

PRACTICE



Transforming attitudes towards aging in 2018



COLLEGE OF
LICENSED PRACTICAL NURSES
OF NEWFOUNDLAND AND LABRADOR
LPNS - A PRACTICAL APPROACH TO QUALITY CARE

Volume 3, Issue 2 – June 2018

PRACTICE

The College of Licensed Practical Nurses of Newfoundland and Labrador PRACTICE magazine includes a wide array of information on nursing regulation, nursing licensure, nursing practice and many other health related topics. PRACTICE is published electronically three times a year. CLPNNL welcomes feedback, suggestions and submissions from readers on this publication at wsquires@clpnnl.ca.

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PRACTICE, presented by CLPNNL

Design & Layout: Kimberly Puddester

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MISSION

The College of Licensed Practical Nurses of Newfoundland and Labrador (CLPNNL) protects the public through the promotion of efficient, ethical nursing care, regulation of licensed practical nursing practice, the licensure of Practical Nurses and setting the strategic direction for the organization.

VISION

To foster a professional environment where Licensed Practical Nurses (LPNs) are respected, valued as integral members of the nursing team and provide quality health care services in Newfoundland and Labrador.

VALUES

We Believe:

- Licensed Practical Nursing practice is founded on professionalism, compassion and caring;
- Licensed Practical Nurses are accountable for their actions;
- Licensed Practical Nurses take responsibility for lifelong learning aimed at building and maintaining professional competency; and
- Partnerships with key stakeholders are essential to enhancing the profession.

The CLPNNL has the legislative responsibility for regulating the practice of LPNs in Newfoundland and Labrador. In doing so, it serves to protect the public. It supports the Vision and promotes the Values of LPNs by providing leadership and supporting the integrity of the profession.



COLLEGE OF
LICENSED PRACTICAL NURSES
OF NEWFOUNDLAND AND LABRADOR
LPNS - A PRACTICAL APPROACH TO QUALITY CARE

Happy Retirement

After 20 years of dedicated service, Paul Fisher has retired as Executive Director/Registrar of the College of Licensed Practical Nurses of Newfoundland and Labrador. Paul is known for his enthusiasm, passion and dedication to nursing regulation and his focused commitment to advance the practice of Licensed Practical Nursing in the public's interest.

Paul's vision of what LPN practice should and could look like, and what self-regulation means in the interest of public protection, was front and center in his leadership and decision making.

Paul played a significant role in the creation of the LPN Act (2005) and the Regulations (2011) which reflect both CLPNNL's and government's commitment to ensure protection of the public interest in the regulation of LPNs in Newfoundland and Labrador.

Paul was a driving force in the advancement of LPN Scope of Practice, beginning with changes in PN education to ensure that LPNs had the entry-level competencies that they needed to provide safe, effective, and competent care.

Paul also impacted practical nursing nationally through his contribution to the Canadian Council of Practical Nurse Regulators (CCPNR) and the National Nursing Assessment Service (NNAS).

The CLPNNL Board thanks Paul for his many years of committed service in the regulation of LPNs in the province and for his significant contribution to the profession at the national level.

Paul, thank you, and best wishes for health and happiness for the future!



Paul Fisher

APPOINTMENT OF CHIEF EXECUTIVE OFFICER/REGISTRAR

The College of Licensed Practical Nurses of Newfoundland and Labrador (CLPNNL) is pleased to announce the appointment of Ms. Wanda Wadman to the position Chief Executive Officer/Registrar.



Wanda Wadman

Wanda brings nursing expertise and extensive experience in management, education and regulation to her new role. Wanda was Director of Professional Practice and Policy at CLPNNL from 2015-2017 and previously served on the Board of Directors of CLPNNL for sixteen years. During her term on the Board, Wanda gained valuable experience in the conduct review process as a member of the Complaints Authorization Committee and also represented the LPN profession on provincial, national and international initiatives. As a nurse educator at the Centre for Nursing Studies, Wanda was a member of the provincial PN Advisory Committee and the PN Admissions Committee. Her many years of experience as the NL representative on the Canadian Practical Nurses Registration Examination (CPNRE) Competency, Blueprint and Exam Committees will also serve her well as she leads CLPNNL over the coming years.

Wanda is a graduate of the Grace Hospital School of Nursing, with a Bachelor of Nursing degree from Ryerson University and a Masters of Nursing from Memorial University. Her subsequent successful career experiences, ability to develop strong partnerships and commitment to regulatory excellence make her uniquely qualified to advance the regulation of LPNs in our province as the Chief Executive Officer/Registrar of CLPNNL.

Wanda is excited to continue the work of CLPNNL in this role and looks forward to working with the Board, staff and LPN members to advance the CLPNNL mission of protecting the public by actively promoting safe, competent and ethical nursing care.

We extend a warm welcome to Wanda as she assumes her new role.

NOTICE OF THE ANNUAL GENERAL MEETING OF THE COLLEGE OF LICENSED PRACTICAL NURSES OF NEWFOUNDLAND AND LABRADOR

The Annual General Business Meeting will be held on June 15, 2018, at 2:00 p.m. at 209 Blackmarsh Road, St. John's, NL.

