A Framework for Integrating Internationally Educated Nurses into the Healthcare Workforce

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EXECUTIVE SUMMARY

A Framework for Integrating Internationally Educated Nurses into the Health Care Workforce was an initiative designed to answer the call for proposals by the Ontario Ministry of Citizenship and Immigration (MCI) Category 3: Changing Systems: Bridging Projects for Institutional Change Initiatives – Fair and Effective Processes. The Nursing Health Services Research Unit at McMaster University worked in partnership with the Ontario Hospital Association to enhance the effective integration of internationally educated nurses (IENs) into the health care workforce through the creation, implementation and evaluation of a web-based leading practice guide targeting employers.

Three-year funding was granted by the MCI and the Federal Department of Citizenship and Immigration Canada. The project was designed in three phases and development occurred between April 2010 and March 2013. The following products were produced:

- A web-based leading practice guide;
- A quick reference flipbook that presents a hard copy snapshot of the website; and
- Province wide field-testing workshops entitled, "The Path to Integration: A Workshop for Employers of Internationally Educated Nurses."

The products provide health care employers and stakeholders with successful strategies to recruit, retain and integrate IENs into their workforce to meet future demands. Policies and leading practice examples are also provided to facilitate mentorship and orientation.

The web-based guide has been shared with over 2500 stakeholders; 2755 flipbooks have been mailed to health care employers, educators, IENs, settlement organizations and other stakeholders. Close to 90 human resources leaders, nursing leaders, researchers. Immigration specialists and educators from 45 organizations participated in the targeted field-testing workshops. An in depth evaluation of these products demonstrates they have been received positively.
INTRODUCTION

OVERVIEW OF THE PROJECT

A Framework for Integrating Internationally Educated Nurses into the Health Care Workforce was a collaborative project of the Ontario Hospital Association (OHA) and the Nursing Health Services Research Unit at McMaster University. The project was designed in three phases across three years (April 2010–March 2013):

1. Phase One (Development) – A draft guide was created from a literature review and key stakeholder interview findings. The guide was evaluated for applicability to a wide range of settings through interactive think tank workshops with human resource (HR) leaders, nursing leaders, immigration specialists and educators.

2. Phase Two (Dissemination) – The guide was widely disseminated, a quick reference readily available flipbook version created, and field-testing workshops were designed.

3. Phase Three (Demonstration) – Field-testing workshops of specific leading practices from the guide occurred in four demonstration sites in order to further enhance the guide. The evaluation and iterative revision ensures the guide remains current.

The aim of the project was to facilitate the integration of internationally educated nurses (IENs) into a more diverse health care workforce through the creation, implementation and evaluation of a leading practice guide for employers. A Project Advisory Committee (PAC) was established to direct the initiative and was comprised of the lead project researcher from the NHSRU (McMaster University site), OHA staff and participants from six Ontario hospitals.

The role of the PAC was to review background material and evidence to be used to populate the web-based leading practice guide. The committee was instrumental in the dissemination phase. Members participated in the field-testing workshops and provided input and feedback on the work plan, research findings, guidelines, communication, marketing and evaluation, particularly with respect to both local and employer needs. Appendix 1 outlines the PAC composition and organizational chart.
CONTEXT

Federal and provincial government interests and investments in internationally educated professionals facilitate understanding of the employment situation for IENs, identify gaps and provide resources to address employment barriers (see Appendix 2). Based on labour market trends, the number of IENs seems to be increasing (see Appendix 3). Internationally trained nurses resident in Ontario have the potential to alleviate shortages in the health care sector. However, some of these nurses have difficulty becoming registered or integrating into the workforce. Thus, resources to help employers recruit and retain this valuable cohort are essential.

PHASE 1: DEVELOPMENT

A draft of the leading practice guide for employers was created based on a review of the literature and the issues and barriers related to IEN employment (see Appendix 4). Quantitative methods included a survey of OHA members to provide baseline data about IEN employment and programs for integration. Qualitative methods included semi-structured interviews with stakeholders to highlight information gaps, describe IEN-specific initiatives and strategies and identify where guidance is required. Document analysis and secondary database analysis were also conducted. Both content and face validity were performed.

The survey targeted chief/executive nursing officers and HR managers (see Appendix 5). The aim was to identify resources and best practices that exist in Ontario hospitals and determine what topics should be included in a guide for IEN employers. The interviews (Appendix 6) targeted chief nursing officers, nursing directors, unit managers, HR representatives and educators. The aim was to identify best practices for recruiting and integrating IENs into the workforce. The project focused on Ontario employers, but bridging program educators and regulatory body members were also included to obtain a more comprehensive view.

The rationale of the study was outlined to all participants and informed consent was obtained. The research instruments underwent the necessary ethics review process and received final approval from the Hamilton Health Sciences Research Ethics Board. Participants were guaranteed anonymity. Specific organizations were spotlighted for their leading practices.
These organizations had the opportunity to review and provide feedback on all documents and related information posted on the website, captured in reports or presented at conferences/meetings. A detailed description of the analysis is provided in Appendix 7.

As stated, secondary databases were analyzed. Internationally educated registered nurse (RN) and registered practical nurse (RPN) trends from 2007 to 2011 were analyzed using the Canadian Institute for Health Information Nursing database. The College of Nurses of Ontario regulatory database was used to analyze Ontario-specific internationally educated RN and RPN employment and education data.

WEB-BASED LEADING PRACTICE GUIDE AND FLIPBOOK

Practice Guide
The leading practice guide included principles and strategies, case studies of health care employers with successful practices and policies to integrate IENs and other internationally educated health professionals (IEHPs) and national/provincial resources available to employers and IENs. In acknowledgement of the ethical recruitment statement of HealthForceOntario and other health care stakeholders, guidelines pertain to IENs who have already obtained Canadian residency.

Practice Guide Testing: Interactive Think Tanks and Conferences
To test the initial version of the practice guide, HR leaders and chief nursing officers from diverse health care organizations across Ontario participated in interactive think tank forums. The NHSRU and the OHA hosted three sessions in September 2011, which focussed on the following:
1. What organizations would like to accomplish over the next year related to workforce integration of IENs;
2. Questions that surfaced for participants after reading the document;
3. Most relevant parts of the draft for the organizations regarding the integration of IENs into the workforce; and
4. What the authors could do to make the web guide more relevant to organizations.
The think tanks were held in London, Toronto and Ottawa with a total of 61 participants. Supplement 1 provides a full report and evaluation of the sessions. Based on the evaluations, the participants appreciated the opportunity to learn about the web guide's resources and to learn from each other's experience. Other supports that participants thought could advance the integration of IENs included orientation funding, continued exchange of ideas and resources and highlighting success stories. Their suggestions were incorporated in different media (e.g., taped interviews) and the inclusion of success stories on the website. In addition, the research team showcased the project and practice guide at several conferences and sought advice from interested parties who helped enhance aspects of the website content (see Appendix 8).

**Re-Launch of the Website**

Based on feedback from PAC, the think tanks and the conferences, the research team decided to improve the web guide. A targeted approach was used to refine the website. An expert was hired to work on the design and information architecture. Once the sections were reorganized, they were presented to key stakeholders who signed off on the new information design. The reorganized sections are shown in Figure 1. Specific content under each main heading/title was revised where necessary. The *Internationally Educated Nurses: An Employer's Guide* website (http://ien.oha.com) was re-launched May 2012. Figure 2 provides a "screen grab" from the revised website.

**Figure 1. Website section changes from the original to the revised website.**

<table>
<thead>
<tr>
<th>Original Website Sections</th>
<th>Revised Website Sections</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Workforce Diversity</td>
<td>1. Hiring IENs</td>
</tr>
<tr>
<td>2. Regulatory Environment</td>
<td>2. Recruitment</td>
</tr>
<tr>
<td>3. Bridging to Employment</td>
<td>3. Orientation</td>
</tr>
<tr>
<td>4. Recruitment</td>
<td>4. Ongoing Support</td>
</tr>
<tr>
<td>5. Entry and Orientation</td>
<td>5. Requirements for IENs</td>
</tr>
<tr>
<td>6. Retention</td>
<td>6. Case Studies</td>
</tr>
<tr>
<td>7. Case Studies</td>
<td>7. Resource Centre</td>
</tr>
<tr>
<td>8. Useful Resources</td>
<td></td>
</tr>
</tbody>
</table>

10
Figure 2. Screen grab of the main page of the Internationally Educated Nurses: An Employer’s Guide website.

Flipbook

The original proposal described both a "print and web-based guide to integration of IENs into the workforce for employers." The research team discovered the Ontario Ministry of Labour Evacuation and Event Response Procedures manual in a format that aligned with the web guide information (Ontario Ministry of Labour, 2011). The *Internationally Educated Nurses: An Employer’s Guide* flipbook was created as an accessible, convenient resource for those who do not have regular Internet access or time to browse the Internet. It can also be used in meetings and presentations. Officially launched in January 2013, 2755 copies have been distributed to over 1200 health care organizations across the province. The flipbook provides general highlights of the website content and directs users to the website for more detailed information. A PDF copy of the book can be obtained via the website (see Supplement 2).

**PHASE 2: DISSEMINATION**

Following revisions and refinements in Phase 1, the web-based guide and flipbook were disseminated. The process of knowledge translation and exchange (KTE) was vital for this project. It provided a framework for the synthesis, dissemination, exchange and evaluation of
the products produced. A structured IEN dissemination schedule and plan was created and continuously updated throughout the span of the project (see Appendix 10).

The project was featured at a number of conferences and seminars in Ontario and across Canada:

- Celebrating Innovations in Health Care Expo
- Integration of New Nurses Conference
- Leading Healthcare Quality Summit & Innovations Expo
- Ministry of Health and Long-Term Care Research to Policy Dialogue
- OHA’s Annual HR Symposium
- OHA’s HealthAchieve
- 6th National Conference for Educators, Provincial Regulators and Employers of IENs

Various methods were used, including poster boards, live presentations, postcards, brochures and website demonstrations. Effective communication and knowledge translation were crucial for engaging stakeholders during each stage of the project. Target audiences included the following:

- Chief nurse executives/chief nursing officers
- HR professionals and leaders responsible for patient care
- IEN bridging/training programs
- IENs
- Local Health Integration Networks
- Ministry of Citizenship and Immigration
- Ministry of Health and Long-Term Care
- Professional bodies
- Senior government leaders, including the Ontario Minister of Health, deputy ministers and assistant deputy ministers
- Senior government officials responsible for policy development
- Union organizations
A series of email blasts related to the project were disseminated to stakeholders between September 2011 and February 2013. They included information on the think tanks, research forums, field-testing workshops, the website launch and re-launch and the online workshop recording. The project was advertised on hireimmigrants.ca, OHA's website, MCI's website, the CARE Centre for Internationally Educated Nurses website and OHA's Facebook, Twitter and Linked-In accounts. It was featured in Canadian Healthcare Manager, Canadian HR Reporter, Hospital News and the Ontario Health Promotion E-Bulletin. Stakeholders were also reached through telemarketing, hard copy mail outs and networking.

PHASE 3: DEMONSTRATION

DESIGN, IMPLEMENTATION AND RESULTS OF FIELD-TESTING WORKSHOPS

"The Path to Integration: A Workshop for Employers of Internationally Educated Nurses" was presented in Toronto, Niagara, Ottawa and Windsor. A recording of the workshop was made available on the OHA website for those in northern communities and others who were unable to participate in person. The PAC provided input on the structure and content for the workshop and some members participated by attending or presenting. A series of planning meetings were held with the PAC and the workshop presenters in order to ensure the maximum benefit to participants.

The OHA used various communication and marketing strategies to encourage participation in the half-day sessions, which provided health care employers with strategies to help recruit, retain, integrate and mentor IENs. The sessions included presentations by the CARE Centre for Internationally Educated Nurses and organizations that have implemented successful policies and practices targeting IENs (e.g., St. Michael's Hospital and Hamilton Health Sciences). The sessions also included an overview of the current trends in immigration and the labour market within the various areas in which the workshops were held. Supplement 3 provides an example of a brochure used for advertising the workshop and outlining the agenda. Participants included HR leaders, nursing leaders, immigration specialists and educators from over 40 organizations (see Table 1).
Table 1. Workshop Participant Breakdown

<table>
<thead>
<tr>
<th>Area</th>
<th>Employers*</th>
<th>Educators (University/College)</th>
<th>Regulator</th>
<th>Immigration, Government, Community Agency</th>
<th>Total Participants</th>
</tr>
</thead>
<tbody>
<tr>
<td>Toronto</td>
<td>25</td>
<td>3</td>
<td>1</td>
<td>8</td>
<td>37</td>
</tr>
<tr>
<td>Niagara</td>
<td>3</td>
<td>3</td>
<td>1</td>
<td>2</td>
<td>9</td>
</tr>
<tr>
<td>Ottawa</td>
<td>4</td>
<td>2</td>
<td>2</td>
<td>6</td>
<td>14</td>
</tr>
<tr>
<td>Windsor</td>
<td>3</td>
<td>2</td>
<td>0</td>
<td>5</td>
<td>10</td>
</tr>
<tr>
<td>Total</td>
<td>35</td>
<td>10</td>
<td>4</td>
<td>21</td>
<td>70</td>
</tr>
</tbody>
</table>

Notes: (i) *Includes representation from mental health, public health, community hospitals (small and large), mall academic health science centres/teaching hospitals, northern and urban hospitals, Community Care Access Centres, long-term care and nursing homes.

