



Registered Practical Nurses
Association of Ontario

Strengthening Ontario's Frontline Nursing Workforce

—> Business Case for Improved Nursing Career Laddering and
Professional Development Programs

December 2020

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1 Executive Summary

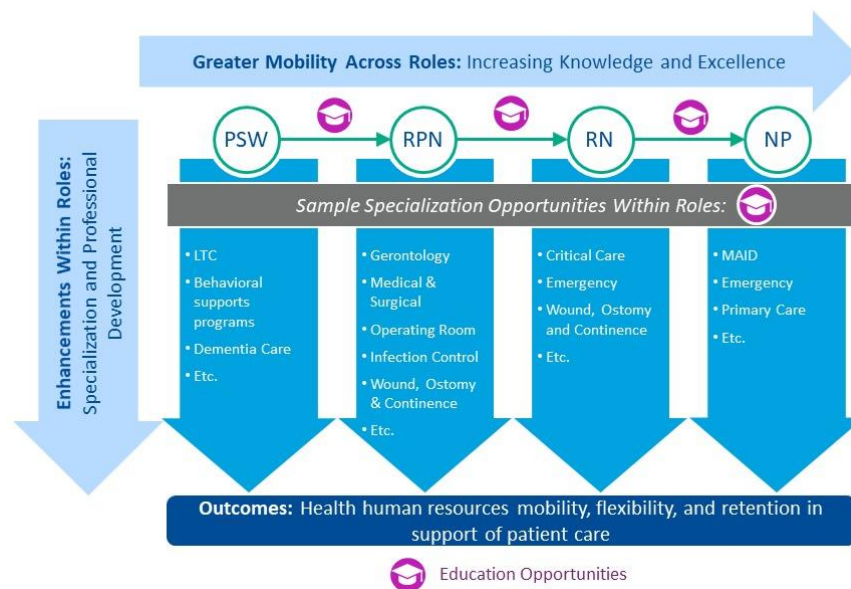
1.1 Ontario's Health Human Resources Under Stress

Nurses play an essential role in our health care system and are often the first and last health professionals a patient sees when entering and exiting the system. Yet, Ontario is experiencing a shortage of Registered Nurses (RNs) and high turnover of Personal Support Workers (PSWs) that is only expected to get worse over time. This lack of adequate numbers of health care professionals puts Ontarians at risk of not receiving the care they need at the right time and place. COVID-19 is highlighting the negative impacts of not having the right supply of health care providers and the urgent need to address the shortage with quick and ready-made solutions.

A well-functioning healthcare system requires the right mix and numbers of healthcare professionals to care for patients. In turn, strategies are needed to recruit, retain, and advance the knowledge and excellence of health professionals based on patient and system needs. A critical part of these strategies includes improving mobility across existing health professional roles so that shortages are filled quickly rather than waiting up to four years before a new Bachelor of Science in Nursing (BScN) program graduate can attempt the RN exam. This was acknowledged in the most recent 2020 Ontario Budget, which committed to “new, accelerated and expanded qualification pathways to increase the supply of qualified health professionals,” including the creation of “career advancement opportunities.”

Equally important is enhancing flexibility within roles through increasing knowledge and skills in the areas of greatest patient need, thereby creating deeper expertise and specialization. These strategies advance patient care and retention of health professionals, who indicate that without these opportunities they anticipate leaving their roles. The need for training supports to increase expertise and specialization, as well as the value of improved career mobility, was highlighted by the Ministry of Long-Term Care's recent Staffing Study, which recommended micro-credentialing and job laddering for staff in the sector. A framework for creating greater mobility and specialization is illustrated in Figure 1.

Figure 1 – Increasing Nursing Human Resource Supply and Specialization in Ontario



Based on data and anecdotal evidence¹, we know there is a demand for education that allows nurses to move across and specialize in roles. However, multiple barriers exist to ensuring our system has the right number and mix of health professionals including:

- **Limited Supply:** While Ontario currently has steady supply of Registered Practical Nurses (RPNs), there is a limited supply of RNs and PSWs to meet patient demand.
- **Challenges with Retention:** Difficulty in retaining health professionals with limited professional development opportunities and burnout playing a large role. With more mobility and opportunities for professional development, these professionals would stay.
- **Limited Professional Development Access:** Many PSWs and RPNs want to advance their skills or career ladder to the RPN or RN roles yet face barriers to do so. Approximately 35% of RPNs face financial barriers to pursuing the education they want to enhance their knowledge and skills.

Proven and promising solutions to address these barriers are available to meet the needs of today and can be further enhanced in the medium-term. These solutions provide a way forward to addressing the health professional shortages that can be acted on today.

1.2 A New Path for Made in Ontario Solutions: Career Laddering, Professional Development, and Micro-Credentialing

A single approach will not be sufficient to increase the supply and specialization of Ontario's health human resources in a timely manner. The need for additional supply and specialization is immediate and persistent. An opportunity exists to look at shorter alternatives to traditional BScN programs to address the nursing skill shortage. Ontario is fortunate to have access to a community of RPNs, who are well-educated clinical professionals with a passion for providing high-quality care. There is also a strong network of skilled PSWs who are essential contributors to care and an important part of the health care team. These professionals are well-positioned to transition across and specialize in roles to address the nursing care shortage.

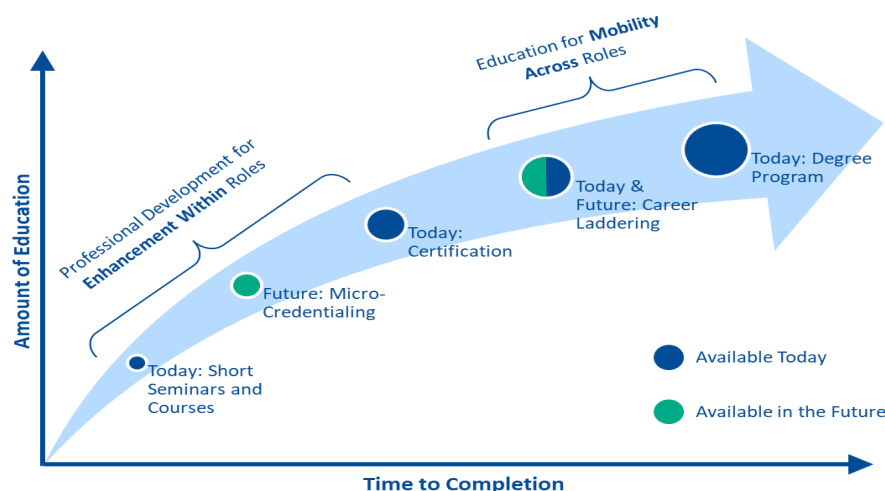
Today, there are well-regarded alternatives to traditional nursing education streams, which better recognize the prior experience and education of RPNs and PSWs who are looking to transition roles or build expertise and specialization within their roles. These alternatives include career laddering and building knowledge and skills within roles through professional development and micro-credentialing. RPNs or PSWs could leverage both alternatives to advance their skills and knowledge more expeditiously, however, barriers exist across current offerings.

Enhancing supports for career laddering programs will enable RPNs and PSWs to be able to transition respectively to RN and RPN roles quickly. In other jurisdictions with similar challenges, these programs have proven an effective solution to addressing nursing shortages. There is also an opportunity to advance professional development within roles through micro-credentialing, certification, and other short seminars and courses.

We envision a made in Ontario solution that is efficient and accessible, builds on existing resources, and supports nursing professionals financially, professionally, and personally, as they care for their communities. Figure 2 identifies various approaches to education, which together, can advance supply of and flexibility for health professionals in a timely manner.

¹ Registered Practical Nurses Association of Ontario. Ontario RPN Survey: 2020 Findings. 2020.

Figure 2 – Options for Nursing Professional Development and Education in Ontario



1.3 Building a Better Future

The Registered Practical Nurses Association of Ontario (WeRPN) sees the opportunity to increase both the supply and specialized capabilities of nurses in a timely and financially responsible manner, by utilizing existing human resources (i.e., PSWs, RPNs) and improving access to career laddering across roles and professional development within roles. To realize this opportunity, we require the support of government and, working together, we can take deliberate steps to enhance the supply, knowledge, and excellence of our health professional workforce. This approach will require a proven funding mechanism with the ability to enable the full range of education approaches outlined above. Fortunately, that mechanism is already in place. WeRPN's Nursing Education Initiative (NEI). Not only is WeRPN a trusted organization with a proven track record of partnership with government, but the NEI grant program is currently operational and immediately scalable. No other mechanism offers better speed of implementation in ways that align with current government needs and can be flexible as those needs evolve. With increased government support, we can deliver on Ontario's Budget commitments and respond to the recommendations of the *Long-Term Care Staffing Study* and *First Interim Report of the Long-Term Care COVID-19 Commission*.

WeRPN is the government's ideal partner for providing grants that will reduce barriers to education within and across roles, thereby increasing retention and supply of nurses and PSW and focusing resources where they are most needed. WeRPN's NEI provides many advantages:

WeRPN Advantages

- Proven Accountability
- Unapparelled Understanding of the Profession and Health system
- Vision and Demonstrated Thought Leadership
- Credible Brand and RPN Awareness

NEI Advantages

- Active Operations
- Recognized and Trusted Program
- Focused and Smart Allocation
- Adaptive to System Priorities
- Flexibility for Health Professionals

The first key step we can take today is to *enhance existing funding for WeRPN's Nursing Education Initiative (NEI) grant program*. This will provide RPNs access to the professional development desperately needed to respond to challenges such as COVID-19 and career laddering programs that allow RPNs to transition to RN roles. Additional opportunities exist to expand and extend NEI funding to PSWs looking to enhance their professional development and career ladder into an RPN role, beginning with a limited pilot. The investment required for these opportunities is outlined in Table 1.

Table 1 – Current vs. Requested Funding for the NEI

Funding Category	Currently Funded	Eligible but Unfunded	Total Funding Requested to Close the Gap	Purpose and Outcomes
RPN Professional Development	\$ 0.70 MM	\$ 0.50 MM	\$ 1.00 MM	Supporting specialization within the RPN role, in the most needed areas. Additional funding will allow over 200 RPNs/year to gain new knowledge & expertise to provide even better and specialized patient care ²
RPN to RN Laddering	\$ 0.60 MM	\$ 1.60 MM	\$ 1.50 MM	Career laddering to help address the RN shortage. Additional funding will support over 600 nurses to ladder to RN roles ³
PSW to RPN Laddering Pilot	N/A	N/A	\$ 0.25 MM	Supporting PSW to RPN career laddering and increase retention of PSWs in the system
TOTAL	\$ 1.30 MM	\$ 2.10 MM	\$ 2.75 MM	Better patient care; more flexibility and effective use of health human resources

*Amounts are approximate averages per year

The time for change is now. The province is already making transformative moves to strengthen our health care system and to provide better, more patient-centred care. We need to build on this momentum and invest in innovative solutions to address health human resources shortages and provide better care for all Ontarians. This is a cost-effective, turnkey solution for the government that builds on our existing resources and infrastructure. WeRPN is ready to continue working with government and sector stakeholders to drive this change and to create tangible benefits for people of Ontario, our health care system, and our economy.

