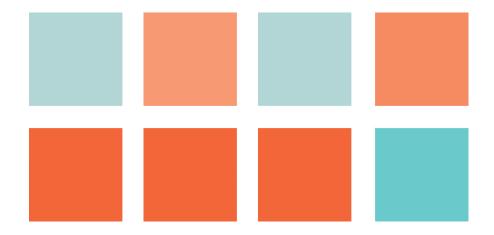


RNAO submission re proposed amendments to a regulation under the Ontario Immigration Act, 2015 in respect of educational requirements for nurses under Express Entry streams

June 26, 2024



The Registered Nurses' Association of Ontario (RNAO) is the professional association representing registered nurses (RN), nurse practitioners (NP) and nursing students in all roles and sectors across Ontario. Since 1925, RNAO has advocated for healthy public policy, promoted excellence in nursing practice, increased nurses' contributions to shaping the health system, and influenced decisions that affect nurses and the public we serve.

Introduction

RNAO welcomes the opportunity to provide feedback on proposed amendments to a regulation under the Ontario Immigration Act, 2015 in respect of educational requirements for nurses under the Express Entry: Human Capital Priorities (HCP) and French-Speaking Skilled Worker (FSSW) streams. We are responding on behalf of our members – 51,650 registered nurses (RN), nurse practitioners (NP) and nursing students.

This submission follows prior RNAO submissions related to proposed changes to O.Reg 275/94 – the regulation governing the education-related registration requirements for internationally educated nurses (IEN) under the Nursing Act, 1991:

- RNAO submission to College of Nurses of Ontario on proposed regulatory changes to education requirements for nurse registration (RNAO, 2024b)
- RNAO submission to Lieutenant Governor in Council on proposed regulatory changes to education requirements for nurse registration (RNAO, 2024c)

RNAO objects to the proposed amendments to the regulation under the Ontario Immigration Act, 2015 for the following reasons:

- 1. They lower entry to practice requirements in the nursing profession, putting patient safety at risk in Ontario.
- 2. They facilitate the unethical practice of international recruitment or "poaching" of nurses.
- 3. They divert focus and resources from other vital nurse retention and recruitment strategies needed to resolve Ontario's long-standing nursing crisis, including boosting the number of nurse educational seats.

1. Lower entry to practice requirements

In previous relevant submissions to the College of Nurses of Ontario (CNO) and to the associated regulatory posting (O.Reg 275/94) provided above, we expressed the following grave concerns.

a) Removal of credential assessment on a school-by-school basis

This change implies that registration requirements from any jurisdiction will be accepted on their face, despite wide variation of rigour, level and standards across institutions and jurisdictions. For example, the proposed approach does not differentiate between a high-standard baccalaureate educational program such as the Canadian BScN and some lower-standard baccalaureate education programs in jurisdictions outside Canada.

As already expressed, to the CNO, RNAO opposes this approach, as it means that applicants with lower standards and less actual training could and likely will be accepted. Instead, we believe that CNO should continue to assess IEN applicants' credentials on a school-by-school basis to ensure schools/programs meet existing regulatory standards.

b) Lowering of standards regarding the level of education required for entry to practice nursing

The proposed revisions to O.Reg 275/94 replace the standard "at least equivalent to [a baccalaureate degree in nursing]" with "substantially equivalent to [a baccalaureate degree in nursing]." RNAO objected to the term "substantially equivalent" as it establishes a lower threshold for comparison than "at least equivalent to". If regulation O.Reg 275/94 maintains these terms, RNAO urges that these be clearly defined.

The new language – "substantially equivalent" is vague and carries a high risk of subjective decisions, resulting in lower assessments of attainment from other jurisdictions. We are especially concerned that this different standard is prone to biases and could result in inequities when applied to credentials from international jurisdictions.

RNAO strongly recommends that "substantially equivalent" be replaced by "at least", as it clearly demarcates a minimum standard with known and proven benchmarks.

All nurses seeking entry to practice in Ontario should be required to demonstrate that their education is -- at least equivalent to Ontario's (and Canada's) nursing baccalaureate. We are firm in our position that the changes proposed to O.Reg 275/94 will lead to downskilling the requirements to practice in Ontario as an RN, with harmful implications for Ontarians' health and safety. We urge that these changes not be carried over to regulations under the Ontario Immigration Act, 2015 as this would have the same effect.

