

Volume 8 Issue 2 May 2005 - August 2005

Awards - 2005

Rica O'Connor, PhD, RN

10 awards for which members (or a non-member, in the case of the Service to Psychiatric Nursing Award) can be nominated annually. Following are brief descriptions of the awards and highlights of the 2005 winners who were honored at the Awards Brunch in Pittsburgh on Saturday, April 9.

Education Award acknowledges exceptionally creative and effective work by an ISPN member in any aspect of the process of the educational preparation of psychiatric-mental health nurses.

This year we honored Dr. Lynette Jack, Director of Accelerated Health Programs at Waynesburg College, and former faculty member and Director of Student Services for RN Options and Graduate Programs at the University of Pittsburgh. Lynette was a prime mover in bringing widespread education in alcohol and other drug abuse to nurses - she edited the Core Curriculum of Addictions Nursing. She served on the Education Council of ISPN and chaired the ISPCLN alcohol withdrawal task force. Students acknowledge her creative instructional strategies that lead to "profound" learning and her high level of availability to students.

Research Award acknowledges an ISPN member whose research has influenced clinical practice, care delivery, and/or policy in psychiatry or mental health.

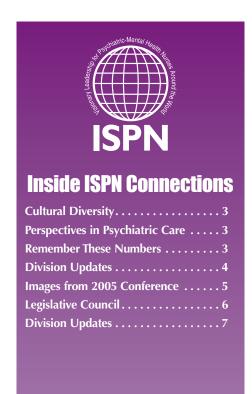
The Research Award went to Dr. Janis Gerkensmeyer, Assistant Professor at Indiana University School of Nursing, Indianapolis. Janis is building an impressive program of clinically relevant, theoretically grounded studies of mental health services provided to children who are seriously mentally ill – as seen from the perspective of their parents. She has developed a Parent Satisfaction Scale that assesses parents' satisfaction with their interactions with staff members – which is already being used by other researchers. She has also studied outcomes of support groups for parents whose children have mental illnesses. In addition, Janis has served as chair of the ISPN Research Council and remains a member of the council.

Cultural Competence (Diversity) Award recognizes an ISPN member who individually or as part of an organization has demonstrated outstanding leadership in promoting culturally sensitive mental health care or improving cultural sensitivity in health care services through teaching, research, or practice; or has contributed to understanding effects of culture on mental health.

Two members were recognized for exemplifying cultural sensitivity in health care and for actions promoting other clinicians' cultural competence.

Dr. Edilma Yearwood is a member of the School of Nursing and Health Sciences faculty at Georgetown University. She previously held other academic positions and a progression of clinical and administrative posts in child and adolescent mental health programs, where she served as a "longtime staunch advocate of this vulnerable population and their families." Edilma has spoken and written extensively about childrearing practices among immigrant Jamaican families and also about nursing students' perspectives on cultural diversity. She provided leadership to the Georgetown Diversity Action Council's faculty and staff assessment of campus climate for diversity and tolerance and inclusion. Edilma edits the "Culture Bound" column in the Journal of Child and Adolescent Psychiatric Nursing and also serves on its editorial board. She is co-author of the ISPN Diversity Statement.

(continued on page 2)



Awards - 2005 (continued from page 1)

Dr. Faye Gary, the second award recipient, is the Medical Mutual of Ohio Professor of Nursing for Vulnerable and At-Risk Persons at the Francis Payne Bolton School of Nursing at Case Western Reserve University. She has a long and ambitious record of work, study, and bringing to public light the problems and needs of vulnerable peoples. In the 1960s she coordinated community health services in the Chinatown section of North Beach in San Francisco - and volunteered at one of the first drug rehabilitation clinics in the US, at the Haight Ashbury Clinic. These initiatives led to many more opportunities, including work in the Amazon basin, Botswana, Zimbabwe, Swaziland, Ethiopia, and Uganda. She often worked in areas in which several, sometimes conflicting, religions were prominent. Among her 60-plus published articles are papers on suicide prevention among American Indian and Alaska Native communities and among young African American males. She is recognized as a person of "vast humanity, compassion, and dedication [who has] impacted countless lives around the globe."

Melva Jo Hendrix Lectureship Award honors the memory of its namesake and recognizes her lifetime of contributions to psychiatric-mental health nursing. The award is made to a nurse whose career exemplifies Dr. Hendrix's values and principles: improving care for the underserved, stigmatized, or disenfranchised; and dedication to mentoring others.

