



The Politics of Caring

By Michele Artz, Rachel Conant, and Chad Lennox

Federal Update

The Patient Safety Act of 2005 is reintroduced.

On November 16, 2005, the Patient Safety Act of 2005 (HR 4349) was introduced in the U.S. House of Representatives by Representatives Maurice D. Hinchey (D-NY), Carolyn McCarthy (D-NY), and Lois Capps (D-CA). The bill, which was introduced with 12 additional original cosponsors, takes a strong step toward ensuring high-quality care by providing the public with the information they need to make informed decisions.

The Patient Safety Act would require Medicare-funded health care facilities to make information publicly available about their staffing levels, patient care outcomes, and specific kinds of errors and avoidable patient care problems, such as pressure ulcers. Hospitals, nursing homes, and clinics would publicly disclose information such as the

- number of RNs, LPNs, and LVNs providing direct patient care.
 - number of unlicensed personnel providing direct patient care.
 - average number of patients per RN, LPN, or LVN.
 - patient mortality rate, adjusted for risk.
 - incidence of adverse patient care outcomes, including medication errors, patient injury, pressure ulcers, and nosocomial infections.
 - complaints filed with the state agency, the Centers for Medicare and Medicaid Services, or an accrediting agency, as well as data regarding investigations and findings as a result of those complaints and scheduled inspection visits.
- Currently, there are no means for patients to obtain information on adverse outcomes in health care facilities.

The bill also provides important whistleblower protections to nurses who report or voice concerns about unsafe patient conditions.

Studies and reports in recent years have identified a relationship between nurse staffing levels and quality of care. The Patient Safety Act recognizes this connection and would help provide the public with the information necessary to make informed decisions.

Data collection on medical errors is a trend that continues to grow. In a July 13, 2005, article, the *Washington Post* cited that Pennsylvania was the first state to “collect data on hospital-acquired infections.” According to the article, several other states have passed laws requiring reporting by hospitals, and approximately 30 states are considering similar legislation. For additional information pertaining to the Patient Safety Act of 2005, go to www.anapoliticalpower.org.

The ANA Makes House Calls—and a Few Senate Ones, Too

On Thursday, November 3, 2005, approximately 65 constituent member association presidents, executive directors, nurse political action leaders, and ANA board members convened in Washington, DC, for the ANA's Lobby Day. Congressional speakers included Wendy Darwell, chief of staff for Representative Maurice Hinchey (D-NY), who talked candidly about Capitol Hill etiquette. Nancy M. Short, DrPh, RN, health legislative fellow in the office of Senator William Frist (R-TN), provided a sobering account of the realities of funding for Nursing Workforce Development. Vicki Ball, MSN, RN, lieutenant colonel in the U.S. Air Force, Congressional detailee in the office of Senator Daniel Inouye (D-HI), and Susan King, MS, RN, executive director of the Oregon Nurses Association, spoke about staffing. Finally, Representative Carolyn McCarthy (D-NY), with more than 30 years of experience as a nurse and nine years on Capitol Hill, talked about the power that nurses can have in politics. She also expressed the vital need for nurses to be a strong voice—not just on nursing issues, but

also on a wide range of health care issues.

Attendees made between 90 and 100 visits on Capitol Hill. The immediate impact of their hard work and the visibility given to the state associations and the ANA cannot be overstated. As a result, the ANA's legislative priorities gained congressional supporters. Representatives Earl Pomeroy (D-ND) and Jim Ramstad (R-MN) signed onto the ANA's Title VIII appropriations “Dear Colleague” letter. Other signatories included Senators Ken Salazar (D-CO) and John Ensign (R-NV). Representative Betty McCollum (D-MN) signed on to HR 1372, the ANA's staffing bill, less than 24 hours after meeting with Erin Murphy, RN, executive director of the Minnesota Nurses Association. Linda Goeldner, executive director of the Iowa Nurses Association, said that “Lobby Day was very valuable for increasing the presence of nurses on Capitol Hill.”

The ANA must continue to show Congress that it has a network of nurses ready to charge forward. Visit www.anapoliticalpower.org to see how you can make your voice heard on Capitol Hill. ▼

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