IHCNO October 2026 Newsletter



IHCNO President's Message

I am pleased to announce that the following two IHCNO books are in production by Springer Nature with an expected 2027 copyright date. Both will be free open access to download and bound books available for purchase.

- International Home Care Nurses Organization. International Scope and Standards of Home Healthcare Nursing Practice. Approved by the American Nurses Association Board of Directors on 15 September 2026.

- Hinck, S.M. & Harris, M.D. (eds.). Global Best Practices in Home Healthcare Nursing: Endorsed by the International Home Care Nurses Organization (IHCNO). New title finalized 5 October 2026.

Thank you again to the hundreds of nurses around the world who have helped with these projects.

Dissemination of the research-based international scope and standards of home healthcare nursing practice continues.

- Kathy Duckett, Mary Narayan, and I will present EMR Designers Can Help Home Healthcare Nurses Deliver Better Home Health Nursing Care on October 27 at the national H3IT conference in Washington D.C. USA. IHCNO's International Scope and Standards of Home Healthcare Nursing will be introduced as a resource to develop nurse-friendly and patient-centered EMR systems that help nurses provide better home health, home care, and hospice patient outcomes. Kathy Duckett is on the steering committee of the Scope and Standards of Practice and Chair of the IHCNO Membership

Outreach Committee. Mary Narayan is the Chair of the IHCNO Scope & Standards Committee. They both serve on the IHCNO Board of Directors.

- IHCNO will present a research poster, Innovative Research to Promote Home Healthcare Equity Around the World at the Transcultural Nursing Society October 14-17, 2026, San Antonio, Texas, USA. The presentation will report on the 2 1/2-year research project that included hundreds of home healthcare nurses in 40 countries. Mary Narayan, Marilyn Harris, and I will attend this conference.

- Mary Narayan will represent IHCNO at the 2026 National Alliance for Care at Home Annual Meeting and Exposition with a poster presentation, Envisioning the Future of Home Healthcare Nursing, October 27-30 in Washington, D.C. USA. The poster will present strategies derived from the international scope and standards of home healthcare nursing that can support and retain nurses dedicated to achieving the highest attainable patient health, well-being, and outcomes.

Also, look for the upcoming IHCNO webinar November 13, 2026. Mary Narayan will discuss the Enhanced Nursing Process: Thinking Critically in Home Healthcare Nursing, which expands the nursing process and explains the importance of developing a therapeutic relationship with patients.

The IHCNO Board of Directors will elect new officers for 2-year terms as Vice President and Treasurer at its November 19 meeting. Nominations of colleagues and self-nominations are accepted by submitting a letter of interest that describes leadership within IHCNO as well as other professional accomplishments to info@IHCNO.org. Criteria for the Vice President includes one year of current or former service on the IHCNO Board of Directors.

I know you will find interesting information throughout this newsletter to help you grow in your career.

Susan Hinck, PhD, APRN, GCNS-BC
IHCNO President



Meet Two IHCNO DAISY Clinical Nurse Honorees

On Friday, October 2, 2026, the IHCNO, a Supportive Association of the DAISY Foundation, recognized two IHCNO DAISY Clinical Nurses for the incredibly meaningful difference each of them makes every day in the life of their patient, Jake, and his parents. Christy Dykes, Jake's mother, nominated **Barbara Hunter, LPN**, and **Rachel Meyer, LPN** for DAISY Awards. Honorees received the certificate, the DAISY statue, and a complimentary 1-year membership to IHCNO.

The following excerpts are from Christi's nomination narratives.

"Barbara Hunter, LPN, truly models the very best of nursing by consistently demonstrating empathy, a caring presence, exceptional clinical skill, and unwavering professionalism. For the past five years, she has cared for my son in our home, and during that time she has become not just his nurse, but a deeply valued and trusted member of our family.

The relationship she has built with my son, Jake, is extraordinary. Jake is blind, deaf, non-verbal, and confined to a hospital bed, yet she has developed a profound understanding of him that goes far beyond traditional communication. Through patience, consistency, and genuine compassion, they have created their own language. She often says that Jake knows all of her stories, and she knows all of his – an emotional connection that reflects her remarkable empathy and presence.

She demonstrates a calming, reassuring, caring presence in every interaction. It is common to find her sitting on the side of his bed with Jake gently propped against her, offering comfort simply by being there. She once said, "Jake just wants to know that I am here today." And that statement captures the essence of how she practices nursing - fully present, attentive, and emotionally invested. She loves him as if he were her own grandson, and Jake clearly feels secure and comforted in her care.

After five years of consistent, compassionate, and highly skilled care, she has become an integral part of our lives. She has established a deep, meaningful connection not only

with my son but with our entire family. She represents everything the DAISY Award stands for, and there is no one more deserving of this recognition."