(ii) The breakdown of organizations above does not include project team participants and presenters who represent six different organizations (1 healthcare association, 2 hospitals, 1 educator/university/college, 1 immigration/government/agency); estimated range of 70–90 participants in the workshops when presenters and research team members are included.

EVALUATION

The evaluation framework included an iterative component embedded in each phase of the project along with a formal outcome evaluation component. Surveys and interviews were conducted with health care HR staff and nursing leaders in Ontario. Workshop attendees completed evaluation questionnaires. The survey was part of the field-testing and targeted both workshop and think tank attendees, hospitals in the four Ontario Local Health Integration Networks with the highest number or IENs (i.e., Toronto Central, Central, Mississauga-Halton and Central East) and IEN bridging programs (see Appendix 11). The interviews targeted users of the website and included workshop attendees and survey participants (see Appendix 12).

The research team used the results from the websites and questionnaires and feedback from the interviews to evaluate the products (web guide, flipbook and workshops) and determine whether the information on the website was relevant and valid. Google Analytics (GA)* was used to identify pages, areas and sections of the site that were most frequently visited and to provide statistics on overall website traffic. The iterative component provided guidance for

* This is a powerful digital analytics tool that provides website traffic trends (i.e., where users leave the site, which pages retain visitors the longest).
continuous improvement throughout the three years of the project. The outcome evaluation component at the end of the three years revealed what is working and suggested further refinements.

**WEBSITE EVALUATION**

The website evaluation survey was sent to 197 stakeholders via email. Three reminder emails were sent every seven days following the initial email. Data collection occurred between January 2013 and February 2013. Upon completion of data collection, cleaning and refinement, 56 valid responses remained out of 188 valid potential responders for a 30% response rate.

**General Respondent Demographics of the Online Survey**

Data analysis revealed that 57% of respondents were RNs and 43% were non-nurses. The majority (91%) were educated in Canada with 90% from Ontario and the remaining 10% equally from Alberta, Manitoba and Quebec. The 9% who were IENs were from Romania, the Philippines and the United States. The majority of responders were employers (46%) in a hospital setting (41%). Close to one-third (31%) of all respondents were either HR specialists or HR leaders. The respondents indicated that they heard about the website mostly through the workshops (44%) and email blasts (40%).

**Experience Using the Website**

Seventy-eight percent of the survey respondents agreed/strongly agreed that the website provided them with sufficient information. Eighty-four percent agreed/strongly agreed that the website offers information they found useful. More than 70% of respondents found the design of the website appealing and 80% indicated that the information was easy to understand. Over 80% said they anticipate using the website again in the future.

In the interviews, several users stated that the website had "a great layout with great headings" and was "appealing to look at and easy to navigate." Users also reported that the website was not overloaded and was well organized in terms of flow and information. The search option was positively reviewed and many indicated that the set-up of the website helped them find the necessary information easily.
All interview participants indicated they would recommend the web guide to others. When asked what they liked best about the website, they cited the following:

- "easy to read"
- "very clear"
- "robust, concrete information"
- "everything is in one place"
- "great flow, information very consistent, right amount of information...easy to navigate"
- "very good information, very precise"
- "liked the variety – lots of topics"
- "great resource, great links"
- "topics well outlined, well laid out, very intuitive"

**Opinions on Specific Content of the Website**

The survey asked users to rate specific content of the website in order for the researchers to evaluate if the headings and information within the headings was relevant. According to Table 2, at least three-quarters of the users agreed/strongly agreed that content for all seven website headings was useful. Ongoing Support and Requirements for IENs received the highest ratings. Although the Case Studies and Recruitment received the lowest ratings, at least three quarters of respondents agreed/strongly agreed they were useful.

A small percentage of users disagreed/strongly disagreed that the Requirements for IENs section was useful. It was suggested that the site should be clearly partitioned for the "end user" (i.e., information for IENs versus information for employers). This will be a future consideration. As per the mandate of the project, the primary target audience was employers, with relevance to other stakeholders (i.e., IENs, educators, regulatory bodies, government).
Table 2. Percentage of Respondents Rating the Content of the Practice Guide (2013)

<table>
<thead>
<tr>
<th>Website Content</th>
<th>Strongly Disagree/Disagree (%)</th>
<th>Neutral (%)</th>
<th>Strongly Agree/Agree (%)</th>
<th>Not Applicable (%)</th>
<th>Total (%)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Hiring IENs</td>
<td>2</td>
<td>13</td>
<td>80</td>
<td>5</td>
<td>100</td>
</tr>
<tr>
<td>Recruitment</td>
<td>2</td>
<td>14</td>
<td>77</td>
<td>7</td>
<td>100</td>
</tr>
<tr>
<td>Entry and Orientation</td>
<td>2</td>
<td>14</td>
<td>80</td>
<td>4</td>
<td>100</td>
</tr>
<tr>
<td>Ongoing Support</td>
<td>2</td>
<td>13</td>
<td>82</td>
<td>4</td>
<td>100</td>
</tr>
<tr>
<td>Requirements for IENs</td>
<td>4</td>
<td>11</td>
<td>82</td>
<td>4</td>
<td>100</td>
</tr>
<tr>
<td>Case Studies</td>
<td>2</td>
<td>14</td>
<td>75</td>
<td>9</td>
<td>100</td>
</tr>
<tr>
<td>Resource Centre</td>
<td>0</td>
<td>15</td>
<td>80</td>
<td>5</td>
<td>100</td>
</tr>
</tbody>
</table>


The following is a summary of what users said when asked to provide insight into the content of the website. One user indicated that the website had a "helpful framework for assessment recognition" and assisted her with clients who call and require this information. Another used the resources section for her Master's work and, at the same time, began to "prepare a preceptor orientation guide" for her employer.

The live examples, success stories and links/resource centre were highly regarded by most interviewees. One said she had recommended the link to IENs from Jordan and India and they "loved it." Another interviewee noted that,

Equity and Discrimination may be an issue depending on how it is perceived...instead of building...[a case for hiring IENs], it might put some off. Perhaps rephrasing this title may be helpful so it doesn't appear as a liability to hire IENs.

This has been flagged for future investigation.

Respondents were asked if they used the information, strategies or tips provided on the website, one-third indicated they had. Areas of particular interest included case studies, the resource centre, hiring practices, hiring/recruitment tips and integration resources. When asked if they had developed, implemented or are implementing policies or practices to improve the integration of IENs, 32% provided some explanation regarding the stages of development.

The range started from the brainstorming phase of how to implement the hiring of IENs to the
integration/transition of hiring IEN students into clinical placements and promoting clinical sites.

Some respondents indicated they developed a special unit to help IENs transition to the workplace, while others have created a Human Rights and Diversity Department. Some have begun looking at providing case management and employment workshops for IENs, along with other programming possibilities. Forty-four percent of respondents explained how they or their organization has benefited from the project. Table 3 provides synopsis of these benefits.

Table 3. Benefits of the Web-Based Leading Practice Guide to Responders and Their Organizations (2013)

<table>
<thead>
<tr>
<th>Benefit</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>A lot of information has been used in our curriculum and in connecting with organizations that will have our immigrant students on practicum</td>
<td></td>
</tr>
<tr>
<td>Attending conference and learning about integration/onboarding of IENs into the workplace.</td>
<td></td>
</tr>
<tr>
<td>Created/increased awareness</td>
<td></td>
</tr>
<tr>
<td>Education and access to information</td>
<td></td>
</tr>
<tr>
<td>Feedback related to language</td>
<td></td>
</tr>
<tr>
<td>Gaining knowledge and understanding of the issues around the hiring of IENs</td>
<td></td>
</tr>
<tr>
<td>Got us started on our own project</td>
<td></td>
</tr>
<tr>
<td>Help employers with information regarding IENs and the potential for them to be hired is improving</td>
<td></td>
</tr>
<tr>
<td>Helped us see what education is needed for IENs</td>
<td></td>
</tr>
<tr>
<td>Highlights IENs and the rigor for entry to practice and importance of integration issues</td>
<td></td>
</tr>
<tr>
<td>Information in one place</td>
<td></td>
</tr>
<tr>
<td>Knowledge exchange and sharing information</td>
<td></td>
</tr>
<tr>
<td>Learning about how other organizations are handling the hiring of IENs</td>
<td></td>
</tr>
<tr>
<td>We are referring (IEN) students to the site</td>
<td></td>
</tr>
<tr>
<td>Reflecting on our curriculum and how it prepares IENs for the workplace</td>
<td></td>
</tr>
<tr>
<td>(We) will integrate some learning into our existing programs geared toward internationally educated staff (interprofessional) and as a resource kit for managers/leaders to refer to when hiring</td>
<td></td>
</tr>
</tbody>
</table>


Interviewees were asked if they had developed, implemented or are implementing policies and practices to improve integration of IENs into their organization. The majority reported that they had not implemented any strategies or policies because they were in the investigative stage and trying to engage management/leadership to look into this potential pool of new hires. Several indicated that they used the website for the resource centre and to direct clients who
call and require assistance/information. Through attending the field-testing workshops, two interviewees discovered potential financial resource (i.e., New Graduate Guarantee reinvestment funds), and they have begun investigating the possibilities with management.

One interviewee indicated she "would certainly look at the website for tips, especially in the area of how to integrate IENs into the environment--particularly for the managers and hiring panel, not just HR who generally know." One organization in a rural area reported,

[We] used it [i.e., the website] when we first started to look at IENs to get an idea of what you need to do...lately looking more at ongoing support and how to integrate the people into workforce. Being in Orillia...not as multicultural...so I was interested in workplace and community...integrating IENs into diversity.

**Suggestions for Improvement of the Website**

We asked respondents and interviewees, "Do you have suggestions for improving the www.oha.com/ien website?" Table 4 provides a summary of their responses. Suggestions are organized according to immediate short-term action items and future long-term action items. Short-term action items have been completed.

**Table 4. Suggestions for Improvement of the Practice Guide (2013)**

<table>
<thead>
<tr>
<th>Suggestions for Website Improvements</th>
<th>Short-Term</th>
<th>Long-Term</th>
<th>Interview</th>
<th>Survey</th>
</tr>
</thead>
<tbody>
<tr>
<td>Fix broken hyperlinks</td>
<td>X</td>
<td>X</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Add stories relevant to IENs to highlight cultural differences in practice to show they may not lack knowledge and skill, but they may need assistance in understanding the Canadian way</td>
<td></td>
<td>X</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Clearly partition the site to outline information for both IENs and employers; it would be far clearer to all involved which parts of the site are for whom and what they can find there</td>
<td>X</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>More practical tips - outside of the cases - on common areas of focus to anticipate in working with IENs (documentation, team processes, jargon, etc.)</td>
<td>X</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Identifying employers hiring IENs; examples: (i) a list of employers already hiring IENs and (ii) geographical representation/visual cue (i.e., map of hospitals in the areas where IENs are working)</td>
<td>X</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>More information/providing a link to the resources on the seven Ontario requirements</td>
<td>X</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Up to date statistics on IENs and employers of IENs</td>
<td>X</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Make the flipbook available on the website in a printable PDF format</td>
<td>X</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Suggestions for Website Improvements</td>
<td>Short-Term</td>
<td>Long-Term</td>
<td>Interview</td>
<td>Survey</td>
</tr>
<tr>
<td>-------------------------------------</td>
<td>-----------</td>
<td>-----------</td>
<td>-----------</td>
<td>--------</td>
</tr>
<tr>
<td>Make website available in multiple languages (at least French to begin with)</td>
<td></td>
<td>X</td>
<td>X</td>
<td></td>
</tr>
<tr>
<td>Information on educational assessment for employers</td>
<td>X</td>
<td>X</td>
<td></td>
<td></td>
</tr>
<tr>
<td>More information on language requirements / assessing language skills</td>
<td></td>
<td></td>
<td></td>
<td>X</td>
</tr>
<tr>
<td>Include a flow chart/map or geographical representation of hospital hiring needs</td>
<td>X</td>
<td>X</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Links to cities and regions in Ontario throughout the Local Health Integration Networks</td>
<td></td>
<td></td>
<td></td>
<td>X</td>
</tr>
<tr>
<td>More &quot;breakdown&quot; diagrams/visual representations of information, especially since the website is in English</td>
<td>X</td>
<td>X</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Equity and Discrimination may be an issue depending on how it is perceived...instead of building...[a case for hiring IENs], it might put some off. Perhaps rephrasing this title may be helpful so it doesn’t appear as a liability to hire IENs.</td>
<td>X</td>
<td>X</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Working with other organizations (i.e., HealthForceOntario, settlement agencies, researchers) to ensure up to date data on IENs</td>
<td></td>
<td></td>
<td>X</td>
<td>X</td>
</tr>
</tbody>
</table>


**Google Analytics Analysis**

Google Analytics is the most widely used web analytics application. The tool has become publically available and it is used by many site owners and professional marketers to track the performance of their sites (Andrew, 2009; Lee, 2013). There are many metrics provided by GA. For the purposes of this project, we chose to look at pageviews and unique pageviews to determine the most visited content on the website, as well as analyze the content before and after the website re-launch (Google Analytics, 2013a, 2013b).