The Melva Jo Hendrix Lectureship Award was given this year to Dr. Linda Finke, who gave the MJH Lecture, Caring: The International Connection, earlier in the conference. Linda (whose receipt of this award was announced at last year's conference) is Director of Professional Development Services, Sigma Theta Tau International, and Adjunct Professor, Indiana University School of Nursing. Her clinical scholarship and research (and tireless advocacy) have focused on needs of children and adolescents. A particular focus has been the impact of grief and chronic illness on children. She has recently been involved in the movement to create restraint-free treatment environments for children and adolescents. She is concerned about psychiatric treatment and the plight of people with mental illnesses around the globe. She has expertise in substance abuse and prevention, and has contributed many articles on nursing education. Linda has always been active in her state nursing organizations, and she has served as president of ISPN and ACAPN. An outgrowth of this work includes a number of national invited testimonies for government panels, commissions, and the surgeon general. Linda has been called a true leader. She is noted to move toward thoughtfully considered objectives with tenacity and optimism.

Dr. Catherine Kane was named the next Melva Jo Hendrix awardee. She will give the lecture and receive the award at the 2006 conference.

The following awards are also available, although they were not given this year.

ACAPN Award recognizes an ACAPN member who has demonstrated outstanding achievements in 1) clinical practice, 2) service, 3) research, or 4) education concerning psychiatric nursing or mental health services for children/adolescents.

ISPCLN Leadership Award recognizes an ISPCLN member who has demonstrated outstanding achievement in consultation-liaison nursing through 1) clinical practice, 2) leadership/service, 3) research/writing, or 4) education.

SERPN Jeanette Chamberlain Award is given to a SERPN member who has advanced the field of psychiatric nursing through public service, administration, development of healthcare policy, and other service activities.

AGPN Award is given to a member of the division who has demonstrated outstanding achievement in adult or geriatric psychiatric nursing in clinical practice, leadership/service, research/writing, and/ or education.

Clinical Practice Award recognizes an ISPN member who has made an outstanding contribution to the advancement of care of people with mental illness or their families. Contributions are primarily clinical rather than administrative or academic.

Service to Psychiatric Nursing Award goes to a non-nurse (individual or group) or to a non-psychiatric nurse who has made an outstanding contribution to psychiatric nursing.

Come Surf Our WebSite ... www.ispn-psych.org

Cultural Diversity

Edilma Yearwood Cultural Diversity Chair

he ISPN Diversity Committee is actively seeking membership feedback and input as it relates to your experiences with diversity and how you would like to see ISPN focus on diversity issues within the organization and between the organization and the public with which we interface.

The Diversity Survey was available at the 2005 ISPN Annual Conference and ISPN received a number of surveys returned from conference attendees. However, we would like to reach out to all ISPN members for your valuable input.

The Diversity Survey is posted on the ISPN website http://www.ispn-psych.org/docs/ISPNsurvey.pdf

If you have not already done so, please take a few minutes to complete the survey and fax or mail it back for review.

Your participation is appreciated.

Perspectives in Psychiatric Care

A Call for Manuscripts on the Educational Competencies

n entire issue of *Perspectives in Psychiatric Care* will be devoted to the education of psychiatric mental health nurse practitioners. The goal of this volume is to provide faculty an opportunity to write about their programs and share what they are doing to implement entry level competencies for graduates of master's and post master's programs. You can download a pdf file of the Psychiatric Mental Health Nurse Practitioner Competencies at http://www.nonpf.com.

We are seeking articles that discuss the issues and possible solutions raised by these competencies. Research articles as well as essays and opinion pieces will be considered. When reviewing the list of competencies choose an area of interest that you can dialogue about and offer some thoughtful insights and experiences.

Graduate students are also invited to write a paper about their experiences as graduate students, suggestions, and feedback about their program.

Please submit one hard copy and one e-mail copy by December 1, 2005 to the Editor, Mary Paquette (mary@artwindows.com).

Remember These Numbers:

5020 in 2006

he 2006 ISPN Conference will be April 5-8 in Denver, Colorado (elevation 5020 feet). "The Science of Creative Practice" will be our theme. We are inviting everyone to

submit abstracts that highlight state-of-the-art evidence based practice with populations across the lifespan and across the health-illness continuum.

We have located an outstanding venue for the 2006 conference. Denver is a vibrant, bustling city with many exciting attractions from museums to performing arts to a mile long pedestrian shopping mall. (Alert to all shoppers: the shopping dis-



trict is only one and a half blocks from the hotel and even features a free shuttle bus service.) There are all sorts of interesting restaurants for those nights out with friends.

The Marriott City Center has meeting space that is very well suited for our needs. There is a large area centrally located for



networking and connecting with friends and colleagues. The sleeping rooms are nicely appointed and wireless internet service is available throughout the hotel. Plan to bring your bathing suit for the indoor pool and/or hot tub that are part of the spa and exercise area.

