

HIGHLIGHTS FROM THE HILL

Advocacy on Capitol Hill: Three Otorhinolaryngology-Head and Neck Nurses, Three Days, and Three Asks

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In the Spring of 2021, the Society of Otorhinolaryngology and Head-Neck Nurses (SOHN) was privileged to have three SOHN leaders attend the Nurse in Washington Internship (NIWI) organized by the Nursing Organizations Alliance. The objectives of NIWI are to help nurses:

- understand the specifics of the legislative process including advocacy, campaigning and giving testimony,
- understand the key issues impacting nursing and health care
- become an involved influencer at both the local and national level,
- communicate effectively with legislators and their staff to advance health care policy agenda items important to nurses,
- apply learnings by actively advocating on Capitol Hill

The three 2021 SOHN NIWI interns share their learnings and perspectives in this paper.

NIWI Intern: Vinciya Pandian

Introduction

The COVID-19 pandemic impacted healthcare industry stakeholders—patients, nurses, physicians, allied health professionals, hospital administrators, and many other healthcare disciplines. The workflow and care processes were disrupted posing a significant risk for patient safety and the safety of healthcare workers. Healthcare workers had to rapidly pivot to address the issues that arose with the spread of SARS-CoV2 viruses by using telehealth and other technology to provide care remotely and modified approaches to provide safe patient care. While healthcare professionals rose to the occasion, there were questions, uncertainties, and mistrust of healthcare professionals from the public. Attempts to manage critically ill patients with COVID-19 infection under dire circumstances have pushed nurses over the edge. Many nurses report feeling burnt out, fatigued, frustrated, and experiencing job dissatisfaction, increasing the rate of nurses leaving the profession and escalating the turnover rate. The nurse turnover rate dramatically increased

from 34.8% in 2020 to 40.4% in 2021, worsening the already existing nursing shortage in the United States (Labrague & de Los Santos, 2021; Lai et al., 2020; Lee & Lee, 2021; Xu et al., 2021; Zhang et al., 2021).

Before the pandemic, a nursing shortage was anticipated due to the aging population and many nurses were predicted to retire from the profession. The COVID-19 pandemic seems to have hastened the retirement dates for many. In addition, the number of patients with chronic and acute care needs is on the rise due to varying lifestyles and co-existing social determinants of health. When the market demand is high and the supply of a product or service is low, the prices to purchase the product or service typically increase. This translates to the workers providing the product or service receiving better compensation. Unfortunately, nurses have not been able to benefit from equitable pay compared to their counterpart healthcare disciplines.

The issues related to COVID-19, nursing shortage, and disgruntlement with pay lead to an inadequate number of nurses working on units or in clinical settings, resulting in bed or clinic closures or backfilling staffing with inadequately prepared nurses for the desired specialty need, which can be a risk to patient safety. This overall national nursing shortage crisis affects nursing specialties, such as otorhinolaryngology-head and neck nursing, which was already facing challenges in attracting younger or novice nurses into the specialty. A combination of the factors mentioned above could further decrease the otorhinolaryngology-head and neck nursing workforce leading to further job dissatisfaction and attrition. However, we could make a difference by raising our voices to the legislators.

The Society of Otorhinolaryngology-Head and Neck Nurses (SOHN) is the voice for ORL nurses. The society supports at least one nurse each year to attend the Nurse in Washington Internship (NIWI). In the Spring of 2021, the organization was privileged to have three SOHN leaders attend the NIWI to learn how to advocate for needed changes in healthcare policy and apply these learnings by actively advocating on Capitol Hill. Two of the attendees were provided scholarships to attend from SOHN and the third attendee earned a scholarship from the Nursing Organizations Alliance (NOA). NOA is the organization that sponsors the internship program each year.

The three ORL nurses spent three virtual days in Washington, D.C. learning how to advocate for three fundamental asks – 1) nursing workforce, 2) nurses are a vital voice, and 3) telehealth to increase access to care. The first two asks are aligned with the current needs of the nurses in the year 2021. The third ask was focused on the transformative use of telehealth to address the pre-existing opioid crisis.

