The following is a summary of ONA’s key activities and successes since the last “The Work of the Union” update in winter 2017.
With the next round of bargaining in the hospital sector fast approaching, ONA put out a call for members to run for a position on the new Hospital Central Negotiating Team.

As the collective agreements for our 10 community care access centres (CCACs) expired on March 31, 2016, notice to bargain was served and we prepared for negotiations, starting with the South West and North East groups.

While voting in favour of strike action if necessary, both of these CCACs, followed closely by the South East CCAC and the Waterloo Wellington CCAC, ratified a negotiated settlement, which valued the important work members do in their communities.

As Local Coordinators voted at the Biennial Convention that a Joint Sector Meeting will replace the March Provincial Coordinators Meeting (PCM) to ensure our Bargaining Unit Presidents are supported in their work, leaders came together for the meeting in Toronto to share information, dialogue on provincial issues and break out into their sectors to discuss labour relations issues.

As Bill 41, Patients First Act, which will transfer CCACs into Local Health Integration Networks, could have a significant impact on our application before the Pay Equity Hearings Tribunal for our members in this sector, we are reviewing the impact of this change and how to proceed.

ONA won an important arbitration reinstating a nurse whose employment was terminated pursuant to the “deemed termination” provisions of the collective agreement, which provides that if a nurse is absent from scheduled work for three or more consecutive shifts without notifying the hospital and providing a satisfactory reason, the hospital is entitled to terminate her employment (see May/June 2017 Front Lines, pg. 22).

ONA continued to meet with the Ontario Hospital Association regarding pay equity and 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.

We have met with the participating nursing homes to negotiate a new gender-neutral comparison system and evaluate the RN job class and other positions.

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

An agreement was reached with the Town of Kirkland Lake, which employs nurses at Teck Pioneer Residence, notable because it provides these long-term care RNs parity with hospital nurses and some improvements to benefits.

ONA successfully argued that a perioperative surgical supervisor (PSS) is an employee under the Labour Relations Act after the employer created the role outside of the Bargaining Unit, and tried to argue that the position was managerial, not an employee and could not be a union member.

The most recent hospital contract interpretation teleconnect provided information on union representation in critical incident meetings/communication.
After 45 years with our union, Senior Director and Chief Negotiator Dan Anderson, responsible for all the significant gains in our contracts, retired, calling ONA “the best union in the world!”

As the Victorian Order of Nurses (VON) is restructuring and appearing 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.

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

### The Work of the Union

#### Student Affiliation

Thanks in large part to ONA’s steadfast lobbying for our nursing student affiliate members, as of this past January, the pass restriction of three attempts has been removed from the controversial American National Council Licensure Examination for Registered Nurses.

At the Canadian Nursing Students’ Association’s (CNSA) National Conference in Winnipeg, ONA President Linda Haslam-Stroud spoke to official delegates and associate delegates at the Ontario/Quebec Regional executive meeting, which was also attended by Region 4 Vice-President Laurie Brown.

At the Joint Sector Meeting, ONA welcomed the new CNSA Ontario Regional Director Kelsey Fallis, a York University student, who joins four other ONA student affiliate members on the CNSA board.

Region 3 Vice-President Andy Summers presented to several nursing schools in the province about the benefits of ONA membership and the important work we have done together and on behalf of students.

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.
Government Relations/Work with Allies

- In our latest Nurses Know campaign, ONA is calling codes to highlight issues of concern to our members: Code White symbolizes the painful reality of workplace violence against nurses, while Code Blue signifies our concern that inadequate hospital funding and continuing cuts to RNs are risking the very survival of our publicly funded and administered health-care system and flatlining patient care.

- Radio, transit shelter and social media ads, along with a new way of reaching out for us – cinema ads – are key components of the campaign.

- Those cinema ads, shown before the feature presentation, reached 700,000 moviegoers across the province.

- A dedicated campaign website – nursesknow.ona.org – is chalked full of statistics, member stories and information on how to help.

- Our Facebook Nurses Know campaign reached more than 1.2 million people in Ontario, with 7,000 shares, 2,000 comments and 1,200 likes of our posts.

