Greetings to all ISPN members:

I hope this communication finds you all facing the New Year with good health and optimism. There is much happening with ISPN, and this column is one way of communicating those events. In the past six months you have seen an increase in email communication around particular issues that require more immediate attention. Emails will continue to serve as a means of getting legislative updates and other urgent matters to the membership.

Email information was sent on the following topics:
- American Association of Colleges of Nursing’s request for input into the essentials of baccalaureate nursing education information draft document
- Call for assistance on website revision
- Call for representation on ANCC Content Expert Panel
- Call for feedback on the NIMH Strategic Plan

We continue to plan for the annual conference in April in Louisville, Kentucky. The event this year is marked by a psychopharmacology pre-conference designed for advanced practice nurses treating all ages. This promises to be an exciting addition to the regular ISPN conference filled with clinical, educational, and research presentations. Like last year, the conference committee received a record number of abstracts. Please try and attend!

The following summarizes the issues/activities that the Board of Directors has dealt with over the past several months:

- G. Pearson sent a letter to military leaders questioning the use of advanced practice nurses in providing psychiatric care to servicemen/women and veterans. ISPN believes that PMH nurses SHOULD be actively involved in caring for soldiers and that this should be acknowledged in publications where nurses are often omitted. I know, from my many contacts with ISPN members in the military, that this is simply not true. Psychiatric nurses are actively involved in caring for soldiers and veterans. These letters were prompted by a USA Today article that omitted nurses as providers for this population. No response was received to either of the letters sent.

(ISPN FOUNDATION NEWS)

In this issue, we are delighted to showcase three new members appointed to the Foundation Board of Directors at the 2007 Foundation Annual Meeting in Montreal, Quebec, Canada.

Carolyn J. Castelli, APRN, BC is currently Nurse Retention Specialist at New York-Presbyterian Hospital in White Plains, New York, and is a member of the AGPN Division. As the Nurse Retention Specialist, Carolyn facilitates professional growth and development programs for nurses to encourage retention in the nursing profession generally and specifically at the behavioral health facility. Carolyn brings an international focus to the Board having resided in both Viet-Nam and Israel. Irva Faber-Bermudez, APRN, BC is currently President and CEO of Detroit Central City Community Mental Health, Inc. in Detroit, Michigan and is a member of both AGPN and ISPCLN Divisions. Irva’s expertise is in financial and administrative business practices that support both the role of the Advanced Practice Nurse and collaborative partnerships with large corporate...
From the President (continued from page 1)

- John Cutcliffe resigned as the SERPN Division Chair, and Jane Neese graciously agreed to fulfill his term. Welcome Jane!
- Kathy Delaney represented ISPN at the National Association of Clinical Nurse Specialists as they worked on CNS and DNP competencies.
- The APNA/ISPN Child and Adolescent Task Force completed its work around role functioning and this will be presented at the ISPN conference in April.
- The ACAPN/SERPN Divisions and the ISPN Education Committee have begun to set up the structure for a committee that will consider the essential content for a Family PMH-NP curriculum. Work is ongoing.
- The Membership Committee has devised a strategy for identifying lapsed memberships and identifying how to reach out to these individuals.
- The Website Adhoc committee has started to meet by conference telephone calls with the goal of revising the ISPN website and making it more current.
- An ISPN Archivist has volunteered her services and has been approved by the Board. She is Rebecca Harmon and has agreed to collect and collate the extensive historical information about ISPN.

- G. Pearson and S. Krupnick attended a meeting at the American Academy of Child/Adolescent Psychiatry in Boston to discuss potential collaborations. ISPN was invited to submit and present a workshop at the 2008 AACAP meetings in Chicago around child/adolescent psychiatric roles as they integrate in care provision with child psychiatrists.
- Tari Dils was chosen as ISPN’s representative to ANCC on the Content Expert Panel. She is actively involved with this, along with APNA members.
- ISPN has been invited to a January 2008 meeting with APNA and ANCC. G. Pearson and K. Delaney are planning to attend this and to meet with APNA Board after this meeting.