In order to analyze the activity on the website once it was launched, GA was tracked from November 2011 to February 2013. The ability to use the different metrics through monthly reports allowed the research team to analyze the content most relevant to those visiting the website. Although data were collected in the first three months (November 2011–January 2012), only data from November 2011 was available for the main sections developed. In December 2011 and January 2012, GA was adjusted for relevant metric outputs to use for the remaining project timeline. The website was re-launched May 2012, thus there are no statistics...
available for any section that month.

GA reports for the project did not include “visitor” reporting therefore the research team estimated the number of visitors to the site over the one year period. Assuming an estimated 1.5 pageviews per visitor (Lawrence, 2013; Snell, 2013) and with 21,486 total annual number of pageviews, an estimated 14,324 visitors came to the website.

**Evaluation of the Content by Looking at Website Page Visits**

Once the website sections were appropriately collapsed, data were analyzed by looking at the pageviews and unique views as follows:

- Throughout the span of the project (November 2011–February 2013)
- Before website re-launch (November 2011–April 2012)
- After website re-launch (June 2012–February 2013)

**Overall Content Evaluation from November 2011–February 2013**

Through a weighted analysis of the main sections/title headings of the website, the research team determined the most frequently visited sections. The weighted analysis, coupled with a rating system, shows the rankings in Table 5. Rankings for pageviews and unique pageviews are provided. The former is a cruder statistic of each time the webpage is loaded, the latter aggregates pageviews that are generated by the same user during the same session (counts the session by one unique user regardless of how many times that user visited the same page). The Ongoing Support section was ranked lowest in terms of pageviews and unique pageviews, which merits further investigation.

**Table 5. Ranking of Content Headings/Titles Using Weighted Analysis of Pageviews and Unique Pageviews (November 2011–February 2013)**

<table>
<thead>
<tr>
<th>Ranking</th>
<th>Pageviews</th>
<th>Unique Pageviews</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Main Page Requirements for IENs</td>
<td>Requirements for IENs</td>
</tr>
<tr>
<td>2</td>
<td>Hiring IENs</td>
<td>Main Page</td>
</tr>
<tr>
<td>3</td>
<td>Resource Centre</td>
<td>Hiring IENs</td>
</tr>
<tr>
<td>4</td>
<td>Case Studies</td>
<td>Case Studies</td>
</tr>
<tr>
<td>5</td>
<td>Recruitment</td>
<td>Resource Centre</td>
</tr>
<tr>
<td>6</td>
<td>Entry and Orientation</td>
<td>Recruitment</td>
</tr>
</tbody>
</table>
Ongoing Support | Entry and Orientation
---|---
8 | Ongoing Support

Note. Data from December 2011, January 2012 and May 2012 were not available and are not included in the analysis.
Source: Google Analytics reports (November 2011–February 2013).

**Pre and Post Re-Launch Evaluation of the Content**

According to Lee (2013), one way to tell if your new page layout is working is to perform pageview analysis before updating the site design or trying out new changes. Once improvements are complete, an increase in pageviews indicates that the changes were positive. Analysis of the website analysis is divided into two sections: February 2012–April 2012 (before the re-launch) and June 2012–February 2013 (after the re-launch).

Pageviews and unique pageviews data for the Main Page show improvement after the re-launch (see Figure 3). The marketing initiatives sent out in June and July 2012 coincide with the spikes in the graph. Peaks in October and November 2012 were the result of targeted advertisements and the marketing of upcoming workshops and the project. The spike in January 2013 aligns with follow-up interviews and the survey to evaluate the project products. Pageviews and unique pageviews data for the Requirements for IENs page show a similar trend (see Figure 4).

*Figure 3. Google Analytics - Number of pageviews and unique pageviews for the main page of the web-based leading practice guide for employers (November 2011–February 2013).*
Note. Data from December 2011, January 2012 and May 2012 were not available and are not included in the analysis.

Source: Google Analytics reports (November 2011–February 2013).

Figure 4. Google Analytics - Number of pageviews and unique pageviews for the requirements for IENS page of the web-based leading practice guide for employers (November 2011–February 2013).

The same analysis was completed for all the content main headings/titles. On average, Recruitment, Useful Resources and Case Studies showed the same trend seen for the Main Page and Requirements for IENs. The post-launch data showed higher numbers for pageviews and unique views, indicating that the enhancements were an improvement for the users. Ongoing Support (previously Retention) was marginally lower immediately after the re-launch, but there was a spike in October that showed a major increase (from 177 pageviews in April to 241 in October). The two content headings that showed lower pageview numbers after the re-launch were Entry and Orientation and Hiring IENs (previously Workforce Diversity). This merits further investigation to ensure the content is relevant.

Evaluation of the Flipbook

The flipbook was evaluated in 17 interviews in the third phase of the project. When asked if they were currently using the flipbook, half of the interviewees indicated they had used it in
several capacities such as helping clients or as a quick reference for calls/inquiries. One interviewee stated that she was "using it...to integrate IENs into the hospital...[I] will be bringing the flipbook with me as I go out to educate employers about their IEN programs." Another interviewee said that if his organization pursues hiring IENs, the flipbook would be a fantastic resource to pass on to his supervisor. It could be used to recruit IENs and ensure management have the appropriate information.

When asked about the content, consensus was that the information in the flipbook was good and complemented the website. Sections highlighted as useful to some of the interviewees were the (i) Ontario Application Requirements (7 Criteria), (ii) Equity and Discrimination, (iii) Succeeding in the Workplace Case Studies and (iv) Bridging Programs. The interviewees who mentioned these areas were from organizations with special interests in those particular areas.

Interviewees were asked what they liked the most and what they liked the least or would improve about the flipbook. Figure 5 provides a summary of themes that emerged. The suggestions for improvement of the flipbook, which mainly targets employers, can be categorized based on the type of interviewee. Any improvements aimed at community centre enhancements were made by community health centres, educators tended to concentrate on bridging programs or requirements for assessing language skills, while settlement/community agencies concentrated on resources specific to IENs (i.e., bilingual and translation to other language requests, as well as provision of contact information for the different agencies like CARE).
Figure 5. Evaluation of the flipbook: What features users liked the most and what they liked the least or would improve (2013).

Of the seven employers interviewed, only three made suggestions that were not content related: (i) make an environmentally friendly version that uses both sides of the flipbook; (ii) find ways to get the flipbook to IENs; (iii) translate the flipbook into other languages. An interviewee from a home care organization suggested more "contact information" so users would not have to go to the website to find it.

Three interviewees requested more flipbooks for their organizations because they wanted their recruiting staff to have them on hand. They also wanted to have them at conferences, educational sessions and recruitment fairs to share with stakeholders. Others indicated that an online, downloadable PDF version would be beneficial. Fifteen interviewees said they would recommend the flipbook to others or have already done so.
**Evaluation of the Workshops**

The workshops were analyzed through a questionnaire completed at the end of each session and through the stakeholder interviews. Workshop participants were asked to "rate the overall value of this workshop for the work that they do." On average across the four workshops, the overall rating was good (25%), very good (50%) or excellent (25%). Over 80% of the attendees indicated the workshops met their main objective for attending, which included the following:

- Learn about helping, hiring and integrating IENs (mentorship and orientation) into the workforce; understanding the challenges and overcoming barriers
- Network with other employers, organizations and stakeholders
- Be exposed to up to date information regarding IENs (e.g., trends in immigration)
- Learn information for making the case for hiring IENs (collaborate with HR and link to corporate objectives/strategies)

Participants whose objectives were not met would have liked "more interaction and networking time," were "interested in going through the guide," wanted to "see more of what other organizations are doing," wanted to "find out how smaller community hospitals can successfully recruit IENs to specialty areas" and would have liked to discuss that "the issue for employers (hiring IENs) is largely licensing."

When asked to rate each program speaker on their content and presentation style, the results were positive across all four workshops and for each of the sessions provided (a complete evaluation report on the workshops is available in Supplement 4). The average rating for all the sessions combined across all for workshops showed the content was 90% very good/excellent and 10% fair/good and the style was 87% very good/excellent and 13% fair/good.

As part of the field-testing portion of the evaluation, the research team focused on how the participants were planning to use the information learned from the workshops and which practices/strategies for employing IENs were most relevant to participants. Table 6 provides a summary of findings from each workshop.
Table 6. Summary of Workshop Findings

<table>
<thead>
<tr>
<th>Workshop</th>
<th>Using the Information Learned</th>
<th>Most Relevant Practices/Strategies</th>
</tr>
</thead>
</table>
| Toronto  | • Create collaborations (i.e., with CARE)  
• Develop approach to hiring IENs in future and leverage NGG orientation  
• Think about using IENs in staffing and recruitment strategy and strategic planning  
• Share with/educate organization, HR team, management, leadership  
• Use the flipbook and website to inform a research project  
• Refer to literature presented to ensure IEN orientation is appropriate | • Workforce integration, innovative practice proven mentorship model (St. Michael's Hospital presentation)  
• Nursing Graduate Guarantee investment funds to be used for mentorship and orientation of IENs (six participants)  
• CARE model is an excellent resource for IENs  
• Orientation customization and English skills training  
• Make IEN recruitment, hiring and integration part of corporate strategic plan (invest the money)  
• The collaborative model of integrating support, education and hospitals to help IENs in Ontario  
• Support from community-based organizations  
• Viewing the website to determine resources that are already thought out to support IENs |
| Niagara  | • Will help with educating IENs for the workforce  
• Will help community partners realize the benefits of IENs and the challenges and struggles they experience  
• Liaise with corporate education department on assessment tools for IENs  
• Currently constructing a learning exchange for our hospitals to share best practices and key learning to hire skilled immigrants in the hospital workforce; leverage this knowledge into organizations outside of nursing | • Understanding the resources available  
• Identification of challenges and bringing about awareness of IENs  
• Transitioning practices  
• OHA IEN website  
• Knowing about CARE  
• Mentorship programs/models |
| Ottawa   | • Take back to organization (i.e., employer, team)  
• Integrate the information into research  
• Working to build a mentorship model for IENs  
• Will use the web guide | • NGG reinvestment funds  
• Job shadowing strategies  
• Orientation and mentorship model  
• All the information presented |
| Windsor  | • Share with colleagues/organization  
• Using in case management when assisting in care plan | • Use Nursing Graduate Guarantee reinvestment funds  
• Become a host site for job shadowing |
Give up to date information to IENs and advocate to IENs from home country
Partner with relevant stakeholders (e.g., CARE)

Strategies for orientation process
All the information presented


The major barriers to implementing any practices or strategies at most organizations were funding (most common barrier stated across the four workshops), time involved, licensing and regulatory body issues, HRs, labour issues, cultural awareness and diversity, language and communication (especially lack of French resources) and hiring IENs is not in the corporate strategic plan.

Workshop participants recommended ways the program could be strengthened in the future. One consistent message was that participants would have liked more opportunity to work in groups, network and interact. Participants also wanted more "real examples" and more information on community-based programs. One participant indicated we should "continue to dialogue on this topic but look for opportunities outside of the nursing profession to better integrate skilled immigrants (in general) into the hospital workforces."

There were several suggestions for additional speakers such as IENs and members of the College of Nurses of Ontario. All participants were asked if they (or others in their organization) anticipated using the www.oha.com/ien website to learn more about employing IENs. Ninety-nine percent indicated yes. Several of the participants went on to participate in more in depth interviews with the research team to evaluate the project products.
CONCLUSIONS

The NHSRU at McMaster University and the OHA collaborated to create *A Framework for Integrating Internationally Educated Nurses into the Health Care Workforce*, which was funded by MCI and CIC. The main goal was to develop a web-based leading practice guide for employers who are integrating IENs into their workforces. The NHSRU and OHA were able to leverage the strengths of their KTE activities (synthesis, dissemination, exchange and evaluation) and combine them to produce three evidence-based products for IEN employers and other interested parties.

The project was designed in three phases (development, dissemination and evaluation) to ensure that the products were well tested with appropriate engagement of experts and relevant stakeholders, particularly employers who were the main target audience. The evaluation component was vital to the success of the project and products because it was both iterative and summative.

There were several sources of feedback (two surveys, two interviews and workshop questionnaires) leading to an in depth evaluation and accurate understanding of how well the products were perceived and used. Both the web-based practice guide and the flipbook were positively received. The highly rated field-testing workshops highlighted both products and provided an opportunity for participants to learn from exemplar employers who have successfully integrated IENs into their workforces. Participants were also able to liaise with stakeholders and obtain information about immigration and nursing trends.

Key facilitators to integrating IENs into the workforce include strong support through a strategic corporate direction aimed at establishing a more diverse workforce. It is beneficial for employers to know who the support agencies are and to have all the necessary information in one place (i.e., the website and flipbook). The main barrier to hiring IENs for many of the employers was funding, followed by the time it takes to undertake this type of initiative.

Several organizations indicated they did not have the necessary resources to properly integrate IENs. However, the workshops were helpful in providing strategies for funding.
The research team was able to determine tangible ways in which the products were being used and implemented. Workshop participants and interviewees provided concrete examples of how the web-based practice guide was helping them in the work they were doing. Table 7 provides a summary breakdown of the stakeholders who directly benefited from the products. Several stakeholders fall into more than one category. As a result, despite best efforts, there may be some duplication.

