OREGON NURSES ASSOCIATION
ACTION REPORT
ONA’s Health Policy Platform, 2010 Revision

Submitted by:
Cabinet on Health Policy

The Health Policy Platform, last revised in 2005, needs updating in three important ways:
1. To more accurately reflect the current state of issues that we have been working on for a long time;
2. To state more accurately the focus of our recent policy initiatives;
3. To streamline the language and conceptualization of our policy work.

The content of the Platform has been re-conceptualized into six statements, with accompanying policy initiatives and activities. The statements are:
1. Promote access, quality, and cost effectiveness in the delivery of health care.
2. Improve public health and safety.
3. Promote professional nursing practice.
4. Ensure the economic welfare of nurses and an equitable reimbursement structure for all nurses.
5. Support nursing education and research.
6. Promote ethical decision-making in nursing and health care.

The ONA House of Delegates “owns” the Platform. Their approval of its content is required for its implementation, and their support for its initiatives and activities is vital if nurses are to be a force for change and a voice for the prevention of disease and promotion of health in our society.

Proposed implementation activities
Publicize the revised Platform in The Oregon Nurse, the ONA website, and among ONA’s constituent groups such as districts, bargaining units, and special interest groups.

Financial impact on Oregon Nurses Association
None beyond normal organizational business activities.

Health Policy Platform, 2010 Revisions

1. Promote access, quality, and cost effectiveness in the delivery of health care.

1.1 Support policies and programs that promote access to health care for all.

1.1.1. Ensure adequate, affordable access to health and nursing care and services for Oregonians.

1.1.2 Emphasize primary health care at conveniently located community sites such as clinics, schools, work places, houses of worship, community organizations and mobile clinics.

1.1.2 Encourage innovative strategies to increase access to care in the community, including home care, hospice, health screening programs, gerontological programs, perinatal care, family planning, and others.
1.1.4 Promote culturally competent and sensitive nursing and health care in all settings.

1.2 Support policies and programs that improve the quality and therapeutic effectiveness of health care, based on research of patient care outcomes.

1.2.1 Promote and improve the systemic evaluation and remediation of errors in practice of health care.

1.2.2 Support policies to accredit and license health care agencies and institutions based on excellent patient care.

1.3 Support policies and programs that promote cost effectiveness and efficiency of health care delivery.

1.3.1 Support adequate funding of nursing and health care in all practice settings.

1.3.2 Support health care planning and prudent, adequate resource allocation.

1.3.3 Support technology assessment and control of technology proliferation.

1.4 Promote wellness and prevention of disease.

1.4.1 Promote preventive health programs that focus on long-term health goals over the current emphasis on procedures and acute disease.

1.4.2 Support restructuring of health insurance payments to promote reimbursement for prevention and wellness programs.

1.4.3 Support prevention programs that reduce the incidence of communicable disease, obesity, adolescent pregnancy, child abuse, and domestic and community violence.

1.4.4 Support least-restrictive, community-based mental health and wellness programs.

1.4.5 Support alcohol and drug education, prevention and treatment programs, including; diversion, insurance parity with physical illness, community programs, and programs for adolescents, children, pregnant women and other vulnerable populations.

1.4.6 Support the use of tobacco and other health-related settlement monies for health care, health education and prevention.

1.5 Support and participate in the health care reform process in Oregon under the Oregon Health Authority, using the following principles of reform:

1.5.1 Employ community rating and mandatory participation in the health care system.

1.5.2 Cap out-of-pocket expenses individuals must pay for catastrophic care.

1.5.3 Eliminate annual and lifetime insurance caps.

1.5.4 Prohibit pre-existing conditions clauses in insurance.
1.5.5 Support moderate co-pays and deductibles to foster consumer responsibility, as long as they do not present a barrier to care.

1.5.6 Promote the sovereignty of clinical judgment regarding diagnosis, treatment and referrals.

1.5.7 Support independent review and adjudication of disputes between patients, clinicians and insurers.

2. Improve public health and safety.

2.1 Support preventive programs that reduce incidence and prevalence of communicable disease, obesity, preventable chronic illness, adolescent pregnancy, child abuse, teen suicide, interpersonal violence, preventable accidents and trauma.

2.2 Support cost-effective measures to improve environmental health, including but not limited to, prevention, mitigation or removal of chemical, physical, mechanical, or psychosocial hazards.

2.3 Support cost-effective measures to improve occupational health and safety, including but not limited to, blood-borne pathogens, latex allergies, ergonomics, and workplace violence.

3. Promote professional nursing practice.

3.1 Support the right of the profession of nursing to regulate itself.

3.1.1 Protect and promote professional nursing practice in Oregon’s Nursing Practice Act, recognizing that nursing practice evolves over time.

