



A Deeper Look Inside Hospital Nursing in the Toronto Area

As part of our growing Canadian Research offering, we ran a 2-week preliminary study with 18 hospital-based nurses in the Greater Toronto Area to hear directly from the frontline. While the sample size is preliminary in scope, the consistency of responses offers meaningful insight into frontline nursing experience within a system under sustained strain. The purpose of this research is not to generalize across all hospitals, but to surface patterns emerging directly from nurses' own assessments of their work, environments, and future in the profession.

Overall job satisfaction averaged 3.3 out of 5, pointing to a workforce that remains engaged but far from thriving. Nurses consistently described pride in their work and strong commitment to patient care, despite frustration with working conditions under which care is delivered. When asked a multi-select question on what most negatively impacts satisfaction, 90% identified staff shortages while the same 90% identified burnout, underscoring how closely these issues are linked. Satisfaction appears to be sustained largely through personal resilience and peer relationships rather than systemic support. As one nurse noted:

“Good shifts are always the best when everything goes right and [you’re] working with great people. It’s bad days or days when I don’t have a solid team that I struggle most.”

Although multiple reasons for concern were expressed, staffing levels emerged as the central concern throughout the study. Adequate shift size was rated 3.06 out of 5, and every participant stated that staffing levels affect patient care, with 40% describing the impact as significant. Nurses spoke about heavier patient loads, reduced time for thorough care, and the constant mental strain of prioritizing under pressure. These conditions were not described as temporary challenges, but as a normalized part of daily work.

The relationship between frontline staff and management was another area of concern. Management's ability to hear and act on feedback was rated 2.53 out of 5, the lowest score across all measured areas. While some nurses acknowledged that feedback mechanisms exist, many expressed scepticisms about whether concerns lead to meaningful or timely change. This perceived disconnect contributes to frustration and workplace stress. One nurse shared:

“As a hospital nurse, I feel there is poor management, that contributes significantly to my workplace stress. At times, I get anxious coming into work because of the lack of support from manager/CPL.”

Support for emotional well-being scored slightly higher at 3.13 out of 5, suggesting that while supports are present, they are often seen as insufficient given the intensity and persistence of stressors nurses face. Emotional strain was described as cumulative, driven

by workload, staffing gaps, and the expectation that nurses will continually adapt without corresponding structural relief. Nurses offered clear recommendations, particularly around meaningful mental health supports. One respondent summarized this sentiment directly:

“Offer some kind of temporary leave to address stress related to burnout. Even something like the implementation of a paid mental health day so people don’t call in sick when they are burnt out. Less bullshit wellness courses from management!”

When asked how patient care could be improved, responses were highly aligned. Like staff shortages and burnout, 90% of nurses identified improved staff-to-patient ratios as essential and that same 90% also emphasized the need for additional support teams such as cleaners, orderlies and volunteers. These findings suggest nurses are frequently compensating for system-wide gaps, increasing workload and reducing the time available for direct patient care.

Questions around retention revealed a workforce at a crossroads. Nurses rated their likelihood of remaining in the profession for an additional two years at 3.33 out of 5, indicating cautious commitment rather than confidence. Burnout was again cited by 90% as the primary factor influencing this decision, suggesting retention is being sustained more by personal endurance than by improved conditions.

Despite these challenges, nurses rated their likelihood of recommending nursing as a profession at 3.6 out of 5. This reflects a complex relationship with the role itself: pride in the profession and its opportunities, paired with concern about how it is currently supported. As one nurse explained:

“I think nursing is a great career, lots of opportunities to advance! I just wish the pay was better and I wish there was more understanding staff.”

Taken together, these findings depict a healthcare system heavily reliant on frontline effort. Nurses are consistently stepping in to fill gaps, adapt to shortages, and maintain care standards under difficult conditions. This work is skilled, essential, and often invisible. While it reflects professionalism and dedication, it raises serious questions about long-term sustainability if underlying issues remain unaddressed.

Nurses have long been the backbone of healthcare systems globally. While Canadians take pride in their healthcare system, studies like this suggest that frontline workers (nurses, physicians, and hospital staff/volunteers) are holding it together through extraordinary effort. That dedication may be masking deeper structural challenges. The Insights and recommendations emerging here highlight the need for meaningful and responsive change.

For a deeper discussion of this research, or to learn more about ScriptMR’s work with Canadian nurses, please reach out. Stay tuned for a follow-up survey examining physician perspectives regarding these issues which will be released in the coming weeks.