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Mission and values



MORGAN HOFFARTH RN, MScN, RNAO President



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

Message from RNAO's president and chief executive officer

Our theme for this year's annual general meeting (AGM) is *Nursing Through Crisis*. It highlights how an expert and compassionate group of professionals – nurses – carried on with unwavering commitment through yet another three waves of this relentless and intense pandemic. Yet, the price paid by nurses with their own health has been high.

The nursing profession is in crisis, and the instability in the profession requires an urgent response. Once again, RNAO has turned a challenge into an opportunity. An opportunity to rebuild the RN workforce so that, today and tomorrow, Ontarians have the care they deserve and the health system to serve them.

RNAO's groundbreaking report – <u>Nursing Through Crisis</u>, released during Nursing Week 2022 – exposed how the pandemic deepened a nursing crisis that was already in the making. We entered the pandemic with a shortfall of 22,000 RNs in Ontario. The length and intensity of the pandemic has tested nurses like at no other time in recent history. We witnessed this through the experiences, stories and challenges that you shared with us.

Building on our <u>Work and Wellbeing Survey Results</u> report, issued in March 2021, *Nursing Through Crisis* surveyed the health and wellbeing of more than 5,200 nurses from across Canada during COVID-19's third wave. The alarming results are a clarion call for government, employers, educators and associations. We must work together to retain the RNs and NPs we have, attract people into the profession and address workload concerns. We also must provide mentorship, professional development opportunities and effective leadership. RNAO, with a distinguished history of member mobilization, professional programs and policy work, is rising to the challenge once again.

Despite COVID-19, RNAO continued its influential policy, membership and clinical work. We are innovating how we do our work. We are capturing and organizing the depth, breadth and richness of what we do through a new feature called In Focus. Like the layout of this annual report, it strives to present our work in a cohesive, integrated and user-friendly way on our website. Three layers serve as the foundation for In Focus: health equity, health system transformation and leading change. Each area of focus explores the history or impetus for the work in the area, the role of members leading this work, partnerships, policy and capacity building. We also track the exposure our work generates in mainstream media and on social media.

Under the first layer – health equity – we highlight collective work involving two key populations: Black nurses and Indigenous communities. A third theme dedicated to 2SLGBTQI+ communities will debut later this month during Pride festivities.

A focal point is the release of our Black Nurses Task Force report released this past February. <u>Acknowledging, Addressing and Tackling Anti-Black Racism and Discrimination Within the Nursing Profession</u> is a roadmap for change. This work, profiled in the <u>Black Nurses and RNAO</u> In Focus page, carries on through RNAO's recently launched <u>Black Nurses Leading Change Interest Group</u> and other significant events and milestones.

RNAO's advocacy with Indigenous organizations is profiled in the <u>Indigenous Health and RNAO</u> In Focus page. We seek better access to quality health services working in partnership with Indigenous-focused Best Practice Spotlight Organizations (BPSO) and RNAO's newly launched Indigenous Nurses and Allies Interest Group.

The second layer reflects RNAO's efforts so that health system transformation meets the needs of patients, residents and communities at large. We must expand the scope of practice of RNs, clinical nurse specialists and nurse practitioners to reflect their competencies and expertise, meet the care needs of Ontarians and ensure an effective health system. We address the needs of nurses who have borne the brunt of the pandemic. RNAO demands changes in long-term care so residents and staff never experience such a devastation again. We dedicate our efforts to the families who lost loved ones due to the pandemic.

RNAO and its members are change agents, and our third In Focus layer showcases this role. We lead change by mobilizing nurses and others, through exceptional policy and political action, and by powering changes in policy and practice. We update our work on our renowned Best Practice Guidelines (BPG) program and our expanded global network of BPSOs. Our clinical work is growing by leaps and bounds. We are honoured with the release of the first ever Indigenous - focused BPG on <u>Promoting Smoking Reduction and Cessation with Indigenous Peoples of Reproductive Age and Their Communities</u>.

Another highlight is our <u>Leading Change Toolkit</u>[™], a powerful tool to improve health outcomes. Released last October, the toolkit is optimizing implementation and sustainability of our BPGs through the use of two frameworks: Social Movement Action and Knowledge-to-Action. It is inspiring robust staff engagement and creating lasting change in health organizations. We thank the team of international experts and our partnership with Healthcare Excellence Canada for this seminal resource.

Sprinkled through this annual report you will find examples of media coverage and social media engagement, which amplify our voice on key nursing and health priorities. The numbers speak for themselves. We had 4,918 media hits over the past year. And, we have 25,580 followers on Twitter, 23,260 on Facebook, and 9,156 on Instagram.

We are proud of and energized by the accomplishments! The nursing profession has cared for Ontarians through six pandemic waves – and RNAO has stood by each of our colleagues. We are confident that the profession, joined in solidarity, will emerge stronger than ever from this crisis.

On behalf of RNAO's board of directors, our assembly of leaders and RNAO staff members, we thank you deeply for your membership. You demonstrate time and again your devotion to the profession and your resolve to provide the best possible care to Ontarians and the community. We stand with you and for you, today and always!

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Achieving equity in health means confronting and eliminating the differences that we know are unfair and unjust, and making sure that everyone has the opportunity to be as healthy as possible. It means barriers do not stand in the way of access to care. It means nurses and nursing students do not face obstacles or suffer stigma, discrimination or racism in their education or practice, and can reach their full potential. Many factors cause health inequity: race, gender, sexual orientation and gender identity, income, education, religion – even our physical environment. RNAO's work to address inequity, informed by our values of human dignity, diversity, inclusivity, fairness and respect, is more than the "right thing to do". It also leads to a more effective and efficient health system because a healthier population requires less care and allows everyone – including nurses harmed by ignorance and stigma – to contribute fully to society.

hhealth equity transformatige leading charge

During a virtual media conference on Feb. 8, 2022, the co-chairs of RNAO's Black Nurses Task Force, Past President Dr. Angela Cooper Brathwaite (top) and NP Corsita Garraway, released the BNTF's report, Acknowledging, Addressing and Tackling Anti-Black Racism and Discrimination Within the Nursing Profession.

Black nurses and RNAO

RNAO and our members remain committed to addressing and tackling the systemic anti-Black racism so deeply ingrained in our profession and health system and its structures, including workplace settings, academic institutions, and all nursing organizations. Over the past year, our work on this has included researching, writing and issuing a comprehensive report on anti-Black racism in nursing, approving a new interest group for Black nurses and creating a dedicated space on the RNAO website to showcase and update our work with Black nurses.





Black Nurses Task Force

On Feb. 8, 2022, RNAO's Black Nurses Task Force (BNTF), led by RNAO past president Angela Cooper Brathwaite and NP Corsita Garraway, released a <u>groundbreaking report</u> on anti-Black racism and discrimination within the nursing profession. The report, announced during Black History Month, highlights the BNTF's key activities to lead change and their recommendations for action, and includes significant findings from their province-wide survey of 205 Black nurses.

88%

reported facing racism and discrimination in their work

Eighty-eight per cent of respondents reported facing racism and discrimination in their work. Sixty-three per cent also said racism had taken a toll on their mental health, creating increased stress, depression and anxiety.

Based on the survey results, the BNTF developed and shared 19 priority recommendations to tackle structural racism within nursing organizations, regulatory bodies and the broader health system. The report also outlines and fleshes out the four main pillars the task force has identified for its work since it mobilized in June 2020: education and awareness building, research, advocacy and partnership with allies and stakeholders.

The BNTF's findings and recommendations reveal several important implications for nursing educators, health-care and academic organizations, stakeholders and policy makers. RNAO will continue to push for implementation of these recommendations and to demand decisive action from nursing organizations and other Ontario institutions.

#BNTFreport



THE SHIFT - RECOMMENDATIONS TO COMBAT ANTI-BLACK RACISM IN THE NURSING INDUSTRY

learn more

THE SHIFT WITH PATTY HANDYSIDES Feb. 9, 2022



ANTI-BLACK RACISM 'DEEPLY ENTRENCHED' IN NURSING, SAYS NEW REPORT CALLING FOR IMMEDIATE ACTION learn more

Shanifa Nasser · CBC News Feb. 8, 2022

RNAO @RNAO · Feb 9, 2022

"Black nurses are underrepresented in leadership roles."

Our CEO @DorisGrinspun and Black Nurses Task Force co-chairs @ angelacooperbra and @calinago spoke on @CP24 about the #BNTFreport and the anti-Black racism in the nursing profession. #onpoli



RACISM IS HAVING A
DEVASTATING IMPACT ON
THE LIVES OF BLACK NURSES learn more

ANGELA COOPER BRATHWAITE, CORSITA GARRAWAY AND DORIS GRINSPUN THE GLOBE AND MAIL - OP ED

Feb. 21, 2022

Black Nurses Leading Change Interest Group







In July 2021, RNAO's board of directors approved the application of the <u>Black Nurses Leading Change (BNLC)</u> interest group. Co-chaired by Daria Adèle Juüdi-Hope (above left) and Dania Versailles (above right), who were also members of the BNTF, the interest group's mission is to support the work of the task force and advocate for the professional advancement of Black nurses. The interest group also offers mentorship and continuing education and helps inform RNAO staff and members on issues affecting Black nurses and nursing students. All Black nurses, nursing students and their allies are welcome to join the interest group and interact with each other. You can learn more about BNLC by reading our <u>RNJ</u> article, or join the group through our <u>interest group page</u>.

Black nurses and RNAO In Focus

The main image on the Black Nurses and RNAO In Focus theme page features members of the Black Nurses Task Force. The centre of the image features prominent Black nurses who served as RNAO president, including (left to right) Dr. Angela Cooper Brathwaite, Dr. Jocelyn Hezekiah, Dr. Joan Lesmond and incoming President Dr. Claudette Holloway.



In February 2022, RNAO launched a new In Focus theme page dedicated to our work on anti-Black racism. <u>Black nurses and RNAO</u> provides a roadmap to our rich collective work, its history and the leadership of outstanding Black nurses such as past presidents Dr. Jocelyn Hezekiah, the late Dr. Joan Lesmond, Dr. Cooper Brathwaite and RNAO President-Elect Dr. Claudette Holloway, who also served as a BNTF member. Frequent updates will ensure it captures our <u>ongoing</u> <u>commitment to working with Black nurses</u> to achieve equity in our profession through our policy and capacity-building efforts, partnerships and media engagement.

We hope that our In Focus theme dedicated to Black nurses and RNAO inspires members and other site visitors to explore our collective work by easily accessing information about our action on anti-Black racism, providing feedback on it and collaborating with us. We know that it will help all reflect on what we are doing well and identify learning opportunities and future partnerships.

h**health equity** transformatige leading charge

Indigenous health and RNAO













Canada's shameful legacy of Indigenous residential schools was thrust back into the spotlight this past year with the discovery of remains at the site of a former school in British Columbia. News of more sites followed, prompting a national outcry. In response, RNAO called on the federal government to support and fund the 94 calls to action in the Truth and Reconciliation Commission's (TRC) 2015 report in a timelier way to properly address the impact of trauma and discrimination on the health and wellbeing of Indigenous peoples.

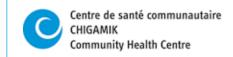
RNAO has a history of working with and advocating alongside Indigenous communities. These collaborations are essential to addressing Indigenous health and making progress on reconciliation. Over the past year, RNAO's <u>Indigenous Health Program</u> has continued to strengthen meaningful partnerships with Indigenous-focused <u>Best Practice Spotlight Organizations®</u> (BPSO) and the <u>Indigenous Nurses' and Allies Interest Group (INAIG)</u>, as well as guest speakers and planning committee members of a webinar series on traditional teachings.

Each Indigenous-focused BPSO has successfully woven the implementation of select RNAO best practice guidelines (BPG) together with Indigenous wise practices. And they have all leveraged their work and accomplishments over the past three years to better support client and community challenges exacerbated by the pandemic. For example, the community relationships and networks established by the Sandy Lake First Nation BPSO team when implementing the *Person- and Family-Centred Care* BPG have been invaluable in supporting vaccine clinics and contract tracing in the community. Seventh Generation Midwives Toronto, Ontario Native Women's Association, Chigamik Community Health Centre, Mamaway Wiidokdaadwin and Anishnawbe Mushkiki have also shown impressive commitment to their local community members by offering vaccine clinics and continuing with essential services in areas aligned with BPSO work such as substance use and mental health. Examples of this work include screening and supports for perinatal depression and woman abuse.

