

# FRONT LINES



## Public Enemy

As health-care privatization continues to rear its ugly head, ONA members push back to protect our treasured system



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## FRONTLINES

**EDITOR:** Ruth Featherstone

**CONTACT:**

The *Front Lines* editor at [frontlines@ona.org](mailto:frontlines@ona.org).

**CONTRIBUTORS:** Sheree Bond, Imreet Kaur, Katherine Russo

**ONA PROVINCIAL OFFICE**

85 Grenville St.  
Toronto ON M5S 3A2  
**TEL:** (416) 964-8833  
**TOLL FREE:** 1-800-387-5580  
**FAX:** (416) 964-8864  
**EMAIL:** [onamail@ona.org](mailto:onamail@ona.org)

ONA is the union representing 68,000 registered nurses and health-care professionals and more than 18,000 nursing student affiliates providing care in hospitals, long-term care facilities, public health, the community, clinics and industry.

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# ONA MAIL



## Pay “Check”

*The following is snippets of an op-ed, penned by ONA President*

*Erin Ariss, which was published in the Peterborough Examiner on August 19.*

In good news for everyone in this province, hospital nurses are set to receive pay increases that recognize how far behind they’ve fallen financially over the past decade.

If fairness is starting to be restored for these highly educated, highly skilled professionals, the same can’t be said for local nurses at Ross Memorial Hospital. Fully six months ago, it was the target of a cyberattack, which is playing havoc with payroll. Rather than taking responsibility for sorting out the issues stemming from it and ensuring nurses are paid properly, Ross Memorial management has told them to figure it out for themselves.

RNs are being asked to review their own payroll records for the past six months and determine if they are correct. This can include recalling time off, hours worked and other details from months prior. They can only do so while on shift, using a computer system only available at work.

Just like in the rest of the province, nurses at Ross Memorial constantly work understaffed. Being asked to find time during a shift to review their payroll records and assess their accuracy only adds to this untenable workload, leaving them to worry about the quality of care they can provide to their patients.

It is the fundamental role of an employer to properly pay its workers. Additionally, having strong data security measures and clear contingency plans for any breach that

may occur is a reasonable expectation for any large employer.



## Big Picture

*The following letter to the editor by Region 1 Vice-*

*President Dawn Armstrong was posted on BayToday.ca on June 2.*

North Bay Regional Health Centre CEO Paul Heinrich has painted a rosy picture of the conditions and stability of the hospital’s emergency department (ED). The RNs in the ED, however, know that the picture is much bleaker.

While Mr. Heinrich admits the ED needs more physicians, he fails to mention the serious nursing shortage, horrendous working conditions and exceedingly high attrition rates of the ED nurses as they burn out, face violence and see no support on the way.

The ED has eight vacant full-time and seven vacant part-time RN positions. In an upcoming one-month timespan alone, there are 108 RN unfilled shifts. Experienced RNs are leaving; they are constantly working short-staffed and unreasonable amounts of overtime, and trying to

care for patients who are housed in the ED because of a lack of beds. They know they cannot possibly provide safe, quality patient care under these circumstances. This means the ED is being staffed with newer nurses who lack access to or support from their more seasoned colleagues.

Our nurses are desperate for time off to recover from their exhausting shifts, yet more than 90 per cent are unable to take vacation time over the summer.

As tragic as this is, it is the true picture of the status and stability of North Bay’s ED.



## HAVE SOMETHING TO SAY?

We’d love to hear from you! Send your comments to the *Front Lines* editor at [frontlines@ona.org](mailto:frontlines@ona.org).

## Events and Observances



The following are key happenings and commemorative dates until the next issue, which we are acknowledging and/or celebrating provincially (and you can do so locally):

- ▶ **November 6-12:** Medical Radiation Technologists Week
- ▶ **November 11:** Remembrance Day
- ▶ **November 13-19:** Nurse Practitioner Week
- ▶ **November 20-24:** National Nursing Students’ Week
- ▶ **December 3:** International Day of Persons with Disabilities
- ▶ **December 6:** National Day of Remembrance and Action on Violence Against Women
- ▶ **December 10:** Human Rights Day



Check [ona.org](http://ona.org) for more information.

From ONA President  
Chronique de la présidente, AIIO  
**ERIN ARISS, RN**



Follow Erin at [twitter.com/erinariss](https://twitter.com/erinariss).

## Fifty Never Looked so Good!

**RIGHT AROUND THE TIME YOU RECEIVE THIS ISSUE OF *Front Lines*** in the mail, ONA will be officially celebrating our five decades of existence at our Biennial Convention. And I may be biased, but I don't think 50 has ever looked so good!

Since our inception, ONA has always been on the forefront of historical wins that not only impact our members, but our patients, residents and clients, and quite often other workers in Ontario. Thanks to our relentless lobbying, we were behind much-needed amendments to occupational health and safety legislation on violence in the workplace. We achieved unique professional responsibility language that continues to result in meaningful changes to our workplaces and the care we are able to provide. We were included in presumptive PTSD legislation, so critical with your workplace experiences. We won a precedent-setting case at the Supreme Court of Canada about the method employers must use to maintain proxy pay equity for their predominantly female workforce. This is just a small sampling of our successes; it would take this entire issue to list them all!

Yet, despite these wins, we must also acknowledge that the challenges continue. Almost 50 years ago, public nurses at the Muskoka-Parry Sound Public Health Unit hit the pavement waving impossible-to-miss hand drawn signs to demand a fair collective agreement, including wage improvements. Today, as I write this column, 50 public health nurses from Hastings and Prince Edward Public Health are striking for the very same reason (see page 7), and I believe their handmade picket signs are still more powerful than anything we could produce en masse. Thirty-five years ago, ONA launched an *Industry in Crisis* position paper and the results of a sobering poll on the emerging nursing shortage, backed by a strong ad campaign in 13 major daily newspapers. Today, we are still dealing with a dire shortage (see page 31), and ONA continues to raise public awareness through a series of hard-hitting campaign ads, including in provincial dailies.

While this clearly demonstrates that ONA and our members have always been willing to take a stand throughout the past 50 years, what has changed is just how many of you are doing so! We are now seeing a movement of

members coming together with one collective voice to push back on issues that are important to you like never before. And so, as ONA turns the big 5-0, it is each and every one of you I must thank.

As a small token of our appreciation for your dedication to your patients, residents and clients, your profession, your union and your community, we are including a special 50<sup>th</sup> anniversary gift in this issue of *Front Lines*. We hope you will carry it with you as a reminder that your union is always on hand and we are all in this together.

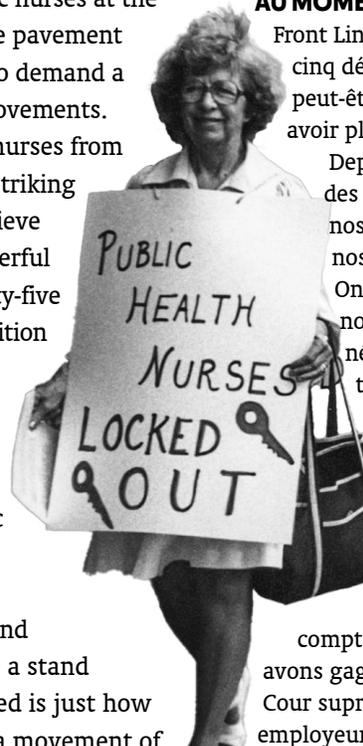
Right from my days as a somewhat anxious new nurse, ONA has absolutely changed my life. And now as your Provincial President, I am so proud to have been a small part of the history of this remarkable organization with all of you. I hope you will take some time to reflect on what you are celebrating during this special anniversary, and then help us start achieving equally impressive wins in the next 50 years and beyond!

## La cinquantaine n'a jamais eu si fière allure!

**AU MOMENT MÊME OÙ VOUS RECEVREZ CE NUMÉRO** de Front Line par la poste, l'AIIO célébrera officiellement ses cinq décennies d'existence à son congrès biennal. J'ai peut-être un parti pris, mais je ne pense pas qu'on puisse avoir plus fière allure à cinquante ans!

Depuis sa création, l'AIIO a toujours été à l'avant-garde des victoires historiques qui touchent non seulement nos membres, mais aussi nos patients, nos résidents et nos clients, et bien souvent d'autres travailleurs en Ontario. Grâce à nos efforts incessants de lobbying, nous avons appuyé des amendements importants et nécessaires aux lois sur la santé et la sécurité au travail concernant la violence en milieu de travail.

Nous avons adopté un langage de responsabilité professionnelle unique qui continue d'entraîner des changements significatifs dans nos milieux de travail et dans les soins que nous sommes en mesure d'offrir. Nous avons participé à la mise en œuvre de la présomption législative d'état de stress post-traumatique, un élément essentiel compte tenu de votre expérience en milieu de travail. Nous avons gagné une cause qui a établi un précédent devant la Cour suprême du Canada au sujet de la méthode que les employeurs doivent utiliser pour



SUITE À LA PAGE 32



From ONA First Vice-President  
Chronique de la première vice-présidente, AIIO  
**ANGELA PREOCANIN, RN**



Follow Angela at [twitter.com/4angiepreocanin](https://twitter.com/4angiepreocanin).

## Solidarity is not Just a Buzz Word

### MY ABSOLUTE FAVOURITE PART OF BEING IN A UNION

is this overwhelming and comforting sense of belonging to something so much bigger than my own little world. And never in all my time at ONA – and I would boldly suggest our entire 50-year history – have there been such shining examples of solidarity.

Let me give you just a few. During our spring hospital bargaining campaign, our members and allies came out in full force to demand better staffing, care and wages. Those allies signed and gathered signatures for our petitions. They launched their own email campaigns. They wrote letters to the editor on our behalf and lobbied their MPPs. The list goes on.

As part of a five-union coalition, and along with our friends at the Ontario Health Coalition, we are fighting health-care privatization and bringing public awareness to the serious ramifications of this growing trend in all corners of the province (see cover story).

And our striking Hastings and Prince Edward Public Health members have been joined on their picket line by other members, staff, community groups, the public and fellow unions, including CUPE members, who are sadly in the same boat (see page 7). Their supporters have written letters to their Board of Health demanding they reach a fair settlement. They have held phone zaps and come out to rallies. They have donated much-needed gift cards, snacks and comfort. They have truly gone above and beyond.

Why is this so important? In the troubling days of governments and employers trampling all over workers' rights, the voices of a few ONA members directly impacted by a certain situation, such as a strike of their Bargaining Unit, are strong. But the voices of 68,000 members behind them are even stronger. And the voices of those 68,000 members, plus our union and community friends are off the charts! That's what moves the needle. That's what effects change. And it goes both ways.

Look at the grocery workers from 27 Metro stores in the Greater Toronto Area, represented by Unifor. They braved a month-long strike to demand a fair contract from an employer that was reaping record and, quite frankly, grotesque profits. ONA immediately issued a media statement to show our unwavering support, while many of you joined picket lines

(see page 30), shared our social media posts and refused to buy groceries at Metro while these workers, who, like all of you, sacrificed so much during the pandemic, struggled to put food on their own tables. As a result, they received a significant boost in wages and set a precedent for future negotiations, not only for themselves but other unionized grocery workers. The old union adage of *workers united will never be defeated* couldn't have been clearer, and it was you who helped make that happen.

And it's not just during job action. Solidarity is about coming together to push for workload and other changes in your places of employment that benefit not only you, but other staff and those under your care through our unique professional responsibility clause. It's about forming allyships with marginalized groups you are not a part of and who desperately need your advocacy. It's about so much more.

What solidarity isn't is just a buzz word. It's not simply saying you care; it's showing it. You are doing that in spades, and I implore you to please keep it up. After all, you never know when you might be the one who needs others in your corner, and I have no doubt our allies will continue to be there!

## La solidarité n'est pas qu'un mot à la mode

### CE QUE JE PRÉFÈRE DANS UN SYNDICAT, C'EST CE

**SENTIMENT** d'appartenance extraordinaire et réconfortant à quelque chose de beaucoup plus grand que moi et mon petit monde. Jamais au cours de tout le temps que j'ai passé à l'AIIO – et je suggérerais avec audace, durant toute notre histoire de 50 ans – il n'y a eu des exemples aussi frappants de solidarité.

