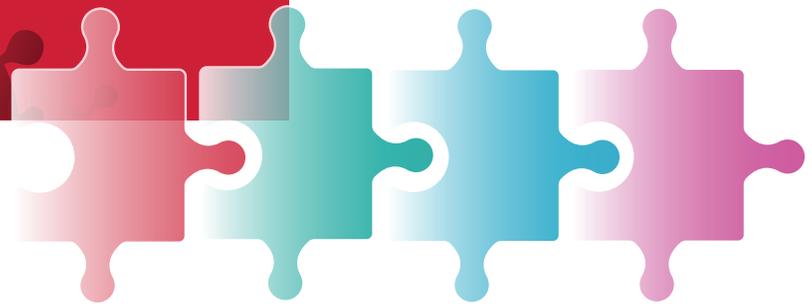


PROTECTING ONTARIANS



NURSES
AND RNAO
DURING
COVID-19

LEADING CHANGE



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RNAO'S MISSION

We are the professional body representing registered nurses, nurse practitioners and nursing students in Ontario. We advocate for healthy public policy, promote excellence in nursing practice, and power nurses to actively influence and shape decisions that affect the profession and the public they serve.

RNAO'S VALUES

We believe health is a resource for everyday living and that health care is a universal human right. We respect human dignity and are committed to diversity, inclusivity, equity, social justice and democracy. We believe the leadership of every nurse advances individual and collective health.



RNAO'S ENDS

RNAO's board of directors (BOD) uses a policy governance leadership known as the Carver model that enables an integrated system of governance. Named after its creator, John Carver, it is commonly used by non-profit associations and organizations.

The Carver model distinguishes between ENDS and Means. While the BOD is accountable for both, they are laser-focused on the ENDS. These are about the organization's impact on the world that justifies its existence. Success in the Carver governance model is based on achieving these ENDS.

For RNAO, the ENDS are a roadmap. They set out expectations about the impact we want to have and for whom we work – our members, the nursing profession and Ontarians. The Means are the processes and decisions necessary to achieve the ENDS. Our CEO, a non-voting member of the board, is chiefly responsible for the Means (such as personnel matters, financial planning, purchases, programs, services and deliverables). She leads RNAO's operations bounded by policies developed by the BOD, which are monitored at each meeting.

RNAO has four ENDS that the CEO reports on three times each year (see page 2). Everything that we do relates to our ENDS. They provide an organized, comprehensive framework for reporting back to the BOD and by extension to our members. The ENDS also chart the impact we are working towards for the short, medium and long term.

In this annual report, we highlight exemplars of RNAO's achievements in each of the four ENDS. Our profound outcomes and collective work on behalf of RNs, NPs, nursing students and Ontarians should be a source of pride to each and every member as YOU were a part of them.

MESSAGE FROM RNAO'S PRESIDENT AND CHIEF EXECUTIVE OFFICER

Dear colleague,

The theme of our Annual General Meeting (AGM) is ***Protecting Ontarians and Leading Change: Nurses and RNAO during COVID-19.***



MORGAN HOFFARTH
RN, MScN,
RNAO President



Dr. DORIS GRINSPUN
RN, MSN, PhD,
LLD(hon), Dr(hc),
FAAN, FCAN, O.ONT.,
RNAO CEO

It speaks about our members' unwavering commitment, perseverance and courage confronting a vicious virus. It reflects nurses' life-preserving work on the front lines, as well as their influence on decisions in the corridors of power. It outlines our successes, our ongoing struggles, and the toll COVID-19 has taken on us all. Never before has RNAO and its members been so important and so influential.

This year has tested the resilience of nurses, our profession, the health system, as well as Ontarians individually and collectively. Throughout this annual report, we highlight positive outcomes and we reveal where more work remains to be done.

We endured three pandemic waves and remain on guard to avert a fourth. During difficult times, RNAO's resonating voice advocated for the health of Ontarians and nurses. Many of us are exhausted. Some haven't had a break for weeks or months. Through that exhaustion and stress, however, our collective association work has helped shine a light at the end of this pandemic tunnel.

This annual report is organized around RNAO's ENDS. The ENDS are a governance tool used by our board of directors (BOD) to set direction and monitor our progress in four key areas of work.

The first END is **ENGAGING WITH REGISTERED NURSES, NURSE PRACTITIONERS AND NURSING STUDENTS**. It is about our members – RNs, NPs, nursing students, chapters, regions without chapters, interest groups, the assembly of leaders and the board of directors. It is about our collective impact as RNAO members leverage their voice and power. In this report, we showcase:

- Members driving change through ongoing engagement with politicians from all parties. Our high-profile and impactful annual events include: Take Your MPP To Work, Queen's Park on the Road, and Queen's Park Day. Driving change is also about our daily work with government and opposition parties.
- Webinars: Thousands have participated in RNAO's powering pandemic webinars. We are responding to the needs of nurses, other health providers and the public. Through our webinars, we are providing information and support, bringing people together and tackling the challenging issues. These weekly webinar series do this and much more: Health System Transformation; COVID-19; Let's Talk About Anti-Black Racism and Discrimination in Nursing; NPs in Long-Term Care Council; Continuing the Conversation: An Open Forum for Nurses; and Indigenous-focused topics related to health care.

The second END is **RNAO ADVANCES THE ROLE OF NURSES**. It emphasizes that nurses are members of a vital, knowledge-driven and caring profession and significant contributors to health. We highlight:

- The groundbreaking NP Task Force report: *Vision for Tomorrow*, and its recommendations to increase the number of NPs and expand scope.

- Exhilarating RNAO work provincially, nationally and internationally on best practice guidelines (BPG), our Best Practice Spotlight Organizations (BPSO) Ontario Health Teams (OHT), and new editions of *A Proactive Approach to Bladder and Bowel Management in Adults* (4th) and *Assessment and Device Selection for Vascular Access* (2nd) BPGs.
- A Leading Change Toolkit to optimize uptake and sustainability of BPGs and ensure lasting change. It uses two frameworks – Social Movement Action and Knowledge-to-Action. We're proud of the partnership with Healthcare Excellence Canada and the panel of international experts whose work with RNAO staff has created a one-of-a-kind resource.
- A video series that showcases our BPG program.

The third END is **RNAO SPEAKS OUT ON EMERGING ISSUES**. We have built a reputation for speaking out on behalf of nurses, the profession and the health and wellbeing of Ontarians. We leverage our collective voices to speak when others do not dare. Such is the case with:

- Repeatedly calling out the failings of the government to protect residents in long-term care (LTC). Ontario's LTC COVID-19 Commission report adopted many of our recommendations, including those related to staffing and skill mix.
- #4Hours4Seniors social media campaign – an example of RNAO's efforts to highlight the devastating tragedy that claimed the lives of 3,782 residents, and left families and staff reeling.
- Our widely cited survey on the impact of the pandemic on the health and wellbeing of nurses. Results show a dire situation. We raised the alarm bell and provided recommendations for employers and government. Ontario must act now to sustain the nursing workforce through the pandemic and beyond.

The fourth and final END is **RNAO INFLUENCES HEALTHY PUBLIC POLICY**. This is essential to have a positive impact on social determinants of health, as well as to strengthen our publicly funded, not-for-profit health system. Highlights are:

- The stellar work of RNAO's Black Nurses Task Force.
- Our meaningful partnerships with Indigenous communities on policy matters and clinical work, such as Indigenous Best Practice Spotlight Organizations.
- The release of RNAO's new BPG *Promoting 2SLGBTQI+ Health Equity*, aiming for access, inclusivity and safety for people when they seek health and health care.
- A revitalized and re-envisioned website (RNAO.ca) with a splendid policy section showcasing our work and political action.
- RNAO's extraordinary influence is evident in 6,728 media hits, of which 4,983 (74 per cent) are focused on the pandemic. Our intense traditional and social media presence has made RNAO and many of our members household names. We use the media attention to speak truth-to-power, advance health for all, protect Ontarians, advance the role of RNs and NPs, and lead change.

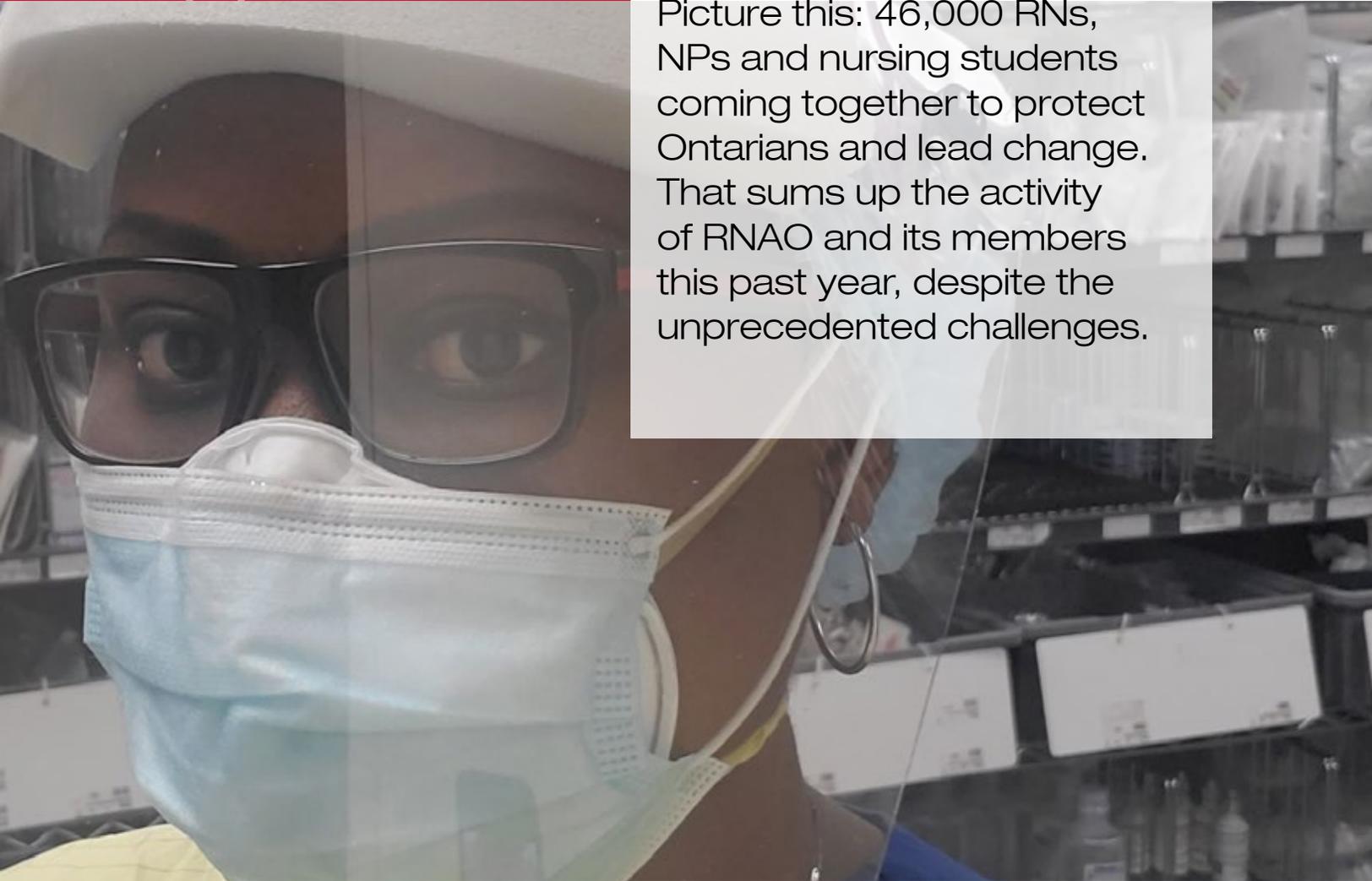
Colleagues, as we mark our 96th annual general meeting, take pride in our collective achievements and the part you played in such success.

On behalf of RNAO's BOD, assembly of leaders and staff, we thank you – **RNAO MEMBERS** – for your unwavering commitment to protect Ontarians. We thank you – **RNAO MEMBERS** – for speaking out for nursing and speaking out for health. We thank you for being the backbone of RNAO and leading change while doing all you could to protect Ontarians during an arduous year.

END 1

ENGAGE WITH REGISTERED NURSES, NURSE PRACTITIONERS AND NURSING STUDENTS TO STIMULATE MEMBERSHIP AND PROMOTE THE VALUE OF BELONGING TO THEIR PROFESSIONAL ORGANIZATION

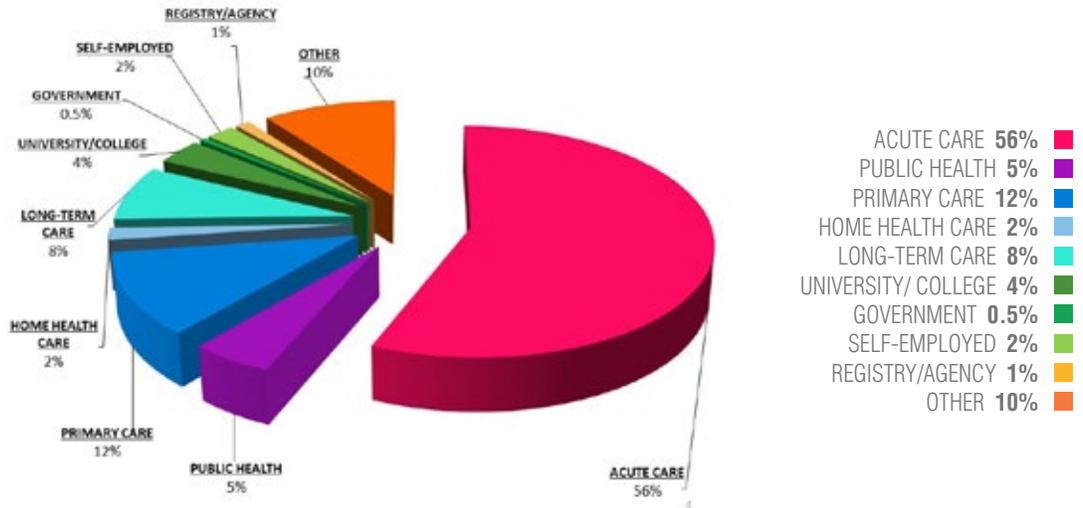
Picture this: 46,000 RNs, NPs and nursing students coming together to protect Ontarians and lead change. That sums up the activity of RNAO and its members this past year, despite the unprecedented challenges.



