

## HM700 - Health Systems and Policy Analysis

### Fall 2018 Course Outline

#### COURSE OBJECTIVE

The goal of this course is to introduce students to the Canadian health care system and the field of health policy analysis. This will be done through an overview of the funding and delivery of services within the Canadian health care system and a comparison of the Canadian system with that of other high-income countries. In examining the field of health policy analysis, students will be exposed to various theoretical perspectives, frameworks, and tools that can facilitate the policy analysis process. Current policy topics in health care will be used in order to demonstrate the practical relevance of policy analysis for health care managers.

#### INSTRUCTOR AND CONTACT INFORMATION

Instructor (for part-time students)	Instructor (for full-time students)	Teaching Assistant	Teaching Assistant
Glen Randall <a href="mailto:randalg@mcmaster.ca">randalg@mcmaster.ca</a>	Neil Barr <a href="mailto:barrn@mcmaster.ca">barrn@mcmaster.ca</a>	Lynda van Dreumel <a href="mailto:vandrela@mcmaster.ca">vandrela@mcmaster.ca</a>	Fanor Balderrama <a href="mailto:balderrf@mcmaster.ca">balderrf@mcmaster.ca</a>
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#### COURSE DESCRIPTION

This is the introductory course for the Master of Health Management program. It will provide students with an understanding of how the Canadian health care system is organized as well as how services are financed and delivered. This will be done through an assessment of the *Canada Health Act* and various pieces of related provincial health care legislation. Discussions will include an exploration of the for-profit and not-for-profit mix of services within Canada. In addition, students will be exposed to the principles of evidence-based decision-making and various health policy analysis tools. Current issues and trends in health policy (both within Canada and internationally) will serve as cases to which students apply those tools.

#### LEARNING OUTCOMES / OBJECTIVES

Upon completion of this course, students will be able to:

- describe how health care is organized, funded, and delivered within Canada;
- demonstrate an understanding of current issues and trends in health policy;
- identify the stages of the health policy development process; and
- describe and apply health policy analysis tools in examining complex health policy issues.

## MODES OF STUDY

This course is delivered primarily in an online format using Avenue to Learn (“A2L” or “Avenue”) as the principal delivery system. This course also includes some in-person class time during the fall residency period at McMaster. Topics are explored through a review of documents, course assignments, case studies, and online discussions. Students are expected to independently read course content posted on the A2L course website, analyze information, and share their new knowledge and understanding with their classmates so that they learn from each other as well as from the instructor. Students will use course content posted on A2L as resources for learning. Instead of face-to-face small group discussions, students will interact online with other students and the course instructor. Typically, discussions will occur asynchronously (not in real time) as this enables easier participation for students from different time zones and allows all students to organize their learning activities around work, family, and personal demands. Live chat rooms and video links may be used when needed by students. The instructor and students will also maintain contact as necessary by email and/or video call (Skype).

## TECHNICAL REQUIREMENTS

Students require access to a computer that meets the MHM program technical requirements and access to the Internet on a regular basis. Learners should also have an active McMaster email account.

## EVALUATION

Learning in this course comes from readings, lectures, in-class and online discussion, as well as participation, preparation of assignments, reflection, and analysis. All work will be evaluated on an individual basis except where group work is expected. In these cases, group members will share the same grade unless all group members agree to an adjustment.

### Components and Weights

Online Discussion Forums	<b>Participation</b> Students are expected to share ideas and experiences related to the topics presented during on-site and online discussions. Specific expectations for online discussion forums are noted below. See the A2L course site for details on the timing of postings (5% for each of 9 discussion forums).	45%
Assignment #1	<b>Mythbuster presentation</b> and facilitation of class discussion	25%
Assignment #2	<b>Policy Analysis paper</b> (5% outline, 25% final written paper)	30%

**Percentage, Letter:**

90-100	A+	77-79	B+
85-89	A	73-76	B
80-84	A-	70-72	B-
		0-69	F

**COURSE CONTENT**

**Module 1: Introduction to the Canadian health care system**

- The Constitution and federal/provincial division of powers.
- Understanding the Canada Health Act.
- The role of regulation in health services (organizations, professionals, technology, etc.).
- Measuring quality and outcomes in health care.

