



A Regional Approach to Frailty: System data

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Regional outcomes framework for frailty

- Frailty toolkit
- Community of Practice
- Evaluation process and outcome measures
- Create a frailty-related suite of validated measures
- Linked to regional aims and outcomes
- Incorporate national standards and benchmarking
- Identify and share best practice and areas for improvement

Identification of metrics

Potential sources of metrics

NHS OF CCG OIS CCG IAF ASCOF
PHE profiles NHS Digital GPPS ePACT2

Primary Care data Hospital Episode Statistics & SUS

- Creation of a 'long list' of metrics
 - Definition and data source;
 - Reporting level population age, organisation level;
 - Data reporting frequency;
 - Comments regarding data quality and availability.
- Long list of 81 metrics shared with frailty experts for consultation and prioritisation

Key documents and publications

- Acute Care for Frail Older People toolkit NHS Elect
- Enhanced health in Care Homes benchmarking tool NHS England
- Frailty Strategy for South Tees FT
- Economic analysis of frailty Kent Integrated Dataset (KID)
- Frailty Knowledge Sharing NHS England RightCare
- NHS Plans for 2018/19 NHS England & NHS Improvement
- Standard set of Outcome Measures in Older Persons International Consortium for Health Outcomes Measurement (ICHOM)
- Acute Frailty Network Measurement for Improvement NHS Elect

The final list of metrics

- 22 metrics and a Hospital Trust indicator 'bundle'
 - Best reflection of the broad recommendations of the framework
 - Represent impact at a person, community and local system level
- Regional Frailty Community of Practice report is now complete
- Collaborative work between NEQOS and NECS
- Further development required as the work evolves

Breakout session Two: workshop

Summary of contents

Patients aged 65+ who have had a frailty assessment

Patients aged 65+ who are identified as living with frailty, and the severity of their condition

Patients aged 65+ with moderate or severe frailty who are recorded as having had a fall in the preceding 12 months

Patients aged 65+ with severe frailty who have received an annual medication review

Patients aged 65+ with 10 or more unique medications

Flu immunisation rate in people aged 65 years and over

Dementia: 65+ years old estimated diagnosis rate

Proposed indicator - Patients aged 65+, with depression or dementia, and who have moderate or severe frailty

The proportion of people who use services who have control over their daily life

The proportion of people who use services who reported that they had as much social contact as they would like

Carer reported quality of life

Proposed indicator - Reduced Ioneliness

Proposed indicator - Number of people referred into social prescribing schemes

A&E attendance rates for patients aged 65 years and over

Emergency hospital admission rates for patients aged 65 and over

Emergency readmissions within 30 days of discharge from hospital (for those aged 65 years and over)

Stranded patient: LOS 7+ and 21+ days

Conversion rates from A&E attendance to hospital admission

Hospital activity in the last year of life

Hospital Trust indicator set (Falls with harm, Pressure ulcers, Patient experience of hospital care, A&E waiting time 4 hour standard)

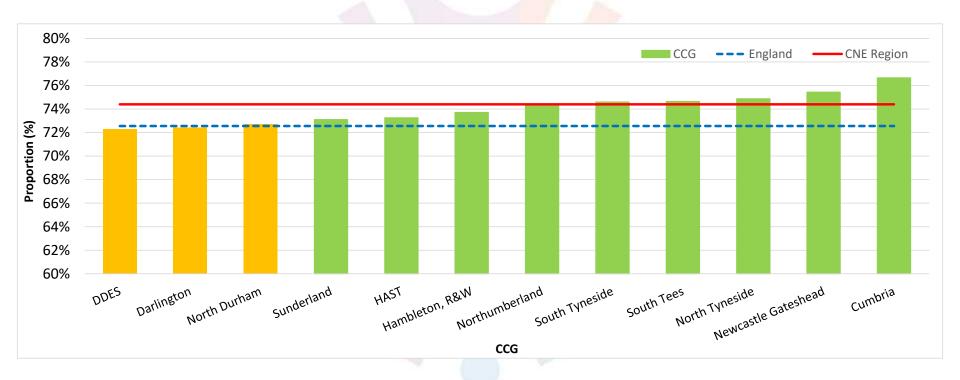
Older people (aged 65 and over) who were still at home 91 days after discharge from hospital into reablement/rehabilitation services

Long-term support needs of older adults (aged 65 and over) met by admission to residential and nursing care homes

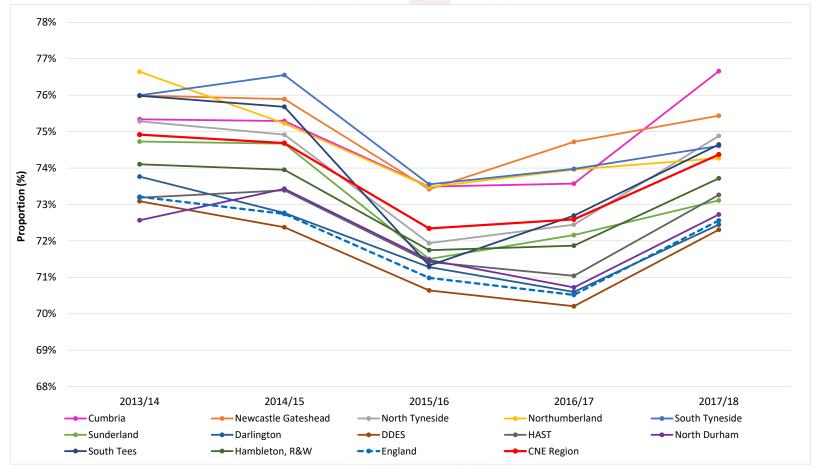
Proportion of deaths in usual place of residence

involve consider assess respond evaluate

Flu immunisation rate in people aged 65 years and over winter season 2017 to 2018



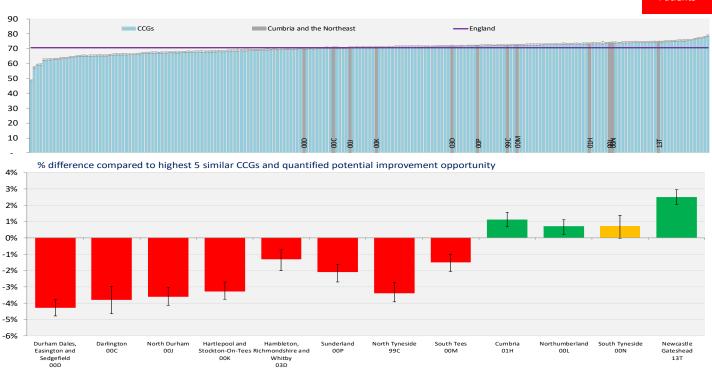
Flu immunisation rate in people aged 65 years and over - trend



Over 7,600 additional older patients could have had a flu jab if most CCGs achieved the same rate as their best 5 peers

Percentage of seasonal influenza vaccine uptake amongst GP patients aged 65+ - 1 Sep 2016 - 31 Jan 2017

7,630 Patients



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Questions or comments?

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