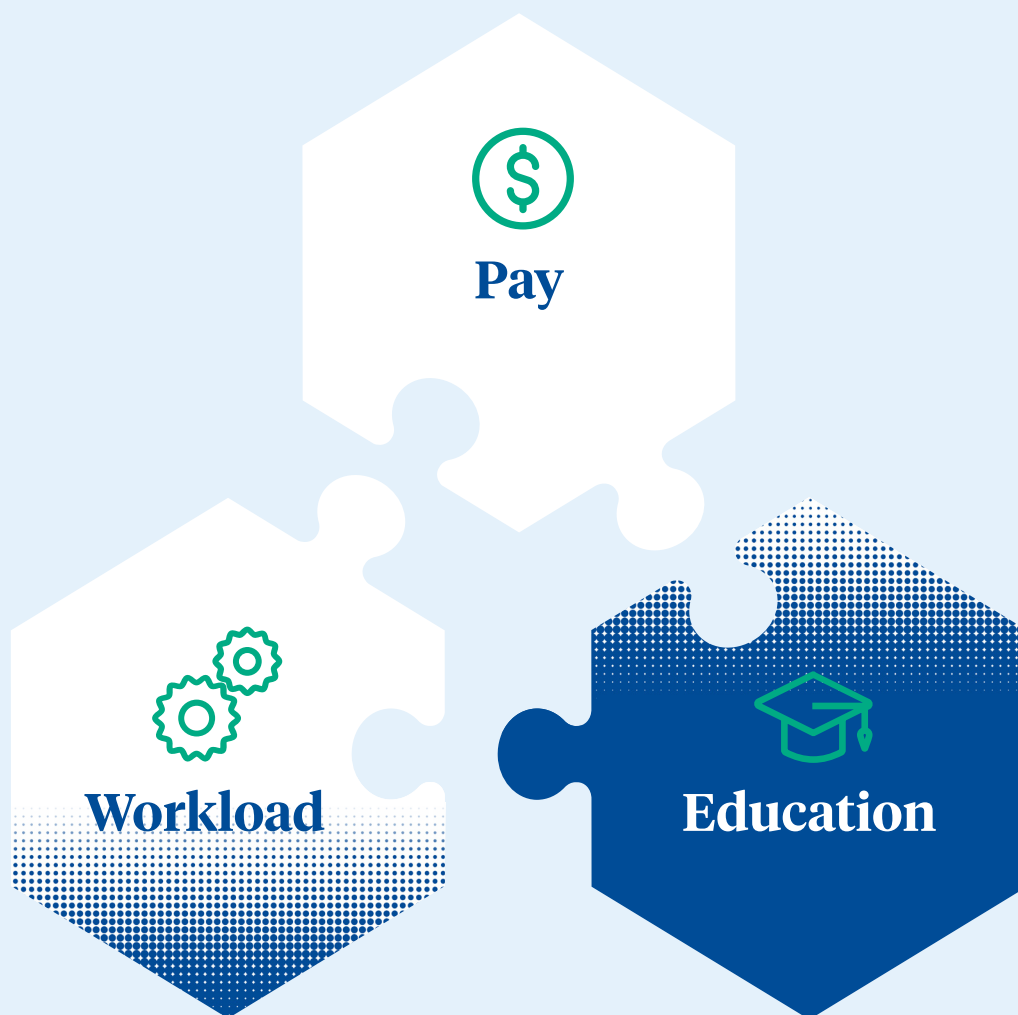


# Solving Ontario's Nursing Recruitment and Retention Puzzle

WeRPN Pre-budget  
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**We RPN**

Registered Practical Nurses  
Association of Ontario

## Solving Ontario's Nursing Recruitment and Retention Puzzle

Nurses are the backbone of our health system. Every day, over 50,000 Registered Practical Nurses (RPNs) combine nursing skill, knowledge, judgement, passion, and compassion to deliver safe, high-quality care to Ontarians. Whether working in hospitals, long-term care homes, mental health services, or home and community care, Ontario's RPNs are on the front lines, consistently demonstrating their commitment to provide the best care possible to their patients, residents, and clients.

Across the health system, and particularly in long-term care, Ontario's RPNs have worked tirelessly to care for and protect Ontario's most vulnerable through the COVID-19 pandemic – often at significant personal sacrifice and risk to their own health, safety, and wellbeing.

Even before COVID-19 was declared a public health emergency in March 2020, there was public consensus that Ontario was facing a nursing shortage. According to a January 2021 Omnibus poll, **95 per cent of Ontarians expressed a desire to see more nurses** hired to meet growing needs, especially for the province's aging population. The global pandemic exacerbated an already looming crisis in the delivery of safe, quality health care in Ontario.

