

A large, faint background graphic consisting of several stylized human figures in various colors (purple, orange, green, blue, red, grey) arranged in a circular pattern, suggesting a community or network.

A Regional Approach to Ageing Well Community of Practice

6th August 2020

House Keeping

- Please ensure microphones are muted
- If you have any questions throughout the session then please use the chat facility. We will attempt to address questions, if we can't then we will follow up after the event.
- Speaker presentations will be circulated following the event
- The event will be recorded and shared



Welcome and Introductions

involve consider assess respond evaluate



Frailty - the latest

Dr. Dan Cowie
Clinical Lead

Frailty and COVID-19

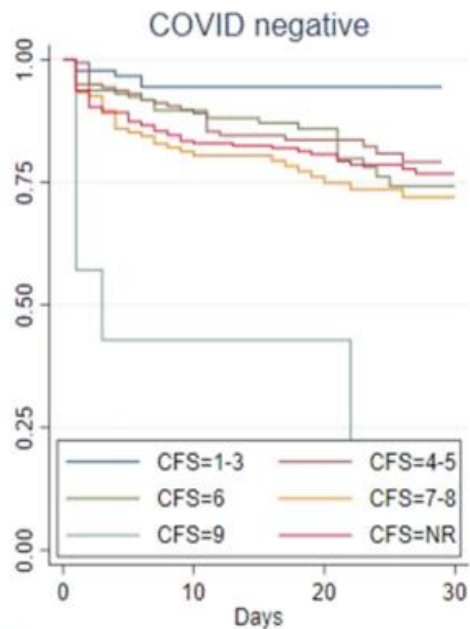
- **Delirium:**

- A missing piece in the COVID-19 pandemic puzzle. Argument for it being part of the screening criteria for COVID-19 in older people. <https://academic.oup.com/ageing/article/49/4/497/5831131> and
- Delirium is a presenting symptom of COVID-19 in frail, older adults: a cohort study <https://www.medrxiv.org/content/10.1101/2020.06.15.20131722v1.full.pdf+html>

- **CFS and mortality:**

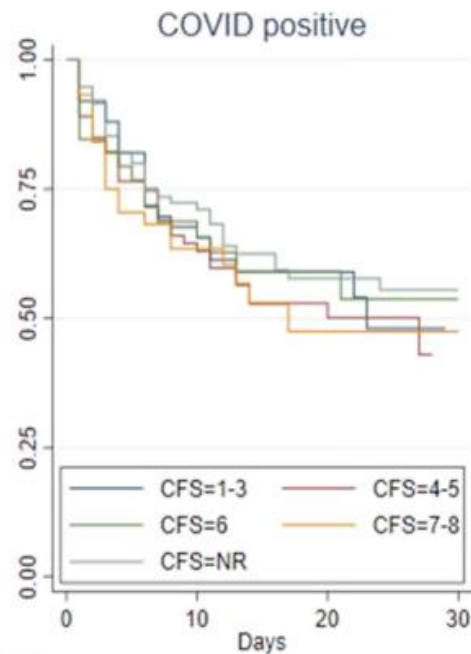
- **Cope study** - results support the use of CFS to inform decision making about medical care in adult patients admitted to hospital with COVID-19. [https://www.thelancet.com/journals/lanpub/article/PIIS2468-2667\(20\)30146-8/fulltext](https://www.thelancet.com/journals/lanpub/article/PIIS2468-2667(20)30146-8/fulltext)

Survival by CFS



Number at risk

CFS=1-3	90	70	44	17
CFS=4-5	161	122	74	35
CFS=6	159	119	61	22
CFS=7-8	135	95	64	33
CFS=9	7	2	2	0
CFS=NR	270	192	122	60



Number at risk

CFS=1-3	50	32	19	0
CFS=4-5	73	42	19	2
CFS=6	39	23	11	4
CFS=7-8	44	24	6	4
CFS=NR	95	54	33	11

ICARE - links

Involve

- **Age UK** – the future of care for older people - <https://www.ageuk.org.uk/discover/2020/06/the-future-of-care-for-older-people/>
- **Adult social care** – shaping a better future (9 statements) - <https://www.adass.org.uk/media/8036/adult-social-care-shaping-a-better-future-nine-statements-220720.pdf>

