



From left: LNPLC Board President Trina Diner, Thunder Bay-Atikokan MPP Bill Mauro, LNPLC Clinic Administrator Kyle Jessiman, LNPLC Clinical Director Pam Delgaty. (Photo by: Matt Vis, tbnewswatch.com)

LNPLC Excited to Expand Access and Capacity by 50 Percent

By Kyle Jessiman, Clinic Administrator

For over five years, our clinic team has advocated to the Ministry of Health and Long-Term Care, and to our local MPPs, our passion to increase access to this value-driven model of care for Thunder Bay residents. There are thousands of patients who are going to be left without a provider when their family physicians retire this year, and we are ready to accept patients who will be cared for by an interdisciplinary team with fifteen health providers including physicians, social workers, registered dietitians, nursing staff, and others, all under one roof. We are very excited to finally have been granted this funding so that we can expand our clinic to the capacity envisioned when it was founded seven years ago.

- Patient capacity will increase by 50 % from 3,200 to 4,800 patients receiving primary care at this team-based inter-professional clinic in Thunder Bay.
- We will also employ two more Nurse Practitioners – a 50 % increase, and increase our Nursing and Social Work staff by 50%.
- Our clinic hours will expand to allow all

patients access to appointments, follow-ups, and walk-in clinic in the evenings.

- The cost of delivering primary care at this NP-led model for an entire year remains at \$409 per patient with this new funding.
- The patient registration form can be accessed at www.lnplc.com.

We look forward to offering this model of care to more patients in Thunder Bay.

A testimonial from one of our patients:

"The best initiative of the Liberals since they have been in power was the creation of the NP-led clinics. At this particular clinic, where I am myself a patient, I have found the very best that primary care has to offer: smart spending so the health care dollar goes further, full use of all the different, highly qualified people who work here, advice to stay healthy and not just fix a problem, and a feeling that I am a person with a name and a life to everyone who treats me. Congratulations to LNPLC, of course, but congratulations also to the elected people who had the great idea of throwing good money after good."

- Prof. Laure Paquette, PhD, Department of Political Science, Lakehead University.

Health Matters

Lakehead Nurse Practitioner-Led Clinic

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National Non-Smoking Week

January 21 to 27 is National Non-Smoking Week. Anna Kapoor, LNPLCs Pharmacist, outlines reasons why quitting is important and how you can get on your way to being smoke free.

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TIPS FOR QUITTING



Weedless Wednesday

January 24 is Weedless Wednesday, an annual event held during National Non-Smoking Week to encourage those who smoke to give quitting another try for one day. Exercise instead!



Anticipate Your Triggers

Try to delay lighting up by keeping your hands and mouth busy with other things: drink water, brush your teeth, enjoy a healthy snack, go for a walk or talk with a friend.

FAST FACTS

\$5 billion

The amount the Province of Ontario saved in health care costs by reducing unhealthy behaviour such as smoking, unhealthy diet and alcohol consumption over the past decade.

80—90%

Tobacco use is responsible for 80 to 90% of all cases of Chronic Obstructive Pulmonary Disease or COPD.

Source: www.on.lunq.ca



National Non-Smoking Week

January 21 to 27

Smoking Cessation

It's never too late to quit! More than 45,000 Canadians die every year due to smoking, and no one wants to be part of that statistic. It's important to remember that the effects of smoking are reversible. Risk of heart attack and stroke drop within 24 hours, and risk of cardiovascular heart disease is cut in ½ just one year after quitting, as well as your lung cancer risk reverting back to normal after 10 years. There are countless reasons to quit today, and we can help.

The LNPLC has a patient centered smoking cessation program designed to equip you with the tools needed to find the right way to begin your smoke free journey. You will meet with a Pharmacist trained in smoking cessation, and get a customized quit program.

No Quit Program is one-sized fits all, but there are tried and true strategies that you'll learn to use on their own or combine with the medication that is right for you. A consultation will help you understand why you smoke, help you avoid triggers and prepare you for quitting.

Treatment options include over the counter medications such as Nicotine

Replacement Products, including patches, inhalers, spray, gum or lozenges, or a new medication called CRAVV. Prescription medications include Champix or Zyban. There is a lot of old information out there regarding use and side effects of these medications. With the most up to date evidence available, we will help you find the right choice. Anytime you combine medication with counselling programs you double your rate of success in being smoke free for good.

