

MEMBER ORGANIZATIONS' NEWS

NO BACKING DOWN.

CFNU/2021



Member Organizations' News



Registered Nurses' Union Newfoundland and Labrador

COVID-19: Fighting for the Frontline – Ongoing

Since the onset of the COVID-19 pandemic, RNUNL has worked tirelessly to support and protect its members. We have been a driving force behind advocacy efforts to keep health care workers safe in Newfoundland and Labrador.

In line with the CFNU, RNUNL pushed for the precautionary principle to be followed and led efforts to secure a joint statement on personal protective equipment (PPE) with the provincial government, regional health authorities and other public sector unions in the spring of 2020.

This statement acknowledges that health care workers are best-positioned to determine appropriate PPE through a point-of-care risk assessment. Throughout the pandemic, we've been vigilant in pressuring government and employers to adhere to this statement.

While there were isolated instances of PPE being denied during the first wave, access to PPE has largely not been an issue for health care workers in Newfoundland and Labrador. As well, only a few RNUNL members contracted COVID-19 as a result of workplace exposure.

RNUNL called for transparency regarding PPE supplies and worked with other unions to keep pressure on government regarding PPE inventory. We were successful in establishing open and regular communication with the provincial government and regional health authorities. This allowed our union to quickly bring forward member concerns, and to work with employers and government to reach solutions and gather information.

After a year on the front lines, our members are exhausted and feeling unappreciated at times. They've braved the front line and stepped up time after time. Members struggled to manage child care, lost annual leave periods, and faced displacement and reassignments to cope with staffing issues. As of the end of March 2021, many of our members still eagerly wait to be vaccinated.

While RNUNL has worked hard to support its members, there's no question the pandemic has impacted our members' mental, emotional and physical health. RNUNL is preparing a media campaign to call on government to show their respect and appreciation of our members by providing much-needed staffing relief.



RNUNL Welcomes New President Yvette Coffey – January 2021

RNUNL welcomed RN Yvette Coffey as its new president in January 2021. Yvette, an oncology registered nurse from the Dr. H. Bliss Cancer Centre, entered the role with a wealth of knowledge and expertise.

Yvette has been a union activist for three decades. She served as RNUNL Vice President for the past 7 years, 16 years as Branch 3 President, and 26 years as a shop steward. She worked in many areas of nursing, including oncology, cardiac care, outpatients, intensive care, neurosurgery and medicine.

Yvette understands the issues and has been a passionate and strong voice for RNUNL since taking office earlier this year.

“Registered nurses and nurse practitioners know both the challenges and solutions to so much of what is happening in our health care system right now,” says Coffey. “We are on the front lines each day, and our patients look to us to be their voice. I am honoured that our members have entrusted me to be their voice as we work to improve health care for Newfoundlanders and Labradorians.”



RNUNL President Yvette Coffey

Yvette will begin a Listening Tour to connect with members on April 20, 2021.

RNUNL's Virtual Convention & Retirement Celebration for Debbie Forward – November 2020



RNUNL Past President, Debbie Forward

Instead of postponing its biennial convention last fall, RNUNL quickly shifted gears and adapted event plans in light of the COVID-19 pandemic.

On November 24-25, we held our 27th Biennial Convention online. The virtual event allowed us to connect with our leaders, conduct business and deliver key education sessions. It was also an opportunity to celebrate the career of President Debbie Forward. After 40 years as a registered nurse and 38 years of union involvement, Debbie retired on December 31, 2020.

Debbie led our union for over 24 years. Her tremendous leadership, passion and strategic thinking took RNUNL to new heights. Debbie was a

fierce negotiator and a trusted leader. Her energetic advocacy has made a difference for her members and patients alike. Our union will be forever grateful to Debbie.

RNUNL members gave the virtual event top marks, with 99 per cent rating it excellent or good. Members were extremely satisfied with the online voting process and the opportunity to provide input throughout the event.

Advocating for Safe Staffing – Ongoing

Newfoundland and Labrador is facing a growing shortage of registered nurses, and it's impacting the delivery of care in communities across the province. Vacancies in RN positions have been rising since 2015. In a survey conducted last fall, more than half of our members say their workplace does not have sufficient nursing staff. RNs worked over 275,000 hours of overtime in 2018-2019.

RNUNL has repeatedly called on decision-makers to address critical staffing shortages. While there have been commitments to staffing initiatives brought forward by RNUNL, there has been limited progress in getting projects off the ground, in part due to the COVID-19 pandemic.

In 2019, we secured commitment from the provincial government to conduct a core staffing review. This will be the first review of staff in over 18 years.

The work will involve an in-depth review of staffing at select sites across the province. The data and information collected will offer valuable details for comparable sites and is just one mechanism we are focused on to achieve safe staffing and reasonable workloads.

The province originally agreed to complete the core staffing review by July 31, 2021. However, COVID-19 has impacted the timeline of this work.

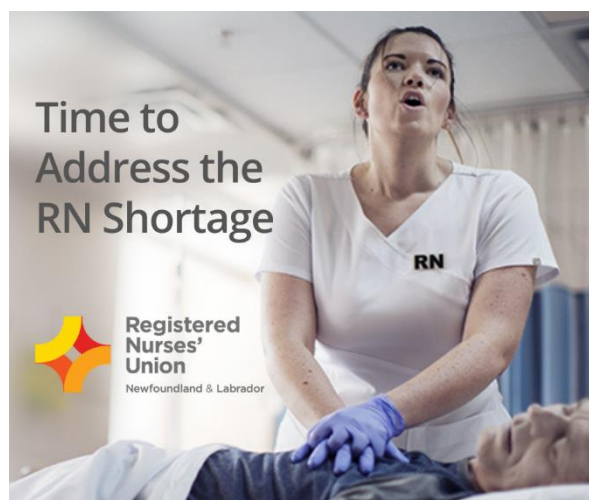
Work to introduce a workforce management system, which will feature an acuity-based staffing model, also continues. This is a multi-year project designed to shift to a staffing model based on the real-time needs of patients.

We are also working to introduce a RN Travel Team that will help provide relief in areas experiencing critical shortages. RNUNL will launch a media campaign in June 2021 to shine a spotlight on the challenges RNs face, and call on government and employers to finally address staffing.

RNUNL Extends Contract for Two Years – June 2020

RNUNL members voted to extend their collective agreement until June 30, 2022. With uncertainty regarding the long-term impact of COVID-19 and the financial challenges facing Newfoundland and Labrador, extending the contract provides stability and security for RNUNL members. The extension, which passed with strong support (85.6% of members voted “yes”), includes a 4% wage increase.

For the first time, voting took place online. This move led to a significant increase in voter turnout, with an additional 1,000 votes cast, compared to 2019. In addition to being more cost-effective, RNUNL's annual report survey shows members were highly satisfied with online voting and support using this approach moving forward.



Nova Scotia Nurses' Union

Nursing Potential: Optimizing Nursing and Primary Healthcare in Nova Scotia

To coincide with National Nursing Week, the Nova Scotia Nurses' Union released the findings of a year-long research project on May 7, 2019. The sweeping report, titled *Nursing Potential – Optimizing Nursing and Primary Healthcare in Nova Scotia*, examines how nurses can work to their full scope of practice while helping to build better access to care across the system.

