

Workforce Planning for

Sudbury & Manitoulin

Planification en main-d'oeuvre



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prepared by:
Workforce Planning for Sudbury & Manitoulin
planningourworkforce.ca
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#### BACKGROUND

According to key informants such as those who employ Personal Support Workers (PSWs), northeastern Ontario, including the City of Greater Sudbury (CGS), is experiencing a PSW crisis - in other words, there are not enough available/trained PSWs to meet demand. While there isn't one contributory reason behind this labour pool shortage, the effects are significant. Shifts go unfilled, workloads continue to be heavy and are increasing, more PSWs are leaving the field than entering, and efforts to attract new students have been less than effective. Additionally, the work of a PSW is often seen as precarious, underpaid, and undervalued. Other factors such as an aging population, increased use of PSWs in public and private facilities/settings (including private homes), the changing scope of work, and the lack of a PSW regulatory body further exacerbates an already complex situation.

As a result of these challenges, Workforce Planning for Sudbury & Manitoulin (WPSM) and the CGS are collaborating on efforts to explore and address local challenges where possible. As a first phase of this project, WPSM conducted a survey of PSWs currently working in the field. This was done in order to better understand some of the factors that influence the attraction, recruitment and retention of PSWs in the CGS and the realities of working as a PSW. The second phase is being done in collaboration with the CGS and will focus on a survey of agencies that employ PSWs. Results from both surveys will be shared at a key stakeholders' meeting to discuss solutions that could mitigate PSW staffing challenges.

This report focuses on the survey of PSWs. As noted, the intent of this survey was to provide PSWs with an opportunity to share their perspectives and opinions, have their voices heard, and contribute to our understanding of the challenges that are currently being faced. Collecting information on what attracted PSWs to the occupation, what aspects keep them in the occupation, and what motivates some to leave the occupation could assist stakeholders in identifying strategies and actions to mitigate and/or resolve some of the current issues that are impacting on this occupation.

SCAN OF THE ENVIRONMENT

At the urging of various agencies, the Northeast Local Health Integration Network (NELHIN) formed a PSW workforce taskforce to explore current and emerging concerns. The NELHIN engaged a number of organizations to assess the situation. This resulted in a high-level set of actions that may/ may not be implemented given the recent provincial government announcement that the LHINs will be dissolved. While this is still in the early days of transition, the NELHIN is continuing to move forward with implementation ideas to address current and projected labour shortages.

While the NELHIN is more focussed on agencies funded by provincial health dollars, the PSW survey discussed here provides important insights into the collective voices of PSWs who are currently working for those agencies and others. All of these insights also need to consider various contributing historical and provincial factors, many of which are well beyond the scope of this research project. Nevertheless, they have led us to where we are today. At a cursory level they include: the increasing/changing scope of work; an aging population requiring additional care; downloading of responsibilities that were once in the domain of other healthcare occupations such as registered nurses; the "under-designation" of PSWs in the NOC codes; the increased reliance on a PSW workforce which is cheaper than other healthcare professionals; the lack of a regulatory body to both champion the value of PSWs and provide provincial-level advocacy and credentialing; the feeble attempt by the provincial government to regulate the profession by having a registry (costly, failed first attempt and unclear results with their current efforts); the lack of recognition re: the role of the PSW as a valued member of the healthcare team; increasingly heavy workloads/responsibilities; high patient/client to staff ratios; low wages; and the precarious nature of the work.

Knowledge gained from this research will be shared with: local colleges. administrators, employers. relevant associations. municipal and provincial leads and others to help them understand current challenges, and support local and provincial solutions.

# Historical/provincial factors

increasing/changing scope of work increasing demand - aging population under designated occupation PSWs cost less low wages no regulatory body not recognized as part of healthcare team high client/patient to staff ratios precarious work

# PSW NOC¹ codes

NOC 4412 - Home Support Workers, Housekeepers and Related Occupations work where care is provided primarily in the client's residence and other non institutional, residential settings. Example titles: personal aide-home support, personal care attendant-home care, home healthcare worker and home support worker.

NOC 3413 - Nurse Aides, Orderlies and Patient Service Associates work where care is provided primarily in hospitals, nursing homes, assisted care facilities and other health care establishments. Example titles: health care aide and personal care aide-medical.

