POLICY ANALYSIS AS A DNP PROJECT

By

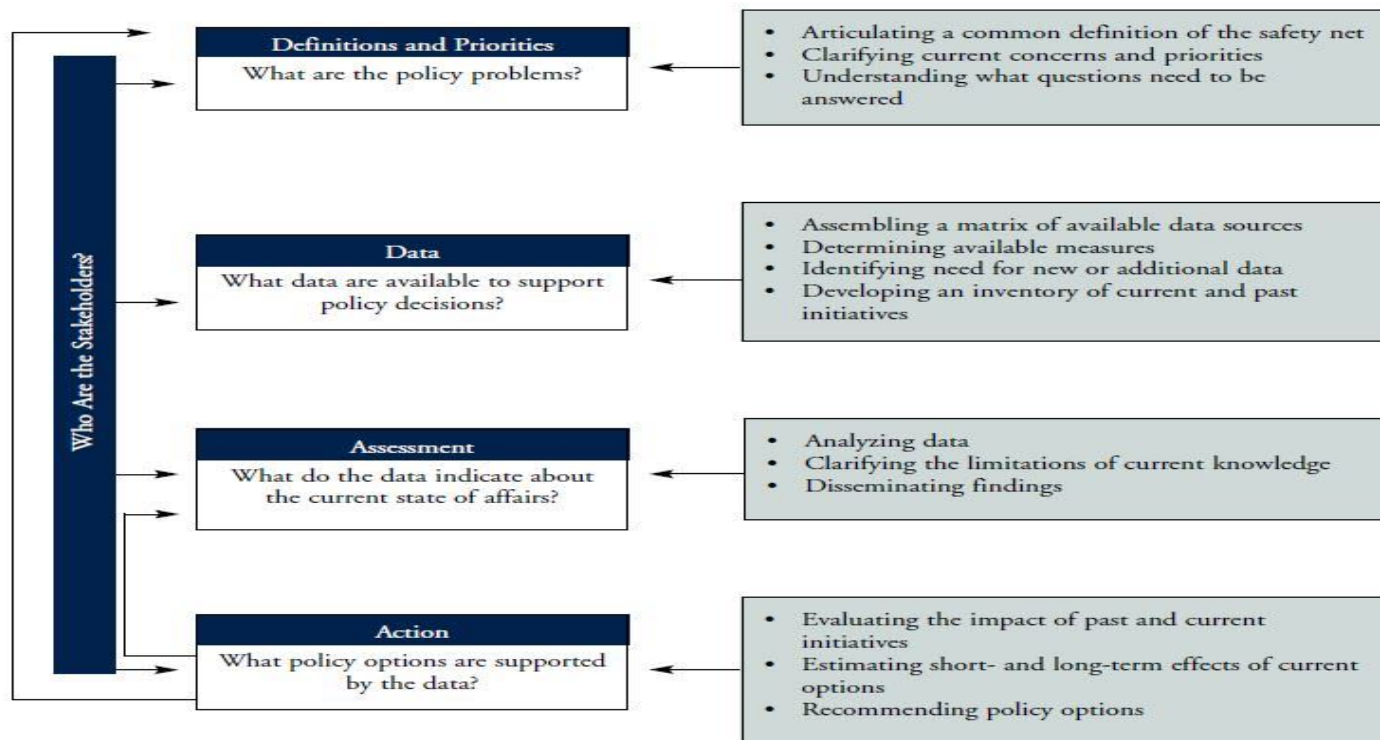Janet Jones DNP, APRN, CNS

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Doctor of Nursing Practice

LEARNING OBJECTIVES

▶ Upon completion of this presentation the participant will be able to:

  ▶ Discuss the Data-Driven Policy-making Model including the 4 stages: definition, data collection, analysis, and action

  ▶ Analyze the connection between evidence based practice and healthcare policy analysis

  ▶ Evaluate utilization of the Data-driven Policy-making Model in the development of an advocacy plan to influence policy development and implementation

The Data-driven Policy-making Model

Who Are the Stakeholders?		
Definitions and Priorities What are the policy problems?		• Articulating a common definition of the safety net • Clarifying current concerns and priorities • Understanding what questions need to be answered
Data What data are available to support policy decisions?		• Assembling a matrix of available data sources • Determining available measures • Identifying need for new or additional data • Developing an inventory of current and past initiatives
Assessment What do the data indicate about the current state of affairs?		• Analyzing data • Clarifying the limitations of current knowledge • Disseminating findings
Action What policy options are supported by the data?		• Evaluating the impact of past and current initiatives • Estimating short- and long-term effects of current options • Recommending policy options

