

**Responses to ANA member survey on proposed strategic policy topics  
November 2016**

<b>Proposed Strategic Policy Topic</b>	<b>What problems would be addressed via this proposed policy topic?</b>	<b>Why is the proposed policy topic necessary for the nursing profession?</b>	<b>Input from ANA</b>
Academic Preparation	<p>There is a monumental workforce crisis looming in every practice setting.</p> <p>Major revisions are needed in the structure of nursing education to prepare faculty, adjust practice setting/simulation components of education, support BSN programs, close diploma programs completely, and ensure ADN programs are only an entry with BSN completion required to increase student interest.</p> <p>Funding at all of these levels is an important motivator and policy issue.</p>		<p><i>ANA recently assessed its current work using a 360° Value Proposition Process, which involves a complete environmental scan (reflecting the views of ANA members, the nursing profession and the industry); along with an internal review of the opportunities and risks; the personnel and financial resources needed; and confirmation of alignment with ANA’s mission, vision and strategic plan.</i></p> <p><i>The outcome of the process is the categorization of ANA’s current work into one of three tiers that reflect the association of the work to ANA’s strategic plan and the level of personnel and financial resourcing required. Some work was moved to a “Stop Doing” list to ensure resources for new work.</i></p> <p><i>As a result, Nursing Education has been moved to “Stop Doing.”</i></p> <p><i>Both the American Association of Colleges of Nursing (AACN) and the National League for Nursing (NLN) are active in this policy and advocacy space. In addition, issues associated with Nursing Education are typically discussed at the Tri-Council of Nursing meetings, which includes representation from AACN, NLN, American Organization of Nurse Executives,</i></p>

**Responses to ANA member survey on proposed strategic policy topics  
November 2016**

Proposed Strategic Policy Topic	What problems would be addressed via this proposed policy topic?	Why is the proposed policy topic necessary for the nursing profession?	Input from ANA
			<i>and ANA.</i>
Academic Preparation - APRN	<p>With possible changes in the ACA with the new Administration, nursing has an opportunity to have a strong voice in protecting consumers and providing options for care.</p> <p>Specific areas of interest include: drug costs and confronting out-of-balance pricing schemes; easy access to primary care through APRNs.</p> <p>Nursing Education to provide for increased numbers of advanced practice nurses should also be high on the priority list.</p>	<p>Nursing can contribute to the care of the public more effectively if barriers to care are removed - practice to the full extent of education and training;</p> <p>Nurses' obligation to advocate for patients (access; affordable drugs)</p> <p>Education as foundational to achieving the above.</p>	<p><i>ANA agrees with the sentiments offered by this individual and is actively engaged in advocating for all registered nurses to work to the full extent of their scope of practice. These comments reflect the statements included in the 2015 <a href="#">Code of Ethics for Nurses with Interpretive statements</a>.</i></p>
Academic Preparation - Clinical Preceptors	<p>My educational process has been put on hold because I was unable to find clinical preceptors in my field of practice that are willing to volunteer their time. There should be in place some form of compensation for these great nurses who give their time to our profession.</p>	<p>If we cannot find a just compensation of some sort we will lose a wealth of knowledge and experience.</p>	<p><i>Please see above comments related to 360° Value Proposition Process and academic preparation.</i></p>

**Responses to ANA member survey on proposed strategic policy topics  
November 2016**

Proposed Strategic Policy Topic	What problems would be addressed via this proposed policy topic?	Why is the proposed policy topic necessary for the nursing profession?	Input from ANA
Academic Preparation - Graduate-Level Funding for Informatics	Nursing informatics promotes the integration of technology and patient safety on a global level. Fuller understanding of potential and impact can be gained via advanced education.	Financial considerations often are the barrier to higher education. Various nursing associations support graduate funding for APRNs (e.g., NPs, CNS, NMW and educators) but not other vital specialties.	
Academic Preparation - Health Policy	Nursing education is inadequate in preparing nurse leaders, and nursing itself needs to find a way to ensure that the perspective of nursing is included and considered in discussions and dialogue about health policy.		
Academic Preparation - Mental Health NPs	There is a shortage of Mental Health Practitioners. It I believe a "grow your own" nurse practitioner program in clinical practice settings will bring RNs to elevate to the next level of master's or doctoral prepared psychiatric mental health nurse practitioners.	There is a shortage of health care providers in this country. It is necessary to be able to reach all nurses who want to provide mental health services to this special underserved population. According to research, approximately 60% of patients see a primary care practitioner with undiagnosed depression and many times there are not enough mental health practitioners or psychiatrists to care for the patients who need mental health services and psychiatric mental health nurses can fill this gap.	<p><i>ANA has partnered with the American Psychiatric Nurses Association, a Premier Organizational Affiliate, on issues related to the psych-mental health nursing workforce.</i></p> <p><i>ANA is also home to the <a href="#">Minority Fellowship Program</a> funded by the Substance Abuse and Mental Health Services Administration (SAMHSA). This program supports the attainment of advanced degrees by ethnic and minority nurses in the area of psychiatric-mental health nursing.</i></p>

**Responses to ANA member survey on proposed strategic policy topics  
November 2016**

<b>Proposed Strategic Policy Topic</b>	<b>What problems would be addressed via this proposed policy topic?</b>	<b>Why is the proposed policy topic necessary for the nursing profession?</b>	<b>Input from ANA</b>
Academic Preparation - New Roles for Nurses	Existing roles for nurses (e.g., Care Coordinators, Navigators, and Consultants) are not highlighted as viable career options.  Need to educate on the roles that already exist rather than creating “new roles”.	It's important for nursing to promote the roles that are already in place.	<i>ANA serves as the steward for the <a href="#">specialty scope and standards of practice</a> work done on behalf of the profession. This includes the recognition of specialty roles.</i>
Academic Preparation - Nurse Educators	This would address the shortage of nurse educators, enable appropriate educator-to-student ratios, and improve mentor programs for novice nurse educators, among other things.	The topics are vital to helping improve the current and future shortage of nurses in the profession and to the success of new nurse educators.	<i>Please see above comments related to 360° Value Proposition Process and academic preparation.</i>
Academic Preparation -Nurse Educators	Nurse educators need to have much stronger and sound hands on clinical experience.	Academic Preparation -Nurse Educators	Nurse educators need to have much stronger and sound hands on clinical experience.
Academic Preparation - PhD Programs	Both professors and students in a nursing PhD program should have nursing degrees; otherwise it leads to a diminution/ dilution of the nursing profession. This is occurring at the University of Minnesota. It is a cannibalization of the program.		<i>Please see above comments related to 360° Value Proposition Process and academic preparation.</i>

**Responses to ANA member survey on proposed strategic policy topics  
November 2016**

Proposed Strategic Policy Topic	What problems would be addressed via this proposed policy topic?	Why is the proposed policy topic necessary for the nursing profession?	Input from ANA
Academic Preparation - Professionalism	<p>Self-awareness as a professional entity Working to the full extent of nurse license Understanding when a nurse must first protect his/her license and second fulfill employer or doctor directives.</p>	<p>Employment is where the "practice" of nursing begins. On the job training is driven by tasks and rules <i>rather than</i> the professional considerations of nursing. Nurses lose sight of their own personal professionalism and their responsibilities therein.</p> <p>Colleges must teach nurse professionalism and licensing awareness with nearly each assignment. Practice considerations related to the nursing license should be included.</p>	<p><i>ANA agrees with the sentiment expressed by this submitter. ANA serves as the steward for the foundational documents that are the underpinning of professional practice. These documents include the <a href="#">Code of Ethics for Nurses with Interpretive Statements</a> and <a href="#">Nursing: Scope and Standards of Practice</a>.</i></p>
Academic Preparation - RN Residency Programs	<p>One in two new graduate nurses quit after just two years in the profession, which affects the quality, safety, and cost of care nationwide. Additionally, turnover is costly (\$80,000).</p> <p>The academic preparation does not enable nurses to provide safe, quality, and exceptional outcomes in an increasingly demanding health care milieu.</p>	<p>Academic programs do not include topics such as leadership, quality, and nurse-sensitive indicators. RN residency programs have proven to successfully transition the new graduate RN and bridge the RN gap in the health care environment, reduce time to competency, and develop professional critical thinkers. Also, there is value to organizations when turnover is reduced and experience levels are increased both of which reduce average length of stay and HAIs.</p>	<p><i>The American Nurses Credentialing Center (ANCC) manages the <a href="#">Practice Transition Accreditation Program</a><sup>™</sup>. This program sets the global standard for residency or fellowship programs that transition registered nurses (RNs) and advanced practice registered nurses (APRNs) into new practice settings.</i></p>

**Responses to ANA member survey on proposed strategic policy topics  
November 2016**

Proposed Strategic Policy Topic	What problems would be addressed via this proposed policy topic?	Why is the proposed policy topic necessary for the nursing profession?	Input from ANA
Academic Preparation - RN to BSN	We must grandfather in all AD graduates to BSN Level of education. All AD programs must end and become BSN programs. Work with hospitals to combine free labor with clinical training for students.	As a profession we must present a united front to the world and have no confusion to the entry level for RN level work. Presently you say the word "nurse" and the public has no clue who is taking care of them. Nurse aide, certify nursing assistant, LPN, RN, NP etc.	<p><i>ANA and the Organization of Associate Degree Nursing collaborated on a statement, <a href="#">Academic Progression to Meet the Needs of the Registered Nurse, the Health Care Consumer, and the U.S. Health Care System.</a></i></p> <p><i>Statement of ANA and OADN Joint Position: All nurses must have access to seamless academic progression through high quality, accredited nursing education programs that will meet the anticipated demand for qualified nurses over the next several decades. The Organization for Associate Degree Nursing (OADN) and American Nurses Association (ANA) commit to partnering with nursing and health care leaders, state legislatures and regulatory agencies, universities, colleges, and other stakeholders in supporting and adopting innovative and emerging strategies to achieve that goal.</i></p>
Academic Preparation - RN to BSN	Patient mortality, patient safety, staffing ratios, RN pay, faculty shortages, critical thinking, wage stagnation	Because we still are undereducated and have no place at the table. You don't see physicians shooting themselves in the foot by lowering their educational standards. It's time to stop being nice girls and to shirk the yoke of the community college monopoly. Nursing is not a trade; it is a profession. Physical	<i>Please see above comments related to 360° Value Proposition Process and academic preparation.</i>

**Responses to ANA member survey on proposed strategic policy topics  
November 2016**

Proposed Strategic Policy Topic	What problems would be addressed via this proposed policy topic?	Why is the proposed policy topic necessary for the nursing profession?	Input from ANA
		therapists need a doctorate but an RN can make life or death decisions without a research or theory course?	
Academic Preparation - Shortage of Nurse Educators	Shortage of nurses in the workforce, shortage of nurse educators, under-utilization of education resources because of lack of funding.	Maintains necessary professional workforce	<p><i>ANA, in partnership with other national and specialty nursing organizations, advocates on behalf of the <a href="#">Title VIII, Nursing Workforce education grants</a> and loans.</i></p> <p><i>ANA also continually monitors the state of the <a href="#">nursing workforce</a> through work undertaken within the Health Policy department.</i></p>
Academic Preparation - Shortage of Nurse Educators	<ul style="list-style-type: none"> <li>- nursing faculty shortage</li> <li>- preparation of PhD graduates for teaching</li> </ul>	Nursing needs to assure adequate preparation of nursing faculty and assure sufficient new graduates to meet the health care needs of the nation and more nursing graduate students for advanced practice and generation and testing of nursing science.	<i>Please see above comments related to 360° Value Proposition Process and academic preparation.</i>
Academic Preparation - Student-to-Faculty Ratio	Not enough instructors to monitor nursing students.		<i>Please see above comments related to 360° Value Proposition Process and academic preparation.</i>

**Responses to ANA member survey on proposed strategic policy topics  
November 2016**

Proposed Strategic Policy Topic	What problems would be addressed via this proposed policy topic?	Why is the proposed policy topic necessary for the nursing profession?	Input from ANA
Academic Preparation - Use of Cannabis	The lack of common knowledge related to the endocannabinoid system and use of cannabis.	Cannabis is used by millions of people and the research that is being done is extremely promising. Nurses deserve to know the truth about cannabis and its beneficial properties. The patients that nurses care for also deserve to have a nurse that understands all available treatment options especially for pain and addiction.	Academic Preparation - Use of Cannabis
Advocacy - ACA	Support and become involved, publicly as a voice to improve the Affordable Care Act (ACA). Actively address issues to move the ACA toward its initial goals.	Nurses can see the results of more individuals with access to preventative and sick care. We should become better informed as a profession and actively engage in the process.	<i>Advocacy related to the Affordable Care Act is a Tier 1 topic for ANA; one of only five topics identified as the highest priority for activity across the ANA Enterprise.</i>
Advocacy - Accessible and Affordable Health Care	The degree to which hard working and elderly Americans are "paying" the bill for the underserved due to astronomical health care premiums when the fiscal responsibility should be shared by the government, health insurance companies, companies offering health care, and all Americans, including the underserved.	Nurses want and need to care for every patient. The current Affordable Health Care Act only benefits those who were previously uninsured.	<i>Please see above comments related to Tier 1 topics and advocacy.</i>
Advocacy - Accessible and Affordable Health Care	In spite of Obamacare, many Americans are still without health care because of the cost and this is only going to get worse now that insurers are backing out and	Nurses are to be advocates for our patients and to be the voice of reason as the insurers, drug companies and the government aren't.	<i>Issues related to access and cost continues to be part of ANA's <a href="#">Principles for Health System Transformation</a>.</i>

