

integrating health into policy doctoral nursing programs

continuing the
conversation
in 2015

JANUARY 27, 2015 | HOTEL DEL CORONADO | 1500 ORANGE AVENUE, CORONADO, CA

Robert
Wood
Johnson
Foundation

**Nursing and
Health Policy Collaborative**
University of New Mexico



Table of Contents

Conference Description	3
Conference Objectives.	3
Program Schedule.	4
General Information	6
Robert Wood Johnson Foundation Background	7
Biographies	8
Program Overview	16
Poster Session Abstracts	17
Disclosure Statement.	25

Integrating Health Policy into Doctoral Nursing Programs: Continuing the Conversation in 2015

January 27, 2015

Conference Description

This conference offers PhD and DNP faculty strategies for integrating health policy into their programs and courses. Its interprofessional and interdisciplinary panels of speakers will propose core content and methods for developing faculty and student expertise in policy analysis and research. The conference fosters the work of the Robert Wood Johnson Foundation in building a Culture of Health, which assumes that health encompasses more than health care, and that health policy necessarily encompasses the broader social, economic, political, and cultural aspects of health. Faculty and students with beginning and advanced health policy knowledge are encouraged to attend.

Conference Objectives

At the conclusion of this conference, participants will be able to:

1. Identify and explore strategies and approaches that enhance the integration of health policy studies into doctoral nursing curricula.
2. Discuss interprofessional and interdisciplinary collaborations and strategies for incorporating content into doctoral nursing programs to assist faculty in preparing students to address current and emerging health policy issues.
3. Identify roles that nurses prepared at the PhD or DNP level may undertake to help shape policies that address social determinants of health and improve population health outcomes.
4. Recommend strategies for developing programs of research for faculty and students that focus on a broad understanding of health and health policies to address the relationships between social determinants of health, population health, and health care.
5. Recognize the social determinants of health and integrate an understanding of these determinants into policy analysis and research as a way to help build a culture of health in the United States.

Program Schedule

Tuesday, January 27, 2015

8:00 am–8:30 am	REGISTRATION AND CONTINENTAL BREAKFAST (provided) Location: Hotel Del Coronado, Tropics Room
8:30 am–8:45 am	WELCOME AND INTRODUCTIONS Conference Co-Chairs: Carol A. Lockhart , PhD, RN, FAAN, and Sally S. Cohen , PhD, RN, FAAN Location: Hotel Del Coronado, Tropics Room
8:45 am–9:00 am	OPENING REMARKS Susan B. Hassmiller , PhD, RN, FAAN Location: Hotel Del Coronado, Tropics Room
9:00 am–10:00 am	KEYNOTE ADDRESS: Translating Research into Policy Susan C. Reinhard , PhD, RN, FAAN Location: Hotel Del Coronado, Tropics Room
10:00 am - 10:15 am	Break
10:15 am–11:20 am	PANEL: Shaping Health Policy Leadership through Doctoral Education Michael A. Carter , DNSc, DNP, FAAN, FNP/GNP-BC, Julie A. Sochalski , PhD, RN, FAAN, and Adriana Perez , PhD, RN, ANP, FAAN Moderator: Sally S. Cohen , PhD, RN, FAAN Location: Hotel Del Coronado, Tropics Room
11:20 am–12:05 pm	PANEL: Exercising Health Policy Leadership through Nursing and Community Organizations Diana Mason , PhD, RN, FAAN, Eileen Breslin , PhD, RN, FAAN, and Susan B. Hassmiller , PhD, RN, FAAN Moderator: Nancy Ridenour , PhD, APRN, BC, FAAN Location: Hotel Del Coronado, Tropics Room
12:05 pm–12:15 pm	Break
12:15 pm–1:15 pm	OPEN DISCUSSION OF MORNING SESSIONS AND LUNCH (provided) Moderator: Pamela F. Cipriano , PhD, RN, NEA-BC, FAAN Location: Hotel Del Coronado, Tropics Room
1:15 pm - 1:45 pm	BEYOND SECTORS, SILOS, & DISCIPLINES: ADVANCING HEALTH IN ALL POLICIES Harry J. Heiman , MD, MPH Introduction: Barbara Damron , PhD, RN, FAAN Location: Hotel Del Coronado, Tropics Room
1:45 pm - 2:15 pm	POLITICS VERSUS POLICY ANALYSIS Harold Pollack , PhD Introduction: Shana Judge , JD, PhD Location: Hotel Del Coronado, Tropics Room
2:15 pm–2:30 pm	Break

2:30 pm–3:15 pm	<p>BREAKOUT SESSIONS: Strategies for Enriching Doctoral Health Policy Education</p> <p>Group 1: Weaving Health Policy Essentials into a DNP Program of Study Virginia Trotter Betts, JD, MSN, RN, FAAN, and Carol A. Lockhart, PhD, RN, FAAN Location: Hotel Del Coronado, Bayside/Strand Room</p> <p>Group 2: PhD Student Research: Designing Research to Affect Health Policy Carol Hall Ellenbecker, PhD, RN, and Susan Chapman, PhD, RN, FAAN Location: Hotel Del Coronado, Pacifica/Tide Room</p> <p>Group 3: Experiential Learning: Addressing Health and Not Just Health Care Sally S. Cohen, PhD, RN, FAAN, and Barbara Damron, PhD, RN, FAAN Location: Hotel Del Coronado, Coastal/Surf Room</p>
3:15 pm–3:30 pm	Break
3:30 pm–4:15 pm	<p>META MEDICINE: CONSIDERING PUBLIC POLICY, POLITICAL WILL, AND POWER IN BUILDING HEALTHY COMMUNITIES</p> <p>Makani Themba Introduction: Gabriel R. Sanchez, PhD Location: Hotel Del Coronado, Tropics Room</p>
4:15 pm–4:45 pm	<p>INTEGRATING HEALTH POLICY INTO DOCTORAL NURSING PROGRAMS: Survey and Status Update from the RWJF Collaborative at UNM</p> <p>Sally S. Cohen, PhD, RN, FAAN and Carol A. Lockhart, PhD, RN, FAAN Location: Hotel Del Coronado, Tropics Room</p>
4:45 pm–5:15 pm	<p>OPEN FORUM: Continuing the Effort to Strengthen Health Policy in DNP and PhD Curricula</p> <p>Moderator: Carol A. Lockhart, PhD, RN, FAAN Location: Hotel Del Coronado, Tropics Room</p>
5:15 pm–6:00 pm	<p>RECEPTION AND POSTER SESSION</p> <p>Location: Hotel Del Coronado, Tropics Room</p>

Support for this conference was provided by a grant from the Robert Wood Johnson Foundation.

