Three Things
You’ll Learn in This Issue:

1. Nurse Practitioners are in the News
2. Is Labour Looking at Trouble? – go
3. Brexit Vote Impacts Patient Care – go

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Little Media Coverage in Ontario as the Future of Medicare Legal Case is Heard

Ontario nurses are baffled at the meagre media coverage in Ontario of a landmark legal case being heard in B.C. that could impact the future of medicare.

As the CBC reports (source), an “epic legal battle is raging in British Columbia’s Supreme Court over Canada’s public health-care system, with one side arguing that allowing private health care could solve chronic wait times while the other argues it could dismantle a national economic jewel.”

The media does not often cover stories involving a category of nurses called Nurse Practitioners (NPs). With the exception of a provincial announcement a few years ago that government would fund Nurse Practitioner-led clinics to increase patient access to primary care, the term NP is rarely found in news reports.

That changed recently when several NP stories were covered in various parts of the province.

The good news

A good-news story in the Hamilton Spectator (source) reported that long-awaited, long-sought permanent funding has arrived for an NP to provide care for hundreds of the city’s “most vulnerable teens” in their own school.
Behind the Front Lines page 2

What is ONA?
The Ontario Nurses’ Association (ONA) is the union representing 62,000 registered nurses and allied health professionals and more than 16,000 nursing student affiliates providing care in Ontario hospitals, long-term care facilities, public health, the community, clinics and industry.

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Who is Linda Haslam-Stroud, RN?
ONA President Linda Haslam-Stroud, RN (pictured), is a veteran renal transplant nurse who is an expert spokesperson on a range of issues. Linda is available to comment on everything from workplace violence, patient care, health care policy in Ontario, the flu pandemic, nursing cuts, public health and much more. Simply contact ONA's media relations officer, Sheree Bond, at (416) 964-8833, ext. 2430 if you would like to interview Linda on a health-related issue.

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Nurse Practitioners in the News, cont’d from page 1

The NP program had been run out of two area high schools for the past four years, but funding was tenuous. The report said that a number of health and community organizations agreed that an NP was “desperately needed” in the high schools of the city’s poorest neighbourhoods with high newcomer and aboriginal populations.

Now for the first time, the Hamilton Niagara Haldimand Brant LHIN has agreed to fund the program. With $130,000 yearly, the NP program will be able to run out of two high schools five days a week.

The Spectator report notes that NPs are “perfect for the job because, like a doctor, there is the ability to order tests and refer to other health-care services. But nurses are less intimidating than physicians to many high school students.”

The bad news

A number of area newspapers reported on a story that has outraged the Ontario Nurses’ Association (ONA).

The Haldimand-Norfolk Health Unit has moved ahead to cut its one and only Nurse Practitioner position – despite receiving full funding for the nurse.

As the Simcoe Reformer reported (source), for 15 years, Nurse Practitioner services have been offered through health units as a way to bridge the health-care services gap in rural communities.

In Haldimand-Norfolk, the NP provided services to mothers and their babies through prenatal and postnatal clinics, especially important in an area where some do not have access to a doctor.

ONA notes that the board of health and the Health Unit decided to refuse funding from the Ministry of Children and Youth Services that would pay for the NP position. ONA calls the decision one that puts “dollars ahead of our patients’ health.”

Local public health nurses have been out on the street, rallying against the cuts, with great support from the public. continued on page 3

Public health nurses from Haldimand-Norfolk Health Unit and supporters rallied in the street to protest the cut of the fully funded, only Nurse Practitioner at the facility.
Globe Columnist Calls for More Use of NPs

Finally, in an analysis of a recent Canadian Institute for Health Information study that showed Canada lags behind other well-off nations in timely access to primary care, the Globe and Mail (source) found that Canada has fewer physicians per capita than any of the other countries surveyed, except the U.S.