Three Asks

The first ask about the nursing workforce focused on explaining to the legislative leaders how nurse workforce development through research and education will enable high-quality health care for tomorrow. The three interns were encouraged to request members of Congress to take action to advance health care in the United States (U.S.) and the development of the nursing

workforce through research funding. A vital part of the solution is the Title VIII nurse workforce funding in nursing research. Previously, Congress reauthorized this vital program as part of the Cares Act of 2021 to advance nursing education, nurse workforce diversity, increase capacity for basic nursing education and practice, geriatric education, and nursing faculty development. Congress funded Title VIII for the fiscal year 2021 at \$264.5 million which was less than 2.5% of all federal funding spent to support the development of needed health care professionals, physicians, nurses, occupational and physical therapists, and others (American Association of Colleges of Nursing, 2021). The National Institute of Nursing Research, part of the National Institute of Health, was appropriated \$175 million in the fiscal year 2021 to support research, which again is a very small amount considering nursing is the largest workforce in the healthcare industry (American Association of Colleges of Nursing, 2021). NIWI taught attendees how to ask a member of Congress and their staff to strengthen America's healthcare workforce by appropriating \$530 million for Title VIII nurse workforce development programs including nurse workforce diversity programs, and \$193 million to the National Institute of Nursing Research for the fiscal year 2022.

The second ask focused on increasing Congress members' awareness of the many roles of nurses in the U.S. today and advocating for them to hear the nurses' voices. More than four million nurses are professionally active in the United States including 3.95 million registered nurses and 728,900 licensed practical nurses (American Nurses Association, n.d.). According to the Bureau of Labor Statistics, nursing is the largest profession by population and one of the fastest-growing professions in the U.S. The Bureau predicts a 7% growth or 221,900 jobs by 2029 from the 3.3 million nurses in 2019 (American Association of Colleges of Nursing, 2020). Nurses work wherever care is needed, whether in hospitals, ambulatory settings, residential nursing care facilities, or non-traditional roles. In addition, advanced practice registered nurses are educationally equipped with master's or doctoral degrees to provide a full range of primary care and specialty care. Nurse educators and researchers help build the nursing workforce and develop evidence to guide nursing care and healthcare practices. NIWI encouraged the three interns to educate Congress members that nurses are experts, trusted healthcare professionals who are highly qualified to serve in governmental leadership and advisory roles, and as advisors in healthcare policy.

The third ask focused on the importance of telehealth. Through telehealth innovations, nurses can help address the compounding issues of the opioid public health crisis and COVID-19 pandemic through expanding access to treatment for persons with opioid use disorder. Nurses, including those in the otorhinolaryngology-head and neck nursing specialty, provide care for persons with opioid use disorder in various settings. The Substance Use-Disorder Prevention that Promotes Opioid Recovery and Treatment for Patients and Communities (SUPPORT) Act of 2018 expanded the authority for advanced

practice registered nurses (APRNs) to prescribe medication-assisted treatment for opioid use disorder to close the treatment gap. It allowed nurses to engage in care delivery via telehealth technology, access the services of expert specialists in every setting, and monitor and deliver care for patients at home. By approving coverage of telehealth, nurses may provide care for patients across state lines in the 33-nurse licensure compact states according to the National Council of State Boards of Nursing (2020) facilitating access to care. The SUPPORT Act was expected to expire at the time of this internship, so interns were encouraged to advocate for the renewal of that act and make it permanent. The ask was also to extend telehealth coverage to Medicare and Medicaid patients and expand authority for APRNs to prescribe medication-assisted treatment for opioid use disorder.

