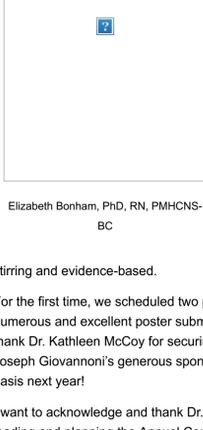




Volume 18, Issue 2: Summer 2015



A Message From President Elizabeth Bonham

Dear colleagues,

It was so good to see many of you at the 8th Annual ISPN Psychopharmacology Institute & 17th Annual Conference in Seattle, WA. We had a record breaking attendance this year so your attendance assured a very successful conference. Opening the conference with her keynote address on "Cognitive Behavior Therapy for Personality Disorders," Dr. Judith Beck set the tone for clinical practice areas described in a variety of concurrent sessions. Dr. Ukamaka Oruche's presentation as the Diversity Awardee was inspiring. Dr. Edilma Yearwood's awesome Hendrix Award Lecture motivated us about our potential for global involvement. Dr. Trez Buckland's courageous life story of her journey with her son, Jon, was

stirring and evidence-based.

For the first time, we scheduled two poster display sessions because of the numerous and excellent poster submissions, and both were well attended. I want to thank Dr. Kathleen McCoy for securing Dr. Beck as our speaker, as well as Dr. Joseph Giovanni's generous sponsoring of the self-care room. I hope we have that oasis next year!

I want to acknowledge and thank Dr. Linda Gerson and Sally Raphael for so ably leading and planning the Annual Conference this year. I also thank Dr. Karen Ragaisis and Dr. Geri Pearson for planning and implementing the Psychopharmacology Institute. And, last but not least, I thank our management staff—Executive Director Kathy Kuehn and Meeting Planner Peggy O'Brien for the masterful ways they bring it all together. Do take a moment to check the 2015 ISPN award winners on the [conference website](#).

In Seattle, we provided a "fish bowl interview" where we invited members to tell us what they would like the future ISPN to look like. Thank you for the rich feedback we received as it helps your Board of Directors to plan changes. One change will be the formation of Special Interest Groups (SIGs)—issue or topic generated groups where members can collaborate and network. We are also reviewing exciting new online communication strategies that are available to facilitate this work.

A very vital way to be involved now is to renew your membership and to volunteer for a committee or task force as the calls go out. New members at the conference were introduced to the ISPN Membership Navigation Program (IMIN) and paired with seasoned members for the next year. If you have questions about IMIN or would like a mentor for the next year, please contact Dr. Marian Newton at mnewton@su.edu.

We are committed to growing our Strategic Partners initiative. One such partner is RMEI, LLC, which hosted the Friday luncheon symposium at the conference, as well as sponsored the June 24, 2015, webinar on Binge Eating Disorders. Over 125 people registered for the webinar, which is archived and accessible on the [ISPN website](#). A second partner is LACE, an association of nurses working together for Licensure, Accreditation, Credentialing, and Education. Dr. Wendy Umberger represents ISPN at their meetings.

In addition, we are a member of the [Nursing Community](#), an organization of nurse groups that are working to improve the health of our nation. Dr. Karen Robinson represents ISPN on that group. You can read more information about the work Dr. Umberger and Dr. Robinson are doing in this issue of *Connections*.

In March, I had the wonderful opportunity to attend and participate in the RWJF Executive Nurse Fellows Invitational Think Tank meeting on Behavioral Health in the US Today. The meeting was attended by many nurse leaders to grapple with practice and service, education, and systems and policy issues as they relate to the care and delivery of mental health care. The Meeting Summary is posted [here](#).

In closing, I want to acknowledge our condolences to member Dr. Karen Schepp and her family, whose son recently passed away. We also celebrate the life of Dr. Kathryn Barnard, pioneer of infant mental health, who passed away in June 2015. Some of you may have met Dr. Barnard at the 2015 Foundation Event where she received the first Lamplighter Award. How fortunate we were to be able to honor her then!

I am delighted to be your president at this exciting time. I am confident we will make ISPN nimble and a continued player in the quest for mental health care, education, and research. I have an "open door policy"—that would be the virtual online office—so please feel free to share your thoughts, questions, and suggestions with me as we journey together.

