



COLLEGE OF NURSES  
OF ONTARIO  
ORDRE DES INFIRMIÈRES  
ET INFIRMIERS DE L'ONTARIO



# Building Better Together

2024 Annual Report

# Contents

<b>We are CNO</b>	<b>3</b>
What do we do?	3
Nurses in Ontario in 2024	4
President's message	5
Registrar/Executive Director and CEO's message	6
<b>Transforming through the strength of collaboration</b>	<b>7</b>
Modernizing the registration process to support health system needs	8
Enhancing labour mobility while supporting safe nursing practice	11
A multi-partner database to support safe care	12
Leading in patient safety	14
<b>Summary Financial Statements</b>	<b>15</b>

## ***Building Better Together: 2024 Annual Report***

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**Photography**  
Patricia Sullivan and Silvie Crawford: Alaa Taher  
Natalie Sherk and Cyril Lee Turley: provided by subjects

## **CNO's land or territorial acknowledgement**

CNO operates on the traditional, ancestral and unceded territories of many Indigenous communities across Ontario, which continue to be home to Indigenous Peoples. CNO's office is in Toronto, on land that is the traditional territory of many nations including the Mississaugas of the Credit, the Anishnabeg, the Chippewa, the Haudenosaunee and the Wendat Peoples. We are honouring these lands as part of our deeper commitment to Indigenous communities in Ontario.

# We are CNO

We are the College of Nurses of Ontario (CNO), and we protect the public by promoting safe nursing practice.

## What do we do?



**We set the requirements for becoming a nurse in Ontario.**



**We inform nurses of their accountabilities and tell you what you can expect from nurses.**



**We respond to your concerns about nurses' conduct, competence and health.**



**We ensure nurses engage in continuous quality improvement throughout their careers.**

## Nurses in Ontario in 2024



**195,334**

total number of practicing nurses\*

**128,082**

Registered Nurses  
(RNs)

**60,136**

Registered Practical  
Nurses (RPNs)

**5,435**

Nurse Practitioners  
(NPs)

**1,681**

dual registrants  
(RN and RPN)

\*As of December 31, 2024.



## President's message

In reflecting on 2024, I am pleased to highlight the progress and accomplishments that demonstrate Council's commitment to excellence in nursing regulation, practice and governance.

In 2024, Council advanced its strategic priorities and evidence-based decisions using insights from CNO's system partner trust and awareness survey, workforce census and three-year diversity, equity and inclusion (DEI) strategy. This ensures our ability to create and sustain an inclusive environment while considering regulations, policies and practices that reflect the diverse communities we serve.

We aligned our governance practices with DEI goals by updating the *Council and Committee Code of Conduct*, terms of references and associated policies and practices. This resulted in our first competency-based Council election and statutory committee selection process, which supported a diverse, skilled and engaged Council and committee membership. Council also implemented recommendations from our third-party evaluation of the Executive Committee and quarterly evaluation feedback from Council members.

Council achievements that stand out for me include

- approving enhanced new regulations that improve access to registration for qualified applicants, including internationally educated nurses
- endorsing a new national NP regulation framework
- engaging in discussions on labour mobility and interjurisdictional nurse licensure
- approving a new and updated practice standard for discontinuing or declining care

These initiatives ensure CNO's regulatory practices remain responsive to the evolving needs of the nursing profession and the public. They also demonstrate CNO's thought leadership at the provincial, national and international level.

**It has been a privilege to serve as Council President. I am grateful for the exceptional efforts made by staff, system partners and Council, to protect the public by promoting safe nursing practice. Together, we are shaping the future of nursing regulation and practice, ensuring we meet the highest standards of public trust and safety.**

Thank you for your continued support as we advance this important work.

