Managing Medical Complexity - what does it mean? (parts 1,2 and 3)
But... the worry is that some patients, through ignorance, may accept a lower expectation of health than they need to be the case e.g. patient who has dyspepsia and thinks it’s their fault that they have indigestion.

Remember the WHO Definition of Health? Health is a state of complete physical, mental and social well-being and not merely the absence of disease or infirmity in order to help the individual lead a socially and economically productive life.

The point of this is to enable the patient to be involved in the management plan to the appropriate degree. In emergencies, identify this is usually not appropriate and you need to take change

5. EXPLAINS risk (note: evaluating risk was part of uncertainty)

But some argue that health cannot be defined as a state but must be seen as a process of continuous adjustment to the changing demands of living and of the changing meanings we give to life. And now we are even in a state of “complete... well-being” (and most people describe their health in relative terms). Many people adjust to their infirmities and may regard themselves as being healthy when background conditions are in a state of control and not significantly impairing function e.g. a patient with OA whose pain is well controlled on NSAIDs.

Exploring patient’s attitude to health and their capacity to change - explores health in the physical, psychological, social and spiritual - explores their ideas, concerns, expectations - educates and empowers them

Our work as GPs is not only to restore health but also to maintain and improve health within the individual and within our practice communities.

This competency builds on the above

4. considers patient safety

Thinking beyond what we can do for the patient and thinking beyond the INDIVIDUAL patient

The key to treatment is to encourage self-management, responsibility for their own health.

The key is to use motivational techniques to encourage change, promote a positive approach to the patient’s own health even if the patient looks miserable or their ideas are silly. If there is always SOMETHING we can do...

Remember, patients can’t perform their own risk analysis either because a) they do not have medical expertise or b) cannot be objective about themselves. You need good COMMUNICATION SKILLS to be able to do this effectively.

Managing Medical Complexity - what does it mean? (parts 4, 5 and 6)