



TRAINERS GUIDE

OVERVIEW/SCHEDULE

This module is designed to take 45 minutes. Options for additional and follow-up activities are included. A general break down of the time is as follows:

WELCOME, INTRODUCTIONS, AND CASE STUDY

Welcome and Why We're Here (5 minutes)

Case Study (5 minutes)

CORE CONCEPT (15 minutes)

PRACTICE (15 minutes)

CLOSING, EVALUATION, AND OPPORTUNITIES (15 minutes)

Please note that this module is more content heavy than the other modules. This is due to the level of details within the legislative process. These details were included in order to give pediatric residents an overall understanding of the legislative process at the local, state, and national level. As such, you may find it challenging to cover all of the content contained within this trainer guide into a 45 minute time frame. If time becomes a challenge for you, we suggest skipping the practice section (the How a Bill Becomes a Law game). Instead, this game can be given to pediatric residents as a "take away" from the module.

EDUCATIONAL OBJECTIVES

This module is designed to give pediatric residents a basic understanding of the legislative process. The intent of the module is:

To define advocacy; the role it plays in improving children's health and well-being; and the unique role pediatric residents can play in advocating on behalf of children.

To provide pediatric residents with a basic understanding of the legislative process and the opportunities throughout the process where they can use their voice to advocate on behalf of issues they care about. Please note that while there are differences from state to state regarding the legislative process and distinctions between the way state legislatures and the US Congress pass legislation, the module is designed to build a general familiarity and understanding of how the legislative process works.

To increase pediatric residents advocacy-related confidence and comfort level.

To demonstrate that advocacy is doable and can fit within the demands of a pediatric resident's busy schedule.

MATERIALS AND EQUIPMENT

For this module, you will need the following handouts, materials, and equipment:

Handouts:

- Copies of the evaluation for each pediatric resident participating in the module.
- Copies of the Opportunities Worksheet. The Opportunities Worksheet contains a list of advocacy activities that relate to the module's topic and can be performed by pediatric residents following the module as their interest and time allows.
- Copies of the advocacy leadership skills inventory.
- Quick Reference Cards that contain instructions for looking up chapter contact information and links to additional resources.

Equipment:

- Flip chart or white board
- Markers/Dry erase markers for flip chart/white board

If using PowerPoint:

- PowerPoint projector
- Screen or white wall for viewing PowerPoint
- Copy of PowerPoint with trainer notes on computer or zip drive.

If using School House Rock YouTube video in place of PowerPoint::

- Internet connection with projector
- School House Rock YouTube link: <http://www.youtube.com/watch?v=mEJL2Uuv-oQ>. DVD's of the School House Rock video are also available at www.amazon.com or www.barnesandnoble.com.
- Copies of the "How a Bill Becomes a Law" board game, playing pieces, dice, and instruction guide (one game per group of four residents, along with four playing pieces, one dice, and four instruction guides per group).

ROOM SET-UP AND ENVIRONMENT

You are encouraged to set-up the room in a way that promotes participation and provides a safe learning environment for pediatric residents. Some room set-up tips to consider include:

- Setting up tables in a "u-shaped" formation to encourage sharing.
- Greeting residents as they enter the room.
- Playing upbeat music as residents are coming in to the room.
- Providing refreshments.

WELCOME, INTRODUCTIONS, AND CASE STUDY

TRAINER NOTE:

The Welcome, Introductions, and Case Study section is designed to give you the opportunity to welcome pediatric residents and quickly highlight the topic and skills that will be covered within the module. It also includes a case study or story from an actual pediatric resident that illustrates the role a pediatric resident can play in relation to the module's advocacy topic. The purpose of the case study is to provide a familiar and comfortable format for introducing the module's topic in a way that pediatric residents can relate to.

The Welcome, Introduction, and Case Study section is designed to take about ten minutes total. The Welcome and Why We're Here sections should take roughly five minutes total with the Case Study section taking another five minutes.

WELCOME

Welcome everyone.

Acknowledge that pediatric residents have a lot going on in their lives right now and thank them in advance for being here today.

Briefly introduce yourself. Some things to consider sharing include:

- Your experience with advocacy work.
- Why you got into your career path.
- How you've personally seen advocacy improve the health and well-being of children and/or the profession of pediatrics.
- A personal quotation that relates to the training module topic.

