Legislative Strategies: Momentum to Drive “Audacious” Policy Change

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Objectives

1. Discuss the basis for legislative decision making and the political process
2. Address key issues driving audacious policy change
3. Identify legislative strategies used to influence health policy

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Political Landscape

an extensive political mental viewpoint
main features of a situation or activity
Need to know the political lay of the land
not enough to have power but provides opportunities to meet goals
need to how much & what kinds of power others have in influencing decisions
exercise capacity to shape policy and decisions
Who are the key political actors/players/stakeholder groups:
(i.e., Shifting Congressional Seats: Republicans control the House, Democrats control the Senate
voter patterns? are they changing?
SIGs

Understanding the Political Landscape

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Political Influence

- Shaped by what occurs at:
  - National Level Politics
  - Economy (current issues & trends)
  - Health Care Reform
  - Health Care Improvements: Access, Safety, Quality & Cost
  - Defense Spending
  - State Level Politics
  - (how they are implemented at a state level, rules, regulations & laws governing)
  - Local Level Politics
  - How is power and influence distributed at these levels?
  - How do stakeholders get involved and/or excluded from decisions to influence behavior and decision-making?
  - What is the current bureaucratic mindset?
  - How can we build public awareness? (Abood, 2007)

Policy Cycle & Process

- Complex process
  - Multiple levels of government
  - Private & public sectors
  - Five components to a policy cycle:
    - Issue raising
    - Policy design
    - Building public support
    - Legislative decision-making & building policy support
    - Policy implementation (p. 303)


Key Issues Driving

Audacious Policy Change
Building momentum for change:
- Affordable Care Act (aka: HCR)
- APRN Consensus Model of Regulation
- Statewide Action Coalitions formed and emerging

Affordable Care Act: The 3-Legged Stool of HCR (Source: Schultz, H. 2011)
- Expanding coverage & access
- Improving quality, patient safety & lowering costs
- Insurance & Benefits

Where we are Going
- Implementation of HCR
- 3-legged stool approach: 1) Access, 2) Consumer Protection & Safety, 3) Quality in Care & Outcomes
- Emerging legislation/regulations to advance the nursing profession to:
  - Increase access to primary health care
  - Building a stronger health care workforce
  - Securing funding for nurse education (Title VIII)
  - Updating SOP for Health Professions and Advanced Practice Nurses (APNs) via Consumer Boards
- Innovation
  - Emerging alternative models of health care delivery
  - HIT
- Finance Structures
  - ACO’s
  - Medical Homes
IOM: Future of Nursing (2011)

Practice to the full extent of their education & training
Achieve higher levels of education & training through an improved education system
Seamless academic progression
Be full partners with physicians & other health professionals
Effective workforce planning & policy making requires data collection & improved information infrastructure

How Do We Get There

Patience and Strategic Planning
Collaboration
Networking
Consistent messaging
Evidence
Legislation
Regulation

Creating Momentum

Primary Issues
Access to Health Care
Health disparate and vulnerable groups
Safety & Quality
Cost of Care

Primary Influences
Stakeholder Groups
Consumers & Consumer Advocacy Groups
Organized Health Systems
Payors/Insurers
Professional Organizations
Evidence
Managing Conflict
- Encounters can provide opportunities
- Negotiate & Compromise
- Reciprocity may not be immediate
- Incremental approach

Building Coalitions
- Identify & Leverage Interests
- Broadens the Larger View

Establishing Political Outreach with Organized Networking
- Build Capacity & Expand Reach
- Establish trust & credibility
- Communicate the value you add

Legislative & Regulatory

Decision Making: A Combined Approach

What is Needed to Broaden SOP Boundaries?
- Legislative Decision-Making
- Promote better consumer care across professions and competent providers
- The Macy Foundation & AARP Policy Briefs
- Improve Access to Care
- Recognize Overlapping SOPs
- Need documentation & evidence that the public is protected with changes
- Regulation Considerations
- Public protection & safety key
- Regulate professional competence
- Mechanisms for discipline & capacity to manage/modify SOP changes

Foundational Factors:
Four Key Areas for Proposing Change

- Historical Basis
- Education & Training
- Evidence
- Regulatory Environment


Historical Basis

- Provides a framework for the essentials of the nursing profession including the:
  - Theoretical foundations of the profession;
  - Profession’s evolution over time;
  - Context of current practice and;
  - How it is presently defined


Education & Training

- Entry level training programs
  - How are they measured to skill as experience increases?
- Accrediting standards
  - What are they? Who develops them?
- Competence assessment
  - How is competence assured?

Evidence

- Should rely upon promoting access to quality healthcare:
- Does the evidence support this?
- Research and Evidence:
  - Benchmarking Data-Nurse Sensitive Outcomes
  - Comparative Effectiveness Research
  - Quality Improvement Data
  - Cost effectiveness
- Does this benefit public health?


Regulatory Environment

- Primary role of regulatory boards:
  - Consumer Protection and Public Safety
  - Need to be involved in the process & understand the issues
  - Nurses need to understand
    - What their boards authority, capacity and oversight is to manage expanding SOP?
    - What has been previously done?
    - What is the previous legislative history?
    - What are the measures to assure competence?
    - Have they changed?

