



NATIONAL NURSE PRACTITIONER
RESIDENCY & FELLOWSHIP TRAINING
CONSORTIUM

TRACK One:

New Fellowship/Residency Programs: Program Planning, Launching and Support

Workshop 4:

Making the Case:

What is a White Paper and How do I Write One?

Presenter: Patrick Kallerman, Research Director at Bay Area Council Economic Institute

Moderator: Mitchel Erickson, BSN, MSN, ACNP, Former Director of Advanced Practice at UCSF Medical Center; Associate Chief of Advanced Practice, UCSF Health

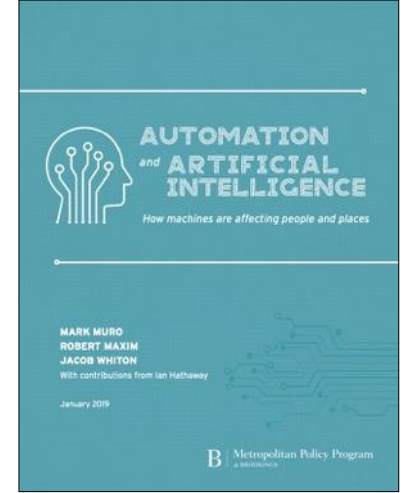
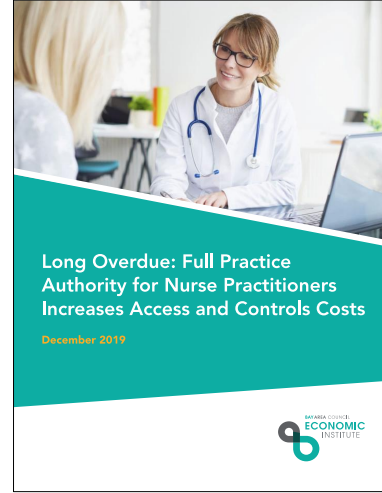
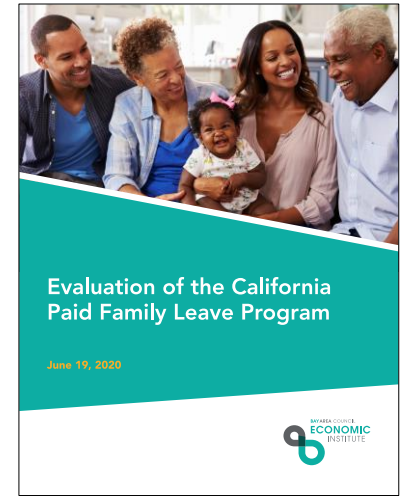
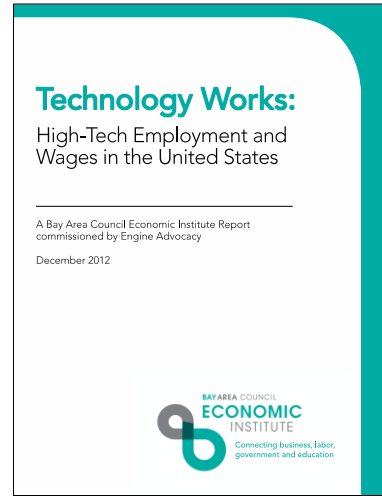
Time: 1:00-2:15pm



Writing for Impact: The Role of Whitepapers in Changing Policy

July 2021





Patrick Kallerman, Vice President of Research
Bay Area Council Economic Institute

Learning objectives for this session:

1. Understanding how whitepapers can be used to enact change.
2. Understanding the components that make up a whitepaper, their unique tone, and the role data plays.
3. Understanding how effective presentation and dissemination is essential to getting your message out.

Summary of this presentation:

1. What is a whitepaper?
2. What are the key components are and why are they essential?
3. How the writing within a whitepaper differs from other forms of writing.
4. How whitepapers can be used to inform, persuade, and enact change.
5. How to (maybe) get paid to write one!
6. How to disseminate your message widely and increase shelf-life.

What is a whitepaper?

Originally, the term white paper was used as shorthand to refer to an official government report, indicating that the document is authoritative and informative in nature. Writers typically use this genre when they argue a specific position or propose a solution to a problem, addressing the audience outside of their organization.

