



Human Resources Development Canada

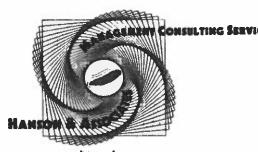
Nursing Human Resources Demand and Options for Supply

Phase Two

Nursing Program Feasibility Study

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a division of Chrysolis Human Davidonment Inc.

MALLOCH GRAHAM + ASSOCIATES MANAGEMENT CONSULTANTS **Phase Two**

Nursing Program Feasibility Study

Study funded by
Human Resources Development Canada
and produced in partnership with
Yukon College
under the guidance of the
President's Committee for Health Programming

May 2001

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- Stu Mackay, Yukon College
- Patricia McGarr, Yukon Registered Nurses Association
- Fran Curran, Department of Health and Social Services, Yukon Government
- Kim Diamond, Yukon College
- Elvira Knaack, Whitehorse General Hospital
- Carol Leef, Advanced Education, Department of Education, Yukon Government

We would also like to acknowledge the funding support of Human Resources Development Canada and the leadership demonstrated by Yukon College in initiating the work.

1.0 Introduction

This report stems from a study commissioned by the Yukon College President's Committee for Health Programming (Health PCOP). The purpose of the study was two-fold:

- To clearly define the labour-market need in the Yukon for Registered Nurses (RNs) and Licensed Practical Nurses (LPNs); and
- To determine the feasibility and extent to which local education should be provided to potential students.

As a result of a public tender late in the year 2000, a contract to carry out the study was awarded to a joint venture formed by Hanson and Associates and Malloch Graham + Associates Management Consultants.

The conclusion reached in Phase 1 of the study was that significant numbers of nurses will be required in the future in the Yukon to fill vacancies created by retirements, resignations and new positions being established. As the result of that finding, the study proceeded in Phase 2 to determine the feasibility of local nursing educational options.

2.0 Process

Phase 2 of the study was the assessment of the feasibility of a variety of local nursing educational options. Guided by a Steering Committee, which is a sub-committee of the Health PCOP, the consultants examined the feasibility of various nursing education options. We used information from the literature and document review carried out in Phase 1. In addition, we met with and interviewed the following groups and individuals:

- Yukon College Developmental Studies students
- Yukon College LPN program staff
- High Schools focus groups
- Yukon Registered Nurses Association staff
- Representatives of Yukon College Bachelor of Social Work Program and Yukon Native Teacher Education Program
- Yukon Government departments of Education and Health & Social Services

We also interviewed by telephone Yukon nursing students currently studying outside the territory, and practising LPNs in the Yukon.

We collected nursing program information from the following university and college programs:

- Aurora College Yellowknife, NWT
- Nunavut College Iqaluit, Nunavut
- University of British Columbia
- British Columbia Collaborative Nursing Program (14 community colleges and two university/colleges along with the University of Victoria)
- University of Victoria
- University of Calgary
- University of Alberta
- Athabasca University
- Okanagan University College
- Camosun College
- Mount Royal College
- University of Northern British Columbia

Nursing professional associations (RN) in British Columbia and Alberta also provided information.

We canvassed public interest and solicited comments through advertising in the following media:

- Yukon News
- Whitehorse Star
- CKRW radio
- CHON-FM radio
- WHTV rolling ads

Response from the ads was high and we were able to gather additional information and views from approximately 100 interested individuals.

Of all the potential students surveyed through various means, we estimate that approximately 10% were First Nation people. Although we did not ask the question, some respondents identified themselves as First Nation people.

3.0 Success Factors

Mentorship and preceptorship: There was much emphasis on the importance of good quality mentorship for new nurses and good quality preceptorships in a variety of clinical settings for student nurses. Both are seen as major drawing cards for nurses considering employment in the Yukon. Both also present challenges. Successful mentoring and preceptoring takes available, capable and dedicated people. When there are insufficient nurses available to cover all the direct-care dutic it is difficult to find nurses to carry out the mentoring and preceptor responsibilities. Clinical instructors, mentors and student nurses must be supernumerary to staffing requirements in order to maintain the priority as education, not patient care. Part-time / retired / experienced nurses: It was suggested on a few occasions that qualified nurses with flexibility in their schedules and experience might be agreeable to increasing their engagement in the workforce as mentors or preceptors. The nature of the workforce as mentors or preceptors. The nature of the workforce as mentors or preceptors. The nature of the workforce as mentors or preceptors. The nature of the workforce as mentors or preceptors. The nature of the workforce as mentors or preceptors. The nature of the workforce as mentors or preceptors. The nature of the workforce as mentors or preceptors. The nature of the workforce as mentors or preceptors. The nature of the workforce as mentors or preceptors. To do so is unfair the mentors and preceptors as well as to the new nurses and students. Education support for any educational option to succeed, there must be total buy-in and support from all local participants. Partnerships must be developed and the	Success Factor	Objective
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their schedules and experience might be agreeable to increasing their engagement in the workforce as mentors or preceptors. The nature of the womight lend itself to part-time work and fit well with other professional or personal commitments. Education support workload: Many stakeholders stressed that it takes time and energy to provide support for educating students or professionally developing graduate nurses. Accordingly, it is not something that can just be added into the responsibilit of a program or institution with no increase in resources. To do so is unfair the mentors and preceptors as well as to the new nurses and students. Local buy-in and support: For any educational option to succeed, there must be total buy-in and support from all local participants. Partnerships must be developed and the commitments required of each partner to make the program a success must	-	mentoring and preceptoring takes available, capable and dedicated people. When there are insufficient nurses available to cover all the direct-care dutie it is difficult to find nurses to carry out the mentoring and preceptor responsibilities. Clinical instructors, mentors and student nurses must be supernumerary to staffing requirements in order to maintain the priority as
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Timeliness:	The elapsed time between a decision by the college to build a local
+ 11 (100)	educational program for nurses and the graduation of the first group of students needs to be seriously considered.
Cost per graduate:	Also, the cost per capita for educating nurses through a locally-developed made-in-Yukon educational option needs to be compared to the costs of sending Yukon residents outside to get their education. This is particularly relevant given the small numbers of students expected to be recruited to a program. Also, the limited clinical placements may require additional clinical supervisory staff and several "streams" operating at once (student the classroom at the same time as others are on clinical placements). The arrangements increase the cost of instruction.
Popularity of local education option:	There is a range of views regarding the likely popularity of a local diplom degree program for nurses. Some believe there is considerable interest an pent-up demand. Others believe that an ever-decreasing proportion of the high-school population have any interest in entering the profession. Clear more data need to be collected on this question to provide useful informa on the feasibility of local educational options.
Marketing to high-school students:	A related question concerns the messages that high-school students hear is school about the benefits and costs of becoming a nurse. Some stakehold are convinced that guidance counsellors and others tend to be silent, or expensive toward the profession much more often than they promote it as a career choice.
Right number of right kinds of nurses at right time:	To be successful, any local educational option would have to produce the right kinds of nurses in the right numbers to address local needs. There is point in producing nurses here who will be unable to find nursing jobs in Yukon, either because there is a glut or because they lack the qualification employers require.
Human resource planning context:	Any solution to the current problem, whether or not it includes a local education option, should be conceived, developed and delivered within the context of a comprehensive human resource plan for the entire nursing la force in the Yukon.
Local employer commitment:	For upgrading and other local professional development options, viability might be assured through the commitment of local employers to buy a ce minimum number of seats for their staff.
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2	Further education /	One option to be considered for local education is the upgrading of newly
-	professional	graduated nurses to the level and nature of qualifications needed for
	development options:	employment in specialized Yukon nursing jobs. This, combined with other
9		initiatives already mentioned, could serve to attract new grads who within a relatively short period and at relatively little cost could be developed into the
-	1.0	well-qualified specialized nurses we require. Compared with the time and
-		money required to operate a program locally aimed at developing high-school graduates into fully-qualified nurses, this option may be much faster and less
4		costly.
4		
5	Diploma nurse option:	Despite the overall trend nationally away from diploma programs, that option should not be rejected out of hand. Recent initiatives in Alberta and Manitoba
5		have resulted in new diploma-level programs. First of all, it could produce
0		RNs faster, sooner and with less tuition cost to the student than a degree
0		program. Furthermore, it might be the first step for many people who would return to school after a few years to upgrade to a degree in nursing, either
9		locally or through distance education.
9	Danca mara anti-m	
9	Degree nurse option:	The standard of practice nationally is moving toward a degree as entry to practice. The majority of nursing students in Canada are in degree programs
9		and there is a reduced demand for diploma programs. The demands on nurses
2		in today's health-care environment require a solid theoretical and experiential base in order to provide the highest quality of nursing care.
2		base in order to provide the nighest quanty of hursing care.
-	Increased scopes of	As the trend continues towards increases in territorial/provincial scopes of
2	practice for LPNs:	practice and higher standards across the country for LPNs, demand will surface for education to enable Yukon's LPNs to meet these new demands.
2		surface for education to chapte 1 akon \$ 13 148 to meet these new demands.
2	Health care and	The role that is played by strategic decisions regarding the funding of health-
9	educational funding:	care programs, and the effects of those decisions, need to be considered when proposing to allocate significant funding to nursing education.
5		proposing to another digitality to musing equeation,
	Cost to the student:	The observation was made that the tuition and living costs to complete a two-
40		to three-year program are considerably less than those for a four-year program. Similarly, tuition costs at colleges are generally much lower than
10		those at universities.
	Unique Vulcan	Amulacia
10	Unique Yukon requirements:	Any local nursing-education option needs to include components relating to the unique demands of nursing in the Yukon. Education in such things as
10	•	cross-cultural awareness, community development and other related areas
1		should be included so that graduates really do have the range of skills and
9		knowledge required to be effective in this environment.
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9 9 9	Critical numbers of interested and qualified students:	A sufficient number of qualified students would need to be interested in beginning a program at the same time to ensure a high enough intake to accommodate the expected drop-out rate and to support the cost-effectiveness of the program on a cost-per-graduate basis.
	Sustainability:	The program would require at least a five-year funding commitment to support a four-year program in order to ensure that there is no break in the continuous delivery of a program. If the program were to be delivered more than once, a further commitment would be required as subsequent groups of students are admitted.
9 9 9	Quality of education – theory and clinical practice:	The availability of qualified faculty, laboratory facilities and clinical placements is critical to the delivery of a high-quality program that would ensure that Yukon graduates would be credible, employable, mobile and have future career-advancement opportunities.
	Nursing graduate fit with employer requirements and employer commitment to hire grads:	The type of graduate produced must meet the requirements of the employer and sufficient job opportunities need to be available to provide a reasonable assurance of employment.