Pandemic-related pressures have also prompted Indigenous-focused BPSOs to prioritize setting up community-centered approaches to BPSO work, including partnerships with interdisciplinary staff, Elders, Knowledge Keepers and community members. This year, RNAO is excited to welcome and walk together on health promotion journeys with three new Indigenous-focused BPSOs, including the Southwest Ontario Aboriginal Health Access Centre (Chippewa site), Shibogama First Nations Council and Maamweysing North Shore Community Health Services Inc.

RNAO's traditional teachings webinar series continues to introduce health-care providers to a growing network of guest speakers, who have broadened a collective awareness and understanding of holistic wellness. For example, a 2022 webinar on <u>Indigenous foodways to sustain wellness</u> attracted hundreds of participants interested in learning more about the role of food as medicine. This series will continue to offer cultural teachings through the formidable voices of Indigenous peoples.





Every One Matters. Chaque personne compte.



RNAO staff member and former chair of the Indigenous Nurses and Allies Interest Group, Rachel Radyk (left), and members of the RNAO Indigenous health webinar planning committee. The comprehensive work that RNAO is engaged in with Indigenous partners can be found on the In Focus theme page dedicated to <u>Indigenous health and RNAO</u>. You can read RNAO's position statement on the tragedy in residential schools and find information about Indigenous-focused webinars. You can also learn more about the Indigenous-focused BPSOs and their work.





Indigenous Nurses and Allies Interest Group

In 2021, RNAO announced the creation of a new interest group: the Indigenous Nurses and Allies Interest Group (INAIG). Its mission is to advocate for nursing practice that follows the TRC's calls to action, fosters environments free of racism and anti-Indigenous discrimination and promotes culturallysafe health care. In 2022, INAIG welcomed Victoria Guido to the role of chair. She replaced INAIG's former chair, Rachel Radyk, who continues to broaden her sphere of influence through her work on the RNAO staff team as program manager of Indigenous health. You can learn more about INAIG by visiting their interest group page. RNAO looks forward to the continued contributions of INAIG's membership to Indigenous-focused nursing practice and policy priorities. Indigenous nurses and allies are welcome to join the interest group and interact with each other to support the TRC's calls to action, Indigenous communities and their allies in health care.



INAIG@INAIG_RNAO · Oct. 5, 2021

We welcome you to join our Interest Group for FREE (RNs and students). More news and events to come! Miigwetch @RNAO

Staff education day

On Sept. 30, 2021, RNAO's Indigenous Cultural Safety and Humility Working Group marked Canada's first National Day for Truth and Reconciliation by hosting a half-day staff education event on reconciliation and on the work RNAO is doing with Indigenous health partners. RNAO recognizes that any work to improve health outcomes for Indigenous peoples must be backed up by a commitment to doing our own internal work of reconciliation and decolonization. Educating staff about the effects of colonization and resulting trauma and stigma on Indigenous health outcomes is key to this work.

The day included an informational session about the history of residential schools and the TRC's specific <u>calls</u> to action #18 through #24 related to health care. Staff leading work with Indigenous health partners also shared updates on their work, which included an <u>Indigenous-focused webinar series</u> and the creation of Indigenous-focused BPGs. And RNAO staff member Maureen Norton (pictured below), a member of Beausoleil First Nation, graciously led staff in a mindfulness activity and a demonstration of how to make fry bread – a food popular across many Indigenous cultures. Staff also provided suggestions on how they could decolonize their own work and contribute meaningfully to RNAO's Indigenous health portfolio.

The Indigenous Cultural Safety and Humility Working Group, which consists of both members who identify as Indigenous and non-Indigenous allies, continues to discuss further programming and other ways to engage RNAO staff on reconciliation work.



RNAO staff share their completed colouring sheets during the education session, selected from a colouring book assembled by the Woodland Cultural Centre in Brantford.



hhealth equity transformation leading charge

2SLGBTQI+

In addition to marking Canada's National Indigenous History month and Indigenous People's Day, June also ushers in an exciting month for our 2SLGBTQI+ colleagues and community – Pride Month. We look forward to celebrating Toronto's Pride Parade in person this year, after a two-year hiatus in which Pride events could only take place online due to the pandemic. RNAO members will also celebrate the spirit of Pride Month at other events around the province.



Dr. Paul-André Gauthier, president of RNAO's Rainbow Nursing Interest Group, introduces RNAO's position statement on respecting sexually and gender diverse communities during a virtual media conference held on the final day of RNAO's 96th AGM in 2021.

As part of marking this month, RNAO will unveil our new 2SLGBTQI+ In Focus theme. The page will provide a one-stop shop to learn more about RNAO partnerships that advance equity for 2SLGBTQI+ nurses, other health workers and the community at large. Also included will be the excellent work of RNAO's <u>Rainbow Nurses Interest Group (RNIG)</u> and capacity-building work. And, like our other <u>In Focus themes for other health equity-seeking communities</u> launched during the past year, the In Focus page will be regularly updated to bring you the latest RNAO news and initiatives focused on improving the wellbeing and health care experiences for 2SLGBTQI+ nurses and communities.

The new In Focus page will also showcase policy developments related to 2SLGBTQI+ health equity and RNAO's initiatives and work in response. In June 2021, for example, RNAO published a <u>new position statement on 2SLGBTQI+ health equity</u>. The association also continues to monitor the progress of relevant legislation such as <u>Bill 17</u>, the Gender Affirming Health Care Advisory Committee Act, 2021.

Expert panel co-chairs of the *Promoting* 2SLGBTQI+ Health Equity BPG RN Sheena Howard (right) and Dr. Elizabeth M. Saewyc (left). The BPG includes 10 evidence-based recommendations in five broad areas to improve health access, safety and equity for 2SLGBTQI+ communities.



If you have not yet read it, make sure to check our winter 2022 issue of RNJ which featured a <u>compelling article</u> on how lived experiences informed both the need for and content of RNAO's groundbreaking and first-of-its-kind best practice guideline – <u>Promoting 2SLGBTQI+ Health Equity</u> – issued at RNAO's 2021 annual general meeting.

health system transformation calls

RNAO member and RN Sepelene Deonarine worked at a COVID-19 immunization clinic in Durham Region in February 2022 to support Ontario's vaccination efforts.

RNAO envisions health system transformation that places primary care as the anchor of the system.

Every Ontarian should have a primary care provider and access to health services around the clock when required. This is the vision outlined in the third edition of RNAO's Enhancing **Community Care for Ontarians report** (ECCO 3.0) released in May 2020, during the pandemic's first wave. Since then, the flaws in our health system have become even more apparent: overreliance on hospitals, underutilization of primary and community care, and failing to meet the needs of vulnerable residents in longterm care (LTC). True health system transformation is possible. It requires RNs and NPs working to their full scope of practice in all sectors and settings. It also requires active supports to ensure nurses' health and wellbeing. And, it necessitates investments in community care and in LTC so older persons receive dignified quality care.

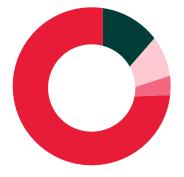


Nursing Through Crisis

During the past year we have not wavered from this vision. We have advanced the knowledge and skills of RNs and NPs through capacity building and best practice guidelines. Against us, and indeed against Ontarians, is an unstable workforce that profoundly impacts on the future of nursing, the functioning of the health system, the quality of care Ontarians receive and their health and clinical outcomes.

New survey results detailed in RNAO's groundbreaking report <u>Nursing Through Crisis: A Comparative Perspective</u> highlight the instability in nursing. More than 5,200 nurses from across Canada, the majority in Ontario, responded to the RNAO survey from May to July 2021 during the height of the pandemic's third wave. The results are shocking and sobering, and present an urgent call to action for the government, health employers, educators and nursing associations. Three findings, in particular, demand immediate attention:

- More than 75 per cent of nurses who responded to the survey were classified as "burned out".
- Sixty-nine (69) per cent of nurses said they planned to leave their position within five years.
- Of those who said they planned to leave their position, 42 per cent said they were planning to leave the profession altogether or retire.



11.4%

Not exhausted and not disengaged

8.6%

Exhausted

4.6%Disengaged

• 75.3% Burned out

29.4%

Plan to retire

12.6%

Plan to leave the profession for another field

25.7%

Undecided

32.3%

Plan to stay in nursing

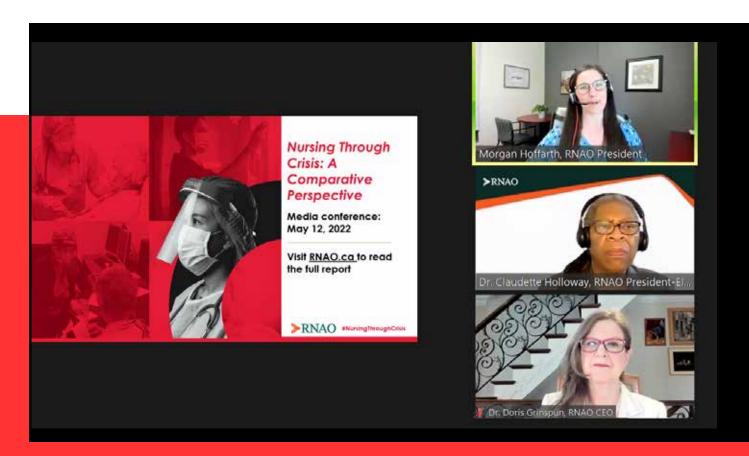
Of the 69 per cent of nurses who plan to leave their positions in the next five years, 42 per cent plan to leave the nursing profession altogether, whether by retiring or seeking employment in a field other than nursing.

These results and others are even more alarming when you consider that Ontario entered the pandemic with a shortfall of 22,000 RNs on a per-capita basis compared to the rest of Canada. RNAO's report shows

that heightened and sustained efforts are urgently needed to retain RNs and attract people to the profession. The clear need identified by RNAO to rebuild the RN workforce is backed by the Ontario Hospital Association, Ontario's Long-Term Care COVID-19 Commission, Colleges Ontario and the Council of Ontario Universities.

The report outlines a key recommendation for the government: repeal Bill 124. The wage restraint legislation has led to an exodus of nurses. Also key is expediting applications for the 26,000 internationally educated nurses (14,000 of them estimated to be RNs) who live in Ontario and are eager to practise in their chosen profession. Other important recommendations include: increasing spots in nursing programs, expanding existing retention and recruitment programs such as the Nursing Graduate Guarantee and the Late Career Nurse Initiative, striking a nursing task force to address retention and recruitment, and developing and funding a Return to Nursing Now program to attract nurses who have chosen to leave the profession. Immediately implementing these recommendations is crucial because without nurses, Ontario's health system cannot function and Ontarians suffer.

RNAO is not waiting for others to act. To promote better workplace supports and more professional development opportunities for nurses, the association launched four initiatives during Nursing Week 2022: an expanded version of our <u>Advanced Clinical Practice Fellowship program</u>, a <u>Nursing Student Preceptor for Long-Term Care program</u>, a Leadership and Management for Nurses program and a Mentorship for Nurses program.



On May 12, International Nurses Day, RNAO President Morgan Hoffarth (top), President-Elect Dr. Claudette Holloway (middle) and CEO Dr. Doris Grinspun (bottom) held a virtual media conference to release RNAO's Nursing Through Crisis: A Comparative Perspective report.

#burnout



RNAO @RNAO · Jul. 26, 2021

On @CBCNews, RNAO member Denise Jeffery says #COVID19 burnout is causing nurses to leave the profession: "We're feeling pretty overloaded, pretty overburdened."

#NursesVoicesMatter

learn more



OVER 75% OF CANADIAN NURSES BURNT OUT, RNAO SURVEY FINDS learn more

May 12, 2022

TORONTO STAR

'NURSES ARE THE FRONT LINE
OF EVERYTHING': PANDEMIC
TOLL HAS NURSES SEEKING
COUNSELLING MORE THAN
OTHERS IN HEALTH CARE learn more

Feb. 13, 2022



RNAO REPORTING HIGHER
WORKLOADS, STRESSES
AMONG NURSES DURING THIRD
PANDEMIC WAVE learn more

May 12, 2022



FOCUS

During the past year, we have shared <u>new In Focus themes</u> related to health system transformation as new features on our website. In Focus highlights RNAO's array of professional development offerings, educational opportunities, programs, resources and partnerships. Each theme provides a one-stop shop to learn more about RNAO's work, curated by topic. We will update RNAO In Focus regularly with new programs and resources as they become available. Our four new health system transformation themes:

In Focus – Nurses' health and wellbeing and RNAO

In Focus – Registered Nurses, Clinical Nurse Specialists and RNAO

In Focus – Nurse Practitioners and RNAO

In Focus – LTC Best Practices Program and RNAO

In Focus – Nurses' health and wellbeing and RNAO



This theme page demonstrates our commitment to working with nurses always – and especially in times of crisis – to develop solutions and strategies to support their health and wellbeing. It features new programs such as the four new 2022 initiatives mentioned earlier. It profiles members leading change to support nurses. It lists partnerships RNAO has set up and engagement opportunities to publicly recognize nurses. It includes our Nursing Week portal and National NP Week, and ways you can honour a colleague for their commitment to the profession. And, it links to our Nursing Through Crisis report.

