ntocc supporting organizations

- Academy of Managed Care Pharmacy (AMCP)
- American Association of Homes and Services for the Aging (AAHSA)
- American College of Healthcare Executives (ACHE)
- American Geriatrics Society (AGS)
- American Medical Directors Association (AMDA)
- American Medical Group Association (AMGA)
- American Society for Healthcare Risk Management
- American Society on Aging (ASA)
- American Society of Consultant Pharmacists (ASCP)
- American Society of Health-System Pharmacists (ASHP)
- AXA Assistance USA Inc.
- Case Management Society of America (CMSA)
- Consumers Advancing Patient Safety (CAPS)
- Health Services Advisory Group (HSAG)
- Institute of Healthcare Improvement (IHI)
- Joint Commission International Center for Patient Safety (ICPS)
- Lipitz Center for Integrated Health Care
- Mid-America Coalition on Health Care (MACHC)
- National Association of Directors of Nursing Administration -Long Term Care (NADONA / LTC)
- National Association of Social Workers (NASW)
- National Business Coalition on Health (NBCH)
- National Case Management Network of Canada (NCMN)
- National Family Caregivers Association
- National Quality Forum (NQF)
- Predictive Health, LLC
- sanofi-aventis U.S.
- Society of Hospital Medicine (SHM)
- The Joint Commission Disease-Specific Care Certification
- United Health Group (UHG)
- Veterans Administration. Office of Patient Care Services

how do I learn more?

Go to the National Transitions of Care Coalition Website: www.ntocc.org

Those interested in transitions of care issues can receive the latest information, resources and tools we provide at www.ntocc.org. There are two ways to connect with NTOCC:

- 1) Join either as a general SUBSCRIBER if you simply want to keep abreast of the issues.
- 2) Join as an ASSOCIATE if you desire access to all our tools and

It is easy to join and there is NO CHARGE! Simply visit the website and click on the desired level of membership in the upper right hand corner of the home page. Fill out the application (all information in red MUST be completed) and submit. You should receive a confirmation in 7 – 10 days.

How can I be more involved in NTOCC and the Coalition's work?

We encourage anyone who wants to comment on transitions of care issues and the NTOCC tools and resources to give us feedback. A form is provided on the home page at www.ntocc.org. All we ask is that you comment on one subject/tool at a time. This helps us better review the comments and use your information as we move forward in tool and resource development and communication of information.

Can I use your tools and resources?

Absolutely! NTOCC tools and resources were purposely developed as a "template" which can be adapted and changed to meet the specific care setting you have. No copyrights exist for NTOCC tools or resources. Feel free to edit, copy and distribute to help improve transitions of care.

Does NTOCC have conferences. training sessions or informational meetings?

At this time NTOCC has not planned a conference. However, we have a number of NTOCC spokespersons who present the NTOCC story, and informational meetings are scheduled on occasion. For more information, contact Debbie White, NTOCC Project Coordinator, at: dwhite@acminet.com.

NTOCC is chaired and coordinated by the Case Management Society of America in partnership with sanofi-aventis U.S.



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Across the Continuum . . .



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- Information
- Tools



- Resources
- Advocacy



- Technology
- Education



- Innovation
- Solutions

... To Patients, Caregivers, & Providers

about ntocc



NTOCC was formed in 2006 to address a serious issue, transitions of care, which has accompanied the complex growth of the U.S. health care system.

Along with a multitude of

advancements in health care, many now realize that gaps often occur when patients leave one care setting and move to another. Gaps and barriers produce negative outcomes which result across the continuum of care ... from patient caregiver to payer cost.

What initially was considered a national issue has "gone global" as other countries experience the same issues. Today, our military personnel are moved through multiple settings as severely injured soldiers return from battlefield care, international hospitals, and, many times, eventually into long-term care settings in the States. This level of care adds layers of communication barriers.

From NTOCC's inception it was clear impact on this issue would not be realized unless all stakeholders came together. Therefore, NTOCC is comprised of a wide range of diverse professionals representing over 30 organizations, including health care experts from various settings, providers, payers, patients and care givers.

NTOCC's goals and objectives remain focused on:

- Being the information and resource leader for transitions of care information
- Serving as a catalyst for change in improving transitions of care
- Providing a call to action for policy makers and health care providers through effective policy statements and qualitative evidence of the benefits from improved transitions
- Showcasing best practices and sharing this information with the industry, patient and caregiver.



Over 30 countries have sought tools and resources at www.ntocc.org.















ntocc tools & resources

Policy Paper:

Created by the NTOCC Advisory Task Force, this detailed concept paper outlines steps to be considered by the policy makers and media to improve transition performance.

My Medicine List:

My Medicine List is designed to help patients improve their understanding of their current medicine regimens including why they need to take the medication and for how long.

Taking Care of MY Health Care:

Developed as a guide for patients and caregivers, this tool helps them prepare for visits with health care professionals by providing information and questions they need to ask. A convenient format allows patients to keep updated lists of medications and the next steps in their care.

Transitions of Care Checklist:

Provided here is a detailed description of effective patient transfer between practice settings.

How to Implement and Evaluate a Plan:

This outlines the concepts, process, and steps to implement and evaluate a plan to improve transitions.

Medication Reconciliation Essential Data Specification:

These consensus elements will help health care professionals collect, transmit and receive critical medication information needed when patients move from one setting or level of care to another.

Transitions of Care Measures:

This Concept Paper by the NTOCC Measures Work Group contains a summary of an environmental scan of existing measures that are applicable to care transitions and highlights the Work Group's recommendations.

Informational Slide Deck:

Download this presentation at www.ntocc.org and learn or share more information about how transitions of care impact care delivery and how you can use NTOCC tools to improve transitions.

five ntocc work groups

Initially, the NTOCC Advisory Task Force created four work groups to address key areas associated with transitions of care. Its newest work group is Health Information & Technology. Various organizations on the Advisory Task Force collaborate within each work group to discuss solutions and create resources.

Education & Awareness:

Working to address awareness and general knowledge about the problems associated with transitions of care and providing the necessary information to various stakeholders – patients, caregivers, health care professionals, policy makers, and the media.

Tools & Resources:

Identifying practical tools and resources that can be used by health care professionals, care givers and patients to improve communication in a consistent manner between care settings and reduce risk associated with care transitions.

Policy & Advocacy:

Assessing ways to improve care through enhanced communication tools, collaborative partnership and enhanced reimbursement for transitional care support and technical medical information shared between care settings.

Performance & Metrics:

Assessing and defining appropriate performance measurement frameworks to demonstrate the impact of interventions on reducing risk associated with transitional care.

Health Information & Technology:

Charged with developing a Concept Paper ensuring future electronic medical records include essential elements and interoperable access across the global health care continuum.