Additional success factors that have been identified during Phase 2 are as follows:

Transferability of Credits – In order to attract nursing students who have completed part of their program elsewhere, credits earned must have maximum transferability into a Yukon program. In addition, Yukon students who choose to re-locate for part of their program need transferability into southern programs. Current LPNs, diploma graduates and foreign graduates would also like to see their program components receive maximum academic credit.

Flexibility – Discussion with other northern nursing education programs identified the need for some students to drop a class and pick it up later in order to meet other "life obligations". It is not unusual in the North to have students taking an extra year or two to complete a two- to four-year program. When designing a program, this sort of flexibility should be considered.

Student Supports – Experience in other jurisdictions indicates that many northern students require active student supports in the areas of tutorial, personal and family counselling. These supports, along with program flexibility, are key to increasing program success and reducing dropout rates. Access to student housing was seen as an essential support for students in Yellowknife.

Ease of Approval Process for YRNA – YRNA has the legislated responsibility to approve the educational program. The cost of assessment to YRNA and the funding agencies will relate directly to the "uniqueness" of the proposed program. If the program has been previously approved by a provincial or territorial nursing association, the course content remaining the same may be approved through an expedited process. As the clinical component would be unique, a full approval process would be required for it. The quality of clinical placements requires rigorous external assessment; this is one aspect of the approval process that will be expensive and require considerable outside expertise to complete. Local education options need to address this factor. YRNA would not be able to fund this assessment internally and would require financial assistance. By the same token, it should not be looked upon as an insurmountable barrier to establishing a local program.

Availability of Clinical Placements – Any nursing education program needs sufficient available clinical placements, which reflect the diversity of current nursing practice. Such placements can be made in facilities either in or outside the Yukon. Independent of any education program, clinical placements could be made available to outside students to lure them to the Yukon in hopes that they might choose to locate here upon graduation. Experienced and appropriate mentors/staff are required at the clinical placement location to facilitate student learning.

The education options considered in the analysis are as follows:

- 1. Yukon College LPN program continued delivery on an annual or less frequent basis.
- 2. Ladder Program

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- i. access year
- ii. LPN exit
- iii. diploma exit
- iv. degree exit
- 3. Diploma Program
- 4. Degree Nursing Program
 - i. local development / delivery
 - ii. outside institution developed local delivery
 - iii. outside development and outside/local delivery ("turnkey")
 - iv. outside program attendance (in full or in part)
- 5. Outpost Nursing program
- Other post-RN specialty courses

- 7. Yukon support for outside institution attendance:
 - i. Negotiated seats for Yukon students
 - ii. Bursaries / scholarships
 - iii. summer jobs
 - iv. clinical placements
 - v. research opportunities
 - vi. guaranteed jobs post-graduation

Another factor that crosses all of the options is whether a program was to run on an ongoing basis or to be offered only once.

4.0 Findings From Research

4.1 National Update

There have been new developments across the country since the completion of Phase 1. The nursing shortage in Canada is worsening and governments have pressured educational institutions in several provinces to institute a "short version" of the diploma program. Grant McEwan will be delivering a 14-month diploma program that provides only nursing courses, no electives. They have broken collaborative agreements with University of Alberta in order to provide the program. Manitoba has also instituted a 14-month program. Mount Royal has ended collaboration with the University of Calgary and joined forces with Athabasca University to provide a highly-flexible nursing degree program that offers as much as possible on line.

4.2 NWT

Ms. Denise Bowen, Chair, Health Programs for Aurora College in Yellowknife was interviewed by phone and provided further information by fax. We are very grateful for her generosity in offering her time to the project. In 1993, Yukon College and Arctic College collaborated on a feasibility study. An access year was launched by Arctic College in 1993 to provide access to prerequisites in math, English, biology along with lifestyle/wellness coursework, and support and opportunities to enhance study skills. In 1994, the first year of the nursing program was delivered. It is a 2.5-year program that includes a final 16-week practicum – pre-graduate work experience.

Courses are offered in a variety of settings, which include classroom, laboratory simulation and hands-on nursing care. The program covers concepts and skills related to health and nursing, basic microbiology, human anatomy, physiology and pathophysiology, human growth and development, psychology and nursing theory. The overview states that an emphasis is placed on traditional knowledge and health practices. The course descriptions lack the detail of those developed in Nunavut that describe how traditional knowledge and healing concepts are integrated into the delivery. The program was approved by the NWTRNA. The professional organization had to seek amendments to its legislation to provide the authority to approve a

nursing education program and oversee the practice of student nurses in the territory. LPNs have been given credit for some of their coursework on entry to the program.

The most recent advancement in program development is the completion of negotiations with University of Victoria to become part of the collaborative program. Aurora will become one of 11 partner colleges in providing the first years of the degree program. They will be retaining a diploma exit for the next few years and delivering the degree coursework locally as well. They will lose the ability to credit courses taken within the LPN, as the university will not accept those courses for credit. They will also be delivering a part-time long-distance post-diploma degree program in Yellowknife supported by a full-time tutor. Nurses throughout the territories will be able to tap in to the program by telephone and e-mail. Those in Yellowknife or visiting Yellowknife will have personal tutoring and support. Aurora College has entered into a five-year agreement with the University of Victoria that provides for the introduction of Yellowknife faculty to the curriculum and the mentoring of these local faculty members in the delivery of the degree program. The mentoring agreement includes on-site support for Aurora faculty by University of Victoria faculty on a visiting basis as well as regular contact by long distance.

The entrance requirements include the university entrance sciences, math and English. There have been five classes graduate. The entry class size ranges from 20 to 30 students and the graduation level has been from 10 to 20 nurses. Approximately 30% of the new entrants come from the access year. Preference is given to students born and raised in the NWT or long-term residents. They have not yet accepted anyone from outside the NWT to the first year of the program. Several have transferred into the second or third year. Approximately 60% of the students entering are of aboriginal ancestry and they make up about 40% of the graduates. Up to four credits from Athabasca University and other institutions are also accepted if possible. There is approximately a 50% attrition rate over the 2.5 years with a number of students returning to nursing studies later. They are in the process of limiting part-time and repeat studies to a maximum of five years for the completion of all credits. Most students are from the NWT and most graduates remain in the NWT. Recent statistics indicate that of the 55 graduates, 47 are still in the North.

All funding for the program is provided by the Department of Education (GNWT). For the first five years the annual budget was \$243,000, which was very tight and excluded capital costs such as library development. This level of funding has been increased and provides for five full-time faculty members as well as three or four part-time and sessional instructors. Most of the budget goes to salaries. The 1999-2000 funding level was \$400,000, which provided for the projects related to adding the degree programs. In addition, research has been completed on Community Health Representative training as well as the Nurse Practitioner program. By 2005 Aurora College will be able to provide all four years of the degree program.

They have a new Nurse Practitioner program that will begin in September 2001. It is brokered from Newfoundland's Centre for Nursing Studies. The program is 16 months in length and the annual budget is \$340,000, funded by Health and Social Services (GNWT). They also have funding from the Rural Health Initiative (Health Canada), which amounts to a total of \$250,000 over three years (to 2003). The funding will also provide for teachers from the Nurse Practitioner program to spend one day per week going into Yellowknife medical clinics to provide services.

Overall, the program is seen as successful. The education provided is different from southern schools. There was considerable resistance from nurses in the community concerned about the quality of clinical experiences available to the students. There were also worries about the recruitment of instructors and professors. The success on the national exams was also a consideration. There was an ongoing process to get access to clinical placements in the Nursing Stations in the communities. It came down to local students from that community asking and the college not being able to turn them down. Care is taken to limit scope of practice of students in those environments. Sixty percent of education is provided on site at the Stanton General Hospital in Yellowknife. At this point, it would appear that these obstacles have been largely overcome. The final determination of that will become apparent only after more graduates have been produced and have been fully integrated into the labour force.

The focus for clinical experience is on learning critical thinking and the nursing process. Experience in each specialty area is not seen as important. Group homes, daycares, women's shelters, and other community agencies are used for placements. In selecting agencies, it is helpful in Yellowknife not to be in competition for placements with early childhood and social work programs. Care is taken to provide clinical placements in home communities for a six-week consolidation period after each of the years. The students begin patient teaching in first year and receive a range of experiences in the community, such as sex education in the schools and chronic-care home visits.

