The Nature of Nursing Practice in Rural and Remote Canada
Aim of the Study:

- to examine and articulate the nature of registered nursing practice in primary care, acute care, community health, continuing care (home care) and long term care settings within rural and remote Canada

Study Components:

- Survey
- Registered Nurses Data Base (RNDB)
- Narrative Study
- Documentary Analysis
Principal Investigators and Decision-maker

- Martha MacLeod
  University of Northern British Columbia

- Judith Kulig
  University of Lethbridge

- Norma Stewart
  University of Saskatchewan

- Roger Pitblado
  Laurentian University

- Marian Knock
  B.C. Ministry of Health Planning (to 2003)
Co-Investigators

- Ruth Martin-Misener
  Dalhousie University
- Ginette Lazure
  Université Laval
- Jenny Medves
  Queen's University
- Michel Morton
  Lakehead University
- Carolyn Vogt
  U. Manitoba
- Gail Remus
  U. Saskatchewan
- Debra Morgan
  U. Saskatchewan
- Dorothy Forbes
  U. Saskatchewan
- Barbara Smith
  U. Saskatchewan
- Carl D'Arcy
  U. Saskatchewan
- Kathy Banks
  BC Women’s Hospital
- Elizabeth Thomlinson (to
  2004)
- Lela Zimmer
  UNBC
Current Advisory Team Members

- Cathy Ulrich, BC
- Anne Ardiel, BC
- Debbie Phillipchuk, AB
- Cecile Hunt, SK
- Donna Brunskill, SK
- Marlene Smadu, SK
- Marta Crawford, MB
- Sue Matthews, ON
- Suzanne Michaud, QC
- Roxanne A. Tarjan, NB
- Adele Vukic, NS
- Barb Oke, NS
- Elizabeth Lundrigan, NF
- Joyce England, PEI
- Barbara Harvey, NU
- Madge Applin, NWT
- Elizabeth Cook, NWT
- Fran Curran, YT
- Jan Horton, YT
- Francine Anne Roy, CIHI
- Maria MacNaughton, FNIHB - Health Canada
- Lisa Dutcher, Aboriginal Nurses Ass’n
- Lisa Little, CNA
- Investigator(s)
- Advisor(s)
- Investigator(s) and Advisor(s)
Funding Partners

- Canadian Health Services Research Foundation
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- Alberta Heritage Foundation for Medical Research
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- Nova Scotia Health Services Research Foundation
- British Columbia Rural and Remote Health Research Institute
- Saskatchewan Industry and Resources
- Provincial and Territorial Nurses Associations
- Government of Nunavut
- Canadian Institute for Health Information
Rural and Remote Nursing

Access to Care
Quality of Care
Sustainability of Care
Access to Care

• Supply and Distribution of Nurses

• Education of Nurses
How many Registered Nurses are there in rural and remote Canada?
RNDB Highlights: National

- 41,502 registered nurses were located in rural and small town Canada in 2000, a 2% decrease since 1994
- In 2000, 17.9% of the total RN workforce were in rural Canada where 21.7% of the total population live
- 62.3 RNs/10,000 population in rural compared to 78.0/10,000 population in urban Canada
- More rural (12.7%) than urban (7.8%) nurses work in community settings
- Rural nurses predominantly educated at the diploma level at their initial period of work (90.8%) and subsequently during their work life (81.4%)
<table>
<thead>
<tr>
<th>Year</th>
<th>Number of rural (RST) RNs</th>
<th>% of all RNs</th>
<th>Rural (RST) % of total Canadian population</th>
</tr>
</thead>
<tbody>
<tr>
<td>1994</td>
<td>42,303</td>
<td>18.0</td>
<td>22.3</td>
</tr>
<tr>
<td></td>
<td>134</td>
<td>100</td>
<td>100</td>
</tr>
<tr>
<td>2000</td>
<td>41,502</td>
<td>17.9</td>
<td>21.7</td>
</tr>
<tr>
<td></td>
<td>92</td>
<td>100</td>
<td>100</td>
</tr>
<tr>
<td>2002</td>
<td>40,648</td>
<td>17.6</td>
<td>20.6</td>
</tr>
</tbody>
</table>

