

Introduction

Frailty is a condition with increasing prevalence in the UK and significant impact on the lives of those affected and their families [1]. Frailty is best managed by teams of skilled multi-disciplinary health and social care professionals (HSCPs). It is therefore essential that all HSCPs supporting older people living with frailty have access to appropriate training to equip them with the relevant knowledge and skills[2]. E-learning has been used effectively to educate HSCPs for many years [3] but at present there is limited data regarding the effectiveness of e-learning to promote frailty skills and knowledge.

Methods

The British Geriatric Society (BGS) and NHS England (NHSE) collaborated to produce an online e-learning course designed for HSCPs who deliver clinical frailty care and who lead frailty services. These are defined as Tier 3 learners by the NHS Skills for Health Frailty Framework of Core Capabilities [4]. The e-learning course is accessible via the BGS website and sign-up is free for the first 12 months. It launched in October 2023 and contains 4 modules: Understanding and Communicating Frailty, Identifying Frailty, Supporting People Living with Frailty and Building Systems Fit for Frailty. Case studies, clinician voices and evidence-based examples are used throughout the course. Learners need to successfully complete an MCQ assessment after each module to receive their certificate.

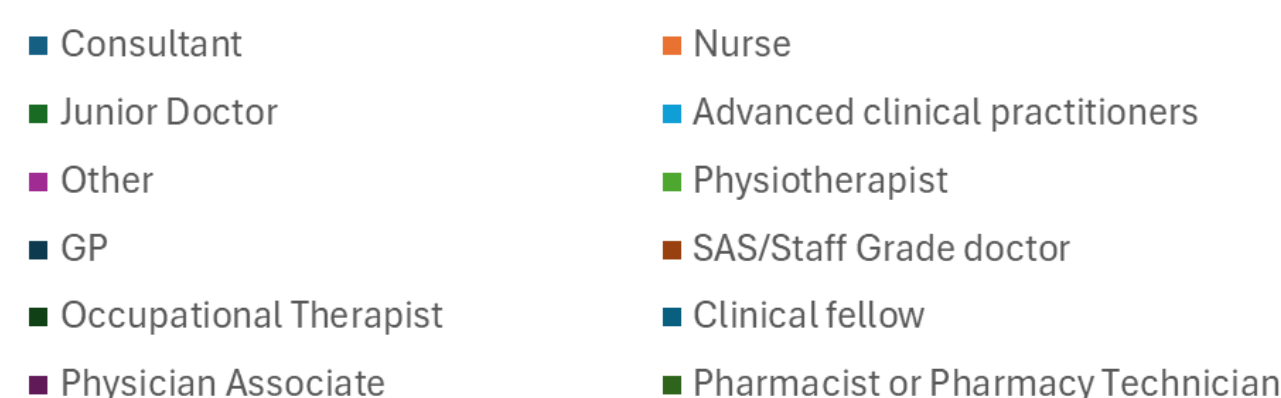
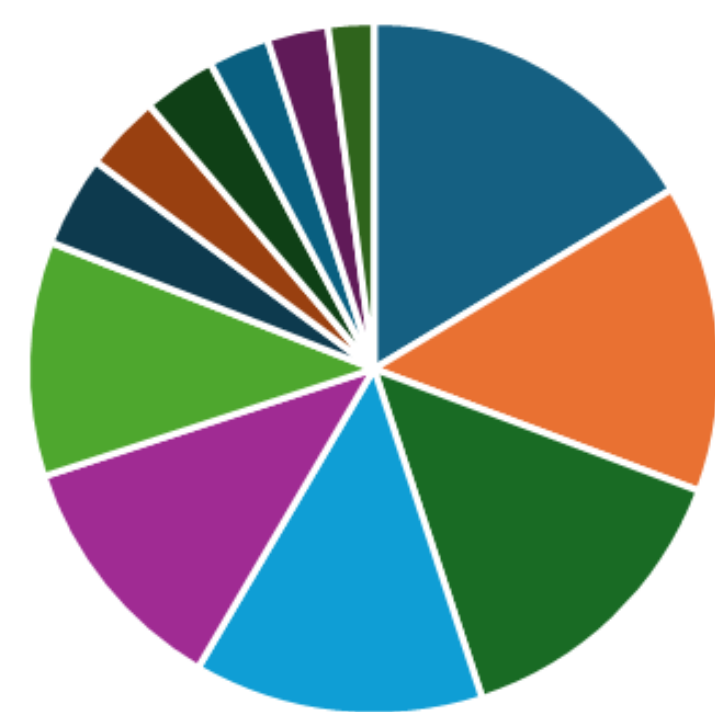


