## White Paper The American Society for Pharmacy Law

# Integration of Pharmacy Law & Public Health Policy Into a Pharmacy Law Course

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#### **Abstract:**

**Introduction:** Pharmacy students are exposed to several different methods for communicating with patients and other healthcare providers regarding pharmaceutical care; however, pharmacy school guidelines also require that students learn how to develop public health policy and communicate with policy makers at a broader level. **Design:** In RX526—Pharmacy, Policy and the Law course in spring 2012, we required P3 pharmacy students to work in teams to take pending public health or pharmacy law legislation in the Indiana Legislature or under Federal law, and evaluate the policy—look at cost factors, pros of the pending policy, and cons, then provide a firm recommendation on the policy based upon their own professional judgment. We also had a lawyer who works in Indiana politics speak to the students on how to speak to policy makers. Students had to draft presentations, bibliographies of their evidence to support their policy stance, practice communication skills, and create a one-page leave behind document for policy makers on the issue and which way to support the policy. Last but not least, we invited the two members of the Indiana Legislature that are also pharmacists into the classroom to ask questions of the groups and provide feedback regarding the final policy presentations.

**Evaluation, Assessment:** We utilized a rubric to assess students on the presentations—including a peer review component, written component, and oral/professionalism components of the projects. The policy group presentations consisted of points equal to the other two written examinations in the course, equal to approximately one-third of the total points in the course prior to the final examination.

**Summary:** Communicating with lawmakers is an absolutely critical skill all professional leaders need in order to drive a profession forward. Students throughout this course were exposed to and developed their skills in moving pharmacy forward, by learning how to communicate with lawmakers.

#### Introduction

Communication is a critical skill that any successful pharmacist must learn in order to be effective, both inside and outside the classroom. Students during pharmacy school learn how to communicate with a myriad of people—patients, physicians, nurses, and other healthcare providers. In the era of healthcare reform and rapid change in the and life sciences, pharmacists are now in a key position to talk to yet another audience--policy and law makers--regarding the profession of pharmacy, and how pharmacists may play a role in public health and wellness as a profession. Furthermore, it is imperative that pharmacists continue to enhance their communications with law and policymakers in order to move the profession forward and develop leadership skills, as leaders of any profession help shape policy and law.

Yet, pharmacy schools tend not to address how to communicate with the lawmaking audience during didactic learning. The Accreditation Council for Pharmacy Education's Accreditation Standards and Guidelines do address and encourage the development of public health policy skills in pharmacy students, under Health Care Delivery Systems, Economics/Pharmacoeconomics, and Practice Management guidelines.¹ After a curricular mapping exercise, it was determined that we at Butler had an opportunity to expand the education and assignments for pharmacy students around the public health, communication and policy outcomes. One of the advancements was developed in the Pharmacy Law Course for P3

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<sup>&</sup>lt;sup>1</sup> Accreditation Council for Pharmacy Education – Accreditation Standards and Guidelines For the Professional Program in Pharmacy Leading to the Doctor of Pharmacy Degree. Effective July 1, 2007. Available online at: <a href="http://bit.ly/MZ8PmH">http://bit.ly/MZ8PmH</a>. A search of "public health" led to several relevant standards.

pharmacy students—which is now called Pharmacy, Policy and the Law. We describe the policy integration within the course below.

## **Design**

Prior to spring, 2012, P3 pharmacy students were required to complete a pharmacy law course, RX526. This course was traditionally taught in didactic fashion, discussing both federal pharmacy law, as well as Indiana state pharmacy law. Students completed three examinations, 2-hours in length, and a final exam. This spring, we changed the name of the course to "Pharmacy, Policy, and the Law" and made one of the three exams focused purely on policy, and gave smaller policy essay assignments on the other two examinations during the semester.

