



Albury Wodonga Regional GP Network

# CASE CONFERENCE RESOURCE GUIDE



Albury Wodonga Regional GP Network acknowledges the financial support of the Australian Government Department of Health and Ageing.

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# BACKGROUND

- Recent local interest has been shown by key health care providers regarding participation in intentional case conferences.
- With the ever growing focus on multi-disciplinary health care and with innovations in information technology, the realities of co-ordinating and participating in case conferences are becoming more achievable.
- Involving general practice, as the co-ordinators of clinical care in multidisciplinary case conferences can be problematic. Time and resource issues are identified by both General Practitioners and Practice Staff as real barriers in being able to participate and deliver multidisciplinary care.

**This guide aims to address issues of time and resources by simplifying the process of co-ordinating and participating in intentional multi-disciplinary case conferences.**

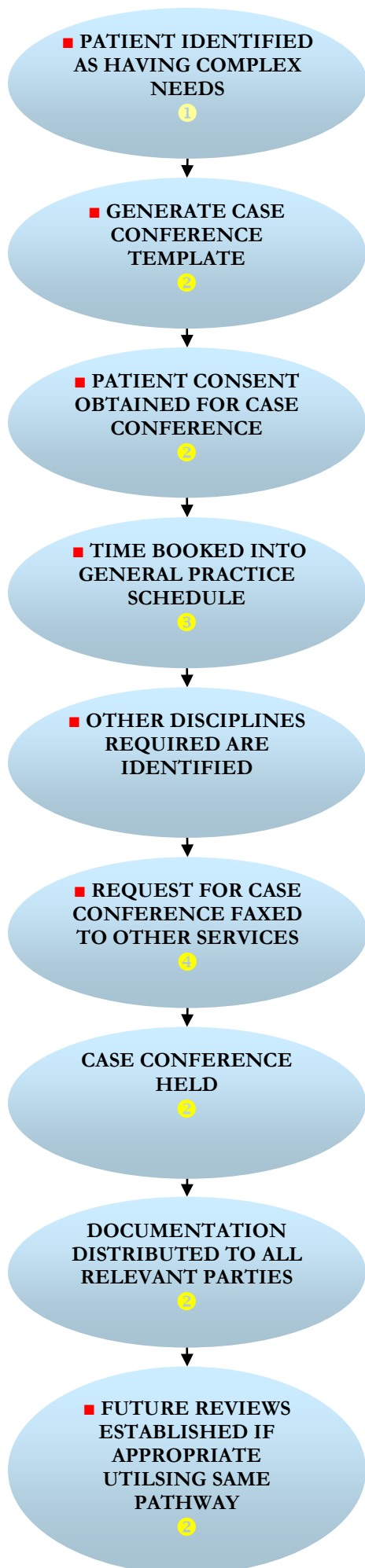
## TWO MODELS

This guide has been developed for medical practices and allied health staff to utilise at their discretion. The guide aims to assist general practice in remuneration for participation in case conferencing.

There are two ways that medical practices are able to claim for case conferencing. The first is related to where a case conference is co-ordinated by the doctor themselves. The second is related to where a case conference is organised by an allied health member in the community. Both models have been presented here in two separate flow charts for you to utilise at your discretion.

An electronic copy of all these resources, including the case conference template, are available from Albury Wodonga Regional GP Network. You may have the capacity to incorporate the templates into your health management software, with self generating fields. Please contact the Rural Palliative Care Project Officer if you have any questions in regards to this case conference guide:

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## GENERAL PRACTICE CO-ORDINATED CASE CONFERENCE

① SEE COMPLEX NEEDS CRITERIA GUIDE

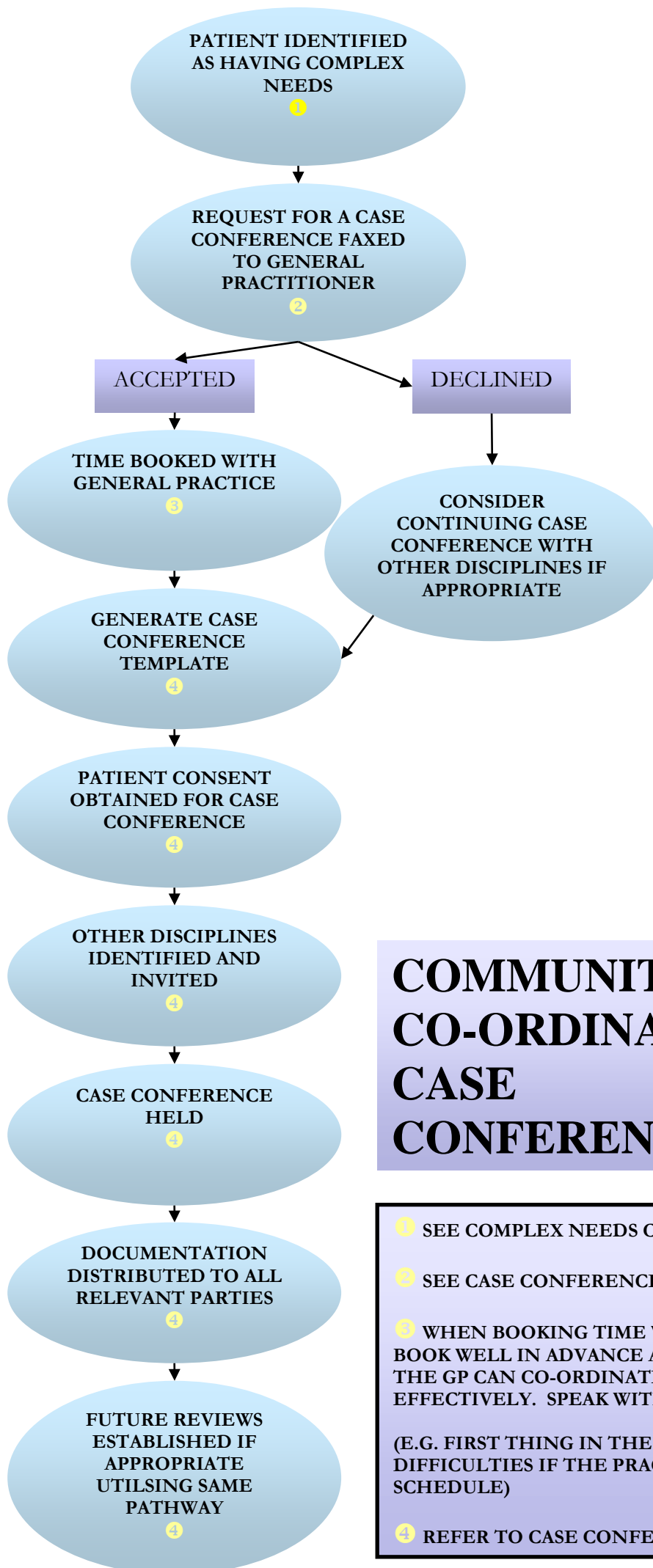
② REFER TO CASE CONFERENCE TEMPLATE

③ WHEN BOOKING TIME WITH GENERAL PRACTICE, BOOK WELL IN ADVANCE AND BOOK AT A TIME WHEN THE GP CAN CO-ORDINATE THEIR TIME MOST EFFECTIVELY. .

(E.G. FIRST THING IN THE MORNING COULD AVOID DIFFICULTIES IF THE PRACTICE IS RUNNING BEHIND SCHEDULE)

④ SEE CASE CONFERENCE REQUEST FORM

■ OTHER PRACTICE STAFF COULD BE ENGAGED TO PROVIDE THIS FUNCTION (E.G. PRACTICE NURSE/ RECEPTION STAFF)



# COMMUNITY CO-ORDINATED CASE CONFERENCE

- ① SEE COMPLEX NEEDS CRITERIA GUIDE
- ② SEE CASE CONFERENCE REQUEST FORM
- ③ WHEN BOOKING TIME WITH GENERAL PRACTICE, BOOK WELL IN ADVANCE AND BOOK AT A TIME WHEN THE GP CAN CO-ORDINATE THEIR TIME MOST EFFECTIVELY. SPEAK WITH PRACTICE STAFF FOR ADVICE. (E.G. FIRST THING IN THE MORNING COULD AVOID DIFFICULTIES IF THE PRACTICE IS RUNNING BEHIND SCHEDULE)
- ④ REFER TO CASE CONFERENCE TEMPLATE

# COMPLEX NEEDS CRITERIA GUIDE

**Identifying patients that are appropriate and who may benefit from case conferences can be problematic. The below criteria are guides for health care professionals to assist in the assessment and identification process:**