"Rachel Meyer, LPN, is an indispensable part of our family and my son's care team. After five years in our home, I can say with certainty that I would not be able to function effectively as his caregiver without her. She consistently models empathy, professionalism, exceptional clinical skill, and an unwavering commitment to advocate for my son's needs.

She manages every aspect of his medications and medical supplies with meticulous attention to detail. She tracks refills, monitors expiration dates, and ensures nothing is ever over looked. Her organization and reliability provide a level of safety and stability that allows our household to function smoothly. She takes full ownership of these responsibilities with professionalism and pride.

What sets her apart is her fierce advocacy. She has spent countless hours on the phone with pharmacies, medical supply companies, and insurance providers, refusing to give up until my son received exactly what he needs. Her persistence, knowledge, and determination ensure continuity of care and prevent gaps that could easily become harmful. She advocates for him as if he were her own child.

Her clinical skill, calm demeanor, and compassionate presence were never more evident than during one of the most traumatic moments of our lives when Jake suffered a sudden and devastating leg fracture. Despite the shock of the situation, she remained calm and focused. She immediately called 911, stayed with him, and comforted him while he endured intense pain- never leaving his side.

At the hospital, even though every movement caused him distress, she continued to support him calmly and skillfully, assisting with the transfer into the helicopter that flew him to the appropriate trauma facility. Because of her competence and composure, my husband and I were able to leave and get to the receiving hospital ahead of him, fully confident that he was safe, comforted, and understood.

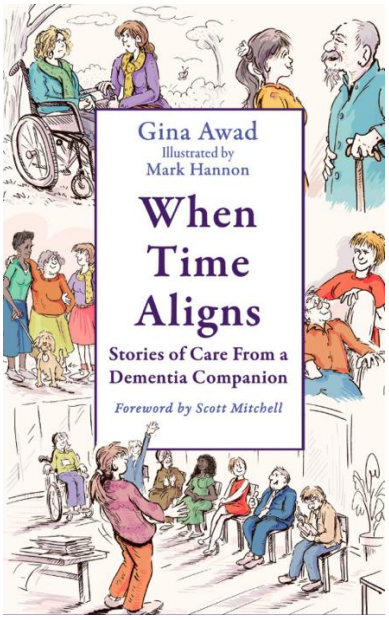
That trust exists because she, like my other nurse, has developed her own unique language with my son. Although he is blind, deaf, and nonverbal, she knows exactly what he needs through every scream, moan, or subtle grunt. Her ability to interpret his clues reflects deep empathy, experience, and an extraordinary connection.

She is not just a nurse caring for my son- she is his protector, his advocate, and a true partner to our family. After five years, she has earned our complete trust and become an essential part of our lives. She embodies everything the DAISY Award represents and is profoundly deserving of this recognition.

The IHCNO Board of Directors congratulates Rachel and Barbara on their IHCNO DAISY Clinical Nurse Awards.


IHCNO DAISY Award®
For Extraordinary Nurses
Rachel Meyer, LPN
IHCNO DAISY Award®
For Extraordinary Nurses
Barbara Hunter, LPN
The DAISY FOUNDATION
HONORING NURSES INTERNATIONALLY
IN MEMORY OF J. PATRICK BARNES


The DAISY FOUNDATION



Book Review: When Time Aligns

Gina Awad, illustrated by Mark Hannon (Robinson, 2026)

Gina Awad, who was awarded a British Empire Medal for her work supporting people with dementia in Devon (UK), has written a book that will be useful to home-based nurses across the world, who are trying to navigate the challenges of supporting someone with dementia. *When Time Aligns* tells the stories of families living with dementia through the voice of Sienna, a companion who visits and supports them. There is no medical language and each short chapter shows what good and effective community support looks like. There are practical tips on communication, planning ahead, and finding the right help, almost without realising you are learning them.

The book has already been well received by care partners, professionals working in the field, and people living with dementia themselves, a rare combination that speaks to how effectively the book captures the experience from all angles.

The stories cover many different cultures, family situations and types of dementia, including some that are rarer and less well known. Whatever country or setting you work in, you are likely to recognise someone in these pages. The illustrations are warm and add real feeling to each story, and a glossary at the back makes it easy to look things up, although the help sources are generally UK based. However, many countries now have or are in the process of setting up similar support options.

This is a short, easy read that is recommended for anyone who supports people with dementia and those close to them, wherever in the world they are working.

To purchase, please follow the link When Time Aligns

Dr. Jane Murray, Associate Professor
Northumbria University

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Dr Jane Murray | LinkedIn



Advocacy Committee Update

This month, Jane Murray will be representing the IHCNO Advocacy Committee at the Singapore Experience Exchange with Patient Organisations. This year's SEEPO Symposium is entitled The Advocacy Blueprint: From Lived Experience to Systemic Impact. Look out for a report in the next newsletter!