Now that we have such an exciting location all we need are lots of exciting presentations. We will be doing online submissions this year;

please visit us online at www.ispn-psych.org for submission instructions. The Conference Planning Committee decided to adjust the schedule to allow more time for each presenter. We encourage you to share your work with your colleagues at the ISPN conference.

For further information, contact Conference Planning Committee Co-chairs:

Peggy Dulaney at Dulaney@infionline.net or Elizabeth Steinmiller at STEINMILLER@email.chop.edu

See you in Denver!

ACAPN

s your new Division Director of ACAPN, I want to send greetings to all of you and extend my thanks for electing me to the position. As I think about all the work that needs to be done around mental health issues concerning children and adolescents, I also want to acknowledge what people in our ISPN organization are ALREADY doing in their practices throughout the country and the world. I work in a medical school department of psychiatry with an adult psychiatrist who is actively involved with the Annapolis Coalition, an interdisciplinary group of mental health care providers, who are examining the various ways to "fix" the difficulties inherent in our health care system. We all know what those difficulties are because we, as nurses, treat the populations most influenced by a dysfunctional health care system. Those issues include access to care, parity, prevention versus tertiary management, and a pervasive increase in mental health difficulties among children and adolescents. In my column in JACPN and in this newsletter, I will try and keep you informed of these movements and changes and the ways that they affect our practice now and in the future. I would welcome your thoughts and ideas about this and also your input into the ways ACAPN can be helpful to YOUR practice as a nurse. My email is pearsong@psychiatry.uchc.edu. Please feel free to use it.

On a more practical note, at the recent conference in Pittsburgh, the issue of ACAPN chapters was settled and you all received notification from Maureen Killeen that funds would be distributed to THOSE ACTIVE ACAPN CHAPTERS WITH AN ACTIVE BANK ACCOUNT. I need to clarify that it is against by-laws for ISPN to mail checks to individuals. All active ACAPN Chapters need to have an active account for disbursement of funds. I apologize for any misunderstanding this might have caused; many individuals have responded to the notice about chapters by asking for the money directly. Hopefully, this issue has been clarified. Please feel free to contact Maureen or me if you have further questions.

I look forward to hearing from you during the coming year. I would like to see ACAPN develop two white papers in the next one to two years. The first would involve psychiatric management of juvenile justice populations, a prominent topic today and one that I am very involved with, given my work. The second, suggested to me at the ISPN conference, involves care of foster children and needs some further exploration. Many thanks for your support.

Karen Ragaisis KRagaisis01@snet.net

hope that those of you who attended the 2005 ISPN conference in Pittsburgh enjoyed yourselves. I certainly get pleasure from connecting with friends old and new. Those of you unable to join us this year were sorely missed. The conference and preconference offerings were lively and varied. Several ISPCLN members stepped forward to present on topics of female bullying behaviors, psychogenic symptoms, end-of-life care, dealing with loss and grief, private practice, staff recruitment/support and cultural competence. Please think about sending in an abstract for the 2006 conference. You can find further information about the call for abstracts on the ISPN website.

There was good news for our division research project! The ISPN Foundation held a fun dinner cruise on the river in Pittsburgh. Towards the end of the meal, it was announced that we were the recipients of the 2005 ISPN Foundation Award. We received a check for \$500.00 which will go to support necessary materials for our pilot project on PCLN outcomes.

I firmly believe that PCLNs need to publicize their practice. PCLNs are great at putting into words how their specific strengths are marketable qualities! Writing is one way to accomplish this. During the conference, Lynette Jack introduced me to Rachel Safer, Assistant Editor, Journals for Blackwell Publishing. Rachel then connected me with Mary Paquette PhD, APRN, BC, Editor of *Perspectives in Psychiatric Care*. Mary and I spoke via email regarding a quarterly column on PCLN practice for the journal. A brief discussion was held via our chat site and the members who responded were in support of the idea. I would like those of you willing to share your expertise to please consider writing for the column. You can email me at KRagaisis01@snet.net if you are interested.

Enjoy your summer!

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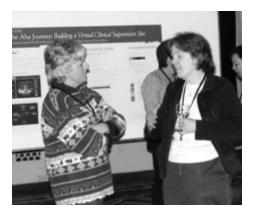


Images from the 2005 Annual Education Conference





Pittsburgh, PA



April 6-9, 2005







ur council met during ISPN's conference in Pittsburgh this April. During our meeting we identified the following as priorities for the coming year:

- 1. Children's Mental Health Issues, especially as they relate to domestic violence.
- 2. End of Life issues and impact on mental health.
- 3. Mental Health needs of Veterans and the expected increase in PTSD in this population.

