



January 23, 2026

The Honourable Peter Bethlenfalvy
Minister of Finance
c/oa Communications Services Branch
Frost Building North, 3rd Floor
95 Grosvenor Street
Toronto, Ontario
M7A 1Z1

Dear Minister Bethlenfalvy,

Pre-Budget Submission: Protecting Ontario Nurses Through Investment in Occupational Health and Safety

On behalf of two professional associations representing frontline nurses in Ontario, and unified in our commitment to safeguard working conditions and protect frontline healthcare workers, we are pleased to provide this pre-budget submission urging the Government of Ontario to prioritize the health and safety of nurses through targeted investments to prevent, detect, and treat chronic hand eczema (CHE).

As the government has identified in its call for pre-budget submissions, protecting Ontario's workers, improving public health, delivering better services, and maintaining safe healthcare staffing levels are central budget priorities. Addressing chronic hand eczema among nurses directly supports each of these objectives.

Budget Ask Summary: Protecting Ontario Nurses from Chronic Hand Eczema

Key Issue

Chronic hand eczema (CHE) affects up to **30% of nurses**, driven by unavoidable occupational exposure to hand hygiene products, irritants, and allergens. **CHE contributes to pain, infection risk, absenteeism, reduced productivity, and premature exit from frontline healthcare roles**, directly undermining nursing retention and safe staffing ratios.

Budget Priority Alignment

- ✓ Protecting Ontario's workers
- ✓ Improving public health and working conditions

- ✓ Delivering better healthcare services
- ✓ Supporting safe and sustainable frontline staffing levels

Recommended 2026 Budget Investments

Occupational Health & Safety Protection: Fund access to safe, gentle alternative hand sanitizing products and emollients, and eliminate harmful irritants in healthcare settings.

Early Detection & Intervention: Support and equip routine screening, training, and occupational health protocols to identify and manage CHE early.

Access to Appropriate Treatment: Ensure timely, evidence-based interventions and treatment options for nurses to prevent disease progression and work disruption.

Workforce Sustainability: Integrate skin health into broader healthcare workplace safety and retention strategies.

Expected Impact

- ✓ Reduced sick leave, disability claims, and turnover
- ✓ Improved nurse retention and productivity
- ✓ Stronger frontline capacity and safer patient care
- ✓ Cost avoidance through prevention and early intervention

Chronic Hand Eczema: A Significant Occupational Health and Safety Issue

Chronic hand eczema is a common, inflammatory, and often debilitating skin condition defined by persistent or recurrent hand dermatitis lasting longer than three months. Nurses are among the highest-risk occupational groups due to unavoidable exposure to frequent handwashing, alcohol-based sanitizers, gloves, and chemical irritants required for infection prevention.

A 2024 publication in the *Medical Journals of Sweden* estimates that the prevalence of hand eczema among nurses may reach 30%, with many cases going unreported. This is substantially higher than the approximately 5% prevalence observed in the general adult population. (1) Similarly, according to a 2025 multinational study including Canada, the prevalence among **Canadian nurses is estimated to be 30%**, reflecting their constant exposure to wet work, soaps, sanitizers, and the use of gloves. (2) These findings reflect the reality of frontline nursing work and the occupational hazards embedded in current care environments.

Impact on Nurses and the Health System

Chronic hand eczema is not a minor inconvenience. It is a painful, relapsing condition that affects nurses' physical health, mental well-being, and ability to work safely and productively.

Findings from the *pan-Canadian Nurses Chronic Hand Eczema Survey Impact Report* (conducted with acute care nurses who have chronic hand eczema during the fall of 2024) (3) highlight the **alarming** scale of the issue:

- 75% of nurses reported persistent dry skin, and 64% reported itching on most days.
- 80% indicated their symptoms worsen due to unavoidable job-related triggers such as frequent handwashing and sanitizing.
- 68% reported a moderate to very high impact on quality of life, and 75% reported a significant impact on work performance.
- Nearly half experienced anxiety, frustration, or embarrassment related to their condition.
- Over half reported little to no benefit from current treatment approaches, resulting in ongoing pain, fissures, and open wounds.

These impacts translate directly into workforce challenges. Evidence from international longitudinal studies shows that **CHE contributes to absenteeism, presenteeism, reduced productivity, and premature exit from clinical roles**. In a five-year follow-up of patients with CHE, more than one-third reported taking sick leave in a single year, and over 5% left or changed their occupation entirely due to the condition. (4)(5)

At a time when Ontario faces ongoing nursing shortages and staffing pressures, preventable occupational health conditions that erode workforce capacity must be addressed proactively.

A Cost-Effective Investment in Workforce Sustainability

Protecting nurses' skin health is a workplace safety issue and a prudent fiscal investment. Preventing and managing CHE can reduce lost workdays, disability claims, and turnover, while supporting nurses' ability to remain in frontline roles and deliver high-quality patient care.