Agenda for the Annual General Business Meeting:

- Presentation of the Annual Report
- Approval of the Financial Statements and Auditor's Report for 2017/18
- Presentation of Awards of Excellence

If you plan to attend the Annual General Meeting, please RSVP to the College office (Glenda Hayward) at 709-579-3843 ext. 200 or ghayward@clpnnl.ca by June 8, 2018.



PARTICIPATE IN CLPNNL COMMITTEES, WORKING GROUPS AND LIAISON PROGRAMS

The CLPNNL is continually seeking LPNs to provide valuable input into committees and working groups. If you would like to contribute to your profession by participating in the work of the CLPNNL, please send your name confidentially to Wanda Squires at wsquires@clpnnl.ca.

The CLPNNL Liaison Program was developed to provide Liaison LPNs the opportunity to work with the CLPNNL Board and staff through the sharing of information. Liaisons are volunteer LPNs who have agreed to provide information to their workplace colleagues and provide the CLPNNL with communication from these colleagues. The Liaison LPNs provide a valuable service to the CLPNNL by posting important information in the workplace regarding elections, new documents, policies, position statements, education sessions, National Nursing Week, practice awards and CLPNNL services. These are just a few of the means by which Liaison LPNs assist the CLPNNL and its members. The CLPNNL would like to extend a warm thank you to all Liaisons for their commitment to the LPN profession.

The CLPNNL is currently seeking Liaison LPNs for the following sites:

- Presentation Convent
- Kenny's Pond Retirement Home
- Dr. Charles A. Janeway Health and Rehabilitation Centre
- Carbonear Long Term Care Facility (1 of 2 positions presently filled)
- Caregivers – St. John's

If you would like to become the Liaison LPN for one of these sites, please contact Wanda Squires at wsquires@clpnnl.ca.

REMINDER: KEEP YOUR INFORMATION UP-TO-DATE!

Under the College of Licensed Practical Nurses of Newfoundland and Labrador By-Laws (2014) Section 34 – Accuracy of Personal Information – all LPNs are required to keep their information on file with CLPNNL up-to date. This includes:

- Name change
(copy of legal documentation required)
- Mailing address
- Email address
- Employment information
- Phone numbers

If you have recently changed any of the above information, please contact the CLPNNL by phone or email to update your file.



Earlier this year, LPNs began online registration to complete their licensure renewal application. LPNs are required to provide their most up-to-date information to the CLPNNL as this is essential for online registration. For more information, please contact the CLPNNL office at 709-579-3843.



Are you Connected?

The College of Licensed Practical Nurses of Newfoundland and Labrador (CLPNL) has a FACEBOOK page where you will find the most up to date information on Licensing and Regulation, as well as educational opportunities that can be used for CCP credit hours.

Don't forget to **like** and **share** this page:

<https://www.facebook.com/CollegeLPNNL/>



Healing Beyond Borders

Educating and Certifying the Healing Touch®

Presents

HTI Healing Touch Certificate Program

*Nurturing Energy Therapy
for Health Care Professionals
and Persons Committed to Healing*

Foundations of Healing Touch 1

Corner Brook NL
September 22 - 23, 2018

Healing Beyond Borders
445 Union Blvd., Suite 105
Lakewood, CO 80228
Education@HealingBeyondBorders.org
www.HealingBeyondBorders.org

Healing Beyond Borders is the professional, non-profit education, credentialing and membership organization for Healing Touch, Established in 1996.



Healing Touch Is...

A relaxing, nurturing energy therapy

- Uses gentle, heart-centered touch to assist in balancing your physical, emotional, mental and spiritual well-being.
- Enhances the body's natural ability to heal through the human energy centers and energy field/biofield.
- Works in harmony with standard medical care and is complementary to other health care systems. Safe for all ages.

Is Healing Touch for You?

Intended Audience Includes:

- Registered nurses
- Health care professionals
- Body-oriented therapists
- Psychotherapists
- Licensed health care professionals and individuals
- Those who desire to study energy therapy with a commitment to help others

Course Objectives:

The learner will be able to:

1. Explore qualities and self-care needs of a Healing Touch Practitioner.
2. Discuss the facets of Healing Touch and correlate techniques that support physical, mental, emotional, and/or spiritual healing.
3. Demonstrate Healing Presence: the ability to remain grounded, present, and heart-centered.
4. Describe personal perceptions of subtle energy/heart-centeredness.
5. Apply the Healing Touch Framework to a variety of energy interventions.
6. Evaluate the seven energy centers (chakras) and related energy layers that surround the body.
7. Describe rationale with use of specific Healing Touch techniques.
8. Discuss the Healing Beyond Borders Code of Ethics, Standards of Practice and Scope of Practice required of a beginning Healing Touch student.

Course Description

The theoretical concepts which underlie holistic healthcare practices are explored along with how they relate to the core values which guide the practice of Healing Touch. Healing Touch techniques used in the etheric field are acquired along with an understanding of how they interface with the human biofield.

Course Information

Requirement for class completion and CE Credit:

- Attendance of entire course with supervision
- Practice with Instructor feedback
- Completion of Evaluation

AHNA: 18 CNE contact hours

NCBTMB: 18 contact hours

CA Board Registered Nursing: 18 contact hours

Schedule:

September 22:

Registration 8:30 A.M. – 9:00 A.M.

