

## Pre-Budget Submission Budget 2023

### Introduction

Canada's health system is in crisis. Emergency rooms are reducing hours or shutting down for periods of time. Timely access to crucial care remains a challenge. This crisis has many causes, but one of the most foundational ones is that we don't have enough qualified professionals in the right roles in the right places across the country. The people who run our health care system are stressed and are burning out.

Family physicians, the foundation of Canadian health care system, are acutely affected by this crisis. 57 per cent of family physicians are reporting feeling burnt out and 61 per cent are reporting worse mental health now compared to prior to the pandemic.<sup>1</sup> 21 per cent report feeling moral distress very often or always.<sup>2</sup> Family physicians cannot sustain the health care system while shouldering this level of persistent stress.

The Prime Minister has recently gone on record as stating that the federal government will be making significant further spending in support Canada's health care system. The College of Family Physicians of Canada has a long track record of supporting the leadership role of the federal government in health care by requiring adherence to national standards, and that federal funding is met with a provincial responsibility to deliver results.

Family physicians are the backbone of our health care system, but they can't continue to shoulder the burdens of a teetering health care system without cracks continuing to form and widen, unless they are given the resources to do their jobs. The federal government has recognized the value of family medicine and primary care. In 2021, the Liberal party promised \$3.2 billion to support bringing more family doctors, nurses, and primary health care professionals into the field. With some minor investments to date, almost none of the money promised has been allocated.

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<sup>1</sup> Canadian Medical Association. National Physician Health Survey 2021. August 2022. Available from: [https://www.cma.ca/sites/default/files/2022-08/NPHS\\_final\\_report\\_EN.pdf](https://www.cma.ca/sites/default/files/2022-08/NPHS_final_report_EN.pdf). Accessed August 24, 2022.

<sup>2</sup> CMA. National Physician Health Survey 2021. August 2022. Available from: [https://www.cma.ca/sites/default/files/2022-08/NPHS\\_final\\_report\\_EN.pdf](https://www.cma.ca/sites/default/files/2022-08/NPHS_final_report_EN.pdf). Accessed August 24, 2022.

## Federal Budget 2023 Recommendations Summary

The CFPC, jointly with the Canadian Medical Association and the Canadian Nurses Association, has presented a set of recommendations to the federal government to address the crisis in our health care system and alleviate the pressure on our health workforce. These recommendations were presented in detail to the Standing Committee on Health twice in the spring of 2022 (April 4 and May 9).

Having seen limited action on the proposed recommendations below, these form the basis for the CFPC's pre-budget submission in advance of Budget 2023.

They are:

1. Address the administrative burden of health care workers
2. Launch the proposed Primary Care Integration Fund
3. Scale up virtual care tools in primary care
4. Support new training and education infrastructure
5. Support training and licensing pathways for IMGs and IENs
6. Support a pan-Canadian mental health strategy for health care workers
7. Enhance health workforce data collection and establish a health workforce data agency

## Federal Budget 2023 Recommendations In Detail

### Address the administrative burden of health care workers

**Commit \$300 million over three years through a federal fund that Provinces and Territories can access to improve the well-being of healthcare workers through access to administrative and mental health supports in primary and secondary care settings.**

Workload is often a gateway to provider burnout and worsening mental health across Canada.<sup>3</sup> 60% of physicians indicate their mental health has worsened since the onset of the pandemic with 57% attributing to increased workload and lack of work-life integration.<sup>4</sup> In Ontario alone, more than 50% of RPNs coped poorly or extremely poorly during the pandemic, while 80% reported a significantly increased workload.<sup>5</sup>

Funding for a rapid assessment of drivers of administrative burden, work, workload, and working conditions to understand pain points and develop actions from the evaluation for P/Ts to implement to mitigate workload challenges.

Setting standards around streamlined process around commonly used forms to simplify the process for health professionals and ease of integration into EMRs.

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<sup>3</sup> Canadian Medical Association. National Physician Health Survey 2021. August 2022. Available from: [https://www.cma.ca/sites/default/files/2022-08/NPHS\\_final\\_report\\_EN.pdf](https://www.cma.ca/sites/default/files/2022-08/NPHS_final_report_EN.pdf). Accessed August 24, 2022.

<sup>4</sup> Canadian Medical Association. National Physician Health Survey 2021. August 2022. Available from: [https://www.cma.ca/sites/default/files/2022-08/NPHS\\_final\\_report\\_EN.pdf](https://www.cma.ca/sites/default/files/2022-08/NPHS_final_report_EN.pdf). Accessed August 24, 2022.

<sup>5</sup> CBC News: "Registered practical nurses struggling with pandemic stress, workload: poll" Available from: <https://www.cbc.ca/news/canada/toronto/registered-practical-nurses-struggling-1.6019812>. Posted: May 9, 2021. Accessed October 5, 2022

Support an increase in administrative/clerical in family practices to unlock more time for direct patient care (e.g., reduced paperwork, funded medical scribes, centralized administrative capacity pools).

### **Launch the proposed Primary Care Integration Fund**

**Support the rapid expansion of access to high-quality primary care by leveraging the \$3.2 billion commitment to Provinces and Territories over four years in a one-time *Primary Care Integration Fund*, expanding the establishment of the Patient's Medical Home model.**

Many Canadians do not have access to a primary care provider or have trouble obtaining an appointment when necessary. This initiative aligns with the government's priority to invest in primary care while also driving downstream health system savings.