Figure 1 – Occupations of learners enrolled in e-learning module

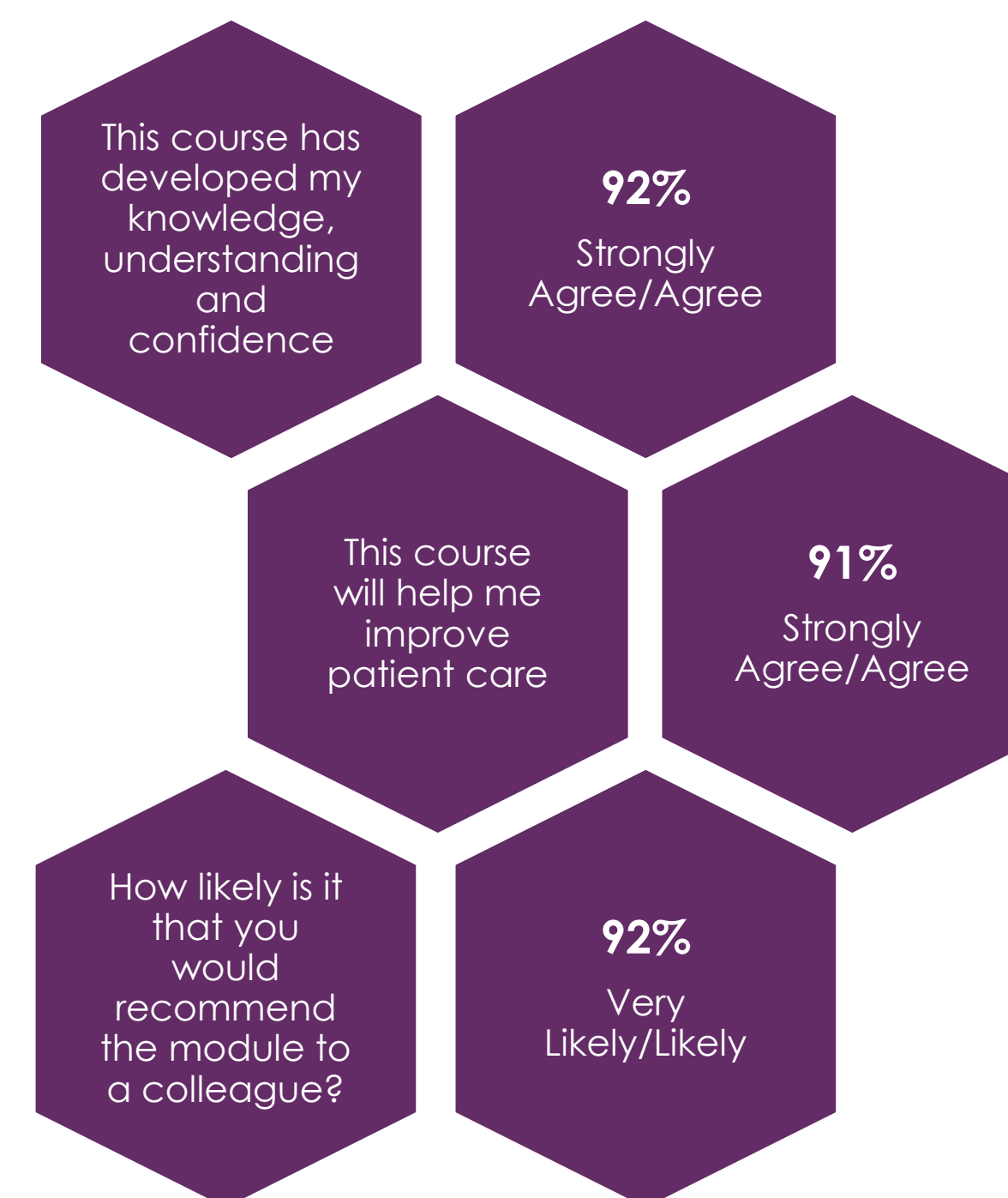


Figure 2 – Quantitative feedback from learners completing e-learning module

Results

Between October 2023 and January 2023, over 4000 HSCPs registered for the online module. A wide range of HSCPs signed up for the module with doctors, nursing staff, advanced clinical practitioners, and physiotherapists the most represented groups (Figure 1). 77% of learners came from England, 18% came from other UK nations and the remaining 5% came from outside of the UK. 92% of those who completed the module agreed or strongly agreed that the course helped develop knowledge, understanding and confidence in frailty. 91% of those who completed the module said completion of the course would help them to further improve patient care and clinical practice (Figure 2). Free-text feedback from learners generated rich qualitative data about real world impacts (Figure 3). Learners indicated they would appreciate the addition of further case studies to facilitate learning in addition to the existing case studies already featured (Figure 4). Learners also expressed a preference for a resource that was more adaptable to all UK regions.