Caroline McKinnon has agreed to represent ISPN at the National Coalition of Child and Adolescent Mental Health

Services. This group meets quarterly in Washington, DC. Sally Raphel will collaborate with Caroline. It will be helpful to have ISPN represented.

Edilma Yearwood is volunteering to be an ISPN representative at the meetings of the Mental Health Legislative Group. We would like to thank both of these ISPN members for volunteering.

The Child Health Care Crisis Relief Act of 2005 has been introduced in the House of Representatives. The Center for Mental Health Services estimates that 20% or 13,700,000 of the nation's children have a diagnosable mental disorder, and about two thirds of these children and adolescents do not receive mental health care.

According to the Surgeon General's Report there are particularly acute shortages in the number of mental health professionals serving children and adolescents with serious mental illness.

The development and application of knowledge about the impact on disasters on children, adolescents and their families has been impeded by critical shortages of qualified researchers and practitioners specializing in this work. According to the Bureau of the Census, the population of children and adolescents in the United States is projected to grow by more than 40% in the next 50 years from 70 million to more than 100 million by 2050.

This Act will improve scholarships and grants as well as loan repayment if the professional agrees to be employed in a setting which cares for children and/or adolescents for at least two years. Advance Practice Psychiatric Nurses are included in this Act.

You may send a letter to your federal and state legislators by visiting http://www.congress.org/congressorg/home/. Enter your zip code and a list of representatives and their email addresses will pop up for your convenience. Also, all House and Senate offices can be reached through the Capital switchboard at 202-224-3121 (please note that this is not a toll-free number).

Senators and House members may also be reached at their local offices that are listed in the Blue pages of your local phone directory.

If you want to begin being more active in voicing your opinion about the needs of these children, place the names and numbers of your Senators and Representatives in your personal

phone book or planner for easy and immediate access when you feel your representative needs to be apprised of an issue.

The National Alliance for the Mentally III (NAMI) is among the supporters of universal mental health screening. They point out that an alarming 65% of boys and 75% of girls who are currently incarcerated in our nation's jails and detention centers have one or more psychiatric disorders. (Teplin L, *Archives of General Psychiatry*, 2002).

Some helpful websites to easily keep up to date with current legislation related to Mental Health and Illness are:

- 1. Thomas.loc.gov
- 2. Children's Defense Fund
- 3. CWLA.com
- 4. NAMI.org

All House and Senate

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offices can be

(202) 224-3121.

AGPN

ver been in an organization and asked yourself if it is worth the money, time, and energy? I am sure we all have asked these questions at some point in our careers. Decisions about belonging to one or another organization can weigh heavy on our minds and our pocketbooks. Things we consider before we keep dishing out our hard earned money include: how does the organization keep you updated in your career, provide an area of networking, ability to receive discounts on journals, legislative issues, and CEU's are just a few things that come into my mind.

ISPN has done this for me, many times over. The conference in Pittsburgh in April was great! It was great meeting all the AGPN members, although few in numbers. This division is still in its infancy and my goal is to have it become strong and having a voice. One of the ways of doing this is to hear from YOU, the members, especially the AGPN division.

I know our lives and our careers are very busy. As I write this, I am in the process of taking off the old masonite siding off my house, putting the house wrap on and will be putting on a cement fiber board siding. At my full time paying job, I work with the chronic and severely mentally ill patients. I do not have outside email, or a computer at work that allows me to save to a disc so that I may write the article during a "no show" appointment and then email it to the editor. Hence I am very late getting the article in. If you are reading this, then I have accomplished my task! I may be able to say I have many excuses but the bottom line is I value what I get and what I need from ISPN. It is also about setting priorities and time management.

I was first a member of ISPCLN before the merger of the three organizations and continue to be part of the ISPCLN group. The AGPN division was formed when many members stated that they did not do consultation liaison, children, nor were they in education. Hence, the development of the Adult and Geriatric division. This division is for you, the folks who deal with the adult population. This may be in an outpatient setting like myself, or inpatient or private practice. Medication may be the major part of our job or it may strictly be psychotherapy or a combination of both.

Perhaps you do something just a little different or have a different style. As I mentioned earlier, the conference in Pittsburgh was great, but in my eyes it was lacking the voices of the Adult and Geriatric division. What invigorates me is listening to colleagues who have had a struggle with a particular patient, or not responding to medication management, or did a very simple intervention that I never would have thought about. I know that we all have had patients, or incidents like this on a regular basis. My request for the AGPN division is to be heard in Denver at our next conference in April of 2006!

