

Frailty Stratification and Pathway Development

Electronic Frailty Index (eFI) within Primary Care

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Introduction

- Frailty is a common and challenging expression of an ageing population. Within England, the 65+ population is projected to increase by approximately 24% over the next ten years.
- The effects of this increasing demographic will present a major quandary to all sectors of health, however unplanned admissions and proactive case finding and management can maintain independence within the elderly.
- The Electronic Frailty Index (eFI) is such a tool that allows frailty categorisation.

Aim

- Develop a frailty pathway using electronic frailty index risk stratification within primary care.

Methods

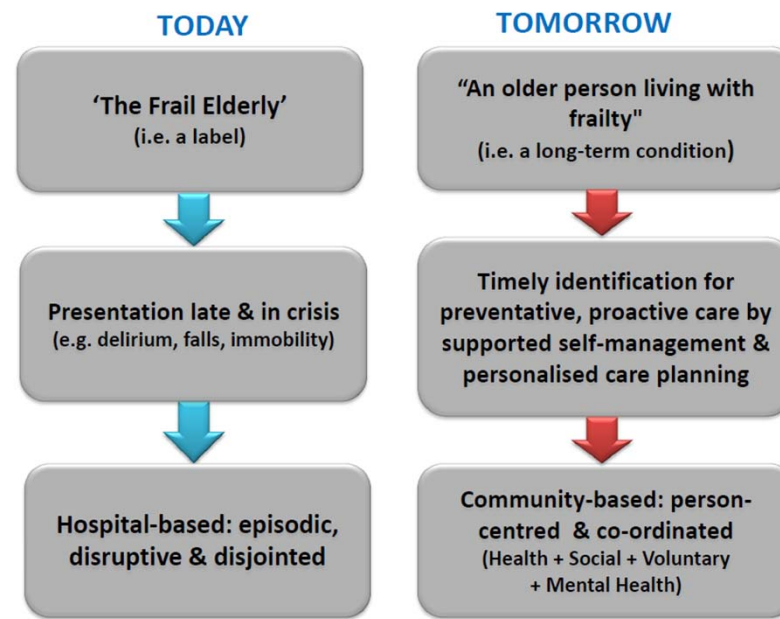
- The eFI is a cumulative deficit modelled frailty tool, which calculates a frailty score based on the presence of variables that include symptoms, diseases and disabilities.
- The number of deficits recorded against a person is then divided by the total possible 36 deficits, to generate a score between 0 and 1. Frailty score categorisation is then stratified as follows; 0 – 0.12: Fit, 0.13 – 0.24: Mild, 0.25 – 0.36: Moderate and >0.36: Severe.
- Data was extracted from six general practices, with univariate analysis undertaken to describe the categorisations by age using the eFI. Following frailty identification and categorisation, evidence based interventions and recommendations classified into health and social needs were proposed for each frailty categorisation.

Results

- Across the practices between 10-15% of patients were classified as moderately and severely frail. In order to manage the frailty within practices, general practitioners were consulted to put together a suite of health and social care interventions for each frailty category.
- The fit category was defined as a cohort that could be termed as those that can self care and be assisted to age well. The mild and moderately frail were those that needed self management and prevention awareness, while the severely frail were those that required a comprehensive geriatric assessment, care & support as well as advance care planning discussions.

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EVERY DAY
TO PEOPLE'S LIVES**

New Care Paradigm for Older People & Frailty



Source: John Young, Presentation "Geriatrician, Bradford Hospitals Trust National Clinical Director for Integration & Frail Elderly, NHS England"

Discussion

- Pilot of the eFI tool allowed the categorisation of GP registered patients leading to a more systematic approach of case finding of at risk patients. Stratification could lead to a more effective goal orientated care
- Appropriate evidence based interventions need to be commissioned by GPs and clinical commissioning groups, with the eFI providing an assessment of population need.
- Potential for the impact of the eFI tool on reducing unplanned admissions and conveyances to hospitals.
- By using this preventative approach, implementation of eFI could help improve planning of health service utilisation and allow proactive management of frailty, improving the trajectory of wellbeing within the elderly.

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