



Setting priorities for health reform



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The passage of the Patient Protection and Affordability Care Act (Public Law No: 111-148) was signed into law on March 23, 2010, after a period of lengthy and acrimonious national debate (see full analysis on the Kaiser Family Foundation website: <http://www.kff.org>).¹ Long before agreement on the final language of the bill was complete, the healthcare community had conceded that the bill would address *insurance* reform, leaving the challenge of *health* reform to continue beyond the bill's passage. In his Presidential Address to the Institute of Medicine (IOM), Harvey Fineberg suggested that comprehensive reform will take place over years, and he identified 6 areas where reforms could substantially advance us toward actual health reform²:

1. Prevention—including the development of social and financial sanctions or rewards for conforming to behaviors understood to be health-promoting and disease-preventing;
2. Federal research support—including consideration of a stabilizing approach to the budget of the National Institutes of Health, moving from an annual budget to a 3-year budget with updates;
3. Costs of care—better aligning incentives on costs and payments for those receiving and those delivering costs;
4. Insurance coverage and comparative effectiveness research—including a clearer sense of the social good behind what we *should* expect to pay for and a better understanding of the evidence supporting services;
5. Reframing Medicare—aiming to achieve the highest attainable level of health for every dollar spent by individual enrollees and by the public; and
6. Physician payment and medical education—including increasing incentives for physicians to enter primary care,

bundling payments, increasing team-based and home-based services, expanding opportunities for fully subsidized studies for medical students, and tort reform.

Overlooking the disciplinary perspective, this list is fairly broad and comprehensive and could serve as the agenda for the American Academy of Nursing (AAN) over the next decade. However, critical areas are missing from the list, areas that the nation's nurses are ready and committed to address. These missing priorities appear in another IOM document, *Future Directions for the National Healthcare Quality and Disparities Reports*.³

Chaired by AAN Fellow, Sheila P. Burke, Faculty Fellow at the John F. Kennedy School of Government at Harvard University, this Agency for Healthcare Research and Quality-sponsored report² responds to the charge to establish priority areas for quality improvement and disparities while updating previous guidance for the 2 annual reports: National Healthcare Quality report and the National Healthcare Disparities report. In addition to making specific recommendations about the uses of collected data to guide action and improving the understandability of the report for multiple audiences, the report identified the following National Priority Areas for Health Care Quality Improvement and Disparity Elimination:

1. Patient family engagement—engaging patients and their families in managing their health and making decisions about their care;
2. Population health—improving the health of the population;
3. Safety—improving the safety and reliability of the US healthcare system;
4. Care coordination—ensuring patients receive well-coordinated care within

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**American Academy of Nursing
Strategic Plan
2010 - 2014**

PLAN 2014

VISION:

Transforming health care policy and practice through nursing knowledge.

MISSION:

The mission of the American Academy of Nursing is to serve the public and nursing profession by advancing health policy and practice through the generation, synthesis, and dissemination of nursing knowledge.

OVERARCHING GOAL:

Position the Academy and its Fellows to positively enhance health outcomes and the effectiveness of the health care delivery system, through effective use of the Fellows' leadership expertise, innovative solutions, and partnerships with other health professions, consumers, media and policy makers.

Priority tactics that support the 2010-2014 Strategic Plan are:

- Engage Academy Fellows in the work of the Academy.
- Establish new and expand existing relationships with collaborators who share our priority interests.
- Expand our capacity to act.

STRATEGIC GOALS:

Strategic Goal 1: Advance evidence-based innovations in health care delivery to address the health needs of populations, including diverse, at risk, and disenfranchised populations.

Strategic Goal 2: Influence health policy through dissemination of nursing's contribution to improved health outcomes and care delivery.

Strategic Goal 3: Promote knowledge development in order to advance quality health care.

Strategic Goal 4: Establish the infrastructure for the Academy to be policy ready and able to fulfill its mission.

Figure 1. The American Academy of Nursing's Strategic Plan for 2010-2014.

- and across all health care organizations, settings, and levels of care;
5. Palliative care—guaranteeing appropriate and compassionate care for patients with life-limiting illnesses;
6. Overuse—eliminating overuse while ensuring the delivery of appropriate care;
7. Access—ensuring that care is accessible and affordable for all segments of the population; and

8. Health systems infrastructure capabilities—improving the foundation of healthcare systems (including infrastructure for data and quality improvement and communication across settings, workforce capacity and distribution, and systems for coordination of care) to support high-quality care.

Those priorities match well to the broad areas identified in the Academy's strategic plan (Fig. 1).

Over the last year, AAN's Strategic Planning Group has developed a plan to guide the academy's priorities through 2014. Developed as a dynamic, working document, this plan highlights the policy areas—in which we believe nursing has a particular point of view—that contribute to advancing the public good. The board is developing particular initiatives within each of the strategic goals and recommitting to initiatives that we believe should be continued, including

our Robert Wood Johnson Foundation-funded *Raise the Voice* campaign and our well-established collaboration with the John A. Hartford Foundation, "Building Academic Geriatric Nursing Capacity." The themes of innovation, quality, value, access, and inclusivity have dominated our ongoing discussion. We support the National Priority Areas for Health Care Quality and Improvement and Disparity Elimination, and will look for ways to advance those

priorities within our own work. Importantly, to continue the work of reform we need to be policy-ready and prepare leaders to influence the policies that impact our health.

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3. Institute of Medicine. Committee on Future Directions for the National Healthcare Quality and Disparities Report. (2010). Available at: <http://www.iom.edu/Reports/2010/Future-Directions-for-the-National-Healthcare-Quality-and-Disparities-Reports.aspx>. Accessed May 8, 2010.

MISSION STATEMENT

Nursing Outlook, the official journal of the American Academy of Nursing, provides critical and timely analyses of emerging professional and healthcare issues of importance to all nurses. The primarily editorial goals of the journal are to:

1. Publish innovative, original articles that stimulate thoughtful discussion and scholarly debate and policy implications among nurses and other healthcare professionals.
2. Inform readers about the diversity of opinion on controversial professional and healthcare and health policy matters affecting nursing and the health of the public.
3. Provide a multidisciplinary forum for the dissemination of information derived from the synthesis of extant knowledge of current and future clinical practice and health policy alternatives.
4. Disseminate information about creative, alternative, and forward-looking models of education and clinical practice as they relate to changing systems of healthcare.
5. Promote the synthesis and use of scientific knowledge in a timely fashion by nurses and other healthcare professionals to enhance the quality and efficiency of health care.
6. Provide the American Academy of Nursing with a medium for communicating important policy issues and organizational activities.
7. Increase critical awareness of technologies, products, and services that have the potential for increasing the effectiveness of nurses in all settings.