

Keep Nurses Working Protect Quality Care



ONTARIO NURSES' ASSOCIATION

ONA BIENNIAL CONVENTION 2010
NOVEMBER 9-11, 2010

A Report from the President

Dear ONA Members,

It is my pleasure to provide you with the following report from ONA's Biennial Convention, held in Toronto at the Fairmont Royal York Hotel, November 9-11, 2010.

The Biennial was the main component of a full week of ONA activities, beginning on November 8 with the hugely successful Human Rights and Equity Caucus, where strategies were developed to support ONA's commitment to diversity and to fighting discrimination and harassment in the workplace.

We capped the week on November 12 with education on the topic of pay equity – what it is, what the employer's obligations are, the Bargaining Unit's role, and what ONA is doing about this challenging issue.

The Biennial Convention, drawing almost 900 attendees, including voting delegates, alternate voting delegates and observers, is membership's opportunity to discuss issues and make decisions of critical importance to our Union.

It was astounding to see a record number of almost 200 first-time attendees at the Convention, so our message about membership engagement and succession planning is clearly being put into action. This bodes well for the future of our Union as more and more front-line members become involved in ONA activities.

The theme for this year's convention was: **"Keep Nurses Working – Protect Quality Care."** Our theme captured perfectly the current environment for ONA members in all sectors of the health care system, right across the province. In keeping with that theme, we are very focused on achieving the respect you so much deserve and working conditions that allow you to provide quality patient care.

These are difficult times for our registered nurses (RNs) and allied health professional members, with almost daily reports of cuts to nursing positions and layoffs, and the resultant negative impact on the care we are able to provide our patients, clients and residents in many communities across the province.

There is no question health care employers are trying to balance their budgets on the backs of our members. But I am confident the engaging dialogue we have and the key decisions we make, at the Biennial and on an ongoing basis, will help put us on the road to improving our working lives.

Our nurses and allied health members are the best thing about our health care system, and every one of our members makes a difference – to our patients, clients and residents. We are the best value for taxpayer dollars. We possess the knowledge, skills, education and dedication, and the outright passion for providing the care Ontarians need and deserve.

To that end, we gave our members at the Biennial a sneak preview of a new advertising campaign that ran through the month of November and into December.

Valuing the Invaluable

Our **"Valuing the Invaluable"** campaign – affectionately known as the Most Valuable Player (MVP) campaign – asks the public to imagine what it would be like if our RNs were treated with the same respect and value as MVP sports stars. A key component of the province-wide campaign are two fabulous radio ads that replicate our nurses' typical action-packed workday as if they were stars in a hockey game, supported by great print and transit shelter ads, ads on the social networking site Facebook, and on various media websites.

We also ran a full page ad on page A6 of the Globe and Mail on November 30, featuring ONA member Charmaine Brenn on a hockey card with the message that, dollar for dollar, RNs improve our lives more than almost anyone. We also ask the public to "support the best value in health care" by visiting our website at www.ona.org, where they can find more information. If you visit our website, a "pop up window" will take you right to the campaign webpage.

Keep Nurses Working Protect Quality Care

The other print ad in the campaign shows an autographed nurse's uniform and delivers the same message – that Ontarians should value the priceless health care skills, leadership and knowledge that RNs bring to our health care system.

This message is getting widespread public exposure through our campaign, and we've been receiving lots of positive feedback on the ads.

To kick off the campaign, our members attending the Biennial got the full red carpet treatment – literally. We rolled out a red carpet, and lined the way with flashing cameras from a core of “paparazzi” photographers and autograph seekers! Members were invited to attend a photo session to have their pictures placed on sports cards as a highlight of the event. Approximately 400 attendees got their pictures taken and put on sports cards – and they loved it! Watch the fun video clip of our “red carpet event” on our website. Just click on the YouTube icon or the link to “View All Videos” on our home page.

President's Keynote Address

In my keynote address, which you can see a video clip of on our website, I began by reminding all those in attendance, our leaders, front-line members there as observers and our nursing student members, just how invaluable all ONA members are and how much their care means to all Ontarians.

I know Ontarians recognize the value of what our members do. Polling continues to show they respect nurses above just about every profession.

Every one of our members – every nurse, allied health professional and nursing student deserves the appreciation of all Ontarians. You are absolutely the best and this province is lucky to have your skills, knowledge, dedication and passion.

When I feel my energy flagging and need gas in my tank, I continue to be inspired by each of you. It helps me to find the reserves I need to keep up the fight to improve working conditions, to continue to advocate for safe workplaces, for quality patient care and for the continuing respect for the work we all love to do.

If your energy flags and as the never-ending challenges continue to mount – no matter what is happening in your sector – ONA is here for you ... we've got your back!

