

National Student Nurses' Association[®]
Guidelines for Planning

Legislative Activities



National Student Nurses' Association
45 Main Street, Suite 606
Brooklyn, NY 11201
(718) 210-0705 FAX (718) 797

www.nсна.org www.nснаleadershipu.org

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LEGISLATION: WHY GET INVOLVED?

Events are taking place in Washington, DC, and in your state capital that will affect you as a nursing student and your future as a registered nurse. Government involvement and regulation of health professionals and health care delivery is not new. What is new is the growing political awareness and activism among nurses and nursing students. Today, professionals must be aware of legislative and regulatory activities, be ready to support or oppose in an informed manner, and be prepared to work for the candidate(s) of their choice. Only in this way will nursing students and nurses become a powerful and influential voice for health care. Both are realizing that their roles as patient advocates do not end at the bedside, but rather in the voting booth.

Becoming involved with legislative issues is not difficult, but it can be confusing at first. This handbook will help students to better understand the legislative and political process, how it affects nursing, what NSNA, state and school associations can do, and, most importantly, what you can do.

Many times one person's opinion can make a difference to a legislator. Taking the time to express your views and share your resources with your legislators is helpful to their decision making. Legislators aren't experts on every issue. Even if they are experts, they need to know how their decisions will affect their constituents.

THE LEGISLATIVE PROCESS: HOW THE SYSTEM WORKS

National

The diagram on page 10 illustrates the federal legislative process. A bill, or proposed legislation, may originate in either the House of Representatives or the Senate. In this diagram the bill originates in the House. A bill must be passed by both houses of Congress and approved by the President to become law. If the House and Senate pass different versions of the same bill, a conference committee from the two chambers meets to agree on one version. Each chamber must then pass the final version before the bill goes to the president.

There are several points in the legislative process when it is crucial for citizens to express their support or concerns: during committee hearings; immediately before and during consideration of the bill on the floor of the House or Senate; and during conference deliberations. Just prior to the committee or floor vote is an important time for input because a legislator may or may not have decided on his/her vote and sometimes can still be swayed, particularly if the legislation is controversial.

After a bill has been approved by both the House and Senate in identical form, it goes to the president for signature. If the president approves the legislation, he/she signs it and it becomes law. Or, if the president takes no action for ten days while Congress is in session, a bill automatically becomes law.

The president can also veto a bill if he/she opposes it. If the president takes no action within 10 days after the Congress has adjourned its second session, the effect is a "pocket veto" and the legislation dies. If the president vetoes a bill, Congress may attempt to "override the veto." This requires a two-thirds roll call vote of the members who are present in sufficient numbers for a quorum.

Authorizing Legislation – provides the legislative authority for a program or action, and indicates the maximum dollar amounts for which it can be funded.

Appropriations – provides the actual money to implement the authorizing legislation, but not necessarily up to the dollar limit specified in the authorizing legislation.

Once a bill is signed into law, it will be assigned to the appropriate department of the executive branch that is responsible for developing rules and regulations for the enforcement of the new law. During the rulemaking process, there is always the concern that the proposal may actually change the intent of the original legislation – some see this as part of the checks and balances system. Citizens are again given the opportunity to express their opinions during a period of comment that follows the initial printing of the proposed rules and regulations.

The principal legislative committees for health concerns are:

- Senate Committee on Health, Education, Labor and Pensions (Subcommittees on Children and Families, on Employment and Workplace Safety, and on Retirement and Aging).
- Senate Committee on Finance (Subcommittees on Health Care and on Social Security, Pensions, and Family Policy) – jurisdiction over all matters relating to the Social Security Act (Medicaid, Medicare, Long Term Care, Maternal and Child Health Block Grant, etc.).
- Senate Committee on Appropriations (Subcommittee on Labor, Health and Human Services, Education and Related Agencies).
- House Committee on Education and Labor (Subcommittees on Health, Employment, Labor, and Pensions, on Healthy Families and Communities, and on Higher Education, Lifelong Learning, and Competitiveness).
- House Committee on Energy and Commerce (Subcommittee on Health).
- House Committee on Ways and Means (Subcommittee on Health).
- House Committee on Appropriations (Subcommittee on Labor, Health and Human Services, Education, and Related Agencies).

