Future Skills Centre | Centre des Compétences futures

Project Insights Report

# An Educational Pathway to Employment for Internationally Trained Nurses in Alberta

**PARTNERS**
Bow Valley College

**LOCATIONS**
Alberta

**INVESTMENT**
$499,000

**PUBLISHED**
July 2026

**CONTRIBUTORS**
Val Duarte

## Executive Summary

Nurses are the backbone of rural and continuing care in Alberta – a backbone currently under strain. Nursing shortages are deepening as the province's population ages and demand for care outpaces the available workforce. This leaves patients, care providers, and communities to absorb the consequences.

Internationally educated nurses (IENs) represent a significant and underutilized part of the solution, yet systemic barriers consistently prevent them from securing nursing employment in Canada. To bridge this gap, Bow Valley College developed and piloted six employer-informed microcredential courses across two educational pathways, specifically designed to help IENs navigate the clinical and contextual demands of the Canadian healthcare workplace.

The pilot, which included 46 participants between July and September 2025, revealed that while online, self-paced microcredentials effectively build technical skills and individual confidence, they do not solve the broader systemic issues. Findings highlighted a persistent and exhausting cycle where IENs cannot gain the Canadian clinical experience they need to be hired because they are not being hired to gain that experience. Furthermore, the project identified deep-seated barriers, including hiring biases and workplace racism, that training alone cannot resolve.

Beyond upskilling individuals, systemic change in healthcare hiring practices is needed: ensuring IENs are not just trained, but effectively integrated into the provincial workforce through meaningful employer recognition and work-integrated learning. In the context of acute nursing shortages, that integration isn't just good for nurses. It is essential for patients, for the healthcare system, and for the communities depending on both.

**KEY INSIGHTS**

1. In a survey of 16 internationally educated nurses (IENs) who participated in the training pilot, 100% reported developing new skills, and 94% felt better prepared to work as an RN in Alberta. However, no participants had secured employment by the time the evaluation concluded.

2. Microcredentials cannot deliver on their promise until employers, institutions, and regulatory bodies agree on what they mean.

3. Long-term care homes and facilities for elderly or disabled people, had the most job openings and the least interest – only 16 participants enrolled in the continuing care pathway compared to 30 in rural acute care.

## The Issue

Alberta's healthcare system is currently defined by a stark paradox: while rural acute care and continuing care facilities face debilitating nursing shortages, hundreds of internationally educated nurses (IENs) who reside in the province are unable to secure work in their profession. As the province's population ages and the demand for complex care rises, the inability to integrate these skilled professionals leaves rural communities and long-term care residents vulnerable.

Historically, the primary barrier cited by employers has been a perceived lack of "Canadian experience." However, through consultations with Alberta Health Services (AHS) leaders and nurse employers, Bow Valley College found that IENs often lacked familiarity with the distinct competencies required for rural acute care and continuing care – two settings with high employment potential. Existing education pathways focused almost exclusively on the high-level licensure requirements set by regulatory bodies, and neglected the practical, employer-identified needs for day-to-day operations in these specific environments.

## What We Investigated

This project set out to understand whether targeted microcredential training could improve job readiness and employability for Internationally Educated Nurses (IENs) in Alberta. It also explored the role this kind of upskilling plays within the broader challenge of integrating IENs into the provincial nursing workforce.

Bow Valley College developed and piloted six employer-informed microcredential courses in two educational pathways for high-demand settings. The college worked with Alberta Health Service leaders, nurse employers, and nurse educators to identify competency gaps in rural acute care and continuing care. Six skills were selected for being high-demand, specialized, and not covered in existing bridging programs. There were three 20-hour courses per pathway, each built around a single skill-based learning outcome grounded in real-world job performance. Courses were delivered asynchronously through Bow Valley College's Pivot-Ed platform, with flexible design features that allowed learners to focus on unfamiliar content, repeat assessments, and build both technical and non-technical skills.