**Module 2: Comparative health systems**

- Inequality in health and the determinants of population-based health.
- The role of the World Health Organization.
- A comparative assessment of the funding and delivery of services across provinces.
- A comparative assessment of the funding and delivery of services across select high-income countries.

**Module 3: Introduction to health policy analysis and methods**

- Policy cycle
- Sampling/frameworks/operationalizing research.
- Interpreting evidence/quality and grading of evidence/competing evidence.
- Agenda setting and problem definition.
- Policy formulation (rational models, incremental models, combined models).
- Policy implementation and evaluation (cost-effectiveness evaluation, goals).

**Module 4: Conducting health policy analysis**

- The role of ideas (values, evidence, knowledge, beliefs).
- The role of interests (structural interests - dominant, challenging, repressed).
- Concentrated versus diffuse costs/benefits (resource and incentive effects).
- The role of institutions (path dependence, autonomy and capacity of governments).
- Policy universe (policy subsystem, policy communities, interest networks).
- Policy change (incremental, policy feedback, windows of opportunity).

A more detailed week-by-week description (course schedule) of topics, activities, and required readings will be posted online (under the content section of the A2L course site) prior to the first week of the course. Students should become familiar with the A2L site, obtain any required/suggested textbooks, and complete the first week's required readings as early as possible.

**Please note that additional readings may be added throughout the course so you will need to check the Avenue site at least weekly.**

## Participation & Online Discussion Forums

Students are expected to share ideas and experiences related to the topics presented during on-site and online discussions. Students are expected to post at least one main response to the weekly forums(s) and to participate in the overall discussion by commenting on other students' responses (at least once per week).

Postings should be reflective, concise and respectful. **Make sure you are adding value and not simply repeating what others have already said (refer to the Online Discussion Grading Scale posted in the content section of the A2L site).**

The course instructors and teaching assistants will limit their participation so as not to overly influence the direction of the discussion. To further facilitate discussion, students will be divided into groups (group assignments will be posted on the A2L site).

There is also a general discussion area on the A2L site where students may interact with each other (the instructors and teaching assistants will not be monitoring this area routinely so if you have an important question please phone or email directly).

### Assignment #1

The purpose of this assignment is to encourage students to become actively involved in health policy analysis by identifying policy analysis concepts and issues using a practical example while exposing students to a broad range of policy topics.

Groups will prepare a presentation and facilitate a class discussion that includes the following:

- a summary of the topic/myth (be clear about what the myth is);
- identification of the policy issue/s (e.g., how has the issue been defined and how did the issue get on the policy agenda?);
- identification of where the issue is in the policy cycle;
- a critique of the Mythbuster (is it accurate and unbiased);
- an update of new information (is there any new evidence or change in context since the Mythbuster was written?);
- identification of the implications of the issue for policy makers, health care managers, and consumers (e.g., funding, marketing, access, quality, etc.); and
- clarify whether the myth was busted or not.

Working in groups (group assignments will be posted on A2L), students will select a health policy topic from the following Canadian Foundation for Healthcare Improvement (CFHI) *Mythbusters* series (<http://www.cfhi-fcass.ca/PublicationsAndResources/Mythbusters.aspx>):

1. Myth: International Medical Graduates are the solution to the doctor shortage in underserved areas (2013)
2. Myth: When it comes to drugs and devices, newer is always better (2012)
3. Myth: User fees ensure better use of health services (2012)
4. Myth: C-sections are on the rise because more mothers are asking for them (2011)
5. Myth: The aging population is to blame for uncontrollable healthcare costs (2011)

