



**NATIONAL
NURSE-LED CARE
CONSORTIUM**
a PHMC affiliate

Nurse-Led Advocacy Learning Collaborative Series

Session 1

April 14, 2022



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CONSORTIUM**
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The National Nurse-Led Care Consortium (NNCC) is a non-profit membership organization that supports nurse-led care and nurses at the front lines of care.

NNCC supports comprehensive, community-based primary care and public health nursing through policy and advocacy, program development and management, technical assistance and support, and direct, nurse-led healthcare services.

Learn more at NurseLedCare.org

COVID Vaccine Confidence Project



Q: Can I get the vaccine if I don't have insurance?

A: Yes, Covid-19 vaccines are 100% free in the United States.

- Empower nurses with information to engage care teams and communities about COVID-19 vaccines.
- Provide learning opportunities to share up-to-date guidance, support engagement among nursing colleagues, and strengthen the nursing role.
- Amplify the nursing voice by featuring nurse champions through our podcast and other media outlets.

Learn more at NurseLedCare.org

ABOUT THE SERIES

- Free 4-part learning collaborative series for nurses on advancing health equity.
- Sessions will be held biweekly on **Thursdays 1:00PM-2:30PM ET**
- 1.5 CEU will be offered for each session **attended live**. An evaluation will be sent out to attendees following each session, complete the brief questionnaire to receive CEU credit. Learn more [here](#). *Please allow up to 4 weeks for receiving your certificate.*

This project was funded in part by a cooperative agreement with the Centers for Disease Control and Prevention (grant number NU50CK000580). The Centers for Disease Control and Prevention is an agency within the Department of Health and Human Services (HHS). The contents of this resource center do not necessarily represent the policy of CDC or HHS, and should not be considered an endorsement by the Federal Government.

SERIES COMMUNICATIONS

- Session materials – slides, handouts, and any other resources shared during the series will be provided via a good drive shared out following this session.
- Session details will also be posted to our series page.

SCHEDULE

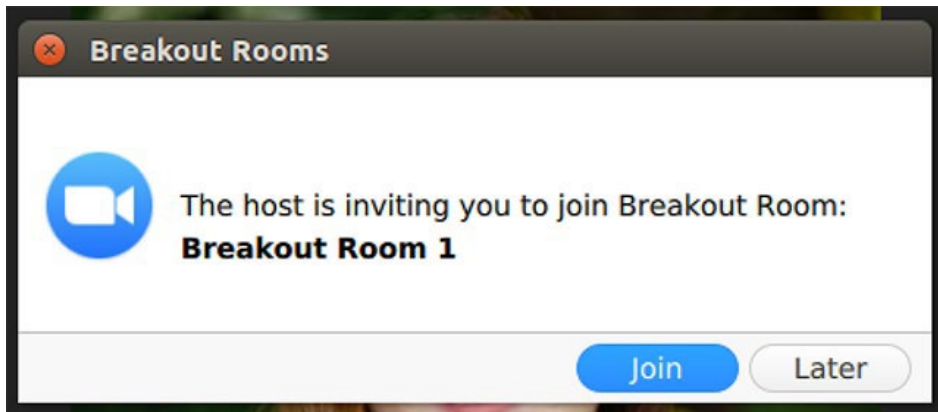
All sessions will take place via Zoom. Please use the link provided to you via Zoom once registering.

- **Session 1: April 14** → Nurses' role in policy and the legislative process
- **Session 2: April 28** → Grassroots Advocacy: advocating for patients at the local level and testifying/informing stakeholders
- **Session 3: May 12** → Coalition and network building
- **Session 4: May 26** → Systems Change Through Action (e.g. international trainings, campaigns, areas focusing speaker's work)

EXPECTATIONS FOR THE SERIES

- To complete the pre-series survey and be willing to participate in post-series surveys.
- We strongly encourage you to attend as many sessions of the series as you are able.
- Through this series, we intend to create a space where we can facilitate supportive conversations and learning across the nurse-advocacy community.

