

**Person Centred Complex Care  
Thursday 27<sup>th</sup> February 2020  
LACE Conference Centre, Liverpool**

**Theme Lead: Professor Tony Marson**

**Summary of Table Work**

Attendees given a label to identify as NHS, University, LA, Public Advisor to ensure a mix of participants on each table. Attendees broke up into five tables to work on consider 'complex care' and potential solutions.

**Summary**

Communication an overarching theme from all of the tables. Many of the issues raised concerned models of care (including integrated care services, primary care networks), digital solutions (including healthcare records) within healthcare systems, access to and management of healthcare (including medication) particularly for vulnerable and multimorbid populations and gaps in evidence around healthcare systems, digital exclusion and multimorbidity.

More specifically, points included:

**Models of care:**

Link in with Integrated Care Systems – Systematic reviews to assess the evidence-base, evaluate the effectiveness of delivering care in different ways (e.g. linking in GPs with specialists), examine the cost-effectiveness of ongoing models, examine health inequalities.

Linked in with care models/PCNS – role of the pharmacist, polypharmacy, deprescribing and role in education to improve patient understanding of medication, role in care coordination.

Role of the single care coordinator/case manager/need for lead coordinator for mental health and comorbidities

**Digital (within different models of care):**

Linking hospital information with social care data for discharges etc.

Advanced care plans – ensure they are consistently used and integrated.

Patient controlled/held data to aid integrated care – e.g. mobile digital health care records, virtual consultations/MDTs, research around digital exclusion

**Multimorbidity:**

Trends and patterns of disease, diagnosis and provision/use of care.

Continuity of care (links back to ICS and care coordinator)

Accessibility of care and equity of care.

Focus on vulnerable populations (e.g. those in care homes, which links back to access, diagnostic care, medication management etc).