

CARE for Nurses Program: Helping New Ontarians Access the Profession

A troubling forecast

The health care cost-cutting measures of the late 1990s have focussed public attention on the vital role played by nurses in our hospitals and care facilities. In 1997, the Canadian Nurses Association released a paper which suggests that the country will experience a shortage of roughly 60,000 nurses by the year 2011.¹

Internationally Educated Nurses (IENs) who immigrate to Canada could help remedy the situation, but many find themselves unable to practise their profession once they arrive. In Ontario, nurses are required to have their credentials and professional practice-experience assessed by the College of Nurses of Ontario (CNO), the provincial regulatory body. Based on the results of this assessment, individuals may be required to do upgrading or refresher programs or they may be deemed eligible to write the Canadian Registered Nurse Examination. All nurses must pass this exam in order to get a license to practise. In addition, individuals must meet the CNO's language fluency requirement

and satisfactorily complete a criminal record check. Once these criteria are met, the applicant is issued a license to practise in the province of Ontario.

The licensing exam pass rate among Internationally Educated Nurses stands at about 44 percent, a situation brought into sharper focus by the 107 percent increase in the number of IENs applying for College of Nurses of Ontario certification since 1999. The exam evaluates nursing practice expectations as well as diagnosis and health assessment skills, and it does so within a context which assumes a familiarity with the current holistic approach to patient care. Internationally Educated Nurses who write the exam soon after they arrive are often not familiar with Canadian nursing practices and terminology, and the context of practice can be significantly different from their country of origin. Because the cost of upgrading can be prohibitive for recent immigrants struggling to make ends meet, many are forced to leave their chosen career path and are lost to the profession.

An idea with promise

The goal of the program is to help Internationally Educated Nurses overcome the certification hurdle and work in care facilities. It is funded by the provincial government, and is conceived and directed by a consortium of women with experience in health care, employment and education.

Frances Cairns, Julia Tao and Amy Go worked together at Woodgreen Community Services, a multi-service agency in downtown Toronto. All three had worked with newcomer professionals, including nurses, who had no choice but to take low-paying factory and homemaker jobs. Amy later experienced difficulties with hiring Internationally Educated Nurses when she became an administrator at the Yee Hong Community Care Facility in Scarborough. In the early 1990s, Carmencita Hernandez at the Kababayan Community Centre in Toronto's west end had used federal funds to help IENs get the English training they needed in order to pass their licensing exam. Her experience and ideas were a welcome addition to the group.

Frances, Julia, Amy and Carmencita approached Ratna Omidvar with The Maytree Foundation to discuss ways of assisting foreign trained workers. Ratna was convinced that a program could be designed which would help foreign educated professionals secure licensed employment. The group decided to focus on the nursing profession, and The Maytree Foundation provided seed money to begin the process of researching current practices and programs.

Says Ratna: "We were convinced that what was required was not a short pilot project, but a sustainable and institutionalized mechanism that would be available to internationally trained nurses. To reach this objective, it was

necessary to work at solutions using a multi-stakeholder approach. This was a high bar to set, but we were firmly convinced that all the stars were in the right constellation – it came down to the right idea with the right people at the right time."

Early on, consultants suggested that Gail Yardy join the consortium. Gail is the Coordinator of Community Outreach with St. Michael's Hospital Inner City Health Program. St. Michael's is located near the Eaton Centre in downtown Toronto, and Gail's experiences there and with work done in the densely populated, inner city community surrounding the Regent Park Community Health Centre brought first-hand knowledge of the barriers facing recent immigrants who are trying to develop their skills and secure stable employment. She also has been instrumental in helping St. Michael's administration to direct a portion of its recruitment funds towards mentoring programs which match hospital staff (e.g., lab technicians, engineers and human resources personnel) with new Canadians looking for a break into their professions.

Over a one-year period, the group conducted a needs assessment and literature review, held focus groups and employer interviews, considered model options, defined a program target group and established outcomes. They formulated a proposal for the provincial government with the goal of helping Internationally Educated Nurses pass the certification exam.

