

PRACTICE

#WeAnswerTheCall



National Nursing Week May 9 - 15, 2021



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

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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 at wsquires@clpnnl.ca.

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MANDATE

The mandate of the CLPNNL is to promote safety and protect the public through the provision of safe, competent, compassionate, and ethical nursing care.

VISION

Leading regulatory excellence.

VALUES

Collaboration	Working effectively with others
Excellence	Commitment to the highest standards
Accountability	Answerable for our actions
Fairness	Fostering a culture of mutual trust, respect and social justice
Innovation	Using information, imagination and initiative

MISSION

Regulate Licensed Practical Nurses in the public interest.



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

HAPPY NURSING WEEK 2022!

On March 14, 2022, Minister of Health, Dr. John Haggie, signed a declaration ending the public health emergency, just 4 days shy of the 2-year anniversary of the arrival of COVID-19 to the province and the beginning of the provinces bid to protect the health and safety of Newfoundlanders and Labradorians from the devastating effects of a world-wide pandemic. Now 2 years later, with approximately 92% of the provincial population age 5 and up fully vaccinated, we can say without exception that nurses in this province have truly “Answered the Call”.

This year, as National Nursing Week is celebrated, we acknowledge the tremendous collaborative efforts that we have witnessed as Licensed Practical Nurses, Registered Nurses, and Nurse Practitioners worked tirelessly to meet the needs of the public in an ever-changing and challenging practice environment. Now more than ever, the country recognizes the contribution of nurses, not only in the pandemic response, but more importantly in your work to ensure that safe and competent nursing services were provided to our communities in spite of the pandemic. Nurses in this province answered the call even when they themselves may have been experiencing personal risk, isolation, disappointment and sometimes loss.

As nursing professionals, we strive daily to uphold our Standards of Practice and Codes of Ethics, and to support a practice environment that contributes to public safety and protection. We must be forever mindful of the impact of nursing on the health and wellbeing of the public. As the regulator for LPNs, we work strategically to fulfill the CLPNNL mandate of regulating LPN practice in the public interest by promoting good nursing practice, preventing poor practice and intervening when practice does not meet the standard of care.

From the nursing professionals at the CLPNNL, we wish our nursing colleagues a happy nursing week.



The week draws attention to nurses, increasing the awareness of the public, policy-makers and governments of the many contributions of nursing to the well-being of Canadians.

This year nursing week is from May 9-15, 2022. The National Nursing Week annual celebrations take place from the Monday to the Sunday of the same week as Florence Nightingale’s birthday, May 12th.

The theme this year, **#WeAnswerTheCall** was developed by the Canadian Nurses Association (CNA) to showcase the many roles that nurses perform in a patient’s health-care journey. The pandemic brought to light the courage and commitment that nurses have in their practice.

CLPNL wishes to acknowledge the nursing professionals who make a difference each and every day! We wish you all a Happy Nursing Week!

National Nursing Week

May 9-15, 2022

**We answer
the call** cna-aiic.ca



SHARE YOUR STORY



#CNA2022 #WeAnswerTheCall
#IKnowANurse #NationalNursingWeek



Thank You to Long-Standing Board Chairperson, Jane Pardy, Public Representative



Jane was first appointed to the College of Licensed Practical Nurses (CLPNNL) by the Government of Newfoundland and Labrador in 1998 to represent the public interest in the regulation of Licensed Practical Nurse practice in the province. Jane immediately accepted the role of the CLPNNL Board Chairperson. With the exception of one three-year term, Jane continued as Board Chairperson until March 31, 2022. Remarkably, Jane has given more than 20 years of service to the CLPNNL, ensuring CLPNNL's responsibility to make certain the existence of adequate safeguards to protect the public interest in the regulation of Licensed Practical Nurses (LPNs).

Jane was at the helm of the CLPNNL Board and provided leadership during a number of significant changes including the following: (1) the proclamation of the Licensed Practical Nurses Act in 2005 leading to a name change for the CLPNNL from "Council" to "College", and a composition change with the inclusion of elected LPNs as members of the Board (2) implementation of mandatory education for LPNs in health assessment and medication administration in 2012, (3) the continued expanded role and evolving scope of practice for LPNs, (4) lengthened of the practical nurse program from 3 semesters to 4, and then to 5 semesters in 2021 consistent with the expanded scope of practice, (5) implementation of the Continuing Competency Program (CCP), (6) adoption of a safety-focused Program Approval Process for Practical Nurse education, and (7) the proclamation of new amendments to the LPN Act in 2021 that resulted in both a changed definition for the LPN that better reflects the LPN role and the implementation of a Quality Assurance Program.

Jane has been an exceptional Board Chair, always ensuring meaningful discussion, and valuing the opinion and voice of all Board members. With a focus on regulating LPN practice in the public interest, Jane led the Board with a committed, dedicated and consistent approach.

THANK YOU Jane.



Thank You!