Recognizing that Nova Scotia has the highest burden of chronic disease in the country and high wait times for primary and emergency care, and understanding that a highly functioning primary health care system has the ability to alleviate systemic pressures, the NSNU embarked on a study to identify strategies to build a robust primary health care system, making optimal use of nurses' advanced skills and education.



CBC Newsmaker: Janet Hazelton, NSNU President, with Tom Murphy, 2019

The authors, NSNU staffers Paul Curry and Justin Hiltz, and NSNU member Ashley Buckle, conducted surveys, focus groups, a literature review and had many conversations with key informants, the public and nurses regarding how to improve access to care across sectors. Our members and other experts in the field told us that including more nurses in areas of care where they are underutilized, and enabling nurses to work more fully to their scope of practice, will result in better outcomes for patients.

In addition, nurses on the front lines of care said patients need a system that addresses the social determinants of health while providing preventative care, chronic disease management and health education, reducing the need for emergency and hospital care – all of which can be achieved through primary health care mechanisms.

The Nurses' Union believes that with registered nurses, licensed practical nurses and nurse practitioners practicing to their full potential, the public benefits more from nurses' expertise and care. True reform requires a re-imagining of the system. It should be proactive and preventative, based on collaboration, providing care when and where people need it. When we recognize nurses' potential, we will improve access and provide better care.

The 127-page report contains 35 recommendations, guiding principles on how to increase access, optimize scopes and provide holistic, collaborative care with nurses playing an integral part in the solution. The report breaks the recommendations into four categories – system dysfunction, system design, education, and work-life and workforce.

The book can be accessed online at nsnu.ca/NursingPotential.

Staffing Standards for Nova Scotia Nursing Homes: Revisiting Broken Homes and a Call for Safer Staffing

In late June 2020 the NSNU released a paper on staffing standards for long-term care and spoke with media about the importance of addressing this matter, once and for all. In the 27-page report, the NSNU revisited the 2015-2016 *Broken Homes* book on the state of long-term care in Nova Scotia, in particular safe staffing.



Staffing Standards Cover Photo

The report was released to NSNU members, health care stakeholders and media on June 26, 2020, followed by a Facebook Live panel discussion about the topic.

The paper, authored by Charlene Harrington, Ph.D., RN, Professor Emeritus from the University of California, San Francisco, was commissioned by the Nova Scotia Nurses' Union in 2019. Dr. Harrington's findings are particularly relevant today given the difficulties nursing homes faced during the COVID-19 outbreak.

The state of Nova Scotia's long-term care system is a leading concern of the members and leadership of the Nova Scotia Nurses' Union. These concerns were formally articulated and validated in *Broken Homes*. In that book, we called for a series of reforms to the long-term care sector in order to improve care for residents, improve working conditions for staff, and improve data collection and transparency.

Despite progress on several fronts, the single most important recommendation from the report, the one that would do the most to improve the quality of life for residents and the working conditions for health providers, remains unrealized. That is the call for explicit evidence-based staffing standards. At a minimum, this would mean an average of 4.1 hours of care per resident per day, including 1.3 hours of nursing care (RN and LPN combined). Roughly, this would mean about one RN and one LPN staff for every 30 to 40 residents during the day, and for every 40 to 55 residents at night; and one CCA for every 7 residents during the day and for every 15 residents during the night. Compared to current levels, this would be less than a 20% increase.

It has been said that we lack sufficient provincial data to make definitive claims around a staffing ratio. The province has promised to introduce the tool that would provide this data, the internationally recognized Resident Assessment Instrument, many times over the past 25 years, but we are still waiting. Regardless, the Nurses' Union has always believed that we have enough information to implement a minimum staffing ratio, one that can be adjusted upwards if our needs are revealed to be higher.

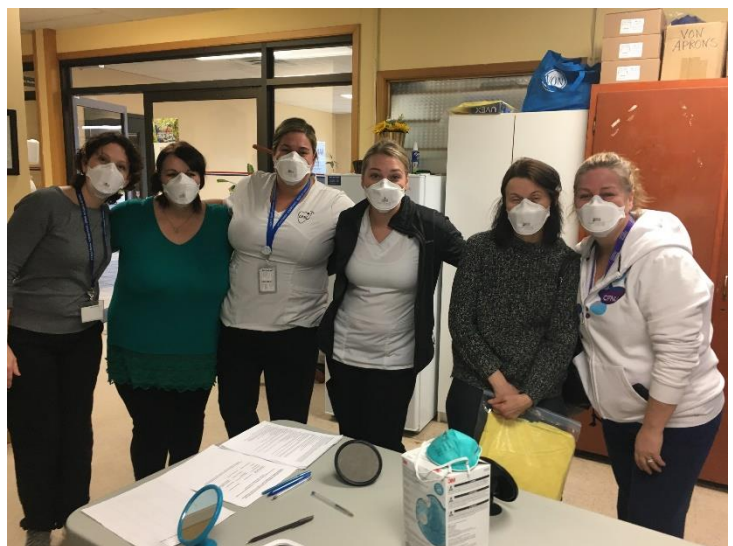
To make this point, the Nova Scotia Nurses' Union contracted Dr. Harrington to investigate the long-term care staffing situation in Nova Scotia and fulfill the task of recommending a minimum staffing standard. Dr. Harrington is recognized internationally as a foremost expert on long-term care staffing. She served on the U.S. Institute of Medicine (IOM) Committee on Nursing Home Regulation, whose 1986 report led to the passage of the *Nursing Home Reform Act* of 1987. She served on three IOM committees that examined the nursing workforce, long-term care quality and patient safety. She has testified before the U.S. Senate Special Committee on Aging several times and has written more than 140 articles and chapters, co-edited five books, and lectures widely. In short, you cannot research the topic of long-term care without knowing her name and reading her work.

After examining the situation and data available for Nova Scotia, Dr. Harrington concluded that the province should implement the minimum professional standard of 4.1 hours of care per resident day. It is worth noting that this is based on the sparse data available that suggests residents in Nova Scotia have less complex needs than those in other jurisdictions in Canada. This is a very questionable premise, and only better data can help clarify this.

We cannot speak of reform to the long-term care sector without recognizing the tragedy we have just seen unfold in nursing homes. In our own province, over 90% of COVID-19 deaths occurred in nursing homes, a trend we saw across the country and internationally.

We are not here to criticize any particular facility, and it is imperative to clarify that the conditions at Northwood, where the tragedy struck hardest in Nova Scotia, are nothing like what we saw coming out of the military report in Ontario. We represent about 40 RNs and NPs who work at Northwood, and we represent many RNs, NPs and LPNs who provided help there during the crisis. The care these nurses provided was, and continues to be, of exceptional quality, and they and their CCA colleagues and other staff are true heroes for staying at the bedside, putting themselves and their own families at risk. Many staff paid a very high price for this commitment.