The first two examinations each had one essay question for up to 10 points around a legal/policy issue related to pharmacy practice and/or public health. The purpose of the two shorter essay sections on each of the first two examinations was to teach the students how to advocate for a piece of pending legislation, but review both sides of an argument prior to making a final decision, much like the issue, rule, analysis and conclusion (IRAC) format utilized in legal education. The rest of the first two examinations used traditional multiple-choice questions focused on the federal and/or state law covered during the didactic section of the course.

In place of the traditional third examination, students at the beginning of the semester were instructed that they would instead give small team presentations on a piece of pending federal, state, or local pharmacy or public health legislation of their choice. The outline of the group policy presentation assignment was posted within the course syllabus. Students were to assume they were presenting to a

policy committee in the appropriate legislative body, committee, or city council.

During a 15-minute presentation, small groups were to produce and present the following:

- 1. A PowerPoint or Prezi presentation and/or utilization of any other relevant technology they deemed necessary to present the information to their audience. Presentations should be 10 minutes, with 5 minutes of questions and answers allotted; and
- 2. A bibliography of their references, including citations to relevant cases, articles and news, formatted per the College's citation guide; and
- 3. A one-page written leave behind arguing for their proposed changes in law or policy.

Students were encouraged to pick their own teams early in the semester, and each class session allotted some time for the students to work on identifying their teams, choosing their preferred legislative topic, gathering research, and managing the final presentations. During the week of selecting presentation topics, one representative from each team drew a number out of a hat for order of preferences on topics, as one unique topic per team was required.

There were approximately 120 students in the class, and students had to form teams of 6-7 students. Each team picked a person to upload the slides, bibliography and one-page leave behind to the University course load sharing system (Blackboard®, Blackboard Inc., Washington, D.C.). Although the policy presentations of the course required two class sessions, all students were required to upload their work a week before the actual final presentations in order not to give the latter presenting students an advantage.

A P4 pharmacy student on her final year of advanced practice rotations created a list of pending legislation in Indiana with the state pharmacy professional society (Indiana Pharmacists Alliance), in conjunction with a Senator in Indiana

(Senator Ron Grooms) and a House Representative (Representative Steve Davisson), who are both also pharmacists. The collection of pending legislation was mailed to the course coordinator, and students were allowed to choose their topic from this list, along with watching local and state news and pending legislation, as well as pending federal legislation. Other pending policy and legislative issues were posted from local and state news, along with national news articles via Blackboard®. After self-selecting their teams, the groups then chose topics. Some of the topics selected and presented by groups included the following:

Group Topics: Policy Assignment				
Smoking Ban in Indianapolis, IN	Plan B: Age Limit for Dispensing	Regulation of Direct to Consumer Advertising		
Healthcare Professionals' Conscience Clause	Drug Testing for Government Aid Programs	Smoking Cessation Coverage by Indiana Medicaid		
Immunizations	Mandated Pharmacist Breaks	Expiration Date on CII Prescriptions - IN State		
ADHD Drug Shortages & REMS	Drug Shortages - Injectable Drugs	Pseudoephedrine Restrictions and Control Status at IN State		
Surprise Audits by Insurance Companies	Dispensing Rx drugs - 90 Day Supply OK by Pharmacist	Voiding Certain Medicaid Rules		

Each week of the course involved some level of production around the policy presentations during the semester. Once teams and topics were selected, the course coordinator brought in a political commentator and legal expert (Abdul-Hakim Shabazz, attorney and founder of IndyPolitics.org) to talk to the students about how to talk to lawmakers. During this presentation, we also introduced the rough outline for students to start preparing their presentations, including an introduction to the

issue or subject, the history of that subject legislatively, the legislative bodies included in the decision making for the law – state legislature, city council, or federal agency.

Also, the students were required to include their arguments for both sides of the pending legislation--for and against--along with a cost issue analysis, an enforcement analysis, and a conclusion coming out one way or the other in closing. Timing for presentations again was 10 minutes, and students could choose on their teams who in the group would actually present to the rest of the class during the final presentations, with 2-5 minutes for questions and answers.