ZOOM ETIQUETTE



Zoom Group Chat

From Me to Everyone:
Hi everyone! We'll be getting started soon.

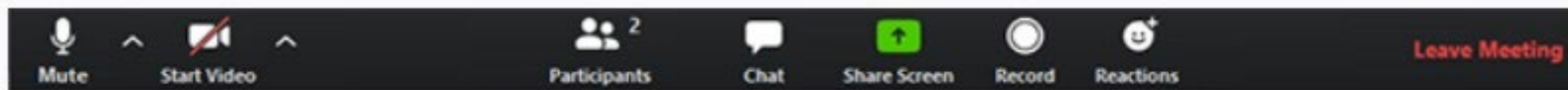
From Kevin to Everyone:
Great!
Can't wait!

To: Everyone ▾

File ⋮

Type message here...

1. Share your video during breakouts.
2. Snacks and lunch are okay!
3. Take breaks when you need
4. Respond and participate to breakout discussions.



AGENDA

- **NNCC Welcome/introduction: 5 minutes**
- **Speaker Introduction to Content: 5 minutes**
 - **Breakout discussion: 20 minutes**
 - **Report back: 10 minutes**
- **Didactic Presentation: 40 Minutes**
- **Q+A/NNCC Wrap-up: 10 minutes**

SPEAKER INTRODUCTION

- Lacey is full time pediatric nurse practitioner.
- Prior to returning to patient care in 2020, she was an Associate Teaching Professor at BYU, where she also received her undergraduate degree in Nursing.
- While at BYU, Lacey collaborated with immunization specialists across the country to improve vaccine uptake.
- Lacey was inducted as a Fellow in the American Academy of Nurse Practitioners and honored with the Daisy Nurse Leader Award in Policy.



Lacey Eden
MS, FNP-C



Steps Toward Change to Promote Child Health Advocacy:

A Service Learning Experience

Lacey Eden, DNP, NP-C & Karlen E. Luthy, DNP

Learning Outcomes

- ❑ Explain the political procedures for passing legislation
- ❑ Outline steps for successful drafting and lobbying of a bill and how to involve student nurses in the process.
- ❑ Empower nurses across the nation to be CHANGE agents and advocate for their patients.

“Why do nurses have to know this stuff?”

- ❑ Nurses are patient advocates
- ❑ Many aspects of health care are regulated through legislation
- ❑ Political activism advances the nursing profession
- ❑ Nurses already possess the skills for political activism

Nurses and political advocacy

- ❑ Skills and experience (Woodward, Smart, & Benavides-Vaello, 2016)
 - ❑ Conflict resolution
 - ❑ Problem – solving skills
 - ❑ Teamwork

- ❑ Barriers (Buck-McFadyen & MacDonnell, 2017)
 - ❑ Time constraints
 - ❑ Frustration
 - ❑ Burnout
 - ❑ Lack of understanding of political procedures (Lewinski & Simmons, 2018)

BREAKOUT QUESTIONS

- ❓ What do you find is your biggest barrier for political activism?
- ❓ What policies, in your state, would you like to change and/or implement?
- ❓ Have you faced any barriers in the process of implementing policy change?