Class 9:00 A.M. – 6:00 P.M.

September 23:

Class 8:30 A.M. – 5:30 P.M.

Location: Club 64, 28 Broadway
Corner Brook NL,

Coordinator: Florence Newman
1-709-640-2579

e-mail: newbranchesnursing@gmail.com

Healing Beyond Borders

HTI Healing Touch Certificate Program

- ✓ In-depth solid core course of study for 5 courses from beginner to advanced healer including Evolution of the Healer, Holistic and Energetic Foundations, Evidence Based and Best Practice modules
- ✓ Enhances skills and knowledge through lecture, recommended readings and practice sessions
- ✓ Strong commitment to personal growth and knowledge of holistic health principles
- ✓ HTI Healing Touch Certificate Program Certificate of Completion upon satisfactory completion of the full course of study
- ✓ Leads to eligibility to apply for certification as a Certified Healing Touch Practitioner through Healing Beyond Borders
- ✓ Instructor Training and Advancement available after certification. Prerequisites apply
- ✓ Endorsed by American Holistic Nurses Assn

Healing Beyond Borders

Healing Touch Certification - CHTP

Platinum Standard Credential useful in

- Establishing a Healing Touch practice.
- Incorporating Healing Touch as a major focus within an existing professional practice.

Continuing Education Contact Hours

This continuing nursing education activity was approved by the **American Holistic Nurses**

Association, an accredited approver by the American Nurses Credentialing Center's Commission on Accreditation



This program has been peer-reviewed and is endorsed by AHNA.

Disclaimer Statement: Approval for contact hours through AHNA is based on an assessment of the educational merit of this program and does not constitute endorsement of the use of any specific modality in the care of clients.



Healing Beyond Borders is approved by the National Certification Board for Therapeutic Massage and Bodywork (NCBTMB) as a continuing education Approved Provider.

Provider approved by the California Board of Registered Nursing, Provider Number CEP15275.

Healing Beyond Borders
HTI Healing Touch Certificate Program
Foundations of Healing Touch 1
Corner Brook NL
September 22 - 23, 2018

Name _____
Credentials _____
RN License # _____
Address _____
City _____ Province _____
Postal Code _____
Preferred Phone # _____
Email _____

- Standard Tuition – \$375.00
- Early Bird Tuition by September 1st - \$360.00
- HBB, AHNA or HTAC member - \$350.00
- Full time Student with ID \$250.00
- Repeat \$250.00
- Required Textbook: ***Foundations and Practice of Healing Touch*** \$51.00 (used for entire course of study and will be brought at class by Instructor.

- Deposit \$75.00

Amount enclosed \$ _____

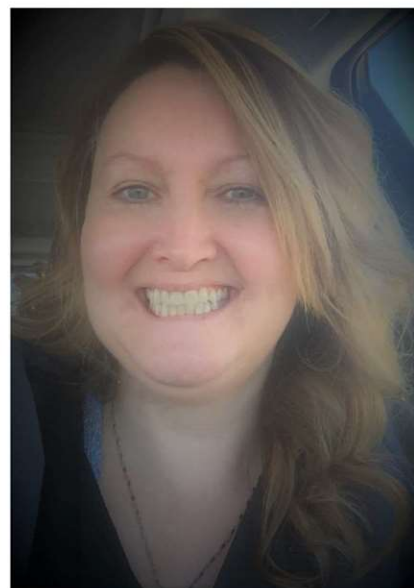
Refund Policy: If Instructor cancels class, student will be given a full refund of tuition. If student cancels, refund is provided at discretion of the Instructor.

- Yes I can bring a massage table
- No I can't bring a massage table

For min \$75 deposits, please send:
E-transfer to assencia@hotmail.ca with password 'healingtouch'.

or
Make cheque payable to: Chantal LeCouteur Morais and Send to: Florence Newman 11 Pioneer St, Corner Brook, NL A2H 5K9

Chantal LeCouteur Morais, CHTP/I
Certified Healing Touch Practitioner
Instructor Level 1
assencia@hotmail.ca



Chantal LeCouteur Morais RN, CHTPI, CRE, CTE, Chantal graduated in nursing in 1990. She is a certified Respiratory Educator in asthma and CPOD and a Certified Tobacco Educator. She became a Certified Healing Touch Practitioner in 2012 and opened her private practice integrating her modalities in 2013. In 2016 she completed the instructor training. In 2018, she became a Certified Healing Touch Practitioner Instructor Level 1. She lives in Lakeville, New Brunswick.

Disclosure: Chantal LeCouteur Morais is an Instructor of the Healing Beyond Borders HTI Healing Touch Certificate Program and has the right to use the intellectual property of the Healing Beyond Borders HTI Healing Touch Certificate Program Course of Study.

PRIVACY VS. CONFIDENTIALITY

Privacy and confidentiality are often mistakenly used interchangeably. It is not uncommon for individuals who inappropriately access PHI to hold the belief that they have not breached someone's privacy because they have not disseminated the information which they accessed. This belief is incorrect.

