

# CARE COORDINATION RESOURCE LIST

Here is a selection of resources to help you implement or enhance care coordination efforts in your organization.

## **NTOCC**

### **National Transitions of Care Coalition**

[www.ntocc.org](http://www.ntocc.org)

NTOCC is a not-for-profit organization that is dedicated to filling the gaps that occur when patients leave one care setting and move to another. NTOCC has developed tools and resources to help stakeholders—healthcare professionals, consumers, and policymakers—address the challenges of meeting the needs of patients transitioning between care settings. For more information, go to: <http://www.ntocc.org/Home.aspx>

The **Transitions of Care (TOC) Compendium** is an extensive collection of resources including white papers, articles, and website links, arranged by care strategy and by care setting. There is no charge to access the Compendium, which can be found at: <http://www.ntocc.org/Toolbox>

#### **Other resources offered by NTOCC include:**

- Transitions of Care Evaluation Software<sup>SM</sup>, a free web-based tool designed to facilitate data entry, analysis and report generation
- TOC Summits, one-day events that bring together healthcare professionals, patient and caregiver advocates, thought leaders, and partner representatives. Subscribers receive notifications of upcoming summits
- Virtual events, including webinars and software demonstrations
- Latest news

Individuals can join to receive updates on NTOCC activities and tools. Organizations can support the work of NTOCC by becoming Associate Members. There is no charge for membership.

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## **Healthcare Information and Management Systems Society (HIMSS)**

[www.HIMSS.org](http://www.HIMSS.org)

HIMSS is a global, cause-based, not-for-profit organization that is working to optimize health engagements and care outcomes using information technology. HIMSS has produced a Continuity of Care (COC) Guide for Ambulatory Medical Practices and numerous COC resources, including several for people with type 2 diabetes.

The COC Guide can be found at:

<http://www.himss.org/ResourceLibrary/ResourceDetail.aspx?ItemNumber=10535>

## Improving Chronic Illness Care (ICIC)

[www.improvingchroniccare.org](http://www.improvingchroniccare.org)

This organization is dedicated to improving the health of chronically ill people by helping health systems, particularly those serving low-income populations, improve their care through the implementation of the Chronic Care Model. They offer information and resources, including a Care Coordination Toolkit and Model, as described below.

### Reducing Care Fragmentation: A Toolkit for Coordinating Care

This is a set of resources designed for clinics, practices, and health systems that are focused on improving care coordination by transforming the way they manage patient referrals and transitions. The toolkit was created to ease the challenges of providing coordinated care.

#### Downloadable resources in the Toolkit include:

- Reducing Care Fragmentation: A Toolkit for Coordinating Care
- Executive Summary
- Presentation: Reducing Care Fragmentation: Presentation on Coordinating Care
- Presentation: Key Changes and Resources for Care Coordination (Reducing Care Fragmentation in Primary Care)

The **Toolkit** is located at:

[http://www.improvingchroniccare.org/index.php?p=Care\\_Coordination&s=326](http://www.improvingchroniccare.org/index.php?p=Care_Coordination&s=326)

The **Care Coordination Model** is located at:

[http://www.improvingchroniccare.org/index.php?p=Care\\_Coordination\\_Model&s=353](http://www.improvingchroniccare.org/index.php?p=Care_Coordination_Model&s=353)

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## Agency for Healthcare Research and Quality (AHRQ)

[www.ahrq.gov](http://www.ahrq.gov)

AHRQ provides a definition and examples of care coordination, along with an explanation of why care coordination is important. You will also find here a selection of downloadable presentations from the AHRQ Annual Conferences, and a collection of resources called “How Can Care Coordination Be Put Into Action?” that includes papers, briefs, manuals, and citations. Some of the resources include:

- Care Coordination Measures Atlas
- Care Coordination Accountability Measures for Primary Care Practice
- The Roles of Patient-Centered Medical Homes and Accountable Care Organizations in Coordinating Patient Care

These resources are located at:

<http://www.ahrq.gov/professionals/prevention-chronic-care/improve/coordination/index.html>

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## AHRQ Health Care Innovations Exchange

[www.innovations.ahrq.gov](http://www.innovations.ahrq.gov)

This is an online information hub for resources and information designed to help solve problems, improve health care quality, and reduce disparities. The Exchange offers evidence-based innovations and quality tools. New innovations and tools are published biweekly. The site includes papers, electronic resources, tools, and practical information about how to implement innovations. A selection of diabetes-related innovations may be found at:

<https://innovations.ahrq.gov/narrow-by-subjects/?term=1096>

**CarePath** | **Healthy Engagements**

CarePath Healthy Engagements is a comprehensive program designed to help improve the lives of people living with type 2 diabetes and assist those that care for them. [CarePathHealthyEngagements.com](http://CarePathHealthyEngagements.com)

This information has been developed by Janssen Pharmaceuticals, Inc., and made widely available to support patient and provider education.