How a Bill becomes a Law

- ❑ Idea
- ❑ Bill Created
- ❑ Bill Drafting & Approval
 - ❑ Bill is numbered



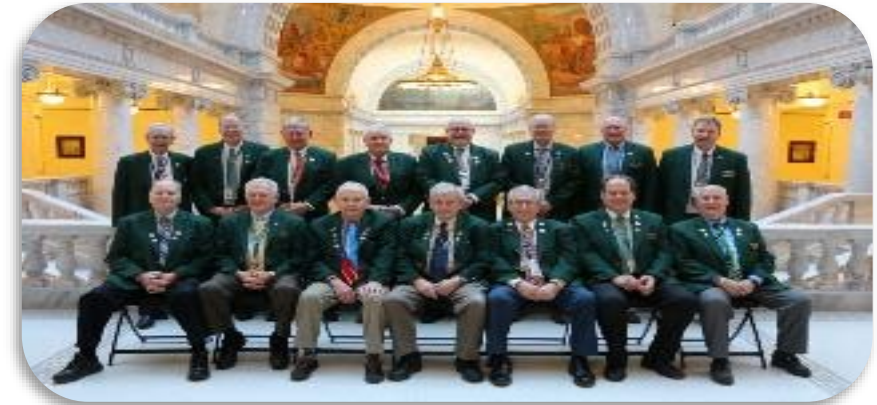
How a Bill becomes a Law

- ❑ The bill is read 3 separate times
 - ❑ First reading
 - ❑ Decision of where the bill should be sent
 - ❑ Standing committee



How a Bill becomes a Law

- ❑ Second reading
 - ❑ Lobbying
 - ❑ Letter writing
- ❑ Third reading



How a Bill becomes a Law

- ❑ If amendments or substitutes are made:
 - ❑ <15 words on House floor
 - ❑ <10 words on Senate floor
 - ❑ Must be relevant to original bill
 - ❑ Protected

- ❑ Final Passage
 - ❑ Bill must pass by a constitutional majority
 - ❑ 38 aye votes in the House
 - ❑ 15 aye votes in the Senate



How a Bill becomes a Law

- ❑ The bill must pass in both houses
 - ❑ After it passes in one house, it gets sent to the other house
 - ❑ It goes through the same process
 - ❑ Legislator will find a sponsor in the opposite house
- ❑ If either house amends a bill, the bill is sent back to the first house
- ❑ If both houses do not agree on the amendment, the bill is sent back and the amendment is withdrawn



How a Bill becomes a Law

- ❓ Enrolling Process
- ❓ Delivered to Governor
 - ❓ After enrolling, bill is sent back to the House/Senate
 - ❓ House/Senate deliver enrolled bills to the governor for action.



How a Bill becomes a Law

- ☐ If the governor vetoes a bill:
 - ☐ Legislature can override the governor's veto
 - ☐ 2/3 of the House/Senate must be in favor to assemble a veto override session (must begin within 60 days of adjournment)
- ☐ 2/3 vote required in both houses for override
- ☐ New laws become effective 60 days after adjournment, unless otherwise stated in the bill.



Be the CHANGE

- ❑ C: Collect
- ❑ H: Hinge
- ❑ A: Associations
- ❑ N: Negotiate
- ❑ G: Gather
- ❑ E: Expertise



