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CANADA

LABOUR SHORTAGES, WORKING CONDITIONS AND THE CARE ECONOMY

**Report of the Standing Committee on Human Resources,
Skills and Social Development and the Status of Persons
with Disabilities**

Robert J. Morrissey, Chair

**FEBRUARY 2023
44th PARLIAMENT, 1st SESSION**

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Chair**

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NOTICE TO READER

Reports from committees presented to the House of Commons

Presenting a report to the House is the way a committee makes public its findings and recommendations on a particular topic. Substantive reports on a subject-matter study usually contain a synopsis of the testimony heard, the recommendations made by the committee, as well as the reasons for those recommendations.

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**THE STANDING COMMITTEE ON
HUMAN RESOURCES, SKILLS AND SOCIAL
DEVELOPMENT AND THE STATUS OF PERSONS
WITH DISABILITIES**

has the honour to present its

SEVENTH REPORT

Pursuant to its mandate under Standing Order 108(2), the committee has studied labour shortages, working conditions and the care economy and has agreed to report the following:

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SUMMARY

As Canada recovers from the COVID-19 pandemic, labour is increasingly in demand. Record job vacancies reflect both pandemic-related challenges and long-standing structural factors such as population aging. While the effects of labour shortages are being felt across the Canadian economy, impacts have been particularly acute in the care economy—a sector including a wide range of caring professions, from health care to childcare to personal support work, which intersects with gender, race, and immigration status.

Over the course of six meetings, the House of Commons Standing Committee on Human Resources, Skills and Social Development and the Status of Persons with Disabilities (the committee) conducted a study on labour shortages and working conditions in the Canadian economy, including the care economy. It received testimony from government representatives, industry and labour organizations, advocacy groups, and researchers, as well as numerous written briefs. A variety of sectors were represented, from care economy sectors such as health care and long-term care, to other sectors such as aerospace, construction, food and beverage processing, and policing. This report outlines the findings of the study.

Through oral and written testimony, witnesses made recommendations on ways the federal government can address labour shortages in the Canadian economy, including the care economy, by investing in Canadian workers and employers, leveraging international talent, and improving working conditions. Witnesses also recommended actions to address labour challenges specifically in the care economy, including through centralized workforce planning strategies for care economy sectors, and a dedicated national body to oversee this work.

The committee heard that the impacts of the current labour crisis are being felt throughout Canada, and across economic sectors. Urgent action is required, both to address today's labour challenges and to prepare for the future. The committee also recognizes the essential contributions of those who do care work. The current crisis presents an opportunity to strengthen the care economy, including through the creation of good jobs. In this report, the committee has made recommendations to the Government of Canada aimed at furthering these critical priorities.

LIST OF RECOMMENDATIONS

As a result of their deliberations committees may make recommendations which they include in their reports for the consideration of the House of Commons or the Government. Recommendations related to this study are listed below.

Recommendation 1

That the Government of Canada coordinate with the provinces and territories with a pan-Canadian approach to enhance the collection, quality and comparability of labour market information for key sectors of the care economy, including health care; and that it conduct and disseminate analysis of this information for use in workforce planning. 46

Recommendation 2

That the Government of Canada explore options to make skills training, especially in high-demand sectors, more accessible to Canadians—including through clear, navigable information about local skills needs and training opportunities, and through modifications to existing federal programs such as the Workforce Development Agreements, the Labour Market Development Agreements, and the Canada Training Benefit. 46

Recommendation 3

That the Government of Canada work with the provinces, territories, and other stakeholders to promote the alignment of educational and training opportunities in health care and other care economy sectors with future skills and labour needs; and further, that it consider supporting a wide range of strategies to make training in care-related fields more accessible, including through online learning, flexible training options such as microcredentials, and upskilling options for workers already in the care economy. 47

Recommendation 4

That the Government of Canada, in collaboration with the provinces and territories, expand training and upskilling capacity for high demand industries, skilled workers, the care economy and health care workers, and first responders. 47

Recommendation 5

That the Government of Canada review federal skills and employment programs that target groups that are underrepresented in the labour market, such as Indigenous peoples, persons with disabilities, youth, and women, with a view to ensuring they align with current and future skills needs; and further, that it examine additional ways to support the labour market participation of these groups. 47

Recommendation 6

That the Government of Canada look at ways to amend the tax regime which is favourable for retirees who wish to return to work. 47

Recommendation 7

That the Government of Canada undertake further efforts, in collaboration with the provinces and territories, to remove unnecessary barriers to labour mobility. 47

Recommendation 8

That the Government of Canada work with the provinces and territories to remove barriers to labour mobility in the health care sector, including through the interprovincial/territorial coordination of regulation and licensing requirements. 47

Recommendation 9

That the Government of Canada support access to care in rural and remote communities by providing further incentives for in-demand health care professionals to work in these communities, including through tuition assistance, loan forgiveness, or tax benefits; that it support talent pipelines in these communities by supporting online learning in key care economy sectors and continuing efforts to improve broadband access in rural and remote regions; and further, that it explore further strategies to address labour shortages in these communities through temporary and permanent immigration. 48

Recommendation 10

That the Government of Canada proceed with the implementation of a Trusted Employer Model to fast-track Labour Market Impact Assessment (LMIA) applications from eligible employers; and further, that it review LMIA application processing practices and resource allocations to eliminate red tape and to ensure LMIAs can be processed in a timely, predictable and efficient manner. 48

Recommendation 11

That the Government of Canada consider temporary, emergency measures to enhance the accessibility of the Temporary Foreign Worker Program in sectors with the most acute labour shortages, such as extending the validity of Labour Market Impact Assessments and increasing the cap on the proportion of temporary foreign workers an employer can hire. 48

Recommendation 12

That the Government of Canada consider offering additional permanent residency pathways to temporary foreign workers with in-demand skills or experience, including in the care economy and in skilled trades..... 48

Recommendation 13

That the Government of Canada investigate ways, where appropriate, to connect employers with qualified newcomers, including but not limited to skilled refugees and temporary foreign workers. 48

Recommendation 14

That the Government of Canada review the Foreign Credential Recognition Program with a view to determining how it can better support efficient foreign credential recognition for internationally trained health care professionals. 49

Recommendation 15

That the Government of Canada review compensation and benefits for care economy workers under its jurisdiction with a view to ensuring decent work and a regionally competitive wage; and further, that it work with the provinces and territories to improve working conditions for other workers in the care economy (including but not limited to migrant workers, and those in non-standard employment) and provide adequate compensation, basic health benefits, paid sick days, and workload management. 49

Recommendation 16

Further, that the Government of Canada consider establishing a national Care Economy Commission to develop, implement and monitor any workforce planning strategies for the care economy, including a centralized health care human resources strategy; and, develop and monitor national standards for care. 49



LABOUR SHORTAGES, WORKING CONDITIONS AND THE CARE ECONOMY

INTRODUCTION

As Canada recovers from the COVID-19 pandemic, labour is increasingly in demand. Record job vacancies reflect both pandemic-related challenges and long-standing structural factors such as population aging. While the effects of labour shortages are being felt across the Canadian economy, impacts have been particularly acute in the care economy—a sector including a wide range of caring professions, from health care to childcare to personal support work, which intersects with gender, race, and immigration status.

On 3 February 2022, the House of Commons Standing Committee on Human Resources, Skills and Social Development and the Status of Persons with Disabilities (HUMA, or the committee) adopted the following motion:

That, pursuant to Standing Order 108(2), the committee undertake a study of the labour shortages and workers' conditions within the entirety of the Canadian economy, including but not limited to, the care economy including healthcare workers, personal support workers, and childcare workers who have been on the frontlines of COVID-19, and examine how the government, in collaboration with the provinces and territories, could improve working conditions in the care economy; that the committee proceed to an overview on the impact of the labour shortages in the Canadian workforce on the first meeting of the study; that the committee invite the Minister of Employment, Workforce Development and Disability Inclusion, experts and departmental officials to testify; that the committee hold at least six meetings; that the committee report its findings and recommendations to the House; and that, pursuant to Standing Order 109, the committee request that the government table a comprehensive response to the report.¹

As a part of this study, the committee held 6 meetings between 3 March and 25 April 2022, hearing from a total of 49 witnesses, including government

1 House of Commons, Standing Committee on Human Resources, Skills and Social Development and the Status of Persons with Disabilities (HUMA), [Minutes of Proceedings](#), 3 February 2022.



representatives, industry and labour organizations, advocacy groups, and researchers. A variety of sectors were represented, from care economy sectors such as health care and long-term care, to other sectors such as aerospace, construction, food and beverage processing, and policing. The committee also received 29 briefs. The committee would like to sincerely thank all those who participated for their important contributions to this study.

The committee heard that the impacts of the current labour crisis are being felt throughout Canada, and across economic sectors. Urgent action is required, both to address today's labour challenges and to prepare for the future. The committee also recognizes the essential contributions of those who do care work. The current crisis presents an opportunity to strengthen the care economy, including through the creation of good jobs.

In this report, the committee provides an overview of what it heard, as well as recommendations directed to the Government of Canada. After providing background information on the current status of labour shortages in Canada, the committee summarizes key testimony pertaining to three facets of addressing labour shortages in the Canadian economy, including the care economy: investing in workers and employers, accessing international talent, and improving working conditions. Finally, it shares its findings on solutions specific to the care economy.

CHAPTER 1: BACKGROUND INFORMATION

Before the committee, witnesses discussed the current state of labour shortages in the Canadian economy, including the care economy and other key sectors, and highlighted the causes and impacts of these labour shortages.

Labour Shortages in the Canadian Economy

Labour shortages occur when the existing supply of qualified workers is insufficient to meet demand for labour. Federal officials who appeared before the committee discussed labour demand in terms of job vacancies, or the number of jobs that need to be filled. Rachel Wernick, Senior Assistant Deputy Minister of the Skills and Employment Branch at Employment and Social Development Canada (ESDC), told the committee that as of December 2021, the number of job vacancies in Canada had almost doubled since before the COVID-19 pandemic, reaching approximately 900,000.² (Note that the

2 HUMA, *Evidence*, 3 March 2022, 1535 (Rachel Wernick, Senior Assistant Deputy Minister, Skills and Employment Branch, Department of Employment and Social Development).

number of job vacancies continued to rise, peaking at 1,036,800 vacant positions in May 2022, before falling to 964,000 in July 2022.³) Vincent Dale, Director of the Centre for Labour Market Information at Statistics Canada, noted that job vacancies had been trending upward since 2015, but experienced a sharper acceleration during the pandemic.⁴

Josée Bégin, Director General of Labour Market, Education and Socio-Economic Well-Being at Statistics Canada, provided an overview of labour supply. Bégin stated that in February 2022, “the unemployment rate⁵ fell to a near historic low of 5.5% while the participation rate⁶ reached a record high among core-aged workers”—indicators of an “increasingly tight labour market.”⁷ It should be noted that the unemployment rate continued to decline in 2022, falling to 4.9% in July 2022.⁸

Wernick explained that while some vacancies (such as those in the food service, tourism and retail sectors) are expected to resolve as the labour market reopens, other labour shortages (such as those in construction, professional, scientific and technical services, and health care) are structural, and related to factors such as rising skills requirements and an aging population.⁹ As a result, Wernick highlighted youth as a critical source of new labour market entrants in the next decade.¹⁰

Labour Shortages in the Care Economy

The committee heard that the current labour crisis is a pan-Canadian challenge, the impacts of which are being felt throughout the Canadian economy. Many of the sectors

3 Statistics Canada, “[Payroll employment, earnings and hours, and job vacancies, July 2022](#),” *The Daily*, 29 September 2022.

4 *Evidence*, 28 March 2022, 1125 (Vincent Dale, Director, Centre for Labour Market Information, Statistics Canada).

5 Refers to “the number of unemployed persons expressed as a percentage of the labour force.” Statistics Canada, “[Table 14-10-0374-01, Employment and unemployment rate, monthly, unadjusted for seasonality](#),” Database, accessed 17 September 2022.

6 Refers to “the number of labour force participants expressed as a percentage of the population 15 years of age and over.” Statistics Canada, “[Table 14-10-0374-01, Employment and unemployment rate, monthly, unadjusted for seasonality](#),” Database, accessed 17 September 2022.

7 *Evidence*, 28 March 2022, 1120 (Josée Bégin, Director General, Labour Market, Education and Socio-Economic Well-Being, Statistics Canada).

8 Statistics Canada, [Chart 2, Unemployment rate up in August](#), “Labour Force Survey, August 2022,” *The Daily*, 9 September 2022.

9 *Evidence*, 3 March 2022, 1535 (Wernick).

10 Ibid.



that have felt acute effects, such as health care and long-term care, are part of the care economy. The section below provides an overview of Canada’s care economy, followed by a summary of testimony received related to labour challenges in the sector.