General Information

Purpose Statement

The purpose of this conference is to discuss PhD and DNP faculty strategies for integrating health policy into their programs and courses, and to illustrate how health policy education and research encompasses broad social, economic, political and cultural aspects of health

Approval Statement

This activity has been submitted to the New Mexico Nurses Association Accredited Approver Unit for approval to award contact hours. NMNA AAU is accredited as an approver of continuing nursing education by the American Nurses Credentialing Center's Commission on Accreditation

7.0 continuing nursing education contact hours will be awarded.

Evaluations

Participants must sign in, attend the entire day, and submit a completed evaluation in order to receive a Certificate of Successful Completion.

Attire

Appropriate dress for this conference is business casual. Because meeting room temperatures and personal comfort levels vary, we recommend that you bring a sweater or jacket.

Cell Phone Protocol

Please ensure cell phone ringers are turned off during all sessions of the conference.

Emergency & First Aid

Hotel Del Coronado is prepared to respond to different types of situations. The following is information on emergency procedures:

- 24-hour operation with Security Personnel on property at all times to include a Supervisor, Officers and Dispatcher.
- Security Emergency Number: ext. 7676 from any hotel telephone; or dial "0" and ask the Hotel Operator for Security.
- The First Aid Medical Bag is located in the Security Office in the Victorian Building and is taken by a Security Officer to all injury or illness-related situations. Additionally, the resort has eleven (11) Automated External Defibrillators (AED) strategically located throughout the property, including one at the Security Dispatch Center.
- The Hotel Del Coronado is equipped with a Fire and Life system in all buildings to include smoke detectors, heat sensors, sprinklers, audible alarms, and public address system.
- The hotel Emergency Response Team will respond to all activated fire detection devices and provide direction to guests according to the situation (e.g., false alarm, evacuation, etc.).

- The Coronado Fire Department is immediately dispatched to the resort for any confirmed fire alarm.
- Evacuation Assembly Areas (Designated by Building Location)
 - A. Victorian Building (West Parking Lot & Main Parking Lot)
 - B. Grande Hall (West Parking Lot)
 - C. California Cabanas (Main Parking Lot)
 - D. Ocean Towers (Main Parking Lot)
 - E. Beach Village (Windsor Lawn)
 - F. Restaurants (Windsor Lawn)
- Paramedics, Fire Department, and the Police Department are all located approximately five minutes from the hotel.
- Our Security Department, as well as a small number of other employees, are trained in CPR and First Aid.
- Emergency evacuation routes and procedures are located on the inside of all guest room doors.
- Nearest emergency room: Sharp Coronado Hospital
- Nearest hospital: Sharp Coronado Hospital

Hotel Information

Hotel Del Coronado
1500 Orange Ave.
Telephone: 1-619-435-6611
Check in: 4:00 pm
Check out: 12:00 pm

Business Center

The business center (run by FedEx) is located in the main lobby to the left toward Orange Avenue.

Overnight Parking for Guests

Valet parking: \$47
Self-parking: \$37

Videography

The conference sessions on the main stage in the Tropics Room will be recorded for future academic use and posted as a resource at www.nursinghealthpolicy.org. We will request that attendees sign releases at registration.

Conference Contact Information

For general information or assistance, contact Michelle Casias, RWJF Collaborative Program Manager, by phone at 505-417-1785 or email at mrcasias@salud.unm.edu, or Antoinette Sabedra, RWJF Collaborative Program Coordinator, at 505-270-8458 or email at asabedra@salud.unm.edu.



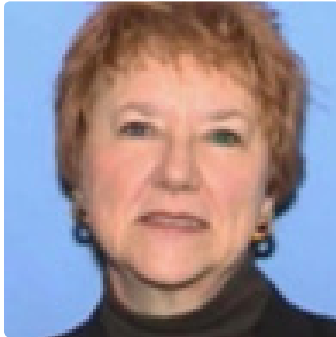
Robert Wood Johnson Foundation Background

For more than 40 years the Robert Wood Johnson Foundation has worked to improve health and health care. We are striving to build a national Culture of Health that will enable all to live longer, healthier lives now and for generations to come. For more information, visit www.rwjf.org. Follow the Foundation on Twitter at www.rwjf.org/twitter or on Facebook at www.rwjf.org/facebook.



Biographies

Co-Chairs



***Dr. Carol A. Lockhart, PhD, RN, FAAN**

Dr. Lockhart is president of C. Lockhart Associates, a health systems relations and policy consulting firm that assists local, national, and international organizations with planning, implementing, and evaluating health and public health policy and program change. Dr. Lockhart teaches health economics and health policy as Professor in the University of Tennessee Health Science Center, College of Nursing Doctor of Nursing Practice distance-learning program. She was a director in the Arizona Department of Health Services and served as the first director of the Arizona Health Care Cost Containment System. She also served as one of the original 13 commissioners appointed to the Physician Payment Review Commission (PPRC) to advise Congress on payments to physicians under Medicare. Dr. Lockhart received a Pew Health Policy Fellowship to pursue her doctoral studies in health policy at the Heller School at Brandeis University. Her MS is from the University of California at San Francisco, and her BS is from Case Western Reserve University, Bolton School of Nursing.



***Sally S. Cohen, PhD, RN, FAAN**

Dr. Cohen has been at the forefront of initiatives that prepare nurses as leaders in health policy making. She has directed the public policy and research initiatives at the National League for Nursing and has organized nurses at the state level to lobby for revisions to nurse practice acts and managed care regulations to expand access to care. Before coming to the University of New Mexico in 2009, Dr. Cohen was a tenured faculty member at Yale University School of Nursing, where she established and directed the Nursing Management, Policy and Leadership Specialty. Her book *Championing Child Care* (2001) analyzes the politics of federal child care policy making from 1970 to 2000. Dr. Cohen is Editor-in-Chief of *Policy, Politics & Nursing Practice*. She holds a BA in International Relations from Cornell University, an MSN from Yale University, and a PhD in Public Health and Political Science/American Government from Columbia University.

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Speakers



Eileen T. Breslin, PhD, RN, FAAN

Dr. Breslin has been Dean of the School of Nursing at the University of Texas Health Science Center in San Antonio since 2008. Previously, she was Dean of the School of Nursing at the University of Massachusetts–Amherst, where she instituted a doctoral degree in nursing practice, a clinical nurse leader program, and a dual master of science and master of public health program, all firsts in the state. Dr. Breslin is President of the American Association of Colleges of Nurses and a fellow of the American Academy of Nurses and the American Academy of Nurse Practitioners. She received her Bachelor of Science degree from Northern Arizona University, her women's health care practitioner certification from the University of New Mexico, her master's degree in maternal-newborn nursing from the University of Arizona, and her PhD in nursing from the University of Colorado Health Sciences Center in Denver, Colorado.



