing among members; strengthening the committee/council structure and providing direction for key initiatives. ISPN provides forums for input on key curricular issues impacting patient care, PMH education and certification, and graduate student programs and healthcare policy.

During the past 15 years, ISPN has become more diverse, broadening the scope of the organization's vision. Service to communities and ensuring patient centered treatment have become essential elements of ISPN's mission and purpose.

What can ISPN do for me?

ISPN offers its members a wide variety of resources and opportunities, including:

Three quarterly publications (included as part of membership) *The Archives of Psychiatric Nursing*, is the official Journal of the SERPN Division of ISPN and focuses on theory, practice and research applications related to all ages, special populations, settings, and interdisciplinary collaborations in both the public and private sectors. *The Journal of Adolescent Psychiatric Nursing*, is the official Journal of the Association of Child and Adolescent Psychiatric Nurses (ACAPN) Division of ISPN. The journal, *Perspectives in Psychiatric Care*, provides advanced practice nurses with current research, clinical application, and knowledge about psychiatric nursing, prescriptive treatment, and education.

The *CONNECTIONS Newsletter* contains announcements and news about current events pertinent to research, legislation and mental health care. The newsletter also provides ISPN members with information about the activities of the ISPN Board and committees.

ISPN Committees have an extensive structure that reflects the interests and activities of membership. Members are involved in a variety of committees that address topics such as the annual meeting, awards, recruiting, and graduate student issues.

ISPN Networking is an important part of the annual meeting, which offers members opportunities to expand their knowledge and skills as well as to share their expertise in a convivial atmosphere. Educational programs on important topics are offered during the annual meeting and provide practical information for application in both work and research settings.

New \$25 Student Membership Rate

This summer, ISPN Board of Directors approved a 2-year trial period of a reduced membership fee for students. The trial period runs from July 1, 2012 through July 1, 2014. To qualify for this reduced rate a student must be enrolled, at least part-time, in a graduate program (DNP, PMHNP, or post-master certificate program) with a specialty in advanced practice psychiatric mental health nursing. The newly created Associate Student Membership category also qualifies for this reduced rate. (An associate student member is an undergraduate student enrolled, at least part-time, in a nursing program and having a strong interest in pursuing a graduate degree in advanced practice psychiatric-mental health nursing).

As before, members applying for this reduced rate will be asked to supply verification of student status (copy of student ID, class schedule, etc.) If a student currently has the special rate and continues to be at student at time of renewal, the special rate will still be in effect. Lastly, any student that did not get the special rate during the trial period will receive a refund for the difference.

Please contact the ISPN office at 608-443-2463 or contact the ISPN Membership Chair chandrup@sbcglobal.net, if you have any questions about student membership.

[Back to Top of Newsletter](#)

New Member Spotlight



Fabienne Williams, APN, PMHCNS-BC, DNP(c)

I am Fabienne Williams. Born and raised in Chicago, Illinois I currently reside in a southern suburb. I am a wife, mother of two and grandmother of five. My favorite down time activity is socializing with my husband and our close friends. I have loved table games since my childhood and delight in card games and scrabble.

I am active in my church, serving with my husband as a Deacon couple and leading a large ministry. I take pleasure in being an active member of Alpha Kappa Alpha Sorority, Incorporated. The oldest Greek letter organization of college educated African American women in the U.S. it actively promotes higher education and service to all mankind. Finally, I am passionate about studying the bible.

I am enrolled at the University of Alabama in the post Masters Doctor of Nursing Practice program. I am proud to report that this semester I was inducted into the Golden Key International Academic Honor society. My graduation is planned for August of 2013. My capstone project, entitled Perceptions of depression in young Adult African American men, will be an integrative review of the literature.

At Chicago State University I have a full time teaching position in the department of nursing. In addition to mental health, I teach nursing fundamentals and psychosocial concepts to baccalaureate nursing students. I love winter break and summers off! One year ago, I joined a multidisciplinary group private psychiatric practice where I am an independent contractor. For approximately 20 hours a week I prescribe, provide psychotherapy, conduct admission psychiatric evaluations and do telephone intake. Working with members of this practice has been especially enjoyable because of the collegiality displayed there.