Also included in this theme page are the <u>Nursing Now Ontario</u> <u>Awards</u> which profile excellence and leadership in nursing. These awards are presented each year on May 12, International Nurses Day, by RNAO, the Ontario Nurses' Association (ONA) and the Registered Practical Nurses Association of Ontario (WePRN). This year's winners are: NP Guangxia Meng (left), who works at Southlake Regional Health Centre in Newmarket; RN Marisa Bannavong (middle), who works at Toronto's Yonge Street Mission; and RPN Becki Lee (right), who works at the Village of Riverside Glen LTC home in Guelph. Congratulations to these outstanding nurses!







In Focus – Registered Nurses, Clinical Nurse Specialists and RNAO



The main image on the Registered Nurses, Clinical Nurse Specialists and RNAO In Focus theme page features RNAO members and RNs (left to right) Birgit Umaigba, Eram Chhogala and Roxie Danielson.



This theme page showcases the association's collective work and sustained focus on advancing the RN and CNS roles. RNs led the development of RNAO nearly 100 years ago, and have since helped RNAO expand and evolve. RNAO's members lead change, and our wide array of interest groups represent nurses across the care continuum and their engagement in specialty groups as well as on social and environmental determinants of health.

RNAO's policy work over the past year, reflected through this In Focus theme, advocates for health human resource solutions to the RN shortfall in Ontario. Examples include our 2022 provincial platform and our RN Understaffing Crisis political action bulletin. Sharing RNAO's policy resources, Action Alerts, and signature policy events in a dedicated space helps nurses become involved in political advocacy and engage with government officials.



NURSE PSYCHOTHERAPIST PATIENTS DENIED COVERAGE

RNAO MEMBER AND RN TARA TOURLOUKIS IS MENTIONED IN THIS STORY. <u>learn more</u>

Feb. 13, 2022



THIS INITIATIVE IS OPENING DOORS FOR HUNDREDS OF ONTARIO'S INTERNATIONALLY-EDUCATED NURSES RNAO MEMBER AND RN CHANDRA KAFLE IS FEATURED IN THIS STORY. <u>learn more</u>

Feb. 13, 2022

In Focus – Nurse Practitioners and RNAO





This theme page illustrates RNAO's dynamic advocacy powering NPs to work to their full scope of practice. NPs help address health system inequities and obstacles in accessing health care, a persistent problem for Ontarians. We feature information about monthly educational webinars provided by RNAO in collaboration with the Nurse Practitioner Interest Group (NPIG) and the LTC Council. RNAO's NP position statement – a key advocacy tool for NPs released in November 2021, and news about the expansion of three NP-led clinics are also included. This In Focus theme contains updates from regular forums where NPs can identify and share practice needs and role barriers, including RNAO's annual NP Knowledge Exchange Symposium and the NP Institute described more fully below.



(Left to right) Ottawa NPs Sara Perron, Leslie Dewsnap, Kate McNaughton and Cynthia Kitson began providing primary care from a new mobile clinic van in December 2019.

RNAO's NP membership, now nearing 2,000 nurses, is growing. During the past year, the association continued to work on producing training and resources for NPs and advocating on their behalf – with impressive results. Key events and work for NPs in the past year included:

National NP Week - November 2021

RNAO paid tribute to NPs during National NP Week (Nov. 7-13, 2021) by highlighting their critical role and the need to expand their scope of practice to improve access to health services, especially for marginalized populations. To mark the week-long celebration, RNAO created a poster and released a series of NP videos. In its fall economic statement released on Nov. 4, 2021, the Ontario government committed funding to hire 225 NPs over three years, beginning with 75 attending NP positions in 2022-2023, to advance safe and quality care in LTC homes. This was in direct response to RNAO's persistent and compelling evidence-based advocacy. Another demonstration of RNAO's effective advocacy on behalf of NPs: as of July 1, 2022, NPs will be able to order MRIs and CT scans, helping decrease health inequities and improving access to health care for all Ontarians.

#NursePractitionerWeek





RNAO@RNAO · Nov. 11, 2021

This week's episode of #SmallTalk features nurse practitioner (#NP) Beth Sweeney and NP student Heather Fielding!

Hear them speak about National #NursePractitionerWeek and the vital role NPs play in our health systems.

learn more



Angela Cooper Brathwaite@angelacooperbra · Nov. 11, 2021

To all those NPs, we @RNAO wish you a Happy NP Day! You deserve the best. Your contributions to Nursing & Healthcare are acknowledge!

@jrubel21 @LhamoDolkar1 @DorisGrinspun @anitatsangsit @MorganHoffarth @AliciaM26421973 @ClaudetteHollow @npig_rnao @lBajnok @sweeney_np @uferguso

NP Institute - April 2022

RNAO hosted its annual NP Institute on April 21, 2022 in collaboration with NPIG. The all-day virtual event focused on the theme "Powering NP Vision for Tomorrow: Igniting Your Practice" and featured dynamic speakers from Ontario, across Canada, and internationally. More than 250 participants took part in sessions on influencing change, NP-led research and quality improvement initiatives.



NP Beth Sweeney (left) moderated the annual NP Institute, held virtually by RNAO in collaboration with NPIG on April 21, 2022. Below are some of the event participants, who took part in interactive sessions throughout the day focused on "Powering NP Vision for Tomorrow: Igniting Your Practice."



In Focus – LTC Best Practices Program and RNAO





(Left to right) Cathy Luke, RN and director of nursing at LTC BPSO Idlewyld Manor, with resident Sophie Lazowski.

LTC and health system transformation

Caring for Ontario seniors is our collective responsibility as a society. RNAO has been steadfast in its determination to ensure we uphold that responsibility. LTC residents should be treated with dignity and receive safe, high-quality care delivered by an appropriate mix of RNs, RPNs, NPs and personal support workers. The catastrophe that unfolded in LTC homes all over the world during the pandemic is unconscionable. As of June 5, 2022, more than 4,400 nursing home residents in Ontario and 13 LTC staff had lost their lives to COVID-19. This should never have happened. This cannot happen ever again.

The LTC Best Practices Program (BPP) continues to set the gold standard for resident care in the province. Our team of experienced LTC best practice coordinators help improve the knowledge, skills and practices of dedicated staff and management in Ontario nursing homes.

In May 2022, the LTC BPP launched the <u>Nursing Student and Preceptor Long-Term Care program</u> to support students and preceptors in LTC, develop positive student learning experiences and promote the leadership role of preceptors as knowledge leaders. The web-based <u>program</u> provides resources to enrich the placement experience for nursing students.

Our In Focus LTC theme helps you track our work and accomplishments. For example, in March 2022, the LTC BPP launched a new provincial community of practice to help homes implement the *Person- and Family-Centred Care (PFCC)* guideline and to connect nurses doing similar work across Ontario. A four-part webinar series helps LTC staff to learn about implementing different guidelines. RNAO's LTC coordinators approach each home that registers to encourage regular meetings of the community of practice to support the implementation of BPGs and build community.

Clinical Pathways

Our new BPG Clinical Pathways for LTC homes offers evidence-based implementation tools to ensure safe, high-quality resident care. This digitized version of RNAO's LTC-focused BPGs was prepared in partnership with PointClickCare (PCC), the leading vendor of electronic medical record systems for the LTC sector. Launched in April 2022 and available to all LTC homes across the province using the PCC system, BPG Clinical Pathways help improve staff efficiency and retention.

(Left to right) Tammy Weir, RN and director of nursing at LTC BPSO designate St. Peter's Residence at Chedoke, with resident Elizabeth Wharton.



Comer Radio FIGHT BACK WITH LIBBY ZNAIMER PROVINCE TO HIRE ADDITIONAL INSPECTORS FOR LONG-TERM CARE learn more Oct. 27, 2021

heafth system transformatige chains

RNAO member and RN Denika McPherson works in acute care in a hospital in the Greater Toronto Area.

Two words best describe RNAO and our members: "leading change". We do this every single day. RNAO leads change in policy by developing and delivering evidence-based reports, position statements and platforms. And we lead change in clinical practice through evidence-based guidelines. While all these robust resources are central to delivering positive change, it is members and others who collectively mobilize to speak out for nursing and speak out for health.

The change RNAO members lead is active. We make a difference by advancing healthy public policy and practice excellence to improve health outcomes for all. We aspire to build a just society that values and advocates for everyone – especially vulnerable populations – so everyone can reach their full potential.

RNAO leads change



We mobilize for positive change with tools such as RNAO's <u>Action Alerts</u> (AA). Over 30,000 responded to 12 AAs this past year. Issues included repealing Bill 124, mandating vaccines for all health-care and education workers and addressing the climate emergency. Our assembly of leaders and other members engage directly with members of the legislature in three signature RNAO events: <u>Queen's Park on the Road</u>, <u>Take Your MPP To Work</u>, and <u>Queen's Park Day</u>. This past year, 778 members participated in these events and policy and political action network (PPAN) meetings – and more than 50 MPPs joined us.

We also lead change through our clinical work with our internationally-renowned <u>Best Practice Guidelines (BPG) program</u>, our network of <u>Best Practice Spotlight Organizations® (BPSO)</u> at home and abroad, our BPG champions and a new edition of our <u>Leading Change Toolkit™</u>. This year we launched seven new BPSO Directs in all sectors and settings. We added 12 BPSOs in Chile, launched a BPSO Host in Colombia and welcomed Switzerland to our roster of international BPSOs.





Membership

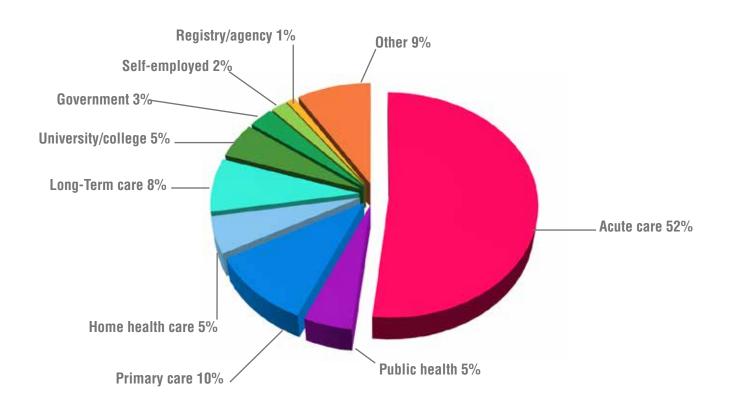
RNAO has reached a new membership milestone: 48,500! That's 48,500 RNs, NPs and nursing students combining forces to mobilize collective action. Together, we keep the government and opposition parties accountable for their commitments to the profession, the health of Ontarians and the health system.

48,500 RNs, NPs and nursing students speaking out for nursing and speaking out for health

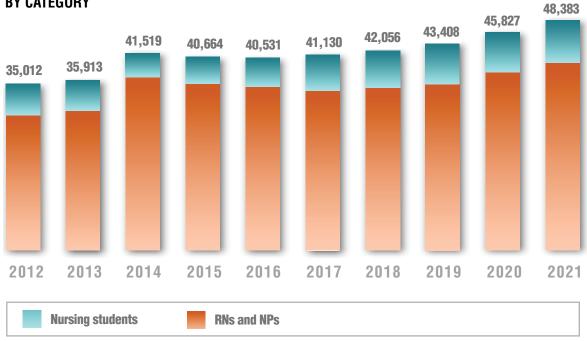
Nurses – and especially RNAO members – remain committed to Ontarians and to one another, working in communities right across the province, and in every sector and domain of nursing. Members are active in their local chapters and regions, and many belong to one or more of our 30+ interest groups. This collective strength is the reason RNAO is the go-to source for media interviews and policy responses on health care in Ontario, informed by our clinical work partnerships with other health, social, justice and environmental associations and groups.