Michael A. Carter, DNSc, DNP, FAAN, FNP/GNP-BC

Dr. Carter serves as Adjunct Clinical Professor at the University of Arkansas for Medical Sciences College of Medicine, Department of Geriatrics, and as Adjunct Professor of Nursing and Midwifery at Curtin University, Perth, Australia. He is also Chair of the Board of Directors of Frontier Nursing University. Previously, he served as Dean and Professor at the College of Nursing, University of Tennessee Health Science Center, where he is currently a University Distinguished Professor. He holds national certification as both a family nurse practitioner and geriatric nurse practitioner, is a Fellow of the American Academy of Nursing, a Distinguished Practitioner and Fellow of the National Academies of Practice, and a Diplomate in Comprehensive Care. He completed a Fellowship in Primary Care Health Policy the United States Public Health Service and served as a Visiting Professorial Fellow at Curtin University and the Western Australia Department of Health in Perth, Australia.



Susan Chapman, PhD, RN, FAAN

Dr. Chapman is Associate Professor in the Department of Social and Behavioral Sciences, University of California, San Francisco, School of Nursing, and Faculty Affiliate at the Center for Health Professions and the Institute for Health Policy Studies. She is Co-Director of the master's and doctoral programs in Health Policy at the School of Nursing. Her scholarly work focuses on health workforce research, health policy analysis, and program evaluation. Her workforce research focuses on transforming models of primary care to address health reform, education, and new roles for allied health workers. She served on a study committee for the Institute of Medicine (IOM) on the health care workforce for an aging U.S. population and chaired an IOM workforce on the allied health professions. She received her BS from the University of Iowa, her MS from Boston College, her MPH from Boston University, and her PhD from UC Berkeley.



Pamela F. Cipriano, PhD, RN, NEA-BC, FAAN

Dr. Cipriano is the 35th president of the American Nurses Association. She previously served as Senior Director for Health Care Management Consulting at Galloway Advisory by iVantage. She currently holds a faculty appointment as Research Associate Professor at the University of Virginia School of Nursing. Dr. Cipriano is known nationally as a strong advocate for health care quality and serves on a number of boards and committees, including the National Quality Forum and the Joint Commission. Dr. Cipriano was the 2010–11 Distinguished Nurse Scholar-in-Residence at the Institute of Medicine. She was the inaugural Editor-in-Chief of *American Nurse Today* from 2006–14. Dr. Cipriano holds a PhD in Executive Nursing Administration from the University of Utah College of Nursing, a Master of Nursing degree in Physiological Nursing from the University of Washington, and a Bachelor of Science in Nursing degree from American University.



***Carol Hall Ellenbecker, PhD, RN**

Dr. Ellenbecker is a Professor of Nursing and Health Policy at the University of Massachusetts Boston, College of Nursing and Health Sciences, where she teaches, conducts research and mentors PhD students. Dr. Ellenbecker's research expertise includes conducting large surveys with representative samples, instrument development, and model testing. Her research has implications for improving the work environment for nurses, developing policies for retaining nurses and for improving the quality of patient care. She experienced national policy development first hand during a sabbatical at the National Association of Home Care and a fellowship at the Center to Champion Nursing in Washington D.C. Dr. Ellenbecker received her BSN from the University of New Mexico, her MSN from Boston College, and her PhD from Brandeis University.



Barbara Damron, PhD, RN, FAAN

Dr. Damron has been at the forefront of initiating health policy into all segments of oncology. She has established health policy programs with the American Cancer Society, Oncology Nursing Society, and state nursing associations. Before joining the University of New Mexico, Dr. Damron worked with state legislators in Texas to establish and fund the Texas Cancer Council. There, she developed, obtained legislative funding, and implemented the nation's first statewide comprehensive cancer nursing education program in the country, the Texas Cancer Council's Nurse Oncology Education Program. She now directs the Office of Community Partnerships & Cancer Health Disparities at the University of New Mexico Cancer Center (UNMCC). Dr. Damron also serves as the Director of Government and Community Advocacy at the UNMCC, working with New Mexico's congressional leadership and state legislators on oncology policy.

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Susan B. Hassmiller, PhD, RN, FAAN

Dr. Hassmiller joined the Robert Wood Johnson Foundation (RWJF) in 1997 and is presently the Senior Adviser for Nursing. She also serves as Co-Director of the Future of Nursing Scholars program. In partnership with AARP, Dr. Hassmiller directs RWJF's Future of Nursing: *Campaign for Action*, which strives to implement recommendations from the Institute of Medicine's *Future of Nursing* report. Dr. Hassmiller serves as the report's study director. Previously, she was a member of the National Board of Governors for the American Red Cross, serving as Chair of the Disaster and Chapter Services Committee. She is now a member of the National Nursing Committee and is the Board Chair for the Central New Jersey Red Cross. Dr. Hassmiller served with the Health Resources and Services Administration as Executive Director of the U.S. Public Health Service Primary Care Policy Fellowship. She taught public health nursing at the University of Nebraska and George Mason University in Virginia.



***Harry J. Heiman, MD, MPH**

Dr. Heiman is Director of Health Policy at the Satcher Health Leadership Institute and Assistant Professor of Family Medicine at Morehouse School of Medicine in Atlanta. He is board certified in family medicine and a Fellow of the American Academy of Family Physicians. He received his medical degree from the University of Cincinnati College of Medicine and his master's degree in public health from the Rollins School of Public Health at Emory University. From September 2012 to August 2013, Dr. Heiman was a Robert Wood Johnson Foundation Health Policy Fellow in Washington, D.C., and served on committee staff for the House Energy and Commerce Committee in the U.S. House of Representatives under Ranking Member Henry Waxman. Dr. Heiman's areas of interest and expertise include health policy, health disparities, and health system transformation.



Diana J. Mason, PhD, RN, FAAN

Dr. Mason is the Rudin Professor of Nursing and Co-Founder and Co-Director of the Center for Health, Media, and Policy at Hunter College, City University of New York. She is president of the American Academy of Nursing and serves as Strategic Adviser for the *Campaign for Action*, an initiative to implement the recommendations from the Institute of Medicine's *Future of Nursing* report, to which she contributed. Dr. Mason is also a journalist who has produced and moderated a weekly radio program on health and health policy for almost 30 years. She served as Editor-in-Chief of the *American Journal of Nursing* for more than a decade and serves on the National Advisory Committee for Kaiser Health News. The author of more than 200 publications, she is the lead co-editor of the award-winning book, *Policy and Politics in Nursing and Health Care* and of *The Nursing Profession: Development, Challenges, and Opportunities*.

