



Post-Acute Collaborative (PAC)

Collaboration across the healthcare continuum plays a vital role in improving care and reducing avoidable hospital readmissions. Twenty-five percent of healthcare spending is considered waste, according to a Journal of the American Medical Association analysis. Improving care transition workflows and communication can minimize unneeded procedures, in turn reducing unnecessary healthcare spending.¹ It is important to have staff participate who can make care coordination decisions on behalf of their facility. PAC meetings are only as effective as the decision makers attending them.

This section contains tools specifically tailored to helping your hospital develop stronger partnerships with your post-acute providers by developing a PAC.



Overview of Resources

Form	Purpose	Rationale	Page
Post-Acute Collaborative Tip Sheet	This document provides a high-level overview of how to start your own post-acute collaborative with key partners.	This document can be disseminated to managers who will help lead the PAC efforts.	6.1
Post-Acute Collaborative Planning Sheet	This document is a worksheet to develop a baseline of information for your PAC.	Gathering key information like determining key post-acute partners and current readmission data will help you plan for your first PAC meeting.	6.2
Post-Acute Collaborative Charter Template	This document is a template charter to have your post-acute partners sign to indicate collaboration.	A charter or memorandum of understanding can help providers commit and prioritize the PAC efforts.	6.3
Post-Acute Collaborative Agendas, Meetings #1, 2, and 3, Templates	There are three agenda templates to help outline initial PAC meetings with your partners.	These agenda templates can help you set the tone and action items for your PAC meetings.	6.4 6.5 6.6

Find more resources for care coordination at:

www.hsag.com/cc-resources

- Shrank WH, Rogstad TL, Parekh N. Wast in the U.S. Health Care System: Estimated Costs and Potential for Savings. *JAMA*. 2019;322(15):1501-1509. <https://jamanetwork.com/journals/jama/article-abstract/2752664>

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