Privacy is the right of an individual to have their PHI protected from inappropriate actions as per PHIA. Confidentiality relates to the limitations on disseminating information.

Inappropriate access to PHI is a breach of privacy.

Inappropriate disclosure of PHI is a breach of privacy and confidentiality.

When it comes to PHI, breaches of privacy will not always include a breach of confidentiality; however, a breach of confidentiality will always amount to a breach of privacy.

Privacy rights and obligations are codified in legislation such as PHIA. Confidentiality obligations generally stem from internal policies and procedures, including oaths/affirmations of confidentiality. It is incumbent upon a custodian to educate and train its staff on the distinction between these two concepts. Custodians and their staff need to be aware of when they are entitled to access PHI and the limitations on disclosure of that information.

For more discussion on this topic, see the Office of the Saskatchewan Information and Privacy Commissioner's blog "[Privacy vs. Confidentiality](#)"



Permission to reprint given by OIPC, Volume 2 Issue 1.



Weeding Through the Evidence on Medical Cannabis

Written by Dr. Janice Mann, Knowledge Mobilization Officer - CADTH

On August 24, 2016, Health Canada announced the [Access to Cannabis for Medical Purposes Regulations](#), which allow Canadians access to a reasonable amount of cannabis prescribed by health care practitioners for medical purposes. Conditions treated with cannabis include nausea and vomiting, loss of appetite, and pain. Patients, clinicians, and others in the Canadian health care system have been asking for evidence on the medical use of cannabis to help guide treatment decisions. Below are just a few of the questions that have been posed to CADTH — and the answers we were able to find.

Does cannabis work to treat chronic pain?

For [one evidence review](#) on this topic we were asked to look specifically at nabilone — a synthetic version of cannabis — to see if it works to treat chronic pain. There wasn't a lot of evidence to help answer this question and there were some limitations to it — but the evidence we did find shows some positive benefits and limited harms when nabilone is used to treat chronic pain. As is often the case though, more research is needed to be able to definitively answer this question.

For a [second review of the evidence](#) on this topic, we were asked to look specifically at a cannabis-based spray to see if it works and if it's safe to treat neuropathic pain or other types of chronic pain. It's a combination of two products, delta-9-tetrahydrocannabinol and cannabidiol (THC:CBD) marketed under the name Sativex[®], and is taken by spraying it under the tongue or inside the cheek. Five systematic reviews were found, and they show that the spray may lead to favourable outcomes for patients in the short term, including reduced pain, and is well tolerated when compared with a placebo (no active medication). However, whether treatment of pain with the cannabis-based spray is beneficial and safe over the long term is uncertain. And there was no evidence comparing the spray to other pain treatments, so it's not clear how well it works compared to other medications. One evidence-based guideline does recommend TCH:CBD spray as a third-line option for the treatment of neuropathic pain when other treatments are not adequate.

Does cannabis work to treat other conditions, like post-traumatic stress disorder (PTSD)?

CADTH has been asked to look at [the evidence](#) to answer this question a number of times since 2009. Our most recent review looked at how well both cannabis and synthetic versions work to treat PTSD and whether there were any clinical practice guidelines to guide their use. One systematic review was found that included six individual studies. The included studies weren't considered high-quality but they

did find evidence to support the effectiveness of smoked marijuana, oral THC, and nabilone in reducing some symptoms of PTSD. Side effects were covered in only one of the studies on nabilone and were reported to be mild to moderate. No guidelines offering recommendations on the use of cannabis to treat PTSD were found.

Is cannabis safe to use with other medications? Does cannabis interact with other medications, drugs, or alcohol?

This is an important question but unfortunately there isn't a lot of evidence to help with an answer. In [our review of the evidence](#), one systematic review shows that nabilone may decrease the need for other medications such as opioids, NSAIDs, tricyclic antidepressants, dexamethasone, and ondansetron when used together, but it may make the effect of diazepam (a drug that depresses the central nervous system) stronger when taken together with codeine and alcohol. This isn't much evidence and whether it's high quality evidence isn't clear, so it isn't a lot to go on to guide decisions. But this is an area we're likely to see more evidence on in the near future as medical use of cannabis increases.

Can cannabis help in the treatment of addictions?

Although cannabis may itself be addictive, it may also have anti-addictive properties that could help to treat addiction. In one [CADTH review of the evidence](#), we looked to see if cannabis works to help treat addiction in residential transition or addiction programs. And despite our search efforts, we did not find any evidence to help answer this question. The role of cannabis in treating addiction remains uncertain.

These are just a few of the evidence reviews that CADTH has been asked to do on topics related to medical cannabis. You can find all of our related evidence at www.cadth.ca/cannabis. But CADTH is just one organization of many working to answer your questions about the medical use of cannabis. The [Canadian Centre on Substance Use and Addiction \(CCSA\)](#) has a focus on [marijuana research](#) including the [Clearing the Smoke on Cannabis](#) series. Health Canada also has many [resources on the medical use of cannabis](#), and these and other resources can be accessed directly or through the [additional resources](#) section of our [cannabis evidence bundle](#).

