

# **2025-26 Circular System Architecture™:** **Civic Engagement Resource Guide**

**Synclarity Consulting™:** Dec 5, 2025



**HEALTH AND HUMAN SERVICES**  
**INNOVATION™**

## CSA™: 2025-26 Civic Engagement Resource Guide

In the **Future of Business, Workforce, and Economic Development Infrastructure™** of the **Digital Epoch**. To operationalize and optimize strategies for achieving more sustainable outcomes. It will require the ethical and effective use of accurate, reliable, and valid data. We are in uncertain times, when new precedents will be set. And that means leaders have to lead. Sometimes that means admitting that we don't always know what we don't know. "Our potential is limitless — if we don't limit ourselves first." The ability to quantitatively and qualitatively qualify the investment needed to support quality improvements and coordination, and the continuum of care standards, we will need to keep pace with:

- Increase in overall life expectancy.
- Cost of living, education, healthcare, and housing.
- New job creation with institutional knowledge transfer.
- Overall rate and pace of technological change.
- 24/7/365 Follow-the-Sun global business environment.

Will all require the ethical and effective use of accurate, reliable, and valid data. Based on this assessment, what value do companies currently bring in relation to the civic ecosystems where they are located, and how do they create, sustain, and realize more value? " We are all free to make our own choices, but not free from the consequences of those choices. And if we do what we have always done, we will get what we have always gotten. And there is simply too much at stake. Leaders need to lean in, get comfortable being uncomfortable, with a beginner's mindset, and embrace experiential learning. In the **Future of Business, Workforce, and Economic**

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**Development Infrastructure™**, the better the inputs and processes, the better the outcomes. Which means, that you need as many **accountable, business, insights, decisions**, and **experiences** as possible consistently compounded over time to build efficiency, stability, and resilience. May our aspirations for the future “reflect our hopes, not our fears.” For increasing productivity and prosperity, reducing environmental impact and stress, while delivering the goods and services to the market, focusing:

- **Engagement**
- **Service**
- **Guidance**

“The ability to structure operations to perform effectively and efficiently is where predictive analytics can be essential for deciding which levers are best for **ESG** investing to create momentum on **CSR** initiatives. Based on the geography, infrastructure capacity, and sectors that function within a given civic ecosystem. This is the promise of technology in the **Digital Epoch**. To help:

- **Create**
- **Sustain**
- **Realize**

More positive momentum and progress through data and technology. With the realization that “as the definition of what is considered fair and ethical

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may differ per situation, having **ESG** criteria can help put things into perspective can help align efforts. This set of criteria is thus the standard for a civic ecosystem or company's behavior and actions and can help socially conscious leaders and investors to screen potential investments and other opportunities. Having an **ESG** checklist is essential in performing an **ESG assessment**. Performing an **ESG** assessment is an important part of improving **ESG** policies and practices, as it gives an idea of what actions are beneficial to the company and what aren't." ([Safety Culture 2025](#)) **Circular System Architecture™** is designed to help you be more effective with the problems you are solving. In the **Future of Business, Workforce, and Economic Development Infrastructure Leadership™**, to support building, growing, and evolving. This is the groundwork of common-sense capacity building. Without this prioritization, we're not preparing cities for the future—we're burying them in digital noise. Some topics this document covers:

- **Legislation and regulations:** [21st Century Cures Act](#), [HITECH Act](#), [CMS Interoperability Rules](#).
- **Data exchange and interoperability:** [FHIR](#), [C-CDA](#), [Data Exchange Framework \(DxF\)](#), [eHealth Exchange](#), and [Carequality](#).
- **Certification Programs:** [Health information technology \(HIT\)](#), [Electronic health records \(EHRs\)](#), [APIs](#),
- **Community Resources, Social Care Investments:** [Commercial, Economic, and Social Determinants of Health™](#), [ACEs](#), [screening tools](#).

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- **Standards and Terminology:** [LOINC](#), [SNOMED CT maps](#), [HCPCS codes](#).
- **Organizations:** [AMA](#), [NCQA](#), [SAMHSA](#), [NIH](#), [CHCF](#).
- **Programs and Initiatives:** [LIHEAP](#), [LIWAP](#), [Solar for All](#).

The [Synclarity Consulting™](#) **Circular System Architecture™: Civic Engagement Resource Guide** is designed to bridge theory with execution, providing a structured yet adaptive framework for building scalable, resilient economic systems. We believe “**The Future of Business, Workforce and Economic Development Infrastructure Leadership™**” is rooted in [Circular Systems Architecture™ \(CSA™\)](#), a methodology that integrates emerging technologies, closed-loop learning systems, referral delivery networks, and data-driven methodologies to drive sustainable impact. Each white paper from our lexicon of knowledge, serves as a deep dive into specific components of this framework, offering insights, best practices, and real-world applications to help civic ecosystems, leaders, organizations, and policymakers navigate the evolving economic and technological landscape. Whether addressing infrastructure modernization, civic engagement strategies, or economic resilience, these insights align with the broader vision of self-sustaining, continuously evolving systems that augment human potential at scale. As you explore this document, consider how the principles and strategies outlined here can be applied within your initiatives. **The CSA™: Civic Engagement Resource Guide** is designed as a catalyst for action.

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**Synclarity Consulting™** is a Global Strategic Management Consulting Firm, coalescing experiences in Behavioral, Community Mental Health, Case Management, Healthcare, Social Services, Workforce and Economic Development, Sales, and Training. Having worked directly and indirectly with hundreds of organizations. From Fortune 500 companies like Bosch, Coca-Cola, and Whirlpool to startups, early-stage growth, and small famili-owned businesses. With nearly 10 years of experience and double-digit sales growth across new and established product lines and territories in Northern Indiana and Northern California for Biotech, DME, Medical Devices, Ortho-biologics, Orthopedics, Life Sciences, Pharmaceuticals, Sports Medicine. In systems such as Dignity, John Muir, Kaiser, Stanford, Sutter, UC Davis, UCSF, and the University of Notre Dame Team Physicians. We believe that, **“The Future of Business. Workforce and Economic Development Infrastructure Leadership™** will need leaders, teams, and organizations to use accurate, reliable, and valid data with:

- Financial
- Analytical
- Clinical
- Technical
- Structural

Expertise, proficiency, and skill to increase productivity, while reducing environmental impact and improving the human condition to create healthier and more sustainable civic ecosystems. **Synclarity**

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Consulting™ was founded in 2018 to help startups, small businesses, and early-stage growth companies in education, finance, healthcare, the life sciences, and technology. To get strategically aligned, tactically defined, and operationally refined to help maximize their talent, tools, and time.

“At Synclarity Consulting™, we empower civic ecosystems, business leaders and stakeholders to navigate the complexities of an evolving global landscape by fostering cognitive diversity, ethical leadership, and sustainable value creation. We bridge gaps between industries, policymakers, and communities through strategic collaboration to enhance health, digital, and financial literacy, and positively impact our Commercial, Economic, and Social Drivers of Health™ driving job creation, economic resilience, and long-term shared equity™. Our commitment to innovation and institutional knowledge transfer ensures that organizations remain agile, future-proof, and globally competitive while preserving the environment and advancing economic sustainability for future generations. We partner with investors, startups, small businesses, and early-stage growth companies in education, finance, healthcare, life sciences, and technology—from pre-seed/revenue to Series C and beyond—aligning with their exit strategy for creating Synclarity™ “synergy with systems for sustainable success and more clarity, confidence, and control for whatever comes next.”

We think about this work from the lens of implementation. How do you get buy-in from decision and policy makers to make macro-level changes that impact the civic ecosystems and communities they are serving?

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This document is a general directory of resources relevant to civic engagement in healthcare, social services, and related fields, strongly emphasizing data sharing, interoperability, and addressing Commercial, Economic, and Social Drivers of Health™. For Synclarity Consulting™, Health and Human Services Innovation™ is about getting the right solution to the right person at the right time, as efficiently and cost-effectively as possible. This allows for achieving the best possible outcomes in the most equitable and fiscally responsible way possible. “Healthcare is human care; and any business supporting the human condition is a human or social services organization.” (Krause, J 2025) That makes these industries the core pillars of society that require consistent innovation. With a human-centered approach that places people at the heart of comprehensive, closed-ended solutions and strategies to help improve the human condition. It makes it clear that the success of the future depends on how thriving civic ecosystems and their organizations integrate inclusivity and cultural awareness, competence, and fluency into their core functioning and data utilization strategies.

In Future of Business. Workforce and Economic Development Infrastructure Leadership™: “Infrastructure is no longer just bridges, roads, and the like—it now includes elements ranging from digital networks to clean-energy systems to electric-vehicle charging corridors. And the latest infrastructure research estimates that **\$106 trillion** in investment will be required across **seven critical infrastructure sectors**:

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- **Transportation and logistics** (\$36 trillion)
- **Energy and power** (\$23 trillion)
- **Digital** (\$19 trillion)
- **Social** (\$16 trillion)
- **Waste and water** (\$6 trillion)
- **Agriculture** (\$5 trillion)
- **Defense** (\$2 trillion)

These verticals are not isolated, and their intersections are creating new opportunities for growth and investment.” [\(McKinsey & Co. September 17th, 2025\)](#) **Circular System Architecture™** is designed for broad application, including:

- Economic infrastructure
- Healthcare and human services
- Education-to-workforce pipelines
- Digital and civic ecosystems

In the **Future of Business, Workforce, and Economic Development, Infrastructure Leadership™**, capital allocation and deployment must be intentional. To meaningfully address system gaps, we must invite diverse input from both private and public capital stakeholders around how funds are allocated, deployed, and utilized. These requirements must be:

- **Goal-Oriented**
- **Solution-Focused**

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- **Outcomes-Based**

That means structuring investment strategies that are: **Accretive.**

**Regenerative. Capacity-Building. Scalable.** Which are the foundation of the **A.R.C.S.™ Framework — Accountability. Reliability. Capability. Scalability.**

To support building for growth, evolution, and alignment for impact.

“Geopolitics and innovation can no longer be separated; we must acknowledge that decisions on technology, industry, and investment are being made in a period of unprecedented uncertainty — when supply chains can be disrupted and capital flows restricted, and leadership in new technologies is up for grabs.” ([Murray, S. October 15th, 2025](#)) **Circular System Architecture™** helps assess opportunities for innovation within:

- **The Green Environment.**
- **Built Infrastructure.**
- **Digital Landscape.**

**Circular System Architecture™** is designed to help create a framework and establish a base line for how civic ecosystems want to use data, through emerging technologies to create civic engagement strategies and initiatives that create more balance, and sustainability for the environment, improve the human condition by augmenting the social contract of work based on the **Commercial, Economic, and Social Drivers of Health-Related Needs™** of a given civic ecosystem. From a commercial and economic standpoint, to

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help start, consider these Five Common Market Forces as it relates for opportunities for commercial, social, and resource investment opportunities:

- **Competitive Rivals:** Factors like the number of competitors, industry growth, similarities in offerings, exit barriers, and fixed costs influence the intensity of competitive rivalry.
- **Potential for New Entrants:** Industries with low entry requirements often have lower profit margins. Factors affecting this include economies of scale, product differentiation, capital requirements, access to distribution channels, regulations, and switching costs.
- **Supplier Power:** Suppliers are powerful when they are a unique source, have differentiated products, or have strong brands. This power is influenced by the number of suppliers, uniqueness, switching costs, forward integration, and industry importance.
- **Customer Power:** Customers have more strength when there are fewer buyers, large purchase sizes, low switching costs, high price sensitivity, and informed buyers.
- **Threat of Substitutes:** This threat is magnified by relative price performance, customer willingness to switch, perceived similarity of products, and availability of close substitutes.

Focusing on these aspects can help civic and business leaders **engage**, **service**, and **guide** efforts to improve their collective the **health**, **digital**, and **financial literacy** and **Commercial, Economic, and Social Drivers of Health™** of their ecosystems. To help facilitate this. “**The Social C.L.A.S.S.™**”

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**Action Theory**” within Circular System Architecture™, views our individual and collective health, digital, and financial literacy as the underlying tenets for how we use our data more effectively for social initiatives and Civic Engagement Strategies™. “As the value of the global green built environment approaches **\$2 trillion**, there’s a growing opportunity to disrupt the allocation and flow of building resources with circularity.” (McKinsey May 16th, 2025) **Because** “circularity can be part of the answer and, at the same time, improve the built environment’s economics. By recirculating used materials through harvesting, recertifying, and testing, construction projects can be delivered at a lower cost than by using virgin materials with equivalent performance criteria. Circular practices can accelerate project timelines by minimizing the total work required for an equivalent outcome, mitigating labor productivity challenges by reducing the impact of resource and manufacturing lead times.” (McKinsey May 16th, 2025)

- Economic and social benefits.
- More resilience and flexibility.
- Less environmental impact.
- Regulatory and market incentives.

However, the following are the primary obstacles to circularity in the built environment:

- Value chain rewiring.
- Need for clear business cases.

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- Geopolitical socioeconomic landscape
- Technology and data.
- Stakeholder engagement.

(McKinsey May 16th, 2025)

“This new reality has made geopolitics a central factor in innovation, pushing companies and startups to weigh political and policy risk alongside technological opportunity. Geopolitics is reshaping the fundamentals of innovation in four ways that business leaders should be aware of:

- The world is no longer flat.
- The U.S. and China have entered a period of competition.
- Economic statecraft has become pervasive in countries around the world.
- The energy transition, especially, has become geopolitical.

Given those fundamentals, business strategists in global companies: should consider the following:

- Build a geopolitical calculus into your strategy.
- Secure and diversify your supply chains.
- Respond to industrial policy and statecraft.
- Guard against adversarial capital.
- Use ecosystem advantage wisely.

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By, “conducting whole life cycle assessments and using technology that monitors material use or connects stakeholders in a marketplace will be essential to circularity’s widespread adoption in the built environment. Companies, government agencies, and research institutions can conduct comprehensive life cycle assessments to inform policy and investment decisions. Circularity offers a transformative approach to making the built environment more sustainable and economically resilient. By embracing circular practices, the industry can create substantial economic value, enhance resource efficiency, and drastically reduce the environmental impacts associated with the built environment. To accelerate the circular transition, stakeholders can collaborate, leverage technology, and plan for circularity from the earliest stages of developing buildings. Integration, partnerships, and standardized circular materials, along with strong business models, are essential to support long-term sustainability. Large-scale adoption of circularity will ultimately require a sea change in mindsets, collaboration across the sector, and bold, creative thinking about new business models and possibilities by all stakeholders in the built environment. Accelerating this new future can begin immediately, with each individual step in a circular direction.” ([McKinsey & Co. May 16th, 2025](#))

The ability to quantitatively and qualitatively qualify the investment needed to support quality improvements and coordination, and the continuum of care standards to address our [health, digital, and financial literacy](#), for improving on aspects of [Commercial, Economic, and Social](#)

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**Drivers of Health**™ civic ecosystems is vital to the health of any civic ecosystem. There is also a “silent emergency undermining our health, our workforce productivity, and our economic resilience. What’s needed now isn’t incrementalism—it’s bold, targeted investment and system-level redesign. Every innovation that overlooks the frontline healthcare workforce is a missed opportunity and a strategic failure. Every unfilled role compounds the risk. If health underpins every aspect of economic and human talent capital, then the real question is: How decisively will each region act to build the healthcare workforce it needs—not someday, but now?” The World Health Organization estimates **a global shortage of at least ten million healthcare workers** by 2030, and some organizations project an even larger shortfall. The scale of those affected is huge and growing. Today, 60 percent of the global population—about 4.5 billion people—lack access to essential health services such as safe pregnancy practices and immunizations.” (Kumar, P 2025)

**Circular System Architecture**™ is designed to help business leaders, the civic ecosystem and their stakeholders develop strategies for using emerging technologies to recapture lost potential in the built environment, augmenting the human experience, and limiting the negative impact on the green environment. Utilizing green spaces more responsibly, and enhancing the human condition and quality of life by augmenting and updating the social contract of work. In "**The Future of Business, Workforce, and Economic Development Infrastructure Leadership**™," the better the inputs and processes, the better the outputs and outcomes. It is essential to start

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with **CL.E.A.R.**™ inputs, to create smarter processes, that lead to better outcomes for:

- **The Green Environment:** Better social-work-life balance.
- **The Built Environment:** Recapturing lost potential while rebuilding our infrastructure.
- **The Digital Environment:** Coding and embedding AI Infrastructure & Emerging Technologies for Smarter Solutions.

Leveraging **CSA**™ to help create smarter solutions for the problems we're solving. Because simplicity is the key to brilliance in building, growing, and evolving with:

- More productivity.
- Less burnout.
- Better sustainability.

In "**The Future of Business, Workforce, and Economic Development Infrastructure Leadership**™ our options are limitless if we don't limit ourselves. We believe we need new ways to think, act and talk about the shared problems we are working on. All words have meaning, but all words are also made up. What matters most is the context in which we use them and the connotation we associate with them. What we need is a new way to discuss new solutions for old problems.

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What if in the Digital Epoch **V.U.C.A** meant:

- **Value:** How organizations add value by saving time and money.
- **Utility:** Offering more comprehensive products and services.
- **Capacity:** Efficient and ethical economies of scale.
- **Accessibility:** Ability to meet the market, where the market is.

What if **E.S.G** meant:

- **Empowerment:** To take more ownership and agency over outcomes
- **Sustainability:** Resilience through disruption and greater share equity during stable times.
- **Gratitude:** To appreciate what we already have while we work toward a desired future state.

What if **C.S.R.** meant:

- **Comprehensive:** Encompassing and effective.
- **Strategic:** Solution-focused and scalable.
- **Resilient:** Responsiveness with responsibility.

During times of change and uncertainty “Leaders have to lead, and may our decisions reflect our hopes and not our fears.” That lead to more:

- Learning
- Engagement
- Accountability
- Discipline

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- Empowerment
- Resourcefulness
- Stability

The better decision and policy makers understand the needs of any given civic ecosystem, the businesses, and talent that support them. The more **optionality, practicality, functionality**, and **multidimensionality** they create as they strive to support their drive to thrive. This is a critical challenge for the future: navigating the impact of technology with an emphasis on human values and ethical oversight. The core of this thought process is a call to action for integrating accountability, ethics, integrity, morals, and values into every stage of technological development. This requires a broader perspective, moving beyond traditional metrics to a more holistic view of human, societal well-being, and sustainability. This moment calls for serious attention to:

- Reducing redundant service provision.
- Fragmented and braided funding streams.
- Shared but siloed data for shared populations.

“If we do what we have always done, we will get the results we have always gotten.” And there is simply too much at stake in the **Digital Epoch**; civic ecosystems need more alignment, balance, and cohesion. Consider these aspects to create more continuity from the boardroom to the floor room, based in part on some of the following values:

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**“01. Sustainability is an operating system—not a belief system:** Boards should embed sustainability into company culture and strategic oversight, not only for compliance but to drive resilience and long-term value.

**02. Take the long view, using frameworks to guide decisions:** Boards should keep an eye on megatrends and disruptive forces, using tools like the “Five Ds” (demographics, de-globalization, de-leveraging, decarbonization, digitization) and the “Five Ps” (process, place, people, portfolio, performance) to evaluate opportunities and risks.

**03. Play offense, not defense—sustainability is a competitive advantage:** Leading companies integrate sustainability into ERM—evaluating exposures and unlocking advantages like market differentiation, talent attraction, and innovation.

**04. Build a culture of engagement and precise education:** Boards need regular updates, clear language, and expert input to make informed decisions and communicate clearly with a diverse range of stakeholders.

**05. Climate risks belong in business planning:** Boards should treat climate risks—such as carbon pricing, extreme weather, and insurance—as standard business factors in planning and capital allocation. ([Nasdaq Center For Board Excellence October 9th, 2025](#))

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However, one major challenge is that “data science, broadly defined, has been around for a long time. But the failure rates of big data projects in general and AI projects in particular remain disturbingly high. And despite the hype (e.g., “data is the new oil”), companies have yet to cite the contributions of data science to their bottom lines. Data science is a team sport, but it’s not a game. Leaders must make clear that the goal is to improve the business, and they must hire those that can help them do so. They must do all they can to integrate data scientists into their teams and they must insist that data scientists contribute in every way possible — before, during, and after the technical work.” (HBR May 16th, 2019)

Another consideration is that, the existing social safety net was never designed to bear full responsibility for advancing our health, digital, and financial literacy and addressing the collective Commercial, Economic, and Social Drivers of Health™ (C, E, S, DoH™). That responsibility increasingly falls to state and local leaders, in partnership with trusted community stakeholders, to build something better. With the continued contraction of federal funding, the future of social service delivery is shifting; it is no longer inconceivable that Community-Based Organizations (CBOs) will become more fully integrated into the broader health and human services ecosystem, to help more effectively address Commercial, Economic, and Social Drivers of Health™ (C, E, S, DoH™). That’s partly why we developed Circular System Architecture™—a bold framework to design, develop, and deploy next-generation Civic

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**Engagement Strategies™** that align services, integrate funding, and activate community **T.R.U.S.T.™** at scale.

Remember, in **The Future of Business, Workforce, and Economic Development Infrastructure Leadership™** and the **Digital Epoch**, the better the inputs and processes, the better the outputs and outcomes. Because we are all free to make our choices but not free from the consequences of those choices. “Cognitive diversity is the gift that keeps on giving, because it harnesses the knowledge, skills, and abilities of the best of us to benefit the rest of us.” **(Krause, J 2025)** The rate-limiting aspect for AI will be human fallibility. Because humans are imperfect creatures. And without cognitive diversity to help capture the full scope of the human condition. The ability to unlock the full potential of emerging technology to augment the human experience will be mitigated, because no one person or small group of individuals knows everything about anything. In **The Future of Business, Workforce, and Economic Development Infrastructure Leadership™** technology, “can be” the great equalizer in this process, enabling predictive analytics derived from accurate, reliable, and valid data sources. When leveraged responsibly, it can support equitable, bridging the **digital divide**, **health disparities**, and **wealth gaps**. **CSA™** is the master framework that integrates:

- **Core Civic Cplaborative™**: To more cohesively connect civic leaders.
- **Closed Loop Learning Ecosystems™**: Education pipelines to support means testing.

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- **Closed Loop Referral Delivery Networks™**: Service provider networks for efficient and effective service delivery.
- **Concentric Circular Flywheel Feedback Loops™**: Fluid and flexible Feedback systems.

In an era of great-power rivalry, the ability to innovate is tied directly to national resilience and security itself. This new reality has made geopolitics a central factor in innovation, pushing companies and startups to weigh political and policy risk alongside technological opportunity. ([Murray, S, October 15th, 2025](#)) Civic ecosystems and business leaders that focus on **accountable business insights, decisions, and experiences** are better positioned to magnify, maximize, and maintain progress and optimize for sustainable outcomes. Which is crucial as there is significant focus on the current estimated opportunities in Climittech, the built infrastructure, and the Digital Landscape. But how do we quantitatively quantify that impact on the human experience? In healthy civic ecosystems, “service isn’t a slogan; it’s a standard.” Alignment, balance, and cohesion come from both individuals and groups that are empowered, encouraged, and enriched by exploring **Civic Engagement Strategies™** and activities. This requires **T.R.U.S.T.™**, which is essential in all healthy relationships to be successful. It starts with building emotionally and psychologically secure spaces to have **T.O.U.G.H.™ Conversations** when needed, with:

- Transparency by communicating candidly and directly.

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- Respect for the ability to agree to disagree if necessary, with common courtesy.
- Understanding people's perceptions is often their reality, which can help lead to a shared perspective.
- Support is the willingness to suspend our own values and beliefs to see another's perspective.
- Time, "T.R.U.S.T.™" can take a long time to build, but only seconds to ruin.

For instance as a high-level example, in healthcare, preventive screening is designed to help catch a predisposition to a chronic illness, to prevent people from getting mortally ill, or to create a comprehensive treatment plan. Additionally, reducing fraud, waste, and abuse for both healthcare and social service organizations is a way to extend capital resources, recapture lost revenue, and build a cost containment model while also improving care and outcomes. That can lead to an overall improvement in the health and well-being of a civic ecosystem and the individuals within it. This all starts and stops with capturing accurate, reliable, and valid data for meaningful use to support standards for opportunities to exercise ones **Civic D.U.T.Y™**:

- **D - Dedication:** To focus on self-improvement, familial well-being, and community betterment. This establishes a clear hierarchy of commitment.
- **U - Universal code of conduct:** Emphasizes shared behavioral standards for civic interactions, aiming for widespread adoption of **Philosophy | Principles | Priorities | Passion | Purpose | Progress**

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standards that individuals collectively accept and **A.B.I.D.E.™** to be guided by. This promotes **T.R.U.S.T.™** and predictability.

- **T - Time invested:** Highlights the importance of proactive engagement in building diverse relationships. This fosters understanding and collaboration across different perspectives.
- **Y - Yield:** Defines the desired outcome as "the cumulative results of the individual and the community efforts towards a more harmonized, resilient, and sustainable civic ecosystem."

