Professional Nursing Influence:
Advocating for Patients, Populations, and Policy

Presented by:

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Objectives

▶ **Objective 1**

Describe the definition of micro-social and macro-social attributes of nursing advocacy

▶ **Objective 2**

Apply the policy making process to advocacy efforts aimed at improving population health

Advocacy:
An Essential Role of Professional Nurses

Carole Liske PhD, MSN, RN

ΣΘΤ: STTI Call to Action
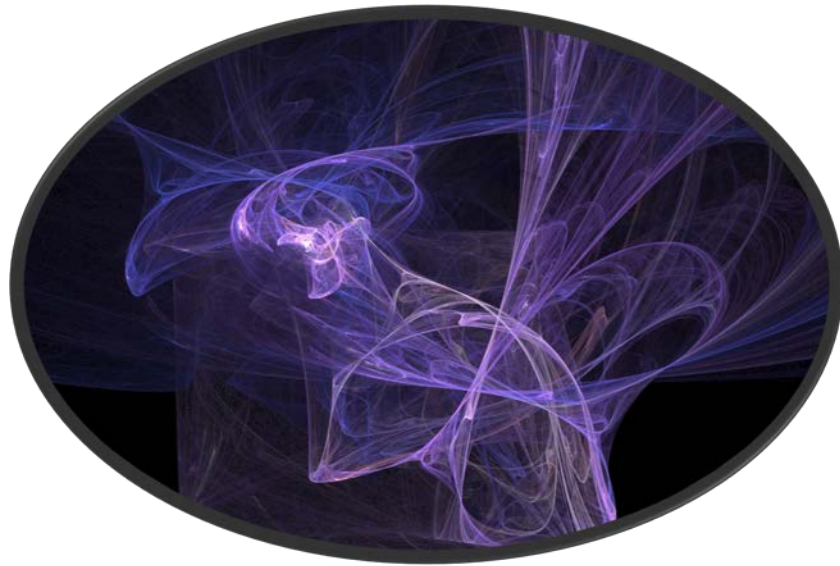

President Cathy Catrambone's Call to Action:
Influence through Advocacy

Advocacy

. . . .the essence of nursing's professional commitment to patients and communities

Theoretical & Conceptual Frameworks

Florence Nightingale identified the importance of advocating for vulnerable patients "to provide a safe and caring environment that promotes patient health and well being"

Definition Ambiguity
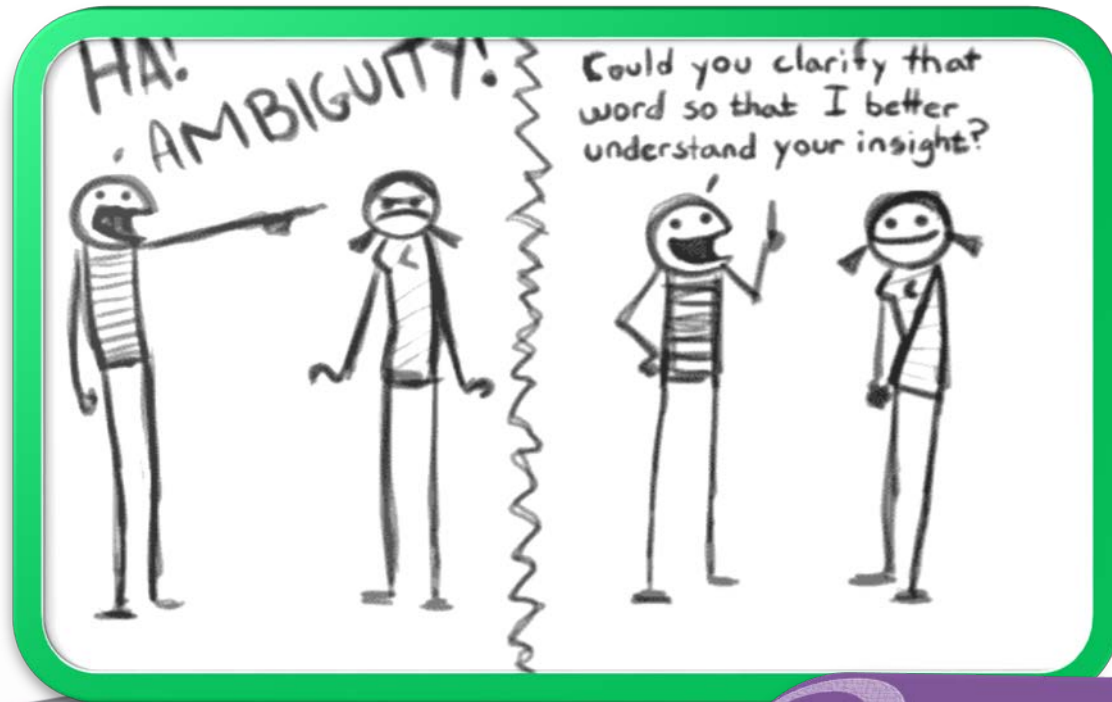
▶ **Philosophical Models**