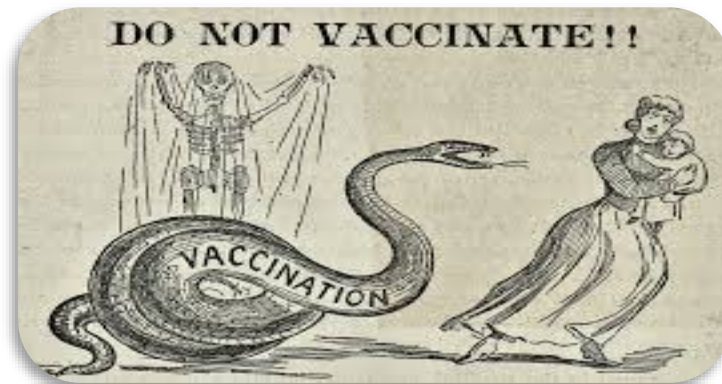
C: Collect Data

- ❑ Know the facts
- ❑ Student nurses help gather the facts

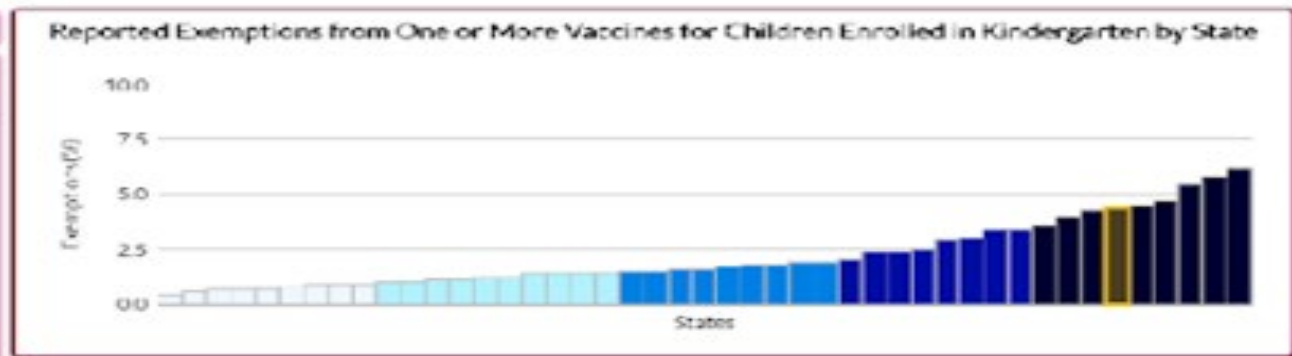
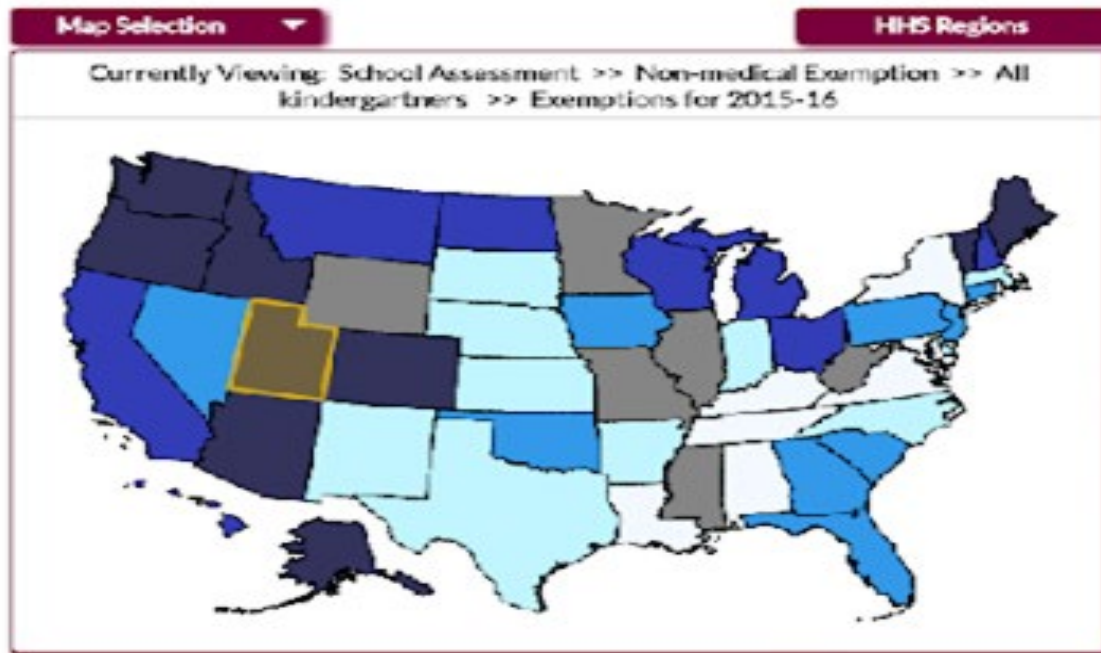


Community Immunity

- ❓ “The data shows that roughly one out of every four schools fail to meet the "herd immunity" rate for measles (MMR) or whooping cough (DTaP). A school has to have at least 92 percent in either category to protect all students.”