All of which are required for building more **T.R.U.S.T.™** in institutions and leaders as a **Social C.L.A.S.S.™ Action Civic D.U.T.Y.™** In the “**Future of Business, Workforce, and Economic Development Infrastructure Leadership™**”. When individuals and leaders consistently **A.C.T.™**, with **accountability, clarity, and transparency**, that is where building more **T.R.U.S.T.™** starts. For improving our **health, digital, and financial literacy** levels that can help with all individuals and groups in doing our **Civic D.U.T.Y.™** by informing population-based decision-making for strategic investment based on the **Commercial, Economic, and Social Drivers of Health™** that drive and support business, commerce, and social aspects of broader **Civic Engagement Strategies™** of a given civic ecosystem. The **Social C.L.A.S.S.™ Action** ideology and **Civic D.U.T.Y.™** concept provides a **C.LE.A.R.™** philosophical and behavioral framework for individuals and groups within a civic ecosystem through aspects of **Circular System Architecture™**. Because we are all free to make our choices, but not free from the consequences of those choices. In **The Future of Business,**

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**Workforce, and Economic Development Infrastructure Leadership™** and the **Digital Epoch**, the better the inputs and processes, the better the outputs and outcomes. This concept grounds the broader systemic ideas in personal and collective responsibility.

"Technology is a tool." And like any other tool, the more skillful the craftsman, the better the outcomes. When we talk about AI, it could mean many things:

- Authentic Innovation
- Accountable Integrity
- Actionable Insights

The end of 2025, saw a demand and laser focus. From, “those who embrace data-driven diligence, evaluate deals with discipline, and build relationships in strategic sectors and regions, the forthcoming quarter offers historic opportunities. The private market’s return to consistency, paired with select surges in valuation and liquidity, means the angels willing to adapt will write the next chapter of success.” ([Keiretsu Forum, 2025](#)) Geographical perspectives on ethical AI development and use may vary. However, the ability to ensure safety and improve the overall human condition should be at the forefront of all policy makers and innovators decision making. Being future-ready starts by being future-focused. Knowing what you do well, now, to optimize, scale effectively to build resilience later.

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Saving time and money in business through “organic innovation” starts with a solid **U.S.E.-C.A.S.E.™**. What opportunities are you looking for and operationalizing, and optimizing for building, growing, and thriving in “**The Future of Business, Workforce, and Economic Development Infrastructure Leadership™?**” Do you have a clear use case for how you will utilize emerging technology? To start, ask yourself, “does this innovation serve a practical **U.S.E.-C.A.S.E.™**—one that proves both its utility and its capacity for lasting effectiveness?”

- **Utility, Strategy, Example.**
- **Capacity, Applicability, Solution, Effectiveness**

**Core Purpose:** To evaluate and implement organic innovation initiatives that save time and money by aligning practical utility with strategic intent and scalable effectiveness.

- **Utility** ⚙️ — Does it serve a real function or solve a genuine need?
- **Strategy** 📊 — Is it aligned with broader goals and vision?
- **Example** 💡 — Can it be demonstrated, replicated, or modeled?
- **Capacity** 🌱 — Do we have the people, systems, and resources to support it?
- **Applicability** 🔍 — Is it contextually relevant and adaptable?
- **Solution** 💬 — Does it address the root issue, not just the symptom?
- **Effectiveness** ✅ — Is it measurable, sustainable, and outcome-driven?

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Civic ecosystems that focus on **accountable business insights**, **decisions**, and **experiences** are better positioned to magnify, maximize, and maintain progress. By aligning engagement, performance, and resilience, they drive collective growth and sustain long-term prosperity in “**The Future of Business, Workforce, and Economic Development Infrastructure Leadership™**” through:

- **Value:** How organizations add value by saving time and money.
- **Utility:** Offering more comprehensive products and services.
- **Capacity:** Efficient and ethical economies of scale.
- **Accessibility:** Ability to meet the market, where the market is.

Because, an “**innovation is only as valuable as it is both accessible and usable.**”

### Epic & Oracle Market Expansion and Growth Arc

One example of this in healthcare and social services is “the EHR landscape by 2035 is poised for significant transformation, driven by cloud, AI, and interoperability. In this evolving market,” Epic currently serves 16 countries, while Oracle Health is focusing on international growth through cloud-based deployments. By 2035, Asia-Pacific and Latin America will be key growth regions due to rising healthcare digitization. Oracle’s **\$16 billion VA** contract provides a stable foundation for federal expansion, while Epic dominates academic medical centers. Oracle’s new ambulatory EHR targets primary care and pediatrics, with acute-care functionality expected by mid-2026. Its modularity appeals to small and mid-sized practices. Epic

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excels in large health systems and academic medical centers, with comprehensive specialty modules (e.g., oncology, cardiology). Oracle's **\$513 billion market cap** and massive R&D budget (likely exceeding Epic's annual revenue) enable long-term bets on AI and cloud infrastructure. Epic's private status limits its capital access despite steady revenue growth. Epic's implementations are costlier (**\$16 million** for a mid-sized hospital) and take 12-24 months. Oracle's cloud-based solutions offer faster deployment and lower upfront costs. By 2030, Oracle's cloud model will reduce TCO for most providers, while Epic's standardized approach may remain preferable for large systems with resources for customization. ([Reardon, T., September 2025](#))

Understand the “Platform Play”	Here’s how organizations can evaluate their long-term strategy:
<b>Interoperability is Non-Negotiable</b>	Data is King, garbage in/garbage out, triage, prioritize, and harmonize accurate, reliable, and valid data endpoints to help ensure accountability, efficacy, and safety.
<b>Evaluate Total Cost of Ownership (TCO)</b>	Resource allocation, technical feasibility, and realistic time frame expectations. That ensures business

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	continuity, reduces the risk of operational, legal, or reputational harm.
<b>Assess Your Own AI &amp; Innovation Strategy</b>	What are your current technical feasibilities and desired future state? Do you have a clear business use case to set a strategic roadmap?
<b>Right-size your solution</b>	Is it best to buy a solution, build one, or take a hybrid approach?
<b>Culture is a Feature</b>	Technology is a tool; the “humans in the loop” who design the inputs, deploy and manage the process, and are responsible for the outputs and outcomes are the most essential aspect to reduce risk and remediate harm.

To create **Synclarity™**, “the synergy within systems for sustainable success for more clarity, confidence, and control for whatever comes next.” We believe sustainable solutions drive long-term value and build **T.R.U.S.T.™**, resilience, and adaptability—key components in evolving

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markets. This mindset ensures businesses survive and thrive by consistently delivering meaningful value and capturing opportunities aligned with ethical practices. [Civic Engagement Strategies™](#), should be designed to help address [Commercial, Economic, and Social Drivers of Health™](#). This resource guide is a comprehensive list of resources related to healthcare, data exchange, and [Commercial, Economic, and Social Drivers of Health™](#). It includes links to websites and PDF documents from various organizations such as the [FDA](#), [CMS](#), [WHO](#), [HL7](#), and others. “[CMS](#) established a standalone code [G0136](#) (a HCPCS code) for the assessment of [C. E.](#) and [SDoH™](#). “SDoH can be categorized into broad groups: “economic stability, education access and quality, neighborhood and built environment, and social and community context, which include factors like what, food and nutrition access, and transportation needs” ([CodingIntel September 30th, 2025](#)) that are negatively impacting individuals in a certain ecosystem. To effort a response here, perhaps start with, these four basic requirements for technology standards development from the [HL7 \ Gravity Project](#) to support data capture for a straightforward to complex referral(s):

- Referral For Future Assessment.
- Self-referral.
- Capacity status
- Enrollment status

As an example, the [HL7](#) develops technology standards for four key activities related to [Commercial, Economic, and Social Drivers of Philosophy | Principles | Priorities | Passion | Purpose | Progress](#)  
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**Health™**; screening, diagnosis, goal setting, and interventions. The terms "Referral for Future Assessment," "Self-referral," "Capacity status," and "Enrollment status" are specific requirements or data elements within the broader framework of a "Closed-Loop Referral Delivery Network™," which can be a core use case for leveraging [Gravity Project](#) standards.

**1. Referral for Future Assessment:** This is a specific type of referral that falls under the interventions and goal setting activities. It refers to a plan to check back with a person at a later time to assess their social needs again. This is different from a standard referral for an immediate service. The technical standards, particularly its [HL7 \ FHIR Implementation Guide](#), are designed to capture and track these types of future-oriented plans, ensuring that a person doesn't fall through the cracks if their needs are not met immediately.

**2. Self-referral:** Is a mechanism where a person can directly request a service or assistance without a clinician's or social worker's intervention. Standards are built to support this, enabling interoperability for data exchange between a person, a healthcare system, and a social service organization. This is crucial for empowering individuals and bridging the gap between healthcare and social services. The standards provide a way to document a referral initiated by the individual, ensuring it is tracked and actioned within the system.

**3. Capacity status:** Refers to the availability of a specific social service or a **community-based organization** to take on new clients or referrals. For

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example, a food bank may be at maximum capacity for the week. **C, E, S, D oH™** standards help address this by defining data elements that allow for the exchange of this critical information. This helps prevent "referral failures" by ensuring that a referral is sent to an organization that actually has the capacity to help, thus making the referral process more efficient and effective.

**4. Enrollment Status:** Tracks whether a person has successfully enrolled in a program or received a service after a referral. This is a vital component of a closed-loop referral system, which is a primary focus of the Gravity Project's work. The standards ensure that the outcome of a referral is documented and shared. Instead of a referral disappearing into a black hole, the system can track if the person was accepted into the program, declined the service, or if the enrollment is pending. This is fundamental for measuring the effectiveness of interventions and for ensuring accountability.

### A "Zero-Trust Consolidated Consent Architecture™": For Commercial, Economic, and Social Determinants of Health™

For secure and effective data sharing, we suggest building with Zero-Trust Consolidated Consent Architecture™ to support **Consent Custody Circuitry™** for assessing and addressing Commercial, Economic, and Social Drivers of Health™; data sharing requires a system that verifies every access request and ensures data is only shared with explicit, granular

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consent. This model moves beyond the traditional "trust but verify" to a "never trust, always verify" approach, where all access to data, internal or external, is authenticated and authorized. This is crucial given the sensitive nature of some aspects of Commercial, Economic, and Social Drivers of Health™ data. Consider the following:

**1. Identity and Access Management (IAM):** The foundation of a zero-trust model is strong IAM. Each user and application, whether from a healthcare system or a social service provider, must have a unique digital identity.

- **Authentication:** Multi-factor authentication (MFA) is mandatory for all users accessing the system.
- **Authorization:** Access is granted based on the principle of least privilege. A user's role dictates what data they can see. For example, a social worker may see "enrollment status" but not a patient's full medical history.

**2. Consolidated Consent and Data Segmentation:** Consent is at the core of this architecture. Instead of multiple consents for different services, a single, consolidated consent form allows patients to grant or deny granular permissions.

- **Consent to Treat:** This is a fundamental healthcare consent that is separate from data sharing.

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- **Consent to Share Data:** This is the critical component for Commercial, Economic, and Social Drivers of Health™. It's a granular consent that specifies what data can be shared (e.g., housing status), who it can be shared with (e.g., specific social service agencies), and for how long. This consent is stored digitally and referenced with every API call.
- **Data Segmentation:** The architecture segments data based on its sensitivity and the granted consent. For example, the patient's Medical Health Record Number and Date of Birth are shared only when necessary for matching records, while highly sensitive information like Social Security Number is masked or tokenized.

**3. API-Led Data Exchange:** All data sharing occurs through APIs that enforce the zero-trust policies.

- **One-Way API (Send or Receive-Only):** This API is used by the healthcare system to initiate a referral to a social service organization. The API call includes patient demographics (Date of Birth, Sexual Orientation, Medical Health Record Number), the specific Commercial, Economic, and Social Drivers of Health™ need (Referral for Future Assessment or Self-referral flag), and the digital consent token.
- **Bidirectional API (Send and Receive):** This API is used to create a closed-loop referral system.

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- **Healthcare System → Social Service Org:** The system sends an updated referral and any new relevant information, all governed by digital consent.
- **Social Service Org → Healthcare System:** The organization sends updates on the referral. This includes the Enrollment Status (e.g., "enrolled," "declined"), which is critical for the closed loop. It also provides Capacity Status ("Taking Referrals: Yes/No") to the healthcare system. The healthcare system can use this to route future referrals to available providers.

**4. Continuous Verification:** Every data access request, regardless of its origin, is verified in real-time.

- **Authentication & Authorization:** Before any data is exchanged, the system verifies the identity of the requesting entity (person or application) and checks its authorization against the stored consent and role-based access controls.
- **API Security:** All API endpoints are secured with cryptographic protocols and are continuously monitored for suspicious activity.

This architecture is built on common **C, E, S, D oH™** standards of data aggregation as an example, allows for secure and ethical sharing of **Commercial, Economic, and Social Drivers of Health™** data, ensuring patient consent is respected while enabling effective care coordination.”  
(Google Gemini Septemtber 10th, 2025)

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## A Framework for Prioritization and Resource Allocation

Interoperability updates for health, human and social services are challenging due to the overwhelming volume of data, complex funding streams, and disparities in IT infrastructure. To address these challenges, organizations can use existing frameworks and standards to create a structured approach. The [CMS](#) value-based standards, [X12 reimbursement guidelines](#), [TEFCA](#), and the [21st Century Cures Act](#) provide the regulatory and technical context, while [HL7](#) can offer the specific standards and terminology needed to capture and share data on [Commercial, Economic, and Social Drivers of Health™](#). To overcome the described challenges and prioritize resource allocation, organizations should focus on a phased approach that leverages existing standards:

**1. Start with the "What" using [Gravity Project Taxonomy and Terminology](#):** This process can provide a standardized taxonomy and terminology for [C,E](#), and [S,DOH™](#). It's the "place to start" because it helps organizations decide exactly what [C,E](#), and [S,DOH™](#) data to collect (e.g., food insecurity, housing instability, transportation needs). By adopting these standards, organizations can ensure they're all speaking the same language. The uses and aligns its work with recognized codes, including [LOINC](#) for assessments (e.g., a screening for food insecurity) and [SNOMED CT](#) for clinical concepts (e.g., a patient reports housing instability).

**2. Define the "Why" with [CMS Value-Based Standards and the Cures Act](#):** [CMS](#) is increasingly tying reimbursement to value-based care models

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that emphasize patient outcomes, which are heavily influenced by [C.E. and S.DOH™](#). The [21st Century Cures Act](#) mandates data sharing and prevents "information blocking," creating a regulatory push for interoperability. These policies provide the motivation and regulatory framework for why organizations must improve their data sharing capabilities. They also highlight the financial incentives for addressing [C.E.](#) and [S.DOH™](#), which can help justify the initial investment in IT infrastructure.

**3. Connect the "How" with [HL7](#), [TEFCA](#), and [X12](#):** This is where the technical and operational pieces come together.

- [HL7](#) provides the technical standards, particularly [Fast Healthcare Interoperability Resources \(FHIR\)](#), which are modern, efficient standards for exchanging healthcare information. The technical standards are built on [HL7](#), [FHIR](#) implementation guides, making them a natural fit for building interoperable systems.
  - [TEFCA \(Trusted Exchange Framework and Common Agreement\)](#) provides a national "rules of the road" for health information networks to securely and efficiently exchange data. It's the broader legal and technical framework that allows different organizations to trust each other with data, regardless of their IT systems.
  - [X12](#) and [HCPCS](#) are key for reimbursement. Once [C.E. and S.DOH™](#) data is captured using [LOINC](#) and [SNOMED CT](#), it can be linked to [ICD-10 Z-codes](#) for diagnosis and reporting.
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and then to [HCPCS codes](#) (like G0136 for an [C,E, and S,DOH™](#) risk assessment) for billing. The [X12](#) standards, which govern electronic data interchange for claims, help ensure that organizations get reimbursed for the services they provide. This closes the loop by making the [C,E, and S,DOH™](#)-related care financially sustainable.

### The Foundational Principles of Data

The business benefits of artificial intelligence — like enhanced customer experience, greater efficiency, and better risk management — are now part of many digital strategies. But when it comes to securing AI systems, many organizations are still playing catch-up. The key to effective data utilization, especially to train AI\ML or another emerging technology with a human-centered approach, starts with having data that is:

Aspect	Purpose
Identifiable	The origin of the source is trusted and known.
Accurate	Paint a clear picture of what you want to measure.

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<b>Reliable</b>	It comes from verifiable, trusted sources.
<b>Valid</b>	“Garbage in means garbage out.”
<b>Secure</b>	How do you protect your data, your partners, and your clients' data?

In **Circular System Architecture™**, **Data Operations Loops™** work on the principle of **Data Lineage Circularity™**. Think of this as a "roundabout" of information flow that potentially has multiple “on \ off”-ramps with 'trust but verify' check points with **Zero Trust Consolidated Consent Architecture™**. These five principles—**Identifiable**, **Accurate**, **Reliable**, **Valid**, and **Secure**—are critical for any data-driven effort, especially when the outcomes have a direct impact on people.

- **Identifiable:** This principle goes beyond just knowing the source; it emphasizes trust in that source. For AI/ML, this is crucial for preventing the use of data from unreliable or malicious origins that could introduce systemic biases or errors.

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- **Accurate:** Data must represent reality clearly and without distortion. If the data used to train a model is inaccurate, the model will learn and replicate those inaccuracies, leading to faulty decisions.
- **Reliable:** This principle addresses the consistency of the data source over time. A reliable source can be depended on to provide consistent, verifiable data, which is essential for ongoing model training and maintenance.
- **Valid:** The "garbage in, garbage out" (GIGO) concept is a cornerstone of this principle. It means that even if data is identifiable and reliable, it must be relevant and properly formatted to be useful. Invalid data can corrupt a model's learning process.
- **Secure:** This is a non-negotiable principle that protects not only the data but also the individuals and organizations it represents. Data security is paramount for maintaining privacy and preventing data breaches. It builds the foundation of trust with partners and clients.

### Circular System Architecture™, Data Operations Loops™ & Data Lineage Circularity™: Intelligent Transparent Transactional Trust Protocols™

We believe this presents a novel and sophisticated approach to data management.

- **Circular System Architecture™:** This concept moves away from the traditional, linear data flow where data is collected, used, and then discarded. Instead, it proposes a closed-loop system where data, after  
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being processed, can be ethically and securely reused and enriched. This mirrors the circular economy's approach to physical resources, applying it to the digital realm.

- **Data Operations Loops™**: These are the practical mechanisms within a **Circular Sytstem Architecture™** workflow. They represent the "roundabouts of information flow" where data is constantly being collected, processed, and reintroduced into the system. This continuous flow allows for constant learning and improvement of AI models and other technologies. This is the most forward-looking component, tying all the other elements together. It proposes a new standard for data exchange and trust.
- **Data Lineage Circularity™**: This concept ensures that every piece of data has a complete and traceable history, or "lineage." In a circular system, this lineage is not a straight line but a looping path, allowing a user to trace data back through every transformation and use, no matter how many times it has been "recycled." This is vital for maintaining accountability and transparency.
- **"Trust but Verify" Checkpoints**: This phrase, common in security and diplomacy, is applied here to the data flow itself. It means that while a partner's data may be provisionally trusted, it must be continuously verified at multiple checkpoints along the loop.
- **Zero-Trust Consolidated Consent Architecture™**: This is a highly secure model where no user, device, or data exchange is implicitly trusted, even if it's within the established network. Instead, every

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access request must be verified. This is a powerful countermeasure against internal and external threats.

- **Multi-factor Authentication (MFA) Processes:** These are the technical mechanisms that enforce the “**zero-trust principle**.” They require multiple forms of verification, such as a password and a fingerprint, ensuring that only authorized entities can access or exchange data.
- **Intelligent Transparent Transactional Trust Protocols™:** This is the overarching framework.

It suggests a future where data exchanges between partners and intermediaries are governed by smart, automated protocols that can:

1. **Be Intelligent:** The protocols use AI to dynamically assess risk and manage access based on real-time data.
2. **Be Transparent:** All parties can see and audit the data's lineage and the protocols governing its use.
3. **Enable more T.R.U.S.T.™:** The system, not just human actors, is engineered to ensure data integrity and security at every step.

In essence, the **CSA™** framework describes a paradigm shift from simple data management to an interconnected, self-governing data ecosystem. It's a vision for a future where technology is developed on a foundation of ethical, secure, and traceable data, ensuring that as AI becomes more powerful, it remains accountable and aligned with human values. That can be guided by and supported by.

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## A 10-Point Framework

### AI Security is Not a Feature—It's a Foundation

This signals that ethical and secure AI isn't something to add after deployment—it's something to design into the system from the start. That mirrors how [CSA™](#) treats interoperability, data consent, and care coordination.

### Each Question = Strategic Leverage Point

This list serves multiple purposes:

- Diagnostic Tool for organizations assessing AI readiness.
- Planning Framework for AI integration into workflows.
- Governance Benchmark for boards, CIOs, or innovation councils.
- Funding Justification (e.g., aligning AI ethics/security with grant compliance or procurement standards).

Each question below is aimed at surfacing vulnerabilities, identifying trade-offs, and ensuring that AI security is woven into strategy — not bolted on after deployment.

AI Governance Domain	Guiding Question
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<b>1. Strategic Alignment</b>	How can AI initiatives be aligned with our organizational objectives, budget, values, and ethics?
<b>2. Risk Management</b>	What methodologies can we use to identify, assess, and prioritize AI-specific risks?
<b>3. Controls &amp; Tools</b>	What controls and tools will we implement to mitigate the identified AI risks?
<b>4. Policy &amp; Standards</b>	What policies and procedures will we put in place to ensure data quality, privacy, ethics, and cybersecurity?
<b>5. Governance Structure</b>	What governance structure will oversee AI project development, deployment, security, and operations?
<b>6. Technical Feasibility</b>	Is the proposed AI architecture compatible with our existing infrastructure?

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<b>7. Resource Allocation</b>	What level of security effort is required, and how will we allocate resources?
<b>8. Monitoring &amp; Metrics</b>	What metrics will we use to track AI effectiveness and security?
<b>9. Continuous Improvement</b>	What mechanisms will support ongoing monitoring and adaptation of our AI practices?
<b>10. Stakeholder Engagement</b>	How will we communicate the importance of AI security, privacy, and ethics to foster shared responsibility?

As civic ecosystems and organizations “race to embed AI across their operations, the mandate is clear. Design secure systems from the start or risk embedding vulnerabilities that will erode trust later. The framework doesn’t eliminate all AI risk, Pearlson said, but it does provide a practical foundation that will prompt better questions, clearer decisions, and more resilient designs from the top down.” ([Burnham, K, July 22nd, 2025](#))

Regarding interoperability and data sharing for healthcare and human services organizations, the [Pareto Principle](#) might be a good place to start. Applying the [80/20 rule](#) to healthcare and human-services interoperability

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can help focus scarce resources on the data that unlocks the most significant value. Here's one way to fold the [Pareto Principle](#) into your process.

### Data Triage, Civic Prioritization & Outcomes Harmonization” Framework

1. **Define high-value use cases:** List the top 5–10 interoperability goals (e.g., emergency care coordination, chronic-disease management, social-services referral). These are the “80 percent” outcomes you want to achieve.
2. **Inventory all data domains:** Catalog every data element supporting those use cases—patient demographics, medication lists, problem lists, allergies, lab results, care plans, social-determinants screenings, etc.
3. **Map impact vs. effort Score each domain on:**
  - **Impact:** How much does a standardized exchange of this data move the needle on your target use cases?
  - **Effort:** Technical complexity, policy/legal hurdles, and stakeholder buy-in required.
4. **Isolate the vital 20 percent:** Identify the ~20 percent of data domains that:
  - Cover the majority of your high-value use cases.
  - Can be implemented with reasonable effort.
5. For many systems, simple demographic + clinical summary + medication/allergy lists “may” often unlock 60–80 percent of the value.

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6. **Pilot & iterate:** Build a focused pilot around those critical domains (the “vital few”). Use the lessons learned to gradually onboard the next slice of data (the “useful many”) until you’ve extended coverage over the broader “trivial many” domains.
7. **Overlay civic prioritization:** In parallel, weight each data domain by community need or equity impact. For instance, if your region struggles most with uncontrolled diabetes in underserved populations, prioritize lab results and care plan exchange for that cohort, even if those domains rank slightly lower on pure technical impact.

**\*Example Prioritization Matrix: Composite Rank could be a weighted sum like:**  $\text{Rank} = (\text{Impact} \times 0.4) + ((6 - \text{Effort}) \times 0.3) + (\text{Civic Weight} \times 0.3)$

Data Domain	Impact Score (1–5)	Effort Score (1–5)	Civic Weight (1–5)	Composite Rank
Patient Demographics	5	2	5	1
Problem List	5	3	4	2
Medications & Allergies	4	2	4	3
Care Summary (CCDA/ <u>HL7</u> )	4	4	3	5
Lab Results	3	4	5	4

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C,E, and S,DOH™	2	3	5	6
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### Potential Next Steps:

- Workshop with stakeholders to validate impact/effort scores.
- Set up a lightweight pilot exchanging just the top 2–3 domains.
- Measure ROI (reduction in duplicated tests, faster care transitions).
- Scale out to the next tranche of data domains based on real-world learnings.