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***Suzanne Miyamoto, PhD, RN**

Dr. Miyamoto is Senior Director of Government Affairs and Health Policy at the American Association of Colleges of Nursing. She leads the association's advocacy work focused on advancing nursing education, research, and practice to promote a cost-effective, high-quality health care system. She is the Convener for the Nursing Community, a coalition of 62 national nursing organizations that collaborate on a wide spectrum of health care policy issues. Dr. Miyamoto was selected as a Robert Wood Johnson Foundation Executive Nurse Fellow for the 2014 cohort. She is Adjunct Assistant Professor at Georgetown University, School of Nursing and Health Studies, and at the University of Maryland, School of Nursing. Dr. Miyamoto received her Bachelor of Science in Nursing, Bachelor of Arts in Psychology, Master of Science in Nursing, and Doctor of Philosophy in Nursing from the University of Michigan, Ann Arbor.



***G. Adriana Perez, PhD, RN, ANP, FAAN**

Dr. Perez is Assistant Professor, Southwest Borderlands Scholar, and Co-Director of the Hartford Center of Gerontological Nursing Excellence at Arizona State University. She was selected as a Congressional Health and Aging Policy Fellow, supported by the Centers for Disease Control and Prevention Healthy Aging Program. Dr. Perez's commitment to addressing health disparities is evident in her work with the Future of Nursing: *Campaign for Action*. She consults with state action coalitions in developing sustainable diversity action plans. She is president of the National Association of Hispanic Nurses-Phoenix, an appointed member of the American Organization of Nurse Executives Board of Directors and UnitedHealth Group External Nursing Advisory Board, and has served as founding Chair of the Hartford Gerontological Nursing Leaders.



***Harold Pollack, PhD**

Dr. Pollack is the Helen Ross Professor at the University of Chicago, School of Social Service Administration. He is also Co-Director of the university's Crime Lab and an Executive Committee member of the Center for Health Administration Studies. A 2012–2014 Robert Wood Johnson Foundation Investigator in Health Policy Research, Dr. Pollack has been appointed to three committees of the National Academy of Sciences. He received his undergraduate degree in Electrical Engineering and Computer Science from Princeton University. He holds master's and doctoral degrees in Public Policy from the Kennedy School of Government, Harvard University. Dr. Pollack was a Robert Wood Johnson Foundation Scholar in Health Policy Research at Yale University and taught Health Management and Policy at the University of Michigan School of Public Health.

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Susan C. Reinhard, PhD, RN, FAAN

Dr. Reinhard is Senior Vice President at AARP, directing its Public Policy Institute. She also serves as the Chief Strategist for the Center to Champion Nursing in America at AARP. She is a nationally recognized expert in health and long-term care policy, with extensive experience in conducting, directing and translating research to promote policy change. Prior to AARP, Dr. Reinhard served as a Professor and Co-Director of Rutgers Center for State Health Policy, where she directed several national initiatives to work with states to help people with disabilities of all ages live in their homes and communities. She served three governors as Deputy Commissioner of the New Jersey Department of Health and Senior Services. She also co-founded the Institute for the Future of Aging Services in Washington, D.C., and served as its Executive Director of the Center for Medicare Education.



Nancy Ridenour, PhD, APRN, BC, FAAN

Dr. Ridenour is Dean and Professor at the University of New Mexico (UNM) College of Nursing. She was a Robert Wood Johnson Health Policy Fellow with the Committee on Ways and Means in the U.S. House of Representatives. She continues her health policy work at UNM by heading up the Health Policy Council and contributing to the Nursing and Health Policy Collaborative at the College of Nursing. She is an expert in health workforce and health care reform. She previously served as Dean and Professor at the College of Nursing at Illinois State University, Associate Dean at Texas Tech Health Sciences Center, and Assistant Professor at the University of Colorado. She is a certified family nurse practitioner and has held leadership positions in the American Nurses Association, American Association for the Advancement of Science, American Public Health Association, Sigma Theta Tau International Honor Society of Nursing, Society of Primary Care Policy Fellows, and National Organization of Nurse Practitioner Faculties.



Gabriel R. Sanchez, PhD

Dr. Sanchez is Associate Professor of Political Science at the University of New Mexico and Executive Director of the Robert Wood Johnson Foundation Center for Health Policy at UNM. He is also Director of Research for Latino Decisions and Director of the American Economic Association Summer Training Program. His research explores the relationship between racial/ethnic identity and political engagement, Latino health policy, and minority legislative behavior. He is a co-author of *Hispanics and the U.S. Political System*, one of the most popular Latino politics textbooks in colleges today, and has a forthcoming book focused on the role of Latinos in the 2012 elections. Dr. Sanchez has also been the principal investigator or co-principal investigator for several national and state surveys focused on health care attitudes. He received his PhD from the University of Arizona.



***Julie A. Sochalski, PhD, RN, FAAN**

Dr. Sochalski is Associate Professor of Nursing, Senior Fellow at the Leonard Davis Institute of Health Economics, and Affiliated Faculty at the Penn-Wharton Public Policy Initiative at the University of Pennsylvania. From 2010 to 2013, she served as Director of the Division of Nursing and Principal Advisor for Health Workforce Policy at the Health Resources and Services Administration at the U.S. Department of Health and Human Services. Dr. Sochalski's work has been focused on elucidating the workforce inputs into high-quality, affordable care and designing policy initiatives to promote health care workforce reforms needed to achieve that goal. She has investigated domestic and international trends in the health care workforce, workforce shortages, and migratory patterns of health workers, and has collaborated internationally to develop policy recommendations for building an appropriately prepared international health care workforce.



Virginia Trotter Betts, JD, MSN, RN, FAAN

Virginia Trotter Betts is an internationally recognized leader in health and mental health care and policy and has been involved in health care as a clinician, administrator, educator, researcher, and policy activist. She currently is President and CEO of HealthFutures, Inc. Ms. Betts served as Senior Advisor on Nursing and Policy to the Secretary and Assistant Secretary of Health of the U.S. Department of Health and Human Services, working with Donna Shalala and David Satcher on health care workforce and mental health initiatives. She served as Commissioner of Tennessee's Department of Mental Health and Developmental Disabilities and was the first nurse to serve as a member of a Governor's Cabinet in Tennessee. She is a psychiatric nurse and attorney who completed postdoctoral studies in health policy at the Institute of Medicine as a Robert Wood Johnson Health Policy Fellow. She also has had a rich academic career at Vanderbilt University's School of Nursing, Vanderbilt Institute for Public Policy Studies, and University of Tennessee Health Sciences Center.



Makani Themba

Makani Themba is Executive Director of The Praxis Project, a nonprofit organization helping communities to use media and policy advocacy to advance health justice. Under her leadership, The Praxis Project has raised more than \$20 million for advocacy organizations nationwide. These initiatives include *Communities Creating Healthy Environments*, a program of the Robert Wood Johnson Foundation to support policy advocacy to advance healthy food outlets and safe places to play in communities of color. Ms. Themba has published numerous books and articles on race, media, policy advocacy, and public health. She is author of *Making Policy, Making Change* and co-author of *Media Advocacy and Public Health: Power for Prevention and Talking the Walk: Communications Guide for Racial Justice*. Her latest book is *Fair Game: Racial Justice Communications in the Obama Era*.