Permettez-moi de vous en donner quelques-uns. Au cours de notre campagne de négociation du printemps dans les hôpitaux, nos alliés se sont mobilisés pour appuyer nos demandes visant à améliorer l'embauche, les soins et les salaires. Ils ont signé et recueilli des signatures pour nos pétitions. Ils ont lancé leurs propres campagnes par courriel. Ils ont écrit des lettres aux rédacteurs en chef en notre nom et ont fait du lobbying auprès de leurs députés. La liste est longue.

Dans le cadre d'une coalition de cinq syndicats, et avec nos amis de l'Ontario Health Coalition, nous luttons contre la privatisation des soins de santé et sensibilisons le public aux graves ramifications de cette tendance croissante dans toutes les régions de la province (voir la couverture).

SUITE À LA PAGE 32





## MEMBERS GET LOUD!

# Not Defeated: Members Launch Campaign to Fight Layoffs

When government funding was pulled from the high-acuity unit at Stevenson Memorial Hospital in Alliston, resulting in the layoff of several nurses, Local leaders organized a strong fight-back campaign targeting their MPP.

“The fact that there were layoffs was just dumbfounding,” said Local 134 Coordinator Char Lameront. “This is a small community hospital with limited resources that was opened in the 1920s with funding from Loblaws. In the 1960s, it expanded to serve about 7,000 patients a year and hasn’t expanded since. But it now serves more than 40,000 patients a year, and supports the staff of Honda and all their companies in the area.”

Making matters even worse, Lameront noted that the hospital received critically injured patients they were not equipped to care for. There was no doctor or respiratory therapist on site and no room at larger hospitals they contacted, forcing them to try and take care of these patients without the resources needed.

“The pandemic happened and suddenly the funding became available for a high-acuity unit,” she explained. “The employer hired 14 critically care trained nurses and then suddenly this spring, because of course the pandemic was over and people don’t have any other critical illnesses or are ever critically injured, the high-acuity unit was no longer required and funded by the government. With less than two weeks’ notice, these nurses were told they had no work to come back to. We knew we had to fight back.”

And along with Stevenson Memorial Hospital Bargaining Unit President Carey Finn, that’s exactly what she did. With the assistance of ONA staff, a postcard demanding the layoffs be rescinded was designed and delivered to our April Provincial Leadership Meeting, which many of those in attendance signed. Lameront sent them to their MPP.

“We took the postcards home and started getting members and community people, including patients,

to sign. So, I was mailing packages of 50 to 100 postcards to our MPP two to three times a week and Carey was dropping them off in bulk on her way to and from work. When she first started going, our MPP said, ‘oh, hi, nice to see you,’ but by the third week, it was ‘oh, not you again!’”

Lameront also sent an email to the president of Honda Canada Manufacturing, asking if the company was aware that if their staff get hurt, Alliston can no longer support them. The next week, she saved up all the new postcards and mailed to him to let him know the community agrees with ONA. When she was told she must have made a mistake as they were clearly meant for the MPP, she replied she included a postage-paid envelope with the postcards so Honda could forward themselves and understand how important this fight is!

Also, with the help of staff, the leaders launched an email campaign to the MPP and Premier Doug Ford and “started firing those emails every



Local 134 Coordinator Char Lameront, RN

day. I told people to overwhelm those mailboxes.”

Unfortunately, funding to reinstate the high-acuity unit hasn’t returned, meaning the nurses aren’t back at work, and “we are going to be right back to where we were before the pandemic with having to tell a family their loved one is in diabetic ketoacidosis and we can’t take care of them.”

Still, our members are not defeated, with ONA President Erin Ariss noting that a lot of good has come from this campaign.

“This is a disgraceful situation, and we are experiencing the same thing across Ontario. This government is shameless, hiding from nurses and refusing to be accountable for their decisions. It doesn’t mean we give up the fight. Char and Carey have informed the community so many more understand what’s going on, which is a huge accomplishment. This isn’t over. And we can absolutely change the outcome at the ballot box in 2026.”

## On Strike! PHNs Demand Better Contract

Fifty ONA members from Hastings and Prince Edward Public Health have been forced to strike after the employer refused to bargain a fair collective agreement.

The public health nurses, who provide a wide range of services to 200,000 residents in a catchment area of more than 7,000 kilometres, including immunization clinics, health services for students and families, street outreach, tobacco cessation, monitoring for outbreaks, and sexual health clinics, have been without a contract since last December and began their job action on August 21, triggered after the employer filed for a no-board report.

“Throughout bargaining and conciliation, the employer came to the table with just one monetary offer, showing no good faith,” said ONA President Erin Ariss. “They also declined our offer to go to voluntary arbitration to avoid a strike. Our members have gone above and beyond to negotiate a fair collective agreement that recognizes their value and keeps up with cost of living after years of real wage erosion. Instead, they were pushed out the door. These are the same dedicated nurses who worked throughout the pandemic to protect their community and provide services their residents rely on, made even more challenging by a serious shortage of primary care providers.”

### Silenced

Unfortunately, the nurses have also been undemocratically denied requests to address several county councils as well as Belleville City Council, sparking a Nurses Won't Be Silenced action. The nurses symbolically protested outside council chambers holding signs and sporting pink tape over their mouths (see photo on page 2).

That was just one in a series of escalating actions our members have taken since the strike began. Apart from their daily pickets to hand out flyers and gather signatures for a petition to the health unit's Board of Health, they participated in a community picket where the public, who have overwhelmingly supported the strike, were asked to bring an item for a local foodbank; held sticker up and poster up days of action; staged an “all-out” rally outside a Board of Health meeting with CUPE Local 3314 members, who were also on strike at press



Striking ONA members from Hastings and Prince Edward Public Health stand strong in their demand for a fair collective agreement this past August.

time; collected school supplies in support of United Way's Backpack for Success; strategically targeted members of the Board of Health at their businesses; and much more.

ONA set up a dedicated webpage chock full of information about and photos from the strike, sent frequent email blasts to members, posted regular updates on social media, which many shared, and launched an online emailer to call on the Board of Health/mayors to reach a fair deal (almost 2,500 emails had been sent at press time!)

### Solidarity

Solidarity on the picket line was strong with the ONA Board of Directors, fellow members and staff, sister unions, including the Ontario Federation of Labour and Canadian Federation of Nurses Unions, community groups such as the Decent Work and Health Network, local businesses, the general public, and NDP leader Marit Stiles marching alongside our members, sharing their plight on social media, donating gift cards and offering to assist in any way possible. Justice for Workers also co-hosted a phone zap to put pressure on the Board of Health and city council members.

“Our members are eager to return to providing care and services and will do so as soon as their employer finally returns to the table with a respectful offer,” concluded Ariss. “Their fight is the fight of all ONA members and I know you stand with me in supporting them.”



At press time, the strike continued. To listen to the radio ads and learn the latest, including ways to help, see [ona.org/HPE](http://ona.org/HPE).

## Fighting for Funding!



Forty-eight members at the Rapids Family Health Team operating in Sarnia Lambton staged a lunch-time information picket on June 27 in the lead-up to conciliation for a new contract. These highly-skilled members, including RNs, NPs, RPNs, dietitians, social workers, occupational therapists, case managers, chiropractors and health administrators, provide services to approximately 78,500 patients, ranging from primary care to special respiratory clinics to keep them out of the emergency department. ONA and the employer recently sent a joint letter to Health Minister Sylvia Jones and the Association of Family Health Teams of Ontario calling for increased funding dedicated to wages and benefits for family health teams across the province. By doing so, the government can play a crucial role in ensuring Ontarians receive high-quality primary care close to home, the letter stated.



### Fascinating Fact

In April 2012, public health nurses in Haldimand-Norfolk commence job action, the first strike of ONA members in a decade, and settle 12 days later.

## Forward-Thinking: Members Envision Future of Nursing

To go along with our Nursing Week 2023 theme of *Lasting Impact, Forging our Future*, we asked members via social media exactly how you envision that future for nurses.

Here, in our continuing series, are the final five submissions we chose to receive a Tim Horton's gift card. You can read the other five in the summer 2023 issue of *Front Lines* or at [ona.org/nw](http://ona.org/nw).

The Nursing Week Advisory Team, chaired by Region 5 Vice-President Alan Warrington and comprised of one ONA member per region and staff, is already planning for Nursing Week 2024. Stay tuned for more information in the weeks and months to come!



*Safe nurse-to-patient ratios.*

*Fair financial compensation for ALL nurses.*

*Reasonable access to vacation time.*

*Safety in the workplace, free from violence and harassment.*

— Ashley Sivret McQuarrie, RN



*My wish for all nurses who will be part of our future is that you all carefully watch the current climate we are working in and government actions and see this as a need to take action and advantage of the resources ONA provides so you can take up the fight.*

— Jo-Dee Brown, RN



## I am a Nurse

*I am a nurse. I do everything for my patients and my colleagues.*

*I am a nurse that supports my patients to walk to the hallway and to the bathroom to regain their strength, and not be deconditioned in bed, get more pressure ulcers and become weaker.*

*I am a nurse that feeds patients that are not able to use their hands, especially stroke patients or any condition that impedes their ability to use their fine motor skills.*

*I am a nurse that helps patients remember what they used to do, or patients who are unable to remember who they are, especially with dementia and delirium.*

*I am a nurse that has been punched, kicked, spat upon, especially by patients with alcohol withdrawal and behavioural issues. I understand these are behaviours and do not take it personally, but I suffered.*

*I am a nurse that holds the hands of dying patients and prays for their souls.*

*I am a nurse that holds hands when patients cry, and no one is at their sides.*

*I am a nurse that holds my patients' hands when they are in pain and reassures them that everything is going to be alright. I listen to their pains and give them some pain relievers.*

*I am a nurse that holds my patients' hands, so they feel they are not alone, that I am present and there when they need a friend.*

*I am a nurse that holds my patients' hands when they are in distress, anxious and depressed.*

*I am a nurse who tries her best to get my patients' health condition stabilized, and to avoid calling a Code Blue.*

*At the end of the day, I leave the unit with a smile on my face.*

*Not only am I a nurse, but I am an activist fighting for the rights of nurses. I go on the street and express what I want, and let the public know of the need to forge our future in nursing.*

*I fight to help our government respect our nurses and to CHANGE some policies. I fight to increase our wages and staff to help lessen our ever-*

## ★ TOP ENTRY! ★



*increasing workloads. The pandemic made nurses very stressed, and we demand respect and compensation. It was never given to us, and that's why I joined the nursing movement.*

*I am not just a nurse, I join the political actions of our union and demand more.*

*I am not just a nurse, I support my colleagues at my workplace and the institutions I worked. We demand RESPECT. I shout for CHANGE. My support towards changing the health-care system will continue.*

*I am not just a nurse at the bedside, I support nursing students today. I teach them to think critically, improve their clinical skills, communicate better and become excellent nurses. I will be retiring, and I want to share what I've learned and experienced as a bedside nurse. I have mentored and preceptored not just nursing students but colleagues as well.*

*I love my job as a professional nurse. I am proud of it, even if I am cleaning diapers or giving total care to all my patients. It's my calling to serve the very vulnerable population in various walks of life in a non-judgmental way. At the end of the day, I can say mission accomplished.*

*To be a nurse is a humbling profession and I am very proud of it. I will always be a bedside nurse, not aiming to go up higher in my profession even though I know I can. But my patients need me at the bedside. I am humbled to be of good service to my very sick patients.*

*I give my best to them.*

— Gloria Cardinal-Tan, RN



*We deserve having the same pay as any man. Nursing deserves the same pay as the police or firefighters – enough is enough.*

— Maryse Poulin, RN



*My vision is that all nurses and their input regarding the protection of our health-care system will be valued by the politicians who make decisions that affect health care.*

— Kelly Quill, RN



ONA  
Members

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## ONA Welcomes NPs after Challenge from Employer

ONA is excited to welcome nurse practitioners from University Health Network (UHN)-Princess Margaret Hospital (PMH), which challenged their ability to join.

The NPs were concerned with a number of issues with their employer, including low wages, a lack of transparency, high turnover rates and not having a voice, and decided to seek union membership. They voted overwhelmingly in favour of joining ONA. But the employer did not make it easy.

"The employer took the position that we had to organize all NPs across UHN sites and added over 100 names to the list," said ONA Labour Relations Officer Debbie Tungatt. "They argued that it was one entity and that organizing just PMH would cause labour disruption and undue fragmentation. ONA argued that the PMH NPs had special expertise and that there was very little, if any, meaningful cross-over between sites."

At a hearing before the Ontario Labour Relations Board (OLRB) to resolve the dispute, ONA reiterated our compelling arguments. The OLRB agreed with ONA, ruling in the NPs' favour.

