



Illinois Department of Financial and Professional Regulation

Division of Professional Regulation

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Division of Professional Regulation

Minutes

Illinois Center for Nursing
Advisory Board Meeting
10:00 A.M., Thursday, October 1, 2009
JR Thompson Center
100 W. Randolph Street
Third Floor, DCEO Conference Room
Chicago, Illinois

ATTENDANCE

Board Members Present:

Michele Bromberg, Chairperson
Kathryn E. Christiansen
Donna L. Hartweg
Mary Lebold
James Renneker
Maureen Shekleton
Deborah A. Terrell

Excused Absence:

Donna Meyer
Susan Campbell
Nancy Cutler
Marcia Maurer

ICN Staff:

Linda B. Roberts
Adam Webber

At 10:10 a.m. Chairperson Bromberg officially called the meeting to order. A quorum was present.

ANNOUNCEMENTS

1. Review and approval of minutes from September 3, 2009. M. Shekleton moved and D. Terrell seconded the motion to approve the minutes as read; minutes approved.
 - a. Linda Fahey has resigned as an Illinois Center for Nursing (ICN) Advisory Board member; her resignation is in effect post the September 2009 ICN BOD meeting.
 - b. Illinois Hospital Association (IHA): data collected on workforce development initiatives: The IHA workforce survey is distributed every other year, in even numbered years, in the springtime. The results reflect primarily statewide data analysis, limited regional data; the 2008 IHA workforce profile data is available on-line: www.iha.org.

- c. The Robert Wood Johnson Foundation (RWJF) Initiative on the Future of Nursing at the Institute of Medicine is a two year initiative; the first 13 months will involve information gathering, including three regional town hall meetings. In addition to oral testimony, written testimony limited to a 250 word abstract may be submitted. The dates, topics and places for upcoming meetings are:
 - 10/19/09 Acute Care, California
 - 12/3/09 Primary Care, Community Health, Public Health, Pennsylvania
 - 2/22/09 Nursing Education, Texas
2. NCLEX® Regional Workshop for faculty of licensure preparing nursing programs, Peoria, IL, October 13, 2009. Registration was closed on September 22, 2009. The National Council of State Boards of Nursing (NCSBN) maximum class registration capacity of 100 was reached. Nurse educators from over thirty Illinois nursing schools attended; participants included 17 deans/directors along with the IDFPR Board of Nursing Chairperson Julio Santiago.
 - a. Tentative plans are to hold another workshop in October 2010 in southern Cook County, the South Metropolitan Higher Education Consortium has volunteered to host. Per NCSBN guidelines, only one NCLEX® workshop may be held per state per 12 month period. ICN plans to facilitate this education offering again next year.
3. Legislative Update
 - a. Federal nursing initiatives, potential funding: some programs for potential funding have very specific restrictions, for example, one program had as an application criteria that unless the school had applied and been turned down for this specific federal funding the previous year, the school was not allowed to apply this year.
 - b. Center to Champion Nursing in America
 - Federal legislation: the AARP is a strong advocate for funding of nursing education programs, for example, S1569, Senator D. Strabenow (D-MI), expand APRN workforce, ensure funding from Medicare payments.

OLD BUSINESS

1. Illinois Board of Higher Education (IBHE) Nursing Education Improvement Grant Evaluation: the IBHE requires an evaluation to be completed at the end of the one year grant period. IBHE has been in contact with these schools, they have all indicated their willingness to complete an additional evaluation.
 - a. Discussion: the framework for the discussion is that most nursing education programs are longer than one year. When should there be additional assessment: at the 2 and 3 year post award period; when the student completed the nursing education program; different questions each year/time?
 - b. Questions: has receipt of the grant money, in addition to the school's ongoing programs complemented the school's ongoing efforts to improve student performance? Was the expected outcome achieved; were there any unintended outcomes; was there additional funding received?
 - c. Other: the award criteria for grant receipt include NCLEX annual pass rates, retention of students, graduation rates.

Plan: recommend to IBHE follow-up assessment of IBHE Nursing Education Improvement Grants at two and three years post grant receipt, questions to be focused on above discussion.

IBHE Nursing Educator Fellowship Award follow-up survey: the primary question is whether or not this person continues to teach in nursing education. Discussion included, is the purpose different from what was intended, is this award a stipend or enhancement of a program, or is enhancement of a program what is needed to maintain nurse educators

within nursing education programs. Recognition due to receipt of this state award is an additional benefit; recognition within the university, the community, etc

Plan: Continue to work with IBHE follow-up assessment of Nurse Educator recipients.

2. US DOL/RWJF/AARP Team Illinois

- a. Team Illinois: quarterly meetings will be held for team members and regional partners on a quarterly basis. The next meeting will be in Marion, IL on Monday, October 26, 2009; Man-tra-con Corporation/Connect-Si will host. ICN and Team IL have been invited, and are working with regional groups, such as the recent RWJF Partners In Nursing of Central IL (Central Illinois Nursing Initiative, CINI), and the Bloomington-Normal IL former RWJF PIN grant recipient that is now working on collaboration amongst 5-6 communities to foster regional collaboration on initiatives to reduce the nursing shortage, expand nursing education capacity.
- b. Business Case, the goal is to create a toolkit that articulates the business plan and the return on investment for expanding nursing school capacity. Strategies for addressing nursing faculty salaries are part of the toolkit. MCHC has been working on a regional business case, plan to present at the December 2009 ICN meeting.
- c. Simulation Lab Capacity Results asset mapping. A summary document from the survey that was distributed to all IL LPN, RN, APN, and MD education programs, Metropolitan Chicago Healthcare Council, Illinois HomeCare Council, and the Illinois Hospital Association was reviewed.