> Research and Ethics approval to conduct research required

Yet, as a society we have placed increased and sometimes unrealistic demands on PSWs to respond to a wide range of healthcare needs in hospitals, long-term care facilities, nursing homes, at home, and other healthcare-related facilities. From the desire to be at home while someone recovers to our aging population, PSWs fill a significant number of needs. This is to say that we need to pay attention to and find ways to not only support those in this occupation, but address some of the current and expected challenges with attracting, recruiting and retaining our PSW workforce.

# PSW OCCUPATION

Data from EMSI Analyst<sup>2</sup> estimates that in 2018, there were 350 workers in **NOC 4412** and 1599 workers in NOC 3413 totalling 1949 workers. For the purposes of this PSW survey, it is not possible to determine how many PSWs actually make up the 1949 people who fit under these NOCs. As a result, it is also impossible to determine how representative our sample of respondents actually is, although researchers are confident in the responses received.

# **METHODOLOGY**

The web-based survey tool Survey Monkey was used to conduct a survey of the PSW workforce. The survey questionnaire was designed by WPSM and the CGS Social Services Division with the intent to ensure anonymity but capture information from PSWs currently working in the field. Questions focused on what aspects of their job they enjoy most, what challenges they have encountered, what aspects would facilitate attraction and retention, and if they plan to stay or leave their occupation in the future.

WPSM was the implementation lead and asked PSW employers in the CGS, PSW associations, local colleges and other PSW training organizations to assist by forwarding information about the study to PSWs currently working in the field. Each was asked to share information by email about the survey to their employees/graduates and/or members who are PSWs. Employers were also asked to display a poster about the survey in locations that staff frequent such as a lunch room. A public service announcement was also played on CBC radio. The survey was open for approximately one month.

Since human subjects were being used for this phase of the research, WPSM sought and received approval from Cambrian College's Research Ethics Committee to ensure that the process and survey instrument being used conformed to a high standard of research ethics as defined by the Tri-Council Policy Statement: Ethical Conduct for Research Involving Humans<sup>3</sup> and the accompanying tutorial the Panel on Research Ethics.4 Once the survey was closed, a Labour Market Analyst was contracted to analyze the results.

#### SUMMARY OF RESULTS

## Profile of respondents

Various demographic questions were asked regarding age, gender, affiliation with a specific designated group, marital status, children (and their age), educational attainment, and years working as a PSW. Each question was carefully designed to help researchers determine whether or not any of these demographic factors influenced the responses of PSWs who completed the survey. For example, did PSWs who worked in the field longer have a different opinion or perspective? Did PSWs who had children living at home identify childcare as a challenging issue? Did higher levels of educational attainment result in higher wages?

<sup>1</sup> NOC is an acronym for the National Occupational Classification used by the Government of Canada. It uses standardized language for describing work performed by Canadian workers in the labour market

<sup>2</sup> economic modeling tool available through a licence held by the Ontario Ministry of Agriculture, Food and Rural Affairs

<sup>3</sup> Interagency Panel on Research Ethics at www.pre.ethics.gc.ca

<sup>4</sup> https://tcps2core.ca/welcome

A total of 80 respondents began the survey and 54 completed the entire survey. When the number of responses per survey question is totalled, there is an average of 62 responses per question.

#### **AGE**

63% of survey respondents (N=47) reported that they were under 35 years of age.

#### **GENDER**

Respondents were asked which gender they most identify with. The vast majority of the respondents were female (91%), the rest were male. Two other options included trans and other, but neither of these were selected.

#### **DESIGNATED GROUPS**

Respondents were provided a range of options where they could choose to self-identify with a designated group. 75 respondents answered this question as follows: 64% said they did not identify with any designated group; 8% identified as Indigenous; 20% as Francophone; 7% as an immigrant; 9% as a person with a disability; and 4% as a visible minority.

#### **MARITAL STATUS**

74 respondents answered the question of: what is your marital status? 45% said they were single, 47% said they were married/common law and 8% said they were divorced.

#### **CHILDREN**

Again, 74 respondents answered this question. 46% had children under the age of 16 living with them, 51% had no children under the age of 16 living with them and 3 % said occasionally.

#### **EDUCATIONAL ATTAINMENT**

Respondents were asked to check all education levels that apply to them, however, it would appear that not all answered the question in the same way. Some did select all levels that applied, while it appears that others only selected the highest level of educational attainment because 25 respondents indicated that they had a secondary school diploma or equivalency (CEGEP was also an option), while 40 said they had a college diploma. It is highly unlikely that 15 respondents have a college diploma but don't have a high school diploma.

