

Chapter 2

NURSING EDUCATION IN CANADA

OVERVIEW

This chapter describes the various types of Canadian educational nursing programs and examines the baccalaureate degree as entry to professional nursing practice. The importance of continuing nursing education is explained and the role that national nursing associations play in shaping nursing education is explored. Lastly, this chapter analyzes contemporary issues that influence nursing education in Canada.

LEARNING OBJECTIVE 1

Describe the different types of educational nursing programs (p. 29-32).

CONCEPTS FOR LECTURE

1. Canada recognizes five distinct groups of nurses within the profession of nursing although not every province or territory, however, recognizes all five of the groups. Responsibilities differ for the five groups. These five distinct groups include the **licensed practical nurse** (LPN) that is called a **registered practical nurse** (RPN) in Ontario, **registered nurse** (RN), **nurse practitioner** (NP), and the **registered psychiatric nurse** (RPN) that is only recognized by the four Western provinces. There are two types of entry-level generalist nurses: the registered nurse (RN), and the licensed practical or registered practical nurse (LPN, RPN). Graduates of all programs take a *licensing examination* for their group (e.g., RN, LPN or RPN, RPN) provided by the appropriate regulatory authority and, if successful, are licensed within their group.
2. **Minimum standards** for basic nursing education are established in each province and territory and are monitored by the provincial or territorial nursing regulatory bodies. Schools that meet these minimum standards are granted both provincial or territorial approval as well as being granted **Accreditation** by Canadian Association of Schools of Nursing (CASN) for meeting standards of excellence for nursing education.
3. **Practical nurses** are educated and licensed or registered in all provinces and territories. LPN and RPN programs vary in length but the trend is moving to a two-year program leading to a diploma in practical nursing. Entrance requirements vary but usually include a high-school diploma. Practical nursing educational programs have a tradition of being very innovative in providing education at multiple sites within each jurisdiction. **Bridging programs** for practical nurses who want to obtain a baccalaureate in nursing are becoming more formalized. Educational programs for practical nurses have increased in length, depth, and breadth in response to an expansion of their scope of practice.
4. For the **registered nurse** (RN) licensure, currently the two major educational routes that exist lead to a diploma and baccalaureate. In most Canadian jurisdictions, however, the baccalaureate degree is required for entry-to-practice. University baccalaureate nursing degrees are offered by universities, university colleges, and polytechnic institutes. Today, the majority of nursing programs for registered nurses in community colleges are offered in a collaborative partnership with university schools which provide a common curriculum leading to a baccalaureate degree in nursing. Some colleges have been granted degree-granting privileges by their provincial legislation and offer a baccalaureate education

in nursing independently. In *generic programs*, students are admitted directly into the nursing program and graduate with a degree. New programs also exist now for students with a previous degree (not in nursing), or credits toward a degree (usually about half the requirement for a degree) in which the nursing content has been reconfigured so that students can graduate with a nursing degree in approximately 24 months to build on the courses already completed and may compress the structure of the nursing curriculum typically by including spring and summer sessions. These are variously called *generic master's*, *second entry*, *compressed*, or *accelerated programs*.

5. A **nurse practitioner** (NP) is a registered nurse with additional education and experience in health assessment, diagnosis, and management of illnesses and injuries, including ordering tests and prescribing medications. Nurse-practitioner programs were available in 1967 at Dalhousie University. Currently, all provinces and territories except the Yukon have legislation and regulations in place or in progress regarding nurse practitioner status. Some NP programs are offered at the post-diploma RN level, but there is a growing trend to have NP programs offered at the master's level.
6. Education for the **registered psychiatric nurse** (RPN) although only recognized by the four Western provinces are educated at the diploma or baccalaureate level. A significant number of RPNs go on to complete graduate-level education.
7. **Graduate nursing programs** include master's degree and doctoral programs. **Master's programs** take from 1.5 to 2 years to complete and provide specialized knowledge and skills that enable nurses to assume advanced roles in practice, education, administration, and research. MN), master of science in nursing (MScN), master of science (MS or MSc), and master of psychiatric nursing (MPN). **Doctoral and post-doctoral programs** further prepare nurses for advanced clinical practice, administration, education, and research. A major benefit of doctoral education is that it prepares nurses who are able to develop the nursing knowledge base through research and discover the evidence needed to provide high-quality patient care.
8. There has been a trend to provide nurses who have been educated in other countries, known as **internationally educated nurses**, or IENs, with educational bridging programs. **Bridging programs for IENs** include both classroom and clinical experience and are tailored to assist them to meet the educational gaps they may have so that they can obtain licensure in Canada. IENs first apply to have their credentials assessed and are granted registration after successfully completing the appropriate licensing examinations. Bridging programs are completed before writing the Canadian examination.
9. Graduates of all programs take a **licensing examination** for their group (e.g., RN, LPN or RPN, RPN) provided by the appropriate regulatory authority and, if successful, are licensed within their group. National examinations for all the groups of nurses are administered by the provincial or territorial regulatory authority. The successful candidate becomes licensed in that province or territory, even though the examinations are of national origin. To practise nursing in another province or territory, the nurse must receive reciprocal licensure by applying to that province's or territory's regulatory body. Both licensure and registration must be renewed each year to remain valid.