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RWJF Nursing and Health Policy Collaborative Administration



Shana Judge, JD, PhD

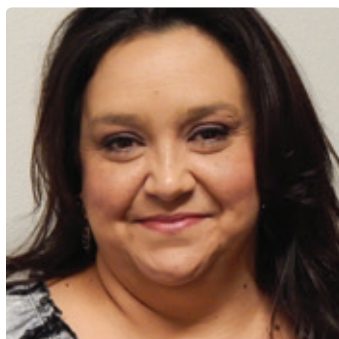
Dr. Judge is a public policy researcher whose work focuses on using quantitative methods to analyze relationships between government policies and the health and well-being of women and children. She served as a Postdoctoral Research Associate at the Taubman Center for Public Policy & American Institutions at Brown University and also worked as an attorney in public, private and nonprofit sectors. Dr. Judge received a Juris Doctor degree from the University of New Mexico School of Law, Master of Arts degree in political science from the Catholic University of America, Master of Public Policy degree from Duke University, and PhD degree in Public Policy from the University of North Carolina at Chapel Hill.

RWJF Nursing and Health Policy Collaborative Staff



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RWJF Nursing and Health Policy Collaborative at the University of New Mexico

Program Overview

The Robert Wood Johnson Foundation Nursing and Health Policy Collaborative is preparing a new generation of nurses with PhDs to meet our nation's health policy challenges. The faculty and fellows of the Collaborative engage in policy research to address the health care needs of Americans, including the nation's most vulnerable populations.

Based in Albuquerque at the University of New Mexico College of Nursing, the Collaborative is a partnership with the Robert Wood Johnson Foundation that builds the capacity of nurse leaders to engage as full partners with other professions in research, analysis, development, and advocacy of national health policy. The Collaborative is strongly committed to increasing diversity in nurse leadership and health policy.

The Collaborative offers a unique interdisciplinary focus, bringing together scholars and experts from both clinical and social sciences, and engaging in partnerships with other health professionals, researchers, community leaders, and policy-makers. We work with our colleagues at the Robert Wood Johnson Foundation Center for Health Policy, also located at the University of New Mexico, to provide faculty and fellows opportunities for learning from both social scientists and health professionals.

Poster Session Abstracts

After being de-identified, the abstract submissions were reviewed by a subcommittee of the Conference National Planning Committee. The subcommittee selected abstracts based on their potential to contribute to the conference objectives and on whether the abstracts addressed one of the following categories:

- A. Outcomes of student work in policy analysis or policy evaluation research.
- B. Programs to educate and inform faculty for preparation in teaching health policy.
- C. Case studies of nurses who have informed laws, regulations, or judicial decisions.
- D. Best practices for implementing and evaluating health policy internships.
- E. Interdisciplinary scholarship to advance the broader social, economic, political, and cultural aspects of health.
- F. Innovative approaches or frameworks for integrating health policy into doctoral nursing curricula or programs.

The number listed next to the title of each abstract corresponds to the location of the poster that presents the abstract.

1. “Innovative Education”: Incorporating an Advocacy Case Study Project into a Health Policy Course for Doctoral Nursing Students

JOY ELWELL, Associate Clinical Professor, the University of Connecticut

This poster presentation addresses category F, “Innovative approaches or frameworks for integrating health policy into doctoral nursing curricula or programs.” The purpose of this poster presentation is to demonstrate an innovative approach in building advocacy into the curriculum of a doctoral level Health Policy course. This author teaches Health Policy at the University of Connecticut (UConn). Having significant experience in health policy at both the state and national levels, and having helped draft, and pass practice-improving legislation, this author grasped the importance of imparting to doctoral nursing students both how health policy can impact nursing, and how nursing can impact health policy. To truly make advocacy a reality, this author designed an innovative health policy case study assignment to satisfy a majority portion of the course’s requirements. In this assignment, the students were advised, at the course outset, that they would identify a state-, or federal-level health policy issue affecting nursing. They would research the issue and write a scholarly paper on the issue. They would also identify the appropriate legislator to lobby on the issue. They would set up a lobbying visit with the legislator’s office, make a legislative visit, lobby the legislator and/or the legislative staff, and write up a case study with reflections on their experience. They would include a photograph taken at the legislative visit of themselves with the legislator, or the legislative staff. This project is consistent with the Kingdon model of policy analysis and the principles of Knowles’ theories on adult learning. It requires the student to research not only the issue at hand, but also advocacy, lobbying, and further, to step beyond the readings, operationalizing lessons learned into action, and finally, to see the potential roles they, as nurses, can play in influencing health policy.

2. Secondary Data Analysis Examining the Impact of Nurse Practitioner Practice Regulation on Access to Care in the Medicare Population

SUMMER CROSS, Faculty/Assistant Professor, Murray State University, School of Nursing and Health Professions

Purpose: To examine the relation between state NP practice regulations (Full, Reduced, and Restricted)¹ and access to care in the Medicare population.

Design: Secondary data analysis of the Medicare Current Beneficiary Survey, Access to Care 2011 dataset. Data were collected during the fall 2011 interview session, which represented a cross-sectional sample.²

Method: An observational method was used to examine the impact of state NP practice regulations on access to care (appointment waiting times, difficulty accessing care, and usual source of care). SAS survey procedures were used to apply Taylor series weights to make results representative of the Medicare population ($N = 15,027$, weighted cases = 45,205,096). Andersen's Theoretical Framework for Measuring Access to Medical Care was used to theoretically and operationally define access.³

Results: Time to get an appointment was increased in Full NP practice states. No significant effect was seen in time spent waiting at an appointment to see a provider. Difficulty encountered accessing care was statistically significant, with more participants in Full NP practice states having difficulty getting to the provider office. Participants in Restricted and Reduced states were more likely to have trouble with cost. No significant effect was seen for usual source of care.

Conclusions: Limitations included lack of control over primary data collection and missing data. Further research is needed to compare access before and after NP practice regulation changes and explore access in other populations.