Once approval of the concept was given, Amy, Carmencita, Julia, Frances and Gail assumed direct responsibility for the program. They are assisted by an Advisory Committee with membership representatives from The Maytree Foundation, the College of Nurses of Ontario, the Ontario Nurses Association, the

Nursing Secretariat of the Ministry of Health and Long-term Care, the Registered Practical Nurses Association of Ontario and the Registered Nurses Association of Ontario.

Program goals

In January 2001, Creating Access to Regulated Employment (CARE) for Nurses was launched officially with funds from the Ministry of Training, Colleges and Universities' Access to Professions and Trades Unit.

The purpose of this 30-month pilot project is to develop, implement and evaluate a sustainable bridge training program which will increase access to the nursing profession among exam-ready Internationally Educated Nurses living in Ontario.

A second goal of the program is to evaluate and document the program so that it can serve as a model for other groups experiencing similar barriers in accessing their trade or profession.

Beginning in January 2005, there will be a major change in the requirements for entering the nursing profession in Ontario. All nurses will be required to have a baccalaureate degree in order to obtain a license instead of the current college diploma. Currently, 80 percent of practising nurses in Ontario hold college degrees. The impending changes will create new challenges for many Internationally Educated Nurses wishing to practice in Ontario and who immigrate after 2005. It is a further goal of CARE for Nurses to develop a process that will allow the accurate assessment of prior learning in order to grant advanced standing or exemptions to the baccalaureate program.

Because of the number of organizations associated with the project and the attendant logistical problems faced by multiple funders, and because the government recognized the opportunity of testing out a model for other trades groups, the province agreed to provide \$1.5 million in operational funding for CARE. However, course fees and training expenses must be paid by the participants – many require financial assistance to cover these costs.

Dawn Sheppard was hired to manage the program on behalf of the consortium. Dawn has a Masters degree which combines health promotion, community health and women's studies, and nine years of experience working in community health issues. "I hit the ground running," says Dawn. "Within a month of looking over the empty office space in March 2001, we submitted a preliminary report to the Ministry."

Goal 1: gaining access

As of March 2002, more than 200 nurses have applied to the program and more than 100 are active participants. Program information makes it clear that CARE is not a substitute for international recruitment. The program is designed for exam-ready immigrants who have chosen to live in Canada.

Over the first few months of operation, Dawn and her staff of three developed an intake and assessment protocol which includes orientation meetings for prospective clients, a pre-screening interview, client language assessment, in-depth interviews and client registration. Once the intake process is completed, the individuals sign a participant contract agreement. At that point, they become a full-fledged CARE participant.

Once applicants are accepted, various programs are available, as required. These include: course work and nursing-specific English language training; support services from CARE for Nurses employees; and work experiences and professional development at different Toronto-area health care facilities. These programs are designed to help fill training and experience gaps identified during the intake process.

Three postsecondary institutions are also participating as program partners, and over the course of the program's development, each organization has carved out its own area of assistance. George Brown College presents courses entitled: Nursing in Ontario, Competency Skills Assessment, and Exam Preparation and Support. Centennial College offers English Communication for Nurses, and Clinical Theory and Practice. Ryerson University has begun tackling the Prior Learning Assessment and Recognition (PLAR) process in preparation for 2005.

One of the support services offered by CARE is to assist participants in locating appropriate funding sources and completing the applications process. To date, financial support has been awarded to participants by The Maytree Foundation Loan Program, through Human Resources Development Canada and the Ontario Works Program, and through college bursaries.

Employer partnerships were initiated during the early stages of proposal writing when health care agencies in Toronto were contacted as part of the needs assessment. To date, three models of employer support have developed and others currently are being explored. "One of the program learnings to date is that every institution has its own institutional culture and its own way of integrating our program goals into its operations," says Dawn.

