

CANADIAN NETWORK FOR RESPIRATORY CARE
**VIRTUAL RESPIRATORY CARE &
EDUCATION CONFERENCE**



A PATH TO
HOPE, JOY & WELLNESS

PROGRAM

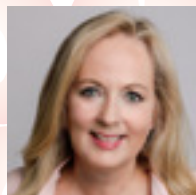
WEEK 1, NOVEMBER 2&3

Program, WEEK 1, Wednesday, November 2ND, 2022

CANADIAN NETWORK FOR RESPIRATORY CARE
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A PATH TO
HOPE, JOY & WELLNESS
NOVEMBER 2-9 / NOVEMBER 9-10, 2022



10:00 – 10:30 am ET WELCOME SESSION

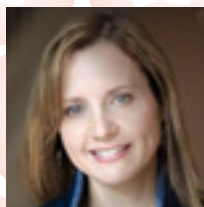
Cheryl Connors, Executive Director
Canadian Network for Respiratory Care

10:30 am – 11:00 am ET BREAK & VISIT EXHIBITS

11:00 am – 12:00 pm ET

KEYNOTE

**Physician | Global Affairs Founder,
War Child Canada and War Child USA**



Samantha Nutt MSc MD FRCPC has been on the frontlines of many of the world's major crises for more than 20 years. A medical doctor and founder of the internationally renowned non-profit War Child, she is one of the most recognized voices in the humanitarian arena and a leading authority on current affairs, public health, war, international aid, and foreign policy. Nutt draws on her incredible wealth of experience as a veteran of international healthcare and a leader on the world stage, to share unique insights into global issues and what they mean to her audiences. In addition to overseeing War Child Canada and War Child USA as both founder and president, Nutt is a staff physician at Women's College Hospital in Toronto and an Assistant Professor of Medicine at the University of Toronto. Nutt also authored the critically acclaimed and #1 bestselling book *Damned Nations: Greed, Guns, Armies, and Aid*, a bracing and uncompromising account of her work in some of the most devastated regions of the world.

Nutt is a respected authority for many of North America's leading media outlets. She is a regular foreign affairs panelist on the acclaimed news program, CBC's *The National*, and a contributor to *NowThis News*. Her written work has been published by *TED Ideas*, *Reuters*, *The Globe and Mail*, *The National Post*, *The Toronto Star*, *Maclean's Magazine*, *The Ottawa Citizen*, *The Huffington Post*, and many others. She has also been featured in *AP News*, *Forbes*, *Time*, *Chatelaine*, and *More* magazine, and on *CTV National News*, *Global TV News*, *NBC Nightly News*, and *BBC World News*, to name just a few.

Named one of Canada's "25 most influential figures" by *The Globe and Mail* and one of "Canada's Five Leading Activists" by *Time Magazine*, Nutt was recognized as a Young Global Leader by World Economic Forum and has been appointed to both the Order of Ontario and the Order of Canada. Most recently, she was awarded the prestigious Loyola Medal by Concordia University. Nutt was also invited to speak at *TED Talks Live "War and Peace"* event at The Town Hall Theater in New York. The event aired on PBS, and Nutt's TED Talk on the deadly impact of small arms has garnered over a million views on TED.com.

Nutt graduated summa cum laude from McMaster University, earned a MSc in Public Health with distinction from the University of London, and holds a Fellowship in Community Medicine (FRCPC) from the Royal College of Physicians and Surgeons of Canada. She is further certified by the College of Family Practice and completed a sub-specialization in women's health through the University of Toronto as a Women's Health Scholar. Nutt is also a Senior Fellow at Massey College at the University of Toronto and a former board member of the David Suzuki Foundation.

