Agenda: Measurement Framework Steering Team Meeting #3

Date: 09/16/2019

Topic 1: Welcome and agenda review (1:00-1:25)

- Welcome
- Review of Meeting #2 summary and survey synthesis
  - Does anyone have any comments or questions on this meeting summary?

Topic 2: Draft Framework Model Review (1:25-2:30)

Purpose: Discuss and refine the draft framework model design and its intended use(s)

Draft framework model design and development process summary (1:25-1:55)

Draft framework model design refinement (1:55-2:30)

- Small group discussions
  - Does this design help stakeholders envision the work that’s needed to improve health in Minnesota moving forward?
  - Does it help identify which stakeholder partners are needed to make progress?
  - What might prevent this framework from working? What do we need to do to make this work?
  - What, if anything, would you change about the design (What would you add? What would you remove)?

- Large group discussion
  - What were some things that your group discussed about this design concept?
  - What were your answers to the questions posed to your small group (listed above)?
Break (2:30-2:40)

Topic 3: Discuss governance needs based on emerging framework model (2:40-3:45)

*Purpose: Generate useful input on governance model*

Governance overview (2:40-3:00)

Governance discussion (3:00-3:45)

- Trio discussions: What is the work of this governance body?
  - Each group will be given a set of discussion questions and note sheets to record responses on.
- Large group report out: Share what you discussed in your trios.
- Large group discussion:
  - Given our discussion on the work of the governance body:
    - What specifically do we need to include in our governance approach regarding roles, work groups, and responsibilities?
    - How can the governance approach provide appropriate flexibility for participation of stakeholders who are using it in various ways and focusing on various priority areas?

Topic 4: Public Comments (3:45-3:50)

Topic 5: Closing (3:50-4:00)
Measurement Framework

Steering Team Meeting #3
September 16, 2019

PROTECTING, MAINTAINING AND IMPROVING THE HEALTH OF ALL MINNESOTANS
Agenda

- Welcome and agenda review
- Draft framework model review
- Discuss governance needs based on emerging framework model
- Public comments
- Closing
Where We are Going

June 28
- Introduce project
- Refine values and principles
- Develop vision and mission
- Introduce existing measurement framework models

July 29
- Compare and discuss framework models
- Identify desired elements of a Minnesota measurement framework

September 16
- Refine framework model design
- Begin developing a governance structure

November 18
- Finalize framework component recommendations to MDH
Our work is on behalf of Minnesota’s citizens, the ultimate stakeholders.
We test our assumptions and inferences.
We respect ourselves, each other, and the groups’ process.

We encourage constructive, adaptive thinking.
We are sensitive to the fact that everyone deserves to be heard.

We maximize our time by coming to meetings having completed any homework assignments.
We always start meetings on time.

Steering Team Agreements
Steering Team members:

- Discussed the Steering Team’s role and how decisions would be made.
- Presented highlights from small group discussions on four external measurement frameworks (HOPE, RWJF, IOM, CMS).
- Provided feedback on what measurement framework elements are most suitable for Minnesota.
- Provided further input on the measurement framework definition.
- Began to think about and discuss approaches to governance.
## Health priority

<table>
<thead>
<tr>
<th>Health priority</th>
<th>Community conditions and outcomes</th>
<th>Health care and social services</th>
<th>Statewide conditions and outcomes</th>
<th>Policy environment</th>
</tr>
</thead>
<tbody>
<tr>
<td>Public engagement and belonging</td>
<td>Access to services</td>
<td>Health outcomes</td>
<td>Policies that advance or constrain our ability to achieve health</td>
<td></td>
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<tr>
<td>Environment</td>
<td>Affordability of services</td>
<td>Socio-economic</td>
<td>• Statewide policy indicators</td>
<td></td>
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<td>Community partnerships</td>
<td>Health care collaboration</td>
<td>Social environment</td>
<td>• Localized policy indicators</td>
<td></td>
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<td></td>
<td>Social service collaboration</td>
<td>Physical environment; natural and built environment</td>
<td>• Other (corporate, religious, etc.)</td>
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<td></td>
<td>Quality of services</td>
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<tr>
<td></td>
<td>Patient/recipient/beneficiary experience of services</td>
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</tbody>
</table>
Small Group Discussion

- Does this design help stakeholders **envision the work that’s needed to improve health in Minnesota** moving forward?
- Does it help identify **which stakeholder partners are needed** to make progress?
- What might **prevent this framework from working**? What do we **need to do to make this work**?
- What, if anything, would you **change** about the design (What would you **add**? What would you **remove**?)?
What were some of the things that your group discussed about this design concept?
A governance model aims to address three key factors:

1. Accountability
2. Authority
3. Decision-making
Our selected governance model will:

- Identify what groups, sub-groups, roles, and responsibilities are necessary to support the development and implementation of Minnesota’s measurement framework,
- Delineate who is accountable for performing certain tasks, and
- Outline which roles hold decision-making ability and authority.
Our governance body will have a number of responsibilities. Some of the responsibilities they could have and decisions they could be asked to make might include:

- Deciding on priority areas for measurement
- Selecting and/or revising domains and sub-domains
- Choosing appropriate measures and/or updating them as needed
- Identifying the need for new work groups
- Helping to form and oversee work groups
Consideration of the following set of core characteristics will inform the development of our governance model:

- How the solution will be used and by whom
- Charge
- Accountability
- Authority
- Flexibility
- Representation
- Participation and Engagement

*Note: the above are often related and interconnected*
The following examples are intended to highlight various characteristics and priorities which can affect governance structure design. These are not intended to present either/or dichotomies nor provide specific prescriptive advice. Rather, there are possibilities that serve to spark thinking on governance structure design. In some cases, it may be possible for both examples to be relevant and/or accurate.
How the Solution Will Be Used and By Whom

Considering the work product that this governance body will oversee and manage (the measurement framework) as it relates to how it will be used and by whom

Hypothetical Examples

The framework will solely be used for the purposes of state reporting on the health of Minnesota

The framework will be used to foster a shared approach and collaborative efforts that drive health improvement across various organizations and sectors
The Charge

Considering **the work** that will be asked **of this governance body** and others involved

**Hypothetical Examples**

- The group is charged with providing input on framework measures and framework updates as needed
- The group is charged with promoting stakeholder adoption of the framework and increasing its use
Accountability

Considering **who** will be held accountable for **what** and **by whom**

**Hypothetical Examples**

- Just one stakeholder or organization is to be held accountable
- Many or all stakeholders are to be held accountable
Considering the **level of influence** and authority each member has in the decision-making process

**Hypothetical Examples**

Decisions are intended to be centrally determined by a few people

Decisions are intended to be de-centralized with many or all members weighing in on most decisions
Considering the **speed** with which decisions will need to be made

**Hypothetical Examples**

- Work needs to be delivered on in a fast, rapid-response fashion
- Work can be done and decisions can be made at a more moderate, tempered pace
Considering the desired **breadth of representation**
(from organizations, sectors, and communities)

**Hypothetical Examples**

- It’s acceptable to gather input primarily from those willing and able to provide it in a timely fashion
- Input from all sectors that influence health (e.g. transportation, housing, etc.) is desired
Considering the required level of participation, engagement, and time commitment of each governance body member

**Hypothetical Examples**

**Left Panel:**
The intent is that members will take a more advisory role in informing MDH’s focus areas (a less significant level of participation and engagement)

**Right Panel:**
The intent is that members will take ownership and buy in to the process to the extent that they bring the framework to their organization (a more significant level of participation and engagement)
Each table will be given a characteristic to discuss. Your task is three-fold:

1. Discuss the questions that you will be given for 10 minutes.
2. Then, prepare a summary of your discussion and take notes on your note sheets. You will have 5 minutes to do so.
3. Assign 1 person from your group to report out to the rest of the group. Report outs will be limited to 90 seconds
How the solution will be used and by whom

Questions for Pairs Discussion

- What is the solution we are creating and how will it be used?
- Who will use it, and therefore, who needs to be involved in our governance model?
Questions for Pairs Discussion

- What is the core function of this governance body?
- What are buckets of work and focus areas necessary to perform this function?
Accountability

Questions for Pairs Discussion

- Who is ultimately responsible and accountable for the outcomes of this project?
- What are other stakeholders (that are not included in the above) responsible for?
Questions for Pairs Discussion

- Whose voices need to be included in the development process?
- Who holds ultimate decision-making authority (i.e. is this several people? One person?)?
Questions for Pairs Discussion

- What does the nature of this work require regarding timeliness in making decisions?
- How can the structure of the governance body enable the most suitable level of timeliness (while preserving the necessary distribution of authority)?
Questions for Pairs Discussion

- Who are the stakeholders? Whose work could be impacted by the framework?
- Who will want to be at this table (or not)?
Participation and Engagement

Questions for Pairs Discussion

- What is the long-term timeline for this project? How frequently does the governance body need to meet in order to realize the desired outcomes?
- How do we want members of the governance body to engage in the work?
Steering Team Reflections
Next meeting:

November 18, 1-4pm at HIWAY Federal Credit Union

- Finalize framework component recommendations to MDH

Resources:

- Measurement Framework webpage (https://www.health.state.mn.us/data/hcquality/measfrmwk)
- GovDelivery: Statewide Quality Reporting and Measurement System
- Email health.sqrms@state.mn.us
Thank you.