The following is a summary of ONA’s key activities and successes, published three times per year.
Government Relations/Work with Allies

Timed to coincide with Nursing Week, ONA’s spring Nurses Know campaign, which brings attention to hospital and healthcare funding, the continuing erosion of RN positions throughout the province and increased violence in the workplace, provided a feel-good message to acknowledge all that nurses do for their patients, focusing mainly on social media.

The subsequent phase of the campaign – Better Care Starts Here – added additional advertising, along with a strong social media component, by way of TV, radio, transit shelter, print and cinema spots airing right before the feature film.

Better Care Starts Here focuses on worsening hospital overcrowding, the shortage of long-term care for Ontario’s aging population and access to home care, emphasizing the value of RNs and the specialized care they deliver while advocating for increased staffing.

A dedicated and updated campaign website – nursesknow.ona.org – is chock full of statistics, member stories and information on how to help spread our key messages.

While the Ontario budget increased public hospital funding by the rate of inflation for the 2016 year for the first time since 2006 and is “a good first step,” ONA also called for multi-year, stable funding for hospitals and the halting of RN cuts, with new funding invested for a nursing human resources plan to bring the province’s RN-to-population ratio up to the average of the rest of the country.

The Registered Nurses’ Association of Ontario presented ONA President Linda Haslam-Stroud with its Lifetime Achievement Award for her outstanding contributions to the profession of nursing in the areas of practice, education, administration or research at the provincial, national and/or international levels, and activities that promote the association among nursing colleagues, the government and other health-care partners.

Haslam-Stroud was also named a Mohawk College Distinguished Fellow for 2017, the highest honour the college bestows on individuals, in recognition of the “invaluable contributions” she has made to her community and her “outstanding professional achievement.”

Although Bill 163 – Supporting Ontario’s First Responders Act (Post-Traumatic Stress Disorder), 2016 is now law and still excludes nurses, ONA provincial leaders continued our lobbying efforts, including discussions with Minister of Labour Kevin Flynn and Minister of Health and Long-Term Care Eric Hoskins.

ONA continues to work in tandem with the Canadian Federation of Nurses Union (CFNU) to influence the development of a framework for PTSD at the national level.

Region 4 Vice-President Laurie Brown helped present ONA’s submission on proposed changes to the Labour Relations Act, 1995 and the Employment Standards Act, 2000, outlined in Bill 148, to the Standing Committee on Finance and Economic Affairs in Kitchener-Waterloo, urging the creation of automatic access to first contract arbitration.

In recognition of Canada’s 150th birthday, the Canadian Nurses Association is honouring 150 nurse innovators and champions in health care with profiles on its website, and ONA President Linda Haslam-Stroud is among them.

Meeting in Alberta for events concurrent to the Council of the Federation, members of the CFNU, including ONA First Vice-President Vicki McKenna, CEO/CAO Marie Kelly and Region 2 Vice-President Cathryn Hoy, urged provincial and territorial premiers to lobby the federal government for a national Pharmacare Plan to ensure all Canadians have access to life-saving medications, and to bring down the costs of the current increasingly out-of-control system.

ONA and CFNU co-hosted a premiers’ breakfast briefing on mental health care where First Vice-President Vicki McKenna relayed that statistics show 20 per cent of Canadian children and youth will develop a mental illness by age 25, and 43 per cent of Canadians will experience a mental health problem or illness over the course of their lives.

Tommy, a seven-foot teddy bear, made a stop to pose for pictures with the ONA Board of Directors and ONA leaders and members at the June Provincial Coordinators Meeting (PCM).
as part of the Ontario Health Coalition's (OHC) provincial tour, “We Can’t Bear to Lose Medicare” to bring attention to the continuing threat of privatization.

During that PCM, OHC Provincial Director Natalie Mehra spoke about the organization’s new report, Private Clinics and the Threat to Public Medicare, in which 136 private clinics in nine provinces and 400 patients were surveyed, revealing that 88 clinics in six provinces are selling medically needed services and extra billing patients too, which is against the Canada Health Act.