"By the time the decision came through, there were 29 NPs," added Tungatt. "It's a very good win for ONA and a very good win for the NPs."



### Fascinating Fact

ONA welcomes our first all NP Bargaining Unit from the Canadian Mental Health Association in Windsor in September 2010.

# Happy Anniversary, ONA!



## “Nurses and nursing were her life:” Family Shares Founding CEO’s Prestigious Honours

The family of ONA’s late CEO Anne Gribben couldn’t think of a better time to share her many prestigious awards with the union she helped form than our 50<sup>th</sup> anniversary.

“Anne was an incredible person,” said niece-in-law and former ONA President Sandy McAllister Gribben. “Nurses and nursing were her life. She followed ONA and its accomplishments and heartaches all through retirement.”

For that reason, McAllister Gribben was keen to see her remembered, sending ONA a box full of her aunt-in-law’s memorabilia, including her Order of Ontario, Golden Jubilee Medal, a stack of photos – even her nursing cap! Many of those items will be on display at ONA’s November Biennial Convention, where our 50<sup>th</sup> anniversary will be celebrated.

“ONA should be proud that she was recognized for her accomplishments on behalf of nurses,” McAllister Gribben said. “She deserved to be honoured.”

Even in her early days as a front-line nurse, Gribben was determined to focus on the poor working conditions and inadequate financial remuneration nurses had to contend with, noting “by 1965, I was committed to the need for collective bargaining and joined the staff of the Registered Nurses’ Association of Ontario’s (RNAO) Employment Relations Department, which had been formed to bargain on behalf of nurses. We



talked to nurses about their problems and the advantages of collective bargaining, and by the end of that year, had our first group certified.”

After ONA was formed in 1973, bringing together 100 groups of nurses that had been certified as independent unions, Gribben was named CEO, a position she held until 1986. Under her tenure, membership grew to more than 42,000 and her goal of representing nurses in our first hospital central negotiations was achieved.

“There are two things I’ll always remember about Anne,” McAllister Gribben explained. “Before she went to work for RNAO, she was head nurse of the emergency unit at Toronto Western Hospital. One of the urologists that I worked with in St. Catharines remembered her well from his residency days and said, ‘she kept all the doctors in line; none was allowed to criticize HER nurses!’”

And the second?

“When she was in palliative care in the Coburg General Hospital in 2014, the Director of Nursing spoke with her and mentioned she started out as a nurse. As she was leaving, Anne said, ‘never forget that you were a nurse first!’”



## Where’s My Annual Planner?

We know how much our members love the annual planner that is included in the fall issue of *Front Lines* each year, and while you won’t see it here, don’t worry!

Because ONA is undergoing an extensive rebranding exercise, which will be revealed at the November Biennial Convention and detailed in the next issue of *Front Lines*, we wanted to make sure our annual planner also reflects our new look and feel. After all, you carry it around for more than a year!

For that reason, the annual planner will be included in the next (winter) issue of *Front Lines*. The 2023 annual planner you received last year includes January, February and March 2024, so you’re covered until then!

# Happy Anniversary, ONA!



## Past, Current ONA Presidents Reflect on Their Time in Office

We asked several past and present ONA Presidents, representing all five decades since our union came to be, to tell us about their biggest memory, joyful or solemn, from their time in office. Here are their poignant responses.

In the weeks to come, you will be able to view videos of these presidents reflecting on ONA's past, present and future, which will be unveiled at the November Biennial Convention, at [ona.org/celebrate50](http://ona.org/celebrate50).



*"During the early ONA days, we produced something called, Let Us Take Care, which took the form of a newspaper edition with lots of photos and stories, to inform the public of the misuses of health-care dollars and the sorry state of health care in the province. We had 120,000 of those newspapers distributed throughout the province, and we had to do a second print run because it was so popular and we kept getting requests for copies."*

— Sandy McAllister Gribben, RN, President 1979



*"The biggest success for me as ONA President was having our male union counterparts finally listen to ONA and take us seriously. We had been given the name 'association,' and those male-dominated unions at the time thought, 'Oh, they're just women fighting for the usual causes.' But we were a strong union, fighting for our members for better wages, working conditions, health and safety, etc. – all things that ONA is still involved with today. Instead of the usual pat on the head, they actually started to take notice of us."*

— Gloria Lynn, RN, President 1987



*"During the '90s, we dealt with a lot of pay equity cases in front of the Tribunal, and there were many rulings against us. The government had taken a position that we couldn't use police as the male comparator in our public health and home sectors but withdrew their stance. And so, eventually it was awarded. Nurses are equally educated, if not more educated, than some of the male professions, yet get treated much differently. So, pay equity was an important factor. Proxy pay equity also came into effect, which impacted almost half-a-million women in the province."*

— Lesley Bell, RN, President 1990



*"SARS was at forefront of the news, and we tragically lost two nurses and many others became ill. ONA focused full-time on it, looking at how best to protect the public and nurses. It was difficult to get that message out because there were people in authority who said, 'no, you don't need an N95 mask. You'll be OK with just a surgical mask or maybe no mask at all, depending on where you work.' We presented to the SARS Commission, headed by Judge Archie Campbell, on what happened and what could have been done differently, and he had a very high regard for what we said. Many recommendations came out of that commission that, had they been implemented, would have paved the way for a more successful addressing of COVID-19."*

— Barb Wahl, RN, President 1997-2003



Read much more about ONA's 50th anniversary at [ona.org/celebrate50](http://ona.org/celebrate50).



***“There are many highlights, but our improvements in bargaining stand out. As a union, our main focus is to improve the socioeconomic working conditions for our nurses and health-care professionals, and if I think back over the 40 years I***

***was involved in bargaining at the Local and provincial level, we achieved maternity leave top-up, retiree benefits, weekend premiums and the mentorship allowance. Many are just accepted as the norm now, but they came from people like me and many others, fighting each and every day for these small things that stacked together make our quality of worklife better.”***

— Linda Haslam-Stroud, RN, President 2004-2017



***“My presidency was largely during COVID-19, and our nurses and health-care professionals were working in very difficult times. So many things happened to them in relation to the pandemic, but at the same time, the work of***

***the union continued. We had – and still have – a very unfavourable government with harsh legislation, including the notorious Bill 124. In fact, there were at least seven pieces of legislation brought in during those four years that were detrimental to health-care workers. And ONA fought them the entire time I was President. We’ve been in the courts. We’ve been at the Supreme Court. And we won major battles. At the same time, our members continued to persevere and care for Ontarians. The highlight for me is their resilience.”***

— Vicki McKenna, RN, President 2018-2021



***“My favorite highlight from my time as Interim President was breaking away from the status quo, bringing ONA out into the public when we were bargaining for the hospital central contract. After Bill 124 was overturned by***

***the courts, it was an opportunity for us to say to the government, let’s get back to the table. Let’s improve the worklife for nurses and health-care professionals in Ontario. And why is that critical? Because nurses have been leaving, resulting in a serious nursing shortage. A better contract, with wage increases our members deserve, is a step towards resolving that. ONA garnered more than 510 media hits in the first four months of 2023, which was a drastic increase for us, and a huge uptake in our social media streams.”***

— Bernie Robinson, RN, Interim President, 2022-2023



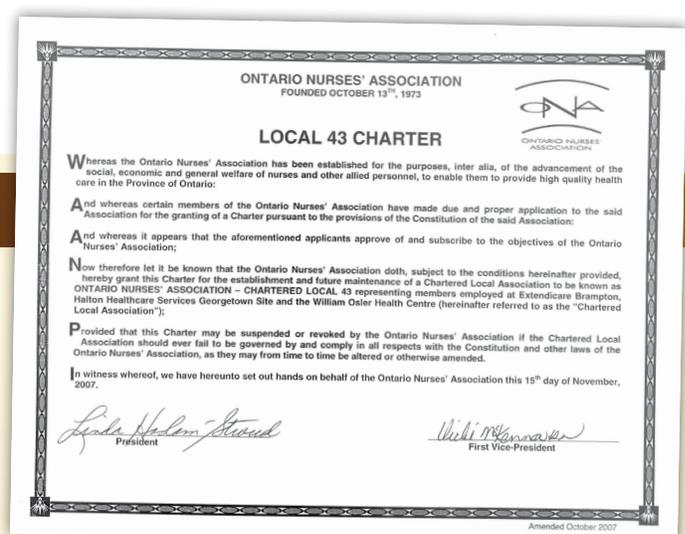
***“We’re seeing ONA members by the thousands, across all sectors and all corners of the province, become engaged. You’re part of something special – a movement that’s more than what it has ever been in the past. You’re no longer silent; you’re***

***no longer in the corner. We’re seeing things such as pickets and rallies in this collective power that’s escalating and escalating. And the best part is this is just the beginning. This is hugely exciting for me.”***

— Erin Ariss, RN, President 2023 to present

## Local 43 Shares How it All Began

In honour of ONA's 50th anniversary, William Osler Health System Bargaining Unit President Joan McCollum sent us some history of her own: Local 43's Charter from 2007, signed by then ONA President Linda Haslam-Stroud and First Vice-President Vicki McKenna! The charter establishing Local 43 includes Extendicare Brampton, Halton Health Services Georgetown and William Osler (Peel Memorial Hospital established in 1925 and Etobicoke General Hospital established in 1972).





## Health Sector Spending Report Released

On May 31, the Financial Accountability Office (FAO) pointed out that high inflation, persistent human resource shortages in the health sector, and an ongoing legal challenge to Bill 124 pose potential risks to the province's spending forecast.

Ontario earmarked a substantial \$4.4 billion in excess funds, which could be utilized to support both new and existing health-care programs. Ontario also got a boost in federal health transfers to the province, totalling \$7.7 billion over five years, spanning from 2023-24 to 2027-28.

While the government continues to invest significantly in infrastructure projects, ONA has been calling for similarly substantial investments in recruiting and retaining nurses and health-care workers within the province.

## Temporary Licensing for Out-of-Province Health Professionals Troubling: ONA

In a submission dated July 7, ONA expressed concerns about proposed regulatory amendments under the *Medicine Act of 1991*. These amendments aim to grant "as-of-right" licensing for nurses, enabling RNs from other provinces to temporarily practice in Ontario without registering. These regulations do nothing to address the provincial nursing shortage crisis.

We continue to emphasize the need for the government to collaborate with nurses to enhance their working conditions and develop a more comprehensive strategy for retaining and recruiting nursing professionals.

## Proposed Changes to Regulate Physician Assistants a Concern

ONA has emphasized our concerns regarding the proposed amendments to regulate Physician Assistants (PAs).

In a submission made on July 31 to the government, we pointed out that these changes do not expand the role of PAs beyond their current responsibilities. Using a title for PAs that includes "registered" gives a misleading impression that PAs are fully regulated care providers.

## Ontario Increases Funding Share for Local Health Units

Health Minister Sylvia Jones announced a return to the original 75/25 funding formula for public health units on August 22. This change will be accompanied by a one per cent annual increase in base funding for public health units over three years, starting in 2024.

Minister Jones also unveiled one-time transitional funding to support public health agencies interested in merging to enhance community service delivery.

## New LTC Minister Announced

On September 4, Ontario Premier Doug Ford revealed a cabinet reshuffle following the resignation of Municipal Affairs and Housing Minister Steve Clark amidst the Greenbelt scandal. Stan Cho has replaced Paul Calandra as Minister of Long-term Care. Cho was previously the associate Minister of Transportation.

## Lack of Government Oversight Failed LTC Residents: Report

ONA is calling for the full implementation of the Ombudsman's recommendations

to ensure that long-term care (LTC) inspectors are given proper training, tools and PPE to carry out their jobs in helping to protect residents.

The report by Paul Dubé on the inspection regime for LTC homes during the pandemic, released on September 7, found shortcomings in "nearly every aspect" of the inspections branch's processes when COVID-19 hit, noting the LTC Ministry "had no plan or guidelines for how to do inspections during a pandemic, so none were done for seven weeks, even as reports of outbreaks and health risks to residents and staff inside the homes poured in."

Among Dubé's 76 recommendations is that the Ministry should "ensure that the inspections branch always has inspectors immediately available to inspect on-site at long-term care homes ... (and) establish a policy clearly setting out what types of issues can be inspected using an off-site process, or a blended off-site and on-site approach."

"The Ombudsman's report clearly outlines that the Ford government failed residents when they needed protection the most," said ONA President Erin Ariss. "It was during the pivotal time at the start of COVID-19 that inspectors should have been given clear direction from the Ministry to thoroughly inspect long-term care homes."

