

Contra Costa Care Transitions Coalition Charter

Who We Are

The Contra Costa Care Transitions Coalition is a group of transitional care providers interested in improving care transitions and reducing avoidable hospital readmissions.

Mission

The mission of the Coalition is to bring cohesion across the entire care continuum to ensure a high standard of care and patient safety. We accomplish this goal by partnering with hospitals and community providers on care transition efforts that support countywide process improvement.

Vision

The vision is to deliver the highest quality healthcare for the Contra Costa community through a coordinated, collaborative approach.

Purpose

- Build and sustain a community coalition focused on improving transitions of care.
- Collaborate, encourage and align efforts of organizations with shared visions.
- Share evidence-based models of care and best practices.
- Utilize various sources of data to identify readmission rates and track interventions.

Collaborative Goals

- Engage healthcare, service agency providers and other stakeholders in a community-based, patient centered effort to improve care transitions among provider settings.
- Identify causes of ineffective care transitions.
- Select interventions to solve problems, identify measures of success (process and outcome measures), collect data and report results to the Collaborative members.
- Reduce 30-day hospital readmission rates in Contra Costa County by Calendar Year (CY) 2018.
Two measures to evaluate our success include:
 - Reduce hospital readmission rate by 10% from CY 2014 to CY 2018.
 - Reduce hospital readmissions per 1,000 Medicare fee for service beneficiaries living in Contra Costa County by 20% by CY 2018.

Coalition Member Responsibilities

Meeting Attendance

Participation in the Coalition is voluntary. However, consistent representation from each sector of the care continuum is vital and necessary. Members agree to attend meetings in person or through teleconference/WebEx. Members can send a designee to meetings in their absence.

Task Force

The Coalition will maintain a shared and decentralized leadership structure with dedicated and committed members that will serve as the Task Force to the Coalition. The Task Force will work with the Coalition to re-evaluate and recommit to the charter annually to assure ongoing commitment to community goals.

Commitment

Members shall join in a commitment to:

- Share best practices, knowledge, and intervention outcomes.
- Mentor and/or partner with other organizations in the Coalition as opportunities present themselves, in efforts related to the Coalition goals.

- Share data and support analyses.
- Promote implementation of evidence-based interventions.

Improvement Activities

The Coalition will participate in process improvement activities to examine the causes of poor care coordination, develop a logic model to guide activities, identify and support the implementation of interventions in their organization and participate in the measurement of the success of interventions. Coalition members agree to share intervention process and outcomes data to support the goal of improving care transitions. The data may include standardized quality measures, patient experience measures, adverse drug event measures, medication reconciliation measures, or other improvement-focused measures.

Conflicts

No one may profit financially from membership in the Coalition by sales or solicitation at meetings or workshops. Participants will disclose any actual or potential conflicts of interest to the Steering Committee or other designee. Coalition members agree to sign a conflict of interest form for the betterment of the community to improve processes aimed at achieving quality outcomes.

Confidentiality

The Coalition members shall maintain and safeguard the confidentiality of contact information. Use of Coalition contact information is expressly prohibited for anything other than care transitions related business. Information shared by the task force or the coalition is considered proprietary and cannot be shared with third parties without the express written consent of its members.

Decision Making

In the spirit of the Coalition mission, all Coalition business shall be conducted based on the philosophy of mutual respect. The Task Force and Coalition will use consensus decision making.

Collaborative Members

The Coalition is made up of participating stakeholders, including the following:

- Acute care hospitals
- Long term acute care hospitals
- Nursing facilities
- Home health agencies
- Home care agencies
- Hospice agencies
- Provider offices and group practices
- Pharmacies
- Advocacy and service organizations
- State and local government health departments and licensing agencies
- Major purchasers and payers of healthcare
- Patient Safety and Quality Improvement Organizations
- Other healthcare providers