Estimated number and percentage of children enrolled in kindergarten with an exemption from one or more vaccines by State and the United States, School Vaccination Assessment Report, 2015-16 school year



State Table or National Median

Reported Exemptions from One or More Vaccines for Children Enrolled in Kindergarten

| States | N | Survey Type | % | Footnotes |
|-----------------|---------|--|-----|-----------|
| ● Utah | 50,114 | Census response (private) | 4.4 | - |
| ● Vermont | 5,366 | Census | 5.5 | |
| ○ Virginia | 100,074 | Stratified 2- stage cluster sample | 0.9 | T |
| ● Washington | 84,492 | Census | 3.6 | |
| ● West Virginia | 21,333 | Voluntary response | NA | 1-1 |
| ● Wisconsin | 71,270 | Stratified 2- stage cluster sample | 2.9 | |
| ● Wyoming | 7,825 | Voluntary response | NA | 5-11 |

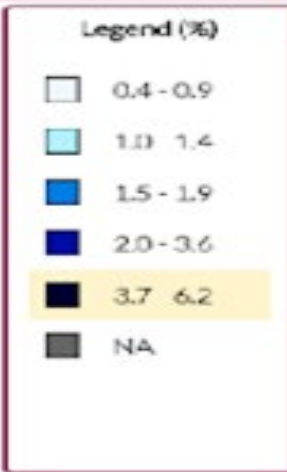
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Data Notes and Footnotes