The issues of understaffing in long-term care and the COVID-19 crisis in long-term care are intimately related, as we discuss in the preface we have recently added to this report. The long-term care sector has been chronically underfunded for decades. Staff struggle to deal with increasingly complex residents, many of whom exhibit challenging behaviours that are no fault of their own. Increased funding and staffing levels would have helped buttress efforts against this deadly disease, with more resources for infection control and health and safety, staff to deal with residents who wander or who exhibit challenging behaviours, staff to perform regular vital assessments, and enough staff to deal with the particular challenges presented by a pandemic.



Yarmouth VON N95 respirator fit testing, 2020

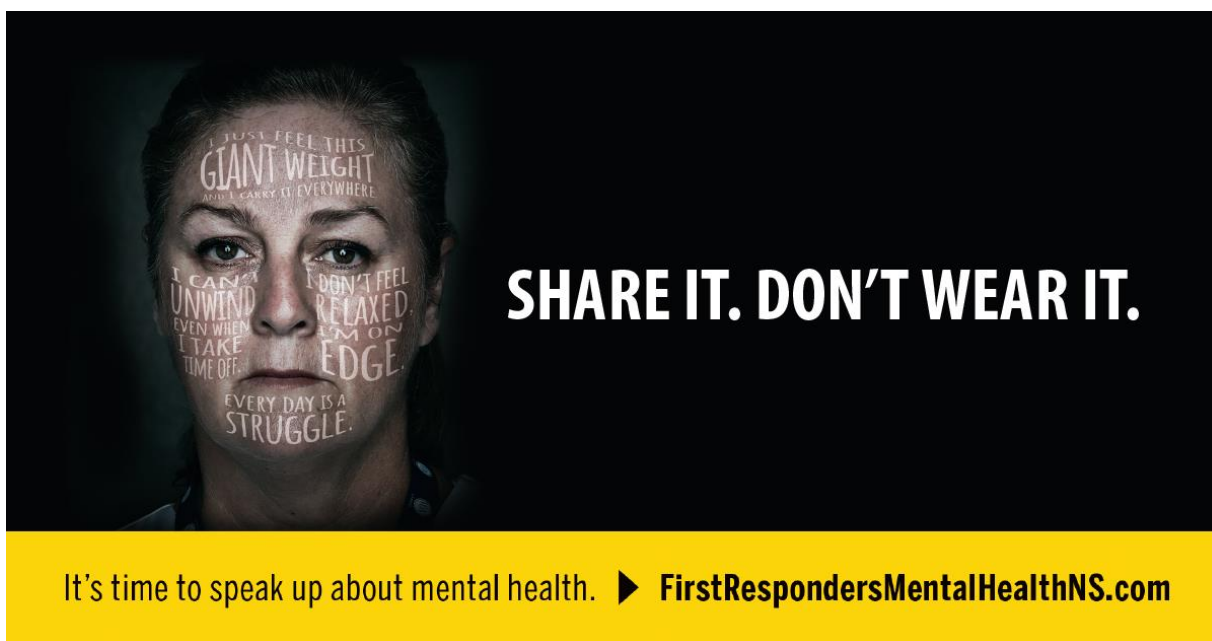
In short: you, our members, have been telling us for years that we need to do better in LTC. The COVID pandemic has further exposed the challenges the sector faces, which warrants more dialogue and action.

Visit nsnu.ca/StaffingStandards to read the full report.

Share it, Don't Wear It

A new online resource is available for first-responders who are experiencing mental health distress.

First responders are exposed to trauma every day as an unavoidable part of their jobs. This puts them at higher risk of developing traumatic stress injuries like depression, anxiety and PTSD. The website was developed to help first-responders access mental health support when they need it, understanding that mental health crises can happen at any time.



The website offers helpful tools and resources for first-responders, their family members, employers and colleagues who are dealing with mental health issues. Some resources include self-assessments, online counseling, training materials and mental health apps.

This resource is a collaboration between labour unions, including the NSNU, first-responders, emergency service employers, Government and the Workers' Compensation Board (WCB). Learn more at firstrespondersmentalhealthns.com.

Prince Edward Island Nurses' Union

Nurses Ready to Administer COVID-19 Vaccine

Nurses and pharmacists in PEI are confident they can quickly deliver the COVID-19 vaccines when they are called upon.

Barbara Brookins, president of the PEI Nurses' Union, says nurses are flexible and resilient, and already provide vaccinations every year during flu season.

"We do have nurses that work outside their regular hours. They work in the evenings. They work on the weekends. And we do have other nurses that work within various facilities that work along with employee health nurses to vaccinate employees already. So that system's already in place."



Barbara Brookins, president of the P.E.I. Nurses' Union, speaks with CBC News Compass host Louise Martin about her new role and challenges facing nurses.

To date, it's been public health nurses administering the vaccine at the Queen Elizabeth Hospital and long-term care homes in the province. But as the Island's supply increases into the spring, more nurses will likely be called upon to help administer shots. According to Health PEI, about 30 nurses have the proper training to administer vaccines right now, and there is a plan to train more, if necessary.

"While it is true that Health PEI is always recruiting for nursing positions and we have a need for more nurses in our system, we do not anticipate any issues in providing the COVID vaccine due to staffing," said an email statement from PEI Chief of Nursing Marion Dowling.

Brookins said four or five nurses at a clinic could vaccinate a couple of hundred people in a day.

"So if you have several of those same clinics operating across the Island, you'd have to do the math on that one. But we could certainly roll it out a lot quicker."

At the moment, she said, the staffing number is based on the supply of doses.

Brookins said it's in the best interests of people working in health care to get as many Islanders vaccinated as quickly as possible.

"It's a short-term pain, long-term gain type of thing, because I think every nurse would realize that the faster we get people immunized and protected, our workload is going to be impacted dramatically at the front line. When we're caring for patients, if we can be assured patients coming in are not going to be COVID-positive, it takes away a huge workload for us."

Changes from Within

The PEI Nurses Union has an entirely new team, including our first time ever Labour Relations Officer. We're excited to hit the ground running in 2021 with our new team in preparation for a new "COVID-19 normal". Our new Executive Director, Stephanie Gallant, started in the summer of 2020. Her experience so far has been incredibly rewarding, and since her arrival in July she has had the opportunity to work closely with the President (both past and current) and Board of Directors, and together have been preparing to move into the action stage.



Along with a new Executive Director, we also have a new President, Barbara Brookins, who took over as of December 1. Over the last few months, she has quickly acclimatized herself back into the role and familiarized herself with the current issues.



Stephanie Gallant, Barbara Brookins, Nathalie Vanner, Monic Vokey

Lastly, we have also hired a new Labour Relations Officer, Nathalie Vanner, and Communications and Research Officer, Monic Vokey, who both started with the PEINU in January 2021. Nathalie has already been busy supporting local unions and members on matters related to the interpretation and administration of the collective agreement. Monic has upgraded the Union's social media strategies and is busy implementing new communications and research strategies for 2021.

We are very excited to have a full team again and ready to serve our members!

To date, all residents and staff in long-term care and community care have received two doses of vaccine!

Prince Edward Island says it expects to finish immunizing most of its first priority groups by the end of March in the first phase of its COVID-19 vaccine rollout. Meanwhile, planning for phase 2 of the rollout continues.

