

May 27, 2021

**Re: National Approach to Licensure**

Honourable \_\_\_\_\_,

Canada's healthcare system is in crisis. Mobility of health care professionals across jurisdictions must be addressed. We are one country, and all of Canada deserves the best health care in times of crisis but also in regular circumstances.

The COVID pandemic has revealed our healthcare system's pre-existing gaps and weaknesses. As we contend with the third wave of the pandemic, hard hit jurisdictions such as the Greater Toronto area are now requiring "rescue teams" of healthcare professionals including doctors and nurses to travel from other provinces, such as Newfoundland and Labrador, to relieve burned-out local health care providers. The mobilization of out-of-province help was not easy. The Government of Ontario enacted the Emergency Management and Civil Protection Act Regulation 305/21 so that fully licensed professionals from other provinces were able to begin work immediately in Ontario. Without this regulation, out-of-province health care professionals would have needed to comply with the lengthy and expensive process of licensure in another province.

The time is now to explore and pursue a national approach to licensure – as the current segmented regulatory framework is an impediment to the sustainability of Canada's health care system.

Healthcare is a provincial jurisdiction. Each province and territory has their own regulatory college to license healthcare professionals such as physicians and nurses. Physicians and nurses licensed in one province cannot work in another province without going through an application process that can take months and thousands of dollars in fees (over \$12,000 if one wishes to be able to work in all 13 provinces/territories). The process requires re-submitting documentation such as high school grades, medical degree, criminal record checks, multiple reference letters, certificates of professional conduct from every jurisdiction the applicant has worked (often even if it was decades ago), and national specialty certification.

Prior to the pandemic, many rural hospitals across the country were already struggling to maintain their human resources so that their programs, such as obstetrical care, emergency care, surgical care, and other specialty care could continue. For example, some surgical programs are kept open by one single

surgeon on-call 24 hours a day, 7 days a week. This is not sustainable. Canadians need access to healthcare practitioners, irrespective of where they live. National licensure would allow health care professionals to work anywhere in Canada. This would promote and support access to care for patients and coverage for providers. As the pandemic continues, burnout of healthcare practitioners is increasing and many are leaving their chosen profession which increases wait times for patients.

A recent (2019) national survey by the Canadian Medical Association confirmed that 91% of physicians supported national licensure and believed it would improve care for patients. Forty-five percent of physicians reported that, if national licensure existed, they would work in other provinces to support their colleagues in times of need, 42% said they were willing to go to rural-remote regions, and 30% said they would do it on an ongoing basis. Even the Canadian Forces feel the full force of regulatory diversity when caring for military patients, whether locally, domestically or internationally. Those health providers who wish to work in their new home province's civilian medical system must apply for a new license. The Federation of Medical Regulatory Authorities of Canada (FMRAC), which includes all the provincial and territorial licensing colleges, advises that no license portability is possible without provincial government legislation that allows it.

We can look to other jurisdictions to address this issue and find a new path forward. Just over 20 years ago, the Australia federal government and all the states cooperated to enact national registration allowing for providers to work anywhere in the country, leading to patient care improvement. We believe this is possible in Canada.

COVID has shown us that the time to act is now. The provision of healthcare to all Canadians needs a national approach to licensure.

We respectfully urge you to take action to enable a national approach to licensure. It is long overdue.

Sincerely,



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