



NO SHORTCUTS TO PATIENT SAFETY



Nursing is a safety-critical workforce.



CFNU

The Canadian Federation of Nurses Unions (CFNU) is Canada's largest nurses' organization, representing frontline unionized nurses and nursing students in every sector of health care – from home care and LTC to community and acute care – and advocating on key priorities to strengthen public health care across the country. We are proud to advocate for our members and promote the nursing profession on the national level, and we work tirelessly to protect the quality of health care for our patients and our universal public health care system.



The lives of patients are in the hands of hundreds of thousands of nurses across the country – in acute care, home care, long-term care and community health – 24 hours a day, 7 days a week.

Nursing is a safety-critical workforce. This means that patients' lives and health are directly impacted by the actions of nurses, and delays and mistakes can result in serious injury or death. Nursing is not currently being treated as a safety-critical workforce, which is putting patients at risk. Time and again, nurses have been asked to do more with less. As a result, Canada's current health care system does not allow nurses to adequately perform their jobs in a way that is safe for themselves and their patients.

Canada's health care system continues to face a crisis-level nursing workforce shortage with far-reaching consequences. The population of Canada is aging, and medical complexity is rising, driving an ever-increasing demand for health care. Nurses are expected to manage more patients, take on excessive overtime and work longer shifts, all with fewer resources and unsustainable patient loads. They are spread so thin that cracks are appearing and patients are falling through. The Canadian Institute for Health Information (CIHI) reported that 1 in 17 hospital stays results in at least one patient safety incident such as a medication error, fall or infection (CIHI, 2024). Many of these incidents are preventable by adequately equipping nurses to do their jobs. Neglecting to support nurses is causing direct harm to patients, leading to a loss of trust in the health care system and in those who lead it.

Nurses are crucial for keeping patients safe and helping them return to good health. They are trained to expertly monitor patients and intervene with timely critical treatments. This essential skill requires attention, time and professional judgement carefully honed through years of experience and mentorship.

Nurses are not being provided with the conditions necessary to use their skills in the way they know that their patients need. This causes moral injury, a form of psychological distress from being forced to act against deeply held professional values, which leads to job dissatisfaction and nurses leaving the profession. In our annual survey of nurses across Canada, 20% are looking to change jobs, 10% plan to leave the profession and another 7% plan to retire, all within the next year (CFNU, 2025).

Unsafe staffing leads to higher mortality rates, more readmissions and longer hospital stays, driving up health care costs and costing thousands of lives per year (Lasater, 2021). Safe nurse-patient ratios legislation has the power to reverse these harms. It is key to keeping patients safe, promoting quick recovery and preventing further harm. Healthy people are more productive and are less costly to the health care system over time. To achieve safe and sustainable staffing, we need to create healthy and supportive work environments with reasonable workloads that will attract and retain nurses.

Nurses also need support to provide culturally safe care for everyone accessing the health care system. Psychological, spiritual and physical harms from racism, in particular, anti-Indigenous racism, puts patients in harm's way and undermines their right to safe universal health care. Patient safety must include safety for all patients in all domains of care. Nurses need access to cultural safety training and institutional policies that support the practice of culturally safe care.

The next generation of nurses is also learning under immense strain, as much of their education takes place in overburdened direct care environments. This creates a negative first impression of the career, leading to high rates of attrition during school and early-career periods (Alamerew, 2024). Many also struggle financially to complete their education in this high-demand field. Government workforce strategies must better support students' financial needs to meet workforce demands. Novice nurses need educational environments that support their learning to gain confidence in their skills before entering the workforce.

Private for-profit health care services pose health and safety risks to patients as the profit motive directly competes with the directive to provide safe care. The COVID-19 pandemic highlighted shortcomings in private for-profit LTC homes in Canada, which were found to have lower staffing levels, fewer care hours delivered to residents and consequently higher mortality rates (Akhtar-Danesh, 2022; Stall, 2020). Furthermore, the rapidly increasing use of private for-profit nurse staffing agencies poses several health and safety concerns for patients, including disruptions in continuity of care, inconsistent safety training and onboarding procedures, insufficient or nonexistent accountability structures and diversion of funds away from a safe, reliable nursing workforce. The infiltration of private companies within the public health care system must not continue as it poses safety risks for patients and compromises the quality and accountability that they depend on.

Imagine a world where there are enough well-equipped nurses to provide safe, timely and complete care for everyone, including you and your loved ones.

IN THIS WORLD...