An Interview with CLPNNL Board Chair, Chris Janes, LPN

At its March 31, 2022, Board meeting, Chris Janes, LPN, was elected CLPNNL Board Chair, replacing long-standing public representative Jane Parady, as she completed her term.

Chris grew up in Grand Falls-Windsor, in a multi-generational family home graced with the presence of loving grandparents. He credits his close relationship with his grandparents as the impetus for a career in nursing. “I always had an interest in science and thought I wanted to be a teacher”, he said, “that was until I had the honour and privilege of taking care of my aging grandparents, and my desire to be a nurse grew from there”.

Upon graduation from high school, Chris entered the practical nursing program at the College of the North Atlantic in Grand Falls-Windsor, graduating in 2013. Initially, he was hired in a float position moving between Carmelite House Long Term Care facility and the Central Newfoundland Regional Health Centre. Over the years, his practice has taken place in a variety of clinical areas: psychiatry, the long-term care transition unit, medicine, and surgery. In 2021, Chris moved into the role of Privacy Compliance Analyst, and he is currently transitioning into the role of Health Information Manager with Central Health, in Grand Falls-Windsor. When Chris was a student, he was unsure where his career would take him. He recalls that the seeds for moving into a leadership role were first planted by Paul Fisher, former CLPNNL ED, when he spoke at Chris’s practical nursing graduation ceremony. Chris credits Mr. Fisher for the mentorship and support that helped him see what he, as an LPN, can bring to leadership roles.

In 2015, Chris was elected as the Zone 3 LPN to the CLPNNL Board, commencing the role in January 2016. “I didn’t always understand the functions of CLPNNL, or of the Board until I had the opportunity to sit around the table”, say Chris. However, he continues, it was around the CLPNNL Board table where his interest in policy, legislation and governance was fostered and grew. During his time as Board Chair, Chris hopes to continue to build good connections and to talk to people about the importance of regulation and to educate others about the role of CLPNNL.

Chris is an avid reader. His time is often filled with school related readings, as he is completing a Bachelor of Health Administration degree from Athabasca University. However, he says “nothing beats a great book in the hammock”. When asked about his favorite author, Chris cites Tilda Shalof, and states that her writings have provided him with these words to live

by: “Compassion is the greatest wisdom”. Chris says that connecting with the importance of compassion in a knowledge-based profession is key. When discussing compassion, Chris reflected on his clinical practice days in the long-term care transition unit, and the affinity he has for providing care for our aging population. “After all,” he says, “our residents have built the society we have the pleasure to live in”.

Chris admits that he did not realize initially how beneficial his practical nursing education would be in terms of his career path, and his personal growth. “There are a lot of avenues one could pursue as an LPN” he says, “and I am most grateful for the opportunities that have come my way”.

The CLPNNL Board Chair serves in this role for a minimum of three (3) years. Looking ahead, Chris says it is a privilege to be part of the decisions related to the regulating of licensed practical nursing, in the interest of the people of Newfoundland and Labrador. His goal is to teach, engage and motivate others. And it appears he is well on his way.

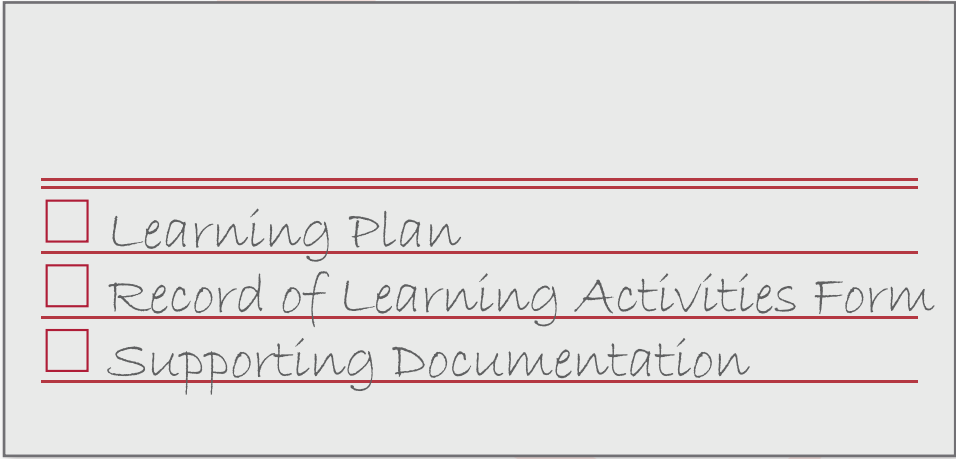
CCP AUDIT UPDATE

The Continuing Competency Program (CCP) Audit has begun. LPNs who have been selected for the Audit would have received an email and also letter mail from CLPNNL in recent days.

LPNs who have been selected for the CCP Audit must provide the following to CLPNNL by May 20th, 2022:

- Learning Plan for 2021-22
- Record of Learning Activities Form (all learning written on this form)
- Supporting proof of formal learning

CCP documents should be sent to ccpaudit@clpnnl.ca. For more information on CCP, visit www.clpnnl.ca/ccp.