➢ Commitment to serve (Bernal, 1992)

➢ Moral art of nursing (Curtain, 1979)

▶ **Spiritual Model**

➢ Virtue of nursing as a covenant of care (Bernal, 1992)

▶ **Ethical Models**

➢ Legal expectation (Gaylord & Grace, 1995)

➢ Ethic of practice > nurse as moral agent (Grace 2001)

➢ Patient-centeredness (Mallik, 1997)

Theoretical & Conceptual Frameworks

▶ **Functional & Operational Models**

➢ Addressed the dichotomy of the complexity and the simplicity of advocacy (Kohnke, 1990; Jezewski, 2007)

➢ A protective shield or "sphere of nursing advocacy" (Hanks, 2005, 2010)

▶ **Nursing Actions & Practice**

➢ "As a professional construct [of nursing] advocacy includes complex interaction between nurses, patients, professional colleagues, and the public" (Selanders & Crane, 2012, p 8)

➢ Categorization of advocacy actions within 6 QSEN skill domains (Hall, Moore, Barnsteiner, 2008)
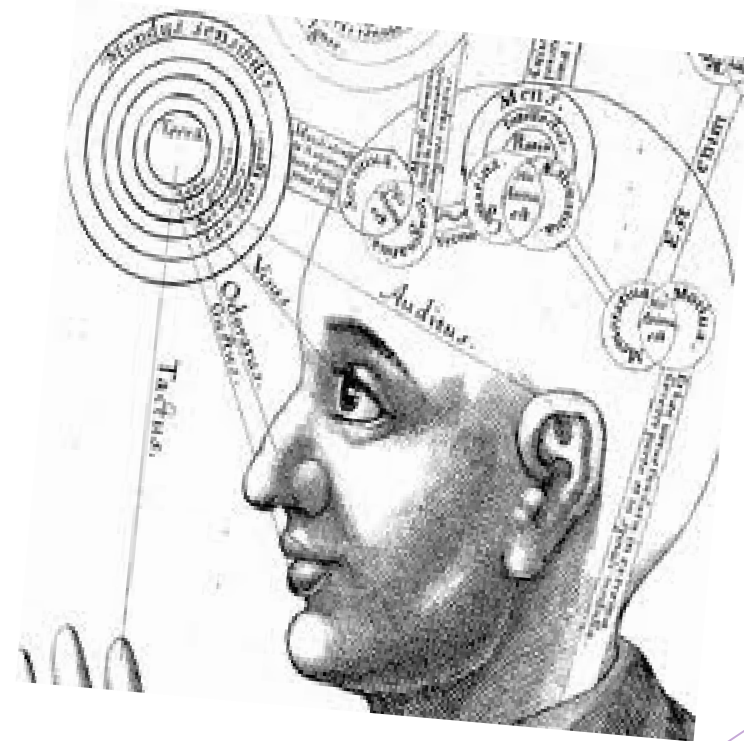
▶ **Multi-behavioral & Complex**