The essence of strategy is choosing to perform activities differently than rivals do.

Michael E. Porter, 1996

Special Interest Groups & Lobbyists

- Health Insurance Industry
- Hospitals
- Health Care Related PACs
- Big Pharma
- Consumer Advocacy Groups
- Unions & Liberal Advocacy Groups
- Drug & Device manufacturers
Factors & Assumptions

- Interest groups and strong lobbies can advance or block legislation
- Adversarial relationships
- Competition between health care disciplines over practice boundaries
- Expansive SOP proposals
- State statutes and regulations that grant APNs the right to practice through licensure, do not necessarily sanction their autonomy to perform as practitioners

Source: Cooper, Henderson, & Dietrich, 1998; DiCenso et al., 2007

Power in Strength and Numbers

- Meeting future & current health care needs requires substantive change
- New delivery models (medical homes, ACO's); retail health
- Team based approach within community health centers and organized health systems
- Nurses are largest group of health care providers (HCPs):
  - >3 million RNs
  - >250,000 APNs; NPs (158,348) -- 19,134 of NPs also had either CNS/CNM, CNMs (39,942), CRNAs (34,821), CNs (59,242) -- a 22.4% decrease from 2004 at 72,521 (HRSA, 2010)
- Expanding roles and capabilities
  - Utilize qualified HCPs to the fullest extent of their education & scope of practice
  - Increase access to affordable care
  - Improve quality, patient safety & outcomes


Political Advocacy

Creating Action for Change
Coalitions & Partnerships

Group of individuals representing diverse organizations or constituencies who agree to work together to achieve common goals (Feighery & Rogers, 1990)

Building Relationships

- Increase Networks & Create Opportunities:
  - Participate on Advisory Groups
  - Task Forces
  - Strengthen Alliances
  - Develop Partnerships
  - Create Coalitions

- Maximizing Potential
  - Get involved!
  - Attract new members & grow more diverse
  - Link with non-traditional partners
  - Learn from others' experiences
  - Disseminate promising practices & strategies

Stakeholder Involvement

- Consumer Groups
  - Need to better communicate
  - Inform about issues, listen & develop alliances for support

- Action Coalitions (ACs)
  - States taking a lead role in implementation of IOM-FON
  - Review & Know the Policy Process
  - What are the types of legislation affecting practice?
  - Understand the issues
  - Get to know your politicians and regulatory boards
  - Attend meetings, make visits, write letters

- Become advocates for the profession & take an active role
  - Support your professional nursing organization
  - Legislative & regulatory change takes funding (harsh reality of the landscape)
Legislative Strategy

In a Changing Political Landscape

Broader Implications for Policy

Scope of practice changes are among some of the most prevalent issues confronting state legislators and health care regulators

Policy Considerations

- Increased interest in legislative actions to expand/update SOP
- SOP changes should reflect the evolution of APNs' abilities
- Need a rational and effective approach to make decisions
- Public’s best interest/protection and ensure safety

Source: Source: NCSBN, n.d.

Strategic Planning

- Advocacy strategies & campaigns are crucial factors in the decisions about:
  - when to act, where to act, and how to act
  - What is wanted?
  - What are the goals you are attempting to achieve?
    - Must consider:
      - The authority to make it happen? (i.e., Who is the intended target audience?)
      - What messages do authorities need to hear to motivate them to act?
      - Who are the most effective individuals or groups to deliver those messages?
      - How to target audiences to hear those messages? (American Cancer Society, UICC Tobacco Control Strategy Planning Guide #3, 2006)


Actions to Influence Policy Outcomes

- Specific actions that an interest group can take to influence policy outcomes:
  - Mobilizing members
  - Writing press releases
  - Seeking elected officials' endorsements to achieve influence
  - Monitoring public opinion
  - Building coalitions
  - Citizen contact

- A combination of various tactics that complement each other and provide the best chance for the group to achieve its goals:
  - Inside lobbying (direct work with legislators and elected officials)
  - Outside lobbying (media and grassroots activities to place external pressure on political leaders)

Practical Implications

- To integrate evidence into policy, nurses must consider the evidence:
  - within the context it will be used
  - the setting in which policy is developed and implemented
  - the political, ideological, and economic factors (i.e., beliefs and values)
- Determine how and when evidence is used to influence decision-making capacity among policymakers


Policy Development & Formulation

- Evidence-informed decision-making is essential when addressing initiatives
- Relevant research published under the right political circumstances can advance policy issues to advance the policy agenda
- Specific strategies needed to influence the decision-making process


Considerations

- Policy is shaped by how policy makers learn about health care issues
- Perceived benefits of change shape decisions
  - affected by timing, economic costs and politics of the day
- Understanding past policy failures and successes
  - provide direction in planning for future implementation

Create opportunities for meaningful engagement that are:
- Patient-centered
- Student-centered
- Community-centered
- Consumer-centered
- Stakeholder-centered
- Legislature & Regulatory bodies
- Professional Organizations
- Health Systems & Insurance Groups

Need to know:
- How ideas are spread throughout systems
- How decisions are made
- How policy is developed
- How to build capacity & effectively use evidence to shape & change practice


Be the change you want to see in the world

Mahatma Gandhi
1869-1948

Conversation Circle