

‘Finding Frailty’

System benefits of frailty identification

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The 3rd National Frailty Conference

28th September 2017

Frailty identification - who benefits?



I'm still me

...a narrative for coordinated support for older people

UCLPartners
National Voices
ageUK

I'm still me
... a narrative for coordinated support for older people

The I statements

Community interactions

- I can maintain social contact as much as I want

Independence

- I am recognised for what I can do rather than assumptions being made about what I cannot
- I am supported to be independent
- I can do activities that are important to me
- Where appropriate, my family are recognised as being key to my independence and quality of life

Care and support

- I can build relationships with people who support me
- I can plan my care with people who work together to understand me and my carer(s), allow me control, and bring together services to achieve the outcomes important to me
- Taken together, my care and support help me live the life I want to the best of my ability

Decision making

- I can make my own decisions, with advice and support from family, friends or professionals if I want it

I'm still me
... a narrative for coordinated support for older people

I'm still me

...a narrative for co-ordinated support for older people

The 'frailty' challenge

As discussed in the introduction we have an ageing population, and across England local areas are prioritising care and support for older people. To help meet the needs of older people with poor health outcomes, considerable effort is now put into better defining 'frailty', in the hope of managing it as a long-term health condition. The British Geriatrics Society (BGS), in association with Age UK and the Royal College of GPs (RCGP), has produced guidance on recognising and managing frailty outside of hospital.¹

A key feature of frailty is that it describes a person at a higher risk of a sudden deterioration in their physical and mental health. This will include people who could otherwise be very stable and low users of health services. It will also include people who require high levels of support and may be at the end of their lives.

Recognising a spectrum of need that overlaps, rather than duplicates long-term conditions management is an important message. As a system, this means that having frailty in mind when identifying, assessing and planning care needs will be vital to achieving better outcomes for older people and the need for crisis or emergency care.

A foundation of good practice will mean coordinating older people's support needs across all of the agencies and people involved in their care, including informal care and support as well as that provided by voluntary and community sector groups.

"I identify with getting older. I'm not frail."

Call for a national dialogue on frailty:

This research has focused on asking older people what matters most to them and it

has reminded us of the importance of the perception of frailty is often from a patient's perspective.

Even patients with long-term health conditions, who are often considered 'frail', did not always want to be so. It is important to be as person-centred as possible.

Significant challenges for older people are that they do not like to be labelled as 'frail' and very few wish to be identified in these terms. In fact, about 70% of older people do not like that word in their lives.

This presents a challenge for us to ensure that we are not just talking about frailty but also about people's experiences and what they want.

Professionals and service providers need to work together to ensure that we are taking a person-centred approach to frailty. This means working with older people with their own views and preferences in mind. We are the new national dialogue on frailty. We need to understand better what older people with long-term health conditions want. We can find a common language for working with older people. It is vital that we are led by the views of older people.

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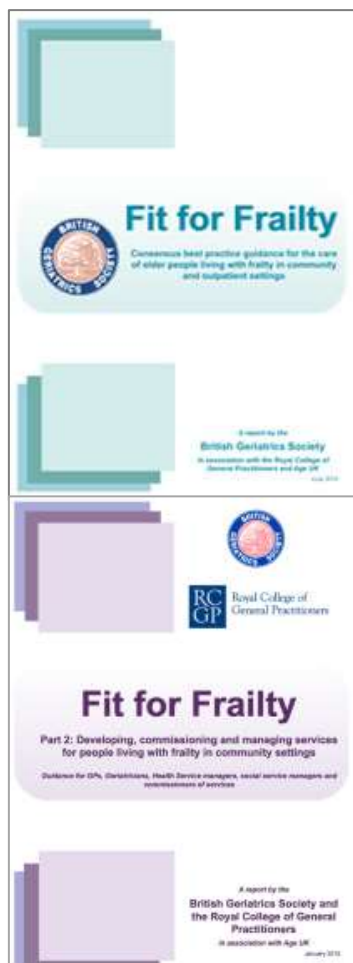
¹British Geriatrics Society
<http://www.bgs.org.uk>

