

Registered Nurses' Union Newfoundland and Labrador

Nursing Think Tank

RNUNL has been calling on government and employers to take action to address the crisis facing nursing for years. In 2022, RNUNL successfully lobbied the provincial government to hold a Nursing Think Tank to come up with short-term solutions to improve the workplace and the retention and recruitment of registered nurses and nurse practitioners in Newfoundland and Labrador.

The Nursing Think Tank took place virtually April 4-5. This was the first time everyone – from the front line all the way to CEOs – gathered in this format to discuss the challenges facing nursing. More than 150 people participated in the two-day event, including RNUNL members, RNUNL Board of Directors and staff. Schools of Nursing, the College of Registered Nurses Newfoundland Labrador, the Newfoundland and Labrador Nurse Practitioner Association, nursing students, managers, staff and senior officials from the Regional Health Authorities and various Provincial Government departments also participated.

The Nursing Think Tank featured a panel of RNUNL members who shared their heartbreaking stories about the impact of staffing and working conditions on their well-being, work-life balance and patient care.

More than 700 RNs and NPs completed a Nursing Think Tank survey. The results were presented during the event and helped guide discussions. Results revealed that the top three issues RNs and NPs would like addressed are: 1. Providing incentives to retain existing permanent RNS/NPs; 2. Access to leave; and 3. Reducing and/or eliminating mandatory overtime.

Virtual breakout rooms were used to facilitate small group discussions, providing a welcoming space for open and respectful conversation. The discussions were powerful, heartwrenching and hopeful.

A committee was struck to review the results of the Nursing Think Tank event and to develop a plan with short-term recommendations to retain and recruit RNs and NPs. After



months of waiting, incentives were announced in August 2022. It included retention bonuses, signing bonuses for casual RNs, self-scheduling guidelines, double-rate overtime for vacation period, travel locum premium, reimbursement of licensing fees for retired RNs, 24-7 mental health supports, and commitment to explore child care during non-standard hours and establishing a specific site as a pilot.

It's clear from the stories we hear from RNUNL members every day that these incentives are not enough. Much more is needed to bring relief and stop the bleeding of the nursing profession. RNUNL continues to fight for its members.

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Organizational review

In Spring 2022, RNUNL began an organizational review. This review stemmed from RNUNL's strategic plan, which set a goal to strengthen internal capacity to serve the membership. This is our first organizational review in 20 years.

The union hired Cullwick & Associates to conduct a detailed review at how RNUNL works today, our structure, our governance, our management structure, our people-management process, and compare it to best practices.

In addition to strengthening RNUNL's



RNUNL President Yvette Coffey and members

capacity to serve its members, the review is intended to

support the creation of an environment and culture that supports the well-being of volunteers and staff.

RNUNL's work has changed, and we want a proactive approach to drive our strategic direction and make sure that our staff and our union structure is set up for success. The organization review revealed today's challenges and future opportunities. Cullwick & Associates made a series of recommendations along with some priorities for change.

Recommendations include strengthening our focus on people. This means we need a human resources strategy and management, and performance management process across the organization to help us identify training, development and career opportunities for staff.

We also need to help our organization manage change because we all know we've been through a lot lately. This is both about how we manage change within the union and prepare for changes happening provincially and federally to the health care system. We want to make sure RNUNL is being proactive and has a voice provincially and federally. We want to be prepared to represent our members through changes, transformations and crisis.

RNUNL will focus on volunteer management in phase 2. Volunteers will be involved in helping us identify opportunities to look at how we can support volunteers more effectively.

Next steps include developing a detailed plan to implement the recommendations. Now that we have approved and prioritized the recommendations, we will start with the leadership roles and responsibilities and have formed a People and Culture Committee as a standing committee of the board. We plan to engage staff along the way in an Internal Advisory Committee, and we will measure and report progress through updates to help our members understand what's been completed.

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Member Organizations' News

Collective bargaining

RNUNL's provincial collective agreement expired June 30, 2022. In preparation for bargaining, RNUNL put out a call for proposals, asking members to identify their bargaining priorities and ideas for collective agreement improvements. We received more than 130 bargaining proposals from members.

RNUNL's negotiating team is comprised of registered nurses and nurse practitioners from all regions of Newfoundland and Labrador. In April 2022, the Negotiating Team met for orientation and began reviewing proposals. On May 24, RNUNL served a written notice to the provincial government to begin collective bargaining, calling on the government to better support retention efforts for existing RNs and NPs.

A professional research firm called Thinkwell Research + Strategy conducted a member survey to further assess bargaining expectations. A sample of the membership was contacted, and that research was used to finalize a comprehensive opening package based on sound rationale, membership input and understanding of our environment. Findings showed that wages are by far the number one priority for both RN and NP groups.

The top four priorities for RNs this round of bargaining are compensation, incentives to retain existing permanent RNs/NPs, recruitment, and staffing/finding solutions to staffing shortages.

The top four priorities for NPs this round of bargaining are compensation, billing to MCP, billing to private insurers/workers comp, and incentives to retain existing permanent RNs/NPs.

When asked about what items are most important to members personally, access to leave was also high on the list. Research also assessed wage expectations, preference for length of contract, and appetite to strike if a satisfactory agreement cannot be reached.

The first meeting with the employer was on October 5, 2022. Several rounds of bargaining discussions have taken place since.



Throughout the bargaining process, RNUNL has applied pressure in the media and behind the scenes regarding the critical state of health care and the importance negotiating a contract that will help stabilize nursing. RNUNL demanding a better deal for its members with а focus on competitive salaries, safer and healthier working conditions, and improved access to leave.

Without a strong contract, the risk of the nursing crisis becoming worse is real. By the numbers, there are currently over 752 vacant nursing positions in the province. According to the RNUNL research, 40 percent of RNs plan to leave the health care system if working conditions don't improve.



RNUNL is prepared to fight for a fair collective agreement that values and respects our members and the critical role they play in the health care system.

As of writing this update in February 2023, negotiations are ongoing.

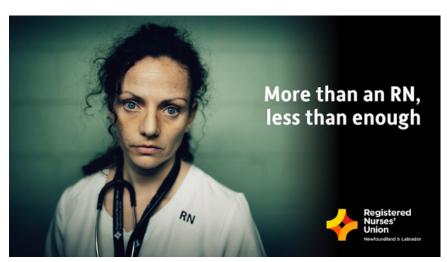
Media campaigns

RNU is actively building public awareness and support for action to address the nursing crisis and putting pressure on government to act. Two strong media campaigns have been launched since the last CFNU convention.

On June 2, 2021, RNUNL launched a brave new media campaign, "More than an RN, less than enough" to address the issues plaguing RNs and NPs and to showcase how these longstanding challenges are negatively affecting the health care system. This campaign highlighted how a nursing shortage, unsafe staffing practices and unfair working conditions are impacting our members and their patients.

The campaign included videos, online ads and billboards, showing that RNs and NPs are more than their profession: they are people – with personal lives, commitments and family responsibilities. Placing unfair expectations on valuable professionals is dangerous for everyone. RNs go above and beyond to provide optimal patient care at the cost of their own well-being.

The campaign was a pointed and purposeful call to action, highlighting the reality of the urgent crisis for RNs, NPs and patient care.



At RNUNL's 28th Biennial Convention in October 2022, we launched our Beyond Broken campaign with a public rally with hundreds of our members.

Our health care system is Beyond Broken, but it's not beyond repair. This campaign depicts the dire state of health care in Newfoundland and Labrador and the urgent need for change, calling on government to act now to stabilize nursing and protect patient care before it's too late. This means doing everything we can to retain registered nurses, create safer and healthier working conditions, and improve access to leave.

Nova Scotia Nurses' Union

Lights, cameras, action at NSNU annual general meetings

For two days, April 20-21, 2021, and then again in April 26-27, 2022, the NSNU presented a hybrid event that welcomed over 250 nurses to participate from the comfort of their homes. It offered many of the trappings of a regular AGM without the risks associated with prohibited gatherings.



NSNU Annual General Meeting

COVID-19 sidelined any hope of hosting an in-person annual general meeting two years running. Unlike 2020, the Nova Scotia Nurses' Union was able to power on (literally and figuratively), providing a format that was accessible, interactive, informative and productive.

In 2021, NSNU received messages of support and love from Prime Minister Justin Trudeau; the Queen's representative in Nova Scotia, the Honourable Arthur J. LeBlanc, Lieutenant Governor;

Premier Iain Rankin; musical group the Barra MacNeils; the women of CTV's *The Social*; Nova Scotia's Chief Medical Officer Dr. Robert Strang; Chief Public Health Officer of Canada Dr. Theresa Tam; NSNU's founder Tom Patterson; award-winning Cape Breton singer/songwriter Gordie Sampson; hockey idol Sidney Crosby; famed fiddler Natalie McMaster; local TV personalities from CBC, CTV and Global TV; multiple union allies in Nova Scotia and beyond, and many more friends.

In 2022, NSNU premiered a brand-new rendition of O Canada sung by NSNU members. Our keynote-presenter, Ann Divine, moved the audience with her stories and knowledge of equity, diversity and inclusion we heard from members. We welcomed several guest speakers, both virtually and on stage. NSNU embraced CFNU President Linda Silas and CLC President Bea Bruske live and in person at our historic venue-turned studio Lord Nelson Hotel.

NSNU was grateful to have hosted two successful hybrid events. Virtual broadcasts can be unpredictable, and we are appreciative to all our members who participated from their homes.

NSNU President Janet Hazelton did an incredible job of chairing the meeting and making the daunting task of hosting 12 hours of live broadcasting look effortless.

Nurses' Day of Action makes national waves

Dozens came out in support of the Day of Action rally held at the NSNU office on Friday, September 17, 2021. The gathering was one of many that took place across the country, in which thousands of nurses and supporters united to say we are **#DoneAsking**.



NSNU members

During the event, NSNU

President Janet Hazelton addressed not only those present at the rally, but more than 90 who were participating via Facebook Live. Her presentation touched on issues that are familiar to nurses in Nova Scotia and across Canada – staffing shortages, excessive overtime and 24-hour shifts, unsustainable working conditions, and the need for consultation and change that enacts improved conditions on the front line.

The event also drew a large media presence. In the days leading up to the Day of Action, Janet Hazelton was interviewed by multiple media outlets, including Global, CBC Mainstreet Halifax and Cape Breton, CBC Information Morning and Saltwire's (Nova Scotia leading print and digital news outlet) Sheldon MacLeod, among others. These outlets and more were on hand to capture the rally, leading to extensive coverage in the evening and weekend news cycles.

Support for the national event was so significant that 'Day of Action' was trending on Twitter for over an hour. The NSNU also received a letter about the campaign from the three new health care ministers: Michelle Thompson, Minister of Health and Wellness; Barbara Adams, Minister of Seniors and Long-Term Care; and Brian Comer, Minister Responsible for the Office of Addictions and Mental Health.

Federal minister's roundtable on nursing

On July 12, 2022, the Federal Minister of Health Jean-Yves Duclos met with nurses from various backgrounds and regions of Nova Scotia at the Nova Scotia Nurses' Union office in Dartmouth to discuss the nursing crisis. They discussed the challenges facing our acute care, long-term care and community nurses.

The Honourable Minister asked each nurse about their personal experiences and recommendations on how to resolve problems and build on our nursing workforce.

