

# AIRWAVES

## Canadian Respiratory Health Professionals

**Our mission:**

To engage health professionals and to provide national leadership to achieve

- The promotion of lung health
- The prevention of lung disease
- The management of lung disease

Through....

- Facilitation of inter-professional collaboration
- Knowledge generation (research)
- Knowledge translation (education and dissemination)

Summer 2009

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## The 2nd Annual Canadian Respiratory Conference

By Peter Vavougiros, PT, CRC Organizing Committee Co-Chair

I am pleased to report on the 2nd Canadian Respiratory Conference (CRC) that took place in Toronto, April 23-25, 2009. It was again an opportunity for the respiratory health community to mingle and network while world class researchers showcased leading edge concepts from a wide variety of respiratory perspectives and domains. This year's presentations followed last year's conference content very well; it was evident the Scientific Committee had made every effort to follow up on last year's recommendations.



This year's conference once again reached full capacity at approximately 600 delegates, of which 190 were allied health professionals (131 from CRHP). Many of our colleagues who attended the Ontario Lung Association's Better Breathing Conference in January took advantage of the discounted rate to come to the CRC 2009.

There was a feeling of excitement in the air as delegates began to interact with each other,

## 2<sup>nd</sup> Canadian Respiratory Conference continued...

rekindle old relationships and of course continue to form new ones. The review of the conference evaluations has confirmed the conference as a resounding success according to delegates.

The opening reception gave everyone an opportunity to meet the CRC Organizing and Scientific Committees and to thank to all the sponsors who make such a conference possible. The breakfast satellite symposiums sponsored by industry partners provided additional educational opportunities, which included an international perspective from visiting professors and researchers. From this we learned we are not alone in the battle against respiratory disease and that our respiratory community is well established on the world stage.

The conference opening remarks began with positive news when Nora Sobolov, CEO of The Lung Association (TLA), announced to delegates that the federal government will deliver on its election promise to support the



National Lung Health Framework to the tune of 10 million dollars! Congratulations to all those who advocated for better lung health care over the last 4 years!

Day 1 plenary sessions ran at full capacity, both stimulating and challenging us to build knowledge and facilitate knowledge translation. Further to this we were encouraged to redefine our treatment targets and determinants of success. It was strongly presented that exercise activity is the greatest treatment strategy for the management of chronic disease. We also learned that Cystic Fibrosis through better and advanced research is now being seen more and more as an adult disease and that research is allowing us to understand its mechanism better. Day 1 included concurrent sessions in the morning and in the afternoon. There was definitely a lot to learn and topics to interest everyone, such as rethinking exercise with COPD, new advancements in pulmonary hypertension therapy, and lung involvement in connective tissue disorders.

The optional lunch sessions on Day 1 and Day 2 were not so optional as attendance was almost at capacity. It was a great opportunity to eat a quick lunch and learn something new. Afternoon concurrent sessions included many topics of interest including sleep apnea, pediatric asthma, end of life care issues, gender and airways

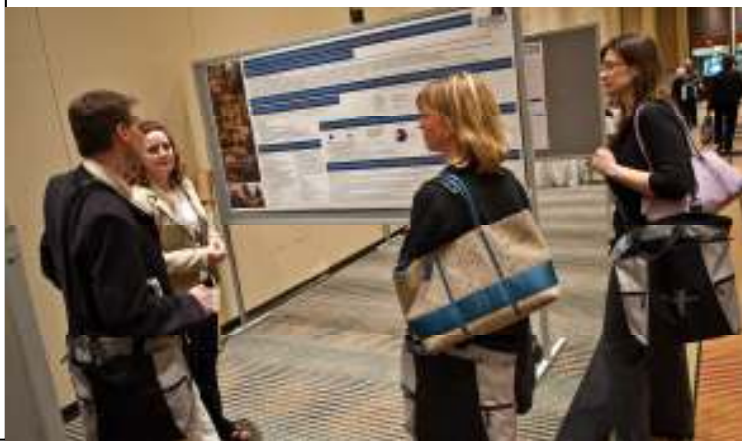
disease, lung disease surveillance, pneumonia in children, ventilator associated pneumonia and more. **Note: Don't forget to look for the Canadian Respiratory Journal Supplement that will include summaries of all the presentations of CRC 2009.** This will allow you to review the quality of the presentations. To request copies, email Lise Dingwell at [ldingwell@lung.ca](mailto:ldingwell@lung.ca).