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'Fit for Frailty'

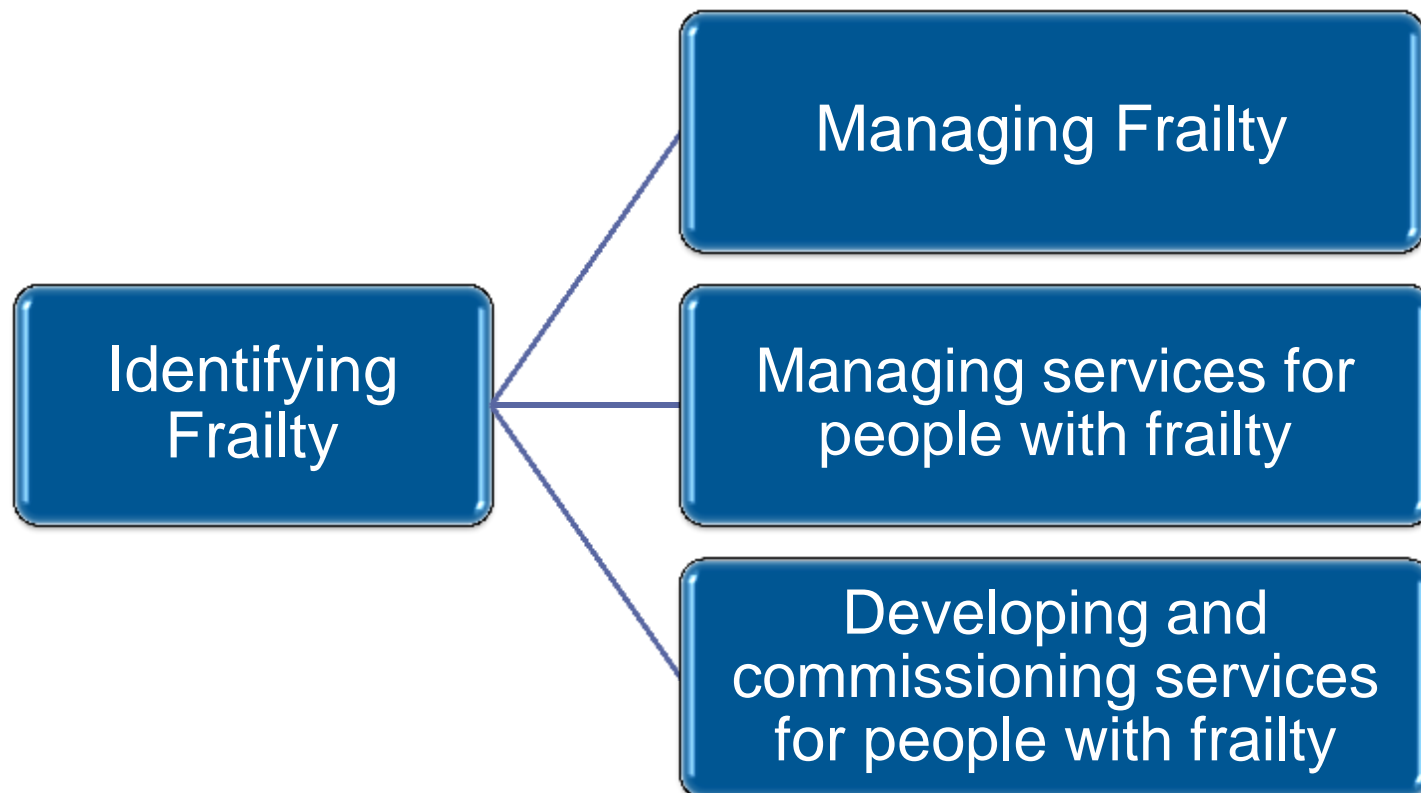
The British Geriatric Society, 2014/2015