**Patricia Sullivan**, RN, BScN, MPA, PMP

Council President (June 2023–June 2025)

### Find out more

- **Find more about your Council:** [cno.org/council](https://cno.org/council)
- **Read about CNO's committees:** [cno.org/committees](https://cno.org/committees)
- **Find discipline decisions:** [Find a Nurse](#) and [cno.org](https://cno.org)



## Registrar/Executive Director and CEO's message

In 2024, our engagement with a broader, more diverse group of system partners reaffirmed collaboration is an essential part of our approach and embedded in every aspect of our work. Collaboration is a core value at CNO, guiding our approach to nursing regulation in Ontario and ensuring safe, ethical care for the public. It always has been fundamental to advancing patient safety, supporting safe nursing care and strengthening health human resources. As a nurse and as CEO, I have seen firsthand the profound impact of collaboration in driving meaningful change.

CNO actively collaborates with governments at all levels to strengthen patient care. In 2024, collaborating with both provincial and national governments enhanced our responsiveness to public safety initiatives, recognizing that patient safety goes beyond Ontario's borders. Engaging with other nursing regulators across Canada fostered shared learning and generated valuable insights that strengthen the profession.

System influence is an important outcome of collaboration that is embedded in CNO's *Strategic Plan 2021–2026*. While our role in supporting patient safety is vital, we recognize that it exists within the larger health care system. We also recognize our unique opportunity to influence and shape the system in ways that advance patient safety and strengthen public trust. This means working with other patient care partners and fostering partnerships that create meaningful, sustainable impacts across the health care system.

As Canada's largest health regulator, we leverage insights to inform decision-making within our organization and across the health care system. By fostering a data-driven culture, we ensure evidence-based decisions that enhance patient care, while balancing data with real world context. Our ability to generate and apply meaningful insights allows us to positively influence the system, drive meaningful change and uphold the highest standards in health care regulation.

In the report, you will read about two national initiatives that exemplify CNO's leadership in public safety: Nursys® in Canada, an online registration and discipline information portal for regulators, and Interjurisdictional Nurse Licensure, which supports nurse mobility across jurisdictions.

In 2024, collaboration with our partners in safety reinforced CNO's role as a trusted system partner. Throughout the year, CNO staff engaged with diverse groups across Ontario, Canada and internationally, delivering presentations on key patient safety topics. We are grateful for the opportunity to share insights and foster meaningful discussions with esteemed committees and organizations, including the Nursing and Midwifery Council in the UK, the Principal Nursing Advisors Task Force, Indigenous Services Canada, Canadian Institute for Health Information, Health Workforce Canada and the International Congress of Nursing Regulators. We also shared insights and received feedback from our registrants and other system partners through public consultations—in 2024 we hosted 22 external surveys, which received 19,851 responses.

**Looking ahead, our long-term success will be defined by our continued ability to drive meaningful impact in public safety through collaboration. In 2024, we built strong momentum. In 2025, we will strengthen our leadership further, expand the impact of our partnerships and continue shaping the future of health care.**

A handwritten signature in dark ink, appearing to read 'Silvie Crawford'.

**Silvie Crawford**, RN, BHScN, LLM (Health Law)  
Registrar/Executive Director and CEO



# Transforming through the strength of collaboration

Supporting health workforce planning and growth is an increasing area of focus for Canada's provincial, territorial and federal governments, as well as for a broader group of health care partners who support the system's ability to meet Canadians' needs—partners like CNO.

In 2024, we were one of many purposeful system partners engaged in innovative collaborations to assist with health human resources and ensure safe nursing care. Our collaborative culture emphasizes the need for a shared focus on public protection, and our staff, with a wealth of expertise, share a collective pride in making a difference.

Throughout the year, we strengthened partnerships provincially, nationally and internationally, aligning CNO's organizational priorities to seize opportunities for supporting health care in Ontario and across Canada.

Our work rarely occurs in isolation—it takes a collective effort to support safe nursing practice and patient safety. Our partnerships, in 2024, led to meaningful changes and transformed our work into impactful solutions to support adequate health human resources and safe nursing practice. This also led to CNO being recognized as a trusted system partner, something we will continue to build on in 2025.