The intent behind asking this question (and possibly why there was confusion) was based on the fact that requirements to be a PSW have been shifting and changing over a number of years. As a result, educational requirements and attainment have also shifted. For example, someone could have gone back to school to obtain their credentials and some may now be designated as a PSW by virtue of the number of years they have worked in the field.

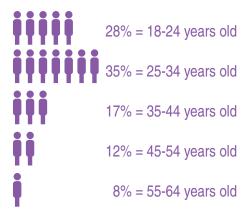
Due to PSW shortages, various hybrid training models for PSWs are also emerging. For example, in Greater Sudbury, students currently completing a diploma in one college in a different healthcarerelated discipline who were unable to pass their final qualifying exam, were offered a significantly shortened PSW training program to get them working and in the field in an effort to mitigate shortages.

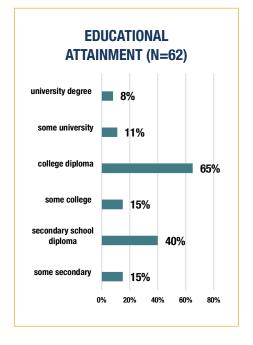
For this specific question and the range of answers, it may be best to treat this question as indicating a respondent's highest level of educational attainment. Based on this, 73% of all respondents have a college diploma or university degree.

# **PSW CERTIFICATE**

92% of respondents said they have a PSW certificate.







Years working as a PSW

48% worked for more than 3 years

18%

worked for 3 to less than 5 years

11%

worked for 5 to less than 7 years

23%

worked for 7 or more years

55% 1<sup>st</sup> Career

#### YEARS WORKING AS A PSW

48% of respondents had been working as a PSW for less than 3 years; 18% had been working for 3 to less than 5 years; 11% for 5 to less than 7 years; and 23% for 7 or more years.

#### **FIRST CAREER**

Regardless of how long someone has been working in the field (as noted above), just over one half (55%) of all respondents indicated that this was their first career.

As noted, all demographic questions were asked to help provide a better sense of the PSW workforce in Greater Sudbury but it does raise a lot of questions: why are women overrepresented? do women entering the workforce for the first time find the occupation of PSW more appealing? and if yes, why? for example, does it fit with their needs as a parent or role as a caregiver? and are shortened PSW specific programs more appealing to those who are entering the workforce as their first career?

# **Characteristics of employment**

#### **EMPLOYMENT STATUS**

Respondents were asked about their type of employment. Responses to this question were cross-tabulated with whether they had been working 3 more/less years as a PSW.

Of the 58 respondents who answered this question, most were evenly divided between full-time and part-time work, with only 3% engaged in casual work. However, as noted in Table 1, there was a difference in the response based on how long the respondent had been working as a PSW. 69% of PSWs who have worked for less than 3 years reported working part-time (and casual hours) while two-thirds of those working for 3 years or more are working full-time hours. Several respondents also reported that while they are considered part time, they often work full-time hours.

TABLE 1: EMPLOYMENT STATUS BY LENGTH OF TIME WORKING AS A PSW (N=58)						
	ALL RESPONDENTS LESS THAN 3 YEARS MORE THAN 3 YEARS					
Full-time	48%	31%	66%			
Part-time	48%	62%	34%			
Contract	0%	0%	0%			
Casual (on call when needed)	3%	7%	0%			



# **Hourly Rate**

16% – \$15 to \$17 per hour 59% – \$18 to \$20 per hour 14% – \$21 to \$23 per hour 12% – \$24+ per hour

# **HOURS OF WORK PER WEEK**

Respondents were asked, on average, how many hours they work per week. 59 respondents answered this question and 49% reported working 31 to 40 hours per week which is considered full-time. Another 15% however said that they work more than 41 hours per week and 36% reported working 30 or less hours per week.

#### HOURLY RATE OF PAY (EXCLUDING OVERTIME)

58 respondents answered the question about hourly rate of pay (excluding overtime). Overtime hours that were reported and increased rate of pay for overtime hours worked, were excluded simply to give a more accurate picture of hourly rate of pay. 16% earn between \$15 and \$17 per hour; 59% earn between \$18 and \$20 per hour; 14% earn between \$21 and \$23 per hour; and 12% earn \$24 or more per hour. Not surprisingly, PSWs working full-time earn more than PSWs working part-time.

#### **WORKING FOR AN EMPLOYMENT AGENCY**

Approximately one-third of all respondents work for an employment agency and interestingly, 25% of those respondents work full-time whereas 75% of those who do not work for an employment agency work full-time. This could be expected as employment agencies often fill gaps that exist resulting in mixed hours and locations of work.

