



Investing in the Canadian Nursing Workforce Post Pandemic: A Call to Action

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An RSC Policy Briefing

This Executive Summary is from a forthcoming RSC Policy Briefing that is currently undergoing peer review. This version is being published ahead of final peer review due to the urgency of the recommendations. A peer-reviewed policy briefing will be made available as soon as that process has been completed.

“While the nursing labour market in Canada has been under stress for decades, the COVID-19 pandemic highlights critical areas within our health systems that continue to contribute to our inability to adequately plan for, recruit, retain and protect a pillar of our health system—our nursing workforce.

Despite many ongoing challenges nurses demonstrated dedicated leadership in the pandemic response, and many lessons have been learned. In this report, our esteemed panel of nursing experts in Canada have brought together provincial, national, and international learnings and identified key areas we must consider to build a strong national nursing workforce.

Advancing Canada’s response to ensuring a strong nursing workforce can greatly benefit from recognizing the importance of global and regional strategies, the role nursing leaders play in leading quality improvement, utilizing the evidence and lessons from research and innovation for removing barriers, and how the health system benefits from strong nurse leaders particularly when dealing with surges in health care, such as during the COVID pandemic.”

– Dr. Gail Tomblin Murphy, Chair

Nurses (Registered Nurses, Nurse Practitioners, Licensed Practical Nurses, Registered Practical Nurses) represent the highest proportion of health workers globally, playing an essential role in the ongoing fight against COVID-19. Nurses’ response to the pandemic has been unprecedented. Yet, the pandemic has magnified multiple vulnerabilities within Canada’s health care system including on its fragile nursing workforce—many longstanding. The result, now, is a severe nursing shortage.

The forthcoming review generates evidence to support key recommendations to address the current and the longstanding nursing shortage and the nursing exodus in Canada.

We examined the following questions:

- Why do nurses leave the profession?
- What approaches have been recommended or implemented to support and retain the nursing workforce?

In brief we completed:

- A trend analysis of peer reviewed articles and identified conditions that support retention

and exacerbate leaving the profession. A scan of jurisdictional policies and strategies in Canada, Australia, the United States, and the UK that have been implemented or recommended.

- Qualitative analyses of surveys and interviews with frontline nurses pre and during COVID-19, including a targeted case study from Nova Scotia and Saskatchewan.

The factors affecting nursing workforce retention are complex and multi-level in origin. This early release executive summary is intended, given the urgency of the situation, to highlight recommendations to sustain the nursing workforce in Canada and to identify actionable strategies and policies that need immediate attention and action. This is an extraordinarily urgent issue for Canada's healthcare system.

Key Actions

Key actions following from the recommendations that are considered high priority are:

- **Establish a Pan-Canadian nursing human resources strategy and the leadership** to guide sustained efforts in recruitment and retention of a diverse nursing workforce.
- **Establish a National Taskforce to engage nurses in care areas** to support development of planning and policy measures to enhance high-quality and safe working environments for nurses, and to mitigate impacts from current and future pandemics on nursing workforce.
- **Establish a National Coalition of Nursing Experts and Leaders** to guide rapid reviews and policy briefs to inform planning, key policies and actions and a sustained strategy to address ongoing needs related to recruitment and retention, and enhanced work environments for nurses.
- **Establish a Distinction based approach** to align nursing services with the United Declaration on the Rights of Indigenous Peoples and Human Health Rights.

Recommendations

Recommendation 1: Develop a pan-Canadian strategy with a sustained focus to strengthen retention and recruitment of nursing workforce.

Our review shows that factors affecting retention and recruitment of nurses such as job dissatisfaction, job strain, burnout, and the ability to provide quality care are longstanding and were exacerbated during the pandemic. Increasing demand during COVID-19 and strain on resources contributed to the increased pressure on nurses with many leaving or intending to leave the health system. A sustained focus on retention and recruitment needs to occur at a national level in partnership with provinces and territories including considerations around internationally educated and trained nurses. Key areas that require development: a national nursing human resources strategy, an appointed senior nurse leader to lead the strategy which must be inclusive and identify a team of nurses in all roles and sectors to participate in developing such a national nursing human resources strategy in consulting with Indigenous, Black, Asian, and other diverse communities.

Recommendation 2: Address workload, staffing and skills mix, and payment models.

Our synthesis of jurisdictional surveys of Canadian nursing perspectives revealed high rates of intentions to leave that predate COVID-19 and are exacerbated by the demands of the pandemic. Staffing, skills mix, and care delivery models must be designed based on patient complexity, acuity,

stability and predictability of outcomes. Flexible staffing models should be implemented where possible. Implement competitive payment models that enable cross country and cross-sectoral equity among nurses' salaries and benefits, and that favour permanent employment relations. EDI key performance indicators must be integrated at all levels of organizational planning and implementation.

Recommendation 3: Implement systemic processes beyond remuneration that will result in valuation of the nursing workforce.

A key finding of our review was the overwhelming perspective of nurses of being undervalued. Critical nursing perspectives and expertise can only materialize if nurses are represented at planning and decision-making tables both clinically and at the policy-levels. We recommend systemic actions that ensure a robust nursing perspective is present at critical tables and ensures processes for mentorship, supports to enhance professional development capacities for early to experienced nurses, supports overall well-being of nurses, and establishes Indigenous and EDI lenses.

Recommendation 4: Strengthen the voice of nurses in policy and planning at multiple levels.

Nurses are remarkably underrepresented in planning and policy decisions. We recommend the appointment of a Chief Nurse Officer at the federal level, and that structures and processes for nursing input into policy development be established at federal, provincial and territorial levels. We recommend implementing collaborative mechanisms with federal and local union leadership, nursing associations, and nursing councils, and the immediate assumption of conversations with First Nations, Inuit and Métis organizations emphasizing racial equity and justice to strengthen the voice of nursing.

Recommendation 5: Enhance authentic intersectoral partnerships.

Strengthening nursing workforce requires intersectoral partnerships given the gaps we are facing in access to preceptors, mentors, and retiring faculty. Partnerships and collaborative strategies to advance education and professional development with education and employment focus are vital. Key actions include improved engagement between academic, health system and government partners with Canadian Association of Schools of Nursing as one of the key players, and using a distinction based and EDI lens in consultation with Indigenous, Black, Asian, and other communities to guide partnership development.

Recommendation 6: Address EDI, gender equity, and systemic racism and their impact on the workforce.

Addressing Indigenous, EDI, and inequalities in workplace in consultation with Indigenous, Black, Asian, and other communities to develop and implement strategies and key actions; addressing gender inequity in healthcare and among all levels of nursing, addressing compensation, work life balance, structural racism in healthcare, and developing policies that improve conditions through processes led by affected groups and individuals.

Recommendation 7: Implement safe workplace wellness strategies for our nurses—learning from the pandemic.

COVID-19 has revealed vulnerabilities of Canada's health system that affect nursing. We recommend implementing strategies to enhance psychological safety, as well as supportive and safe working environments.

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