Nurses Exerting an Influence: Advocacy in the Modern Era

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What do we mean by “exerting an influence?”
Webster defines influence as:

the power or capacity of causing an effect in indirect or intangible ways
Yoritomo Toshi’s 12 books on exerting influence provide insight into the most common means of influencing others:

How to Exert Influence by Decision
How to Exert Influence by Confidence
How to Exert Influence by the Influence of the Eye
How to Exert Influence by Rational Ambition
How to Exert Influence by Psychic Influence
How to Exert Influence by the Prestige Gained from Concentration
How to Exert Influence Through Clearness of Speech
How to Exert Influence by Perseverance
How to Exert Influence by Setting Good Examples
How to Exert Influence by the Increase and Spread of Psychic Forces
How to Exert Influence by Persuasion
How to Exert Influence by the Acquisition of Dominating Power

(Toshi, Yoritomo, 2005)
Sullivan defines influence as:

The ability to communicate ideas to others and to gain their support through acceptance or participation.

Barriers to Nursing Influence

- **External**
  - Structure of health care and its institutions
  - Public perceptions of nurses and nursing work

- **Internal**
  - Diminishing our own accomplishments
  - Deference
  - Nursing is not easily explained
Three Themes for This Presentation

- Nurses’ Voice as a Means of Influence
- Spheres of Influence
- Certification and Influence
Nurses’ Voice:
A Way to Influence
Nurses’ Voice as a Way to Influence

- Suzanne Gordon and Bernice Buresh advocate for nurses using their collective voice to promote nursing and its contributions to the health care system.
- They suggest that nurses’ influence often is unrecognized (rather than ineffective) because of the public’s perceptions about nurses actions as always being based on physician orders – Case Example: Advocating for Pain Management in a Cancer Patient
- The authors note a direct relationship between the 3 R’s of communication (recognition, respect, and reward) and quality patient care.
- To have influence, then, as nurses we must speak up, highlight nursing knowledge rather than just nursing virtue.

Nurses’ Voice as a Way to Influence

Promoting nursing and its contribution to patient care:
- describe the problems with which nurses are dealing
- explain why those problems are important to the patient
- describe how nurses independently deal with the problems
- identify how that makes a difference in the patient’s outcome

Methods for communicating the message
- professional self-presentation, such as
  - using our first and last name with introductions
  - identifying our role (e.g. R.N.) and what we will be doing for the patient during our time together
- anecdotal description of nursing work to those not in the field

This promotes the nurse as an “agent”

Nurses’ Voice as a Way to Influence

Agency: the capacity to act; the condition of exerting power

Agency often involves presenting an effective argument for change. Anecdotes that exemplify the concerns you are expressing can be powerful if they have the following elements:

- they paint a picture
- they do not contain jargon
- they include facts and statistics
- they include the nurse in the picture you have painted
- they create a complete understanding of the issue

To be effective agents, we must always have 2 or 3 of these anecdotes at the ready to tell the story

Spheres of Influence: Acting on Agency
Influence Occurs in Many Spheres
Influencing our patients:
Education
Support
Relationships
Influencing our patients:
Education
Support
Relationships

Teaching/reinforcing education about:
- physiology of PH
- treatment regimen
- medications

Support in the form of:
- discussion of abilities as well as disabilities
- a listening ear
- presence

Relationships with:
- the patient
- the designated caregiver or mixing partner
- the family
- the health care team
- the community and its resources
- insurance providers
Influencing our institutions:
Staff Education
Policies and Procedures

Influencing our patients:
Education
Support
Relationships
Influencing our institutions: Staff Education
Policies and Procedures

Staff Education:
- on the nursing units
- in the Emergency Department
- in Interventional Radiology
- in the Cardiac Cath Lab
- in Hospital Administration

Policies and Procedures:
- medication policies and procedures
- standards for patient placement within the hospital
- equipment policies
- financial policies
**Department Policy**

**Code:** D: MM-5114

**Entity:** Fairview-University Medical Center

**Department:** Nursing Services

**Manual:** Policy and Procedure

<table>
<thead>
<tr>
<th>Category</th>
<th>Medication Management</th>
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</thead>
<tbody>
<tr>
<td>Subject</td>
<td>Epoprostenol (Flolan), Intravenous: Care of Patients receiving</td>
</tr>
<tr>
<td>Purpose</td>
<td>To ensure consistent and safe care of patients with Pulmonary Hypertension treated with Flolan</td>
</tr>
<tr>
<td>Policy</td>
<td>When patients with Pulmonary Arterial Hypertension are admitted to the hospital for initiation of Flolan therapy or when already receiving Flolan therapy, the following procedure will guide their care. Patients receiving Flolan therapy may only be admitted to Flolan competent units (4C, 4D, 4E, 5A, 5C, 6C, 6D and NICU) except in extraordinary circumstances.</td>
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<tr>
<td>Procedure</td>
<td>Background: Flolan (Epoprostenol) is a potent intravenous vasodilator and inhibitor of platelet aggregation used in the treatment of Pulmonary Arterial Hypertension (PAH). PAH patients will often exhibit pulmonary artery pressures that are suprasystemic (&gt; 80-40 mmHg, compared with normal pulmonary artery pressures of 25/10 mmHg). Patients with PAH suffer from shortness of breath and fatigue and may experience symptoms of right heart failure (cor pulmonale) including ascites, hepatic congestion, peripheral edema, and anorexia. Because of the high resistance in the pulmonary circuit, they are unable to increase the volume of blood delivered to the left ventricle (referred to as “fixed cardiac output”). This physiologic limitation results in symptoms of left heart failure, including exercise intolerance and syncope. The goal of Flolan therapy is to reduce pulmonary vascular resistance, thus lowering pulmonary artery pressure and reducing the resistance against which the right heart has to work. It is also expected to improve left heart preload and increase systemic cardiac output. More important than the absolute pressure changes achieved with continuous Flolan infusion, patients generally demonstrate decreased symptomatology and improved exercise tolerance.</td>
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Influencing our institutions:
Staff Education
Policies and Procedures

