

Menyusun *Policy Brief*:

Meningkatkan Ketertarikan Pemerintah (dan Pemerintah Daerah) dalam Mutu Pelayanan Kesehatan

Ari Probandari

Forum Mutu Pelayanan Kesehatan 2013
Indonesian Health Quality Network
Jakarta, 19 November 2013

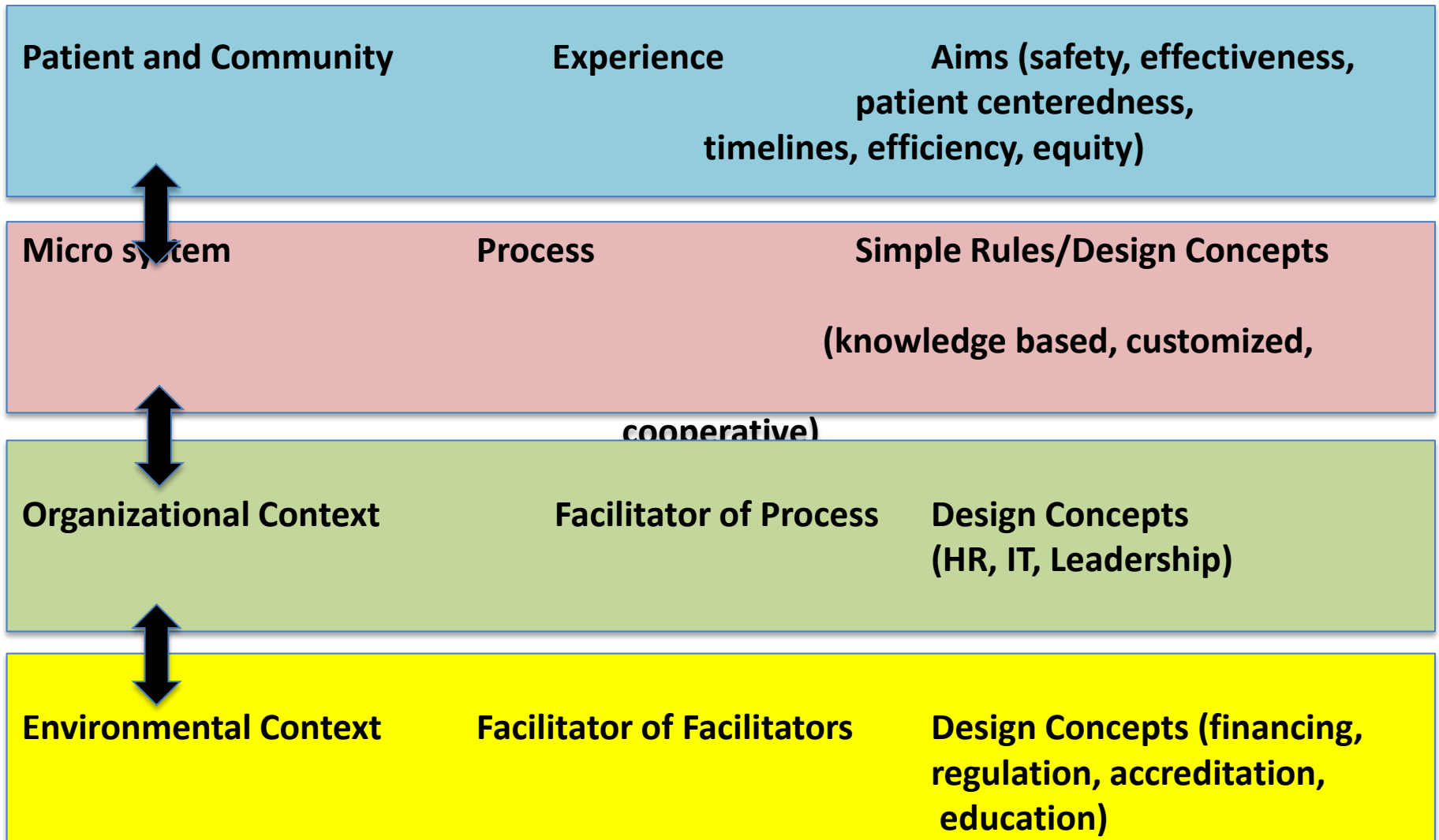
Struktur Presentasi

- Apakah *Policy Brief*
- Mengapa perlu *Policy Brief*
- Bagaimana cara membuat *Policy Brief*
- Contoh-contoh *Policy Brief*