St. Michael's Hospital has set up a sponsorship program which gives priority to applicants who are already working in the hospital in a non-nursing capacity, or who live in the surrounding neighbourhood. Elaine Burr is a nursing recruiter at the hospital who has championed the CARE program. Born in England and with work experience in numerous countries, Elaine understands how it feels to be an outsider. She has developed a mentoring and tutoring program at St. Michael's which has received rave reviews from CARE participants. Elaine and a CARE staff member interview prospective nurses and, when a successful match is made, participants receive financial assistance to cover courses costs and the support of Elaine and other hospital staff. There is no obligation for participants to remain with St. Michael's once they receive their license.

Sunnybrook and Women's College Health Sciences Centre offer CARE participants \$500 scholarships, a full-day nursing orientation and the chance to spend time observing hospital practices. Similar contributions have been made by agencies which have donated classroom space to run classes, provided access to resources and hospital library facilities, and afforded opportunities for CARE clients to participate in professional development and in-service events.

Another model of employer participation has been developed by YeeHong Centre for Geriatric Care. Staff interview CARE participants with a view to hiring them once they obtain their licenses. Applicants who accept these conditional offers of employment participate in a job shadowing orientation and are paid \$700 towards course costs.

In addition to securing funding and providing access to professional partners, CARE staff guide participants through the various pro-

gram elements and provide a vital human link between the nurse and her profession. Dawn and her three co-workers tutor and mentor participants, offer test-taking workshops and provide access to human and print resources. “We find opportunities for people to make connections, to network with peers and professionals,” says Dawn.

“You can’t understate the importance of establishing a supportive network for people to build their careers upon,” says Mary Raspor, Chairperson of Health Sciences and Community Services at George Brown College’s Department of Continuing Education. “Negotiating a job search and accessing funds to cover course costs is hard work for any jobseeker. Everyone who has ever looked for a job begins by talking with people they know and trust. CARE for Nurses provides that type of support for people new to the province.”

Benita Lemana was born and educated in the Philippines. She graduated from college in 1980 and developed a specialty in pediatric nursing over the next 11 years, working in both Saudi Arabia and Oman before immigrating to Canada with her family in April 2001. Two months later, she wrote and failed the licensing exam, despite her familiarity with English-speaking working environments and her extensive practical background.

“I knew that I lacked confidence in my skills and that I needed a chance to enrich my training in Ontario,” says Benita. “The exam results letter had information about the CARE program, so I decided to contact the office.”

With CARE’s help, Benita received a sponsorship from George Brown College and took the Orientation and Competency and Skills courses there. She participated in a mentoring

program at Sunnybrook Hospital, and was tutored and mentored by Elaine Burr, a nurse at St. Michael’s Hospital who has taken an active interest in CARE by offering orientation, language training and mentorship to 11 CARE participants. Benita wrote the January 2002 licensing exam, along with eight other International Educated Nurses in the CARE program. Seven women passed – a 78 percent pass rate, compared to the 44 IEN percent pass rate observed by the College of Nurses of Ontario.

“We’re extremely pleased with these results,” reports Dawn Sheppard. “Though the sample is small, it’s clear that the package of supports and services that we’re offering is making a difference.”

Goal 2: developing a model for others

A thorough evaluation of the CARE for Nurses program will be conducted in another year. In the meantime, the consortium can point to a number of ingredients which are vital to the development of professional bridging programs.

CARE for Nurses Manager Dawn Sheppard has been grateful for all of the elements that have made the program a success so far. Says Dawn: “The original committee was a highly functional group of people with shared values and they didn’t get tripped up by power and territorial issues. Before beginning the work, people had already used their networking opportunities to make sure the project goals were clearly understood.”

The initial needs assessment and model development stages were critical in identifying the precise barriers facing Internationally Educated Nurses, and ensured that a focussed and conceptually sound project model could be

developed. Although this was a lengthy process, it has meant that the project model is coherent and logical and will ultimately have greater potential to achieve its targets.

As the regulatory body, the College of Nurses of Ontario has championed the CARE for Nurses program. It has acted as the major source of referral and a conduit for program information. CNO staff have reviewed curriculum, assisted in developing new partnerships, and been involved in the prior learning assessment component now under development at Ryerson University. The involvement of CNO also has meant that certain CARE courses are recognized as meeting the CNO's language fluency requirement.

