

Community & Clinical Data Initiative Overview



THE ISSUE

A complete picture of a person's health relies on comprehensive data that brings together information about their clinical care and the services and programs they receive from community-based organizations (CBOs) or government agencies to improve health and quality of life.

The current health data ecosystem is dominated by clinical data and often excludes data from CBOs or government agencies that are fragmented across many organizations in siloed information systems.

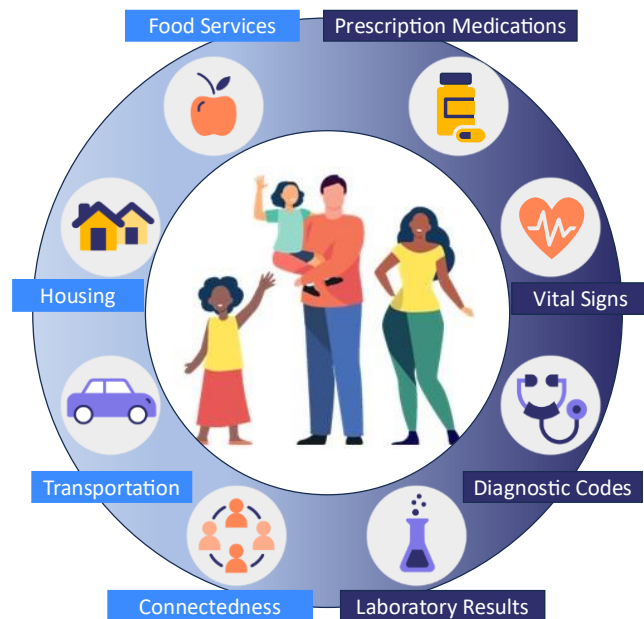
Without connected clinical and community data, understanding the impact of community programs and services on population health outcomes, like chronic disease, is challenging.



THE SOLUTION

The Community and Clinical Data Initiative (CODI) is a technology and partnership model, originally pioneered by the Centers for Disease Control and Prevention, that aims to improve health by connecting clinical and community data across the siloed health information landscape for research, evaluation, quality improvement, and public health.

CODI brings together people, processes and technology to build locally owned infrastructure that can paint a more complete picture of health in a community. CODI has been implemented in Colorado, North Carolina, and Maryland with focuses on childhood obesity, chronic disease, and food insecurity, respectively. Each implementation engaged different types of community partners and focused on different health outcomes, highlighting how the CODI model can be adapted based on local needs.



IMPACT OF CODI

CODI benefits many types of organizations, including:

- **CBOs** who gain the ability to measure and advocate for programs and services that drive meaningful change
- **Healthcare providers** who can learn more about the impact of the programs and services their patients receive
- **Policymakers** who can improve health through strategic investment in programs and services

Community partners implementing CODI can expect the following:

- Increased data sharing will enable innovative analyses to measure the impact of programs and services
- New and meaningful insights will be gained about people served, while protecting individual-level privacy
- Stronger partnerships and increased technical readiness will lay the groundwork for future initiatives and streamlined partnerships



IMPLEMENTING CODI

Through three implementations, the CODI model has developed two distinct technical approaches: a distributed network approach and a health information exchange (HIE) centered approach that are described in the table below. CODI implementations have shown that the HIE-centric approach has lower costs and is more likely to be sustained and extended.

Data Sharing Approach	Distributed Network	HIE-Centric
Applicable Implementation(s)	Colorado and North Carolina	Maryland
HIE partner required?	No	Yes
Benefits	Links data without sharing personally identifiable information and data stays with each participating partner	Leverages HIE infrastructure resulting in limited technical build, faster implementation, and lower costs
Key Challenge(s)	Time to establish data governance and sustainability costs	HIE translation of the model
Resources	https://phii.org/course/codi-toolbox/	https://mitre.github.io/codi/

GETTING STARTED

The CODI Model and resources are open-source and free to use. To learn more:

- [Get started](#) with an introduction to CODI and an overview of requirements
- Explore [preparation, discovery, and planning resources](#) to better understand the HIE-centric CODI model, assess readiness in your community, and plan an implementation
- Review examples of [communities using CODI](#)