

College of Nurses of Ontario
Nursing Statistics Report
2026



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Executive Summary

The College of Nurses of Ontario (CNO) is the governing body for Registered Nurses (RNs), Registered Practical Nurses (RPNs) and Nurse Practitioners (NPs) in Ontario. Our purpose is to protect the public by promoting safe nursing practice.

CNO is also the authoritative source of nursing statistics in Ontario. Because all nurses must register with CNO in order to practice, CNO has the most comprehensive application, registration and employment data on nurses in the province. We share this data with members of the health care system to support health human resource planning, decision-making and research.

The *College of Nurses of Ontario Nursing Statistics Report 2026* describes key highlights, data and trends from the past year, including changes to the overall nursing population, demographic shifts and changes in employment patterns. You can find the detailed datasets in the [Appendices](#).

2026 Key Trends

The number of nurses registered continues to grow: At the time of annual renewal, the number of nurses registered with CNO (the supply) continued to grow in 2026 with 197,020 nurses renewing at least one certificate of registration in the General or Extended Class. (Nurses can have dual certificates of registration as both RPNs and RNs.) There was a net gain of 6,124 nurses in 2026, which represents 3.2% growth year-over-year. Losses (the number of nurses who do not renew their registration or move to the Non-Practising Class) have remained steady as a proportion of the total supply in recent years, indicating that the rate at which nurses are leaving the profession has not changed. The gains in the nursing supply in 2026 are being primarily driven by graduates from Ontario nursing programs from 2025 (62.6% of new nurses in 2025). This is a change over the last few years, where newly registered internationally educated nurses (IENs) had more of an impact on gains in the supply. Movement among new IENs may have also reached a peak in 2022–2024 and may be returning to previous historical levels, as indicated by an increase in first-time renewal rates for IENs in 2026, alongside a continued decrease in requests from IENs to verify their registration for another regulator.

Nurse types within the supply continue to evolve: From 2023 to 2025, the total number of nurses with only an RPN certificate of registration plateaued, while all other nurse types experienced growth. In 2026, this pattern shifted slightly, with growth across all nurse types including RPNs (2.3% for RPNs, 3.3% for RNs, 7.9% for NPs, and 16.4% for dual RN/RPNs). Ontario graduates largely accounted for the growth among RPN-only nurses. Despite the growth in 2026 for RPN-only nurses, they continue to make up a smaller proportion of the overall nursing supply (a drop of 2.3% since 2023). One of the main drivers of this decrease is a decline in the number of IENs who apply for dual RN and RPN registrations. Over the last five years, more internationally educated applicants are registering as RNs only, because of regulatory and process changes.

More Canadian nurses are coming to Ontario, and more Ontario nurses are holding concurrent registration in other provinces or territories:

Due to recent labour mobility legislation making it easier for Canadian nurses to register in Ontario, we have seen an increase in nurses registering in Ontario from elsewhere in Canada. There has also been an increase in concurrent registrants, meaning nurses who hold at least one registration with CNO and have at least one registration in another Canadian province or territory. In 2025, there was a total of 1,886 registrations through labour mobility (more than a four-fold increase since 2021) and in 2026, concurrent registrants now represent 6.6% of all CNO registrants (twice as many as in 2021).

The nursing workforce in Ontario continues to grow: There was a 3.3% increase in the number of nurses employed in nursing in the province in 2026. The proportion of nurses employed in nursing outside of Ontario is stable (remaining around 2.5%), with minimal change between 2023 and 2026.

New nurses may be experiencing challenges finding employment: For the past two years, there has been a larger share of nurses renewing for the first-time (meaning they have been registered for one year or less) who are seeking nursing employment. This was particularly true for RNs and IENs, suggesting that these groups may be experiencing challenges in securing employment. For new RNs: 17% were seeking employment in 2025, increasing to 22.5% in 2026; for new IENs: 22% in 2025, increasing to 31.4% in 2026. For the second year in a row, there was a smaller proportion of full-time positions reported by first-time renewals (down 8.3% for new RNs and down 5.8% for new RPNs in 2026).

Where nurses hold employment positions continues to change: The proportion of total RPN positions held in the hospital sector increased from 39.7% in 2021 to 41.9% in 2026, while the share in long-term care declined from 33.3% to 30.3% over the same period. In contrast, the distribution of RN employment positions held across hospitals and long-term care remained relatively stable. However, the sectors in which newly registered RNs report holding employment positions appear to be changing, a pattern attributed to IENs. Among first-year internationally educated RNs, the proportion of total positions held in the long-term care sector rose substantially from 29.6% in 2021 to 46.3% in 2026, while the share of positions held in hospitals declined from 53.1% down to 30.4%.

Purpose

CNO's *Nursing Statistics Report 2026* presents key highlights, data and trends from the past year in one easy to read report. It provides a comprehensive picture of the trends in nursing health human resources in Ontario, enabling us to identify the most significant patterns across several CNO processes, including application, registration and annual renewal. Detailed statistics covering registration renewal, new registrations and first-time renewal are available within the three [Appendices](#) found at the end of the report.

Guide to Understanding CNO's Nursing Statistics Report 2026

This section provides high-level information about CNO processes and definitions needed to understand the data and trends in this report. Please refer to the [Glossary](#) and [Appendices](#) for more definitions and details related to the methodology.

Nurse Types

CNO classifies nurses based on nursing category and class. There are [multiple classes of registration](#), determined by both a nurse's nursing education and type of nursing practice. Nurses may hold registration in more than one category (RN or RPN) at the same time, but not multiple classes in the same category. For simplicity, the report presents data by the following nurse registration types:

- **RN:** Registered Nurse only—General Class
- **RPN:** Registered Practical Nurse only—General Class
- **NP:** Nurse Practitioner (also known as a Registered Nurse in the Extended Class)
- **Dual RN/RPN:** Registered Nurse in the General or Extended Class (an RN or an NP) and Registered Practical Nurse

In this report, we also refer to nurses in the [Non-Practising Class](#), which means they remain registered with CNO but are in a class that cannot practice nursing in Ontario. Data on the Non-Practising Class can be found in [Appendix A](#).

CNO Processes

Application

To begin the process of becoming registered as a nurse in Ontario, a person must create an application with CNO through the online portal, submit basic information and pay an application fee. From this point, CNO begins the application review process. During the review, the applicant may be asked to provide CNO with additional information and documentation and if necessary, work to complete outstanding registration requirements. Individuals can create more than one application at a time, for example, it is possible to apply concurrently as both an RN and an RPN. [Learn more about the application process.](#)

Registration

To practice nursing in Ontario and use a protected title (nurse, Registered Nurse, RN, Registered Practical Nurse, RPN, Nurse Practitioner, NP, or any variation)¹, a person must obtain a valid CNO certificate of registration. [Learn more about the registration process.](#)

Annual Membership Renewal

At the end of every year, CNO requires registrants to renew their registration(s) through the Annual Membership Renewal (AMR) process, which extends their registration for the subsequent calendar year. The renewal year refers to the year the registration is valid, not the year in which most nurses submit their AMR form. As part of the renewal process, we collect registrants' demographic and employment information in keeping with our regulatory mandate. [Learn more about AMR.](#)

Reinstatement

In cases where a nurse has resigned, their certificate of registration has expired, or they are registered in the Non-Practising Class, they can apply to CNO for reinstatement. Like the registration process, there are requirements that must be met depending on the type of reinstatement. [Learn more about reinstatement.](#)

Verification of registration

If a nurse wants to practice nursing outside of Ontario, the regulatory body where they are applying may require their current or former regulator to verify their past registration. Importantly, the verification of registration is only one part of the application process and does not always equate to the nurse gaining registration in another jurisdiction. While some nurses may decide to maintain registration in multiple jurisdictions, others may decide to maintain just a single registration. [Learn more about verification of registration requests.](#)

Labour mobility

If a nurse who is registered in another Canadian province or territory wants to work in Ontario, the [Canadian Free Trade Agreement](#) stipulates they are eligible to obtain registration without needing additional training, work experience, examination or assessment. As such, a simplified application process is available: applicants can choose to sign a declaration of good standing and request a verification of registration from their current regulator. This process enables eligible applicants to meet registration requirements, including evidence of recent practice and verification of registration, within a matter of days. [Learn more about registration requirements for Canadian applicants.](#)

¹ The Nursing Act, 1991 regulates title protection for nurses.

Key Concepts and Definitions

Key concept	Definition	Unit of measurement
Nursing supply	The total number of nurses available to practice in Ontario. They are registrants of CNO who renewed at least one registration but may or may not be employed in nursing. This includes nurses registered as RNs, RPNs, NPs, or dual RN/RPNs, but excludes nurses in the Non-Practising Class.	Individual nurses
Nursing workforce	The total number of nurses available to practice and employed in nursing in Ontario. Includes nurses registered as RNs, RPNs, NPs, or dual RN/RPNs, but excludes nurses in the Non-Practising Class.	Individual nurses
Registrants	Individual nurses registered with CNO. (Dual RN/RPNs are counted as one registrant.)	Individual nurses
Registrations	Each certificate of registration obtained or renewed with CNO. The number of registrations will always exceed the number of registrants, because nurses may have multiple registrations (dual RN/RPNs).	Certificates of registration
New registrants	Nurses who register with CNO for the first time. May be in any category and either the General or Extended Class (applicable to RNs only). Nurses are only counted as new registrants once in their career. (New registrants do not include nurses obtaining an additional registration or reinstating a past registration.)	New individual nurses
Additional registrations	An additional certificate of registration a nurse, already registered with CNO, obtains. For example, an RPN who gains an RN registration to become a dual RN/RPN.	New additional certificates of registration
Applicants	Individuals who have initiated an application for registration or reinstatement with CNO and have paid the application fee. Individuals with multiple applications (for example, an RN and an RPN) are only counted once.	Individual applicants
Applications	Each application that has been initiated (if the application fee has been paid) as opposed to each applicant. Individuals with multiple applications (for example, an RN and an RPN) are counted multiple times.	Applications to CNO
Gains	A gain to the nursing supply is a nurse who renewed one or more registrations in the current renewal period, but did not renew any registration in the year prior. They represent the number of nurses added to the system in that year. Examples of gains are new registrants and nurses reinstating.	Individual nurses
Losses	A loss to the nursing supply is a nurse who did not renew any registration in the current renewal period, but did renew one or more registrations in the year prior. They represent the number of nurses who have left the system in that year. Examples of losses are nurses not renewing their registration or moving to the Non-Practising Class.	Individual nurses
Employment positions held	A nursing employment position reported as held by a nurse during the Annual Renewal process (does not represent the total existing employment positions available within a sector or setting and does not address the number of unfilled positions).	Individual nursing jobs

Report Timeframe

The College of Nurses of Ontario Nursing Statistics Report 2026 covers the renewal years of 2021 until 2026 inclusive (a 6-year timeframe). Throughout the report, when we refer to 2026, the timeframe is the 2026 renewal year. Data related to new registrants, additional registrations, labour mobility registrations, applications and verifications of registration are compiled by calendar year and available up until the end of 2025 (a 5-year timeframe).