### Data Triage, Civic Prioritization & Outcomes Harmonization: Infrastructure Strategy for the Age of Emerging Tech

We are at a pivotal moment where the volume of generated data has surpassed traditional infrastructure's capacity to support meaningful use. This truth is simple but rarely spoken. Fiber optic networks alone cannot carry the data demands of **Applied AI (Conversational, Generative, and Predictive)** powered **LLMs** and next-gen **Industrial Machine Learning technologies. Cybersecurity** and **Data Governance**. This isn't just a tech issue—it's a leadership one.

### Key Imperatives:

- **Data Triage is Now Essential:** Not all data is equal. Leaders must determine what is essential for meaningful civic and business use.

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- **Infrastructure Must Be Purpose-Built:** Mainframe/hardware storage for high-integrity, mission-critical assets—financial systems, intellectual property, and regulatory data—cloud-based systems for high-volume, lower-risk content—marketing, communications, training.
- **Businesses and Cities Must Know Themselves:** Civic IT ecosystems must align to actual usage patterns and needs. This demands force-ranking data types based on impact, security, and operational necessity—not status quo assumptions.

Individual and population [health](#), [digital](#), and [financial literacy](#) are underlying tenets of [Circular System Architecture](#)™, based on the larger aspects of [Commercial, Economic, and Social Drivers of Health](#)™ of the larger ecosystem. Some buckets of data for [Civic Engagement Strategies](#)™ will overlap, and many of these topics may fall into each bucket, but not all. This comes down to ethically and efficiently sharing data for shared populations and the ability to consent to sharing data, for treating, and serving an individual's needs at the community level. [TEFCA](#) and [Data Exchange Framework](#) can support developing risk mitigation and response stratification strategies, infrastructure needs, and long-term sustainability for capital resources, raw materials, and human talent capital allocation, deployment, and engagement. In relation to an ecosystem's technology interoperability infrastructure for sharing data. Standardized taxonomy and terminology can help create and speed up the creation and implementation of [Concentric Circle Flywheel Feedback Loops](#)™. [Circular Systems](#)

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Architecture (CSA™) and “The Future of Business, Workforce Economic Development Infrastructure Leadership™.” Is about improving these literacies empowering more individuals and ensuring communities can effectively leverage technology infrastructure for data sharing, risk mitigation, and sustainable development to improve our overall health, well-being, and quality of life.

This empowers effective Civic Engagement Strategies™ that operate across overlapping buckets of data, requiring standardized taxonomy and terminology to enhance interoperability. Establishing clear, shared definitions accelerates development of Concentric Circular Flywheel Feedback Loops (CCFFL™) reducing friction in decision-making, resource deployment, and long-term planning.

### Analytical Considerations

- **Data Standardization and Interoperability:** Ensuring consistency in data formats and interoperability across platforms to enable seamless sharing and analysis. Use analytics to identify gaps in service delivery and highlight areas for cost optimization.
- **Population Health Management:** Leverage shared data to track and predict trends in patient outcomes. Focus on addressing Commercial, Economic, and Social Drivers of Health™ for comprehensive care.

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## Clinical Considerations

- **Improved Care Coordination:** Enable better communication between providers (hospitals, ACOs, MCOs, CBOs) to avoid redundant tests and procedures. Support transitions of care through real-time data exchange.
- **Patient-Centered Care:** Utilize shared data to tailor treatment plans and interventions. Increase emphasis on preventative care through predictive analytics.

## Financial Considerations:

- **Cost Savings on Administrative Work:** Automate repetitive processes, such as billing and reporting, to reduce overhead. Minimize errors in claims processing through accurate and real-time data.
- **Value-Based Reimbursement Models:** Use shared data to demonstrate improved patient outcomes and qualify for performance-based incentives. Reduce unnecessary readmissions and emergency visits, directly lowering costs.

## Technical Considerations:

- **Secure Data Sharing Platforms:** Implement robust cybersecurity measures to protect sensitive patient information and maintain HIPAA compliance. Use cloud-based systems to enhance scalability and accessibility.

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- **Integration of Emerging Technologies:** Leverage AI and machine learning for predictive insights. Adopt blockchain for secure and transparent data transactions.

### Strategic Benefits for ACOs, MCOs, CBOs:

1. **Increased Service:** Capacity, delivery and reach at reduced costs.
2. **Efficient Data Sharing:** Helps serve more people with the same or fewer resources.
3. **Direct Resources:** More effectively toward patient care rather than administrative burdens.
4. **Enhanced Bottom-Line Revenue:** Streamlined operations reduce overhead while improving patient satisfaction and outcomes, leading to higher reimbursements and long-term savings.

By strategically addressing these considerations, healthcare, human and social service organizations can achieve better outcomes, strengthen care delivery, and enhance financial sustainability.

### Recalibrating Federal Funding for Health and Human Services (HHS)

As one example, “CMS has released three final payment rules with various updates for inpatient rehabilitation facilities, hospices and inpatient psychiatric facilities for fiscal year 2026.” (Condon, A. August 5th, 2025)

Circular System Architecture™ = **Common-Sense Interoperability** +

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**Future-Ready Design.** Leveraging this methodology can help improve interoperability for social care models of [Health and Human Service Innovation™](#). Allows organizations to implement [Circular System Architecture™](#) [Data Lineage Circularity Operations Loop™](#) to help support social care interoperability and [Health and Human Service Innovation™](#), including [USCDI \(United States Core Data for Interoperability\)](#), helps reinforce the methodology's regulatory and structural alignment. [Circular System Architecture \(CSA™\)](#) is a systems methodology that equips organizations with the tools, standards, and decision logic to improve service delivery, drive interoperability, and prepare for evolving social care and public health regulatory landscapes. At the core of [CSA™](#) and established [Data Lineage Circularity](#) and [Data Operations Loop™](#)—are feedback-enabled, metadata-driven frameworks for tracking whether services are delivered efficiently and effectively and how and why outcomes occur across multiple systems, stakeholders, and referrals. Looking forward:

### [CMS finalizes 2.6% pay bump for hospitals in 2026: 8 things to know - Becker's Hospital Review | Healthcare News & Analysis](#)

- Medicare Promoting Interoperability Program changes. Key changes finalized include:
- [EHR](#) reporting period for 2026 and beyond must span at least 180 continuous days.

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- Hospitals must complete annual security risk management and Safer Guides self-assessments.
- A new optional [Trusted Exchange Framework and Common Agreement-](#) based public health data exchange bonus measure is available.
- [CMS](#) is seeking feedback on shifting certain measures to performance-based scoring and improving information sharing across systems.

### Standards-Based Interoperability for Social Care

To help address aspects of individual and population [health](#), [digital](#), and [financial literacy](#) and [C, E, S](#), and [DoH™](#). [CSA™](#) partly considers leveraging foundational healthcare and social care interoperability standards to ensure seamless data exchange, consistent terminology, and actionable insights at every level of service:

- [USCDI \(United States Core Data for Interoperability\)](#): Integrates core [Commercial, Economic, and Social Determinants of Health™](#), clinical, and demographic elements to support consistent data sharing across providers, [ACOs](#), [MCOs](#), and [CBOs](#), and government entities.
- [HL7: FHIR Protocols](#): These protocols enable structured, scalable APIs for data exchange across [EHRs](#), [ACOs](#), [MCOs](#), and [CBOs](#) infrastructures, and payer systems.

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- **Gravity Project Taxonomy & Terminology**: Supplies domain-specific vocabularies and codes for social risk factors, enabling semantic alignment in assessments and referrals.
- **LOINC, ICD-10, HCPCS codes, and SNOMED CT Codes**: Support structured clinical documentation, outcome mapping, and longitudinal tracking of care pathways.

### Interoperable Tool Development Workflow: For Coordinated Health & Social Care Referrals

**Zero Trust Consolidated Consent Architecture**™ provides a scalable, structured approach for **Referral Chaining**” between **ACOs**, **MCOs**, and **CBO**:

- **Authentication**: Secure identification and asset management of the individual throughout the continuum of care and services.
- **Authorization**: Capturing and enforcing consent to receive services, treat conditions, and share information with referral partners.
- **Informed Consent**: Enabling individuals to control what data is shared, with whom, and for what purpose—in language they understand.

### ⚙️ MINIMUM TECHNICAL SPECIFICATIONS (Behind the Scenes)

Below is a “**Layman’s Workflow**” for someone developing an interoperable tool for health and human services organizations and social service referral partners, designed to support care delivery, data exchange,

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and reimbursement alignment with [CMS Managed Care](#). This simplifies technical language while still including the key specs of [Zero Trust Consolidated Consent Architecture™](#), [FHIR](#), clinical/claims/outcomes data, etc.) and is structured in a step-by-step workflow for developers, program managers, or operational leads. A [CSA™](#)-aligned mechanism for aligning clinical workflows, reimbursement, and service outcomes to better address [C, E, S](#), and [DoH™](#).

### What's Needed

Layer	Solution	Standards
Authentication	A user logs in once via <a href="#">Identity Providers (IdPs)</a> .	<a href="#">NIST Special Publication 800-63B</a>
Identity Proofing	Ensure trusted identity at the point of service.	<a href="#">NIST Special Publication 800-63B</a>
Federation	Use of a shared trust framework across orgs.	<a href="#">NIST Special Publication 800-63B</a>
Consent Management	Consent artifact created & reused across referrals.	<a href="#">Consent - FHIR v6.0.0-ballot2</a> , <a href="#">DS4P</a> , and/or <a href="#">OAuth2 w/ claims</a> .

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<b>Authorization</b>	Use role- or attribute-based access control ( <a href="#">RBAC vs. ABAC: Definitions &amp; When to Use   Okta</a> ).	<a href="#">A Complete Guide to XACML and How It Helps You Protect Your Data, SMART on FHIR, OAuth 2.0 Scopes</a>
<b>Auditability</b>	Log who accessed what, when, and why.	<a href="#">Fact Sheet 42 CFR Part 2 Final Rule   HHS.gov</a>

### Recommended Architecture Stack

Component	Tools/Frameworks
<a href="#">Identity Providers (IdPs)</a>	<a href="#">Demystifying Digital Identity Terminology: CSP vs IDP » DirectTrust, Azure AD, Okta</a> with <a href="#">SP 800-128, Guide for Security-Focused Configuration Management of Information Systems   CSRC</a> .
<b>Consent Manager</b>	<a href="#">Implementing APIs &amp; FHIR Technology</a> , custom UI/UX for signing/renewing/revoking.
<b>Authorization Layer</b>	<a href="#">OAuth 2.0 Scopes</a> + <a href="#">SMART on FHIR</a> or <a href="#">A Complete Guide to XACML and How It Helps You Protect Your Data</a> policy engine.

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<b>Audit Logs</b>	Immutable, timestamped logs for consent + access tracking.
<b>Interoperability Layer</b>	<a href="#">FHIR API Gateway</a> , <a href="#">IHE profiles</a> , <a href="#">What Is Direct Secure Messaging &amp; HISP</a> .

 **Starting Point:** Admission, Transfer, and Discharge (ATD)

### Concentric Circular Flywheel Feedback Loop™

Stage	<u>CSA™</u> -Integrated Focus	Key Levers
<b>Admission</b>	Universal Consent + Unified Intake	Consent to Treat + Share Data; Eligibility Screening for Social Services.
<b>Transfer</b>	Fluid Intra- and Inter-Agency Handoffs	Standardized Data Exchange ( <a href="#">FHIR</a> , <a href="#">TEFCA</a> ); Interoperability Across <a href="#">EHRs</a> & <a href="#">CBOs</a> .

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Discharge	Measurement + Documentation of Outcomes	<u>ICD-10-CM, HCPCS/CPT, LOINC,</u> <u>SNOMED CT Codes, V &amp; Z-Codes;</u> Claims Reconciliation
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**Core Objective:** Build a system that connects hospitals, clinics, and social service agencies to share patient data securely, match needs to available services, and track care from intake to outcomes — all while complying with CMS Managed Care reimbursement standards.

- Zero Trust Consolidated Consent Architecture™: Enables patients to consent once to treatment and data-sharing across all relevant touchpoints (admission, transfer, discharge).
- HL7 FHIR Standards: API protocols for secure, fast, and standardized data exchange.
- **Common Data Language:** Uses C, E, S, DOH™ Taxonomy + Terminology medical codes (ICD-10-CM, CPT, LOINC, SNOMED, CT, Codes, V & Z-Codes) for documenting social needs (like housing, food, income) in ways payers and providers understand.

### API Design:

- **One-Way API:** (External Referrals): e.g., **Hospital** → Community-Based Organization (CBO).
- **Bi-Directional API:** (Internal Transfers): e.g., **9**, or Recovery ↔ Rehabilitation Unit.

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## 6-Step Layman's Interoperable Workflow

### Consolidated Conset Architecture™

**Step 1: Intake:** “Who is the person and what’s their basic info?”

- **Collect demographic info:** age, gender, DOB, height, weight.
- **Insurance details:** Managed Care Organization (MCO) or alternative payment info.
- Confirm identity & eligibility using standardized FHIR intake fields.

#### System Tasks:

- Verify MCO status in real-time.
- Capture patient consent for treatment and data-sharing.

**Step 2: Assessment:** “What do they need help with?”

- Initial review of presenting symptoms, complaints, or social needs.
- Match the issue to the appropriate internal department or partner agency.

#### System Tasks:

- Match intake data to service categories using **C, E, S, D OH™ Data** /ICD-10-CM Trigger workflow pathways (medical, behavioral, social).

**Step 3: Transfer:** “Who is best equipped to help them right now?”

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- The patient is routed internally (e.g., from **ER** to **ICU**), or externally (e.g., from hospital to food pantry or shelter).
- Based on real-time availability and capacity to serve.

### System Tasks:

- Use [API](#) to send referral + consent data to internal or external partners.
- Log status updates and communication.

**Step 4: Screening:** “Let’s run the right tests to understand the situation fully.”

- Screenings, diagnostics, lab work, or social needs assessments conducted.
- Could be physical health (labs), behavioral (mental health screenings), or economic (food insecurity).

### System Tasks:

- Record test results using [LOINC](#), [SNOMED](#) codes.
- Update status across systems using [FHIR APIs](#).

**Step 5: Evaluation:** “What’s working and what’s next?”

- Review results and interventions.
- Develop a discharge plan, which may include follow-up or external referrals.

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### System Tasks:

- Capture outcomes data to evaluate treatment effectiveness.
- Create structured discharge notes and refer via [Closed-Loop Referral Delivery Networks™](#).
- Log future appointments, medications, or ongoing social services.

**Step 6: Follow-Up + Outcomes:** Did they get what they needed? Did it help?”

- Follow-up on services delivered by referral partners
- Record outcomes to support quality measures and [CMS](#) reimbursement.

### System Tasks:

- Use [C, E, S, DOH™ Taxonomy](#) and [Terminology](#), and [V & Z-Codes](#) to document social interventions.
- Share data back with the payer/provider for reporting and audits.
- Payer-to-Payer or Provider-to-Provider API transfers if an individual moves plans.

**Consent & Data Flow:** The [Consolidated Consent Architecture™](#) supports secure data flow at each stage:

- Consent to treat.
- Consent to share data with referral partners.
- Consent to allow system-to-system communications.

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**Common Use Case:** (ER ↔ ICU, Hospital ↔ CBO, Payer ↔ Payer)

Hospital ER refers patient with food insecurity to local CBO:

- Patient consents at intake.
- The hospital system sends a one-way API to CBO.
- CBO receives referral, confirms service.
- Updates logged back to hospital via Closed-Loop Referral Delivery Network™ system.
- Outcome data supports Managed Care billing.

**“Consent first. API second. Outcome always.”**

- Prior Authorizations via FHIR-based payer workflows.
- Patient Access Portals (per CMS Interoperability Rule).
- Provider Access Portals (to coordinate across settings).
- Payer-to-Payer Access (when patients switch insurance plans).

### Designing Your Zero Trust Consolidated Consent Architecture™

Here's how to bring it all together:

Component	What to Implement
Identity Proofing	Issue credentials meeting <u>Identity Proofing Requirements</u> : NIST <u>IAL2/3</u>

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<b>Strong Authentication</b>	Enforce <a href="#">MFA at AAL2</a> or stronger ( <a href="#">AAL3</a> with hardware tokens)
<b>Strong Authentication</b>	Enforce <a href="#">MFA at AAL2</a> or stronger ( <a href="#">AAL3</a> with hardware tokens).
<b>Federated SSO / Consent</b>	Use <a href="#">OIDC</a> or <a href="#">SAML</a> with embedded consent prompts; support attribute-sharing agreements.
<b>Trust Framework</b>	Accrediting <a href="#">Demystifying Digital Identity Terminology: CSP vs IDP » DirectTrust</a> under the <a href="#">DirectTrust</a> identity trust model.
<b>Consent Lifecycle</b>	Enable runtime consent at login, remember user decisions, and support revocation
<b>Continuous Validation</b>	Optionally apply Zero-Trust practices such as continuous authZ based on context changes ( <a href="#">DirectTrust Accreditation, idmanagement.gov</a> )

**Summary for Builders:** You're not just building software. You're creating a bridge between people and the care they need, while capturing all the right data points for funding, reporting, and outcomes.



### Decision Tree & Triage Logic for Real-Time Capacity Monitoring

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In partnership with best-practice models from organizations like [211](#), [EPIC](#), and [United Way](#), [CSA™](#) enables advanced triage and prioritization logic. This includes not just referral tracking, but service capacity modeling, outcome attribution, and closed-loop analytics.

### Some Basic Referral and Service Status Tags for capturing C, E, S, DOH™:

- Client No Longer Interested
- Ineligible / Documentation Issues
- Funding Limitations
- Referred to Other Agency / Program
- No Show / Unable to Contact
- Referral Expired / Not Accepted
- Waiting for Appointment / Callback
- Service Not Accepting New Clients
- Waitlist Too Long
- Client Refused Services
- Other / Unknown

### Compliance-Ready, Future-Proof Infrastructure

- [CSA™](#) aligns with major regulatory and interoperability frameworks.
- [CMS](#) Interoperability Rules.
- [TEFCA \(Trusted Exchange Framework and Common Agreement\)](#).
- State and Local [HHS](#) Reporting Requirements.
- [ONC-Certified Technology Requirements](#) (via [USCDI](#)).

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By incorporating these standards, [Closed Loop Referral Delivery Networks™](#) gain the capacity to:

- Coordinate across public/private stakeholders.
- Optimize shared resources and reduce friction.
- Improve data quality, equity insights, and compliance readiness.
- Build intelligent infrastructure that adapts to regulatory, social, and economic shifts.

Capacity building for capturing metrics tied to [Commercial, Economic, and Social Drivers of Health™ \(C.E.S. and DoH™\)](#) requires intentional design and coordination across system layers. This effort can be deployed through closed, open, or hybrid referral networks, contingent on:

- Shared population focus.
- Interoperable IT infrastructure.
- Sustainable and braided funding streams.

The [Core Civic Collaborative™](#) within the [Circular System Architecture \(CSA™\)](#) framework offers strategic support to help ecosystems evaluate and determine the most appropriate network model. This determination is based on alignment with:

- Local, state, and federal policy priorities.
- [21st Century Cures Act](#) provisions.
- [TEFCA \(Trusted Exchange Framework and Common Agreement\)](#) Guidelines.

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Through a [CSA™](#) lens, this approach ensures that the ‘T’ in [Talent, Tools, & Time: 2025](#) are aligned and harmonized—driving measurable impact, cross-sector accountability, and future-ready governance for health and well-being. [Closed Loop Referral Delivery Networks™](#) in a [Circular System Architecture \(CSA™\)](#) context within the [CSA Methodology™](#), [Closed Loop Referral Delivery Networks \(CLRDNs™\)](#) can be strategically designed as hybrid models—flexible by design yet precise in execution. This hybrid configuration allows partner organizations to expand or contract participation dynamically, based on real-time fit-for-purpose alignment criteria, such as:

- Capacity to intake referrals (e.g., staffing, technology, case volume thresholds).
- Capacity to deliver high-quality services (e.g., licensure, cultural competency, outcome metrics).
- Capacity for interoperability and meaningful data exchange (e.g., adherence to [HL7](#), [FHIR](#), [TEFCA](#) compliance).

### ⚙️ [Dynamic Entry and Exit Based on Criteria: CSA™](#) Operational Definition of Capacity

Applying [CSA™](#) to [California Data Exchange Framework](#). The point of entry or removal from the network is not static, but contingent on alignment with these core operational capacities. This ensures the network maintains integrity, agility, and accountability without compromising

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service delivery or population outcomes. Once the referral assessment and decision protocols have been evaluated and enacted, the circuit becomes “closed”—indicating that the network has sufficient capacity, integration, and trust to function as a coordinated care loop. However, it remains hybrid in structure to allow for continuous recalibration, particularly in response to:

- Funding shifts.
- Policy changes.
- Population needs.
- Performance thresholds.

### Real-World Analogy

An instructive parallel is Managed Care Open Enrollment in healthcare systems. Individuals may select from multiple providers during the open period, but once enrolled, care is coordinated within that selected network. Similarly, the hybrid CLRDNs™ model allows for structured openness at specific decision points, while maintaining a closed loop for delivery execution. Building interoperable infrastructure to serve Commercial, Economic, and Social Drivers of Health™. Framed through the lens of CSA™ using an example of the Data Exchange Framework, capacity is not just about throughput—it’s about coordination, visibility, and timely information flow between data custodians, care coordinators, and service delivery entities.

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**Capacity** = The ability of a system to intake, service, and report outcomes.

Phase	Data Function	Infrastructure Relevance
<b>Intake &amp; Admit</b>	Patient Intake	Identifies who is being served and where.
<b>Transfer</b>	Clinical Needs & Services	Details what services are delivered, and why.
<b>Remuneration</b>	Claims & Payment Processing	Reveals how services are paid, by whom.
<b>Discharge</b>	Outcomes & End Results	Shows impact, disparities, and future needs.

Each phase represents a **N.O.D.E.™** in a longitudinal feedback loop, where each data pool informs:

- Service prioritization.
- Resource allocation.

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- Cross-sector alignment (health, education, workforce).

This is where the Concentric Circular Flywheel Feedback Loops™ play a role. Data flows continuously and is circular, not linear. Linear silos of data create bottlenecks. However since most data currently sits in silos. The Circular Flywheel Feedback Loops™ begin with the most crucial data sets, which feed into larger ones based on the need for meaningful use. The flywheel is configured like a corkscrew. Think of them as gears on a bicycle, and the data is the chain, if we were using health, digital, and financial literacy as an example. The data used by any specific civic ecosystem will vary. For instance, California, Texas, and New York would have much larger pools of data.

The individual “corkscrews” Concentric Circular Flywheel Feedback Loops™ would then overlap, creating a more traditional flywheel. Imagine the primary Circular System Architecture™ initiative at the center with Core Civic Collaborative™, Closed Loop Learning Ecosystems™, Closed Loop Referral Delivery Networks™ feeding data for meaningful use to support assessing Commercial, Economic, and Social Drivers of Health™ around “The Business, Workforce, and Economic Development Infrastructure Leadership™” and the needs of any given civic ecosystem. We believe this is a strong conceptual foundation, rich with metaphor and policy-relevant structure. That enhances clarity, flow, and precision while preserving some unique terminology and systems thinking. It also evaluates the logical coherence of a value based care model and builds a bridge between metaphor and operational execution.

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The role of Concentric Circular Flywheel Feedback Loops™ in Circular System Architecture™ is meaningful use of data sharing. In the Circular System Architecture (CSA™) Lexicon Methodology, Concentric Circular Flywheel Feedback Loops (CCFFLs™) are essential for transforming how data is captured, shared, and used to drive actionable outcomes. Unlike linear data systems, which often create silos and bottlenecks, CCFFLs™ are designed to enable continuous, multidirectional, and adaptive data flow.

### CSA: Data Lineage Circularity™: Formation of the Primary Circular Flywheel and Regional Differentiation and Scalability

Moving from silos to circular feedback loop systems; given that most current systems operate in static, siloed architectures, the CSA: CCFEL™ Methodology begins by targeting large, foundational datasets—those with broad civic, commercial, or policy relevance. These large datasets are then decomposed, contextualized, and distributed to smaller systems, ensuring that data is used only where it serves meaningful use and fit-for-purpose criteria. This flow is not flat or cyclical in the traditional sense—it functions more like a corkscrew, with interlocking feedback spirals that build momentum over time. If we analogize this to a bicycle:

- The gears represent the nested systems of care, governance, and service delivery.
- The chain is the data, moving fluidly across multiple points of contact.

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- Real-time performance insights, community needs, and regulatory demands generate pedal force.