In fact, as early as February 14, 2020, ONA wrote to the Ministries of Labour, Health and LTC demanding they undertake proactive inspections within health-care facilities, but was ignored.

We are hopeful the Ombudsman's report will spur much-needed changes and improvements to the Ministry's inspection system.



## KNOW YOUR RIGHTS



### National Indigenous Peoples Day Time for Celebration, Reflection, Recommitment

National Indigenous Peoples Day this past June was another opportunity for ONA to showcase our strong commitment to supporting Indigenous members while recommitting to building a union that actively works towards reconciliation, anti-racism and anti-oppression (ARAO).

Each year, Indigenous peoples and communities celebrate their culture and heritage on or near June 21, the summer solstice, the longest day of the year. In honour of



the occasion, members participated in events throughout the province, including a sacred Sunrise Ceremony at Toronto's Nathan Phillips Square. A Sunrise Ceremony is a deeply spiritual and personal ceremony performed to welcome the beginning of a new day and express appreciation for life and nature. The Government of Canada also recognizes June as National Indigenous History Month.

"While National Indigenous Peoples Day provides an opportunity to celebrate, recognize and honour the distinct heritage, cultural practices, spiritual beliefs and outstanding contributions of First Nations, Inuit and Métis people across the country and reflect on the atrocities of the past, this is not something we do for one day only," said Region 3 Vice-President Karen McKay-Eden, who holds the portfolio of human rights and equity. "We must continue to confront our legacy of oppression and violence towards Indigenous peoples and take responsibility for reconciliation, justice and equity every single day of the year. ONA's 2022-2026 ARAO Action Plan is guiding our critical work in this area, and I encourage all members to familiarize yourself with it" (see [ona.org/arao](https://ona.org/arao)).

In recognition of the day, ONA produced downloadable graphics for members to share (see image) and provided a plethora of information and resources on our website ([ona.org/news-posts/nipd/](https://ona.org/news-posts/nipd/)).



To learn more, visit the website for the National Centre for Truth and Reconciliation at [nctr.ca/](https://nctr.ca/).

### Nursing Homes Team Elected

By the time you receive this issue of *Front Lines* in your mail, a new Nursing Homes Central Negotiating Team (NHCNT) will be in place.

The team, tasked with negotiating our next central contract with participating nursing home employers based on member priorities from our recent *Have a Say* bargaining survey, is comprised of one member with entitlements from each of ONA's five regions working in this sector. The President and CEO also serve as ex-officio members of the team.

A call for nominations went out in mid-summer, with the election taking place in the fall for Regions 2 and 5 (there was an acclamation in Region 4, and because no candidates came forward for Regions 1 and 3, nominations were taken at their Area Coordinators Conferences in October, with an election for voting delegates in attendance).

The next issue of *Front Lines* will list the new members of the NHCNT.



For information on the team, visit [ona.org/nhcnt](https://ona.org/nhcnt). Bargaining updates will be posted at [ona.org/bargaining](https://ona.org/bargaining).

### ONA Unveils Anti-Racism, Anti-Oppression Education

ONA is proud to announce the launch of our education offering, *Beyond Good Intentions: Understanding Anti-Racism and Anti-Oppression*.

This half-day e-course will provide members with awareness about intersectional forms of racism through an anti-racism and anti-oppression lens, and encourage them to support, advocate and/or become an ally of Indigenous, Black, Racialized and historically marginalized communities to combat systemic racism in our union, workplaces and communities. Upon completion, members will receive a certificate.

You can access the e-course on ONA's eLearning platform at [elearning.ona.org](https://elearning.ona.org).

# Toronto Caribbean Carnival: Members Behind an ONA First!



This is definitely one for the history books!

For the first time in ONA's 50 years, members participated in the Grand Parade of the Toronto Caribbean Carnival, a spectacular display of costumes, music and culture gifted to Canada by the Caribbean community during Canada's Centennial celebrations.

And it's all because of two very dedicated members who work in the Greater Toronto Area – Sandra Campbell and Helene Bernard. They successfully proposed ONA's involvement in the annual event to Region 1 Vice-President Dawn Armstrong, who held the portfolio of human rights and equity (HRE) at that time, and Manager II – Anti-Racism and Anti-Oppression (ARAO) Kieran Maxwell. Campbell noted the idea, overwhelmingly approved by the Board of Directors, was in response to ONA's commitment to addressing the ongoing racism and oppression that exists and affects our members within their workplaces and communities, as spelled out in our 2022-2026 ARAO Action Plan ([ona.org/arao](http://ona.org/arao)).

## Multicultural Nation

"The Toronto Caribbean Carnival is a celebration of the emancipation of slaves and was a gift/tribute to the City

*The Caribbean tradition of parading through the streets was founded in celebration of freedom and emancipation from slavery and is appropriately celebrated on what has been recognized by the Canadian government as Emancipation Day weekend.*

of Toronto and Canada approximately 55 years ago in an attempt for Canada to present itself as a multicultural nation and be a symbol of racial harmony," said Bernard. "I felt that ONA participating would highlight its commitment to diversity, equity and inclusivity, as well as raise the profile of the profession and union in the Caribbean community. This would also be a way of piquing the interest of the younger generation to consider nursing as a profession."

"I felt that with ONA celebrating its 50th anniversary this year, it would be quite fitting to see our union represented alongside other unions in one of the biggest summer festivals in Toronto," added Campbell. "CUPE had previously participated in the Toronto Caribbean Carnival, and I thought this would emphasize solidarity and team-building as well with the other unions."

« I felt that ONA participating in the Toronto Caribbean Carnival would highlight its commitment to diversity, equity and inclusivity, as well as raise the profile of the profession and union in the Caribbean community. »

– ONA member Helene Bernard, RN



ONA members joined the Toronto Revellers in the Grand Parade on a warm and sunny August 5. Specifically, we were a part of the Talokan section, led by Toronto Raptors Assistant Coach and community ambassador Jamaal Magloire.

**Tears of Joy**

“Kieran organized and coordinated the event,” said Princess Margaret Hospital Bargaining Unit President (RNs) Ingrid Garrick, who rode on the Toronto Revellers VIP truck with Campbell, ONA President Erin Ariss, First Vice-President Angela Preocanin and others. “When I was told that the Board of Directors approved the proposal, I was elated and cried tears of joy and gratitude at the prospect of seeing our union take part in a celebration of such significance to the Caribbean community, alongside ally unions. It solidifies for me that ONA is seriously committed to taking bold, concrete actions in keeping with the ARAO Action Plan priorities.”

Because costumes are a highlight of this colourful festival, ONA sponsored five spectacular costumes and Magloire

included eight more for members to win (he also provided discounted codes for further costumes to show his appreciation to ONA and our members). Congratulations to the lucky winners, many of whom are shown on these pages: Renard Samuel, Nicole Wolters, Chanel Hansford, Brenda Robinson, Jennifer Johnson, Donna Stewart, Suzette Webb, Helene Bernard, Sheanee Lesley-Spence, Nadia Umadas, Jessica Bregstein, Michelle Brooks and Terri Roberts.

Members also had the opportunity to volunteer and engage with the public during the Toronto Revellers Wellness Days.

“The partnership with the Toronto Revellers is one of many opportunities for community engagement as part of our ARAO Action Plan,” stated Region 3 Vice-President Karen McKay-Eden, who currently holds the portfolio of HRE. “Through these kinds of initiatives, we hope to leverage our leadership position to work with community-based organizations and Ontarians to develop responsive approaches to address racism. We will also work with our networks to bring to light the realities ONA members face in their work environments and strengthen our connections with all Ontarians.”



 **Read ONA’s 2022-2026 Anti-Racism and Anti-Oppression Action Plan at [ona.org/aroo](https://ona.org/aroo).**



# Rainbow Bright: Members “Everywhere” at Pride Parade!

ONA members took the theme of Toronto’s recent Pride Parade – *Here, There, Everywhere* – quite literally!

In fact, more than 100 members joined staff and several members of the Board of Directors at the event, which wrapped up Pride Month on June 25, including a record number of new members riding on ONA’s vibrant float. Other members walked – or more accurately danced! – alongside the float to the delight of the crowd, who cheered loudly when they saw the ONA contingent in our bright pink t-shirts displaying our Pride theme, *Speaking Up and Staying Proud*.

ONA’s Human Rights and Equity Team (HRE) notes this theme, which speaks about advocacy and being part of a strong movement, goes hand in hand with the Toronto Pride theme: *here to take a stand and here to stay; there to be heard and there to advocate; and everywhere for all, everywhere in unity and everywhere endlessly.*



“Attending the Pride Parade can be a powerful way for individuals to celebrate and embrace their LGBTQI2S identity,” said enthusiastic participant and HRE Team member Annie Mazmanian. “It provides an opportunity to openly express their true selves without fear of judgement or discrimination. Participating in the Pride Parade was a visible way to show support and solidarity for the LGBTQI2S community. It sends a message of acceptance and inclusivity, both to the community itself and society at large. The visibility of LGBTQI2S individuals and allies at the parade can foster acceptance and understanding. For me, it was a transformative experience. I love Pride!”



« Participating in the Pride Parade can empower individuals to be more confident in their identity and inspire empathy and understanding for others’ journeys. »

– Human Rights and Equity Team member Annie Mazmanian, RN



Toronto may be the biggest Pride parade in the country, but it's certainly not the only one! Members also celebrated and showed their support for LGBTQI2S rights and culture at the London Pride parade on July 23 and the Capital Pride parade in Ottawa on August 27. Joined by Region 5 Vice-President Alan Warrington, Local 45 and 100 members waved to the crowd in London from their spectacularly decorated float (top photo) while ONA First Vice-President Angela Preocanin and Region 3 Vice-President Karen McKay-Eden led the contingent from Local 83, which included their partners and allies from CUPE 4000, by carrying the ONA Pride banner, capping off nine days of Pride celebrations in the capital region (bottom photo). ONA helps support regional Pride parades with advice, supplies, flags and other materials when requested and possible. If you have photos from a Pride event in your area, please send to [frontlines@ona.org](mailto:frontlines@ona.org).

## ONA Condemns Hate-Motivated Violence at University of Waterloo

ONA issued a strongly worded statement immediately following the recent hate-motivated violence at the University of Waterloo.

On June 28, university faculty and students were violently attacked during a philosophy class focused on gender issues. During the attack, believed to have been motivated by hate regarding gender expression and identity, a professor and two students were taken to hospital with serious injuries.

