**From Frailty to Resilience**

*Friday 15 March 2019*

**@WEAHSN**

**1 Overview**

**About the West of England Academic Health Science Network**

The West of England AHSN is delivering positive healthcare outcomes locally and nationally by driving the development and adoption of new innovations and making a meaningful contribution to the economy.

Established by NHS England in 2013, we are one of 15 AHSNs across England established to spread innovation at pace and scale.

As the only bodies that connect NHS and academic organisations, the third sector and industry, we are catalysts that create the right conditions to facilitate change across whole health and social care economies, with a clear focus on improving outcomes for patients.

**About the meeting**

The West of England Patient Safety Collaborative Board asked the Patient Safety Collaborative team to discuss and scope out the potential to incorporate a project on frailty into the Patient Safety Collaborative work plan for 2017/18.

A focus group was held on 16 March and the project lead attended the national AHSN sharing day on frailty. Discussions have taken place with individuals who have expressed an interest in working on improving safety for people with frailty.

Following an expert reference group meeting on 16 June the first frailty Community of Practice meeting was held on 1 September 2017 and saw 14 attendees from 11 member organisations including acute Trusts, CCGs, community providers and mental health Trusts. 16 attendees from 10 organisations attended on 3 November in Gloucester with a topic focus on MDTs.

The group agreed the Community of Practice would be called “From Frailty to Resilience” and agreed to share resources and experience via meetings every two to three months. Four meetings have been held so far.

There are currently 60 members of the frailty community of practice distribution list covering 25 organisations.

**2 What is Frailty?**

NHS England have defined frailty as a progressive, long term condition characterised by a loss of physical and/or cognitive resilience that means people living with frailty do not bounce back quickly after an acute stressor event such as a physical illness, an accident or other stressful event.

**Why Frailty is Important**

The population of England is ageing. By 2040, nearly one in seven people are projected to be over 75. Whilst frailty is associated with age it is not the same: not all older people live with frailty and not all people living with frailty are old. Many of the factors that cause people to age differently are amenable to population-level interventions based on lifestyle choices and exercise. Frailty (rather than age) is effective as a means of identifying people who may be at greater risk of future hospitalisation, care home admission or death. For example, people living with severe frailty have a four times greater one-year hazard ratio for these outcomes. This means population-level frailty identification can help anticipate future health and social care demand.

Accelerating population ageing coupled with existing health system pressures means it is important for local areas to take action to provide a more sustainable, whole-system approach to managing frailty that ensures that we have the rights types of services in the right quantities to meet demand. For example, the number of people aged 65 to 69 has grown by 34% in the last 10 years, with corresponding hospital admissions growing by 57%.

**3 Discussions**

8 attendees from 6 organisations attended on 15 March. The discussions included updates on topics previously discussed.

* **Comprehensive Geriatric Assessments (CGA)** – the British Geriatric Society are working on a standardised CGA.
  + <https://www.bgs.org.uk/topics/cga-in-community-settings>
  + https://www.bgs.org.uk/topics/cga-in-acute-settings
* **Research report published 22 March 2019**: Can Comprehensive Geriatric Assessment be delivered without the need for geriatricians? A formative evaluation in two perioperative surgical settings <https://www.thisinstitute.cam.ac.uk/research-articles/can-comprehensive-geriatric-assessment-delivered-without-need-geriatricians-formative-evaluation-two-perioperative-surgical-settings/>
* **Weston Geriatric Emergency Medicine Service (GEM)** has just started this week. The service is front-door based in the emergency department aiming to provide a CGA response for patients over the age of 75 with a Rockwood 5-8 (excluding patients on a defined pathway e.g. #NOF/ stroke). Staffed 10am – 8pm, Monday – Friday.
* **Bath** frailty flying squad and **Gloucestershire** OPAL teams continue to support people with frailty attending their units at the front-door. In **NBT** the Complex Assessment and Liaison Service (CALS) supported after admission.
* **Gloucestershire JUYI (joining up your info)** project is working to create a read-only system pulling from GP, mental health, community, adult social care systems with a front page with medications, last few GP contacts, and other information. At present does not pull from acute services.
* **Sirona** are carrying out training looking at competencies in the area and working with care homes via the CEPN (community education provider network).
* **Wellbeing score** in Sirona includes measuring social isolation, anxiety, and happiness but some questions are not well phrased, e.g. “how worthwhile do you feel?”
* **Carers** – DemQOL is being used for quality of life scale.<https://www.bsms.ac.uk/research/neuroscience/cds/research/demqol.aspx>
* **Mental health services** are seeing people who are more physically frail coming into their services, including learning disabilities and eating disorders. They are using the Rockwood score.
* **UWE** have an Advanced Practice Apprenticeship care pathway, but not all areas have posts available post-training. <https://www1.uwe.ac.uk/business/degreeapprenticeships/currentdegreeapprenticeships/advancedclinicalpractitioner.aspx>
* **AWP** are doing frailty awareness training for all staff, particularly for staff with mental health but not “health” background.
* **Radiology** staff in Weston have received frailty awareness training and as a result more conversations are happening around invasive procedures to discuss whether procedures are appropriate. They are also working with palliative care teams and advanced care practitioners to improve the recognition of people dying.
* Some older people with **frailty and drug/ alcohol** problems are better served by a more focused approach: “never judge a frail book by its cover”
* Gloucestershire “Find and Prevent” data is being used to identify individuals who may benefit from more support at an MDT discussion, and a similar Solis risk assessment process is used in other areas. They are also using the REDFLAG criteria to identify patients at risk.
* The medical model doesn’t always work with people with frailty, and a biomedical model involving a multi-disciplinary approach is much better at coordinating care.

