

Message from the Executive Director/Registrar

UPDATES

As we enter spring of 2015, each of us will have had the opportunity to reflect on both our personal and professional journeys over this past winter. Change is the norm and certainly challenges have come in many forms. Here at the College we have seen change with the retiring of long-term employee Linda Robichaud, and the unexpected passing of our board member Lucy Reid. Another challenge we experienced this past month has been weather related, the College sustained significant water damage to the office premises. It required the staff to work differently as everything was not able to be put back to “normal” quickly. The health care system in Nova Scotia is also undergoing significant change and challenges as the Health Authority Act will re-structure the current District Health Authorities from eight (8) down to one (1), plus the IWK. New graduates in May will enter a work force that is very different than the one that we currently work in. Active membership and leadership are crucial for their successful integration. As part of our professional and personal responsibilities, I encourage you to demonstrate strong leadership in providing the necessary guidance during these challenging and changing times.

The Health Authority Act will re-structure the current District Health Authorities from eight (8) down to one (1), plus the IWK.

Save the Date - LPN Education & Professional Development Day

LPN Education/Professional Development Day - May 22, 2015

“Legal Issues in Nursing”

Facilitated by: Chris Rokosh, RN PNC, President and CEO, CanL NC Education

The topics to be covered include:

- Nursing litigation, stats, trends and issues;
- Four factors needed to determine nursing negligence;
- The top five nursing negligence issues with case studies; and
- Nursing documentation.

For more information on how to register please visit our website <http://clpnns.ca/annual-general-meeting/>.



*Citizenship and Immigration Canada
Citoyenneté et Immigration Canada*

2014 International Qualification
Network (IQN) Innovation Award
Winner

Current Emails & Address Required

A reminder that the legislation requires all active practising LPNs to maintain current addresses, including an e-mail address with the College. For updates, LPNs can manage their profile with the online portal/member login, or contact Registration Services with their changes.

Congratulations to a “Nurse to Know” - Page 2

*Online Leadership Course
More information available
on www.clpnns.ca or page 2.*



Board Meeting Update

A regular scheduled Board meeting took place on February 5, 2015 and approved the following:

- New Board members were welcomed;
- Strategic and Operational Plan reviewed;
- Draft Annual Report approved;
- Appointments of Legal Counsel and Auditor made;
- Updates re the "Business Contingency Plan" and Risk Management Policies were provided; and
- "New LPN Entry to Practice Competencies and Program Policies and Processes" for new LPN programs were approved.

Retirement Notice



Linda Robichaud, Administrative Coordinator Registration & Professional Conduct Services with the College has retired effective January 30, 2015. Linda will be greatly missed. The Board and staff wish her many happy years in retirement.

New Staff Member Sandy Dawe

The College is very pleased to announce our newest staff person Sandy Dawe. Sandy is the new welcoming face at reception and is responsible for administrative support to Registration Services and general support.



Online Leadership Course

CLPNNS has seen its first new graduates from the LPN Leadership Course. Congratulations are in order. To date, 120 LPNs are enrolled in various stages of the program, and 40 LPNs have completed the course.

For more information please visit our website <http://clpnns.ca/clpnns-lpn-leadership-course/>. Or if you have any questions please contact Jylene Simmons at jylene@clpnns.ca.

Long Standing Board Member Lucy Reid

It was a very sad day on February 13, 2015 when the College learned of the passing of Lucy Reid, a public representative to our Board since 2008. Lucy was a dedicated Board member who brought leadership, wisdom and most importantly humour to the Board. She will be greatly missed. Condolences have been sent to her husband Bob and her family.



Congratulations to a "Nurse to Know"

We are very pleased to announce that two LPNs, namely Marlene MacNeil and Sandra O'Donnell, both employed with Shannex (Harbourstone, Sydney) have been designated Dementia Care Specialists.