Minister Duclos and Members of Parliament from Nova Scotia in attendance heard testimony from several frontline nurses about the dire situation the nursing shortage has created in every sector of care. Work-life balance, vacation denials, burnout, excessive overtime, workload, working short, reassignments and deployments, COVID recovery, violence and abuse in the workplace, compassion fatigue, an exodus of nurses, emotional distress, and physical injury and more are of grave concern to those who are struggling within the system.

The NSNU thanks Minister Duclos and MPs Lena Metlege Diab (Halifax West), Darren Fisher (Dartmouth – Cole Harbour), and Jaime Battiste (Sydney – Victoria) for their time and attention to these important issues. The NSNU has high expectations for the future of nursing and health care.

The state of emergency care

In mid-January 2023, NSNU president Janet Hazelton joined provincial health care leaders and stakeholders of all stripes at a 90-minute health care summit convened by Premier Tim Houston to discuss the unprecedented challenges and recent tragedies that occurred in emergency departments across Nova Scotia.

The premier called "all the people who have an impact on how health care is managed in the province in one room so we can all talk about the same sense of urgency."

He urged attendees to speak their minds, saying he was amenable to any idea. That opened the floodgate, encouraging unfettered dialogue about nurses working to their full scope of practice, leaving behind non-nursing tasks, fortifying respectful and safe workplaces, banning 24-hour shifts, and offering nurses the work-life balance they desperately need.



NSNU President Janet Hazelton and Federal Minister of Health Jean-Yves Duclos

President Hazelton was quoted in the media that day for saying, "There's no time for us and them anymore, what we need is all "us"...we owe that to Nova Scotians, we owe people confidence when they enter our health care system that they are going to get good care." If we do not work quickly to find solutions and work collaboratively to implement change, we will continue to see a decline in services.

On January 18, the Minister of Health and Wellness Michelle Thompson made an announcement about changes in the way patients are triaged and treated in our EDs. A host of actions were listed, but few address the staggering nurse vacancy rate and urgent and untenable pressures on nurses.

In what Nova Scotia Health called Actions to Improve Emergency Care, the province announced a long list of transformations to ensure those with the most urgent needs get care quicker.

In response to the premier's action plan, the NSNU issued a release saying members of the Nova Scotia Nurses' Union, nurses working in emergency departments across the entire province, do not see their concerns reflected in the province's new plan to improve emergency care.

The union president had hoped for immediate actions, actions that would prevent future harm to patients and workers in our stressed and overcapacity emergency departments. In fact, the plan runs the risk of adding more to existing nurse workloads if there isn't a significant shift in filling vacancies, or at the very least, initiatives to retain the nurses currently in the system. Without nurses in emergency departments, wait times will remain unacceptably long.



NSNU President Janet Hazelton

"We can get patients to emergency faster, we can get more ambulances on the road, but if we don't have professional staff and beds on the other side of the waiting room, wait times will not be reduced. Plain and simple: we need more nurses, and more nurses working to their full scope of practice. We need to fill nursing vacancies," says Hazelton.

Nurses need non-nursing work, such as administrative tasks and other duties, removed from their practice in emergency and elsewhere. Nurses need to focus on timely and precise patient care. There is no mention in the plan to cover these non-clinical tasks for nurses.

Adding patient advocates in emergency waiting rooms may be advantageous depending on their role and qualifications, and the establishment of clear boundaries. There is a significant distinction between patients' medical needs versus their comfort needs and how the advocate is to intervene. The NSNU recommends our highly skilled licensed practical nurses be present in waiting rooms to ensure patients are observed and properly assessed.

President Hazelton also advocates for nurse-prescribing in EDs, considering many patients presenting at emergency departments are looking for prescription renewals.

Government must also provide consistent tuition relief for nurses who wish to bridge beyond their current designations, and provide funding for nurses to acquire additional training to confidently apply to work in areas like emergency departments.

The NSNU maintains a plan that does not include restoring a full complement of nursing staff in every emergency department in Nova Scotia will fall short of meeting the government's goal of offering more places for people to receive care, faster care, while easing pressure on emergency departments.

Wage increases for nurse practitioners and RN-prescribers

On February 3, 2023, the Nova Scotia Nurses' Union announced that the NSNU and NSGEU had concluded a classification and re-classification process, as per article 8.15 in the acute care collective agreement. That language states that if a nurse believes the job has changed substantially since the signing of the collective agreement, an application can be made to the employer, and the unions and the employer can enter into a process to negotiate a more appropriate rate; as well, if a new classification is introduced, the union and the employer can negotiate a rate of pay for that position.



The NSNU and NSGEU recently settled on a new wage rate for nurse practitioners, as the scope of this role has changed significantly. NP's

increased responsibilities include, but are not limited to, admissions and discharges from hospital, consulting specialists, working autonomously to diagnose, ordering and interpreting laboratory tests, ordering and interpreting reports of diagnostic imaging investigations, prescribing pharmaceuticals and performing procedures.

As a result of the re-classification process and ensuing negotiations, the new wage rate of NPs will increase by eight per cent, placing Nova Scotia NPs amongst the highest-paid nurse practitioners in the country.



Language in the AC collective agreement also allows negotiations to take place if a new position is created. Recently the employer introduced RN-prescribing, which allows RNs who complete extensive education to prescribe medication to patients. The Council of Nursing Unions and employer agreed to increase the hourly rate of those nurses by an additional \$4 per hour.

Work began in 2017 to advance RN-prescribing in Nova Scotia. In late January, government announced that a range of professional development opportunities will be available to optimize scopes of practice for triage nurses working in emergency departments, including the RN-prescribing course.

The Certificate in Registered Nurse Prescribing program (part of the Master of Nursing curriculum) at Dalhousie University prepares RNs with specialized education and skills to prescribe medications within their specific area of expertise, practice and client population.

Registered nurse prescribing improves services to patients by reducing wait times in various settings, specifically our EDs. The unions welcome the decision to expand this program.

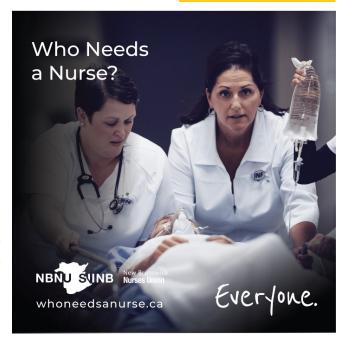
We are hopeful that these increases will assist in recognizing the increased scope of practice of our nurses as well as the value of their work. We look forward to negotiating wage increases for the remainder of the nursing bargaining unit once face-to-face negotiations commence.

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New Brunswick Nurses Union

2021-2022 PR campaigns

During 2021-2022, NBNU had two different campaigns in market. In 2021, we put out a multi-faceted campaign called "Who needs a Nurse?" it was in market at two different times. This campaign was aimed at portraying a very real picture of the value of nurses to each and every New Brunswicker — showing the daily journey of one individual as an overworked nurse, heavily leaned on at work, repeatedly asked to do overtime and missing many family moments—a story all too common among nurses in every province. The campaign was in market from late October until early December 2021, then again in late January to late February 2022.



The deployment of this particular campaign was important and timely because we were in ongoing negotiations, for all three of our bargaining units, with the provincial government for two and a half years, and it was important to ensure that the New Brunswick public saw in a very real way how the lives of those who care for them – nurses – was being impacted by resourcing shortages across health care in the province.

NBNU decided several years prior to continue with annual promotional and marketing campaigns. Continuing to put in front of the New Brunswick public the challenges nurses face due to working short is an important way to ensure New Brunswickers continued to realize how important nurses are. With contract talks stalled, engaging the public and garnering their support was very important at this time. During the first flight of this campaign, near the end of November, we campaigned our members and the public to visit the microsite and send a letter to their MLA expressing their sincere concern for the health and welfare of New Brunswick registered nurses and nurse practitioners and their patients, clients and residents. This campaign sent over 4,500 letters to provincial MLAs, the Premier, the Minister of Health and the Minister of Post-Secondary Education, Training and Labour. These letters made their point as it sparked the government to continue the stalled negotiations.

The campaign ran ads on static billboards, in newspapers and on TV. Social media platforms were also used to showcase the 15-second and 30-second videos with TV showcasing only the 30-second videos. A microsite was also launched to share the campaign elements and act as a landing page for the duration of the campaign. Approximately 3.2 million digital ad impressions were recorded during the first flight of the campaign; 436,000 completed video views were recorded; and over 15,000 people visited the whoneedsanurse.ca



In late 2022 and early 2023, another short-term campaign was launched: Picking Up the Pieces, including the taglines "The System is Broken" and "Help

us Pick up the Pieces". The first flight of ads ran mid-October to mid-November, with a second flight running mid-January until mid-February 2023.

The aim behind this campaign was to engage citizens and, secondarily, to underscore the dire state of health care in the province. The campaign was meant to bring more heightened and focused awareness to the health care crisis and to showcase that nurses have solutions to share but they are pulled in too many different directions. Several nurse practitioners, licensed practical nurses and registered nurses were interviewed for this campaign, and their vignettes formed the basis of the campaign visuals that show torn images of the nurse and implored the public to act by downloading a letter and sending it to their Member of the Legislative Assembly.



The campaign ran ads on static billboards, on bus shelters and on TV. Social media platforms were also used to showcase the 15-second and 30-second videos with TV showcasing only the 30-second videos.

A microsite was also launched to share the campaign elements and act as a landing page for the duration of the campaign. Over the first flight, the campaign resulted in: 2.4 million digital ad impressions; 521,000 completed video views; and over 9,400 people visiting <u>pickingupthepieces.ca</u>

Collective agreements signed after strike action

In 2021, members of NBNU had been without a collective agreement since December 31, 2018. When negotiations began in February 2019, no one would have expected that the process would take so long and that nurses would be without a new agreement until December 2021.

At the onset of negotiations, talks stalled because of various factors, the delays made longer with the provincial shutdown in March 2020 due to the COVID-19 pandemic, and they were further delayed due to a provincial election in the fall of 2020.

There were on-and-off-again negotiations, including conciliation in September 2021, and two rejected tentative agreements. Both were largely voted down because of the monetary offering and lack of respect from government, including the demand for double-paid overtime. The union's position was made stronger when, in November 2021, nine CUPE unions took strike action and walked off the job. The strike lasted three weeks.



Just prior to this strike action in November, government had reclassified the province's LPNs, and they moved out of CUPE and became NBNU members.

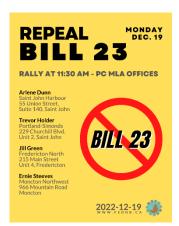
The LPNs were happy to be a part of NBNU, and they brought with them a very strong vote to take strike action.

NBNU members, including the newly implanted LPNs, took a strike vote the first week of December 2021. All three bargaining units voted in favour of a strike with a 92% strike mandate. Following the strike vote, negotiations resumed, and a tentative agreement was reached for the Part III, Hospital and Nurse Manager and Supervisor bargaining groups. It was recommended by the negotiating teams to the members, who accepted it just before Christmas. The nursing home bargaining unit members took a bit longer to reach a tentative agreement as they are governed by the Department of Social Development, not the Department of Health. Negotiations concluded for the nursing home bargaining unit in February 2022, and the new agreement was signed in May 2022.

