

## CONFERENCE ABSTRACT

# National Clinical Programme for Older People: National Frailty Education Programme "Fundamentals of Frailty"

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**Introduction:** Although not an inevitable part of ageing, frailty is an increasingly common condition in older people (Savva et al., 2013). The associated potential for serious adverse outcomes means that even a relatively minor event such as an infection can result in a dramatic change in health status: from independent to dependent; mobile to immobile; postural stability to falling; lucid to delirious (Clegg, 2013). Furthermore, frailty has been shown to be a strong and independent predictor of emergency department visits and hospitalisations, hospital readmissions (Pugh et al., 2014) and in-hospital mortality (Bagshaw et al. 2013). Healthcare professionals need to understand the risk factors for frailty to enable them to implement effective programmes for detection, prevention and management.

### **Frailty: What We Know**

The recognition of frailty is important and should form part of any interaction between an older person and a healthcare professional.

An individual's degree of frailty is not static. It may improve or deteriorate, and is influenced by factors including the care received when an individual presents to a health professional.

One of the major challenges posed by an ageing population is the ability of healthcare professionals to understand, recognise and manage frailty

**Programme Aim:** Frailty is an emerging science and this programme was developed to provide healthcare professionals with the knowledge and skills required to provide effective care to older people living with frailty, wherever they access health services. It aims to provide healthcare professionals with an enhanced understanding of frailty and frailty assessments, thereby ensuring earlier recognition, improved healthcare management and better health outcomes for frail older adults. The programme philosophy is based on the belief that education increases knowledge and enhances healthcare professional's skills in the clinical area.

**Methodology:** The National Frailty Education Programme (NFEP) is a collaboration between NCPOP and The Irish Longitudinal Study on Aging (TILDA), in partnership with the Acute and Emergency Medicine Programmes. Using a "proof of concept" design the programme is being piloted in three Hospital Groups and corresponding Community Healthcare Organisations.

**The programme methodology involves:**

Step 1: Nominated facilitators from participating hospitals and CHOs attend a one day "Insights into Frailty" education Programme with TILDA. These nominees are representative of all members of the multidisciplinary team.

Step 2: This group attend a one-day workshop with the NCPOP

Step 3: These facilitators roll-out the NFEP in an integrated manner across their local organisation.

Parallel to this a local governance group is established to support the programme roll-out and to consider new ways of working that will enhance outcomes for the frail older person accessing their services

**Evaluation:**

Survey of facilitators knowledge pre and post TILDA

Analysis of NFEP participants learning

Service outcome evaluation may include:

implementation of an assessment tool, audit of the use of the chosen tool, documented referral pathways, initiation of CGA and audit of numbers undertaken.

Further examination of impact may involve decreased length of stay, reduction in falls, and audit of delirium management. All outcome measures would be aligned to the NCPOP KPI's and national strategy.

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**Keywords:** frailty; education; gerontology; TILDA

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