The Dementia Care Specialist training consisted of 4 hands on sessions with Teepa Snow over a 2 year period. With each session new skills were taught and the participants were required to practice with their clients before the next session.

The training offers a variety of detailed focused techniques and approaches for every day-to-day interaction with the clients, emphasizing that a client with dementia may not necessarily understand why a staff member is doing something a certain way. It highlighted the need to become a care partner with the clients instead of a care giver. Care partnership is more involved than being a care giver. Partnership suggests a higher level of involvement in every interaction between staff and clients. This involvement helps to build relationships, which allow staff to better understand client preferences ensuring their service can reflect what the client want in each moment. Rather than caring for these clients, the focus has shifted to care with them.

The dementia care training suggests simply taking a moment, breathing and learning from the situation. This positive approach to dementia care enables staff to provide life's simple pleasures in a home that is safe, comfortable, and filled with acceptance and love.

Teepa Snow, MS OTR/L, FAOTA is one of America's leading educators on dementia care and an education specialist. Teepa brings 33 years' experience in geriatrics and presents over 350 programs each year helping to develop, improve and optimize programs and services to people living with dementia.

Annual General Meeting

MAY 22, 2015, 11:00AM - 12:00PM

ATLANTICA HOTEL, HALIFAX, NOVA SCOTIA

What takes place at the AGM?

- The opportunity to hear first hand the work the College has been involved in during the past year.
- The opportunity to submit resolutions.
- The opportunity to meet the College staff and Board members.
- The opportunity to learn and share from other LPNs in the province.

Voting At The AGM

Section 22, of the By-Laws outlines the proceedings at the AGM and the applicable voting requirement(s) for member(s). Members will be required to be present at the meeting and must show their current registration license as evidence of their entitlement to vote.

Resolutions/Motions from Registrants

Members of the College may submit resolutions to the College throughout the year and from the floor during the AGM. Submitting Resolutions is one way in which members can influence the work of the College regarding the future of practical nursing, by asking the Board to consider getting involved in an issue or initiative that is within the College's mandate. Provincial Resolutions for the 2015 AGM must be received at the College no later than April 30, 2015. Submit resolutions to the attention of Ann Mann , Executive Director/ Registrar; e-mail ann@clpnns.ca. A form has been developed and will be available at the AGM to assist you with the process. Section 26 of the By-Laws outlines the procedure for resolutions proposed by members. Each resolution must include the following: title, resolution statement, explanation and identification of the mover and seconder. It is important to remember that resolutions/ motions must relate to the mandate of the College of LPNs and reflect the interest of LPNs from a provincial basis.

Scrutineers Needed

If you will be attending the Annual General Meeting in 2015 and if you would like to volunteer as a Scrutineer (counting votes) please call and submit your name to Doug at 902 423-8517 ext. 5. Toll free 1 (800) 718-8517, or e-mail info@clpnns.ca. You must be an active practicing LPN and will need to show your current 2015 license to be eligible.

For Internationally Educated Nurses (IENs) Waiting to Write the CPNRE....

IEN & Practical Nurse Licensure – Pathway to Success

CLPNNS and NSCC are pleased to offer a free prep course to help you understand the role of a LPN in Nova Scotia and assist you in preparing for the National Exam (CPNRE).

The workshop date are:

29 - 30 April & 01 May 2015 (CLPNNS Office)

The next exam writing dates are:

20 May 2015

09 September 2015

13 January 2016

Funding to support this initiative is through the Labour Market Agreement, Nova Scotia Department of Immigration.

For particulars contact Katherine Sullivan at 1-902-423-9280 or katherine@clpnns.ca.

Frequently Asked Question

What is the difference between Scope of Practice and Scope of Employment?

The Professional/Legislated Scope of Practice is the outer limits of LPN practice set by the LPN Act. The professional scope of practice can only be changed by changing the legislation. The professional scope outlines the competencies, abilities, and role of the LPN.