➢ Caring for Patients - Empathy & Protection
(Davoodvand, Abbaszadeh, Ahmadi, 2016; Tomaschewski-Barlem et al, 2015)

➢ Owing Colleagues - Mentoring/Professional Unions & Organizations (Curtain, 2015)

Theory of Reasoned Action and Planned Behavior

▶ Preeminent Psycho-social Model
  Ajzen & Fishbein (1969, 1980)

▶ Predictive Relationship between
  Attitudes & Behavior

Attitudes Inform Actions

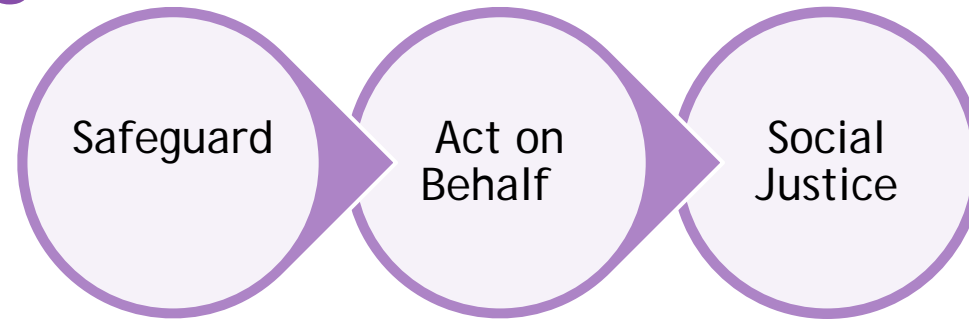# Mid-Range Theory of Patient Advocacy

► **3 Advocacy Attributes**

- ➤ Micro-social attributes
  - ✓ Safeguarding patient autonomy
  - ✓ Acting on behalf of patients

- ➤ Macro-social attribute
  - ✓ Championing social justice in the provision of healthcare

| Safeguard | Act on Behalf | Social Justice |

(Jezewski, 2007)

Attributes of Advocacy: Safeguarding Autonomy

▶ Two assumptions about individuals:

  ➢ Capable to act on their own behalf

  ➢ Want to act on their own behalf

Acting on Behalf of Patients

▶ Serve as patient representatives when patients
unable or unwilling to do so

▶ Protect patients & defend rights
if unable to defend themselves

(Bu, 2005)

Championing Social Justice in the Provision of Health Care

▶ Identified the dynamic involvement of nurses as social activists

➢ Advocate for change in socio-political issues such as health, education, and welfare

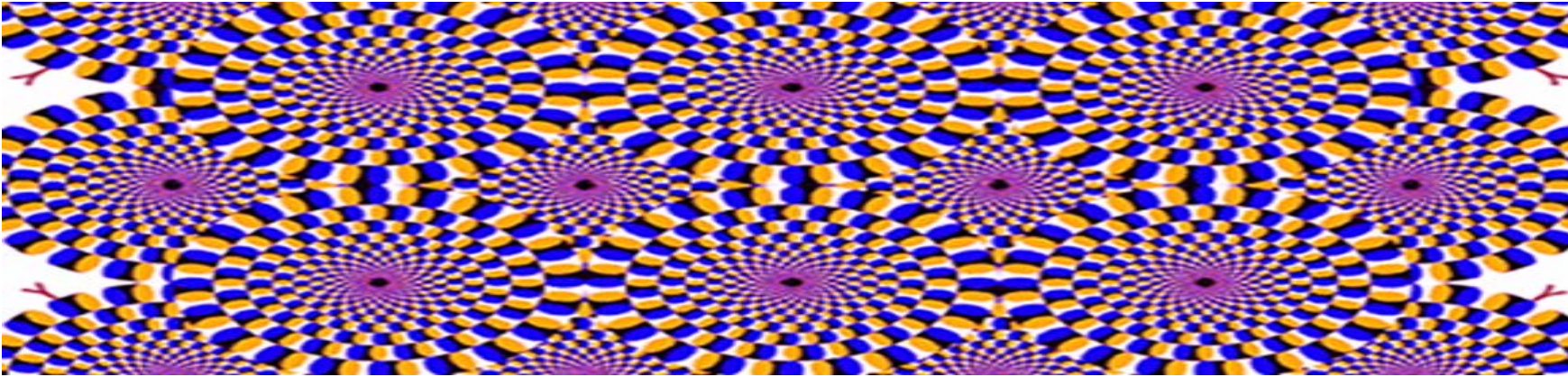➢ Promote health care improvement on behalf of communities, individuals, and society