A Portrait of the Care Economy

In its 2018 report *Care Work and Care Jobs: For the Future of Decent Work*, the International Labour Organization defined the care economy as “the sum of all forms of care work,”¹¹ including in sectors such as health, social work and education.¹² The ILO provides the following detailed definition of care work:

Care work consists of two overlapping activities: *direct, personal and relational care activities*, such as feeding a baby or nursing an ill partner; and *indirect care activities*, such as cooking and cleaning. Unpaid care work is care work provided without a monetary reward by unpaid carers. Unpaid care is considered as work and is thus a crucial dimension of the world of work. Paid care work is performed for pay or profit by care workers. They comprise a wide range of personal service workers, such as nurses, teachers, doctors and personal care workers. Domestic workers, who provide both direct and indirect care in households, are also part of the care workforce.¹³

Josée Bégin of Statistics Canada explained to the committee that, based on the 2016 census, care workers account for almost one in five employed persons in Canada.¹⁴ Armine Yalnizyan of the Atkinson Foundation told the committee that the care economy accounts for 12.6% of GDP, and further, serves as a “foundation for all other economic activity.”¹⁵

Based on data from Statistics Canada’s Labour Force Survey, the committee learned that care workers are less likely to have a permanent job than non-care workers, are somewhat less likely to work full time, and are more likely to hold multiple jobs at once.

11 International Labour Organization (ILO), *Care Work and Care Jobs: For the Future of Decent Work*, 2018, p. 10.

12 Ibid., p. 165.

13 Ibid., p. xxvii.

14 *Evidence*, 28 March 2022, 1120 (Bégin).

15 *Evidence*, 31 March 2022, 1545 (Armine Yalnizyan, Atkinson Fellow on the Future of Workers, Atkinson Foundation).

Bégin indicated that “the quality of employment in the care economy is uneven,” with slightly over half of care workers being covered by a collective agreement.¹⁶

The committee also heard that almost three quarters of care workers are women, with these workers often belonging to racialized groups.¹⁷ Bégin specified, for example, that Black and Filipino people were highly overrepresented among nurse aides, orderlies and patient service associates.¹⁸ However, Leah Nord of the Canadian Chamber of Commerce pointed to a lack of demographic data on those employed in other key occupations in the care economy—for example, she noted that information was not available on how many women, Indigenous peoples and new Canadians work in childcare and early learning professions, and where in the country they are employed.¹⁹

Labour Challenges During and After the COVID-19 Pandemic

The committee received a wealth of oral and written testimony pertaining to labour challenges in the care economy. Bégin told the committee that despite a 6% rise in payroll employment in the health care and social assistance sector over the past two years, job vacancies in the sector almost doubled, fueled by “unprecedented labour demand placed by COVID-19 on the health care system.”²⁰

Several organizations described chronic understaffing in different sectors of the care economy during the pandemic. For example, Linda Silas, President of the Canadian Federation of Nurses Unions, told the committee:

[P]rior to the pandemic we had a health care human resource shortage. Today we're in a crisis. Nationally, 25% of nurses are saying they are going to leave health care completely, and 50% are saying they want to change jobs. [...] Among our members, 83% are telling us they are working understaffed ever[y] day.²¹

16 *Evidence*, 28 March 2022, 1120 (Bégin).

17 *Evidence*, 28 March 2022, 1120 (Bégin); *Evidence*, 3 March 2022, 1620 (Wernick); *Evidence*, 28 March 2022, 1105 (Naomi Lightman, Assistant Professor of Sociology, University of Calgary).

18 *Ibid.*

19 *Evidence*, 3 March 2022, 1640 (Leah Nord, Senior Director, Workforce Strategies and Inclusive Growth, Canadian Chamber of Commerce).

20 *Evidence*, 28 March 2022, 1120 (Bégin).

21 *Evidence*, 21 March 2022, 1115 and 1150 (Linda Silas, President, Canadian Federation of Nurses Unions [CFNU]).



Jodi Hall, representing the Canadian Association for Long Term Care, stated that there were “more than 30,000 vacant jobs in nursing and residential care homes across Canada” during the third quarter of 2021.²²

Further, in a written submission to the committee, the Canadian Association of Medical Radiation Technologists explained that staffing in the medical radiation technology sector has not kept up with increasing workload, resulting in staff burnout. The organization noted that vacancies in CT imaging and magnetic resonance imaging (MRI) have increased three- to five-fold since 2019, and alluded to “workloads of historic proportions” expected in the aftermath of the COVID-19 pandemic.²³

Labour needs in Canada’s care economy are set to rise due to an aging population. That same aging population means there will also be fewer workers to provide that care. As Armine Yalnizyan asserted, “there is no more pressing labour market issue than how we prepare the care economy for the decades of population aging that lie ahead, making today's challenges pale in comparison.”²⁴

Labour Shortages in Other Sectors

The committee also heard about critical labour shortages from representatives of other sectors, including construction, aerospace, and food and beverage processing. Kevin Lee, representing the Canadian Home Builders’ Association (CHBA), stated that 70% of CHBA members were experiencing labour challenges, potentially delaying the completion of housing starts; and further, that 20% of the construction labour force is expected to retire in the next ten years.²⁵ Andréane Martel of the Comité sectoriel de main-d’oeuvre en aérospatiale spoke to the impacts of labour shortages in Quebec’s aerospace sector—namely, decreasing competitiveness on the world stage:

The shortage of specialized workers interferes with our companies' growth, causes them to lose contracts, hurts operations and innovation, and puts a brake on expanding imports. So the vitality of our businesses is seriously in issue. The lack of succession and the exacerbation of wage bidding wars may lead to subsidiaries of multinationals

22 [Evidence](#), 21 March 2022, 1205 (Jodi Hall, Chief Executive Officer, Canadian Association for Long Term Care [CALTC]).

23 HUMA, [Submission](#) (Canadian Association of Medical Radiation Technologists [CAMRT]), March 2022, p. 6.

24 [Evidence](#), 31 March 2022, 1545 (Yalnizyan).

25 [Evidence](#), 31 March 2022, 1655 and 1710 (Kevin Lee, Chief Executive Officer, Canadian Home Builders’ Association).

moving away, a loss of competitiveness as compared to other provinces and countries, and accelerated decline in the aerospace sector's presence on the world scene.²⁶

With regards to the food and beverage industry, Kathleen Sullivan of Food and Beverage Canada asserted that the sector is “facing a destabilizing labour crisis,” with food plants reporting structural vacancy rates of 20% or more. Labour shortages are expected to continue past the pandemic, she said, exacerbated by significant retirements that are projected over the next five years. Dimitri Fraeys of the Conseil de la transformation alimentaire du Québec explained the consequences of sustained shortages:

The inability to maintain a stable workforce impacts on food security, economic recovery and animal welfare, and it undermines the sector's ability to sustain a national agriculture and food system. [...] While food and beverage processing is only one of many sectors experiencing labour shortages, the inability to meet current needs will impact national food security and affordability, as well as the ability of Canadians to easily access the food they want. An increase in the cost of food will be an additional challenge due to inflation, which has already increased the cost of living.²⁷

In addition, the committee heard that small businesses have also been hit particularly hard. As Jasmin Guénette of the Canadian Federation of Independent Business (CFIB) explained,

the impact of labour shortages on small businesses is quite massive. Small businesses tend to be more labour intensive, so when you have a small business with five to seven employees and you lose one or two of them, that's 10% or 20% of your entire labour force that you need to replace.²⁸

Indeed, a November 2021 survey of 4,514 independent businesses by the CFIB indicated that more than half of small businesses were affected by labour shortages. Of these businesses, 61% did not have all the staff needed for current operations, and 39% did not have the staff needed to expand.²⁹

26 [Evidence](#), 4 April 2022, 1215 (Andréane Martel, General Manager, Comité sectoriel de main-d'oeuvre en aérospatiale).

27 [Evidence](#), 31 March 2022, 1700 (Dimitri Fraeys, Vice-President, Innovation and Economic Affairs, Conseil de la transformation alimentaire du Québec).

28 [Evidence](#), 4 April 2022, 1300 (Jasmin Guénette, Vice-President, National Affairs, Canadian Federation of Independent Business [CFIB]).

29 [Submission](#) (CFIB), April 2022, p. 4.



CHAPTER 2: INVESTING IN CANADIAN WORKERS AND EMPLOYERS

Further investment in the capacity of Canadian workers and employers is urgently needed to address the current labour crisis, as well as future labour needs. In the care economy as well as in other sectors, better labour market information is required to guide workforce planning and investments. Canadian workers need to gain the skills that are in highest demand. The Canadian economy also needs to tap into the potential of workers who are underrepresented or underutilized. Worker mobility between provinces and territories should be facilitated. In addition, action is needed to ensure that rural and remote communities are not left behind. Finally, the Government of Canada can invest in the capacity of Canadian businesses by supporting and incentivizing the adoption of technology. This chapter summarizes key testimony received in each of these areas.

Labour Market Information

Labour market information is a critical tool for understanding existing labour gaps, as well as planning for future labour market needs. As the Canadian Chamber of Commerce explained in a background document submitted to the committee, “[a]ddressing talent shortages starts with labour market information about current and future business needs, and then building sustained talent pipelines that supply those requirements.”³⁰ The committee is aware of existing federal efforts to improve the quality and accessibility of labour market information in Canada, including through the Labour Market Information Council, a joint initiative of the federal, provincial and territorial governments.³¹ The section below highlights key labour market information needs in various sectors of the care economy, as well as policing.

Labour Market Information Needs in the Care Economy

The committee heard from witnesses that there is a role for the federal government in improving labour market information for the care economy. For example, Leah Nord of the Canadian Chamber of Commerce recommended that the federal government play a key role in facilitating, convening and funding “labour market information, analysis and demand-side workforce planning for key professions and sectors.”³² The committee also

30 Canadian Chamber of Commerce, *Pre-Budget Submission to Finance Canada*, 25 February 2022, p. 8.

31 *Evidence*, 25 April 2022, 1250 (Hon. Carla Qualtrough, Minister of Employment, Workforce Development and Disability Inclusion); LMIC, *About LMIC*.

32 *Evidence*, 3 March 2022, 1640 (Nord). See also *Evidence*, 25 April 2022, 1205 (Michelle Eaton, Vice-President, Public Affairs, Ontario Chamber of Commerce).

heard about the need for better labour market information for the care sector as a whole,³³ with some organizations supporting the creation of a centralized body that would collect labour market information, examine labour needs for different professions in the care economy, or work to improve existing data infrastructure.³⁴

In health care, the Canadian Nurses Association expanded on the federal government’s potential role:

Effective pan-Canadian planning cannot take place with data that is incomplete and misaligned, especially during public health emergencies. [...] The federal government has an important coordinating and convening role to play on a pan-Canadian level. It can pool resources and it has the authority to coordinate health workforce data while making intelligence and analysis available to the provinces and territories for the purposes of effective planning at the regional level. Efforts should include ensuring minimum data standards across jurisdictions, enhanced data collection, accessible decision-making tools, and capacity for analytics and policy analysis.³⁵

In a brief submitted to the committee, the Canadian Association of Social Workers pointed to insufficient demographic, labour market and education/training-related information for the social work sector, requesting funding for a study on “the number of social workers, or proportion of social workers in different practice areas, working across Canada and whether this workforce has the capacity to meet current or projected needs of Canadians.”³⁶

With regards to the nursing sector, the committee heard about a need for a “pan-Canadian unique nursing identifier” (a lifetime number assigned to each nurse) to support human resource planning in the sector.³⁷ With regards to the long-term care sector, a representative of the Canadian Association for Long Term Care highlighted an

33 [Submission](#) (Colleges and Institutes Canada [CIC]), April 2022, p. 8; [Submission](#) (Canadian Union of Public Employees [CUPE]), 7 April 2022, p. 1; [Submission](#) (Ontario Nonprofit Network [ONN]), April 2022, p. 9.

34 [Evidence](#), 21 March 2022, 1115 and 1150 (Silas); [Submission](#) (Canadian Dental Assistants Association [CDA]), p. 3; [Submission](#) (Canadian Health Workforce Network), pp. 4–5; [Evidence](#), 28 March 2022, 1215 (Michael Villeneuve, Chief Executive Officer, Canadian Nurses Association [CNA]); [Submission](#) (CNA), 31 March 2022, p. 8; [Submission](#) (HealthCareCAN), 1 April 2022, p. 7; [Submission](#) (CAMRT), March 2022, p. 7.

35 [Submission](#) (CNA), 31 March 2022, p. 8.

36 [Submission](#) (Canadian Association of Social Workers [CASW]), 7 March 2022, p. 1.

37 [Submission](#) (CNA), 31 March 2022, pp. 7–9.



opportunity to collect disaggregated data on the sector through Statistics Canada’s Labour Force Survey.³⁸

When it came to personal support work, two witnesses pointed to a need to clearly define roles for the purpose of data collection, pointing to a range of titles that are currently used for personal support workers (e.g., community care assistants, personal care aids, home support workers).³⁹ A witness from the Canadian Support Workers Association advocated for the national adoption of a single title, in part to assist with the interprovincial sharing of data.⁴⁰

Labour Market Information Needs in Policing

While the committee received a wealth of testimony on the care economy in particular, it also heard about a need for better labour market information in policing. The National Police Federation recommended that the federal government “undertake a study of RCMP labour shortages, with a focus on identifying why applications are declining, the recruiting process and standards and how to improve the image of policing as a career option.”⁴¹

The committee heard from witnesses that high-quality labour market information is crucial for effective workforce planning. It also recognizes that for many sectors of the care economy, improved labour market information is required to better understand current labour challenges and prepare for future needs. The committee heard about the need for the federal government to work with the provinces and territories to enhance, analyze and disseminate labour market information for key care economy sectors.

