



# **Grassroots Advocacy:**

## **A Step-By-Step Guide**

Produced by

The ACHCA Advocacy Committee



## The Purpose of this Guide

The profession of long-term care administration needs effective advocates.

Every day, it seems to face fresh challenges which could prove harmful if they are left unmet. Meantime, it is also apparent that unless administrators themselves speak up for the interests of their profession, no one else will.

Hence, the American College of Health Care Administrators (ACHCA) Advocacy Committee developed *Grassroots Advocacy: A Step-By-Step Guide*, a practical ready-to-use tool with which ACHCA Chapters can advocate for the profession of long-term care administration.

Such efforts are needed at every level. Nationally, advocacy largely originates at ACHCA headquarters. However, ACHCA chapters provide critical supplementary local support. Meanwhile, they are better suited to lead local advocacy, since ACHCA chapters know the grassroots better than anybody.

Yet, no matter which type of advocacy readers pursue, they should find plenty of useful information in this guide with its general guidelines and examples of successful advocacy efforts by ACHCA members.

The next page has the ACHCA Advocacy Vision Statement which highlights the goals and objectives of the ACHCA Advocacy Committee.

The Committee did an excellent job of fulfilling its responsibility for producing this handbook, and I would like to take this opportunity to thank its members for their outstanding work. The efforts of the Committee, along with those of the entire ACHCA network, will serve as an important step in the advancement of the profession of long-term care administration.

I urge you and your colleagues to use this guide. And please do not hesitate to call upon ACHCA for assistance with your advocacy efforts.

Sincerely yours,



**Walter M. Collins**  
*ACHCA Board Chair 2004-05*  
*Former ACHCA Advocacy Committee Chair*

August 2004

## **ACHCA Advocacy Committee Vision Statement**

The ACHCA Advocacy Committee will play a key role in the future of long-term care. It will strive to become influential and powerful, establishing professional credibility so that long-term care administration is perceived as a vital element of the health care delivery system. ACHCA's support for its Advocacy Committee will be conspicuous and meaningful. Committee members will demonstrate team spirit, helping ACHCA move toward strategic goals. Affiliation and loyalty, critical to a strong voice for advocacy, will be evident.

The ACHCA Advocacy Committee will enhance and promote the profession through advocacy efforts that:

- create awareness of the mission and value of the profession of long-term care administration
- establish credibility and trust among ACHCA's many constituents
- promote affiliation and loyalty among ACHCA members
- foster professional growth in new and experienced administrators
- assist ACHCA nationally with developing cohesive responses to issues based on ACHCA principles and Code of Ethics
- advocate at the grassroots to inspire important wide scale change
- communicate best advocacy practices throughout the ACHCA membership in order to promote the most effective national and local advocacy efforts.

The ACHCA Advocacy Committee will be a forum where there is open dialogue, mutual respect, and open-mindedness, and a free exchange of ideas. Committee members will gain a sense of pride by pursuing worthwhile activities. Also, they will feel energized and become a voice for the profession of long-term care administration which is heard and recognized as credible by the public, regulators, legislators, and other constituencies alike.

In addition, Committee efforts will result in a more favorable public image of long-term care which will in turn cause national and local policy changes. Those changes will impact long-term care regulations, reimbursement, and operations in positive and meaningful ways. ACHCA Advocacy Committee efforts will lead to greater respect, trust, and recognition of the long-term care administration profession. These developments will spur increases in ACHCA membership, and membership activity and involvement. In sum, this overall positive picture is one our profession richly deserves.

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## Advocating To Your Legislators

Legislators can be powerful advocacy allies. Through frequent and appropriate communication, you can educate them about issues important to the long-term care profession and get their help when relevant legislation is proposed.

The following guidelines, gathered from the experiences of your ACHCA colleagues, will help you begin your advocacy efficiently and effectively.

### In General

In any interaction with your legislators—local, state, or national—it **is important to be respectful**. Disrespect will not win you points and may turn off the people you most want to reach. By being courteous and professional, you have the best chance of reaching your goals.

Remember: your legislators are people, too! When they do something right, they like to be told they've done so. **Let them know you appreciate the job they're doing** – especially if they've advocated a position that's important to you.

**Know your issue.** Request background material from ACHCA about the issue and the legislator you are contacting. Familiarize yourself with it so that you are comfortable speaking or writing about the topic.

**Be brief.** Stay on point. Keep to the facts. Stick to one issue per contact, and clearly explain how it affects the long-term care profession and why you're soliciting help.

**Be reasonable.** Don't ask the impossible.

**Be constructive.** A negative approach won't get you far. If you believe the bill you're contacting your legislator about offers a wrong solution, be prepared to suggest alternatives. Realize the potential need for compromise.