An R.N. for over 40 years, I began as a diploma graduate nurse. Now I am board certified as an Adult Psychiatric Mental Health Clinical Nurse Specialist and licensed as an APN with prescriptive authority. While some nurses my age may be looking forward to retirement, I am looking forward to beginning a new chapter in my professional and personal life. Earning my doctorate is a stepping-stone to even more exciting opportunities. I have aspirations that include teaching on line, implementing evidenced based research findings on emotional wellness, becoming trained in EMDR and hypnosis, and lastly expanding my private psychiatric practice.

In this time of national and international health, economic, political, and professional turmoil, high quality resources for psychiatric advanced nursing practice are critical. In my opinion ISPN provides these in the form of a comprehensive, well developed and maintained web site; two peer reviewed publications, and an annual conference that facilitates member ability to network across the globe. I am grateful to my preceptor (an ISPN member) for introducing me to the organization. I feel my involvement with ISPN has provided outstanding mentor support and encouragement as I have progressed through my educational program and begun private practice.

[Back to Top of Newsletter](#)

ISPN Board Member Delivers Keynote Presentation at 5th National DNP Conference



Keynote Speaker Margaret Rhoads Scharf, DNP, PMHCNS/NP, FNP with ISPN poster presenters Marian Newton, PhD, PMHNP and Cynthia Handrup, DNP, PMHCNS-BC ISPN was well represented at the 5th National DNP Conference in St. Louis on September 19th-21st. **Margaret Rhoads Scharf**, ACAPN Division Director presented the keynote address, *DNPs Changing Nursing Education* to over 300 attendees. She presented a stimulating address, highlighting the history of nursing education, delineating future goals, and stressing the importance of DNPs. **Marian Newton** and **Cynthia Handrup** presented the poster *Findings of the ISPN DNP Task Force*. ISPN member, **Bridgette Vest**, DNPc,

GNP, co-presented a podium presentation on *Substance Abuse Cessation for Veterans*. Along with other ISPN members attending the conference, **Pamela Lusk**, DNP, PMHNP, and **Fabienne Williams**, DNP, PMHCNS, we hosted an informal cocktail reception for the Psychiatric Specialization DNP Group.

[Back to Top of Newsletter](#)

ISPN Foundation Announces...

The ISPN Foundation offers two scholarships and two research awards in 2013. The ISPN Foundation has two \$750 scholarships available to defray conference registration and travel; one scholarship will be awarded to a student and the second scholarship will be awarded to an ISPN member. Scholarship applications are due **January 20, 2013**. Please go to the ISPN webpage for more details – <http://www.ispn.org> - and click on ISPN Foundation.

The 2013 ISPN Psychiatric Nursing Research Award (\$1,500) and the Mental Health and Wellness Research Scholarship (\$1,000) proposals are **due on January 20, 2013**. The *2013 ISPN Psychiatric Nursing Research Award* proposal may be either qualitative or quantitative research design and must meet the following criteria:

- Investigators must be a member of ISPN **and**
- Must have a Masters or a Doctorate in nursing **or** be a student in a nursing graduate program

The *Mental Health and Wellness Research Scholarship* supports the development of nursing research capacity for a graduate nursing student or junior faculty member who will address research concerns related to mental health promotion and prevention, mental health policy development, community outreach, equity and social justice in nursing or health care for ethnic minority populations.

For both research proposals, please go to the ISPN website for more details - <http://www.ispn-psych.org> – and click on ISPN Foundation.

And another way to support the Foundation – Just in time for the Holidays!!

If you have not tried i-Give, please consider giving it a try. I-Give operates both a search engine and a shopping site which raises money for the ISPN Foundation. It is easy to participate and doesn't cost the user anything! The money we receive goes into our general account and we can use it in various ways. The more people who search and shop using i-Give, the greater our receipts.

Here is the web address: www.iGive.com/ISP-MHNF **Register today and support your ISPN Foundation!**

Download the toolbar to make browsing and shopping easy. You still have the option of using Google, or your other search engine, but for lots of searches, iGive works fine. Every time you run a qualifying search, you are making a contribution to the ISPN Foundation.

I-Give has over 700 companies participating including Amazon, Best Buy, QVC, Pottery Barn, eBay, Staples, Petco, Expedia and many more! The amount of your purchase donated to ISPN varies with the company, but every little bit helps support ISPN.