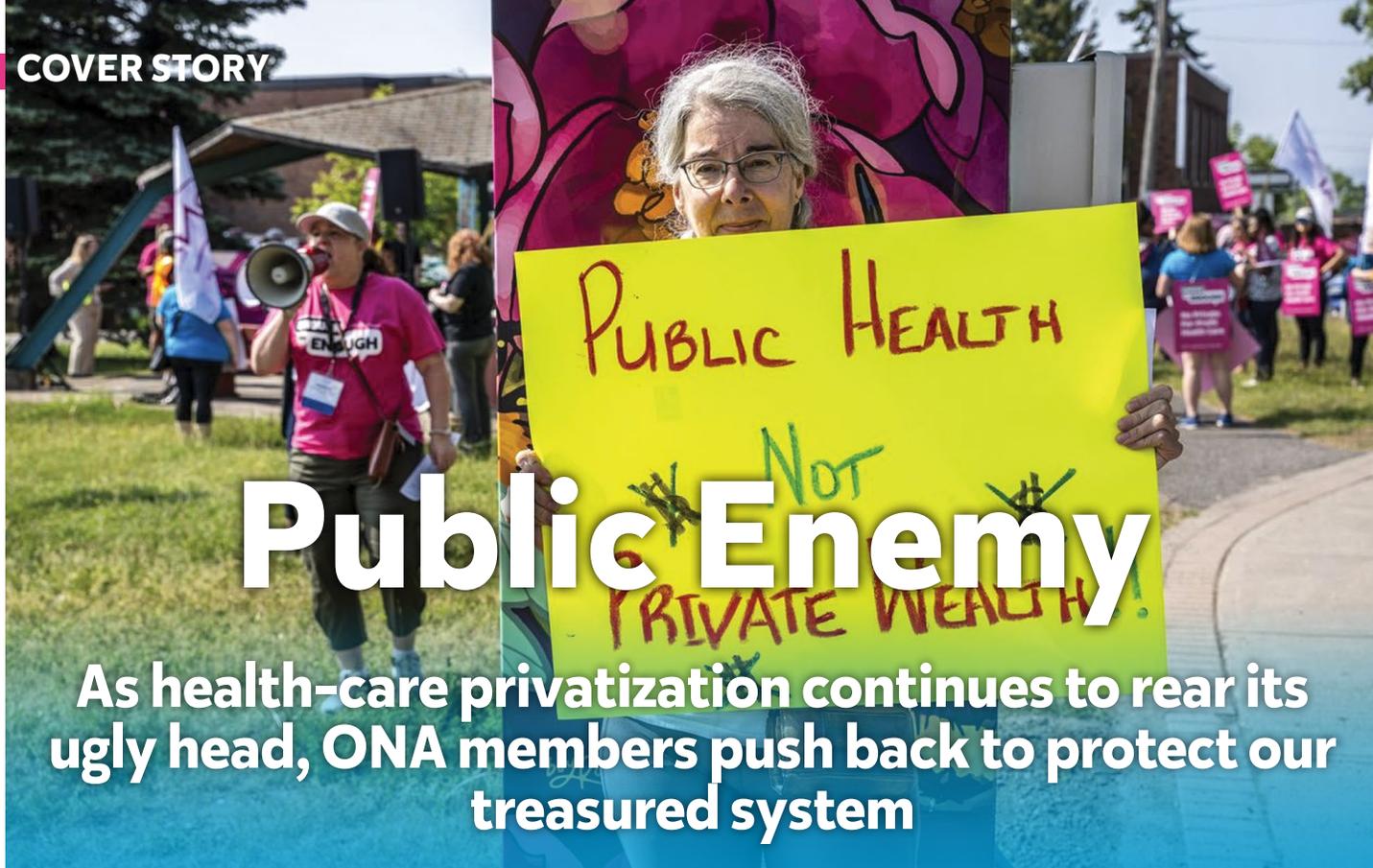
“RNs and health-care professionals stand in solidarity with the staff and students who were impacted by this horrifying act,” ONA President Erin Ariss said in the statement. “We strongly condemn all forms of discrimination and oppression. It is deeply alarming that students, staff and faculty in a university have suffered this violence and trauma.”

Our statement also called on all Ontarians to stand up and join together in fighting against the rising level of hate and violence that is increasingly targeting Black, Indigenous and Racialized people, women and the LGBTQI2S communities.



## Labour Force!

If you've ever taken a sick leave, received parental benefits or enjoyed a weekend – to name just a few – you can thank the labour movement. That was a clear reminder to the public at 2023 Labour Day parades and events across the province. At the Brantford and District Labour Council's 67th annual Soapbox derby and free community barbecue, Local 7, along with other affiliate council unions, set up a booth to provide information to the community about their work. “Our Local gave away cookies, along with pamphlets from ONA, packed in leftover fanny packs from Johnson Inc., which was our Nursing Week gift,” said Local 7 Coordinator Melanie Holjak, seen here on the right with Region 4 Vice-President Grace Pierias (left) and Brantford Community Healthcare System Bargaining Unit President Allison McKellar. “This is a fantastic event, attended by a few hundred, that engages the communities of Brantford, Haldimand and Norfolk and demonstrates that labour cares.”



# Public Enemy

As health-care privatization continues to rear its ugly head, ONA members push back to protect our treasured system

**T**ommy Douglas would be appalled.

More than 60 years since the former premier of Saskatchewan pioneered the public health-care system Canadians from coast to coast have come to cherish, it is facing its most alarming threat to date in Ontario. And ONA and our members are having none of it.

## “Healthiest and Wealthiest”

On May 8, the Ford government passed Bill 60, which, among other things, privatizes the delivery of public hospital services such as cataract surgery, knee and hip replacements and some diagnostics, to private clinics, referred to as Integrated Community Health Service Centres, along with the oversight of them, with no public mandate or consultation. In fact, a province-wide referendum held by the Ontario Health Coalition (OHC) just two weeks later, which ONA and our members overwhelmingly supported, found that a commanding 98 per cent of the 400,000 Ontarians who cast ballots were strongly against

privatizing public hospital services to for-profit clinics.

“When ONA and our allies warned in the lead-up to the provincial election last year that Premier Ford was planning to privatize surgeries and diagnostic services, he flatly denied it,” said ONA President Erin Ariss, who was removed from the gallery of the Ontario Legislature for yelling ‘shame!’ on the day the bill passed. “And yet, here we are a year later dealing with a disgusting piece of legislation that does exactly that.”

While the Ford government noted the purpose of opening these new private clinics – Ontario already has some but is greatly expanding them in number and function with far less public accountability, scrutiny and oversight than currently required – is to reduce the province’s surgical backlog, largely caused by the pandemic, we know the truth. Those surgeries will largely be uncomplicated for the “healthiest and wealthiest” to maximize profits while the complex and more expensive cases will remain in the public system.

At the same time, Bill 60 does nothing to protect staffing in public

hospitals, requiring only that private clinics submit a staffing model with no specifications on what the plan must entail or how poaching from public hospitals will be avoided. That means private clinics will only deepen the staffing crisis, a threat that is especially grave in small towns and rural Ontario, where dozens of emergency departments have closed in recent months because of lack of staff. At some employers, we are seeing an increase in the use of much higher paid agency nurses to fill vacancies, which must be stopped. (Read ONA’s submissions on Bill 60 and its regulations, which ONA First Vice-President Angela Preocanin also presented to the Standing Committee hearing at Queen’s Park, at [ona.org/submissions](https://ona.org/submissions).)

## Horrors in Long-term Care

And if the situation in long-term care (LTC), where for-profit ownership has been a longtime reality, is anything to go by, Ontarians have even more cause for concern. The OHC cites several studies showing that the hours of direct care residents receive;

the incidents of diseases and ulcers; the number of transfers to hospital; and hospitalizations for pneumonia, anemia and dehydration were all significantly higher at for-profit homes than non-profit and municipal ones, while more for-profit homes failed to meet current design standards. Their staff are also paid less, with more casual and part-time hired, so owners can avoid paying benefits.

“When for-profit homes pay exorbitant dividends to their shareholders while failing to hire enough full-time, adequately paid staff, both workers and residents suffer unjustly,” noted Preocanin. “Care is not possible without staff. The sheer horror of that situation was brought to light during the pandemic when COVID-19 cases and deaths disproportionately occurred in for-profit homes, compared to non-profit and municipal homes.”

In fact, a 2020 *Toronto Star* investigation found that residents in for-profit homes were 60 per cent more likely to contract the virus and 45 per cent more likely to die from it than residents in non-profit homes, and four times more likely to both contract and die from the virus than a resident in a municipally run home.

ONA spoke out about the despicable conditions in LTC that led to this tragedy and prepared three reports – and commissioned a fourth – highlighting our members’ heartbreaking realities on the front lines, along with our recommendations to address staffing and funding issues plaguing this sector to the LTC COVID-19 Commission. Many of those stories appeared in the commission’s final report.

### Better Solutions

Now, with Bill 60 threatening our public hospitals, ONA and our allies want Ontarians to know there are solutions. The province could deal with the surgical backlog through

better use of existing hospital operating rooms (ORs) in public hospitals that are sitting idle every evening and weekend due to underfunding and understaffing.

“I know a nurse who was put off work because she was having blurred vision and needed cataract surgery,” explained Local 97 Coordinator Liz Romano. “Because her short-term disability ran out while she waited and her employer would not accommodate her in the workplace, she had to pay for it when we know we have empty ORs that could do that right away.”

In fact, the Ford government has underspent the health budget by \$1.7 billion – Ontario funds its public hospitals at the lowest rate in Canada – and its wage suppressing Bill 124 resulted in nurses and health-care professionals leaving their jobs, professions and sometimes the province in droves.

“They’re taking staff away from public institutions to work in private clinics at a higher rate,” said Local 83 Coordinator Rache Muir after The Ottawa Hospital’s Riverside Campus began performing private orthopedic surgeries earlier this year under a veil of secrecy on weekends. “Why not pay the



Tell no lies: ONA's *Nurses Talk Truth* campaign, which features social media, print and transit shelter ads like this one, is doing precisely that!

nurses who are already there? Why not use what you already have instead of taking this step towards privatization?”

Ariss couldn’t agree more, adding, “instead of lining the pockets of investors and fueling inequitable access to services, the Ford government must instead invest in the public delivery of health care, which has proven to be the most cost-effective, safe and equitable model of health-care delivery over decades of experience at home and abroad. We will do everything in our power to ensure they do.”

## A Matter of Life and Death: Join the Fight against Privatization

If we’re going to win the battle against privatization, it’s going to take us all. Here’s how you can get involved:

- Go to [NursesTalkTruth.ca](https://NursesTalkTruth.ca) and learn the facts about privatization; view, download and share our ads; and sign a petition to your MPP. Encourage everyone you know to do the same.
- When an anti-privatization action from ONA and/or our allies comes to your community, participate – or better yet, help organize it!
- Watch the OHC’s informative video, *Private For-Profit Health Care: Making a Killing* ([youtube.com/watch?v=chYhYUvPuxY](https://youtube.com/watch?v=chYhYUvPuxY)) and share widely.
- Volunteer with your local health coalition.
- Participate in Leadnow’s campaign to write letters to your local newspapers demanding hospital CEOs reject Premier Ford’s plans to expand a two-tiered health-care system ([act.leadnow.ca/healthcare-ceo-lte/](https://act.leadnow.ca/healthcare-ceo-lte/)).

## PRIORITIZE, DON'T PRIVATIZE!

Our message to the Ford government is clear:

- Halt the expansion of privately delivered health care.
- Invest in public hospitals to expand services to meet community needs.
- Respect health-care workers by providing substantial wage increases to ensure safe staffing levels and permanent solutions to the staffing crisis.



Deeply alarmed by reports of private orthopedic surgeries being performed under a veil of secrecy on weekends at the Riverside campus of The Ottawa Hospital (TOH), members from ONA Local 83 and CUPE 4000 staged a rally to alert the public in February – and have continued ever since. “We are there every Saturday morning and will be until TOH gives notice that these surgeries are no longer happening,” said Local 83 Coordinator Rachel Muir, a regular participant. ONA has demanded answers to our serious concerns about patient safety, poaching of public-sector nurses and other staff from TOH and which, if any, standard regulations are being followed.

### The Push Back

While ONA has fought privatization each and every time it rears its ugly head, with your help, we are amplifying our efforts in response to this heightened threat.

We launched a powerful and very visible campaign, *Nurses Talk Truth* ([NursesTalkTruth.ca](http://NursesTalkTruth.ca)), which includes a series of hard-hitting ads in prominent daily newspapers, magazines, social media and transit shelters, some a stone’s throw away from the decision-makers at Queen’s Park.

We are also working with our like-minded allies as our combined voices are that much louder. That includes the OHC, which has spoken out in the media, provided documentation on the reality of privatization ([ontariohealthcoalition.ca](http://ontariohealthcoalition.ca)) and (at press time) was planning a mass rally for the opening day of the Legislature at Queen’s Park and various MPP constituency offices; Leadnow, which launched a campaign calling on hospital CEOs to publicly reject Premier Ford’s

plans to expand a two-tiered health-care system and asking the public to write letters to the editor of their local newspapers to demand they do; and as part of a joint health-care union’s anti-privatization campaign with SEIU Healthcare, CUPE, Unifor and OPSEU.

This historic alliance has seen members at five work locations across the province, chosen because of the crossover of all five unions in most facilities, mobilize to form committees with representatives from each union and organize other members to participate in demonstrations outside of those facilities (see page 23). The goal was to demand their CEOs join their call for investments in higher staffing levels and a meaningful recruitment and retention strategy to improve patient care and help clear the surgical backlog that Premier Ford is using as an excuse for privatization. To bring the point home, thousands of petitions signed by the majority of unionized staff at these work locations were delivered to their CEOs.

“All our patients, residents and

clients deserve no less than safely staffed, fully funded and publicly delivered health-care services,” said ONA member Stephanie Hamill at the rally at St. Mary’s General Hospital in Kitchener.

Local 70 Coordinator Maureen Williamson also had some powerful words at the Hamilton rally: “As nurses and health-care professionals coming together across unions, across designations, across hospitals, we are sending a very clear message: we will not back down!”

### Good News

And if we are to win this critical battle – the alternative is unthinkable – that must include each and every one of you! We need you to join us in this fight in any way you can (see box on page 21 for some ideas). After all, as Romano emphasized, “(saving public health care) should be an important fight for everyone. We are Canadian. And this is who we are.”