Large civic ecosystems like California, Texas, or New York will naturally generate greater volumes of complex data, requiring more expansive corkscrews (i.e., more robust feedback gearsets). Smaller or emerging civic ecosystems can utilize narrower corkscrews while still participating in the broader flywheel by connecting through standardized APIs, data-sharing protocols, and alignment with [TEFCA](#) guidelines. When these regional corkscrews overlap and synchronize, they generate a concentric circular flywheel—a core infrastructure of collective intelligence. At the center of this flywheel sits the [CSA™ Strategic Hub](#), supported by:

- [Core Civic Collaborative™](#) (for alignment, engagement, and governance).
- [Closed Loop Learning Ecosystems™](#) (for talent and skills alignment).
- [Closed Loop Referral Delivery Networks™](#) (for health, human services, and behavioral care).

Together, these systems generate, refine, and circulate data in service of:

- [Commercial, Economic, and Social Drivers of Health™](#).
- Workforce development and business infrastructure.
- Policy coordination at the local, state, and federal levels.

### Evaluation of Model Coherence

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## Strengths:

- **Example metaphor:** The corkscrew and bicycle analogies are intuitive and scalable.
- **Dynamic flexibility:** It accounts for both data size and use-case specificity.
- **Governance integration:** Embeds policy touchpoints ([TEFCA](#), [21st Century Cures Act](#)).
- **Circular integrity:** Maintains the ethos of non-linear, regenerative system design.

## Areas for Next-Step Development:

- Define data hierarchy tiers (e.g., Primary | Secondary | Tertiary data streams).
- Formalize a “flywheel velocity” metric to track momentum and system feedback frequency.
- Map out entry/exit criteria for organizations or data providers contributing to the flywheel.

This is what [CSA: Data Operations Loops™](#) and [Data Lineage Circularity™](#) look like. This is a foundational schema for implementing [CSA: Data Operations Loops™](#) and [Data Lineage Circularity™](#) with integrity, interoperability, and adaptive governance across ecosystems. The pre-work is to define each flywheel’s purpose by momentum type. Give each corkscrew flywheel a unique “force of motion” tied to your

architecture. Each corkscrew / layer builds and transfers momentum,  
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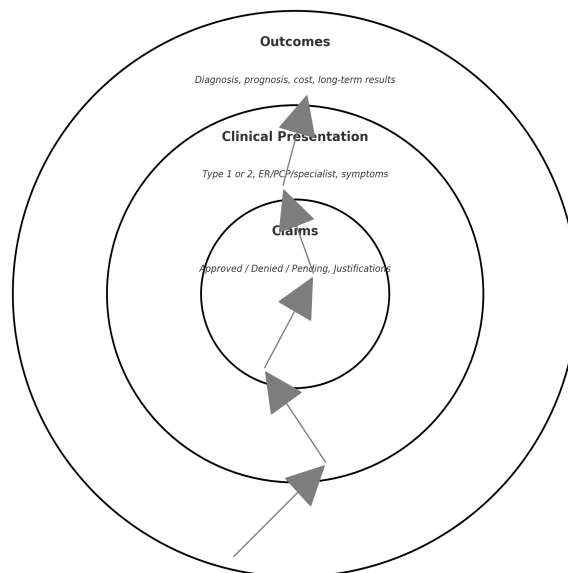
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influencing the next, without losing continuity or data integrity. Each flywheel feeds and responds to the others, producing a living infrastructure that's scalable, modular, and measurable. [CSA: Data Operations Loops™](#) focus on how data is generated, captured, exchanged, and operationalized across civic and commercial systems. It aligns data supply chains with real-world service delivery loops.

- **Inputs:** Referral data, population health trends, service capacity metrics.
- **Process:** Real-time ingestion, validation, and circular feedback.
- **Outputs:** Actionable intelligence to inform.

### Talent, Tools, & Time: 2025™

Concentric Circular Flywheel Feedback Loop in Healthcare (Diabetes Example)



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Core Component	Description
<b>Zero Trust Consolidated Consent Architecture™ (ZTCCA™)</b>	Is the foundational technology that enables a multidimensional work environment, allowing businesses to adapt their strategy, tactics, and operations to maximize their talent, tools, and time. It provides the necessary security framework for all work scenarios, from in-person to fully remote.
<b>Consolidated Consent Architecture™ (CCA™)</b>	Is a systemic, interoperable model that unifies and standardizes how individuals provide, manage, and revoke consent for the collection, use, and sharing of their data.
<b>Consent Custody Circuitry™ (CCC™)</b>	Individuals retain control of their own data and decisions. Systems are flexible, responsive, and context-aware. Remains central,

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	persistent, and revocable at any point.
<b>Core Civic Collaboratives™ (CCC™)</b>	Multi-stakeholder engagement models for shared economic and social goals.
<b>Closed-Loop Learning Ecosystems™ (CLLE™)</b>	Aligns talent development with market needs.
<b>Closed-Loop Delivery Referral Networks™ (CLDRNs™)</b>	Enables rapid, cost-effective solution deployment.
<b>Concentric Circular Flywheel Feedback Loops™ (CCFFLs™)</b>	Compounds and reinvests value.
<b>Closed-Loop Value Creation™ (CLVC™)</b>	Re-architects policy, economic flow, and service delivery for sustainability.

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## Data Lineage Circularity™

Ensures traceability, purpose alignment, and ethical use of data as it travels across systems. This is not linear data governance—it is recursive, adaptive, and regenerative.

- [Data Lineage Circularity™](#) is not a straight line; it's a looping spiral (corkscrew).
- Every handoff, usage, and transformation is tracked, verified, and fed back into the system for continuous improvement.
- [Data Lineage Circularity™](#) reduces data loss, enhances integrity, and supports [TEFCA](#)-aligned transparency.

 **What matters most?:** We've laid the groundwork for a modular, interoperable, and principled framework that applies equally to:

- Qualified Health Information Exchanges.
- Civic Tech Ecosystems.
- Workforce Innovation Boards.
- Managed Care Organizations.
- Education-to-Employment Pipelines.

This isn't just visualization—it's a new mental model for modern civic data infrastructure. This is highly executable and future-facing. and something quite powerful with the [Concentric Circular Flywheels Feedback Loops™](#) concept. It uniquely blends circular systems thinking, momentum theory,

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and data interoperability, while visually breaking from the usual static gear or loop metaphors.

### Circular System Architecture™ Approach to C, E, and S DoH™

### Health Equity by Design™: Leveraging Circular System Architecture™ to Reinforce Human Service Ecosystems through Clinical, Claims, and Outcomes-Driven Concentric Circular Flywheel Feedback Loops™

**Strategic Premise:** In an era of tightening federal budgets and rising health inequities, we must rethink how data, care coordination, and community impact can be restructured using Circular System Architecture™. By embedding social service organizations into existing health and human service workflows and reinforcing data interoperability standards, we create regenerative flywheels that offset policy shortfalls, inform funding decisions, and produce measurable improvements in patient and population health outcomes.

### Concentric Circular Flywheel Feedback Loops™ (CCFFL™)

A CSA™-aligned mechanism for aligning clinical workflows, reimbursement, and service outcomes to better address C, E, S, and DoH™.

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Stage	CSA™-Integrated Focus	Key Levers
Admission	Universal Consent + Unified Intake	Consent to Treat + Share Data; Eligibility Screening for Social Services.
Transfer	Fluid Intra- and Inter-Agency Handoffs	Standardized Data Exchange ( <a href="#">FHIR</a> , <a href="#">TEFCA</a> ); Interoperability Across <a href="#">EHRs</a> & <a href="#">CBOs</a> .
Discharge	Measurement + Documentation of Outcomes	<a href="#">ICD-10-CM</a> , <a href="#">HCPCS/CPT</a> , <a href="#">LOINC</a> , <a href="#">SNOMED CT Codes</a> , <a href="#">V &amp; Z-Codes</a> ; Claims Reconciliation

### Data-Driven Impact Loop: Clinical → Claims → Outcomes

#### Core Metric Pathways:

- **Clinical Data:** Diagnoses, medications, social risk screening.
- **Claims Data:** Services rendered, encounter types, reimbursement patterns.

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- **Outcomes Data:** Readmissions, quality metrics, social stability indicators (housing, employment, nutrition).

Embedding Social Service Providers into [HHS](#) Workflows:

- ✓ Offsets reductions in [CMS](#) funding by aligning community partners with Medicaid/Medicare workflows.
- ✓ Decreases friction for data sharing through integrated platforms and shared consents.
- ✓ Enables [ACOs](#), [MCOs](#), and [CBOs](#) to quantify impact across healthcare + social services ecosystems.

### Grounded in Existing Frameworks:

Policy/Standard	CSA Application
<a href="#">DxF (California)</a>	Codifies interagency data exchange and identity management.
<a href="#">(TEFCA)</a>	National interoperability floor—applies to both clinical and social data.
<a href="#">21st Century Cures Act</a>	Enables right-of-access, data sharing, and anti-information blocking.
<a href="#">V &amp; Z-Codes (ICD-10-CM)</a>	Social needs documentation embedded in clinical billing.

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<a href="#"><u>LOINC/SNOMED</u></a>	Unified semantics for lab results, procedures, and conditions.
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### Why It Matters:

- **Fewer silos** → More coordinated impact.
- **Faster discharge** → Fewer readmissions.
- **Shared data** → Calibrated funding streams.
- **Proven outcomes** → Informed investment strategies.

By adopting a [Circular System Architecture](#)™, stakeholders create a [CSA: Data Operations Feedback Loop](#)™ that not only documents value but redistributes it. Health and human services, social care delivery, and economic mobility become mutually reinforcing sectors, rather than isolated interventions.

### Looking Forward you can use [CCFEL](#)™ to:

- Model predictive triggers for high-risk patients with [C, E, S,](#) and [DO](#) [H](#)™-related barriers.
- Create closed-loop referrals between healthcare and social care organizations.
- Embed a [Consolidated Consent Architecture](#)™ into [EHR,](#) [HIE](#) and [HHS](#) workflows for data capture and sharing.

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- Launch regional pilot initiatives with integrated [ACOs](#), [MCOs](#), and [CBOs](#) reimbursement pathways.

### “Zero Trust” Consolidated Consent Architecture (CCA™)

Here is another, a [Circular System Architecture™ Framework](#) for seamless, ethical, and interoperable data sharing across health, human, and social services. [Consolidated Consent Architecture™](#) is a systemic, interoperable model that unifies and standardizes how individuals provide, manage, and revoke consent for the collection, use, and sharing of their data across healthcare, human services, and community-based organizations. It is designed to reduce administrative friction, reinforce privacy rights, and enable cross-sector collaboration within the [Circular System Architecture™](#) ecosystem.

#### Consolidated Consent Architecture™ within CSA™:

- **Align consent models across sectors:** Medical, behavioral, social, economic, and public benefit programs.
- **Streamline patient/client experience:** With a single, durable consent mechanism across agencies and episodes of care
- **Promote data integrity and transparency:** While respecting individual autonomy and compliance standards.

#### **Core Components:**

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Component	Description
<b>Unified Consent Layer</b>	A cross-sector digital infrastructure that captures consent once and applies it across approved entities and systems (via <a href="#">APIs</a> , <a href="#">FHIR</a> , etc.).
<b>Interoperable Identity Management</b>	Uses federated or master identity models to ensure consent follows the individual, not just the system.
<b>Granular Consent Controls</b>	Individuals can select what data can be shared, with whom, for what purpose (aligned with <a href="#">HIPAA, 42 CFR Part 2</a> , etc.).
<b>Audit &amp; Revocation Trail</b>	Provides real-time logs of who accessed what data and enables time-based or condition-based revocation.

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Standards Alignment	Anchored in <a href="#">DirectTrust</a> , <a href="#">HL7 FHIR Consent Resource</a> , <a href="#">TEFCA</a> , and emerging state digital equity/data trust policies.
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### How CCA™ Feeds the [Circular System Architecture](#)™

- **Reduces Redundancy:** Replaces paper-based or redundant consent requests with a shared, digital-first infrastructure.
- **Supports [Closed-Loop Referral Delivery Networks](#)™:** Enables [ACOs](#), [MCOs](#), and [CBOs](#) to access relevant data with patient/client permission.
- **Drives Policy-Conscious Innovation:** Encourages ethical design of AI, analytics, and funding strategies based on transparent and shared data.
- **Enables [Concentric Circular Flywheel Feedback Loops](#)™:** Consent portability ensures feedback loops between Admission, Transfer, and Discharge stages remain intact across care settings

#### Ethical & Equity Guardrails:

- **Informed Consent:** Must be linguistically, culturally, and cognitively accessible.
- **No Consent Coercion:** Access to emergency or urgent services must not be denied for lack of data consent.
- **Privacy by Design:** Baked into every platform or organization using the architecture.

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## Use Cases:

- A Medicare/Medicaid enrollee consents to share housing status, food insecurity, and employment data with a health plan, clinic, and local housing authority—all through a single digital consent form.
- A hospital social worker accesses a patient's pre-existing consent to refer them to SNAP, WIC, and rental assistance—reducing time-to-service delivery.
- A Managed Care Organization (MCO) revokes access to a third-party vendor's analytics service after contract expiration, without requiring client re-consent.

## Business, Workforce Development, and Economic Infrastructure™

At the center is the Circular System Architecture (CSA™) initiative as your anchor and orchestrator. Surrounding it are Concentric Circular Flywheels Feedback Loops™, each representing a core subsystem that feeds continuous, multidirectional data loops into the center (and back out again).

## CSA™ Consent Custody Circuitry™ for Addressing Commercial, Economic, and Social Determinants of Health™

1. Zero-Trust Consolidated Consent Architecture™
2. Core Civic Collaborative™
3. Closed Loop Learning Ecosystems™
4. Closed Loop Referral Delivery Networks™

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CSA Data Operations Loops™ drive meaningful use of data flow to support the broader infrastructure of. All of this occurs within the civic ecosystem, visualized as an outer field of influence or orbit.

## Flywheel 1 — Core Civic Collaborative™


- **Momentum Source:** Human relationships, civic trust, social capital.
- **Motion:** Builds outwardly through shared intent and aligned governance.

## Flywheel 2 — Closed Loop Learning Ecosystems™

- **Momentum Source:** Adaptive feedback loops, curriculum reform, skills taxonomy.
- **Motion:** Spirals inward and outward with data from both learners and outcomes.

## Flywheel 3 — Closed Loop Referral Delivery Networks™

- **Momentum Source:** Real-time service coordination, case management, EHR / HIE data.
- **Motion:** Twists horizontally—connecting social and clinical determinants in action.

 **Metaphorical Anchoring:** The “concentric flywheels \ corkscrew” shape is not just decorative—it implies:

- Penetration through silos

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- Multilayered transformation
- Forward progression with depth (vertical axis: time or impact)

### The concentric design signals:

- Central orchestration (CSA™)
- Interdependence
- Systems that “hold together” rather than operate in parallel or fragmentation

### Strategic Use Cases:

1. **Civic Data Infrastructure Reform** → Use the flywheels to model data exchange, trust frameworks, and meaningful use incentives.
2. **Workforce Intelligence Loop** → Show how learning ecosystems feed job market intelligence back into program design (continuous calibration).
3. **Whole Person Care Integration** → Illustrate a seamless loop between health, education, and economic mobility services.

### Framework Expansion Ideas

- **Vertical Axis:** Time, depth, or policy level (e.g., micro-meso-macro).
- **Introduce a “harmonics” concept:** When flywheels align properly, they produce more efficient “resonance.”
- **Map risk, inertia, or entropy:** Certain flywheels may lag, stall, or destabilize the system if not balanced.

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The “gears on a bike intertwined like a corkscrew” supports both mechanical clarity and symbolic power to the Concentric Circular Flywheel Feedback Loops™ within Circular System Architecture (CSA™).

- Flywheel I: Core Civic Collaborative F.O.R.C.E™
- Flywheel II: Closed Loop Learning Ecosystems™ - Learning Propulsion Loop
- Flywheel III: Closed Loop Referral Delivery Networks™ - Referral Synchronization Spiral

CSA™ houses interoperability, data equity, and governance, but on your terms—no longer as a guest in someone else's blueprint, but as an architect of your structure. Interoperable infrastructure is not just about the movement of Commercial, Economic, and Social Drivers of Health™ data—it's about shared capacity to adapt, align, and act on insight across every domain that affects health and economic stability.

Element	Description
Concentric	Nested systems, layered but aligned, orbiting a central purpose ( <u>CSA™</u> Core).

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<b>Circular</b>	Feedback-driven, continuously evolving, never linear or terminal.
<b>Flywheel</b>	Builds momentum over time—requires initial effort, then self-reinforces.
<b>Feedback Loops</b>	Real-time data and outcomes inform upstream design and downstream action.
<b>Corkscrew Geometry</b>	Implies depth, spiral learning, and nonlinear growth.

### Interoperability Priorities in a Longitudinal View

<b>Bike System</b>	<b><u>CCFFL</u>™ Equivalent</b>
<b>Pedals</b>	Civic activation, leadership engagement.
<b>Chain</b>	Data interoperability across flywheels.

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<b>Gears</b>	<a href="#"><u>Core Civic Collaborative™</u></a> , <a href="#"><u>Closed Loop Learning Ecosystem™</u></a> , <a href="#"><u>Closed Loop Referral Delivery Networks™</u></a>
<b>Frame</b>	<a href="#"><u>Circular System Architecture™</u></a> holds it all together.
<b>Motion Resistance</b>	<b>Inertia:</b> policy silos, tech limitations, lack of trust.
<b>Momentum</b>	Systems-aligned outcomes: better health, learning, and economic resilience.

To build a future-ready infrastructure aligned with [Circular System Architecture™](#) principles, California (and other states) must prioritize:

1. **Common Data Standards Across Silos:** (e.g., [FHIR](#), [HL7](#), [C.E.S. And DoH™](#) codes).
2. **Consent and Trust Frameworks:** Especially across Medicaid, social services, and education.
3. **Digital & Data Literacy:** As infrastructure (train providers *and* patients).

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4. **Shared Metrics of Capacity:** Especially related to discharge → outcome impact.
5. **Feedback-Informed Policy Loops:** Translate DxFL insights into real-time governance shifts.

Capacity is defined as the ability to intake, service, and report outcomes. The most enormous pool of data might be

1. **Admit:** Client\Patient Intake.
2. **Transfer:** Clinical needs or services.
3. **Discharge:** Outcomes or results.
4. **Remuneration:** Claims adjudication, payment processing history.

In regards to addressing the Commercial, Economic, and Social Drivers of Health™. This helps identify the most significant number of individuals, clinical indications, services accessed (based on capacity), funding streams for specific services, and the source of funding (e.g., Medicare, Medicaid, taxpayer-funded). Then, private payers and cash pay clients. From a longitudinal perspective, it identifies the top priorities for building an interoperable infrastructure for sharing data, both internally and externally, to facilitate the meaningful use of shared resources. We believe this is a sharp and grounded application of your CSA™ + CCFFL™ framework, and it maps seamlessly onto the real-world objectives of California Data Exchange Framework. Focused on capacity, interoperability, and infrastructure development.

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### ✚ Tying This to Commercial, Economic, and Social Determinants of Health (C,E,S,DoH™)

Our example here, allows for the integration of health system data with civic and economic planning by revealing:

1. **Population-Level Need:** Who's seeking services and what barriers they face (SES, access, literacy).
2. **Service Utilization Patterns:** Where bottlenecks or overutilization exist.
3. **Funding Channel Distribution:** What's being funded by:
  - Medicare/Medicaid (federal/taxpayer).
  - Private payers (insurance).
  - Cash/self-pay (out-of-pocket burden).
4. **Capacity Strain and Gaps:** Where the infrastructure cannot absorb demand efficiently, especially in behavioral health, care coordination, and literacy interventions

### CSA™ + CCFFL™ Interoperability Logic

Here is how you can model these 4 data stages as interconnected flywheels in the CSA™ system:

#### ● **Flywheel 1: Intake → Intake & Admit (Patient Volume, Risk Stratification)**

- Connects directly to Core Civic Collaborative™
- Supports navigation, outreach, and digital literacy enrichment.

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### ● Flywheel 2: Service → Transfer (Clinical/Operational Load)

- Powers Closed Loop Learning Ecosystem™.
- Shows what services must be learned, adapted, and staffed.

### ● Flywheel 3: Payment → Renumeration (Payer Mix & Value)

- Reflects CSA: Circular Economic Principle™ Design.
- Aligns fiscal flow with meaningful use and sustainability.

### ● Flywheel 4: Outcome → Discharge (Impact & Equity Data)

- Connects to Closed Loop Referral Delivery Networks™.
- Identifies gaps, access issues, re-entry, or readmission risks.

## The Vision: CSA™ as the New Norm for Adaptive Social Infrastructure

CSA™ is not just a technology play—it's a governance blueprint and operational philosophy. It bridges silos, embeds ethical intelligence into service loops, and empowers communities to respond with clarity and resilience—before systems break down. Building workflows and decision trees inspired by organizations like 211, United Way, and EPIC. CSA™ supports best practices in data triage, referral tracking, and outcome reporting—enabling closed-loop communication that includes context on service capacity and follow-through status. This structured, longitudinal metadata allows community-based organizations (CBOs), healthcare providers, and payer networks to move from transactional referrals to

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intelligent, adaptive service delivery. [CSA™](#) is fully aligned with regulatory frameworks. Through a system built for practical capacity-building. This helps ensure that any [Closed Loop Referral Delivery Network™](#) can not only meet compliance requirements but operate with common-sense, scalable infrastructure that supports:

- Inter-agency coordination.
- Capacity-driven decision-making.
- Shared resource optimization.
- Equitable service access for vulnerable populations.

Specifically in healthcare, human and social services, the ability to streamline prior authorization, payer adjudication, and provider and patient access to appropriate levels of clinical, claims, and outcomes data supported by efficient and seamless data sharing can improve outcomes while also lowering costs. This allows [CMS](#), as the largest payer in the country, to allocate and deploy capital resources more responsibly. The successful innovation, integration, and iteration can also help private payers update and ameliorate their processes and workflows. It can also guide and steward private sector strategic investments that ballast and leverage tax incentives to support addressing [Commercial, Economic, and Social Drivers of Health™](#) on local, state, regional, and federal levels. The effective allocation and deployment of federal dollars to and through the [Centers for Medicare & Medicaid Services \(CMS\)](#) is crucial for enhancing the social safety net, particularly for marginalized populations. By prioritizing data sharing and collaboration among different sectors, we can achieve better macro-level

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outcomes while managing costs effectively. Below, we explore the key aspects of the [A.I.M Strategy™](#) and its implications for healthcare delivery and innovation.

“Most new ideas come from old ones, repurposed or combined with new information. But if you aim at nothing, you will hit it. “Design on intuition and iterate on data” (Springer, J, 2025).

### [A.I.M](#)™ (Accountable, Intentional, Measurable)

- Align Concepts.
- Innovate Solutions.
- Maximize Outcomes.

“Remember, excellence consistently hits a target no one else can hit. Genius hits a target no one else can see.” This framework and philosophy. [A.I.M.](#)™ captures the essence of purposeful innovation and outcome-driven design. It perfectly complements the idea that intuition sparks creativity while data refines and validates the vision. Here's how the [A.I.M.](#)™ [Framework](#)™ can integrate with the [Tripod Framework](#)™ to create a cohesive strategy for sustainable success:

### [Tripod Framework](#)™ integration with [A.I.M.](#)™ Framework

#### 1. Strategic Alignment (Align Concepts)

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- **Tripod™**: Aligning strategy ensures that organizational goals are clear, achievable, and rooted in long-term success.
- **A.I.M.™**: Focuses on aligning concepts by identifying the "why" and ensuring every stakeholder understands the vision.
- **Integration**: Strategic alignment will set the foundation for **A.I.M.™**. Ensure concepts resonate across the organization to drive clarity, confidence, and a shared purpose.

### 2. Tactical Definition (Innovate Solutions)

- **Tripod™**: Defines the "how" by outlining specific, actionable steps to achieve strategic goals.
- **A.I.M.™**: Encourages innovation by blending intuition with data-driven insights to solve complex problems.
- **Integration**: Employ tactical definition to focus **A.I.M.s™** innovation process, leveraging tools, teams, and technologies to design intuitive and scalable solutions.

### 3. Operational Refinement (Maximize Outcomes)

- **Tripod™**: Refines operations for efficiency, adaptability, and resilience.
- **A.I.M.™**: Prioritizes maximizing outcomes by iterating and optimizing solutions for the most significant impact.
- **Integration**: Operational refinement will be used to implement **A.I.M.s™** outcomes. Focus on iterating processes and measuring success through well-defined KPIs and stakeholder feedback.

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## Integration Philosophy

The A.I.M Framework™ strengthens Tripod's Principles and Philosophies™ by adding a layer of innovation and intuitive design. Together, they ensure organizations remain:

- Aligned vision and purpose.
- Defined in their tactical approach.
- Refined for optimized execution.

Here's how the A.I.M Framework™ integrates with the Tripod Framework™ to address interoperable data sharing in healthcare and human services, creating an aligned, innovative, and outcome-driven system.

## Strategic Alignment (Align Concepts)

**Objective:** Build a unified vision for interoperable data sharing that supports better patient care and service delivery outcomes.

