



The Impact of Immigration Policy Changes on Home and Community Care in Canada

Executive Summary

The Home and Community Care sector in Canada is under enormous pressure to expand. With the aging population, the increasing desire to age at home, and the stress on the acute and long-term care sectors, home and community care is expected to expand over the next decade and require a significant increase in personnel, in particular PSWs and HCAs.

Occupational forecasts indicate that home support workers face a strong risk of national shortage between 2024 and 2033. Workforce projections indicate Ontario alone will require approximately 50,853 additional PSWs by 2032.

At a time when Canada is experiencing – and will continue to experience – significant demographic change and care demand due to an aging population, restricting immigration pathways, a key labour supply for the home care sector, is misaligned with home care workforce realities and risks further destabilizing care capacity.

Recently, Immigration, Refugees and Citizenship Canada (IRCC) has introduced policy changes intended to reduce the number of temporary residents, including a planned 43% year-over-year reduction in new admissions in 2026 ([IRCC, 2025](#)). These measures are creating significant unintended risks to workforce stability across the health system – particularly in home and community care.

Recent policy changes by IRCC have led to the non-approval of Temporary Foreign Worker (TFW) extensions and permanent resident visas for many health care workers in the home care sector. Given persistent health human resource shortages, rising demand for home care services, and the limited availability of domestic labour, these changes place the continuity of current and future care delivery at immediate risk.

The federal government must act now to protect and extend the roles of Temporary Foreign Workers delivering frontline care in the home and community care sector. As capacity pressures continue to strain the system, the Canadian Home Care Association outlines practical solutions the government can implement to support the workforce and mitigate growing risks to the supply of care.

Background

Immigration contributes significantly to Canada’s economic growth and demographic sustainability by strengthening the labour force, filling critical workforce gaps, and helping mitigate the impacts of an aging population. Internationally trained health professionals are an essential component of Canada’s health workforce, helping address persistent labour shortages across many sectors and supporting the continued delivery of essential services to Canadians.

Home and community care is an essential component of Canada’s health system. It enables individuals to receive care safely in their homes, supports aging in place, and helps reduce pressure on hospitals and long-term care facilities. As demand for these services continues to grow, the sector increasingly relies on a diverse workforce, including internationally trained health professionals, to maintain service capacity and ensure continuity of care.

Workers in home and community care—such as Personal Support Workers (PSWs) and Health Care Aides (HCAs)—provide essential, front-line care, often managing complex needs in home and community settings. However, the home and community care sector is not always explicitly defined within broader healthcare policy exemptions, creating uncertainty around program eligibility.

Recent policy changes by Immigration, Refugees and Citizenship Canada ([IRCC, 2025](#)), as outlined in the 2026-2028 Immigration Levels Plan, are expected to substantially reduce the number of new temporary residents, with targets reflecting an approximate 43% year-over-year decrease from 2025-2026. Within these adjustments, the Temporary Foreign Worker (TFW) Program is projected to undergo a substantial reduction, with target admissions in 2027 projected to be 39% lower than in 2025.

These changes pose significant risks to workforce stability across the health system, particularly in home and community care. Recent reports indicate that many health care workers in this sector are facing non-approval of Temporary Foreign Worker extensions and permanent resident visas, exacerbating existing workforce challenges. These impacts are especially acute in rural and remote communities, where labour shortages are more severe, recruitment pipelines are limited, and reliance on temporary foreign workers is higher. Without targeted policy support, these communities risk further reductions in access to essential services. In the context of persistent health human resource shortages, growing demand for care, and limited domestic labour supply, these developments place the continuity of care at immediate risk.



Problem Statement

Restrictions on Temporary Foreign Worker extensions and permanent resident visa approvals for home care workers will produce immediate reductions in home and community care service capacity. Unlike longer-term workforce policies, immigration decisions affect the existing workforce: workers currently delivering scheduled care will exit employment on fixed dates, resulting in direct loss of care hours.

