



The State of Nursing in Ontario: A 2022 Review

Findings prepared by the Registered
Practical Nurses Association of Ontario
(WeRPN)

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Registered Practical Nurses
Association of Ontario



About WeRPN

The Registered Practical Nurses Association of Ontario (WeRPN) represents the professional voices of over 55,000 registered practical nurses (RPNs) across the province. WeRPN works closely with its members and the healthcare community to support and advocate for the concerns of Ontario's RPNs.

About this study

In May 2022, WeRPN conducted a survey to gather insights on the current state of nursing in Ontario and the challenges facing the community. More than 760 RPNs across all sectors, including Long-term Care and Home and Community Care, participated from across the province. This research study is a follow-up initiative to a December 2020 poll that established benchmarks in the profession in the midst of the global COVID-19 pandemic.

Methodology

From May 1 to 9, 2022, an online survey was conducted among 762 Ontario registered practical nurses working across all sectors of healthcare by WeRPN. For comparison purposes only, the sample plan would carry a margin of error of +/- 4 percentage points, 19 times out of 20. Discrepancies in or between totals are due to rounding.

Abstract

This study, commissioned by WeRPN, examined several factors currently impacting the nursing profession in Ontario. It had a unique vantage point of comparing present-day realities in nursing to research on what nurses had experienced two years ago, at the height of the COVID-19 pandemic, which was arguably one of the most strenuous periods for this profession in recent history. The findings from this research reflect a worsening situation today for the vast majority of nurses and growing concern for the quality of care that Ontarians are receiving as a result, within provincial healthcare systems. Key conclusions from this study include the following: 1) Unsafe workloads are being normalized in Ontario's healthcare sector, with RPNs being assigned more responsibilities, working more unpaid overtime hours, with stagnating wages, and increased patient-to-nurse ratios; 2) A large majority of nurses are experiencing moral distress and do not feel like they are able to provide adequate care due to lack of available time and resources; and 3) In the midst of a critical ongoing nursing shortage, the profession is at risk of potentially losing close to half of its nurses, who are stressed both mentally and financially, and are considering other options. Instead of seeing marked improvements for the profession as we move through the pandemic and its impact on nursing, statistics from this research indicate the opposite. They present cause for alarm and a need to seek immediate solutions urgently.



The State of Nursing in Ontario: A 2022 Review

Summary of Top Research Findings

WeRPN undertook a study in May 2022, surveying registered practical nurses across Ontario in order to keep a pulse on the state of this profession. Top findings from this research are presented below.

1. Unsafe workloads are being normalized for nurses in Ontario and it is impacting patient care

Back in 2020, 90 per cent of nurses reported that their workloads had increased since the start of the COVID-19 pandemic. Today 93 per cent of nurses say their workload has continued to increase over the past two to three years. The challenge with this circumstance, as the research findings indicate, is that patient care is being compromised.

Specifically:

- 68 per cent of nurses surveyed say they do not have the time or resources available to them to provide adequate care to their patients
- 66 per cent of nurses say they have had to take on more patients per nurse due to the ongoing nursing shortage, while 87 per cent report taking on more responsibilities in their role
- 4 in 5 nurses (79 per cent) have experienced moral distress as a result of their job as an RPN over the last two to three years. In this study, moral distress was identified as: An emotional state arising from situations where nurses feel that the ethically correct action to take differs from what they are tasked to do. Alarmingly, this figure has risen considerably from 68 per cent since December 2020

In their own words
(direct quotes from
survey respondents):

“I’m an RPN taking care of patients’ epidurals and intrathecal. While this is not in my personal scope of practice, they say it’s fine because, ‘You watched a video.’”

“Having to take responsibility for unregulated healthcare workers who received a 6-week course is one reason I chose to retire. It’s too much.”

“As an RPN, I’m doing more than one role, helping with PSW work, the dining room, reception, on top of RPN duties: I medicate 45 patients in my shift. It’s too much — all of them have many geriatric medications, puffers, narcotics, insulin. On top of that, the treatments, calls and handling emergencies. It’s a lot for just one nurse.”