None of us would be here without the commitment we

share and the passion for health care and our patients, clients and residents. You, the members and leaders of this Union, fill my tank as you continue to fight the fight. And I want you to always remember that I am here, as is our Chief Executive Officer Lesley Bell and our amazing Board members, fighting the fight!

While we might not always win each and every battle, we will win the war.

To see just how well we're fighting this war, take a look at our “ONA in Action” video on our website.

Recognizing ONA Successes

In the area of occupational health and safety, ONA has been instrumental in making significant legislative changes to improve the safety of our members in their workplaces since the 2008 Biennial Convention.

In particular, amendments to the provincial *Occupational Health and Safety Act* address many of the issues that impact on ONA members in the workplace, from needle stick injuries, to protection from infectious diseases, to workplace violence. Our persistent efforts to end workplace violence have resulted in significant advancements for the protection of our members, and we are consistently being called upon for our views and ideas on what should change to improve health and safety.

We will continue to participate on government committees, work with other unions, and promote the work of the late Justice Archie Campbell, especially in the push for greater adoption of the precautionary principle (exercising caution to reduce risk and protect nurses when faced with potential occupational health and safety hazards). We will continue to strive to close existing gaps and ensure continuing progress in the area of workplace health and safety.

In labour relations, ONA remains 100 per cent committed to doing the best job possible to improve your quality of work life and economic well-being as we enter what will be one of the most challenging rounds of bargaining in recent memory. For our hospital sector members, the central collective agreement expires on March 31, 2011. We know we have our work cut out for us as we work to win the quality collective agreement you deserve for the important work you do. We have our team in place and will soon be ready to go, and you have my word we will be unrelenting in our efforts to get the best

Keep Nurses Working Protect Quality Care

terms we can in this very difficult environment.

With employers continuing to cut staff, close beds and try to force ONA members to be the answer to their budget woes, the number of grievances we are filing has risen so our litigation work has been much in demand. In this area too, ONA has your back! The most common issues we are grieving are accommodation, Bargaining Unit work, discipline, job postings and layoffs. ONA is unrelenting in seeing these grievances through to resolution. We don't win them all, but we are doing our utmost to represent you.

Since the provincial budget was released last spring, we've seen a mounting number of professional practice issues. ONA had a major success this year with the Cassellholme Home for the Aged Independent Assessment Committee (IAC) decision.

The North Bay facility had inadequate RN staffing levels for a protracted period of time, and after ONA's efforts to work with the employer repeatedly failed, we called in an IAC. The IAC confirmed what we had been saying and made recommendations to both increase RN and Registered Practical Nurse (RPN) staffing levels, revise the management structure, and provide clearly spelled out guidelines around roles and responsibilities, leadership, quality care, culture and communication.

I can't emphasize enough the importance of using our hard-won professional responsibility clause to do something about workloads. When you take the extra time to fill out an improper workload form, you are doing your job of advocating for our patients – ensuring there will be quality patient care in the future. These workload forms are concrete evidence that heavy workloads compromise patient care.

Nursing Student Affiliates

Just two years ago at the 2008 ONA Biennial Convention, we welcomed our nursing student affiliates. It has been a joy to see their energy and commitment. They were the first to volunteer to help promote and participate in an open forum to fight cancer clinic nursing cuts, organized by our members at London Health Sciences Centre, where they spoke about the impact of the cuts. We won that fight – the employer retracted the cuts!

And students were out in force when the nurses of Toronto East General Hospital went door-to-door, distributing fly-

ers about nursing cuts, speaking with the community about the loss of RN care hours. The commitment and passion our nursing student affiliates bring to ONA is like an injection of energy we can all use, and we will continue to explore ways to strengthen our ties with them.

Our Board members regularly reach out to local nursing schools, speaking about the benefits of our Union. We make an effort to bring nursing students to our provincial meetings, and ONA makes sure it is represented at nursing student provincial and national conferences, such as the Canadian Nursing Students' Association (CNSA) national conference being held in Hamilton in January 2011.

I was pleased to have CNSA Ontario Regional Director Jamie Kyriacou stand up and be recognized during the Biennial. Jamie spoke briefly on behalf of our nursing student affiliates, emphasizing how pleased they are to be part of ONA. I am convinced that welcoming nursing student affiliates to ONA was the right decision, and I thank our leaders for doing so.

We are growing the next generation's commitment to nursing and to our Union as they graduate. Our student nurses are our future!

Member Engagement

Membership engagement has become one of our Union's key priorities. With our multi-faceted strategy to engage our members, we are working hard to develop a new generation of leaders and activists. Our strategy is working and we are receiving great feedback!

We developed a terrific video on member engagement for the Biennial, which you can view on our website.

At our first Leadership Conference in June 2010, more than 25 new Local leaders learned how to better represent members. Our new Guide to Membership Engagement has been completed, and it shows how members can have input at the Bargaining Unit level.

