The Gravity Project

Social Isolation & IPV Review, Elder Abuse Concepts
June 10th, 2021
Welcome

Thank you for joining the Gravity Project Workgroup meeting!
Due to the large number of attendees, participants are muted upon entry. Please remain muted to avoid background noise.

This call is being recorded; recording will be available on the Gravity Confluence page following.

You are encouraged to actively participate in the discussion using the Webex chat feature (bottom right of the Webex Meeting window).

Please send chats to “Everyone.”
Gravity Project Anti-Trust Practices

- Gravity Project participants have the responsibility to comply fully with federal and state antitrust laws.
- Individuals speaking or providing written communications shall refrain from any discussion which may provide the basis for an inference that they have agreed to take any action relating to prices, services, production and allocation of markets or any other matter having a market effect.
- Participants shall not discuss their pricing or others’ pricing or any term that might affect pricing or fees, such as costs, discounts, terms of sales or profit margins.
- Adherence to these guidelines involves not only avoidance of antitrust violations, but avoidance of behavior that might be so construed.
Gravity Project Participation

- If you have not already done so, we invite you to **officially join the project here**:
  https://confluence.hl7.org/display/GRAV/Join+the+Gravity+Project

- If you want to **check whether you have already signed up** or if others from your organization have signed up, please review the existing membership here:

- For **all other Gravity Project information**, please visit:
  https://confluence.hl7.org/display/GRAV/The+Gravity+Project
Project Founders, Grants, and In-Kind Support To-Date

Robert Wood Johnson Foundation
The University of Vermont
Yale School of Nursing

sirenUCSF
Kaiser Permanente
BlueCross BlueShield Association

Academy of Nutrition and Dietetics

AMA

AHRQ

AAFP

UnitedHealthcare

Arkansas

Caritas

ATA

NC

The Office of the National Coordinator for Health Information Technology

juxly

Highmark

CynChHealth

Humana

Children's HealthWatch

lyft

California Health Care Foundation

https://confluence.hl7.org/display/GRAV/Gravity+Project+Sponsors
Gravity Project Sponsorship

- The Gravity Project is currently seeking additional sponsors for our 2021 operations
  - This is an opportunity to be a recognized contributor to our critical national work

- If you are interested in learning more about sponsoring opportunities, please send an email to GravityProject@emiadvisors.net or visit https://confluence.hl7.org/display/GRAV/Gravity+Project+Sponsors
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Please submit questions and comments using the Webex chat feature.
Announcements

- HL7 SDOH CC FHIR IG Public Meetings, Wednesdays 3pm – 4pm EST
- HIMSS SDOH Guide Published
- ONC Workshop: Advancing SDOH Data Use and Interoperability for Achieving Health Equity, June 18th
- CDC SDOH Grant: Closing the Gap with Social Determinants of Health Accelerator Plans
- New Coalition: Connecting for Better Health

See more details regarding Gravity’s announcements here: https://confluence.hl7.org/pages/viewpage.action?pageId=91996855#TheGravityProject-Announcements
Project Schedule and Overview
2021 Gravity Roadmap

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Key
- ▲ LOINC Code Submissions (MAR/OCT)
- ★ SNOMED Code Submissions (MAY/DEC)
- ◆ ICD-10 Code Submissions (JUN/DEC)
- ▼ Goals/Interventions

**TECHNICAL**
- IG Ballot
- IG Ballot Reconciliation
- Reference Implementation Development
- HL7 FHIR Connectathons
- Final updates/IG Publication
- Update User Stories
- Reference Implementation Update

**PILOTS**
- Gravity Pilots Testing (6 to 12 months)

**We Are Here**
The intent of our public calls is to present updates of Gravity materials and offer opportunities for the community to reflect and discuss implications.

The community has a critical role in ensuring content is representative of needs. We welcome ideas for additional or altered content to be submitted via Gravity Process available [here](#).

Within the terminology end-to-end review process, one needs to offer *rationale with evidence* for suggested alternate approaches.