² Calculation based on current NEI funding maximum of \$1,500 per nurse.

³ Estimate based on current \$1,500 maximum funding per nurse.

2 Introduction

2.1 Context

Nurses play an essential role in Ontario's provincial health care system. While Ontario currently has a steady supply of RPNs, the province is facing an impending shortage of RNs – as well as, equally critically, PSWs – that will undeniably impact the quality of patient care. Nurses are often the first health professionals' patients see and play a key role as part of the interdisciplinary teams that contribute to the needs of patients, including physicians, allied health professionals, and PSWs. In many settings, nurses provide the majority of patient care, alongside their PSW colleagues.

Data suggests that Ontario needs more RNs now and in the future. The Canadian Institute for Health Information (CIHI) reports that in 2018 Ontario had the lowest RN-to-population ratio in Canada, with 631 RNs (including Nurse Practitioners) per 100,000 people while the other Canadian provinces had an average of 845 RNs per 100,000 people.⁴ CIHI data between 2009 and 2018 also shows an increasing number of RNs and percentage of total RNs in the cohort aged 60-64 and 65-69 and approaching retirement.⁵ From a nurse vacancy perspective, Ontario Nurses Association data suggests that Ontario has over 10,000 nursing vacancies across the province.⁶

Anecdotally, Ontario is already feeling the effects of the nursing shortage in rural and northern communities, as well as in specific areas of care, such as long-term care (LTC), where the need for nurses will continue to grow as Ontarians age and require additional supports.⁷ These shortages are being felt to an even larger degree today, as the healthcare system struggles to meet the extraordinary demands presented by the global COVID-19 pandemic. Even before the pandemic, health care organizations were struggling to fill nursing shifts and working diligently to recruit and retain an adequate number of nursing staff, sometimes unsuccessfully, as overtime expenditures increase. These existing challenges, in combination with new system pressures from COVID-19, further contribute to the provinces hallway health care challenges today.

Recruiting and retaining PSWs, who provide the most hours for activities of daily living in long-term and community care settings, is also a challenge. Approximately 25% of PSWs with two or more years of experience leave the LTC sector annually.⁸

While there is a greater supply of RPNs in Ontario, retention remains a concern as nearly 29% of Ontario's RPNs intend to practice for less than five years.⁹ Some of these RPNs have an interest in remaining in the profession if there are further opportunities for professional development, which may include career laddering to an RN role.

As such, increasing the recruitment and retention of RNs and PSWs, as well as RPNs, is an urgent priority. Having these knowledgeable and skilled front-line resources leave the profession is a major concern and an opportunity lost. These individuals start in the profession with a desire to help others, but many choose not to continue practising, often because of insufficient opportunities to grow their experience in other nursing roles or participate in professional development to further enhance their skills.

⁴ Canadian Institute for Health Information (CIHI). Health Workforce, 2018: Indicators. 2018 [URL: <https://www.cihi.ca/sites/default/files/document/hwdb-2018-indicators-en-web.xlsx>]

⁵ Canadian Institute for Health Information (CIHI). Nursing in Canada, 2018 – Data Tables. 2018 [URL: <https://www.cihi.ca/sites/default/files/document/nursing-in-canada-2018-data-tables-en-web.xlsx>]

⁶ Ontario Nurses Association. Ontario Patients Need More Registered Nurses, Hospitals Must Fill 10,000 RN Vacancies. 2018 [URL: <https://www.ona.org/news-posts/ontario-patients-need-more-rns/>]

⁷ Ontario's Long-Term Care COVID-19 Commission. Interim Recommendations. 2020. [URL: <http://www.ltccommission-commissionsld.ca/>]

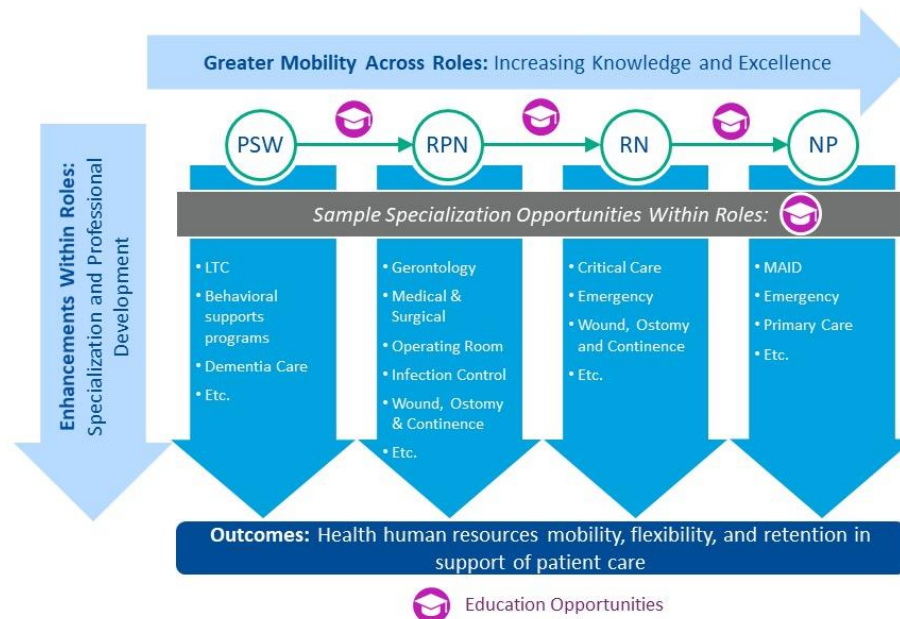
⁸ Government of Ontario. Long-Term Care Staffing Study. 2020. [URL: <https://files.ontario.ca/mltc-long-term-care-staffing-study-en-2020-07-31.pdf>]

⁹ Registered Practical Nurses Association of Ontario. Ontario RPN Survey: 2020 Findings. 2020.

Quality of care must also be considered. While more nurses are needed, how nurses practice and provide care impacts patient outcomes. Like other regulated professionals, nurses meet their profession's educational and minimum competency requirements. Professional development is a requirement, but the degree to which nurses go beyond the minimum requirements and pursue excellence can be impacted by access to education. The more that our nurses know and keep current on leading practices in care, the more that patients will receive the highest quality care, improving patient outcomes and preventing further morbidity and mortality.

These challenges are top of mind for the government, patients, and the public, all of whom expect excellent care from Ontario's health care system. To address these challenges, it is critical to improve mobility across roles to retain health professionals and increase the supply where needed. Additionally, it is necessary to enhance flexibility within roles, through increasing knowledge and skills in specific areas such as gerontology, infection control, and wound care, all of which are needed to respond to COVID-19 and other patient needs. A framework for this vision is illustrated in Figure 3.

Figure 3 – Increasing Nursing Human Resource Flexibility in Ontario



Today in Ontario, there are immediate and medium-term solutions to expand education and increase the supply of, and flexibility across, health human resources.

For health professionals who wish to enhance their skills and knowledge within their current roles, professional development provides an opportunity to specialize and ultimately enhance patient care, as depicted in the framework above (from high to low on the vertical axis).

Health professionals can also pursue additional education to increase mobility across roles (from left to right on the horizontal axis) through career laddering programs. While an individual could take a full education program which assumes no prior knowledge, for example, an individual starting a BScN program after high school, career laddering is an alternative approach that recognizes prior experience to shorten program duration, while achieving the same educational standard. In this way, Ontario's supply of RPNs can help fill the shortage of RN roles quickly.

Both professional development and career laddering programs already exist in Ontario and have proven demand. A recent WeRPN survey identified that 29% of respondents were planning to complete a career laddering program, and 9% were currently enrolled. However, barriers exist that prevent many from pursuing these opportunities, including geographical, duration and most notably, financial. WeRPN's Nursing Education Initiative (NEI) grant program is reducing these barriers, enabling RPNs to participate in existing professional development or pursue career

laddering programs. The current demand for WeRPN's NEI grants is high, and a majority of applicants are declined due to limited available funding. By enhancing immediate access to career laddering and professional development programs, we can retain and further build on the existing skills and knowledge of health professionals. In addition, medium-term opportunities exist to enhance these existing programs.

Addressing this most critical problem will take timely action and multiple approaches. Enhanced access to career laddering and professional development programs promise to be two such approaches that can have significant benefits and help ensure patients are receiving the care they need, when and where they need it. Indeed, this approach has been called for in other reports, such as the recent *Long-Term Care Staffing Study*.^{10*}

2.2 Purpose of the Business Case

This business case outlines a compelling rationale for investing in education to rapidly address Ontario's nursing shortage through multiple channels, including career laddering and professional development. The additional system and human resource challenges presented by COVID-19 have revealed an even more pressing need to provide the healthcare system with both flexibility and sustainability of nursing resources and to implement change quickly by building on existing success. This can be accomplished first by leveraging WeRPN's successful NEI program to increase access immediately. Then, over time, removing other barriers to access as described later in this business case. Learnings from research conducted on programs in other domestic jurisdictions and internationally can inform a made in Ontario solution that is efficient, cost-effective, and drives real improvements in the number and expertise of health professionals.

Specific areas this business case will outline include:

- How career laddering and professional development programs are effective in increasing the recruitment and retention of nurses and PSWs;
- How Ontario can leverage its existing programs, along with other promising approaches such as micro-credentialing, to increase the supply and professional development of nurses and PSWs;
- Why career laddering and professional development programs are increasingly becoming an important part of health human resourcing strategies in other jurisdictions; and,
- How WeRPN's NEI is the ideal mechanism to rapidly implement these promising approaches.

¹⁰ Government of Ontario. Long-Term Care Staffing Study. 2020.

* Report indicated that continuing education, micro-credentialing, and job laddering are key tools to attract and prepare the right people for employment in LTC, supporting staff to stay current, gain new skills and develop specialized expertise.

Strengthening Ontario's Frontline Nursing Workforce:

Addressing Immediate Needs

Section 1 – Addressing Immediate Needs

3 Ontario Health Human Resources Under Stress

The impact of Ontario's nursing staffing shortage is being felt across the province. Despite best efforts, there remain specific sectors and geographic regions that continue to face challenges attracting talented individuals, which impacts the quality of patient care, especially in rural and remote communities. These regions struggle to fill nursing shifts, yet some people who want to be in the nursing profession face unnecessary barriers to the education programs that would allow them to build their depth of knowledge and provide the nursing services that are desperately needed in these communities. The healthcare system's ability to address the demands of COVID-19 have only been further impaired by the current nursing shortage.¹¹ Even before the pandemic, health care organizations were struggling to fill nursing and PSW shifts and working diligently to recruit and retain an adequate number of nursing and support worker staff. Looking beyond the pandemic, nursing shortages are only expected to grow as the needs of Ontario's aging population increase.