Building on the momentum described in last month's newsletter, the Advocacy Committee has drafted a set of working definitions to underpin our advocacy agenda and the policy brief/toolkit we are developing alongside the forthcoming International Standards for Home Healthcare Nursing Practice. Before we finalise them, we want to hear from members. Please take a look at the definitions below and let us know whether they resonate. Are you comfortable with the proposed IHCNO definition? Please provide feedback via the QR code below (anonymous) or by emailing jane.murray@northumbria.ac.uk. Please feel free to recommend changes or make suggestions of your own.

Advocacy (general): The act or process of pleading for, supporting, or recommending a cause or course of action (Ernstmeyer & Christman, 2024, drawing on the American Nurses Association).

Advocacy in nursing: A core professional responsibility in which nurses protect client rights, voice client needs, and influence health policy at local, national, and global levels (Ernstmeyer & Christman, 2024); the International Council of Nurses' definition of nursing itself names advocacy as a key nursing role (ICN, 2002).

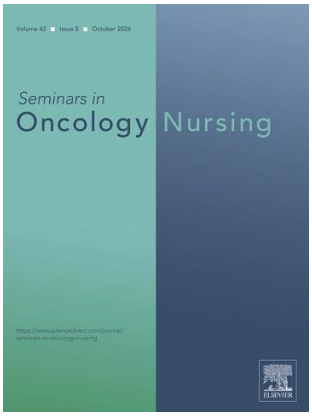
Advocacy for home-based nursing (HBN): We extend the above to three levels specific to home care – patient-level (safe, quality care in the home), practice-level (nurses' scope of practice matching their education and competence), and systems-level (employers, payers, and regulators recognising and funding that scope). This working

definition should be revisited once the International Standards for Home Healthcare Nursing Practice are published.

IHCNO working definition: Acting for and on behalf of patients, families and care partners as well as for nurses and the nursing profession itself. Advocacy operates at three levels: patient-level (safe, quality care in the home), practice-level (nurses' scope of practice matching their education and competence), and systems-level (employers, payers, and regulators recognising and funding that scope).

This working definition will be revisited and revised according to the membership feedback.

Dr. Jane Murray, Associate Professor
Northumbria University
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Dr Jane Murray | LinkedIn



Member Publication Spotlight: Tihana Gašpert

Congratulations to **Tihana Gašpert**, member of the IHCNO Board of Directors and doctoral student at the Faculty of Health Sciences, University of Maribor, together with researchers Prof. Gregor Stiglic, PhD, and Assoc. Prof. Dominika Vrbnjak, PhD has co-authored the scientific article: **Navigating psychosocial challenges during cancer hospitalization: A qualitative study.**

The article has been published in **Seminars in Oncology Nursing** and explores the psychosocial challenges experienced by patients during cancer hospitalization, providing valuable insights for nursing practice and patient support.

The publication is available here:
https://www.sciencedirect.com/science/article/pii/S0749208126001804?via%3Dihub=

👏 Congratulations to the authors on this important scientific contribution!

Gašpert T, Štiglic G, Vrbnjak D. Navigating psychosocial challenges during cancer hospitalization: A qualitative study. *Seminars in Oncology Nursing*, 42(5), 2026, 152300, https://doi.org/10.1016/j.soncn.2026.152300.



Member News: Artur Carvalhinho

The Integrated Responsibility Center for Hospital at Home (*Centro de Responsabilidade Integrado da Hospitalização Domiciliária - CRI-HD*), under the leadership of the Management Board composed of **Artur Carvalhinho**, Ana Catarina Lucas and Rosário Reis, has been selected as one of the 10 finalists for the prestigious 17th Manuel António da Mota Award (2026 Edition). EDIÇÃO EM CURSO (2026) | FMAM

Our institution, Unidade Local de Saúde de Coimbra, E.P.E., was recognized for the innovative "Move + at Home" project, coordinated by Nurse Luís Fernandes, a project of CRI-HD.

This year's award edition, under the theme "*Sempre Solidários*" (Always Solidary), highlights initiatives that excel in social cohesion, healthcare innovation, digital inclusion, and community support. Being named among the 10 finalists out of applicants across Portugal is a testament to our team's dedication to advancing quality, patient-centered care directly in patients' homes.



