

The Gravity Project



Consensus-driven standards on social determinants of health

Announcements

- **Consensus Voting** on the Food Insecurity Master List is NOW OPEN November 21 through December 5. [Click here to review the Master List and submit your vote.](#)

Gravity in the News

- [HL7 Announces Gravity as New FHIR Accelerator Project](#)
- [MobiHealthNews: Gravity Project Joins HL7 FHIR Accelerator](#)
- [Digital Health News: HL7 Adds SDoH Project Into the FHIR Accelerator Program](#)

Become a Gravity Project Sponsor

SIREN and EMI Advisors are currently seeking additional Gravity Project sponsors. This is an opportunity to be recognized as contributing to this project, which is receiving considerable attention. If your organization is interested in becoming a sponsor, please click on the button below to submit your contact information.

Express Interest in Sponsoring Gravity

UPDATED Gravity Project meeting schedule

- We will be moving back to weekly project meetings beginning Thursday, October 10, 2019. Meeting information will remain unchanged. [Click here for upcoming meeting information.](#) For the full meeting schedule, [click here.](#)
- We are currently working in the Food Insecurity domain. [Click here for food-related terminology, definitions/descriptions, and source materials.](#) These will be used to guide scope and community discussions around food data elements.
- [Click here to access Gravity Project materials.](#)

Join the Gravity Project

The success of the Gravity Project depends on the contribution of volunteers who are eager to make rapid progress on the standardization of social determinants of health data. We need experts to contribute to and validate definitions for SDH related data elements and value sets.

Participants are asked to [join the project](#) at any time either as a **Committed Member** or **Other Interested Party** as part of the [HL7 Consensus Process](#). To join the project, [sign up here](#).

- To check your project membership status, [click here](#). If you wish to change your membership from Other Interested Party to Committed Member, please send an email request to GravityProject@emiadvisors.net.
- NOTE: Both member types can submit comments on project documentation. However, **only Committed Members may vote on final documentation**. If you would like to have voting rights, please change your membership status or [join the project](#) as a Committed Member.

Overview



Quick Links

[Why the Name "Gravity"](#)

[Submit Consensus Votes on Food Insecurity Master List](#)

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[Gravity Project Member List](#)

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[Gravity Use Case Package](#)

[Past Meeting Presentations and Recordings](#)

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[Educational and Instructional Materials](#)

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[Relevant Work](#)

[HIMSS 2019 Presentation](#)

[SIREN Website](#)

The [Social Interventions Research and Evaluation Network \(SIREN\)](#), with funding from the Robert Wood Johnson Foundation and in partnership with EMI Advisors, LLC, is pleased to invite you to join the Gravity Project. Driven by the growing interest in capturing social risk and protective factor data in health care settings, the Gravity Project brings industry leaders together to identify and harmonize social risk and protective factor data for interoperable electronic health information exchange.

The Gravity Project will convene a public collaborative process from April to December 2019 to accomplish the following goals for the social domains of food security, housing stability and quality, and transportation access:

- Develop use cases to support documentation of specific social domains across screening, diagnosis, goal setting, and intervention activities within EHR and related systems;
- Identify common data elements and their associated value sets to support the uses cases;
- Develop a consensus-based set of recommendations on how best to capture and group these data elements for interoperable electronic exchange and aggregation; and
- Initiate development of an HL7® Fast Health Interoperability Resource (FHIR®) Implementation Guide based on the defined use cases and associated data sets that will be finalized in the next phase of work.

Project objectives will be accomplished through weekly one-hour virtual meetings and collaborative project product development through the HL7 project confluence page.

Upcoming Gravity Project Meeting

Date	Time	Topic	Webinar Information	Homework Documents & Links
December 12, 2019 <i>Please note: this is the last community meeting to be held in 2019.</i>	4:00-5:00pm ET / 1:00-2:00pm PT	Community Meeting <ul style="list-style-type: none"> • Review: Consensus Voting Results and Dispositions • Overview of FHIR IG Review Process 	Please log on before dialing in and enter the provided participant ID. URL: https://emiadvisors.webex.com/emiadvisors/j.php?MTID=m9ec3c58b6940b23e068ac88e8a46c4ca Dial-In: (415)655-0003 Meeting ID: 738 112 808 Password (for app users): gravity	Submit Consensus Votes Nov 21-Dec 5 <i>(Admin note: the link above will be inactive until voting opens)</i> Email comments and feedback to GravityProject@emiadvisors.net

[CLICK HERE FOR A FULL MEETING SCHEDULE](#)

[Click here for project documentation and deliverables.](#)