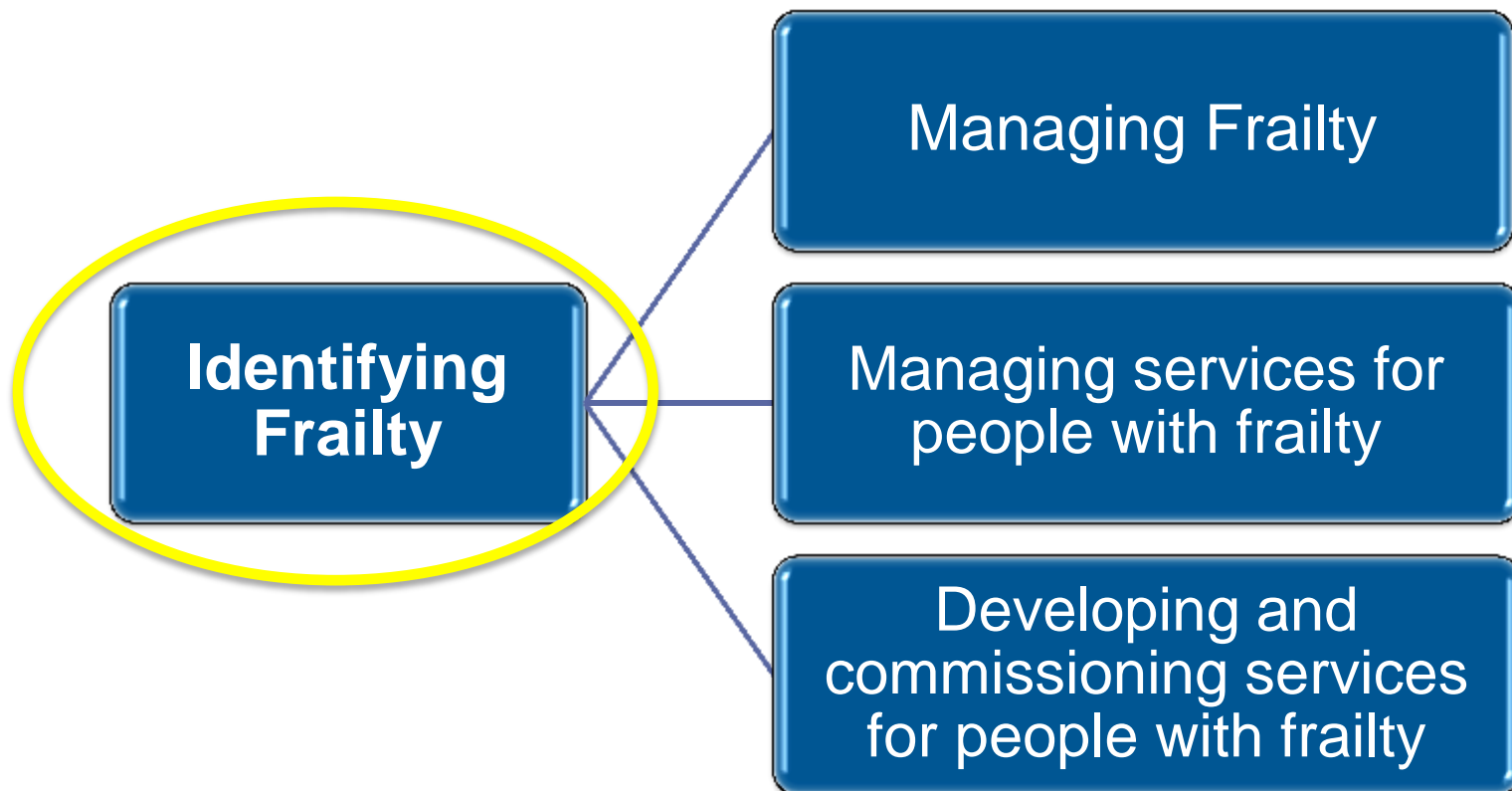
- Advice and guidance on the recognition and management of frailty in community and outpatient settings

- Advice and guidance on the development, commissioning and management of services for people living with frailty in community settings

Fit for Frailty



Fit for Frailty



Identifying frailty

Opportunistic

Older people should be assessed for frailty during all encounters with health and social care personnel

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Systematic

Identifying frailty at practice level using existing health record data is an emerging possibility'

