

Access to Licensure for Foreign Qualified Nurses

A Project of the Alberta Network of Immigrant Women

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Acknowledgements

On behalf of the Alberta Network of Immigrant Women, appreciation is extended to the project funders, the Status of Women Canada and the Human Rights, Citizenship and Multiculturalism Education Fund. In addition, their representatives have generously contributed their expertise as members of the steering committee.

The development and continued motivation for this project was guided by wisdom of both the coordinator and vice-chairperson of the Alberta Network of Immigrant Women. Their combined knowledge and experience with immigrant women and with similar endeavors, has contributed significantly to this project.

Acknowledgements are extended to the executive director of "Changing Together A Center for Immigrant Women" (member agency of the Alberta Network of Immigrant Women), for the provision of an Edmonton facility for the project's activities.

A number of individuals and associations have provided information, suggestions and support and without them the project would not have proceeded. They are: the Filipino Nurses Association, the Domestic Workers Association, the president, executive director and registrar of the Alberta Registered Nurses Association, personnel from the Nursing Refresher Program, Grant MacEwan College, the Registered Nurses Association of British Columbia, human resources personnel from the Calgary Health Region, and the Immigrant Language and Vocational Assessment Center, Calgary Immigrant Aid Society.

A special note of appreciation is extended to the Project's Steering Committee and the project's research team. They gave willingly of their time and knowledge and the project's accomplishment is due largely to this group.

Finally, we wish to thank the participants of the project, as without their "voices" there would not be a project. We sincerely hope your experiences have been honored in the project report and that through the implementation of the recommendations that change can be made.

Duplication of this document, in whole or in part, should include the acknowledgement of the project sponsor, the Alberta Network of Immigrant Women.

Executive Summary

Although, Canadians value the contributions immigrants make to this country, challenges to licensure or accreditation can make it difficult for foreign qualified professionals to contribute on a professional level. Foreign qualified nurses enter Canada with different levels of knowledge and practice ability. Some are experienced licensed professionals with a command of the English language while others may be licensed or unlicensed and have language barriers that prevent them from working in Canada. It has been recommended, that efforts to examine the status quo should focus on assisting foreign qualified nurses to meet the challenges of licensure (Overqualified, Underemployed. Accessibility Barriers to accreditation for Immigrant Women with Foreign Qualifications Report, 2000).

The current and predicted future shortage of registered nurses in most health regions in Alberta has prompted employers to examine strategies to address this problem. When this project began, there were a number of unlicensed foreign qualified nurses in Alberta who had indicated a wish to meet requirements for licensure. Therefore, in order for employers of nurses to access this potential pool of nurses, it was relevant to examine the challenges they faced in attaining licensure to practice as registered nurses.

The Alberta Network of Immigrant Women was the sponsor agency for this project and received funding from the Status of Women Canada and the Human Rights, Citizenship and Multiculturalism Education Fund.

The purpose of this initiative was to address the needs of both unlicensed foreign qualified nurses and the larger community by identifying the challenges and solutions that would allow them to successfully attain licensure as nursing professionals in Alberta.

The project's objectives were to:

- develop a quantitative and qualitative demographic profile
- identify personal and institutional challenges that are encountered during the licensure process
- develop recommendations addressing the challenges
- disseminate the projects findings to a roundtable of stakeholders where strategies for implementation of the recommendations could be formulated.

Data collection consisted of the completion of a survey questionnaire by seventy-eight unlicensed nurses (return rate of 55%), conducting sixteen individual interviews throughout the province, and hosting four focus group discussions in Edmonton and Calgary. Stakeholder consultations and review of Nursing position statements, policies and procedures provided an understanding of a complex process. No directory of unlicensed foreign qualified nurses in Alberta exists, thus an accurate profile of this cohort was not possible. Participants were self-selected and

the profile is limited to those who participated. The survey questionnaire results provided limited insights related to the licensure process. The qualitative data from the interviews and focus groups did provide a broader and more in-depth portrayal of the nurses' experiences.

A description of the participants in the project reflected that the majority were female, were located mainly in Calgary or Edmonton and were employed (though underemployed). The greater percentage were either landed immigrants or Canadian citizens, largely from the Philippines. They were recent graduates of nursing programs (within the last eight to ten years) and the majority prepared at the baccalaureate level.

A summary of the challenges of the licensure process follows:

- information provided to the applicant was not always understood and was impacted by language, geography and cultural differences
- information of the total process needed to be sought from a variety of sources
- English language proficiency assessments delayed the process and presented a financial burden
- programs do not exist that are tailored to the needs of foreign qualified nurses e.g. nursing refresher programs, preparation for the national RN examination, transition to and the role of the nurse in the Canadian Health Care system
- costs associated with the licensure process limit some from participation
- applicants experienced personal stress while engaging in the process
- applicants required coaching, advocacy, family and peer support.

The following is an overview of the recommendations, linked to each challenge:

- development of courses and professional development activities that meet the needs of foreign qualified nurses
- development of clear, current, culturally appropriate information about the licensure process
- development of English language benchmarks and an assessment tool for the profession of Nursing
- implementation of strategies that provide financial, peer, mentor and advocacy support
- identification of systemic challenges and the implementation of strategies that promote valuing the strengths of this nurse group
- support for research endeavors that address the transition of foreign qualified nurses to the Canadian Health Care system.

Lastly, it is important to note that licensure acquisition is only one phase in the transition to the role of the nurse in the Canadian Health Care system that foreign qualified nurses face.

Table of Contents

	Page
Acknowledgements	2
Executive Summary	3
Table of Contents	5
Introduction	
Background	6
Project Goal	7
Rationale	8
Project Objectives	9
Methodology	
Project Steering Committee/Research Team	9
Methods	10
Participant Recruitment	10
Data Collection	10
Data Analysis	12
Survey Findings and Discussion	12
Themes from Individual and Focus Group Analysis	17
Issues Influencing Findings and Recommendations	23
Recommendations	26
Concluding Remarks	30
References	31
Appendices:	33
Appendix One – Steering Committee	
Appendix Two – Survey Questionnaire, Consents, Interview/Focus Group Invitation	
Appendix Three - Statistics	

Introduction

1. Background Information

a. Sponsoring Agency

The Alberta Network of Immigrant Women is the sponsor agency for this project. The organization was incorporated in 1986 under the Society's Act as a not-for-profit organization. The Network's mandate is to address the issues of immigrant women as identified by member organizations, and provide a forum for information and networking opportunities at the provincial level. Since its' inception, the Network has played a major role through the submission of briefs, panel presentations and research to identify the challenges immigrant women face, resulting in a community awareness of these issues.

In 1988, the Task Force on the Recognition of Foreign Qualifications was implemented in response to concerns expressed by a number of organizations that professional licensure and regulatory bodies were not adequately recognizing and addressing the education and experience of foreign qualified professionals. The task force conducted consultations with immigrant serving agencies. The Alberta Network of Immigrant Women was part of this consultation process. In 1992, the document "Bridging the Gap: A Report of the Task Force on the Recognition of Foreign Qualifications" was made available to the community and public at large. As a result of the report's recommendations, the International Qualification Assessment Service (IQAS) was established in Alberta.

In 1999, the Alberta Network of Immigrant Women secured funding for a study titled "Overqualified-Underemployed: Accessibility Barriers to Accreditation for Immigrant Women with Foreign Qualifications". This project's results indicated that barriers remained in spite of the establishment of IQAS, that they were systemic and intrinsic to the assessment procedures and policies of various regulatory bodies.

The Network was a partner in the project titled "Unlicensed International Medical Graduates Survey 2000: Report to IMG Program Working Group". This project's findings provided a profile of unlicensed international medical graduates residing in Alberta and identified issues they faced in acquisition of licensure to practice as physicians in Alberta. There are similarities in experiences in acquiring licensure for both physician and nurse and as such, this previous project provides background to the present one.

In summary, the Alberta Network of Immigrant Women was considered an appropriate agency to possess the background experience and knowledge to provide credible sponsorship for this project.

b. Licensing Body

The Alberta Association of Registered Nurses is the body legally responsible to license nurses in Alberta and are accountable to the public for the competence to practice. In order to legally practice nursing in Alberta, nurses are required by law to be registered or hold a valid permit.