Nursing Data Dashboard and Other Statistical Reports

You can find additional data on nursing applications, registrations, demographics and employment by using [CNO's Nursing Data Dashboard](#). This self-serve portal allows you to access CNO data from the last ten years.

Further data and information about movement and attrition within the Ontario nursing supply and workforce in 2025 can be found in CNO's new [Movement and Attrition Report](#).

Data Advisory

CNO has established processes in place to ensure data integrity and accuracy. However, it is important to note that small differences in the data between reporting periods may result from routine data quality improvements, including the correction of minor errors. These adjustments do not reflect substantive changes in the underlying trends.

Preface

Over the past six years, Ontario has experienced sustained growth in both the supply of nurses available to practice and the number of nurses working in nursing roles. During this period, CNO introduced several major registration reforms to facilitate nurse mobility within Canada, improve registration efficiency and ease the transition to practice for internationally educated nurses (IENs). As a result, IENs have had a significant influence on recent registration and employment trends.

CNO has made several changes over the past few years to streamline how nurses from other Canadian provinces or territories can register with CNO. Launched on Jan. 1, 2026, [automatic recognition](#) is an initiative that allows nurses already registered in another Canadian province or territory to become registered with CNO in just two business days.² [Interjurisdictional nurse licensure](#), another recent initiative to enhance labour mobility, aims to help nurses maintain registration in multiple Canadian provinces or territories by reducing the duplication of regulatory requirements. Finally, changes made in April 2025 to [modernize CNO's registration requirements](#), include accepting nursing education recognized

or approved in any jurisdiction. In addition, a new Transition to Practice requirement ensures applicants are familiar with competencies specific to the Canadian practice context, supporting a smoother transition to practice for nurses, particularly those who are internationally educated³.

Beyond Ontario, other Canadian nursing regulators and health system partners similarly report increases in the nursing supply and workforce^{4,5,6} and that IENs are contributing to this growth^{7,8}. Recent process changes across Canadian nursing regulators have made labour mobility easier and more accessible, leading to an increased movement of nurses within Canada⁹.

Given the similar patterns observed in nursing supply and workforce trends across Canada, it is clear that many of the major trends we see in Ontario are not occurring in isolation. At the same time, Ontario-specific circumstances and trends remain important considerations. Interpreting the 2026 trends in Ontario nursing data requires attention to both local regulatory changes and the broader national health human resource context.

² Labour mobility data until the end of 2025 is available in the current report.

³ CNO is currently conducting an in-depth evaluation that will capture the impact of the registration changes on the nursing supply and workforce.

⁴ The College of Registered Nurses of Alberta reported an 11% year-over-year increase in 2024/25 renewals and a 3% year-over-year increase in 2025/26 renewals. Please see: <https://crna.com/media/czxpdaoo/2024-2025-permit-renewals.pdf> and <https://crna.com/media/ydjd50or/2025-2026-permit-renewals-3.pdf>

⁵ The Nova Scotia Nursing and Midwifery Regulator reported a 4.5% increase in RNs for 2025 and a 3.7% increase in Licensed Practical nurses for 2025, year-over-year. Please see: <https://www.nsnmr.ca/sites/default/files/documents/Registration/Workforce%20Nursing%20Data/RNs%20Profile%202025.pdf> and <https://www.nsnmr.ca/sites/default/files/documents/Registration/Workforce%20Nursing%20Data/LPNs%20Profile%202025.pdf>

⁶ The Canadian Institute for Health Information reported that the RN supply grew at a rate of 4.7% in 2025 and that RNs employed in direct patient care in Canada had an annual growth rate of 2.0% between 2024 and 2025. Please see: <https://www.cihi.ca/en/registered-nurses>

⁷ The Canadian Institute for Health Information reported that the percentage of IENs in the nursing supply in Manitoba grew from 9.1% in 2015 to 13.3% in 2024. Please see: <https://www.cihi.ca/en/health-system-context-series-manitoba>

⁸ The Canadian Institute for Health Information reported that internationally educated RNs accounted for 16.8% of the RN supply in Canada in 2025, compared with 14.4% in the previous year. Please see: <https://www.cihi.ca/en/registered-nurses>

⁹ The College of Registered Nurses of Manitoba reported a recent increase of almost 132% in labour mobility applicants, 228 in 2022 compared with 528 in 2023. Please see: https://www.crnmb.ca/wp-content/uploads/2025/02/Current-Trends-in-RN-Regulation-02_2025_FINAL.pdf

2026 Nursing Statistics

Nursing Supply Trends

Sustained growth of the nursing supply

Similar to past years, the number of nurses registered with CNO continued to grow in 2026, with 197,020 nurses renewing at least one certificate of registration in the General or Extended Class (up 3.2%, year-over-year). (See Table 1.) The nursing supply is mostly composed of Ontario graduates (77.8%; 153,321). (See [Appendix A Table 3.2.1.](#)) However, the proportion of IENs has been steadily growing and now accounts for 18.1% (35,635) of the total supply in 2026. (See [Appendix A Table 3.2.3.](#)) Graduates from other Canadian provinces make-up 4.1% (8,064) of the total supply in 2026. (See [Appendix A Table 3.2.2.](#))

Table 1: Overall renewals in the General and Extended Classes

Nurse type	2021		2022		2023		2024		2025		2026	
	N	%	N	%	N	%	N	%	N	%	N	%
RN	108,976	64.5	110,938	64.2	114,080	64.0	119,243	64.9	125,297	65.6	129,398	65.7
RPN	55,056	32.6	56,846	32.9	58,469	32.8	58,276	31.7	58,713	30.8	60,062	30.5
NP	4,035	2.4	4,352	2.5	4,642	2.6	4,998	2.7	5,367	2.8	5,792	2.9
Dual RN/RPN	806	0.5	778	0.4	993	0.6	1,246	0.7	1,519	0.8	1,768	0.9
Total	168,873	100%	172,914	100%	178,184	100%	183,763	100%	190,896	100%	197,020	100%
Year-Over-Year Growth	1.77%		2.39%		3.05%		3.13%		3.88%		3.21%	

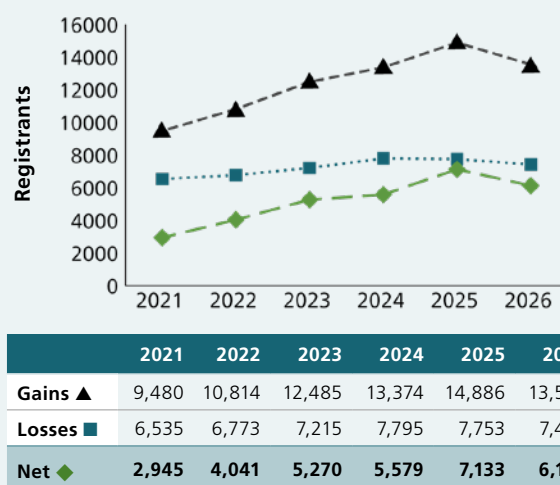
Net gains and stable losses in the supply

To better understand the growth in the nursing supply, it is important to look at both gains and losses. In 2026, there was a gain of 13,550 nurses in the General and Extended Classes and a loss of 7,426 nurses, leading to an overall net gain of 6,124 nurses to the nursing supply after renewal. (See Figure 1.) Growth in the supply comes from new registrants (nurses registering with CNO for the first time in either the General or Extended Class) and reinstatements (nurses who re-join the General and Extended Classes after their certificate of registration has expired or they have resigned). There is also movement of nurses who reinstate from Non-Practising to another class (General or Extended). Like past years, 94.1% of gains were new registrants in 2026, with reinstatements making up only 5.9%.

In 2026, the rate of losses (or the percentage of losses as a proportion of the total number of renewals) was 3.8%, similar to prior years (with rates ranging from 3.9% to 4.2% since 2021). Losses include nurses not renewing their

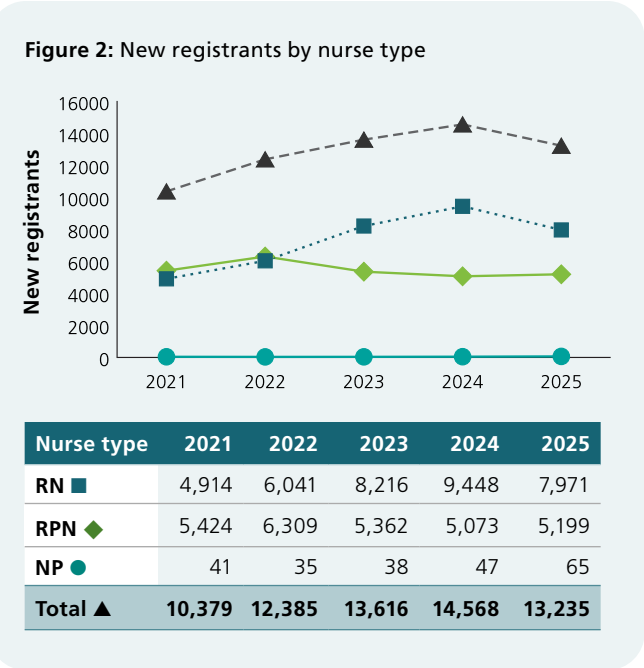
registration and nurses moving to the Non-Practising Class. Nurses moving to the Non-Practising Class represented 44.7% of losses in 2026, also comparable to recent years. Further information on gains and losses in the nursing supply in 2025 can be found in CNO's [Movement and Attrition Report](#).