Identifying frailty

Opportunistic

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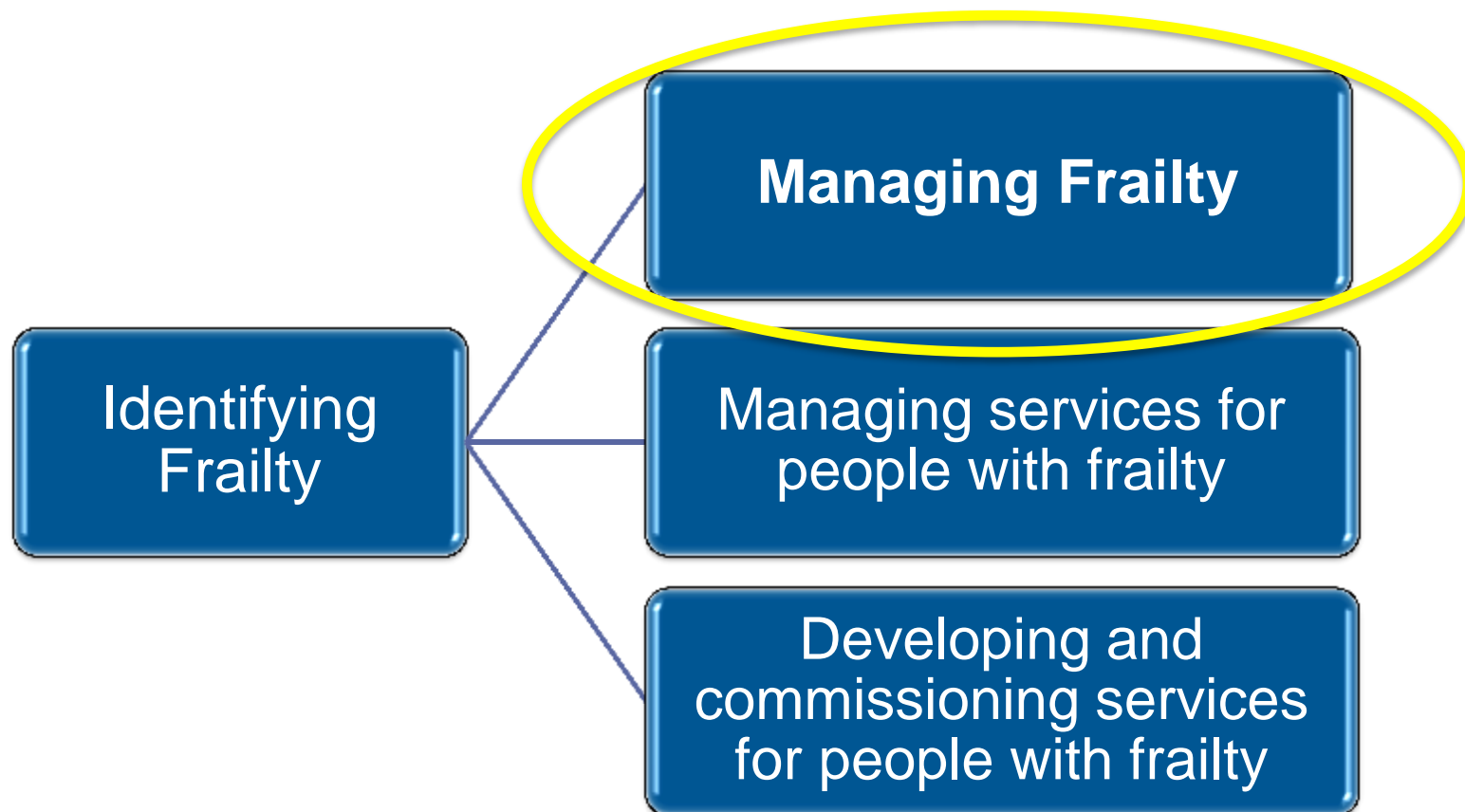


Systematic

Identifying frailty at practice level using existing health record data is an emerging possibility

The future is here!