How To Advocate

1. Setting up the congressional meeting: To set up a congressional meeting, identify your local Congress member based on your home zip code; this may require a four-digit extension. Once local legislators are identified, obtain biographical information about the legislator, gather contact information, view committee assignments, identify specific staff members, bills related to nursing that they may have sponsored, and view any contributions from various political action committees (PACs or lobbying groups). This will help you prepare to engage in a meaningful conversation with the legislators. Meetings with the legislators can occur at their local office or the main office in Washington, D.C. If going to a meeting locally, call the office directly. If scheduling a meeting with the legislator at the Washington location, their official website will provide the phone number. When scheduling the meeting, identify the appropriate legislative staff member, usually a healthcare specialist. After identifying the right person and making an appointment, follow up the week before or the day before the appointment to ensure they are still available. The assumption is that the meeting will be with the congressman or the senator, but many times the meeting may be delegated to a staff member.
2. Meeting with the congressional staff: While this may be obvious, it is very important to arrive for the meeting at least 30 minutes early and that your dress is professional. There may be security checks that can be time-consuming. If the meeting is delegated to a staff member, keep in mind they are qualified and highly educated individuals who work tremendously hard to communicate the correct information to their legislator. The staff members are the gatekeepers and vitally important. Often the staff members have more time to listen to your requests and they may be the staff expert in healthcare issues.

3. Content to be communicated: It is crucial to have in-depth knowledge of the issues being raised. It is essential to be prepared to make your points clear and concise by structuring your argument and including the appropriate statistics and information. It is important to share how this ask is personal to you by sharing real-life examples or situations. These stories from your experience help create a more memorable picture and demonstrate your passion.
4. Post-meeting obligations: When finishing the conversation, it is imperative to thank them, and it is essential to follow up with an email, phone call, or written mail to indicate how much we appreciate their time no matter how the meeting went. When sending a follow-up email or calling them, include information regarding the asks to remind them who you are and what your asks were. No matter the outcome of the meeting, you need to be assured that at least you did your part in increasing the awareness of your concerns and passions.

NIWI Intern: Suzanne Beshore

I attended my first SOHN Health Policy and Advocacy Committee meeting at the Annual Congress in San Francisco in 2011. It was there I first learned about NIWI. Ten years later, I was finally able to attend this important event. The speakers at NIWI are all experts in the policy arena. They make it sound easy but it does require a level of commitment and a need to venture outside your comfort zone if you truly want to affect change.

Scott Palmer, B.S., MAIS, was the past Director of Communications for the Oregon Nurses Association and the National Federation of Nurses, and he is currently working for a wide range of nursing associations as a communications consultant specializing in training nurses in advocacy and lobbying. The focus of his presentation at the 2021 NIWI was centered on advocacy and relationship building. He pointed out that lawmakers are, for the most part, not content experts in the realm of health care; they rely on the expertise of real content experts to advise them and provide context for the laws they are considering. They want to be effective in their roles, and to do so, they must form partnerships with trusted advisors. As members of the largest segment of healthcare professionals in the U.S. and the most trusted profession (Saad, 2022), nurses must make their voices heard by these legislators. The decisions they make can directly affect the way we practice nursing and our ability to care for our patients. If we are not talking to our lawmakers, somebody else is. And they are looking out for their interests, not ours. He taught us to ask “the Magic If”: If I were this legislator, what would I need to know, believe, or think to get behind a particular piece of legislation or cause? This is where nurse advocacy comes in.

According to Mr. Palmer, there are four basic modes of advocacy that we can employ:

- Informing: outreach via phone call, letter, email, text, social media post, meetings, or by presentation or report.

- **Listening:** seeking to understand elected officials' priorities and perspectives and finding common ground through participation in meetings (one-on-one, or community setting), focus groups or surveys; or receiving feedback or education about your activities.
- **Co-creating:** working together to develop, manage and implement advocacy/policy; attending gatherings together to advance a common agenda; assuming roles or inviting participation on committees, advisory councils, or as guest speakers; or providing letters of support or endorsement.
- **Relationship building:** the over-arching principle that encompasses the other three modes; an essential building block of effective advocacy for change. Begin by finding out who your elected leaders are and get connected with them, use communication techniques such as phone, letter, email, in-person meetings, and following and engaging with them on social media.