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EDUCATION CONFERENCE



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HOPE, JOY & WELLNESS
NOVEMBER 2-9 / NOVEMBER 9-10, 2022

12:00 – 1:00 pm ET INDUSTRY SYMPOSIUM

CASE:
Control Asthma Symptoms Effectively

Sponsored By



Learning Objectives

- Implement best practices for routine assessment of asthma control and identify treatment goals
- Identify red flags for non-adherence and implement adherence strategies
- Consider an individualized approach to patient care to optimize outcomes and prevent exacerbations



Susan Waserman *MSc MD FRCPC* is a Professor of Medicine, Director of the Division of Clinical Immunology and Allergy at McMaster University and the Adverse Reactions Clinic at the Firestone Institute of Respiratory Health, St Joseph's Healthcare, Hamilton.

She is extensively involved in medical education in both academic and community settings, in addition to an active hospital-based clinical practice in adult and pediatric Clinical Immunology and Allergy. Activities include practice guidelines in food allergy, allergic rhinitis, hereditary angioedema and urticaria. Her research interests include mechanisms and treatment of peanut allergy.

She is President of the Canadian Allergy, Asthma and Immunology Foundation and past President of the Canadian and Ontario Societies of Allergy and Clinical Immunology. She is also Chair of the Medical and Scientific Committee of Asthma Canada, and on the Board of Directors of the Canadian Hereditary Angioedema Network and Asthma Canada.

1:00 – 2:00 pm ET Different Types of Food Allergies: FPIES and Enterocolitis

Dr. Harold Kim will provide an overview of food allergies with a focus on FPIES (Food Protein-Induced Enterocolitis Syndrome).

Learning Objectives

- Review possible causes of non-IgE food allergies
- Discuss clinical presentations of FPIES and enterocolitis
- Describe how to manage these conditions



Harold Kim *MD FRCP* has been in private practice in Kitchener for over twenty years. He has an appointment at McMaster as an Assistant Clinical Professor and at the University of Western Ontario (UWO) as an Adjunct Professor.

He graduated with his MD from UWO and completed Internal Medicine and Allergy training at UWO. His clinical interests include allergic conditions including asthma, allergic rhinitis, food allergy, atopic dermatitis, drug allergy and sinusitis. Although clinical research has been an interest in Dr. Kim, his “extra-practice” activities include participating in the Canadian Asthma Guidelines and Canadian Rhinitis Guidelines and the Canadian Immunotherapy Guidelines. Dr. Kim is the past president of the Canadian Society of Allergy and Clinical Immunology and the Canadian Network for Respiratory Care. Dr. Kim is happily married with five daughters.

2:00 – 2:30 pm ET BREAK & VISIT EXHIBITS

Program, WEEK 1, Wednesday, November 2ND, 2022

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VIRTUAL RESPIRATORY CARE &
EDUCATION CONFERENCE



2:30 – 3:30 pm ET PRODUCT SHOWCASE

Inhalers and the Environment: Learnings from the UK

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Learn how climate change and air pollution affect patients with asthma and explore the connection between life-saving inhalers and the environment. Jane Scullion will share first-hand experience and learnings from the UK, one of the largest pMDI markets in the world with ambitious environmental targets.

Learning Objectives

- Describe how climate change and air pollution affect patients with asthma
- Explore the connection between inhalers and the environment
- Examine learnings from the UK regarding inhaler targets and the importance of a patient-centric approach



Jane Scullion BA(Hons) MSc is an experienced respiratory nurse consultant in the UK and works in the University Hospitals of Leicester. She is the UK Inhaler Group educational lead and a member of the European Inhaler Group ADMIT. Jane is passionate about improving patient outcomes through education, is a national and international speaker on respiratory matters and well published within the field.

For the past 20 years Jane has been a Consultant Respiratory Nurse and more recently Service Lead for Interstitial Lung Disease (ILD) at University Hospitals of Leicester. In her clinical role, in the respiratory unit, Jane runs her own clinics diagnosing, prescribing treatment pathways and medications; she also receives direct referrals for a range of individuals presenting with respiratory symptoms. Jane also has a teaching, service development and research elements to her role; she undertakes peer support and staff development as one of the senior nurses at the hospital.

Jane has a particular interest in why individuals make the choices they do, especially with regard to lifestyle choices and particularly medication beliefs. She recently led on inhaler standards for the United Kingdom Inhaler Group (UKIG) and is currently their Director of Education. Additionally, Jane is a member of the Aerosol Drug Management Improvement Team (ADMIT) and has led a project to develop inhaler videos for patient education.