2002 – based on CIHI figure generated without Quebec data
.. an aging workforce
(Source: RNDB)

• Rural RNs -Canada/NU & NWT
  – 1994 average age: 40.6 years/ 39.4 years
  – 2000 average age: 42.9 years/ 43.1 years

• Urban RNs
  – 1994 average age: 41.6 years/ 39.5 years
  – 2000 average age: 43.5 years/ 41 years

• All RNs
  – 1994 average age: 41.5 years/ 39.4 years
  – 1998 average age: 42.6 years
  – 2000 average age: 43.4 years/ 42 years
  – 2002 average age: 44.2 years
## Highest Education Level of RNs in Canada, 2000

(Source: RNDB)

<table>
<thead>
<tr>
<th>Education Level</th>
<th>Rural</th>
<th>Urban</th>
</tr>
</thead>
<tbody>
<tr>
<td>Diploma</td>
<td>81.4%</td>
<td>75.6%</td>
</tr>
<tr>
<td>Bachelor’s</td>
<td>18%</td>
<td>22.8%</td>
</tr>
<tr>
<td>Master’s/Doctorate</td>
<td>0.6%</td>
<td>1.7%</td>
</tr>
</tbody>
</table>

Note: The data for Master’s/Doctorate level for Urban is not available. 
Access to Care
Education of Nurses

Documentary Analysis Methods:

• conducted to achieve a contextual understanding of the policy and practice environment
• systematic collection and analysis of relevant documents according to the policy cycle: policy formulation, policy implementation and policy accountability (Rist, 1994)
• using this cycle, developed a guide to examine the materials
• located 200+ documents with input from advisory board - over 150 analyzed
Five Policy Areas Emerged
(Source: Doc. Analysis)

• Advanced practice—an overall move to support this initiative
• Nursing practice issues in Aboriginal Communities—support needed for aboriginal nurses and those who work in aboriginal communities
• Educational preparation—no additional infrastructure to support preparation of rural & remote nurses
• Physician supply—interprofessional context of practice has not been examined
• Health care delivery—support of telehealth but no funds or opportunity to use in educational institutions
Educational Preparation of RNs (Source: Doc. Analysis)

• Little information in available reports
• No government documents – provision of educational opportunities in rural sites
• Rural equated with accessibility issues regarding education
• Entry-level competencies - generic requirements
• Education for remote practice - advanced practice & First Nations health issues
• Education documents - programs with rural focus: UNBC, University of Saskatchewan, First Nations University of Canada

• No indication of any telehealth education occurring within nursing programs

• Nursing programs prepare graduates to be computer-literate but technology not always available or feasible in rural and remote settings

• Extended mentoring or orientation programs need consideration (documentary analysis) but do not replace basic education with employment mentoring (narrative)
General Comments and Advice
(Source: Narratives)

- Most basic education does not prepare new grads for rural and remote practice
- Rural health nursing needs to part of all basic nursing programs
- Need for reality-based education
- Part of curriculum offered in rural settings
- Educators who are specialized and experienced in rural practice
Quality of Care

• Community as Shaping Practice

• Scope of Practice
Quality of Care Community Shaping Practice

Narrative Approach:

• 152 Nurses (11 Francophone)
• Areas of Practice: Acute, Long-term Care, Public Health, Home-care, Community, Primary Care
• Telephone Interviews
• Analysis: interpretative phenomenology & thematic analysis
Community Shaping Practice
(Source: Narratives)

- Size, distance, demographics
- Expectations of communities
- Knowing the client in the context of community; the community in the context of the client
Quality of Care
Scope of Practice

Survey Method

• Mailed questionnaire with persistent follow-up
  (Dillman’s Tailored Design Method)

• Sample (N=3933)
  1) random sample of registered nurses (RNs) living in rural areas in all Canadian provinces
  2) total population of RNs who work in outpost settings or the northern territories
Sample Response Rates by Province and Territory (N=3933)

Source: 2001-2002 Nursing in Rural and Remote Canada Survey
Primary Care as Main Practice