Figure 1: Gains and losses in the General and Extended Classes

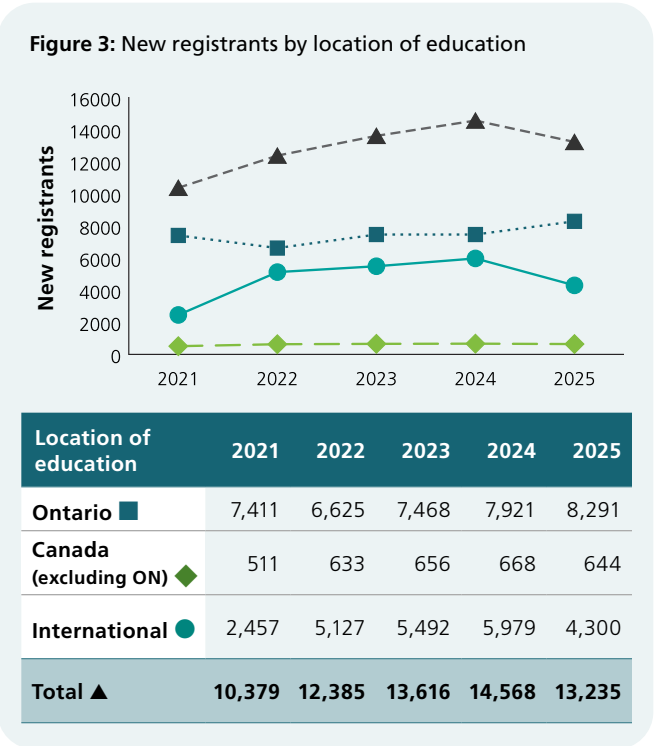


New registrants in 2025

In 2025, there were 13,235 new nurses registered. (See Figure 2 and note data are compiled by calendar year with data available until the end of 2025. See the [Report Timeframe](#) section above for more details.) The number of new registrants in 2025 declined compared to 2024 (down 9.1% year-over-year), but the total was comparable to 2023 and higher than 2022. In addition, over the past 5 years, the proportion of new registrants that are RNs has been rising (going from 47.3% in 2021 to 60.2% in 2025), while the proportion that are RPNs has declined (going from 52.3% in 2021 to 39.3% in 2025). (See [Appendix B Table 3.1.](#)) Further information regarding the changes in nurse types can be found in the [Evolving composition of nurse types within the supply](#) section below.



The gains observed in the nursing supply in 2026 are primarily the result of the new registrants in 2025. And, since 2023, much of the growth in the nursing supply has been the result of an increase in the number of new IENs. From 2021 to 2024, the number of new IENs jumped from 2,457 to 5,979 (Figure 3), representing an almost 2.5-fold increase. During the same timeframe, there has also been growth in the number of new registrants from Ontario, although smaller in magnitude (increasing from 7,411 in 2021 to 7,921 in 2024). However, the gains in the nursing supply in 2026 are not as heavily influenced by newly registered IENs as in recent years and a larger proportion of new registrants in 2025 were Ontario graduates (62.6% in 2025 vs. 54.4% in 2024). (See [Appendix B Table 3.2.1.](#)) In 2025, growth of Ontario new registrants has continued at a similar pace (up 370 from the previous year), while at the same time, growth of new IENs has dropped from peak levels in 2024 (down 1,679 from the previous year). (See Figure 3).

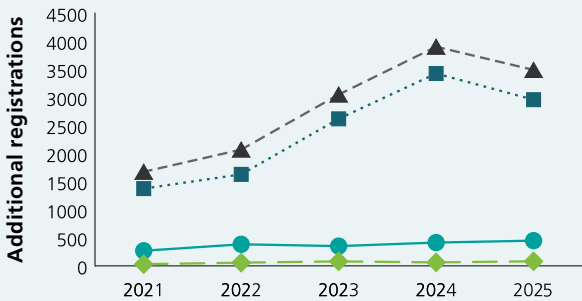


With respect to nurse type, there was growth in new RPN registrants from Ontario year-over-year (up 11.3%; 4,466 in 2025 compared to 4,014 in 2024), which is driving the growth in the proportion of Ontario new registrants. (See [Appendix B Graph and Table 3.2.3.](#)) In addition, during the past 5 years, the number and proportion of new internationally educated RNs has risen significantly (going from 35% of new RN registrants in 2022 to 46.4% in 2025), while the number and proportion of new internationally educated RPNs has decreased (going from 47.7% in 2022 to 11.3% in 2025) (See [Appendix B Graph and Table 3.2.2 and Graph and Table 3.2.3.](#)) These recent trends in new registrants also reflect changes observed at the application stage of CNO’s data. (See data presented in the [Changes in application volumes](#) and [Evolving composition of nurse types within the supply](#) sections.)

Additional registrations in 2025

Beyond new nurses being added to the system, there can also be changes to the capacity of the system when a nurse who is already registered with CNO obtains a new registration. In 2025, there were 2,806 additional registrations among CNO registrants. (See Figure 4 and note data are compiled by calendar year.) Growth in additional registrations accelerated starting in 2022 but has started to decline. From 2024 to 2025, there was a decrease of 19.6%. This pattern is the result of more IENs obtaining RN registration directly, rather than registering as an RPN first and adding an RN registration later. (See the *Evolving composition of nurse types within the supply* section below for further discussion.) Most additional registrations in 2025 were existing RPNs gaining an RN certificate of registration (77.6%), in line with the typical pattern observed.

Figure 4: Additional registrations by nurse type



Nurse type	2021	2022	2023	2024	2025
RN	1,629	2,618	3,425	2,959	2,177
RPN	57	80	62	81	132
NP	384	352	415	449	497
Total	2,070	3,050	3,902	3,489	2,806

Changes in application volumes

Application trends provide an early source of data and allow us to make connections to downstream impacts, such as registration and renewal patterns. Since trends at the application stage can help with understanding patterns at later stages, it is important to consider the data at each stage.

The number of annual applications initiated in the General Class has been steady over the past five years, fluctuating between 17,000 to 19,000 per year. (See Table 2 and note data are compiled by calendar year.) There has been one exception to this trend: in 2023, just over 21,000 applications were initiated, which was the result of a large increase in international RN applications (a 64.5% increase year-over-year). (See Table 2.) The increased volume of international RN applications continued in 2024 and 2025, but to a lesser degree. Changes in IEN application patterns by nurse type are discussed in further detail in the *Evolving composition of nurse types within the supply* section of this report. There has also been a slow rise in the number of initiated applications from Ontario-educated applicants from 2021 to 2025, with a large increase in RPN applications in 2025 compared to past years. (See Table 2.)

Table 2: Total General Class applications initiated by nurse type and location of education

Nurse type	Location of education	2021		2022		2023		2024		2025	
		N	%	N	%	N	%	N	%	N	%
RN	Ontario	5,362	52.5	5,133	47.2	5,243	36.3	5,295	41.4	5,542	45.9
	Canadian	647	6.3	678	6.2	725	5.1	711	5.6	620	5.1
	International	4,197	41.1	5,071	46.6	8,340	58.3	6,786	53.0	5,906	48.9
Total		10,206	100%	10,882	100%	14,308	100%	12,792	100%	12,068	100%
RPN	Ontario	4,424	56.5	3,942	58.4	4,577	64.2	4,730	78.6	5,505	74.2
	Canadian	213	2.7	301	4.5	243	3.4	247	4.1	250	3.4
	International	3,198	40.8	2,504	37.1	2,306	32.4	1,042	17.3	1,666	22.4
Total		7,835	100%	6,747	100%	7,126	100%	6,019	100%	7,421	100%

Evolving composition of nurse types within the supply

Over the past 6 years, CNO has implemented several regulatory and process changes that streamline registration for IEN applicants, which has impacted the mix of nurse types within the supply. The majority of the nursing supply in Ontario is composed of RNs (65.7% in 2026), followed by RPNs (30.5% in 2026), NPs (2.9% in 2026) and dual RN/RPNs (0.9% in 2026). (See Table 1.) However, in the past 3 years, these proportions have fluctuated slightly due to continued growth of RN and dual RN/RPN nurse types and a plateau in RPNs. For example, in 2025, there was a 0.7% increase in the number of RPN-only renewals, a 5.1% increase in RN-only renewals and a 21.9% increase in dual RN/RPN renewals compared to 2024. While this pattern has changed slightly in 2026 with all nurse types seeing growth including RPN-only registrants (up 2.3% year-over-year and driven by Ontario graduates), RPN-only registrants continue to make up a smaller proportion of the overall nursing supply (down 2.3% since 2023). (See Table 1.) NPs are one of the fastest growing nursing types in 2026, with a 7.9% increase year-over-year.

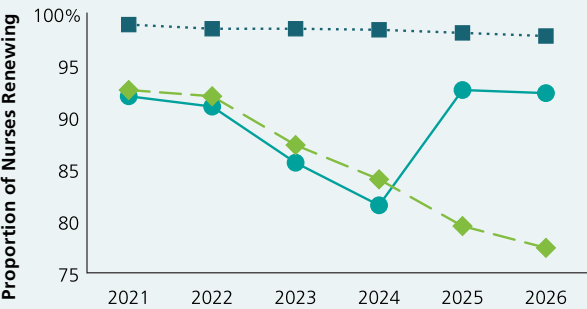
The changing composition of nurses within the supply can also be observed at the point of application and registration. In addition to the recent rise in the total volume of international applications, the distribution of nurse type has also shifted for international applicants. Many international applicants are now applying to CNO directly as an RN only rather than as both an RN and an RPN. From 2021 to 2025, the share of all international applicants that initiated an application for RN-only rose (42.1% to 71.3%), whereas the proportion of international dual RN/RPN and RPN-only applicants declined (31.6% to 5.8% for dual applicants and 25.5% to 21.2% for RPN-only applicants; data not shown). The change is reflected at the point of registration with the proportion of new RN registrants rising (47.3% in 2021 to 60.2% in 2025) and the proportion of new RPN registrants dropping (52.3% in 2021 to 39.3% in 2025). ([Appendix B Table 3.1.](#)) When looking at IENs specifically, 86.1% of new IENs registered in 2025 were RNs compared to only 38.3% in 2021. (See [Appendix B Tables 3.2.1 and 3.2.2.](#)) There has also been a decline in IENs obtaining additional registrations as RNs in the past two years — 1,000 in 2025 compared to 2,494 in 2023. (See [Appendix B Table 4.2.2.](#))

Changes in first-time renewal rates

The proportion of nurses who maintain their registration after their first year, known as the first-time renewal rate, has also had an impact on the nursing supply in recent years. In 2026, first-time renewal rates were between 94-96% for all nurse types. (See [Appendix C Tables 3.1.1-3.1.3.](#)) While first-time renewal rates overall have remained high across the past six years (with rates typically at 95% or higher), there has been some fluctuation in first-time renewal rates for RNs and RPNs related to the differing renewal patterns between new IENs and Ontario graduates.