## Engaging with partners

Number of consultations and surveys:

**22**

Number of responses:

**19,851**

## Modernizing the registration process to support health system needs

In 2024, CNO continued to tackle the issue of registering more applicants to address health human resource challenges *while* maintaining high standards of patient safety. We made significant changes to the registration requirements for nursing applicants in Ontario. These updates were a major part of CNO's ongoing efforts to modernize the process for assessing and registering nursing applicants in Ontario. They enhance CNO's registration process for internationally educated applicants and support a smoother transition to nursing practice in Ontario.

The changes include updating the nursing education registration requirement and adding a new Transition to Practice requirement. Together, these enhancements streamline the registration process and strengthen support for internationally educated applicants. The regulation changes went into effect on April 1, 2025.

"These changes were designed carefully to maintain the highest standards of patient safety," said Silvie Crawford, Registrar/Executive Director of CNO. "They reflect CNO's commitment to ensuring application processes are fair and inclusive and contribute to supporting safe nursing care in Ontario."

### Empowering RNs to prescribe: A new era in nursing practice

In 2024, CNO took a groundbreaking step by authorizing RNs in Ontario to prescribe certain medications and communicate diagnoses for prescribing purposes. This initiative marks significant enhancements in RN nursing practice, fostering accessible health care to better meet the needs of communities throughout Ontario. By the end of 2024, 484 RNs gained the authority to prescribe.



**"It's really rewarding to be able to prescribe and save our patients some time. Why not expand so our patients have easier access to vaccines and certain medications they need in a timely way?"**

**Cyril Lee Turley, RN**, St. Joseph's Continuing Care Centre, Sudbury  
First RN authorized to prescribe





## Workforce Census: Paving the way for equity in nursing

CNO reached a historic milestone with the completion of its first-ever Workforce Census of Ontario's nurses. Sent to every nurse in the province, this initiative collected data from 31,000 nurses, offering invaluable insights into the profession and setting the stage for meaningful change in Ontario's health care system.

The findings will guide our efforts to remove barriers in health care, advance diversity and implement equitable policies for nurses. This data not only provides a clearer picture of the challenges nurses face but also informs strategies to combat systemic biases.

Our vision of equity is supported by collaboration with equity-deserving groups, including the Canadian Black Nurses Alliance (CBNA), Indigenous Primary Health Care Council, Black Nurses Task Force and Pan-Canadian Association of Nurses of African Descent. Their efforts were critical in shaping the census and ensuring it asked the right questions to gather the most impactful data.

**"Without empirical data, change and the measurement of its impact are impossible. This is an opportunity to substantiate the disparities and discrimination members experience, paving the way for systemic change."**

**Ovie Onagbeboma, RN, and CEO, CBNA**

## Updated education requirement

We revised the requirement to accept nursing education recognized or approved in any jurisdiction—Ontario, Canada or international—if the education was designed to prepare the applicant for the category they are applying to, and if it met the credentials required (RN applicants need a nursing baccalaureate and RPN applicants need a nursing diploma). Based on our data, this regulation change will allow 80% of internationally educated applicants to meet the new education requirement. We will continue to support applicants with these changes.



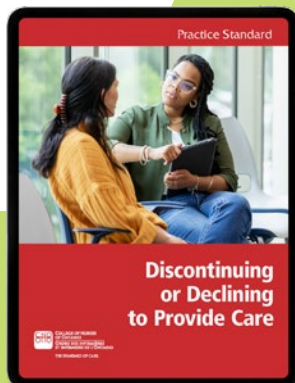
## Transition to Practice requirement

We introduced this requirement to support successful integration into the health care system. The new requirement, which applies to all nursing applicants, ensures that applicants are familiar with the competencies specific to practice in Canada. Many will meet the requirement through their already existing education or registration. Internationally educated applicants will meet the requirement by completing a Transition to Practice course that CNO approves. The course, offered by several academic institutions, covers 31 critical safety competencies to ensure applicants are aware of their accountabilities crucial to patient safety as they enter practice in Ontario.

“Meeting this requirement supports aspiring nurses in their practice, while upholding CNO’s commitment to public safety. It will equip applicants with the specialized knowledge they need to ensure they understand the responsibilities and expectations of nursing within Ontario’s unique health care environment,” added Crawford. “Applicants showing the

needed nursing knowledge, skill and judgment to practice safely will contribute to Ontario’s health care system and enrich our workforce.”

