



Oct. 4, 2022

Ms. Silvie Crawford
Executive Director and CEO
College of Nurses of Ontario
101 Davenport Rd.
Toronto, ON M5R 3P1

Dear Silvie,

RNAO has reviewed the College of Nurses of Ontario's (CNO) 2022 draft revision of the Code of Conduct (CNO Code). For reasons having to do with both content of the proposed CNO Code and timing of this initiative, RNAO is asking the CNO to pause this consultation and attend to more urgent matters impacting the profession and the health and safety of Ontarians.

Of greatest and most immediate concern is the timing of this consultation. RNAO is certain that the midst of an unparalleled nursing crisis is a poor – and potentially dangerous – time to be telegraphing the CNO's intention to impose additional standards on nurses. The timing of this initiative poses a serious threat to nurse retention and staffing across the health system.

Further, nurses are not positioned to engage meaningfully in a consultation of this nature, as evidenced by two recent reports by RNAO – [Nursing Through Crisis](#) and [Work and Wellbeing](#). Over 75 per cent of nurses report burn out and very significant minorities of survey respondents report functionally compromising levels of depression, anxiety and stress. The health and wellbeing of Ontario's nursing workforce and the retention of nurses in the system should be of immediate and utmost concern to the CNO.

RNAO is asking for an opportunity to meet with you to discuss both this initiative as well as urgent matters affecting the profession. In the interim, we offer you and the CNO Council a brief list of concerns with the proposed revision to the CNO Code:

1. **The CNO Code does not recognize that nurses practice in systems that constrain, shape and determine outcomes**
 - a) A relevant code of conduct for nursing must account for and reflect the realities of practice in complex and hierarchical workplace settings with both interdependent and independent practice roles. For example, the principles must reflect the reality facing most nurses in ways that acknowledge interprofessional practice, role interdependence and team responsibilities and accountabilities. The CNO Code also needs to embody what nurses have repeatedly expressed – that workplace settings are themselves determinants of health and wellbeing. As such, the CNO Code must refrain from imposing on nurses sole responsibility for their own health.
 - b) The CNO Code fails to account for contexts such as the current pandemic, in which unusual practice requirements are determined by those with authority over the practice setting, limiting



nurses' control over their own practices. A regulatory code of conduct must set practice standards that account for unusual circumstances and constraints so that determinations of compliance can be made in the proper context.

- c) Since nurses work as part of interprofessional teams, the expectations related to codes of conduct should have some common areas across regulated professions. RNAO strongly recommends that the CNO work with other regulatory colleges to share and align codes of conduct.

As we reflect on the pandemic and cope with its aftermath, these considerations and actions are clearly needed to identify critical practice and health system challenges and solutions.

2. The CNO is imposing standards in the absence of supporting education and training

The promulgation of any new standards for nursing practice **must** be preceded by the information and education necessary to enable compliance. It is also critical that any standard of practice be accompanied by ongoing supports for those who make best efforts to comply. As evidenced by RNAO's 2022 *Black Nurses Task Force Report*, nursing schools and workplaces have yet to fully incorporate anti-racism and equity perspectives in their curricula. It is, in RNAO's view, both unfair and threatening for the CNO to impose anti-oppression standards of practice on nurses without corresponding anti-oppression education and training.

Silvie, we very much look forward to elaborating on these issues and identifying other concerns with the proposed CNO Code as soon as we are granted a meeting. We have already asked for such a meeting before – specifically related to the need for the CNO to collect race-based data – but have yet to be given one.

In the interim, RNAO urges the CNO to focus its attention on some of the other matters that would better serve nurses – and, by extension, all Ontarians. I point to the following as examples:

- The nursing shortage crisis currently compromising Ontario's health system and the safety of patients
- The health and wellbeing of the nursing workforce
- The backlog of internationally educated nurses (IEN) and the integration of IENs into Ontario's nursing workforce
- The need for the CNO, as recommended on page 39 of RNAO's recent [Black Nurses Task Force Report](#), to collect race-based data and to address issues of anti-Black racism in our profession
- Issues of anti-Indigenous racism in the health system
- The need to expedite RN prescribing and practice education and supports
- Standards of practice for nurse psychotherapy

More broadly, the COVID-19 pandemic has exposed weaknesses in many standards and directives in helping nurses and other health professionals feel in control of, confident about or comfortable with their practice decisions. Our collective experiences and lessons learned **must** inform the development of best regulatory practices, codes and directives – and must be reflected in any new standards. Revising



the CNO Code in advance of such an assessment is procedurally problematic and embeds a large gap in real-life context and experiences.

Sylvie, RNAO is available at all times to help the CNO in pursuit of its mission. At this time, however, it is our strongly-held view that the CNO's mission and RNAO's 50,000 members are ill-served by revisions to the CNO Code. We very much look forward to discussing with you the reasons for our view on this matter and, as ever, to working with you on the issues that need to be addressed urgently to best serve our profession and the people of Ontario.

My office will follow up with a request for an urgent meeting.

Warmest regards,

A handwritten signature in black ink, appearing to read "Doris Grinspun". The signature is fluid and cursive, with a long horizontal stroke extending to the right.

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