- Hospital base operating funding must be improved to at least cover inflation and population growth to ensure our hospitals have the resources to properly staff for safe quality care in all our communities, ONA President Linda Haslam-Stroud told the Standing Committee on Finance and Economic Affairs.

- Other recommendations in our budget submission and presentation include that the government: fund and redevelop a multi-year nursing human resources plan; increase funding for expanded capacity in home care and the movement towards a fully integrated public home-care system; fund and enforce a daily four-hour staffing standard to meet the increased care requirements of residents in long-term care, including 48 minutes of daily RN care; and take action on ONA’s recommendations to the Workplace Violence Prevention in Health Care Leadership Table and fund a health care Action Plan for Workplace Violence Prevention.

- ONA provided support letters for nine research proposals submitted to the Ministry of Labour for funding from its Research Opportunities Program in the areas of PTSD research, occupational health, and technology.

- ONA is supporting the Ernestine’s Women’s Shelter, which assists women and children who experience abuse in their home lives, by attending the 23rd annual Ernestine Affair dinner/auction fundraiser.

- Canada is wasting more than $20 million per day because we are the only country with universal public health care that lacks a national Pharmacare program, the Canadian Federation of Nurses Unions (CFNU) told its annual parliamentary breakfast for MPs and health-care stakeholders from across Canada, attended by ONA provincial and Local leaders.

- ONA continued to lobby the Ministry of Labour for nurses to be included in the new post-traumatic stress disorder (PTSD) legislation, which is designed to protect and assist first-responders with a diagnosis of PTSD to get access to WSIB.

- At a meeting with the Minister of Health and Long-Term Care, ONA President Linda Haslam-Stroud brought this issue to the table, along with two other important concerns of ONA members: the role of the RN in Ontario’s health-care system and health-care funding, including public hospitals.

- Immediately following the parliamentary breakfast, ONA President Linda Haslam-Stroud, First Vice-President Vicki McKenna, Region 2 Vice-President Cathryn Hoy and retired Region 2
Vice-President Anne Clark, took nurses’ concerns about the financial ramifications of Canada’s lack of a Pharmacare program straight to Parliament Hill.

- ONA is making strategic decisions for next steps regarding the new nurse practitioners for long-term care announced by the government to ensure these NPs are in our Bargaining Units.
- The Healthcare of Ontario Pension Plan (HOOPP), the pension plan of the majority of our members, has announced that its funded position was 122 per cent at the end of 2016, meaning for every dollar of current or future pensions that HOOPP owes to its members, there is $1.22 on hand.
- A study by McMaster University Masters’ student Gail Strachan on the effectiveness of employee engagement as a tool to address the retention and attrition challenges faced in the Ontario health-care system was endorsed by ONA, with a link posted on our website for its duration.
- The Board approved support of a proposal for a research project on RN workforce planning and forecasting by Linda McGillis Hall, a recognized leader in nursing health services and systems research, pending review of the final proposal.
- Despite what is going on south of the border, Canada remains a country committed to fairness and equality, and nurses, whom the public trusts, have a vital role to play in the fight against private health care, renowned journalist, economist and author Linda McQuaig told the Joint Sector Meeting.
- ONA President Linda Haslam-Stroud joined with leaders of the CFNU and other provincial nursing unions to sign a special valentine for Have a Heart Day in support of First Nations children to help ensure they have the services they need to grow up safely at home, receive a good education, and be healthy and proud of who they are.
- The CFNU also participated in a Day of Action on Parliament Hill, demanding universal access to education for the public good.
- Stephen Lewis Foundation (SLF) Executive Director Ilana Landsberg-Lewis was presented with a $7,000 cheque from ONA, raised by member and staff participation in a raffle for several prizes donated by ONA Locals at our November Biennial Convention.
- ONA is teaming up with the CFNU and its member organizations to support the work of SLF with a commitment of $135,000 in each of three years for two projects with a particular focus on health care and health human resources: The Panzi Hospital Mobile Outreach Clinic and Blood Bank in the Democratic Republic of Congo and the Swaziland Nurses Association’s mobile clinic.
- As the Ontario Health Coalition was forced to move offices with very little notice, ONA provided $3,000 to assist with moving expenses.
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.