3. Ethical Considerations and Health Policy in a DNP Program

SUSAN B. MATT, Associate Professor, Chair, Adult Health Department, Seattle University, College of Nursing
JANIECE DESOCIO, Associate Professor, Director, DNP Program, Seattle University, College of Nursing

As a Jesuit institution, Seattle University is dedicated to the moral and ethical formation of our students. With this in mind, our approach to the integration of health policy in our DNP program incorporates the ethical perspective. Our course has been taught for the past two years to our DNP students, but has been part of our master's level advanced practice nursing programs for more than 10 years. With the advent of the DNP program, we fortified our objectives to meet the DNP Essentials as outlined by the AACN. The title of the course is "Ethical Considerations and Health Policy." The theme of the course is the ethical analysis of health policy, and we weave ethical principles and moral theories through the course, using case studies to encourage students to view policy through the lens of ethics. Generally, the students think about policy from a utilitarian vs. Kantian perspective, determining whether the policy results in the most good for the most people or if it is based on inherent right versus wrong. They look at social justice issues, particularly with respect to access to care and women's health. They consider the principles of beneficence and non-maleficence in end-of-life and pain management policies, among others. Decision-making policies are approached from the perspective of patient autonomy versus paternalism, particularly with respect to abortion policies, genetic testing policies, and policies related to sex and gender reassignment. The AACN states that the DNP program should prepare the graduate to "[a]dvocate for social justice, equity, and ethical policies within all healthcare arenas" (p. 14). We believe that using an ethical framework for developing, implementing, evaluating, and analyzing health policy is one way to ensure that our graduates continue to keep ethics at the forefront of their practices.

4. Inspire, Ignite, and Get Involved

STEPHANIE BURGESS, Associate Dean for Practice, Clinical Professor, Director, University of South Carolina, College of Nursing

JEANNETTE ANDREWS, Dean and Professor, University of South Carolina, College of Nursing

Required for all DNP students and offered as an elective to students from other health professional doctoral programs, the online Health Policy Course taught by College of Nursing Faculty offers unique approaches for student learning outcomes. The purpose of the course is to analyze issues and forces affecting health delivery through the public and private sector. Students are divided into groups (called lobbying firms) of four to five for the semester. After the Firm develops and executes a Firm contract, they focus on two main projects: 1) develop a political campaign for one of their group members running for state senate and 2) devise legislation regarding a health care issue or scope of practice issue that directly impacts three contiguous counties they are assigned to assess for a host of factors, including economic development, healthcare infrastructure, and social determinants. Students apply negotiation, budgeting, project management, networking, persuasive writing, leadership, public relations, lobbying, conflict management, debate, and multimedia technology. In addition to the faculty evaluation of the students' work, students evaluate and vote on each other's work. Interestingly, they apply strategies to those team members who may be less than energized to contribute. Since 2009, outcomes demonstrate that students find course projects are relevant (96.5%), acquire real-life skills in health policy (97%), and the political internship is meaningful (93%). Additionally, 95% to 100% of students report that the projects greatly enhance their understanding of the legislative process. Ninety percent to 95% report that the projects increase their willingness to become involved in the campaign process or run for office. As a side bar, in the subsequent years one student ran for a local school board, one student ran for coroner, and approximately 22 students have become very active in their NP or State Nurses Associations, running for various offices.

5. The Integration of Health Policy into a Doctorate in Nursing Science Program

GENIE E. DORMAN, Professor of Nursing, WellStar School of Nursing, Kennesaw State University

MARY DE CHESNAY, Professor of Nursing, WellStar School of Nursing, Kennesaw State University

This poster will describe a stand-alone course designed to integrate health policy into a doctorate in nursing science (DNS) program. This course provides an orientation to various analytical and substantive components fundamental to health policy. Students develop skills in analysis, application, evaluation and development of policies related to public health with a focus on issues related to inequalities in health services such as access, costs, utilization, and rationing. Health care policies, methods, and delivery systems are compared within developed and developing countries. Real situations are examined in which specific policy decisions are made by public and private health officials.

Course content includes:

- historical, political, economic, and cultural context of health policy;
- politics and policy in the context of health disparities;
- principles and consequences of health policy-making;
- examination of health policy in local and global contexts; and
- formulation of solutions to specific health policy problems.

Course objectives include:

- understand historical, political, economic and cultural contexts of policy-making in health;
- describe how politics and public health policies affect health disparity in both local and global populations;
- explicate the principles that can be used to make reasonable policy choices;
- evaluate the major consequences of a specific health services policy problem;
- apply principles in health policy to a specific substantive area of public health or health care services; and
- formulate and justify a solution to a specific health services policy problem

Students accomplish these objectives utilizing a participatory action research (PAR) approach conducting a literature review and appropriate fieldwork in an area of interest resulting in potentially publishable paper. Human trafficking, herbal supplements, childhood obesity, aging in place, prevention of youth violence with firearms, funding for immigrants and refugees, homelessness programs, and the promotion of collegiate civility are previously selected topics.

6. A Literature Approach to Interface Doctoral Health Policy Concepts

JOYCE SCARPINATO, Assistant Dean of Advanced Practice, SUNY Upstate Medical University, College of Nursing
MELANIE KALMAN, Advance Practice Professor, SUNY Upstate Medical University, College of Nursing

Background: Advocacy through Healthcare policy (HP) (AACN, 2006) is a Doctor of Nursing Practice (DNP) essential competency statement. Florence Nightingale historically demonstrated the important role of political activism in nursing through her work and today's nurse leaders have continued that tradition. Nursing must continue to educate DNP students on the concepts of social justice, advocacy, and HP to improve patient outcomes. At the first class students shared that they felt HP lacked relevancy to their practice.

Approach: An assignment in the DNP HP class was to read a book chosen by the faculty that pertained to HP. Students were assigned books two weeks before the class to allow time to read between semesters. In class each student gave a summary of the assigned book and discussed social justice and advocacy and the book's relation to HP. Book discussions were facilitated by students assigned to the book. The books included, but were not limited to, *The Spirit Catches You and You Fall Down*, *House on Fire*, and *And the Band Played On*.

Outcomes: The book discussions were effective and insightful in addressing the DNP competency by motivating students in social justice, advocacy, and HP to improve patient outcomes. Students evaluated the assignment as *very helpful*. Unexpectedly students read more than one book after the book seminar presentation and continued to discuss the books with their student colleagues. After reading the books the students were motivated to become involved in HP change for their population of interest.

Conclusion: Using the literature is motivating when educating doctorally prepared nurses. The literature provided a method for students to process and identify skills needed to effectively advocate for social justice and to enable change in HP to improve patient outcomes.

7. Health Policy & Palliative Care Minor Program

NANCY DUDLEY, Doctoral Student Nursing Health Policy, University of California, San Francisco
DORANNE DONESKY, Associate Adjunct Professor, University of California, San Francisco
SUSAN CHAPMAN, Associate Professor, University of California, San Francisco

Purpose: Health policy is an important component of the palliative care minor program. A health policy approach allows doctoral students to examine the individual determinants and health system characteristics associated with access to care.

Aims: An understanding of the factors associated with access to community-based palliative care is essential to analyze the workforce demand and the education needed to deliver quality care.

- The demand for community-based palliative care has increased.
- Older adults nearing the end-of-life are living longer with advanced illness, and have unmet palliative care needs.
- A higher level of interprofessional care is needed to manage complex symptoms, difficult family situations, and challenging care decisions.
- Barriers exist in access to palliative care due to workforce shortages, stigma associated with the term palliative care, and late referrals.
- Employers are expressing the need for trained palliative care professionals.

