Dear ISPN Members:

I want to begin this column by thanking all the planners and participants of our very successful Annual Conference in Louisville, Kentucky in April. This conference marked our first Psychopharmacology Institute, which was offered as a pre-conference to our regular annual offering. The evaluations from attendees were extremely positive for the entire event. On the basis of this response and expressed need, we will continue to offer the Psychopharmacology Institute next year. Again, many thanks to all who participated.

The 2009 combined Psychopharmacology Institute and Annual Conference will be held in Greenville, South Carolina from March 31 to April 4 at the Hyatt Regency. The Call for Papers submission process will open on the ISPN website in late July, and Papers are due on August 25. We will also send an e-blast when this is available for downloading. All members are encouraged to submit abstracts and posters for presentation.

As always, when we have our yearly chance to meet face-to-face, the time is filled with debating and sorting out issues most pertinent to our work as advanced practice nurses and to the functioning of ISPN. Importantly, we ratified and approved the final version of the curricular guidelines for undergraduate education in psychiatric-mental health nursing, also known as the BSN Essentials. This latest version was a joint product of the collaboration between ISPN and APNA. ISPN did the original document in April 2005 and this revision reflects both the recommended educational guidelines and a significant collaboration between the two nursing organizations that represent advanced practice psychiatric nurses. Please see the ISPN website to review this document. We hope it will be the template for BSN education in psychiatric-mental health nursing for several years into the future. Many thanks to all who diligently participated in this process.

We are also involved in a new initiative involving NONPF, APNA, and ISPN to better define PMH-NP education and leadership of these programs. More information on this will be forthcoming.

Our website is in the process of revision and we should have a new “look” by the end of the summer. The goal is to put more information on the website and, at the same time, make it user friendly and accessible.

The Membership Committee is convening to ascertain ways to increase our membership. Along with this, we are planning a brief survey that will likely come to you in late summer or early fall, looking at what you want from ISPN.

Finally, the Board of Directors is developing the Strategic Plan for the coming year and we are focusing our efforts on the following three goals: increase and enhance communication, increase fiscal stability, and increase ISPN’s visibility nationally and internationally. You will be hearing more about this in future newsletters. Please watch for information about a new autism corner on the ACAPN part of ISPN’s website, the new website design, and the role of advanced practice PMH nurses in the military.

In conclusion, I just want to say that it is a pleasure to serve as your president. Please let me know if there is any way ISPN might help you in your nursing practice.

All my best,
Geri Pearson, President, ISPN
2008 ISPN Award Winners

At the 2008 Annual Conference in Louisville, the following ISPN members received awards for their contributions to the society.

- **ISPN Clinical Practice Award:** Karalee LaBreche
- **ISPN Diversity Award:** Vicki Hines-Martin
- **ISPN Education Award:** Eleanor Yurkovich
- **ISPN Research Award:** Richard Yakimo
- **ACAPN Division Award:** Linda Dugan-Stephan
- **AGPN Division Award:** Mary Paquette
- **ISPCLN Division Award:** Karen Ragaiss
- **SERPN Division/Jeanette Chamberlain Award:** Patricia Howard
- **Melva Jo Hendrix Lectureship Award:** Jaclene Zauszniewski
- **ISPN President’s Award:** Peggy Dulaney

**Coming Soon!**

A new and improved website to better meet your professional needs! ISPN’s new website will feature better navigation and organization of information, as well as white papers, searchable membership directory and new content addressing issues such as Autism. Visit [www.ispn-psych.org](http://www.ispn-psych.org) throughout the summer, and share your ideas for improvement and additional content by emailing info@ispn-psych.org.
The ACAPN Division is settling down to work after an invigorating annual conference. Many ACAPN members presented papers and posters, and the listing is still up on the ISPN website. Take a look and see what your peers are up to. Thirty-five ACAPN members attended the division meeting that occurred. We discussed many projects for the coming years, but two or three seemed to rise to the top. Members were interested in devising a method to direct teachers, nurses, and parents to sources of evidenced-based interventions and research developments in the autistic spectrum disorders. We are hoping that one of the projects for the year will be creating a resource hub for parents/teachers/nurses so that they may have access to innovations and research in autistic disorders. The plan is to create an information page that would be linked with the ISPN website. We plan on recruiting ACAPN members with expertise in this area. Another goal is for the ACAPN group to forge closer ties with one, perhaps two consumer groups that advocate for children with emotional illness. Both efforts represent our desire to advocate for children lacking access to mental health services. ACAPN members also expressed an interest in developing a stronger voice in Washington, particularly urging for another White House conference on Children. Dr Sally Raphel will help us navigate the political corridors to deliver this message.

