



Written Submission for the 2026 Manitoba Budget

From: Canadian Association of Medical Radiation Technologists Manitoba (CAMRT-MB)

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Recommendations:

CAMRT-MB recommends the Government of Manitoba:

- 1. Invest in MRT retention through targeted incentives and career development.**
- 2. Invest in an MRT Health Human Resource (HHR) Plan to ensure an appropriate supply of qualified MRTs.**
- 3. Invest in initiatives specifically designed to address the mental health and well-being of the MRT workforce.**
- 4. Invest in strategies to reduce diagnostic imaging wait times.**
- 5. Invest in theranostics infrastructure and workforce capacity.**



About Medical Radiation Technologists in Manitoba

Medical radiation technologists (MRTs) provide the essential link between compassionate care and sophisticated medical imaging and therapeutic technologies that underpin modern healthcare. In total, more than 800 MRTs are working in Manitoba within the medical imaging areas of radiologic technology, nuclear medicine, magnetic resonance, and the practice of radiation therapy.

About CAMRT and CAMRT-MB

Established in 1942, the Canadian Association of Medical Radiation Technologists (CAMRT) is the national professional association and certifying body for MRTs. CAMRT is recognized in Canada and internationally as a leading advocate for the profession.

The Canadian Association of Medical Radiation Technologists - Manitoba (CAMRT-MB) was established in 2023 to provide province-specific member services in Manitoba. With over 800 members, CAMRT-MB is the active and influential voice addressing professional issues for MRTs in Manitoba.



Introduction

The Canadian Association of Medical Radiation Technologists – Manitoba (CAMRT-MB) welcomes the opportunity to contribute to the 2026 Manitoba Provincial Budget deliberations. Medical Radiation Technologists (MRTs) - including radiological technologists, nuclear medicine technologists, magnetic resonance technologists and radiation therapists - are essential to Manitoba’s diagnostic imaging, cancer care, and treatment pathways. MRTs are at the heart of nearly every patient journey through the province’s health care system.

However, MRTs in Manitoba continue to experience unprecedented workforce pressures, including heavy workloads, insufficient staffing, challenges with recruitment and retention, limited educational support, and increasing rates of burnout. These pressures place strain not only on MRTs but on the health care system’s ability to provide timely, safe, high-quality diagnostic and therapeutic services.

Rising demand, high vacancy rates, aging equipment, burnout and under-resourced infrastructure place both patients and health care providers at risk. The Canadian Association of Medical Radiation Technologists’ (CAMRT) *Medical Radiation Technologist Workforce Crisis Report*¹ describes alarming and unsustainable vacancy rates in every discipline of medical radiation technology in Canada and spells out how demand for MRI and CT exams continues to outpace growth in the MRT profession.

At the same time, the recent report by Deloitte – *Impact of Delayed Medical Imaging in Canada* – shows that delayed diagnostic imaging carries significant costs for patients, the health system, and the economy at large. **It is estimated that Manitoba experiences \$1.8 B in lost GDP and \$173.6M in lost taxes due to delayed diagnostics.**²

Informed by these reports and by the lived experience of Manitoba MRTs and patients, CAMRT-MB urges the government to use Budget 2026 to stabilize, strengthen and future-proof the MRT workforce, modernize imaging infrastructure, and ensure equitable access to diagnostic imaging across the province. The following recommendations outline key investments needed to support a sustainable provincial imaging and radiation therapy system.

¹ Canadian Association of Medical Radiation Technologists (CAMRT). *National Report: Medical Radiation Technologist Workforce Crisis*. November 2025.

² Deloitte Canada. *The Impact of Delayed Medical Imaging in Canada*. Deloitte LLP: July 2025.



Recommendations

1. Invest in MRT retention through targeted incentives and career development.

Manitoba's diagnostic imaging and radiation therapy system is at significant risk due to ongoing MRT retention challenges. Chronic understaffing, excessive workloads, limited career advancement, and a lack of recognition have contributed to poor workplace morale, burnout, and the loss of experienced MRTs. Addressing retention requires more than short-term incentives – it requires sustained investment in both workplace stability and professional fulfillment.

Targeted retention investments that include wellness-focused workplace policies and recognition frameworks that value MRT expertise and experience are a great place to start, however Manitoba must prioritize continuing education and career development as core retention strategies. Opportunities for learning, advancement, and professional growth are essential drivers of job fulfillment and long-term workforce commitment.

Together, targeted retention incentives and sustained investment in education and career advancement will strengthen morale, retain experienced MRTs, and support a stable, high-quality diagnostic imaging and radiation therapy system for Manitoba.

