



Open Referral '23 Year in Review

A decade in: Transforming our safety net
with infrastructure for caring at scale.

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A letter from the founder

Dear friends:

We launched **Open Referral** in 2014 – ten years ago! Wow.

In some ways, we're now in a whole new world; in others, however, our mission is just as urgent as ever. I still hear all the time from people who say there are ever-proliferating sources of information about the community resources available to people in need – but it's all siloed and unreliable.

Some might hear that Open Referral has been underway for a decade and say, "what's taking so long? Shouldn't you be moving fast and breaking things??" But we knew from the start that this is a systemic issue that requires systemic changes. There are no quick fixes.

I think a lot about what I've heard from **Eugene Eric Kim**, a facilitator whose practice is named "**Faster Than Twenty.**" Eugene works to challenge the common but cynical assumption that social change only happens as one generation cedes power to the next. Eugene asks: can we *learn how to learn better* together, and make better *decisions about how we decide*, so that we can *start making change today* – even as the better world we envision remains far in the future?

Indeed, this year we could feel the change happening – in small and even big ways.

In this past year, we upgraded our resource data exchange format, [version 3.0 of the Human Service Data Specifications](#), embracing an API-forward, real-time data sharing paradigm.

We've also formally aligned our standards [with the emerging standards for healthcare provider directory information](#). This will make it easier for healthcare providers to access social service directory information within their clinical workflow, so they can help their patients access community resources.

This is a big step toward a more holistic healthcare system.

Indeed, Open Referral works on just one piece of the health and human service integration puzzle – but our principles and practices can be broadly applied to make these systems more interoperable, responsive, and equitable. In 2023, we also [facilitated emerging action across the field of Community Information Exchange](#) – helping **the U.S. Department of Health and Human Services** provide [guidance to health-and-social-care integration initiatives](#), and helping states like [Michigan](#) and [Utah](#) develop their strategies.

As new vendors adopt HSDS – [like WellConnected's allco](#) – and efforts expand across our international network, like [the UK's Signposting initiative](#), bringing new use cases – we're going to continue to develop tools that make it easier for collaborative partnerships to emerge and sustain.

And as 2024 began, [I started a new position as Senior Director of Strategy for Inform USA](#). Inform USA is the industry association representing referral providers across government and human service sectors. I'll help develop their policy platforms, partnership models, and engagement strategies.

We have more leverage than ever before to make change.

Open Referral remains an independent community of practice. As our partnership with Inform USA evolves, I'm looking for new opportunities to promote leadership and support our network. Would you like to learn more? **Reach out to discuss!**

Sincerely,



Greg Bloom, Founder of the Open Referral Initiative

P.S. Have you used our protocols and materials? **We want to hear your story!** Do you want to act in your community? **We can help!** Reach out – **let's discuss:** info@openreferral.org

A summary of our strategic framework

The challenge: A landscape of siloed directories

It's hard to see the safety net. *Which agencies provide what services to whom? Where and how can people access them?* These details are always in flux.

Nonprofit and government agencies are often under-resourced and overwhelmed, and it may not be a priority for them to promote their own information to attract more clients.

So there are many referral services — such as call centers, resource directories, and web apps — that collect directory information about health, human, and social services. Many attempts to build centralized 'one-stop shop' solutions have come and gone — and new apps emerge all the time. Such well-intentioned efforts end up yielding more fragmentation and confusion. **These directories are typically trapped in silos that can't 'talk' to each other.**

As a result of this costly and ineffective status quo:

- **People in need** have difficulty discovering and accessing services that can improve their lives.
- **Service providers** struggle to connect clients with other services that can help meet complex needs.
- **Researchers and decision-makers** find it hard to gauge programs' effectiveness in serving community needs.
- **Innovators** are stymied by lack of access to data that could power valuable tools for any of the above.

The opportunity: Enabling systems to 'talk' to each other

If the many kinds of 'community resource databases' all spoke a common language, then **resource data could be published once and used simultaneously in various ways.**

So Open Referral developed the Human Service Data Specifications (HSDS) to establish *interoperability* across many technologies. **HSDS is now an industry standard in the U.S. and a national standard in the U.K.**

The plan: Local pilots to shift the global field

In Open Referral's pilot projects, lead stakeholders — such as government champions, referral providers, community anchor institutions, etc — collaborate to build open data infrastructure.

