CARE CULTURE & DECISION-MAKING INNOVATION COLLABORATIVE : NAM Working Group on Technologies to Enhance Person, Family, & Community Engagement January17, 2019MeetingHighlights

MEETING FOCUS: Engagement of the health carry stemleadership, resources, and partnerships for the creation of an equitable health system in which technology enables seamless engagement of patients, families, clinicians, and commune resources as partners on behalf of transformative progress in health and the seamless.

Motivating questions:

1.<u>Purpose</u>sWhatis the potential forechnologies to advance quity and the empowerment of persons, families, and communities in health arrealth careW

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integrationand coordinationwithin health caresystemweneed to build solutions that feature user centered design. Her problems accessing care were the same ones thandowne people with low levels of education would Shave. strongly suggested framing the discussion to make cleare system has a deficit, not the humans who are using it. (ST) xThe role of data standards is critical. Medical forms there were the applied to creating tandardized tool to measure SDOH. However, a lack of interoperability between systems means it is not currently feasible. Technologically, it s simple, but consensus needs to be built, and entities such as the VA have an outsize role in catalyzing tech companies to change.

Afternoon Disussions about @rarchingThemes:

xCurrent implementation of consent model is fundamentally coercive the model most familiar to patie if the yopt out, they can t use the service (such as Gmail or Facetory) kHPAA functions different by the most patients don t know this they may assume they have to agree all potential uses of their data or theodoxill deny them service. (JNS) xAddressing patient/consumer protections is an important consideration when talking about consent. For example, the Genetic Information Word is from the to the service of the

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Chair

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