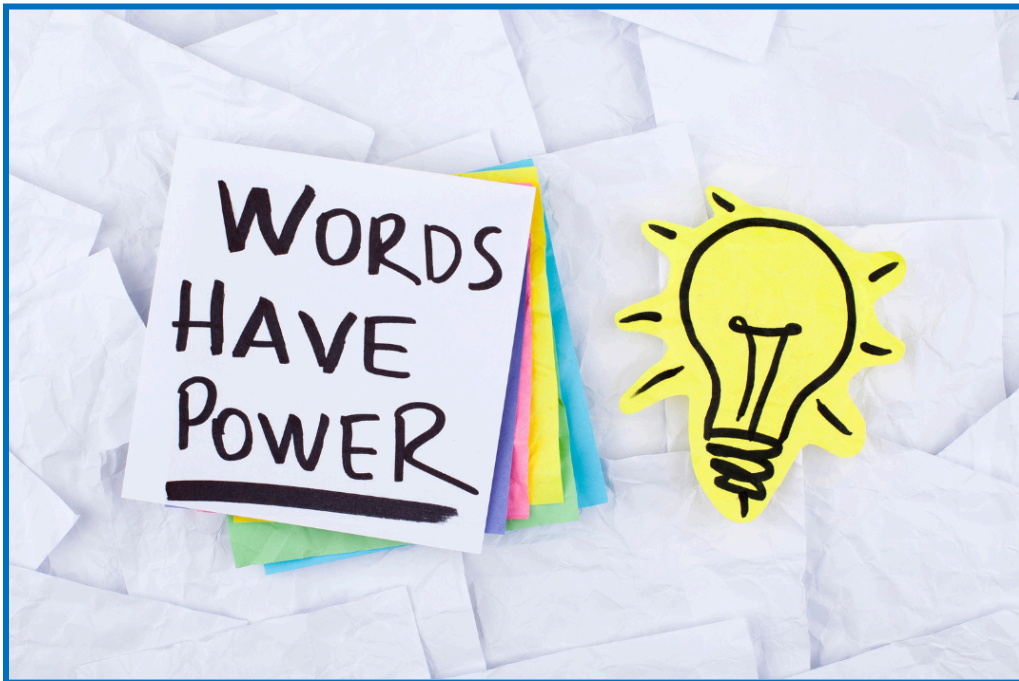


Key Definitions



Sonoma Connect | Sonoma Unidos is committed to equity and inclusion, thus creating this sheet with key definitions & acronyms. As we collaborate with the community, multiple organizations and initiatives, it is important that we define terms to ensure shared understanding. The terms, acronyms, and definitions you find below represent our initiative's values, vision and mission.



Dictionary of SCSU Related Terms and Acronyms

Click a letter to jump to a specific section:

**A, B, C, D, E, F, G, H, I,
J, K, L, M,
N, O, P, Q, R, S, T, U,
V, W, X, Y, Z**



Dictionary of SCSU Related Terms and Acronyms

A

ACEs: Adverse Childhood Experiences (ACEs) are potentially traumatic events that occur in childhood. ACEs can include violence, abuse, and growing up in a family with mental health or substance use problems.

ACE Associated Health Condition: ACE Associated Health Condition (AAHC) refers to the mental health issues or medical conditions that can arise from adverse childhood experiences (ACEs).

Accountable Communities for Health: Accountable Communities for Health (ACH) are collaborative networks that bring together healthcare providers, social service agencies, and community organizations to address community needs.

Accountability: refers to the ways in which individuals and communities practice their goals and actions, and acknowledge the values and groups to which they are responsible.¹

Advocacy: is the act of publicly pleading or arguing in favor of a specific cause or policy.²

ADT: Admit, Discharge, Transfer

Anti-racist: Actively opposing and fighting against racism by changing systemic, institutional, interpersonal systems, policies & procedures, behaviors, and attitudes.

