

2009 Key Public Policy Issues



INTRODUCTION

As the national association for occupational and environmental health nurses (OHNs), the American Association of Occupational Health Nurses, Inc. (AAOHN) is actively involved in federal, state and local legislative, regulatory, and public policy that impact the profession, the health and safety of workers, worker populations, communities and the health care system in general. In both support and advocacy roles, the association collaborates with AAOHN chapter leaders; nursing community advocates; other health and safety disciplines; regulatory committees, departments and agencies; policy makers; and other stakeholders to accomplish the organization's ENDS, mission and Public Policy agenda.

AAOHN is a visible force in federal legislative and regulatory affairs, as well as, being involved in state and local public policy through its members and chapters; and engages in advocacy with the nursing community and other professional stakeholders. The association has four spheres of influence for action, which are interconnected and overlapping: the workforce, the environment (workplace and community), the profession, and the business of health. The effectiveness of AAOHN in one area will be influenced by involvement in other areas.

Through a number of strategies (e.g. providing comments/testimony and writing letters, developing position statements and practice resources, and establishing alliances with other agencies and organizations), AAOHN takes action on emerging occupational and environmental health and safety, professional practice, and national and global regulatory and public policy issues.

For the 2009 AAOHN Public Policy Platform, the four priorities resonate the current political and economic climate for health care system change and reflect global and domestic trends, threats and opportunities related to the profession, access and quality of health care, and economic stability and global competitiveness of the U.S. The 2009 Public Policy priorities are:

- Health Care System Transition
- Public Health and Environments
- Health and Safety Policy
- Professional Practice

HEALTH CARE SYSTEM TRANSITION

With health care a top priority, efforts are being focused on transformation and improvement of population health, change in health care delivery and stabilization of current economic events. Health care must be accessible, affordable and flexible for individuals to make informed choices based on individual health and safety needs. Individuals must not be limited and/or restricted in their selection of health care providers, based on provider politics, privileges and/or compensation. AAOHN believes that individuals have a right to know who is taking care of them and what credentials qualify them to provide health care services.

Since there are approximately 134.5 million working adults who spend more than 1/3 of their day at work, the workplace provides a unique opportunity for the delivery of health and safety programs and services. The OHN, as a health care expert and business partner in the workplace, is a registered nurse (RN) or an advanced practice registered nurse (APRN) working in the specialty practice that provides for and delivers health and safety programs and services to workers, worker populations and community groups. The practice focuses on promotion and restoration of health, prevention of work related (122 per 10,000) and non-work related (4.2 cases per 100) illness and injury and protection from work related and environmental hazards. In this unique position, the OHN serves as the "health care gatekeeper" for workers and community groups. As the "gatekeeper," the OHN is committed to advancing and maximizing the health, safety and productivity of domestic and global workers, worker populations and community groups.

According to the Centers for Disease Control and Prevention (CDC), 43.7 million (14.5 percent) Americans of all ages were uninsured in 2007, and 8.9 percent of children under the age of 18 had no health insurance due to the high cost of health insurance

coverage. Although the U.S. has been touted to have the best health care in the world, a World Health Organization (WHO) report ranked the U.S. as 37th of 190 countries. In 2007, the U.S. spent \$2.3 trillion (\$7600 per person) or 16 percent of the gross domestic product (GDP) on health. By 2017, the cost for health care is expected to exceed \$4.3 trillion or 20 percent of the GDP, yet the nation has fallen short of providing Americans with health security. With rising healthcare costs and decreasing government programs such as Medicare (37 million) and Medicaid (40 million), fewer workers, employers and families are able to access affordable quality health care and health insecurity is becoming a shared American experience.

In the current volatile economy (job separation rate exceeds the job hire rate/unemployment rate at 6.7 percent and rising) and changing employment structure (temporary and contingent workers vs. full-time workers), rising health care cost will only undermine already fragile business and health care system environments. As a business strategy, employers (workplace cultures) are changing from the idea of treating workers' health conditions to keeping workers healthy by promoting optimal health for workers and worker populations to reduce absenteeism and turnover, and improve retention and productivity.

Currently, 75 percent of the nation's health care expenditures are related to treatment for preventable conditions (e.g. smoking, lack of exercise, obesity, alcohol and drug abuse). Any transformation of the health care system needs to focus on opportunities to be and stay healthy, regardless of where one works and lives. AAOHN is supportive of the movement to create a healthy culture that in turn will help America become the "healthiest nation."

