Dimensions of health policy and associated competencies

The small group activity is designed to elicit teaching strategies guiding doctoral nursing students to recognize political or ideological bias in sources, identify emerging issues amenable to legislation, analyze an issue from a neutral perspective, understand the legislative process, recognize payment and delivery implications of a policy influence or advocate for a specific policy, assuring quality and safety and engaging stakeholders.

<u>Each group will base its discussion on the same problem/issue:</u>
"How do we pay for quality in palliative care?

For the purposes of this activity we've adopted this definition: *Palliative care* is specialized medical and nursing *care* for people with serious illnesses. It focuses on providing patients with relief from the symptoms and stress of a serious illness. The goal is to improve quality of life for both the patient and the family.

We will brainstorm strategies to force doctoral students out of their usual patterns of reacting to issues. We want them to think more like a policy maker or a thought leader. What are the best ways to nudge, cajole or otherwise create enough discomfort for students to adopt new ways of writing, speaking, reading, thinking, and acting about health policy.

1. **Describe strategies that are best practices for achieving the assigned learning outcomes.**
2. **Identify the tools and resources available to teach the assigned topic.**
3. **Design a rubric for measuring the outcomes of an assignment in the topic area assigned.**
4. **Designate which tools, practices, and examples are most suitable for the DNP, PhD, or both degrees.**

Group 1: Students will recognize, compare and contrast political and ideological biases in sources and references. Example: annotate a bibliography for author or organizational bias on an assigned issue.

Group 2: Students will identify emerging issues amenable to legislation and understand the legislative process. Students will competently identify issues not amenable to legislation and choose appropriate actions to ameliorate a problem. Example: select which topics are legislative friendly and which have non-governmental solutions

Group 3: Students will analyze this issue from a neutral perspective. Example: write a 3 page voting memo for an elected Member

Group 4: Students will demonstrate adequate knowledge of health finance and health economics to perform cost-benefit analysis and understand the implications of payment policies on the delivery of care. Example: discover how hospice palliative care is reimbursed for Medicare patients.

Group 5: Students will engage stakeholders and/or legislators in advocacy. Example: recognize when advocacy sounds self-serving, shrill, too lengthy, etc.

Group 6: Students will demonstrate competence at writing for policy makers, speaking to policy makers, and interpreting nursing research, data and anecdotes to stakeholders. Example: assignment to write an op-ed.

Group 7: Students will discover examples of politics affecting scientific integrity. Example: students watch and discuss the movie *And The Band Played On* by Randy Shilts.

Case Study: How to Pay for Quality Palliative Care

State of Palliative care: How we got here, current and emerging policy issues:

Best practices; effective delivery and payment models, What are the challenges for payment model:

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Examples not experts of how one topic can have many aspects- bring realism why so hard to teach policy- have to have some prep on the topic…. Access cost quality

Identify multiple teaching learning strategies using a single case study.
Group 1: Payment Models (Harold Pollock)
Group 2: Data Sources (Nancy Short)
Group 3: Policy Analysis (TBD)
Group 4: Stakeholder analysis (Scott Palmer)
Group 5: Voting memo: Sitting Senator: political risks and benefits of supporting this issue-what are the politics that may come out/spin.
Group 6: Challenges to Implementation: Delivery/clinical system   (TBD)
Group 7: Challenges to implementation Patient and family Engagement (TBD)

Synthesis; groups reconvene and report recommendations to larger group. (Harold and Nancy?)

1. **Come back together to report recommendations.**
2. **Form an advocacy plan…. How did you change your view that you came with- what would you tell policy maker now differ from 2 hrs ago?**