IHCNO Member News: Gary Hicks-Clayton

Congratulations to **Gary Hicks-Clayton, DNP, RN, CNP, AGPCNP-BC, CRRN**, elected as a **Missouri Nurses Association Leadership Fellow**. Dr. Hicks-Clayton is an Adult-Gerontological Primary Care Nurse Practitioner with diverse experience in nursing leadership, critical care, home care, hospice, and rehabilitation nursing. He is a Palliative Care Nurse Practitioner with BJC Health System and serves as Clinical Adjunct Faculty at Rockhurst University and Park University. Through the fellowship, he will further develop his leadership skills, engage in professional advocacy, and contribute to advancing nursing practice across Missouri.



IHCNO Member News: Dawn Hohl

Congratulations to **Dawn Hohl, Ph.D., M.S., B.S.N., R.N.**, on her appointment as **Vice President and Chief Nursing Officer for Johns Hopkins Care at Home**, effective October 5. This newly created role recognizes Dawn's more than 20 years of leadership at Johns Hopkins Care at Home and her commitment to advancing high-quality, patient-centered care across the transition from hospital to home.

In her new role, Dawn will provide strategic nursing leadership focused on patient outcomes, quality, patient experience, workforce development, and alignment with the broader Johns Hopkins Health System. A longtime advocate for clinical-academic collaboration, Dawn is also actively engaged in research, mentorship, and advancing the evidence base for home-based care.

IHCNO congratulates Dawn on this well-deserved appointment and looks forward to her continued leadership in advancing home care nursing.

Learn more about some of the innovative work Dawn led in her prior role as Executive Director of Transitions for Patient Care Experience with Johns Hopkins Care at Home in these episodes from Johns Hopkins Medicine Podcasts archive:

Episode 54: Inquiry for Home Care Nurses | Johns Hopkins Center for Nursing Inquiry
https://podcasts.hopkinsmedicine.org/episode-54-inquiry-for-home-care-nurses/

Episode 61: Getting Started in Inquiry Work | Johns Hopkins Center for Nursing Inquiry https://podcasts.hopkinsmedicine.org/episode-61-getting-started-in-inquiry-work-johns-hopkins-center-for-nursing-inquiry/



2026 International Day of Older Persons

Join the global community in recognizing the 2026 International Day of Older Persons on 8 October. This year's United Nations theme, "The Age of Longevity: Rethinking Systems for Longer Lives," highlights how societies can adapt to longer lives and ensure that added years are healthy, productive, dignified, and equitable.

For the IHCNO community, the theme is especially relevant to the role of home- and community-based nursing in creating systems of care that support older adults to live well, maintain independence, and receive high-quality care where they live.
Learn more about the 2026 International Day of Older Persons:
https://social.desa.un.org/issues/ageing/events/2026-unidop





Column: Healthy Ageing & Care of Older Persons

COMMUNITY-BASED SUPPORT FOR OLDER PEOPLE IN CONFLICT-AFFECTED EASTERN DRC: THE EXPERIENCE OF ELDERS ASSISTANCE ASBL

By Patient Bulambo, IHCNO Member

In eastern Democratic Republic of Congo, older people face interconnected challenges, including social isolation, limited access to healthcare and basic services, poverty,

displacement and the effects of prolonged conflict. At ELDERS ASSISTANCE ASBL (Association Sans But Lucratif, a non-profit organization) we work with older people across South Kivu to strengthen their dignity, social inclusion, wellbeing and participation in their communities. Our approach is rooted in community engagement, working with older people, families, community relays, local leaders and other local leaders and other community-based partners to identify needs, provide support, facilitate referrals and ensure that older people's voices are heard.

Working with Communities: Bringing Support Closer to Older People

Our work begins where older people live. Rather than waiting for them to reach formal services, we work with community-based actors who can identify needs, maintain contact, listen to older people and their families, and facilitate referrals when necessary. When older people require services beyond what can be provided at community level, our team and community relays facilitate referrals to appropriate services. Depending on the situation, this may include Panzi General Referral Hospital for medical care, the Panzi Legal Clinic for legal and protection support, particularly in cases involving accusations of witchcraft, and the SOSAM Centre in Karhale for mental health and psychosocial care.

Community relays are central to this approach. They include community leaders, women and men from local communities, young people and other trusted actors who understand local realities. Their proximity enables them to identify isolation, vulnerability, health concerns and social difficulties that might otherwise remain unnoticed.

This approach is particularly important in rural and hard-to-reach communities, where distance, poverty, insecurity and limited services can make access to formal care difficult. For us, community-based support does not replace professional health and social services; it creates a bridge between older people, families, communities and available services, including homebased nurses.

Home-Based Nursing and Community Support

Home-based nursing care in South Kivu remains limited and is not yet available as a structured service for older people in the communities where we work. ELDERS ASSISTANCE has two nurses who contribute to community-based support, follow-up and guidance, while community relays help identify older people who may need care and facilitate contact with health services.

