

JEMH News Update

- i. New publishing protocol: The JEMH is now publishing submissions using an “Open Volume” format. This means articles will be identified by publication date rather than by a particular volume and issue number.
- ii. Sponsorship from the Scattergood Behavioral Ethics Program at the University of Pennsylvania (Philadelphia PA, USA): In addition to co-sponsorship of our two most recent conferences, the Scattergood Ethics Program is also providing essential financial support that is deeply appreciated. (The JEMH does not accept any private industry funding.)
- iii. Farewell and thank you to two International Editorial Board members: Piers Allott and Philip Meredith. Welcome to Michael Robertson.
- iv. Changes to the Editorial Committee: Farewell and thank you to Barbara Russell, especially for assuming the role of Senior Editor over the past year. Welcome to Mona Gupta and Dominic Sisti.
- v. Welcome to our new Contributing Editor, Tim Krahn, and to our new Copy Editor, Amanda Ye.
- vi. Upcoming JEMH conferences: Cobourg , Ontario, Canada 2015 Kamloops, British Columbia, Canada 2016
- vii. Three new recurring features in the Frontline Perspectives section:

ACT Thoughtfully

In 2006 this journal published a series of 23 ethics vignettes looking at real issues that arise on Assertive Community Treatment (ACT) teams. The series editors have continued to collect real case reports and over 40 vignettes are now included in this feature, with more to come as the years go by.

The Crossroads Chronicles

Set in the fictional Canadian city of Crossroads, Saskatchewan, with a population of 100,000 people, this feature follows the work of the Ethics Committee of a community mental health organization (CMHO) that provides services within a larger catchment area of 500,000. The cases, reflections, and reports are all real. The content has been modified to protect identities and maintain anonymity.

In the Corridors

Clinicians who are situated within mental health services and institutions offer ethical reflections on clinical culture, politics, power, and decision making. The situations are real but pseudonyms are used and the content has been modified to protect identities and maintain anonymity.

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