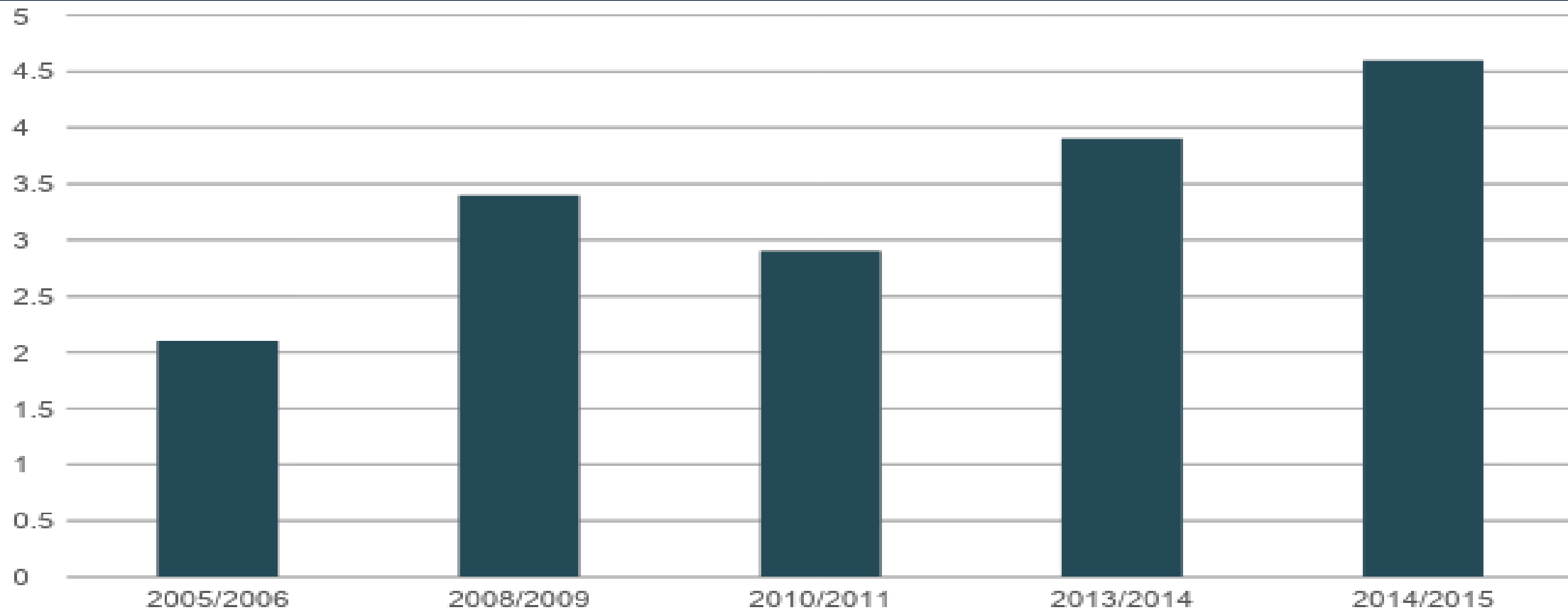
Abbreviations: NA = not available

Data Notes:

- Data for the 2010-11 school year were not verified.
- In 2009-10, data were weighted based on the population if awardee submitted reports for <90% of enrolled students. In 2011-12, all estimates of percent of children with exemptions were weighted to the number of enrolled children unless noted; number of exemptions were unweighted counts. All other years, estimates were adjusted for non-response and weighted for sampling as appropriate.

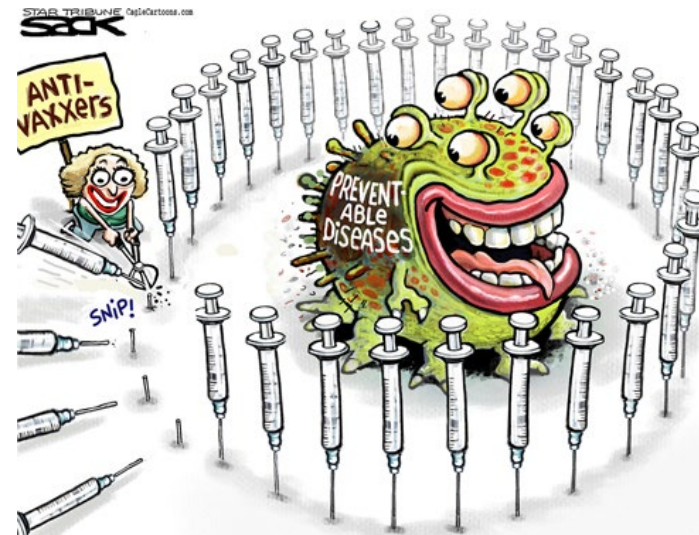
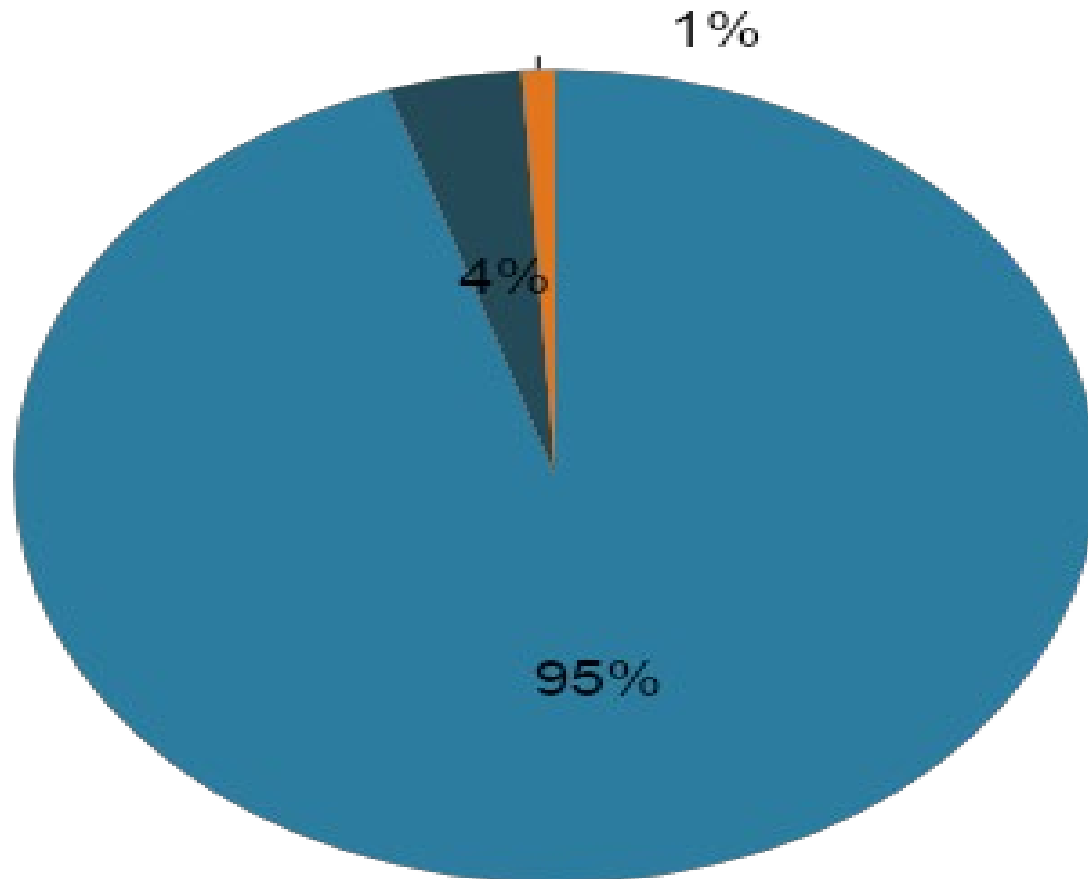