We've developed a new Member Orientation Tool Kit for use by our Bargaining Unit and Local leaders to help them make it easier for new members to learn their rights as union members and to find out how to access their Local representatives. We ensure that member engagement is a major part of all ONA education workshops.

Keep Nurses Working Protect Quality Care

Fighting for Your Jobs

Every day, we are fighting hard to prevent the erosion of RN positions in every sector of health care. RN position cuts have been the sad reality in many workplaces for years now, and underfunding of health care has meant cuts to services, programs and RN positions – all to the detriment of patient care.

The replacement of RNs with RPNs is a complex issue. While the health care system has room for both, research supports RNs as resulting in better patient outcomes. Unfortunately, in many cases, employers are choosing to use RPNs because they are a less expensive worker, which means added responsibility and increased workloads for RNs.

We have spoken up for years against RN cuts. And all of the time, effort and money we have put into our various campaigns – like *Still Not Enough Nurses* and *Cutting Nurses, Cutting Care* – is paying off. We have done the important ground-work over the last five years to ensure our communities know there is a nursing shortage and to know that when nursing positions are cut, patients pay the price.

The nursing shortage has worsened. More RN positions are being cut to balance budgets and we continue to see the erosion of nursing positions. We are seeing longer ER wait times, cancelled surgeries, heavier RN workloads, overcapacity, hallway nursing, and poor patient outcomes, just as we have been warning for years.

Understaffing, workload and workplace violence are key issues our members are facing in long-term care.

In our CCACs, our members are experiencing excessive workloads due to ongoing restructuring.

In public health, we're seeing the replacement of our Public Health Nurses with health promoters, and cuts to program funding.

In clinics, we see the erosion of RN jobs such as is happening in the Canadian Blood Services (CBS), where RNs are being replaced by unregulated workers – sometimes even high school-educated personnel, in conducting assessments of donor clients.

In home care, we see workloads increased, disgusting wages and benefits, competitive bidding for services and no job security.

And in industry, the continued disappearance of manufacturing jobs is deeply impacting our members.

But I want to tell you our carefully planned public awareness and political action strategies have done what we intended to do – we have a high level of credibility with the public and the media.

All of this work will stand us in good stead as we head into a year of collective bargaining, a provincial election, and a provincial spring budget being brought down by a government that is threatening a wage freeze for public sector workers – even while they tell us they value and respect us as health care professionals.

We are in a position of great strength, and it's up to us to leverage that powerful position in the coming months to our best advantage.

We know through polling that most Ontarians strongly oppose the awarding of billions of dollars in corporate tax cuts to private corporations. Yet, that is exactly what the government intends to do, even as they expect nurses to accept a two-year wage freeze. If the provincial budget is in such dire straits, why would we allow \$2.4 billion in additional tax cuts to be handed over without a fight? Well, the answer is – we won't!

Looking Ahead

While this has been a challenging time for all of us, we conclude 2010 with our determination intact. And because we know the challenges are not going to disappear, it is up to us to fight for our patients and quality patient care. It is our mission to fight for respect for our members and their working conditions.

We will continue to work hard for every one of you, the members. We continue to be a responsive and effective Union. We are proactive, strategic and hard working, and our many successes show the fight is worth the effort. Enhancing your ability to provide quality patient care is definitely worth it!

We will never give up the fight for a:

- Collective agreement that reflects our true value to the health care system.
- Justice – eradication of harassment, discrimination and bullying in the workplace.
- Appropriate workloads so we can provide quality care.
- Safe and healthy workplaces.

We are invaluable!

Keep Nurses Working Protect Quality Care

Membership Research

In our report on the work of the Union, I provided an update on membership feedback regarding services provided by ONA. Our most recent membership research survey was conducted in 2009, in which we looked at 19 core services provided by ONA.

I'm pleased to report that we surpassed 80 per cent for all services as a fulfillment indicator (ratio of performance to how the service is rated in terms of importance). In fact, we have shown progressively higher levels of satisfaction with our services since our first membership survey was undertaken by Cultural Research in 1995.

Results from the 2009 study have helped us identify several priority areas for members going into 2011, including: handling of grievances, member engagement, negotiations and return to work. We are investing your dues dollars in these priority areas.

The Wage Freeze

One of the top issues we face heading into 2011 is the provincial government's proposed two-year total compensation freeze for 1-million public sector workers.

The government has asked all parties with collective agreements in the public sector to develop a framework agreement to govern bargaining between employers and unions for a two-year period, which would include the total compensation freeze. This is an attempt to deal with a \$19.7-billion deficit. In return, the government committed to open dialogue of issues of concern to all parties. To ONA, this resembles the Social Contract negotiations of 1983.