Influencing our patients:
Education
Support
Relationships

Influencing our communities:
Public Education
Internet Sites
Professional Organizations
Public Education:
- First responders
- Schools attended by PH patients
- Community organizations (Jaycees, Rotary)
- Religious groups

Internet Sites
- Google for Pulmonary Hypertension on 9/16/07 yielded the following:
  Results 1 - 10 of about 2,360,000 for pulmonary hypertension in 0.6 sec.
- The PHA site is one of many that gives important information for patients and other interested community members

Professional Organizations
- Pulmonary Hypertension Association (PHA)
- Heart Failure Society of America (HFSA)
- American College of Cardiology (ACC)
- American Association of Heart Failure Nurses (AAHFN)
pulmonary hypertension (PH) is a simplified name for a complex health problem -- continuous high blood pressure in the lungs, resulting in an enlarged heart...

(Read more)

http://www.phassociation.org/
http://www.aahfn.org/
Influencing our institutions:
  Staff Education
  Policies and Procedures

Influencing our patients:
  Education
  Support
  Relationships

Influencing our communities:
  Public Education
  Internet Sites
  Professional Organizations

Influencing our world:
  Legislative Advocacy
  International Collaboration
  Nursing Research
Legislative Advocacy
- Write letters to legislators
- Visit your local legislators when an issue effecting PH patients is before the body
- Testify in legislative hearings at local, state, and national levels
International Collaboration
International Collaboration

- International PH Associations with PHA Memorandum of Understanding

Austria | Canada - British Columbia | Canada - Manitoba | Canada - New Brunswick | China | Europe | Germany | Israel | Italy | Japan | Mexico | The Netherlands | United Kingdom | Venezuela

- Non-MOU International PH Associations

Argentina | Australia | Belgium | Brazil | Canada - Ontario | Canada - Quebec | Czech Republic | France | Greece | Ireland | Latin America | Mexico | Portugal | South Africa | Southeast Asia | Spain | Switzerland | Taiwan | Turkey
Nursing Research

- Patient education issues?
- Quality of Life Issues?
- Staff education issues?
- Issues in current practice?
Certification and Influence
Certification: A Necessity for Influence?

What is certification?

- process by which a nongovernmental agency validates, based upon predetermined standards, qualification and knowledge of an individual nurse for practice in a defined functional or clinical area of nursing.

- (for AACN, certification) validates knowledge of nursing of critically ill patients to healthcare administrators, peers, patients and most importantly, to the individual nurse.

Adapted from AACN Certification Corporation 2006
http://www.aacn.org(certcorp/certcorp.nsf/)
Certification: A Necessity for Influence?

Examples of current providers of certification include:
- American Nurses Credentialing Center (ANCC)
- American Association of Critical Care Nurses (AACN) Certification Corporation
- Oncology Nursing Certification Corporation (ONCC)
- American Board of Transplant Coordinators (ABTC)
- Wound Ostomy Continence Nursing Certification Board
Other Certification Sites on the Web

American Legal Nurse Consultant Certification Board (ALNCCB)
Certification Board for Urology Nurses and Associates (CBUNA)

Dermatology Nurses Certification Board (DNCB)
Forensic Nursing Certification Board (FNCB)

Medical Surgical Nurses Certification Board (MSNCB)
Nephrology Nurses Certification Board (NNCB)
Orthopaedic Nurses Certification Board (ONCB)

Plastic Surgical Nursing Certification Board (PSNCB)
Radiological Nurses Certification Board (RNCB)
and there are many more . . .
Why Certify?

- Increase personal satisfaction through increased confidence and growth
- Demonstrate professional aspirations and desire to improve the quality of patient care
- Validate specialty nursing expertise
- Survive cutbacks, be more competitive
- Expand career advancement opportunities
- Earn monetary differentials
- Experience enhanced job opportunities

Adapted from Medi-Smart Nursing Education Resources 2007
http://medi-smart.com/cert.htm
Developing a Certification Exam

- Analyze specialty knowledge through focus groups, expert commentary, literature, observation – is it truly specialized?
- Develop a taxonomy of knowledge to be evaluated with the exam
- Write potential exam questions
- Evaluate exam questions for their ability to effectively assess knowledge
Developing a certification exam

☑ Eligibility criteria to take the exam

☑ Preparation Opportunities

☑ Frequency of examinations

☑ Recertification
Certification: A Necessity for Influence?

- It can be a valuable asset to help you reinforce the credibility of your assertion.
- If you don’t have certification, does it mean you can’t be credible?

Based on what we have discussed, the most important asset may be using your voice, your knowledge, and your experience to advocate for patients.
Can We Succeed in Exerting Influence?

- Remember: The National Institute of Nursing Research was established by the U.S. Congress November 10, 1985 by way of an override vote against President Reagan’s veto

Of course we can!!
Thank you for the opportunity to speak to you today!
Selected References


