

STOP THE BLEEDING IN CANADA'S HEALTH WORKFORCE

RECOMMENDATIONS FOR THE FEDERAL GOVERNMENT

Short-Term Recommendations



\$300 million over 3 years to provide health-care workers with retention incentives: free mental health care, retention bonuses for senior nurses, student loan forgiveness, tax incentives, and incentives for those willing to study and practice in hard-to-staff areas.

\$300 million over 3 years to help provinces and territories optimize workloads: safer staffing ratios, support for child-care and elder-care, and increased administrative, clerical and cleaning staff in nursing settings, which will unlock more time for care.

Medium and Long-Term Recommendations



\$50 million over 4 years to establish a national health workforce body to collect high-quality data to support health workforce planning at regional levels.



Create a national mental health strategy for health-care workers, including funding for mental health supports and pan-Canadian monitoring on worker wellness.



Increase training and education for health-care workers: Fund expansions of nursing/medical schools and professional programs; increase capacity for clinical placements for new students.

Canada will be short 60,000 nurses by 2022.

CNA predicted over 10 years ago that this crisis would occur.¹ In many parts of the country, there simply aren't enough nurses to provide care for those who need it.

Canada will face another public health emergency unless immediate action is taken.

The COVID-19 pandemic has made nursing shortages much worse. Health-care workers are exhausted and demoralized. Widespread burnout is creating difficult working conditions that will persist long after the pandemic.²

THE FEDERAL GOVERNMENT NEEDS TO ACT NOW TO SUPPORT HEALTH-CARE WORKERS

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NURSING SHORTAGES



60% of nurses intend to leave their jobs.³



118,200 job vacancies in health care and social assistance.⁴



85% increase in job vacancies for registered nurses and registered psychiatric nurses.⁵

MENTAL HEALTH BURDEN



94% of nurses are experiencing burnout.⁶



Over 60% of health-care workers reported severe burnout in 2021, double pre-pandemic levels.⁷



20% of frontline health-care workers have thought about suicide, 6% have planned an attempt.⁸

SEVERE NURSING SHORTAGE EXAMPLES:



- New Brunswick:** 854 nursing vacancies⁹
- Ontario:** 4x increase in nursing vacancies¹⁰
- Quebec:** 4,000 nurses quit in 2020¹¹
- British Columbia:** 24,000 nurses needed by 2029¹²
- Manitoba:** 2,000 nursing vacancies¹³
- N.W.T.:** 22% nursing vacancies at Yellowknife hospital¹⁴



IN IDEAL CONDITIONS, ONE NURSE WILL CARE FOR 4-5 HOSPITAL PATIENTS. BUT IN SOME PARTS OF CANADA, ONE NURSE IS CARING FOR 10 PATIENTS. THIS IS DANGEROUS FOR PATIENTS AND MAKES NURSE BURNOUT WORSE.

NURSING SHORTAGES DIRECTLY IMPACT PATIENTS

- Delayed medical procedures
- Closed emergency rooms and other practice settings
- Increased wait times
- Increased patient travel to access care (up to 300 kms)

WHY NURSES ARE LEAVING, MOVING TO PART-TIME, OR RETIRING EARLY

- Poor mental health and lack of access to supports
- Unbearable and unsafe workloads
- Chronic understaffing and poor working conditions
- Dangerous nurse-to-patient ratios
- Inability to take a day off or a break
- Suspended vacations

About the Canadian Nurses Association (CNA)

CNA is the national and global professional voice of Canadian nursing. We represent registered nurses, nurse practitioners, licensed and registered practical nurses, registered psychiatric nurses, retired nurses, and nursing students across all 13 provinces and territories.

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ENDNOTES

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