- Examples include: Continue examining our own biases, Address family needs - meeting times, childcare, ensure compensation for people who would otherwise not be able to participate, BIPOC folx help create spaces to address invisibility (land acknowledgements etc), Support BIPOC leadership by prioritizing BIPOC staff and co-chair recruitment (e.g. training resources, reflective supervision), Increase representation of BIPOC individuals in leadership positions, fund BIPOC led orgs provide culturally appropriate services

API: API stands for Application Programming Interface, a software that serves as a liaison for two applications to talk to each other.

B

Backbone Organization/Team: A Backbone Organization is a team that coordinates, facilitates and assists in strategic planning.

BIPOC: Black, Indigenous, and People of Color

Birth Equity: The National Birth Equity Collaborative defines birth equity as “the assurance of the conditions of optimal births for all people with a willingness to address racial and social inequities in a sustained effort.” By addressing birth equity through the lens of understanding how structural racism and health inequities affect maternal and infant health, we can begin to improve outcomes for women of color.³

¹ Cushing, B. B., Cabbil, L., Greeman, M., Hitchcock, J., & Richards, K. (2010). Accountability and white anti-racist organizing: Stories from our work. Roselle, NJ: Crandall, Dostie & Douglass Books.

² Oxford Languages

³ <https://www.sdfoundation.org/news-events/sdf-news/what-is-birth-equity/>



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California Advancing Innovation to MediCal (CalAIM): a State of CA initiative designed to build a whole system, person-centered approach to care, in which clinical and social services are integrated to support people's health and wellbeing throughout their lives. As a statewide, population health initiative, CalAIM will reach Medi-Cal members focusing particularly on advancing health equity by expanding resources available to populations and communities that have been historically under-resourced and under-served. Learn more about all 11 CalAIM initiatives on the CalAIM website

CBOs: Community Based Organizations

CDII: Center for Data Insights and Innovation (CDII)

CHNA: Community Health Needs Assessment

Community Health Worker (CHW): Community Health Workers, otherwise known as Community Health Representative, Promotores de Salud are frontline public health workers who are trusted members of and/or have an unusually close understanding of the community served. This trusting relationship enables CHWs to serve as a liaison/link/intermediary between health/social services and the community to facilitate access to services and improve the quality and cultural competence of service delivery.⁴

Collective impact: Refers to a diverse group of actors from different sectors, working together towards a common agenda or goal for addressing complex social issues.

Community Engagement: Community engagement is a powerful force for governments, corporations, nonprofits, and education institutions (and communities themselves). Community engagement involves taking a strategic approach to an organization's community-based stakeholders. This includes building relationships, developing communications, and managing interactions to achieve specific outcomes for the organization and the community.

Community Information Exchange (CIE): Community Information Exchange (CIE) networks develop shared governance and technology to support cross-sector collaboration to address community needs across programs, such as inequities that lead to individuals having widely different health outcomes. CIEs builds on Frameworks such as Health Information Exchange (HIE) and Continuum of Care and considers the broader long-term goals of a community.

Community-led: Actions, projects or initiatives driven by community input and participation.

Community Supports (CS): services that help address members' health-related social needs, and help them live healthier lives, and avoid higher, costlier levels of care. Community Supports include: Support to secure and maintain housing, Access to medically tailored meals to support short term recovery, as well as a variety of other community-based services. These services are available to eligible Medi-Cal members regardless of whether they qualify for ECM services. All Medi-Cal managed care plans (MCPs) are encouraged to offer as many of the 14 pre-approved Community Supports as possible. This is the proposed list of state-approved Community Supports – previously called In Lieu of Services/ILOS.

CRM: Client Record Management System

Cross-Sector: a process where community organizations of different sectors can work together to address the issues the community they serve face.

⁴ National Association of Community Health Workers. (2019). <https://nachw.org/>



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Culturally Responsive: Refers to acknowledging and incorporating the cultural backgrounds, perspectives, and experiences of individuals or groups into various aspects of education, counseling, etc.