(Bu, 2005; Bu & Jezewski, 2007)

Public Advocacy:
An Essential Role of Professional Nurses

Kathryn Osborne PhD, CNM, RN, FACM

The Public's Perception

- Gallup poll – *honesty* and *ethical standards*
  - Nurses rated the highest since 1999 (except 2001)
  - Currently 84% rate "very high" or "high"

But does the public really know what we do?

(Rifkin, 2014)

Nurse Advocacy

- ▶ **Point-of-care Nurses**

    Membership on committees, councils, and quality improvement teams

- ▶ **Nurse Managers**

    Adequate resources and a healthy work environment

- ▶ **Nurse Educators**

    Model and teach advocacy skills

Who is this advocacy for?

(Tomajan,2012)

Nurses as Advocates

▶ **Patient Advocacy**

Historical roots in nursing

It's what nurses do!

▶ **Policy Advocacy**

Advocating for good policy and for patients served

Nurses play an important role

  ➢ Highly trusted by policymakers

  ➢ Boots on the ground

STTI: Committed to Global Advocacy Efforts

- **Society Mission**

  "…advancing world health and celebrating
  nursing excellence in scholarship,
  leadership, and service"   (STTI, 2016)

- **Purpose**

  "…to improve the world's health through
  knowledge and scholarship"

  ➢ Members called upon to engage in education,
  clinical practice, and leadership and Inform
  local, national, & international health policy

  ➢ STTI promotes policy to improve public health

  ➢ STTI supports research to advance or improve
  health policy

Policy Priority: Global Access to Equitable, Affordable, Quality Health Services

► **Barriers to health care continue to exist across the globe**

  ➤ Inadequate resources and infrastructure to assure universal access
  ➤ Geographic distance/barriers
  ➤ Inequitable distribution of resources
  ➤ Rising healthcare costs
  ➤ Growing personal expenditures
  ➤ Aging populations
  ➤ Increased rates of chronic disease

(STTI, 2009)

STTI Promotes . . .

- Access to equitable, affordable, quality health services for all

- Efforts to achieve health systems in countries across the globe guided by the principles of universal coverage and access

- Developing health care systems that address social and environmental determinants of health

- Expanded use and coverage of services provided by nurses (including APRNs) to improve access to primary and community-based care

- Active involvement of nurses in the development of health policy and health system design

- Collaboration with other organizations at local, national and international levels to achieve goals

(STTI, 2009)

