



Sustainability & Resilience in the Canadian Health System

## Creating An Environment Where Healthcare Talent Can Thrive

Canada's health system has no shortage of human resource challenges: the threat of burnout and joining 'The Great Resignation;' an increased concern over personal safety; and not enough staffing to balance the number of patients in need. This is why a new research report, from The Partnership for Health System Sustainability and Resilience (PHSSR) in Canada, includes a chapter that investigates the state of workforce planning, task shifting and scopes of practice, and the lessons learned amid COVID-19.

### Canada's Healthcare Workforce in Close-Up

Do we have enough physicians, nurses and other essential allied healthcare professionals? It's a question that's become almost impossible to answer due to insufficient data, which makes planning difficult for government and healthcare institutions alike. A better question might be, "Do we have the right number of the right people in the right places?" The research found the balance of physicians and critical team members poorly distributed across the country, with noticeable gaps in remote and Northern rural areas.

The COVID-19 pandemic brought near-constant headlines that highlighted other healthcare workforce issues, ranging from wages and benefits to vacancy rates at record levels. Add to that the sometimes-controversial move to expand the scope of practice, violence targeted at understaffed teams and the barriers to recruitment and retention become clear.

### Toward an Improved Healthcare Worker Experience

If people are truly healthcare institutions' greatest assets, policymakers and leaders need to:



#### Standardize healthcare workforce data collection practices

We need a consistent approach to gathering and analyzing accurate and up-to-date information such as healthcare worker demographics, employment type, workplace setting, vacancies, and wages to close the talent gaps that are widening. The shortage of unregulated care providers (e.g., personal support workers/care aides) is a good example of where a void of actionable data needs to be filled. Robust data collection is the only way to set realistic targets and track progress in hiring and developing the right staffing levels across Canada.



#### Cultivate healthcare workplaces that protect and support staff mental and physical well-being

The time has come to address longstanding issues of harassment and violence that were only exacerbated amid the pandemic. This needs to be coupled with resources that can help physicians, nurses and allied healthcare professionals get in front of stress and work-life balance challenges. People also work better when they feel they receive adequate pay, benefits, educational opportunities and other conditions conducive to a positive employee experience.



#### Strengthen education pathways to develop a pipeline of healthcare talent

To support more equitable and culturally safe healthcare for all populations, we need to invest in education pathways for Indigenous Peoples and those from racialized and low-income communities to join the health workforce.



#### Move to expanded or full scope of practice to deliver care more efficiently, particularly in primary and community care settings

When the right supports are in place, reimagining the distribution of clinical tasks could boost job satisfaction and enhance the overall delivery of care. It's time to take a closer look at the potential for task shifting and expanded scope of practice to make a positive contribution to the future of health in Canada.

There are **seven domains** researched in this study:

- GOVERNANCE
- TECHNOLOGY
- SOCIAL
- FINANCE
- & MEDICINE
- DETERMINANTS
- **WORKFORCE**
- SERVICE DELIVERY
- ENVIRONMENT

Learn more about the research findings and key recommendations by reading the full report, *Sustainability and Resilience in the Canadian Health System*, or contact the PHSSR at [PHSSR@hkstrategies.ca](mailto:PHSSR@hkstrategies.ca)