- 
- Learning Plan
 - Record of Learning Activities Form
 - Supporting Documentation

CONTINUING EDUCATION

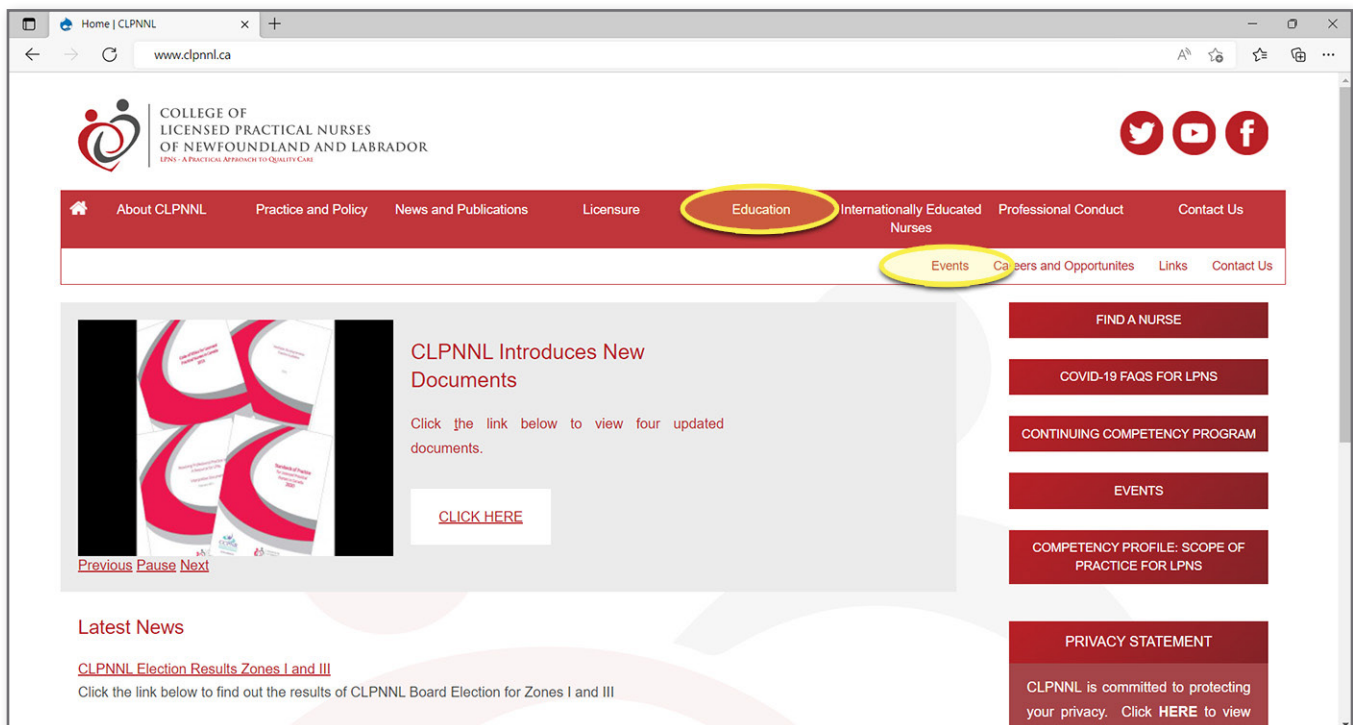
Are you looking to continue your education and expand your knowledge in nursing practice?

Did you know that CLPNNL's website has many great learning opportunities for YOU!

CLPNNL's website (www.clpnnl.ca) has resources to help you with your professional practice as a LPN. From the home page, click on Education, from there either scroll all the way to the bottom or click on Professional Resources. Once you get to the Professional Resources section, you will note that there are many links to continuing education. The first link for example, is the Practice NL website which offers great resources for LPNs. This site includes various educational modules including Jurisprudence, Leadership, Communication in Nursing, etc.

CLPNNL's Events page (www.clpnnl.ca/events) is another way to access continuing education. On the Events tab, you will see upcoming webinars offered by CLPNNL and others, as well, you have the option to review recorded webinars.

Continuing education is education that interests you. It's education that helps you be the best you can be, so that you can provide the safest possible care to members of the public. For the Continuing Competency Program (CCP), the education can come from anywhere in the world as long as it helps you provide safe, competent, compassionate, and ethical nursing care.



The screenshot shows the CLPNNL website interface. The top navigation bar is red with white text. The 'Education' menu item is highlighted with a yellow circle. Below the navigation bar, the 'Events' menu item is also highlighted with a yellow circle. The main content area features a large banner for 'CLPNNL Introduces New Documents' with a 'CLICK HERE' button. To the right, there is a vertical list of red buttons: 'FIND A NURSE', 'COVID-19 FAQs FOR LPNS', 'CONTINUING COMPETENCY PROGRAM', 'EVENTS', 'COMPETENCY PROFILE: SCOPE OF PRACTICE FOR LPNS', and 'PRIVACY STATEMENT'. The bottom left corner displays 'Latest News' with a link to 'CLPNNL Election Results Zones I and III'.

