



## **Summary of Critical Values and Strategies from the History of the Future Challenge Groups**

**Strategies:** Structural, cultural or personal interventions or strategies

### **COMMUNITY** (*most popular on retreat evaluations*)

Organize outreach to political partners to disseminate experience and educate on models of best practice  
Research in partnership with community - Epi, Mech of disease, therapy new meds and modes of care  
Public education campaign - decrease stigma externally, locally, nationally and within UCSF community  
Multidisciplinary coordinated teams partnering with community  
Rapid translation of findings from data into the clinical realm to improve the lives of patients and communities  
Community engagement core: to create a new model of personalized high value care delivery with a new breed of interdisciplinary providers as community bridges (e.g., bring care to the patient—in their homes, community, clinics, etc.)  
0-8 Commission- Bay Area wide to tackle the educational/health goal a) 100% 3rd graders reading at grade level, b) 100% access to evidence based oral and medical health services. Use local first 5 to convene  
Regional screening and referral effort starting with prenatal providers, using outreach workers etc  
Standard tools to communicate between schools, health and dental providers, innovative partnerships  
A strategic plan to engage stakeholders such as local and regional policymakers

### **WORKPLACE** (*2nd most popular on retreat evaluations*)

Model best practices directly in the UCSF community (housing childcare); engage department chairs to encourage participation of faculty/staff; include social determinants in the EMR  
Provide all the tools and information to succeed, including communications strategy  
Create clear career paths with modifiable ceiling, with clear and fair expectations around performance  
Encourage risk-taking and innovation, and celebrate each other and our successes along the way  
Building a network of scientists who span the entire spectrum of inquiry from basic, to translational, to informatics, to clinical, to social/behavioral who work together on a shared goal of eliminating diabetes  
Working as a team where the collective group is rewarded for advances rather than an individual. Putting "team science" into action  
Use a bottom-up approach to tackle multiple bold and challenging ideas across campus (our "Manhattan Project")

### **DATA**

Foundational training for everyone "TICK" for big data  
Training for new experts DDD degree (Deep Data Diver)  
Infrastructure to connect data and people  
Methods/Implementation/Evaluation Core: to develop the scientific expertise to use collected longitudinal data from the living well laboratory to provide real-time feedback to improve care and accelerate science on decreasing stress and increasing resilience over the life course.  
Precision Prevention Core: to develop and use novel technologies for data collection, continuous process improvement and scientific advancements in real world practice to personalize prevention that will decrease stress and increase resilience over the life course.

### **EQUITY**

Systemic universal screening for social and environmental factors that impact health  
Doubling the number of faculty of color at UCSF

## **RESEARCH**

Synthesize, disseminate translational research; make the case for research; highlight priority interventions  
CA State policy dictates everyone sequenced with equal access to its potential  
Sequencing is made actionable/interpretable with analytics and science driving improved health outcomes  
Genome data is applied to choice of specific therapies in all patients with targeted "high burden" SF conditions (eg  
mental health, substance abuse, DM, lung cancer)  
Standardization of patients, samples, diagnostic markers and tracking of outcomes

## **CLINICAL**

Integration of care - EMR, families, economists, primary care/psych/peds/social workers  
Provision of mental health treatment slots for referring those patients who came into the healthcare system as victims of  
gun violence  
More community based violence case managers and evidence-based impactful interventions

## **COMMUNICATION**

Improve communication to engage all levels in brainstorming and execution of these bold ideas

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**Values:** Core institutional values

## **EQUITY**

Equity, social justice  
Evidence-based activism  
Be authentically and radically inclusive  
Healthcare equity  
Decrease burden of cost of illness  
Equity  
Inclusiveness and representation of all—both in collecting the data and questions, and in the applicability of the results.  
Health Equity  
Equity

## **COLLABORATION**

Team science and care  
Collaboration/team oriented  
Non-hierarchical  
Coordination  
Community Collaboration

## **COMMUNICATION**

Communication

## **INNOVATION**

Drive for innovation and excellence  
Innovation and Dissemination  
Innovation

## **WORKPLACE**

Care for each other first by investing in the health and wellbeing of our people  
Learning Community

## **OTHER**

Authenticity  
Respect  
Patient-centered  
Trust  
Boldness  
Nimble/Fast  
Excellence  
Start Early (prenatal engagement)