



**National Union of Public and General Employees’
Submission for the Pre-budget Consultations for the
2025 Federal Budget**

August 1, 2024





The National Union of Public and General Employees (NUPGE) is a family of 13 Component unions. Taken together, we are one of the largest unions in Canada. Most of our 425,000 members work to deliver public services of every kind to the citizens of their home provinces. We also have a large and growing number of members who work for private businesses.

The office of the National Union of Public and General Employees is on the traditional and unceded territory of the Algonquin peoples and is now home to many diverse First Nations, Inuit, and Métis peoples.

We recognize the crimes that have been committed and the harm that has been done and dedicate ourselves as a union to moving forward in partnership with Indigenous communities in a spirit of reconciliation and striving for justice.

Bert Blundon, President

Jason MacLean, Secretary-Treasurer



Recommendations

1. Develop a Pan-Canadian Health Human Resources Strategy
2. Implement Health Care Worker Retention Programs
3. Immediately Increase Federal Funding for Health Care Worker Retention
4. Promote a Culture of Safety and Support
5. Standardize Health Workforce Data Collection
6. Re-establish the Federal Health Care Sector Council
7. Harmonize Health Care National Standards and Certification
8. Optimize Health Care Scopes of Practice
9. Expand Education and Training Programs for Health Care Workers
10. Provide Targeted Incentives for Underserved Areas
11. Support Ethical International Recruitment of Health Care Workers
12. Develop Workplace Safety Initiatives
13. Expand Mental Health Support Programs
14. Enhance Regulation of Virtual Health Care
15. Expand Scope of Practice for Allied Health Professionals
16. Increase Support for Continuing Professional Development
17. Implement Recruitment Campaigns
18. Support Research and Innovation in Health Care
19. Initiate a Public Agency for Mobile Health Workers' Staffing and Regulate Private Sector Staffing Agencies
20. Implement National Standards for Psychological Health and Safety

Overview

There is a lot that the federal government needs to be doing to rebuild the public services Canadians rely on. Years of federal underfunding have taken their toll on these services, whether it's health care, non-profit housing, post-secondary education, or social services. Instead of "Band-Aids," significant increases in spending are needed to repair the damage. Far more needs to be done to reduce emissions causing climate change. And meaningful tax fairness measures are needed so we can afford the public services Canadians deserve.

One area that has not received enough attention is the health staffing crisis. Our members are among those on the front lines. Their input has provided us with both a clear sense of where the problems lie and what the federal government needs to be doing.

Background

The Canadian public health care system is in crisis due to chronic underfunding, lack of planning, and a critical shortage of public health care workers. All governments responsible for the crisis must take extraordinary action to address these issues, as the system is nearing collapse in many places. The federal budget must include measures to assist provincial and territorial governments in this respect.

Currently, the Canadian health care sector is facing a critical staffing crisis. There are alarming and persistent shortages in key areas such as primary care and specialist services, with virtually all health professionals impacted. This includes allied health professionals represented by the National Union of Public and General Employees (NUPGE) and its Components. These shortages extend to all workers who support health care professionals in performing their jobs effectively.

The lack of attention to the crisis in health care staffing threatens the quality and accessibility of care, resulting in longer wait times and harm to patients and workers.

The staffing crisis has been exacerbated by factors such as the aging population, increased demand for services, and burnout among health care workers, which has been intensified by the COVID-19 pandemic. As front-line workers leave their positions or reduce their hours, the pressure on the remaining staff increases, leading to a vicious cycle of attrition and reduced capacity.

Staff shortages are made even worse when employers turn to private staffing agencies and private for-profit clinics. Both pull more workers from the public system, pushing up the cost of health care.

Addressing the staffing crisis requires comprehensive strategies to attract, train, and retain health care professionals, with a focus on retaining public health care workers. Provinces and territories cannot deal with the crisis working in isolation. In fact, provinces and territories trying to solve their problems at the expense of other parts of Canada will make the situation worse. For that reason, it is imperative that the federal government, in collaboration with provincial and territorial governments, takes decisive action to address the staffing crisis in public health care.



A broad range of actions are needed, but the priority needs to be retention of workers who are already in the public system. Measures to support retention include improving working conditions, providing competitive compensation, and implementing policies that support work-life balance.

Prompt and robust federal intervention is essential to safeguard the future of Canadian health care.

Detailed Recommendations

1. Develop a Pan-Canadian Health Human Resources Strategy:

Facilitate and fund coordination among all stakeholders, including federal, provincial, and territorial governments, Indigenous led organizations, unions, and health care providers. The strategy would anticipate and mitigate shortages and forecast future needs to create a sustainable health care workforce.

2. Implement Health Care Worker Retention Programs:

Improve working conditions through a range of workplace initiatives: in collaboration with unions, offer professional development opportunities, and ensure fair wages and pensionable remuneration to retain skilled health professionals in the public system.

3. Immediately Increase Federal Funding for Health Care Worker Retention:

Promote a fund explicitly focused on and retaining public health care workers and encouraging former workers to return. Funding would be administered by provincial and territorial governments based on criteria for access. The criteria would include requiring that the funds would go towards public delivery of health care, public health care workers, and to support sustainable and safe health care staffing levels.

4. Promote a Culture of Safety and Support:

Engage with employers and workers to encourage and foster a supportive work environment with policies that prioritize the well-being of health workers, such as flexible scheduling, adequate rest periods, and recognition programs.

5. Standardize Health Workforce Data Collection:

Lead efforts to collect and standardize health workforce data across provinces and territories. Ensure this data is transparent and publicly accessible for effective planning and policy evaluation.