The impact: Benefits cascading throughout our safety net

As more institutions adopt Open Referral for resource data:

- **More reliable information** can be made available at a lower overall cost than in today's siloed status quo;
- **Innovative tools** and applications can proliferate, and become easier to re-deploy and adapt;
- **People can find services more easily**, and service providers can more readily meet complex needs;
- **Researchers, policy-makers and funders can better understand** community needs & resource gaps;
- **All of this can result in healthier people** and more resilient communities.

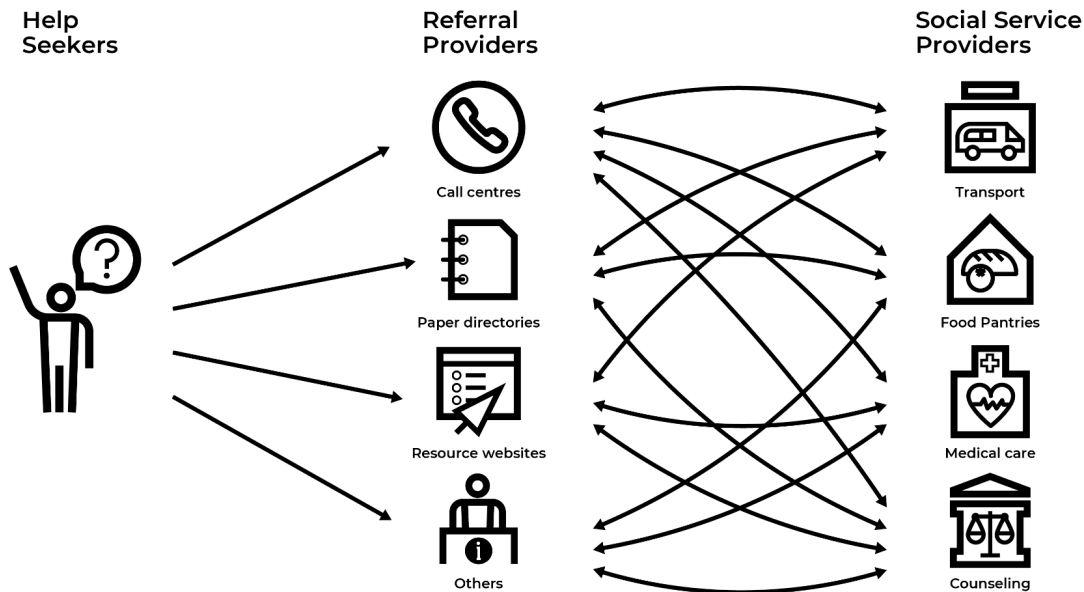
[See our explainer videos here »](#)

Check our summary diagrams on the next page – and [access all of these materials in our new whitepaper!](#)

Open Referral: A Graphic Summary

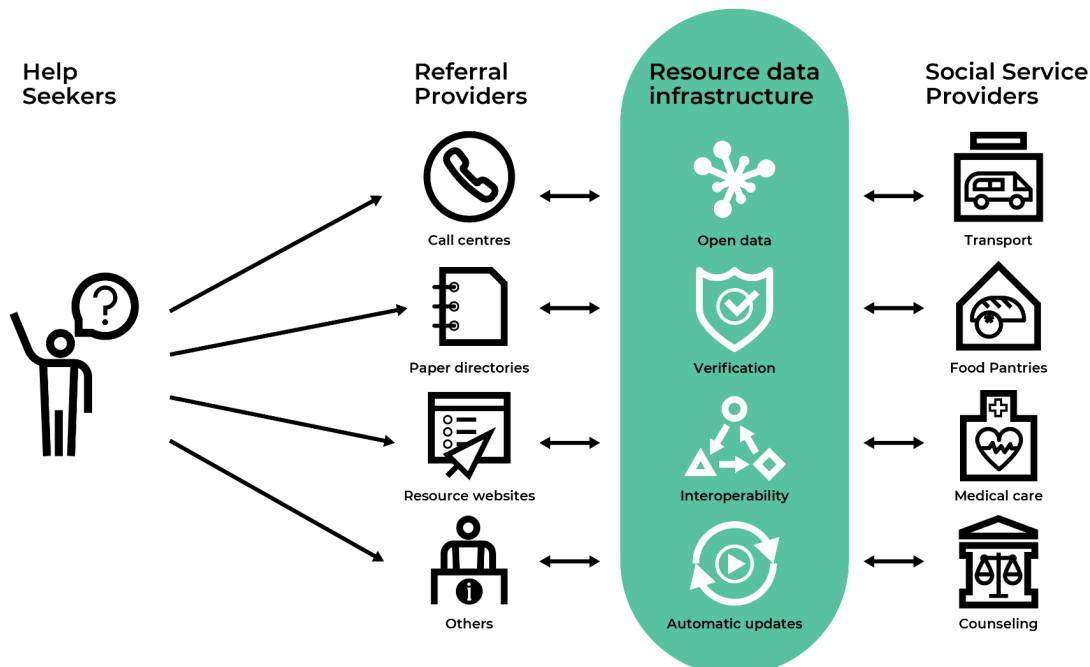
The status quo: Fragmented silos

Many referral providers collect directory information about health, human, and social services. However, these directories are all trapped in silos that can't 'talk' to each other, limiting accessibility and accuracy of this crucial data.