If you'd like to learn more about CADTH and our evidence reviews on this and other topics, please visit: www.cadth.ca, follow us on Twitter at @CADTH_ACMTS, or speak to Sheila Tucker, CADTH's Liaison Officer for Newfoundland and Labrador at Sheilat@cadth.ca.



This article is based on an [Evidence Matters](#) article appearing in the January 2018 edition of [Hospital News](#) – Canada's health care news and best practices.



Dial-a-Dietitian

STATEMENT FROM MINISTER HAGGIE REGARDING HEALTHLINE

NLIS 3

Health and Community Services

April 26, 2018

The following statement was given today in the House of Assembly by the Honourable John Haggie, Minister of Health and Community Services.

811 HealthLine Now Includes Dietician Services

I rise today to remind residents throughout Newfoundland and Labrador that Dial-a-Dietitian is a new service now available through the provincial HealthLine.

Mr. Speaker, the purpose is to encourage people to make healthier, more informed food choices and to receive helpful information or tips on nutrition.

A referral from a health care provider is not needed. Call 811 to speak to a registered dietitian. They are available Monday to Friday. Questions can also be sent using the Dial-a-Dietitian link on the www.yourhealthline.ca website.

Expansion of the provincial HealthLine to include registered dietitian services is an initiative under the Provincial Government's Chronic Disease Action Plan. The plan contains a series of concrete initiatives focused on prevention, self-management, treatment and care. It addresses key priorities outlined in The Way Forward to increase awareness and engage individuals to take action for healthy living.

Our government recognizes that healthy eating is the cornerstone of good health. Healthy living actions and targets, including healthy eating, have been identified in The Way Forward. Proper nutrition at any age can be life-changing. As Hippocrates said, "let thy food be thy medicine." Food can be the cause of, and remedy for, many health issues.

I encourage everyone to use this service and reach out if you need advice. It's now just a phone call or email away.

Thank you,
Mr. Speaker.



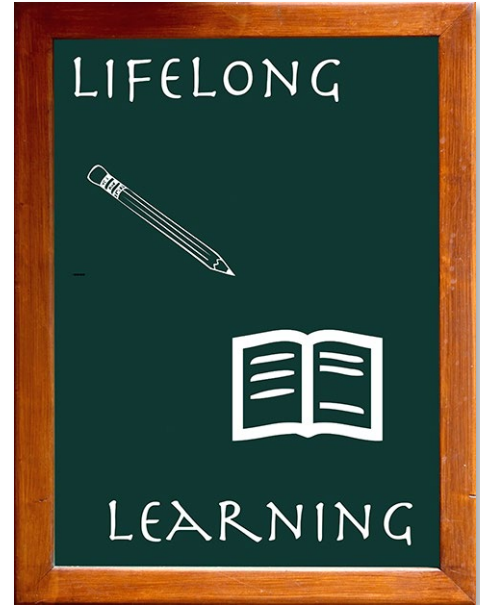
2018 04 26, 1:50 p.m.

"LPNs are autonomous practitioners who work collaboratively to assess, plan and deliver quality nursing care."

CCP UPDATE

The Continuing Competency Program (CCP) has been ongoing for the last year for LPNs in Newfoundland and Labrador. During this first year of CCP, the CLPNNL has seen an increase in the number of practice calls as LPNs made inquiries about the Program. Employers have seen an increase in attendance for educational opportunities and LPNs have reported that participation in CCP has had a positive impact on their nursing practice.

The CLPNNL has begun the 2018 CCP Audit. Randomly-selected LPNs were notified on April 20, 2018, of their selection to verify their compliance with CCP. In the coming days the CCP Auditing Committee will meet to begin the verification process. Selected LPNs will be notified by mail and email of the category they fall into.



Category 1: The documents provided verify compliance with CCP and no further action is required.

Category 2: The documents provided do not fully verify compliance with CCP and more information or clarification is required. Depending on the nature of what is required, this may be done by phone or via regular/electronic mail.

Category 3: The documents provided do not indicate compliance with CCP. The LPN will be given 90 days to gain compliance. If the LPN does not comply within 90 days, an allegation of “professional misconduct” may be filed by the Registrar of CLPNNL.

The LPN will not be eligible to renew their license for the upcoming year unless the LPN is compliant with the CCP requirements.

If you have any questions or comments regarding CCP, please contact Wanda Squires, LPN Practice Consultant, at 709-579-3843 ext. 206 or by email wsquires@clpnnl.ca.

PRACTICE RESOURCES

The College of Licensed Practical Nurses of Newfoundland and Labrador has many new documents to help with practical nursing practice. These Interpretive Documents, along with Practice Guidelines, outline the LPN’s responsibility and accountability in their practice.

For a complete list of documents and guidelines please visit this link:
<https://www.clpnnl.ca/practiceandpolicy>.

Bridge the gApp

Bridge the gApp Adult is an online resource designed to support mental wellness.

For Adults



Bridge the gApp Youth is an online resource designed to support mental wellness.

For Youth

Newfoundland
Labrador

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All rights reserved.

Did you know that Bridge the gApp has been updated?

