

Quality Improvement Project: Clinical Frailty Assessment during clerking for the older patient.

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Background and Rationale

- Frailty is an ageing-related condition where multiple body systems lose reserves with increasing vulnerability to health issues (1).
- It affects 10% of those over 65, rising to 25-50% over 85 (1).
- The Commissioning for Quality and Innovation (CQUIN) framework sets a 10% minimum and an ideal goal of 30% of acutely presenting patients over the age of 65 to receive frailty assessment scores (2)

Aims

Measure prevalence of CFS scoring or adequate frailty assessment, compared with CQUIN 5 standard

Compare presence and absence of CFS scores with onwards referrals to frailty services, escalation discussions and mortality

Methodology

- Who**
- Patients over 65 years old
 - Clerked by the medical take at Good Hope Hospital during the catchment weeks

- What**
- Retrospectively collected data on:
- Presence of CFS score
 - Presence of adequate social history
 - Onwards referral to frailty services
 - Mortality
 - Escalation discussions

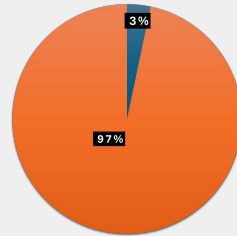
- How**
- PDSA methodology
Interventions included:
- Educational presentation
 - Posters in clerking areas

When

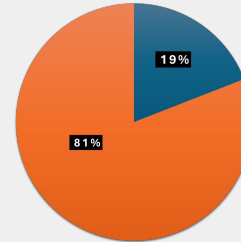
Pre-intervention : 24/09/23-30/09/23
Post-Intervention: 03/06/24-09/06/24

Results

Pre-intervention CFS prevalence



Post-intervention CFS prevalence



■ CFS present ■ CFS absent

Histories	Pre-intervention	Post-intervention
history of ADLs	168 (69.42%)	121 (67.98%)
history of mobility	201 (83.06%)	138 (77.52%)
Total patients	242	178

Outcomes	Pre-Intervention		Post-Intervention	
	With CFS	Without CFS	With CFS	Without CFS
Referral to OPAL medics	5 (62.50%)	34 (14.53%)	6 (17.65%)	9 (6.25%)
Referral to OPAL therapies	3 (37.5%)	61 (26.07%)	28 (82.35%)	25 (17.36%)
Escalation discussions	7 (87.50%)	78 (33.33%)	14 (41.17%)	42 (29.17%)
Mortality	1 (12.50%)	20 (8.55%)	2 (5.88%)	14 (9.72%)
Total patients	8 (3.31%)	234 (96.69%)	34 (19.10%)	144 (80.90%)

Discussion & Limitations

- Only 8 with CFS scores pre-intervention
- Small data pool creates difficulties correlating with outcome measures
- Higher rates of onwards referrals if CFS present
- Higher rates of escalation discussions with CFS

Recommendations

- CFS discussed in induction
- Incorporated into IT clerking systems
- Integrated into nursing triage
- Further cycles of QIP to monitor and maintain change

Conclusion

- Post interventions, the CFS prevalence was above the 10% minimum requirement and closer to the 30% goal set by the CQUIN 05.
- Patients with a CFS score saw higher rates of onwards referrals to older person services, and higher rates of escalation discussions

References

1. **Turner G.** *Introduction to Frailty, Fit for Frailty Part 1.* British Geriatrics Society; Royal College of Nursing; Royal College of General Practitioners; Age UK. Published 11 June 2014. Available from: [British Geriatrics Society Website]

2. NHS England. **CQUIN05: Identification and response to frailty in emergency departments.** NHS Commissioning for Quality and Innovation (CQUIN) Indicators. Available from: [NHS England Website]