**If you support a bill, make that clear.** Ask for your legislators' support, too.

**It is very important that you get to know your legislators' staff.** Be polite, knowledgeable, and brief. The best way to endear yourself is to respect their time. Follow up if aides don't get back to you as promised, but give them a reasonable amount of time to follow through. Ask about schedules and work out a good time to contact the office again. Let them know you understand how

busy they are. Writing thank-you notes to staff members when they do produce results for you is a great way to win allies and maintain access.

## **An Office Visit Is Important**

The most effective way to communicate with your legislators is to meet with them or their staff personally. Short of going to Washington, D.C., the best way to meet with U.S. Congressmen is to visit their district office in your locality. A good time to visit is when Congress is in recess; chances are members will be able to spend more time with you then. See [www.congressmerge.com](http://www.congressmerge.com) for the Congressional schedule.

**Schedule the meeting.** Make your request in writing and follow up with a call to the Appointment Secretary/Scheduler. Suggest time and dates and let them know which issue and legislation you wish to discuss. Important: be sure they know you are a constituent.

**Prepare.** Call ACHCA for background materials. It will send you information to help you decide on talking points. It will also provide materials you can leave behind when your visit ends.

**Decide who will attend the meeting.** It could be difficult to manage more than four or five people. Keep your group small, but diverse in background. For example, include doctors, veterans, religious leaders, and school board members.

**Agree on talking points.** It will be hard to make a strong case for a position when group members disagree among themselves. Exclude in advance any divisive points from your meeting discussion.

**Plan your meeting.** Sometimes, people get nervous in meetings. Also, time is limited. Increase the odds of reducing nervousness and making the most of your time by pre-planning your group's participation, including who will speak first.

**Decide on your objective.** For example, what do you want your legislator to do? Vote for or against a bill? Introduce or co-sponsor legislation? The answer will indicate whether your visit is a success. However, while you and your group need to be clear, lawmakers may refrain from taking a definitive position on pending legislation. Immediately afterwards, everyone in your group should compare notes and review what your legislator committed

to do and what information you agreed to provide. Also, everyone should send a thank-you letter to the legislator. Be sure to provide the material or information you promise, too. If the legislator doesn't meet a deadline for action, ask for another to be set. Be persistent, yet flexible.

**Be prompt and patient.** Lawmakers keep very tight schedules. Be sure to show up on time and be patient. It is not uncommon for them to be late or interrupted by other business.

**Be brief and focused.** You will have 20 minutes at most with staff, as little as 10 minutes with your legislators. You will make the most of your time with them by focusing clearly on one topic.

**Stick to your talking points.** Stay on topic and reinforce your points by leaving behind easy-to-read material (five pages or less).

**Make a connection.** Mention any personal, professional, or political connections you have to the elected official. Introduce yourselves and thank your legislators for any supportive votes they have cast.

**Offer examples of the legislators' effectiveness.** Give personal/local examples of positive developments stemming from legislation supported by your legislators and thank them accordingly. This may be the most important thing you can do.

**Be honest.** You don't have to be expert in what you discuss. Never make up an answer. Giving wrong or inaccurate information can seriously damage your credibility. If you don't know an answer, it is acceptable to tell your legislators that you will get it. Meanwhile, you can still make strong arguments which support your advocacy. However, be sure you live up to your promise to provide further information. It will show you are credible, plus give you an opportunity to contact your legislators' offices again.

**Pass it on!** Be sure to pass along to ACHCA any important information you gleaned from your visits. It could be very useful to correlating national advocacy efforts.

## **Form An Advisory Committee**

Lawmakers have a responsibility to be as informed as possible about issues of concern to their constituency. Consequently, it is a good idea to form a group of colleagues who can offer them perspective and advice on long-term care. Not only would this group

serve as an important information source, but you would also be seen as a valuable—and influential—resource for having lead its formation.

An ideal advisory committee should consist of 10-15 members. That size will easily accommodate interaction should the group meet with legislators, plus it will allow for the airing of diverse views. For such a meeting, spread out committee representation for the sake of diversity—for example, include prominent health care leaders from universities, government, industry, professional societies, and citizen groups.

It is a good practice, too, to ask the official's health care legislative assistant to identify constituents whom the official or staff rely upon for advice. Be sure to include them in the meeting as well.

Provide the legislator's office with a final list of participants and contact information in case it wants to send them follow-up letters.

Strive to have the advisory committee hold small, informal, but regular meetings with lawmakers. Use such occasions to introduce them to the broad support for the profession of long-term care administration and to educate them about long-term care in general.

