Where Is Nursing Education Heading?
International and Canadian Tendencies

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Outline of Presentation

• Overview of RNAO
• Brief Historical Review re Nurses’ Entry Level Education
• Changing Health Care Context
• The Changing Role of the Nurse
  – Nurses: Then and Now
• Making Entry to Practice Happen: RNAO and other Stakeholders
• Lessons Learned
• Conclusion
Three Nursing Organizations for RNs in Ontario

- **College of Nurses of Ontario (CNO):** Governing body for 145,000 RNs and RPNs in Ontario

- **Ontario Nurses’ Association (ONA):** Trade union that represents 54,000 RNs and allied health professional working throughout Ontario

- **Registered Nurses’ Association of Ontario (RNAO)**
The Registered Nurses’ Association of Ontario (RNAO):
The professional association representing RNs in the province of Ontario

- Towards 35,000 members and growing
- Influence and action
- Communications and outreach
- Professional development
- Clinical excellence support
- Networking
- Financial assistance for education
- Legal protection for RNs
**MANDATE**: To develop, pilot implement, evaluate, disseminate and support the uptake of clinical and healthy work environment best practice guidelines (BPGs).

- Clinical (38) & Healthy Work Environment (8) Guideline development
- Guideline Implementation
- International partners
Historical Review

• 1932: George Weir Report recommended nursing education be separate from hospitals and that nursing entry level education be degree

• Over higher level nursing education developed at Canadian Universities over the next 60 years

• 1933: University of Toronto School of Nursing established and in 1942 they established first integrated degree program

• 1964: First Canadian diploma nursing program outside of hospital setting at Ryerson
Historical Review (Ontario)

- **1967:** Twenty community colleges of applied arts and technology open
- **1969:** First diploma nursing program in community college at Humber College
- **1973:** All 56 Ontario Hospital schools of nursing move to Community Colleges
- **1991:** University of Alberta opens doctoral program; **1993** University of Toronto opens doctoral program
Historical Review (Ontario)

• 1972: RNAO endorsed Baccalaureate degree as entry to practice...WHY
  – Nurses need broad education base found at university level
  – Full acknowledgement of nurses’ education with a degree credential
  – Level the power differential between professionals especially physicians and nurses
  – Need for advanced knowledge in nursing and health related areas
Historical Review (Ont.)

- 1998: College of Nurses of Ontario recommends BScN as Entry to Practice
- 1999: Ministry of Health Nursing Task Force “Good Nursing Good Health” recommends BScN as minimum requirement for Entry to Practice
- 2000: Government of Ontario announces a Baccalaureate Degree as Entry to Practice as of January 1, 2005
- RNs with Diploma education not affected by the new requirement
Historical Review (Ontario)

- **2000**: Government announces $22.6 million funding for 2000 students to graduate from collaborative college university programs
- **September 2001**: Enrolment of students in new collaborative programs
- **2004**: Last diploma nurses graduate
The Changing Health Care Context

- **PUBLIC**
  - Consumerism
  - Public respect for and expectations of nursing

- **HEALTH CARE SYSTEM**
  - Demands for advanced knowledge in nursing and related sciences and humanities
  - Client centred care
  - Increasing numbers on the health care team
  - Introduction of new health care workers under supervision of nurses
  - Greater needs for coordination of health team members

- **INTERVENTIONS**
  - Increasing complex demands placed on nurses
  - Increases in patient acuity and more complex therapies and treatments
  - Changes in education for other health team members
The Changing Role of the Nurse

– Nurses as knowledge based professionals need for advanced education and a strong practice base
– Public sees nurses as knowledge brokers who understand and can translate advanced technical knowledge to understandable content
– Unprecedented explosion of knowledge, challenges of evidence based practice
– Potential of technology
– Need to understand research and quality of evidence
– Recruitment challenges competing with other careers
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Role of RNAO in Facilitating Changes in Entry to Practice

- Very early made views known, position 1972
- Lobbied for move of nursing education from hospitals to Colleges
- Supported and funded research of first school of nursing outside of hospital program, and disseminated findings
- Lobbied for accessible Post RN Programs
- Lobbied for the position of Provincial Chief Nurse
- Strong relationship with Minister of Health
- Lobbied Minister of Health re need for Entry to Practice
- Strategized with CNO, and with education sector
Role of RNAO in Facilitating Changes in Entry to Practice

– Raised awareness of nurses as knowledge professionals
– Introduced evidence based practice widely through best practice guidelines
– Supported faculty in colleges and universities re working together to develop collaborative nursing programs
– Positioned shortage of nurses as the result of not enough opportunities for nurses to be educated at a university level
– Fostered unity in the profession related to the issue
Making Entry to Practice Happen:
RNAO and Other Stakeholders

• RNAO, CNO and ONA strong working relationships
• Head of CNO experienced in role and highly respected
• Head of RNAO becoming a powerful political force
• Head of ONA politically astute and collaborative
• RNAO and Minister of Health strong relationship
• Minister of Health and Chief Nursing Officer strong relationship
Making Entry to Practice Happen: Some Political Realities

- Minister of Health, female a “Friend of Nursing”
- Colleges and Universities worked together
- RNAO worked with Colleges and Universities
- A positive move for Colleges of Applied Arts and Technology to be working with Universities; paved the way for other partnerships with Universities
- Funding for education included $20 million start up funds for collaborative programs, $12.6 million for graduate programming for faculty upgrading
Summary of Key Factors for Successful Adoption of Entry to Practice

- A unity among nurses and the organized profession
- Strong relationships between chief nursing officer, Minister of Health, RNAO
- Universities and colleges ready to partner
- Nurse educators working together to develop collaborative programs
- Every one was ready!
- Nursing treated poorly in the previous years, political payback
Lessons Learned

What to change:

• Do it sooner, a great need for a long time for nurses to be supported more with a different education base
• Celebrate faculty more ...they were the heroes, in having to all work together to create new education programs for the future in a very short period
• Focus more on research, practice interface through use of best practice guidelines in practice and academia

What to keep the same:

• The focus on the need for advanced education for nurses to deliver quality care in a changing health care context
Conclusion

• In a large province of **over 100,000** nurses,
• with **3 distinct** nursing organizations
• **22 collaborative (university and college)** nursing degree programs were developed
• involving **12 of the 14** university schools
• within **less than a year**
• with programs **of high quality** and
• **Baccalaureate as entry to practice was achieved**
• **without major disruption**

That is an accomplishment for ALL nursing to be proud of!!!
MODEL OF HOW BACCALAUREATE AS ENTRY TO NURSING PRACTICE HAPPENED IN ONTARIO

- College of Nurses
- Chief Nursing Officer
- RNAO
- Consumers
- Environment of Health Care
- Making Entry to Practice Happen
- Nursing Faculty
- Researchers
- Nurses
- Nursing Leadership
- Minister of Health
- ONA
- TIME

CHANGE IN ENTRY LEVEL

Health Care System
Education System
Nursing System
Political System

Speaking out for health. Speaking out for nursing.
Questions & Discussion