The individual scope of practice is specific to each nurse in their current practice context. The individual scope is always smaller than the professional scope because it refers to each nurses' ability in their everyday practice. Individual scope can be expanded through new knowledge and learning new activities or skills. As part of CCP, each nurse is required to reflect on their current practice in their current setting and engage in learning activities specific to their practice setting.

Scope of employment is LPN practice that is dictated by an employer's policy. Scope of employment can impact a nurse's individual scope of practice. Scope of employment can expand or narrow LPN practice by adding or limiting the activities that may be performed in a specific setting.

It is important to understand the differences between individual scope of practice, and scope of employment. Having the competency to perform a skill (individual scope of practice) in one area or clinical setting, does not automatically mean a skill can be performed in another. Employers must support the performance of skills from one area to another with policy and practice resources (scope of employment). Typically, lack of transferability is associated with the differing levels of practice supports from one area to another. For instance, some LPNs practicing in the renal dialysis unit (RDU), have achieved the competency (individual scope of practice) to access AV fistulas for the purposes of drawing blood for routine lab testing. This practice is permitted in the RDU because there are resources - expert nurses, equipment, policy (scope of employment) - in place to assist the LPN in the performance of the skill or manage any unexpected client situation that may be encountered. Outside the context of the RDU, these clients are cared for on the inpatient area. Typically the same types of resources (expert nurses, equipment, policy) are not as readily available and this will have an impact on how the LPN would manage any unexpected client outcomes that may occur during (or even after) the performance of the skill. Even though the individual LPN may have the capacity to perform this task (individual scope of practice), the employer policies (driven by the availability of resources) limits the practice to the RDU (scope of employment).

Every year we are required to create an individualized learning plan as part of the continuing competence program (CCP). I am told the most important part of the plan is the reflective evaluation? What is the best way to do this?

Good question. There is no one right way to document a reflective evaluation (also called reflective practice). It is not enough to simply state that you completed some learning or gained a new skill. For your evaluation to be truly reflective, you have to describe how the learning has improved or changed your practice. As part of the audit, the CCP committee is looking to see if you can explain what impact your learning has had on patient outcomes. Reflective evaluation has to be very specific.

Examples of Good and Not Specific Enough Reflective Practice

Good:

I use new communication skills to decrease a patient's anxiety. When a patient is less anxious they are better able to understand their post-op teaching and more likely to recover quicker.

Why It's Good:

There is direct connection between the learning (new communication skills) and improved patient outcomes.

Not Specific Enough:

I completed an IV start module at work. I can now start IVs independently.

Why It's Not Specific Enough:

There is no connection between learning (IV start module) and outcomes. This evaluation is about being able to perform a task, not about the patient. {A better evaluation might be: There is a reduction in time it takes for clients to get their antibiotics because I can start IVs and do not have to find another nurse to do it for me. This is better for the patient.}



Board of Directors

Chair

Shirley Theriault, LPN
District II (Kentville - Annapolis - Digby)

Angie Chassé-Naugler, LPN
District I (Bridgewater - Shelburne - Queens - Yarmouth)

Anne Boutilier, LPN
District III (Halifax Metro)

Jackie MacCallum, LPN
District IV (Pictou - Guysborough - Antigonish)

Shaunna Snow, LPN
District V (Inverness - Victoria - Cape Breton - Richmond)

Cindy Yorke, LPN
District VI (Colchester - Cumberland)

Teri Crawford, RN
Appointed: CRNNS

Public Members*

Rev. J. Briggins
Lucy Reid (Deceased)

Lloyd Tattrie

Fred Beaton

*Appointed by government

Jurisprudence Exam

Notice to all new applicants to the College, effective May 2016, new applicants will be required to complete an online Jurisprudence Exam. A committee has begun the work to develop the exam. Information and particulars about the exam can be found on the website www.clpnns.ca.

Stay Connected to the College

For the latest documents created to assist/support your practice visit www.clpnns.ca.

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