**Responses to ANA member survey on proposed strategic policy topics  
November 2016**

Proposed Strategic Policy Topic	What problems would be addressed via this proposed policy topic?	Why is the proposed policy topic necessary for the nursing profession?	Input from ANA
	premiums are continuing to rise.		
Advocacy - Grassroots	Nurses are not active in policy change at the state or federal level. Nurses must solve problems with their voice and vote.	Nursing is the most trusted profession; why are they not involved in issues that are decided by those who are not nurses? Innovation and solutions must begin at the grass roots.	<p><a href="#">RN Action</a> serves as ANA's grassroots advocacy center.</p> <p>ANA manages two programs to support this need. The first is the <a href="#">American Nurses Advocacy Institute</a>, a year-long mentored program for the purpose of developing nurses into political leaders while expanding the grassroots capacity for the nursing profession and health care. Education offerings are also available through ANA's <a href="#">Leadership Institute</a>.</p>
Advocacy - Health and Health Care Equity	<p>I am defining health and health care equity as all groups having a stake in the health care processes, tasks, and outcomes. To improve health and health care equity, I suggest addressing:</p> <ol style="list-style-type: none"> <li>1. Ethnic and racial health care outcome disparities amenable to nursing interventions.</li> <li>2. Organized and explicit goal-oriented partnerships of nurses, nurse-managed agencies, and NP primary care offices with diverse communities.</li> <li>3. Advantageous use of community health workers with nurses, nurse-managed</li> </ol>	Nursing has been the profession involved with health care outcomes since Florence Nightingale. The disparate health care outcomes of today would not be tolerated by her nor should they be tolerated by us. We have the power to impact these outcomes. We just need an organized and committed effort and the courage to act with the power we possess.	<p>To date, ANA has not been actively engaged in policy and advocacy specifically linked to health disparities. The intent is embedded in ANA's <a href="#">Principles for Health System Transformation</a>.</p>

**Responses to ANA member survey on proposed strategic policy topics  
November 2016**

Proposed Strategic Policy Topic	What problems would be addressed via this proposed policy topic?	Why is the proposed policy topic necessary for the nursing profession?	Input from ANA
	agencies, and NP primary care offices to support and extend our nursing effectiveness.		
Advocacy - Protecting Nurses' Beliefs and Principles	<p>Recent changes in health care laws/regulations require organizations to provide health care coverage for medications/procedures/care that conflict with religious, ethical, and philosophical beliefs of specific groups.</p> <p>For example, religious organizations are being threatened with loss of federal support if they do not comply. Individual care providers are also facing the threat of sanctions if they do not provide services that conflict with their personal beliefs and values.</p>	<p>It is not a big step for this to cross over to the practice of health care professionals. Currently, a provider who does not agree with abortion does not have to participate in this procedure. It is only a matter of time before providers will be told they must participate in something that goes against their individual principles or they will not be paid.</p> <p>This will be from Medicare/Medicaid/insurance to providers and eventually employers to staff.</p> <p>ANA must protect the rights of nurses (and other care providers) to be able to practice according to their personal beliefs and principles.</p>	<p>ANA's <a href="#">Code of Ethics for Nurses with Interpretive Statements</a> provides guidance on this issue raised.</p> <p>ANA did express disappointment at the <a href="#">Burwell v. Hobby Lobby Supreme Court</a> decision that allows closely held, for-profit employers to interfere with the patient-health care provider relationship and deny access to coverage that protects the health and well-being of women and their families.</p>

**Responses to ANA member survey on proposed strategic policy topics  
November 2016**

Proposed Strategic Policy Topic	What problems would be addressed via this proposed policy topic?	Why is the proposed policy topic necessary for the nursing profession?	Input from ANA
Advocacy - Reauthorization of TANF	<p>Lack of health assessment of people in poverty who are entering or in the US welfare program, TANF.</p> <p>Chronic health conditions prevent many impoverished women with children from becoming self-sufficient. Yet the Temporary Assistance for Needy Families (TANF) program, that replaced the Aid to Families with Dependent Children (AFDC) program, has a 5-year lifetime limit of support.</p>	<p>Nurses need to lead the way to enhance understanding of how socioeconomic well-being affects health, and health affects socioeconomic well-being. Nurses are well positioned to intervene between poverty and its effects on health and well-being.</p> <p>The TANF program comes up for Congressional 10-year re-authorization this year, and will set into policy the nation's socioeconomic and health safety net for people in poverty. Nursing can act in shaping that policy, rather than only reacting to it after the fact.</p>	<p><i>ANA has not actively engaged in advocacy associated with the Temporary Assistance for Needy Families (TANF) program.</i></p>
Advocacy - Social Determinants	<p>Social determinants to improve access to health care</p>	<p>Nurses should advocate for services that address the foundational issues directly impacting patient health (e.g., housing, poverty, jobs, transportation, education, public safety, nutrition, etc.).</p>	<p><i>This issues falls under activities related to ANA's <a href="#">Principles for Health System Transformation</a>.</i></p>
Advocacy - Underinsured	<p>Patients not receiving health care or not taking medications as directed because they cannot afford to do so.</p>	<p>The issue is not being addressed adequately and needs more voices to be heard.</p>	<p><i>This issues falls under activities related to ANA's <a href="#">Principles for Health System Transformation</a>.</i></p>
Advocacy - Uniform Insurance Regulations	<p>The inability of patients, who only have access to registered nurse providers, to fill prescriptions written by mid-level</p>	<p>Many states but not all, allow nurses to prescribe, even without a consulting or collaborating MD. Our population is</p>	<p><i>ANA advocates for full practice authority for all APRNs in every state.</i></p>

**Responses to ANA member survey on proposed strategic policy topics  
November 2016**

Proposed Strategic Policy Topic	What problems would be addressed via this proposed policy topic?	Why is the proposed policy topic necessary for the nursing profession?	Input from ANA
	providers (i.e., registered nurses) when they are traveling or living away from home	very mobile and may have only have access to a nurse in their home state; they are unable to fill prescriptions when traveling or living away from home on business.	
Advocacy - Universal Health Care	<p>1 Medicare-type coverage for all without heavy paperwork or cost and without the burden of needing a large amount of initiative, energy, and tolerance for complexity.</p> <p>2 for improved Medication adherence Health promotion and information. Health management support.</p> <p>3 to have local and in home as needed monitoring visits. (Mental health med monitoring without barriers of transportation, needing to take initiative, needing a phone (or also, a simple cell phone for each patient?)</p> <p>Yes, there have been improvements with the ACA.</p>	<p>Appropriate use of nursing assessment, patient teaching that is Ongoing (a normal need for the foreign languages of health issues, medications, and personal health initiatives) also IN the community.</p> <p>Not Necessary for Nursing, but necessary for the public health and most appropriately done by nursing.</p>	<p><i>ANA has long held that it prefers a single payer approach to funding and organizing the U.S. health care system.</i></p> <p><i>ANA has worked to engage across the spectrum of policy discussions focused on expanding access to affordable, quality care.</i></p>
Advocacy - Universal Health Care	Inequities in our health care system; public health concerns caused by inability of uninsured to obtain timely health care	Nursing has a very proud tradition of providing optimal care to all people, no matter their circumstances. With that	<i>This issues falls under activities related to ANA's <a href="#">Principles for Health System Transformation</a>.</i>

**Responses to ANA member survey on proposed strategic policy topics  
November 2016**

Proposed Strategic Policy Topic	What problems would be addressed via this proposed policy topic?	Why is the proposed policy topic necessary for the nursing profession?	Input from ANA
	<p>AND preventative health care; cost of health insurance premiums impacting financial needs of families; severity of illness/health conditions seen in hospitals and urgent care facilities due to lack of timely and preventative health care; poor follow through after discharge due to inability to afford supplies, follow up appointments, etc.</p>	<p>in mind, staffing problems, the lack of care shown by some for-profit health care systems, and the overwhelming burden that lack of preventative care puts on the nursing profession as a whole, are all directly related to our ability to practice at our best as nurses.</p>	
<p>Advocacy - Universal Health Care</p>	<p>Millions who currently do not have insurance or are underinsured would have access to the health care system.</p> <p>Emergency rooms would not be used as primary care facilities for the uninsured. As we all know the ACA does not go far enough in covering all Americans. Full coverage would mean a healthier America.</p>	<p>Nurses are on the forefront of health care. Daily, nurses see the results of poor, inadequate, or non-existent health care coverage.</p> <p>Until nurses draw a line in the sand and state that the profession's primary efforts will be focused on obtaining health care for all, then all these lofty worded policies are wasted energy.</p> <p>There should be only one statement and one message - health care for all. Everything else should fall behind that message. This is our mission. And, this is our duty.</p>	<p><i>This issues falls under activities related to ANA's <a href="#">Principles for Health System Transformation</a>.</i></p>

**Responses to ANA member survey on proposed strategic policy topics  
November 2016**

Proposed Strategic Policy Topic	What problems would be addressed via this proposed policy topic?	Why is the proposed policy topic necessary for the nursing profession?	Input from ANA
Advocacy - Universal Health Care	Several states refused federal funds when the Affordable Care Act was passed. Insurance rates for the people affected have sky-rocketed leaving them under- or un-insured.	Nursing has always had a focus on the under-served and poor who cannot afford health care.	<i>This issues falls under activities related to ANA's <a href="#">Principles for Health System Transformation</a>.</i>
Advocacy - Universal Health Care	The number of individuals who are uninsured and underinsured in the U.S. as the only industrialized country that does not provide health care for its citizens.	The issue is consistent with the advocacy role of the professional nurse. The profession needs to speak out on behalf of patients. The issue is consistent with the social policy statement.	<i>This issues falls under activities related to ANA's <a href="#">Principles for Health System Transformation</a>.</i>
Advocacy - Universal Health Care	Equality of health care to all people	Nurses are at the forefront of providing primary care, often to those who have no health insurance or low reimbursement - those at the fringes. Treating all of citizens and others living in this country as worthy of a basic standard of living will heal the rift among our people.	<i>This issues falls under activities related to ANA's <a href="#">Principles for Health System Transformation</a>.</i>
Advocacy - Value of the Profession	The dearth of nurses in legislature/public office.  The lack of awareness of nurses and APRNs by engaging in all areas of society.	To increase awareness of nurses and APRNs in more segments.	<i>This sentiment serves as the underlying goal of ANA's advocacy efforts.</i>

**Responses to ANA member survey on proposed strategic policy topics  
November 2016**

Proposed Strategic Policy Topic	What problems would be addressed via this proposed policy topic?	Why is the proposed policy topic necessary for the nursing profession?	Input from ANA
Health Policy	Lack of evidence in the development of health policy at all three levels of government. Lack of nursing input into policies that would improve patient/client care and outcomes.	Nursing influence could be better positioned with greater involvement in the policy arena. Nursing education, especially at the undergraduate level, does not always help future nurses and practicing nurses to gain knowledge and skills needed to be effective citizens.	<a href="#">RN Action</a> serves as ANA's grassroots advocacy center.  ANA manages two programs to support this need. The first is the <a href="#">American Nurses Advocacy Institute</a> , a year-long mentored program for the purpose of developing nurses into political leaders while expanding the grassroots capacity for the nursing profession and health care. Education offerings are also available through ANA's <a href="#">Leadership Institute</a> .
Health Policy - Certified Rehabilitation Nurses	Broader access to and insurance coverage for acute rehabilitation services - "rehabilitation" in long term care is being pushed by insurance and nursing home associations. Acute rehabilitation includes 3 hours of therapy a day and professionally certified rehabilitation nurses to address carryover to practice. Average length of stay is 17 days and majority go home. Important for all patients AND the aging population of nurses.	The aging population needs acute rehabilitation with specialized nurses to maintain functioning and return to home. Nurses have been doing rehabilitation since day one. There are more patients who need rehabilitation- advances in emergency care and acute care of patients with cancer, heart transplants, burns, brain injuries & stroke. Focus on rehabilitation in nursing education has seemingly dwindled rather than expanding!	ANA typically partners with the related nursing specialty organization – to the extent requested – in advocating for funding of specific services.
Health Policy - Credentialing of APRNs in Managed Care Insurance Plans	Create a national policy for use with Managed Care Insurance Plans that allow APRNs to be empaneled.  Reduce the costs associated with access to	Currently, there is not a national policy to credential (empanel) APRNs in Managed Care Insurance Plans despite the fact that CMS-published manuals and subsections of the Code of Federal	Please see above comments related to 360° Value Proposition Process.  APRN Scope of Practice and barriers to practice are part of ANA's Tier 2 work.

