The following is a summary of ONA’s key activities and successes since the last “The Work of the Union” update in winter 2016.
After three futile weeks of bargaining with the Ontario Hospital Association, talks for a renewed collective agreement for our 60,000 RNs and allied health professionals in the hospital sector broke down.

Negotiations came to an abrupt halt during mediation on February 12 after the Ontario Hospital Association (OHA) made a final offer that would result in the gutting of our members’ wages, benefits and job security.

Throughout contract talks, ONA’s Hospital Central Negotiating Team, chaired by Local 99 Coordinator and Kingston General Hospital Bargaining Unit President Cathryn Hoy, remained committed to our members’ priorities as identified in our recent Have a Say bargaining questionnaire.

After the stalemate, ONA and the OHA proceeded to arbitration on March 21-22 with Arbitrator Chris Albertyn, and expect a decision to come down in early summer.

ONA’s Nursing Homes Central Negotiating Team was elected by their peers in that sector and received orientation in preparation for bargaining talks in May.

Collective agreements for our 10 community care access centres (CCACs) expired on March 31, 2016 and a bargaining strategy is being developed.

In 2016, ONA will also be in bargaining for our non-participating long-term care homes, homes for the aged, community health, industry, clinics and public health, and will be seeking improvements in wages, benefits and working conditions, including workloads.

ONA President Linda Haslam-Stroud and staff met with the Director of the Primary Health Care Branch regarding family health teams and nurse practitioner compensation rates.

Thanks to the recent decision of Arbitrator Hayes, who called the vaccinate or mask policies of many Ontario hospitals “unreasonable,” it is likely all hospitals in the Hayes group, along with several others, will remove this requirement.

ONA successfully challenged an employer’s reliance on a Nursing Resource Team to fill available shifts instead of offering those shifts to regular part-time and causal nurses of our union.

The most recent hospital contract interpretation teleconnect provided information to Bargaining Unit leaders on Local issues bargaining for 2016.

Five ONA nurse practitioners at Harrow Health Care narrowly avoided a strike in late January after ratifying an agreement with their employer.
As the Victorian Order of Nurses (VON) is restructuring and recently appeared in court to solidify the terms and conditions of its bankruptcy protection (which does not apply to VON Ontario), ONA, as a creditor, is reviewing all of the court’s orders, and is gathering information and taking positions to protect our members’ pension plan.

ONA President Linda Haslam-Stroud made a presentation at the recent Canadian Institute’s conference on the steps to building positive union-management relationships.

Ontario must acknowledge that economic equality is a human right and amend the Pay Equity Act to allow for better and equal access for women and to require employers to maintain female job rates at those of their proxy employer, ONA stated in a submission to the Wage Gap Steering Committee just in time for International Women’s Day on March 8.

The long awaited decision of the Pay Equity Tribunal for Nursing Homes was released and confirmed that ONA members in the proxy sector are entitled to maintenance.

ONA will now meet with the homes to negotiate a new gender-neutral comparison system and evaluate the RN job class and other positions.

The Review Services Office of the Pay Equity Commission released its decision for all 10 CCACs, agreeing that due to the reorganization and restructuring of our Bargaining Units, as well as the new job classes, the employers have failed to maintain pay equity.

Our Pay Equity Team developed a gender-neutral comparison tool that we proposed to the OHA for use in the central hospital bargaining process.

ONA also continued to review existing pay equity plans in public health and the community (clinics, industry, home care) to determine compliance.

In February, we marked the one-year anniversary of the strike of nine of our CCAC Bargaining Units, which forged a sense of solidarity and showed what members can do when we come together as one.

ONA filed a grievance and made a formal complaint to the Ministry of Health and Long-Term Care regarding the violation of Ministry standards at Hogarth Riverview Manor, as there have been multiple occasions when there were no RNs onsite.

Local issues bargaining was the focus of the most recent long-term care teleconnect.

ONA continued to produce tip sheets on a variety of labour relations and other issues to assist our Local leaders and members.