Especially as we start thinking about our holiday shopping and more of us are doing that shopping online, please use i-Give and support the ISPN Foundation at the same time!

[Back to Top of Newsletter](#)

ACAPN Division Update

As I peruse my daily, weekly and monthly newspapers and magazines, issues regarding children and families are never absent. Over the last 6 months I have kept a folder of articles, advertisements and editorials in the media about children and adolescents. The list of topics reads like those we address daily in mental health practice: suicide, bullying/cyberbullying, obesity, violence and abuse including human trafficking, prescription drug abuse, and the explosion in diagnoses of ADHD and autism.

In an effort to identify where the ACAPN Division can make a difference, a survey is being emailed to members of the division to identify where we want to place our efforts over the next 2 years. The need to have a dynamic presence in the mental health of families is as important as ever today. We need to have PMHNPs who, as competent lifespan providers, are ready and able to treat all ages. This is especially important in rural and underserved areas. Additionally, given our history of specialized child, adolescent and family care, we need to determine how we will continue to encourage specialized expertise for this population. The survey is designed to find out how we can best do that. As PMHNP's adjust to the changes in education and regulation, we do not want to lose our presence in the workforce as expert providers of care.

I encourage every one of you to complete and return the survey when it arrives. Your responses are vitally important to driving the future of mental health care for children and families and making sure that we are at the table when policy and practice decisions are made. Let's make our presence known!

Margaret R. Scharf, DNP, PMHCNS-BC
ACAPN Division Director
Oregon Health & Science University
scharfm@ohsu.edu

[Back to Top of Newsletter](#)

AGPN Division Update

Dear ISPN Adult and Geriatric Psychiatric Nurse Colleagues,

Your ISPN newsletter comes out three times during the year. The first newsletter came out right after the conference when we had just had that wonderful experience together. This issue is at that midpoint between conferences. The last issue will come out right before the 2013 convention and will excite us to look forward to another shared learning experience. Perhaps you have a memory of our last ISPN conference with a recollection of speakers and colleagues that had value for you and your practice. Have you remembered the serotonin transporter with the short and long allele variations? Do you have a new understanding of eating disorders? Are you more comfortable doing pain management? Were you fortunate enough to get in on the presentation for evidence based communication skills for health behavior changes? No doubt, you had the professional pleasure of meeting new colleagues and you said you'd stay in touch.

Perhaps you're already thinking about the next ISPN conference and have marked the date in your paper calendar or on your phone. Have you googled images of San Antonio to find out about the city? Are you planning on riding a boat on the Riverwalk? Have you checked in with ISPN colleagues to talk about what you might want to do together? Are you hoping one of the speakers will talk about a certain topic you need to know more about? The ISPN conference planning committee would like hearing from you so the 2013 ISPN conference agenda can be just as interesting and intimate as our last convention.

Now we are at the midpoint between these professional conferences. We liked the week of the ISPN convention, but it's in the rear view mirror of our everyday life. Have you kept in contact with those new colleagues you met at the conference? How are you keeping in touch? If they are from your area, have you met for coffee or have your paths crossed professionally? Have you kept in touch via Email? Facebook? LinkedIn? Are they in your directory on your phone? What's new with them? We've returned home to our practices. At the past convention, we remember hearing about what someone else was doing and it sounded like something we'd like to do. Perhaps you've dug through your convention materials looking for certain information from a certain speaker. Or you found yourself looking through the convention notes and handouts as you've moved them to another storage spot. Or if you've summarized the convention continuing education credits for certification or re-certification, you've recalled many great ideas. What ideas, as a result of the conference, have you considered? Have you arrived at a planning stage? What are you implementing? How will you know if it works? Have you wished you could have that person who sparked the idea on speed dial? Better yet, if only they could be your very own consultant for such a change? They could be a work coach or better yet, they'd be a great life coach. Right?