Gravity Project Steering Committee

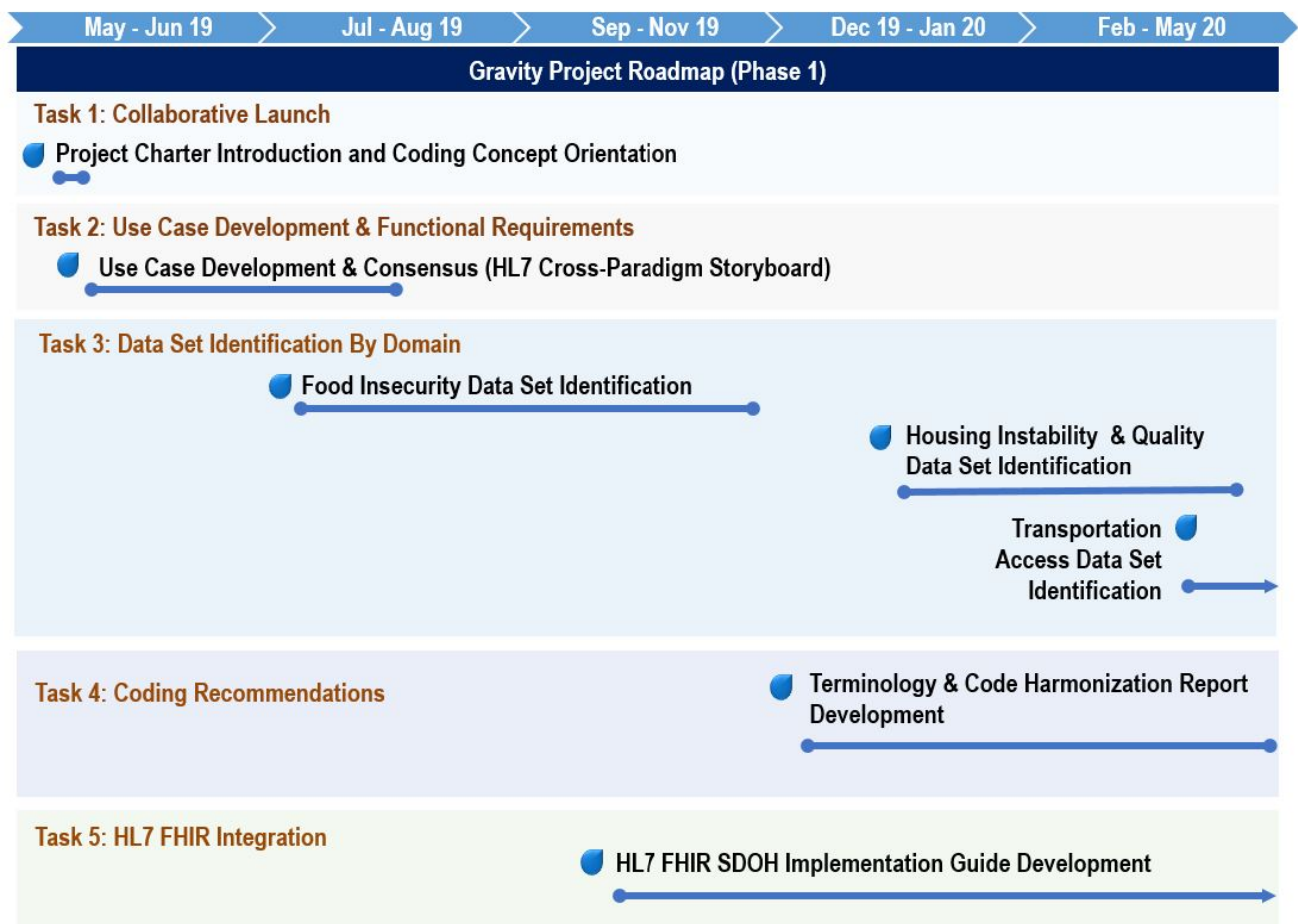
Steering Committee meetings are currently held on the last Monday of each month.

Steering Committee Members

Name	Organization
Mark Carrozza	American Academy of Family Physicians (AAFP)
Keri Christensen	National Committee for Quality Assurance (NCQA)
Chris Dymek	HHS Agency for Healthcare Research and Quality (AHRQ)
Margo Edmunds	Academy Health/ National Interoperability Collaborative
Andrea Gelzer	AmeriHealth Caritas
Tom Giannulli	American Medical Association
Cara James	CMS Office of Minority Health
Nafisa Jiwani	CMS Innovation Office (detail), Centers for Disease Control (CDC)
David Kendrick	MyHealth Network
Jessica Khan	McKinsey