- National level – 8.3%
- Territories
  - Nunavut – 20%; Yukon – 15.6%; NWT – 11.5%
- Provinces
  - Ontario – 13.5%
  - British Columbia – 10%
  - Newfoundland – 6.1%
  - Alberta – 5.7%
  - Quebec – 4.6%
  - Manitoba – 11.4%
  - Saskatchewan – 8.4%
  - New Brunswick – 6.1%
  - Nova Scotia – 4.9%
  - PEI – 0%
Advanced Decision-Making or Practice

- Total – 39.1%
- **Territories** – 47.8%
- **Provinces**
  - Ontario – 50%
  - BC/AB – 42.7%
  - SK/MB – 38.7%
  - Atlantic – 32.6%
  - Quebec – 31.0%
Health Promotion in Community

- **Total** – 48.6%
- **Territories** – 56.3%
- **Provinces**
  - BC/AB – 54.7%
  - Ontario – 52.7%
  - SK/MB – 49.3%
  - Atlantic – 44.9%
  - Quebec – 36.6%
### Main Area of Nursing Practice by Territory and All of Canada

*(n = 3493*)

<table>
<thead>
<tr>
<th>Practice Area</th>
<th>NU (%)</th>
<th>NT (%)</th>
<th>YT (%)</th>
<th>All of Canada (%)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Acute Care</td>
<td>40.0</td>
<td>51.5</td>
<td>44.2</td>
<td>44.4</td>
</tr>
<tr>
<td>Long term Care</td>
<td>---</td>
<td>7.3</td>
<td>8.4</td>
<td>17.7</td>
</tr>
<tr>
<td>Community Health</td>
<td>36.9</td>
<td>17.6</td>
<td>20.1</td>
<td>16.1</td>
</tr>
<tr>
<td>Home Care</td>
<td>1.5</td>
<td>5.5</td>
<td>5.2</td>
<td>8.7</td>
</tr>
<tr>
<td>Primary Care</td>
<td>20.0</td>
<td>11.5</td>
<td>15.6</td>
<td>8.3</td>
</tr>
<tr>
<td>Other</td>
<td>1.5</td>
<td>6.7</td>
<td>6.5</td>
<td>4.8</td>
</tr>
<tr>
<td><strong>Total n</strong></td>
<td>65</td>
<td>165</td>
<td>154</td>
<td>3493</td>
</tr>
</tbody>
</table>

*Survey question: “In which of the above practice areas do you spend most of your time?”

*Excluded here – education, administration, research*
## Advanced Nursing Practice by Territories and All of Canada (n = 3493)
(Source: Survey)

<table>
<thead>
<tr>
<th>Scope of Practice</th>
<th>NU (%)</th>
<th>NT (%)</th>
<th>YT (%)</th>
<th>All of Canada (%)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Advanced nursing practice and decision-making</td>
<td>68.9</td>
<td>43.5</td>
<td>50.3</td>
<td>39.9</td>
</tr>
<tr>
<td>Facilitation of community health promotion activities</td>
<td>63.5</td>
<td>52.5</td>
<td>53.0</td>
<td>47.8</td>
</tr>
<tr>
<td>Nothing in my day is routine</td>
<td>80.0</td>
<td>60.8</td>
<td>61.7</td>
<td>63.3</td>
</tr>
<tr>
<td>I am required to take on other roles depending on demand</td>
<td>46.2</td>
<td>54.2</td>
<td>59.1</td>
<td>58.2</td>
</tr>
<tr>
<td>I use protocols specific to ANP</td>
<td>64.6</td>
<td>44.0</td>
<td>37.7</td>
<td>36.9</td>
</tr>
<tr>
<td><strong>Total n</strong></td>
<td><strong>65</strong></td>
<td><strong>165</strong></td>
<td><strong>154</strong></td>
<td><strong>3493</strong></td>
</tr>
</tbody>
</table>
### Maternity Care by Territory and All of Canada (n = 3493)
(Source: Survey)