Role of PSWs and HCAs

Personal Support Workers (PSWs) and Health Care Aides (HCAs) are essential to the home and community care workforce and provide preventative daily support that allows medically stable but vulnerable individuals to remain safely at home. They provide support such as bathing, mobility assistance, meal preparation, and toileting. Unfortunately, these vital roles are increasingly challenging to recruit domestically. The TFW program helps address this domestic supply gap and acts as a key pipeline of talent for home and community care providers. When these workers cannot remain employed, visits are cancelled in real time. These services cannot be deferred, automated, or rapidly replaced through domestic recruitment due to existing labour market constraints.

Canada should always expand domestic training, recruitment, and retention. However, it is not realistic to assume domestic recruitment alone can close the gap quickly enough – or at all – under the current model. Home support work is:

- Physically demanding
- Emotionally intense
- Often done alone
- Logistically difficult due to travel and weather
- Undervalued (i.e., paid low) despite being essential

Most domestic workers will understandably choose jobs with stable worksites, higher pay, less physical strain, fewer safety risks, and more team-based environments. This is not a criticism of domestic workers; it is labour market reality. A sustainable approach requires both domestic recruitment and the augmentation of the domestic market with foreign workers to have any chance of meeting current, let alone future, demand.

Impact

A survey of Ontario's eight largest home care providers found that if this issue is not addressed, an estimated **14 million home care visits** currently performed by over **9,500 TFWs** will be at



risk. This will **impact** between **50,000 and 70,000 individuals** already receiving home care, leaving them without the support they rely on. The impact has already begun and will intensify over the next three years as all those currently on temporary work visas expire. It is an immediate and escalating risk to patient care. This constitutes only a percentage of the impact across the country, from one group of Provider Organizations.

Additionally, occupational forecasts indicate that home support workers, caregivers, and related roles (e.g., Personal Support Workers and Health Care Aides) face a strong risk of national shortage between 2024 and 2033 ([Employment and Social Development Canada, 2025](#)). Workforce projections obtained by The Canadian Press ([2024](#)) indicate Ontario will require approximately **50,853** additional **PSWs** by **2032**. At a time when Canada is experiencing – and will continue to experience – significant demographic change and care demand due to an aging population, restricting immigration pathways, a key labour supply for the home care sector, is misaligned with home care workforce realities and risks further destabilizing care capacity.

System Impacts

- Increased Emergency Department visits
- Increased hospital admissions
- Increased primary care demand
- Delayed hospital discharges
- Accelerated long-term care placement

Workforce Impacts

- Immediate loss of home care staff due to visa/permit expirations
- Increased workforce instability and turnover
- Reduced ability to recruit and train replacement domestic workers quickly
- Greater strain on remaining staff, leading to fatigue and burnout
- Delayed workforce capacity growth, worsening shortages as population aging increases demand

Patient Impacts

- Missed hygiene and toileting assistance
- Malnutrition and dehydration risks
- Infection risk from inadequate care
- Preventable falls



- Isolation and lack of daily support

Caregiver Impacts

- Reduced work participation, including missed shifts, reduced hours, or job loss
- Financial strain from lost income and out-of-pocket care costs
- Increased burnout, chronic stress, and mental health impacts
- Physical injury risk from lifting, transfers, and continuous supervision demands
- Earlier institutional placement when caregiving becomes unsustainable

Economic Consequences

Home care is a core component of Canada's health system. Removing workers already providing care shifts demand directly into higher-acuity settings and puts pressure on long-term care. Unpaid caregivers, (e.g., family members and loved ones), absorb unmet care needs, reducing labour force participation and increasing caregiver burnout, while public costs rise as patients move from lower-cost home care into institutional care. Immigration restrictions in the home and community care sector therefore create simultaneous capacity pressure and economic loss.

Because permit expiries occur on fixed timelines, impacts are immediate rather than gradual. Even small reductions in the active home care workforce produce disproportionate operational consequences in a system already operating near capacity, with constraints for recruiting quick replacement domestically. Limiting extensions or permanency pathways for workers currently delivering care will reduce home and community care capacity, increase hospital utilization, and transfer care responsibility to unpaid caregivers. Workforce stability in home and community care is therefore directly linked to health care system capacity and patient safety.