What has changed in your practice? Are you seeing more patients every day given the increasing population? To my eyes, my patients, young and old, have been greatly impacted by the economic effects of this recession. Since mental illness most often follows the poverty line, their limited resources have certainly dwindled. Where do uninsured patients, in your community, go for help with starting or restarting their medications? Where is low or no cost counseling? What community resources do you have or don't have? Is this a concern for the patients you see? We read and hear about changes coming in health care. How will election results impact the direction of changes? Of course, you wonder what that means for you and your patients. Don't you wish you had a news analyst that was a psychiatric nurse so that upcoming change was more comprehensible? Or better yet, we need many more psychiatric nurse lobbyists advocating for our profession and our patients, since we have to keep working. What would you tell them to say and how should they frame it?

As you are well aware, there is a shortage of mental health providers. Everywhere, there doesn't seem to be enough mental health providers for kids, adults, or our elderly. Have you wondered what other clinicians or health systems are doing? Have you wondered what other states are doing to care for those that are mentally ill? If you're an urban psychiatric nurse, what are stresses and resources? If you're a more rural psychiatric nurse, what are your stresses and resources? What does that all mean for the recovery model for patients with chronic mental illness in your community? How do you provide emergency and chronic care for your patients? Do you have nurse colleagues or are you a lone practitioner? Are you feeling alone? Who can you ask for help?

Are you a new psychiatric nurse or a new prescriber? How can you get a mentor as you practice becoming a more experienced adult or geriatric prescriber or practitioner? Even if you are an experienced provider, you may have a patient that doesn't fit the protocol, the policy, the standard of care or a Cochrane meta analysis. You wonder what other colleagues have done in this exact same situation. Or you've chosen to take action, but you ask yourself who could you debrief with?

But now we are at the midpoint between these professional conferences. How are we going to stay connected between the conferences and be ISPN colleagues to one another? How can we stay in touch with one another and give each other the support and friendship we felt during convention time? How can we create a more immediate availability and presence to one another?

For those of us in the Adult and Geriatric Division, let's ask ourselves and each other these questions:

1. Do I want continuing access to colleagues between the times of ISPN conventions?
2. Do I want to continue with just the three newsletters between convention dates?
3. For those who favor an ongoing connection with your colleagues, how would you suggest we connect? Would you use an interactive website? An electronic bulletin board? A Facebook page? A LinkedIn page? Shall we Tweet? Take a look at the social networking site of Ning? Yammer is

another work social networking site that various enterprises use. What do you think?

4. Can I give some time to help build an Adult and Geriatric Division website?
5. Can I give some time to build the Adult and Geriatric Division by taking on some small, but important, responsibilities and roles?

Please email me with your thoughts, needs and desired outcomes for our Adult and Geriatric Division. My email is sueleebee@me.com. My personal cell is 303-990-1930.

As ever, Susan Benson

[Back to Top of Newsletter](#)

ISPCLN Division Update

Hello ISPCLN Division Colleagues;

I hope that you all are enjoying the fall with the vibrant colors and crispness in the air, as we all know that the cold and blustery winds of winter are just around the corner. Hopefully, you will take some time to begin your planning process to attend the 2013 ISPN Conference to celebrate an organizational milestone of our 15th Anniversary!

The 15th Annual ISPN conference and 6th Annual ISPN Psychopharmacology Institute (April 16-20, 2013) in San Antonio, Texas

Don't be left out in the cold! Start planning to attend 15th Annual ISPN conference and 6th Annual ISPN Psychopharmacology Institute. The annual conference will again be preceded by the annual ISPN Psychopharmacology Institute. The conference will be held in San Antonio, Texas and will provide invigorating learning opportunities, along with a celebration of ISPN's 15th Anniversary. Both the Psychopharmacology Institute and Annual Conference planning committees have been diligently working on reviewing the abstracts and developing a diverse program schedule. This year we are planning a celebration dinner to usher in the 15th Anniversary of ISPN, which will be held on Wednesday evening after the conclusion of the Psychopharmacology Institute. Make sure you put that in your plan for the conference, as it would not be the same without you being present to help us all celebrate the accomplishments, achievements and progress of our organization.

Celebrating the 50th Anniversary of PCLN Practice at the ISPN 2013 Conference

I am excited to announce that at the 2013 annual ISPN conference the ISPCLN division will be organizing a panel presentation to Celebrate Our Past, Current Practice and Challenges, Create Our Future. The panel presenters will be discussing the foundation, growth and development of PCLN practice, global expansion along with current practices with associated challenges. Additionally, presenters will illuminate some future directions for the role by discussing their innovative positions. A luncheon will be sponsored by the ISPCLN Division to further celebrate our 50 years of practice with our ISPN conference attendees. I certainly encourage you all to attend the conference this year to celebrate your commitment to the PCLN role.

