

2018

EfCCNa European Political Engagement Toolkit



European federation of
Critical Care Nursing
associations –
EfCCNa



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Introduction

Welcome to the 2018 version of the EfCCNa European Engagement Toolkit. This practical resource aims to provide European critical care nurses with the information and resources to better understand and interact with European political matters, especially those that have a direct impact on critical care delivery.

Within the toolkit, the reader will be orientated to current European political structures and processes. The appendix contains checklists (first steps, communication check-list) and examples of letter templates. These will support you in your communication with your elected political representatives, and support you in effectively presenting your concerns.

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The European Union Today

Today the European Union (EU) has 28 member countries and a number of other countries who are seeking to join, such as Serbia, Albania, Iceland and Turkey. Before joining the EU, each nation must ensure its laws are consistent with EU treaties and incorporate new legislation agreed by the EU through those countries parliamentary and legal processes. It is estimated that about half of the legislation adopted nationally today originates at EU level.

The EU can only act in areas where the European Union treaties have given it authority to do so. Often what it can do in each of these areas is clearly defined. A formal remit in health policy was only introduced in 1993 and is largely restricted to public health measures and health promotion, although this has since been expanded to ensure a high level of health promotion within future EU policies. The responsibility for the organisation, delivery or economics of health services remains with national and local authorities and is specifically excluded from the EU's remit. However, in practice many initiatives related to other EU policy areas (particularly the single European market) do impact on health service delivery in member states, including free movement of patients and professionals; public procurement; manual handling policies and standards for medical devices. For those countries that are part of the Eurozone, there are even wider implications from economic policies targeting public sector spending.

EU policies and legislation impact on policy issues that directly impact on nurses' working lives, such as employment rights, equal opportunities, health and safety at work and environmental and consumer protection. All EU member states are also part of a system for recognising nurses' qualifications, which allows nurses to practise in other European countries and lays down common minimum standards for nursing and midwifery education across the EU.

How the European Union Works

The EU has no single government and its three main decision-making bodies (the European Commission, the Council of the EU and the European Parliament) do not equate directly to any institutions within a member states political system.

The **European Commission** is the nearest institution to the civil service, but it is much more influential because it develops proposals for new laws and policies, oversees their implementation in the member states and administers much of the EU's expenditure. It is a relatively small but open organisation and depends on external expertise to help shape policies. It is headed by 28 Commissioners, including the Commission President Jean-Claude Juncker, who are appointed by national governments. A Commissioner's role is not to protect their national interest, but to do what is best for Europe as a whole. For this reason, the European Commission often prefers to work with pan-European alliances, many of which now have offices in Brussels, where most Commission services are based.

The **European Parliament** is the only directly elected EU institution and is currently made up of 754 Members of the European Parliament (MEPs) who once elected have a five year tenure. When the European Parliament was initially created, it played a consultancy role on any proposed EU legislation, however has gained more power over recent years and plays a more active role in legislation development. The European Parliament now works in partnership with national governments to shape legislation on many issues, such as public health, environment and workforce movement.

MEPs see themselves as the most direct link between individual citizens and the EU. They are more interested than the European Commission in the consequences of EU proposals for their region and country and in any potential opportunities, e.g. funding, business links, development opportunities.

Within the European Parliament, most MEPs are organised into wider political groups and are allocated to different permanent committees (such as the Environment, Public Health and Food Safety Committee or the Women's Rights Committee). This is where one of the MEPs from the relevant committee, the "rapporteur", drafts the European Parliament's amendments to a particular European Commission proposal. This report is then voted on by the committee and then by the whole Parliament. But it is the Council of Ministers that finally adopts legislation. MEPs also have other powers, for example over agreeing the EU budget, or in calling the European Commission to account by submitting written or oral questions to European Commissioners and by approving their appointment.

To find out who your MEPs are, their background and their contact details see: http://www.europarl.org.uk/view/en/your_MEPs.html

The **Council of Ministers** is where national governments are represented by the relevant national minister for that particular Council meeting (e.g. Economic and Financial Affairs Council, or Employment, Social Policy, Health and Consumer Affairs Council). On some issues the Council of Ministers still has the final say (such as economic and monetary

policy) but on many if it disagrees with the European Parliament's report then the two institutions have to go into conciliation and hammer out an agreement. Most voting in the Council of Ministers is now by qualified majority. This means that no one country can block a proposal, but the bigger countries have more votes than the smaller ones. In practice, governments try to reach compromises amongst themselves or trade off one concession against another. Council of Ministers meetings are chaired by whichever country has the rotating six-month EU Presidency.

