

Introduction

Approximately 50,000 people living in the Swansea area are aged over 65, which is around 1 in 5 of the population (1). Many of these individuals live with at least mild frailty and multiple co-morbidities. It is important as health care professionals to ensure that patients and their families have a good understanding of what we mean when we say that a patient is frail and how we assess this.

One widely employed tool is the Clinical Frailty Scale (CFS) (2). First developed in 2005 by Rookwood et al, the CFS scoring tool measures a patient's level of frailty to aid personalised healthcare planning and decision making in medical settings. To date, the scoring system has been translated and validated into several languages including Chinese (3), Danish (4), and Greek (5). In this presentation we focus on the first ever translation of the Clinical Frailty Scale into Welsh.

The Welsh Language Act (1993)

Accessibility to information is an important part of ensuring patient autonomy in hospital environments, including the ability to access documents in their native language. In Wales, around 88,000 older people class themselves as being "fluent in Welsh", and around 28% of these feel more comfortable speaking Welsh than English (6). The Welsh Language Act 1993 ensures that the Welsh language seen as equal to the English language in Wales, particularly in the public sector, enhancing its use and visibility in everyday life (7).

Aims and method

The aim of translating the Clinical Frailty Scale was to ensure that Welsh speaking staff and patients can access information about frailty and the use of the CFS scoring system in the hospital, particularly in the acute frailty and COTE wards.


The Bayways Frailty Alliance translated a version of the CFS poster into Welsh which was both visually appealing and clinically correct. The translated poster was distributed to a collection of Welsh speaking clinicians and allied health professionals working in the Swansea Bay area, as well as Welsh speaking members of the public alongside a short survey. In addition to this the poster was sent to Dr Rookwood and his team for a approval of the final poster.

The survey included information about level of proficiency and in what settings do they speak Welsh, as well as their previous familiarity with the CFS scoring system. The survey also allowed respondents to rate how accurate the translations were, and how useful overall they found having a translation.

There was also a free text box at the end to include their thoughts around having the CFS poster translated into Welsh.

CLINICAL FRAILTY SCALE

WELSH

	1	FFIT IAWN	Pobl sy'n gryf, yn heini, yn egniol ac yn llawn cymhelliant. Maen nhw'n tueddu i wneud ymarfer corff yn rheolaidd ac maent ymhlith y rhai mwyaf ffit am eu hoedran.
	2	FFIT	Pobl sydd ddim â symptomau heintiau actif ond yn llai ffit na categori 1. Gwneud ymarfer corff yn aml neu sy'n hynod o actif o bryd i'w gilydd , e.e. yn dymhorol.
	3	RHEOLI'N DDA	Pobl y mae eu problemau meddygol yn cael eu rheoli'n dda , hyd yn oed os ydynt yn symptomatig o bryd i'w gilydd, ond nad ydynt yn aml yn actif yn rheolaidd y tu hwnt i gerdded arferol.
	4	BYW GYDAG EIDDILWCH YSGAFN IAWN	Yn flaenorol "agored i niwed", mae'r categori hwn yn nodi cyfnod pontio cynnar o annibyniaeth hwyr. Er nad yw'n dibynnu ar eraill am gymorth dyddiol, mae symptomau yn aml yn cyfyngu ar weithgareddau . Cwyn gyffredin yw cael eich "arafu" a/neu fiino yn ystod y dydd.
	5	BYW GYDAG EIDDILWCH YSGAFN	Pobl sydd ag arafu amlycach , ac sydd angen cymorth gyda weithgareddau offerynnol lefel uchel o fywyd bob dydd (cyllid, cludiant, gwaith tŷ trwm). Yn nodweddiadol, mae eiddilwch ysgafn yn amharu'n gynyddol ar siopa a cherdded y tu allan ar ei ben ei hun, paratoi prydau bwyd, meddygiaethau ac yn dechrau cyfyngu ar waith tŷ ysgafn.
	6	BYW GYDAG EIDDILWCH CYMEDROL	Pobl sydd angen cymorth gyda'r holl weithgareddau allanol a chadw tŷ . Y tu mewn, maent yn aml yn cael problemau gyda grisiau ac mae angen help arnynt i ymolchi ac efallai y bydd angen ychydig iawn o gymorth arnynt (ciwio, wrth gefn) gyda gwisgo.
	7	BYW GYDAG EIDDILWCH DIFRIFOL	Yn gwbl ddibynnol am ofal personol , o ba bynnag achos (corfforol neu wybyddol). Serch hynny, maent yn ymddangos yn sefydlog a heb fod mewn perygl mawr o farw (o fewn ~ 6 mis).
	8	BYW GYDAG EIDDILWCH DIFRIFOL IAWN	Yn gwbl ddibynnol ar ofal personol ac yn nesáu at ddiwedd oes. Yn nodweddiadol, ni allent wella hyd yn oed o fân salwch.
	9	SALWCH TERFYNOL GWael	Yn nesáu at ddiwedd oes. Mae'r categori hwn yn berthnasol i bobl â disgwyliad oes <6 mis, nad ydynt fel arall yn byw gydag eiddilwch difrifol . (Gall llawer o bobl â salwch anghueol barhau i wneud ymarfer corff tan yn agos iawn at farwolaeth.)

