###### Care Conference Care Conferences include an interdisciplinary team offering input from various perspectives to solve clinical conundrums and complex challenges impeding high and rising risk member progress

## Care Conference Step by Step Guide Example

1. Identify candidate (a patient who would benefit) for care conference
   * Criteria to consider:
     + Acute social needs – financial crisis, unsafe home environment,
     + Unstable clinical condition – hypoglycemic episodes; COPD flares, CHF
     + Unstable mental conditions- Severe Manic / Depression in Bi-polar conditions; poor controlled schizophrenia; Severe depression;
     + Recurrent ED or hospitalizations
     + Patient struggles with med compliance/side effects
     + Patient with no movement on goals
     + Other:
2. Identify current members of the patients care team to include
   * PCP & key team members – consider triage
   * Behavioral health support – internal or external
   * CDE
   * Health coach
   * Pharmacist
   * Other
3. Identify team members who could provide input but may not be on the team:
   * Behavioral health
   * Health coach
   * Benefits staff
   * Social worker – Community Health Worker
   * Pharmacist
   * Specialty providers/staff, if applicable
4. Create an initial value statement for the care conference
   * Communicate the purpose of the care conference, consider role specific role/responsibility content if applicable.
     + Example: The purpose of the care conference is to ensure optimal care plan for patients with complex health and social needs.
       - Solicit team input on patient needs
       - Engage the team to define the goals and ensure that all agree on the goals
       - Collaborate and bring team expertise to define steps and opportunities to meet the goals
     + Example: Role Specific Needs
       - Pharmacy review for potential medication side effects that impact energy level
       - BH update on mental health status as it impacts much of patient ability to act on goals
       - PCP – confirm clinical goals
   * Create patient summary to share in advance
5. Schedule Care Conference
   * Consider a recurring Care Conference time slot for all team members to facilitate ease of scheduling
   * If not recurring, schedule a minimum of 2 weeks in advance
     + Send note on patient to be reviewed 2 weeks prior
     + Send update / reminder 1 week prior, include patient summary
   * Solicit input prior on priority patients for Care Conference discussion, ideally three weeks prior
     + Consider potential of discussing multiple patients, if applicable
6. Care Conference event
   * Introductions if applicable
   * Review general purpose of care conference
   * Identify person to keep notes from discussion
   * Review Patient Summary – with additional detail, include potential value opportunities with care conference and collaboration
   * Engage attendees in patient care review
     + Solicit input and expertise
     + Summarize next steps, updated goals, action steps, accountability
     + Define documentation in patient chart for all to review
     + Define follow-up timeframe
   * Schedule follow-up if applicable or communication