AND Implementation Inc. conducted an independent evaluation of the pilot, guided by three core questions:

1. **Effective Models:** What does an effective employer-driven, rapid educational upskilling pathway look like for specialized sectors?
2. **Readiness & Employability:** How effective was the pathway in increasing the job readiness of IENs and their subsequent employability in the Alberta healthcare market?

3. **Learner Experience:** How did IENs themselves perceive the relevance, usefulness, and accessibility of the courses?

The evaluation drew on semi-structured interviews, an online survey, document reviews, and data from the registration and learning management systems. Participants included IENs from the pilot, Bow Valley College staff, course instructors, Alberta RNs, and staff from organizations supporting nurses in the province. Quantitative data were analyzed using descriptive statistics; qualitative data were analyzed thematically, with codes aligned to the evaluation questions and logic model. This approach was chosen to capture not just training outcomes but the broader institutional and systemic barriers IENs face on the road to employment.

## ✔ What We're Learning

The pilot ran from July to September 2025, with 46 IENs enrolling across both pathways — 16 in continuing care and 30 in rural acute care. Participants were predominantly women (91%). Most had arrived in Canada between 2020 and 2025, and 43% reported annual household incomes below $20,000 — under the basic standard of living for a single person in Alberta.

**The pilot was relevant, timely, and genuinely valued by participants**
There was strong alignment between the courses' intended purpose and IENs' motivations to enroll, which suggests that this kind of targeted upskilling is wanted. Among those who completed the post-pilot survey, 94% said they would recommend the training to another nurse looking to upskill (n = 16). Bow Valley's responsive approach to technical glitches and deadline extensions contributed to learner satisfaction and completion. The benefits also extended beyond the project's primary goals. IENs preparing for licensing exams found the content to be a useful refresher. Those already working in allied health roles were able to apply concepts to improve their practice. Many used the courses to clarify whether rural acute care or continuing care was the right fit for their career goals. Across the board, participants appreciated the care shown by instructors, the program officer, and the Bow Valley team.

**The skill gains were real, but are not the same as being closer to employment**
From the post-pilot survey, 100% reported developing new, relevant skills and 94% felt better prepared to work as an RN in Alberta (n = 16). Courses like Critical Rural Care, Mental Health in Rural Settings, and Dementia, Delirium and Depression helped IENs build familiarity with Canadian healthcare contexts, strengthen confidence, and refine their job search strategy. One IEN used course content to successfully answer a job interview question — and got a second interview. These are meaningful outcomes. But the evaluators are clear: it is too soon to tell whether IENs successfully acquire RN jobs in Alberta, and whether or to what extent the microcredentials contributed to job acquisition and retention. No participants had secured RN employment by the time the evaluation concluded.

**Continuing care is where the jobs are, but not where IENs are looking**
Enrollment and engagement in the continuing care pathway were noticeably lower than in rural acute care — 16 participants compared to 30. Many IENs saw acute care as more dynamic, more aligned with their training, and more prestigious. This was also a cultural issue. In many IENs' countries of origin, elderly and dependent people are cared for at home; institutional continuing care simply doesn't exist in the same way. Arriving in Canada, IENs may find the setting unfamiliar both professionally and culturally. The gap between employment availability and where IENs want to work has direct implications for future iterations of this program.

**Training alone cannot solve a hiring problem**
Microcredential recognition remains inconsistent across the sector — some employers said they wouldn't notice a badge on a résumé, let alone factor it into a hiring decision. Beyond recognition, the qualitative results identified hiring biases and workplace racism as persistent barriers beyond the scope of any upskilling program. IENs continue to face a structural paradox: they need Canadian clinical experience to get hired, but cannot get hired without it. To address employment outcomes, interventions need to be directed at employers: bias training, work-integrated learning opportunities, and hiring supports that don't place an added burden on existing nursing teams.