The document included that there were 148 valid responses to the survey:

- i. 65 responses were from nursing schools
 1. 34 two year schools of 46 total in Illinois
 2. 6 four year schools of 30 total in Illinois
 3. 2 LPN programs
 4. 1 BSN completion program
 5. 1 Hospital
- ii. 8 medical schools responded of 11 total medical school campuses
- iii. Of the respondents that do have a clinical simulation lab, in the past 12 months:
 1. 43 (66.2%) have conducted high fidelity programs at the lab
 2. 42 (64.6%) have conducted low fidelity programs at the lab
 3. 29 (44.6%) have conducted moderate fidelity programs at the lab
 4. 13 (20%) have conducted standardized patient actor programs at the lab
 5. 3 (4.6%) responded that their simulation lab was not currently in use
- iv. If given the opportunity, 84 respondents (64.6%) agreed they would be willing to consider collaboration with other healthcare institutions or organizations in sharing simulation scenarios

Simulation Lab asset mapping project at this time has access to limited resources. Other states have regionalized simulation lab resources.

Discussion included: providing information on the ICN website such as:

- a contact person at each simulation lab
- guidelines for the sharing of health care simulation labs
- recommendation for both the number of technicians per students and the fee to each school per student
- possibility of sharing of resources both within a region, and amongst regions.

This collaboration would potentially be able to provide additional tools for students, including interdisciplinary healthcare education. There are currently facilities to be utilized as best practice models for other regions.

3. Home Health, Home and Community Based Services Initiative

A final report is pending. The next steps include further definition of the workforce – in addition to paraprofessionals - nursing, advance practice nursing, licensed professionals; models of care to improve both the quality of care and retention of the workforce, development of career lattice; further defining workforce strategies.

- a. June 29, 2009 successful meeting: Exploring Workforce Development Strategies for Illinois Home Health and Home/Community Based Services, 40 stakeholders from 30 organizations were in attendance. The final report is complete and has been submitted to DCEO.
- b. November 5, 2009, the next meeting will be held at MCHC headquarters in Chicago, IL. The focus will include exploring best practices. At least four employers will be presenting models that both retain employees and maintain quality of care.
- c. Other: home health agencies have a integration of licensed and unlicensed personnel, present at various times, not necessarily at the same time. If nurses are to be coordinator of care in home care, is there enough education re: supervision and delegation to non-nurses, licensed and unlicensed in nursing schools.

NEW BUSINESS

1. Strategic Planning (combination document used as resource: legislation, goals and FY2009 accomplishments)

a. Mission, Vision, Goals

Discussion included a review of mission, vision and goals as previously adopted by ICN Advisory Board; the purpose of a vision statement and understanding of the current vision statement resulted in:

Motion: New Vision Statement for the ICN:

“The Illinois Center for Nursing will be a state of the art workforce center that will provide necessary and informative resources, long range planning and policy development, excellence in nursing service and education, and serve as a best practice model.” Motion approved

b. Discussion and review of activities/accomplishments FY2009, collaboration with regional partners (primary partners MCHC and Connect SI), status of various pilot projects, and other initiatives. Goals of the center are being achieved and generated through other outside entities as well. The expansion of nursing education capacity has been a primary focus of activity.

- i. Clinical Faculty Academy: this program is designed for novice nurse educators with a contract to begin teaching within subsequent months of completing the two day academy. The nine educational modules, consistent with National League for Nursing clinical competencies, range from pre- and post-conference planning to student evaluation.

Three CFA's were held between August 2008 and June 2009 in NE, IL. This August, 2009, two academies were held, one in southern Cook County, and one in Peoria, IL. Best attendance is in the month of August.

MCHC and the State of Illinois purchased the license for the CFA in 2008. MCHC will continue to facilitate offering this program for a negotiated fee throughout the state of Illinois.

- ii. iCRSP (Illinois Clinical Rotation Scheduling Program) initiative: this program is an on-line clinical rotation scheduling program designed to expand nursing educational program capacity. Nursing programs and clinical placement sites would be able to maintain current arrangements. This program would also allow viewing of potential additional clinical sites/times.

The pilot program that was coordinated through MCHC is complete. The Department of Commerce and Economic Opportunity will support student fees for the first two years of this program. Fees are currently \$35.00/student fee.

This is a one-time fee that funds the student clinical scheduling for the entire time the student is in the nursing education program, through graduation.

- c. Motion: The Illinois Center for Nursing Advisory Board requires a formal vote on recommendations for nursing initiatives originated through other state agencies. D. Hartweg move, M. Shekleton second. Motion approved.
- d. Motion: The Illinois Center for Nursing Advisory Board supports statewide implementation of an on-line scheduling system for nursing student clinical placement. M. Shekleton move, D. Terrell second. Motion approved.

ADJOURNMENT

M. Shekleton moved and J. Renneker seconded motion to adjourn. The meeting was adjourned at 2:02pm by M. Bromberg.

The next ICN Advisory Board meeting will be Thursday, December 3, 2009, Chicago, IL.