

The COVID-19 pandemic has exposed deep cracks in Canada's health care system. For too long, elected officials have socially distanced themselves from these problems. This election, it's crucial we invest in nurses and health care.

The nursing shortage has reached a critical level. Over 100,000 vacancies were reported in the health care and social assistance sector at the end of 2020 – up by 56% from the previous year. Many nurse vacancies remain unfilled for 90 days or more.

Staffing levels are dangerously low across the entire country. If this health care crisis continues, it means fewer emergency beds, cancelled life-saving surgeries and less support for long-term care – among many other issues.

Our strained health care system needs urgent action, including investing in more nurses, fixing seniors' care, and finally ensuring everyone can get the medications they need through universal pharmacare.

It's time to fix the cracks threatening our health care. This is nurses' platform for getting Canada's health care system back on track.

100,000
Vacancies at the end of 2020



SUPPORTING NURSES

Nurses in Canada continue to endure crushing workloads, a lack of adequate and appropriate personal protective equipment, and pervasive workplace violence. It is taking a punishing toll on nurses' mental and physical well-being and puts the future of Canada's nursing workforce in jeopardy.

A national study revealed that 83% of nurses said the regular core health staff in their workplace was insufficient to meet patient needs – and that was before the pandemic. In the same study, over 90% of nurses reported symptoms of burnout. Canadian nurses' average weekly overtime hours increased by 78% during the pandemic.

In yet another national study pre-dating the pandemic, a staggering 60% of nurses said they intended to leave their jobs within the next year. Working conditions have only deteriorated further since the pandemic, undoubtedly driving more nurses out of the profession.

In this federal election, Canada urgently needs champions for a **supporting nurses action plan** aimed at retaining the current workforce and ensuring enough nurses are hired to match patient needs going forward. Such a plan would include, but not be limited to, the following:

Average increase in weekly

overtime hours

- A national moratorium on reducing nursing hours in all health sectors;
- Federal funding for hiring more nurses and innovative retention and recruitment programs;
- A federal health workforce agency to guide hiring appropriate and sufficient health care workers through enhanced data;
- Reinstating a federal chief nursing officer to advocate for strong nursing policy in Canada and abroad;
- A federal worker safety agency to make decisions on guidelines, policies and strategies to keep health workers safe;
- Maintaining and effectively managing a national stockpile of personal protective equipment - with bolstered domestic supply chains; and
- Deterring violence against health care workers by legislating stiffer penalties and funding violence-prevention infrastructure in health care facilities across the country.

PHARMACARE

A national, universal, public and single-payer pharmacare program is essential for strengthening the health and well-being of people in Canada.

It is well established that such a system would not only relieve heavy health and financial burdens for millions of people in Canada – many more of whom lost coverage during the pandemic – it would save billions of dollars each year through the negotiating power of a single national buyer.

The Advisory Council on the Implementation of National Pharmacare laid out in its final report a clear path to bring this vital program into place. Unfortunately, Canada has failed to act on its findings and fallen behind on its modest timelines.

Nurses are calling for an accelerated implementation timeline going forward. Based on the report's recommendations, we believe that the following actions must be taken:

2022

Launching national pharmacare

- Fully establishing the Canadian Drug Agency in 2022, which would assess prescription drugs and negotiate prices for a national formulary;
- Introducing federal legislation in 2022, based on negotiations with the provincial and territorial governments;
- Launching national pharmacare in 2022 by providing universal coverage for a list of essential medicines; and
- Rolling out a comprehensive formulary by January 1, 2025, instead of 2027, to ensure it is fully implemented within a future government's mandate.



SENIORS' CARE

For years, Canada's nurses have sounded the alarm on the state of seniors' care in this country, demanding federal support for safe staffing in long-term care and home care to meet Canada's current and projected need.

Tragically, it took a global pandemic and the avoidable deaths of thousands of seniors to finally shine a light on this long-standing crisis. No longer can we turn a blind eye to the state of care for our parents and grandparents, or ignore the urgent need for strong federal leadership.

Nurses urge all political parties to commit sufficient resources at the federal level toward bold and comprehensive changes to our seniors' care. We believe the following pledges would set us on the right course toward correcting the injustices we witnessed over the course of the pandemic:



- Federal seniors' care legislation to bring long-term care into the public system and regulate it in accordance with the principles of the Canada Health Act;
- A pan-Canadian framework of enforceable national standards for long-term care, creating conditions for obtaining federal funding;
- Eliminating for-profit business from the long-term care sector, with a moratorium on private sector ownership going forward and the gradual transition of existing long-term care facilities from private to public (or not-for-profit) ownership;
- Requiring appropriate health and safety protections for workers, and staffing levels permitting a minimum of 4.5 hours of direct care per resident each day, with a minimum of 45% of this care provided by licensed nurses and at least one RN per shift. Where resident acuity is higher, staffing should be increased accordingly;
- Providing full-time jobs, and matching wages and benefits for long-term care workers to the value of the work they perform; and
- Administering long-term care insurance (LTI) through the Canada Pension Plan and Quebec Pension Plan – which would support a continuum of services from home care to institutional long-term care – as similarly exists in Germany, Japan and the Netherlands. For those with a limited work history, an LTC benefit would be added to Old Age Security/Guaranteed Income Supplement payments.