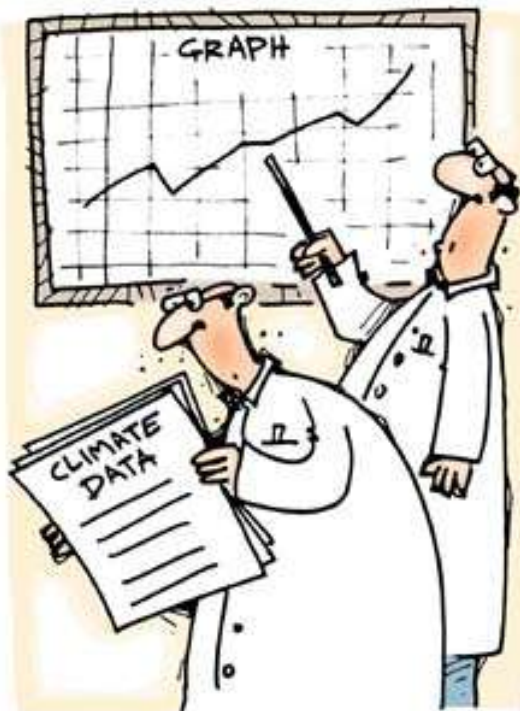
“Research is not complete until it is written up and its results shared, not only with other scientists who may build upon it to further advance the science, but also with those who may benefit from it, who may use it, and who have a stake in it.”

http://whqlibdoc.who.int/emro/2004/9290213639_chap10.pdf

The Chain of Effect in Improving Healthcare Quality (Berwick, 2001)



ASSESSING THE IMPACT OF CLIMATE CHANGE ...