## **Meeting With Legislators On A Larger Scale**

Sometimes, it can pay advocacy dividends to have a larger scale meeting with legislators. If you decide that's something you want to try, here are some things to think about:

### **Organization**

The person in your group who is responsible for organizing the meeting must:

- schedule the meeting(date, time, location)
- handle logistics, including meal arrangements
- invite participants
- review goals/objectives with participants in advance
- provide introductory remarks at the meeting

- write and distribute post-meeting press releases or Letter To The Editor (as a courtesy, notify the legislator of these plans in advance)
- follow up with lawmakers

### **The Invitation**

Send an invitation letter asking the legislator to attend a meeting you are organizing for health care industry leaders in his/her district. Include a list of potential attendees.

### **Suggest Date/Time**

Indicate your interest in scheduling a date, time, and location that are most convenient for the official. One-two weeks after sending the invite, contact your guest's scheduler to resolve any scheduling issues and confirm.

### **Cost**

Consider structuring a meeting around a meal. All the better if the meeting organizer can sponsor the meal or identify someone who will. But it is not unreasonable for the organizer to charge "registrants" a fee to cover costs(meeting room rental, catering, etc.)

### **Brief Participants Beforehand**

The organizer should review the goal of forming an advisory group, which is to have experts who can advise elected officials in settings such as your upcoming meeting. Via conference call or in writing, he/she should also update participants in advance about the latest legislative action on issues related to the profession of long-term care administration.

### **Prepare Examples**

The organizer should ask participants to prepare examples of successful partnerships related to long-term care that have occurred or are taking place in the official's district. However, refrain from sales pitches for specific projects.

### **Setting The Meeting Format**

Keep the meeting relatively unstructured. This will keep the official free to experience the diverse opinion about long-term care issues and to ask and answer questions.

The organizer should open the meeting describing the importance of the long-term care field's investment locally(as in the legislative district) and at state and national levels. Thereafter, he/she

should solicit comments from participants and the legislator.

The legislator should not be expected to make a formal speech unless he/she is interested in doing so.

Near the end of the meeting, the organizer should guide the discussion to the legislator's needs. What type of information/advice about long-term care does he/she seek? The organizer should suggest a long-term care advisory group as a leading resource.

### **Media Coverage**

You need not involve the press unless the legislator specifically requests it. Press coverage could inhibit sharing advice and information. Do consider publicizing the meeting after the fact with a press release. However, first inform your legislator's office of these plans. Coordinate this with his/her press secretary, who may make available a list of district media outlets.

### **Post-Meeting Follow Up**

Send a thank-you letter. Explore the possibilities of more meetings with the legislator's staff. Ideally, the advisory committee and a legislator would meet in a larger scale setting semi-annually or quarterly. At a minimum, committee members should be available to the legislator and his/her staff as needed.

## **How To Plan An Open House**

An open house can be a great way to advocate. For example, you might consider holding an Advisory Committee meeting at your facility followed by an open house. In any case, an open house can give legislators, officials, community leaders, media and the public a chance to see for themselves what your facility is like and how it operates and also gain understanding of the realities of long-term care.

Here are some suggestions for planning one:

**—hold the event in conjunction with an observance related to long-term care—**for example, Long Term Care Administrators Week. This will give you a built-in reason for inviting people and a news peg for attracting media.

—**before you select a date, check your local community calendar to avoid conflicting with another event** that could divert interest and attendance from yours.

—**make the open house long enough to be convenient, but short enough so staff remain “fresh”** and make a good impression on attendees. Pick a time of day that you know works best for your facility.

—**circulate press notices two weeks in advance at a minimum.** Be sure to target print and on-line community calendars and the health and/or metro or community pages of larger publications. Keep the notice brief. Simply announce the open house, say why it is being held, and who is invited. Make sure the details(date, times, address, contact information) are correct.

—**give staff and residents reasonable advance notice.** On the staff side, you may want to identify one other person as a spokesperson for the facility. Be clear that only you and that person will act as spokespersons and staff should refer questions accordingly. Be sure that you and your other spokesperson are prepared beforehand to deliver the same basic message to avoid contradicting each other. Meanwhile, you may want to survey residents to identify those and their families who may be willing to discuss your facility. Don't try to put words in anyone's mouths—they probably won't be believed. Instead, pick people who you know to be reasonable and balanced, and trust that they will be good ambassadors for your facility.

—**have an adequate supply of information packets** about your facility for attendees.

—**be sure any programs you decide to hold are well planned and shared clearly with staff and residents in advance.** Keep your program simple to increase the odds of making the best impression possible and reduce the chances of glitches.

—**have staff/volunteers on hand whose sole job is taking pictures** or hire a photographer.

—**use the photos of the open house and any positive news articles it generates as materials for advocacy pieces.**

## **Joining Civic Organizations: A Good Idea**

Get involved with local civic organizations. Lawmakers and officials usually belong to one or more. Such settings could be opportunities for you to steer discussions towards long-term care. Chances are you will make a positive impression as a helpful authority on important issues whose expertise would be worth tapping during a legislative session.

