



BE ON THE LOOKOUT!

A CASE TO LIMIT APRN PRACTICE



PURPOSE/GOAL:

- ▶ To demonstrate the implementation of an evidence informed process to assure the ability of APRNs to practice neuroanatomic acupuncture in Michigan.

Obj. 1: By the end of this presentation, the participant will be able to identify a process to change legislation to promote access to high quality, safe, integrative techniques provided by APRN/DNPs.

Obj. 2: the participant will be able to identify an evidence informed process for participating in a public policy scope of practice infringement.

Obj. 3: The participant will be able to turn conceptualized tenets of evidence based translational research into evidence informed translational "action".



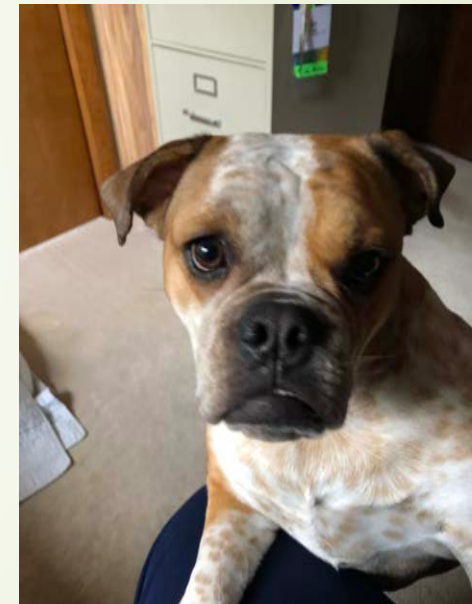
Evidence informed health policy

Loversidge, JM. (2016)

- ▶ Step 0: Cultivate a Spirit of Inquiry in the policy culture or environment.
- ▶ Step 1: Ask the policy question in a PICOT format.
- ▶ Step 2: Search for and collect the most relevant best evidence.
- ▶ Step 3: Critically appraise the evidence.
- ▶ Step 4: Integrate the best evidence with issue expertise and stakeholder values and ethics.
- ▶ Step 5: Contribute to the health policy development and implementation process
- ▶ Step 6: Frame policy change for dissemination to the affected parties
- ▶ Step 7: Evaluate the effectiveness of the policy change and disseminate the findings.

What happened? Steps 0 - 3


- ▶ 1. Nose in the air
- ▶ 2. Identify the players, keep sniffing in the wind
- ▶ 3. What is actually happening? What is the motivation?
- ▶ 4. Who is your network?
- ▶ PICOT question: For APRNs who perform acupuncture, how does SB 683 impact their ability to practice neuroanatomic acupuncture in Michigan





Key Players Steps 2 - 5

- ▶ MiChi
- ▶ Michigan Association of Acupuncture and Oriental Medicine
- ▶ Michigan Medical Acupuncture Association
- ▶ American Manual Medicine Association
- ▶ Beth Derwin, JD, RN
- ▶ Senate Health Policy Committee
- ▶ House State Policy Committee
- ▶ Michigan Board of Acupuncture
- ▶ Michigan Association of Acupuncture and Oriental Medicine



Step 6 and 7 How to Traverse Policy Making:

- ▶ Short (2008)
- ▶ Nurse need to understand policy making
 - ▶ Staffers
 - ▶ Access: meet, personalize, story telling, fact sheets
 - ▶ Trust: be honest, available, helpful
 - ▶ Pertinence: What committees or jurisdictions are important to the politician?
 - ▶ Build image: Avoid appearing self serving, focus on service to population, understand all sides of the issue.
 - ▶ Identify policy solutions that differ locally, nationally, identify unintended consequences



To review:

- ▶ APNs heard through network grapevine that a bill was being introduced that may affect their ability to perform neuroanatomic acupuncture
- ▶ Identified group sponsoring the bill
- ▶ Identified group that was against the bill – notified MiChi
- ▶ Attended meeting with antagonists of bill who formed organization
- ▶ Met with MiChi through social media and on ground, and Mi State Board of Nursing
- ▶ Contacted B. Derwin JD, RN, dissected bill, met with HP staffer
- ▶ Developed alternative language, kept in touch with HP staffer
- ▶ Presented testimony to Health policy committee, written and attended committee meeting, met HP staffer.



References:

- ▶ Loversidge, J.M. (2016) An evidence-informed health policy model: Adapting evidence-based practice for nursing education and regulation. *Journal of Nursing Regulation, 7(2), 27-33*
- ▶ Milstead, J.A, Short, N.M. (2019). Health policy and politics: A nurse's guide. Burlington, MA: Jones and Bartlett Learning.
- ▶ Short, N.M. (2008). Influencing health policy: Strategies for nursing education to partner with nursing practice. *Journal of Professional Nursing, 24(5), 264-269.*



Final Status:

- ▶ APRN's practice not encroached
- ▶ Bill not passed
- ▶ Bill being re-written, latest update October 2018
 - ▶ No mention of overreach
 - ▶ Redefined acupuncture practice
 - ▶ No effect on APRN practice (APRN functions under Michigan Board of Nursing).