



Multi-stakeholder Input on a National Priority: Improving Population Health by Working with Communities

Meeting Summary

The National Quality Forum (NQF) convened a web orientation meeting of the Population Health Framework Committee on December 3, 2013. An online archive of the meeting is <u>available here</u>.

Committee Member Attendance

Please see Attachment 1 for the list of committee members in attendance.

Welcome and Overview of Meeting Objectives

Session led by Karen Adams, Vice President, Strategic Partnerships, NQF

- Dr. Adams welcomed both the committee members, public participants, federal liaisons to the *Multi-stakeholder Input on a National Priority: Improving Population Health by Working with Communities* (Short title: Population Health Framework) orientation meeting.
- Dr. Adams also reviewed the meeting objectives:
 - o Provide a project overview and outline desired outcomes; and
 - o Identify key strategic issues for discussion at the in-person meeting in January.

Opening Remarks from our Sponsor

Session led by Nancy Wilson, Government Task Lead, AHRQ

- Dr. Wilson thanked the Committee for their participation and commitment to population health.
- Dr. Wilson emphasized the importance of the public health and clinical care delivery systems working together to improve population health as outlined in the previous White Paper, authored by Steve Teutsch.
- Dr. Wilson further explained that the project builds on the three-part aim of the National Quality Strategy (NQS) of achieving *better care, affordable care,* and specifically *healthy people, healthy communities*.
- Through this project, HHS intends to move closer to achieving the goals of healthy people and healthy communities, by developing a common framework and implementation guide which communities, the clinical care delivery system and the public health system can use to improve population health.





Project Overview

Session led by Elisa Munthali, Managing Director, Performance Measurement, NQF

- Ms. Munthali provided background information to help frame the project and reviewed the project's scope and goals these include:
 - Developing a Community Action Guide that will offer practical guidance on how communities can work with the public health system and the clinical care system to improve population health.
 - Establish shared definitions to ensure better coordination and alignment.
 - Address the following key questions:
 - How can individuals and multi-stakeholder groups come together to address community health improvement?
 - Who should be at the table during these discussions?
 - What processes and methods should communities use to assess their health?
 - What data are available to assess, analyze and address community health issues, and measure improvement?
 - What incentives can drive alignment and coordination to improve community health?
 - How should communities assess if their initiative is achieving results and ensure a feedback loop is in place for shared learning?
 - Additionally the Community Action Guide will,
 - 1) identify key drivers for population health across communities;
 - 2) identify opportunities to align federal programs as well as public- and privatesector programs in an effort to reduce measurement burden; and
 - 3) Identify measures to fill gaps associated with population health and affordability.
- Committee members offered valuable input on the following framing areas:
 - o Scope
 - Assess population health beyond the "sweet spot" of the intersection of the public health and clinical care delivery systems. Examining activities within communities may provide valuable insights.
 - Look at broader issues around social determinants of health (i.e. community redevelopment models that incorporate health and built environments).
 - Examine population health frameworks from the United Kingdom and other international perspectives.
 - o Audience
 - Need to clearly define the intended audience(s) primary and/or secondary.
 - o Common language
 - Identify a clear, agreed-upon understanding of what "Community" means.





- Recognize that communities cannot be limited by geopolitical boundaries.
- Consider the larger holistic view of what a community is, outside the tradition boundaries of health and human services. The Community Action Guide must consider the systematic inputs that affect a community.

The committee also noted the importance of articulating the alignment between NQF's population health projects

Discussion of the Environmental Scan of Frameworks Session led by Diane Stollenwerk, President, StollenWerks Inc.

