

SOLUTIONS FOR CANADA'S HEALTH WORKFORCE CRISIS

PRE-BUDGET CONSULTATIONS IN ADVANCE OF THE 2023 FEDERAL BUDGET

Submission to the House of Commons Standing Committee on Finance by the
Canadian Nurses Association (CNA)

October 2022

Recommendations

Ensuring people in Canada can access a health-care provider

- Establish a federal fund that would help provinces and territories **invest in nursing training and education in the long-term**.
- Reactivate and expand the **health-care workers permanent residence pathway** to help internationally trained nurses become permanent residents in Canada.
- Offer frontline nurses and other health-care professionals a one-time **income tax deduction** in recognition of their dedication and commitment during the COVID-19 pandemic.
- Develop a **pan-Canadian mental health strategy** for health care workers.

Better data, better planning

- Develop a **new pan-Canadian health human resource strategy** that focuses on retention, recruitment, and workplace conditions.
- Invest \$50 million to **enhance health workforce data** by improving standardization and collection processes, as well as supporting the establishment of a national centre of excellence to centrally house the data.
- Provide funding to support provinces and territories in ensuring the establishment of a **pan-Canadian unique nursing identifier**.

A stable and sustainable health-care system

- Work in partnership with provincial and territorial governments to address **health-care funding gaps in urgent areas of need**.

Introduction

Canada's health-care system is failing people in Canada. It is no longer working the way it should be and urgent action is needed.

Nurses are exhausted, depleted, and leaving their jobs. Patients are facing longer and longer wait times. Health-care providers are finding serious illnesses in patients that should have been diagnosed much sooner. Millions do not have access to a primary care provider. An alarming number of emergency departments (EDs) have been closing their doors.

These challenges are being felt across Canada and they are not particular to one region. In British Columbia, 15 EDs and acute care units had disrupted services between January and July.¹ In Alberta, there were 19 disruptions to emergency and ambulatory care facilities between June and July.² In Ontario, patients waited in the ED for an average of 20.1 hours in May, compared to 12.8 hours in the same month last year.³

The public is losing confidence in their publicly funded health-care system. **61% are not confident or not confident at all that they, or their family, will be able to get timely access to health care in an emergency;** meanwhile, only 7% say they are very confident.⁴ Moreover, when asked to rank the health system on a scale of 0 to 10, the average score given by Canadians was 3.8.⁵

To ensure the sustainability of the health-care system, Canada needs to strengthen and invest in its health workforce. Nursing shortages and burnout are having detrimental consequences to the system, leading to the delivery of poor-quality care and poor patient outcomes. There are no easy solutions. The cracks in the system are deep and no one measure will solve this crisis. The challenge is balancing the need for short-term actions while recognizing that most system-level changes will take place in the medium to long term.

Solving this crisis requires a pan-Canadian approach and federal leadership. CNA, the only national and global professional voice of Canadian nursing, urges the federal government to adopt the recommendations in this submission. Implementing CNA's recommendations provide a framework for working with the provinces and territories to develop a concrete action plan for urgent structural reforms that can transform the health system and ensure its sustainability into the future.

Ensuring people in Canada can access a health-care provider

Recommendations

- Establish a federal fund that would help provinces and territories **invest in nursing training and education in the long-term**.
- Reactivate and expand the **health-care workers permanent residence pathway** beyond refugee claimants to help internationally trained nurses become permanent residents in Canada.
- Offer frontline nurses and other health-care professionals a one-time **income tax deduction** in recognition of their dedication and commitment during the COVID-19 pandemic.
- Develop a **pan-Canadian mental health strategy** for health-care workers as part of the election platform commitment to implement a \$4.5 billion Canada mental health transfer.

In many parts of Canada, there are simply not enough nurses available to fill much-needed positions, assist in critical surgeries, or provide care for those who need it. Strong and decisive actions to help recruit and, most importantly, retain nurses and health-care workers are urgently needed.

With applications to nursing schools significantly increasing in Canada, CNA recommends the creation of a federal fund targeted at expanding seats in nursing schools and professional programs across Canada, with a focus on equity and diversity, as well as capital funding for nursing schools that are restrained by space. Funding could be leveraged from the Liberal election platform commitment of \$3.2 billion to hire more doctors and nurses. A targeted federal nursing education fund should address shortages of academic and clinical faculty. It should also increase capacity for clinical placements, lab simulation learning, and preceptorship and mentorship programs. Funding should also include supports for Black and Indigenous people and people of colour to enrol in nursing schools. Another important area requiring funding is transition-into-practice programs for new nurse graduates as well as bridging programs for nurses who wish to practise in a different or advanced nursing roles, and for personal support workers who wish to bridge to practical nursing.

Internationally educated nurses (IENs) have a role to play in helping address Canada's health workforce crisis. There are tens of thousands of them already in Canada, but they face many systemic and structural barriers that prevent them from practising their profession. For example, immigration status is a major barrier as permanent residency status is required to facilitate work placement and access publicly funded support programs. Without permanent

residency, IENs regularly need to renew their work permits with support from their employers. CNA recommends that the federal government reactivates the health-care workers permanent residence pathway program and expands it beyond refugee claimants.

Furthermore, retention is a critical aspect of addressing the health workforce crisis and the federal government possesses policy levers that can be put to use. In a recent survey of 2,500 nurses conducted by CNA, federal tax incentives were highlighted as one of the top three measures that can help address nursing shortages. CNA recommends the creation of a one-time federal tax benefit for frontline nurses and other health-care workers in recognition of their dedication and commitment to the health of all people in Canada during the fight against the COVID-19 pandemic. This policy could be modelled on the tax relief provided to Canadian Armed Forces members who serve in moderate and high-risk missions.