Advocacy involves….
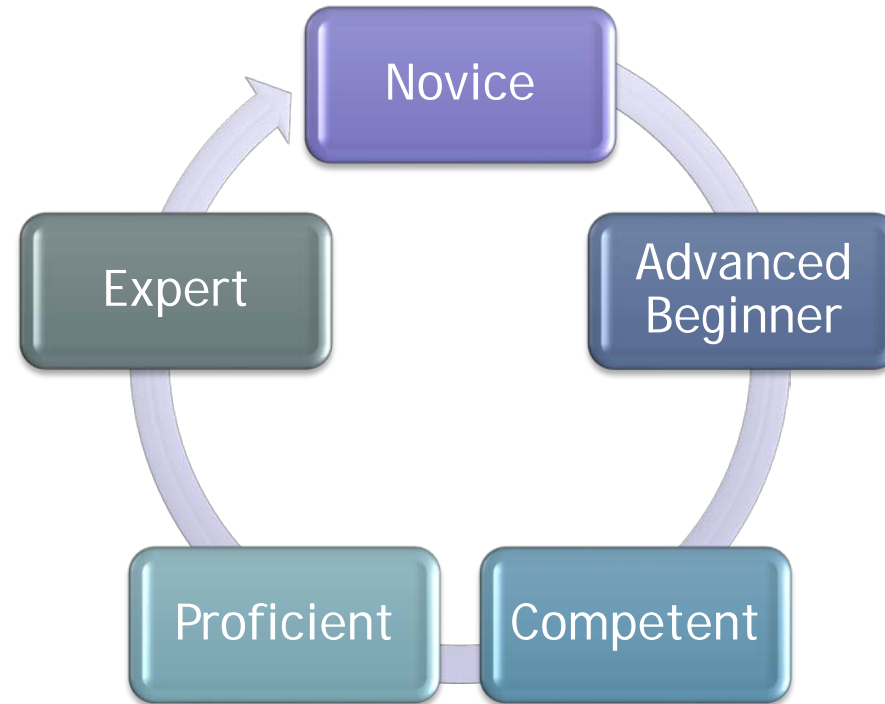
► Remaining aware of the issues

► VOTING!

► Implementing practice/policy that improves outcomes

► Supporting professional organizations

► Writing letters to legislators

► Making phone calls

► Visiting legislators

► Testifying before the legislature

► Serving on regulatory boards

► Running for office (and serving)

► Conducting research to inform health policy

Benner's Theory Applied to Advocacy Efforts

▶ **Experience**

➢ a prerequisite for the development of expert nursing skills

➢ leads to increased comfort and the development of expert advocacy skills

Novice

Advanced Beginner

Competent

Proficient

Expert

(Benner, 1984)

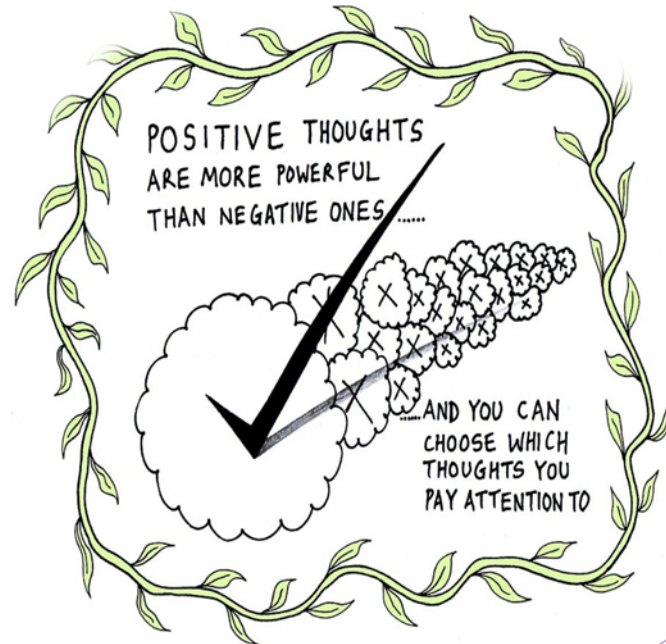# Thoughts & Feelings Influence Action

▶ **Theory of Reasoned Action and Planned Behavior**

- ➤ Examine your values
- ➤ Examine the values of others
- ➤ Deal with both sides of the issues
- ➤ Address opposing views

- ➤ To assist the patients we serve!!

POSITIVE THOUGHTS ARE MORE POWERFUL THAN NEGATIVE ONES.....