The Ontario government is implementing positive changes that will support the health of all Ontarians. Through expert advice such as the Premier's Council on Improving Healthcare and Ending Hallway Medicine, broader health care transformation activities such as the creation of Ontario Health Teams, and the continued advancement of telemedicine, the government is working to create a more patient-centred care system.

However, health system transformation in Ontario will only be effective if there are nurses and other health care professionals available to support the needs of patients. Yet health human resources challenges remain, as illustrated in Figure 4:

Figure 4 – Health Human Resources Challenges in Ontario



Limited Supply

At present, pressures on the province's health human resources due to COVID-19 have only further highlighted Ontario's shortage of nurses and other health care providers, such as PSWs. These pressures are substantial and are being felt across key sectors such as acute care and long-term care, so much so that a \$52.5 million incremental investment by the government was recently

¹¹ Canadian Armed Forces. JTFC Observations in Long-Term Care Facilities in Ontario. 2020. [URL: <http://s3.documentcloud.org/documents/6928480/OP-LASER-JTFC-Observations-in-LTCF-in-On.pdf>]

announced to recruit, retain and support frontline health care workers and caregivers.¹² This investment, as part of the province's COVID-19 fall preparedness plan, *Keeping Ontarians Safe: Preparing for Future Waves of COVID-19*, looks to ensure the health care system can meet surges in demand while continuing to provide safe and high-quality care to patients and long-term care residents.

Even before the pandemic, our province had a limited number of nurses and PSWs to meet the demand of the health care system. In 2018, it was estimated that nearly 10% of nursing jobs in Ontario were vacant, with approximately 10,000 of those unfilled vacancies being in Ontario hospitals alone.¹³ The Canadian Nurses Association predicted a shortage of around 60,000 RNs across Canada by 2022 despite an estimated 10-year high in the number of students entering nursing programs across the country.¹⁴ Further, while Ontario has upwards of 100,000 PSWs, some sources estimate the need for 20-25% more PSWs, indicating a 20,000-25,000 person shortage.^{15,16}

We are, however, fortunate to have a steady supply of RPNs whose breadth of knowledge and skills could be expanded to fill existing and future vacancies and continue to support excellence patient care. The number of employed RPNs in Ontario grew by nearly 15% between 2008 and 2017.¹⁷ With the right supports, this large pool of skilled professionals could access educational and professional development programs that:

- A. Grow their existing skills and capabilities, through continuing education and specialization to meet current system needs; and,
- B. Enhance their knowledge and enable them to become RNs more quickly.



Challenges with Retention

Ontario's difficulties in recruiting and retaining health professionals have been well documented and are a pressing concern. One challenge, in particular, that is felt across health care providers and caregivers alike is general strain and burnout, which the Premier's Council report outlines:

"There are clear indications throughout the system of provider burnout, including staffing shortages in certain positions and parts of the province, and high levels of stress."¹⁸

A recent study of four Ontario hospitals found that health care providers often experience "role overload" (i.e., where they take on too many responsibilities and feel as though they have too little time) and that 59% of providers reported high levels of stress and burnout as a result. Higher nursing caseloads and greater patient complexity also contribute to nurses feeling stress and role overload in their demanding work environments. High levels of stress in the workplace is strongly correlated with job dissatisfaction. Ontario's PSWs have consistently reported high levels of stress, and a 2018 survey indicated that 79% of PSWs were unhappy with their jobs, and one third of the 13,400 respondents reported that they had already left the healthcare system altogether. Health

¹² Office of the Premier. Ontario Investing \$52.5 Million to Recruit, Retain and Support More Health Care Workers. 2020. [URL: <https://news.ontario.ca/en/release/58580/ontario-investing-525-million-to-recruit-retain-and-support-more-health-care-workers>]

¹³ Registered Nurses Association of Ontario and Ontario's Nurses Association. Joint Statement. 2018. [URL: https://nao.ca/sites/nao-ca/files/RNAO_ONA_Joint_Statement_May_7_2018.pdf]

¹⁴ Canadian Nurses Association. Tested Solutions for Eliminating Canada's Registered Nurse Shortage. 2009. [URL: <https://www.cna-aic.ca/en/news-room/news-releases/2009/eliminating-canadas-rn-shortage#sthash.PxBj2ol.dpuf>]

¹⁵ Government of Ontario. Long Term Care Staffing Study. 2020

¹⁶ Ontario Health Coalition. According to Caring in Crisis: Ontario's Long-Term Care PSW Shortage. 2020. [URL: <https://www.ontariohealthcoalition.ca/index.php/report-shines-light-on-personal-support-worker-shortage/>]

¹⁷ College of Nurses of Ontario. Membership Statistics. 2017 [URL: http://www.cno.org/globalassets/docs/general/43069_stats/2017-membership-statistics-report.pdf]

¹⁸ Devlin, Rueben (2019). Hallway Health Care: A System Under Strain. 1st Interim Report from the Premier's Council on Improving Health care and Ending Hallway Medicine. January 2019. [online: web URL: http://www.health.gov.on.ca/en/public/publications/premiers_council/docs/premiers_council_report.pdf].

Force Ontario reported that 43% of PSWs left the sector due to burnout.¹⁹ Similarly, a recent survey completed by WeRPN in 2020 indicated that 45% of RPN respondents were unsatisfied with their current employment status for a variety of reasons, including unrealistic job demands, a lack of matching compensation and workplace policies and processes that contributed to their stress levels.²⁰

Stress in the workplace and feeling burnout also has tangible financial impacts on our health care system. In addition to the costs related to position vacancies and absenteeism, nurses are often required to work overtime to take on additional responsibilities to fill those gaps, further contributing to their own stress and feelings of burnout. It is estimated that Ontario nurses worked more than 19 million hours of overtime in 2014 at a total cost of almost \$872 million.²¹

Professional development and career laddering provide one mechanism of support to improve job satisfaction and/or allow those that want to move to a new role in the health profession to do so.



Limited Professional Development Access

Today, several barriers exist to completing education programs that build health professional supply and capability in Ontario, most notable, access for mature students and financial access.

Mature Student Access

Generally, there are two age cohorts of students pursuing nursing educational programs – younger students, who are typically recent graduates from secondary education, and mature students, who would have had some prior health care education and/or experience working in the sector. Generally, younger students have more flexibility to access educational programs in comparison to mature students, who have already started their careers. PSWs and RPNs participating in career laddering are typically mature students and accessing and completing the required educational programs to move between roles is challenging in Ontario.

Younger students will typically find it worthwhile to invest in a four-year Bachelor of Science Nursing (BScN) degree programs, despite the expense. However, the journey for a mature student includes many more barriers that impede program participation and uptake. These potential students usually have prior health care education and experience and are looking to transition to another health care role rather than leaving the sector. Unfortunately, structural designs of current nursing education programs offer limited flexibility for mature individuals wishing to pursue higher-level education. Mature students typically have greater levels of responsibility in helping to raise their families and contributing to household finances, and the current system can be a heavy financial burden. For those trying to work and still make rent and/or mortgage payments, the tuition costs coupled with the time away from work can make these programs even more unrealistic. Very few programs are offered on a part-time basis, and those that are, are viewed as unfeasibly long in duration.

Today, nursing career laddering programs are offered in a limited number of geographic locations and outside of the current pandemic, required students to attend mostly in-person lectures and courses for an extended period, with very few online learning modules available. This design creates logistical challenges for mature nursing students who are balancing full-time work responsibilities and personal/family commitments while still trying to meet the time and rigour of current career laddering programs. This is especially challenging for professionals living and working in rural and remote areas where local in-person course offerings are limited or non-existent. Equivalent barriers are also present for PSWs looking to ladder into RPN roles.

¹⁹ Government of Ontario. Long Term Care Staffing Study. 2020

²⁰ Registered Practical Nurses Association of Ontario. Ontario RPN Survey: 2020 Findings. 2020.

²¹ Canadian Federation of Nurses Unions. Trends in Own Illness- or Disability-Related Absenteeism and Overtime among Publicly-Employed Registered Nurses. 2017

[URL: https://nursesunions.ca/wp-content/uploads/2017/05/Quick_Facts_Absenteeism-and-Overtime-2017-Final.pdf]

Looking to add greater remote capability and flexibility for nursing education remains critical, particularly with COVID-19 significantly changing how education is delivered today. As noted in the *Vision for the Future of Nursing in Canada* by the Federal/Provincial/Territorial Committee on Health Workforce, doing so could substantially improve access to nursing education, particularly for those in rural, remote, or indigenous communities, where the impact of nursing is even more pronounced in ensuring the success of those local healthcare systems.²²

Financial Access

In addition to the barriers noted above, cost is a significant barrier to accessing and/or completing nursing education programs in Ontario. In 2020, a WeRPN survey identified that 51% of RPNs noted there are barriers to accessing education programs that improve their practice as an RPN, including financial barriers (68%), lack of education close to home (40%), lack of support from the workplace (29%), and lack of the types of education RPNs want (39%).²³ Typical BScN programs average \$21,300 for a four-year full-time program, and RPN to RN career laddering program typically average \$16,830 for a three-year full-time program, as illustrated in Table 2. PSW to RPN career laddering programs are of similar cost to Practical Nursing (PN) programs.

Table 2 - Average Tuition Costs for Educational Programs in Ontario

Education Programs (in Ontario)	PSW to RPN Career Laddering Program*	Practical Nursing Program	RPN to RN Career Laddering Program	BScN Program
Avg. Tuition Cost per Semester (excluding books, required materials, and associated living and/or travel expenses)	\$2,250 per semester	\$2,375 per semester	\$2,805 per semester	\$2,663 per semester
Avg. Total Tuition Costs (excluding books, required materials, and associated living and/or travel expenses)	\$11,750 for 1 semester laddering + 4 semesters PN program (2.5 years)	\$11,875 for 5 semesters (2.5 years)	\$16,830 for 3 years	\$21,300 for 4 years

With the average annual salary of an RPN across the province of approximately \$3,000 before tax per month, tuition costs of \$2,800 per semester, excluding books and other required materials, can be steep relative to an RPNs monthly income. Additionally, opportunity costs of foregone salary if the individual is no longer able to work must be considered. As such, the true cost of pursuing a career laddering could be both the tuition costs (average \$17,000, excluding books and required materials) and the cost of not working for three years (\$80,000-120,000). This is a significant financial commitment and constraining barrier, especially considering RPNs wishing to career ladder likely have additional personal and/or family expenses to balance. Again, the situation is highly similar for PSWs wanting to career ladder to RPN roles, as they face similar costs for education with even lower wages.

In summary, we must continue to build a robust frontline workforce of nurses and health care providers in Ontario and address the shortage of these roles and the limited professional development opportunities given the supply and retention challenges described above. Both career laddering programs and professional development opportunities promise to be a more cost-effective and timely approach of enhancing the supply, knowledge, and specialized skills of nurses in our workforce compared with standard education programs that are heavily institutional-based, inflexible in their delivery, and very costly for students.