"Relevance" is a key factor on why people belong to professional associations nowadays. With membership growth at 5.6 per cent in both 2020 and 2021 – during a pandemic that has greatly taxed nurses – RNAO has received a continued vote of confidence from Ontario's RNs, NPs and nursing students.











Membership numbers for new graduates and undergraduate nursing students were the highest in the last three years in RNAO's history. This is a promising sign for the future of nursing and RNAO.

Celebrating politics as a career choice in nursing with RN and NP candidates



RNAO co-hosts all party debate on climate action

Several RNs ran for office in the 2022 provincial election, representing the four main political parties. During Nursing Week, five RN candidates joined RNAO's webinar as panelists to discuss politics as a career choice, including (clockwise from top left) Angela Kennedy, Fiona Jager, Marjan Kasirlou, Sarah Walji and Tyler Watt. RN MPPs who could not join RNAO's session were MPP Natalia Kusendova and MPP Laurie Scott. RNs Aisha Jahangir and Soo Wong, a former MPP, also ran in the recent election.



On April 19, 2022, RNAO and the Ontario chapter of the Canadian Association of Physicians for the Environment co-hosted an all-party virtual debate focused on health and justice in a climate emergency. Moderated by Dan Riskin, former co-host of Daily Planet (top right), representatives from three Ontario political parties shared their party's positions on specific environmental issues with more than 170 participants. Clockwise from top left: Peter Tabuns, MPP for Toronto-Danforth and New Democratic Party critic for climate crisis and emergency; Riskin; Katie Gibbs, Liberal party candidate for Ottawa Centre; and Dr. Dianne Saxe, Green Party deputy leader. The Progressive Conservative party declined RNAO's invitation to participate.

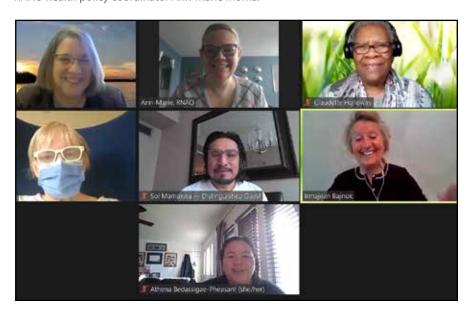
QPOR

During Queen's Park on the Road, RNAO members met virtually with MPPs to discuss our political action bulletin - RN Understaffing Crisis: Impact and Solution.





During a virtual Queen's Park on the Road (QPOR) meeting on Nov. 26, 2021, MPP and Minister of Legislative Affairs and Long-Term Care Paul Calandra (bottom right) met with (clockwise from bottom left) RNAO President Morgan Hoffarth, Region 7 representative Erin McPherson and RNAO health policy coordinator Ann-Marie Morris.



On Nov. 15, 2021, NDP MPP Sol Mamakwa (centre) participated in RNAO's QPOR on alongside his assistant Athena Bedassigae-Pheasant (bottom centre) and met with (clockwise from middle left) RNAO NP policy analyst Dr. Brenda Stade, Kenora-Rainy River Chapter's policy and political action executive network officer Sue LeBeau, RNAO health policy coordinator Ann-Marie Morris, RNAO President-Elect Dr. Claudette Holloway, and RNAO senior policy analyst Dr. Irmajean Bajnok.

#QPOR

RNAO@rnao · Jan. 10, 2022





Members of @RNAO_durham met virtually today with MPP @DavidPiccini for #QPOR to discuss the #RN understaffing crisis, its impacts on health care and the solutions needed from the government.

#onpoli #NursingCrisis

David Piccini, PC MPP for Northumberland-Peterborough South (bottom right) participated in QPOR with his executive assistant Sebastian Bonham-Carter (bottom left) and met with members of RNAO's Durham-Northumberland Chapter, including (top left to right) finance executive network officer Amanda Mayock and president Kathleen Pikaart, as well as RNAO's Region 8 board of director member Regina Elliott.

RNAO@rnao · Sept. 15, 2021





@RNAO_Ottawa met with MPP

@JohnFraserOS to discuss nursing burnout, #LTC homes, problematic performance-based health care funding, and the opioid crisis. #QPOR

During a virtual QPOR visit on Sept. 15, 2021, John Fraser (top left), Liberal MPP for Ottawa South, met with Region 10 policy and political action ENO Laura Crich (top right) and Region 10 president Ellen Shipman (middle row, left). Fraser's executive assistant Eric Osborne (bottom row) and legislative learner Sehar Zaidi (middle row, right) also joined the meeting.



RNAO's federal and provincial election platforms

RNAO's election platforms inform healthy public policy and mobilize nurses and the public. Ahead of every federal and provincial election, these platforms outline nurses' recommendations for all candidates and political parties – and the next elected government.

RNAO released platforms for the 2021 federal election and the 2022 provincial election and shared them on dedicated webpages. We disseminated the platforms through social media and at events we hosted. RNAO also shared the platforms with party leaders, updating the webpages with responses we received.

In August 2021, RNAO released <u>Nurses vote: A healthy recovery for all Canadians</u> to prepare for the federal election held on Sept. 20. With Ontario entering a fourth wave of COVID-19, RNAO emphasized the health impact of economic, social and environmental circumstances and supported a "just recovery" for all. Our platform featured 11 recommendations covering five priority areas: nursing, access to health care, social determinants of health, environmental determinants of health and fiscal capacity.





RNAO@rnao · Sep. 15, 2021



We're calling on all eligible Canadians to cast an informed vote this #FederalElection!

Vote for a government that will guide the country through the #COVID19 pandemic and oversee a healthy recovery. #NursesVote #cdnpoli



FEDERAL ELECTION PLATFORM 2021

NURSES VOTE: A HEALTHY RECOVERY FOR ALL CANADIANS

>RNAO

#NursesVote



Deb Lefebvre@DebraLefebvre · Aug. 20, 2021

Nurses definitely can be. Nurses can help shape the election platform. Nurses can hold politicians accountable. That's what @RNAO does. Nurses must #speakup #standup #nursesvote

RNAO unveiled the provincial election platform, *Ontario's nursing* <u>crisis: Your health, your health system</u> during our annual Queen's Park Day event on Feb. 24, 2022, in preparation for the June 2 election. The platform and companion technical backgrounder focused on people's ability to be healthy, covering five priority areas: nursing, care delivery, social determinants of health, environmental determinants of health and fiscal capacity. Leaders of the four main provincial parties attended the launch of the platform and fielded questions from nurses.

The provincial election came at a pivotal time given the pandemic and the deepening nursing crisis in Ontario. Central to our platform was the need to navigate out of the nursing crisis and avert a health-care system collapse. The platform set out a wide range of recommendations to address the economic and social inequities in Ontario and better meet people's health-care needs. Members gave life to the platform by holding three well-attended candidates' sessions for nurses to meet directly with their local politicians.

#onpoli #RNAOplatform #NursingCrisis





Ontario's NURSING **CRISIS**

Your health, your health system



RNAO@rnao · Feb. 24 , 2022

Our 2022 provincial election platform is now available online!

Our platform outlines recommendations we want all political parties to adopt ahead of the June 2 election. #onpoli **#RNAOplatform #NursingCrisi**



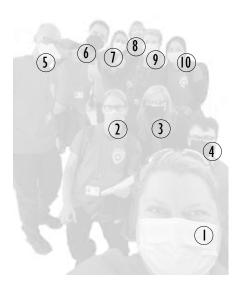
'HAVE YOU TALKED TO A NURSE LATELY?': HEALTH CARE AT HEART OF ONTARIO ELECTION DEBATE learn more

May 16, 2022

Health equity transforthange leading

Leading change with CMAT mission to help refugees on the Ukraine-Poland border

A humanitarian effort shows how our members lead change. A group of members undertook to help Ukrainians who fled their homeland or were displaced after Russia invaded their country at the end of February. In partnership with RNAO member Valerie Rzepka, the founder and executive director of <u>Canadian Medical Assistance Teams</u> (CMAT), RNAO issued a call for RNs and NPs to volunteer to go to Poland and Ukraine to provide primary health care, mental health care and parental/newborn care. Hundreds of members answered the call and 25 travelled to help people on the ground. They also brought much needed medical supplies. Their efforts were featured in numerous media stories.



RNAO members took part in several deployments organized by Canadian Medical Assistance Teams (CMAT).

In the foreground, RNAO member and NP Valerie Rzepka, is the founder and executive director of CMAT (1).

Second row from left to right: RN Jenny Ryan (2), RNAO member and RN Kerri Tadeu (3), RNAO member and RN Catherine Hayhoe (4).

Third row from left to right: Dr. Rob Kruhlak (5), Dr. Louis-Philippe Hebert (6), RNAO member and RN Elena Petretchenko (7), RNAO member and NP Shereen Worrad (8), logistician Kasia Filaber (9), RNAO member and RN Michaela Parenteau (10).



#Ukraine



RNAO@rnao · March 3, 2022

In response to the unfolding humanitarian crisis in #Ukraine, RNAO is partnering with @CMATeams to send volunteer RNs & NPs to #Poland.

Many refugees are arriving in Poland from Ukraine and they need our help.



CANADIAN DOCTORS, NURSES PROVIDE MEDICAL AID TO UKRAINIAN REFUGEES IN POLAND

RNAO MEMBERS AND RNS AMEEK SINGH (RIGHT), BRANDON DUNCAN AND JORDAN LENZ ARE MENTIONED IN THIS STORY.

learn more

March 19, 2022





Leading change with COVID-19 webinars

We continued to host the monthly COVID-19 webinar series throughout the third, fourth, fifth and sixth waves of the pandemic, reaching 100 to 300 participants per webinar. We shared the latest news and pressing issues, listened to nurses' stories, amplified their voices and identified opportunities for collective action. Our webinars addressed stories about nurses' leadership and courage, global vaccine disparities, closing and reopening schools, navigating heated COVID-19 conversations, Omicron facts, the nursing health human resource crisis, our analysis of government actions and inactions, and how to get involved in shaping policy decisions. All the webinars are available through the RNAO COVID-19 Portal.





Leading change with social media campaigns

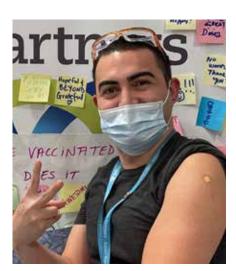
RNAO leads change through our social media presence. Followers amplify our voice on social media to influence healthy public policy and improve the health of Ontarians. The results speak for themselves.

#FullyVaccinated

Launched in July 2021, our <u>#FullyVaccinated campaign</u> captured the silver prize for Best Content Marketing Campaign at the 2021 Canadian Online Publishing Awards. The campaign promoted the importance of the vaccine and its effectiveness in protecting Ontarians. We asked the public to share photos of them receiving their vaccine on Twitter and Instagram with the hashtag <u>#FullyVaccinated</u>. RNAO's <u>hall of fame</u> features the most notable photos shared through the campaign. The campaign received hundreds of retweets, likes, and media coverage.







As part of RNAO's #FullyVaccinated social media campaign, members of the public shared their photos showing off their vaccinated status.



#RepealBill124

On Nov. 14, 2021, RNAO participated in a <u>rally</u> in Toronto to demand the premier #RepealBill124. At the rally, RNAO CEO Dr. Grinspun announced a 30-day countdown for the government to reverse Bill 124 – wage-restraint legislation that caps nurses' salary increases at one per cent. The announcement ignited RNAO's #RepealBill124 social media campaign, in which we shared <u>social media posts</u> counting down each day to raise awareness and urge government action. In December, as a follow-up to the countdown, RNAO invited MPPs to participate in its <u>holiday card campaign</u> by pledging to #StandWithNurses and call for the repeal of Bill 124. The #RepealBill124 campaign generated <u>robust engagement</u> from nurses, non-nurses and politicians.



RNAO's CEO Dr. Doris Grinspun spoke at a Toronto rally organized by NurseWithSign calling for the repeal of Bill 124 on Nov. 14, 2021. Grinspun said repealing the bill is central to addressing to the nursing crisis.

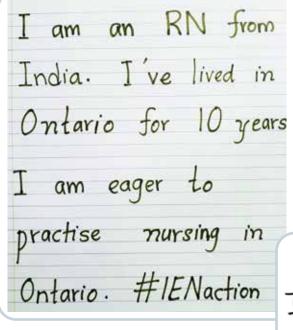


In an interview with CP24 News, RNAO president Morgan Hoffarth said inflation effectively reduced nurses' compensation.