**RPNs stepped up when Ontario needed them most.** Without fail, they have demonstrated true Ontario spirit - Strength. Determination. Compassion. Generosity. Grit. But after nearly two years on the pandemic front lines, RPNs are feeling burnt out – and **as many as 34 per cent of RPNs are considering leaving the profession** as a result. This potential for a “great resignation” of nurses in Ontario should be of significant concern.

To ensure that Ontarians continue to receive safe, high-quality care, we must continue to build up Ontario's nursing workforce. This means retaining those we already have; bringing in new dedicated nurses and ensuring RPNs are recognized for their critical role in our health system and supported to have meaningful and rewarding careers.

Government has already taken important steps toward addressing recruitment and retention in nursing. Investments in initiatives such as the Bridging Educational Grant In Nursing (BEGIN) program, mental health supports for health care workers, the Nursing Program Transformation in Ontario's Colleges, among others, will be critical to revitalizing perceptions that nursing is a desirable, rewarding, and meaningful career.

Now we need the remaining pieces of the recruitment and retention puzzle in place. Pieces that will build on the progress we've made together to rebuild a stronger, sustainable health workforce in the wake of COVID-19.

WeRPN and our members understand the actions that are needed to help move Ontario forward with a bold, Ontario-made solution to strengthen our health system by addressing the existing nursing shortage and preventing future nursing losses. We're eager to share our nursing recruitment and retention solutions and value the opportunity to continue to work in partnership with government to make these recommendations – and your vision for a better more resilient post-pandemic health care system – a reality.

## **RPNs and WeRPN**

In Ontario, nursing is one profession with two categories, registered nurse (RN including Nurse Practitioner) and registered practical nurse (RPN). Not every healthcare intervention requires an RN. RPNs have the knowledge, skill and judgment required to provide safe, quality nursing care in a variety of settings. Notably, RPNs are generally viewed as leaders in the delivery of elder-friendly care in Ontario.

The Registered Practical Nurses Association of Ontario (WeRPN) is the professional voice of 50,000+ RPNs working in the province and the second-largest regulated health professional group in Ontario. For over 20 years, WeRPN has been a trusted advisor to government, offering evidence-based solutions to health system challenges. We have been accountable with the use of public funds through the efficient administration of programs and our support for government-funded initiatives, including the Nursing Education Initiative (NEI) and the newly-launched Recruitment and Retention Incentive (RRI) Program for the retirement home sector. Most recently WeRPN has been chosen by the Ministries of Long-Term Care and Health as a partner for an innovative new program, the BEGIN initiative: Bridging Educational Grant In Nursing. We are eager to continue to work with government to realize the goals of the *More Staff, More Care* pledge and ensure a strong COVID-19 recovery for Ontario.

## **Meeting the Challenge**

There is no greater threat to safe, quality healthcare than a lack of people to deliver that care. For that reason, a bold health human resource strategy must be priority number one for Ontario. We strongly support the Ontario government's commitment to add 27,000 full-time equivalent (FTE) health care providers by 2024-25.

However, to make this a reality, tens of thousands of new staff need to be educated and recruited while we employ strategies to retain existing staff. This cannot happen overnight. There is no easy fix to a decades-long problem.

WeRPN proposes a number of actions government can take, which are outlined below. But first we would like to acknowledge and celebrate the significant commitments made by government to date to incent recruitment and retention of nurses. These include:

- Committing to provide an average of four hours of daily direct care per long-term care resident per day by March 31, 2025;
- Creating the Recruitment & Retention Incentive that provides new and recently hired PSWs and nurses with financial incentives to work in retirement homes;
- Extending the Nursing Education Initiative that provides education grant funding for RNs and RPNs to reimburse fees for conferences, seminars, and workshops; and
- Announcing two critical new programs:
  1. The BEGIN initiative: Bridging Educational Grant In Nursing, jointly offered by the Ministry of Long-Term Care, Ministry of Health and the Registered Practical Nurses Association of Ontario will provide tuition support to PSWs and RPNs so they can bridge to becoming RPNs and RNs respectively
  2. The Nursing Program Transformation in Ontario's Colleges, jointly offered by the Ministry of Long-Term Care, Ministry of Colleges and Universities, and Colleges Ontario, which will increase access to nursing programs at publicly-assisted colleges by adding enrolment spaces in bridging programs and providing financial support to internationally trained nurses to gain the credentials required to work in Ontario.

## The Fundamentals of a Bold Nursing Recruitment and Retention Strategy

There is no single solution that will ensure we have enough nurses in Ontario today and for years to come. Rather, separate but interdependent tactics, relying on and reinforcing each other, must be pursued – all the puzzle pieces put in place.