#### **LOCATION OF WORK**

Respondents were asked the location of their work and the responses provide two insights: firstly, the distribution of locations and, secondly, a sense of how many PSWs work in one or more of the locations listed. As can be seen in Table 2, the final total percentage count shows that some respondents checked more than one location for work. It would appear that this is particularly true for PSWs who work for an employment agency as their total responses add up to 121% (as opposed to 108% who do not). This makes sense as the employment agency determines where they are needed.

1/3 PWS work for an employment agency

TABLE 2: LOCATION OF WORK BY HOURS OF WORK AND EMPLOYER						
LOCATION	ALL	PART-TIME	FULL-TIME	WORKING FOR AN EMPLOYMENT AGENCY	NOT WORKING FOR AN EMPLOYMENT AGENCY	
Nursing home	71%	74%	65%	53%	81%	
Retirement home	9%	11%	8%	11%	8%	
Residential facility	5%	4%	8%	5%	5%	
Home healthcare provider	18%	19%	15%	37%	8%	
Hospital	7%	7%	8%	11%	5%	
Private individual/family	2%	0%	4%	5%	0%	
TOTAL	113%	115%	108%	121%	108%	

#### **BENEFITS FROM EMPLOYER**

Close to 6 out of 10 (57%) PSWs indicate that they receive no benefits through work. However, there are significant variations among certain categories. While there was no variation based on educational attainment, 85% of those working part-time, and 75% of those who have been working less than 3 years, did not receive any benefits. For those working full-time, almost two-thirds (64%) receive drug and dental benefits, slightly over half (54%) receive extended health care and slightly under half (46%) get contributions into a work pension or RRSP. Benefits increased for those working 3 years or more.

#### **REASONS FOR MISSING WORK**

Respondents were provided a list of reasons for missing work and asked to check all responses that apply. 25% of all respondents said none of these apply to them. This was slightly higher for those who work for an employment agency. One could surmise that working for an employment agency allows for more flexibility re: work availability and location of work rather than a regular employer. As well, younger workers may not have elderly parents to care for which could be why missing work for caregiving reasons ranked fairly low compared to other reasons.

57% receive NO benefits Two reasons
predominate for
missing work:
1. physical health issues
2. work-related injury
or stress

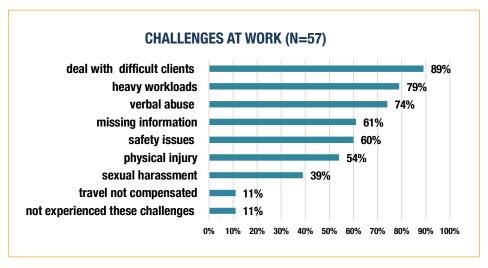


Respondents were also given the option of providing some of their own reasons. 7 respondents added: conflict with children's school activities; stress from working short-staffed; overworked; highway closures due to weather; and being sick.

## **CHALLENGES AT WORK**

Respondents were asked whether they had experienced specific challenges at work, but it is important to state that they were not asked about frequency. The chart below illustrates respondents' answers from a prepopulated list, but it is clear that the number one challenge is "deal with difficult clients" as 89% reported this. Of note is the fact that fewer challenges were experienced by PSWs who work for an employment agency. One might guess that is because these PSWs may work or be allowed to work at a variety of locations so may not be exposed to some of the ongoing challenges that others are experiencing in the same setting day after day.





As with previous questions, respondents were provided the option of identifying other challenges and those responses included: feeling rushed and missing breaks due to staff shortages; family abuse; and unpleasant work environment (client smokes in their home).

All challenges reported and identified are extremely important and need to be addressed from a workplace safety perspective. Most workplaces are not exposed to these sorts of challenges including difficult and abusive clients, heavy workloads and fear of safety and/or physical injury. These issues require far greater attention and an effort to minimize this level of risk through training, policies, workplace strategies, and reduced workloads is needed. This is addressed in the summary recommendations section of this report.