Skills and Training

The skills development and training options available to Canadians play an important role in ensuring employers can access the talent they need. Ensuring skills development and training opportunities are accessible to Canadians, especially when it comes to the fields in highest demand, is critical not just for the current labour force, but also for the future. The section below highlights skills and training needs in the Canadian economy

38 [Evidence](#), 21 March 2022, 1240 (Hall).

39 [Evidence](#), 21 March 2022, 1245 (Ian DaSilva, Director of Operations, Canadian Support Workers Association); [Evidence](#), 21 March 2022, 1245 (Christina Bisanz, Chief Executive Officer, CHATS Community and Home Assistance to Seniors).

40 [Evidence](#), 21 March 2022, 1245 (DaSilva).

41 [Submission](#) (National Police Federation), April 2022, p. 3.

as a whole, in the care economy, and in other sectors, such as construction and aerospace.

Skills and Training Needs in the Canadian Economy

During her appearance before the committee, Rachel Wernick of ESDC explained that “labour shortages are not a purely numbers issue,” but “also a skills mismatch issue.” She went on to explain,

[a]s the skills required for jobs continue to rise with the introduction of new technologies, most workers will need to upgrade their skills. As some jobs disappear, it will be important for workers to have access to training to upskill and re-skill so they can fill new and emerging opportunities.⁴²

Similarly, a representative of the Fédération des travailleurs et travailleuses du Québec emphasized the need for skills development and requalification opportunities to deal with labour market changes resulting from measures to address climate change.⁴³ In the automotive industry in particular, it was noted that “[c]urrent skills training is not enough to keep pace with emerging vehicle technology.”⁴⁴

Witnesses suggested a range of options for the government to support skills training opportunities in in-demand areas—for example, investing in post-secondary learning infrastructure (e.g., laboratories),⁴⁵ and increasing alignment of Workforce Development Agreements and Labour Market Development Agreements with what the labour market needs going forward.⁴⁶ These agreements, administered by ESDC, provide funding to the provinces and territories to support the delivery of employment and skills training programs and help unemployed Canadians with skills training and employment assistance.⁴⁷

The committee also heard about ways to enhance the Canada Training Benefit (CTB)—a federal initiative, announced in Budget 2019, that would support workers in pursuing

42 [Evidence](#), 3 March 2022, 1535 (Wernick).

43 [Evidence](#), 2 March 2022, 1140 (Denis Bolduc, General Secretary, Fédération des travailleurs et travailleuses du Québec).

44 [Submission](#) (Automotive Industries Association of Canada), 1 April 2022, p. 2.

45 [Evidence](#), 28 March 2022, 1115 (Sarah Watts-Rynard, Chief Executive Officer, Polytechnics Canada). See also [Submission](#) (CIC), April 2022, p. 8.

46 [Evidence](#), 3 March 2022, 1700 (Siobhan Vipond, Executive Vice-President, Canadian Labour Congress [CLC]).

47 Government of Canada, [Labour Market Transfer Agreements](#).



training.⁴⁸ Georgina Black, Managing Partner of Government and Public Services at Deloitte, recommended that the government enhance the CTB by improving government-business collaboration to better align skills with what is most in-demand,⁴⁹ and by raising awareness of training opportunities. In particular, Polytechnics Canada recommended a navigation tool that would “[highlight] specific areas of skill shortage in [a person’s] occupation or region and a directory of where those skills can be acquired,” with an emphasis on short-term upskilling and reskilling programs.⁵⁰

Skills and Training Needs in the Care Economy

The committee also received a wealth of testimony related to skills and training needs in the care economy, and heard about opportunities for the federal government to collaborate with the provinces and territories to help meet these needs. Several witnesses highlighted insufficient higher education spaces for nurses or health care workers as a whole.⁵¹ A brief from HealthCareCAN, for example, recommended that the federal government

[c]ollaborate with provincial and territorial governments, regulators, and educational institutions to train more Canadian healthcare workers—particularly from Indigenous communities—in the professions and fields necessary to meet the long-term needs of the healthcare systems.⁵²

Additional ways the federal government could support education for the care economy include, for example, increasing access to work-integrated learning opportunities;⁵³ and making skills development in care-related fields more accessible to Canadians by supporting the development of flexible, innovative training options such as

48 Government of Canada, “[The Canada Training Benefit](#),” *Budget 2019*.

49 [Evidence](#), 25 April 2022, 1130 (Georgina Black, Managing Partner, Government and Public Services, Deloitte).

50 [Evidence](#), 28 March 2022, 1115 (Watts-Rynard).

51 [Evidence](#), 21 March 2022, 1105 (Silas); [Evidence](#), 28 March 2022, 1215 (Villeneuve); [Submission](#) (CNA), 31 March 2022, pp. 2 and 4; [Submission](#) (Canadian Psychological Association [CPA]), 8 April 2022, p. 5.

52 [Submission](#) (HealthCareCAN), 1 April 2022, p. 8.

53 [Submission](#) (CIC), April 2022, p. 7.

microcredentials⁵⁴ and supporting post-secondary institutions in shifting to online-based curricula.⁵⁵

There are also opportunities relating to the upskilling of workers already in the care economy.⁵⁶ For example, the president of the Canadian Federation of Nurses Unions highlighted the ability of skilled trades workers to collect Employment Insurance (EI) benefits while in training and suggested examining this possibility for health care workers such as personal care workers and nurses.⁵⁷ Armine Yalnizyan of the Atkinson Foundation called for “more timely and targeted training, including ‘learning while earning’ programs.”⁵⁸

Skills and Training Needs in Construction and Aerospace

Witnesses also mentioned skills and training in relation to specific sectors. For example, in the construction industry, witnesses recommended supporting apprenticeship pathways and programs, including by continuing the Union Training and Innovation Program (which funds innovative approaches to address apprenticeship challenges, as well as the purchase of training equipment),⁵⁹ and continuing federal actions to promote careers in the skilled trades.⁶⁰ Further, a witness from the Comité sectoriel de main-d’œuvre en aérospatiale called for greater coordination between the federal and Quebec governments in order to recruit international students into aerospace educational programs (such as recognition of diplomas and equivalencies, and shorter application processing times).⁶¹

The committee heard that skills and training are critical to meeting Canada’s current and future labour challenges. The federal government, in collaboration with provinces and

54 Ibid.

55 [Submission](#) (Canadian Dental Association [CDA]), April 2022, p. 7.

56 See, for example, [Submission](#) (ONN), April 2022, p. 9; [Submission](#) (CUPE), 7 April 2022, p. 1.

57 [Evidence](#), 21 March 2022, 1155 (Silas).

58 [Evidence](#), 31 March 2022, 1545 (Yalnizyan).

59 [Evidence](#), 4 April 2022, 1155-1200 (Sean Strickland, Executive Director, Canada’s Building Trades Unions); 1155 (Mark Ellerker, Business Manager, Hamilton-Brantford Building Trades Council, Canada’s Building Trades Unions); Government of Canada, [About the Union Training and Innovation Program](#).

60 [Evidence](#), 31 March 2022, 1655 (Lee).

61 [Evidence](#), 4 April 2022, 1215 (Martel).



territories, can help to ensure that training opportunities are accessible to Canadian workers and align with skills needs.

Engaging Underrepresented Populations

Another strategy to address labour shortages in the Canadian economy, including the care economy, is to engage populations that are underrepresented or underutilized in the labour market—such as Indigenous peoples, persons with disabilities, youth, and women.⁶² Rachel Wernick of ESDC told the committee that over two million new workers could be added to the labour market just by closing the gap in the labour market participation rate of underrepresented groups.⁶³ During her appearance before the committee, the Honourable Carla Qualtrough, Minister of Employment, Workforce Development and Disability Inclusion, described federal actions in this area, including a proposed investment of \$272.6 million for an employment strategy for persons with disabilities in Budget 2022.⁶⁴

Witnesses described a range of ways the federal government can further invest in underutilized groups, both within and beyond existing federal programming. Siobhan Vipond, Executive Vice-President of the Canadian Labour Congress, described the importance of a national, accessible childcare system, calling this “a crucial investment in women’s full and equal” participation in the labour market.⁶⁵ At the same time, Jodi Hall of the Canadian Association for Long Term Care identified the long-term sector as an area where more men could be engaged, noting that women make up 90% of Canada’s long-term care workforce.⁶⁶

In a brief submitted to the committee, United Way Centraide Canada pointed to a need for more Indigenous professionals in the early learning and childcare field, calling for a Canada-wide early learning and childcare workforce strategy that would, in part,

62 [Evidence](#), 31 March 2022, 1620 (Yalnizyan). See also Canadian Chamber of Commerce, [Pre-Budget Submission to Finance Canada](#), 25 February 2022, p. 8; [Evidence](#), 4 April 2022, 1150 (Strickland); [Evidence](#), 31 March 2022, 1655 (Lee); [Evidence](#), 25 April 2022, 1120 (Rocco Rossi, President and Chief Executive Officer, Ontario Chamber of Commerce).

63 [Evidence](#), 3 March 2022, 1535 (Wernick).

64 [Evidence](#), 25 April 2022, 1215 (Qualtrough); Government of Canada, [A Plan to Grow Our Economy and Make Life More Affordable, Budget 2022](#), p. 124.

65 [Evidence](#), 3 March 2022, 1645 (Vipond). See also [Submission](#) (Canadian Labour Congress [CLC]), April 2022, p. 1.

66 [Evidence](#), 21 March 2022, 1230 (Hall).

“include funding and strategies to address the shortage of qualified First Nations, Inuit and Métis early childhood educators.”⁶⁷

The committee heard about a need to better engage underrepresented groups in the skilled trades, with Kevin Lee of the Canadian Home Builders' Association highlighting that “[a] large portion of new recruitment will [...] need to come from groups traditionally under-represented in the construction labour force, including women, [I]ndigenous people and new Canadians.”⁶⁸ Further, Sean Strickland of Canada's Building Trades Unions indicated that the sector is currently undertaking efforts to engage more women and underrepresented groups.⁶⁹ In a written submission, the Automotive Industries Association of Canada suggested that raising awareness and breaking the stigma around careers in the skilled trades could help attract more individuals from underrepresented groups.⁷⁰

Other witnesses spoke to the importance of further engaging youth—a group that Wernick explained is the “biggest source of new entrants to the labour market, with 4.9 million young jobseekers expected to enter the workforce by 2028.”⁷¹ For example, Andréane Martel of the Comité sectoriel de main-d'oeuvre en aérospatiale highlighted a need to promote aerospace as a promising sector for youth, especially youth in Quebec.⁷² Mike Collins-Williams of West End Home Builders' Association spoke to the importance of tapping into youth, particularly marginalized youth from communities with high unemployment rates, in the construction sector. The sector is already raising awareness about careers in the trades through presence at job fairs and engagement with guidance staff and teachers at the high school level. Collins-Williams pointed to a potential role for the federal government in promoting the “diversity of job opportunities” available to youth, including careers in construction.⁷³

Jasmin Guénette from the CFIB also suggested strategies for the federal government to support businesses to hire more youth. Guénette recommended that the government reduce the cost of hiring and training youth by providing businesses who do so with a

67 [Submission](#) (United Way Centraide Canada), April 2022, p. 7.

68 [Evidence](#), 31 March 2022, 1655 (Lee).

69 [Evidence](#), 4 April 2022, 1150 (Strickland).

70 [Submission](#) (Automotive Industries Association of Canada), 1 April 2022, pp. 1–2.

71 [Evidence](#), 3 March 2022, 1535 (Wernick).

72 [Evidence](#), 4 April 2022, 1245 (Martel).

73 [Evidence](#), 31 March 2022, 1740 (Mike Collins-Williams, Chief Executive Officer, West End Home Builders' Association).



holiday from EI contributions, expanding the Canada Summer Jobs program (which provides wage subsidies to eligible employers who provide summer work experiences to youth) to make it available year-round, and offering tax credits to businesses that hire students through post-secondary placements, co-op programs or internships.⁷⁴

Finally, the committee also heard about retirees as a potential source of labour for sectors experiencing skills shortages. Jasmin Guénette indicated that “a lot of companies would like to hire retirees who can work a few days a week to perform certain jobs,” noting that “[t]ax arrangements could then be made, in particular so that payroll deductions or payroll taxes were reduced for these workers, to encourage more retirees to come back to the labour market, if only part-time.”⁷⁵ Michael Villeneuve of the Canadian Nurses Association agreed that such tax measures could be a reasonable solution, but noted that, in the context of health care, it may be more viable to transition retirees into some areas (e.g., vaccine clinics) than others (e.g., critical care, acute care, operating rooms).⁷⁶

There are opportunities for the federal government to do more to support and engage Canadians who are underrepresented in the labour market, including by ensuring skills and employment programming targeting these groups aligns with current and projected skills needs in the highest-demand sectors.

