



Illinois Department of Financial and Professional Regulation

Division of Professional Regulation

PAT QUINN
Governor

BRENT E. ADAMS
Secretary

DONALD W. SEASOCK
Acting Director
Division of Professional
Regulation

Illinois Center for Nursing
Advisory Board Meeting Minutes
10:00 A.M.
Thursday, October 7, 2010
100 West Randolph Street
Ninth Floor Conference Room, #171b & c
Chicago, Illinois

ATTENDANCE

Board Members Present:

Michele Bromberg, Chairperson
Kathryn E. Christiansen
Nancy Cutler
Donna L. Hartweg
Mary Lebold
Marcia Maurer
Marsha A. Prater
James Renneker
Deborah A. Terrell

Excused Absence:

Susan Campbell
Maureen Shekleton

Donna Meyer - phone

Staff:

Linda B. Roberts, ICN Manager

At 10:20 a.m. Chairperson Bromberg officially called the meeting to order. A quorum was present.

ANNOUNCEMENTS

1. Review and approval of minutes from June 3, 2010
 - a. Corrections: IBHE Nurse Educator Fellow Theresa Krassa – on the guest list school is incorrectly listed as IL Wesleyan, the correct school should be listed as “University of Illinois”. Motion: D. Hartweg moved and K. Christiansen seconded the motion to approve the minutes as amended, minutes approved.
 - b. Review and approval minutes from September 2, 2010. Motion: M. Maurer moved and D. Hartweg seconded the motion to approve the minutes, minutes approved.

2. Legislative Update

- a. Ethics Annual Training for Appointees to State of Illinois Boards - Ethics Training information reviewed by individual Board of Directors members; Acknowledgement and Participation forms distributed and returned with signatures.
- b. IDFPR Nurse Practice Act Rules were approved by JCAR on September 17, 2010. CE information and resource documents available on the ICN website reviewed:
 - i. Areas where we receive many questions:
 - Equivalencies between continuing medical education credits from programs that have been approved by the AMA, college course credit hours, etc
 - other state nursing board approved courses
 - audits, what to save, when to turn in
 - where to find courses
 - how to know if courses are approved for IL RN re-licensure or not
 - how to become IDFPR CE sponsor
 - if one presents a course what documents are needed to verify that presentation was done (for example, a signed attendance sheet, notification that course is available, etc)
 - if one presents at a large national conference – ask the national organization that sponsors the event to send note that there were for example 50 attendees; this verifies the course was presented and that there was an audience
 - ii. Other questions:
 - Internship versus externship for student interns: externship, there was only one state program that is no longer in existence. Internship is in partnership with a school of nursing, pair with partner at an agency; a major project with a final presentation can be called an internship. Now hospitals want the student to get out on the acute care patient unit as a part of a program of study. Transition into practice will facilitate student transition into new role, also the intent is to reduce orientation time.
 - Faculty variances – the criteria remains the same, however now a faculty variance may be approved by the Nursing Coordinator.

3. National Council State Board of Nursing (NCSBN) Update

- a. NCLEX ® Regional workshop for faculty of licensure-preparing nursing programs will be held on October 21, 2010; all spots are filled, 31 different nursing education programs are participating. Since the initial distribution of information in June 2010, only one reminder was sent to local programs.
- b. Meeting September 26, 2010 – Scientific session, Washington, DC
 - i. Evaluation of APN safety: an analysis of disciplinary actions and level of practice autonomy; session pulled: per NCSBN this was due to incomplete data analysis at this time.
 - ii. “TUNING analysis” a comparison of US and international nursing education competencies: to facilitate comparability & promote mobility among higher education institutions in Europe as well as other countries throughout the world. In Europe must have bachelor’s degree. Replicated as closely as possible by NCSBN in US

- iii. Simulation Study: assessing outcomes of simulated clinical experiences in nursing education, five year national study of RN students, how well is simulation integrated into nursing education programs have begun.
4. IBHE FY2011 Nurse Educator Fellowship; application deadline October 8, 2010
 5. IBHE FY2011 Nurse Improvement Grants, deadline October 31, 2010
 - a. The recipients of this award for FY2010 are
 - Benedictine University (expand RN-BSNC program),
 - Blessing-Rieman College of Nursing (expand simulation laboratory),
 - St. Francis Medical Center College of Nursing (expand student support services).
 - b. Past recipients for FY 2007-2009 are: CCC-Truman College (evening and weekend program options were added), Loyola University of Chicago (an accelerated program option was added) and Northern Illinois University (additional student support services).
 - c. IBHE Expansion grants are evaluated annually and renewed for a maximum of three years based on performance which includes increasing the number of students graduating and successfully completing NCLEX-RN examination.