2. Working conditions for nurses are a growing cause for concern

An overwhelming 88 per cent of nurses report being directly impacted by staffing shortages, with many facing added stresses and increased isolation.

Specifically:

- 7 in 10 nurses (69 per cent) say they have had to work more hours to cover staffing shortages, including 4 in 10 nurses (39 per cent) working unpaid overtime hours at the end of their shifts
- 6 in 10 nurses (59 per cent) say their mental health has gotten worse directly due to the stresses of staffing issues
- Nearly half of all respondents (47 per cent) report having to work in more isolated circumstances with less interactions with colleagues
- 45 per cent also say they have less time to build relationships with colleagues at work
- To address these issues, survey respondents noted the following supports that they are not receiving at the moment: 94 per cent identified improved wages, 83 per cent are advocating for proper staffing levels and 65 per cent want to see standardized workloads for nurses

In their own words
(direct quotes from
survey respondents):

"I am a director of care RPN. I cover shifts for my staff when they are short. For example: I worked last week from Monday to Friday, 8am-5pm. Then on the weekend, a 16-hour Saturday and 16-hour Sunday (nights and evenings). This equals four shifts in just two days — a total of 77 hours in one week. I was so tired, my legs were spasming, and still are."

"The expectation is to do more than is humanly possible, throughout the shift, for every shift. And I constantly feel pressure to stay longer hours, with the guilt of not supporting the team if you don't pitch in to do more, working through breaks, starting early and leaving late, and not being compensated for that. There is an overall lack of understanding and respect for an RPN's work."

"I feel like we have to constantly rush residents and cut corners to get everything 'done' and decide between taking breaks and completing tasks for every shift."

**In their own words
(direct quotes from
survey respondents):**

“This work is mentally and physically taxing to the point that I am working towards changing careers. My job is so unsafe. I can’t risk my life anymore.”

“I don’t have enough time to assess or to listen to my patients. In the emergency room, we have to move fast. Most of the time, for 12-hour shifts, I have only one 45-minute break. I don’t have time to drink or go to the bathroom because I have to constantly check my patient chart and attend to upcoming new patients. I wish I could have more time to look after patients more thoroughly.”

“Honestly, no one should be surprised that RPNs are leaving. It is not worth the pay for so much work that never ends. And this job could not only make me sick, but potentially also my family.”



3. Nursing retention: Statistics point to alarming, imminent declines

According to alarming study findings, the province has the potential to lose half its RPN workforce. Nearly 1 in 2 RPNs (47 per cent) are actively considering leaving this critical profession. This figure jumped significantly from 34 per cent in 2020. Additionally, 1 in 3 RPNs working in long-term care say they will leave the sector. The nursing shortage is making matters worse. Seventy-one (71) per cent of respondents impacted revealed there is a direct link between thoughts to leave the profession with the ongoing staffing shortages.

Specifically:

- 12 per cent of respondents reveal they intend to leave the profession within the next 7–12 months
- Another 42 per cent plan to leave the profession in the next one to two years
- Among those who are planning to leave nursing, 6 in 10 (59 per cent) say they will exit the healthcare sector altogether
- It should be noted that these figures have progressed quite sharply over the past two years. In December 2020, at the height of the global pandemic, just one in three nurses (34 per cent) were actually considering leaving the profession
- The top factors propelling nurses’ decisions to leave the profession are: 1) Current wages (86 per cent), 2) Current workload (78 per cent) and 3) Compensation practices that nurses feel are unfair (75 per cent)
- Other factors include: the management around the pandemic (54 per cent), the impact of the pandemic on their well-being (52 per cent), workplace culture (49 per cent), inability to take vacation time (43 per cent), encountering workplace violence (38 per cent), and more



4. This profession is taking a collective and personal toll on nurses

In late 2020, 67 per cent of RPNs surveyed said they have never been prouder to be a nurse. Less than two years later, this statistic has dropped by nearly half to just 36 per cent who hold that sentiment. Many factors are shaping this reality.