**Responses to ANA member survey on proposed strategic policy topics  
November 2016**

Proposed Strategic Policy Topic	What problems would be addressed via this proposed policy topic?	Why is the proposed policy topic necessary for the nursing profession?	Input from ANA
	primary care.	<p>Regulations contain language to credential, bill for services rendered, and reimburse APRNs.</p> <p>Literature supports cost effectiveness, efficiency, as well as public safety associated with the practice of nursing.</p>	
Health Policy - Reimbursement for Nursing Care	Nurses and the skills they bring are lumped in with the cost of a room, or by raising the price of supplies to cover to hidden costs of care. Nursing care is treated as a disposable item, much in the same way their skills and knowledge are covered in the cost of a saline flush or linen cleaning.	By disentangling the cost of nursing services from the cost of a room or a saline flush and reimbursing nursing care at rates commensurate with the level of care required, organizations will better conceptualize how integral nurses are to their organizations and treat them as true partners in delivering excellent care to the patients they serve.	<p><i>This has been a long-standing policy goal for ANA. That being said, with the move to bundle payments and payments associated with team-based care, the notion of separating out nursing care runs counter to these trends.</i></p> <p><i>ANA has established a policy goal to achieve the direct payment for care coordination services provided by registered nurses. This may serve as a means to look at this problem in a new way.</i></p>
Health Policy - Universal Health Care	Lack of affordable health care for millions of Americans.	Nurses are the first line of care for patients.	<p><i>This issues falls under activities related to ANA's <a href="#">Principles for Health System Transformation</a>.</i></p>
Health Policy - Billing Codes for APRN Services	Looking at data, many APNs bill under a physician due to income disparities otherwise. If APRNs were able to bill under Medicare fully, more APRN data would be		<p><i>ANA partners with other national advanced practice organizations to address barriers to APRN services and payment.</i></p>

**Responses to ANA member survey on proposed strategic policy topics  
November 2016**

Proposed Strategic Policy Topic	What problems would be addressed via this proposed policy topic?	Why is the proposed policy topic necessary for the nursing profession?	Input from ANA
	<p>obtained and accurate revenue/productivity measured, which is critical when advocating for federal funding for nursing education, nursing leading medical home teams, and expanding APRN access to ancillary services across the country.</p>		
Work Environment - Environmental Toxins	<p>Nurses must develop healthy food and water policy proposals to meet the most fundamental health needs of humanity.</p> <p>Nurses witness the devastating health effects of our current food system. Across the lifespan, people experience the trajectory of chronic illness and the burden of managing disease on daily basis.</p> <p>We can no longer sustain our health in a toxic environment. When we embrace the adage of "food as medicine", the gravity of the situation is even more evident. Water nourishes all life and is fundamental to health.</p>	<p>Nursing must boldly advance a vision for policy that eliminates environmental toxins in our food and water supplies to protect the health of future generations and prevent chronic illness.</p> <p>Work to substantially reduce exposure to environmental toxins must begin immediately and will contribute to managing chronic illness.</p> <p>With a solid plan and perseverance, we can reverse the chronic illness trajectory for individuals and populations and create a healthy future for people and planet.</p>	<p><i>ANA is no longer engaged in environment-related issues.</i></p>

**Responses to ANA member survey on proposed strategic policy topics  
November 2016**

Proposed Strategic Policy Topic	What problems would be addressed via this proposed policy topic?	Why is the proposed policy topic necessary for the nursing profession?	Input from ANA
Health Policy - Health Disparities	Increase the focus on community-based interventions using the social determinants of health to reduce health disparities related to chronic disease health disparities in minority communities and communities in general.	A revision of current health policy is necessary to put interventions into place that promote the health of the community from an individual, family, community and health policy intervention framework using the social determinants of health and relate to healthcare reform.	<i>This issues falls under activities related to ANA's <a href="#">Principles for Health System Transformation</a>.</i>
Health Policy - Mammography Guidelines	<p>The ACS changed its guidelines suggesting that baseline mammograms be done "at will" between ages 40-44 and then annually from ages 45-50 and then every 2 years after age 50.</p> <p>We are losing our young women at an alarming rate and baseline screenings, done "at will", from ages 20-24 with an annual screening via mammography from ages 25-50 and every 2 years after age 50 via 3D screening techniques with lower radiation concerns, could detect breast cancer earlier.</p>	Nurses should advocate for women to ensure early detection.	<i>ANA defers to organizational affiliates who have specific expertise in this clinical area.</i>
Health Policy - Medical Cannabis	The current issue with conventional therapies and medications that are not alleviating the symptoms of the many conditions affecting our patients.	As a driving force in health care, we can help to dispel the misconceptions around this issue. I am a member of the KNA. ANA advocating for the use of medical cannabis will further legitimize	<i>ANA's Center for Ethics and Human Rights recently updated its position on the medical use of cannabis, <a href="#">Therapeutic Use of Marijuana and Related Cannabinoids</a> (2016).</i>

**Responses to ANA member survey on proposed strategic policy topics  
November 2016**

Proposed Strategic Policy Topic	What problems would be addressed via this proposed policy topic?	Why is the proposed policy topic necessary for the nursing profession?	Input from ANA
		the issue. We as nurses need to be the voice for our patients that are suffering.	
Health Policy - Mental Health Parity	<p>Multiple reviews are often required to justify inpatient stays for patients with behavioral health issues, which is not consistent with the review conducted for other illnesses.</p> <p>This results in inadequate treatment, additional health care conditions, etc.</p>	Nursing should advocate for one review upon admission and recommend a standard for each diagnosis that permits care without interruption.	<i>ANA has long advocated for Mental Health Parity. This issues falls under activities related to ANA's <a href="#">Principles for Health System Transformation</a>.</i>
Health Policy - Obesity Epidemic	<p>This policy topic addresses the obesity epidemic facing both pediatric and adult populations.</p> <p>Reducing intake of SSB has been shown to increase health, lead to reduced rates of obesity, and reduce the financial burden on our healthcare systems.</p> <p>Leveraging an excise tax on SSB has the potential to decrease consumption and provide incentive for producers of SSB to be innovative in creating more healthy products.</p>		<i>ANA is focusing on this issue in via efforts to address the health of nurses and by virtue of this focus, the health of the nation. This is being managed under <a href="#">Healthy Nurse, Healthy Nation</a><sup>™</sup>.</i>

**Responses to ANA member survey on proposed strategic policy topics  
November 2016**

<b>Proposed Strategic Policy Topic</b>	<b>What problems would be addressed via this proposed policy topic?</b>	<b>Why is the proposed policy topic necessary for the nursing profession?</b>	<b>Input from ANA</b>
Health Policy - Opposition to Physician-Assisted Suicide	<p>The trust shown nurses by the public is enhanced by the reassurance that nurses will not do anything to take life on purpose.</p> <p>The potential for abuse trumps any perceived good the "aid in dying as medical treatment" population proposes.</p> <p>What may help a very few, will actually create new victims within a health care system already struggling to provide excellent patient care.</p>	Offering a simple solution to a complex problem does a disservice to nurses who struggle and wrestle daily with the difficult issues of providing superior end of life care.	<p><i>ANA's Center for Ethics and Human Rights manages this issue. ANA's position is articulated <a href="#">Euthanasia, Assisted Suicide, and Aid in Dying</a> (2013).</i></p> <p><i>Statement of ANA Position: The American Nurses Association (ANA) prohibits nurses' participation in assisted suicide and euthanasia because these acts are in direct violation of Code of Ethics for Nurses with Interpretive Statements (ANA, 2001; herein referred to as The Code), the ethical traditions and goals of the profession, and its covenant with society. Nurses have an obligation to provide humane, comprehensive, and compassionate care that respects the rights of patients but upholds the standards of the profession in the presence of chronic, debilitating illness and at end-of-life.</i></p>
Health Policy - Post Incarceration Health and Well Being	A strategic policy focused on post-incarceration health and well-being will address the complex problems faced by men and women reentering communities after release from jail and prison. Upcoming US criminal justice reforms will lead to increasing amounts of men and women returning to their communities. However, the needs of reentering persons	Post-incarceration health and well-being is an essential policy topic for the nursing profession because it speaks to nursing's focus on human rights, patient-centered care, and ethics. This is a human rights issue because reentering persons who lack adequate support often face life sentences for crimes for which they have already	<i>ANA is not engaged in any advocacy associated with this issue.</i>

**Responses to ANA member survey on proposed strategic policy topics  
November 2016**

Proposed Strategic Policy Topic	What problems would be addressed via this proposed policy topic?	Why is the proposed policy topic necessary for the nursing profession?	Input from ANA
	<p>have been overlooked due to their social marginalization; despite their co-occurring mental, physical, and social issues. The multiple issues faced by reentering persons may contribute to family disruption, substance use, health disparities, violence, and stigma. Thus, addressing post-incarceration health and well-being will reduce both personal and community consequences.</p>	<p>served their time. This is a person-centered care issue because reentering persons have rarely been asked what kind of healthcare they want and need. This is an ethical issue because it emphasizes the importance of nursing advocacy primarily through the principles of autonomy, beneficence, fidelity, and justice.</p>	
Health System Activity	<ol style="list-style-type: none"> <li>1. Supporting those politicians that recognize the problem.</li> <li>2. An unbiased committee to address how the ANA can put aside political decisions making policy in the interest of our patients.</li> <li>3. A recommendation of FUTURE work by the ANA to address the issues of prevention, insurance policies, and affordability.</li> </ol>	<p>Coverage and prevention are key. When people are paying way too much and the cost is only rising, they will not go for routine appointments. Coupled with paying for coverages they don't need, limited doctors for which they can see, and the blind eye by the government to recognize the problem are only hindering the process. The key is to get people in, covered, screened, and taken well care of by doctors applicable to these patients should be or only focus (along with research and evidence based practice of course).</p>	<p><i>This issues falls under activities related to ANA's <a href="#">Principles for Health System Transformation</a>.</i></p>

**Responses to ANA member survey on proposed strategic policy topics  
November 2016**

Proposed Strategic Policy Topic	What problems would be addressed via this proposed policy topic?	Why is the proposed policy topic necessary for the nursing profession?	Input from ANA
Licensing Exam	Establish one educational requirement for sitting for the licensing exam	Moves the profession of nursing on par with other professions and limits the confusion among the community.	<i>ANA has long held and frequently reaffirmed its position in support of BSN in entry. That being said, the focus of these efforts have been related to strengthening the ability of students to access baccalaureate education or strengthening matriculation between ADN and BSN programs as described in the ANA and the Organization of Associate Degree Nursing joint statement, <a href="#">Academic Progression to Meet the Needs of the Registered Nurse, the Health Care Consumer, and the U.S. Health Care System</a>.</i>
Licensure	Licensing for RN across US borders that are not fully approached through the nurse-licensure compact.	It would ease transferring RN licenses for new RNs and Travel Nurses and allow for practice with less repercussion during travel or training.	<i>ANA defers to the Constituent/State Nurses Associations as they consider the Nurse Licensure Compact. ANA's position on the <a href="#">Nurse Licensure Compact</a>.</i>
Licensure	In addition to a state by state licensure a nursing license for the United States of America can unify nurses under one governing body.	A nursing license for the entire US can increase the voices of Nurses onto a National platform to provide a unified effort in relation to National topics. It can also serve as a way to monitor nurses that have revoked licensure in other states and showcase ideas and policies that impact the country not just on a state by state basis.	<i>The issue of professional licensure is viewed as being the purview of states.</i>

**Responses to ANA member survey on proposed strategic policy topics  
November 2016**

Proposed Strategic Policy Topic	What problems would be addressed via this proposed policy topic?	Why is the proposed policy topic necessary for the nursing profession?	Input from ANA
Licensure	Improved access for nurses and advanced practice nurses to work without undue restrictions or barriers to practice	Nursing has limited its mobility, and thus its power, by restricting licensure to each state board of nursing. It is time for one license, one set of criteria for licensure, and one nation of nursing. As we must uphold the standards of our profession equally in all states, licensure should reflect this unity.	<i>The issue of professional licensure is viewed as being the purview of states. That being said, ANA has partnered with the National Council of State Boards of Nursing to improve the standardization of requirements across the states.</i>
Licensure	Would increase nurses' ability to meet needs in various areas and reduce the costs associated with obtaining multiple licensure.	Same as above	<i>Please see comments above regarding professional licensure.</i>
Licensure	The Nurse Licensure Compact only applies to half of the states. More work needs to be done to include all states in the Compact.	This will help ensure continuity of standards in all states, make it easier for new and current employers to verify that licenses are in good standing with their current states.	<i>ANA defers to the Constituent/State Nurses Associations as they consider the Nurse Licensure Compact. ANA's position on the <a href="#">Nurse Licensure Compact</a>.</i>
Licensure	RNs would be able to cross state lines in case of emergency health crisis. No waiting time for or additional fees and filing for educators teaching online classes. Easier mobility to states in greater need of nurses.	Support RNs and APRNs in practicing to the full extent of their scope of practice and allow nursing to become more fluid and united as a national profession and not just regional profession.	<i>The issue of professional licensure is viewed as being the purview of states.</i>

**Responses to ANA member survey on proposed strategic policy topics  
November 2016**

Proposed Strategic Policy Topic	What problems would be addressed via this proposed policy topic?	Why is the proposed policy topic necessary for the nursing profession?	Input from ANA
Licensure	Allow more nurses to expand their practice in different settings.	Impact nursing staffing for nurses providing telephonic case management services.	
Licensure	It is not appropriate for ANA to oppose the Nurse Licensure Compact and ANA should reconsider its stance.		<i>ANA defers to the Constituent/State Nurses Associations as they consider the Nurse Licensure Compact. <a href="#">ANA's position on the Nurse Licensure Compact.</a></i>
Licensure -	<p>Nurse Licensure Compact (NLC) facilitates telemedicine across state boundaries but is currently hampered by only half of all states having passed this licensure.</p> <p>Case Management, while demonstrating efficient cost effective outcomes for patients, is hampered by the ability to "cross state lines" where Nursing Compact Licensure currently does not exist. For Master's prepared nurses who are all Certified Case Managers, these specialists would be free to work across all state lines, should such a designation be granted.</p> <p>It is important to promote RNs with these experiences/credentials, and not make the policy too restrictive/elitist.</p>	<p>It has been demonstrated that Nursing Case Management is a critical component of patient service to achieve effective outcomes under the Affordable Care Act. It is also important to recognize RNs who have post-graduate education (MS) and specialty credential (CCM) as the providers best equipped to promote such outcomes. It is also crucial that the nursing profession ensure NLC throughout the United States in order for consistent, high quality services be provided through growing technological applications.</p>	<p><i>ANA defers to the Constituent/State Nurses Associations as they consider the Nurse Licensure Compact. <a href="#">ANA's position on the Nurse Licensure Compact.</a></i></p>

**Responses to ANA member survey on proposed strategic policy topics  
November 2016**

Proposed Strategic Policy Topic	What problems would be addressed via this proposed policy topic?	Why is the proposed policy topic necessary for the nursing profession?	Input from ANA
Licensure - NRNL	One identified public issue is the disproportionate access to health care and health care providers throughout the United States. Another is the increasing nursing shortage in many states due to high staff turnover and low recruitment and retention statistical records in the last 5 years.	Improved patient safety and quality of care can be assured through national licensure. Using a mutual recognition model, the proposed solution is a National Registered Nurse License (NRNL) which removes state barriers for both Registered Nurses (RNs) and Advanced Practice Nurses (APRNs).	<i>The issue of professional licensure is viewed as being the purview of states.</i>
Scope of Practice - APRN	Communicating the roles of APRN	Losing CNS schools and individuals and they are undervalued	<p><i>ANA partners with other national advanced practice organizations to address barriers to APRN services and payment.</i></p> <p><i>Please see above comments related to 360° Value Proposition Process. RN and APRN Scope of Practice are part of ANA's Tier 2 work.</i></p>
Scope of Practice - APRN	<p>Access to high-quality, cost-efficient healthcare</p> <p>Eliminate policy barriers to high-quality APRN care and services</p> <p>Ameliorate false, preconceived biases against APRN care through policy analysis and outcomes research highlighting quality, effectiveness, safety, and cost efficiency.</p>	<p>Both, the irrational fear that RNs will subsume physician roles and the non-evidence based opinion that APRN care is substandard and requires physician "supervision" need to be addressed.</p> <p>Advanced practice nursing is essential for the health of individuals, communities, and health care facilities in order to improve access, sustain high quality, and contain the rising cost of health care.</p>	<p><i>ANA partners with other national advanced practice organizations to address barriers to APRN services and payment.</i></p> <p><i>This issues falls under activities related to ANA's <a href="#">Principles for Health System Transformation</a>.</i></p>

