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From the President: Adieu



For the good of the many, for the happiness of the many, out of compassion for the world.

Gautama Buddha

World peace must develop from inner peace. Peace is not just mere absence of violence. Peace is, I think, the manifestation of human compassion. Dalai Lama XIV

I pause today, as I have many days before, to reflect on the past few months and the many conversations that have taken place since the heartbreak in Newtown, Connecticut in December 2012 and loss of life in Colorado, Oregon and Arizona over the past 2 years and the recent hurricane on the east coast of the US. It seems insurmountable to even consider these tragedies, not only as acts of human violence but acts of nature, with the storms that have ravaged communities and forever changed people's lives as they have known them.

As I prepare to step down from my role as President of ISPN, I want to THANK YOU for the opportunity to serve this organization. I have learned so much about leadership, the importance of communication, the joy of relationships and friendships, as well as learning that I believe in the notion of the GREATER GOOD. The concept of the GREATER GOOD is one that is questioned and even debated as to whether it is a reality or a myth. But for me, it is my "raison d'etre": or my reason for being, in the world. The greater good does not have to be a philosophical debate or even a question to whether it exists. It can just be a function of who we are in this world.

We often forget that even though the world seems so small and we share such common ground as nurses, we are indeed diverse and can/do believe differently. Yet, we can come together as a community to help one another, to listen, and to comfort; or even be a silent presence for someone in need of support. Do you participate in random acts of kindness? I am amazed (and pleased) by the HUGE impact that can occur when a small act of kindness takes place. And I am also humbled by the return of positive energy that circles back after a random act takes place.

As a small organization, I have learned that we, as PMHN, are rich in knowledge and skills. We all have talents that can and should be shared but also cherished by each other. Despite the fact that we all have our own views and beliefs, most of which come from our personal and family histories, seeped in culture and education, some of us have also had direct lived experiences that will forever change our lives; and often become the force that makes us we are and continue to become. We are not nurses because we "like people" or "want to work with people". Many of us are nurses because of a life experience

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EDITOR: CONNECTIONS Angela McNelis, PhD, RN, ANEF ammcneli@iupui.edu



ISPN's visionary soul embrace 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

(good, bad, traumatic, enlightening) that led us to this path of health care and in the case of this organization, Psychiatric-Mental Health Nursing.

We can make an impact in this world by virtue of who we are and what we can do. However small, we still can enact change and create meaning for ourselves and for each other. I encourage each of you to step up and consider becoming more involved, volunteer your time, small or large, and see what an impact you can make for yourself and those around you. Despite all that is wrong, or evil or insurmountable to discern, it is the small acts of kindness that can change the world.

Warm regards and hope to see you in San Antonio, Victoria

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

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Special News Items

(From the National Association of Clinical Specialist Jan/Feb newsletter)

National Defense Authorization Act for FY 2013 Includes Language for Psychiatric APRNS

The National Defense Authorization Act (NDAA) For Fiscal Year 2013 will now include "psychiatric advance practice registered nurse" in conference committee language. Originally, the language proposed was nurse practitioners. Senator Tom Udall (D-CO), Chairman Joe Wilson (R-SC) and committee staff from both the House and the Senate assisted in getting the language inserted. The NDAA has been passed by the House and the Senate and is awaiting the President's signature. In addition, the NDAA shows a trend of using provider neutral language to provide mental health services to military personnel-thanks in large part to Senator Murray (D-WA). The provider neutral language can be read as granting flexibility to both Departments (Defense and Veterans Affairs) to recognize the services of any category of health care professional with appropriate education and clinical training.

Archives of Psychiatric Nursing

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ISPN Foundation Report

It is a busy time for us at the ISPN Foundation Board. We are well underway in planning for the 2013 Silent Auction and Reception at the Hyatt. Our theme this year is *Under the Stars*. We will be hosting an outdoor event and we are hoping for bright stars and a warm evening. We are going to offer a reward for the person that attends in the best "fiesta attire!" It's not required but will be fun if you can participate.

For our new members and existing members, this is a fun evening. You will have the opportunity to meet new people, network, and shop! In addition to enjoying yourself, you will be supporting the Foundation's mission to advance research and scholarship for advanced practice nurses.

We would love for you to join us. In the past, we ask that our members bring items from your part of the world to donate or something that has helped you professionally. Examples in the past include jewelry, art, and your favorite professional books. This year for those of you too busy to find an item, we will accept a financial donation and do the shopping for you. You get the credit — we do the work. Please send any financial donations marked auction to ISPN if you would like for us to do the shopping. If you have the perfect gift but don't want to pack it — you may send it to my address at least one week prior to the conference.