Specifically:

- Regrettably, almost all nurses who were surveyed (97 per cent) say their work has taken a toll on them
- Only 37 per cent of respondents say they feel supported in their role as a nurse today. This represents a consequential decline from statistics gathered in December 2020 when this figure was at 50 per cent
- More than half of nurses (54 per cent) rate their workplace morale as either low or very low. In fact, 83 per cent of respondents feel morale at work has worsened over the past two years
- Accordingly, it should come as no surprise, unfortunately, that 44 per cent of nurses say they are dissatisfied in their job
- When asked what could improve their job satisfaction, 94 per cent of nurses mentioned improved wages, 78 per cent cited increased staffing levels and 64 per cent noted standardized workloads

In their own words
(direct quotes from
survey respondents):

“I was made to feel like a bad person for setting boundaries or advocating for things like bathroom breaks.”

“I had to assume a charge role (untrained) because no RN is available to do so on acute medical units.”

“In this sector you work extremely hard, with no breaks, you take on huge responsibilities, with no second nurse on staff to help or give a second opinion. You go home burnt out, with no energy for yourself or for family. Not to mention the emotional load of losing patients.”





5. Job-related pressures, including financial and mental stresses are pushing nurses to their breaking point

An overwhelming 94 per cent of nurses feel their daily experiences in the workplace have become significantly more stressful. And 4 in 5 nurses (79 per cent) admit they've experienced a breaking point related to their job — either on the job or at home. Financial and mental health stressors are critical factors.

Specifically:

- The number of nurses experiencing financial stress has surged in 2022. Today, 75 per cent of nurses say they are experiencing financial stress, and this figure has risen sharply from 57 per cent in December 2020. Nurses are overworking themselves to make do. Sixty-two (62) per cent of nurses report picking up extra shifts; 54 per cent seek out extra overtime hours, and 43 per cent are working in a second job to make ends meet
- Moreover, the vast majority of nurses (86 per cent) are reporting that their mental health is being adversely affected because of the work they do in their profession
- In this context, this study found that nurses are in great need of more mental health supports:
 - 8 in 10 nurses (79 per cent) feel more mental health supports could help with the toll their job has taken on them
 - 67 per cent of nurses do not feel like they have adequate mental health support right now
 - A further 40 per cent of nurses revealed that they are in immediate need of more mental health supports because of the adverse psychological impact their job has had on them

In their own words
(direct quotes from
survey respondents):

"I want to feel like I actually matter. No one listens to ways to make things better."

"I'm going back to school because RPN isn't a good paying job anymore."

"There is a lack of nursing staff, lack of support from management, lack of basic supplies (I was providing my own out of pocket). No vacation or time off, poor access to COVID-19 testing, miscommunication between facilities, inappropriate patients being admitted and no raise despite workload increase."

6. The impact of wage stagnation and calls for fair compensation practices

The Ontario government recently announced a permanent pay increase for personal support workers (PSWs). While RPNs recognize the important work being done by their PSW colleagues, they believe that they should also be fairly compensated. It was a surprise to many nurses that one category of healthcare workers was recognized over another, especially considering the fact that many RPNs work alongside PSWs in high-risk sectors such as long-term care. To this end, virtually all nurses who were surveyed (99 per cent) believe this pay bump should be extended to RPNs as well. Wage stagnation is having a deeper impact on the nursing profession than what may appear on the surface. This is further exacerbated by the fact that the role itself of an Registered Practical Nurse is much closer to that of a Registered Nurse (RN) than a PSW, yet in spite of this, the wage of an RPN's still remains closer to a PSW's.

Specifically:

- 91 per cent of RPNs do not feel that they are fairly compensated for their role overall. This figure has grown from 86 per cent in December 2020
- Not being included or recognized with a pay increase is impacting nurses' morale. A large majority (85 per cent) say they do not feel valued in their role, and 73 per cent report feeling demotivated
- The nursing retention crisis noted above is being exacerbated by wage stagnation: Close to half of the nurses considering leaving the profession (48 per cent) are doing so as a direct result of wages
- Earning less than one's direct reports: 15 per cent of RPNs say they are currently managing PSWs who are earning more than them

"I feel stupid for accepting the responsibility and liability for being an RPN when I don't have to — the RNs I work with basically think we're crazy to do this job when we could just do a PSW job for the same amount."