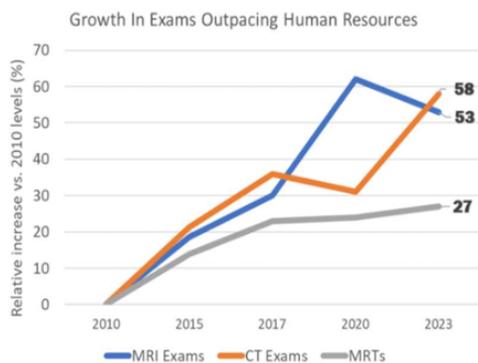
CAMRT-MB recommends that the Government of Manitoba:

- Support workplace initiatives that directly address poor morale by improving staffing stability, workload distribution, and job satisfaction, including measures that reduce chronic overtime and unsafe workload levels.
- Fund retention strategies that will be valued by experienced MRTs and support sustainable careers, such as flexible scheduling options, phased retirement, workload reduction programs, and wellness-focused workplace policies.
- Establish clear career development, recognition and advancement pathways that acknowledge MRT expertise, improve professional fulfillment, and foster a workplace culture of respect and engagement.
- Establish a dedicated provincial fund to support MRT access to continuing education, advanced certifications, modality-specific training, leadership development programs, and conferences and events.



2. Establish an MRT Health Human Resource (HHR) Plan to ensure an appropriate supply of qualified MRTs.

According to preliminary province-specific findings from the 2025 CAMRT *Mental Health Survey*³, 61.6% of Manitoba MRTs report there often are not enough staff to complete required work. Data from CDA⁴ (formerly CADTH) and CIHI⁵, and quoted in CAMRTs' *Medical Radiation Technologist Workforce Crisis Report*, demonstrate that demand in diagnostic imaging exams (specifically MRI and CT) has significantly outpaced growth in the MRT workforce. Manitoba has reached a critical juncture in which the existing MRT workforce is no longer adequate to meet these demands.



Demand in exams outpaces growth in MRTs

MRT growth less than half the growth in demand for MRI + CT

Data from the CDA (formerly CADTH) and CIHI

Manitoba requires a coordinated and forward-looking HHR plan to address current shortages, forecast future needs, and support the training and recruitment of new MRTs. Data collected over more than a decade at CAMRT shows evidence of a deep and sustained shortage of MRTs in all medical imaging and radiation therapy disciplines. CAMRT's 2025 HHR surveys revealed shortages in all disciplines ranging from 8-15%⁶. High vacancy rates hinder the ability of departments to function and deliver service, and for patients to access the care they expect from a modern health care system.

³ Canadian Association of Medical Radiation Technologists (CAMRT). 2025 Mental Health Survey – Preliminary Provincial Brief.

⁴ Canadian Agency for Drugs and Technologies in Health. *The Canadian Medical Imaging Inventory 2022-2023: The Medical Imaging Team*. Ottawa: CADTH; 2024.

⁵ Canadian Institute of Health Information. *Health Workforce in Canada, 2019 to 2023 – Data Tables*. Ottawa, ON: CIHI; 2025.

⁶ Canadian Association of Medical Radiation Technologist. [2025 CAMRT Health Human Resources Survey][Unpublished internal data]. 2025



Without deliberate planning, the province of Manitoba risks continued service delays and workforce instability.

CAMRT-MB recommends that the Government of Manitoba:

- Develop a comprehensive MRT HHR strategy that includes MRT workforce modelling to forecast future demand by modality and geography (urban, rural, northern).
- Develop recruitment targets, including expansion of MRT education capacity in Manitoba.
- Invest in succession planning and retention strategies, especially replacing retiring MRTs and reducing vacancy rates in high-need areas.
- Fund targeted recruitment initiatives for difficult-to-recruit positions, and rural and remote communities through return-of-service education agreements.

3. Invest in initiatives specifically designed to address the mental health and well-being of the MRT workforce.

Medical Radiation Technologists (MRTs) in Manitoba are experiencing sustained, long-standing burnout driven by chronic system pressures. Preliminary province-specific findings from the 2025 *CAMRT Mental Health Survey* indicate elevated burnout risk among Medical Radiation Technologists. The consistency of reported indicators across multiple survey cycles (2018, 2021, 2023 and 2025) demonstrates that this is not a short-term response to isolated strain, but a progressive and cumulative erosion of workforce well-being.

Burnout among MRTs reflects persistent workload intensity, staffing shortages, limited recovery time, and growing service demand. These structural pressures are contributing to emotional exhaustion, reduced professional fulfillment, declining morale, and increasing intent to leave the profession.

This trend represents a structural workforce sustainability risk. Without targeted and sustained investment in mental health support, staffing stabilization, workload management, and organizational culture, Manitoba risks accelerating attrition and further destabilizing diagnostic imaging and radiation therapy services.

Addressing MRT burnout is not simply a wellness initiative – it is a health system sustainability imperative.



