Week 6—Use of Social Media

The current era is characterized by changing communication technologies from the use of media like Facebook, Instagram, and Twitter. There is a shift in consuming and communicating information from traditional ways to the use of social media. One such example of an organization that uses social media to promote awareness and influence policy-making is the National Nurses United (NNU). The organization posts more policy-related content on Facebook and Twitter (Waddell, 2019). This organization has over 150,000 members and is the largest union of registered nurses in the history of U.S. The organization has an active presence on social media, for example, Facebook.

There are several reasons people use social media which make it a successful platform for pushing health policy agenda. For example, caregivers and patients have an active presence of social media channels blogging, tweeting or building peer-to-peer groups on Facebook (Waddell, 2019). Also, they use these channels to share and discuss information; negative and positive on health care services. In addition, these platforms have also helped patient find others with similar conditions and discuss treatment option, offer support and lifestyle changes. Health care practitioners are also users of social media for networking, patient education, organizational promotions, and public health programs. Therefore, social media tools help in research dissemination and policy agendas.

Social media platforms are great for influencing policy because they have an increasing user base worldwide. Estimate shows that there are over 1.87 billion users on social media. Thus, the increased of social media by user with health agenda makes it a valuable tool for disseminating, consuming, promoting public awareness and influencing policymaking on health (Charalambous, 2019). In addition, the internet is the second highest source of science news. Thus, shaping the public opinion can influence policymakers.

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Week 5—Strategizing and Creating Change

A policy change is a gradual shift in existing systems or the introduction of new and innovative policies. In healthcare, a policy agenda can aim at improving the performance of existing systems while ensuring their efficiency and response to future changes. The National Association of Clinical Nurse Specialists (NACNS) 2018-2020 public policy agenda reflected on three emerging healthcare issues namely: Healthcare reform, Health Information Technology (HIT), and Clinical Nurse Specialist and Workforce. In this paper, I will focus on how the association is formulating and implementing the HIT policy, and the current outcomes of the initiative.

**Formulation and Implementation of HIT Agenda**

Policies originate from societies’ efforts to change their institutions to achieve a goal (Howlett, & Mukherjee, 2017). NACNS identified the need for healthcare organizations to use technology in the management of healthcare data, diagnosis, and decision support to provide better care for patients. To promote this agenda, the association management developed strategies and allocated resources to achieve a technology-driven system. The policy strategy was then forwarded to policymakers at state and federal levels for their input. On identifying the inputs and resources required to implement the HIT change, registered nurses and clinical nurse specialists were informed of the goals of the initiative and their roles and responsibilities in the policy implementation.

**Impact of HIT Initiative**

HIT has transformed the healthcare sector in several ways. There has been improved patients care and coordination. The use of digital diagnostics has seen a reduction in human error increasing patient safety (“2018-2020 Public Policy Agenda,” 2017). Healthcare organizations have experienced improved efficiency and reduced operating costs.

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Week 4—System Change

A nurse was successful in spearheading change in an institution by the implementation of the C-suite concept. This refers to senior executives such as chief financial officers, chief executive officers, chief nursing officers, chief information officers, and chief operating officers. The nurse understood that nursing was valuable to the institution because nurses are change agents.

There were several driving forces that led the nurse to implement the changes ("Change, the Only Constant in Healthcare," 2017,). One of the forces was that the nursing staff was not able to advocate for themselves. This is because the nurses were very busy dealing with the sick. It was realized that the institution administrators used the old-fashioned way using the patient census model in order to measure the need for staffing. For healthcare institutions to maintain nurses who are experienced and offer quality service, they need to revisit this method. Another driving force was high turnover rates and very low retention of the nurses on the pediatric floor. This had a significant impact on the quality of health care that was provided to the patients.

Several obstacles were encountered during the change; the number of qualified nurses was low due to the low retention rate. The nurse had a plan to fill this gap. However, the nurse had to acquire more nurses from another institution in order to manage the pediatric ward. This led to increased morale in the nursed, improved patient outcomes, and retention of qualified nurses.

In healthcare, it is vital for nurses to find new ideas to implement change. With the obtaining of a role in the C-suite, the frontline nurses will find a voice (RN, 2020). Nurses also need an advocate so that their needs can be met and they can do what they do best by providing the best quality care to their patients.

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