Labour Mobility

Enhancing labour mobility between provinces and territories is another strategy that can help address labour needs in specific regions or sectors. This section considers labour mobility in the care economy and in the construction sector.

Labour Mobility in the Care Economy

The committee heard that it is important to act now to improve labour mobility in the care economy. Katharine Smart of the Canadian Medical Association emphasized that “the barriers we've created over time for doctors and nurses practising in a new province or territory aren't helping to fill the 118,000 job vacancies in health care and

74 *Evidence*, 4 April 2022, 1250 (Guénette). See also Government of Canada, [Canada Summer Jobs](#).

75 *Evidence*, 4 April 2022, 1240 (Guénette).

76 *Evidence*, 28 March 2022, 1300 (Villeneuve).

social assistance across the country.”⁷⁷ The Canadian Psychological Association explained the following in a written brief:

The pandemic has shown us that, increasingly, health care services can be delivered virtually. Currently, the regulation of Canada’s health providers is done provincially and territorially. Entry-to-practice requirements vary from one jurisdiction to another, and a health care provider cannot necessarily provide services outside of their province or territory of registration. While the Agreement on Internal Trade, and the Canadian Free Trade Agreement mandated health regulators to ensure mobility, these federal directives did not give regulators the authority to set common licensing requirements. When it comes to health care, the pandemic has underscored the limitations of systems that are provincially and territorially based, rather than nationally based.⁷⁸

To address these challenges, Smart called for “a pan-Canadian licensure model” that would “allow health professionals to work where they would like and where the needs are greatest.”⁷⁹ In written submissions to the committee, HealthCareCAN and the Canadian Psychological Association advocated for similar solutions, such as the government supporting “interprovincial/territorial coordination of education and licensing” and “[addressing] the [i]nter-[p]rovincial/[t]erritorial [r]egulation of [h]ealth [c]are providers”.⁸⁰

During her appearance before the committee, the Minister of Employment, Workforce Development and Disability Inclusion stated that the government’s Sectoral Workforce Solutions Program (which funds projects that help address current and emerging workforce needs in key sectors) recently launched a call for proposals prioritizing the health sector, and that funded projects could include those examining solutions to labour mobility challenges in the sector.⁸¹

Through oral and written evidence, the committee heard from witnesses that there are opportunities for the federal government to undertake further efforts, in collaboration with the provinces and territories, to incentivize and coordinate the removal of

77 [Evidence](#), 28 March 2022, 1210 (Katharine Smart, President, Canadian Medical Association).

78 [Submission](#) (CPA), 8 April 2022, p. 5.

79 [Evidence](#), 28 March 2022, 1210 (Smart).

80 [Submission](#) (HealthCareCAN), 1 April 2022, p. 5; [Submission](#) (CPA), 8 April 2022, p. 5.

81 [Evidence](#), 25 April 2022, 1215 (Qualtrough); Government of Canada, [About the Sectoral Workforce Solutions Program](#).



unnecessary barriers to labour mobility among care workers, including by facilitating the alignment of regulation and licensing requirements.

Labour Mobility in the Construction Sector

In the construction sector, Sean Strickland of Canada’s Building Trades Unions and Mark Ellerker of the Hamilton-Brantford Building Trades Council both called for a skilled trades workforce mobility tax deduction, with the latter explaining that workers are often required to pay for on-the-road accommodations when traveling to assist with labour needs in other regions.⁸²

Supporting Rural Canada

While labour shortages are being faced across the country, rural and remote communities face distinct challenges to recruiting and retaining workers. The committee heard about the impacts that labour shortages are having on rural communities, and heard that action is needed now to improve access to services in these communities.

In a brief submitted to the committee, the Canadian Chiropractic Association stated that Canadians residing in rural areas are often required to travel hours to access medical care.⁸³ The Canadian Association of Social Workers indicated that, even prior to the pandemic, turnover among social workers resulting from high levels of burnout was “particularly damaging in already underserved rural, remote, and northern communities.”⁸⁴

Witnesses who appeared before the committee, as well as organizations that submitted briefs, shared a number of potential strategies to better support rural communities impacted by current or future labour shortages. For example, some recommended online learning as a strategy to support residents of rural and remote communities as they access training in in-demand sectors such as dental care and childcare.⁸⁵ A witness from Polytechnics Canada called for broadband internet across the country to ensure that all regions in Canada can benefit from life-long learning.⁸⁶

82 [Evidence](#), 4 April 2022, 1105 (Strickland); [Evidence](#), 1105 (Ellerker).

83 [Submission](#) (Canadian Chiropractic Association [CCA]), April 2022, pp. 4–5.

84 [Submission](#) (CASW), 7 March 2022, p. 1.

85 [Submission](#) (CDA), April 2022, p. 5; [Evidence](#), 3 March 2022, 1640 (Nord).

86 [Evidence](#), 28 March 2022, 1155 (Matthew Henderson, Director of Policy, Polytechnics Canada).

The federal government can also consider offering further incentives for in-demand care workers, such as health professionals, to work in rural and remote areas. For example, the Canadian Federation of Nurses Unions recommended funding tuition assistance programs for nursing students, conditional on return of service agreements that require students to practice in a rural or remote region of Canada following their training,⁸⁷ and the Canadian Chiropractic Association recommended establishing a one-time income tax deduction for health care professionals establishing a clinic in rural and underserved communities.⁸⁸

The committee is aware that in Budget 2022, the federal government proposed investing \$26.2 million to increase student loan forgiveness for doctors and nurses in rural and remote communities and announced it would expand the list of eligible professionals.⁸⁹ During this study, the committee heard about opportunities for the Government of Canada to take further action, in collaboration with its provincial and territorial counterparts, to improve the accessibility of health care and other services in rural and remote communities. For example, additional incentives could be offered for in-demand professionals to work in these communities. Federal support for future talent pipelines could also contribute to facilitating rural, remote and Northern residents' access to education and training in the most needed fields.

Automation and Technology

The adoption of automation and other technology also has the potential to help address labour shortages by making businesses more efficient and enhancing the availability of services. Two witnesses pointed to a potential federal role in funding digitization,⁹⁰ with a representative from the CFIB proposing tax incentives for businesses that “want either to automate internal processes or to buy new devices or equipment.”⁹¹

With regards to the care economy, a representative from Deloitte recommended “embrac[ing] digital solutions [...] to free up existing resources [and] accelerate adoption of virtual care technologies,” as well as “[ensuring] providers and consumers have skills

87 [Submission](#) (CFNU), p. 9.

88 [Submission](#) (CCA), April 2022, pp. 4–5; [Submission](#) (Canadian Physiotherapy Association), April 2022, p. 2.

89 [Evidence](#), 25 April 2022, 1210 (Qualtrough); Government of Canada, [A Plan to Grow Our Economy and Make Life More Affordable, Budget 2022](#), p. 152.

90 [Evidence](#), 3 March 2022, 1650 (Nord).

91 [Evidence](#), 4 April 2022, 1245 (Guénette).



to engage with these digital programs and services.”⁹² In addition, Armine Yalnizyan of the Atkinson Foundation suggested technology could be better used in the care economy to “improve timely access to supports,” calling for more telehealth, improved use of artificial intelligence in diagnostics, and “improved used of e-health records to improve wait times and detect trends more quickly.”⁹³

Finally, the witness from the International Association of Machinists and Aerospace Workers recommended that the federal government study the possibilities that artificial intelligence presents for various sectors.⁹⁴ In addition, the Association called for “a thorough study of emerging trends and technologies for use in long term care,” noting that “we should not turn to [technology] as a solution without a full understanding of its impact on the health care system, patients and clients.”⁹⁵

The committee heard that supporting the adoption of automation and technology—in particular for mundane and repetitive tasks by Canadian businesses in areas of chronic labour shortages—has the potential to enhance businesses’ capacity, help address labour shortages, and increase access to care. It also recognizes the importance of understanding the impacts of emerging technology in long-term care and other sectors of the care economy. A representative of the International Association of Machinists and Aerospace Workers highlighted the potential of exoskeletons—suits meant to relieve pressure on the body during heavy lifting—to prevent injuries in health care and long-term care, both for workers and for residents (e.g., to help with mobility).⁹⁶

CHAPTER 3: ACCESSING INTERNATIONAL TALENT

Newcomers to Canada are an important source of current and future labour supply, particularly in the context of an aging population.⁹⁷ The following chapter presents ideas about ways to better leverage the Temporary Foreign Worker Program (TFWP) and other immigration programs to meet labour needs. Next, the chapter looks at ways to enhance foreign credential recognition for internationally educated professionals.

92 [Evidence](#), 25 April 2022, 1110 (Black).

93 [Evidence](#), 31 March 2022, 1545 (Yalnizyan)

94 [Evidence](#), 25 April 2022, 1130 (Ivana Saula, Research Director for Canada, International Association of Machinists and Aerospace Workers).

95 [Evidence](#), 25 April 2022, 1115–1120 (Saula).

96 [Evidence](#), 25 April 2022, 1150 (Saula).

97 See, for example, [Evidence](#), 3 March 2022, 1535 (Wernick); [Evidence](#), 31 March 2022, 1725 (Lee); [Evidence](#), 31 March 2022, 1620 (Yalnizyan).

The Temporary Foreign Worker Program

The Temporary Foreign Worker Program (TFWP) allows eligible employers to hire foreign nationals on a temporary basis, subject to a positive Labour Market Impact Assessment or LMIA from the federal government (which confirms that there is a need for a foreign worker to fill the job, and that no Canadian worker or permanent resident is available).⁹⁸ The committee received a wealth of testimony on ways the TFWP could be modified to help employers better access the labour they need, including in the care economy, the food and beverage processing sector, and the construction sector.

Multiple witnesses called for faster processing of LMIA's.⁹⁹ Régis Michaud, President of RM International Recruitment Inc. told the committee:

We believe that Service Canada definitely has a huge problem with the current processing times [for LMIA applications]. For employers, the average wait is 63 business days. That is not practical and employers are suffering the consequences. The average is 63 days, but it is impossible for the employer to know whether it will be 40 days or 80 days.¹⁰⁰

Michaud suggested faster processing times could be achieved through employer accreditation¹⁰¹—a solution also promoted by witnesses from the Canadian Chamber of Commerce, the Conseil de la transformation alimentaire du Québec, and the Canadian Home Builders Association in the form of a Trusted Employers Program.¹⁰² One witness described this as a “category [...] created for companies that have been filing LMIA's regularly for five years and renewing them every year,” which would allow the fast-tracking of applications from these employers.¹⁰³ The committee is aware that \$29.3 million was earmarked in Budget 2022 for the establishment of “a Trusted Employer Model that reduces red tape for repeat employers who meet the highest standards for working and living conditions, protections, and wages in high-demand fields.”¹⁰⁴

98 Government of Canada, *Temporary Foreign Worker Program; What is a Labour Market Impact Assessment?*

99 *Evidence*, 4 April 2022, 1210 (Guénette); *Submission* (CFIB), April 2022, p. 7; *Evidence*, 31 March 2022, 1700 (Fraeys).

100 *Evidence*, 4 April 2022, 1115 (Régis Michaud, President, RM International Recruitment Inc.).

101 *Evidence*, 4 April 2022, 1135 (Michaud).

102 *Evidence*, 3 March 2022, 1705 (Nord); *Evidence*, 31 March 2022, 1700 (Fraeys); *Evidence*, 31 March 2022, 1725 (Lee).

103 *Evidence*, 31 March 2022, 1700 (Fraeys).

104 Government of Canada, *A Plan to Grow Our Economy and Make Life More Affordable*, Budget 2022, p. 125.



Witnesses also made recommendations pertaining to the mobility of temporary foreign workers (TFWs). Some witnesses advocated for open work permits for TFWs, which would allow them to change employers.¹⁰⁵ However, Michaud warned that providing TFWs with more mobility could also make it more difficult for employers to retain the TFWs they hire.¹⁰⁶ Some witnesses also called for open work permits for TFWs' spouses or other family members, with Michaud stating spouses could “partially make up for the labour shortage by holding certain positions,” including lower-skilled jobs.¹⁰⁷

In addition, the committee heard about the need for additional pathways to permanent residence for TFWs.¹⁰⁸ Certain witnesses highlighted types of workers for whom they believed more permanent immigration options were required: specifically, workers with skilled trades credentials or construction experience, and workers in low-paid or intermediate jobs that usually call for high school and/or job-specific training (skill level C jobs).¹⁰⁹

Witnesses—including from care-related sectors, the food and beverage processing sector, and the construction sector—also highlighted a range of other ways the federal government could help employers meet labour needs through the TFWP, such as:

- Addressing excessive bureaucracy and administrative burden on employers;¹¹⁰
- Temporarily opening up the TFWP to all sectors and all types of employment, including small businesses, regardless of the unemployment rate in the employer's region;¹¹¹

105 [Evidence](#), 21 March 2022, 1150 (Bolduc); [Submission](#) (Migrant Workers Alliance for Change), pp. 7–8; [Submission](#) (Oxfam Canada), 8 April 2022, p. 7.

106 [Evidence](#), 4 April 2022, 1115 (Michaud).

