

FINAL REPORT on the

PAN-CANADIAN FRAMEWORK OF GUIDING PRINCIPLES



ESSENTIAL COMPONENTS FOR IEN BRIDGING PROGRAMS

> CASN ACES

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A NOTE ABOUT TERMINOLOGY

The Canadian Association of Schools of Nursing (CASN) defines a nursing bridging program as any program designed to address gaps and/or differences in education and competencies so that an internationally educated nurse may become registered to practice in Canada and successfully integrate into the Canadian healthcare system.

In this report, IENs include Registered Nurses, Licensed Practical Nurses and Registered Practical Nurses (this title is used in Ontario only). Registered Psychiatric Nurses (RPNs) were not included in this project due to the small number of IEN applicants in Canada. However, they were invited to have a representative on the Steering Committee.

EXECUTIVE SUMMARY

With the global shortage and international competition for nurses, it is recognized that internationally educated nurses (IENs) need to have the opportunity to contribute to the Canadian healthcare system to their fullest by using their knowledge, skills and previous professional experiences. Over the past several years, all levels of government in Canada have put into place policies and programs to facilitate the integration of internationally educated health professionals (IEHPs) into the workforce. The development of bridging programs to assist IENs to achieve the competencies required to meet the Canadian standards of practice has been recognized as one approach to support the integration of IENs into the healthcare system.

In 2010, Health Canada approved funding for the development and implementation of a consensus-based framework of guiding principles and essential components for IEN bridging programs in Canada. The goal of this project, led by the Canadian Association of Schools of Nursing (CASN) in collaboration with relevant stakeholders across the country, is to enhance timely workforce integration of IENs by developing and disseminating this national framework. The project further addresses the recommendations of previous projects regarding IENs in Canada.

A Steering Committee and Task Force were formed to develop the guiding principles and essential components. To do this, the group undertook several research and consultation activities. A literature synthesis and an environmental scan were carried out to determine types and characteristics of existing IEN bridging programs, best practices, evaluation methods and innovations in the area. A national forum of 32 stakeholders was also convened to review these and several other reports on the education and integration of IEHPs, and to brainstorm about the framework.

The Task Force used this information to develop draft guiding principles and essential components for IEN bridging programs, which were then sent to more than 100 stakeholders across Canada to obtain their feedback.

The final Pan-Canadian Framework of Guiding Principles and Essential Components for IEN Bridging Programs can be found in Section 5 of this report.

1. INTRODUCTION

Over the past several years, all levels of government have put into place policies and programs to facilitate the integration of internationally educated healthcare professionals (IEHPs) into Canada's workforce. Given the international shortage and global competition for nurses, it is recognized that internationally educated nurses (IENs) need to have the opportunity to contribute to the Canadian healthcare system by using the competencies acquired through their educational program and work experience to their fullest. The *Pan-Canadian Vision* articulated by the Forum of Labour Market Ministers (2009) is an environment where internationally educated professionals are able to access required supports to assist them to bridge successfully into the Canadian workforce in a timely fashion. At present, IENs experience challenges integrating into the workforce as many need additional education and training to use their skills in the Canadian context (Jeans, et al., 2005).

Finding and accessing bridging programs to develop the competencies IENs will need to integrate successfully into the Canadian nursing workforce is difficult for a number of reasons. Programs are few and tend to be regionally uneven, with smaller provinces and territories having fewer or no bridging programs (CASN, 2011). The cost of tuition and the length of time to complete the programs can also be prohibitive (Baumann et al., 2006; Public Policy Forum, 2008). Although a few innovative bridging programs for IENs have been developed and demonstrate promising results, effective bridging education and integration support for IENs in Canada remains inconsistent.

