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Understanding the Nursing Shortage in Ontario's Long Term Care Homes

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Understanding the Nursing Shortage in Ontario's Long Term Care Homes

Keywords: Nursing shortage, Long Term Care homes, Healthcare staffing.

Master of Public Administration Research Report

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Department of Political Science
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ABSTRACT

This paper examines the existing qualitative research addressing the nursing shortage in Ontario's Long-Term Care (LTC) homes, focusing on the research question: "What are the factors contributing to the nursing shortage in Ontario's Long Term-Care Homes?" The research is vital given the vulnerability of LTC home residents, and the shortage of nursing staff can significantly impact the quality of care provided.

To address this question, this research paper will thoroughly examine qualitative studies conducted within the LTC sector in Canada and limitedly in the United States. It involves the analysis of existing qualitative data, encompassing insights into recruitment, nursing supply, salary, working conditions, education programs, effects of the COVID-19 pandemic, policy gaps, and other pertinent factors contributing to the nursing shortage.

Anticipated findings are expected to reveal the complex nature of the nursing shortage, shedding light on the intricacies LTC homes face in Ontario. By synthesizing existing qualitative research, this paper aims to provide comprehensive insights that can inform policy recommendations and interventions, ultimately addressing the nursing shortage in Ontario's LTC homes and improving the quality of care for residents.

Keywords: Nursing shortage, Long Term Care homes, Healthcare staffing, United States, Ontario, Canada

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The culmination of my academic journey as a graduate student in the MPA program at Western University comes in the form of this paper, marking the completion of the requirements for my Master of Public Administration degree. Reflecting on the past year, I recognize the significance of this experience in shaping my academic growth. Balancing full-time studies, employment, and familial responsibilities presented its challenges, but it has undoubtedly fortified me to confront obstacles with resilience and determination in various facets of life.

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INTRODUCTION

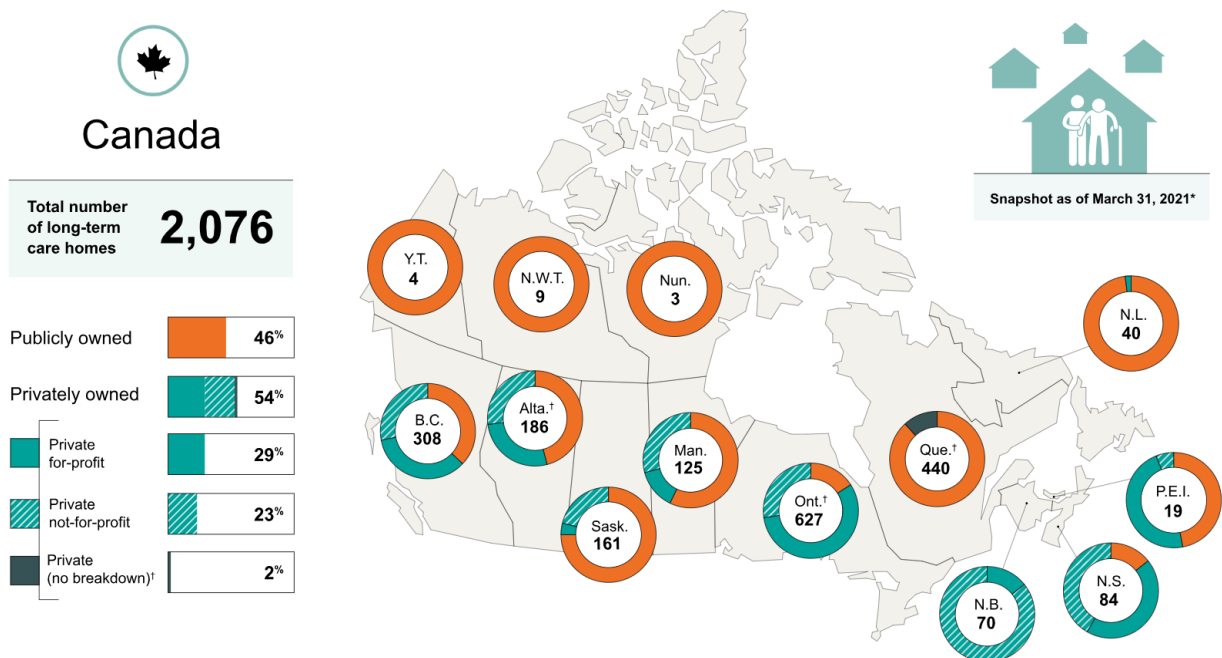
This paper embarks on an exploration of the prevalent issue surrounding the critical nursing shortage within Long-Term Care (LTC) homes in Ontario. The implications of this shortage are far-reaching, directly impacting the well-being of residents and the quality of care they receive (Ulrich et al, 2002). Rather than merely acknowledging the problem, this study seeks to undertake a comprehensive qualitative investigation into the myriad factors that contribute to the shortage, with a focus on proposing potential policy interventions.