## **Evaluation/Assessment**

There were several technical objectives to this assignment: 1. Working on a team, 2. Written communication skills, including brevity, 3. Oral communication skills, speaking persuasively, and how to communicate with professionals outside pharmacy. The content objectives were to think critically about pending legislation, view both sides—pro and con—to a piece of pending legislation, review the literature critically around history of the policy in question, and understand the process of arguing and advocating policy while becoming a healthcare professional.

Several weeks before the presentations were given, a rubric of expectations on the assignment was distributed (see Appendix A). The rubric contains both written communication assessment (the presentation, bibliography and one-page leave behind), oral presentation (each section presented as part of the aforementioned outline), whether or not questions were addressed, and if professionalism was achieved during the presentation. Last but not least, we

included a "peer review" of each student, whereby each student had to peers within their teams on a 5-point Likert scale. Peer review is an important component of any group or team project, as it holds students accountable to each other. A peer-review score of zero was equal to the student not carrying her weight in the group, and 5 points was the highest score. The peer review form was voluntarily created by a P3 student in the class, which essentially had space for team members and then a scale from 0-5 points. Each student's peer review ratings were averaged individually, and they could earn up to a perfect score of 5 points for the peer review portion of the rubric.

The course coordinator scored the oral presentations and assessed the written materials. Also, we invited back into the classroom the presenter on policy (Abdul-Hakim Shabazz) to ask questions of each team after presentations. Similarly, we also invited Senator Grooms and Representative Davisson into the classroom to ask questions, hear the students' perspectives, and give actual updates on where the pieces of legislation were in the Indiana Legislature. Both legislators found the sessions interesting and insightful, and this presented the advantage of having the professionals who actually <u>drafted</u> much of the pending legislation questioning the students.

The one-page leave behind was assessed for being succinct, brief, and clearly articulating both sides of the argument, but landing on the ultimate position—yay or nay—of the majority of the group. This is a similar practice to advocating for or against an issue when addressing real world pending legislation.

Last, as a bonus assignment, students could choose to participate in an optional writing assignment, summarizing all of the presentations given by their

colleagues, in writing. The optional assignment is summarized in Appendix B. The assignment was sixteen points of the overall course score, out of zero points (i.e., extra credit.)

Overall assessment of the entire course was completed using a standardized form for all coursework at the University (IDEA form, The Idea Center, Manhattan, KS), which fails to explicitly allow for comments. However, the students met the objectives of the course in part by participating in the development of policy as part of the course this first year. Plans for the course next year include similar policy coursework, along with better student assessment of the course and the policy assignments. The average score ranged between 80%-97% for the spring, 2012 class.

### **Summary**

In the era of healthcare reform and rapid change, it is imperative that pharmacy students understand how to talk to another audience on top of patients and other healthcare providers, policymakers. In the exercises outlined above, students polished their skills in teamwork, written communication, oral communication in Pharmacy, Policy and the Law. They also better understand through the exercises above how lawmakers think and assess pending legislation. In the future, students should as they embark upon their profession be less intimidated by working with policymakers, and more passionate about sharing what pharmacists can do to serve as part of the healthcare team.

The author would like to thank Joseph Fink III, Professor of Pharmacy Law and Policy, at the University of Kentucky, for his editorial review of this white paper.