And there is some good news. Earlier this year, the Supreme Court of Canada ruled it would not hear an appeal from Dr. Brian Day, owner of the Cambie Surgery Centre in Vancouver. That ends his 14-year legal battle to allow patients access to private care when the public system isn’t able to offer timely care, claiming that prolonged wait times for medical procedures violated two Charter rights, including the right to life, liberty and security of the person.

“This sends a strong message that our nation’s highest court supports the principles of universal health care, where access to medical care is determined by a patient’s needs, not their ability to pay their way to the front of the line,” concluded Ariss. “It gives us hope. Now it’s time Premier Ford got the message. Profit in health care doesn’t care about helping people. But the people very definitely care about stopping profit in health care. We will never falter on that.”

# Sell-off: Members Spread Anti-Privatization Message Far and Wide!

Over the past several months, ONA members throughout the province took to the streets outside hospitals in five communities as part of a joint union anti-privatization campaign, which included delivering petitions to hospital management. Our message was clear: Ontario's public health-care system is not Premier Doug Ford's to sell. It belongs to us all. And hospital CEOs must take a stand against his privatization plans.



St. Michael's Hospital



Providence Healthcare



UNITY HEALTH, TORONTO



St. Joseph's Health Centre



St. Joseph's Hamilton Healthcare



Thunder Bay Regional Health Sciences Centre



Kingston Health Sciences Centre



St. Mary's General Hospital, Kitchener



## Fascinating Fact

In October 2002, ONA argues the Kirby Report, which focuses on privatization, doesn't reflect what Canadians want in their health-care system, noting nurses want profit out of health care and an end to the nursing shortage.



## ONA Mourns Passing of Cherished Chief Negotiator

ONA is grieving the sudden loss of Chief Negotiator Steve Lobsinger, RN, a cherished member of staff, who was also a familiar face to members throughout the province.

Steve unexpectedly passed away at his home in London on July 21, just as Arbitrator William Kaplan released a favourable decision on our hospital contract that saw raises for RNs and health-care professionals of 11 per cent over two years and isolation pay, for which he had fought so hard. In fact, his colleague Marilynn Dee, Manager II – Negotiations Team, calls that “the Steve Clause,” noting he saw a copy of the arbitration decision before his passing.

“Steve will be greatly missed by all,” said ONA CEO Andrea Kay. “One of the best ways we can honour his memory is to continue the vital work of fighting

for the members who meant so much to him, and finding time to laugh, share kindness and build friendships.”

Unionism and nursing were clearly in Steve’s blood, with his mother Julia having sat on the ONA Board of Directors in the 1990s and his sister Pam serving as the current Local 4 Coordinator. Steve became an RN in 1987 and began his nursing career on the pediatric unit at Grey Bruce Health Services before moving to Toronto to work on the cardiovascular intensive care units at Mount Sinai and St. Michael’s hospitals. In 1999, he became an ONA Labour Relations Officer and moved into a series of progressive roles, which culminated in his position as Senior Executive for Negotiations/Chief Negotiator.

“Steve never forgot his days on the front lines and was a staunch advocate for nurses’ rights,” added



ONA Chief Negotiator Steve Lobsinger, RN

ONA President Erin Ariss. “His passing is a profound loss not only for all of us at ONA, but for the entire nursing community, and I am personally heartbroken. ONA extends our deepest sympathies to Julia, Pam, his father Ken, extended family, friends, colleagues and members. We will never forget him.”

A Celebration of Life was held at the Lobsinger family cottage, a place Steve loved on the shores of Lake Huron, on August 19.

## Late Labour Relations Officer “Put Members First and Foremost”

ONA staff are also devastated by the premature passing of another staff member: Labour Relations Officer (LRO) Diana Kutchaw, RN.

Diana, who passed away on May 16, had been on ONA staff for 20 years, mostly as an LRO on what was then called the North Team before moving to our Negotiations Team just over a year ago. Working out of ONA’s Sudbury office, Diana also served as an LRO on the Victorian Order of Nurses Central Bargaining Team in 2019.

“She was a wonderful, kind and considerate person,” said Marilynn Dee, Manager II – Negotiations Team. “She had a passion for doing things right for members.”

Her former North Team Manager Leanne Cooke couldn’t agree more, noting, “Diana strived to put our members first and foremost in everyone’s minds. She was never shy

about taking on an employer if she felt they were disrespecting our members. She was also a key player in our huge organizing win of health-care professionals at Health Sciences North. She dedicated morning, noon and night to this campaign and once organized, spent much of her ‘spare’ time ensuring these new members felt welcome in their new union. She was full of joy.”

Diana leaves behind her husband Dennis and children Brett and Sidney. We extend our sincere condolences to all who knew her.



Labour Relations Officer Diana Kutchaw, RN

# Court Hears Bill 124 Appeal

ONA may have won the battle against the government's wage suppressing legislation, but there's one more hurdle to win the war.

In late June, the Court of Appeal of Ontario heard the Ford government's appeal of Bill 124, legislation that capped the total compensation of some public sector workers, including ONA members, at one per cent for three years. Soon after it was imposed in late 2019, ONA launched a Charter challenge, joined by our fellow unions, arguing the bill was discriminatory as it mostly affected female-dominated professions and violated our right to free collective bargaining. We also met with Premier Doug Ford countless times, and members and our union counterparts took to the streets at every turn to voice our extreme displeasure and keep the bill front and centre in the news.

In November 2022, the Ontario Superior Court of Justice sided with ONA, striking down Bill 124. While Justice Koehnen didn't find a violation of our equality rights under s.15, he said the law infringes on our rights to freedom of association and collective bargaining, calling it "substantial interference." As a result, Bill 124 is "to be void and of no effect," he said. Unfortunately, the Ford government appealed.

"Instead of accepting the court decision and the rights enshrined to us in the *Charter of Rights and Freedoms*, Premier Doug Ford chose instead to waste taxpayers' money by continuing his attack on public sector workers, many of whom got this province through the worst of the pandemic at great risk to themselves and their families. It's time he realized he is not above the law, and we're confident the court will agree."

During the appeal hearing, ONA's Legal Team continued our staunch opposition to Bill 124, which ONA members were able to watch via Zoom.



Read the latest at [ona.org/about-bill-124](https://ona.org/about-bill-124).



## A Thousand Words: Artist's Work Decries Bill 124

When it came to expressing his support for nurses and health-care professionals impacted by Bill 124, a Toronto artist let his creativity do the talking.

Aquil Virani, a visual artist and graphic designer, created an artwork, aptly named "124," which depicts 124 photographs from his recent hospitalization in Toronto, including his hospital room, selfies with visiting friends and family, and photos with nurses and health-care professionals (with their permission).

"I received wonderful care from nurses and health-care workers over eight weeks when in care for a rare neurological condition," he said. "I created this artwork as a way to document a personally tumultuous time while protesting Doug Ford's Bill 124 that restricted the wages of those who constantly go above and beyond what is asked of them to support a healthy Ontario."



Virani explained the translucent layering of images in his piece is meant to convey what we experience in health care because "if you look beyond your own personal journey, you see that there are various dynamics and currents – under-supported staff, hospital budgets and complex systems of regulation and compliance."

It's for that reason Virani hopes his artwork inspires all who look at it to also support nurses and health-care professionals.

"For all the gestures and words of praise we offered during the early pandemic days, those actions are meaningless if we don't tangibly support them with fair wages, proper benefits, and safe and healthy working conditions. You can't say 'thank you' on one hand and then underfund the health-care system with the other."



See more at [aquil.ca/124](https://aquil.ca/124).

# Northern Exposure: Board Tours Region 1

With the promise of more to come, members of the ONA Board of Directors conducted a mini tour of our most northern region to meet with members right where they live and work.

The visit was perfectly timed between the June Provincial Coordinators Meeting in Thunder Bay (see page 27) and the Council of the Federation meeting in Winnipeg (see page 28) soon after. ONA President Erin Ariss, First Vice-President Angela Preocanin and CEO Andrea Kay joined Region 1 Vice-President Dawn Armstrong for a visit to several northern areas, including Kenora and her own hometown of Dryden.

“Apart from the issues that affect all nurses and health-care professionals, there is no doubt that because of the vast geographical area, members in the north also have their own unique challenges,” noted Ariss. “When



## Fascinating Fact

ONA's new governance structure comes into force reducing our regions from 14 to five in January 1999.

I assumed the presidency, I said the Board wanted to hear directly from our members and to create a movement of solidarity, and that's what we are doing. We visited with members on their work units, chatted about their priorities and asked what would motivate them to become more active in their union. The information we gleaned will help us immensely.”

The Board plans more regional tours to hear about members' issues in the future.

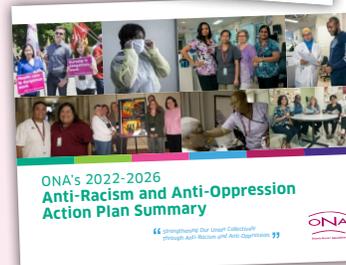
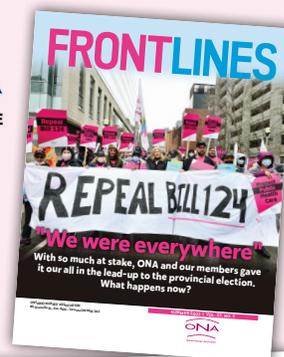
## ONA Receives Awards of Excellence

Several ONA member communications vehicles have won prestigious 2023 APEX Awards of Excellence.

The 35th annual awards recognize significant achievements in publishing, based on editorial content, graphic design and the ability to achieve overall communications excellence. ONA received awards for the summer 2022 issue of *Front Lines* (Magazines, Journals and Tabloid Print category), our 2022-2026 Anti-Racism and Anti-Oppression (ARAO) Action Plan (Diversity, Equity and Inclusion Print Media category) and the *ONA in Action* video played at our November 2022 Provincial Coordinators Meeting and available on our YouTube channel at [Youtube.com/OntarioNurses](https://www.youtube.com/OntarioNurses) (Electronic Media – Video Media category). ONA's informative and fun staff newsletter *iContact* also won an award in the Electronic and Email Newsletter category.

The judges noted that while 2022 was again a challenging year with virtual meetings continuing to be a standard for many workers, the consistent exceptional quality of all submitted entries – more than 1,100 from across North America! – is a testament to the fact that communications professionals have adapted, and continue to adapt, to the “new normal.”

Congratulations to our Communications and Government Relations Team, ARAO Working Group and Anti-Racism Advisory Team!



# June PCM Combines Union Updates with Local Activism

Lots of information, education and activism. That aptly describes the most recent Provincial Coordinators Meeting (PCM).

In the shadow of the mighty Sleeping Giant (Sibley) Provincial Park that juts into Lake Superior, the June PCM, which rotates around the province, was hosted by Region 1 in Thunder Bay from June 20-22. Throughout the meeting, delegates received important updates from the Board of Directors and staff on key ONA service areas such as professional practice, human rights and equity, education, health and safety, labour relations, litigation and finance. But it was the significant uptake in political action from our members during recent hospital central negotiations that took centre stage.

“The truth is ONA is all of us, and we are fighting back like never before,” emphasized Erin Ariss in her first PCM address as ONA President, which was livestreamed on Facebook. “Members are standing up for our collective bargaining rights through rallies, marches and pickets. Thousands of members took action to demand better staffing, wages and care. We have the power to build and we are going to do it together, bit by bit. I’m ready to lead you, guide you and protect you. The ONA Board is here to support you. Now is the time to act boldly, together!”

She put her words into action when the Board joined PCM delegates and other members from Thunder Bay at an *Enough is Enough* rally on June 22 at St. Joseph’s Care Group to demand health care remains public, better wages, affordable groceries, gas and housing, rent control and that corporations/banks pay their fair share. Throughout the 45-minute event, which put the lessons learned at that day’s education session on mobilizing into practice, members chanted, carried signs with powerful slogans and handed out leaflets to the public.



## Fascinating Fact

The first ONA Provincial Coordinators Meeting takes place in Ottawa in June 2004.



To further highlight the incredible advocacy being shown across the province, peppered throughout the PCM were personal accounts from our Local leaders about what they and their members are doing in their workplaces and communities to raise public awareness and push back against employer and government initiatives.

“Ontario’s nurses and health-care professionals deserve more from their government and employers,” concluded Ariss, adding that we must inform our communities about the connection between the Ford government and the erosion of patient care in the lead-up to the 2026 provincial election. “We are going to organize ONA members like never before because when we fight together, we win!”