To apply for registration (licensure), a foreign qualified nurse must have held registered nurse status in the country they completed their nursing education program. In addition, their program must be equivalent to that which was approved in Alberta, at the time of their graduation. They must provide evidence of nurse registration in any other jurisdiction they have been employed in the last five years. The final requirement is proof of fluency in speaking and understanding the English language, should their first language not be English. Assessment scores of written and spoken English must be current, that is assessed within the past two years.

2. Project Goal

The purpose of this initiative was to address the needs of both unlicensed foreign qualified nurses and the larger community by identifying the challenges and solutions that would allow them to successfully attain licensure as nursing professionals in Alberta. Through a process of a survey questionnaire, individual interviews, focus group and round table discussions, the Alberta Network of Immigrant Women aimed to address the accessibility issues that exist for immigrants interested in employment as nurses, for which they received qualifications and practical experience in a foreign country (project proposal, 2001).

3. Project Rationale

- a. The Alberta Association of Domestic Workers has approximately 300 members, of which 70 to 80% are unlicensed foreign qualified professional nurses. The intent of the majority of this group was to eventually seek employment as registered nurses. In fact, the recruitment to the role of Domestic Worker was marketed as a stepping stone to employment as a nurse.**
- b. Information from the Alberta Association of Domestic Workers and other sources indicates that there are no comprehensive studies or programs currently addressing the issues that exist for unlicensed foreign qualified professional nurses employed as nannies and domestics in Alberta, who wish to return to the nursing profession.**
- c. Informal information collected from this group indicates that they face multiple barriers, both personal and institutional, and are isolated with little job satisfaction in their present employment.**

- d. **Studies indicate that between 1981 and 1991 Canada received 300,000 immigrants with non-Canadian post secondary education and training and the national pool of foreign qualified immigrants is estimated to grow by at least 60,000 a year (OLA, 1993). Independent class immigrant projection to the 1997 Immigration Plan estimates the admittance of between 82,000 to 90,000 and this number is expected to remain stable in the coming years.**
- e. **Other studies indicate that the unemployment rate within this group of professionals to be four times higher than the national average (Windsor Women With Immigrant Women, 1998).**
- f. **Lack of available information on certification and licensing procedures is one of the greatest obstacles to receiving accreditation (Employment & Immigration, 1993);**
- g. **Canada has a responsibility for ensuring that appropriate mechanisms are in place to facilitate integration of immigrants into the labor force at levels appropriate to their competence and training (Huggins, 1997);**
- h. **The lack of recognition by employers of IQAS (International Qualifications Assessment Service) assessments is cited as a barrier by immigrant women (Overqualified, Underemployed Accessibility Barriers to Accreditation for Immigrant Women with Foreign Qualifications, 1999);**
- i. **Due to funding reductions in nursing programs throughout Alberta, there has been a serious and continuous reduction in the number of new graduates (1993 – 1026, 1998 – 578, 1999 – 475, 2000 - 544). In addition, 28% of the membership is over the age of 50, while 46% are between 36 and 50 years of age and only 25% are under the age of 35. This indicates a mature work force but also one that will require an increased number of younger nurses to replace those who are retiring. There are also fewer transfer registrations from other Canadian jurisdictions. Forty-five per cent of the employed nurses are working full time. There is a well documented present and future shortage of nurses (Alberta RN, 2001);**
- j. **The current shortage of registered nurses in most health regions in Alberta has prompted employers to examine a number of strategies to address this. While funding has increased to schools of nursing, there will be a time lag before the difference will be noted in the workforce. There are a number of unlicensed foreign qualified nurses in Alberta who have indicated a wish to meet the requirements for registration in Alberta. In order for employers of nurses to access this potential pool, it is necessary to examine the challenges and barriers they face in attaining licensure.**

4. Project Objectives

- a. The project was guided by a steering committee of stakeholders that supported and guided the work of the project, with representation from the Filipino Nurses' Association; Domestic Workers' Association; regulatory/licensing, educational and governmental bodies; and immigrant serving agencies (committee membership listed in Appendix One)**
- b. Development of a qualitative and quantitative demographic profile of unlicensed foreign qualified nurses in Alberta**
- c. Identification of personal and institutional challenges that are encountered during the process of licensure and re-entry into the nursing profession**
- d. Identification of recommendations addressing the challenges**
- e. Dissemination of the project results to a roundtable of stakeholders to develop strategies to address the project's recommendations**
- f. Development of an action plan that will include goals and timelines for the implementation of strategies that addressed the project recommendations arising from the roundtable**
- g. Network with analogous organizations addressing similar professional licensure access issues across Canada**

The project consists of two components. Project objectives a, b, c, and d (see above) have been addressed in this report (the research and analysis component) The final component, objectives e, g, and g, will be addressed at the stakeholder roundtable discussions (the institutional change and policy recommendations).

Methodology

Project Team and Steering Committee

The vice chairperson and the coordinator of the Alberta Network of Immigrant Women provided the initiation and motivation for the project. Both have been actively committed to the status of immigrant women from a variety of occupational backgrounds and thus brought an expertise to the process. Dr. Margaret Osborne was hired as the project's researcher and the remainder of the research team consisted of Catherine Henley, research assistant, Rebecca Brundin, data analyst, and Jacquie Stutt, typist. The Steering Committee of stakeholders actively contributed their knowledge and resources.

Methods

To address the complexity of the project's primary goal and to acquire an in-depth perspective, a variety of quantitative and qualitative methods were used to collect the data. This included a survey questionnaire, in-depth individual interviews, focus groups in both Edmonton and Calgary, and consultations with a number of individual and group stakeholders.

Participant Recruitment

The participant recruitment strategies involved a number of methods. The Filipino Nurses Association and the Domestic Workers Association sought permission from their members and provided lists of names and addresses for contact. Posters inviting participation were placed with immigrant women's agencies, ethno-cultural organizations and health care facilities. Electronic notices were placed with health care facilities. Participants and individual nurses were asked for their personal knowledge of potential participants.

Data Collection

A survey questionnaire was developed in consultation with the steering committee, licensed foreign qualified nurses, the researcher and researcher assistant. The questionnaire components addressed the various phases of the licensure process and professional work experience information.

Specifically, the survey questionnaire consisted of demographic data, questions on English language assessment experiences, employment history in Alberta, professional nursing qualifications in the country of origin, experiences in the various steps of application for licensure in Alberta, participation experience in the Nursing Refresher program, experience in preparation for and writing of the national Registered Nurse examination (Appendix Two). The questionnaire was accompanied by an invitation to participate in an individual interview and/or focus group discussion. To maintain confidentiality, participants were asked to return their completed questionnaire separately from their intent to participate in individual interviews and/or group discussions. Questionnaires were code numbered so that personal identification remained confidential.

Survey questionnaires were sent to 143 potential participants. Seventy-eight were returned, a return rate of approximately 55%.

A large number of the participants were unable to complete all sections of the questionnaire as few had completed all aspects of the licensure process. To compensate for this limitation, two additional focus groups of nurses who completed the entire process were held in Edmonton and Calgary were added to the data collection.

Individual interview of participants were in-depth, audio-recorded discussions of their experiences in the process of licensure. The interviews were guided by questions related to the stages of the licensure, and of their country of origin nursing education and work experiences. The interviews were approximately one to one and one-half hours in length. While the interviews were semi-structured, discussion evolved freely to capture as much and as rich data as possible. Participants signed a consent to participate (Appendix Two) and were assured confidentiality as well as the right to end the interview at any time.

Sixteen interviews were conducted in total, Edmonton (7), Calgary (6), Medicine Hat (1), Wetaskiwin (1) and Red Deer (1). Representation across the province was a focus of the project interviewer to include any possible regional differences.

Focus group discussion were conducted in Calgary and Edmonton, two in each city. The initial focus group participants were unlicensed nurses, who had completed the questionnaire and consented to be contacted for the discussion. The purpose of these focus group discussions was to present the initial analysis themes of the interviews for reaffirmation and to solicit suggestions for recommendations. The Edmonton focus group consisted of six participants, while the Calgary group consisted of eight participants. An explanation of the purpose of the focus group discussion and consent form completion preceded the discussion. Confidentiality of personal identification was assured.