ONA provided a submission to the legislative Standing Committee, outlining our concerns related to Bill 87, which makes amendments to the Regulated Health Professionals Act regarding the issuing of interim suspensions before referral to the Discipline Committee at the College of Nurses of Ontario and the posting of alleged offences even if the member is cleared by that committee.

A contingent of ONA members joined 3,000 others delegates from across the country at the 28th convention of the Canadian Labour Congress (CLC) to listen to rousing guest speakers and panel presentations on issues such as a greener economy, better protections for equity-seeking members and the creation of good jobs; support a resolution that the CLC will work with affiliates and allies to protect, strengthen and expand universal public health care and campaign for a national Pharmacare Plan; and march to Toronto’s financial district to champion for the same important causes discussed during the meeting.

In light of the tragic murders of eight vulnerable long-term care (LTC) residents, ONA supports a public inquiry into LTC in Ontario and believes it must be broad enough that systemic issues in this sector are addressed.

Prominent guest speakers, critical workshops, important dialogue on such issues as safe staffing, violence in the workplace and Indigenous health, along with a lunchtime rally and after-hour activities, made up the CFNU’s Biennial Convention in Calgary, attended by a contingent from ONA, including members of the Board, Local leaders and staff.

ONA sent a letter to the provincial coroner requesting an inquest into the homicide of a resident by another resident at St. Joseph’s Villa in Dundas, and for standing in the event an inquest is called.

Members are being encouraged to participate in an upcoming research project on RN workforce planning and forecasting, which ONA strongly supports, being led by Linda McGillis Hall, a recognized leader in nursing health services and systems research.
With the next round of bargaining in the hospital sector fast approaching, a new Hospital Central Negotiating Team was elected via phone and online voting and will be oriented later in the year.

To prepare for that round of talks, along with upcoming negotiations in other sectors, ONA launched an electronic Have a Say survey, with member responses helping shape our bargaining priorities.

Litigation of the controversial vaccinate-or-mask policy introduced at many Ontario hospitals is continuing with the Toronto Academic Health Sciences Network group of hospitals, which agreed to another central arbitration process and to be bound by the outcome of a lead case: St. Michael’s Hospital.

As the collective agreements for our 10 community care access centres (CCACs) expired on March 31, 2016, bargaining commenced earlier this year and all 10 have now reached a settlement.

After a tense time at the bargaining table, members working for Fiat Chrysler Automobiles Canada narrowly avoided a strike by reaching an agreement at conciliation.

ONA continued to meet with the Ontario Hospital Association on our proposed gender-neutral evaluations system, which will be used to evaluate all ONA job classes as well as potential male comparators, with the aim of finalizing the group groupings over the next few months.

Similarly, we continued to meet with the participating nursing homes to negotiate a new gender-neutral comparison system and evaluate the RN job class and other positions.

ONA also continued to review pay equity plans for public health across the province to determine compliance.

The 42 nurses working at the Chatham-Kent Public Health Unit, whose contract expired in December 2016, settled their contract at conciliation after voting in favour of job action at a pre-strike vote.

The most recent hospital contract interpretation teleconnect provided information on job posting language.

ONA will continue supporting the Workers Arts and Heritage Centre in Hamilton, which aims to preserve, honour and promote the culture and history of all working people, in the amount of $7,500 per year for 2017, 2018 and 2019.

Following conciliation and mediation with the assistance of a provincial mediator, RNs at Sunbeam Centre in Kitchener voted to accept the employer’s final offer, averting a strike by just a few days.

Performance appraisals in long-term care (LTC) homes was the focus of our most recent LTC teleconnect.