Fit for Frailty



Frailty as Long Term Condition

Managing frailty as a long-term condition FREE

Jennifer K. Harrison ; Andrew Clegg; Simon P. Conroy; John Young

Age Ageing (2015) 44 (5): 732-735. DOI: <https://doi.org/10.1093/ageing/afv085>

Published: 13 July 2015 [Article history](#) ▾

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Abstract

Frailty is a distinctive late-life health state in which apparently minor stressors are associated with adverse health outcomes. This



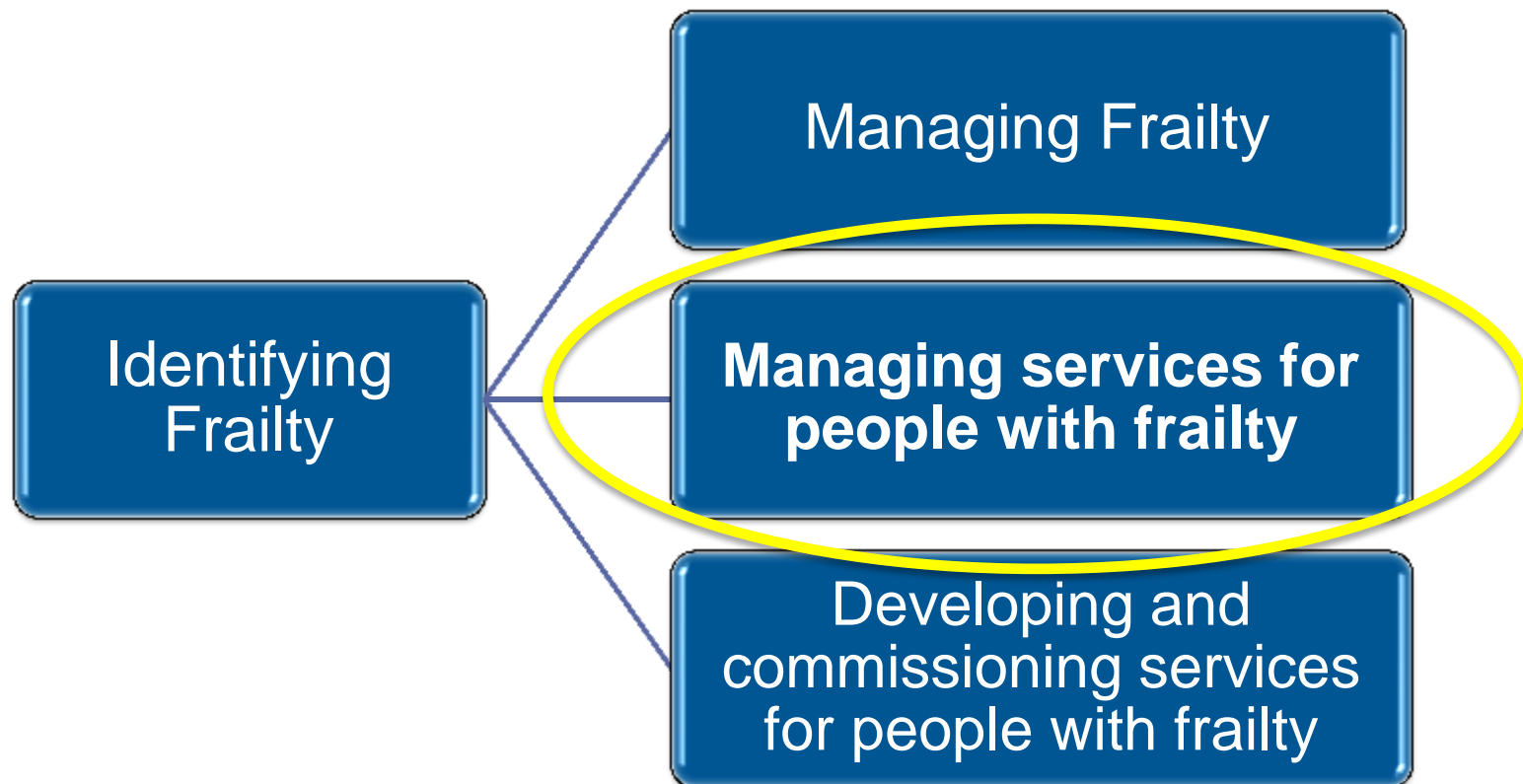
Blog

We must recognise frailty as a long term condition – John Young

7 May 2014 [John Young](#)

Long term conditions

Fit for Frailty



Managing services for people with frailty

‘Education & Evaluation’