Finally, nurses are showing the highest level of anxiety and depression among all health-care workers, with 94% reporting burnout and nearly half of those at a level that is considered clinically severe.⁶ However, workers in other sectors, including male-dominated professions such as fire and police services, receive many mental health and post-traumatic stress disorder (PTSD) supports, even though health-care workers experience the same or even worse trauma from their work.

Nurses and health-care workers need country-wide leadership to address the challenges they face. This could be supported by the development of a national mental health strategy for health-care workers, similar to the federal government's 2019 release of *Supporting Canada's Public Safety Personnel: An Action Plan on Post-Traumatic Stress Injuries*, which aims to help address the mental wellness of public safety officers.⁷

Better data, better planning

Recommendations

- Develop, in collaboration with provincial and territorial governments, a **new pan-Canadian health human resource strategy** that focuses on retention, recruitment, and workplace conditions.
- Invest \$50 million over four years to **enhance health workforce data** by improving standardization and collection processes across provinces and territories, as well as supporting the establishment of a national centre of excellence to centrally house the data and support jurisdictional planning efforts.

- Provide funding to support provinces and territories in ensuring the establishment of a **pan-Canadian unique nursing identifier** that would provide accurate data and information and facilitate planning decisions.

A successful plan to address health human resources (HHR) challenges requires an integrated effort among federal, provincial, and territorial governments. It is only through a coordinated approach that different policy levers (e.g., immigration, education, labour, fiscal) can work together to ensure that decisions in one jurisdiction do not have unintended consequences for other jurisdictions.

Canada has not had a pan-Canadian HHR strategy since 2004.⁸ In 2003, first ministers agreed that collaborative strategies were needed to strengthen national planning and improve recruitment and retention of health-care providers. A renewed commitment by all levels of government to develop a new HHR strategy, in collaboration with nurses, is urgently needed again.

Furthermore, pan-Canadian strategizing is limited by poor health workforce data. Canada needs adequate national data to support decisions on how to best deploy, manage, and train its workforce. In fact, Canada lags behind comparable countries regarding health workforce data and digital analytics.⁹

The federal government has an important coordinating role to play on health workforce data. It can pool resources and it can coordinate this data while making intelligence and analysis available to the provinces and territories for the purposes of effective planning at regional levels. Efforts should include ensuring minimum data standards across jurisdictions, enhanced data collection, accessible decision-making tools, and the capacity for analytics and policy analysis.

To help provide accurate data and information on the nursing workforce, CNA also recommends that the federal government supports the creation of a pan-Canadian unique nursing identifier system that would assign a lifetime number to each regulated nurse. Such a system has existed for doctors for many years through the Medical Identification Number for Canada, but it has never been established for nurses. Currently, there are some jurisdictions in Canada that are conducting a pilot project to establish a nursing unique identifier. Once the pilot project is completed, federal funding could help expand and ensure the establishment of the unique identifier system for nurses at a pan-Canadian level.

A unique identifier for nurses would accurately track nurses throughout their careers by preventing double- or under-counting of nurses, providing accurate information for databases that would facilitate workforce projections and planning, and allowing nurses to be tracked inter-jurisdictionally.

A stable and sustainable health-care system

Recommendation

- Work in partnership with provincial and territorial governments to address **health-care funding gaps in urgent areas of need**, such as health-care workers, surgical backlogs, mental health, primary care, population aging, long-term care, and virtual care.

Canada's health-care system faces many increasing pressures that threaten its sustainability. We will not be able to tackle these challenges — most notably the lingering effects of COVID-19, nursing shortages, population aging, the increase in chronic diseases and rare diseases, and rising costs of technology and drugs — without collaboration from all levels of government and substantial levels of predictable funding into the future that are attached to expected outcomes. For example, more funding to strengthen primary care through a team-based, interprofessional approach is integral to improving the health of all people living in Canada and the effectiveness of health-care service delivery.

Canada needs to ramp up its health-care system to deliver better outcomes for patients and ensure they can receive the care they need when they need it. More funding through federal transfers is needed, but that needs to be in conjunction with a mechanism that ensures people in Canada receive concrete outcomes.

Endnotes

¹ <https://www.cbc.ca/news/canada/british-columbia/bc-closure-data-analysis-1.6522490>

² <https://globalnews.ca/news/8998826/er-doctors-health-system-collapsed-patient-surges-emergency-room-closures/>

³ <https://www.hqontario.ca/system-performance/time-spent-in-emergency-departments>

⁴ <https://angusreid.org/canada-health-care-issues/>

⁵ <https://www.theglobeandmail.com/politics/article-health-care-access-pandemic/>

⁶ CFNU. Viewpoints Research Survey Results Summary, 2022.

⁷ https://nursesunions.ca/wpcontent/uploads/2022/02/Viewpoints_Survey_Results_2022_January_EN_FINAL-1.pdf

⁷ Public Safety Canada. Supporting Canada's Public Safety Personnel: An Action Plan on Post-Traumatic Stress Injuries. 2019. <https://www.publicsafety.gc.ca/cnt/rsrscs/pblctns/2019-ctn-pln-ptsi/index-en.aspx>

⁸ <https://www.canada.ca/en/health-canada/services/health-care-system/health-human-resources/strategy.html>

⁹ Bourgeault, I. A path to improved health workforce planning, policy and management in Canada. https://www.policyschool.ca/wp-content/uploads/2021/12/HC5_Improved-Health-Care_Bourgeault.pdf