Ontario graduates have maintained a consistent rate of first-time renewal since 2021 (around 98%; Figure 5). However, IENs dropped from 91.0% starting in 2022 to 81.5% in 2024 (See Figure 5). In 2025 and 2026, the rate of renewal for new IENs has bounced back and now sits at 92.3% in 2026. (See Figure 5.) Despite this increase, IENs still remain less likely to renew during their first year compared to Ontario graduates. New registrants educated in Canada but outside of Ontario (a smaller proportion of new registrants) continue to see a decline in the rate of first-time renewal in 2026 (down 2.1%, year-over-year).

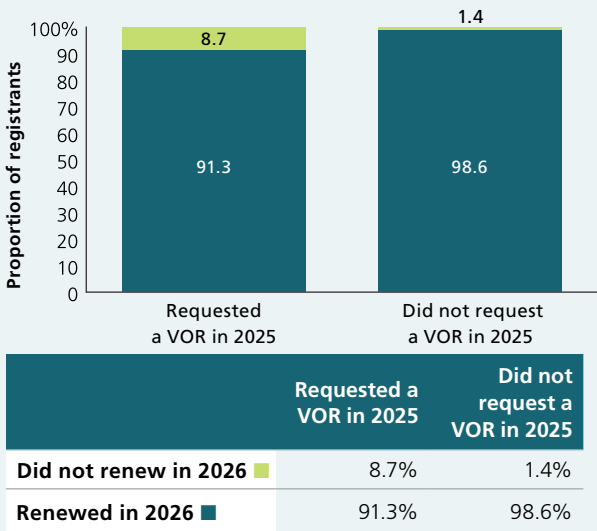
Figure 5: Proportion of nurses renewing for the first time by location of education



Location of education	2021	2022	2023	2024	2025	2026
Ontario	98.9%	98.5%	98.5%	98.4%	98.1%	97.8%
Canada (excluding ON)	92.6%	92.0%	87.3%	84.0%	79.5%	77.4%
International	92.0%	91.0%	85.6%	81.5%	92.6%	92.3%

Data for verification of registration (VOR) requests (the process used by nurses who are applying to another jurisdiction and need CNO to verify their Ontario registration) is helpful to examine alongside renewal rates, as nurses who request a VOR are less likely to renew in subsequent years. For example, 8.7% of those who requested a VOR in 2025 did not renew their registration in the following year (2026) compared to only 1.4% of those who did not request a VOR in 2025. (See Figure 6.)

Figure 6: Proportion of nurses renewing by VOR status



The number of nurses in the General and Extended Classes requesting a VOR grew from 4,990 in 2021 to 8,012 in 2023. (See Table 3 and note data are compiled by calendar year.) This far outpaced the growth rate in the nursing supply during that period. However, starting in 2024, there was a sharp decline in VOR requests suggesting that fewer nurses have been applying to other provinces or territories. This trend continued into 2025, with a year-over-year decline of 3.9%. (See Table 3.)

Table 3: Number of nurses in the General and Extended classes that made verification of registration requests by location of education

Location of education	2021		2022		2023		2024		2025	
	N	%	N	%	N	%	N	%	N	%
Ontario	3,123	62.6	4,252	56.3	4,260	53.2	3,645	56.6	3,598	58.1
Canada (excluding ON)	318	6.4	334	4.4	331	4.1	325	5.0	375	6.1
International	1,549	31.0	2,964	39.3	3,421	42.7	2,472	38.4	2,217	35.8
Total	4,990	100%	7,550	100%	8,012	100%	6,442	100%	6,190	100%

Ontario graduates have the largest number of VOR requests (3,598 or 58.1% in 2025; see Table 3). However, Ontario graduates are less likely to make VOR requests compared to IENs when accounting for the size of each group. In 2025, 2.2% of all Ontario-educated registrants made a VOR request compared to 5.6% of all IEN registrants. There has also been a large decrease in the total number of VOR requests year-over-year and the largest decrease has been observed for IENs, with a drop of 10.3% from 2024 totals.

In addition, changes in VOR requests among new IENs are closely aligned with first-time renewal patterns. Higher VOR activity among new IENs in 2023–2024 coincided with lower renewal rates, while both measures improved in 2025–2026. Although nurses have always moved between jurisdictions, VOR data combined with first-time renewal rates, suggest that the movement of new IENs peaked in 2022–2024 and may be returning to historical norms.

Growth in labour mobility and concurrent registration

As a result of recent legislation and registration changes to improve nurse mobility, there has been a significant increase in nurses from other Canadian provinces registering in Ontario in 2024 and 2025. In 2025, there were a total of 1,886 labour mobility registrations (more than a four-fold increase since 2021). (See Table 4 and note data are compiled by calendar year.) The top three provinces where labor mobility registrations originated in 2025 were Alberta, Nova Scotia and Quebec. The large increase in labour mobility registrations is the result of an increase in IENs (going from 81 in 2021 to 1,341 in 2025). IENs made up the largest proportion of labour mobility registrations in 2025 (71.1%) with most registering as RNs (1,260). Note that if an individual completes their nursing education in Ontario but does not initially register with CNO and instead becomes registered in another Canadian province or territory, they may later obtain registration in Ontario through labour mobility.

Table 4: Labour mobility registrations by location of education

Location of education	2021		2022		2023		2024		2025	
	N	%	N	%	N	%	N	%	N	%
Ontario	7	1.6	9	1.8	10	1.4	20	1.2	17	0.9
Canada (excluding ON)	346	79.7	394	72.3	411	58.2	513	31.4	528	28.0
International	81	18.7	141	25.9	285	40.4	1,100	67.4	1,341	71.1
Total	434	100%	544	100%	706	100%	1,633	100%	1,886	100%

Like last year, there is no evidence that labour mobility registrations are impacting recent trends in first-time renewal rates. Labour mobility registrations in 2025 would become eligible for first-time renewal in 2026. While labour mobility registrations among IENs have increased and now make up a larger share of the first-time renewal cohort, this does not appear to have impacted renewal rates. In 2026, labour mobility IEN registrations accounted for 24.5% of the first time renewal IEN cohort in 2026, up from 3.5% in 2024. However, the first-time renewal rate for labour mobility IENs was similar to the overall cohort of IENs renewing for the first time. This suggests that the increase in labour mobility IEN registrations in 2025 is not the primary driver of the higher first-time renewal rates observed among IENs in 2026. A similar pattern was observed in 2025.

Concurrent registrants have also been on the rise over the past six years. A concurrent registrant refers to a nurse who holds one or more registrations with CNO and has one or more registrations in another Canadian province or territory at the time of annual renewal. These registrations may or may not be the same nurse type (for example, an Ontario RN could be an NP in another Canadian province or territory). In 2026, concurrent registrants now represent 6.6% of all CNO registrants, increasing from 6,327 in 2021 to 12,948 in 2026. (See Table 5.) Of the 12,948 CNO concurrent registrants in 2026, they collectively held a total of 18,725 registrations, with Alberta, British Columbia and Quebec being the top three provinces.

Table 5: CNO registrants who hold concurrent Canadian registrations

	2021		2022		2023		2024		2025		2026	
	N	%	N	%	N	%	N	%	N	%	N	%
CNO registrants with concurrent Canadian registrations	6,327	3.7%	7,572	4.4%	9,858	5.5%	12,140	6.6%	12,776	6.7%	12,948	6.6%
All CNO registrants	168,873		172,914		178,184		183,763		190,896		197,020	

As mentioned in the Preface, changes were made in 2025 to allow for interjurisdictional nurse licensure, enabling nurses with equivalent registration in multiple Canadian provinces or territories to identify a “home” and “host” regulator. A “home” jurisdiction is defined as the province or territory in which the nurse physically resides for income tax purposes, and in which the nurse is registered to practice in the same category¹⁰. A “host” jurisdiction refers to other provinces or territories where the nurse is registered. This system makes labour mobility more accessible for nurses by reducing fees and administrative duplication.

For CNO, registrants would be part of interjurisdictional nurse licensure when they register with CNO as their “host” jurisdiction and their “home” jurisdiction is any of the provinces or territories in Canada. Within the nursing supply in 2026, there were 2,387 nurses who were registered under interjurisdictional nurse licensure with Ontario as one of their “host” jurisdictions (1,778 RNs, 395 RPNs, and 214 NPs). For this group, the top “home” jurisdictions identified were Quebec (37%), Alberta (16.8%) and British Columbia (14.9%).

¹⁰ If this definition cannot be applied for any reason, “home jurisdiction” is defined as the Canadian jurisdiction in which the nurse is registered to practice in the same category and in which they practice most often.

Nursing Workforce and Employment Trends

Sustained growth in the nursing workforce in Ontario

In 2026, 176,448 nurses reported being employed in nursing in Ontario across all nurse types, representing 3.3% growth year-over-year. (See Table 6.) This growth mirrors the growth observed in the nursing supply overall but is not as high as in recent years (up 3.6% in 2024 and 4.0% in 2025). The proportion of the nursing supply reporting at least one nursing position in Ontario has remained high since 2021, at approximately 90%. (See Table 6.) The proportions of nurses within the supply who are employed in non-nursing (1.2% in 2026) or not employed (4.0% in 2026) have also been stable over the past six years. (See Table 6.)

Table 6: Employment status in the General and Extended Classes

Employment status	2021		2022		2023		2024		2025		2026	
	N	%	N	%	N	%	N	%	N	%	N	%
Employed in nursing in Ontario	152,169	90.1	155,018	89.7	158,430	88.9	164,150	89.3	170,738	89.4	176,448	89.6
Employed in nursing outside Ontario only	3,159	1.9	3,585	2.1	4,275	2.4	4,681	2.5	4,833	2.5	5,188	2.6
Employed in non-nursing	1,609	1.0	1,544	0.9	1,854	1.0	2,047	1.1	2,251	1.2	2,396	1.2
Not employed in nursing or non-nursing	6,243	3.7	6,958	4.0	7,547	4.2	7,575	4.1	7,763	4.1	7,961	4.0
On leave	5,693	3.4	5,809	3.4	6,078	3.4	5,310	2.9	5,311	2.8	5,027	2.6
Total	168,873	100%	172,914	100%	178,184	100%	183,763	100%	190,896	100%	197,020	100%

Declining share of new nurses in the nursing workforce in Ontario

The pattern is different when looking at new nurses renewing for the first time. There has been a decline in the share of new nurses reporting employment in nursing in Ontario, with the proportion in 2026 now at 73.3%, compared to 81.3% in 2021. (See [Appendix C Table 3.3.1](#).)

