EMBA 526: International Health Care Systems

Course Outline

COURSE INFORMATION

Division: Executive Education

Instructors:

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Robert (Bob) Smith, Adjunct Professor, Sauder School of Business, UBC

Course duration: June 23-28, 2013

COURSE DESCRIPTION

The purpose of this module is to provide students with first-hand exposure to the delivery of health care in a country or countries other than Canada. The country or countries of focus will change over time, but the basic purpose will remain the same. Specifically, the course will provide a working knowledge of the healthcare system in a foreign country, including the evolution of health management in that country; the training, organization and licensing of health care professionals; the funding of health care; the structure of the delivery system; and the broader policy framework. These aspects will be compared and contrasted with the health-care system in British Columbia. There will also be field trips to health-care facilities in the foreign country.

The major aim of the course is to expose students to different ways of managing health care, to appreciate a wider set of policy alternatives, and to see and experience innovative solutions. For the upcoming year the course will be offered in England and will focus in the English health care system. The following course description and learning opportunities were developed with that system in mind. Future offerings may take place in other countries.

LEARNING OBJECTIVES

Since its inception in 1948, the UK National Health Service NHS has gone through a number of radical changes, such as the increasing managerial control, market based reforms and integrating health and social care provision. This module aims to provide a general overview of the NHS, its components, key policy drivers and to review current ideas and practices in healthcare delivery processes. In addition, we will cover in depth topics of current critical concern, so that course participants will have a solid overview of the system as well as insight into important areas of health management.

The commitment to the NHS involved the funding and provision of services. Throughout the many reforms since 1948, this commitment has remained largely intact. However, with the Private Finance Initiative (PFI) and the creation of the internal market in the 1990s, the NHS `contract' of funding and provision was challenged. Funding remained tax-funded but provision was increasingly plural, with private and independent sector providers. The course will enable participants to gain an in depth conceptual, analytical and practical understanding of the NHS as a system of healthcare delivery. The module will also examine the current health reform, badged

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as being the most extensive reform since the NHS's inception, elder and community care, knowledge translation, systematic innovation and private funding models within the NHS system.

Students will become conversant with the models, delivery methods and policies that govern the English healthcare system. They will be able to analyze the strengths and weaknesses that challenge the system and they will be able to critically evaluate the strengths and weaknesses of the BC system.

Specifically, this module will provide participants with a:

- broad understanding of English NHS, its major reforms and key challenges and be able to analyze the NHS as a complex organizational system;
- appreciation for the breadth of stakeholders that constitute the NHS and the meso-level networks that enable and support health care delivery;
- the different theoretical and practical perspectives on knowledge translation and evidence based practice;
- understanding of the funding and partnership strategies used by the NHS to deliver care with a particular focus on community care provision.

ASSESSMENT

Participation	20%
Class Presentation	20%
Final Paper	60%

The main requirement for this course is a paper about some aspect of the English health care system. This paper will be written in groups of 2-3 students per group. The topic will vary among groups. Students will form their groups prior to the start of the course and select a specific topic for study. The topic must be discussed and approved in advance by one of the instructors before the start of the program in England (this will enable specific areas of interest to be covered in the lectures and site-visits).

Each group will make a 10-minute in-class presentation outlining their paper on June 28, 2013. This presentation will account for 20% of the course mark. The final paper is due by 8:00 am July 15th. The paper is to be submitted by email in Word and must be spaced 1.5 and 11 point Arial font and should not exceed 12 pages—bibliography and short appendices (if appropriate) are in addition. Evaluation of the final paper will be assessed against the following criteria:

- 1. The insightfulness and depth of the analysis of the English model
- 2. The "comparison and contrast" with the BC system
- 3. Discussion of how one might implement the system in BC
- 4. The structure of the report and the quality of the written presentation

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COURSE RESOURCES AND MATERIALS

Required Reading Materials:

King's Fund (2011) "Commission on Leadership and Management in the NHS"

http://www.kingsfund.org.uk/sites/files/kf/future-of-leadership-and-management-nhs-may-2011-kings-fund.pdf