²² FPT Committee on Health Workforce. A Vision for the Future of Nursing in Canada. 2020. [URL: <https://www.nnpbc.com/pdfs/media/news/2020/Vision-for-the-Future-of-Nursing-in-Canada.pdf>]

²³ Registered Practical Nurses Association of Ontario. Ontario RPN Survey: 2015 Findings. 2015

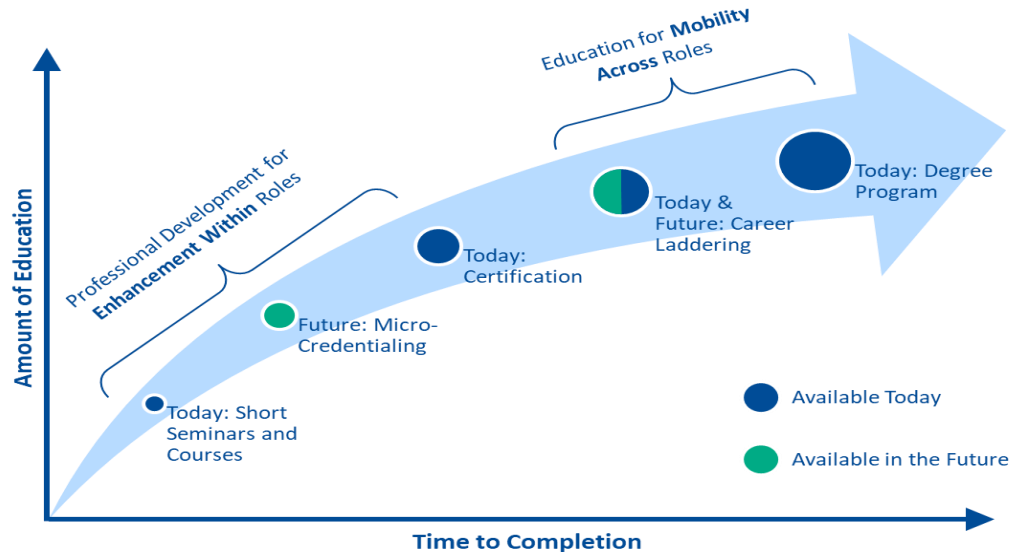
* Based on the average cost of three college programs offered by [Mohawk College](#), [George Brown College](#), [Centennial College](#)

4 A New Path Forward for a Made in Ontario Solution: Professional Development, Micro-Credentialing, and Career Laddering

4.1 A Multi-Pronged Approach to Increasing Human Resources

A multi-pronged education approach is the fastest way to increase health human resources and support excellence in patient care. Some of these approaches are in use today, while others require further development. As seen in Figure 5 below, approaches include smaller levels of education over a shorter period or a greater level of education requiring more investments of time and money. Each approach is needed and contributes to robust, flexible, and sufficient health human resources.

Figure 5 – Options for Nursing Professional Development and Education in Ontario



While some education focuses on people shifting roles, such as from an RPN to RN, education within a role is just as important. Increased knowledge allows nurses and PSWs to provide better care for their patients which in turn improves patient outcomes. Having a range of options also offers the government the opportunity to leverage existing tested and refined initiatives in priority areas immediately while other education approaches are developed and refined.

Professional development is a mainstay of how health care professionals maintain and build their skills. Courses and programs are already in use today in the form of short seminars or certifications. Micro-credentialing is a relatively new approach in Ontario that shows promise but will require adaptation of existing education programs. Career laddering programs also exist today for PSWs to ladder to RPN roles and RPNs to ladder to RN roles, however, there are opportunities for career laddering programs to be improved. And of course, people can take full degree programs, however, the time and financial investments are significant and often are not very accessible for mid-career professionals.

Approaches include, but are not limited to:

- **Short Seminars or Courses** – Seminars or courses that require minimal time to complete, such as a few hours or days. For example, a nurse may take a first aid course or attend a seminar on how to apply the latest research on a particular patient condition. Virtual or in-person options are available depending on the offering.
- **Certifications** – Nurses can become certified in their specialty area after passing a rigorous specialty exam. Certification requires significant studying to learn the best practices and latest research, and this knowledge is applied in practice to provide better patient care. Certification is offered through the Canadian Nurses Association which has over 20 specialty areas. For example, an RPN could take an exam to become certified in Gerontology and will soon have the opportunity to receive certification in Medical-Surgical Nursing
- **Micro-Credentialing** – Recent interest in micro-credentialing has emerged as an approach to increasing the supply of health professionals in a manner that better suits those people who would participate. Micro-credentialing splits up larger amounts of education into smaller time-limited segments and is meant to allow health professionals to apply their new knowledge when caring for patients while still pursuing the greater scope of education. These micro-credentials may or may not be “stackable” to allow completion of a degree and alternatively could be similar to a certification where multiple courses or modules come together to provide the knowledge necessary to specialize in a certain area or topic. This idea has been used elsewhere and while it shows promise, its benefits and limitations are being explored and implementation approaches would need to be developed.
- **Career Laddering** – Career laddering programs allow an RPN to complete BScN education to become an RN in a shorter period by recognizing the RPN's experience and education. The person graduates by meeting the same robust requirements of the BScN program and also has the same entry to practice requirements. PSW to RPN career laddering programs vary to a greater degree in duration and focus. Some programs provide courses that then permit placement partway through a Practical Nursing program (e.g. second or third semester), while others provide the foundational education required to be admitted to the Practical Nursing program's first semester. This is partially due to the variability in PSW education in Ontario. PSW to RPN career laddering programs are flexible and can be taken part-time to allow students to continue working during their studies. Career laddering is advantageous to students as there are a shorter education period and cost savings. The government also benefits from the cost savings of a shorter education period, and the public has access to more health human resources sooner.
- **Degree Programs** – Degree programs such as the 4-year BScN have been foundational to health professional education and will continue to be needed as one education approach.

Together these approaches will create a greater supply of and more flexibility for Ontario's health human resources.

5 The Nursing Education Initiative (NEI): A Ready and Ideal Implementation Approach

5.1 WeRPN's NEI Grant Program: Ready Made to Deliver Greater Impact

The government will need a robust program to enable the range of education approaches outlined in this business case. WeRPN has an ideal mechanism for funding these approaches through its Nursing Education Initiative (NEI). Not only is WeRPN a strong and trusted organization with a track record of partnership with the government, but also the NEI is currently operational and immediately scalable. No other mechanism offers better speed of implementation in ways that align with and are flexible to government needs.

WeRPN is the government's ideal partner for providing the grants that will reduce barriers to education, increase the supply of nurses, and target resources in areas where additional nursing supply and expertise is most needed. What WeRPN brings to the table includes:

- **Proven Accountability** – WeRPN has demonstrated accountability and responsible use of public funds through the efficient and effective administration of programs and supporting government funding for over 20 years, including the NEI.
- **Unapparelled Understanding of the Profession** – With access to the over to 50,000 RPNs working in Ontario today, nobody is as highly attuned to the pulse of nurses, including their unique challenges and areas of need. WeRPN actively participates and collaborates with the broader profession to advance patient care and its strong relationships enable change.
- **Vision and Demonstrated Thought Leadership** – WeRPN has a vision for how we can improve our health system. It has showcased thought leadership in the conceptualization of RPN career laddering and professional development in the province and has strong networks to advance the conversation. It is a respected voice within the nursing profession and broader health sector circles. Funding through WeRPN enables not only the distribution of grants but also continued thought leadership and vision for nursing education that supports the government's goals.
- **Credible Brand and Communications Infrastructure** – As the voice of registered practical nursing in Ontario since 1958, WeRPN has established a strong brand and trusted reputation with RPNs and across the broader healthcare system. The association has existing communications infrastructure to reach and engage RPNs, including databases, email distribution mechanisms, website and social media presence, and communications performance tracking. This infrastructure can also be leveraged easily and cost-effectively to support PSW participation in career laddering.

5.2 NEI: The Right Funding Mechanism

WeRPN's NEI grant program was announced in March 1999 in response to the Nursing Task Force's recommendations. As stated in the report *Ensuring the Care Will Be There: Report on Nursing Recruitment and Retention in Ontario*, the program intended to "provide a flexible environment through financial incentives for nurses and their employers to ensure timely and affordable access to continuing and advanced education. This flexible environment should include designated funds to support and facilitate continuing and advanced education for nurses."

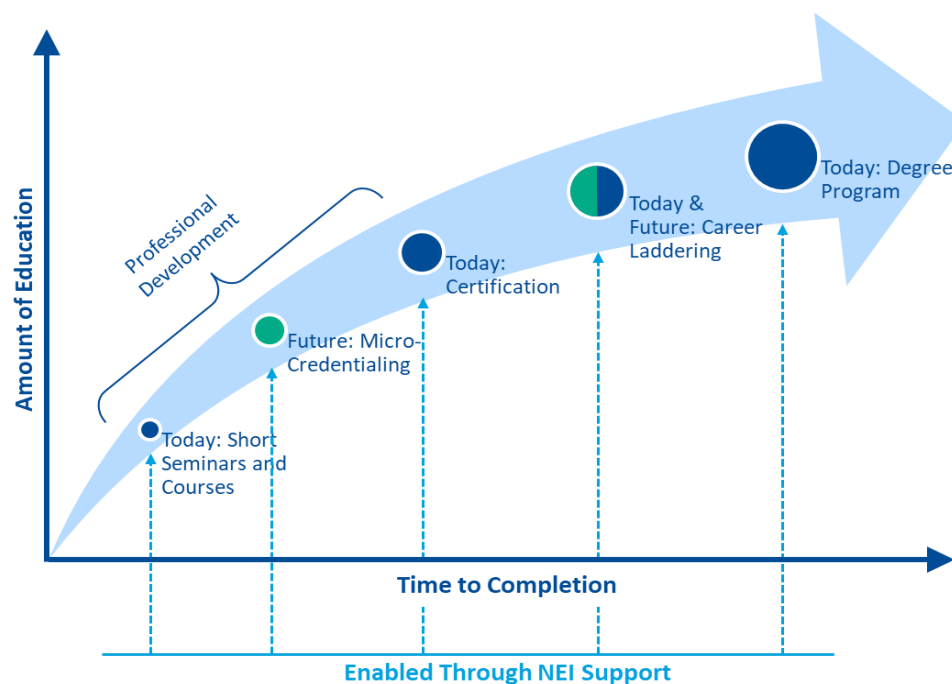
Today, WeRPN's NEI grant program supports a variety of immediate and medium-term opportunities for RPN career laddering and professional development, with over 5,000 applications for grants received annually. NEI funding is intended to help reimburse base tuition course fees, as well as registration fees for conferences, seminars, and workshops. RPNs are eligible to apply for

reimbursement of up to \$1,500 per funding year to pursue professional development courses or programs, such as core courses of Bachelor, graduate, or Master's nursing programs, specialty certificates and programs for clinical specialties, in alignment with priority areas defined by the Ministry of Health. Despite its wide-ranging applicability, the NEI fund does have a limited pool of funds, and all applications are evaluated using objective, pre-established criteria to maximize impact.

