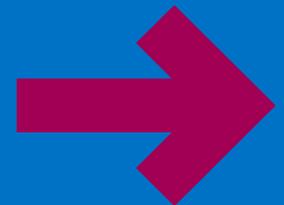


**Ageing Well**  
Quality Healthcare in Later Life

***The National Frailty Opportunity***

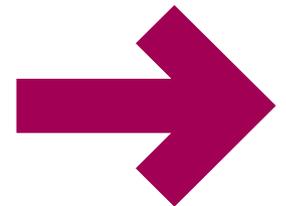
***Martin Vernon***  
*National Clinical Director Older People*



**28th September 2018**

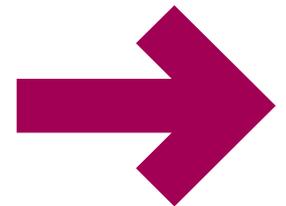
# Ambition for frailty..

***Everybody should know what to do next  
when presented with a person living with  
frailty and/or cognitive disorder'***



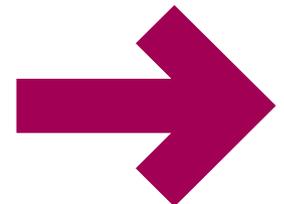
# Three priorities for frailty

- 1. Change in approach to health & social care for older people**
- 2. Preventing poor outcomes through active ageing**
- 3. Quality improvement in acute & community services**



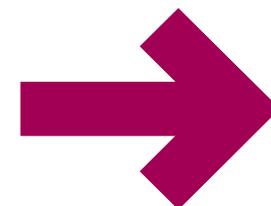
# Why? -Population ageing

- ❑ **Number of people aged 65 & over will increase by 19.4%:** from 10.4M to 12.4M
- ❑ **Number with disability will increase by 25.0%:** from 2.25M to 2.81M
- ❑ **Life expectancy with disability will increase more in relative terms**



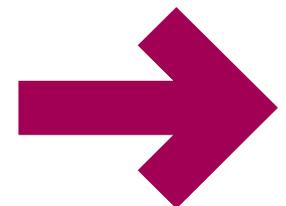
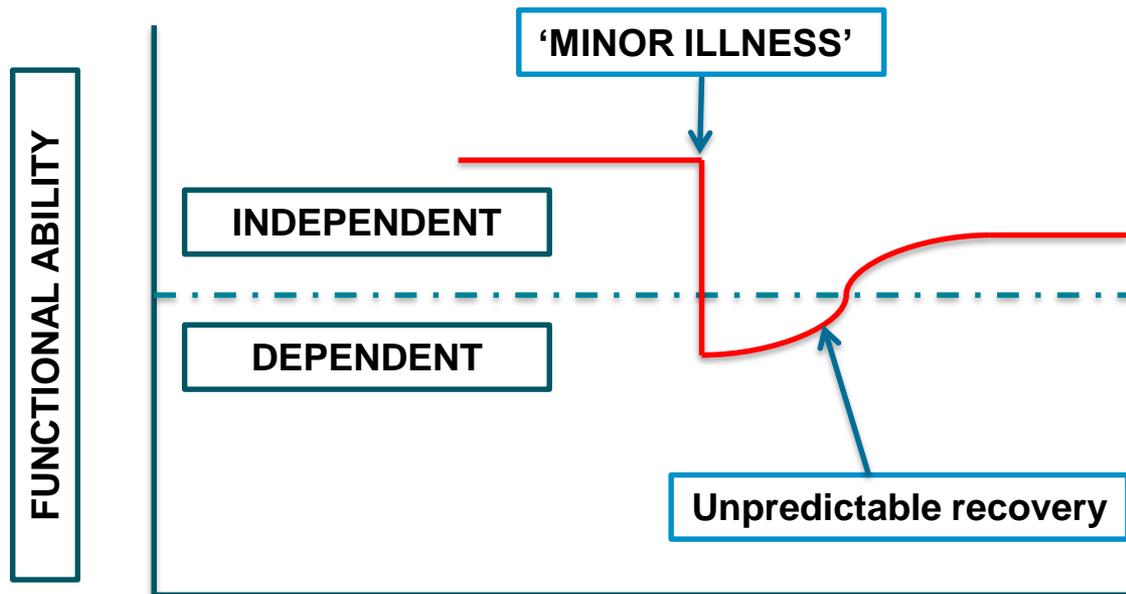
# What?-Tackling needs & outcomes