According to the provincial website, PEI has administered 10,691 doses of the vaccine as of Wednesday.

It says 5,712 Islanders have received at least one dose, and 4,979 have received two doses.

Moderna and Pfizer-BioNTech are the only two vaccines that have been approved in Canada and both require two doses.

PEI's target is to immunize 80 per cent of its population, just over 103,800 people.

Better Nurse Recruitment and Retention Promised in PEI Throne Speech

The PEI government is making plans to expand nursing programs at both UPEI and Holland College, according to the throne speech delivered in the legislature Thursday afternoon.

Seeing more nurses working in the province was part of an ambitious throne speech read by Lt.-Gov. Antoinette Perry as the spring session of the legislature opened.

The government plans to establish a working group made up of representatives from UPEI, Holland College, Health PEI and nursing professionals.

"The working group will collaborate to expand the registered nursing program at UPEI and the licensed practical nurse program at Holland College for Island students wishing to pursue a career in health care on Prince Edward Island," the speech says.

The speech included the announcement of two specific funds aimed at retention and recruitment:

- A \$5-million five-year fund for recruitment of nurses and nurse practitioners, with some of the money going for the forgiveness of student debt
- A \$2.5-million retention, mentorship and training fund for registered nurses and nurse practitioners currently working on PEI



Tracy Robertson IUOE, Karen Jackson UPSE, Minister of Health, Hon. Ernie Hudson and Barbara Brookins PEINU.

New Brunswick Nurses Union

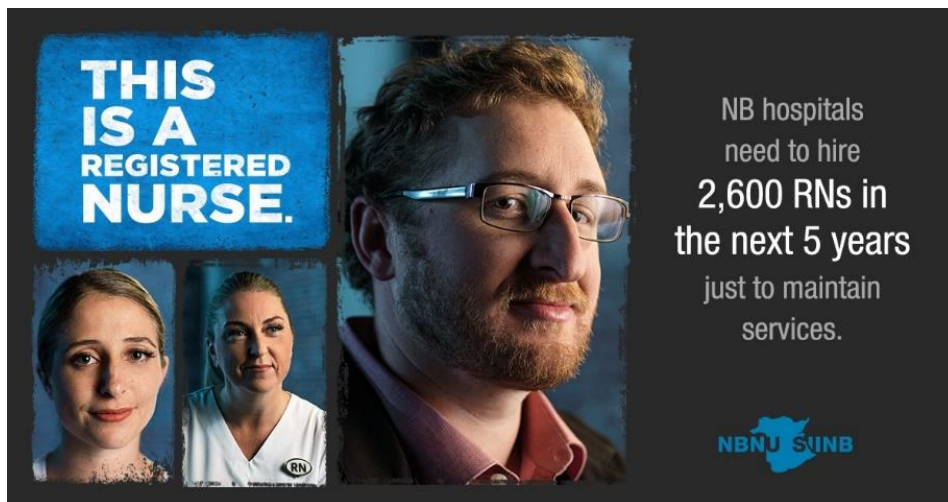
Hosting the 2019 CFNU Biennial

A major highlight from the past two years was hosting the 2019 CFNU Biennial in our capital city, Fredericton, New Brunswick. More than 900 nurses from across Canada joined us for meaningful conversations, educational sessions and, of course, some fun too! The work we engage in at the national level provides nurses with the energy and support needed to help make a difference in our home provinces. NBNU and our members look forward to the upcoming virtual CFNU Biennial in 2021 *No Backing Down*.



2020-2021 PR Campaign – Nurses Need Our Support

As NBNU continues to bargain for the fair collective agreements our members deserve, we wanted to have a campaign in market that would support those efforts. In November 2020 we launched our first phase of the campaign entitled “Band-aid Solutions.”



The creative concept hinged on the idea that band-aid solutions offered by government are not enough, and it is time to step up and support RNs and NPs with a fair deal. We tried something new by featuring large band-aid ads in prominent locations, which were strategically placed near the provincial legislative building and key constituency offices. In conjunction, a series of band-aid ads ran on digital and social media with shocking statistics around the state of nursing in our province (see example below).



In December, NBNU launched the second phase of our campaign “This Is a Nurse” with the objective of increasing interest and engagement within the general population. The campaign also stressed the importance of supporting our RNs and NPs to obtain a fair deal and improved working conditions.

The campaign was highly successful with over 4.88 million impressions made over a 6-week run. Total views to completion

were 519,000, which equates to a 66% view rate – surpassing any campaign NBNU has had in market to date. In addition, we had 22,774 unique visits to our website, which hosted information for the public, and to another separate page for our members, to articulate the reasons behind our campaign as well as some social shareables. The ads also ran on buses and on TV.

2020 Provincial Election

In September 2020, provincial government called a snap election, which led to NBNU partnering with the Nurses Association of New Brunswick (NANB) on an election awareness campaign entitled “*New Brunswick Nursing Matters.*” Communication efforts included a microsite (www.nbnursingmatters.ca), which highlighted five of our shared top priorities:

- Addressing the nursing shortage
- Long-term care strategy
- Pharmacare
- Mental health & addictions
- Access to primary care



Paula Doucet, NBNU President, joined Maureen Wallace, NANB President, for a Facebook Live session with members, which was well attended. Between both organizations, we represent one in every 83 New Brunswickers and bring a unique perspective as frontline health care professional. As non-partisan organizations, our key objectives were to encourage voter participation and raise awareness about priority health care issues. Although NANB and NBNU have very different mandates, we continue to have a good working relationship as we navigate the landscape of the current conservative majority government under Premier Blaine Higgs.

Assault Trail and a Precedent-Setting Sentence

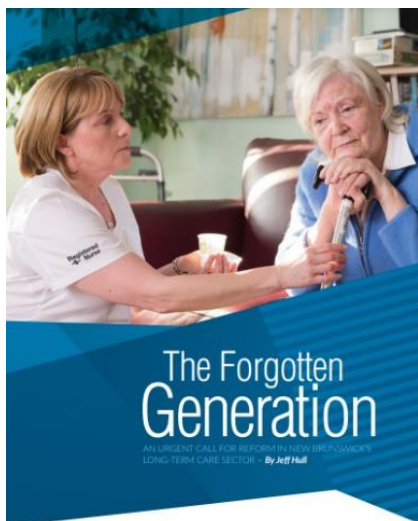
Violent attacks happen far too often in all sectors of nursing and continue to be a priority issue for NBNU to combat. A particularly disturbing incident occurred in March 2019 at the Dr. Georges-L.-Dumont University Hospital Centre, where the husband of a patient brutally assaulted an RN and an LPN. The New Brunswick Nurses Union supported our member and her colleague at every step of the judicial process and was pleased that the sentence, handed down by the presiding judge in November 2020, included the higher end of recommendations from the Crown Prosecutor.

In conjunction with the CFNU, NBNU is advocating for Bill C-434, which amends the *Criminal Code* to require a court to consider the fact that the victim of an assault is a health care sector worker to be an aggravating circumstance for the purposes of sentencing. This bill is in line with similar legislation that already exists for police officers and transit drivers, who also have a regular exposure within their workplaces to the potential for violent attacks from the public.