SUGGESTIONS FOR CLASSROOM ACTIVITIES

- Invite nurses who have obtained master's and doctoral degrees to discuss the programs and why they decided to obtain advanced education, and their current positions.
- Have students review the difference between the functions of the RPN/LPN and the RN and NP.
- Have students discuss the benefits of doing graduate studies in nursing (at master's or doctoral level).

SUGGESTIONS FOR CLINICAL ACTIVITIES

- Assign students to interview nurses who graduated from various types of education programs to determine why these nurses selected the type of nursing program they attended.
- Have the students determine the institution's educational requirements for various nursing positions.
- Have students obtain the job descriptions or job posting for LPNs/RPNs, and RNs, NP. Compare and contrast their roles and responsibilities.

LEARNING OBJECTIVE 2

Identify aspects of the baccalaureate level for entry to professional nursing practice (p. 30-31).

CONCEPTS FOR LECTURE

1. In most Canadian jurisdictions, however, the baccalaureate degree is required for *entry-to-practice*. University baccalaureate nursing degrees are offered by universities or colleges alone or in collaboration with other postsecondary institutions, depending on the province or territory.
2. *Admission requirements* include a Grade 12 or a high-school diploma with specific prerequisites, such as chemistry and biology. Most baccalaureate programs also admit registered nurses who have diplomas. Many accept transfer credits from other accredited colleges and universities and offer students the opportunity for prior learning assessment and recognition (PLAR) when the students believe they have acquired the required competency. These programs are referred to as BScN completion, BN transition, or post-diploma programs.
3. The *curricula* offer courses in the liberal arts, sciences, humanities, and nursing. The majority of nursing programs are 4 academic years long, an academic year being approximately 8 calendar months. Many educational institutions offer students the opportunity for accelerated completion of the program. Some universities offer nursing students the opportunity to pursue a self-paced or independent study program. Many programs offer some distance education and online courses that can be accessed by nursing students.
4. The *degree awarded* is usually a bachelor of science in nursing (BScN, BSN) or a bachelor of nursing (BN).
5. The *newest type of programs* are ones in which the students come with all or part of a university degree in another discipline. These are called *second entry*, *second degree*, *accelerated*, or *compressed programs*. Usually 2 to 3 years long, they build on the courses already completed and may compress the structure of the nursing curriculum.

SUGGESTIONS FOR CLASSROOM ACTIVITIES

- Have the students discuss the benefits of having liberal studies and humanities as part of their nursing program.

SUGGESTIONS FOR CLINICAL ACTIVITIES

- Have the students discuss how the liberal studies and humanities course have helped them in their clinical practice.

LEARNING OBJECTIVE 3

Explain the importance of continuing nursing education (p. 36).