No matter where or how you meet, however, send them thank-you notes afterwards. Use the opportunity to tell them more about the profession of long-term care administration and the issues of interest and concern to you. Offer to meet again, too.

## **How To Call Legislators**

If a bill of interest to you is coming up for a vote and you have a working relationship with a legislator, be sure to call him/her and discuss it. Keep in mind that you may not be able to talk with him/her personally. The schedules of elected officials in Washington are hectic. They spend most of their time in committee meetings or on the House or Senate floors.

To find your legislators' phone numbers, call the U.S. Capitol switchboard (202-224-3121). Ask the operator to connect you with your senators and representatives' offices.

You may want to consider calling the local district office instead, however. Besides being less expensive, it may attract more attention since district offices are not called as much their Washington, D.C. counterparts.

If you don't have a working relationship with a legislator or staff member, it is best to limit phone calls to those times when a bill is coming up for a vote and you want to urge the legislator to support your position. Most likely, you'll talk with a staff member when you call a Congressional office for the first time.

During that call, state that you are a constituent right away and then give your name. Ask for the aide who handles the issue that interests you. Briefly state the nature of your call (i.e. urging the legislator to support or oppose certain legislation):

*“Hello, I am a constituent of Representative Jones. My name is Jim Smith. I am calling to urge him to support HR 1234. Thank you.”*

These types of call are very important to legislators. The vast majority of Congressional offices track them.

## How To Write Legislators

Whenever you write any government official, put your full name and address at the top of your correspondence and **immediately identify yourself as a constituent**. These steps will let the official know that your opinions—and ultimately your vote—matter.

**Limit your comments to one page and one topic.** Officials hear from hundreds of constituents daily; a brief, sharply focused letter works best.

**In the first paragraph, identify your reason for writing and the legislative action you seek.** If the subject is a specific bill, cite its reference number and title if possible.

**For contact information for all U.S. Congressmen,** visit [www.congressmerge.com](http://www.congressmerge.com), or call the Capitol Hill switchboard(202-224-3121). Most states and many municipalities have corresponding websites with information about state and local officials.

**Use proper salutation:** *Dear Senator Smith; Dear Representative Jones.*

If you are sending correspondence that has been drafted for you, take a few moments to put it in your own words. **Avoid clichés and jargon.** Don't send something that reads like a form letter.

## MEDIA RELATIONS

### IT PAYS TO BE PROACTIVE

If you have a positive story to tell, you want to make sure that it gets media coverage. For that to happen, however, you have to be proactive. Media outlets will not come to you automatically. Normally, you have to work to be get noticed, unlike during crises when reporters can seem to appear quickly out of nowhere. You have to continually disseminate your name and the long-term care subject you want covered in order to increase the chances of getting attention.

It is very important to determine in advance the appropriate contact for your materials and the submission procedures. Increasingly, for example, publications are switching exclusively to emailed submissions of things like Letters to the Editor and Op Ed pieces. Be sure you check first. Simply call the main number, succinctly say who you are and what you want to send in, and then ask for the name of the recipient and the procedures involved. The operator may be able to help you, or you may get routed forward. This is simpler than it may sound and it is necessary. You can have the most compelling information imaginable, but it may end up discarded as soon as it's received simply because you didn't follow the correct procedures.

All of that said, dissemination tools include:

**Press Releases.** Write a press release and send it to all of the media in your area and your field. Check the publications you are interested in for their editors' names. If you are uncertain who they are, call and find out.

It is important that your release has a clear "news hook"—a development that immediately and concisely presents itself as the reason for the release. As a rule, the media tends to quickly understand and accept quantifiable developments— milestones like anniversary dates, goals that are met, financial markers, survey results, launches of new programs and/or services, and announcements of new senior staff appointments.

Generally, human interest stories are harder to capsule in a press release and promote. However, it's not impossible. A technique you can try is to first sell the "hard news"—for example news of a senior appointment. Once you have the attention of your local paper, if there is something particularly interesting

about the personal/professional backgrounds of the staff involved, you may want to suggest a feature rather than just a simple announcement. However, first be sure your staff is willing to be interviewed accordingly.

For Immediate Release  
September 13, 2001

Contact: Joe Cerquone 703-739-7951

ACHCA PRAISES RELEASE OF NEW LIST  
OF DANGEROUS DRUG INTERACTIONS IN LONG TERM CARE

**Medication Issues An Increasing Focus For Organization**

(Alexandria, VA) As part of a renewed effort to call attention to proper use of medications in the long-term care setting, the American College of Health Care Administrators (ACHCA) saluted the work of an ad hoc committee of the American Medical Directors Association (AMDA) that recently identified the top 10 drug-to-drug interactions that may potentially harm nursing home residents.