To this end, the Canadian Association of Schools of Nursing (CASN), with financial support from Health Canada, recruited relevant stakeholders to assist in the development of guiding principles and essential components for IEN bridging programs in Canada. This report describes the activities undertaken by CASN and relevant stakeholders to develop the *Pan-Canadian Framework of Guiding Principles and Essential Components for IEN Bridging Programs*. It outlines the background and history of the project as well as the approach and methods used to collect information. It also presents the *Pan-Canadian Framework of Guiding Principles and Essential Components for IEN Bridging Programs* itself and outlines the next steps for the project.

2. BACKGROUND

The integration of IEHPs into the Canadian workforce will make a significant contribution to national and local economies and will help Canada address important health human resource shortages. In Canada, the health sector is an important employer, and nurses make up the largest group of employees in that sector. Reports published in 1997 (Ryten, 1997), 2002 and 2009 by the Canadian Nurses Association (CNA) point to a significant, looming shortage of Registered Nurses in Canada. While a number of initiatives have aimed to reduce the shortage of nurses, it has been recognized that IENs, including Registered Nurses (RNs), Licensed Practice Nurses (LPNs) and Registered Practical Nurses (RPNs) living in Canada are not being integrated into the workforce to the extent they could be (Jeans et al., 2005).

In 2005, CNA undertook a project to identify provincial and territorial policies, practices and procedures related to IENs. *Navigating to Become a Nurse in Canada* (Jeans et al., 2005) demonstrated that a significant nursing human resource issue exists in Canada as a result of barriers faced by IENs wishing to practice their profession in this country. Despite actual and predicted nursing shortages, two-thirds of IENs fail to become licensed to practice in Canada. Moreover, many of those who do obtain registration and licensure experience integration difficulties in the workplace, which may result from a combination of linguistic and cultural barriers. A major recommendation of the 2005 report was to: "Establish nationally standardized, flexible bridging programs to ensure IENs have the competencies required to meet Canadian nursing standards" (Jeans et al., 2005).

Since 2005, a series of other significant initiatives and reports have focused on the issue of the successful integration of IENs into the Canadian workforce. The *Pan-Canadian Vision* articulated by the Forum of Labour Market Ministers (2009) promotes an environment where internationally educated professionals are able to access required supports to bridge successfully into the workforce in a timely fashion. This vision endorses the development of appropriate bridging programs for internationally educated professionals. The action plan developed to support the *Pan-Canadian Vision* recommended the development of bridging programs to include language upgrading if needed, career advice, mentorship, registration examination preparation, competency development based on credential and competency assessment, and internship.

2. BACKGROUND

In Canada, credential and competency assessment and formal qualification recognition for nurses are the responsibility of regulatory bodies. Nursing bridging programs, however, are usually under the jurisdiction of an educational institution. Most bridging programs are offered in publically funded institutions, while a few are offered in the private sector.

Credential assessment and bridging programs require close collaboration between regulatory bodies and educational institutions (Public Policy Forum, 2008). For example, when provincial regulatory bodies identify a gap in the applicant's competencies, the IEN is required to successfully complete a bridging program at one of the educational institutions.

Recently there has been progress in standardizing the assessment of IENs in Canada. The *Capacity Building Project for Internationally Educated Nurses* (CBIA, 2010), funded by Health Canada, was designed to build the capacity of jurisdictions within the Western and Northern Health Human Resources Planning Forum to conduct standardized assessments. This project was based on principles of Prior Learning Assessment and Recognition (PLAR) and used the model developed by Mount Royal University (Barkman, 2010; CBIA, 2010). An inter-jurisdictional group of Western regulatory bodies was established within this project to create recommendations for a common approach to competency-based assessment services and facilitate the link between assessment services and educational bridging programs.

There have also been recent advances in the preparation of educators who instruct IENs. CASN, in partnership with Kwantlen Polytechnic University, carried out a successful project funded by Health Canada to design a national professional development program for educators working with IENs (Mott, 2009). The objectives of the project were to facilitate teaching and learning in IEN bridging programs, and to ensure educators were sensitive to the particular needs of IENs when providing feedback and selecting appropriate teaching methods. Project deliverables included an instructor orientation program, a professional development toolbox, and guidelines for site-specific professional development training initiatives.