Fund the establishment of interprofessional collaborative care models aligned with the Patient's Medical Home vision

Support the integration of primary care with community and social services via funding to support partnerships

Promote the implementation of the Patient's Medical Home model

Support the administrative costs associated with team-based practice set-up

Expand access to after-hours services in the primary care setting

### **Scale up virtual care tools in primary care**

**Provide \$400 million over four years to Provinces and Territories in the primary care setting, expanding on the government's existing work through the Federal Provincial Territorial Virtual Care/Digital Table.**

Effective electronic record-keeping and virtual care can support increased efficiency, reduced burnout, and enhanced care continuity. This recommendation aligns with the federal government's priority to accelerate the use of virtual tools and digital approaches to patients and providers.

Support the development of robust national guidelines on appropriateness for use of virtual care to assist providers in delivering optimal care

Advance electronic system interoperability focusing on a single health record per patient that can be accessed from a variety of settings.

Support the implementation of team-based approaches to virtual care to ensure its expansion does not place an undue workload on any given healthcare professional

Initiating a Parliamentary review on the regulatory barriers to the mobility and deployment of Canada's health workforce under the Canadian Free Trade Agreement

Invest \$2 million for a comparative assessment of provincial and territorial licensing and certification requirements for regulated health professions

Ensure integration of virtual care into public system rather than proliferation of for-profit episodic care solutions that disrupt continuity and exacerbate inequities

## Support new training and education infrastructure

**Leverage the \$3.2 billion commitment to Provinces and Territories to increase the supply of family doctors, nurses, and nurse practitioners, which will also require investment in training and education infrastructure (e.g., faculty capacity, reimbursing teachers, training sites, etc.)**

The COVID-19 pandemic has exacerbated supply/retention challenges in the physician and nursing professions which will further increase in the years ahead due to growing demand. This recommendation directly aligns with the government's priority to hire 7,500 new family doctors, nurses, and nurse practitioners.

Fund an increased number of seats in existing nursing schools and medical schools, focusing on programs producing graduates

Create a new targeted and time-limited program that would be available to any jurisdiction seeking to expand existing nursing school and medical school capacity building off of existing infrastructure

Provide funding and incentives dedicated towards expansion of clinical faculty capacity to support increased training enrolment

Facilitate the expansion of distributed community-engaged learning sites (including administration costs, stipends, distributed research, etc.) which additionally facilitates specialized training opportunities within underserved communities

Expand integration of programs that promote and channel medical students towards postgraduate training in family medicine starting with undergraduate medical education.

## Support training and licensing pathways for IMGs and IENs

**Leverage the \$3.2 billion commitment to Provinces and Territories to increase the supply of family doctors, nurses, and nurse practitioners by supporting expedited pathways to licensure and practice for international medical graduates (IMGs) and internationally educated nurses (IENs) wishing to pursue careers in Canada.**

Canada has a high number of IMGs/IENs who face unemployment, despite existing labour shortages. IMGs/IENs experience significant challenges becoming licensed practitioners despite playing a significant role in augmenting the health workforce labour supply, which was highlighted during the COVID-19 pandemic.

Support and expand opportunities for registration and deployment of IENs in order to provide immediate supply into the workforce as done in provinces such as Manitoba and Ontario

Support Provinces and Territories to 1) increase opportunities for experienced foreign-trained IMGs to complete Practice Ready Assessments (PRAs) and 2) expand PRA availability to all Provinces and Territories (PRAs are currently only available in 7 jurisdictions) in order to accelerate the path to practice (sufficient resources required to achieve success)

Evaluate opportunities to remove systemic racism from education to practice for foreign-trained healthcare professionals

## **Support a pan-Canadian mental health strategy for health care workers**

**Through the election commitment of \$4.5 billion over five years in targeted mental health funding, support the establishment of a long-term Pan-Canadian Mental Health Strategy for Healthcare Workers. This strategy could be modelled on the federal government's 2019 Action Plan to support the mental wellness of Canada's public safety personnel.**

Healthcare worker mental health has been heavily impacted by the COVID-19 pandemic and long-term, sustainable supports are needed now. This recommendation is in alignment with the federal government's priority to support the mental health of Canadians.

Fund access to tailored, high-quality mental health supports for healthcare workers and their immediate family members

Fund to develop targeted training and curriculum programs for health care providers who specialize in treating health care workers

Fund to support the implementation of national standards for physical, psychological and cultural safety in the healthcare workplaces, under development by CMA

As part of the federal commitment to improving health data, invest in pan-Canadian monitoring and reporting on health care worker wellness at the regional level (e.g., embedding wellness as a quality indicator in hospital QIPs in support of the Quadruple Aim) and establish an accountability framework)

## **Enhance health workforce data collection and establish a health workforce data agency**

**Commit \$50 million over four years to first enhance health workforce data standardization and collection processes across Provinces and Territories. Subsequently, support the establishment of a Centre of Excellence via an existing agency (such as CIHI) to centrally house the data and support jurisdictional planning efforts.**

Canada cannot plan for our workforce supply needs, mix, and distribution if we do not appropriately collect data on demographics, service activity, practice location, among other elements, to better inform needs-based planning. As stated on the November 2021 Throne Speech, we must improve data collection to get the best possible results.

Identification of and action on removing gaps in health workforce data to support improved health workforce planning

Support an evaluation of the current state to understand where all existing data is housed, how it can be accessed, used, standardized across jurisdictions, and effectively deployed to P/Ts to meet the needs of jurisdictional planning efforts

Establishment of national standards (minimum data set) on collection, standardization, and use of health workforce data

## About the CFPC

The voice of family medicine in Canada

The College of Family Physicians of Canada (CFPC) is the professional organization that represents more than 42,000 members across the country. The College establishes the standards for and accredits postgraduate family medicine training in Canada's 17 medical schools. It reviews and certifies continuing professional development programs and materials that enable family physicians to meet certification and licensing requirements.

The CFPC provides high-quality services, supports family medicine teaching and research, and advocates on behalf of the specialty of family medicine, family physicians, and the patients they serve.

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