**Table 7. Breakdown of Stakeholders who Benefited Directly from the IEN Project**

<table>
<thead>
<tr>
<th>Direct Project Activities</th>
<th>Approximate # of People Who Benefited</th>
<th>Approximate # of Organizations That Benefitted</th>
</tr>
</thead>
<tbody>
<tr>
<td>Project Advisory Committee¹</td>
<td>–</td>
<td>–</td>
</tr>
<tr>
<td>Stakeholder Interviews</td>
<td>30</td>
<td>–</td>
</tr>
<tr>
<td>Stakeholder Survey</td>
<td>38</td>
<td>–</td>
</tr>
<tr>
<td>Think Tank Sessions (three sessions)</td>
<td>–</td>
<td>66</td>
</tr>
<tr>
<td>Workshops (four sessions)</td>
<td>–</td>
<td>–</td>
</tr>
<tr>
<td>Conference presentations (plenary and poster) by research team²</td>
<td>200</td>
<td>300</td>
</tr>
<tr>
<td>Flipbooks*</td>
<td>–</td>
<td>–</td>
</tr>
<tr>
<td>Follow-up interviews</td>
<td>–</td>
<td>–</td>
</tr>
<tr>
<td>Website survey</td>
<td>–</td>
<td>–</td>
</tr>
<tr>
<td>Ministry of Citizen and Immigration Learning Exchange Workshop</td>
<td>–</td>
<td>–</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>2506</strong></td>
<td></td>
</tr>
</tbody>
</table>

+Estimated Proportion of the Number of Employers out of the total: (6/6, 28/30, 38/38, 23/42, 35/45, 1151/1200, 7/14, 26/58 = 1314/1433); estimated proportion of the Number of other organizations (educators, regulators, immigration/government, community/settlement agencies) who benefited/participated 119/1433.

<table>
<thead>
<tr>
<th>Dissemination to Knowledge Users</th>
<th>Approximate # of People Who Benefited</th>
</tr>
</thead>
<tbody>
<tr>
<td>HealthAchieve</td>
<td>–</td>
</tr>
<tr>
<td>OHA HR Symposium</td>
<td>–</td>
</tr>
<tr>
<td>OHA 2nd Annual National Nursing Executives Summit</td>
<td>–</td>
</tr>
<tr>
<td>Knowledge users through NHSRU’s email blasts regarding IEN project¹</td>
<td>–</td>
</tr>
<tr>
<td>Knowledge users through OHA’s Newsletter(^1)</td>
<td>–</td>
</tr>
<tr>
<td>Total</td>
<td>–</td>
</tr>
<tr>
<td>Assuming 12% of Total were reached(^2)</td>
<td>–</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Google Analytics</th>
<th>Approximate # of People Who Benefited</th>
</tr>
</thead>
<tbody>
<tr>
<td>Number of pageviews</td>
<td>0</td>
</tr>
<tr>
<td>Estimated number of visitors(^3)</td>
<td>0</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Internationally Trained Individuals Who Benefited(^3)</th>
<th>Approximate # of People Who Benefited</th>
</tr>
</thead>
<tbody>
<tr>
<td>Conference attendees</td>
<td>–</td>
</tr>
<tr>
<td>OHA and NHSRU knowledge users</td>
<td>–</td>
</tr>
<tr>
<td>CARE for IENs</td>
<td>–</td>
</tr>
<tr>
<td>Estimated IEN visitors to website(^3)</td>
<td>–</td>
</tr>
<tr>
<td>Total</td>
<td>–</td>
</tr>
</tbody>
</table>

**Notes.**

1 The total across the years are representatives of the same target audience (i.e., six PAC members, 1300 NHSRU knowledge users and 80,000 OHA knowledge users, therefore the total is not cumulative.

2 A total of four poster presentations and five presentations (an average of 50–100 participants per event) to estimate the 700 conference attendees over the three years.

3 It is difficult to measure internationally trained Individuals who benefited from the project because the main target was employers of IENs. However, because of our dissemination strategy over the three years, we can make a few assumptions to estimate how many IENs benefited from the project:
   (i) 10% of total conference attendees were IENs (approximately 70).
   (ii) An estimated 1.5% of knowledge users (KU) from NHSRU and OHA were IENs (1.5% of 81,300 KU is 1220); on average, 12% of KUs open or view email/communication; therefore, approximately 12% of 1220 IEN KUs (~146) would receive information regarding the project throughout the three years.
   (iii) 20% of IENs who work with CARE through direct communication; CARE has 2364 open files for IENs and they were heavily engaged throughout this project (20% of 2365 is 473 IENs).
   (iv) 12% conservative assumption of visitors to the website are IENs (based on the percentage of IEN RNs in Ontario); we estimate 12% of 14,324 estimated visitors is ~1719 IENs visiting the website over the year.
N/A - not available or not applicable

*Flipbook Notes.*

- Over 2755 flipbooks were distributed.
- 1406 were mailed to stakeholders (including hospital CHROs, CNOs, LHINs, CCACs, think tank and workshop participants and the PAC) January 14, 2013.
- 260 were mailed to the Hospital for Sick Children to be used at the upcoming Operating Room Nurses’ Association of Canada Conference in April 2013.
- Approximately 20 were distributed at the MCI Learning Exchange Event December 10, 2012.
- 7 copies were provided to OHA senior management on January 14, 2013.
- An additional 40 copies were mailed to St. Michael’s Hospital upon request.
- 20 copies were mailed out to CARE on January 29, 2013; 5 more copies were mailed to another CARE centre January 29, 2013.
- Copies were made available at the OHA’s Annual HR Symposium (October 23, 2013), OHA’s HealthAchieve (November 2012) and at the IEN fall workshops (October–November 2012); the total distributed at these events is unknown.
- 1000 additional electronic copies of the flipbooks were sent out to Ontario’s Long Term Care Sector (~600) and Community organizations (~400) through the Ontario Ministry of Health and Long Term Care.

**Reach**

Although the emails are sent out to a total number of KU’s, we assume 12% open the emails to read them based on number of open emails confirmed after the email blast is sent out (Source: OHA).

***Assumption: Average of 1.5 pageviews per visitor (Lawrence, 2013; Snell, 2013) 21,486 total pageviews in one year; therefore, a crude estimate of 14,324 visits to the website over the year
RECOMMENDATIONS

Skills shortages in Canada include traditional health care roles such as doctors and nurses. The following recommendations are intended to promote employment integration of IENs and IEHPs into the health care workforce. The recommendations take into consideration the recent Ontario Immigration Strategy to make immigration work better for immigrants, their families and the province, as well as the outcomes and evaluation of this project.

- Invest in resources, tools and venues for employers to develop or expand their mentorship, orientation, internship and on-the-job training programs aimed at hiring IEHPs
- Provide resources, funding and support for employers to explore recruiting and welcoming IEHPs
- Invest in resources and tools directed at integrating IEHPs into the workforce; these should be available in both official languages
- Provide resources, funding and support for employers to educate their current workforce regarding processes of hiring and integrating IEHPs; show diversity in a positive light
- Continue to invest in initiatives directed at helping skilled immigrants achieve licensure in their profession, particularly collaborative initiatives between regulatory/licensing bodies, employers and settlement/community agencies
- Examine and identify employment opportunities for skilled and licensed healthcare workers in underserviced sectors (e.g., community) and geographical areas (e.g., rural/remote)
- Support employer workshops targeted at middle and smaller communities regarding workforce profiles to assess future needs, develop organizational policies and create implementation strategies based on employment context; highlight the ability to draw on the pool of licensed internationally educated and skilled healthcare workers
REFERENCES

Main Document


Appendix 3. Overview of Labour Market


Appendix 4. Literature Review Key Findings

Research Unit, McMaster University.


**Appendix 5. Employer Survey**


**Appendix 7. Data Analysis**


**Appendix 9. Knowledge Translation Exchange Literature Review**


APPENDIX 1. COMPOSITION AND ORGANIZATIONAL STRUCTURE OF THE PROJECT ADVISORY COMMITTEE

Composition

- Andreanna Grabham, Project Manager, Ontario Hospital Association
- Dr. Andrea Baumann, Associate Vice-President, International Health, Faculty of Health Sciences, Director, Nursing Health Services Research Unit, McMaster University
- Dr. Jennifer Blythe, Associate Professor in the School of Nursing, Senior Scientist, Nursing Health Services Research Unit, McMaster University
- Liane MacIntosh, Clinical Recruiter, Thunder Bay Regional Health Sciences Centre
- Lynn McEwen, Director of Interprofessional Practice and Organizational Development, Bluewater Health
- Debra Churchill, Chief Nursing Officer, Ontario Shores Centre for Mental Health Sciences
- Karima Velji, Vice President, Clinical and Residential Programs and Chief Nursing Officer, Baycrest
- Ella Ferris, Executive Vice President and Chief Nursing Executive, St. Michael's Hospital
- Ruth Lee, Chief of Nursing Practice, Hamilton Health Sciences

External Consultation

- HealthForceOntario and the College of Nurses of Ontario

Meetings

- The PAC met quarterly and/or as required.
PAC Organizational Structure (March 2013)

Christine Louie
Ontario Hospital Association

Dr. Andrea Baumann
McMaster University

Liane MacIntosh
Thunder Bay Regional Health Sciences Centre

Debra Churchill
Ontario Shores Centre for Health Sciences

Ella Ferris
St. Michael’s Hospital

Andreanna Grubham
Ontario Hospital Association

Dr. Jennifer Blythe
McMaster University

Lynn McEwen
Bluewater Health

Karima Velji
Baycrest

Dr. Ruth Lee
Hamilton Health Sciences
Project Lead: Ontario Hospital Association

Research Lead: Nursing Health Services Research Unit, McMaster University
APPENDIX 2. FEDERAL AND PROVINCIAL GOVERNMENT INVESTMENTS FOR
INTERNATIONALLY EDUCATED PROFESSIONALS 2003–2013

Supporting internationally educated professionals (IEPs) has been and continues to be a high priority for both the federal and provincial governments. Specifically over the past 10 years, with the help of designated government funding, many successful initiatives have been introduced and implemented across the nation. Subsequent sections outline summaries of the different federal and provincial government investments for IEPs over the past decade.

Nursing is one of the many professions that can benefit from the expertise of foreign-trained workers. Nurses play a vital role in health care teams and provide quality, person-centered care. With the aging workforce and the threat of nursing shortages, integrating new nurses into the health care system efficiently and effectively has become a key concern for health service providers and the Ontario government. Evidence is needed to inform policy on issues related to recruitment, retention and integration of nurses across sectors and to support employers in hiring and orienting them.

Both the federal and provincial government are committed to improving the integration of newcomers into the Canadian workforce. Data shows that immigrants are expected to make up one-third of the workforce by 2031. Consequently, internationally educated health professionals (IEHPs), including internationally educated nurses (IENs), are an increasingly important source of talent. Unfortunately, they often face barriers to employment.

Given the current climate, the Nursing Health Services Research Unit and the Ontario Hospital Association welcomed the opportunity to participate in an initiative funded by the Ontario Ministry of Citizenship and Immigration and the Federal Department of Citizenship and Immigration Canada. The aim was to provide employers with the tools and resources required to recruit and integrate IENs. The development of an online employer guide and other products, including a hard copy flipbook and regional workshops, were crucial in removing barriers faced by IENs and employers.

Educated Professionals 2003–2013

The focus of many of the initiatives pertaining to IEHPs has been in the areas of language, credentialing and examination preparations, job matching and identifying best practices to fill existing gaps.

Language

Between 2003 and 2004, the federal government allocated a total of $20 million per year for a new Enhanced Language Training (ELT) initiative. ELT projects included cost sharing and partnership plans contributing (at minimum) half the costs required for the projects in the form of actual funds, in-kind contributions and tools and resources. Service delivery projects were also required to provide access to internships, mentorship and work placement opportunities.
The Centre for Canadian Language benchmarks (Ottawa, Ontario) developed a national tool to help IENs determine readiness to take the Canadian English Language Benchmarks Assessments for Nurses, a mandatory requirement of the provincial nursing regulators.


**Credentialing**

Prior to 2009, the Ontario government invested $38 million into 38 bridge training programs across the province. The intent of these programs was to assist in expediting the licensing and job matching process for highly skilled newcomers by helping them get the credentials and practical experience required.

Recognizing the importance of skills training programs and how they strengthen the economy, the provincial government invested an additional $50 million over two years to further expand bridge training programs. http://news.ontario.ca/mci/en/2009/05/ontario-helps-newcomers-get-jobs.html

In 2010, the Ontario government invested in 22 new bridge training programs and renewed nine of the existing programs to help skilled immigrants become job ready for the Ontario workforce.

The intent of these projects was to provide over 5000 newcomers with access to skills upgrades and job search training while also providing training for the new green economy for at least 50% of project participants. Six of the 31 programs were identified as research-specific in order to investigate potential systemic changes that could increase the accessibility of various professions.

*A Framework for Integrating IENs into the Healthcare Workforce* was one of the programs introduced through this investment. http://news.ontario.ca/mci/en/2010/06/ontario-expands-bridge-training-programs-for-newcomers.html

**Exam Preparation**

In 2009, building on previous successes, the Ontario government committed to investing $5.2 million for three programs at York University. The programs were intended to enable highly skilled newcomers to become licensed and find jobs faster.

This project implemented strategies for successful test taking, reducing anxiety and building confidence. The project was meant to target success rates for IENs on the Canadian Registered Nurse examination and was developed in a manner that would make the model transferrable to
other Canadian nursing and healthcare professions required to write examinations for licensure.


