

Coordinated Care Network Model

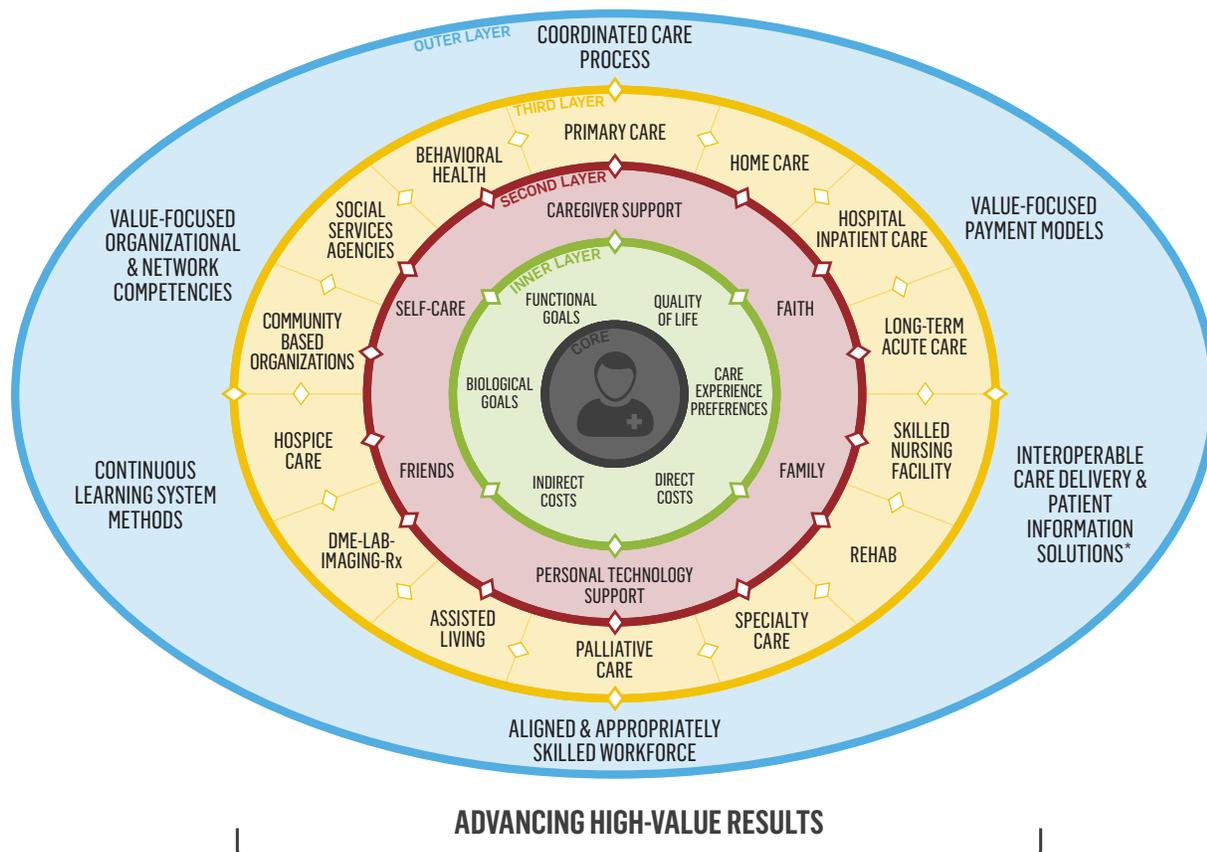
The Vision: Post-Acute Care (PAC) shifts to a “Coordinated Care Network (CCN)”

Fundamental to a transformation of the post-acute care space is having the right mindset, a clear focus on why change is needed. For most healthcare practitioners, that “why” stems from a sincere desire to care for people – to help people achieve the best possible outcomes for their circumstances. As such, the Cohort proposes using the term “Coordinated Care Network (CCN)” instead of PAC to help practitioners and healthcare leaders stay focused on the “why” as they seek to transform the PAC space – and healthcare overall – to an aligned and coordinated set of care services that optimize the care experience, health outcomes, and utilization of services for every patient in the target populations based on their whole-person needs, preferences, and circumstances.⁴

The conceptual model of the mechanisms and care delivery services envisioned in the CCN (Figure 1) visually displays the appropriate centering of all functions for the “job to be done.” As illustrated by the links displayed between and within the layers of the conceptual model, the CCN necessitates an intentional linkage of the patient characteristics, care delivery services, and core mechanisms that drive success.

The content within each layer in the conceptual model is briefly described below.

- CORE:** The person served by the CCN – their physiological and psychological state
- INNER LAYER:** The patient’s status, goals, and preferences that drive the functions of the network
- SECOND LAYER:** The direct support system that can enable self-management and the achievement of a care plan co-produced with members of the CCN team
- THIRD LAYER:** The health and social care services essential to the whole-person health and well-being of patients
- OUTER LAYER:** The primary mechanisms that will facilitate the desired outcomes



A Coordinated Care Network optimizes the care experience, health outcomes and utilization of services for every patient based on their whole-person needs, preferences, goals and circumstances.

*Registries, telehealth, EMRs, patient tools, etc.

Figure 1: A new mental model for post-acute care: A “Coordinated Care Network (CCN)” (a larger version of the model is available in Appendix B)