The funding for the program was very difficult to access in the first few years. The start-up years were fully funded and some of the funds were spent on equipment and supplies. Support services include a shared counsellor, housing for out-of-town students, library (approximately \$12,000 per year spent on nursing and medical periodicals). The library has at least \$20-30,000 worth of books. Tutorial help is provided by the ABE (Adult Basic Education) program, which provides assistance in writing papers. The college also has a "Student Success Centre" which provides a range of services. Math has also proven to be a problem and emphasis is placed on review for nine hours prior to entering into the Pharmacology Math curriculum. It is a mastery-level course and the students need 80% to pass.

The student support services are seen as very important to the success of the students. The leaders involved in developing the program have had real difficulties in integrating aboriginal culture into the program. They have a medical anthropology class and do course work in cross-cultural communication. There has been no collaboration with Nunavut during their development, although there is a meeting planned for the end of May.

4.3 Nunavut

We contacted Anita Ludlow, Coordinator, Health Sciences Programs at Nunavut Arctic College. They have two programs running. One is a health careers access program and the other is a four-year degree-nursing program that has been running for two years. There is a diploma exit after three years and the diploma is granted by Nunavut Arctic College. The degree is a Bachelor of Science in Arctic Nursing and will provide nurses with the skills needed to provide primary health care in a community health centre. All clinical placements are done in Nunavut – both acute care and community assignments. The program has partnership agreements in place with other nursing programs. The degree is granted in partnership with Dalhousie University. The stated purpose of the program is to prepare Inuit nurses and respond to health care needs of the people of Nunavut. They have not had any graduates yet and all students have been from Nunavut.

The admission criteria include the ability to speak, read and write Inuktitut or Inuinnaqtun (preferred) as well as academic Grade 12 (including math, English and science) or successful completion of the Health Careers Access Program. Equivalencies are being considered as well. There are three students finishing first year and two finishing second year. There are eight students coming from the access year. The students range in age from 18 to 35 years and all have one to three children. There are three full-time faculty members on staff and one full-time instructor works with additional contract instructors to run the access year. None of the access-year courses are delivered in common with other college students. The annual budget of the program is unknown but the staff costs alone are estimated at \$300,000.

The program required a two-year start-up phase or lead time, with the work beginning in 1995. A number of the course descriptions include Inuit culture and holistic approaches, including the development of the understanding of how the individual, family and community interconnect. The psychology course is focused on a "culture in transition". Chemistry, biology, anatomy and microbiology are delivered as classroom courses with no evidence of laboratory elements. The "Health Assessment" course includes traditional Inuit assessment. The courses on acute, chronic and mental health "Alterations in Health" all include traditional Inuit healing practices and culturally-relevant theory and practice. "Inuit Health Practices in Nunavut" focuses specifically on Inuit traditional health care practices and the development of strategies to integrate these practices into their work. "Managing Illness" focuses on skill development in basic treatment of illness and includes a laboratory component. "Advanced Health Assessment and Clinical Skills" further develops competency in dealing with minor surgical problems, emergency care and clients who have suffered physical trauma. The program includes Inuit studies and the students have access to both medical and math glossaries in Inuit. There are well-equipped chemistry and biology labs available to students. There is a six-bed nursing lab as well. Anatomy is learned through the use of a model.

The Nunavut Government is launching a law program in September of 2002. The students will be paid 70% of a beginning lawyer's salary throughout the program. There is concern regarding the lack of equity with the nursing program. The students in the nursing program are all single parents living on limited student financing. Daycare is an ongoing problem. Student services such as mentoring, counselling and tutoring are essential.

4.4 Other Schools and Faculties of Nursing

The consultants interviewed spokespeople from the following nursing-educational institutions:

- Aurora College Yellowknife, NWT
- Nunavut College Iqaluit, Nunavut
- University of British Columbia
- British Columbia Collaborative Nursing Program (14 community colleges and two university/colleges along with the University of Victoria)
- University of Victoria
- University of Calgary
- University of Alberta
- Athabasca University
- Okanagan University College
- Camosun College
- Mount Royal College
- University of Northern British Columbia

The representatives of the various programs identified many similarities and some noteworthy differences among their programs. The points of consensus were:

- A degree in nursing will be the entry-to-practice requirement within the next five-to-ten
 years in most jurisdictions. All institutions contacted are phasing out the diploma exit;
 very few students are taking programs with a diploma exit in recent years.
- National competencies and provincial competencies, which are among the benchmarks for the approval of education programs, are consistent with baccalaureate preparation.
- Most provincial nursing associations have a position paper favouring nurses prepared at the degree level.
- Very few programs provide credit for LPN coursework the only exception identified was Douglas College but that has not been confirmed.

- The demand for nursing seats is increasing dramatically, with the result that higher academic standards are being required into the 80%-and-over range and most schools have long waiting lists. Most do not have any special entrance for mature or aboriginal students.
- New seats have been added in most schools contacted, with the constraint being the availability of funding, clinical placements, physical space and lack of qualified faculty.
- The dropout rate is consistently 25% to 30% (and some up to 50%).
- When the reason for the attrition is academic, the major stumbling blocks are biology and pathophysiology.
- Clinical hours range from 1400 (University of Calgary) to 2300 in the collaborative program in BC.
- All programs include clinical rotations in medicine and surgery. All include a hospital-based obstetrics experience although the current trend toward early discharge is such that a full experience needs to include community prenatal and postnatal care. The reduction in Paediatric admissions has resulted in some students gaining experience in environments such as schools. Psychiatry is combined with Community Mental Health and may be in a community setting. In BC, there is a requirement for experience in a setting working in gerontology, which usually includes an institutional experience.
- Educational institutions are moving away from the biomedical model to a primary health-care/population-health/health-promotion model that encourages process skill development and experience with both ill and healthy people of all ages from birth to death.
- The other trend is the disappearance of the traditional boundary between institutional and home or community care. People with much more serious illnesses and those preparing for death are much more often cared for in a home or community setting than in the past. The clinical placements are reflecting this trend as well.
- Due to the availability of student choice, not all students graduate with the same kind of clinical experience, although minimum standards must be met.
- All those schools contacted were interested in the possibility of senior practicum placements for their students in the Yukon.
- All those contacted were not in favour of a "one-time-only" delivery. The consensus
 was that the time and effort involved to set up and gain approval of a program was not
 worth doing for one intake. Also, it may take a few years for the program to gain local
 confidence and credibility, so it is a long-term endeavour.
- The need for qualified faculty and the shortage of them was seen as a possible major constraint. Master's level is a minimum qualification and most colleges and universities are moving toward a PhD.

- Additional resources are often contracted to supervise clinical placements. Contracting
 makes sense because there is a short-lived but intense requirement for these resources at
 certain times of the year and no requirement at other times. An example: UNBC needs
 seven or eight preceptors for 56 students at a cost of \$65,000 per year for clinical
 placement support alone.
- The ability and will of the hospital to take students on clinical placements and continue to take them over the long term is also a significant challenge.

The unique findings from these interviews were as follows:

- The Collaborative Nursing Program (CNP) would be willing to discuss seat allocation for Yukon students.
- Camosun College is a 2.5-year (five-semester) program that includes clinical time six
 hours per day for two days a week. The University of Victoria portion is three semesters
 including a 5-week preceptorship. The Obstetrics requirement is met through a
 "childbearing focus" in which students follow one family through the childbearing
 experience including attending physician visits, tests, prenatal classes, home visits,
 hospital stay and for six weeks into the post-natal period.
- The CNP has an open transfer policy for students from other collaborative partners. They currently have a two-year waiting list. The entrance requirement is over 65% for an adult student with all university-entrance requirements. The seats are filled on a "first come first served" basis. They have a special committee looking at access for aboriginal people. They have about 30% of students coming in from high school and the remainder are mature students ranging in age from their 20s to 50s. Student supports are well utilized.
- The University of Victoria model is the only true distance-education model in BC offering post-RN degree studies.
- The Mount Royal / Athabasca Program is four years, all on site at Mount Royal, with a lot of flexibility due to the distance-delivery capacity of Athabasca. Some courses are offered two or three times in one year. Mount Royal would be interested in a brokering arrangement. Entrance levels are at around 73% academic averages, up from 65% when there was lower demand. There is a four-month internship at the end of fourth year and they would be interested in possibly placing students in the Yukon. LPN's can challenge some courses through Prior Learning Assessment.
- University of Alberta uses a case-study approach with a lot of group work that requires academically-strong and well-motivated students.

- University of Calgary has a new two-year accelerated program for people holding degrees in other disciplines. This is similar to the approach taken by UBC and University of Toronto. They have funding for 60 seats. U of C delivers the program at Medicine Hat as well. U of C is gradually replacing the print-based post-diploma degree with a web-based model. This year they have 500 to 600 applicants for 136 first-year seats. People with averages of less than 75% are informed that their chances of admission are low. They are looking at special aboriginal-admission criteria. They also have a senior placement that is approximately 300 hours (full term) and would be interested in the Yukon. The U of C new program has 1400 clinical hours. The program is a BN with a heavy emphasis on the liberal arts.
- Okanagan University College would look at setting aside seats for Yukon students.
 They currently hold 10% of their seats for First Nation people. They would not be able to deliver in the Yukon at this time.
- University of Northern BC has an agreement with Yukon College to deliver a Master of Health Sciences program. At the Bachelor's level in Prince George, they require a minimum high C average and had 56 students enter last year and, due to the competition, the academic average on admission was 77%. There are no special admission streams for adult or aboriginal students. Nursing has no flexibility on admission requirements for university entrance English, biology, math and chemistry. As of Sept 2002, UNBC hopes to have the Master of Health Science available on line. There is some potential overlap with the BScN program. They have arrangements with the College of New Caledonia and are currently working out arrangements with Douglas College and Terrace and these arrangements could be used as a model for Yukon.