If you are thinking of using e-cigarettes come and talk to us about the pros and cons. We can help you navigate through the mixed information available.

Remember, most people require multiple tries to quit smoking, and with the right plan, it is possible to quit for good.

Anna Kapoor
Pharmacist



healthychange

Chronic Conditions Self-Management

Do you or a family member have a chronic condition like diabetes, arthritis, stroke, cancer or fibromyalgia?

FREE Weekly Workshop!

Learn lifestyle coping strategies to help you lead a healthy life. Strategies involve:

- 6 weekly 2.5 hour classes
- The management of pain and fatigue
- Healthy eating and exercise
- Action plans and problem solving
- Managing difficult emotions
- Working with your health care team
- Making informed treatment decisions

Lakehead
Nurse Practitioner-Led Clinic

Stand up
to Diabetes
Faisons face
au diabète

Self Management Program



Registration open for the following
Workshop: Chronic Disease
Self-Management

EVERY WEDNESDAY

January 17 - February 21, 2018

1:30 PM - 4:00 PM

Lakehead Nurse Practitioner - Led Clinic
Suite 101-325 Archibald St S - Boardroom

****PRE-REGISTRATION IS REQUIRED****

To register:

www.healthychange.ca or
807-766-2824 ext 2005

Register online today!
Visit www.healthychange.ca

NEW



CHS | SCO
CANADIAN HEARING SOCIETY
SOCIÉTÉ CANADIENNE DE L'OUÏE

Hearing Care Clinics

Learn to cope with hearing loss,
improve communication and stay
involved

- Free hearing screenings
- Get helpful tips and strategies to help you cope with your hearing loss
- Ask questions about hearing loss, hearing aids, assistive listening devices, alerting systems or amplified phones
- Get assistance purchasing batteries for hearing aids
- Hearing aid cleaning

Appointments available soon
at LNPLC

ask your Nurse Practitioner

January—Alzheimer's Month

Detecting Dementia—Signs of Alzheimer's disease or other dementias to look for. Often the symptoms are present long before diagnosis.

Look for these telltale signs:

- Does he/she struggle to think of the right words or remember names?
- Is his/her clothing clean and in good repair?
- Does he/she look thinner?
- Does he/she have difficulty following the conversation?
- Does he/she forget basic etiquette?
- Is he/she unusually quiet or do they appear sad or depressed?

- Is he/she easily distracted, agitated or overwhelmed?

Look around their home:

- Is the house unusually cluttered with piles of newspapers, plastic bags or unopened mail? Are the lights working? Is the heat on?
- Is there enough food in the house? Is food spoiling in the refrigerator?
- Are pots and pans scorched or burned?
- Do medications seem to be used appropriately?

Other warning signs:

- Memory loss beyond forgetting occasional names and appointments.

- Difficulty with abstract thinking.
- Misplacing familiar objects.

Early diagnosis is important to managing the disease effectively through education, support and treatment. Detecting the disease in the early stages also helps individuals and families better plan for the future and maintain quality of life.

There's no easy way of addressing your concerns with your family member, but it is important to discuss this with their Nurse Practitioner.

www.alzheimerthunderbay.ca



February—Heart Month

What is heart disease?

Heart disease is a general term that means the heart is not working properly. Some forms of heart disease are present at birth (congenital heart disease), while others develop as we age. Many forms of heart disease can be prevented by living an active, healthy lifestyle.

Heart disease is preventable and manageable. Your best defense is controlling the risk factors that could lead to coronary artery disease, such as high blood pressure, high cholesterol, diabetes, smoking, stress, excessive alcohol consumption, physical inactivity and being overweight. If you've been diagnosed with a heart condition, there are treatments to help you manage your illness. You can further reduce your risk by considering these heart-healthy steps:

- Be smoke-free.
- Be physically active.
- Know and control your blood pressure.
- Eat a healthy diet that is lower in fat, especially saturated and trans fat.
- Achieve and maintain a healthy weight.
- Manage your diabetes.
- Limit alcohol use.
- Reduce stress.

Lifestyle risk factors

Small, healthy changes in your daily routine can decrease your risk of heart disease. Making changes is always challenging. Your healthcare team can help you figure out what risk factors you should focus on first and set goals that you can reach. Don't try to change yourself overnight. Start with something that is relatively easy and build on your successes.

