Re-imagining Technology in Support of Cross-Sector Referral and Care Coordination

Learning Goals

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Affinity Group Description:

This group will explore ways in which communities can re-balance their relationship with technologies of resource referral and social care coordination. We welcome practitioners from healthcare, public health, government agencies, community-based organizations, and anyone attempting to facilitate cross-sector information exchanges with the intention of improving health and social outcomes.

Together, we’ll explore alternatives to the paradigm of techno-solutionism. By understanding technology as practice, we’ll explore the potential for healthy information ecosystems, in which institutions using different technologies to pursue different objectives can still cooperatively align around the same goals. Given two common objectives in the field – resource data exchange (i.e. service directories), and client data exchange (often implied in the context of “closed-loop referrals”) – we’ll discuss equitable strategies that can balance innovation alongside accountability while mitigating the risks of harm, through the active interplay of three critical elements of information ecosystems: standards, infrastructure, and governance.

This group will revisit the topics explored in last year’s Affinity Group, welcoming newcomers while offering returning participants opportunities to dig deeper in dialogue with their peers.

Affinity Group Type: Curriculum-driven and peer-oriented (hybrid)

Ideal Participant: People working on development of community information exchange capacities; resource directory development and management; social care platform selection, implementation planning, and governance design; strategies for cross-platform system integration, closed-loop referral system development.
This group is not great for: People pitching specific software systems or other products.

Learning goals:

1. Learn about the core elements of healthy information ecosystems – standards, infrastructure, and governance – and how communities can develop and apply these elements in their health equity strategies, including specific institutional design patterns (i.e. data trusts, data cooperatives) that can promote communities’ agency and ensure technology development and data exchange is conducted accountability and equitably.

2. Understand the challenges of client information exchange among health, human, and social service providers.

3. Understand the challenges of resource directory information management, and the opportunities to establish sustainable, reliable, and interoperable resource directory data infrastructure as a shared resource for communities.

Meeting schedule:

1. May 6, 2:00 p.m. - 3:00 p.m. EST
2. June 10, 2:00 p.m. - 3:00 p.m. EST
3. July 8, 2:00 p.m. - 3:00 p.m. EST
4. August 12, 2:00 p.m. - 3:00 p.m. EST

Group Resources

1. “Tackling the Data Dilemma in Community Care Coordination,” a whitepaper by Paul Sorenson of the University of Missouri St Louis and Greg Bloom of the IU Ostrom Workshop on the Commons.


Getting Started with the All On Online Community

1. All In: Data for Community Health website is at: https://www.allindata.org/
2. Learn about All In via this All In 101 webinar: https://vimeo.com/487432652
3. If you’re new to the All In learning collaborative, the first step to join is to sign up for the online community (community.allindata.org) and create an individual member profile.
   a. Read our FAQs for help getting started.
4. Group members can connect with each other via our Reimagining Technology in Support of Cross-Sector Referral and Care Coordination space in the All In Online Community. Here we will share resources, host discussions, and elevate lessons from our sessions together.
   a. To join, visit community.allindata.org
i. Select the New User/Register Now button to create an account. When you register, you'll need to fill out your personal profile with details about yourself and your work to gain access.

ii. Once you have access, add the online community for this Affinity Group.