“ACHCA had been planning to give medication issues and resources about them more publicity this fall through its communication vehicles such as its membership magazine and its web site because those issues can involve life and death,” observed ACHCA President and CEO Mary Tellis-Nayak. “AMDA’s Multidisciplinary Medication Management Committee one such resource. It’s produced a ‘top ten’ list of particularly dangerous drugs that all long term care professionals need to know about.”

The AMDA list is the result of a survey of more than 100 physicians and pharmacists that was conducted in collaboration with the American Society of Consultant Pharmacists. Common drug-to-drug interactions were identified according to three criteria: clinical significance and potential to cause harm; frequency with which the interaction occurs; and, the frequency with which the drugs are prescribed in nursing homes. Using those criteria, this is the top ten list of particularly dangerous drug interactions in long-term care which emerged:

- Warfarin-NSAIDs
- Warfarin-Sulfa drugs
- Warfarin-Macrolides
- Warfarin-Phenytoin
- ACE inhibitors-Spironolactone
- Digoxin-Amiodarone
- Digoxin-Verapamil
- Theophylline-Quinolones

According to AMDA, adverse drug reactions are common among nursing home residents and frequently are unrecognized or misdiagnosed. Their occurrence hinges on several factors including the inherent pharmacological properties of the drugs, and the presence of other drugs. The severity and clinical significance of the interactions vary from mild and clinically insignificant to severe and life-threatening.

“It’s important that information like this gets out in the interest of protecting residents who are our number one priority,” Tellis-Nayak observed, referring to the top ten list. “ACHCA’s public information efforts will continue to focus on medication issues in the coming months,” she added. “For some of the most comprehensive information on the drug interaction issue, I encourage our members to visit AMDA’s website [www.amda.com](http://www.amda.com)”

Your press release should have your complete contact information at the top. Also, be sure it indicates the date when the release takes effect. If it’s right away, put FOR IMMEDIATE RELEASE prominently at the top. Try to keep your release to one double-spaced page (see example above). After you send it in, wait a couple of days, then follow up with a phone call.

When you call, say that you want to confirm that the release was received and ask if there are any questions. Because papers receive many releases daily, the editor may very well be unable to locate yours on the spot. Thus, you should have it handy so you can refer to it; you also need to be prepared to send it in again. However, use the call as an opportunity to ask where the release can be sent so that it will get the editor's attention. In any case, always have the release accessible so that you can quickly refer to it should a reporter call you out of the blue.

**Letters to the Editor.** Usually, these are responses to news coverage. They are very short—250-300 words at most. However, this is a good way to “speak up,” being supportive of coverage you think has been good, suggesting another view when you believe it could have been better.

Usually, publications will not withhold publishing letters for long. Be sure yours is addressed to the Editorial Page Editor; references the coverage prompting your letter; has your complete contact information; and, it is dated and signed. Typically, publications call to verify the sender before they publish a letter. Not all letters are published, but mostly all are edited, commonly to meet space limitations. Keep in mind that good editing never changes meaning. As a courtesy, the most professional publications will run edited letters by their senders before they publish them and be willing to work on edits the senders consider egregious misrepresentations. That doesn't always happen, though, and if you feel that what is published is untrue to your original letter, inform the publication accordingly.

**Op Ed pieces.** The name of this form derives from the fact it customarily appears opposite the editorial page. Typically, op eds are 500-750 words. They can be about just about anything, though the reason for writing them has to be clear to the reader. They are submitted(double-spaced) to publications with a very brief cover letter that summarizes what the piece is about and why readers would be interested in reading it(the latter is critical). Do not bother to title your op ed. Usually, publications will do that for you. Be sure not only your contact information and the date, but also your professional title appear at the top of every page(in case they get separated on an editor's desk). The latter will indicate why you are qualified to write the op ed.

Here is an example of an ACHCA op ed that appeared in *McKnight's Long Term Care News*:

September 19, 2001

by Mary Tellis-Nayak  
Phone: 703-739-7900

Given that most nursing home residents receive Medicaid, a recent independent analysis by the accounting firm of BDO Seidman puts in black and white what nursing home administrators have known all along as they've struggled to meet ever increasing demands with ever fewer resources—namely, that states are under funding nursing home care by at least \$3.3 billion annually.

For a sampling of what this means in certain parts of the country, consider New Jersey, which Seidman listed as the leader among states that suffer the highest cost/reimbursement disparities. Indeed, researchers put the per day per patient shortfall in the Garden State at \$21.11. If that doesn't sound like a lot, what about this: the figure converts into an annual shortfall of \$236.2 million.

Such a massive failure to deliver resources for quality nursing home care has a far-reaching impact. "It affects staff as profoundly as it does residents," according to Kathleen Bogajewski, President of the New Jersey chapter of the American College of Health Care Administrators. "Administrators who set excellence as their standard are ever preoccupied with trying to deliver the highest quality care in the most cost effective manner. It's a no-win predicament that distracts attention from residents, who should be the primary focus."