THE SCIENTISTS

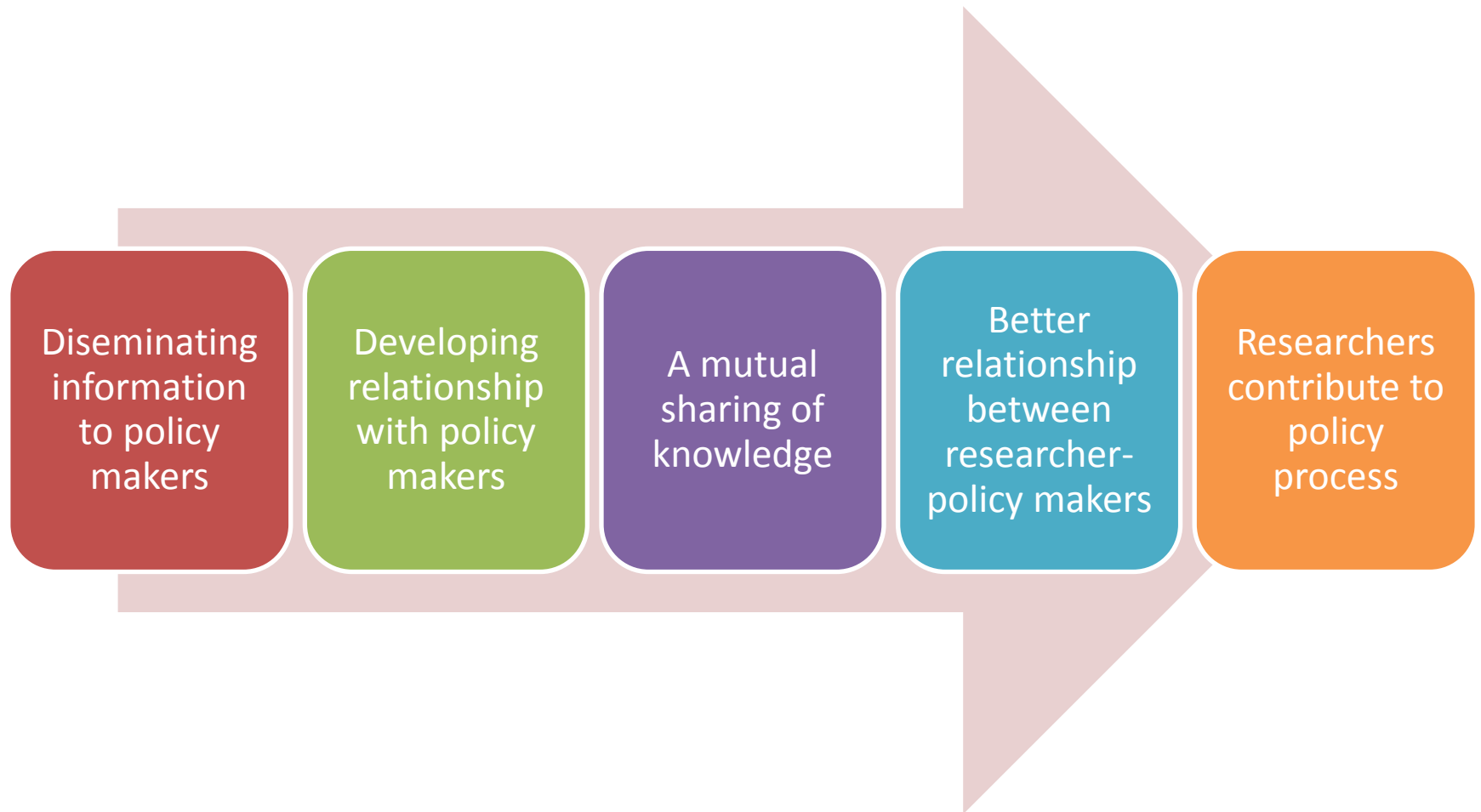


THE POLITICIANS

MICKINCT

SEPTEMBER 2007





Friese B, Bogenschneider K. The Voice of Experience: How Social Scientists Communicate Family Research to Policymakers. *Fam Relat* 2009; 58(2): 229-243

Apakah *Policy Brief*?

Policy Brief

- Dokumen singkat untuk mempresentasikan hasil dan rekomendasi aksi dari suatu penelitian pada audiens non peneliti
 - 2-4 halaman, 1500 kata
 - Mudah dimengerti
- Bertujuan mendorong perubahan kebijakan dan/atau program

http://www.jhsph.edu/research/centers-and-institutes/womens-and-childrens-health-policy-center/de/policy_brief/video

Topik-Topik dalam *Policy Brief*

- Kesenjangan antara kebijakan yang “seharusnya” dan praktik yang berjalan
- Masalah jelas, solusi tidak jelas
- Masalah berkembang, tetapi belum mendapat perhatian
- Pengetahuan baru dengan implikasi untuk kebijakan dan program



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Health Policy Brief

FEBRUARY 14, 2013

Patient Engagement. People actively involved in their health and health care tend to have better outcomes—and, some evidence suggests, lower costs.

WHAT'S THE ISSUE?

A growing body of evidence demonstrates that patients who are more actively involved in their health care experience better health outcomes and incur lower costs. As a result, many public and private health care organizations are employing strategies to better en-

their medical conditions. What's more, the US health care system often has seemed indifferent to patients' desires and needs. Many practitioners fail to provide the information that patients need to make the best decisions about their own care and treatment. And even when patients do receive detailed information, they can be overwhelmed or lack confidence in

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Health Policy Brief

SEPTEMBER 13, 2012

Improving Care Transitions. Better coordination of patient transfers among care sites and the community could save money and improve the quality of care.

WHAT'S THE ISSUE?

The term *care transition* describes a continuous process in which a patient's care shifts from being provided in one setting of care to another, such as from a hospital to a patient's

Institute of Medicine (IOM) report, *Crossing the Quality Chasm*, described the US system as decentralized, complicated, and poorly organized, specifically noting "layers of processes and handoffs that patients and families find bewildering and clinicians view as wasteful."



Primary Care Capacity and Health Reform: Is Michigan Ready?

B
R
I
E
F

In the fall of 2012, the Center for Healthcare Research & Transformation (CHRT), in partnership with the Child Health Evaluation & Research Unit (CHEAR) at the University of Michigan, conducted a statewide survey of primary care physicians. The purpose of the survey was to understand the challenges and opportunities primary care physicians are facing in their practices in this era of health care reform. Our goal was to inform policy makers on a number of key issues ranging from meaningful use of electronic

MAJOR FINDINGS

Capacity to Serve New Patients By Specialty	2
Capacity to Serve New Patients by Geography.....	3



Kesalahan baca berakibat
kesalahan diagnosis

SKILL PETUGAS LABORATORIUM PUSKESMAS

PENENTU DIAGNOSIS TUBERKULOSIS

by :

Siti Zuraidah, Martini, Bagoes Widjanarko, dkk

Diagnosis Tuberkulosis :