SCOPE OF PRACTICE

“Hey, can you do that?”

“I’m not sure, am I allowed to do that here?”

If these are questions you ask yourself, or you get asked, let’s talk about how we can think through to find the answers.

First of all, let’s use the scope of practice FRAMEWORK.

1. Am I Educated to do that?
2. Am I Authorized to do that?
3. Am I competent in today’s practice to do that, and, can I manage the outcomes of care?

1.0 Educated

When providing safe, competent, and ethical care to client’s, LPNs must have the necessary knowledge, skill, and judgement to do so. They must reflect upon if they learned this care within the Practical Nursing (PN) program or through continuing education. And, was there a theory and practice component included?

2.0 Authorized

If LPNs wish to provide care in NL, it must first be authorized by the Regulatory body – in this case CLPNNL. LPNs can use the [Competency Profile 2019](#) to determine if the skill is within the professional scope of practice in NL.

The LPN must then reflect upon if they are authorized by their employer to carry out this care. LPNs must be supported by their employer in order to carry out that care. Most times LPNs can find this in an employer policy and, if there is no policy, LPNs should advocate for policy development.

Also, LPNs must be aware of the legislation that affects their practice. They must be aware of laws that would restrict their practice.



3.0 Competence

LPNs must be aware of current best practices. Best practices are always changing to meet today's health care needs. As licensed professionals, it is a regulatory expectation that LPNs maintain currency in practice and that they complete continuous learning each year. Being competent is having the knowledge, skill, and judgement to carry out care safely, competently, and ethically.

Once LPNs reflect on this framework, it is important to also reflect on who the most appropriate care provider is to carry out the care. To determine this, LPNs reflect on the following:

- the client
- the environment
- the nurse

The Client – who is your client, what are their needs, how complex is the client?

The Environment – where is practice taking place, can you manage the outcomes of care, what supports are around to help you manage in the event you require assistance?

The Nurse – who is the nurse (LPN/RN/NP) with the right skill set to carry out the care safely, competently, and ethically?

LPNs are autonomous practitioners who care for clients of all ages. LPNs care independently for clients who have outcomes that are seen to be predictable, and LPNs care collaboratively with other health care professionals when client outcomes are not as anticipated, changed, or new.

The level of independence in carrying out care depends on the client's needs, the practice setting, and the skill set of the nurse.

Therefore, reflecting on this framework will help determine if the LPN can carry out that care, in that setting, for that client.

So... can you put in that IV, can you give that vaccine, can you do that admission, can you remove that NG tube? I ask that you reflect upon the Scope of Practice Framework to determine the answers to these questions.

If you require assistance, you're always welcome to contact Wanda Squires, Practice Consultant at CLPNNL 709-579-3843 ext. 206 email: wsquires@clpnnl.ca



PROFESSIONAL CONDUCT REVIEW (PCR) NOTIFICATIONS

On December 14, 2021, the CLPNNL Registrar resolved an allegation filed against an LPN. The Complainant in the matter was the LPN's employer. The allegation involved the LPN sharing client information with a person who was not within the client's circle of care. The LPN acknowledged that the disclosure of client information was in breach of the CLPNNL Standards of Practice and Code of Ethics. While CLPNNL views any breach of client privacy to be a matter of concern, in this circumstance the evidence was that the breach was an isolated incident and without malicious or ill intent. As part of the resolution process, the LPN was required to complete remedial education targeting adherence to privacy laws as set out in The Newfoundland and Labrador *Personal Health Information Act*, as well as education in Jurisprudence to emphasises the health professional's responsibility as a custodian charged with the protection of personal health information. Additionally, the LPN is required to meet with the CLPNNL Practice Consultant to review the Standards of Practice and Code of Ethics and the professional's responsibility to safeguard client health information. In the circumstances of this allegation, the foregoing resolution will provide reasonable assurance that such conduct will not be repeated by this LPN. All LPNs are reminded to observe the upmost scrupulousness in protecting the privacy and confidentiality of client information.

On February 1, 2022, the CLPNNL Registrar resolved an allegation filed against an LPN. The Complainant in the matter was the LPN's employer. The allegation related to issues of failure to report and document an incident. Additionally, the LPN did not follow the appropriate safe resident handling procedure and employer policy. There was no allegation by the Complainant of any harm to the client due to the incident. The LPN is required to complete targeted remedial education on documentation, jurisprudence and professional standards. As part of a resolution agreement the LPN must also meet with the CLPNNL Practice Consultant to discuss and cement insights gained from the required education modules as well as to review the CLPNNL Standards of Practice (2020) and Code of Ethics (2013). Additionally, the LPN is required to submit to the Registrar an essay reflecting on how their actions did not meet the expectations for LPN practice in the province and how their practice will be impacted in future given what they have learned from this process.

