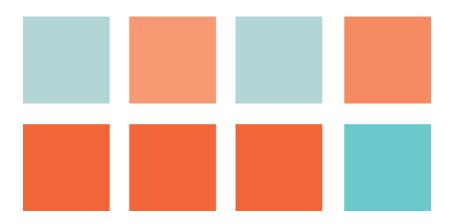


RNAO Submission in response to proposal 25-HLTC005: Reducing Barriers to Registration and Practise for Regulated Health Professionals Registered in other Jurisdictions

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Introduction

The Registered Nurses' Association of Ontario (RNAO) is a professional association representing more than 54,400 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' contribution to shaping the health system, and influenced decisions that affect nurses and the public we serve.

RNAO welcomes the opportunity to provide feedback on the proposal to reduce barriers to registration and practise for RNs and NPs registered in other jurisdictions. This initiative has the potential to enhance access to care across Ontario by reducing registration delays and enabling nurses to begin working without unnecessary barriers (1).

RNAO's support for interjurisdictional mobility

RNAO supports the principle of interjurisdictional mobility of nurses, which aligns with a pan-Canadian approach to workforce mobility. Allowing RNs and NPs to practise in Ontario while awaiting registration promotes workforce agility and can improve patient access, particularly in areas facing critical shortages.

Expanding this framework to include qualified nurses – specifically, BScN-prepared RNs and master's-prepared NPs from the United States – is a logical next step. This must be done, however, with careful attention to maintaining Ontario's professional and educational standards.

RNAO's line in the sand: Upholding education standards

RNAO strongly emphasizes that a Bachelor of Science in Nursing (BScN) must remain the minimum educational requirement for RNs, and a master's degree must remain the requirement for all NPs. These are not arbitrary thresholds – they are grounded in research, aligned with system needs, and essential for safeguarding the quality of care.

Rationale

1. Evidence-informed care and better outcomes

Studies consistently show that nurses with higher education levels contribute to improved patient outcomes, including reduced mortality and fewer adverse events. BScN prepared RNs and master's-prepared NPs bring the competencies needed to manage scope specific complex care, engage in evidence-based practice, and lead within interdisciplinary teams (2,3).

2. Alignment with Ontario's health-care demands

Ontario's system increasingly requires nurses who can operate at full scope, contribute to health system transformation, and support quality improvement. These abilities are cultivated through rigorous academic preparation at the baccalaureate for RNs and Masters levels for NPs (4).

3. Professional consistency and public trust

Ontario has long recognized nursing as a knowledge-based profession. Maintaining high education standards preserves regulatory consistency, supports interjurisdictional credibility, and ensures continued public confidence in the care delivered by RNs and NPs.

Caution against intra-Canada poaching

While RNAO supports mobility between provinces and territories, we urge the Ministry of Health to approach this with care and ethical responsibility. Several Canadian jurisdictions – particularly in the North and Atlantic Canada – face far more severe health human resource shortages than Ontario. Extending as of right registration must not result in the systematic poaching of nurses from jurisdictions in greater need, especially those with fewer resources to train and retain their own nursing workforce. Doing so would risk weakening national solidarity and exacerbate inequities in access to care across the country.

Ontario must contribute to a sustainable, collaborative national approach to health workforce planning – not draw strength at the expense of others.

The importance of retention and education expansion

Attracting RNs and NPs from other jurisdictions or countries must be matched with strong retention and educational capacity-building within Ontario. This includes:

- **Implementing retention strategies** to keep RNs and NPs in the profession, such as improved staffing ratios, competitive compensation, mental health supports, and career development opportunities (5–8)
- **Expanding funded education seats** at both undergraduate and graduate levels to meet unprecedented interest in nursing and build a self-sufficient pipeline of qualified nurses (6,9–11)

Recommendations

To ensure new legislation and regulation strengthens Ontario's nursing workforce without compromising quality or equity, RNAO recommends that the Ministry of Health:

- 1. Maintain the requirement for BScN education for all RNs and master's-level preparation for all NPs practising in Ontario.
- 2. Extend "as of right" practice only to BScN-prepared RNs and master's-prepared NPs from the United States, who meet all regulatory and professional requirements.
- 3. Avoid the active recruitment of nurses from Canadian jurisdictions with greater health human resource needs than Ontario and engage in collaborative national workforce planning.
- 4. **Invest in retention strategies** to stabilize the existing RN and NP workforce in Ontario.
- 5. **Increase the number of funded nursing education seats** to accommodate strong public interest in the profession and ensure future workforce sustainability.

Conclusion

Bill 2 offers a timely opportunity to improve workforce mobility and patient access. However, it must be implemented thoughtfully – upholding Ontario's standards, supporting national equity, and investing in long-term workforce resilience. RNAO urges the Ministry of Health to take a principled and evidence-informed approach to the provision of nursing resources in Ontario – one that serves the best interests of Ontarians while reinforcing the integrity of the nursing profession.

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