Last year we added to our shopping experience by offering beautiful beaded bracelets made by Guatemalan women. We have added more inventory and will provide the opportunity to see more of their incredible handiwork. These women are the artisans and buying from them supports the Foundation as well as their community.

Be prepared to shop, laugh, and enjoy one another *Under the Stars*!

We are very excited and hope that we see you in San Antonio!

Susan Vebber, ISPN Foundation Board President Please e-mail me if you have ant questions! Email: susanvebber@qmail.com

Susan Vebber 10525 Leslie Dr. Raleigh, NC 27615

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From the Membership Committee

Please stop by the membership booth in San Antonio at the Annual Conference.

This year the booth will feature:

 ${\bf 1.} \ \ {\bf ISPN} \ items \ for \ sale, \ pins, \ flash \ drives... and \ several \ give aways.$



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

- 2. Books authored by ISPN members for sale...and signed by authors attending the conference.
- 3. Sign up sheets for informal dinners for new members initiated by members of the committee and volunteers

There will be a New Member Breakfast and Orientation on Thursday, April 18th from 7:30-8:30 am. All new members since April 2012 will receive an invitation to the breakfast. If you became a new member in the last year and do not receive an invitation by April 5, please let Rebecca Lemke (1-866-330-7227) in the ISPN office know. The New Member Breakfast is a great way to learn what ISPN can do for you and to meet old and new members. The breakfast and orientation is attended by the ISPN Board of Directors, Committee Chairs, and staff members.

We hope to see you all in San Antonio. Stop by the membership booth and say hello!

Submitted by Cynthia Taylor Handrup, DNP, APN, PMHCNS-BS Membership Chair chandrup@sbcqlobal.net

International ISPN Members as of January 1, 2013

Australia

Here is a list of our current international members:

Carolyn Tozer

Stefano Zaupa Australia Julie Sharrock Australia Sean Ironside Australia Shaun Sutcliffe Australia Bindu Joseph Australia Evelyn Labum Canada Gabriella Golea Canada Jason Anuik Canada Nancy Brooke Canada Nicole Snow Canada Roxanna Gregoire Canada Jamie Terhorst Canada Rosie Thornton Canada Ka Fai Ho Hong Kong, China Noriko Kawana Japan Miyoko Nagae Japan Ayami Tateishi Japan Ayumi Kohno Japan Mitsunobu Matsuda Japan Erika Kawasaki Japan Nico Oud Netherlands Joshua Gandi Nigeria

We are proud of our international membership and excited to learn about psychiatric nursing in their country. Last year in Atlanta, I had the pleasure of spending time with several international members and hope to meet many more this year in San Antonio.

Philippines

Switzerland

Switzerland

Seoul, South Korea

Submitted by Cynthia Taylor Handrup, DNP, APN, PMHCNS-BC Membership Chair

Perihan, Guner Kucukkaya Istanbul, Turkey

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Florence Reyes

Yang-Sook Hah

Regula Luthi

Christoph Abderhalden

From the Marketing and Development Committee

The Marketing and Development (M & D) Committee is working to locate and secure high-quality exhibitors and sponsors that will be of interest and benefit

to our ISPN members for the 2013 Annual Conference in San Antonio in April. We are working closely with previous exhibitors/sponsors as well as those who will be first-time exhibitors/sponsors. Our goal is to secure a diversity of exhibitors/sponsors who are on the cutting edge of mental health

The M & D Committee is pleased to welcome several ISPN members from Texas who are working the "local scene" to identify relevant exhibitors and sponsors: Gail Brenz, Nancy Daniels, Vanessa Genung, and Colleen Lee. Their insights and suggestions have been invaluable.

Please contact me if you have any suggestions about exhibitors/sponsors you would like to see at the conference.

In addition to working on the annual conference, the M & D Committee also focuses on increasing ISPN's visibility to other professional organizations and potential members through the use of social media.

The M&D Committee extends a warm welcome and we hope to see you in San Antonio in April.

Carla J. Groh, M & D Chair grohci@udmercv.edu

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Report on the Mental Health Regional Conference: Panama 2012

Approximately 80 mental health professionals from Canada, the United States, Latin America and the Caribbean gathered in Panama City, Panama October 16-18, 2012 to discuss regional experiences implementing the mental health global action program (mhGAP) of 2008 and to provide feedback on the draft *Global Mental Health Action Plan 2013-2020* which will be voted upon by the World Health Assembly in Geneva, Switzerland in spring 2013. The meeting was an opportunity for exchange between experts in nursing, psychiatry, psychology, social work, education, research, ministries of health, consumer advocates and the Pan American Health Organization (PAHO) and World Health Organization (WHO) representatives to discuss the state of mental health in the Latin American and Caribbean region. The status of mental health care in high income countries in the region (Canada and the United States), was not the focus of this meeting nor were those data the focus of the proposed report back to the WHO. Similar mental health reviews occurred in other regions globally during 2012 with the goal of submitting recommendations to the World Health Assembly.