Consider

- **SPRINTT study** - Physical frailty / sarcopenia predicting outcomes <https://www.sciencedirect.com/science/article/abs/pii/S0168851020301081>

Assess

- A Computerized Frailty Assessment Tool at Points-of-Care: **Development of a eFI-CGA** - <https://www.frontiersin.org/articles/10.3389/fpubh.2020.00089/full>
- **Case finding** tool for frailty - <https://academic.oup.com/ageing/advance-article/doi/10.1093/ageing/afaa119/5868063?guestAccessKey=36ef3bd2-df98-4b44-a7fe-9a47e9f64350>

ICARE - links

Respond

- **Community Connectivity** – *SP case studies and COVID-19* - <https://www.england.nhs.uk/personalisedcare/social-prescribing/case-studies/never-waste-a-crisis-reflections-on-social-prescribing-and-covid-19/> and social prescribing evidence – improves wellbeing, but more research is needed in what works, for whom and when <https://www.iriss.org.uk/resources/insights/evaluating-social-prescribing>
- **LTC tailored care and case management** – useful BGS summary for PCNs/frailty <https://www.bgs.org.uk/sites/default/files/content/attachment/2020-01-16/DES%20BGS%20Response.pdf> and and fingertips tool for dementia (6 domains) - <https://fingertips.phe.org.uk/profile-group/mental-health/profile/dementia>
- **Crisis Response and Recovery** – ‘Your COVID recovery’ <https://www.england.nhs.uk/2020/07/nhs-to-launch-ground-breaking-online-covid-19-rehab-service/>
- **Hospital frailty care** - following Mrs B frailty journey in hospital - <https://www.acutefrailtynetwork.org.uk/Members/Mrs-Bs-Frailty-Journey->

Resources

BGS frailty 'hub' – resources and learning

<https://www.bgs.org.uk/policy-and-media/new-%E2%80%98one-stop-shop%E2%80%99-for-frailty>



Digital CGA Tool



- Lead by Healthcall
- Scoping out CGA 'content'
- Considering interoperability, coding, connecting the 'system' and allowing MDTs to operate
- Testing 'soon', likely in two ICP areas

Research Capability Funding

Aim: understand the resident population in two sheltered housing schemes

Why: anecdotal evidence needs are as complex as older adults living in care homes yet they are excluded from EHCH services

Focus: one scheme in Ncle, one in N Tyneside, 3 practices, two part study comprising of literature review and statistical data analysis comprising of age, gender, frailty score, history of GP visits, community service involvement, unscheduled care, tenure, number of medications, reason for moving, number of falls

Future: links with ***digital profiling tool** being developed and also ****national longer term study underway**

* awaiting information from this research to finalise tool

** joint study between Claire Goodman, Adam Gordon, Barbara Hanratty developing a data set for use in identifying how best to support care homes based, LB discussed with them and they are interested in our learning feeding in to the larger study



Jackie's Story

- Further work on intro/ending videos
- Addition of impact/measures
- Review of 'content'
- Lets take a look – www.rawtest.co.uk

Metrics update – Andrea Brown

1. iCARE / Risk factors for frailty

- We are working through the evidence base (published literature) regarding to risk factors relating to frailty, and for each risk factor we're providing impact statements describing the extent of the impact on frailty.
- Once this stage is complete, we will share this with NECS (Bob's team) for them to provide local context and data relating to the NENC populations for each of the risk factors. We anticipate that the first stage of this work will be completed soon and shared.

2. Information sharing – Frailty and COVID-19

- In the June meeting I mentioned some work NEQOS was doing with Julia Newton in terms of the impact of COVID-19. A project brief for this has been produced and shared with the AHSN and PHE. This work is now well underway, to produce a report based on a set of metrics which demonstrate the impact of COVID on referrals, screening and activity (across all settings of care). This relates to people of all ages, but some metrics can be reported based on population subsets such as age. It is anticipated that there will be a number of reports produced as the data becomes available, with the first report due by the end of August.

3. Frailty metrics and trends

- NEQOS has shared availability to participate in a frailty metrics and trends meeting, due to take place in September.