Frailty in General Practice

Dr M Ferguson & Partners

Quality issue

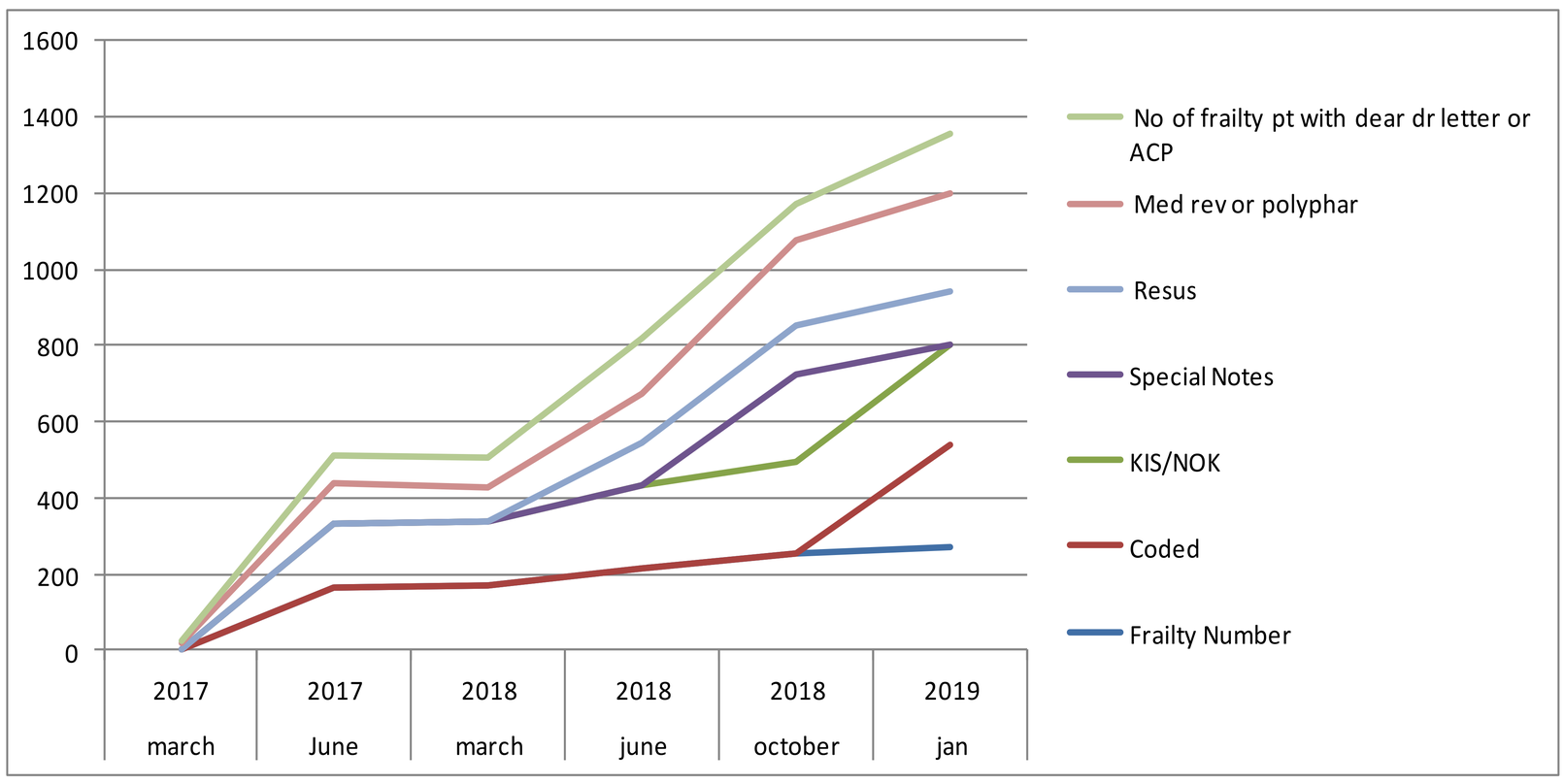
10-15% of the population may have a diagnosis of frailty. Using the EFI score we can categorise patients in to mild/moderate/severe frailty. Patients with frailty are at increased risk of multiple consultations, emergencies, hospital admissions and drug related side effects.

Specific aim

To improve quality of holistic care for our patients with frailty by raising awareness of frailty within the team, diagnosing frailty using the EFI score, coding diagnosis and updating KIS with NOK and patient wishes, as well as flagging up what matters most to patients. Lastly reviewing and trying to reduce polypharmacy.

Measurements of improvement

- 2.7 % practice population coded as frail Jan 2019
- 90% have special notes with 78% updates in last year
- 94% have had their medication reviewed in last year
- 100% of staff who responded identified and where involved in frailty care



QI Tools/Tests of change

- Process mapping
- Staff questionnaire
- Care bundles
- PDSA - home visits
  - hospital discharges

Effects of change

- Improving sharing patients wishes
- Sealing of care in the community
- Functional assessment
- Holistic care
- Challenging polypharmacy

Lessons learned

All home visits, frailty is likely diagnoses

- 50/70% of hospital discharge, frailty is a possible diagnosis
- Team involved – vital and updated regularly by email/PLT

Future plans

- Roll out to cluster (?)
- Consider target moderate frailty
- Use of MSK team/care of the elderly nurse

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