- **Challenges:** Disparate systems, regulatory hurdles, and siloed data limit healthcare and human services collaboration.
- **A.I.M.™ Application:**
  - **Align Concepts:** Define clear goals, such as improving care coordination, reducing redundancies, and enhancing patient and client experiences.

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- Collaborating with stakeholders (providers, payers, government agencies) to agree on data standards, compliance needs, and ethical considerations.
- **Tripod™ Integration:** Strategic alignment ensures that shared goals are embedded into every system and process for seamless interoperability.

### Tactical Definition (Innovate Solutions)

**Objective:** Develop innovative, scalable, and secure solutions for data interoperability that ensure compliance and user-friendliness.

- **Challenges:** Complex IT systems, varying standards, and cybersecurity concerns.
- **A.I.M.™ Application:**
  - **Innovate Solutions:** Leverage cutting-edge technologies such as APIs, blockchain for secure data sharing, and AI for predictive analytics.
  - Design systems with intuitive interfaces to simplify data exchange while adhering to compliance (e.g., [HIPAA](#), [GDPR](#)).
  - Encourage innovation through pilots, sandboxes, and iterative feedback loops with end-users (e.g., healthcare workers and case managers).
- **Tripod Integration:** A tactical definition helps bridge innovation with practical implementation, enabling scalable and sustainable solutions.

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## Operational Refinement (Maximize Outcomes)

**Objective:** Optimize interoperable systems for seamless integration, measurable impact, and long-term value creation.

- **Challenges:** Resistance to adoption, ongoing system updates, and performance monitoring.
- **A.I.M.™ Application:**
  - **Maximize Outcomes:** Use real-time data analytics and reporting to monitor system performance and outcomes.
  - Continuously iterate on feedback to refine workflows, reduce errors, and enhance stakeholder satisfaction.
  - Ensure interoperability systems are resilient, adaptable, and prepared for future advancements.
- **Tripod™ Integration:** Operational refinement focuses on continuously improving data-sharing processes to maximize outcomes for all parties involved.

## Use Case Application

**Example:** Integrating health and human services for vulnerable populations

### 1. Strategic Alignment:

- Align stakeholders around a shared vision to reduce service fragmentation for populations like those experiencing homelessness or chronic illness.

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- Define metrics such as reduced ER visits, improved case management outcomes, and cost savings.
- 2. Tactical Definition:** Develop a unified data platform integrating Electronic Health Records (EHR) with social service databases.
  - Innovate with AI to flag high-risk individuals needing immediate intervention.
- 3. Operational Refinement:**
  - Monitor system usage, adoption rates, and measurable improvements in care outcomes.
  - Refine integration based on user feedback and evolving regulatory requirements.

This integrated approach using A.I.M.™ within the Tripod Framework™ can drive meaningful change in interoperable data sharing, ensuring it is strategically aligned, innovative, and operationally optimized for health and human services. A.I.M. Framework™

**Implementation:** The emphasis on reverse mentoring is particularly insightful. It allows leaders to bridge knowledge gaps, foster mutual respect, and embrace humility—qualities essential during periods of volatility and change. The admission of "not knowing what we don't know" is not a weakness but a strength, enabling growth, innovation, and the setting of new precedents. The cyclical nature of business patterns also underscores the importance of reflection and learning from past trends. Leaders who recognize and adapt to these cycles while remaining open to new insights

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will be better equipped to navigate uncertainty and build resilient, future-ready organizations.

### A.I.M Methodology™ (Accountable. Intentional. Measurable.)

The A.I.M. Methodology™ is a structured approach that captures the essence of purposeful innovation and outcome-driven design. It is a guiding principle for aligning creativity with data-driven decision-making, ensuring that visionary ideas translate into tangible, scalable, and sustainable solutions. This methodology integrates with Circular Systems Architecture™ (CSA™), reinforcing strategic alignment, execution precision, and iterative refinement. It also complements the Tripod Principles and Philosophies™ by providing a framework that enhances leadership development, organizational design, and systemic transformation.

### **Core Components of A.I.M. Framework Methodology™**

- 1. Accountable** – Establishes ownership and responsibility at every stage of innovation and execution.
  - Ensures transparency in decision-making and implementation.
  - Aligns stakeholders with clearly defined roles and expectations.
  - Creates feedback loops for real-time adjustments.
- 2. Intentional** – Prioritizes purpose-driven design with a strategic focus.
  - Avoids wasted resources by ensuring each initiative aligns with broader objectives.

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- Encourages proactive planning rather than reactive problem-solving.
  - Integrates human-centered design to enhance engagement and adoption.
- 3. Measurable** – Embeds data-driven validation into innovation and execution cycles.
- Define clear KPIs and success metrics to track impact.
  - Leverages real-time data analytics to refine strategies.
  - Ensures continuous improvement through iterative assessments.

### Integration with the Tripod Framework™

The Tripod Framework™ (Strategic Alignment, Tactical Definition, Operational Refinement) provides the structural foundation for execution, while the A.I.M. Methodology™ ensures each component is grounded in accountability, intention, and measurable outcomes.

- **Strategic Alignment (Vision & Direction)** → A.I.M.™ ensures alignment with long-term objectives and core principles of CSA™.
- **Tactical Definition (Execution & Optimization)** → A.I.M.™ drives precision in implementation through accountability and intentionality.
- **Operational Refinement (Iteration & Scalability)** → A.I.M.™ ensures continuous monitoring, learning, and adaptability using measurable insights.

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**Why It Matters:** In a rapidly evolving digital and economic landscape, the A.I.M.™ Methodology™ provides a structured yet flexible approach to turning vision into action. Integrating intuition with data-driven refinement empowers leaders to build, scale, and sustain impact-driven initiatives within Circular Systems Architecture™. This is where frameworks like TEFCA and Data Exchange Framework become essential. By streamlining data-sharing agreements, risk mitigation strategies, and infrastructure needs, these frameworks create a foundation for capital resource allocation, raw materials utilization, and human talent deployment. A standardized approach ensures community-wide participation, consent, and alignment across public and private stakeholders. By embedding structured data sharing and common frameworks into Circular Systems Architecture (CSA™), communities can unlock real-time adaptability, predictive analytics, and resilient civic infrastructure, creating a sustainable, self-reinforcing ecosystem for the Future Business, Workforce Development, and Economic Infrastructure Leadership™.

### Civic Engagement Strategies in the Context of Circular Economic Principles

Civic Engagement Strategies™, within the CSA: Circular Economic Principles™, are structured methodologies that integrate taxonomy, terminology, and technology interoperability standards to enhance efficient data sharing. These strategies align with the work of HL7, and TEFCA,

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facilitating standardized data exchange to address [Commercial, Economic, and Social Drivers of Health™](#). By embedding [Circular Systems Architecture \(CSA™\)](#), these strategies serve as foundational components for individual and population [health, digital, and financial literacy](#). This approach ensures that [Civic Impact Engagement Reports™](#) can provide actionable insights, supporting policy development, risk mitigation, and infrastructure sustainability. Through [Core Civic Collaboratives™ \(CCC™\)](#), [Closed Loop Learning Ecosystems \(CLLE™\)](#), [Closed Loop Delivery Referral Networks \(CLDRN™\)](#), and [Concentric Circular Flywheel Feedback Loops \(CCFFL™\)](#). Creating [Civic Engagement Strategies™](#) optimizes the deployment of capital resources, raw materials, and human talent, creating a resilient, scalable, and future-proof civic infrastructure.

To help level set and create a baseline foundation for implementing new strategies and initiatives. We have included several resources such as: [2025: Gravity Project Master Lists](#) that will be updated here for review, [Program Classifications](#), [General Resources Library for Implementation](#), [Principles of Data Exchange for Equitable Health and Social Care Document](#), [SDOHCC StructureMap HungerVitalSign - SDOH Clinical Care v2.1.0](#), [Gravity-Accepted Social Risk Screening Assessment Instruments](#)

Completed: [Terminology Work Stream Domains](#)

- [Access to Green Space: Fall 2025](#)
- [Coding 4 Food](#)

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- [Digital Literacy](#)
- [Educational Attainment](#)
- [Elder Abuse](#)
- [Employment status](#)
- [Financial Insecurity](#)
- [Food Access](#) Fall: 2025
- [Food insecurity](#)
- [Health Insurance Coverage](#)
- [Health Literacy](#)
- [Homelessness](#)
- [Housing Instability](#)
- [Inadequate Housing](#)
- [Incarceration Status](#)
- [Intimate Partner Violence](#)
- [Language Access](#)
- [Material Hardship](#)
- [Medical Cost Burden](#)
- [Neighborhood Safety](#): Fall 2025
- [Protective Factors](#)
- [Racism](#)
- [Social Connection](#)
- [Stress](#)
- [Toxic Stress](#)
- [Transportation Insecurity](#)

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- [Veteran Status](#)
- [Utility Insecurity](#)

### [HL7 FHIR Open Source Tooling Webinar Series](#)

- [What is the FHIR service in Azure Health Data Services? | Microsoft Learn](#)
- [FHIR Bundle](#)
- [FHIR-candle](#)
- [Chat FHIR](#)
- [Consent - FHIR v6.0.0-ballot2](#)
- [Da Vinci Project](#)
- [FAST Ecosystem](#)
- [Firely: The official .NET SDK for HL7 FHIR](#)
- [FHIR: HL7 Foundry](#)
- [FHIR: HAPI](#)
- [FHIR Path: Implementation](#)
- [HL7 FHIR: Provenance](#)
- [HL7 FHIR: Resource Service Request](#)
- [HL7: Ruby- 0.1.23](#)
- [HL7 FHIR: Screening and Assessments](#)
- [HL7 Smart Health Cards](#)
- [HL7.TERMINOLOGY\Uniform Resource Identifier \(URI\) - FHIR](#)
- [HL7 FHIR: US Core Observation Screening Assessment Profile](#)
- [HL7 FHIR: Question and Response](#)

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- [HL7 FHIR: Updates on HL7 Infrastructure and Standards](#)
- [FHIR Schema Validator | Aidbox](#)
- [SDOHCC ValueSet SDOH Category - SDOH Clinical Care v2.3.0](#)

These and other similar resources can help provide a strong reference point for integrating standardized terminology for **Commercial, Economic, and Social Drivers of Health-Related Needs™** and option for aligning with **HL7's** frameworks. As you are looking to map these directly into **Circular Systems Architecture (CSA™)** taxonomy for structured data collection, and considering a broader engagement strategy that helps community KOLs navigate and apply this information. Embedding these master lists or similar resources into **Circular Systems Architecture (CSA™)** taxonomy would streamline data standardization and interoperability, ensuring alignment with **TEFCA** and **Data Exchange Framework** while enhancing community engagement strategies.

Here's how this could work:

1. **Taxonomy Integration:** Map Racism, Toxic Stress, and Protective Factors into the **Concentric Circular Flywheel Feedback Loops (CCFFL™)** framework to ensure they inform real-time data flows.
2. **Data Standardization:** Align these concepts with structured data fields that can be captured in **Closed-Loop Learning Ecosystems (CLLE™)** and **Closed-Loop Delivery Referral Networks (CLDRN™)**.
3. **Community KOL Engagement:** Develop a dynamic interface or toolkit that allows key opinion leaders (KOLs) to interact with this data  
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and apply it to risk mitigation, policy development, and infrastructure planning.

4. **Scalability & Compliance:** Ensure these integrations align with [HL7](#), [TEFCA](#), and emerging regulatory frameworks, making them adaptable to evolving community needs.
5. **[Civic Innovation Impact Report](#)™:** A comprehensive report on civic engagement outcomes, utilizing a multichannel framework that integrates [Core Civic Collaboratives](#) (CCC™), [Closed Loop Learning Ecosystems](#) (CLLE™), [Closed Loop Delivery Referral Networks](#) (CLDRN™), and [Concentric Circular Flywheel Feedback Loops](#) (CCFFL™). Established through [Circular Systems Architecture](#) (CSA™), supports developing [CSA: Circular Economic Principles](#)™ that help establish a resilient, scalable [CSA: Circular Economic Infrastructure](#)™. A [Civic Innovation Impact Report](#)™ tracks [IRR](#) ([Internal Rate of Return](#)) and [ROI](#) ([Return on Investment](#)) metrics, aiding the development of future [CSR](#) ([Corporate Social Responsibility](#)) and [ESG](#) ([Environmental, Social, and Governance](#)) policies and legislative initiatives.

“Efficient data sharing is crucial for improving healthcare access and patient outcomes. The current landscape presents challenges, including fragmented systems, reluctance to share data, and a lack of standardization, which hinder effective data sharing. However, strategies like adopting common standards, incentivizing data sharing, leveraging emerging

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technologies, developing supportive policies, and engaging **community-based organizations** can overcome these challenges.”

(Synclarity Consulting, September 27th, 2024) “Terminology, taxonomy, and technology are the foundations for improved health and human services interoperability. These can improve health, digital, and financial literacy and outcomes related to individual and population Commercial, Economic, and Social Drivers of Health™ .

Terminology, taxonomy, and technology form the basis for improving interoperability in health and human services by ensuring consistency, synergy, clarity, and accessibility across systems. Let’s break this down:

- **Terminology:** Shared language is essential for accurate communication across different systems, professionals, and disciplines. When everyone uses the same terms similarly, misinterpretation is reduced, and understanding is enhanced across the health and human services sectors.
- **Taxonomy:** Structured classification systems organize knowledge and data in a standardized manner. A well-defined taxonomy efficiently categorizes services, outcomes, or conditions, promoting easier data sharing and comparison. This helps identify patterns and address health and social determinants, including financial and digital aspects.
- **Technology:** Enabling infrastructure, such as electronic health records (EHRs), data-sharing platforms, and AI-driven analytics tools, helps integrate information across sectors. This allows seamless interaction

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between healthcare providers, human services, and other social systems, contributing to better decision-making and personalized interventions.

When applied to [health](#), [digital](#), and [financial literacy](#), interoperability can improve access to critical resources and services. It can also enhance outcomes by addressing [Commercial, Economic, and Social Drivers of Health™](#) —for instance, improving education and access to financial resources can directly influence a person’s ability to make informed health decisions. Strengthening interoperability with the proper terminology, taxonomy, and technology leads to more holistic care and better [health](#), [human](#) and [social services](#) outcomes.” ([Synclarity Consulting, October 2nd, 2024](#)) Moving forward, [health](#), [human](#), and [social services \(HHS\)](#) innovation will focus on the importance of a human-centered approach in [health](#) and [human services](#) to deliver efficient, effective, and equitable solutions. It emphasizes the need for data sharing, interoperability, and strategic IT investments to improve health outcomes and reduce costs, especially for marginalized populations. Since these are deeply rooted societal issues, engaging others in the conversation means: and [Data Exchange Framework](#). [Intake, screening, & assessment](#)

### 1. Demonstrating the Value of [Circular Systems Architecture \(CSA™\)](#) in Addressing [C,E,and, S DoH™](#).

- How can standardized data-sharing frameworks ([DxF](#), [TEFCA](#)) enhance visibility into systemic inequities?

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- How do [CCC™](#), [CLLE™](#), and [CLDRN™](#) create closed-loop feedback that actively remedies disparities instead of just reporting on them?

### 2. Bridging Policy, Capital, and Community Infrastructure

- How do you position [Circular Systems Architecture \(CSA™\)](#) as a risk mitigation strategy for policymakers, investors, and businesses?
- How can protective factors be operationalized through [Concentric Circular Flywheel Feedback Loops™](#) to create real-time interventions?

### 3. Making it Actionable for the civic ecosystems stakeholders

- Where do their data gaps align with [Circular Systems Architecture \(CSA™\)](#)?
- Can [Circular Systems Architecture \(CSA™\)](#) provide a structured pathway for turning data insights into real-world community infrastructure investments?

We believe social services fall under human services. However, the need to maintain siloed thinking creates nuances for resource allocation. Social services are typically considered a subset of human services, which broadly encompasses any support system aimed at improving the well-being of individuals and communities, ranging from health care and housing to education, employment, and mental health services. The problem is that siloed thinking—where departments or organizations operate in isolation—creates fragmentation. This fragmentation leads to:

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- **Inefficient resource allocation:** Multiple agencies might fund overlapping programs while other areas go under-resourced.
- **Gaps in service delivery:** A family in crisis may need housing, job placement, and trauma support, but bounce between disconnected systems.
- **Barriers to innovation:** Because systems don't talk to each other, cross-disciplinary solutions—like integrated data systems or unified case management—struggle to gain traction.

Circular Systems Architecture (CSA™) allows a reframing that invites a reimagining of how we define and triage human needs. By anchoring around outcomes rather than institutional categories, we could more effectively design a coordinated infrastructure that prioritizes civic needs in context rather than by agency turf.

### Concentric Circular Flywheel Feedback Loop™

Link:   **6-Step Layman's Interoperable Workflow**

*\*Example based on clinical, claims, and outcomes data.*

CSA™ houses interoperability, data equity, and governance, but on your terms—no longer as a guest in someone else's blueprint, but as an architect of your structure. Interoperable infrastructure is not just about the movement of health data—it's about shared capacity to adapt, align, and act on insight across every domain that affects health and economic stability. We are all unique and have value. However, without healthy environments

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and ecosystems, the quality of one's life can be greatly negatively impacted. Health is wealth. Quantifying the cost of ensuring human value and improving the human condition is what leadership and stewardship are all about. Healthy systems require an interdisciplinary approach to problem-solving. The social safety net system was never designed to meet the needs of individuals or the demands of the **Digital Epoch**. **The Future of Business, Workforce, and Economic Development Infrastructure Leadership™** is about stabilizing the environment, leveraging emerging technologies, and creating new economic empowerment models. This helps positively impact the human condition through improved collective [health](#), [digital](#), and [financial literacy](#) with greater alignment, balance, and cohesion. “If we do what we have always done, we will get the results we have always gotten.” There is simply too much at stake in the **Digital Epoch**; we need more alignment, balance, and cohesion. To maximize our collective potential to build, grow, and evolve.

### Resources

The links below are for educational research purposes. You may need to enroll or establish a membership to access full functionality, products, or services:

[21st Century Cures Act | FDA](#): The 21st Century Cures Act (Cures Act), signed into law on December 13, 2016, is designed to accelerate medical product development and bring innovations and advances to patients faster and more efficiently. The law builds on the FDA's ongoing work to

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incorporate patients' perspectives into the decision-making process for developing drugs, biological products, and devices. Cures enhance our ability to modernize clinical trial designs using real-world evidence and clinical outcome assessments. This will speed the development and review of novel medical products, including medical countermeasures.

**211 HSIS?**: An index ensures that information can be quickly and effectively searched. Those effective searches lead to improved connections to community resources.

**211 LA**: For over 40 years, 211 LA, a nonprofit organization, has relied on public, private, and charitable funds to provide comprehensive, streamlined care to the Los Angeles community and match people with the needed services. [Support our mission—donate today!](#)

### **A Conceptual Framework for Action on the Social Determinants of Health**

**Accountable Health Communities Model | CMS**: The Accountable Health Communities Model addressed a critical gap between clinical care and community services in the current health care delivery system by testing whether systematically identifying and addressing the health-related social needs of Medicare and Medicaid beneficiaries through screening, referral, and community navigation services will impact health care costs and reduce health care utilization.

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[ACEs Aware](#): ACEs Aware strives to create a better world for our children, families, and communities by working together across sectors to prevent and address the impact of ACEs and toxic stress.

[ACEs & Toxic Stress | OSG](#): California is leading the way in preventing and addressing Adverse Childhood Experiences (ACEs) and the health impacts of toxic stress. The Office of the California Surgeon General is advancing systemic reforms that recognize and respond to the effects of ACEs on lifelong health, all driven by equity. We can address this public health crisis and lead a national movement.

[Agency of Health Research Quality: Medical Expenditure Panel Survey Background](#)

[The AHC Health-Related Social Needs Screening Tool](#): We at the Centers for Medicare & Medicaid Services (CMS) Center for Medicare and Medicaid Innovation (CMMI) created the Accountable Health Communities (AHC) Health-Related Social Needs (HRSN) Screening Tool for use in the AHC Model. We're testing whether systematically identifying and addressing the health-related social needs of Medicare and Medicaid beneficiaries affects their total healthcare costs and improves their health outcomes.

[American Association of Pediatrics: Bright Futures Tool Kit](#).

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[American Community Survey \(ACS\)](#): The American Community Survey (ACS) helps local officials, community leaders, and businesses understand the changes in their communities. It is the premier source for detailed population and housing information about our nation.

[American Housing Survey \(AHS\)](#): The AHS is sponsored by the Department of Housing and Urban Development (HUD) and conducted by the U.S. Census Bureau. The survey is the most comprehensive national housing survey in the United States.

[American Journal of Epidemiology | Oxford Academic: Assessing the Measurement Properties of Neighborhood Scales: From Psychometrics to Ecometrics](#)

[American Medical Association](#)

[American National Standards Institute](#)

[AMA Physician Professional Data™](#): Established by the American Medical Association (AMA) in 1906, the AMA Physician Professional Data™ includes significant education, training, and professional certification information on virtually all Doctors of Medicine (MD) and Doctors of Osteopathy (DO) in the United States, Puerto Rico, the Virgin Islands, and certain Pacific Islands.

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**AMCHP: Association of Maternal & Child Health Programs:** [House Committee Passes Funding for Maternal and Child Health Programs](#)

**[Analysis Prior Authorization in California](#):** Established by the American Medical Association (AMA) in 1906, the AMA Physician Professional Data™ includes significant education, training, and professional certification information on virtually all Doctors of Medicine (MD) and Doctors of Osteopathy (DO) in the United States, Puerto Rico, the Virgin Islands, and certain Pacific Islands.

**[API: What is an API \(Application Programming Interface\)](#):** API complete form is an Application Programming Interface that is a collection of communication protocols and subroutines used by various programs to communicate between them. A programmer can use multiple API tools to simplify their program.

**[Assessing Circumstances & Offering Resources for Needs](#):** ACORN is a national Veterans Health Administration (VHA) quality improvement initiative in partnership with the Office of Health Equity and the National Social Work Program, Care Management, and Social Work Services. ACORN aims to: ACORN aims to:

1) Systematically screen Veterans for health-related social needs in nine Domains.

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- 2) Provide clinical care teams real-time information about Veterans' unmet needs.
- 3) Address identified needs through the provision of resources and referrals.

### Assessment of Social-Emotional Development and Protective Factors?:

Optimal early childhood development has consistently been linked to Family Strengths and Protective Factors, including Parental Resilience, Social Connectedness, Knowledge of Parenting and Child Development, Concrete Support in Times of Need, and Social-Emotional Competence. These factors are known to reduce the negative impact of risk factors or adverse experiences, build resilience, and support environments that allow children to thrive.

About ASTP/ONC | HealthIT.gov: The Assistant Secretary for Technology Policy/Office of the National Coordinator for Health Information Technology (hereafter ASTP) is at the forefront of the administration's health IT efforts and is a resource to the entire health system to support the adoption of health information technology and the promotion of nationwide, standards-based health information exchange to improve health care. ASTP is organizationally located within the Office of the Secretary for the U.S. Department of Health and Human Services (HHS).

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ASTP is the principal federal entity charged with coordinating nationwide efforts to implement and use the most advanced health information technology and the electronic exchange of health information. The position of National Coordinator was created in 2004 through an Executive Order and legislatively mandated in the Health Information Technology for Economic and Clinical Health Act (HITECH Act) of 2009.

**ASU SHARES:** Better care is delivered when patients and providers can confidently communicate and share health information. SHARES introduces novel, standard-based, institution-independent, EHR-agnostic, and scalable sensitive health data segmentation methods and technology to improve data sharing, interoperability, service delivery, and patient outcomes for those with SUD.

**Augmentative and Alternative Communication (AAC):** Augmentative and alternative communication (AAC) describes multiple ways to communicate that can supplement or compensate (either temporarily or permanently) for the impairment and disability patterns of individuals with severe expressive communication disorders.

**Authentication vs. Authorization:** In simple terms, authentication verifies who a user is, while authorization verifies what they have access to. To compare these processes to a real-world example, when you go through security in an airport, you show your ID to authenticate your identity. Then, when you arrive at the gate, you present your boarding pass to the flight

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attendant so they can authorize you to board your flight and allow access to the plane.

[Azure Health Data Services? | Microsoft Learn](#): The FHIR® service in Azure Health Data Services enables rapid health data exchange using the Fast Healthcare Interoperability Resources (FHIR) data standard. As part of a managed Platform-as-a-Service (PaaS), the FHIR service makes it easy for anyone working with health data to securely store and exchange Protected Health Information (PHI) in the cloud.

### The FHIR service offers:

- Managed FHIR-compliant server, provisioned in the cloud in minutes.
- Enterprise-grade FHIR API endpoint for FHIR data access and storage.
- High performance, low latency.
- Secure Protected Health Information (PHI) management in a compliant cloud environment.
- SMART on FHIR for mobile and web clients.
- Controlled access to FHIR data at scale with Microsoft Entra role-based Access Control (RBAC).
- Audit log tracking for access, creation, and modification events within the FHIR service data store.