SGORIO EIDDILWCH MEWN POBL SYDD Â DEMENTIA

Mae graffau eiddilwch yn gyffwrdd yn cyflwyno i radiau dementia. Mae **symptomau cyffwrdd dementia ysgafn** yn cynnwys anghellio manylion digwyddiad diweddar, ond dai i gaffio digwyddiad ei hun, atladnod yn un cwestiwn/stori a thynnu'r ôl yn gyffwrddus.

Mewn **dementia cymedrol**, mae nam mawr ar y cof diweddar, er bod yn gallu cofio digwyddiadau eu bywyd yn y gyffwrdd yn dda. Maent yn gallu gwneud gofal personol heb anghellio.

Mewn **dementia difrifol** nid yw nhw'n gallu gwneud gofal personol heb help.

Mewn **dementia difrifol iawn** maen nhw'n aml yn gaeith i'w gwely. Mae llawer bron yn tud.

Clinical Frailty Scale ©2005-2020 Rookwood, Version 2.0 (EN). Cedwir pob hawl. Caniatâd: www.geriatricmedicine-research.co.uk

Rookwood K et al. A global clinical measure of fitness and frailty in elderly people. *CMAJ* 2005;173:489-495.

Wedi cyfieithu gyda chaniatâd mewn i Gymraeg gan Fawdd Iechyd Prifysgol Bae Abertawe 2024



Findings

75% of responders classed themselves as having "advanced" proficiency in Welsh, whilst 25% said they were fluent/native speakers. Participants said they spoke Welsh in number of settings including in the home, at work, in the community and online.

All clinicians and AHPs that were surveyed were familiar with the CFS score, and all were supportive of translation in both its accuracy and usefulness. 90% of participants felt that the Welsh CFS poster was "very clear"

Members of the public were found to be less familiar with the CFS score but felt that having translated versions of clinical information such as posters were useful overall and made them feel valued as Welsh speakers.

Feedback

"I'm very pleased to see material like this being translated into Welsh. It shows respect towards our language and culture."

"Dwi'n gwerthfawrogi'r ymdrech i gyfieithu'r wybodaeth hon i'r Gymraeg. Mae'n gwneud i mi deimlo fel mae meddygion yn meddwl o fi, bod yn siaradwr Cymraeg."

"Frailty is an important topic, and having this in Welsh makes the information more accessible to everyone."

Conclusion

In conclusion, the overall response to the translation was very positive. Comments gathered from participants suggested that Welsh speakers felt valued by having clinical information translated into Welsh, as well as potentially providing information to older patients who are more comfortable speaking Welsh as their first language. Usage of the Welsh translation in clinical settings not only follows the guidance set out in The Welsh Language Act, but most importantly gives more autonomy to patients and their families when engaging with health care providers to better understand frailty and shared decision making.

References

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7. Welsh Language Act. 1993.