By the time you read this, Abstracts will be coming close to the deadline. I encourage each and every one of you to put this issue on your priority list to get an abstract completed! Let's energize our colleagues, and submit an abstract. What I would like to see is more clinical practice issues... the here and now, down and dirty, what is really going on in our field. Incorporate theory, medication, therapy or whatever you are doing, but let's talk about the patients we see, our struggles, our success and our failures. Be your creative selves, and the energy in Denver will be awesome!

Here is a big thank you to all of you who have and will be submitting abstracts. And yes, you may submit more than one abstract! Please go the website www.ispn-psych.org and download the abstract and submit away. While you are at the website, make sure that you subscribe to get e-blast from the organization. You MUST subscribe to the eblast. This is a very quick and informative way of staying current with what is happening in ISPN!

Here's hoping everyone has had a great summer, and I will update you on the progress of my house in the next issue. Remember to submit the abstracts!!

SERPN

Vicki P. Hines-Martin, PhD, RN, CS

any changes have occurred since the conference in Pittsburgh. Our new leadership has taken office and many new initiatives have been undertaken. In addition, changes within nursing have also come into play and many of those changes directly affect the SERPN membership. I would like for SERPN members to help me by becoming involved in some of the new initiatives and directions of the organization and through sharing your voice about changes in nursing.

As I mentioned in the last newsletter, AACN has endorsed the DNP and clinical nurse leader roles as the direction for the future. I referred you to the AACN website for further information about these leadership roles. As the education and research arm of ISPN, I think our membership could provide valuable information about how these programs are being developed and implemented in the Schools of Nursing, and how they may impact the future of psychiatric mental health nursing advanced practice and mental health care. To more clearly crystallize and articulate our perspectives, I am seeking volunteers to form a taskforce for the development of a white paper in relation to this topic. Let me know if you are interested.

As has been announced to the membership, the *Archives of Psychiatric Nursing* editorship and editorial board is in a period of change. SERPN division has been asked to identify representatives to the editorial board. I am requesting that all interested members forward an e-mail to me expressing their interest in serving. Positions are limited and a decision will be made based on the number of interested parties. At the time of this publication, an e-mail message was planned for all members of SERPN with this last request. Please be sure your e-mail is current. If you do not receive an e-mail message, contact me and I will be sure to update my current list. Keeping connected is important to us all. Thanks and talk with you soon!



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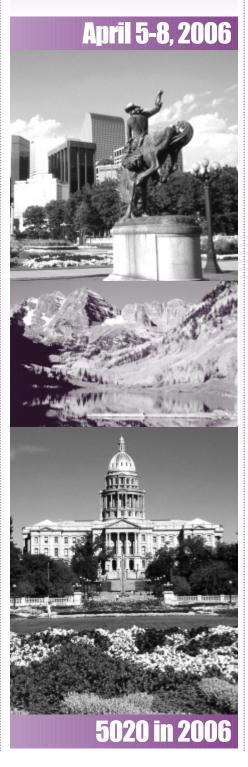
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Committee members and Council Members and the division they represent can be found at http://www.ispn-psych.org. Click on "ISPN Leaders Identified"

Save the Date!

The 8th Annual Education Conference is coming to Denver!





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ISPN Connections

ISPN Connections the Newsletter of the International Society of Psychiatric-Mental Health Nurses (ISPN) is published 3x/year.

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1/4 page:	(3 5/8 X 4 3/4)	\$200
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Full page:	(7 1/2 X 9 7/8)	\$500

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Editor's note:

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

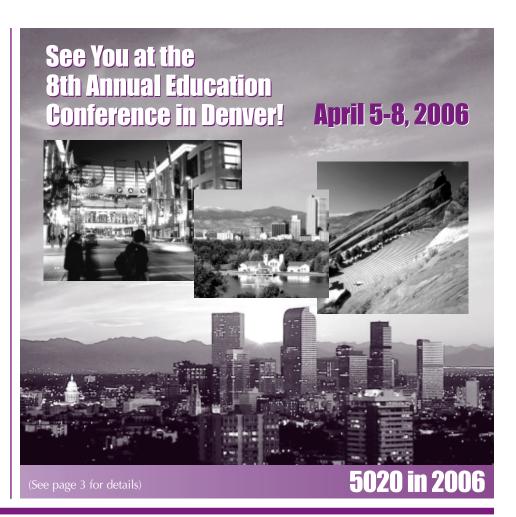
Fall: September 25, 2005 **Winter:** January 22, 2006 **Summer:** May 31, 2006

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

Mimi Brittingham

Email:mypcbritt@aol.com

Selected photos of Denver courtesy of the Denver Metro Convention and Visitors Bureau.





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