The involvement of outside experts has been extremely valuable in helping determine appropriate entry-level requirements and in establishing fair and consistent language exemption policies. CARE used the CNO's fluency requirement as a starting point because all nurses will be required to meet this level in order to obtain their license.

Participating organizations have invested their own resources instead of relying only on outside funding. This practice has helped maintain a sense of joint ownership in the process. For example, St. Michael's, a larger partner organization, has been able to take on the critical function of managing the program's finances and employing CARE staff on behalf of the consortium.

Dawn Sheppard and her staff have developed numerous vehicles for promoting the program. Public information sessions to settlement service agencies, community organizations and front-line care facility staff have been effective ways of promoting the program. Communi-

Points to consider when developing professional access programs

- It is critical to understand fully the needs of the particular group under consideration, even if this means a significant initial investment of time and money.
- Be ready for a potential onslaught of interest when the program is first announced. Have a one-page background document ready that provides basic information about the project.
- Remember that the eligibility 'filtering' process can be a lengthy one.
- Assisting participants in addressing their personal barriers is extremely labour intensive, as is helping clients to access sources of financial assistance. It is crucial to consider the support needs of potential clients and to include an appropriate staff complement based on this.
- Take time at the beginning of the project to clarify roles and build relationships. It is better to build a solid partnership with fewer organizations than to have unstable partnerships with many.
- Developing employer partnerships requires the full support of senior level management. However, commitment also must be fostered among the front line staff who are often the ones actually working directly with the trainees.

cations tools include a client brochure, website, information packages, flyers, a one page back-grounder and a Frequently Asked Questions and Answers document.

Goal 3: assessing prior learning

A critical role for Ryerson University emerged from early program discussions. The university will spearhead the development and implementation of a Prior Learning Assessment Recognition Process which will give applicants credit for what they already know. Ryerson will develop and pilot a set of tools to measure effectively baccalaureate level nursing competencies. These tools will be used to assist in determining what additional study is required for an Internationally Educated Nurse to achieve an Ontario baccalaureate nursing degree and enter the profession after January 2005.

CARE for Nurses' future

In the next 18 months, new models for work placement and training partnerships will be piloted. While the CARE for Nurses educational modules are self-financing, the coordination and support functions are not. Another important direction to be pursued in the near future is developing a plan to secure resources for this component of the project after provincial funding ends. The consortium is pursuing additional funding to hire a consultant who will assist in identifying and assessing various options for securing resources for the coordination function of the CARE office.

The program is already a success in the eyes of participants and the members of the consortium. Mary Oghene is looking forward to writing her licensing exam in August 2002.

She arrived in Canada in 2000 from Nigeria with a nursing degree, 21 years of work experience and a specialty in midwifery. She credits the CARE for Nurses program with giving her the mentoring, job application training, financial assistance advice and course access that are helping her prepare to work in Canada. Says Mary: "In Nigeria, we had few resources. Here, technology and modern equipment are part of a nurse's job. The experience I am getting through CARE is teaching me what to expect when I start working. The one-on-one support I have received has been very helpful."

Brenda Lewis from the College of Nurses of Ontario feels that the CARE program ultimately will prove successful because its organizers took the time to carefully gather information from the field. "People who work in health care know what the needs are, and this program has done an excellent job of listening to suggestions and designing a program that incorporates lived experience."

Nurses are only one of the many professional groups that have had difficulty accessing employment opportunities in Canada. Says Ratna Omidvar: "The Maytree Foundation believes that its investment in this project has paid off handsomely. The model developed by CARE is now being used as a template in developing similar interventions in other sectors."

Anne Makhoul

Anne Makhoul works on the 'community stories' series for the Caledon Institute of Social Policy.

1. Ryten, E. (1997). "A Statistical Picture of the Past, Present and Future of Registered Nurses in Canada." Ottawa: Canadian Nurses Association.

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