Long-Term Care homes in Ontario include three operating types: privately owned, nonprofit or charitable, and municipally owned (approximately 16%) (Canadian Institute for Health Information, 2021). All are licensed, regulated, and partly funded by the Ontario Ministry of Health and Long-Term Care (MOHLTC) and governed by provincial legislation, the Fixing Long-Term Care Act, 2021 (FLTCA). LTC homes play a vital role in Ontario, employing a workforce of over 100,000 individuals. These facilities cater to a growing population of approximately 78,000 residents, many of whom require increasingly complex medical care. To ensure the delivery of high-quality care and services, all Long-Term Care homes in Ontario must adhere to staffing standards outlined in the Fixing Long-Term Care Act, 2021. These standards mandate a specific staffing mix, encompassing roles such as administrators, personal support workers, registered nursing staff, and allied health professionals, aimed at meeting the diverse needs of residents. For instance, an average of three hours and forty-two minutes of direct care is to be provided per resident per day no later than March 31, 2024 (Fixing Long-Term Care Homes Act, 2021). The legislation is clear on the requirements, and more than ever the pressure is on LTC homes in Ontario to recruit and retain staff to meet these hours of direct care for residents.

The elderly population in Ontario is on the rise, resulting in an escalating need for long-term care services. With the increasing number of seniors, there is a heightened demand for skilled nursing care within LTC homes, further intensifying the shortage of nursing staff. A significant proportion of individuals aged 85 and older experience limitations in activities or health issues. More than a quarter of this demographic live in communal settings such as nursing care facilities, long-term care facilities, or seniors' residences, a percentage that increases with age (Statistics Canada, 2022).

BACKGROUND

As of 2021, there were 104 municipally owned long-term care homes dispersed throughout communities across Ontario, collectively providing over 16,650 beds. The rich legacy of compassionate care, extensive collaboration, and deep-rooted community engagement has firmly positioned municipal homes as indispensable contributors within Ontario's long-term care home system (Canadian Institute for Health Information, 2021).



With over 600 Licensed facilities, long-term care homes represent a critical component of Ontario's healthcare system, yet they are grappling with a severe staffing shortage. Recruitment and retention of staff emerge as the foremost challenge for these facilities. Projections indicate that by 2029, long-term care homes will require an additional 58,600 nurses and personal support workers to accommodate heightened care demands and establish new beds (OLTCA, 2024). This figure starkly contrasts with the current workforce, underscoring the magnitude of the shortage. Residents select their long-term care homes based on their desire to be part of these communities. However, the inability to attract and retain staff poses a significant risk to the integrity of these communities. A commitment to collaborating with healthcare service providers and community leaders to formulate localized solutions to this pressing issue is essential.

At the heart of this research lies the central question: "What are the factors contributing to the nursing shortage in Ontario's Long-Term Care Homes?" This inquiry serves as the hub for unraveling the intricate layers of the shortage. By delving into this pivotal question, this research aims to discover the root causes, complexities, and interconnected factors that collectively contribute to the scarcity of nursing staff within LTC homes across the province of Ontario.

The overarching objective is to move beyond superficial observations, striving to provide in-depth insights into systemic, organizational, policy-related, economic, and social contributors to this critical challenge. Through a thorough examination of these contributing elements, the research aspires to lay the groundwork for the development of strategic policy interventions and solutions. The ultimate aim is to alleviate the nursing shortage and elevate the overall care standards within long-term care homes in Ontario.

