**FORESIGHT**
Designing a Future for Health

## Holistic, innovative, culturally-rooted healthcare

| | |
|---|---|
| **Idea 26** | Social determinants of health as a guiding framework (health, not just healthcare) |
| **Proposal 26b** | Enable the public health system to be able to intervene on social determinants of health issues at a community level |
| **Description** | **Enable the public health system to be able to intervene on social determinants of health at a community level**. This would require interoperability and integration between state-level siloed agencies, as well as with and between agencies and community-based organizations at the county and local level |
| **How will the proposed action advance equitable health and well-being?** | This proposal would revitalize Public Health, as the key partner to address social determinants of health. |
| **Is there work we can build on?** | NASDOH<br><br>Work on cross-domain interoperability at the National Interoperability Collaborative |
| **Who would have to act? Who would be key partners?** | Congress and state governments working closely with health systems and health plans.<br><br>People need education to demand these basic services (ensuring clean food, water, public safety, etc.) to protect community health.<br><br>National Interoperability Collaborative<br><br>National Action Agenda<br><br>Accountable Health Communities has many resources to build on<br><br>Data Sharing Resource: https://www.movinghealthcareupstream.org/wp-content/uploads/2020/01/data-sharing-brief.pdf<br><br>Pediatric Value Based Payment Models: https://www.movinghealthcareupstream.org/pediatric-value-base-care-models/ |

| | Integrated Care for Kids (InCK) from CMMI: https://www.cms.gov/newsroom/fact-sheets/integrated-care-kids-inck-model<br><br>Open Referral: http://openreferral.org |
|---|---|
| **A few high-level action steps** | 1. Build interoperability for sharing data between public and private health and wellness organizations.<br>2. Retrain and re-empower the public health leadership and workforce.<br>3. Invest in the social service sector (211) to partner better with public health local leadership. |
| **Other comments or guidance** | We need to really think hard about the misaligned incentives that prevent the collaboration required to truly improve the health of our communities. |