A startling statistic shared at the meeting was that only 2.8% of budgets globally are devoted to mental health care despite the fact that mental illnesses make up more than 14% of the global burden of disease. Representatives from Latin America and the Caribbean stressed the need for additional training and education about mental health issues for both professionals and within country citizenry. Most countries reported a shortage of mental health providers to treat the increasing number of individuals experiencing distress from behavioral or psychiatric symptoms. Low and middle income countries in particular reported being challenged by the lack of available resources (human, evidencebased and culturally appropriate strategies and programs). There was general agreement that conducting mental health screening/ assessment and providing some initial treatment in primary care would be cost effective and ensure that more individuals are reached. In addition, moving treatment services to communities, using and promoting well-being and empowerment strategies, working to eliminate stigma, embracing human rights and redirecting resources to tackle the social determinants of mental health are critical interventions needed in order to make changes in the bleak picture that exists for those suffering from mental illness and trying to achieve well-being in many countries in the region.

The vision as stated by the Global Mental Health Action Plan is, "a world in which mental health is valued, mental disorders are effectively prevented and in which persons affected by these disorders are able to access evidence-based health and social care and exercise the full range of human rights to attain the highest possible level of health and functioning free from stigma and discrimination" (p. 5). The principles that are stressed throughout the document and repeated at the meeting on multiple occasions included equity, access, human rights, evidence-based, life course and empowerment. The document contains specific targeted government behaviors to improve mental health care in the region. Beginning with updated mental health policies and plans, increasing allocated ministry of health funds specifically for mental health to 5% of the health budget, decreasing inpatient mental health hospital beds by 20% and increasing quantity and quality of community mental health services, decreasing suicide rates by 2020; increasing the number of mental health promotion activities for multiple sectors of the population by 2016 and development of a process to collect and report on country specific mental health indicators (WHO, 2012). Developing partnerships with universities to conduct research, gather data on the most vulnerable groups and to help provide the practice evidence was discussed and embraced as a necessary strategy moving forward.

The working group also reviewed and commented on another document titled, Risks to Mental Health: An Overview of Vulnerabilities and Risk Factors (2012) which highlighted multiple aspects of vulnerability (gender, age, individual attributes, poverty, residing in countries with ongoing wars, other social circumstances, city versus rural residence, having one or more co-morbidities with a behavioral and or psychiatric vulnerability.

As a mental health practitioner and nurse educator, attending this regional working group affirmed what best practices in mental health should look like. We discussed the importance of social inclusion, eliminating discrimination, the

need for health literacy in community consumer groups, shifting from a model of pathology to one of health promotion and well-being, and the fact that mental health and access to humane care is a fundamental human right. The sophistication and forward thinking of the group made this both a learning and motivating experience.

Edilma L. Yearwood, RN, PhD, FAAN

References

World Health Organization [WHO]. (2012). Risks to Mental Health: An Overview of Vulnerabilities and Risk Factors. Geneva, Switzerland: Author.

World Health Organization [WHO]. (2012). Zero Draft: Global Mental Health Action Plan 2013-2020. Geneva, Switzerland: Author.

AGPN Division Update

Dear Adult and Geriatric Psychiatric Nurse Colleagues,

At this time in the ISPN cycle, we are looking forward to the annual conference in San Antonio and the preceding psychopharmacology session. The conference provides important CEUs for our professional certifications and some state APRN requirements. Many have already made their reservation- if you have not, please register soon. Information about the conference is on our website (http://www.ispn-psych.org/).

One of the best things about attending an ISPN conference is the opportunity to spend time with colleagues from near and far. Connecting with colleagues to talk "shop" and share ideas about what is working in other places expands your skills, knowledge, and attitudes. Colleagues can update you on what they have changed in their practice, if they have changed jobs and dialogue about their future. Perhaps you've thought of starting your own practice but don't know what all is involved. It's likely you'll bump into a colleague that has started their own practice. It's all about the connections we make that pull us forward to the next convention.

Every year we add many new members at conference time. You may remember what it's like to be new at the first ISPN conference you attended. Please engage with our new members and help them network with other members. Take them along to dinner or coffee.

We will have our annual Division meeting and are interested in items you want on the agenda. Email me with your ideas. Currently on the agenda, we have some business items to transact: (1) a representative is needed from our Division to the Nominating Committee (this role is a time-limited responsibility); and (2) in order to ensure a smooth transition in the future, we need to have a conversation about ISPN members who are interested in the Division Chair, including being a member of the ISPN Board.