Member Education

Novice Treasurers participated in a well-received training day while ONA hosted a webinar for our seasoned Treasurers, which included orientation to their new computers and an overview of the changes to their Accounting program.

ONA workshops continued to be popular, with a total of 459 booked in 2015 and 58 held from January 1 to February 16, 2016.

All ONA workshops conducted up until the end of December 31, 2015 received an impressive average satisfaction rate of 91 per cent.

The completion rates for ONA’s eLearning program, which provides free online education, continued to see significant growth, with an increase of 205 per cent from 2014 to 2015.

Video lectureettes were also a very popular form of education for our members, with our website hits and completion rate increasing a staggering 205 per cent in 2015 over 2014, the most popular being ONA Professional Practice, Understanding Conflict, and the RN/RPN Scope of Practice and the College of Nurses of Ontario’s Three Factor Framework.

Delegates at the March Provincial Coordinators Meeting (PCM) received education on how they can effectively get involved in ONA’s Nurses Know campaign at the Local level.

ONA’s Leadership Conference will be back by popular demand this fall and will once again focus on three streams: activists, notice and advanced.

To help ONA redesign our website to reflect the changing times, we asked grassroot members to fill out an online survey to tell us what they like and think could be improved on www.ona.org.
While the next phase of ONA’s Nurses Know campaign continued to feature a strong provincial component, in the form of radio, television, print and transit ads, along with a significant social media presence, the real focus was in our Locals.

The campaign demands a moratorium on disastrous cuts to RN positions throughout the province, which are causing needless suffering to patients, noting that Ontario has the second worst RN-to-population ratio in Canada.

A dedicated campaign website – nursesknow.ona.org – is full of resources to download, including the posters, postcard and other helpful educational material.

Thousands of signatures have been collected for our online campaign petition, which urges the government to commit to fully restoring hospital operating funding, create a fully-funded health human resources plan, ensure hospitals have enough resources to provide safe, quality and integrated care for clinical procedures, and stop plans to move such procedures into private clinics.

ONA President Linda Haslam-Stroud spoke to Nancy Naylor, the Associate Deputy Minister, Delivery and Implementation, from the Ministry of Health and Long-Term Care (MOHLTC), along with two Assistant Deputy Ministers, to reiterate our “ask” for a moratorium on RN cuts and increases to hospital funding.

The government’s action plan to put patients first will not succeed if it does not address the essential role of RNs in the delivery of quality patient care, ONA Negotiations Manger Bev Mathers told the Standing Committee on Finance and Economic Affairs as part of our pre-budget submission.

Among our recommendations in that submission were: implementing a moratorium on any further erosion of RN positions; improving hospital base operating funding to at least cover inflation and population growth; funding and developing a multi-year human resources plan to reduce the significant gap in the RN-to-population ratio; moving towards a fully integrated public home care system; funding and enforcing a staffing standard in long-term care homes; and funding a health care action plan for workplace violence prevention to mandate such things as RN staffing levels and appropriate security.

On the same day we delivered the pre-budget submission, ONA participated in an Ontario Health Coalition (OHC)-led rally to protest devastating hospital cuts sweeping the province, which featured several guest speakers, giant scissors to symbolize the cuts and a sea of bright yellow signs detailing the devastation on several local hospitals.

When the actual Ontario budget came out on February 25, there was a one per cent funding increase to hospitals – a step in the right direction, but not enough to cover years of zero increases, ONA told the media, adding we expect that money invested in front-line RNs.

ONA will monitor the implementation of the funding amounts for each health care sector announced in the budget and will continue to track layoff notices and the elimination of RN positions.

ONA has raised some very serious concerns regarding the transition of home care services from community care access centres (CCACs) to Local Health Integration Networks (LHINs), as outlined in the government’s discussion paper on CCACs and home care reform, including the fragmented approach to care for patients and their families under the existing model of CCACs and ensuring the stability of home care services and staffing.

Representatives from ONA met with several other unions regarding the changes proposed in the CCAC discussion paper, especially the implications for labour relations.