As an actively operational, trusted, and adaptable program that offers much-desired flexibility for funders and recipients, the NEI stands out as the clear choice to administer nursing education grants. Its advantages include:

- **Active Operations** – The NEI grant program has the working infrastructure to administer new investment streams, in addition to the existing funding received for professional development today, in a timely manner. NEI is currently operational with an existing system to manage all applications, score and communicate directly with applicants. Operations are on-going and easily scalable, with minimal incremental investment in infrastructure or brand building/outreach.
- **Focused and Smart Allocation** – The NEI already uses criteria for grant allocation that focuses on supporting government priorities and these criteria and related points system can be shifted if the government wants to focus on specific areas of patient need. For example, if the government wants to focus on improving care in long-term care, the criteria could be modified to provide more points for courses related to long-term care, such as gerontology, infection control, and wound care. If more RPNs were needed in long-term care, more points could be given to applications of PSWs currently working in long-term care that wish to continue in the sector but shift to the RPN role. The criteria can even be modified to better support the challenges in accessing professional development in rural, remote, and Indigenous communities. To support on-going retention of PSWs, the grant could be targeted towards PSWs that have already completed a minimum length of experience, such as three years, before becoming eligible. In this manner, the NEI allocation criteria can be highly focused to use resources wisely.
- **Recognized and Trusted Program** – The NEI is already well known and trusted by both government and nurses. Nurses trust that it can support their education and it has built government trust over its many years of operation.
- **Flexibility for Health Professionals** – The NEI offers superior access and flexibility to health professionals, as the program is institution and education program agnostic and can accommodate a wide variety of educational programs for nurses to pursue their interests. Funding through educational institutions or employer-based education programs does not provide this flexibility but rather constrains options for nurses to pursue the education they have identified would best support the care of the patients they serve.
- **Adaptive to Health System Priorities** – The NEI has no limitations in supporting the range of educational channels needed for rapid solutions to today's shortage of health human resources, as described in Figure 6:

Figure 6 – Nursing Professional Development and Education Supported by NEI



5.3 Comparison to Other Funding Channels

While alternative funding mechanisms exist to address the challenges outlined in this business case, NEI is still the ideal mechanism as described above and outlined in Table 3.

Table 3 – Comparison of Potential Funding Channels

Funding Channel	Accountability for Funds Granted	Active Operations	Trusted Program	Program Awareness	Adaptable & Responsive	Relatively Significant Funds Available	Health Prof. Flexibility	Gov. Flexibility
NEI	✓	✓	✓	✓	✓	✓	✓	✓
Educational Institutions	✓	✓	✓	✓		✓		
Employer Programs	✓			✓				
Charitable Grants (e.g. RNFOO)					✓		✓	

Access to programs offered by educational institutions and employers are limited to members of the specific institution or organization. This can constrain the range of educational offerings available to nurses and PSWs. This can be particularly challenging for smaller employers which are often very limited in the resources available to organize and fund education. These other channels are also limited in their ability to rapidly respond to changes, which limits the flexibility of these channels to accommodate shifting government priorities and sector needs.

Comparatively, the NEI grant program offers superior access and flexibility, alleviating these challenges found in other channels. It is institution-agnostic for approved education programs, enabling broader access and fewer limitations.

Overall, the NEI grant program is a ready-made solution to administer enhanced made-in-Ontario career laddering and professional development investment streams, including micro-credentialing, rapidly and effectively. The NEI has the existing infrastructure, exceptional access, and flexibility to

support the alleviation of immediate health system pressures from COVID-19 and support a stronger future that is ready to handle the challenges of tomorrow. Additionally, the selection of the NEI as the funding mechanism of choice capitalizes on WeRPN's wealth of experience, credibility, and attuned understanding of the profession as the administrator of enhanced investment streams.

6 Case for Change: The Benefits of a Nursing Career Laddering and Professional Development Programs

Made-in-Ontario nursing career laddering and professional development programs will result in tangible benefits for our people – both Ontarians receiving care and those delivering care – helping to alleviate immediate health system pressures from COVID-19, as well as the longer-term transformation objectives across our broader health care system. These tangible benefits can be done in a fiscally responsible manner, as illustrated in Figure 7.



A More Dynamic, Flexible, and Responsive Health Care System

Improving access to expeditious career laddering and professional development programs, such as micro-credentialing, will support the broader health system of Ontario.

With greater professional development opportunity, the health system will have greater flexibility to enhance health care expertise and capacity to deliver care where it is needed most. This will support excellent care across all care settings, allowing patients to remain in their most appropriate care setting for as long as possible and in turn help address current stresses on the system that are contributing to hallway health care.

A skilled, experienced, and engaged nursing workforce that sees tangible opportunities for professional growth will also be beneficial to support the development of future health system leaders, planners, and decision-makers. It will help build the leadership supply of a nursing workforce that is able to integrate their extensive clinical and frontline experience with their broader health care system understanding to help shape a more sustainable health system for Ontario's future, while meeting current system demands.

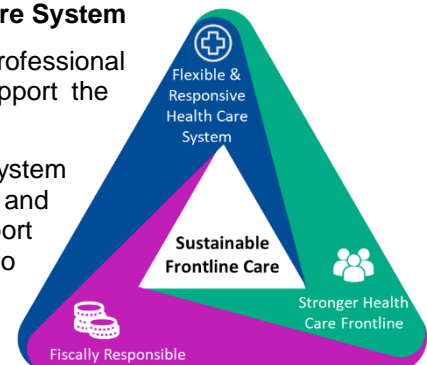


Figure 7: Benefits of a Nursing Career Laddering Program



A Stronger Health Care Frontline for Patients and Families

In addition to a more flexible, and responsive health care system, enhanced career laddering and micro-credentialing programs will result in better patient care. As noted above, a more engaged workforce with greater opportunity for career growth and development will result in improved health professional retention and supply. Patients will experience broader geographic coverage for the care they need and increased availability of skilled and experienced nursing professionals, particularly in rural and remote areas, meaning an increase of local, timely, and high-quality care.

In addition to developing a greater supply of nurses through career laddering, enhancing the depth of specialized knowledge and capability will also enable existing professionals to better manage changing population demographics, more complex patient cases, and higher caseloads. This includes the ability to address high priority areas of care, such as gerontology, infection control or wound, ostomy and continence care, where there is a demonstrated need for more specialized capabilities. Further, increased access to short-term, lower-cost education will enable Ontario's

nurses to practice using leading research and knowledge-translation approaches to drive better clinical outcomes and experiences for patients.



Rapid and Fiscally Responsible Investments

Investing in professional development and career laddering is also fiscally responsible. A made-in-Ontario solution will invest in our people, education system, and existing programs resulting in a more positive, cost-effective outcome. Ontario currently has career laddering pathways and a wide variety of professional development opportunities for nursing and PSW professionals. Investing in our existing workforce will ensure that Ontarians continue to have good jobs and excellent health care available to them when and where they need it, and that this care is provided cost-effectively and efficiently. Furthermore, WeRPN's NEI grant program is the most rapid and responsible mechanism under which to implement grants to support professional development and career laddering. The existing infrastructure of the NEI is low-cost and instantly scalable.

Our people, our health care system, and our economy are all interconnected, and as the saying goes, "a rising tide lifts all ships". When we improve any one aspect, we will see positive impacts in the other two. We need to work together now to address immediate health system pressures from COVID-19 and create a stronger health care workforce that is ready to handle the challenges of tomorrow, including those that existed before and will persist post-pandemic.

7 Achieving the Proposed Change

7.1 How We Move Forward

The time is now to come together and create this made in Ontario vision for nursing professional development, and career laddering. We need to work together to create a system that is **accessible** to all our skilled, dedicated nursing profession and PSW colleagues. A system that is **designed** to be efficient, builds on the skills people have and creates the future leaders of tomorrow. Lastly, this will be a system that **supports** our people – financially, professionally, and personally – as they look to grow their skills and support their communities. How do we get from our current situation to our ideal, made in Ontario program?

We need the government's support for improving the system, including modest investments of finances and time. We need to be fiscally responsible and ensure that where we allocate taxpayer dollars will have real impacts. We know that the province's financial resources are strained, particularly given the ongoing pandemic, but to create the ideal tomorrow some small upfront investment is required today. This investment will go towards our existing programs and enhancing them in a targeted manner.

We will also need the government to be an active partner. The profession, providers, educators, and the government will need to work together to ensure the right supports and infrastructure, are in place. Taking into considerations the challenges that lay ahead for our health care system, failure is not an option. Together, we can build the health human resource capacity that Ontario needs and address our most pressing health care challenges.

7.2 Steps We Can Take Today

Working together, we can take deliberate steps to overcome current obstacles and begin creating our ideal future. We will need everyone to come together to identify targeted investments that will drive the most change. As we begin to see progress in these areas, we will continue to work together to identify other incremental gains for the future. The first key step we can take today is to *enhance existing funding for WeRPN's Nursing Education Initiative (NEI) grant program*. This will enable both professional development within the RPN role as well as career laddering to RN roles, and support of the goal of recruiting and retaining more healthcare professionals in Ontario.

Additional opportunities exist to expand and extend NEI funding to PSWs looking to career ladder into an RPN role. The investment required for these opportunities is outlined in Table 4.

Table 4 – Current vs. Requested Annual Funding for the NEI

Funding Category	Currently Funded	Eligible but Unfunded	Total Funding Requested to Close the Gap
RPN Professional Development	\$ 0.70 MM	\$ 0.50 MM	\$ 1.00 MM
RPN to RN Laddering	\$ 0.60 MM	\$ 1.60 MM	\$ 1.50 MM
PSW to RPN Laddering Pilot	N/A	N/A	\$ 0.25 MM
TOTAL	\$ 1.30 MM	\$ 2.10 MM	\$ 2.75 MM

The incremental investments outlined above would support the following key activities and generate the following impacts:

- **Continued support of RPN professional development and micro-credentialing** – In the immediate and medium terms, the NEI will continue to provide financial supports for professional development opportunities for RPNs. Enhanced funding would go to reducing the number of currently unfunded applications for professional development today.
- **Expanded RPN to RN career laddering and micro-credentialing** – Increasing funding for RPN to RN career laddering will increase opportunities for RPNs to become RNs in a more timely manner and help address the RN shortage in Ontario.
- **PSW to RPN career laddering and micro-credentialing** – Finally, increased funding for the NEI program will provide the opportunity to create a pilot program that expands the number of PSWs who can access career laddering and micro-credentialing programs in support of a transition to an RPN role. One-time incremental funding of \$250,000 can be used to create a specialized investment stream to support such opportunities for over 160 PSWs. If the pilot program is successful, this investment could be made a permanent annual investment stream. To support greater retention of PSWs the government could tailor this program to applicants with a defined minimum number of years of experience to be eligible for funding (e.g., 3 years of PSW experience).

