

Nurses endorse open consultation about **RNAO/CNA relationship**



On April 28, at RNAO's annual general meeting (AGM), I met many of you, heard your ideas for improving nursing and health care, and witnessed your commitment to our professional association. I was so proud to see the ownership and passion you have for RNAO. The dynamic and open debate over resolution #1 – a request by RNAO's Board of Directors (BOD) to engage RNAO members in an open and transparent consultation about our relationship with the Canadian Nurses Association (CNA) – was a passionate display of that commitment.

With strength of conviction, and amid healthy debate, your voting delegates passed resolution #1, which ensures RNAO's consultations with CNA will proceed with the endorsement of members – a powerful mandate that we hope will help deliver win-win outcomes. RNAO's BOD and executive will immediately initiate these discussions, and we will communicate the progress to members on a regular basis. Over the next few months, we will conduct in-depth surveys, host focus groups with chapters, regions without chapters, interest groups and other stakeholders, and provide the opportunity for updates and online consultation in the members-only section of the RNAO website.

We will also actively engage with CNA, as we have for the past four years, to discuss RNAO's concerns and to respond to concrete proposals. As a first step, I formally submitted a motion to be considered at the next CNA board meeting in June. The motion urges CNA to strengthen its strategic priorities in three areas. I've asked that CNA's strategic priority on *New Models of Health Service Delivery* be amended to specify that any new models of delivery be "within a quality, publicly funded, publicly administered and not-for-profit health system." In addition, I have asked that two new strategic

directions be adopted by CNA; one on social determinants of health, and the second on Medicare. You can view my motion in the members-only section of our website, where we will post responses and updates on this matter.

As you may know, RNAO's primary concern regarding CNA is its congruency with RNAO's mission. There has been a gradual shift within CNA from a professional, policy and advocacy focus to a more regulatory focus, intensified by the fact that several jurisdictions have moved to a strictly regulatory function. Regulatory bodies do not focus on social determinants of health,

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health-care restructuring, or Medicare issues. An adoption by CNA of new strategic priorities, and a commitment to the resources necessary to make them a reality, will be a powerful signal to RNAO members that CNA is making changes that will help address RNAO's concerns.

I also intend to address my discomfort, as your president, with the frequent use of in-camera sessions at CNA, where deliberations on important matters remain confidential. Open discussions that include advisors – our executive directors – are imperative if we are to make the best decisions for our membership.

Throughout our consultation we will be guided by your comments at the AGM. We understand that you value membership in CNA. You spoke of the importance of having a voice at the national level, networking

opportunities, discounts to write certification exams, and more. We will also remember that you told us the existing RNAO-CNA relationship is not an option. You told us that you want us to achieve a proactive national voice speaking out independently on health and nursing policy. You asked us to address the gaps in CNA's advocacy role to ensure clear messages on crucial matters such as Medicare. You also want CNA to take full advantage of its position as a national voice, leading the grassroots mobilization of Canadian nurses and addressing important issues such as global public health.

I want to say a word to those who were disappointed that resolution #1 passed. It is important to note that none of the nurses who opposed the resolution said RNAO's concerns were invalid. In fact, most said that such concerns are real and have existed for decades. As your president, I want to assure you that all voices are respected. I also want to assure you that resolution #1 is not the first step toward RNAO's separation from CNA. This interpretation is unfounded and could serve as a distraction to RNAO and CNA from dealing with the serious issues that RNAO has raised, and that must be resolved.

I look forward to your ongoing feedback. Please continue to inform yourselves, participate in the dialogue, and provide RNAO's BOD with your thoughts about our relationship with CNA and how it can be improved. Members are the owners of RNAO and shape the association's past, present and future.

As I said in my AGM remarks, RNAO will continue to lead in its advocacy against nursing shortages, casualization of the nursing workforce, expanding for-profit care, and threats to patient care. We will also continue our work to address growing poverty and homelessness, and a deteriorating environment. We will speak out with a bold and clear voice for health and for nursing.

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PRESIDENT OF RNAO.