CONCEPTS FOR LECTURE

1. Continuing education (CE) or ***lifelong learning*** is a strategy to achieve to help nurses provide competent nursing care (see Box 2.1). An RN must continually enhance the knowledge, skills, and critical thinking required to meet client needs in a changing health care system. Each jurisdiction and each group of nurses have continuing competency requirements for licence or registration renewal.
2. Continuing education is the ***responsibility*** of each practicing nurse and employer. The Canadian Nurses Association (CNA) interprets continuing nursing education as consisting of planned learning experiences undertaken following a basic nursing education.
3. The ***goal of continuing education programs***: (1) keep nurses abreast of new techniques and competence; (2) help nurses attain expertise in specialized areas of practice; and (3) provide nurses with information essential to nursing practice.
4. ***Mandatory versus voluntary*** continuing education has been a topic of interest to practising nurses, educators, administrators, professional and regulatory associations, unions, and governments. Most registered, psychiatric, and licensed practical nursing jurisdictions in Canada view continuing education itself as voluntary and a strong link in a mandatory continuing competency or professional development program.
5. ***In-service education programs*** are administered by an employer and are designed to upgrade the knowledge or skills of employees. Some in-service programs are mandatory, such as cardiopulmonary resuscitation (CPR) and fire safety programs.

SUGGESTIONS FOR CLASSROOM ACTIVITIES

- Have students identify ways to continue with on-going learning following their nursing graduation.
- Have students write some personal learning goals for this week.
- Have the students identify a speciality area of nursing that would require some kind of continuing education for working in that field of nursing.

SUGGESTIONS FOR CLINICAL ACTIVITIES

- Have the students review the in-service schedule at the clinical agency for the next month.
- Have the students attend one in-service education program at the clinical agency.
- Have students review the mandatory in-service education programs at the clinical agency.
- Have each student locate one article in a nursing journal and identify some key areas of learning.

LEARNING OBJECTIVE 4

Describe the role of national nursing associations in shaping nursing education in Canada (p. 32-33).

CONCEPTS FOR LECTURE

1. ***Canadian Nurses Association (CNA)***: The CNA is a federation of 11 provincial and territorial registered nurses' associations, representing more than 146,788 Canadian RNs. Quebec nurses do not belong to the CNA. The CNA *co-sponsored* the Weir Report in 1932, and in 1948, with financing

from the Red Cross, established the first independent nursing school (Metropolitan School of Nursing in Windsor, Ontario), separated physically and financially from any hospital. Recently, the CNA, in conjunction with the provincial and territorial bodies completed and endorsed *entry-level competencies* for new RN graduates. In 1980, the CNA initiated *certification*, which is a voluntary and periodic process by which an organized specialty group verifies that a registered nurse has demonstrated competence in one of 19 nursing specialties.

2. **The Canadian Association of Schools of Nursing (CASN):** The Provisional Council of University Schools and Departments was formed in 1942. The name of the organization was changed in 1971 to the Canadian Association of University Schools of Nursing, with a mandate in 1973 to provide *accreditation* to university nursing programs in Canada. In 2002 the organization was re-named the Canadian Association of Schools of Nursing (CASN). The *purpose* of the CASN is to lead nursing education and nursing scholarship in the interest of healthier Canadians. To that end, the CASN: (1) speaks for Canadian nursing *education and scholarship*; (2) establishes and *promotes national standards* of excellence for nursing education; (3) promotes the *advancement of nursing* knowledge; (4) facilitates the *integration of theory, research, and practice*; (5) contributes to *public policy*; and (6) provides a *national forum* for issues in nursing education and research.
3. **The Canadian Nursing Students' Association (CNSA):** The CNSA is a national organization that maintains an influence on nursing education through its partnership with other national and international organizations. With more than 20 000 members, the CNSA is an affiliate member of the CNA and Practical Nurses Canada. The CNSA has a close working relationship with the CASN.

SUGGESTIONS FOR CLASSROOM ACTIVITIES

- Have the students explore the Canadian Nurses Association (CAN) on the Internet and report on the mission, goals and objectives of the association.
- Invite a student representative from the Canadian Nursing Students' Association (CNSA) to speak to the class about some recent achievements.
- Have students discuss the meaning of accreditation of a nursing program.
- Have students discuss the benefit for having a national forum on nursing.

SUGGESTIONS FOR CLINICAL ACTIVITIES

- Invite a nurse with a CNA specialization to discuss to his or her reasons for obtaining specialization in their chosen field.
- Have students discuss the Entry to Practice Competencies and how they will affect clinical practice.

LEARNING OBJECTIVE 5

Analyze issues influencing nursing education in Canada (p. 33-36).