RN and proud RNAO member Birgit Umaigba wears personal protective equipment while working on the front lines of Ontario ICUs in the fight against COVID-19.

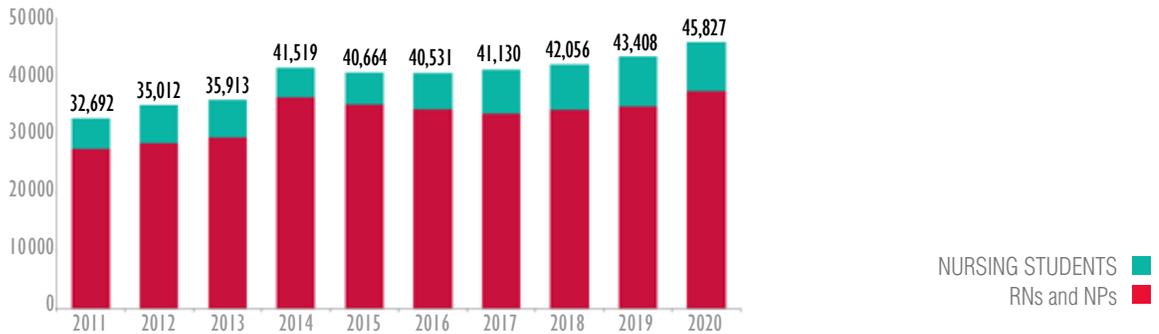
RNAO MEMBERSHIP BY SECTOR

2020



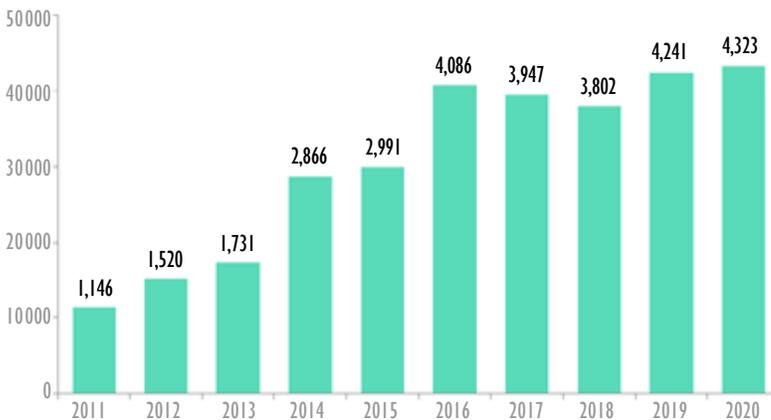
RNAO MEMBERSHIP BY CATEGORY

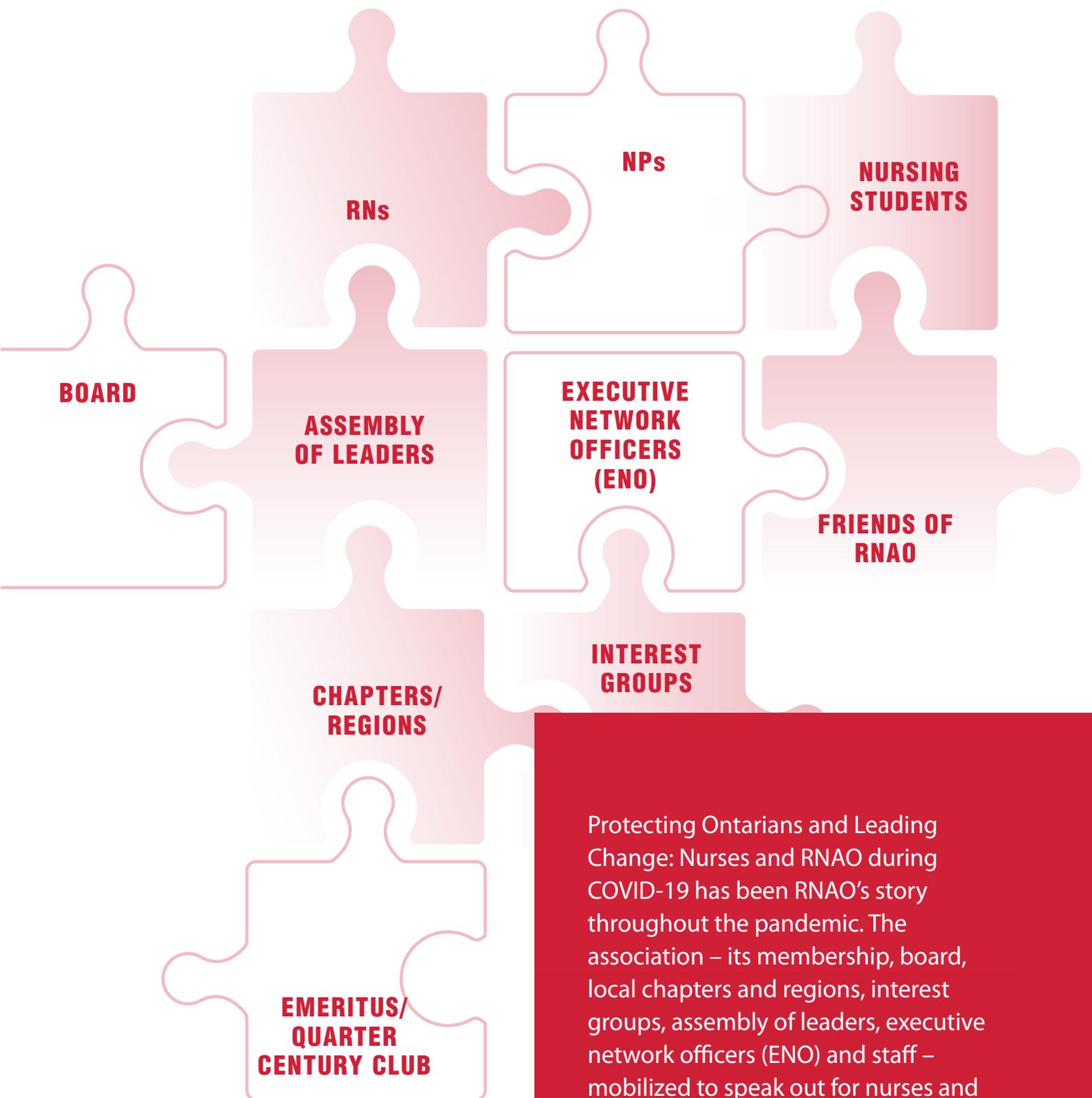
2011-2020



RNAO MEMBERSHIP NEW GRADS

2011-2020





Protecting Ontarians and Leading Change: Nurses and RNAO during COVID-19 has been RNAO's story throughout the pandemic. The association – its membership, board, local chapters and regions, interest groups, assembly of leaders, executive network officers (ENO) and staff – mobilized to speak out for nurses and speak out for health.

QPD

MEMBERS TAKING PART IN QPOR, QPD AND TYMTW

QPOR

48 politicians/75 members

QPD

6 politicians/387 members

TYMTW

11 politicians/110 members

TOTAL

65 politicians/572 members

RNAO membership amplifies your voice as an RN, NP and/or nursing student. The association and its members are a mighty force for change. Our reputation for influencing healthy public policy was on full display this past year.

Our advocacy was as strong as ever, drawing 572 members and 65 politicians to meet virtually for Queen's Park on the Road (QPOR), Queen's Park Day (QPD) and Take Your MPP/MP To Work (TYMTW).

Members raised key issues to protect Ontarians and lead change, such as: urgent needs in long-term care (LTC); investments for home care; ensuring health-system transformation rooted in primary care; addressing the opioid overdose crisis; more RNs and NPs in all sectors, expanding scope of practice; better nurse retention strategies; and expanding baccalaureate and NP nursing programs.



Premier Doug Ford provides closing remarks at QPD, commending RNAO for its ongoing work to protect nurses, other health providers and all Ontarians during the pandemic. Ford also acknowledges the recommendation to increase the number of NPs in all health sectors in RNAO's NP Task Force's *Vision for Tomorrow* report. "We've put a commitment together to hire 10,800 registered nurses, close to 5,000 registered practical nurses, and then with the nurse practitioners, by all means... let's get a number on the table because we need you, we really do," says Ford.



Deputy Premier and Health Minister Christine Elliott answers questions from QPD attendees about the government's response to COVID-19 following her promise to continue to work collaboratively with RNAO to advance OHTs. "Our government remains committed to working with you to create an integrated, patient-centred health-care system," says Elliott.



During her address at QPD, Official Opposition Leader and NDP Leader Andrea Horwath highlights the important work of nurses across Ontario during a difficult and unprecedented time, and says: "This pandemic has shown how important the voices of experts like the RNAO are."



Steven Del Duca, Leader of the Ontario Liberal Party, discusses the importance of RNAO's ongoing advocacy work at QPD. "Today, the issues and the stakes are way too high to engage in excessive partisanship, so I've heard that message loud and clearly," says Del Duca.



Green Party Leader Mike Schreiner shares his gratitude for nurses at QPD and acknowledges the need for increased government support of the profession. "We're indebted to your service but also your advocacy. If we're going to call you heroes, you need to be treated like heroes," says Schreiner.

QPOR

MEMBERS TAKING PART IN QPOR, QPD AND TYMTW

QPOR

48 politicians/75 members

QPD

6 politicians/387 members

TYMTW

11 politicians/110 members

TOTAL

65 politicians/572 members

NDP MPPs France G linas (Nickel Belt) (top row, centre) and Jamie West (Sudbury) (middle row, right) meet virtually with members of RNAO's Sudbury and District Chapter and RNAO CEO Dr. Doris Grinspun (bottom row, left) for QPOR on Dec. 14, 2020. The discussion focused on the government action needed to protect Ontario's long-term care residents and to end the ongoing opioid overdose crisis.



TYMTW

MEMBERS TAKING PART IN QPOR, QPD AND TYMTW

QPOR

48 politicians/75 members

QPD

6 politicians/387 members

TYMTW

11 politicians/110 members

TOTAL

65 politicians/572 members

Deputy Premier and Health Minister Christine Elliott (second column from left, second up from bottom) and PC MPP for Mississauga Centre Natalia Kusendova (bottom right) meet virtually with members of Southlake Community BPSO OHT, RNAO CEO Dr. Doris Grinspun (bottom row, second from left), RNAO President Morgan Hoffarth (bottom left) and RNAO staff members on May 14, 2021. During the event, members of the BPSO OHT shared stories of the care they're championing in partnership with RNAO.





RNAO @RNAO · May 12, 2021

Take Your MPP To Work visit happening now: NPs @aric_np, @sweeney_np & @i_hoodo & RNAO CEO @DorisGrinspun & Immediate Past President @angelacooperbra meet virtually with MPP @StevenDelDuca, MPP @JohnFraserOS & RN @tylerwatt90, @OntLiberal Candidate for Nepean.

#TYMTW #onpoli @DorisGrinspun & Immediate Past President @angelacooperbra meet virtually with MPP @StevenDelDuca, MPP @JohnFraserOS & RN @tylerwatt90, @OntLiberal Candidate for Nepean.
#TYMTW #onpoli



Liberal Party Leader Steven Del Duca (first row, right), Liberal MPP for Ottawa South John Fraser (second row, second from left) and Liberal candidate for Nepean Tyler Watt (third row, second from right) meet virtually with NPs, RNAO CEO Dr. Doris Grinspun (third row, left) and members of RNAO's policy department for TYMTW on May 12, 2021.

FALL TOUR

Not even a pandemic could stop RNAO's 2020 Fall Tour from happening. President Morgan Hoffarth and CEO Dr. Doris Grinspun went full-speed-ahead with the sixth annual tour in November. They met virtually with members in 12 communities to discuss provincial and national advocacy, including Durham Region, Kawartha Lakes, Kingston, Wellington, Algoma and Waterloo. They focused on top nursing and health system issues, including the opioid epidemic and next steps for RNAO's [Nursing Home Basic Care Guarantee](#).

NURSING HOME BASIC CARE GUARANTEE

Each LTC resident in Ontario to receive four worked hours of direct nursing and personal care provided by

20% RNs
25% RPNs and
55% PSWs

The Nursing Home Basic Care Guarantee calls for each LTC resident in Ontario to receive four worked hours of direct nursing and personal care (provided by 20 per cent RNs, 25 per cent RPNs, and 55 per cent PSWs). It also allocates one NP for every 120 residents, as well as a dedicated infection prevention and control RN for each home.

