

Objective:

*The first step to greater and more sustained legislative action is to take an honest look at where your Section stands today—the involvement of Fellows, your Section's infrastructure, leadership, and legislative know-how. This tool kit will help your Section take that first step to successful legislative advocacy.*

POSITIONING YOUR  
SECTION FOR  
*LEGISLATIVE SUCCESS*

THE ACOG SECTION  
SELF-ASSESSMENT

THE AMERICAN COLLEGE OF  
OBSTETRICIANS AND GYNECOLOGISTS

•  
DEPARTMENT OF STATE LEGISLATIVE  
& REGULATORY ACTIVITIES

•  
stateleg@acog.org



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## APPENDIX

*Comment Reply Sheet*

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# 1

## WHY COMPLETE THE SELF-ASSESSMENT?

Today, right now...

Is your Section an effective advocate in your state capitol on women's health and ob-gyn issues?

Are you recognized by legislators and government agency officials in your state as an expert and a resource on issues dealing with women's health?

Are you partnering with a woman's group in your state this year to pass legislation—say a mandate for coverage of contraceptives?

Has your state insurance commissioner's office heard from ob-gyns about beefing-up enforcement of the direct access law you worked so hard to pass?

### *Dear Section Leader:*

*Whether you are new to ACOG Section leadership or a veteran, you may never before have been asked to examine your Section's capacity for legislative advocacy. This 'Section Self-Assessment' is designed to assess your Section's strengths and limitations in three areas—organization, Fellow involvement and legislative skills. It's not just legislative know-how or saviness that we're talking about. It's your Section's infrastructure, membership and leadership too!*

*You are asked to complete three tasks:*

*1st — Answer the Self-Assessment questions (parts 2, 3 and 4 of this tool kit);*

*2nd — Review your answers and identify your Section's capacity for legislative activity among the four profiles—novice, beginner, intermediate and advanced (part 5 of this tool kit);*

*3rd — Learn about additional tools and training developed by the Department of State Legislative and Regulatory Activities to assist you in growing your Section's Legislative Program (part 6 of this tool kit).*

*Why complete the Self-Assessment? Because—the more active you are on legislative issues in your state, the greater the likelihood that lawmakers will pay attention to your concerns and consult you before passing legislation that impacts your practice, your patients and the specialty overall. Because—a legislative program can provide cohesiveness to an otherwise diverse or inactive Section, and it is an excellent way to activate Fellows who might not be involved and energize those who are.*

*So...on to the Self-Assessment and an enhanced legislative program in your Section!*

*The ACOG Department of State Legislative & Regulatory Activities*

# 2

## ASSESS YOUR SECTION—ORGANIZATION

### ORGANIZATION

A Section that meets infrequently, has the same few Fellows rotating in and out of leadership, has no dues, and doesn't set yearly goals is ill-equipped for success in the legislative arena no matter how politically savvy or connected individual Fellows may be. Understanding your Section's organizational make-up is key to evaluating your Section's ability—and willingness—to engage in legislative activities. Think about your Section in four areas: structure, leadership, communication and budget.

#### STRUCTURE

##### 1. My Section meets:

- Only when we have to as mandated by our bylaws.
- Unfortunately, we recently had to eliminate our interim meeting due to a lack of funds and/or attendance.
- Several times per year.
- We have an active Advisory Council and various committees that meet throughout the year.

(a) (b) (c) (d)

##### 2. Attendance at Section meetings is:

- Poor.
- We seldom even have a quorum of officers at our meetings.
- It depends—sometimes it's good, sometimes it's bad.
- We consistently get good attendance.

(a) (b) (c) (d)

##### 3. At Section meetings, legislative issues:

- Are never on the agenda.
- One of our officer's submits a brief written report on legislative issues.
- We have the State Medical Society lobbyist brief our Advisory Council on current legislative issues.
- Tend to dominant most of our meetings—there's a lot of interest.

(a) (b) (c) (d)

##### 4. My Section's interaction with our District is:

- Minimal, except at the Annual District Meeting.
- District officers communicate regularly with the Sections; but, there is little communication from the Sections to the District.
- Communication from the District to the Sections is good; Sections want greater input in District priorities, but this is not happening.
- Communication flows both ways—Sections participate in District-wide committees and District officers regularly attend Section meetings.

(a) (b) (c) (d)

*Choose the answer that best describes your Section.*



**5. My Section's interaction with the ACOG National office is:**

- We rarely interact with National ACOG.
- We interact primarily about financial and membership matters.
- We interact with staff on an 'as-needed' basis.
- We interact with National staff regularly—we've got the '800' number for officers memorized.