In an effort to increase access to mental wellness information and early intervention services, Bridge the gApp has been redesigned for improved access. Bridge the gApp, a free online mental health resource, instantly connects you to self-help information, tools and local supports through a searchable service directory. The website can be viewed at bridgethegapp.ca

Bridge the gApp will no longer be available through the Apple App or Google Play Stores. The redesigned website means it can be viewed more easily on a wider variety of devices such as a phone, tablet or computer, making it easier and quicker for you to access services no matter what type of device you use. For those who still like having shortcuts on their mobile screen, you will be prompted to add an icon to your home screen which looks and functions just like a phone app.

New features have been added to Bridge the gApp to support mental wellness and recovery. Check out the **Wall of Hope, Art Room, Online programs** such as **BreathingRoom™**, and a variety of tools under the **Toolbox** and **Get Inspired/Your Space** sections. You can also share what helps you in your recovery and mental wellness journey by posting under the **Get Inspired/Your Space** sections.

FIND THE RIGHT MENTAL HEALTH OR ADDICTIONS SERVICE

Websites of the Regional Health Authorities and the Government of Newfoundland and Labrador have *up-to-date information* for you. Along with regional services, there are many mental health and addictions services that are provincially available:

- 'In An Emergency'
- Help Lines and Navigator
- Online Supports
- Counselling Options
- Hospital Care
- Treatment Centres
- Opioids and Naloxone
- Mental Health Promotion and Addiction Prevention
- Housing Services
- Resources for Physicians and Service Providers



For quick access to service descriptions and referral forms please visit any of their websites:

Labrador-Grenfell Health: <http://www.lghealth.ca/index.php?pageid=513>

Central Health: <http://www.centralhealth.nl.ca/mental-health-addictions-services/>

Western Health: westernhealth.nl.ca/home/health-topics-main/

Eastern Health: easternhealth.ca/WebInWeb.aspx?d=1&id=2106&p=74

Government of NL: gov.nl.ca/health-and-wellness

Also, Bridgethegapp.ca includes a provincial Service Directory and online supports.

March 2018



Is Ageism Prevalent in Our Health Care System?

Ageism is prevalent in society and health care. Canadians associate aging as a negative phenomenon and health practices with older adults are often influenced by these negative beliefs. Seniors constitute the fastest growing segment of the population in Canada and in many areas world-wide.

NL has the largest number of seniors in Canada, representing 18.4% of the population. In 2036, this number is projected to increase to over 30% while the overall senior population in Canada will be approximately 25%.

The Revera Report on Ageism (2012), published in collaboration with the International Federation on Ageing, sampled 1501 Canadians age 18-75+ to determine their attitudes about aging and their level of awareness and experience with ageism. Their findings included the following:

- 89% associate aging with something negative
- 51% reported ageism is the most tolerated form of social injustice
- 63% of seniors reported being treated unfairly or differently
- 75% agree that those 75+ are viewed as less important and often ignored
- 21% feel that older adults are a burden
- 80% of seniors reported that their complaints were dismissed as an inevitable sign of aging
- 71% agree that Canadian society values younger generations more than older generations
- Seniors 66+ identified the greatest sources of age discrimination is from the younger generation (56%) and the Healthcare system (34%).

RECOMMENDATIONS

A heightened awareness of ageism and its impact is a first step in combatting ageism.

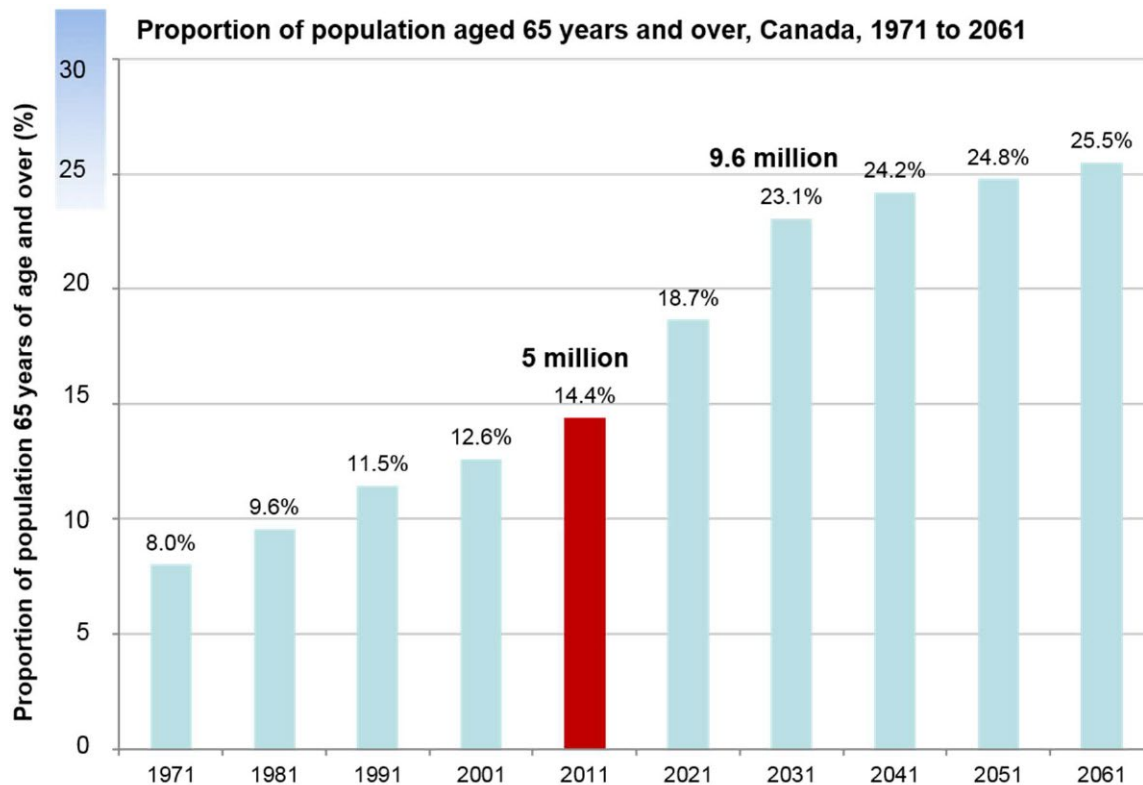
From a health care perspective, a positive attitude towards older adults can contribute to a better understanding of their diversity and health challenges. This will influence the quality care provided and lead to better health outcomes for seniors.