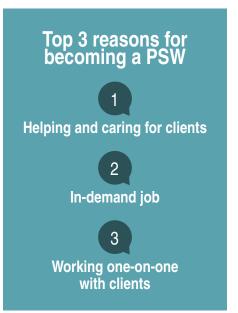
# Attracting, recruiting and retaining PSWs

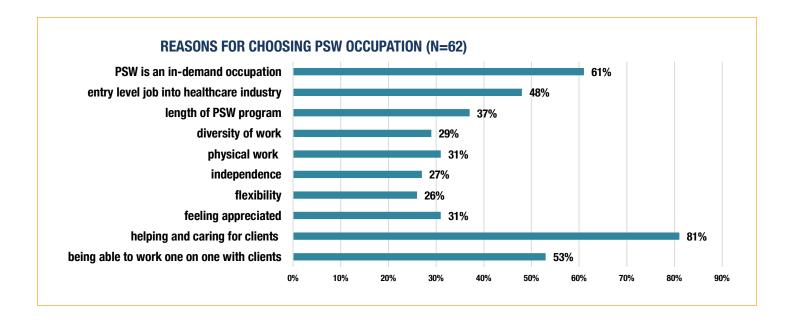
The remaining set of survey questions focused on opinions about working as a PSW, future interest in remaining in the profession and how to make the occupation more attractive to others.

#### REASONS FOR CHOOSING PSW OCCUPATION

Respondents were asked why they had chosen to work as a PSW. The primary attraction reported by respondents is helping and caring for clients (81% of all respondents), followed more distantly by the practical consideration that a PSW is an in-demand occupation (61%) and being able to work one-on-one with clients (53%). Clearly the profession is attractive to those who care about the well-being of others.

48% also felt that being a PSW was an entry level job into the healthcare industry and in particular, nursing. 13 respondents also offered additional reasons and 6 of those made reference to nursing as well – that being a PSW is a good stepping stone or way to gain experience to prepare for nursing. Some of these respondents also reported that they had been unsuccessful in being accepted into a nursing program. As we will see later, the theme of a nursing career also came up when questions were asked about whether or not they plan to continue as a PSW in future.





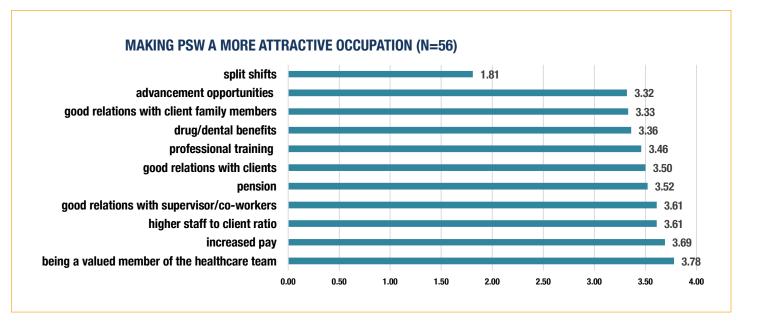
#### MAKING PSW A MORE ATTRACTIVE OCCUPATION

Respondents were asked to use a scale to rate actions they think would make the PSW occupation more attractive. In order to compare answers across actions being proposed, each item on the scale was given a value. An average score for all respondents was developed for each action.

As shown, every action listed was given a rating above "3" (very important) except for split shifts which received "1.81" (slightly below moderately important). When looking at the percentage of respondents (as opposed to average value on the above scale), the following 4 items scored particularly high: being a valued member of the healthcare team (78%); increased pay (80%); high staff to client ratio (74%); and good relations with supervisor/co-workers (69%).

# **MAKING PSW A** MORE ATTRACTIVE **OCCUPATION**

	VALUE
Extremely important	4
Very important	3
Moderately important	2
Slightly important	1
Not at all important	0





# SATISFACTION WITH BEING A PSW

Respondents were asked on a 5-point scale how satisfied they are with being a PSW. 59 respondents answered this question as follows: 24% are completely satisfied; 20% are very satisfied; 31% are moderately satisfied; 17% are slightly satisfied; and 8% are not at all satisfied. While the balance tips towards satisfaction, less than half are moderately/completely satisfied.

#### **CONTINUING AS A PSW OR LEAVING**

Respondents were asked if they plan on continuing to work as a PSW or leaving the occupation. Several differences show up. First, and most importantly is that less than half of PSW respondents (46%) plan to continue working as a PSW and that the remaining 54% plan to leave within the next 5 years. Those most likely to leave include: those who have been working as a PSW for less than three years; post-secondary degree holders; those working part-time; those not working for an employment agency; and those who earn \$21 an hour or more.

This alone should be an important wake-up call to those that employ PSWs and those that create legislation. More will be said on this in the recommendations section, but it can't be stressed enough that measures need to be put in place now to ensure that PSWs will want to stay in their occupation and/or find ways to encourage more to enter the PSW occupation.