In September 2010, we were involved in several days of "consultations" with the government, health sector employers, including the Ontario Hospital Association (OHA), long-term care, CCACs, nursing home and homes for the aged. Unfortunately, not a lot came out of those discussions.

We find it incomprehensible the government can give a tax cut that will equal \$4.6 billion and then turn around and ask front-line workers to accept what will actually amount to a pay cut factoring in inflation. And so, ONA takes the position that bargaining will proceed as usual and we will table your priorities.

Bargaining Updates

The current hospital central collective agreement expires on March 31, 2011, and ONA has begun preparing for the next round with the OHA. The central team received orientation in November and bargaining dates are set for January 10 and 31, 2011. Mediation and arbitration dates, if needed, have also been set.

In the nursing homes sector, the central agreement expires June 30, 2011, and the central team is now in place with orientation set for February 22-25, 2011.

Updates on bargaining in all sectors can be found in the Biennial materials. Check with your Bargaining Unit President or Local Coordinator.

Have-a-Say Online

For the first time, members were able to fill out our Have-a-Say questionnaire electronically through our website. This greatly facilitated the process for our members, resulting in a significant number of forms filled out. In fact, from the survey we had some 1,000 pages of feedback, providing us with your views and identifying your top issues almost immediately. This is important as this survey helps us determine our bargaining priorities, and to do that effectively and accurately, we need to hear from as many members as possible. Providing the survey in this way also represented a huge cost saving for the organization.

Litigation and Awards

The full report on litigation cases filed and resolved is contained in the Biennial materials, available from your Bargaining Unit President or Local Coordinator, as well as a summary of rights award cases and *Hospital Labour Disputes Arbitration Act (HLDA)* awards. *HLDA* is a new section in our Biennial Convention reporting, and I'm pleased to tell you that ONA has continued to improve both the monetary and non-monetary provisions of our collective agreements, as well as maintaining provincial standards.

Keep Nurses Working Protect Quality Care

One unfortunate trend is employers tabling concessions during bargaining, which they seek to achieve through interest arbitration. They are trying to justify concessions on the basis of the downturn in the economy and on the provincial government's restraint policies. Fortunately, interest arbitrators have given little to no weight to the government's restraint statements and similarly have not found merit in employers' concession agendas.

Health and Safety

As I mentioned earlier, we've had numerous successes in this area since 2008 due to our extensive lobbying efforts. New violence prevention legislation came into effect on June 25, 2010, and includes language on domestic violence spillover from home to work, as well as psychological harassment. New and improved violence prevention programs have taken root at Toronto East General Hospital (TEGH) and the Centre for Addictions and Mental Health (CAMH), as well as other locations.

Full application for the new law for mandatory use of safety-engineered needles came into effect on July 1, 2010, and now applies to hospitals, long-term care facilities, labs, doctor and dentist offices, ambulance services, public health, clinics, etc.

We have seen increased enforcement by the Ministry of Labour (MOL), including charges for health and safety violations at Soldiers Memorial Hospital in Orillia and Humber River Regional Hospital in Etobicoke, as well as convictions and fines against CAMH, Joseph Brant and Sudbury Regional Hospital.

Communication from the Ministry of Health and Long-Term Care (MOHLTC) with unions and others has vastly improved since SARS, particularly regarding responses to concerns raised during the H1N1 outbreak.

We are leading the way in a ground-breaking, collaborative, multi-faceted, multi-party pilot project at Niagara Health System (NHS), designed to improve return-to-work outcomes.

And we are seeing the growth of our workplace health and safety systems, which are driven by ONA's health and safety activism. Our Joint Health and Safety Committee (JHSC) members have been exercising their right to investigate criti-

cal injuries at London Health Sciences Centre (LHSC), St. Joseph's Hamilton and elsewhere. You can read about the fatality investigation at LHSC in the Biennial Convention binder materials available through your Bargaining Unit President or Local Coordinator.

SARS Challenge

The Supreme Court denied our appeal of an earlier decision of the Ontario Court of Appeal to dismiss an action filed on behalf of 53 nurses who contracted SARS while caring for infected patients in 2003.

The Ontario Court ruled the province owed no "private law duty of care" to RNs during SARS, leaving them without a monetary remedy to hold governments accountable in court.

We were obviously devastated by this news and felt the courts sent a clear message to RNs who were infected with SARS that their health is simply unimportant. The decision means the government, which funds health care, hasn't been accountable through the courts to ensure RNs had safe working conditions and safe equipment during SARS. Regardless of the outcome, I'm proud of ONA and our members for fighting this fight. It proves to the government and our employers that we will not sit idly by while our members are made sick on the job.