D

Deferred Action for Childhood Arrivals (DACA): Deferred Action for Childhood Arrivals. An executive order signed by President Barack Obama in 2012. This executive order provides individuals (under very specific circumstances) with a work permit, social security number and protection from removal proceedings.

DEI: DEI stands for Diversity, Equity, and Inclusion. It is an effort to ensure fairness, representation, and belonging for all individuals, regardless of differences, in workplaces, and communities.

Diversity: differences among sociocultural groups such as ethnic heritage, sexual identity, class, age, gender, ability, religion, and nationality.⁵

Equity: fairness. Equity does not mean equality (equality means sameness).⁶

Inclusion: having access to the current system or social structure.⁷

DHCS: Department of Health Care Services (DHCS). DHCS provides Californians with access to affordable, integrated, high-quality health care, including medical, dental, mental health, substance use disorder treatment and long-term care.

DxF: The Data Exchange Framework, is the first-ever, required statewide data sharing agreement (DSA) of its kind in California and key to achieving the state's plans for transforming healthcare, expanding coverage, advancing equity, and improving connections between health and social services entities.

E

Enhanced Care Management (ECM): a new statewide Medi-Cal benefit available to eligible members with complex needs, such as, access to a single Lead Care Manager who provides comprehensive care management and coordinates their health and health-related care and services. As well as connections to the quality care they need, no matter where members seek care – at the doctor, the dentist, with a social worker, or at a community center.

EHR: Electronic Health Record

Equity: Removing the predictability of health, well-being, and wealth based on social background or factors.

- Examples include: Education and re-education what it means to design around the margins, elevate the voices of our community by advocacy and social movements, Provide a space for people to learn about healing-centered engagement workplace practices and antiracism, give way to authentic community ownership, create equity tools and processes that we can model and others can replicate in their work, provide a space that prioritizes topics such as

⁵ Adams, M. E., Bell, L. A. E., & Griffin, P. E. (2007). Teaching for diversity and social justice. Routledge/Taylor & Francis Group.

⁶ Race Forward. <https://www.raceforward.org>

⁷ Race Forward. <https://www.raceforward.org>



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the CHW workforce and other models that are focused on disrupting the effects of toxic stress that impact people on the margins, Support community to identify strengths and needs by leverage existing data while recognizing its limits, develop a communication plan including language justice, continue to hold a safe space for community members to utilize their lived experiences for social change

F

FRC: Family Resource Center

FQHCs: Federally Qualified Health Center

G

N/A

H

Health Related Social Needs: Health Related Social Needs (HRSNs) are non-medical factors such as housing, food security, and social support that significantly impact an individual's health outcomes and overall well-being.

HIE: Health Information Exchange (HIE) is a system that allows healthcare professionals and organizations to electronically share patient health data information securely.

HMIS: Homeless Management Information System (HMIS) is a local information technology system that is used by homeless service providers to collect confidential client-level data including demographics, history of homelessness and services accessed, and service needed.

I

The immigration industrial complex (IIC): a term introduced by immigration activists and scholars, is used to reference the racist ideologies and profit interests, public and private, that drive legislators and leaders to design and execute immigration policies that solidify the sovereignty, borders, and whiteness of the nation.⁸

Interoperability: The ability for computer software, programs, or applications to connect, access and exchange information across platforms.

Intersectionality: a term that refers to a structural analysis of oppression that moves beyond a single-axis framework of one marginalized identity (e.g., race) to a more nuanced understanding of the

⁸ Hernandez, D. M. (2019). Carceral shadows. Entangled lineages and technologies of migrant detention. Chase, R. T. (Ed.). (2019). Caging borders and carceral states: Incarcerations, immigration detentions, and resistance. UNC Press Books.