Ms. Bogajewski is so right. The Medicaid shortfall negatively affects virtually everything nursing home administrators try to do for those under their care—vulnerable people who deserve the best of society instead of the short end of its budgetary stick. Among other things, it frustrates administrators' ability to hire and retain well-trained staff for the simple reason that they can't pay enough. It also keeps them from offering the latest clinical advances because they lack the means to pay for them, too. And it reduces their ability to make their facilities warm and inviting places. In a tough, all-consuming fight for economic survival, one can't worry about "frills".

We now live in a very tragic era that demands much of our nation in a number of arenas. At the same time, the Medicaid under funding issue needs to be tackled simply because it puts our elderly and frail loved ones at risk. Yet, in case that isn't sufficient motivation, I would ask our leaders to contemplate what could unfold if they do nothing.

The U.S. population is aging fast—the massive Baby Boom Generation's retirement years are now in sight. Meanwhile, it is projected that our country will be short hundreds of thousands of frontline workers in the field of nursing home care unless crises like Medicaid under funding are resolved. So discouraged about the prospects of delivering quality care, nursing home administrators are leaving their profession in droves. Recently, the National Association of Long Term Care Administrators reported a decline in licensure candidates of more than 37% from 1997-2000.

A lot more older people left to a lot fewer caregivers. That's a very unfortunate situation no one wants to see. Finally, we have something like the Seidman report to wave as a warning flag. But it remains to be seen whether our leaders will do the right thing and take heed.

*Mary Tellis-Nayak is President and CEO of the American College of Health Care Administrators, Alexandria, Virginia.*

The op ed is a good form for examining policy or political questions. In general, it is better to look ahead instead of back: "The General Assembly is scheduled to debate X next month, a development that will likely have significant impact on long-term care in our state . . ." An effective method to follow is to decide the main point you want to make; make it right away, then devote the rest of your piece to backing it up with facts. In doing so, it is effective to anticipate and mention opposing views and rebut them. Larger publications have an Op Ed Editor who is different from the Editorial Page Editor. That person should receive your piece. Yet, some major newspapers have special Sunday opinion sections which could have their own editors, too. Find out if that's

the case. Sunday papers tend to be the most widely circulated editions, so it is a good idea to try to have your piece appear in them.

Like Letters to the Editor, op eds are subject to editing. Unlike them, they may be held for weeks before appearing. Call weekly for a status report if you know that your piece has not been rejected but hasn't been published either. At the least, your calls will be reminders of strong interest in having your op ed run.

You can make simultaneous multiple submissions of your op ed, though you should not target a publication that opposes the practice. If you do make multiple submissions, submit to non-competing publications and/or revise slightly so that you are not sending the exact same piece to more than one.

### **Use Your Successes To Achieve More Successes**

Should your efforts prove fruitful—your press release prompts coverage, your Letter to the Editor or your op ed are published—send copies to key legislators and officials. Attach a brief cover letter saying that you thought they would be interested in the mailing. This will not only serve to inform them about the issues, but it will also help establish you in their eyes as a long-term care expert.

## **Cultivation Helps**

Cultivation is the critical but hidden side of successful media relations. There is no magic to it. You simply need to be organized, thorough, clear, timely, persistent, and willing and able to understand the needs of media and meet them.

### ***Organized***

Create a mailing list of your local health beat reporters and update it regularly to account for changes, which occur frequently. You don't need to have news to call them up. You can visit with the stated purpose of hearing from them which kinds of stories interest them or how they like to receive information. This thoughtful gesture should tell them that you probably are someone they should think about using as a source. As part of the visit, leave behind general information about you (with comprehensive contact information) and your facility. This will set the stage for greater receptivity, interest, and, perhaps, empathy when you try to generate coverage in something specific or if news about the

nursing home field breaks and your local media seeks expert comment.

### *Thorough*

Pay attention to what your local media covers and how they cover it. Follow what news they highlight and what they editorialize about to get a good idea what they consider important. If they run a dry statistical account of an issue, perhaps you could suggest a human interest angle as a follow up story. Watch for the coverage they announce or preview—it may give you ideas for spin off stories to suggest, as well as opportunities to write a Letter to the Editor or an Op Ed. Make sure that any material you disseminate to the press is error-free (common mistakes: typos, incorrect spellings, wrong names) and has complete contact information. Also, make sure that everything is accurate. If you are the least bit unsure of something, leave it out or don't mention it until you can confirm its accuracy. One inaccuracy can create distrust that can hamper your media relations.

### *Clear*

First and foremost, two basic points you yourself should be clear about are: what is your news/story about? And perhaps more importantly: why should your local media be interested in it? If you can't readily and succinctly answer both questions, chances are you will have difficulty prompting coverage.