Additionally, I am asking for each PCLN's assistance. I am working on organizing a compendium of articles, starting in the 1960's to present, authored by PCLN's about practice, education, research associated with the PCLN role. I have worked with a graduate student in the past and have many articles already from the 1960; 1970's and early 1980's. So, please send to me via my email any article, chapter in a book, a book that you have authored about the PCLN role to be included in this compendium that will be available at the 2013 conference. Again, this is an opportunity to showcase your work and also to assist our new PCLN colleagues, as often I receive questions about specific areas of PCLN practice and it would be wonderful to have an organized resource to immediately consult. So, please assist me in this project.

ANA Scope and Standards of Psychiatric-Mental Health Nursing Revision Work Continues

Presently, the work continues on the revision of the ANA Scope/Standards of Psychiatric-Mental Health Nursing. The section describing psychiatric consultation liaison nursing has been worked on by Peggy Plunkett, representing ISPN (PCLN from Dartmouth Hitchcock Medical Center); Christine Tebaldi representing APNA (PCNS from McLean) and me (PCLN at St. Elizabeth's Medical Center in Boston, MA). The entire section has been expanded with historical foundations of the PCLN role up to current day practice. Additionally, Christine Tebaldi and I worked on expanding and updating the section on Disaster Mental Health and Emergency Psychiatric Nursing. These two sections did not fully describe the role of the psychiatric mental health nurse in these practice settings. Therefore, they now will address both the practices of the generalist and advanced practice nurse in emergency psychiatry and also disaster mental health environments. All the other contributors from both APNA and ISPN have been diligently working on rewriting current sections and also have added in several new sections that more fully describe current and future psychiatric mental health nursing practices and roles. The next phase of work will encompass the revision of the actual standards section. So stay tuned for upcoming updates that Victoria Soltis- Jarrett will place on the ISPN website.

ENA: Behavioral Health Emergency Care Stakeholders Meeting

The work of this stakeholders meeting continues and both Karen and I will be participating on a conference call in December to discuss the next steps that have been identified. Additionally, on that call we will have a presentation by the ENA nurses who have worked diligently on a comprehensive literature review of several

issues related to patients with psychiatric presentations or illness(es) being evaluated in the emergency department. Again, the work continues and Karen and I will keep you updated after the December conference call.

Remember: Send along information about literature you have authored:

Please send along information to me directly at Skрупnick@charter.net. I can also be reached at 1-508-248-7108 or my cell phone at 1-508-826-6208 if you have any questions. I hope you have a wonderful fall and I look forward to seeing you in San Antonio!

Warmly,
Susan Krupnick MSN, PMHCNS-BC, ANP-BC, C-PREP
 ISPCLN Division Director

[Back to Top of Newsletter](#)

SERP Division Update

Society of Education and Research in Psychiatric Mental Health Nursing (SERPN)

The heat kicked on for the first time last night and I am reminded that winter is right around the corner. I am also reminded it is time for the winter update from SERPN for the Connections Newsletter. Ahh, to be in harmony with nature where weather changes can dictate work over technology... I am on sabbatical this semester and desperately wanting to hold on to this less complicated life. Ok, for the news. While last year we took on many new projects this year we are bringing much of that work to fruition. For example, from last year the LACE consensus work for APRN's in PMH is now focusing on implementation; the DNP Task Force report is complete and the work is being disseminated, the special issue of Archives of Psychiatric Nursing focusing on quality and safety for nursing education was published in the October 2012 issue; and revision of the National Scope and Standards for Psychiatric Mental Health Nursing is nearing completion. Below I will provide a brief explanation of the evolution of each of these projects.

