



Illinois Department of Financial and Professional Regulation
Division of Professional Regulation

Minutes

Illinois Nursing Center
Advisory Board Meeting
9:00 A.M., Thursday, November 1, 2007
Illinois Wesleyan University
104 E. University Street
Memorial Center, Main Lounge
Bloomington, Illinois

ATTENDANCE

Board Members Present:

Michele Bromberg –Chairperson

Kathryn Christiansen

Nancy Cutler

James Renneker

Marcia Maurer

Donna Hartweg

Linda Fahey

Bridget Cahill

Maureen Shekleton

Teleconference

Deborah Terrell

Absent

Susan Ehlers

Other

President of Wesleyan University, Dick Wilson, Steve Frankel Office of the Governor, Judy Erwin – IBHE, Karen Helland - IBHE, Bob Sheets - DCEO & Daniel Bluthardt – Director of Profession Regulation

At 9:20 am, the meeting was officially called to order by Chairperson Bromberg. There were nine board members present and one via teleconference, representing a quorum.

President, Dick Wilson introduced himself and welcomed everyone to the campus.

The first item on the agenda was the consideration of the minutes of the September 6, 2007 meeting. Marcia had 2 amendments for the minutes:

1. Page 3, under **Retention Northern Region 5th** circular bullet should read: *“Incoming students may have acceptable GPAs coming in but have difficulty with nursing curriculum – lack critical thinking skills.”*
2. Page 5, under **Southern Region 5th** blacked circular bullet is to be deleted: *“Student come to the school”*.

Maureen Shekleton moved to accept with the minutes with corrections made, and was seconded by Kathryn Christiansen. The motion carried.

Chairperson Bromberg moved to the second item on the agenda, which was a vote for the Ethics Officer for 2008. Donna Hartweg moved to ask Scott Seder last year’s Ethics Officer and was seconded by Maureen Shekleton and all were in favor.

Chairperson Bromberg moved to the third item on the agenda, New Business and turned it over to Director Bluthardt. Director Bluthardt congratulated the ICN on getting up and running. He stated with the utilization of the Nursing Workforce Survey great progress will be made. Director Bluthardt is currently interviewing candidates for a permanent executive managerial role for the ICN and additional contractual help will be added to the staff.

Steve Frankel, Deputy Chief of Staff from the Governor’s Office announced an initiative to address the nursing shortage by reducing the shortage in Illinois through a regional public-private approach that aligns state and regional resources to address major causes of shortages at each stage of the nursing workforce development “pipeline”.

Overview

- There are 19 different programs, aligned to address the nursing shortage.
- 2 regions of the State: the southern region and northern region will be focused on for this initiative.
- A regional “pipeline” is being established, to help to get the facts straight on nursing levels and where the problems are. It will develop a methodology to derive an initial shortage estimate.

4 Stages of assessment

1. Applicant pool - We need a standardized way to measure qualified applicants? What do we know? What are the root causes for shortages in obtaining a diverse workforce? Document what we know, what will work, and the impact the solution will have on the whole problem.
2. Enrollment – What is the attrition rate and why are students not completing the program? Why is there a lack of qualified faculty? What are the solutions?
3. Transition – Why are students not passing licensing exams? Why are they not going into healthcare field? What can be done to make the transition process better?
4. Retention - Why are nurses leaving hospital settings after 1 year? Who is staying after graduation to work in a specific area? Salary, compensation, and working conditions must be considered.

***Goals for everything are to close the gaps overtime. We need to set a realistic estimate for each section.

Issues

- Look at the ADN, BSN, mix when estimating the nursing shortage.
- ½ of all faculty will retire in 10 years.
- Not enough masters prepared nurses.
- LPN through APNs, there are waiting lists to get into programs.
- More accelerated programs are needed.
- Master programs require a mentor and there are not enough to go around.
- Lack of capacity of prerequisite classes – need to increase capacity.
- Nurses are not able to purchase homes close to work. ie - DuPage – taxes are too high \$6,000-\$7000 year, plus a mortgage is too much, they cannot afford both. The State should be able have impact on this.

Suggestions & Other

- Interview the chief nursing operator of hospitals to gather data as to why nurses leave the workforce.
- Need to target more high school students and people who will move quickly through the nursing programs.
- There is a high need for specialty nurses.
- More Global Campuses - online programs.
- Data from the nursing workforce survey will help us to list many of the root causes.
- Pull students from underserved areas and through a contract, tuition can be waived if they go back to their community and work for “x” amount of years. If contract is broken they have to payback tuition.
- Focus on regions, many students from Chicago attend a school elsewhere and then go back to work in Chicago.
- For students who did not get into a nursing program – refocus them (so we do not loose them) into different healthcare professions as we are short: radiology technicians, ultrasonographers and more.

IBHE

- Received applications and will review them in December 07 for approval of the Nurse Educator Fellowship Grants 30 applicants only 15 slots.
- Expansion Grants- 3 renewals this year, no new ones. Some schools used it for faculty and/or for lab expansion.
- Improvement Grants – 4 last year. Only 2-3 this year.
- Align grant \$ with the current needs - every 3-5 years recalibrate.

At 11:05 am the Board took a short recess to prepare for the Deans/Directors of the Illinois approved Baccalaureate Degree Nursing Programs. At 11:25 am, the Board reconvened with the addition of Deans from Baccalaureate RN Programs.

Retention

- Southern Region – Mentors and tutors are available for those students who need it. Also, laptops are given to students. Implemented a program of accepting students from

underserved regions, have them sign a contract, and then go back to work in that area for “x” years. If they break the contract they have to pay back the tuition.

- Northern Region – Nurses are only working for 1 year. Suggestions were made to institute a mentoring program to help with the transition to the workforce.

Recruitment

- Southern Region – more accelerated programs are needed to entice students.
- Central Region – The schools are not at capacity, there are many spaces available for junior year high schools students.
- Northern City of Chicago Region – enrollment numbers are increasing. However, schools are not able to accept all the applicants due to lack of qualified faculty and facility size (classroom space.)
- Northern Rural Region – Schools are not at capacity. They have plenty of clinical spots but “attraction” to the region is a problem.

Faculty

- Southern Region – ½ of all faculty will retire in 10 years or less.
- Central Region – more than 50% of faculty do not hold a Doctoral Degree, so they can not be tenured. Many faculty are 55 or older. Currently accepting Master level nurse educators and helping them get their PhD.
- Northern Region – Salary is an issue, the Midwest has the lowest salary range which prohibits successful recruitment from anywhere else but the Midwest. Nurses make twice as much in a hospital setting as they do in an educational setting.

Suggestions

- Groups should convene with service providers so they are aware of the nursing shortage issues.
- Compile accurate numbers from “waiting lists”, see if the same student on multiple lists, better identify the number of applicants vs. amount of spaces available.
- Need some process in place to route students to schools that have openings.
- ICN could be the hub for a list which contains the schools and how many spaces in their program they have available. This would have to be updated and kept on top of frequently.
- Introduce students to other healthcare fields to keep them in the healthcare pipeline.
- Luncheon with high school guidance counselors – to teach them the expectations of nursing.
- High school recruitment – summer – 1 week clinical setting junior year.

There were no other matters to be brought before the board; Chairperson Bromberg entertained a motion to adjourn at 2:10 PM by board member Donna Hartweg and second by Bridget Cahill.