Canada has 2.6 doctors for every 1,000 Canadians, as does the U.S., says Colleen Flood, director of the University of Ottawa’s Centre for Health Law, Policy and Ethics. That compares with 4.4 doctors per every 1,000 Norwegians, 4.1 doctors for every 1,000 Germans and 2.8 doctors per 1,000 residents of the United Kingdom.

Globe and Mail columnist Andre Picard argued that “the solution to problems like waiting times is not always to do more of the same.” He notes in his column (source) that Canada relies on doctors to “provide care more than any other country; in other words, we underuse nurse practitioners…”

Toronto Star Paints Doomsday Scenario for U.S. Labour

While RNs and other unionized health-care providers in Ontario have not had an easy decade, the doomsday scenario painted by Toronto Star reporter Sara Mojtehedzadeh (source) about U.S. President Donald Trump’s plans for workers sends shivers up the spine.

The Star noted that multiple posts about protecting precarious workers, enforcing labour laws and “cracking down on wage theft” have suddenly disappeared from the U.S. Department of Labor’s website.

Calling Trump the “self-style champion of the Forgotten American,” the report notes that critics believe the disappearance of the website posts is a “signal of what’s to come.”

The Star interviewed California-based workers’ rights advocate Carmen Rojas on a recent visit to Toronto, and heard that Rojas believes “if we have been living in an overcast period for working people in the U.S., we are about to enter into a dark, dark period.”

The report notes that one critic – David Weil, a senior Department of Labor official under the Obama government and the outgoing head of its Wage and Hour division – is also the author of a book that was influential in shaping Ontario’s Changing Workplaces Review.

Ironically, while Ontario works to update employment laws to better protect precarious workers, in the U.S., many protections are “about to be eviscerated.”

Nurses know the strong connection between socio-economic status and health status. The prediction that U.S. labour groups face even greater threats to basic democratic practices is alarming.
**Nurses Hoping to be Included in Federal PTSD Legislation**

ONA First Vice-President Vicki McKenna, RN, faces a CBC news crew covering workplace violence against nurses. Violence, says McKenna, is just one of the contributing factors to the vulnerability of nurses developing PTSD.

ONA President Linda Haslam-Stroud, RN, is famous among members for her dogged, “never-give-up” attitude.

That approach was in evidence when a private member’s bill was introduced in the House of Commons that creates a national framework for Post-Traumatic Stress Disorder (PTSD) and is aimed at first responders, veterans and the military.

ONA was outraged in 2016 when provincial legislation was passed that excludes nurses, except a very few working in correctional facilities. ONA noted then that Ontario nurses are included in legislation proclaiming “First Responders Day” but are mysteriously omitted from provincial PTSD presumptive legislation intended to make it easier for sufferers to access WSIB and treatment.

The proposed federal bill – C-211 – was introduced recently. In an interview with CBC News (source), ONA First Vice-President Vicki McKenna, RN, reiterated some of the arguments for including nurses in the legislation.

As she told the CBC, nurses experience trauma in the workplace “to rival any paramedic or police officer in the field.”

McKenna says that ONA will not give up its efforts to ensure that nurses take their place among first responders.
Brexit Worsens U.K. Nursing Shortage

ONA has made no secret that there is a worldwide shortage of nurses. For more than a decade, ONA has run public awareness campaigns about the need for a health human resources strategy to ensure Canada educates and hires an adequate number of nurses to care for our aging and growing population.

The nursing shortage is not just Canada-wide, nor North American-wide. It is worldwide.

Now, a report in the Daily Mail UK (source) says that the number of European nurses who are registering to work in the U.K. has fallen 92 per cent following the Brexit vote.

The report shows that the National Health System has declared a crisis with a staff shortage of 24,000 nursing vacancies. Just when needed most, the Brexit vote has resulted in a 92-per-cent drop in the number of European nurses applying to practice in the U.K.

Royal College of Nursing CEO Janet Davies says this is the first sign of a change following the referendum.