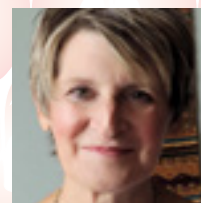
Jane has close links with charities and professional organizations in her field which led to a Meritorious Award for services from the British Thoracic Society, lifelong membership of the Primary Care Respiratory Society as recognition for services to the society and an Outstanding Contribution to Respiratory Nursing from the Association of Respiratory Nurses. Jane has a MSc in Health Psychology, a BA(Hons)/Respiratory and is a Registered General Nurse and has a Diploma in Psychology of Asthma.

3:30 – 4:30 pm ET Pulmonary Hypertension: Causes, Diagnosis & Treatment

Pulmonary hypertension is a type of high blood pressure that affects the arteries in the lungs and the right side of the heart. Signs and symptoms can develop slowly. Pulmonary hypertension is hard to diagnose early because it's not often detected during a routine physical exam. Even when pulmonary hypertension is more advanced, its signs and symptoms are similar to those of other heart and lung conditions. This session will explore the signs, symptoms, and risk factors as well as common diagnostic tests and current treatments.

Learning Objectives

- Identify the signs and symptoms and risk factors associated with Pulmonary hypertension
- Explain the World Health Organization (WHO) Pulmonary Hypertension (PH) groups
- Outline diagnostic tests that maybe used to identify patients with PH



Angela Taylor BSc RRT CRE has worked as a Registered Respiratory Therapist for 35.5 years and a Certified Respiratory Educator for 20 years. She was a member of a multi-disciplinary team for Pulmonary Hypertension Clinic. After a very brief retirement she returned to work with Public Health to fight the pandemic.



Colin Van De Watering RRT CRE has worked for 11 years at ProResp Inc., first as a Clinical and Long-term care Coordinator and currently in management. He lives in Port Stanley, ON and is also an instructor at Fanshawe College. Colin worked as a respiratory therapist at the London Health Sciences Centre (LHSC) for several years.

Program, WEEK 1, Wednesday, November 2ND, 2022

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NOVEMBER 2-9 / NOVEMBER 9-10, 2022

4:30 – 5:30 pm ET Can Canada Achieve its “5 by 35” Tobacco Reduction Target?

In 2016, dozens of tobacco control researchers, leaders, advocates, and policy makers from across the country attended the ambitious, two-day “Tobacco Endgame Summit” to discuss the future of tobacco control in Canada. The lofty goal of the summit was to reshape and reignite tobacco control in Canada and to set the stage for accelerated and substantial reductions in tobacco use, referred to as the “endgame.” One of the major outcomes of the summit was a proposed new national target—to reduce tobacco use to less than 5% prevalence by 2035 (“<5 by 35”). Les Hagen, one of the key advocates for “5 by 35”, will discuss where we are with this ambitious goal and what we need to do to get back on track for success.

Learning Objectives

- Describe Canada’s 5 x 35 target.
- Explore three barriers to this target.
- What is MPOWER?



Les Hagen MSM is the executive director of Action on Smoking & Health and an adjunct professor at the University of Alberta School of Public Health. For the past three decades, Les has played a key role in shaping tobacco reduction policies and strategies in Canada. His awards include a Meritorious Service Medal from the Governor General of Canada and a certificate

of merit from the Canadian Public Health Association. Les is also an amateur paleontologist and an outdoor enthusiast.

5:30 – 6:30 pm ET **KEYNOTE** COVID Update: If Only We Could Wish it Away



Renowned infectious diseases expert and media personality, Dr. Abdu Sharkawy, will provide an update on COVID-19. Despite an overwhelming global movement to abandon virtually all public health measures, COVID-19 has not disappeared. Epidemiologists describe a mix of Omicron sub-variants spreading globally – referring to them as “variant soup” or “Scrabble variants” because they contain the letters “Q” and “X”. At this time, it is not clear which variants will emerge as dominant or whether they will continue to co-exist, making winter surges difficult to predict. COVID-19 continues to put an increased burden on the Canadian healthcare system and accounts for a large number of hospitalizations, lost time at work and school, reduced quality of life, and deaths.