6. Myth: Seeing a nurse practitioner instead of a doctor is second-class care (2010)
7. Myth: Most physicians prefer fee-for-service payments (2010)
8. Myth: Whole-body screening is an effective way to detect hidden cancers (2009)
9. Myth: Emergency room overcrowding is caused by non-urgent cases (2009)
10. Myth: In healthcare, more is always better (2008)
11. Myth: Canada's system of healthcare financing is unsustainable (2007)
12. Myth: Direct-to-consumer advertising is educational for patients (2007)
13. Myth: We can improve quality one doctor at a time (2007)
14. Myth: People use health system report cards to make decisions about their health (2006)
15. Myth: The risk of immunizing children often outweigh the benefits (2006)
16. Myth: Early detection is good for everyone (2006)
17. Myth: Medical malpractice lawsuits plague Canada (2006)
18. Myth: A parallel private system would reduce waiting times in the public system (2005)

Topics are on a first request basis (please confirm the choice of topic with the instructors). You will note that the CFHI stopped publishing these in 2013 so it will be incumbent on each group to make sure you have uncovered any additional relevant information since the Mythbuster was originally published. Each group will present their topic in class (during the Saturday of the on-site residency period) and will lead a discussion which highlights the policy analysis issues covered in the course. Groups will be given approximately 20 minutes for both the presentation and the class discussion. The precise approach used to present the topic to maximize its relevance and interest to the class is up to each group. A projector will be available for Keynote/PowerPoint presentations.

Groups are to submit their slides through Avenue. Presentations will be evaluated for:

- completeness (inclusion of the material noted above);
- clarity of presentation (logical order, clear slides);
- innovation in making the presentation; and
- ability to facilitate meaningful class discussion.

### **Assignment #2**

The final course assignment consists of students working in groups of two (students can find their own partner) to conduct a mini policy analysis of an interesting policy issue (subject to final approval from the instructors; please contact/email both).

The policy analysis should focus on the agenda-setting stage of the policy cycle (i.e., how/why did the issue make it or not make it onto the policy agenda or what is the probability of the issue making it onto the policy agenda) unless specific approval is provided in advance to focus on another stage of the policy cycle. Specific policy analysis tools/concepts must be used in the analysis (see a list of examples in the content area of A2L). Students are then required to submit an outline (one-page maximum) describing the proposed policy analysis. The outline is intended to make sure students are on the right track.

The outline should:

- describe the policy topic you propose to analyse;
- identify the policy audience;
- discuss why the topic is important (i.e., worth analyzing);
- identify which aspects of the policy and stage of the policy cycle that will be included in the analysis (for most students this will be the agenda setting stage of the policy cycle);
- provide a preliminary list of data sources that you will be consulting for the analysis (e.g., specific articles, reports, or other data sources) to ensure that there is adequate data available for the analysis to be conducted; and
- list which concepts from the course (see list in the content area on A2L) will be used in the analysis (to the extent possible at this early stage).

The final policy analysis paper must conform to the following:

- submitted online (A2L Assignments folder) in Microsoft Word format;
- one inch margins and 12-point font;
- double-spaced;
- 1600–1800 words maximum, not including appendices or references;
- only include appendices that are relevant to your analysis (there are no bonus marks for volume); and
- references must be in the American Psychological Association (APA) format (see below).

Examples of possible policy topics and examples of published policy analysis will be posted on the A2L site.

#### **USE OF AVENUE TO LEARN SYSTEM**

In this course we will be using Avenue to Learn. Students should be aware that, when they access the electronic components of this course, private information such as first and last names, user names for the McMaster e-mail accounts, and program affiliation may become apparent to all other students in the same course. The available information is dependent on the technology used. Continuation in this course will be deemed consent to this disclosure. If you have any questions or concerns about such disclosure please discuss this with the course instructor.

Students should avoid using the Avenue email system and instead use your McMaster email accounts for communicating with instructors or TAs.