ONA will provide $45,000 to the OHC this year: $10,000 for sponsorship, $20,000 for campaigns and $15,000 for a 2016 province-wide referendum on hospital cuts and privatization of services.

Bill 119, Employment and Labour Statue Law Amendment Act 2015 contains a percentage threshold for votes under the Public Sector Labour Relations Transition Act before a union can be included on the ballot, but ONA believes this is contrary to workplace democracy and continued to voice our objections to the Minister of Labour.

ONA was invited to meet with the MOHLTC and the Ministry of the Attorney General to review Ontario’s approach to Physician-Assisted Dying (PAD).

We are committed to ensuring that our members’ individual rights, such as conscience, religion/creed and privacy, are protected in any health care facility and practice settings where access to PAD is made available and our members are employed.
Labour Minister Kevin Flynn introduced Bill 163, Supporting Ontario’s First Responders Act, and ONA met with him and sent a letter regarding the inclusion of nurses in the legislation, which provides that certain workers who are diagnosed with posttraumatic stress disorder are entitled to benefits if specific conditions are met.

The Canadian Federation of Nurses Unions, including First Vice-President Vicki McKenna, offered strong recommendations focused on implementing a new Health and Social Accord at the First Ministers Meeting in Vancouver.

Those recommendations included: Stable federal funding, a national prescription drug plan, improved mental health services, home and community health access, a strategy for healthy aging, improved indigenous health, a coordinated health human resources plan and strong acute care.

ONA President Linda Haslam-Stroud met with the Assistant Deputy Minister of Health and Long-Term Care to secure ongoing funding for the Late Career Initiative and Nursing Graduate Guarantee.

After months of lobbying by our members, the new federal Liberal government tabled legislation to repeal the regressive Bill C-377, which was designed to weaken unions by forcing redundant and unreasonable financial reporting that would have taken time away from providing exemplary services to our members.

We also welcomed the news that the federal Liberal government will repeal anti-union labour legislation, Bill C-525, which changed how unions can certify and decertify.

ONA President Linda Haslam-Stroud and First Vice-President Vicki McKenna signed special valentines in support of Have a Heart Day, a campaign to fight for services for First Nations children.

ONA was pleased the government has made hospital parking more affordable for patients, their loved ones and caregivers as we have long spoken out about the financial burden of hospital parking fees, calling them a barrier to health care.
Health and Safety/WSIB

- 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 Executive Team, made up of the Deputy Ministers of Labour and Health, the CEO of the Ontario Hospital Association, and ONA President Linda Haslam-Stroud, is overseeing the Leadership Table and the groups working on violence initiatives for nurses in hospitals, including documenting and reporting violence incidents and how to collect evidence to help us ensure safer workplaces.
- The team’s deadline for finalization is the end of 2016; they will then look at a rollout for all health care workers in hospitals followed by homes and communities.
- ONA and the Toronto East General Hospital (TEGH) CEO made a presentation on the collaborative model and workplace violence program to the Leadership Table and the Nova Scotia Nurses’ Union conference.
- A member had her long-term disability benefits approved retroactively after ONA successfully argued that she was exposed to volatile organic compounds in a newly constructed facility due to problems with construction material and the HVAC system.
- The Canadian Health Accreditation Report quoted ONA extensively, including our statistics and recommendations for safer workplaces and violence prevention.
- ONA supported the partnership development grant application from the Institute

