

Snapshot

TOWARD

2020

VISIONS FOR NURSING

We're in a new place; we're not on the edge of the old place. We're not pushing the envelope; we're in a totally new envelope. So the rules have changed. Every fundamental premise of the old way of thinking no longer applies.

*Sister Elizabeth Davis
Chair, Canadian Health Services
Research Foundation, 2005*

This is a critical time in the evolution of Canadian society and specifically the Canadian health care system. Many Canadians are living longer, healthier lives than ever before. Our corner of the world is relatively safe, stable and prosperous. Advances in health care – from high-tech procedures to genomics to research on delivering services – have revolutionized patient care. However, these advances in health care have frequently been at the expense of other social programs. While the health care system has performed reasonably well in the past, there is evidence that it is not working well enough now either for those it serves or for those who work in it. The pace of change is relentless. Today's system has undeniable strengths, but it is not designed for the health needs of Canadians in 2020. We need to open the doors to new thinking and new solutions if we are to meet the health needs of Canadians in 2020.

EVOLUTION

Canadians will still need health-care in 2020 – indeed, demand for it will be greater – but it will be a very different kind of care, with a different role for nurses, than there is today. 2020 will be a fundamentally different world from the one we live in.

No one knows exactly what will happen in the future. But by considering what might happen, people can more rationally decide on the sort of future that would be most desirable and then work to achieve it.

Nurses are the largest group of health-care providers, but their services are nevertheless in short supply in some parts of today's health-care system. If we maintain current delivery models and levels of demand, then the shortages of nurses, physicians and other professionals being experienced in 2006 are unresolvable.

Nurses can be at the forefront of the coming changes, setting the agenda to create a responsive health-care system that truly serves and reflects the priorities of Canadians. But no one will appoint them to the task. *Toward 2020: Visions for Nursing*, lays the groundwork for a dialogue about nursing's part in planning health care for the 21st Century, and especially for the role nurses will play in that new system.

1 The system: health and illness care in 2020

- Self care and patient-led care are the norm. Health-care professionals are partners and consultants with patients and families in a "shared-care" model of responsibility and accountability for health and illness care.
- Every Canadian has a primary caregiver who may be a nurse, physician, social worker or other health professional in a community health centre or affiliated satellite.
- A range of health professionals provide gateways to primary care, and access to specialists and the broader primary health care system.
- More financial and human resources are directed to health and communities, less focus is placed on illness and hospitals.
- Every Canadian has a secure, portable and accessible electronic health record.

4 Nursing education in 2020

- Revolutionary changes in nursing education, curriculum, teaching and clinical placements have been implemented.
- A new national application centre tracks all nursing school applications, admissions, attrition and graduates for Canada.
- Interdisciplinary nursing education programs are in place with all nurses sharing common education for the first two years.
- Professional and academic masters' degrees and doctoral education streams are offered to meet the changing leadership expectations of nurses.

Toward 2020: Visions for Nursing is a futures study. It explores historical policy challenges facing Canada today and the role nurses could play in the health-care s

THE SCENARIOS...

2

The roles, scopes and practice settings of nurses in 2020

- Nurses act as health “shepherds”, coordinating care, delivering direct services, and helping patients to understand options and navigate the health system.
- The role of registered nurses and registered psychiatric nurses in primary care is greatly enhanced; licensed practical nurses have increased responsibility in long-term and transitional care.
- Health professionals do not carry out any tasks that can be accomplished safely by patients themselves (e.g. medication administration), by non-human care partners (e.g. robots) or by other human supports (e.g. personal support workers).

3

Nursing human resources: the number and mix of nurses in 2020

- The majority of nurses in all categories work in interdisciplinary teams.
- The majority of registered nurses and registered psychiatric nurses now work in settings outside acute hospital care.
- Absenteeism and overtime rates are the same as the rates for all other Canadian workers.
- 70 per cent of nurses in all categories have access to full-time positions or the equivalent.
- More nurses in all categories practice as certified specialists in institutional and community settings.

5

Ensuring responsiveness, quality and patient safety: regulating nurses in 2020

- Nurses in all categories hold pan-Canadian licences granted after graduation from accredited schools of nursing.
- No additional licensing examination is required after graduation with a diploma in practical nursing or degree in nursing or psychiatric nursing.
- A central licensing body regulates all nurses in the country in conjunction with satellite offices in each province and territory.

6

Diversifying nursing: careers in nursing for all Canadians

- At least 20 per cent of nursing leaders come from Canada’s Aboriginal and visible minority populations; at least 10 per cent of the nursing workforce is male.
- Outreach programs, purposeful recruitment and proactive hiring programs are in place to attract Aboriginal peoples, men and visible-minority Canadians.
- Undergraduate, graduate and continuing education curricula all have been adapted to reflect the diversity of Canada.
- All nursing regulatory bodies ask at licence renewal that members voluntarily state any ethno-cultural and language affiliation/status with which they wish to be identified.

REVOLUTION

...al events that shaped the Canadian workforce, and talks about the serious
...y. Most importantly, it suggests scenarios that envision the kinds of roles
...ystem of 2020 and beyond.

“If you’re not constructing your future,
your future is still being constructed.”

Tim Porter-O’Grady

Much of the study focuses on human-resources issues, from how nurses are educated and licensed to whether good use is being made of their training. Education, job design and responsibilities must change as the country moves from a traditional acute-care, illness-treatment model of health care, to one that will focus on keeping people well, with both care and support for maintaining health delivered in the community. Making that happen will mean breaking down divisions within nursing, and barriers between it and other professions.

If nursing and health care are to be ready for the health and social challenges of 2020, bold steps toward that future need to be taken. None of us can predict the future with precision, but we can look at patterns and trends, and take actions to shape some of them in our favour.

These ideas are just a starting point, a first step. We urge nurses across the country, and all those who teach them, work with them, employ them, plan for them and depend on them, to start preparing for 2020 now. It will be here very soon, ready or not. It would be so much better to be ready.

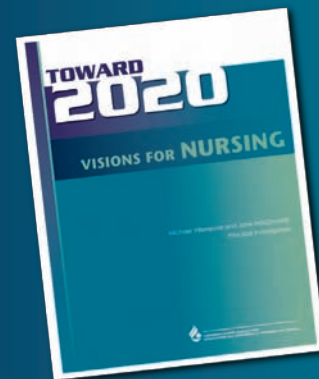
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To obtain a complimentary copy of the full report in pdf format, please send an e-mail with your return e-mail address to: 2020@cna-aiic.ca



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