

# **ONTARIO NURSES' ASSOCIATION**

**SUBMISSION**

**ON**

**Amendments to Ontario Regulation 246/22 under the Fixing Long-Term  
Care Act, 2021 to align with the Health and Supportive Care Providers  
Oversight Authority and Regulations Pertaining to the Health and  
Supportive Care Providers Oversight Authority (the Authority)**

**TO**

**Ministry of Health**

**January 15, 2023**



85 Grenville St.  
Toronto, ON M5S 3A2  
Phone: 416-964-8833  
Fax: 416-964-8864  
[www.ona.org](http://www.ona.org)

## ***Introduction***

The Ontario Nurses Association (ONA) is the union representing 68,000 registered nurses (RNs), health-care professionals, and more than 18,000 nursing student affiliates who provide care in hospitals, long-term care facilities, public health units, communities, and clinics. Our membership includes personal support workers (PSWs) in long-term care homes, care coordinators and direct care staff working in almost every region of Ontario.

## ***Oversight and Accountability***

ONA believes the proposal will provide consistent qualifications for PSWs across all sectors. Creating an authority would strengthen PSW oversight and enhance the safeguarding of the public through practice standards and a code of conduct.

Various titles and acronyms, such as Health Care Aid and Personal Care Assistant, refer to PSWs. The educational background associated with these titles may differ. To address this, there's a proposal to introduce a "visual mark" as an alternative to a protected title. This mark would indicate that the PSW is a registered health-care professional under oversight. The suggestion is to prominently display this mark, likely on a name badge, for public recognition. PSWs should include the designated "visual mark" after their name when documenting work activities and making notes. This mark indicates that the PSW is a registered health-care professional under oversight. Including this mark in documentation enhances transparency and helps the public recognize the PSW's professional status. This visual mark is expected to be consistently added by the PSW alongside their name in all relevant documentation.

Another concern revolves around how PSWs communicate apprehensions when faced with challenges in practicing or adhering to the Code of Ethics for which they are held accountable. For instance, when a unit or floor is intended to have three PSWs but only has one, they must have a structured mechanism to escalate such work-related concerns. This escalation process is vital for documenting issues and protecting their professional registration, especially in the event of complaints.

## ***Registration Costs***

PSWs' hourly wages are not significant compared to other health-care providers, so a registration fee might deter them from registering or even becoming PSWs. There is no reference to the cost other than it states that it will be lower than other regulatory colleges' fees. Would consideration be given to waiving the fee of the initial registration? This would aid in obtaining increased numbers of registrants promptly and help with the retention and recruitment crisis in the sector.

### ***Regulated Professions Amendments***

Furthermore, there's a potential risk associated with the increased regulation of PSWs within the workplace. As PSWs are already responsible for administering medication, expanding their regulatory role may lead to additional accountabilities. This prompts consideration of what other roles might default to PSWs, especially in long-term care settings where there may be an assumption that they can take on more responsibilities. Clarity and substance in defining these roles are essential to ensure proper accountability and delineation of responsibilities within the health-care framework.

There is apprehension regarding the possibility of the government enacting regulations permitting a PSW with a specific level of experience to function as a Health Care Aide or assume roles traditionally held by other regulated health-care professionals. This raises questions about maintaining standards and ensuring appropriate qualifications for individuals providing personal support services.

For example, what would prevent a government from enacting regulations for a PSW enrolled in nursing school to work as a registered practical nurse? Past instances, such as removing nurses from the scrub nurse role in operating rooms and replacing them with unregulated workers, underscore the concern about the potential dilution of the work of other regulated health-care professionals, such as registered nurses.

### ***ONA's recommendations:***

**Recommendation 1:** Keep the registration fees to a minimum to avoid a negative impact on the overall retention and recruitment of PSWs in Ontario.

**Recommendation 2:** Develop a process for PSWs to document issues and protect their professional registration, especially in the event of complaints.

### ***Conclusion***

ONA encourages the government to listen to the voices of well-positioned health-care professionals to provide feedback on the proposal to create a regulation authority. Creating a regulatory body alone does not solve the sector's retention and recruitment issues. The government must implement policies addressing the root causes of the PSW shortage, namely uncompetitive wages and untenable working conditions that are depleting the workforce.