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Waiting and watching: Nurse migration trends before a change to the National Council Licensure Examination as entry to practice for Canada's nurses

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ABSTRACT

Background: A number of factors in the health care environment, including a change in regulatory policy, may affect a country's nursing workforce and nurse migration and mobility.

Purpose: This study compared the characteristics of Canadian-educated nurses who had migrated to the United States to work with their colleagues in the United States and Canada in anticipation of a change in Canada's RN entry to practice requirements in 2015.

Methods: We conducted a retrospective comparative study of nurses in Canada and the U.S. using 2008 data from the US National Sample Survey of Registered Nurses and the Canadian Institute of Health Information.

Discussion: There was little change in the number of Canadian-educated nurses working in the United States in 2008 compared with 2004. We found differences between U.S. nurses and Canadian-educated nurses working in the United States in educational level, work status, work location, and age. No differences were found between Canadian-educated nurses working in the United States and those working in Canada.

Conclusions: This research highlights the value of international comparisons of the nursing workforce, especially in the context of anticipated regulatory changes, which may affect a country's nursing health human resources.

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POLICY BOX — POLICY IMPLICATIONS OF CHANGES TO CANADIAN ENTRY TO PRACTICE REQUIREMENTS

- Canadian nursing regulatory bodies have agreed with the National Council of State Boards of Nursing to implement the National Council Licensure Examination as entry to practice examination beginning in 2015
- Change to the National Council Licensure Examination as the examination requirement may facilitate future migration of Canadian nurses to the United States
- Effect of regulatory policy change on nurse recruitment and retention is unclear
- Baseline information on Canadian nurse migration to the United States before policy change occurs allows for comparisons and assessment of effect of this policy change post-2015

Studies have shown nursing shortages lead to accelerated international nurse recruitment (McGillis Hall et al., 2009a; McGillis Hall et al., 2009b; McGillis Hall, Peterson, Price, Lalonde, & McDonald Rencz, 2013; Pittman, Folsom, & Bass, 2010), but little attention has been directed toward how regulatory policy changes within a country can impact nurse recruitment and retention. In December 2011, Canada's nursing regulatory bodies announced a new partnership agreement for the registered nurse (RN) entry examination to be implemented in 2015. This would mean moving away from the Canadian examination used since 1970 to the National Council Licensure Examination offered by the U.S. licensing body, the National Council of State Boards of Nursing. Most Canadian provinces/territories have used the same licensing examination, the Canadian Registered Nurse Examination, which was developed by the Canadian Nurses Association (CNA) and managed by the CNA's testing company as a paper and pencil examination offered three times a year. The Canadian regulatory bodies had been engaged in discussions with the CNA for several years about moving to a computer-adaptive technology examination that would be more accessible to potential registrants, but they could not reach a consensus on the nature and model of this type of examination. This resulted in Canadian regulators releasing a request for proposals for the development of a computer-adaptive technology examination in September 2011 and eventually selecting the National Council of State Boards of Nursing as the preferred vendor.

One concern having emerged in Canada is that this change may make it easier for Canada's nurses to migrate to the United States in the future. Canadian

nurses have been moving to the United States for work for many years, yet the potential impact of this policy change on facilitating nurse mobility to the United States is unknown. Clearly, trends in Canadian nurse migration to the United States need to be monitored. Canada faces a significant nursing shortage in the future: it has been predicted there will be a shortage of almost 60,000 RNs by 2022 (CNA, 2009) despite the substantial policy attention being directed toward quality work environments and needs-based forecasting for nursing health human resources in Canada (CNA, 2009). At the same time, recent projections indicate the United States will face a shortage of 260,000 RNs by the year 2025 (Buerhaus, Auerbach, & Staiger, 2009). The United States is recruiting foreigneducated nurses to cope with the nursing shortage (Pittman, Folsom, & Bass, 2010), and earlier research on international mobility trends reported recent graduates employed in the United States were most likely to come from Canada (Buchan, Parkin, & Sochalski, 2003).

In 2009, McGillis Hall et al. (2009a, 2009b) reported sizeable increases in Canadian nurse migration to the United States in the 1990s, primarily related to opportunities for full-time work opportunities and ongoing education, both factors of particular importance to baccalaureate-prepared nurses. Data from the 2004 U.S. National Sample Survey of Registered Nurses (NSSRN) indicated there were 100,791 foreigneducated nurses in the United States, and 20% (i.e., 20,345) of these were from Canada, an increase from 16% in 2000 (Health Resources and Service Administration [HRSA], 2006). This suggests Canadian nurses were continuing to migrate to the United States. However, just 89,860 of those nurses were working specifically in nursing itself, and 17,668 of them were Canadian.

The number of Canadian-educated nurses working in the United States did not change significantly between 2004 and 2008 (in 2008, the number was 17,152); however, the number of internationally educated nurses (IENs) in the United States has more than doubled, from just over 5% in 2004 to just over 8% in 2008 (HRSA, 2010). "The Philippines continued to dominate as the source country of the IEN workforce (50 percent), followed by Canada at nearly 12 percent." (HRSA, 2010, pg. xxxiv).

A shortage of nurses in Canada has significant implications for the health care system. We know that the population of elderly is projected to increase from 14.4% of the population in 2011 to 22.8% in 2031 (Statistics Canada, 2011). There will also be a rise in chronic health conditions (Public Health Agency of Canada, 2011), putting pressure on the health care system. Nurses are an important component of Canada's health care system, and a shortage of nurses will have a significant impact on the well-being of Canadians.

The purpose of this study was to generate baseline information on the state of Canadian nurse migration

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