- **MBS CRITERIA**

- Case conference claims apply only to a service in relation to a patient who suffers from at least one medical condition that has been (or is likely to be) present for at least 6 months, or that is terminal.
- It is expected that a patient would not normally require more than 5 case conferences in a 12 month period.
- The case conference must be arranged in advance within a time frame that allows for all the participants to attend. The minimum three care providers must be present for the whole of the case conference. All participants must be in communication with each other throughout the conference, either face to face, by telephone or by video link, or a combination of these.
- Examples of persons who, for the purposes of care planning and case conferencing may be included in a multidisciplinary care team are allied health professionals such as, but not limited to: Aboriginal health care workers; asthma educators; audiologists; dental therapists; dentists; diabetes educators; dieticians; mental health workers; occupational therapists; optometrists; orthoptists; orthotists or prosthetists; pharmacists; physiotherapists; podiatrists; psychologists; registered nurses; social workers; speech pathologists.
- A team may also include home and community service providers, or care organisers, such as: education providers; "meals on wheels" providers; personal care workers (workers who are paid to provide care services); probation officers.
- The patient's informal or family carer may be included as a formal member of the team in addition to the minimum of three health or care providers. The patient and the informal or family carer do not count towards the minimum of three.

# MBS CASE CONFERENCE GUIDE

## ITEM NUMBERS 740-744 ORGANISE AND CO-ORDINATE A COMMUNITY CASE CONFERENCE

<u>MBS NUMBER</u>	<u>CONFERENCE DURATION</u>	<u>FEE</u>
735	15-30 MINUTES	\$ 65.40
739	30-45 MINUTES	\$ 112.10
743	AT LEAST 45 MINUTES	\$ 186.85

## ITEM NUMBERS 759-765 PARTICIPATE IN A COMMUNITY CASE CONFERENCE

<u>MBS NUMBER</u>	<u>CONFERENCE DURATION</u>	<u>FEE</u>
747	15-30 MINUTES	\$ 48.10
750	30-45 MINUTES	\$ 82.40
758	AT LEAST 45 MINUTES	\$ 137.35

**PARTICIPANTS:** A case conference team includes a medical practitioner and at least two other members, who participate in the case conference, each of whom provides a different kind of care or service to the patient.

**FREQUENCY:** It is expected that a patient would not normally require more than 5 case conferences in a 12-month period.

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AGPN and AWRGPN acknowledge the financial support of the Australian Government Department of Health and Ageing.





**CASE CONFERENCE**  
*For patients with multidisciplinary care needs*  
*(Please turn over for MBS item guide)*

DATE: \_\_\_\_\_  
 START TIME: \_\_\_\_\_  
 FINISH TIME: \_\_\_\_\_

HOSPITAL UR \_\_\_\_\_  
 PATIENT NAME \_\_\_\_\_  
 PATIENT ADDRESS \_\_\_\_\_  
 PATIENT ADDRESS \_\_\_\_\_  
 DOB \_\_\_\_\_ GP \_\_\_\_\_

**PRINCIPAL DIAGNOSIS AND HEALTH HISTORY**

\_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

NEED	GOAL	TASK	PROVIDER	REVIEW DATE

PARTICIPANT/ DISCIPLINE/ ORGANISATION			

**PATIENT CONSENT**  
 My health provider has explained the purpose of a case conference and I give permission for my health provider to prepare a case conference. I give permission to the providers listed above to participate in the case conference and discuss my/my family member's medical history, diagnosis and current needs. All participants will retain a copy of the case conference summary and will maintain confidentiality in regards to all information discussed and documented. I will also be provided with a copy of the notes from the case conference and will have the opportunity to discuss this with my health provider.

SIGNATURE \_\_\_\_\_  
 DATE \_\_\_\_\_

# CASE CONFERENCE REQUEST

Dear \_\_\_\_\_ organisation \_\_\_\_\_,

We request your participation in a case conference to discuss the ongoing health care needs of the following patient:

NAME: \_\_\_\_\_

DATE OF BIRTH: \_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_

PATIENT ID/UR NUMBER \_\_\_\_\_

## CASE CONFERENCE DETAILS

DATE: \_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_

TIME: \_\_\_\_\_:\_\_\_\_\_

LOCATION: \_\_\_\_\_

(If personal attendance is required)

TELECONFERENCE NUMBER: \_\_\_\_\_

(If telephone conference is arranged)

- Yes I will be attending this case conference.  
 No I will not be able to attend this case conference.

(Please fax reply to: Fax Number)

COMMENTS:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

This case conference request comes from:

Name: \_\_\_\_\_ Organisation: \_\_\_\_\_

Contact Number: \_\_\_\_\_



Albury Wodonga Regional GP Network

This case conference request form was developed by Albury Wodonga Regional GP Network. However the AWRGPN accepts no responsibility for the consequences of any action taken by any person as a result of utilising information contained in this publication.

This fax may contain privileged material and/or personal information. If you received it in error:

- Please let the sender know immediately and then destroy this fax.
- You must not use, copy or disclose any of the information this facsimile contains.