4.5 Yukon College

A number of considerations were raised in discussion with Lorraine Hoyt of Yukon College's LPN Program. One concern was the difficulty in identifying suitable clinical placements that are available in enough numbers to accommodate multiple classes in the program. This has been a problem in the LPN program, even with seven students. If the group is broken in two to provide easier clinical placement, the cost of the program increases because one group is in the classroom with a faculty member at the same time as another one or two faculty members are supporting students in clinical placements.

An option would be for the students to work evening and/or night shifts and weekends. This would also incur additional costs as the clinical staff would have to be paid extra for overtime and shift/weekend differential. The program has placed LPN students with an RN in a "buddy" relationship but usually has a clinical instructor in the hospital for 8 of the 12 hours that the student is on shift. The educational support is seen as essential.

There is support for looking for clinical placements in community agencies outside of the hospital and continuing-care facilities. The student supports such as tutorial support, family counselling and financial assistance are all seen as fundamental to the success of the students.

A full-time on-site nursing program at Yukon College would need to have a local coordinator and local faculty working in conjunction with the outside degree-granting institution and its staff. The availability of curriculum through long-distance delivery is an important element in building in as much flexibility as possible.

4.6 RNABC

The discussion with Joyce Black of the RNABC focused on the approval process for a new nursing education program. In BC, other than the legislation and regulations, the only other part of the process that is ultimately controlled by government is the "Rules – Part 3," which sets basic standards for program approval. The remainder of the process, including Policies and Operational Procedures as well as the ultimate decision regarding approval, rests with the board of the nurses' association. Ms Black reinforced that their experience may be helpful, however, the approval process for a Yukon program would be governed by the Yukon RN Act. However, Yukon would most likely look to another jurisdiction, like BC, for guidance through the process. The YRNA standards for nursing practice were the same as those in BC until the recent BC update, which makes it a good choice as a source of support.

BC uses a three-phase process to consider a new program:

- Phase 1 is a paper submission to the Approval Committee. It is expected that it would take approximately six months of full-time work by an experienced faculty member to prepare the submission. This approval has to be in place prior to the admission of students. A visit could be done if required.
- Phase 2 of the approval takes place after the program has been operating for one-tothree years and includes a site visit.
- Phase 3 is completed once the first group of students has been through the program and
 graduates have been working for approximately two years. Both employers and
 graduates are interviewed in the phase 3 process. The three broad criteria that are
 addressed in this review are curriculum, students and graduates and the process is
 focused on the outcome the achievements of the graduates.

The two basic documents employed are the "Standards for Nursing Practice" and the "Competencies Required by the Graduate." YRNA would need to complete a competency document unless it was in a position to adopt one from another jurisdiction.

In addition, Approval Committee policies and operating procedures must be in place in order to orient and train the committee. This process requires considerable in-house and/or outside consulting work in addition to contacted assistance from another professional association.

If curriculum was purchased from an approved program, the process would still need to be put in place, as the program would need to be assessed against Yukon standards and competency benchmarks.

RNABC identified the following costs associated with the approval process:

YRNA staff, consulting and committee costs – up to \$5,000 per	
meeting with lost salary costs	\$75,000
RNABC "indirect" costs	\$10,000
Site visit – two or three people at fees from \$1,200 to 1,500 plus	
travel and accommodation - approximately	\$6,000
RNABC Approval Committee training and development – cost	
unknown – consultant estimate	\$15,000
Yukon College staff costs for preparation of the submission – half year of one full-time faculty plus travel (assuming that the curriculum is developed/purchased, clinical facilities are in place	
and administrative policies fully developed)	\$50,000
Total cost	\$156,000

If the curriculum were purchased from an approved program, most of the process would still need to be put in place, as the program would need to be assessed against Yukon standards and competency benchmarks.

4.7 Alberta Association of Registered Nurses

Alberta has been faced with serious issues with regard to approval of nursing programs. There are programs operating in the province without approval and they are currently putting an approval process in place. There is no legislative provision under registered nursing legislation and as it will take a number of years to correct the gap, they are going with an interim process that is established under education legislation. A multi-stakeholder board has been established and has been working since 2000 in developing an approval process. The projections show that approximately \$230,000 will have been spent to year-end 2001 and another \$230,000 has been estimated for 2002. The Alberta example would not be a useful model and they do not have additional resources that could be made available for assisting the Yukon. They are very open and helpful in offering information and advice.

4.8 Yukon Registered Nurses Association

The meeting was held with Patricia McGarr, Executive Director and Cathy Bradbury, Registrar of YRNA. The success factors were reviewed and the following factors were seen as most important:

- Quality of instruction (theory and clinical practicum experiences) particularly in light of the shortages of faculty throughout North America.
- Quality of practicum placements both the number of placements and the quality of the educational experience are seen as important. The NWT practice of using alternative community placements in daycares, social agencies and other organizations is seen as possible but cannot replace the key hands-on clinical experience. YRNA also believes that students may require clinical experience in each of the five specialty areas (surgery, medicine, obstetrics, paediatrics and psychiatry) as well as community clinical experience. Although this was the model in the past, this experience is not currently available in some other programs, including the two other northern programs. The possibility of providing assistance for students to do a practicum in larger, outside hospitals could be considered.
- Laboratory facilities the need for lab facilities in the basic sciences (chemistry and biology) as well as the clinical sciences (anatomy, pathology, biochemistry) is seen as potentially problematic and is considered essential for a BScN program with sufficient science to serve as a solid foundation for advanced study for nursing in the communities.
- Number of qualified students considering the possible attrition rate, a sufficiently large number of students would have to be attracted to ensure a reasonable cost per graduate.
- Degree program considering the current trends, the Yukon practice environment, and
 the future of nursing, a degree program is considered the best option in order to
 graduate the best "all-round" nurse that will best serve the future requirements in the
 Yukon, including independent practice and nursing in the communities. The consultant
 mentioned that a potential shortage of physicians might put pressure on nurses to work
 in different, more independent circumstances that require degree preparation. The
 YRNA representatives concurred.
- Employability of Graduates the graduates must be fully employable in the Yukon and also outside as there are possibilities of family relocation over time and the possible over supply in the Yukon at some point in the more distant future (i.e.: we would graduate more nurses than we have available jobs in the Yukon).

The possibility was discussed of a one-time-only delivery of either a degree or diploma program. YRNA does not consider this to be a feasible option. The consultant raised the issue of the cost of laboratory and library infrastructure that would be used only once. YRNA agreed that it was a significant consideration. Another strong argument is lack of flexibility, such as a student who had to drop a class would have few options. YRNA also feels that the program needs to be well thought out and thoroughly planned. Their biggest concern was that this approach would only be a quick and short-term fix.

The projections demonstrate an ongoing need for nurses that would not be met by one class of graduates. Graduates need to have assured jobs, which require commitments from employers. These commitments may not be forthcoming as it is difficult to see five-to-six years ahead.

The impact on YRNA was also discussed at length. The YRNA has the legislated responsibility to approve a program, which is an extensive process. The organization does not currently have the resources or the capacity to undertake such an approval process. External funding would be required. In addition, if a program were launched in the Yukon, an amendment to the RN Act might be required to include student nurses, as there is currently no reference. Again, this should not be considered a barrier, but only an item that would need to be addressed if a local program were to be put in place.

Most programs in Canada are moving to a competency model and extensive work has been done throughout Canada to define the competencies required for entry to practice. YRNA suggests that this model be adopted for any program in Yukon.

Bridging of LPNs into a degree program was also discussed. There is a concern that the academic foundation and prerequisites for a degree program be met. In addition, the theory base for the LPN is seen as substantially different and may prove problematic if the student does not take basic nursing theory courses to broaden the foundation. Any credit provided to LPN level coursework would need to be carefully considered. YRNA supports the use of Prior Learning Assessment (PLA) to provide opportunities for advanced standing.

There is real strength seen in the Collaborative Programs – the clinical strength of the former diploma programs with the theory strength of the degree.

Options or "add-ons" exist that may complement a basic nursing education program. There is a significant worldwide trend towards combining educational pursuits with opportunities to visit other places and experience them. The option of providing an excellent environment for student nurses from outside to do "Yukon-experience" practicum placements was suggested by YRNA representatives. The consultant added the notion of an "edutourism" (combination of education and tourism) flare that may be a marketing advantage in recruitment. This kind of support could be traded for guaranteed seats for Yukon students at southern educational programs. Also, high levels of support could be offered new graduates in a hospital or community nursing setting. This would require funding for nurse preceptors to develop and deliver state-of-the-art orientation and first-year consolidation-of-skills experiences. Other programs could be geared toward advanced clinical skills and outpost experience. These options all require additional funding and strong support from Yukon employers.

4.9 High School Students

We held focus group meetings at each of the three Whitehorse high schools. These were advertised in the schools and in at least two of the three were well promoted by the guidance counsellors. The meetings were attended by a total of 17 students from grades 10-12 who had some level of interest in nursing as a career. The following table indicates the questions we asked and the distribution of responses. The rating scale is shown below.

1= no/not much 2= somewhat 3=considerable 4= yes/very much so

	Topic		Ra	ting	
		1	2	3	4
1.	How interested are you in nursing as a career?	0	2	7	8
2.	Would you intend to stay in (or return to) the Yukon to work?	3	4	8	2
3.	Would you prefer to take your nursing education in the Yukon, vs. outside?	9	4	4	0
4.	If a <u>diploma</u> program were to start in, say fall 2002, would you plan to enrol?	4	6	5	2
5.	If a <u>degree</u> program were to start in, say fall 2002, would you plan to enrol?	4	3	7	3
6.	If a program for LPNs were to start in, say fall 2002, would you plan to enrol?	9	4	3	1
7.	How many prerequisites for admission (1-4) to a nursing degree program will you missing as of June 2001?	6	1	1	9

With reference to question #7, many students added comments to indicate their response was either 0 or more than 4. These responses are included in the column closest to the actual number. Of the 17 respondents, 15 had either "considerable" or "very much" interest in nursing as a career.