We worked with a variety of system partners across the province on developing these changes. These included the Ministry of Health, which approved the regulation changes in November 2024, and academic institutions, who we collaborated with on the new Transition to Practice course. We also wanted input from all community partners. We asked the public for feedback on the regulations and shared the changes with nursing associations and unions, plus employers, academics, nurses, applicants and other health care regulators.



### A collaborative example toward safe nursing care

CNO developed a new practice standard, *Discontinuing or Declining to Provide Care*, that helps nurses understand their professional accountabilities in specific circumstances related to discontinuing or declining to provide nursing care.

We worked closely with nurses, other health care system partners and the public, to gather diverse perspectives. This collaborative approach ensures the development of a comprehensive, practical and relevant practice standard, reinforcing that public protection is truly a collective effort.



## Enhancing labour mobility while supporting safe nursing practice

Nurses often register and work in one jurisdiction. But what happens when they want to remain registered in their original jurisdiction, while also registering elsewhere to work in a new province or territory? In 2024, we started making it more efficient for nurses to do just that: maintain registration in multiple Canadian jurisdictions. This initiative, known as Interjurisdictional Nurse Licensure (INL), aims to reduce duplicating regulatory requirements and promote nurses' ability to practice across provinces and territories, supporting health care systems across Canada.

We are collaborating with national nursing regulators, through the Canadian Nurse Regulators Collaborative (CNRC), on this initiative, with the shared goal of enhancing labour mobility in Canada. The CNRC is a collective of individual nursing regulators from across Canada. Together, we support collaboration to advance regulatory excellence across Canada. This proactive pan-Canadian approach supports nurses and strengthens the overall health care system. Implementing INL enhances patient safety and contributes to a mobile nursing profession.

"We understand the strategic importance of working together with other regulators for collective impact and quickly adapting to shifting demands in the health care system while ensuring public safety," said Crawford.

So how will it work? A nurse can hold registration in two or more Canadian jurisdictions at the same time. Their "home" jurisdiction is the Canadian jurisdiction where they are initially registered as a nurse and where they physically reside for tax purposes. The "host" jurisdictions are the other Canadian jurisdictions where nurses can register to practice.

We are implementing INL in 2025 and continue to work with other regulators and health system partners to support nurse mobility.

# 3,001

nurses held an additional registration in another jurisdiction while registered in Ontario in 2024.



## A multi-partner database to support safe care

**Nurses move across our country to practice, registering in new jurisdictions and providing safe patient care where they are needed the most. This movement helps health human resources and supports the health system's ability to meet Canadians' needs.**

In the past, Canadian regulators relied on several ways to confirm registration, including reviewing information nurses provided and contacting each jurisdiction where a nurse indicated they had practiced, to review regulatory information, such as disciplinary records. The manual system was time consuming and could result in a risk to public safety due to data integrity, particularly if a nurse did not disclose all relevant information, such as the jurisdictions in which they had worked. Nursys® in Canada is changing that.

Nursys in Canada is an online data portal for nursing regulators across Canada to share registration and discipline information. This will enhance patient safety, create consistency in data collection, management and reporting and improve health human resource information.

"Nursys in Canada is a transformative tool with significant benefits for the public and the health care system. For the public, it strengthens safety by allowing nursing regulators efficiently to verify a nurse's registration and practice eligibility across jurisdictions. For the health care system, it will streamline licensure/registration verification processes, making it easier for nurses to begin working across jurisdictions," said Brent Knowles, Director, Analytics and Research at CNO.

"It will also improve the accuracy of data on nurse mobility and workforce distribution, supporting better decision-making for governments, regulators and employers. Overall, it's a critical step forward for both public safety and health system efficiency."

It takes a collective effort to implement a national system like this. We partnered with the British Columbia College of Nurses and Midwives (BCCNM) and the National Council of the State Boards of Nursing (NCSBN) in the U.S. to establish Nursys in Canada, along with the CNRC. We also partnered with Health Canada for assistance on funding for the portal.