Day 2 began like Day 1 although many delegates were a little tired from the Friday evening social event: An Evening at The Academy. All who attended had a



great time dancing and showcasing their singing and pool sharking abilities! The breakfast symposium highlighted a patient-centered approach to the management of respiratory disease and that COPD is more than a lung disease. The plenary session focused on early muscle dysfunction for the patient in the ICU and a better understanding of knowledge translation. This was followed by moderated poster sessions which allowed for excellent peer review of quality research projects, good discussion and insight in what is being done in research today. The moderators offered their expertise and knowledge. The afternoon offered concurrent sessions in the areas of patient empowerment and self management in chronic respiratory disease of which the principles discussed can be easily applied to any chronic disease.

There were other session topics on long term ventilation, assessment of disease in the PFT lab, and quality and planning in prevention of acute respiratory disease. The final plenary session made us a little more aware of patient safety and how important it is to consider ways of advancing patient safety in the health system. In the closing remarks, Conference Chair Dr. George Fox thanked



**2<sup>nd</sup> Canadian Respiratory Conference continued...**

delegates and conference sponsors and invited all the delegates to the 3<sup>rd</sup> CRC next year in Halifax, Nova Scotia from April 29-May 1<sup>st</sup>, 2010.

I have enjoyed working with the CRC Organizing Committee the last two years in the development and growth of the CRC. I would like to thank Scientific Committee Chair Dr. Roger Goldstein for his vision for the CRC and Co-Chair Dr. Robin McFadden for his hard work. Finally, on behalf of the CRHP Leadership Council, I wish to thank Dr. Darlene Reid, CRC Co-Chair of the Scientific Committee, for her professionalism and dedication. She and the CRHP representatives on the Scientific Committee have not only represented us well, they have facilitated bringing allied respiratory health research forward to become more visible and credible.

After 5 years of transition development and growth, CRHP is now a credible voice in the TLA family. It is well organized, has a solid infrastructure and continues to grow. As someone mentioned to me recently, the CRC presentations are given by “sophisticated” researchers - I think it is an honour that our CRHP research champions share the stage with those researchers.

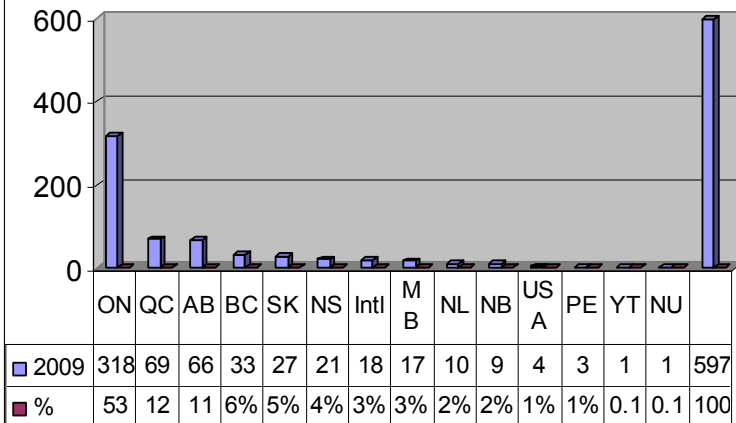
In my closing remarks I would like to say I feel privileged to have represented the CRHP in this quality event and as I leave the Leadership Council I wish to thank all those I have had the chance to work with for giving me the opportunity to share my knowledge and acquire new knowledge. To Bertha, Cheryl, Rodel, Darrel, Donna, Nancy and newcomers to the CRHP council Dina and Donna I wish the best of luck in the coming year. I cannot end without an acknowledgement to Nora Sobolov for her vision and leadership, and to Janet Sutherland and Lise Dingwell for their tireless efforts in supporting and guiding CRHP through its maturing process. I bid you all Adieu!