Peace,

Beth

Elizabeth Bonham, PhD, RN, PMHCNS-BC

President

LACE Network Update: APRN Compact Model Legislation

Model legislation for the Advanced Practice Registered Nurse (APRN) Compact was approved on May 4, 2015, by a special delegate assembly of the National Council of State Boards of Nursing (NCSBN). In order to join the APRN Compact, states must enact the model legislation without any material differences. All states are eligible. Similar to the existing Nurse Licensure Compact (NLC) for recognition of registered nurse and licensed practical/vocational nurse licenses, the APRN Compact offers states the mechanism for mutually recognizing APRN licenses/authority to practice. Enactment of model legislation will address the critical need to promote consistent access to APRN care within states and across state lines and represent a step forward toward increasing mobility for APRNs and accessibility for the public to qualified APRNs. The use of technological advances in clinical settings (e.g., telehealth) and academia (e.g., online APRN programs) will also be facilitated by states' adoption of this legislation.

The APRN Compact mirrors the Consensus Model. Included in the APRN Compact model legislation are Consensus Model licensure requirements (i.e., graduate education, one of four roles and one of six population foci, accredited program and national certification) and provisions for grandfathering. A Compact license with privilege to practice in another Compact state will be limited to APRNs who meet the Consensus Model licensure requirements. For those who do not, they will be able to retain a single state license and apply for multiple single state licenses in states that have adopted the APRN Compact. The APRN Compact also includes prescriptive authority for a Compact licensee that is limited to legend drugs. Consideration of controlled substance authority remains with the state of practice as required by federal law. For instance, an APRN must get a Drug Enforcement Administration (DEA) license in the state where the patient resides, especially states where prescriptive authority is only for Schedule III-V drugs, versus Schedule II-V. Prescriptive authority will not be granted under the Compact to APRNs who were previously licensed but not granted prescriptive authority.

Find out more about the APRN Compact on the NCSBN [website](#). There you can obtain copies of the APRN Compact model legislation and Model Rules.

Best regards,

Wendy

Wendy Umberger, PhD PMHCNS-BC

The Nursing Community Update

Recently, I heard your elected leaders discuss future organization strategies. Leaders of ISPN have noted that while our organizational strategic plans focus significantly on Psychiatric Mental-Health Nursing, there is no tie in to our role of promoting nursing as a Professional Discipline. Members speculate that the silence around promoting Nursing as a Discipline means that ISPN has no activity in that area. The speculation is **wrong**.

Lack of awareness of ISPN's critical role in promotion of Nursing as a Discipline does not mean no activity occurs in that area. Thus, the purpose of this addition to the newsletter is to illuminate ISPN's membership since 2010 as part of The Nursing Community, a coalition of national professional nursing associations that builds consensus and advocates for a wide spectrum of healthcare and nursing issues, including practice, education, and research. The Nursing Community is committed to improving the health and healthcare of our nation by collaborating to support the education and practice of Registered Nurses and Advanced Practice Registered Nurses. Collectively, The Nursing Community is composed of 61 national nursing organizations representing over one million practicing nurses, nurse executives, and nursing students, faculty, and researchers. To learn more, see: <http://www.thenursingcommunity.org>

The main advocacy of The Nursing Community is for Federal Funding for Nursing through the Nursing Workforce Development Programs (authorized under Title VIII of PHS Act). Funding, which supports the supply and distribution of qualified nurses to meet healthcare needs of our nation, has come through this legislation since 1964. Title VIII programs bolster nursing education at all levels, from entry level preparation through graduate study, as well as provides support to institutions for education and practice in rural and underserved communities. Programs of Title VIII are designed to address specific needs within the nursing workforce and US patient populations.

I serve as the liaison between ISPN and The Nursing Community. I sign our organizational support for letters and statements issued through The Nursing Community. Support letters are given for the following core principles:

1. A nursing workforce is essential to the health of all Americans.
2. Nurses are an integral part of the healthcare team and are committed to healthcare of the patient, family, and community.
3. Contributions from the practice and science of nursing are critical to delivery of high quality care, prevention, and palliative care across all care settings, geographic areas, and social determinants of health.
4. Services of RNs and APRNs are directly linked to availability, cost, and quality of healthcare services.
5. Affordable, accessible, high quality care and improved outcomes depend on a model that is patient-centered and comprehensive, and can be achieved through the full complement of expertise gained from interprofessional partnerships.
6. Nursing involvement is essential for development of all aspects of new healthcare information infrastructure. Nursing data are key to identifying patient outcomes and improvements in delivery of healthcare.

In reality, all of us as Psychiatric-Mental Health Nurses have an extremely important role in improving health outcomes for our population. However, we need a better understanding of how our nursing practice influences overall quality of care and health policy. Now—more than ever—our membership needs to get involved in policy discussions. An example of one such discussion is our support of "The Medicare Telehealth Parity Act of 2015." The most notable changes related to Psychiatric Mental-Health Nursing made this year are to:

1. Authorize rural health clinics and Federally Qualified Health Centers to serve as distant sites;
2. Add outpatient mental and behavioral health services to be administered via telehealth in the home; and
3. Allow telestroke services to be provided regardless of originating site.