All elements must be assessed by our subject matter experts prior to inclusion in the set.
Gravity Project Engagement Guide: Domains

- If one has questions about domains covered in previous builds, please review materials provided and reach out to gravityproject@emiadvisor.net with questions or concerns.
  - Our team will add relevant links on past domains into the chat as able.

- Of note: We gather subject matter experts by domain, if we touch upon concepts that cross domains we’ve yet to cover, we must pause on build of these concepts, however, we will ensure, to the best of our ability, that both the project plan and taxonomy structure allow for additions of these new domains in time
  - Ex: literacy as driver of material hardship
Questions?

You are encouraged to actively participate in the discussion using the Webex chat feature (bottom right of the Webex Meeting window).

Please send all chats to Everyone.
Terminology
## Terminology Roadmap

<table>
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<td>EDUCATION</td>
<td>VETERANS</td>
<td>SOCIAL ISOLATION</td>
<td>STRESS</td>
<td>MATERIAL HARDSHIP</td>
<td>ELDER ABUSE</td>
<td>INTIMATE PARTNER VIOLENCE (IPV)</td>
<td>FOOD DESERTS</td>
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**Key**
- LOINC Code Submissions (MAR/OCT)
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**Break**

**WE ARE HERE**
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<th>Date</th>
<th>Gravity WG Meeting Tasks</th>
<th>Homework</th>
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<tr>
<td>5/27</td>
<td><strong>Social Isolation, IPV, &amp; Elder Abuse</strong>: Screening and Diagnosis Concepts</td>
<td>Submit: Social Isolation, IPV, Elder Abuse Screening and Diagnosis Concepts</td>
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| 6/10   | **Social Isolation & IPV**: Screening and Diagnosis End to End Review  
Elder Abuse: Screening and Diagnoses Concepts | Review: Social Isolation & IPV  
Submit: Elder Abuse Screening and Diagnosis |
| 6/24   | **SOCIAL ISOLATION & IPV: Consensus Vote**                          | Review: Elder Abuse                           |
|        | Elder Abuse: Screening and Diagnoses End to End Review              |                                               |
| 7/08   | **ELDER ABUSE: Consensus Vote**                                     |                                               |
Questions?

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Community Terminology Development
Social Isolation and Loneliness Screening and Diagnosis End to End Review
Social Isolation

- Master List available for review: https://confluence.hl7.org/display/GRAV/Social+Isolation
- Next Steps: Consensus vote
  - SMEs: Edward Garcia- Foundation for Social Connection; Dr Julianne Holt-Lunstad, Dr Matt Pantell
Social Isolation, Loneliness, and Social Support (And Relationship Quality) **UPDATES**

**Social isolation** – Objectively being alone, having few relationships, or infrequent social contact.

**Loneliness** - Is subjectively feeling alone. The discrepancy between one’s desired level of connection and one’s actual level.

**Social Support** - The actual or perceived availability of resources (e.g., informational, tangible, emotional) from others. Four types of social supportive behaviors: emotional, instrumental, informational and appraisal.

**Relationship Quality** - (in process: positive/negative/other/mixed feelings about existing relationships)
Social Isolation, Loneliness, and Social Support: Tools and Concepts Matching

The best way to comprehend the screeners is to download and review the summary we have provided on the confluence.

**Social isolation** –
*PRAPARE* - How often do you see or talk to people that you care about and feel close to (For example: talking to friends on the phone, visiting friends or family, going to church or club meetings)?