Implementation: Impaired access to community-based palliative care may have negative health consequences. Limited access to needed supportive symptom management and care coordination is associated with fragmented care, and unsustainable growth in costs. A workforce not trained or skilled in palliative care may result in late referrals.

Outcomes: Palliative care has moved upstream from end-of-life care. Establishing triggers for early referral, defining the processes of care for co-management by primary care providers and the palliative care team, and educating the workforce about primary palliative care are necessary to facilitate access to care.

Implications for Health Policy Education: Interprofessional and interdisciplinary collaborations and strategies are needed to address individual determinants and health system factors associated with access to community-based palliative care. Integrating health policy into the Palliative Care Minor Program provides an approach for doctoral students to explore the facilitators and barriers to access care, to deliver effective and efficient quality care.

8. Collaborating in a State Health Policy Forum to Prepare the Next Generation of Healthcare Providers and Policy Makers

JEAN EDWARD, Assistant Professor, College of Nursing Health Sciences, University of Massachusetts Boston

Integrating policy into doctoral nursing programs is an essential component of the curriculum. The purpose of this poster is to present best practices for collaboration in an interdisciplinary, state-level, health policy forum aimed at preparing future participants in the policy process. Seven graduate schools in eastern Massachusetts collaborate along with the Massachusetts Health Policy Forum, to plan, implement and evaluate a two-day intensive student health policy forum. The forum has expanded over eight years with support from Blue Cross Blue Shield as well as several area academic teaching centers. Seven graduate students from each participating school representing multiple disciplines including business, social work, gerontology, medicine and nursing, apply and are selected to participate. The forum convenes at the Massachusetts State House and later moves on to other state office locations. Presenters include elected officials, a state Senator and Representative, legislative staffers, Directors of various state agencies, such as the Departments of Public and Mental health, the State Insurance Commissioner, as well as members of the State Business Forum and media reporters. The Forum offers our doctoral students the opportunity to increase their understanding of the legislative process, insurance and cost containment strategies, meet with a panel of expert policy makers, analysts and implementers across the State, and network with their future colleagues in the health policy process. Students have made valuable connections, some resulting in internships or others opportunities that pave the way for future careers and research opportunities in policy. We have observed increased excitement and awareness of the policy process among doctoral nursing students and an understanding of the important role they might play. Health policy forums provide opportunities to bring students into the realm of the policy world while inspiring them to be an integral part of the policy process.

9. Policy Lessons: A Case Study in Achieving Independent Practice

CAROLYN MONTOYA, Associate Professor and Interim Chair Practice Team, University of New Mexico, College of Nursing

In 1969, Martha Schwebach, RN, began seeing patients as a Family Nurse Practitioner (FNP) at Hope Medical Center in Estancia, New Mexico ("New Mexico Hamlet," 1969). At that time, the N.M. nurse practice act did not include any statutes, much less regulations, related to the scope of practice for nurse practitioners. Ms. Schwebach was part of the N.M. School of Medicine's pilot program that trained nurses to provide an expanded level of care in rural communities. Flash forward to 1993 when nurse practitioners (NPs) in New Mexico achieved independent practice, full prescriptive authority, and were recognized as primary care providers. As of 2014 Nurse Practitioners (NPs) have full scope of practice in 16 states plus the District of Columbia; reduced practice in 21 states; and restricted practice in 13 states (Phillips, 2014). In 2010 the Institute of Medicine recommended that nurses should practice to the full extent of their education and training. The purpose of this presentation is to:

1. demonstrate the use of a case study (New Mexico campaign for independent practice) as an effective means of presenting policy concepts (coalition building; use of supporting data; influence of outside forces) in a PhD or DNP curriculum.
2. present successful strategies that will help prepare students to shape policies in other states seeking to expand their scope of practice for nurses.

Professional strengths (i.e., white papers supporting full scope of practice for NPs; Future of Nursing: *Campaign for Action*) will be emphasized as a policy strategy to deal with the challenges and barriers faced by states attempting to increase scope of practice laws. Literature relevant to nursing scope of practice will be included as an exemplar of using data for policy briefs.

10. Private Insurance Coverage under the ACA: Implications for Children with Special Health Care Needs (CSHCN)

EILEEN K. FRY-BOWERS, Associate Professor, School of Nursing, Loma Linda University

Purpose: To analyze specific provisions of the Patient Protection and Affordable Care Act of 2010 (ACA) that influence private insurance coverage for CSHCN, and make recommendations for practice and advocacy.

Background: The majority of CSHCN are covered by private insurance. Changes to the private insurance market under the ACA have the potential to significantly impact health outcomes for large numbers of CSHCN in unforeseen ways. Further, since a great deal of the enforcement of the ACA falls to states, how individual states interpret, implement and manage its provisions will determine access to care and ultimately, the effectiveness of this federal legislation.

Process: Specific provisions of the ACA and corresponding implementation regulations were examined for their effects on private insurance coverage for CSHCN. A comprehensive literature review, interviews with stakeholders and exploration of contextual factors informed analysis.

Outcomes: The ACA represents a major transition in health care financing and delivery and although it was not written with children in mind, many of its provisions will affect children, including CSHCN. Chiefly, the “essential health benefits” (EHB) package of private plans sold in state market places may fall short of meeting the unique needs of CSHCN, especially for access to habilitative services. Moreover, current rules defining network adequacy for “qualified health plans” (QHP) may limit access to pediatric subspecialty care thus fragmenting care.

Recommendations: States have a primary role in defining private plan EHB and in guaranteeing QHP network adequacy. Pediatric providers should work with families to identify “gaps” in the system. Additionally, they must educate state policy makers about the effect of their decisions on access to care for CSHCN. As high utilizers of health care services, how CSHCN fare under the ACA will serve as an important test of the success of the ACA in meeting the needs of all children.

11. Legislative Action Interest Group – An Interdisciplinary Collaboration Supporting Nurse Participation in Health Policy - A Case Study

ASHLEY WADDELL, Doctoral Student, Program of Nursing and Health Policy, University of Massachusetts Boston

AMY JUDGE DELONG, Manager, Federal Government Relations, Boston Children's Hospital

KATHRYN AUDETTE, Director of State Government Relations, Boston Children's Hospital

The purpose of this poster is to present a case study of Boston Children's Hospital's (BCH) approach to engaging nurses in health policy. The Nursing Legislative Action Interest Group (LAIG) at BCH, co-chaired by the Department of Nursing and the Office of Government Relations, is an innovative model, designed to encourage professional development among nurses and leverage clinical expertise in the policymaking arena. Nursing participation includes staff from medical, surgical and procedural settings. Government Relations participation includes staff working on policy at the community, state and federal levels. This dialogue allows the experiences of BCH nurses to inform the hospital's legislative agenda. It provides a foundation for nurses to participate in the legislative process and develop advocacy skills. Outcomes include nurse attendance at more than 20 legislative hearings and regulatory sessions, delivery of testimony at high profile hearings, covering such topics as the Nurse Licensure Compact, scope of practice limitations, mandatory overtime and staffing ratios. LAIG members have participated in congressional meetings in Washington, D.C. Nurses have used skills developed through LAIG participation to increase and deepen their presence in external professional organizations, often contributing to advocacy agenda and strategy development, policy analysis, and preparation of position statements. Nurses have clinical and experiential knowledge of value to policymakers; however they may lack the skills or understanding about how to bring this knowledge to a government setting. LAIG assists nurses in understanding the nuances of public policy and offers access to government relations experts to help shape and deliver their message. This is critical to ensuring nursing influence in the transformation of our health care system. The model can be applied in other clinical settings and nursing doctoral programs, where students learn the policy analysis and advocacy skills needed to effect change through sharing nursing research and practice expertise.