**Responses to ANA member survey on proposed strategic policy topics  
November 2016**

Proposed Strategic Policy Topic	What problems would be addressed via this proposed policy topic?	Why is the proposed policy topic necessary for the nursing profession?	Input from ANA
		ANA should facilitate research to demonstrate the positive care outcomes of NP, CNM, and CNS collaborative care, similar to the body of CRNA research.	
Scope of Practice - APRN	<ul style="list-style-type: none"> <li>-Allows for APNs independent practice</li> <li>-Improves patients access to care</li> <li>-Prevents lapses in care when a collaborating MD decides to leave practice or relocate</li> </ul>	<ul style="list-style-type: none"> <li>-Reflects the abilities and capabilities of practicing APNs</li> <li>-Removes limitations affecting APNs ability to practice to the full extent of their scope of practice and training</li> </ul>	<p><i>ANA partners with other national advanced practice organizations to address barriers to APRN services and payment.</i></p> <p><i>This issues falls under activities related to ANA's <a href="#">Principles for Health System Transformation</a>.</i></p>
Scope of Practice - APRN	<p>APNs are not a cheap physician substitute.</p> <p>How can APNs maintain the essence of their role in promotion of health and prevention of illness if they do not have the time with a patient to focus on these things? It seems to me that they are functioning more and more within the medical model and are less concerned with the whole individual.</p>	Nursing is a distinct science and is distinct from the practice of medicine. We have to safeguard the practice of nursing as nurses move forward into advanced practice.	<p><i>ANA partners with other national advanced practice organizations to address barriers to APRN services and payment.</i></p> <p><i>This issues falls under activities related to ANA's <a href="#">Principles for Health System Transformation</a>.</i></p>
Scope of Practice - APRN	Increase mobility for qualified practitioners seeking professional positions nationwide.	Barriers exist currently due to varying state requirements for CNP licensure.	<i>ANA supports the implementation of the <a href="#">APRN Consensus Model</a>.</i>

**Responses to ANA member survey on proposed strategic policy topics  
November 2016**

<b>Proposed Strategic Policy Topic</b>	<b>What problems would be addressed via this proposed policy topic?</b>	<b>Why is the proposed policy topic necessary for the nursing profession?</b>	<b>Input from ANA</b>
Scope of Practice - APRN	Health disparities, morbidity, mortality, and improved access to health.	To reach out to as many people to prevent long-term serious events, improve their health, and enhance the profession.	<i>ANA partners with other national advanced practice organizations to address barriers to APRN services and payment.</i>
Scope of Practice - APRN	Practicing independently without having to have a collaborating physician to work. I work doing House Call Home Assessments, so when a physician quits or is not available, then I cannot work to provide for my family, until another one is appointed. This can take up 3-6 months or until another one is hired. Tired of not being able to work or provide for my family because of not having adequate collaboration to be attached to my name to provide services that I have went to school and obtained a knowledge to provide in the community.	To better allow NPs to practice to the full extent of their degree and not have to wait to provide for their family, until one is appointed. It feels like handcuffs are applied and the physicians do not want to unleash the keys.	<i>ANA partners with other national advanced practice organizations to address barriers to APRN services and payment.</i>
Scope of Practice - APRN	Federal regulations of CAHs require 100% chart review of all "mid-level" providers, including APRNs. If APRNs are to assume a greater role as primary care providers in rural and frontier settings to address healthcare for underserved areas, barriers such as physician oversight must be addressed. This is particularly important in states with a shortage of providers in	This proposed policy topic is necessary for advanced practice nurses to assume care and reduce the barriers for healthcare for an underserved population in rural US counties as well as increase autonomy of APRNs.	<i>ANA partners with other national advanced practice organizations to address barriers to APRN services and payment.</i>

**Responses to ANA member survey on proposed strategic policy topics  
November 2016**

Proposed Strategic Policy Topic	What problems would be addressed via this proposed policy topic?	Why is the proposed policy topic necessary for the nursing profession?	Input from ANA
	rural and frontier areas and that have a Nurse Practice Act that allows for independent practice of APRNs.		
Scope of Practice - APRN	Nurse to Consumer Relationships (strategic goal). Access to quality healthcare	By education via social media and direct interaction with potential consumers, this focus will improve the awareness of the public re: NP healthcare providers who remain mired in role confusion with their professional RN and physician and PA colleagues.	<i>This is one area of focus within ANA's 2017 – 2020 Strategic Plan.</i>
Scope of Practice - APRN	Access to care, especially primary care, mental health care, and substance treatment	The Surgeon General has just released how addiction is as large a problem as diabetes. APNs in primary care, pediatrics, psych, women's health, in acute care, need to be at the forefront of this battle.	<i>ANA partners with other national advanced practice organizations to address barriers to APRN services and payment. ANA also partners with organizational affiliates with specialty knowledge in this area.</i>
Scope of Practice - APRN	Improve access, ensure consistent national professional practice, afford appropriate autonomy to APRNs	Need to address access to care issues and collaborative agreements that restrict the care that can be provided by APRNs.	<i>ANA partners with other national advanced practice organizations to address barriers to APRN services and payment.</i>  <i>This issues falls under activities related to ANA's <a href="#">Principles for Health System Transformation</a>.</i>

**Responses to ANA member survey on proposed strategic policy topics  
November 2016**

<b>Proposed Strategic Policy Topic</b>	<b>What problems would be addressed via this proposed policy topic?</b>	<b>Why is the proposed policy topic necessary for the nursing profession?</b>	<b>Input from ANA</b>
Scope of Practice - APRN	Ensure APRNs have full practice authority (e.g., clear for home health care and medical supplies).	From the care and education at the bedside to the APRN scope of practice, the profession of nursing can make a difference. It is nurses providing public health, school nursing, hospital nursing and parish nursing. ANA needs to promote nursing professional identity and scope of practice.	<i>This is a fundamental goal of ANA's practice, policy and advocacy efforts, including ANA's stewardship of the professional nursing scope and standards of practice process.</i>
Scope of Practice - APRN	Access to providers	NPs are educationally prepared to fill health care gaps, but are prevented from doing so by CMS and many states.	<i>ANA partners with other national advanced practice organizations to address barriers to APRN services and payment.</i>  <i>This issues falls under activities related to ANA's <a href="#">Principles for Health System Transformation</a>.</i>
Scope of Practice - APRN	Barriers to accessing care in states where APRN practice is limited by outdated rules restricting practice when acting within the scope of practice and training	To advance the profession by including advanced practice registered nurses in ANA's strategic policy thereby strengthening the voice of all registered nurses. This will increase access to care for millions of Americans.	<i>ANA partners with other national advanced practice organizations to address barriers to APRN services and payment.</i>  <i>This issues falls under activities related to ANA's <a href="#">Principles for Health System Transformation</a>.</i>
Scope of Practice - APRN	Allowing APRNs to practice to the full extent of their education and training.	APRN practice and access to care is critical to moving nursing forward.	<i>ANA partners with other national advanced practice organizations to address barriers to APRN services and payment.</i>

**Responses to ANA member survey on proposed strategic policy topics  
November 2016**

Proposed Strategic Policy Topic	What problems would be addressed via this proposed policy topic?	Why is the proposed policy topic necessary for the nursing profession?	Input from ANA
			<i>This issues falls under activities related to ANA's <a href="#">Principles for Health System Transformation</a>.</i>
Scope of Practice - APRN	Scope of Practice, particularly for APRNs	There simply are too many barriers to practicing as an APRN and there are many, many people who need their services, but due to the barriers, won't get the services they so desperately need.	<i>ANA partners with other national advanced practice organizations to address barriers to APRN services and payment.</i>  <i>This issues falls under activities related to ANA's <a href="#">Principles for Health System Transformation</a>.</i>
Scope of Practice - APRN	Consistent and uniform representation of profession and role with name recognition. Remove any and all other arbitrarily imposed references and disallow their use by insurance companies, institutions, government agencies and the like. Examples include midlevel, physician extender, etc. It pains me to even write those terms.	Anything other than our certified and licensed title undermines professional credibility, scope of practice, and detracts from the value of the role.	<i>This is a current policy objective for ANA.</i>
Scope of Practice - APRN	Health Care Shortage Autonomy for ARNPs	This policy topic is not new to nursing. It is a state issue. Unfortunately, Florida does not allow for ARNPs to have independent practice. The evidence already supports the safety and efficacy of independent practice.	<i>ANA partners with other national advanced practice organizations to address barriers to APRN services and payment.</i>  <i>This issues falls under activities related to ANA's <a href="#">Principles for Health System Transformation</a>.</i>

**Responses to ANA member survey on proposed strategic policy topics  
November 2016**

Proposed Strategic Policy Topic	What problems would be addressed via this proposed policy topic?	Why is the proposed policy topic necessary for the nursing profession?	Input from ANA
Scope of Practice - APRN	Advanced practice nurses would have equally contributions as other professionals.	The growth of the nursing profession. Transparency in explaining the roles of DNP and PhD holders to all disciplines.	
Scope of Practice - APRN	Shortage of PCP and research proven advanced care by APRN's with collaborative relationships.	To be able to practice at the tops of their license and provide exceptional care by prevention and relationships.	
Scope of Practice - APRN	Nurses and APRNs would practice to top of license improving patient, team and nurse engagement and satisfaction, as well as outcomes through interdisciplinary planning, care and quality improvement.	Increased demand for services across the care continuum with need to improve affordable access to high quality care.	<p><i>ANA partners with other national advanced practice organizations to address barriers to APRN services and payment.</i></p> <p><i>This issues falls under activities related to ANA's <a href="#">Principles for Health System Transformation</a>.</i></p> <p><i>With regard to RN Scope of Practice, ANA's policy approach is guided by the OJIN articles series, <a href="#">Elimination of Barriers to RN Scope of Practice: Opportunities and Challenges</a>.</i></p>
Scope of Practice - APRN	Work to bring autonomy to practice for APNs in all states.	APNs should be recognized as autonomous healthcare providers who can address healthcare needs in many area of the country lacking healthcare.	<p><i>ANA partners with other national advanced practice organizations to address barriers to APRN services and payment.</i></p> <p><i>This issues falls under activities related to ANA's <a href="#">Principles for Health System Transformation</a>.</i></p>

**Responses to ANA member survey on proposed strategic policy topics  
November 2016**

Proposed Strategic Policy Topic	What problems would be addressed via this proposed policy topic?	Why is the proposed policy topic necessary for the nursing profession?	Input from ANA
Scope of Practice - APRN	Does the ANA address this topic?	States vary in what NP are allowed to practice	<p><i>ANA partners with other national advanced practice organizations to address barriers to APRN services and payment.</i></p> <p><i>This issues falls under activities related to ANA's <a href="#">Principles for Health System Transformation</a>.</i></p>
Scope of Practice - APRN	Lack of consistency of APRN role interpretation across state lines creates challenges for APRN practice at the highest level of education. Lack of consistent interpretation and practice for all APRN roles (NP, CNS, CNM, CRNA) across all states creates unnecessary road blocks for practice and inhibits APRN ability to positively impact patient care in an autonomous way; as well as devalues the APRN role by boards of nursing.	To continue to clarify and advance the understanding of APRN role across the United States rather than just in pockets of the US.	<p><i>ANA partners with other national advanced practice organizations to address barriers to APRN services and payment.</i></p> <p><i>This issues falls under activities related to ANA's <a href="#">Principles for Health System Transformation</a>.</i></p>
Scope of Practice - APRN	Costs of these APRN state by state battles for a national initiative is crippling task forces. Need to investigate a legislative means that would be less burdensome.	APRNs are being handcuffed by physician control to protect turf and limit access to care. Funding is limited for state by state battles, need to enact a national consensus law.	<p><i>ANA partners with other national advanced practice organizations to address barriers to APRN services and payment.</i></p> <p><i>This issues falls under activities related to ANA's <a href="#">Principles for Health System Transformation</a>.</i></p>

**Responses to ANA member survey on proposed strategic policy topics  
November 2016**

Proposed Strategic Policy Topic	What problems would be addressed via this proposed policy topic?	Why is the proposed policy topic necessary for the nursing profession?	Input from ANA
Scope of Practice - APRN	State barriers create inequalities and are a deterrent to patient care and population health. ARNP licensure must be defined at the federal level to ensure access, quality, and payment.	see above	<p><i>ANA partners with other national advanced practice organizations to address barriers to APRN services and payment.</i></p> <p><i>This issues falls under activities related to ANA's <a href="#">Principles for Health System Transformation</a>.</i></p>
Scope of Practice - APRN - Home Health	Allow nurse practitioners to order home health services.	Doing so would reduce emergency room visits.	<p><i>ANA strongly supports the <a href="#">Home Health Care Planning Improvement Act 2015 (S. 578, H.R.1342)</a>. This bipartisan legislation would amend the Medicare law to allow advanced practice nurses (APRNs) – a group that includes nurse practitioners, clinical nurse specialists and certified nurse midwives – to sign home health plans of care and certify Medicare patients for the home health benefit. <a href="#">RN Action focus</a></i></p>
Scope of Practice - APRN - Mental Health	Increasing awareness of mental health issues and interest in need for evidence based solutions to provide care as well as across the board need for more and available providers of healthcare services	As care providers we see the need of many people to obtain health care and struggle to provide the care necessary to improve quality of life and overall mortality. With decreasing MDs in certain areas of expertise and locales, NPs attempt to fill that void. The existing supervision clause hampers practice options for many. We as providers do not practice in a void and are aware of times	<p><i>ANA has partnered with the American Psychiatric Nurses Association, a Premier Organizational Affiliate, on issues related to the psych-mental health nursing workforce.</i></p>

**Responses to ANA member survey on proposed strategic policy topics  
November 2016**

<b>Proposed Strategic Policy Topic</b>	<b>What problems would be addressed via this proposed policy topic?</b>	<b>Why is the proposed policy topic necessary for the nursing profession?</b>	<b>Input from ANA</b>
		to consult with others. This is actually an insulting clause of practice.	
Scope of Practice - LPN/LVN	A more standardized scope of practice for LPN/LVNs throughout the U.S. Perhaps at minimum, a standardized, evidence-based, evaluation framework to help guide/support the decision-making in determining how to best use the nursing resource skill mix available, based upon skill and competency.	Nursing shortages, increased patient acuity, and other mounting pressures have brought pressure upon many organizations to look at changing their nursing care delivery models. These models are focusing on teamwork, collaboration, and the tracking of nursing quality indicators to support the increased use of LPNs in their skill mix. These integrated skill level models facilitate a paradigm shift from an individual to a team mindset (Harris & Hall, 2012, Venturato & Drew, 2010). In healthcare, the team can be everything.	