Develop training and education packages for local needs, to enable multi-professional and cross-organisational delivery of care for frailty

Evaluation must be an integral part of service design and delivery

Education

- Providers
- Commissioners
- System wide
- Professional groups
- Academic



Evaluation



{ Mouth Care Matters

NHS
Health Education England

Mouth Care Matters

West Midlands Primary Care Workforce Development and Improved Access Project
[Prime Minister's GP Access Fund Wave 2 Scheme]

Report on the Frailty Workstream

NHS
England

Allied Health Professions into Action

Using Allied Health Professionals to transform health, care and wellbeing.

2016/17 - 2020/21

#AHPsintoAction

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Study Research Business Global About

University of Nottingham > Research > Groups > Health of Older People

Health of Older People

Home

People

Projects

PEACH

Proactive Healthcare of Older People in Care Homes (PEACH)

Overview

This study will explore whether and how Comprehensive Geriatric Assessment (CGA) can be established as a model of working for older people living in care homes and whether it is associated with health benefits.

Key facts

Study dates: Nov 2015-

Funder: The Dunhill Me Trust

NHS

New care models

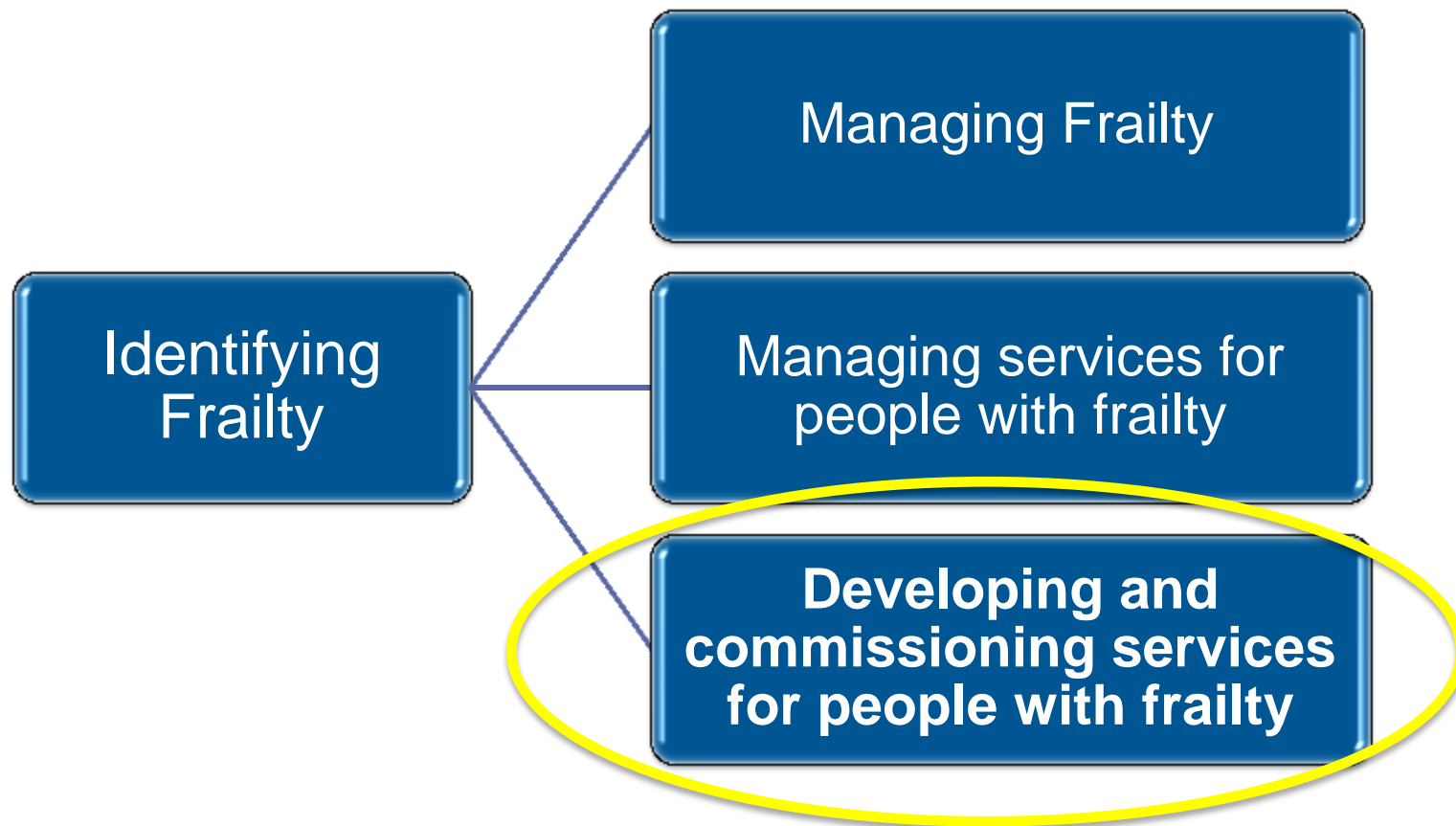
The framework for enhanced health in care homes