More than half would plan to work in the Yukon, but 13 of the 17 would prefer to take their education outside. The reasons cited for this preference included a belief that the quality of education offered by institutions outside was better than what Yukon College offers, and the desire for new opportunities, new experiences or a change.

Almost half the students would seriously consider a diploma program if one were offered starting in the fall of 2002. Over half would look at a degree program starting then. Only four would be interested in an LPN program at that time. When interpreting the responses to these questions, it is important to note the fact that several of respondents will not have graduated from high school by that time. The fall 2002 date was picked on the assumption that if a program were to be put in place, that would be the likely start date. As will be seen later on in this report, the information gathered in Phase 2 suggests that a date of fall 2003 is a more realistic target. Six students will have one or no prerequisites missing by June 2001. Most will lack four or more because they will not be finished high school until 2002 or later.

4.10 Yukon College Students in Developmental Studies

We held a focus group with 11 students currently enrolled in Developmental Studies. We asked them the same questions we asked the high school students, plus one additional question, and we used the same rating scale. Their responses are summarized in the following table.

	Topic		Ra	ting	3
		1	2	3	4
1.	How interested are you in nursing as a career?	0	0	3	8
2.	Would you intend to stay in (or return to) the Yukon to work?	0	0	1	10
3.	Would you prefer to take your nursing education in the Yukon, vs. outside?	0	0	1	10
4.	If a diploma program were to start in, say fall 2002, would you plan to enrol?	0	0	3	8
5.	If a <u>degree</u> program were to start in, say fall 2002, would you plan to enrol?	1	0	2	8
6.	If a program for LPNs were to start in, say fall 2002, would you plan to enrol?	4	2	0	4
7.	How many prerequisites for admission to a nursing degree program will you missing as of June 2001? (1-4)	6	3	1	0
8.	How many (if any) university credits you currently have? (1-4)	8	0	0	0

With reference to questions #7 and #8, many students added comments to indicate their response was 0. These responses were included in the column for 1.

In contrast to the high school students, these respondents all had either "considerable" or "very much" interest in nursing as a career. All would plan to work here in the Yukon and all would prefer to take their education here, primarily for family considerations. Also mentioned were roots in the Yukon, housing or connections with friends. Although we did not ask respondents their age, most appeared to be in their 30s or 40s.

All students would seriously consider a diploma program if one was offered starting in the fall of 2002. All but one would look at a degree program starting then. Only four would be interested in an LPN program at that time.

Six students will have one or no prerequisites missing by this June. Three will be missing two and one will be missing three prerequisites by then. Eight of the respondents already have one university credit, while the rest have none.

4.11 Response to Advertisements in the Local Media

We placed ads in local radio, TV and print media announcing the study and inviting members of the public to contact us with regard to their interest in local nursing education options. The level of response surprised us. About 100 people contacted us. We have had telephone or e-mail exchanges with about 70 of those.

These respondents provide the following profile:

- Almost all are in their 30s or 40s with an average age around 42;
- Most have a very strong interest in nursing education;
- Several already work in health care as LPNs or in related areas;
- Many have looked seriously at going outside for nursing education; of those, some
 continue to consider that option, while most have abandoned it due to financial or family
 considerations;
- A large majority would be very keen to look at an RN program if one were offered in the fall of 2002; many could not start sooner;
- About 40% want a degree program, and another 35% would go with either a degree program or a diploma program. For about 10%, the diploma is their preferred option;
- About 12% expressed interest in pursuing the LPN designation;
- About 60% have the prerequisites already and many others are close to having all they need to start in nursing;
- Almost all would look for as much flexibility as possible in how courses were offered;
- The level of interest and enthusiasm is very high among these people.

4.12 Kwanlin Dun First Nation and the Home and Community Care Program

Discussions were held with Kwanlin Dun Health Centre regarding the need for additional nursing staff in the future. The First Nation is currently engaged in a planning process that will result in the identification of needs and the potential for an increase in staff as a result of the pending transfer of health programming. The transfer agreement has yet to be negotiated and the level of funding available will determine how many nurses could be on staff.

There are currently two full-time nursing positions, a nurse manager and a public health nurse. In addition, Kwanlin Dun and Ta'an Kwach'an First Nations are both in the preliminary stages of the planning related to the new funding program through Health Canada entitled the Home and Community Care Program. Cheryl Jackson, Michelle Tohachek and Jeddie Russell (when she was on contract) of Health Canada have been asked about the Home and Community Care Program. Viola Papequash was also involved in one discussion. The consensus is that the planning process is at an early stage and that it would be premature to assume that the First Nation communities will need nurses and if so, what kind of nurses they would want. In any case, Yukon First Nations people who want to become nurses or aspire to other health-care-provider roles need to be encouraged and supported.

One of the principles guiding the discussion is that the Yukon government remains responsible for the delivery of home nursing service throughout the Yukon to all citizens, and it is important that the Home and Community Care Program not confuse that jurisdictional responsibility. There may be a need for an appropriately-trained First Nation person or persons for each community who will take on a variety of support functions within a holistic, culturally-based program. The nature of the required training for such persons is not yet determined.

The study has been limited in the mandate to review the needs of First Nation governments and students specifically. Individuals participating in the focus groups or telephone interviews were not asked to self-identify as First Nation, although some volunteered the information. Informed individuals consulted throughout the data collection have indicated that First Nation governments need nurses and other health-care staff that are trained in the First Nation concept of health and healing and the provision of support to communities, families and individuals that is based on traditional knowledge.

In addition, it has been suggested that First Nation students are often reluctant to leave their community and the Yukon. The preference is for community-delivered courses. A Whitehorse-bases nursing program would not meet that requirement. Facilitated and supported access by First Nation students to outside, long-distance programs may be one option to provide programming into the communities. Access to these programs has been recently enhanced through the growth in access to high-speed Internet services in the communities outside of Whitehorse. Student may require "in-person" tutorial and other support to be available in order to build a "virtual classroom" that provides the necessary academic and personal support community for First Nation students. Additional study is required to further assess the specific

needs of emerging First Nation health-service-delivery systems and the specific requirements of First Nation students.

4.13 Yukon Native Teacher Education Program (YNTEP)

The Director of YNTEP provided the following relevant information:

- The partnership with the University of Regina was easy to establish, is painless to maintain and has served the program very well;
- The annual budget is \$526,000— this covers staff, minor O&M, instructors, plus a small annual payment to U of R;
- Since the program started in 1989, there have been 60 graduates, of whom 90% are employed in the education field;
- The entrance requirements have been very flexible, relying more heavily on interviews and assessments of the applicant's ability to succeed in the program than on previous academic achievement;
- Inclusion of a large proportion of mature students has been a key to the program's success;
- Over half the students who begin the program graduate four years later, while others graduate at a later date;
- Another key factor in the program has been extensive support to students provided in a variety of ways and addressing a wide range of needs.

4.14 Yukon Northern Human Service Worker/BSW Program

The Coordinator of the NHSW/BSW Program provided the following information:

- The program started in 1993;
- There have been 55 graduates, of whom 51 are employed in social work, while the other four are in graduate school;
- The partnership with the University of Regina was easy to establish, is painless to maintain and has served the program very well;
- The annual budget is \$340,000, most of which comes as a lump sum from Advanced Education, with \$15,000 \$20,000 coming from tuitions. This covers staff and instructors costs with a small amount allocated to overhead;
- The entrance requirements have been very flexible, relying more heavily on interviews and assessments of the applicant's ability to succeed in the program than on previous academic achievement;
- To graduate from the program, students must achieve an average of 70% in their social work course and 65% in their arts and science course;

- There are more than enough qualified applicants to fill the program each year;
- The intent was to fill half the spaces with First Nation students, but this level of First Nation participation has been achieved only once so far.

4.15 Employers

The consultants followed up with the key employers of nurses. These include WGH, Community Nursing, Continuing Care, Home Care, and the Whitehorse Health Centre. Questions focused on the likelihood of new grads getting hired at various levels in the organizations surveyed, and the number of clinical placement spaces that could be expected in these organizations.

Continuing Care currently employs LPNs and expects they will continue to hire several each year for the foreseeable future. WGH expects to hire LPNs in fairly small numbers starting a few years from now and continuing on a fairly steady basis. None of the others plans to hire LPNs in the future.

With regard to RNs, all the employers prefer to hire degree nurses versus diploma nurses. Whitehorse Health Centre does not hire RNs without significant experience. Community Nursing normally hires nurses only with extensive experience but might consider hiring some new nurses to learn the community-nursing discipline, as long as they were over and above the normal staffing levels of the branch. They would not replace current staff with inexperienced nurses—only supplement current staff numbers.

Other employers estimated a total each year of 8-10 spots for newly-graduated diploma nurses, or 12-15 spots for newly-graduated degree nurses. These numbers could increase somewhat if the traditional sources of nursing supply were to dry up. Some of the employers are able to be more flexible regarding qualifications and would find themselves forced to compromise from their normal expectations. Others would be unable to compromise due to the nature of their operations.

All of the employers have experience providing clinical placements for nursing students and all are prepared to continue this practice. Altogether, they could likely provide a total of two to three dozen clinical placements in any given year. WGH can provide the largest single number of clinical placements, but can do so only if the educational institution provides an instructor.