LITERATURE REVIEW

This literature review addresses the urgent healthcare and societal challenges posed by the nursing shortage in Ontario's long-term care homes. It highlights the necessity of understanding and addressing this issue to advance patient care and improve the well-being of healthcare professionals. The implications of this study span across healthcare policy, economics, ethics, and public health, making it a vital and timely subject of investigation. The dire shortage of nursing staff in Ontario's long-term care homes presents a significant concern, profoundly impacting the quality of care administered to the elderly residents within these facilities. Unraveling the underlying causes of this shortage is imperative for devising effective policy measures and intervention strategies. The ensuing literature review offers insight into the primary factors contributing to the nursing shortage in Ontario's LTC homes.

Nursing Supply Challenges: Baumann and Crea-Arsenio's research on the nursing labor market in Canada highlights the persistent challenges in maintaining a stable nursing workforce, which directly impacts the long-term care sector. Their study underscores that the nursing shortage is not solely due to a lack of qualified nurses, but also results from ineffective policy measures and workforce planning. They advocate for comprehensive policy efforts to address these issues, including leveraging both domestic and international sources to bolster the nursing supply. This approach is crucial for Ontario's LTC homes, where the shortage is particularly acute due to an aging population and increasing demand for specialized care.

The analysis by Baumann and Crea-Arsenio reveals that current policy responses have been insufficient in mitigating the nursing supply challenges. They emphasize the need for sustainable solutions that go beyond short-term fixes, suggesting that a combination of improved

workforce planning, better recruitment and retention strategies, and enhanced support for career development are essential. This perspective aligns with the situation in Ontario's LTC sector, where the shortage of nurses continues to strain the system, affecting the quality of care for elderly residents. Addressing these supply challenges through informed policy interventions could significantly improve the stability and effectiveness of the nursing workforce in LTC settings.

Impact of Nursing Shortage: The Registered Nurses' Association of Ontario (RNAO) publication highlights the acute nursing staffing shortages in Ontario, particularly exacerbated by the COVID-19 pandemic. The study emphasizes how the pandemic has strained an already fragile healthcare system, revealing systemic issues such as inadequate staffing levels and poor working conditions for nurses. According to the RNAO, these shortages have severe repercussions on patient care quality and nurse well-being, necessitating urgent policy interventions to retain and recruit registered nurses (RNs) in Ontario.

The RNAO's research design incorporates surveys, research data, and professional insights, presenting a comprehensive view of the staffing crisis. The publication underscores that the shortage of RNs in Ontario is not only a result of the pandemic but also a culmination of long-standing systemic problems. These issues include insufficient funding, lack of support for professional development, and inadequate working conditions, which collectively deter potential nurses from entering or remaining in the LTC sector. The RNAO suggests that immediate and sustained policy efforts are required to stabilize the nursing workforce and improve care quality.

The publication offers actionable recommendations to address the nursing shortage. These include increasing funding for nursing positions, improving working conditions, and enhancing support for nurses' professional development. The RNAO also calls for a collaborative

effort among various stakeholders, including the government, healthcare organizations, and educational institutions, to create a more sustainable and attractive nursing workforce. By implementing these recommendations, the RNAO believes that Ontario can mitigate the nursing shortage, improve patient outcomes, and ensure the well-being of healthcare professionals

Staffing Challenges: The Ministry of Long-Term Care's 2020 staffing study provides a comprehensive analysis of staffing challenges in Ontario's long-term care homes. It identifies critical issues such as insufficient staffing levels, high turnover rates, and the growing complexity of resident care needs. The study emphasizes the impact of these challenges on the quality of care and the well-being of both residents and staff.

One of the key findings is that inadequate staffing not only affects the quality of care but also contributes to increased stress and burnout among LTC workers. The study highlights the need for a multifaceted approach to address these issues, including better staffing ratios, improved working conditions, and enhanced training programs. It also emphasizes the importance of supportive management practices and the integration of new care models to meet the evolving needs of LTC residents.