ONA continued to produce tip sheets on a variety of labour relations and other issues to assist our Bargaining Unit leaders and members.
Human Rights/Accommodation/Return to Work

- The acronym LGBT has been amended to the more inclusive LGBTQ+ in all ONA policies, documents and publications, as it includes not only lesbian, gay, bisexual and transgender individuals, but also people who define themselves as Queer and others whose definition of themselves do not fit neatly into one of the listed categories.

- From Thunder Bay to London and many communities in between, ONA members showed their (rainbow) colours at Pride parades and other special events.

- Members of the Human Rights and Equity Team headed to Queen's Park for a private meeting with NDP Health Critic France Gelinas to discuss their specific workplaces, followed by Question Period, where nursing and human rights questions were put to the government, and finally the reading of ONA’s petition about funding cuts.

- A letter to the editor of the Toronto Star from ONA President Linda Haslam-Stroud was published after a video emerged of a woman demanding to see a “white” doctor in a GTA walk-in clinic.

- The letter stated this is the reality every day for those working to provide care on the front lines and called for action to stop the abuse and racism in our health-care system.

- On the recommendation of the Human Rights and Equity Team, the Board approved a change in the theme for this year’s Human Rights and Equity Caucus, which kicks off Biennial Convention Week in December, to We Need to Talk: The Reality of Stereotyping.

- The most recent human rights and equity teleconnect provided an overview of attendance management programs to educate and protect our members.

- ONA recognized and celebrated the unique heritage, diverse cultures and outstanding contributions of Indigenous peoples on National Aboriginal Day.
ONA’s violence prevention strategy, which aims to eliminate or reduce the number of violent incidents health-care professionals experience in their workplaces, continued to gather momentum, as more and more members shared their stories with us.

A dedicated violence prevention campaign website – www.ona.org/violence – along with a tool box full of helpful information and resources are main components of the campaign.

The campaign has one major ask of members: to report all workplace violence incidents, which is their legal duty, so that employers are aware of all workplace hazards and can act on them and so the Ministries of Labour and Health and Long-Term Care understand how serious this issue is and fund and enforce preventive items for worker protection and patient safety.

The 23 recommendations contained in the progress report released by the government’s Leadership Table on workplace violence prevention in health care are “a first step to keeping Ontario health-care workers safe,” said ONA President Linda Haslam-Stroud, one of four members of the Executive Committee that provided strategic direction for the leadership group.

Members from across the province paused on National Day of Mourning and Remembrance to reflect on those who have been made ill, injured or died on the job, including fellow members Nelia Laroza and Tecla Lin, who died of SARS while caring for patients, and Lori Dupont, who was murdered at Windsor’s Hotel-Dieu Hospital.

An ONA member who was absent from work due to several conditions and denied long-term disability benefits because the insurer said they had not received the medical information requested and there was no basis for the pain, received retroactive payments of more than $4,500 after ONA proved in our appeal that she had seen several specialists, all of whom agreed she had severe pain and is restricted from working.

A presentation provided to the Board by Vector Research showed the public is more aware of patient violence against nurses, with the majority also believing post-traumatic stress disorder is common in nurses.

Region 4 Vice-President Laurie Brown, who holds the portfolio for occupational health and safety, is acting as a panelist on the revision of the Registered Nurses’ Association of Ontario’s Best Practice Guideline, Preventing and Managing Violence and Bullying in the Workplace.

Our Health and Safety Specialist is sitting on Public Health Ontario’s Occupational Dermatitis in Health Care Committee, ensuring that a best practice guide developed includes prevention to the exposure in addition to best practices after exposure.

ONA is disgusted at a court decision that found the Royal Ottawa Mental Health Centre guilty of only one of five charges in a case where an RN was stabbed numerous times in the head and neck by a patient at its Brockville site, stating we are unrelenting in our efforts to push employers and the government to eliminate violence in our workplaces and protect nurses and the patients under our care.

The Ministry of Labour has issued strong orders at Alexandra Marine and General Hospital in Goderich for accident notification (14 in total), and inspectors are being retrained to ensure consistency in the province.