An essential concept that Mr. Palmer taught us, and that resonated with me, was the idea that people are more persuaded by people they like and/or trust; people that are like them or they can relate to; and people with which they have a give-and-take relationship or perhaps owe a favor. You must make a serious effort to search for the common ground between the two of you, even if you have significant ideological differences. You may not always be able to convince someone to take your position. However, if you are diligent in your relationship building, you may be able to convince them to want to try.

Jo Ann Webb, MHA, RN, FAAN, served for twenty years as the Vice President of Federal Relations and Policy for the American Organization for Nursing Leadership (AONL) and was the chief lobbyist and federal policy expert for the organization. In her presentation, she included a quote by Thomas Jefferson; "We in America do not have government by the majority. We have government by the majority who participate." She spoke of the impact of the pandemic on our healthcare system, and how it stressed and changed our system of healthcare delivery, likely forever. She spoke of the challenges that the nursing profession is facing —mental health concerns, nursing shortages, rising acuity levels, resources for novice nursing staff, how to keep nurses at the bedside, and finding a way back to "normal". To meet these many challenges, nurses must engage and participate in shaping the policy decisions that will impact their future.

Ms. Webb's presentation was a bit of a "call to arms" for nurses and the "weapon" she advocates is the vital voice of nurses. She believes nurses must be strongly advocating for increased funding aimed at education and shoring up the nursing workforce and supporting nursing research.

Before the pandemic hit the United States, only 22 of our 50 states had passed legislation allowing Nurse Practitioners (NPs) full practice authority. The other 28 required some degree of physician oversight, impeding NP's ability to provide care. As the pandemic ravaged our country, accessing care

promptly and reducing exposure became critical. To meet the increasing demand for care, the federal government temporarily relaxed many of the regulatory restrictions in place across the country. These included restrictions that were hindering NPs from providing much-needed care, allowing them to maximize their skillsets without redundant oversight slowing the process down. Ms. Webb argued that these emergency policy changes resulted in more nurses being able to practice to the full extent of their education. The ability for nurses to practice to the full extent of their education must not be allowed to sunset but instead become permanent in all 50 states to improve access to health care. She reminded us that advocating for advancements in our profession is an important part of our job as nurses, and should be incorporated into the nursing profession narrative.

Gladys M. Campbell, MSN, RN, NC-BC, FAAN, is the principal and leader of Campbell Coaching and Consulting, a business focused on advancing leadership skills and outcomes in the complex healthcare arena. She believes that leadership begins with understanding the “why”. So, why should nurses care about health care policy? Ms. Campbell taught that involvement by every nurse in health care policy is an obligation of our licensure and part of the American Nurses Association Code of Ethics. More than just a job, nursing is a profession; and our involvement with policymakers is a way that we can represent our profession as trustworthy, caring, ethical, moral, and responsive to society’s desire for an effective, fair, and equitable healthcare system.

Ms. Campbell explained that law-making is a complicated process that can bring people together or drive them apart. As a bill makes its way through various committees, the House of Representatives, the Senate, and eventually to the White House, each step affords an opportunity to influence the outcome. By proactively building relationships with lawmakers, following the issues, and utilizing avenues of communication available to us (phone calls, emails, letters, meetings/gatherings, or even testifying), we can more effectively register our support or concerns for a bill, which could ultimately influence the eventual outcome!

When hoping to influence a lawmaker, it is important to know who you are talking to, their special interests and concerns, how they voted in the past; and the best method to concisely make your point to them. Ms. Campbell shared with us her “Recipe for Testimony”:

- Claim your expertise and authority
- Clearly state your “ask”
- Provide an emotional hook—a story that justifies your position
- Only after they are hooked, provide your supporting data
- Restate your ask
- Thank them for listening

Your ability to influence is strongly enhanced when a positive relationship already exists. Ms. Campbell urges all nurses to “find and use their voice for civic good so that we may honor our licenses, which are a statement of public trust”.