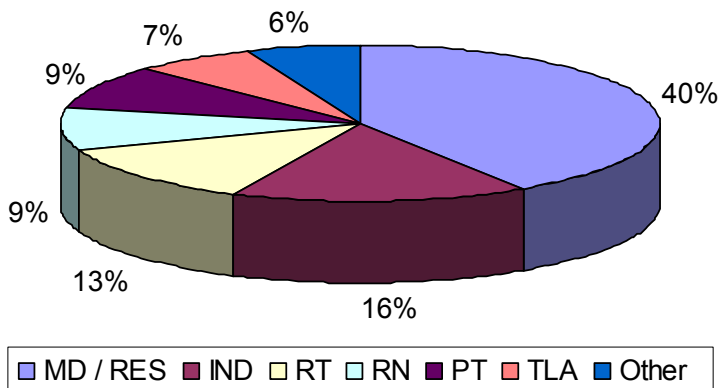
Left: CRHP Leadership Council Chair Bertha Schofield presents Peter Vavougios with a certificate in recognition of his leadership and service to the CRHP, 2004-2009.

Right: CRC 2009 Statistics.

**CRC 2009 Registration by Province**



**CRC 2009 Registration by Profession**



**Call for Themes and Topics for CRC 2010**

The CRC Scientific Committee is calling for your ideas for speakers, themes, and topics for CRC 2010!

Please forward your ideas to [ldingwell@lung.ca](mailto:ldingwell@lung.ca).



# Health Minister announces \$10 Million in Support for National Lung Health Framework

In April, 2009, Health Minister Leona Aglukkaq announced a federal investment of \$10 million for initiatives that will address gaps identified in the National Lung Health Framework, and provide information to Canadians on how to prevent, detect and better manage their respiratory diseases. This injection of funds over three years (2009 – 2012) will support the Framework to begin work in its four Strategic Areas.

The \$10M investment will be allocated between 2009 and 2012 to the Public Health Agency of Canada (PHAC) and the First Nations and Inuit Health Branch (FNIHB) of Health Canada. Both PHAC and Health Canada have been working closely with the National Lung Health Framework Steering Committee to ensure that this investment will reflect the input and priorities of stakeholders identified in the Framework, and support measures that address information gaps.

A set of broad categories or areas of funding have been identified, reflecting many of the goals, strategies and activities identified in the National Lung Health Framework. These broad funding areas are currently being further defined with input from the Steering Committee.

An open RFP and peer-review process will take place later this year to solicit and evaluate proposals for projects and initiatives within each area. As part of this process, a communications plan will be developed to ensure that the call for RFPs is widely distributed. A memo will also be circulated among stakeholders highlighting in detail what will be included in these RFPs, to allow stakeholders to begin preparations for proposal submissions in advance of the formal RFP launch.

This federal investment is just one part of the National Lung Health Framework Action Plan. Many of the activities in the Action Plan were well underway before this funding announcement, and will produce their own results over the next three years. Other investors and industry partners have expressed interest in making funds available for additional activities. Stakeholders have also made it clear that respiratory health research requires a significant funding boost. Over the coming months the Steering Committee will be working closely with the research community to identify the steps needed to make this happen.

As part of the Action Plan development process, we are asking stakeholders to share information about the respiratory health projects, programs and initiatives taking



Allison Gardner and Darren Fisher talk to delegate Peter MacKenzie at CRC 2009.

place in Canada. This will help us to promote the excellent and innovative programs that are making a difference in respiratory health.