- **THE NURSE ADMINISTERING YOUR CHILD'S MEDICATIONS HAS HAD A FULL NIGHT'S SLEEP.**
- **THE NURSE CHANGING YOUR AGEING PARENT'S BED HAS THE TIME TO NOTICE AND INTERVENE ON EARLY SIGNS OF FALL RISK, PREVENTING A BROKEN SHOULDER.**
- **NURSING STAFF ATTENDING TO AN INDIGENOUS ELDER FROM YOUR COMMUNITY HAS THE TIME, TRAINING AND RESOURCES TO PROVIDE COMPASSIONATE AND CULTURALLY SAFE END-OF-LIFE CARE.**
- **YOUR NEIGHBOUR WHO ENDED UP IN THE INTENSIVE CARE UNIT FOLLOWING AN ACCIDENT HAS A DEDICATED NURSE READY TO RESPOND TO EVERY CHANGE IN VITAL SIGNS, SAVING THEIR LIFE.**

A more reliable health care system starts with concrete actions towards addressing unsafe care conditions through supporting nurses in carrying out their safety-critical roles. The CFNU wants to work with you to build partnerships towards this vision of a better, safer future for all nurses and all Canadians.

Sincerely,

Linda Silas, President – Canadian Federation of Nurses Unions (CFNU)

Angela Preocanin, Secretary-Treasurer – Canadian Federation of Nurses Unions (CFNU)

Adriane Gear, President – British Columbia Nurses' Union (BCNU)

Tristan Newby, Vice-President – British Columbia Nurses' Union (BCNU)

Heather Smith, President – United Nurses of Alberta (UNA)

Danielle Larivee, Vice-President – United Nurses of Alberta (UNA)

Bryce Boynton, President – Saskatchewan Union of Nurses (SUN)

Darlene Jackson, President – Manitoba Nurses Union (MNU)

Erin Ariss, President – Ontario Nurses' Association (ONA)

Alan Warrington, Vice-President – Ontario Nurses' Association (ONA)

Paula Doucet, President – New Brunswick Nurses Union (NBNU)

Janet Hazelton, President – Nova Scotia Nurses' Union (NSNU)

Barbara Brookins, President – Prince Edward Island Nurses' Union (PEINU)

Yvette Coffey, President – Registered Nurses' Union Newfoundland and Labrador (RNUNL)

Opeyemi Kehinde, President – Canadian Nursing Students' Association (CNSA)

"The conditions of work are the conditions of care."

– Dr. Pat Armstrong





“Nurses play a critical and vital role in ensuring the safety of older adults receiving interdisciplinary care, that must be recognized and respected. Their training and expertise enable them to identify risk factors for illness and injury early, allowing for timely interventions that help prevent adverse events and frailty.”

– Dr. Samir Sinha, MD, DPhil, FRCPC, FRSM, FCAHS, AGSF

YOU HAVE THE RESPONSIBILITY TO ENSURE HEALTH CARE IS SAFE.

To do so, you must:

Respect the fact that nursing is a safety-critical workforce.

- Patient lives are in nurses' hands. Invest in health care to ensure nurses and health care providers have enough human and physical resources to complete their jobs safely.
- Support the development of a patient safety charter that guarantees patients receive the care they need.
- Support contracts that provide nurses with compensation and working conditions commensurate with their value to society and their safety-critical role.

Mandate safe nurse-patient ratios.

- Work with nurses' unions to define and implement safe minimum nurse-patient ratios. These policies ensure that there are enough nurses to safely staff health care services. British Columbia and Nova Scotia have begun implementing safe staffing and nurse-patient ratios policies, and several others have taken the first steps. Nurse-patient ratios should be adopted as universal priority policy across the country to protect patient safety.

Support and fund programs to retain experienced, highly skilled nurses.

- Adopt the recommendations in the *Nursing Retention Toolkit* (Health Canada, 2024) and CFNU's *Sustaining Nursing in Canada* report.

Legislate and fund programs that attract and support new nurses, including students and internationally educated nurses.

- Improve financial support for nursing students and trainees, including paid placements (preceptorships), grants, bursaries, remote travel funding and free hospital parking.
- Streamline and standardize the registration processes for internationally educated nurses.
- Support and fund on-the-job mentorship and education programs for nurses.

Legislate safe working hours for nurses.

- Legislate prohibition on mandatory overtime.
- Regulate maximum shift lengths (12 hours recommended), maximum number of 12-hour shifts in a row (4 shifts recommended) and minimum recovery periods between shifts (11 hours recommended).

Decolonize health care and support culturally safe care.

- Acknowledge and act to dismantle structural racism in health care and beyond, including through mandatory cultural safety training for health care professionals.
- Implement Joyce's Principle guaranteeing Indigenous people's right to safe and equitable health care, and Jordan's Principle ensuring that First Nations children do not face gaps, delays or denials in accessing government health services.