The major department in the executive branch dealing with health concerns is the Department of Health and Human Services (HHS). HHS is a complex bureaucracy and includes the Social Security Administration, the Centers for Medicare & Medicaid Services, the Centers for Disease Control and Prevention, the National Institutes of Health, the Public Health Service, the Food and Drug Administration, and the Health Resources and Services Administration (HRSA). The Division of Nursing is part of HRSA.

State

All states – except for Nebraska – operate with a two-house, or bicameral, legislature. Some states call the houses the Assembly and the Senate, others the House and Senate. Nebraska has a unicameral or single legislative body. In the bicameral system, one house usually carries with it some seniority. Again, in each state, key legislative committees handle health concerns. Your identification of these committees and their membership is essential.

A variety of health policy planning groups operates on the state and local level. These include county and city health boards, the state board of nurse licensure and registration, PRO's (Peer Review Organizations), the governing board of the Health System Agencies and the Statewide Coordinating Council (Health Planning and Resources Development Act of 1974). Nursing input, as students and practitioners, is needed in all of these groups.

NATIONAL ISSUES

Two pieces of legislation are of continued concern to the nursing profession. Title VIII of the Public Health Services Act (42 U.S.C. 296 et seq.) – Nursing Workforce Development Programs – is the authorizing legislation that provides essential funds for nursing education, including nursing student loans, traineeships, nurse practitioner programs, and special projects for nursing, which include funds for innovative nursing practice models in health care settings and creative educational models. It is the basic piece of federal legislation on which nursing education depends.

The appropriations bill for the Departments of Labor, Health and Human Services, Education, and related agencies provides the funds for the Title VIII – Nursing Workforce Development Programs. Each year the nursing profession must present a persuasive argument to Congress and the President to convince them of nursing's need for federal funds. This is particularly important because of the increased pressure being placed on lawmakers to balance the federal budget. These programs are currently funded at \$243 million for FY 2010. In 1973, the federal investment was \$160.61 million for the Title VIII programs. Inflated and adjusted to today's dollars, this appropriation would equal \$784 million. We can expect to have to continue to work hard to increase the funding for Title VIII as FY 2011 appropriation bills move forward.

Another issue of importance to nursing students at the national level is the repayment of nursing student loans. NSNA supports increased collaboration in the collection of these loans in an effort to reduce the current high delinquency rate in repayment by nurses.

NSNA's Legislative Policies

The position of NSNA on various pieces of legislation is based on policies adopted by the House of Delegates and Board of Directors. On new issues that arise between meetings, the board members responsible for legislation decide the initial response of NSNA based on association policies. An up-to-date list of NSNA positions is contained in *Getting the Pieces to Fit*, and is on the NSNA web site at www.nsna.org. Some federal initiatives which NSNA addresses are:

- Federal funding for basic nursing education as well as graduate education
- Nursing student loan forgiveness
- Direct third-party payment for nursing service
- Nursing shortage
- Increased awareness regarding minimizing exposure to medically generated toxins and other occupational health hazards
- Protection against mandatory overtime
- Healthcare for the uninsured.

NSNA's Legislative Program

A member of the board of directors is responsible for legislative activities of the association, with the assistance of a staff member. NSNA headquarters monitors federal legislation and policy making on issues of concern to nursing and health care, and notifies state presidents and legislative chairpersons when action is needed from constituents. Legislative information is communicated to state and school associations through *Imprint* and the *NSNA News*. NSNA maintains close working relationships with the legislative staffs of the American Nurses Association and other organizations. Cooperative efforts are undertaken whenever possible, as legislative strength lies in the number of people you are speaking for.

NSNA Legislative Action Alert

The 2010-2011 Legislation/Education Committee implemented a new section on the NSNA web page (www.nсна.org/ProgramActivities/LegislationEducation.aspx) called Legislative Action Alert to keep members informed on pending legislation with links to help members connect with their legislators through personalizing and sending email letters on pending bills that impact nursing students.