**Responses to ANA member survey on proposed strategic policy topics  
November 2016**

Proposed Strategic Policy Topic	What problems would be addressed via this proposed policy topic?	Why is the proposed policy topic necessary for the nursing profession?	Input from ANA
Scope of Practice - RN	<p>1. Nurses working for an acute care organization and continuing their role in the community to ensure continuity of care and protection and guidelines for the nurse</p> <p>2. Nurses and technology working for them. There should be a law that every level of nursing is involved in the implementation of technology. This will ensure nurses are who are the end user will not be required to manually enter information into an electronic medical record when the system can automatically complete the task. i.e. Supply charges, procedure charges, pt. reports.</p>	<p>This topic is important for the nursing profession because nurses are the heart of healthcare and we touch every aspect of the patients care, Clinically and financially.</p>	<p><i>With regard to RN Scope of Practice, ANA's policy approach is guided by the OJIN articles series, <a href="#">Elimination of Barriers to RN Scope of Practice: Opportunities and Challenges</a>.</i></p>
Scope of Practice - RN	<p>Current care models are no longer effective based on patient acuity, integration of best practices, and regulatory requirements.</p>	<p>Nursing is expected to practice to highest level of education and licensure but current often do not permit this. Many nurses become "task oriented" rather than using critical thinking and decision making skills.</p>	<p><i>With regard to RN Scope of Practice, ANA's policy approach is guided by the OJIN articles series, <a href="#">Elimination of Barriers to RN Scope of Practice: Opportunities and Challenges</a>.</i></p>
Scope of Practice - RN	<p>increasing access to more primary care providers</p>	<p>RNs are not practicing to their full scope in primary care. I am not referring to APRNS. RNs can practice and contribute much more to primary care delivered in</p>	<p><i>With regard to RN Scope of Practice, ANA's policy approach is guided by the OJIN articles series, <a href="#">Elimination of Barriers to RN Scope of Practice: Opportunities and Challenges</a>.</i></p>

**Responses to ANA member survey on proposed strategic policy topics  
November 2016**

Proposed Strategic Policy Topic	What problems would be addressed via this proposed policy topic?	Why is the proposed policy topic necessary for the nursing profession?	Input from ANA
		the community.	
Scope of Practice - RN - Behavioral Health	<p>This policy topic would address the morbidity and early mortality of illnesses for people with serious mental illness.</p> <p>The 2007 National Wellness Summit for People with Mental Illness reported that people with serious mental illness die 20-25 earlier than the general population, due primarily to preventable illnesses associated with lifestyle.</p> <p>The landmark study gave rise to a call to action to extend the lives of people with serious mental illness by ten years, within 10 years (the 10 X 10 campaign).</p>	<p>Nurses work in community psychiatric, mental health and behavioral health settings. Yet, nursing is typically under-represented on interdisciplinary teams and executive leadership.</p> <p>At the same time, the Affordable Care Act is pressing for improved outcomes through the Triple Aim. This proposed policy topic is necessary for the nursing profession to demonstrate nursing's leadership in health care systems that have been failing this underserved population. The nursing profession must be activated in community mental health settings to practice to the full extent of their license.</p>	<p><i>ANA has partnered with the American Psychiatric Nurses Association, a Premier Organizational Affiliate, on issues related to the psych-mental health nursing workforce.</i></p> <p><i>ANA is also home to the <a href="#">Minority Fellowship Program</a> funded by the Substance Abuse and Mental Health Services Administration (SAMHSA). This program supports the attainment of advanced degrees by ethnic and minority nurses in the area of psychiatric-mental health nursing.</i></p>
Scope of Practice - RN - Professionalism	(Lack of) Communication, positive image, and proactive behaviors resulting in an ability to relate well to other healthcare professionals on equal footing	The Dare to Care campaign diminished the value of nursing knowledge with its emphasis on caring only. The full scope of the role and responsibilities of the RN have been challenged since its inception. Autonomy and accountability are not supported with the use of EHR and thus unless cued, many nurses miss care that	

**Responses to ANA member survey on proposed strategic policy topics  
November 2016**

Proposed Strategic Policy Topic	What problems would be addressed via this proposed policy topic?	Why is the proposed policy topic necessary for the nursing profession?	Input from ANA
		has always been a part of the discipline. Believing that nurses follow more than lead is a mistaken perception that must be modified to continually improve healthcare for all.	
Scope of Practice -RN	Would allow nurses to provide needed care to the public without restrictions as long as nurses worked within their scope of practice	Our citizens need access to health care and nurses are equipped with the knowledge and skills to provide quite a bit of the care needed by our citizens. By allowing nurses of all levels to work at the fullest extent of their authority would allow healthcare to reach individuals who need it and will show how important nurses are to attaining a healthy citizenship.	<i>With regard to RN Scope of Practice, ANA's policy approach is guided by the OJIN articles series, <a href="#">Elimination of Barriers to RN Scope of Practice: Opportunities and Challenges</a>.</i>
Scope of Practice -RN	RN's working to full scope of practice and license. Expand access to primary care especially to complicated, special needs individuals and families.	With short appts due to cost constraints, patients, especially with chronic health problems, receive less instruction/follow up/problem solving from MD and NP/PA. Much of this care is RN work, not requiring diagnosis or prescribing. RN clinics could provide frequent, individualized care to improve health outcomes. I know this idea is probably not "strategic" enough, but some direct actions that involve actual patient care would be useful when wading through broad idea of "increasing nurse to	<i>With regard to RN Scope of Practice, ANA's policy approach is guided by the OJIN articles series, <a href="#">Elimination of Barriers to RN Scope of Practice: Opportunities and Challenges</a>.</i>

**Responses to ANA member survey on proposed strategic policy topics  
November 2016**

Proposed Strategic Policy Topic	What problems would be addressed via this proposed policy topic?	Why is the proposed policy topic necessary for the nursing profession?	Input from ANA
		consumer positioning" and "significantly impact patient and nurse outcomes and generate revenue in priority programmatic areas".	
Scope of Practice -RN - Professionalism	Nurses as a whole (staff, administrators) cannot articulate their professional role. They still see themselves as task-doers instead of critical thinkers necessary to patient safety and survival.	There are always those wanting to replace nursing with lower-paid staff because they, too, see nurses as defined by their tasks. The attempt was almost successful in the 1990s and will likely be successful if tried again. Nurses need to understand that they have an independent practice and be able to articulate it. This includes APNs who must not see themselves as somehow "beyond" a nurse. They are now just a nurse with a different functional role.	<i>ANA continues to advocate for the right provider at the right time for the right type of care needed by the patient. ANA follows the principles established in <a href="#">ANA's Essential Principles for Utilization of Community Paramedics</a>.</i>
Staffing	At the very least, or maybe a start would be, maximum staffing ratios.	Too many times nurses are forced to care for patients at a ratio that is unsafe. Nurses accept the assignments in order to maintain employment.	<i>ANA recently assessed its current work using a 360° Value Proposition Process, which involves a complete environmental scan (reflecting the views of ANA members, the nursing profession and the industry); along with an internal review of the opportunities and risks; the personnel and financial resources needed; and confirmation of alignment with ANA's mission, vision and strategic plan.</i>

**Responses to ANA member survey on proposed strategic policy topics  
November 2016**

Proposed Strategic Policy Topic	What problems would be addressed via this proposed policy topic?	Why is the proposed policy topic necessary for the nursing profession?	Input from ANA
			<p><i>The outcome of the process is the categorization of ANA’s current work into one of three tiers that reflect the association of the work to ANA’s strategic plan and the level of personnel and financial resourcing required. Some work was moved to a “Stop Doing” list to ensure resources for new work.</i></p> <p><i>Optimal Nurse Staffing is a Tier 1 topic for ANA; one of only five topics identified as the highest priority for activity across the ANA Enterprise.</i></p>
Staffing	Work overload, long hours with no breaks, patient safety issues, nurse longevity/burn-out rates	In order to improve the profession of nursing, we must first go back to basics and improve working conditions on the floor to concentrate on more abstract issues, such as research.	<i>Please see above comments related to 360° Value Proposition Process and staffing.</i>
Staffing	Unsafe nurse to patient ratios place patients at risk, increase the likelihood of errors, and contribute to nurse burnout.	Nurse to patient ratios have been a topic of contentious debate for many years. Despite the attention, nurses are commonly assigned to ever increasing numbers of patients. This trend must be stopped to protect both the patients and the staff.	<i>Please see above comments related to 360° Value Proposition Process and staffing.</i>

**Responses to ANA member survey on proposed strategic policy topics  
November 2016**

<b>Proposed Strategic Policy Topic</b>	<b>What problems would be addressed via this proposed policy topic?</b>	<b>Why is the proposed policy topic necessary for the nursing profession?</b>	<b>Input from ANA</b>
Staffing	Establish minimum nurse to patient ratios.	Patient safety.	<i>Please see above comments related to 360° Value Proposition Process and staffing.</i>
Staffing	We move from staffing systems based on the number of patients in bed at midnight (volume) to a system that drives staff based on the intensity of nurses' work (which serves as a proxy measure for patient acuity)	Staffing based on volume of patients alone fails to consider that unique state of each patient's condition and results in sub optimum care can lead to increased length of stay, decreased reimbursement because of compromises in quality, and most importantly, increased patient suffering.	<i>Please see above comments related to 360° Value Proposition Process and staffing.</i>
Staffing	Where I work we recently rolled out EPIC. It was known that efficiency would decrease by 30%. When the manager was asked about the need to staff up, she stated that we would be sufficiently staffed...but for a normal day. We were not staffed for a decrease in efficiency. We are typically understaffed which is not safe for the ED. The doctors are an independent group employed by the hospital and they did not increase their staffing either. The outcome could have been very bad.	We don't need increased mortality or injury rates due to unsafe staffing. It is not only unsafe for patients but is unsafe for all staff and ultimately the hospital. I do have my doubts that they would be supportive if an event did occur.	<i>Please see above comments related to 360° Value Proposition Process and staffing.</i>
Staffing	safe numbers of patient to nurse ratios in long term care setting- acuity has increased, but staffing has not changed	Improved safety for patient Improved healthcare outcomes Improved nurse job satisfaction in long term care	<i>Please see above comments related to 360° Value Proposition Process and staffing.</i>

**Responses to ANA member survey on proposed strategic policy topics  
November 2016**

<b>Proposed Strategic Policy Topic</b>	<b>What problems would be addressed via this proposed policy topic?</b>	<b>Why is the proposed policy topic necessary for the nursing profession?</b>	<b>Input from ANA</b>
Staffing	The nurse patient ratio is 1:20 and even goes to 34 in some. I have worked in nursing facilities thus aware of the problems nurses go through when handling demanding patients included in that ratio , time management gets hard thus resulting in overtime. Thus want to emphasize how this can be made better	Staffing is essential part in delivery of nursing care thus it becomes improving when it comes to quality care delivery in nursing homes	<i>Please see above comments related to 360° Value Proposition Process and staffing.</i>
Staffing	Chronic understating, nursing burnout, patient safety and satisfaction, nurse and provider satisfaction, safer, quality care.	Nurses have been chronically understaffed due to a real or perceived nursing shortage, heavy administration tactics and lack of public policy by state, or lack of public policy enforcement by state in those states which have policy to support better staffing.	<i>Please see above comments related to 360° Value Proposition Process and staffing.</i>
Staffing	New computer program makes staffing safety even more important as it takes considerable time	Pt safety	<i>Please see above comments related to 360° Value Proposition Process and staffing.</i>
Staffing	Adequate Staffing	Decreases patient falls, decreases medical errors, increases time for patient education	<i>Please see above comments related to 360° Value Proposition Process and staffing.</i>
Staffing	Patient safety and quality of care. Increasing retention/decreasing turnover would also be addressed.	The current shortage of nurses is a great challenge but we know that the shortage will increase in the future. I hope ANA can develop policies to guide the	<i>Please see above comments related to 360° Value Proposition Process and staffing.</i>