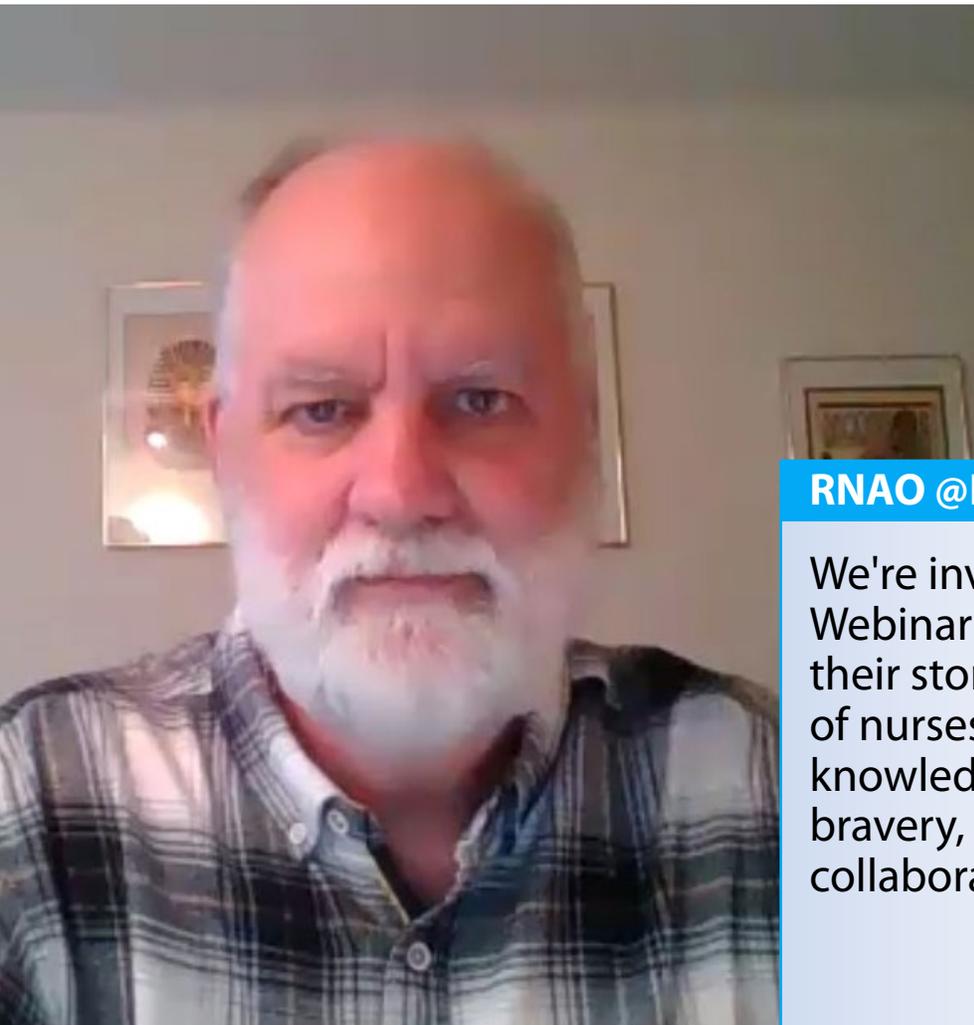
RNAO President Morgan Hoffarth (top right) meets virtually with members of RNAO's Waterloo Chapter during a Fall Tour event on Nov. 17, 2020 to answer questions and discuss issues most important to their community.





RNAO commits to keeping members and others informed. Our popular [COVID-19 Webinar Series](#) covered timely topics for members, other health workers, members of the media and Ontarians at large. A sample includes: epidemiological updates; nurses' mental health; collective action in LTC; vaccine roll-out; vaccine hesitancy; public health measures; and other topical updates. We featured national experts, front line nurses, researchers and family members. Two panel discussions were moderated by André Picard, health columnist for *The Globe and Mail*.

The webinars spurred the development of larger initiatives at RNAO, including the [Black Nurses Task Force](#), and the heart-to-heart [open forum sessions for nurses](#) to share how they are coping during COVID-19.



André Picard, health columnist for *The Globe and Mail*, moderates RNAO's COVID-19 Webinar Series on Nov. 9 and Dec. 14, 2020, which focused on mobilizing collective action for long-term care reform in Canada.



RNAO @RNAO · May 10, 2021

We're inviting our **#COVID19** Webinar participants to share their stories and examples of nurses' leadership, knowledge, compassion, bravery, dedication, collaboration & creativity.

ELECTION OF PRESIDENT-ELECT

RNAO upholds its commitment to members in various forms. One is through strong leadership and succession planning at the board level. Therefore, the work of the leadership succession committee, formed this past year, is foundational. The committee was created following the approval (in 2019) of new, robust president-elect criteria. The committee includes the current president, immediate past president, preceding past president, a member of the provincial nominations committee, a member of the assembly of leaders, and RNAO's CEO.

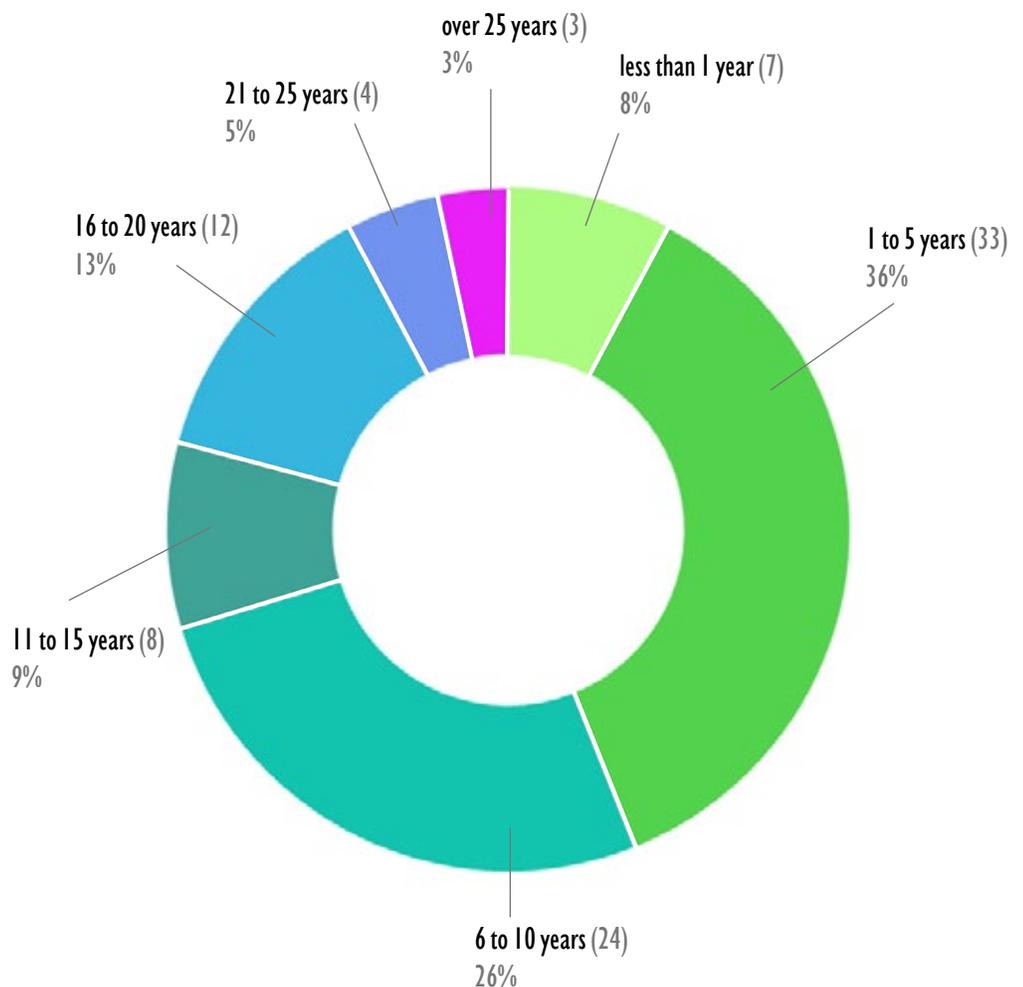
The committee facilitates the nomination process, from preparing the application, to interviewing candidates, providing feedback and preparing for candidate webinars. It ensures RNAO's incoming president-elect possesses a deep understanding of the association, its strategic goals, as well as financial and legal obligations. This year, the committee recommended to the board two outstanding candidates. Members had the opportunity to vote through *One member, one vote* in June. The successful candidate will be announced at the 96th Annual General Meeting.

RNAO is proud to have such dedicated individuals paving the path forward for the association, its members and those who benefit from our association's strong advocacy.

ASSOCIATION STAFF MEMBERS

RNAO, led by our world-renowned CEO and an expert team of six departmental directors – alongside a talented staff of over 90 professionals – takes enormous pride in shaping healthy public policy, clinical practice, and advancing services for members of the association. Staff members – RNs, NPs as well as professionals in fields such as communications, information technology, marketing and finance – work collaboratively on a myriad of initiatives. Our team continues to grow as programs and projects expand and diversify. New staff bring their professional and technical expertise along with their drive for equity, humanity and the principles that RNAO and its members value. This is why we succeed in attracting the very best.

We see their passion, even at the interview stage. And they stay with us. More than 30 per cent of RNAO employees have been with the association for 10 years or more. Our Long-Service Awards ceremony, which takes place annually, honours their contributions.



RNAO BLACK COLLEAGUES TASK FORCE

Members of RNAO's Home Office Black Colleagues Task Force meet virtually once a month. Clockwise from top left: Rita Wilson, Susan McRae, Valerie Sergnese, Ifrah Ali, Peta-Gay Batten, Dolare Seran. Not pictured: Kenya Dames.



In June of 2020, Dr. Doris Grinspun, RNAO's CEO launched the Black Colleagues Task Force (separate from the Black Nurses Task Force) to ensure strong support for RNAO employees who identify as Black. Its mandate is to draw from the experiences of Black colleagues and address anti-Black racism and discrimination within the workplace. Co-chaired by Peta-Gay Batten, executive assistant to Dr. Grinspun, and human resources manager Dolare Seran, the task force is comprised of staff who identify as Black. The purpose is to ensure an environment that is free from racism, prejudice, discrimination and harassment. They meet monthly to examine past incidents of racism and discuss how they were addressed. They identify areas for intervention and seek permanent results by providing recommendations for RNAO's internal human resources and operational policies and practices. The task force also hopes to educate staff about racism and micro-aggressions and strengthen best practices for safe spaces to work without fear of discrimination.

PLP

When it comes to protecting members' interests, RNAO leads the way. Being "ahead of the curve" – a catchphrase during the first wave of COVID-19 – is a fitting description for our efforts. While malpractice insurers were busy protecting their bottom line by triggering COVID-19 and communicable disease exclusions, RNAO worked with its professional liability protection (PLP) insurance broker, The Magnes Group Inc., to obtain the best protection available for RNAO's RNs and NPs.

Ahead of the curve, RNAO was able to secure PLP coverage without COVID-19 or communicable disease exclusions while many health facilities faced these exclusions on their insurance policies at renewal time. Including the best PLP with RNAO membership means peace of mind for members and their families. We pride ourselves on having our members' backs.