#IENAction social media campaign

In February 2022, against the backdrop of the province's nursing crisis, RNAO launched the <u>#IENaction</u> social media campaign. RNAO demanded that the government and the College of Nurses of Ontario (CNO) expedite the application process for 26,000 internationally educated nurses (IEN) residing in Ontario so they can practise nursing here.

To participate in the campaign, IENs sent photos of themselves holding up a sign that displayed their country of origin, their previous experience as an RN, RPN or NP and how long they've lived in Ontario. RNAO shared these photos on social media to raise awareness, humanize the issue and urge the government to take action.



I AM RN FROM PHILIPPINES.

1'VE LIVED IN ONTARIO FOR

3YRS AND 4 MONTHS. I AM

EAGER TO PRACTISE NURSING
IN ONTARIO.

#IE Naction

I'm an RN from Nepal.

I've lived in Ontario for 3.5 years.

I'm eager to Practice nursing in Ontario.

IEN action

#IENaction



RNAO@rnao · March 1, 2022

We're in a #NursingCrisis and the Ontario gov't still hasn't fast tracked the application process for internationally educated nurses living in our province!

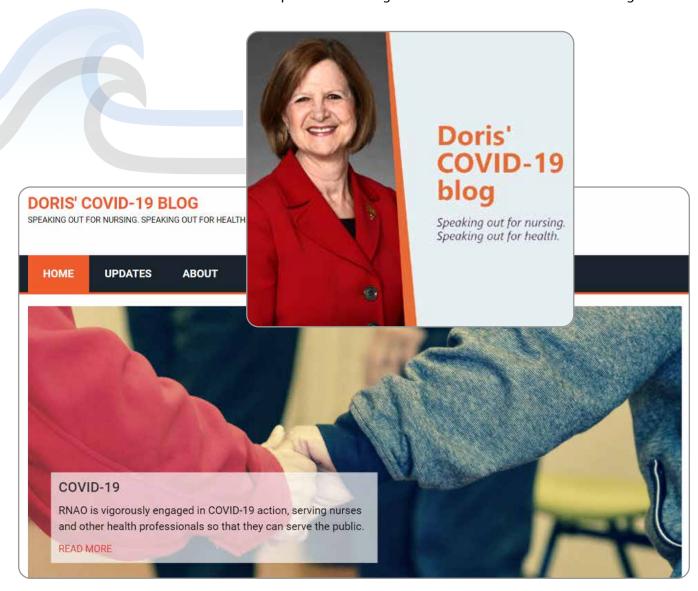
These nurses have been waiting on the sidelines while their applications take YEARS to process!

#IENaction #onpoli

Leading change with Doris' COVID-19 blog

"Doris' COVID-19 Blog", written by RNAO CEO Dr. Grinspun, started as a daily update on Jan. 27, 2020 when the second presumptive case of the novel coronavirus was confirmed in Toronto. This initial report led to a stream of regular blog reports. Thousands read the blog faithfully up until April 2022, when our CEO decided it was time to put the blog to rest. RNAO played a leading role during the pandemic and the blog was an integral tool that helped readers stay informed about the new virus, engage with the scary reality and promote solidarity and togetherness as we confronted it.

In total, there were 188 update reports, each one containing between two and four articles each, for a total of 530 items published in Doris' COVID-19 blog. The readership analytics have provided phenomenal evidence of the need for information and responsiveness to feedback. RNAO led change with the blog. It followed the science, confronted misinformation, supported those who are saving lives and advocated for those who are vulnerable and frail. Its impact was recognized with the silver prize for Best Blog at the 2021 Canadian Online Publishing Awards.



Health equity transforthange leading

Leading change engaging the media

4,918

media hits addressing topics from COVID-19 public health measures and longterm care to the nursing crisis, the opioid crisis and the environment

RNAO's relationship with iournalists is indicative of the respect we have gained through the years for speaking truth to power – based on evidence – on matters of nursing, health and health care. Over the past year, RNAO issued 67 media advisories and press releases, including six media releases by chapters and interest groups. This is an increase of 63 per cent over last year. RNAO President Morgan Hoffarth, incoming President Dr. Claudette Holloway, CEO Dr. Doris Grinspun, and members were featured in 4,918 media hits addressing topics from COVID-19 public health measures and long-term care to the nursing crisis, the opioid crisis and the environment.



Oct. 31 **2018**

Oct. 31 **2019** Oct. 31 2020 Oct. 31 2021





Leading change with evidence-based tools and resources

Leading Change Toolkit™

When it comes to evidence-based practice, no one comes close to the influence RNAO has. Our BPGs are being used by nurses and other health professionals in more than 1,000 health and academic institutions in Ontario, Canada and around the world. Last October (2021), RNAO released the third edition of our *Leading Change Toolkit*™. This free online resource is designed to support the implementation of best practice guidelines and other evidence-based tools. The toolkit updates and expands the 2012 version by featuring two complementary implementation frameworks for lasting improvements in health care:

- <u>The Knowledge-to-Action Framework</u> (KTA), a systematic and structured process model
- <u>The Social Movement Action Framework</u> (SMA), an innovative, people-led, grassroots approach to knowledge uptake and sustainability



By strategically applying components of both frameworks – that is, the traditional, sometimes "top-down" approach of the KTA framework and the "bottom-up" elements of the SMA framework – nurses and other members of the interdisciplinary team are powered to mobilize and accelerate change. The toolkit includes the up-to-date evidence, practical tools and worksheets needed to successfully navigate a change process at all stages.

Co-chairs of the Leading Change Toolkit expert panel, RNAO CEO Dr. Doris Grinspun (second row, far left) and Dr. Janet Squires (top row, far right) unveiled the toolkit on Oct. 5, 2021. Also in attendance at the virtual event were (clockwise from the top left) Katherine Wallace, RNAO senior manager, implementation science; Susan McNeill, associate director, RNAO IABPG Centre; Dr. Jennifer Zelmer, Healthcare Excellence Canada (HEC) president and CEO; Oliwia Klej, RNAO project coordinator; and Gina De Souza, HEC director of programs and systems transformation.

To celebrate the release of the publication, a <u>virtual national event</u> was held. About 250 participants heard presentations by: members of the toolkit's development team and the international expert panel; co-chairs Dr. Doris Grinspun and Dr. Janet Squires, professor at the University of Ottawa and research chair in health evidence implementation; and Healthcare Excellence Canada co-sponsors Dr. Jennifer Zelmer, CEO, and Maryanne D'Arpino, vice president.

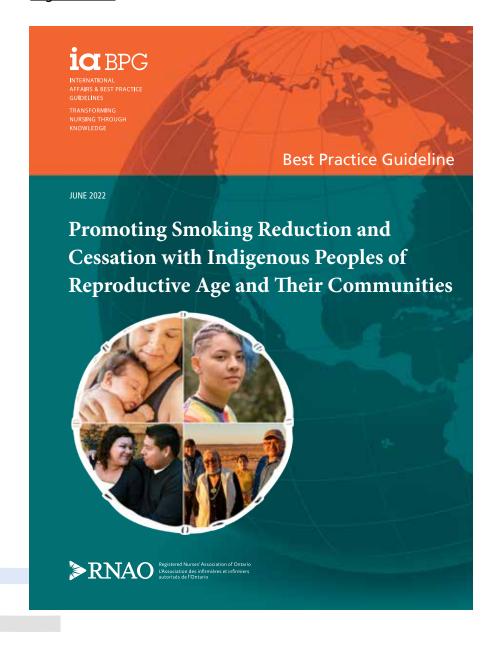
As a living set of resources, the toolkit will be updated annually to highlight end-user experiences and share success stories for change. French and Spanish translations are already in progress.





BPGs

This June we will mark another important first: publishing the first ever Indigenous-focused BPG, <u>Promoting Smoking Reduction and Cessation</u> with Indigenous Peoples of Reproductive Age and Their Communities. This BPG was co-chaired by Dr. Raglan Maddox – Modewa Clan, Papua New Guinea – a fellow at the National Centre for Epidemiology and Public Health, The Australian National University and Dr. Amy Wright, assistant professor in the Lawrence S. Bloomberg Faculty of Nursing at the University of Toronto. The BPG provides nurses and other members of the circle of care with evidence-based recommendations to promote smoking reduction and cessation with Indigenous peoples of reproductive age, their support networks and communities. The recommendations are Indigenous-led, culturally-safe and tailored by the community. We are grateful to the many Indigenous partners central in developing this important guideline – from panel members with lived experience to <u>Indigenous Best Practice Spotlight</u> Organizations® and other stakeholders.





Expansion and growth of the BPSO Host program

RNAO's Best Practice Spotlight Organization® (BPSO) community continues to expand even through various waves of the COVID-19 pandemic. The BPSO Host model launched in 2012 is growing fast.



From Oct. 19 – 21, 2021, best practice champions from Sensenbrenner Hospital attended virtual training with representatives from RNAO and BPSO Host Hôpital Montfort. Judith Makana (top left), BPSO coach and professional practice advisor, nursing at Hôpital Montfort, and Heather McConnell (top right), RNAO director of IABPG Centre, joined the session to discuss the champions' goals and the role Hôpital Montfort and RNAO will play in supporting their success. The following champions were among the participants (clockwise from top centre): Denise Paré, Lise Kozlovich, Allison Isaac, Ann Dagenais and Janelle Martin Edwards.



RNAO@rnao · Oct. 21, 2021

It is the third day of our #BPSO orientation training with Sensenbrenner Hospital and @hopitalmontfort

Today's session focuses on implementing the falls #BPG, the importance of evaluation and sustaining best practices.

#BPSOSensenbrennerHospital

Over the past year, Hôpital Montfort (Montfort), a BPSO Specialty Host, recruited two new francophone BPSO Directs, and is currently in discussion with others. Montfort hosted a <u>virtual orientation session</u> for Sensenbrenner Hospital (Kapuskasing) champions team in October 2021 to discuss goals, build collective identity and review the role of RNAO and Montfort in supporting their success. And they will host the orientation of their second confirmed BPSO Direct in June 2022, Centre hospitalier universitaire vaudois, CHUV (Lausanne University Hospital) – one of five university hospitals in Switzerland – which will expand our reach in Europe.



RNAO's inaugural LTC-BPSO Host, UniversalCare Canada Inc., celebrated the launch of 12 new LTC-BPSOs during a virtual event on Sept. 20, 2021. Joseph Gulizia (second row, centre), president and CEO of UniversalCare Canada Inc., shared remarks during the celebration. RNAO CEO Dr. Doris Grinspun (bottom row, right) welcomed UniversalCare Canada Inc., and its new LTC-BPSOs.

The inaugural LTC-BPSO Host, UniversalCare Canada Inc. (UniversalCare), launched 12 LTC-BPSO Directs in September 2021. These new LTC-BPSOs are working closely with the UniversalCare coaching team and RNAO support to systematically implement three clinical guidelines across the corporation. They are implementing evidence-based practices and policy across all homes under UniversalCare, which impact resident outcomes across the province.

BPSO Ontario Health Teams (OHT) have also expanded across the province. Three new BPSO OHTs joined this past year: Chatham-Kent, Sarnia-Lambton and Nipissing Wellness. This gives us a current total of seven BPSO OHTs. The BPSO OHT program aligns with OHT goals, supporting multiple sectors to implement BPGs as an integrated system of care. The BPSO OHTs implement four BPGs over four years, which serve OHT priority populations and strengthen personcentred and coordinated care. The coaching team mobilizes front-line providers from all disciplines to advance evidence-based practice and population health outcomes. RNAO will soon launch the third cohort of BPSO OHTs – including our first Indigenous-focused BPSO OHT, which will be tailored to honour Indigenous ways of knowing and support holistic community wellness.



Members of the Chatham-Kent Ontario Health Team (OHT) participated with other OHTs in the BPSO OHT Cohort launch and champions training on Sept. 22, 2021 alongside RNAO CEO Dr. Doris Grinspun (second row, third from left); Susan McNeill (top row, far left), associate director, RNAO IABPG Centre; and Kristen Campbell (top row, third from left), RNAO implementation science manager.

International BPSO Hosts

The Latin American BPSO Consortium launched in 2010 continues to thrive, with several BPSO Hosts seeing tremendous growth. The Ministry of Health of Chile (MINSAL) added 10 public hospitals as BPSO Directs, for a total of 28. Universidad de Chile (U.Chile), a BPSO host since 2017, added two universities as BPSO Directs, for a total of five. In Colombia, we welcomed Universidad Autonóma de Bucaramanga (UNAB) as BPSO Host, and they launched their first BPSO Direct this past February. The Latin American BPSO Consortium and their BPSO Hosts are coached by Dr. Doris Grinspun, founder of the BPG program and its BPSO social movement, along with Dr. Amalia Silva (U. Chile), Olga Gomez (UNAB), as well as seven expert and dedicated BPSO Coordinators in Chile funded by MINSAL.