A second set of focus group discussions was added to the data collection on the recommendation of the steering committee. The purpose of these additional focus groups was to gather data from foreign qualified nurses who had successfully acquired licensure about the entire experience. The Edmonton focus group consisted of twenty participants while the Calgary group consisted of twelve participants. Participants for the second set of focus groups were recruited through posters at various health care agencies, electronic messaging, through the Filipino Nurses Association and by personal contact. The various steps of the licensure process guided the direction of these discussions and suggestions for recommendations were sought. An explanation of the purpose of the discussion and consent form completion preceded these group discussions as well.

Stakeholder Consultations and Information Review

In order to obtain a comprehensive understanding of the complex nature of licensure, the project research team sought consultations from a variety of stakeholders. They were held with:

- a. the executive director, president and registrar of the Alberta Association of Registered Nurses
- b. personnel from the Nursing Refresher Program, Grant MacEwan College
- c. personnel from human resources, Calgary Health Region
- d. personnel from the Language and Vocational Assessment Center, Calgary Immigrant Aid

- e. personnel from employers (recruitment), Health Authorities
- f. representatives from the Filipino Nurses Association
- g. registration advisor, Registered Nurses Association of British Columbia (similar experiences with the licensure of foreign qualified nurses)

In addition, printed information was reviewed from the following documents:

- a. Alberta Association of Registered Nurses licensure application information for foreign qualified nurses
- b. TOEFL and TSE Information booklets
- c. Nursing Refresher Program Information, Grant MacEwan College, Edmonton
- d. Registered Nurses Association of British Columbia licensure application information for foreign qualified nurses
- e. Canadian Nurses Association position statements/documents: International Trade and Labour Mobility, Nursing Professional Regulatory Framework, the final report of the Canadian Nursing Advisory Committee (Our Health. Our Future. Creating Quality Workplaces for Canadian Nurses, 2002), Planning for the Future: Nursing Human Resources Projections 2002, Highlights of the 2001 Nursing Statistics and press release statements on the present and predicted nursing shortage
- f. ICN position statement on Ethical Nurse Recruitment
- g. Canadian Language Benchmarks Kits
- h. TOEFL and TSE application information
- i. Journal articles related to foreign qualified nurses

The consultations and review of information provided a comprehensive knowledge base that guided the data collection, analysis and recommendations.

Data Analysis

Thematic analysis methods were used to analyze individual interview and focus group data. Descriptive statistics were used for analysis of the quantitative data from the survey questionnaire.

Findings and Discussion

Survey Questionnaire Findings

The survey questionnaire components addressed all stages of the licensure process, selected demographic data, and work related experiences prior to coming to Alberta. Seventy-eight of a possible 143 returned the questionnaire. Many participants had not completed the entire licensure process, therefore they could not respond to all survey questions.

No directory of unlicensed foreign qualified nurses in Alberta exists, thus an accurate profile of this cohort is not possible. Participants were self-selected and the profile is limited to those who participated.

The analysis of the survey data provided insights related to selected demographic data, type of country of origin nursing educational program, the currency of nursing knowledge based on year of program completion, the costs of the licensure application and English assessment, and challenges in meeting the English language assessment requirements.

The survey questionnaire did provide the mechanism to access participants for the individual interviews and the focus group discussions.

Demographic profile selected characteristics are as follows and are illustrated by the accompanying tables and graphs:

- the majority were female (96%)
- approximately 45% were single/divorced, 55% were married/relationship
- the majority lived in either Calgary or Edmonton (85%)
- approximately 58% were landed immigrants and 24% Canadian citizens
- 88.5% were employed
- 82% were licensed as nurses in their country of origin, which is a requirement for licensure in Alberta
- 77% were prepared as nurses at the baccalaureate level
- the majority graduated between 1992 to 1999
- approximately 50 to 55% have immigrated since 1995
- 80% immigrated from the Philippines
- the majority of the participants rated the cost of the licensure application as fairly reasonable to reasonable, while the TOEFL costs were rated as more unreasonable

In review of this data, the following interpretative, descriptive comments are offered about the participant group. The gender composition of this cohort is consistent with the gender composition of the Canadian nursing profession as a whole. Calgary and Edmonton offer the greatest opportunity for employment and therefore it is reasonable to assume the majority of participants would seek living accommodation in these cities.

As 58% were landed immigrants and 25% were Canadian citizens, one can assume a commitment by these nurses to remain in Canada and contribute as citizens. Eighty-eight percent of the participants were employed (under-employed) suggesting they are not presenting a financial burden to Alberta and Canada.

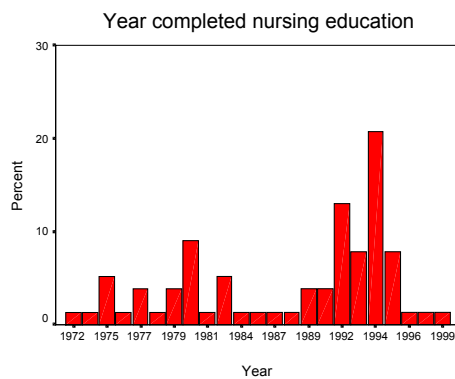
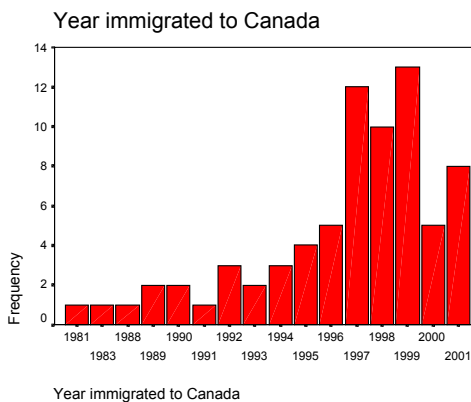
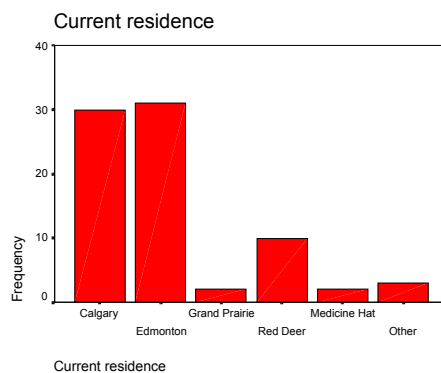
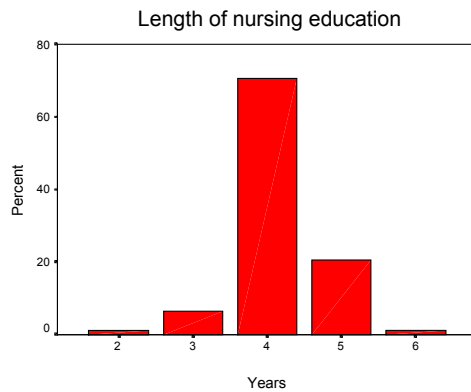
The majority are recent graduates, prepared at the baccalaureate level. Thus, their knowledge would be current and their education preparation level congruent with stance endorsed by the profession of Nursing in Canada for entry to practice.

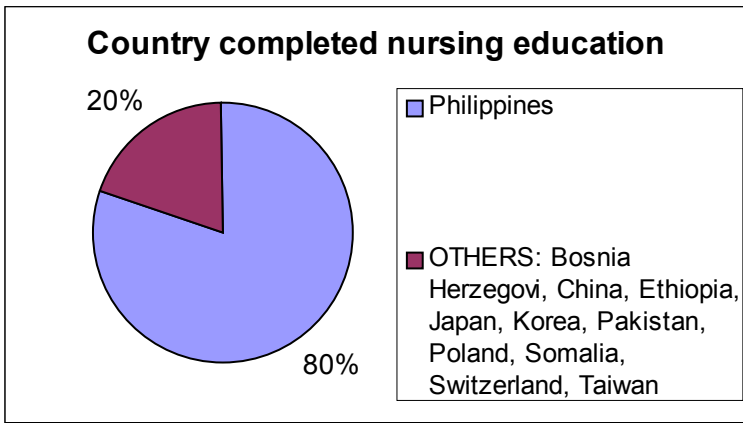
The largest group of foreign qualified nurses in this project is from the Philippines (Facts and Figures, Immigration Overview, 2000). This factor is congruent with immigration patterns where Filipinos have been either the third or fourth largest cohort to Canada in the last five to six years. In addition, the nursing programs in the Philippines are taught in English and are modeled on the American nursing curriculum models and therefore are similar with Canadian nursing curricula.