Today, white papers have become popular marketing tools for corporations especially on the Internet since many potential customers search for information on the Web. Corporations use white papers to sell information or new products as solutions that would serve their customers' needs.

- Purdue Writing Lab

Why write a whitepaper?

There are various, overlapping, reasons for developing a whitepaper:

- To inform an audience or general public on a little-understood issue;
- To provide an update on an issue where there have been significant changes;
- To bring new research findings from academia to a general audience;
- To advocate for a specific change based on data/research/previous findings;
- To make the case for future legislation, program changes, etc.;

Have purpose!

Most often, whitepapers are intended to synthesize findings from experts (including yourself!) and the latest scientific or academic research.

They are generally not the place to discuss scientific methods, disagreements within the literature, or other technical details. The idea is to provide a general reader, leader, or policymaker with the tools they need to **make a decision**.

As such, you should relate all data and findings to the current state of debate, and make practical suggestions on how to improve the current system.

What should a whitepaper include?

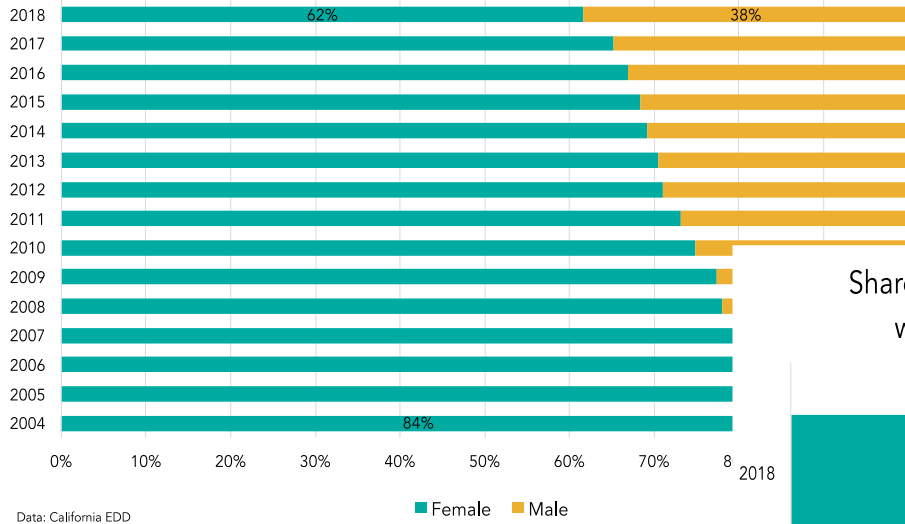
- Title (usually a good subtitle goes a long way)
- Executive Summary (if length of paper warrants)
- Context/Background (data!)
- Framing the Problem (more data!)
- Conclusion
- Policy Recommendations

The writing and content within a whitepaper are key.

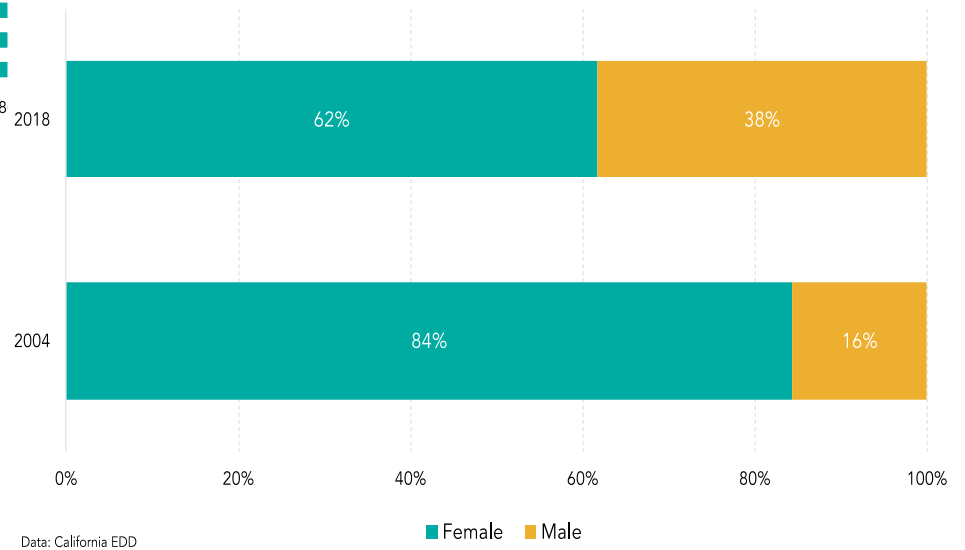
- Think of your audience at all times;
- Use plain language whenever possible;
- Avoid technical terms, industry jargon, acronyms, etc.;
- Where you must use technical terms or explain complicated dynamics – which is oftentimes inevitable – do so as simply and efficiently as possible;
- Use data in a clear and compelling way:
 - Use simple comparisons when possible (see next slide);
 - Avoid double-axis graphs and other complicated structures;
 - Avoid torturing the data with analysis;

