

September 2, 2025

Hon. Sylvia Jones  
Deputy Premier and Minister of Health  
College Park 5<sup>th</sup> Floor, 777 Bay St.  
Toronto, ON, M7A 2J3

Dear Minister Jones,

**Re: Proposed amendments to O. Reg 275/94 under the *Nursing Act, 1991* -  
Nurse Practitioner classification**

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I am writing to you on behalf of the more than 68,000 nurses and health-care professionals, and over 18,000 nursing student affiliates, represented by the Ontario Nurses' Association (ONA). Our membership includes nurse practitioners (NPs) who provide care in hospitals, community health centres (CHCs), clinics, long-term care and other facilities, and together we advocate for improved public health care.

The College of Nurses of Ontario (CNO) is proposing amendments to O. Reg 275/94 made under the *Nursing Act, 1991* to merge the three NP registration certificates to create a single classification. This concept will be the same as that of the general class for registered nurses (RNs) and registered practical nurses (RPNs). According to the associated regulatory posting, the proposed change will require NPs to be educated based on common entry-level competencies and pass a common entry-level exam. As a result, entry-level NPs will be equipped to provide care across patient populations and practice settings.

ONA welcomes these proposed changes, provided that employers offer transitional support as required and NPs are fairly compensated.

**Improved access to health care**

In principle, the proposal to create a single NP classification can improve access to health care by increasing NP mobility and empowering NPs to practice based on the needs of the population within their scope. Currently, specialty certificates limit NPs to only treat patients within one of three categories: primary health care, pediatrics or adult. A single classification can improve access to care by allowing NPs to provide care to all age groups of the population. For instance, in an urgent care clinic, an NP would be able to provide care to all patients, whereas before they would be limited to adults (or children).

Minister, you are aware that Ontario faces an understaffing crisis in primary care; more than 2.5 million people do not have timely or regular access to a primary

care provider.<sup>1</sup> At the same time, nurses and health-care professionals are leaving the primary care sector due to low wages and unreasonable workloads. This crisis is particularly severe in northern and remote communities.

ONA has been calling on your government to urgently close the wage gap to address the understaffing crisis in primary care. We have also highlighted that NPs are well suited to fill the primary care gap and support a holistic care model. Research shows that the holistic care model, which considers environmental and socio-economic factors, improves quality and overall patient satisfaction. A single classification can reduce barriers for NPs to practice primary care in Ontario.

### **Transitional support**

The proposed revisions stipulate that currently registered speciality NPs will be grandfathered into the single NP classification. For a successful implementation, it is imperative that employers support the needs of NPs during the transition both financially and with time off. These supports from the employer are necessary for the single classification to be successful. Furthermore, given that existing pay grids are often allocated by classification, an upwards harmonization of NP compensation is required to fairly compensate NPs for their crucial role and expanded classification.

In conclusion, I am pleased to support this proposal for a single NP classification, provided there is upward wage harmonization and employer support as mentioned above.

Sincerely,



Erin Ariss, RN  
Provincial President  
Ontario Nurses' Association

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<sup>1</sup> INSPIRE-PHC Primary Care Metrics. [inspire-phc.org](https://inspire-phc.org)