Participants rated the TOEFL (also TSE) costs as being unreasonable. The fees for the English language assessment are in US dollars (approximately \$200.00 Canadian) and many cited completing the evaluation several times.

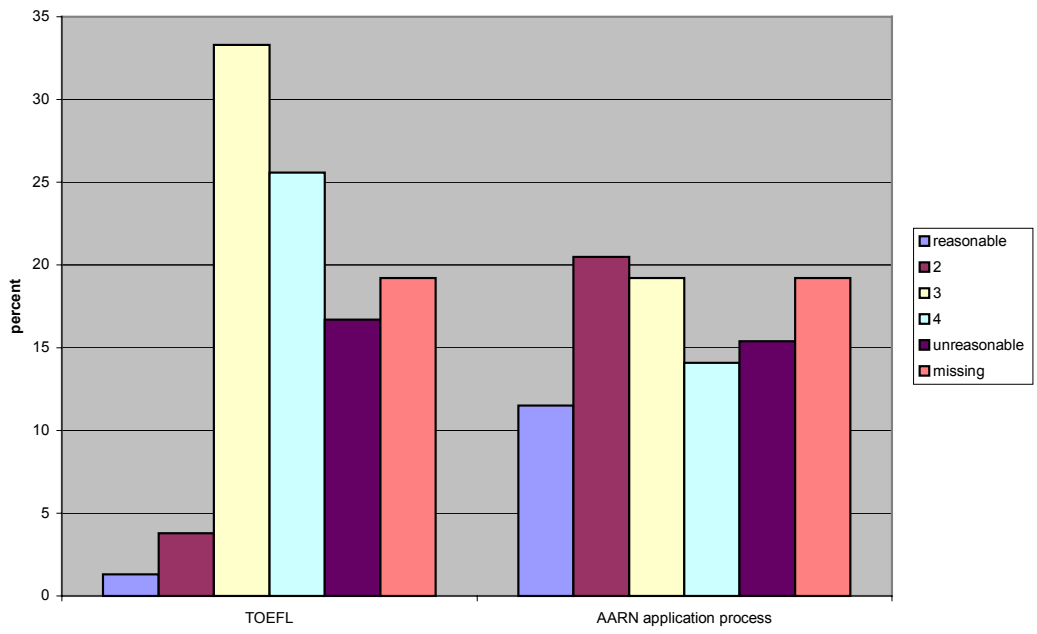
Unlicensed Foreign Qualified Nurses Survey Demographics

Variable		Frequency	Percent
Gender	Female	75	96.2
	Male	3	3.8
Marital Status	Single	31	39.7
	Separated/Divorced	2	2.6
	Married	41	52.6
	Living with Partner	2	2.6
	Widowed	2	2.6
Status in Canada	Landed Immigrant	45	57.7
	Canadian Citizen	19	24.4
	Live-in caregiver program	9	11.5
	Missing	5	
Currently Employed	Yes	69	88.5
	No	8	10.3
	Missing	1	1.3
Currently licensed to work in country of origin	Yes	64	82.1
	No	3	3.8
	Missing	11	14.1
Certificate awarded on completion of Nursing program	Nursing Diploma	17	21.8
	Nursing Degree	60	76.9
	Other	1	1.3
	total	78	100.0





Cost ratings of the English Proficiency exams & the AARN application process



Themes from Individual Interviews and Focus Group Discussions

Thematic analysis and reaffirmation from the participants elicited the following themes:

- Application process challenges
- English language assessment difficulties
- Knowledge of the role of the nurse in the Canadian Health Care System
- Financial impact of the process
- Personal impact of the process
- Factors that facilitated the process

A. Application Process Challenges

Challenge: Information provided to the applicant was not always understood and was impacted by language, geography and cultural differences

Challenge: Information of the total process needed to be sought from a variety of sources

Licensure application requirements consisted of a number of steps. Once the application form and fee were submitted, the next step was to secure one's nursing program transcript from the country of origin. The transcript was required to be sent directly from the school of nursing to the AARN (Alberta Association of Registered Nurses). In some situations, the transcript required translation, the cost of which is paid by the applicant.

Participants cited examples of the difficulty in securing their nursing transcript:

"my brother in my country needed to go on my behalf or it would not be attended to and money needed to be offered to officials to obtain the document, it is a common practice"

"the political situation in my country has changed, civil war was occurring, my documents were lost or destroyed or officials made it difficult for me as they saw me as one of the enemy group"

"my documents were sent directly to me and they needed to be sent to the AARN and so another set had to be obtained and they were very difficult and costly to get"

"the AARN only keeps our application on file for one year and then it is closed and documents destroyed, I don't understand this as in California they keep your documents for five years"

Participants were not always aware that translated documents were to be sent directly to the AARN by the translator, and as cited by one participant the process had to be repeated because the documents were sent to her. On another occasion, documents were lost which caused a sense of helplessness with the entire process. When direction was sought from the AARN, participants spoke to a variety of different registration personnel, which heightened the confusion.

Participants commented that some AARN registration personnel did seem to have an awareness of the difficulties the transcript requirement presented, leaving the applicant to feel a sense of frustration at the perceived lack of understanding.

Participants did comment that although the AARN has an 800 telephone number, face to face communication decreases misunderstanding when there is a language barrier. The AARN is located in Edmonton, thus for some geographical location of the licensure body was a considered a barrier.

The Nursing Refresher program is also located in Edmonton and while it is delivered by distance, lack of face to face communication also presented difficulties for those located outside of Edmonton.

Printed application information received from the AARN was thought to be clear and readily accessible. However, this same printed information directed them to seek information from other sources. This included agencies for the English language assessment, the Nursing Refresher program, and preparation for the RN examination. This additional direction heightened the confusion. When verbal clarification was sought from the AARN, applicants were largely referred back to the written material.

B. English Language Assessment

Challenge: English language proficiency assessments delayed the process and presented a financial burden

Until May 2001, TOEFL (Test of English as a Foreign Language) and TSE (Test of Spoken English) were the only accepted English language assessments accepted by the AARN. This policy has changed and a variety of assessments are available. The participants endorsed this change positively.

The majority of the participants had used the TOEFL and TSE as their English language assessment. None had experience with other assessment formats. Extreme frustration was experienced with these assessment formats and with the environment in which testing took place.

"I don't understand why we are taking tests that we have to pay for in American dollars (approximately \$200 CN) and I think the content in tests are about American information not Canadian"

"we never pass the first time we take the tests, someone is making a lot of money on us - I know I will not pass so I have already paid for a second writing - I also wonder why we all seem to get the same score on the TSE"

"when we take the TSE (spoken English), we are all in one room and have to listen to tape-recorded conversations and respond to the audio tape recorder - we are so close together that we can hear each other talk - it is so distracting that I can't concentrate"

Participants questioned the relationship of these assessments tests to the actual language required for nursing in the practice setting. They wondered how the rationale for the passing grade was established and by who.

The waiver of the English language proficiency was an option available to the participants, however they stated it was difficult to obtain clear information about the waiver process from the AARN. This proved frustrating to those nurses from the Philippines, who nursing program language was English. Several were working in health care environments where their proficiency in English was endorsed by their employers.

Meeting the English proficiency requirement was the initial challenge in the licensure process and many were delayed by it and impacted by the financial cost of the assessment.

C. Knowledge of the Role of the Nurse in the Canadian Health Care System

Challenge: Programs do not exist that are tailored to the needs of foreign qualified nurses e.g. Nursing Refresher programs, preparation for RN examination and transition to the Canadian Health Care System

Participants stated one challenge they faced was becoming knowledgeable of a different health care system and specifically the role of the nurse in the system. The AARN acknowledges this concern by recommending that foreign qualified nurses take the Nursing Refresher program as a strategy to gain this knowledge and practice experience.