Strengthening Ontario's Frontline Nursing Workforce:

Future Opportunities for Enhancing Career Laddering

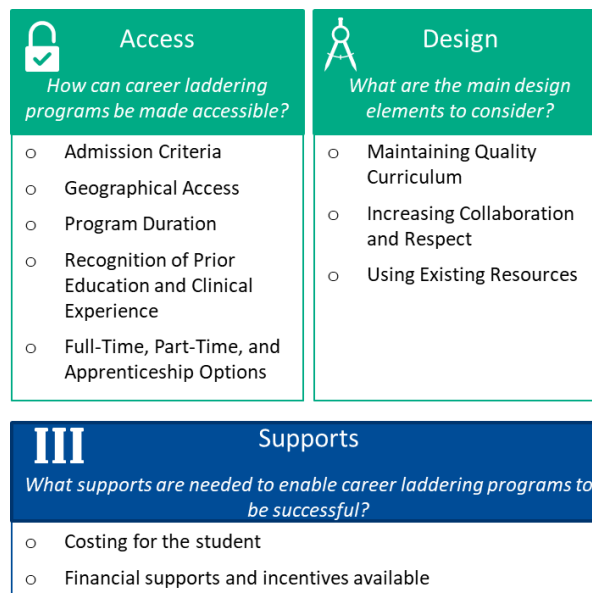
Section 2 – Future Opportunities for Enhancing Career Laddering

8 The Ideal Nursing Career Laddering Model for Ontario

A made-in-Ontario approach will bring solutions for current stresses in our health system, including challenges related to the supply of human resources, retention of our health professional workforce, and access to programs that supply both nursing professionals and other health providers. Not only can this be done for people who want to ladder from RPN to RN, but using the same underpinnings and principles, helping those who want to transition from PSW to RPN. This can create a system that supports safe, quality care for all, which instills confidence in the continuum of care and is accomplished in a fiscally-responsible manner.

Similar to what is considered for programs in other jurisdictions (See Appendix Section 10.1), a new path forward for career laddering programs in Ontario will need to consider access, design, and support for both PN and BScN career laddering programs, as illustrated in Figure 8. .

Figure 8 - Key Aspects of Career Laddering Programs



Our vision for an ideal career laddering program for Ontario is one that will allow for flexibility, and recognize and build on skills that already exist by making effective use of the education and experiences of people who are already interested in providing care for Ontarians. Stronger partnerships between local health service providers and educational institutions would increase the number of clinical placements in rural and remote communities, where there is already a nursing shortage. It is possible to do this in a fiscally conservative manner and even achieve a cost-neutral solution. The following sections and tables outline where we are today, our vision for the future, and enablers to achieving the vision.



Access

The ideal career laddering program for Ontario will decrease barriers to participation in nursing education and help supply more nurses to right-size the care needed by Ontarians. In the near term, this means increasing supply of nurses in rural and remote areas where the nursing shortage is already acutely felt. In the longer term, this will support the growing care needs of Ontarians. Today, we can leverage and build on the career laddering programs that are already approved in Ontario.

Table 5 - Our Vision for Access to Career Laddering Programs

<i>Our vision is an accessible and flexible career laddering program that builds nursing supply using existing resources in a timely manner.</i>		
	Where we are today	Where we need to get to in the future
Admission Criteria	<ul style="list-style-type: none"> Applicant is an RPN registered with the College of Nurses of Ontario 	<ul style="list-style-type: none"> PSWs with education at an approved educational institution may apply to future PN career laddering programs that appropriately decrease the time requirements
Geographical Access	<ul style="list-style-type: none"> Mostly in-person courses and practicum experiences, with minimal online components 	<ul style="list-style-type: none"> Colleges able to grant degrees, providing greater geographical reach of education opportunities Education is co-located where care is needed; educational institutions collaborate with health service providers to teach courses Career laddering programs are provided in rural and remote communities A balance of online and in-person courses and practicum experiences
Program Duration	<ul style="list-style-type: none"> Programs are generally between 3-4 years in duration 	<ul style="list-style-type: none"> Programs that allow students to achieve the required BScN learning outcomes in the shortest period, by considering prior education and experience, while adhering to excellence and patient safety.
Recognition of Prior Education and Clinical Experience	<ul style="list-style-type: none"> The education, knowledge, and clinical experience of RPNs is partially recognized 	<ul style="list-style-type: none"> The education, knowledge, and clinical experience of RPNs is fully recognized The education, knowledge, and clinical experience of PSWs are also recognized
Full Time, Part Time, and Apprenticeship Options	<ul style="list-style-type: none"> Mostly full-time options, with few part-time options 	<ul style="list-style-type: none"> Expansion of part-time and virtual options in Ontario Apprenticeship option available*

*Apprenticeship programs do not currently exist in Ontario but could be explored as a way to increase access to career laddering programs by enabling students to continue working while pursuing their degree. A government investment could enhance further adoption of this approach.

We can get started today, as we have existing infrastructure and enablers in place to help make this a reality. We can increase our investment return by acting now, building on what we already have.

Infrastructure and Enablers we can Leverage Today	New Infrastructure and Enablers we will need for the future
<ul style="list-style-type: none"> Existing online courses and curriculum Educational institutions that have an innovative and flexible approach to learning 	<ul style="list-style-type: none"> Program accreditation changes Additional online educational platforms, e.g., online lectures, virtual mock patient scenarios, webinars, etc.



Design

The ideal career laddering program provides the necessary education to meet the learning requirements to be granted a BScN and enable those RPNs that want to build on their knowledge and experience with additional education to become successful RNs. In the future, this will also include PSWs meeting the requirements of the PN programs and becoming successful RPNs.

Table 6 - Our Vision for Design of Career Laddering Programs

<i>Our vision is using existing educational infrastructure to develop a streamlined curriculum that meets rigorous quality standards and enables nurses to provide care in a more collaborative manner.</i>		
	Where we are today	Where we need to get to in the future
Maintaining Quality Curriculum	<ul style="list-style-type: none"> Educational components of RPN to RN career laddering programs meet the required learning outcomes 	
Increasing Collaboration and Respect	<ul style="list-style-type: none"> Some understanding of the RPN role gained as RPNs, and future RNs take joint classes through career laddering program 	<ul style="list-style-type: none"> Joint PN and BScN foundational classes occur Career laddering students receive support to succeed as they join BScN students or PN students in the case of PN career laddering programs
Using Existing Resources	<ul style="list-style-type: none"> Existing educational programs and infrastructure is used 	<ul style="list-style-type: none"> Hospital and other health service provider infrastructure is used to a greater extent in delivery of education, including in rural and remote communities

As with access, we can also get started today. We have existing infrastructure and enablers in place to help make this a reality right away.

Infrastructure and Enablers we can Leverage Today	New Infrastructure and Enablers we will need for the future
<ul style="list-style-type: none"> Existing career laddering programs Curriculum mapping methodology and other best practice learnings from other jurisdictions 	<ul style="list-style-type: none"> New partnerships between local health service providers and educational institutions Clear educational standards and learning outcomes for PSW educational preparation

III Supports

The ideal career laddering program provides sufficient supports to incentivize student enrollment and enables student success to help decrease the stress on our health system. This includes ensuring financial resources are used in the most effective ways and having the necessary support from government and relevant nursing-related organizations (e.g. CNO; others outlined below). We believe that making a modest upstream investment in career laddering can decrease the investment needed to educate those without any health care experience through full BScN programs, to graduate the same number of RNs. This is because career laddering programs are shorter than standard BScN programs, and are anticipated to be further shortened in the future while maintaining educational outcomes. In this way, we believe the government can make this a cost-neutral initiative.

In the future, we will have a system in which tuition costs and associated educational expenses are not a prohibitive barrier to participating in career laddering.

Table 7 - Our Vision for Supports for Career Laddering Programs

<i>Our vision is a career laddering program in which individuals are financially, professionally, and personally supported as they look to grow their skills and support their communities.</i>		
	Where we are today	Where we need to get to in the future
Financial supports and incentives available	<ul style="list-style-type: none"> ○ WeRPN's NEI education grant program ○ OSAP and student loan programs 	<ul style="list-style-type: none"> ○ Expanded WeRPN's NEI education grant program (i.e., a higher number of approved applications and grants disbursed) ○ Student loan reimbursement programs depending on employment location following graduation ○ Apprenticeship program funding ○ Broader funding to expand career laddering to RPN career laddering programs
Nursing and government buy-in	<ul style="list-style-type: none"> ○ Strong support for increasing RN career laddering programs is held unanimously across the nursing associations and regulatory college ○ Strong support also exists in some educational institutions; as these ideas are shared more broadly, support is anticipated to increase 	<ul style="list-style-type: none"> ○ Support for the idea of RPN career laddering programs for PSWs to transition their roles to RPNs

Career laddering programs are financially responsible for individuals as well as the government. Individual RPNs have already invested nearly \$10,000 to complete a practical nursing program and obtain their RPN designation. Nearly 29% of Ontario RPNs have indicated a desire to career ladder to the RN role, up from 18% in 2015²⁴. For these RPNs wishing to obtain an RN designation, a career laddering program is cheaper and builds on their existing knowledge. As illustrated in Table 8, career laddering programs, as they are today in Ontario, are approximately \$4,500 cheaper and one year shorter in duration than standard BScN program.

²⁴ Registered Practical Nurses Association of Ontario. Ontario RPN Survey: 2020 Findings. 2020

Table 8 - Average Tuition Costs for Educational Programs in Ontario

Education Programs (in Ontario)	Practical Nursing Program	RPN to RN Career Laddering Program	Standard BScN Program	Educational options for RPNs wishing to obtain RN designation	
				Option 1: Practical Nursing + Career Laddering Programs	Option 2: Practical Nursing + Standard BScN Programs
Average Total Tuition Costs (excluding books, required materials, and associated living and/or travel expenses)	\$9,500 for 4-5 semesters (2-2.5 years)	\$16,830 for 3 years	\$21,300 for 4 years	\$9,500 + \$16,800 \$26,300	\$9,500 + \$21,300 \$30,800

There may be even greater savings in the future as we look to enhance our current career laddering programs by shortening the program duration while maintaining learning outcomes. Likewise, for the government, assuming the subsidy per year per student is constant, career laddering programs are shorter in duration, and therefore are less to subsidize per student. This means that investing in a career laddering program is a more cost-effective of increasing the RPN and RN workforce. Again, it is anticipated that these programs could be shortened. Shorter programs would also reduce overall government investment in total subsidies per student.