At the conference it was announced that Kathleen Delaney was elected to be the next president of ISPN. As ISPN's president-elect she can no longer serve as Division Director of ACAPN. Initially, the board was working with the idea of a newer member (mentored by a more seasoned ACAPN member) completing the division director term. However, for personal reasons our candidate had to step down. Fortunately for ACAPN, Linda Dugan-Stephan has agreed to finish the Division Director term. Linda is a long-time member of ACAPN and was the recipient of this year's ACAPN award. We look forward to a great year with ACAPN members working with Linda and learning from each other.

Greetings from the Director of the AGPN Division! My name is Victoria Soltis-Jarrett, PhD, PMHSNC/NP-BC, and I was elected into this position for the 2008-2010 term. I am deeply honored to be able to facilitate this division and would like to have your feedback, comments and/or suggestions at any time. I can be reached at my email address which is: vsoltis@email.unc.edu or at my office 1-919-843-8587 during business hours.

A little about me:
I am currently working in education and practice in North Carolina, holding the positions of a Clinical Associate Professor and Coordinator of the MSN Program in PMHN. I am also certified by the ANCC as an Adult CNS in PMHN and Family PMH-NP. I have two practice offices in North Carolina: one in Winston-Salem and the other in the Raleigh/Durham/Chapel Hill area which I share with other clinicians. I have been practicing as an APRN since 1986, and I have held multiple practice roles both in the USA and in Australia. My specialty practice and focus of research has been primarily in adult women's health, although I have also practiced in aged care as a consultant to the Aged Care Assessment Teams in Australia. This was probably my most interesting job: navigating the dirt roads of South Australia in the bush and outback completing psychiatric assessments and consultations for community health centers and primary care doctors! There are many stories to tell from that part of my life! In the past ten years, I have expanded my role towards a family focus and provide individual, group, and family therapy as well as psychopharmacology and medication management. I prefer to work with challenging clients and I am typically referred individuals who are “treatment resistant” and/or have “personality disorders.” Again, I am honored to be able to work with those who have suffered with psychiatric illness(es) nearly their entire lives and entrust their care to me.

How can I help you?
I believe that it is very important for members of this Division to share their needs and also to tell me how ISPN can best assist them in their work, professional life, and/or practice. With members spread out across the USA, Canada, and perhaps moving toward the prospect of international membership, what are your thoughts about how we can all keep in touch between conferences, meetings and newsletters? This is an important piece of our Division and the overall ISPN membership. One suggestion that I had was to gather information about our Division through a survey. With your permission, we could publish these details on a secure, “members only” part of the website. This could facilitate the notion that if you needed information about a particular topic area, educational area, or even work issue, that you could peruse the site and search for those in the membership who could offer their expertise. As a Board, ISPN is considering this option and will be seeking your opinion about this through a short anonymous survey via email. For those without email, the survey can be posted to the ISPN main offices for collection and analysis.

I look forward to serving your needs and learning more about who our membership is and how we can support one another! Please feel free to contact me with your thoughts!
Hello ISPCLN Colleagues,

I hope as the summer is fast approaching that each of you finds some time to relax and renew yourself. During this time of turbulent and troublesome weather patterns, I am asking everyone to keep our friends, colleagues, and their families who have been impacted by the California wild fires and recent Midwest flooding in our thoughts.

I find it interesting that sometimes the weather seems to parallel turbulence in our society, and we certainly are in the midst of the most turbulence that we have experienced in a long time. Psychiatric consultation liaison nurse have always been skillful at managing turbulent situations, and I believe that many of us are on the front lines in supporting our colleagues at work, our friends, and working feverishly to assist neighbors too. We have been facing a society that is fraught with challenging economic times, natural disasters, and a war that has produced far too many suicides among our returning military personnel. I have heard from several colleagues who are working with some of the returning military personnel or in flood zones with neighbors that have been uprooted by natural disasters. Their work has been daunting as well as dedicated, and often they return home to find their lives are equally uprooted. That has always been the American way and I thank you for being there for them.

I am hoping that as our friends, family members, colleagues and neighbors who are involved in the military, and are returning home, are welcomed, embraced, and supported for their work while in active duty, and for their personal sacrifices. During the ISPN conference we heard from a military nurse, Lieutenant Colonel Tracey Linegar Taylor about her practice and experiences while caring for individuals in a detainee internment camp while trying to provide quality psychiatric care. She also addressed what it is like to return to “her world” in the United States and the challenges she has faced during her reintegration time. I had the opportunity to speak to one of the emergency room nurses who I work with about his tours in Iraq and the challenges of returning home to what was once a “normal life” and “typical work situation.” I believe that the psychiatric consultation liaison nurse is extremely well positioned and knowledgeable to assist our colleagues when they return and also work on the behalf of military personnel who may well be in our institutions or agencies seeking both physical and mental healthcare.