ONA is currently working with both the Centre for Addiction and Mental Health and The Ottawa Hospital on violence prevention, with the CEOs of each hos-
pital committing to working with us to resolve ongoing concerns about violence in their workplaces.

- Approximately 250 members from across the province participated in ONA’s Health and Safety Caucuses to share stories and information about supervisory incompetence in their workplaces.

- While the government has introduced legislation to allow workers’ compensation benefits for all mental health injuries arising from workplace events after years of advocacy by ONA, including a significant legal challenge, we are concerned it doesn’t go far enough and are advocating to ensure that all our members have equal access to workers’ compensation benefits.

- ONA President Linda Haslam-Stroud and First Vice-President Vicki McKenna presented to world nursing leaders on post-traumatic stress disorder and our struggle to be included in presumptive legislation at the International Council of Nurses Congress in Barcelona, Spain.

- We won a WSIB case in which an operating room nurse developed a sudden onset of fever and overall malaise after sustaining a scratch on her buttocks donning the scrubs preparatory to a surgery, with the Appeals Resolution Officer agreeing that whatever was embedded in the scrubs taken from the hospital’s supply shelf was more likely than not the significant contributing factor and awarding initial entitlement and full Loss of Earnings benefits.

- The Canadian Federation of Nurses Unions released a paper, *Enough is Enough: Putting a Stop to Violence in the Health Care Sector*, which shows that 61 per cent of nurses in Canada have experienced a serious problem with workplace violence over the past year, but only about three-fifths of those who had experienced “serious” violence reported the incidents at the time.

- Staff are developing a research agenda and criteria for determining which research projects ONA will support moving forward.

- In response to the WSIB’s focus on cutting its own costs by cutting injured workers’ benefits, ONA joined injured workers and other members of the labour community for a march and rally at Queen’s Park to make it clear that workers’ compensation is a right.

- ONA is working with the Public Services Health & Safety Association (PSHSA) in conjunction with the Ministry of Health and Long-Term Care on the development of an Organizational Risk Assessment program framework for infectious disease threat exposure in health organizations, first for hospitals and then adapted to other health-care organizations.

- The Registered Nurses’ Association of Ontario, the Registered Practical Nurses Association of Ontario, the College of Nurses of Ontario and ONA are developing a Nurse Health Program with $12 million from the Nursing Retention Fund.
Local Political Action/Member Engagement

- Many Locals are taking advantage of the $1,000 available to them each year specifically for political action work (Policy 26.11) and are including that in their budget preparations.
- Two such recent examples are Locals 12 and 46, which sponsored a children’s soccer team, and Local 73, which designed and placed ads in Thunder Bay’s Women magazine to acknowledge that nurses are the heart of health care and for Day of Mourning.
- RNs working at the Chatham-Kent Health Alliance launched an information campaign to inform the public that the loss of 12 full-time and two part-time RN positions and bed closures will have a significant impact on safe, quality patient care, particularly in the area of women’s and children’s services, and will result in less access to emergency care.
- So far in 2017, ONA’s Petition for Better Care has been read 11 times in the Ontario Legislature, for a total of 36 times, some in the presence of our members.
- The total number of signatures on our hard copy petitions, distributed largely by our Locals, is almost 17,000, and our online petition now has approximately 22,000 signatures, putting our total petition count at close to 40,000!
- We broadened the scope for our post-traumatic stress disorder lobbying campaign by asking front-line members to call and simply leave a message with their MPPs asking for their support for including nurses in presumptive legislative if they can’t meet with them in person, and to send a message through our website to the Ministers of Labour and Health and Long-Term Care.
- For the second consecutive year, ONA delegates at the June Provincial Coordinators Meeting (PCM) spent half a day giving back to their host community, painting and improving gardens at women’s and children’s shelters in the Niagara region, which they greatly appreciated.

Delegates also purchased much-needed toys for the shelters in advance through an online registry and donated an additional $800 at the PCM, which ONA members spent at a local toy store.