While the above-mentioned initiatives represent improvement for the education and integration of IENs into the Canadian healthcare workforce, there remains a need to adjust bridging programs to meet common standards (Jeans et al., 2005). The goal of the current project is to enhance timely workforce integration of IENs by developing and implementing a Pan-Canadian Framework of Guiding Principles and Essential Components for IEN Bridging Programs.

3. APPROACH AND METHODS

A variety of approaches and methods were used to gather the information needed to develop the Framework.

- 1. Governance: To ensure proper representation and oversight of the project, CASN consulted with national/provincial/territorial nursing professional/educational/ regulatory bodies, employer groups, and settlement agencies to recommend candidates to establish a Steering Committee and a Task Force. The Task Force was responsible for further developing the Guiding Principles originally drafted by CASN, drafting the Essential Components, and providing feedback on other project documents. The Steering Committee gave final approval to the project documents, and provided guidance to ensure all project objectives would be met. Project staff maintained regular communication about the project status with the Steering Committee and the Task Force. The list of members of both groups is provided in Appendix A.
- 2. National forum: In November 2010, a national forum was held to introduce the project and to receive initial input from stakeholders on guiding principles for bridging programs. Thirty-two participants attended, representing major stakeholder groups such as employers, schools of nursing, regulatory bodies, bridging program administrators and educators, IENs, settlement agencies, and government representatives.
- **3. Literature synthesis**: A review of Canadian and international literature about IEN bridging programs was commissioned. The review included published and grey literature, websites, and interviews (where literature was sparse). The purpose of the review was to describe characteristics of bridging programs, promising practices, evaluations, and innovation. Due to a paucity of published literature, grey literature on bridging programs for two other health professions was reviewed as well as a report on Canadian bridging programs in general. In addition, information was reviewed on the topic of bridging programs for two other health professions: midwives (Mount Royal University, 2008) and laboratory technologists (Canadian Society for Medical Laboratory Science, 2009). A Public Policy Forum report (2008) summarizing a survey of Canadian bridging programs for a range of internationally educated professions was also reviewed.
- 4. Environmental scan of bridging programs: A scan of existing bridging programs for IENs in Canada was conducted through Internet research, the review of existing documents, and telephone interviews. An online survey of the identified programs was issued to collect more detailed information about

3. APPROACH AND METHODS

the programs. The survey focused on administrative organization, curriculum, inclusion of language courses, costs, methods of teaching, examples of promising practices, evaluation of programs, etc.

- **5. Report on the Canadian Registered Nurse Examination (CRNE):** A report prepared by the Canadian Nurses Association to compare IENs' performance on the CRNE with that of Canadian educated writers (CNA, 2011) was reviewed. An analysis of the Canadian Registered Nurse Examination (CRNE) results was carried out to compare IEN performance with new graduates from Canadian schools of nursing. The analysis included aggregate national results of exam administrations from 2005/2006 to 2009/2010, and included only first-time writers. The analysis also identified areas for educational focus to assist IENs to prepare for the exam (CNA, 2011).
- 6. Report on the Canadian Practical Nurse Registration Examination (CPNRE): A report prepared by the Assessment Strategies Inc. to compare the performance of internationally educated candidates with Canadian-educated candidates was reviewed. An analysis of the Canadian Practical Nurse Registration Examination (CPNRE) was conducted to compare the performance of internationally educated candidates with Canadian-educated candidates. The candidate response data for the first-time writers was analyzed over a three-year period from 2009 to 2011. The internationally educated candidates were further subdivided into those from predominantly English-speaking countries and those from countries where English is not the major language. The analysis included the average exam scores, pass rates, and performance results within the framework of the competency categories, taxonomy and client age.
- 7. Consultation phase: The draft Pan-Canadian Framework of Guiding Principles and Essential Components for IEN Bridging Programs was sent to a broader group of 100 stakeholders that included educators, regulators, employers, settlement agencies, nurses' unions and representatives from the provincial, territorial and federal governments. A consultation form was sent out to the stakeholders via email in July 2011. Respondents were asked to complete the form and return it to CASN within one month. A second consultation was conducted in August 2011.