On February 7, 2022, the CLPNNL Registrar resolved an allegation filed against an LPN. The Complainant in the matter was the LPN's employer. The allegation related to issues of the LPN not following established employer procedures and practices with respect to a client interaction. There was no allegation by the Complainant of any harm to the client due to the incident. The LPN is required to complete targeted remedial education on jurisprudence, de-escalation, and professional standards. As part of a resolution agreement the LPN is required to meet with the

CLPNNL Practice Consultant to review the CLPNNL Standards of Practice (2020) and Code of Ethics (2013) as well as to discuss and cement insights gained from the aforementioned education modules. The LPN is also required to submit to the Registrar an essay reflecting on their actions and how they did not meet the expectations of LPN practice in the province and how the insights gained from the remediation outlined in the resolution agreement will impact their nursing practice in future.

On February 12, 2022, the CLPNNL Registrar resolved an allegation filed against an LPN. The Complainant in the matter was the LPN's employer. The allegation related to issues of improper medication preparation and not following established medication management practices and policy. There was no allegation by the Complainant of any harm to clients due to the incident. The LPN is required to complete targeted remedial education on jurisprudence, medication administration, safe medication principles and documentation. As part of a resolution agreement the LPN is required to meet with the CLPNNL Practice Consultant to review the CLPNNL Standards of Practice (2020) and Code of Ethics (2013) as well as to discuss and cement insights gained from the aforementioned education modules. The LPN is also required to submit to the Registrar an essay reflecting on their actions and how they did not meet the expectations of LPN practice in the province and how the insights gained from the remediation outlined in the resolution agreement will impact their nursing practice in future.

Research Opportunity: Pandemic Planning for Primary Care - Nurses' Roles During COVID-19

Nurses working in primary care across the Eastern Health region of Newfoundland and Labrador are invited to participate in a research study (led by researchers at Memorial University) that is seeking to understand the roles they have been fulfilling during the pandemic. Participation will include an interview conducted via Zoom (30-60 minutes). Participants will be provided a \$30 gift certificate.

If you are interested in participating or learning more about this project, please contact Dr. Julia Lukewich: jlukewich@mun.ca.

If you have questions regarding your rights as a research participant please contact the Health Research Ethics Authority at (709) 777-6974 or info@hrea.ca.



ARE YOU A NURSE WORKING IN PRIMARY CARE?

Join our research study!



We are interviewing primary care nurses in NL
(**Eastern Health** region) to understand the **roles** they
have been fulfilling during the **pandemic**

Up to 1-hour interview via Zoom

This study will inform a comprehensive primary care **pandemic plan**

If you are **interested** in participating or would like **more information**
please contact researchers at jlukewich@mun.ca

For questions regarding your rights as a research participant please contact
the **HREB** at (709) 777-6974 or info@hrea.ca

Long COVID: Reviewing the Evidence on an Emerging Health Issue

By Sarah Garland, Knowledge Mobilization Officer - CADTH

There are lots of names for it. Long COVID and post-COVID-19 condition are the most common. It's an emerging issue that some people with COVID-19, whether or not they had symptoms initially, can develop symptoms that last weeks or months after their initial illness. In the beginning days of the pandemic, most thought that COVID-19 was a short-term, acute illness, and most people would recover in a few weeks. However, it soon became apparent that some individuals were experiencing symptoms long after they first were diagnosed.

CADTH (an independent agency that finds, assesses, and summarizes the research on drugs, medical devices, tests, and procedures) published a [report](#) on what is currently known about long COVID condition. This report looks at what is known about long COVID, emerging research questions, and implications for the health care system. This report is part of a [larger body of work](#) being explored by CADTH.

There's a lot of uncertainty about long COVID, but it's clear that this condition could have profound impact on health care systems. Recent estimates suggest that 300,000 people in Canada may be affected by long COVID. Though it's hard to know exactly how many people will develop long COVID — and estimates of current prevalence vary widely — worldwide, long COVID is estimated to affect millions of people.

Part of the variability relates to whether the initial COVID-19 infection was confirmed or was suspected (i.e., an individual's symptoms suggested they likely had COVID-19). A positive COVID-19 test is not necessary to be diagnosed with post-COVID-19 condition. In certain stages of the pandemic, access to testing was limited, and so not everyone with COVID-19 had a positive test to confirm their illness. A suspected COVID-19 infection is enough reason to suspect long COVID as the reason for new or lasting symptoms. The World Health Organization (WHO), in their definition of long COVID, acknowledge this variability in testing, stating that the definition includes individuals with probable, as well as those with confirmed, COVID-19 infection.

Timelines for defining what constitutes long COVID also vary. But, according to the WHO definition, it's when a person is thought to have had COVID-19 for (usually) 3 months with symptoms lasting for at least 2 months that can't be explained by an alternative diagnosis. There is some variation in this too – people may have recovered from their initial illness, and then symptoms return, or they have new symptoms. When suspected and confirmed COVID-19 cases are combined, current estimates suggest that 21% to 23% of people have symptoms 4 weeks after being infected with COVID, and 14% have symptoms 12 weeks after their initial illness.

