

**MEASURE APPLICATIONS PARTNERSHIP  
STRATEGY TASK FORCE**  
*Convened by the National Quality Forum*

**Summary of Web Meeting**

A web meeting of the Measure Applications Partnership (MAP) Strategy Task Force was held on Tuesday, July 10, 2012. For those interested in reviewing an online archive of the web meeting, please click on the link below:

[Meeting Recordings - July 10, 2012.](#)

**Strategy Task Force Members in Attendance at meeting:**

Chip Kahn, MAP Strategy Task Force Co-Chair	Barbara Gage, substitute for Mark McClellan, MAP Clinician Workgroup Chair
Gerald Shea, MAP Strategy Task Force Co-Chair	George Isham, MAP Coordinating Committee Co-Chair
Christine Bechtel, MAP Coordinating Committee Member	Nancy Wilson, Agency for Healthcare Research and Quality
Helen Darling, National Priorities Partnership Co-Chair	

The primary objectives of the meeting were to:

- Review the revised MAP goals, objectives, strategies, and tactics
- Discuss establishing and maintaining feedback loops to inform MAP decision making
- Review the draft MAP communications and engagement framework
- Review the draft MAP action plan

**Welcome and Review of Meeting Objectives**

Strategy Task Force Co-Chairs, Chip Kahn and Gerald Shea, began the meeting with a welcome and review of the meeting objectives.

**Revised MAP Goals, Objectives, Strategies, and Tactics**

Mr. Kahn began this agenda item by discussing that the MAP goals, objectives, strategies and tactics were updated based on feedback received during the MAP Strategy Task Force June 18, 2012 in-person meeting.

Member discussion revolved around gap-filling pathways and removing measures from measure sets. A task force member articulated how the strategic plan needs to be more explicit about differentiating between the various types of gaps (e.g., performance gaps, measurement gaps), as this will allow a more nuanced assessment when engaging in gap-filling activities. Other task force members supported this statement but cautioned that the plan should also address performance areas that currently lack adequate measures (e.g., patient-reported outcome measures). When discussing removing measures, task force members underscored the importance of not only removing, but also promoting and prioritizing those measures that accelerate improvement.

### **Feedback Loops to Inform MAP Decision Making**

During this agenda item, Mr. Shea discussed how establishing feedback loops will help MAP focus engagement efforts by identifying key stakeholders and the desired information needed to be exchanged.

The task force underscored how the feedback loops section of the strategic plan needs to be more definitive about how MAP intends to establish bi-directional communication channels and the expected informational needs from either party. Members highlighted that without a targeted and systematic process, acquiring this information may be incredibly burdensome for MAP to engage in alone. Creating a prioritized list of stakeholders and data sources was suggested as a start.

### **MAP Communications and Engagement Framework**

Lindsey Spindle, Senior Vice President, Communications and External Affairs, NQF, walked through the proposed communications plan.

Member discussion revolved around differentiating the communications and engagement approach into two distinct items. Although there was acknowledgement of potential overlap, task force members mentioned that the engagement framework is more directly associated with establishing the previously mentioned feedback loops and engaging the right stakeholders. Alternatively, the communication framework may be better suited for informing stakeholders of the broader message and goal of MAP (e.g., improving the healthcare system by reducing needless complexity and waste).

### **MAP Action Plan**

Mr. Shea discussed how the action plan is intended to describe each tactic in detail and highlights the collaborators involved in accomplishing each tactic. Furthermore, the action plan describes the specific deliverables for each tactic as well as the timeline involved.

Member discussion centered on specific revisions to the action plan. The task force highlighted the following considerations:

- Expanding the list of stakeholders within the analytic support section that MAP intends to acquire measure use and impact information from, including state and regional collaboratives and private sector efforts.
- Enhancing the MAP Measure Selection Criteria by not only differentiating between the varying programmatic purposes but also the underlying characteristics of the populations within the programs (e.g., needs of the Medicaid population vs. the commercial population)
  - Revisions to the MAP Measure Selection Criteria should be informed by evidence, measurement data, and experience in the field.

### **Summary and Next Steps**

The meeting concluded with a discussion of next steps in finalizing the MAP Strategic Plan. As was mentioned earlier, the MAP Strategic Plan and families of measures for safety, care coordination, diabetes, and cardiovascular disease will be reviewed at an All MAP Web Meeting scheduled for July 23, 2012.