North East Community Care Access Centre (CCAC) members joined the Sudbury and Sault Ste. Marie picket lines of CUPE Local 2073, whose members were on strike against...
the Canadian Hearing Society for more than two months, returning the kindness shown to them during the CCAC strike in February 2015.

ONA members took up our call to sign an e-petition to the Government of Canada, urging the implementation of a Pan-Canadian Universal Pharmacare Plan in this 42 Parliament and a National Formulary for medically necessary drugs.

ONA members continued to stand up for their patients and stand out from the crowd of health providers by embracing the Wear White on Wednesdays campaign, including during the Wednesday of the June PCM.

To help showcase ONA’s Wear White campaign, Local 55 Coordinator Brenda Pugh came up with the idea of offering a $10 gift card to Tim Hortons to her members who took a selfie or group selfie of them wearing white during Nursing Week – and the response was overwhelming!

Although the odds were stacked overwhelmingly against us, health-care professionals at Health Sciences North in Sudbury voted to join ONA over the Ontario Public Service Employees Union in a Public Sector Labour Relations Transition Act (PSLRTA) vote, meaning we welcome 800 members into our union.

We held three successful certification votes during this time period: LAMP Community Health Centre in Etobicoke (five NPs, six RNs and two RPNs), Southlake Regional Health Centre in Markham (49 respiratory therapists), and LaPointe-Fisher Nursing Home in Guelph (eight RNs).

The Retention and Recruitment Team fielded calls from RNs and allied health professionals seeking the benefits that ONA membership offers, and additional campaigns are underway.

We also continued to monitor the transfer of health services across the province and are filing PSLRTA applications when necessary to protect our work.

At the June Provincial Coordinators Meeting, Canadian Nursing Students’ Association (CNSA) Ontario Regional Director Kelsey Fallis thanked delegates for “welcoming me into your profession and union,” noting she is excited to graduate and “be able to work with ONA for the rest of my life.”

Six CNSA affiliate students were assigned to work with several ONA staff teams as part of our summer Student Placement Program, which gives students the opportunity to contribute to the significant work we do for our members.

Board members continued to participate in regular conference calls with CNSA leaders and campus delegates to learn about their issues firsthand so we can take them forward to the government and nursing stakeholders.
Member Education

ONA workshops continued to be popular, with a total of 90 delivered in the first few months of 2017, and 678 members in attendance.

ELeaning, which provides free online education to ONA members, was a favourable option, with approximately 250 program completions from January to April 2017.

Four additional eLearning programs have joined the 21 already offered: Disability Income Protection Plans; WSIB; Harassment and Bullying; and ONA Structure/Bargaining Unit Structure.

The most popular of our 14 video lectur-ettes include ONA Professional Practice; Harassment, Mobbing and Bullying; RN/ RPN Scope of Practice and the CNO Three Factor Framework; and How to be Both a Professional and a Union Member.

Letters of congratulations were sent to the successful candidates for ONA's fall Leadership Summit and Activist Camp, which brings together 90 members (30 in each of the Activist, Novice and Advanced streams) to learn, interact and engage over the course of a week under the umbrella theme of Let's Get Loud.

At this year’s Canadian Association of Labour Media Awards, ona.org was named the Best Website Redesign, with the Front Lines feature section, ONA Members and Patient Privacy: Be Aware and Beware receiving an Honourable Mention in the Ed Finn Award for Excellence in Writing category.

ONA also received three Apex Awards, which recognize excellence in graphic design, editorial content and success in achieving overall communications effectiveness and excellence, for our Front Lines magazine in the Magazines, Journals and Tabloids (Print) category; our media-only publication, Behind the Front Lines in the Electronic and Email Newsletters category; and the Front Lines feature section, ONA Members and Patient Privacy: Be Aware and Beware in the Editorial and Advocacy Writing category.
Former Ontario Chief Justice Warren Winkler spoke to the June Provincial Coordinators Meeting (PCM) education session on the grievance/arbitration process, specifically where it is broken and how it needs to be fixed, peppering his tips and tools with humorous anecdotes.