As evidenced by the list of activities noted above, ISPN has gotten “back on track” with organizational leadership and functioning. This is due to the enormous commitment of time and resources from the Board and the ISPN membership. I am always very grateful for this, and I thank you all for your support.

In the next six months, the Board would like to begin strategic planning around the goals for next year. Obviously, we are a volunteer organization with a strong member base of nurses committed to advanced practice PMH nursing. As always, I welcome your input, your ideas, and your participation in the organization. Have a wonderful new year, and please, please try to attend our exciting annual conference in Louisville in April.

- Geri Pearson, President pearsong@psychiatry.uchc.edu

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Editor’s Note

This newsletter is produced three times a year. The next three deadlines for article submission are as follows:

Winter: February 22, 2008
Summer: May 30, 2008
Fall: September 26, 2008

In each issue we ask for updates from various Divisions, Councils, Committees, and Work groups. We are interested in member professional activities, news, and achievements. Please contact your division leaders with ideas for articles.

Submit your articles to Bruce Wheeler
Email: bwheeler@reesgroupinc.com
The American Academy of Nursing inducted 54 nurse leaders as Fellows during the Academy’s 34th Annual Meeting & Conference. Included in that group are two members of ISPN:

Margaret Hortenstine Brackley, PhD, APRN, BC
University of Texas

Edilma L. Yearwood, PhD, APRN, BC
Georgetown University

The American Academy of Nursing’s approximately 1,500 Fellows are nursing leaders in education, management, practice, and research. Invitation to Fellowship is more than a recognition of one’s accomplishments within the nursing profession. AAN Fellows also have a responsibility to contribute their time and energies to the Academy and to engage with other health care leaders outside the Academy in transforming America’s health care system by:

- Enhancing the quality of health and nursing care;
- Promoting healthy aging and human development across the life continuum;
- Reducing health disparities and inequalities;
- Shaping healthy behaviors and environments;
- Integrating mental and physical health care; and
- Strengthening the nursing and health care delivery system, nationally, and internationally.

Congratulations to Dr. Brackley and Dr. Yearwood!

Foundation News (continued from page 1)

entities. Kathleen Scharer, PhD, APRN, BC, FAAN is Associate Professor and Interim Associate Dean for Research at the University of South Carolina College of Nursing in Columbia, South Carolina and a member of ACAPN and SERPN Divisions. A longtime and active member of ISPN and ACAPN, Kathy brings both organizational memory and practice as the past ISPN Research Council Chair. Please join me in welcoming these new Board members!

One goal of the Board of Directors this year is to establish partnerships with external organizations in order to market the mission and thus enhance the visibility of ISPN. Conversations have been initiated with different groups. A collegial relationship with Takeda Pharmaceuticals has been established and grant opportunities are available for sleep science research and educational programming. The company has Regional Scientific Managers (RSM) who can facilitate the educational programming. For example, Michael Sonnleitner, PhD, is the RSM for WI, MN, SD, and ND. ISPN members who live in those states and are interested in educational or grant opportunities as they pertain to sleep science can contact ISPN for contact information.

The Foundation Board of Directors (BoD) is delighted that the 10th Annual Conference will be in Louisville, Kentucky in April 2008. The BoD is in the process of planning the Annual Fundraiser Event(s). We also plan an Annual Meeting that ISPN members are invited to attend. As always, your continued support of the Foundation supports the mission of ISPN:

- Ensure the provision of safe, appropriate, quality care to individuals and families with mental health problems
- Advocate for a legislative agenda that shapes health care policy favorably related to mental health issues
- Foster and enhance research and scholarship in psychiatric-mental health nursing to grow the evidence base for practice
- Promote relevant educational preparation for the practice of psychiatric mental health nursing
- Develop partnerships that strengthen the delivery of mental health care around the globe

Please give generously to the Foundation!