10:45 AM NEW BUSINESS - reorder agenda

1. Health Care Reform
 - a. The Governor's Health Reform Implementation Council was created by Executive Order July 30, 2010.
 - b. Regional meetings are being held across IL, with a final report to be completed and initial recommendations to the Governor's office by December 31, 2010. The IL Center for Nursing was invited to present testimony on the nursing workforce supply and demand on October 5, 2010 in Peoria, IL
 - c. Michael Gelder, Chair IL Health Reform Implementation Panel Chair, agreed that ICN adapt the IL Nursing Workforce Supply and Demand testimony that was presented on 10-5-10 to include recommendations and state goals. Final testimony and goals are attached as Appendix A to these minutes.
 - d. The IDFPR/IL Center for Nursing is in agreement with the four recommendations contained in the Institute of Medicine (IOM) Report: *The Future of Nursing, Leading Change, Advancing Health (10-5-2010)*. The ICN offers strategies for implementation within Illinois.

IOM #1: Nurses should practice to the full extent of their education and training

- 1-1) Promote innovation that increases workforce retention and professional satisfaction
- 1-2) Enhance and promote recognition, reward, and renewal activities for nurses
- 1-3) Identify barriers that prevent APNs from practicing to the full extent of their education and training
- 1-4) Promote the development of, and identify funding for, transition to practice residency programs for new graduate nurses to further develop the skills needed to deliver safe, quality care in acute care and community settings
- 1-5) ICN provide leadership in systematic assessment and projection of workforce requirements by role, skill mix, region and demographics to meet changes in the health care delivery systems

IOM#2: Nurses should achieve higher levels of education and training through an improved education system that promotes seamless academic progression

- 2-1) Fund nursing education programs for expansion and improvement utilizing the current IBHE template
- 2-2) Fund the IBHE Nurse Educator Fellowship Awards annually
- 2-3) Develop statewide access to capacity-building, life-long learning opportunities for nursing personnel including interdisciplinary education
- 2-4) Align the criteria to provide for seamless transition for secondary and postsecondary education and training into higher degree programs for all levels of licensed nurses from LPN; to associate's (ADN) and bachelor's (BSN) degrees; to master's, PhD and doctor of nursing practice (DNP) with various workforce opportunities.
 - a. Articulation agreements between levels of education
 - b. Fund schools of nursing to provide partnerships and transitions programs
 - c. Encourage and fund doctoral degree education programs

IOM#3: Nurses should be full partners, with physicians and other health care professionals, in redesigning health care in the United States

- 3-1) Appoint nursing leaders to key policy making bodies that focus on health care
- 3-2) Provide leadership to advance best practices that will assure high quality care and to achieve best practice outcomes
- 3-3) Appoint nurses to advisory boards on which policy decisions are made to advance health systems and improve patient care
- 3-4) Promote collaboration between practice and education, so that each understands what potential there is
- 3-5) Foster the role of nurses in care coordination to advance health systems and improve patient care and coordination of care
- 3-6) Identify and replicate nursing leadership and mentoring programs in nursing education and service settings to cultivate leaders to work collaboratively with leaders from other health professions

IOM#4: Effective workforce planning and policy making require better data collection and an improved information infrastructure

- 4-1) Fund the IL nursing workforce survey every three years
- 4-2) The IL Center for Nursing will be the hub of data collection and data analysis for nursing and provide leadership for data collection and analysis for other health science/allied health professions.
- 4-3) Maintain a database on nursing supply and demand within the state
 - a. Collect data
 - b. Analyze the data both state and regional labor market information to identify current and projected demand for nursing services;
 - c. Develop and provide recommendations based on the findings
- 4-4) Attract a diverse qualified applicant pool into nursing education programs to ensure that the workforce reflects the demographics of the state

12:30 PM Lunch – continue working

1:00 PM OLD BUSINESS

- a. Review of ICN Mission, Vision statement, two documents reviewed from April 2010 and September 2010, including an edit from M. Shekleton in the Mission statement: to strike “and ensure”, and insert “for” so that the ICN Mission Statement will now read: “The mission of the Illinois Center for Nursing is to advocate for appropriate nursing resources necessary to meet the healthcare needs of the citizens of Illinois.”