<table>
<thead>
<tr>
<th>Scope of Practice</th>
<th>NU (%)</th>
<th>NT (%)</th>
<th>YT (%)</th>
<th>All of Canada (%)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Pre-natal Care</td>
<td>72.3</td>
<td>45.5</td>
<td>43.5</td>
<td>35.1</td>
</tr>
<tr>
<td>Management of labor</td>
<td>60.0</td>
<td>30.9</td>
<td>16.9</td>
<td>22.8</td>
</tr>
<tr>
<td>Management of delivery</td>
<td>60.0</td>
<td>29.7</td>
<td>14.9</td>
<td>20.8</td>
</tr>
<tr>
<td>Post-natal care</td>
<td>78.5</td>
<td>52.1</td>
<td>44.2</td>
<td>40.5</td>
</tr>
</tbody>
</table>

| Total n                       | 65     | 165    | 154    | 3493              |
## General Diagnostic Tests
**by Territory and All of Canada (n = 3493)**
(Source: Survey)

<table>
<thead>
<tr>
<th>Scope of Practice</th>
<th>NU (%)</th>
<th>NT (%)</th>
<th>YT (%)</th>
<th>All of Canada (%)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Ordering diagnostic tests</td>
<td>63.1</td>
<td>39.4</td>
<td>36.4</td>
<td>28.5</td>
</tr>
<tr>
<td>Performing diagnostic tests</td>
<td>64.6</td>
<td>40.0</td>
<td>46.8</td>
<td>32.5</td>
</tr>
<tr>
<td>Interpreting diagnostic tests</td>
<td>69.2</td>
<td>42.4</td>
<td>48.1</td>
<td>35.0</td>
</tr>
<tr>
<td>Total n</td>
<td>65</td>
<td>165</td>
<td>154</td>
<td>3493</td>
</tr>
</tbody>
</table>
Medication and Referrals
by Territory and All of Canada (n = 3493)
(Source: Survey)

<table>
<thead>
<tr>
<th>Scope of Practice</th>
<th>NU (%)</th>
<th>NT (%)</th>
<th>YT (%)</th>
<th>All of Canada (%)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Prescribing medication</td>
<td>66.2</td>
<td>29.1</td>
<td>27.3</td>
<td>17.8</td>
</tr>
<tr>
<td>Dispensing (not administrating)</td>
<td>81.5</td>
<td>54.5</td>
<td>51.9</td>
<td>46.7</td>
</tr>
<tr>
<td>medication</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Direct referral to an allied</td>
<td>66.2</td>
<td>48.5</td>
<td>52.6</td>
<td>49.3</td>
</tr>
<tr>
<td>health professional</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Direct referral to a medical</td>
<td>52.3</td>
<td>22.4</td>
<td>23.4</td>
<td>21.9</td>
</tr>
<tr>
<td>specialist</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Total n</td>
<td>65</td>
<td>165</td>
<td>154</td>
<td>3493</td>
</tr>
</tbody>
</table>
Emergency/Acute Care
by Territory and All of Canada (n = 3493)
(Source: Survey)

<table>
<thead>
<tr>
<th>Scope of Practice</th>
<th>NU (%)</th>
<th>NT (%)</th>
<th>YT (%)</th>
<th>All of Canada (%)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Suturing</td>
<td>67.7</td>
<td>26.1</td>
<td>26.6</td>
<td>20.2</td>
</tr>
<tr>
<td>Taking X-rays</td>
<td>56.9</td>
<td>20.6</td>
<td>24.7</td>
<td>8.2</td>
</tr>
<tr>
<td>Casting/Splinting</td>
<td>66.2</td>
<td>32.1</td>
<td>31.2</td>
<td>25.4</td>
</tr>
<tr>
<td>Evacuating patients</td>
<td>83.1</td>
<td>55.2</td>
<td>45.5</td>
<td>37.0</td>
</tr>
<tr>
<td>Pronouncing death</td>
<td>55.4</td>
<td>21.2</td>
<td>29.9</td>
<td>41.8</td>
</tr>
<tr>
<td>Total n</td>
<td>65</td>
<td>165</td>
<td>154</td>
<td>3493</td>
</tr>
</tbody>
</table>
## Specific Diagnostic Tests by Territory and All of Canada (n = 3493)
(Source: Survey)