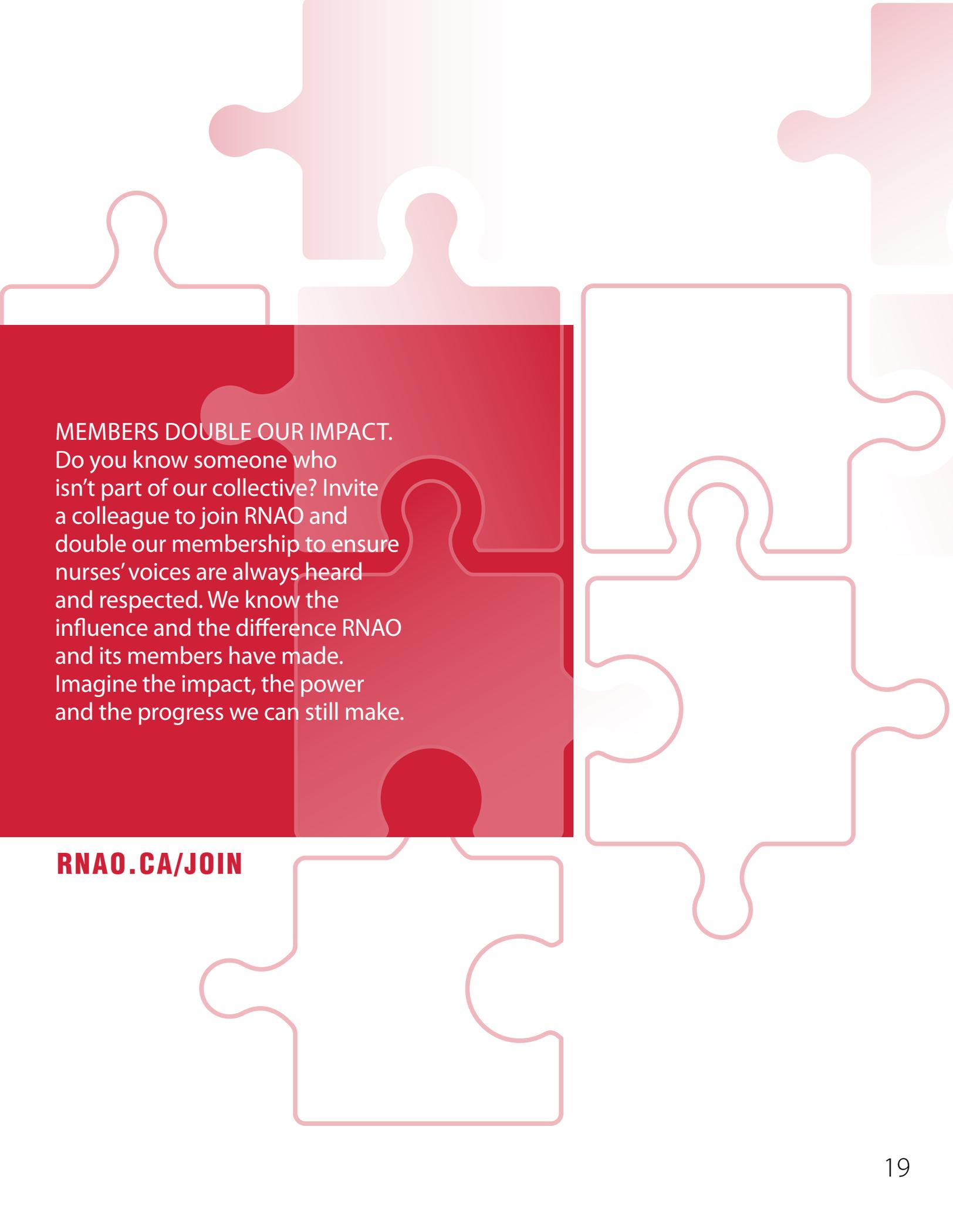
RNCAREERS.CA

There's no better place to explore the many opportunities within the nursing profession than [RNCareers.ca](https://www.rncareers.ca) – RNAO's official career site. Since its launch in 2005, it's been a trusted and reliable source for RNs, NPs, RPNs and nursing students considering their next career move. It's also a favourite among employers.

During the past year, RNCareers.ca was upgraded for jobseekers looking to update their profile to match employers' COVID-19-related needs.

With more than 11,000 resumes and 22,000+ registered jobseekers on the site, RNCareers is the virtual space where employers can connect with knowledgeable and experienced RNs, NPs and RPNs, as well as other health providers.

[Create or update your account today.](#)



MEMBERS DOUBLE OUR IMPACT.
Do you know someone who isn't part of our collective? Invite a colleague to join RNAO and double our membership to ensure nurses' voices are always heard and respected. We know the influence and the difference RNAO and its members have made. Imagine the impact, the power and the progress we can still make.

[RNAO.CA/JOIN](https://rnao.ca/join)

END 2

RNAO ADVANCES THE ROLE OF NURSES AS MEMBERS OF A VITAL, KNOWLEDGE-DRIVEN, CARING PROFESSION, AND AS SIGNIFICANT CONTRIBUTORS TO HEALTH

RNAO takes enormous pride in our commitment to produce evidence-based recommendations.

iaBPG

INTERNATIONAL
AFFAIRS & BEST PRACTICE
GUIDELINES
TRANSFORMING
NURSING THROUGH
KNOWLEDGE

Best Practice Guideline

JUNE 2021

Vascular Access

Second Edition



RNAO Registered Nurses' Association of Ontario
L'Association des infirmières et infirmiers
autorisés de l'Ontario

iaBPG

INTERNATIONAL
AFFAIRS & BEST PRACTICE
GUIDELINES
TRANSFORMING
NURSING THROUGH
KNOWLEDGE

Best Practice Guideline

JUNE 2021

Promoting 2SLGBTQI+ Health Equity



RNAO Registered Nurses' Association of Ontario
L'Association des infirmières et infirmiers
autorisés de l'Ontario



NURSE PRACTITIONER TASK FORCE VISION FOR TOMORROW



RNAO @RNAO · March 1, 2021

RNAO's NP Task Force's [#VisionForTomorrow](#) report launched at [#QPD](#).

The report outlines eight key recommendations to enhance and expand the role of NPs to improve timely access to quality care.

Vision for Tomorrow, the report of RNAO's NP Task Force, was unveiled during Queen's Park Day on Feb. 25, 2021.

A hallmark of RNAO's work is its insistence on being evidence-based. In health human resources policy, it is an RNAO priority that Ontario recognize and better utilize the expertise of nurse practitioners (NP). The association's NP Task Force released its groundbreaking [Vision for Tomorrow](#) report on Feb. 25, during Queen's Park Day. The report provides evidence that NPs are crucial to people's health and outlines a future where NPs strengthen all sectors of the health system. The NP Task Force directly contributes to Ontario's health-system transformation agenda that seeks the integration of health sectors through the formation of Ontario Health Teams (OHT). The report calls for the government's immediate review of the NP role and its capacities.

Vision for Tomorrow outlines eight recommendations: increase supply; optimize utilization; expand scope; align NP curriculum with expanding scope and current and emerging health issues; harmonize compensation; invest in research; broaden insurance coverage; and launch a public education campaign on the NP role.

The NP role is essential to meet health human resource demands now and post-pandemic. NPs must play a central role in long-term care, home and community care. They help transform Ontario's system to one anchored in primary care and expanded community care. They help address the social and environmental determinants of health. The work of the NP Task Force will continue in an advisory role until all recommendations are realized.

NP INSTITUTE

RNAO's NP Institute took place virtually on April 21, 2021. In attendance: more than 250 NPs and health leaders, including members of RNAO's Nurse Practitioner Interest Group (NPIG), President and Chief Executive Officer of Ontario Health Matthew Anderson (below, right) and Associate Chief Justice Frank N. Marrocco (below, left). Participants spent the day discussing how NPs are shaping the health system of the future, as well as next steps toward full implementation of the recommendations in RNAO's NP Task Force report, *Vision for Tomorrow*. The event co-chairs, RNAO's CEO Dr. Doris Grinspun and NPIG Chair NP Sally Baerg (top row, left and second from left, respectively), as well as NP Task Force co-chair Dr. Elissa Ladd (second row, centre) were leading the discussions.



RNAO @RNAO · Apr 21, 2021

Thank you to the 250+ participants who joined our virtual **#NPInstitute** today!

There's a lot of work to do to shape the health system of the future, so we look forward to continuing to work & collaborate with each & every one of you until our **#VisionForTomorrow** is fully realized.

ROUND-UP OF BPGs

For more than two decades, RNAO has developed world-renowned, evidence-based best practice guidelines (BPG), advancing the knowledge and science of nursing. BPGs serve to protect Ontarians and demonstrate how we lead change. Our latest additions are the fourth edition of *A Proactive Approach to Bladder and Bowel Management in Adults* (co-chaired by Dr. Kathleen Hunter, University of Alberta, and Dr. Jennifer Skelly, McMaster University) and the second edition of *Assessment and Device Selection for Vascular Access* (co-chaired by Dr. Nancy Moureau of PICC Excellence and RN Darlene Murray, The Hospital for Sick Children). Informed by rigorous methodology and drawing from diverse expert panels, both guidelines provide evidence of the impact clinical interventions have on person, organizational and system outcomes. These are contributions nurses bring, in partnership with other health providers, to people's health.

RNAO has published 49 clinical and healthy work environment BPGs, in use globally. Focused on person-centred care and quality care, they have changed how clinicians and teams use evidence to inform practice.

RNAO BPGs follow the highest international standards, referred to as GRADE (Grading of Recommendations Assessment, Development and Evaluation) and GRADE CERQual (Confidence in the Evidence from Reviews of Qualitative Research).

Together with RNAO members, BPG champions and the association's network of more than 1,000 Best Practice Spotlight Organizations (BPSO) on five continents, BPGs transform practice. This work benefits patients, health and educational organizations, and health systems locally and internationally.



RNAO @RNAO · Jan 5, 2021

Introducing our latest **#BPG**: *A Proactive Approach to Bladder and Bowel Management in Adults*!

This guideline's evidence-based recommendations will improve quality of care and lead to positive health outcomes.

Download it for free: <http://RNAO.ca/bpg/guidelinesidelines/proactive-approach-bladder-and-bowel-management-adults>

The graphic features a teal background with a world map. On the left, there is a smaller image of the guideline cover, which includes the text: 'ia BPG', 'A Proactive Approach to Bladder and Bowel Management in Adults', 'Fourth Edition', and the RNAO logo. To the right of the cover, the text reads 'Best Practice Guideline' and 'New Edition' in large, bold, white font.



For integrated systems of care



The first cohort of BPSO OHTs held a meet-and-greet on Sept. 10, 2020 to share strategies, achievements and success stories about ongoing BPG implementation at the height of a global pandemic. Health providers from North Western Toronto, East Toronto Health Partners, Southlake Community and Ottawa East Health participated with in-depth presentations. Heather McConnell, director for RNAO's IABPG Centre (top right) is pictured. Not pictured are Susan McNeill, RNAO's Associate Director of Guideline Implementation and Knowledge Transfer and Dr. Doris Grinspun, RNAO CEO, who helped facilitate the discussion.

The pandemic didn't slow down our work with OHTs. To the contrary, BPSO OHTs realized they needed to use a [Person- and Family-Centred Care \(PFCC\)](#) approach to work as an integrated team in their pandemic response. Organizations joined across sectors to pool resources and collaborate, tackling challenges such as virtual care, mental health crises and food insecurity – all using principles of PFCC.

In September 2020, BPSO OHTs profiled successes and lessons-learned at RNAO's meet-and-greet event. The virtual knowledge exchange included champions and leads from all four BPSO OHTs in cohort one. Each shared its unique approach to integrated care, inspiring other teams. They discussed collaborative quality improvement, patient and family engagement, developing a common vision, and more.

The BPG program launched the Advanced Clinical Practice Fellowship (ACPF) specifically for BPSO OHTs. It supports interdisciplinary teams to follow persons through their care trajectory and evaluate their person- and family-centred experience. It will inform quality improvement and transitions in care.

Inspired by cohort one, RNAO issued a call and selected its second cohort of BPSO OHTs with three organizations: Nipissing Wellness OHT, Chatham-Kent OHT and Sarnia-Lambton OHT. RNAO's coaching team and the new BPSO OHTs are preparing for the official launch and virtual champions training.

AGREEMENT WITH CHILEAN GOVERNMENT

RNAO's BPG and BPSO connections are on almost every continent. Our footprint in South America deepened when the Ministry of Health of Chile (MINSAL) and RNAO announced 15 additional public hospitals joined that country's BPSO journey. A four-day online training session prepared 350 champions to work with MINSAL, a BPSO Host since 2017. Guided by Dr. Grinspun, RNAO CEO and founder of the BPG program, MINSAL began its BPSO journey with seven hospitals (now 22) and aims to expand the program across all public hospitals, followed by primary care.



Participants from health organizations across Chile demonstrate their passion for best practices during a March 2021 training session. As many as 350 champions received training from RNAO's CEO Dr. Doris Grinspun (top row, second from left).

Chile's Minister of Health Dr. Enrique Paris Mancilla attended the BPSO session to bring greetings and talk about his government's support for the BPSO program.



BPG VIDEO PROJECT

How do you bring pizzazz to a program that already has global reach? RNAO has created a series of videos on the BPG program to raise awareness and excitement. They profile a gold-standard that connects organizations using evidence to improve health outcomes – with 49 BPGs, more than 1,000 BPSOs, and an evaluation data system with international ties. Two of the videos are being launched at RNAO's AGM. The Leading Change Toolkit [video](#) and another one featuring [BPSOs](#), including those graduating at our June AGM. These will inspire participants at the AGM and will remain available for members to inspire others.

LEADING CHANGE TOOLKIT



Our Leading Change Toolkit™ is in its final development stage and will be launched in October. It will power change agents to support evidence uptake and sustainability to improve outcomes. More than 100,000 champions working in BPSOs at home and abroad are eagerly awaiting its release.

Two complementary frameworks are used in the toolkit to accelerate long-lasting change: the

Knowledge-to-Action Framework (KTA) and RNAO's own Social Movement Action Framework (SMA). The latter reflects a people-led, bottom-up approach to change. The SMA framework is based on a robust concept analysis and reflects RNAO's experience with social movement actions that transform nursing and health care. The KTA provides a structured approach for making change. The toolkit includes

updated evidence, practical resources, evidence-based tools, downloadable worksheets and a section on how to effectively engage persons and families in change initiatives.

The toolkit will be available for use online free as a "living resource." It will enable additional content and success stories to be added based on end user experiences.

RNAO is grateful to our co-sponsor, Healthcare Excellence Canada, and our international expert panel co-chaired by Dr. Janet Squires, University of Ottawa, and RNAO's CEO Dr. Doris Grinspun, for their contributions and commitment to this revolutionary resource.





ONTARIO
AWARDS

Nurses, the nucleus of our health system, were both celebrated and tested this past pandemic year. Such was the significance of the second-annual Nursing Now Ontario Awards ceremony, held on May 12, Florence Nightingale's birthday, during Nursing Week. RNAO, together with the Ontario Nurses' Association (ONA) and the Registered Practical Nurses Association of Ontario (WeRPN), honoured one NP, one RN and one RPN for championing leadership and improving health



outcomes for patients. The [awardees](#) are NP Aric Rankin (bottom), who works at De dwa da dehs nye > Aboriginal Health Centre in Hamilton, Mahoganie Hines (top right), a pain and symptom management RN with the Region of Niagara, and Sheri Bruder (top left), an RPN who works at Brantford General Hospital.