Sue Ann Mandville-Anstey PhD, RN
Joanne Chafe RN, MN

Research Highlights on Health and Aging in Canada

Statistics Canada – July 28, 2016

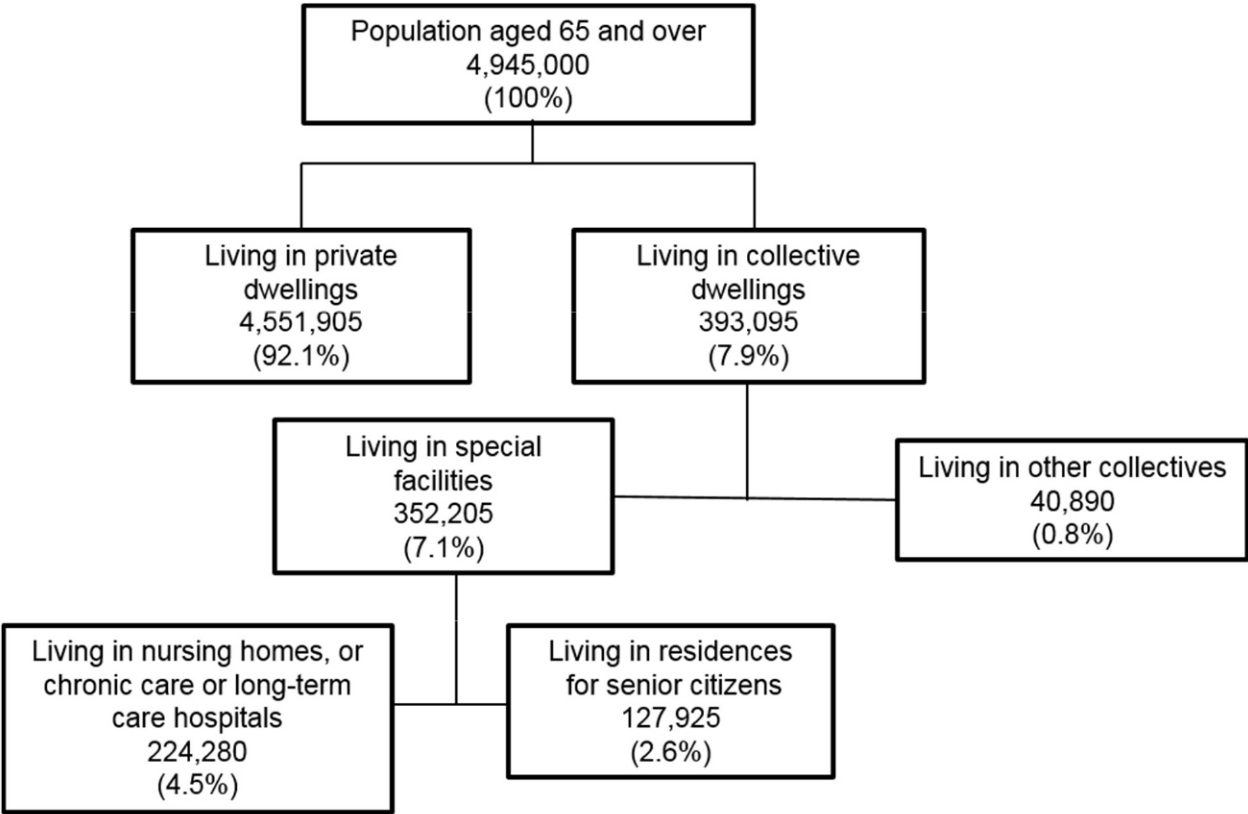
Canada, like other countries, has an aging population. This has significant implications for the health of Canadians and the health care services they will need in the future. Over the past several years, health research related to aging has focused on key areas such as chronic diseases, social isolation and, more recently, transitions to institutional care. Through its health research program, Statistics Canada will continue to address important information gaps related to aging and institutional care, including a better understanding of long-term care needs and the mental health of seniors.