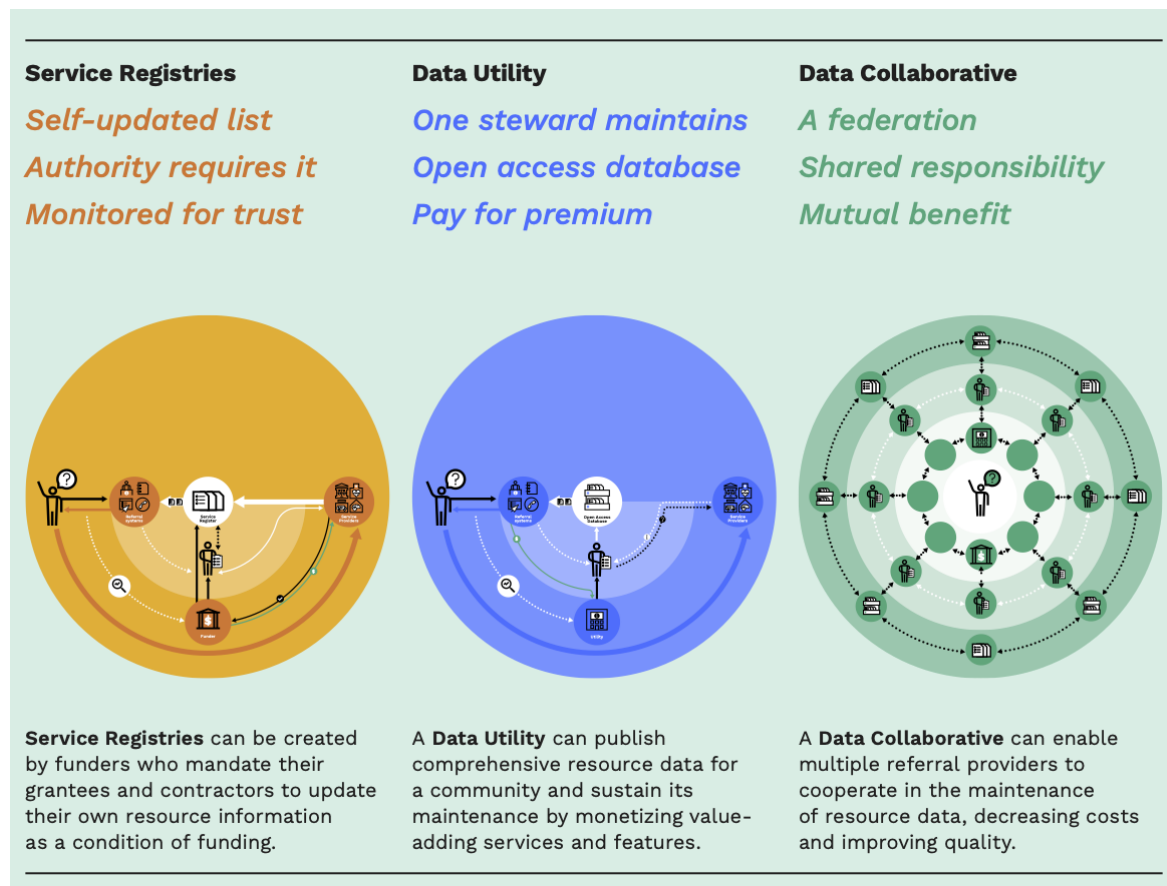
Our vision: Open infrastructure for a healthy ecosystem

Open Referral develops interoperable resource data infrastructure. We don't sell a product; rather, we help communities find solutions that meet their own needs.



Our Playbook: Developing Sustainable Data Supply Chain Strategies

Solving the resource data problem requires more than just technical interoperability. Indeed, success entails transforming the business of resource data management. In partnership with **the Ostrom Workshop on the Commons at Indiana University**, we published an academic paper in 2021, developed a set of infographics in 2022, and finally in 2023 published a whitepaper that synthesizes years of research and development of infrastructural supply chain strategies.