Delivering on government’s stated objective to enhance the provider experience will remain elusive until this recruitment-retention puzzle is ultimately solved. More importantly, we cannot expand our hospital and long-term care capacity to improve the patient experience without keeping our nurses and adding to their ranks. Fitting the puzzle pieces together, creating a made-in-Ontario approach, will enable the healthcare system to realize an enduring nursing workforce.

## Fair Remuneration

During the worst healthcare crisis facing Ontarians in over 100 years, RPNs were on the frontlines caring for our most vulnerable in all healthcare settings, including high-risk areas impacted by COVID-19, such as long-term care, retirement homes and hospitals. Of course they were not alone – they worked alongside essential front-line providers including personal support workers (PSWs). However, RPNs were excluded from the government’s pandemic pay top-up of \$3/hour awarded to PSWs, leaving many RPNs making a wage that is very close to the colleagues they supervise.

A PSW’s job is demanding and they deserve their pandemic pay increase. However, without a concomitant increase for RPNs, we have exacerbated the existing wage compression problem. Wage compression happens when there are small differences in pay that ignore education, experience, skill level, or seniority. Today we have situations where PSWs earn wages very close to RPNs despite the differences in these areas.

Wage compression leads to employee disengagement that, in turn, results in staff resignations. Often this means losing tenured RPNs in management roles. The pandemic pay top-up was intended to provide additional support and relief to front-line staff, encourage staff to continue to work during the COVID-19 pandemic, and to attract prospective new employees in order to maintain safe staffing levels and operations. However, it may have the unintended consequence of pushing RPNs to leave the profession, undermining the government’s recent major investments in recruitment and retention.

Our recommendations would address this imbalance while ensuring RPNs remain fairly compensated in the future, to ensure Ontarians can rely on an adequate nursing workforce to provide the care they need.

### Recommendation 1

#### **Make permanent the pandemic pay top-up for PSWs and extend the \$3/hour pandemic pay to RPNs retroactively.**

This action is critically important to RPNs. Immediately awarding RPNs the \$3/hour top-up and making it retroactive is a necessary first step towards easing the wage compression issue.

### Recommendation 2

#### **Establish a provincial minimum wage for RPNs that is appropriately proportioned to RNs.**

Wage compression isn’t the only challenge facing nurses – differential compensation across different areas of the health system, like hospital, long-term care, and home care makes it challenging to attract nurses to care for some of our most vulnerable citizens. A provincial minimum wage for RPNs that is appropriately proportional to an RN wage would help address this imbalance.



**Recommendation 3****Increase the annual investment in the Recruitment & Retention Incentive (RRI) program for retirement homes.**

First announced in the 2021 Budget and administered by WeRPN, the RRI provides an incentive payment for new and recently-hired nurses and PSWs who commit to a minimum time period of work in an eligible retirement home. The program has been significantly over-subscribed due to its popularity with retirement homes and needs additional support to meet demand. **Budget Estimate \$2.9M**

**Workload Standards**

The COVID-19 stretched front-line workers who were already over-stretched. In a recent survey, 71 per cent of RPNs reported having experienced a breaking point at their job during the pandemic; 83 per cent felt like their mental health had been adversely affected by their work; and, even more alarmingly, 67 per cent said they didn't have adequate mental health support to face the next wave of COVID-19. One in three nurses (34 per cent) are considering leaving this critical profession.

Going forward, there is an opportunity to rebuild a better health system. The government's recent investment in mental health supports for front-line health workers is a step in the right direction. But to ensure meaningful, long-lasting change, we need to tackle nursing workloads.

Optimizing RPN staffing is an effective solution to the delivery of safe quality care. Matching care provider competencies with patient and resident needs is key to ensuring a manageable nurse workload while creating a work environment that is conducive to attracting and retaining staff. WeRPN excels at developing optimal skill-mix models with a focus on health outcomes (e.g. mortality rates, medication errors, wound infections, pressure ulcers, pneumonia), evidence-based solutions and collaborative approaches. The recommendations below draw on this expertise – and the insights of our members working at the bedside – and would represent meaningful change to relieve pressure on nurses and improve patient care.

**Recommendation 4****Legislating staffing and workload standards that promote a culture of safety for the patient, resident and nurse.**

The government's Long-Term Care Staffing Study Advisory Group acknowledged that staffing issues are complex and systemic in nature. They recommended ensuring workload and working conditions get better to retain staff and improve the conditions for care, and generally making long-term care homes a better place to live and work.

**Recommendation 5****Move to 75% full-time positions in the Long-term Care and Home and Community Care sectors.**

Only 39% of RPNs work full time; 45% of RPNs work part time and 16% work 'casual.' Approximately 30% of registered nurses (RNs) and RPNs working in long-term care hold two or more jobs in order to earn a full-time salary-equivalent. This is less than ideal for health workers and, as COVID-19 has shown us, multiple workplaces create infection control risks for residents.



