

History of NP Role Development in Ontario

1960's

- 1965 - first NP program established at the University of Colorado
- 1967 - first education program for NPs working in northern nursing stations began at Dalhousie University, Halifax, Nova Scotia
- Canadas health care system was experiencing:
 - changing role of the nurse from generalist to specialist
 - a physician shortage (ratio 740:1) especially in rural areas
 - trend towards specialization in medicine, fewer MDs in primary care
 - emphasis on the curative aspects of medicine

1970's

- 1971 - Boudreau Report makes the implementation of the expanded role of the RN a high priority in Canada's health care system
- 1971 - first university program in Ontario to prepare expanded role RNs
- 1971 - Dr. John Hastings chairs the Community Health Centre Project in support of community based care in Ontario
- 1973 - NPAO established as an affiliated Interest Group of the Registered Nurses Association of Ontario with the mandate to lobby for the PHCNP role
- 1973 - CNA/CMA Joint Committee releases joint policy statement on the role of the NP
- 1974 - Lalonde Report supports some of the concepts of primary health care by recognizing the influence of determinants of health on societal health and well-being and the role of the RN in health promotion and disease prevention
- 1975 - Ontario Council of Health releases *The Nurse Practitioner in Primary Care* with recommendations about necessary legislative changes and remuneration issues

1980's

- Early 1980s - first NP initiative ends because of: perceived physician oversupply, lack of remuneration mechanisms, lack of legislation, lack of public awareness regarding the role and lack of support from both medicine and nursing
- 1980s into early 1990s - some 250 NPs continue to work mainly in community health centres and in northern nursing stations; their educational preparation and responsibilities vary greatly
- 1983 - last NP education program closes at McMaster University, Hamilton, Ontario
- 1988 - CNS-NP role implemented in Level 3 NICUs following reduction in number of Pediatric Residents
- In spite of failure of the first initiative, NP role consistently cited in the recommendations of many provincial health care commissions and task forces
- Government continues efforts to focus the health care system to disease and injury prevention, health promotion and community-based care
- NPAO continues to actively lobby to re-establish educational programs in Ontario and for the recognition of the NP role as a viable member of the Ontario health care system.
- Development of first ACNP Program, "Expanded Role Nurse" program - Neonatology

1990's

- 1993 - Minister of Health and NDP government announce a new Nurse Practitioner Initiative as part of improving access to primary health care. The project involves:
 - commissioning several significant discussion papers (*Utilization of Nurse Practitioners in Ontario, Sept. 93; The Clinical Nurse Specialist, Clinical Nurse Specialist/Nurse Practitioner and Other Titled Nurse in Ontario, Nov. 94; Assessment of the Need for Nurse Practitioners in Ontario, Jan. 94*)
 - establishing a Steering Committee with five sub-committees: fiscal, publicity and public relations, placement and service patterns, laws and regulations, and education; with release of its recommendations in July 1994
 - consulting with key stakeholders in the health care delivery system through focus groups
 - supporting the development of a university- based post-baccalaureate education program with funding for the first five years
 - establishing and funding a five year evaluation project to review the education program, the placement of NPs, and the impact NPs have on the health care system

- December 1994 - "*Nurse Practitioners in Ontario: A Plan for their Education and Employment of NPs*" is released with specific steps for implementation; it proposes a salary range of \$60-80,000 per annum
- 1994 - College of Nurses of Ontario (CNO) approves a new class of registration in the RN category, the Extended Class
- 1994 - Council of Ontario University Programs in Nursing (COUPN) involving a consortium of 10 nursing faculties develops the new PHCNP Program
- 1995 (April) - CNO refers proposed legislation changes to the Health Professionals Regulatory Advisory Council (HPRAC)
- 1995 (September) - the PHCNP education program begins
- 1996 - first graduates of the PHCNP program.
- 1996 (June) - following extensive consultation with the public and health care professionals, HPRAC releases 8 recommendations in support of legislative authority for PHCNP.
- 1997 (April) - Bill 127, the *Expanded Nursing Services for Patients Act* receives first reading
- 1997 (June) - final reading of Bill 127 receives unanimous support of all three political parties
- 1997 (September) - University of Toronto, Masters of Nursing offers two program streams: Acute Care NP Adult Health and Acute Care NP Child Health
- 1998 (February 18) - Bill 127 proclaimed
- 1998 (April) - NPAO expands its mandate to include all nurse practitioners 1998 - CNO initiates the Extended Class registration process with first registrants
- 1998 (November) Initial ACNP meetings to identify common issues and plan strategies to support the role
- 1998 - Minister of Health and Conservative government announce release of \$5 million for PHCNP positions in community based agencies including community health centres, aboriginal health access centres, and nursing stations.
- 1998 (September) Minister appoints Nursing Task Force in response to growing concerns about the instability of the current nursing workforce; is NPAO submission discusses the role of both the PHCNP and ACNP
- 1999 (February) - Nursing Task Force Report is released
- 1999 (March) - Minister of Health announces support for recommendations of Nursing Task Force including -investment of \$375 million in nursing, including 106 PHCNP positions (80 in Underserved Areas and 20 positions in long term care homes)
- 1999 - Ministry of Health extends COUPN funding for another 5 years
- Teaching hospitals express interest in ACNP role for acutely ill patients related to decreasing numbers of medical house staff and resident physicians
- Development of Post-Masters ACNP certificate programs Toronto and London