Since completion of the LACE recommendations in relationship to advanced practice nursing psychiatric nursing many schools are beginning to work on transitions of their programs to PMH NP (lifespan). There will be numerous presentations and discussions on how schools are implementing these changes at the annual conference in April 2013 so please join us. In the meantime, Wendy Umberger, is representing ISPN on the APRN LACE Network monthly meetings to ensure our best interests are kept in place. Many of the discussions have to do with other specialties such as geriatrics or primary care but it is essential that we stay connected with this group and their discussions because at times they may have implications for our practice. In addition to Wendy's valued presence, in an effort to be transparent, the LACE Network will now post a summary of monthly meetings on the public side of the LACE site. The public site can be reached at: <http://login.icohere.com/public/topics.cfm?cseq=935>

The ISPN DNP Task force, chaired by Bobbie Posmontier, PhD, CNM, PMHNP-BC, completed their report in spring 2012. Since that time the report has been presented at a number of national and international meetings. The task force is currently working on a manuscript to be published in Archives of Psychiatric Nursing in 2013. Again, I would like to acknowledge the tremendous vision and work of task force members who include: Dorit Breiter, Catherine Kane, Cynthia Handrup, Jeanne Cartier, Judith Fry McComish, Marian Newton, Noreen Esposito, Susan McCrone, and Tari Dilks. The Archives publication will articulate the present role and articulate the future of the DNP for advanced practice psychiatric mental health nurses.

A special issue of Archives of Psychiatric Nursing dedicated to Quality and Safety Education for Nurses (QSEN) as it relates to mental health was published in October 2012. The contributors to this issue address the challenges of preparing future nurses who will have the knowledge, skills and attitudes (KSAs) necessary to continuously improve the quality and safety of the healthcare systems within which they work. The articles raise awareness and provide direction for curricular revision in how to embed QSEN competencies in psychiatric nursing education. They also introduce how reflective practices together with QSEN competencies provide a roadmap for nurses and students to discover their professional and individual commitment to quality and safety in their practice.

Finally, the Task Force to review and revise the National Scope and Standards for Psychiatric Mental Health Nursing is in the final stages of their work. By the end October 2012 the final draft will be disseminated to members for review and publication is planned for early 2013. As a reminder, this task force is represented by members of APNA and ISPN. Catherine Kane is the ISPN representative co-chairing this group and others include: Kathy Delaney, Susan Krupnick, Victoria Soltis-Jarrett, Edilma Yearwood and myself.

I genuinely appreciate the active contributions to the work of SERPN. For those who would like to get more involved with education and research initiatives related to psychiatric-mental health nursing please let me know. As always if I have missed something please let me know and I will be sure and include in the next news letter.

With gratitude, Sara

Sara Horton-Deutsch, PhD, PMHCNS, RN, SERPN Division Chair

[Back to Top of Newsletter](#)

Netiquette for ISPN Listserve Users

Here are some simple guidelines when using a listserv to ensure a more enjoyable online experience:

Ten Tips for Using a Listserv

1. When responding to a listserv, keep your messages brief.
2. Respond directly to the sender, rather than to the entire list. After receiving multiple responses, consider compiling a short message to post to the entire list. Include a portion or a summary of the message you are responding to, so others are clear.
3. Stick to the topics intended for discussion on the listserv. All communication should be focused on sharing knowledge, and seeking information.
4. Avoid all upper case when writing. This is thought of as shouting.
5. Be cautious when using humor in your messages.
6. Avoid sending meaningless messages with no content, such as "I agree!"
7. Instead, respond with personal notes directly to the person.
8. Identify yourself. This could be your first and last name, email and your institution.
9. Avoid sharing your grudges or dirty laundry. If you have a conflict with an individual, settle it by private e-mail messages (or better yet, in person).
10. Be positive about people's queries posted to the listserv. Many people are new to the listserv process. Send them a private message and "gently" make suggestions if you think it is warranted.

Remember, we're here to learn, share, and grow from each other.

Enjoy!
Plumer Lovelace
ISPN Executive Director

[Back to Top of Newsletter](#)

ISPN 2013 Annual Conference: San Antonio, TX

Please [click here](#) for more Conference information - see you there!

[Back to Top of Newsletter](#)

International Society of Psychiatric-Mental Health Nurses
2424 American Ln | Madison, WI 53704
Email: info@ispn-psych.org | Phone: 608.443.2463 | Web: www.ispn-psych.org

This email was sent to [% member:email %]. To ensure that you continue receiving our emails, please add us to your address book or safe list.

[manage](#) your preferences | [opt out](#) using TrueRemove®.

Got this as a forward? [Sign up](#) to receive our future emails.