We are deeply concerned that such changes will facilitate international nurse recruitment and poaching. CNO registration processes permit nurses to register from outside Canada without

citizenship, residency or authorization to practice nursing in Ontario if they've met all requirements for registration. Such requirements, per amendments to O.Reg 294/75, would allow nurses to register and then qualify for the Express Entry Human Capital Priorities (HCP) and Express Entry French-Speaking Skilled Worker (FSSW) streams from outside Canada without education at least equivalent to Ontario's (and Canada's) nursing baccalaureate. Further, these proposed amendments under the Ontario Immigration Act, 2015 appear to permit nurses registered in the temporary class – that is, nurses who have yet to even prove "substantial equivalency" – to immigrate through the HCP or FSSW programs.

For the above reasons, RNAO urges the Ministry of Labour, Immigration, Training and Skills Development to restrict HCP and FSSW program eligibility to nurses already residing in Canada.

2. International recruitment

RNAO has a long record of supporting internationally educated nurses (see Appendix A). The mission of our International Nursing Interest Group is to promote universally accessible, affordable and equitable health care for all. The executive members of this interest group bring rich and diverse perspectives, and many are IENs or have experience practising nursing internationally. They provide policy guidance and support to RNAO on issues related to international nursing and international nurse education.

In 2022, RNAO identified a serious backlog of IEN applicants for registration with the CNO. In response, RNAO immediately called attention to this matter at top ministerial and agency levels, engaging with the Premier's Office, the Ministry of Health, the Fairness Commissioner and the Ontario Human Rights Commission, as well as the CNO itself. We urged the CNO to adopt a more streamlined and fair approach to processing IEN applications. CNO has responded superbly and the backlog of IEN applicants for registration with the CNO is minimal.

RNAO also created a new membership category – "IEN Associates" members – specifically for the purpose of providing support to IENs residing in Canada for fair access to Ontario's nursing workforce and opportunities for career support, mentorship and career progression.

RNAO's key public policy asks in support of fair treatment of IENs in Ontario's workforce include (RNAO 2024a):

- expediting applications and developing and funding pathways for registration of IENs to become nurse practitioners (NP), registered nurses (RN) and registered practical nurses (RPNs) in Ontario, while maintaining Ontario's BScN entry-to-practice standards
- supporting RNs through their career by:
 - expanding the Nursing Graduate Guarantee (NGG) to ensure access to all new RN registrants, including IENs

 reinstating the Late Career Nurse Initiative (LCNI) and returning recently-retired nurses to the workforce as mentors for NGG.

RNAO seeks equality of entry to – and opportunity in – Ontario's nursing workforce, while maintaining entry to practice requirements based on educational equivalency to the Canadian nursing baccalaureate. See Appendix A for highlights of RNAO's advocacy on behalf of IENs.

While RNAO has led the way in supporting IEN applicants residing in Canada, we have also vocally and firmly stood against the practice of international recruitment of nurses. The proposed amendments to O.Reg 422/17 aggravate RNAO's concern that Ontario is adopting a policy of international recruitment akin to "poaching" in response to the province's current nursing crisis. The proposed regulatory changes – intended to "support efforts to increase Ontario's health human resource capacity" (as expressed on the regulatory consultation page) – will undoubtedly have the effect of depleting the supply, and exacerbating shortages, of nurses currently living and working in other countries – most with needs far greater than Canada.

RNAO considers international recruitment of nurses unethical. There is currently a global shortage of nearly six million nurses, affecting both developed and developing countries (Stievano et al., 2021). Nursing shortages in developing countries are being worsened by international recruitment. As of 2019, as noted in a recent report (OECD, 2023), there were 550,000 internationally trained nurses working in the 36 high-income OECD member countries – an increase of 20 per cent compared to 2011 (OECD, 2019). International nurse recruitment in response to domestic nursing shortages is partly responsible for this increase. In 2021, international recruitment reached an all-time high in Canada (OECD, 2023). It is expected that international recruitment will continue to increase as the federal and provincial governments enact policies that enable or facilitate international recruitment (OECD, 2023).