This fall, stakeholders will be able to search an online database and learn about other programs and projects across Canada. This will be a great tool for organizations that are looking to build a new program or to enhance the services they are already providing. This will also be a great opportunity to promote the work that you are doing and share what you have learned with others. The database can be found at <http://www.acaciaconsulting.ca/lung/>.

## Manuscript Submission to the Canadian Respiratory Journal

Submissions to the CRJ by CRHP members are always welcome. Please send submissions to:

Dr. N. R. Anthonisen  
*Canadian Respiratory Journal*  
University of Manitoba, HSC  
810 Sherbrook Street, Rm RS 319  
Winnipeg, Manitoba R3A 1R8  
Tel: 204-787-2562  
Fax: 204-787-4586  
[nanthonisen@exchange.hsc.mb.ca](mailto:nanthonisen@exchange.hsc.mb.ca)

Instructions to Authors are available online at [www.pulsus.com/respir](http://www.pulsus.com/respir).

# CRHP Committee Work a Rewarding Experience

By Nancy Garvey RRT, CAE, MASc(c)

This past April, I completed a term of service with the Canadian Respiratory Health Professionals (CRHP) Research Committee, serving the last 1 1/2 years as the Research Committee Chair. This included a position on the Leadership Council. At this point, I would like to thank the CRHP and



particularly the members of the Research Committee, Leadership Council and The Lung Association staff for this wonderful opportunity to grow both personally and professionally!

Personally, I've had the chance to meet colleagues from across the country enhancing networking opportunities, and learning informally about regional solutions to respiratory health issues. The in-person meetings and teleconferences have provided a congenial atmosphere spurring friendships that would otherwise have been only remotely possible. Our membership includes excellent professionals with a variety of personal interests that make the "committee experience" more than worthwhile!

Professionally, the Research Committee transition team worked to ensure representation from across the country, across disciplines and with a variety of research expertise, enriching the function and experience within the group. All those I've known who have served on the Committee have commented on the learning they've experienced (and enjoyed) from colleagues. Both the Research Committee and Leadership Council exemplify members working together as a team; no doubt the reason CRHP today is representative of such admirable goals and high ideals. Donabedian's quality management construct, enhanced by the late Dr. Tom MacKenzie, Queen's University, states that outcomes are a function of process + structure + individual characteristics, and I believe the Research Committee and Leadership Council have been successful in striving to include the best in each of those elements.

The Research Committee is committed to building respiratory research capacity among CRHP members, and there are opportunities for significant contributions to

the field of respiratory medicine. I would encourage interested members to enhance their education and contribute to respiratory research, and participate in the CRHP committee structure, as well as ask all members to support their colleagues in the pursuit of this noble endeavor. I would also encourage those of you who have the potential to pursue clinical scientist roles at academic institutions, including community links with academia, to investigate and establish those roles and relationships, and to develop strong research teams grounded in individual's expertise.

The Research Committee will be moving to establish a formalized network which hopefully will facilitate collaborative partnerships among researchers across the country. There is much to be gained both for ourselves in terms of personal and professional growth, but more so for the patients we are all here to serve, for as we all know, **"When you can't breathe, nothing else matters."** Thank you all.

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Top left: CRHP Leadership Council Chair Bertha Schofield presents Nancy Garvey with framed TLA Christmas Seals in recognition of her service on the CRHP Research Committee and Leadership Council, 2007-2009.

## Funding for Regional Respiratory Health Education Workshops

The CRHP Research Committee will host a new competition for Regional Respiratory Health Education Workshop Funding. Up to \$2,500 will be available to members with an interest in developing, planning and delivering a workshop or conference with a focus on respiratory health. The audience may be health professionals or the general public. Funds awarded depend on funds available.