Learning Objectives

- Describe the frequency and variety of persistent symptoms of COVID (i.e., Long COVID)
- Review the method of transmission of COVID
- Discuss the efficacy of current COVID-19 vaccines



Abdu Sharkawy MD is an Internal Medicine & Infectious Diseases Specialist at the University Health Network and an assistant professor of medicine at the University of Toronto. He also serves as the Infectious Diseases Lead Physician for the UNH Post-COVID Clinic based at Toronto Western Hospital. Since the onset of the pandemic, he has been one of Canada’s leading voices on COVID-19

epidemiology, management, public education & advocacy. He has delivered over 200 lectures, town hall presentations & medical symposia on local, provincial, national, and international levels & has been featured prominently on numerous media outlets across Canada to offer his insights and expert analysis.

He is a longstanding member of the guidelines committee for the Association of Medical Microbiology & Infectious Diseases of Canada and has almost 20 years’ experience on the front lines dating back to the SARS pandemic of 2003. He is a passionate Leafs & Raptor fan who saves his best cheers for his loving wife and 3 young boys.

Program, WEEK 1, Thursday, November 3RD, 2022

CANADIAN NETWORK FOR RESPIRATORY CARE
VIRTUAL RESPIRATORY CARE &
EDUCATION CONFERENCE



A PATH TO
HOPE, JOY & WELLNESS
NOVEMBER 2-3 / NOVEMBER 9-10, 2022

10:00 – 11:00 am ET PRODUCT SHOWCASE

Make Every Puff Count: Strategies for Reducing the Environmental Impact of pMDIs

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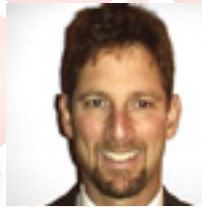


TRUDEMED
INTERNATIONAL

There has been a lot of recent media and public attention on the environmental impact of metered-dose inhalers, particularly from the Canadian CASCADES initiative that has created a Climate Conscious Inhaler Prescribing Collaborative. But what do we do when changing to a DPI may not be best for the patient? Or what the patient wants? Join Dr. Alan Kaplan as he discusses the impact that pMDIs have on the environment and strategies that you can implement within your practice to minimize this. If pMDIs are the best option for your patient, there are many different actions that you can take to reduce the environmental impact compared to switching to DPIs.

Learning Objectives

- Review the issues of pMDI use and effect on climate change
- Discuss how to make some differences in our practice to minimize the environmental impact



Alan Kaplan MD CCFP(EM) FCFP is a family physician with a special interest in respiratory medicine. He is the Chair of the Family Physician Airways Group of Canada and the Communities of Practice in Respiratory Medicine for the College of Family Physicians of Canada. He is the lead physician for the Pulmonary Rehabilitation clinics in his LHIN (Local Health Integration Network).

He is a senate member of the International Primary Care Respiratory Group. He is the past-Chairperson of the Respiratory Section of the College of Family Physicians of Canada and a Member of Past Canadian Consensus Guidelines for Asthma, COPD and Sinusitis. Dr. Kaplan is Co-Chair, Health Quality Ontario COPD Community Management Standards committee. He is the international editor for Nature's Primary Care Respiratory Journal as well as the Italian Journal of Primary Care. Dr. Kaplan is married with four children and four dogs and is an ardent baseball player.

11:00 am – 12:00 pm ET INDUSTRY SYMPOSIUM Evolving COVID Outpatient Therapies

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As new COVID-19 variants emerge, earlier treatments may be less effective. Many public health measures globally against COVID-19 have been removed, and people are reluctant to take simple precautions such as wearing masks in public. Yet deaths from COVID-19 remain high across the country, particularly for patients with high-risk conditions. Dr. Goyal will explore current COVID-19 treatments and answer questions about who is high-risk for complications from current circulating variants.