**Responses to ANA member survey on proposed strategic policy topics  
November 2016**

Proposed Strategic Policy Topic	What problems would be addressed via this proposed policy topic?	Why is the proposed policy topic necessary for the nursing profession?	Input from ANA
		profession on staffing needs.	
Staffing	That hospitals are often not properly staffed for the required amount of work and care needed to be given patients under our care.	Without proper staff patients will suffer skin breakdown and increase risk for adverse event while in the hospital.	<i>Please see above comments related to 360° Value Proposition Process and staffing.</i>
Staffing	<p>1. Nurse staff to patient ratios. Current policy isn't working.</p> <p>2. Outcome Measures that demonstrate patient and or nurse responsibility related to nursing workload.</p> <p>3. Discrimination, harassment of nurses due to age, disability, tenure (pay), and retaliation for patient safety issues. Safety in the workplace. Whistle blower laws specific to nurses. This must be a priority.</p>	Nurses that age become targeted and threatened by/with the loss of jobs when they show signs of aging and because of experience (not just decreased physical ability) are less tolerant of poor patient nurses who speak up against poor care are forced out. We should have a voice and if our training, education and experience are viewed as a liability then we shall move forward to enact and force law for the sake and safety of those we serve. The lack of empowerment is unconscionable. Empowered nurses should be supported to speak up (employers and legislators) This is our reality.	<i>Please see above comments related to 360° Value Proposition Process and staffing.</i>
Staffing	Hospitals are too quick to increase the ratio of patients per nurse at the end of the fiscal year by putting holds on hiring to fill critical positions	Patient care and safety is in jeopardy and the nurses' health and emotional well-being as well	<i>Please see above comments related to 360° Value Proposition Process and staffing.</i>

**Responses to ANA member survey on proposed strategic policy topics  
November 2016**

<b>Proposed Strategic Policy Topic</b>	<b>What problems would be addressed via this proposed policy topic?</b>	<b>Why is the proposed policy topic necessary for the nursing profession?</b>	<b>Input from ANA</b>
Staffing	As healthcare and specifically hospitals and health systems face continuous diminished reimbursement, the all RN care model is called into questions financially. We need to look at alternate staffing models where RNs can work at the top of license but additional team members help deliver care.	The financial stability of hospitals will require new models. In addition the continuing RN shortage will require creative use of staff to deliver quality care.	<i>Please see above comments related to 360° Value Proposition Process and staffing.</i>
Staffing	Quality of care Nurse burn out Safety	Many states such as California have set ratios for nurse to patient care. However, there are states where there is still a shortage of nurses and the ration can be up to 8 patients to one nurse. Quality and safe care can be at risk when nurses have to focus on 8 different patients with different level of acuity. The stress of providing high level care can also lead to nurse burn out which in turn can further affect quality and safety of care.	<i>Please see above comments related to 360° Value Proposition Process and staffing.</i>
Staffing	Nurse staffing	Patient safety; caregiver burnout; increased consumer and staff satisfaction of facilities; decreased risk of adverse events.	<i>Please see above comments related to 360° Value Proposition Process and staffing.</i>
Staffing	All the problems that arise from nurses being overworked and understaffed.	Shows that good working conditions are essential for quality patient care. Shows how important nursing is to patient	<i>Please see above comments related to 360° Value Proposition Process and staffing.</i>

**Responses to ANA member survey on proposed strategic policy topics  
November 2016**

Proposed Strategic Policy Topic	What problems would be addressed via this proposed policy topic?	Why is the proposed policy topic necessary for the nursing profession?	Input from ANA
		success.	
Staffing	The issue with safe staffing for patient safety and improve quality of care for our patients.	Nurses are carrying the responsibility of giving quality of care to our patients and when we are understaffed that affects the quality and safety of patients and places nurses licensure in danger. Nurses mentally, physically and emotionally suffer from working short and or being force to work overtime because of feeling guilty or sympathetic. The shortage of nurses is not helping the staffing issue and if we don't improve in this area then this profession may take a huge lost both in numbers and in respect from the public.	<i>Please see above comments related to 360° Value Proposition Process and staffing.</i>
Staffing	Inadequate staffing in the ED	To provide excellent nursing care there must be adequate staffing.	<i>Please see above comments related to 360° Value Proposition Process and staffing.</i>
Staffing	Safe staffing for staff and patients	Safety, better implementation of resources, better outcomes. Essential in fast paced nursing world.	<i>Please see above comments related to 360° Value Proposition Process and staffing.</i>

**Responses to ANA member survey on proposed strategic policy topics  
November 2016**

<b>Proposed Strategic Policy Topic</b>	<b>What problems would be addressed via this proposed policy topic?</b>	<b>Why is the proposed policy topic necessary for the nursing profession?</b>	<b>Input from ANA</b>
Staffing	<ol style="list-style-type: none"> <li>1. Patient safety and safe staffing levels</li> <li>2. Nurses licenses on the line</li> <li>3. Litigation</li> <li>4. Nurse job satisfaction and burnout</li> <li>5. Nurse turnover rate and nurses leaving the bedside</li> <li>6. Nurses leaving the profession</li> </ol>	<p>Without nationally mandated patient-nurse ratios, employers refuse to staff nurses adequately, and patients experience higher rates of adverse events including injury and death. Nurse's licenses get put on the line when these events occur, which can come with litigation from the patient or family against the nurse and the organization. Nurses get burnt out year after year when there are too many patients, and not enough staff. They either leave the bedside by pursuing higher education (ex: nurse practitioner), choosing non-bedside nursing areas (ex: informatics), or by leaving the nursing profession altogether and never looking back.</p>	<p><i>Please see above comments related to 360° Value Proposition Process and staffing.</i></p>
Staffing	Patient safety and nursing burnout.	<p>Provides proper staff to patient ratios to ensure patient safety and decrease errors in treatments and medications. Helps prevent injuries to nursing personnel and patients. Patients are human beings not widgets, everyone is different; however management fails to understand that or refuses to a knowledge that fact in till someone gets injured.</p>	<p><i>Please see above comments related to 360° Value Proposition Process and staffing.</i></p>

**Responses to ANA member survey on proposed strategic policy topics  
November 2016**

<b>Proposed Strategic Policy Topic</b>	<b>What problems would be addressed via this proposed policy topic?</b>	<b>Why is the proposed policy topic necessary for the nursing profession?</b>	<b>Input from ANA</b>
Staffing	Inadequate RN staffing and the stress that it causes has become a significant & widespread problem across the country and in a variety of nursing care venues. This condition creates unsafe working conditions for the RN and puts their patients' health and even their lives at risk.	In order to deliver quality nursing care, there has to be enough RNs at the bedside. With healthcare costs rising, the healthcare industry is finding ways to save money wherever they can and often times that means cutting the RN staff. It appears to be a quick fix but it is a dangerous one. ANA is the advocate for the Nursing Profession and therefore should take up this fight until there is nothing less than a satisfactory outcome. Such action will make ANA a nursing & patient hero, recognized as a power to be revered, joined and dealt with.	<i>Please see above comments related to 360° Value Proposition Process and staffing.</i>
Staffing	How many hours of call should safely be the max? What about call/work mix hours max? What are the health concerns? Currently in our PACU/OR/SSU we take call. If we come in in the wee hours of the morning for a case and are scheduled to work that day, we flow right into our regularly scheduled shift. Our staffing numbers have been drastically cut so there is no one to call in to take our place. I am sure this happens elsewhere.	Patient and nursing safety is affected from too many hours of on-call callback and work. Too many hours of work cause burn out, that causes the nurse to quit nursing, which contributes to the nursing shortage. We don't have a shortage of nurses. We have shortage of nurses still working as nurses.	<i>Please see above comments related to 360° Value Proposition Process and staffing.</i>
Staffing	Taking into consideration the acuity of the patients.	It affects patient safety.	<i>Please see above comments related to 360° Value Proposition Process and staffing.</i>

**Responses to ANA member survey on proposed strategic policy topics  
November 2016**

Proposed Strategic Policy Topic	What problems would be addressed via this proposed policy topic?	Why is the proposed policy topic necessary for the nursing profession?	Input from ANA
Staffing	<p>Alternative solutions to working multiple overtime shifts to alleviate shortages in staffing.</p> <p>As an adjunct nursing faculty working in a RN to BSN program, my students are continually sharing their experiences working overtime. Employers often pressure nurses to comply or offer monetary incentives as a stop-gap measure.</p>	<p>One of the primary healthcare objectives is patient safety. This practice so obviously disregards the basic tenets of patient safety. Additionally, I must mention the fact that most of my students are employed by "magnet-status" hospitals. Again, the idea that Magnet hospitals value nurses is not always reflected in real practice. I am anecdotally finding that assessment of staff satisfaction and turnover can be skewed or misrepresented by the certified institution. For the Magnet credential to "mean something" tangible, staffing practices need to be further addressed.</p>	<p><i>Please see above comments related to 360° Value Proposition Process and staffing.</i></p>
Staffing	<p>Quality and safety of care. Health and longevity of RN work time.</p>	<p>I feel it's a huge problem when nurses should have the time to know all about a patient's illness and medications, but for time they're just handing out meds asap. If there were better standards for taking into consideration the complexity and number of meds a patient is on, then really limiting the number of patients that nurse has to take care of, they would provide much safer care. They also really need more help with more CNAs or LVNs to perform the easier tasks to free up</p>	<p><i>Please see above comments related to 360° Value Proposition Process and staffing.</i></p>

**Responses to ANA member survey on proposed strategic policy topics  
November 2016**

Proposed Strategic Policy Topic	What problems would be addressed via this proposed policy topic?	Why is the proposed policy topic necessary for the nursing profession?	Input from ANA
		time for better quality and safer care.	
Staffing	Need to pass this safe staffing law to protect our patients, nurses and prevent retaliation when reporting staffing and safety concerns	See above	<i>Please see above comments related to 360° Value Proposition Process and staffing.</i>
Staffing	Monitor the staff answers to AACN HWE questions, before and after an implementation if needed.	Following EBP gives standards to the staffing goal. May give guidelines to other institutions to achieve or maintain a HWE.	<i>Please see above comments related to 360° Value Proposition Process and staffing.</i>
Staffing	Nurses are routinely over-worked, understaffed, and forced to work long hours. Advocating for legislation calling for mandatory staffing minimums and tighter regulation of overtime and mandatory double shifts in the case of a no-show is called for.	Until nurses prioritize their own health, they will continue to be burned out and stressed from their work environment with little to no motivation or energy to exercise, shop for and cook healthy foods, etc. In order to model healthy behavior, nursing work environments must be healthy as well.	<i>Please see above comments related to 360° Value Proposition Process and staffing.</i>
Staffing	We need more non-observational research in the area of nursing workload and characteristics of the nurse on patient outcomes.	I think this type of research is essential in order to demonstrate the value of the RN, improve the work environment and increase patient quality and safety outcomes.	<i>Please see above comments related to 360° Value Proposition Process and staffing.</i>

**Responses to ANA member survey on proposed strategic policy topics  
November 2016**

<b>Proposed Strategic Policy Topic</b>	<b>What problems would be addressed via this proposed policy topic?</b>	<b>Why is the proposed policy topic necessary for the nursing profession?</b>	<b>Input from ANA</b>
Staffing	Many hospitals, clinics and other elements of the healthcare system are experiencing demand for services that overwhelm their capacity; however, facilities are often shifting this burden onto professional staff (through higher patient-caregiver ratios) rather than investing in fundamental capacity expansion.	Nurses are being pressured to care for more and sicker patients, often at the expense of safety and quality. We have the collective power to push for more sustainable solutions that meet the needs of and demand from healthcare consumers	<i>Please see above comments related to 360° Value Proposition Process and staffing.</i>
Staffing	Increase the number of nurses at the bedside, retain nurses at the bedside, and improve the working conditions and working environment for the bedside nurse.	Bedside nursing has lost its appeal to the majority of people entering the nursing profession. There has been so much push, rightfully so, to advance careers in nursing with the ARNP that NOBODY aspires to be a bedside nurse. We need to elevate the bedside nurse, and improve their working condition (nurse-to-patient ratio), in order to increase the number of nurses at the bedside and to RETAIN these nurses as the bedside. There is no substitute for an experienced nurse, and if we don't find a way to keep these nurses at the bedside, patient care is going to suffer.	<i>Please see above comments related to 360° Value Proposition Process and staffing.</i>
Staffing	Individual state regulations set by DHEC should be re-evaluated for long term care.	Lower nurse to patient staff ratio.	<i>Please see above comments related to 360° Value Proposition Process and staffing.</i>

**Responses to ANA member survey on proposed strategic policy topics  
November 2016**

<b>Proposed Strategic Policy Topic</b>	<b>What problems would be addressed via this proposed policy topic?</b>	<b>Why is the proposed policy topic necessary for the nursing profession?</b>	<b>Input from ANA</b>
Staffing	1. Lack of licensed professionals aka RN's in these facilities resulting in subpar care. 2. Grossly underpaid nurses and aides in these facilities resulting in quality personnel. 3. High nurse to patient ratio.	It is necessarily because nurses working in these facilities typically are not held to a standard comparable to someone working in the hospital. They are overworked and underpaid.	<i>Please see above comments related to 360° Value Proposition Process and staffing.</i>
Staffing	Patient safety and medication error prevention	To increase nursing workforce by preventing nurse burn outs and nurses leaving the profession	<i>Please see above comments related to 360° Value Proposition Process and staffing.</i>
Staffing	Education, recruitment, and retention of nurses at all levels including BSN, MSN, and doctorate level.	To continue to meet frontline nursing workforce demands in all fields with BSN nurses. Meet primary provider demands with NPs and rural women's needs with nurse midwives. Finally, to advance the profession's science and develop nurse leaders in all health care sectors with doctorate prepared nurses.	<i>Please see above comments related to 360° Value Proposition Process and staffing.</i>

