

November 12, 2020

President-elect Joseph Biden
Vice President-elect Kamala Harris
1401 Constitution Ave., NW
Washington, DC 20230

Dear President-elect Biden and Vice President-elect Harris,

On behalf of the American Nurses Association (ANA), I would like to offer you our most sincere congratulations on winning the 2020 election. As the first Black American male president of ANA, I am personally touched to see another ethnically diverse ticket and the first female who will become Vice President of the United States. It is truly a historic victory.

Nursing represents the largest health care profession with over 4.2 million registered nurses (RNs) and advanced practice registered nurses (APRNs) in the United States and ANA is proud to represent the interests of all nurses. We would welcome the opportunity for an open line of communication with you and your domestic advisors as your Administration embarks on addressing America's health care challenges.

In addition to our COVID-19 work outlined below, ANA has been a proud supporter of the Affordable Care Act, as well as many other health care issues of importance to your Administration. ANA stands ready to work with the Biden Administration to tackle the health care issues facing our nation, including the COVID-19 pandemic, addressing social determinants of health, racial disparities, as well as rebuilding our nation's public health infrastructure.

COVID-19 and Personal Protective Equipment

It is imperative for the Biden Administration to develop a national strategy for the deployment of Personal Protective Equipment (PPE) and develop a sustainable supply chain system. Additionally, Executive Orders and Emergency Guidance that put health care providers in danger of contacting COVID need to be reviewed and rescinded as the supply chain of PPE improves.

While COVID-19 has created challenging times for all frontline providers, we salute our nurses during what has become an extraordinary year. At the beginning of this pandemic, the United States saw nurses and other frontline health care professionals confronting a shortage of PPE by making their own masks or using trash bags for make-shift gowns. Because of the unsafe working conditions, some made the difficult choice to leave their jobs to protect their families and themselves. Others developed emotional and psychological issues, suffered severe physical ailments from contracting the coronavirus and tragically more than 1,000 nurses have died providing care worldwide¹. This is unacceptable.

Despite hopes that strong mitigation and containment actions in our communities would reduce the severity of the coronavirus outbreak, the nation is currently seeing a third wave in COVID-19

¹ https://www.icn.ch/system/files/documents/2020-09/Analysis_COVID-19%20survey%20feedback_14.09.2020.pdf

cases. Presently, PPE is not being provided in the quantity or quality that is required for nurses to safely care for patients. While health care facilities are reporting adequate supplies of PPE, our nurses are reporting that is because of using emergency standards to have them reuse and decontaminate PPE. The decontamination processes are being approved by Emergency Use Authorizations and have not been backed up by data to determine safety or how many times they can be decontaminated before PPE integrity is diminished.

To closely and consistently monitor nurses' access to PPE, ANA has deployed several PPE-specific surveys, including three that were conducted between March and August of this year, as well as one that is currently in the field. The findings of these surveys are outlined below, but the topline takeaway is that there has been little to no change in our members' access to sufficient quantities of safe and effective PPE since the beginning of the pandemic in the United States.

ANA's August survey on access to PPE received 21,000 responses. Forty-two percent of respondents reported PPE shortages in their facility, and 88% said they are required, or encouraged, to reuse single-use PPE, such as N95 masks. Sixty-two percent of these respondents said they feel unsafe using decontaminated respirators. ANA does not support the use of decontamination methods as a standard practice; however, we have acknowledged this is a crisis capacity strategy. The Association recommends that Congress engage with the U.S. Food and Drug Administration regarding the need to expeditiously research the effectiveness of various decontamination methods for the reuse of PPE by nurses and other health care professionals. We also urge additional oversight to ensure a return to best practices as soon as possible.

Health Care Disparities

We urge the Biden Administration to review current policies and regulations to ensure that these policies provide access to quality care and work to address health care disparities in future rulemaking.

Black Americans, as a group, are burdened by a number of disparities affecting their health and survival. Alongside the COVID-19 pandemic, we have the crisis of maternal mortality. Alarming, Black women are 3-4 times more likely than white women to die in childbirth or of pregnancy-related causes². According to the Centers for Disease Control and Prevention, Black people are more likely to report not being able to see a doctor in the past year because of cost, and are also more likely to report fair to poor health status than whites³. Mental health disparities are documented and equally troublesome⁴.