Like acute COVID-19 condition (typically considered to last for up to 4 weeks after infection), there's a variety of symptoms associated with long COVID. In part, this is because COVID-19 can impact multiple organs in the body. Some common symptoms are fatigue, fever, breathlessness, cough, and chest pain. As well, some may experience “brain fog” (or the inability to think clearly), headache, dizziness, and sleep disturbances. Other symptoms may be gastrointestinal pain (e.g., stomach pain); joint and muscle pain; psychological symptoms (e.g., depression); ear, nose, and throat symptoms (e.g., loss of taste and smell, ringing in their ears); and skin issues (e.g., rash). To complicate things further, an individual's symptoms may fluctuate over time, relapse, or be triggered. For example, some people may experience worse symptoms after exercising.

Because of the range of symptoms, and potential lack of a positive COVID-19 test, reaching a diagnosis of long COVID can be challenging. To diagnose long COVID, the Mayo Clinic recommends looking for symptoms affecting at least 2 of 6 major organ systems (e.g., cardiac, respiratory, gastrointestinal, musculoskeletal, neurologic, and general), as well as a decrease in functional status. The National Institute for Health and Care Excellence in the United Kingdom recommends that any new or ongoing symptoms after an acute COVID-19 illness be considered as a potential long COVID diagnosis. However, they recommend that tests be done to rule out other potential illnesses. Future training for health care professionals will be important for recognizing post-COVID-19 condition.

As far as treatment goes, current recommendations focus on personalized care involving multiple clinical disciplines that reflect the complexity and variety of symptoms experienced by each patient. Possible components of treatment include self-management, such as education and support, and guidance for symptom specific management, like breathing exercises to improve shortness of breath.

There's also variability in the treatment and management of long COVID. There are some specialized clinics dedicated to long COVID patients, while other models of care centre on primary care providers referring patients to specialists as needed. There are also hybrid models that use a mix of post-COVID-19 clinics and primary care providers, depending on the needs of each patient.

Regardless of the model of care, long COVID could place demands on health care systems already struggling with the demands of the pandemic. For example, many people who suspect they have long COVID turn to their primary care providers, then to multidisciplinary specialists and rehabilitation services. To rule out other illnesses, they may need medical imaging and blood work. If they experience psychological symptoms of long COVID, they may access mental health treatments and supports. There are many ways the health care system is responding to the needs of individuals with long COVID, and it will take considerable time for us to realize the full impact of this condition. It should also be noted that long COVID has far reaching effects for individuals and may reduce their ability to fully participate in their daily lives, like going to school or work.

To summarize, long COVID is a complex condition with a large degree of variability among individuals. Right now, there is a lot of uncertainty about how best to prevent, diagnose, treat, and manage long COVID. It will take time to develop a clear picture of post-COVID-19 condition and its full implications for health care systems.

To read the full report, you can access it — “An Overview of Post-COVID-19 Condition (Long COVID)” — in the 9th issue of the *Canadian Journal of Health Technologies*. Visit CADTH's YouTube page (<https://www.youtube.com/user/CADTHACMTS>) to view a panel of experts discussing the implications of long COVID. To find out more about CADTH, visit cadth.ca, follow CADTH on Twitter: @CADTH_ACMTS, or contact Sheila Tucker (SheilaT@cadth.ca), Liaison Officer for Newfoundland and Labrador.

Highlights from the Board

In addition to the robust discussions held at the Board meeting to inform future decisions, the following items are outcomes of the March 31, 2022, CLPNNL Board meeting:

- The Board elected the incoming Chair. Congratulations to Chris Janes, LPN. See page 6 for an interview with Chris.
- The Board approved the following:
 - › Revisions to the CLPNNL By-laws
 - › Updated *Duty to Report* document
- The CLPNNL operational budget for 2022-2023 was approved.
- The Annual Meeting date was selected as Thursday, June 16, 2022.





CLPNNL Board Approves Criminal Record and Vulnerable Sector Screening Audit

On June 25, 2021, the CLPNNL Board approved a random audit process to validate Criminal Record and Vulnerable Sector Screening for LPNs. This action was undertaken to enhance and support CLPNNL's mandate of public protection.

All new applicants to CLPNNL are required, as part of the eligibility for licensure in Newfoundland and Labrador, to show evidence of good character by submitting a Criminal Record Check with Vulnerable Sector Screening that is clear of convictions. For LPNs who are currently licensed, the evidence of good character comes in the form of a declaration that every LPN completes during their annual renewal to indicate that they have not been convicted of any criminal offence in the previous year.

In recent years, there have been incidents where LPNs have failed to report criminal convictions on their annual renewal. Those incidents were dealt with through the Professional Conduct Review process. Additionally, each LPN has a duty to self-report conviction of a criminal offence(s) for which they have not received a pardon, at any time throughout the licensure year. Thus, in the interest of public protection, the CLPNNL Board felt it prudent to approve a process to validate criminal conviction declaration.

