

## ***Executive Summary***

The National Transitions of Care Coalition (NTOCC) and its multidisciplinary team of health care leaders are committed to improving the quality of transitions of care. To this end, they have collaborated to provide an example strategy for institutions in improving their own performance in patient-centered transitions of care.

This guidebook, “Improving on Transitions of Care: How to Implement and Evaluate a Plan,” was created to provide institutions and their staff with basic concepts of evaluation in an easy to read format. A case scenario of a patient leaving one care setting (i.e. hospital, nursing home, assisted living facility, SNF, primary care physician, home health, or specialist) and moving to another is used to illustrate the process.

This guidebook is intended for institutions ready to make changes in the processes their facilities use to send and receive patients. The strategy includes an educational component about transitions of care, implementation manual, and evaluation methodology. This guidebook strongly encourages those interested in transitions of care to take advantage of the published efforts of other individuals and organizations that have implemented strategies and offered their tools and ideas to help others affect change in their institutions.

### ***Using this guidebook***

So how does an organization start making changes? Start by keeping it simple, and add complexity as proficiency is gained in determining the current state, implementation planning, and evaluation. The case example presented represents patients experiencing the bi-directional transfer from nursing facility to hospital.

Each transition point is treated as an exchange. Each exchange is where communication occurs and where evaluation may occur as well. For our case example, the exchanges are outlined as follows:

**Case study:** In a nursing home to hospital bi-directional transfer, you may consider that there are six exchanges

- Exchange 1: Preparation in nursing home to transfer patient to hospital
- Exchange 2: EMS/Ambulance transport
- Exchange 3: Hospital receipt of patient
- Exchange 4: Preparation in hospital to transfer patient back to nursing home
- Exchange 5: EMS/Ambulance transport
- Exchange 6: Nursing home receipt of patient

For each Exchange, we further divide the process into seven actionable steps. These steps are described in detail in Exchange 1, and described in brief for each of the Exchanges in the appendix.

Sections of this guidebook are described briefly below.

### ***Introduction***

This section serves as a basic overview of why transitions of care has become a national health care quality priority. This information may be helpful for those who want a general understanding of the issues and challenges posed by this difficult but necessary aspect of health care.

### ***Background***

Included here is a more detailed description of the problems that occur during transitions, and what NTOCC has determined to be their recommendations for improving transitions of care. This information could be used to gain support from leadership and other stakeholders for justifying the need for implementing and evaluating a plan.

### ***Evaluating and Improving Transitions of Care in Your Institution***

The concept of the seven steps to implementing and evaluating the plan is introduced in this section. For Exchange 1, the nursing home to hospital segment of the transition, a thorough explanation of each step is outlined and discussed.

The discussion includes:

- Framing the transition in terms of structure, process, and outcomes
- Creating a process map
- Writing key evaluation questions
- Measuring and reporting performance
- Implementing a strategy to address deficiencies

Sample evaluation questions, data collection forms, data results, and interventions are offered to provide the reader a better understanding of the concepts. Practical ideas, available resources, tools, and websites are incorporated where appropriate to help institutions get started. Following the seven steps for Exchange 1 is a concise review of the remaining Exchanges in the bi-directional transfer case scenario.

## **Appendices**

The details of exchanges two through six are included here, so as to make the main document easier to navigate. The remainder of the appendices includes a variety of tools, background information, and references. The list, as included in the guidebook, is as follows:

- EMS/Ambulance Transfer of Patient from a Nursing Home to Hospital
- Hospital Receipt of Patient from Nursing Home
- ED/Hospital to Nursing Home Transfer
- EMS Transport of Patient to Nursing Facility
- Nursing Home Receipt of Patient from the Hospital
- Evaluation: A Basic Primer
- Literature Review – Transitions from the nursing home to and from the hospital
- Institute for Healthcare Improvement Tips for Effective Measures
- NTOCC Tools
  - Suggested Common/Essential Data Elements for Medication Reconciliation
  - Elements of Excellence in Transition of Care Checklist
  - My Medicine List
  - Taking Care of MY Health Care
- NTOCC Proposed Framework for Measuring Transitions of Care
- Annotated Bibliography

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**For more information, please visit the NTOCC website, [www.ntocc.org](http://www.ntocc.org)**