# 54% plan to leave PSW occupation in the next 5 years



#### **OPTIONS IF LEAVING PSW OCCUPATION**

For the respondents that said they plan to leave the occupation in the next 5 years, they were asked what their plans or options might be. 32 respondents answered this question and cited 49 possibilities.

There was almost an equal divide between those seeking another line of work (41%) and those who said they plan to stay in healthcare and pursue post-secondary training (38%). Among the eight respondents who cited "Other," six were either about to become nurses or were enlisting in a nursing program, and the other two were pursing unspecified further studies.

Among those who have future plans outside of the PSW occupation, some were already pursuing nursing and were using work as a PSW as a temporary occupation option, while others clearly have the ambition and intention to pursue other careers options.

#### THREE THINGS LIKE MOST ABOUT BEING A PSW

Respondents were asked to list up to three things they liked most about being a PSW and the following 6 themes emerged as illustrated in Table 3.

TABLE 3: THREE THINGS LIKE MOST ABOUT BEING A PSW							
				RESPONSE			
REASON	COMMENTS (taken directly from PSW respondents)	1st	2nd	3rd	total		
helping	caring for others, being of service to others	28	16	11	55		
work environment	hard working profession, working with other healthcare providers, good staff, everyone works as a team	6	14	24	44		
appreciation	smiles of those that are appreciative, grateful responses	5	8	12	25		
social	meeting new people, working with the public	5	12	3	20		
clients	making clients feel happy, comfortable and good	8	3	0	11		
flexibility	flexible hours, flexibility with shifts	4	0	2	6		
TOTAL		56	53	52	161		

Once again, we see that despite all of the challenges, satisfaction derived from helping others was mentioned most often among all the respondents. Even more telling, this aspect of the job was not only mentioned most often but was mentioned first. This suggests that it is one of the most satisfying aspects of the job. The work environment includes working in a healthcare environment and as part of a team. Appreciation, social and clients also speak to the emotional rewards of the work. Flexibility is focused on the more tangible aspects of work such as work hours and shifts.

#### THREE THINGS LIKE LEAST ABOUT BEING A PSW.

Opposite to the previous question, respondents were asked to list 3 things that they liked least about working as a PSW.

STAFFING: "staffing shortages"; "patient to worker ratio"; "heavy workload"; "not enough

time to give care deserved"; "being rushed"

WAGES: "terrible pay/salary"; "the pay"; "low salaries"

WORKPLACE: "co-workers not dependable"; "poor management teams"; "drama" EMOTIONAL TOLL: "not appreciated"; "stressed sometimes"; "clients passing away" PHYSICAL WORK: "can be difficult physically"; "physically demanding"; "kills the body"

SCHEDULING: "long hours"; "split shift"; "working every weekend"

TRAVEL: "travelling"; "not getting paid for mileage"; "having to use my own vehicle" NO BENEFITS: "no retirement plans"; "we work in healthcare and have zero benefits" "difficult clients"; "being hit or kicked"; "rude and abusive residents" CLIENTS:

By a considerable margin, workload and lack of staff is the predominant concern, followed by complaints about low wages. According to PSW respondents, they are overworked and underpaid.

#### CHALLENGES THAT PSWs FACE WORKING IN THE CITY OF GREATER SUDBURY

The final question of the survey asked the following: "What do you feel are the most important challenges that PSWs face working in the City of Greater Sudbury?"

Respondents were provided only one box to write their responses (unlike the previous two questions which invited 3 responses). Nevertheless, individuals often offered more than one answer. Among the 54 respondents who answered this question, 82 items were mentioned.



TABLE 4: CHALLENGES				
THEME	MENTIONS			
staffing/workload	28			
low wages	19			
workplace	11			
emotional toll	8			
physical work	0			
scheduling	4			
travel	3			
no benefits	3			
clients	4			
safety	1			
none	1			
TOTAL	82			

The theme categories almost exactly matched the categories for the things that the respondents liked least about working as a PSW. Table 4 lists the number of times a particular theme was mentioned and by far, staffing/workload comes first, and low wages comes second. The rest of the items pretty much follow the earlier order, except that challenging physical work got no mention.

As in previous questions, respondents were provided space to add other challenges that are important for consideration. These included: entering a new home (safety); profession is unregulated; public perception of PSWs; workplace bullying - constantly pushed to hurry up; unpleasant coworkers; part time staff - work every weekend; hard to take vacation; changing schedules hard on childcare arrangements; 16 hour shifts or working 6 of 7 days; lack of important client information that is detrimental to their care and the PSW's safety (i.e. disease); transportation/city bus times; care for clients; and constantly working short - don't want to leave clients or staff hanging.