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The FHIR service allows you to quickly create and deploy an FHIR server to the cloud for ingesting, persisting, and querying FHIR data. The Azure services that power the FHIR service are designed for high performance, no matter how much data you're working with.

The FHIR API in the FHIR service enables any FHIR-compliant system to connect and interact with FHIR data securely. As a PaaS offering, Microsoft takes on the operations, maintenance, updates, and compliance requirements for the FHIR service so you can free up your own operational and development resources.

**Becker's Hospital Review:** [100 academic medical centers to know | 2025](#)

### **Benevolent Childhood Experiences (BCEs) Scale**

**Bright Futures:** Bright Futures is a national health promotion and prevention initiative, led by the American Academy of Pediatrics and supported, in part, by the [US Department of Health and Human Services, Health Resources and Services Administration \(HRSA\)](#), Maternal and Child Health Bureau (MCHB).

**FHIR Bundle:** One standard operation performed with resources is to gather a collection of resources into a single instance containing context. In FHIR, this is called "bundling" the resources together. These resource bundles are helpful for a variety of different reasons, including.

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- Returning a set of resources that meet some criteria as part of a server operation (see [RESTful Search](#)).
- Returning a set of versions of resources as part of the history operation on a server (see [History](#)).
- Sending a set of resources as part of a message exchange (see [Messaging](#)).
- Grouping a self-contained set of resources to act as an exchangeable and persistable collection with clinical integrity - e.g. a clinical document (see [Documents](#)).
- Creating/updating/deleting a set of resources on a server as a single operation (including doing so as a single atomic transaction) (see [Transactions](#)).
- Sending an event notification related to an active Subscription (see [Subscriptions](#)).
- Storing a collection of resources.

[Cal eProcure - CA.gov](#): Roster management service. The California Health and Human Services Agency (CalHHS), the Center for Data Insights and Innovation (CDII), is releasing this Request for Information (RFI) to explore opportunities to enhance health and social service information (HSSI) exchange across the state.

### Calendar Year (CY) 2025 Medicare Physician Fee Schedule Final Rule

**CalFresh: [Fruit and Vegetable Community Assessment](#)**

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[California Academy of Family Physicians: Healthy Harbors](#)

[California Data Exchange Framework: News & Events](#)

[California at the Forefront: Steering AI Towards Ethical Horizons:](#)

Artificial intelligence (AI) has emerged as a significant technological advancement, particularly in California. This state is a global leader in innovation and AI development, boasting 35 of the world's top 50 AI firms and holding a remarkable share of AI-related patents, scholarly articles, and corporate ventures worldwide. This quickly developing technology transforms industries and our daily experience, showcasing its wide-ranging impact and potential.

[California Health Care Foundation:](#) All Californians should be able to achieve their fullest health potential. CHCF is working with a wide range of partners to remove structural barriers to care and build a just and equitable healthcare system designed to redress, not perpetuate, the inequities that too many of our fellow Californians face.

[California Health Information Technology Landscape Assessment:](#) The Department of Health Care Services (DHCS) engaged the University of California's San Francisco (UCSF) Clinical Informatics Improvement and Research group in 2022 to research a subset of California's mental health, substance use disorder, and social service organizations to help assess their

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basic data exchange capabilities. Cross-Sector Comparisons of Data The presentation is organized in the following seven sections: The following presentation summarizes the information collected in that work and provides an early picture of the wide variability in levels of health information technology (HIT) adoption, structured data capture, and cross-sector data exchange capacity across those organizations.

**CalHHS IT and Data Strategic Plan:** Envision a future where every Californian is proactively made aware of and seamlessly connected to a comprehensive, inclusive, and equitable set of health and human services matched to their holistic needs. Imagine a connected network of state, local, and community providers; an ecosystem of coordinated services; and the secure, appropriate use of comprehensive demographic, socioeconomic, encounter, and outcomes data to generate insights that drive equitable policies, programs, and service delivery. This is how technology and data can support the CalHHS mission.

### **California Surgeon General's Report | OSG: Roadmap for Resilience:**

Roadmap for Resilience serves as a blueprint for how communities, states, and nations can recognize and effectively address Adverse Childhood Experiences (ACEs) and toxic stress as a root cause of some of the most harmful, persistent, and expensive societal and health challenges facing our world today. The report provides clear cross-sector and equitable response solutions, models, and best practices to be replicated or tailored to serve community needs. This comprehensive report combines insights from

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global experts across sectors, specialties, and disciplines to promote science-based approaches to primary, secondary, and tertiary prevention strategies for ACEs and toxic stress. The report further specifies a sector-specific and cross-sector roadmap for addressing ACEs and toxic stress at the state level, prioritizing prevention, early detection, evidence-based interventions, and equity in outcomes, highlighting the need for enhanced coordination across the following sectors: healthcare; public health; social services; early childhood; education; and justice.

**CA State Digital Equity Plan:** The State of California has taken a significant step toward closing the digital divide with the release of the State Digital Equity Plan. The plan will allow the state to apply for a Digital Equity Capacity Grant funded by the Digital Equity Act, part of the bipartisan Infrastructure Investment and Jobs Act (IIJA) of 2021.

**FHIR-candle:** A small in-memory FHIR server is used for testing and development. It is not intended for production workloads. The project is designed to serve as a platform for rapid growth and FHIR testing, both for core specification features and for developing the Implementation Guide. While many OSS FHIR servers exist, somewhere between most and all, they are intended to support production workloads.

- No database / persisted state.
- Fast startup.
- Dynamically apply changes (e.g., search parameters).

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- House features that would not be appropriate in production.
- E.g., provide feedback on SMART tokens to help developers.

**Carequality:** Our interoperability framework connects health information networks throughout the country, changing the way health data is exchanged in the U.S.

### **CBHDA: County Behavioral Health Directors Association of California**

**(CBHDA):** The County Behavioral Health Directors Association of California (CBHDA) is a nonprofit advocacy association representing the behavioral health directors from each of California's 58 counties and two cities (Berkeley and Tri-City).

**C-CDA Healthcare Data Format?:** C-CDA stands for Consolidated Clinical Document Architecture. It's the most widely used format for health information exchange in the US today. Each patient encounter in the healthcare system can be represented by a single document in the Clinical Document Architecture (CDA) style. Hundreds of these documents can be generated for an individual when they encounter the healthcare system. C-CDA is a slightly newer standard that established stricter rules for the structure, encoding, and semantics of clinical documents to make them more exchangeable.

**CDC: National Environmental Public Health Tracking Network Data Explorer**

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## CDII: Data Exchange Framework

**CDS Hooks:** This specification describes a "hook"-based pattern for invoking decision support within a clinician's workflow. The API supports.

- Synchronous, workflow-triggered CDS calls returning information and suggestions
- Launching a user-facing SMART app when CDS requires additional interaction.

## Chat FHIR

**CHCF: ImprovingPriorAuthProcess.pdf:** Prior authorization (PA) is a utilization management (UM) tool used by health plans and risk-bearing medical groups to discourage inappropriate, low-value, or unsafe care and ensure that patients receive services covered by their benefit plan and delivered by a contracted provider.

- **CHCF Blog:**  
<https://www.chcf.org/resource/californians-need-strong-data-sharing-lower-health-costs-improve-care>
- **CHCF Report:**  
<https://www.chcf.org/resource/health-data-exchange-drives-efficiency-cuts-costs/>

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## [Children's Health Watch Survey](#)

## [CHIS: California Health Interview Survey](#)

**Civitas Resources:** Civitas is an industry leader in sustainable operations. Caring for our environment, employees, and communities is critical to our role as an energy producer. Civitas is Colorado's first carbon-neutral oil and gas producer, and we are committed to leading the transition to a low-carbon future by demonstrably reducing our emissions across our operations and continuing to partner with the local communities our employees call home.

## [Clinical Order Workflow: Gravity Project](#)

## [Clinical Trial Carbon Calculator](#)

**CMS Innovation Center:** The CMS Innovation Center's models are **alternative payment models (APMs)** which reward health care providers for delivering high-quality and cost-efficient care. APMs can apply to a specific:

- Health condition, like end-stage renal disease.
- Care episode, like joint replacement.
- Provider type, like primary care providers.
- Community, like rural areas.

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- **Innovation within Medicare Advantage or Medicare Part D.**

CMS: [Calendar Year \(CY\) 2025 Medicare Physician Fee Schedule Final Rule](#)

CMS: [Interoperability Framework](#)

**[CMS Interoperability and Patient Access Final Rule \(CMS-9115-F\)](#)**: The Centers for Medicare & Medicaid Services (CMS) published the Interoperability and Patient Access Final Rule on May 1, 2020, putting patients first, giving them access to their health information when they need it most and in a way, they can best use it. This final rule focused on driving interoperability and patient access to health information by liberating patient data using CMS authority to regulate Medicare Advantage (MA), Medicaid, Children's Health Insurance Program (CHIP), and Qualified Health Plan (QHP) issuers on the Federally Facilitated Exchanges (FfEs).

**[CMS Interoperability and Prior Authorization Final Rule \(CMS-0057-F\)](#)**:

The Centers for Medicare & Medicaid Services (CMS) released the CMS Interoperability and Prior Authorization Final Rule (CMS-0057-F) on January 17, 2024. This final rule emphasizes improving health information exchange to achieve appropriate and necessary access to health records for patients, healthcare providers, and payers. It also focuses on improving prior authorization processes through policies and technology to help ensure that patients remain at the center of their care.

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CMS: [White House, Tech Leaders Commit to Create Patient-Centric Healthcare Ecosystem](#)

[Coding4Food — California Medically Supportive Food & Nutrition](#)

[Coding 4 Food | Coding4Food HCPCS \(WIP\)](#)

**[Command Line Interface \(CLI\)?](#)**: CLI is a command-line program that accepts text input to execute operating system functions. In the 1960s, using only computer terminals was the only way to interact with computers. In the 1970s and 1980s, Unix and PC systems like MS-DOS and Apple DOS commonly used command line input. Today, with graphical user interfaces (GUI), most users never use command-line interfaces (CLI). However, software developers and system administrators still use the CLI to configure computers, install software, and access features not available in the graphical interface.

**[Common Health Coalition | ChangeLab Solutions](#)**: The Common Health Coalition brings together leading healthcare organizations in pursuit of a reimagined health system — one in which the nation’s healthcare and public health systems no longer operate in parallel but work hand in hand with better health for all as the common goal.

**[Common Help](#)**: Learn how assistance benefits can work for individuals and families.


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## Community Meeting Materials: Gravity Project

### Connecting for Better Health:

-  Overview of HT1-2 Proposed rule. ASFR Proposed Rule ASTP-O...
- C4BH  
Infographic:<https://connectingforbetterhealth.com/wp-content/uploads/2025/07/C4BH-Shared-Data-Purpose-July-2025.pdf>
- C4BH Sandbox: Design Studio

Consent - FHIR v6.0.0-ballot2: The purpose of this resource is to express consent regarding healthcare. There are three anticipated uses for the Consent Resource, all of which are written or verbal agreements by a healthcare consumer grantor or a personal representative, made to an authorized entity grantee concerning authorized or restricted actions with any limitations on the purpose of use, and handling instructions to which the authorized entity must comply.

- **Privacy Consent Directive: Agreement:** Restriction or Prohibition to collect, access, use, or disclose (share) information.
- **Medical Treatment Consent Directive:** Consent to undergo a specific treatment (or record of refusal to consent).
- **Research Consent Directive:** Participation in research protocol and information sharing is required. This resource is scoped to cover all

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three uses and specified via the Category element, but at this time, only the privacy use case is fully modeled; others are being used, but no formal modeling exists. Other use cases are possible through the use of other category codes. The resource scope may change when the other possible scopes are investigated, tested, or profiled. Having multiple-scoped consent in one Consent resource (e.g., Privacy and Research, Research and Treatment, etc.) is possible by pairing multiple provision trees.

### Consent Management Processes for Implementation of Data Exchange and CalAIM - California Health Care Foundation:

California is at the forefront of breaking down health care and social services delivery barriers by promoting collaboration across sectors for better overall health.

Professionals understand that to provide the best care, they need a complete understanding of a patient's physical and mental health, education, housing, and social history. Access to data enables the provision of tailored and coordinated care.

### Consent-to-Share: California's Opportunity to Modernize Cross-Sector Data Sharing:

California is at the forefront of breaking down barriers to health care and social services delivery by promoting collaboration across sectors to improve overall health. Professionals understand that to provide the best care, they need a complete understanding of a patient's physical and mental health, education, housing, and social history. Access to data enables the provision of tailored and coordinated care.

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**Covered California:** [Covered California Starts Innovative Program to Improve Population Health](#)

**Covered California:** [Data & Research](#)

**Covered California:** [Health Plan Performance Report](#)

**Covered California:** [Taking Away Enhanced Premium Tax Credits Substantially Undermines Affordable Coverage for Communities of Color](#)

**[Crossover Billing Provider Toolkit](#):** Whether you see patients under Original Medicare (fee-for-service) or Medicare Advantage (MA) plans, this toolkit is designed to give physicians like you information about how Medicare billing works under Medi-Cal managed care and how to submit crossover claims to Medi-Cal plans for Medicare patients.

**[Cross-Sector Data Sharing: HIPAA Considerations for Data Exchange between Health Care Entities and Community-Based Organizations -](#)**

**[Connecting for Better Health](#):** Under the CalHHS Health and Human Services Data Exchange Framework (DxF), participating entities are required to exchange health and social services information with other participants. Some participants may be covered entities under the Health Insurance Portability and Accountability Act (HIPAA), such as general acute care hospitals, physician organizations, skilled nursing facilities, and health

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plans. In contrast, others may not be, such as community-based organizations (CBOs) and social services organizations (SSOs) providing social and health-related services.

**Data Exchange Framework (DxF) Glossary of Defined Terms:** This Data Exchange Framework (DxF) Glossary of Defined Terms includes the definitions used in the Data Sharing Agreement (DSA) and its Policies and Procedures (P&Ps). These definitions have been aggregated here in this Glossary as a central library of defined terms for those seeking such a reference. Each definition is presented along with a list of the document(s) in which the definition appears.

### **Data Exchange Framework Implementation Toolkit - Connecting for Better Health**

**DaVinci Codex:** This Implementation Guide is supported by the Da Vinci initiative, which is a private effort to accelerate the adoption of Health Level Seven International Fast Healthcare Interoperability Resources (HL7® FHIR®) as the standard to support and integrate value-based care (VBC) data exchange across communities. Like all Da Vinci Implementation Guides, it follows the HL7 Da Vinci Guiding Principles for exchanging patient health information. The guide is based on prior work from the US Core and Da Vinci Health Record Exchange (HREx) Implementation Guides. Changes to this specification are managed by the sponsoring HL7 Patient

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Care (PC) workgroup and are incorporated as part of the standard HL7 balloting process.

**Da Vinci Project:** Interoperability challenges have limited many stakeholders in the healthcare community from achieving better care at a lower cost. The dual challenges of data standardization and easy information access compromise the ability of both payers and providers to create efficient care delivery solutions and effective care management models. The Da Vinci project aims to help payers and providers positively impact clinical quality, cost, and care management outcomes.

**Define and use terms like Screening and Assessment consistently:** This guide mentions the terms screening, assessment, screening assessment, assessment tools, and judgment without a clear definition or entirely consistent use throughout. These terms must be defined for the reader and used consistently throughout the IG. Depending on the industry's scope of use, “assessment” may have different meanings. It could be considered part of a process to make an assertion/determination or the assertion/determination itself.

**DHCS: CLOSED-LOOP REFERRAL IMPLEMENTATION GUIDANCE:**  
**070725-Stakeholder-News**

**DirectTrust:** DirectTrust establishes trust in a connected world to improve patient care.

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**Docker Hub**: Everything you need to build, scale, and quickly deploy AI.

**DxF Data Exchange Framework Community Sandbox**: Built for the community, the DxF Community Sandbox is a dynamic learning environment that supports organizations participating in California's Data Exchange Framework in securely and rapidly testing, collaborating, and scaling new workflows to realize the full value and promise.

**DxF Participant Directory - How-To Guide**:

**Effectiveness of Social Needs Screening and Interventions in Clinical Settings on Utilization, Cost, and Clinical Outcomes: A Systematic Review - PubMed**

**eHealth Exchange**: A “network of networks,” eHealth Exchange connects healthcare providers, regional and state health information exchanges, public health authorities, payers, and federal agencies to exchange medical data and improve patient care and public health.

**Elevance Health**: Elevance Health combines the concepts of elevate and advance, exemplified by our bold purpose of improving humanity's health. We are a health company dedicated to making real progress toward improving the health of the people and communities we serve.

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**EPA: Our Built and Natural Environments:** Our Built and Natural Environment articulates the relationship between the built environment and the quality of air, water, land resources, habitat, and human health. It also provides evidence that certain kinds of land use and transportation strategies can reduce the environmental and human health impacts of development.

**Epic's EHR Optimization Mitigates SDOH, Promotes Care Coordination:** Health IT services can help providers address the social determinants of health and foster care coordination across the healthcare continuum.

**Epic Nursing Collaborative Tackles Care Challenges:** Combined best practices improve patient care and enable research.

**Equitable Long-Term Recovery and Resilience:** The Federal Plan for Equitable Long-Term Recovery and Resilience (Federal Plan for ELTRR) lays out an approach for federal agencies to cooperatively strengthen the vital conditions necessary for improving individual and community resilience and well-being nationwide.

**Evidence-Based Risk Assessment:** A knowledge framework for medical manual revision, competitive underwriting, accurate risk assessment, and precision decision making.

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### Fact sheet CMS Interoperability and Prior Authorization Final Rule

**CMS-0057-F:** The Centers for Medicare & Medicaid Services (CMS) affirms its commitment to advancing interoperability and improving prior authorization processes with the publication of the CMS Interoperability and Prior Authorization final rule (CMS-0057-F). Through the provisions in this final rule, Medicare Advantage (MA) organizations, state Medicaid and Children’s Health Insurance Program (CHIP) Fee-for-Service (FFS) programs, Medicaid managed care plans, and CHIP managed care entities. Qualified Health Plan (QHP) issuers on the Federally Facilitated Exchanges (FfEs), (collectively “impacted payers”) are required to implement and maintain certain Health Level 7® (HL7®) Fast Healthcare Interoperability Resources® (FHIR®) application programming interfaces (APIs) to improve the electronic exchange of health care data, as well as to streamline prior authorization processes. To encourage providers to adopt electronic prior authorization processes, this final rule also adds a new measure for Merit-based Incentive Payment System (MIPS) eligible clinicians under the Promoting Interoperability performance category of MIPS, as well as for eligible hospitals and critical access hospitals (CAHs), under the Medicare Promoting Interoperability Program.

**FAIR Data Principles at NIH and NIAID:** The FAIR data principles are a set of guidelines aimed at improving the Findability, Accessibility, Interoperability, and Reusability of digital assets.

### Family Resilience and Connection Promote Flourishing Among US

**Children, Even Amid Adversity | Health Affairs:** The outcome of  
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flourishing and its predictors have not been well documented among US children, especially those who face adversity. Using data for 2016 and 2017 from the National Survey of Children's Health, we determined the prevalence and predictors of flourishing among US children ages 6–17.

**FAST Ecosystem:** FAST identifies ecosystem-wide barriers to deploying Fast Healthcare Interoperability Resources (FHIR) at scale, defines solutions to address those barriers, and develops infrastructural standards to support FHIR implementations. The desired outcome is a national API interoperability approach that enables consistent clinical data exchange using FHIR.

**Federal Plan for Equitable Long-term Recovery and Resilience for Social, Behavioral, and Community Health Recommendations**

**Federal Register : Request for Nominations of Members To Serve on the Healthcare Advisory Committee**

**FindHelp:** This may require authorized access.

**Firely: The official .NET SDK for HL7 FHIR:** Firely .NET SDK provides tools and libraries that make it easier for developers to work with FHIR resources in .NET applications. It's open source and can be downloaded from the GitHub repository. It is regularly updated to keep up with the latest developments in the FHIR standard.

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## [Fruit and Vegetable Community Assessment](#)

## [Full-CHW-Survey-English.pdf](#)

## [Gravity-Accepted Social Risk Screening Assessment Instruments](#)

### [Gravity Project Data Principles Overview: | Meeting Schedule](#)

- [Oct 6, 2025: 9.10.25 Meeting Minutes](#)  
[Clinical Care SDOH IG](#)
- [Community and Implementer Support](#)
- [Gravity Project: Terminology Overview](#)

**[GENEROUS \(GENERating cost Reductions fOr U.S. Medicaid\) Model](#)**: The GENEROUS (GENERating cost Reductions fOr U.S. Medicaid) Model aims to ensure fair and reasonable drug prices for Medicaid through CMS-led negotiations with drug manufacturers. Under the GENEROUS Model, manufacturers will provide supplemental rebates to participating states for drugs included in the model to align Medicaid net prices with what certain other countries pay. The model will launch in January 2026 and run for five years and is voluntary for manufacturers and states. CMS has released the [Request for Applications \(RFA\)](#) for manufacturers interested in participating in the model.

**[HAPI FHIR](#)**: This is the homepage for the HAPI-FHIR library. We are developing an open-source implementation of the FHIR specification in

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Java. FHIR (Fast Healthcare Interoperability Resources) is a specification for exchanging healthcare data in a modern and developer-friendly way. Note that this is the home for the FHIR version of HAPI. For HL7 v2 support, see Hapi-hl7v2 .

### [HCHAI: California Data Exchange Framework Senate Bill 660 Implementation](#)

[HCPCS Codes](#) | [CMS](#): We maintain and annually update a List of Current Procedural Terminology (CPT)/Healthcare Common Procedure Coding System (HCPCS) Codes (the Code List), which identifies all the items and services included within certain designated health services (DHS) categories or that may qualify for certain exceptions. We update the Code List to conform to the most recent publications of CPT and HCPCS codes and to account for changes in Medicare coverage and payment policies. Code List updates for 2022 and earlier were published in the Federal Register as an addendum to the annual Physician Fee Schedule final rule.

Beginning with the Code List, effective January 1, 2023, updates are published solely on this webpage. On or before December 2nd of each year, we will publish the annual update to the Code List and provide a 30-day public comment period using [www.regulations.gov](http://www.regulations.gov). To be considered, comments must be received within the stated 30-day timeframe. We anticipate that most comments will be addressed by April 1st; however, a more extended timeframe may be necessary to address complex comments

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or those that require coordination with external parties. If no comments are received, we will publish a note below the applicable Code List year stating so instead of a comment response.

**HCPCS Coding Options for ECM and Community Supports:** Enhanced Care Management (ECM) and Community Support are foundational components of the Department of Health Care Services (DHCS) Medi-Cal transformation. At the start of these programs, DHCS developed guidance to standardize information exchange between Managed Care Plans (MCPs) and ECM and Community Supports Providers, as well as between MCPs and DHCS. This document contains the DHCS-established Healthcare Common Procedure Coding System (HCPCS) codes that must be used to document the rendering of ECM & Community support services in MCP encounters. **HCPCS Level I & HCPCS Level II**

**HealthBegins:** HealthBegins draws on years of direct, real-world experience and nationally recognized expertise to help clients design bold, concrete strategies to move upstream. Through goal-directed strategic consulting and our Upstream Investment Planning tools, we help you refine your upstream strategy's business case and value propositions, set goals, assign metrics, and track your performance as you improve social drivers of health and equity at all levels.

**Health Equity Policy Hub:** The Health Equity Policy Hub transforms information into action. We help individuals, organizations, and

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communities quickly understand policy shifts, their impact on health equity, and how to respond effectively. Our Mobilization Network equips change-makers with the tools and resources needed to drive meaningful action.

**Health information technology (HIT):** Health information technology (HIT) systems designed to facilitate delivery, management, and payment have become pervasive throughout the U.S. health care system. One of the more common forms of HIT is the electronic health record (EHR), one which has a wide array of uses, ranging from clinical support functions, digital prescriptions, and automated medication dispensing, to functions related to billing, reimbursement, and administration, to patient safety and quality improvement (Alexander and Madsen, 2018; Cherry et al., 2011; Kruse et al., 2017; Rantz et al., 2010a; Scott et al., 2017; Shiells et al., 2019).

**Health Net Federal Services:** HNFS has proudly served as a leader in healthcare administration, consistently delivering innovative, high-quality service to millions of members. Built on a foundation of integrity, dedication, and commitment to those we serve, HNFS has earned a legacy of excellence.

**Health Resources and Services Administration: HRSA**

**HEDIS—NCQA:** The Healthcare Effectiveness Data and Information Set (HEDIS) is one of the healthcare industry's most widely used performance

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improvement tools. More than 235 million people are enrolled in plans that report HEDIS results.

### HHS, CMS Set Most-Favored-Nation Pricing Targets to End Global

Freeloading on American Patients: HHS expects each manufacturer to commit to aligning US pricing for all brand products across all markets that do not currently have generic or biosimilar competition with the lowest price of a set of economic peer countries. The MFN target price is the lowest price in an OECD country with a GDP per capita of at least 60 percent of the U.S. GDP per capita. These targets will drastically bring down U.S. drug prices, which are often three to five times higher than prices abroad, while preserving innovation by simply ensuring that Americans bear no greater burden than patients receiving the same drugs in other countries.

