

# Tips for Nurses: Case Conferences



**What it is:** A palliative care case conference is a meeting held between the older person (if able to attend), their family and their legal substitute decision-maker (SDM), and members of the care team including the doctor to assess care plans and clinical care needs.

**Why it matters:** They can be a useful way to:

- help the person and family members to understand the goals of care
- discuss options for future care
- share information
- help families to deal with distress
- assess relevant options and choices in the case of an emergency
- check if there is an advance care directive (ACD)
- check if the ACD needs to be updated.

**What I need to know:** Clear communication is an essential part of good aged and palliative care.

Palliative care provides physical, social, spiritual and psychological care. A multidisciplinary team including allied health can help to meet these varied care needs. A person's needs may frequently change. This means that decisions need to be made about treatments that include the wishes of the person and the needs of the family. It is helpful and important that the SDM and/or support person is aware of these decisions.

Family meetings or case conferences can be a comfortable way to:

- ask questions
- discuss issues
- make decisions.

Knowing who you can share client or resident information with is important.

Talking through issues in a case conference may stop them from becoming major issues. This way, emergencies or crises can be avoided.

Staff in residential aged care facilities often meet with families to discuss routine care of residents.

## Actions

**Holding** a case conference can assist with communication between the person receiving care, substitute decision-maker(s), key family members, and the care team.

**The aim** of the case conference is to:

- discuss issues and identify unmet needs
- raise concerns about the person's condition
- review the person's ACD
- agree on clear goals for the person's future care
- support families.

**Clearly record** the organisation and content of the case conference.

**Case conferences** are held when the older person's health status is changing, they are also held when death is expected within days. Look out for and report any changes in a person's mood, ability to function, swallow, move, breathe etc.

**Knowing** who you can share client or resident information with is important.

**Family meetings** differ from case conferences. Family meetings focus on the person and their family's needs and preferences to establish goals of care.

## Tools

**If organising** a case conference, use of standardised forms can be useful to document activities and decisions. Check if your organisation has a preferred set of forms.

**Name:**

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## My reflections:

When I last met with a family to discuss changes in a client or resident, who gave me current information about the person?

What are the triggers for a case conference?

Does a member of my team have skills in conducting case conferences?

## My notes:

See related palliAGED Practice  
Tip Sheets:  
Advance Care Planning  
Continuity of Care  
Palliative Care

For references and the latest version of all the Tip Sheets visit  
[www.palliaged.com.au/Practice-Centre/For-Nurses](http://www.palliaged.com.au/Practice-Centre/For-Nurses)

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