The key findings of the activities leading up to the development of the Framework are presented in this section.

4.1 National forum

On November 18, 2010, CASN convened a national forum focused on the issue of IEN bridging programs in Gatineau, Quebec.

Following an introduction to the project and introductions of members attending the forum, two presentations were made. The first presentation was an update of the environmental scan, commissioned by CASN for the project, which initially identified 35 bridging programs in Canada.

A second presentation focused on Mount Royal University's experience with planning, developing, implementing and evaluating an IEN bridging program. The presentation highlighted a number of promising practices, which stimulated general discussion by the participants related to their experiences of promising practices.

Following the presentations, participants worked in small groups to develop guiding principles for bridging programs. During this meeting the stakeholders reached initial consensus on 12 guiding principles, which became a starting point for the Task Force to develop the Framework.

4.2 Literature synthesis and environmental scan

The literature analyzed for the present study and the environmental scan both showed that bridging programs can be offered by both host countries and source countries (Sochan & Singh, 2007; Public Policy Forum, 2008). Included in the offerings of various source countries were courses in English and French language as well as Canadian licensing examination preparation courses. While there was little published data on the evaluation of these programs, there was some consensus that the more preparation achieved prior to immigration the more likely the IEN would be licensed to practice (Singh & Sochan, 2010).

The environmental scan identified 35 bridging programs for IENs in Canada. Nineteen of the 35 were offered for RNs, 10 for LPN/RPNs and 6 for both. Ontario reported the largest number of programs (12) followed by Alberta (5) and British Columbia (5). With the exception of Nova Scotia, the Atlantic provinces and territories offered no bridging programs. Information related to the characteristics of both the program (courses, teaching methods, language, etc.) and the unit offering the program (faculty characteristics, resources, access to supervised clinical practice, etc.) was collected.

The literature review and the environmental scan also revealed wide variation in how bridging programs for IENs in Canada were offered and conducted. Various institutions such as community colleges, schools of nursing, immigrant support organizations, and employers offer programs. Available resources as well as regulatory policies and practices related to credential, language, and competency assessment (the latter differing significantly from province to province), can influence how the programs are structured and delivered. Bridging programs are offered full-time and part-time, vary in curricular content, methods of teaching, clinical experience, language instruction, etc. Some bridging programs are approved or recognized by the respective regulatory body, while others are not.

Despite the variation, a number of common issues emerged from the analysis of the data. One such issue was the importance of partnerships between and among educators, employers, regulators, and immigrant and professional support services (Singh & Sochan, 2010; Public Policy Forum, 2008).

Another topic considered important by many, and viewed as an enabler for success in bridging programs was language proficiency. It was often suggested that participants be required to have a certain level of language skills prior to enrolling in a bridging program (Public Policy Forum, 2008). Where there is professionspecific language required, as is the case in health care, respondents surveyed as part of the environmental scan recommended that language courses be offered as part of the program.

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A number of other characteristics judged to be important to the success of bridging programs were identified in the writings and the environmental scan, including:

- The need for bridging programs to be flexible and be based on the individual's learning needs not all internationally educated professionals are the same and they require different educational approaches to address specific gaps in competencies (Public Policy Forum, 2008; Lum, 2009).
- The importance of accessibility offering full-time and part-time options, online courses, modular approaches and other teaching methods appropriate for internationally educated professionals increases the probability of program enrolment (Lum, 2009; Tilley, 2009).
- The importance of integrating components of assessment, education, work experience, and personal support to facilitate integration into the workforce for IENs, it was considered critical to have supervised clinical practice as part of the bridging experience (Best Practices Report, 2007).