She is calling for a “guarantee that EU nationals working in the NHS can remain. Without that, it will be much harder to retain and recruit staff from the EU, and patient care will suffer as a result.” Statistics show that just 101 nurses and midwives from EU nations registered to practice in the U.K. in December. This compares with 1,303 in July, the month following the vote.

The most alarming part of the report for nurses is the news that British hospitals will install some 2,000 untrained nurses amid the shortage. Critics have called it “nursing on the cheap,” noting that they will be inserting tubes and monitoring patients’ breathing, temperature and heart rates, and be responsible for administering lethal drugs including morphine.
The anniversary of the murder of Windsor RN Lori Dupont is marked.
Workplace violence continues to be a serious issue for nurses across Ontario.

Doctor Takes Issue with Medical Journal Editorial

It is unusual for a physician to speak publicly about workplace violence, and even more unusual for a “celebrity doctor” to criticize the Canadian Medical Association Journal.

Both happened when Dr. Brian Goldman (source), host of CBC’s radio show White Coat, Black Art, commented on the growing problem of violence against doctors and nurses in Canadian hospitals.

Goldman notes that he has witnessed patients become violent through his work in the ER, and writes that “there is no such thing as a hospital that is free from a random act of violence.”

He also expresses his gratitude that the Canadian Medical Association Journal has published an editorial on violence “because it doesn’t get much attention.” However, he writes that he finds it “curious” that it singles out physicians as victims of patient violence without talking about other professions.

Goldman quotes a Toronto Star report that contains statistics on violence against nurses, with more than 4,000 reported incidents in a five-year period, more than firefighters and police combined.

He notes that the CMAJ’s focus on violence likely stems from high-profile cases such as the one in B.C. where a psychiatric patient assaulted a doctor. However, he rightly points out that “there are many more instances in which nurses have been assaulted and ended up with severe injuries.” He also notes that three-quarters of those assaulted did not seek help and two-thirds of nurses did not report the incident.

Goldman actually calls for workplace violence in health care to be declared a public health issue. Nurses agree with Goldman – when nurses (and other health-care professionals) are not safe, neither are patients and their families. Nurses also agree that the “big thing that needs to change is a hospital culture that – until recently – behaved as if dealing with violent patients is “just part of the job.”

continued on page 7
Wage Gap Responsible for Lack of Male Interest in Care Industries

As International Women’s Day approaches, CBC News (source) ran an interesting report on the failure of men and boys to adapt to Canada’s changing jobs market.

While there are many job opportunities in female-dominated industries – like elder care – men are staying away, continuing to search for ever-more elusive work in the fast-disappearing trades and manufacturing industries.

Angela Hennessy reports that there is a “pool of men with largely non-transferrable skills unemployed. And the next generation of boys are not getting the education they need to prepare for a changing job market.”

While some experts say the lack of interest by males in female-dominated industries is “sociocultural,” the real barrier is the wage gap.

As the report notes, the most recent Statistics Canada survey revealed that female workers working full- and part-time were paid an average of 66.7 cents for every dollar earned by men.

CBC interviewed a 17-year-old high school student about his ideas of what constitute “women’s” work and “men’s” work. Shawn Robinson said he sees male work as something physical where you are active, and women’s work was more something that requires good organizational skills, such as a doctor. He also told CBC, “you see more male nurses. You see more women in auto shops or as an electrician or something like that.”

Perhaps the entry of more men in “caring professions” such as nursing will see the wage gap narrow.
The Ontario Nurses’ Association has a whole host of experts in health care. ONA members work in hospitals, long-term care, public health, the community and industry and can answer your questions as health care continues to evolve in this province.

Contact ONA.

FOR MEDIA ONLY:

Behind the Front Lines – an electronic newsletter that takes a look at the stories behind the stories.

Need a reliable and informed source?
Speak to front-line nurses!

The Ontario Nurses’ Association has a whole host of experts in health care. ONA members work in hospitals, long-term care, public health, the community and industry and can answer your questions as health care continues to evolve in this province.

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