Utah Kindergarten Exemption Rates



Utah Exemption Types

■ Personal ■ Medical ■ Religious



H: Hinge

- ❑ Right Hinge and Right Location
- ❑ Brainstorm ideas with student nurses





State Immunization Program Manager Survey

In collaboration with:

- Association of Immunization Managers
- CDC

(Eden et al, 2017)

“Everything hinges on education.
Without it, you can’t advocate for
proper health care...”

Susan L. Taylor

A: Associations

- ❑ Gather recommendations, feedback, and interested parties on the language in the bill
 - ❑ Utah Chapter of AANP
 - ❑ Utah School Nurses Association
 - ❑ Local Health Departments
 - ❑ Utah Chapter of NAPNAP
 - ❑ Utah Chapter AAP
 - ❑ Utah Medical Association (UMA)
 - ❑ Legislature



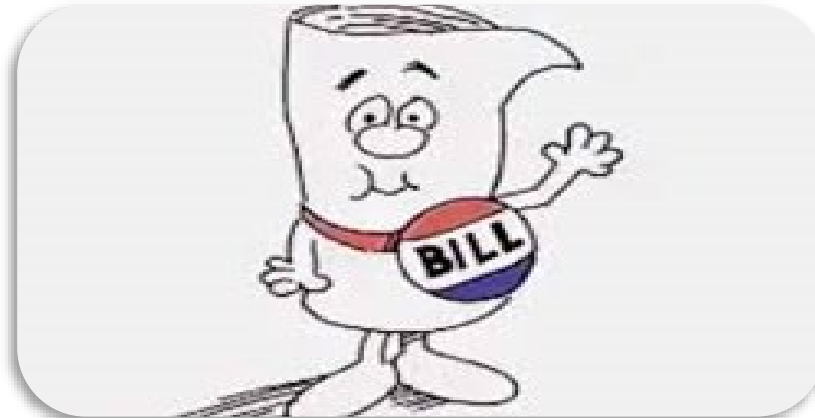
N: Negotiate

- ❑ Find a Senator and House Representative to sponsor bill
- ❑ Draft Bill



HB 308 Sub 2: Public Health in Schools

- ❑ Require completion of online education prior to receiving exemption form
- ❑ Increase the frequency an exemption must be obtained
- ❑ 21 day conditional enrollment



G: Gather Support



Help us support House Bills

308 & 309

To protect our loved ones from preventable diseases



308- Public Health Education Module

309- Public Health in Schools

Support House Bills 308 & 309

To find out more information join our Facebook page!