The recommendations from the study focus on increasing funding for LTC homes, implementing policies to support workforce stability, and promoting the professional development of LTC staff. By addressing these areas, the study suggests that Ontario can improve the quality of care in LTC homes, enhance job satisfaction for workers, and ultimately create a more sustainable and effective LTC system.

Aging Population: The Statistics Canada (2022) report on the 2021 Census highlights the significant demographic shift in Canada's population aged 85 and older, revealing a rapidly

growing segment. This demographic change highlights the increasing demand for long-term care services, particularly in Ontario, where the elderly population is expected to place additional strain on an already overburdened system. The report emphasizes that over 25% of individuals aged 85 and older reside in communal settings such as nursing homes, long-term care facilities, or senior residences, with this percentage rising as age advances. These findings are crucial in the context of my research as they illustrate the escalating need for skilled nursing care and the challenges in meeting this demand due to the existing nursing shortage.

The growing population of individuals aged 85 and older also brings to light the pressing issue of adequate healthcare support and infrastructure. As more elderly individuals require specialized care for chronic conditions and assistance with daily activities, the demand for long-term care facilities and skilled nursing staff intensifies. This demographic trend is expected to exacerbate the nursing shortage in Ontario's long-term care homes, where the current staffing levels are already insufficient. The report's detailed demographic analysis provides a foundational understanding of the increasing pressures on the healthcare system, making it imperative to address staffing shortages to ensure the quality of care does not deteriorate.

In the context of addressing the nursing shortage, the Statistics Canada report serves as a critical piece of evidence for policymakers and healthcare administrators. It highlights the urgency of implementing strategic workforce planning and recruitment initiatives tailored to the needs of the aging population. The data suggests that without substantial improvements in staffing levels and working conditions in long-term care facilities, the quality of care for the elderly will be significantly compromised. Thus, the report not only contextualizes the demographic pressures but also reinforces the necessity for comprehensive solutions to the nursing shortage in Ontario's long-term care homes.

Inadequate Funding: Inadequate funding remains a significant barrier to addressing the nursing shortage in Ontario's long-term care homes. Historically, these facilities have struggled with limited resources, hampering their ability to hire and retain qualified nursing staff. Although the Provincial Government has initiated efforts to attract new Personal Support Workers (PSWs) to the LTC sector through financial incentives and relocation support, similar programs for nursing staff are notably lacking (Ontario Health, 2023).

The current efforts by Ontario Health include stipends and relocation support for PSW students and recent graduates, aimed at mitigating workforce shortages in rural, remote, and northern areas. These initiatives provide up to \$10,000 for relocation costs and additional incentives for completing clinical placements and committing to 12-month employment terms. However, there is a critical need for parallel programs to attract and retain nurses, whose shortage continues to exacerbate the challenges faced by LTC homes.

Given the escalating demand for long-term care services due to an aging population, it is anticipated that all levels of government will soon need to implement robust strategies to promote nursing careers in the LTC sector. Enhanced funding and targeted recruitment programs for nurses will be essential to ensure that LTC homes can provide high-quality care and meet the growing needs of their residents effectively.

Workload and Burnout: The global challenge of nursing shortages is complicated, encompassing more than just a lack of individuals with nursing qualifications. As discussed by Buchan and Aiken (2008), the scarcity of nurses willing to work under current conditions is a major factor, exacerbated by inadequate workforce planning, poor recruitment and retention policies, ineffective use of available nursing resources, and insufficient career support. These systemic issues significantly impact healthcare delivery and outcomes, leading to increased

mortality rates, adverse events, higher levels of burnout among nurses, and compromised patient care. The situation in long-term care homes is particularly dire, as the demanding nature of the work, often understaffed environments, and challenging working conditions deter nurses from these roles, further intensifying the shortage.

In the context of Ontario, the Registered Nurses' Association of Ontario (RNAO) highlights the critical nursing staffing shortages exacerbated by the COVID-19 pandemic. This shortage has severe repercussions on patient care and nurse well-being, illustrating the urgent need for effective policy responses. The RNAO publication provides a comprehensive analysis supported by surveys, research data, and professional insights, emphasizing the importance of immediate actions to retain and recruit Registered Nurses (RNs) in Ontario. The association's recommendations focus on improving working conditions, increasing staffing levels, and enhancing support for nurses to alleviate the understaffing crisis.