### HHS Finalizes Rule to Advance Health IT Interoperability and Algorithm

Transparency: The U.S. Department of Health and Human Services (HHS), through the Office of the National Coordinator for Health Information Technology (ONC), today finalized its Health Data, Technology, and Interoperability: Certification Program Updates, Algorithm Transparency, and Information Sharing (HTI-1) rule. This follows the release of the HTI-1 proposed rule in April 2023. The HTI-1 final rule advances patient access, interoperability, and standards, including the following:

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### **HITECH Act: Health Information Technology for Economic and Clinical**

**Health Act:** Many provisions of the 21st Century Cures Act (Cures Act) will improve the flow and exchange of electronic health information. ONC is responsible for implementing those parts of Title IV that are related to advancing interoperability, prohibiting information blocking, and enhancing the usability, accessibility, privacy, and security of health IT. ONC ensures that all individuals, their families, and their healthcare providers have appropriate access to electronic health information to help improve the overall health of the nation's population.

- The Cures Act supports medical research, advances interoperability, clarifies HIPAA privacy rules, and supports substance abuse and mental health services. It defines interoperability as the ability to exchange and use electronic health information without special effort on the user's part and does not constitute information blocking.

### **ONC focuses on the following provisions as we implement the Cures Act:**

- Section 4001: Health IT Usability.
- Section 4002(a): Conditions of Certification.
- Section 4003(b): Trusted Exchange Framework and Common Agreement.
- Section 4003(e): Health Information Technology Advisory Committee.
- Sec 4004: Identifying reasonable and necessary activities that do not constitute information-blocking.

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## HMIS - Homeless Management Information System

Homelessness Program Data Reporting | California Department of Housing and Community Development: According to Assembly Bill 977 (AB 977), the State of California requires grantees of state-funded homelessness programs to enter specific data elements related to individuals and families into their local Homeless Management Information System (HMIS).

Hospital Inpatient Quality Reporting Program | CMS: The Hospital Inpatient Quality Reporting (IQR) Program is a pay-for-reporting program for acute care hospitals. Under this program, CMS requires hospitals in subsection (d) to submit data on quality measures to CMS each year. Under subsection (d), acute care hospitals are paid under the Inpatient Prospective Payment System. Subsection (d) hospitals exclude the following types of hospitals: children's, inpatient psychiatric, long-term care, rehabilitation hospitals, and the 11 Prospective-Payment System-exempt cancer hospitals.

Data collected under the Hospital IQR Program is publicly available to consumers and providers on the Care Compare website at <https://www.medicare.gov/care-compare/?providerType=Hospital>. This data transparency helps consumers make more informed decisions about healthcare options and encourages hospitals and clinicians to improve the quality of inpatient care provided to all patients.

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### HTI-1 Final Rule Overview Health Information Technology Advisory Committee (HITAC) January 18, 2024 Meeting:

The materials contained in this presentation about the "Health Data, Technology, and Interoperability: Certification Program Updates, Algorithm Transparency, and Information Sharing" (HTI-1) Final Rule are based on the document that has been published in the Federal Register on January 9, 2024, which amends provisions contained in 45 C.F.R. Parts 170 and 171. While every effort has been made to ensure the accuracy of this restatement of those provisions, this presentation is not a legal document. The final rule contains the official clauses and 45 C.F.R. Parts 170 and 171. Please note that other Federal, state, and local laws may apply.

### ICD-10 Coordination and Maintenance Committee Meeting 3.2024

Indian Health Service: The Indian Health Service (IHS) is an agency within the Department of Health and Human Services that provides federal health services to American Indians and Alaska Natives.

Inferno on HealthIT.gov: This is a public service for running select FHIR conformance tests built with Inferno. It includes tests relevant to the ONC Health IT Certification Program and tests targeting other popular FHIR Implementation Guides.

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### The Inflation Reduction Act's Benefits and Costs | U.S. Department of the

Treasury: The Inflation Reduction Act (IRA) represents the United States' biggest investment to date in fighting climate change. In recent months, we have considered two important economic aspects of the IRA: its role as a pro-growth policy that expands our economy while reducing greenhouse gas emissions, and its role as a place-based policy that directs climate investments to parts of the country that have been historically reliant on the fossil fuel economy and that have relatively low wages, employment, and college graduation rates.

Interactive response technology (IRT) solution: The gene therapy world is rapidly evolving. Sponsors are working diligently to learn how to use best practices in trials to improve healthcare from the youngest to the eldest patient across various indications. IQVIA IRT people, processes, and technologies have already earned a place at the forefront of helping clients inaugurate bold new cell and gene therapy research programs with reliable technology configurable and customizable throughout the entire study lifecycle.

### International Classification of Functioning, Disability, and Health (ICF):

The International Classification of Functioning, Disability, and Health, known more commonly as ICF, is a classification of health and health-related domains. Because an individual's functioning and disability occur in a context, the ICF also includes a list of environmental factors.

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ICF is the WHO framework for measuring health and disability at the individual and population levels. On 22 May 2001, all 191 WHO Member States officially endorsed it in the Fifty-fourth World Health Assembly (resolution WHA 54.21) as the international standard for describing and measuring health and disability. ICF is based on the same foundation as ICD and ICHI and shares the same set of extension codes that enable documentation at a higher level of detail.

**Iqvia:** [Drug Expenditure Dynamics 2000–2022](#)

**[Jira | Issue & Project Tracking Software | Atlassian](#):** The only project management tool you need to plan and track work across every team.

**[Journal of Agriculture, Food Systems, and Community Development: View of Valuing All Knowledges Through an Expanded Definition of Access](#)**

**[JSON-LD](#):** Is a method of encoding linked data using JSON. One goal for JSON-LD was to require as little effort as possible from developers to transform their existing JSON to JSON-LD. JSON-LD allows data to be serialized in a way that is similar to traditional JSON. The JSON was initially developed for the Linking Data Community Group before being transferred to the RDF Working Group for review, improvement, and standardization, and is currently maintained by the JSON-LD Working Group.

**[Lawyers Committee for Civil Rights Under the Law: Protecting and Advancing DEI Pro Bono Initiative - Initial Intake Form](#)**

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**LHPC Institute - Local Health Plans of California:** The LHPC Institute was created by local plan leaders to serve as a resource dedicated to fostering collaboration among their plans and providing educational opportunities that develop and expand the knowledge and capacity of local plan staff. The Institute accomplishes this by offering an ever-growing catalog of enriching educational courses carefully tailored by our members and Advisory Group to promote continued quality, leadership, and operational excellence across local health plans. Program offerings cover various topics for staff at all levels and across multiple departments and allow staff to network and connect with colleagues from local health plans statewide.

**LIHEAP: Low Income Home Energy Assistance Program (LIHEAP) | The Administration for Children and Families:** The Low Income Home Energy Assistance Program (LIHEAP) helps keep families safe and healthy through initiatives that assist families with energy costs. LIHEAP provides federally funded assistance to reduce the costs associated with home energy bills, energy crises, weatherization, and minor energy-related home repairs. LIHEAP can help you stay warm in the winter and cool in the summer through programs that reduce the risk of health and safety problems that arise from unsafe heating and cooling situations and practices.

**LIHEAP Clearinghouse:** State Snapshot

**LIWAP: Low Income Household Water Assistance Program | The Administration for Children and Families:** The Low Income Household  
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Water Assistance Program (LIHWAP) provides funds to assist low-income households with water and wastewater bills. Grants were available to states, the District of Columbia, the Commonwealth of Puerto Rico, U.S. territories, and federally and state-recognized Indian Tribes and tribal organizations that received fiscal year (FY) 2021 Low Income Home Energy Assistance Program (LIHEAP) grants.

**Logic Model Behind Health Care's Social Care Investments - GOTTLIEB - 2024 - The Milbank Quarterly - Wiley Online Library:** This article summarizes recent evidence on how increased awareness of patients' social conditions in the healthcare sector may influence health and healthcare utilization outcomes.

Using this evidence, we propose a more expansive logic model to explain the impacts of social care programs and inform future social care program investments and evaluations.

**LOINC:** Reference labs, healthcare providers, government agencies, insurance companies, software and device manufacturers, researchers, and consumers worldwide use LOINC to identify data and seamlessly transfer it between systems. **LOINC Document Ontology**

**Los Angeles Network for Enhanced Services (LANES):** A nonprofit QHIO supporting Los Angeles healthcare organizations with Data Exchange Framework compliance for enhanced health information accessibility.

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**Meaningful use? | HealthIT.gov:** To qualify for incentive payments through the Centers for Medicare & Medicaid Services EHR Incentive Programs, eligible providers and hospitals must demonstrate meaningful use of an electronic health record (EHR). In other words, “meaningful use” sets the specific objectives that eligible professionals and hospitals must achieve to participate in the EHR Incentive Programs.

**Medical Device | Labmate Online:** ISO 13485 is, like ISO 9001, a statement of quality and, even more importantly, traceability, like GMP is for pharmaceuticals. This means that the equipment manufacturer can trace every component back to the source of the finished product and attest to its quality and safety. It also means a process is in place to ensure that quality is maintained through robust processes and testing. An important consideration is that the equipment stores expensive and essential blood products required for life-saving treatments.

**Medical Expenditure Panel Survey: Social and Health Experiences Survey**

**Medical Nutrition Therapy Act:** According to the CDC's National Center for Chronic Disease Prevention and Health Promotion, 90% of the nation's \$3.5 trillion annual healthcare expenditures is spent on treating chronic and mental health conditions. Care for individuals with multiple chronic conditions is incredibly costly in the Medicare population, with more than two-thirds of Medicare beneficiaries having various chronic conditions.

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**Medicare-Health-Equity-Services-PFS-Jan-2024: MLN9201074 - Health Equity Services in the 2024 Physician Fee Schedule Final Rule:** “We define health equity as “the attainment of the highest level of health for all people, where everyone has a fair and just opportunity to attain their optimal health regardless of race, ethnicity, disability, sexual orientation, gender identity, socioeconomic status, geography, preferred language, and other factors that affect access to care and health outcomes.”

**Modernizing Consent to Advance Health and Equity:** In early 2021, the Stewards of Change Institute (SOCI) held an online symposium, in partnership with the Stanford University Center for Population Health Sciences, that culminated a yearlong, highly collaborative initiative titled “The National Action Agenda to Advance Upstream Social Determinants and Health Equity” (NAA).

**The People and Nature Survey For England - PANS001**

**National Energy Assistance Referral | The LIHEAP Clearinghouse:** Email us at [energyassistance@ncat.org](mailto:energyassistance@ncat.org) to access the LIHEAP Clearinghouse's National Energy Assistance Referral (NEAR) project. NEAR is a free service for people who want information on where to apply for the Low Income Home Energy Assistance Program (LIHEAP), which may pay a portion of the energy bills of eligible low-income people. Please include your city,

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county, and state in your email message. Or, call NEAR toll-free at 1-866-674-6327 for an energy assistance referral.

### National Institutes of Health (NIH)

### National Institute of Justice: Innovations in Measuring Community Perceptions Challenge

**National Uniform Claim Committee—Provider Taxonomy:** The Health Care Provider Taxonomy code set is an external, nonmedical data set designed for use in an electronic environment, specifically within the ASC X12N Healthcare transactions, which include the transactions mandated under HIPAA. The Health Care Provider Taxonomy code is a unique alphanumeric code that is ten characters long. The code set is structured into three distinct "Levels," including Provider Grouping, Classification, and Area of Specialization.

The National Uniform Claim Committee (NUCC) maintains the code set. It is used in transactions specified in HIPAA and the National Provider Identifier (NPI) application for enumeration. Effective in 2001, the NUCC took over the administration of the code set. Ongoing duties, including processing taxonomy code requests and maintaining the code set, fall under the NUCC Code Subcommittee.

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**NCQA:** The National Committee for Quality Assurance (NCQA) exists to improve health care quality. We work for better health care, better choices, and better health.

**NEMS-P Survey FINAL 11.24 (32328 - Activated, Traditional)**

**New York is on the brink of a Far-Reaching New Health Data Privacy Law:**

**Our Takeaways:** On January 22, 2025, the New York Assembly passed Senate Bill S929, the New York Health Information Privacy Act (NYHIPA). The bill now awaits the signature of Governor Kathy Hochul. This expansive new legislation would make New York the fourth state, after **Washington**, **Nevada**, and **Connecticut**, to impose targeted and comprehensive regulations on consumer health-related information that HIPAA does not otherwise protect. As with those laws, NYHIPA is notable for its expansive definition of regulated health information (RHI) and imposition of strict consent requirements on specific uses of such data and sharing with third parties.

**NIH: Residential Green Space Quantity and Quality and Child Well-being: A Longitudinal Study - PubMed**

**NIST SP 800-63-4: Digital Identity Guidelines:** These guidelines cover identity proofing, authentication, and federation of users (such as employees, contractors, or private individuals) interacting with government information systems over networks. They define technical requirements in

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each of the areas of identity proofing, enrollment, authenticators, management processes, authentication protocols, federation, and related assertions. They also offer technical recommendations and other informative text intended as helpful suggestions. The guidelines are not intended to constrain the development or use of standards outside of this purpose. This publication supersedes NIST Special Publication (SP) 800-63-3.

**No Wrong Door:** A NWD System provides a coordinated way for people to access services in the community so that you only have to tell your story once. **Who uses the NWD System? Resources:**

- Older adults who need meals delivered or help around the home.
- Person with a disability who needs transportation services.
- Veterans in need of support to complete daily tasks.
- Caregiver looking for support for their loved one.
- Anyone seeking long-term services and supports regardless of age, income, or disability.

**Office of Community Services (OCS) | The Administration for Children and Families:** The Office of Community Services (OCS) partners with states, tribes, territories, and non-profit and community-based organizations to reduce the causes and consequences of poverty, increase opportunity and economic security of individuals and families, and revitalize communities.

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Our social service and community development programs work in various ways to improve the lives of many.

**ONC Certification (g)(10) Standardized API Test Kit:** The ONC Certification (g)(10) Standardized API Test Kit is a testing tool for Health IT systems seeking to meet the requirements of the Standardized API for Patient and Population Services criterion § 170.315(g)(10) in the ONC Certification Program. It is an approved test method for the § 170.315(g)(10) test procedure. Systems may adopt later versions of standards than those named in the rule as approved by the ONC Standards Version Advancement Process (SVAP). Please note that US Core Implementation Guide v.7.0.0 should only be used with SMART App Launch Guide v2.0.0 or above due to granular scope support requirements within this version of US Core.

**ONC Health IT Certification Program | HealthIT.gov:** The Office of the National Coordinator for Health Information Technology (ONC) Health IT Certification Program (Certification Program) is a voluntary certification program established by the ONC to provide health IT certification. Requirements for certification are established by standards, implementation specifications, and certification criteria adopted by the Secretary of the Department of Health and Human Services (HHS). The Certification Program supports the availability of certified health IT for its encouraged and required use under other federal, state, and private programs. The Certification Program is run as a third-party product conformity assessment scheme for health information technology (health IT) based on the

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principles of the International Standards Organization (ISO) and International Electrotechnical Commission (IEC) framework.

Launched in 2010, the Certification Program supports the Promoting Interoperability (PI) Programs (previously Medicare and Medicaid EHR Incentive Programs) administered by the Centers for Medicare & Medicaid Services (CMS). While the PI Programs continue to require certified health IT, certified health IT has expanded to other government and non-government programs. The Certification Program has released three editions of certification criteria and regulations for new/expanded Certification Program requirements. These new editions of certification criteria include more robust technical and interoperability requirements, ONC-Authorized Certification Body (ONC-ACB) in-the-field surveillance expectations, and cost transparency and disclosure requirements for health IT developers' certified health IT. These additional disclosure requirements have been adopted to ensure users of certified health IT are fully informed about specific types of limitations and extra costs associated with the ability to implement or use certified health IT in a manner consistent with its certification.

**Ontoserver:** With fast, incremental, and context-specific result ordering, Ontoserver puts **SNOMED CT, AMT, LOINC,** and **FHIR-based** CodeSystems at your fingertips.

**OpenEvidence:** The leading medical information platform.

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**Open Health Stack | Google for Developers:** Open Health Stack provides building blocks for creating next-gen healthcare apps. These open-source components save time and make adopting modern healthcare standards (HL7® FHIR®) easier, leading to secure, offline-capable, data-driven solutions for healthcare workers in low-resource settings.

**Open Notes:** OpenNotes is an international movement advocating for greater transparency in healthcare. Through research, innovation, and education, we identify and disseminate best practices for sharing medical information with patients and their care partners.

**Optical Character Recognition:** Picture-to-text converter allows you to extract text from an image or convert PDF to Word, Excel, or Text formats using Optical Character Recognition software online.

**Orange County United Way:** OpenNotes is an international movement advocating for greater transparency in healthcare. Through research, innovation, and education, we identify and disseminate best practices for sharing medical information with patients and their care partners.

**OSDS Transaction Information Companion Guide x12 837:** Companion Guides (CG) may contain two types of data: instructions for electronic communications with the publishing entity (i.e., Communications/Connectivity Instructions), and supplemental information for creating transactions for the publishing entity while at the same time

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ensuring compliance with the associated ASC X12 Implementation Guide (IG) (i.e., Transaction Instructions). Either the Communications/Connectivity component or the Transaction Instruction component must be included in every CG.

The components may be published as separate documents or as a single document. The Communications/Connectivity component is included in the CG when the publishing entity wants to convey the information needed to commence and maintain communication exchange. The Transaction Instruction component is included in the CG when the publishing entity intends to clarify the IG instructions for submitting specific electronic transactions. ASCX12's copyrights and Fair Use statement limit the content of the Transaction Instruction component.

**Oxford Academic:** [Assessing the Measurement Properties of Neighborhood Scales: From Psychometrics to Ecometrics | American Journal of Epidemiology | Oxford Academic](#)

**PACE Measures:** We are happy to share these measures as we want them widely used! Please keep us updated on your uses of the measures, including any conference presentations, dissertations/theses, or publications. If you want to collaborate or share data with us, please message us on our contact page.

**Pan-Canadian Health Data Content Framework | CIHI:** The Pan-Canadian Health Data Content Framework defines and standardizes health  
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information using the Data Content Standard and typical data architecture. For implementers of the Pan-Canadian Health Data Content Framework, these products define how data should be captured and stored and what data should follow patients from one care setting to another. These products are essential for information and decision-making in clinical care planning, resource management, population health, and health system use.

A subset of the Pan-Canadian Health Data Content Framework is the Canadian Core Data for Interoperability (CACDI). The CACDI works with the Fast Healthcare Interoperability Resource (FHIR) profiles created by Canada Health Infoway's CA Core+ to facilitate interoperability and data exchange within the Canadian healthcare landscape.

The Pan-Canadian Health Data Content Framework and CACDI are technology-agnostic, which means they are flexible and can be used with any software solution. These products ensure the seamless exchange of consistent, accurate, and interoperable health data from a family doctor to a specialist or from a clinic to a hospital. CIHI begins with primary health care information and, over time, includes information from other health care settings.

### Parents' Assessment of Protective Factors

### ParkServe - Trust for Public Land

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### Partnership HealthPlan of California 837 Institutional Companion Guide:

This Companion Guide (CG) has been developed by Partnership HealthPlan of California (PHC) and should be used in conjunction with the ASC X12 Standards for Electronic Data Interchange Technical Report Type 3 (TR3) Health Care Claim: Institutional version 005010X223A2. This document is for clarification purposes only and is intended to assist in submitting 837P transactions to PHC. It is not intended to include all claim filing guidelines or in any way exceed the requirements or usage of data expressed in the TR3. The Communications/Connectivity component is included in the CG when the publishing entity wants to convey the information needed to commence and maintain communication exchange.

**FHIR Path:** Like XPath, FHIRPath is a path-based navigation and extraction language. Its operations are expressed in terms of the logical content of hierarchical data models and support traversal, selection, and data filtering. The language's design was influenced by the need for path navigation, selection, and formulation of invariants in HL7 Fast Healthcare Interoperability Resources (FHIR) and HL7 Clinical Quality Language (CQL).

### Payer-to-Payer Data Exchange | CMS

**Pediatric ACEs and Related Life Events Screener (PEARLS):** Many families experience stressful life events. Over time, these experiences can affect your

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child's health and well-being. We would like to ask you questions about your child so we can help them be as healthy as possible.

**Pediatric Consent on FHIR:** Many families experience stressful life events, which can eventually affect a child's health and well-being. We would like to ask you questions about your child so we can help them be as healthy as possible.

**Population Health | Epic:** Monitor a patient's care and take action with precise engagement to keep patients healthy or improve chronic conditions – no matter where the patient receives care.

### **Positive Childhood Experiences and Adult Mental and Relational Health in a Statewide Sample: Associations Across Adverse Childhood**

**Experiences Levels:** Positive childhood experiences show dose-response associations with D/PMH and ARSES after accounting for exposure to ACEs. The proactive promotion of PCEs for children may reduce the risk of adult D/PMH and promote adult relational health. Joint assessment of PCEs and ACEs may better target needs and interventions and enable a focus on building strengths to promote well-being. Findings support prioritizing possibilities to foster safe, stable, nurturing relationships for children that consider the health outcomes of positive experiences.

**Prapare:** Nationally standardized and stakeholder-driven, the Protocol for Responding to & Assessing Patients' Assets, Risks & Experiences

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(PRAPARE®) is designed to equip healthcare and their community partners to understand better and act on individuals' social determinants of health (SDOH). PRAPARE, when paired with the Implementation and Action Toolkit, empowers users to leverage data to improve health equity at the individual, community, and systems levels. [PRAPARE® ICD-10-CM Z Codes](#)

**Prevention Institute:** [Adverse Community Experiences and Resilience: A Framework for Addressing and Preventing Community Trauma](#): This report offers a groundbreaking framework for understanding the relationship between community trauma and violence. Until now, there has been no basis for understanding how community trauma undermines both individual and community resilience, especially in communities highly impacted by violence, and what can be done about it. Funded by Kaiser Permanente Community Benefit in Northern California, and based on interviews with practitioners in communities with high rates of violence, the report outlines specific strategies to address and prevent community trauma—and foster resilience—using techniques from those living in affected areas.

**Prevention Institute:** [Community Safety Realized](#)

**Prevention Institute:** [Healthy Development Without Displacement: Realizing the Vision of Healthy Communities for All](#)

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### **Prevention Institute:** [Park Equity, Life Expectancy, and Power Building:](#)

This project is supported by the Urban Institute through funds provided by the Robert Wood Johnson Foundation. We thank them for their support and acknowledge that the findings and conclusions presented in this report are those of the authors alone and do not necessarily reflect the opinions of the Urban Institute or the Robert Wood Johnson Foundation.

### **Prevention Institute:** [Public health pathways to preventing violence](#)

### **Prevention Institute:** [The Built Environment and Health: 11 Profiles of Neighborhood Transformation](#)

This document highlights neighborhood-level changes to the built environment that can have a positive influence on the health of community residents, especially in low-income communities. The profiles demonstrate how health practitioners, community members and many others can work together to improve community well-being by making changes to the built environment.

### **Prevention Institute:** [Uplifting Contextual and Experiential Evidence \(UCEE\) | Prevention Institute](#)

**Protective Factors:** [Why Focus on Protective Factors? At Risk, In Risk, or Both?](#) Protective factors are conditions or attributes of individuals, families, communities, or the larger society that, when present, promote well-being and reduce the risk for adverse outcomes. A growing body of evidence

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suggests that protective factors “buffer” the effects of risk exposure and may help individuals and families negotiate difficult circumstances and fare better in school, work, and life.

**QHIN: Who are the TEFCA Qualified Health Information Network (QHIN) Candidates? | TechTarget:** The TEFCA QHIN applicants' health information networks collectively process billions of annual transactions across all fifty states.

**QHIO Program Guide:** The QHIO requirements are described below. When applicable, the corresponding 2023 QHIO Application question number has been included for reference. Readers should refer to the 2023 QHIO Application for further details or the DxF FAQs to clarify QHIO requirements.

**QI-Core Implementation Guide:** The QI-Core Implementation Guide defines a set of FHIR profiles with extensions and bindings needed to create interoperable, quality-focused applications. The profiles in this implementation guide derive from and extend the US Core profiles to provide a common foundation for building, sharing, and evaluating knowledge artifacts across quality improvement efforts in the US Realm. As an HL7 FHIR Implementation Guide, changes to this specification are managed by the sponsoring workgroup, Clinical Quality Information, and incorporated as part of the standard balloting process. The current roadmap follows the base FHIR roadmap and the US Core Implementation Guide.

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**Quality Measure Implementation Guide:** The Fast Healthcare Interoperability Resource (FHIR) Quality Measure Implementation Guide (this IG) describes an approach to representing electronic Clinical Quality Measures (eCQMs) using the FHIR Clinical Reasoning Module and Clinical Quality Language (CQL) in the US Realm. However, this Implementation Guide can be used for multiple use cases across domains, and much of the content will likely be usable outside the US Realm. The implementation guide is based on the previous generation of eCQM representation standards, the HL7 V3-based Health Quality Measure Format (HQMF), and accompanying implementation guides. As an HL7 FHIR Implementation Guide, changes to this specification are managed by the sponsoring Clinical Quality Information Work Group and incorporated as part of the standard balloting process.