In the end, all three agreements included the double overtime and lump sums that were awarded to all members, as well as assisting with nursing association membership costs and/or uniform allowance. The commitment to look at ways to support the mental health of nurses, as well as a review of LTD plans and reducing the age of retirement without reduction of benefits, was also included.

An Act to Amend the Public Services Labour Relations Act

In November 2022, the NB government brought forward amendment to the *Public Services Labour Relations Act* without any consultation with any union in the province. The changes announced and passed by government impact about one out of eight New Brunswickers, since at last count 118,000 New Brunswickers were members of public or private sectors unions. The new legislative changes limit fair collective bargaining for many workers. The changes tip the balance of power in favor of the employer because they make a strike vote invalid after one year, make changes to the number of designated employees, remove true binding arbitration as a viable option in



the process, open the door to scab labour, and supress wage increases by allowing an arbitrator to only consider the wages that are comparable to those in the Atlantic region.

NBNU and other unions under the umbrella of the NB Federation of Labour fought against the changes and mobilised the public and members against the changes. The majority government voted in favour of these changes to the *Act*, and it was amended. The fight continues; affiliated and non-affiliated NBFL unions continue to work together and strategize next steps.

Research undertaken and published

In the summer of 2021, NBNU commissioned a survey of the general public. The telephone poll results indicated that the public highly trust nurses and value nurses' input into health care; that the public is worried about the nurse shortage and the increased overtime hours, and fatigue that has become their common reality. The public is well aware of and concerned about the impact of the labour shortage in health care.



The public poll informed a more in-depth NBNU study that collected the voices of registered nurses and nurse practitioners to see how they were

faring amid the nurse shortage and accompanying stress and burnout that resulted. Over 4,000 nurses responded, and results revealed that 92 percent of nurses believe that over the past three years the quality of health care overall is worsening, and over 85 percent of these blame the nursing shortage and resulting unmanageable/unsustainable workload as the key factor of negative influence. Nurse-patient ratios have become dangerous.

Over 83 percent of NB's RNs and NPs claimed that their own mental health was deteriorating, and that they were feeling very high stress/burnout. Because of this, they have become morally distressed and injured because they fear (92 percent) that patient care will continue to decline. For example, an overwhelming 89 percent of RNs/NPs reported feeling not rested even at the beginning of a new shift - they do not have sufficient downtime to recuperate/recover with work so demanding and resources so short. Worse, because of all this, retention and recruitment has been difficult; nurses are leaving public health care to work where they can regain some personal health and well-being. Of note, nearly half (47 percent) in 2021 said they would leave now or have an exit plan in place. It was noted by many nurses that while COVID played a role in the distress of their job, it only exacerbated what was already happening.



Maria Richard, 1st Vice-President, and NBNU
President Paula Doucet

A year later, another study was undertaken by NBNU to survey the newly placed LPNs in the name of "What Licensed Practical Nurses Answered, When Asked: Please Help Us!" (Rogers, 2022). It asked similar questions and revealed very similar findings in addition to a few experiences more particular to this category of nurse. The study, like the previous one, revealed that the ongoing crisis in health care due to serious labour shortages is also responsible for LPNs' scathing assessments of their own work conditions and the declining quality of the public health care system – despite health care practitioners loving what they do and wanting to do more. 93 percent of LPNs stated their belief that patient and client care would continue to worsen if the situation does not improve, and it is the nursing shortage overall that is mostly responsible for the decline in both health care and work conditions, not to mention thereby retention and recruitment efforts. The daily burdens on LPNs, like those on their RN/NP team members, means that LPNs' mental and physical health is deteriorating to the point that they, too, are leaving their jobs and sometimes their profession altogether. Like their RN/NP counterparts, 84 percent of LPNs reported feeling not rested even at the beginning of a new shift – a frightening finding and one that certainly contributes to their moral injury as well.

A study focusing on what nurse practitioners identify as concerns and barriers to improving primary health care access and delivery, as well as NP retention and recruitment, is forthcoming.

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Manitoba Nurses Union

The past two years have been intense for Manitoba's nurses.

Despite us seeing the toughest bargaining climate since the Manitoba Nurses Union last went on strike in 1990, we were able to successfully negotiate collective bargaining agreements with a provincial PC government obsessed with austerity. These new CBAs, which cover the majority of our members, were ratified on October 14, 2021. No easy feat, it took a committed Provincial Collective Bargaining Committee and chief negotiator five years to accomplish with a government whose premier tactic was to delay. Eventually concluded via mediation and a concerted campaign by MNU to shame them into

coming to the table for meaningful negotiations, Manitoba nurses were able to move forward.



Chief Nursing Officer Dr. Leigh Chapman and MNU President Darlene Jackson

However, as we expected, the new CBA was not enough to address the myriad of problems in the health care system and, most importantly, the nurse staffing crisis. Since 2016, when the PCs took government, we have emphasized to them at every turn that the staffing crisis – and resulting burnout – is the single biggest factor driving nurses out of the public system.

Here's an update on the situation in Manitoba.

MNU members across our province have spoken to us about the loss they felt over the past couple years; the loss of time with family due to the demands of the pandemic and the mandated overtime, loss of love for their profession, and loss of trust in government and its employers to fix this situation we all find ourselves in.

We felt it was important for Manitobans across the province to understand what was happening behind the front lines, so in 2021 we launched a campaign Inner couRAGE that included a website where nurses and their family members could reach out anonymously and share what they were going through.

They welcomed the opportunity to share what was weighing them down. This led to our mini documentaries developed with a local video and animation company in Winnipeg, titled *Inner CouRAGE: The Frontline Is Not Okay*. These videos were extremely well received by our members and the public. In fact, they earned a gold at the 43rd annual Telly Awards, which celebrates outstanding work in video and film productions, and web commercials, videos and films. To view the mini-docs, please visit https://innercourage.ca/

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Member Organizations' News

In 2022, we launched our Stay Courageous campaign, which was then closely followed by our SOS campaign via our social media channels. The idea was

that we must not give up, that we hear their cries for help and are fighting even harder on their behalf. These "SOSs" came from nurses on a wide variety of issues, from working in units that are below baseline staffing to a lack of beds, to nurses dealing with violent patients. And again, the need to unload the burdensome angst proved beneficial.

Our newest campaign for 2023, The State of Health Care Is outRAGEous, is even more bold. It includes both traditional and social media, out-of-home advertising by way of billboards and superboards around the province, as well as lawn signs and lanyards. It calls on Manitobans to put health care top of mind when they head to the ballot box during the upcoming provincial election.

We know what is at stake when it comes to the politicians we elect, and we're hopeful that Manitobans will pay attention and vote in favour of fixing the floundering public health care system. We take inspiration for this challenge from battles past, especially the ones led by our former MNU president and fearless leader Vera Chernecki, who passed away on July 15, 2022.

This was a very painful loss for many, as Vera meant so much to MNU. Not only was she our president for 17 years, following her retirement in 1999, she continued to be active with MNU as our AGM Parliamentarian.

We stand on the shoulders of nurses who came before us, a huge collective that fought for visibility, equality, pay equity, respect and workplaces that are safe for staff and patients. Vera's shoulders were strong, she carried us for a long time, and in her honour we march on, because showing tenacity in the

Updates from last report

face of adversity was Vera's essence.

COVID-19 pandemic

At the beginning of 2022, the COVID-19 pandemic was still present in our health care system, and then we were hit with an early flu/cold/RSV season last fall. This led to severe outcomes mainly for kids. As a result, our Children's Hospital was so overwhelmed with patients, that Shared Health (one of the largest health regions in the province and the one in charge of the largest hospital, Health Sciences Centre) reported publicly that there were postponements of pediatric elective procedures during the week of January 4.





Sadly, we haven't seen progress in the months that followed as nurses continue to be stretched beyond capacity. Vacancies, overtime and agency

hours continued to climb. In fact, overtime hours hit a new high in 2022, with more than a million hours logged in Manitoba.

We know that the pandemic laid bare and exacerbated the issues in our health care system, therefore we continue to push our provincial and federal governments towards substantive actions on these issues.

Constitutional challenge

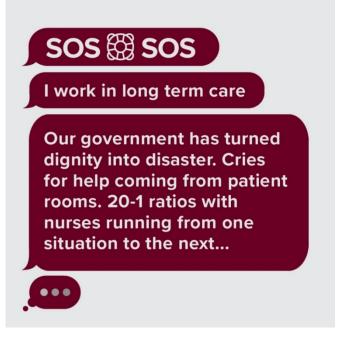
The Partnership to Defend Public Services, a coalition led by the MFL and made up of dozens of public sector unions, including MNU, was created to fight back against the Pallister government's wage freeze law *Bill 28: The Public Services Sustainability Act*. Through the Partnership, we launched a legal challenge of *Bill 28*. In 2020, the Manitoba Court of Queen's Bench found *Bill 28* unconstitutional, but the Pallister government appealed. A decision on the appeal was delivered October 13, 2021, with the Court of Appeal overturning the lower court's 2020 decision. With this split decision between the two courts in Manitoba, the Partnership chose to apply for leave to appeal to the Supreme Court of Canada (SCC). For an entire year, we waited to see whether the Supreme Court would hear our case.

In a profoundly disappointing decision made public in late October of 2022, the Supreme Court chose not to hear our constitutional appeal of the Pallister/Stefanson wage freeze law, leaving unresolved the contradictory decisions issued by Manitoba's two lower courts. This was a complicated, years-long case, and while the Stefanson government did repeal that original *Bill 28* when the *Bill 2: The Public Services Sustainability Repeal Act* was passed and received Royal Assent on June 1, 2022, the SCC ruling still felt like a gut-punch.

Workload staffing reports

Lastly, we are very proud to report that we have expanded our simplified Workload Staffing Reports (WSRs) online, adding new health regions. As a quick recap, in March of 2020 we brought the first WSRs online, for MNU members select Winnipeg Regional Health Authority (WRHA) sites, and then to all WRHA sites by September 2020.

Online WSRs were introduced to MNU members at Health Sciences Centre (HSC), our flagship hospital in Winnipeg, in March of 2022. This was followed by the Northern Health sites in November of this same year. There are only a few regions left to onboard, and our goal is to complete those as well.



For more information about online WSRs, visit manitobanurses.ca/workload-staffing-reports

Saskatchewan Union of Nurses

Since the last CFNU Biennium, so much in our world has changed, and yet many of the challenges facing registered nurses and the labour movement remain the same. COVID-19 saw the postponement of Biennium's stop in Saskatoon in 2021 as the entire world seemed to pause. Of course, health care entered into a time of unprecedented demand – no pause here! – but SUN members and this union stepped up to deliver the high-quality care and support our province deserves.

A Profession in Crisis

The consequences of the impossible workplace conditions and workload during the COVID-19 pandemic became very obvious as reports of stress and burnout among members increased. In a fall 2021 survey conducted by the University of Regina, more than one in four registered nurses in the province indicated they were experiencing psychological distress due to the pandemic.

burnout and strain contributed to a debilitating nursing



shortage in Saskatchewan. SUN members are consistently working short-handed in facilities that are overcapacity, and the pace is untenable. In the 2022 membership survey, almost 60 percent of respondents reported they seriously considered leaving the nursing profession in the last 12 months – a leap of more than 10 percent from the year previous. Of those members, nearly 70 percent cited working or nursing practice conditions as their reason for considering leaving.

