Each of Dot's 24 editorials remains online and in print. They will endure. We will assemble them and make them into a book. Watch for it. It will be on our best-read list for a long time.

Our readers, our authors, our reviewers, our managing staff, our designers and our publishers have watched her with admiration and have been honoured to work with her. Readers will refer to her regularly. The Academy of Canadian Executive Nurses has been well served by her editorship.

We thank you Dot. We will miss you – and we will call you.

References

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Letter to the Editor

[Re: A Return to Diploma-Prepared Registered Nurses, by June F. Kikuchi 22(3)]

As president of the Canadian Nurses Association (CNA), I feel compelled to address some of the arguments that Dr. Kikuchi has raised in her paper.

I agree with her conclusion that hands-on nursing care is the "difference that makes a difference" in healthcare and that the role and responsibility of an RN require a minimum of a baccalaureate degree. Our opinions differ, however, when the author suggests that the RN profession is on a slippery slope that will lead it away from hands-on care through the delegation of more of this work to practical nurses (PNs). She follows this suggestion with the prediction that the PN designation will eventually be replaced and become a diploma-level RN. In fact, 89% of RNs with a baccalaureate degree work with clients in direct care, according to

the 2006 Canadian Institute for Health Information report, *Workforce Trends of Regulated Nurses in Canada*.

In support of her arguments, the author references a 2006 CNA discussion document, *Toward 2020: Visions for Nursing*, but it has since been replaced by CNA's formal policy position document, *The Next Decade: CNA's Vision for Nursing and Health* (2009). The new document clearly affirms that RNs are to continue providing direct care: "Having completed their basic nursing education, nurses have a broad, solid foundation for providing direct clinical care to people of all ages from birth to death, in homes, hospitals and communities, and in areas ranging from child-bearing to mental health to illness prevention and palliative care."

CNA does promote the idea that baccalaureate-educated nurses are best equipped to handle complex care in all sectors and settings. It also believes that the minimum educational preparation for advanced practice nurses is a graduate degree in nursing. This does not, however, imply that CNA subscribes to the notion that the role of the RN will evolve away from the provision of direct care.

I concur with the author that we must remain vigilant. If, as Kikuchi says, "a perfect storm is brewing," this is our severe weather warning. It is up to all nurse leaders to ensure that the scope of RN practice does not stray from the core values on which the profession was founded.

Even as the delivery of healthcare becomes increasingly complex with each passing year, the provision of direct care will continue to be the bedrock on which RN practice was founded.

Yours sincerely, Kaaren Neufeld, RN, MN, President, Canadian Nurses Association