Phase one of ONA’s mobile app was launched to rave reviews at the June PCM, allowing users to access union news and special events, all central and Local collective agreements and contact information.

A new education-specific electronic newsletter, Learning Links, was launched to provide information on key happening and the latest trends in ONA education, along with a regional round up of educational offerings.

Online visits to our website and Facebook and Twitter pages remained strong and steady in the first few months of 2017, with the top issues viewed being collective agreements, bargaining updates, professional practice documents, education forms, and health and safety resources.

ONA’s Facebook page reached a significant milestone recently as we now have more than 20,000 followers!

Our Twitter followers are also at an all-time high of almost 14,000, with users continuing to retweet information related to the work of our union.

Professional Issues

ONA continued to make gains for our members in addressing their workload and professional practice concerns and have been able to reach settlements prior to having to advance to an Independent Assessment Committee.

In one such settlement, reached through the mediation process, Huron Perth HealthCare Alliance (Stratford site) committed to a six-month trial that would increase the staffing in the post anesthesia care unit by one RN, ensuring the RN admitting the patient is the same RN that recovers and discharges the patient.

Under the theme, We are Ontario’s nurses. Nurses know, ONA members, along with their colleagues, families and friends, acknowledged and celebrated their caring profession through an array of special events during Nursing Week 2017.

With RNs being replaced with less qualified providers and the roles of these providers continuing to be blurred throughout the province, ONA’s Professional Practice Team reviewed the literature available and developed a list and brief summary of articles that support our members and staff in advocating for more RNs, called Nursing Skill Mix, A Synopsis of the Literature.

ONTARIO NURSES’ ASSOCIATION

ONA UPDATE: FALL 2017
ONA reached one of the quickest professional responsibility complaint (PRC) settlements in our history, which provides significant changes in Northumberland Hospital’s emergency department, including an increase in RN staffing by one RN 12 hours on the night shift seven days/week, an increase in baseline staffing by one RN 24/7, and great improvements in security resources.

Members from the intensive care units at the Birchmount and General sites of The Scarborough Hospital came out in full force at their PRC meetings with the employer all dressed in white, which made a huge difference in the employer’s response.

As Bill C-14 (Medical Assistance in Dying – MAID) passed, ONA continues to participate in MAID informational webinars presented by the Ministry of Health and Long-Term Care and the Chief Coroner, along with a committee that is updating the Registered Nurses’ Association of Ontario’s Best Practice Guideline for End-of-Life Care, which will incorporate MAID issues.

We maintain that our employers and the College of Nurses of Ontario (CNO) have a key role to play in supporting, educating and informing our members of their responsibilities regarding MAID.

To assist our professional practice reps and Bargaining Unit leaders with serious workload issues in their Bargaining Units, the most recent professional practice teleconnect discussed successfully leading members in the PRC process.

Outstanding issues arising from the December 2015 settlement at the Hamilton Niagara Haldimand Brant Community Care Access Centre resulted in an addendum that addresses concerns related to the placement process and coverage of members’ caseloads while precepting new staff, including improved documentation tools, remote access to files and practice changes, along with 50 per cent coverage for home visits and assessments while precepting.

We strongly oppose the proposal that an NP who has not completed the required education will have a negative notation on the CNO’s public registry, Find a Nurse, stating that the member is “entitled to practice with restrictions” because she/he has not met the educational requirement.

As the Nursing Act and its regulations are being amended to also authorize RNs to prescribe medications and communicate a diagnosis with additional education, we fear Find a Nurse will also not reflect an RN’s ability to do so in a positive light without any mention of “restrictions” or other negative connotations, and encouraged our members to join us in sharing their concerns with the CNO.

The most recent nurse practitioner teleconnect provided an updated on issues of key importance to these members.