



Psych nurses give care and comfort: Hard job has rewards

By Paul Restuccia

It takes a special breed of nurse to do psychiatric nursing.

“In psych nursing, things are not black and white,” says Karen Chesley, a psychiatric nurse specialist in private practice in Wakefield. “You have to be able to tolerate ambiguity, be calm in the midst of chaos and, at times, be in situations that can become violent.”

Psych nurses treat patients who are delusional, angry, manic, depressed, have attempted suicide, are out of control due to substance abuse, or are suffering from eating disorders — and everyone from children to elders. They work everywhere from dedicated psychiatric hospitals to inpatient/outpatient units at general hospitals, clinics and in private practice if they are certified to prescribe medications.

“I think a lot of people don’t really understand what psychiatric nurses do,” says **Laureen Goguen**, a clinical staff recruiter at **McLean Hospital** in Belmont, who has been in the profession for 31 years.

“They work with patients who are often at their worst and most vulnerable, when their mental illnesses are acute. They have to treat patients with dignity and rationality even though patients may be out of control.”

It’s challenging work.

Media portrayals of psych nurses like Nurse Ratched from “One Flew Over the Cuckoo’s Nest” — a sadistic ogre who ruled her ward with an iron fist — have not created an endearing image of the profession. Nor has society’s fear of the mentally ill made it easy for nurses to choose this career.

“Those who become psych nurses do it because it’s where they want to be,” says Goguen. “Psych nursing is less task-oriented than other kinds of nursing and requires spending lots more time with patients, many of whom resist being in a hospital or don’t think there’s anything wrong with them.”

But those who choose psych nursing have deep personal feelings for why they choose this field.

Mass. General inpatient psychiatric nurse Maria Romanoff, 30, says she went into it “because I realized that I like sitting down with patients and hearing the stories of their lives.

“I’ve always been interested in the human side of nursing,” adds Romanoff, who had been a medical surgery nurse for four years before going into psych nursing last spring. “When you have a great interaction with patients, you’re really making a difference in their lives.”

Psych nursing requires a wide range of skills — from the practical to the creative. Nurses in the field say that those who do well in it are caring and compassionate but are also assertive. They have a strong sense of themselves but enjoying reaching out to others.

Sandra Thompson, 48, who is a psych nurse at McLean's clinical evaluation center, says her father's being a minister got her used to visiting people in hospitals.

"It felt natural for me to help people feel comfortable," says Thompson, who did secretarial work before entering nursing school in her early 30s and has been a psych nurse for 15 years. "A big part of what I do is gaining patients' trust by finding ways to connect with them."

Roger Duguay, a 60-year-old MGH psych nurse who's been in the field for nearly 30 years, also made a career change. He was in construction before he found his way into psych nursing.

"To be a good psychiatric nurse, you need four things," Duguay says "You must be able to listen. You must be nonjudgmental. You must be decisive. And you have to enjoy what you're doing.

"I've accomplished more on this job than I ever thought possible. I really enjoy getting patients to feel better about themselves. Doing psych nursing can be difficult but it really helps you grow as a person."

Larry Plant, president-elect of the New England chapter of the American Psychiatric Nurses Association, says that while it is more difficult to get younger nurses into the field, once they get in, they tend to stay.

"Once a psych nurse, always a psych nurse," says Plant, who has been a college nursing instructor for 18 years and steers promising students into the field. APNA is battling for equality of treatment and medical insurance for patients with mental illness. This in turn would boost the pay in the profession which can be less than what other nurses make, particularly in smaller hospitals.

"Psychiatry doesn't make money for hospitals because the insurance reimbursements are less," says Goguen. "In turn, psychiatric nurses tend to be paid less than some other specialties."

But nurses say that the field gives them more autonomy and input into decision-making than other branches of nursing. Psychiatrists agree.

"Psych nurses are on the front line," says **Dr. Beth Murphy**, a psychiatrist and assistant director of admissions at McLean. "They know what's going on and they have a lot of say in helping psychiatrists decide and monitor courses of treatment. The psych nurse/psychiatrist relationship tends to be less hierarchical than other areas of nursing."

Another misconception about the profession, Goguen says, is that nurses need one year of medical/surgical experience in order to work in a psychiatric facility. And while some nurses do have master's degrees and become, like Romanoff and Chesley, psychiatric clinical nurse specialists, Goguen says you do not need a specialized set of skills to do the work. Direct experience with patients is the best way to learn.

Thompson says that a large part of psych nurse work involves close observation.

“Psych nursing calls for expert assessing skills,” she says. “Nurses must observe patients closely, and document even the slightest changes in behavior, facial expressions, hand movements, tones of voice to determine patients’ condition and progress.”

Romanoff adds that a lot of what she does as a psych nurse is motivating patients — getting them to do the activities of their daily lives and help them come up with plans to get through each day and to make long-term changes in their lives. She says she also spends a lot of time educating patients and families about mental illness and various medications to treat them.

“I constantly tell patients that they are safe here (and) that I want to help them,” says Romanoff. “And I tell their families not to blame themselves for the mental illnesses of their loved ones. I try not to give advice but to point things out to patients and let them come up with their own solutions.

“You have to be patient too,” Romanoff adds, “because accepting mental illness, learning to live with it and staying on meds can be a long process that often entails more than one hospitalization.”

To reach patients, psych nurses will sit with them over a meal, over a game or an art project — even sit up with them all night if they’re under a suicide watch or suffer acute anxiety.

If one nurse makes progress establishing good rapport with a particular patient, that nurse will often be assigned to the patient daily on their shift.

Psych nurses also administer medications and talk with patients about dealing with often unpleasant side effects. They must persuade patients that the discomfort is something they must tolerate in order to get better.

Thompson says that psych nurses also have to be tough-skinned, as patients will blame them for medication side effects and, worse, hurl insults at them, make racial or ethnic slurs and ask highly personal questions that violate nurse/patient boundaries.

“You can’t take cruel remarks or anger directed at you as personal affronts,” says Thompson. “That can be hard to do sometimes. But you have to accept that it’s the patients’ illnesses that trigger this kind of behavior.”

If patients are too intrusive or otherwise causing problems with others on a unit, psych nurses have to restrict them to their rooms or even put them in “quiet” rooms to keep them from harming themselves or others.

The potential for violence is the most difficult part of the job, psych nurses say. Patients who are acting up have to be physically restrained.

“It can get very scary,” Romanoff says. “And that’s where having a team of nurses, attendants and orderlies can be critical for your own safety.”

Thompson says the work can be emotionally and physically draining.

“You need to be able to find a place of peace within yourself,” she says. “Talking with psych nurses you work with helps you deal with some of the difficult experiences. It creates a strong bond between us.”

Although more people understand that mental illness stems from biological malfunctions in the brain, nurses working with people with psychiatric problems fight perceptions that there must be something wrong with them to want to do this kind of work.

“There’s still a stigma attached to doing this kind of nursing in the medical profession, although it is getting better,” says Chesley, who’s been a psych nurse for 21 years in both inpatient and outpatient settings.

Many psych nurses say they also have personal reasons for going into it — friends or family members with mental illness.

“Most everyone has someone in their lives who suffers with mental illness, and that’s true for nurses as well,” says Goguen.

That only strengthens psych nurses’ resolve to work with this population.

“There are people in my life who suffer with mental illness,” says Romanoff. “But I’m in psych nursing because this is something I knew I wanted to do.”