Increasing Experiential Learning in Healthcare Policy within a BSN Pre-licensure Curriculum

GRETCHEN A. LA CIVITA, DNP, MPH, RN, CPN, CNE
Disclosures

Dr. Gretchen La Civita
Assistant Professor
Resurrection University
Chicago, IL
DNP Project
No Conflict of Interest and
No Sponsorship

Learning Objectives
Importance of a foundational understanding of healthcare policy to BSN students
Utilization of experiential learning model to influence political astuteness
Long-term sustainability of the project
Objective of the Project

To implement evidence-based educational initiatives developed for baccalaureate nursing students to increase their political knowledge, skills, and astuteness using experiential learning interventions.
Problem/Need

- WHO
- IOM
- AANC
- ACHNE
- Systematic Review (Heiman et al., 2016)
Evidence-Based Initiative

- Political Astuteness Definition
- Byrd et al., 2004, 2012
  - Statehouse Visit
  - Legislative Assignment
  - Public Policy Group Project
Design and Sample
Learning Strategies

- Didactic Content
- Legislative Assignment
- Local Legislative Visit
- Healthcare Policy Group Project
Political Astuteness Inventory

- Voting Behavior
- Participation in Professional Organizations
- Awareness about Health Policy Issues
- Knowledge of the Legislative and Political Process
- Knowledge of Legislators
- Involvement in the Political Process
## Political Astuteness Inventory

\[ p = < 0.0005 \] Paired Samples \( t \)-Test

\( N = 29 \)

<table>
<thead>
<tr>
<th></th>
<th>Pre-Mean</th>
<th>Post-Mean</th>
<th>T</th>
<th>SD</th>
<th>( p ) Value</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>TOTAL</strong></td>
<td>8.28</td>
<td>17.86</td>
<td>-12.949</td>
<td>3.987</td>
<td>&lt;0.0005</td>
</tr>
<tr>
<td>Voting Behavior</td>
<td>2.48</td>
<td>2.55</td>
<td>-0.493</td>
<td>0.753</td>
<td>0.626</td>
</tr>
<tr>
<td>Participation in Professional Organizations</td>
<td>0.72</td>
<td>0.93</td>
<td>-0.947</td>
<td>1.177</td>
<td>0.352</td>
</tr>
<tr>
<td>Awareness of Health Policy Issues</td>
<td>2.72</td>
<td>3.38</td>
<td>-2.483</td>
<td>1.421</td>
<td>0.019</td>
</tr>
<tr>
<td>Knowledge of Legislative and Policy Process</td>
<td>1.21</td>
<td>6.28</td>
<td>-11.645</td>
<td>2.344</td>
<td>&lt;0.0005</td>
</tr>
<tr>
<td>Knowledge of Legislators</td>
<td>1.17</td>
<td>5.00</td>
<td>-9.561</td>
<td>2.156</td>
<td>&lt;0.0005</td>
</tr>
<tr>
<td>Involvement in Political Process</td>
<td>0.10</td>
<td>1.45</td>
<td>-5.741</td>
<td>1.261</td>
<td>&lt;0.0005</td>
</tr>
</tbody>
</table>
### Political Astuteness Inventory

$P = < 0.0005$ Cochran’s Q of PAI Categories of Political Astuteness

<table>
<thead>
<tr>
<th></th>
<th>Category of Political Astuteness</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Totally Unaware Politically</td>
</tr>
<tr>
<td></td>
<td>Slightly More Aware of the Implications of Political Activity for Nursing</td>
</tr>
<tr>
<td></td>
<td>Beginning Political Astuteness</td>
</tr>
<tr>
<td></td>
<td>Politically Astute</td>
</tr>
<tr>
<td>Pre-Intervention</td>
<td>66%</td>
</tr>
<tr>
<td>Percent</td>
<td>34%</td>
</tr>
<tr>
<td>Cochran’s Q</td>
<td>34.586</td>
</tr>
<tr>
<td>p Value</td>
<td>&lt;0.0005</td>
</tr>
<tr>
<td>Post-Intervention</td>
<td>0</td>
</tr>
<tr>
<td>Percent</td>
<td>62%</td>
</tr>
<tr>
<td>Cochran’s Q</td>
<td>32.379</td>
</tr>
<tr>
<td>p Value</td>
<td>&lt;0.0005</td>
</tr>
<tr>
<td>Criteria</td>
<td>MEAN</td>
</tr>
<tr>
<td>-------------------------------------------------------------------------</td>
<td>------</td>
</tr>
<tr>
<td>Identification and analysis of public policy initiatives</td>
<td></td>
</tr>
<tr>
<td>1. Legislation, public and private programs, and resources that address the problem are identified.</td>
<td>3.25</td>
</tr>
<tr>
<td>2. The impact of existing programs, resources, policies, and laws on the problem with supporting facts and statistics are analyzed.</td>
<td>2.875</td>
</tr>
<tr>
<td>3. Gaps in current policies and programs are identified.</td>
<td>2.875</td>
</tr>
<tr>
<td>4. Proposed public policy solutions are identified.</td>
<td>2.625</td>
</tr>
<tr>
<td>5. Who will benefit and who will lose in relation to proposed policies are analyzed.</td>
<td>3.0</td>
</tr>
<tr>
<td>Implications for nursing</td>
<td></td>
</tr>
<tr>
<td>6. The impact of the problem on nursing practice, including role responsibilities is discussed.</td>
<td>3.5</td>
</tr>
<tr>
<td>7. The impact of identified policies on the delivery of healthcare is discussed.</td>
<td>3.375</td>
</tr>
</tbody>
</table>
Results—Student Evaluations

- 69% indicated learning activities were effective or very effective
- 3% found the assignments ineffective
- 41% agreed or strongly agreed the assignments should continue
- 4% stated the assignments should not continue
- Assignment Ranking
  1. Legislative Visits
  2. Legislative Assignments
  3. Healthcare Policy Group Project
Results—Student Evaluations

“Take-Aways”
- Voice for the people
- Knowledge increased
- Appreciation of the significance of policy work for nurses
- Policy work is another way to provide care to people
- Nurses can play a role in policy
- Nurses can influence policy
Discussion

- Political Astuteness Inventory
- Didactic Lecture and Legislative Assignment
- Local Legislative Visit
- Healthcare Policy Group Project
Sustainability

Three Project Themes
- Clear identification of healthcare policy learning outcomes & instruction
- Committed and dedicated partners
- Foundation in policy analysis

Long-Term Sustainability
- 4 Learning Strategies
- Partnerships
- Flexibility
- Meet students where they are
Conclusion

- Learning strategies developed by Byrd et al. in both the 2004 & 2012 studies provided the foundation for this project.
- Experiential learning activities helped students move from being politically unaware to some level of political astuteness.
- Advocacy and healthcare policy initiatives must play a larger role in nursing education.
- Expansion of content on healthcare policy requires a curriculum shift that includes both theory and practical application.
- Embracing a culture of advocacy and healthcare policy in an innovative curriculum will allow for unique and creative exchange of ideas.
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gretchen.lacivita@resu.edu