[Read our whitepaper here](#) to learn more about each of these strategies and how they relate to each other.

In 2024, we've received funding to evolve this whitepaper into a participatory research and design toolkit that will help communities develop their own supply chain strategies!

Would you like to get involved? [Reach out to discuss.](#)

Community Spotlights

Here are a few examples of pilot initiatives across our network.

Thriving North Central Washington

Caroline Tillier, Director of Strategy and Community Integration

[Thriving Together NCW](#) is one of nine Accountable Communities of Health in Washington State. Working alongside a network of partners across four counties and one tribal nation, we facilitate collaborative planning and action so that all people and places feel they are thriving - no exceptions.

We have many capacity building initiatives in play to improve health and wellbeing, including long-standing efforts to improve and connect systems of care. Inevitably, care coordination, information exchange, referrals and resource data management come into play – and like many communities, we have struggled with seemingly intractable challenges, including the resource directory dilemma.

My first exposure to Open Referral came in 2021 through an affinity group focused on *Re-imagining Technology in Support of Cross-Sector Referral and Care Coordination*. I gobbled up Greg's white papers and resources. Why? Because they offer different models for breaking down fragmented, redundant, silos – ones that stay vendor agnostic, don't assume centralization is always key, and underscore the importance of human resources (not just technology).

When our partners prioritized improvements to resource data information as a primary goal, I contacted Open Referral's leadership for technical assistance. Greg helped us learn from what was already going well in our community – and then helped design and facilitate a participatory process in which we articulated a shared vision, values, principles, and strategy for developing a healthy resource information ecosystem. We're entering 2024 [ready to invest in the next phase of resource directory infrastructure pilots!](#)



June 2023: Greg joined and co-facilitated our Resource Directory Workgroup retreat. Partners collaboratively mapped our current "resource information ecosystem" and co-designed partnership models that could improve the quality and access to resource information.

Maryland Information Network and the 2-1-1 Maryland 'data as a service'

Quinton Askew, Executive Director of Maryland Information network

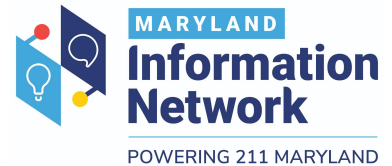
The Maryland Information Network administers the 2-1-1 system in Maryland. In 2023, we partnered with Open Referral to develop a groundbreaking partnership with CRISP – Maryland's Health Information Exchange – and Maryland's Department of Health (MDH). The results provide us a glimpse of a future in which reliable information about social services is easy to find and use wherever people might be able to benefit from it – including right in your doctor's office.

Primary care providers across Maryland want to help their patients access social services that address their health-related social needs. So MIN now provides CRISP with resource directory data "as a service" (via API). This enables users of CRISP's IT infrastructure to access information about social services directly within their workflow. This includes CRISP's innovative social care referral system, through which clinical providers can refer patients directly to participating non-profit organizations that address specific social needs.

Previously, CRISP had to manually maintain data about services provided by each partner in its referral program. CRISP can now receive and deliver data about the partners in its social care referral program directly from MIN's database – which reduces duplication, and enables new kinds of analytics as users access the same data across multiple systems.

Open Referral is also helping us upgrade our systems for receiving and responding to feedback about data quality from users across the many systems that now receive and share this resource data with help-seekers.

Together, we're transforming 2-1-1 into the nervous system of health and human services – critical infrastructure for the transformative integration of healthcare and social care.



Progress in 2023

Upgrading our standards and tools

Human Service Data Specs version 3.0 is here.

In 2023, our community-driven workgroup – including stakeholders from the U.S., Canada, and the U.K. – oversaw implementation of a major upgrade to HSDS. This iteration adopts an API-forward approach, to support real-time resource data access via streamlined protocols for web services. **To get involved, review [our Docs site](#), visit [our Github repo](#), join [the Forum](#), or reach out to info@openreferral.org.**



Introducing: HSDS Profiles

HSDS takes a 'minimally viable' approach to specifying requirements for information about human services – recognizing that the domain of all services is vast and it wouldn't be feasible to specify all kinds of possibly relevant data. At the same time, we also want to enable communities in specific subdomains (whether geographic or topical) to be able to adapt the standard to meet their particular needs. **[HSDS 3.0 supports the development of 'profiles' of the standard](#), in which communities can customize the specifications to meet their needs, while preserving interoperability across our network.** Open Referral UK has developed a UK HSDS profile that is now their national standard. Learn more [here](#).



Community forum: join us on Discourse!