(a) (b) (c) (d)

**6. My Section's relationship with ACOG's Department of State Legislative and Regulatory Activities is:**

- Who?* ACOG has a Department of State Legislative and Regulatory Activities?
- We 'borrow' from the Department's Quarterly Report to write our Section's legislative newsletter.
- We periodically check in with the Department for an update on what is happening in our region, and Department staff brief our Advisory Council at least once a year.
- We regularly consult with the Department on legislative strategy and sponsor Fellows to participate in the Department's training programs.

(a) (b) (c) (d)

**7. My Section's relationship with other medical groups/ women's organizations in my state is:**

- We don't really interact, as far as I know, with other medical groups or women's organizations in our state.
- We interact with other medical groups primarily through the State Medical Society; we haven't really been involved with women's organizations.
- We know the dominant women's lobby in our state and are sometimes approached by them to take a position on a bill or to get involved on legislation.
- We hold joint events/engage in legislative activity with other medical groups and women's organizations in our state.

(a) (b) (c) (d)

**LEADERSHIP**

**1. My Section sets yearly goals and objectives:**

- Never, to my knowledge.
- When one of our officers remembers.
- Only for certain activities and/or at the rotation of the Chair.
- Our Advisory Council and various Committees do this regularly.

(a) (b) (c) (d)

**2. Our Section officers:**

- The same Fellows rotate in and out, year after year.
- We are trying to attract new Fellows interested in leadership, but it is a difficult task.
- Are elected from a qualified and plentiful pool of candidates.
- We don't have enough leadership positions for everyone who is interested.

(a) (b) (c) (d)



**3. Our Section officers:**

- a. Are not all that active.
- b. Are more focused on National ACOG concerns than on local Section activities.
- c. We all pitch in when needed. We have no assigned duties.
- d. Have set duties per their written job descriptions. For example, our Vice Chair automatically chairs our Professional Liability Committee.

(a) (b) (c) (d)

**4. Our Section officers:**

- a. Don't pay attention to public policy or political issues in our state.
- b. Are only active with the U.S. Congress, not our state legislature.
- c. Only a few are actively engaged and they remain involved year after year.
- d. Our Advisory Council has put a priority on legislation and is out front on cutting-edge issues.

(a) (b) (c) (d)

**COMMUNICATION****1. My Section communicates with Fellows:**

- a. At annual District/Section meetings.
- b. Through a monthly or quarterly newsletter.
- c. Through an e-mail alert system and our web page.
- d. All of the above.

(a) (b) (c) (d)

**2. My Section sends legislative alerts:**

- a. We don't send alerts.
- b. We are still trying to get fax numbers and e-mail addresses for the Fellows in our Section.
- c. Whenever we are in a legislative crisis.
- d. After we set our legislative priorities and then regularly (both for updates and calls-to-action) during the legislative session.

(a) (b) (c) (d)

**3. When my Section sends a legislative alert:**

- a. We don't send alerts.
- b. We haven't had good results. Less than 10% of our Fellows respond.
- c. The response varies. Sometimes Fellows respond, sometimes they don't.
- d. We usually get a good response. We often have over 50% of our Fellows participate in our 'call-to-action' alerts.

(a) (b) (c) (d)



**BUDGET****1. Revenues for my Section come from:**

- a. We have no revenues.
- b. Funds given to us by our District.
- c. Dues only.
- d. Dues, fundraising, and special assessments.

(a) (b) (c) (d)

**2. My Section's budget for legislative activity is:**

- a. *Non-existent*— we rarely participate in legislative initiatives; therefore, we don't need a budget.
- b. We rely on whatever help the District and National are able to give us; we don't have a budget for legislation.
- c. Recently, we had to do a special assessment for a legislative activity because of limited funds and/or we had to let go our lobbyist because of limited funds.
- d. We budget annually for legislative activity and a lobbyist, based on our legislative agenda and priorities. This represents a large portion of our Section's budget.

(a) (b) (c) (d)

**3. Our legislative budget is spent on:**

- a. Nothing. We don't have a legislative budget.
- b. Mostly communication with Fellows—newsletters, alerts—and training programs for Fellows.
- c. All of 'b' above and communications with lawmakers—legislators, the Governor, the Health and Insurance Departments.
- d. All of 'b' and 'c' above, plus salary and expenses for our lobbyist, consultant fees, public relations support for a legislative initiative, outreach to patients and women's groups, etc.

