Presidency in review

I FIND IT HARD TO BELIEVE THIS is my last column as your president. The past two years have been exhilarating, educational, intense and enjoyable. Let me reflect on what we've accomplished.

Thanks to RNAO's strong leadership and partnership with NPAO, nurse practitioners are now seeing patients in primary care nurse practitioner-led clinics. Twenty-one of the 26 funded clinics are up and running and the remaining five will soon open their doors. Our evidence-based advocacy also led to the removal of barriers that prevented NPs from practising to their full scope. Now, they can prescribe medications based on their scope and expertise, not based on a list. NPs' new legislative authority to admit, treat, transfer and discharge inpatients in the hospital setting will revolutionize hospital care, enriching the patient experience and improving access and flow throughout the system.

We forever changed the role of nurse executives by ensuring chief nursing executives are members of hospital boards and quality committees. And, we added a critical voice to Ontario's public health units by advocating for chief nursing officers in all units across the province. RNAO led this change in partnership with the Community Health Nurses' Initiatives Group, the Nursing Leadership Network, the Council of Academic Hospitals of Ontario, and the province's Association of Nursing Directors and Supervisors in Official Health Agencies.

Our work with another group, the RN First Assistant Interest Group, resulted in funding for an additional 37 new RNFA positions for a total of 79. We are now focused on how to further strengthen our health system by ensuring many more nurses practise at full scope. This is why we launched RNAO's *Primary Care Nurses Task Force*, which will recommend adjustments to the role of RNs and RPNs so that we can improve access to quality primary care and achieve better health outcomes for Ontarians and the health system.

Our platform, released well before last October's provincial election, saw all parties adopt many of our health policy recommendations. Politicians know where we stand on the need to ensure our air is clean and free of dangerous toxins. By partnering with other health and environmental groups, we can proudly say that six dirty coal units are now idle, and overall usage is down ahead of Premier McGuinty's pledge to phase out coal-fired electricity generation. We won't rest until all are closed.

Thanks to RNAO's ongoing advocacy, politicians also better understand the link between poverty and health. We will continue working with government and opposition parties to ensure the vulnerable among us have a voice, opportunity, and the means to live with dignity as active members of society.

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We will also continue to work hard to shift the emphasis of our health system so that it focuses not only on illness care, but to a greater degree on health promotion and disease prevention. Of course, we must continue to be there for those who are acutely or terminally ill. However, if we succeed in shifting the focus to these other areas, we will inevitably achieve greater health outcomes and healthier populations. As the chief nursing executive for a large hospital in the north, I embrace this need for change.

Our partnerships have been broad and strong, both within and outside the nursing family. The voice of each and every member is part of RNAO's DNA. The board and staff have listened attentively to your responses to the strategic directions survey (page 15) and we are acting on it, and will continue to do so. Your feedback about how far we have come and where we have yet to go is invaluable.

I want to thank all members, the assembly, and the board for their magnificent contributions. I want to end by thanking Doris Grinspun, as the successes I've mentioned are only possible through the joint leadership style that embodies the association. That is why, on March 3, 2012, your board made the unanimous decision to change the title of RNAO's executive director to that of chief executive officer (CEO), a title fitting with the association's tremendous growth and the outstanding influence and impact that Doris has achieved in nursing, health and health care in Ontario, Canada and abroad.

As I hand over the responsibilities of president to Rhonda Seidman-Carlson, I feel fulfilled and invigorated, knowing that you are in full control, and well-served by a strong board and a team of expert staff led by our CEO. **RN**

DAVID MCNEIL, RN, BScN, MHA, CHE, IS PRESIDENT OF RNAO.