■ ONA President Linda Haslam-Stroud, along with the Local leader and staff, toured The Ottawa Hospital site with its CEO to see what progress has been made in violence prevention since ONA’s complaint to the Deputy Minister of Labour about enforcement and continuing risk, particularly in psychiatric emergency.

■ ONA provided $2,000 towards a Centre for Research in Occupational Safety and Health (CROSH) scholarship for a Laurentian University nursing student conducting research in this important field, which will be followed up with a meeting between ONA and CROSH to explore further collaboration.

■ Efforts of the Violence Prevention Leadership Table, made up of the Deputy Ministers of Labour and Health, the CEO of the Ontario Hospital Association and ONA President Linda Haslam-Stroud, continued, with the first year work on hospitals nearing completion.

■ An Appeals Resolution Officer allowed the case of an ONA member, who was denied ongoing entitlement for a shoulder injury on the grounds that she had a pre-existing degenerative condition, under WSIB’s Recurrence Policy in which if a significant deterioration “occurs when there is no new incident/exposure” or results from an “insignificant new incident/exposure (work-related or not), a recurrence is considered,” awarding full Loss of Earnings benefits.

■ ONA supported the Occupational Health Assessment program framework for infectious disease threat exposure in health organizations, first for hospitals and then adapted to other health-care organizations.

■ Approximately 25 members attended an information session where a representative from the Public Services Health & Safety Association and ONA’s health and safety specialist explained the flagging tool, the first available tool in the new Toolkit of Violence Aggression and Responsive Behaviours.

■ The most recent health and safety teleconnect discussed common hazards when working in the community and provided suggestions on how to control hazards at the worker, employer and system levels.

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

■ ONA will be 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
Clinics for Ontario Workers for its annual Repetitive Strain Injuries Day activities.

- A request was sent to the government by ONA to amend the Workplace Safety Insurance Act to remove the restrictions to compensation for mental stress.

- Thanks to ONA’s request that WSIB share its return to work (RTW) accommodation successes with stakeholders, the WSIB is posting accommodation solutions for employees returning to work on its website.

- ONA’s health and safety/RTW specialists now sit on the WSIB’s new Accommodations Steering Committee, along with firefighter and construction trade representatives, to develop these case studies with accommodation solutions.

- The first case study is based on an RN job and some of the accommodation ideas may be of assistance to ONA reps when returning our members to work following an injury/illness.

- Although there was initially limited evidence on the condition of a hospital member who had been absent from work due to tremors, ONA took the initiative to send the member to an independent assessment, which ultimately resulted in her benefits approvals.

- The Registered Nurses’ Association of Ontario, the Registered Practical Nurses Association of Ontario and ONA have agreed to support a Nurse Health Program with $12 million from the Nursing Retention Fund, and currently are working with the College of Nurses of Ontario regarding its implementation.

- ONA has won a WSIB case after an Appeals Resolution Officer found that the worker, who fell and injured herself after being dropped off for work in the fire lane at the renal entrance to her hospital, was in the course of her employment when the accident occurred, accepting also that proof of accident had been established.

- ONA is closely following a bill that would, if passed, further strengthen and reinforce the province’s zero tolerance policy on sexual abuse of patients by any regulated health professional.

- Region 3 Vice-President Andy Summers brought attention to the toll workplace violence is having on the physical and mental health of Ontario’s nurses at the annual injured workers’ demo outside the WSIB headquarters in downtown Toronto.

- ONA President Linda Haslam-Stroud wrote to the Minister of Labour to request that the government amends Ontario workers’ compensation legislation and policy to fall in line with a 2014 decision of the Workplace Safety and Insurance Appeals Tribunal, which found portions of the legislation and policy discriminatory on the basis of mental disability.

- While ONA and the Royal Ottawa Health Care Group agreed to settle some issues related to workplace violence prevention, including training for staff, a review of its flagging procedures and a “daily huddle” to ensure staff are aware of all safety concerns and monitored appropriately, the win was bittersweet as on the very same day the agreement was signed, the facility announced cuts to RNs.
With our new Nurses Know (Code White/Code Blue) campaign in full swing, Locals were reminded to take advantage of the $1,000 available to them each year specifically for political action work (Policy 26.11), and include that in their budget preparations.

