



# Family Conferences and Rapid Rounds

# **Examples of Team Conferences**

**Admission or pre-admission**. Plan admission to, or transfer from, another facility. Initiate community services such as home care. Identify patient goals. Gather the patient's story and health history.

**Interim (e.g. rapid rounds)**. Plan ongoing or changing care. Prepare for discharge. Prepare for patient handoffs. Communicate with care providers from other disciplines.

**Discharge**. Ensure a continuation of care as the patient returns to the community.

**Family conferences**. Ensure that the patient, family, and other care providers are part of the care planning process.

#### Considerations

Team conferences may be formal (meetings, telehealth calls, rounds) or informal (phone calls, hallway chats), and they often include documentation (referral letters, patient handoffs, consultations).

When planning a team conference, consider: What is the purpose of this meeting? How will we communicate, especially if everyone is not at the same location? How will we ensure patient-, client-, and family-centred care?

### Cornerstones of effective team conferences

## Consistency

Meetings occur at a regular time with a consistent facilitator. They start and finish on time.

### **Accountability**

The team records any assigned tasks, and follows up on those tasks at the next conference.

## Clarity

Team members use clear language. By the end of the meeting, everyone knows who will do what by when.

#### **Transparency**

Each patient's care is shared with the patient and/or family.

# **Family Conferences**

Family conferences provide a forum for the patient, family members, and the health care team to discuss any issues of concern and develop a collaborative plan to address those concerns. They can be used for a variety of reasons: facilitating lifestyle changes, making major care decisions, planning for complex transitions in care, disclosing harm, addressing conflict, and more. They often take place at admission and discharge.

The purpose of an **admission conference** is to develop a plan for in-hospital care. It aims to outline and obtain agreement on the nature of the patient's issues and the strategies to be used to investigate and manage those issues. It includes members of the healthcare team, the patient, and members of the patient's family if possible.

The purpose of a **discharge conference** is to develop a plan for continuing care outside of the hospital. It aims to make the patient's transfer to an outpatient setting easy and successful. It includes members of the healthcare team, the patient, members of the patient's family if possible, and those involved in continuing care.

Steps for leading a family conference	
	Establish the purpose for the conference and consider who needs to attend.
	Ask the patient which of their personal supports (e.g. family members) they want to attend.
	Consider which team members will be needed at the table.
	Consider any other services involved (e.g. psychiatry, home care, child and adolescent protection team).
	Develop a strategy for conducting the conference.
	Create an environment where each family member feels safe and supported.
	If the meeting might be distressing for the family, have tissues available.
	Communicate clearly and openly.
	Document the medical information given by staff, as well as any questions or information from the patient and family.
	Set goals that are clear, mutual, and attainable. Prioritize the goals.
	Establish a plan that allows the family to collaborate with the team in addressing the issues of concern.
	Identify resources and supports that are available to the patient and family.
	Provide a summary of the conference to the patient and family

<sup>&</sup>quot;Steps for leading a family conference" adapted from: McDaniel, S. H., Campbell, T. L., Hepworth, J., & Lorenz, A. (2005). Family interviewing skills in primary care: From routine contact to the comprehensive family conference. In *Family-oriented primary care* (2nd ed.). New York, NY: Springer.

# **Rapid Rounds**

Interprofessional team meetings, or rounds, are held to review each patient's care plan and identify what needs to be done to move the plan forward. Rounds are brief, structured, and require effective communication and collaboration.

### **Meeting structure**

- 1. Review the status of tasks assigned at previous meetings.
- 2. Discuss each patient's concerns and any emerging issues.
  - o For inpatients, discuss any barriers to discharge.
  - For outpatients, discuss any barriers to accessing treatment or adherence to care recommendations.
- 3. Identify actions required and the team members responsible to carry them out.

#### **Benefits**

- Improves patient-, client-, and family-centred care.
- Makes teams stronger and more efficient.
- Can save time and money.
- Team communication is streamlined and improved (efficient and effective team communication).
- Each team member presents their professional information.

### **Team tasks**

- Who will check in with the patient or family prior to rounds?
- Who will be the facilitator during the meeting?
- Who will be the recorder to ensure written documentation is completed (whiteboard, charts, electronic record)?
- Who will communicate the plan to the patient (close the loop)?

### **Planning**

- · Who will attend?
- What topics will be covered?
- When will we start? End?
- How will we communicate? What tools?
- What are your team ground rules or etiquette? (Examples: Everyone stands, start and end on time, everyone is prepared, one person speaks at a time, no pagers or cell phones.)



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