CAMRT-MB recommends that the Government of Manitoba:

- Expand access to mental health services tailored to frontline healthcare providers.
- Establish peer-support programs, wellness initiatives, and safe-workplace strategies.
- Fund evidence-based interventions that reduce burnout and promote psychological safety.
- Invest in strategies to reduce chronic workload stress

4. Invest in strategies to reduce diagnostic imaging wait times.

Delays in diagnostic imaging – especially MRI and CT – are not just a problem for patients: they impose costs on families, health care systems, and the economy. According to the recent report by Deloitte – *The Impact of Delayed Medical Imaging in Canada*, long waits for imaging disrupt patient care, delay diagnosis and treatment, and contribute to lost productivity, estimated at 1.8 B in GDP and \$173.6M in lost taxes in Manitoba.

Reforms currently underway in Nova Scotia to modernize its central intake model illustrate the value of embedding experienced Medical Radiation Technologists within the referral triage processes. As that province works to strengthen clinical review at the point of referral, the integration of senior MRT expertise has helped to improve appropriateness, standardize prioritization, reduce incomplete or inappropriate requisitions, and streamline patient booking and routing. A similar approach in Manitoba would align with Recommendation 5 of Doctors Manitoba’s *Axe the Fax report*⁷, which highlights the significant backlog within Manitoba’s central intake system and calls for process redesign to improve efficiency and reduce delays. Manitoba has the opportunity to model its provincial Central-Intake Program for Diagnostic Imaging Referrals on other successful models (like Nova Scotia’s) by formally integrating MRT expertise into intake and triage functions. This would support equitable decision-making, minimize administrative back-and-forth, and accelerate patient access to the right imaging service at the right time.

CAMRT-MB recommends that the Government of Manitoba:

- Reform the provincial Central-Intake Program for Diagnostic Imaging Referrals and embed MRT roles to improve triage and equity.

⁷ Doctors Manitoba. *Axe The Fax: Improving Referrals and Consultations in Manitoba*. 2026. p 12



- Fund initiatives that expand imaging and radiation therapy capacity, including extended hours provided appropriate staffing levels are in place.
- Support system-wide process improvements that enhance patient flow and reduce bottlenecks.
- Invest in modern imaging technologies and replacement of outdated equipment – especially where units have aged beyond safe/effective service life.
- Invest in additional imaging infrastructure, particularly in high-demand modalities such as MRI, CT, and nuclear medicine.

5. Invest in theranostics infrastructure and workforce capacity.

Theranostics is an emerging and rapidly advancing area of medical imaging and treatment that integrates diagnostic imaging and targeted radionuclide therapy to enable personalized, precision medicine. By using specific radioactive agents to both identify and treat disease, particularly in oncology, theranostics allows clinicians to tailor treatments to individual patients, improving outcomes while minimizing unnecessary interventions.

As theranostic therapies become a standard of care in many jurisdictions, Manitoba must take proactive steps to ensure patients have access to these state-of-the-art diagnostic and therapeutic options. This requires dedicated investments in purpose-built clinical space, specialized equipment, and a highly skilled MRT workforce trained in nuclear medicine and advanced therapeutic procedures.

Without coordinated and targeted investment in theranostics infrastructure and staffing, Manitoba risks falling further behind other provinces and jurisdictions, limiting access to innovative treatments and forcing patients to seek care outside the province. Strategic planning and funding to support theranostics will strengthen Manitoba's cancer care system, enhancing recruitment and retention of specialized MRTs, and ensuring Manitobans benefit from the latest advances in precision medicine.

CAMRT-MB recommends that the Government of Manitoba:

- Provide capital funding for dedicated clinical space to support and grow Manitoba's theranostics program.
- Establish dedicated operating funding to create and sustain new full-time MRT positions required to deliver theranostic services.



- Establish ongoing operating funding to support recruitment, retention and advanced training for nuclear medicine technologists required for theranostic services. This should include paid clinical training time, support and incentives.

Conclusion

The data is clear. As outlined in the CAMRT Medical Radiation Technologist Workforce Crisis Report and Deloitte’s national radiology report, Canada – and by extension Manitoba – is at a critical inflection point. Without substantial, coordinated investment, delays in diagnostic imaging and radiation therapy will worsen, threatening patient care, public health, and the sustainability of the healthcare system.

Targeted investments in additional diagnostic imaging infrastructure, particularly in high-demand modalities such as MRI, CT, and nuclear medicine, represent an effective and necessary strategy to reduce diagnostic imaging wait times and improve timely access to care. However, infrastructure investments alone are not sufficient. New and expanded imaging capacity must be accompanied by parallel investments in the MRT workforce to ensure that the equipment is appropriately staffed and able to meet the growing healthcare needs of Manitobans.



CAMRT-MB urges the Government of Manitoba to adopt the recommendations above in Budget 2026. Investing in MRTs, modernizing imaging infrastructure, updating the Central Intake Program, and ensuring equitable access across the province is not only a question of fairness – it is a question of health, safety, and economic well-being for all Manitobans.

We stand ready to work with the government and related stakeholders to support the implementation of these priorities.



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