The Council of Ministers should not be confused with the **European Council** (the official name for summits of EU leaders held every three months) or the **Council of Europe**. This is a separate organisation of 47 countries established to promote democracy and human rights and is based in Strasbourg (it developed the European Convention on Human Rights and the associated European Court on Human Rights).

The European Union has also developed a process for formal negotiations between trade unions and employers at European level, called the **social dialogue**. Instead of agreements and legislation being reached between the European Commission, European Parliament and Council of Ministers, the social partners can negotiate directly with each other and adopt collective agreements. The RCN is involved in this process as a member of EPSU, which acts as a committee of the European Trade Union Confederation (ETUC) on public service issues. These can then also be turned into EU law with approval from the Council of Ministers. This is how EU legislation on paternity leave, part-time workers and most recently protection against needle-stick injuries for health workers were agreed.

The **European Court of Justice** (ECJ) settles disputes on behalf of individuals and between member countries and the European Union. The judgments it hands down can set precedents that member states must implement and the ECJ can issue infringements against them for not implementing EU legislation. It is the highest court in the European Union and can overrule national supreme courts.

Who and When to Lobby

In the following section, different politicians who you can raise issues with are highlighted; these range from local elected Parliamentary representatives, national Ministers, and European officials.

National Politicians

A good starting point for political lobbying on a national level is to engage with your designated Parliamentary representative (often referred to as Member of Parliament, or MP). Your Parliamentary representative will usually cover a geographical area, which might include the region you live or work in. Depending on your representatives' areas of interest or responsibility, they may sit on specific committees, special interest groups, or working groups associated with aspects of Government, i.e. Agriculture, Health or Commerce.

Your Member of Parliament is your recommended starting point, when raising issues or concerns; this level of politician is usually more accessible, and as they have a responsibility to engage with the constituents they represent. Your representatives contact details will often be found by accessing your governmental websites and online resources. It's important to recognise that your representative may have a local office (in their constituency) and also a parliamentary base, which may each have different contact details.

In addition to your elected Parliamentary representative, a further politician to potentially access might be those who hold a higher level office which may have a specific focus, i.e. Minister for Health or the Minister for Environment (these roles will be Country specific).

In addition to having ministerial status, this level of politician will likely also be a Parliamentary representative for a geographical area. Due to their ministerial duties, they may be more challenging to access and communicate with, however their role focus (i.e. Minister for Health) may also make them an ideal politician to lobby if you have a specific issue that links to their ministerial portfolio (i.e. an environmental issue might warrant communication with the Minister for the Environment).

European Politicians

If your Country is a member of the European Union, you will also have representation at a European level, through your elected Member of the European Parliament (MEP). Each member state is divided into geographical areas; with each having between 3 to 10 elected MEP's that represent the constituents that live within that area. The number of MEP's for each geographical region is based on population size within that locality. Your MEP will be democratically elected and will usually hold 5 year tenure. To establish who your representatives is, please utilise the following online facility from the European Parliament: <http://www.europarl.europa.eu/meps/en/map.html> An elected MEP will

divide their time between the community they represent in their home country, Strasbourg (where 12 plenary sittings a year are held) and Brussels, where they attend additional plenary sittings, as well as committee and political group meetings. You can contact your MEP at constituency office, or at Brussels; however if you are contacting them to arrange a face-to-face meeting in your home country, it is preferable to contact the MEP's constituency office rather than their Brussels base. If you are contacting your MEP about a complex legislative issue, the MEP's assistants working at the Brussels base are likely to have more extensive knowledge concerning policy matters.

Strategies for Engagement

In the following section, various strategies will be highlighted that can assist in the facilitation of political engagement within your Critical Care Nursing Association and its membership.

First Steps

When faced with a potential issue or area of concern that might warrant political lobbying, an appropriate starting point might be to raise the issue within your place of work, or to a representative from your National association. There may be other work colleagues or association members, who may have already initiated dialogue with political representatives. These contacts may also be able to provide support or add additional weight and authority to your communication. At this stage, you may choose to engage with your national political representatives, or if relevant your European elected politicians. For a more detailed explanation of your initial steps please review the flow chart in appendix 1 - First Steps in Political Lobbying.

Reaching Out to Political Representatives

Parliamentary representative receive large volumes of pre-printed letter templates or pro-forma by email, so communication that is personalised and which concisely outlines your concerns/issues is likely to make much more impact. Handwritten or typed letters are often preferable, however If you prefer to communicate by email, it is recommended to send your correspondence from your personal email account, rather

than from a lobbying website (which often generate a standard template and insert your details). In your communication always remember to include your home address, as this proves that you are a constituent within the representatives region.