107 [Evidence](#), 4 April 2022, 1115 (Michaud). See also [Submission](#) (Migrant Workers Alliance for Change), p. 8; [Submission](#) (Oxfam Canada), 8 April 2022, p. 8.

108 [Evidence](#), 3 March 2022, 1725 (Nord); [Evidence](#), 31 March 2022, 1620 (Yalnizyan); [Evidence](#), 1105 (Ellerker); [Submission](#) (CUPE), 7 April 2022, p. 1.

109 [Evidence](#), 31 March 2022, 1655 (Lee); [Evidence](#), 4 April 2022, 1115 (Michaud).

110 [Evidence](#), 4 April 2022, 1240 (Guénette); [Evidence](#), 25 April 2022, 1120 (Rossi); [Evidence](#), 31 March 2022, 1705 (Kathleen Sullivan, Chief Executive Officer, Food and Beverage Canada). See also Food and Beverage Canada, [Food and Beverage Manufacturing Emergency Foreign Worker Program](#).

111 [Evidence](#), 4 April 2022, 1230–1240 (Guénette).

- Increasing the length of work permits for TFWs, or the validity length of LMIA's;¹¹²
- Creating a labour pool that connects employers with TFWs who are already in Canada and are unemployed due to termination without cause;¹¹³and,
- Increasing the maximum proportion of a business's employees that can be TFWs (for example, to 30%).¹¹⁴

Witnesses also made specific recommendations pertaining to the food and beverage processing and construction sectors, including:

- Allowing food and beverage processing employers to file LMIA's by factory, grouping a large number of workers in a single document;¹¹⁵
- Making efforts to attract foreign workers with skilled trades credentials, such as plumbers and electricians;¹¹⁶
- Consulting local labour market experts, such as building trades councils, when bringing TFWs into an area;¹¹⁷ and,
- In the construction sector, allowing unions to become designated sponsors for TFWs, with the goal of connecting the workers with consistent employment opportunities and providing a path to citizenship.¹¹⁸

The committee heard that when labour needs cannot be met by Canadian citizens or permanent residents, the TFWP is a key source of temporary labour for sectors across Canada's economy. Especially in the context of historic labour shortages, action is

112 [Evidence](#), 4 April 2022, 1135 (Michaud); [Evidence](#), 31 March 2022, 1705 (Sullivan). See also Food and Beverage Canada, [Food and Beverage Manufacturing Emergency Foreign Worker Program](#).

113 Canadian Chamber of Commerce, [Canadian Chamber Recommendations to Modernize the TFW Program](#); [Evidence](#), 3 March 2022, 1705 (Nord).

114 [Evidence](#), 31 March 2022, 1700 (Fraeys); [Evidence](#), 31 March 2022, 1705 (Sullivan). See also Food and Beverage Canada, [Food and Beverage Manufacturing Emergency Foreign Worker Program](#).

115 [Evidence](#), 31 March 2022, 1700 (Fraeys).

116 [Evidence](#), 31 March 2022, 1715 (Collins-Williams).

117 Ibid.

118 Ibid.



needed to facilitate timely access to TFWs. At the same time, it is important to ensure decent working conditions for all migrant workers—a topic discussed further in Chapter 4 of this report.

Other Solutions Related to Immigration

While the TFWP is designed to fill temporary labour needs, other programs allow skilled foreign workers to immigrate to Canada on a permanent basis. For example, the Atlantic Immigration Program and the Rural and Northern Immigration Pilot provide permanent residency pathways to eligible skilled workers who want to work in Canada’s Atlantic provinces or in select rural and northern communities, respectively.¹¹⁹ Skilled workers can access permanent residency pathways through the Federal Skilled Workers Program (FSWP), the Federal Skilled Trades Program, or Canadian Experience Class. In addition, the Provincial Nominee Program allows provinces and territories to nominate their own economic immigrants based on provincial or territorial needs.¹²⁰

Testimony received by the committee indicated that permanent immigration—while not the only solution—should be a key element of the federal government’s strategy to address labour shortages in the Canadian economy and the care economy, both through bringing in more skilled workers and tapping into those who are already here.

Over the course of the study, witnesses recommended a variety of ways the federal government can leverage the immigration system to fill labour needs on a longer-term basis, such as:

- Addressing long processing times for permanent residency applications;¹²¹
- Prioritizing the processing of immigration applications by candidates who already have a job offer;¹²²
- Providing the provinces with more power over immigrant selection (as has been done through the Provincial Nominee Program, the Atlantic

119 Government of Canada, [Atlantic Immigration Program; Rural and Northern Immigration Pilot: about the pilot](#).

120 Government of Canada, [How the Provincial Nominee Program \(PNP\) works](#).

121 [Evidence](#), 21 March 2022, 1150 (Bolduc).

122 [Evidence](#), 4 April 2022, 1215 (Martel).

Immigration Program, and the Rural and Northern Immigration Pilot);¹²³
and,

- Improving the labour market integration of immigrants by investing more heavily in settlement services.¹²⁴

Rocco Rossi, President and Chief Executive Officer of the Ontario Chamber of Commerce, made recommendations specific to addressing labour shortages in Ontario, including collaborating with the Ontario government to “develop a long-term northern and rural Ontario immigration strategy to ensure communities can attract and retain immigrants,” eliminating the requirement for LMIA’s for Ontario Immigrant Nominee Program in communities with 200,000 or fewer people, and increasing Ontario’s allocation of immigrants under the Ontario Immigrant Nominee Program from 9,000 to 18,000.¹²⁵

The committee also heard about ways the federal government can use immigration to help address labour needs in health care, long-term care, and other care-related sectors, including:

- Introducing a mechanism in the immigration process to connect newcomers with health care employers trying to fill vacancies;¹²⁶
- Further prioritizing care economy jobs in the immigration selection points system;¹²⁷
- Accelerating permanent residency processing for migrant care workers;¹²⁸

123 *Evidence*, 3 March 2022, 1725 (Nord); *Evidence*, 25 April 2022, 1135 (Rossi). See also Government of Canada, [How the Provincial Nominee Program \(PNP\) works](#); [Atlantic Immigration Program](#); [Rural and Northern Immigration Pilot: about the pilot](#).

124 *Ibid.*, pp. 8–9.

125 *Evidence*, 25 April 2022, 1120 (Rossi).

126 *Submission* (HealthCareCAN), 1 April 2022, pp. 3–5.

127 *Evidence*, 28 March 2022, 1105 (Lightman).

128 *Submission* (CLC), April 2022, p. 1.



- Expanding the Economic Mobility Pathways Project (a program that helps skilled refugees immigrate to Canada through economic streams) to connect skilled refugees with employers in long-term care;¹²⁹ and,
- Examining ways to “better integrate, recruit, and attract recent immigrants to Canada into healthcare-related careers.”¹³⁰

Finally, speaking specifically about the construction sector, Mike Collins-Williams of West End Home Builders' Association and Sean Strickland of Canada's Building Trades Unions recommended, respectively, that the federal government bring in more workers through the FSWP to fill high-skilled construction jobs;¹³¹ and that it introduce a construction immigration pilot project with a pathway for workers to achieve to Canadian citizenship.¹³²

The committee heard that immigration is an important part of the solution to addressing current and future labour shortages in the Canadian economy, including the care economy. It is critical that the government examine further options to fill labour gaps through the immigration system, including by attracting and prioritizing immigrants with relevant skills and experience, linking them with employers, and providing them with pathways to permanent residency.

Leveraging Internationally Educated Professionals

Challenges with foreign credential recognition serve as a barrier to meeting labour needs in care economy sectors. To help address this, the federal government administers the Foreign Credential Recognition Program, which funds provincial and territorial governments, as well as organizations such as regulatory bodies and national associations, to help assess and recognize the international credentials and work experience that individuals have acquired in other countries.¹³³ Budget 2022 proposed \$115 million over five years, and \$30 million ongoing, to expand foreign credential recognition for professionals in the health care sector.¹³⁴

129 [Evidence](#), 21 March 2022, 1235 (Hall).

130 [Submission](#) (CDA), April 2022, p. 7.

131 [Evidence](#), 31 March 2022, 1715 (Collins-Williams).

132 [Evidence](#), 4 April 2022, 1130 (Strickland).

133 Government of Canada, [Funding: Foreign Credential Recognition Program—Overview](#).

134 [Evidence](#), 25 April 2022, 1215 (Qualtrough); Government of Canada, [A Plan to Grow Our Economy and Make Life More Affordable, Budget 2022](#), p. 123.

Naomi Lightman, Assistant Professor of Sociology at the University of Calgary (appearing as an individual), explained that internationally educated care workers “are overwhelmingly trained as licenced practical nurses or nurse practitioners, but they end up working in jobs as personal support workers because of the practical difficulty of transferring their credentials.”¹³⁵ Katharine Smart of the Canadian Medical Association explained,

we do have internationally trained medical graduates in Canada who have been unable to access the system. They remain uncredentialed and unlicensed, and they haven’t been able to participate in the systems that exist to get into actual practice and caring for Canadians. There’s also work that could be done there to bring more of those folks on board and into our system.¹³⁶

To better leverage international talent, there is a need to speed up processing times for the credentialing of internationally trained health professionals.¹³⁷ The committee also heard about a need to streamline these processes, through actions such as:

- ensuring that internationally educated professionals understand before they enter Canada what will be required to have their credentials recognized;¹³⁸
- reducing the costs of credential recognition for workers;¹³⁹
- working with regulatory colleges to streamline registration requirements and improve bridging programs;¹⁴⁰ and,
- “[d]eveloping support programs for employers and communities in high need sectors and regions who have little or no experience in hiring international professionals to improve recruitment.”¹⁴¹

135 [Evidence](#), 28 March 2022, 1105 (Lightman).

136 [Evidence](#), 28 March 2022, 1225 (Smart).

137 [Evidence](#), 21 March 2022, 1235 (Hall); [Evidence](#), 31 March 2022, 1545 (Yalnizyan); [Submission](#) (CNA), 31 March 2022, p. 6; [Submission](#) (CLC), April 2022, p. 1; [Submission](#) (CUPE), 7 April 2022, p. 8; [Submission](#) (CALTC), p. 5.

138 [Evidence](#), 21 March 2022, 1155 (Silas).

139 [Evidence](#), 28 March 2022, 1105 (Lightman).

140 [Submission](#) (CALTC), p. 6.

141 *Ibid.*



A representative of the Fédération des travailleurs et travailleuses du Québec called for a “review of the conditions for the recruitment, intake and processing of foreign workers in the country,” with a view to improving credential and skills recognition for immigration applicants both within and outside of the health care field.¹⁴² A witness from the Canadian Association for Long Term Care emphasized the importance of efficient credential recognition processes for nurses, reminding the committee that Canada is participating in a global competition for talent.¹⁴³

The committee heard from witnesses that fully utilizing the skills of internationally educated health care professionals, including supporting the timely recognition of credentials, should be a priority in the federal government’s efforts to address labour shortages in the care economy. The federal government could consider taking further action to support this through the Foreign Credential Recognition Program.

CHAPTER 4: IMPROVING WORKING CONDITIONS

Working conditions can affect a sector or employer’s ability to recruit and retain workers. They are also an important concern in their own right. As the government addresses the current labour crisis, the committee also sees an opportunity to ensure decent working conditions for workers both inside and outside of the care economy. The following chapter discusses working conditions in the Canadian economy, in the care economy, and in other specific sectors. In their testimony, witnesses focused on compensation and benefits, collective bargaining, non-standard employment, workload and staffing, mental health, and working conditions for migrant care workers. Witnesses highlighted several of these elements as components of “decent work,”¹⁴⁴ a term defined by the International Labour Organization as “productive work for women and men in conditions of freedom, equity, security and human dignity.”¹⁴⁵

Compensation and Benefits

The committee heard about the importance of compensation and benefits in the context of the Canadian economy as a whole, as well as the care economy. A representative of

142 [Evidence](#), 21 March 2022, 1150 (Bolduc).

143 [Evidence](#), 21 March 2022, 1235 (Hall).

144 See, for example, [Submission](#) (ONN), April 2022, p. 3; [Submission](#) (Oxfam Canada), 8 April 2022, p. 3; [Submission](#) (Canadian Centre for Policy Alternatives [CCPA]), March 2022, pp. 7–8; [Submission](#) (CUPE), 7 April 2022, pp. 5–6; [Submission](#) (Canadian Women’s Foundation), April 2022.

