

Innovation: *The JMU Health Policy Collaborative: Advocacy in Action*

Background: As states across the Union are implementing the Patient Protection & Affordable Care Act (ACA, 2010) some continue to debate whether to accept federal dollars to expand Medicaid coverage. The Commonwealth of Virginia made national headlines in 2014 when Governor Terry McAuliffe insisted on expanding Medicaid, until the eve of a government shutdown when he relented to the opposed conservative state legislature. A new budget was approved in a last minute session, leaving **400,000 Virginians** in what is now called “The Medicaid Expansion Gap” or “the Gap.” This term describes people who are now too “rich” for Medicaid coverage since the program did not expand, and too poor for assistance from the ACA exchange system, as it was never intended to cover those eligible for Medicaid. We met with legislators who requested that our newly formed Health Policy Collaborative (HPC), an interprofessional health policy advocacy group of faculty at James Madison University (JMU), produce solutions to cover those in “the Gap.” The ***Health Policy Collaborative (HPC): Advocacy in Action*** innovation project provides an interprofessional infrastructure for research on practical policy solutions, and a platform for experiential learning on advocacy for improved health. We were awarded a pilot grant by the College of Health and Behavioral Studies to support the development of the HPC and craft a health policy summit we entitled *Mind the Gap*.

Summary: Founded within JMU’s School of Nursing, the HPC consists of faculty from nursing, health administration, health economics, communication sciences and disorders, and social work, who together develop a program to engage students, faculty, and communities in partnerships for health policy advocacy. Curricula, course content, materials, and projects are shared to create an interdisciplinary focus on health policy. One example is the health policy summit wherein undergraduate students work in interprofessional teams to develop innovative approaches to Virginia’s healthcare coverage crisis utilizing Team Based Learning (TBL) (Michaelsen, Knight & Fink, 2002) strategies. Prior to the summit, students are required to review the resources provided on the HPC website, and are invited to take a survey adopted from Clark’s Political Astuteness Inventory (1984, 2008) both before and after the summit with no penalty for nonparticipation. Students are assigned to groups based on *their own diversity* as IP student teams develop proposals to provide health care services equivalent to Medicaid to individuals in the Gap. Covered by local media, state legislators attend the summit, and review all team proposals alongside students during a *Gallery Walk*. The top three proposals are rapidly developed into 10-minute presentations, during which student teams and legislators alike advocate for their preferences based on best practice. The HPC provides students and faculty with research opportunities and promotes inclusive activities focused on population health policy initiatives. Socially and politically astute leaders committed to social change are shaped through civic engagement, personal and social responsibility, and other ethical tenets of the HPC.

Outcomes/Impact: The impact of the HPC, including the health policy summit, can be seen and felt across James Madison University, and has influenced civic engagement curricula at each level of education from baccalaureate nursing to the DNP programs. The university president and administration have featured the HPC

summit as an example of civic engagement, one of the three principles of JMU's focus on engagement. In course evaluations, students indicated their appreciation for advocacy work and demystifying the health policy process. State legislators voiced their appreciation for the value and quality of the proposals to *Mind the Gap* and not only asked for a copy of the top three, but also requested each team's projects be sent to them for further review. Measurement of the students' political astuteness before and after each summit reveals a statistically significant improvement in scores of all student attendees. Additionally, the HPC garnered an award for innovation at the Virginia Nurses Legislative Day and a Founders Award for Excellence in Nursing Practice at the Pi Mu chapter of Sigma Theta Tau.

Catalyst for Change: Curricular changes To initiate an emphasis on robust and informed health policy and advocacy across programs, a new interprofessional undergraduate elective course was developed in spring of 2014. *Healthy Health Policy* explores a policy issue of importance to the local community, analyzes available data, and develops evidence-based policy recommendations. Students' research and recommendations are disseminated through professional posters and published policy briefs at the Pi Mu Sigma Theta Tau International Nursing Research Day. In the RN to BSN program, recent curricular changes related to health policy for practicing nurses include selection of a health policy related to their nursing practice and advocacy efforts with the policy makers. In the MSN health policy core course, students now analyze a policy, write a policy brief and travel either to the state capitol of Richmond, VA to advocate with state legislators or to Washington DC to meet with federal Representatives, Senators, or legislative staff for face to face advocacy. This fall, a health policy institute will be piloted for students to increase their knowledge and gain first hand experience of the policy process. Held at JMU's Washington Center facility in Washington DC, this experience will include a weeklong fellowship with staff in Congressional offices or with national professional nursing organizations including the American Nurses Association, ANCC, and AACN.

Execution and Sustainability: Planning and Development of the Health Policy Collaborative began in the fall of 2013 with actual funding awarded in March of 2014. Since formal initiation of the Health Policy Collaborative in April of 2014, two summits (fall of 2014 and 2015) have been held impacting 359 pre-licensure nursing, health and business students. Moreover, curricular changes have occurred in the pre-licensure, RN-BSN and MSN programs. The DNP health policy institute course change will occur in August 2016.

Potential for replication and dissemination: The JMU HPC resources are available on the website for replication, and initial local and state presentations have been favorably received. Moreover, the HPC faculty have presented at the *American Public Health Association*, *Academy of Nursing* and the international interprofessional *Collaborating Across Borders V* conferences held last fall. We have a manuscript under review regarding research findings related to raising political astuteness. The HPC Summit materials are being submitted to the Nexus Learning System of the National Center for Interprofessional Practice and Education to promote replication and the initiation of similar summits across the nation.

Involved teams of (interprofessional) faculty: As an interprofessional collaborative, the HPC includes JMU faculty from nursing, communication sciences

and disorders, health administration, health economics, and social work disciplines. Together, policy proposals are created that address interdisciplinary patient healthcare needs of the community. By focusing on inclusion, opportunities for stakeholder involvement can increase while promoting diversity and inclusivity within the nursing profession, as stated in AACN's Goal 3 (AACN, 2016).

Consistent with AACN's mission and vision: The American Association of Colleges of Nursing (AACN) has long been an advocate for our profession and the patients we serve. Looking ahead to AACN's Fiscal Year 2017-2019 Strategic Plan Goals and Objectives, nurses are charged to "lead innovative academic nursing that promotes team-based, interprofessional health care" (AACN, 2016). The HPC has incorporated both TBL and IP groups to increase the level of influence of academic nursing; building strategic partnerships serves to further support and advance nursing, health education, and health policy, echoing AACN (2016)'s second goal to foster leadership and advocacy to benefit nursing and the population.

Demonstrates Advancement of professional nursing education: JMU's HPC summit *Mind the Gap* has transformed undergraduate education by eradicating barriers to disciplines that share a common focus on improved health and health care for all. By joining forces, faculty, students, and legislators from various backgrounds participate in policy production that otherwise would not exist. Not only does this instill policy comprehension and leadership for students, this project asserts that the advancement of nursing education will continue to progress public policy priorities, echoing AACN's Goal 4 (AACN, 2016). The curricular changes in both the undergraduate and graduate programs will reinforce theoretical content and provide real life advocacy experiences for all levels of nursing students.

The **Health Policy Collaborative (HPC): Advocacy in Action** innovation project illustrates a transformative approach to health care and policy. By including state legislators in the summit, findings were not only discussed and debated, but per their request, sent to legislative offices for additional consideration. This knowledge generation produces data-informed policy proposals that serve to impact strategic decision-making on a state level, and is therefore congruent with AACN's Goal 4 to advance academic nursing through data-informed communications to impact public policy priorities (AACN, 2016). By significantly increasing political astuteness we allow a pathway for change

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