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## OPINION

# Canada is suffering from a health care system resourcing crisis – and the solution will require time and patience

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When the Nova Scotia Progressive Conservatives surged to an upset victory in August, most commentators attributed the party's success to a promise made by its Leader, Tim Houston, to improve health care. His proposed solution was captured by one line of his platform: "We need more beds, more staff, and more technology."

And indeed, to overcome the next wave of the pandemic and to improve health care, a basic variation of this theme is being proposed by just about every government.

numbers. According to Statistics Canada, the job vacancy rate in health care is at a historic high, up more than 50 per cent from last year.

Without question, the one and only resource needed to sustain and improve health care systems across the country is human: that is, qualified and engaged health professionals. However, simply adding “boots on the ground” or producing superficial one-off financial incentives to attract staff – such as Quebec’s \$18,000 bonuses for nurses – will unfortunately not succeed.

The burnout will only be exacerbated by the enormous backlog of work still to tackle. The all-consuming response effort to the peak of the COVID-19 pandemic left hundreds of thousands of Canadians waiting anxiously for potentially life-saving diagnostic testing, surgical procedures that were deemed non-urgent, and a host of consultations and basic health services.

These must now be reintroduced alongside regular day-to-day operations, led by this dwindling, traumatized and exhausted work force. The solution is not, as Sunnybrook Health Sciences Centre chief executive officer Andy Smith suggests, to ask everyone to work at 130 per cent until we’ve caught up. Working through the backlog that way would likely take years – and at a profound human and financial cost.

This may seem counterintuitive, but the first step in solving the crisis is not to immediately act. First, we need to invest time in formally debriefing the experiences of the pandemic thus far, lest they go to waste. This means asking leaders and staff at all levels, patients, families and communities where health care services got things right, and who was underserved or treated inequitably. Prioritizing the time to determine which systemic improvements are within our reach is crucial.

element at the expense of others. For example, increasing the number of hours worked by individual nurses and physicians can also increase their fatigue, absenteeism and turnover, as well as medical errors, all of which diminish the overall performance of the health system. Similarly, giving key personnel one-time bonuses will only momentarily prolong the inevitable that will occur when these same workers return, only to endure the same chaotic workplace conditions.

The responsibility of carving out time and space to reflect, to dig into the data, and to address issues in a systemic way does not belong to front-line workers; their job is to save lives. It is their leaders – and more specifically, middle-level health care managers – who can actually enact change. They're the ones who will need to have agile, adaptable and innovation-oriented mindsets to extricate time for reflection, to look at data, and to propose solutions.

Since the early months of 2020, front-line health care workers have been front and centre in our minds and in our politics. But that symbolism isn't enough, nor are simplistic solutions. The path forward will require a serious consideration of logistics – and it will require health care systems to shift the focus up the organizational chart and provide support to those who will be the ultimate catalysts of improved health care.

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