Human Rights and Equity

The ONA Board approved four strategies to address the identified themes from a recent human rights and equity survey and feedback, as follows:

1. Highlight ONA human rights and equity-related education programs in *Front Lines*, the *Human Rights and Equity Bulletin* and relevant communication vehicles, quoting membership feedback and education.
2. Increase the human rights and equity profile using the ONA website and other communication strategies.
3. Identify and promote human rights and equity programs and resources.
4. Evaluate ongoing strategies regarding the role of the Human Rights and Equity Representatives in the

Keep Nurses Working Protect Quality Care

Bargaining Unit, and provide feedback to enhance their role and improve human rights and equity representation in the Bargaining Unit.

Front Lines features human rights and equity-related articles and information in every issue and the *Human Rights and Equity Bulletin* is a regular publication chock full of important information and useful tips. The provincial Human Rights and Equity Team continues to generate new ideas regarding articles for publication.

You can also view a great video of our work in this area on our website.

WSIB Appeals, LTD

Since the 2008 Biennial Convention, the Workers Safety and Insurance Board (WSIB) team has had 49 wins and three losses for an overall success rate of a whopping 94.23 per cent! This is incredible!

Even more impressive is that these wins represent a monetary award for ONA members of almost \$3 million.

Of 14 LTD decisions in 2009, we won nine and lost five. From January until October of this year, 47 Long-Term Disability (LTD) cases were opened and 16 resolved. Of 20 decisions, we won nine, lost nine and two are considered a win/loss.

Recruitment and Retention

We've had a number of organizing successes over the last two years. In 2009, we organized eight employers for a total of 237 new members. From January 2010 to September 2010, we organized 10 employers for a total of 151 members. That's a combined total of 388 new members brought into ONA's ranks!

We were pleased to have LeeAnn Desrocher speak to the assembly at the Biennial Convention. LeeAnn is the Bargaining Unit President for our brand-new Bargaining Unit at Waas-egizhip Nanaandawe'yewigamig, the Kenora Health Access Centre, and played a pivotal role in organizing this group. In her remarks, LeeAnn thanked ONA profusely for its help. "We now have a voice," she told the assembly.

We now have 60 new members from Toronto Grace Health

Centre, who faced closure of their facility until the hospital received last-minute funding of \$15 million from the Ontario government.

We've also had successful certification votes this fall at four other agencies, Helen Henderson Care Centre in Amherstview (eight new members); Victorian Order of Nurses, North Bay (nine); Hampton Terrace Care Centre, Burlington (11); and Brant Centre Long-Term Care (11). That's a combined total of 39 new members!

We are currently in the middle of a major organizing campaign at the University site of London Health Sciences, and if we are successful, we will gain 1,200 new members. Two full-time nurses from that facility attended our Biennial, Marci Holden and Ron Bowman, and spoke briefly about the campaign. They are grateful for the time and effort ONA is putting in to organize their group.

Education

Since 2008, we've launched a number of great innovations in our delivery of education to make access easier than ever for our members.

In June 2010, ONA launched an e-Learning platform, accessed through our website. ONA will be using e-Learning to host custom courses for members, covering such high priority topics as professional responsibility, grievances, negotiations, return to work, and many others. We also have developed short-training lecture DVD's, which will be hosted on the e-Learning platform.

This education is free and can be accessed by members at any time.

Professional Practice

In 2009, the ONA Board supported establishment of a professional practice teleconnect for membership to be held quarterly. The teleconnects are designed to address hot topics and issues in professional practice and to assist members and leaders in developing strategies for dealing with them.

Topics have included: Skill mix change, professional responsibility complaints (PRCs), and workload and practice issues.

Keep Nurses Working Protect Quality Care

ONA has hired two additional Professional Practice Specialists for a total of four currently working on the Provincial Services Team (PST). Each district team also has designated a Labour Relations Officer (LRO) "Prime" for professional practice. The Primes meet to discuss issues and trends and to help develop ONA resources.

Professional Practice staff continues to work alongside Bargaining Unit leaders in discussing practice concerns and workload issues with many employers on our members' behalf. This is crucial, as resolution of workload and professional practice concerns can have a positive impact on the health care setting and ensure safer patient care and better outcomes.

If a satisfactory resolution is not reached, most ONA collective agreements allow the matter to be forwarded to an IAC of three RNs, one each chosen by ONA and the hospital, and a chair mutually agreed upon by both.

The IAC evaluates whether the hospital has assigned a number of patients or workload that is inconsistent with proper care, and makes recommendations to alleviate issues it deems problematic.

RN/RPN Scope of Practice

In the Biennial materials available from your Bargaining Unit President or Local Coordinator, you can see a letter I wrote to College of Nurses of Ontario (CNO) President George Fieber and Executive Director/CEO Anne Coghlan on the utilization of RNs, RPNs and unregulated care providers (UCPs). It was part of a pre-consultation opportunity to review CNO's draft document, "*Working Together: RNs, RPNs and UCPs.*"

We don't support this document in its current form and request CNO, the Registered Nurses' Association of Ontario (RNAO) the Registered Practical Nurses' Association of Ontario (RPNAO) meet with us to discuss it further.

