National MyMedicare PHN
Implementation Program

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An Australian Government Initiative

Case Conferencing Checklist

The Case Conferencing Checklist provides steps for planning and carrying out Case Conferences.

STEPS	TASKS
Step 1 **Plan the Case Conference**	☐ **Understand Requirements for Case Conferences** – **Multidisciplinary Case Conferences** and **Mental Health Case Conferences** ☐ **Identify Goals and Participants**: Determine the purpose (e.g., care planning, crisis management, progress review) and select key stakeholders, including healthcare providers, allied health professionals, social workers, family members, and the client when appropriate. ☐ **Gather Relevant Information**: Collect case files, medical histories, assessments, and prior care plans. Ensure consent for information sharing is confirmed. ☐ **Schedule and Communicate**: Arrange a suitable date, time, and location; send agendas and documentation to all participants ahead of time. ☐ **Assign Roles**: Assign facilitator/chair, note-taker, and timekeeper responsibilities to maintain flow and structure. This may be the role of the practice nurse at the general practice.
Step 2 **Team Roles & Responsibilities**	☐ **General Practitioners (GPs)** · **Clinical Lead**: Typically serve as the lead clinician, responsible for initiating and coordinating the case conference. · **Care Planning**: Develop and review care plans, provide referrals, and ensure follow-up. · **Communication**: Share clinical summaries, patient goals, and updates via secure messaging and My Health Record. ☐ **Practice Nurses (PNs)/ Care Coordinators / Nurse Navigators** · **Care Coordination**: Support follow-ups, recalls, and monitoring of patient progress. · **Clinical Input**: Provide insights into patient barriers, enablers, and social risks. · **Documentation**: Update shared health summaries and assist with My Health Record entries. · **System Navigation**: Coordinate referrals and communication with all members attending the case conference (GP, allied health, specialists, pharmacist and others). · **Health Literacy Support**: Empower patients in self-management, understanding care plans. ☐ **Allied Health Professionals (AHPs)** · **Specialist Input**: Deliver targeted interventions (e.g., physiotherapy, dietetics, psychology). · **Medication Management**: Pharmacists conduct reviews and audits, educate clinicians. · **Team Collaboration**: Participate in huddles and case conferences. Use MBS to participate in multidisciplinary case conferences with the patient's medical practitioner and other providers. ☐ **Aboriginal and/or Torres Strait Islander Health Practitioners / ACCHO Liaison** · **Cultural Safety**: Ensure care is culturally appropriate and inclusive. · **Community & holistic care Linkage**: Bridge communication between clinical teams, service providers and community supports. · **Coordination and Clinical Care**: Coordinate and deliver care (NAATSIHWP scope of practice). ☐ **Medical Specialists** · **Specialist Input**: Deliver targeted interventions. · **Communication**: Share clinical summaries, patient goals, updates via secure messaging and My Health Record. ☐ **Other Providers, Specialists and Consultants**
Step 3 **Information Sharing & Action Planning**	☐ Each participant **presents critical details regarding barriers, needs, strengths, or risks**, avoiding storytelling and focus on actionable information. ☐ The facilitator **summarises key points** to maintain clarity and ensure common understanding among participants. ☐ **Develop action plans** with clearly assigned responsibilities, deadlines, and measurable objectives. ☐ Ensure availability and **establish next steps for follow-up**, including scheduling future reviews.
Step 4 **Tools & Templates**	☐ **Templates for Invitations and Attendance**: Standardised forms help track participant roles, consent, and participation status. ☐ **Action and Follow-Up Templates**: Structured tables for listing objectives, responsible parties, deadlines, and areas for review support accountability. ☐ **Case Presentation Slides or Checklists:** Visual aids and step-by-step guidance ensure clarity when presenting complex cases.