**Deadline: September 1, 2009**

### How to Apply:

Please visit the CRHP website [http://www.lung.ca/crhp-pcsr/research-recherche\\_e.php#RRHEW](http://www.lung.ca/crhp-pcsr/research-recherche_e.php#RRHEW). Please complete the *Regional Respiratory Health Funding* form and e-mail a copy to [mmcevoy@lung.ca](mailto:mmcevoy@lung.ca) and mail the original to the Canadian Lung Association no later than September 1, 2009 to:

Michelle McEvoy  
Coordinator, National Research Programs  
The Lung Association  
300-1750 Courtwood Crescent  
Ottawa, ON K2C 2B5  
613-569-6411 x 262

# COPD Toolkit<sup>®</sup>: A Canada-wide resource centre for COPD management

**Objective:**

To develop a Canadian repository where all health care professionals involved in COPD management can access, share, evaluate, develop and refine resources for COPD management.

**Project:**

A preliminary COPD Toolkit<sup>®</sup> of over 100 items has been developed and tested in the Saskatoon LiveWell™ Chronic Disease Management Program (LiveWell™ Program). The tools range from PowerPoint presentations for patient education to requisition forms for ordering COPD rehabilitation to flow sheets for COPD management. The Canadian Thoracic Society COPD Guidelines are followed in the program and reflected in the COPD Toolkit<sup>®</sup>.

The tools will be posted on a new website [www.COPDToolkit.org](http://www.COPDToolkit.org) which will be freely available to health care professionals working in COPD management who have registered for the pilot testing phase. Health care professionals who download the tools will be asked to post a review of the tool including how useful the tool was. Health care professionals will have no restrictions on which tools may be used and are welcome to adapt the tools to their local setting. They will also be asked to post any tools which they have developed for COPD management.

Visit [www.COPDToolkit.org](http://www.COPDToolkit.org) now for a preview of the tools developed to date. It is expected that the website will be fully functional around the end of August. Fifty-three sites across Canada have signed up to pilot the COPD Toolkit<sup>®</sup>. The results of the pilot and the evaluation of the project will be presented at CRC in April 2010.

There will be a template for developing and posting new tools which will include a brief statement of the purpose of the tool, the developer's name and institution, and the date of the latest revision.

The website will use a modified wiki approach, so that there will be on-going peer review of tools by health care professionals and on-going posting of new tools. The Lung Association will provide the administration of the site but will not unilaterally control content other than to clear malevolent postings. Users will be asked to register for the site (at no charge) and will be required to self-identify as health care professionals. Registrations will be verified by the website administrator.

The web design will allow registered users to browse through the tools provided by category and search by keyword. Categories will be COPD rehabilitation programs, exercise, COPD management, and patient self-management. Functions will be

presentations; fact sheets; patient education; physician forms; logistics; etc. When a user selects one of the tools, a list of related tools that the user may also want to select will be presented.

Funding is also being sought to animate the COPD Toolkit<sup>®</sup> so that presentations are more effective. Video clips will be developed to demonstrate such things as inhaler techniques and various exercises. Live streaming will be developed which will both assist COPD program delivery at local sites and make program delivery possible using tele-health facilities.

## RespTrec<sup>®</sup> Dates

**Modules fill up quickly, so book early!**

**SpiroTrec**

Calgary, AB	Sep 19, 2009
Ottawa, ON	Oct 3, 2009
Regina, SK	Oct 24, 2009
Vancouver, BC	Nov 21, 2009
Halifax, NS	Dec 5, 2009
Toronto, ON	Mar 6, 2010
London, ON	May 8, 2010

**AsthmaTrec**

Winnipeg, MB	Sep 10-13, 2009
Edmonton, AB	Sep 19-22, 2009
Grande Prairie, AB	Sep 26-29, 2009
Calgary, AB	Jan 21-24, 2010
Toronto, ON	Feb 18-21, 2010
London, ON	Apr 1-4, 2010

**Asthma Management**

Winnipeg, MB	Sep 10-11, 2009
London, ON	Sep 18-19, 2009
Toronto, ON	Sep 25-26, 2009
Ottawa, ON	Sep 25-26, 2009
Calgary, AB	Jun 4-5, 2010