Home-based and community care can become particularly challenging during infectious disease outbreaks. In 2026, the Ebola outbreak caused by Bundibugyo virus affected several provinces of the Democratic Republic of Congo, including North Kivu and South Kivu. In South Kivu, cases were reported in one health zone, including the Katana area of Kabare Territory, while North Kivu experienced a much wider spread. For community nurses and other frontline health workers, such outbreaks can create additional risks related to infection prevention and control, community mistrust, movement restrictions,

safe referral and contact with patients and families. These challenges underline the importance of appropriate training, protective measures, community engagement and strong links between community-based care and the formal health system.

When needs go beyond what can be addressed at community level, older people may be referred to appropriate health, psychosocial or legal services. Distance, transport costs, poverty and insecurity continue to limit access to both facility-based and home-based care, highlighting the need to strengthen community-linked nursing and home care services for older people.

When Access to Care Becomes a Challenge

Access to healthcare remains a major challenge for many older people in the communities where we work. Even where health facilities are available, the cost of consultations, medicines and transport can prevent older people from seeking care. In rural and remote areas, distance and transportation difficulties add further barriers.

For an older person living alone or with limited family support, reaching a health facility can become particularly difficult. Community relays therefore help identify concerns, provide basic orientation and facilitate referrals to appropriate health or social services. Our team also provides psychosocial listening and follow-up and helps connect older people with available services when appropriate.

Improving access to care requires strong links between older people, families, communities and professional services, so that support can reach people as close as possible to where they live.

Understanding Memory Loss and Dementia in the Community

Another important aspect of our work concerns how communities understand memory loss among older people. Through our community work in South Kivu, we have encountered situations in which changes in memory, behaviour or orientation are poorly understood. In some rural and peri-urban settings, memory loss may be interpreted through cultural, spiritual or supernatural explanations, including beliefs related to witchcraft, curses or punishment for violating social or cultural norms.

Such interpretations can contribute to blame, stigma and social isolation, and may discourage families from seeking appropriate help. Our experience has shown us that dementia awareness must therefore be adapted to the social and cultural context in which older people live.

Community relays, local and faith leaders, families and older people themselves can all contribute to better understanding and reduced stigma.

Raising awareness about dementia is about protecting dignity So that an older person experiencing memory lossis met with understanding, respect and appropriate support.

Giving Older People a Voice

Older people should be respected as individuals with knowledge, experience, opinions and valuable contributions to make within their families and communities.

Through community visits, interviews and conversations, we create opportunities for older people to share their experiences and aspirations in their own words. One practical example is the installation of a LUHOKO Story Bench in Mudusa Groupement, Kabare Territory. The Story Bench provides a community space where older people can sit, talk, share memories and experiences, and be listened to.

In Mwenga Territory, in the locality of Lwindi, we have also supported a BARAZA la WAZEE, a community gathering space for older people. This initiative is particularly meaningful in a community where older people have lived with the psychological consequences of the Kasika massacre. Bringing them together creates opportunities to share experiences, strengthen social connections and identify needs requiring further psychosocial or other support.

Our community-based research has reinforced this listening approach. Working with community relays and local actors, we have documented experiences, needs and personal testimonies from older people in urban, peri-urban and rural settings. What people tell us helps inform our awareness activities, psychosocial support, referrals, community interventions and advocacy.

Building Local Capacity for Sustainable Support

We have also invested in strengthening our own capacity through training and collaboration. Our team and community relays have participated in learning activities related to ageing, community-based assessment and psychosocial support. Community volunteers have also been trained to use an adapted ICOPE approach to identify health and functional concerns among older people.

Capacity building remains an ongoing need. Community actors require practical knowledge, continued mentoring and opportunities to exchange experiences with professionals and organizations working on ageing and older people's care.

Connecting Community Experience with Global Learning

Our experience in South Kivu has taught us that supporting older people requires listening, proximity, respect and collaboration. Community-based action cannot replace professional health and social services, but it can help connect older people with those services and ensure that their experiences are not overlooked.

We value opportunities to learn from colleagues working in home based nursing and healthcare while sharing lessons emerging from our own communities.

Through our engagement with the IHCNO, we hope to contribute to this exchange of knowledge and experience. We believe that the voices of older people in Eastern DRC can contribute to wider conversations about dignity, inclusion and community-based support for ageing populations.

ANNEXE PHOTOS

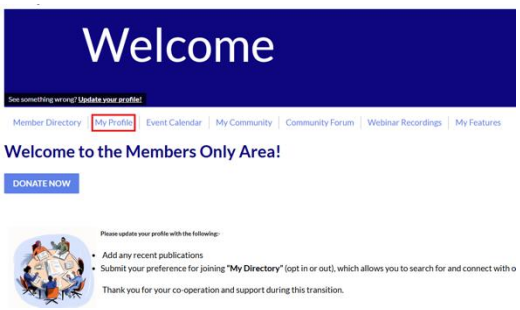








Photo consent: Verbal consent was obtained from the individuals photographed for the use and sharing of these photographs in connection with ELDERS ASSISTANCE ASBL's communication and the IHCNO Newsletter.