**Job Matching**

As part of the national ELT initiative announced in 2003, the Halifax Immigrant Learning Centre (Nova Scotia) managed two projects. One project helped IENs find jobs and settle in the province. The other project conducted a needs/gap analysis on existing health care resources, programs and best practices.


In 2007, the federal government announced a contribution of $536,000 to Alberta Health and Wellness to test an innovative offshore assessment program for IENs immigrating to Canada. This pilot program was intended to reduce Canada’s nursing shortage and improve wait times.

In order to assist in expediting the integration of highly skilled immigrants into the Canadian workforce in their field of expertise, this pilot provided assessment opportunities to immigrants prior to arrival in Canada.


In 2010, the Ontario Ministry of Citizenship and Immigration announced an initiative to help 1265 skilled newcomers find jobs across a range of professions that matched their education, skills and training without duplicating previous training.

This initiative involved eight successful bridging programs in various locations including Ottawa, Toronto and London.

This initiative supports the government's Open Ontario Plan to strengthen the provincial economy while investing in the skills and knowledge of its people.


In 2011, the federal government announced an additional $22 million co-funded by the Government of Canada and the Government of Ontario to help skilled immigrants find jobs in Ontario.

The bridge training program was designed to help skilled immigrants find jobs that matched their education and skills. Regional projects aimed at licensing, regulation and job training for non-regulated professions were funded. Funding was also provided to initiatives targeting the reduction of barriers to the integration of foreign-trained workers.

By 2011, over 200 projects had been funded with over 35,000 immigrants who benefited from the program in Ontario alone.
The Government of Canada is committed to recruiting, integrating and retaining immigrants in Ontario. Funding was provided to settlement services to enhance and expand language training as well as settlement services. The government has tripled the funding for settlement services across the province since 2006.

Through the Citizenship and Immigration Canada, the federal government provided $9.2 million for an immigrant support network at the Hospital for Sick Children. The purpose of the program was to improve access to care for new immigrants as well as equip hospital employees with the skills and competencies required to effectively meet the needs of their patients.

Key deliverables of this program included:
- Improved access to appropriate care and services
- Increased capacity to meet immigrant needs
- Enhanced interprofessional teams equipped to provide effective collaborative care to newcomers
- Improved staff engagement as well as recruitment and retention of health human resources
- Increased and improved cultural awareness and competencies amongst employees
- Cultural Assessments
- Examination of differences in cultural values and beliefs
- Sharing practices with hospitals across the province

In 2012, the provincial government announced the launch of an immigration strategy. Round table sessions were held in early 2013 to discuss recommendations related to immigration issues that should be addressed within the strategy to support the Ontario labour market in the most productive way. Highlights from Ontario’s First Immigration Strategy are outlined below.

1. **Attracting a skilled workforce and growing a stronger economy**
   - As immigration increases, raise the proportion of economic immigrants to 70% from the current level of 52%
   - Increase Ontario’s role in selecting the immigrants who meet our unique labour market needs
   - Request a doubling of our Provincial Nominee Program from the federal government to 2,000 in 2013, increasing to 5,000 in 2014
   - Maximize the potential of temporary foreign workers and international students

2. **Helping newcomers and their families achieve success**
   - Improve job prospects for non-economic immigrants
   - Provide more resources for employers to recruit and welcome immigrant employees
• Encourage employers to develop or expand mentorship, internship and on-the-job training programs
• Achieve 5% francophone immigration

3. **Leveraging the global connections of our diverse communities**
• Growing a globally connected economy by increasing the employment rates of highly skilled immigrants in their fields
• Maximizing the global value of immigrants already here by decreasing their unemployment rate to the provincial average
• Leveraging global expertise by removing barriers and increasing the number of internationally trained professionals licensed in their professions
APPENDIX 3. OVERVIEW OF LABOUR MARKET TRENDS AND IMMIGRATION

A recent report by Benjamin Tal (2012), Deputy Chief Economist of CIBC World Markets Inc., highlights that jobs go unfilled for long stretches due to a lack of skilled applicants. However, there is growing evidence of an increase in the size of the labour surplus pool for a number of occupations. Labour surplus is found in traditional occupations like butchers, bakers, tailors, labourers in manufacturing, office managers, clerks and both secondary and elementary school teachers.

Skill shortages include positions in traditional health care roles such as "doctors, nurses and dentists" along with other allied health professionals (Tal, 2012, p. 1). The labour market mismatch reduces the effectiveness of monetary policy and the growth potential of the labour market. Recent adjustments in the immigration system are directed at easing this skills shortage, but they are "too small to deal with the current skill gap in the Canadian labour market" (Tal, 2012). Focusing on occupations that experience both rapidly rising wages and low or falling unemployment rates showed 25 occupations that have consistent signs of labour shortages, including "Nurse supervisors and Registered Nurses" (Tal, 2012, p. 4).

With the current employment and fiscal climate, it is essential to draw upon the skills and competency of IEHPs currently residing in Canada. Understanding our population's diversity and our health care workers' demographics, particularly in the case of nursing, provides necessary context when planning initiatives targeted at IENs and their employers.

Internationally Educated Nurses in Canada and Ontario

The Canadian Institute for Health Information (CIHI) reports on regulated nurses. Figure 1 illustrates the trend analysis in Canada of internationally educated registered nurses and RPNs/licensed practical nurses (LPNs) from 2007 to 2011. Ontario has had the highest number of IEN RNs and RPNs/LPNs in Canada, followed by British Columbia and Alberta. The Eastern Provinces and Territories have the least number of IENs. The proportion of international graduates in the Canadian workforce grew slightly between 2007 and 2011, but it typically represented less than 8% of all regulated nurses (CIHI, 2011).
Figure 1. Trend analysis in Canada of internationally educated RNs and RPNs/LPNs, 2007-2011.

According to CIHI (2011), 8.6% of the RN workforce was international graduates, representing the highest proportion among the regulated nursing professions. Between 2007 and 2011, the proportion of internationally educated RNs rose from 2.8% to 7.0% in Saskatchewan and from 4.9% to 10.5% in Alberta. The proportion of internationally educated RNs in Ontario remains the highest at 11.9%. The proportion of internationally educated RPNs/LPNs in Canada increased slightly between 2007 and 2011, but this group still represented less than 3% of the workforce. This proportion is higher in Ontario at 5%.

Figure 2 illustrates workforce diversity in Canada. Ontario had the largest proportion of IENs for both RNs (48%) and RPNs (75%) in 2011. This is followed by Alberta and Quebec for RNs and Manitoba and Alberta for RPNs/LPNs. Prince Edward Island, Newfoundland and Labrador and British Columbia have been combined because their numbers have been suppressed due to CIHI's privacy policy.
Figure 2. Workforce diversity in Canada: Internationally educated RNs and RPNs, 2011.

Registered Nurse (RN) Workforce Diversity in Canada, 2011

Source: Canadian Institute for Health Information (2011).

Registered/Licensed Practical Nurse (RPN/LPN) Workforce Diversity in Canada, 2011

Note. † Prince Edward Island, Newfoundland and Labrador and British Columbia had digits suppressed in accordance with CIHI’s privacy policy; digit is from 0 to 9 (~0.4%) IENs.

Figure 3 provides the most recent and complete statistics on the country of graduation for both RNs and RPNs in Canada in 2010. The Philippines is the country of original nursing education for over a third of the RNs and RPNs, this is followed by the United Kingdom at 16%. According to the CIHI (2011), 32.7% of internationally educated RNs reported having been trained in the Philippines, while 15.3% reported having been trained in the United Kingdom. More than one-third (42.8%) of international graduates had attended a practical nursing program in the Philippines or the United Kingdom. Complete statistics on country of origin have not been released by CIHI for 2011.
As shown in Figure 4, RNs in Ontario have been at a steady state with a slight dip in 2009. The decrease in 2009 coincides with the economic downturn due to the financial crisis. The RPNs/LPNs in Ontario have shown a steady increase over the five years studied (2007–2011).

As the regulatory body for nursing in Ontario, the College of Nurses has the most comprehensive information on nurses in the province. They house data and related information about the college's membership, which is available for public use. Statistics through reports and the college's data query tool provide information to support nursing health HR planning.

Using the data query tool, information was filtered to look at workforce participation for RNs and RPNs employed in Ontario. Figure 5 illustrates the most recent workforce participation...
(2010) for both nursing categories. It is promising that the majority of registered IEN RNs and RPNs in Ontario are employed in nursing.

Figure 5. Workforce participation by internationally educated RNs general class and RPNs in Ontario, 2010.

Source: College of Nurses of Ontario (2010).
APPENDIX 4. LITERATURE REVIEW KEY FINDINGS

In 2010, Baumann and Blythe completed a report entitled, Integration of Internationally Educated Nurses into the Workforce: Literature Review. The following section provides highlights that framed the development of the employer web guide and accompanying tools.

Internationally educated nurses resident in Canada originate from many countries. Yet, despite their differences, they face common problems adapting to their new country and resuming their profession in a structurally, organizationally and culturally unfamiliar health care system. This literature review presents background information relevant to the integration of IENs into Canadian hospitals as professional nurses.

Definition of Integration

Most discussions of integration assume a common understanding of the term. However, as noted by Wong and Poisson (2008) in their report to the Public Policy Forum, defining integration is not easy because the experiences and expectations of newcomers and their settlement communities vary.

The report includes a review of perspectives on the term "immigrant integration" and offers two preliminary definitions of how it relates to immigrants entering and familiarizing themselves with their new workplace:

- "Integration is the process through which, over time, newcomers and hosts form an integral whole" (Papademetriou, 2003, ¶12).
- "Immigrant integration is a dynamic, two-way process in which newcomers and the receiving society work together to build secure, vibrant, cohesive communities" (Petsod et al., 2006, p. 25).

These definitions indicate that integration is a process involving both newcomers and the host community. Yet beyond this commonality, there are different interpretations based on ideas about acculturation, participation and the employing institution. The authors emphasize that assessment of integration should not be based specifically on participation. According to the Canadian Council for Refugees (1998), one of the key aspects of settlement and integration is the freedom to participate as desired, rather than having to meet expectations that do not apply to the native-born. In the literature review, the general definitions quoted above served as guides. The report concludes that integration is the process of eliminating barriers to belonging, acceptance and recognition for immigrants and refugees.
APPENDIX 5: EMPLOYER SURVEY

Integrating Internationally Educated Nurses into the Health Care Workforce: A Guide for Employers

Dear Ontario Hospital Association (OHA) member:

The OHA and the Nursing Health Services Research Unit (NHSRU), McMaster University site, are collaborating to improve hiring, retention and integration of internationally educated nurses (IENs) in health care organizations in Ontario through the development, dissemination and evaluation of a practical evidence-based guide.

We are requesting the assistance of Chief/Executive Nursing Officers and Human Resources Managers in OHA member hospitals to help us identify resources and best practices that already exist in Ontario hospitals and to advise us on which topics will be most useful to include in a practical guide for employers of nurses educated outside Canada. Completing this 10-minute survey will enable us to create a resource suited to your needs.

There will be further opportunities to engage in this study during a think tank workshop to be held next spring. The practical guide will be distributed to employers for evaluation. If you require further information regarding this survey, please contact Dr. Andrea Baumann, Director, NHSRU, McMaster University, at 905-525-9140 ext. 22581 or baumann@mcmaster.ca.

Demography

1. In which OHA region is your organization located?
   - Region 1 (North)
   - Region 2 (East)
   - Region 3 (GTA)
   - Region 4 (Central West)
   - Region 5 (South West)

2. What is your organization type?
   - Acute Teaching Hospital
   - Addiction and Mental Health Centre
   - Complex Continuing Care & Rehabilitation
   - Community Hospital
   - CCAC
   - Other: 


3. How many beds does your organization have?
   - < 50
   - 50-99
   - 100-199
   - 200-299
   - 300-399
   - 400-499
   - 500+
   - N/A

4. How many full-time equivalent nurses (RNs and RPNs) are employed at your organization?
   - < 100 FTE
   - 100-199 FTE
   - 200-399 FTE
   - 400-699 FTE
   - 700-999 FTE
   - 1000+ FTE

5. If your organization uses head count, how many nurses are employed at your organization?
   - < 100
   - 100-199
   - 200-399
   - 400-699
   - 700 +

6. How many RNs does your organization employ in the following categories:

   | Permanent full-time |  |
   | Permanent part-time |  |
   | Temporary full-time |  |
   | Temporary part-time |  |
   | Casual |  |
   | Total |  |

7. How many RPNs does your organization employ in the following categories:

   | Permanent full-time |  |
   | Permanent part-time |  |
   | Temporary full-time |  |
   | Temporary part-time |  |
   | Casual |  |
   | Total |  |
8. What is your operating budget?
- $< 10M
- $10-$24M
- $25-$49M
- $50-$99M
- $100M+

9. In which LHIN is your organization located?
- 1-Erie St. Clair
- 2-South West
- 3-Waterloo Wellington
- 4-Hamilton Niagara Haldimand Brant
- 5-Central West
- 6-Mississauga Oakville
- 7-Toronto Central
- 8-Central
- 9-Central East
- 10-South East
- 11-Champlain
- 12-North Simcoe Muskoka
- 13-North East
- 14-North West

10. Does your organization have information about the country in which nursing staff were educated?
- Yes
- No

11. What proportion (%) of your nurse employees (RNs and RPNs) were educated abroad? If statistics are not available, please provide an estimate.
- 1. > 1%
- 2. 2-5%
- 3. 6-10%
- 4. 11-20%
- 5. 21% +

12. What are the top three countries where IENs in your organization were educated? If your answer is an estimate, please enter "e" after the name of the country. If there are no IENS on staff, enter 0.