The Nursing Refresher program at Grant MacEwan College has been developed for nurses who are educated in Canada and who have been absent from the workforce for five years or more. It is offered throughout the province in a distance education format. Practicum placements are sought in the nurse's locale. A preceptor supervises the experience.

While this strategy was thought to be a reasonable request, participants felt they had different learning needs than Canadian educated nurses. Professional communication required of the nurse was cited as a difference from their country of origin health care system. The expectations of the role of the nurse was another. Difficulty in writing examinations was also cited.

"I have trouble writing multiple choice examinations and I need extra help in understanding the questions. You know many foreign qualified nurses fail the RN national exam and I am worried about that"

A pre-requisite to the clinical course for the Nursing Refresher program is meeting the English Language assessment requirement. This slowed the process in completing the Nursing Refresher program. However, participants felt the personnel of the Nursing Refresher program to be very supportive in extending their assistance in to aid in meeting the challenges of the program.

Participants recommended adding components, both theory and practice, to the present Nursing Refresher program that would address their specific learning needs (other jurisdictions e.g. British Columbia and Ontario have developed and implemented such course and program additions).

Participants had sought other means of becoming knowledgeable of the Canadian Health Care system and expectations of the nurse's role. It speaks to the participant's commitment to practice as nurses in Canada.

"I found a job as unit clerk on a unit in the hospital - this really helped me understand the Canadian ways and now I have an idea what nurses do. I really want to nurse again and I am determined to find a way"

"Why don't they let us volunteer on the nursing units so we can become familiar with the setting - or even in some countries they let you work in a supervised role for a period of time?"

D. Financial Impact

<p>Challenge: Costs associated with the licensure process may eliminate some from participation</p>
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The financial burden of the licensure process was cited a major barrier. The cost to a foreign qualified nurse is at least \$3000.00

Costs may consist of:

- **the English language assessments (\$200 US for each assessment of TOEFL and TSE, costs for Canadian assessments are less and in Canadian dollars)**
- **AARN licensure application fee of \$214.00**
- **securing original transcript and possible cost of translation - varies with the applicant**
- **cost of Nursing Refresher program - approximately \$1700.00**
- **optional Preparation for RN Examination workshop of three days - Edmonton -\$260.00, Calgary - \$330.00 (offered by Grant MacEwan College)**
- **fee for RN Examination - \$275.00**
- **AARN registration fee - \$278.00**
- **additional expenses might include child care and lack of income during clinical practicum in Nursing Refresher program**

The licensure process often occurs at the same time as the costs required to secure landed immigrant status, which is approximately \$900.00. This adds to the stress of the financial burden for a person often employed in a low income salary range.

At the time of this project, employers in the health care system initiated a program of financial assistance for the Nursing Refresher program as a recruitment strategy. This incentive served as a motivation to further explore the licensure process by unlicensed foreign qualified nurses, when many had given up on the possibility of employment as a professional nurse. Participants were faced, for a second time, with the challenges of re-applying, securing documents which had been destroyed, meeting the English language proficiency requirement and enrolling in the Nursing Refresher program.

A proportion of unlicensed foreign qualified nurses enter Canada through the in-live-in care-giver program. The wages for this position are low and are often insufficient to meet the financial requirements of the licensure process. Many participants cited the cultural responsibility to send money to their relatives in their country of origin, This added to the financial burden. It should be noted that those without citizenship or landed immigrant status were not eligible for student loan assistance.

E. Personal Impact of the Process and Factors that Facilitated the Licensure

Challenge: Applicants experienced personal stress while engaging in the Process

Challenge: Applicants required coaching, advocacy, family and peer support

The impact of the licensure process affected the majority of the participants in a negative way, affecting their self-esteem and confidence in their ability as nurses. They questioned why their country of origin nursing knowledge and abilities were not recognized as assets for the Canadian Health Care system.

"I often feel like a burden or a great problem to those are in charge of the nurse registration - I get so discouraged because I don't think I will ever get my RN here in Canada - sometimes I cry and sometimes I get angry"

"I don't understand why they don't want us as nurses here in Canada, we are made to feel we are not as good as Canadian nurses - why is that? Our nursing programs are good programs and we are taught in English - it is not so different"

"I came to Canada to live and stay - we are not like some nurses who are just traveling and will leave - I will stay and I want to nurse here. We can help - help with language interpretation for patients and explain our ways"

Participants were asked comment on factors might facilitate the licensure process.

They cited that peer support from other foreign qualified nurses assisted in maintaining their motivation throughout the process. Peer support took the form of study groups during the Nursing Refresher program and in preparation for the RN examination. Peers were often the primary source of information on the all the various sources that needed to be contacted during the licensure process. Participants suggested a more formal advocacy service that could provide the most current information would be a benefit.

On-going and continuous encouragement from their families and friends, from the Nursing Refresher program personnel, from some employers (particularly nursing managers) and immigrant serving agency personnel was cited as major facilitating factor. This expression of advocacy and support conveyed a sense of respect for them as competent professionals with abilities and knowledge.

Issues Impacting the Project Findings and Recommendations

It is important to provide a contextual perspective for the project. The following factors provide that perspective. These factors impact the process, the findings and recommendations.

Participants

Participants were self-selected. A limitation of self-selection is that it may include only the participants who experienced concerns and would like to express them. It may not represent those whose experience was problem-free.

A directory or registry of unlicensed foreign qualified nurses was not available, therefore it is difficult to develop an accurate demographic profile of this cohort. The AARN reports on those who have successfully acquired licensure only. Both the AARN and the Canadian Nurses Association report an increase in the number of successfully licensed foreign qualified nurses over the past three years (Appendix Three). Confidentiality prevents the AARN from reporting specific data regarding those in the process of application.

Credibility of the Data Collected

Both quantitative and qualitative methods were used to collect the data. A survey questionnaire was developed by the researcher in consultation with the advisory committee of stakeholders and through the feedback of several foreign qualified nurses who reviewed it. Individual, semi-structured interviews (16) were conducted and focus groups (4) were completed with both unlicensed and licensed foreign educated nurses. Data were collected from nurses from a variety of countries as well as from locations across the province.

The survey questionnaire (quantitative data) provided limited insights related to the licensure process. Many of the participants who completed the questionnaire had not experienced the total licensure process, thus limiting their ability to answer the questions.

The qualitative data from the interviews and focus groups did provide a broader and more in-depth, rich portrayal of foreign qualified nurses' experiences. These data were congruent with the insights from the survey questionnaire. The experiences articulated in the individual interviews and focus groups were notably similar across the participants.

Other sources of information were sought through a number of consultations with a variety of stakeholders and through examination of print sources and documents. This process of triangulation of data sources, participant reaffirmation of the analysis, consultation with nurse experts provides for the criteria of credibility.

Regional Health Authority Recruitment Strategies

At the time this project was initiated, employers in the regional authorities in Alberta, offered financial incentives to recruit and retain nurses not presently in the work force. The nature of the financial incentive was payment of a portion of the tuition for the Nursing Refresher course, a mechanism to up-grade knowledge and experience. In addition, the nurses' union contract was settled with a significant increase in salary. Both factors motivated renewed interest on the part of foreign qualified nurses to complete requirements for licensure.

Choice of English Language Assessment Tools

Prior to May 2001, foreign educated nurses who spoke English as a second language were required to take the TOEFL and TSE assessments. These assessment tools do not assess the nurse's ability to converse in the context of the health care environment, but only their ability to understand and speak English. Many foreign qualified nurses have experienced dissatisfaction with these assessment formats. In May, the AARN policy changed and applicants were offered a choice of English language assessments, whose cost was in Canadian dollars. This change in policy was endorsed as a very positive strategy in the licensure process by applicants. The additional choices were: International English Language Testing System, Test of English for International Communication, Canadian Academic English Language Assessment and Michigan English Language Assessment Battery.

Role of Nursing Refresher Program

Enrollment in the Nursing Refresher program is a strategy suggested by the AARN for unlicensed foreign educated nurses to familiarize themselves with the knowledge, abilities and skills required of the nurse in the Canadian Health Care system in a supportive and supervised context. The purpose of the Nursing Refresher program is to provide an approved program of studies to Canadian educated nurses, who have been absent from nursing practice for a period of five years or more, to enable them to acquire currency in knowledge and skills expected of the nursing role. Nursing Refresher programs require program approval by the AARN.