Our values:
clinical engagement, patient involvement, local ownership, national support

September 2016

www.england.nhs.uk/vanguards #futureNHS

Fit for Frailty



Developing and commissioning services for people with frailty

Develop 'whole system' frameworks using new structures and flexible workforce development to overcome traditional boundaries in care

Establish integrated contractual frameworks and collaborative commissioning to support and/or reinforce provider innovation

Whole system frameworks



Dementia Core Skills Education and Training Framework

This Framework was commissioned and funded by the Department of Health and developed in collaboration by Skills for Health and Health Education England in partnership with Skills for Care.



End of Life Care Core Skills Education and Training Framework

This framework was commissioned and funded by Health Education England and developed in collaboration with Skills for Health and Skills for Care.



Person-Centred Approaches:

Empowering people in their lives and communities to enable an upgrade in prevention, wellbeing, health, care and support.

A core skills education and training framework



Whole system frameworks



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England



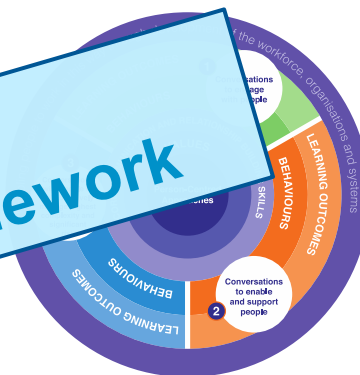
End of Life Care Core Skills Education and Training Framework

developed in



NHS Health Education England

Under development.....
Frailty Skills / Capabilities Framework



Person-Centred Approaches:

Empowering people in their lives and communities to enable an upgrade in prevention, wellbeing, health, care and support.