Welcome New IHCNO Members!

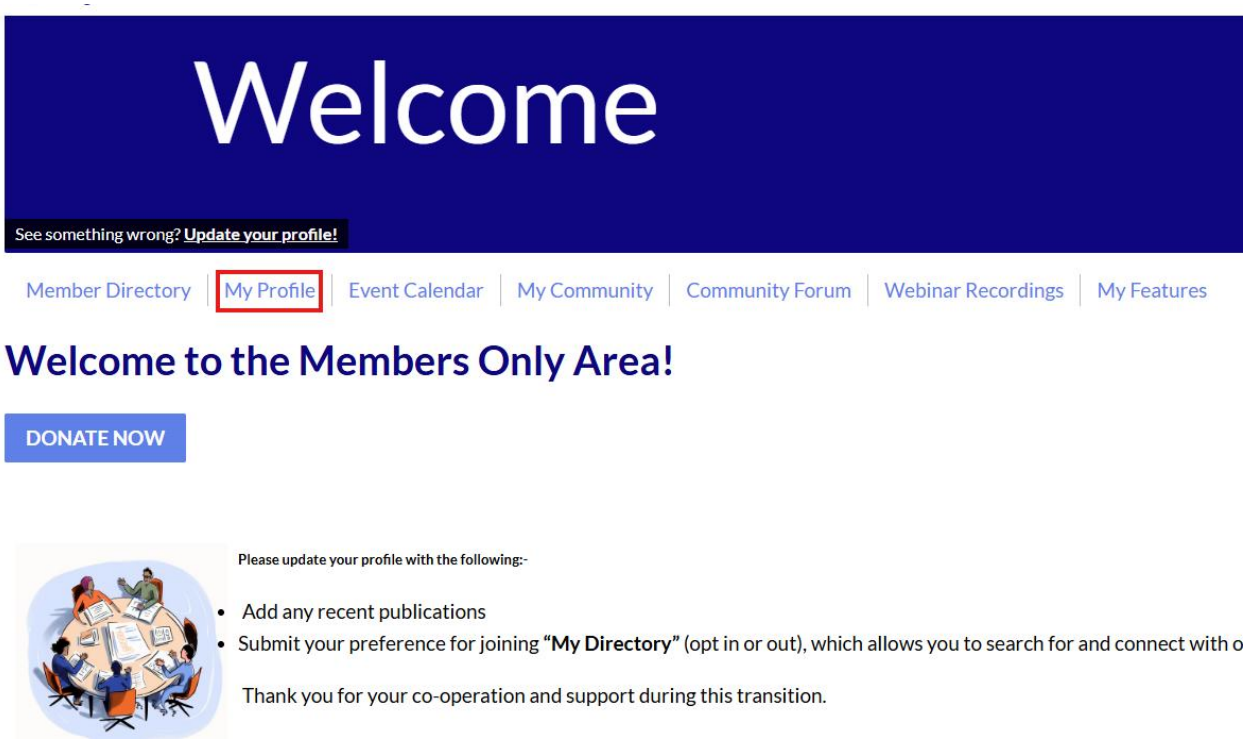
We are delighted to welcome 87 new members who joined IHCNO in June, July, and August.

Our newest members are affiliated with universities, healthcare systems, professional organizations, and community-based services across 15 countries: Australia, China, the Democratic Republic of Congo, Ghana, Greece, Hungary, Indonesia, Japan, Nigeria, the Netherlands, Portugal, Saudi Arabia, Singapore, the United Kingdom, and the United States. Your diverse perspectives and experiences continue to strengthen IHCNO's global community and our shared commitment to advancing nursing care in the home.

To help us get to know you and better serve our members, we encourage everyone to keep their membership profile up to date. If you joined IHCNO through your conference registration and have not yet updated your profile, please take a few minutes to do so.

Simply visit **IHCNO.org**, click **Member Login** in the upper-right corner, sign in, then navigate to **Member Home > My Profile** to review and update your information.
If you have any questions or need assistance, please contact us at **info@IHCNO.org**.

We're excited to have you as part of the IHCNO community and look forward to connecting with you!





Publish your work in the *British Journal of Community Nursing*

The *British Journal of Community Nursing* (BJCN) welcomes submissions from members of the International Home Care Nurses Organization (IHCNO). We are keen to publish high-quality research, quality improvement projects, clinical practice articles, service evaluations, case studies, personal reflections, and policy and opinion pieces that advance community and home care nursing practice.