(a) (b) (c) (d)

**Most of my answers in this part were:**

(a) (b) (c) (d)

Please continue your Section Assessment in Part 3

# 3

## ASSESS YOUR SECTION—FELLOW INVOLVEMENT

### FELLOW INVOLVEMENT

Now that you have evaluated your Section's organizational make-up, turn your attention to Fellows in your Section. Can you readily identify the legislative issues that are important to ob-gyns in your state? Are you recruiting and involving more ob-gyns to work on your legislative program? Are you able to mobilize ob-gyns, quickly, behind an issue your Section has identified as a priority? It's really rather simple—education and motivation of Fellows about legislative matters is a year-round process!

**1. In general, Fellows in my Section:**

- a. Are apathetic.
- b. Participate only when they can find the time.
- c. Make the time to participate in Section activities.
- d. Are more involved today than ever before.

**2. Attendance at our Section meetings:**

- a. We've stopped holding Section meetings because nobody came.
- b. Not good; often only officers attend.
- c. Fluctuates, depending on where the meeting is held.
- d. We consistently have solid turnout.

**3. To increase attendance at our Section meetings, we**

- a. Haven't done anything.
- b. Started holding meetings around the state, rather than always in the same town/city.
- c. Try to get a lecturer, or hold a community event, or open the meeting to all Fellows/Junior Fellows.
- d. Diversify our agenda, which is sent out in advance to all Fellows. We try to encompass legislative, clinical, and other concerns at our meetings.

**4. Junior Fellows in my Section participate:**

- a. In clinical seminars only.
- b. In clinical and social events, mostly segregated from Fellows.
- c. They can participate in any activities offered by the Section.
- d. We actively recruit Junior Fellows for broad involvement in the Section.

**5. When we hold 'Ob-Gyn Day' at our capitol:**

- a. We don't hold 'Ob-Gyn Day'.
- b. We get more elected officials in attendance than ob-gyns.
- c. Only members of our Legislative Committee and ob-gyns who live in the capitol tend to show up.
- d. We have a good turn-out from both ob-gyns and elected officials, as well as the public.

*Choose the answer that best describes your Section.*

- a
- b
- c
- d

- a
- b
- c
- d

- a
- b
- c
- d

- a
- b
- c
- d

- a
- b
- c
- d



# 3

6. Fellows in my Section hold *grand rounds* on current legislative topics:
- a. Never.
  - b. To my knowledge, my Section has not done this before—but it sounds like a great way to inform Fellows about issues!
  - c. We try to do this and encourage it throughout the Section.
  - d. Our officers request time at *grand rounds* whenever we undertake a major legislative initiative.
7. The last Legislative Conference hosted by my Section was:
- a. We've never hosted a Legislative Conference.
  - b. We don't host our own Legislative Conference, but we do sponsor Fellows to attend ACOG's Annual Federal Legislative Workshop.
  - c. We participate in or conduct legislative conferences with the State Medical Society and/or Ob-Gyn Society. These conferences generally are held every year.
  - d. We devote a portion of our Annual or Interim Meetings to legislative training for Fellows. In addition, we sponsor Fellows to attend Legislative Conferences held by ACOG, the AMA, and other organizations in our State.

(a) (b) (c) (d)

(a) (b) (c) (d)

**Most of my answers in this part were:**

(a) (b) (c) (d)

Please continue your Section Assessment in Part 4

# 4

## ASSESS YOUR SECTION—LEGISLATIVE SKILLS

### LEGISLATIVE SKILLS

Finally, you are asked to evaluate your Section's legislative know-how. Think about the legislative initiatives your Section has been involved in—if any—during the past several years.

Were your legislative goals realistic and achievable? Did you commit sufficient resources to your legislative agenda? How about your leadership—were they committed for the duration of your legislative initiative?

Legislative success is really very similar to any marketing success. The better you know your audience and the environment in which your message is delivered, the more likely you are to hit your target.

**1. When we need to conduct a legislative initiative, we:**

- a. ... panic!
- b. Call National ACOG to find out what to do.
- c. Our Legislative Committee meets to develop an action plan.
- d. We review our legislative agenda and priorities, call in our contract lobbyist, and consult with National ACOG on strategy.

a      b      c      d

**2. During the past five years, my Section has:**

- a. Only been organized on one legislative effort.
- b. Been approached by the State Medical Society about our position on specific bills and regulations.
- c. Partnered for the first time with a women's group in pursuit of a common legislative goal.
- d. Handled numerous issues, broadened our legislative agenda, and been increasingly proactive.

a      b      c      d

**3. My Section has:**

- a. Several committees, but not one dedicated to state legislation.
- b. An inactive Legislative Committee, or one that is not terribly effective.
- c. A lobbyist, so we don't need a Legislative Committee.
- d. An active Legislative Committee that works in conjunction with our lobbyist and ACOG's Department of State Legislative and Regulatory Activities.