Developing Data-Driven Capabilities to Support Policymaking (Weinick, R.M. & Shin, P.W., 2003, p2)

STAGE 1 – DEFINITIONS & PRIORITIES

Common definitions
Clarify concerns & priorities – Gap Analysis, SWOT
**Develop questions to be addressed**

Table 1 Gap Analysis

Current Experience	Intervention	Outcome	Gap Analysis Identified
The Louisiana State Board of Pharmacy has developed a PMP available to authorized prescribers of controlled substances.	Conducted an extensive policy analysis of the PMP from a state and regional perspective.	Gained quantitative and qualitative information that may be employed when developing future public policy relative to utilization of the PMP by authorized HCPs.	Although evidence based practice research has indicated information available on the PMP database may have helped HCPs identify individuals at risk for accidental opioid overdose, the PMP has not been widely utilized.

Note: PMP – Prescription Monitoring Program; HCPs – health care providers
York, 2017

STAGE 2 – DATA COLLECTION

▶ **Develop a data matrix**

▶ **Quantitative**

  ▶ Demographics – the population impacted

  ▶ General context of the policies, rules & regulations

  ▶ Data sources

▶ **Qualitative**

  ▶ Retrospective review of policy documents

  ▶ Legislative minutes, rules, regulations, statutes, public meeting comments

  ▶ Regulating agencies & professional societies or organizations

  ▶ Identify the stakeholders' voices
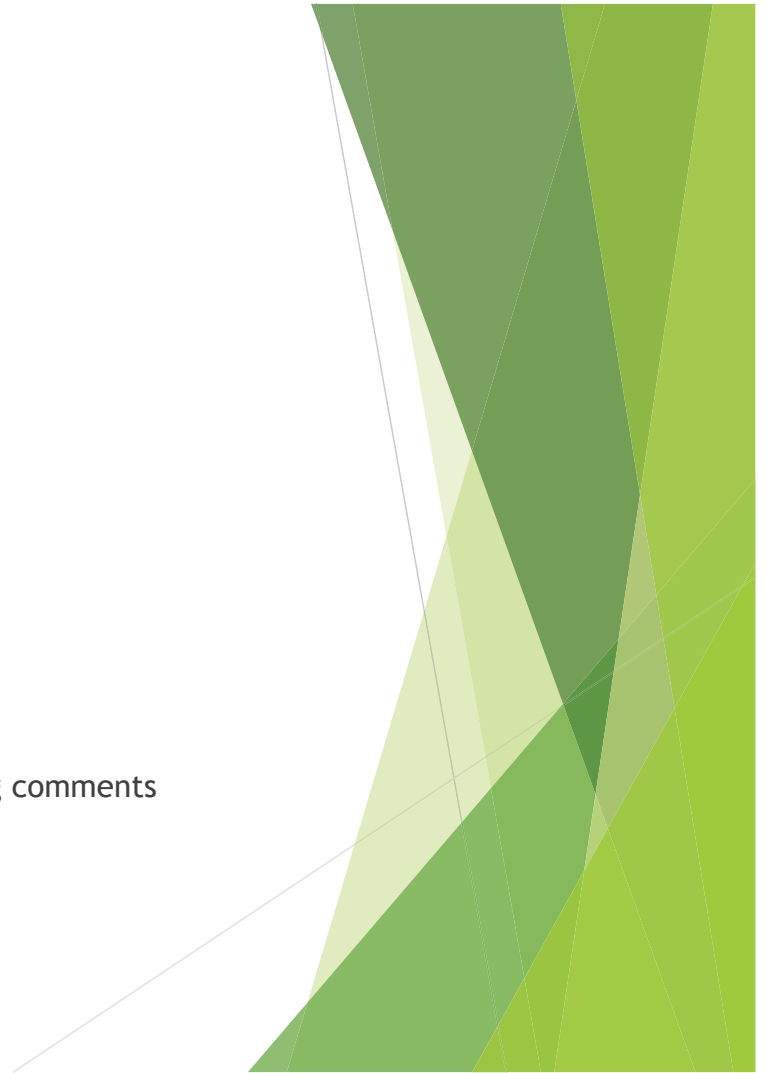
STAGE 3 - ASSESSMENT

