

FAMILY CONFERENCES

Family Conferences are organized for many different reasons including discharge planning, change in patient status, many family members who all need to hear the same information, mobilizing resources to help a patient, discussion of code status, end of life issues, etc.

1. Decide what your goals for the meeting are, and anticipate what the family's goals may be. Talk with other people on the care team including your faculty preceptor (and family as appropriate) to be sure that the agenda for the meeting is as clear as possible. Establish a respectful/ non-shaming rationale to explain to the family when inviting them.
2. Identify the people that need or want to be there.
They may include:
 - Team physician or physicians
 - Patient
 - Faculty physician
 - Primary MD if available and appropriate (at least contact him/her)
 - Primary RN or appropriate RN
 - PT, OT, other consultants
 - Social worker on service
 - Family members. Ask the patient who they want to have in attendance (may not be only biologic family members)
 - Chaplain, if appropriate
 - Community members, if appropriate
 - County workers (i.e. Child Protection), if appropriate
3. Schedule the meeting. Timing of the meeting should depend on the availability of the most important participants (i.e. faculty, resident physicians, family members, other key people.). In the hospital or nursing home the social worker can often contact people and set up a mutually agreeable time for the conference.
4. Decide who should facilitate the meeting. A senior resident or faculty usually lead/ facilitate the family conference, while interns are present to participate in any way they can. The facilitator needs to manage the process of the conference. Among other things this person needs to make sure that people get introduced, goals of the conference are explicit, participants have the opportunity to be heard, and by the end that next steps are clear.

5. Convene the meeting in an appropriate space. Set up the room ahead of time, and choose where the leader of the meeting will sit. This person should have easy access to medical information/ charts.
6. Following the conference, complete documentation including who was present, main points, decisions made, and future plans. The person who leads the conference is responsible for making sure this documentation happens promptly.
7. If the patient's primary physician and/or nurse were not present, inform them of the plan.

For further information on facilitating family meetings see also:

McDaniel, et al Family-Oriented Primary Care, Chapter 7: Family Interviewing Skills in Primary Care: From Routine contact to the Comprehensive Family Conference. Springer, 2005

Lang, et al Interviewing When Family Members Are Present, AFP April 1, 2002 page 1351-1354 [www.aafp.org/afp/2002/0401/p1351.html]