

## **MEDIA/PUBLIC RELATIONS/ADVOCACY**

**2017 Winner:** American Society of Anesthesiologists

**Entry Title:** Protecting Safe VA Care 

### **Project Overview/Elevator Pitch:**

In an effort to ensure better health care for the Veterans who served America, the U.S. Department of Veterans Affairs (VA) posted a proposed rule May 25, 2016 to the Federal Register aimed at improving access to care by allowing all advanced practice registered nurses (APRNs), including nurse anesthetists, to practice without the collaboration or supervision of a physician. When it came to anesthesia care, the policy would remove physician anesthesiologists from surgery and replace them with nurses, lowering the standard of Veterans' care and risking their lives. The policy was based on a shortage of some types of physicians in VA, but there was no shortage of physician anesthesiologists and the change was not needed to improve access to anesthesia care.

The public, Veterans and other concerned citizens had 60 days to comment on this proposed rule. The American Society of Anesthesiologists launched an advocacy campaign to encourage the public, policymakers and Veterans to speak out against the rule and preserve physician-led, teambased anesthesia care using traditional, social and digital public relations tactics to drive awareness and inspire action. Two unique challenges: 

1. Support for the proposed rule from dozens of influential groups including the Federal Trade Commission, AARP, the American Hospital Association, the Robert Wood Johnson Foundation, and an alliance of nursing organizations including the American Association of Nurse Anesthetists.
2. Public perception that the policy would help Veterans and give them timely access to care, despite there being no shortage of anesthesia providers in the VA.

### **Project Goals/Objectives:**

ASA knew from its member physician anesthesiologists working in VA facilities that allowing nurses to work without physician supervision would jeopardize Veterans' lives and not improve access to care because there was no shortage of physician anesthesiologists in VA. An analysis of research on the health of Veterans showed they often have multiple medical conditions that put them at greater risk for surgical complications.

The VA's 2015 Top Ten Mission Critical Occupations in Shortage did not list shortages of physician anesthesiologists or nurse anesthetists and the VA's own internal Quality Enhancement Research Initiative (QUERI) study of this issue titled "Evidence Brief: The Quality of Care Provided by Advanced Practice Registered Nurses," raised significant

questions about the safety of the “solo CRNA” or nurse-only models of anesthesia. After reviewing existing studies, even self-funded nursing advocacy studies, QUERI concluded the evidence did not prove it would be safe to implement nurse-only models of anesthesia for VA, specifically questioning “whether more complex surgeries can be safely managed by CRNAs.”

The primary goal was to maintain physician-led, team-based anesthesia care within VA. Objectives included the following: Generate 20,000 comments to the Federal Register in opposition to the proposed policy and deliver 5,000 messages to elected officials in support of physician-led anesthesia care. The team also aimed to secure news coverage with national, major market and key trade media stressing the importance of physician-led team-based anesthesia care with 50 percent including key messages about the proposed policy lowering the standard of care for Veterans. Finally, ASA sought to engage social media followers to spread 3,000 #SafeVACare messages and calls to action.

**Strategy:**

Specific strategies were developed to reach the goal. First, the team developed key messages based on research and review of studies on physician shortages in VA, the quality and safety of nurse-only models of anesthesia care and Veterans’ health care needs. Materials were developed including media alerts, news releases, a fact sheet, a media backgrounder, sample letters-to-the editor and sample op-eds. To ensure we reached target audiences, ASA worked closely with Veterans’ organizations to carry the voice of Veterans. ASA also conducted outreach to garner support from Members of Congress. The team worked to launch a digital ad campaign including display advertising and Facebook ads to reach politicians, physicians, Veterans, Veteran family members and others who support Veteran’s health.

ASA developed and launched [SafeVACare.org](#) to house pertinent information about the proposed policy and facilitate the submission of comments to the Federal Register and armed ASA social media ambassadors with a toolkit of outreach strategies.

Proactive media relations included an aggressive media outreach plan with news release distribution the day before the rule officially posted to the Federal Register and before all other groups who supported the proposed policy. ASA held a press conference in Washington, D.C. within a week of the proposed policy posting and trained spokespersons to deliver key messages and press conference remarks. The ASA communications team activated a letter-to-the editor and op-ed initiative (1) targeting national outlets and Veterans and policy publications and (2) mobilizing members located in key Congressional districts to submit targeted, localized letters to daily newspapers. The team also conducted ongoing outreach with target media including wire services, top daily and national newspapers, news magazines, health trade publications, Veterans and policy publications, national TV and radio and online outlets to secure sustained coverage.

### **Success Metrics:**

The VA published its final regulation insert date Dec. 13, 2016, which excluded nurse anesthetists from the decision to grant full practice authority and maintained physician-led, team-based anesthesia care in the VA health care system.

More than 104,000 comments were submitted to the Federal Register through SafeVACare.org - 11,200 comments from Veterans - 14,600 from Veterans' families. Through our campaign efforts, more than 140 members of Congress, and Veterans organizations opposed the policy and more than 8,000 messages were sent to elected officials from 2,415 ASA member advocates and other concerned stakeholders.

Media relations efforts resulted in 422 placements reaching an estimated audience of 338 million including coverage by the Washington Post, The Hill, San Francisco Chronicle and McClatchy Tribune. 95 percent of coverage mentioned that the proposed policy would lower Veterans' standard of care. One major highlight was a FOX News segment from the press conference in a Special Report with Bret Bair segment. 65 ASA members secured publication of 66 opinion pieces in key markets including Atlanta, Columbus, Ohio, Norfolk, Va., and Rochester, Minn.

Social media played a large role in ASA's success as well. The team distributed social media ambassador toolkits to 100 members, resulting in more than 13 million Impressions and 4,200 Tweets using #SafeVACare by 872 advocates.

SafeVACare.org attracted 236,592 unique users throughout the campaign year. Online display ads resulted in 36.3 million impressions generating 47,373 SafeVACare.org clicks. Facebook ads reached more than 1,589,753 policymakers, physician anesthesiologists, and surgeons, generated 77,468 SafeVAVare.org clicks to the website, and drove 56,145 social engagements ("likes," comments, and shares).

### **Learn More:**

CAMPAIGN WEBSITE - <http://www.safevacare.org/>

DIGITAL AD VIDEO - <https://www.youtube.com/watch?v=SrU1ggVJdfU>

### **Association website**

[www.asahq.org](http://www.asahq.org)