<table>
<thead>
<tr>
<th>Scope of Practice</th>
<th>NU (%)</th>
<th>NT (%)</th>
<th>YT (%)</th>
<th>All of Canada (%)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Performing pap smears</td>
<td>61.5</td>
<td>27.3</td>
<td>25.3</td>
<td>15.9</td>
</tr>
<tr>
<td>Audiometry</td>
<td>49.2</td>
<td>23.0</td>
<td>25.3</td>
<td>12.6</td>
</tr>
<tr>
<td>Refraction</td>
<td>21.5</td>
<td>7.9</td>
<td>5.2</td>
<td>3.8</td>
</tr>
<tr>
<td>Pulmonary function testing</td>
<td>36.9</td>
<td>20.0</td>
<td>15.6</td>
<td>12.4</td>
</tr>
<tr>
<td><strong>Total n</strong></td>
<td>65</td>
<td>165</td>
<td>154</td>
<td>3493</td>
</tr>
</tbody>
</table>
Advanced Nursing Practice
(source: Survey)

- 8% work in Primary Care
  (i.e., advanced practice/nurse practitioner)

- BUT 39% make advanced decisions on a daily basis

- AND less than 10% have advanced education
Sustainability of Care

• Predictors of Intent To Leave

• Migration of Nurses
Predictors of Intent To Leave
(Source: Survey)

• Individual
  – Sociodemographic & professional
  – Health (perceived stress)
  – Satisfaction with workplace & community

• Workplace
  -On Call
  -Advanced decision making

• Community
  -Remote setting
Retaining Rural Nurses
(source: Survey)

RNs who plan to leave their jobs were:

• Unsatisfied with job scheduling, level of autonomy & on call requirements
• More likely to be making advanced decisions & working in remote settings
• Less satisfied with the community where they work
Sustainability of Care

• Migration of Nurses
Major World Region Origins of the International Nursing Graduate RNs of Canada

Source: RNDB/CIHI, 2000
International Nursing Graduates
(Source: RNDB)

• In 2000 14,177 international nursing graduates were registered and employed in nursing in Canada
• 5.7% of international nursing graduates worked in rural Canada
• But this represented only 1.9% of rural RNs
• Therefore, our analyses focus on INTERNAL MIGRATION of Canadian-educated, rural RNs
Proportions (by Census Division) of Canadian-Educated, Rural RNs Who Graduated from a Different Province

% Migrants
- (No data)
- <10%
- 10-19%
- 20-29%
- 30-39%
- 40-49%
- 50+%

Source: RNDB 2000
## Percent Distribution of Rural RNs: Composition of Province/Territory of Registration by Province Graduation
(Source: RNDB)