Learning Objectives

- Increase awareness of COVID-19 treatments available
- Identify high risk patients
- Discuss support options for patients that are treated or high risk of complications



Sohal Goyal MD is a community-based family physician in Mississauga. He is also the Lead Physician for the first community-based COVID-19 assessment and Treatment Centre in Ontario. The clinic uses a team-based approach with pharmacists, nurses, and physicians to deliver COVID treatments to the community. Dr. Goyal graduated from the University of Toronto Faculty of Medicine and is a Fellow of the College of Family Physicians. He is an assistant clinical professor with McMaster University Department of Family Medicine

Program, WEEK 1, Thursday, November 3RD, 2022

CANADIAN NETWORK FOR RESPIRATORY CARE
VIRTUAL RESPIRATORY CARE &
EDUCATION CONFERENCE



A PATH TO
HOPE, JOY & WELLNESS
NOVEMBER 2-9 / NOVEMBER 9-10, 2022

12:00 – 1:00 pm ET

INDUSTRY SYMPOSIUM

Simplifying Biologic Selection: The Importance of Biomarkers in Severe Asthma

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REGENERON

Severe asthma affects approximately 5% of the number of patients with asthma in Canada. Recently a number of biologic medications have been approved for treating these patients. How do prescribers decide which biologic is right for their patients? Dr. McIvor will explore the importance of biomarkers in determining which biologic may be appropriate for different patients.

Learning Objectives

- Define Severe Asthma
- Explore current Severe Asthma treatment options
- Discuss how to choose “the right” biologic



Andrew McIvor MD MSc FRCP (E) FRCP(C) is originally from Belfast in Northern Ireland, UK. He qualified with an Honor's degree in Medicine from Queen's University, Belfast in 1984.

Dr. McIvor's major clinical and research interests are in “Knowledge Translation in Asthma and COPD” and smoking cessation. Dr. McIvor has over 175 peer-reviewed publications. He recently completed a term as Chairman of the Asthma Committee of the Canadian Thoracic Society and as an examiner of the Royal College of Physicians Canada in Respiratory Medicine. Dr. McIvor is currently a Professor of Medicine at McMaster University and a Staff Respirologist at the Firestone Institute for Respiratory Health, St. Joseph's Healthcare, Hamilton, Ontario, Canada.

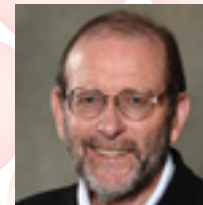
1:00 – 2:00 pm ET

Spirometry Standards Update

This presentation was developed to highlight the main changes introduced in the 2019 American Thoracic Society (ATS)/European Respiratory Society (ERS) spirometry standards and address some of the frequently asked questions regarding the standards. It is intended for those who are already familiar with conducting spirometry.

Learning Objectives:

- List the requirements for conducting quality spirometry meeting current international technical standards.
- Demonstrate understanding of the revisions in the 2019 ATS/ERS technical standards for spirometry relating to equipment, quality control, patient instruction and conducting and Reevaluating spirometry manoeuvres.



Brian Graham PhD is currently Professor Emeritus at the University of Saskatchewan, Saskatoon, Canada in the Division of Respirology, Critical Care and Sleep Medicine where he has been a member since 1976. He spent most of his career doing research on pulmonary function testing. He chaired both of the joint American Thoracic Society and European Respiratory Society task forces to

develop international standards for the measurement of diffusing capacity of the lung in 2017 and for the measurement of spirometry in 2019. He received the 2020 American Thoracic Society Robert Crapo Lifetime Achievement Award, which recognizes seminal advances in the use of pulmonary function testing, diagnostics, standardization, and application that has impacted diagnostic approaches and pulmonary function testing on a global scale. He also received the 2021 Canadian Thoracic Society Distinguished Achievement Award in recognition of his exceptional service as an innovative leader and researcher in the field of pulmonary function standards and testing.