PUBLIC HEALTH AND ENVIRONMENTS

The goal of public health is to prevent disease or injury, promote healthy lifestyles and environments in a community and/or a population, achieve health protection in every stage of life, in all environments, and preparedness for all threats. Legislators and policymakers support public health by enacting laws and policies and allocating funds to support programs and services. In the current economic recession, funds for public health programs have been cut and the nation's public health services and infrastructure continue to be at risk. Over the next four years, a health care priority is to promote public health (e.g. preventive services, health screenings and early detection) and

increase state and local preparedness for terrorist attacks and natural disasters. AAOHN supports public health, but suggests that public health goes beyond the physical health focus on preventive services and preparedness to include the environment (where we work and live).

Environmental health, although targeted towards disease prevention, includes the physical, chemical, and biological factors external to the individual, and factors impacting behaviors (excluding social, cultural and genetic) to encompass the assessment and control of those environmental factors that can potentially impact domestic and global health. Those environmental factors include: air quality (e.g. fragrance-free workplace, schools, etc.) to eliminate diseases such as asthma; noise pollution (e.g. noise control and hearing protection) because 30 million workers are exposed daily and 120 million globally have hearing difficulties; waste (e.g. proper waste disposal to eliminate by-products, like dioxins and PCBs) because of various industrial processes found in soil and water; and water (e.g. clean and adequate supply of water) to eliminate agricultural pesticides and chemicals that eventually enter waterways and to conserve the water supply.

AAOHN supports strengthening the Nation's Public Health System to improve the overall national healthcare system while protecting the health of all Americans. Adequate funding and appropriations for agencies such as the Department of Health and Human Services (HHS), particularly CDC, is imperative at all levels, especially at the local level, to respond to their mandates in protecting the public's health and environments.

HEALTH AND SAFETY POLICY

There are numerous state and federal regulatory agencies setting standards and policies on health and safety (e.g. Department of Labor's (DOL), Occupational Safety and Health Administration (OSHA), etc.). OSHA, the most identifiable as it relates to the workplace, initiates its own standards and/or responses to petitions from NIOSH. This process can take months, sometimes even years, since a petition must be in writing to promulgate, modify or revoke a standard.

Although 90 percent of worker deaths are related to health hazards, current standards and regulations are "safety sided." This may be due, in part, to the fact that safety standards are more straightforward while health

standards are more evidence-based and state regulated.

The changing demographics of the workforce, the changing structure of employment and the nature of work, as well as the increasing emphasis on worker and worker population health and safety, instead of a work-related disease and injury focus, will challenge federal, state and other regulatory agencies and organizations to develop unique and effective approaches to promulgating health and safety policy.

The association supports a comprehensive systems approach that is evidence-based and timely in addressing health and safety hazards—an approach that represents all occupational health and safety disciplines, and other stakeholders, in the development of policy for reducing health and safety risks. However, federal funding and appropriations for agencies such as the Mine Safety and Health Administration (MSHA), OSHA, NIOSH, and HHS at appropriate levels is imperative for these agencies to fully respond to their mandates in protecting workers and the citizens of the nation.

PROFESSIONAL PRACTICE

The U.S. continues to experience a chronic nursing shortage that was first noted over ten years ago and is currently showing no signs of abating. The link between health care and the nation's economic security and global competitiveness is undeniable. Having a sufficient nursing workforce to meet the demands of the delivery of high quality cost-effective services, as the nation looks to reform the current health care system, is imperative. Having an adequate supply of nurses is necessary also to meet the practice demands in specialty areas of nursing, such as occupational and environmental health nursing.

AAOHN collaborates with other nursing associations/ organizations to advocate for appropriate levels of federal funding to address the nursing shortage (e.g. pipeline, faculty, etc.), respond to scope of practice activities to control/limit professional practice (e.g. APRN) and access to care initiatives (e.g. Nurse Licensure Compact).

AAOHN supports the profession through its advocacy efforts that emphasize the value of occupational and environmental health nurses to employers, employees, government and other important stakeholders. AAOHN continuously works to elevate the profession and build visibility for occupational and environmental health nurses and demonstrates how the OHN improves health outcomes and productivity, which influence financial returns and the bottom line.

Revised and approved January 2009