I hope that over the next year our society, healthcare, and the nursing profession begin to stabilize and the turbulence that we are presently living with begins to subside. Whatever does happen I know that the psychiatric consultation liaison nurses will be present and working on solutions to provide quality psychiatric care. I hope that each of you maintains your presence, while also rejuvenating yourselves.

I also want to take this opportunity to let you know how much I appreciate members’ support as I am again your Division Director for the next two years. Over this next year, I will send members email blasts about projects that the Division will be shepherding, and I need your help to take these projects to completion. I hope that when an e-blast goes out that you will consider yourself asked and join in the work of the ISPCLN Division, because each and everyone of you has incredible ideas and expertise. I am also looking forward to seeing you in Greenville, South Carolina next April for the ISPN conference.

Please have a wonderful and safe summer with family, and friends, and know how special each one of you is in what you do everyday.

Warmly,
Susan L.W. Krupnick, MSN, PMH-CNS, ANP
ISPCLN Division Director
Our Annual ISPN Conference in Louisville, Kentucky was a great success. We had excellent keynote speakers, presentations with a good combination of research, education and practice papers and posters, and time for networking. If you were not able to join us this year, I hope that you will be able to participate and/or attend in 2009. During the ISPN awards ceremony, Dr. Pat Howard received the SERPN Division Jeanette Chamberlain Award for her contribution to psychiatric nursing through activities that have advanced our understanding the caregiving experience of adult children with schizophrenia. I also discovered that Dr. Karen Robinson is having an exciting year as the inaugural AAN Fellow in the Center to Champion Nursing in America (CCNA). The Center to Champion Nursing in America is a joint initiative of AARP, the AARP Foundation, and The Robert Wood Johnson Foundation to address the growing nursing shortage that threatens access to health care and quality of care across the nation. Congratulations to both of these outstanding SERPN members!

We had a very productive business meeting at the conference. Dr. Carol Cutler, who is a Clinical Assistant Instructor at Virginia Commonwealth University School of Nursing and soon to be retired, volunteered to be the SERPN Division Secretary this year. Her newest area of interest is simulation in psychiatric nursing. If you have news and/or information that you wish to share with the division please contact Carol (cgcutler@mindspring.com) or Jane (jbneese@uncc.edu). Drs. Catherine Kane and Margaret Brackley gave us an update and summary on the AANPMH/Behavioral Health Competencies for non-PMH/ Behavioral Health RNs and APRNs Task Force. The next step will to obtain general input from the psychiatric nursing community, and the document will be on the ISPN website during the summer. Be looking for an e-blast from ISPN alerting you that the document is ready for review. Our next business agenda item was SERPN member input into the ISPN strategic plan. Thanks to all of you who responded to my e-blast. I shared your comments at the SERPN business meeting and with the ISPN Board who decided on three broad, encompassing goals: 1. To increase and enhance communication; 2. To increase fiscal stability; and 3. To increase ISPN visibility nationally and internationally.

With NONPF hosting their annual conference at the same hotel as the ISPN annual conference, SERPN and ISPN members had an opportunity to dialogue with the NONPF Psychiatric-Mental Health Nurse Practitioner (PMHNP) Special Interest Group (SIG) along with our APNA colleagues regarding the practice, certification, education and future issues facing PMHNPs. Our discussion centered on certification issues, leadership of PMHNP programs, and the influence of state practice acts and regulations on the role. Although there were no definitive decisions made, the discussion was timely, thoughtful, and helpful for those who participated. Again, thank you for the many emails from SERPN members requesting to participate! We discovered that there is quite an overlap of ISPN members in all divisions with NONPF, PMHNP SIG! On a similar issue, Kathy Delaney, Margaret Brackley, and I along with other ISPN members (including the Education Council, ACAPN and SERPN Divisions) and APNA will be developing a position paper addressing the minimum curriculum standards of the Family Psychiatric-Mental Health Nurse Practitioner.

For easy access, the Essentials of Psychiatric Mental Health Nursing in the BSN Curriculum is available on the ISPN website (http://www.ispn-psych.org/), so please share this document with your respective Colleges or Schools of Nursing. If you have not already done so, please answer the ISPN Diversity Survey.

Don't forget to mark your calendars for March 31-April 4, 2009 for the ISPN Annual Conference and Second Annual Psychopharmacology Institute to be held in Greenville, South Carolina.

Have a great summer and take some time to take care of yourself!

Jane B. Neese, PhD, RN
SERPN Division Chair
Editor’s Note
This newsletter is produced three times a year. The next three deadlines for article submission are as follows:

Fall: September 15, 2008
Winter: January 15, 2009
Summer: May 15, 2009

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