“ Why Immunize Utah?”

Or email us at:



whyimmunizeutah@gmail.com



Protect Utah from Preventable Diseases

Support House Bills 308 & 309

HOUSE BILL 308

* The State Health Department will create a standardized education module for parents seeking personal immunization exemptions. Education would include:

- Signs and symptoms of immunization preventable diseases
- Education on how community immunity works
- Training on 21-day exclusion rule for unimmunized children during outbreaks.
- Information about cost and locations where you can get immunizations
- Online availability, taking only 20 minutes and completion of the module meets requirement for all children in the family needing an exemption

EDUCATION MODULE COMPLETION
CERTIFICATE EXPIRES IN TWO YEARS.

HOUSE BILL 309

- Require renewal of immunization exemption form at kindergarten and seventh grade.
 - Right now, immunization exemptions in kindergarten last until the child graduates from high school.
 - Required renewal at seventh grade would give exempting parents the opportunity to regularly evaluate responsibilities during a disease outbreak.
- Allow a 21 day conditional enrollment to get immunizations, records or exemption forms after the start of school.
 - Some transfer students need extra time to find immunization records. With this bill, children can start school while parents find or request records.
 - Parents may be unaware of immunization requirements for school. With this bill, parents have extra time to have child immunized.

Groups In Support

- ❑ Utah Chapter of the American Academy of Pediatrics
- ❑ Utah Nurse Practitioners Association
- ❑ Utah School Nurses Association
- ❑ Voices for Utah Children
- ❑ Utah Health Department

❑ PTA Association

❑ Utah Board of Education



E: Expect to be the Expert

Of course I talk to myself,
Sometimes I need
expert advice.



ROTTEN&CARDS

Politics is a Process- Not an Event

- ❓ Even after a bill passes, your work is not done



Lessons Learned

- ❓ It's not personal- it's politics (Ok maybe it's a little personal)
- ❓ Loyal lawmaker
- ❓ Need help



Tips to Improve the Experience

? How to talk to your legislator

- ? Tell them real life stories
- ? Know funding capabilities
- ? Show them statistics

? How to be heard

- ? They receive SO many emails
- ? They have interns answer their phone
- ? They are being broadcast to ALL of the time
- ? Letters actually work!
- ? Let them know who you are



References

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**If you have any questions prior to or following
each session, please submit them through this
[Google Form](#)**

NNCC EVENTS

Module 2: Thursday, April 28 , 2022 1:00-2:30 pm ET

***Grassroots Advocacy:
Informing Stakeholders and Testifying for Policy Change***



Director of Nurse Advocacy and
Resources, Philadelphia Nurse-Family
Partnership (NNCC)

NNCC PROGRAMMING AND RESOURCES

- Webinar Series: **Strategies for Increasing Vaccination Coverage Among Immigrant and Refugee Communities**
- Friday, **April 22 @ 1PM ET**
- Register [here](#)



Nurses make
change happen.

Be a part of history.

This toolkit was created to give nurses the tools to do their part in the national vaccine effort. It is designed to help you decrease vaccine hesitancy and increase vaccination rates in your community.

NNCC PROGRAMMING AND RESOURCES

- For other training opportunities check out our resource library and trainings.
<https://nurseledcare.phmc.org/>
- Last month we hosted a Social Media and Media Training Workshop available in our resource library to share best practices when interacting with the news media and engaging on social media.
- This was also part of our effort to promote NNCC's Nurses Make Change Happen Campaign. For more information check out our Vaccine Confidence Toolkit:
<https://vaccinetoolkit.phmc.org/>





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