a      b      c      d

**4. Lawmakers rely on my Section for:**

- a. Not very much, actually.
- b. For the most part, communication is via our State Medical Society, not directly with our Section.
- c. Testimony/written statements on certain issues.
- d. Most women's health care policy issues. We are the recognized experts in our state.

a      b      c      d

*Choose the answer that best describes your Section.*



# 4

5. Compared to other medical groups in your state, how active would you say your Section is on legislative issues?
- a. Compared to others, I don't know; but we are not active.
  - b. Probably less active; we don't have a legislative agenda and mostly react to issues.
  - c. About the same, except we don't have a PAC like some medical societies.
  - d. Definitely more active.
6. Compared to other medical groups in your state, how successful would you say your Section is on legislative issues?
- a. I don't know. We're not active.
  - b. Less successful because we're not very organized or committed.
  - c. It's a toss-up; but maybe less successful since the current political climate in our state is not favorable to our issues.
  - d. More successful—our lobbyist is tops!

(a) (b) (c) (d)

(a) (b) (c) (d)

(a) (b) (c) (d)

**Most of my answers in this part were:**

Based on your answers in parts 2, 3, & 4, go on to profile your Section in part 5

# 5

## PROFILING YOUR SECTION

If most of your answers in parts 2, 3, and 4 were:

- (a) → Your Section is a legislative novice.
- (b) → Your Section is a legislative beginner.
- (c) → Your Section is a legislative intermediate.
- (d) → Your Section is legislatively advanced.

**Note:** Based on your answers to the self-assessment, your Section may not fall into one single category. You may recognize characteristics of your Section in more than one profile. In that case, review the profiles below and decide which best describes your Section.

### NOVICE

- Small attendance at Section meetings
- Meetings are clinical and/or social only
- Section has no dues structure
- No experience in legislative advocacy
- No known past legislative initiatives

### BEGINNER

- Trouble sustaining Fellow involvement
- No budget set aside for legislation/lobbying
- Minimal legislative experience
- No partnership with women's groups
- Legislative issues rarely on meeting agendas
- Few past legislative initiatives
- Always reacting to others

### INTERMEDIATE

- Start-up of a Legislative Committee
- Several legislative initiatives under your belt
- Begun thinking proactively
- Priorities sometimes diverge from State Medical Society
- Started budgeting for legislative efforts
- No mechanism for rapid response communication
- Begun long-term coalition building in your state
- Consulting with National ACOG Staff on issue strategic planning

### ADVANCED

- Proactive on legislation—can play offense and defense
- Credible, widespread presence within your state
- Have a working Legislative Committee
- Have a working rapid response communication system
- Budget set specifically for legislative efforts
- Host Ob-Gyn Lobby Days/Workshops
- Attend advanced legislative training sessions sponsored by National ACOG

Go to part 6, identify your Section, and learn how to grow your Section's legislative program

# 6

## GROWING YOUR SECTION'S LEGISLATIVE PROGRAM

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*Congratulations, you've identified your Section as a legislative novice! The good news is that you've begun to identify your Section's limitations as well as opportunities for growth. Your Section has a lot of work to do before it should even begin to think about undertaking a legislative initiative. Rise to the challenge!*

### NOVICE

- Small attendance at Section meetings
- Meetings are clinical and/or social only
- Section has no dues structure
- No experience in legislative advocacy
- No known past legislative initiatives

## TOOLS YOU CAN USE!

The Department of State Legislative and Regulatory Activities has developed various “tools” to help your Section grow its legislative program. These will help strengthen your Section in the three areas evaluated in this self-assessment—organization, Fellow involvement, and legislative skills. Contact the Department today at [stateleg@acog.org](mailto:stateleg@acog.org).

### FOR THE NOVICE ACOG SECTION

#### ■ *Organization*

Organization and goals  
Leadership: top-down or bottom-up?  
Using your District effectively  
Using National effectively

#### ■ *Fellow Involvement*

Survey Fellow needs/wants  
Communication within your Section  
Broadening your meeting agenda

#### ■ *Legislative Skills*

Introduction to Legislative Process  
Introduction to Issues  
How to Get Involved in State Legislation

# 6

## GROWING YOUR SECTION'S LEGISLATIVE PROGRAM

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*Congratulations, you've identified your Section as a legislative beginner! Your Section has some organizational capacity, but little experience on legislation. You have the capacity to be active legislatively. What are you waiting for?*

### BEGINNER

- Trouble sustaining Fellow involvement
- No budget set aside for legislation/lobbying
- Minimal legislative experience
- No partnership with women's groups
- Legislative issues rarely on meeting agendas
- Few past legislative initiatives
- Always reacting to others

## TOOLS YOU CAN USE!

The Department of State Legislative and Regulatory Activities has developed various "tools" to help your Section grow its legislative program. These will help strengthen your Section in the three areas evaluated in this self-assessment—organization, Fellow involvement, and legislative skills. Contact the Department today at [stateleg@acog.org](mailto:stateleg@acog.org).