Governance and funding were also common themes. IENs themselves often require financial support to participate in educational programs. The programs also need to be adequately resourced both in terms of financial support and appropriate faculty and learning resources.

Throughout the materials reviewed on bridging programs one common and major theme emerged, that of the absence of evaluation, both of the program and its outcomes. There was general consensus in the materials analyzed that an evaluation of the programs offered was essential in order to produce evidence for best practices (Public Policy Forum, 2008).

4.3 Report on the Canadian Registered Nurse Examination

The results showed that the number of IEN writers increased by a greater margin than Canadian writers over a period of five years. In 2005/2006, 14 percent of exam writers were IENs. In 2009/2010, that number grew to 21 percent. In those five years, the pass rate varied from a high of 70.38 percent to a low of 61.55 percent for IENs compared to a high of 96 percent to a low of 90.22 percent for Canadian graduates. The overall pass rate performance margin (the difference between Canadian-educated writers and IEN writers) was greatest in 2005/2006 (34.54 percent) and smallest in 2009/2010 (20.49 percent).

These numbers suggest an improvement in the pass rates for IENs. Internationally educated nurses from countries with English as the first language consistently outperform others.

The report also carried out an analysis of exam results by categories of competence to identify areas that might help educational programs focus on common areas of weakness. The report provides detailed information on the exam construction and the methods used to perform this analysis.

Several areas for targeted education were identified for IENs. Critical thinking was an area of concern for both Canadian and IEN writers, but more often for IENs. In today's complex healthcare environment, critical thinking is an essential competency. Nurses must be able to identify cause and effect relationships, distinguish between relevant and irrelevant data, formulate valid conclusions, and make judgments concerning the needs of clients – all of which require critical thinking.

Differences between IENs and Canadian graduates were found with regard to the recipients of healthcare. IENs performed better with individual clients than they did with families, groups, or communities. Given the current emphasis on public health and health promotion, this area needs to be strengthened.

Both IENs and Canadian graduates had poorer performance with elderly clients. With an aging population, this finding raises concerns for both mainstream and bridging education. While this finding may reflect a generation gap, emphasis on the needs of the elderly is an important component of all nursing education.

The report was very informative and should be useful to bridging programs for IENs when they are considering appropriate curriculum and courses. There was general agreement by stakeholders that a course on Canadian healthcare was essential, and could include many of the areas mentioned above, as well as profession-specific language and interprofessional practice, which is becoming a prominent feature of healthcare delivery in Canada.

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4.4 Report on the Canadian Practical Nurse Registration Examination

The results showed that approximately 15 percent of candidates were internationally educated. There was an increase in the number of both Canadian-educated and internationally educated candidates over the three-year period. Generally, the Canadian-educated candidates scored higher than the internationally educated candidates (72.8 percent compared with 65.3 percent). Over the three-year period, 88.55 percent of Canadian-educated candidates passed the CPNRE on the first attempt, compared with only 58.2 percent of internationally educated candidates. Internationally educated candidates coming from English-speaking countries passed the CPNRE more frequently than those from other countries.

Canadian-educated candidates performed better than internationally educated candidates in all three competency categories, all taxonomy levels, and for all age groups. Those IENs from predominantly English-speaking countries consistently outperformed the IENs from other countries. The report states that there is insufficient evidence to conclude that this gap in performance is based strictly on language. The English-speaking countries represented in the candidates sample tended to have similar educational and technological characteristics to those in Canada, and this may have also contributed to the differences.

4.5 Results of consultation

The purpose of the consultation was to arrive at a consensus on the content and language of the draft *Pan-Canadian Framework of Guiding Principles and Essential Components for IEN Bridging Programs*. Responses to the consultation questionnaire were received from 35 individuals, representing 29 institutions/ organizations. The responding organizations included 12 universities/colleges, two other educational institutions, two regulatory bodies, one federal government body, and two provincial government bodies. Geographically, all regions of Canada were represented with the exception of the North. The distribution included 12 respondents from Ontario, two from Quebec, three from the Maritimes, two from the Prairie provinces, eight from the Western provinces, and one from a federal agency.