Whether you are an experienced author or preparing your first manuscript, we warmly encourage you to submit your work. New authors are especially welcome, and our editorial team is happy to support you throughout the publication process.

We also welcome submissions from colleagues around the world. International perspectives are invaluable in helping us share innovative practice, research, and learning across diverse healthcare settings.

There are **no article processing charges (APCs) for standard publication** in BJCN. For authors who wish to publish their work as **Open Access**, discounted APC rates are available.
If you have an idea for an article but are unsure where to start or would like to discuss whether your work is suitable for the journal, please don't hesitate to get in touch. We look forward to receiving your submissions and showcasing the excellent work being undertaken by the global community nursing workforce.

Rida Fazal
Editor
rida.fazal@markallengroup.com



Home Healthcare Now IHCNO Column

Home Healthcare Now (HHN) Author Guidelines

Home Healthcare Now is an interprofessional journal published 6 times/year. Articles include practice-oriented clinical articles, original research, literature reviews, quality improvement projects, innovative approaches to patient care, and case studies. Each issue contains a continuing education article than offers nursing continuing professional development (NCPD).

Manuscripts
Manuscripts for submission should be original work, no more than 4,000 words and follow the guidelines of the Publication Manual of the American Psychological Association (APA) 7th edition.

All manuscripts undergo peer review. Query letters are welcome but not required. Email the editor Lisa Gorski, MSN, RN, HHCNS, CRNI, FAAN, Editor-in-Chief at lisagorskirn@gmail.com.

Columns

International Home Care Nurses Organization (IHCNO) Column
Each issue includes a 600-word IHCNO column. This column invites home care nurses from around the world to share their experiences. Please email Marilyn Harris who coordinates the IHCNO columns at mharris555@verizon.net for more information and timeline for submission for each issue. Thank you.

"A Day in the Life of..." We want to hear from home healthcare clinicians (therapists, social workers, nurses, patient care assistants and volunteers) who work in a variety of geographical settings with diverse patient populations. From Manhattan high rises to mountain villages and island communities, across the United States and around the world, tell us about a typical workday. How do you meet the unique needs of the people you serve? What have they taught you? Manuscripts should be one page (approximately 600 words) or two pages (1100 words).

Commentary
This column can be about any issue of importance to home care clinicians such as legislation, current trends, professional issues, an unforgettable patient etc. Submissions should be no more than 600 words.

Consult PRN
Are you familiar with a topic that is often misunderstood by your co-workers? This column educates readers on a variety of patient care/management issues. Manuscripts should be no more than 1100 words. Email the editor, Lisa Gorski, if you have an idea for this column.

Submissions are through https://www.editorialmanager.com/nhh/

IHCNO Memories



Planning Committee 2012

Help Us Plan IHCNO 2027

A 20-Year Arc, a 10-Year Incorporation Anniversary: Help Us Plan 2027

As IHCNO approaches the 10-year anniversary of its incorporation in 2027, we are gathering the photos, newsletters, conference programs, and member memories that tell the fuller story of nearly two decades of organizing, connection, and global home care nursing leadership.

Where we started

The story of the International Home Care Nurses Organization (IHCNO) didn't begin with a vote or a press release. It began with reader letters. In 2008, a small group of home healthcare nurses responded to editorials in Home Healthcare Nurse arguing that home care nurses "NEED a professional organization." In March 2009, then-Editor-in-Chief Tina M. Marrelli published a survey-driven editorial proposing the International Home Care Nurses Organization, and by November 2009, with co-leadership from Elizabeth A. Madigan, IHCNO was operating as a grassroots, volunteer-driven "meeting place."

In 2017, IHCNO took the next step: it was incorporated as a 501(c)(3) nonprofit, and that same year it published the International Guidelines for Home Health Nursing. That incorporation milestone is what we will mark in 2027 – a 10-year incorporation anniversary sitting inside a broader 20-year arc of ideas, organizing, and global home care nursing leadership.

What we want to celebrate in 2027

The plan for 2027 is not just to look back, but to honor the people and partnerships that made the past two decades possible and to set up the next ten years. Anniversary activities under discussion include:

- A member-curated visual history of IHCNO's five global conferences: Cleveland 2013, Singapore 2014, Chicago 2015, Singapore 2024, and London 2026.
- Short oral history interviews with founding-era leaders and longtime members.
- A timeline of the International Guidelines (2017), the Scope and Standards collaboration with the American Nurses Association (2024), and the New (2026) Scope and Standards update.
- A celebration of the Marilyn D. Harris Research Grant and its eight international recipients (2019–2027).