**4 Resources shared**

Output reports from previous meetings including resources shared are available at [www.weahsn.net/frailty](http://www.weahsn.net/frailty)

Wessex Frailty conference slides <https://wessexahsn.org.uk/projects/303/focus-on-frailty-2019-conference-resources> including some competencies for awareness training

Nicci Gerrard talk: what can dementia teach us about love? 29 April 2019 7pm, Waterstones Bristol <https://www.ideasfestival.co.uk/events/nicci-gerrard/>

REDFLAG poster and notes:

|  |  |
| --- | --- |
| **R** | resistive to help or services |
| **E** | ever increasing contact with services without improved quality of life or resolution of persistent issues |
| **D** | drug/medication change or non-compliance with medication |
| **F** | frailty score high(6-7) or increasing  falls |
| **L** | lives alone, or couple supporting each |
| **A** | assessment of mental capacity required |
| **G** | gaps in Activities of Daily Living (ADL) impacting on health & wellbeing |

Dementia training available on Future Learn

* http://mail.futurelearn.com/tr/p.gif?uid=7157520308&mid=651441740&msd=1552654846114&st=0[The Many Faces of Dementia](http://mail.futurelearn.com/re?l=D0IarunnwI3adei0kI2)  [UCL (University College London)](http://mail.futurelearn.com/re?l=D0IarunnwI3adei0kI3)  [Gain a unique insight into dementia through the stories, symptoms and science behind four less common diagnoses.](http://mail.futurelearn.com/re?l=D0IarunnwI3adei0kI4) [Learn more](http://mail.futurelearn.com/re?l=D0IarunnwI3adei0kI5)
* [End-of-Life Care for People with Dementia](http://mail.futurelearn.com/re?l=D0IarunnwI3adei0kI7) [UEA (University of East Anglia)](http://mail.futurelearn.com/re?l=D0IarunnwI3adei0kI8)  [Learn about team structure, how teams work, performance management and diversity in the workplace.](http://mail.futurelearn.com/re?l=D0IarunnwI3adei0kI9) [Learn more](http://mail.futurelearn.com/re?l=D0IarunnwI3adei0kIa)
* [Creating Moments of Joy for People with Alzheimer’s](http://mail.futurelearn.com/re?l=D0IarunnwI3adei0kIc) [Purdue University](http://mail.futurelearn.com/re?l=D0IarunnwI3adei0kId)  [Learn how to help people with Alzheimer's disease live as well as possible with practical tips and advice.](http://mail.futurelearn.com/re?l=D0IarunnwI3adei0kIe) [Learn more](http://mail.futurelearn.com/re?l=D0IarunnwI3adei0kIf)
* [Dementia Care: Staying Connected and Living Well](http://mail.futurelearn.com/re?l=D0IarunnwI3adei0kIh) [Newcastle University](http://mail.futurelearn.com/re?l=D0IarunnwI3adei0kIi) [A course for carers, to help you stay connected to loved ones, manage stress at home and defuse difficult situations.](http://mail.futurelearn.com/re?l=D0IarunnwI3adei0kIj) [Learn more](http://mail.futurelearn.com/re?l=D0IarunnwI3adei0kIk)
* [Dementia Care: Living Well as Dementia Progresses](http://mail.futurelearn.com/re?l=D0IarunnwI3adei0kIm) [Newcastle University](http://mail.futurelearn.com/re?l=D0IarunnwI3adei0kIn) [Be prepared for the future - learn to understand dementia as it progresses and how to seek support.](http://mail.futurelearn.com/re?l=D0IarunnwI3adei0kIo)  [Learn more](http://mail.futurelearn.com/re?l=D0IarunnwI3adei0kIp)
* [Dementia and the Arts: Sharing Practice, Developing Understanding and Enhancing Lives](http://mail.futurelearn.com/re?l=D0IarunnwI3adei0kIr) [UCL (University College London)](http://mail.futurelearn.com/re?l=D0IarunnwI3adei0kIs) [Explore, challenge and shape your perceptions of dementia through science and the creative arts](http://mail.futurelearn.com/re?l=D0IarunnwI3adei0kIt) [Learn more](http://mail.futurelearn.com/re?l=D0IarunnwI3adei0kIu)

**5 Outcomes and next steps**

* **All** to sign up for the frailty hive on HYVR <https://www.hyvr.co.uk/>

**Thank you to everyone involved in the session – please do share details with colleagues and encourage them to join the mailing list and hyvr!**