The prevalence of international nurse recruitment has garnered attention from organizations such as the World Health Organization (WHO) and the International Council of Nurses (ICN), who have both responded with policy to govern and constrain the practice. Both organizations point to the need for high-income countries to address our issues related to nursing shortages domestically, and to help developing countries with financial support and resources (Buchan and Catton, 2023; WHO, 2010).

The accelerated global migration of nurses triggered by recruitment initiatives has increased vulnerabilities for countries suffering from the most significant health workforce shortages (WHO, 2023). The most recent update to the WHO's "health workforce support and safeguards list" identifies 55 countries that "face the most pressing health workforce challenges related to universal health coverage" (WHO, 2023). These countries – those falling within the blue

rectangle in the graph shared below – have both a low health workforce density and a low universal health coverage service coverage index. Per WHO, the countries identified on this list require supports and safeguards to ensure health workforce development, strengthening of their health systems, and limitations on international recruitment (WHO, 2023). See Figure 1, below. In addition to these countries, India and the Philippines—two significant source countries of Ontario IENs – are also experiencing severe nursing shortages. The Philippines has a shortage of over 127,000 nurses, while India is currently facing a shortage of 2.4 million nurses (Jadhav & Roy, 2024; Lalu, 2023).

personnel, and midwifery personnel)

Note: Countries included in the blue rectangle are included in the WHO health workforce support and safeguard list 2023. They have a health workforce density less than the median of 49/10 000 pop and a UHC service coverage index less than 55.

Figure: parameters for inclusion in the WHO health workforce support and safeguards list 2023

Figure 1

Source: WHO, 2023.

RNAO recognizes the right of individuals to migrate globally and that many nurses have come to Canada and made it their home, we fully support voluntary and unsolicited migration (Alberga, 2022; Dufour, 2023; Senoran, 2024; Wallace & Keung, 2024).

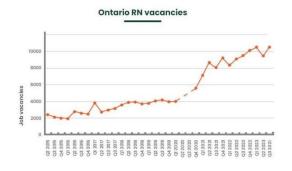
RNAO firmly opposes the active lowering of standards with the stated intent to actively encourage migration and poaching in the context of a global nursing shortage. Moreover, policies that promote the practice of international nurse recruitment have the unintended consequence of enriching predatory and profiteering recruitment/staffing agencies.

Nursing crises in wealthier countries are the consequence of policy decisions and must be corrected by policy focused on domestic nurse retention and recruitment. There is no need – nor is there any justification – to rob or erode the rights of people around the world to health care to protect the same rights of Canadians.

3. Domestic retention and recruitment strategies

Without question, Ontario has a nursing crisis. Ontario's vacancy rate for RNs is higher than ever before (see Figure 1 below), and Ontario has a deficit of 25,000 RNs benchmarked against the rest of Canada (see Figure 2 below). The shortage of RNs is growing more and more acute. The Ministry of Health's own documents convey that there is a current nursing shortage in Ontario, which is projected to reach a gap of 33,200 nurses by 2032 (The Canadian Press, 2024).

Figure 2 Figure 3



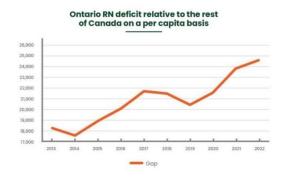


Figure 2 source: Statistics Canada (2023).

Figure 3 source: Calculation by RNAO. RN Statistics from Canadian Institute for Health Information (2023). Population Statistics from Statistics Canada (2022).

In response, RNAO has long urged the government to implement comprehensive nurse retention and recruitment measures, including most recently in our <u>2024 provincial pre-budget submission</u> (RNAO, 2024a, 6–9) and our <u>Nursing Career Pathways</u> report (RNAO, 2023). This can be done if the provincial government and health system employers take the necessary steps to build nursing careers in Ontario, by:

- 1. improving nurses' working conditions
- 2. improving supports across all levels of the nursing profession
- 3. incorporating principles of diversity, equity and inclusion into all systemic and organizational policies, and acting on them
- 4. expanding Ontario's nursing workforce
- 5. expanding Ontario's nursing student population.

We very much appreciate that the Ontario government has taken steps to increase the number of nursing seats in our province, adding 2,000 RN seats, 1,000 RPN seats and 150 NP seats. Yet the most recent available data regarding baccalaureate nursing programs shows that there has not been a significant increase in nursing student enrolments or graduates in recent years, despite increases to admissions (see Figures 4 and 5 below). The data signals that nurse

retention should be a core priority for resolving Ontario's nursing crisis, and treated as such by the government and system employers.