CONCEPTS FOR LECTURE

1. Nursing education is facing a number of complex issues, partly because societal changes in Canada have implications for professional nursing practice. Nurses must have an understanding of the changes themselves and the issues facing education. They must be able to use critical thinking skills to talk about these issues so that they can actively engage in addressing them and in shaping the nursing profession.
2. **Changes in Health-Care Needs:** There has been a shift away from acute-care to primary health-care and toward community-based care including community based services for clients. A second shift is that clients are being discharged from hospital with higher acuity levels and more complex care needs. A third shift is the aging of the Canadian population. Nurses need to work collaboratively and inter-professionally and are involved in new roles, such as case managers, program managers or community

developers. Additional administrative roles include participating on boards, chairing committees, and preparing budgets.

3. **Entry to Practice:** In 2004, the CASN and the CNA issued a joint statement supporting the *baccalaureate degree* as the entry-to-practice in Canada for registered nurses. With the move to the baccalaureate degree as the entry-to-practice requirement for registered nurses, *practical nurses* have also adjusted their educational requirements in response to the changing skill mix. In Ontario, for example, a fourth semester was added to the diploma program to better prepare the practical nursing students. In 2008, a National Nursing Competency project involved 26 provincial and territorial bodies that regulate nursing in a collaboration to develop the specific *entry to practice competencies* that registered nurses, practical nurses, and psychiatric nurses require on entering the nursing workforce. These competencies are based on a profile of the practice expectations for new graduates and represent the combined nursing knowledge, skills, behaviours, and clinical judgment that the entry-level nurse requires for safe, competent practice.
4. **Ensuring the Appropriate Number of Regulated Nurse:** It has proved difficult to accurately project how many new nurses will be needed and align admissions into nursing program with future demands because of changes in the scope of practice and delivery of care. As a result, there have been both periods of nursing shortages in Canada when the number of graduates have been insufficient to meet the need for new nurses as well as periods of limited employment opportunities for nurses ready to enter the workforce. After several decades of declining numbers of students enrolled in nursing programs following a peak in the early 1970s, admissions to registered nursing programs began to increase steadily in 2008–2009 in response to a shortage. As a result, the number of new graduates rose. The numbers enrolled in practical nursing programs have also increased in recent years.
5. **Changing Demographics in Nursing Programs:** Aboriginal students, older students, male students, international students and students with disabilities are enrolling in increasing numbers. In addition, more students are working part-time throughout their programs to obtain the funds required for tuition and living expenses. Options such as part-time study and distributed learning are being explored. The average age of nurse educators in Canada is moving toward retirement. Current initiatives include additional PhD programs in nursing.
6. **Technological Advancements:** The growth of technology is influencing nursing education. *Computer-assisted* instruction, web-based learning, and computer-mediated distance education offer the potential for flexible, self-directed, interactive learning activities for students in on-site nursing programs and for those that offer programs over a large geographic area through the use of the computer network, *Internet*, and *video conferencing* for distance learning. Another technological advance that has been important in nursing education is *high-fidelity simulation* as an adjunct learning opportunity using *highly technical manikins* and *virtual reality technology* that allow nursing students and graduates to practice specific skills in a safe environment. The use of additional virtual technology offers further opportunities to engage learners in realistic situations where critical thinking and problem-solving skills can be practised. With the introduction of the *electronic record*, significant changes in the delivery of health care are underway. These changes are having an impact on health care education. Nursing students will need to learn new approaches to information management to provide care in technology-enabled environments.
7. **Interprofessional Education:** Health professionals and other stakeholders such as government, have advanced the notion that if health professionals are educated together, they will have a greater understanding of each other's roles and will be able to work together more effectively. Health Canada has initiated the Interprofessional Education for Collaborative Patient-Centred Practice (IECPCP) program. The IECPCP program funded 20 research programs at various sites in Canada to pilot, implement, and evaluate strategies to increase interprofessional education (IPE). With the increase in the scope of practice of LPNs or RPNs, intraprofessional education is important in nursing as is interprofessional education. It is important for nursing students to collaborate with each other for the changing skill mix in the clinical environment.

SUGGESTIONS FOR CLASSROOM ACTIVITIES

- Invite nurse educators with varied experience to discuss the issues that have affected nursing education throughout their careers.
- Have students discuss the benefits of having male students as well as students from various cultural backgrounds in nursing.

