

**CALL TO ACTION:** The CNO's proposal to increase their Annual Fees is open for [public consultation](#) and we want YOU share your thoughts about this unfair tax on nurses! They call it a fee, but it's really just a tax on our profession. Please visit the [public consultation page](#) to provide feedback until Tuesday, May 23, 2023.

**Response to CNO Fee Increase Proposal**  
**SEIU Healthcare Submission**  
**April 2023**

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As a union that represents over 7,500 Registered Practical Nurses (RPNs), Registered Nurses (RNs) and Nurse Practitioners (NPs) with a dedicated Nursing Division that has a separate governing board, SEIU Healthcare recognizes and values the skills, abilities and contributions made by all our nursing professionals. Their dedication and invaluable work have never been more apparent than during the COVID-19 pandemic and an ongoing healthcare staffing crisis. As a result, SEIU Healthcare believes that the CNO's ill-advised proposal to increase its regulatory fees is alarming and should be halted. We acknowledge the mandate of the CNO to ensure public safety, of which nurses are proud to be self-regulated professionals, however SEIU Healthcare is disappointed in the lack of equity between the two nursing classes in the CNO's fee structures.

As you may be aware, currently, RPNs working in Ontario hospitals earn about 66 per cent of the RN wage, whereas the average practical nurse in Canada earns 71 per cent of an RNs wage. Despite this, as you are well aware, RPNs in Ontario are typically working at a scope that is closer to 90 per cent of an RNs scope. Furthermore, in 2013, practical nurses across Canada earned an average 72 per cent of the wage of RNs, compared to just 67 per cent in Ontario and historically, registered nursing assistants (present-day RPNs) were paid closer to 75 per cent of an RNs wage.

RPNs in Ontario are now earning less in comparison to RNs than they were ten years ago and earning significantly less than their provincial and territorial counterparts despite being virtually indistinguishable from an RN in many employment settings. Tack on the COVID-19 pandemic and an unrelenting health human resource crisis, this proposed fee increase is widely considered by SEIU nurses an unfair tax on their profession.

There has been a significant jump in nursing vacancies post-pandemic, and it is projected to persist for years to come. The Financial Accountability Office of Ontario found that even with government measures to increase the supply of nurses and PSWs, by 2027-28, a shortfall of 33,000 nurses and PSWs is expected<sup>1</sup>. This will jeopardize Ontario's ability to sustain the quality of health care services and ensure public safety through safe nursing practice.

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<sup>1</sup> [Ontario Health Sector: Spending Plan Review \(fao-on.org\)](#)

The current fee structure levied by the CNO is inequitable. RPNs pay a larger portion of their earnings toward the College relative to RNs. To right this wrong, we propose a figure that is in line with the relative wage discrepancy between the two classification of nurses. **Therefore, rather than any increase of any amount, RPNs should see a reduction in their annual fees to \$250.20 rather than the proposed increase. This would represent 70 per cent of the full amount paid by RNs consistent with the relative wage gap.**

During the pandemic doctors were paid more than nurses to administer vaccines.<sup>2</sup> In other words, they were paid less to do the exact same job. Furthermore, we know the provincial government subsidizes doctors' CMPA fees to the tune of \$326M in just one year. Another example of inequity between health professionals.

Finally, the CNO proposal is the wrong increase at the wrong time. The 24 per cent CNO fee increase is an unfair tax on nurses when their wages have been unconstitutionally capped at 1 per cent for the past three years.

SEIU Healthcare calls on the CNO to halt the proposed increase to their annual membership renewal fee that would see a 67 per cent increase in cost since 2017 and instead establish a fair and equitable fee structure that encourages the recruitment and retention of our nursing professionals.

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<sup>2</sup> <https://www.cbc.ca/news/health/canadian-medical-protective-association-1.6808224>

## Appendix

Table 1

### Comparing RPN, RN Hospital Wages and Industrial Average, 2021

Province	RPN	RN	RPN Wage as % of RN	# of LPNs	Industrial Average	RPN as % of IndAvg
MB	36.35	45.35	80%	3,235	27.30	133%
SK	37.22	48.13	77%	3,526	29.53	126%
QC*	31.69	47.04	67%	27,854	28.56	111%
AB	34.63	48.37	72%	13,261	32.70	106%
BC	32.98	47.58	69%	11,775	30.02	110%
NL	27.78	41.24	67%	2,347	29.29	95%
PEI	26.69	41.84	64%	651	25.23	106%
NS	30.42	41.48	73%	4,014	26.14	116%
NB	27.96	39.57	71%	3,345	26.94	104%
ON	31.49	47.69	66%	46,252	31.11	101%
Avg.	\$ 31.75	\$ 44.51	71%		\$29.36	111%

Ontario 2021 RPN wage if consistent with rest of Canada proportion to RN wage	\$33.96
Ontario 2021 RPN wage if consistent with rest of Canada proportion to provincial industrial average	\$34.53
Proposed RPN rate (adjusted to 2021, prior to additional GWI beyond 1%)	\$35.52

Table 2

Table 3: Comparison of Nursing Classifications - Canada 2013 Hospital Wage Rates						
Province	LPN/RPN		RN		% 79%	Population
	min	max	min	max		
MB	\$25.20	\$30.80	\$32.92	\$38.81	79%	1,265,405
SK	\$32.10	\$34.38	\$34.94	\$45.35	76%	1,106,247
QC	\$19.00	\$24.94	\$22.28	\$33.18	75%	8,153,971
AB	\$25.17	\$32.96	\$34.31	\$45.03	73%	4,007,199
PEI	\$22.10	\$24.04	\$29.57	\$36.03	67%	145,505
ON*	\$27.10	\$28.55	\$30.17	\$42.85	67%	13,550,929
NL	\$22.73	\$25.21	\$30.77	\$38.10	66%	528,194
BC	\$24.74	\$27.32	\$31.71	\$41.63	66%	4,582,625
NS	\$23.59	\$25.34	\$32.84	\$38.70	65%	942,930
NB	\$21.69	\$23.35	\$28.99	\$35.73	65%	755,635
<b>Weighted Average</b>	--	--	--	--	<b>72%</b>	

Sources: Various collective agreements; Statistics Canada CANSIM Table 051-0001