Given the lower cost and shorter duration of career laddering programs, in comparison to standard BScN programs, it is wise for the government to incentivize more people to this path as a short-term solution for increasing the nursing workforce in Ontario. The optimal channel through which this can be completed is by enhancing investments to WeRPN's existing NEI education grant program.




The existing infrastructure and enablers are in place to help make this an immediate reality, and we can increase our investment return by acting now and building on what we already have.

Infrastructure and Enablers we can Leverage Today	New Infrastructure and Enablers we will need for the future
<ul style="list-style-type: none"> Infrastructure for the <i>Nursing Education Initiative</i> (NEI) grant program Tuition reimbursement programs, particularly to those in rural and remote areas 	<ul style="list-style-type: none"> Agreed on mandate to WeRPN's role in a career laddering program

8.1 Roles and Accountabilities to Support the Nursing Career Laddering Program

Achieving the vision for our system will require support and collaboration with key sector stakeholders. The figure below illustrates the key stakeholders that will be essential for supporting the made in Ontario career laddering program and their key roles in driving the change forward.

Figure 9 - Key Sector Stakeholders Required to Achieve our Vision

	KEY STAKEHOLDERS	ROLES
	Government <ul style="list-style-type: none"> Ministry of Health (MOH) Ministry of Long-Term Care (MLTC) Ministry of Colleges and Universities (MCU) Ministry of Labour, Training and Skills Development (MLTSD) 	<ul style="list-style-type: none"> Support and buy-in of the nursing career laddering program, offering additional financial incentives to support current program expansion and development Support online courses and curriculum, and colleges granting degrees in rural and remote communities
	Professional Bodies <ul style="list-style-type: none"> Regulatory Bodies, e.g., College of Nurses of Ontario (CNO) Professional Associations, e.g., Registered Practical Nurses Association of Ontario (WeRPN), Registered Nurses Association of Ontario (RNAO) 	<ul style="list-style-type: none"> Work together to create a program that supports the entire nursing continuum of care Streamline admission requirements and assessment of prior experience Develop innovative, flexible courses and curriculum, particularly delivered via online platforms Identify regulatory and other requirements that should still be met to meet future needs
	System Partners in Care <ul style="list-style-type: none"> Health care providers, such as hospitals, long-term care, home and community care Educational providers, such as universities and colleges Nursing Union (ONA) 	<ul style="list-style-type: none"> Promote these programs to their staff and other interested in them Offer supervised clinical placements and apprenticeship options Modify existing education programs/curriculums and embrace the support these students bring

These various stakeholder groups will all need to be engaged and work together develop a made in Ontario solution that it is effective, respects the collective skills and experiences of the various groups, and positions the nursing profession to meet the challenges of tomorrow. WeRPN is excited to engage all these different stakeholder groups in a manner that brings our shared understanding, skillsets, system roles, and overarching goals to the table.

9 Realizing our Opportunity

The time for action is now – as a result of COVID-19 there is a significant and immediate need for enhanced recruitment and retention of health human resources, and greater flexibility within our health human resources. Our healthcare system is primed for change today, working towards a more prosperous future post-pandemic.

Pre-COVID, the provincial government made a strong commitment to improving Ontario's health care system, including ending hallway health care and has since doubled down on its commitment to improving the recruitment, retention and support of nurses and frontline health care workers during the pandemic. We are seeing bold moves being made, such as the investment in, creation, and deployment of Ontario Health Teams across the province. With some additional investment, nurses and PSWs could play an even greater role in assisting the Ontario health care system, supporting all Ontarians, regardless of where they live or choose to seek care, to access high-quality care. When it comes to improving nursing education, the nursing community agrees there is no time to delay.

WeRPN is the right partner to administer grants that will have an immediate impact as well as over the longer-term work with the nursing community (including associations and regulatory college), government, and other system partners in care to lead the further enhancement of nursing career laddering. We are ready to take on this exciting challenge and look forward to working with you and others to make our common goals a reality.

10 Appendix



Appendix 10.1 and 10.2 provide additional information about career laddering in other jurisdictions and what we can learn and apply in Ontario. Appendix 10.1 provides an overview of these lessons and provides some of the foundational ideas for the ideal nursing career laddering model for Ontario, while appendix 10.2 provides additional jurisdictional findings details.

10.1 Learning from our Peers: Career Laddering

The challenges described above are not exclusive to Ontario. Other Canadian provinces and international jurisdictions are experiencing similar challenges and are looking to career laddering programs as a solution. These jurisdictions see career laddering programs as a method to effectively use current skills and education to bring more people into their nursing workforce in an efficient and fiscally responsible manner.

We looked to similar health care systems in seven other jurisdictions and found three aspects that can be instructive to Ontario in implementing successful career laddering programs. These aspects, as illustrated in the figure on the right, are access, design, and supports.

Figure 10 - Key Aspects of Career Laddering Programs

 Access How can career laddering programs be made accessible?	 Design What are the main design elements to consider?
<ul style="list-style-type: none"> Admission Criteria Geographical Access Program Duration Recognition of Prior Education and Clinical Experience Full-Time, Part-Time, and Apprenticeship Options 	<ul style="list-style-type: none"> Maintaining Quality Curriculum Increasing Collaboration and Respect Using Existing Resources
III Supports What supports are needed to enable career laddering programs to be successful?	
<ul style="list-style-type: none"> Costing for the student Financial supports and incentives available 	



Access

Accessibility to career laddering is often related to geographic and time factors. To increase access, jurisdictions considered several factors: admission criteria, geography, program duration, and recognition of prior experience, as well as full-time, part-time, and apprenticeship options. Financial assistance can also impact access and is spoken to in the supports section of this business case.

- **Admission Criteria** – for RPN to RN career laddering programs, applicants must have a Practical Nursing (PN) degree. Some jurisdictions require registration as an RPN with the relevant regulatory college.
- **Geographical Access** – programs are typically in urban centres and close to teaching hospitals, however, in some jurisdictions there was a concerted and successful effort to increase access to more rural and remote areas. This is often done through increasing online educational components and/or increasing the in-person educational classes/ locations in rural and remote communities. This decreases the amount of travel time and cost required for students and in some cases allows students to participate in the career laddering program without having to relocate or temporarily separate from their families and homes. The majority of programs, however, have struggled to implement innovative ways to provide flexibility to people who are geographically distant from larger educational institutions.
- **Program Duration** – some jurisdictions have successfully reduced the time to complete the career laddering program to 2 full-time years (6 semesters), making the programs more

AUSTRALIA'S PROGRAM IS STRUCTURED WITH A MIX OF IN-CAMPUS-INTENSIVE WEEKS, FOLLOWED BY ONLINE-INTENSIVE LEARNING COMPONENTS, WHICH PROVIDES THE STUDENTS WITH SOME SCHEDULING FLEXIBILITY.

accessible from a financial perspective, as well as for how fast the nursing workforce can be augmented. This has been done while still fully mapping the differences between PN and BScN programs to ensure education quality and standards are maintained. Part-time programs allow students to continue working and making an income and can be done in 3 years. Other jurisdictions have been challenged to provide career laddering programs that are significantly less in duration than a BScN. For example, one program was 3.5 years full-time, while a BScN is 4 years. Programs generally range between 2-4 years for a full-time student and 3-7 years for a part-time student.

- **Recognition of Prior Education and Clinical Experience** – career laddering programs recognize and give credit for the prior education a person has taken and the experience they already bring clinically. Other jurisdictions have clearly mapped the education standards and learning outcomes for PN and BScN programs to understand the difference and identify what needs to be learned to meet the BScN learning outcomes. Clear and standardized learning outcomes enables this to happen. Some jurisdictions, however, give very little recognition of prior education and experience. Recognition of PSW education and work experience in PN programs was not seen, however, it was recognized that, theoretically, the process of identifying what to recognize and give credit for would be the same as for RPN to RN career laddering programs.

ALBERTA'S PROGRAM REQUIRES APPLICANTS TO COMPLETE A MINIMUM 1,800 HOURS OF PRIOR EXPERIENCE, AND ITS PROGRAM IS AT LEAST 1 YEAR SHORTER IN DURATION THAN OTHER SIMILAR CANADIAN PROGRAMS.

AUSTRALIA'S PROGRAM ACCOUNTS FOR PRIOR PRACTICUM AND WORK PLACEMENT EXPERIENCES, RESULTING IN SUPERVISED CLINICAL PLACEMENTS THAT ARE 33% SHORTER THAN THOSE OF STUDENTS IN THE TRADITIONAL BSCN PROGRAM.

- **Time, Part-Time, and Apprenticeship Options** – to support students in career laddering programs that need to continue working and earning a living wage, part-time options are sometimes offered. These programs are anecdotally correlated with higher retention and completion rates than programs offered exclusively on a full-time basis. An apprenticeship model has also been introduced that allows students to continue working and complete higher education part-time, reducing the barrier to access for those requiring income while completing education. While part-time and apprenticeship options are seen as successful, not all jurisdictions or educational institutions offering career laddering programs have implemented these options. For apprenticeship programs, a factor that may be preventing further adoption is identifying government and/or employer funding to pay for the apprenticeship.



Design

Leading career laddering programs are designed with attention to maintaining quality, using existing resources, and increasing collaboration and respect.

- **Maintaining Quality Curriculum** – career laddering curriculums are designed through a rigorous process of understanding learning outcomes between PN and BScN programs to identify the educational gap that must be filled to meet BScN learning outcomes and standards. Courses provide graduates of the program with the ability to identify problems from a broad range of complex information and synthesize it into solutions for patients.
- **Increasing Collaboration and Respect** – some programs look to increase collaborative learning between PN, career laddering, and BScN students. This builds trust between nurses and supports an understanding of roles and more effective teamwork when the nurses start caring for patients. Introductory career laddering courses quickly bring RPNs

to a similar place in the curriculum as BScN students, at which point both student groups join in common classes and courses.

- **Using Existing Resources** – most programs use the existing BScN educational resources and infrastructure, including faculty, buildings, and curriculums.

III Supports

There are two key components related to supports: financial supports and incentives, as well as buy-in from leaders and organizations in nursing and government.

- **Financial supports and incentives available** – education costs can include tuition fees, books and materials, travel costs, and the costs associated with possible temporary relocation if commuting is not a viable option where programs are offered far away from home. Also, students who work while completing the program may often need to reduce the number of working hours (and associated wages) to meet the rigour and demands of the program, which further imposes financial barriers to accessing the program. Many jurisdictions with career laddering programs offer financial support and incentives to relieve this financial burden that can prevent participation in further education. Financial supports and incentives include bursaries, grants, or other incentives, either during the program or once an individual has completed the program and been employed.
- **Nursing and government buy-in** – there is strong support for career laddering in some jurisdictions across educational institutions, the nursing community, and government. Leaders from these areas see the value in expanding educational offerings, allowing for movement within roles across the nursing profession, and supplying nursing care to the areas where patients need it most. In other jurisdictions, there can be resistance within educational institutions that believe longer periods of education and in-person education are required to maintain quality.