NBNU President Paula Doucet

As with all cases of assault, NBNU believes workplace violence should be investigated by police, not left in the hands of the hospital administration or, as is so often the case, of the victims themselves to deal with. In addition, NB health care facilities should be held accountable by WorkSafeNB for whether they have performed risk assessments under OHSA. NBNU believes that based on the risk assessments, peace officers, entry screenings and full-time properly trained security teams will need to be implemented to mitigate the increasingly severe forms of workplace violence against vulnerable health care workers.



The Forgotten Generation – A Call for Urgent Reform to New Brunswick's Long-Term Care Sector

On October 15, 2020, NBNU launched our report, *The Forgotten Generation: An Urgent Call for Reform to New Brunswick's Long-term Care Sector*. Recognizing that New Brunswick was experiencing several COVID outbreaks in the province, and notwithstanding what our members were facing, the release of this report came after almost two years of investigative research. During the launch, Paula Doucet, NBNU President, called for an official inquiry into long-term care in the province, under the terms of the *Inquiries Act*. Included in the report are 38 recommendations put forth by NBNU for decision makers, government and stakeholders to consider as a starting point for true and fair reform to our broken system.

In advance of the launch, the NBNU leadership team met with elected party leaders to brief their caucuses. Paula and Matt Hiltz, NBNU Executive Director, also met with Social Development, the NB Nursing Home Association, the Seniors Advocate and the Auditor General in advance of our press conference to brief them on the dire state of care our seniors are being subjected to.

To learn more and obtain an electronic copy of the report, visit: <https://theforgottengeneration.ca/>

COVID-19 Pandemic

While New Brunswick has fared well during the pandemic in comparison to provinces west of us, we have not come out unscathed. Like our sister unions, all our face-to-face meetings were canceled for 2020, and while we are hopeful to resume in 2021, it's unlikely this will happen before the fall. Since the onset of the pandemic in NB (March 2020), public sector union leadership has weekly and sometimes daily briefings with pertinent government departments to ensure our members receive important updates as soon as possible. Communications between the employer and NBNU has been open and effective to date.



NBNU in conjunction with other public sector unions representing health care workers successfully negotiated and signed a mobility agreement during the pandemic. This allows the employer to deploy or reassign staff based on the needs of the populations, while still protecting members' collective agreement rights.

Similar to our sister unions across the country, NBNU members have been subject to a single-site agreement. Under these terms, when an outbreak occurs, members are prohibited from working in multiple facilities but will not suffer any loss of income.

Ontario Nurses' Association

COVID-19: ONA Protects Members and Their Patients, Residents and Clients

In the early days of 2020, a deadly and easily transmissible virus dubbed “COVID-19” began to spread across the globe.

On high alert, Ontario Nurses' Association (ONA) President Vicki McKenna, First Vice-President Cathryn Hoy and CEO Beverly Mathers knew that this particular virus would be difficult to control if no preparations were in place. Speaking repeatedly to the province's Minister of Health early in 2020, the ONA leaders asked whether Ontario was prepared.

The government response? “We are aware of the issue.”

Given ONA's direct experiences with viruses – including the deadly SARS outbreak in 2003 – ONA knew immediate planning was needed to protect ONA members and their patients, residents and clients.

COVID-19 spread to Ontarians swiftly. ONA raised many life-or-death issues with government and employers to ensure protection, top among them: access to proper personal protective equipment (PPE).

ONA had heard many stories from frontline members, indicating that their employers had locked up N95 respirators, making them inaccessible.

Unfortunately, some employers left ONA no choice but to take them to court to ensure the N95s were released to workers. ONA won the case, with an Ontario Superior Court Judge commenting that: “Nurses are sacrificing their personal interests to those under their care...not only for the immediate benefit of their patients, but for the benefit of society at large.” He called suggestions from the private, for-profit homes that nurses' quest for protective gear “for their own narrow, private interest...’ironic’...and seems to sorely miss the mark.”

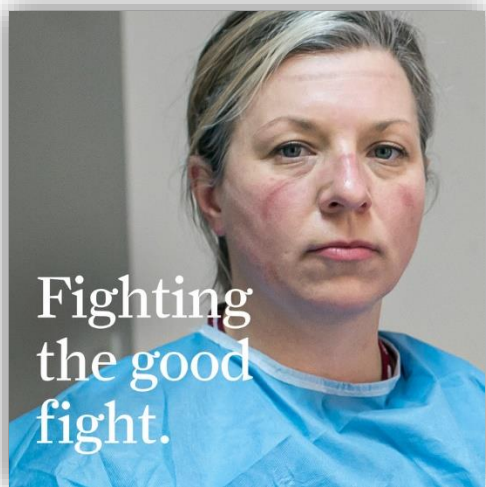


Access to PPE was just one of many urgent and serious challenges ONA members have faced during this pandemic. Members now have access to the PPE they need to protect themselves which, in turn, protects their patients, residents, and clients. ONA continues to be steadfast in ensuring members are protected from this coronavirus.

With public health guidelines, government directives and COVID-19 scientific definitions changing at a very rapid pace, ONA launched several new communications initiatives to keep our members informed.

Throughout the pandemic, members were able to hear first-hand from McKenna, Hoy and Mathers on issues that matter to frontline members through telephone town halls and Facebook Live sessions. Thousands of our members listened in and participated in the online threads, seeking clarity on a host of vital issues.

Robust Provincial Campaigns Highlight Government's Misguided Approach to Health Care



In late 2019, ONA launched one of its most assertive campaigns ever, directly calling out the Doug Ford Conservative government's shot-in-the-dark approach to health care reform and urging the public to voice their opposition.

The government is starving the health care system of adequate funding, and nurses are already seeing layoffs and job losses in their workplaces. Ontario has been losing skilled nurses, which directly affects care for patients, residents and clients. Premier Ford's mishandling of public health was a real turning point for ONA to call the government out.

The campaign used radio commercials, transit shelter ads, print publications and catchy Facebook ads, ensuring that disastrous health care cuts remained front-and-centre in the public eye.

In 2020, with nurses desperately trying to fight on the front lines, ONA launched two innovative campaigns, Fight the Good Fight and Still Fighting. Set in the context of COVID-19, our radio, TV and social media ads highlighted that our members are "still fighting" on the front lines of the pandemic – despite the enormous challenges they are facing.

These campaigns helped to spur ONA members to take action and to be vocal on issues that directly affect their patients, residents and clients. Members who may have never paid attention to what is taking place politically are speaking out as never before: fighting for those they care for, fighting for their jobs and fighting for their profession.

ONA's campaigns sparked a newfound voice for our members, which made our campaigns all the more worthwhile.

ONA Won't Be Silenced When It Comes to Residents and Long-Term Care

Perhaps the most serious tragedy that has occurred in Ontario during COVID-19 is the more than 3,600 long-term care home resident deaths from COVID-19.

Since the pandemic began, nurses were at great personal risk within the homes due to many factors, including lack of access to PPE, inadequate infection prevention and control procedures, and ineffective cohorting of residents, leading to further spread.

The Ontario government recognized this catastrophe and launched Ontario's Long-Term Care COVID-19 Commission. ONA worked tirelessly to put together key findings and evidence in its presentations to the Commission.