Addressing the nursing shortage in LTC homes requires a multi-layered approach. As Buchan and Aiken (2008) suggest, solutions must include improved workforce planning, better recruitment and retention strategies tailored to the unique demands of LTC environments, enhanced support for career progression, and efforts to make working conditions more appealing. These strategies are crucial for mitigating the shortage and ensuring the quality of care in these critical healthcare settings. Without addressing these comprehensive challenges, the nursing shortage in LTC homes will persist, hindering the delivery of effective and compassionate care to the elderly population.

Lack of Education and Training Programs: Baumbusch, Dahlke, and Phinney (2012) explored the impact of integrating gerontological content with general adult material in nursing education. Their study found that this integrated approach significantly improved nursing

students' knowledge and attitudes towards caring for older adults. The growing demand for accelerated nursing programs and the increasing needs of an aging population necessitate such educational strategies. However, the authors highlight that standalone gerontology courses are often difficult to implement due to curricular constraints, leading to a reliance on integrated courses. While this method enhances overall understanding, it may not sufficiently prepare students for the specialized demands of long-term care settings, where a deep knowledge of gerontological care is critical (Baumbusch et al, 2012).

This gap in specialized training contributes to the challenges faced by LTC homes, which are already struggling with nursing shortages. The RNAO (2021) emphasizes that the COVID-19 pandemic has exacerbated the shortage of Registered Nurses (RNs) in Ontario, affecting both patient care and nurse well-being. Their publication emphasizes the need for immediate action to retain and recruit RNs, including improving working conditions and enhancing support for nurses' professional development. Despite these efforts, the integration of gerontological content into broader nursing curricula may not adequately address the specific needs of LTC facilities, leading to a workforce less equipped to handle the complex care requirements of older adults.

Salary: Sharma and Xu's (2022) study investigates the relationship between wages and nursing staff turnover in Iowa, United States, long-term care homes from 2013 to 2017, with a particular focus on the COVID-19 pandemic period. Their findings reveal that higher wages are associated with lower turnover rates among Certified Nurse Aides (CNAs), though this effect is not substantial enough to fully address turnover issues. Interestingly, the study notes that increasing wages did not significantly impact turnover rates for Registered Nurses or Licensed Practical Nurses (LPNs), (Sharma & Xu, 2022). This highlights the complexity of factors

influencing staff retention in LTC homes, suggesting that wage increases alone are insufficient to curb turnover among higher-qualified nursing staff.

In the context of Ontario's LTC homes, these findings are particularly relevant. In 2021, the RNAO emphasized the critical shortage of RNs exacerbated by the pandemic, underscoring the need for comprehensive strategies beyond merely increasing wages. Sharma and Xu's research supports this perspective, indicating that while higher wages can reduce CNA turnover, broader measures are necessary to retain RNs and LPNs. This includes addressing non-wage factors such as benefits, staff empowerment, and organizational culture, which are crucial for improving job satisfaction and reducing turnover rates across different types of nursing staff.

The global nature of nursing shortages, as discussed by Buchan and Aiken (2008), further complicates the issue. They highlight that poor workforce planning, ineffective recruitment and retention policies, and insufficient career support contribute significantly to the problem. In Ontario's LTC homes, these broader systemic issues are compounded by demanding work conditions and inadequate support, making it challenging to attract and retain qualified nurses. Addressing these complex challenges requires a comprehensive approach, integrating better workforce planning, tailored recruitment and retention strategies, and enhanced support for career development to ensure that LTC homes can provide high-quality care to their residents.

COVID-19 Pandemic: The COVID-19 Global Pandemic had significant effects on the LTC Sector in Ontario, and Ellen Badone's work offers a detailed ethnographic study of some of the impacts. It highlights that over 80% of COVID-19 deaths in Canada during the first wave occurred in LTC homes, with Ontario and Québec experiencing particularly high mortality rates (Badone, 2021). The crisis exposed systemic issues, including chronic understaffing and inadequate infection control, exacerbated by the pandemic. The lockdowns initiated in mid-

March 2020 left residents isolated and without the crucial support of family caregivers. The author conducted interviews with 94 participants, including family members of residents and frontline workers, to provide a grassroots perspective on the crisis.

