



# Defining Health Workforce Vacancies in Canada

## Key Findings From an Environmental Scan



Canadian Institute  
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# Table of contents

Acknowledgements .....	4
Executive summary .....	4
Key findings .....	4
Next steps .....	4
Background .....	5
What we did .....	5
What we learned .....	6
International scan .....	6
Provincial and territorial interviews .....	8
Survey results .....	10
Next steps .....	11
Appendix: Attribute descriptions .....	12

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For more information on this report, email [hwi@cihi.ca](mailto:hwi@cihi.ca).

## Executive summary

In 2023, CIHI undertook an environmental scan to understand how jurisdictions define, characterize and report unfilled health care positions within Canada and other countries.

The environmental scan consisted of an internet-based review of published and grey literature; interviews with provincial and territorial ministerial representatives; an online questionnaire sent to members of the Canadian Association for Long Term Care (CALTC); and a health workforce survey that HealthCareCAN conducted with its membership.

## Key findings

- The majority (85%) of provincial/territorial ministries of health have (or plan to develop) a standardized vacancy definition for the purpose of data collection and reporting.
- The way in which vacancies are measured differs by jurisdiction.
- Nearly all jurisdictions regularly report vacancy data; however, the frequency of reporting varies greatly.

Overall, there is a lot of variability in the definition of “vacancy” throughout Canada as well as other countries, making it difficult to compare vacancy information within and across jurisdictions.

## Next steps

CIHI plans to work with stakeholders to develop and implement a standardized definition of “vacancy” and subsequently collect and report on health workforce vacancy data at the pan-Canadian level.

# Background

Health care workers are the foundation of Canada's health care systems. Understanding how they are distributed, where they provide care and how this is changing is critical to ensuring that the right mix of health care workers is available to meet the needs of Canada's diverse population. CIHI collects supply and demographic data on more than 30 different groups of health care professionals. This information can be used to help plan for a sustainable and equitable health workforce. To support comparable reporting, a standardized definition of "health workforce vacancy" is needed.

The following provides a high-level summary of the results from the environmental scan we conducted to learn how health workforce vacancy is defined.

# What we did

An analysis was conducted to identify which stakeholders to consult and resulted in the following stakeholder engagement process:

- An internet-based review of published and grey literature was completed, both internationally and within the Canadian context, to identify sources of job vacancy reporting and the definition of vacancy being applied.
- Interviews were conducted with provincial and territorial ministerial representatives to identify their approach to vacancy definition and reporting.
- Regional/local organization health care delivery feedback was gathered using 2 mechanisms:
  - HealthCareCAN consulted with members of its board sub-committee, the Health Human Resource Advisory Committee (HHRAC) workforce data working group. Information obtained from these consultations were provided to CIHI for consideration and included in this report.
  - An online questionnaire was sent to members of CALTC to determine how long-term care facilities across Canada define and report job vacancies.

# What we learned

## International scan

We assessed vacancy definition attributes for several countries and international organizations, including the United Nations World Health Organization (UN WHO), the Australian Institute of Health and Welfare (AIHW), Health New Zealand (HNZ), Eurostat, the United Kingdom National Health Service (UK NHS) and the United States Bureau of Labor Statistics (US BLS) (see Table 1). This information helped us to understand the similarities and differences between Canada and other international organizations, allowed us to determine whether international organizations were aligned in how they define and report vacancies, and provided the foundation for interviews with provincial and territorial ministerial representatives.

Overall, vacancy definitions varied between organizations; however, there were similarities among several definition attributes. As shown in Table 1, where specified, organizations indicated that a vacant position must involve active recruitment, be externally posted and have a requirement to be staffed imminently. Health New Zealand and Eurostat were the only organizations to specify that a position must be included within an existing budget to be counted as a vacancy. For many of the organizations, it is unclear whether temporary, contracted and leave-of-absence positions are included in their vacancy counts.