Optional: If time allows, briefly ask each pediatric resident participant to share a story about why they wanted to become a pediatrician. If it is a large group, consider simply asking for a show of hands from those who have participated in advocacy before. If only a few people raise their hands, mention that advocacy simply means speaking out on your patients' behalf or helping influence a choice or decision. Ask for a show of hands for specific advocacy activities that pediatric residents may have participated in, such as voting, writing a letter of medical necessity for a patient, calling a specialist to get a patient an earlier appointment, e-mailing a decision-maker or elected official, or talking to a friend, family member, or colleague about a children's health issue that is important to you.

Mention that there is a lot of wisdom and experience in the room. Encourage pediatric residents to share and participate throughout the training module.

WHY WE'RE HERE

TRAINER NOTE:

The Why We're Here section is meant to be included in each module. The intentional repetition is designed to help underscore the key training principles for the pediatric residency training program—that advocacy is important and doable, that pediatric residents are uniquely positioned to be powerful advocates, and that advocacy is not much different from the work pediatric residents are already doing.

Briefly share why advocacy is an important part of being a pediatrician. Some talking points include:

Advocacy means speaking out on your patients' behalf. Advocacy assumes that there is a problem that needs to be changed and it is a way to drive, or affect that change.

As a pediatric resident, you are already engaged in individual advocacy. Individual advocacy describes the work you are already doing to improve the health and well-being of individual patients. This could include calling the insurance company, school, another provider, or a social service agency on behalf of an individual patient.

Individual advocacy easily translates to the community, state, and federal level advocacy that we will talk about during today's module. At its core, each level of advocacy is about speaking out on behalf of children's health and well-being, whether it is for one child or for systematic solutions that benefit many children.

Pediatricians can play a powerful role in creating lasting and meaningful change for the patients they serve. We're here today to continue that tradition—Isaac Abt, MD, the first AAP President, said: "It should be our aim to discover neglected problems and, so far as in our power, to correct evils and introduce reform."

CASE STUDY

Focus of today's module is on the overview of the legislative process.

Purpose of the module is to help inform you where in the legislative process you can use your voice to speak out on behalf of children's health and wellbeing and other issues that you care about.

Share a case study from a pediatric resident that illustrates how other pediatric residents have got involved or used the process to advocate on behalf of an issue that was important to them:

PEDIATRICIAN ADVOCACY STORY

As a pediatric resident, I worked with kids in juvenile detention. Once the youth left the juvenile detention center, many were without ongoing medical treatment because they did not have health insurance. I wanted to work to get them enrolled into public health insurance programs before they were released back into the community. I saw the youth's lack of health insurance as the first hurdle for getting them connected into medical homes.

I set up a meeting and met with a staff person from my state senator's office in order to share this concern. I provided her with information regarding the current state of health care for youth in juvenile detention. I discussed why these kids were a group that especially needed access to health care.

My story brought home why this issue was important and why legislative change was needed. It served as the impetus behind SB1469, a piece of legislation introduced by California State Senator Gil Cedillo from Los Angeles. This legislation makes it mandatory for county juvenile halls to enroll eligible youth into public health insurance programs as part of their release protocol. The bill passed both the state senate and assembly and was signed into law by the governor. California's adolescents in juvenile detention now have a better chance of getting plugged into a medical home upon release because of an idea I had as a resident.

Mana Golzari, M.D.

Following the case study, ask pediatricians their reactions to the case study, including what they liked about it and what surprised them about it.

Note that the case study illustrates that:

Pediatric residents don't need to be experts in the process or be intimately involved in policy change every step of the way. Advocacy, after all, consists of a series of steps. It often starts with just one small step. By understanding how and when to use the process—in this case meeting with her state senator's staff—small increments of time can lead to big change on behalf of children's health and well-being.

Change can take time. The bill in the case study didn't pass overnight—many people who care about children—including pediatricians, psychologists, juvenile court judges, parole officers, social workers, and lawyers—took a few minutes of their time to write, call, or e-mail their legislators in support of this bill. Some even testified publicly at the State Capitol in support of the bill. Each of these individual advocates can share in the success of this new law that further protects children's health and well-being.

When getting started with advocacy, it is important to define success. Not all good ideas become laws. Even if an issue you care about doesn't become a law, your advocacy raises attention to the issue and builds dialogue about children's health and wellbeing.

By raising awareness at the local level, you might get a neighborhood or city to change. This can help children in those communities and can build a case for a statewide or national law.

As a pediatric resident, it's important for you to remember that when you speak out or advocate on behalf of children's health and wellbeing, decision-makers will see you as

children’s health experts. Pediatric residents are powerful advocates and can effect positive change because they are credible and well-respected in the community, have compelling stories to tell, and have science on their side.