Unhealthy weight

If you are struggling with your weight, you are not alone. Over 60% of Canadian adults are either overweight or obese. Being overweight is a major risk factor for heart disease. In fact, obesity doubles your chance of heart disease.

A healthy weight can also help control other conditions such as high blood pressure, high blood cholesterol and diabetes.

Unhealthy diet

The foods you eat affect your health. Small healthy changes in your daily routine can decrease your risk of heart disease and stroke.

Not enough exercise

People who are NOT active have double the risk of heart disease and stroke as well as increased risk of diabetes, cancer and dementia. Being active helps your heart, brain, muscles, bones and mood.

Smoking (tobacco misuse)

Smoking and exposure to second-hand smoke have many negative health effects that increase your risk of developing heart disease and stroke. Smoking contributes to the buildup of plaque in your arteries, increases the risk of blood clots, reduces the oxygen in your blood, increases your blood pressure and makes your heart work harder.

Stress

Stress is a part of life for just about everyone. Although stress happens first in the mind, it has strong effects on the body. People who have high levels of stress or prolonged stress have higher cholesterol or blood pressure.

Too much alcohol

Heavy drinking and binge drinking are risk factors for high blood pressure, heart disease & stroke. Alcohol may also cause problems by interacting with your medications.

Birth control and hormone replacement therapy (HRT)

Medications that contain estrogen – the female hormone – increase the risk of heart attack, stroke and mini-stroke (TIA). Hormone replacement therapy (HRT) (usually prescribed for the symptoms of menopause) and many birth control pills contain estrogen.

<http://www.heartandstroke.ca/heart/risk-and-prevention/lifestyle-risk-factors>

PROGRAMS



MEMORY SCREENING

FEBRUARY 13th

call to book your appointment



FREE SHINGLES VACCINES

anyone 65 to 70 years old

ask for more details



DIABETES FOOT CARE

Provided twice weekly

With Sarah Taylor, RPN

What is a Stroke?

What is a stroke?

A stroke happens when blood stops flowing to any part of your brain, damaging brain cells. The effects of a stroke depend on the part of the brain that was damaged and the amount of damage done.

Stroke is a medical emergency.
Call 9-1-1.

Do not drive to the hospital. An ambulance will get you to the hospital for stroke care.

Would you know when someone is having a stroke?

Recognizing the signs and acting quickly could mean the difference between life and death, or between a full recovery and lasting disability.

Prevention is key

Prevention starts with knowing your risk. Nine in ten Canadians have at least one risk factor for stroke or heart disease. Almost 80% of premature stroke and heart disease can be prevented through healthy behaviors. That means that habits like eating healthy, being active and living smoke free, have a big impact on your health.

Condition risk factors

Some medical conditions increase the risk of stroke, but you can manage

them with medication, treatment and making healthy choices.

Blood Pressure

High blood pressure (hypertension) can weaken your artery walls, increasing your chances of a stroke. If you keep your blood pressure below target levels, you can lower your risk of stroke by 30-40%.

Cholesterol

High blood cholesterol can lead to a buildup of plaque in the artery walls (atherosclerosis). The plaque makes it harder for blood to flow through your body, putting you at increased risk of stroke.

Diabetes

Diabetes can affect your blood vessels and in turn increase blood pressure. Diabetes also increases the chance of plaque forming in your blood vessels.

Face is it drooping?
Arms can you raise both?
Speech is it slurred or jumbled?
Time to call 9-1-1 right away.

© Heart and Stroke Foundation of Canada, 2017

Afib

Atrial Fibrillation (Afib) is an irregular heart rhythm. It can cause small clots to form in your heart and travel to your brain. It increases your risk of ischemic stroke three to five times.

Sleep Apnea

Sleep Apnea is a serious medical condition that can cause your breathing to stop and start many times while you sleep. There is a strong link between sleep apnea and high blood pressure and stroke. Even short pauses in breathing while you sleep are hard on the heart because they lower the amount of oxygen reaching the heart.

F
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<http://www.heartandstroke.ca/stroke/signs-of-stroke>



February 28th—Pink Shirt Day

Bullying, cyberbullying and harassment jeopardize learning and can severely impact mental, emotional and physical health. Bullying is a major problem in our schools, workplaces, homes, and online.