In future newsletters I will compile a summary of ISPN's current collaboration with The Nursing Community. Watch here for future updates!

Thanks for the honor of being ISPN's liaison to The Nursing Community.

Karen M. Robinson, PhD, PMHCNS-BC, FAAN
Director, Memory Wellness Initiative
Institute for Sustainable Health and Optimal Aging
University of Louisville, KY
Professor Emerita
University of Louisville School of Nursing

Save the Date: 2016 ISPN Annual Conference: April 12-16, Minneapolis, MN

ABSTRACT SUBMISSION EXTENSION: DEADLINE IS AUGUST 24

Just a reminder: If you have not already submitted your abstract or need to review your previous abstract submission, the 2016 Call for Abstracts has been **extended** until Monday, August 24.

The [2016 ISPN Psychopharmacology Institute and Annual Conference](#) will be held at the Marriott City Center, Minneapolis, Minnesota. Mark your calendars! The theme this year is *The Future Is Now: Psychiatric-Mental Health Nurses Leading, Advocating, Practicing, and Educating*. The Psychopharmacology Institute will begin on Tuesday, April 12, 2016, and end Wednesday (4/13) late afternoon. The Annual Conference will begin Wednesday, April 13, 2016, in the evening with the Opening Reception and continue until 12:00 noon on Saturday, April 16, 2016.

ISPN is accepting abstract submissions for the Psychopharmacology Institute and the Annual Conference. View the submission site [here](#).

Deadlines:

- General Abstract Submission Deadline is Monday, August 24, 2015, at 12:00 midnight Pacific time
- Student Poster Submission Deadline is Wednesday, September 30, 2015, at 12:00 midnight Pacific time

Plan to submit your research today!

Apply Now for 2016 ISPN Foundation Research and Travel Grants

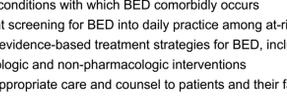
The International Society of Psychiatric-Mental Health Nurses Foundation is currently accepting applications for its two Research grants and Conference Travel Scholarships. Current and new ISPN members and students are eligible to apply.

Scholarships, awards, and grants for 2016:

- Annual Conference Travel Scholarship for members: \$750 each
- One Mental Health and Wellness Research Award for \$1,000
- One Research Grant for \$1,500

Please [click here](#) for information and application instructions.

Application deadline is November 14, 2015.



Now posted on the ISPN website: Continuing Education Opportunity for ISPN Members: [Cases in Binge Eating Disorder Webinar](#)

Learning objectives

After completing this activity, the participant will demonstrate the ability to:

1. Describe diagnostic criteria for binge eating disorder (BED) as well as common conditions with which BED comorbidly occurs
2. Implement screening for BED into daily practice among at-risk patients
3. Integrate evidence-based treatment strategies for BED, including pharmacologic and non-pharmacologic interventions
4. Provide appropriate care and counsel to patients and their families

1.0 contact hour may be earned for successful completion of this activity. Designated for 0.3 contact hours of pharmacotherapy credit for Advanced Practice Registered Nurses.

Annenberg Center for Health Sciences at Eisenhower is accredited as a provider of continuing nursing education by the American Nurses Credentialing Center's Commission on Accreditation. This activity is supported by an independent medical education grant from Shire. Expiration date: July 28, 2016.

News from the ISPN Foundation

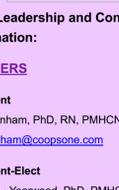
The ISPN Foundation has been hard at work fine tuning our donations process to make it easy for members to give to the scholarship fund. The requests for proposals for scholarships have been posted on the website and we eagerly await these. Janice Goodman is coordinating this effort. We are also reviewing last year's Foundation Event and considering creative ways to make 2016 even more successful in Minneapolis. Your ideas and thoughts are welcomed and can be sent to any Foundation member.

I have had to resign my position as Foundation president effective October 1, and Linda Skalsky has generously offered to finish my term of office. Linda is enormously talented and organized and will continue the Foundation work. I have appreciated my involvement with all the people affiliated with the Foundation and am confident that it will only grow as ISPN moves forward. Thanks to all who have helped me! Please join me in wishing Linda the best in this new role.

Geri Pearson, PH.D, PMH-CNS, FAAN
ISPN Foundation President

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