**COPDTrec**

Whitehorse, YK	Aug 25-28, 2009
Winnipeg, MB	Sep 17-20, 2009
Saskatoon, SK	Sep 19-22, 2009
Calgary, AB	Mar 11-14, 2010
Toronto, ON	Mar 25-28, 2010
Ottawa, ON	May 27-30, 2010

**COPD Management**

Winnipeg, MB	Sep 17-18, 2009
Moncton, NB	Sep 19-20, 2009
Saskatoon, SK	Sep 19-20, 2009
Edmonton, AB	Oct 17-18, 2009
Calgary, AB	May 7-8, 2010
Toronto, ON	May 28-29, 2010

**Please visit <http://www.resptrec.org/> for deadlines and additional information.**

## Call for Nominations to the CRHP Leadership Council for 2010

- Are you interested in giving leadership to the growing network of Canadian Respiratory Health Professionals?
- Do you want to help build national and regional collaboration within our sector?
- Shape standards of practice?
- Develop advocacy and continuing education opportunities?
- Guide research and knowledge dissemination?

Consider applying your skills and experience to the Leadership Council of the CRHP. There will be three vacant positions on the Leadership Council, effective April 2010. This is a great opportunity to serve your profession!

To be nominated, or to nominate someone else, you must be a member in good standing with the CRHP. Nominations will be vetted to ensure balance in the representation of disciplines and geographic regions.

Please request a Nomination Form by emailing Lise Dingwell at [ldingwell@lung.ca](mailto:ldingwell@lung.ca) and submit by fax to the CRHP secretariat at (613) 569-8860. For more information on CRHP initiatives see: [www.lung.ca/crhp](http://www.lung.ca/crhp).

## Membership Corner

The 2009-10 membership campaign began well, as members began updating their information and renewing online for the first time. **Membership is now 400 members strong and growing steadily.**

### CRHP by Numbers

Our membership year is April 1 to March 31.

**2009-2010 Members 403 (to date)**

Respiratory Therapists	187
Nurses	94
Physiotherapists	52
Pharmacists	25
Others*	44

\*The **Others** category includes: dietician, researcher, polysomnographic technologist, occupational therapist, physician, exercise physiologist, speech pathologist, and psychologist.

Members may join or renew at any time to begin receiving CRHP membership benefits, so please encourage your colleagues to visit [www.lung.ca/crhp](http://www.lung.ca/crhp) and increase our numbers.

## CRHP Student Award in Respiratory Care

The Canadian Respiratory Healthcare Professionals have established an award for students enrolled in healthcare programs to:

- Encourage continued pursuit of a career in respiratory-related care
- Provide recognition of healthcare students who demonstrate commitment to respiratory care and
- Encourage membership and participation in CRHP.

The award:

- 6 awards will be given in the amount of \$500 (2 to each of CRHP's founding disciplines – Nursing, Physiotherapy, Respiratory Therapy)
- 1-year membership in CRHP

Students who are interested in applying for the award should:

- Be a Canadian citizen or landed immigrant
- Be enrolled in the final 2 years in a health related program at a recognized accredited Canadian post secondary institution
- Currently hold or apply for a student member of the CRHP
- Have an average of 80% or higher
- Have demonstrated volunteerism with a lung health related organization
- Must not have received a CRHP award in the past 12 months.

To apply, students must:

- Submit a 500-word essay on a respiratory-related topic
- Include a letter of recommendation from an instructor/clinical coordinator
- Students may only receive the award one time

Universities with Respiratory programs will receive information regarding this award in the Fall. The CRHP/CPA Student Excellence Award in Physiotherapy will continue until Spring 2010.