The national BPSO Host program in Spain, led by Investén, expanded by adding two regional hosts for a total of seven comunidades autónomas (provinces) formally signing on to the program. This national BPSO Host and its regional branches have implemented 21 clinical BPGs and four healthy work environment BPGs in the 10 years since they joined. RNAO owes tremendous gratitude to leaders Dr. Teresa Moreno-Casbas, Dr. Esther González-María and Laura Albornos-Muñoz for their expertise and unwavering commitment to the RNAO BPG program. In addition to leading their country's BPSO, Investén is also responsible for translating the quidelines into Spanish.

In China, the BPSO Host program, led by Beijing University of Chinese Medicine and its affiliate Dong Zhi Men Hospital, is supporting expansion across the country. Collectively, under the leadership of Dr. Hao Yufang and Professor Guo Hailing, they are working with five hospitals who have committed to the BPSO program. In early 2022, the China BPSO Consortium was established to provide a forum for networking, collaboration and knowledge exchange amongst BPSO Hosts and Directs, leveraging their knowledge and expertise in guideline implementation and evaluation. This consortium, which first met in February 2022, also supports the continued growth of the BPSO social movement in China.





Leading change with videos

An integral part of leading change is expanding our reach through varied media formats. This past year we developed three series of videos about RNAO's programs to keep people up to date on emerging issues and highlight the work of our members.

BPG videos

Four engaging videos now showcase and spread the word about the BPG program. The videos, available on RNAO's YouTube channel, feature an overview of the program and an in-depth look at its three pillars: development, implementation and evaluation. They highlight the rigorous research, support models and comprehensive monitoring used to promote clinical excellence and healthy work environments in all health-care sectors and settings.



RNAO videos

Launched in August 2021, RNAO's video news updates – available on <u>our YouTube channel</u> – inform about events and initiatives and update on the nursing and health-care issues that RNAO is championing. Topics include #RepealBill124, RNAO's 2022 provincial platform, an all-party virtual debate on climate change, and Ontario's mask mandate.

We also produce news features that spotlight RNAO's work and our members. The video series raises emerging health issues through conversations between RNAO and guest speakers. Recent topics include Black History Month, the release of our Black Nurses Task Force report and the experiences of internationally educated nurses.



Report on resolutions from 2021 AGM

RESOLUTION

A CALL TO ACTION FOR GOVERNMENTS AND HEALTH-CARE LEADERS TO PROMOTE PRACTICES AND WORK ENVIRONMENTS TO SUPPORT OPTIMAL MENTAL HEALTH AND WELLBEING, RESILIENCE AND SUICIDE PREVENTION

Author: Debra Lefebvre, BA, RN, BN, MPA in memory of all health-care workers who died by suicide

Conflict of interest: None known

BE IT RESOLVED that the Registered Nurses' Association of Ontario (RNAO) advocate for the government to direct more funding for mental health programs and resources for Ontario nurses, and

THEREFORE BE IT FURTHER RESOLVED that RNAO advocate and urge government to include nurses in Bill 163, recognizing that nurses can suffer from post-traumatic stress disorder (PTSD) due to workplace-related stressors and exposure to trauma, and deserve a fair and balanced approach to make sure that they receive prompt diagnosis, treatment and support so that they can return to their work and lives as soon as possible.

RESOLUTION

DESIGNATED MENTAL HEALTH SUPPORT FOR ALL NURSING WORKPLACES AND ACADEMIC INSTITUTIONS DURING PROVINCIAL HEALTH CRISIS

Authors: Kathryn Ewers on behalf of Nipissing Chapter, Algoma Chapter, Sudbury & District Chapter, Kirkland Lake Temiskaming Chapter, and Porcupine Chapter, and the Mental Health Nursing Interest Group

Conflict of interest: None known

BE IT RESOLVED that the Registered Nurses' Association of Ontario (RNAO) advocate for the Ontario Ministry of Health and Long-Term Care to develop and fund mental health services for provision of 24/7 online or on-site support for all nurses and student nurses as part of an emergency psychological intervention and public health response during the provincial pandemic crisis.

RNAO has been directly engaged in advancing preventative and responsive mental health interventions to support nurses experiencing work and life challenges.

Due to awareness raised by RNAO and other health organizations about the additional stress placed on front-line health workers during the pandemic, the Ontario government announced \$12.4 million in investment to expand mental health and addictions (MHA) supports for front-line health-care workers. This investment includes \$5.9 million for MHA services through hospitals, \$1.9 million for increased access to clinical psychologists and \$4.6 million for workplace mental health training. On this, RNAO has discussed the need to approve the services of RNs and NPs in initiating and delivering psychotherapy – who to this day encounter barriers – with government officials and insurance companies.

RNAO has also been directly engaged in the governance of the <u>Nurses Health Program</u> (NHP): both President Morgan Hoffarth and CEO Dr. Doris Grinspun serve as NHP board members (our

CEO is the Vice-Chair) and RNAO's communications director chairs the NHP communications committee. Dr. Grinspun is also a member of the Runnymede First Responders Wellness and Rehabilitation Centre, announced in October 2021 and now under construction.

Critically important is RNAO's preventative policy work. RNAO insists that the best health strategy for nurses to maintain their wellbeing is a healthy work environment. In particular, workload and understaffing have worsened over time, and dramatically so throughout the pandemic. RNAO's 2022 election platform and the public policy recommendations contained in our report released on May 12, 2022 - Nursing Through Crisis: A Comparative Perspective address these issues by:

- calling for a comprehensive approach to aggressively expand the RN workforce, including
 - increasing RN undergraduate enrolments by 10 per cent per year for seven years
 - tapping into available pools of Ontario RNs not currently nursing in Ontario
 - o making sure that RNs who want full-time employment are able to get it
 - expediting the processing of applications of internationally educated RNs
 - expanding the Nursing Graduate Guarantee program
- enhancing retention by reinstating the Late Career Nurse initiative
- calling on the government to establish a nursing task force to make recommendations on RN retention and recruitment, including: providing for full-time opportunities, competitive wages and benefits in all sectors; reducing workloads; ensuring stronger enforcement measures for health and safety; and increasing opportunities for mentorship and professional development

RNAO has also committed to programming to promote access to psychological and mental health support, prevention of nurse abuse, mentorship, participation in organizational decision-making, and the visibility and skill of nursing leaders, as outlined in part two of the Nursing Through Crisis report.

The association also continues to update its online resource that helps nurses identify and access existing psychosocial support resources available during the pandemic: Mental Health and Well Being: Resources for Psychosocial Support during the COVID-19 Pandemic.

And RNAO has previously advocated for inclusion of nurses in Bill 163 on PTSD legislation – a change committed to by the previous government in Ontario. Sadly, to date this legislation has not been amended, and the policy department is presently reviewing further advocacy options.

RESOLUTION

INTEGRATED STRATEGY TO ADDRESS SUBSTANCE USE DISORDER

Authors: Kathy Moreland and Christina Hughes on behalf of the Waterloo Chapter

Conflict of interest: None known

BE IT RESOLVED that the Registered Nurses' Association of Ontario (RNAO) and its membership call for the Ministry of Health and its allies to: 1. Accelerate and augment the Road to Wellness (2020) initiatives and by implementing a province-wide, integrated strategy for substance use disorder (SUD) that will address prevention; and 2. Create and fund roles for trauma-informed SUD coordinators to support and educate those working with this population and those they serve.

DECRIMINALIZATION OF THE POSSESSION OF ILLEGAL DRUGS FOR PERSONAL USE

Author: Louise Lemieux White Conflict of interest: None known

BE IT RESOLVED that the Registered Nurses' Association of Ontario (RNAO) advocate for municipal, provincial and federal governments to take all actions within their power to decriminalize the possession of drugs for personal use, in order to reduce the harms of the opioid crisis.

RESOLUTION

STRATEGY ON INCREASING KNOWLEDGE AND AVAILABILITY OF SAFER OPIOID SUPPLY

Authors: Mathew McGuigan and Shannon Kemp on behalf of the Community Health Nurses' Initiatives Group (CHNIG) and the Chatham-Kent chapter

Conflict of interest: None known

BE IT RESOLVED that the Registered Nurses' Association of Ontario (RNAO) engage and collaborate using a multi-disciplinary approach (for example, one including safer supply prescribers, researchers and people with lived experience) to advocate for the increased knowledge and accessibility of safer supply prescribing programs and practices among Ontario health-care and social service professionals.

In response to these resolutions, RNAO is preparing a special edition of *RNJ* focusing exclusively on social determinants of health with a special feature on opioid overdoses and addictions.

RNAO's 2021 <u>federal</u> platform, our <u>federal</u> and <u>provincial</u> pre-budget submissions and our 2022 provincial platform all identify the opioid overdose crisis as a public health crisis. Collectively, we put forward a broad range of harm reduction interventions to address the growing number of opioid-related deaths, hospitalizations and emergency room visits, including expanded safer supply and decriminalization. We also issued a <u>related action alert</u>.

In collaboration with the association's policy department, the movers are currently reviewing the <u>Engaging Clients Who Use Substances</u> best practice guideline to develop an online webinar dealing with substance use.

RESEARCH AND ADVOCACY TO SUPPORT NEW GRADUATE NURSES

Author: Lauren Rogers

Conflict of interest: None known

BE IT RESOLVED that the Registered Nurses' Association of Ontario (RNAO) continue to advocate for more research on the current turnover rate of new graduate nurses across Ontario and the reasons they leave the profession, to facilitate investing in and implementing evidence-based strategies to improve retention.

In the midst of a nursing crisis in Ontario, RNAO has devoted much attention to researching and advocating for the retention and recruitment of nurses – particularly RNs that are early in their careers. RNAO's May 2022 report, *Nursing Through Crisis*, identified that nurses aged 21–25 years experience the highest levels of depression, anxiety, and stress. They are at an increased risk of leaving the profession with nearly half indicating that they had plans to leave their position within the next 12 months, and about one-third indicating that they had plans to leave in the next one to five years.

RNAO has been forceful with government and employers on the need to pay particular attention to new graduate nurse retention. To this end, Dr. Grinspun successfully advocated to expand the 1:1 tuition reimbursement for RNs and for RPNs. We are also advocating to bring back the Late Career Nurse initiative, as well as efforts to bring back retired nurses to serve as mentors.

And, RNAO is not only relying on government and employers to take action. We are launching our own programs to support managers in their critical role to support nurses. The association has also expanded a <u>mentorship program established in 2019</u> to support nurse mentors and mentees in fostering high-quality mentorship relationships.

RNAO will continue to call for the expansion of the Nursing Graduate Guarantee (NGG) to ensure access for all new RN registrants, including internationally educated nurses. We have included these calls in all recent policy documents, including a <u>political action bulletin</u>, our <u>2022 provincial pre-budget submission</u>, our <u>2022 provincial election platform</u> and our <u>Nursing Through Crisis</u> report. We also issued related <u>action alerts</u>.

Research published by RNAO's <u>Black Nurses Task Force (BNTF)</u> over the past year also shone a light on specific barriers faced by Black nurses in education and career progression, related to systemic anti-Black racism and discrimination in the profession. Their <u>report</u> published in February 2022 made 19 recommendations covering retention, recruitment and many other areas of concern for Black nurses. This report got extensive media coverage, as spotlighted on our <u>Black Nurses and RNAO In Focus theme page</u>. Just before this report was released, the BNTF also published two peer-reviewed articles in <u>Nursing Inquiry</u>'s special issue on anti-racism, including <u>Tackling discrimination and systemic racism in academic and workplace settings</u>.

Lastly, RNAO launched a new <u>Nurses' health and wellbeing In Focus theme</u> page in May 2022 as part of our Nursing Week 2022 celebration. It outlines four new or revised programs, also announced during Nursing Week, to help the profession through the current nursing human resource crisis. It also showcases RNAO's other public and clinical policy efforts to create healthier work environments for nurses – including the <u>Nursing Through Crisis</u> report – and records the evolution of RNAO's work on healthy work environments, beginning in 2003 with our related <u>best practice guidelines (BPG) project</u>.