It has been identified by a number of stakeholders (AARN, employers, personnel from the Nursing Refresher program, the Filipino Nurses Association) that there is a need to more effectively meet the learning needs of foreign educated nurses than the present Nursing Refresher program does. It has been suggested that additional components designed specifically for this cohort, be added to the present refresher program. The additions would not necessitate an entire program approval by the AARN.

The Canadian Nurses Association reports a significant failure rate of first time writers of the RN national examination. "Planning for the Future: Nursing Human

Resources Projections" report (2002) cites "the pass rates for first-time nurse candidates educated outside of Canada were 62% in 2001; 54% in 2000; 49% in 1999; and 45% in 1998. The pass rate for repeaters educated abroad is much lower: 39% in 2001; 35% in 2000; 33% in 1999; 27% in 1998. What this means is that sizeable proportions of immigrant nurses do not qualify as RNs and are hence, not available to practice as RNs". The data in the report does show that the total numbers qualifying as RNs has been increasing in the most recent years. Some jurisdictions in Canada offer RN preparation courses specifically developed for foreign qualified nurses (British Columbia and Ontario) and with reported success.

Live -In Care Giver Program

The Live -In Caregiver Program recruits foreign qualified nurses. Recognition is given for their nurse qualifications as appropriate for the role of live-in caregiver. The marketing of the this program leads some foreign qualified nurses to believe that their qualifications will be recognized once their contract ends in three years. Foreign qualified nurses are attracted to the possibility of coming to Canada through this route, particularly when employment as a nurse is limited in their country of origin. The nurse licensure process is not thoroughly investigated before coming to Canada.

In order to remain in Canada, they must apply for landed immigrant status at the end of the three year time period. This employment as a live-in caregiver effectively takes them out of the practice of nursing for three years and places them in an underemployed, low paying occupation. In summary, they are faced with the financial burden of paying for landed immigrant status, and the challenges of nurse licensure concurrently.

Establishment of Language Benchmarks for the Profession of Nursing

Language training consultants from Red River College, Manitoba have recently completed a project establishing the language benchmarks for the profession of Nursing (personal communication, July, 2002). The Centre for Canadian Language Benchmarks, Ottawa, has funded the project. The intent of the project was to use the Canadian Language Benchmark descriptors to determine the benchmark levels for speaking listening, reading, and writing required by the practicing nurse. The second phase of the project is to develop an English language assessment tool for foreign qualified nurses, whose first language is not English. This project will provide a reliable and credible resource for the profession of Nursing.

Planning for the Future. Nursing Human Resource Projections Report - 2002

This report was released by the Canadian Nurses Association and confirms that the nurse shortage is worsening. It is predicted by 2011 Canada will be short 78,000 and 113,00 by 2016 if spaces for nursing education are not increased and if 1,200 foreign nurses are not recruited annually.

Project Recommendations

The project recommendations are based on the following summary of the challenges that arise from the data analysis of the questionnaire survey, individual interviews, and focus group discussions.

Challenges of the Licensure Process:

- **Information provided to the applicant was not always understood, and was impacted by language, geography and cultural differences**
- **Information of the total process needed to be sought from a variety of different sources**
- **English language proficiency assessments delayed the process and presented a financial burden**
- **Programs do not exist that are tailored to the needs of foreign qualified nurses i.e. nursing refresher program, preparation for the RN examination, and transition to and the role of the nurse in the Canadian Health Care system**
- **Costs associated with the licensure process limit some from participation**
- **Applicants experienced personal stress while engaging in the licensure process**
- **Applicants required coaching, advocacy, family and peer support**

Project recommendations are presented in the following matrix table and grouped according to challenges, recommendation and who might address the recommendation. It is anticipated that potential strategies related to the recommendations will an outcome from the stakeholder roundtable discussions.

Challenge	Recommendation	Who
Professional Education	<ol style="list-style-type: none"> 1. Develop courses to meet the needs of foreign qualified nurses: <ol style="list-style-type: none"> a. ESL with a Nursing perspective b. ESL assessment preparation c. Nursing Refresher programs with ESL component d. Canadian Health Care Transition e. Role of the Nurse in Canadian Health Care System - clinical practice f. RN examination preparation 2. Financial support to develop such courses 	<p>Colleges and Universities with Nursing Programs Health Authorities AARN Provincial government</p>
Comprehensive, Clear, Culturally Appropriate Information	<ol style="list-style-type: none"> 1. Involve relevant organizations involved in the licensure process to develop clear, current and comprehensive information about the process, requirements and providers of services specifically: <ol style="list-style-type: none"> (a) current licensure information (b) English language assessment information (c) Nursing Refresher program (d) RN examination preparation and writing 	<p>AARN Educational Institutions Providers of English Language Assessment Immigrant Serving Agencies IQAS</p>

	<ol style="list-style-type: none"> 2. Develop user-friendly accessibility strategies for information e.g. translation, web applications 3. Make information of the process available prior to immigration through relevant service providers 	
<p>English as a Second Language Assessment and Establishment of Standards</p>	<ol style="list-style-type: none"> 1. Develop and implement English language benchmarks and an assessment tool for the profession of Nursing 2. Evaluate the current English language assessment tools used for appropriateness for nursing practice and cost 3. Implement user-friendly strategies for information access e.g. translation to other languages and web application 	<p>AARN Canadian Nurses Association Educational Institutions</p>
<p>Support to Applicant</p>	<ol style="list-style-type: none"> 1. Establish loans, scholarships, incentives 2. Establish peer and mentor support during and following licensure process 3. Implement advocacy strategies aimed at both the individual and group levels 	<p>AARN Filipino Nurses Association Educational Institutions Immigrant Serving Agencies Provincial government</p>

	<ol style="list-style-type: none"> 4. Establish culturally sensitive and user friendly systems for the licensure process 5. Develop prior learning assessment tools 6. Involve representation of foreign qualified nurses in the evaluation of the licensure procedure and development of possible new educational courses 	
Systemic Challenges	<ol style="list-style-type: none"> 1. Identify cultural barriers within the licensing procedures and practices 2. Consider strategies that support the recruitment and retention of foreign qualified nurses 3. Consider strategies that value and promote the strengths/assets of foreign qualified nurses to the Canadian Health Care System i.e. languages, healing systems 	Health Authorities AARN Colleges and Universities with Nursing Programs
Research	<ol style="list-style-type: none"> 1. Support research endeavors that address the experiences and issues related to foreign qualified nurses in the Canadian Health Care system 	Educational institutions Health Authorities AARN Nursing Interest Groups Provincial government

Concluding Remarks

The purpose of this project was to identify the challenges faced by unlicensed foreign qualified nurses in seeking to acquire licensure to practice as registered nurses in Alberta. It is also the intent of the initiative to seek systems solutions and possible changes in the broader context to assist facilitating this process.

At this present time, it is particularly relevant to explore and act on this issue as one strategy in addressing the present and future shortage of nurses in Alberta, as well as assisting in creating a quality workplace for nurses.

The report "Our Health, Our Future. Creating Quality Workplaces for Canadian Nurses" (Canadian Nursing Advisory Committee Report, 2002) cites as one recommendation:

"federal, provincial and territorial governments should work with professional associations, employers, unions and educators to fund and implement a broad national campaign to attract and a diverse workforce (based on gender, culture and ethnicity) in all nursing roles and at all levels".

This recommendation suggests the importance and valuing of a diverse workforce in a country whose citizens come from a multitude of ethnocultural groups and races. It provides endorsement for the implementation of this project's recommendations. In addition, it gives incentive to the stakeholders at the roundtable discussions to commit to the development of strategies which will address both policy change and the project recommendations

In conclusion, it is particularly important to note that licensure acquisition is only one phase for the foreign qualified nurse's transition to the Canadian Health Care system. This initiative does not address the further challenges a nurse faces in adaptation to expectations of the role in a system different than her/his country of origin. The nursing literature is beginning to examine issues of systemic discrimination which makes more visible the need for critical analysis of values, policies and processes in the workplace (Omeri & Atkins, 2002; Hagey, Choudhry, Guruge, Turriffin, Collins, Lee, 2001; Ogilvie, et al, 2000). The literature also conveys that foreign qualified nurses provide a valuable contribution to the health care environment in the form of their language fluency and knowledge of different healing systems.