ANA believes there are multiple policy levers to eliminate or reduce health disparities for all people. Our Principles for Health System Transformation⁵ calls for expanded access to care through universal access to coverage and other steps to improve the quality and affordability of health care. We also believe policymakers must consider and account for an adequate health care workforce of the future. The nursing workforce can play a tremendous role in efforts to create a more equitable health care system. Nurses provide the type of care and coordination that can help people manage their chronic conditions, including links to community resources they need to be healthy. RNs and APRNs are often the backbone

² <https://www.cdc.gov/reproductivehealth/maternalinfanthealth/pregnancy-relatedmortality.htm>

³ <https://www.cdc.gov/vitalsigns/aahealth/index.html>

⁴ <https://www.samhsa.gov/homelessness-programs-resources/hpr-resources/study-reveals-mental-health-disparities>

⁵ <https://www.nursingworld.org/practice-policy/health-policy/health-system-reform/>

of health care delivery in rural and underserved areas, providing access to primary care, maternity care, and prevention. These roles should be strengthened through meaningful reforms.

Expanding the minority health care workforce would be one of the most meaningful steps we could take to improve access and health care in ethnic population groups. We know that positive patient experience and trust in health care providers can be powerful drivers of health outcomes. In my experience, people of color may be more likely to engage and seek care from a provider of color. The National Sample Survey of Registered Nurses⁶ recently reported an increase in the minority nursing workforce between 2008 and 2018. This is encouraging, but there is a long way to go. ANA recommends increased funding in minority nursing education, to develop a workforce that is more reflective of the patient population. That would include a focus on certified nurse midwives, so we can change the outcomes on maternal health.

Strategic National Stockpile/White Paper Brief

While ANA understands the PPE crisis is the result of multiple factors, including shortages of raw materials, a global need for equipment, and growing PPE needs as the country and schools reopen, we believe that more must be done by both the federal and state governments to better deploy this protective equipment. While states certainly have a role in ensuring access to care, more needs to be done to enhance the federal/state partnership to ensure transparency and equitable access to safe and quality protective equipment for health care providers.

To achieve this goal, ANA submitted detailed recommendations to Chairman Lamar Alexander and the Health, Education, Labor, and Pensions (HELP) Committee in response to the Chairman's white paper request, which is summarized below⁷.

- To make sure health care providers are never again left with a PPE shortage, Congress should request an annual report on the state of the Strategic National Stockpile (SNS) with respect to PPE, vaccines, medicines, and other supplies. The report must include when items are expiring and what items need to be replaced. When items are approaching expiration, they should be donated to underserved medical facilities such as federally qualified health centers, rural hospitals, and clinics based on need.
- Health care facilities should be required to report monthly on their levels of these items so the agency in charge has up to date information on where shortages may be most acute in the early stages of an emergency. A formulary should be developed by National Academy of Sciences, Engineering, and Medicine on what levels of PPE, vaccines, and other supplies health care facilities should have in their own stockpiles. Manufacturers of these items should also be reporting on production and capabilities.
- The federal government must take appropriate steps to plan coordination efforts. Many states will not have the resources or expertise to carry out preparations or coordination without federal assistance. Hospitals and facilities with more capital will most likely benefit while rural

⁶ <https://bhw.hrsa.gov/health-workforce-analysis/data/national-sample-survey-registered-nurses>

⁷ <https://www.nursingworld.org/practice-policy/work-environment/health-safety/disaster-preparedness/coronavirus/june-3-2020-prac-grant/june-26-ana-letter-to-chairman-alexander/>

and underserved areas will suffer. There have been instances of states and health care systems in competition with one another to procure PPE and essential supplies. The federal government needs to help states prepare by taking steps to ensure they are not pitted against each other when it comes to resources.

- The federal government needs to do more to incentivize and prioritize the manufacturing of PPE, medications, and other supplies in the United States, even if that means carrying out production itself. We cannot allow our citizens to be put at a health risk because businesses view manufacturing elsewhere better for their bottom line. More production in the United States will also help the U.S. economic recovery.

Since the beginning of this pandemic, ANA has called on federal officials to increase the supply of PPE. ANA will continue to do so because nurses, other health care professionals, and essential workers must have the proper equipment to protect themselves and take care of our communities. We have specifically urged the Trump Administration to use the Defense Production Act more aggressively to increase the domestic production of medical supplies and equipment desperately needed by front line health care personnel. With the rise in cases in this third wave, the Administration and Congress must continue to increase and incentivize the domestic production of medical supplies and equipment that meets medical, safety, and quality criteria desperately needed by front line health care personnel.

Vaccinations

The American Nurses Association (ANA) supports the development of safe, effective COVID-19 vaccines along with equitable distribution of vaccines to stem the spread and impact of COVID-19 and other illnesses across the nation.