One in five students in our schools are affected by bullying, and chances are that you or someone you know is being impacted. If you're not sure what to do, reach out to someone who can help. And remember, kindness and compassion can go a long way. If you're being bullied, bullying someone else, or see a friend who is being bullied, learn how to create a healthy environment for children and foster nourishing relationships. Visit www.pinkshirtday.ca for resources for parents and teachers.

EMERGENCY VISITS



Visits Are On The Rise

The number of annual visits to the emergency department is likely to keep rising since Ontario's population is expected to increase by 30% over the next quarter century.



Patients Are Getting Older

Increased visits by older adults is likely to accelerate in coming years, since the number of people aged 65 and older in Ontario is projected to more than double over the next quarter century.

FAST FACTS

13%

Growth in ER visits is outpacing population growth. Over the past 7 years, the number of annual visits to Ontario's ER departments increased 13.4%.

1 in 5

An estimated 1 in 5 ER visits in Canada were for conditions that could be treated at a primary care provider's office or clinic.

SOURCE: <http://www.hqontario.ca/System-Performance/Specialized-Reports/Emergency-Department-Report>



Emergency Visits: What's Appropriate?

Canadians have access to an exceptional health care system at no cost. However, the fact that we do not pay out-of-pocket does not mean that we use the health care system wisely. Unnecessary utilization of the emergency department puts a burden on the health care system.

If you are experiencing any of the following, then it **is appropriate** to seek care through the Emergency Department:

- Sudden and/or severe pain anywhere in the body
- Chest pain or pressure
- Difficulty breathing
- Severe bleeding
- Sudden dizziness, weakness or change in vision
- Confusion or loss of consciousness
- Severe or persistent vomiting
- Weakness on one side of the body
- Head trauma
- Medication overdose
- Serious extremity injuries
- Seizures

- Coughing or vomiting blood
- Suspected poisoning

If you have a minor condition or are unsure of whether to go to the Emergency Department,

**YOU CAN CALL
TELEHEALTH ONTARIO
1-866-797-0000**

Telehealth Ontario is a free service provided by the Ontario Ministry of Health and Long-Term Care that allows Ontario residents to speak to a Registered Nurse with their medical questions. It's designed to provide quick answers, information and advise.

The Lakehead Nurse Practitioner-Led Clinic provides weekly walk-in clinics for patients of the clinic. In 2018, the clinic will be offering increased access to walk in clinic services.

March is Nutrition Month

By Claudia Isfeld, Registered Dietitian

The theme for Nutrition Month 2018 is
"Unlock The Potential Of Food".

Dietitians across the country will help Canadians to realize the potential of food. Food fuels our bodies, provides an opportunity to discover different flavours and experience different cultures, helps to prevent chronic illness, heals our bodies and brings us closer together through shared meals, recipes and discussions. Dietitians believe in the power of food to enhance lives and improve health. Watch for local Nutrition Month activities and information throughout March to help you unlock the potential of food.

Looking for new recipes? Don't have a lot of time? Be inspired to cook any time, day or night with **Cookspiration**, created by Dietitians of Canada. Recipe ideas are served up to suit your mood, taste and schedule. Nutrition information and cooking tips are included.

Available online at www.cookspiration.com or download the free app for iPhone and Android.



Be Inspired Any Time, Day or Night

Hosting a party? Check out *Celebration!* Looking for lunch ideas? See *Get Prepared!* Stuck for time?

Look at *On-the-Go!* Find new ideas each day, all week long. Unleash your culinary creativity with the information and dietitian-approved recipes featured in this app.



Find Ideas To Fit Everyone's Taste

Access a wide array of recipes with photos to fit any palate or appetite. Someone in your household likes it hot? Check out *Spice is Nice!* Need ideas that are easy on the pocketbook? Find them in *Budget Friendly.* Have picky kids? Review *Kids Choice.*

Social Work Week—March 5-11, 2018

Theme ~ Social Workers on the Front Line of Real Issues

By Lawni LaBelle-Paynter, Social Worker

Roots of Social Work in Ontario

The early roots of social work in Ontario and Canada can be found in the volunteers who, at the beginning of the 1800s, visited the poor. Chiefly women from financially comfortable backgrounds, they offered little more than moral advice on such things as the value of working hard and being thrifty.

The approach of governments towards poverty was basically "laissez-faire" with poverty seen as the result of personal failure and thus personal responsibility. The volunteers were also known as "friendly visitors" and learned on the job.