SUN has spoken loudly on members' behalf to news organizations across the country, drawing attention to our shuttered or struggling rural facilities, ailing seniors and long-term care, and our bursting-at-theseams urban centres. These key health care challenges also featured heavily in the 2022-2023 public campaign, Making the Difference. The campaign successfully generated significant awareness of these issues in 2022, delivering over 21 million digital media impressions, almost 1.9 million completed video views, over 55,000 website visits and more than 13,000 social media engagements. The Saskatchewan public is listening to what registered nurses and SUN have to say.

This year SUN worked with the Government of Saskatchewan, including the Ministers of Health and Rural and Remote Health, and met with the Premier to discuss the state of health care. We shared member accounts from the front line with these provincial leaders to draw attention to areas in desperate need of attention. SUN was pleased to see many of our ideas reflected in the province's plans to address the nursing shortage, but we continue to push for initiatives to retain nurses and the establishment of a nursing task force.



Meeting members where they are

The pandemic forced SUN to change its approach to meeting with members.

As in so many other organizations, virtual meetings became the norm. In 2020, the annual meeting was canceled due to the pandemic, but we returned in April 2022 with a virtual annual meeting. This was a new challenge for SUN, coordinating such a large and pivotal meeting within the protective constraints of health regulations, but we successfully delivered on our commitment to being a democratic, memberlead union.

Virtual meetings, which have long been a part of SUN's service repertoire on a small scale, are now used more frequently than ever, allowing union staff to meet with membership across the province, and limiting the need for travel to accomplish union business.

Aligning SUN's structure to better serve members

In September 2022, SUN held its first Special Meeting of the Union – the first in-person meeting since the arrival of COVID-19.

The creation of the Saskatchewan Health Authority (SHA) and the demolition of regional health authorities in 2017 made it necessary for SUN's structure to shift and change as well. It was important to SUN's leadership and our membership that our internal structure mirrored that of the SHA, to ensure access to effective workplace and professional practice representation, regular communication of important information and union education opportunities.



SUN's president Tracy Zambory, RN, on stage at the Special Meeting of the Union in September 2022

Members voted in favour of this significant

internal change, which included restructuring the Board of Directors, creating brand-new elected positions, and re-drawing SUN's boundary lines. Now in 2023, we continue to navigate and implement these changes and look forward to really finding our footing within this structure in the months ahead.

Professional practice and safe patient care

SUN members are extremely busy fighting for their patients and their practice. In 2022, SUN members used their collective agreement to its fullest extent and escalated workplace problems using the Nursing Advisory Committee (NAC) process. After presenting their cases to external parties for a binding recommendation, 26 gains were earned for units, facilities and patients across the province, with the majority of the Locals earning increased baseline staffing – a huge victory.

This year will see more workplace issues resolved using the NAC process, thanks to the tenacity of SUN members and the dedication of SUN staff.



Conclusion

Though the days of the COVID-19 pandemic were long, and the demands on the organization sometimes felt insurmountable, SUN entered 2023 stronger than ever. This union has proven itself capable of adapting to great challenges, of creative and inspired thinking when faced with a global health catastrophe, and of being unafraid to break away from the mold to enter a new and modern era. SUN members are better-served thanks to the bold decision to restructure and reimagine how to support the membership in every corner of the province. With a new round of collective bargaining on the horizon, and the weight of a provincial nursing shortage, 2023 looks to be another year full of challenges, which SUN is prepared to meet.



Members paying close attention to the presenter on stage during the 2022 Education Conference



United Nurses of Alberta

A lot of water has gone under the bridge since UNA last reported to CFNU's Member Organizations.

We have faced the pandemic, seen the crisis-ridden Alberta health care system approach the brink numerous times, heard privatization and more privatization advocated as the solution to the challenges facing public health care, experienced a change in government leadership, dealt with anti-union legislation intended to stifle the voice of unions, and negotiated a new public sector collective agreement while dealing with a government that insulted nurses and the work they do by trying to cut their pay and gut their contract.

In this time everything changed ... and nothing changed!

Negotiations

It's already time for UNA to begin negotiating a new collective agreement – 2023 will be a year of bargaining preparation, with the expectation that a new three-year agreement will be signed some time in 2024.

Despite the government (which technically did not sit at the bargaining table but nevertheless directed Alberta Health Services and other public sector employers) starting by demanding wage cuts, 750 layoffs, and rollbacks to more than 200 contract provisions, UNA ratified a collective agreement with which members could live.

With the help of a mediator, the contract included pay increases of 4.25 per cent over four years – instead of the

pay cuts of 3 per cent across the board originally demanded by the

government, plus other monetary changes that would have raised that total to 5 per cent.



Heather Smith, UNA President

Other improvements included conversion of current semi-annual lump-sum payments to the wage grid; a one-time lump-sum payment of 1 per cent for 2021 in recognition of nurses' contributions during the pandemic; enhanced psychological and mental health supports; and creation of a union-employer provincial workload advisory committee.

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Member Organizations' News

Rural retention and recruitment

The Provincial Collective Agreement ratified in 2022 included implementation of a jointly run Rural Capacity Investment Fund (RCIF) that allocates \$5 million a year to recruitment and retention strategies in rural and remote areas of the province, and \$2.5 million for relocation assistance.

RCIF funds a Rural Relocation Expense Reimbursement of \$10,000 toward moving costs of nurses who decided to move to work in rural and remote communities. And just this year, the joint RCIF committee agreed to provide \$10,000 for nurses who relocated employment to an urban worksite in Alberta Health Services' Central, South or North Zones, and \$15,000 for nurses who relocate employment into a rural or remote worksite in one of those three zones.

Staff shortage

The nurse staffing shortage is evident in every corner of Alberta with dozens of worksites temporarily closed or operating at lower capacity on a daily basis. The staff shortage is also reflected in the number of Professional Responsibility Concerns being filed through UNA. More than 2,300 PRCs were filed throughout 2022. Almost 400 were filed in the first two months of 2023 alone.

Reacting to years of disrespect by employers and governments, pandemic exhaustion, underfunding of their frequently chaotic worksites, chronic understaffing everywhere, and a government that refuses to listen to what nurses have to say, many nurses decided to retire, change careers or just quit. Naturally, this exacerbated the ongoing crisis in the health care system.



Nurses remaining in the system describe receiving up to 100 text messages a day from Alberta Health Services staffing officers urging them to take extra shifts, and even cases of managers lurking in grocery stores to waylay nurses and press them to agree to work additional shifts or mandate them!



Privatization and anti-union legislation

Privatization is still being actively advanced by the United Conservative Party government as the solution to the problems faced by public health care – even though it fails, time and again. Indeed, those failures are used as justification for more privatization! The government continues to push its plan to contract out low-risk, uncomplicated surgeries to private surgical facilities as part of the Alberta Surgical Initiative.

Anti-union legislation aimed at curtailing the ability of unions to stand up for their members through public advertising and advocacy remains on the books while court cases challenging its constitutionality grind slowly through the legal process.

COVID-19 protections lifted



holiday season could have a beneficial impact."

On December 20, 2022, UNA President Heather Smith wrote to Alberta's premier, health minister and chief medical officer of health to implore them, "for the sake of Alberta's children, and all Albertans," to "cease treating this situation as if it were a political inconvenience and address it immediately as the public health crisis that it is."

"The simplest and most effective policy change that could be implemented immediately would be an indoor mask mandate to reduce the spread of influenza, COVID-19 and respiratory syncytial virus (RSV)," she wrote. "However, even a strong statement acknowledging that wearing masks in indoor public spaces and limiting the size and number of public gatherings attended this

She also suggested the province's new chief medical officer of health be allowed to at least make a public appearance and explain the gravity of the situation.

At a news conference the next day, Premier Danielle Smith praised Alberta's nurses but shrugged off their concerns. "I appreciate all the great work that United Nurses and their members are doing on the front line," she said, "but we *do* support choice." By choice she meant the freedom to choose not to comply with responsible public health measures.

In response, government supporters sent scores of abusive messages to social media and even directly to UNA.



Government

Under former premier Jason Kenney's leadership, AHS's respected president and chief executive officer, Dr. Verna Yiu, was fired in early April 2022. This appears to have been done to appease Kenney's antivaccine opponents in the UCP while he sought the approval of party members in a leadership review vote. The tactic failed. When the votes were counted in May, only 51.4 per cent voted to ratify his leadership, and Kenney soon resigned.

During the contest to replace the outgoing premier, Danielle Smith talked of "uberizing" health care with a \$300 health spending account run through a smartphone app. (Reporters soon found an article she authored in 2021 arguing that such an account could be used to open the door to co-pays and user fees for essential health care services.)

In power, Danielle Smith moved in mid-November 2022 to fire Chief Medical Officer of Health Deena Hinshaw, identified by the UCP base as a villain for her role in the effort to mitigate the spread of COVID-19. Hinshaw was replaced by Dr. Mark Joffe, a respected senior AHS executive. But Joffe has barely appeared in public since his appointment, presumably on the orders of the Smith government. He has had little to say.

Within hours of her announcement about the CMOH, Smith fired the entire Alberta Health Services Board and named a single administrator who would report directly to her and Health Minister Jason Copping about how, supposedly, to instantly fix AHS, which at times appeared to be near collapse with emergency departments and sometimes whole hospitals temporarily closing and then reopening across the province. Dr. John Cowell, the administrator, had been appointed to the same post in an earlier health care crisis in 2014 by Progressive Conservative premier Alison Redford. He failed to have much impact that time.



Danielle Larivee, UNA 1st Vice-President

Meanwhile, Premier Smith's policy interests seemed to focus on building support for some kind of sovereignty-association relationship with the rest of Canada, as well as related hobbyhorses such as creating a provincial police force to replace the RCMP and withdrawing from the Canada Pension Plan and setting up an Alberta pension.

The effect, taken together, was a lack of focus on the real problems facing health care, and a sense among health care workers and the public that the system is in chaos.

A provincial election is scheduled for May 29, 2023, and the results will be known by the time of the CFNU 2023 biennial convention. At the time this report was submitted, the election appeared to be a close race between the UCP and NDP.

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Retain, Recruit, Respect campaign

Part of UNA's response to the change in government leadership has involved a public engagement campaign calling for Albertans to *Retain, Recruit and Respect* Alberta's nurses and other health care workers. Using the NeedNurses.ca website, the campaign uses online and radio advertising and video interviews with



UNA members describing their experiences within the health care system and their views based on their frontline experience of solutions that will work.

In addition, President Heather Smith has reminded UNA members that part of the solution to the staffing crisis will have to be found in solidarity and contract negotiations. "The solutions to the crisis we face are going to cost money, and some of those money questions are going to have to be addressed at the bargaining table," she wrote in her most recent holiday message to UNA members.

"Failure to deal with these questions will contribute to further declines in Alberta's health care workforce and even more difficult working conditions in our facilities."

Ontario Nurses' Association

Massive rallies and actions in support of bargaining

ONA has often said that nurses never give up. There are no truer words.



During the early months of 2023, thousands of ONA members held a series of escalating actions across Ontario to voice their support for a better contract for more than 60,000 ONA hospital members.