### FOR THE **BEGINNER** ACOG SECTION

#### ■ *Organization*

Do your resources match your goals?  
Is your leadership leading?  
Developing a presence in your state  
Relationship with your State Medical Society

#### ■ *Fellow Involvement*

Communication within your Section  
Identifying active Fellows

#### ■ *Legislative Skills*

Action plan on legislation  
Identifying the players  
Communicating with your legislators

# 6

## GROWING YOUR SECTION'S LEGISLATIVE PROGRAM

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*Congratulations, you've identified your Section as a legislative intermediate! Your Section has organizational strength and has enjoyed legislative success in the past, but there's no long-term game plan or commitment. Your Section can 'jump start' its legislative program and become an even more effective advocate in your state. Go for it...!*

### INTERMEDIATE

- Start-up of a Legislative Committee
- Several legislative initiatives under your belt
- Begun thinking proactively
- Priorities sometimes diverge from State Medical Society
- Budgeting for legislative efforts
- No mechanism for rapid response communication
- Begun long-term coalition building in your state
- Consulting with National ACOG Staff on issue strategic planning

## TOOLS YOU CAN USE!

The Department of State Legislative and Regulatory Activities has developed various "tools" to help your Section grow its legislative program. These will help strengthen your Section in the three areas evaluated in this self-assessment—organization, Fellow involvement, and legislative skills. Contact the Department today at [stateleg@acog.org](mailto:stateleg@acog.org).

### FOR THE INTERMEDIATE ACOG SECTION

#### ■ *Organization*

Do your resources match your goals?  
Setting up an effective legislative committee  
Should you hire a lobbyist?  
Positioning your Section as a recognized authority  
Using your State Medical Society effectively

#### ■ *Fellow Involvement*

Developing rapid response communication  
Sustaining Fellow involvement

#### ■ *Legislative Skills*

Single issue vs. broad agenda  
Building strong coalition partners  
Crafting a bill/testifying tips

# 6

## GROWING YOUR SECTION'S LEGISLATIVE PROGRAM

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*Congratulations, you've identified your Section as legislatively advanced! Your Section can continue to build on its legislative success by involving more Fellows in legislative activities and seeking out and sustaining new coalition partners. Success is yours!*

### ADVANCED

- Proactive on legislation—can play offense and defense
- Credible, widespread presence within your state
- Have a working Legislative Committee
- Have a working rapid response communication system
- Budget set specifically for legislative efforts
- Host Ob-Gyn Lobby Days/Workshops
- Attend advanced legislative training sessions sponsored by National ACOG

## TOOLS YOU CAN USE!

The Department of State Legislative and Regulatory Activities has developed various “tools” to help your Section grow its legislative program. These will help strengthen your Section in the three areas evaluated in this self-assessment—organization, Fellow involvement, and legislative skills. Contact the Department today at [stateleg@acog.org](mailto:stateleg@acog.org).

### FOR THE ADVANCED ACOG SECTION

- *Organization*
  - Managing your in-state lobbyist
  - Enhancing your Section's presence in the state
  - Creative fundraising
- *Fellow Involvement*
  - Recruiting and sustaining Fellow involvement
  - Responding to your grassroots—patients
- *Legislative Skills*
  - Using coalition partners effectively
  - Lobby Days/Health Expos/Workshops
  - Effective pre-and post legislative session planning
  - Advanced State Lobbyist Roundtable

**COMMENT REPLY SHEET**

**Positioning Your Section For Legislative Success  
The ACOG Section Self-Assessment**

Section Name: \_\_\_\_\_

Date Self-Assessment Completed: \_\_\_\_\_

Name of Officer (optional): \_\_\_\_\_

The Self-Assessment helped me to identify my Section's organizational strengths and limitations and how these impact our ability to be effective in the legislative arena.

YES

NO

Overall, I found the Self-Assessment to be a useful tool.

YES

NO

Your Comments:

**Mail this form to:**

American College of Obstetricians and Gynecologists  
Department of State Legislative and Regulatory Activities  
P. O. Box 96920  
Washington, DC 20090

Or

**Fax this form to:**

202/488-3985