As a final comment, it has been a privilege for the researcher to learn of the experiences of the participants in the project. They are dedicated nurses, who are very committed to the possibility of caring for clients and families, with health and illness concerns in Alberta.

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Appendix One
Steering Committee

Steering Committee

Role of the committee:

- Work with the Network to develop a questionnaire that will be used to build the profile of the foreign trained nurse in Alberta
- Based on information collected from the questionnaire, engage in dialogue to identify the potential barriers and solutions specific to their communities or institutions
- Develop strategies to recommend policy change
- Organize the provincial roundtable discussion
- Follow through with ongoing dialogue and consultation

Committee Membership of Stakeholders:

Ms. Sybil Braganza	Calgary Health Region - Diversity Services
Ms. Susan Coombes	Human Rights and Citizenship Branch, Alberta Community Development
Ms. Alison Dobbie	Undergraduate Nursing, Mount Royal College
Dr. Dorothy Eiserman	Nursing Program, Grande Prairie College
Ms. Carol Hutching	Status of Women Canada
Ms. Delaine Johnson	Calgary Health Region - Diversity Services
Ms. Rebecca Levant	Status of Women Canada
Dr. Linda Ogilvie	Faculty of Nursing, University of Alberta
Ms. Tessie Olivia	Filipino Nurses Association
Dr. Sarla Sethi	Faculty of Nursing, University of Calgary
Ms. Kamal Sehgal	Alberta Network of Immigrant Women
Ms. Barbara Smith	Making Changes Employment Association of Alberta
Ms. Linda Thomson	Alberta Network of Immigrant Women
Dr. Margaret Williams	Faculty of Social Work, University of Calgary
Dr. Margaret Osborne	Project Researcher

Appendix Two

**Survey Questionnaire
Sample Consents
Interview and Focus Group Invitation**

Alberta Network of Immigrant Women
303, 229 – 11th Avenue S.E., Calgary, Alberta T2G OY1
Tel/Fax: (403) 262-8040 * E-mail: network.aaisa@home.com

Dear Participant:

Project: Unlicensed Foreign Qualified Nurses Project 2001

Thank you for showing an interest in participating in this project conducted by the Alberta Network of Immigrant Women, funded by the Status of Women Canada and the Alberta Human Right and Citizenship Commission.

The purpose of the project is to identify the challenges and barriers that foreign qualified nurses face in the process of obtaining registration (license) to practice as a nurse in Alberta, and to make recommendations regarding the process.

The project is composed of three phases:

- **phase one** is a mail survey questionnaire that will provide a profile of unlicensed foreign qualified nurses. We are aiming for 100 participants
- **phase two** is an individual interview of approximately one hour in length with 15 of the 100 participants who completed the survey at a time and place convenient to them. The interview will provide information not covered in the survey.
- **phase three** will be two focus group discussions, one in Edmonton and one in Calgary; each focus group will consist of 8 to 10 of the survey participants who wish to participate in a group discussion.

You may participate in phase one only – the mail survey, or if you wish to – phase two and/or phase three.

Please find attached the survey questionnaire. It will take you approximately 20 minutes to complete. This survey will ask general questions about your background and training. More explanation accompanies the survey. Please return it in the postage paid envelope.

If you have any questions about the survey questionnaire, you may contact me at (403) 240-1516 or e-mail: meosborn@telusplanet.net.

If you would be willing to participate in phase two and/or three of the project, please fill out the attached card and return it **separately** from the survey in the post-paid envelope.

Thank you so much for your participation.

Margaret Osborne RN, PhD
Researcher for the Project

Unlicensed Foreign Qualified Nurse Survey

Explanation

Thank you for your willingness to participate in this survey. The information obtained from the surveys will provide information for educational institutions, nursing practice settings, policy makers and registering bodies. We hope to better understand the challenges and barriers faced by unlicensed foreign qualified nurses who wish to meet the requirements for nursing registration in Alberta. The project is being conducted by the Alberta Network of Immigrant Women, funded by the Status of Women Canada and the Alberta Human Rights and Citizenship Commission.

The survey will take you approximately 20 minutes to complete.

The researcher will maintain confidentiality for all participants completing the survey. All surveys will have a code number only; no names will be used. While we would like you to complete all questions, you may wish to leave some questions unanswered and that is fine. Participation is voluntary.

It is important to note that completing the survey will not guarantee an increase in your personal opportunity to obtain registration (license) to practice nursing in Alberta. However, completing the survey will greatly assist in helping to identify challenges/barriers faced by unlicensed foreign qualified nurses wishing to work as a nurse.

Your completed and returned survey indicates your consent to participate.

Please return the survey in the postage paid envelope to the researcher.

Thank you so very much for participating in this very important project. Your quick response is highly appreciated .

Mail out number

Unlicensed Foreign Qualified Nurses Survey

Initially, we would like some general information from you to help us learn more about the backgrounds of unlicensed qualified nurses in Alberta. This section includes demographic, immigration and employment experience(s).

A. Demographic Information

1. What is your gender? Male Female
2. When were you born? 19_____
3. What is your marital status? Single Separated/Divorced
 Married Living with a partner
4. Where are you currently living? Calgary Edmonton
 Grand Prairie Red Deer Lethbridge
 Medicine Hat Other (please specify) _____
5. How many years have you lived in Alberta? _____
6. What is the first language you spoke at home? English French
 Other (please specify) _____
7. What other languages do you speak? _____
8. What other languages do you write? _____
9. If your first language is not English, have you taken ESL training?
 Yes No
10. Have you taken the TOEFL? Yes No Score _____ Year _____
11. Have you taken the TSE? Yes No Score _____ Year _____
12. Were you exempt from taking the TOEFL test? Yes No
13. Were you exempt from taking the TSE test? Yes No

14. How would you rate the cost of the TOEFL? (Circle your choice)

Reasonable 1 2 3 4 5 Unreasonable

15. How would you rate the cost of the TOEFL and the TSE? (Circle your choice)

Reasonable 1 2 3 4 5 Unreasonable

B. Immigration

16. What is your country of origin? _____

17. What year did you immigrate to Canada? _____

18. What were your main reason(s) for immigrating to Canada? _____

19. What is your current status in Canada? Landed Immigrant

Refugee Canadian citizen

C. Employment in Alberta

20. Have you been employed since coming to Alberta? Yes No

If yes, please specify the types of employment (both health care and non-health care) _____

21. Are you currently employed? Yes No

If yes, do you work:

Full Time Part time Occasionally

22. How many years did you work as a nurse prior to coming to Canada?

_____Years

D. Professional Nursing Qualifications from your Country of Origin

This section is about your nursing education and nursing experiences in your country.

23. In your country, is there a licensing process to complete before being employed as a nurse? Yes No

If yes, are you currently licensed to work in your own country?

- Yes No

24. In what year did you complete your nursing education program? _____

25. In what country did you take your nursing education program? _____

26. Where was your nursing education taught? Hospital College
 University Other (specify) _____

27. How long was your nursing education program? _____ Years

28. What certificate was awarded to you, in your country, when you completed your program?

- Nursing Diploma Nursing Degree Other (specify) _____

E. Registration to Practice Nursing in Alberta

The Alberta Association of Registered Nurses is responsible for assessing foreign nurses' credentials. There are several steps involved:

- 1) application and credentials evaluation
- 2) completion of additional requirements in knowledge and skills necessary to nurse in Alberta (if applicable)
- 3) writing and passing the national nursing examination.

We are interested in your experiences in trying to complete these steps.

Application and Credentials Evaluation Procedure

29. Have you applied for nursing registration/licensing in Alberta?

Yes No

30. Did you apply more than one time? Yes No

If yes, please specify the reasons _____

31. Were you able to obtain your credentials (papers) from the country in which you received your nurse's education? Yes No

32. Were you able to get the necessary information from the Alberta Association of Registered Nurses to help you apply for registration to nurse in Alberta? Yes No

33. How would you rate the written information sent to you about the application procedure? (Circle your choice)

Clear 1 2 3 4 5 Unclear

34. How would you rate the cost of the application process? (Circle your choice)

Reasonable 1 2 3 4 5 Unreasonable

Meeting the Requirements for Nursing in Alberta

Questions 35 and 36 should only be answered if it were determined that you had a requirement to complete before you could become registered.

