



Team members:

Date:

## Complex care case conferencing script

### **I. 4 quadrants of complexity**

Client initials:

Age:

Please fill in the boxes below based on any information you know about the individual you're working with:	
Medical	Behavioral health and substance use disorder
•	•
Social	Systems
•	•

### **II. Utilization (past year)**

Type	Number in previous 12 months	Root cause
ED		
Inpatient admissions		
Length of stay (days)		

**III. Eco-Map**

Chart of <b>(client initials)</b> existing relationships / Cross continuum team			
Relationship (family, friend, provider, community organization, etc)	Type of relationship (strong, weak, stressed)	Potential long-term support (yes or no)	Notes/action items

## Case conference script

*Alter patient-identifying information unless you have authorization from your patient.*

**(Patient)** is a **(age)** **(race/ethnicity)** **(gender)** with driving medical diagnoses of: **(list patient’s medical conditions)**. Patient also has the following mental health diagnoses: **(list patient’s mental health diagnoses)**. Patient has the following social challenges **(list patient’s social root causes)**.

**(Patient)** has been enrolled in our services **(how many days pt. has been with your team)**. This patient has had **(# of visits)** since our services began. We are scheduled to see the pt. on **(date of next scheduled interaction with patient)**.

**(Patient)** barriers are **(list barriers/issues you are facing with patient)**. **(Patient)** strengths are **(list strengths you have noticed with patient)**.

The patient responded well when **(list interventions/techniques you have used with the patient)**. The patient did not respond well when **(list interventions/techniques you have used with the patient)**. The patient is experiencing the following challenges with the system **(list system root causes)**.

I would like help with **(list areas of treatment/intervention)**.

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I have noticed the following system process improvement opportunities:

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