Ask pediatric residents what issues they see in their work that they’d like to change. Write these issues on a white board or flip chart.

CORE CONCEPT

TRAINER NOTE:

The Core Concept section of the Overview of the Legislative Process module emphasizes the “how to” or the basic tips and information pediatric residents need to keep in mind in relationship to the module’s topic. The purpose of this section is to emphasize how the skills used in this concept relate to the skills pediatric residents use in their work everyday.

This section includes two options for presenting the core concept:

- A brief PowerPoint accompanied by guided group brainstorms and prompting questions that you can use to present the skills and encourage pediatric residents to share their experiences and input.*
- An alternate activity that includes a different medium for presenting the core concept. For this module, the alternative activity is the School House Rocks video, “How a Bill Becomes a Law.” The module contains a link to the video, information on where to purchase the video, as well as guided questions that follow the video.*

The two options are designed to help you build flexibility into the pediatric residency advocacy training program curriculum. It allows you to pick and choose which teaching medium to use based on your time, resources, and the current needs and make-up of the pediatric resident participants.

The Core Concept section is designed to take about 15 minutes.

OPTION #1: POWERPOINT AND GUIDED QUESTIONS

Point out that many of the issues just shared, and that the group would like to see changed, can be addressed through legislative change.

Note that the PowerPoint you are about to walk through focuses on how to understand and use the legislative process in order to create change for children’s health and wellbeing.

Show PowerPoint. As you are presenting the PowerPoint, pay special attention to the notes section. The PowerPoint notes section includes key points and prompting ques-

tions to include in your presentation.

Following the PowerPoint, ask the pediatric residents if they have questions. Spend a few minutes answering their questions.

Briefly mention that pediatric residents—acting as individual citizens—can contact decision-makers on behalf of any issue; however, they need to be careful that unless they have been given explicit permission, they should never speak on behalf of the AAP, their hospital, or their training program. When in doubt, please check with your place of employment or the AAP.

OPTION #2: VIDEO: SCHOOL HOUSE ROCK "I'M JUST A BILL"

TRAINER NOTE:

The School House Rock cartoon was chosen because it provides a fun and non-intimidating way to learn about the process. While the cartoon was originally created for children, we believe that pediatric residents will also enjoy the light and entertaining format.

We suggest prefacing the video with a note that it focuses on the Congressional/federal process. State processes are similar, but have some unique nuances, including procedures, deadlines, powers, etc. Let pediatric residents know that information on their specific state's process can be found by following the links provided through the AAP Advocacy Guide. (Pediatric residents will receive a card at the end of module with links to the AAP Advocacy Guide.)

Point out that many of the issues just shared, and that the group would like to see changed, can be addressed through legislative change.

Note that the video that they are about to watch focuses on how to understand and use the legislative process in order to create change for children's health and wellbeing.

Emphasize that the video, School House Rock "I'm Just a Bill", is a cartoon designed to teach children about the legislative process. Explain that you are using a cartoon because it's not important for pediatric residents to be an expert on the legislative process.

Refer back to the case study to illustrate that the pediatric resident we heard about was not an expert on the legislative process, but rather, had a basic understanding of the decision-making process and where he/she could weigh-in to influence these decisions by telling their story.

A basic familiarity is all you need to know about how decisions are made and when. This information can help inform you on how to best influence public policies that affect children's health and wellbeing.

Play video.

After video, summarize the following points that pediatric residents should keep in mind in regards to the legislative process:

- Important to remember you don't have to be a legislative expert to effect change.
- Decision-makers who are voting on a bill do not necessarily have health or medical backgrounds and need to hear from people who do – including pediatric residents.

Ask the group: When are the opportune times in the legislative process to weigh-in on public policies affecting children's health and wellbeing? (Look for coming up with the idea to have a bill, during committee hearings, before key votes, before the bill goes to the executive branch).

Ask the group: Who should you talk to in order to help an idea become a bill, or to help a bill become a law? (Look for their own decision-makers—local, state, and federal, as well as key committee members, executive branches of government, and decision-makers in charge of setting budgets).

Briefly mention that pediatric residents—acting as individual citizens—can contact decision-makers on behalf of any issue; however, they need to be careful that unless they have been given explicit permission, they should never speak on behalf of the AAP, their hospital, or their training program. When in doubt, please check with your place of employment or the AAP.

As time allows, ask the pediatric residents if they have questions. Spend a few minutes answering their questions.

