

# THE CORRECTIONAL NURSE

Inspiring

## Professional Correctional Nursing Practice

August 2025

I was recently told that correctional nurses cannot be compassionate with their patients, to which I responded quite vigorously that it was clear that person did not know correctional nursing. We deliver healthcare to some of the most medically and socially complex patients, often within high-stress, high-security environments that require clinical skill, adaptability, and professional judgment. Each shift may bring encounters with patients challenged by addiction, untreated trauma, manipulative behaviors, severe mental illness, and the emotional weight of incarceration. Over time, the very qualities that drew us to nursing, empathy, presence, and compassion, can begin to fade under the weight of accumulated stress.

It may begin subtly. A fleeting eye-roll at a patient's complaint. A sarcastic remark in the nurse's station. A growing numbness while completing suicide watch assessments. These are not signs of failure, they are signs of *compassion fatigue* or creeping cynicism, and, while understandable, they can quietly undermine our ability to deliver safe, ethical, patient-centered care.

In the correctional setting, cynicism can masquerade as survival. We become guarded, cautious, even suspicious. There is no question that vigilance is necessary, but when suspicion overrides clinical curiosity, and detachment replaces compassion, our professional integrity suffers, and so do our patients.

### Recognizing the Shift

Cynicism and compassion fatigue often manifest in ways that feel familiar:

- Emotional numbness or detachment from patients
- Sarcasm or dismissive language about patient concerns
- A tendency to assume dishonesty or manipulation without assessment
- Avoidance of conversations that require emotional engagement
- A sense of hopelessness, exhaustion, or questioning whether any of it matters

These signs, often seen among correctional nurses, are reversible.

### Rebuilding Compassion

Compassion isn't a fixed trait; it is a professional skill and a mindset that can be cultivated, protected, and renewed. Correctional nurses don't need to sacrifice compassion to maintain professional boundaries. In fact, our ability to stay kind, present, and empathetic, without being naive or manipulated, is what sets us apart.

Here are a few strategies to reconnect with your compassionate self:

- **Pause and reframe.** Before reacting, remind yourself: *This person has a story I don't know yet.*
- **Stay curious.** Replace assumptions with assessment. What clinical information is missing?
- **Debrief constructively.** Regularly talk through emotionally difficult situations with trusted colleagues or supportive family.
- **Set boundaries, not barriers.** Being firm and kind are not mutually exclusive.
- **Reconnect with your "why."** Reflect on what led you to nursing, and why this work still matters, especially Behind the Wall.

### A Final Word

Correctional nursing demands so much from us—physically, emotionally, and ethically. It requires resilience, clinical skill, and emotional stamina. But in a system where judgment often comes faster than understanding, we have a radical responsibility: to care anyway.

It's easy to become discouraged or disengaged. But every time we choose to listen rather than dismiss, to assess rather than assume, and to care rather than detach, we uphold the very essence of nursing.

Reversing cynicism is not about sentimentality, it's about strength. The strength to stay human. The courage to stay kind. And the wisdom to know that compassion isn't just good for our patients, it is essential to our practice and our professional identity. Behind the Wall, compassion isn't weakness. It's power.

If these words resonated with you, consider sharing this with a colleague or discussing it at your next staff meeting. Let's support one another in remaining curious, connected, and compassionate.

**Newsorthy Notes - An Important Opportunity for you to have a positive impact on Correctional Nursing!!**

### CALL FOR CORRECTIONAL NURSES!

**Save the Date: September 4, 2025**

**Time: 6-8 PM EST | Location: Live Zoom Session**

Are you an **LPN, RN, or APRN** working in correctional healthcare? We need your expertise!

The American Correctional Nurses Association (ACNA) and Center for Correctional Nursing (C4CN) are partnering with the University of Iowa College of Nursing to update the National Nursing Intervention Classification (NIC) list for correctional nursing—something that hasn't been done in over 20 years!

We're seeking nurses with front-line experience in:

- Prisons, jails & detention centers
- Women's health & juvenile justice
- Mental health & addiction
- Education & leadership
- Geriatrics & chronic disease care

### Your role:

Conduct a brief pre-session review of the current 614 NIC interventions

Join a 2-hour Zoom session with breakout discussions

Help identify interventions specific to correctional nursing

Suggest additions and flag outdated or irrelevant content

Review and comment on a draft document

### Why it matters:

Your input will help refine the national scope of practice for correctional nursing. Let's make sure our work is represented!

### Sign up by August 22

Let us know you are interested by sending an email to either [curacna@gmail.com](mailto:curacna@gmail.com) or [c4cnursing@gmail.com](mailto:c4cnursing@gmail.com)

Materials & Zoom link will be sent to participants via email.

### Questions?

Contact: Dr. Deborah Shelton at one of the email addresses above.

Chair, ACNA Awards, Scholarships, and Research Committee

### Newsworthy Notes

#### Upcoming Conferences

[American Correctional Association](#) 155th Congress in Denver, Colorado, August 21-26, 2025.

[American College of Correctional Physicians](#) Annual Conference, "Locked Up, Leveled Up: Advancing Skills And Knowledge In Correctional Medicine." September 18 - 20, 2025 in Providence, RI

The [Western American Correctional Health Services Association](#) (WASCHA) will hold its Fall Conference "Shaping the Future of Healthcare in Carceral Settings" October 22 - 24, 2025 in Sacramento, CA.

[NCCHC](#) Fall Conference in Baltimore, MD will be held November 1-5, 2025.

### Newsworthy Notes

#### Call for Presentations

The American College of Correctional Physicians, which also includes Nurse Practitioners and Physician Assistants/ Associates presents monthly accredited webinars for its membership. As a member of its Virtual Education Committee, I have been asked to recruit nurse practitioners to present. There are opportunities for single topic presentations (1 hour) and presenting a 15 minute case study as part of a larger group. In the past, I have been a moderator of these sessions and I will share that they were very interesting and very well-received! So, if you are a seasoned presenter, or someone who has been thinking about starting, this is a great opportunity in a supportive environment! Please contact me or Dr. Mike Puerini ([ssnag@yahoo.com](mailto:ssnag@yahoo.com)) if you are interested.

## CorrectionalNurse.Net

This month at [CorrectionalNurse.Net](#) we will be discussing the clinical topics of ADHD in Corrections and Unintended Medication Effects and professional topics like the 2025 ANA Nursing Code of Ethics, Provision 6.

As always, announcements for new blog posts will be posted on our FaceBook pages and on Instagram.

Please [FOLLOW US](#) and check back often to ensure that you get notification of new posts!

[VISIT CORRECTIONALNURSE.NET NOW](#)

## Correctional Nurse Educator

Our 50% off featured class this month at [The Correctional Nurse Educator](#) is *Asthma I for the Correctional Nurse*. I hope you enjoy it!

Remember, The Correctional Nurse Educator will work with your group to provide quality, accredited continuing education classes at a discounted and affordable cost that are specifically for Correctional Nurses.

[VISIT THE CORRECTIONAL NURSE EDUCATOR NOW](#)

## Nursing Behind the Wall

This month at [Nursing Behind the Wall](#) you will meet Mr. Byrd, a gentleman with fatigue and joint aches.

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