Research Question
What is the nature of nursing practice in rural and remote Canada?

Survey Methods
Survey mailed to 9,622 eligible nurses (RNs, NPs, RPNs, LPNs).
All nurses in the territories & stratified systematic sample in every province.
Canada-wide response rate: 40% (N=3,822)
Saskatchewan response rate: 43% (N=383)

Demographics
- 2% work in a fly-in community
- 57% work in a community <2,500
- 97% are female
- 21% are employed in a casual position
- 44% live in their primary work community
- 36% are 55 years of age or older

Highest nursing education
- RNs: 56% Diploma, 42% Bachelor’s, 2% Master’s
- NPs: 38% Diploma, 31% Bachelor’s, 31% Master’s
- LPNs: 100% Diploma
- RPNs: 88% Diploma, 12% Bachelor’s

Workplace
- 48% Hospital
- 30% Nursing Home
- 19% Community health
- 3% Other

Perceived scope
- RNs: 88% within, 6% beyond, 6% below
- NPs: 94% within, 6% beyond
- LPNs: 80% within, 5% beyond, 15% below
- RPNs: 86% within, 8% beyond, 6% below

Career plans
- Planning to leave position within the next 12 months:
  - 23% of all SK nurses
  - (27% of RPNs, 26% of RNs, 20% of LPNs, 6% of NPs)
- Of these nurses:
  - 49% plan to retire
  - 27% plan to nurse in a different remote/rural community

Rural SK Nurse Recruitment Factors
- Professional: advanced practice opportunities; career; interest in practice setting
- Job-related: benefits; flexibility of work; income
- Personal & Community: spouse employment/transfer; family or friends; lifestyle; location

Take Home Messages
- SK nurses were more likely to grow up in the country outside any city or town than rural Canada nurses.
- SK nurses were older than rural Canada nurses overall and the proportion of nurses who intend to retire in the next 12 months and five years was the highest in Canada.
- SK nurses were more likely to work in a nursing home than rural Canada nurses.
- The proportion of rural male SK nurses was lower than for Canada overall.
- This study makes an important contribution by providing a comprehensive overview of rural and remote nurses’ practice and communities within each Canadian province and territory.

Acknowledgements: Project led by Macleod, Stewart, and Kulig. We thank the nurses who responded to the survey and the Advisory Team, led by Penny Anguish.

For more detail, please see the SK fact sheet: http://ruralnursing.unbc.ca