



## Media Release

### **National study points to shortage of skilled community and public health nurses**

HAMILTON, ON (October 19, 2009) - Canada's health care system is transforming itself from acute hospital to community-based care but no-one knows if enough nurses are working in the community to meet increasing demands, including those of an aging population.

A team led by researchers at McMaster University suggests a strong public health/community nursing workforce is essential to address these needs if the goal is keeping people healthy and independent for as long as possible,

The research appears in the October issue of the Canadian Journal of Public Health.

Jane Underwood, co-investigator and consultant in McMaster's Nursing Health Services Research Unit (NHSRU), said "supports in the community could mitigate the need for nursing homes and hospital beds. One of the key supports is the public health/community nurse."

Underwood said more people than ever before are living in the community with chronic illness which puts the burden of their care not only on them, but their families as well.

With the right support, individuals can remain in the community and will not require hospitalization, Underwood maintains. "If you have nurses in place at the right time people may not become ill or don't deteriorate as quickly."

The key, she said, is having enough nurses working in the community to do the job properly and letting them use all the skills they have been trained for. The study provides evidence about efficient use of nurses so that they can work to their full potential.

Andrea Baumann, scientific director of the research unit, said this community health study "provides unique information about the Canadian community health workforce and it will provide essential background for future planning. Groups like public health nurses are critical in emergency preparedness so it is essential that we know how many we have and where they work."

For the study, entitled Building Community and Public Health Nursing Capacity: A Synthesis Report of the National Community Health Nursing Study, researchers analysed Canadian Institute for Health Information's nursing data bases (1996-2007),

surveyed over 13,000 community health nurses across Canada and held 23 focus groups of public health policy-makers and front-line public health nurses.

They found over 53,000 registered and licensed practical nurses worked in community health in 2007, about 16 per cent of the 320,248 nurses in Canada. The breakdown by sector is unknown because community nurses work under various titles, such as: community/public health nurse, home care, visiting or maternal-child nurse. They are employed in a wide range of settings: community health centres, homes, schools. “The issue is trying to determine how many nurses work in sectors such as public health and home care,” said Underwood.

In their report, the researchers said “our study reveals that Canada may not be able to meet the future demand for skilled community and public health nurses, given an aging nursing workforce and predicted nursing shortage.” They added: “In comparison to other health care sectors, the problem is proportionally greater in the community sector because there is a higher percentage of older nurses, fewer younger nurses are entering this specialty and the share of the nursing workforce is not increasing as the need for community services expands.”

The survey of community health nurses shed light on how they can be used to their full potential. “To practice effectively, community nurses need professional confidence, good team relationships, supportive workplaces and community support,” researchers said.

Dr. David Mowat, co-investigator and Medical Officer of Health for Peel Region, agrees. “Attracting and retaining skilled staff, and allowing them to practice to their full potential are critical to the success of public health and other community-based health services,” he said. “This is particularly important for the nursing profession, as it is the largest professional group within public health.”

Funding for the research was provided by the Canadian Health Services Research Foundation, Public Health Agency of Canada, Health Canada (Health Human Resources Strategy Division; Office of Nursing Policy, First Nations and Inuit Health Branch); British Columbia Ministry of Health Services (Nursing Directorate; Communicable Diseases and Addictions Prevention Branch); McMaster University, Nursing Health Services Research Unit; and Vancouver Coastal Health.

**For further information and to arrange interviews, please contact:**

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Laurie Kennedy  
Administrator, Health Services Research Unit  
School of Nursing, McMaster University  
(905) 525-9140, ext. 22206  
[kennedyl@mcmaster.ca](mailto:kennedyl@mcmaster.ca)