At the Joint Sector Meeting, we furthered this work, with Locals dialoguing on potential events and campaigns in their own communities – from sponsoring kids’ sports teams to meeting with their MPPs to participating in local runs for charity – with the assistance of staff and our user-friendly Action Pack, chalked full of ideas.

ONA members, including Donna Dillon, ONA site rep at The Ottawa Hospital, discussed nurses’ concerns and the need for a national Pharmacare program with MPs during the Canadian Health Coalition’s Lobby Day on Parliament Hill.

The Board reviewed the nomination and voting procedures for the 2016 Local and Bargaining Unit elections, including what worked well and what could be improved for future elections.

At the Joint Sector Meeting, delegates shared the biggest issues they want to get loud about and what they like most about being an ONA member at a special Nurses Know and Tell video booth.

Members from Haldimand-Norfolk Health Unit launched a Local campaign, including information pickets and an email campaign, to alert the public that management has cut the one nurse practitioner who provides prenatal and postnatal care to the region, which will also result in the closure of the Mothers Care Clinic.

Members from Windsor Regional Hospital spoke out in the media about their ability to properly care for their patients, with nurses working excessive overtime daily as the hospital has had 40 more patients than beds on average for several weeks, resulting in cancelled surgeries and serious overcrowding.

A call went out for applications for our third Membership Secondment Program, which seeks four candidates to work out of ONA’s provincial/regional offices and in their Bargaining Units with the goal of them becoming more confident and successful in handling grievances and negotiations, and possibly applying for future positions on staff.

The 131 members, including RNs, RPNs, NPs, public health nurses and nurse specialist RNs, who work for the Region of Waterloo Public Health launched a campaign to bring public awareness to the fact they have been seeking a new contract since last June and that talks ended after their employer tabled unacceptable concessions and refused to listen to their proposals; they have since settled.

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 Joint Sector Meeting.
Member Education

- ONA workshops continued to be popular, with a total of 27 delivered in the first two months of 2017, and 376 members in attendance.
- All ONA workshops delivered in this time period received an impressive average satisfaction rate of 94 per cent.
- ELearning, which provides free online education to ONA members, continued to be a favourable option, with 128 program completions from January to February 2017.
- Four additional eLearning programs will join the 21 already offered by the middle of the year, including WSIB, Harassment and Bullying, and ONA Structure/Bargaining Unit Structure.
- Our most popular video lecture-ttes 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.
- The 2017 Treasurers, New Local Coordinator Workshop and Local Coordinator/Treasurer Workshop was delivered to rave reviews, providing Local leaders with valuable knowledge that will assist them in fulfilling their roles at the Local level more efficiently and effectively.
- At the Joint Sector Meeting, breakout sessions provided Local leaders with crucial information on representing addictions and staying out of privacy trouble; practical steps for work accommodations; how to develop a schedule; how to track positions and save jobs (CSI); nursing resource teams; and long-term care homes and the law.
- ONA issued a call for participants for our fall Leadership Conference, which will bring together 75 members (25 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, I’m In...Stronger Together.
- In collaboration with our health and safety specialists, the Membership Education and Events Team is planning the 2017 Health and Safety Caucus Education workshops that will run regionally in May, with Supervisor Competency as the topic.
- The education page of our website has been updated to include more concise language and visual icons that are recognizable to members and used throughout our education promotional materials and eLearning platforms.
- Online visits to our website and Facebook and Twitter pages remained strong and steady in the first few weeks of 2017, with the top issues viewed being news about RN cuts in workplaces, bargaining updates, and our Nurses Know (Code White/Code Blue) campaign.
- ONA’s Facebook followers jumped by almost 2,000 in the past few months to approximately 19,800.
- Our Twitter followers are at an all-time high of just over 13,000, with users continuing to retweet information related to the work of our union.
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).

One year after ONA achieved a workload settlement at the Waterloo Wellington Community Care Access Centre, which covers a vast geographic area of about 4,800 square kilometres and serves more than 775,000 urban and rural residents, case-load volumes are now stable and balanced.