**Key assumptions about the model remain untested, and several design limitations need to be addressed before scaling**
The pilot's text-heavy, online format raised questions about whether written assessments can reliably measure clinical skill acquisition, particularly for IENs navigating courses in a second language. One IEN shared that after completing the Mental Health in Rural Settings course, they still felt unsure how to support someone in a mental health crisis. This served as a reminder that passing an assessment and being job-ready are not the same thing. Without clear rubrics, consistent grading criteria, or partial marks, it remains unclear whether course completion reliably indicated skill attainment. The absence of a clinical placement component left many IENs questioning the value of the microcredentials altogether.

## Why It Matters

Canada is facing a healthcare workforce crisis, and immigration is part of the intended solution. What this project makes clear is that bringing internationally educated nurses (IENs) to Canada is not the same as integrating them into the workforce.

**State of Skills:**
**What Works for Newcomer Integration**

The barriers IENs face – Canadian clinical experience requirements, workplace racism, and a credentialing ecosystem that doesn't know what to do with microcredentials – are not training problems but systemic ones. For policymakers and funders, the implication is direct: upskilling programs for newcomers in regulated professions need to be paired with employer-side interventions to have a meaningful impact on employment outcomes. Funding models that support individual skill-building without addressing the institutional conditions that exclude trained newcomers risk producing well-prepared candidates who still can't get hired.

Beyond healthcare, this project holds lessons for any organization designing upskilling or credentialing programs for internationally trained professionals in regulated sectors. The model Bow Valley developed is transferable in principle, but the evaluation's candid findings about what the model could not do are equally instructive.

Despite the overall success of Canada's immigration system, a number of challenges persist. When compared to other nations, labour market mobility for newcomers in Canada is not as strong as other dimensions of migrant integration.

**Read Thematic Report**

Programs with internationally trained teachers, engineers, social workers, or tradespeople face versions of the same structural paradox: motivated, qualified people blocked by credential recognition gaps, hiring biases, and demand for local experience. The lesson from this project is not that microcredentials don't work, but that they work best as one piece of a larger system that needs to include employers, not just learners.

For the post-secondary sector, this project offers honest and timely insights. Microcredentials need consistent recognition across the sector to function as employability tools. This requires provincial coordination between educational institutions, regulatory bodies, and employers. Otherwise, learners invest time and energy into credentials that hiring managers don't know how to evaluate.

This project speaks directly to a broader truth about skilled immigration: Canada's ability to benefit from the talent it attracts depends on whether its institutions are built to include that talent.

## What's Next

The most important next step is to determine whether the microcredentials facilitate job-ready skill acquisition, whether completing them makes IENs more competitive in Alberta's hiring market, and whether assessments reliably measure what they are designed to measure. Tracking alumni employment outcomes and bringing employers into the evaluation process are essential starting points.

Based on the learning from this project, Bow Valley is planning a hybrid model with hands-on components, more diverse learning modalities, and an assessment-first design. Accessibility concerns with the new hybrid model deserve attention: in-person requirements introduce transportation costs, time off work, and childcare that could exclude the very population the program is designed to serve. Future work should also examine whether the model meets upskilling needs for working RNs, whose experience and circumstances differ significantly from those transitioning out of bridging programs.

Finally, reconciliation was outside the scope of this project, but the evaluators identified it as a gap that future iterations should address. The Truth and Reconciliation Calls to Action include specific actions for health and education that offer a concrete starting place to build in course content as a structural commitment, not an afterthought.

Have questions about our work? Do you need access to a report in English or French? Please contact communications@fsc-ccf.ca.

**How to Cite This Report**
Duarte, V. (2026). Project Insights Report: Advancing IEN Care Pathways: An Educational Pathway to Employment for Internationally Trained Nurses in Alberta. Toronto: Future Skills Centre. https://fsc-ccf.ca/projects/nurses-in-alberta/

Funded by the Government of Canada's Future Skills Program

Canada

An Educational Pathway to Employment for Internationally Trained Nurses in Alberta is funded by the Government of Canada's Future Skills Program. The opinions and interpretations in this publication are those of the author and do not necessarily reflect those of the Government of Canada.