## ONA in the News

ONA was cited a total of **239** times in the news from June 1 to August 31, 2023, with the most common topics being the privatized surgeries performed at The Ottawa Hospital; Bill 60 (see the cover story); the hospital arbitration decision and escalating actions taken by ONA and our members to call for better staffing, wages and care; and the job action by Hastings and Prince Edward Public Health members (see page 7).

**54** newspapers | **100** radio stations | **72** television stations  
**9** online news sources | **4** magazines and specialty publications

**Two** ONA-written opinion editorials and **four** letters to the editor were also published.



# Nurses Demand Premiers Fix Ailing Health System

Leaders from nursing unions across the country, including ONA, have delivered a strong message to the provincial and territorial premiers: fix the nursing shortage!

At a breakfast gathering during the Council of the Federation meeting in Winnipeg on July 11, the leaders from member organizations of the Canadian Federation of Nurses Unions (CFNU), including ONA President Erin Ariss, First Vice-President Angela Preocanin, Region 1 Vice-President Dawn Armstrong and CEO Andrea Kay, stressed to the premiers that supporting health-care workers is crucial to completing the recovery of our ailing health systems and offered concrete solutions on how to alleviate the critical staffing shortage at the heart of this crisis (see sidebar).

“Shifts that last 24 hours, overwhelmed ERs, dwindling access to care in rural areas – these are the realities of severe understaffing that nurses come face to face with every day,” CFNU President Linda Silas said at the conclusion of the meeting. “As premiers focus on the critical work of solving Canada’s health-care crisis, listening to and working with front-line health-care workers is crucial to creating concrete and sustainable change. We’re ready to work with provinces to end this crisis.”

She emphasized the urgency of premiers meeting one-on-one with provincial nurses’ unions and using the recent increase to the Canada Health Transfer to bolster the nursing workforce, noting there can be “no more around-the-clock overtime to keep services open, no more lining the pockets of for-profit staffing agencies while committed full-time nurses suffer, and no more neglecting nurses’ work-life balance.”



Their faces say it all. ONA President Erin Ariss and Region 1 Vice-President Dawn Armstrong ask Premier Doug Ford some tough questions after watching a presentation at the Council of the Federation meeting.

Ahead of the meeting, the CFNU launched a campaign urging premiers to fix the health crisis by solving the nursing shortage and debuted its *Complete the Recovery* microsite,

featuring nurse profiles from each member organization, including ONA member and ICU nurse Kyle Diaz.



Learn more at [nursesunions.ca](https://nursesunions.ca).



The gang’s all here: Nursing union leaders and premiers pose for a post-meeting photo.

## Solutions Served!

CFNU served up several concrete solutions to the premiers at their breakfast meeting to address the nursing shortage and end the dire crisis in health care:

- Adopt minimum nurse-to-patient ratios.
- Enact legislation/regulations around safe hours of continuous work.
- Strengthen mental health supports.
- Support nurses across their careers through initiatives such as credentialing programs and flexible schedules.
- Bolster nursing programs to grow Canada’s workforce and support students with paid preceptorships.
- Expedite registration and workforce integration for internationally educated nurses.

# Nurses' Convention Reignites National Solidarity

ONA members were among the more than 1,000 nurses from coast to coast who gathered at the Canadian Federation of Nurses Unions' (CFNU) Biennial Convention this past summer to discuss issues that affect nurses and health care across the country.



The problems – including staff shortages, workplace violence, racism and discrimination – are happening in British Columbia, Newfoundland and Labrador – and everywhere in between. During the convention, which took place from June 5-9 in Charlottetown, Prince Edward Island, the CFNU lined up expert panels and produced engaging workshops to address these serious issues and offered solutions that nurses can use to curb them.

One education session focused on the global scale of the nursing shortage, with a panel discussion featuring experts from Canada, Ireland, Australia and the United States. “Supporting nurses means staffing each and every unit appropriately, each and every day,” said one panelist.

“It’s reassuring to know that we are all in this staffing crisis together,” noted ONA President Erin Ariss. “Listening to viewpoints from across the globe has provided a perspective that highlights the need to address the nursing

shortage holistically through many venues, including government relations, mobilizing and more.”

## One-Thousand Nurses Participate in Die-in

The last day of the CFNU convention was spectacular as the voices of more than 1,000 nurses marching and chanting through the streets of Charlottetown demanded action to the nationwide staffing shortage. Inspired by ONA’s recent action and echoing the convention theme of *Together, we got this*, nurses quietly laid down in the grass for a die-in. It began with a moment of silence to honour nurses and health-care professionals who continue to face the challenges of understaffing.

 **Read more about the CFNU convention at [nursesunions.ca/convention2023](https://nursesunions.ca/convention2023).**



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0722

## IN BRIEF...



### ONA Supports Striking Metro Workers

ONA stood in solidarity with 3,700 striking Metro workers, who hit the picket line on July 29 for a month.

The workers, represented by Unifor, took job action at 27 Metro stores in the Greater Toronto Area after rejecting a tentative agreement. They demanded better compensation from their employer, which raked in record profits while many of them struggled to afford food, rent and other necessities. In late August, the workers ratified a second tentative deal, which will see an immediate raise of \$1.50 an hour for all workers, and a \$2 an hour increase for full-time and senior part-time workers within months, as they will receive an additional 50 cents in January.

“Both grocery workers and health-care workers showed up every day of the pandemic to meet the needs of Ontarians at great risk to their own health and safety,” said ONA President Erin Ariss, who joined a picket line and encouraged ONA members to do so, including this group from Local 111. “Grocery workers deserve their fair share of record profits, and nurses and health-care professionals will always be united with them against corporate greed.”

### OFL President Retiring

Ontario Federation of Labour (OFL) President Patty Coates is retiring as of January 1, 2024 after deciding not to run for re-election at the organization’s November convention.

“This was not an easy decision to make,” she said. “In my more than 30 years of activism and involvement within the labour movement, my time as an elected officer of the OFL is among my greatest and most rewarding accomplishments. I have had the opportunity to work alongside some incredible fellow officers, labour leaders, activists and staff, and have made so many memories and friends that I will carry forward for years to come.”

Coates was elected OFL Secretary-Treasurer in 2015 and made history by becoming its first woman president in 2019. During that time, she helped build a strong coalition to fight Bill 124, brought together the entire labour movement to support education workers and force the Ford government to repeal Bill 28, and spearheaded successful *Enough is Enough* events to tackle the cost-of-living crisis.



### Stop Private Blood Collection Clinics, ONA Urges

ONA is calling on the province to immediately stop Canadian Blood Services (CBS) from outsourcing plasma collection to a foreign-owned for-profit plasma collection corporation in Ontario.

“We are outraged that CBS has signed a deal to undermine our public, voluntary collection centres in Ontario and across the country,” said ONA President Erin Ariss. “CBS was created in 1998 to oversee blood collection from volunteers and restore the trust of Canadians after our last experiment with foreign-owned corporations, which saw patients receive unsafe blood and plasma transfusions. Our blood supply is a priceless public asset that must never be sold off to the highest bidder.”

Because the for-profit plasma industry will erode Ontario’s donor base by paying for donations, ONA believes the only way for Canada to be self-sufficient and ensure a safe, ready supply of blood and blood plasma is through CBS without a profit motive attached to it.

More than a year ago, ONA and the Canadian Federation of Nurses Unions requested that Health Minister Sylvia Jones uphold the *Voluntary Blood Donations Act* and expand Ontario’s voluntary plasma collection.





## Fascinating Fact

In May 1987, the Ministry of Health reports as many as 3,000 nursing jobs in Ontario may be unfilled just three years after a reported surplus, making the nursing shortage one of the biggest news events of the year.

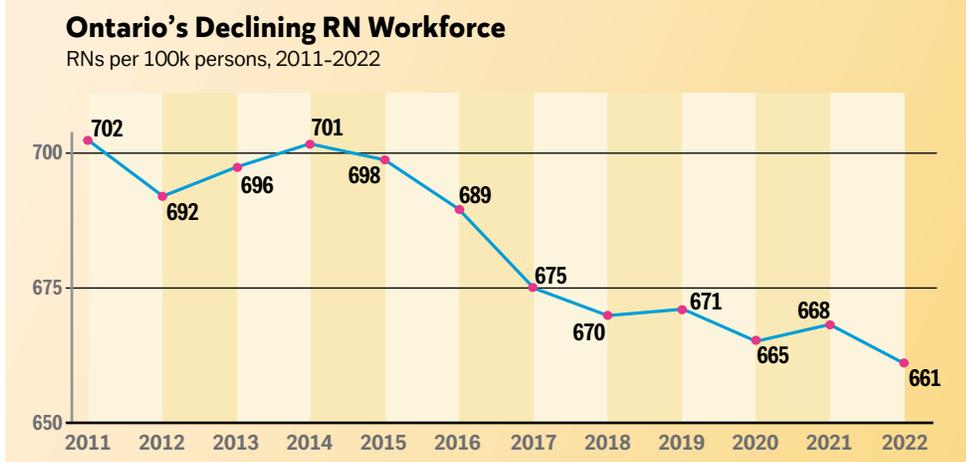
# From Bad to Worse: Latest Ontario RN Numbers Show Further Decline

The latest RN numbers are in – and they aren't good.

In fact, the 2022 figures from the Canadian Institute for Health Information (CIHI) show that Ontario's RN per 100,000 people ratio has fallen to the lowest level in the last 12 years: just 661 RNs. In 2011, that number was 702. While RNs employed in nursing increased by 940 in 2022 – only one per cent – the total population grew by more than 300,000 (two per cent), making the ratio all the worse.

That means Ontario continues to have the worst RN per capita ratio in the country, followed by British Columbia, with 732 RNs per 100,000 population (Manitoba and Prince Edward Island continue to not report their data to CIHI, so we must rely on old figures for those two provinces). Just to reach the average per capita in the rest of Canada (825 RNs per 100,000 people), Ontario would need an additional 24,809 RNs. This is up from 22,000 last year.

"Once again, Ontario is dead last in the RN to population ratio in all of

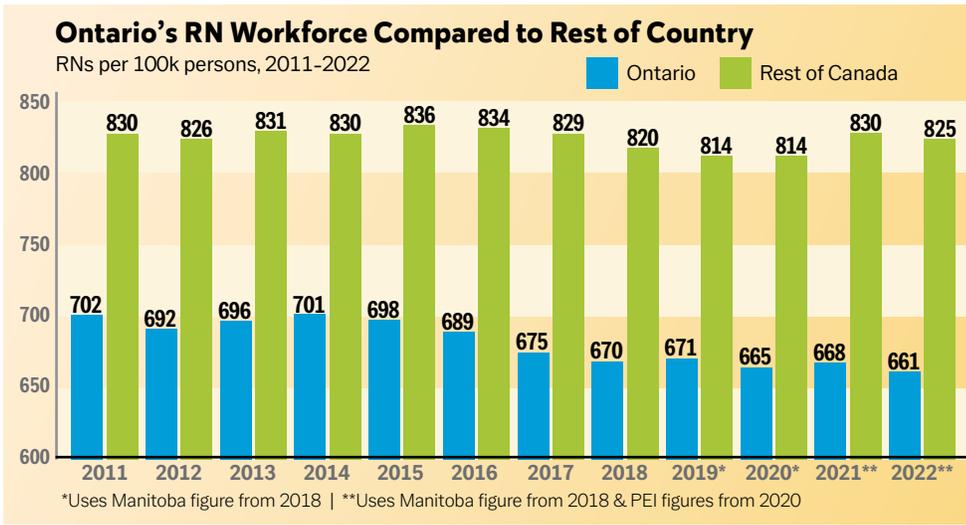


Canada, but even more troubling is that our numbers continue to move in the wrong direction," said ONA First Vice-President Angela Preocanin, who holds the portfolio for practice issues. "While we are hopeful the latest arbitration decision for our hospital contract will encourage more nurses to stay or enter the profession, Ontario has a very long way to go to rectify this serious situation, which greatly impacts patient care and should be a huge concern to everyone in this province who will need a nurse at some point."

**Number of RNs per 100,000 people in Ontario, the worst in the country**

**661**

**24,809**  
**Number of RNs Ontario needs to reach the average per capita in the rest of Canada**





Chronique de la président, AIO  
**ERIN ARISS, RN**

➔ SUITE DE LA PAGE 4

maintenir l'équité salariale par procuration pour leur main-d'œuvre à prédominance féminine. Ce n'est qu'un petit échantillon de nos réussites; il faudrait y consacrer l'entièreté de ce numéro pour toutes les énumérer!

