



Colleges and Institutes: Advanced Skills for the Health Sector

Brief Presented by the
Association of Canadian
Community Colleges to the
House of Commons
Standing Committee on Health



THE ASSOCIATION OF CANADIAN COMMUNITY COLLEGES

The Association of Canadian Community Colleges (ACCC) welcomes the opportunity to provide input to the House of Commons Standing Committee on Health as it examines and reports on health and human resources issues in Canada.

ACCC is the national and international voice of Canada's 150 colleges, institutes, university colleges, cégeps, polytechnics, and universities with a college mandate¹. With campuses in over 1,000 communities, 1.5 million learners, and 60,000 educators, these institutions draw students equally from all socio-economic quarters, and supply graduates with the advanced skills essential to Canada's economic growth and productivity. The vast majority of college graduates find employment in their chosen field within six months.

Colleges are the advanced skills educators of choice, Aligned with the needs of employers, and operating on the leading edge of advanced skills identification, economic trends and market shifts, colleges solicit continuous business and social sector input into curriculum development through Program Advisory Committees. They are key to immigrant credentialing and integration, and the access of the disadvantaged to post-secondary education.

ACCC wishes to underline the key roles that our national network of colleges play in productivity and competitiveness and providing the advanced skills needed by Canada's health sector.

CRISIS IN ADVANCED SKILLS FOR THE HEALTH SECTOR

The key to Canada's economic and social development lies in the knowledge and skill base of human capital. Notwithstanding the economic downturn, we continue to suffer from a critical shortage of advanced skills for the future of the country. The current and predicted shortages in the health sector are acute.

The efficiency, effectiveness and sustainability of the Canadian Healthcare System is imperiled. The aging of the general population and health sector employees, natural attrition and insufficient numbers of health graduates portend greater shortages.

For example, preliminary results of a survey by the Canadian Association of Practical Nurse Educators indicates that the level of practical nurse graduates has remained the same for the past three years yet more and more nurses are needed.

The recent changes to the US health care system will cover 32 million more people, or close to the population of Canada. Canada's already taxed health sector could be further depleted by this new US strategy.

In 2008, over 20 national associations, including the Canadian Healthcare Association (CHA), formed the Employers' Coalition for Advanced Skills. Coalition members share the concern about the capacity of Canada's colleges to produce the graduates their sectors need for Canada's economic and social future. The health sector human resources challenges have led Pamela Fralick, President and CEO, CHA to take on a leadership role within the Coalition, including appearing before the Standing Committee on Finance addressing the broader advanced skills challenges and the particular challenges in the health sector. ACCC echoes the concerns the CHA has presented to the House of Commons Committee as it examines the health human resources capacity for the future.

¹ This document will hereinafter refer to colleges, institutes, university colleges, polytechnics, cégeps and universities with a college mandate as colleges.

COLLEGES CONTRIBUTING TO HEALTH HUMAN RESOURCES

Last year, the Canadian Institute for Health Information (CIHI) reported that just over one million people across Canada, or 1 in 10 employed Canadians, is employed in the health system, representing 6% of total Canadian employment.

Colleges provide the education for over 40 of the 50 health professions identified by CIHI, the National Occupational Classification and the Provincial/Territorial Ministries of Health. These range from paramedics, to practical nurses, radiation technologists, medical laboratory technologists, respiratory therapy technologists, rehabilitation technicians, dental technicians and pharmaceutical technicians.

Colleges are closely integrated with the work of the health accrediting agencies including as members of the Canadian Medical Association's Conjoint Accreditation Committees. The Deans of Health meet twice a year to share expertise and enhance quality of programs.

With the support of Health Canada, ACCC has recently completed a project exploring how simulation can be used as an educational tool to teach clinical communication in the allied health science professions. The ACCC has embarked on a project entitled *Sustaining an Allied Health Workforce* aimed at developing and promoting a pan-Canadian strategy for ensuring a sustainable supply of health care graduates. Part of this initiative will involve identifying best practices, resources and tools designed to improve student retention and graduation, including strategies aimed at First Nations, Inuit and Métis individuals and internationally educated health professionals.

Given the crucial health human resources shortage, colleges are under extreme pressure to meet demand. However, the system is characterized by long wait lists for health programs, aging infrastructure, deferred maintenance, antiquated teaching equipment, space shortages for clinical placements, lack of data for health human resources, and an impending shortage of faculty. Existing college capacity must be secured and new capacity developed.

The cost of health related equipment such as simulation mannequins is significant (\$80,000 for one mannequin) and new technologies are critical to enable colleges to produce graduates at a faster rate. College capacity is essential to ensure the advanced skills for Canada's economic and social future and the viability of our Health Sector.

ACCESS FOR ALL

Education is a prerequisite not only for competitiveness and prosperity, but also for entry of the disadvantaged to the economic mainstream. Colleges embrace under-represented groups and reach out to those who may not otherwise have access to a post-secondary education.

For example, at Red River College, the ACCESS Southern Nursing program is designed to prepare students to enter the Nursing Baccalaureate (BN) program. This program is intended to meet the needs of low-income residents of Manitoba who have not had the opportunity to become nurses because of social, economic, or cultural factors, lack of formal education, or geographical location.

Enhanced supports are necessary to enable individuals from non-traditional groups to access and complete post-secondary education to ensure that all Canadians are able to contribute to, and benefit from, the growth and stability of our country.