RESOLUTION

STRATEGIES TO UPHOLD THE CALLS TO ACTION AS PROPOSED BY THE TRUTH AND RECONCILIATION COMMISSION

Author: Chantal Byrnes Leadbeater on behalf of the Nursing Students of Ontario

Conflict of interest: None known

BE IT RESOLVED that the Registered Nurses' Association of Ontario (RNAO) advocate for the inclusion of mandatory Indigenous Studies courses be included in the regular nursing school curriculum and for the College of Nurses of Ontario to create a nursing practice standard.

RESOLUTION

INCLUSION OF THE VOICE OF KNOWLEDGE KEEPERS AND ELDERS OF FIRST NATION, INUIT, AND MÉTIS PEOPLE WHEN TEACHING NURSES AND PROVIDING NURSING CARE

Author: Jane Fadden and Archna Patel on behalf of the Mental Health Nursing Interest Group (MHNIG)

Conflict of interest: None known

BE IT RESOLVED that the Registered Nurses' Association of Ontario (RNAO) advocate for the Inclusion of the voice of knowledge keepers and Elders of First Nation, Inuit, and Métis and Urban Indigenous people when teaching nurses and providing nursing to improve holistic health outcomes for Indigenous people and decolonize nursing education.

RNAO continues to press the federal government to implement all of the calls to action of the Truth and Reconciliation Commission (TRC) report, with particular emphasis on <u>calls 18–24 specifically related to health</u>.

RNAO's <u>Residential Schools Position Statement</u> (2021) and our <u>2021 federal platform</u> call on the federal government to hold true to its commitment to implement all calls to action, including number 24, which is the subject of this resolution. Call to action 24 in the TRC report states:

We call upon medical and nursing schools in Canada to require all students to take a course dealing with Aboriginal health issues, including the history and legacy of residential schools, the United Nations Declaration on the Rights of Indigenous Peoples, Treaties and Aboriginal rights, and Indigenous teachings and practices. This will require skills-based training in intercultural competency, conflict resolution, human rights, and anti-racism.

RNAO has surveyed nursing program curricula across the province and found that a number of programs do not currently have courses that answer this call to action. And where such courses exist, they vary in quality. RNAO will continue advocating for the inclusion of mandatory Indigenous studies courses in all nursing programs, with an understanding that cultural competency education and courses in nursing schools dealing with Indigenous health issues must be informed by the voices of Knowledge Keepers and Elders of First Nation, Inuit and Métis people.

RNAO's <u>Indigenous health program</u> also continues to plan educational webinars for Ontario's nurses, including presentations by Elders and Knowledge Keepers. Information about this program and RNAO's comprehensive approach to work with Indigenous partners can be found under the <u>In Focus theme dedicated to Indigenous health and RNAO</u>, launched on Nov. 11, 2021. We will continue to update this theme page with new work and developments, where you can find information about partnerships and learn more about Indigenous-focused Best Practice Spotlight Organizations (BPSO) and their work.

RESOLUTION

SEXUAL AND GENDER MINORITIES CONTENT IN THE NURSING STANDARDS

Author: Dr. Paul-André Gauthier on behalf of the Rainbow Nursing Interest Group (RNIG)

Conflict of interest: None known

BE IT RESOLVED that the Registered Nurses' Association of Ontario (RNAO) advocate for the Ministry of Health of Ontario (MOH), the College of Nurses of Ontario (CNO) and the Canadian Association of Schools of Nursing (CASN) to include the health needs of sexual and gender minorities into entry-to-practice competencies and a nursing practice standard.

THEREFORE BE IT FURTHER RESOLVED that RNAO work with RNIG to lobby these and other organizations to make sure that our 2SLGBTQI+ communities are represented in the process and that the health-care needs of sexual and gender minorities are fully reflected.

Existing nursing education, entry-to-practice competencies and nursing practice standards do not adequately address the needs of racial, cultural, sexual and gender minorities — whether patients, clients or care providers — as shown by RNAO's policy work and its resolutions process. RNAO has developed a best practice guideline (BPG), <u>Promoting 2SLGBTQI+ Health Equity</u>, incorporating its 2021 <u>position statement</u> on respecting sexually and gender diverse communities. We have disseminated this BPG to a broad range of stakeholders, including university and college nursing education institutions, in an effort to fill gaps in current nursing curricula with respect to sex and gender equity. We expect wide use of the BPG will help promote knowledge of gender and sexual diversity and experience in nursing education and nursing practice, as well as ensure that health-care settings reflect and respect the health needs of 2SLGBTOI+ clients and communities.

We are also presently finalizing content for a new In Focus theme, which will showcase policy developments and evidence-based research and tools related to 2SLGBTQI+ health equity.

SUPPORT OF A NATIONAL GRIEF STRATEGY

Author: Carolyn Wilson on behalf of the Palliative Care Nurses Interest Group (PCNIG)

Conflict of interest: None known

BE IT RESOLVED that the Registered Nurses' Association of Ontario (RNAO) formally endorse and advocate to municipal, provincial and federal governments the implementation and funding of the four-point plan by the Canadian Grief Alliance, as a response to grief related to the COVID-19 pandemic.

RNAO has consistently advocated for increasing mental health support for those impacted by losses during the pandemic, including nurses and other health-care workers currently suffering from grief and post-traumatic stress. RNAO has also examined the extent of the impact of the pandemic on the nursing population by conducting a <u>provincial work and wellbeing survey</u> and supporting national and international survey work by other organizations. The association is also addressing the impact of the pandemic on nurse stress levels as exposed through the surveys by conducting key program and advocacy activities, as set out in RNAO's 2022 <u>Nursing Through Crisis</u> report.

In April 2022, following discussions with <u>PCNIG</u>, RNAO forwarded a supplement to its federal pre-budget recommendation for investment in a long-term mental health recovery plan for Canadians as we emerge from the COVID-19 pandemic. The association urged federal minister of health Jean-Yves Duclos to consider the need for a robust national grief strategy:

"In addition to expanded mental health protections and services identified in our Feb. 25 submission, RNAO recommends funding to support the national grief strategy proposed by the Canadian Grief Alliance (https://www.canadiangriefalliance.ca/). The national grief strategy calls for expanded grief services, a public awareness campaign related to grief and healthy coping, and pandemic-related grief research."

RNAO has not identified any specific mention of a national grief strategy in the 2022-23 federal budget. However, the association plans to continue advocating for attention to grief related to COVID-19.

SUPPORT OF ACTION ON COMPASSIONATE CARE FRAMEWORK NOW

Author: Carolyn Wilson on behalf of the Palliative Care Nurses Interest Group (PCNIG)

Conflict of interest: None known

BE IT RESOLVED that the Registered Nurses' Association of Ontario (RNAO) power the Ministry of Health (MOH) through advocacy, activism and action to develop a framework for compassionate care in Ontario for those who are at most risk from not "living well". This should be accomplished by working towards RNAO's achieving a Canadian Compassionate Company designation as their work with public health advocacy and with organizations like the Ontario Palliative Care Network, Health Quality Ontario and Hospice Palliative Care Ontario to implement a palliative care framework to meet the needs of these most vulnerable populations.

Several meetings took place with members of the <u>Palliative Care Nurses Interest Group (PCNIG)</u> to address this multi-pronged resolution. RNAO and PCNIG identified four key activities to help advance the concepts in this resolution:

- 1. While RNAO has opted not to pursue a Canadian Compassionate Company designation, it will continue to comply with the Employment Standards Act and carry out ongoing advocacy for fair, compassionate treatment for all, as outlined in our key policy initiatives related to social determinants of health, environmental determinants of health, nursing, fiscal responsibility and access to health care.
- 2. RNAO's continuing pursuit of healthy work environments through policy highlights the impact of unhealthy workplaces on the health and wellbeing of nurses across all sectors both locally and globally. Several recommendations and actions resulting from this work are helping to create healthier and more compassionate workplaces for nurses and other health-care professionals.
- 3. RNAO's Advanced Clinical Practice Fellowship program now clearly reflects attention to compassionate care as an element of client and family-centred care.
- 4. RNAO has started to develop a palliative care position statement, which incorporates its sustainable development goals and the quadruple aim, and reflects the role of RPNs, RNs and NPs within the National Palliative Care Framework.

ADVOCATING FOR PROTECTED PROFESSIONAL DEVELOPMENT FOR NURSE PRACTITIONERS

Authors: Petrina Barbas, Tingna Xu, and Dr. Eric Staples

Conflict of interest: None known

BE IT RESOLVED that the Registered Nurses' Association of Ontario (RNAO), in conjunction with the Ontario government, Ontario Health Teams, organizations, academic institutions and placement partners, develop a plan informed by the recommendations of the Nurse Practitioner Task Force's *Vision for Tomorrow* report to support NPs in negotiating employment with any employer to exercise their professional right, as part of self-regulation, to include professional development and support for non-clinical activities (for example, NP-led research, quality improvement, continuing education and teaching), as part of their term of employment so if audited by the College of Nurses of Ontario, can demonstrate these competencies as part of personal and professional growth.

RNAO, the <u>Nurse Practitioner Interest Group</u> and the people who moved this resolution have developed a template letter intended to help NPs negotiate professional development time during the hiring process. This template, informed by Recommendations 2.2, 4.1, 5 and 6 of the Nurse Practitioner Task Force's <u>Vision for Tomorrow</u> report, was presented to attendees of RNAO's NP Institute in April 2022.

The collaborative process used to develop this template included a literature review and discussions with the CNO to confirm that the resolution is consistent with CNO Professional Standard 2. The development process was also informed by presentation and discussion of the above resolution at RNAO's NP Symposium in November 2021.

RESOLUTION

TAKING ACTION TO FACILITATE ACCESS TO MENTAL HEALTH SUPPORTS FOR ONTARIO CHILDREN AND YOUTH

Author: Kierstin Kinlin and Chantal Singh on behalf of the Pediatric Nurses Interest Group (PedNIG)

Conflict of interest: None known

BE IT RESOLVED that the Registered Nurses' Association of Ontario (RNAO) lobby the government for designated funds to ensure equitable access to mental health services within 30 days of presenting mental health-related concerns, so that children and youth, up to and including 18 years of age, do not suffer long-term consequences from delays in assessments, diagnoses, and interventions.

This resolution formed part of RNAO's 2022 provincial election platform. Specifically, the platform asks that any new provincial government "ensure that wait times for children and youth mental health services are less than 30 days." The rationale supporting this ask states, "Families have long struggled to access children's mental health services in Ontario. Mental health hospitalization rates for young people are skyrocketing. The pandemic has increased levels of depression, anxiety, suicidal ideation and attempts, making timely access to these services even more necessary."

RNAO's new policy website includes a <u>pediatric mental health indicator</u> on its <u>care delivery dash board</u>, which looks at wait times. RNAO is in the process of updating this indicator to better track wait times, and will use the findings to inform further lobbying efforts.

ANNUAL ENVIRONMENTAL SUSTAINABILITY REPORTING

Authors: Josalyn Radcliffe, Dominique Baillargeon, and Hilda Swirsky on behalf of the Ontario Nurses for the Environment Interest Group (ONEIG)

Conflict of interest: None known

BE IT RESOLVED that the Registered Nurses' Association of Ontario (RNAO) commits to ongoing ecological footprint reporting that incorporates environmental sustainability metrics into its publicly available annual report, including an assessment of the organization's waste, carbon footprint, and any applicable social and environmental impacts of its operations and investments.

For years, RNAO has advocated for environmental accountability and reporting in its support of successful campaigns like the right to know about toxins in Toronto and Ontario. RNAO recognizes that it is important to lead by example as well. RNAO has a policy that prohibits investment in fossil fuels. In response to this resolution, RNAO's chief financial officer has developed metrics for inclusion in RNAO's 2022 annual report:

- Waste and trash
- Water consumption
- Energy performance

These metrics establish a baseline for future reporting.

RNAO ECOLOGICAL FOOTPRINT REPORT 2021/22 reporting year

Advocating for environmental accountability and reporting starts at home

The association's home office footprint is approximately 30,000 square feet. Within the home office space, we have created a plan that will strive to use less paper in a digital environment. Minimal carpet to minimize off-gases, maximum use of natural light from the north, south, east and west, and multiple receptacles for office waste and recycling are basic office protocols. Over time, RNAO will install LED lighting in certain offices to control individual light sources and reduce energy consumption. There are seven electric vehicle charging stations at the home office location, available for use at one's own cost. Bike racks are available and we continue to look for solutions to make secure bike racks available to anyone.