ONA members stepped up in large numbers to participate in these actions: a Sticker-Up action; a day of picketing outside of their workplaces and Conservative MPPs' offices; and they came from across the province for a major rally and march held in downtown Toronto to the Ontario legislature, Queen's Park.

On February 2, ONA members proudly wore supportive bargaining stickers during our Sticker-Up action. They built visibility and power by clearly showing their employers their vital priorities for a new deal. Nurses and health care professionals from across the province demonstrated support for their bargaining team by wearing messages that highlight their demands: better staffing, better wages and better care. A better contract with wages that account for more than a decade without a real increase would help stabilize staffing, retain nurses, bring nurses back and attract people into nursing.

At the second action organized for February 23, thousands of ONA members organized All-Out Pickets across the province. Joined by their labour partners and community members, ONA members voiced their demands and showed their support for their bargaining team in negotiations for a new contract. Our members signaled that they will not tolerate the unsafe staffing, wage suppression or heavy workloads that are responsible for the increasing inability for Ontario nurses to provide the best patient care possible.

The final action in this first series was held March 2. A rally and march attracted members, other labour supporters and the public and province-wide, and ensured the Ontario Hospital Association bargaining team was made aware of ONA's message: nurses and patients expect a better deal. A better contract for nurses is the single best thing Ontario can do to address chronic nursing staffing issues and improve our public hospital care for patients.

We will continue to be out there, speaking to the public and asking people to join us in the fight for their care.

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Nursing crisis

Ontario has never seen things as bad as they now are since the Conservatives' Doug Ford was elected premier. Ontario has had the worst RN-to-population ratio in all of Canada for several years running. Burnout, wage-suppression legislation (Bill 124) and skyrocketing illness and injury levels have driven the nursing shortage in the province to historic crisis levels. Many of our members are summoning superhuman strength and stamina to work untenable overtime, ensuring patients get the care they need and deserve.

Bill 124 has resulted in many of our seasoned nurses to choose early retirement. Others have quit the profession altogether or simply left the province. Some have gone to work for private, for-profit nursing agencies, where they are paid two or three times more per hour than public sector nurses and — most importantly to them — control their own schedules.

ONA has urged Premier Ford to drop the appeal of Bill 124. This legislation, already found by the court to be unconstitutional, has become symbolic of everything this government has done wrong with regard to nurses. This government should sit down with ONA and work with us to begin to repair the damage they have done to patient care, the profession and our publicly funded, publicly delivered health care system.

There is no quick fix – yet our members on the front lines have the knowledge, experience and solutions that will make a difference.

ONA continues to raise alarms about health care privatization

The provincial Conservative government's latest budget continues the march toward private, for-profit health care at the expense of Ontarians' health and pockets. ONA continues to witness the detrimental impacts of this government's policy decisions on patients and those who care for them.



ONA President-elect Erin Ariss

This budget is the latest attack on public health care from this Conservative government. From the unconstitutional wage cut law Bill 124, to the deregulation of health care providers in Bill 60, and now this Budget – it is clear that the Ontario government is determined to destroy public health care in favour of enriching for-profit providers anxious to get their hands into the pockets of Ontario taxpayers.

ONA has offered a series of recommendations to retain and recruit nurses and health care workers: stop the use of costly private agency nurses, restore public health services by permanently reversing Ford's funding cuts, increase the quality and safety of long-term care homes by phasing out for-profit, private long-term care homes and stopping the privatization of home and community care. We are seeing the destruction of a service that all Canadians value and rely on: public health care. ONA hopes there are alarm bells ringing for taxpayers, and that they are motivated to join nurses and health care professionals in stopping this dangerous plan.



ONA celebrates huge victory!

Over the past three years, the Ontario Nurses' Association has fought the provincial government on its Bill 124 wage-limiting legislation that capped nurses' wages at one per cent per year for three years. The union was relentless in fighting this bill in the courts, the media and in communities across the province.

Late in 2022, the court ruled that Bill 124 is unconstitutional and in violation of the *Charter of Rights and Freedoms*. It was a hard-fought win for ONA to supports the rights of nurses, health care professionals and all workers.

This victory belongs to ONA members and the public sector workers who advocated to defeat this legislation. Bill 124 had an enormous impact on the province's ability to retain and recruit nurses and took a tremendous toll on the health care system and those who need to access their care. Unfortunately, the Conservative Ford government is appealing the court's decision, but ONA will continue to stand up for our members' rights and fight Ford in appeals court.

Strong province-wide solidarity

ONA achieved this Bill 124 victory alongside a strong coalition of labour organizations representing provincial public sector workers. We challenged the law and, together, we defeated it.

The unions' common purpose has renewed ONA's commitment to working closely with our allies to defend members from punitive legislation and policies. ONA and other unions are working to preserve and protect our public health care system. We continue to work closely with OCHU-CUPE, OPSEU/SEFPO, SEIU Healthcare and Unifor,



ONA President Bernadette Robinson

collectively representing close to 300,000 health care workers in Ontario. It is through our solidarity that we will make great strides in achieving changes that positively impact our members' work lives and well-being – for the sake of our patients.

Members engaged in the provincial election

In 2022, a provincial election was held to elect a Premier and government. ONA launched the most ambitious election campaign to date, Nurses Vote.

The goal was to educate members, politicians and the public on ONA's key priorities: the repeal of Bill 124, a fix for the nursing crisis, and keeping health care public. A key component was the appointment of 20 members from ONA regions, who worked with their regional vice-presidents and ONA staff on targeted engagement work involving thousands of other members.

This included spearheading rallies outside of MPPs' offices, workplaces, Queen's Park and other prominent locations to demand better. Ensuring members were contacted directly about what was at stake during this election was crucial, with secondees and volunteers calling 41,000 members and sending more than 15,000 texts.

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To complement this work, ONA created an information-packed Nurses Vote website and sent email blasts and a broadcast voicemail message to our members. ONA launched a powerful Nurses Fighting for Change advertising campaign featuring members. ONA was all over the media, appearing in more than 160 election-related stories and blog posts. While the Ford government remained in power, there is no question our campaign made an impact. ONA was active in eight of the 10 ridings decided by fewer than 1,000 votes, and the Conservatives received the support of just 40 per cent of voters, and one PC incumbent lost his seat.



ONA 1st Vice-President Angela Preocanin

Continuing activism

Like our nursing colleagues across the country, Ontario's nurses

are tired, frustrated and are overwhelmed with the serious staffing shortages that is negatively impacting patient care. These devastating conditions have spurred thousands of members to fight for workplace improvements and enhance patient care. Members are attending pickets, calling their MPPs, launching phone zaps, texting, using social media and more to demand respect from the government and employers. Labour and community partners stand side by side with our members, supporting our demands.

ONA releases Anti-Racism, Anti-Oppression Action Plan



ONA'S 2022-2026 Anti-Racism and Anti-Oppression Action Plan Summary

Strengthening Our Union Collectively
Through Anti-Recism and Anti-Oppression.

19

ONA has released a comprehensive four-year action plan that will help guide us in addressing the ongoing racism and oppression that exists for so many members and in our society at large.

The 2022-2026 Anti-Racism and Anti-Oppression (ARAO) Action Plan is the direct result of a call to action from our members, leaders and staff with lived experiences with intersectional forms of racism, including anti-Indigenous

racism, anti-Black racism, discrimination and acts of exclusion. The action plan contains seven priority areas and dozens of action items that will move ONA forward as we build our infrastructure, challenge systemic racism and strengthen internal capacity to integrate evidence-based ARAO practices into every level of ONA's services, work environments, workplace culture and leadership.

As part of ongoing ARAO outreach, ONA commissioned an Indigenous artist to create an illustration for the National Day for Truth and Reconciliation. Used as the anchor for our posters and shareables to commemorate this special day, this custom art will be featured in additional upcoming Indigenous dates. Additionally, ONA sought tailored artwork for Black History/Black Futures Month from a Black artist, and the resulting striking art piece was used to celebrate and honour this special occasion.

British Columbia Nurses' Union

Supporting nurses throughout multiple public health crises



The COVID-19 pandemic has dramatically impacted nurses across Canada. In BC, serious shortcomings in the provincial health care system were brought to light, including a chronic nursing shortage that has existed for years, leading to increasingly difficult working conditions for nurses in this province, who are providing patient care during this public health emergency.

BCNU conducted a survey of our members in May 2021 amidst the strain of British Columbia's third COVID-19 wave. The purpose of the survey was to seek a

greater understanding of the mental and physical toll the pandemic has had on the tens of thousands of nurses providing direct patient care to those most in need. It primarily focused on nurses' access to PPE, increased workload, workplace violence, their intent to stay in the profession, and a variety of other workplace issues. 3,479 members provided responses over a two-week period. The data was then developed into the BCNU report, The Future of Nursing in BC, and has been shared widely through all BCNU channels and the media.

BC's nurses were at a breaking point long before the COVID-19 pandemic, and the added stresses they endured throughout this unprecedented public health emergency greatly impacted their mental and physical health. In fact, many nurses said the experience had led them to consider leaving the profession they once loved. The glimpse into the difficulties facing BCNU members helped pressure the government to recognize the need for improved working conditions, whether in acute care, long-term care, the community or public health.

Some of the key findings in *The Future of Nursing in BC* include:

- 76% of nurses surveyed said their workload had increased compared to before the pandemic.
- 82% said their mental health had worsened during the pandemic.
- 35% of all respondents and 51% of emergency and ICU nurses said the experience of the pandemic made them more likely to leave the nursing profession in the next two years.

The alarming statistics have been instrumental in getting BCNU's message out there through the extensive media work it does weekly. In addition to The Future of Nursing in BC report, we have supported a number of projects and initiatives over the last few years, providing funding, consultation and letters of support to ensure nurses' voices are heard.

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BCNU action at the federal and provincial levels

The voices of BC's nurses have been louder than ever over the last few years.

Advocacy from every part of this province is forcing decision-makers to think about the state of the nursing profession and come up with strategies specific to recruiting and retaining enough nurses to address the shortage in BC.

During <u>National Nursing Week</u> in May 2022, hundreds of nurses travelled to Victoria and rallied on the steps of the BC legislature to demand that the government address the chronic staffing shortage plaguing our system. The day began with the members of the union's provincial executive attending question period in the BC Legislature.

BCNU President Aman Grewal travelled to Victoria last July to join the CFNU at a breakfast meeting with Canada's premiers during the <u>Council of the Federation</u> meeting. Nurse leaders highlighted their concerns around the national nurse shortage, deteriorating working conditions and the state of patient care.

On November 7, a panel of BCNU members met with federal health minister Jean-Yves Duclos to share with him the challenges of frontline nursing from all care settings. The following day, BCNU joined the CFNU at the First Ministers' Meeting held in Vancouver, where discussion around the health care crisis was had at a breakfast meeting with minister Duclos, BC's health minister Adrian Dix and nursing leaders from around the country.

BCNU's elected regional council members and provincial executive travel to Victoria a couple of times a year to take part in an informal meeting with MLAs from all three parties. The discussion focuses on BC's health care system and solutions to improving working conditions for nurses.



BCNU president Aman Grewal is joined by members of the provincial executive, Minister of Labour Harry Bains and NDP MLA Harwinder Sandhu in front of the BC Legislature in Victoria (2022).