Motion to accept the ICN Mission Statement as amended: K. Christiansen moved and J. Renneker seconded, motion approved.

Motion to accept the ICN Mission, Vision, Goals and Mandates as amended: M. Maurer moved and D. Terrell seconded, the motion approved.

- b. Communication
 - i. Website: information regarding Team IL is being placed on the ICN website, and references to CCNA (Center to Champion Nursing in America) are being reformatted to "Team IL/CCNA".
 - ii. Written communication: a draft email template newsletter was distributed and reviewed. Distribution of IL Center for Nursing information is to include, but is not limited to: Team IL members and Regional partners, Deans and Directors of the 129 IL nursing education programs, IL Organization Nurse Leaders, IL Coalition of Nursing Resources, IL Nurses Association, IL Critical Access Hospitals, IL Hospital Association and other interested groups.
 - iii. Team Illinois
October 4, 2010 Quarterly meeting was held in Marion, IL at Man-tra-con/Connect-SI offices. Members agreed to meet face-to-face three times a year, and to consider utilization of videoconference. Regions are: NE: Metropolitan Chicago Healthcare Council (MCHC); Central IL Regional Collaborative Effort (CIRCLE): Bloomington-Normal and The Springfield Chamber of Commerce/RWJF Partners In Nursing (PIN); The Quad Cities/RWJF ILIOWA PIN; and connect-SI: Southern IL

Regional Updates – Common Program Initiatives

- i. Youth services – each region has unique initiatives, for example, in Springfield, 7th graders participate in a health care professionals in the classroom program. There is also a pilot program in one middle school.
- ii. Clinical Faculty Academy (CFA), the two day programs have been held six times in three regions in 2010 compared to two programs per year in 2008 and 2009.
- iii. Simulation Labs – plan conference call with regional leaders to set content for a statewide meeting. Suggestions include having a keynote speaker with teleconference in three different regions to facilitate access to information. Action: M. Prater and J. Renneker to represent ICN BOD on planning call with Team IL.

1:30pm Final review and revision of IL Health Reform Nursing Workforce Supply and Demand Testimony

2:00 PM ADJOURNMENT



APPENDIX #1 To ICN Board Meeting Minutes October 7, 2010

Presented October 5, 2010, Peoria, IL.

The Mission of the IDFPR/Illinois Center for Nursing (ICN) is to advocate for the appropriate nursing resources necessary to meet the healthcare needs of the citizens of Illinois.

ICN was established by legislation in 2006, Section 75-10, the Nurse Practice Act. This is part of an overall strategy to produce more highly skilled nursing professionals, and an ongoing effort to ease the nursing shortage and improve access to quality health care for Illinois families. The ICN is located within the Illinois Department of Financial and Professional Regulation.

Present Supply and Demand of the RN Workforce

The IL Department of Employment Security (IDES) Statewide Employment Projections for Registered Nurses shows that between 2006 and 2016 the demand for RNs will exceed the supply. The estimated job growth will be in the acute care, long term care and community based care settings. Estimated Annual Shortage of RNs = (through 2016)

Demand (less) Supply = Shortage
 6,325 - 4,410 = 2,215

IDES Statewide Employment Projections							
Title	Base Year Employment 2006	Projected Year Employment 2016	Employment Change 2006-2016		Average Annual Job Openings Due to		
			Number	Percent	Growth	Replacements	Total
Registered Nurses	105,940	135,549	29,609	27.95	2875	3450	6325

(Retrieved 2/18/2010)

Current IL Nursing Demographics:

The IDFPR/ICN nursing workforce survey was last completed in July of 2007 and consisted of three questionnaires, one for each of three licensure categories, of nurses, Licensed Practical Nurses (LPNs), Registered Nurses (RNs) and Advanced Practice Nurses (APNs). The questionnaire for a nursing category included a set of core items that were shared across the three questionnaires and a set of items that were specific to the nursing category. The total number of LPNs, RNs and APNs reported as actively licensed in IL in 2007 was 185, 557. Of these 185,557 licensed nurses, 14% were LPNs, 83% were RNs and 3% were APNs.