**Loneliness** -
*PROMIS, Social Isolation* - I feel isolated even when I am not alone

**Social Support** -
*PROMIS, Emotional Support* - I have someone who will listen to me when I need to talk
## Social Isolation, Loneliness, and Social Support: Diagnoses

**Social isolation –**

<table>
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<tr>
<th>Lives Alone</th>
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<tr>
<td>Lives Alone - no help available</td>
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<tr>
<td>Social Isolation</td>
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<tr>
<td>Social withdrawal</td>
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<tr>
<td>Limited social contact</td>
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<tr>
<td>Minimal outside social stimulation</td>
</tr>
<tr>
<td>Decreased social isolation</td>
</tr>
<tr>
<td>No contact with family</td>
</tr>
<tr>
<td>Lives alone needs housekeeper (finding)</td>
</tr>
<tr>
<td>Social isolation in parenthood (finding)</td>
</tr>
<tr>
<td>At increased risk for social isolation (finding)</td>
</tr>
</tbody>
</table>

**Loneliness-**

| Feeling lonely (synonym loneliness) |
| At risk for loneliness |

**Social Support-**

| Inadequate social support |
| Receives no social support |
| Lack of family support |
| Lacks emotional support |
IPV Screening and Diagnosis
End to End Review
Intimate Partner Violence

- Master list available for review: https://confluence.hl7.org/display/GRAV/Intimate+Partner+Violence
- Next Steps: Consensus vote
- SME: Chris Grasso- Fenway Health, Lisa James - Future w/o Violence
Intimate Partner Violence: Screening Review

- Comments on what was added
  - The CUES framework as the beginning assessment
    - So many patients that I see are in relationships that don’t feel safe, where there may be physical, sexual or emotional abuse and fear. Because of this, I’m offering all my patients information about relationships and how they affect our health – for yourself and for you to share with friends or a family members. If this is part of your experience – I want to make sure you have help if you or a friend or family member ever need it.
    - Has anything like this happened to you” or “Is any of this part of your story?” (BOTH have been used widely)
    - Then paths for affirmative and negative responses
Intimate Partner Violence: Screening Review

- The best way to comprehend the screeners is to download and review the summary we have provided on the confluence.

- Comments on why tools were excluded
  - Removed any tool that did not specifically address IPV.
  - Parked secondary screeners that assessed severity or safety after the fact
  - Removed tools that limited gender options because not broadly implementable and not inclusive
Intimate Partner Violence: Diagnoses Review

- Very straightforward abuse concepts.... Not very much room here

- BUT, we are going to advocate for non-binary perpetrator codes

  - **Y07.0** Spouse or partner, perpetrator of maltreatment and neglect
    - **Y07.01** Husband, perpetrator of maltreatment and neglect
    - **Y07.02** Wife, perpetrator of maltreatment and neglect
    - **Y07.03** Male partner, perpetrator of maltreatment and neglect
    - **Y07.04** Female partner, perpetrator of maltreatment and neglect
Questions?

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Community Terminology Development
Elder Abuse Screening and Diagnosis Concepts
Elder Abuse

- Next steps, meeting weekly with our subject matter experts to gather and review screening and diagnoses concepts
  - SMEs: Dr Ron Acierno, Dr Jason Burnett, Dr Zach Gassoumis, Dr Karl Pillamer
Elder Abuse- Definitions UPDATES

- **Elder Abuse** - An intentional act or failure to act by a caregiver or another person in a relationship involving an expectation of trust that causes or creates a risk of harm to an older adult.
  - **Physical Abuse** - The intentional use of physical force that results in acute or chronic illness, bodily injury, physical pain, functional impairment, distress, or death.
  - **Sexual Abuse** - Forced and/or unwanted sexual interaction (touching and non-touching acts) of any kind with an older adult.
  - **Emotional Abuse** - Verbal or nonverbal behavior that results in the infliction of anguish, mental pain, fear, or distress, that is perpetrated by a caregiver or other person who stands in a trust relationship to the elder
    - Inc: humiliation/disrespect, threats, harassment, isolation/coercive control
Elder Abuse - Definitions UPDATES

- **Neglect** - Failure by a caregiver or other person in a trust relationship to protect an elder from harm or the failure to meet needs for essential medical care, nutrition, hydration, hygiene, clothing, basic activities of daily living or shelter, which results in a serious risk of compromised health and/or safety, relative to age, health status, and cultural norms.

