



Introducing a Special Series: Integration of Internationally Educated Nurses Into the Canadian Workforce

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Abstract

Internationally educated nurses (IENs) are a growing segment of our Canadian health workforce. Nursing leaders are seeking examples of effective IEN integration programs to shape organizational policies and strategies to support IENs in their local context. In this special issue, we share national and international examples of successful IEN integration, authored by the nurses leading these programs. In the first issue, we profile examples of IEN integration in rural Manitoba and in an urban centre in Ontario. Both examples offer insights suitable for varied geographical and cultural contexts, with commonalities regarding the need for thoughtful and collaborative approaches to IEN program planning, implementation and evaluation.

Summary

In this Special Issue, we share examples of successful internationally educated nurse (IEN) integration programs from across Canada and internationally. The insights from these papers can support nurse leaders seeking innovative strategies and policies to support IENs in their local contexts.

Introduction

Internationally educated nurses (IENs) comprise a growing segment of our Canadian nursing workforce. In Ontario alone, IENs account for 53.5% of new registered nurse (RN) registrants, while in Manitoba, they represent 16.9% of practising RNs (CNO 2025; CRNM 2024). To address the critical shortage of pandemic-exacerbated nursing vacancies, nursing leaders at federal and provincial levels have streamlined processes for licensure and registration for IENs – resulting in a record number of IEN registrants in the Canadian healthcare system and communities.

Given the recent and rapid nature of these changes, coupled with the recognition that successful IEN integration extends beyond addressing staffing shortages to enriching Canadian healthcare with diverse perspectives and expertise, nursing leaders are seeking insights from evidence and successful cases of IEN integration into the Canadian healthcare system and communities. The most effective approaches demonstrate that integration is not a one-way process of adapting IENs to Canadian systems, but rather a two-way integration that prepares both IENs and their receiving organization, along with the broader community, for mutual success.

To address this urgent need, we are introducing a special series in the *Canadian Journal of Nursing Leadership* on the topic of programs or strategies for IEN integration into the workplace. We know that there is a wealth of knowledge on the topic of IEN integration, which is often not published due to limitations related to the resource-intensive nature of conducting formal research in dynamic health systems. In co-designing this series, we purposefully sourced perspectives from nurse leaders who are leading innovative IEN integration programs in their local context – and invited them to describe their local evaluations of these initiatives, with transparent reflections and recommendations. These papers provide timely and actionable insights that may be immediately usable in your context.

Over the next few issues, we are publishing one or two short, practical papers on the topic of IEN integration from nursing leaders across Canada and beyond. Each of these papers will be grounded in rigorous evaluation methodologies and will offer replicable strategies for nursing leaders and healthcare organizations.

In the first issue, we provide two papers that underscore how contextual factors influence the structure and enactment of IEN integration programs. In the first paper, Baxter (2025) describes the evaluation of the IEN integration program in rural Manitoba, which required a partnership between the employers, health authorities, the nursing regulator and an academic institution. As the focus of this program was on recruiting and retaining IENs to work and live in rural Manitoba,

this paper raises important questions regarding what factors promote retention for nurses who envision long-term careers and live in Canada's rural communities, including the role of community integration alongside workplace integration.

In the second paper, Hou et al. (2025) describe their evaluation of implementing and evaluating the Supervised Practice Experience Partnership (SPEP) program at their large academic centre in Ontario. The SPEP program structure is well developed, available across Ontario and (similar to the program described in Manitoba) relies on intersectoral partnerships between the employer, government and nursing regulator. Hou et al. (2025) describe how they have uniquely implemented the SPEP program in their setting by attending to IENs' transitional needs, as well as investing in robust resources to prepare the organizational environment for IENs through resources for leaders and preceptors.

Conclusion

Both papers offer recommendations for nurses leading IEN integration in their local jurisdictions and provide thoughtful strategies for quick wins or insights that can inform long-term nursing workforce planning. They demonstrate that effective IEN integration requires moving beyond anecdotal approaches to systematic, evaluated programs with clear performance indicators and adaptive capabilities. Furthermore, they highlight that successful integration addresses not only technical competencies but also psychosocial well-being, cultural humility and the creation of inclusive workplace environments.

We hope that you enjoy this special series on IEN integration, and please contact us if you would like to contribute to future issues. The evidence and experiences shared here demonstrate that with collaborative leadership, intentional planning and commitment to continuous improvement, IEN integration programs can achieve remarkable success in supporting both individual nurses and healthcare system resilience.

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References

- Baxter, C. 2025. A Collaborative Approach to the Recruitment and Retention of Internationally Educated Nurses Into Rural Communities. *Canadian Journal of Nursing Leadership* 38(2): 12–23. doi:10.12927/cjnl.2025.27714.
- College of Nurses of Ontario (CNO). 2025. College of Nurses of Ontario: Nursing Statistics Report. Retrieved September 25, 2025. <<https://www.cno.org/Assets/CNO/Documents/Statistics/latest-reports/nursing-statistics-report-2025.pdf>>.
- College of Registered Nurses of Manitoba (CRNM). 2024. Annual Report. Retrieved September 25, 2025. <<https://www.crnmb.ca/wp-content/uploads/2025/04/CRNM-2024-Annual-Report-FINAL-1.pdf>>.

Hou, J., I. Azurin, K. Martina, P. Hublely and A. Indar. 2025. Internationally Educated Nurse Integration: Insights From the Supervised Practice Experience Partnership Program at the University Health Network. *Canadian Journal of Nursing Leadership* 38(2): 24–36. doi:10.12927/cjnl.2025.27715.