Most employers can more easily accommodate third- and fourth-year students than those in first and second year. The time and effort required of the employers' staff to provide clinical supervision is greater for students at lower levels. The figures given in the previous paragraph are for third- and fourth-year students. The numbers would be reduced significantly if the students were in the earlier years of their education.

4.16 Yukon College Costing Structures

To determine the sort of costs that would need to be considered in establishing a program at Yukon College, two aspects were considered—start-up costs and ongoing costs.

The start-up costs would relate to such things as renovations or new construction, if required, curriculum development and program design and co-ordination. No significant renovation costs would likely be encountered.

If curriculum were developed from scratch, the costs would be very substantial. On the other hand, if an arrangement were to be made with an existing school of nursing to use the curriculum they had already developed and proven (and which was approved by a provincial or territorial RN association) there are several options. In one case, Yukon College would pay a one-time fee to purchase rights in perpetuity to use the curriculum. Other options would include Yukon College paying an annual fee to the college or university in question in return for the right to use the curriculum or passing tuition charges for students enrolled in the courses along to the institution that had developed the curriculum. In these latter two cases, the curriculum costs would become an ongoing item rather than a start-up cost.

The costs encountered for program design and co-ordination would be mostly in the start-up phase. Any ongoing costs in this regard would be viewed as administration for the delivery of the program.

For ongoing costs, there are two common models at Yukon College. For in-house programs that are seen as integral to the mandate of the college, the norm is to cover many items out of the college's centralized funding. Such items would include office, classroom and lab space, access to the library, registration and other student services, administrative services and so on. The only costs the program would have to cover would be such things as salaries and benefits for staff, instructors and sessional instructors; office supplies, advertising, travel and communications; and capital items exceeding \$2,000 dollars in cost. In a case such as this, all the costs of the program would come from the base funding of the college.

For third-party programs (ones that are seen as outside of the core mission of the college but offered at the request of an outside agency), some of the items listed in the previous paragraph might be offered as in-kind contributions if the college viewed the program as something they partially supported, or for some programs the entire costs would be borne by the outside agency. In cases such as that, the direct costs of administration and co-ordination, curriculum development and actual instruction are all charged to the client, as well as a surcharge to cover access to central services and administrative support. These costs would then be covered by funds provided by the client.

On a practical level, it is Yukon government that provides the college's core funding. It is also likely that Yukon government would be the client if a third-party arrangement were entered into. Either way, the full cost of the program would need to come from somewhere (again, likely Yukon government). Whether that was in the form of an increase to the college's base funding or by means of a separate third-party agreement makes little difference to the total cost of the program. It is more likely that the final arrangement would follow the third-party model, or something similar, for the following reasons. First, that is the model for both the YNTEP and the BSW programs, so it would likely follow the same pattern. Second, the Yukon government has advised Yukon College that for new programs Yukon College sponsors, the third-party model should be followed for the first two years until the program is well established and proven. After that, consideration could be given to converting it to a core program with a corresponding increase to the core funding.

The costs to be considered for the program would include the following:

- 1. Start-up development and co-ordination costs;
- 2. Curriculum development or purchase costs;
- 3. Staff salaries and benefits:
- 4. Instructor salaries and benefits;
- 5. Sessional-instructor employment contracts;
- 6. Overhead such as phone, advertising, office supplies and travel; and
- 7. Materials, including lab supplies and any other specialized teaching/learning resources.

5.0 Analysis

5.1 Discussion of Options - Preliminary Analysis

1. Yukon College LPN program continued delivery on an annual or less frequent basis.

Yukon College currently has plans to complete another LPN program over the next two academic years. The LPN program is scheduled for 2002-03 if the demand remains strong. It has not been decided if it will be an access program building on the NHA/HSW program or a full program that can be accessed directly. The program should proceed in order to meet projected requirements in the continuing-care and hospital sectors. It will take two years to launch a replacement program, if the decision is made to proceed, and meanwhile, there is a program available to Yukoners at the LPN level.

2. Ladder Program

- Access Year Although the other two northern programs have an access year, the current Developmental Studies options including, the First Nation Access Program, meet the requirement.
- LPN exit A degree program with an LPN exit is not available and if it were, the
 entrance requirements would exclude many of the current applicants; therefore, it is not
 recommended.
- Diploma exit Employers have a strong preference for degree nurses. There is a broader range of employment opportunities available to degree graduates. They have the basic education required to proceed to complete the advanced clinical training and work in independent practice in the communities outside of Whitehorse. The employer pays all of the costs. It is not recommended that a diploma exit be considered. The programs contacted are all discontinuing a diploma exit, and the majority of members of the public that responded to the ad or participated in the focus groups were interested in a degree.
- Degree exit The Degree exit needs to be fully analysed.
- 3. Diploma Program as above diploma exit
- 4. Degree Nursing Program
- i. local development / delivery development costs and approval process would be very high not recommended
- ii. outside institution developed / local delivery some of the delivery is most likely to be by distance learning and therefore, not all delivered locally
- iii. outside development and outside/local delivery ("turnkey" where all curriculum and program planning is purchased from outside) the best option, if a local program is one of the selected approaches
- iv. outside program attendance (in full or in part) Many of the people contacted are not willing and/or able to relocate to a community outside the Yukon. Several others would go outside for studies if there were additional financial assistance. Students currently in high school prefer the option of going outside to study.
- 5. Outpost Nursing Program is currently available through the Yukon government for newly recruited nurses who are not fully qualified.
- 6. Other post-RN specialty courses a demand for these courses has not been identified and many of them are either available currently or soon will be available on line.

7. Yukon Support for outside-institution attendance:

i. negotiated seats for Yukon students – a possibility with some of the institutions

ii. bursaries / scholarships - may be possible depending on funding.

- summer jobs requires a commitment from employers and for it to be a part of a comprehensive senior student recruitment program. A co-op arrangement would allow students to be paid for summer employment and receive credit for clinical placement. These arrangements are not common in nursing programs.
- iv. clinical placements all institutions contacted are interested in pursuing the option of senior student placements in the Yukon.

v. research opportunities - not fully researched

vi. Guaranteed jobs post-graduation – may be possible as part of a new graduate recruitment program that may include up to one year's clinical preceptorship in several areas.

5.2 Success Factor Analysis

Success Factor	Analysis of Options
Yukon residence priority:	An LPN program followed by a local degree program would allow people to remain in the Yukon. Yukon-allocated seats in outside institutions would provide easier access for those Yukoners who are mobile. New graduates would be recruited through a package of incentives. A degree program with any portion delivered outside the Yukon on a mandatory basis would not meet this criterion.
Mentorship and preceptorship:	The ability of the Yukon to recruit and retain qualified faculty is an important relative barrier. Mitigation includes the use of distance learning, as well as the possibility of contracting with outside preceptors for short periods if the program is organized to ensure little or no overlap with selected outside programs for large clinical blocks. There is reduced pressure on the system with outside students doing clinical rotations in the Yukon due to smaller numbers and the support of outside faculty.
Part time / retired / experienced nurses:	The possibility exists and may be of some assistance, but the level of academic preparation and the need for state-of-the-art clinical skills would need to take precedence over other criteria in the selection process.
Education support workload:	The hospital, community health centres and nursing stations, and to some degree continuing-care facilities, may be operating with less than optimal staffing in the foreseeable future. This is one reason to ensure increased clinical staff. In addition, the education process is the priority for clinical instructors, mentors and preceptors. The only constraints are the availability of qualified faculty and the funds with which to contract with outside expertise if needed. This problem can be mitigated with sufficient funding.

Local buy-in and	The local buy-in is there in general terms. More specific commitments need
support:	to be established with employing agencies with regard to firm guarantees on
3	clinical placements and employment of new local graduates once the
<u> </u>	timeframes are more clearly established.
Timeliness:	A degree program will take two years to access funding, develop the program,
	negotiate agreements, gain approval and recruit students. The first class would
	enter in 2003 (September) and graduate in May or June of 2007. This is not a
	timely response to the need for nurses. In the meantime, the LPN program
	will provide some graduate LPN staff for employers. The support for nurses
22	trained outside the Yukon, along with active recruiting of new graduates,
	would help to the fill the gap at the RN level. In reality, the nursing situation
3	in Canada and internationally could change significantly by 2007.
Cost mar graduata	According on intelligence (24 -44 -14 -44 - 14 - 200/ -44 -14 -14 - 14 - 14 - 14 - 14 - 14 -
Cost per graduate:	Assuming an intake of 24 students, with 30% attrition, there would be a
	graduating class of 17. The cost would differ significantly depending on whether it was a one-time delivery or ongoing. Using NWT numbers, the
	annual cost will be at least \$300,000 for an ongoing program, excluding the
	cost of the physical plant or agreements with the outside university. At least
	two years of development would also need to be invested, at approximately
	half the cost per year, for a total of another \$300,000. Using incomplete costs,
	if the program ran for nine years and graduated four classes, the cost per
)	graduate would be approximately \$35,300.
1	Brandite would be approximately \$55,500.
	The cost to subsidize bringing one student from outside for a practicum
	placement could run from \$1,000 to \$5,000 per graduate, with the possibility
	of retaining a portion of those who come for some period of time. Yukon may
	be able to negotiate seats at no cost or in trade for practicum placements.
	Guaranteed jobs do not cost anything in addition to salary and communication
	costs. Bursaries may be anywhere from \$1,000 to \$10,000 per year with a
	return-of-service agreement.
	Another cost would be associated with providing a one-year, post-degree-RN
	mentorship for new grads.
Popularity of local	The local program option is very popular with the older, more-established
education option:	members of the public and less popular with the high school population due to
	their desire to experience life outside the Yukon.