Over the past year, BCNU has welcomed a number of recent announcements by the provincial government, such as adding 602 nurse education seats at post-secondary institutions around BC (February 2022), hiring 320 protective security officers (PSOs) with robust training needed to deal with complex violent situations (October 2022) and expediating the registration process for internationally trained nurses (IENs) (January 2023).

BC nurses advocate for patient care

From rallies in the streets to public awareness campaigns, BC's nurses have been busy as they stand up for their patients, their profession and each other.



Nurses rally in the streets of Vancouver during BCNU's 2022 Convention

The stress of caring for patients in a stretched system has taken its toll. The staffing shortage reached such dire levels in the summer of 2022 that emergency departments around BC were forced to close temporarily. In some cases, people have been forced to drive long distances to access health care.

Heavy workloads have left it hard to achieve any semblance of work-life balance, and nurses are experiencing moral distress from witnessing the impact of the crisis on patient care. For many, it's hard to think of short-term solutions that will address the

erosion of care that's affecting communities across BC.

Throughout last summer and into the fall, members of BCNU's provincial executive travelled to several communities across the province to highlight the crisis and engage with members. Rallies have been held in Nanaimo, Port Moody, Campbell River, Kamloops, Cranbrook, Prince George and Dawson Creek.

Last October, close to 500 BCNU members rallied in downtown Vancouver during BCNU's provincial bargaining conference. The message: it's time to respect nurses. An even bigger crowd marched to the Vancouver Art Gallery a month later during BCNU's 2022 Convention, this time joined by members of the CFNU. Despite the pouring rain, members were united in the call for improved working conditions and safe patient care.

Advertising

The weight of a deteriorating health care system on our health care workers has been the focus of several advertising campaigns BCNU has developed over the three years. In April 2022, the union launched its Help BC Nurses campaign that ran on television, social media and digital platforms across the province and included a new microsite, www.helpbcnurses.ca. The imagery included shots of nurses in acute, long-term and community care settings, and asked the public to email to their local member of the legislative assembly and share their personal experiences. This time, the goal was to get the public to apply pressure on the government. A copy of each email was sent to BC's premier, minister of health, leader of the opposition and the opposition health critic. An impressive 7,000 emails have been sent since the campaign began.

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Last November, we launched a follow-up province-wide ad campaign to highlight the dire state of the health care system and its impact on patients

and nurses. It successfully highlighted the harsh reality for nurses working 16- to 18-hour shifts without breaks and support.

In recent months, the union has been getting postcards signed by people around the province, calling on the government to improve working conditions. At last count, 14,000 have been signed, and plans are underway to deliver them to the Minister of Health in Victoria.

BCNU joins the CFNU

BCNU wrapped up a busy year with the exciting announcement that we would be rejoining the



Canadian Federation of Nurses Unions (CFNU). President Linda Silas gave an impassioned speech at <u>BCNU's Convention</u> in November, welcoming back BCNU's 48,000 members and calling the move "a highlight of her career."

Given the substantial challenges facing the nursing profession across the country, our involvement is expected to elevate the work underway with governments and decision-makers around chronic staffing issues, workload and violence from coast to coast.

Silas received cheers and a standing ovation from the delegation. She told the room that together, they will work to retain, reintegrate and recruit nurses in this country. Joining Linda was United Nurses of Alberta Vice President Danielle Larivee, Manitoba Nurses' Union President Darlene Jackson, Nova Scotia Nurses' Union President Janet Hazelton, Saskatchewan Union of Nurses President Tracy Zambory, CFNU Secretary-Treasurer Pauline Worsford and PEI Nurses' Union President Barbara Brookins.

Since the announcement, collaboration on many fronts has already occurred. BCNU President Aman Grewal and Vice President Adriane Gear travelled to Ottawa in early February of this year to take part in the anti-privatization rally in front of the Parliament Hill, and more plans are in the works over the coming months that will bring BCNU's leaders together with nurse colleagues from around the country.



Members of CFNU and BCNU president Aman Grewal meet at Council of Federation, 2022.

Prince Edward Island Nurses' Union

PEINU will be welcoming 1,200 delegates to Charlottetown, PEI, for the 2023 Biennium!! We are so excited and nervous to be the host province for such a huge group of nurses. After four years of disrupted events, everyone deserves a celebration!

We have arranged all the social night activities and hope everyone enjoys the mix of PEI hospitality. Our members are also looking forward to attending this big event.

It has been two and a half years since COVID rocked our world! Increasing vacancy rates continue to have huge impacts on workload and the ability to access leaves. We meet frequently with human resources and HPEI leadership in an ongoing effort to get them to



PEINU President Barbara Brookins

"recognize" the shortages and the pressure this is having on our members. They continue to put out fires one at a time instead of establishing a clear plan.

Staffing

We have been actively engaged with HPEI and the Department of Health, seeking support for members, especially regarding staffing and retention.

Vacancy rates on PEI are at 24.4%!

We have seen a big increase in the number of members leaving full-time positions for part-time or casual work. High vacancy numbers are making it difficult to get time off, and it is easier to pick up extra shifts than to get leaves approved. This is resulting in increased instability and high staff turnover. We have been working with government on retention incentives and bonuses for members to delay retirement. Unfortunately, even with government promises, there are challenges and delays with the employer implementing the incentives. Our members are frustrated and disheartened with the lack of respect being shown by the employer.

There were three retention incentives announced in October 2022.

- The first one was received in December 2022, and members received a \$3,500 incentive (based on full time, pro-rated for PT) attached to a one-year return-to-service agreement.
- The second incentive was supposed to be available early in 2023, with a \$5,000 incentive offered to RNs/NPs who were eligible to retire and signed a return-to-service to stay longer.



• The third incentive was to be a priority vacancy incentive of \$3,000.

Our proposal was that this be paid to RNs who worked in hard-to-recruit positions, to encourage them to stay and stabilize the staffing in this area. The employer wants to use this incentive to recruit RNs into the hard-to-recruit areas.



Last year we signed an MOU for Summer Staffing which "allowed" the employer to offer overtime ahead of the 48-hour period, but it was too late to have much impact. We have been frustrated with the lack of a defined "back up plan" to address vacancies that are clearly noted in advance. There have been multiple calls and emails pushing the employer to support units that were running short-shifted daily. The MOU is now expired, and the employer is once again refusing to offer overtime benefits until the last minute, which has a significant impact on the stability of staffing.

We are seeing an increase in new nurses struggling with workloads and going off on stress leave. OH&S has been assisting members to get them back into the workplace. It is heartbreaking to hear their stories, but certainly supports the need for a more robust clinical experience during their nursing programs and as they enter the workforce. Mentorship compensation has been addressed with the Premier again, and we have offered to manage a pilot project to provide monetary incentives to mentors.

We have 25 percent of our members eligible to retire at the end of 2022. We have LTC facilities with no permanent staff left. One of our rural hospitals has "temporarily" closed the overnight emergency service. Mid-career nurses are resigning and working in real estate, retail and the lobster industry. The only tertiary hospital on the Island has been operating with critical staffing shortages in the emergency department and intensive care unit. There is limited access to walk-in clinics, and more than 25,000 residents are with no family doctor. Our government is now pushing for more nurse practitioner positions to support access to health care. Hopefully, their plan will include an appropriate compensation package for the additional responsibilities.

Strategic planning/board governance

We presented proposed changes to our governance structure at the 2022 AGM and received member approval to move forward. This will change the current board structure to reflect an executive and provincial council that will meet separately and not duplicate responsibilities. This will allow for more focus at provincial council meetings to address frontline issues.

Government and employer relations



Over the past two years, there has been a huge staff turnover within Health PEI, which has resulted in challenges with addressing member and union issues. We are still struggling with knowing who is actually making decisions within the organizations. With a spring election looming, there could also be some changes within government as well.

PEI Health Minister Ernie Hudson and PEINU President Barbara Brookins

Media campaign

Over the past eighteen months, we have had two commercials posted focusing on the value of a registered nurse. These were well received by our members and highlighted some of the issues facing our members. https://www.youtube.com/watch?v=NK2pCjidGcU https://peinu.com/value-of-an-rn/

Negotiations

Our collective agreement expired March 2021, and we began face-to-face meetings with the employer in October 2021. It has been a slow process to say the least!

In February we were told that, with an expected spring provincial election, there will be an agreement by April! But oh no, on March 15 PEINU sent an urgent message to its membership:

It is with regret and overwhelming frustration that I am writing to inform members of PEINU that we have been given notice that Health PEI is refusing to continue bargaining during the election and will not be participating in the next set of meetings that were scheduled for the week of March 20. They have suggested returning to the table June 14-15 in anticipation of when a new government might be sworn in.

In light of this new development, the Union is seeking advice from legal counsel to determine what recourse may be available under the Labour Act, and we will provide further updates to members as new information becomes available. In the meantime, I feel it is important for you to know what this means for our Union, why it's such a problem, and what every member can do about it because...

You have been waiting long enough!

Lots of discussions on retention, staffing, hiring and reassignment of members need to happen and fast, our nurses are struggling and frustrated even more each day.

TOGETHER TOGETHER TOGETHER TOGETHER We got this

Privatization

Lastly, privatization continues to expand on the island.

We are seeing increased numbers of travel agency nurses which are being hired by individual facilities and not monitored by HPEI. This is not stabilizing staffing or expanding service delivery, especially since the majority of "travel" nurses are previous employees of HPEI. Medavie/Blue Cross/Island EMS is still a big private company that is ready and willing to submit proposals for any form of service delivery and expansion of private care.

As the smallest member organization, I cannot stress the importance enough in regards to national organizational support.



CFNU President Linda Silas and PEINU President Barbara Brookins at CHC Rally, February 2023

Being part of the CFNU has provided us with a stronger voice and the collective information that supports the issues impacting our members. We are all going through the same challenges and knowing what has



PEINU President Barbara Brookins and Prime Minister Justin Trudeau

been tried and works in other provinces, helps provide direction. Over the past year, we have been fortunate to speak with all provincial premiers and health ministers. Sharing member experiences and impacts on the health system is slowly changing the recognition that we are receiving both provincially and federally. The recent announcement of increases to federal funding will hopefully provide support directly where it is needed — health human resources! Without nurses, there is no health system!

Canadian Nursing Students' Association



We welcomed the new BOD with our brand new Board structure in March 2021!

Our first POC Caucus Chair conducted research on racism in nursing schools and published a full report of findings with five recommendations to fight racism in nursing schools and clinical sites.



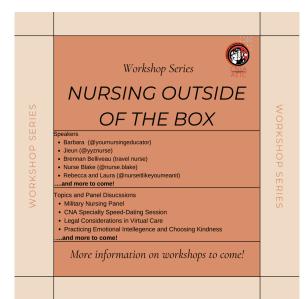


We had plenty of virtual meetings from 2020-2023. In an effort to be more environmentally friendly and be mindful of our membership fees, we will likely continue virtual practice in the future.

TOGETHER
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we got this

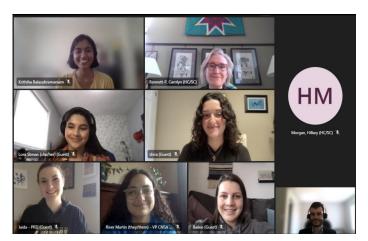
After lots of work, reflection, meetings and discussions, we presented our Strategic Plan for the 2022-2026 year. For the first time in a long time, we added a new strategic point to address climate action of nursing students and nurses. We also broadened CNSA's goals to address the needs of nurses from various equity-seeking groups.