Simple and clear is always best.

Share of male versus female bonding PFL claims over time



Share of male versus female bonding PFL claims when PFL was implemented versus 14 years into the Program



Changing the status quo

If we've done our job as authors, we should have a succinct document with a clear and compelling narrative that is robustly supported by the existing literature and data.

Now, we need to get this information into the hands of decision makers.

Depending on your desired outcome, you might use a variety of dissemination strategies, including:

- Presenting your findings internally, including to all-staff meetings, task forces and working groups, leadership committees, etc.;
- Interviews with the media or briefings with editorial boards;
- Conferences and other “trade” venues;
- Webinars to the public and stakeholder groups;
- Social media!

Case Study

Full Practice Authority for Nurse Practitioners Increases Access and Controls Cost

SPOTLIGHT: CALIFORNIA | APRIL 2014



Expanding access to and improving the quality of primary care is critical to controlling health care costs for businesses and consumers. It is also essential to respond to the greater demand for health care from the coverage expansion of the Affordable Care Act and the aging of our population. Granting full practice authority to nurse practitioners is one of the most effective steps that states can take to increase the supply of primary care clinicians while maintaining high quality and driving down costs.

CALIFORNIA

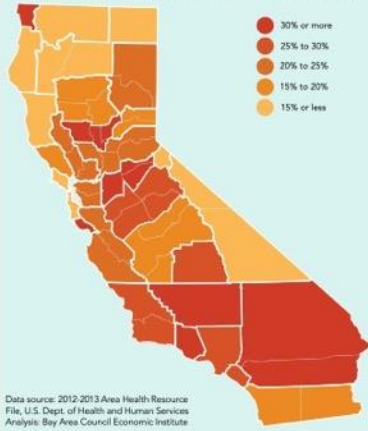
California is the most populous state and has been a leader in the implementation of federal health reform. It is home to the largest number of primary care physicians and nurse practitioners. However, the state ranks 23rd in the number of primary care physicians per resident.¹ With the state's covered population set to rise substantially, the supply of primary care clinicians will become strained even further.

The number of nurse practitioners in California has risen dramatically in the past decade, nearly doubling from 2001 to 2011.² Along with accounting for a rising share of primary care clinicians, research suggests nurse practitioners also serve a more diverse and historically underserved population. Nurse practitioners were more likely than physicians to care for younger, female and non-white patients. They were also much more likely to serve individuals with disabilities and those dually eligible for Medicare and Medi-Cal. Furthermore, the counties in which nurse practitioners practiced were more likely to be either rural or a Health Professional Shortage Area, critical targets for increasing access.³

INCREASING ACCESS

In early 2014 Federal Trade Commission staff recommended states take caution when considering proposals to limit the practice authority of nurse practitioners, citing evidence of a reduction in both competition and benefits to consumers

Increase in the Supply of Nurse Practitioners by Health Service Area as a Result of Reform



that result from such laws.⁴ Our analysis shows that over 4,000 additional nurse practitioners would be practicing in California today had practice restrictions been lifted in the state previously, representing a 24 percent increase in the number of nurse practitioners practicing throughout the state.⁴ In addition, the growth rate of the nurse practitioner workforce would increase by 25 percent, providing much needed relief to the state's health care workforce into the future.

24%
more nurse practitioners in California

A large body of research indicates that an increase of this magnitude in the number of primary care access points would address pent-up demand. It would also result in an increased use of preventative

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Long Overdue: Full Practice Authority for Nurse Practitioners Increases Access and Controls Costs

December 2019