The study criticizes the neoliberal policies and the for-profit ownership of many LTC facilities in Ontario, arguing these factors significantly contributed to the disastrous outcomes during the pandemic. The military intervention in LTC homes revealed horrifying conditions, including severe shortages of personal support workers and nurses, lack of basic care, and widespread contamination. This situation was not an isolated incident but the result of long-standing systemic neglect and underfunding. The study underscores how societal attitudes towards aging and disability have allowed such neglect to persist, leading to the marginalization of both LTC residents and workers (Badone, 2021).

The ongoing nature of the crisis into the second wave of COVID-19 indicated that initial responses were insufficient to address the deep-rooted issues in LTC. Despite the high death toll and initial outrage, the same systemic problems persisted, with inadequate staffing, poor infection control, and insufficient medical care continuing to plague the sector. The study calls for significant reforms, including the need for national standards for LTC and a re-evaluation of the for-profit model in favor of approaches that prioritize the well-being of residents and workers (Badone, 2021). This comprehensive ethnographic study serves as a crucial piece of literature in understanding the full scope of the LTC crisis in Ontario during COVID-19 and provides valuable insights for future policy changes.

ONTARIO'S CONTEXT

The long-term care sector in Ontario faces considerable challenges due to an aging population with increasingly complex care needs. By 2040, the number of seniors over 80 is expected to double, creating an urgent demand for LTC services. This demographic shift is already evident, as nearly three-quarters of caregivers express concerns about their ability to manage caregiving responsibilities. Distressed caregivers, who spend an average of 39 hours per week on caregiving tasks, report significantly higher levels of stress compared to those not in distress (Ontario Caregiver Association, 2023). This highlights the urgent need for a more robust and responsive LTC system capable of supporting both seniors and their caregivers. Presently, over 43,000 individuals are on waitlists for LTC, a number projected to grow, necessitating the creation of more than 87,300 new LTC beds by 2041 (OLTCA, 2024). The average wait time for a senior to access LTC is approximately 126 days, with some waiting up to 2.5 years. This situation is intensified by the limited number of LTC spaces, with the province operating at full capacity with just over 76,000 beds. To meet the current demand and future projections, Ontario needs to add over 30,000 new LTC spaces immediately and another 48,000 by 2029. This stark reality stresses the necessity of expanding LTC infrastructure and increasing capacity to provide timely and adequate care for the aging population. This demand for space also brings an urgent need for workforce expansion, as the complexity of care required by residents continues to increase (OLTCA, 2024).

The level of care required by residents in Ontario's LTC homes has intensified significantly. Approximately 90% of LTC residents have some form of cognitive impairment, with two-thirds of them experiencing dementia. Additionally, 97% of residents have two or more chronic conditions, necessitating a higher level of skilled care and support (Intellihealth, 2023).

Nearly 50% more residents entering long-term care require higher levels of support than in 2011 (OLTCA, 2024). As a Registered Nurse in Ontario for the last 10 years, I can confirm that the residents being admitted to long-term care in 2024 have increased physical and psychological needs, more medications, and require closer monitoring compared to years prior. In Ontario, only 5.7% of all residents in long-term care could potentially be cared for elsewhere (Canadian Institute for Health Information, 2023), which reminds us of the importance LTC homes play in our society at large. These statistics highlight the pressing need for innovative care models and a substantial increase in trained healthcare professionals to maintain quality care. The current workforce must adapt to meet the physical, emotional, and psychological needs of residents, emphasizing the critical nature of expanding and training the LTC workforce.

Staffing shortages further complicate the LTC landscape. The health and social assistance sector in Ontario has seen job vacancy rates increase by nearly 70% in four years (Statistics Canada, 2024). LTC homes are struggling to fill shifts, especially for Registered Nurses, Registered Practical Nurses, and Personal Support Workers. By 2029, Ontario will require an additional 58,600 Nurses and Personal Support Workers to meet the increased care demands and support residents in new LTC spaces (OLTCA, 2024). This represents more than double the current workforce, reflecting a critical need for bold action and coordinated efforts across all healthcare sectors to address the human resources crisis and ensure high-quality care for Ontario's aging population. Current efforts to address these shortages have included funding initiatives and recruitment programs, but a more robust and coordinated effort across all healthcare sectors is essential. All levels of government and community stakeholders must collaborate to implement sustainable solutions to ensure that Ontario's LTC sector can provide high-quality, compassionate care to its elderly population.