When quick action is needed on the part of state associations, a legislative alert is sent from NSNA headquarters via broadcast email. The alert explains the legislation, its implications, and outlines the type of action needed. When a legislative alert is sent, quick response is vital.

STATE ISSUES

There are specific issues that are of particular concern to state associations because they are governed by the state and not the federal government. For example, basic nursing practice is regulated on a state-by-state basis, not by national regulations. The authorizing legislation is the state nurse practice act. This law defines the scope of practice for nursing.

The state nurse practice act can be revised or amended. The amendment may be to your advantage or may jeopardize your position as a student or as a nurse. You should monitor any proposed changes. You must understand the existing act and its implications if you are to react appropriately to any legislation affecting nursing in your state.

State legislation may affect the opening and closing of nursing programs in your state, student financial aid, and many other issues of concern to students.

State Associations' Legislative Policies

Positions of state nursing student associations should be based on decisions made by the state association's House of Delegates and board of directors. The state association should also support national positions whenever possible. We encourage state nursing student legislative directors to use the State Nurses' Association legislative committee chairperson as a resource.

State Legislative Programs

The first step in establishing a state nursing student association legislative program is to have a legislative chairperson and a legislative committee.

The legislative chairperson should be an active NSNA member with an interest in legislation. The chairperson serves as a direct link with the NSNA and the state nurses' association, and should be an elected or appointed member of the state student nurses' association board of directors. The chairperson is responsible for coordinating the legislative program and educational activities. A co-chairperson who will serve on the committee during the following year would provide continuity.

The legislative committee is composed of active NSNA members with an interest in public policy. A representative from each school within the state is recommended. However, do not let incomplete representation block the formation and working of the committee. The committee develops and

administers the state legislative program and a variety of educational programs for NSNA members in that state.

Setting Goals and Identifying Issues

The initial action of the legislative committee is to set goals and objectives for the year. Specific objectives for the committee and for individual members are needed to achieve those goals. For example, education of members regarding legislation would be a goal. What you plan to do to meet that goal comprises your objectives. The objectives must be written in measurable terms, so that an evaluation of the committee's success can be determined at the end of the year.

The next step in establishing a legislative program is to identify the issues or bills with which your association is concerned. Close communication with the State Nurses' Association can be invaluable in finding out what is happening in the state legislature.

The legislative committee should take its direction from current NSNA resolutions, current state resolutions, health care issues, or specific bills. Select one or two targeted bills or issues for the coming year. Set realistic, achievable goals. The success of the legislative committee will be based on a track record of accomplishments. People will become involved and take note of the committee's achievements. Once you have selected the focus for the year, position papers can be drafted and submitted to the board of directors for endorsement.

COMMUNICATIONS

A communication network with school chapters is vital if a state legislative program is to be effective. You may wish to adopt an alert system similar to the one used by NSNA. Another good idea is to send broadcast emails.

WORKING WITH YOUR LEGISLATORS

Identify the legislators that represent you at the state and national levels. Know their local office addresses and telephone numbers. For your federal legislators, you can get this information by going to the House and Senate web sites – www.senate.gov and www.house.gov .

You also can monitor your legislators' voting records through the internet. Contact their local offices -- they can tell you their position on specific items. Contact them when you support them in their decisions, as well as when you disagree.

It is also a good tactic to respond on issues other than nursing that affect you as citizens. If your legislator has a pet project that you support, let him/her know. Legislators will be that much more willing to listen when you need their assistance.

As an individual, get involved with your legislator's campaign. Working on campaigns increases your visibility and enhances your voice with your legislator. Campaigning enables you to become more familiar with your legislator's positions on health care topics as well as help shape your legislator's opinions.

Communicating with Your Legislator

A face-to-face meeting is the most effective way of communicating with your legislators. However, such meetings tend to be the exception and not the rule. What then are the other ways of communicating and what is their effectiveness? One caveat that applies no matter which method you choose – make sure you use a communication means that will get your opinion to your legislator *before* that vote needs to be taken.

For simplicity sake, the following information will be geared to your federal legislators. However, all of this information is transferable to your state legislators also.

Letters, faxes, and emails can be very effective when communicating with your legislator in influencing legislators' views. These should be used as a response to a legislative alert from NSNA or the state association, or on an issue you have personal opinions about.