3.1.2 Support inclusion of a wide range of qualified nurses, including but not limited to nurses in advanced practice, as health care providers within the delivery system.

3.1.3 Support policies regarding interstate and multi-state nursing licensure and practice that protect the quality of nursing care and Oregon’s sovereignty to govern nursing care provided in its boundaries, as set out by the ANA House of Delegates in 1998 and 1999.

3.1.4 Promote adequate numbers and appropriate use of unlicensed assistive personnel in all health care settings, including those in the community.

3.1.5 Support policies that protect whistleblowers.

3.2 Ensure an adequate nursing work force.

3.2.1 Support legislation and policy that promotes the utilization of adequate RN staffing in settings where the practice of professional nursing is required in order to provide quality patient care.

3.3 Promote the autonomy and independence of nurses in advanced practice.

3.4 Promote nurses’ participation in institutional governance and health policy at the local, state and federal levels.

3.4.1 Encourage nurses to participate in political advocacy at all levels -- local, state and federal legislative, electoral and advocacy campaigns – and encourage their colleagues to do the same.
3.4.2 Encourage appointment of nurses on health policy-making boards and commissions.

3.4.3 Pursue state and federal legislation that would require adequate nursing representation on health related boards and commissions.

3.4.4 Join in coalition with groups with congruent health policy goals and strategies.

4. Ensure the economic welfare of nurses and an equitable reimbursement structure for all nurses.

4.1 Promote equitable salaries and working conditions for Registered Nurses.

4.1.1 Promote policies and programs that demonstrate the fiscal contributions of nursing as a service in the health care system, and not just a cost center, including third-party reimbursement for nursing services at all levels of practice.

4.1.2 Protect and promote improvements in retirement benefits, including but not limited to the Public Employee Retirement System.

4.1.3 Promote fair and equitable reimbursement for advanced practice nurses.

4.2 Promote and strengthen the power of nurses to engage in collective bargaining.

4.2.1 Protect and promote nurses’ right to engage in collective bargaining without undue harassment and by the most effective means.

4.2.2 Protect the ability of collective bargaining units to conduct business efficiently and effectively e.g. automatic payroll dues deduction, automatic payroll deduction dues for political purposes, and other means.

4.2.3 Support policies that prohibit employment discrimination of agency nurses or other substitute employees who refuse to be used as strike breakers.

5. Support nursing education and research.

5.1. Strengthen nursing education for nursing.

5.1.1 Support adequate funding for nursing education at all levels.

5.1.2 Promote statewide nursing programs that offer innovative outreach, financial and social support to diverse nursing students, e.g. rural dwellers, “second-career” adults, men and people of color.

5.1.3 Support policies that address the shortage of nursing faculty.

5.2 Promote and strengthen nursing research and its utilization.

5.2.1 Promote funding for nursing research.

5.2.2 Promote the participation of nurses at all levels in the research and utilization processes.
5.3 Promote policies and programs that ensure the continuing competence of nurses in practice.

6. Promote ethical decision-making in nursing and health care.

6.1 Support the human rights and dignity of all Oregonians.

6.1.1. Advocate for the consistent consideration and protection of human rights throughout the health care system.

6.1.2 Support of the equal treatment under the law of all Oregonians regardless of gender, race, religion, national origin, sexual orientation, age, physical ability, health status or political affiliation.

6.1.3 Oppose efforts to single out any one group of Oregonians for unequal treatment that could reasonably be seen as encroachment on their civil liberties, or demeaning to that group.

6.1.4 Protection of the vulnerable: Support health programs that meet the specific needs of vulnerable and underserved populations, including but not limited to: the homeless, low-income children, the elderly, minorities, refugees, and persons affected by domestic violence. Oppose discrimination in health care delivery by supporting access to non-discriminatory health services for all vulnerable populations and individuals with special needs. Protect against discrimination in insurance based upon sex, marital status, race, religion, sexual orientation, and national origin in insurance benefits and rates.

6.1.5 Support policies that ensure confidentiality of patients’ medical records and information, oral, written and digital, including but not limited to, genetic information.

6.2 Support patient autonomy, including the right of patients to choose from a range of qualified providers, consumer responsibility for and involvement in informed decision-making in health care.

6.2.1 Support the right of women to choose reproductive options as guaranteed by existing law, the right to a confidential relationship with a health care provider, and equal access regardless of economic status.

6.2.2 Support greater patient autonomy in end of life decisions.

6.2.3 Promote the provision and implementation of advance directives and durable power of attorney for health care decisions.