Eight months into the COVID-19 pandemic, the race for a vaccine is underway and moving at an unprecedented pace. Vaccines are critical to the control and prevention of infectious disease transmission. Given its role as the voice of the nation's nurses, ANA has established key principles to guide nurses and other health care professionals' consideration for COVID-19 vaccines⁸. The nation's nursing workforce will play a critical role in education of the public and the administration of safe and effective COVID-19 vaccines.

When safe and effective COVID-19 vaccines are made available, ANA strongly recommends that nurses are prioritized to be vaccinated according to current recommendations for immunization of health care professionals by the CDC's Advisory Committee on Immunization Practices (ACIP)⁹. This will be necessary to build public trust in the vaccines developed for COVID-19.

As frontline providers and patient educators, the public regards nurses as stewards for ethical, credible, and evidence-based information about the status of COVID-19 vaccines, and the importance of immunization. ANA urges Congress and the Biden Administration to be transparent in its COVID-19 vaccine distribution plan and to consider recommendations from frontline workers on how to allocate

⁸ <https://www.nursingworld.org/practice-policy/work-environment/health-safety/disaster-preparedness/coronavirus/what-you-need-to-know/covid-19-vaccines/>

⁹ <https://www.cdc.gov/vaccines/adults/rec-vac/hcw.html>

successfully¹⁰. The federal government must provide state and local public health agencies and jurisdictions sufficient resources and funding to support mass distribution and administration when a COVID-19 vaccine is approved and available.

All nurses and health care professionals must receive consistent information and ongoing education from their employers, credible public health agencies, the Food and Drug Administration (FDA) and other trusted sources about COVID-19 vaccine trials and approval processes. This is non-negotiable and imperative for nurses to help educate the public. Nurses in all practices and settings have a long history of being involved in widespread education on the importance of vaccine administration. When nurses are informed, they can then share reliable information with their patients, dispute widespread misinformation, and influence opinions about COVID-19 vaccines among the public. For these reasons, ANA maintains that nurses must be involved now, early in the process.

Public awareness and education are essential when any new vaccine is introduced. With a growing “anti-vaxx” movement and the complex factors in the current environment the need for clear, credible information from trusted sources is more important than ever. Nurses are key in disputing misinformation and combating negative associations and skepticism among the public about COVID-19 vaccines and immunization.

General Health Policy Interests

As the largest professional nursing association, ANA's membership includes nurses who practice in every subspecialty within the profession for both RNs and APRNs. In addition, they also work as hospital administrators, in academia, as scientists, and as healthcare industry business leaders. This diversity provides for a long list of health policy interests for ANA, including:

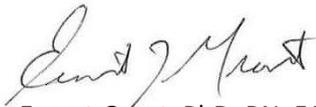
- Protecting and expanding the Affordable Care Act
- Improving nurse staffing levels in facilities and unsafe mandatory overtime practices
- Properly funding America's public health infrastructure and workforce
- Properly funding nursing education
- Addressing workplace violence in health care and social service settings
- Maternal Mortality
- Expansion of Telehealth services and payment parity
- Mental health and substance use disorders
- Scope of practice
- Addressing health care disparities amongst all communities

¹⁰ <https://www.nursingworld.org/practice-policy/work-environment/health-safety/disaster-preparedness/coronavirus/what-you-need-to-know/legislative-and-regulatory-advocacy/august-19-2020-letter-to-operation-warp-speed/>

- Workforce supply and demand focused on economic, demographic, and geographic trends
- Continue increasing ethnic, racial, and socioeconomic diversity within the workforce
- Population health
- Infection prevention
- Veterans' health care
- Home Health, Hospice, and Long-term Care
- Provider parity and nondiscrimination by health plans
- Current and future public health challenges
- Removing unnecessary barriers to increase access to care

Congratulations on winning this hard-fought and groundbreaking election. ANA looks forward to working with you and your Administration to improve our nation's health care system. If you have any questions or need a resource, please contact Sam Hewitt, ANA's senior associate director for Policy and Government Affairs at (352) 219-6584 or samuel.hewitt@ana.org.

Sincerely,



Ernest Grant, PhD, RN, FAAN
President

cc: Debbie Hatmaker, PhD, RN, FAAN, Acting CEO and Chief Nursing Officer

ANA is the premier organization representing the interests of the nation's 4.2 million registered nurses, through its state and constituent member associations, organizational affiliates, and individual members. ANA members also include the four advanced practice registered nurse roles (APRNs); Nurse practitioners (NPs), clinical nurse specialists (CNSs), certified nurse-midwives (CNMs) and certified registered nurse anesthetists (CRNAs). ANA is dedicated to partnering with health care consumers to improve practices, policies, delivery models, outcomes, and access across the health care continuum.