#### SUMMARY COMMENTS AND RECOMMENDATIONS

Survey responses yielded some extremely valuable insights into what it is like to be a PSW, what drew someone to the profession, some of the rewards in doing this work and some of the challenges that impact on attraction, recruitment and retention.

Key themes that emerged throughout the survey were used to develop the recommendations listed here. Many of these are complementary and are based on survey responses and discussions with key stakeholders, including those who employ and/or train PSWs.



Above all, PSWs are caring and compassionate professionals – they deeply care about their clients. That is why they entered the profession and why they have stayed. It is all about making sure their clients are looked after, feeling like they have made a difference and supporting their clients in any way that they can. PSWs need to be acknowledged for the tremendous contribution that they make. Additionally, it appears that the occupation of PSW appeals to a wide-range of individuals and just over one half said it was their first career.

# RECOMMENDATION

Develop a public awareness campaign that builds on this theme to attract those who like working with people and care about their well-being. Focus on the rewards of being a PSW. Clients and family members could provide testimonials to highlight the value of the PSW.

# RECOMMENDATION

Collaborate with local high schools (co-op leads, SHSM - Specialist High Skills Majors), colleges (health-related programs) and the university (work integrated learning) for co-op placements, internships and experiential learning opportunities for students to introduce them to healthcare settings and related occupations such as a PSW.

## **THEME 2: PATHWAY TO NURSING**

Nursing was a common theme throughout the survey. PSWs that responded to the survey felt that being a PSW is a solid pathway to nursing. Many PSW respondents plan to leave the PSW profession within the next 5 years, with nursing as their career goal. On the other hand, some PSWs became a PSW as they were not accepted into a nursing program. Others who were in a nursing (or other healthcare training program) were unable to pass their exams which is why they became a PSW.





#### RECOMMENDATION

Explore opportunities to have PSW training and credentialing integrated into the initial semester of all related healthcare professional training programs. This would result in all related healthcare professionals being trained as a PSW first which would increase the PSW workforce and support the continual flow in of new PSWs, even if they move on to other professions at a later date. Some students do this to supplement their income while they attend school. Additionally, this strategy could help sensitize all related healthcare professionals as to the integral role that PSWs perform – that they are a critical part of the healthcare team and continuum of care.

#### **THEME 3: WORKPLACE CHALLENGES**

While there were many instances where PSWs felt valued in the workplace, there were four main challenges that contribute to workplace stress, burnout, missed shifts and departures. These include the client, the work/culture, staffing policies and wages.

**CLIENT:** PSWs reported that most clients are very appreciative and grateful for the work that they do, however, there are other clients (and families) who are very difficult, and in some cases are assaultive (verbally, physically, sexually) and put the PSW at risk of emotional and physical harm. 89% of PSW respondents reported difficult clients.

#### **RECOMMENDATION**

Develop and implement a client and family code of conduct.

#### **RECOMMENDATION**

Develop internal training, policies, protocols and supports for PSWs who encounter difficult clients and/or family members.

**WORK ENVIRONMENT/CULTURE:** Given the nature of the work of a PSW, it is difficult to compare their work environment to other workplaces. However, a number of PSW respondents did report that it was very challenging to work with undependable co-workers/poor management teams.

#### **RECOMMENDATION**

Assess internal policies and practices to determine if they are consistent with creating a safe and harassment-free workplace and explore opportunities for improvement. This is an internal management responsibility/process as is the culture of any organization. The question all employers need to ask: is this a good place to work? Do PSWs feel supported and respected by each other, co-workers, their supervisors and agency management teams? It is not possible to list all of the strategies that are needed to create a positive work culture, but managers and supervisors need to pay attention to this and build internal policies, awareness of policies and protocols for violations.

STAFFING POLICIES: Staffing shortages, high patient/client - PSW worker ratio, and heavy workload (being rushed and not being given enough time to do the work) were collectively rated as the number one challenge reported by PSWs. Again, the majority of PSWs are in the occupation because they care about people. Making it impossible to do their work with time for compassion puts an emotional toll on the PSW. It makes it even more difficult when they are not given enough information on the client, when a client dies and/or when the PSW is being investigated because they did not have the time to properly do their work. Private staffing agencies are currently filling this void at a significant cost to the healthcare system. Could this be done another, less costly way?

# RECOMMENDATION

Implement strategies and steps to reduce high patient/client to PSW ratios. Options might include: hiring additional PSWs on each shift and PSW "floats" on staff to fill in gaps, especially if one client is requiring additional care that day or week. Some hospitals employ this strategy.