PRACTICE

TRAINER NOTE:

The Practice section of the Overview of the Legislative Process module allows pediatric residents to practice what they have just learned and increase their comfort level with the advocacy topic in a safe, fun, interactive, and open environment.

The practice section is designed to take about 15 minutes.

HOW A BILL BECOMES A LAW BOARD GAME

TRAINER NOTE:

Ten minutes will not likely provide enough time for residents to finish the game, but will provide a good introduction to the process. Let pediatric residents know that they may not finish the game but are encouraged to take the game, as well as the handout, with them for future reference. Consider encouraging pediatric residents to leave the game in their lounge so their colleagues can play it as well.

Tell the pediatric residents that now that they have learned about the basics of the legislative process, they are going to have a chance to practice their new found knowledge by playing the “How a Bill Becomes a Law” board game from Families USA.

Divide the group into teams of four people each. Give each team a “How a Bill Becomes a Law” board game, dice, and playing pieces, and take-home instruction guide.

Ask each pediatric resident to select a game piece. Let pediatric residents know that they will be taking turns within their team to shake the dice. Once they shake the dice, they should move their game piece according to the roll. Ask them to pay special attention to places along the way where they could weigh-in on public policies that relate to children’s health and wellbeing. Let them know that they will not likely have enough time to finish the game, but playing the game will help build a greater familiarity with the legislative process and where and when they can influence the process.

Alternatively, to demonstrate that one can become involved at any step in the process, before handing out the game, ask each resident to select a number between one and fifty. After handing out the game, ask them to place their playing piece on the square corresponding with the number they have selected.

Tell the group that they can take the longer instruction sheet with them to reference after today. Encourage them to begin playing the game immediately and let them know it is not necessary for them to read it before they begin the game.

After the groups have had about ten minutes to play the game, ask them to come back as a large group.

As time permits, ask pediatric residents for their feedback on the game. Some examples of questions to ask could include:

- What did they like or dislike about playing the game?
- What made you feel hopeful about it?
- Did where you started the game change how you felt about it?
- Where were some key places that you identified you could influence health public policy?
- Who are the people who can affect whether a bill becomes a law? (Participants will likely mention elected officials, key committee members, and members of the executive branch. Remind pediatric residents that they can also affect the process by contacting decision-makers and sharing their experience and perspectives as a pediatric resident.)
- What did they learn from the game?

CLOSING, EVALUATION, AND OPPORTUNITIES

TRAINER NOTE:

The purpose of the closing, evaluation, and opportunities section is to provide closure on the module's topic, identify action steps that pediatric residents can do next as a result of attending this training module, and gives pediatric residents a chance to evaluate the session.

The closing and evaluation section is designed to take about five minutes.

CLOSING

Thank pediatric residents for participating in the training module.

Emphasize that advocacy doesn't have to be hard or take a lot of their time. It's really about using their voice to speak on their patients' behalf.

Don't get frustrated if you don't see immediate results. Change takes time. Know that your actions make a difference, celebrate the small steps, and stay persistent.

Remind them that they don't have to be experts on the legislative process. In fact, they already know everything they need to know about the decision-making process in order to influence public policies that affect children's health and wellbeing.

Let pediatric residents know their voice is needed in the legislative process. Pediatric residents can provide decision-makers with information and expertise in the area of children's health and wellbeing, and also help decision-makers understand the affects of public policy by putting a human face on children's health issues.

EVALUATION

Invite any final questions or observations from the group.

Optional: If time allows, go around the room and ask each pediatric resident to share one thing that they learned today about how they can influence the legislative process or one thing they will do to influence the legislative process on behalf of a children's health issue in the future.

Pass out an evaluation form to each pediatric resident and ask them to fill it out and turn it in.

OPPORTUNITIES

While pediatric residents are completing their evaluations, hand out the Opportunities Worksheet that contains a list of activities that residents can do over the next month to deepen their understanding of the skills highlighted in today's module.

Tell pediatric residents that these opportunities were designed with their busy schedule in mind and many of them can be done in as little as five minutes.

Consider offering an incentive or prize to residents who complete opportunities listed on the sheet. One idea is to ask residents to e-mail the opportunities they completed to you and allow a couple minutes at the beginning of the next module to recognize residents' efforts and give them a round of applause.

Also, hand out Quick Reference Cards with links to accompanying information and materials related to this module. Encourage pediatric residents to put this card in their pocket or wallet and access the link when they have time.

Thank pediatric residents one last time for their time and participation at today's module.