Discontinue the use of private nursing agencies and other for-profit health care providers.

- Immediately begin phasing out private for-profit nursing agencies.
- Implement regulations and oversight of private for-profit nursing agencies until they are completely discontinued.
- Implement public models for staffing hard-to-recruit posts.
- Invest in sustainable, universal, single-payer health care.

“In safety-critical organisations a proficient, experienced frontline workforce is key to productivity and managing risk.”

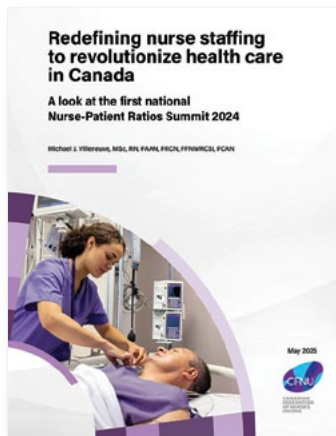
– Prof. Alison Leary, PhD, FRCN, FQICN, MBE

“ICN sees patient safety and nurse staffing as two sides of the same coin.”

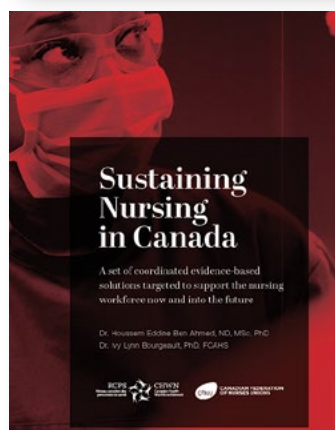
– Howard Catton, CEO, International Council of Nurses (ICN)



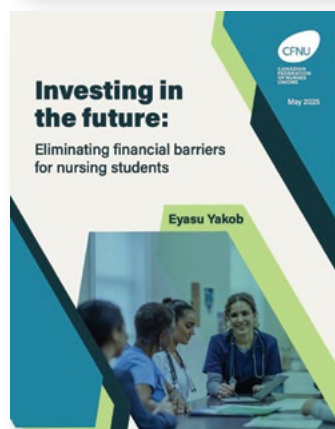
RECENT CFNU REPORTS



**Redefining nurse staffing to revolutionize health care in Canada:
A look at the first national Nurse-Patient Ratios Summit 2024**



Sustaining Nursing in Canada: A set of coordinated evidence-based solutions targeted to support the nursing workforce now and in the future



**Investing in the future:
Eliminating financial barriers for nursing students**



“Nurses are the bedrock of the health care system, and we join our colleagues in calling for enhanced recruitment and retention efforts and improved working conditions. Like all health professionals, nurses should be supported with the resources needed to enable them to provide excellent care in healthy work environments.”

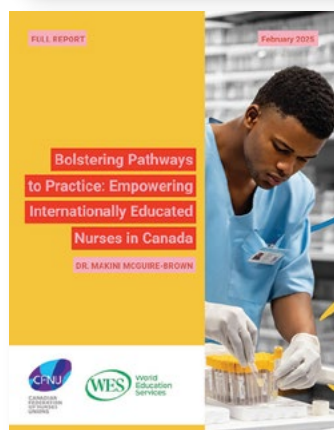
– Dr. Margot Burnell, MD, President, Canadian Medical Association (CMA)

“Everyone contributes to patient safety. Together we must learn and act to create safer care and reduce all forms of health care harm.”

– Jennifer Zelmer, PhD, President and CEO, Healthcare Excellence Canada



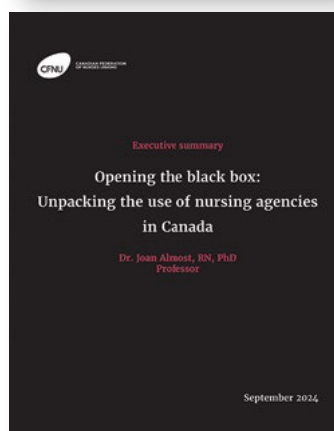
Beyond Equity: Taking Action to Address Indigenous-Specific Racism in Nursing



Bolstering Pathways to Practice: Empowering Internationally Educated Nurses in Canada



Safe Hours Save Lives! Study on Safe Working Hours for Nurses



Opening the black box: Unpacking the use of nursing agencies in Canada





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***“There is not a shortage of nurses,
there is a shortage of people
willing to put up with these
working conditions any longer.”***

– Linda Silas, President of the
Canadian Federation of Nurses Unions (CFNU)

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