Over time, charities were set up to provide very basic financial help to those in the most dire need but help was not without strings—you had to be considered "worthy" of help. For

example, single mothers and beggars were not given assistance.

By the early 1900s thinking began to change regarding the causes of poverty and it began to be linked to larger societal problems such as low wages and ill health. Gradually friendly visitors were replaced by people who were paid to offer services to those in need.

By 1914, Canada's first school of social work was established at the University of Toronto followed by one at McGill University in 1918. Ontario's second school of social work was established in 1949 at what is now Carleton University.

WWI and WWII, along with the Great Depression in the 1930s caused many social problems and led to growing pressure for government to play a bigger role in helping its people manage



when they faced hardships. Governments began to realize that trained social workers were needed to provide basic services.

Since that time, 15 schools of social work have been established in Ontario. Graduates help people from all age groups and social backgrounds solve problems that affect their day-to-day lives.

Ontario Association of Social Workers
https://www.oasw.org/Public/Social_Work_Week_Tab/History_of_Social_Work_in_Ontario.aspx

Quick Steamed Fish Fillets

with Potatoes and Asparagus

This elegant supper for 2 is simplicity itself. The entire meal is prepared in a steamer and ready in 15 minutes.

INGREDIENTS

- 1 cup (250 ml) small new red potatoes, quartered
- 1 cup (250 ml) asparagus, cut into 1-inch (2.5 cm) pieces
- 2 — 4 oz (125 g) fish fillets, about 1 inch (2.5 cm) thick
- 1/3 cup (75 ml) julienned tomatoes (preferably roma)
- 1/4 to 1/2 tsp (1 to 2 ml) dried basil or tarragon
- Black pepper to taste
- 1 tsp (5 ml) butter
- 1 tsp (5 ml) lemon juice
- Salt

INSTRUCTIONS

Step 1

Salt potatoes in a large steamer set over a pot of boiling water. Cover and simmer for 8 to 10 minutes or until potatoes are beginning to soften but are not yet cooked.

Step 2

Place asparagus on top of potatoes. Place fish fillets on top of asparagus. Top with tomatoes; sprinkle with basil, and pepper. Cover and steam for 5 to 6 minutes or until fish is opaque and flakes easily when tested with a fork. Dot with butter; cover and steam for 30 seconds or until butter is melted. Sprinkle with lemon juice. Season to taste with salt.

Tips

If available, substitute 1 to 2 tsp (5 to 10 ml) of your favorite fresh herbs for the dried herbs. If asparagus is out of season, use fresh green beans instead.



Dietitian's Message

Steaming is a fast, efficient and low-fat way to prepare fish.

It is also a great way to cook vegetables so that they stay crisp and retain their colour, vitamins and minerals.

Nutrition Information Valeur nutritive	
per 1 serving	
Amount Teneur	% Daily Value % valeur quotidienne
Calories / Calories 190	
Fat / Lipides 3.1 g	5%
Saturated / saturés 1.4 g + Trans / trans 0.1 g	
Cholesterol / Cholestérol 70 mg	
Sodium / Sodium 107 mg	4%
Carbohydrates / Glucides 16.1 g	5%
Fiber / Fibres 2.9 g	
	12%
Sugars / Sucres 2.5 g	
Protein Protéines 24.6 g	
Vitamin A / Vitamine A	12%
Vitamin C / Vitamine C	37%
Calcium / Calcium	6%
Iron / Fer	18%

Contributor: N. Schnedier, *Cook Great Food—Dietitians of Canada*. 2001.
Published by Robert Rose Inc.

Also found at



PROGRAMS



**IS THERE A PROGRAM
YOU WOULD LIKE OFFERED?**

Email us your suggestions at
info@lnplc.com



SKIN SCREENING

Held once monthly

talk to your NP



Education Sessions

6 week program

COMING IN MAY

Ask us for more details

Wait Room



Excuse our appearance while we renovate!

Construction will be underway starting in January to revamp our reception and wait room area.

You may also see construction crews working in other parts of the clinic as we make room for our new staff and our new patients.



A late-arriving patient throws a health care provider's schedule into a tailspin. Your provider appreciates being able to know you and care for your medical needs, but chronic late arrivals hurt this relationship and is not fair to other patients on the schedule who are kept waiting.

We have a policy that if a patient arrives 10 minutes after their scheduled appointment time, the front desk will ask them to reschedule.



www.lnplc.com

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