We've recently partnered with the Open Referral UK network to adopt their Discourse forum and open it up to the entire Open Referral community! **Go to forum.openreferral.org to join** (or start!) discussions about a range of topics pertaining to resource directory information and Open Referral.

Integrating human services and healthcare

Fast Healthcare Interoperability Resources: bridging healthcare and human services

To better address the “social determinants of health” – i.e., non-medical factors that impact health outcomes – healthcare institutions are increasingly seeking to connect clinical patients with social services. [The Gravity Project is a national initiative to foster interoperability between clinical and social care settings](#), in part by expanding the set of standards for electronic medical record exchange, such as **HL7’s Fast Healthcare Interoperability Resources (FHIR)**. In 2023, [HL7 approved our proposed alignment of HSDS with FHIR’s protocols for healthcare provider directory data exchange](#). Many thanks to the Gravity Project and the federal Administration for Community Living for their support. This year we will further develop tooling and best practices to support healthcare-to-social-care integration and coordination.



Vendor adoption: Resource Referral Platforms

In 2023 we saw more vendors and technology providers adopting Open Referral's standards to develop resource referral information systems – **such as allco, developed by WellConnected, and used by a range of 2-1-1 providers throughout the state of New York and beyond**. Designed specifically to leverage the strengths of 2-1-1 as a community-based resource referral provider, allco is a social care coordination platform that connects providers and clients to each other across an integrated network. [Learn more here!](#)

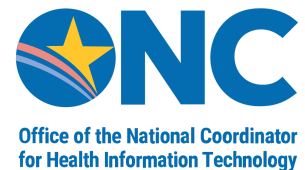
Community Information Exchanges

Resource data is a key piece of the puzzle known as "Community Information Exchange" (CIE). CIE refers to infrastructure that enables integration of health, human, and social services – by enabling data about people and resources to be shared across sectors, organizations, and technologies. In addition to provider directory information, this entails sharing information about people: who is seeking help, what needs they have, and how those needs are being met (or not) across an array of different service providers in a community.

Over the past few years, we've contributed insights about the resource directory information piece of the puzzle to a range of CIE initiatives – and this year we synthesized the findings from a range of these conversations in partnership with a range of non-profit, state, and federal partners. For instance, Greg Bloom facilitated [the Utah Governor's Committee for Community Information Exchange](#) in partnership with United Way of Salt Lake; and also [the Michigan Department of Health and Human Services' CIE Task Force](#).

On a related note, in 2023 Department of Health and Human Services' **Office of the National Coordinator of Health Information Technology (ONC)** published [the "Social Determinants of Health Information Exchange toolkit"](#) to guide communities through the process of establishing interoperability among healthcare and human service systems. We helped facilitate dialogues among subject matter experts across the health and human service sectors, and co-produced the final report.

We are excited to see this practice of community-driven CIE development expand in future years – [reach out to learn more!](#)



The road ahead: Growing our ecosystem

Open Referral is taking on new challenges at greater scales. Here's a look at what's to come.

Deepening our collaboration with Inform USA. Formerly known as the Alliance of Information and Referral Systems, Inform USA represents the human service information and referral industry, including about a thousand referral providers across the country. Open Referral's founder, Greg Bloom, has begun 2024 in a new position as Inform USA's Senior Director of Strategy and Partnerships. Open Referral will remain an independent community of practice, while we explore opportunities to work together across our networks.

Updating our tools. As HSDS evolves, we need to help adopters leverage these standards to the fullest extent. In 2024, we will upgrade our data validator, and develop other tools that make it easy to produce, share, and use resource directory data. [Join our Forum](#) to help prioritize this roadmap!

Addressing the eligibility criteria challenge. From public benefits to legal aid and beyond, complicated eligibility criteria pose challenges for getting the right information about the right resources to the right people. Many groups perform the painstaking, redundant labor of translating policy documents into machine-readable code. There can be a better way!

Evolving our governance model. As our network grows, we must continue to build capacity to make wise decisions together. This year, we'll consider opportunities to promote more leadership across our network, balance the varied interests of our community, and get things done.

Interested in exploring any of these opportunities further?

Reach out to info@openreferral.org.

Together, we will transform these systems!

Acknowledgments

More people and organizations make our work possible than we can reasonably fit on a page. We appreciate and thank the hundreds of leaders, stakeholders, and experts across our network who guide this work.

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Open Data Services Cooperative – Technical Stewards

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Aspiration – Fiscal Sponsor

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Kate Wing, **Intertidal Agency**

Bianca Wylie, **DigitalPublic**

Thank you for reading!

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[Reach out.](#) Or join [our Community Forum](#) today!