Pourtant, malgré ces gains, nous devons aussi reconnaître que des défis demeurent. Il y a près de 50 ans, des infirmières de la Muskoka-Parry Sound Public Health Unit sont descendues dans la rue en brandissant des pancartes faites à la main pour exiger une convention collective équitable, y compris des améliorations salariales. Aujourd'hui, au moment où j'écris cette chronique, 50 infirmières de la santé publique employées par Hastings Prince Edward Public Health manifestent pour la même raison (voir page 7), et je crois que leurs pancartes faites à la main sont encore plus percutantes que tout ce que nous pourrions produire en série.

Il y a 35 ans, l'AIO a lancé un exposé de principes sur l'industrie en crise et publié les résultats d'un sondage qui donne à réfléchir sur la pénurie émergente d'infirmières, appuyés par une solide campagne publicitaire dans 13 grands quotidiens. Aujourd'hui, nous sommes toujours aux prises avec une grave pénurie (voir page 31), et l'AIO continue de sensibiliser le public au moyen d'une série d'annonces publicitaires percutantes, y compris dans les quotidiens provinciaux.

Cela démontre clairement que l'AIO et nos membres ont toujours été prêts à prendre position au cours des 50 dernières années; mais ce qui a changé, c'est le nombre d'entre vous à le faire! Nous assistons maintenant à un mouvement de membres qui s'unissent d'une seule voix pour s'opposer aux questions qui sont importantes pour vous comme jamais auparavant. Ainsi, alors que l'AIO fête ses 50 ans en grand, c'est chacun d'entre vous que je dois remercier.

En témoignage de notre reconnaissance pour votre dévouement envers vos patients, les résidents et les clients, votre profession, votre syndicat et votre collectivité, nous incluons un cadeau spécial pour le 50e anniversaire dans ce numéro de Front Lines. Nous espérons que vous l'emporterez avec vous pour vous rappeler que votre syndicat est toujours à disposition et que nous sommes tous dans le même bateau.

Depuis le jour où j'ai commencé comme nouvelle infirmière quelque peu anxieuse, l'AIO a changé ma vie. Aujourd'hui, en tant que présidente provinciale, je suis très fière d'avoir participé avec vous tous à une petite partie de l'histoire de cette organisation remarquable. J'espère que vous prendrez le temps de réfléchir à ce que vous célébrez à l'occasion de cet anniversaire spécial, puis que vous nous aiderez à décrocher des victoires toutes aussi impressionnantes au cours des 50 prochaines années et au-delà!

➔ Suivez Erin : [twitter.com/erinariss](https://twitter.com/erinariss).



Chronique de la première vice-présidente, AIO  
**ANGELA PREOCANIN, RN**

➔ SUITE DE LA PAGE 5

Nos membres en grève de Hastings and Prince Edward Public Health ont été rejoints sur leur ligne de piquetage par d'autres membres du personnel, des groupes communautaires, le public et d'autres syndicats, y compris des membres du SCPF, qui sont malheureusement dans le même bateau (voir page 7). Leurs partisans ont écrit à leur conseil de santé pour exiger un règlement équitable. Ils ont organisé des séries d'appels téléphoniques et ont participé à des rassemblements. Ils ont fait don de cartes-cadeaux, de collations et prodigué un réconfort plus que nécessaire. Ils se sont vraiment surpassés.

Pourquoi est-ce si important? Dans cette période trouble où les gouvernements et les employeurs bafouent les droits des travailleurs, les voix de quelques membres de l'AIO directement touchés par une situation particulière, comme une grève de leur unité de négociation, se sont élevées. Les voix de 68 000 membres qui les soutiennent sont encore plus fortes. Et les voix de ces 68 000 membres, en plus de celles de nos amis au sein des autres syndicats et de la communauté, sont tonitruantes! C'est ce qui fait bouger les choses. C'est ce qui fait changer les choses. Et cela va dans les deux sens.

Regardez les employés d'épicerie de 27 magasins de la région du Grand Toronto, représentés par Unifor. Ils ont fait grève avec bravoure pendant un mois pour exiger un contrat équitable de la part d'un employeur qui enregistrait des résultats et profits franchement grotesques. L'AIO a immédiatement fait une déclaration aux médias pour montrer son soutien indéfectible, alors que bon nombre d'entre vous ont joint les lignes de piquetage (voir page 30), diffusé nos messages dans les médias sociaux et refusé d'acheter de la nourriture à Metro pendant que ces travailleurs, qui, comme vous tous, ont tant sacrifié pendant la pandémie, avaient de la difficulté à mettre de la nourriture sur leur table. Par conséquent, ils ont bénéficié d'une hausse importante des salaires et ont établi un précédent pour de futures négociations, non seulement pour eux-mêmes, mais aussi pour d'autres travailleurs syndiqués travaillant dans les épiceries. Le vieil adage syndical « les travailleurs unis jamais ne seront défaits ne pouvait être plus clair, et c'est vous qui avez contribué à ce qu'il se concrétise.

La solidarité ne s'exprime pas seulement pendant les moyens de pression. La solidarité, c'est s'unir pour exercer des pressions en faveur d'un allègement de la charge de travail et d'autres changements dans vos lieux de travail qui profitent non seulement à vous, mais aussi aux autres membres du personnel et à ceux dont vous avez la garde grâce à notre clause de responsabilité professionnelle unique. Il s'agit de former des alliances avec des groupes marginalisés dont vous ne faites pas partie et qui ont désespérément besoin de votre aide. C'est tellement plus que cela.

La solidarité n'est pas un mot à la mode. Il ne s'agit pas simplement de dire que vous vous souciez des autres, mais aussi de le montrer. Vous le faites à fond, et je vous implore de continuer. Après tout, on ne sait jamais quand on aura besoin des autres, et je suis convaincu que nos alliés continueront d'être à nos côtés!

➔ Suivez Angela : [twitter.com/4angiepreocanin](https://twitter.com/4angiepreocanin).



## FOR YOUR BENEFIT

# 69 per cent

Survey respondents who would take less pay for a better pension

## The Kids are Not OK (and Neither are Their Parents): Workplace Pensions Needed More than Ever, Survey Shows

In a survey that once again shows the importance of our members' defined benefit pension plans, Canadians report that a prolonged period of rising inflation and interest rates has led to another significant downturn in their financial wellbeing, risking their retirement readiness and security.

*The 2023 Canadian Retirement Survey* from the Ontario of Healthcare Pension Plan (HOOPP), the pension plan of the majority of ONA members, and Abacus Data found that 44 per cent of the 2,000 Canadians polled didn't set aside money for retirement in the past year, an increase of six per cent over the previous year.

While the data shows that Canadian adults at every age are struggling to save for the future – one in five have not set aside anything for retirement and 54 per cent said that if inflation continues to rise, they will need to push out their target retirement date – for the 55-64 non-retired age group, it's

even more alarming. Seventy-five per cent have \$100,000 or less in savings and 44 per cent have less than \$5,000. A whopping 86 per cent of the 18-34 group is very concerned about how higher interest rates impact their ability to save for retirement.

"The kids are not alright when it comes to retirement saving – we've known this for a while – but neither, as it turns out, are their parents," said HOOPP Head of Plan Services Ivana Zanardo. "Declining access to workplace pensions as well as high housing costs have been taking a toll for years. But more recently, high inflation and interest rates have been added to what may be a perfect storm for folks struggling to save."

For Canadians with pensions, the news is decidedly better. They are more likely to say they are getting ahead (41 per cent) than falling behind (27 per cent) in their standard of living and are more likely to have more than or enough money to save if inflation continues to rise (47 per cent) compared to those without pensions (27 per cent).



It's not surprising then that 78 per cent of those polled believe employers should be required to contribute to pensions for workers. In fact, despite day-to-day financial pressures, two-thirds would still take less pay for a pension or better pension.

"In the five years that HOOPP and Abacus Data have conducted this survey, about 70 per cent of Canadians have consistently agreed that Canada is heading for a retirement income crisis," added Abacus Data CEO David Coletto. "These findings for older Canadians suggest a crisis might be looming ever closer if current economic trends continue."

## Members' Insurance Plan Rebrands to belairdirect

Johnson Inc., the insurance plan of ONA members, has come together with another Canadian insurance provider to offer what it promises to be "an enhanced customer experience."

Beginning this fall, the car and home divisions of Johnson will gradually rebrand to belairdirect. The rebranding of the group and travel divisions will happen in the future.

"Guided by the same core values and a deeply rooted desire to help, we will combine our strengths and expertise to provide customers with best-in-class insurance through an enhanced group member offering and a new suite of advanced digital tools," said Johnson Deputy Senior Vice-President John Thompson. "Rest assured, our unwavering commitment to our

affinity partners [which includes ONA], customers and the communities we support will remain unchanged."

In the summer, ONA members began receiving letters in the mail announcing this rebranding.

"We are thrilled to embark on this new chapter together and look forward to serving members even better as belairdirect," concluded Thompson.



## Financial Statements for the year ended December 31, 2022

### Balance Sheet

2022 2021

#### Assets

##### Current

Cash and short-term investments (at market value)	\$ 21,273,495	\$ 23,084,227
Dues and other receivables	9,060,571	8,355,593
Prepays	2,303,648	2,203,508
	<u>32,637,714</u>	<u>33,643,328</u>
<b>Capital assets</b> (at net book value)	7,597,761	7,478,106
<b>Marketable investments</b> (at market value)	44,126,954	42,089,896
<b>Investment in ONA Liability Insurance Ltd.</b> (equity method)	15,793,406	21,059,057
	<u>\$ 100,155,835</u>	<u>\$ 104,270,387</u>

#### Liabilities and Net Assets

##### Current

Accounts payable and accrued liabilities	\$ 14,019,824	\$ 10,922,399
Current portion of capital lease obligations	414,607	380,286
	<u>14,434,431</u>	<u>11,302,685</u>
<b>Capital lease obligations</b>	235,929	190,647
<b>Employee future benefits</b>	22,143,500	28,400,100
	<u>36,813,860</u>	<u>39,893,432</u>

##### Net Assets

Invested in capital assets	6,947,228	6,907,176
Invested in ONA Liability Insurance Ltd.	15,793,405	21,059,057
Internally restricted	32,233,064	32,185,616
Unrestricted	8,368,278	4,225,106
	<u>63,341,975</u>	<u>64,376,955</u>
	<u>\$ 100,155,835</u>	<u>\$ 104,270,387</u>

The above information is a condensed version of the Association's audited financial statements for the year ended December 31, 2021 and December 31, 2022. For any inquiries, please send them to the Office of the President.



## Financial Statements for the year ended December 31, 2022

### Statement of Operations

	2022	2021
<b>Revenue</b>		
Membership dues	\$ 72,895,931	\$ 73,200,410
Investment income	1,692,799	3,663,939
Other	897,174	827,942
	<b>75,485,904</b>	<b>77,692,291</b>
<b>Expense</b>		
Governance/External vision	2,710,536	3,454,105
Membership services	3,770,366	3,469,660
Service teams	30,511,000	29,404,353
Support teams	21,841,049	18,917,880
Fixed costs	11,121,609	10,351,642
Program costs (Security/LEAP/Critical Illness/LTD/Supplementary)	5,139,475	4,385,025
	<b>75,094,035</b>	<b>69,982,665</b>
<b>Excess of revenue over expenses before undernoted items</b>	<b>391,869</b>	<b>7,709,626</b>
<b>Amortization</b>	<b>(1,743,161)</b>	<b>(1,607,468)</b>
<b>Unrealized loss on investments</b>	<b>(4,337,236)</b>	<b>(483,447)</b>
<b>Share of net (loss) of ONA Liability Insurance Ltd.</b>	<b>(3,764,852)</b>	<b>(652,973)</b>
<b>Excess (deficiency) of revenue over expenses</b>	<b>\$ (9,453,380)</b>	<b>\$ 4,965,738</b>

The above information is a condensed version of the Association's audited financial statements for the year ended December 31, 2021 and December 31, 2022. For any inquiries, please send them to the Office of the President.



**PRIVATIZATION:**

# Death by a thousand cuts

A critical staffing shortage. ER closures. Longer wait times. And a gamble on privatization. Under Doug Ford's watch, public health-care isn't getting better - it's bleeding out.

**KNOW THE FACTS:**  
**NursesTalkTruth.ca**

**ONA**  
Ontario Nurses' Association