See you at the ISPN convention. Come introduce yourself. I'm often at the membership table and I plan to wear a cowboy hat. Looking forward to meeting "you all."

As ever, Susan Benson, your Division Chair

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ISPCLN Division Update

Hello ISPCLN Division Colleagues:

I hope that you all are staying warm or enjoying a warm climate. I am looking forward to the spring when the blustery winds of winter are replaced by the sunshine and blooming flowers and of course the ISPN conference. Hopefully, you will take some time to begin your planning process to attend the 2013 ISPN Conference to celebrate an organizational milestone of our $15^{\rm th}$ Anniversary! Also, we will celebrate the $50^{\rm th}$ anniversary of PCLN practice with a special luncheon and the story of PCLN practice.

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 the 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 developed outstanding educational programs. This year we will have a dinner on Wednesday evening to celebrate the 15th anniversary of ISPN and to acknowledge our colleagues who worked on establishing ISPN along with the many volunteers that have served on the board of directors, committees and task forces over our fifth teen years. Please 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 50^{th} 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 at a celebration luncheon. During the celebration luncheon the panel presenters, both national and international (Peggy Dulaney, Dr. Jane Neese, Karen Ragaisis, Ann Robinette, Dr. Mark Soucy, Dr. Jean Klein, Marilyn Shirk, Dr. Tim Wand and Julie Sharrock) will be discussing the foundation, growth and development of PCLN practice, global expansion along with current practices with associated challenges. Additionally, presenters will explore 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.

We Need YOUR Assistance

Additionally, I am asking for each PCLN's assistance. We are working on organizing a compendium of articles, starting in the 1960's to present time, authored by PCLN's about practice, education, and 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 citations of articles, chapters 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.

Finally, it would be helpful to some of the panel presenters if you would send along information about your practice if you are involved with ethics, as Marilyn Shirk will be addressing this aspect of PCLN practice in her presentation. So if you are working on an ethics consult service or have expanded your practice into this specific area please email Marilyn directly at Marilyn.Shirk@cshs.org. Dr. Jean Klein would like to hear from you if you are or have been engaged in PCLN related research, so please contact her directly at ikdns@hotmail.com. In advance I want to thank you for assisting us in making this panel presentation a story about you and your PCLN practice.

Remember: Send along information about literature you have authored:

Please send along information to me directly at Skrupnick@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 safe and warmer winter. I look forward to seeing you in San Antonio and celebrating 50 years of PCLN practice with vou!

Warmly,

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

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SERPN Division Update

In the last issue, I provided updates on projects that were coming to fruition specifically related to the upcoming *Archives of Psychiatric Nursing* publication of the DNP task force report, the publication of the special issue in Archives of Psychiatric Nursing on quality and safety in psychiatric nursing education (October, 2012), and the spring 2013 release of the National Scope and Standards for Psychiatric Mental Health Nursing. The LACE consensus work is ongoing and Wendy Umberger continues represent ISPN at these meetings, keeping us abreast of any developments that may relate to our specialty. In this issue, I want to highlight some important presentations that are planned for the annual conference and future work I see SERPN partaking in during the next year.

I want to draw attention to three presentations planned for the annual conference in San Antonio related to psychiatric nursing education. First, Mary McClay and colleagues will present "DSM 5 and Advanced Practice Psychiatric Mental Health Nursing." This timely presentation will identify some of the significant changes expected in the May 2013 release of the DSM 5 and how it will impact psychiatric nursing practice. Second, Mary Weber and colleagues will present on how graduate programs can transition from CNS to NP (lifespan) and, finally, colleagues from across the country and I will lead a discussion on requirements for CNS's who want to change their titles and certification to NP. Together, the latter two presentations will explore the opportunities and barriers for schools of nursing transitioning to PMH NP Lifespan for current students and supporting post-masters students returning to school to for the Lifespan certification. Combined, these three presentations address some of the major transformations occurring within our specialty.

In the next year, SERPN may want to consider addressing ways to educate members and our students on the new 2013 CPT coding changes as well as how to best address the 2013 Scope and Standards in our programs and practices. Please consider other priorities for the 2013-2014 year and bring your ideas to the SERPN meeting in San Antonio. Look forward to seeing you there.

With gratitude for your support and encouragement, Sara

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

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Netiquette for ISPN Listserve Users

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

Ten Tips for Using a Listserv

- 1. When responding to a listserv, keep your messages brief.
- 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

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ISPN 2013 Annual Conference: San Antonio, TX

Please <u>click here</u> for more Conference information - see you there!

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Email: info@ispn-psych.org | Phone: 608.443.2463 | Web: www.ispn-psych.org

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