THINKING OUTSIDE THE BOX: LICENSURE OF INTERNATIONALLY EDUCATED NURSES WITH IDENTIFIED EDUCATIONAL GAPS IN NOVA SCOTIA

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Setting the Standard for Care.
Presentation Outcome

• Goal
  – Present an overview of the project
  – Discuss the preliminary findings

• Background

• What is currently known

• Purpose and methods

• Project framework

• Conclusion
Acknowledgement

• Health Policy Practicum Committee
  – Resource Consultant
    • Cathy Rose RN MN, Registration Services Policy Consultant, College of Registered Nurses of Nova Scotia
  – Supervisor
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Background

• Nursing shortages is a global phenomenon (Buchan & Aiken, 2008)

• A stable and sufficient supply of nurses is needed for an effective health care in Canada (Canadian Institute for Health Information (CIHI), 2015)

• Canada has a diverse population
  – Increasing number of immigrants (Statistics Canada, 2016)
Background

• Increasing number of IEN applicants in all Canadian jurisdictions (Jeans, Hardley, Green, & Da Prat, 2005)

• IENs face challenges in obtaining nursing licences (Covell, Neiterman, & Bourgeault, 2014; Jeans, 2006; Moyce, Lash, & De Leon Siantz, 2016; Singh & Sochan, 2010)
  – May opt out of nursing profession (Salami & Nelson, 2014)
  – Results in a waste in human capital (Kolawole, 2009)
Canadian Context

• Patient population
  – Aging
  – New immigrants

• Aging nursing workforce

• Potential supply: IENs (Blythe & Baumann, 2008)
  – The earlier IENs get their nursing licences, the better the future of our nursing workforce
  – More nurses to provide care
Nova Scotia Context

• CRNNS
  – Mandate
    • Public protection
    • Fair, transparent, and consistent regulation (CRNNS, 2016)
  – 10303 RNs in 2014
    • +0.5% increase in total active practicing licence issued in 2013
    • -1.7% decrease in first-time RN licences issued in 2013

(Cathy Rose, personal communication February, 2016; CRNNS, 2014; 2016)
Current CRNNS Practices

• IENs with educational gaps
  – Must complete remedial education before obtaining any form of licence to practice

• Remedial education
  – One course at the RNPDC
  – Re-entry program at the RNPDC
  – On rare occasions, completion of a baccalaureate degree in nursing
Purpose

• To explore the issuance of licences for IENs with identified educational gaps following a comparison of their nursing education program to that of Nova Scotia

• To make policy recommendations to the CRNNS on the issuance of such licences
Our Assumptions

• IENs may gain from early exposure to the Canadian nursing practice
  – Increase workforce supply
  – Increase patients’ access to care
  – Successful integration
    • Safe, competent, ethical, and compassionate care
Conceptual Framework

• Right-touch regulation
  – A means of addressing a regulatory issue in such a way that an appropriate balance of the responsibilities of professionals, employers, and regulators can be achieved (Cayton & Webb, 2014)

• Principles: Regulation must be
  – Proportionate, consistent, targeted, transparent, accountable, agile (Professional Standards Authority (PSA), 2015)
Project Activities

• Literature review
• Website review of most Canadian RN RBs
• Survey of all Canadian RN RBs
  – 40% response rate
  – Technical issues
• Interviews
  – Three Canadian RN RBs
• Risk assessment
Literature Findings

• Comparability of nursing education
  – Models of nursing education is different in most countries
  – No evidence on how other country’s education is comparable to that of Canada

• Licensure evidence
  – Lack of literature on licencing IENs with educational gaps in Canada
  – Australia issues licence to IENs with specific gaps
    (Nursing and Midwifery Board of Australia, 2016)
Preliminary Findings

• Survey of Canadian RN RBs
  – Most IEN applicants have educational gaps upon initial assessment

• Website review
  – Most provincial RN RBs issue the same temporary licences to both IENs and Canadian graduates
Preliminary Findings

• Temporary licences with restrictions and/or conditions for IENs with educational gaps
  – Few Canadian RBs currently issue this form of licences to IENs

• Confirmation of our previous assumptions of the potential contributions of IENs
Next Step: Questions to Consider

• CRNNS
  – At what point should IENs be assessed for their eligibility for such licences?

• Regulation
  – What roster would we put them on?
  – What will be the role of employers in ensuring IENs practice within their restricted scope of nursing?
  – How should the College monitor IEN’s practices?
  – Would employers be willing to consider hiring them?
Next Step: Questions to Consider

• Right touch regulation
  – How do we assess the risks that may be associated
  – What risks can we mitigate?

• Employers
  – In what practice settings could these IENs work?
  – How should employers monitor IEN’s practices?
  – Under what circumstances could employers hire IENs with this form of licence?
Conclusion

• The number of IEN applicants will continue to increase
  – Regulators and other stakeholders need to continually look at innovative ways to facilitate IENs’ licensure

• Licensing IENs with restrictions or conditions may be beneficial to IENs, Canada, and the public

• Regulators must ensure that they balance the needs to protect the public and the needs to licence IENs
References

• Jeans, M. (2006). In-country challenges to addressing the effects of emerging global nurse migration on health care delivery. *Policy, Politics & Nursing Practice, 7*(3 Suppl), 58S-61S.
References