New IENs, at the time of first renewal, are also less likely to report being in the nursing workforce compared to Ontario graduates. This difference grew in 2026 (58.8% of new IENs compared to 81.7% of Ontario graduates in 2026). (See [Appendix C Tables 3.4.1.1 and 3.4.3.1](#).) While this is true for both RNs and RPNs, the recent decline in new IENs employed in Ontario is largely the result of a decrease in the proportion of new internationally educated RNs reporting nursing employment in Ontario at the time of first renewal in 2025 and 2026 (dropping from 74.6% in 2024 to 58.7%

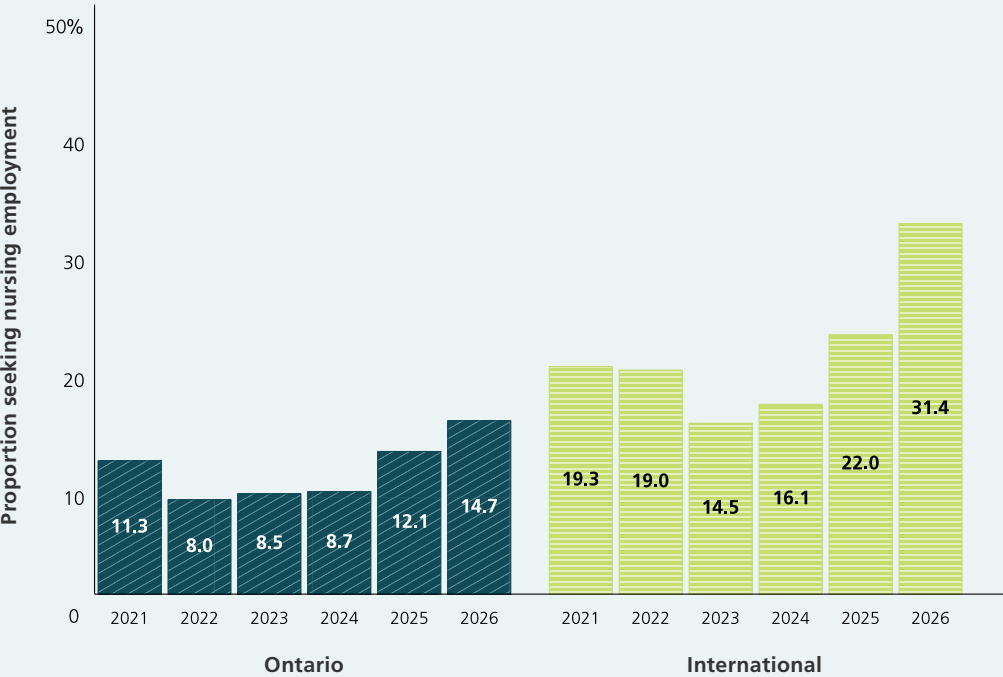
in 2026). (See [Appendix C Table 3.4.3.2](#).) New internationally educated RPNs have also seen a year-over-year decline in the proportion employed in nursing in Ontario (dropping from 70.4% in 2025 to 58.2% in 2026), whereas new Ontario RPNs have remained above 79% since 2021. (See [Appendix C Tables 3.4.1.3 and 3.4.3.3](#).)

Changes in nurses seeking nursing employment

Within the overall nursing supply, the proportion of registrations seeking nursing employment has remained stable over the past six years. (See [Appendix A Tables 4.3.1–4.3.3](#).) However, at the time of first renewal, the proportion of new IENs seeking nursing employment has been rising over the past two years and is higher compared to Ontario graduates (31.4% of IENs report to be seeking nursing employment at the time of their first renewal in 2026, compared to only 14.7% of Ontario graduates.) (See Figure 7 and [Appendix C Tables 3.4.1-3.4.3](#).) Overall, the proportion of new

RNs seeking nursing employment has been rising (going from 8.9% in 2021 to 22.5% in 2026). (See [Appendix C Table 3.3.2.](#)) This upward trend is observed with both Ontario-educated and internationally-educated new RNs, but is notably stronger among international new RNs (going from 12.5% in 2021 to 31.7% in 2026). (See [Appendix C Tables 3.4.1.2 and 3.4.3.2.](#)) The proportion of new RPNs seeking nursing employment has been stable during the same timeframe (19.3% in 2021 to 17.4% in 2026). (See [Appendix C Table 3.3.3](#))

Figure 7: Proportion of first-time renewals seeking nursing employment by location of education



	2021	2022	2023	2024	2025	2026
Ontario	11.3%	8.0%	8.5%	8.7%	12.1%	14.7%
International	19.3%	19.0%	14.5%	16.1%	22.0%	31.4%

Stable trend in nurses registered with CNO working outside of Ontario

While the total number of registrants employed in nursing outside of Ontario has grown since 2021 (going from 3,159 in 2021 to 5,188 in 2026), the proportion within the nursing supply has been stable from 2023 to 2026 (hovering around 2.5%). (See Table 6.) The top three work locations outside of Ontario in 2026 were the United States, British Columbia and Quebec. Looking at nurses employed in and outside of Ontario, there has been some growth over the past six years rising from 928 total registrations in 2021 to 2,022 total registrations in 2026. (See [Appendix A Tables 4.3.1-4.3.3.](#)) Despite the rise, this only represents 1% of all registrations in 2026. New IEN registrants are also more likely to be employed in nursing outside of Ontario at the time of their first renewal in 2026—5.8% of new IENs compared to 1.6% of Ontario graduates. (See [Appendix C Tables 3.4.1–3.4.3.](#))

Changes in full-time employment

Overall working status categorizes a nurse as full-time, part-time or casual by considering all of a nurse's jobs for a given registration. Full-time refers to nurses who have at least one full-time nursing position. Part-time refers to nurses with any combination of part-time and casual nursing positions. Casual refers to nurses with only casual nursing positions.

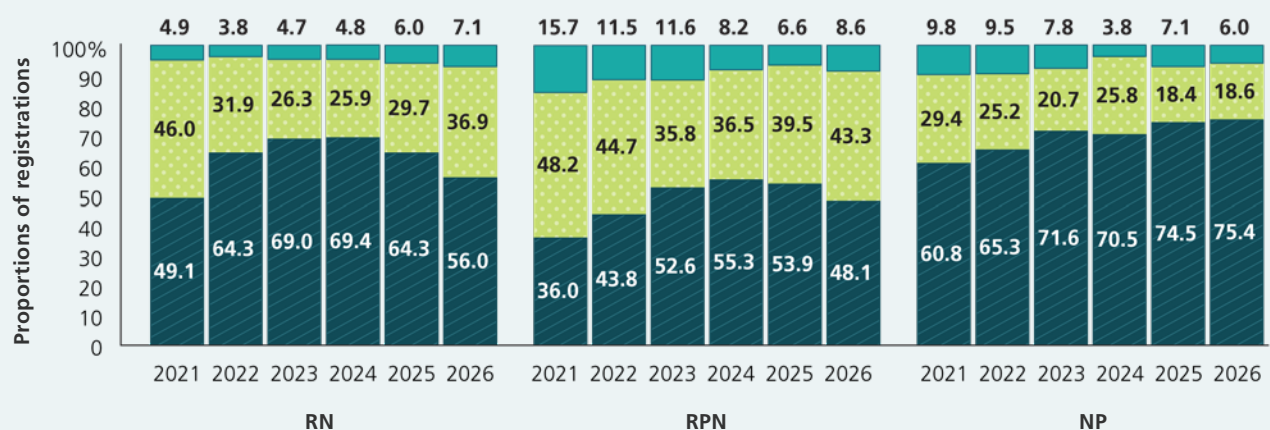
Year-over-year, the number of registrations reporting full-time employment as their overall working status has grown across all nurse types, rising by 3.5% for RNs, 2.8% for RPNs, and 7.6% for NPs. (See [Appendix A Tables 4.5.1-4.5.3.](#)) Overall, this pattern suggests a growing share of nurses are securing full time positions. NPs have the highest proportion of full-time employment across the nurse types at 76.6% in 2026. The proportion of full-time employment in RNs has been steady since

2021 (70.5% in 2026), while RPNs have seen an increase (going from 59.3% in 2021 to 65.2% in 2026). (See [Appendix A Tables 4.5.1-4.5.3.](#))

Compared to the full nursing workforce, the overall working status of nurses renewing for the first time with CNO is different. While still higher than 2021, in the past year the proportion of new RNs in the workforce reporting full-time employment at first-time renewal dropped from 64.3% in 2025 to 56.0% in 2026. (See Figure 8.) The proportion of new RPNs in the workforce reporting full-time employment at first-time renewal has also dropped from 53.9% in 2025 to 48.1% in 2026, whereas NPs have remained steady the past two years (around 75%). (See Figure 8.) This data suggests that new RNs and RPNs may have had difficulty finding full-time employment positions in the past year. Similar patterns exist when comparing new Ontario nurses with new IENs. (See [Appendix C Tables 3.7.1-3.7.3.](#))

When looking at the number of positions held and working status combined, the most common combination within the nursing supply is one full-time position, but the proportion differs slightly by nurse type: 60.0% of RNs, 54.6% of RPNs and 52.0% of NPs report this employment situation. (See [Appendix A Tables 4.6.1-4.6.3.](#)) The next most common scenario for RNs and RPNs is one part-time position (17.0% and 21.0%, respectively), and for NPs, it is having one full-time position plus one casual position (12.2%). (See [Appendix A Tables 4.6.1-4.6.3.](#))

Figure 8: Overall working status by nurse type at first-time renewal



Nurse type	Year	Full time %	Part time %	Casual %
RN	2021	49.1	46.0	4.9
	2022	64.3	31.9	3.8
	2023	69.0	26.3	4.7
	2024	69.4	25.9	4.8
	2025	64.3	29.7	6.0
	2026	56.0	36.9	7.1
RPN	2021	36.0	48.2	15.7
	2022	43.8	44.7	11.5
	2023	52.6	35.8	11.6
	2024	55.3	36.5	8.2
	2025	53.9	39.5	6.6
	2026	48.1	43.3	8.6
NP	2021	60.8	29.4	9.8
	2022	65.3	25.2	9.5
	2023	71.6	20.7	7.8
	2024	70.5	25.8	3.8
	2025	74.5	18.4	7.1
	2026	75.4	18.6	6.0

Changes in the distribution of held nursing employment positions

To explore trends in reported nursing employment positions, it is useful to present the data three ways. The first section focuses on the nursing mix and growth in reported positions within each employment sector, highlighting how the sector has changed over time. The second section focuses on the distribution and growth within each nurse type, highlighting how RN, RPN, and NP employment trends have changed. The third section examines the distribution within regions of Ontario, highlighting changes in employment trends across geography over time.