1. 
2. 
3.
Organizational Support for Equity/Diversity

13. Does your organization have designated resources (persons, departments) to support employment equity*?
   - Yes
   - No
   - I don't know
   If yes, please describe

14. Does your hospital provide education for diversity management **for nurse managers?
   - Yes
   - No
   - I don't know
   If yes, please describe

15. Does your organization have dedicated resources (person or department) to deal with diversity issues?
   - Yes
   - No
   - I don't know
   If yes, please describe

16. Do nursing staff receive education in cultural competence*** with regard to
   - Patients
   - Yes
   - No
   - I don't know
If yes, please comment on the education offered and who receives it.

- Organization employees
  - Yes
  - No
  - I don’t know

**Recruitment**

17. Is recruiting and retaining IENs a priority in your organization?
  - Yes
  - No

18. What are your hospital’s strategies for recruiting IENs?

<table>
<thead>
<tr>
<th>YES</th>
<th>NO</th>
</tr>
</thead>
<tbody>
<tr>
<td>Targeted recruitment abroad by the organization</td>
<td></td>
</tr>
<tr>
<td>Using services of an overseas recruiter</td>
<td></td>
</tr>
<tr>
<td>Accepting nurses who apply from overseas on temporary licenses</td>
<td></td>
</tr>
<tr>
<td>Employing IENs who complete course placements at your organization</td>
<td></td>
</tr>
<tr>
<td>Accepting applications from qualified IENs resident in Ontario</td>
<td></td>
</tr>
<tr>
<td>Accepting IENs who complete bridging programs from Ontario Educational Institutions</td>
<td></td>
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<tr>
<td>Maintaining contact with/giving advice to IENs who are not yet registered with the CNO</td>
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19. Is support provided for

<table>
<thead>
<tr>
<th>YES</th>
<th>NO</th>
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<tbody>
<tr>
<td>1. <strong>managers</strong> recruiting IENs?</td>
<td></td>
</tr>
<tr>
<td>2. <strong>HR</strong> recruiting IENs?</td>
<td></td>
</tr>
<tr>
<td>3. <strong>recruiters</strong> recruiting IENs?</td>
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</tbody>
</table>

If no, what support is needed?

If yes, what support is available?
20. Are IEN resumes assessed differently from those of other nurses?
   □ Yes
   □ No

   If yes, please specify:

   [Blank space]

Orientation

21. Does orientation for IENs employed by your organization differ from that of

   YES  NO

   New graduates?

   Experienced new nurse employees?

   If yes, please comment on the differences

   [Blank space]

22. Is your organization involved in the NGG initiative?
   □ Yes
   □ No

23. If yes, do you use surplus NGG funds for IEN orientation?
   □ Yes
   □ No

24. At your organization is there

   5. A mentorship program specifically for IENs?
      □ Yes
      □ No

   6. A buddy program specifically for IENs?
      □ Yes
      □ No
### Retention

25. At your organization do IENs have

<table>
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<tr>
<th>YES</th>
<th>NO</th>
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<tbody>
<tr>
<td>Peer support groups?</td>
<td></td>
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<tr>
<td>Access to clinical educators?</td>
<td></td>
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<tr>
<td>Online resources to support cultural competence in a diverse workforce?</td>
<td></td>
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<tr>
<td>Mechanisms for resolving cultural conflict?</td>
<td></td>
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<tr>
<td>Other in-house educational or other resources/programs to support IEN retention?</td>
<td></td>
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<tr>
<td>If yes, please list:</td>
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</table>

26. Does your organization collaborate with community partners such as community colleges and settlement organizations in

<table>
<thead>
<tr>
<th>YES</th>
<th>NO</th>
</tr>
</thead>
<tbody>
<tr>
<td>Recruiting IENs?</td>
<td></td>
</tr>
<tr>
<td>Remedying language or communication problems?</td>
<td></td>
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<tr>
<td>Dealing with technical problems e.g. computer literacy?</td>
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<tr>
<td>Dealing with gaps in clinical knowledge?</td>
<td></td>
</tr>
<tr>
<td>Other (please specify):</td>
<td></td>
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<tr>
<td>If yes, please list community partner types:</td>
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27. What would you like included in a Guide to Integrating IENS into the Nursing Workforce?

<table>
<thead>
<tr>
<th>YES</th>
<th>NO</th>
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</thead>
<tbody>
<tr>
<td>Regulatory requirements</td>
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<tr>
<td>Educational programs</td>
<td></td>
</tr>
<tr>
<td>Opportunities for Community collaboration</td>
<td></td>
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<tr>
<td>Immigrant settlement information</td>
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<tr>
<td>Upgrading and remediation</td>
<td></td>
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<tr>
<td>Funding opportunities</td>
<td></td>
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<tr>
<td>Federal and Provincial government funding</td>
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<tr>
<td>International comparators</td>
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<tr>
<td>Best practice case studies</td>
<td></td>
</tr>
<tr>
<td>Other topics/resources</td>
<td></td>
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<tr>
<td>If yes, please specify:</td>
<td></td>
</tr>
<tr>
<td>Other</td>
<td></td>
</tr>
</tbody>
</table>
28. Please indicate other information you would like included in a Guide to Integrating IENS into the Nursing Workforce:

If yes, please specify:

29. Would you be willing to take part in a short telephone interview about best practices for the integration of IENs to the workplace?

☐ Yes
☐ No

If you are willing to participate in the telephone interview, please provide us with your contact information. Thank you in advance for your time.

Name:
Phone number:
Email:

THANK YOU

Definitions


**Diversity management relates to improving relationships and interactions among a culturally diverse workforce (Gilbert, n.d.).

***Cultural and linguistic competence is a set of congruent behaviours, knowledge, attitudes, and policies that come together in a system, organization, or among professionals that enables work in cross-cultural situations (Cross, Basron, Dennis, & Issacs, 1989). Alternatives terms for cultural competence is cultural sensitivity or cultural awareness.

This study is sponsored by the Ontario Ministry of Citizenship and Immigration
APPENDIX 6. EMPLOYER INTERVIEW GUIDE

Integrating Internationally Educated Nurses into the Health Care Workforce: 
A Guide for Employers

(a) Tell me about internationally educated nurses at your organization, e.g., proportion of nursing staff, countries of origin, etc.

(b) What strategies are you using to employ/recruit internationally educated nurses in your organization?
   a. Do you recruit abroad? Tell me about your strategies
   b. Do you foresee any change in your recruitment/retention strategies in the future? If so, what changes do you foresee and why?

(c) What is the level of interest in diversity planning for staffing your organization
   a. Board?
   b. Senior management?
   c. Managers?
   How are they translated into policy/operationalized?

(d) To what extent is cultural competence (in relation to 1. Patients; 2. Colleagues) for nursing staff a priority in your organization and how is it translated into policy/operationalized?

(e) What structures are in place to resolve cultural conflict?

(f) What strategies do you use to orient IENs to your organization and their clinical area?
   Do these strategies differ from those used with Canadian-educated nurses? Ideally, what other strategies would you like to adopt?

(g) What resources/strategies do you have to improve IEN integration into your organization, e.g., educational interventions, mentors, buddy programs, etc.

(h) How does your organization attempt to ensure equity/retention in the management of IENs in terms of a) continuing education; b) career planning?

(i) To what extent do you collaborate with community organizations, academia and the government in ensuring the integration of IENs? Do you have any current/future programs or initiatives?
The Proposed Guide

(j) What would you hope to see included in a guide on the recruitment and retention of IEN/ESL nurses? How would you like to see it organized?

(k) Do you have any initiatives underway that could be included as examples in a guide?

(l) Is there any program project working well at your organization that could be shared?
APPENDIX 7. DATA ANALYSIS

Analysis of Phase 1: Interviews and Survey

Survey data were analyzed using Excel. Responses to each item were summarized using descriptive statistics. Frequency distributions were calculated on demographics and other data elements. The individual interviews were conducted by telephone, audiotaped and transcribed. During data collection, the research team followed a sequence of interview, transcription, analysis, reflection and modification.

Interviews were coded into QSR NVivo version 10.0 (QSR International Pty Ltd, Doncaster, Victoria, Australia). Texts were then interpreted through thematic analysis (Boyatzis, 1998). During preliminary coding, members of the research team coded several texts independently. Team members then collaborated to develop a refined scheme to code the texts. Additional codes were assigned as new themes emerged. Major themes were highlighted, and key findings were categorized appropriately under each thematic heading.

Google Analytics: Definitions and Analysis

Definitions

**Pageview** – This "is defined as a view of a page on your site that is being tracked by the Analytics tracking code."

**Unique pageview** – This "aggregates pageviews that are generated by the same user during the same session. A unique pageview represents the number of sessions during which that page was viewed one or more times."

Source: Google Analytics (2013a, 2013b).

Analysis

Excel was used to analyze the pageviews and unique pageviews for the content main heading/title. Two steps were taken in order to achieve a set of data to analyze since data were collected before and after the May 2012 re-launch. During this time, the main content titles/headings were changed and some sections collapsed so the data had to be aligned and collapsed accordingly to analyze the content.

Step 1: Collapse the headings appropriately:

- "Main Page" remained the same.
- "Workforce Diversity" became "Hiring IENs"
- "Retention" became "Ongoing Support"
- "Bridging" and "Regulatory Environment' were lumped under "Requirements for IENs"
- "Useful Resources" became "Resource Centre"
- "Case Studies" remained the same
Step 2. Analyze the data in three stages:

1. Overall content over the project span (November 2011 – February 2013)
2. Before May 2012 re-launch (November 2011 – April 2012)
3. After May 2012 re-launch (June 2012 – February 2013)

*Note that December 2011 and January 2012 Google Analytics data is not available as it was being set up.
APPENDIX 8. CONFERENCES ATTENDED BY RESEARCH TEAM TO SHOWCASE THE WEB-BASED LEADING PRACTICE GUIDE

The research team attended several conferences and actively sought input from participants. The project and the web-based leading practice guide were showcased at three conference venues:

- April 12, 2012 - Hiring a workforce to suit the 21s century needs- Use of website. Presented at the Region 1 North East/North Central Annual Conference, Sudbury, Ontario.

Research team members spoke with conference participants during the gatherings and followed-up with interested parties who helped clarify and enhance aspects of the content on the website. An example included follow-up teleconferences and correspondence with the Quebec regulatory body to ensure that the content regarding Quebec was accurate and appropriately represented on the website.

The April 26 conference provided an opportunity to test the ideas regarding changes to the organization and format of the new website before the official re-launch in May 2012. Once again, the research team was available and spoke with interested stakeholders who provided more insight regarding the changes.
APPENDIX 9. OVERVIEW OF LITERATURE ON KNOWLEDGE TRANSLATION AND EXCHANGE

Within the Canadian health care system, the current methods of knowledge translation rely heavily on passive dissemination of research and place the responsibility for behaviour change on the target audience (Thompson, Estabrooks, & Degner, 2004). However, the literature suggests this methodology is not effective and the generated knowledge is not frequently accessed or utilized by the intended audience (Thompson, Estabrooks & Degner, 2004). Knowledge translation seeks to bridge the gap between research evidence and behaviour, practice and policy by targeting patients, providers and managers or policymakers (Boyko, Lavis, Dobbins, & Souza, 2011).

There are many definitions of knowledge translation and evaluation. According to the Canadian Institute of Health Research (CIHR, 2012, § 1), knowledge translation is the "dynamic and iterative process that includes synthesis, dissemination, exchange and ethically-sound application of knowledge to improve the health of Canadians, provide more effective health services and products and strengthen the health care system."

Knowledge translation is a concept that spans many disciplines (e.g., business, engineering, economics and health care). Each discipline may use unique terms to identify knowledge translation, which can cause considerable confusion. Indeed, the literature suggests that different titles are being given to the same phenomena (Thompson et al., 2004). Nonetheless, the common understanding across all disciplines is that interpersonal contact improves the likelihood of behavioural change when introducing an innovation into the health sector (Thompson et al., 2004).

The increased need for interpersonal contact and recognition that the passive diffusion of research findings is not enough to guarantee their adoption led to the development of roles and intermediates (Conklin, Lusk, Harris, & Stolee, 2013; Crosswaite & Curtice, 1994). The knowledge broker role, for example, arose because of the unpredictable flow of knowledge within and across social systems (Conklin et al., 2013).

Multiple theories conceptualize the interplay of knowledge exchange within organizations and other contexts. The vast number and diversity of knowledge translation models complicates rather than advances its use (Harris & Lusk, 2009). Within the Canadian health care system, four widely distributed frameworks are endorsed by the CIHR: the PARiHS (Promoting Action on Research Implementation in Health) framework, knowledge to action framework, network analysis theory and the knowledge transfer cycle (Harris & Lusk, 2009).