# **Policies**

- client/family code of conduct
- work environment culture
- staffing, ratios, workload
- fair wages, benefits, compensation
- sharing information

Is this a good place to work





#### RECOMMENDATION

Conduct a cost/benefit analysis to clearly articulate the cost of: doing nothing; paying for and bringing in external help; the potential collateral harm to clients from shifts that go unfilled; and the loss of valuable PSW staff.

#### RECOMMENDATION

Develop protocols for sharing important client information (while respecting privacy) and supports for PSWs (and other staff) experiencing injury, abuse, harassment, the death of a client and/or other harms such as vicarious trauma.

WAGES: Fair and equitable wages, extended healthcare benefits and reimbursement for travel are key financial compensations that require attention. Although wages vary depending on how long someone has been a PSW and whether one worked for an employment agency or not, the wages are low for the work that is being done. Again, the scope of a PSW's job has changed, as has the level of responsibility, yet the wages and benefits have remained stubbornly low.

#### RECOMMENDATION

Support the need for a PSW regulatory body to establish fair wages.

#### RECOMMENDATION

Implement other compensation strategies and practices (extended healthcare and drug benefits, reimbursed travel, professional development, training and signing bonuses).

#### **THEME 4:** ACKNOWLEDGMENT AND RECOGNITION

There are two aspects to this theme: the workplace and the overall healthcare environment.

WORKPLACE: In some workplaces, the PSW is still not considered an important part of the healthcare team. This means that they are not provided important information to assist their clients with their unique healthcare needs and/or invited to work with the team in decisions re: client care. This results in a workplace "pecking-order" where they are sometimes viewed as "lesser" than other healthcare professionals.

#### RECOMMENDATION

Develop internal policies where the PSW's shift is covered so that they can be part of discussions related to clients in their care and any inter-disciplinary and cross-cultural training opportunities for healthcare staff.

OVERALL HEALTHCARE ENVIRONMENT: While questions were not asked about the need to create a regulatory body, this theme did emerge in different ways. It is very disheartening when the federal government continues to lump the work of a PSW into NOC codes that do not fully appreciate or acknowledge society's heavy reliance on them across both public and private settings. The newly created mandatory PSW registry<sup>5</sup> estimates that there are 100,000 PSWs that work across Ontario, which further points to the need to create a regulatory body. According to Statistics Canada there are only a few thousand more Registered Nurses in Ontario (n=104,923)6 and they have a regulatory body and are well paid.

#### **RECOMMENDATION** (as already noted):

Support the need for a provincial regulatory body to regulate/advocate for fair wages, lower client/



PSW ratios, continuing professional development, NOC code changes, etc.





Ontario's PSW Registry estimates there are 100.000 PSWs across Ontario



There is no regulatory body in Ontario for PSWs

<sup>6</sup> https://www.statista.com/statistics/496935/total-registered-nursing-canadian-workforce-by-province/

# **THEME 5: RETENTION**

Society needs to be concerned not only with attraction but retention of PSWs. Just under 50% of PSW respondents said that they plan to leave the PSW profession within the next 5 years. Additionally, colleges that offer PSW training programs are reporting low enrolment rates.

#### **RECOMMENDATION** (in addition to previous recommendations):

Consider hiring immigrants to meet labour shortages and creating pathways for temporary foreign workers. This may require additional cultural awareness activities to minimize risk of discrimination.

#### **THEME 6:** TRAINING MODELS

Many PSWs are interested in a nursing career. Several post secondary PSW programs are being offered in Greater Sudbury and a hybrid model has also emerged (to fast track students who have completed a related healthcare program but were unsuccessful in passing their final exams).

#### **RECOMMENDATION**

Explore and test the efficacy of hybrid and other training models that could mitigate labour shortages. RECOMMENDATION (already noted): Support co-ops, summer placements and internships with students.

# **THEME 7: STAFFING POOL**

The increased cost of using a private staffing agency to fill missed shifts has mitigated a short term and immediate crisis, but longer-term solutions need to be explored.

#### **RECOMMENDATION**

Conduct a cost-benefit analysis of a public vs. private PSW staffing agency/system to address immediate and projected long term PSW shortages and to determine the most cost effective and efficient approach for meeting staffing and client needs.



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Insights into labour market shortages, current challenges and possible solutions

prepared by:

Workforce Planning for

Sudbury & Manitoulin

Planification en main-d'oeuvre

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