The average age of all nurses (LPN, RN, APN) are over the age of 46 years old. For nursing faculty, the average age is mid-fifty's. Fifty-three percent of all nurses are within 15 years of retirement. The majority of nurses are female: LPNs: 96.9%, RNs: 96.4% and APNs 90.9%. Racial background, LPNs: 85.0% White, 15.0% Black or African American, 1.8% Asian and 2.8% Hispanic/Latino/Spanish ethnic background; RNs: 92.7% White, 10.6% Black or African American, 5.1% Asian and 1.7% Hispanic/Latino/Spanish ethnic background; APNs: 94.1% White, 11.1% Black or African American, 3.2% Asian and 1.8% Hispanic/Latino/Spanish ethnic background. As of June 30, 2010 there are 205,092 actively licensed nurses in IL; 14.9% are LPNs, 81.6% are RNs and 3.4% are APNs.

Languages other than English: in order to provide care for a diverse patient population, the ability to speak multiple languages in important for all nursing groups. These results are from the IDFPR Nursing workforce survey: LPNs: a majority of LPNs (56.6%) reported speaking a language other than Chinese, German, Polish, Russian, Spanish or Tagalog and 28.7% speak Spanish. RNs: approximately one out of three RNs (37.3%) reported speaking a language other than Chinese, German, Polish,

Russian, Spanish or Tagalog as a language spoken in addition to English and 22.9% speak Spanish. APNs: approximately one in four APNs (26.7%) reported speaking a language other than Chinese, German, Polish, Russian, Spanish or Tagalog as an additional language; 37.9% speak Spanish, 28.9% speak German.

Approximately 85% of licensed nurses living in IL reported they were working in a nursing or nursing-related position, representing a 3% increase when compared to prior surveys. In addition, 71% of nurses reported working between 31 and 50 hours per week, a slight decrease from the 73% that was previously reported. One-fifth of the licensed nurses reported working more than one job. Of those who were not employed, the majority (54% reported they were retired and 17% were actively looking for employment. These percentages represented an increase in the number of retired respondents and of those seeking employment when compared to prior years. Almost all nurses licensed in IL (94%) reported also working within the state, a percentage that is comparable to what has been previously reported. Hospitals, clinics, medical practices, and nursing homes remained among the most common work settings for nurses.

Nursing Pre-licensure Education

In Illinois there are one hundred twenty nine approved pre-licensure nursing education programs. These programs provide the education for LPNs and RNs. There are forty seven LPN programs, the majority of which are located in the community college setting. RN pre-licensure programs, there are eighty two programs located across the state. There are in IL four different pathways that provide education for RNs: 1 hospital/diploma program, forty eight associate degree programs, 29 bachelors degree programs and four masters entry level programs. All pre-licensure programs require concurrent theory and clinical courses.

In FY 2009 there were 7,000+ students enrolled in pre-licensure ADN and BSN nursing education programs statewide. 56% of the students were enrolled in ADN programs and 44% were enrolled in BSN programs. This is a 25% overall increase in enrollment since FY 2006.

An example of a program that has been instrumental in increasing the number of nursing students in IL nursing education programs is the IL Board of Higher Education (IBHE) Expansion and Improvement Grants under the Nursing School Grant Program. This program is in its fifth year. These grants support high-performing nursing schools by expanding nursing program capacity and increasing the number of students preparing for careers as registered nurses.

Grants recommended under the Expansion Grant category are renewable for up to three years based on sustained program progress and evaluation results. Expansion grant funds may be used to: hire additional nursing faculty; develop or expand instructional programs; develop or expand academic support services; increase classroom space and clinical space; improve existing classroom space; purchase equipment and instructional materials; and conduct program audits and evaluations. Expansion grants range from \$200,000-\$400,000 per school per year. Improvement grants range from \$20,000 - \$40,000 per school per year.

The recipients of this award for FY2010 are Benedictine University (expand RN-BSNC program), Blessing-Rieman College of Nursing (expand simulation laboratory), and St. Francis Medical Center College of Nursing (expand student support services). Past recipients for FY 2007-2009 are: CCC-Truman College (evening and weekend program options were added), Loyola University of Chicago (an accelerated program option was added) and Northern Illinois University (additional student support services). IBHE Expansion grants are evaluated annually and renewed for a maximum of three years based on performance which includes increasing the number of students graduating and successfully completing NCLEX-RN examination.