Nursing employment positions are held nursing positions reported by nurses during annual renewal. These are reported positions only. The data does not represent the total existing employment positions available within a sector or setting, nor does it address the number of unfilled positions. Only nursing positions in Ontario are included. Since nurses can hold multiple employment positions, the number of positions is greater than the total number of nurses categorized as employed in nursing in Ontario.

Distribution within employment sectors

Hospital

Within the hospital sector, 115,312 employment positions were held across all nurse types in 2026, which represents 17.2% growth since 2021. (See Table 7.) Acute care hospitals had 2,381 positions added year-over-year and accounted for most of this growth. (See [Appendix A Tables 5.4.1–5.4.3.](#)) RN positions are the most prevalent within this sector (84,545 positions held in 2026) and the proportions across nurse types have remained relatively stable from 2021 to 2026. Compared to other sectors, the hospital sector has the highest proportion of full-time positions, with 60.8% full-time, 25.5% part-time and 13.7% casual in 2026.

Long-term care

Within the long-term care sector, the total number of employment positions held across all nurse types was 34,725 in 2026, growing by 19.9% since 2021. (See Table 7.) Long-term care facilities had 1,503 positions added year-over-year and comprised most of the growth in this sector. (See [Appendix A Tables 5.4.1–5.4.3.](#)) While RPN positions are still the most prevalent in this sector, with 20,560 positions held in 2026, the proportion of RN positions has been rising since 2021, increasing from 31.4% of all positions held in 2021 to 39.6% in 2026, while the share of positions held by RPNs has decreased from 67.9% in 2021 to 59.2% in 2026. (See Table 7.) The long-term care sector has the lowest proportion of full-time positions compared to the hospital and community sectors with the breakdown of working status of reported employment positions at 51.7% full-time, 26.3% part-time and 22.0% casual in 2026.

Community

Within the community sector, the total number of positions held across all nurse types was 43,487 in 2026, with 15.0% growth since 2021. Most of the growth in this sector over the past year has been within the home and community care support services setting where 1,029 positions were added year-over-year. (See [Appendix A Tables 5.4.1–5.4.3.](#)) The proportion of held positions reported for RNs and RPNs has been stable since 2021, while there has been an increase in NPs, rising from 6.3% in 2021 to 8.1% in 2026. (See Table 7.) The breakdown of working status of reported employment positions within the community sector was 59.8% full-time, 20.2% part-time and 20.0% casual in 2026.

Table 7: Reported employment positions held by nurse type by sector

Sector	Nurse Type	2021		2022		2023		2024		2025		2026	
		N	%	N	%	N	%	N	%	N	%	N	%
Hospital	RN	73,222	74.4	73,386	73.2	74,599	72.8	79,208	73.2	82,946	73.6	84,545	73.3
	RPN	23,429	23.8	25,028	25.0	25,988	25.3	26,952	24.9	27,546	24.4	28,386	24.6
	NP	1,723	1.8	1,865	1.9	1,952	1.9	2,115	2.0	2,258	2.0	2,381	2.1
	Total	98,374	100%	100,279	100%	102,539	100%	108,275	100%	112,750	100%	115,312	100%
Long-term care	RN	9,083	31.4	8,985	31.4	9,770	32.5	10,939	35.3	12,593	38.1	13,763	39.6
	RPN	19,655	67.9	19,412	67.8	20,088	66.7	19,805	63.8	20,080	60.8	20,560	59.2
	NP	210	0.7	217	0.8	245	0.8	285	0.9	357	1.1	402	1.2
	Total	28,948	100%	28,614	100%	30,103	100%	31,029	100%	33,030	100%	34,725	100%
Community	RN	22,971	60.8	25,405	60.7	24,642	60.0	23,953	59.7	24,639	59.5	26,030	59.9
	RPN	12,445	32.9	13,884	33.2	13,667	33.3	13,206	32.9	13,519	32.7	13,935	32.0
	NP	2,389	6.3	2,581	6.2	2,746	6.7	2,955	7.4	3,219	7.8	3,522	8.1
	Total	37,805	100%	41,870	100%	41,055	100%	40,114	100%	41,377	100%	43,487	100%
Other	RN	11,929	73.9	12,824	70.3	13,379	71.2	13,848	70.7	14,050	71.0	14,492	70.2
	RPN	3,470	21.5	4,551	25.0	4,383	23.3	4,612	23.5	4,548	23.0	4,869	23.6
	NP	744	4.6	864	4.7	1,019	5.4	1,138	5.8	1,199	6.0	1,288	6.2
	Total	16,143	100%	18,239	100%	18,781	100%	19,598	100%	19,797	100%	20,649	100%

Distribution within nurse types

RNs

The hospital sector is still the most common for RNs in 2026, accounting for 84,545 or 60.9% of held RN employment positions. (See [Appendix A Table 5.4.1.](#)) There has been 1.9% growth in the total number of RN positions held in hospitals with 1,599 more positions from 2025 to 2026. There has also been a 9.3% increase in reported long-term care RN positions held with 1,170 more positions year-over-year (13,763 held positions in total reported in 2026). (See [Appendix A Table 5.4.1.](#)) As a proportion of all RN positions held, hospital and long-term care positions have remained relatively steady since 2021, hovering around 61-62% and 8%-10%, respectively, despite recent growth in the number of RN positions in long-term care (See [Appendix A Table 5.4.1.](#))

At first-time renewal, internationally educated RNs are more likely to hold employment positions in long-term care and less likely to hold employment positions in hospitals compared to new Ontario RNs. In recent years, this difference is growing. Proportionally, the number of long-term care sector positions reported by internationally educated RNs at first-time renewal continues to increase — representing almost half (46.3%) of all new internationally educated RN positions in 2026 compared to only 29.6% in 2021. (See [Appendix C Table 4.3.3.2.](#)) In contrast, the share of hospital sector positions reported by internationally educated RNs at first-time renewal has declined (30.4% of all new internationally educated RN positions held in 2026 compared to 53.1% in 2021.) (See [Appendix C Table 4.3.3.2.](#)) Comparatively, 6-7% of all reported Ontario RN positions were held in the long-term care sector and 75-84% were held in the hospital sector, at first-time renewal during the same timeframe. (See [Appendix C Table 4.3.1.2.](#))

RPNs

The hospital sector is also the most common for RPN positions (28,386 positions held in 2026), which saw 3.0% growth in positions reported year-over-year (up 840 positions). (See [Appendix A Table 5.4.2.](#)) Similarly, the number of RPN positions held in long-term care grew by 2.4%, with 480 more positions year-over-year (20,560 positions in total reported in 2026). (See [Appendix A Table 5.4.2.](#)) However, over the last 6 years, the share of RPN positions held in long-term care has been decreasing, dropping from 33.3% in 2021 to 30.3% in 2026. (See [Appendix A Table 5.4.2.](#)) At the same time, the proportion of RPN positions held within hospitals has grown, rising from 39.7% in 2021 to 41.9% in 2026.

Similar to what is observed in new RNs, new internationally educated RPNs are more likely to report employment positions held in the long-term care sector and less likely to report employment positions held in the hospital sector compared to new Ontario RPNs, and this difference has been growing. Proportionally, the number of long-term care positions reported by internationally educated RPNs at first-time renewal continues to climb (75.2% of all new internationally educated RPN positions held in 2026 compared to 62.0% in 2021.) (See [Appendix C Table 4.3.3.3.](#)) In addition, the share of hospital positions reported by internationally educated RPNs at first-time renewal has declined (only 13.0% of all new internationally educated RPN positions in 2026 compared to 19.8% in 2021.) (See [Appendix C Table 4.3.3.3.](#)) Comparatively, 27-39% of all reported Ontario RPN positions were held in long-term care and 45-58% were held in hospitals, at first-time renewal during the same timeframe. (See [Appendix C Table 4.3.1.3.](#))

NPs

Community continues to be the largest employment sector for NPs (3,522 positions held), accounting for over 46.4% of reported positions. (See [Appendix A Table 5.4.3.](#)) Year-over-year, there has been 9.4% growth in reported community positions (303 more positions held), 5.4% growth in reported hospital sector positions (123 more positions held), and 12.6% growth in reported long-term care sector positions (45 more positions held). (See [Appendix A 5.4.3.](#)) As a proportion of all NP positions reported, the number of employment positions held in hospitals has been declining since 2021 (from 34.0% in 2021 compared to 31.4% in 2026), whereas the proportion of positions held in community and long-term care has remained stable. (See [Appendix A Table 5.4.3.](#))

Distribution within regions

Distribution of employment positions held and the nursing workforce by geography

To capture changes in the distribution of nursing employment positions held by geographic region within Ontario, we calculated ratios for employment positions relative to the Ontario population. The ratios of employment positions held to the population were created for Ontario as a whole for the past six years (see the *Ratios of employment positions held by population – Ontario Overall* section) and for Ontario Health regions for 2026 (see the *Ratios of employment positions held by population – Ontario Health Regions* section). Employment positions reported in nursing in

Ontario were assigned to an [Ontario Health region](#) based on postal code using the address of the reported employment position¹¹. (See [Appendix A 5.2.1-5.2.3.](#)) Population estimates for Ontario were obtained from [Statistics Canada](#) for 2021 to 2025 and population projections for 2026 from the [Ontario Ministry of Finance](#) were then used to create a ratio of nursing employment positions held per 10,000 population. These ratios help to show where reported nursing employment positions are located within Ontario and highlight regional differences.

As a comparison, ratios were also calculated for the nursing workforce (nurses employed in nursing in Ontario) relative to the Ontario population in 2026 (see the [Ratios of nursing workforce in Ontario by population](#)). Home addresses of registrants were assigned to an Ontario Health region based on postal code. These ratios help to show where the nursing workforce is residing within Ontario relative to the population.