145 ILO, [Gender Equality and Decent Work: Selected ILO Conventions and Recommendations that promote Gender Equality as of 2012](#), 2012, p. v.

the International Association of Machinists and Aerospace Workers argued that different levels of government need to collaborate to promote “living wages, rather than just the minimum wage.”¹⁴⁶ In its written submission to the committee, Unifor recommended establishing an independent, federal Low-Wage Commission tasked with researching and providing recommendations to government on wage policy measures.¹⁴⁷

Many also called for higher wages specifically in the care economy.¹⁴⁸ Sharleen Stewart of Service Employees International Union Healthcare highlighted the prevalence of poverty among workers in certain care economy sectors, such as personal support work, domestic work and childcare.¹⁴⁹ In a written submission to the committee, the Canadian Union of Public Employees advocated for the establishment of a \$25 minimum wage floor for federally funded care workers. It was explained that this could be accomplished by including minimum standards in funding agreements with social services agencies under federal jurisdiction (e.g., immigration, refugee and resettlement services).¹⁵⁰ Witnesses also recommended that the federal government collaborate with the provinces to ensure private long-term care homes and other similar private providers do not pay care workers less than public operators, and to make pandemic-related wage increases permanent.¹⁵¹

In addition, witnesses made recommendations related to benefits: Unifor highlighted the importance of “[ensuring] all workers are covered by strong health benefits agreements,” whether through public programs or “privately-purchased supplemental health benefits.”¹⁵² The Canadian Women’s Foundation advocated for a “decent work floor” for care workers that includes paid sick days.¹⁵³ Naomi Lightman called for the federal government to support care workers’ access to affordable dental and pharmacare.¹⁵⁴

146 [Evidence](#), 25 April 2022, 1120 (Saula).

147 [Submission](#) (Unifor), 8 April 2022, pp. 7–8.

148 See, for example, [Evidence](#), 28 March 2022, 1105 (Lightman); [Evidence](#), 21 March 2022, 1145 (Sharleen Stewart, President, Service Employees International Union Healthcare); [Evidence](#), 31 March 2022, 1545 (Yalnizyan); [Submission](#) (CUPE), 7 April 2022, p. 1; [Submission](#) (Canadian Women’s Foundation), April 2022, p. 7.

149 [Evidence](#), 21 March 2022, 1120 (Stewart).

150 [Submission](#) (CUPE), 7 April 2022, p. 5–6.

151 [Evidence](#), 28 March 2022, 1105 (Lightman); [Submission](#) (Unifor), 8 April 2022, p. 7.

152 [Submission](#) (Unifor), 8 April 2022, p. 7.

153 [Submission](#) (Canadian Women’s Foundation), April 2022, p. 7.

154 [Evidence](#), 28 March 2022, 1105 (Lightman).



Although wages, benefits and conditions of employment are matters typically falling under the jurisdiction of the provinces and territories, the federal government can ensure adequate wages, working conditions and benefits for workers under federal jurisdiction. The committee also heard about opportunities for the federal government to work with the provinces and territories to ensure adequate compensation in care economy professions.

Collective Bargaining

As a part of discussions about working conditions inside and outside of the care economy, the committee heard that collective bargaining can protect workers and provide them with a voice. Discussing ways to support female childcare workers, domestic workers and personal support workers, Sharleen Stewart of the Service Employees International Union Healthcare stated that “[w]e need to support their efforts to unionize, because within a union, they can speak up collectively without fear of being fired or worse, threats of deportation.”¹⁵⁵ Similarly, the Canadian Centre for Policy Alternatives (CCPA) recommended that the federal government “further facilitate access to collective bargaining and, in particular, sectoral- and broader-based bargaining approaches that offer significant benefits to vulnerable workers who face higher barriers to the benefits collective bargaining.”¹⁵⁶

The committee recognizes access to collective bargaining as an important component of decent work, especially for the most vulnerable workers, and thanks witnesses for their input on this topic.

Non-Standard Employment

The committee also heard about the need to improve working conditions for those in non-standard employment, both inside and outside of the care economy. A June 2019 HUMA report defines non-standard employment as “working arrangements that fall outside of standard permanent employment,” including part-time work, self-employment and temporary work, and notes that “most social protections... have been built around or informed by standard, permanent, full-time employment.”¹⁵⁷

155 *Evidence*, 21 March 2022, 1120 (Stewart).

156 *Submission* (CCPA), March 2022, p. 8.

157 HUMA, *Precarious Work: Understanding the Changing Nature of Work in Canada*, 42nd Parliament, 1st Session, June 2019, p. 12.

Ivana Saula of the International Association of Machinists and Aerospace Workers called for both federal and provincial governments to “reform labour laws to provide protections for those in non-standard and precarious employment.”¹⁵⁸ Similarly, the CCPA called on the government to rapidly amend Part III of the *Canada Labour Code* to clarify the definition of “employee” (given that this designation is typically associated with higher labour protections) and improve protections for non-standard workers, in accordance with the recommendations of the Expert Panel on Modern Federal Labour Standards.¹⁵⁹

Finally, with regards to the care economy in particular, Armine Yalnizyan highlighted a need to address the proliferation of temporary agencies and on-demand apps by modernizing labour legislation to reduce misclassification—a situation in which an employer attributes the wrong employment status to a worker, potentially resulting in fewer labour protections.¹⁶⁰

The committee heard from witnesses that action is needed to ensure that workers in non-standard employment—including, but not limited to, part-time workers, temporary workers, and those who work through digital apps—have adequate labour protections.

Workloads and Staffing

During the pandemic, insufficient staffing and unmanageable workloads have led to stress, burnout, and turnover among workers in the care economy. A witness from the Canadian Nurses Association reported that “[p]eople who are in the system are telling us that the reason they’re going is not the money or retention bonuses. It’s staffing.”¹⁶¹ In its written submission to the committee, the Canadian Nurses Association recommended that the federal government invest \$300 million over three years “to help provinces and territories optimize workloads for nurses and health-care workers.”¹⁶²

Similarly, Rebecca Shields of the Canadian Mental Health Association stated,

[c]ritical investments are needed to deal with this stress and burnout, and programs to provide respite and relief for staff, so that they too can have their vacations. We’ve

158 [Evidence](#), 25 April 2022, 1115 (Saula).

159 [Submission](#) (CCPA), April 2022, pp. 7–8.

160 [Evidence](#), 31 March 2022, 1545 (Yalnizyan).

161 [Evidence](#), 28 March 2022, 1235 (Villeneuve).

162 [Submission](#) (CNA), 21 March 2022, pp. 3 and 4.



been working overtime to provide ongoing care, without any increase in funding to meet these needs.¹⁶³

In addition to affecting the well-being of staff, excessive workloads have the potential to exacerbate the labour crisis in the care economy. The committee heard about the urgent need to address this issue, both to promote decent working conditions and to ensure care sectors can continue to attract and retain workers in the long term.

Mental Health

Many organizations who appeared or submitted a brief to the committee recommended that the federal government support mental health-related benefits or services for workers, especially for those in the care economy (e.g., by funding programs or research).¹⁶⁴ HealthCareCAN highlighted workplace mental health training, peer support and psychotherapy as examples of resources that would benefit care workers.¹⁶⁵ The Canadian Nurses Association called for a “national mental health strategy for nurses and health-care workers” that would include “funding for free access to mental health supports by workers and their immediate family members, pan-Canadian monitoring and reporting on health-care worker mental wellness, and support for proactive organizational supports.”¹⁶⁶ The Canadian Association of Social Workers called for funding to address the specific mental health concerns of social workers, “including moral injury, vicarious trauma, and other workplace related mental health concerns.”¹⁶⁷ The committee recognizes the importance of mental health supports for all workers, including those in care-related professions.

163 [Evidence](#), 31 March 2022, 1605 (Rebecca Shields, Chief Executive Officer, York and South Simcoe Branch, Canadian Mental Health Association).

164 [Evidence](#), 21 March 2022, 1105 (Silas); [Evidence](#), 28 March 2022, 1105 (Lightman); [Submission](#) (CASW), 7 March 2022, p. 2; [Submission](#) (CNA), 31 March 2022, p. 5; [Submission](#) (United Way Centraide Canada), April 2022, p. 6; [Submission](#) (HealthCareCAN), 1 April 2022, pp. 5–6; [Submission](#) (CUPE), 7 April 2022, p. 1; [Evidence](#), 21 March 2022, 1205 (Hall).

165 [Submission](#) (HealthCareCAN), 1 April 2022, pp. 5–6.

166 [Submission](#) (CNA), 31 March 2022, p. 5.

167 [Submission](#) (CASW), 7 March 2022, p. 2.

Migrant Workers

In Chapter 3 of this report, the committee emphasized the importance of leveraging foreign workers to address labour shortages in the Canadian economy. The committee heard that it is equally critical to ensure that these workers are treated fairly.

Over the course of the study, the committee received recommendations from the Migrant Workers Alliance for Change, the Ontario Nonprofit Network, and the Canadian Women’s Foundation on ways to improve the working and living conditions of migrant workers. These recommendations included ideas for providing migrant workers with a greater worker voice—for example, by including them in “discussions that shape a sustainable care economy,” and ensuring they have legislative access to unionization and collective bargaining.¹⁶⁸ They also included ensuring migrant workers have access to healthcare, including in cases where workers lack a valid health card due to delay or denial of work permits or other federal documents.¹⁶⁹ Several organizations recommended granting permanent residency status to all migrant care workers on arrival, as well as to those currently in Canada, including undocumented migrant care workers.¹⁷⁰ Another organization called on the federal government to ensure that live-in care workers have adequate accommodations (with standards set out in LMIA, protection from reprisals, and effective enforcement).¹⁷¹ Overall, witnesses stressed the right of migrant workers to decent working conditions, both inside and outside of the care economy.

CHAPTER 5: STRENGTHENING THE CARE ECONOMY

While many of the strategies to address labour shortages in the Canadian economy are also applicable to the care economy, the committee heard that care-related sectors, such as health care and long-term care, face distinct challenges that must be urgently addressed. Over the course of the study, witnesses discussed a range of solutions specific to the care economy, such as the need for federal health care funding that helps to address labour shortages in the sector; a pan-Canadian approach to optimizing the care economy’s workforce, including through a centralized health care human resources strategy or the establishment of a dedicated national body; more support for volunteers

168 [Submission](#) (ONN), April 2022, p. 9; [Submission](#) (Canadian Women’s Foundation), April 2022, pp. 7–8.

169 [Submission](#) (Migrant Workers Alliance for Change), p. 8.

170 [Submission](#) (ONN), April 2022, p. 9; [Submission](#) (Canadian Women’s Foundation), April 2022, pp. 7–8; [Submission](#) (Migrant Workers Alliance for Change), p. 5.

171 [Submission](#) (Migrant Workers Alliance for Change), p. 8.



and unpaid care workers; and initiatives to boost the retention of workers in the health care sector. This section of the report looks at each of these issues in turn.

Federal Funding

The federal government provides funding to provincial and territorial health care systems through the Canada Health Transfer, with criteria and conditions for the receipt of funding laid out in the *Canada Health Act*.¹⁷² Many witnesses highlighted ways that federal health care funding can be leveraged to address labour shortages in the care economy.

Several witnesses advocated for an increase in federal health care transfers to provinces, with two recommending an increase from the current 22% to 35% of total costs.¹⁷³ While one witness stipulated that increased funding should be unconditional,¹⁷⁴ others identified conditions that should be associated with an increase in funding. Witnesses recommended, for example:

- Tying federal health care funding to “increasing capacity and base wages in the home and community care sector;”¹⁷⁵
- Targeting funding to address certain priorities, such as diagnostic imaging backlogs and mental health supports,¹⁷⁶
- Making dedicated transfers to “address labour shortages and working conditions for personal support workers, strengthen not-for-profit long-term care, and mental health care;”¹⁷⁷

172 [Canada Health Act](#), R.S.C., 1985, c. C-6; Marlisa Tiedemann, [The Canada Health Act: An Overview](#), Publication No. 2019-54-E, Library of Parliament, 17 December 2019; [Evidence](#), 25 April 2022, 1120 (Saula); [Evidence](#), 21 March 2022, 1250 (Bisanz).

173 [Evidence](#), 21 March 2022, 1135 (Bolduc); [Evidence](#), 25 April 2022, 1200 (Daniel Safayeni, Vice-President, Policy, Ontario Chamber of Commerce).

174 [Evidence](#), 28 March 2022, 1240 (Villeneuve).

175 [Evidence](#), 28 March 2022, 1205 (James Janeiro, Policy Consultant, Canadian Centre for Caregiving Excellence).

176 [Evidence](#), 28 March 2022, 1230 (Smart).

177 [Submission](#) (United Way Centraide Canada), April 2022, p. 7.

- Requiring federal care sector funding to go only to public and non-profit care services;¹⁷⁸ and,
- Including stipulations for “labour force strategies based on appropriate valuing of the skill, effort, and responsibility required and target benchmarks for decent work”.¹⁷⁹

Further, certain witnesses asked that long-term care, as well as community services that allow seniors to age at home, be included in the *Canada Health Act* (which, among other things, prescribes the health care services that must be publicly insured).¹⁸⁰

Witnesses also called for the federal government to direct funding to creating high-quality jobs in the care economy,¹⁸¹ to community-based counseling and psychology,¹⁸² and to the stabilization and enhancement of “provincial and territorial programs that provide care to those Canadians who lack access to dental care.”¹⁸³

A witness from the Canadian Mental Health Association called for funding that focuses on diversity, equity and inclusion in order to “respond to the diverse needs of Canada,” and asked that funding for community services be commensurate with that for acute hospitals.¹⁸⁴

Over the course of the study, a number of witnesses highlighted the need for the Government of Canada to target resources to address labour shortages and working conditions in the health care sector. The committee thanks witnesses for their important input on this topic.