To promote the likelihood of knowledge transfer and exchange, Harris and Lusk (2009) suggest the following KTE (knowledge transfer and exchange) facilitation strategies should be used: networking, knowledge exchange platforms, performance improvement, quality improvement and knowledge brokering. Each is commonly used in the Canadian health care system.
A Framework for Integrating Internationally Educated Nurses (IENs) into the Health Care Workforce Project Overview

This three-phase project will enhance the effective integration of IENs into a more diverse health care workforce through the creation, implementation and evaluation of a leading practice guide for employers. The phases are as follows:

- **Phase One (Development)** – A draft guide will be created from a literature review and key stakeholder interview findings. The guide will be evaluated for applicability to a wide range of settings through interactive think tank workshops with HR leaders, nursing leaders, immigration specialists and educators.
- **Phase Two (Dissemination)** – The guide will be widely disseminated and implementation workshops will be held.
- **Phase Three (Demonstration on Implementing Leading Practices/Evaluation)** – Field-testing of specific leading practices from the guide will occur in six demonstration sites in order to further enhance the guide. The demonstration evaluation and iterative revision by the OHA will ensure the guide remains current.

**Dissemination Goals**

The aim of the project is to provide evidence to inform the creation of best practice guidelines for employers of IENs. The guide will be widely disseminated and implementation workshops will be held. Field-testing on specific leading practices from the guide in six demonstration sites will occur to further enhance the guide. The demonstration evaluation and iterative revision by the OHA will ensure the guide remains current.

**Target Audiences**

- Chief nurse executives/chief nursing officers
- HR professionals and leaders responsible for patient care
- IEN bridging/training programs
- IENs
- Local Health Integration Networks
- Ministry of Citizenship and Immigration
- Ministry of Health and Long-Term Care
- Professional bodies
- Senior government leaders, including the Ontario Minister of Health, deputy ministers and assistant deputy ministers
- Senior government officials responsible for policy development
<table>
<thead>
<tr>
<th>Deliverable</th>
<th>Dissemination Method</th>
<th>Date</th>
</tr>
</thead>
<tbody>
<tr>
<td>Employer's Web Guide</td>
<td>Posting on NHSRU website, email blast, Tweet &amp; email from OHA to 451 contacts, NHSRU e-newsletter December 13, 2011</td>
<td>HealthAchieve November 7, 2011</td>
</tr>
<tr>
<td></td>
<td>Announce re-design of web guide: OHA HR &amp; nursing contacts</td>
<td>July 12, 2012</td>
</tr>
<tr>
<td></td>
<td>NHSRU email blast (1322), Facebook, Twitter</td>
<td>July 12 , 2012</td>
</tr>
<tr>
<td></td>
<td>OHRRN and CHHRN listserve (1000)</td>
<td>July 13, 2012</td>
</tr>
<tr>
<td>Project videos</td>
<td>Available on the web guide</td>
<td>Health Achieve Nov. 7, 2011</td>
</tr>
<tr>
<td>Evidence Note for Debra Bournes on workforce integration</td>
<td>To D. Bournes &amp; RU @ June 28, 2011 Steer mtg; Emailed to Nursing Secretariat and RU</td>
<td>July 29, 2011 back from MOH</td>
</tr>
<tr>
<td></td>
<td>Posting on web, email blast</td>
<td>September 13, 2011</td>
</tr>
<tr>
<td>IEN Evidence Note for MCI</td>
<td>Submission to the Expert Roundtable on Immigration before April 30, 2012</td>
<td>April 27, 2012</td>
</tr>
<tr>
<td></td>
<td>Posting on web, email blast (to NHSRU stakeholders)</td>
<td>May 31, 2012</td>
</tr>
<tr>
<td>Research in Action: Current Project (web guide)</td>
<td>Prepare for MCI and send FYI to MOHLTC, check MCI submission guidelines?</td>
<td>Revised draft sent to team</td>
</tr>
<tr>
<td></td>
<td>Posting on web, email blast</td>
<td>January 25, 2012</td>
</tr>
<tr>
<td>Flipbook Guide</td>
<td>Prepare for employers and send FYI to MOHLTC, check MCI submission guidelines?</td>
<td>February 29, 2012</td>
</tr>
<tr>
<td></td>
<td>Mail out to stakeholders</td>
<td>October 2012</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Mid January 2013</td>
</tr>
<tr>
<td>Research in Action: Completed Project (results of evaluation of web guide)</td>
<td>Prepare for MCI and send FYI to MOHLTC, check MCI submission guidelines?</td>
<td>February 2013</td>
</tr>
<tr>
<td></td>
<td>Posting on <a href="http://www.nhsru.com">www.nhsru.com</a>, email blast, Facebook, Twitter</td>
<td></td>
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<tr>
<td>Journal Article(s)</td>
<td></td>
<td>TBA</td>
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<tr>
<td>Research Forum/Workshops</td>
<td>Think tanks to inform guide</td>
<td>Sept. 2011</td>
</tr>
<tr>
<td></td>
<td>NHSRU/OHA/MCI research forum on web guide</td>
<td>Feb. 2013</td>
</tr>
<tr>
<td></td>
<td>OHA E-blast regarding IEN workshops</td>
<td>Sept. 5, 2012</td>
</tr>
<tr>
<td></td>
<td>A. Grabham E-blast to TRIEC Group, interview participants, think tank participants and other stakeholders re: IEN project update and workshop promotion</td>
<td>Sept. 18, 2012</td>
</tr>
<tr>
<td>Presentations and Conferences</td>
<td>(Poster) Celebrating Innovations in Health Care Expo, Toronto</td>
<td>November 10, 2010</td>
</tr>
<tr>
<td>-------------------------------</td>
<td>---------------------------------------------------------------</td>
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</tr>
<tr>
<td>OHA, Project Advisory Committee</td>
<td></td>
<td>February 9, 2011</td>
</tr>
<tr>
<td>OHA HR symposium – postcards on website distributed to delegates, info on website displayed during breaks</td>
<td></td>
<td>October 5, 2011</td>
</tr>
<tr>
<td>HealthAchieve 2011 – website displayed at OHA Feature Exhibit</td>
<td></td>
<td>November 7–8, 2011</td>
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<tr>
<td>HealthAchieve 2012 – Website and flipbook displayed at OHA Feature Exhibit</td>
<td></td>
<td>November 5–6, 2012</td>
</tr>
<tr>
<td>(Poster) Leading Healthcare Quality Summit &amp; Innovations Expo</td>
<td></td>
<td>November 9, 2011</td>
</tr>
<tr>
<td>(Poster) on web guide @Workforce Integration of New Nurses Conference, Halifax</td>
<td></td>
<td>November 30–December 2, 2011</td>
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<tr>
<td>MOHLTC: Research to Policy Dialogue: Nursing Workforce Integration: Evidence to Policy</td>
<td></td>
<td>December 15, 2011</td>
</tr>
<tr>
<td>OHA Region 1 North East/North Central Education Conference, Sudbury Partners in Education &amp; Integration of Internationally Educated Nurses 6th National</td>
<td></td>
<td>April 11, 2012</td>
</tr>
</tbody>
</table>

- A. Grabham E-blast to stakeholders from Winnipeg conference as provided by Dina Idriss
- Posting on [www.nhsru.com](http://www.nhsru.com), NHSRU email blast, NHSRU Facebook, NHSRU Twitter
- Four OHA/NHSRU demo – field-testing workshops mentioned in the CARE Centre's IEN CONNECTOR newsletter
- IEN workshop recording communiqué sent by OHA [http://oha.mediasite.com/mediasite/Play/1454d14c7e00484c8f489ad6df986d091d](http://oha.mediasite.com/mediasite/Play/1454d14c7e00484c8f489ad6df986d091d)

- October 3, 2012
- October 25, 2012 (Toronto)
- October 26, 2012 (Niagara)
- November 26, 2012 (Ottawa)
- November 30, 2012 (Windsor)
- Sent October 1, 2012
- January 4, 2013
- February 8, 2013
<table>
<thead>
<tr>
<th>Event</th>
<th>Date</th>
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</thead>
<tbody>
<tr>
<td>Conference for Educators, Provincial Regulators and Employers of IENs, Winnipeg</td>
<td>May 31–June 1, 2012</td>
</tr>
<tr>
<td>OHA Second Annual National Nursing Executives Summit (distributed postcards and placed an ad on the rotating screen)</td>
<td></td>
</tr>
<tr>
<td>Health Quality Ontario’s Health Transformation 2012 Conference</td>
<td>Poster October 23, 2012</td>
</tr>
<tr>
<td>IEN project highlights: Engaging employers of IENs – Ontario Hospital Association and Nursing Health Services Research Unit Experience</td>
<td>September 7, 2012</td>
</tr>
<tr>
<td>MCI Learning Exchange 2012</td>
<td>December 10, 2012</td>
</tr>
<tr>
<td><strong>Media Relations</strong></td>
<td></td>
</tr>
<tr>
<td>OHA Today article announcing grant</td>
<td>June 18, 2010</td>
</tr>
<tr>
<td>OHA Today article - Think Tank</td>
<td>May 19, 2010</td>
</tr>
<tr>
<td>OHA Today article on website</td>
<td>October 6, 2011</td>
</tr>
<tr>
<td>OHA Today article announcing re-design</td>
<td>June 7, 2012</td>
</tr>
<tr>
<td>OHA Today article - St. Michael’s Hospital</td>
<td>June 21, 2012</td>
</tr>
<tr>
<td>OHA Today article - Mt. Sinai</td>
<td>July 5, 2012</td>
</tr>
<tr>
<td>OHA Today IEN web guide promotion - Why hire IENs</td>
<td>July 19, 2012</td>
</tr>
<tr>
<td>OHA Today article - Recruiting IENs</td>
<td>August 2, 2012</td>
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<tr>
<td>OHA Today article - Mentoring IENs</td>
<td>August 16, 2012</td>
</tr>
<tr>
<td>OHA Today article - Demo Workshops</td>
<td>August 30, 2012</td>
</tr>
<tr>
<td>OHA Today article - Demo Workshops</td>
<td>September 13, 2012</td>
</tr>
<tr>
<td>OHA Today article - On-Boarding</td>
<td>September 27, 2012</td>
</tr>
<tr>
<td>OHA Today article - Demo Workshops</td>
<td>September 27, 2012</td>
</tr>
<tr>
<td>Media Release on web guide</td>
<td>HealthAchieve November 7, 2011</td>
</tr>
<tr>
<td>Activity</td>
<td>Date</td>
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<td>-------------------------------------------------------------------------</td>
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<tr>
<td>OHA Bulletin (from CEO) on website</td>
<td>November 8, 2011</td>
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<tr>
<td>OHA Today article - Website</td>
<td>January 5, 2012</td>
</tr>
<tr>
<td>Hospital News (Suzanne)</td>
<td>January 17, 2012</td>
</tr>
<tr>
<td>Canadian HR Reporter, insert (Maggie)</td>
<td>6500 postcards mailed</td>
</tr>
<tr>
<td>Canadian Healthcare Manager, billboard ad in their e-newsletter.</td>
<td>February 2012</td>
</tr>
<tr>
<td>Article submitted to the Ontario Health Promotion E-Bulletin regarding the IEN project, website and workshops</td>
<td>December 20, 2011</td>
</tr>
<tr>
<td>OHA Today article - Culture Language</td>
<td>September 7, 2012</td>
</tr>
<tr>
<td>OHA Today article - Demo Workshops</td>
<td>September 18, 2012</td>
</tr>
<tr>
<td>OHA Today article - Demo Workshops</td>
<td>October 3, 2012</td>
</tr>
<tr>
<td>OHA Today article - Demo Workshops Completion and Success</td>
<td>October 11, 2012</td>
</tr>
<tr>
<td>OHA Today article - Demo Workshops Completion and Success</td>
<td>October 25, 2012</td>
</tr>
<tr>
<td>OHA Bulletin (from CHRO) regarding flipbook mail out</td>
<td>November 22, 2012</td>
</tr>
<tr>
<td></td>
<td>December 6, 2012</td>
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<tr>
<td></td>
<td>January 14, 2013</td>
</tr>
<tr>
<td><strong>Social Media</strong></td>
<td></td>
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<tr>
<td>Twitter: Tweets are sent by NHSRU when an e-mail blast goes out</td>
<td>Ongoing</td>
</tr>
<tr>
<td>Facebook content added - to OHA Facebook site</td>
<td>August 2012</td>
</tr>
<tr>
<td>Tweet sent by OHA</td>
<td>August 2012</td>
</tr>
<tr>
<td>OHA Linked in promo</td>
<td>August 2012</td>
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<tr>
<td><strong>Ads</strong></td>
<td></td>
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<tr>
<td>HRPA website add for three months</td>
<td>Beginning April 2012</td>
</tr>
<tr>
<td>OHA elevator ad (for OHA office)</td>
<td>February 2012</td>
</tr>
<tr>
<td>Date</td>
<td>Event Description</td>
</tr>
<tr>
<td>------------------</td>
<td>-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------</td>
</tr>
<tr>
<td>February 2012</td>
<td>OHA lobby monitor ad (for OHA office)</td>
</tr>
</tbody>
</table>
| May 31, 2012–June 1, 2012 | OHA Second Annual National Nursing Executives Summit  
Postcards distributed and advertisement in the slide deck (shown at the breaks) |
| June 20, 2012   | OHA – Women in Leaders  
Postcards distributed and advertisement in the slide deck (shown at the breaks) |
| July 16–18, 2012 | OHA - The Emotionally Intelligent Manager  
http://www.oha.com/Education/Pages/CalendarofEventDetails.aspx?eventid=CP12216  
Postcards distributed |
| October 17, 2012 | OHA – Annual Human Resources Symposium  
Postcards distributed and advertisement in the slide deck (shown at the breaks) |
| October 2012    | Brochures mailed out to Windsor and Niagara Region to promote workshop |
| Week of December 19, 2011 | Websites  
Info regarding the IEN website posted on MCI website (Maggie) |
(Maggie) |
| December 10, 2011 | Info regarding the IEN website posted on CARE website (Maggie) |
| September/October 2012 | Telemarketing  
Individual calls placed to over 200 stakeholders to promote the IEN Workshops |
| Sent Feb. 21, 2013 | Communications  
Information on 3 IEN resources (web guide, flipbook & workshops) in CASN newsletter and posting on their website. |
**Flipbook Distribution Breakdown**