“Collaborating with CNO has been crucial for the successful launch of Nursys in Canada,” said Mark Huffman, Senior Manager, Information Technology at NCSBN. “CNO provided essential infrastructure and leadership. Their expertise in Canadian regulations has been vital. Without CNO’s support, Nursys in Canada would not be possible.”

The work is ongoing and 2024 was a busy year. Early in the year, the Nursys system in Canada and the system in the U.S. were connected. This meant staff at CNO and BCCNM could view a nurse’s registration information from U.S. nursing boards. We also worked with the staff at the Nova Scotia College of Nursing, the Association of New Brunswick Licensed Practical Nurses and Yukon Registered Nurses Association as they started their adoption of Nursys in Canada. They will have all their information in the system in 2025. Another highlight was sharing

a report with Health Canada illustrating how the implementation of Nursys in Canada could support access to federal health human resource data for planning.

We are making steady progress through ongoing consultations and system partner engagement and will continue to onboard Canadian regulators to Nursys in Canada in 2025.

“The collaboration between British Columbia, Ontario and NCSBN and the significant investments made by those three parties and the Government of Canada have already paved the way for others to join,” said Knowles.

“When it comes to collaborating with partners, the system’s demonstrated value in enhancing public safety and regulatory efficiency has been key to garnering support.”

### Empowering nurses through partnership

The Supervised Practice Experience Partnership (SPEP), a collaborative program between CNO, Ontario Health and CNO-approved organizations, allows applicants to meet two of their registration requirements—evidence of practice and language proficiency—by being matched with a supervised practice experience. From January 2022 to December 31, 2024, more than 4,400 nurses have become registered through SPEP, and over 780 employers participate in the program. It continues to increase the number of dedicated nurses joining the health care system, expanding the delivery of safe, quality care for our communities.



**“It’s great for us, being a smaller long-term care home in an isolated area. We thought that partnering with CNO would contribute positively, not only to the facility but to health care system needs as a whole.”**

**Natalie Sherck, RN,**  
Director of Care at Maple Park Lodge long-term care home in Fort Erie, Ontario



### Charting the way forward with a new DEI Strategy

CNO introduced a three-year Diversity, Equity, and Inclusion (DEI) Strategy to address discrimination and advance equity in health care. Centred on four key actions—evolve, educate, engage and evaluate—the initiative seeks to transform regulatory processes and foster inclusion. Rooted in broad consultation through surveys, focus groups and listening sessions, the strategy integrates data-driven approaches to eliminate structural barriers. By prioritizing transparency and equitable policies, we reaffirm our commitment to fostering meaningful contribution within Ontario's health care system.

**"CNO recognizes our social contract with all Ontarians. This DEI Strategy makes health equity a priority by seeking to understand the perspectives and experiences of our system partners, registrants and the public. There's a focus on equitable and transparent policies, practices and processes while conducting interactions with respect, cultural awareness and cultural humility."**

**Sandra Porteous**, Director of DEI



## Leading in patient safety

Our work in 2024 helped strengthen our position as a leader in patient safety in a rapidly changing health care environment. We saw multiple benefits of our collaborations—and we will continue to expand our list of system partners in 2025. As we did in 2024, we will protect the public through nursing regulation, while also supporting the health care system's ability to meet Canadians' needs. Our commitment to working as a partner in safety has solidified our role as a respected leader that addresses key challenges in health human resources and safe nursing practice.



# Summary Financial Statements

**COLLEGE OF NURSES OF ONTARIO**

**SUMMARY FINANCIAL STATEMENTS**

DECEMBER 31, 2024

## Report of the Independent Auditor on the Summary Financial Statements

To the Council of the College of Nurses of Ontario

### Opinion

The summary financial statements, which comprise the summary statement of financial position as at December 31, 2024, and the summary statement of operations for the year then ended, and related note, are derived from the audited financial statements of the College of Nurses of Ontario (the "College") for the year ended December 31, 2024.