FEDERAL HEALTH FUNDING

Strong federal funding is crucial to a sustainable health care system that can meet current and future challenges. As the annual Parliamentary Budget Officer report recently pointed out, Canada Health Transfer (CHT) payments cannot keep up with rising health care spending in this country.

Canada's nurses have long called for a minimum increase to the CHT of 5.2% year-over-year to match population growth, aging, inflation and income growth. The current formula provides a minimum 3% increase and matches nominal GDP growth. This currently amounts to roughly 22% of the overall cost of delivering health care.

Premiers have more recently called for the federal government to increase its share of health care funding to 35% of the total costs and to maintain spending at that level.

Canada's nurses agree that the federal government has a responsibility to increase its share of health care spending in order to sustain our public health care system, and that all political parties should commit to the following actions:

- Funding a minimum of 35% of total health care costs currently covered under the CHT;
- Ensuring these funds are used transparently by provincial and territorial governments, so that they are spent exclusively on public health care needs.

CHILD CARE

A national and universal early-learning and child care program is a crucial measure for Canada's nurses and all people in Canada. In a pandemic that has decimated women's labour market participation, the imperative has never been more urgent to finally provide to all families equal access to affordable, inclusive, flexible, culturally safe and high-quality services.

Nurses support the implementation of such a program with the following requirements:

- Strong federal funding that, at a minimum, matches the \$30 billion over five years, committed in Budget 2021, with a minimum of \$9.2 billion per year ongoing - including equitable funding and support for Indigenous earlylearning and child care programs;
- Ensuring that parents pay no more than \$10/day by 2025-2026;
- Guaranteeing that any further development of early-learning and child care services be public and non-profit only; and
- The provision of decent, competitive wages and benefits with incentives for further education for all early-learning and child care educators.

\$10/DAY Child care by 2026

INDIGENOUS RECONCILIATION AND CLIMATE CHANGE

In addition to these issues – which have been exacerbated for our members by the pandemic – it would be remiss not to highlight the urgency behind two other crucial issues for Canada heading into a federal election: Indigenous reconciliation and climate change.

The recent discovery of mass graves of Indigenous children on the grounds of former residential schools has awoken many more people in this country to our genocidal legacy, and the generations of trauma and unimaginable horrors that have been inflicted upon Indigenous peoples. It has also shone a light on our failure to prioritize implementation of the Truth and Reconciliation Commission's recommendations.

Each of the commission's recommendations must be swiftly implemented, and *Joyce's Principle* – seeking to guarantee equitable access to all health and social services for Indigenous peoples, that is free from discrimination and which respects Indigenous peoples' traditional and living knowledge in all aspects of health – must be fully embraced by our governments and health care institutions.

As we recently witnessed, record-breaking heat waves and destructive wildfires mean the climate crisis is here, and we need to both adapt to it and do everything in our power to mitigate further emissions. Canada should adopt a health care lens in tackling this existential threat, and needs to account for the disproportionate impact climate change will have on the health of Indigenous peoples and lower-income communities.

There are exciting opportunities that stem from these multifaceted challenges. We can build a future in which workers transition to green sustainable jobs, creating healthier communities that centre around providing equitable care, reconciliation with Indigenous peoples, and decent well-paying jobs.

Nurses are ready to take on these challenges with you in the months ahead.

JOYCE'S PRINCIPLE

Seeking to guarantee equitable access to all health and social services for Indigenous peoples



WE ARE CANADA'S NURSES

We represent about 200,000 frontline care providers and nursing students working in hospitals, long-term care facilities, community health care and our homes. We speak to all levels of government, other health care stakeholders and the public about evidence-based policy options to improve patient care, working conditions and our public health care system.

From coast to coast to coast, we acknowledge the ancestral and unceded territory of all the Inuit, Métis and First Nations peoples that call this land home. The CFNU is located on the traditional unceded territory of the Algonquin Anishnaabeg People. As settlers and visitors, we acknowledge the traditional custodianship of these lands, which we each call home. We do this to reaffirm our commitment and responsibility in building on relationships between nations, working towards healing the wounds of colonialism, and improving our own understanding of local Indigenous peoples and their cultures.