While we certainly support all categories of nurses working, the draft document has made the differences in RNs and RPNs vague, confusing and difficult to understand. We believe this will lead to further role conflict and inappropriate assignment of patients in the workplace. To assist in dealing with this issue, we have put together a "Tip Sheet" called "Combating the Displacement of Registered Nurses." This document discusses strategies and legal options open to ONA to enforce

the rights of our members, such as grievances, professional responsibility complaints (PRCs), lobbying, media releases and complaints at CNO and *Public Sector Labour Relations Transition Act (PSLRTA)* applications.

Our obligation first and foremost is to protect and retain the work of our members, and we will utilize every avenue available to us to do so.

Personal Liability Insurance

ONA CEO Lesley Bell conducted a discussion on a very serious issue currently facing our members – personal liability insurance.

When the *Regulated Health Professions Act (RHPA)* was introduced in 1990, mandatory liability insurance was discussed but had not at that point become a requirement.

In 1992, ONA launched its own liability insurance program, which provides secondary insurance coverage. This means our plan provides coverage over and above insurance already provided by your employers, ensuring you have coverage if a malpractice claim exceeds your employer's insurance coverage.

The provincial government has now introduced with Bill 179 an amendment to professional liability insurance under *RHPA's Health Professions Procedural Code*, in which all college registrants will require "personal" liability insurance by 2012.

In anticipation of this, regulatory bodies like the CNO are proposing amendments to their general by-laws requiring each registrant to be "personally insured against professional liability." This may mean that all ONA members will be required to purchase personal primary insurance, duplicating the coverage already provided by, and through, their employer's primary insurance plan.

It also raises the question of whether ONA Liability Insurance will meet the "personal" requirement or be accepted as a "recognized association" as contemplated by the legislative changes.

We met in September with officials from the MOHLTC and CNO to relay our concerns and to ensure that ONA's liability insurance is recognized as an appropriate insurance plan under *RHPA*.

We will continue to lobby MOHLTC to ensure there is no current plan to proclaim into law the professional insurance

Keep Nurses Working Protect Quality Care

amendment, and we are looking for the Ministry to confirm its commitment to defer proclaiming the amendment until further consideration has been given to its impact and so that additional discussions can take place with ONA.

We will be keeping members apprised of our lobbying efforts throughout the process via our website, *Front Lines* or other communications.

In the meantime, we are asking for your help as well. We started a letter-writing campaign to CNO on this critical issue, asking for:

- Confirmation the proposed amendments to the College's general by-law will not come into force pending proclamation of the amendment to the Code.
- The College informs its membership that until the amendment is proclaimed and a by-law passed by Council, College members will not be required to provide proof of insurance.

During the Biennial, we asked attendees to write to the College, and provided them with a handout containing the information they need to include. We then had them drop off their letters at the Professional Practice Booth in the Exhibitors' Hall so they could be sent to CNO.

Since then, hundreds more letters on this issue have been written and sent to CNO.

We still need your help with this to ensure ONA's Liability Insurance plan continues to cover you and all our members in the future.

We have an important stake in this and a key role to play!

Just to get an idea of how essential our program is, we opened 18 files, 22 files and 18 files respectively in the years 2008, 2009 and 2010 (to date).

The majority of lawsuits are from labour and delivery, where a baby sustained injuries that might have caused the infant to become developmentally delayed and/or severely handicapped. If damages are awarded, they are based on the life expectancy of the infant.

Member Assistance Program

ONA is currently looking into developing our own independent assistance program for members with addictions. Lesley

Bell discussed the various avenues that have been explored to date, including investigating the feasibility of joining an existing program for physicians. Unfortunately, their program is not big enough to accommodate the sudden influx of nurses and the yearly cost is prohibitive.

In view of this, ONA is continuing to look at options for a financially sustainable, effective program for our members, and it will be discussed at a meeting of our counterparts. We are looking for a program that will work best for the benefit of our members.

Legal Expense Assistance Plan (LEAP)

Our LEAP program continues to provide excellent support for our members. Just to give you an idea, in 2009, 227 files were opened by the LEAP Team, and a further 198 were opened to date in 2010. Of that number, 114 are currently open internal files.

The top three issues handled by LEAP over the past two years were:

1. Assessment.
2. Communication.
3. Substance Abuse.

JPNC, Government Relations and Submissions, Allies

We have done a tremendous amount of work in liaising with the government, either through JPNC or directly with MOHLTC and the Ministry of Labour (MOL).

