

Why it matters...*Physician Engagement in Surgical Health Policy Advocacy*

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Orthopaedic Trauma & Fracture Care: Pushing the Envelope

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Disclosures:

- None Financial
- Advocacy Positions at the ACS
 - HPAC
 - HPAG

Learning Objectives

- What is Surgical Health Policy Advocacy
- Review the spectrum of advocacy engagement
- Importance of engagement in surgical health policy advocacy

What is Advocacy?

- *The act or process of supporting a cause or proposal*

- Common Examples:

- AMA
- NRA
- School Associations
- Realtors
- Lawyers
- Big Money!



What It Is NOT:

- Dirty
- Wrong
- Corrupt
- For Others

What is Surgical Health Policy Advocacy?

- The act or process of supporting a cause or proposal *specifically focused on*:
 - Surgical patient population
 - Surgical profession
 - Improving Surgical care delivery
 - Keeping the Surgical patient and profession as the cornerstone of purpose

Why is Advocacy Such a Challenge?

Classic Science

- Well defined methodology
- Defined notions of reality
- Precision in agent, host and environmental factors
- We know what it is

Advocacy

- Dynamic interplay of factors and influences
 - beyond evaluator's desire for control
- Seeks to change upstream factors
 - laws, regulations, policies and institutional practices
 - prices and standards
 - Influence personal health choices
 - of individuals and the environments in which they are made

For the faint hearted, advocacy can take on the spectre of a fraught, politicized activity, threatening to make enemies particularly of retributive government figures and litigious industries.

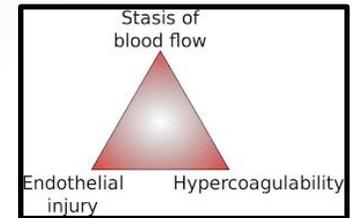
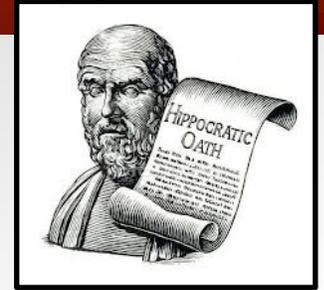
Barriers to Surgeon Engagement?

Earnest 2010 Academic Med

- Academic Success requires Hard Science
 - Social Sciences
 - Population Health
- Ambiguous and Uncertain
 - Complex *Process*
 - Lack of Immediate Gratification
 - RELATIONSHIP Building takes *TIME*
 - Government is complicated
- Clinically TOO busy
- Trained to keep personal/political opinions to themselves
- Conflicting Agenda personal or w/hosp/org
- Partisan

Why start something “new”?

- Hippocrates
 - “...that I [the physician] will be an advocate for the patients in need and strive for justice in the care of the sick”
- Dr. Rudolph Virchow (1800s)
 - “Politics is nothing but medicine on a larger scale”
- AMA Code of Ethics (1847)
 - Encourage physicians to advocate publically



Surgical Health Policy Advocacy Engagement

- How can Surgeons actively engage in the changing face of healthcare...
 - *Why should they?*
 - *Patients*
 - *Patient centeredness*
 - *Changing Reimbursement*
 - *Team Based Care*
 - *Quality and Satisfaction Reporting*

Doctor / Surgeon:

Doctor

Latin: *Medicinae Doctor*, meaning "Teacher of Medicine"



Surgeon

Latin: *chirurgiae*, meaning "hand work"



"Teachers who do stuff..."

How does that relate to this?



Similarities: There is a PROBLEM

In Medicine there is a DISEASE

- As physicians (*surgeons*)
 - We heal and repair people
 - We ameliorate pain
- As patients
 - People are torn between care and sacrifice
 - Costs to self
 - Costs to families



In Advocacy there is a CONFLICT

- Often associated with cost
- Or Laws or Regulation
 - Or LACK there of...
- Examples
 - Budgets
 - Advisory regulations
 - Reimbursements
 - Patient Coverage (Insurance)



Fish out of water...?



Effect on Patients:

- If surgeons don't pay attention to federal and state policy *and* participate...
 - Patient access to care and the cost of that care will be in more trouble
 - Competing efforts by other specialty groups
 - *Opportunity* to collaborate/compromise?
 - If not at the table, then on the menu....

Advocacy as a Spectrum

- Patient Advocacy
 - taking care of an individual patient or family
- Local Advocacy
 - addressing a hospital system or community issue
 - Fall Prevention, Local Child safety (helmets, car seats, immunizations, etc)
- State Advocacy
 - state laws, budgets
 - Injury prevention, health funding resources, scope of practice
- Federal Advocacy
 - budget, resource allocation, injury prevention
 - Complex issues
 - Often monetary, negative aspects



Why get involved?