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999	Marketing to high-school students:	Looking at the demand for nursing seats in the south and the public response to the ad, there is considerable interest locally. The high school population was less enthusiastic and may require additional marketing.
	Right number of right kinds of nurses at right time:	A degree nurse is the basic preference for most employers for the majority of positions. Most would also prefer related experience and most realize that in order to reduce turnover in times of high competition for nurses, investing in less experienced nurses who plan to stay in the Yukon may be a good use of the organization's resources.
		The small numbers of jobs and people and graduates make any forecasts of future supply or demand somewhat tenuous. The farther away the events estimated, the more difficult it becomes to rely on the forecasts. Any option that relies on the accuracy of estimates of events four or five or more years into the future involves a significant degree of risk. Any option that involves firm commitments now for the medium or long term, and is based on qualitative and quantitative estimates that may prove inaccurate, should be avoided. It is prudent to ensure sufficient flexibility in any approach taken to enable fine-tuning, or even major course corrections, to respond effectively to changing circumstances.
	Human resource planning context:	An LPN program, a local degree program and additional efforts to gain access to seats for Yukoners, as well as recruitment of new graduates through additional focused efforts around summer jobs and clinical placements, would fit into the initial strategy in place within the Yukon government.
9	Local employer commitment:	Local employers are not committed to investing in local professional- development options, as there is a significant variation in the needs of individual staff members and many distance-learning options available.
	Further education / professional development options:	The Yukon government currently provides upgrading to community nurses who work in locations that require advanced clinical skills. The deficit in other practice settings is more a lack of experience. That could be addressed through a rotational preceptorship for new graduates.
9	Diploma nurse option:	The recommendation from all educational institutions and professional associations is that a degree is the minimum requirement for nursing education that is future oriented.
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Degree nurse option:	The local-degree-program option meets this criterion.
	The options of securing an allocation of existing nursing-school seats for Yukon students and active recruitment of new graduates would focus only on degree programs.
Increased scopes of practice for LPNs:	One additional graduating class of LPNs will provide an important resource for employers for the next five years. At that time, the scope of practice may have changed considerably and new program requirements may be needed.
Health care and educational funding:	The five- to six-year minimum funding commitment needed for a new nursing program is a very significant commitment and may be an absolute barrier. Funding for other measures is much more reasonable and could be done on a one-year-at-a-time basis.
Cost to the student:	Tuition costs for a local program would be within the standards set by Yukon College and one additional year for the degree is more than offset by the professional advantage of a full nursing education.
Unique Yukon requirements:	The most viable option is to buy curriculum rights from an existing college and/or university. There is limited ability to tailor-make a program within those arrangements.
Critical numbers of interested and qualified students:	There is a sufficient number of qualified students who have indicated their interest. If it takes two years to launch a program, some of the current interest may disappear. It may be possible to actively recruit high-school students, particularly from the communities, who may require upgrading within that two-year timeframe to enhance the number of qualified applicants available to start the program when it comes on stream.
Sustainability:	The lack of ability to secure a five- to six-year funding commitment may be an absolute barrier. The educational institutions do not recommend a one-time-only delivery and therefore, it would have to be an ongoing commitment.
Quality of education — theory and clinical practice:	The availability of qualified faculty, laboratory facilities and clinical placements for a degree program are relative barriers. The mitigation of the barriers would take considerable levels of funding in order to put laboratory facilities in place, use travelling laboratory equipment and labs, use contract or shared faculty and use double tracking if necessary to ensure the quality of clinical placements. Double tracking would see a classroom component being delivered in parallel to a clinical component to half the students.

Nursing graduate fit with employer requirements and employer commitment to hire grads:	A degree nurse is the most "generic" requirement and the foundation upon which employers are willing to build in developing opportunities for further experience and education/professional development.
Transferability of credits on a transfer-in and -out basis	With a degree program, an arrangement with the CNP in BC would provide the greatest degree of transferability out to other colleges and universities. Transfer arrangements would be negotiable with any college or university.
Flexibility of full time and part time studies and breaks in study term	A one-time-only delivery would not meet this criterion. Maximizing the use of distance learning for the program would add to the degree of flexibility in how students met the final academic requirements.
Student Supports	Yukon College has a range of student supports available.
Ease of approval process for YRNA	An existing program that has approval of one of the provincial or territorial nursing associations would be the easiest to move through the approval process. A proven program rather than a relatively new program would also be easier. A program from a jurisdiction with similar legislative requirements would also ease the process.
Availability of clinical placements	This issue was discussed under "quality of education". An additional concern is sustainability of access. There is a potential for arrangements made with an institution to break down midway through a program, with no alternatives for hospital placements.

5.3 Clinical Placements

Options have been reviewed on clinical placements. The number of students who could be placed within the hospital in any given year would be seven to ten at a time, providing the clinical preceptors were available in each area. Within the total number, Emergency and the Operating Room could handle one student at a time. A practicum placement of six to eight weeks is preferred and the hospital indicated concerns about finding an appropriate preceptor in these areas. The preceptor, ideally, would have a strong foundation in clinical practice and provide students as well as staff with learning opportunities including offering inservice and orientation programs to both groups. Maternity (Obstetrics) and Surgery could take one student at a time in each area, with the same requirements for skilled preceptorship. The West Unit, which includes Medicine, Paediatrics, Intensive Care Unit and Mental Health, could take one student in each of the four areas as long as clinical supports were available.

In addition, the Thomson Centre, Macaulay Lodge and the new extended-care facility could be used. The capacity for clinical placements for these institutions is about seven per year.

Community Mental Health and Yukon Family Services may be available for psychiatric and counselling placements. The Whitehorse Health Centre may be able to accommodate one practicum student per year. Kwanlin Dun Health Centre may be able to take a student on placement as well. The health centres and nursing stations outside Whitehorse may be acceptable placements for senior students in degree programs, with no more than one per community and to a maximum of three at any one time. Canada's Pre-Natal Nutrition Program would likely be able to take one or two student nurses as well.

Other community agencies such as the women's centre, the jail, ARC, Hospice, Detox, etc. may be used as well, although some negotiation may need to occur with the Social Work program to avoid conflicts. Daycares may be appropriate placements but they may need to be negotiated with the Early Childhood program. Placements in any these agencies would likely be useful only as supplements to more conventional clinical placements in direct health-care delivery environments. They would not replace such clinical placements.

The view expressed by Lorraine Hoyt at Yukon College is that students must have a clinical instructor available to them when on placement in order to maximize the learning possibilities and provide an opening for everyone to ask questions—including RN staff. The availability of a clinical instructor is particularly important in early placements. Depending on the number of students, they may have to work evenings and night shift in order to gain sufficient clinical time without overburdening the placement agencies. The other options would be to split the students into classroom and clinical rotations. This would see only half of the students on clinical at one time. The problem is the requirement for double the teaching resources, as instructors would need to be in the classroom and in the hospital and/or other placement agency at one time.

Employers indicate that the maximum number of clinical placements available in the Yukon in any given year would be in the range of 25 to 35. All the educational institutions contacted stated that a one-time offering made no sense. If an ongoing program were put in place that had an average of 20 students in each of four academic years, and if they all required clinical placements, the demand would be for about 80 clinical placements per year.

The 80 placements required would be weighted in favour of lower-level students, since there would be more of them in the system at any given time. This is partially the result of building the program up one year at a time starting with Year One and adding a new group for each of the following three years until all four years were filled. Initially, all the placements would be for first-year students. The next year, most would be for first-year students with almost as many for second-year students, and so on. The other factor is that natural attrition leads to smaller classes in 4th year than in 1st year. Of the 80 students, there might be 26 in 1st year, 22 in 2nd year, 18 in 3rd and 14 in their final year. The total number of clinical placements available for a group with this distribution would be at the lower end of the range mentioned earlier, probably more like the figure of 25, or perhaps even fewer.

5.4 Program Costs

It is estimated that a degree program would require three to four full-time staff people at approximately \$75,000 per year for a total of \$300,000. In addition, clinical instructors and sessional instructors would be required. An estimate of these costs is an additional \$100,000 per year. The arrangements with the YRNA for the approval of the program, with support from another professional association, would be an additional cost. The purchase of the rights with an outside university to deliver a full degree curriculum would also be an additional cost.

Physical space requirements would be one new classroom for the first year of the delivery and probably an additional classroom for each of the following three years, for a total of four when there are four years of delivery running simultaneously. The existing nursing lab used for the LPN program could be shared with the new program.

There would be considerable front-end costs associated with library books, videos, periodicals and other resources. Additional lab facilities, including another mannequin, would also be required. The anatomy lab requirements could conceivably be met by using animal cadavers.

With any program initiative undertaken, the process through which students are screened and assessed prior to entry will improve the success rates and control costs. Cost per graduate increases substantially as dropout and failure rates rise.

5.5 Possible Partners (Degree Granting Universities)

Discussions were held with various universities that grant either a BN and BScN. Questions about the difference led to an assurance that the title does not mean anything and that, if a strong base in the sciences is needed for northern practice, the best way to determine that is by a thorough review of the curriculum. The most promising discussions were held with the following:

- ➤ Collaborative Nursing Program with Camosun College (or any other Collaborative Nursing Program college) and University of Victoria the entrance requirements are more flexible and the distance access is strong.
- ➤ UNBC The University has an existing arrangement with Yukon College to deliver the Master's in Health Science degree program. There is a commitment to further development of distance-learning capacity and an understanding of rural and remote needs. There is a willingness to discuss the possibilities.
- Mount Royal College and Athabasca University these two institutions have just formed a new collaboration and the program has a strong distance-education component that could reduce costs and increase flexibility.