NOVA SCOTIA'S DEPARTMENT OF HEALTH AND WELLNESS IS COVERING THE SALARIES OF RNS WHILE THEY ATTEND A 2-YEAR FULL-TIME MASTER OF NURSING NURSE PRACTITIONER PROGRAM

SASKATCHEWAN'S MINISTRY OF HEALTH LAUNCHED A STUDENT LOAN REIMBURSEMENT PROGRAM FOR NURSES AND NURSE PRACTITIONERS WHO CHOOSE TO WORK IN SMALLER, REMOTE COMMUNITIES THAT EXPERIENCE RECRUITMENT CHALLENGES

THE UK CHARGES HEALTH SERVICE PROVIDERS A LEVY, THE TOTAL FUNDS FROM WHICH ARE DISTRIBUTED BACK TO THOSE PROVIDERS OFFERING APPRENTISHIPS

10.2 Detailed Jurisdictional Findings

The table below summarizes what Canadian and international jurisdictions have done to:

- Enhance recruitment, retention, and engagement of nursing professionals
- Ensure nursing professionals are working to their full scope of practice; and
- Increase access to programs that build nursing supply and capability.

Notes: RPNs are referred to as Licensed Practical Nurses (LPNs) in other Canadian jurisdictions, Enrolled Nurses (EN) in Australia and Nursing Associates in the United Kingdom.

Jurisdictions	Number of nursing professionals <ul style="list-style-type: none"> What have other jurisdictions done to increase the number of nursing professionals? What have they done to enhance recruitment, retention and engagement of nursing professionals? 	Managing scope and meeting system demand <ul style="list-style-type: none"> What have other jurisdictions done to manage the scope of nursing professionals, and ensure they are working to their full scope of practice as per regulatory licenses? 	Program description and access to programs that build supply <ul style="list-style-type: none"> What have other jurisdictions done to enhance access to programs that build nursing supply, e.g., career laddering programs, and similar bridging programs? How are other jurisdictions delivering their career laddering or similar programs?
Ontario (Canada)	<ul style="list-style-type: none"> ○ The MOH offers the Nursing Education Initiative (NEI), an education fund that provides nurses access to continuing education and professional development opportunities through education grants. The funding also supports developing best practice guidelines, and recruitment and retention strategies. 	<ul style="list-style-type: none"> ○ RPNs, RNs and NPs are regulated by the College of Nurses of Ontario (CNO). 	<ul style="list-style-type: none"> ○ Ontario has eight Baccalaureate Nursing (RN) programs approved by the Council at the College of Nurses of Ontario (CNO) that meet the requirements for a “pre-health education entry specified program”. These are programs that build on RPN’s previous qualifications and experience, and enable them to obtain a Bachelor of Science in Nursing (BScN) designation in (generally) a shorter period than in the standard BScN program. These programs vary in duration and delivery approaches, and some are offered on a part-time basis.

Strengthening Ontario's Frontline Nursing Workforce

Business Case for Improved Nursing Career Laddering and Professional Development Programs

Jurisdictions	Number of nursing professionals <ul style="list-style-type: none"> What have other jurisdictions done to increase the number of nursing professionals? What have they done to enhance recruitment, retention and engagement of nursing professionals? 	Managing scope and meeting system demand <ul style="list-style-type: none"> What have other jurisdictions done to manage the scope of nursing professionals, and ensure they are working to their full scope of practice as per regulatory licenses? 	Program description and access to programs that build supply <ul style="list-style-type: none"> What have other jurisdictions done to enhance access to programs that build nursing supply, e.g., career laddering programs, and similar bridging programs? How are other jurisdictions delivering their career laddering or similar programs?
Newfoundland and Labrador (Canada)	<ul style="list-style-type: none"> The Department of Health and Community Services (HCS) offers a variety of bursaries and incentives designed to meet the recruitment needs of Regional Health Authorities. Bursaries and incentives are available to both new graduates and experienced professionals usually requiring a return-in-service commitment. 	<ul style="list-style-type: none"> RNs and Nurse Practitioners (NP) are regulated by the College of Registered Nurses of Newfoundland and Labrador (CRNNL). LPNs are regulated by the College of Licensed Practical Nurses of Newfoundland and Labrador (CLPNNL). 	<ul style="list-style-type: none"> Bachelor of Nursing LPN Bridging Option offered at the Memorial University, Centre for Nursing Studies. Licensed LPNs by CLPNNL must complete a bridging semester (of 6 weeks duration) before transitioning to the standard BN program courses for years 2-4. Total duration is 3.5 years FT.
New Brunswick (Canada)	<ul style="list-style-type: none"> In July 2019, the Department of Health released a 10-year Nursing Resource Strategy focused on addressing the nursing shortage. The strategy focuses on 4 pillars: promotion of RN profession in NB; enhancement of nursing education in NB; recruitment of internationally educated nurses; and enhancement of RN employment and work-life balance. 	<ul style="list-style-type: none"> RNs and NPs are regulated by the Nurses Association of New Brunswick (NANB). LPNs are regulated by the Association of New Brunswick Practical Licensed Nurses (ANBLPN). 	<ul style="list-style-type: none"> Bachelor of Nursing Degree for LPN Bridge pilot offered at the University of New Brunswick. Licensed LPNs by ANBLPN, with a graduate degree from a practical nursing program, complete 2 years of pre-requisites at New Brunswick Community College, before transitioning to standard BN program courses for years 3-4. Total duration is 4 years FT.

Strengthening Ontario's Frontline Nursing Workforce

Business Case for Improved Nursing Career Laddering and Professional Development Programs

Jurisdictions	Number of nursing professionals <ul style="list-style-type: none"> What have other jurisdictions done to increase the number of nursing professionals? What have they done to enhance recruitment, retention and engagement of nursing professionals? 	Managing scope and meeting system demand <ul style="list-style-type: none"> What have other jurisdictions done to manage the scope of nursing professionals, and ensure they are working to their full scope of practice as per regulatory licenses? 	Program description and access to programs that build supply <ul style="list-style-type: none"> What have other jurisdictions done to enhance access to programs that build nursing supply, e.g., career laddering programs, and similar bridging programs? How are other jurisdictions delivering their career laddering or similar programs?
Nova Scotia (Canada)	<ul style="list-style-type: none"> The Department of Health and Wellness offers the Nurse Practitioner Education Incentive (i.e., cover the salaries of up to 10 RN while they attend a two-year Master's program full-time at Dalhousie University). The Department also released the Nursing Strategy 2015, focused on recruitment, retention and renewal of nursing professionals. The Department also provides funding to employers in hard-to-recruit regions to incent nurses in career laddering programs, at up to \$5,000 per year, provided they return to work/service following their graduation. 	<ul style="list-style-type: none"> LPNs, RNs and NPs are regulated by the Nova Scotia College of Nursing (NSCN). 	<ul style="list-style-type: none"> Accelerated BScN Program at Dalhousie University, St. Francis Xavier University or Cape Breton University. Licensed LPNs who graduated from Nova Scotia's Community College practical nursing diploma program and completed 1,800+ hours of work experience can complete the accelerated program in 2 years.
Alberta (Canada)	<ul style="list-style-type: none"> The Alberta Health Services offers numerous bursaries and incentives for RNs and Registered Psychiatric Nurses to work in rural areas of Alberta. 	<ul style="list-style-type: none"> RNs and NPs are regulated by the College and Association of Registered Nurses of Alberta (CARNA). LPNs are regulated by the College of Licensed Practical Nurses of Alberta (CLPNA). 	<ul style="list-style-type: none"> Post-LPN to Nursing Degree Program at Athabasca University. Regulated LPN with CLPNA who graduated from an approved practical nurse diploma program and completed 1,700+ hours of work experience can complete a BN program in 3.5 years FT (or longer if PT as needed)

Strengthening Ontario's Frontline Nursing Workforce

Business Case for Improved Nursing Career Laddering and Professional Development Programs

Jurisdictions	Number of nursing professionals <ul style="list-style-type: none"> What have other jurisdictions done to increase the number of nursing professionals? What have they done to enhance recruitment, retention and engagement of nursing professionals? 	Managing scope and meeting system demand <ul style="list-style-type: none"> What have other jurisdictions done to manage the scope of nursing professionals, and ensure they are working to their full scope of practice as per regulatory licenses? 	Program description and access to programs that build supply <ul style="list-style-type: none"> What have other jurisdictions done to enhance access to programs that build nursing supply, e.g., career laddering programs, and similar bridging programs? How are other jurisdictions delivering their career laddering or similar programs?
Saskatchewan (Canada)	<ul style="list-style-type: none"> The Ministry of Health offers the Saskatchewan Student Loan Reimbursement for Nurses and Nurse Practitioners, a program that encourages nurses and NPs to work in smaller communities. 	<ul style="list-style-type: none"> RNs are regulated by the Saskatchewan Registered Nurses Association (SRNA). LPNs are regulated by the Saskatchewan Association of Licensed Practical Nurses (SALNA). 	<ul style="list-style-type: none"> Saskatchewan Collaborative BScN offered at University of Regina, and Saskatchewan Polytechnic. Individuals who completed 9+ credit hours of nursing courses at a post-secondary institution can start a BScN program as an upper-year student (i.e., skip year 1).
Australia	<ul style="list-style-type: none"> In 2014, the Department of Health released the Nursing Workforce Sustainability: Improving Nurse Retention and Productivity Report that focused on recommendations to address the forecasted nursing shortage. Key focus areas were leadership (building workplace supply); retention (early career preparation and workplace support); and productivity (enable innovation in the workplace). 	<ul style="list-style-type: none"> Enrolled Nurses (EN), RN, NPs and midwives are regulated by the Nursing and Midwifery Board of Australia (NMBA). The Australian Health Practitioner Regulatory Agency (AHPRA) supports the 15 national boards that are responsible for regulating health professions. 	<ul style="list-style-type: none"> Enrolled Nurse to RN Pathway, offered by Southern Cross University. Registered ENs with NMBA and AHPRA who completed an ANMAC-approved diploma in nursing complete a 2 year FT program and 640 hrs of supervised clinical placement to obtain an RN designation. The program can be offered PT.
United Kingdom	<ul style="list-style-type: none"> In January 2019, the new Chief Nursing Officer for the NHS launched NHS's Long Term Plan that set out key priorities, including recruiting and retaining people with the skills required; building positive, rewarding places of work; and breaking down educational barriers. 	<ul style="list-style-type: none"> Nursing Associates, RNs, NPs and midwives are regulated by the Nursing & Midwifery Council (NMC). 	<ul style="list-style-type: none"> Nursing Associate Higher Apprenticeship Program offered by the University of Salford. Health care assistants and clinical support workers participate in a 2.5 apprenticeship program (employment-based, with part-time university attendance) that leads to a Nursing Associate Foundation Degree.