A Pan-Canadian Approach

Several organizations who appeared before the committee or submitted written briefs called for a pan-Canadian approach to resolving labour shortages in the care economy,

178 [Submission](#) (CUPE), 7 April 2022, p. 1.

179 [Submission](#) (ONN), April 2022, p. 9.

180 [Canada Health Act](#), R.S.C., 1985, c. C-6; Marlisa Tiedemann, [The Canada Health Act: An Overview](#), Publication No. 2019-54-E, Library of Parliament, 17 December 2019; [Evidence](#), 25 April 2022, 1120 (Saula); [Evidence](#), 21 March 2022, 1250 (Bisanz).

181 [Submission](#) (Canadian Women’s Foundation), April 2022, p. 7.

182 [Evidence](#), 31 March 2022, 1625 (Shields).

183 [Evidence](#), 31 March 2022, 1550 (Richard Holden, President, CDA).

184 [Evidence](#), 31 March 2022, 1605 (Shields).



or in distinct care-related sectors. The following section explores the need for a centralized strategy and/or a national body to improve human resources capacity in the care economy.

A Centralized Strategy

The committee heard about the need for a centralized workforce planning strategy for Canada's care economy. Oxfam Canada called for a "broad and inclusive labour market strategy to achieve high-quality care jobs."¹⁸⁵ Georgina Black of Deloitte suggested that the strategy "[j]oin up immigration, training and credentialing to create a more dynamic and coherent care economy."¹⁸⁶

The committee also received recommendations for strategies for specific sectors in the care economy. The committee heard about the need for a health care strategy in particular, with many witnesses advocating for the development of a centralized health care human resources strategy or plan.¹⁸⁷ For example, the Canadian Nurses Association called for a "pan-Canadian health workforce action plan that focuses on recruitment, retention, and workplace conditions for nurses and health-care workers."¹⁸⁸ Witnesses also framed the creation of such a plan as a multistakeholder and multijurisdictional endeavour.¹⁸⁹

One witness highlighted a need for distinct strategies for the long-term care, childcare and the gender-based violence sectors.¹⁹⁰ United Way Centraide Canada and YMCA Canada also supported the need for a childcare sector strategy for Canada, both specifying that this should include, among other things, considerations related to compensation and working conditions, and improved access to education, training and professional development.¹⁹¹

185 [Submission](#) (Oxfam Canada), 8 April 2022, p. 3. See also [Evidence](#), 3 March 2022, 1645 (Vipond).

186 [Evidence](#), 25 April 2022, 1110 (Black).

187 [Evidence](#), 25 April 2022, 1110 (Black); [Evidence](#), 21 March 2022, 1105 (Silas); [Submission](#) (CNA), 31 March 2022, p. 7; [Evidence](#), 25 April 2022, 1120 (Saula). [Evidence](#), 31 March 2022, 1620 (Yalnizyan).

188 [Submission](#) (CNA), 31 March 2022, p. 7.

189 [Evidence](#), 21 March 2022, 1205 (Hall); [Evidence](#), 21 March 2022, 1210 (Bisanz).

190 [Submission](#) (Canadian Women's Foundation), April 2022, p. 7.

191 [Submission](#) (United Way Centraide Canada), April 2022, p. 7; [Submission](#) (YMCA Canada), April 2022, pp. 3–4.

A National Care Economy Commission

Several organizations proposed establishing a Care Economy Commission—for example, to develop and implement a national strategy for the care economy, or to take on other roles such as research and oversight.¹⁹² Witnesses also suggested that a national Care Economy Commission could:

- “[S]upport monitoring, evaluation, accountability and learning across the whole of the care economy, including the development and resourcing of sector-specific workforce strategies;”¹⁹³
- Contribute to the development and monitoring of national standards for quality care, including in fields such as long-term care;¹⁹⁴
- “[E]xamine paid and unpaid care work” in order to build a comprehensive care system in Canada that “addresses the full spectrum of care needs” (e.g., childcare, early childhood education, disability and long-term care, elder care) and recognizes care as a human right;¹⁹⁵
- Report annually on the delivery and impact of care services in the federal jurisdiction;¹⁹⁶ and,
- Centre the voices of care workers and receivers, taking a feminist and intersectional lens.¹⁹⁷

The committee is aware that in a March 2021 report, the House of Commons Standing Committee on the Status of Women recommended that the federal government “[consider] initiatives, such as the creation of a federal care economy commission, to direct future actions for the care sector.”¹⁹⁸

192 [Evidence](#), 3 March 2022, 1645 (Vipond). See also [Submission](#) (CUPE), 7 April 2022, p. 9; and [Submission](#) (Canadian Women’s Foundation), April 2022, p. 7.

193 [Submission](#) (CCPA), April 2022, p. 9.

194 [Submission](#) (CCPA), April 2022, p. 9; [Submission](#) (ONN), April 2022, p. 9. See ILO, [Care Work and Care Jobs For the Future of Decent Work](#), 2018, p. xliv.

195 [Submission](#) (Oxfam Canada), 8 April 2022, p. 2.

196 [Submission](#) (ONN), April 2022, p. 9.

197 Ibid.

198 House of Commons Standing Committee on the Status of Women (FEWO), [Impacts of the COVID-19 Pandemic on Women](#), March 2021, 43rd Parliament, 2nd Session, p. 4.



The committee heard about the need for a pan-Canadian, intergovernmental, and multistakeholder approach to human resource planning for the care economy. The federal government is well positioned to play a coordinating role in the establishment of a centralized health care human resources strategy, potentially implemented by a national Care Economy Commission.

Volunteers and Unpaid Care

Unpaid care workers and volunteers play an essential, and often unrecognized, role in sustaining the care economy.¹⁹⁹ The committee heard about a need to support those who perform unpaid work—often women, including racialized women and migrant women²⁰⁰—whether they are community volunteers in senior-serving organizations or long-term care homes, or family members who provide informal care to seniors or family members with disabilities.²⁰¹

Speaking to the importance of unpaid caregivers, Georgina Black of Deloitte explained:

[The issue of unpaid caregivers] is a very important part of the care economy. We have an army of unpaid caregivers in our country—estimates of 8.1 million Canadians—juggling work, caregiving and so forth. In addition to the value unpaid caregivers provide to the health and social care economy, we must recognize that there's actually a cost to our economy, which is estimated to be about \$1.3 billion in lost productivity.²⁰²

Craig Alexander, Chief Economist and Executive Advisor at Deloitte, suggested supporting unpaid care workers by “providing some sort of tax incentive or subsidy to caregivers in Canadian households.” However, he noted that “[t]he challenge is going to be designing the policy so that you get the desired impact of increasing the contribution of the unpaid workers and at the same time increasing the productivity of workers in the economy.”²⁰³

A representative of the Canadian Association for Long Term Care highlighted the need for funding to support long-term care homes in engaging and training volunteers and

199 The issue of unpaid care work was explored in more depth in a June 2021 report by the House of Commons Standing Committee on the Status of Women. See FEWO, [Women's Unpaid Work in Canada](#), June 2021, 43rd Parliament, 2nd Session.

200 [Evidence](#), 21 March 2022, 1130 (Stewart); [Evidence](#), 31 March 2022, 1620 (Yalnizyan).

201 See, for example, [Evidence](#), 21 March 2022, 1205 (Hall); [Evidence](#), 25 April 2022, 1110 (Black); [Submission](#) (United Way Centraide Canada), April 2022, p. 7.

202 [Evidence](#), 25 April 2022, 1110 (Black).

203 [Evidence](#), 25 April 2022, 1145 (Craig Alexander, Chief Economist and Executive Advisor, Deloitte).

caregivers,²⁰⁴ noting that “[w]e’ve come to see [volunteers and essential caregivers] as key partners for us in long-term care homes. [...] The significance of [volunteer time] to supporting the quality of life for residents is very noteworthy.”²⁰⁵

Christina Bisanz, Chief Executive Officer of Community Home Assistance to Seniors, called for more sustained resources for volunteer-based senior-serving community groups, noting that funding is often provided on a one-time basis.²⁰⁶

The contributions that unpaid caregivers make to the care economy, and to society as a whole, are invaluable. Witnesses stressed the importance of ensuring unpaid care work is recognized and supported.

Retention Incentives

As the committee heard throughout the study, employers are facing challenges retaining staff in certain sectors of the care economy, including health care. Several witnesses commented on the federal government’s potential role in enhancing care staff retention.

Michael Villeneuve of the Canadian Nurses Association stated that the federal government could play a “convenor and coordinator role” with the provinces and territories on strategies to retain health care workers in the short and long term. While he provided some specific examples of retention incentives—such as retention bonuses, student debt forgiveness and tax incentives—he also acknowledged that the most effective incentives may vary based on sub-sector and career stage. Therefore, he highlighted a need to “develop a tool box of strategies that can be adapted across care settings and across career stages.”²⁰⁷ Similarly, the Canadian Nurses Association called for an investment of \$300 million over three years to “help establish evidence-based and innovative strategies at the federal, provincial, and territorial levels to retain nurses and health-care workers.”²⁰⁸ Finally, United Way Centraide Canada suggested federal investments in community organizations—including longer-term operating funding—

204 [Evidence](#), 21 March 2022, 1240 (Hall).

205 [Ibid.](#)

206 [Evidence](#), 21 March 2022, 1255 (Bisanz).

207 [Evidence](#), 28 March 2022, 1215 (Villeneuve).

208 [Submission](#) (CNA), 31 March 2022, pp. 2 and 4.



could help these organizations improve working conditions (e.g., provide higher wages, benefits, pensions, and more job security) and therefore retain staff.²⁰⁹

Given the high demand for workers in health care and other sectors of the care economy, it may be desirable for the federal government to collaborate with the provinces and territories to investigate and implement retention strategies for these workers.

CONCLUSION AND RECOMMENDATIONS

Throughout its study of labour shortages and working conditions in the Canadian economy—including but not limited to the care economy—the committee received a wealth of oral and written testimony from senior government officials, advocates, and labour and employer representatives on strategies to address labour shortages and improve working conditions in Canada. The committee heard that urgent action is needed to address current and future labour demands, particularly in the context of an aging population. It also heard that now is the time to invest in the care economy—to ensure Canadians have access to the care they need, to ensure workers are treated fairly, and to create good jobs for the future. Having considered the testimony placed before it, the committee makes the following recommendations:

Recommendation 1

That the Government of Canada coordinate with the provinces and territories with a pan-Canadian approach to enhance the collection, quality and comparability of labour market information for key sectors of the care economy, including health care; and that it conduct and disseminate analysis of this information for use in workforce planning.

Recommendation 2

That the Government of Canada explore options to make skills training, especially in high-demand sectors, more accessible to Canadians—including through clear, navigable information about local skills needs and training opportunities, and through modifications to existing federal programs such as the Workforce Development Agreements, the Labour Market Development Agreements, and the Canada Training Benefit.

209 [Submission](#) (United Way Centraide Canada), April 2022, p. 6.

Recommendation 3

That the Government of Canada work with the provinces, territories, and other stakeholders to promote the alignment of educational and training opportunities in health care and other care economy sectors with future skills and labour needs; and further, that it consider supporting a wide range of strategies to make training in care-related fields more accessible, including through online learning, flexible training options such as microcredentials, and upskilling options for workers already in the care economy.

Recommendation 4

That the Government of Canada, in collaboration with the provinces and territories, expand training and upskilling capacity for high demand industries, skilled workers, the care economy and health care workers, and first responders.

Recommendation 5

That the Government of Canada review federal skills and employment programs that target groups that are underrepresented in the labour market, such as Indigenous peoples, persons with disabilities, youth, and women, with a view to ensuring they align with current and future skills needs; and further, that it examine additional ways to support the labour market participation of these groups.

Recommendation 6

That the Government of Canada look at ways to amend the tax regime which is favourable for retirees who wish to return to work.

Recommendation 7

That the Government of Canada undertake further efforts, in collaboration with the provinces and territories, to remove unnecessary barriers to labour mobility.

Recommendation 8

That the Government of Canada work with the provinces and territories to remove barriers to labour mobility in the health care sector, including through the interprovincial/territorial coordination of regulation and licensing requirements.



Recommendation 9

That the Government of Canada support access to care in rural and remote communities by providing further incentives for in-demand health care professionals to work in these communities, including through tuition assistance, loan forgiveness, or tax benefits; that it support talent pipelines in these communities by supporting online learning in key care economy sectors and continuing efforts to improve broadband access in rural and remote regions; and further, that it explore further strategies to address labour shortages in these communities through temporary and permanent immigration.

Recommendation 10

That the Government of Canada proceed with the implementation of a Trusted Employer Model to fast-track Labour Market Impact Assessment (LMIA) applications from eligible employers; and further, that it review LMIA application processing practices and resource allocations to eliminate red tape and to ensure LMIA applications can be processed in a timely, predictable and efficient manner.

Recommendation 11

That the Government of Canada consider temporary, emergency measures to enhance the accessibility of the Temporary Foreign Worker Program in sectors with the most acute labour shortages, such as extending the validity of Labour Market Impact Assessments and increasing the cap on the proportion of temporary foreign workers an employer can hire.