Source: Population Estimates and Population Projections Program (medium-growth scenario), Demography Division, Statistics Canada.

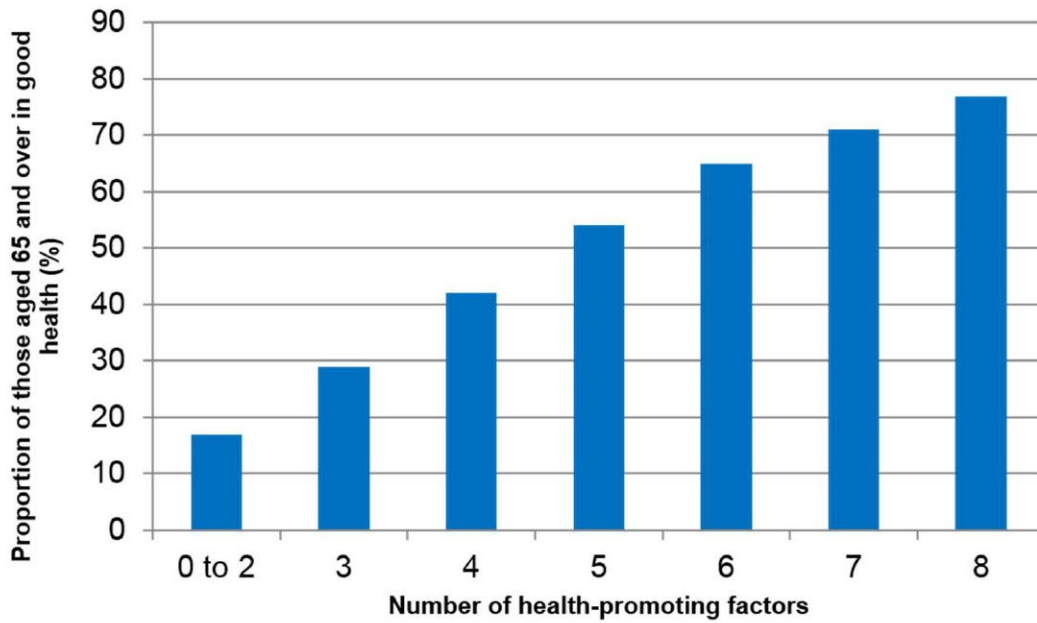
People aged 80 and over also represent a large and growing proportion of seniors.

The majority of those aged 65 and over live in the community, but 7% live in special care facilities—long-term and residential care facilities.



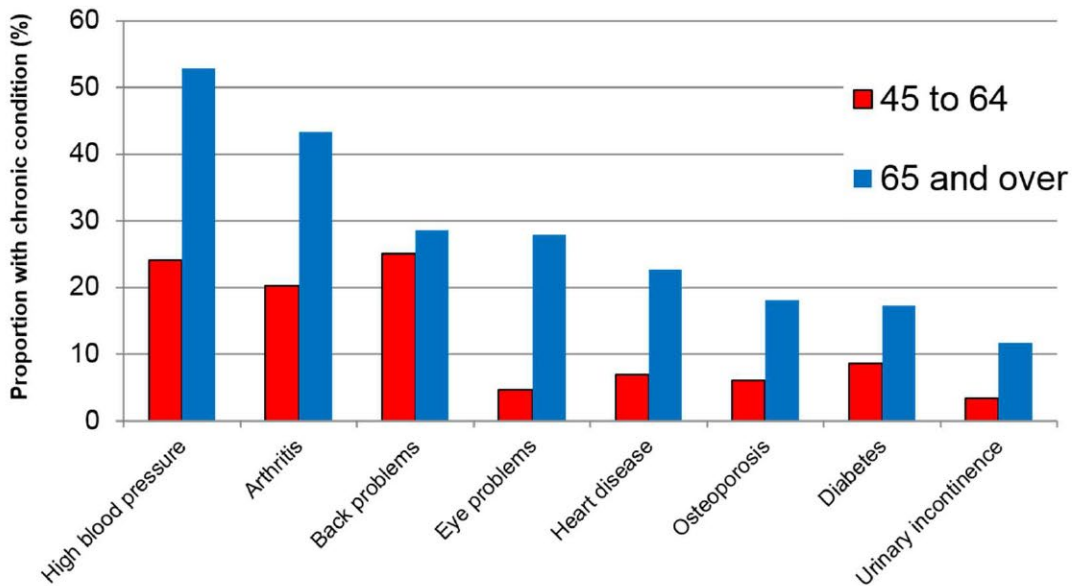
Source: Statistics Canada, *Census in Brief*, 98-312-X2011003, no. 4, September 2012
Data Source: 2011 Census of Population

Proportion of individuals 65 years of age and over in good health, by number of health-promoting behaviours, Canada, 2008/2009



Source: Statistics Canada, *Health Reports*, 82-003-X, vol. 21, no. 3, July 2010
 Data Source: Canadian Community Health Survey (2008/2009) — Healthy Aging

Proportion of individuals 45 years of age and over with selected chronic conditions, Canada, 2008/2009



Source: Statistics Canada, Canadian Community Health Survey (2008/2009)—Healthy Aging.



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