- Professional obligation
 - YOU are a constituent
 - YOU hold a respected position in the community
 - YOUR *PATIENTS* are constituents
- Growing influence
- Make a broader difference for your patients
- Makes you more well-rounded



How can you get involved?

- Pay attention to opportunities around you
- Specialty Society Representatives
 - This session
 - Workshop on Wednesday
- ACS
 - Conference calls
 - Representatives to committees
 - Write essays

How to Participate:

- Pay attention
 - Watch the news / Online / FB / Twitter
 - Participate when others are talking about topics
 - Ask questions
- Join an Organization
 - Newsletter Summary
 - <http://surgeonsvoice.org>
 - <https://wire.ama-assn.org>
- Meet with your Congressional Members and VOTE!
- Write letters/emails to your Congress people
- Make Phone Calls

- DOES any of it matter?

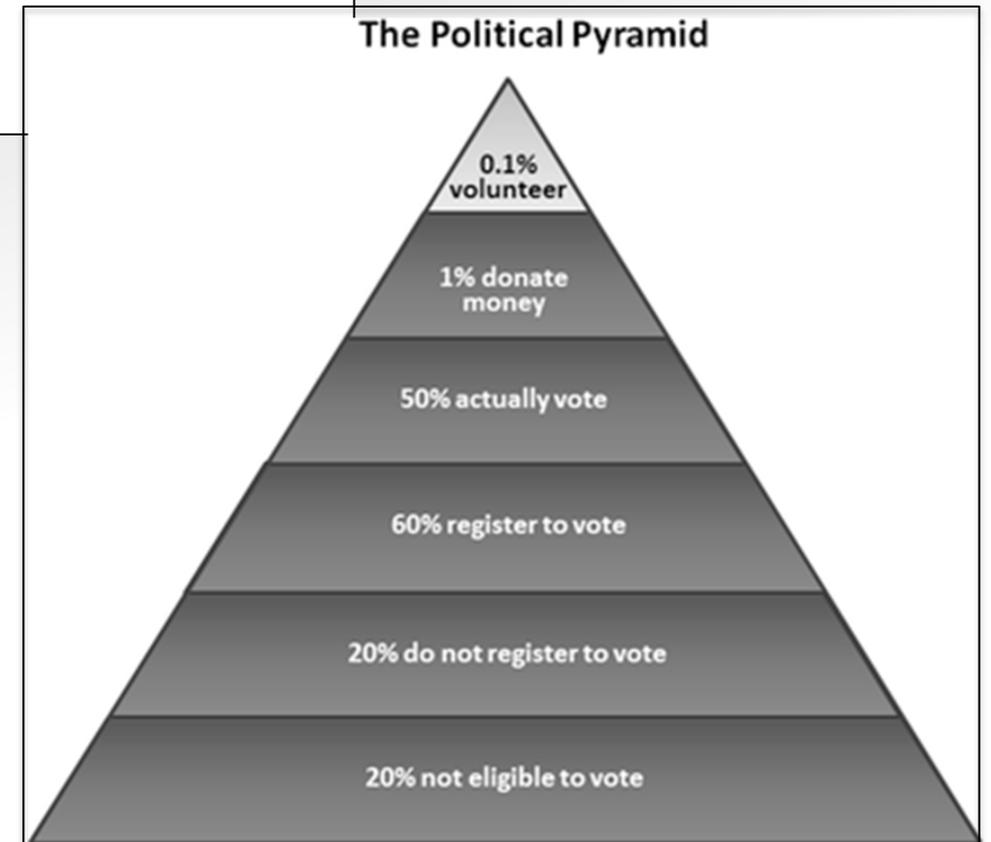
Medicine and Advocacy

The Evolution of Advocacy and Orthopaedic Surgery

Clin Orthop Relat Res (2013) 471:1873–1878

**Manish K. Sethi MD, Allie Obremskey,
Vasanth Sathiyakumar BA, John T. Gill MD,
Richard C. Mather III MD**

- Historical review of health policy advocacy
- Political Pyramid



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Table 1. Guidelines for forging relationships with lawmakers, based on experience in the combined fields of advocacy and medicine

Guideline

Get involved with state and national advocacy organizations. Formal advocacy events are common and provide an opportunity to gain experience.

Interact with lawmakers when they need others more than others need them, such as during campaigns.

Volunteer and contribute to individual campaigns in or near the local district.

Identify a rising star. One's contributions to the first successful election of a lawmaker will likely have a greater impact than successive ones.