Ratios of employment positions held by population Ontario Overall (2021-2026)

In 2026, there were 132 reported nursing employment positions held per 10,000 population (85 RN, 42 RPN and 5 NP). The total ratio has grown slowly since 2021 (122 in 2021 compared to 132 in 2026). The ratios by nurse type show a similar slow growth pattern since 2021. (See Table 8.)

Table 8: Ratio of nursing employment positions held by population of Ontario from 2021 to 2026

Ontario Number of reported employment positions held per 10,000 people				
Year	RN	RPN	NP	Total
2021	79	40	3	122
2022	80	41	4	125
2023	78	41	4	123
2024	79	40	4	123
2025	83	40	4	127
2026	85	42	5	132

¹¹ Reported employment positions held in nursing do not represent the total existing employment positions available within a region, so unfilled positions are not captured. A small proportion (0.1%) of reported employment positions were unassigned due to issues matching some postal codes to Ontario Health regions.

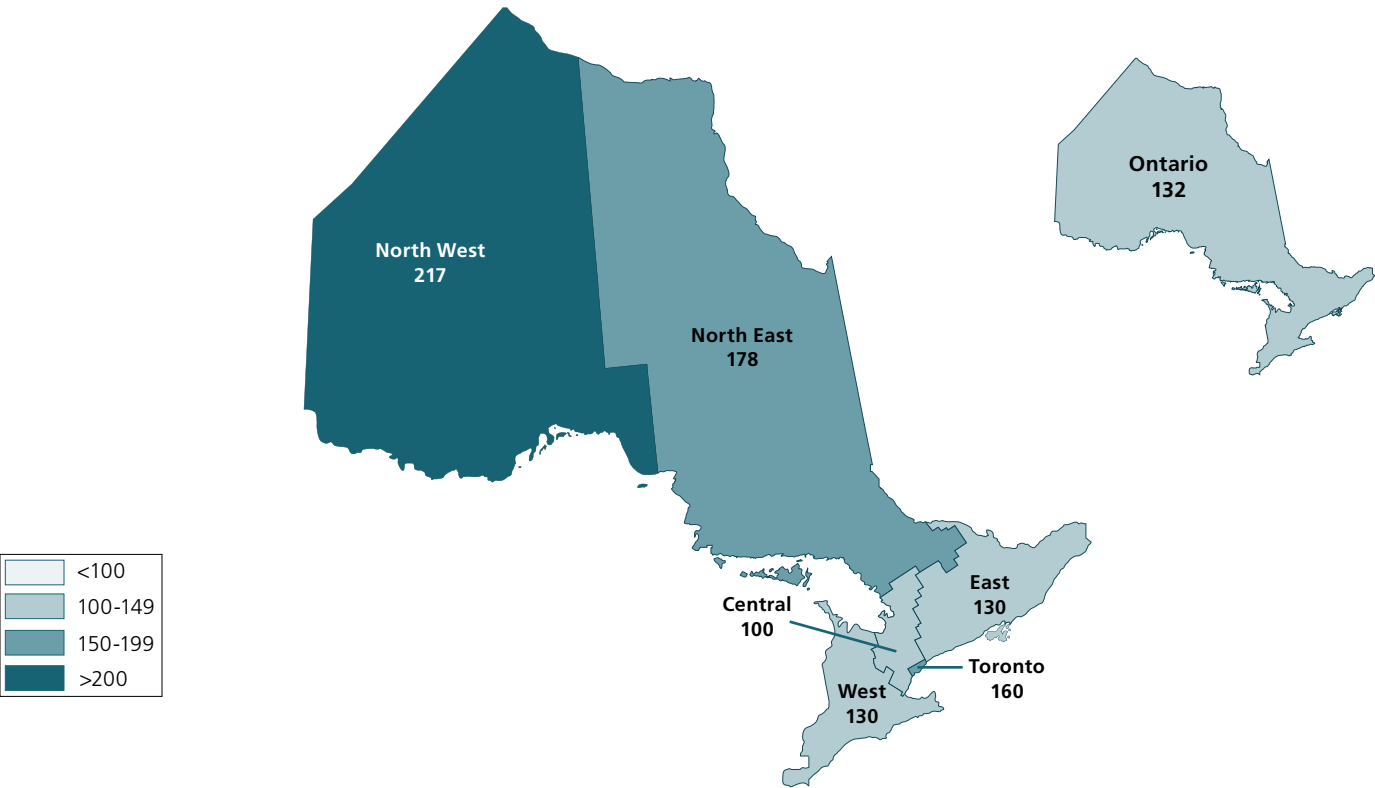
Ontario Health Regions (2026)

For the distribution of the nursing employment positions held across [Ontario Health regions](#) in 2026, the North West, North East and Toronto regions had the highest total ratios at 217, 178, and 160 nursing employment positions held per 10,000 population, respectively (see Table 9 and Figure 9). All three regions also had ratios higher than Ontario as a whole in 2026 (132). (See Table 9 and Figure 9.) The trends in employment positions held are comparable to patterns observed for nurses employed in direct care in Ontario reported by the [Canadian Institute for Health Information for 2024](#). The West and East regions had total ratios similar to Ontario as a whole (both at 130 positions held per 10,000 people), while the Central region had the lowest total ratio at 100 positions held per 10,000 people (lower than Ontario). Patterns across Ontario Health regions in 2026 are similar by nurse type (shown in Table 9), by working status (full-time, part-time or casual; data not shown) and by sector (hospital, community, long-term care and other; data not shown).

Table 9: Ratio of nursing employment positions held by population within Ontario Health region in 2026

2026	Number of reported nursing employment positions held per 10,000 people			
Ontario Health Region	RN	RPN	NP	Total
North West	136	67	14	217
North East	109	61	7	178
East	82	44	4	130
Central	66	31	3	100
Toronto	112	41	7	160
West	81	45	4	130
Ontario	85	42	5	132

Figure 9: Number of reported nursing employment positions held in Ontario per 10,000 population by Ontario Health region in 2026



Ratios of nursing workforce in Ontario by population

Ontario Health Regions (2026)

Switching the focus to look at where the nursing workforce is living in Ontario, the patterns are somewhat similar to the patterns observed for held employment positions. Note that the data used for the creation of these ratios is at the registrant level and these ratios are smaller than the employment position ratios as registrants can hold more than one employment position.

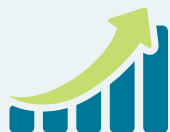
For the distribution of the nursing workforce across Ontario Health regions in 2026, North West and North East regions had the highest total ratios (171 and 155 registrants in the nursing workforce per 10,000 population living in these regions). (See Table 10). The West and East regions had total ratios slightly higher than Ontario as a whole (116 and 118, respectively), while the Central region had the second lowest total ratio at 94 registrants per 10,000 people (lower than Ontario). The major difference compared to the pattern observed for employment position ratios is that the Toronto region is the lowest when looking at the ratio of the nursing workforce to population (84 registrants per 10,000 people) and suggests that many workers employed in the Toronto region are living outside of the region they work in, a pattern also observed outside of the nursing profession¹².

Table 10: Ratio of nurses in the workforce and living within each Ontario Health region by population in 2026

Ontario Health Region	Number of nurses employed in nursing living in the region per 10,000 people				
	RN	RPN	NP	Dual RN/RPN	Total
North West	109	53	9	1	171
North East	95	54	5	1	155
East	75	39	3	1	118
Central	64	26	3	1	94
Toronto	57	23	3	1	84
West	73	39	3	1	116
Ontario	71	34	3	1	109

¹² [Statistics Canada](#) data shows that Toronto has the most extensive regional commuting pattern in Ontario, with large numbers of workers travelling into the city from surrounding municipalities across the Greater Toronto Area.

Summary of 2026 Nursing Data Trends and Implications



Within the past six years, there has been an overall pattern of growth in the nursing supply and workforce, with the rise in IENs (going from 11.8% of the overall nursing supply in 2021 to 18.1% in 2026) contributing to many recent trends.



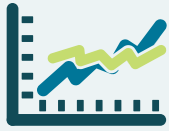
The nursing supply has seen a sustained pattern of growth over the past six years (3.2% in 2026), with gains mainly due to new registrants. However, in 2026, the gains in the nursing supply are not as heavily influenced by newly registered IENs as in past years. There were fewer newly registered IENs in 2025, and a larger proportion of new registrants in 2025 were graduates from Ontario nursing programs (62.6% in 2025 vs. 54.4% in 2024). There has been no change in the rate at which nurses are leaving the system as losses (as a proportion of the total supply) have been stable since 2021. Rates of first-time renewal (nurses maintaining their registration after their first year) remain high in 2026 for all nurse types. IENs are also less likely to leave Ontario's nursing supply in 2026 after their first year compared to past years, as the rate of first-time renewal continues to increase in this group. VOR data and first-time renewal rates indicate that movement among new IENs peaked in 2022–2024 and is now returning to historical levels. Despite this, IENs are more likely to be seeking nursing employment at the time of first renewal (31.4% for IENs versus 14.7% for Ontario graduates).



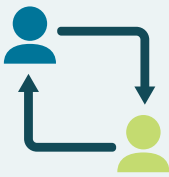
The composition of nurse types within the supply continues to shift in 2026. The number of nurses who renewed with only an RPN registration plateaued from 2023 to 2025, while the number of RNs and dual RN/RPNs grew. In 2026, all nurse types experienced growth and growth in RPN-only nurses was the result of more Ontario graduates. Despite this, RPN-only registrants continue to make up a smaller proportion of the supply. A main driver of this pattern is that many IENs are now choosing to apply as an RN only, compared to past years when it was common for IENs to apply as both an RN and RPN.



Following recent legislative and registration changes aimed at improving nurse mobility, there has been a notable increase in nurses registering in Ontario through labour mobility provisions from other Canadian provinces. In 2025, labour mobility registrations reached 1,886, representing more than a 4-fold increase since 2021. At the same time, the number of concurrent registrants — nurses holding registration(s) with CNO as well as one or more registrations in another Canadian jurisdiction — has also grown. In 2026, concurrent registrants accounted for 6.6% of all CNO registrants, up from 3.7% in 2021.



