FACT SHEET: Trends for Registered Practical Nurses in Ontario*

This fact sheet highlights the Registered Practical Nurse (RPN) workforce trends in Ontario reported in “Stepping to Success and Sustainability: An Analysis of Ontario’s Nursing Workforce”. The full report is available on line at http://www-fhs.mcmaster.ca/nru or www.hhr.utoronto.ca

RPN Numbers Increasing but Shortage on the Horizon
Recent fluctuations in the supply of RPNs working in Ontario are evident. In 2000, the number of RPNs reached its highest level in eight years at 26,177. A slight drop in 2001 was followed by 1.8% increase in 2002 to 25,573. Although the number of RPNs is rising, utilization based estimates adjusted for acuity predict that by 2008, Ontario will have a potential shortfall of 3,823 to 4,025 RPNs in the hospital sector alone.

RPNs are Aging, High Retirement Rates Pending
• In 2001, 31% of the RPN workforce was over 50 years of age. About 75% of the RPNs who are working full-time are 40 or older. Only 3% of RPNs are between the ages of 20 and 24.
• In an analysis of retirement and death rates, Ontario is predicted to lose 5,125 RPNs by 2008 assuming RPNs work until age 65; but if they retire at age 55, expected losses nearly double to 9,131. These losses are of concern since the demand for RPNs, especially in the community and long-term care sectors, is expected to intensify in order to service the increasing health needs of our aging population.

RPN Enrollments Beginning to Recover
• During the 1990s, the number of RPN graduates from Ontario RPN programs fluctuated yearly from a high of 1,137 in 1993 to a low of 831 in 1999. In 1998, admissions bottomed which may have been due to perceived job insecurity as a result of restructuring initiatives. Admissions have since steadily increased, but have yet to return to 1992 levels.
• Since 1997, RPN applications have risen steadily; a significant increase in 2002 may be attributable to the effect of Ontario’s double cohort of post-secondary applicants.

Employment Trends: Majority of RPNs are Part-Time
• Fewer RPNs now work in full-time and casual positions than in previous years. The number of part-time RPNs increased about 30% from 1992 to 2002.
• In 2002, among RPNs aged 20-65, 48.6% (11,623) worked full-time, 38.9% (9,289) worked part-time, and 12.4% (2,980) worked on a casual basis.
• Younger RPNs tend to work on a part-time or casual basis. Among RPNs under 40, part-time work is the predominant form of employment.
• Of RPNs seeking employment, a greater number are now looking for work in nursing than prior to 1994, when many sought non-nursing employment. However RPNs are more likely than RNs to be working in a non-nursing capacity (8.5% vs. 5.4%).

Impact of Reliance on Part-Time Employment
Nurses working part-time are available for fewer hours of work than full-time nurses. Thus, the public’s access to nursing care is reduced. Additionally, part-time schedules alter continuity of care (frequency with which the same RPN cares for the same client). High continuity of care has been shown to be beneficial. For example, in the community, high continuity was associated with improved client knowledge levels and cost savings since clients required fewer home visits.

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RPNs’ Practice Settings Shifting to Community and Long-Term Care

• A significant trend during the last 10 years is the gradual shift of the RPN workforce from the hospital to the community.
• Fewer RPNs (45.2%) worked in hospitals in 2002 than in 1992 (61.1%). RPNs employed within the hospital sector were more likely to be found in chronic care facilities than in general or rehabilitation hospitals. Between 1992 and 2002, more RPNs reported working in long-term care, community care, and in other categories (see Figure). However, the number of full-time RPN positions is also declining in community, small, and teaching facilities.

Trends in Community Especially Pronounced

• Although the overall proportion of RPNs working in the community sector is on the rise, rates of turnover tend to be high. For example, the percentage of RPNs who remained working in the community declined from 76.9% in 2000 to 65.4% in 2001. Of those who left the community sector in 2001, 15.4% left nursing altogether.
• RPNs in the community are more likely to hold two jobs than those employed in hospitals and long-term care. RPNs were also more likely to have multiple employers in 2001, compared to 1999 and 2000.

Immigration: Fewer RPNs Arriving

During the 1990s, significantly fewer RPNs migrated from other countries and provinces. Declining immigration is usually linked to diminishing job opportunities, which may result from hospital closures, downsizing, and greater use of unregulated personnel in Ontario.

Recommendations to Address Ontario Workforce Issues for both RNs and RPNs

• Assess the population’s ongoing and future need for nursing services.
• Increase enrolment in nursing programs.
• Increase nurse participation rates (retention) and make more effective use of existing resources.
• Avoid using layoffs to deal with short-term financial problems in the health care system.
• Address workload issues and provide quality workplaces.
• Continue work on a health human resource planning framework that takes into account the link between quality work environments, the ability to recruit and retain health professionals, and population health outcomes.


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