In the future, should you be selected for this particular audit, you will receive a letter from CLPNNL requiring that you submit a Criminal Record Check with Vulnerable Sector Screen no older than three (3) months. Information about how to obtain a Criminal Record Check with Vulnerable Sector Screening will be included in the correspondence, as well as any timelines related to the submission.





Do you work with patients with opioid use disorder?
Are you interested in learning more about harm reduction?

Staying up-to-date on best practices, treatment advances, and new approaches can be a challenge for all health care providers. What if there was a free, local service that could help?

The **Provincial Opioid Dependence Treatment (ODT) Centre of Excellence (COE)** is located within Eastern Health but is provincial in scope. Its team is responsible for:

- Supporting the implementation of the provincial ODT Hub and Spoke Model
- Supporting the implementation of evidence-informed ODT practices
- Strengthening ODT performance monitoring and evaluation
- Increasing opportunities for stakeholder collaboration
- Enhancing harm reduction education, program, policy, and practice development
- Increasing opportunities for knowledge exchange and care provider development

Licensed practical nurses are valued members of multidisciplinary teams providing access to opioid dependence treatment throughout the province. The **Provincial ODT COE** supports LPNs working with patients with opioid use disorder through learning and professional development opportunities, including:

- Workshops and webinars on core and emerging topics, such as contingency management, engaging families in addictions services, the introduction of extended-release buprenorphine (Sublocade[®]), and rethinking language around substance use.
- [Project ECHO NL: Opioid Use Disorder](#), a virtual, multidisciplinary community of practice that incorporates lectures, mentorship, and case-based learning.
- The Annual Provincial ODT Conference, typically held at the end of October.
- The distribution of evidence-based practice resources.
- Responding to requests for information and creating connections with experienced ODT providers to support clinical practice.

The Provincial ODT COE is also committed to contributing to the growth of a culture of harm reduction in opioid dependence treatment services throughout the province. Harm reduction is a respectful, non-judgmental approach to minimize the harms of substance use. It involves meeting people where they are by incorporating a framework of respect and trust, and recognizes that not everyone is ready, able, or desires abstinence from substance use. We regularly offer a one-hour Harm Reduction 101 session, which aims to help participants understand the basic concepts and application of harm reduction principles. We also manage the provincial [take-home Naloxone program](#), helping to facilitate access to this life-saving medication in the event of an opioid overdose.

Interested in learning more? The best way to keep up-to-date on our learning opportunities and to connect with our team is to join our email list. To be added, please email Chelsea.Hynes@easternhealth.ca.

COMPETENCY PROFILE UPDATE

The CLPNNL made amendments to the Competency Profile effective January 2022. The Competency Profile articulates the skills that are within the scope of practice for the profession of practical nursing in Newfoundland and Labrador, that LPNs have been, or can be, educated to perform.

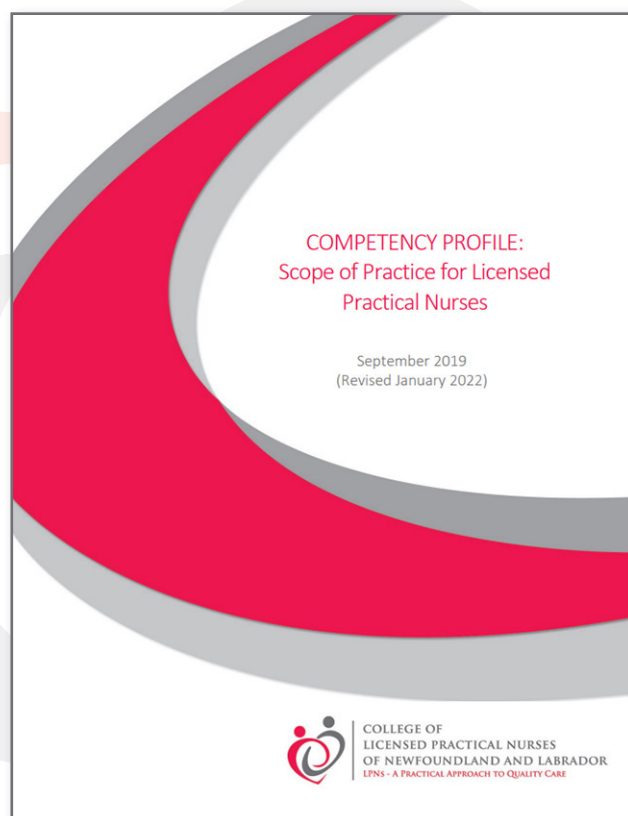
These amendments were the result of a review of the competencies and were completed in consultation with LPNs, practical nurse educators, and other key stakeholders to reflect changes in the entry to practice education.

Some changes include:

- Removal of an NG tube
- IV push
- Care of a Central Venous Access Device

Click [here](#) to see the list of January 2022 amendments. The CLPNNL [Competency Profile](#) document has been updated to reflect these amendments. The Competency Profile is available via direct link on the CLPNNL website homepage.

For questions related to the Competency Profile, or LPN scope of practice please contact Wanda Squires, CLPNNL Practice Consultant, at wsquires@clpnnl.ca.