- Standard Baku diagnosis adalah pemeriksaan mikroskopis
- Kualitas pemeriksaan ditentukan oleh skill petugas laboratorium puskesmas
- Tahap Pemeriksaan mikroskop meliputi : pengambilan dahak, fiksasi, pewarnaan, pembacaan hasil, dan interpretasi hasil

Masalah :

- Belum semua puskesmas mengirimkan crosscheck secara rutin setiap bulan.
- Dari total puskesmas yang mengirim, 20-30% mempunyai Angka Kesalahan baca di atas 5%.
- Pemantapan kualitas internal jarang dilakukan.
- Validasi hasil (cross check) masih menunjukkan false positif dan false negatif > 5%

Bagaimana Cara Membuat *Policy Brief*?

Tahapan Membuat *Policy Brief*



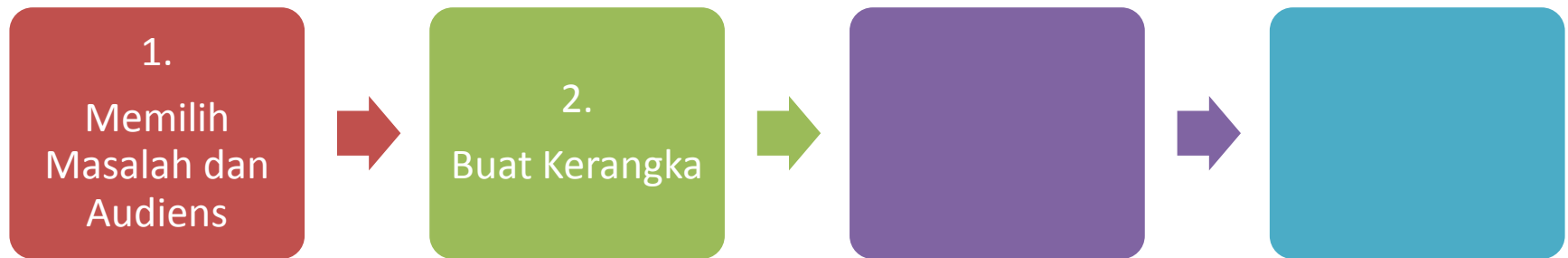
1. Memilih Masalah dan Audiens [1]

- Apa masalah yang diangkat dalam *policy brief*?
- Apa saja *policy brief* yang sudah ada? Apa bedanya *policy brief* yang anda tulis dengan yang sudah ada?

1. Memilih Masalah dan Audiens [2]

- Siapa audiens dari *policy brief*?
- Apakah masalah yang dipilih penting untuk audiens?
- Isu-isu apa yang membuat mereka “klik”? Masalah apa yang mereka minati?
- Bagaimana level pengetahuan audiens terhadap masalah yang kita tulis dalam *policy brief*? Informasi apa yang mereka butuhkan?
- Seberapa terbuka mereka terhadap masalah yang kita angkat ?

Tahapan Membuat *Policy Brief*



2. Membuat Kerangka *Policy Brief* [1]

- Tujuan
 - Tulis dalam 1-2 kalimat
 - Haluan isi policy brief
- Masalah
 - Mengapa masalah tersebut penting bagi audiens?
 - Apa *impact* dari masalah?
 - Apa solusi yang sudah dicoba dilakukan?
 - Apa pilihan kebijakan yang ada?

2. Membuat Kerangka *Policy Brief* [2]

- Rekomendasi
 - Apa aksi yang anda rekomendasikan?
 - Didukung bukti
 - Sesuai dengan argumentasi
 - Spesifik
 - Sesuai untuk audiens
- Judul: informatif, menarik

Mana Judul yang Lebih Menarik?

Implementasi Program
Patient Safety di Rumah
Sakit Umum di Provinsi
D.I. Yogyakarta

Variasi Implementasi
Program Safety di Rumah
Sakit Umum di Provinsi
D.I. Yogyakarta

Apakah Rumah Sakit Umum
di D.I. Yogyakarta sudah
Menerapkan Program
Patient Safety secara
Standar?

Mana Judul yang Lebih Menarik?

