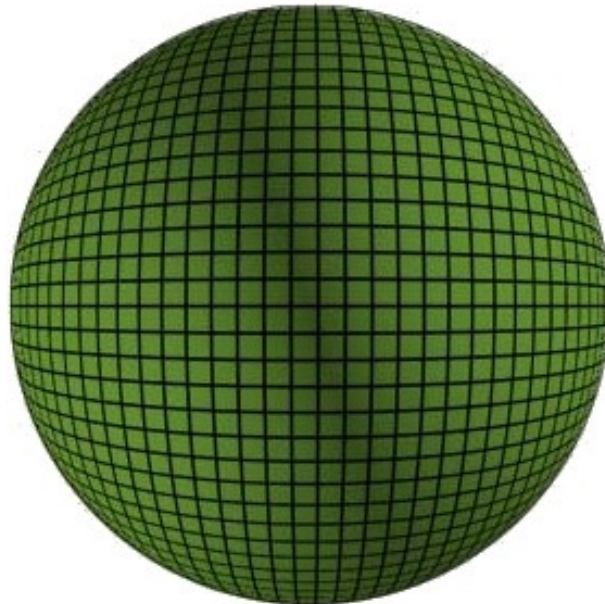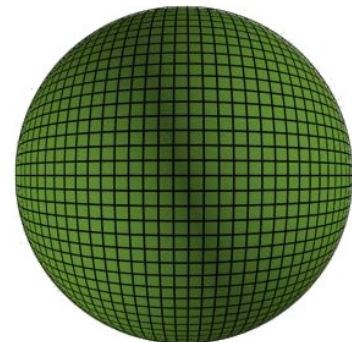# Influencing Health Care Policy

NURSING 4111:

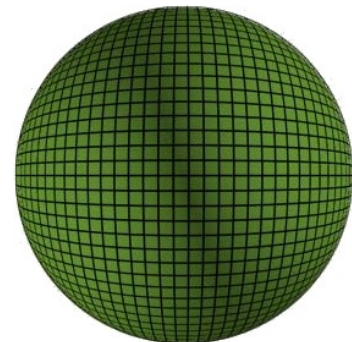### How Nurses Can Change Health Care Policy

Health Policy Development

Includes Four Developmental Components:

* **Policy Process =** government sets public policy: Phases: formulation, implementation, evaluation

* **Policy Reform =** changes in programs & practices – reforming priorities, institutions, organizations, financing, regulatory environment

* **Policy Environment =** the arena the process takes place in, government, media, public

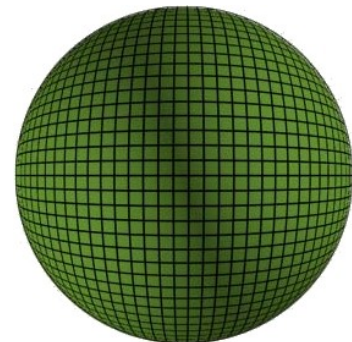* **Policy Makers =** major players or key stakeholders in policy environment

How Nursing Fits the Process

* **Policy Process –** Nurses in government positions; governing org'ns develop dialogue with govt; research into key issues

* **Policy Reform –** keep informed & involved and participate in lobbying, decisions, polls, mtgs

* **Policy Environment –** Visibility, media, let Position be known, Publish, Be involved

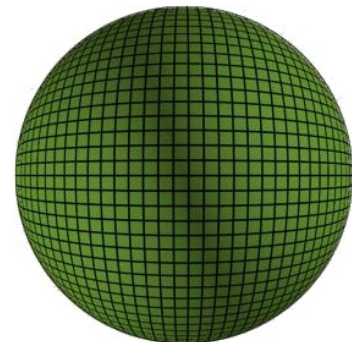* **Policy Makers –** Be part of this group, Be seen as credible, Show value of nurses' contribution

Rationalist Approach

* Based on scientific thought of 1960s and 1970s

* Example: Management by objectives (MBO)

* Start with objectives, work outwards sans bias

* Centralized Policy Development, "Top Down"

* Nil to little input from key stakeholders

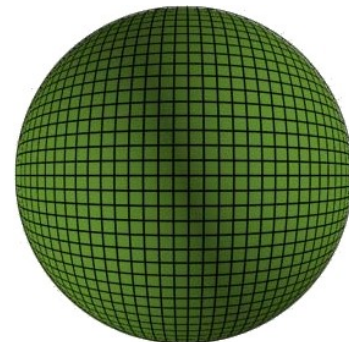* Good when little infrastructure in place, e.g. Education, Organized labour, professional groups