Within the nursing workforce, there has been ongoing growth in the total number of nurses reporting nursing employment within Ontario, in line with growth in the supply. There has been no change in the proportion of nurses registered with CNO and working outside of Ontario in the past four years. However, at the time of first renewal, IENs may struggle to enter the workforce relative to Ontario graduates, with 58.8% of IENs employed in Ontario versus 81.7% of Ontario graduates. Moreover, while there continues to be growth in the total number of registrations reporting overall full-time employment across all nurse types, new RNs and RPNs are reporting fewer full-time nursing employment positions in 2026 compared to past years.



Across employment sectors, shifts in the composition of the nursing supply continue to influence many of the patterns observed in 2026. Historically, many RPNs began their careers in long-term care; however, more RN positions are now being reported in this sector, a shift largely driven by new IENs. As a result, the composition of the long-term care workforce has changed, with the proportion of RPNs decreasing from 67.9% to 59.2% over the past six years.

Overall, the 2026 nursing trends are a continuation of patterns from the past several years and are similar to many of the trends observed by other nursing regulators and health system partners in Canada. Understanding the local context of recent regulatory changes within Ontario is also important to consider when interpreting recent trends, as there are unique patterns in the supply and workforce of nurses in the province, such as the changing makeup of the nursing supply or the fluctuations in employment patterns for new nurses. All trends described in growth and composition of the supply, in addition to changes in application, renewal and employment patterns have implications for the health system. The 2026 trends highlight continued growth in the nursing supply and workforce, while underscoring their dynamic nature. Ongoing monitoring of these trends continues to be important for ensuring that the nursing system is meeting the needs of Ontarians.

CNO is the authoritative source of nursing statistics in Ontario and is committed to the release of subsequent nursing statistics products (for example, information sheets based on the 2026 data). As part of our commitment to enhancing transparency and sharing nursing data publicly, these future products will examine other aspects of the current data, with the goal of providing an even more detailed picture of the trends in nursing health human resources.

Appendices

[Appendix A: Registration Renewal Statistics](#)

[Appendix B: New Registrations Statistics](#)

[Appendix C: First-Time Renewal Statistics](#)

Glossary

Additional registrations: Nurses who were already registered with CNO when they gained a new registration and either

- a) completed an additional registration in a new category
- b) moved from the General to the Extended Class

For example, an RPN that gains an additional RN registration or an RN that becomes an NP; in both cases, because the nurse already held CNO registration, they are considered additional registrations as opposed to new registrants. These nurses represent an enhanced capacity to the system but are not new nurses. There is a small number of applicants every year who register as an RN and RPN on the same day. In these cases, if they have no previous CNO registration, their RN registration is categorized as a new registrant, while their RPN is considered the additional registration.

Age: A nurse's age at the time of registration or renewal, calculated using full birth date and the date when a nurse successfully registers with CNO or renews their registration.

Applicants: Individuals who have initiated an application for registration or reinstatement with CNO and have paid the application fee. Individuals with multiple applications (for example, an RN and an RPN) are only counted once.

Applications: Each application that has been initiated (if the fee has been paid), as opposed to each applicant. Individuals with multiple applications (for example, an RN and an RPN) are counted multiple times.

Annual Membership Renewal (AMR): See [Renewal](#).

Area of practice: The focused practice area associated with a held employment position, reflects the type of care delivered and/or the patient population; for example, Acute Care, Cancer Care or Diabetes Care.

Change in class: When a registrant joins a different class upon renewal; for example, going from RN General to RN Extended (NP) or changing to Non-Practising.

Concurrent registrant: A nurse who holds registration(s) with CNO and has one or more registrations in other Canadian provinces or territories at the time of annual renewal. These registrations may or may not match on nurse type (for example, a RN with CNO could hold an NP registration in another Canadian province or territory).

Dual RN/RPN: Registered Nurse in the General or Extended Class and Registered Practical Nurse in the General Class.

Employed in nursing in Ontario: Nurses who work in Ontario only and nurses who work in and outside of Ontario.

Employed in nursing outside of Ontario: Nurses who work outside of Ontario only.

Employment position: The role associated with a held employment position and reflects broad job titles or position names, for example, Staff Nurse, or Case Manager. These are held nursing positions reported by nurses during the Annual Membership Renewal process. The data does not represent the

total existing employment positions available within a sector or setting and does not address the number of unfilled positions.

Employment sector: Community, Hospital, Long-Term Care, Other.

Employment setting: The practice setting associated with a held employment position and reflects the immediate practice environment, for example, Acute Care Hospital or Cancer Centre.

Employment status: Categorizes registrants or registrations based on different combinations of employment; for example, employed in nursing only, employed in non-nursing, not employed, on leave and whether the employment is in or outside of Ontario.

Expired: When a registrant fails to renew their registration in their current category.

First-time renewal: A registrant's first renewal after successfully registering with CNO in a specific category and class; for example, 2026 is the first renewal year for a nurse who initially registered in 2025.

Gains: A nurse who renewed one or more registrations in the current renewal period but did not renew any registration in the year before. They represent the number of nurses added to the system in that year. Examples of gains to the nursing supply are new registrants and reinstatements.

IEN: Internationally educated nurse.

Initial registration year: The year in which a nurse first registered with CNO in a particular category and class.

Interjurisdictional nurse licensure: An initiative that aims to help nurses maintain registration in multiple Canadian provinces or territories. It reduces the duplication of regulatory requirements and promotes nurses' ability to practice and support health care systems across Canada. A

nurse with equivalent registration in more than one Canadian jurisdiction at the same time can declare a "home" and "host" jurisdiction to reduce the duplication of quality assurance requirements and annual registration fees. Learn more about [interjurisdictional nurse licensure](#).

Labour mobility: The process whereby a nurse who is registered in another Canadian jurisdiction completes registration with CNO. The application process is simplified and requires applicants to sign a declaration of good standing and request a verification of registration from their current regulator.

Location of nursing education: The province or country of a registrant's education, as reported by them when applying to CNO.

Losses: A nurse who did not renew any registration in the current renewal period but did renew one or more registrations in the year before. They represent the number of nurses who have left the system in that year. A loss to the nursing supply is not necessarily permanent, as a registrant can return in a subsequent year.

Net: The net difference calculated by subtracting the number of registrant losses from the number of registrant gains at the end of the renewal period. This represents the overall change in the number of nurses available to the system year-over-year.

New registrants: Nurses who register with CNO for the first time in either the General or Extended Class, regardless of category. They represent new nurses to the system and can only be categorized as a new registrant once in their career, for example, a new graduate who registers with CNO for the first time as an RPN. For any subsequent registration they will not be considered a new registrant. Registrants in the Non-Practising Class who move back to the General Class and retired nurses who return to practice are considered reinstatements, not new registrants.

Non-Practising Class: Nurses who remain registered with CNO but are not practicing nursing in Ontario, categorized as either RNs or RPNs (there are no NPs in this class). A nurse cannot hold dual registration where one category is in the Non-Practising Class and the other is not. For example, a dual RN/RPN nurse cannot be registered as an RN General Class and an RPN Non-Practising Class at the same time.

NP: Nurse Practitioner, also known as a Registered Nurse in the Extended Class.

Number of working positions: The total number of employment positions held per certificate of registration.

Nurse type: Registered Nurse (RN), Registered Practical Nurse (RPN), Nurse Practitioner (NP), dual RN/RPN.

Nursing categories: Registered Nurse (RN) or Registered Practical Nurse (RPN).

Nursing classes: A group based on nursing education and type of nursing practice, including General, Extended, Non-Practising, Temporary, Special Assignment and Emergency.

Nursing supply: Total number of nurses available to practice, including nurses registered as RNs, RPNs, NPs, or dual RN/RPNs (excludes Non-Practising Class).

Nursing workforce: Total number of nurses available to practice and are employed in nursing in Ontario, including nurses registered as RNs, RPNs, NPs, or dual RN/RPNs (excludes Non-Practising Class)

Ontario Health Regions: Regions in Ontario in which each employment position is held. For more information about Ontario Health Regions please visit [Ontario Health Regions](#).

Overall working status: For registrants employed in nursing, the highest level of employment associated with a certificate of registration among all positions held in Ontario. Values in descending order are “Full-time Employment”, “Part-time Employment”,

“Casual Employment”. Other values include “Not Specified” or “Not Applicable”. The three examples below illustrate how overall working status is derived.

- Example 1: If a nurse holds both a casual nursing position and a full-time nursing position associated with a single registration, the overall working status is full-time.
- Example 2: If a nurse holds three casual nursing positions associated with a single registration, the overall working status is casual.
- Example 3: If a nurse holds one part-time nursing position and one full-time non-nursing position associated with a single registration, the overall working status is part-time.

Registrants: Individual nurses who obtain or renew their CNO registration. Nurses who obtain or renew multiple registrations are only counted once.

Registration: Obtaining a valid CNO certificate of registration by applying to CNO and completing all registration requirements. Registration with CNO is required to practice nursing in Ontario and use the titles Nurse, Registered Nurse (RN), Registered Practical Nurse (RPN), Nurse Practitioner (NP) or any variation. Registrants may hold more than one registration.

Registrations: Each certificate of registration obtained or renewed, as opposed to each nurse. Nurses who obtain or renew both their RN and RPN registrations are counted twice.

Reinstatement: The process by which former nurses (who have resigned or had their certificate of registration expire or who are in the Non-Practising Class) can return to practice by reinstating a previously held certificate of registration. [Learn more about reinstatement](#).

Renewal: Also referred to as Annual Membership Renewal (AMR) or annual renewal. Renewing of registration(s) yearly, as required by CNO to continue practicing as a nurse. The renewal period typically starts in November and runs until March of the following year. Nurses who renew after December 31 are subjected to a late fee. If registrants have not renewed by February, they will be suspended. The final deadline occurs in March, whereafter nurses' registrations will be expired. In the renewal process, we collect nurses' demographic and employment information as part of our regulatory mandate.

Renewal year: The year for which the registrant is renewing their registration.

Resigned: When a registrant resigns from their current category.

RN: Registered Nurse in the General Class.

RPN: Registered Practical Nurse in the General Class.

Verification of Registration (VOR): A request submitted by a registrant asking CNO to verify their registration. If a nurse wants to obtain registration to practice nursing in another province or country, they can make a request for a verification of registration, which can be shared with another regulatory board, verifying that they are, or were, registered with CNO.

Working status: Indicates whether an employment position held is full-time, part-time or casual.



College of Nurses of Ontario

101 Davenport Road Toronto, ON Canada M5R 3P1

cno.org