RNAO’S PROUD PAST

RNAO’s history stretches back 90 years. However, the association’s roots can be traced much earlier, to 1901, when a number of Ontario nurses attend the International Council of Nurses meeting in Buffalo, N.Y., stimulating interest in creating a provincial organization. Three years later, the Graduate Nurses’ Association of Ontario (GNAO) was formed from the alumni groups of various Ontario nursing schools. The GNAO, with a mandate to encourage nurses’ professional development, is the forerunner of RNAO. And it’s thanks to GNAO that the provincial government passed a Nurses Registration Act in 1922.

1920s
1925 The Ontario association’s name (Graduate Nurses' Association of Ontario) is changed under the Ontario Companies Act to be known as the Registered Nurses' Association of Ontario (RNAO).

The first unofficial president of RNAO was Miss Dickson who served from December 4, 1925 to April 10, 1926.

1926 RNAO's first official president, Florence Emory, was elected April 10, 1926. She served a three-year term until April 6, 1929.

The first general meeting of RNAO was held in Belleville.

1930s
1930 An RNAO committee is formed to create a loan fund (now known as the Permanent Education Fund) to assist members in financing post-basic nursing courses.

1935 RNAO is instrumental in developing standards for nursing education and practice, and subsequently closes 37 small schools of nursing in Ontario that do not meet its requirements. The association protects the title “registered nurse” by making registration mandatory.

1940s
1945 The RNAO News Bulletin begins publication.

1947 The Nurses' Act is amended to provide for the title “certified nursing assistant” following recommendations from RNAO and the Canadian Nurses Association. The role of certified nursing assistant would expand and evolve, and in 1993 was renamed "registered practical nurse."

1949 RNAO appoints a legal advisor on a retaining basis to respond to association members on request.

1950s
1951 The Nurses’ Registration Act, 1951, a culmination of years of effort and a milestone in the history of
nursing in Ontario, is passed, giving the association responsibility for: creating regulations regarding standards of admission to schools of nursing; determining courses of study in these schools; setting examinations for registration; and issuing, renewing, and cancelling certificates of registration.

1956 At the annual meeting, a decision is made to investigate the feasibility of collective bargaining. A program of voluntary negotiation with employers is adopted, with the ultimate purpose of seeking legislation providing for compulsory arbitration, if necessary. This very same year, RNAO moves into its new headquarters on Price Street in Toronto.

1957 In response to membership requests, RNAO applies for exemption from the terms of the *Ontario Labour Relations Act*. Such exemption, if granted, means nurses can’t be forced, as a condition of employment, to join trade and labour unions. The report of the Select Committee of the Legislature recommends RNAO and other recognized professional associations be excluded from the terms of the act.

1960s

1961-62 RNAO, at the request of Ontario’s Ministry of Health, studies the feasibility and advisability of formation of a college of nurses in Ontario, a body to be authorized by the government to administer a statute or act respecting nurses, and to implement its terms. The *Nurses’ Act, 1961-62*, is proclaimed in January 1963, establishing the College of Nurses of Ontario (CNO). With this change in legislation, registration becomes the responsibility of the college rather than RNAO.

1964 Following a study by Dr. John Crispo on the feasibility of collective bargaining and compulsory arbitration, a resolution is passed authorizing the board of directors to secure special legislation that would give RNs, through RNAO, the right to bargain collectively with their employers and to submit items in dispute to binding arbitration.

1965 In spite of the fact that nursing services greatly outweigh the supply of RNs, salaries and fringe benefits fall dramatically behind the economic growth of the country. RNAO issues a brief *The Nurses’ Collective Bargaining Act*, which would give RNAO the right to bargain collectively on behalf of its membership. Although the Ontario government does not act on the proposed legislation, RNAO membership endorses the principle of collective bargaining. Over the next eight years, RNAO assists groups of members and nurses to bargain collectively with their employers under the *Labour Relations Act*.

1967 RNAO establishes the member emeritus membership category (it grants the privileges of regular membership for life after 40 consecutive years of RNAO membership) to commemorate Canada's centennial.

1970s

1970 Members can enrol in an RNAO-sponsored professional liability (malpractice) insurance plan.

RNAO's testing service becomes the property of the Canadian Nurses Association (CNA), forming the nucleus of a national testing service.
1971  RNAO expresses concerns related to smoking and health, and supports the Federal Minister of Health and Welfare in legislation proposed to curb tobacco advertising.

1973  RNAO supports the establishment of a central vehicle for collective bargaining for nurses, and endorses the formation of the Ontario Nurses’ Association (ONA).

1974  ONA is certified by the Labour Relations Board. RNAO transfers activities related to collective bargaining to ONA.

1979  Formal recognition is given to interest groups.

**1980s**

1980  RNAO meets with the Minister of Health to present documents such as: RNAO Position Paper on Health-Care Costs; RNAO Statement on the Role of the Registered Nurse in the Operating Room; Standards for the Organization and Administration of the Nursing Department, Public Health Units; RNAO Position Paper on Continuing Education for Registered Nurses.

