A New Model for Assessing Entry-Level Education of Internationally Educated Nurses: A Retrospective Perspective

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Like other developed countries, Canada relies on foreign-educated nurses, referred to in Canada as internationally educated nurses (IENs), to achieve nurse workforce sufficiency and sustainability. No formal international standard for nursing education exists; therefore, the scope of practice and the role of the nurse may differ from one country to another. Licensing authorities in destination countries should aim to provide a fair, valid, and consistent assessment of IENs who apply to practice in their jurisdictions. Recognizing this assessment need, Canadian nursing regulatory bodies are taking a new approach to meeting the challenge of fairly and consistently assessing IENs' entry-level education. In 2012, they created the National Nursing Assessment Service (NNAS) to provide a single-point-of-entry for evaluating IENs. This article describes the formation of the NNAS.

In many developed countries, an aging workforce and an aging population with an increased life expectancy and health care needs escalate the demand for nurses (Colombo, 2015). Some countries have bolstered their nursing workforce by recruiting internationally educated nurses (IENs).

Today, nurses continue to migrate from lower-income source countries to higher-income destination countries (Shaffer & To Dutka, 2013). Certain push and pull factors affect a nurse's decision to migrate. Push factors include poor wages and working conditions, a lack of opportunity for advancement educationally or professionally, and political unrest or oppression. Pull factors include better wages and conditions, more opportunities for advancement and self-fulfillment, and improved quality of life (Hongyan, Wenbo, & Junxin, 2014).

Nurse migration has fluctuated over the past 2 decades. An influx of nurses peaked in 2008 for Australia, in 2005 for Ireland, and in 2007 for the United States (Health Workforce Australia, 2014; Humphries, Brugha, & McGee, 2012; World Health Organization [WHO], 2014a). The inflow of IENs to the United Kingdom peaked in 2000, gradually declined, and is again increasing due to an influx of nurses from other European Union countries (Buchan, 2015). In Norway and Canada, the proportion of IENs in the nurse workforce has steadily grown (Canadian Institute for Health Information [CIHI], 2014a, 2014b; WHO, 2014b). These varying patterns across countries result from diverse immigration policies and workforce planning strategies (WHO, 2015). (See Figure 1.)

Most destination countries need IENs to achieve nurse workforce sufficiency and sustainability. However, no formal international standard for nursing education exists. The scope of practice and role of the nurse may differ from country to country. The nursing profession is evolving at varying rates and with diverging emphases in different countries to meet local needs. Therefore, licensing authorities in destination countries should seek to provide a fair, valid, and consistent assessment of IENs who apply to practice in their jurisdictions.

In 2012, Canadian regulatory bodies, having laid the groundwork for a unified national service over a number of years, finally created a new legal entity called the National Nursing Assessment Service (NNAS) to provide IENs with (a) a single-point-of-entry regardless of the jurisdictions in Canada from which they seek licensure; and (b) a fair and consistent assessment across provincial authorities. The purpose of this article is to describe how Canadian regulatory bodies approached the challenge of assessing IENs' entry-level education.

IENs in Canada

According to the Canadian Nurses Association (CNA), Canada experienced a shortage of 11,000 nurses in 2007, which was projected to increase to 60,000 nurses by 2022. In 2009, the CNA proposed a plan to mitigate the nursing shortage by (a) increasing registered nurse (RN) productivity and enrollment in RN education; (b) improving the retention of practicing RNs; and (c) reducing RN absenteeism and attrition rates in entry-to-practice programs (Canadian Nurses Association, 2009). The plan also called for a 50% reduction in the number of immigrating IENs in response to the ethical incongruence of furthering health care workforce depletion in source countries. Based on a recent survey of the Canadian nursing workforce, more nurses left the profession

in 2014 than entered it, imposing a decline such as has not been seen in 2 decades (CIHI, 2015).

Unlike other destination countries where nurse immigration has declined, Canada has seen a gradual increase. In 2014, IENs accounted for 8.9% of RNs and 4.3% of licensed practical nurses (LPNs). Between 2005 and 2014, the proportion of internationally educated RNs in Saskatchewan rose from 2.8% to 7.5%, and internationally educated LPNs from 1.5% to 6.1%. In Alberta during the same period, the proportion of internationally educated RNs rose from 4.9% to 10.5%, and internationally educated LPNs from 2% to 5.3% (CIHI, 2014a, 2014b). This upward trend is likely to continue. (See Figure 2.)

Assessment and Recognition of Foreign Qualifications

In 2009, Canada's Forum of Labour Market Ministers, an intergovernmental group of federal, provincial, and territorial ministers and deputy ministers as well as officials with labor market responsibilities, created a Pan-Canadian Framework for the Assessment and Recognition of Foreign Qualifications. The purpose of the framework is "to articulate a new, joint vision for governments to take concerted action to improve the integration of immigrants and other internationally trained workers into the Canadian labour market" (Forum of Labour Market Ministers [FLMM], 2009, p. 4). The framework plan targeted several occupations, including nursing, for collaborative actions among governments, regulatory authorities, and other key stakeholders to develop strategies and implement models of foreign credential assessment based on the principles of fairness, transparency, timeliness, and consistency (FLMM, 2009). The challenge for nursing regulatory bodies was to harmonize assessment practices across participating provinces.

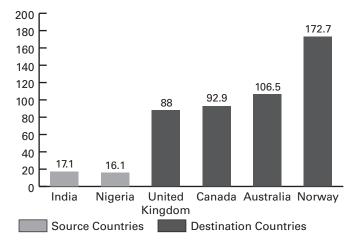
In 2015, the Canadian Federal Skilled Workers Program also supported the push for immigrant integration into the labor market. The three nursing professions in Canada—RNs, LPNs, and registered psychiatric nurses (RPNs)—are included in this program. Eligibility to immigrate centers on six criteria:

- Language skills
- Education
- Experience
- Age
- Arranged employment opportunities
- Adaptability.

Points are granted to candidates in each category, and a candidate must score at least 67 points to qualify (Citizenship and Immigration Canada, 2015). Regulatory bodies must collaborate to ensure that criteria used to determine IEN eligibility to practice reflect the same degree of rigor as the federal level criteria for immigration eligibility.

FIGURE 1

Nurses and Midwives* per 10,000 Population



Source: Data from World Health Organization. (2015). Figure by author.

*Figures include nursing personnel and midwifery personnel whenever available. In many countries, nurses trained with midwifery skills are counted and reported as nurses.

National Approach to Assessing IEN Entry-Level Education

Cognizant of the growing trends in nurse migration to Canada, Canadian nursing regulators recognized the need to take a proactive approach in developing a fair and consistent assessment protocol across the jurisdictions for this population. Twenty-one regulatory bodies across Canada (except Quebec) for the three nursing professions—RNs, LPNs, and RPNs—came together and agreed upon the need to create a unified application portal and assessment system for IENs.

IEN application and assessment were unified during a two-part project, Moving Ahead: Assessment of Internationally Educated Nurses, between May 2009 and December 2011. The first part focused on preliminary research, data collection, and analysis of information from regulatory bodies regarding their practices for assessing IENs. Similarities among these practices pertaining to application processes, required documents, and prescribed requirements contributed to the development of a more efficient, user-friendly process for both IENs and the regulatory bodies.

In the second part of the project, the College of Nurses of Ontario received funding from the Foreign Credential Recognition Program to identify a uniform set of registration requirements for IENs. The Canadian regulatory bodies determined legislative requirements, identified a model for a foreign nursing education program database, and selected a business model for a sustainable national nursing assessment service for IENs (College of Nurses of Ontario, 2011). This business model

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