**Responses to ANA member survey on proposed strategic policy topics  
November 2016**

<b>Proposed Strategic Policy Topic</b>	<b>What problems would be addressed via this proposed policy topic?</b>	<b>Why is the proposed policy topic necessary for the nursing profession?</b>	<b>Input from ANA</b>
<p>Optimal Safe Staffing - Certified Nursing Assistants</p>	<p>A study of the amount of time required to provide adequate care for each resident vs how many residents for which each CNA is responsible would reveal a vastly inadequate staffing ratio.</p> <p>The number of Licensed Nurses is also inadequate. Estimated amount of time required to complete each task versus actual time allotted to complete tasks does not compute! Montana State Law should be rewritten. to specifically designate in numbers i.e. X numbers of CNAs and X numbers of nurses must on duty providing care to X number of patient/residents and should require additional staff during peak care hours!</p>	<p>Burnout, rapid turnover of staff and nursing shortages could be eradicated if working conditions were improved beyond tolerable to ideal! Patient safety and satisfaction would improve. Improved outcomes for patients would cost less overall than falls, infections, rehospitalizations, etc. that occur under poorly staffed conditions. Nurses could take pride in themselves, their profession and their work. "Nursing Home" shouldn't be a dirty word!</p>	<p><i>Please see above comments related to 360° Value Proposition Process and staffing.</i></p>
<p>Optimal Safe Staffing - Certified Nursing Assistants</p>	<p>1) Policy, Working hours: CNAs cannot be required to work double shifts by administration.</p> <p>2) Policy, time off between shifts: CNAs must be given opportunity for a minimum of 10 hours' rest between shifts of work.</p>	<p>Registered Nurses holding administrative and supervisory positions in long term care facilities are ultimately responsible for the quality of care provided to this vulnerable population. Requiring CNAs to work double shifts at least once or twice a week, then scheduling them to work an early shift the next day results in exhausted personnel trying to give good care to patients with many complicated needs.</p>	<p><i>Please see above comments related to 360° Value Proposition Process and staffing.</i></p>

**Responses to ANA member survey on proposed strategic policy topics  
November 2016**

Proposed Strategic Policy Topic	What problems would be addressed via this proposed policy topic?	Why is the proposed policy topic necessary for the nursing profession?	Input from ANA
		I believe it is up to the nursing profession to advocate for improved working conditions of CNA's in long term care facilities. Turnover would decrease and patient care would improve...always a goal of the nursing profession.	
Work Environment	It would address the 6 components of the HWE Standards: 1. Skilled Communication 2. True Collaboration 3. Effective Decision Making 4. Appropriate Staffing 5. Meaningful Recognition 6 Authentic Leadership	There is a high rate of burnout and moral distress amongst nurses due to a multitude of factors which includes nurses working in unhealthy work environments. Healthcare in general is experiencing turbulent times and it is imperative that we support the profession of nursing by supporting and assisting nurses, healthcare leaders, organizations, etc... In creating healthy safe environments where nurses can make their optimal contribution and remain in the profession of nursing.	<i>Staff in ANA's Health Policy Department are currently working to request the creation of a Professional Issues Panel on Strengthening Moral Resistance.</i>
Work Environment	Nurses need to manage and communicate with people that are either aggressive, passive-aggressive, and/or toxic.	Nurses constantly deal with difficult situations (e.g., management, fellow nurses, patients, patients' families, etc.).	

**Responses to ANA member survey on proposed strategic policy topics  
November 2016**

Proposed Strategic Policy Topic	What problems would be addressed via this proposed policy topic?	Why is the proposed policy topic necessary for the nursing profession?	Input from ANA
Work Environment	<p>Moral distress, burnout, staff turnover, poor communication, and interpersonal conflict - all have been shown to have a negative effect on patient outcomes.</p> <p>Fostering a supportive and ethical workplace is important to high quality care and a healthy environment for all.</p>	<p>For reasons above. Experienced nurses leave and discourage young people from pursuing nursing; new nurses copy unethical behavior.</p> <p>There's little room for professional growth and pride when one can't function in accordance with professional and personal ethics.</p>	<p><i>Please see comment above about a possible Professional Issues Panel being convened to address this issue.</i></p>
Work Environment	<p>How to get nurses more engaged, especially in the workplace.</p>	<p>Nurses are feeling burnt out and may need to leave bedside or the profession</p>	<p><i>Please see comment above about a possible Professional Issues Panel being convened to address this issue.</i></p>
Work Environment	<p>Errors in nursing.</p>	<p>12 hour shifts are too taxing on the body and mind - leading to an increased potential for errors. 8-10 hour shifts would likely decrease critical errors.</p>	
Work Environment	<p>While ANA did address this by making an official stand that does not go far enough. Hospitals can ignore "recommendations" no matter how legitimate or substantiated. They will only make changes when it is mandated. We need Federal legislation that regulates safe work hours. If legislators are not willing to do this, then they are not really serious about patient safety or nurse retention</p>	<p>To address nursing shortages through improving nurse retention and to make a positive impact on patient safety.</p>	

**Responses to ANA member survey on proposed strategic policy topics  
November 2016**

Proposed Strategic Policy Topic	What problems would be addressed via this proposed policy topic?	Why is the proposed policy topic necessary for the nursing profession?	Input from ANA
	issues.		
Work Environment	<p>Working 12 hours is not the best interest of patients whose lives are in our hands. Everybody's efficiency levels lower over a period of time. These young people think it is great because they have 3-4 days in between. But it takes a few days to recuperate. I don't care how young you are. My assessment is that it leads to early burn out. It is difficult when you have families who also need your attention.</p>	<p>It is necessary for better care of the lives that are in our hands. We need to be at our best for all the time we are on duty.</p>	<p><i>Please see comment above about a possible Professional Issues Panel being convened to address this issue.</i></p>
Work Environment	<p>The big dogs are not necessarily the best ones. Hen pecking and discrimination among the leader nurses and the workers is rampant in all areas of nursing. Not passing information, delegating of 'poor' shifts to the lessor ranked, overt ostracizing of fellow nurses.</p>	<p>Unappreciated workers cannot provide the best care for others. Teamwork is threatened. The profession is viewed as a political tug of war.</p>	

**Responses to ANA member survey on proposed strategic policy topics  
November 2016**

<b>Proposed Strategic Policy Topic</b>	<b>What problems would be addressed via this proposed policy topic?</b>	<b>Why is the proposed policy topic necessary for the nursing profession?</b>	<b>Input from ANA</b>
Work Environment	Evidence-based best practice guidance would be provided to both nursing staff and employers to promote job satisfaction, improve morale, and in turn promote retention of new and experienced RNs which promotes patient safety and quality nursing care.	RN's are leaving acute care settings. Employers/schools of nursing need guidance to support of the new RN in their role transition. Employers are grasping at strategies to retain new RNs however not much is being done to retain the experienced RNs. Experienced RNs are being overlooked in terms of pay and flexible work schedules that are being offered to recruit new RNs to replace the experienced RNs who leave because of lack of consistent/equitable pay increase compared to new RNs. Efforts to retain experienced RNs is minimal. Need to be competitive with the "travel nurse pay and flexibility of scheduling".	
Work Environment	Discrimination in the workplace towards nurses with health issues and disabilities	There is a need for nurses to understand and embrace their coworkers with health issues and disabilities. There is a need for nurses to broaden their perspective of disability as it relates to disease in their peer groups, to enable a respectful environment for all working individuals, who share the same goals of quality patient care.	

**Responses to ANA member survey on proposed strategic policy topics  
November 2016**

<b>Proposed Strategic Policy Topic</b>	<b>What problems would be addressed via this proposed policy topic?</b>	<b>Why is the proposed policy topic necessary for the nursing profession?</b>	<b>Input from ANA</b>
Work Environment	Appropriate staffing ratios Employee Engagement and Experience Patient Experience Care Team communication	To retain top talent we must be the best for each patient each time and for each employee each time. HCAHPS scores are directly related to our continual commitment to excellence not just in cost accounting but with people.	
Work Environment	Why so many nurses are leaving the work place Why do many nurses are unsatisfied with their profession	Retention is key for successful work environment. So much money goes into training. Increase patient safety.	
Work Environment	Abusing on call hours and when is it mandatory overtime	Because if the hospital is abusing on call hours, the RNs are not getting paid for the mandatory overtime they are actually working.	
Work Environment	Healthcare systems constantly scan for weaknesses and attempt to correct the imperfections. However, there is so much we do that is amazingly strong; it goes unnoticed and underutilized for building stronger alliances within the larger healthcare framework.	We forget all the good we do, and how much good we can do, when the focus remains on our weakest points.	

**Responses to ANA member survey on proposed strategic policy topics  
November 2016**

Proposed Strategic Policy Topic	What problems would be addressed via this proposed policy topic?	Why is the proposed policy topic necessary for the nursing profession?	Input from ANA
Work Environment - Bullying	<p>Zero tolerance initiative Involve mediators not affiliated to hospital administration Discuss why internal investigations do not support staff nurses being victimized. Risk management often sides with nurse managers &amp; other leadership vs the staff nurse Managers using staff nurses against each other designating them as "eyes and ears" instead of doing their job.</p>	<p>Respect in the nursing profession is at an all-time low. Many engage in unethical &amp; unprofessional conduct that goes unaddressed or ignored. This creates an overall dysfunction. We will never be respected as a profession until we learn to respect one another.</p>	<p><i>An ANA Professional Issues Panel developed a position statement, <a href="#">Incivility, Bullying, and Workplace Violence</a> (2015).</i></p> <p><i>Additional resources are available on the <a href="#">legislative pages</a> of ANA's website.</i></p> <p><i>Tip cards and brochures on <a href="#">bullying</a> and <a href="#">workplace violence</a> can be found on <a href="#">Nursebooks.org</a>.</i></p>
Work Environment - Communication	<p>Currently, patients, nurses, providers, and patient flow are affected because providers and nurses are not doing handoffs or debriefings together during change of shifts or when events happen. This practice has created silos and many gaps in communication. According to the Joint Commission, poor communication is the number one reason for sentinel events; however has not addressed systematically or in policies.</p>	<p>Nurses and providers want to communicate. Providers want to have the opportunity to listen to nurses and understand what is concerning to them. However, nurses do not have an option. One example, leaders are making residents do handoffs at hours when the day shift and night shift are not present. Other is that providers do not ask nurses to participate more in their patient reviews. Nurses are missing many collaborative experiences because leaders are not counting on their feedback.</p>	

**Responses to ANA member survey on proposed strategic policy topics  
November 2016**

<b>Proposed Strategic Policy Topic</b>	<b>What problems would be addressed via this proposed policy topic?</b>	<b>Why is the proposed policy topic necessary for the nursing profession?</b>	<b>Input from ANA</b>
Work Environment - Culture of Safety	<p>The lack of one to ones for safety            The lack of ancillary help. So you are responsible for your own patients needing one to one coverage            Your own PCA work because if you have more than one patient that needs one to one coverage            Be your own secretary and put your own orders in, call your own consults. While all the while making sure your patients don't fall</p>	To keep nurses and patients safe	
Work Environment - Culture of Safety	Limiting the hours that nurses are required to work will protect the safety of the patient, the community, and the nurse.	Forcing nurses to work long shifts (16 hours or more) is dangerous to the client, nurse and community.	
Work Environment - Culture of Safety	<p>The following issues impact the safety of nurses' working environment: mandatory overtime, staffing, violence, patient handling and mobility, etc.            In addition, the outcome of the recent election could erode workers' rights.</p>	<p>Need qualified critically thinking staff at the bedside yet this is difficult with the risk of violence in the workplace</p> <p>The use of unlicensed assistive personnel is ethically compromising and in the Trump Administration, the worker's voice in the workplace will vanish.</p>	

**Responses to ANA member survey on proposed strategic policy topics  
November 2016**

<b>Proposed Strategic Policy Topic</b>	<b>What problems would be addressed via this proposed policy topic?</b>	<b>Why is the proposed policy topic necessary for the nursing profession?</b>	<b>Input from ANA</b>
Work Environment - Culture of Safety	<p>Making sure that bedside nurses make the decisions not only for their patients but also for workload and assignments. Bedside nurses should be involved in changing policies and procedures. Bedside nurses need to have work life balance, appropriate time off to recover from long days and heavy patient loads. Nurses should also have appropriate time off to go to educational offerings of their choice.</p>	<p>Safety has always been an important issue for patients, but now it's time to make safety an important issue for nurses. Being rested and healthy. Also having appropriate and efficient equipment in order to do our daily jobs. Bedside nurses should have the final say and agreement to changes of policies and procedures</p>	
Work Environment - Empowerment	<p>Reducing the amount of influence that hospital consultants and administration have that leads to poor nurse-to-patient ratios, for example. Nurses are treated like task workers and their caring nature is being exploited. In a largely female concentrated profession, nurses need to feel free to share and voice their needs and concerns without being in fear of retribution. Many nurses are the breadwinners and this makes them less likely to speak their peace.</p>	<p>This will largely reduce nurse burnout, turnover rates, and encourage new entry into the nursing profession</p>	<p><i>Please see comment above about a possible Professional Issues Panel being convened to address this issue.</i></p>

**Responses to ANA member survey on proposed strategic policy topics  
November 2016**

Proposed Strategic Policy Topic	What problems would be addressed via this proposed policy topic?	Why is the proposed policy topic necessary for the nursing profession?	Input from ANA
Work Environment - Environmental Concerns	<ol style="list-style-type: none"> <li>1. Exposure of nurses, patients, staff and visitors to toxic chemicals in health care settings.</li> <li>2. Toxic pollutants in newborns.</li> <li>3. Inadequate scale of nurse-focused environmental "health innovations and best practices to significantly impact patient and nurse outcomes"</li> <li>4. Insufficient implementation of Standard 17 Environmental Health of ANA Nursing: Scope and Standards of Practice (2015).</li> </ol>	<p>To reduce hazardous chemicals in healthcare  <a href="http://www.psr.org/resources/hazardous-chemicals-in-health.html">http://www.psr.org/resources/hazardous-chemicals-in-health.html</a></p> <p>To reduce pollutants in newborns  <a href="https://noharm-global.org/documents/body-burden-pollution-newborns">https://noharm-global.org/documents/body-burden-pollution-newborns</a></p> <p>Strengthen environmental prong of "a nationwide campaign to improve the health of nurses and the nation (e.g., Healthy Nurse, Healthy Nation: Leading the Way to Better Health)"</p> <p>"Educate registered nurses to assume new roles that transform the nurse-to-consumer relationship" so families have healthier environments. Strengthen implementation of Standard 17 of ANA Nursing: Scope and Standards of Practice (2015).</p>	
Work Environment - Environmental Toxins	<p>Nurses must develop healthy food and water policy proposals to meet the most fundamental health needs of humanity.</p> <p>Nurses witness the devastating health</p>	<p>Nursing must boldly advance a vision for policy that eliminates environmental toxins in our food and water supplies to protect the health of future generations and prevent chronic illness.</p>	<p><i>ANA is no longer engaged in environment-related issues.</i></p>