Preparing Nurse Educators and Advance Practice Nurses

Post-licensure baccalaureate completion programs (BSNC) are an additional pathway for nurses to increase their education, which broadens their career options and create a foundation for graduate nursing education. Nationally there are approximately 630 post-licensure baccalaureate completion nursing education programs. Illinois has approximately 29 such programs, seven are at public universities, twenty-two at private universities. Over the past three years, a quarter of these programs have increased the number of seats available to qualified applicants. Slightly less than half of the programs have increased the number of qualified applicants admitted between FY2007-FY2009. Most

students of these programs attend part-time and complete the program in 3-5 years. These BSNC programs are designed for nurses that are already actively licensed.

Post-licensure graduate nursing education: There are masters and doctoral degree programs at five public universities and nineteen private universities. Completion of graduate nursing education is mandatory for nursing faculty and advance practice nurses (APNs). A graduate of an advanced practice nursing program may practice in the State of Illinois in the role of certified clinical nurse specialist, certified nurse midwife, certified nurse practitioner, or certified registered nurse anesthetist. All RN nursing education programs require nursing faculty to have at a minimum at least a master's degree in nursing.

Illinois Board of Higher Education (IBHE) Nurse Educator Fellowship Program:

The purpose of the Nurse Educator Fellowship Program is to ensure the retention of well-qualified nursing faculty at institutions of higher learning that award degrees in nursing. This award program gives \$10,000 stipends to 15-18 nursing faculty annually as a reward for exemplary performance and as an incentive to remain in the classroom. Awards will be used to supplement the salaries of the nursing faculty selected for the Fellowship. (110.ILCS 205/9.32)

Funds may be used for, but are not limited to, professional development, conference expenses, continued education, professional dues, nursing advocacy, and participation in meetings or associated conferences (if called upon by the IBHE or the Illinois Center for Nursing). This program has been funded for four years, with nursing faculty from eleven to seventeen different schools receiving awards each year.

Educational mobility in nursing is the vehicle by which nurses and aspiring nurses gain new knowledge and skills through formal and informal educational offerings. Educational mobility serves the public, the profession, and the individual nurse. Educational mobility should continue to focus on promoting high standards, maintaining the quality and integrity of baccalaureate and graduate programs, while emphasizing the attainment of program outcomes. The focus of higher learning should be on the socialization of students to new professional roles and the knowledge and skills needed for those roles. (AACN, 1998)

The Illinois Center for Nursing is working with industry professionals and educational institutions to ensure that Illinois has a nursing workforce necessary to meet the demands of a growing and aging population. The ICN website www.nursing.illinois.gov was created as a one-stop resource for nursing education, data and resources.

Regional stakeholders and State agency leaders have developed frameworks that define the nature of our shortages, the barriers and challenges and the recommended regional solutions.

Each region faces distinct challenges, and requires solutions that are unique in some cases and replicable in others. The Illinois Center for Nursing is partnering with various agencies, including the Metropolitan Chicago Healthcare Council (MCHC) in the northeast, Central Illinois Healthcare Initiative (CIRCLE) in central and Connect SI, Man-Tra-Con Corporation in southern Illinois along with the RWJF PIN recipients in Springfield, IL and in the Quad cities area.

The Affordable Care Act improves access to health care through health insurance reform and reform of delivery systems. The IDFPR/Illinois Center for Nursing and its regional partners continue to focus on expanding nursing education capacity and maintaining nurses in the workforce to care for the health care recipients in IL. Maintaining education opportunities and access to these opportunities has been a primary focus, to build and maintain the nursing education pipeline. Licensed nurses are the cornerstone of health promotion and disease prevention in all settings: acute, long-term and in the home.

Although the number of licensed nurses in IL is growing, and the number of nursing students enrolled in approved nursing education programs is growing, there is still a nursing shortage in IL. The shortage of nursing faculty will grow significantly in the near future with 60% of current faculty 50 years of age or older. The shortage of nursing faculty is one of the principle barriers to restocking the pool of licensed nurses. According to the HRSA 2008 National Sample Survey, nearly 45 per cent of RNs were 50 years of age or older in 2008, a dramatic increase from 33 percent in 2000 and 25 per cent in 1980. The IL Center for Nursing remains committed to strengthen IL nursing education programs to increase the number of qualified nursing faculty and to promote efforts to ensure that the nursing workforce remains stable after graduation.

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The Illinois Center for Nursing (ICN) was established in 2006 to advocate for appropriate nursing resources necessary to meet the healthcare needs of the citizens of Illinois. ICN is working with industry professionals and educational institutions to ensure that Illinois has a nursing workforce necessary to meet the demands of a growing and aging population. For more information, visit the ICN website, www.nursing.illinois.gov.

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