**In their own words
(direct quotes from
survey respondents):**

"When considering RPN pay, think about what a human life is worth. Good care — that is what the pay should reflect. It should reflect those values. I medicate more than 40 patients. One error can kill someone. Extreme precision, knowledge, energy and alertness are needed. You must not be tired, sad or unfocused."

"I want to be recognized for what we do in our role. I am a surgical nurse and work to full scope. I am doing a job closer to an RN role than a PSW. I was a PSW for 20 years and went back to school to get a better education and earn more money per hour. Now I am making the same as a PSW. I agree PSWs should be paid more, but so should RPNs."



In their own words
(direct quotes from
survey respondents):

“I’m helping short-staffed PSWs, recreation and dietary, all while working two floors, including medication pass for up to 60 long-term care residents, and I’m still being berated for not being efficient enough.”

“I’m always being begged to work on my 1-2 days off, or overtime, as it’s always short staffed and there’s no one to fill shifts.”

“I know that patients aren’t getting the care they deserve due to staff shortages.”

7. Focusing a lens on Ontario’s long-term care

Twenty-seven (27) per cent of this study’s survey respondents work in Ontario’s long-term care sector. Forty-three (43) per cent of these nurses have worked in this sector for 10 to more than 20 years. Statistics focused on this sector highlight many areas that require attention from government leaders.

Specifically:

- Overall, 58 per cent of RPNs working in long-term care say they feel dissatisfied working in this profession. Close to one-third of this group (31 per cent) say they are very dissatisfied
- From a staff retention perspective, a full 40 per cent of respondents working in long-term care are considering leaving the sector. Among those considering leaving, 27 per cent no longer want to work as an RPN. The potential loss for this profession and for long-term care specifically is reaching critical levels that require immediate attention
- A significant majority of long-term care nurses (57 per cent) say wage increases would have a positive impact on job satisfaction rates and would allow them to reconsider leaving this sector
- Once again, as was evident in other areas of nursing, long-term care professionals are most frustrated with wages (92 per cent) and workload (87 per cent). Thirty-nine (39) per cent of long-term care nurses also say workplace violence contributes to their job dissatisfaction



The State of Nursing in Ontario: Concerning Trends

From its research, WeRPN cross-compared several statistics between 2020 to 2022. The following findings highlight some of the declining changes that have occurred over the past two years for nursing in Ontario.

Unsafe workloads are growing: Back in 2020, 90 per cent of nurses reported that their workloads had increased since the start of the COVID-19 pandemic. Now, in 2022, this number has continued to grow. Today, 93 per cent of nurses say their workload has continued to increase over the past two to three years. The challenge with this circumstance, as the research findings indicate, is that patient care is being compromised. An alarming 68 per cent of nurses say they do not have enough time or resources to allow them to adequately care for patients.

Reaching their breaking point: An overwhelming 4 in 5 nurses (79 per cent) admit that they've experienced a breaking point related to their job. What is disconcerting is, in the initial shock of the COVID-19 pandemic in December 2020, this figure was lower, at 71 per cent.

Perpetual pandemic-level stress: Understandably, in 2020, 96 per cent of nurses reported that their work had become exponentially more stressful. Sadly, these figures have barely changed — a full 94 per cent of nurses today still report experiencing mounting stresses from their daily experiences at work. Nurses are picking up extra shifts, working overtime and taking a second job to make ends meet.

More nurses are feeling unsupported in their jobs today: Only 37 per cent of respondents say they feel supported in their role as a nurse today. This represents a consequential decline from statistics gathered in December 2020, when this figure was at 50 per cent.

Nurses are facing unprecedented financial stress: The number of nurses experiencing financial stress has surged in 2022. Today, 75 per cent of nurses say they are experiencing financial stress, and this figure has risen sharply from 57 per cent in December 2020.