....AND YOU CAN CHOOSE WHICH THOUGHTS YOU PAY ATTENTION TO

Foreman http://www.mindmapinspirat

Novice to Expert

Novice:
Observe policy experts; remain aware of issues; vote

Advanced Beginner:
Implement sound policy/practice; support professional organizations

Competent:
Write letters to legislators; make phone calls; visit policy-makers

Proficient:
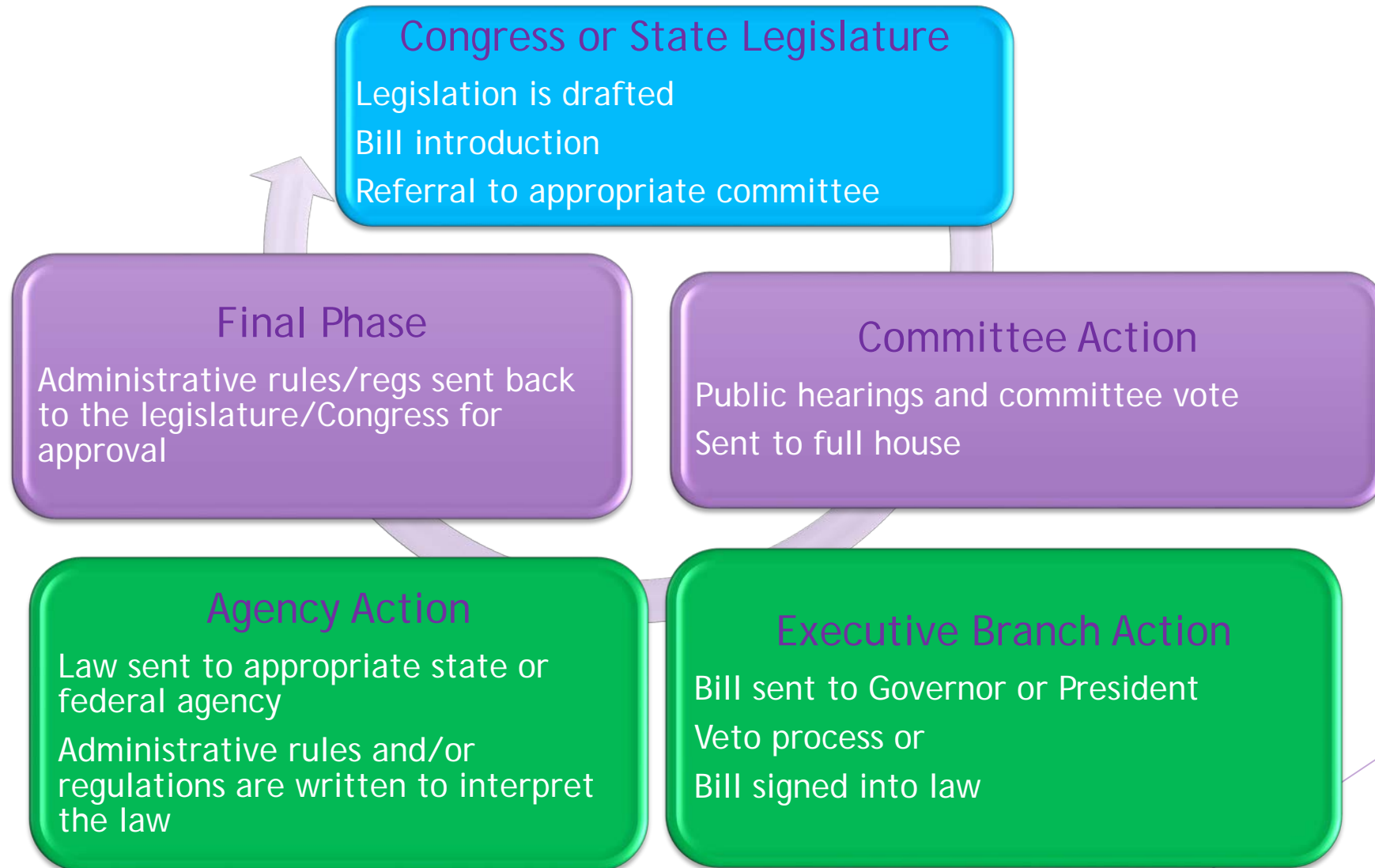Testify before legislative bodies; serve on regulatory boards

