

# From Council Recommendation to Policy: The Process

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# Overview

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1. Overview of BHW Mission and Goals
2. Overview of National Advisory Council on Nursing Education and Practice (NACNEP) Charge
3. Drafting Recommendations
4. Turning Recommendations into Policy
5. Upcoming Opportunities for Feedback



# Stakeholder Engagement

**Our work with partners enables us to make informed decisions on policy and program planning. Together, we are creating a strong workforce of diverse health professionals who provide quality care to communities in need.**

**We work with partners through:**



# BHW Goals – Our Programs Aim to Address

## Access

- Increase access to health care for underserved and vulnerable populations

## Supply

- Promote equilibrium in the supply and address shortages of health professionals

## Distribution

- Improve workforce distribution so all parts of the U.S. have an adequate number of providers to meet the demand for care

## Quality

- Develop a quality health workforce that is trained in and employs evidence-based techniques that reflect better patient care

# Strategies for Success



# NACNEP Charge

The National Advisory Council on Nurse Education and Practice (NACNEP) is authorized by Section 851 of the Public Health Service Act as amended by Public Law 105-392. The Council's charge is to:

- (1) provide advice and recommendations concerning policy matters... relating to the nurse workforce, education, and practice improvement;
- (2) provide advice in the preparation of general regulations and with respect to policy matters...relating to nurse supply, education and practice improvement; and
- (3) prepare and submit an annual report...describing the activities of the Council, including findings and recommendations made by the Council concerning the activities under this title.



# Committee Recommendations

*The Committee is strongest when considering areas where HHS and the Secretary have the authority to make a change in either program or allocated resources.*

*Things to consider:*

- Is this a legislative or policy recommendation?
- Does HHS have authority to make the change?
- Who is the appropriate audience (i.e., Secretary, Congress, public)?
- What is the appropriate vehicle to share recommendations?



# BHW Investments - Nursing

Interprofessional training  
and practice

Academic and clinical  
partnerships

Long-term clinical practice  
in community settings

Residency Training

Nurse Corps Loan  
Repayment Program

Nurse Corps Scholarship  
Program



# Turning Recommendations into Action

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## Legislative

- Letters to Congress
- A-19 process

([https://obamawhitehouse.archives.gov/omb/circulars\\_a019/](https://obamawhitehouse.archives.gov/omb/circulars_a019/))

# Turning Recommendations into Action

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## Policy

- Regulatory
- Programmatic
- Funding Priorities

# Writing Strong and Precise Recommendations

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Strong recommendations are those that have a precise action that can be directly tied to a specific change that the Secretary can make.

Precise action items

VS

General considerations

# Examples of Strong Recommendations

- **Legislative:** The Committee recommends that the Secretary work with Congress to pursue a temporary compliance waiver for grantees in good standing who meet a specified definition for rural and are located in a dental or mental health HPSA when their communities lose access to a sole dental health or mental health provider.<sup>1</sup>
- **Policy:** The ACICBL recommends that HRSA's Title VII, Part D Notices of funding opportunity include the development of culturally competent interprofessional clinical education and training sites that address the complex medical, psychosocial, and health literacy needs of vulnerable populations.<sup>2</sup>

1. National Advisory Committee on Rural Health and Human Services, *Challenges to Head Start and Early Childhood Development Programs in Rural Communities*, [www.hrsa.gov/advisorycommittees/rural/publications/headstartearlychildhood2012.pdf](http://www.hrsa.gov/advisorycommittees/rural/publications/headstartearlychildhood2012.pdf), December 2012.
2. Advisory Committee on Interdisciplinary, Community-Based Linkages (ACICBL), *Rethinking Complex Care: Preparing the Healthcare Workforce to Foster Person-Centered Care*, <http://www.hrsa.gov/advisorycommittees/bhpradvisory/acicbl/Reports/fourteenthreport.pdf>, June 2015.



# NACNEP Recommendation Examples

- Congress should increase Title VIII funding for interprofessional education and practice, and expand current sources and existing funding categories to promote new models of healthcare to improve population health and value. <sup>1</sup>
- Congress should fund joint demonstration projects between academia and practice, to include community-based and rural settings, that develop innovative models of clinical education to prepare health professionals for team-based care. <sup>2</sup>
- Explore and develop new models of interprofessional clinical practice to achieve the key health care goals of better care, improved health outcomes, and lower cost. <sup>3</sup>

1 National Advisory Council on Nursing Education and Practice, *Incorporating Interprofessional Education and Practice into Nursing: Thirteenth Report to the Secretary of the Department of Health and Human Services and the United States Congress*, [www.hrsa.gov/advisorycommittees/bhpradvisory/nacnep/Reports/thirteenthreport.pdf](http://www.hrsa.gov/advisorycommittees/bhpradvisory/nacnep/Reports/thirteenthreport.pdf), 2015.

2. Ibid.

3. Ibid.



# Types of Committee Documents

## Letters to the Secretary:

- <http://www.hrsa.gov/advisorycommittees/mchbadvisory/InfantMortality/4thstrategyrecommendedactions.pdf>

## White Papers or Policy Briefs:

- <http://www.hrsa.gov/advisorycommittees/rural/publications/homelessnessruralamerica.pdf>

## Annual Reports:

- <http://www.hrsa.gov/advisorycommittees/bhwadvisory/actpcmd/Reports/twelfthreport.pdf>



# Questions

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# Contact Us

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