2:00 – 2:30 pm ET

BREAK & VISITS EXHIBITS

Program, WEEK 1, Thursday, November 3RD, 2022

CANADIAN NETWORK FOR RESPIRATORY CARE
VIRTUAL RESPIRATORY CARE &
EDUCATION CONFERENCE



2:30 – 3:30 pm ET

Supporting Patients Living at Home Longer: Integrated Care Model

Integrated care models allow for smooth transitions for patients across the continuum of care. Learn about a unique integrated care model that follows patients from the hospital to the home. Patients can benefit from care closer to home, easier transitions, improved navigation across the system, and better patient outcomes and experience. Care would be better organized around patient needs and preferences and based on shared responsibility between patients and caregivers.

Learning Objectives

- Discuss current needs/gaps in home care
- Identify where educators can provide support for the patient's journey
- Discuss the role of integrated care
- Apply tools and resources to map out options for the vulnerable/marginalized individuals



Ana MacPherson MASC RRT CRE CTE worked with patients from neonates to geriatric across a diverse setting including, primary, community, tertiary and research. She believes in the Institute for Health Improvement's Quadruple Aim framework: better patient and provider experience, better population health outcomes, and better use of health care dollars.

Ana's background includes knowledge and experience in complex chronic disease management, mental health and addiction and social challenges. As a health educator, she believes in empowering patient / family / caregiver / provider in self-management skills. In the last few years she received certifications in Program Management, HQO IDEAS, Senior Fitness instruction, Tobacco Cessation, Motivational Interviewing, Brief Action Planning, and Stanford Self-Management Program.

Ana is currently working with the Integrated Comprehensive Care (ICC) Program at St Joseph's Healthcare in Hamilton. Her role includes: the facilitation of seamless transition of patients with complex needs from hospital to home, care coordination with outpatient hospital care team and community providers, self-management education and system navigation for patient and family.

3:30 – 4:00 pm ET
SPEED NETWORKING

4:00 – 5:30 pm ET

Using Gamification in Palliative Care: A Novel Approach to Difficult Conversations

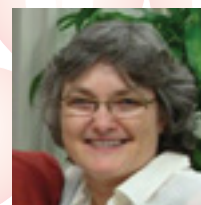
In this interactive session, which includes a non-threatening game about end-of-life, participants will obtain tools that help facilitate difficult conversations with clients/patients, family, and friends.

There are many in healthcare and the wider community who are confused about what palliative care means, what levels of care will be offered, and when it should begin. CREs and CTEs often work with individuals living with life-limiting diagnoses and should be able to answer these questions and help relieve the stress surrounding living a good life after such a diagnosis. The use of games in health education is not new. Many may be familiar with the Jeopardy game played during sessions with other educators or our clients/patients, but the use of gamification is new(ish) and recent research demonstrates its utility.

This workshop will allow time and space to discuss palliative care and the use of gamification and games in opening dialogue with our clients/patients, family, and friends. Discussions will occur in the large group through chats and allowing participants to join the presenter on "stage" and through a game format that facilitates small group discussion about living, dying, and what is important to you.

Learning Objectives

- Discuss the meaning of palliative care
- Explore tools to facilitate difficult conversations about palliative care and end-of-life care using gamification



Andrea White Markham RRT CRE CTE remains committed to lung health and fascinated by why people do the things they do as she nears the end of her career of 43+ years. Since retiring from full time work, she continues to follow her passion as an educator – developing a Complex COPD Program for primary care, collaborating in development of a program for cannabis educators, reviewing and updating the educational information available on lung.ca and as a member of the Board of Directors for CNRC. She is also dedicated to assisting those who are food insecure in her local community, volunteering at the Food Bank and participating in fundraising activities throughout the year. Andrea is a member of the local 100 Women Who Care and encourages you to explore this organization for a fun way to build relationships and impact your local community.