## Education Supports

Education is critical to nursing retention and recruitment – it grows new nurses, develops specialized expertise to enhance patient care, allows nurses to bridge from one category to another, and ensures nurses stay current with the latest advances and best practices in patient care. It can open career pathways for providers and improve the quality of care provided to Ontario patients. Supports for nursing education, including continuing education, increase nursing ranks while making the profession more attractive to keep the nurses we have.

Recent announcements about investing in tuition reimbursement, continuing education grants, and opening additional seats in college education programs are important steps toward fully leveraging this critical recruitment and retention tool. However, there are final elements to be put in place that are key to ensuring these investments result in the outcomes government intends.

### Recommendation 6

#### **Streamline the education process from RPN to RN to grow into the new role faster.**

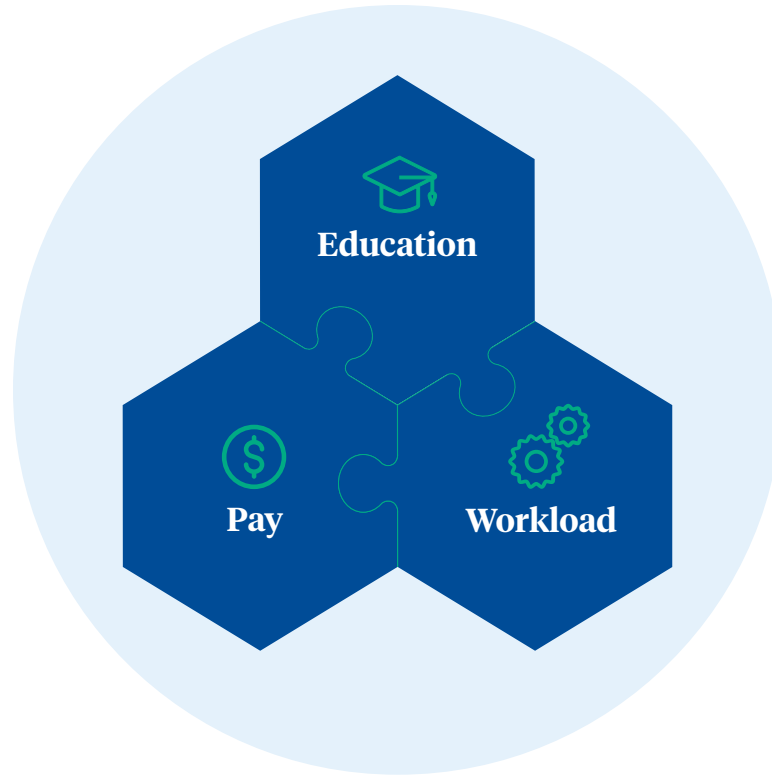
RPNs already have valuable skills, knowledge, and experiences that can be leveraged to streamline their educational requirements to practice as an RN in less time than it would take to complete the traditional BScN pathway. Beyond bringing RNs on-stream faster, this would also reduce tuition reimbursement costs for government.

### Recommendation 7

#### **Invest in a Preceptorship Incentive Program (PIP) for RPNs.**

The role of preceptor is to provide guidance to a student entering the practice setting to successfully integrate nursing theory into practice. Without taking steps to ensure Ontario has enough preceptors to provide nursing students with critical hands-on learning, government's investments in expanding nursing education risk failure.

Ontario Colleges produce outstanding RPN graduates but often struggle to find enough practice sites and preceptors for their RPN students. We need an incentive program to encourage RPNs to serve as preceptors. **Budget Estimate \$1M/year**



There is no solving Ontario's health human resource crisis in nursing unless and until all the fundamentals of recruitment and retention – fair remuneration, workload standards, and education supports – are in place. Placing only one piece of the puzzle while ignoring the others will not get the result government is looking for.

WeRPN's budget recommendations support the government's health human resource goals by enhancing the recruitment and retention of nurses at a time when they are so desperately needed. We remain committed to working with government and our health system partners to ensure Ontario emerges, post-COVID-19, with a stronger, better-integrated and sustainable health system.

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**Dianne Martin**  
CEO, WeRPN

416-617-8092  
dmartin@werpn.com

#### **About WeRPN**

Founded in 1958, WeRPN is the voice of registered practical nursing in Ontario. There are over 50,000 RPNs working in Ontario, playing a vital role in the province's health care system. We champion the critical role of RPNs and we do this by advancing expertise, driving evidence, advocating for and leading in the delivery of high quality care across the continuum of care.