Donations can be sent to:

ISPN FOUNDATION
Attention: Bruce Wheeler
2810 Crossroads Drive, Suite 3800
Madison, WI 53718-7961 USA

Submitted by:
Elizabeth Bonham, Foundation President
beth_bonham@bellsouth.net

See you in Louisville!
At our 9th Annual ISPN conference in Montreal, there was overwhelming support to have the Diversity Task Force become a standing committee and to change the name to better reflect a variety of significant issues impacting mental health of individuals, groups, and families across the lifespan. The new name is the Diversity & Equity Committee, and we welcome anyone who would like to join us as we move forward with our work. We are particularly interested in hearing from you about issues that you feel the Committee should tackle over the next few years. We will set aside some time at the Annual Conference in Louisville to meet and discuss the next steps. Just a reminder that the Diversity Task Force published a paper titled “Creating an Organizational Diversity Vision: Goals, Outcomes, and Future Directions of the International Society of Psychiatric Nurses” in the June 2006 issue of Archives of Psychiatric Nursing. This document and the “Diversity, Cultural Competence, and Access to Mental Health Care” Position Statement found on the ISPN website can serve as resources for our discussion.

As a member of ISPN, I had the opportunity to participate in a two week online forum (September 11-25, 2007) on Nurses for Mental Health: How can we overcome the challenges and build on successes to provide effective mental health care in resource poor settings? This Community of Practice forum was sponsored by the World Health Organization (WHO) and the International Council of Nurses (ICN) with over 600 participants from over 75 countries participating. Questions, responses, reading materials, and practitioner responses to complex mental health needs in poorly resourced international communities were shared. Several other ISPN members participated in the forum, giving our organization visibility on the global stage. Not surprisingly, stigma, lack of appropriate mental health care programs, lack of adequately trained nurses, and an inadequate volume of human resources were identified as impediments to meeting the mental health needs that exist in the global community. To learn more about global mental health, please go to www.thelancet.com and click on the web focus bar and then the global mental health link. Approximately seven articles were published in the September 2007 online issue and contain some of the concerns that were reiterated during the on-line discussion. As both a national and international organization, we must remain aware and responsive to the experiences and needs of all our members and the individuals/communities with whom they work, both here and abroad.

- Edilma L. Yearwood, Diversity & Equity Committee Chair
eyly2@georgetown.edu
ACAPN Division Update

In the current health care environment, child psychiatric nurses face several challenges. This past Autumn ACAPN/ISPN has attempted to cultivate vehicles so we might have a voice in crafting solutions to the issues we face. Let me start with two promising endeavors. One challenge is shaping a child/adolescent (C/A) Advance Practice Nurse (APN) workforce that is capable of addressing the needs of our young patients. One essential step in planning for the educational preparation of this workforce was examining the current type and numbers of APNs who are treating youth with serious emotional illness. This was accomplished by the APNA/ISPN C/A national survey. The results of that survey were presented at APNA in Autumn; myself, Sandra Weiss, and Edilma Yearwood were ACAPN members who helped prepare the presentation. These data will also be presented at the ISPN conference and be in publication hopefully sometime in the next year. A second challenge is caring for ever diverse populations of children on inpatient psychiatric units. A nurse recently emailed me about the issue of treating children with autistic spectrum disorder. She estimated that this population was now 17% of admissions. New federal regulations on restraint and seclusion supply essential clarifications, yet they also present dilemmas, particularly how physical holds are classified. On the unit where I practice, we now have a category of brief physical hold, often less than thirty seconds, which must be treated as any physical restraint. This year I have attempted to write two separate columns about how child nurses keep units safe and about the issues they face, one with Kathleen Regan and one with Lyons Hardy. One of the columns will be published in the newsletter of the American Academy of Child and Adolescent Psychiatry, the other in the Journal of Psychosocial Nursing. I hope that we might continue to forge alliances with the Academy and thus have a stronger voice in addressing these issues. Please email me with any concerns, input or advice on these or any other practice issues.

