



Canadian Association
of Schools of Nursing

Association canadienne des
écoles de sciences infirmières

Position Statement

Title: Education of Registered Nurses in Canada

Background:

Nursing education is vital to ensuring that new and experienced registered nurses (RNs) have the competencies they need to improve the health of Canadians.¹ Changes in science, technology, client activism, the health system, demographics, and the nature of practice settings have transformed health care and nursing practice. These changes have enormous implications for nursing education.²

As a crucial member of the interprofessional health-care team, the RN builds on scientific knowledge and practice preparation while working with colleagues to provide safe client-centred quality care. In so doing, RNs develop, integrate, and evaluate new knowledge and best-care practices. RNs also participate in the design and implementation of responsive, accessible, high-quality health-care systems that ensure the best outcomes for Canadians in an increasingly complex environment.

CASN Position on the Education of Registered Nurses

Given the critical contribution of the RN in the health-care system, the Canadian Association of Schools of Nursing (CASN) believes that:

- Nursing education should be:
 - Baccalaureate level³ for the initial preparation of RNs to practise⁴ as generalists;
 - Master's level⁵ for the preparation to advanced level of clinical nursing practice⁶, to nursing education, administration, research, and policy, that fully integrate the scholarship of nursing;

¹ (Canadian Association of Schools of Nursing [CASN], 2010)

² (Benner et al. 2010, p.1)

³ (CASN, 2006)

⁴ One entry-to-practice program at the master's level exists in Quebec.

⁵ (CASN, 2010a)

⁶ (Canadian Nurses Association [CNA], 2007; 2008)

- Doctoral level⁷ for the preparation of RNs to conduct nursing knowledge development and application activities in clinical and academic milieus. Some will pursue further education at the post-doctoral level.
- Quality clinical education is a vital and required component of a nurse's initial and advanced practice preparation.⁸
- Strong and effective partnerships among RNs in education, clinical practice, research, policy and administration are required to support nursing education programs.⁹
- Educational and health institutions have a shared responsibility for ensuring that RNs receive high-quality education with stimulating learning environments. These institutions are supported by governments and the public.
- CASN accreditation of nursing education programs¹⁰ promotes standards of excellence and assures Canadians of the quality of nursing education.¹¹ Approval of nursing education programs, by provincial and territorial regulatory organizations¹², or combined with CASN accreditation, ensures that the programs meet standards for education of safe, competent and ethical practitioners.

Rational

Health care in Canada faces enormous challenges, including globalization and the associated challenge of pandemics, growing health disparities between socioeconomic and cultural groups, increasingly sophisticated health-care technology, the introduction of electronic information systems, and primary health-care reform.¹³ Research demonstrates that patient safety and outcomes are dependent on the educational preparation of RNs.¹⁴ Better client outcomes also mean cost savings for the health system.¹⁵

Funding is being invested into health systems to address these challenges and achieve better health outcomes. For example, Health Canada is funding the Canadian Interprofessional Health Collaborative (CIHC), a national hub for interprofessional education, collaboration in health-care practice and client-centred care.¹⁶ Allied health professions offer a spectrum of baccalaureate, masters and doctoral level educational programs. RN education that is in line with other health professions facilitates teamwork.

Baccalaureate programs create opportunities for interdisciplinary learning and common clinical practice experiences. In Australia, Iceland, Ireland, and New Zealand – like in all

⁷ (CASN, 2011)

⁸ (CASN, 2005)

⁹ (CNA, 2009, p. 3)

¹⁰ CASN currently offers an accreditation program for undergraduate nursing programs; provincial regulatory organizations approves of nurse practitioner programs.

¹¹ (CASN, 2011)

¹² This does not apply to Quebec.

¹³ (CASN, 2010b, p. 4)

¹⁴ (Ibid, p.4)

¹⁵ (CNA, 2009)

¹⁶ (CIHC, 2010)

Canadian jurisdictions, except Quebec¹⁷ – new RNs must have a baccalaureate degree to practise.¹⁸

Graduate nursing education ensures a sufficient supply of nurse educators, policy-makers and administrators to sustain the delivery of high-quality health services and nursing education. Moreover, master's and doctoral programs foster research and evidence-informed solutions to advance best practices and optimize client and health-system outcomes for Canadians.¹⁹

Quality clinical education focuses on students' development of clinical reasoning and judgment, exposure to Canadian health issues, and the honing of critical analysis and communication skills. Such high-level skills require an education that is based on real practice situations that may be supported by the use of simulations.²⁰

A key to effective nursing education is nurses teaching nurses, whether as faculty, preceptors or mentors.²¹ Partnerships between academic and practice settings come from connecting classroom and clinical through integrative teaching.²² Nursing programs require appropriate resources for classroom, distance, online, laboratory, and practice learning, as well as emerging education modalities.

Provincial and territorial RN regulatory bodies approve Canadian RN education programs¹² as part of their mandate to protect the public, establish and enforce standards of nursing practice and assure the quality of practice and continuing competence of RNs.

Accreditation of nursing programs is becoming an international requirement to ensure standard qualifications and quality practice preparation. According to WHO²³, nursing schools should be an integrated part of higher education institutions that meet internal standards, recognized accreditation, and/or governing body requirements.

Approved by the CASN Board of Directors: May 1st 2011

Replaces:

CNA and CASN, *Promoting Continuing Competence for Registered Nurses*, 2004.

CNA and CASN, *Educational Preparation for Entry to Practice*, 2004.

CNA and CASN, *Flexible Delivery of Nursing Education Programs*, 2004.

CNA and CASN, *Doctoral Preparation in Nursing*, 2003.

¹⁷ The Yukon Territories have no RN education programs.

¹⁸ (CNA, 2010)

¹⁹ (CASN/CNA, 2009)

²⁰ (Benner, 2010, p. 163)

²¹ (CNA, 2009)

²² (Benner, 2010)

²³ (WHO, 2009, p.22)

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