



LEGISLATIVE AGENDA FOR 2008-2009

The Nurses Organization of Veterans Affairs (NOVA) is the professional organization of the approximately 39,000 registered nurses employed by the Department of Veterans Affairs (VA). NOVA has identified several areas of concern. Some require legislation and others need to be supported and implemented by the VA. Some of these initiatives are in place but are not funded.

Budget. The primary goal of VA nurses is to have adequate resources to provide high quality patient care and ensure the VA continues to be a leader in health care. In order to accomplish this goal, NOVA supports the following:

- *Mandatory Funding.* This will ensure the VA has an adequate budget to operate efficiently throughout the year. A continuing resolution every year has a negative impact on care, and it is believed mandatory funding would alleviate this problem.
- *Equity Pay for Nurse Executives at the Nurse V Level.* In order to provide equity to nurse five executives, the pay cap needs to be removed so these members of the healthcare team have parity with their GS 15 equivalents. This issue is also a critical retention issue.
- *Consistent Implementation of the Locality Pay Law.* This law needs to be implemented consistently and fairly throughout the entire VA.
- *Adequate Funding.* There needs to be adequate funds to support OIF/OEF veterans and staff members returning from the war in Iraq and Afghanistan.

Recruitment and Retention. In order for the VA to become the employer of choice for healthcare professionals across the Nation, human resource departments as well as recruitment and retention programs must be modernized. In order to accomplish this, NOVA supports the following:

- *Human Resource Departments Must Receive Adequate Training and Support.* There is currently a lack of sufficient knowledge and support among Human Resources personnel nationally.
- *Hybrid Title 38 Status for Nursing Assistants.* Direct hire authority for nursing assistants is necessary to decrease the length of time to hire into vacant positions.

VA facilities throughout the country are losing highly qualified nursing assistants because of these lengthy delays.

- *Health Care for Part-Time Employees.* There is a disparity in the cost of health care for part-time employees which need to be rectified. Currently, the system results in a significant financial penalty for individuals working three to four days a week. Their cost of the health care benefit exceeds that of nurses working one to two days weekly. This inequity impacts the retention of part-time nurses which the VA desperately needs during the current nursing shortage.
- *Nurse Travel Corps.* Current legislation governing employees' travel pay needs to be revised. This revision will allow for the full implementation of the VA Nurse Travel Corps.
- *Scholarship Programs.* The VA does not currently have a scholarship program for non VA employees, i.e., students in nursing programs who could apply for a VA scholarship and then be obligated to employment in the VA after graduation. The lack of a scholarship program is negatively impacting the recruitment of students, and thus, new employees which also impacts workforce succession planning and ultimately care to veterans.
- *VA Health Professionals Educational Assistance Program (38 U.S.C. 7601-7636).* This program is an authority that expired on December 31, 1998. This statute is still on the books and would not require legislation. It could be expanded to include other hard to recruit health care personnel such as pharmacists and physical therapists.
- *Programs to Help Decrease Delays in Hiring Licensed Staff.* There are currently four to six month hiring delays of licensed staff in some areas which has a negative impact on recruitment. Mechanisms need to be implemented to avoid these unwieldy delays.
- *VA Nurse Academy.* The Academy should be funded on an ongoing basis which would increase recruitment of nursing personnel within the VA.
- *36/40 Work Schedule.* This legislation needs to be revised. Many facilities implemented the 36/40 alternate work schedule by having nurses work three 12 hour tours of duty with one tour overlapping from Saturday night into Sunday morning. Based upon the handbook and payroll patch, tours cannot overlap on Saturday to Sunday. This policy limits the intended purpose of the law and the ability to meet veterans' health care needs. In addition, staff is compensated for holidays based on part-time instead of full-time status.

Information Technology. NOVA supports the improvement in the support of information technology to the field in order to allow for increased patient safety, software usability and data standardization for integrated patient health care records across the system. NOVA supports the following:

- *Evidence-Based Practice.* This helps ensure patients have the best possible outcomes and that resources are allocated appropriately. A program team developed the VA Nursing Outcomes Database (VANOD) which supports evidence-based practice and should be adequately funded.
- *Computerized Patient Records.* Current documentation requirements needed to meet VA standards and ensure appropriate care to veterans are cumbersome and

labor intensive which keeps nurses away from patient care. Unnecessary time is spent in order to complete documentation. VANOD has identified improvements to these issues; however, the nursing software improvements necessary for VANOD have not occurred in a timely manner.

- *Decentralized System.* The current centralized system has created a lack of responsiveness to critical patient needs. A decentralized system allows for a local rapid response to meet critical patient care needs and supports the work of nurses and other clinicians in providing the best quality care to veterans.

Magnet Status. NOVA supports all efforts to provide the magnet environment for patient care. In order to accomplish this, NOVA supports the following:

Quality of Nursing Leadership

Organizational Structure

Management Style

Personnel Policies and Programs

Professional Models of Care

Quality of Care

Quality Improvement

Consultation and Resources

Autonomy

Community and the Healthcare Organization

Nurses as Teachers

Image of Nursing

Interdisciplinary Relationships

Professional Development