Our courageous frontline members gave the commissioners harrowing accounts of working in long-term care during COVID-19. ONA has submitted a number of evidence-based recommendations to the Commission with a view to improving the care and safety of residents. We remain optimistic that long-term care in Ontario will finally improve.

[A Perfect Storm Leads Members to Become Strong Activists](#)

While a horrific global pandemic brought the world to its knees, the Ontario government passed draconian legislation that unceremoniously removed the fundamental rights of our members.



ONA President Vicki McKenna

Among the legislation is a bill – Bill 124 – that limits wage increases to one per cent each year for three years, and another – Bill 195 – that provides extensive powers to override collective agreements and take away the rights of nurses who have been working so hard to provide care during the pandemic. Finally, Bill 175 was passed which fundamentally changes home and community care delivery. This legislation includes the removal of the *Patient Bill of Rights*, a key tool of accountability for clients and their families.

Understandably, ONA members were outraged and exhausted from the long hours, stress and uncertainty they have endured during COVID-19.

This government legislation created a perfect storm, with a pandemic and the attack on nurses and their rights. ONA members have been disrespected, and they were inspired to use their strong voices to tell the government that this legislation is completely unacceptable.

At MPP offices across the province, ONA members spoke out against the bills and called for them to be repealed. Hundreds of our members took collective action through safe, socially distanced rallies at MPPs' offices, in front of the legislature, loudly on social media, by making phone calls and text messaging. Like never before, ONA members mobilized and took action to fight for respect, for workplace improvements, and for protections for our patients.

[ONA Leaders and Members Continue to Advocate to Stop Workplace Violence](#)

In addition to struggling through a global pandemic, we continue to see workplace violence at an alarming rate in health care. Violence prevention is always top of mind for ONA leaders and members.

For the past two years, ONA has continued to make inroads with employers, government and stakeholders, and has increased public awareness of the devastating impact of violence in health care on both care providers and patients, residents and clients.



ONA 1st Vice-President Cathryn Hoy

ONA's Local 8 launched a harrowing video on post-traumatic stress disorder (PTSD) in nurses that also recommends supports for health care workers. PTSD can be the result of workplace violence, underscoring the long-term impact of everyday trauma experienced by registered nurses and health care professionals while on the job.

McKenna notes that a survey conducted by the CFNU found that 20 per cent of registered nurses suffer from PTSD. "While the public doesn't always recognize that RNs and health care professionals are first-responders, that is exactly what we are," she says. "ONA has fought hard to have nurses included in provincial presumptive legislation that recognizes the likelihood of PTSD afflicting first-responders and makes it easier to access help. This film series is a valuable reminder to those suffering in silence that help is available."

Workplaces Laid Off Nurses – During A Pandemic? Yes, It Happened in Ontario

In the midst of the pandemic, some Ontario hospitals issued layoff notices to hundreds of registered nurses. Across Ontario, more than 143 registered nurse positions were cut, amounting to a loss of more than 240,000 hours of direct patient care. Immediately, this issue captured the attention of the public and many media organizations. And rightfully so.

As a result of these cuts, our members took swift actions to demand changes, including organizing leafletting in communities. ONA was instrumental in pushing forward our members' demands: employers must fill all RN positions and rescind the RN cuts.



Pay Equity: The Fight Continues 14 Years Later

Although ONA celebrated a significant win in 2019 following a 13-year-long battle to maintain pay equity rights for registered nurses working in female-dominated professions, the celebrations were short-lived because the Ontario government announced it was appealing the decision.

In 2020, this case was heard on October 6 and 7 at Ontario's Court of Appeal. The courts have already found that pay equity is a fundamental human right that has been recognized by the Supreme Court of Canada, and employers have a legal obligation to maintain pay equity to prevent the gender wage gap from widening.

ONA hopes that this latest battle in the Court will result in another ONA win so this frustratingly long fight can finally end.

Manitoba Nurses Union

The past two years have been extremely challenging for Manitoba's nurses. In addition to the Pallister government's austerity agenda for health care, the wage freeze bill and union representation votes, the ongoing COVID-19 pandemic brought with it the fight for proper personal protective equipment (PPE), put further strain on our already stretched health human resources and so much more. Here's an update on the situation in Manitoba.

COVID-19 in Manitoba

MNU President Darlene Jackson has been highly visible throughout the pandemic in Manitoba, which began with the first reported case on March 12, 2020. Early on, MNU saw the need to fight for PPE on behalf of all members and spent months highlighting this need with government and in the media. Our nurses were concerned about limited access to N95 masks, the extended use of surgical masks and potential re-use of N95 masks, as well as constantly changing and confusing guidelines.



MNU President Darlene Jackson

When nurses and other health care workers began to fall sick with COVID-19 or self-isolate due to possible exposure in the workplace in early March, then Manitoba Health Minister Cameron Friesen blamed staff and refused to improve health and safety measures. In response, MNU reiterated its call for better protections and launched a letter-writing campaign calling on the Pallister government to improve PPE protections for health care workers; and further, to allow nurses to use their professional and clinical judgement to determine the level of PPE they need to keep themselves and their patients safe. Thousands of nurses and supporters sent letters to their elected officials.

On July 14, 2020, MNU signed a joint statement and memorandum of agreement (MOA) with Shared Health, detailing greater access to and decision-making around PPE use, the creation of a joint PPE committee, adherence to the precautionary principle, and restored accommodation rights for pregnant and immunocompromised nurses. This win paved the way for similar gains for other health care workers throughout Manitoba.

The July MOA was further enhanced with the announcement, in January of 2021, that MNU had secured a new MOA whereby nurses would automatically be provided an N95 respirator in certain situations, replacing the requirement in the July MOA of having to request an N95. These situations included: all nurses, across all care settings, that provide direct care to COVID-positive and/or COVID-suspect individuals; all nurses in labour and delivery (with the exception of those staff caring for patients who have received a negative COVID-19 test result on the day of labour/delivery or the day prior); nurses in emergency departments and urgent care centres (with the exception of staff working in designated low-acuity areas where green-zone patients are directed following screening at triage); and all nurses performing nasopharyngeal swabs at COVID-19 testing locations.

In addition, the January PPE MOA bolstered accountability mechanisms to ensure employer compliance with the new standards and requires employers to share information with MNU regarding the circumstances of nurses who test positive for COVID-19, respecting privacy and confidentiality requirements, in order to better understand possible reasons for exposure.

MNU also secured an MOA on Redeployment with the provincial employer group on December 1, 2020. The intent of this MOA was to support nurses who would have otherwise had redeployment imposed on them with no formal process nor compensation offered. This new MOA, built on previously negotiated MOAs, addressed a number of outstanding issues related to equity and eligibility, and enhanced the premiums extended to nurses working in areas of need, who had their schedules disrupted, or who had or have been redeployed.

Nurses Take a Stand



2019
MNU
Rally

The Pallister government introduced Bill 28: *The Public Services Sustainability Act* during the 41st Legislature, 2016-2017. The goal of this bill was to impose a four-year wage cap on all unionized public sector employees (including health care) of zero increases in years one and two, 0.75% in year three and 1% in year four of their next collective agreements. Labour unions responded by forming the Partnership to Defend Public Services (PDPS), which represented more than 120,000 public sector workers, and filed a constitutional challenge of the bill in the Manitoba Court of Queen's Bench.