## **Appendix A: Grading Rubric for Policy Presentations**

	Topic:		
	<del>_</del>		
Grading Rubric -	Policy Topics - RX 526 - Pharmacy, Policy and the Law -	Spring 2012	
Written Materia	als:		
1. A PowerPoint	or Prezi presentation and utilize any other means of		
	mation to your classmates you feel appropriate. (10		
I.	nt) - if using Prezi, send me the link on time and ensure		
	ple before your presentation. If Powerpoint, upload the		
slides in Blackbo	γ including citations to relevant cases and articles using		-
	e (10 points = excellent); a MINIMUM of 5 citations		
	for this presentation		
3. A one-page le excellent)	ave behind arguing your change/policy. (10 points =		
*minus 20 point	s of written portion if materials are turned in late=		30 pts
Oral Presentation	nn:		
Ordiffesentatio			7
Introduction of S	Subject & team (Yes= 5 points, No = 0 points)		
History of subject	ct - how did we get here? (5 points = excellent)		
Thistory or subject	transmit we get here: (5 points – extenent)		
Who is involved	? State, Federal or both levels of government?		
Agencies? (5 poi	nts = excellent)		
Pro arguments f	or your subject (10 points = excellent)		
	for your subject (10 points = excellent)		
Cost issues addr	essed? (5 points=yes; 0 points = no)		
Enforcement iss	ues addressed? (5 points=yes; 0 points = no)		
Canalysian ma	or con and W/IV2/F points - evenlent		
	or con and WHY? (5 points = excellent) s 10-12 min in length (5 points = in range; -2 points per		-
minute over)	3 10 12 mm mengan (5 points m range, 2 points per		
Questions addre	essed (5 points = excellent)		
	·		$\dashv$
	Professionally, delivery of presentation clear, good use see of visual aids (5 points = excellent)		65 pts
or voice, good us	בי סו אוגעמו מועג ניט איטוונג – באניבוופוונן	I	Too hre
Peer review:		ı	_
	co-authors' review of you (5=excellent; 4=very good;		E ptc t
[5=good; Z=accer	otable; 1-0=did not carry weight on team)		5 pts to
			7
TOTAL POSSIBLE	POINTS = 100		100 pts

### Appendix B:

RX526 – Pharmacy, Policy and the Law Optional Policy Project Assignment (16 points total – all or none)

Many of you have requested an optional assignment to earn more points over the semester in the course. Below is the <u>optional</u> assignment around the policy presentations on 4/23 and 4/30. Should you choose to complete this assignment, 16 points will be added to your point total in the course, should you adequately complete <u>all</u> the criteria below.

**Optional assignment:** For an <u>optional</u> 16 points in this course, write up a 200-word summary of **each** of the 16 policy topics presented on 4/23 and 4/30 of this semester. In each of the 200-word, #16 summaries, I will need the following information in the order it is presented in the class:

- Title of Policy Topic
- A summary of the issue/presentation
- Where the group presenting lands on the topic (whether the group presenting agrees with the policy, disagrees with it, and/or proposes something different and what that proposal entails)
- · Where you personally stand on that issue and
- WHY you take that position on this topic.

Summaries must be well written, thoughtful, and grammatically correct with no spelling errors.

**Formatting:** double space each of your topic answers, with at least a 10-point legible font. Include your name, mail box number, RX526 and "Optional Policy Writing Assignment" at the top right hand corner of the first page of your paper. The paper must be typewritten. No hand-written assignments will be accepted.

**Attendance:** I reserve the right to take attendance on 4/23 and 4/30 to ensure you are in the audience for purposes of this assignment, as you must attend live to create your own original summaries. If you do not sign in on both attendance rosters, **you will not be eligible for these 16 points,** regardless of whether or not you turn in your optional assignment.

**Deadline for assignment:** I will need a hard copy of this assignment printed out, stapled, and turned in to my office PB 101 by no later than Wednesday, May  $2^{nd}$  at 3 pm.

- Emailed papers will **NOT** be accepted.
- Late papers will **NOT** be accepted.
- Papers turned in via Blackboard will not be accepted.
- Partially completed assignments will not be accepted nor graded.

**All or none:** The optional 16 points are all or none on this assignment. For example, if you summarize only 8 of the 16 topics presented, you will NOT receive 8 points. **You must complete a summary of each of the 16 topics INCLUDING YOUR OWN TOPIC in order to receive the 16 points.** No exceptions, and no partial credit will be given.