Hello Summer...

As we approach Spring to the smell of fresh fallen rain, daffodils and crocuses rising up out of the ground after the cold harsh winter, we hear the sounds of birds chirping, a friendly reminder that Summer is around the corner. Ahh Summer, the season that most seem to love. Free of winter jackets, boots, hats, shovels, etc... It's a season where families and friends gather together more often, meals shared amongst loved ones, it's a time to relax, recharge, and find peace.

As health care professionals, we must take the time to provide "self-care". It is extremely important for you as a nursing professional to be well, so that you are mentally and physically prepared to provide the safest, and most effective care possible.

This summer, take some time to stop, pause, and reflect. Take that extra five minutes, see the beauty around you, smell the scents of summer, and hear what's going on around you. Reflect on you as an individual, think about your needs and what makes you feel good. Reflect on you as a professional, what is it you need to make you the best you can be so that you are prepared physically and mentally to care for others. Reflect on you as a person who makes a difference day in and day out within health care.

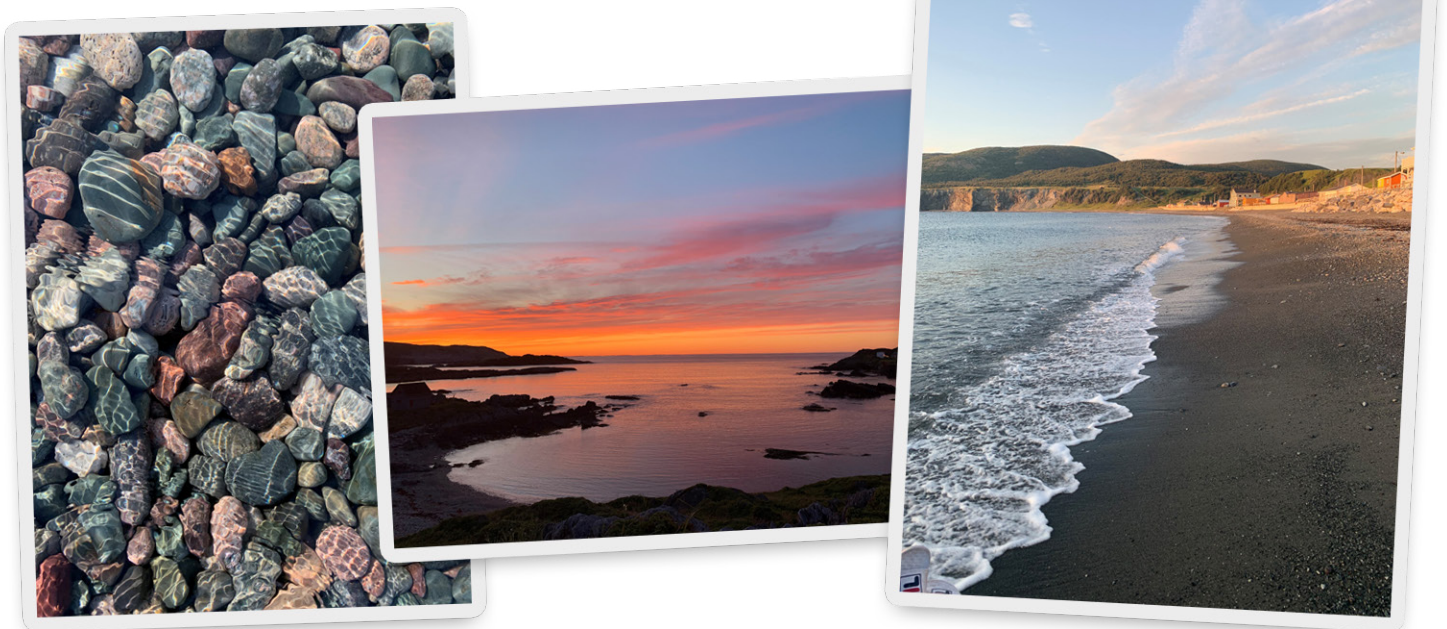
This Summer, make time for you so that you can be the best you can be!

"An empty lantern provides no light.

Self-care is the fuel that allows your light to shine brightly"

- unknown

Wanda Squires LPN
Practice Consultant CLPNNL



CLPNNL LEADERSHIP WORKSHOP

Have you heard of the CLPNNL Leadership Workshop?

Have you wanted to attend?

CLPNNL is offering the Leadership Workshop again in the Fall of 2022. Topics covered in this workshop will include but not limited to the following:

- Leadership
- Regulatory information
- Scope of Practice
- Professional Conduct Review

The workshop will be completed over two (2) half day sessions. At this time, CLPNNL will continue to use virtual technology to offer the information. Those who attend must have access to a smart device, laptop, desktop, etc.

The workshop will take place on October 4th and 18th. When registering, we ask that you are mindful of these dates, and that you are able to attend **both** sessions.

To register for this event, please contact Desiree Francis at dfrancis@clpnnl.ca or call 709-579-3843 ext. 201.

Space is limited, register today!



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