1982  RNAO writes a background paper endorsing the proposal that a baccalaureate degree in nursing be the minimum education requirement for entry-to-practice by the year 2000.

1983  Fulfilling its mandate to speak for professional nursing, RNAO applies for and is granted legal standing at the Grange inquiry into deaths at Toronto's Hospital for Sick Children.

1986  RNAO successfully lobbies for a ban on extra billing for medical services.

The voluntary Legal Assistance Program (LAP) is established by RNAO to assist nurses with certain legal problems which may arise in work-related circumstances.

**1990s**


1996  RNAO holds candlelight vigils to express concern about the dismantling of our publicly funded healthcare system.

1998  RNAO and the nursing community celebrate the proclamation of nurse practitioner legislation.

RNAO meets with Ontario's Premier to present a document that addresses critical issues facing Ontario nurses and recommends solutions. Three key areas targeted are: the need for reinvestment in nursing, the creation of a patient safety act, and government support for baccalaureate entry to practice.

1999  The Minister of Health accepts the report of the Nursing Task Force and vows to act on its recommendations. The task force is established, following RNAO's 1998 annual general meeting, to suggest solutions to the many chronic and critical problems within the profession.
RNAO is assigned by the Ministry of Health to lead a major project on the development, implementation, and evaluation of nursing Best Practice Guidelines (BPG).

2000s

**2000** RNAO focuses on the preservation of the Canada Health Act and joins forces with nursing organizations across the province to call for a moratorium on the privatization of health care in Ontario.

The association holds its first *Queen's Park Day*, bringing nurses and nursing issues directly to the Ontario legislature.

RNAO lobbies for – and welcomes – the announcement of the new chief nursing officer position created by the provincial government as part of its senior management team.

RNAO is assigned by the Ministry of Health to lead the advanced clinical fellowships and training fellowships for Ontario RNs.

The association launches *Take your MPP to Work*, which allows political leaders to hear first-hand from nurses.


The BPG program, along with the *Centre for Professional Excellence*, organizes the first international BPG conference held in Toronto.

**2002** RNAO begins a public awareness campaign entitled *Speak Out Ontario*, which intends to raise the level of public debate and support for a publicly-funded, universally accessible, not-for-profit health-care system.

RNAO responds to the Kirby Commission on the final volume of its report on Canada’s health-care system: *Recommendations for Reform*. This report contains sound proposals to invest in Canadian health care – though its willingness to expand the use of for-profit health care is alarming to RNAO.

RNAO endorses the final report of the Romanow Commission, *Building on Values: The Future of Health Care in Canada*.

The BPG program launches its first four guidelines, all related to care for the elderly, at RNAO’s international conference. The BPG program also launches the Best Practice Champions Network by inviting interested health-care organizations to nominate key individuals in their organizations to participate in the network and promote, influence and implement BPGs in their setting.

**2003** RNAO reschedules its 78th AGM from April to September due to the Severe Acute Respiratory Syndrome (SARS) outbreak. The association supports the nursing community during the outbreak. SARS takes the lives of 44 Ontarians; two are nursing colleagues who worked with SARS patients: Nelia Laroza, 51, and Tecla Lin, 57. RNAO representatives attend both funerals. RNAO delivers a
formal request to Premier Ernie Eves asking Ontario to order an independent commission of inquiry under the Public Inquires Act into the SARS outbreak. In response, Premier Eves announces an independent investigation into the outbreak that falls short of a full public inquiry. RNAO leads, in collaboration with RPNAO, VIANurse, an electronic registry, maintained confidentially on RNAO’s website, of RNs and RPNs who are willing to be voluntarily immediately available for deployment to an Ontario health-care facility that has been deemed emergency status. On September 29, RNAO releases SARS Unmasked: Celebrating Resilience, Exposing Vulnerability: A Report on the Nursing Experience with SARS in Ontario.

The RNAO-led PhD fellowship program initiative is launched, in partnership with the Ministry of Health. It aims to develop research capacity in the evaluation of clinical outcomes, as well as financial and system outcomes associated with the implementation of RNAO BPGs.

RNAO launches its Best Practice Spotlight Organization (BPSO) program. This project is a three-year partnership between selected organizations and RNAO, sponsored by the Ministry of Health in support of implementation and evaluation of BPGs.

2005 RNAO receives funding from the Ministry of Health to develop a strategic plan to enhance nursing contributions to innovations in health care related to electronic applications, now known as the e-Health Project.

As of this year, all Ontario RNs must have a baccalaureate degree.