- Ms. Stollenwerk presented a visual schematic of the connectivity between the inputs and deliverables throughout the duration of the project, highlighting the importance of keeping the ultimate goal in mind at all stages of the project and how the various steps build on each other.
 - During the base year, NQF will conduct an environmental scan of about 35 to 40 federal, state, and local frameworks that will lay the foundation for the first iteration of the community action framework and implementation guide.
 - The committee will provide guidance and input on the environmental scan and written analysis.
 - In option year one, NQF will select about 10 feedback communities that are willing to implement the proposed community action guide. These communities will provide feedback about their experiences and successes; barriers to implementation; resource constraints; recommended solutions; and other concerns and relevant information.
 - In option year two (the final year), the committee and the feedback communities will work together to refine the framework to address any issues that arise during pilot testing.
- The end product will be a Community Action Guide that will provide practical guidance to communities on how they can work with the public health system and clinical care delivery system to improve population health. The development of the Community Action Guide is an iterative process that includes several opportunities for input and refinement.
- Ms. Stollenwerk provided an overview of the environmental scan of the 40 community, state, and federal frameworks and initiatives including the selection criteria for identifying the appropriate frameworks for inclusion in the environmental scan and the initial analysis.
 - 1. Greatest potential impact: addressing high impact needs, topics, or conditions.
 - 2. Across the lifespan: affecting individuals at various stages, birth to end of life.
 - 3. Geographic diversity: urban / rural, regions of the U.S.
 - 4. Disparities and socioe conomic status
 - 5. Involves two or three of the following:
 - a. clinical care,
 - b. publichealth, and



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- c. other stakeholders
- 6. Involves most or all of the following core elements identified in recommendation #7 of the Jacobson and Teutsch white paper on population health conceptual frameworks and improvement activities:
 - a. Organizational planning and priority-setting process;
 - b. Integrated community health and needs assessment process;
 - c. Agreed-upon, **prioritized subset of health improvement activities** for which organizations direct resources and/or develop capacities;
 - d. Responsibility for leading a health improvement activity in the region;
 - e. **Selection of measures and performance targets** for population health outcomes, determinants of health, and health improvement activities;
 - f. **Use of those indicators**, measured at the total population level, linked to the health improvement activities; and
 - g. **Reporting on progress** toward improving population health outcomes.

Public-Private Collaboration: Role of Federal Liaisons Session led by Allen Leavens, Senior Director, NQF

- Dr. Leavens informed the committee that federal partners from several government agencies will provide input on the environmental scan and draft Community Action Guide throughout the project.
- It was recommended that a staff member from the Administration for Children and Family should also be included as a federal liaison.

Opportunity for Member and Public Comment

• There were no questions or comments from the public.

Next Steps

Session led by Elisa Munthali

- NQF staff will synthesize the feedback received from the committee's discussion and will work with HHS to refine the framing of the project, with consideration of scope, audience and language.
- Ms. Munthali also informed the committee of the following upcoming activities:
 - Committee Meeting, January 9-10, 2014 at NQF Offices, Washington DC.





Attachment 1: Population Health Framework Advisory Group Members in Attendance

Population Health Framework Advisory Group Members	
Member	Organization
Catherine M. Baase*	The Dow Chemical Company
Regina Davis Moss on behalf of Georges	American Public Health Association
Benjamin	
Christina Bethell	Child and Adolescent Health Measurement
	Initiative
Kevin L. Bowman	WellPoint, Inc.
Debra L. Burns	Minnesota Department of Health
Beverly Franklin-Thompson	GlaxoSmithKline
Rahul Gupta	Kanawha-Charleston and Putnam Health
	Departments
Charles J. Homer	National Initiative for Children's Healthcare
	Quality
Kellie Goodson <i>on behalf of</i> Keith C. Kosel	VHA Inc.
Jeffrey Levi	Trust for America's Health
Doris Lotz	New Hampshire Department of Health and
	Human Services
Doriane C. Miller	Center for Community Health and Vitality of the
	University of Chicago Medical Center
Matthew Stiefel	Kaiser Permanente
Steven M. Teutsch	Los Angeles County Department of Public Health
Julie Trocchio	Catholic Health Association of the United States
Nancy Wilson*	Agency for Healthcare Research and Quality
	(AHRQ)

*Denotes Member is also part of the Advisory Group