Solution

The Canadian Home Care Association (CHCA) urges the federal government to prioritize this issue and work with relevant departments to ensure timely solutions. We also call on Immigration, Refugees, and Citizenship Canada to provide full transparency regarding its immigration workforce plan and formally include the CHCA in consultations, allowing us to engage home and community care stakeholders and service providers, to support the development of a measured approach that minimizes workforce supply risk in home and community care.

Call to Action: Immigration, Refugees and Citizenship Canada

Below is a list of immediate actions that Immigration, Refugees, and Citizenship Canada could take to avoid significant workforce disruption in the home and community care sectors:

1. Extend the work permits of TFWs already working in the home and continuing care sectors at risk of losing (or have lost) legal ability to work in Canada. (*Must be employed for a minimum amount of time (1 year) to be eligible*).
2. Ensure future IRCC changes do not limit the health system's access to international pipelines of health human resources – particularly PSWs, HCAs and other lower-wage role for which there is a domestic supply shortage.
3. (Re)introduce permanent residency pathways specifically for home and community care workers (i.e., the *Home Care Worker Immigration Pilot*).

Call to Action: Employment and Social Development Canada

Immediate Administrative Amendment

There is an immediate administrative amendment that Employment and Social Development Canada could make to support expedited approval of permit extensions for PSWs and HCAs:

1. Amend NOC 44101 (Home support workers/caregivers). This currently falls under TEER 4, which makes many community PSW/HCAs ineligible for Express Entry or extension, despite providing essential front-line health care support. The simplest fix is to reclassify PSW work—regardless of setting (home care, LTC, hospital)—as TEER 3 (“skilled”), either by aligning it with NOC 33102 (Nurse aides/orderlies/patient service associates) or creating a TEER 3 PSW/HCA category so their work experience counts toward permanent residency through Express Entry.

Recommendations for Released Federal Measures

We appreciate the federal government's decision to introduce a one-time measure granting permanent residence to 33,000 foreign workers, designed to support temporary foreign workers employed in specific in-demand sectors. As this initiative moves forward, we respectfully encourage the government to **prioritize workers providing essential services in home and community care**, whose skills and dedication are vital to supporting Canada's rapidly aging population and sustaining our health care system.



In addition, we recommend that the federal government take further steps to **explicitly designate home and community care as a protected sector within the Temporary Foreign Worker Program**. Given the essential need of these services and ongoing workforce shortages, such designation would help ensure stability in recruitment and retention, particularly in underserved regions.

Conclusion

The impact of the current policy approach resulting in the non-extension of Temporary Foreign Workers performing home care work, in particular PSW/HCA, will result in a care gap impacting tens of thousands of Canadians currently receiving care.

If a change is not immediately implemented:

- The health and welfare of Canadians currently receiving care will be compromised, resulting in a deterioration of their health, safety, and wellness;
- The Health Human Resource workforce, in particular the critical PSW/HCA group, will contract resulting in an exponentially greater inability to meet growing need in the years ahead as the Canadian population requiring care increases;
- The resultant reduced/unavailable home care will result in increased system-level impact to an already strained system; increasing demand and potentially overwhelming primary care infrastructure, increasing Emergency Department visits, increasing hospitalization, and increased demand for LTC/Nursing home care against an already insufficient supply;
- Greater reliance on unpaid caregivers will push many to reduce labour participation or withdraw from the workforce, lowering productivity and economic output;
- Reduced access to home care will divert clients to higher-cost settings (hospitals and long-term care), driving avoidable increases in public health system expenditures;
- Rising caseloads and staffing shortages will intensify workload pressures, accelerating burnout and attrition within the home care workforce and further weakening service capacity.

The federal government must act now to protect and extend the roles of Temporary Foreign Workers delivering frontline care in the home and community care sector.



ABOUT THE CHCA

The **Canadian Home Care Association (CHCA)** is a national non-profit membership organization committed to fostering integrated, person-centred care in home and community settings. The CHCA represents a diverse membership of public and private organizations that fund, manage, and deliver services and products, providing a unified voice to advance excellence in home and community care across Canada. Through advocacy, collaboration, and knowledge sharing, the CHCA champions a vision of a seamless, accessible, accountable, and evidence-informed health care system that prioritizes patients and their families while ensuring long-term sustainability.

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