**RDNs and NDTRs:** Learn about the education and expertise that make Registered Dietitian Nutritionists (RDNs) the experts in nutrition and health, as well as details about Nutrition and Dietetics Technicians Registered (NDTRs).

**Real World Testing Condition and Maintenance of Certification Requirements Enforcement Discretion Notice | HealthIT.gov:** In consideration of potential future deregulatory actions under the Assistant Secretary for Technology Policy (ASTP) and the Office of the National Coordinator for Health Information Technology (ONC) (collectively,  
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“ASTP/ONC”) authorities and consistent with EO 14192, ASTP/ONC has identified certain regulatory requirements for which the exercise of enforcement discretion would reduce burden and costs for regulated entities. Section 3001(c)(5)(D)(v) of Title XXX of the Public Health Service Act (PHSA), as amended by the 21st Century Cures Act (Cures Act), requires, as a Condition and Maintenance of Certification under the ONC Health IT Certification Program (Program), that health IT developers successfully test the real world use of their technology for interoperability in the type of setting in which such technology would be marketed. [1]

**RECS 2024: Residential Energy Consumption Survey:** RECS is the premier carbon capture, utilization and storage (CCUS) education and training experience and career network for graduate students and early career professionals in the U.S. Sponsored by the U.S. Department of Energy, RECS is an annual intensive program that combines classroom instruction with group exercises, site visits, communications training, and hands-on field activities covering science, technology, policy, and business topics associated with CCUS deployment.

**Resilience Assessment: Discover Your Resilience Pattern:** When stakes are high and circumstances feel uncertain, understanding your natural resilience pattern isn't just helpful – it's essential. This insight helps you:

### **Your Hidden Resilience Pattern.**

- Stay grounded when facing resistance.

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- Make clear decisions under pressure.
- Preserve your energy while protecting your work.
- Transform challenges into opportunities for more profound impact.

**Rippel Foundation: [Federal Plan for Equitable Long-Term Recovery and Resilience for Social, Behavioral, and Community Health](#)** This document contains recommendations (cross-cutting and for all vital conditions) for the Federal Plan for Equitable Long-Term Recovery and Resilience for Social, Behavioral, and Community Health.

**Robert Wood Johnson Foundation: [How Equity Strategies Can Make Healthcare Better for Everyone](#)**

**[Ruby-HL7 0.1.23](#)**: Welcome to our Ruby Forum. Join the conversation, and please follow our guidelines.

**Safety Check: [Free ESG Checklist & Template](#)**

**Sage Journals: [What is data justice? The case for connecting digital rights and freedoms globally - Linnet Taylor, 2017](#)**: The increasing availability of digital data reflecting economic and human development, and in particular the availability of data emitted as a by-product of people's use of technological devices and services, has both political and practical implications for the way people are seen and treated by the state and by the

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private sector. Yet the data revolution is so far primarily a technical one: the power of data to sort, categorise and intervene has not yet been explicitly connected to a social justice agenda by the agencies and authorities involved.

**SAMHSA:** We lead public health efforts to advance the nation's behavioral health

**Schema Validator | Aidbox:** FHIR Schema is a format designed to simplify implementing and validating FHIR resources. It is heavily inspired by the design of JSON Schema and introduces a more developer-friendly representation of FHIR StructureDefinitions.

**SDOH Clinical Care:** Social determinants of health (SDOH) are the conditions in the environments where people are born, live, learn, work, play, worship, and age that affect a wide range of health, functioning, and quality-of-life outcomes and risks. They are increasingly being recognized as essential factors that influence healthcare outcomes. This HL7 Implementation Guide (IG) defines how to exchange coded content using the HL7 FHIR Standard for the following SDOH-focused care activities: screening, clinical assessment/diagnosis, goal setting, and the planning and performing of interventions. This IG addresses the need to gather SDOH information in multiple settings, share that information between stakeholders, and exchange referrals between organizations to address specific social risks and needs, all with appropriate patient consent. In

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addition, the IG demonstrates how to share clinical data to support secondary purposes such as population health, quality, and research.

This IG was developed by the Gravity Project, which aims to build and promulgate consensus-driven social determinants of health (SDOH) data standards for health and social care interoperability and use among multiple stakeholders. The project and this implementation guide are focused on the U.S. environment. This IG leverages the content of the US Core Implementation Guide and adheres to US-specific terminology. However, the basic constructs and interaction patterns may apply outside the U.S.

### The IG supports the following use cases:

- Documenting SDOH data in conjunction with patient encounters with providers, payers, and community services.
- Referring patients to address SDOH needs via an electronic workflow. The referral framework includes support for intermediary organizations to manage service delivery, closed-loop feedback to the ordering provider, and direct engagement with the patient and their caregivers. It also identifies cohorts of individuals with a typical relationship to another entity (e.g., covered by the same payer).

### SDOHCC StructureMap HungerVitalSign - SDOH Clinical Care v2.1.0: A

StructureMap instance that represents the resource that transforms a  
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specific question and answer from the LOINC Hunger Vital Sign [HVS] questionnaire (LOINC code 88121-9) into a corresponding Observation (SDOHCC Observation response Hunger Vital Sign Q3 Example) and derived Condition (SDOHCC Condition Food Insecurity Example)

### SDOHCC ValueSet SDOH Category - SDOH Clinical Care v2.3.0

**Shift Collaborative:** Today's health data systems often force patients to choose between care and privacy. Sharing the wrong information, or too much information, erodes patient trust and in some cases can cause patient harm. As a patient, you should be able to share the information you want safely, equitably, and on your own terms.

### Single Point of Access (SPOA): Mental Health Services

### SIREN: Social care best practices

**SMART Health Cards:** SMART Health Cards are verified versions of your clinical information, such as vaccination history or test results. They allow you to keep a copy of your vital health records on hand and easily share this information with others. SMART Health Cards contain a secure QR code and may be saved digitally or printed on paper.

**Smile Digital Health:** A structured, ubiquitous data source is the first step to delivering valuable business insights and better care. The Smile Health Data

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Platform unifies data ingestion and transforms legacy data into future-proof, enriched FHIR resources free of vendor lock-in. With flexibility and composability to fit within your ecosystem, Smile's platform can be customized to your needs now and in the future.

**SNOMED CT maps:** SNOMED International produces and maintains maps for our Members and clinical stakeholders who use other coding systems, classifications, and terminologies besides SNOMED CT.

**Social and Health Equity Impact score:** The Commonwealth Fund released a new health equity scorecard today, finding deep-seated racial and ethnic health inequities in all 50 states and the District of Columbia, disparities exacerbated by the COVID-19 pandemic.

**Social Health Information Exchange (SHIE) | Gov. Office:** SHIE is a network that securely shares physical, behavioral, and social health information between providers involved in whole-person care. Our SHIE approach comprises a statewide unifying architecture and regional hubs. The statewide unifying architecture is a secure, overarching network allowing providers to share health information. The regional SHIE hubs are built upon existing work across Colorado. We will fund regional infrastructure and partnerships customizable to the region's priorities. While some SHIE hubs may focus on substance use disorder, others may focus on homelessness.

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### Other important aspects of a successful SHIE include:

- Consent Management
- Identity Resolution
- Provider Directory
- Community Resource Inventory

### Social Risk Terminology Value Sets: Gravity Project

Solar for All | US EPA: Under the \$7 billion Solar for All program, the 60 grant recipients will create new or expand existing low-income solar programs, enabling over 900,000 households in low-income and disadvantaged communities to benefit from distributed solar energy. Collectively, these programs will deliver on the Greenhouse Gas Reduction Fund's objectives by reducing greenhouse gas emissions and other air pollution, providing cost savings on electric bills for overburdened households, and unlocking new markets for distributed solar in states and territories that have never had a statewide low-income solar program.

Standard Companion Guide Transaction Information: Companion Guides (CGs) may contain two types of data: instructions for electronic communications with the publishing entity (Communications/Connectivity Instructions) and supplemental information for creating transactions for the publishing entity while ensuring compliance with the associated ASC X12 IG (Transaction Instructions). Either the Communications/Connectivity component or the Transaction Instruction component must be included in

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every CG. The components may be published as separate documents or as a single document. The Communications/Connectivity component is included in the CG when the publishing entity wants to convey the information needed to commence and maintain communication exchange. The Transaction Instruction component is included in the CG when the publishing entity intends to clarify the IG instructions for submitting specific electronic transactions. The Transaction Instruction component content complies with ASC X12's Fair Use and Copyright statements.

**Standards - Inform USA (formerly AIRS, the Alliance of Information and Referral Systems):** First published in 1973 and now in its 10th edition (Inform USA Standards and Quality Indicators for Professional Information and Referral - Version 10.0, officially released in July 2024), the Standards underpin and bind together every aspect of information and referral and define the direction of all our products and services. The Standards are the foundation of service delivery and the prime quality benchmark for community navigation.

The Standards have five sections (see below), and within those sections are 25 Standards covering every facet of an information and referral operation. Each Standard includes Quality Indicators that describe best practices for our industry. The Standards are updated every three years to reflect the industry's emerging trends. Here is a summary of the high-level changes compared to the 9.0 edition.

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**Standard Operating Procedure (SOP): Delegation of Authority:** The requirements outlined in this Standard Operating Procedure (SOP) are required for implementation in addition to the terms and conditions found in the applicable Framework Agreement, the Qualified Health Information Network™ (QHIN™) Technical Framework (QTF), and applicable SOPs. The Trusted Exchange Framework and Common AgreementSM (TEFCASM) Cross Reference Resource identifies which SOPs provide additional detail on specific references from the Common Agreement.

**Standard Operating Procedure (SOP): Exchange Purpose (XP) Vetting Process:** The requirements outlined in this Standard Operating Procedure (SOP) are for implementation, in addition to the terms and conditions found in the Framework Agreements, the Qualified Health Information Network® (QHIN™) Technical Framework (QTF), and applicable SOPs. The Trusted Exchange Framework and Common Agreement™ (TEFCATM) Cross Reference Resource identifies which SOPs provide additional detail on specific references from the Common Agreement.

**Stanford Medicine: Addressing Perinatal Intimate Partner Violence Through Collective Action, Compassionate Care, and Transformative Systems Change - Stanford Center for Continuing Medical Education**

**State Health Alliance for Records Exchange (SHARE) - Arkansas**

**Department of Health:** The State Health Alliance for Records Exchange (SHARE) is Arkansas's only statewide Health Information Exchange (HIE).

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SHARE is a product of the Office of Health Information Technology, part of the Arkansas Department of Health. SHARE securely connects doctors, nurses, pharmacists, and other healthcare professionals. It allows health care professionals to view a patient's medical history to have the information they need to provide the best care possible.

**Stewards of Change Institute Consent Learning Lab:** Stewards of Change Institute (SOCI) has focused on the issue of informed consent to share protected and private data since 2018 when we created the National Interoperability Network (NIC) as a community network to advance information-sharing and collaboration across diverse domains (including the expansive fields of health and social services). As part of NIC's work, we subsequently launched Project Unify and the National Action Agenda to Advance Upstream Social Determinants and Health Equity, producing six recommendations. In addition, SOCI produced a critical, influential report relating to the consent to share, titled Modernizing Consent to Advance Health and Equity: A National Survey of Key Technologies, Legal Issues, and Promising Practices.

**Support for the Gravity Project Social Determinants of Health ICD-10-CM Application**

**Supporting Families Through the HOPE and Strengthening Families Frameworks - Center for the Study of Social Policy:** Strengthening

Families, developed by the Center for the Study of Social Policy (CSSP), is a  
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research-informed, strength-based approach that helps families, programs, and communities increase family strengths, enhance child development, and reduce the likelihood of child abuse and neglect. The framework is centered around helping families build five Protective Factors.

**SVAP: [Standards Version Advancement Process \(SVAP\) | HealthIT.gov](#):** IT Certification Program (Certification Program) to newer versions of adopted standards as part of the “Real World Testing” Condition and Maintenance of Certification requirement (§ 170.405) of the 21st Century Cures Act. Using SVAP, Certified Health IT developers are permitted to voluntarily use a newer approved version of a standard than is adopted in regulation. Currently, this flexibility is limited to standards that are adopted in the certification criteria required to meet the “Real World Testing” Condition of Certification, which include § 170.315(b), (c)(1) through (c)(3), (e)(1), (f), (g)(7) through (g)(10), and (h).

**TASC: [DxF Health and Social Data Exchange Reference Architecture](#)**

### **Technical Advisory Committee – California Future Health Workforce**

**Commission:** The Technical Advisory Committee (TAC) shares its in-depth knowledge and expertise through targeted input to inform the dialogue and decision-making of the California Future Health Workforce Commission. TAC members are senior-level leaders from associations, agencies, educational institutions, health systems, communities, and organizations

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with expertise and relationships in relevant health, workforce, education, and policy areas.

### [TEFCA for California's Data Exchange Framework - Primer](#)

### [TEFCA Priorities and Plans for the Remainder of 2025 - Health IT Buzz](#)

[The Commons Project](#): “The Commons Project was founded to build technology solutions where people are the central organizing principle. The standards, ecosystems, services, and tools we build now will transform how people access, manage, and share their data in an evolving digital world. Join us in empowering people with their data, unlocking massive improvements in healthcare, travel, public services, and much more.”

[The Touchstone Platform for HL7® FHIR® – AEGIS.net, Inc.](#): Reduce the burden of achieving interoperability through HL7 FHIR with Touchstone, the most potent automated validation platform. Whether you are learning to build with HL7 FHIR, looking to meet regulatory requirements with system procurement, or supporting an interoperability program, you’ve come to the right place. Touchstone is an easy-to-use platform for developing and deploying interoperable and secure HL7 FHIR implementations. The HL7 FHIR standard is rising to the top of healthcare technology priorities because it delivers fast and efficient health data. Our team of experts has implemented the most advanced HL7 FHIR Testing platform for you to use anytime, anywhere.

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**TogetherNow:** At TogetherNow, we believe that realizing our community's potential means changing the health, education and human service system itself through innovation and collaboration. We're building a network of local organizations across all sectors and designing human-centered solutions to meet people where they are and improve lives. **About MyWayfinder**

**Tools to Assess and Measure Social Determinants of Health - RHIhub Toolkit**

**Transforming Maternal Health (TMaH): Model Overview Factsheet:**  
TMaH will support participating state Medicaid agencies in developing a whole-person approach to pregnancy, childbirth, and postpartum care. **SHARE one-pager**

**Tree Equity Score**

**Trust Public Land: ParkServe® Data Downloads**

**UCAAN:** Adverse Childhood Experiences (ACEs) are potentially traumatic events that occur when people are young. Abuse, neglect, household challenges, and associated toxic stress are the root causes of many common, serious, and costly health and social challenges facing California. Learn more about ACEs. UCAAN is a multi-campus initiative to address ACEs that leverages the substantial interdisciplinary resources of the University of

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California, Los Angeles (UCLA) and the University of California, San Francisco (UCSF) campuses.

**Uniform Resource Identifier (URI) - FHIR v4.0.1:** As defined by RFC 3986 (<http://www.ietf.org/rfc/rfc3986.txt>) (with many schemes defined in many RFCs). For OIDs and UUIDs, use the URN form (urn:oid:(note: lowercase) and urn:uuid:). See [urn:oid](#) and [RFC 4122 on UUIDs](#) This OID is used as an identifier II.root to indicate that the extension is an absolute URI (technically, an IRI). Typically, this is used for OIDs and GUIDs. Note that when this OID is used with OIDs and GUIDs, the II.extension should start with urn:oid or urn:uuid:

**United States Core Data for Interoperability (USCDI):** The United States Core Data for Interoperability (USCDI) is a standardized set of health data classes and constituent data elements for nationwide, interoperable health information exchange. Review the USCDI Fact Sheet to learn more.

**Unite Us:** Thousands of government, healthcare, community-based organizations, agencies, and institutions of all sizes partner with Unite Us because of our robust technology, expansive network, and tenured people who support whole-person care.

**Urban Institute: Leveraging the Built Environment for Health Equity:** The nonprofit Urban Institute is a leading research organization dedicated to developing evidence-based insights that improve people's lives and

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strengthen communities. For 50 years, Urban has been the trusted source for rigorous analysis of complex social and economic issues; strategic advice to policymakers, philanthropists, and practitioners; and new, promising ideas that expand opportunities for all. Our work inspires effective decisions that advance fairness and enhance the well-being of people and places.

**USCDI+ | HealthIT.gov:** The USCDI+ initiative supports identifying and establishing domain or program-specific data element lists that are extensions to the existing USCDI. USCDI+ is a service ONC provides to federal and industry partners to develop, harmonize, and advance interoperable data element lists that extend beyond the core data in the USCDI to meet specific programmatic and/or use case requirements. This approach allows HHS to ensure that USCDI+ extensions are built from the same core USCDI foundation, align to harmonized data standards and taxonomies, and create the opportunity to align similar data needs across programs and use cases.

**The USCDI+ process follows the same basic principles used for the USCDI but with some additional components, including:** In December 2023, ONC launched a new USCDI+ platform to support the organization, linking of domains, and functionality to solicit and receive feedback for all USCDI+ domains. The new platform provides an enhanced user experience that includes tools that enable users to see in and across USCDI+ datasets for comparison, analysis, and harmonization. The platform also consists of the ability to filter and export data elements by information within the datasets

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(e.g., filter by USCDI version, particular vocabulary standards, and/or US Core Profiles, etc.), as well as advanced logic to help reduce duplicate data element submissions and more.

- A discovery process and charter.
- Identification of use cases, data specifications, and programmatic incentives/requirements for use of any specific USCDI+ data element list.
- Evaluation of data classes/elements according to objective criteria, such as industry priority and readiness, level of standards maturity, and identified agency need.

**USDA:** [Food Access Research Atlas - Go to the Atlas](#)

**USDA** [Indigenous Food Sovereignty Initiative Fact Sheet](#)

**Utility Insecurity:** [Gravity Project | Submission to Standard Code Systems](#)

**Validator:** Manually enter or upload resources for validation.

**[V Codes \(DSM-5\) & Z Codes \(ICD-10\) - PsychDB:](#)** V Codes (used in the DSM-5 and ICD-9) and Z Codes (used in the ICD-10), also known as Other Conditions That May Be a Focus of Clinical Attention, are codes used to identify issues that are a focus of clinical attention or affect the diagnosis, course, prognosis, or treatment of a patient's mental disorder. However,

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these codes are not mental disorders. Clinicians underuse both V and Z codes, and there is often a lack of awareness about these codes.

It is often helpful to put V or Z codes in a patient's clinical documentation when there is no evidence of a mental disorder but if they are presenting with significant impairment. Compared to the DSM-5 V Codes, ICD-10 Z Codes are much more comprehensive and cover various psychosocial problems. These codes capture essential social determinants of health information that psychiatric diagnoses do not capture. Sometimes, these codes are more important than any psychiatric diagnosis.

[Virginia Center for Health Innovation](#): The Virginia Primary Care Innovation Hub | [Primary Care Scorecard Dashboard](#)

[Wiley Online Library: The Significance of Definitions in Determining the Level of Community Benefits for Nonprofit Hospitals - ZARE - The Milbank Quarterly - Wiley Online Library](#)

[X12: Health Care Transaction Flow](#): Each X12 implementation guide explains how to use X12 transaction sets to meet a single defined business purpose. The following diagrams depict various exchanges between trading partners based on the implementation guides developed within the X12's Insurance subcommittee (X12N). Trading partners for these exchanges include health plans, health care service providers, and other entities that administer health plan services, fund health plans, or enroll members.

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Some of these transactions have been adopted under HIPAA and those are bolded.

[X12N 278 Companion Guide AR2024.10.0](#)

[Z-Codes: USING Z-Codes](#)

[Zulip Streams: Gravity Project](#)

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McKinsey & Company May 16th, 2025) [How circularity can make the built Philosophy | Principles | Priorities | Passion | Purpose | Progress](#)  
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[environment more sustainable](https://www.mckinsey.com/industries/real-estate/our-insights/how-circularity-can-make-the-built-environment-more-sustainable?stcr=65BA3CD8BF8F4DB2B8D61A833A69B950&_hScId_=v700000197130ae34a9eb6336e96c660a0&_hRIId_=cff6935d2d9b4b710000021ef3a0bcd2&_hDId_=cff6935d-2d9b-4b71-9ca2-cd9869a38f30&_hSD_=d3d3LmIja2luc2V5LmNvbQ==&cid=other-eml-alt-mip-mck&hlkid=d5c2b804ef8f401daf81256a29585d8e&hctky=14549348&hdpid=cff6935d-2d9b-4b71-9ca2-cd9869a38f30) [www.mckinsey.com](https://www.mckinsey.com)

[https://www.mckinsey.com/industries/real-estate/our-insights/how-circularity-can-make-the-built-environment-more-sustainable?stcr=65BA3CD8BF8F4DB2B8D61A833A69B950&\\_hScId\\_=v700000197130ae34a9eb6336e96c660a0&\\_hRIId\\_=cff6935d2d9b4b710000021ef3a0bcd2&\\_hDId\\_=cff6935d-2d9b-4b71-9ca2-cd9869a38f30&\\_hSD\\_=d3d3LmIja2luc2V5LmNvbQ==&cid=other-eml-alt-mip-mck&hlkid=d5c2b804ef8f401daf81256a29585d8e&hctky=14549348&hdpid=cff6935d-2d9b-4b71-9ca2-cd9869a38f30](https://www.mckinsey.com/industries/real-estate/our-insights/how-circularity-can-make-the-built-environment-more-sustainable?stcr=65BA3CD8BF8F4DB2B8D61A833A69B950&_hScId_=v700000197130ae34a9eb6336e96c660a0&_hRIId_=cff6935d2d9b4b710000021ef3a0bcd2&_hDId_=cff6935d-2d9b-4b71-9ca2-cd9869a38f30&_hSD_=d3d3LmIja2luc2V5LmNvbQ==&cid=other-eml-alt-mip-mck&hlkid=d5c2b804ef8f401daf81256a29585d8e&hctky=14549348&hdpid=cff6935d-2d9b-4b71-9ca2-cd9869a38f30)

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<https://mitsloan.mit.edu/ideas-made-to-matter/why-innovators-can-t-afford-to-ignore-geopolitics>

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(ACEP™), A.C.T™, A.G.I.L.E™, A.I.M Methodology™, A.P.E.R.T.U.R.E.™,  
Accretive & Regenerative Capital & Resource Optimization Model  
ARCROM™, A.R.C.S™, A.R.T.™, A.S.S.E.T.S™, A.U.T.H.E.N.T.I.C.™,  
B.A.L.A.N.C.E.™, B.E.A.C.O.N.S.™, B.E.S.T.™, B.E.T™, Board Governance in  
the Digital Epoch™, B.R.I.D.G.E™, C.A.P™, C.A.R™, C.A.R.E™, C,E,SDoH™,  
C.H.A.I.N™, Circular Economic Principles™, Circular Public Option for  
Capital™, C.I.R.C.U.L.A.R.™, Circular Economic Principles™, Circular  
Equity™, Circular Public Option for Capital™, Circular Systems  
Architecture™, Circular Value Filter™, Civic Engagement Strategies™,  
Circular Economic Infrastructure™, C.I.V.I.C (F.O.R.C.E)™, Civic Impact  
Reports™, C.L.A.S.S.™, C.L.E.A.R.™, C.L.I.E.N.T.™, Closed Loop Learning  
Ecosystems™ (CLLE™), Closed Loop Delivery Referral Networks™  
(CLDRN)™, Closed-Loop Value Creation™, C.L.E.A.R.™, C.L.O.U.T™,  
C.L.U.E™, C.L.U.T.C.H.™, C.O.D.E™, C.O.M.M.U.N.I.T.Y™,  
Comprogression™, Comprogressive™ Concentric Circular Flywheel  
Feedback Loops™ (CCFFL™), Consent Custody Circuitry™, Consolidated  
Consent Architecture™ (CCA™), Core Civic Collaboratives™ (CCC™),  
C.O.S.T.S.™, C.U.S.T.O.M.E.R.™, D.A.R.E.™, .D.A.T.A.™, D.E.I™,  
D.E.M.O.™, D.R.A.M.A™, D.R.E.A.M.™, D.R.I.V.E.™, E.L.E.V.A.T.E.™,  
E.R.A.™, F.A.C.T Protocol™, F.A.C.T.S.™, F.A.F.O,Protocol™, F.A.R™,  
F.M.L.™ Protocol, E.M.P.O.W.E.R.™, E.N.V.Y™, F.O.R.C.E™ (C.I.V.I.C),  
F.O.R.M.U.L.A™, G.A.P™, G.M.C™, G.M.A.F.B Protocol™, G.O.A.L.™,  
G.O.L.D™, G.O.R.G.E.™, G.R.E.E.D™, G.T.F.O.H™ Protocol™, Health and

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