

Care Coordination as a Model of Care **Online Course**



ACCESS

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COURSE PURPOSE

The goal of care coordination is high-quality referrals and transitions that meet the six Institute of Medicine “Quality Chasm” aims for high-quality health care.



REGISTRATION FEE

Free to All Participants, Registration is Required



COURSE INFORMATION

The goal of care coordination is high-quality referrals and transitions that meet the six Institute of Medicine “Quality Chasm” aims for high-quality health care, and assure that all involved providers, institutions and patients have the information and resources they need to optimize a patient’s care. The Model looks at care coordination from the perspective of a patient-centered medical home (PCMH). It considers the major external providers and organizations with which a PCMH must interact—medical specialists, community service agencies, and hospital and emergency facilities—and summarizes the elements that appear to contribute to successful referrals and transitions. Those elements include:

- Assuming accountability
- Providing patient support
- Building relationships and agreements among providers (including community agencies) that lead to shared expectations for communication and care
- Developing connectivity via electronic or other information pathways that encourage timely and effective information flow between providers (including community agencies)



ABOUT THE INSTRUCTOR

Dr. Macie P. Smith, Ed.D., LBSW, C-SWCM is a practicing professional in the field of higher education and community education. She is a Licensed Social Worker, Certified Social Work Case Manager and a Social Worker in Gerontology with over 17 years of experience working with aging and vulnerable populations. Dr. Smith conducts research, performs program evaluations, and develops education and training programs with an emphasis on aging and cognitive health. Dr. Smith serves as an Adjunct Professor in the College of Social Work at the University of South Carolina. She is also an Adjunct Professor and a Subject Matter Expert in the College of Social Sciences at the University of Phoenix. Dr. Smith was recognized as the 2017 Educator of the Year by South Carolina AHEC.



LEARNING OBJECTIVES

At the conclusion of this program, participants will be able to:

- Compare and contrast the benefits & challenges to integrating multidisciplinary teams into a care coordination model.
- Identify strategies to address barriers within multidisciplinary teams.
- Develop strategies to building and sustaining effective multidisciplinary teams.

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CONTINUING EDUCATION CREDIT

Licensed Nurses: Upstate AHEC is accredited as a provider of continuing nursing education by the American Nurses Credentialing Center's Commission on Accreditation. Upon successful completion of this program, attendees will receive **2.0** contact hours.

Social Workers: This program has been approved for **2.0** clock hours of social work continuing education by Upstate AHEC, as part of the SC AHEC system, under its accreditation by the SC Board of Social Work Examiners.

Licensed Professional Counselors and Therapists: This program has been approved for **2.0** hours of continuing education by SC AHEC under its accreditation by the SC Board of Examiners for Licensure of Professional Counselors, Marriage and Family Therapists and Psycho-Educational Specialists.

Others: This program is approved for **0.2 CEUs (2.0 clock hour)** by Upstate AHEC and meets the SC AHEC Best Practice Standards.

Successful completion of the program requires attendance for 90 percent of the program and a completed online evaluation by the participant within 10 calendar days of the program date. A certificate of completion will not be made available to you if the evaluation is not completed within this timeframe. No partial credit available.

This speaker has signed a vested interest form declaring no conflict of interest in this activity.

No commercial support or sponsorship has been received for this course.