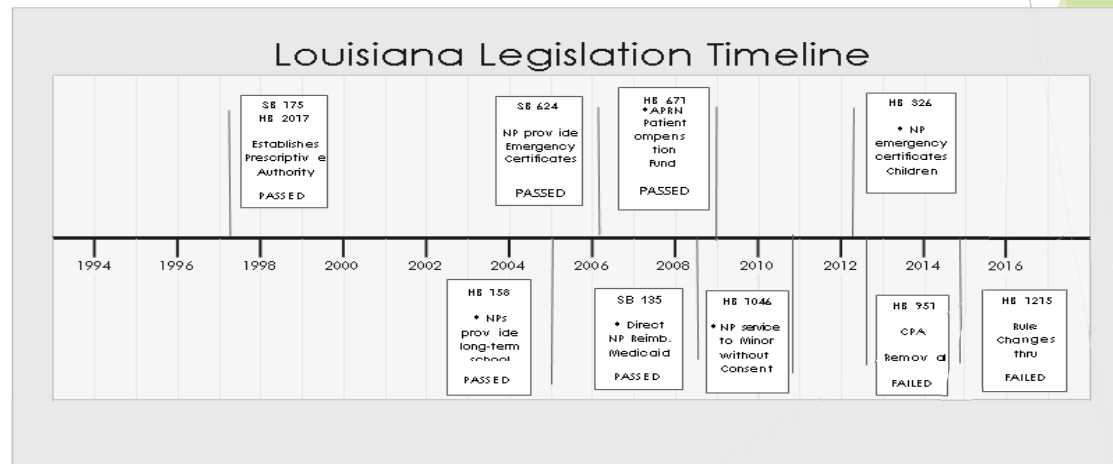**Quantitative**
   Contingency Tables
   Prevalence
   Risk Ratios

Table 12 Overdose Deaths by Gender, Age Group, Race/Ethnicity and Opioid Type

Gender	LOUISIANA	ALABAMA	ARKANSAS	MISSISSIPPI	TEXAS
Male	185 (71%)	160 (59%)	97 (56%)	67 (58%)	720 (63%)
Female	75 (29%)	110 (41%)	76 (44%)	48 (42%)	431 (37%)
Totals	260 (100%)	270 (100%)	173 (100%)	115 (100%)	1,151 (100%)

York, 2017

Qualitative
   Timelines
   Dialogue - quotes
   Terminology
   Themes
   Stakeholders

Louisiana Legislation Timeline

	SB 175 HB 2017 Establishes Prescriptive Authority PASSED		SB 624 NP provide Emergency Certificates PASSED	HB 671 APRN Patient Compensation Fund PASSED		HB 326 NP emergency certificates Children	

1994 1996 1998 2000 2002 2004 2006 2008 2010 2012 2014 2016

HB 158 NPs provide long-term school PASSED

SB 135 Direct NP Reimb. Medicaid PASSED

HB 1044 NP service to Minor without Consent

HB 951 CPA Removal FAILED

HB 1215 Rule Changes thru FAILED

Bayhi, 2015

STAGE 4 - ACTION

- Develop an advocacy plan
- Address to agency of interest & stakeholders
- White Paper