SUGGESTIONS FOR CLINICAL ACTIVITIES

- Have students interview nurses in the clinical area to gain increased insight into the issues that have influenced nursing education over time.
- Have students discuss how use of simulations have helped prepare them for clinical practice.

KEY TERMS

baccalaureate nursing degrees
p. 29

continuing nursing education
p. 36

diploma programs p. 30

entry-to-practice p. 34

in-service education

p. 36

internationally educated nurses

p. 29

interprofessional education
(IPE) p. 36

licensing examination
p. 29

master's programs p. 31

ANSWERS AND EXPLANATIONS FOR ASSESS YOUR LEARNING QUESTIONS

1. **Answer:** a. Provincial or territorial nursing regulatory bodies

Explanation: Minimum standards for basic nursing education are established in each province or territory and are monitored by the corresponding regulatory body. Schools that meet these minimum standards are granted approval. Option (b): Individual schools of nursing are monitored by the provincial or territorial regulatory bodies to ensure that they meet the minimum standards. Option (c): CASN may grant accreditation that is focused on standards of excellence to schools of nursing that have received regulatory approval. Option (d): Nursing is a self-regulated profession, so the monitoring of schools of nursing is through the regulating bodies.

Nursing Competency Category: Professional Practice

Question Type: Knowledge/Comprehension

2. **Answer:** c. The recommendations of the Weir Report

Explanation: In 1932, the Canadian Nurses Association and the Canadian Medical Association commissioned Dr. George Weir to conduct a study of nursing education in Canada. He found that education was secondary to hospital service as a priority in the schools. Weir's recommendations ensured that basic education programs for registered nurses progressed to university programs. Option (a): The regulatory bodies look at nurses' competencies and whether an education program produces graduates who meet those requirements. Option (b): The nursing unions have worked to ensure safe workplaces and working conditions for nurses but have not directly influenced nursing education programs. Option (d): The Mack Training School was important because it was the Canadian first school of nursing patterned after the Nightingale schools, but this influence extended only to other Nightingale schools.

Nursing Competency Category: Professional Practice

Question Type: Knowledge/Comprehension

3. **Answer:** a. A course on leadership offered at a college or university

Explanation: To provide competent nursing care, nurses must continually enhance their knowledge, skills, and critical-thinking abilities to meet client needs as the health care system changes. Option (b): The employer's course would give nurses a needed skill for that employment only; this kind of course is

commonly known as in-service training. Option (c): These courses are frequently a condition of employment or part of agency accreditation. Option (d): A fitness course would enhance the nurses' physical health, but it would not increase their nursing skills or knowledge.

Nursing Competency Category: Professional Practice

Question Type: Application

4. **Answer:** b. An expansion in the scope and practice of practical nurses

Explanation: The recent expansion in the scope of practice of practical nurses has necessitated an increase in the length of educational programs. Option (a): This is not the reason for increased practical nurse education. Option (c): Although the cost of baccalaureate education may be increasing, it is not the reason for expanded practical nurse scope of practice and increased education. Option (d): There has been no decrease in entrance requirements for practical nurse programs.

Nursing Competency Category: Professional Practice

Question Type: Knowledge/Comprehension

5. **Answer:** c. The level of education required to achieve licensure

Explanation: In most provinces and territories, the level of education required to achieve licensure as a registered nurse is the baccalaureate degree. In some provinces, a diploma in nursing is required. Option (a): Programs leading to the same degree or diploma can have different lengths of time spent in classroom and clinical instruction. Option (b): Each educational institution sets its own curriculum, but it must meet the approval of the regulatory body. Option (d): The accreditation process does not set a specific curriculum. The accreditation process is currently available only for baccalaureate nursing programs.

Nursing Competency Category: Professional Practice

Question Type: Knowledge/Comprehension

6. **Answer:** d. To gain competence in a specialized area of nursing

Explanation: Certification means that the nurse is recognized as having met a standard of advanced knowledge in a specific area of nursing. Certification is offered on a national basis, or provincially in Quebec. Option (a): Certification programs are not necessarily at the graduate level, and recognition of them is given more frequently at the baccalaureate level (e.g., for a student applying for a post-Registered Nurse diploma program). Option (b): Certification may be recognized as an asset when applying for a leadership position but is not commonly a requirement. Option (c): The education and clinical experience required for certification is not limited to technical skills.