Although the pandemic has meant that RNAO staff, like so many others, have been working from home since spring 2020, we are establishing baseline metrics to track our footprint and identify areas for improvement. The property manager for the home office location also diligently measures and tracks environmental metrics. Our property manager also recently confirmed installation of MERV13 air filters – hospital grade air filters providing superior filtration – throughout the building.

Waste and trash

During 2020 and 2021 recyclables, compost and trash were dramatically reduced to near zero since virtual work was the norm. This will serve as a baseline to measure results for 2022 and beyond.

Water consumption

Water consumption data for potable indoor and outdoor water from 2018 to 2021 showed consistently that January represented the lowest point of consumption and July represented the highest. That is, in July the rate of consumption is consistently approximately double that of January. Weather is likely the major factor. The grounds around the home office are landscaped and RNAO is experimenting with environmentally-friendly plantings.

Energy performance

Consumption of electricity moderated slightly in 2020 and 2021, with the summer months being the highest for consumption. Natural gas consumption fluctuated consistently, with winter months being the highest for consumption. Weather patterns are a significant factor in energy consumption and performance levels.

Overall, the building had an ENERGY STAR® rating of 85 out of 100 as at Nov. 30, 2021. Higher scores in this rating system means lower energy use and fewer greenhouse gas emissions. RNAO's rating means our energy performance is better than 50 per cent of our peers.

RNAO policy explicitly excludes investing in fossil fuels. The overall policies for investing follow the principles of responsible environmental, social, and governance (ESG) investing. The association's independent investment advisors adhere to this policy, monitored by the internal senior management group.

FUND A RAPID RESPONSE TREATMENT TEAM CONSISTING OF NURSE PRACTITIONERS, REGISTERED NURSES AND PHYSICIANS FOR SENIORS WHO LIVE IN THEIR OWN HOMES AND ARE 85 YEARS OF AGE AND OLDER

Author: Michelle Farah

Conflict of interest: None known

BE IT RESOLVED that the Registered Nurses' Association of Ontario (RNAO) advocate to municipal, provincial and federal governments for more funding for public health, home care and community health services which could improve the quality of life of seniors, prevent illness and reduce hospital acquired infections or issues such as falling.

Throughout 2021/22, RNAO has continued to advocate for expanded, equitable, and quality home and community care services for seniors. The association's July 15, 2021 response to the Ontario government's Proposed Home and Community Care Regulations, advocated for the expansion of home and community care services in the province, as well as the removal of service maximums, to make more hours of home care available to Ontarians.

Following this, RNAO also urged the Ontario government to increase home care funding by 20 per cent in its 2022 provincial pre-budget submission. And RNAO's 2022 provincial platform also recommended an increase in home care funding to support an expanded publicly-funded basket of home and community services, in order to ensure improved and equitable home care access and promote the need for adequate staffing, skill mix and compensation.

RNAO's advocacy in 2021/22 on this issue also took place on the federal government stage. Through its 2021 federal election platform and 2022 federal pre-budget submission, the association also demanded implementation of a federally-funded home care program that would allow people across Canada to receive a full basket of services in their home. Work on this issue remains ongoing, as RNAO remains dedicated to promoting quality home and community care services for seniors.

MANDATORY PLACEMENTS FOR BSCN STUDENTS IN LONG-TERM CARE HOMES

Authors: Board of Directors, Registered Nurses' Association of Ontario (RNAO)

Conflict of interest: *None known*

BE IT RESOLVED that the Registered Nurses' Association of Ontario (RNAO) advocate for mandatory placements for BScN students in long-term care (LTC) homes comprised of 14 shifts spread across the four-year program.

RNAO staff members met with RNAO board members Una Ferguson and Julie Rubel and RNAO CEO Dr. Doris Grinspun to explore approaches to advance this resolution. In its response to the Ministry of Long-Term Care's pre-legislative consultation in September 2021, RNAO recommended that nursing programs incorporate a mandatory 14-shift practicum in an long-term care (LTC) setting as a part of the curriculum, as a step to increase staffing and improve quality of care in LTC homes.

In response to this resolution, RNAO launched two new programs on May 12, 2022. The Nursing Student and Preceptor for Long-Term Care program will provide support and resources to preceptors and students in LTC, and help develop positive student learning experiences and promote the leadership role of preceptors. And, the Advanced Clinical Practice Fellowship (ACPF) program has developed a new LTC stream with a focus on supporting fellows to develop resources, approaches and programs to support student clinical placements in LTC homes.

RNAO has also raised this issue directly with academic institutions and LTC organizations, highlighting the benefits of senior-level baccalaureate nursing placements in LTC. The association has called for academic institutions to promote required LTC placements for senior-level students and for LTC organizations to host student placements. Advocacy efforts on this issue also pointed to RNAO resources to support quality LTC placements, including videos for LTC preceptors and students, the LTC Best Practices Program, RNAO's LTC best practice coordinators and LTC Best Practices Toolkit.

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Morgan Hoffarth, President, ex officio
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Carrie Edwards, Senior Membership and Services Coordinator, Resource Staff

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Daniel W. Lau, Director, Membership and Services, Resource Staff
Carrie Edwards, Senior Membership and Services, Resource Staff

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EXTERNAL REPRESENTATION

RNAO is represented on 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 the bylaws. They concluded their review and did not propose any amendments.

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

Dr. Michael Scarcello, RN, DNP, CNS 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 and provide feedback on the association's award-winning publication *RNJ*. Working in collaboration with RNAO's communications team, committee members also offer ideas for future issues and provide much-needed perspective on the issues facing the nursing profession and the health system.

During the past year the committee reviewed several editions of the journal. Key articles from the winter 2021

edition covered the association's #4Hours4Seniors social media campaign, the work of street nurses during the pandemic and the advocacy of NPs and RNAO demanding more nurse practitioners and an increased scope of practice for them.

Featured in our spring-summer 2021 issue: a Q and A with Justice Frank Marrocco, the head of Ontario's Long-Term Care COVID-19 Commission, the association's Work and Wellbeing Survey Results report and the newest group of international Best Practice Spotlight Organizations. The winter 2022 issue included a feature on RNAO's best practice guideline, Promoting 2SLGBTQI+ Health Equity. It also spotlighted the association's newest interest groups: the Indigenous Nurses and Allies Interest Group and Black Nurses Leading Change.

Committee members provided thoughtful and constructive feedback on each issue, ensuring the priorities and initiatives of the association were reflected. Each committee member offers a valid and distinct perspective based on their unique role and expertise.

I would like to thank all committee members for their commitment and contributions during this past year, as well as the dedicated editorial team.

Regina Elliott, RN, MN Chair

EXECUTIVE

The executive committee is made up of the president, president-elect, and chief executive officer. The board affairs coordinator 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 seven times during the past year. Key issues the committee dealt with included financial matters and investments, as well as advocacy and outreach efforts related to the COVID-19 pandemic, internationally educated nurses, preparations for Ontario's 2022 election, and nurse work and wellbeing.

The committee is pleased to report on another year of robust and sustainable financial results. For the year ending Oct. 31, 2021, each of the association's five special-purpose funds, which provide a vast range of member benefits and services, educational opportunities, legal assistance, professional liability coverage and our internationally-acclaimed best practice guideline programs, contributed substantially to the strong financial health of the association. We are very pleased and proud that over the 97-year history of RNAO, our financial capacity has grown to such magnificent strength.

At year end, KPMG, the association's external auditor, presented their unqualified

opinion to the board of directors, and the board and executive committee are satisfied that the financial statements adequately and appropriately disclose the scope of our activities.

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

Morgan Hoffarth, RN, MScN President and Chair

INTEREST GROUPS

The committee met twice this past year, in November 2021 and February 2022. The November meeting featured two presentations: one by RNAO home office highlighting best practices for money management, and the other by Heather Jones from the Registered Nurses' Foundation of Ontario (RNFOO) addressing how to create bursaries and scholarships. The meeting concluded with an exploratory conversation about mentoring interest groups.

A lively discussion about mentoring was continued at the February meeting. At that meeting, we also conducted an informal survey of attendees to better understand what mentorship for interest groups might look like moving forward. Attendees at the February meeting were issued a challenge to create a video to highlight why RNAO members should join their interest groups.

During our February interest group committee meeting, we also decided to explore offering an "all candidates session" focused on key election issues for nurses. To this end, RNAO home office offered to partner with the Ontario Nurses for the **Environment Interest Group** to create an issue-specific allcandidates debate. The session, which took place on April 19, was co-sponsored by the Ontario chapter of the Canadian Association of Physicians for the Environment.

We also sent updates by email to all interest group chairs in June 2021 and August 2021. The purposes of these emails: to address follow-up items from previous meetings and to keep members informed of upcoming events or deadlines.

We would like to thank the committee members and staff for their involvement and collaboration in committee business this year.

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

LEGAL ASSISTANCE PROGRAM (LAP)

The committee meets on a regular basis to consider and approve anonymously-presented requests, 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. They also welcome any feedback on trends in the profession.

Since its inception, the Legal Assistance Program (LAP) has supported over 5,000 registered nurses and nurse practitioners in a variety of professional and employment matters. The majority of legal cases supported by LAP are: complaints and reports to the College of Nurses of Ontario, termination from employment including wrongful and constructive dismissal, Workplace Safety and Insurance Board matters, accommodations to return to work and other human rights matters. LAP also provides access to employment relations counselling, hosts educational presentations, local and regional events, webinars, and writes articles for 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 legal education webinars on various topics including 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.

Anita Tsang-Sit, RN, BA, MPH, CRM (C) Chair

MEMBER RECOGNITION AWARDS

Each year, RNAO recognizes individuals and groups that make significant contributions to the association's mandate of speaking out for nursing and speaking out for health. Our committee oversees and supports the member recognition awards process in collaboration with home office staff.

We received a record number of nominations again this past year – 52 nurses' names were put forward for our consideration. This year, we are honouring 13 stellar individuals across 12 categories, highlighting excellence in the profession through clinical practice, policy, education, research, and administration, among other areas. And, this year we were pleased to identify two very deserving recipients of the Lifetime Achievement Award. These prestigious awards will be presented virtually during RNAO's annual general meeting on June 10, 2022.

Over the past year, our committee gathered virtually three times. We also worked on a video guide on how to submit an

awards nomination, another major accomplishment for our committee. Thank you to the committee members for their hard work judging award submissions and visioning and creating the video guide to the nomination process. Thank you to past award winners who spoke on camera to inspire others to nominate their peers for awards. And thank you to home office staff for their continued commitment and support.

Maria Rugg, RN, BScN, MN Chair

PROVINCIAL RESOLUTIONS

The resolutions committee is made up of four general members of the association and RNAO's president, chief executive officer (non-voting), and parliamentarian (non-voting). The committee met four times over the past year to review and discuss 15 member resolutions.

Based on the criteria for assessing resolutions, the committee determined that 12 resolutions be brought forward for discussion and decision at the 2022 annual general meeting (AGM).

We remind all members that they can submit resolutions at any point during a year, up to the deadline. If resolutions are submitted ahead of the deadline date, the committee will review them by email and provide feedback to the submitters. This gives submitters more time to have their resolution well-prepared before the submission deadline.

Resolutions brought forward by an association member as an additional new business item before the AGM's start of business cannot be accepted, per RNAO Policy 6.07(5). As such, we encourage members to meet the deadline for submission of resolutions to the AGM.

The board of directors has the right under association policy 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 for their hard work and dedication.

Selasie Ametorwo, RN, BScN, BSc Chair

RNAO board of directors 2021-2022



Morgan Hoffarth President



Dr. Claudette Holloway President-Elect



Dr. Doris Grinspun Chief Executive Officer

Regional Representatives



Rachel Elliott Region 1 Representative



Kristie Butler Region 2 Representative



Loretta McCormick Region 3 Representative



Anita Tsang-Sit Region 4 Representative



Lori Webel-Edgar Region 5 Representative



Alicia Moonesar Region 6 Representative



So-Yan Seto Region 7 Representative



Regina Elliott Region 8 Representative



Debra Lefebvre Region 9 Representative



Una Ferguson Region 10 Representative Region 11 Representative



Maxine Lesage



Michael Scarcello Region 12 Representative

Interest Groups' Representatives



Julie Rubel Interest Groups' Representative



Maria Rugg Interest Groups' Representative

Student Representative



Lalezar (Lale) Tüner Student Representative

Public Representative

Vacant

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 we serve.

RNAO'S VALUES

We believe health is a resource for everyday living and 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.

#RNAOAGM

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