

Triple Layer Chess: A Metaphor for the Alignment of Health Policy

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Overview

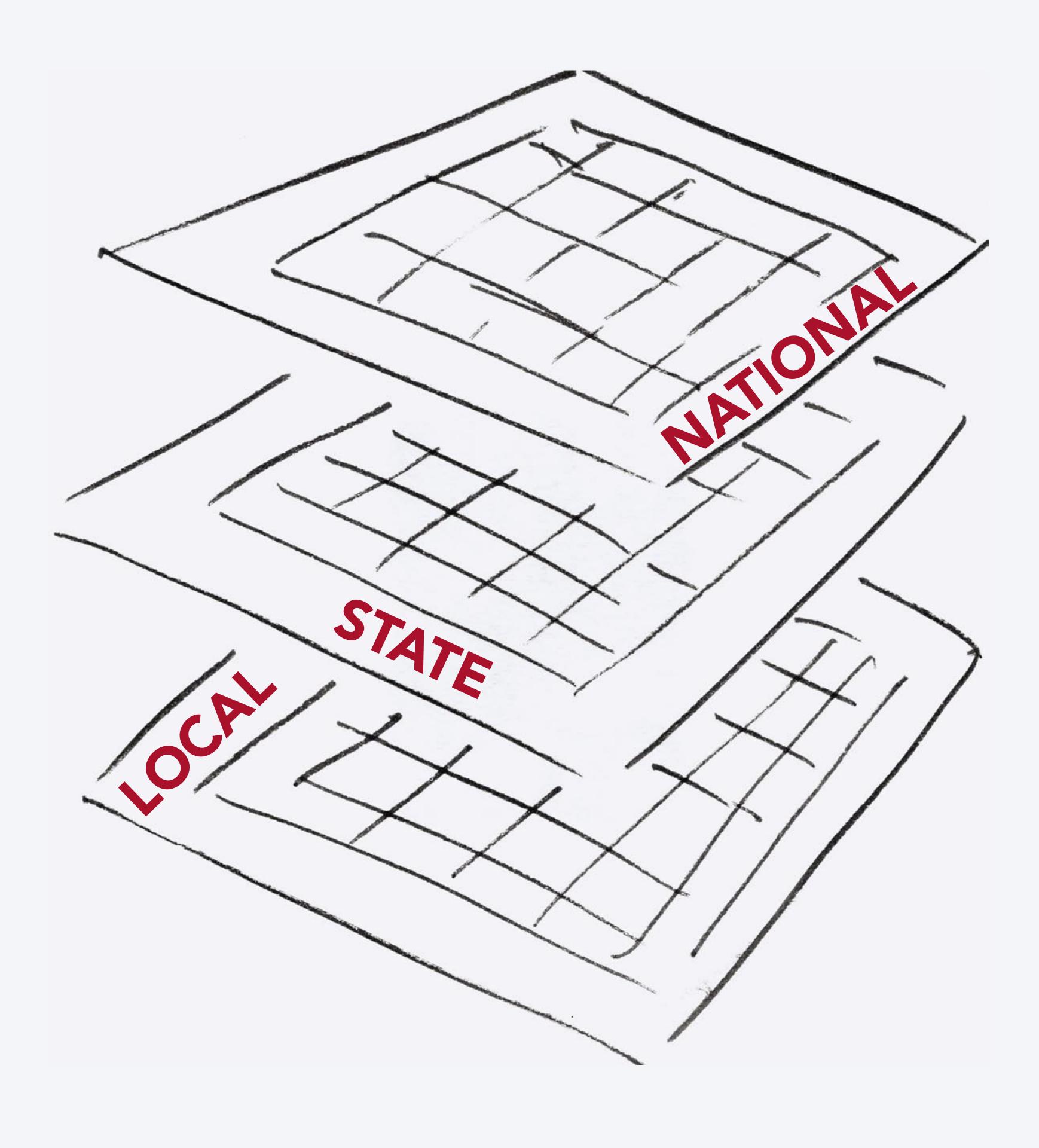
The Georgia Health Policy Center (GHPC) employs an approach to research translation and policy application that is analogous to facilitating a game of triple layer chess. Imagine simultaneously playing a complex game of chess on three boards - one above the other - representing each of three levels of activity within the health policy arena – local, state, and national. GHPC translates findings from research in a way that assists players at each level to understand opportunities for "winning the game" by integrating their own strategic decisions with those of players on the other two levels.

Abstract

In 1996, rural health systems faced a bleak future. A study for the Georgia Medicaid program revealed that hospitals, physicians, pharmacies, and nursing homes in rural markets were at risk of closure. It appeared that the solution would involve the development of new local and regional partnerships among community leaders and health care providers to strengthen local health care systems.

In partnership with the state Office of Rural Health, the GHPC designed, tested, and implemented a community intervention to facilitate the development of rural health networks across the state. What began in 1996 as an intensive approach to understand and facilitate network development processes in 30 rural health systems has since become a dynamic, iterative process of research and reflection, translation, and implementation of policy and practice at the local, state, regional, and national levels – a virtual game of triple-layer chess.

Triple-Layer Chess:



THE LOCAL GAME: Aligning local partners with a common purpose

THE STATE GAME: Aligning public and private investments grounded in community-based findings

THE NATIONAL GAME: Aligning federal programs internally based on powerful evidence of state and local needs

Application

Since 1996, findings from the Georgia Health Policy Center's rural health system development practice and research have been integrated into local, state, and national policy and translated into useful tools and technical assistance methods now applied in 37 states. Perhaps even more relevant, though, is that the triple-layer chess metaphor inspired the translation strategies used by the center and made extensive dissemination and incorporation possible.

Further, findings from the technical evaluation and from providing technical assistance to federally funded communities enable the Georgia Health Policy Center to provide feedback to the Federal Office of Rural Health Policy regarding opportunities to strengthen their grant programs and align their programmatic resources internally to better support states and rural communities.

When evidence-based answers to these questions are translated for key public and private policy makers at local, state, and national levels with the intent to achieve policy congruence among the three dimensions, powerful opportunities for triple-layer checkmate are created.