### *Timely*

Using a simple calendar, you can fairly easily predict the more opportune times for attempting to get the media interested in long-term care stories. They include the end of year holidays, the onset of legislative or budget-setting sessions, public observances devoted to aging or some relevant aspect of health care delivery (Long Term Care Administrators Week, third week of March annually), and assumption of office by senior officials. Be proactive and contact the media about your story ideas at least a month in advance. In journalism, time as well as timing is paramount. Reporters live and die by deadlines. Return their calls promptly. Quickly provide whatever information they need. Because such steps will make life easier for them, they'll be inclined to remember you as a helpful resource worth re-contacting.

### *Persistent*

For fair and regular coverage, you have to be dogged. If you consistently pitch stories, sooner or later, you will throw a strike. You can increase the odds of succeeding by approaching as wide and diverse a universe of potential media outlets as possible. Bear in mind that, in the interest of making an effort for fresh perspective, editors sometimes direct their reporters to change sources or reporters take it upon themselves to do so. This is another reason to diversify. Anyway, one way to keep going until you succeed is to remind yourself that how you're doing today is hardly a predictor of how you'll do tomorrow. In general, the media is open to ideas case by case. Think through in advance your reasons for suggesting a story. Don't be shy about promoting it, though don't carry on to the point where you turn people off. You want to be greeted with interest when you go back to them with another idea.

### *Be willing and able to meet the needs of media*

If your local paper wants a five-hundred word op ed piece, give them 500 words. If you know that the media in your community favor certain emphases to stories, frame your ideas using those emphases. If they want contact information with cell phone numbers, have the numbers appear. If they need to talk to sources or have information by certain deadlines, meet those deadlines. Steps like these will not only increase your odds of succeeding, but they will also boost your standing as a source.

## From ACHCA: Examples of Best Advocacy Practices

**How can you gain strength in numbers? One way is through a well worded appeal to allied groups to gather and work together.**

In 2001, the ACHCA New York Chapter undertook a major advocacy initiative by inviting the executives of various health care associations and state agencies to a summit to discuss solutions to pressing long-term care issues. The invitation letter from the Chapter, which is below, frames the intent of the initiative clearly and covers some of the steps that were planned—steps you may want to undertake in your area.

*On behalf of the Executive Committee of the New York Chapter of the American College of Health Care Administrators, an organization that represents over 600 healthcare professionals across New York State, I would like to invite you to participate in a focus group summit meeting with your colleagues on September 24, 2001 in Albany, NY.*

*As you are keenly aware, the healthcare industry has been, and continues to be, under siege from the federal and state governments, the media at large, politicians, and senior citizen advocacy groups. It has created a very negative climate for healthcare professionals to work under.*

*The intent of the summit meeting would be the following:*

- *Identify the critical issues that are faced by our respective members*
- *Identify common goals*
- *Develop an agenda as a unified group to influence politics, regulation, and industry direction*
- *Focus on the leadership requirements for both internal and external change*
- *Identify a vital few set of efforts and issues and formulate a plan that can be used to consistently influence internal and external change*

*These potential outcomes will be accomplished through the use of a professional facilitator from a consulting group that specializes in organizational dynamics. Other healthcare industry experts and association executives that have been invited to participate are as follows:*

*Executive Director, NY State Health Facilities Assn.*

*President, NY State Health Facilities Assn.*

*Executive Director, NY Assn. of Homes and Services for the Aging*

*President, Healthcare Assn. of NY State*

*President, Greater NY Hospital Assn.*

*Vice President, Greater NY Hospital Assn.*

*Executive Director, Greater NY Healthcare Facilities Assn.*

*Executive Director, Southern NY Health Facilities Assn.*

*President, NY Organization of Nurse Executives*

*Executive Director, Empire State Assn. of Adult Homes and Facilities*

*President, Homecare Assn. of NY State*

*President, NY State Assn. of Healthcare Providers*

*Developing common goals, and strategies to accomplish these goals, will enable each of us to better serve our respective memberships on a unified, proactive basis. The time is now to show those in government, the media, etc., that we have the expertise and desire to work on a collaborative basis to effectively determine the problems presently plaguing the healthcare industry, and most importantly, develop solutions to ensure that our healthcare system will be prepared to handle our aging population.*

*We hope you can join us at this extremely important event. Your healthcare expertise and insight will certainly ensure a successful meeting and hopefully pave a road to a more secure, stable future in healthcare.*

***For further information about the New York summit, contact ACHCA New York Chapter: [www.achca.com](http://www.achca.com) click on "Chapters" click on "New York" click on "contact us."***

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## **There Is A Way To Get Your Message Out To Your Community By Working First With Other Local Health Care Providers**

The ACHCA Michigan Chapter joined with other health care organizations (Michigan Hospital Association, Michigan Association of Homes and Services for the Aging) to produce materials that advocated for the profession of long-term care administration. The materials were distributed in local communities as well as to state officials, the media, and the greater world

of health care associations.