CONCLUSION

The conclusion of this qualitative exploration into Ontario's long-term care nursing shortage brings to light a multi-layered crisis driven by a convergence of demographic shifts, systemic inadequacies, and escalating care needs. The aging population in Ontario is growing at an unprecedented rate, with projections indicating that one in thirteen Ontarians will be over the age of 80 by 2040. This demographic shift not only increases the demand for LTC but also intensifies the complexity of care required. With more than 43,000 individuals currently on waitlists for LTC and the number expected to reach 48,000 by 2029, the system is already under immense pressure. The literature reviewed shows that this growing demand is worsened by the high levels of care needed by incoming residents, many of whom present with multiple chronic conditions, cognitive impairments, and a need for extensive support with daily living activities.

The dire shortage of nursing staff in Ontario's LTC homes presents a significant concern, profoundly impacting the quality of care administered to elderly residents within these facilities. Unraveling the underlying causes of this shortage is imperative for devising effective policy measures and intervention strategies. Baumann and Crea-Arsenio's research highlights the persistent challenges in maintaining a stable nursing workforce, attributing the shortage not only to a lack of qualified nurses but also to ineffective policy measures and workforce planning. Similarly, the Registered Nurses' Association of Ontario (RNAO) publication emphasizes how the COVID-19 pandemic has strained an already fragile healthcare system, revealing systemic issues such as inadequate staffing levels and poor working conditions for nurses. These challenges, coupled with insufficient funding and lack of support for professional development, have deterred potential nurses from entering or remaining in the LTC sector. The Ministry of Long-Term Care's 2020 Staffing Study further identifies critical issues such as high turnover

rates and the growing complexity of resident care needs, stressing the impact of these challenges on the quality of care and the well-being of both residents and staff.

Addressing the LTC nursing shortage in Ontario requires a comprehensive approach that incorporates demographic considerations, staffing solutions, and capacity expansion. The Statistics Canada (2022) report on the aging population highlights the increasing demand for LTC services and the pressing need for skilled nursing care. Inadequate funding remains a significant barrier, with LTC facilities struggling to hire and retain qualified nursing staff. The RNAO suggests actionable recommendations to address these issues, including increasing funding, improving working conditions, and enhancing support for professional development. Moreover, the COVID-19 pandemic has exacerbated existing challenges, as highlighted by Ellen Badone's ethnographic study, which calls for significant reforms, including national standards for LTC and a re-evaluation of the for-profit model. Implementing these changes will demand coordinated efforts from policymakers, healthcare providers, and community stakeholders to create a sustainable, high-quality, and responsive LTC system. By addressing these multifaceted challenges through informed policy interventions and innovative staffing models, Ontario can improve the stability and effectiveness of the nursing workforce, ultimately enhancing the quality of care for its aging population.

RECOMMENDATIONS

As a Registered Nurse with a decade of experience in Ontario's healthcare system, including the LTC sector, I propose several recommendations to improve nursing staffing in long-term care, addressing the critical factors identified in this paper. First, enhancing workforce

planning and recruitment strategies is essential. Utilizing robust data analytics can help forecast staffing needs accurately, considering demographic trends, patient acuity levels, and care complexity. Developing and expanding pipeline programs that encourage high school and college students to pursue careers in nursing, specifically targeting LTC, can address future workforce needs. Implementing streamlined processes for recognizing foreign-trained nurses' credentials and providing support for their transition into the Ontario healthcare system, including language training, cultural orientation, and mentorship programs, is crucial. Comprehensive incentive programs for nurses to join and remain in the LTC sector, such as signing bonuses, relocation assistance, tuition reimbursement for further education, and loan forgiveness for extended service, are also recommended.