- Kathy Delaney, ACAPN Division Chair

AGPN and ISPCLN Division Update

Because AGPN Division Director Melinda Morissette and ISPCLN Division Director Susan Krupnick have been planning the 1st Annual ISPN Psychopharmacology Institute to be held April 8 and 9 in Louisville, Kentucky, there will be no divisional reports in this issue of Connections.

SERPN Division Update

Hello and welcome SERPN Division Members! I am honored to be appointed as your new Division Chair and look forward to serving you. I clearly recall my first SERPN meeting as a doctoral student in 1992. As a new member, I was warmly greeted and welcomed into the SERPN Division, and as we do, soon appointed to a committee. With research and education in psychiatric-mental health nursing, I found another area to explore from my clinical roots in psychiatric consultation liaison nursing. Even though I am a little late in getting started, Vicki Hines-Martin and the ISPN Board quickly have updated me. Along with several SERPN members, I serve on the Editorial Board of Archives of Psychiatric Nursing and hope to get the SERPN News regularly printed in the journal. I want to thank those SERPN members who routinely review manuscripts for Archives; without your generous donation of time and effort, our journal would not have the caliber of articles it has today. From our last Division meeting, Catherine Kane and Margaret Brackley have been co-chairing the AANPMH/Behavioral health Competencies for non-PMH/Behavioral Health RNs and APRNs Task Force. By the time you read this newsletter, you should have received their report via an “E-Blast” from ISPN in November. From their report, a draft will be forwarded to the public for review at the beginning of next year.

There are three business issues on which I need SERPN membership input: 1. Someone to volunteer to be the SERPN Division Secretary who would be responsible for taking minutes at our next SERPN Division meeting at the ISPN conference; 2. New SERPN initiatives that you believe that the division needs to address in the next two years; and 3. News and professional accomplishments from you, our division members. For those of you who wish for more SERPN or ISPN involvement, please let Bruce Wheeler, Geri Pearson, or me know. We would be delighted to find an area in the organization for you.

Over time, fellow SERPN members have mentored and assisted me in my career. I challenge us to do the same with new members who join us – embrace them, mentor them, and befriend them. I look forward to seeing all of you at ISPN in Louisville, Kentucky in April!

- Jane B. Neese, SERPN Division Chair
2008 ISPN Call for Nominations

ISPN is seeking nominations for the Board positions of President-Elect, AGPN Division Chair and ISPCLN Division Chair, as well as two positions on the Nominations Committee: AGPN representative and ISPCLN representative.

Please consider nominating a colleague, or running for office yourself. We need people truly dedicated to furthering advanced psychiatric-mental health nursing, who are willing to work with other dedicated individuals to impact our specialty as a whole.

If you would like to nominate a fellow ISPN member for one of the open positions, please go to www.ispn-psych.org and download the nomination forms that you will find on the opening page. Please contact staff at +1-608-443-2463, ext. 143 if you have any questions. The deadline for submitting nominations is January 15, 2008.

Duties of Office

The President-elect shall:
- Succeed into the Presidency at the end of the term of office;
- Assist the President in communicating to the public the purpose and functions of the ISPN;
- Fulfill the duties of President in his/her absence; and
- Assist the President as needed.

The Division Directors (AGPN and ISPCLN) shall:
- Serve as the Team Leader and official spokesperson for the Division;
- Represent the Division on the ISPN Governing Board;
- Provide regular financial reports to the Governing Board;
- Appoint Division task forces/committees as needed to conduct the business of the Division;
- Communicate with Division members and Governing Board concerning Division issues/concerns/activities;
- Collaborate with other Division Directors, ISPN Officers, and Council Chairpersons to work on issues of mutual concern; and
- Be accountable for operating within the Division budget.

The Nominations Committee shall:
- Coordinate all elections;
- Develop ballots for all elections, seeking balanced representation from the Divisions in nominations for ISPN officers;
- Obtain consents to serve; and
- Provide biographical information on each candidate to the voters.
Governing Board and Leadership Team

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