Recommendation 12

That the Government of Canada consider offering additional permanent residency pathways to temporary foreign workers with in-demand skills or experience, including in the care economy and in skilled trades.

Recommendation 13

That the Government of Canada investigate ways, where appropriate, to connect employers with qualified newcomers, including but not limited to skilled refugees and temporary foreign workers.

Recommendation 14

That the Government of Canada review the Foreign Credential Recognition Program with a view to determining how it can better support efficient foreign credential recognition for internationally trained health care professionals.

Recommendation 15

That the Government of Canada review compensation and benefits for care economy workers under its jurisdiction with a view to ensuring decent work and a regionally competitive wage; and further, that it work with the provinces and territories to improve working conditions for other workers in the care economy (including but not limited to migrant workers, and those in non-standard employment) and provide adequate compensation, basic health benefits, paid sick days, and workload management.

Recommendation 16

Further, that the Government of Canada consider establishing a national Care Economy Commission to develop, implement and monitor any workforce planning strategies for the care economy, including a centralized health care human resources strategy; and, develop and monitor national standards for care.

APPENDIX A LIST OF WITNESSES

The following table lists the witnesses who appeared before the committee at its meetings related to this report. Transcripts of all public meetings related to this report are available on the committee's [webpage for this study](#).

Organizations and Individuals	Date	Meeting
<p>Business Development Bank of Canada</p> <p>Pierre Cl��roux, Vice-President, Research and Chief Economist</p> <p>Shannon Glenn, Assistant Vice-President, Government Relations</p>	2022/03/03	12
<p>Canadian Chamber of Commerce</p> <p>Leah Nord, Senior Director, Workforce Strategies and Inclusive Growth</p>	2022/03/03	12
<p>Canadian Labour Congress</p> <p>Chris Roberts, Director, Social and Economic Policy</p> <p>Siobhan Vipond, Executive Vice-President</p>	2022/03/03	12
<p>Department of Employment and Social Development</p> <p>Karen Hall, Associate Assistant Deputy Minister, Strategic and Service Policy Branch</p> <p>Philippe Mass��, Director General, Labour Market Information, Skills and Employment Branch</p> <p>Pierre Therrien, Director General, Economic Policy Directorate, Strategic and Service Policy</p> <p>Rachel Wernick, Senior Assistant Deputy Minister, Skills and Employment Branch</p>	2022/03/03	12
<p>Community and Home Assistance to Seniors</p> <p>Christina Bisanz, Chief Executive Officer</p>	2022/03/21	13
<p>Canadian Association for Long Term Care</p> <p>Jodi Hall, Chief Executive Officer</p>	2022/03/21	13

Organizations and Individuals	Date	Meeting
Canadian Federation of Nurses Unions Linda Silas, President	2022/03/21	13
Canadian Support Workers Association Ian DaSilva, Director of Operations	2022/03/21	13
Fédération des travailleurs et travailleuses du Québec Denis Bolduc, General Secretary	2022/03/21	13
Service Employees International Union Healthcare Sharleen Stewart, President	2022/03/21	13
As an individual Naomi Lightman, Assistant Professor of Sociology, University of Calgary	2022/03/28	15
Canadian Centre for Caregiving Excellence James Janeiro, Policy Consultant	2022/03/28	15
Canadian Medical Association Katharine Smart, President	2022/03/28	15
Canadian Nurses Association Michael Villeneuve, Chief Executive Officer	2022/03/28	15
Polytechnics Canada Matthew Henderson, Director of Policy Sarah Watts-Rynard, Chief Executive Officer	2022/03/28	15
Statistics Canada Josée Bégin, Director General, Labour Market, Education and Socio-Economic Well-Being Vincent Dale, Director, Centre for Labour Market Information	2022/03/28	15
Atkinson Foundation Armine Yalnizyan, Atkinson Fellow on the Future of Workers	2022/03/31	16
Canadian Dental Association Aaron Burry, Acting Chief Executive Officer Richard Holden, President	2022/03/31	16

Organizations and Individuals	Date	Meeting
Canadian Home Builders' Association Mike Collins-Williams, Chief Executive Officer, West End Home Builders' Association (Hamilton-Halton) Kevin Lee, Chief Executive Officer	2022/03/31	16
Canadian Mental Health Association-National Rebecca Shields, Chief Executive Officer, York and South Simcoe Branch	2022/03/31	16
Conseil de la transformation alimentaire du Québec Dimitri Fraeys, Vice-President, Innovation and Economic Affairs Isabelle Leblond, Corporate Director, Human Resources	2022/03/31	16
Food and Beverage Canada Kathleen Sullivan, Chief Executive Officer	2022/03/31	16
Canada's Building Trades Unions Mark Ellerker, Business Manager, Hamilton-Brantford Building Trades Council Sean Strickland, Executive Director	2022/04/04	17
Canadian Federation of Independent Business Jasmin Guénette, Vice-President, National Affairs	2022/04/04	17
Comité sectoriel de main-d'oeuvre en aérospatiale Andréane Martel, General Manager	2022/04/04	17
École des métiers de l'aérospatiale Éric Dionne, Director	2022/04/04	17
National Police Federation Brian Sauvé, President	2022/04/04	17
RM International Recruitment Inc. Régis Michaud, President	2022/04/04	17
Deloitte Craig Alexander, Chief Economist and Executive Advisor Georgina Black, Managing Partner, Government and Public Services	2022/04/25	18

Organizations and Individuals	Date	Meeting
<p>Department of Employment and Social Development</p> <p>Hon. Carla Qualtrough, P.C., M.P., Minister of Employment, Workforce Development and Disability Inclusion</p> <p>Andrew Brown, Senior Assistant Deputy Minister, Skills and Employment Branch</p> <p>Catherine Demers, Associate Assistant Deputy Minister, Skills and Employment Branch</p> <p>Jean-François Tremblay, Deputy Minister</p>	2022/04/25	18
<p>International Association of Machinists and Aerospace Workers</p> <p>Ivana Saula, Research Director for Canada</p>	2022/04/25	18
<p>Ontario Chamber of Commerce</p> <p>Michelle Eaton, Vice-President, Public Affairs</p> <p>Rocco Rossi, President and Chief Executive Officer</p> <p>Daniel Safayeni, Vice-President, Policy</p>	2022/04/25	18

APPENDIX B LIST OF BRIEFS

The following is an alphabetical list of organizations and individuals who submitted briefs to the committee related to this report. For more information, please consult the committee's [webpage for this study](#).

Automotive Industries Association of Canada

BGC Canada

Canadian Association for Long Term Care

Canadian Association of Medical Radiation Technologists

Canadian Association of Social Workers

Canadian Centre for Policy Alternatives

Canadian Chiropractic Association

Canadian Dental Assistants Association

Canadian Dental Association

Canadian Federation of Independent Business

Canadian Federation of Nurses Unions

Canadian Health Workforce Network

Canadian Labour Congress

Canadian Mental Health Association-National

Canadian Nurses Association

Canadian Physiotherapy Association

Canadian Psychological Association

Canadian Union of Public Employees

Canadian Women's Foundation

Colleges and Institutes Canada

HealthCareCAN

Mental Health Commission of Canada

Migrant Workers Alliance for Change

National Police Federation

Ontario Nonprofit Network

Oxfam Canada

Unifor

United Way Centraide Canada

YMCA Canada

REQUEST FOR GOVERNMENT RESPONSE

Pursuant to Standing Order 109, the committee requests that the government table a comprehensive response to this Report.

A copy of the relevant *Minutes of Proceedings* (Meetings Nos. 12, 13, 15, 16, 17, 18, 20, 39, 40, 45, 46, 47 and 51) is tabled.

Respectfully submitted,

Robert J. Morrissey
Chair

Skills Mismatch & the Labour Shortage Crisis: The Liberals must act now

Conservative members of the committee understand the impacts the labour shortage crisis is having on local businesses and employers across every sector. Solving our labour shortage crisis will take a comprehensive approach with long- and short-term solutions, and the Liberal government have unfortunately not taken action to seriously address these shortages, leading us to the present situation.

Therefore, Conservative members recommend:

- **Recommendation #1:** That the Government of Canada undertake further efforts, in collaboration with the provinces and territories, to remove unnecessary barriers to labour mobility and work on implementing a pan-Canadian licensing model that would allow people without barriers to work where the needs are the greatest.
- **Recommendation #2:** That the Government of Canada streamline processes for qualified immigrants to be certified to work in their field of specialization within 60 days of application.
- **Recommendation #3:** That the Government of Canada look at ways to back private and charitable study loans to help qualified immigrants upgrade their skills to work in Canada.
- **Recommendation #4:** That the government of Canada expand training and upskilling capacity for high demand industries, skilled workers, the care economy and health care workers, and law enforcement.
- **Recommendation #5:** That the Government of Canada streamline the LMIA process.

Background:

The labour shortages in Canada are multipronged, and the recommendations proposed by Conservatives will help address the shortages we face in our labour market from different areas.

We know skills training and development in areas where chronic gaps exist is something that must be better addressed. Rachel Wernick, the Senior Assistant Deputy Minister at the Skills and Employment Branch, acknowledged to the committee that “labour shortages are not a purely numbers issue. It is also a skills mismatch issue.”

By eliminating unnecessary barriers to labour mobility within Canada, expanding training and upskilling in high demand industries, and ensuring our qualified and skilled immigrants are able to work in their fields – we can better ensure that employers and businesses can find the workers to close the gap on this mismatch.

Furthermore, we've seen clear evidence of government services and programs being broken after Liberal inaction – this includes our immigration processes and credential certification for our skilled immigrants who sometimes wait years for answers – resulting in massive backlogs which the Liberals have failed to address.

It's time the Liberal government streamline the process – and Conservatives propose that the system be improved by ensuring immigrants receive a yes or no on their certification to work in their field of specialization within 60 days of application. With a 60 day service standard, immigrants will be able to more quickly get into their field, and ensure employers have a larger skilled pool to address job shortages.

The LMIA process is simply not working for most industries. Is an onerous process. Extreme backlogs at IRCC is leaving workers and businesses in limbo in many cases for years. Small businesses are disproportionately affected as they do not have the resources to devote the extreme amount of time needed to complete and follow up on applications. Both workers and employers are left hanging. Employers are forced to go through the same process year after year.

Naomi Lightman, an Assistant Professor of Sociology at the University of Calgary, told this committee that her research showed the need for the process of transferring credentials to be accelerated – and that “it needs to be faster, it needs to be easier and it needs to be more affordable.”

Professor Lightman also highlighted the fact that many immigrants do not have the financial means to upgrade their skills – and that in many cases those most affected are immigrant women. Conservatives propose that the Liberal government look at ways to back private and charitable study loans to help our qualified immigrants upgrade their skills so that they are able to work in Canada, and pass this significant financial hurdle.

While the Liberals are focused on raising taxes on our workers and skilled immigrants - including by increasing payroll taxes and the carbon tax, Conservatives are focused on lowering the cost of living, control government spending, and keeping workers in our labour force & skilled immigrants in Canada by allowing them to keep more of what they earn.

Bloc Québécois Supplementary Opinion

The Bloc Québécois wishes to reiterate that the labour shortage is a critical issue. It's also a key issue for Quebec, and recent upheavals in the labour market as a result of the pandemic warranted the committee's examination. We thank the committee members for their work and the many witnesses who shared their expertise. Discussions were interesting and enriching. Overall, we agree with the vast majority of the report's findings and recommendations. However, the Bloc Québécois wishes to present a supplementary opinion to identify elements of the report that are problematic and that cause confusion about the role of the different levels of government.

First, it bears repeating that the federal government must act in its own area of jurisdiction. We welcome all elements of the report that address workforce training agreements, the review of federal labour market participation and inclusion programs, changes to the federal tax system for retirees, improvements to the processing of Labour Market Impact Assessments, enhancing the foreign worker program, and facilitating pathways to permanent residence. These are areas that need to be improved and that are under federal jurisdiction. We therefore support the related findings and recommendations.

Accordingly, we wish to make clear that only Quebec and the provinces can intervene in their own areas of jurisdiction, which includes the health sector. They alone are responsible for deciding on health care workers' compensation, working conditions, benefits, workload, workforce planning and developing standards of care. The federal government has neither the jurisdiction nor the expertise to intervene in this area. Any encroachment in this direction on Quebec's jurisdiction would be counterproductive, unacceptable and violate the concept of asymmetrical federalism, established in 2004, which recognizes Quebec's exclusive responsibility with respect to planning, organizing and managing health services within its territory.¹

In conclusion, we believe that the report provides the federal government with ample scope to provide solutions to address labour shortages in its own areas of jurisdiction. Moreover, we reiterate that the federal government's role in health matters is above all to respect Quebec's areas of jurisdiction and to provide predictable, long-term funding to 35% of expenditures, unconditionally, as called for by the premiers of Quebec and the provinces.

¹ Government of Canada, Health Canada: *Asymmetrical federalism that respects Quebec's jurisdictions*, (Online) <https://www.canada.ca/en/health-canada/services/health-care-system/health-care-system-delivery/federal-provincial-territorial-collaboration/first-ministers-meeting-year-plan-2004/asymmetrical-federalism-respects-quebec-jurisdiction.html>.

