



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

Honourable Kathleen Wynne
Premier of Ontario
Room 281
Main Legislative Building
Toronto, ON M7A 1A1

September 24, 2015

Dear Premier Wynne,

The Registered Nurses' Association of Ontario (RNAO) was pleased when last fall, you directed the Minister of Labour to: "develop a wage gap strategy that will close the gap between men and women in the context of the 21st century economy." Given that a year has passed, RNAO requests an update on the status of this strategy and the work of the Steering Committee appointed in April.¹

Our request accompanies a disturbing challenge being experienced in Ontario's community care sector. If the Ministry of Health and Long-Term Care aims to transition more responsibility for delivering care to the community, something RNAO fully supports, it is essential that a sustainable health human resource workforce be in place. Currently, there are approximately 1,950 primary health care nurse practitioners (NPs) in the province, of which approximately 94 per cent are female.² NPs are transforming the way primary care services are offered through North America's first-ever Nurse Practitioner-led clinics and their ongoing clinical leadership in Community Health Centres, Family Health Teams and Aboriginal Health Access Centres. These NPs are breaking down longstanding barriers that have prevented Ontarians from receiving timely access to primary care services. These are initiatives RNAO persuaded government to adopt and together we accomplished great success, becoming role models of progressive human resources policy at home and abroad.

Sadly, there are persistent inequalities in nurse practitioner (NP) compensation and benefits between primary care and other sectors, including hospitals and CCACs. This consistent and continuous discrepancy can be as much as \$20,000.³ In addition, one in five primary care NP positions is vacant.⁴ These vacancies can be attributed to the current primary care compensation structure, which has been stagnant for many years (between five to eight years depending on where they work). Of the NPs that leave primary care, about 50 per cent work in acute care or other sectors.⁵ At the same time, your government reports providing a 68 per cent increase in gross payments to family physicians between 2003/04 and 2013/14.⁶

Premier, RNAO urges you to immediately address the remuneration gap that exists for NPs in primary care by providing the necessary resources to harmonize compensation and benefits with the hospital sector. This is something we have been requesting for several years, including again at the 2015 February QP Day where you and the Minister committed to ensure progress. For RNAO and for NPs in Ontario this is a matter of justice, fairness and NP retention and recruitment. We need NPs if we are to expand the capacity of Ontario's primary care system, allowing it to keep people healthy and avoid costly hospitalizations and emergency department utilization. RNAO further requests an opportunity to contribute to the work of the Steering Committee that is informing the government's strategy to close the wage gap between men and women.

We look forward to hearing from you on these important issues.

Warm regards,



Doris Grinspun, RN, MSN, PhD, LLD(hon), O.O.NT.
Chief Executive Officer
Registered Nurses' Association of Ontario

c. Kevin Flynn – Minister of Labour
Dr. Eric Hoskins – Minister of Health and Long-Term Care

References:

¹ Government of Ontario (2015). Ontario Takes Another Step to Close the Gender Wage Gap. Retrieved from: <http://news.ontario.ca/mol/en/2015/04/ontario-takes-another-step-to-close-the-gender-wage-gap.html>

² Data from the College of Nurses of Ontario Membership Totals at a Glance and Data Query Tool.

³ Nurse practitioners leaving clinics for hospitals, higher pay (2014, April 23). *CBCNews Sudbury*. Retrieved from: <http://www.cbc.ca/news/canada/sudbury/nurse-practitioners-leaving-clinics-for-hospitals-higher-pay-1.2619133>

⁴ Toward a primary care recruitment and retention strategy for Ontario: Compensation structure for Ontario's interprofessional primary care organizations (June 2013). *AFHTO/NPAO/AOHC*. Retrieved from: <http://www.afhto.ca/wp-content/uploads/PC-Retention-and-Recruitment-Compensation-Structure-for-IPCOs-Report-to-MOHLTC-June-2013.pdf>

⁵ Association of Family Health Teams of Ontario, Association of Ontario Health Centres., Nurse Practitioners' Association of Ontario. (2013). Toward a Primary Care Recruitment and Retention Strategy for Ontario: Compensation Structure for Ontario's Interprofessional Primary Care Organizations. Retrieved from: <http://www.afhto.ca/wp-content/uploads/PC-Retention-and-Recruitment-Compensation-Structure-for-IPCOs-Report-to-MOHLTC-June-2013.pdf>

⁶ Government of Ontario (2015). Physician Services: Ten-Point Plan for Saving and Improving Services. Retrieved from: <http://news.ontario.ca/mohlhc/en/2015/01/physician-services-ten-point-plan-for-saving-and-improving-service.html>