On a survey question assessing the relevance of the Framework content, the 23 organizations who responded ranked the content as follows:

- 15 ranked it as "highly relevant"
- seven ranked it as "quite relevant"
- one found it "somewhat relevant"
- none ranked it as "irrelevant"

In terms of the logical flow of the Framework content, the 23 organizations that responded to the question found that the content flowed logically and that the terminology was understandable. Twenty-Three of the 24 organizations that responded to the question about whether the Framework was written clearly found that it was.

Respondents were given an opportunity to suggest further content for inclusion. Several indicated that they would make no changes and several made suggestions for change. The Task Force reviewed these comments in September 2011.

5. PAN-CANADIAN FRAMEWORK OF GUIDING PRINCIPLES AND ESSENTIAL COMPONENTS FOR IEN BRIDGING PROGRAMS

The Pan-Canadian Framework of Guiding Principles and Essential Components for IEN Bridging Programs outlines best practices to be carried out by the bridging program separated into the educational unit responsible for delivering the program (faculty, administration, etc.) and the educational program (curriculum, course content, etc.).

The Guiding Principles are generalized value statements, while the Essential Components are a detailed roadmap, outlining how the educational unit and program can deliver promising practices.

5.1 Guiding Principles

Effective Bridging programs:

- Assist IENs to meet registration requirements as determined by the Registered Nurse or Licensed Practical Nurse regulatory body and facilitate successful integration into the Canadian healthcare system.
- Recognize the uniqueness of the IEN learner while building on their capacity for learning to prepare them for subsequent employment in the Canadian healthcare system.
- Establish collaborative partnerships with relevant stakeholder groups.
- Provide a safe learning environment, in which culturally competent faculty use teaching approaches that are appropriate for a diverse, multicultural group of learners.
- Are appropriately resourced.
- Have easily accessible and transparent program information.
- Have an evaluation framework, results of which are used to inform program changes.

5. PAN-CANADIAN FRAMEWORK OF GUIDING PRINCIPLES AND ESSENTIAL COMPONENTS FOR IEN BRIDGING PROGRAMS

5.2 Essential Components – Educational Unit

Admission Requirements

- The bridging program provider confirms that the applicant has completed a nursing program.
- The applicant/graduate demonstrates language proficiency (English or French) consistent with regulatory body requirements where they exist.
- The applicant's competencies are assessed prior to, or as part of, admission to the bridging program.

Administration

- Establish advisory groups that include relevant stakeholders.
- Form partnerships with the provincial/territorial regulatory body, employers, and local settlement organizations.
- Provide IENs with a clear roadmap detailing what is expected from them, and what they can expect from the program.
- Be transparent about all costs involved in participating in the bridging program (e.g., tuition, books, equipment, etc.).
- Develop an evaluation framework that reflects the Pan-Canadian Framework of Guiding Principles and Essential Components for IEN Bridging Programs (see below for further details), results of which are used to inform program change.
- Seek program approval/recognition from the provincial/territorial regulatory body where approval/recognition processes exist.
- Establish an effective communication strategy to disseminate information about the program to all stakeholders.
- Share information about best practices and innovations with other institutions.
- Apply the principles of cultural competency.
- Become mentors to other faculty members with less experience educating IENs.
- Act as facilitators instead of gatekeepers, focusing on success and lessening the anxiety of learners.
- Advocate for IENs.
- Encourage learners to use official nursing regulation exam preparation resources.