Engage patients and their experiences to magnify one's own impact.

If there is incompatibility with a member in the local district, develop a relationship with a member from a nearby district. This person may not be a voter in this district but will likely have many patients who are local voters.

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- State Medical Societies
- Leadership Structures
- Committees
- Facilitates relationships with local legislators
- State Issues overlap with Federal Issues

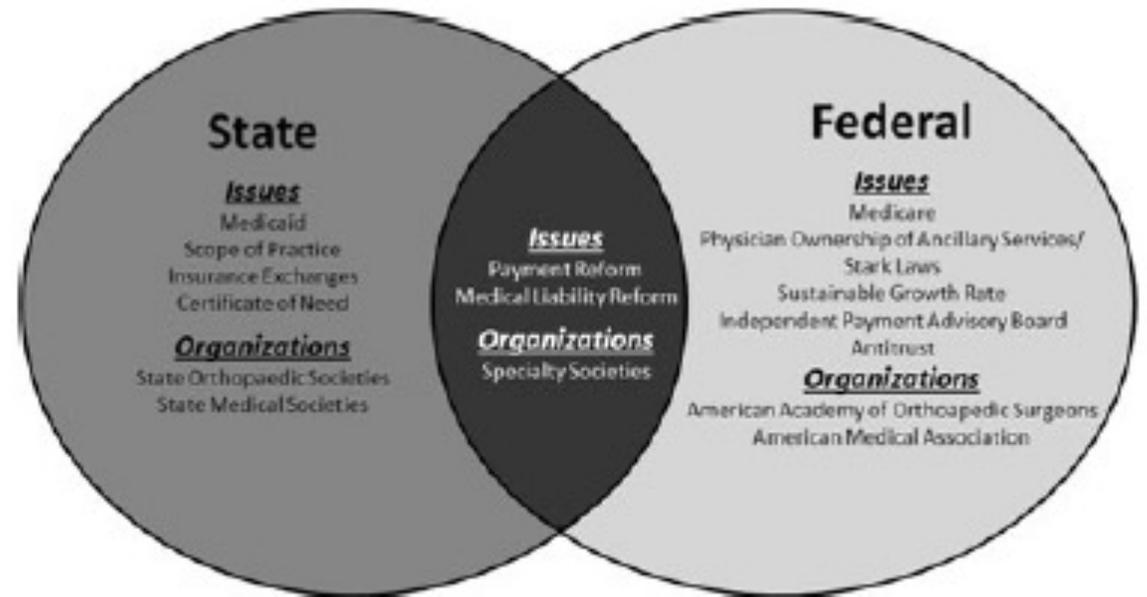


Fig. 2 Issues and organizations can have relevance, important, and influence on the state and federal levels. This image shows the spheres of influence, which break down the different types of issues/organizations and illustrate the levels (state and/or national) to which they apply.

Do Legislators want to be contacted by Doctors?

State legislators' sources and use of information: bridging the gap between research and policy

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University in St. Louis, St. Louis, MO, 63130, USA

Heath Ed Research Oct 2015

Use of existing relationships

Several participants noted that their existing relationships with healthcare professionals offered them a trustworthy starting place when they seek health information. Participants also mentioned that they turn to universities or educational institutions that they know are working on the same health issue, though they mentioned that it's often hard to know *how* to seek information from universities so instead, they often wait for the information to come to them through another organization that has made the connection for them.

Want to be contacted

Participants also suggested that researchers regularly contact them to share information about what they're working on, 'opening the lines of communication between...legislators and the universities.'

Other:

Stats/Population Data

Stories

Advocacy as Dissemination

Research Depends On:

- Impact Factors
- National Meetings
- Slow distribution

- Role for appropriate vetting
- Academic Method

Surgical Health Policy Advocacy:

- Communicating
 - Current research into policy
 - Informing policy formation
- Communication of expert and clinical experience
 - To legislators and regulators
- Population level implementation
 - Academic and clinical knowledge

- May be FAST or SLOW

What can you do?

- Contact your Representatives
 - Email
 - Letter
 - Phone Call
 - In-District Meetings
 - Take a photo
- Write Letter to the Editor
 - Local paper
 - State paper
 - On-line



What can you do?

- **Attend Meetings – *Build Relationships***
 - Personal
 - Expert
 - Respected advisor to patients (constituents)
- **Schedule a Tour**
 - State or Federal Reps (often in district)
 - Seek approval from hospital or medical group
- **Do it yourself**
 - Or Support a PAC (doesn't have to be much)
- **Engage your colleagues**
- **Involve Students**
- **Involve Patients**



Thank you

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