The CNSA Board took on the task of planning a virtual national conference that featured speakers from several different areas of nursing to showcase the variety and flexibility that a nursing degree provides.

Members of the CNSA Board and some nursing students were able to meet with Minister Bennet to discuss the mental health issues that nursing students face today.



MEETING NOTES 25 JANUARY 2023

The Needs of Nursing Students and New Grads in 2023

PRIORITIES

- 1. Paid practicums for nursing students
- 2. Formal mentorship for new grad nurses
- 3. Programs to help PCAs and nurses get higher education
- 4. Better anti-racism policies to protect POC nursing students
- 5. Standardized list of skills for each year
- 6. Funding for professional development, especially for rural and northern nursing students and new grads
- 7. Nursing leadership after the pandemic

After noticing a spark and refreshed need for nursing students and new grad advocacy, our VP took on setting up meetings to arrange priorities and concerns that nursing students and new grads want to see addressed. As the incoming Board shares this passion, the goal is to continue working on advocating for nursing students and new grads with the support of nursing leaders.



Linda Silas, CFNU President, was the proud recipient of the CNSA Honorary Contribution Awards in January 2023. The award is granted to those individuals who have greatly contributed to the achievements and aims of CNSA without ever being a member of the Association.

FORWARD TOGETHER A NEWSLETTER FROM BEA BRUSKE, PRESIDENT OF THE CANADIAN LABOUR CONGRESS

As the end of my first full year as president of the Canadian Labour Congress draws to a close, I want to take a moment to reflect on everything we've achieved together. Our labour movement is stronger than ever and we've made gains that benefit everyone in Canada.

It's a privilege to have met so many brilliant and determined workers across the country, and I can't wait to take on the coming year together. For now, settle in and read on for some of my highlights of 2022.



Putting money back into workers' pockets

Canada's unions worked hard to build support for the NDP-Liberal Confidence and Supply Agreement and pushed the New Democrats and Liberals to deliver for working people. The parties cooperated to <u>put money back into the pockets of Canadians</u>, including dental care for low-income kids, doubled the GST rebate and a \$500 rent subsidy for low-income renters.



The government also scrapped interest on federal student and apprentice loans – a progressive win.

While these measures provide welcome relief to many, workers' wallets are being hit by soaring grocery bills, sky-high inflation, and painful interest rates. Canada's unions led opposition to the Bank of Canada's aggressive rate hikes, which are putting us on the brink of an unnecessary recession. We released a report with labour economist Jim Stanford to offer policymakers alternatives that put people first and sounded the alarm about the corporate greed causing Canadians pain at the checkouts.

All hands on deck for our care systems

Canada's unions are pushing hard for investments in our public <u>care system</u>. Our movement scored a significant victory when the federal government penned agreements for \$10/day child care programs in all provinces.

We celebrated the BC Court of Appeal's decision in the <u>Cambie Surgeries Corporation (CSC)</u> case, which safeguards our universal health care system. I participated in the <u>Council of Federation meeting with Canada's premiers</u> and met with Ministers Jean-Yves Duclos and Kamal Khera to <u>discuss ongoing challenges</u> in health care. Unions helped secure <u>\$2 billion in additional funding</u> for health care this year – but the needs of our care systems are much greater and the fight is far from over.

Wins for workers

The federal government <u>announced anti-scab legislation</u> – a massive win for workers which will help restore fairness at the bargaining table. Working with government to get the anti-scab bill over the finish line is a key priority for 2023.

The federal budget contained some <u>positive wins for workers</u>, including a labour mobility tax deduction to support tradespeople, allowing unions to independently file trade remedy complaints, and amending the Competition Act to outlaw wage collusion by employers.

As of December 1, workers in the federal sector became eligible for <u>ten paid sick days</u> – a critical step towards keeping our workplaces and communities safe. Now we need paid sick leave for *all* workers.

I was delighted to be there when the BC NDP government <u>passed a card check law to restore</u> <u>automatic certification</u>. Signing a union card is the best way to improve working people's lives.

We flexed our muscles when Premier Ford tabled legislation to override charter rights, force an unfair deal on education workers and block strike action. Together, we forced Ford to back down. We're in a new era for unions building support and momentum. People are struggling and they know that unions help workers thrive.



Standing up to Poilievre

When Pierre Poilievre was elected leader of the Conservative Party, <u>we</u> <u>wasted no time exposing his empty rhetoric</u>. Mr. Poilievre <u>talks a good game</u>, but as a member of Stephen Harper's government, he attacked pensions, voted for anti-labour laws, ignored frontline workers and cut billions from health care.

Tackling the climate crisis

I was <u>pleased to see new investments in workers</u>, sustainable jobs and training. Labour leaders representing the energy sector joined CLC staff at the <u>UN Climate Change Conference (COP27)</u> to be a strong voice for workers. A key win was the inclusion of "social dialogue" as a part of Just Transition, which outlines the role of government, workers and employers in delivering an energy transition. Now we need to make sure Canada follows through with good jobs in renewable energy, sustainable transit and infrastructure.

Fighting for human rights

Canada's unions <u>welcomed the federal government's decision to reverse its discriminatory blood</u> <u>donation policy</u> – a positive step in addressing discrimination experienced by 2SLGBTQI people.

People living with disabilities are three times more likely to be food insecure. It's unacceptable. We joined disability advocates to urge MPs to <u>fast-track Disability Benefit Bill C-22</u> to tackle disability poverty.

Canada's unions marked 16 Days of Activism against Gender-based Violence by <u>demanding</u> <u>action to tackle gender-based violence at work</u>. Our team produced a toolkit to help unions spread the word and tens of thousands saw the CLC's <u>social media</u> content. We also commemorated 25 years since the release of the CLC National Anti-Racism Task Force's ground-breaking report, "Challenging Racism: Going Beyond Recommendations." Advancing anti-racism is crucial as we look to the future of the labour movement.

We worked hard together this year. Canadian unions are a powerful force for good, standing up for workers and advocating for robust public services that lift everyone up. We're gearing up to be even bigger and bolder next year. Join us!

WHAT WE DID TOGETHER IN 2022

In 2022, we won campaigns and fought for workers and their families through our actions, stories and more. As the year draws to a close, pour yourself a cup of something warm and read about our wins.



Helping workers' wallets

We pushed for the NDP and Liberals to cooperate — and put more money in Canadians' pockets. We won dental care for kids, support for renters and doubled the GST rebate. We also secured deals for \$10/day child care in every province — an essential investment in our kids' future.



Showing we care

Thousands have joined us to demand better working conditions for care workers and quality public care for all. Pressure from workers and unions helped win \$2 billion in new public health care funding. With underpaid and overworked staff in all corners of the care economy and ERs overflowing with sick kids, our fight isn't over.



Putting workers first

The federal government announced anti-scab legislation — a victory for workers fighting for fairness at the bargaining table. We forced Doug Ford to back down when he tried to override workers' rights. We also made huge strides towards protecting workers' hard-earned pensions in the event of employer bankruptcy; now we need pension protection to become law.

TOGETHER WE'RE OVER 3 MILLION WORKERS ACROSS CANADA AND OVER 50 UNIONS AND LABOUR FEDERATIONS.



Our team at the Canadian Labour Congress hit the ground running with a high-impact lobby event bringing hundreds of workers to Ottawa. But that's not all — read on to learn what we've been up to and our plans for the coming months.

Bringing workers' issues to Parliament Hill

On February 7, over 400 workers, activists and labour leaders – our biggest delegation yet – mobilized to Ottawa to put the pressing issues facing workers and their families onto the political agenda. There's something so powerful about people coming together to demand change. One participant even pulled me aside to tell me it was the best day of her life!

In the lead-up to our lobby day, I <u>published an op-ed</u> in the Hill Times highlighting the challenges facing workers and their solutions, while thousands of you helped ramp up the pressure by <u>writing to your MPs.</u> You can bet we're planning to turn up the heat in the coming months, especially with the federal budget on the horizon.

Demanding quality public care

Our loved ones are paying the price as emergency rooms overflow, care workers are pushed to the brink, and wait lists for essential care keep growing. Some premiers are promising a quick fix, but we know that an American-style, for-profit system is not the answer.

I urged <u>Health Minister Duclos</u> to invest in publicly funded and publicly delivered programs that ensure Canadians can access quality public care. The Prime Minister finally met with the premiers to discuss health funding — something we called for during a long time. While we're <u>cautiously optimistic</u> about the federal government's pledge to increase health funding to provinces and territories, we're concerned that with no strings attached, this deal will only scratch the surface.

Putting workers first

Canada's senators are considering Bill C-228 which, if passed, will safeguard the pensions of millions of workers and pensioners against employer insolvency. This week, I presented at the Senate Banking Committee to urge senators to swiftly pass the bill with no amendments. Many improvements were already made to the bill in the House of Commons, and Bill C-228 passed unanimously in the House. Senators must respect this and vote to pass this legislation. We're so close to winning – help ramp up the pressure.

Making work safer

Canada's unions have long called for the Canadian government to tackle gender-based violence at work. In January, <u>Canada ratified International Labour Organization Convention 190</u>, the first global treaty that acknowledges the universal right to a world of work free from violence and harassment, including gender-based violence and harassment. Canada's unions are ready to roll up our sleeves and work with governments and employers on a strong plan to implement it in every jurisdiction.



Learning together

I was honoured to spend time at the CLC's Pacific and Alberta labour schools in January. Labour schools provide a unique learning opportunity for union activists to build solidarity and knowledge so they can defend their members' rights in the workplace and beyond, and it was great to meet so many passionate union organizers. Our Pacific Region Winter School is the largest labour school in Canada, and both schools have a long and rich history. You can learn more here.

Fighting to make life more affordable

With every pay cheque, workers are losing more ground to inflation. Canada's unions been a leading voice opposing the Bank of Canada's aggressive interest rate hikes, which are making workers pay for a crisis they did not create. Our pressure is working – the Bank of Canada has finally signalled it is considering a rate hike pause. We'll continue to do everything in our power to prevent job losses and stave off a disastrous recession – and restore balance to our economy, as I discussed in this *Globe and Mail* op-ed.

Coming together at Canadian Council

Our first Canadian Council meeting of the year was a success. We discussed the CLC's upcoming convention. We also reviewed our short- and medium-term legislative and campaign priorities, including the CLC's efforts to win El improvements, secure worker-centred legislation implementing a just transition to a net-zero economy, and advance cross-border solidarity through the CLC's international work.

Looking ahead

It's a big year for our labour movement. We have some significant challenges ahead, but we're also gearing up to be bigger and bolder than ever. Our team is planning an incredible convention – with exciting guest speakers, powerful organizing and skills sessions, and plenty of opportunities to connect with other labour activists. It is taking place from May 8 to May 12, 2023, in Montréal. I hope to see many of you there!

We recently launched a campaign to <u>recognize and celebrate Black care workers</u> during Black History Month and beyond. Our team created <u>sample social media posts</u> to help you get involved. You can also visit our Show We Care campaign <u>site</u> to share the experiences of care of Black workers, write to your MP and amplify the campaign.