Nurse practitioners are reaping the benefits of dedicated funding to primary care organizations, which is earmarked for increased compensation to address recruitment and retention challenges, thanks to ONA steadfastly advancing their unique interests to the government.

As the College of Nurses of Ontario (CNO) has introduced a new policy eliminating telephone support for nurses asking practice questions and instead is simply referring them by email back to the CNO Standards, ONA encouraged members to contact the College Council and ask them to rethink this lack of support for nurses — and many answered that call.

Building on the success of our 2016 theme and ad campaign, the theme of Nursing Week 2017 is, We are Ontario’s nurses. Nurses know.

As Bill C-14 (Medical Assistance in Dying – MAID) passed, ONA continued to assess its impact on our members by reviewing the legislation with our legal team and working with the Canadian Nurses Association to develop a national nursing framework to assist and support our members.

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

Sheila Riddell, ONA’s Legal Expense Assistance Plan Team manager, is ONA’s representative on the development of the Registered Nurses’ Association of Ontario’s End of Life Care Best Practice Guideline, which is being updated to include, among other issues, the new reality regarding MAID.

ONA’s constitutional challenge regarding the information the CNO posts on its website has resulted in positive changes for our members with mental health concerns.

Members who are involved in the Fitness to Practice process at the CNO can now sign voluntary undertakings and have less information posted on its website for a shorter time than in the past, and, most importantly, no one is publicly labeled “incapacitated” and has to face the resulting stigma.

ONA wrote to the CNO to express our concerns about a new requirement under proposed changes to regulations and by-laws to enable nurse practitioners in Ontario to prescribe controlled substances provided they have successfully completed education approved by the CNO Council.

We strongly oppose the proposal that a nurse practitioner who has not completed the required education will have a 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.

To assist our members understand the most appropriate caregiver in any particular situation, the most recent professional practice teleconnect discussed RN and RPN practice, the CNO Three Factor Framework and nursing assignments.

New CNO Nursing Membership Statistics, which provide a snapshot of the number of nurses employed in the province in 2016 compared to the year before, show what ONA has been saying for months: that the RN share of nursing employment in Ontario
is continuing to decline, falling from 76.4 per cent in 2003 to 69.8 per cent in 2015, while the use of RPNs is on the rise.

- ONA launched a new professional responsibility workload report form for nurse practitioners.
- Under the theme, Social Workers: Real Expertise. Real Life, Social Work Week provided ONA with the opportunity to laud the role and contributions of these highly skilled professionals, who enhance health care by helping people of all ages, backgrounds and income levels participate more fully in relationships, work, and home and community life.
- A workload settlement was reached with Health Sciences North that will help alleviate the significant workload challenges of RNs on the endoscopy unit, and will be evaluated in three and 12-month intervals to ensure success.
- The most recent nurse practitioner teleconnect provided an update on issues of key importance to these members.

Organizing Successes

- We held a successful certification vote during this time period at Villa Forum Long-Term Care in Mississauga and 30 new RN members joined 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.
- We also continued to monitor the transfer of health services across the province and are filing Public Sector Labour Relations Transition Act applications when necessary to protect our work.
In an effort to further promote equity issues, ONA’s Human Rights and Equity Team continued to 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.

ONA celebrated Black History Month, honouring black Canadians, past and present, whose achievements have shaped our country.

On Pink Shirt Day, members were encouraged to use our online shareable help spread the word that bullying must not to be tolerated.

Members and staff recognized the achievements – and honoured the struggles – of all women at marches and other events to mark International Women’s Day.

The International Day of La Francophonie gave ONA and our members the opportunity to celebrate the French language and Canada’s rich French heritage and culture, while also reminding us to embrace the core values of peace, democracy and respect for human rights.

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

ONA won a key arbitration decision challenging a hospital’s decision to terminate the employment of a probationary nurse for theft of narcotics in a situation where the nurse was subsequently diagnosed with a substance dependence that directly caused the misconduct, confirming that probationary nurses are entitled to the same protection under the Human Rights Code as long-service employees.

The Human Rights and Equity Team welcomed Legal Expense Assistance Plan Team Manager Sheila Riddell as project manager.

A special section on our new website has been set up, containing useful material and resources on accommodation and return to work, with more content in development.

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