The Work of the Union

Student Affiliation

- ONA continued to speak out, including sending a letter to the Minister of Health and Long-Term Care, after the first results of the controversial American National Council Licensure Examination for Registered Nurses (NCLEX-RN) for entry to practice showed a drastic decline in pass rates.
- We are concerned the exam is not based on Canadian curriculum, our unique health care system, or preparation material, and that if an applicant fails the exam three times, she or he could be required to complete another approved or equivalent nursing program before a further attempt can be made.
- Thanks to this steadfast lobbying for students, the government told ONA it is making amendments to the Nursing Act Regulation to address our concerns, and the College of Nurses of Ontario (CNO) is expected to make necessary changes to its registration criteria.
- ONA’s Legal Expense Assistance Plan (LEAP) Team is also pursuing an appeal regarding the NCLEX-RN after the CNO’s Registration Committee refused to allow a rewrite for a nursing student who failed the exam three times and must re-do her entire BScN if she wants to practice nursing.
- Representatives from the Canadian Nursing Students’ Association (CNSA) Ontario region presented ONA First Vice-President Vicki McKenna with an award for her dedication and commitment to nursing students during the February Board of Directors meeting.
- Up to 10 (previously five) nursing students per year will be selected to receive a $1,000 ONA scholarship, based on specific criteria and procedures, including that they must be an immediate relative of an ONA member and write an essay on the importance of our union to nurses.
- ONA was a gold sponsor of the CNSA’s 2016 national conference at Sault College, attended by Region 1 Vice-President Pam Mancuso and ONA President Linda Haslam-Stroud, who spoke to the official and associate delegates from our nursing schools during the first Ontario Regional Executive meeting.
- Diana Kutchaw, an RN and Labour Relations Officer from ONA’s North District Services Team, also presented a well-received workshop about our campaign to prevent violence in the workplace during the CNSA national conference.

Board members continued to participate in regular conference
for Work and Health entitled, *Healthy and Productive Work,* which focuses on identifying promising disability management practices to reduce work disability due to mental health conditions among Ontario health care workers.

- ONA’s submission to the Standing Committee on Social Policy regarding Bill 132, an Act to amend various statutes with respect to sexual violence, sexual harassment, domestic violence and related matters, recommended that proposed amendments to the *Occupational Health and Safety Act (OHSA)* be refined to provide for real prevention, address mental injury, balance the need for complainant privacy with the need to know necessary to protect workers and allow for unions to assist with enforcement, provide for effective investigations, and provide an enforceable regulation detailing measures and procedures an employer must take to remedy workplace harassment.

- Litigation grinded on with appeals of Ministry of Labour (MOL) decisions related to violence issues continuing at hospitals in Brockville, Guelph and Cambridge, and court cases for violence-related offences continuing at Royal Ottawa, Brockville and the Centre for Addiction and Mental Health.

- ONA donated $600 to the Occupational Health Clinics for Ontario Workers for the Repetitive Strain Injury Day Conference, which is broadcast across the world on the internet.

- ONA wrote to the Ontario Women’s Directorate in support of a proposal by the Ontario Association of Interval and Transition Houses on the development of a training program for front-line workers on gender-based violence and support for survivors.

- We continued to meet with staff from union counterparts to strategize on how best to respond to Workplace Safety and Insurance Board policy changes and interpretations.

- ONA’s work with the College of Nurses of Ontario, the Registered Nurses’ Association of Ontario (RNAO), and the Registered Practical Nurses Association of Ontario on a program to support nurses with mental health and addiction issues continued.

- ONA President Linda Haslam-Stroud met with Public Health Ontario Chief Executive Officer Dr. Donnelly to discuss matters related to Ebola/infection control.

- Haslam-Stroud also wrote to Ontario’s Chief Prevention Officer, requesting that his next newsletter focus on health and workplace violence as none have to date – and it did!

- Health and Safety specialists provided feedback to the MOL on its Safe at Work Ontario Sector Plan, noting that our members and other health care workers will only be safe when the MOL and Ministry of Health and Long-Term Care hold health care employers accountable for the health and safety of their workers and compliance with the *OHSA* and its regulations.

- 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.
Local Political Action/Member Engagement

- Members took to the streets of London to protest the London Health Sciences Centre’s (LHSC) plans to close four acute palliative care beds at Victoria Hospital this spring and cut roughly 4,000 hours of RN care, which are contrary to recommendations included in an external review commissioned by LHSC and St. Joseph’s Hospital.

- Nurses from Runnymede Healthcare Centre in Toronto continued to protest the employer’s plan to remove a staggering 41,000 RN hours per year, despite an 8.5 per cent budget surplus, including an email campaign and information picket.

