

Family Care Conference Procedure Guideline

All residents are expected to participate in family care conferences, and to demonstrate competency at leading a family care conference by the time they graduate. Interns are expected to document “observing” two family care conferences during G1 year. G2s and G3s are expected to document participating in at least 3 family care conferences over the two years, at least one of which they will have led. (See below for different levels of involvement.) Family care conferences on non-family medicine rotations count, but cannot be used to be deemed “independent.”

A family care conference is defined as a **scheduled** meeting with the family of a patient. It may happen in the hospital, nursing home, clinic or patient’s home. It is scheduled with the purpose of addressing specific issues, such as adjustment to a new diagnosis, medical updates, placement issues or code status.

Prior to a family care conference the **resident** should go to (overall website address where these documents are located) and:

1. Review this guideline as well as “How to Run an Inpatient Family Conference” (Click [HERE](#))
2. Review/complete Pre-conference planning sheet. (Click [HERE](#))
3. Review plans (and planning sheet prn) with faculty and discuss plans for the conference, including who will be leading the conference and any specific concerns.

During the family care conference the **resident** may:

1. Primarily observe (Usually appropriate for G1s)
2. Participate as facilitator/ leader for part of the conference (More often G2/G3)
3. Be the primary facilitator/ leader for most/ all of the conference. (Required to be deemed “independent”)

After the family care conference the **resident who led the conference** should:

1. Document what happened in EPIC. Epic smart phrase **.fmfamconf** is helpful
2. Get written and verbal feedback from the supervising faculty about how the process of the conference went.
3. Document the care conference in the RMS procedure log. (Determination of “independence” will be documented by administrative secretary, so residents can leave that part blank.)

After the family care conference the supervising **faculty** should:

1. Provide verbal and written feedback to the resident leading the conference. (Click [HERE](#) for evaluation survey)
2. Document the amount of time spent in the room, to facilitate billing based on time.