Improving working conditions and job satisfaction is another key area. Implementing policies to ensure adequate nurse-to-patient ratios can reduce workload and allow nurses to provide high-quality care without risking burnout. Fostering a supportive and inclusive management culture that values nurse input, promotes professional growth, and provides opportunities for career advancement is vital. Offering comprehensive mental health support, including counseling services, stress management programs, and resilience training, alongside regular debriefing sessions and peer support groups, can help address burnout and stress. Introducing flexible scheduling options, such as shift differentials, part-time positions, and job-sharing arrangements, can make the profession more appealing and sustainable.

Educational and professional development opportunities are also essential. Enhancing nursing curricula to include more comprehensive gerontological education ensures all nursing graduates have the skills and knowledge needed to care for an aging population. Providing ongoing professional development opportunities tailored to the needs of LTC nurses, such as

advanced certifications in geriatrics, leadership training, and courses on emerging healthcare technologies and practices, is recommended. Developing additional career ladder programs that allow personal support workers (PSWs) and registered practical nurses (RPNs) to advance their careers through additional education and training, potentially becoming registered nurses (RNs) or nurse practitioners (NPs), is important. Investing in leadership development programs to prepare nurses for managerial and administrative roles within LTC facilities can drive systemic improvements.

Policy and funding initiatives are crucial for addressing the nursing shortage. Increased and sustained funding for LTC facilities is needed to ensure competitive salaries, adequate staffing, and resources necessary to provide high-quality care. Exploring public-private partnerships can provide additional funding streams and resources to enhance care delivery. Pushing for regulatory reforms that streamline licensing processes, reduce administrative burdens, and allow for greater flexibility in staffing models is important. Supporting the implementation of national standards for LTC can ensure consistent quality of care and equitable resources across all facilities, including standardized training programs, staffing requirements, and care protocols.

Finally, community and family engagement can play a significant role. Developing care models that actively involve family members in care planning and delivery ensures that residents receive comprehensive support. Fostering partnerships with community organizations to provide additional support services, such as volunteer programs, community health initiatives, and recreational activities for residents, may be beneficial. Launching public awareness campaigns to highlight the importance of LTC nursing and the challenges faced by the sector can drive advocacy efforts and attract more individuals to the profession. By implementing these

recommendations, Ontario can address the complex issues contributing to the nursing shortage in long-term care homes, creating a more sustainable, supportive, and attractive environment for nurses and ultimately improving the quality of care for Ontario's aging population.

LIMITATIONS

While this qualitative exploration paper provides valuable insights into the nursing shortage in Ontario's long-term care sector, several limitations must be acknowledged. One significant limitation is the reliance on secondary data sources and existing literature, which may not fully capture the current and nuanced realities faced by nurses and LTC facilities. The dynamic nature of healthcare, influenced by ongoing policy changes, technological advancements, and evolving demographic trends, means that some of the data and insights might quickly become outdated. Additionally, the use of qualitative methods, while beneficial for in-depth understanding, inherently limits the generalizability of the findings. The perspectives and experiences highlighted may not represent the broader population of nurses or LTC settings across Ontario or other regions.

Another limitation is the potential bias in the literature reviewed and the subjective interpretation of data. The selected studies and reports may carry their inherent biases, influenced by the authors' perspectives, funding sources, or specific contexts. Moreover, as the researcher, my interpretations and synthesis of the literature are influenced by my background and experiences, which might inadvertently shape the conclusions drawn. This subjective element, while providing depth and context, can also limit the objectivity of the study.

Lastly, the scope of the study, focusing primarily on nursing shortages within LTC homes in Ontario, means that broader systemic issues impacting the healthcare workforce might not be fully addressed. Factors such as interprofessional dynamics, the role of allied health professionals, and the influence of broader healthcare policies on LTC staffing are areas that require further exploration. Additionally, the study's emphasis on LTC facilities might overlook critical insights from other healthcare settings that could offer transferable solutions or highlight systemic issues relevant to the entire healthcare sector. Addressing these limitations in future research by incorporating diverse data sources, expanding the scope, and employing mixed methods approaches could provide a more comprehensive understanding of the nursing shortage in Ontario's LTC sector.

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