6.0 Conclusion and Recommendations

In the final analysis, there are four options that are not necessarily mutually exclusive.

Option 1: Continuation of the LPN program as planned

The current plan is to offer the Nursing Home Attendant/Home Support Worker program in 2001-02 followed by the LPN program in 2002-03. The plan is fully supported and may need to be repeated in subsequent years, depending on the demand. The new Athabasca University LPN to BN bridge that is in the approval stages would be a possible "next step" for graduates interested in going on further.

The summary of the analysis of the option is as follows:

- > Meets many of the success factors;
- > Meets an identified labour-market need;
- Does not address all of the identified labour-market needs;
- > Established and relatively easy to perpetuate;
- > Solid demand for seats;
- > No major impediments.

Option 2: Locally-delivered Nursing Degree Program

The locally-delivered degree program is considered to be a classroom offering delivered at Yukon College with clinical placements taking place primarily in Whitehorse. A locally-delivered nursing program could take one of two forms. One form would be to deliver the full four years with or without a "nursing access" year. Nunavut and NWT strongly recommend the addition of an access year if the entering students are "high risk" students. For example, they are students who are adults with family responsibilities and who have been out of school for an extended period of time. Any nursing program that produces a "Yukon graduate" would have to be approved by YRNA. A full four years, even if brokered, is a large and costly undertaking. If the first two years were offered in the Yukon, that could produce a "dead end" for those students who are not able to leave the Yukon for the final two years. There is a high likelihood that pressure would mount on Yukon College to continue and provide the additional two years to complete the program. In that case, if it is not planned and funded from the beginning, there may be a gap in the program of at least one academic year, resulting in the loss of students.

The other question is "which" two years. Nursing programs have moved to a variety of different models. One model used by UBC and U of C is that nursing students that have completed two years of arts and science courses and have completed all of their non-nursing courses are accepted into "third year" and complete all of their nursing courses and clinical placements in the last two years. The problem is that these programs have a very high academic standard for entry. Yukon College could continue to broaden and focus their offerings in arts and science to include

as many of the course requirements for these programs as possible locally, while providing information to students as to where and how they may be able to access courses not offered in the Yukon via distance. The distance option may be more feasible than community-campus delivery outside of Whitehorse, in some cases.

The other form that nursing programs take is like the Collaborative Nursing Program in BC which is built on the diploma model where a great deal of the nursing theory and practice is completed in the first two-and-a-half years and then the students proceed to university to complete additional electives and more advanced nursing theory courses. Therefore, Yukon College would not be in a position to offer a "first-two-years" generic entry program that would allow students to go on to a number of programs. Students target different colleges or universities for different reasons. To link a Yukon "first-two-years" program with one institution in the South would limit the options for Yukon students and increase the likelihood that students access the more flexible long-distance delivered programs.

The summary of the analysis of the option is as follows:

- > Meets most of the criteria;
- Addresses a portion of the labour-market need although the preference is for fully educated and experienced nurses by most employers;

Relative obstacles that could be managed with sufficient resources:

- > Would be a major undertaking;
- Might not be able to find and attract sufficient numbers of scarce, well-qualified professors (most nursing schools require a master's degree as a minimum and prefer PhDs);
- New program options delivered currently or planned to be delivered in the near future by distance from outside universities meet many of the requirements of Yukon students while protecting a range of options for each student.

Major obstacles that may not be surmountable:

- > Unpredictability of the demand and supply of nurses in six-to-seven years;
- Very high cost;

- Long lead time before any graduates are available (six-to-seven years);
- Once commitments are made, it becomes very difficult to adjust plans as circumstances change;
- > Lack of ability to precisely meet the human resource needs of local employers with new graduates;
- > Lack of qualified faculty and clinical placements for multiple intakes;
- ➤ Competition from cheaper, easier-to-access and more flexible long-distance delivery options, such as the planned Athabasca University LPN to BN bridge program due to be launched next year.

Option 3: Supporting Yukon students to pursue nursing education outside

This option may include any number of special initiatives. It could begin in high school with positive promotion of nursing as a career, include summer-job placement for high-school and university students, including nursing students studying outside. As access for Yukon students is difficult, the negotiation of special access to a number of nursing programs in the south or perhaps in Alaska would assist in more students gaining access to the program of their choice. The distribution of up-to-date information about long-distance nursing program options and provision of local tutorial or "learning circle" support through Yukon College and the community campuses would assist students in achieving success in distance-learning programs that lack the companionship and structure of a classroom. Student financing is also a significant barrier that may be alleviated through the establishment of bursaries and scholarships, along with well-paid summer-student employment.

The arrangement of local clinical placements for Yukon students would help them to remain eligible for the Yukon grant and spend more time "at home" in the Yukon. This may also reduce their living costs outside. The more clinical time spent in the Yukon, with the addition of summer jobs, would demonstrate interest and support and encourage nursing students to return to the Yukon upon graduation. The offering of a job to the new graduate, even a one-year "experience term", would also assist in ensuring that they come back.

Recent research carried out by the Aboriginal Nurses of Canada indicates that nurses who are from rural and remote areas are the nurses that stay in those areas and that aboriginal nurses are also more likely to stay in areas that are like those they experienced in their formative years.

As there can be very little done which may cost less than \$10,000 or a lot done which could cost \$200,000 or more, it is difficult to cost the items. Many initiatives could be undertaken as part of existing programming or employment initiatives, which only takes the will of the sponsoring organization. The employment of a full-time coordinator at a cost of \$80,000 (salary and benefits) would improve the likelihood of a consistent and coordinated effort. The person could be sponsored by one of the partners who may be willing to provide office space and support. Planning and priority setting would need to be done with Yukon College, Health and Social Services, Council for Yukon First Nations, other interested First Nations, Health Canada and major employers at a minimum.

The summary of the analysis of the option is as follows:

- Meets many criteria;
- > Retains the flexibility and ability to respond to the needs of local employers over time;
- Does not require the availability of local clinical placements, although it is desirable that local clinical-placement options be developed for local and invited students.
- > Smaller financial commitment with increased ability to meet short-term needs.

Option 4: Attracting outside students to the Yukon for:

- > Senior clinical placements for nursing students;
- > New graduate first-year rotational-experience programs with preceptor support;
- > Summer employment;
- > Employment upon graduation.

The summary of the analysis of the option is as follows:

- > Meets many of the criteria;
- > Retains maximum flexibility to respond to changing circumstances with employer human resource needs and labour-market supply of nurses;
- > Enables mutual assessment of the fit before long-term employment commitments are made between nurse and employer;
- > Lower cost per graduate nurse than other options;
- > Fits with existing recruitment and retention strategies for nurses.

Recommendations:

Recommendation 1: Coordinated Delivery of Nursing Education Support Programs

The recommendation is to develop a coordinated approach to providing supports for increasing the number of Yukoners accessing existing nursing programs and maintaining their connection to the Yukon and attracting non-Yukon nursing students and new graduates to the Yukon. The employment of a full-time coordinator placed in one of the sponsoring agencies would provide the focus and dedicated resource to ensure positive results. This approach would provide Yukon with the maximum amount of flexibility in meeting small pockets of unique needs for nursing human resources that may shift quickly and in relatively unpredictable ways.

The coordinated approach would include the following components:

Employ Option 3 – Identify funds to attract Yukon students currently studying outside or those planning to study nursing outside, or those studying at a distance, to the Yukon for clinical placements, summer employment, new-graduate experience and jobs on graduation. In addition, negotiate arrangements with two to four outside institutions for cost-shared programs to attract non-Yukon senior students to the Yukon for clinical placements, summer employment, new-graduate support programs or jobs during and after completing their nursing education. It may be possible to increase the availability of opportunities and ease of access for students if Yukon College, the Yukon government and employers were to collaborate in the negotiation of limited seat allocations for Yukoners at various southern nursing schools in exchange for clinical-placement programs.

Employ Option 4 – Identify funds to bring nursing graduates to the Yukon for the "adventure of a lifetime" and combine world-class mentorship for their first year of employment as a new graduate with a Yukon tourism/living experience. This initiative would need to be predicated on the continuation of steps to reduce nursing turnover by addressing the quality-of-work-life issues raised by Yukon nurses. The objective would be to develop an innovative, comprehensive and collaborative plan to transform the Yukon into a magnet jurisdiction for nurses. Once nurses are educated and employed in the Yukon, ongoing workplace-retention strategies are essential to keeping them. It is much less expensive to keep a nurse than it is to educate and/or attract a nurse to the Yukon.

Recommendation 2: Continue the planned LPN Program

The current plan to deliver the NHA/HSW program next academic year, followed by the LPN program, is fully supported:

Employ Option 1 and continue LPN program as planned.

Recommendation 3: No Diploma or Degree Program delivered at Yukon College

The establishment of a nursing program at Yukon College in Whitehorse is not recommended as summarized in the following:

Do not employ Option 2 – Do not pursue the development of a local diploma or degree nursing program. As an alternative, assist students from the Yukon in accessing appropriate southern and long-distance delivered programs through negotiated special access and other measures. Ensure that as many of the required arts and science courses as possible for the nursing programs in Alberta, BC and NWT are available locally or via distance delivery. These arrangements will facilitate increased numbers of students choosing to do the first two years in the Yukon and seek third year entry at U of C or UBC. In addition, seek out ways of providing support to students working on nursing education programs from the Yukon through distance learning. Local tutorial or "learning circle" support would be helpful.