Expert:
Run for office; hold public office; conduct research that informs policy-making

Promoting a Positive Image as an Advocate

How a Bill Becomes Law

Congress or State Legislature

Legislation is drafted

Bill introduction

Referral to appropriate committee

Committee Action

Public hearings and committee vote

Sent to full house

Executive Branch Action

Bill sent to Governor or President

Veto process or

Bill signed into law

Agency Action

Law sent to appropriate state or federal agency

Administrative rules and/or regulations are written to interpret the law

Final Phase

Administrative rules/regs sent back to the legislature/Congress for approval
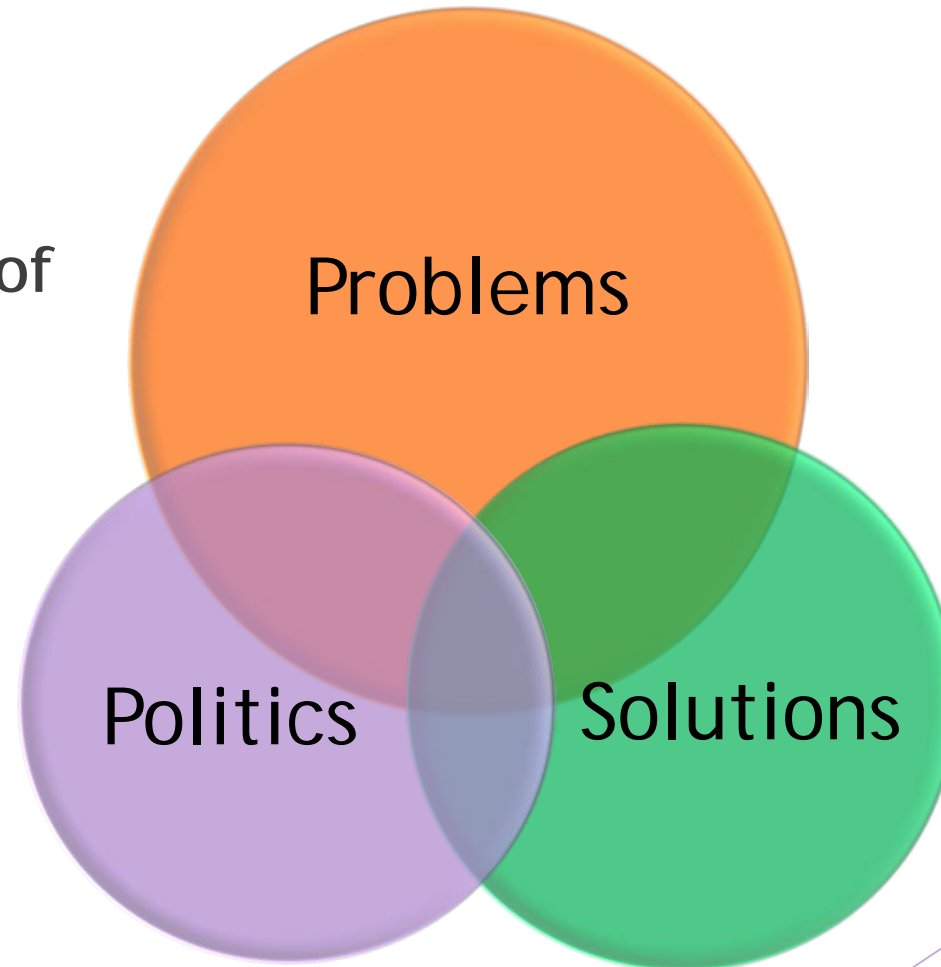
Four Stages of Policymaking

- **Agenda Setting**
  - Identifying a problem and bringing it to the attention of government

- **Legislation and Regulation**
  - Government's formal response to the problem

- **Policy/program Implementation**
  - Execution of programs aimed at solving the problem