March 8 is International Women's Day. Canada's unions are celebrating union women and our achievements – including winning pay equity legislation for federal workers, making progress towards a national child care system, securing support for workers experiencing domestic violence, and more. Join the campaign by sharing the <u>sample social media posts</u> and <u>graphics</u>, the <u>sample e-blast for your supporter list</u> and by <u>pledging to champion gender justice</u> in your workplace.

CHC Report



Dear colleagues and friends,

To begin, let me thank you and your members for your steadfast support of the Canadian Health Coalition. I am overwhelmed by your kind generosity when we reach out to you to join in our mission to defend and expand our cherished Medicare.

We are working hard to fulfill Tommy Douglas's dream of public health care. As he wrote in 1979, "Unless there is a concerted effort to apply pressure on the federal and provincial governments, the erosion of Medicare will continue unabated and might even be accelerated. Our best hope lies in the Canadian Health Coalition ... for the preservation and extension of Medicare."

A year of growth

The Canadian Health Coalition has been growing dramatically this year, which is improving greatly our influence with decision-makers and opinion-leaders in Ottawa.

In 2022-2023 we were joined by three more organizations: SEIU Canada, the Canadian Federation of Students and the Professional Institute of the Public Service of Canada (PIPSC), who bring new energy to our common table.

Additionally, the Board of Directors increased our staff capacity to improve our media profile and develop stronger relationships in Quebec.



Sending a message to Liberal caucus MPs

The Board has also approved an ambitious digital campaign to recruit thousands of new supporters to turbo-charge our campaigns and to provide additional funds for our campaigns.

Our work this year is guided by five key priorities (in no specific order):

- Increase health care funding and enforce the Canada Health Act
- Implement pharmacare
- Legislate enforceable national standards for long-term care
- Stop privatization and remove for-profit from health care, including long-term care
- Eliminate systemic racism from health care

CHC Report

The next three years will be crucial for our work together. The Liberal-NDP Confidence and Supply Agreement, announced in March 2022, could finally give Canadians access to life-saving medicines through a national universal pharmacare program. This is huge!

Health and Hope 2025



Rally on Parliament Hill February 7, 2023

To achieve the most significant expansion of public health care in a generation, the Canadian Health Coalition launched a 3-year strategic plan we called Health and Hope 2025.

The goal of Health & Hope 2025 is to achieve the full delivery of health care commitments made in the 2022 Liberal-NDP Agreement before its conclusion in 2025, including public dental care, universal pharmacare, frontline health care investments, and safe long-term care.

The terms of the Liberal-NDP are viewed as a minimum requirement, and we will work to ensure the strongest delivery possible on these commitments, and beyond.

The campaign will be waged on three strategic fronts: in the media, in Ottawa and in our communities. That's why we are investing in improved communications – such as our popular newsletter of public health care news delivered each Wednesday to nearly 10,000 people.

This year we were sought out by journalists from every major news media outlet in the country, including CTV, CBC, Global, *The Globe and Mail*, *The Hill Times* and more.

In Ottawa we have focussed our advocacy efforts on reaching and influencing Parliamentarians through online meetings and committee appearances, and when necessary, rallies on the Hill to make our presence felt and our demands heard.

A year of action

This year has been one of our most active in recent times. We have mobilized our supporters at every opportunity to push for public health care. Here are some selected activities that you have seen on the news or read about in your inbox.

- We organized hundreds of supporters and leaders for a rally against privatization and calling for pharmacare on Parliament Hill outside the meeting of the Prime Minister and premiers.
- We brought together 100 volunteers to lobby Parliamentarians for pharmacare.
- We joined members outside of Canadian Blood Services in support of voluntary plasma collection.
- We provided lead media commentary at the meeting of Premiers in Victoria.



CHC Chair Pauline Worsfold speaking out for Medicare

- We organized supporters and spoke to MPs outside the Liberal Caucus retreat in Saint Andrews, NB.
- We were the first of hundreds of organizations to present to the Commons Finance Committee in advance of the 2023 Budget.

Looking ahead, the Canadian Health Coalition will continue to draw upon the incredible strength within our movement to fulfill our mission. The Board and its working groups provide an invaluable table to share information, develop analysis and take action, together.

I am grateful to the incredible members of the coalition, our devoted Board members and our experienced staff – because it will take all of us working together to confront successfully the voices of privatization and profit, and to champion the needs of everyone in Canada for accessible health care.

Thank you for everything you do for public health care.

Respectfully submitted, Pauline Worsfold, R.N. CHC Chairperson



HEALTH HHOPE





From the desk of Pauline Worsfold, RN

March 28, 2023

Dear Parliamentarian,

Thank you for meeting with members of the Canadian Health Coalition. We appreciate the work you do on behalf of your constituents and everyone in Canada and urge you to consider these policy proposals carefully.

Founded in 1979, our organization's members work to defend and improve our public health care system. We comprise citizens, frontline health care workers' unions, community groups, and public health experts.

Access to health care is a principle of the Canada Health Act. Medicare is a cherished national program that has kept this promise for generations. Today, it is in critical need of protection and strengthening so we may continue this legacy for future generations.

Please join us in our efforts to promote health and hope in Canada.



Pauline Worsfold, RN Chairperson



INVEST IN MEDICARE: STOP PRIVATIZATION

THE ISSUE:

Health care emergency: Patients are struggling to receive timely access to care. Frontline health care workers are stressed and hospital wait times are getting longer, but some provinces are failing to sufficiently invest in public health care.

Weak accountability: The federal government has committed \$198 billion over 10 years in provincial health transfers with few strings attached (Macdonald, 2023).

Privatization: Some provinces are outsourcing medical services to private forprofit clinics that will draw even more health care workers away from public hospitals, and put patients at risk of extra-billing or high-pressure upselling of non-insured services.

THE SOLUTION:

Strings attached: It is important federal funding comes with strings attached to ensure the dollars are spent by the provinces on ways that improve patient outcomes.

Protect patients: The Health Minister must continue to vigorously enforce the principles and conditions of the *Canada Health Act*, and beef-up investigation and monitoring for prohibited practices such as user fees and extra billing.

Public care: Public dollars, including federal transfers, should support our cost-effective public, non-profit health care system, and not be squandered on profits to investors in private for-profit clinics.

[Data] shows that knee replacement surgery in a public hospital, paid by the province, costs about \$10,000. The same surgery in a private clinic can reportedly cost patients up to \$28,000."

— Cuttler, M. & Birak, C. (2023). *Do private, for-profit clinics save taxpayers money and reduce wait times? The data says no.* Retrieved from CBC.ca website: https://www.cbc.ca/news/health/private-health-care-taxpayer-money-1.6777470

IMPLEMENT PUBLIC UNIVERSAL PHARMACARE

THE ISSUE:

The patient pays: Our public Medicare system does not cover the cost of prescription medicines, leaving many patients on the hook to pay for necessary drugs unless they're in a hospital.

No coverage: One-in-five people report they do not have private drug insurance – from low-paid workers to self-employed entrepreneurs (Cortes & Smith, 2022). It's an issue of affordability for families. Immigrants and racialized people are hit especially hard.

People don't heal: This situation leaves people struggling to pay for essential medicine, or they might skip taking their meds for their physical or mental health altogether. Their condition worsens, and they may end up in the hospital's Emergency Department.

THE SOLUTION:

Hoskins Report: In 2019 after extensive consultations, the federal government's Advisory Council on the Implementation of National Pharmacare, led by Dr. Eric Hoskins, recommended: "the federal government work with provincial and territorial governments and stakeholders to establish universal, single-payer, public pharmacare in Canada" (Health Canada, 2019).

Universal coverage: The Hoskins plan will expand Medicare to provide universal publicly-funded and publicly-delivered drug coverage to everyone in Canada, based on their medical need and not their ability to pay.

Save lives and money: Not only will pharmacare save lives, many families would save hundreds, and potentially thousands of dollars each year, too. Employers will save money on private health coverage costs, while provinces and territories will reap billions of dollars in savings through bulk purchasing of pharmaceuticals.

Eight in ten Canadians support the federal government taking primary responsibility for funding Pharmacare in order to make sure all provinces and territories implement equitable and universal drug coverage as quickly as possible."

— Environics Research. (2023). *Attitudes towards pharmacare 2023*. [Slide presentation]. Retrieved from Canadian Federation of Nurses Unions.

Cortes, K. & Smith, L. (2022). *Pharmaceutical access and use during the pandemic*. Retrieved from Statistics Canada website https://www150.statcan.gc.ca/n1/en/pub/75-006-x/2022001/article/00011-eng.pdf?st=RNjlpqev

CREATE SAFE LONG-TERM CARE: PHASE OUT FOR-PROFIT INVESTORS

THE ISSUE:

Not enough care: Too few staff mean too many residents do not receive safe and appropriate long-term care. Governments have failed to address the needs of our aging population despite years of warnings, leaving too many people without necessary care and too many staff facing precarious, stressful working conditions.

Failed regulation: Detailed regulations that primarily target staff means they spend more time documenting rather than caring. Combined with weak standards in some areas and poor enforcement, residents' and staff lives are put at risk.

Deadly profit: The pandemic unleashed a nightmare for residents and families, especially in for-profit long-term care homes which had nearly twice as many residents infected during its first year and 78 percent more resident deaths compared with non-profit and municipal homes (Science Briefs of the Ontario COVID19 Science Advisory Table. 2021).

THE SOLUTION:

National standards: Federal leadership is needed in program funding for long-term care, and so is legislation mandating enforceable national standards.

Staffing hours of care: Standards should include a requirement for a minimum of 4.1 hours of daily direct care for residents, with an appropriate number and skill mix of the workforce (Health Standards Organization, 2023).

Removing profit: For-profit long-term care homes and commercial delivery of care services should be phased out in favour of public, and non-profit management and operation where care will not come second to profits and shareholder dividends.



In response to the treatment of LTC home residents during the COVID-19 pandemic, many survey respondents felt that abolishing for-profit long-term care was the most important issue to address within LTC."

— Health Standards Organization. (2022). What We Heard Report #1 - Findings from HSO's Inaugural National Survey on Long-Term Care. Retrieved from https://longtermcarestandards.ca/engage



IMPLEMENT PUBLIC DENTAL CARE

THE ISSUE:

Missing piece: Proper dental care is an essential part of everyone's health, but it has been excluded from our public Medicare system.

Gaps in coverage: It is estimated that 32% of Canadians have no dental insurance. That's 12 million people (Office of the Parliamentary Budget Office, 2021). Even people who have dental coverage, regions with lower income and Indigenous communities have challenges accessing dental care providers, and many still struggle with co-pays and yearly limits.

Worse outcomes: Poor dental care leads to other diseases that increase the amount of care required by the patients.

THE SOLUTION:

Public dental care: As the Prime Minister has promised, the federal government should launch a new public dental care program for low-income Canadians, covering under-18-year-olds, seniors and persons living with a disability in 2023, with full implementation by 2025.

Under Medicare: Dental care should be included within the public universal health care system as a medically necessary service (Sheikh, H., and Doucet, 2022).



Participants were asked to name the best and worst things about the Canadian health care system. The best things mentioned always included the concept of universality."

Health Canada. (2022). Canadians' Priorities for Primary Health Care - Final Report.
 Retrieved from: https://publications.gc.ca/collections/collection_2022/sc-hc/H14-395-2022-eng.pdf

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