Access for Aboriginal Learners

Nowhere is this more critical than in programs that enable Aboriginal Peoples to access and succeed in post-secondary education.

The Indian and Northern Affairs Canada Post-Secondary Student Support Program has capped increases at two percent annually since 1996. According to a study commissioned by the Assembly of First Nations, 10,589 eligible students who successfully completed high school were unable to access support for post-secondary education between 2001 and 2006. Each year, approximately 3,000 additional students are denied access.

The short-sightedness of the funding limits is difficult to understand. These are the youth and adults who have succeeded in acquiring their secondary pre-requisites, who are ready to acquire the advanced skills needed for employment in the health sector, and be role models for others. Instead they languish and de-skill as they wait, and their lack of access to post-secondary education discourages others from following in their footsteps. Deskillings is especially evident in math and science domains necessitating a repeat of learning before entrance to health sector programs.

There is a multiplicity of programs which support individual aboriginal learners to access bridging and health sector programs, but these are project based, fragment and inequitable in the supports for the students.

In one example in Burns Lake, BC, the College of New Caledonia with their community partners and the Lac Babine Tribal Council pieced together over 15 different sources to offer a one year aboriginal community health worker program.

Enhancing Immigrant Access

Highly qualified immigrants provide a global talent pool that currently makes up about 70 percent of the growth in the Canadian human resources, and in the future Canada's economy and its health sector will increasingly rely on immigration to supply the advanced skills needed.

Colleges are the prime providers of immigrant integration programs services across all sectors. They have extensive expertise in bridging programs for foreign educated health workers.

Colleges such as Algonquin College, George Brown College and Vancouver Community College have developed innovative bridging programs to assist foreign educated nurses to update their nursing knowledge and skills. These bridging programs provide the foreign educated nurse the opportunity to remain in the health care field, receive a recognized education, and be prepared for employment at an appropriate level of care suited to their skills and education.

With funding from Human Resources and Social Development Canada and in partnership with Citizenship and Immigration Canada, ACCC is managing the Canadian Immigration Integration Project (CIIP) in China, India and the Philippines. While completing final immigration requirements, principal applicants and their partners are offered advice and guidance to help prepare for employment in Canada. ACCC has recently been awarded a contract, by Citizenship and Immigration Canada, to expand this service to 26 other countries.

INNOVATION MATTERS

Colleges are a valuable health research resource in Canada and are involved in many innovative health sector applied research projects. Colleges conduct clinical trials, develop prototypes, conduct simulations and visualizations, develop new processes, and conduct evaluations of effectiveness. Colleges focus on knowledge transfer and diffusion into the health sector. For example:

The Brain Repair Centre in Halifax conducts innovative research into diseases and injuries of the brain and spinal cord. When the Centre needed to re-design its apparatus for injecting stem cells into the brain, it contacted Nova Scotia Community College. Mechanical and Electrical Engineering Students and faculty from the College built and tested a prototype injector that was smaller, lighter, and easier to operate.

Seneca College faculty and students, in collaboration with TERTEC Enterprises have developed the Mon Ami product. Mon Ami is a wireless, unobtrusive electronic device that assists elderly Canadians and individuals living with physical challenges to connect with their caregivers while living independently.

Inter-professional health care teams provide first response to patients in a disaster or emergency scenario. Centennial College developed a special disaster/emergency preparedness tool that takes the form of an online course and simulation of a mass casualty exercise. The simulation is live and are real community exercises involving professional groups from the emergency response and health fields. Those enrolled play roles as student practitioners assisting professionals, victims, or family members.

The College and Community Innovation (CCI) Program, administered by the Natural Sciences and Engineering Research Council (NSERC) in collaboration with the Canadian Institutes of Health Research and the Social Humanities Research Council is the sole federal mechanism designed to support college applied research. While appreciated, \$30 million a year through CCI pales in comparison to total federal research expenditures estimated at \$2.9 billion per year.

As future employers and employees in the health sector, Canada's college students, under the leadership of college faculty, should be given the opportunity to participate robustly in innovation and research tied to the needs of the community and the private sector. This is key to the college mandate to incubate a balance between creative and practical talent and to educate highly qualified people with the innovative instincts and advanced skills needed to grow productivity.

OPPORTUNITIES FOR FEDERAL ENGAGEMENT

- Establish a college infrastructure and equipment fund adequate to secure the supply of advanced skills requirements of the economy. Over the period 2010-2014 invest \$500 million annually on a cost-shared basis with provinces and territories;
- Increase funding for the Indian and Northern Affairs Canada Post-Secondary Support Program to reflect the increasing number of Status Indians and Inuit learners requiring financial support to enter post-secondary education;
- Direct 5% of federal investment in discovery research to applied research, product development and commercialization carried out by colleges and their private sector partners.

Colleges are uniquely positioned to provide the advanced skills needed by the health sector.

Additional support is needed to address:

- long wait lists for health programs
- aging infrastructure, deferred maintenance
- health related equipment and leading edge technology
- clinical placements and collaborative approaches
- faculty development and recruitment
- health human resources data
- increased applied research
- enhanced funding for aboriginal learners
- support for national level programs such as the:
 - Simulation Enhanced Learning and Clinical Competence
 - Sustaining an Allied Health Workforce
 - Canadian Immigrant Integration Project