Incrementalist Approach

* Begins with what currently exists and where to go from there

* Less mechanical than rationalist approach

* More interactional between players and interests

* High level of consultation with stakeholders

*

* Nurses should be highly involved in BOTH rationalist and incrementalist approaches
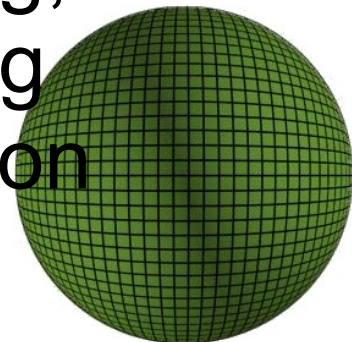
Nurses should be involved.....

- **In Health Policy –** policies developed within the health sector with government, etc.

- **In Policies relevant to Health – p**olicies that impact on health and health services, e.g. Housing, Food and Tobacco Industries, public Water supply, Traffic Control, Social Security and the Social determinants of Health in general
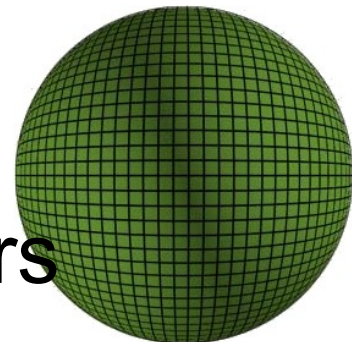
How Nurses can get Involved

* Keep up to date on developments

* Write and publish

* Join special interest organizations

* Know who the key players are

* Know the key nursing positions and networks

* Identify nurses in influential positions outside of nursing

* Communicate your position through lobbying, committees or boards, submissions, meeting with influential people, ongoing representation on policy-making
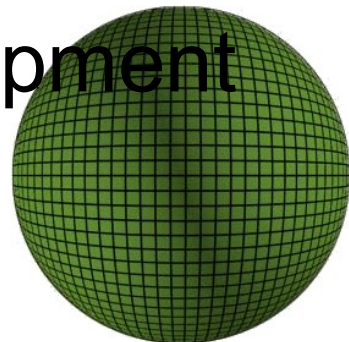
National Nursing Organizations

* Should lobby to ensure inclusion of nurses
* Position the organization as an expert resource
* Be alert to health and public issues
* Strategically engage in policy process involvement
* Form strategic alliances with other organizations
* Provide clear public, written statements on position
* Unify position with other nursing organizations
* Educate members about policy issues
* Prepare young nurses for leadership
* Appoint expert, prepared, articulate speakers

Effective Preparation

* Nurses and students need to be taught to develop:

* Confidence in public speaking

* Skill in engaging in challenging discussions

* To defend positions publicly

* Question the opinions and statements of others

* Be articulate and effective leaders

* Accurately educate others about the issues
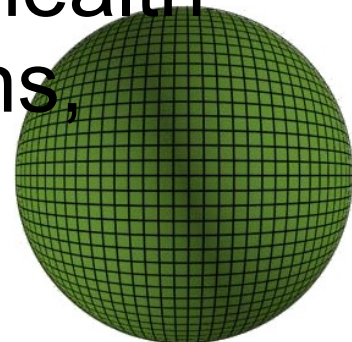
* Lobbying, change agent, community development skills

New Models of Care

* Need to recognize the need for change

* Vision for Renewal

* Develop Champions for Change

* Set up supportive structures and activities

* Interdisciplinary Collaboration is important, especially with new Primary Health Care model

* Canadian public would prefer that doctors work as part of a team – in hospital and community

* Primary Health Care Transition Fund (2000) was created to address this issue and influence policy initiatives

Citizen's Visions of PHC

* Coverage of Drugs, Dental, Preventative, Rehab
* Single, coordinated point of service delivery in one location with collaborative team services
* Holistic, responsive, high quality, client focused
* 24/7 access
* Readily available information to understand service availability and to support self-care
* Would welcome seeing a nurse for routine health services, ear/throat infections, immunizations, manage diabetes, monitor blood pressure, check wound healing, etc.

Professional Models of Care

* **Professional Contact Model –** include private practice doctors, physiotherapists, chiropractors, optometrists, psychologists and associated nurses

* **Professional Co-ordination Model –** coordinates a range of health services, to facilitate continuity of care. Primary providers = doctors and nurses with blended funding mechanisms

* **Integrated Community Model –** promotes continuity and coordination of services across disciplines through networks 24/7

* **Non-integrated Community Model –** community based care without integration or much collaboration