- **Policy/program Evaluation**
  - Appraisal of program performance

(Milstead, 2008)

Agenda Setting

Agenda Setting:

A function of the confluence of three streams of activity

- Problems

- Possible Solutions

- Political circumstances

(Kingdon, 2011)

Translating Problems into Solutions

Problem:
Primary care workforce shortage

Solution:
Remove barriers to practice for licensed primary care providers

Politics:
Public opinion
Powerful interest groups
Policy-maker position

Nurses' Involvement in Changing Policy

- **Agenda Setting**
  - Identify health policy issues and bring them to the attention of your elected official
    - Issues that impact the regulation of nurses
    - Issues that impact patients served by nurses
- **Legislation and Regulation**
  - Get involved with the legislative process
    - Assist with drafting of legislation
    - Find bill sponsors
    - Visit/inform Congressional Representative/legislators
    - Testify at public hearings
    - Attend rule-making (agency) hearings (testify if possible)
- **Program Implementation and Evaluation**
  - Work with professional organizations and state agencies to implement new laws
  - Collect data to evaluate the effectiveness of new laws

Advocating for Policy Change

- Requires in-depth understanding of the issues AND the proposed policy change

  - Must be prepared to discuss the facts
  - Discussion must be based on reliable research (rather than opinion or rhetoric)
  - Must be prepared to succinctly articulate healthcare problems and proposed policy change

Finding Allies (Coalitions)

Groups with Shared Interest

STTI

STTI is committed to collaborating with other organizations at national and international levels to support efforts aimed at achieving goals

Recommendations for Educators

▶ **Professional Organization & Accreditation Standards**

  ➢ Assure Alignment with Program Outcomes

  ➢ Integrate Evidence-Based, Experiential Learning Strategies

▶ **Creative Learning Strategies** (undergraduate and graduate)

  ➢ Integrate Self-Reflective Learning

  ➢ Promote Social Engagement & Policy Action

  ➢ Teach Organizational & Healthcare Policy Development

  ➢ Assign Projects Requiring Stakeholder Collaboration

  ➢ Develop Formative & Summative Assessments of

     Advocacy Competencies

Recommendations for Theorists

- ▶ Address Continued Conceptual Ambiguity of Advocacy

- ▶ Explicate Advocacy Actions
  - ➢ Academic Settings - educate practitioners
  - ➢ Clinical Practice Settings – products of nursing education intersect with the consumers of health care

- ▶ Promote Development & Refinement of Advocacy Theories
  - ➢ Tested and Relevant to Clinical Practice
  - ➢ Enhance Professional Beliefs to Promote Intention to Act in Patient Advocate Role
  - ➢ Clinical practice settings

Recommendations for Leaders

▶ **Micro-social Actions**

➢ Mentor Advocacy Competency & Skills

➢ Promote Professional Development in Advocacy Role

➢ Implement Organizational Peer Review of Ethical Cases

➢ Protocol for Controversial Situations (Patient/MD/Family)

➢ Finding re: Full time/Part time Status

▶ **Macro-social Actions**

➢ Support Organizational & Healthcare Policy Development

➢ Collaborate with Community Stakeholders

Recommendations for Practice

- **Micro-social Actions**
  - Clarify Advocacy Competencies and Skills > Preceptor
  - Promote Personal Development in Advocacy Actions
  - Self Reflection of Ethical Cases to Enhance Advocacy Awareness

- **Micro-social Advocacy**
  - Mediate between Patient vs Family vs Physician
  - Address controversial situations

- **Macro-social Actions**
  - Engage in Organizational Policy Development
  - Investigate Community Engagement Opportunities
  - Collaborate with Community Stakeholders

Parting Thoughts

"Never underestimate the power of a small group of committed people to change the world. In fact, it is the only thing that ever has."

(Margaret Mead)

Never underestimate the power and influence of media in presenting policy to the public

THANK YOU
for
JOINING US!

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