  Background

  Methods

  Results

  Recommendations

  No more than 3-5 pages
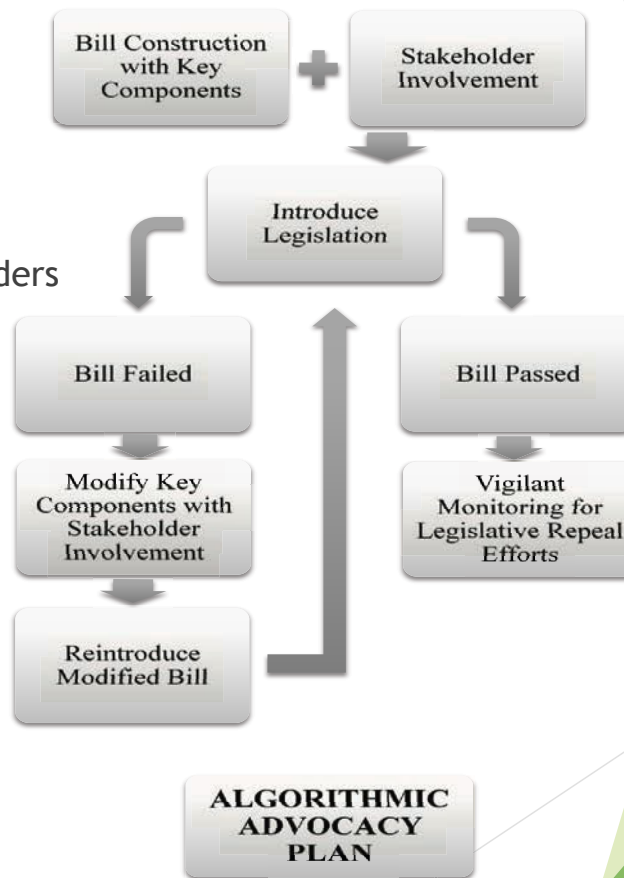
Bayhi, 2015

CONCLUSIONS

▶ Model refines the problem/question

▶ Quantitative and qualitative data collected and analyzed

▶ Target population's voice is used

▶ Stakeholders perspectives addressed

▶ Policy's intent, implementation, and outcomes evaluated

▶ Emergence of advocacy plan for action

▶ Action can include policy maintenance, reformulation, alternative policy, or termination
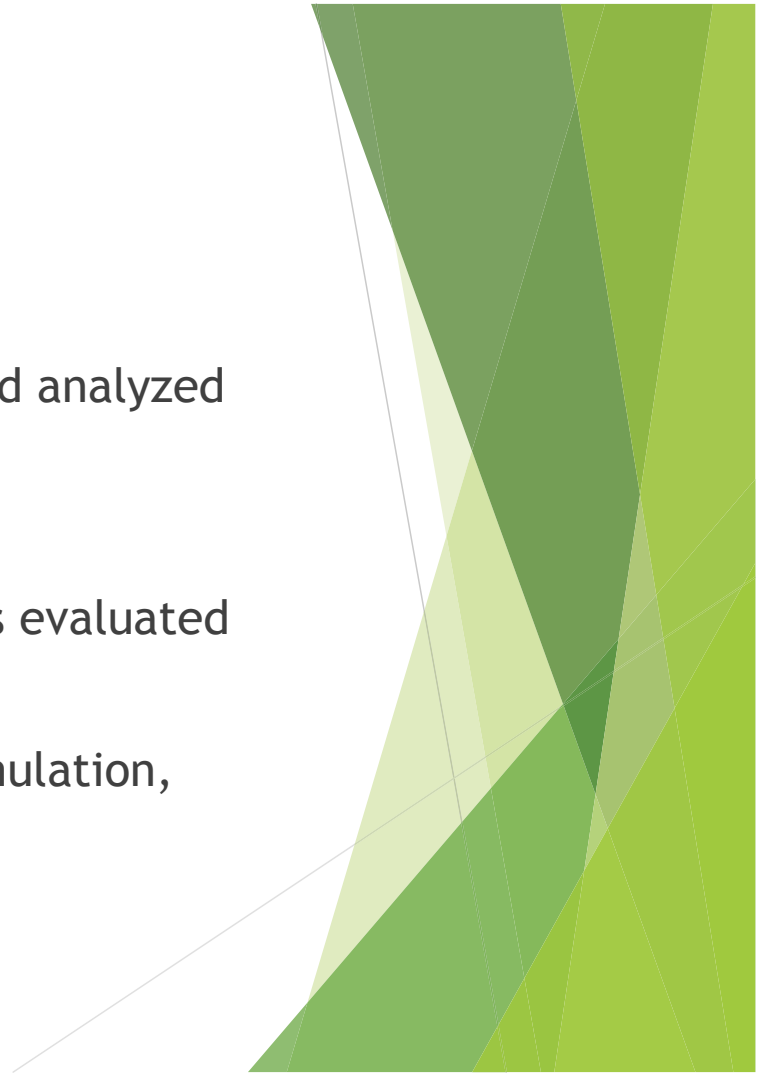
REFERENCES

▶ Bayhi, L. (2015). Health policy analysis of nurse practitioner initiatives to develop advocacy strategies towards full practice in Louisiana (Unpublished doctoral paper). Southeastern Louisiana University, Hammond, Louisiana

▶ Jones, J., Lee., D., & Bayhi, L. (2016). The data-driven policy analysis framework as a template for healthcare policy analysis. Annals. Of Nursing Research and Practice, (1), 1005.

▶ Weinick, R.M. & Shin, P.W. (2003). Developing data-driven capabilities to support policymaking. In Monitoring the Health Care Safety Net-Book III: Tools for Monitoring the Health Care Safety Net. Rockville, MD: Agency for Healthcare Research and Quality.

▶ York, C. (2017). Data driven health policy analysis of southern state prescription monitoring programs (Unpublished doctoral paper). Southeastern Louisiana University, Hammond, Louisiana.