Nursing Competency Category: Professional Practice

Question Type: Knowledge/Comprehension

7. **Answer:** b. Changing societal health care needs

Explanation: It is clear that shifts occurring in health care in Canada will require that nursing in the future will be different from what it is today. These shifts will influence what is taught in nursing education programs. Graduates will require new skills to meet the challenges of societal health care needs of the future. Option (a): National competencies for nurses have already been established. Option (c): Although nursing education is increasingly expensive, it has not been identified as a major trend affecting nursing education. Option (d): An undersupply of nurse educators, not an oversupply, is predicted for the future.

Nursing Competency Category: Professional Practice

Question Type: Knowledge/Comprehension

8. **Answer:** a. Prescribe common drugs and order common diagnostic tests

Explanation: Nurse practitioners (NPs) have completed specialized education and have successfully passed a national examination specifically for them. Option (b): Although the NP will likely have graduate education in research methods, it usually the doctorally prepared nurse who serves as a principal investigator. Option (c): A doctoral degree is generally required to teach in a graduate program in nursing. Option (d): An advanced practice nurse may be hired in a high-level administrative role, but he or she is generally not required to have an NP designation.

Nursing Competency Category: Professional Practice

Question Type: Knowledge/Comprehension

9. **Answer:** c. The practising nurse

Explanation: As a professional, each regulated nurse is responsible for his or her own continuing education and professional development. The regulatory body in that nurse's jurisdiction is responsible for setting the requirements and monitoring members to ensure compliance. Option (a): Colleges and universities offer continuing education programs, but they are not responsible for having nurses attend. Option (b): Employing agencies typically monitor nurses' professional development activities indirectly by requiring proof of registration in good standing annually. Option (d): The professional association may facilitate continuing education offerings, but it does not accept the responsibility of ensuring individual nurses' attendance. Option (e): Nursing is a self-regulated profession, and the provincial ministry of health does not accept the responsibility for continuing education of nurses.

Nursing Competency Category: Professional Practice

Question Type: Knowledge/Comprehension

10. **Answer:** c. To enable the profession to gain control over the educational process

Explanation: When nursing education took place in hospitals, the hospitals benefited from the free labour pool, but education came a poor second. Moving the programs to universities and community colleges allowed the profession of nursing to make the education of the students the primary goal of the programs. Option (a): Hospital schools of nursing were modelled on the apprenticeship model rather than on the educational model. Option (b): In university programs, and in later years of the hospital diploma programs, teaching was done by nurses, not physicians. Option (d): Recognition of the many contributions of religious groups to nursing education remains strong. Option (e): Moving nursing education away from hospitals does not ensure quality. Ensuring standards for nursing education programs is the responsibility of the provincial and territorial regulatory bodies.

Nursing Competency Category: Professional Practice

Question Type: Knowledge/Comprehension

ANSWERS TO CASE STUDY 2

1. What questions would you ask before responding?

To give your friend the best response, it will be important for you to gather the following information:

- What is your friend's knowledge of nursing? Is it accurate or based on a stereotype or the media's image of nursing? Does your friend know the different categories of nursing and the education required for each?
- Does your friend have any experience with the health care system? If yes, how has that experience influenced your friend?
- Does your friend have prior educational experience or degrees? Would this education give your friend advanced standing in a nursing education program?
- What are your friend's professional goals and in what kind of time frame? For example, some students have a professional goal of becoming a nurse practitioner; however, they want to enter the nursing field as soon as possible. They elect to first complete a practical nursing program to allow them to work in nursing while completing course work for an RN program and finally advancing to a graduate program.
- What is the availability and accessibility to nursing programs? People in rural areas may not have as many choices in close by as individuals who live in urban areas.

Obtaining answers to these questions will give you enough information to let you help your friend.

2. What went into your decision making when choosing your nursing educational program?

Consider the influences on your decision making, such as other nurses you have known and similar role models, experiences with the health care system before you applied to nursing school, feedback you received from teachers and friends regarding your skills, your views of health and illness, and similar inspiring situations.