

# Nova Scotia Health Care Workers' Solutions to Immediately Improve Retention and Recruitment

– Interview, **Sandra Mullen, President, Nova Scotia Government and General Employees Union** –

**Workers' Forum:** You were quoted recently in *The Signal* newspaper as saying: "I believe we are at a breaking point," in reference to the situation in health care. Can you tell us more about this?

**Sandra Mullen:** We have been working with our health care folks and our nursing people for the past number of months. It is a crisis that they have been managing. When we say that it's at a breaking point, folks are leaving. As you know, across the country, everybody is in the same situation.

Some provinces are offering incentives and luring people back. There are people leaving Nova Scotia. I know one person myself, somebody who went back to PEI where she was from, as the government and the health authority there had such an incentive program that it drove our nurse away.

Pay is important, so when one province increases the pay rate in a certain sector, it depletes the resources we have, as people are leaving because the working conditions are terrible. When you combine all of that, you have a 30-year nurse, or a 20- or a 15-year nurse saying that they can't do that job any longer. They're looking for anything that provides better working conditions. So when we go to government and talk about recruitment and retention, we're saying that it's not just about wages, that we have to make improvements to working conditions.

We met with our emergency room (ER) department folks before Christmas. They were at a breaking point. They are so short-staffed and the concern was that people would die in the waiting room. And before we could get our information out and contact the government, somebody died in a waiting room in Amherst, in one of our local hospitals, close to the New Brunswick border. It's not our staff that manages that site, it's the Nova Scotia Nurses' Union.

All emergency rooms are so overburdened because we have a terrible lack of family doctors. The numbers have increased. We hear that they went from 90,000 to 120,000 Nova Scotians who are without a family doctor. If you don't have a family doctor, you end up in critical situations and then in an emergency room. All of those things have made the news, which have pushed this agenda. We have written a letter to government and to the health authority with 59 recommendations on some of the ways they can improve working conditions. I know you can't build a hospital overnight to increase bed capacity. Government did come out with a plan to improve the situation. Some of the things that they said need to be done, but they're not a quick fix.

Then there's the issue of travel nurses, nurses who work for an agency and do nursing as directed. They get a higher wage because they have no benefits. They go where the company tells them to go. Some of the complaints our folks have are that these nurses left their employment with the health authority, have taken a job with the agency and then show up back in the hospital, working beside the people they used to work with, but they are paid way more. Or they're working at a different hospital without access to IT [information technology], so they can't go to a computer and check the blood, so they are not fully capable, in some cases, to do the work that full-time permanent staff would do.

They are not the answer. The government has been paying millions of dollars for these travel nurses and of course the agency is getting a pile of money too. We are saying that the government has to address the issue of recruitment and retention. We need to be competitive with the other provinces, because everybody is after the same people.

We have to be able to keep staff with a competitive wage and be competitive when recruiting people as well. It's the same with the signing bonuses, or we are going to lose people to other provinces. And this is the crisis in health care across this country.

**WF:** Can you tell us something about the recommendations you made to the government regarding the emergency department crisis?

**SM:** In the recommendations, we deal with everything from security of staff to paying extra for nurses who are working short, to the inclusion of compensation packages that help to address that shortage.

But we also talk about their working conditions. For example, we need more triage nurses and support staff on-duty during the day, to allow for timely triage assessments. Our recommendations deal with changing the culture of having no breaks. Breaks are important because they reduce errors and will retain staff. Managers must actively plan for staff breaks. Our recommendations talk about registered nurses having to do blood work, as there are other people who could be doing that. We have to make use of other resources within the hospital and the health authority. The resources are not used in the best way.

Our recommendations also talk about providing basic patient comforts. Our people are working in conditions where there are folks sitting in the ER for 12-14 hours, and when you finally get them attended to, there's no food for them, there's not even tea or toast, because food services have closed. Basic food has to be available and provided to those patients.

We are working with the employer and our members to come up with solutions that would work in the interim. Our nurses have started bargaining and there are many things at issue that are beyond money. Certainly recruitment and retention are major issues.

We are constantly working with our members, on their behalf, to ensure that their safety and their concerns are met.

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