<table>
<thead>
<tr>
<th>Province of Graduation</th>
<th>NL</th>
<th>PE</th>
<th>NS</th>
<th>NB</th>
<th>QC</th>
<th>ON</th>
<th>MB</th>
<th>SK</th>
<th>AB</th>
<th>BC</th>
<th>TR</th>
</tr>
</thead>
<tbody>
<tr>
<td>NL</td>
<td>100.0</td>
<td>1.8</td>
<td>2.9</td>
<td>0.5</td>
<td>0.0</td>
<td>0.5</td>
<td>0.5</td>
<td>0.2</td>
<td>1.0</td>
<td>0.9</td>
<td>12.8</td>
</tr>
<tr>
<td>PE</td>
<td>74.2</td>
<td>0.8</td>
<td>0.5</td>
<td>0.0</td>
<td>0.1</td>
<td>0.0</td>
<td>0.1</td>
<td>0.2</td>
<td>0.2</td>
<td></td>
<td></td>
</tr>
<tr>
<td>NS</td>
<td>10.6</td>
<td>83.0</td>
<td>2.9</td>
<td>0.0</td>
<td>0.8</td>
<td>0.5</td>
<td>0.3</td>
<td>1.0</td>
<td>1.2</td>
<td>5.8</td>
<td></td>
</tr>
<tr>
<td>NB</td>
<td>7.2</td>
<td>4.7</td>
<td>90.1</td>
<td>0.7</td>
<td>0.5</td>
<td>0.4</td>
<td>0.1</td>
<td>0.9</td>
<td>3.3</td>
<td></td>
<td></td>
</tr>
<tr>
<td>QC</td>
<td>0.7</td>
<td>1.6</td>
<td>2.5</td>
<td>97.9</td>
<td>1.9</td>
<td>0.4</td>
<td>0.2</td>
<td>2.2</td>
<td>3.3</td>
<td></td>
<td></td>
</tr>
<tr>
<td>ON</td>
<td>3.6</td>
<td>4.2</td>
<td>1.9</td>
<td>1.2</td>
<td>94.2</td>
<td>3.7</td>
<td>2.3</td>
<td>6.7</td>
<td>11.6</td>
<td>35.5</td>
<td></td>
</tr>
<tr>
<td>MB</td>
<td>0.7</td>
<td>0.8</td>
<td>0.2</td>
<td>0.0</td>
<td>0.9</td>
<td>88.4</td>
<td>5.2</td>
<td>3.2</td>
<td>4.1</td>
<td>7.9</td>
<td></td>
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<tr>
<td>SK</td>
<td>0.4</td>
<td>0.3</td>
<td>0.1</td>
<td>0.1</td>
<td>0.3</td>
<td>3.8</td>
<td>83.4</td>
<td>8.1</td>
<td>5.2</td>
<td>8.3</td>
<td></td>
</tr>
<tr>
<td>AB</td>
<td>0.7</td>
<td>0.9</td>
<td>0.4</td>
<td>0.5</td>
<td>1.6</td>
<td>7.3</td>
<td>75.3</td>
<td>14.1</td>
<td>14.9</td>
<td></td>
<td></td>
</tr>
<tr>
<td>BC</td>
<td>0.2</td>
<td>0.6</td>
<td>1.0</td>
<td>0.4</td>
<td>0.7</td>
<td>1.0</td>
<td>3.6</td>
<td>59.7</td>
<td>8.3</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
### Percent Distribution of Rural RNs: Province of Graduation Distributed Across Province/Territory of Registration

(Source: RNDB)

<table>
<thead>
<tr>
<th>Province of Graduation</th>
<th>NL</th>
<th>PE</th>
<th>NS</th>
<th>NB</th>
<th>QC</th>
<th>ON</th>
<th>MB</th>
<th>SK</th>
<th>AB</th>
<th>BC</th>
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<tbody>
<tr>
<td>NL</td>
<td>86.8</td>
<td>0.4</td>
<td>3.8</td>
<td>0.5</td>
<td>0.1</td>
<td>2.8</td>
<td>0.6</td>
<td>0.2</td>
<td>1.9</td>
<td>1.3</td>
<td>1.6</td>
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<tr>
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<td>0.1</td>
<td>3.9</td>
<td>0.5</td>
<td>0.3</td>
<td>0.5</td>
<td>1.8</td>
<td>1.3</td>
<td>0.6</td>
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<tr>
<td>NS</td>
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<td>87.2</td>
<td>2.3</td>
<td>0.1</td>
<td>3.9</td>
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<td>0.3</td>
<td>1.7</td>
<td>1.4</td>
<td>0.5</td>
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<td>0.1</td>
<td>0.1</td>
<td>0.3</td>
<td>0.6</td>
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<tr>
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<td>2.2</td>
<td>2.8</td>
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<td>0.7</td>
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<tr>
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<td>0.1</td>
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<td>4.4</td>
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<tr>
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<td>0.1</td>
<td>0.2</td>
<td>1.1</td>
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<td>11.5</td>
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<td>79.6</td>
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<tr>
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<td>7.0</td>
<td>86.0</td>
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</tbody>
</table>
## Correlates of Migration
(Source: RNDB)