Lisa Lehmann	Department of Veterans Affairs (VA)
Brenna Long	Department of Veterans Affairs (VA)
Sam Meklir	HHS Office of the National Coordinator (ONC)
Nancy Myers	American Hospital Association Center for Health Innovation
Tom Novak	HHS ONC
Pam Owens	HHS AHRQ
Michelle Proser	National Association of Community Health Centers (NACHC)
Duane Reynolds	American Hospital Association Institute for Diversity and Health Equity
Sheila Shapiro	UnitedHealthcare Clinical Services
Walter Suarez	Kaiser Permanente
Al Taylor	HHS ONC
Bill Winfrey	HHS Centers for Medicare & Medicaid Services (CMS) Innovation Center
Carlos Villarreal	Blue Cross Blue Shield Association

Project Timeline



★ Kick-Off May 2, 2019

Project Contacts

Name	Title	Organization	Email
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Caroline Fichtenberg	Managing Director	SIREN	caroline.fichtenberg@ucsf.edu
Laura Gottlieb	Director	SIREN	laura.gottlieb@ucsf.edu

Comments

Comment(s)

Thank you for leading this important work. I wonder about the "out of scope" disclaimer about not getting into the actual social needs screening instruments and items. The question is can you standardize the answers without standardizing the questions? Anyway, that is the topic I'm most interested in and am actively engaged in with Epic, and would be happy to participate/contribute as appropriate.

Greetings! Great start on the work related SDOH that is on the Confluence page. The following should be considered to be added:

Medicaid Information Technology Architecture (MITA)
<https://www.medicaid.gov/medicaid/data-and-systems/mita/mita-30/index.html>

Homeless Management Information System (HMIS)
<https://www.hudexchange.info/resource/3824/hmis-data-dictionary/>

Open Referral - I can introduce you to their Executive Director Greg Bloom
<https://openreferral.org/>

Among the uses for standardized SDOH data, regulatory reporting was not mentioned. Obviously there are limited regulatory reporting requirements (in part due to the limited standardization of data). It could be beneficial to develop the standard in a way that makes the data easy to be consumed by future regulators with minimal/zero click reporting involvement by provider staff. We can take inspiration from the approach to the XBRL data standard used by Australia and the Netherlands to automate corporate reporting.

<https://www.xbrl.org/the-standard/how/getting-started-for-regulators/>

Hope this helps!
 Matt

Excited to be a part of the collaborative! From a community mobilization and engagement perspective, the materials offered on The Gravity Project Website (charter, glossary and standards/initiatives) provide a clear grounding of the project for members, define the parameters of the project and set the stage for next steps. In addition to the use cases described in step 1 of the Scope Statement, it would be helpful to keep the six uses described the NAM 2014 Phase 2 report in mind to ensure that the data will meet multiple cases. Institute of Medicine (2014) Capturing Social and Behavioral Domains and Measures in Electronic Health Records: Phase 2. National Academies Press, Washington DC.

About 1,095 SDH codes have been highlighted via the SIREN Social Risk Codes review (relating to 20 social risk domains). This is a very comprehensive amount, but may be somewhat confusing. It will be interesting to see how we will narrow down such a vast amount of codes. Will we focus on ICD-10, LOINC, SNOMED, and CPT all together, or start with just one of these code types initially?

I recommend adding the Homeless Management Information System (HMIS) to the "Relevant Work in Social Determinants of Health" resource page.
<https://www.hudexchange.info/programs/hmis/>

Think that it is helpful to keep in mind HUD's definitions of homelessness and housing instability when developing SDoH housing instability data element definitions
<https://www.hudexchange.info/trainings/courses/recording-and-documenting-homeless-status/>

Minor comment on charter - in the first paragraph of 5.2.19 V 1.4 of charter - I think you mean National Quality FORUM (not National Quality Framework) ADMIN NOTE: Updated in Charter v1.5

suggested additions to list of materials -

(1) Another standard SDH code set is contained in the International Classification of Primary Care, 2nd edition, in its Chapter Z. ICPC-2 is the primary medical care coding and classification standard for several countries, is mapped to ICD-10 (11), and to a defined subset of SNOMED CT, the SNOMED GP-FP Reference Set.

(2) Can add to list of vendors with SDH capabilities RiverStar Software, which offers a Community Care Hub product that combines SDH screening with community service agency referral support and tracking. Can see at: <https://www.riverstar.com/community-care/>

Relative Standards and Initiatives -

HL7 CDA® R2 Implementation Guide: C-CDA R2.1 Supplemental Templates for Nutrition, Release 1

This Implementation Guide is clinical inpatient oriented however the care plan component is worth evaluating as a pattern and part of a use case where at risk patient needs.