ONA Board members sit on numerous internal and external committees, including the Nursing Retention Fund, New Graduate Nursing Task Force, CNSA Ontario Region, CCAC Task Force and Public Health Network, and the Workers Health and Safety Centre (WHSC) Board of Directors. That's just the tip of the iceberg.

Submissions we prepared for government consultation, which you can find on our website, include:

- Pre-budget consultation.
- Bill 46: *Excellent Care for All Act*.
- Bill 21: *Retirement Homes Act*.

Keep Nurses Working Protect Quality Care

As a member organization, ONA continues to work closely with the Ontario Health Coalition (OHC) and the Ontario Federation of Labour (OFL) at the provincial level to influence government health policy.

Speaking of OFL, we were privileged to hear from Secretary Treasurer Marie Kelly, who lauded ONA for the gains made on behalf of our members. "We bargain in good times and we bargain in bad times, but no matter what, we bargain benefits, wages and terms of employment that no employer would ever give away for free. Every single day there is someone struggling on behalf of their workers to get the very best deals they can get. And to see what you at ONA do just makes me very proud of you. We are all out there on the front lines fighting so many battles. Sometimes we may not recognize what we accomplish, but we accomplish so much just by being here."

We were also delighted to once again hear from Canadian Federation of Nurses Unions (CFNU) President Linda Silas, who manages to energize our members whenever she speaks at one of our provincial meetings or Biennial Conventions. At the federal level, we support CFNU campaigns, and through CFNU, we work as well to support campaigns by the Canadian Labour Congress (CLC) and Canadian Health Coalition (CHC).

Silas told us about the "good, the bad and the ugly," namely that contrary to all reports, Medicare IS sustainable with the right strategies and a strong partnership between federal and provincial/territory governments, as well as investments in home care and long-term care and a pharmacare program. That's the good. The bad? That provincial health care costs are outstripping the provinces' ability to pay, and that tax cuts will not fix the problem. And the ugly? Politicians are politicians, she says, with the federal government's share of health care costs dropping from 25 per cent to 16 per cent.

Silas warned that nursing associations need to start planning now for 2014, when the national Health Accord expires.

"We as negotiators need to be at the bargaining table now. All health stakeholders need to be involved for the long-term sustainability of our national public health care system," she said.

We're looking forward to attending CFNU's 30th anniversary and convention in Winnipeg next June, where we'll have great discussions on where nursing is headed in the next 30 years.

Health Minister's Greetings

In her speech to the assembly, Ontario Health and Long-Term Care Minister Deb Matthews thanked ONA members for their commitment to nursing and their leadership in Ontario communities.

Matthews indicated the government is committed to hiring more nurses and wants to do more with such initiatives as the New Grad Guarantee, Late-Career Nursing Initiative and Nurse Practitioner (NP)-led clinics.

"We're behind you in every step of your career," said Matthews.

"I know the work you do is extremely challenging. Probably more challenging now than it ever has been, because today we need to know that every dollar we spend in health care goes to improve care for patients. I hear you when you talk about hallway nursing and skill-mix change. And I hear you when you say the workloads you carry make it hard to provide the care you want," she said.

"I am on your side. I will do all I can to make Ontario the very best place in the world to be a nurse. We all need to work together to continue the momentum to continue to improve health care. I look forward to working with you in the weeks and months and years to come. I know we can accomplish a lot together. I know the health care system will be stronger when we work together."

Matthews stayed for an evening reception we held for members to meet and greet representatives from the Ontario government, including Ontario Labour Minister Peter Fonseca and other MPPs. Also in attendance was Ontario New Democratic Party leader Andrea Horvath and staff from the office of Ontario Progressive Conservative leader Tim Hudak.

The MPP reception provided a wonderful opportunity for members to ask questions about nursing, the health care system, the care we are able to provide our patients, residents and clients, and to lobby for needed changes.

ONA in the Media

ONA continues to make a strong mark in the media with coverage on all issues and in all sectors across Ontario. Our media presence is not only provincial, but the media reports locally

Keep Nurses Working Protect Quality Care

on the many activities of our members, who are out there spreading our key messages in their communities.

To solidify our contacts within the media, our Communications and Government Relations Team (CGRT) has developed a new electronic publication for the media called *"Behind the Front Lines,"* providing a critical look and recap of health care news, particularly from an ONA perspective, and issues that impact our members.

Financial Report

In her report on the Union's finances, ONA Director Yvonne Carey-Lee said ONA is on track. "Our Union is growing. We are creating a financially sustainable organization," she said. All materials related to the financial report, including the multi-year proposed budget, can be found in the Biennial materials available from your Bargaining Unit President or Local Coordinator.