In June of 2020, Justice Joan McKelvey ruled that the Pallister government's *Public Services Sustainability Act* and its actions to impede collective bargaining in the province were a violation of the *Charter of Rights and Freedoms* and workers' right to collective bargaining. This ruling confirmed that Bill 28: *The Public Services Sustainability Act* is unconstitutional. Sadly, the Pallister government announced in August of 2020 that it would be appealing the ruling. This appeal is expected to go to court sometime in the fall of 2021. MNU members have been without a contract since March of 2017.

Representation Votes

The representation votes were the result of Bill 29: *The Health Care Sector Bargaining Review Act* and took place in July and August of 2019. The Pallister government passed Bill 29 in 2017, forcing unions to compete against one another for representation of entire job classifications within each health authority. Despite MNU making the case that this was an unnecessary and expensive proposition when MNU already represented over 97% of all unionized nurses in Manitoba, the votes went ahead in 2019.

The result was a win for MNU in every union representation vote in the nursing sector, including Shared Health, WRHA and Southern region. We continue to be grateful to all those who worked tirelessly throughout the campaign to make sure nurses understood the importance of voting. In December of 2019, MNU officially welcomed approximately 500 new members to the union as a result of the representation votes.



2019 Climate Strike

Workload Staffing Reports Go Online

MNU is proud of our simplified Workload Staffing Reports (WSRs), which were distributed to member sites province-wide in the fall of 2018. Our goal for the WSRs was to bring them online, and in March of 2020 we were able to achieve our goal! The online WSRs were first made available to MNU members at select Winnipeg Regional Health Authority (WRHA) sites, and then to all WRHA sites by September 2020 with plans to expand to other health regions in Manitoba by 2021 year end. For more information about online WSRs, visit manitobanurses.ca/workload-staffing-reports.

Saskatchewan Union of Nurses

In March 2020, the world came to a halt, and SUN, much like all of our nursing union and health care counterparts across Canada, had to pivot operations in response to the new reality of a global pandemic – a pandemic that threatened the very safety of our members and their patients, the health of communities everywhere, and the integrity of a provincial health system that was already bursting at the seams.

2020 has been a test of resilience for all Canadians, but most of all it has tested the strength of those on the front lines of health care – especially registered nurses, who are by far the largest group providing direct care in the health system.

Caring for COVID-19 patients, along with ensuring all the other health care needs of Saskatchewan's citizens continued to be met, has been wildly stressful for SUN members and their frontline colleagues.

In Saskatchewan, registered nurses have been frustrated by the often-overt lack of support and transparency from government and the provincial health authority, including in pandemic planning and decision-making.

Frequently being left to advocate for their own safety, SUN and registered nurses have had to press for better PPE, as well as prioritization in the province's vaccine rollout after being excluded from the early phases. This constant uphill struggle in the face of ever-changing practice environments, demoralizing pandemic-deniers protests, and a constant fear of transmitting the virus to their patients and loved ones at home is contributing to steadily rising feelings of neglect, anxiety and burnout among Saskatchewan's registered nurses.

Given the unprecedented times and challenges of 2020, SUN frequently returned to our vision – **Healthy Members, Healthy Union, Healthy Communities** – as a touchstone to guide everything our union does. It has been an extraordinarily difficult year where the critical importance of this vision has been amplified like never before.

SUN adapted quickly when meeting our members face-to-face was no longer an option, ramping up member education and communication in the digital space.



SUN President Tracy Zambory and Hassan Yussuff,
CLC President



We created opportunities for members to hear from and engage with local and international nursing leaders from Canada, Australia, Ireland and the United States. We ensured SUN's elected leaders were fully supported so they could confidently serve their members on the ground at the regional and local levels. And we instituted a timely responsive member alert system that guaranteed members were always in the know. SUN prioritized information in 2020 because amongst all the chaos and constantly changing workplace and practice environments we knew this was a calming resource that members needed most.

In early 2021, SUN launched the virtual Wellness Spotlight initiative in response to the severe mental health pressures nursing in the age of COVID-19 was causing. This is support we are committed to continuing in

the year ahead.

2020 also saw the conclusion of negotiations with the Saskatchewan Association of Health Organizations and a new collective bargaining agreement, providing long-awaited security for SUN members during uncertain times.

SUN prioritized all of these member support initiatives not just because of the pandemic, but because we know that a healthy RN workforce – **Healthy Members** – is essential to the functioning of the health system, safety of patients and the overall health of society. Without the expertise of registered nurses, actively caring for patients at the bedside, the system is nothing more than physical buildings, beds and equipment.

In 2020, SUN also persisted with the vital advocacy and support work we do on behalf of the people of Saskatchewan.

We persevered with our social and health issues advocacy campaigns of previous years, calling for investment in more community mental health and addictions resources, and launched new campaigns to educate the public about the critical importance of masks and other public health measures to limit the spread of COVID-19. We were the first to speak out on the tragic consequences of COVID-19 in long-term care in Saskatchewan, leading the call for a public inquiry into the hardest-hit facility, while demanding a full examination of for-profit seniors' care and long-term care standards in the province.

Seeing the opportunity to impact one of the most significant social determinants of health in a time of extraordinary need – food security – SUN stepped up in 2020 with substantial donations totalling \$300,000 to help Food Banks of Saskatchewan fight hunger in communities right across the province.

At the end of the day, when people question why SUN talks about so much more than just health care, the answer is simple: everything is interconnected, and health is so much bigger than the absence of physical disease. It is the mental, physical and social well-being of all of us, at all times – **Healthy Communities**.

One of the most exciting changes for SUN was the 2021 launch of an all-new visual identity, which included a new logo and colours for our union – a process we worked on throughout 2020.

While 2019 feels like a distant memory, given the upheaval caused by the COVID-19 pandemic, it was still a busy year for SUN.

Having members in every corner of Saskatchewan means we have our finger on the pulse of the many challenges facing the health system, nursing, and the patients and families our members serve. In 2019, SUN expanded on our commitment to leverage this widespread knowledge of the system and the expertise of our membership to positively shape health transformation, support and protect the registered nursing role, and promote the overall well-being of communities across Saskatchewan.

Member education was a priority in 2019 with a focus on creating more opportunities for members to feel empowered and supported in their workplaces, and connected to both each other and their union.

We also expanded our external partnerships, with the goal of unifying communities around pressing health and social challenges, most notably the growing mental health and addictions crisis gripping the province. We achieved this through our advertising campaigns, media relations, and Saskatchewan's first-ever Health Innovation Summit – an event spearheaded by SUN to unite health care, public, business, tech and government stakeholders to find solutions to health issues impacting the province.

Whether speaking out in the media or advocating for change with government and the Saskatchewan Health Authority, SUN worked to elevate our membership's concerns and priorities to the forefront of public discourse. Violence against frontline health workers, the need for a national pharmacare plan, and registered nurse staffing and facility overcapacity woes were just some of the major issues SUN focused on throughout 2019.