The goals were:

- transform public perception of long-term care
- make recruiting and retaining workers easier
- have more favorable media relationships
- align regulations with the priorities of the profession of long-term care administration
- gain stable occupancy at long-term care facilities

*For more information, contact Susan Ritzert, Immediate Past President, ACHCA Michigan Chapter: [sritzert@ili.net](mailto:sritzert@ili.net).*

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## **How To Speak Up To Legislators**

This statement by Dan Shields, formerly of the ACHCA Kentucky Chapter, called upon Kentucky state legislators to provide improved long-term care reimbursement and regulation policies and practices. In content, format, and tone it is a good example of how to speak up, stating your position to legislators.

*My name is Dan Shields. I currently work for the Christian Church Homes of Kentucky as a certified nursing home administrator. I am also the president of the Kentucky Chapter of the American College of Health Care Administrators.*

*I appreciate the opportunity to share some concerns facing the profession of long-term care administrators. The nursing home administrator is a dying breed. If the current trend continues, our nation will be faced with a grand dilemma of who is going to be the care-takers of the care-givers. Nationwide, the overall interest in the profession of nursing home administration is decreasing. Nationally, the number of individuals sitting for the nursing home administrator exam has dropped from a high of 77 people in 1997, to only 43 people in 2000. That is a 44% reduction.*

*We believe administrators are leaving the field due to frustration and the inability to provide quality care, which stems from the inadequate reimbursement system. Decreased funding inhibits administrators from hiring and retaining quality staff. In addition, we should not overlook the impact that the regulatory and litigious environment has in driving good people out of long-term healthcare.*

*If the proposed Medicare cuts of 17% kick in this fall, we expect to see more administrators fleeing long-term health care. If this happens, the issue of inadequate administrator resources is exacerbated beyond imagination. Recruiting people into the profession of nursing home administrator is not a simple task. The individual must not only have a sincere love for the elderly, but must also be willing to oversee a facility in the highest regulated industry in America. As you may know, hospital administrators do not have to be licensed to operate hospitals; however, nursing home administrators are required to be licensed by successfully passing a written federal exam and, in many states, a state exam. In Kentucky, a person must have a four-year degree and six months of experience in long-term health care before they can sit for the nursing home administrator's exam. Thus, fixing the inadequate supply of nursing home administrators is not an overnight process. If these cuts are enacted, long-term health care may experience another severe blow that will blacken the eye of America as it attempts to care for the frail and elderly citizens of the United States.*

*Please join me and other administrators as we oppose these drastic cuts. Help us save long-term health care. Thank you.*

***For more information, contact Dan Shields, [dshields@carltoncove.com](mailto:dshields@carltoncove.com).***

## Resources

Capitol Hill basics [c-span.org](http://c-span.org)

Communicating with Congress [info@congressmerge.com](mailto:info@congressmerge.com)  
[www.congressmerge.com](http://www.congressmerge.com)

Congressional schedule [www.house.gov](http://www.house.gov) under Majority Whip link; [www.senate.gov](http://www.senate.gov) under legislative activities link—will give you a good idea when your legislators will be in Washington, D.C. and when they'll be in your district

Don't know your Representative? Your Senators?  
[www.house.gov](http://www.house.gov); [www.senate.gov](http://www.senate.gov)

For help with advocacy, media relations—ACHCA [info@achca.org](mailto:info@achca.org) (703-739-7900) [www.achca.org](http://www.achca.org) ACHCA's web site tracks developments in long-term care. It also has an up-to-date contact list of ACHCA chapter presidents you can use to share advocacy information and techniques with colleagues.

Good overall reference on Congress and its structure: *Almanac of American Politics*

Ideas for dates for news pegs, events: check out *Chase's Calendar of Events*, an annual guide to the official observances scheduled for the year

Looking for recently introduced bills on long-term care?  
[www.congress.gov](http://www.congress.gov) (search by key word or topic)

More media relations tips—"The New Quality Measures and Public Relations" by ACHCA Vice President Joseph Cerquone. In *Nursing Facilities Quality Measures: Strategies for Successful Performance*. Published by [www.med-pass.com](http://www.med-pass.com) and [www.ascp.com](http://www.ascp.com) Contact: MED-Pass 800-438-8884

Planning on visiting Capitol Hill and need orientation? [www.senate.gov](http://www.senate.gov) click "visitors"

Want to find the local office addresses of your Congressmen?  
Check the government pages of your local phone book.

To check voting records: [www.vote-smart.org](http://www.vote-smart.org)



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