END 3

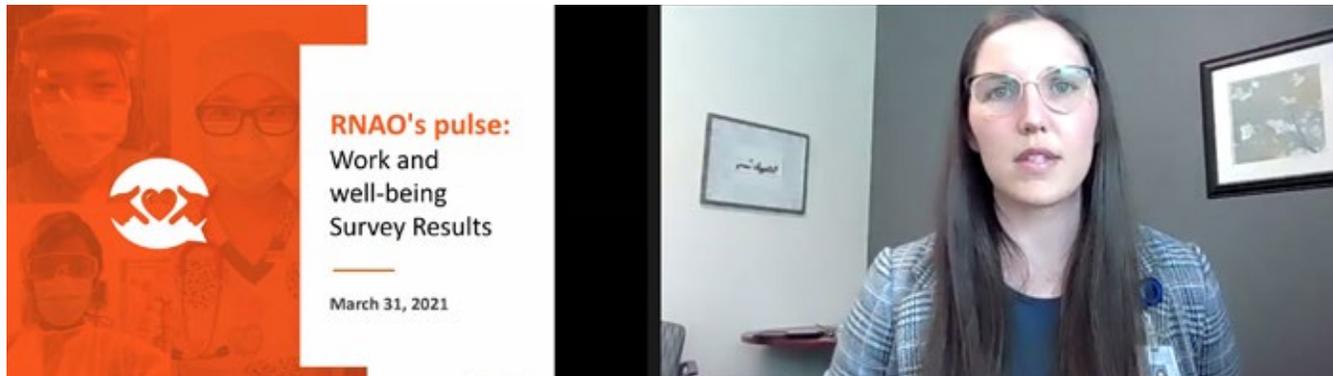
RNAO SPEAKS OUT ON EMERGING ISSUES THAT IMPACT ON NURSES AND THE NURSING PROFESSION, HEALTH AND HEALTH SERVICES

We are tremendously proud of the issues we have spoken out about during the past year.



R. Richards, a resident at F.J. Davey Home in Sault Ste. Marie, participated in RNAO's #4Hours4Seniors campaign to advocate for the Ontario government to implement a Nursing Home Basic Care Guarantee in LTC homes. "I enjoy talking to staff members a lot, but sometimes I feel like I am taking away their time. With four hours of direct care, I wouldn't feel like I am bothering them," says Richards.

RNAO President Morgan Hoffarth reveals the results of the association's Work and Wellbeing Survey at a media conference on March 31, 2021. With more than 2,100 responses from RNs, NPs and nursing students across Ontario, the survey checked the pulse of the nursing profession amid the COVID-19 pandemic, and Hoffarth took a moment to thank all of the respondents.



Nurses have endured an unrelenting pandemic for 16 months. It's taken a toll on our wellbeing and we are exhausted from the dangerous levels of stress. Health system sectors such as LTC, hospital emergency departments and critical care units (including ICU) have been overwhelmed.

RNAO issued a survey this past winter to check the pulse of Ontario's RNs, NPs and nursing students. More than 2,100 responses came in, and the survey results [revealed](#) many nurses are under considerable strain and are struggling to cope. Respondents relied most heavily on family and friends for support, rating government support inadequate and employer support just adequate. A significant number intend to leave the nursing profession or retire early. The potential losses could amount to 15.6 per cent of the RN/NP workforce post-pandemic – three times the normal loss rate.

RNAO's [Work and Wellbeing Survey Results](#) report calls on both employers and the government to engage in retention strategies. This includes increased support for early and mid-career nurses and increased staffing levels. It calls for improved workplace planning, including management succession planning, and increasing admissions to nursing baccalaureate programs by 10 per cent. The government has already announced funding for the first installment on the latter RNAO ask.

RNAO is also a partner in the nursing portion of the Healthy Professional Worker Partnership, [examining](#) mental health at work. Based at the University of Ottawa and led by Dr. Ivy Bourgeault, it is conducting seven case studies of professions, including nursing, midwifery, medicine, dentistry, teaching, academia and accounting. The work entails document analysis, intervention case studies, stakeholder interviews, worker interviews and worker surveys. RNAO has encouraged nurses to participate, and we eagerly await the report comparing the results among the different professions.

A third survey looks at the effects of COVID-19 on nurses. RNAO is working with the Rosemary Bryant AO Research Centre (RBRC) at the University of South Australia (UNISA) and with Nursing Now to deliver an international survey. The pandemic has had a profound impact on nurses and other health professionals. How do nurses feel about their work and how they have been impacted by COVID-19? The survey across 150 countries will reveal what we have in common and what is different. Of special focus will be nurses' wellbeing and the crisis in nursing human resources. We thank RNs, RPNs/LPNs and NPs, including members, who have responded to the survey. The [survey](#) is open until July 31.

AN EXTRAORDINARY YEAR OF MEDIA COVERAGE

RNAO spearheaded advocacy on crucial issues during the past year and our voice resonated. Whether it was the health and wellbeing of nurses on the front lines, calling for public health measures to curb the spread of COVID-19 and its variants, paid sick days for essential and other workers, or government utilization of nurses in the vaccination rollout. These and other stories quoted RNAO and members in a record-setting 6,728 media hits, of which 4,983 or 74 per cent were related to COVID-19.

RNAO's sharp focus on protecting Ontarians and leading change showed in our advocacy for residents who live in LTC. The Ontario government abandoned residents in the early days of the pandemic with tragic consequences. When urged to take decisive action between waves one and two, it failed residents and their families once again. The results were both devastating and preventable. More than 3,782 residents died from COVID-19. Families, residents and staff were left shell-shocked.

The independent commission on the impact of COVID-19 on the province's LTC homes, led by Associate Chief Justice Frank Marrocco, issued its final report on April 30, 2021. It concluded the government didn't have a plan to protect residents. Many staffing recommendations drew from RNAO, including a [Nursing Home Basic Care Guarantee](#). The guarantee stipulates that each resident receive a minimum of four worked hours of direct nursing and personal care daily. It urges a staffing mix of 20 per cent RNs, 25 per cent RPNs and 55 per cent personal support workers. It also calls for one attending NP per 120 residents, plus a dedicated infection prevention and control RN for each home. The inclusion of recommendations outlined in numerous RNAO reports calling for change in this sector speaks to the impact of RNAO's work. Now, we must make sure the recommendations are fully implemented, which will require further advocacy and mobilization.

RECORD NUMBER OF ONTARIO NURSES MAY LEAVE THE PROFESSION AFTER COVID-19: SURVEY

stories quoted
RNAO and members
in a record-setting
6,728
media hits

TORONTO
STAR

MARCH 31
2021



MORE NURSES THAN USUAL ARE CONSIDERING LEAVING THE PROFESSION AFTER COVID-19, DUE TO A LACK OF SUPPORT AND HIGH LEVELS OF STRESS, ACCORDING TO A NEW SURVEY BY THE REGISTERED NURSES' ASSOCIATION OF ONTARIO.

Nadine Yousif
Local Journalism Initiative
Reporter

BRAUN: LONG-TERM CARE HOMES ON COURSE FOR REPEAT DISASTER

TORONTO
SUN

SEPT 22
2020



"THINGS ARE SO BAD THAT DORIS GRINSPUN, HEAD OF THE REGISTERED NURSES' ASSOCIATION OF ONTARIO (RNAO), SAYS SHE HAS ACTUALLY GIVEN UP ON ONTARIO'S LEADERS."

Liz Braun

Crosses erected outside Camilla Care Community long-term care home representing the residents who have died from COVID-19, during a hunger strike by Innis Ingram May 28, 2020. PHOTO BY JACK BOLAND /Toronto Sun

Pandemic response 'too little too late'

TORONTO
STAR

MAY 14
2021



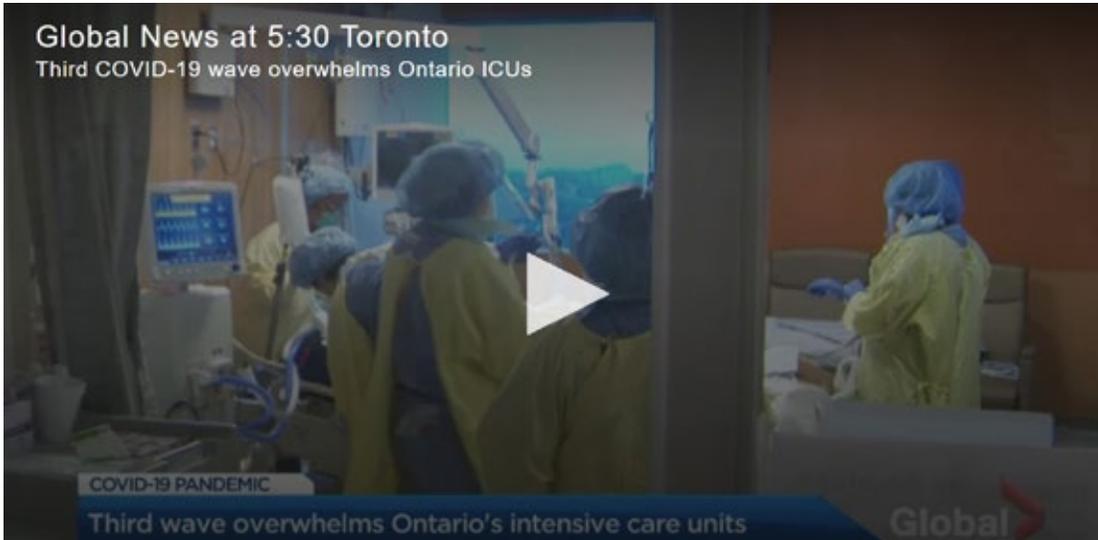
THE WORK OF NURSES HAS BEEN PARTICULARLY HARD-HIT BY PROVINCIAL MISSTEPS, SAYS RNAO

*Adam Bisby
special to The Star*

COVID-19: CRITICAL CARE NURSES IN HIGH DEMAND IN ONTARIO AS 3RD WAVE PUTS PRESSURE ON HOSPITALS

GLOBAL NEWS

APRIL 21 2021



AS A THIRD WAVE OF COVID-19 SURGES IN ONTARIO, STAFF IN ICUs ARE FEELING THE PRESSURE.

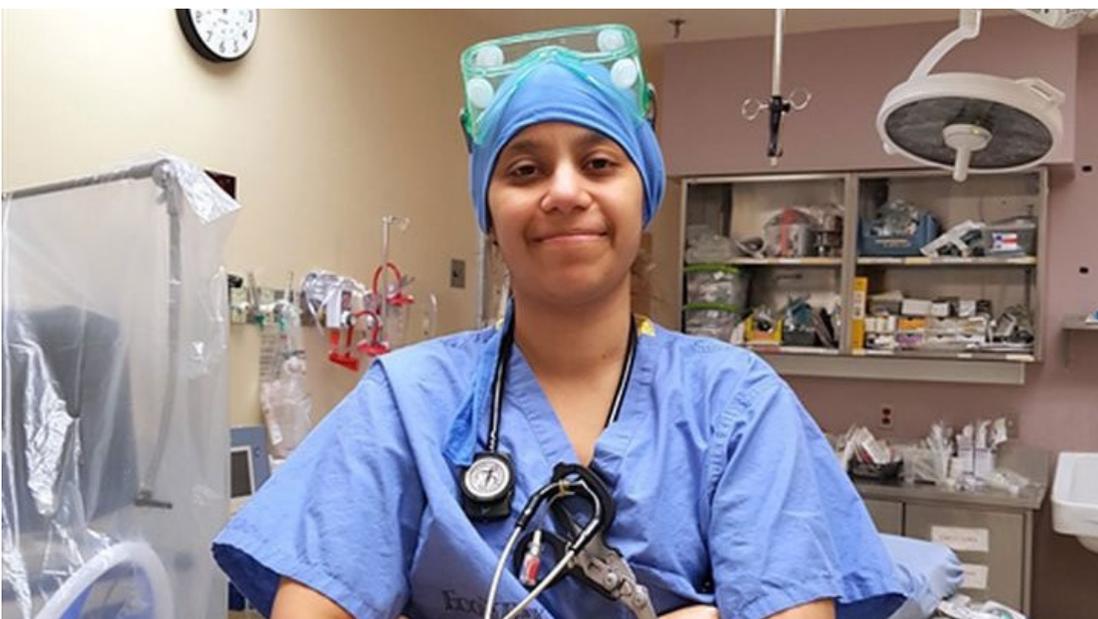
Caryn Lieberman

The pressure of this third wave of the pandemic is being felt the most in Ontario ICUs. Patients are sicker and they're much younger than in previous waves. Caryn Lieberman reports. – Apr 22, 2021

'I'VE SEEN TOO MUCH:' A TORONTO TRAUMA NURSE OPENS UP FROM THE PANDEMIC FRONT LINE

TORONTO.COM

JUNE 2 2021



ERAM CHHOGALA EXPLAINS WHY SHE CAN'T 'JUST QUIT,' DESPITE THE PERSONAL TOLL

Megan DeLaire

RNAO's response to the
**LTC COVID-19
Commission's
report**



RNAO @RNAO · May 2, 2021

Ontario's Long-Term Care COVID-19 Commission issued its report late Friday. RNAO gives it a thumbs up. The question now is will the government act?