6. Re-establish the Federal Health Care Sector Council:

Support planning, research, and skills development through social dialogue among labour, industry, government, and community stakeholders, ensuring diverse representation from health occupations, including allied health professionals.

7. Harmonize Health Care National Standards and Certification:

Collaborate with provincial and territorial governments, working with regulatory bodies and professional associations to harmonize standards and certification requirements, facilitating workforce mobility and efficiency.

8. Optimize Health Care Scopes of Practice:

Review and optimize scopes of practice in collaboration with stakeholders to allow health professionals to work to the full extent of their skills, enhancing team-based care and service delivery. This must be done in collaboration with workers, union representatives, and by respecting collective agreements. It must also not be used to facilitate de-skilling and expansion of scopes of practice as a stopgap to deal with shortages.

9. Expand Health Care Worker Education and Training Programs:

Increase funding for health education and training programs delivered by public and not-for-profit entities, ensuring availability in rural, remote, and Indigenous communities to build local capacity and support culturally appropriate care. Include funds for clinical placement and mentorship of workers to aid in retention.

10. Provide Targeted Incentives for Underserved Areas:

Offer relocation assistance, housing subsidies, and enhanced support for professional development to attract health professionals to work in underserved rural and remote areas. Enhance recruitment and training opportunities in underserved communities by encouraging local participation, with a specific focus on this strategy among under-represented Indigenous communities and populations.

11. Support Ethical International Recruitment of Health Care Workers:

Follow the World Health Organization’s guidelines on ethical international recruitment, ensuring that source countries benefit and that recruitment does not exacerbate shortages in countries of origin.

12. Develop Workplace Safety Initiatives:

Fund initiatives to reduce workplace violence, particularly in high-risk sectors like health care, including training programs and public awareness campaigns.

13. Expand Mental Health Support Programs:

Provide robust mental health support for health workers, including support for workers suffering workplace trauma and assistance for the families of front-line workers. Implement programs to increase resilience among workers and provide supports in the workplace, as well as external supports for workers’ mental health. Strictly enforce safety regulations.

14. Enhance Regulation of Virtual Health Care (VHC):

Regulate virtual health care platforms to ensure compliance with the principles of the *Canada Health Act* as well as with provincial and territorial legislation. Ensure that VHC does not create 2-tier health care, queue-jumping, and extra-billing for medically necessary services, and that it does not enhance privatization of health care or exacerbate abuse of private health information of patients.

15. Expand Scope of Practice for Allied Health Professionals:

Allow allied health professionals to take on expanded roles to alleviate pressure on doctors and nurses, ensuring they are utilized to the full extent of their training and skills. Additionally, vigorously promote primary health care reform and team-based health care, integrating more allied health professionals into the process.

16. Increase Support for Continuing Professional Development:

Fund continuous professional development opportunities for health workers to keep their skills up to date and enable career progression. Career progression is an important element in retention.

17. Implement Recruitment Campaigns:

Launch national recruitment campaigns targeting students, new graduates, and people who are in mid-career to attract them to the health care sector, emphasizing the benefits and career opportunities available.

18. Support Research and Innovation in Health Care:

Invest in research and innovation to develop new models of care, improve efficiency, and enhance the quality of health care delivery.

19. Initiate a Public Agency for Mobile Health Workers' Staffing and Regulate Private Sector Staffing Agencies:

Establish a public agency dedicated to the staffing of mobile health workers, ensuring they are well regulated and supported; in addition, set standards for private sector staffing agencies to follow.

20. Implement National Standards for Psychological Health and Safety in Health Care Settings:

Establish national standards for psychological health and safety in health care workplaces as unique work environments. Include regular assessments, support services, and training programs.

Conclusion

The health human resources crisis in Canada requires immediate and comprehensive action from the federal government. By developing a pan-Canadian health human resources strategy, by enhancing retention and recruitment efforts, and by supporting

mental health and safety initiatives, we can build a sustainable and resilient health care workforce that meets the needs of all Canadians. These initiatives will not only improve the quality of health care but will also ensure the long-term viability of our public health system.

An effective pan-Canadian health human resources strategy will need adequate funding. It is likely that at least \$400 million annually for the next 5 years will be required. Recommendation 5, the proposed standardization of health care workforce data collection, will make it possible to assess the degree to which these measures are needed beyond that time.

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COMPONENTS



B.C. GENERAL EMPLOYEES' UNION



CANADIAN UNION OF BREWERY AND GENERAL WORKERS



HEALTH SCIENCES ASSOCIATION OF ALBERTA



HEALTH SCIENCES ASSOCIATION OF BRITISH COLUMBIA



HEALTH SCIENCES ASSOCIATION OF SASKATCHEWAN



MANITOBA ASSOCIATION OF HEALTH CARE PROFESSIONALS



MANITOBA GOVERNMENT AND GENERAL EMPLOYEES' UNION



NEW BRUNSWICK UNION OF PUBLIC AND PRIVATE EMPLOYEES



NEWFOUNDLAND & LABRADOR ASSOC. OF PUBLIC & PRIVATE EMPLOYEES



NOVA SCOTIA GOVERNMENT AND GENERAL EMPLOYEES UNION



ONTARIO PUBLIC SERVICE EMPLOYEES UNION / SYNDICAT DES EMPLOYÉS DE LA FONCTION PUBLIQUE DE L'ONTARIO



PRINCE EDWARD ISLAND UNION OF PUBLIC SECTOR EMPLOYEES



SASKATCHEWAN GOVERNMENT AND GENERAL EMPLOYEES' UNION

The National Union of Public and General Employees is an affiliate of the Canadian Labour Congress and a member of the Public Services International.