We respectfully recommend that the 2026 Ontario Budget include targeted investments to:

1. **Strengthen occupational health and safety protections** by supporting access to safe, gentle, alternative hand hygiene products and reducing exposure to harmful irritants and allergens in healthcare settings.
2. **Invest in early detection and prevention programs**, including routine screening, training, and occupational health protocols for chronic hand eczema.
3. **Ensure timely access to appropriate treatment options**, enabling nurses to manage symptoms effectively and remain productive members of the healthcare workforce.
4. **Integrate skin health into broader workplace health and safety strategies**, recognizing its role in workforce retention, public health, and safe staffing ratios.

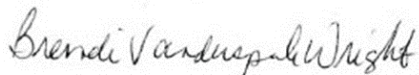
Conclusion

Chronic hand eczema is a significant and underrecognized occupational health issue **affecting nursing retention** across Ontario. Survey data show that nearly all nurses living with CHE report an impact on their ability to perform nursing work, and two-thirds are seeking greater support from occupational health services. (3)

Ontario's nurses should not have to choose between protecting their patients and protecting their own health. Strategic investment through the provincial budget can mitigate this preventable condition, strengthen workforce resilience, and support the government's commitment to protecting workers and delivering better healthcare services.

We appreciate the opportunity to contribute to the pre-budget consultation process and would welcome further discussion on these recommendations.

Sincerely



Brandi Vanderspank-Wright, PhD, RN, CNCC(C)
President

Amy Wright, MScN, PhD, NP-Pediatrics, NCC-BC
President

CANADIAN
ASSOCIATION OF
CRITICAL
CARE
NURSES



ASSOCIATION
CANADIENNE DES
INFIRMIÈRES ET DES
INFIRMIERS EN
SOINS
CRITIQUES



CANADIAN ASSOCIATION OF
NeonatalNurses

CACCN, PO Box 25322, London, ON, N6C 6B1

CANN, 150 - 16 Cootes Drive, Dundas, ON L9H 1B2

References

1. Jamil W, Svensson Å, Josefson A, Lindberg M, Von Kobyletzki L. Incidence Rate of Hand Eczema in Different Occupations: A Systematic Review and Meta-analysis. *Acta Derm Venereol.* 2022 Mar 25;102:adv00681. doi: 10.2340/actadv.102.360. PMID: 35098319; PMCID: PMC9631253.
2. Apfelbacher C, Bewley A, Molin S, Fagnoli MC, Giménez-Arnau AM, Brignoli L, Rault B, Norlin JM, Skaaby T, Crépy MN. Prevalence of chronic hand eczema in adults: a cross-sectional survey of over 60,000 respondents from the general population of Canada, France, Germany, Italy, Spain and the UK. *Br J Dermatol.* 2025 May 19;192(6):1047-1054. doi: 10.1093/bjd/ljaf020. PMID: 39797908.
3. Chronic Hand Eczema Impact Report, Canadian Association of Critical Care Nurses, Canadian Association of Neonatal Nurses, December 2024.
4. Apfelbacher CJ, Ofenloch RF, Weisshaar E, et al. Chronic hand eczema in Germany: 5-year follow-up data from the CARPE registry. *Contact Dermatitis.* 2018;1-9

5. Bruno Halioua, Charbel Skayem, Stéphanie Merhand, Yaron BenHayoun, Charles Taieb, Marie Aleth Richard, Chronic hand eczema in France: occupational impact and work absenteeism, *Clinical and Experimental Dermatology*, Volume 50, Issue 5, May 2025, Pages 1044–1046

Resources

Glenn Ullum A, Barati Sedeh F, Jemec GBE, Ibler KS. Professional Cleaners' and Healthcare Workers' Ability to Recognize Hand Eczema. *Acta Derm Venereol*. 2024 Mar 19;104:adv27985. doi: 10.2340/actadv.v104.27985. PMID: 38501841; PMCID: PMC10964021.

Ibler KS, Jemec GB, Flyvholm MA, Diepgen TL, Jensen A, Agner T. Hand eczema: prevalence and risk factors of hand eczema in a population of 2274 healthcare workers. *Contact Dermatitis*. 2012 Oct;67(4):200-7. doi: 10.1111/j.1600-0536.2012.02105.x. Epub 2012 May 25. PMID: 22624885.

Mossel RM, Naber RJ, van Manen BCT, Rustemeyer T. The prevalence of hand dermatitis among intensive care unit nurses. *Contact Dermatitis*. 2024 Jul;91(1):30-37. doi: 10.1111/cod.14568. Epub 2024 May 3. PMID: 38702937.

Omrane, A., Harrathi, C., Kheder, A., Maoua, M., Ben Abdelkader, M., Khalfallah, T., Mrizak, N., Akrou, M., Henchi, M.A. and Bel Hadj Ali, H. (2024) Outcome of Nurses with Occupational Dermatitis. *Open Journal of Nursing*, 14, 239-251.