5. PAN-CANADIAN FRAMEWORK OF GUIDING PRINCIPLES AND ESSENTIAL COMPONENTS FOR IEN BRIDGING PROGRAMS

Resources

- Implement a business model that includes coordination with stakeholders to ensure effective use of resources and sustainable funding.
- Provide proper organizational supports (e.g., labs, faculty, clinical placements, classroom space, equipment, information technology, access to counseling/support services, resources for faculty development, institutional resources, etc.).
- Share information about financial supports (e.g., bursaries, settlement agency funding, etc.) with IENs.
- Provide referrals to local English as a second language (ESL) programs as needed.
- Ensure faculty have Canadian LPN (for LPN bridging program)/RN (for RN bridging program) clinical experience.
- Provide faculty with access to resources that support their professional development (e.g., attending IEN National Educators Conference, CASN faculty development modules).
- Share resources (where possible) between educational units.

Delivery

- Respond and adapt to changes in the IENs, the nursing regulation exam, and nursing practice in Canada.
- Offer the program so that it may be completed in a timely fashion.
- Collaborate with the IEN to develop and implement individualized learning plans based on competency assessment.
- Reduce redundancy as much as possible while still meeting individual and program needs.
- Offer flexible delivery options (e.g., online learning, distance education) where appropriate to promote accessibility.
- Provide face-to-face time and training when offering online courses, so that the technology is well understood by faculty and learners.
- Connect learners with mentors.

5. PAN-CANADIAN FRAMEWORK OF GUIDING PRINCIPLES AND ESSENTIAL COMPONENTS FOR IEN BRIDGING PROGRAMS

5.3 Essential Components – Educational Program

Curriculum and Course Content

- Guide program curricula by national and provincial/territorial entry-level competencies.
- Prepare nurses through curricula to meet:
 - 1. the entry-to-practice competencies; and
 - 2. the standards of nursing practice (including legal and ethical issues).
- Emphasize a culture of professional practice in Canadian nursing throughout bridging programs, or deliver as a separate course.
- Weave professional communication development into all courses (i.e., not basic French/ English language training).
- Provide learners with an understanding of the Canadian healthcare system, current trends and issues, and the nurse's role.
- Emphasize the role of evidence-based research and decision making, and accountability in nursing practice.
- Emphasize the development of critical thinking and clinical judgment skills (i.e., identifying cause and effect relationships, distinguishing between relevant and irrelevant data, etc.).
- Address learning needs identified by the analysis of appropriate trends in nursing practice, information/research (e.g., nursing regulation exam results).
- Use a variety of evaluation methodologies.

Pedagogy

- Establish a philosophy statement that reflects the Pan-Canadian Framework of Guiding Principles and Essential Components for IEN Bridging Programs.
- Use a variety of teaching methodologies to promote the application of nursing theory into clinical practice.
- Incorporate the IEN's previous education and experience into the learning environment.

5. PAN-CANADIAN FRAMEWORK OF GUIDING PRINCIPLES AND ESSENTIAL COMPONENTS FOR IEN BRIDGING PROGRAMS

Clinical

- Make nursing clinical placements available to the IENs.
- Establish small clinical group sizes with a maximum of eight IEN learners to one instructor.
- Ensure that the clinical site is prepared to work with IENs.
- Support preceptors working with IENs.
- Offer clinical experience at placement sites that are supportive of IEN learners.

6. CONCLUSIONS AND NEXT STEPS

The immediate next step in the project is to disseminate and promote the guiding principles and essential components to existing and potential bridging programs in Canada. Bridging programs will be assisted in meeting these principles and components through the use of a self-assessment guide. This guide is designed to help each bridging program in Canada assess its educational program and educational unit against the essential components for IEN Bridging Programs. The bridging programs can use the results of the self-assessment to target areas requiring improvement. The Steering Committee hopes that this process will result in more consistency across Canadian bridging programs.