In our opinion, the accompanying summary financial statements are a fair summary of the audited financial statements, in accordance with the criteria described in the note to the summary financial statements.

### Summary Financial Statements

The summary financial statements do not contain all the disclosures required by Canadian accounting standards for not-for-profit organizations. Reading the summary financial statements and the auditor's report thereon, therefore, is not a substitute for reading the audited financial statements of the College and the auditor's report thereon.

### The Audited Financial Statements and Our Report Thereon

We expressed an unmodified audit opinion on the audited financial statements in our report dated June 4, 2025.

### Management's Responsibility for the Summary Financial Statements

Management is responsible for the preparation of the summary financial statements in accordance with the criteria described in the note to the summary financial statements.

### Auditor's Responsibility

Our responsibility is to express an opinion on whether the summary financial statements are a fair summary of the audited financial statements based on our procedures, which were conducted in accordance with Canadian Auditing Standard (CAS) 810, *Engagements to Report on Summary Financial Statements*.



Toronto, Ontario  
June 4, 2025

Chartered Professional Accountants  
Licensed Public Accountants

# COLLEGE OF NURSES OF ONTARIO

## Summary Statement of Financial Position

December 31	2024 \$	2023 \$
<b>ASSETS</b>		
Current assets		
Cash	66,893,690	61,639,519
Investments	41,424,947	33,749,551
Amounts receivable	268,110	393,552
Prepaid expenses	1,830,600	1,505,523
	<b>110,417,347</b>	97,288,145
Investments	11,938,309	12,577,848
Capital assets	11,244,431	12,043,856
Intangible assets	208,201	292,897
	<b>23,390,941</b>	24,914,601
	<b>133,808,288</b>	122,202,746
<b>LIABILITIES</b>		
Current liabilities		
Accounts payable and accrued liabilities	18,194,983	14,644,486
Deferred registration fees	64,981,936	60,532,814
	<b>83,176,919</b>	75,177,300
<b>NET ASSETS</b>		
Invested in capital and intangible assets	11,452,632	12,336,753
Unrestricted	39,178,737	34,688,693
	<b>50,631,369</b>	47,025,446
	<b>133,808,288</b>	122,202,746

# COLLEGE OF NURSES OF ONTARIO

## Summary Statement of Operations

Year ended December 31	2024 \$	2023 \$
Revenues		
Registration fees	73,146,361	56,467,954
Application, verification and transcript fees	7,817,825	6,762,140
Examinations	697,960	835,720
Investment income	3,583,984	2,800,468
Other	194,269	257,409
	<b>85,440,399</b>	<b>67,123,691</b>
Expenses		
Employee salaries and benefits	58,884,470	50,770,384
Consultants	6,678,003	7,264,430
Legal services	6,696,299	3,345,277
Equipment, operating supplies and other services	6,797,756	6,665,697
Taxes, utilities and amortization	1,927,310	1,971,046
Examination fees	141,990	231,597
Non-staff remuneration and expenses	708,648	637,022
	<b>81,834,476</b>	<b>70,885,453</b>
Excess of revenues over expenses (expenses over revenues) for year	<b>3,605,923</b>	<b>(3,761,762)</b>

# COLLEGE OF NURSES OF ONTARIO

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## Note to Summary Financial Statements

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December 31, 2024

1. **Basis of presentation**

These summary financial statements are derived from the audited financial statements of the College of Nurses of Ontario (the "College") for the year ended December 31, 2024, which were prepared in accordance with Canadian accounting standards for not-for-profit organizations.

Management prepared these summary financial statements using the following criteria:

- (a) the summary financial statements include a statement for each statement included in the audited financial statements, except for the statements of changes in net assets and cash flows;
- (b) information in the summary financial statements agrees with the related information in the audited financial statements; and
- (c) major subtotals, totals and comparative information from the audited financial statements are included.

The audited financial statements of the College are available to registrants upon request from the College.



# HILBORN

LISTENERS. THINKERS. DOERS.



**College of Nurses of Ontario**

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