- ONA members wholeheartedly embraced the Wrapped in Courage purple scarf campaign, which raises awareness about domestic violence and violence against women and provides crucial support to desperately underfunded shelters across the province, with Local 70 alone raising $1,000 to be shared between their local Interval House and Mission Services of Hamilton.

- Several members joined Region 2 Vice-President Anne Clark for a lobby day on Parliament Hill to discuss concerns about eroding RN positions and cuts to our health-care system.

- A long-time supporter of Operation Christmas Cheer, which provides grassroots support, cheer, food hampers, grocery gift cards and toys to every Ontarian walking a picket line during the holidays, ONA delivered handfuls of donations, including gift cards from our Local leaders and staff.

- Local leaders, members and their supporters staged a very successful information picket at Windsor Regional Hospital on Family Day to protest the facility’s decision to cut 169 RN positions.

- On the day St. Joseph’s Healthcare Hamilton delivered individual notices of the elimination of 61 RN positions, hundreds of ONA members, Local leaders, staff and ONA President Linda Haslam-Stroud rallied outside the hospital to say enough is enough!

- As a result of our efforts, St. Joseph’s announced it is rescinding the layoff notices to RNs in the neonatal intensive care unit.

- Local leaders participated in the most recent Ontario Health Coalition’s Days of Action campaigns to protest cuts at Northumberland Hills Hospital in Cobourg and Georgian Bay General Hospital in Midland.

- Local 115 Coordinator Faye Loverock and member Jenny Poon from St. Joseph’s Health Centre in Toronto supported ONA at our presentation to the pre-budget consultations at Queen’s Park.

- Throughout the province, members participated in special dinners, rallies and other events to mark International Women’s Day.

- Members embraced our virtual online rally application, “Thunderclap,” which allowed them (and other supporters) to donate their social media reach by having a Nurses Know campaign message broadcast from their Twitter or Facebook account at a coordinated day and time to dominate the feeds of as many people as possible.

- A new tab was added to our campaign website, “Local RN cuts,” which features active campaigns opposing cuts across the province.

- Custom Nurses Know materials were developed and made available to these Locals campaigns as well as hard copy versions of our petition.

- Local leaders were provided with the organizing tools and resources for Nurses Know at their regional Area Coordinators Conferences, including suggested actions, tips for recruiting volunteers, a message guide and campaign planning template.

- At our call, several members contacted their MPPs to stress the need for the government to take immediate action to stop all RN cuts in Ontario now.

- They also continued to share their horror stories of how cuts are affecting them and their patients, which we posted on our website and used to paint a clear picture to the government.

- The launch of our Member Secondment...
Organizing Successes

- We held several successful certification votes at: The Centre D’Accueil Roger Seguin (nine RNs); Westmount Gardens London (nine RNs); OMNI Burnbrae Gardens (10 RNs); Roberta Place (12 RNs); Extendicare Halton Hills (13 RNs); and Extendicare Haliburton (12 RNs).

- We also welcomed 34 RNs and RPNs at Bayshore Sault Ste. Marie, our first Bayshore Homecare agency, which was another breakthrough for ONA!

- 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.

- ONA also worked tirelessly with our Bargaining Unit leadership team to prepare for the Public Sector Labour Relations Transition Act (PSLRTA) vote at Providence Care (St. Mary’s of the Lake and Kingston Mental Health) to determine union representation for the RN Bargaining Unit.

- We continued to monitor the transfer of health services across the province and will file PSLRTA applications when necessary to protect our work.
In an effort to further promote equity issues, ONA’s Human Rights and Equity Team put an additional focus on six major days of observance – International Women’s Day, International Day for the Elimination of Racial Discrimination, National Day of Mourning, National Aboriginal Day, Pride and Labour Day – which includes tailored information and a number of resources, such as posters, that are easily accessible on the ONA website.

Thanks to ONA, a member was reinstated to her job and appropriately compensated after years of the employer failing to accommodate her disability and ultimately terminating her employment unjustly.

ONA acknowledged Black History Month, an opportunity to share the historical and current contributions of African Canadians and African Americans in areas such as medicine, public service, education, art, culture, economic development, politics and human rights.