**Responses to ANA member survey on proposed strategic policy topics  
November 2016**

Proposed Strategic Policy Topic	What problems would be addressed via this proposed policy topic?	Why is the proposed policy topic necessary for the nursing profession?	Input from ANA
	<p>effects of our current food system. Across the lifespan, people experience the trajectory of chronic illness and the burden of managing disease on daily basis.</p> <p>We can no longer sustain our health in a toxic environment. When we embrace the adage of "food as medicine", the gravity of the situation is even more evident. Water nourishes all life and is fundamental to health.</p>	<p>Work to substantially reduce exposure to environmental toxins must begin immediately and will contribute to managing chronic illness.</p> <p>With a solid plan and perseverance, we can reverse the chronic illness trajectory for individuals and populations and create a healthy future for people and planet.</p>	
Work Environment - Fatigue	Addressing fatigue would improve the health of nurses, decrease errors, and result in better patient outcomes	There is growing evidence that the 12 hour shift, especially several consecutive 12-hour shifts may have a negative impact on the health of the nurse as well as patient safety.	<i>An ANA Professional Issues Panel developed a position statement, <a href="#">Addressing Nurse Fatigue to Promote Safety and Health</a>. (2014)</i>
Work Environment - Fatigue	Addressing fatigue would improve both patient and nurse safety.	<p>There is minimal nursing-specific research on fatigue and consecutive shifts, especially related to nurses who work the night shift exclusively.</p> <p>As one who works the night shift, ANA's fatigue guidelines that my organization is relying on are going to make me more fatigued as a night shift nurse. The ANA guidelines should be based on rigorous,</p>	<i>Please see comment above on the position statement developed by a Professional Issues Panel on this topic.</i>

**Responses to ANA member survey on proposed strategic policy topics  
November 2016**

Proposed Strategic Policy Topic	What problems would be addressed via this proposed policy topic?	Why is the proposed policy topic necessary for the nursing profession?	Input from ANA
		applicable research if they are going to be implemented in this manner.	
Work Environment - Fatigue	Regulations that establish more than "guidelines" for number of work of hours worked in a day and across a week.	Despite the extensive research indicating fatigue based on number of contiguous hours worked in acute care settings, 12 + hours continue to be the normal shift. When asked why acute care settings retain these shifts, most administrators will say nurses refuse to work shorter shifts. When nurses are asked why they work 12 hour shifts, many respond they have no option. Regulations have been developed to protect patients from physicians (resident status) but nurses are left to self-regulate their work hours. This approach implies the evidence is questionable. ANA needs to lead nurse administrators in changing this practice.	<i>Please see comment above on the position statement developed by a Professional Issues Panel on this topic.</i>
Work Environment - Nurse Fatigue	Nurse fatigue	Patient safety Nurse safety	<i>Please see comment above on the position statement developed by a Professional Issues Panel on this topic.</i>
Work Environment - Handling of Dangerous Drugs	Thought to be just an oncology nurse issue there are a supposing amount of dangerous drugs given in almost all units in the hospital. Current standards lag fast behind what is appropriate to keep our	We need consistent safety policies for hazardous drugs handling and disposal across our different nursing units and across the country that are not driven by money and budget concerns but rather	

**Responses to ANA member survey on proposed strategic policy topics  
November 2016**

<b>Proposed Strategic Policy Topic</b>	<b>What problems would be addressed via this proposed policy topic?</b>	<b>Why is the proposed policy topic necessary for the nursing profession?</b>	<b>Input from ANA</b>
	nurses safe and healthy.	by consideration of our nurses short and long term health.	
Work Environment - HIA Collaborative	<p>Resolution of Healthcare Associated Infections (HAIs) through multidisciplinary teamwork and knowledge acquisition.</p> <p>Elimination of punitive responses by embracing the human factor related to knowledge degradation.</p> <p>Acknowledging Environmental Services/ Housekeeping as the decontamination experts will encourage leadership to invest time and knowledge into the department. Once educated, other departments will understand and respect EVS's level of competency.</p>	<p>It will help decrease HAIs.</p> <p>Nurses are clinical experts; they are not environmental surface experts. Nurses are both formal and informal leaders and redirect EVS (housekeepers) as needed. Nurses are not educated on how to decontaminate surfaces and therefore should not redirect EVS. Because novice staff (nurses) are re-directing decontamination experts, cross contamination is occurring in the healthcare setting.</p>	
Work Environment - Improved Collaboration with Ancillary Departments	Problems are often identified by nurses with external departments such as supply, nutrition, and pharmacy i.e. insufficient linen, inadequate diabetic snack supplies, and late or missing medication that I believe can be resolved by identifying, developing, and implementing best practices.	Nurses spend an inordinate amount of time looking for and tracking down essential expendable items required to take care of their patients efficiently and effectively. For example time spent on other floors trying to obtain linen or on the phone searching for a location that has a butterfly needle, or trying to reach housekeeping could obviously be better spent caring for their patients.	

**Responses to ANA member survey on proposed strategic policy topics  
November 2016**

<b>Proposed Strategic Policy Topic</b>	<b>What problems would be addressed via this proposed policy topic?</b>	<b>Why is the proposed policy topic necessary for the nursing profession?</b>	<b>Input from ANA</b>
Work Environment - Incivility	We have addressed Incivility, bullying, etc. in nursing for over 50 years. However, we have not established norms, expectations to create the expectation of civility. Incivility is a serious problem that leads to a diminished nursing workforce and endangers patients' safety. It's time to address the problem in SON and the workplace. We must learn to respect ourselves if we wish others to respect us. We stopped physicians from disrespecting nurses now it's time to work on disrespect among nurses.	To protect patient safety and to and to reduce the high attrition associated with Incivility in the workplace.	<i>Please see comment above on Bullying and Violence in the Workplace.</i>
Work Environment - Just Culture	Each Nurse disciplined by a nursing commission should be assigned to a "counselor" and transparency should be required with all Nursing Commission duties.	Please, the late Kim Hiatt RN is an example of nursing commission overreaction and all nurses should be aware of her tragic story. Nurses deserve better.	

**Responses to ANA member survey on proposed strategic policy topics  
November 2016**

<b>Proposed Strategic Policy Topic</b>	<b>What problems would be addressed via this proposed policy topic?</b>	<b>Why is the proposed policy topic necessary for the nursing profession?</b>	<b>Input from ANA</b>
Work Environment - Lateral Violence	Lateral violence, incivility, and bullying still impacts nursing practice and effective healthcare teamwork, in spite of the ANA's position that this must be eliminated.	Continuing research indicates lateral violence has a quantifiable negative effect on patient safety and quality of care. In spite of much focused attention on this issue, it remains a problem, and may be difficult to identify when it is subtle or covert rather than overt. Those affected by it are frequently reluctant to speak up in defense of themselves or others. The ANA's formal position against lateral violence, incivility, and bullying was a great start to increase awareness; however, it may be time to build on the position statement and implement something that will drive real change in this area.	<i>Please see comment above on Bullying and Violence in the Workplace.</i>

**Responses to ANA member survey on proposed strategic policy topics  
November 2016**

<b>Proposed Strategic Policy Topic</b>	<b>What problems would be addressed via this proposed policy topic?</b>	<b>Why is the proposed policy topic necessary for the nursing profession?</b>	<b>Input from ANA</b>
Work Environment - Mandatory Overtime	<p>Varying by state laws, nurses are managed into the ground by administration's attempts to cut corners financially. This is most evident in non-hospital settings, particularly in hospice. In Texas, state law prevents Mandatory Overtime for nurses, but not for California nurse 8-hour shift workers. Many California hospices do not hire night-shift, but instead, claim "emergency status" and require mandatory 8, 12, and 24 - hour shifts without compensatory time off, or even adequate financial overtime or double-time compensation. This is unsafe for nursing. I'm aware of two nurses who ended up in emergency department/urgent care as patients due to this practice.</p>	<p>Evidence demonstrates that nurses leave the profession due to unsafe and unhealthy environments. This includes mandatory overtime, "standby" or "on-call," and varying shift-work, irrespective of circadian-rhythm research.</p> <p>Nurses leave nursing due to stress, creating stress for those who stay.</p> <p>Evidence shows bullying comes from the top, either in commission, or omission of policies preventing it.</p> <p>Let's stop the attrition by protecting nurse health with federal policies. Unethical management practices of following the letter of state law may circumvent state law intent, as practiced in Los Angeles, California, with over 10 million people. Abuse of nurses is a national crisis.</p>	
Work Environment - Mandatory Vaccinations	<p>Incorrect reporting regarding safety (short and long term) and efficacy of implementing mandatory vaccinations for health care professionals as a "job requirement".</p>	<p>As it stands now, nurses who choose alternatives to vaccinations and nurses who cannot be vaccinated secondary to adverse reactions to annual vaccinations are discriminated against by being required to wear a mask during the</p>	

**Responses to ANA member survey on proposed strategic policy topics  
November 2016**

Proposed Strategic Policy Topic	What problems would be addressed via this proposed policy topic?	Why is the proposed policy topic necessary for the nursing profession?	Input from ANA
		influenza season. This creates questions in the patients mind; "What's wrong with my nurse? She is wearing a mask." and also violates privacy issues.	
Work Environment - Mandatory Vaccinations	We should be backing our medical freedom rights on this issue. This is a pharmaceutical driven policy with very biased science leaning on the side of greed and pharmaceutical industry agenda. As a female dominated profession we need to protect our bodies, and the bodies of our children, and our patients. We cannot let this freedom be taken away.	We cannot give up our medical freedom rights! People need to be able to refuse this mandatory vaccination policy. If we buy into it then it will only strengthen the push to take away freedom. If the science works the way they say it should then those who are vaccinated should feel safe. This is about our rights.	
Work Environment - Safety	Mandate safety culture, error prevention techniques, & just culture in student nursing a curriculum so that nurses understand their role in creating culture of safety as well as prevention of error	Medical errors kill/harm enough people to fill a 747 every day. We have an obligation to create systems that support human individuals to provide safe care. Creating just culture and cultures of safety, issuing base knowledge of human error & error prevention strategies is essential to healthcare's progression	
Work Environment - Safety	A lot of disgruntled patients take out frustrations on healthcare professionals. Laws should penalize with swift felony charges to those patients physically harming healthcare professionals.	Nurse's deserve to be protected and expect that if they are harmed physically that could impact their lively hood to have recourse legally.	

**Responses to ANA member survey on proposed strategic policy topics  
November 2016**

<b>Proposed Strategic Policy Topic</b>	<b>What problems would be addressed via this proposed policy topic?</b>	<b>Why is the proposed policy topic necessary for the nursing profession?</b>	<b>Input from ANA</b>
Work Environment - Violence	Violence against nursing personnel in the workplace, particularly in the emergency, psychiatric, and correctional care settings.	ER and correctional care as well as other nursing professionals are exposed to violence from patients as well as other people they encounter in their workplace. The unlicensed security guard as well as the licensed peace officers are legally protected against violence; however, the nurse is not. This legal loophole needs to be closed. Nurses deserve to be protected against workplace violence.	<i>Please see comment above about bullying and violence in the workplace.</i>
Work Environment - Violence	Behavioral health support after workplace violence and second victim symptoms.	This topic is difficult and needs to be highlighted so the public is aware of support needed for caregivers on the front line.	<i>Please see comment above about bullying and violence in the workplace.</i>
Work Environment - Violence	Assaults from patients on nurses and lack of administrative support	Nurses are being injured and are leaving the profession	<i>Please see comment above about bullying and violence in the workplace.</i>
Work Environment - Violence	The threat of people entering hospitals, nursing facilities etc. with weapons.	Nurses, physicians, patients and other staff have been threatened, beaten and shot within hospitals and other facilities. There are belligerent visitors and others who are free to walk right in and do damage since there is often no check in procedures in place in many facilities.	<i>Please see comment above about bullying and violence in the workplace.</i>

**Responses to ANA member survey on proposed strategic policy topics  
November 2016**

<b>Proposed Strategic Policy Topic</b>	<b>What problems would be addressed via this proposed policy topic?</b>	<b>Why is the proposed policy topic necessary for the nursing profession?</b>	<b>Input from ANA</b>
Work Environment - Violence	Education for nurses and physicians mandated to employers to prevent injury to nurse. Educate law enforcement about felony arrest for violator who harm medical care providers.	Large influx of psych patients in emergency rooms and medical setting and lack of understanding by employers, police and physician of threat of harm to nurses	<i>Please see comment above about bullying and violence in the workplace.</i>
Workforce Shortage	The lack of nurses and nursing faculty has to be addressed and programs expanded to provide innovative strategies and incentives to solve the demand being greater than the supply. Programs to transform the LVN workforce to RN and RNs to nursing faculty will be required to meet future demands.	The ability to promote patient safety and quality outcomes as well as cost effective care requires that educated and competent nurses be available to fill the vacancies and assume new roles in healthcare such as primary care practitioners in order to meet the staffing demands of the present and future.	
Workforce Shortage	Nursing shortage, decreasing impact of aged nurses completely leaving profession and losing expertise, knowledge, and mentoring opportunities;  Mentoring access  Lack of debriefing and emotional support for nursing staff who see and experience trauma with their patients	Nursing is increasingly expected to be knowledgeable and professional 1st the moment they got the floor or scene of service; however, we all know knowledge and experience is what yields nursing professionalism. With the expected shift in Nursing due to the average age of the baby boom nurses, creating positions and support roles that fit the needs of both groups may afford new nurses the support they deserve and provide retiring nurses a reason not to retire.	