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ways in which interlocking systems of oppression intersect to marginalize individuals in society. Intersectionality identifies ways that

J

N/A

K

N/A

L

Latinx: a term used to challenge heteronormative gender binaries and promote solidarity with genderqueer communities within Latin America.

Latine: a term used to challenge heteronormative gender binaries. Synonym; Latinx. Latine, however, is easier to pronounce in Spanish than Latinx.

LGBTQIA2+: Lesbian, Gay, Bisexual, Transgender, Queer and/or Questioning, Intersex, Asexual, Two-Spirit, and plus.

M

Marginalized: those who are excluded, ignored, or relegated to the outer edge of a group/society/community.

Multisector Collaboration: Multisector collaboratives (MSCs) can address SDOH to improve community health outcomes by working with diverse partners such as schools, health clinics, community-based organizations, and local governments to tackle complex health issues.

<https://pophealthinnovationlab.org/data-walk/multisector-collaboration-and-multisector-collaboratives-mscs/>

MMIW: missing and murdered indigenous women, girls, and Two-Spirit people.

N

N/A

O



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N/A

P

Positive Childhood Experiences and resilience research and practice: Building on the knowledge that the brain is plastic and the body wants to heal, this part of PACEs science includes evidence-based practice, as well as practice-based evidence by people, organizations and communities that are integrating trauma-informed and resilience-building practices. This ranges from looking at how the brain of a teen with a high ACE score can be healed with cognitive behavior therapy, to how schools can integrate trauma-informed and resilience-building practices that result in an increase in students' scores, test grades and graduation rates.⁹

PATH Capacity and Infrastructure Transition, Expansion and Development (CITED) Initiative: A grant program that provides funding to enable the transition, expansion and development of ECM and Community Supports capacity and infrastructure.

PHI: Personal Health Information

Q

QHIO: A Qualified Health Information Organization (QHIO) facilitates the secure exchange of health and social services information, assisting entities as they create and respond to information requests, receive the results of tests or referrals, and solicit notifications of admissions or discharges.

R

Resource Connection Network (RCN): The Resource Connection Network is Sonoma County's local name for our instance of NinePatch, the software chosen by our community to facilitate health and social integration and closed-loop referrals for clients seeking resources and services. Sonoma Connect | Sonoma Unidos convened with 79 participants from 45 different community organizations to identify desired criteria and facilitated a community-led process which resulted in the selection of NinePatch. NinePatch was chosen because it was the vendor that best met desired criteria: capacity to facilitate closed-loop referrals with interoperability. This technology infrastructure is meant to create a more cohesive and operationally manageable ecosystem to support service care delivery and ultimately our community. The platform will support comprehensive high-quality resources that support communication, referrals, and data sharing between organizations.

RIE: Referral Information Exchange

S

⁹ <https://www.pacesconnection.com/blog/aces-101-faqs>



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Social Determinants of Health (SDOH): the conditions in which people live, work, and play. These conditions influence individuals throughout the life cycle. Conditions can have a positive or negative impact on health. Examples of SDOH include, but are not limited to: Housing, transportation, literacy and language, food, social support, race/ ethnicity, utilities, education, health coverage, financial security, neighborhood safety.¹⁰

Sonoma Connect | Sonoma Unidos: SC|SU is a local Community Information Exchange leader working to prevent, address and heal Adverse Childhood Experiences (ACEs) and trauma caused by structural drivers of health (SDOH). SC|SU brings together resource providers, service providers, and community members to form Action Teams grounded in an anti-racist, healing-centered framework that centers community voices to address fragmentation of resources.

Systems Change: Systems Change refers to altering the fundamental structures, policies, and relationships that shape how a system/intuition functions, aiming to achieve impactful, yet sustainable and equitable outcomes.

T

N/A

U

N/A

V

N/A

W

Whole-Person: A care delivery practice that emphasizes the interconnectedness between health, behavioral health and social services.

X

N/A

Y

¹⁰ World Health Organization. <https://www.who.int>



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N/A

Z

N/A