# **FUTURE OF NURSING™**

# Campaign for Action

Robert Wood Johnson Foundation



AT THE CENTER TO CHAMPION NURSING IN AMERICA

# Recommendation 6

USING TECHNOLOGY TO INTEGRATE DATA ON SOCIAL DETERMINANTS OF HEALTH INTO NURSING PRACTICE



All public and private health care systems should incorporate nursing expertise in designing, generating, analyzing and applying data to support initiatives focused on social determinants of health and health equity using diverse digital platforms, artificial intelligence, and other innovative technologies.

#	Sub-Recommendation
6.1	Integrate data on SDOH and build a nationwide infrastructure
6.2	Ensure that health equity data collaboratives improve visualization of data on SDOH
6.3	Employ nurses with expertise in informatics to improve individual and population health
6.4	Give nurses in clinical settings responsibility and associated resources to innovate and use technology
6.5	Provide resources to facilitate telehealth by nurses

6.1 With leadership from CMS and The Office of the National Coordinator for Health Information Technology, accelerate interoperability projects that integrate data on SDOH from public health, social service organizations, and other community partners into electronic health records, and build a nationwide infrastructure to capture and share community-held knowledge, facilitate referrals for care (including by decreasing the "digital divide"), and facilitate coordination and connectivity among health care settings and the public and nonprofit sectors.

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#### 1. Key Strategic Stakeholders

#### **Health Care**

Community Health RNs – public health, faith based; Community Health Workers, Community Paramedics; Nurses on design team building device/tools

#### **Federal Government**

Agency for Healthcare Research and Quality; Federally Qualified Health Center Grants; Health Resources and Services Administration

#### Other

Electronic Health Records vendors; Life Science Companies; Patient Organizations; Payors; Tech Companies (Microsoft e.g.)

#### 2. Top 3-5 Actions for 2021

- A. Empower patients to own the data B. Connect data into health model
- C. Universal health records held by school registered nurses B. Sunshine Act explore public/private partnerships. (RNs)
- D. Create core questions so that information is consistent across systems - standardization.
- E. How many community orgs with connection to Social Determinants of Health (SDOH) are electronic
- F. Feedback skills for RNs
- G. RNs need to understand of standards & terminology (education goal - cross discipline work at all levels)
- H. Community organizations hire RN informaticists.
- Local issue how to connect to EHIs
- J. Create workable plans for patients

#### 3. Top 3-5 Actions for 2022

- A. Need federal mandate to overcome interoperability issues - affects access to care.
- C. Quantify the value and have Hospitals recognize the role of registered nurse informaticists.
- D. Quantify how many orgs are not connected.
- How many federally funded are not connected?
- As new tech/data joins fundamental integration and addressing standards especially to report out SDOH

- Build structure to house data and communicate knowledge.
- Recognize all community orgs need to be connected to track data.
- Connected to local EHI collecting SDOH and connect people to services.
- Bridge the Gaps.

6.2 Ensure that existing public/private health equity data collaboratives (e.g., the Gravity Project8) encompass nursing-specific care processes that improve visualization of data on SDOH and associated decision making by nurses.

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#### 1. Key Strategic Stakeholders

#### **Health Care Organizations**

National Association of Social Workers; Nursing Informatics Specialists

#### **Federal Government**

Center for Disease Control and Prevention; Centers for Medicare and Medicaid Services; Health Resources and Services Administration U.S. Department Health Human Services; U.S. Surgeon General

#### Education

Schools of Nursing

#### Other

Case workers; Electronic Management Records Vendors; Funders; Gravity Project; Ministries of Health & Public Health Departments; Nurse leaders at the American Red Cross; National Library of Medicine

#### 2. Top 3-5 Actions for 2021

- A. Define nursing-specific care processes.
- B. Examine data collection areas for public health and Social Determinants of Health (SDOH).
- C. Evaluate which SDOH components to track.
- D. Convene nurses with expertise on this area
- E. Identify who leads these efforts.
- F. Define who collects these data.

#### 3. Top 3-5 Actions for 2022

- A. Ensure nurse representation among existing data and equity convenings.
- B. Connect with existing international programs and collaboratives to learn more.
- C. Work with vendors to ensure data is public and easy to understand.
- D. Engage companies which have expertise in visualizing
- E. Review and evaluate opportunities for nursing informatics fellowships.
- F. Review and evaluate existing data visualization efforts.

- More robust data sets which nurses can act upon.
- · EMR products are built out and used (usage percentages).
- Better alignment of patient outcomes with interventions.
- · Use of these data by nurses and other stakeholders.
- · More nurses on the backend of EMR development.

6.3 Employ nurses with requisite expertise in informatics to improve individual and population health through large-scale integration of data on SDOH into nursing practice, as well as expertise in the use of telehealth and advanced digital technologies.