Constitutional Amendments and Resolutions

A key Constitutional Amendment unanimously carried by voting delegates redefines ONA's bona fide membership status under Article 3.01 (c) Eligibility and Entitlements. Effective January 2012, this impacts three areas: application for membership, retention of membership entitlements in a Bargaining Unit and retention of provincial membership entitlements.

With this amendment, new ONA members will complete an application ONCE to become bona fide. Their entitlements, including entitlement to vote, attend meetings, hold office or be a candidate for office, will be retained or lost based on job activity at the ONA Bargaining Unit level, i.e. if they have paid dues within the last 12 months (instead of the current six months) or are on a recorded leave of absence (LOA) at that Bargaining Unit. Currently, a member has to repeat the application process each time her or his bona fide status is lost.

A member will no longer retain provincial entitlements if she or he is between jobs, except to receive our *Front Lines* membership magazine for a period of six months.

As a result of this amendment, other related articles in the Constitution will be amended to omit the phrase "bona fide."

Two articles were amended to more accurately reflect the broader mandate of the President's portfolio that deals with Communications, Government Relations and Student Liaison. Another amendment now clarifies that a member running provincially for Vice-President can only be a candidate in the region for which she or he is currently employed.

Two amendments were made to ONA's Statement of Beliefs under Diversity and Equity. One replaces the word "gender" with "sex" in describing differences under "diversity." Two amendments now incorporate "gender identity" in the list of descriptions for which discrimination and harassment are prohibited.

Another amendment to ONA's Statement of Beliefs incorporates "bullying" under its Discrimination, Harassment, Bullying and Accommodation article.

One resolution regarding the term of office for Vice-Presidents was defeated.

New Business

Two items under New Business were carried. The first asked the Board to consider integrating poverty issues/living standards in campaigns to defend public health care. This four-part resolution also requests ONA consider supporting campaigns to raise social assistance rates to levels prior to cuts under the Harris government, and endorse the Ontario Coalition Against Poverty (OCAP) "Raise the Rates" campaign.

It also asks for consideration to include in member education information regarding cuts to health care, and to invite speakers from OCAP to regional and provincial education and meetings.

The Board was also requested to review the Financial Policy 26.10 regarding funding for *PSLRTA* campaigns.

Long-Service Pin Introduced

We were pleased to unveil a new lapel pin – the long-service pin – to acknowledge and honour the important contributions of our Local leaders. This pin is intended for ONA leaders who have provided more than 10 years of ONA service at the provincial, Local and/or Bargaining Unit levels.

Along with the pin, comes a letter of recognition from me

Keep Nurses Working Protect Quality Care

thanking the members for their contribution. This pin can be obtained only by request through your Local Coordinator, who will forward the request to my office.

Celebrating MRT Week

We were delighted to recognize our allied members who are Medical Radiation Technologists (MRTs), who celebrated MRT Week November 8-12. Much like Nursing Week, MRT week is set aside to laud the contributions of these highly skilled professionals, many of whom are represented by ONA. Hope you had an enjoyable week!

A Song for ONA from Faith Nolan

We were treated to a wonderful musical interlude by Faith Nolan, a union activist and skilled musician, who wrote a song especially for ONA.

Thanks from "Unite Here"

ONA delegates heard from Michelle Williams of "Unite Here," Local 75, expressing thanks for ONA's support for Toronto hotel workers, who had been undergoing rotating job actions at various Toronto hotels in their fight for a fair collective agreement. They now have a ratified agreement. Some 900 workers at the Fairmont Royal York, where we held our Biennial, were part of the job actions. You can see a video clip of Williams' speech by clicking on the link on our home page at www.ona.org.

Remembrance Day

A solemn service was held in the foyer of the Royal York for Remembrance Day in honour of Canada's fallen soldiers. We briefly adjourned from Biennial Convention business to take part in the ceremony. Some of our members in attendance have loved ones in Canada's military.

Moving Keynote Inspires

In a moving keynote speech, motivational speaker Steve Robbins provided delegates with his insights into human behaviours to engage and inspire all in attendance. His research and messages helped shift our way of thinking about human interactions.

Want More Information from the Biennial Convention?

Your Bargaining Unit Presidents and Local Coordinators will have an "e-binder" on CD of all Biennial Convention documents in electronic format. They may also have a hard copy binder of the documents. You can also see day-by-day summaries, photographs and video highlights on our website by clicking on the link "Biennial Convention," and you can watch a clip of my keynote address and the other videos we showed at the Biennial via YouTube from our website. Just click on the links on the bottom of our home page on the right-hand side.

ONA Provincial Office

85 Grenville St., Ste. 400
Toronto, ON M5S 3A2
Tel: (416) 964-8833
Toll-free 1-800-387-5580, press 0
Fax: (416) 964-8864
e-mail: onamail@ona.org

Copyright 2010 © Ontario Nurses' Association