When communicating with your legislator remember to:

- Keep it brief – address only one issue in each letter; and, if possible, keep the letter to one page.
- Identify yourself – be sure your return address is on your letter, not only on the envelope. Envelopes normally get detached, discarded, or misplaced before the answer is written.
- Get to the point – state your purpose for writing in the first paragraph of the letter. If your letter pertains to a specific piece of legislation, identify it accordingly, e.g., House bill: H. R. ____, Senate bill: S. ____.
- Personalize it – include specific facts about how the bill will impact the legislator's district or state and why it is important to you.
- Ask your elected officials to explain their position on the issue in their reply so you do not get the typical form-letter response – “I'll keep your views in mind should this legislation come up for a vote.” As a constituent, you are entitled to know why your Members of Congress think as they do.
- Thank your elected officials if they vote your way. They appreciate a compliment, and they remember positive feedback.
- Do not hesitate to state your displeasure. However, that, too, will be remembered, so be polite if your Members of Congress oppose your position. You will want their help on another issue on another day.

Using email:

- Email can be an easy and effective tool
- Avoid informal language – an email should be treated as seriously as a written letter
- Include your complete contact information

In a telephone call:

- Know the issue and your position.
- Prepare an outline so that you cover all major points in a short period of time.
- Expect that you will be asked to speak to a staff person and not the legislator.
- Follow up with a personal letter to the legislator, citing the name of the staff member with whom you spoke.

To find the telephone number for senators and representatives use the internet or call the U.S. Capitol switchboard at 202-224-3121. When the operator answers, ask for your senators and representative by name and state.

Visits with legislators can take place in Washington, D.C., your state capital, or in the home district office. Make your appointment by letter or telephone well in advance and outline the issues you wish to discuss, along with any previous communication you have had. You may want to team up with other nursing students or nurses.

Some key points to remember for a visit are:

- Discuss only the essential issues -- set your priorities before you go in.
- Have specific recommendations for the legislator on these issues.
- Leave a brief written statement of the points you wish to make with your legislator and offer your help to provide additional information.
- Don't overstay or try to solve all your problems in one visit.
- Don't be upset if the legislator cannot make the meeting. Try to meet with his key staff member in the subject area instead.
- Follow up your visit with a personal letter expressing thanks and reiterating your major points.
- Offer resources on the subject.

Position papers are statements on a legislative issue to share with the legislators and others involved. They should be used for major concerns. To prepare a position paper on a bill or issue, the process should include: a summary of the substance of the bill or issue, the advantages or pro arguments, the disadvantages or con arguments, the legislative history, the likelihood of passage if it is a bill, and the recommended association position and action.

All position papers developed and endorsed by the board should be published and distributed to all members and state nursing organizations, and placed on the state association web site.

Testimony is the process by which special interest groups and consumers give information to a congressional committee while it is preparing or working on passage of a bill.

The preparation and representation of testimony is advanced legislative activism. Testimony is usually presented to a governmental committee in response to an invitation from that committee. Participation in public hearings also offers a spontaneous opportunity to present an association's statement. The activity requires close liaison with the state nurses' association and NSNA. The testimony must clearly address the issue, must be factual, should represent your association's views, and be as brief as possible.

DO:

- Be accurate. Spell names correctly and verify information.

Addressing Correspondence:

To a Senator:

The Honorable (full name)
__(Rm.#)__(name of)Senate Office Building
United States Senate
Washington, DC 20510

Dear Senator:

To a Representative:

The Honorable (full name)
__(Rm.#)__(name of)House Office Building
United States House of Representatives
Washington, DC 20515

Dear Representative:

Note: When writing to the Chair of a Committee or the Speaker of the House, it is proper to address them as:

Dear Mr. Chairman or Madam Chairwoman:

or

Dear Mr. Speaker or Madam Speaker:

- Clearly identify the bill, using title, and number, if possible.
- Know about the issue or bill before you write.
- Identify yourself (occupation, hometown, member of NSNA).
- Use your own words on your own stationery.
- Be courteous, brief and to the point.
- Provide pertinent reasons for your stand.
- Write a letter of appreciation whenever the legislator does something that meets with your approval.
- Write letters at appropriate times; for example, when a bill is in committee, and again before it goes to the floor for a vote.