- Over 2755 flipbooks were distributed.
- 1406 were mailed to stakeholders (including hospital CHROs, CNOs, LHINs, CCACs, think tank and workshop participants and the PAC) January 14, 2013.
- 260 were mailed to the Hospital for Sick Children to be used at the upcoming Operating Room Nurses' Association of Canada Conference in April 2013.
- Approximately 20 were distributed at the MCI Learning Exchange Event December 10, 2012.
- 7 copies were provided to OHA senior management on January 14, 2013.
- An additional 40 copies were mailed to St. Michael's Hospital upon request.
- 20 copies were mailed out to CARE on January 29, 2013; 5 more copies were mailed to another CARE centre January 29, 2013.
- Copies were made available at the OHA's Annual HR Symposium (October 23, 2013), OHA's HealthAchieve (November 2012) and at the IEN fall workshops (October–November 2012); the total distributed at these events is unknown.
- 1000 additional electronic copies of the flipbooks were sent out to Ontario’s Long Term Care Sector (~600) and Community organizations (~400) through the Ontario Ministry of Health and Long Term Care.
APPENDIX 11. FEEDBACK SURVEY ON THE WWW.oha.com/ien WEBSITE

The www.oha.com/ien website aims to provide a useful resource to employers and potential employers of Internationally Educated Nurses (IENs). The Ontario Hospital Association (OHA) appreciates your feedback.

Dear Participant,

The OHA and the Nursing Health Services Research Unit (NHSRU), McMaster University site, are collaborating to improve hiring, retention and integration of internationally educated nurses (IENs) in health care organizations in Ontario through the development, dissemination and evaluation of a practical evidence-based web guide. We have developed a leading practice web guide on the integration of IENs into the workplace, which is intended to assist employers of IENs. We are evaluating the website and would like your feedback.

The completion of this survey will take 5–10 minutes of your time. Your participation in this survey is voluntary and anonymous.

If you require further information regarding this survey, please contact Dr. Andrea Baumann, Director, NHSRU, McMaster University, at 905-525-9140 ext. 22581 or baumann@mcmaster.ca.

Thank you very much for your participation.

TITLE OF STUDY

LEGALLY RESPONSIBLE INVESTIGATOR AND PRINCIPAL INVESTIGATOR
Baumann, Andrea, RN, PhD, Director, Nursing Health Services Research Unit, McMaster University

SPONSORING/FUNDING AGENCY
The Ontario Ministry of Citizenship and Immigration.

WHAT WILL BE EXPECTED OF YOU AS A PARTICIPANT? You are being invited to participate in evaluating the web guide on the integration of IENs into the workplace, which is intended to assist employers of IENs. We are requesting the assistance of stakeholders who work with and support IENs to help evaluate our web guide for employers by completing this 10-minute survey. Your participation in this survey is voluntary and anonymous.

WHAT IS THE PURPOSE OF THIS RESEARCH? With current and impending employee shortages in the health care sector and an aging population that requires more care, it is essential to remove barriers for IENs entering Ontario's workforce. Recognizing the value of these professionals and the challenges they face, the OHA and the NHSRU, McMaster site, have created a guide to help employers hire, retain and integrate IENs into the workplace.

WHAT ARE THE BENEFITS FOR YOU AND/OR SOCIETY? This guide contains a wealth of information about issues related to workforce diversity, regulatory environment and bridging programs for IENs, as well as practical advice on orientation and recruitment.
CONFIDENTIALITY

Your comments and answers to the survey are not linked to personalized information and anonymity is guaranteed. Only aggregate data without personal identifiers will be shared publically. All electronic data will be destroyed after 10 years. Participation is voluntary and you may withdraw at any time. If you withdraw, there will be no adverse consequences or questions from the research team.

IF YOU HAVE ANY QUESTIONS ABOUT THE RESEARCH, WHO CAN YOU CONTACT?

If you require further information regarding this survey, please contact Dr. Andrea Baumann, Director, NHSRU, McMaster University, at 905-525-9140 ext. 22581 or baumanna@mcmaster.ca.

This study has been reviewed by the Hamilton Health Sciences/McMaster Faculty of Health Sciences Research Ethics Board (HHS/FHS REB). The REB is responsible for ensuring that participants are informed of the risks associated with the research and that participants are free to decide if participation is right for them. If you have any questions about your rights as a research participant, please call The Office of the Chair, HHS/FHS REB at 905-521-2100 ext. 42013.

CONSENT STATEMENT TO PARTICIPATE [ONLINE SURVEY]

I understand the information given to me about this study. My questions about the study have been answered to my satisfaction. I understand whom to contact if I have any additional questions. I am willing to participate in a survey to provide my feedback on evaluation of the Web Guide for Internationally Educated Nurses. I understand that all information gathered for this study will be confidential and that I will not be identified in reports or publications. I know that I can withdraw from the study at any time.

〇 I agree to participate in this survey
〇 I do not agree to participate in this survey

*2. Please select from the following options:
〇 I am a nurse
〇 I am NOT a nurse

3. Please select from the following options:
〇 I am a REGISTERED NURSE
〇 I am a REGISTERED PRACTICAL NURSE

*4. Were you educated in Canada?
〇 Yes
〇 No
5. Please select the province/territory where you were educated.

Select:

6. Please specify the country where you received your nursing education.

7. Please select the best option that describes your position.

Select:

*8. Please select the best option:

- [ ] I am an Employer/ Service Provider
- [ ] I am an Educator
- [ ] I am a Researcher
- [ ] I am a Regulator
- [ ] I work in Government
- [ ] Other (please list)

*9. Which of the following best describes your position?

- [ ] Chief Executive Officer
- [ ] Human Resources Leader
- [ ] Human Resources Specialist
- [ ] Human Resources Generalist
- [ ] Manager in a Clinical Setting
- [ ] Other Director or Manager
- [ ] Other (please list)

*10. Please provide an estimate for the number of Internationally Educated Nurses (IENs) employed at your organization:

Select:

*11. The sector that best describes where you work:

- [ ] Academic
*12. Select the best option that describes your area of practice:

Select: __________________________

13. Please provide the City and Province where your organization is located.

______________________________

14. How did you hear about this website? Select all that apply.

☐ Conference/ presentation
☐ Personal invitation
☐ Word-of-mouth
☐ OHA Today newsletter
☐ Material from the Internationally Educated Nurses: An Employer’s Guide Project (Ontario Hospital Association/ McMaster University) - e.g. Postcard, Email, Newsletter, Article, Workshop, Flipbook, etc.
☐ Web search
☐ Email
☐ Other (please list) __________________________

15. Please select the best option that describes your experience using the www.oha.com/ien website:

   Strongly Disagree Neutral Agree Strongly Not
<table>
<thead>
<tr>
<th></th>
<th>Disagree</th>
<th>Agree</th>
<th>Applicable</th>
</tr>
</thead>
<tbody>
<tr>
<td>Certain information I was looking for was missing from this website</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>This website provides me with sufficient information</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>The information in this website is of little use to me</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>This website offers information I find useful</td>
<td></td>
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<tr>
<td>The search option on this website helps me to find the right information quickly</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>The search option on this website gives me too many irrelevant results</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>I know where to find the information I need on this website</td>
<td></td>
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<td></td>
</tr>
<tr>
<td>The set-up of this website helps me find the information I am looking for</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>I think this website looks unattractive</td>
<td></td>
<td></td>
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</tr>
<tr>
<td>I find the design of this website appealing</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Homepage immediately points me to the information I need</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>It is clear which hyperlink will lead to the information I am looking for</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>The hyperlinks led me to the information I was expecting</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>I find this website easy to use</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>I find the information in this website easy to understand</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>I anticipate utilizing the website again in the future</td>
<td></td>
<td></td>
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</tr>
</tbody>
</table>

16. Please select the best option that describes your opinion on specific content on the www.oha.com/ien website:
17. What sections of the website were most relevant to your organization?

*18. Did you use any of the information, strategies, or tips provided on the www.oha.com/ien website?

- [ ] No
- [ ] Yes, which did you find most helpful?

*19. Have you developed, implemented, or are implementing policies and practices to improve the labour marketing integration of IENs?

- [ ] No
- [ ] Yes, what are the new policies and practices?

*20. Have you or your organization benefited from the IEN Project led by the OHA and the NHSRU (McMaster University) (e.g. did you learn about a new practice, policy, or program)?

- [ ] No
- [ ] Yes, how did you or your organization benefit from the project?
21. Do you have suggestions for improving the www.oha.com/ien website?

22. We will be conducting more in depth interviews with stakeholders regarding their experience with the www.oha.com/ien website. If you are willing to participate, please provide your name, organization, email, and phone number below:

Thank you for providing feedback on the www.oha.com/ien website.

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APPENDIX 12. EVALUATION OF IEN WEB GUIDE, FLIPBOOK AND WORKSHOPS INTERVIEW GUIDE

Integrating Internationally Educated Nurses into the Health Care Workforce: A Guide for Employers

Internationally Educated Nurse (IEN): A nurse whose basic nursing education was completed outside Canada. An IEN (i) enters Canada as a permanent resident before applying for employment as professional nurse; (ii) has been recruited and arrives through a VISA or a work permit; or (iii) a secondary migrant who has immigrated with spouse for his/her employment.

(a) [EMPLOYERS] Do you currently have internationally educated nurses (IENs) employed at your organization? If yes, can you please provide an estimate of numbers? If no, have you previously hired IENs?

Probes: If no, why not? Are there IENs or internationally educated health professional initiatives at your organization? Do you know of any plans to hire IENs/IEHPs in the future (i.e., part of long-term strategic plan?)

(b) How did you learn about the website? Flipbook?


Web Guide

(c) Have you visited the Internationally Educated Nurses: An Employer's Guide website http://ien.oha.com?

(d) Have you used the website and if so how?

Probe: Did you use any of the information, strategies or tips provided on the website? What sections were most relevant (i.e., Hiring IENs, Recruitment, Entry and Orientation, Ongoing support, Requirements for IENs, Case Studies, Resource Centre)? Do you anticipate others at your organizations using the website?

(e) Have you developed, implemented or are implementing policies and practices to improve your labour market integration of IENs? If not, do you anticipate using the website to learn more about IENs and relevant strategies/policies/practices to integrate IENs into the workplace?

(f) What did you like most about the website? What did you like the least? Do you think we are missing any content? Are there additional resources you would suggest?

Probes: Did you find it easy to read? Was the set-up of the website easy to follow? Was the design appealing? Did you use the search engine and find what you were looking for? What could be added/changed to improve the website? Would you change the content/layout/look/navigation? If yes, how would you change it?

(g) Did you know about our online feedback survey to evaluate the website? If yes, have you completed the online survey? If not, would you be willing to fill out the survey if we send it to you on email?
Flipbook

(h) Have you (or the appropriate person) received your copy of the Internationally Educated Nurses: An Employer’s Guide flipbook? Have you had a chance to read through the flipbook?

(i) Are you currently using the flipbook?
   Probes: If no, do you (or others at your organization) anticipate using the flipbook to learn more about IENs and relevant strategies/policies/practices to integrate IENs into the workplace?

(j) What is your opinion of the content of the flipbook?
   Probes: Please comment, if possible, on any of the content – i.e., hiring IENs, recruitment, Entry & Orientation, Ongoing Support, Requirements for IENs, Case Studies and Resource Centre. Was the information useful? If so, how was it useful?

(k) What did you like most about the flipbook? What did you like least?
   Probes: Did you find it easy to read? Did you find the information sufficient? Was the set-up of the flipbook easy to follow? Was the design appealing? What were the strengths?

(l) What could be added/changed to improve the flipbook?
   Probe: Would you change the content/layout/look? If yes, how would you change it?

Workshop (if applicable)

(m) Did you attend the workshop held in your region? If yes, what portion of the workshop did you find most relevant to you and your organization?
   Probe with Titles of Presentations: Immigration & Labour Market Trends in Ontario and the Community; Workforce Integration – Introducing IEN Web Guide; Community supports (CARE); Innovative Practices (HHS); Proven Mentorship Model (St. Michael’s); Provincial New Grad Mentorship Model; Discussion.

(n) Did you find the workshops helpful (may want to say what you mean by helpful (i.e., helpful in hiring IENs)? If so, how?

(o) Do you have any suggestions for improvements regarding the workshops?

General Questions

(p) Have you or your organization benefited from the products (i.e., the flipbook, web guide or workshops)?
   Probe: Did you learn about a new practice, policy or program? Which ones? Were there practices/policies on the website which were relevant to your organization? If yes, which ones? What barriers exist to implementing these practices?

(q) Would you recommend the flipbook to others? Would you recommend the web guide to others?

(r) Additional comments?