RNAO celebrates its new building on Toronto’s Pearl Street with an open house. Over 100 RNAO members, politicians and members of the media attend. The government also announces a Retention Trust Fund to be managed by RNAO, ONA, and RPNAO.

2006 In January, RNAO, with the University of Ottawa’s School of Nursing, launch the Nursing Best Practice Research Unit (NBPRU). The NBPRU, now called the Nursing Best Practice Research Centre, strives to promote nursing excellence through the study of the best strategies to promote the uptake of research results in all aspects of nursing care and the nursing work environment.

2007 The first nurse practitioner-led clinic is launched in Sudbury under the leadership of NPs Marilyn Butcher and Roberta Heale. On August 30, Ontario’s Minister of Health George Smitherman attends the official grand opening of the clinic, with RNAO’s executive director in attendance.

2009 RNAO hosts John Gerretsen, Minister of the Environment, MPPs, environmental, and health activists to celebrate the introduction of the most progressive cosmetic pesticide regulations in North America. RNAO was pivotal in helping to enact these regulations.

2010s

2010 RNAO signs a historic partnership with a Ministry of Science and Innovation Research institution in Spain to have all of the clinical and healthy work environment BPGs translated into Spanish.

RNAO’s BPG app is now available to download from the Apple store. The app, which can be
downloaded to an Apple, Blackberry or Android device, contains the condensed versions of RNAO’s clinical and healthy work environment BPGs.

University of Hartford’s Faculty of Nursing in Connecticut becomes the association’s first international BPSO candidate in October 2010. As of 2013, there are three academic BPSOs (Peterborough’s Trent University, Nova Scotia’s St. Francis Xavier University, and Hartford).

RNAO’s 86th AGM makes history: Premier Dalton McGuinty announces NPs will now be able to admit and discharge patients from in-patient hospital units. In another move to recognize the expertise of nurses, McGuinty acknowledges his government’s recent work to amend the *Public Hospitals Act*, so that chief nurse executives have a seat on hospital boards and quality committees. He reveals the province is also mandating all 37 public health units in Ontario appoint a chief nursing officer by 2012.

**2011**  
Ontario’s Ministry of Energy announces the permanent closure of two additional coal-fired generators, in partial response to an RNAO, Canadian Association of Physicians for the Environment, and Ontario Clean Air Alliance campaign to close coal plants immediately.

RNAO launches a groundbreaking Primary Care/Family Practice Nurses’ Task Force to recommend adjustments to the role of RNs and RPNs in primary care settings.

RNAO leads a federally-funded program with the Canadian Nurses Association to develop a curriculum aimed at preventing elder abuse. Ten long-term care facilities serve as Prevention of Elder Abuse Centres of Excellence (PEACE).

RNAO signs BPSO agreements with two organizations in Chile, and two organizations in Colombia. An agreement is also signed with Brazil to translate BPGs into Portuguese.

RNAO partners with Ontario to establish a central database of nursing-sensitive indicators for RNAO’s clinical BPGs. Called NQuIRE, the database will play a critical role in understanding the impact of BPGs in the association’s BPSOs.

**2012**  
Canada’s premiers decide to focus on nation-wide adoption of clinical practice guidelines as a way of delivering higher-quality health outcomes at a lower cost. The premiers choose RNAO’s guideline for diabetic foot ulcers as one of two guidelines for national implementation (the second guideline selected is developed by the Canadian Medical Association).

RNAO releases a landmark report, *Primary Solutions for Primary Care*. The report recommends Ontario maximize and expand the roles of RNs and RPNs who work in primary care, to improve access for patients and achieve greater system cost-effectiveness.

RNAO releases its game-changing report, *Enhancing Community Care for Ontarians (ECCO)*, in October, which presents a model that advances a strong foundation for community care by anchoring the health system in primary care, and improving health-system integration among all sectors through a single planner and funder: the LHINs.
Production of Nursing Order Sets begins, comprised of actionable nursing interventions based on RNAO’s BPGs, to facilitate use at the point-of-care. RNAO partners with the International Council of Nurses for coding, and with PatientOrderSets.com for distribution.

RNAO signs BPSO Host agreements with Spain and Australia.

**2013**  
At RNAO’s annual general meeting, Premier Kathleen Wynne promises to expand the scope of practice of registered nurses.

RNAO releases a request for proposals for BPSOs tailored to the needs of long-term care homes.

**2014**  
RNAO releases its comprehensive vision document Charting a Course for the Health System and Nursing in Ontario.

RNAO releases elder abuse prevention recommendations and a best practice guideline concerning safe sleep for infants aged 0 to 12 months.

**2015**  
RNAO celebrates nine decades of history at its 90th annual general meeting.

RNAO releases Coming Together, Moving Forward: Building the Next Chapter of Ontario’s Rural, Remote and Northern Nursing Workforce, a report aimed at recruiting and retaining nurses to care for the nearly two million Canadians living in rural, remote and northern settings.