Conclusions

E-Learning can be an effective facilitator of frailty education. Evidence for this was obtained across a wide range of HSCPs working throughout all four UK regions. HSCPs particularly value materials which are case-study based.

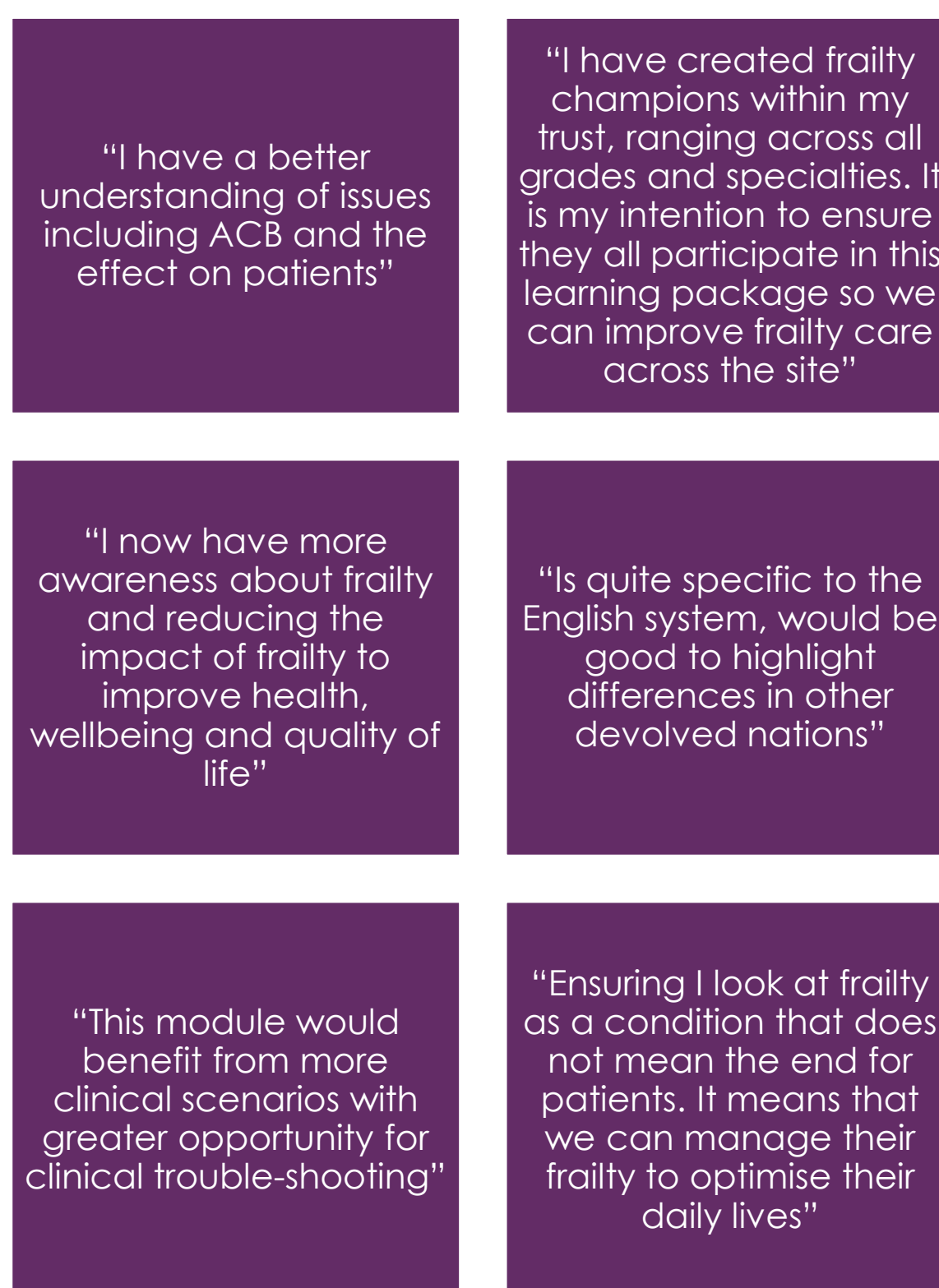


Figure 3 – Qualitative feedback from learners completing e-learning module

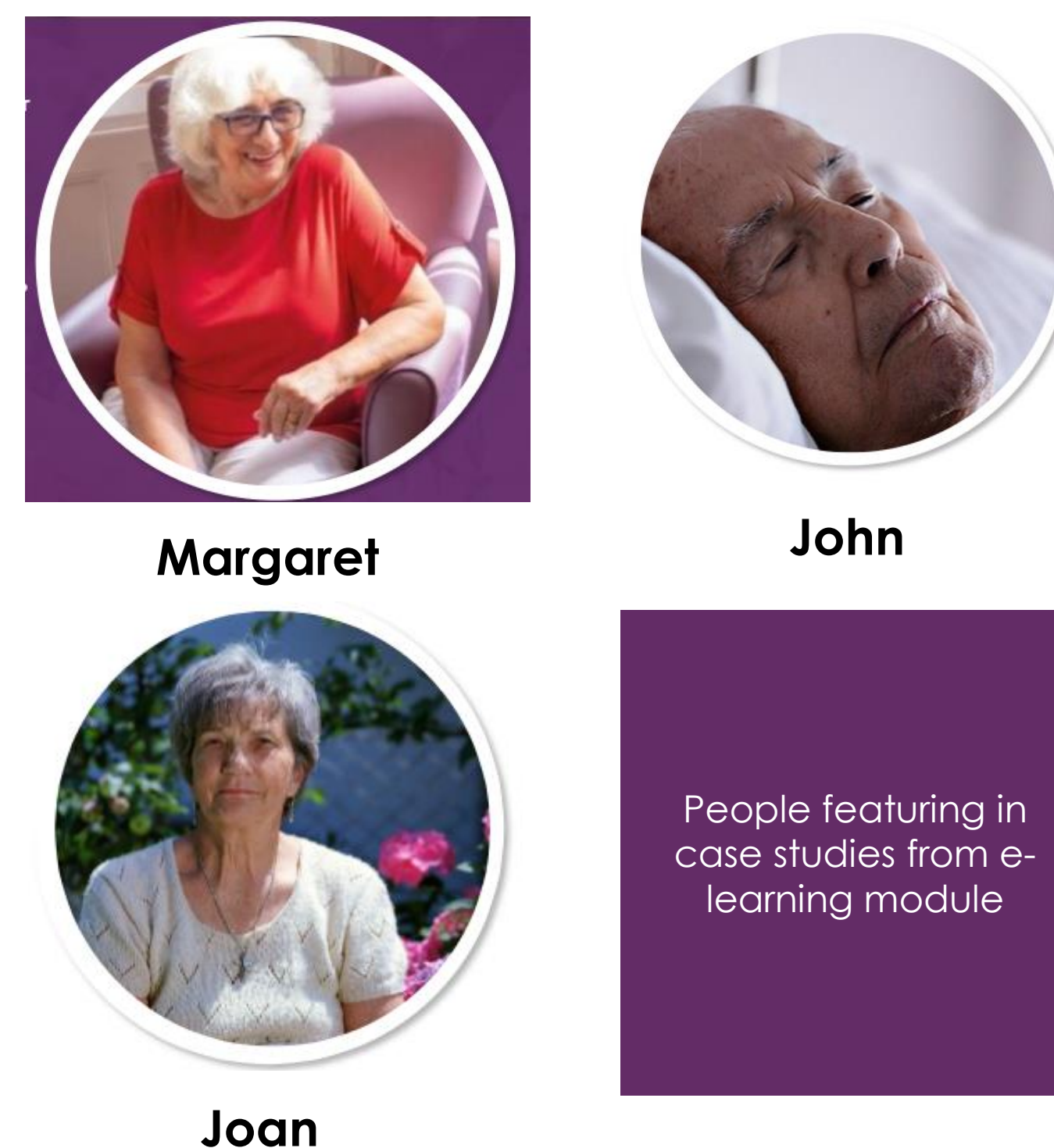


Figure 4 – People featured in case studies from e-Learning module

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Provenance

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4. Pharmacist Delivery and Policy Lead, Community Transformation (Workforce) – NHS England.

References

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2. Graham Ellis, Nick Sevdalis, Understanding and improving multidisciplinary team working in geriatric medicine, *Age and Ageing*, Volume 48, Issue 4, July 2019, Pages 498–505.
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4. Health Education England, NHS England, Skills for Health; Frailty – A framework of core capabilities, Skills for Health, 2018