Marion Zych @marionzych · Feb 25, 2021

1 yr ago this wk, @RNAO CEO @DorisGrinspun spoke with Radio Canada. The pandemic had yet to be declared, however @DorisGrinspun knew what was coming & urged @fordnation & @celliottability to adopt the precautionary principle. Prepare & take every measure possible. #COVID19



COVID-19 PORTAL

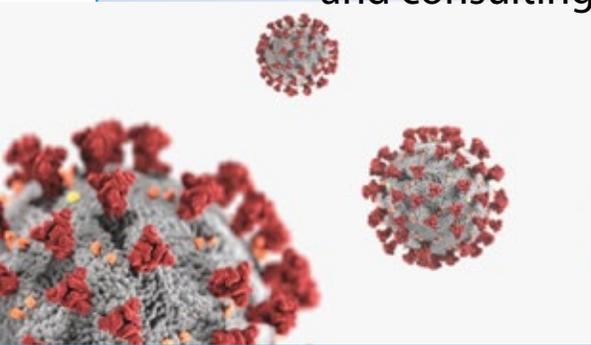


Since the onset of COVID-19, RNAO has been providing members, health-care providers and the public with facts, resources and supports to navigate the pandemic. Our [COVID-19 portal](#) provides that central point of access with vital information about pressing issues, webinars, reports, media coverage and the much-loved [blog of RNAO's CEO](#) with a weekly reach of more than 300,000 readers at home and abroad. The portal received the gold prize for Best COVID-19 coverage at the 2020 Canadian Online Publishing Awards.



RNAO @RNAO · Dec 10, 2020

We've added a vaccine information page to our [#COVID19](#) portal to keep you informed and consulting credible resources.



[RNAO.CA/COVID19](https://rnao.ca/covid19)



RNAO @RNAO · Nov 28, 2020

Stay up-to-date with the latest [#COVID19](#) news, RNAO's advocacy efforts and upcoming events by visiting our CEO [@DorisGrinspun's](#) blog!



[DORIS-BLOG.RNAO.CA](https://doris-blog.rnao.ca)

SOCIAL MEDIA OUTREACH

TWITTER: 22.4K
followers

FACEBOOK: 22.7K
followers

INSTAGRAM: 7K
followers

LINKEDIN: 23.6K
followers

We leverage social media as a tool to drive change on the issues that matter. Strategically initiating conversations related to nursing and health care yields tremendous results. We now have 22,400 followers on Twitter. Our presence on Facebook (22,700), Instagram (7,000) and LinkedIn (23,600) are equally impressive. We were front-and-centre with posts that focused on the devastation and under-staffing in Ontario's LTC homes, the crisis in hospital ICUs, the pandemic's effect on the wellbeing of nurses, the need to repeal Bill 124 (limits on wage increases), the safe reopening of schools, and the vaccination rollout.

Dedicated followers help amplify our voice on social media, which we use to influence healthy public policy and improve the health of all Ontarians.

#MASKATHON



A notable social media campaign was #Maskathon. It launched in the summer of 2020, before many jurisdictions in Ontario – not to mention the rest of Canada – had adopted mandatory mask-wearing bylaws. RNAO's proactive campaign encouraged people of all ages, especially kids, to wear a mask to stay safe and healthy during the pandemic. Using the hashtag #Maskathon, the campaign was shared widely and received [media coverage](#). It also captured the gold prize for Best Branded Content at the 2020 Canadian Online Publishing Awards.



#4HOURS4SENIORS

#4Hours4Seniors was another successful campaign that generated engagement on social media. We asked residents in LTC what receiving four hours of care meant to them.

RNAO @RNAO · Dec 9, 2020



"I am a very independent person, but my wife on the other hand isn't and she means the world to me. With four hours of care, it doesn't need to be rushed. And who wouldn't want to see her beautiful smile for four hours!" - M. Doan

RNAO @RNAO · Dec 11, 2020

"I enjoy talking to the staff members a lot but sometimes I feel like I am taking away their time. With four hours of direct care, I wouldn't feel like I am bothering them." - R. Richards

RNAO @RNAO · Dec 18, 2020

"It gets lonely here sometimes, so having the support of the staff makes it easier." - J. Prokop (Retired Operating Room Nurse)
#4Hours4Seniors

Central to RNAO’s powerful voice is our website. RNAO is working hard to redevelop the site and improve the user experience. The goal is to elicit depth of information within an easy-to-navigate interface. The guiding idea is a website focused on visitor attraction, mobile usability and social movement leadership. It should entice visitors to explore evidence-based information and prompt them to act.

Nursing dashboard



Our policy site includes a dashboard of key indicators for each of the health policy areas. The dashboard opens the door to a series of pages that engage visitors on current health issues. An improved Action Alert system allows visitors to voice their support on targeted issues. Evidence-based policy documents are available. These will serve media, policy-makers, nurses and nursing students, interested in RNAO’s detailed and comprehensive research on nursing, health and health-care policy matters.

RNAO’s information management and technology team has led the website re-design, with support from the policy and communications team and each department. The new policy and political action section was launched in early 2021. A lifecycle management process ensures the content, look, feel, design and usability remain fresh and appealing.

Sign our Action Alert

Stop the registered practical nurse scope expansion. Call on the premier and minister of health to refer the College of Nurses of Ontario Council’s decision to the Health Professions Regulatory Advisory Council.

[SIGN ACTION ALERT](#)

[RNAO Home](#) > [Policy & political action](#) > [Issues](#) > [Nursing policy](#)

Nursing policy

The issue

END 4

RNAO INFLUENCES HEALTHY PUBLIC POLICY TO POSITIVELY IMPACT THE DETERMINANTS OF HEALTH, SUPPORTING MEDICARE AND STRENGTHENING A PUBLICLY FUNDED, NOT-FOR-PROFIT HEALTH SYSTEM

Our intense presence in print, radio, television and digital stories aims to influence healthy public policy that serves all populations.



RNAO President Morgan Hoffarth snaps a selfie after receiving her first dose of the COVID-19 vaccine at London Health Sciences Centre on Jan. 10, 2021.

RNAO is at the forefront, influencing policy that advances social and environmental determinants of health and a well-functioning and equitable health system. We tackled critical issues during this devastating pandemic: anti-Black racism, the health of Indigenous communities, a national pharmacare program, the need for national standards for LTC, including staffing and reuniting families, the opioid overdose crisis, and paid sick days. These were in addition to the intense engagement on responses to the pandemic, public health measures, protecting health workers, nursing human resources, vulnerable populations, inequitable impacts of the virus, vaccination rollout, and the safe reopening of schools.

BLACK NURSES TASK FORCE

May 25, 2021 marked the one-year anniversary of the callous murder of George Floyd. His death reignited the Black Lives Matter movement. RNAO [spoke out](#) in solidarity to condemn racism, oppression and discrimination. Racism is a determinant of health that drives health and social inequities. The interconnection between anti-Black racism and COVID-19 has been evident throughout the pandemic, and disparities have been highlighted for Black communities, including nurses.

Black nurses are subjected to racial slurs and micro-aggressions. They are denied career advancement and study in academic programs where racist and oppressive theory is built into the curriculum. Black nurses do not have equal access to professional development, promotions and leadership roles in advanced practice, education, administration, research and policy. This is detrimental to the health and wellbeing of Black nurses and those for whom they provide care. It is also detrimental for other health professionals and the health system since they are deprived of the experience and expertise of Black nurses and other Black health professionals.

The overt and covert manifestations of racism and discrimination expressed in Black nurses' stories shine a light on the magnitude of racism in nursing. RNAO is committed to standing with nurses who identify as Black and others who want to advance social justice. We have long recognized that racism is systemic in society and endemic in our institutions.

This is the backdrop for the launching of the RNAO Black Nurses Task Force in June 2020, co-chaired by our immediate past president Dr. Angela Cooper Brathwaite (top right) and NP Corsita Garraway (bottom right). RNAO's purpose is to challenge the status quo and begin to right the wrongs in the nursing profession.

The task force is a collective of 17 Black RNs, NPs and nursing students from all sectors across Ontario and diverse roles, each with unique lived experiences. It hosts regular meetings and monthly webinars that feature noted guests to inform its work. RNAO, guided by the task force, has called for the College of Nurses of Ontario (CNO) to collect race-based data to help identify systemic barriers, end discriminatory practices, address historical disadvantages and promote equality for Black nurses.



PARTNERSHIPS WITH INDIGENOUS ORGANIZATIONS

RNAO has a long-standing partnership with Indigenous communities to address the impacts of racism and discrimination on their health and wellbeing. We have expanded our Indigenous health program to include: partnerships with provincial and national Indigenous groups; BPGs for Indigenous communities, including one that focuses on promoting smoking reduction and cessation with Indigenous peoples of reproductive age and their communities (being released this fall); and expansion of BPSOs across Indigenous communities and Indigenous-focused health organizations in Ontario.

RNAO continues to strengthen its relationship with the Chiefs of Ontario (COO) and the Nishnawbe Aski Nation (NAN). In 2016, RNAO signed a [letter of intent](#) with then-Chief Isadore Day. In 2019, RNAO and COO held a formal [signing ceremony](#). The pandemic brought the partners – led by Ontario Regional Chief RoseAnne Archibald and RNAO CEO Dr. Doris Grinspun – to develop and implement a COVID-19 action plan for First Nations. It outlined five critical areas to protect First Nations communities:

1. Pre-outbreak testing and surveillance
2. Physical distancing for community, self-isolation and cohorting of cases
3. Robust case and contact tracing
4. Universal masking and personal protective equipment
5. Health human resource surge capacity

In March 2021, RNAO President Morgan Hoffarth attended a signing ceremony during the [NAN Chiefs Assembly on Health Transformation and Governance](#), indicating RNAO will support NAN taking control over its health care through the development of a health transformation process and its own health commission.



Nishnawbe Aski Nation
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Relationship Accord
between
Nishnawbe Aski Nation ("NAN")
and
Registered Nurses' Association of Ontario ("RNA")
(Collectively "the Parties")

WHEREAS, the Sioux Lookout Area Chiefs Committee on Health (CCOH) and Nishnawbe Aski Nation (NAN) Chiefs issued a Declaration of Health and Public Health Emergency on February 24, 2016 in order to call attention to the ongoing crises at the community level and across the health care system within NAN territory.

WHEREAS, NAN communities have issued and developed numerous declarations, recommendations, resolutions and studies providing specific and

INTENT:

1. The objective of this Relationship Accord is to guide the partnership between NAN and the RNAO, as NAN proceeds with the NAN Health Transformation process and the creation of a NAN Health Commission.
2. NAN and RNAO intend to develop mutually supported initiatives within NAN territory to build capacity, and transform the experiences of First Nations people within the health system.

On March 24, 2021, RNAO signed the Relationship Accord with Nishnawbe Aski Nation (NAN) to advance health equity and effective health care, as well as to support NAN's aspirations for self-determination over matters of health. RNAO President Morgan Hoffarth represented the association at the virtual signing ceremony.

A webinar series was developed with COO, NAN, the Canadian Indigenous Nurses Association (CINA), and the Centre for Addiction and Mental Health Shkaabe Makwa. The [inaugural webinar](#) was on traditional Indigenous approaches to address the mental health and well-being of health-care providers supporting First Nations during COVID-19. Other webinars focus on Indigenous traditional practices and ways of knowing. Hundreds of health providers have participated, keen to develop Indigenous cultural humility.

RNAO is working with six Indigenous partners across Ontario to create a tailored program to honour Indigenous ways of knowing and to support holistic community wellness. Indigenous traditional and western best practices have been integrated to strengthen health and wellbeing. The inaugural Indigenous-focused BPSO cohort includes organizations offering unique health and social services. Their common goal is the quality of life of Indigenous individuals and communities where health providers work and live. The BPSOs include: Anishnawbe Mushkiki, Mamaway Wiidokdaadwin Indigenous Interprofessional Primary Care Team, Ontario Native Women's Association; Chigamik Community Health Centre; Sandy Lake First Nation and Seventh Generation Midwives Toronto.

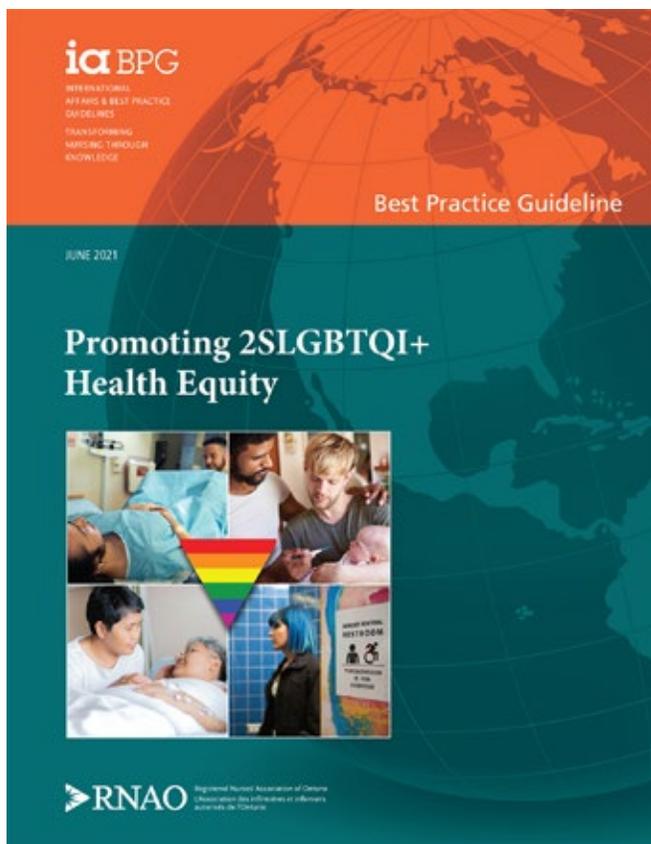
RNAO further cemented its commitment to the rights of our Indigenous brothers and sisters by welcoming members of the Indigenous Nurses and Allies Interest Group this spring. It marks an important milestone for RNAO's efforts to support and learn Indigenous health knowledge and practices. We know that our Indigenous nurse colleagues will help us live inclusion in all our work.