Program, WEEK 1, Thursday, November 3RD, 2022

CANADIAN NETWORK FOR RESPIRATORY CARE
VIRTUAL RESPIRATORY CARE &
EDUCATION CONFERENCE



5:30 – 6:30 pm ET

Compassion Fatigue: Let's Talk It Out

The COVID-19 pandemic has drastically changed healthcare which may lead to an increase in healthcare professionals experiencing compassion fatigue. This virus has caused an increase of severe COVID-19 patients who are experiencing life-threatening respiratory symptoms in critical care units, especially in the Intensive Care Unit. The intensive care unit is a stressful environment for all healthcare workers due to most patients being critically ill or unstable and sometimes healthcare workers are involved in traumatic and abusive events. After continuous exposure to these types of events, healthcare professionals are more likely to experience moral distress and develop compassion fatigue and burnout. The stress and trauma of these situations have been aggravated by bed shortages, staff shortages, lack of ventilators and lack of proper personal protective equipment. Health professionals must also deal with potentially contracting the virus and becoming infectious themselves. Many have taken steps to avoid exposing their loved ones, which has led to social isolation and a reluctance to seek help and support. This presentation will discuss the difference between burnout and compassion fatigue. The presenters will provide scenarios that lead to compassion fatigue. Lastly, the presentation will discuss treatments and strategies to address compassion fatigue and burnout.

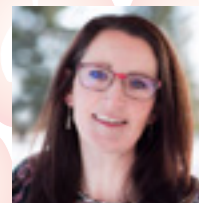
Learning Objectives:

- Discuss the difference between burnout and compassion fatigue.
- Explain scenarios that lead to compassion fatigue in healthcare professionals.
- Explore treatments and strategies to address compassion fatigue and burnout.



Lynard Higoy *BMR(RT) RRT CRE CTE* is a community respiratory therapist in a rural community about 100 km east of Edmonton under the Alberta Health Services (AHS) Central Zone covering the counties of Minburn, Two Hills, and Lamont. He has eight years of work experience as an RT with the Winnipeg Regional Health Authority and Alberta Health Services. He graduated in 2013 with a bachelor's degree in Medical Rehabilitation in Respiratory

Therapy from the University of Manitoba. Lynard is currently pursuing a Master of Arts in Interdisciplinary Studies with a focus on Work, Organization & Leadership through Athabasca University, Faculty of Humanities and Social Sciences. He is also completing his Graduate Diploma in Leadership and Management through Athabasca University Faculty of Business, which he anticipates completing early next year. His focused interests include rural respiratory therapy, the role of RRTs in Primary Care settings, adaptive leadership across generations, rural based Pulmonary Rehabilitation programs, Supine Spirometry for early detection of ALS, the role of social media on smoking cessation and healthcare leadership.



Kerensa Pidwerbeski *RN CHPCN(c) CGSC CCHNC*

CCFP is a faculty member and student advisor for the Comprehensive Holistic Nurse & Coaching Certificate Programs. In her current role of Integrative Palliation, Grief & Bereavement Programs Development and Instructor, she is co-developing a nursing program that will enrich the lives of nurses, patients and their families as they journey through end of life and beyond.

Kerensa has been a registered nurse since 2005 with an extra certification in Hospice Palliative Care Nurse through the Canadian Nurses Association (CNA 2014). Other certifications include Grief support counseling, Holistic Nurse Coaching, Intermediate Emotional Freedom Technique, Reiki, and Compassion Fatigue Professional.

Kerensa is owner and CEO of Together in Light. In her independent nursing practice, she helps spiritually-distressed women transform their experiences and suffering with integrative practices so that they can align with health and wellness and live radiantly in their body in all environments and stages of life. She brings a mixture of holistic practices and clinical/medical knowledge to her approach of care that helps others flourish. These tools include nurse coaching, narrative story, creative expression, meditation, energy healing -Emotional Freedom Technique (EFT), Reiki, nature, and sound healing building a blueprint of compassionate self-care that embraces the spiritual aspect that is often overlooked. "When we address spiritual distress and create mind~body~spirit connections, we function as a whole" she states. She works to help her clients find relief from the deep soul pain such as grief, and trauma. She brings these tools in individual sessions, group sessions and corporate workplaces, helping create space for wellness to occur. Being a light for others in her work and life holds great value, helping others to walk in their light holds just as much.