## CRHP Committee Representatives

## Community Care and Respiratory Conference

By Pat German, RN, BN  
Information and Dissemination Committee

Thank you to our dedicated CRHP Liaison/Representatives in 2008-09:

TLA Board of Directors	Bertha Schofield, RN, NL
TLA Chronic Disease WG	Pat Steele, RN, NS Bertha Schofield, RN, NL
TLA Environmental Issues WG	Bertha Schofield, RN, NL
TLA Smoking Cessation Task Force	Gredi Patrick, RN, NS
TLA National Research Committee	Nancy Garvey, RT, ON
TLA Public Affairs	Darrel Melvin, RT, AB
TLA World COPD Task Force	Gredi Patrick, RN, NS
Canadian COPD Alliance Steering Committee	Darrel Melvin, RT, AB Pat Steele, RN, NS Dina Brooks, PT, ON
Canadian Physiotherapy Association	Tom Overend, PT, ON
Canadian Network for Asthma Care	Carolyn Ross, RN, AB
Canadian Respiratory Conference	Peter Vavougios, PT, QC
CRC 2009 Scientific Program Committee	Darlene Reid, PT, BC Mary Basha, RN, NL Rodel Padua, RT, AB Scott Butcher, RT, SK Tom Overend, PT, ON
CTS COPD D & I Committee	Darrel Melvin, RT, AB Pat Steele, RN, NS
CTS Canadian Respiratory Guidelines Committee	Sandra Small, RN, NL
CTS Canadian Respiratory Clinical Research Consortium	Nancy Garvey, RT, ON Lisa Cicutto, RN, ON Dina Brooks, PT, ON
National Lung Health Framework NLHF Health Promotion	Cheryl Winger, RN, MB Bertha Schofield, RN, NL Donna Rennie, RN, SK Cheryl Winger, RN, MB
Public Health Agency of Canada Chronic Respiratory Disease Committee – Surveillance Program	Peter Vavougios, PT, QC
Young Investigators Forum for Research in Circulatory and Respiratory Health	Nancy Garvey, RT, ON
Canadian Action Network for the Advancement, Dissemination and Adoption of Practice Informed Tobacco Treatment	Tracy Vanderwoude, RN, AB
SpiroTrec Expert Panel	Pat Steele, RN, NS

If you are interested in volunteering with the CRHP, please email Lise Dingwell at [ldingwell@lung.ca](mailto:ldingwell@lung.ca).

The Community Care and Respiratory Conference was held in Winnipeg May 28-29, 2009. The conference focused on care of respiratory clients in the community. Dr. Nick Anthonisen began the conference with a presentation on understanding new developments in respiratory disease. The Respiratory assessment and self-management tutorials provided all participants with skills to help clients. Presentations on the CTS Guidelines, National Lung Health Framework, the Provincial Home Oxygen Program, sleeping disorders, and smoking cessation completed the conference. Thanks to the planning committee, event speakers, participants, sponsors and vendors for making this a great conference!

## Events Calendar

**Come to Halifax for...  
"A Breath of Fresh Air"**  
**2010 Canadian Respiratory Conference**  
April 29 to May 1, 2010  
World Trade Convention Centre  
Halifax, Nova Scotia  
[www.lung.ca/crc](http://www.lung.ca/crc)

**Respiratory Nursing Society Conference**  
19th Annual Educational Conference  
September 18-20, 2009  
Marriott Courtyard Boston  
Boston, MA

**National Flu Awareness Month**  
October

<http://www.phac-aspc.gc.ca/im/2007/index-eng.html>

**Lung Cancer Awareness Month**  
November  
<http://www.lungcancercoalition.org/en/pages/resources/p ress/06>

**ASED 9: National Respiratory Care and Education Conference**  
November 12-14, 2009  
The Fairmont Chateau Whistler  
Whistler, British Columbia  
[www.cnac.net](http://www.cnac.net)

**World COPD Day**  
November 18  
<http://www.goldcopd.com/WCDIndex.asp>

# Resources

Our Resources section is not meant to be a comprehensive list of all useful sites and documents available to health care professionals, but rather “a good place to start”. If you come across a particularly helpful resource, send in your recommendation to [ldingwell@lung.ca](mailto:ldingwell@lung.ca) with the URL or an explanation on how to acquire the resource and a brief description of the resource’s importance/uses.