- A reflection on partnerships with the DAISY Foundation, the International Council of Nurses, Nursing Now, Home Healthcare Now, The British Journal of Community Nursing, Springer Nature, EBSCO Dynamic Health, the Tsao Foundation, International Collaboration for Community Health Nursing Research, the Association of District Nurse and Community Nurse Educators, and university hosts from Case Western Reserve to the University of Illinois-Chicago, City St George's, University of London, and beyond.

How members can help

This is a members' project. The richest sources of IHCNO history are not in databases – they're on members' hard drives, in inboxes, in conference tote bags, and in the memories of nurses who were in the room.

How members can help build the history

We are actively collecting:

- Photos from any IHCNO conference, webinar, or partner event (including, Cleveland 2013, Singapore 2014, Chicago 2015, Singapore 2024, London 2026).
- Past IHCNO newsletters, especially from the 2009–2015 founding era.
- Conference programs, abstract books, posters, and presentation slides.
- Personal memories: how you found IHCNO, what a conference or webinar meant to you, mentors you met, projects that grew out of an IHCNO connection.
- Press clippings, institutional newsletters, and partner-organization mentions of IHCNO (DAISY Foundation, Tsao Foundation, university schools of nursing, ministries of health).

How to send materials: Email digital files, scans, videos, or photographs with a short note with the year, event, names of people in the photo if known, and your permission for IHCNO to use the material in anniversary communications.

Questions or materials? Email Olga Jarrín (IHCNO Secretary) at olga.jarrin@rutgers.edu



Connect With IHCNO on Social Media (Please!)

🌎 Stay connected with the **International Home Care Nurses Organization (IHCNO)** on social media! Let's network and help share and promote your news, events, and accomplishments.

Find us on:
LinkedIn (page): IHCNO
Instagram: @ihcno_nurse
X (Twitter): @IHCNO_Nurse
Facebook (page): International Home Care Nurses Organization



IHCNO Membership Subsidy

Do you need financial assistance to cover the cost of the IHCNO membership fee? IHCNO can provide a subsidy for up to 90% of the annual membership fee for nurses in low- or middle-income countries, as designated by the World Bank, who find it difficult or impossible to pay the full membership fee.

IHCNO values the knowledge, skills, and contributions of home care nurses everywhere in the world. We recognize that financial disparity between countries may prevent individuals from participating in member activities and benefits.

The subsidy is available for new members or membership renewal.

The IHCNO membership subsidy is furnished on a confidential basis.

The IHCNO membership subsidy is funded by donations. Subsidies are available as funds are available.

The World Bank countries are listed here: https://datahelpdesk.worldbank.org/knowledgebase/articles/906519-world-bank-country-and-lending-groups

Contact info@IHCNO.org to obtain an application form that asks for your name, address, and attestation that you do not have the means to pay your annual membership fee in entirety. You will be notified within 10 business days of your approval.



IHCNO DAISY Award

Nominate a Nurse today!

Nominate an Extraordinary Nurse Leader today! Celebrate nursing leadership and excellence in home-based nursing care by nominating a clinical nurse or nurse leader for a DAISY award.

IHCNO Extraordinary Home Care Clinical Nurse Criteria:

- Models empathy and demonstrates a caring presence in all situations.
- Demonstrates excellent clinical skills in the delivery of compassionate patient care.
- Demonstrates professionalism in the work environment.

- Establishes a special connection with the patients and families.

To nominate someone for the IHCNO DAISY Nurse Award you must use this form:

https://app.roundsplus.getwellnetwork.com/SurveyAction/SurveyGo/xjvBd5ceWj6Sz?u=IHCNO

IHCNO Extraordinary Nurse Leader Nomination Criteria:

- Nurse Leader creates an environment where attributes of trust, compassion, mutual respect, continued professional development and ethical behaviors are modeled and supported.
- Nurse Leader is accessible, available, and responsive to the needs of their team.
- Nurse Leader uses problem-solving, encourages critical thinking and advocates for their team.
- Nurse Leader ensures the needs of the team are communicated to organization leadership, organizes priorities and directions are communicated to their team.
- Nurse Leader is a compassionate leader

To nominate someone for the IHCNO DAISY Award you must use this form:

https://app.roundsplus.getwellnetwork.com/SurveyAction/SurveyGo/xjvBd5ceWj6Sz?u=IHCNONurseLeader

Photo: IHCNO Board Member Sister Fong Yoke Hiong & IHCNO Treasurer Dr. Marilyn D. Harris sharing information about the IHCNO DAISY Awards at the IHCNO 5th Global Conference in London, June 2026

SHARE THE GOOD NEWS

Share YOUR News

Email olga.jarrin@rutgers.edu (IHCNO Secretary) by the 25th of each month with your accomplishments, new initiatives, programs, successes, recognitions, and invitations to collaborate for inclusion in our Member News column.