2SLGBTQI+ BPG

Equity is woven through all of RNAO's work. The association recognizes the historically unmet health-care needs of 2SLGBTQI+ (Two-Spirit, lesbian, gay, bisexual, trans, queer and intersex people) communities. In collaboration with a diverse expert panel – including

people with lived experience, activists, clinical nurses and other health providers, researchers, educators and administrators – RNAO is launching at this AGM its [Promoting 2SLGBTQI+ Health Equity BPG](#) (co-chaired by RN Sheena Howard and Dr. Elizabeth Saewyc). It promotes inclusivity and enhances the safety of 2SLGBTQI+ people across health and academic settings. Through a health equity lens, the BPG outlines 10 evidence-based recommendations. These ensure 2SLGBTQI+ persons are cared for with respect and dignity, and that health outcomes are optimized. Concurrently, we are releasing RNAO's revised [position statement](#) developed in partnership with RNAO's Rainbow Nursing Interest Group. *Respecting Sexually and Gender Diverse Communities* reaffirms the need for full inclusion of all persons in our health system.

RNAO believes that every Ontarian deserves the best from nurses, other health professionals, and the health system. This is central to our theme of protecting Ontarians and leading change. Our reputation for offering sound policy solutions is unmatched and evident in the issues we advance. We act on new and emerging issues through letters, action alerts, policy submissions, meeting with politicians from all parties, and – most of all – by listening to our members and the public.



MEDIA OUTREACH

We work with media to generate awareness and mobilize change. Our extraordinary presence – 6,728 hits during the pandemic – in print, radio, television and digital stories aims to influence healthy public policy that serves all populations. Our CEO, board of directors and members speak on a variety of nursing, health and health-care related topics. We call on governments to address the social and environmental determinants of health and strengthen our publicly funded, not-for-profit health system.

RNAO's Black Nurses Task Force was profiled in an article published in the *Toronto Star* Oct. 16, 2020.



SOCIAL OUTREACH

Deb Lefebvre@DebraLefebvre · Apr 18, 2021

Act now @fordnation @celliottability
We must have #PaidSickDays &
#vaccines4vulnerable

We use social media channels to insert health equity into the conversation. How do the determinants of health impact different populations? We encourage our followers to advocate for vulnerable and silenced populations. For example, RNAO members, Debra Lefebvre, Birgit Umaigba, and the Gritty Nurse are among those who used their Twitter presence to amplify the call for paid sick days.

Birgit Umaigba RN, BScN, MEd, CCRN@birgitomo · Apr 2, 2021



With each new day comes the opportunity to right the wrongs - this includes prioritizing Ontario's hotspots for vaccination and implementing #PaidSickDays. Help us save lives.
@fordnation @onpoli
#ontariolockdown

The Gritty Nurse@GrittyNurse · Apr 5, 2021

We need #PaidSickDays
We need #health #equity
We need governments to care that their will be worse health outcomes for #homeless #marginalized #stigmatized people
We need to vaccinate #EssentialWorkers
We need action now.



Join us!

Call on those elected to all orders of government to bring the opioid public health crises to an end.

Action Alert: Call on elected leaders to step up and end the opioid crisis!



Austin Layte, the son of RNAO member Kathy Moreland, died on June 26, 2020. He was 18. #RIP Austin knowing you are loved.



RNAO@RNAO · Jan 22, 2021

#DidYouKnow?: On average, in the first 3.5 months of #COVID19 in Ontario, more than 6 people died each day from an #opioid-related overdose, representing a 38 per cent increase in deaths compared to before the pandemic.

Fact sheet: <http://qpor.RNAO.ca/sites/default/default/default/files/>

#OpioidCrisis #CTS

RESOLUTION: REGULATION OF E-CIGARETTES AND VAPING FOR ONTARIO YOUTH

Author: *Chantal Singh on behalf of the Pediatric Nurses Interest Group*

Conflict of interest: *No known conflict of interest*

THEREFORE BE IT RESOLVED that the Registered Nurses' Association of Ontario (RNAO) actively lobby the Ontario government to amend the Smoke-Free Ontario Act, 2017, banning: 1) the sale of all flavoured vaping and e-cigarette products designed to appeal to youth; and 2) all advertisements that promote the use of vaping and e-cigarette products.

For years, RNAO has advocated for evidence-based harm reduction approaches to tobacco use and has been a leader in providing best practice guidelines to assist nurses and other health providers in integrating smoking cessation interventions into clinical practice. Throughout 2020, RNAO's webinar series on the landscape and emerging issues with e-cigarettes educated and informed Ontario's nurses on the prevalence of vaping, the mechanism of vaping through nicotine, the impacts of vaping and how nurses and other health providers support clients with prevention, protection, and cessation support.

On March 4, 2021 RNAO welcomed the opportunity to collaborate with the Pediatric Nurses Interest Group in providing feedback on Health Canada's proposed *Concentration of Nicotine in Vaping Products Regulations (CNVPR)* urging to limit the concentration of nicotine in vaping products. RNAO applauded Health Canada's 2019 amendments to vaping regulations to require: a nicotine concentration statement and health warning regarding toxicity and addiction on all vaping products containing nicotine; a list of ingredients for all vaping substances on product labels; and a prohibition on nicotine concentrations, as well as regulation imposed by Ontario's Ministry of Health to limit the promotion and sale of vaping products with nicotine concentrations greater than 20 mg/ml. We also called for the following additional recommendations regarding vaping products in Canada:

1. Further curb youth use of vaping tobacco products by increasing the age requirement to 21 years under the *Tobacco and Vaping Products Act*
2. Ban the use of flavoured vaping and e-cigarette products designed to appeal to youth across the country under the *Tobacco and Vaping Products Act*

For more details about our recommendations, please read our full submission [online](#).

RESOLUTION: LEGISLATIVE REFORM AND INFRASTRUCTURE DEVELOPMENT FOR MISTREATMENT OF OLDER ADULTS WITH DEMENTIA WITHIN THE HOME CONTEXT

Author: *Maria Casas on behalf of the Sudbury & District Chapter*

Conflict of interest: *No known conflict of interest*

THEREFORE BE IT RESOLVED that the Registered Nurses' Association of Ontario (RNAO) advocate the provincial government institute legislative reform and infrastructure development to support professional intervention in cases of mistreatment of older adults with a neurocognitive disorder by an informal caregiver within the home.

The movers of this resolution collaborated with their local MPP France Gélinas, NDP health critic, to develop legislation that was tabled on Feb. 23, 2021. The private member's bill, Bill 253, *Support for Adults in Need of Assistance Act, 2021*, requires: regulated health professionals to report to a board of health if they have reasonable suspicion that an individual who is 16 years of age or older is being abused or neglected; a board of health to ensure each report received is assessed and verified within a certain time period; and every board of health establish a team that will review cases and recommend a support and assistance plan for individuals in need. The legislation fulfills this resolution adopted at RNAO's 2020 Annual General Meeting and has received endorsement from RNAO. For more details about the status of Bill 253, please see the Legislative Assembly of Ontario website [here](#).

RESOLUTION: ADDRESSING VACCINE HESITANCY

Author: *May Tao and Susan Tam on behalf of the Community Health Nurses' Initiatives Group (CHNIG)*

Conflict of interest: *No known conflict of interest*

THEREFORE BE IT RESOLVED that the Registered Nurses' Association of Ontario (RNAO) develops and implements a plan to empower registered nurses (RN), nurse practitioners (NP), and nursing students to promote the importance of vaccines and address vaccine hesitancy across the lifespan as well as among health professionals to increase vaccine knowledge and uptake within communities.

As health-care professionals, RNs and NPs have harnessed public trust during the COVID-19 pandemic in addressing vaccine hesitancy and promoting vaccine confidence. RNAO has been a powerful messenger of evidence-based information respecting COVID-19 vaccination, providing members and the general public with credible resources. RNAO participated in a collective effort to develop a comprehensive information resource tool on COVID-19 vaccines, led by the Centre for Effective Practice.

RNAO hosted a webinar titled, COVID-19 Vaccine: A game changer in February, 2021, with Dr. Cora Constantinescu, a pediatric infectious disease specialist. Dr. Constantinescu and RNAO CEO Dr. Doris Grinspun discussed the critical importance of effective vaccine communication and the need to empower health-care professionals to talk about the COVID-19 vaccine with patients, colleagues, family and friends. RNAO staff met with the resolution authors to explore how the resolution had taken on greater importance and potential impacts given the pandemic and the mass COVID-19 vaccination program underway in Ontario and around the world. RNAO staff members have consistently engaged in one-on-one conversations with members, responding to their inquiries. Vaccine hesitance and confidence have also been discussed in our CEO's COVID-19 blog going out to over 300,000 health professionals, politicians and the media at home and abroad. The topic has been addressed also in the association's *Registered Nurse Journal*, reaching RNAO's 46,000 + members across the province as well as their personal and professional networks.

continued on the next page

RNAO members and grassroots groups have engaged RNAO in COVID-19 vaccine uptake and other initiatives to address marginalization and exclusion. RNAO has supported grant applications for community groups who serve Black, Caribbean and African communities. To address the inequity and disproportionate impact of COVID-19 on racial and ethnic minority communities, RNAO is working with the Black Physicians Association of Ontario (BPAO) on the Black Health Vaccine Initiative, which aims to advocate, educate and vaccinate people in Ontario's Black communities.

RNAO and many of our board members, assembly of leaders, and staff have been avid social media champions providing facts and creating vaccine excitement.

RESOLUTION: ACCESS TO SAFE DRINKING WATER

Author: *Josalyn Radcliffe on behalf of the Ontario Nurses for the Environment*

Interest Group (ONEIG)

Conflict of interest: *No known conflict of interest*

THEREFORE BE IT RESOLVED that the Registered Nurses' Association of Ontario (RNAO) build upon existing partnerships with Indigenous partners and collaborate with other partners engaged in water protection to lobby the federal and Ontario governments to secure the right to safe water and sanitation for all, including securing processes that support sustainable public funding for water infrastructure, public ownership of water utilities, and enhanced protections against pollution and over-extraction for the ongoing sustainable provision of safe drinking water and sanitation for every resident in Ontario.

Consistent with collaboration principles with First Nations partners, members of RNAO's policy department have been engaged with representatives of the Chiefs of Ontario (COO) about the issue of clean water. Earlier in the year, the policy team met with COO representatives from both their health and environment departments, including COO director of environment and COO community wellness manager, to discuss specific ongoing initiatives with respect to clean water. RNAO subsequently shared information relating to, and examples of, past political action on clean water and water quality issues. The COO community wellness manager and RNAO's senior economist, Kim Jarvi, will be point persons for further collaboration. Concurrently, RNAO's Ontario Nurses for the Environment Interest Group (ONEIG) is developing a background paper on water to review and inform an RNAO position paper on water and submissions related to clean water issues.

RESOLUTION: TO INITIATE RESEARCH AND INCREASE AWARENESS OF THE IMPORTANCE OF STRONG ENVIRONMENTAL LAWS

Author: *Margarita Salvatore and Hilda Swirsky*

Conflict of interest: *No known conflict of interest*

THEREFORE BE IT RESOLVED that the Registered Nurses' Association of Ontario (RNAO) continues to work collaboratively with its partners, members, and stakeholders to promote and to preserve strong environmental laws that benefit Ontario's populations.

Over the course of the year, the Registered Nurses' Association of Ontario (RNAO) has been engaged in a number of consultations relating to a range of environmental issues. Included among these are RNAO's:

1. Endorsement of a [letter](#) calling for an expansion of temporary bikeways in Toronto.
2. Endorsement of a [letter](#) calling for gas-fired power plants to be phased-out in Ontario.
3. Participation, along with transit advocacy organizations, in a call to Ontario Ministry of Finance urging expansion of funding for transit.
4. Endorsement, along with 51 other organizations, of a [joint letter](#) calling for a much more comprehensive response to waste and recycling, including coverage of all sectors and financial and operational responsibility of producers for products after use (i.e., extended producer responsibility).
5. [Submission](#) to Toronto City Council in support of Transform Yonge, a proposal for active transit (e.g., expanded pedestrian space and bike lanes), on Yonge Street in the north end of the city.
6. Participation in a successful social media campaign to appeal for the federal government to conduct an environmental assessment on controversial Highway 413.
7. Participation in a successful social media campaign for a protected bike lane along the midtown section of Toronto's Yonge Street.