Unfair compensation practices for Ontario nurses: An overwhelming majority of RPNs (91 per cent) do not feel as though they are fairly compensated for their role overall. This figure has grown from 86 per cent in 2020.

Feeling compelled to walk away from the profession: Today, nearly 1 in 2 nurses (47 per cent) are considering leaving this critical profession. This figure has jumped quite significantly from 34 per cent in 2020, and the #1 catalyst for this is wage dissatisfaction.

Pride in nursing is eroding: In 2020, a large majority (67 per cent) of nurses said they had never been prouder to be a nurse. Today, this statistic has tragically plummeted, almost by half, to just 36 per cent — an undeniable reflection of the realities in nursing today.



An open letter from Dianne Martin, WeRPN's CEO:

WeRPN's 2022 Calls-to-Action
for the Government of Ontario

Dear reader,

Thank you for your valuable time and interest in our latest research report on the state of nursing in Ontario today. As you've witnessed here, the alarming findings from this study — "The State of Nursing in Ontario: A 2022 Review" — have exposed key areas within the nursing profession that require immediate attention from our government leaders.

Nurses today are working more hours, with more responsibilities, and handling more patients per nurse, all without appropriate adjustments to their wages. Moreover, their moral distress and mental health are worsening, and a shocking number are considering leaving the profession.

WeRPN is sharing its findings with government leaders and policymakers, calling attention to the perilously declining situation for nurses in Ontario. To this end, we have issued three critical calls-to-action focused on wage stagnation, unsustainable and unsafe workloads and inclusion in policymaking for the nursing profession. We are requesting the Ontario government to:

Repeal Bill 124 immediately and increase RPNs' wages:

WeRPN is asking the Ontario government to immediately repeal Bill 124 to allow RPNs to secure an appropriate wage. WeRPN estimates RPNs' wages need to be increased at minimum by 20 per cent to ensure their compensation is proportionally in line with other nursing groups and reflects cost of living increases. Right now, 9 in 10 nurses (91 per cent) do not believe they are being fairly compensated in their roles as RPNs. While the overarching nursing shortage cannot be immediately relieved in the short-term, such an increase will help immensely in retaining nurses who are contemplating leaving. It will also provide nurses with important recognition to boost morale, which has been hit very hard over the past two years.

Urgently address the ongoing normalization of unsafe workloads:

WeRPN is asking leaders to take measures now, with a deep sense of urgency, to return to safe staffing levels as soon as possible. It is integral for leadership to acknowledge on a daily basis that nurses today are tasked with unsafe workloads and that the situation they are encountering is not normal. Especially now, leaders have an obligation to set the tone and prioritize the safety and well-being of nurses — this means creating an environment where nurses feel supported and heard, ensuring at a minimum they are able to take their breaks, vacations, and the rest they are entitled to, not making them feel pressured to take on more shifts than they have the capacity for, and facilitating the necessary dialogue to improve these conditions. An immediate step towards this is to create more full-time positions for RPNs. An overwhelming 93 per cent of nurses report increased workloads in the past two years. The pressures nurses are facing are not sustainable and are, in fact, dangerously compromising the safety of both nurses and patients.

Ensure RPN voices are included in policymaking:

The Ontario government has the opportunity to leverage RPNs' valuable, first-hand experience and depth of expertise in their work. Their voices must be valued as foundational to healthcare reform and decisive policy development, considering RPNs have a unique perspective having experienced a particularly significant level of wage compression among healthcare providers.

As a member of the public, what can you do to support Ontario's nurses? Within our healthcare systems, first, directly and unapologetically ask if you or your loved ones are receiving care in an appropriately staffed environment. It is critical to normalize such conversations and please know, you have the right to make such a demand. Second, know that your voice matters. Every voice counts towards driving positive public policy change. So please share your concerns on social media, ask questions, write to your local MPPs and show your appreciation for nurses wherever you can. Your words of support will make a very valuable difference.

Thank you for supporting Ontario's RPNs. As the voice of this profession, please allow me to share my deepest gratitude with you.

Sincerely,

Dianne Martin, CEO, WeRPN