Figure 4

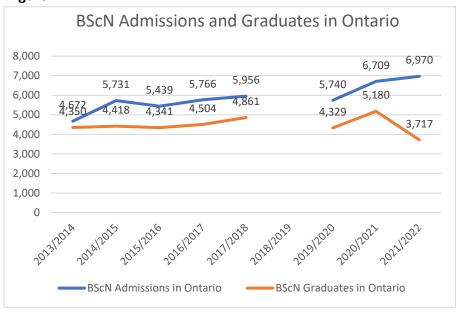
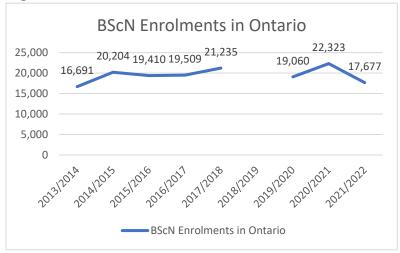


Figure 5



Sources for Figures 4 and 5: CASN 2019; CASN 2021; CASN 2022; CASN 2023

We urge the government to further increase enrolments and corresponding funding for baccalaureate nursing programs in Ontario by 10 per cent per year for five years (RNAO, 2024a). And, as there is a dire need for NPs, we call on the government to increase the number of student-nurse practitioner seats to yield a total of 7,500 NP registrants by 2030 (RNAO, 2024a).

Conclusion

RNAO has been at the forefront of supporting IEN applicants who reside in Canada to secure registration with the CNO. We have engaged health employers and multiple layers of government – the Premier's Office, Ministry of Health, the Fairness Commissioner, the Ontario Human Rights Commissioner, and the CNO – to achieve fairness and equity of access to support, mentorship, employment and career advancement for IENs.

What RNAO opposes strenuously is the active recruitment of nurses from other countries that often have a far more profound need than Canada. The proposed amendments will contribute to lowering educational standards for entry to practice in Ontario's nursing profession — an important layer of protection for public safety. RNAO is also gravely concerned that these amendments facilitate international nurse recruitment and signal a change in government policy. Ontario's nursing crisis is a consequence of domestic policy and ought to be resolved by domestic policy. RNAO stands firmly for retaining equivalency to Canada's nursing baccalaureate as an entry to practice standard and firmly against the poaching of nurses from other jurisdictions.

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Appendix A: RNAO advocacy for internationally educated nurses

#IENaction campaign: https://rnao.ca/covid19/ienaction

Webinars:

- RNAO Webinar Series- How internationally educated nurses can help solve the nursing crisis:
 - o https://www.youtube.com/watch?app=desktop&v=TIEzKrvLRWI&embeds referring euri=https%3A%2F%2Frnao.ca%2F&feature=emb imp woyt
- RNAO Small Talk: Internationally educated nurses:
 - https://www.youtube.com/watch?v=mVfQ27npoxY

Submissions:

- RNAO 2022 Provincial Pre-Budget submission
- RNAO Submission to Standing Committee on Finance and Economic Affairs re Schedule 6 of Bill 106, Pandemic and Emergency Preparedness Act, 2022
- RNAO Submission re proposed regulations to the Regulated Health Professions Act, 1991
- RNAO 2023 Provincial Pre-budget Submission
- <u>Submission to the Ministry of Long-Term Care on proposed amendments to Ontario</u>
 Regulation 246/22 under the Fixing Long-Term Care Act, 2021
- Submission to the Ministry of Health on Bill 60, Your Health Act, 2023
- Submission to the Ministry of Health on regulations related to Bill 60, Your Health Act,
 2023
- Submission to the Government of Canada re proposed Safe Long-Term Care Act
- RNAO Ontario pre-budget submission Jan. 30 2024

Letters:

- Letter to Minister of Health re Reducing Financial Barriers to CNO Registration
- Letter: Second request from RNAO to CNO for collection of race-based data
- Letter to College of Nurses Re: Internationally Educated Nurses
- Letter re: Race-based and Indigenous identity data advancing racial equity in nursing

Blog post: https://doris-blog.rnao.ca/post/listening-internationally-educated-nurses-living-ontario-and-eager-nurse