**Table 1** Definition of vacancy in the international health sector: Summary of attributes

Jurisdiction	Recruitment type	Posting type	Budgetary requirement	Recruitment timing	Inclusion of temporary positions	Inclusion of contracted positions	Inclusion of leave-of-absence positions
<b>UN WHO</b>	Active recruitment	External only	Not specified	Staffed imminently	Not specified	Not specified	Not specified
<b>Australia</b>	Active recruitment	External only	Not specified	Staffed imminently	Not specified	No	No
<b>New Zealand</b>	Active recruitment	External only	Yes	Within 6 months	Yes	Yes	No
<b>Europe</b>	Active recruitment	External only	Yes	Staffed imminently	Not specified	Not specified	Not specified
<b>United Kingdom</b>	Not specified	Not specified	Not specified	Staffed imminently	Yes	Not specified	Not specified
<b>United States</b>	Active recruitment	External only	Not specified	Staffed imminently	Not specified	Not specified	Not specified

## Provincial and territorial interviews

### Attributes of existing vacancy definitions

Through interviews with ministerial representatives in the 13 provinces and territories, 8 common vacancy definition attributes arose and were examined (see Table 2). Most jurisdictions have (or plan to develop) a standardized vacancy definition and regularly report vacancy counts. However, as shown in Table 2, there was variability in how jurisdictions measure vacancies; whether vacancy counts include temporary positions and non-employees (e.g., fee for service); and the frequency of reporting vacancy data. For a brief description of the attributes, please refer to the [appendix](#).

**Table 2** Definition of vacancy in the provinces and territories: Summary of attributes

Jurisdiction	Standardized vacancy definition	Vacancy measurement	Budgetary requirement	Recruitment approach	Inclusion of temporary positions	Inclusion of non-employees (fee for service)	Regular reporting	Compare vacancy data with other jurisdictions or sources
Newfoundland and Labrador	Yes	Position	No	Active recruitment	Yes	No	Yes	No
Prince Edward Island	Yes	FTE	Yes	Active recruitment	No	No	Yes	No
Nova Scotia	Yes	Position	Yes	Active recruitment*	Yes	Yes	Yes	Yes
New Brunswick	Planning to	Headcount	Yes	Active recruitment	No	Yes	Yes	No
Quebec	No	Not used at MSSS level	Not specified	Not specified	Not applicable	No	Not specified	No
Ontario	Yes	FTE	Yes	Active recruitment	Yes	Yes	Yes	No



Jurisdiction	Standardized vacancy definition	Vacancy measurement	Budgetary requirement	Recruitment approach	Inclusion of temporary positions	Inclusion of non-employees (fee for service)	Regular reporting	Compare vacancy data with other jurisdictions or sources
Manitoba	No	FTE, headcount, position	Yes	Active recruitment	Yes	Yes	Yes	No
Saskatchewan	Planning to	FTE	Yes	Active recruitment	Yes	No	Yes	Yes
Alberta	Yes	Headcount	Yes	Active recruitment	Yes	No	Yes	Yes
British Columbia	Yes	Headcount	Yes	Active recruitment	Yes	No	Yes	Yes
Yukon	Planning to	Headcount	Yes	Active recruitment	No	No	In progress	No
Northwest Territories	Yes	FTE	Yes	Active recruitment	Yes <sup>†</sup>	No	Yes	No
Nunavut	Yes	FTE	Yes	Active recruitment	No	No	Not specified	No

#### Notes

\* For Nova Scotia, “active recruitment” refers to any efforts being made to fill the position; it is unrelated to when the position was posted.

† Contracts less than 12 months are not included.

FTE: Full-time equivalent.

MSSS: Ministère de la Santé et des Services sociaux du Québec.

## Challenges and opportunities

Throughout the interview process, jurisdictions identified several challenges when working with vacancy data. Challenges included determining which unit of measurement to use (i.e., full-time equivalent [FTE], headcount, position); determining how to accurately interpret vacancy metrics; and broad variability in terminology and definitions. For example, a few jurisdictions cautioned that using headcounts can cause vacancy rates to be overstated compared with using an FTE measure (e.g., 2 individuals working part-time may account for only 1 FTE). Defining what constitutes an FTE was also noted as a challenge since expectations for hours worked for certain professions, such as physicians, has changed post-pandemic. Similarly, 1 FTE could represent a full-time role or 2 part-time positions. As a result, some jurisdictions use both FTEs and headcounts to acquire the necessary context to interpret results.