12. Political Activism in a DNP Health Policy Course

MARY ROCK, Clinical Assistant Professor, University of Southern Indiana

Currently the American healthcare system is on the precipice of massive changes with the enactment and continual revisions of the Affordable Care Act. Furthermore, today's politicians and policymakers are more polarized than they have ever been in recent history. There is no better time than now to promote DNP students to become involved and advocate for their patients, their work environments, and for the profession of nursing. The *Essentials of Doctoral Education for Advanced Nursing Practice* (2006) emphasize that DNPs have a duty to embrace political activism and policy development as they are central components of professional nursing practice. DNP students were exposed to policy content in a course entitled "Healthcare Policy and Strategic Planning" led by a nurse attorney. To promote student interaction with legislators, an assignment was developed requiring Health Policy Memo development, identifying an issue relevant to the student's community or clinical practice. The Memo included discussion and significance of the healthcare issue, identification of formal governmental decision makers or political interest groups related to the issue, possible solutions to the issue, and student recommendations for action to their representatives. Following completion of the assignment, an email of thanks which reaffirmed the student's request for action was sent to the representative. Lastly, experiences with senators and representatives were shared with colleagues on a Discussion Board.

Feedback related to the assignments was positive. Although many students were hesitant and nervous to meet their representatives, they were pleased and surprised their representatives were approachable and treated the students as experts in their fields. Many students gained confidence in their ability to understand complex healthcare issues and vowed to stay involved in healthcare policy. One student was invited to appear before the Committee to inform representatives about her relevant healthcare bill when the Indiana General Assembly reconvened.

13. Teaching Health Policy in Nursing Curriculum: A Literature Review

ELIZABETH DICKSON, RWJF Nursing and Health Policy Fellow, University of New Mexico, College of Nursing

Objective: The purpose of this literature review is to summarize models for teaching health policy to nursing students.

Summary: There is no shortage to the literature documenting the importance of health policy involvement by nursing. Since the 1970s and 1980s, nurse leaders have advocated for more nurse involvement at the policy level. Today, "health care policy for advocacy" is listed as an essential by The American Association of the Colleges of Nursing for accredited nursing programs. The changing health care landscape demands that academia facilitate the health policy fluency essential for nurses at all levels of education, practice and research. The literature provides multiple examples of how health policy can be taught and what policy experiences are most effective for baccalaureate, masters, and doctoral nursing students. This review will summarize where to find models for teaching health policy to nursing students and the critical importance of assuring the next generation of nurses understand the language and culture of health policy.

14. Linking Research and Clinical Expertise to Policy Initiatives: The Professional Development Session as a Teaching Modality for Doctoral Students

KIM J. COX, Assistant Professor, University of New Mexico, College of Nursing

Purpose: To facilitate the role transition of nursing doctoral students from clinicians to health policy researchers and analysts.

Background/Significance: Students undertaking doctoral education in nursing may experience role conflict during the transition from clinician to researcher. While these students are often passionate about particular health policy issues, uncertainty about how to operationalize their interests into researchable questions is common. Exposure to nurses who have experience working with an interdisciplinary group of scholars on an issue can help students to identify potential strategies for their own research and provide examples of effective methods for policy development and change.

Strategy: This poster will highlight an informal, two-hour session that was developed as part of a series of seminars for nursing doctoral students who were enrolled in the health policy concentration track. The faculty member who organized and facilitated this session sought input and assistance from students on the topic, potential speakers, and format of the session. A group of three speakers from several different disciplines who were working toward common policy goals was selected to engage informally with a group of approximately 15 students. During the session, the speakers shared their policy-related research and described their process of engagement in networking, organizing, and disseminating their work. Because of the informal nature of the sessions, students have ample opportunities to ask questions and to explore how the speakers' experiences could inform their own policy work.

Outcomes: Student evaluations of the session will be analyzed and the results will be available prior to the conference.

Conclusion: Direct exposure to nurses working in interdisciplinary, policy-related research teams is a useful strategy for facilitating role transition from practice to policy analysis and research. These nurses can serve as role models and mentors to students who plan to engage in health policy development during their careers.

15. Correlation between Infant Mortality Rate and Access to Care in New Mexico: A Proposed Solution

ELIZABETH HOLGUIN, Doctoral Student, Health Policy Concentration, University of New Mexico, College of Nursing

Problem Statement Today, 32 of the 33 New Mexican counties have at least one type of Health Professions Shortage Area (HPSA). Rural and remote Hispanic and Native communities in New Mexico remain in areas with the most significant shortage of health professionals in the nation. In rural settings, increased travel time and distance to prenatal services are barriers to repeated visits.

Background Opportunities for linking pregnant women with interventions for their health and well-being and that of their infants are presented frequently in the prenatal period. The CDC taskforce on preconception health found that many women of childbearing age do not currently access preventive services within their communities and note that their geographical location and neighborhood may negatively impact their ability to access care and reach "their full potential for health and well-being." New Mexico is categorized "worse than average" for health care access and utilization. The proportion of women initiating prenatal care late or receiving no prenatal care ranged from a low of 9.2% in New Hampshire to a high of 30.9% in New Mexico; compared to a national rate of 16.2%.

Proposed Solution Due to the rural nature of New Mexico, I suggest implementation of a mobile dispensary unit to increase access and service accessibility. A mobile dispensary will allow for visitation and critical assessment of social environments. Positive correlation between number of prenatal visits provided by a mobile dispensary and number of live births and likelihood of having a healthy weight baby has been demonstrated.

Policy Implications (1) Possible modification of prenatal care delivery modality for targeted low-income, rural populations in the state of New Mexico (2) Reduction of infant morbidity/mortality (3) Cost-savings by increasing access and frequency to care, thus reducing hospitalizations (4) Increase in public educational and awareness regarding modifiable determinants of infant mortality.

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**Integrating Health Policy into Doctoral Nursing Programs
Continuing the Conversation in 2015**

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