Keterampilan Petugas
Laboratorium Puskesmas
Penentu Diagnosis
Tuberkulosis

Keterampilan Petugas
Laboratorium Puskesmas
Penentu Diagnosis
Tuberkulosis:
**Kesalahan Baca Berakibat
Kesalahan Diagnosis**

Tahapan Membuat *Policy Brief*



3. Menulis [1]

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- Mulai dari kesimpulan penelitian
- Argumentasi logis

3. Menulis [2]

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Atur visual

- *Headings*
- *Bullets*
- Tonjolkan isu penting

3. Menulis [2]

21%

Increased medical costs

Patients with the lowest activation scores—having the least skills and confidence to actively engage in their own health care—incurred costs up to 21 percent higher than patients with the highest activation levels.

Both cases, the coaches gave patients knowledge and awareness of their treatment options, helped them to sort out their treatment preferences, and encouraged them to communicate those preferences to their health care providers. The primary difference between the groups was the proportion of participants receiving health coaching was higher in the enhanced support group.

Patients who received enhanced decision-making support ultimately had overall medical costs that were 5.3 percent lower than for those receiving only the usual support. They also had 12.5 percent fewer hospital admissions and 20.9 percent fewer preference-sensitive heart surgeries. The authors concluded that shared decision making through these relatively low-cost, remote models can extend the benefits of patient engagement to broad populations.

Atur visual

- *Headings*
- *Bullets*
- Tonjolkan isupenting

3. Menulis [3]

- Informasi yang relevan dan fokus.
- Hindari istilah metodologi riset yang rumit
- Tunjukkan kekuatan metodologi riset yang dilakukan sehingga hasil penelitian valid
- Jika memakai statistik, pakailah statistik yang mudah dimengerti

3. Menulis [4]

- Kalimat singkat dan ringkas
 - Hemat kata
 - Kalimat pendek dengan struktur kalimat yang jelas
- Kalimat aktif
- Hindari jargon
- Hindari istilah metodologi yang rumit

Contoh...

Hindari kata	Lebih baik ...
Mengkonseptualisasikan	Membuat
Penting diketahui bahwa	(kata-kata tersebut dihilangkan)
Mengoperasionalkan	Menjalankan
Secara statistik signifikan	(kata-kata tersebut dihilangkan]

3. Menulis: Membuat Data “Bicara”

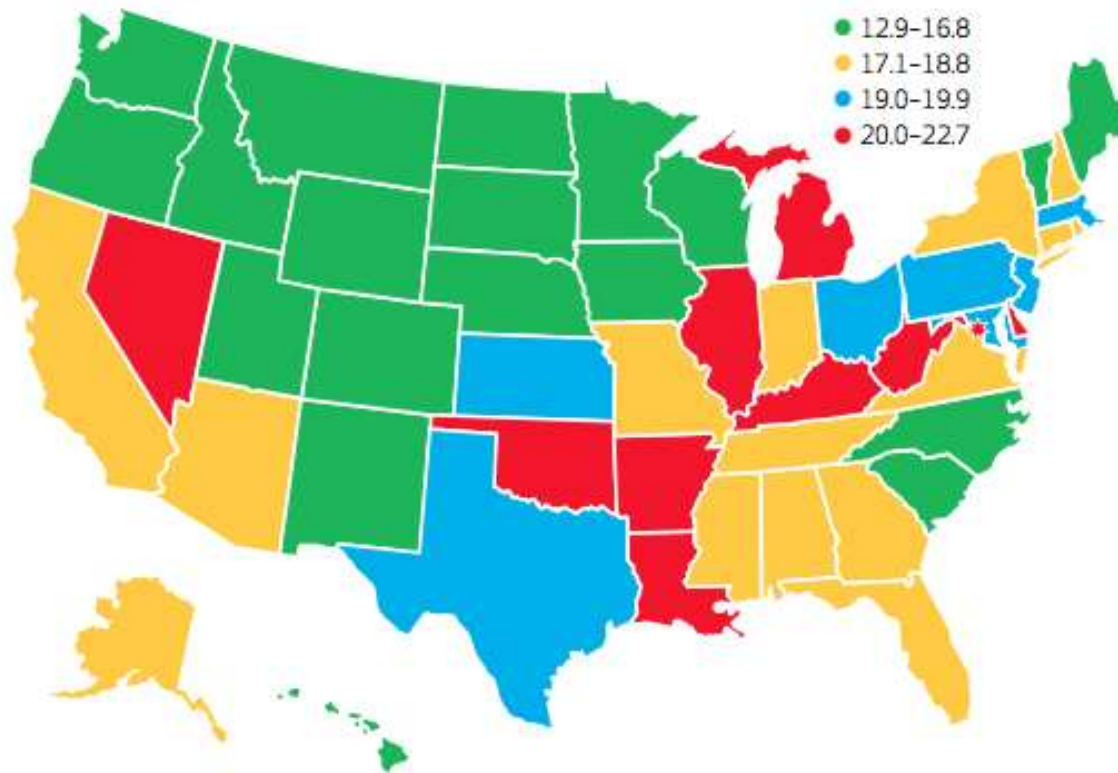
- Pilih data mana yang dipresentasikan dalam policy brief
 - Sesuaikan dengan tujuan policy brief
 - Sesuaikan dengan audience
- Presentasi sederhana dan jelas
 - Minimalkan penggunaan hasil statistik
 - Tidak perlu angka-angka yang rumit
- Tidak duplikasi dengan teks