A core skills education and training framework



NHS Health Education England

Integrated contracting & collaborative commissioning



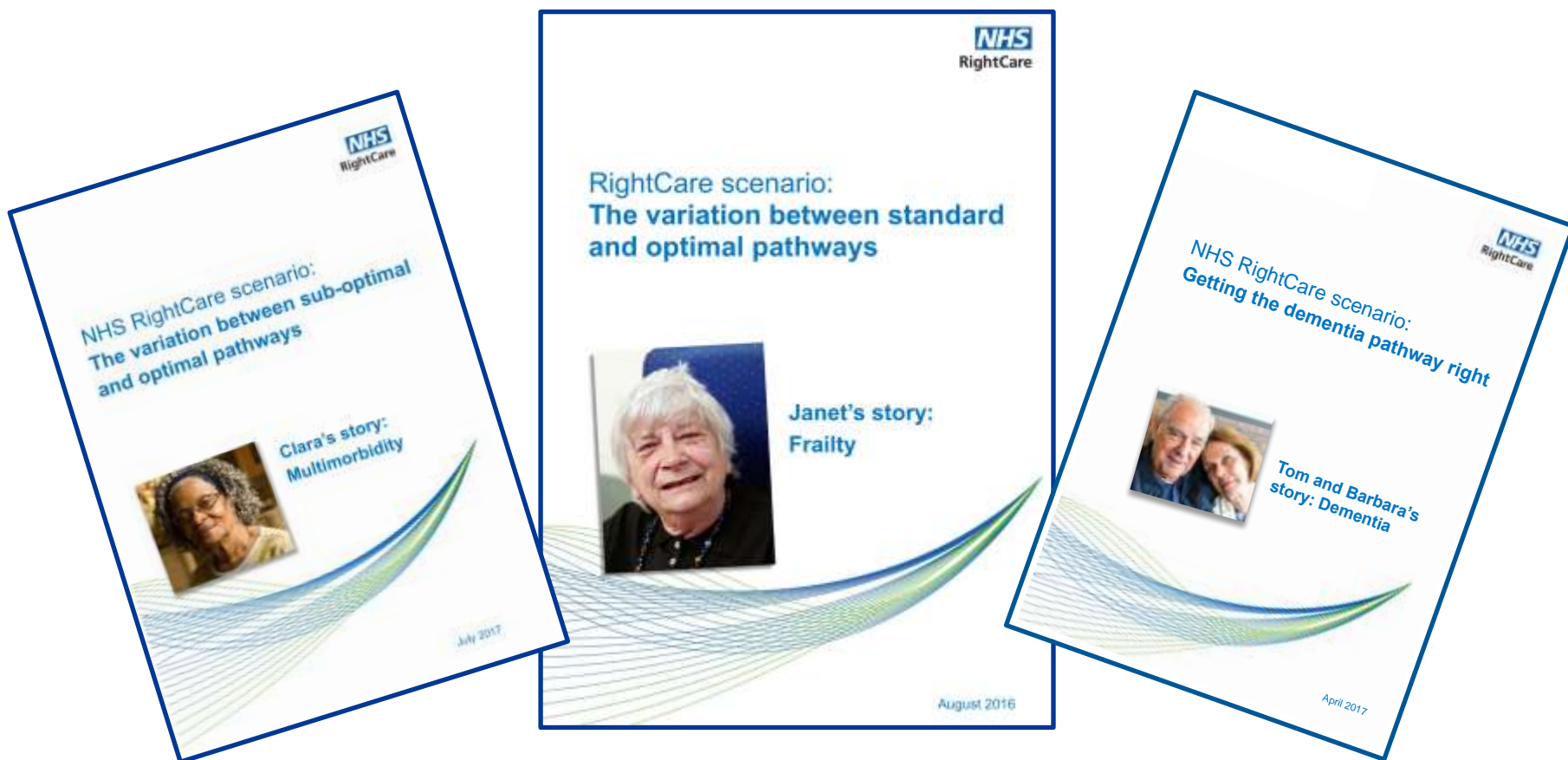
Developing more engaged relationships with patients and carers to promote well being and prevent ill health



- Good organisations cannot deliver the required care redesign in silos.
- Only through a system-wide set of changes will we be able to deliver the right care, in the right place, with optimal value.
- The solutions will not come solely from the NHS, but from patients and communities, and wider partnerships including local government and the third sector.
- Effective public engagement will be essential to their success.

NHS RightCare Resources

NHS RightCare Intelligence materials, e.g. case scenarios:



Summary



...a narrative for co-ordina



The 'frailty' challenge

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Call for a national dialogue on frailty:

This research has focused on asking older people what matters most to them and it has reminded us that the older person's perception of what constitutes good health or frailty is often very different to the clinician's

Benefits of Identifying Frailty

- ❑ Identifies individuals who can most benefit from support
- ❑ Help to better understand frailty trajectories and impacts of interventions for both individuals and populations
- ❑ Supports service development and planning by enabling better modeling than demographic data alone
- ❑ Promotes system and workforce capability to support increasing number of older people living with frailty