**Canadian Society of Respiratory Therapists** website: [www.csrt.com](http://www.csrt.com)

From the homepage, click on “Links” ([www.csrt.com/links.php](http://www.csrt.com/links.php)) to view a list of important Canadian and International respiratory therapy related websites.

**Canadian Physiotherapy Association** website: [www.physiotherapy.ca](http://www.physiotherapy.ca)

**Canadian Nurses Association** website: [http://www.cna-aiic.ca/cna/default\\_e.asp](http://www.cna-aiic.ca/cna/default_e.asp)

**CTS Guidelines and Standards:** [http://www.lung.ca/cts-sct/guidelines-lignes\\_e.php](http://www.lung.ca/cts-sct/guidelines-lignes_e.php)

**First Steps in Lifelong Health: A Vision and Strategy for Children’s Health and Environment in Canada:** [http://www.healthyenvironmentforkids.ca/img\\_upload/13297cd6a147585a24c1c6233d8d96d8/CPCHE\\_VandS.pdf](http://www.healthyenvironmentforkids.ca/img_upload/13297cd6a147585a24c1c6233d8d96d8/CPCHE_VandS.pdf)  
Report put out by the Canadian Partnership for Children’s Health and Environment.

**NurseONE:** <http://www.nurseone.ca>

NurseONE is a national, bilingual web-based health information service designed for the Canadian nursing community. NurseONE serves as a gate to resources and information for health care professionals in all domains of practice – direct care, education, administration, research, and policy – to support and enhance their clinical and professional expertise.

**Ottawa Model for Smoking Cessation:**

[www.ottawamodel.ca](http://www.ottawamodel.ca)

The Ottawa Model for Smoking Cessation, pioneered at the University of Ottawa Heart Institute, is a simple, systematic, clinical smoking cessation program designed to help hospitalized smokers quit smoking and stay smoke-free.

**RESPTrec:** <http://www.resptrec.org>

RESPTrec© is the professional development program created by the Lung Associations of Manitoba and Saskatchewan to teach health care professionals to better educate people with asthma and COPD. RESPTrec© gives health care professionals the latest information and training in asthma and COPD care.

**Réseau québécois de l’asthme et de la MPOC:**

[www.rqam.ca](http://www.rqam.ca)

The Réseau québécois de l’asthme et de la MPOC offers interdisciplinary training to members of the health services network and promotes disease self-management as well as the well-being of those who suffer from asthma and COPD.

**CRHP Website:** [www.lung.ca/crhp](http://www.lung.ca/crhp)

**CRHP Welcomes Dina Brooks and Donna Goodridge to the Leadership Council. Watch for their biographies in our Fall issue!**

## CRHP Leadership Council Members

**Chair** – Bertha Schofield, RN, BN, MEd - St. John’s, NF

**Chair-Elect** – Rodel Padua, RRT, BSc, CRE - Calgary, AB

**Research** – Donna Goodridge, PhD, RN - Saskatoon, SK

**Advocacy** – Darrel Melvin, RRT, CRE - Red Deer, AB

**Information & Dissemination** – Cheryl Winger, RN, BScN, CRE - Brandon, MB

**Liaison** – Donna Rennie, RN, PhD, CAE - Saskatoon, SK

**Membership** – Dina Brooks, PhD, MSc, BScPT - Toronto, ON

## CRHP Airwaves

**Editors** – Cheryl Winger & Lise Dingwell

**Information & Dissemination Committee:**

Kelly Ablog-Morant, RN – Richmond, BC

Mario Eugene Aquilina, RT – Sarnia, ON

Elizabeth Borycki, RN – Victoria, BC

Pat German, RN – Winnipeg, MB

Gisele Pereira, PT – St. Adolphe, MB

Lise Horth Susin, RT – Winnipeg, MB

To submit please contact:

Lise Dingwell

CRHP Administrative Assistant

613-569-6411 x 270

[ldingwell@lung.ca](mailto:ldingwell@lung.ca)

**Look for our next issue coming out Fall 2009!**