#### **STUDENT ACCESSIBILITY SERVICES**

Student Accessibility Services (SAS) offers various support services for students with disabilities. Students are required to inform SAS of accommodation needs for course work at the outset of term. Students must forward a copy of such SAS accommodation to the instructor, normally within the first three (3) weeks of classes by setting up an appointment with the instructor. If a student with a

disability chooses NOT to take advantage of an SAS accommodation and chooses to sit for a regular exam, a petition for relief may not be filed after the examination is complete. The SAS website is:

<http://sas.mcmaster.ca>

## REFERENCING

All assignments submitted should use formal APA referencing format, 6<sup>th</sup> edition. Links to summarized APA style guides can be found on the main HM700 A2L site. Referencing within online posts may be less formal (students need to provide sufficient information so that the material referenced may be easily found; if using links, please also provide a title for each document).

## PENALTY FOR LATE SUBMISSION

Deadlines for assignments are set. All work must be submitted to the corresponding A2L Assignments folder on the due date and time as stated in the Course Schedule. **Do not submit work by email.** Late assignments will be penalized 10% for every 24 hours, or part thereof, they are submitted past their due date and time. If you anticipate being unable to complete an assignment on the due date, please contact the instructors **prior to the due date**. Requests for extensions will not be considered within 48 hours of the deadline except under extenuating circumstances.

## ACADEMIC DISHONESTY

It is the student's responsibility to understand what constitutes academic dishonesty. Please refer to the University Senate Academic Integrity Policy. This policy describes the responsibilities, procedures, and guidelines for students and faculty should a case of academic dishonesty arise. Academic dishonesty is defined as to knowingly act or fail to act in a way that results, or could result, in unearned academic credit or advantage. Please refer to the policy for a list of examples. The policy also provides faculty with procedures to follow in cases of academic dishonesty as well as general guidelines for penalties. All work that students submit must be their own work (original) and include proper citations when work is copied or paraphrased. A web-based service (Turnitin) to reveal plagiarism will be used. Students will be expected to submit their work electronically to Assignment folders on A2L. Students who do not wish to have their work assessed through Turnitin must advise their instructor in writing in advance of the due date/time. These students must still submit their work on A2L along with all rough drafts as an appendix. No penalty will be assigned to a student who does not wish to have their work assessed through Turnitin. However, all submitted work is subject to normal verification that standards of academic integrity have been upheld (e.g., online search, etc.). For further information related to the academic integrity policy or the use of Turnitin, please refer to the Office of Academic Integrity at:

<http://www.mcmaster.ca/academicintegrity>

## COPYRIGHT

Professors, students, and staff are permitted to make copies of copyright materials under *fair dealing*. Fair dealing with a work does not require the permission of the copyright owner or the payment of royalties as long as the purpose for the material is private study, and that the total amount copied equals **NO MORE THAN 10 per cent** of a work or an entire chapter, which is less than 20 per cent of a work. In other words, it is illegal to: i) copy an entire book, or ii) repeatedly copy smaller sections of a publication that cumulatively cover over 10 per cent of the total work's content. Please refer to the following copyright guide for further information:

<http://www.copyright.mcmaster.ca>

## POTENTIAL MODIFICATIONS TO THE COURSE

The instructor and university reserve the right to modify elements of the course during the term. The university may change the dates and deadlines for any or all courses in extreme circumstances. If either type of modification becomes necessary, reasonable notice and communication with the students will be given with explanation and the opportunity to comment on changes. It is the responsibility of the student to check their McMaster email and course websites frequently during the term.

## ACKNOWLEDGMENT OF COURSE POLICIES

In this course we will be using A2L. Students should be aware that when they access the electronic components of this course, private information such as first and last names, user names for the McMaster e-mail accounts, and program affiliation may become apparent to all other students in the same course. The available information is dependent on the technology used. Continuation in this course will be deemed consent to this disclosure. If you have any questions or concerns about such disclosure, please discuss this with the course instructor.

Your registration and continuous participation to the various learning activities of the program is an implicit acknowledgement of the course policies outlined above, or of any other that may be announced during lecture and/or on A2L. **It is your responsibility to read this course outline, to familiarize yourself with the course policies, and to act accordingly.** Lack of awareness of the course policies **cannot be invoked** at any point during this course for failure to meet them. It is your responsibility to ask for clarification on any policies that you do not understand.