<table>
<thead>
<tr>
<th>Correlates</th>
<th>% Migrants</th>
<th>Odds Ratio</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Gender</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Male</td>
<td>7.2</td>
<td>1.00</td>
</tr>
<tr>
<td>Female</td>
<td>12.0</td>
<td>1.31*</td>
</tr>
<tr>
<td><strong>Highest Nursing Education</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Diploma</td>
<td>11.0</td>
<td>1.00</td>
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<tr>
<td>Baccalaureate</td>
<td>14.9</td>
<td>0.90</td>
</tr>
<tr>
<td>Graduate Degree (MA/PhD)</td>
<td>24.0</td>
<td>1.55*</td>
</tr>
<tr>
<td><strong>Full-Time/Part-Time Employment</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Part-Time</td>
<td>10.8</td>
<td>1.00</td>
</tr>
<tr>
<td>Full-Time</td>
<td>12.7</td>
<td>1.07*</td>
</tr>
</tbody>
</table>
### Correlates of Migration (Continued)

<table>
<thead>
<tr>
<th>Correlates</th>
<th>% Migrants</th>
<th>Odds Ratio</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Place of Work</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Hospital</td>
<td>10.6</td>
<td>1.00</td>
</tr>
<tr>
<td>Nursing Station</td>
<td>34.4</td>
<td>2.40*</td>
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<tr>
<td>Nursing Home/Long-Term Care</td>
<td>10.4</td>
<td>0.69*</td>
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<tr>
<td>Home Care/Community Health Centre</td>
<td>14.1</td>
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<tr>
<td>Education/Association/Government</td>
<td>17.8</td>
<td>1.10</td>
</tr>
<tr>
<td>Other</td>
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<td>0.96</td>
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<tr>
<td><strong>Primary Responsibility</strong></td>
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<tr>
<td>Direct Care</td>
<td>11.9</td>
<td>1.00</td>
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<tr>
<td>Administration</td>
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<td>Teaching/Education</td>
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<td>1.41*</td>
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<tr>
<td>Research</td>
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<td>1.18</td>
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</table>
## Correlates of Migration (Continued)

<table>
<thead>
<tr>
<th>Correlates</th>
<th>% Migrants</th>
<th>Odds Ratio</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Position</strong></td>
<td></td>
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</tr>
<tr>
<td>Manager</td>
<td>14.5</td>
<td>1.00</td>
</tr>
<tr>
<td>Staff/Community Nurse</td>
<td>11.7</td>
<td>1.07*</td>
</tr>
<tr>
<td>Other</td>
<td>10.1</td>
<td>0.72*</td>
</tr>
<tr>
<td><strong>Metropolitan Influenced Zone</strong></td>
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</tr>
<tr>
<td>Strong MIZ</td>
<td>8.4</td>
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<tr>
<td>Moderate MIZ</td>
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<td>Weak MIZ</td>
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<td>1.31*</td>
</tr>
<tr>
<td>No MIZ</td>
<td>16.5</td>
<td>1.32*</td>
</tr>
</tbody>
</table>
Mobility of Rural Nurses

• By 2006, Canada is projected to lose the equivalent of 13% of the 2001 RN workforce through retirement and death (O’Brien-Pallas et al., 2003)

• BUT, up to 27% of Canada’s rural nurses have moved from their province of graduation (Survey)

• AND 20% of rural nurses plan to retire by 2007 (Survey)
Nature of Nursing Practice

Recognizing nurses and the complexity of rural and remote practice

• Access to Care
• Quality of Care
• Sustainability of Care
Who will be there for rural communities?

- Create a “rural practice lens” for relevant planning, policies and programs

- Partnerships between communities and health authorities are needed to successfully recruit and retain rural nurses

- Workplace supports in health authorities and agencies will enhance the retention of rural nurses

- Better supports are required for nursing education programs that prepare rural nurses
Contact Information

Project/Narratives:
Martha MacLeod
1-866-960-6409
e-mail: macleod@unbc.ca

http://ruralnursing.unbc.ca

Project Coordinator:
Donna Bentham, RN, BSN
e-mail: rrn@unbc.ca

Documentary Analysis:
Judith Kulig
(403) 382-7119
e-mail: kulig@uleth.ca

Survey: Norma Stewart
(306) 966-6260
e-mail: stewart@sask.usask.ca

RNDB: Roger Pitblado
(705) 675-1151 ext: 3355
e-mail: rpitblado@laurentian.ca