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APPENDIX A – LIST OF PARTICIPANTS

Development and Implementation of the Essential Components of Bridging Programs for Internationally Educated Nurses Project Steering Committee

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Ann Mann	Executive Director, College of Licensed Practical Nurses of Nova Scotia
Margot McNamee	Senior Nurse Advisor, Professional Practice and Regulation, Canadian Nurses Association
Cathy Rose	MN Policy Consultant, College of Registered Nurse of Nova Scotia
Jenn Scribner	Senior Policy Analyst, Internationally Educated Health Professionals Initiative, Health Canada
Linda Stanger	Executive Director, College of Licensed Practical Nurses of Alberta
Elizabeth Taylor	Practice Consultant/Deputy Registrar, College of Registered Psychiatric Nurses of Alberta
Marlene Tosh	Specialty Nursing Programs and Contract Training, Algonquin College

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APPENDIX A – LIST OF PARTICIPANTS

Development and Implementation of the Essential Components of Bridging Programs for Internationally Educated Nurses Project Task Force

Cathy Rose Task Force Chair	Policy Consultant, College of Registered Nurse of Nova Scotia
Mohja Alia	Manager of Employment Services and Workforce Integration, Immigrant Settlement and Integration Services (ISIS)
Anna Barkman	Coordinator, Bridge to Canadian Nursing, Program School of Nursing, Mount Royal University
Cathy Baxter	Nursing Program, Red River College
Nancy Brown	Program Manager, Part Time and Graduate Studies, Mohawk College
Lawrence Cordero	Professional Practice Leader, CARE Centre for Internationally Educated Nurses
Edward Cruz	School of Community and Health Studies, Centennial College
Kim Dalgleish	Foreign Credential Recognition Program, Human Resources and Skills Development Canada
Karen Hargreaves	Canadian Association for Practical Nurse Educators
Diane Larrivee	Vice President of Specialty Care, Regina Qu'appelle Health Authority
Margot McNamee	Senior Nurse Advisor, Professional Practice and Regulation, Canadian Nurses Association
Kate Mercer	Faculty, IEN Programs, RN-Professional Development Center
Kharrunnissa Rhemtulla	Regional Manager, Learning and Development Supported Transition and Entry to Practice Programs, Vancouver Coastal Health
Lori Shortridge	Faculty of Community and Health Studies, Kwantlen Polytechnic University
Nicole Simpson RN	Faculty of Health and Community Studies, Centre for Professional Nursing Education, MacEwan University

APPENDIX A – LIST OF PARTICIPANTS

Frédéric Thibault-Chabot

Kate Thompson

Jean Wilson

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Senior Nurse Consultant, Office of Nursing Policy, Health Canada

IEN Assessment and PLAR, NorQuest College

APPENDIX B – LIST OF BRIDGING PROGRAMS

Province/Territory	Institution	PN or RN	Regulatory body approval or recognition
British Columbia	Kwantlen University	RN	Yes
	Vancouver Community College	PN	Yes
	Thompson Rivers University	RN	Yes
	Douglas College	RN	Yes
	Omni College	RN	No
Alberta	Mount Royal University	RN	Yes
	Grant MacEwan University	RN	Yes
	NorQuest College	2 PN	Yes
	Bow Valley College	PN	Yes
Saskatchewan	Saskatchewan Institute of Applied Science and Technology	RN	Yes
Manitoba	Red River College	RN	Yes
	Assiniboine Community College	PN	Yes
Ontario	Fanshawe College	RN/PN	N/A
	Centennial College	RN and PN	N/A
	Mohawk College	RN/PN	N/A
	York University	RN	N/A
	CARE Centre for Internationally Educated Nurses	RN/PN	N/A
	George Brown College	RN/PN	N/A
	Algonquin College	2 RN/PN and 2 PN	N/A
	Conestoga College	RN	N/A
Québec	John Abbott College	RN	Yes
	Cégep du Vieux Montreal	RN	Yes
	Sherbrooke Cégep	RN	Yes
	Granby Cégep	RN	Yes
	Édouard-Montpetit Cégep	RN	Yes
	Limoilou Cégep	RN	Yes
Nova Scotia	Registered Nurses Professional Development Centre	RN	Yes
	Nova Scotia Community College	PN	Yes
	ISIS	RN and PN	No