Several jurisdictions noted that context was important for interpreting vacancy metrics. One jurisdiction noted that vacancy rates risk being overstated if systemic factors are not considered, such as growth and the anticipated addition of roles for health workforce expansion. It was also noted that there is often a lag between a position becoming vacant and when it is posted, which can lead to an underestimate of vacancy.

Interviewees from less populous jurisdictions flagged that having a smaller workforce can cause a standardized measure of vacancy rates to appear inflated compared with rates for jurisdictions with larger workforces, emphasizing the importance of context and comparing like-sized jurisdictions. Some jurisdictions noted that reporting varies across facilities or regional health authorities that use different systems or approaches to track vacancies, so standardization within the jurisdiction presents a challenge.

## Survey results

### HealthCareCAN

In 2023, as part of its own survey development, HealthCareCAN engaged its HHRAC working group to develop national definitions and metrics, including those for vacancy rates. The results confirmed that vacancy definitions varied by jurisdiction, with most definitions including the term “unfilled position.” However, the meaning of “unfilled position” varied, sometimes referring to budgeted positions, short- or long-term positions or permanent or temporary positions, and in some cases to a combination of these. Overall, HealthCareCAN’s findings are consistent with the findings from our international review of literature as well as with the interviews we conducted with representatives from each jurisdiction’s ministry of health.

## Canadian Association for Long Term Care

In 2023, CALTC sent an online survey to its members on behalf of CIHI. 7 organizations responded and provided a definition of vacancy. Consistent with the HealthCareCAN survey results, vacancy definitions and related attributes varied by organization, with the term “unfilled position” frequently cited. Certain organizations included leave-of-absence positions in their vacancy counts and some excluded casual positions.

Human Resources departments were most often responsible for counting job vacancies, but Operations and other departments were also identified. The criteria that resulted in exclusion from a vacancy count were as follows: jobs for which no recruitment action has been taken; jobs not available for immediate filling; jobs of less than 1 day duration; and jobs for which a person has been appointed but has not yet commenced duty.

## Next steps

CIHI undertook an environmental scan to better understand how jurisdictions define, characterize and report unfilled health care positions within Canada and other countries. Based on a review of the literature, interviews with provincial and territorial ministerial representatives, and questionnaire and survey responses, we learned that there is a lot of variability in the term “vacancy” throughout Canada as well as other countries, making it difficult to compare vacancy information within and across jurisdictions. To support comparable reporting, a standardized definition of health workforce vacancy is needed.

As a next step, CIHI will engage key stakeholders and measurement experts to develop a standardized vacancy measure. The measure development will follow CIHI’s indicator development life cycle and may require new data collection. Once finalized, the health workforce vacancy measure will be reported at the pan-Canadian and jurisdictional levels.

## Appendix: Attribute descriptions

The following are brief descriptions of the column headings in Table 2, which relate to the term “vacancy” in the context of the health workforce:

**Standardized vacancy definition** indicates whether a jurisdiction’s ministry of health has developed a standardized vacancy definition.

**Vacancy measurement** indicates the way in which vacancy counts are measured. 3 types of measurement were identified:

- **Full-time equivalent (FTE)** is a unit of measurement that represents the total hours worked by an employee on a full-time basis. If full-time is considered 40 hours per week, an employee working 40 hours and an employee working 20 hours would have an FTE of 1.0 and 0.5, respectively.
- **Headcount** refers to the number of people working in an organization. An organization’s headcount is often higher than its FTE count.
- **Position** is a specific occurrence of 1 job, fixed within 1 service unit or department. There can be 1, many or no holders of a specific position at any time.

**Budgetary requirement** indicates whether a position needs to be funded or have an approved budget to be counted as a vacancy.

**Recruitment approach** indicates the type of recruitment practice used.

- **Active recruitment** means the position is “posted” within a short time frame (e.g., 30 days).

**Inclusion of temporary positions** indicates whether non-permanent positions are included in vacancy counts.

**Inclusion of non-employees** indicates whether non-employees (e.g., fee for service) are included in vacancy counts.

**Regular reporting** indicates whether vacancy counts are reported on a regular basis. Note that the term “regular” was left open to interpretation.

**Compare vacancy data with other jurisdictions or sources** indicates whether a jurisdiction regularly compares its respective vacancy counts with those for other jurisdictions or bodies of evidence.



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