3. Mempresentasikan Data

- Cerita apa yang akan disampaikan?
 - Gunakan grafik untuk menyampaikan hubungan atau pola atau tren
 - Gunakan tabel untuk menampilkan detail data
- Grafik batang lebih efektif dibanding grafik *pie*

EXHIBIT 1

Medicare 30-Day Hospital Readmissions as a Percentage of Admissions, 2009



SOURCE Commonwealth Fund, "Medicare 30-Day Hospital Readmissions as a Percent of Admissions: National Metrics," October 2009.

Tahapan Membuat *Policy Brief*



4. Lakukan Review[1]

Policy Brief Checklist

Use this checklist to critique your own policy brief or review another author's brief.

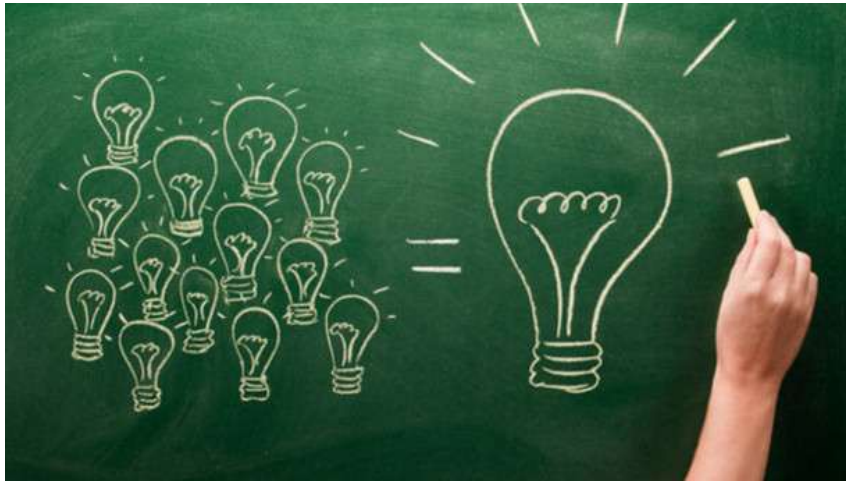
Argument Flows Clearly		
Yes	Needs Work	
		Aim is clear
		Conclusion is clear at the outset
		Problem is clearly stated and backed with evidence
		Recommended actions are clear and specific
		Recommendations flow logically from the evidence presented
		All information is necessary for the development of the argument
<i>Comments and suggestions:</i>		

Content is Appropriate for the Audience		
Yes	Needs Work	
		Importance to the audience is clear
		Recommendations are appropriate for the audience
		Understandable without specialized knowledge
<i>Comments and suggestions:</i>		

Language is Clear, Concise, and Engaging		
Yes	Needs Work	
		Words are not unnecessarily complex
		Jargon is not used
		Sentences are not cluttered with unnecessary words or phrases
		Text is engaging (e.g., active voice, varied sentence structure)
<i>Comments and suggestions:</i>		

4. Lakukan Review [2]

Visual Cues Help the Reader Navigate and Digest Information			
Yes	Needs Work		<i>Comments and suggestions:</i>
		White space and margins are sufficient	
		Text is broken into sections with identifiable focus	
		Headings cue the key points that follow	
		Key points are easy to find	
Data Are Presented Effectively			
Yes	Needs Work		<i>Comments and suggestions:</i>
		All data are necessary for the argument	
		Data are easy to understand	
		Data are presented in the most appropriate format	
		Graphics are not redundant with text	



Semoga Mendorong
Pemanfaatan Hasil
Penelitian bagi Perbaikan
Mutu Pelayanan
Kesehatan...