DON'T:

- Use threats or promises.
- Berate your legislator.
- Demand a commitment before the legislator has had time to consider the measure.
- Pretend to have vast influence in the political area.
- Be vague.

THE POWER OF PUBLIC RELATIONS

Working with Congress is often newsworthy. Getting press coverage of your activity is a good way to give more public reinforcement to your legislator, stimulate community involvement in the issue, and reach potential members. Work with your state newsletter editor on public relations.

It is very important to let your members know what happened with an issue and the reasons for success or failure. Your members should be thanked for their help.

POLITICAL ACTION COMMITTEES

These committees are political action arms of associations that do fundraising, make contributions to candidates, endorse candidates and educate members about the political process. The laws governing formation and operation of political action committees are formidable and the groups are carefully monitored by the Federal Election Commission for their political contributions.

ANA-PAC is the Political Action Committee of the American Nurses Association. A large part of nurses' political power comes through ANA-PAC. It serves as the vehicle through which nurses can collectively give money to candidates for the U.S. House and Senate. Through contributions ANA-PAC helps put friends of nurses into policy making positions. The Board of ANA-PAC endorses and contributes to federal candidates who meet the criteria set up by the ANA-PAC board. The ANA-PAC Board consists of five members appointed by the ANA Board of Directors and four members appointed by the ANA-PAC Board from the State Nurses' Association membership at large.

NSNA COLLABORATES WITH NATIONAL NURSING ORGANIZATIONS

NSNA collaborates with other national nursing organizations as part of *The Nursing Community* (www.nursingcommunity.org) and the *Americans for Nursing Shortage Relief (ANSR)*, which is a consortium of over 54 nursing organizations and supporters of nursing. to advise legislators and members about concerns to nurses and nursing students in 2010-2011 and beyond. The Legislation/Education Committee has posted a copy of the 2010 *ANSR Consensus Document* and the *Nursing Community Title VII brochure* that NSNA has signed onto as a supporting organization based on policies formed by resolutions adopted by the NSNA House of Delegates over the past ten years.

The 2009-2010 Board of Directors adopted the NSNA Health Care Reform White Paper/Position statement which provides a summary of NSNA policies and resolution that support

Earn Credit by Participating in the Legislation Education Committee

As an NSNA leader, you'll learn and practice important leadership skills by participating in the NSNA Legislation Education Program. The following may be helpful when approaching faculty to explore the possibility of having your NSNA participation partially fulfill course requirements or independent study elective. Use your course syllabus to see if you can meet the objectives with the following leadership activities.

Leadership Activities

- Develop enhanced capacity for leadership;
- Develop personal vision for the future of the profession;
- Demonstrate an understanding of the complex role organizations play in the profession and in society.

Learning Objectives

- Master the skills needed to set an agenda and to run a committee meeting;
- Present written and verbal reports of committee's deliberations to the Board of Directors and membership;
- Analyze legislative policy and regulatory issues related to nursing and healthcare and identify a plan to address these issues;
- Practice collaboration among peers.

Visit www.nsnaleadershipu.org for details.

GLOSSARY OF LEGISLATIVE TERMS

Act – Legislation that has passed both legislative chambers and become law.

Companion Bills – Identical bills introduced separately in both chambers.

Conference Committee – Meeting between the two chambers when two versions of a similar bill have been passed by the House and Senate.

Congressional Record – Official transcript of the proceedings in Congress.

Continuing Resolution – A resolution enacted to allow specific Executive Branch agencies to continue operating even though funds have not been appropriated for them for the following fiscal year.

Engrossed Bill – Final copy of a bill including its amendments passed by either chamber. The bill is then delivered to the other chamber.

Enrolled Bill – Final copy of a bill that has passed both chambers in identical form.

Filibuster – Tactic used only in the Senate whereby a minority intentionally delays a vote through a series of long speeches.

Fiscal Year – Accounting year. For the federal government, the fiscal year (FY) is October 1 to September 30 of the following calendar year.