35. Would you be willing to meet the requirements for registration if courses and clinical experiences would be available to you? Yes No

36. Would you be willing to take time from your current job to undertake a period of assessment of your practice without guarantee of nursing registration or being paid?

Yes No Unsure

- (a) If Yes, how long would you be able to take time off for this assessment?

1 month 2 months

- (b) Would you be able to take an assessment full time?

Yes No Unsure

- (c) Would you be able to take an assessment part time?

Yes No Unsure

- (d) Would you be willing to relocate for the assessment?

Yes No Unsure

- (e) If yes, would you require financial support?

Yes No Unsure

Writing the Canadian National Nursing Examination

**Questions 37 to 41 should be answered
only if you have written the Canadian
National Nursing Examination**

37. Have you written the Canadian National Nursing Examination more than once? Yes No

If yes, please indicate the number of times you took the examination _____

38. How would you rate the fee charged to write the examination?
(Circle your choice)

Reasonable 1 2 3 4 5 Unreasonable

39. How would you rate the materials sent to prepare you for the **content** of the national nursing examination? (Circle your choice)

Helpful 1 2 3 4 5 Not helpful

40. How would you rate the materials sent to help you prepare for the **multiple choice format** of the national nursing examination?
(Circle your choice)

Helpful 1 2 3 4 5 Not helpful

41. How would you rate the instructions for writing the national nursing examination? (Circle your choice)

Clear 1 2 3 4 5 Unclear

42. Do you wish to add comments that may **not** have been addressed in regarding challenges/barriers you may have encountered?

F. Areas of Practice Experience

43. Many foreign-trained nurses come to Alberta with knowledge and practice experience which could be very valuable to the health care system. Please indicate what areas that you have such experience in.

- | | |
|--|---|
| <input type="checkbox"/> Medical Nursing | <input type="checkbox"/> Surgical Nursing |
| <input type="checkbox"/> Maternity Nursing | <input type="checkbox"/> Mental Health and Psychiatry |
| <input type="checkbox"/> Neonatal Intensive Care | <input type="checkbox"/> Intensive Care |
| <input type="checkbox"/> Cardiac Intensive Care | <input type="checkbox"/> Surgical Suite (OR) |
| <input type="checkbox"/> Nursing the Elderly | <input type="checkbox"/> Rehabilitation |
| <input type="checkbox"/> Home Care Nursing | <input type="checkbox"/> Community Nursing |
| <input type="checkbox"/> Gerontology | <input type="checkbox"/> Child Health/Pediatric Nursing |
| <input type="checkbox"/> Other (specify) _____ | |

G. General

44. How did you hear about this survey/project? Newspaper Radio
 Ethno-cultural Organization Friend Other

Instructions

Please return the completed survey in the addressed, prepaid postage envelope to:

Dr. Margaret Osborne
#106, 47 Glamis Drive S.W.
Calgary, Alberta T3E 6S2

If you wish to participate in Phase 2 – The interview and/or Phase 3 – the Focus Group, please completed the enclosed card and return it **separately** in the prepaid postage small envelope.

Thank you very much for taking the time to complete the survey.

If you know of another unlicensed foreign qualified nurse who might be interested in completing this survey, please ask them to call:

Alberta Network of Immigrant Women
Phone/Fax – (403) 262-8040

Unlicensed Foreign Qualified Nurses Project

Sponsor – Alberta Network of Immigrant Women

Phase Two of the project involves an individual, face-to-face interview of approximately one hour, at a time and place convenient to the participant. The purpose of the interview is further elaboration and clarification of data obtained in the survey questionnaire. All information is confidential. Interviews will take place during the month of June. If you are interested in participating in the interviews, please complete the following.

The researcher will then contact you to arrange an appointment.

If you would like further information about the interview before making a decision, contact Margaret Osborne (the researcher) at (403) 240-1516 or e-mail: meosborn@telusplanet.net.

Name: _____

Address: _____

Phone: _____ E-Mail: _____

Phase Three of the project involves focus group discussions, one in Edmonton and one in Calgary, currently planned for July.

I am interested in participating in the group discussion.

Yes _____ **No** _____

Participant Consent Form

Title: Unlicensed Foreign Qualified Nurse Project Phase Two – Interview

Researcher: Margaret Osborne RN, PhD
Phone/Fax - 403 240 1516

Sponsor: Alberta Network of Immigrant Women
Funders: Status of Women Canada, Alberta Human Rights and Citizenship

This consent form is for Phase Two of the Unlicensed Foreign Qualified Nurse Project. It should give you a basic idea of what your participation will involve. If you would like more detail about this information, please feel free to ask.

The purpose of the interview is to further elaborate and clarify data obtained from the survey questionnaire that you have completed. In doing this, we hope to better understand the challenges and barriers faced by unlicensed foreign qualified nurses who wish to meet the requirements for nursing registration in Alberta.

The interview will take place at a time and location convenient to you. It will be approximately one hour in length and it will be tape recorded to keep an accurate account of the information. All information is confidential. Your name will not be used, a code number will be assigned to you. Only the research team will have access to the interview information. All audio tapes will be erased and transcription of the interviews will be destroyed on the completion of the published project report. Participation is voluntary and there are no known risk to you. You are free to withdraw from participation at any time.

Your signature on this form indicates that you have understood to your satisfaction the information regarding your participation in phase two of this project and you agree to participate. You will be given a copy of this consent form if you wish.

Participant Signature _____ Date _____

Participant Name _____

Researcher/Delegate Signature _____ Date _____

Researcher/Delegate Name _____

Participant Consent Form

Title: Unlicensed Foreign Qualified Nurse Project
Phase Two – Focus Group Discussion

Researcher: Margaret Osborne RN, PhD
Phone/Fax - 604 221 8106

Sponsor: Alberta Network of Immigrant Women
Funders: Status of Women Canada, Alberta Human Rights and Citizenship

This consent form is for Phase Three of the Unlicensed Foreign Qualified Nurse Project. It should give you a basic idea of what your participation will involve. If you would like more detail about this information, please feel free to ask.

The purpose of the focus group discussion is to further elaborate and clarify data obtained the survey questionnaires that have been completed. In doing this, we hope to better understand the challenges and barriers faced by unlicensed foreign qualified nurses who wish to meet the requirements for nursing registration in Alberta.

The discussion will take place at a time and location convenient to most group participants. It will be approximately 1 1/2 hours in length and it will be tape recorded to keep an accurate account of the information. All information is confidential. Your name will not be used. Only the research team will have access to the group discussion information. All audio tapes will be erased and transcription of the discussion will be destroyed on the completion of the published project report. Participation is voluntary and there are no known risk to you. You are free to withdraw from participation at any time.

Your signature on this form indicates that you have understood to your satisfaction the information regarding your participation in phase three of this project and you agree to participate. You will be given a copy of this consent form if you wish.

Participant Signature _____ Date _____

Participant Name _____

Researcher/Delegate Signature _____ Date _____

Researcher/Delegate Name _____

Appendix Three Statistics

Initial Nurse Registrations	1999 Membership Year	2000 Membership Year	2001 Membership Year
Non-Canadian	51	72	141
Non- Canadian as % of total initial registrants	5.50%	7.45%	11.20%
Total Initial Registrations	914	966	1,249

Adapted Table – Initial Nurse Registrations for Years 1999, 2000, 2001 in Alberta

Source – Alberta Association of Registered Nurses

Year	Alberta	Canada
1988	147	961
1989	167	1303
1990	174	1680
1991	248	2289
1992	101	1589
1993	98	1205
1994	54	929
1995	45	875
1996	38	653
1997	90	654
1998	56	764
1999	51	653
2000	72	1072

Number of New RN Registrants From Foreign Countries by Examination and Endorsement - Alberta and Canada

Source - Planning for the Future: Nursing Human Resource Projections, Canadian Nurses Association