- **Exploitation**—The illegal, unauthorized, or improper use of an older individual’s resources by a caregiver or other person in a trusting relationship, for the benefit of someone other than the older individual. This includes, but is not limited to, depriving an older individual of rightful access to, information about, or use of personal benefits, resources, belongings, or assets.
Questions?

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Policy Update
On April 15, 2021, the HIT Advisory Committee unanimously approved a recommendation to add the Gravity Project’s SDOH data class to USCDI version 2.

The SDOH data class was one of the lead recommendations in HITAC’s letter to National Coordinator Micky Tripathi on May 24, 2021.

Final USCDI v2 expected in July 2021.
Policy Updates: More Appreciation!

- On June 9, the USCDI Task Force and the Interoperability Standards Priorities Task Force further highlighted the Gravity Project’s work.

- The USCDI Task Force plans to consider SDOH further as a priority for **USCDI version 3**.
  - Gravity Project presents to Task Force on July 6.

- The Interoperability Standards Priorities Task Force included recommendations on **health equity**:
  - “4a: ONC should incorporate HL7 Gravity Project nomenclature and value set standards into USCDI.”
  - “4b: ONC to ensure that the ISA [ONC’s Interoperability Standards Advisory] tracks the interoperability priorities identified by the Gravity Project, including the capture of SDOH inside regular clinical workflows via standards such as FHIR Questionnaires, and the capture of individual consent (potentially using FHIR Consent) to authorize such sharing.”
Questions?

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Technology Update
Results from the January SDOH Clinical Care IG Ballot

Results of ballot voting
- Affirmative 63
- Negative 30
- Abstain 56
- No Vote 43
- Total 192
The ballot met the 60% threshold required to publish as an STU

Ballot comments submitted
- Total ballot comments 227
- Total negative comments 72
- Total affirmative comments 155
Note: Affirmative comments include typos, questions, suggestions, comments

Ballot Reconciliation Status
- As of 4/30/2021 198 of the 227 ballot comments have dispositions -- 29 to go (all are focused on the patient story)
CMS FHIR Connectathon

- CMS will host a virtual Connectathon on July 20-22, 2021.
- This will include a Gravity Social Determinants of Health (SDOH) track
- The SDOH track will be on only one day (either July 21 or July 22).
- There is no fee to participate in the CMS Connectathon.
- Sign-up for the connectathon is on the HL7 website and will be available until **July 1**.
  - [http://www.hl7.org/events/cms/](http://www.hl7.org/events/cms/)
- Please sign-up on the Gravity Confluence to declare participation and the role(s) you plan to exercise.
  - [https://confluence.hl7.org/display/GRAV/Connectathon+Participation+Sign-Up](https://confluence.hl7.org/display/GRAV/Connectathon+Participation+Sign-Up)
Questions?

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Community Homework and Next Steps
Homework

- **General**
  - Catch up as needed on materials and recordings on Gravity Project Materials Confluence page
    
    https://confluence.hl7.org/display/GRAV/The+Gravity+Project+Materials

- **Social Isolation**
  - Review Social Isolation screening and diagnosis
    
    https://confluence.hl7.org/display/GRAV/Social+Isolation

- **IPV**
  - Review IPV screening and diagnosis
    
    https://confluence.hl7.org/display/GRAV/Intimate+Partner+Violence

- **Elder Abuse**
  - Review Elder Abuse screening and diagnosis
    
    https://confluence.hl7.org/display/GRAV/Elder+Abuse
Next Steps

- Join the Gravity Project as a Committed Member or Other Interested Party
  - [https://confluence.hl7.org/display/GRAV/Join+the+Gravity+Project](https://confluence.hl7.org/display/GRAV/Join+the+Gravity+Project)
Thank you for participating in this national consensus-building process.

Additional questions? Contact: gravityproject@emialdvisors.net

: Gravity Project  
: @thegravityproj

https://thegravityproject.net