Germane – Having some relation to the bill in question. In the House all amendments must be germane.

Hearings – Committee sessions for hearing witnesses.

Joint Committee – Committee composed of members from both chambers.

Joint Resolution – Legislation similar to a bill that has the force of law if passed by both houses and signed by the President, generally used for special situations.

Lame Duck – Member of Congress (or the President) who has not been reelected but whose term has not yet expired..

Legislative Calendar – Docket or list of measures reported from committees and ready for consideration on the floor.

Lobbying – The process of attempting to influence the passage, defeat, or content of legislation by individuals or a group other than Members of Congress.

Marking Up a Bill – Process, usually in committee, of analyzing a piece of legislation section-by-section and making changes.

Override a Veto – A two-thirds majority vote by both the House and Senate to set aside a Presidential veto

of legislation.

Public Law – Designation used for legislation that has been passed by both chambers and signed by the President.

Record Vote – Vote in which Members of Congress indicate their vote orally for listing in the Congressional Record

Rider - A measure added to another, often unrelated, bill with the purpose of one piece of legislation passing on the strength of another.

Roll Call Vote – In the House, an oral vote for which a record is kept.

Seniority – Length of unbroken service, often used to determine rank in committees.

Standing Committee – A committee permanently provided for by House or Senate Rules.

Supplemental Appropriation – An appropriation to cover the difference between an agency's regular appropriation and the amount deemed necessary for it to operate for the full fiscal year.

Third-Party Payment – Refers to a source other than the individual or the provider that pays the health care expenses of an individual. Blue Cross, private insurance companies, Medicare and Medicaid are examples of "Third Party Payers."

Whip – Assistant leader for each party in each chamber who keeps other Members of the party informed of the legislative agenda of the leader. Also tracks sentiment among party Members for certain legislation and tries to persuade Members to be present and vote for measures important to the leadership.

Miscellaneous Terms Related to Nursing

Entry into Practice – Refers to minimal education standards for licensure as a practitioner.

Nurse Education Act – Federal legislation that authorizes monies for student nurse loans, nursing school construction and institutional support grants, nurse practitioner and advanced training programs, and special projects and financial distress grants.

HMO – Health Maintenance Organization. is a prepaid membership enrollment organization that guarantees certain basic medical/health care services.

Institutional Licensure – A concept whereby institutions (hospitals, nursing homes) would license their personnel to practice. It is the direct opposite of the individual licensure concept now in use in nursing, with practice being regulated by nurse practice acts

PAC – A PAC is a "political action committee" which is separately incorporated and can endorse and make contributions to political candidates for elected government offices. For example, ANA-PAC is the political action committee of the American Nurses Association.

Nurse Education Act – Federal legislation that authorizes monies for student nurse loans, nursing school construction and institutional support grants, nurse practitioner and advanced training programs, and special projects and financial distress grants.

Appropriations Bill – Legislation that provides funds for authorized programs.

Authorization Bill – Legislation establishing a program and setting funding limits. Do not confuse with actual appropriations.

Bill – Legislation introduced in either chamber.

Calendar – List and schedule of bills to be considered by a committee.

Clean Bill – A bill that has been revised in mark-up. Amendments are assembled with unchanged language and the bill is referred to the floor with a new number.

Cloture – Method of limiting debate or ending a filibuster in the Senate. At least 60 Senators must vote in favor before cloture can be invoked.

**Here are links to important
information for you, your state
Association, or school chapter:**

Link to Nursing Legislative

Resources and Recommended Readings– [click here](#)

(<http://www.nsna.org/ProgramActivities/LegislationEducation/LegislativeResources.aspx>)

Link to the 2010 Voter Registration and Get-Out-the-Vote Campaign Begins in September—[click here](#)

(http://www.nsna.org/Portals/0/Skins/NSNA/pdf/Voter%20Registration%20Get%20Out%20the%20Vote%20LegEd_2010_2011.doc)

2011 NSNA Legislation/Education Awards– [click here](#) and scroll down to third section

(<http://www.nsna.org/ProgramActivities/LegislationEducation.aspx>)

Guidelines for Planning Legislative Activities

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