Other ways to get involved include keeping informed of issues, donating to a cause or candidate, posting signs or bumper stickers, fundraising, campaigning, voting, or volunteering as a poll watcher or poll worker. If you are ready to jump into the policy arena with both feet, consider running for public office yourself. Several very effective lawmakers are also registered nurses!

These tips are my takeaways from attending the 2021 NIWI. If you would like to know more about the NIWI program, visit the NIWI website. Please consider attending the program yourself and help jumpstart your “journey of influence”!!

NIWI Intern: Anne Deleo

I recently joined SOHN’s Health Policy and Advocacy (HPAC) to learn more about how nurses can be more involved in health policy. The opportunity to apply for the NOA scholarship to attend NIWI was brought to my attention by an email from SOHN headquarters.

The three speakers Gladys Campbell, Jo Ann K. Webb, and Scott Palmer provided NIWI attendees with the tools to understand the legislative process, advocacy, lobbying, campaigning, and giving testimony. They started with the basics, identifying your elected representatives, learning about them, and how to schedule the meetings to discuss healthcare topics relevant to your state and the nursing profession.

With the faculty members’ guidance, we learned that nurses could influence legislation at the local and national levels. The most recent Gallup poll reported that nurses in the U.S. are considered the most honest and ethical profession (Saad, 2022). Nursing is the largest healthcare profession by population with 4.3 million registered nurses (American Nurses Association, n.d.), and these numbers are predicted to grow by 9% or 276,800 new jobs between 2020 – 2030 (Bureau of Labor Statistics, U.S. Department of Labor, 2022). Imagine the potential influence we hold if all nurses were politically active.

Attending NIWI allowed the opportunity to set up meetings with our local legislators and provided an agenda and the three asks which were presented earlier. Together with other nurses from Pennsylvania, we met with our local representatives via Zoom meetings. The Pennsylvania NIWI attendees included an emergency room nurse from Pittsburgh, a professor of nursing from Ursinus University, and me, an advanced practice provider in pediatric otolaryngology. With our diverse backgrounds, we were confident we could discuss the three Asks with the legislative staff members.

As a group, we set up our appointments with the state representatives via email knowing the meetings would be via a virtual meeting (Zoom). When meeting with the legislative staff members, we shared our individual stories and professional backgrounds establishing our credibility, and went on to address the “three asks”. We asked for funding for nursing education stressing that

this is a priority to support our nursing educators and clinic nurse educators and allow nursing programs to grow particularly important considering the nursing shortage that the U.S. is facing. We emphasized the mental health crisis in the US and the importance of telemedicine to meet the needs of patients. Two out of the three state representatives were familiar with our agenda items and responded with great interest. The last representative was not aware of Title VIII nurse workforce development programs or the telehealth concerns. However, the staff member was open and receptive to learning and asked many questions to report back to our representative. It is interesting to note that all the staff members that we met with raised concerns about nurse burnout and COVID. Overall, we were pleased with the interaction both with the probing questions that we received and the positive feedback from the legislative staff.

Attending NIWI virtual conference was an eye-opening experience in how our voices do matter and can influence many legislative outcomes. Nurses are considered to be the most honest and ethical profession in the U.S. (Saad, 2022) combined with more than 4 million professionally active nurses in this country, the voice of nurses is loud and credible. There is power in numbers and power in our credibility. This powerful combination can influence change in policies that impact nursing. Our voice does matter.

While the 2021 NIWI was held virtually, typically NIWI is held annually in the spring in Alexandria, Virginia. NOA supports a NIWI Scholarship and more information is available on the NIWI website. I am thankful to have had the opportunity to attend and encourage each of you to take a moment and sign up on the conference interest list to receive alerts so you won't miss a deadline.

Conclusion

The need for nurses to advocate for our nursing profession and Otorhinolaryngology-Head and Neck Nursing has never been greater. If we do not stand up for ourselves and our interests, who will? We encourage every SOHN member to consider what role they can play in strengthening their advocacy for our specialty and the nursing profession. There is power in numbers, and the numbers are on our side. To successfully advocate for the future of nursing, we must have a strong and united nursing voice.

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