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#### 1. Key Strategic Stakeholders

### 2. Top 3-5 Actions for 2021

#### 3. Top 3-5 Actions for 2022

#### **Nursing Organizations**

American Association of Colleges of Nursing; American Association of Nursing Leadership; American Nurses Association; National League of Nursing; Organization for Associate Degree Nursing

#### **Federal Government**

Centers for Medicare and Medicaid Services; Federal Communication Systems (broadband); Office for the National Coordinator of Health Information Technology

#### **Education**

**Academic Institutions** 

#### Other

Chief Information Officer/Chief Technology Officer; Healthcare Organization Leaders; Insurance

- A. Redefine informatics not only as the technology but also the way we collect data such as HER Data Method
- B. Define and prioritize nursing leadership around. technology to include and incorporate the nurse leaders
- C. Balance qualitative metrics & data with quantitative data & metrics C. and ensure that we avoid bias
- D. Investigate and implement innovations to promote and advocate value and impact of informatics leadership
- E. Identify family caregiver data points
- F. Redefine and broaden the definition of Telehealth to include other points of contact
- G. Examine how informatics curriculum develops pipeline
- H. Leveraging funding from the American Rescue Plan
- I. GRAVITY Project increase nursing participation
- J. Advocating for standard occupational classification codes for nursing informatics

- A. Nurses have knowledge of codes/claims data to determine how to get paid for the care they provide
- B. Increased uptake of remote health/telehealth/patient engagement
- C. Include standards of evidence of nursing involvement with informatics for social determinants of Health for Magnet Certification
- D. Increase the United States Public Health Service.
- E. As hospitals and community organizations are completing needs analysis that they engage informaticists

- · Benchmark surveys how many informaticists in the nursing workforce
- Increase from baseline of nurses who identify being in informatics roles, including leadership
- Patients are able to receive the care they need increased patient engagement/compliance with plan of care less readmissions
- · Standardized datasets
- Standardized codes that are billable and reimbursable

6.4 Give nurses in clinical settings responsibility and associated resources to innovate and use technology (Team 12 defined "Clinical Settings" as all places where nurses provide care)

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#### 1. Key Strategic Stakeholders

#### 3. Top 3-5 Actions for 2022

### **Nursing Organizations**

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#### **Health Care**

American Hospital Association; Health system C-Suites; Nurses; Public Health decisionmakers

#### **Non-Profits**

Consumer groups; community-based organizations; Funding organizations

#### **Federal Government**

Federally Qualified Health Centers; Funding opportunities from agencies

#### Education

Academic institutions (integrated into the curriculum)

A. Getting nurses on key committees that determine which technologies are used/being considered

2. Top 3-5 Actions for 2021

- B. Evaluating existing Innovation platforms and determine what is scalable
- C. Develop a pathway to integrate innovation competencies into nursing curriculum
- D. Reach out American Association of Colleges of Nursing to consider a session at their upcoming conference to explore the potential for chief information/innovation officers within schools of nursing
- A. Nursing payment model changes need to be applied to innovation funding
- B. Develop a scalable Innovation platform
- C. Increase the number of partnerships across disciples within academic institutions

- Patient Outcomes improve as a result of innovations
- · Employee retention/engaged workforce
- Get to the level of 10% of nurses participate in innovation platforms (400,000 nurses)
- 50% increase of chief information officer/innovation officers who are nurses
- More nursing schools within academic health centers consider hiring chief information/innovation officers who are nurses

6.5 Provide supportive resources to facilitate the provision of telehealth by nurses by expanding the national strategy for a broadband/5G infrastructure to enable comprehensive community access to these services; and increasing the availability of the necessary hardware, including smartphones, computers, and webcams, for high-risk populations.

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#### 1. Key Strategic Stakeholders

#### **Health Care**

Health care professional licensing boards; CVS;

#### **Non-profits**

American Telehealth Association; National Consortium of Telehealth Resource Centers; Philanthropists (Gates, Amazon, Bezos, Bloomberg); National Governors' Association

#### **Federal government**

Centers for Disease Control and Prevention; Centers for Medicare and Medicaid Services; Elected officials; National Library of Medicine United States Department of Health and Human Services

#### State government

City; County; and State

#### Education

College campuses/community colleges and IT department has expertise that can provide technical assistance

#### Other

Amazon; Businesses with health clinics at work; Consumer groups; health literacy experts; health organization; Informatics; Insurers; Local libraries; Rural economic development organizations; Tech companies; Technology aids/presenters; Translation services;; Walmart

#### 2. Top 3-5 Actions for 2021

- A. Analyze existing data and policy. Identify gaps in funding and broadband service and affordability
- B. Explore opportunities with other licensing boards for partnering on how to advance policy
- C. Educate where there is little or no affordable access –both broadband and hardware.
  - Get on agenda for National Governors Association
- D. Begin planning a stakeholder meeting (nationally/regionally)
  - Solicit innovative ideas to get telemedicine equipment as a covered benefit under health insurance/Medicaid (durable medical equipment?)

#### 3. Top 3-5 Actions for 2022

- Convene states and key stakeholders on this issue and develop a strategic plan to resolve and improve consumer access to care
  - Present innovative ideas for discussion
- B. Employers provide infrastructure (including staff) to have a tele-practice in the place of employment

- 10% increase in access to broadband (consider additional measures by groups)
- Federal and state policy will ensure affordable access for high-risk populations
- Increase in tele-practice sites as places of employment
- Successfully implement stakeholder meeting and develop a shared policy agenda