2020 Health (2010) Responsibility in health care: changing the culture. London.

WHO European Observatory on Health Care Systems: UK specific report 2011. http://www.euro.who.int/ data/assets/pdf file/0004/135148/e94836.pdf

G Rivett, The History of the NHS (online version is excellent though there is also a printed book)

Ferlie, E. et al. (2009) Networks in health care: a comparative study of their management impact & performance

Exworthy, M, Wilkinson, EK, McColl, A, Moore, M, Roderick, P, Smith, H & Gabbay, J 2003, 'The role of performance indicators in changing the autonomy of the general practice profession in the UK', Social Science & Medicine, vol 56, no. 7, pp. 1493-1504

Oborn E, Barrett M, Racko G (forthcoming) 'Knowledge Translation in Healthcare: Incorporating Theories of Learning and Knowledge from the Management Literature.' Journal of Health Organization and Management.

Oborn E. (2008) 'Legitimacy of Hospital Reconfiguration: The Controversial Downsizing of Kidderminster Hospitals', Journal of Health Service Research and Policy 13 (2) 11-18

Optional Reading Materials:

King's Fund "Cooperation and competition" pdf any willing provider report 2011

Nuffield Trust "Competition" http://www.nuffieldtrust.org.uk/our-work/competition

Oborn E, Barrett M, Exworthy M (2011) "Policy entrepreneurship in the development of public sector strategy" Public Administration. 89(2) 325-344.

Walshe, K. and Rundall, TG. (2001) `Evidence-based management: from theory to practice in health care.' Milbank Quarterly, 79, 3, pp.429-457

Frank, J. (1994) `Dimensions of health system reform.' Health Policy, 27, 1, pp.19-34 (General reading on Health Systems)

McGivern, G. and Ferlie, E. (2007) 'Playing Tick Box Games: Interrelating Defences in Professional Appraisal' Human Relations, 60 (9), pp. 1361-1385

Other Learning Resources: including library resources, websites will be posted to the module Folder on Connect

Technology Requirements: such as the purchase of an iClicker or a laptop: NONE

Activity Fees: such as access to a simulation program: NONE

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PROPOSED SCHEDULE

Sunday	Monday	Tuesday	Wednesday	Thursday	Friday
23/06/13	24/06/13	25/06/13	26/06/13	27/06/13	28/06/13
2:00PM – 5:00PM Optional Tour of Warwick Castle. 5:30PM – 8:30 PM Welcome from Dean of WBS. Overview of Program. Dinner and Presentation on Innovation in the NHS.	A.M. The history and evolution of the NHS: This session will describe and explain the historical context of the NHS, its tripartite structure the historical dominance of hospital care and ongoing professional power struggles. Lunch Provided. P.M. Field Site Visit: A visit to an NHS organization (C&W), with practical insight provided by Senior NHS member(s). Dinner on your own.	A.M. Breadth of stakeholders engaged with provision/delivery; licensing bodies and MD registration/credentialing Guest Instructor: Ruth McDonald Coalition Government reforms. The role and primacy of clinical commissioning- the process of purchasing health services on behalf of a population. Analysis of the multiple vested interests that drive – and contest – the changes. Guest Instructor: Bernard Crump Lunch on your own. P.M. Public Private Partnerships, Presentation on the pros and cons of PFIs Evening: Dinner with Dean of WBS	A,M. Site Visit to PFI hospital Presentation by hospital administrators Rest of the Day free in London.	A.M. Knowledge Translation Models and theories of knowledge translation, recent research and experience from the NIHR funded CLAHRCS. Establishing and operationalising KT in a practical context: lessons from CLAHRCS. Instructor Graeme Currie; (& Ganesh S) Lunch on your own. P.M. Innovation management and service improvement efforts in NHS. Guest Instructor: TBA, Bernard Crump? Dinner on your own. Evening: Student group presentation preparations.	A.M. IAPT: a new approach to increasing community based mental health care access. Guest Instructor: Charlotte Sausman 12:00PM – 1:00PM Catered Lunch. 1:00PM – 3:00PM Student presentations. 3:00PM – 4:00PM Certificate Presentations & Farewell.

OTHER INFORMATION

See Sean Corbishley for assistance with travel arrangements and special needs