Advocacy, Leadership and Solidarity were the cornerstones of SUN's work to fulfill our union's vision in 2019.

What 2021 holds for Saskatchewan is still uncertain. Vaccines are bringing a new hope, when just a few months earlier it felt as if there were no real end to this pandemic in sight. What is certain, however, is the crucial role SUN and registered nurses must play in our province's recovery.



COVID-19 exposed numerous gaps and failures in our health system, from those seen in long-term care and mental health and addictions services to registered nurse staffing, capacity and crisis-preparedness issues. It also highlighted the irreplaceable role of registered nurses in ensuring a high-functioning safe health system.



Looking ahead, SUN will remain a union of action. We will be the voice for our members as they continue to battle COVID-19, their rock when they are dealing with the stress of it all, and a tireless champion for a stronger health system and better communities across Saskatchewan.

United Nurses of Alberta

No one could have imagined how 2020 would shape up when we celebrated the start of the new year.

For United Nurses of Alberta, 2020 looked to be a year of negotiations and fighting against a government intent on imposing jobs cuts and major rollbacks to UNA's collective agreement.

"Registered nurses and registered psychiatric nurses are the backbone of the health care system," said UNA President Heather Smith after the United Conservative Party government tabled its provincial budget in October 2019. "We are still recovering from the attack on RNs in Alberta during the mid-1990s. It's outrageous and tragic that this government appears to want to repeat that mistake."

"I have said many times before, 'Nurses go forward, they do not go back,'" Smith said.

Starting in January and February, UNA members at hospitals and health care worksites across the province joined their coworkers and colleagues from other unions in protesting the United Conservative Party's announcement that it planned to lay off more than 11,000 health workers – including 750 registered nurses and registered psychiatric nurses.



Heather Smith, UNA President

Pensions and retirement security were also top of mind for UNA members at these events.

After employees finally achieved legal independence from government for their public sector pension plans in 2018, the United Conservative Party government yanked that independence away with the passage of a new law in 2019.

The bill removed the ability of the newly independent pension boards to decide who manages the employee funds held in the pension pool. Instead, the Alberta government would now have the ability to make those decisions, creating fear that politically motivated decisions could put the retirement security of tens of thousands of Albertans in jeopardy.

A series of rallies and information pickets held on Valentine's Day saw thousands of UNA members in more than 40 communities calling on the government to "not cut the heart out of health care."

"Health care workers like nurses are the heart of Alberta's

health care system, which is the envy of the world. Don't let our government cut the heart out of health care!"

- UNA President Heather Smith

The rallies were a huge success and looked to be only the start of further action as negotiations for a new provincial contract continued.

But the time for large-scale rallies and gatherings was quickly put on hold as the COVID-19 pandemic hit Alberta and led to UNA and Alberta Health Services agreeing to put bargaining for a new provincial collective agreement on hold until a future date.

With the spectre of job cuts only delayed, confronting the global pandemic became the new priority for Alberta's nurses.

"Lengthy adversarial negotiations, let alone job actions, are not in the interest of nurses, health care employers, the government or the people of Alberta," said UNA Labour Relations Director David Harrigan when the agreement was announced on March 17.

Among health care unions in Alberta, UNA led the charge in the early months of the pandemic to ensure its members and other health care workers had access to proper Personal Protective Equipment in the workplace.

In March 2020, UNA signed a joint statement with other health care major unions and employers on the safe and effective use of PPE.

The release stated in part that "employers and unions share the common goal of protecting the health and safety of health care workers. And it acknowledged that "during the current COVID-19 pandemic, it is critical that the appropriate steps are taken to protect the health and safety of all health care workers while they provide high-quality care to Albertans and prevent exposure to and transmission of COVID-19."

Under the joint agreement, the parties agreed that a risk assessment must be conducted for every patient interaction to ensure frontline health care workers have the specific PPE they need.

UNA members began to receive their COVID-19 vaccinations in early 2020, and UNA has called on AHS to provide increased transparency on the health care agency's vaccine rollout plan for health care workers. "Clear communication will bring certainty into these workers' lives and calm some of their legitimate fears for themselves and their families," Smith said.

The global pandemic did not stop the UCP government's plans to undermine the role of unions and privatize large swaths of the health care system in Alberta.



2019-11 UNA Rally at Alberta Legislature

In July 2020, the UCP government passed a new law in an attempt to make it difficult for nurses in Alberta to advocate on public interest issues that improve conditions for their members, their patients and their communities in and out of the workplace.



“The UCP is clearly trying to limit the ability of nurses and their union to stand up against a government that would privatize health care and jeopardize their retirement security,” said UNA President Heather Smith when the bill was tabled in the Legislature.

“UNA members set their union’s priorities and actions and elect representatives to carry out those directions,” said Smith. “Bill 32 creates an unnecessary administrative burden for unions and interferes in a democratic process that is determined by our members.”

The new law would require unions to prepare financial statements for their membership to detail where funds are directed. However, this is already UNA’s current practice, as yearly budgets are presented at annual general meetings and are available to any member who requests them.

“Despite the UCP government’s attempts to weaken unions in Alberta, UNA will not hesitate to take the measures we determine are necessary to advocate for policies we believe will improve the public health care system, and we will vigorously oppose policies that have a negative impact on patient care, our membership and the nursing profession,” said Smith.

Many of the regulations related to the new anti-union law have not yet been enacted.

The government’s plan to build a \$200-million private surgical hospital in Edmonton would be a large-scale increase in the number of Alberta’s existing small private surgical clinics, UNA First Vice-President Danielle Larivee said in August 2020. “This would be a huge, ambitious leap into American-style two-tier health care.”

The alleged justification for this move to privatize our health care system is to reduce surgical wait times, but Larivee said this is a manufactured crisis created through chronic underfunding of public health care in Alberta. “We should be investing the dollars the government wants to use for this project into public surgeries instead,” she said. “That will cost Albertans less and provide better health care.”

“This is part of an ongoing effort by this government to move our health care system toward credit card medicine instead of Medicare for all,” Larivee said. “All you have to do is look at the response to COVID-19 in the United States to see the flaws with privatized health care.”

In December 2020, UNA launched a digital advertising campaign focused on putting pressure on government MLAs to stop the UCP's plans to lay off 750 registered nurses and registered psychiatric nurses.

The campaign website, neednurses.ca, encourages UNA members and members of the public to sign a petition and open letter calling on the government to stop the cuts to nurse jobs. Further actions related to this campaign will take place later in 2021.

Danielle Larivee, UNA
1st Vice-President



Canadian Nursing Students' Association



2020 incoming Board of Directors wide-eyed and ready for the incoming virtual year!



Some of our BOD celebrating Orange Shirt Day



Jaclyn, Leanna, Joe and Latitia at the "Say No to Violence" rally in Fredericton

CFNU and CNSA members at the ICN Congress in Singapore



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 👤 Liked by nadnad65 and others
 cnsa_aeic CFNU and CNSA members at the ICN Congress in Singapore #icncongress
 June 29, 2019



Our incoming and outgoing BOD have our first transition meeting after being elected at our virtual National Conference