Four new members are being welcomed to ONA’s Human Rights and Equity Team: Jackie Chesterman (Lesbian Gay Bisexual Transgender group), Melissa Grenier (Disabilities group), France O’Connell (Francophone group) and Colleen Taylor (Racialized group).

The Workplace Safety and Insurance Board (WSIB) Accommodations Steering Committee, on which ONA sits, continued work on setting up a section on the WSIB website to include case studies on accommodation, including mental health disabilities.

The committee also sought documentation on return to work processes or procedures to address the barriers our members face, in particular the stigma of work-related mental health disabilities.

Joining with individuals, labour unions and other organizations around the world, ONA recognized the International Day for the Elimination of Racial Discrimination, part of the global fight to end all forms of racism and racial discrimination, which commemorates the lives of 69 people who were killed in 1960 while participating in a peaceful demonstration against apartheid in Sharpeville, South Africa.

The most recent human rights and equity teleconnect focused on Creed and the Accommodation of Religious Observances in the Workplace.

ONA continued our advocacy with the Ontario Human Rights Commission on its review of the College of Nurses of Ontario, as we want the barriers that prevent nurses with mental health disabilities from accessing employment removed.

The Human Rights and Equity Team highlighted key issues in each issue of Front Lines.
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 (IAC).

Things are looking up in Kingston General Hospital’s Critical Care Program, where most of the 56 IAC recommendations addressing RNs’ practice and workload issues have been implemented, with the unit’s staffing, retention and morale improving immensely as a result.

Planning began for Nursing Week 2016, which builds on the theme of our multi-media provincial campaign: We are Ontario nurses. Nurses know.

Local 2 Coordinator Kristy Martin explained to Front Lines how all 19 of her Bargaining Units plan special events during Nursing Week to ensure members know how much they are appreciated, encouraging others to do the same.

The theme for Social Work Week 2016, Real Experts for Real Life, reflected that a core competence of social workers is the ability to anticipate, address and facilitate practical solutions for costly and important social issues that affect people’s day-to-day lives.

Pay equity and bargaining were the focus of the most recent nurse practitioner teleconnect.

ONA’s submission to the Health Professions Regulatory Advisory Council on RN Independent Prescribing stated that “expanding the scope of RN practice in Ontario will not only leverage the existing workforce to improve health service delivery, it will also improve recruitment and retention of the RN workforce and labour mobility.”

After the College of Nurses of Ontario (CNO) proposed by-law changes that would increase the amount of information that will be publicly available on its online registrar, ONA stated we have serious concerns about public disclosure of a number of categories of member-specific information.

Our Legal Expense Assistance Plan (LEAP) Team succeeded in a test case that challenged the CNO’s practices regarding members with mental health concerns who are the subject of health inquiries, agreeing to a settlement in which this particular member should be allowed to participate in a non-public undertaking that contains terms and conditions.

We believe the public posting of this information by the CNO is discriminatory and results in serious negative consequences because of the stigma associated with mental health illness.

ONA First Vice-President Vicki McKenna is meeting with the Ontario Renal Network to stop the implementation of personal support workers in various home hemodialysis, stating they are not an appropriate care provider in this setting.

We continued to seek clarity from the CNO on its requirement that nurses must declare they have practised in the last three years to be reinstated, as we are particularly concerned for nurses who have not been practising for health reasons.

Professional Practice specialists participated in the Registered Nurses’ Association of Ontario’s (RNAO’s) Best Practice Guideline revisions, such as the Revision of Collaborative Practice amongst Nursing Teams.

An ONA member is taking part in the review of the RNAO’s Best Practice Guidelines (BPG) for post-partum depression, while another member will be participating in a review of the BPG for nurses with adult asthma.

During the most recent professional practice teleconnect, Professional Practice specialists addressed how to effectively use the Workload/Professional Responsibility Review Tool found in the hospital collective agreement.
Stop putting patients at risk
Nurses know.

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*To view “Work of the Union: Winter 2016 Update,” see the January issue of Front Lines or log onto the ONA website at www.ona.org/workoftheunion.