Telephone communication is often under-utilised, and can also facilitate a meaningful dialogue with your representative. Also when telephoning, it is likely that your call will be taken by the representatives personal assistant or researcher, however you can still request to speak directly with your representative. Prior to phoning your representative, ensure you are fully prepared to deliver a concise and articulate discussion, perhaps limiting yourself to 2 or 3 key points that you would like to raise. Be prepared to leave your contact details following the call, so that your representative can fully respond and update you with any subsequent actions they may take.

A face-to-face meeting is considered the best strategy for lobbying your elected official. Most MP and MEP's will allocate time within their schedules to meet with their constituents; these are usually formal scheduled meetings which you can arrange to attend. Scheduling an appointment with your elected official will often be via their personal assistant or secretary. The politician will often want to prepare for your meeting, so it will be useful to provide a brief summary of your issue or concerns in your prior communication whilst arranging your face-to-face meeting.

Preparations Prior to Dialogue

Prior to your letter writing, telephone conversation or face-to-face meeting it is vital that you are fully prepared. You cannot assume that your elected official is an expert of your lobbying issue. Often politicians may have a broad knowledge base concerning numerous issues, however may not have the depth of understanding or insight into your issue or area of concern, consequently you need to be able to brief them in a concise and informed manner.

It's useful to have a clear 'ask' or intended outcome of your communication. You should give this some consideration during your preparations; this might be that your politician rises as issue at a higher level, or adds their endorsement to a specific campaign or issue. Do not be afraid to directly present this 'ask' during your communication.

Presenting Your Concern

Regardless of your communication approach (i.e. writing, telephone or face-to-face) it is important to consider how you present and structure your dialogue. You have a limited

window of opportunity to communicate your issue, so a focused and structured dialogue is essential.

The SBAR communication tool, which is commonly utilised to communicate concern in a clinical setting, can effectively be applied to structuring your dialogue when contacting your elected official. The SBAR approach is summarized below:

Situation – Reasons for contacting your politician.

Background – What are the issues or concerns? What has been done? What is the context?

Assessment – What is your evaluation of the situation? What is the impact of the situation?

Recommendations – What do you want from the politician? Presentation of potential solutions.

This approach will ensure that you get your key message across in a concise and logical manner.

Actions After Your Dialogue

Following your communication, whether it is written, via the telephone or in person, you should ensure some follow-up. This might be further communication, perhaps in writing or by email; at this point you can request an update on the matters raised, specifically revisiting any actions that were generated during your earlier dialogue.

Appendix 1: First Steps in Political Lobbying



Appendix 2: Communication Check-list

Communication Check-list	
	You have identified who you should address and the chosen person has the authority for decision making about your issue/topic
	Your letter has included the official's full name and title and is formulated in an official manner
	You have summarized your understanding of the issue/topic, the purpose is formulated clearly and you have included your detailed position on this issue. If appropriate and available statistics have been included
	If a decision on your issue would be made the general impact that you expect to occur on you and relevant others is stated. Possible positive and negative effects the decision might have are described
	You have outlined and specified the action that you expect should be taken or if you oppose some action you have offered an alternative action
	If appropriate you have offered your help or the help of your national Nursing association
	You have thanked the official (MEP) for her/his time and effort
	You have signed the letter and included your full name, position, title, and all contact details (address, phone number, e-mail)
	Make sure you have not used any threatening or rude approach or argumentations – double check the content with experienced colleagues or communication professionals
	You have double checked the correct spelling and made sure there are no grammatical errors included
	You have made sure that every person who should know about your campaign is/has been informed about the content of your letter
<p>Try to keep the content short but focused!</p> <p>Your letter should be no longer than one page!</p>	

Appendix 3: Letter Template

EXAMPLE #1: SUPPORTING A PROPOSED POLICY CHANGE

Adress:

Date:

Honorable:

I am pleased to hear...

I am a ...

The new ordinance... / this issue ... this proposed change...

Your votes... / your support... I urge you now to vote... /to concider... It will mean a lot to me personally, and to the many others in our community/organisation/ward/area who are.... It may also bring in some additional revenue to the city/country/area/organisation etc.

If there is any way I might be of assistance, please don't hesitate to call on me/contact me. Thank you for your support/attention.

Sincerely,

Name:

Adress:

Telephonenumber:

EXAMPLE 2: OPPOSING A PROPOSED POLICY CHANGE

Adress:

Date:

Honorable Mayor/Minister:

As the coordinator of.../member of... I am writing to express my strongest concern over... It would give our youth/nurses/patients/members...

For my coalition, the closure of/refusal/rejection would have other, more direct consequences as well. More than two-thirds/fifty/ all of the participants/nurses/patients do not have... will get...

In addition...

You have always been sensitive to the needs of.../have an interest in... our young people/patients/members, and have been quick to recognize that...

If I can help in any way to defeat this proposal, let me know. Thank you.