Board committees 2020-2021

BYLAWS

Liliana Bressan, Board Representative and Chair
Kristie Butler, Board Representative
Susan Chan, RNAO Member
Rodolfo D. Lastimoso Jr., Student Representative, ex-officio
Marianne Cochrane, Parliamentarian, ex-officio
Morgan Hoffarth, President, ex-officio
Dr. Doris Grinspun, Chief Executive Officer, ex-officio
Ifrah Ali, Board Affairs Coordinator, ex-officio

EDITORIAL ADVISORY

Regina Elliott, Board Representative and Chair
Julie Rubel, Board Representative
Rodolfo D. Lastimoso Jr., Board Representative
Chad Johnson, RNAO Member
Laryssa Vares, RNAO Member
Yoyo Chen, Student Member
Joanne Laucius, Journalist
Jane Sims, Journalist
Morgan Hoffarth, President, ex-officio
Dr. Doris Grinspun, Chief Executive Officer, ex-officio
Marion Zych, Director of Communications, ex-officio
Kimberley Kearsey, Managing Editor, RNJ, ex-officio

EXECUTIVE

Morgan Hoffarth, President and Chair
Dr. Angela Cooper Brathwaite, Immediate Past-President
Dr. Doris Grinspun, Chief Executive Officer
Ifrah Ali, Board Affairs Coordinator, ex-officio

INTEREST GROUPS

Julie Rubel, Co-chair
Maria Rugg, Co-chair
Chair of each Provincial Interest Group, Associated Interest Group, Pending Associated Interest Group, and Affiliated Group (or the Chair's designate)
Morgan Hoffarth, President, ex-officio
Dr. Doris Grinspun, Chief Executive Officer, ex-officio
Daniel W. Lau, Director, Membership and Services, ex-officio
Carrie Edwards, Senior Membership and Services Coordinator, ex-officio

LEADERSHIP SUCCESSION

Morgan Hoffarth, President and Chair
Dr. Angela Cooper Brathwaite, Immediate Past-President
Dr. Vanessa Burkoski, Past President
Rachel Colquhoun, Assembly Member
Michelle Heyer, Member of Nominations Committee
Dr. Doris Grinspun, Chief Executive Officer
Ifrah Ali, Board Affairs Coordinator, ex-officio

LEGAL ASSISTANCE PROGRAM (LAP)

Betty Oldershaw, Board Representative and Chair
Anita Tsang-Sit, Board Representative
Dr. So-Yan Seto, Board Representative
George Fieber, RNAO Member
Katherine Smith, RNAO Member
Cathy Olsiak, Nurse Lawyer, non-voting
Morgan Hoffarth, President, ex-officio
Dr. Doris Grinspun, Chief Executive Officer, ex-officio
Nancy Campbell, Director, Finance and Administration, ex-officio
Mara Haase, LAP Administrator, ex-officio

MEMBERSHIP RECOGNITION AWARDS

Tia Cooney, RNAO Member
Neena Jose, RNAO Member
Bradley Manuel, RNAO Member
Sharon Nwamadis, RNAO Member
Marina Pavlova, RNAO Member
Dhara Shah, RNAO Member
Sabrina Raut, Student Representative
Rodolfo D. Lastimoso Jr., Board Representative
Morgan Hoffarth, President, ex-officio
Dr. Doris Grinspun, Chief Executive Officer, ex-officio
Daniel W. Lau, Director, Membership and Services, ex-officio
Yallenni Ilamvaluthy, Membership and Services Project Coordinator, ex-officio

PROVINCIAL NOMINATIONS

Dr. Angela Cooper Brathwaite, Immediate Past-President and Chair
Jennifer Flood, RNAO Member
Michelle Heyer, RNAO Member
Morgan Hoffarth, President, ex-officio
Dr. Doris Grinspun, Chief Executive Officer, ex-officio
Ifrah Ali, Board Affairs Coordinator, ex-officio

PROVINCIAL RESOLUTIONS

Kathleen Pikaart, RNAO Member and Chair
Daniela Acosta, RNAO Member
Lhamo Dolkar, RNAO Member
Maria Tandoc, RNAO Member
Marianne Cochrane, Parliamentarian, ex-officio
Morgan Hoffarth, President, ex-officio
Dr. Doris Grinspun, Chief Executive Officer, ex-officio
Ifrah Ali, Board Affairs Coordinator, ex-officio

EXTERNAL REPRESENTATION

RNAO is represented on more than 70 committees, boards and working groups, locally, provincially and nationally.

Board committee reports

BYLAWS

The bylaws committee is a standing committee of the board of directors, with responsibility to annually review the association's bylaws, consider recommendations for bylaw changes, and propose revisions to bylaws, which are congruent with the Mission, Values and Ends of RNAO. The committee met to review recommendations from RNAO's board to amend the term "Assembly" to "Assembly of Leaders" under Bylaw 1(4) 'Definitions'.

The committee approved the recommendations to go forward to the membership at large for consultation via One member, one vote prior to the 2021 Annual General Meeting.

I would like to thank the committee members for their participation in the business of the committee this year and staff for their support.

Liliana Bressan, RN, BScN, MPH
Chair

EDITORIAL ADVISORY

The editorial advisory committee (EAC) is comprised of RNAO board members, general nursing members, a nursing student, and journalists. Its main role is to review the association's award-winning publication RNJ, formerly known as *Registered Nurse Journal*. Since the fall of 2019, the journal has been completely digital and is accessible via RNJ.RNAO.ca, where members (sign-in required) can read features, profiles, columns and news as well as interact with the content through weblinks and photo slideshows. The committee provides feedback on each

issue, ensuring the priorities and initiatives of the association are fully reflected in various stories. Each EAC member offers a valid and distinct perspective based on their unique role and expertise. Working in collaboration with RNAO's communications team, committee members offer ideas for future issues and provide much-needed perspective on the issues facing the nursing profession and the health system. I would like to thank all committee members for their commitment and contributions during this past year, as well as the dedicated editorial home office team.

Regina Elliott, RN, MN
Chair

EXECUTIVE

The executive committee is comprised of the president, immediate past-president, chief executive officer, and board affairs coordinator who acts as a staff resource. The purpose of the committee is to ensure governance best practices for the association and committees of the board of directors.

The committee met on five occasions this past year. Key issues the committee dealt with were leadership succession planning, RNAO's financial investments and various advocacy and outreach efforts related to the COVID-19 pandemic. I would like to thank the committee members, board of directors, and home office staff for their thoughtful contributions and support in the business of the committee this year.

Morgan Hoffarth, RN, MScN
Chair

INTEREST GROUPS

The committee met twice this past year, in November 2020 and March 2021. The November meeting began with a self-care exercise led by co-chair Maria Rugg meant to acknowledge the variety of feelings members have experienced during these challenging times. The meeting also featured four interest groups. The Staff Nurses Interest Group and Maternal Child Interest Group spoke about their member engagement activities during the COVID-19 pandemic and the Community Health Nurses' Initiative Group and Ontario Nurses for the Environment Interest Group provided advice on successful resolution writing. Interest groups were also treated to a session on how to host successful Zoom meetings as well and an update of the Interest Group Toolkit. The March meeting featured Mahoganie Hines from the Palliative Care Nurses Interest Group, who shared her leadership journey as well as tips on how to build strong relationships with local political leaders.

Update emails were sent to all interest group chairs in August 2020 and February 2021. The purpose of these emails is to address follow-up times from previous meetings and to keep members informed of upcoming events or deadlines. In October 2020, it was identified that the majority of interest groups (20 of 31) maintained at least one social media account. This was shared with the board of directors, resulting in an increased profile of the work of interest groups.

The committee is proud to recognize a new interest group,

Indigenous Nurses and Allies Interest Group and to acknowledge the Complementary Therapies Nurses' Interest Group's transition to full Interest Group status. We would like to thank the committee members and home office staff for their involvement and collaboration in the business of the committee this year.

Julie Rubel, RN MScN GNC(c)
Co-Chair
Maria Rugg, RN, BScN, MN
Co-Chair

LEADERSHIP SUCCESSION

The leadership succession committee was developed in 2020 following the adoption of the president-elect criteria to the RNAO bylaws in 2019. This committee is comprised of the president, immediate past-president, immediate preceding past-president, one member of the Provincial Nominations Committee, one member of the assembly, and the chief executive officer. The purpose of the committee is to facilitate the nomination process of the president-elect position to be presented to the president and RNAO's board of directors.

The committee met on five occasions to review applications and interview candidates to verify that candidates meet the criteria for the president-elect role; and prepare and submit the candidates to be added to the ticket of nominations.

I would like to thank the committee members, board members and home office staff for their thoughtful contributions and support in the business of the committee this year.

Morgan Hoffarth, RN, MScN
Chair

LEGAL ASSISTANCE PROGRAM (LAP)

The committee meets on a regular basis to consider and approve requests (all files are presented anonymously), to monitor trends and make recommendations to the board of directors. Committee representatives are always pleased to speak on matters of interest to chapters, regions without a chapter, or interest groups and welcome feedback about trends observed in the profession.

Since its inception, the Legal Assistance Program (LAP) has supported over 4,700 registered nurses and nurse practitioners in a variety of professional and employment matters. Complaints and reports to the College of Nurses of Ontario, termination from employment, including wrongful and constructive dismissal, return to work accommodation, human rights tribunal, and WSIB matters make up the majority of legal cases supported by LAP. LAP also provides access to employment relations counseling, as well as educational presentations, local and regional events, webinars, and articles in RNJ on legal issues relevant to nursing practice, such as documentation, privacy and confidentiality, and working with unregulated care providers. This past year, LAP also sponsored a series of legal education webinars on the topic of legal issues in nursing practice related to COVID-19, which attracted thousands of registrants.

I would like to thank committee members and home office staff for their work and support over the past year.

Betty Oldershaw, RN
Chair

MEMBER RECOGNITION AWARDS

The best in nursing are recognized every year through RNAO's Recognition Awards. We received a record number of nominations; 50 nurses' names were put forward for consideration. This year, we are honouring 17 stellar individuals across 15 categories highlighting excellence in the profession through research, administration, education, policy and clinical practice, among other areas. Awards will be handed out during RNAO's Annual General Meeting (AGM) on June 25.

This year, the committee entered the "videoconferencing" era, making the jump from the usual teleconferencing to better stay connected with the Recognition Awards process. The committee further embraced the new virtual world – the scoring process became completely virtual in 2021, utilizing an electronic system to allow judges to submit scores transparently and effectively. This year, the awards program also saw the retirement of two categories, The Workplace Liaison Award and the RNAO in the Workplace Award. The committee voted to merge the Promotion in a Nursing Program award into the Leadership in Student Mentorship award, allowing a more comprehensive award category to be created that would better recognize RNs and NPs.

MRAC made adjustments to the terms of reference, specifically enhancing the committee's responsibilities in the Recognition Awards process. This includes annual reviews of the award categories, making recommendations on the number and type of award categories and increasing promotional activity to support the nomination process.

The committee also added specific criteria for the awards to better guide the scoring process.

Thank you to the committee and home office staff for your commitment to recognize leaders in the nursing profession. And thank you to all the nurses for your hard work and dedication in moving the profession forward every day.

*Morgan Hoffarth, RN, MScN
Chair*

PROVINCIAL RESOLUTIONS

The resolutions committee is comprised of four general members of the association, the President, Chief Executive Officer, and Parliamentarian. The committee met on four occasions to review and discuss the 19 member resolutions, which were received by the deadline of 5:00 p.m. on Feb. 22, 2021.

Based on the criteria for assessing and strengthening resolutions, the committee determined that 17 resolutions should be brought forward for discussion and decision at the annual general meeting (AGM). One resolution was withdrawn by its submitter and one was not carried by

the committee. Members are reminded that resolutions can be submitted at any point during a year, up to the deadline. If resolutions are submitted ahead of the deadline date, the committee will review submissions by email and provide feedback to the submitters. This gives submitters more time to have their resolution well-prepared prior to the deadline.

Resolutions coming forward from a member of the association, as an additional new business item prior to the commencement of business at the AGM, will not be accepted. This meets the stipulations in RNAO Policy 6.07(5). Members are encouraged to meet the deadline for submission of resolutions to the AGM. The board of directors has the right to submit a resolution at any time up to the date of the AGM. I would like to thank members of the association for their thoughtful development of the resolutions, as well as the committee members and home office staff for their hard work and dedication.

*Kathleen Pikaart, RN
Chair*

RNAO's board of directors 2020-2021

Morgan Hoffarth	President
Dr. Angela Cooper Brathwaite	Immediate Past-President
Dr. Doris Grinspun	Chief Executive Officer

REGIONAL REPRESENTATIVES

Betty Oldershaw	Region 1
Kristie Butler	Region 2
Nathan Kelly	Region 3
Anita Tsang-Sit	Region 4
Alicia Moonesar	Region 6
Dr. So-Yan Seto	Region 7
Regina Elliott	Region 8
Allison Kern	Region 9
Doris Jenkins	Region 10
Una Ferguson	Region 10 (<i>as of February, 2021</i>)
Liliana Bressan	Region 11
Michael Scarcello	Region 12

INTEREST GROUPS REPRESENTATIVES

Julie Rubel
Maria Rugg

STUDENT REPRESENTATIVE

Rodolfo D. Lastimosa Jr.

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June 2021