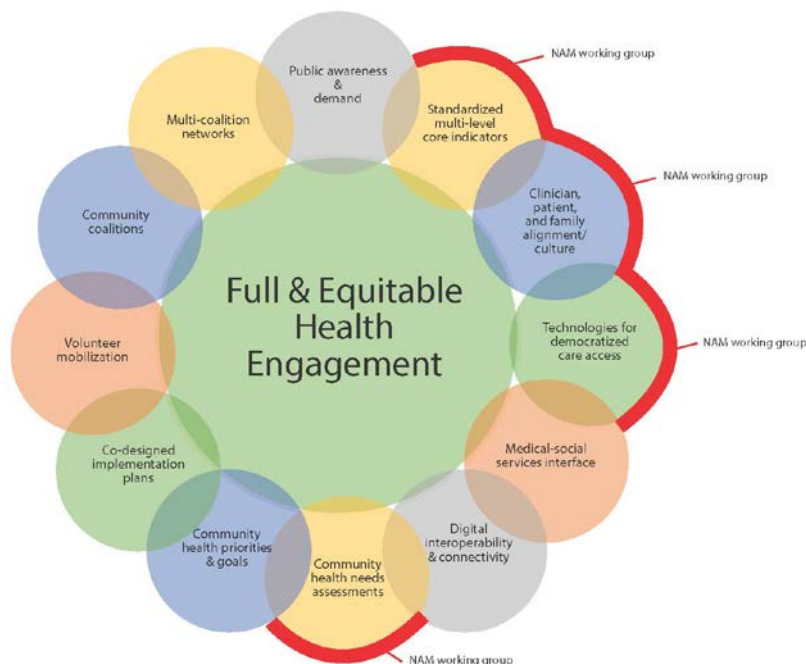


NAM CULTURE & INCLUSIVENESS ACTION COLLABORATIVE

Strategic Initiative Framework and Context

Focus: SOCIOCULTURAL INCLUSIVENESS

Strategic target: Full and equitable engagement



Current collaborative projects: Assessing Meaningful Community Engagement for Health and Health Care (2020); Community Health Assessments: Practices and Principles (2020); Working Group on Technologies to Enhance Patient, Family, and Community Engagement (2020); Patient and Family Engaged Care: An Essential Element of Health Equity (2020).

Anchor principles for stewards of sociocultural inclusiveness

Organizations and individuals designing and implementing health care and other health-related research and services in a learning health system are responsible for assuring that the activities are:

Personal	People are engaged on their expressed needs and goals for health and well-being.
Effective	Wraparound services are available to meet individual requirements.
Equitable	People have parity in access to required services, including those for unique needs.
Safe	Research and services contain special safeguards against personal harm.
Efficient	Facilitated linkages are provided when needed among medical and social services.
Convenient	Help with enrollment protocols and home/multi-site services is available.
Transparent	Clinician, payer, industry and government relationships are fully transparent.
Adaptive	Health and health care services are adjusted to changing evidence and circumstances.
Secure	Vulnerable populations are assured appropriate balance between privacy and inclusiveness.

Related contributions (from the NAM Learning Health System Series and throughout the Academies):

Procuring Interoperability: Achieving High-Quality, Connected, and Person-Centered Care (2019); Communities in Action (2017), Perspectives on Health Equity and Social Determinants (2017), Guiding

Framework for Patient and Family Engaged Care (2017), Community Health Needs Assessments—Aligning the Interests (2016), Resource Compendium for Patient & Family Health Care Leadership (2015), Vital Signs (2015), Patients and Health Care Teams Forging Effective Partnerships (2014), Civic Engagement and Social Cohesion (2014), Best Care at Lower Cost (2012), Challenges at the Intersection of Team-Based and Patient-Centered Health Care (JAMA, 2012)

Dashboard indicators (examples):

1. Indicator target: Percent of population without medical insurance
2. Indicator target: Percent of adults self-reporting fair or poor general health
3. Indicator target: Differences in perception of well-being
4. Indicator target: Differences in infant mortality rate
5. Indicator target: People who were delayed or skipped needed medical care in the last 12 months
6. Indicator target: Proportion of persons who report poor patient/provider communication

NAM Health Inclusiveness Learning Network

Network organizations will represent patient, family, and community voice, federal agencies, health care providers, health-related businesses, medical educators, patient advocacy organizations, philanthropy, professional societies, and research organizations.

National policy levers

- Inadmissibility on Public Charge Grounds Rule (2019)
- CMS Meaningful Measures (2018)
- CHRONIC Care Act (2018)
- Medicaid 1115 Waivers under the Social Security Act (2017)
- 21st Century Cures Act (2016)
- CMMI Alternative Payment Model Program (2016)
- Medicare Access and CHIP Reauthorization Act (MACRA) (2015)
- Patient Protection and Affordable Care Act (2010)