- ❑ People do not age uniformly
- ❑ Segmentation purely by age is therefore no longer helpful
- ❑ Population averaged outcomes will not help tackle **inequalities**
- ❑ The focus going forwards should be on needs, not age
- ❑ Services & pathways must be responsive to **needs and preferences**
- ❑ Align and plan service offers to **populations segmented by need**
- ❑ **Frailty is an expression of ageing and helps us understand needs**



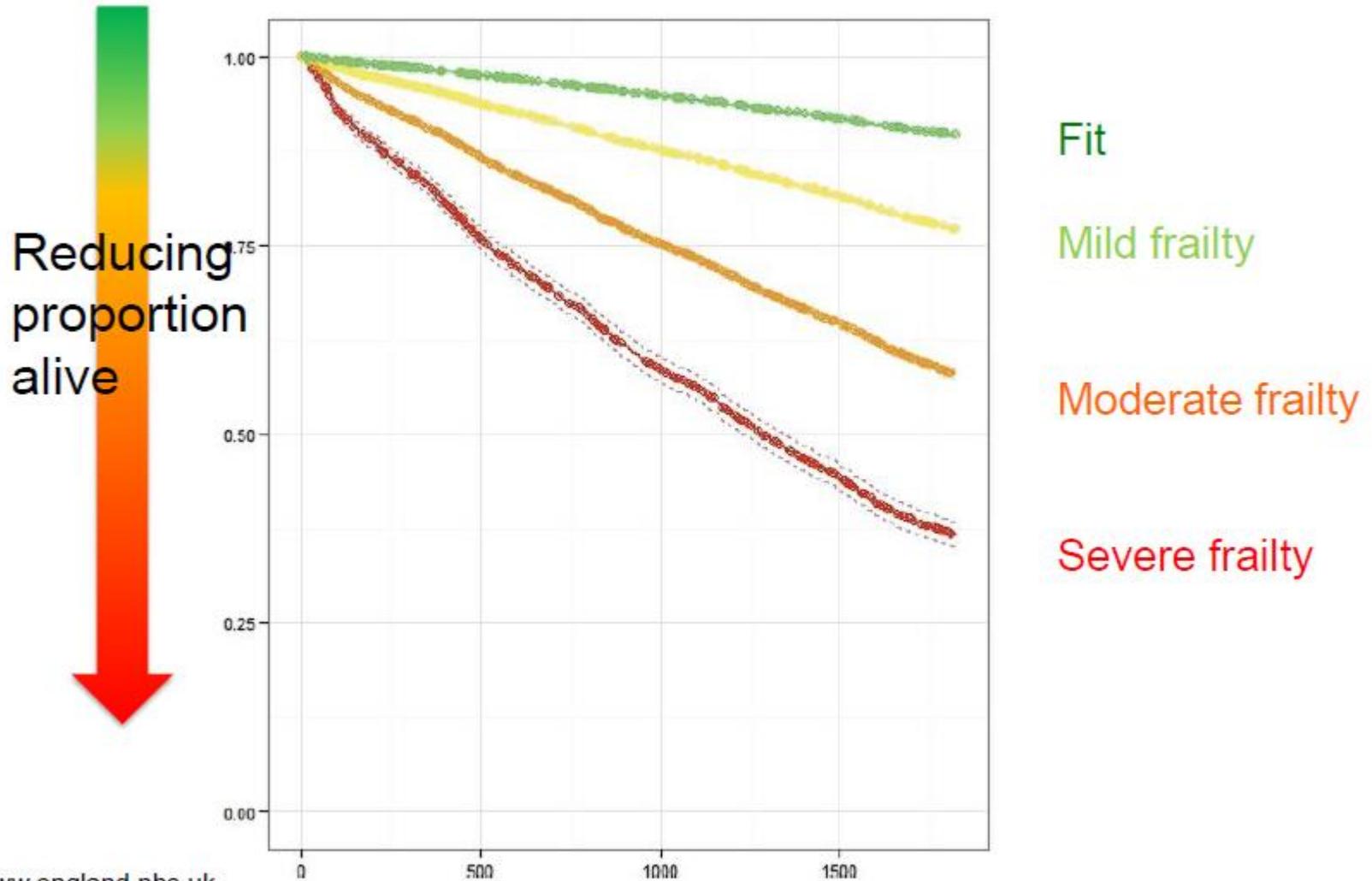
# What does NHS England mean by frailty?

*“A long-term condition characterised by lost biological reserves across multiple systems & vulnerability to decompensation after a stressor event”*

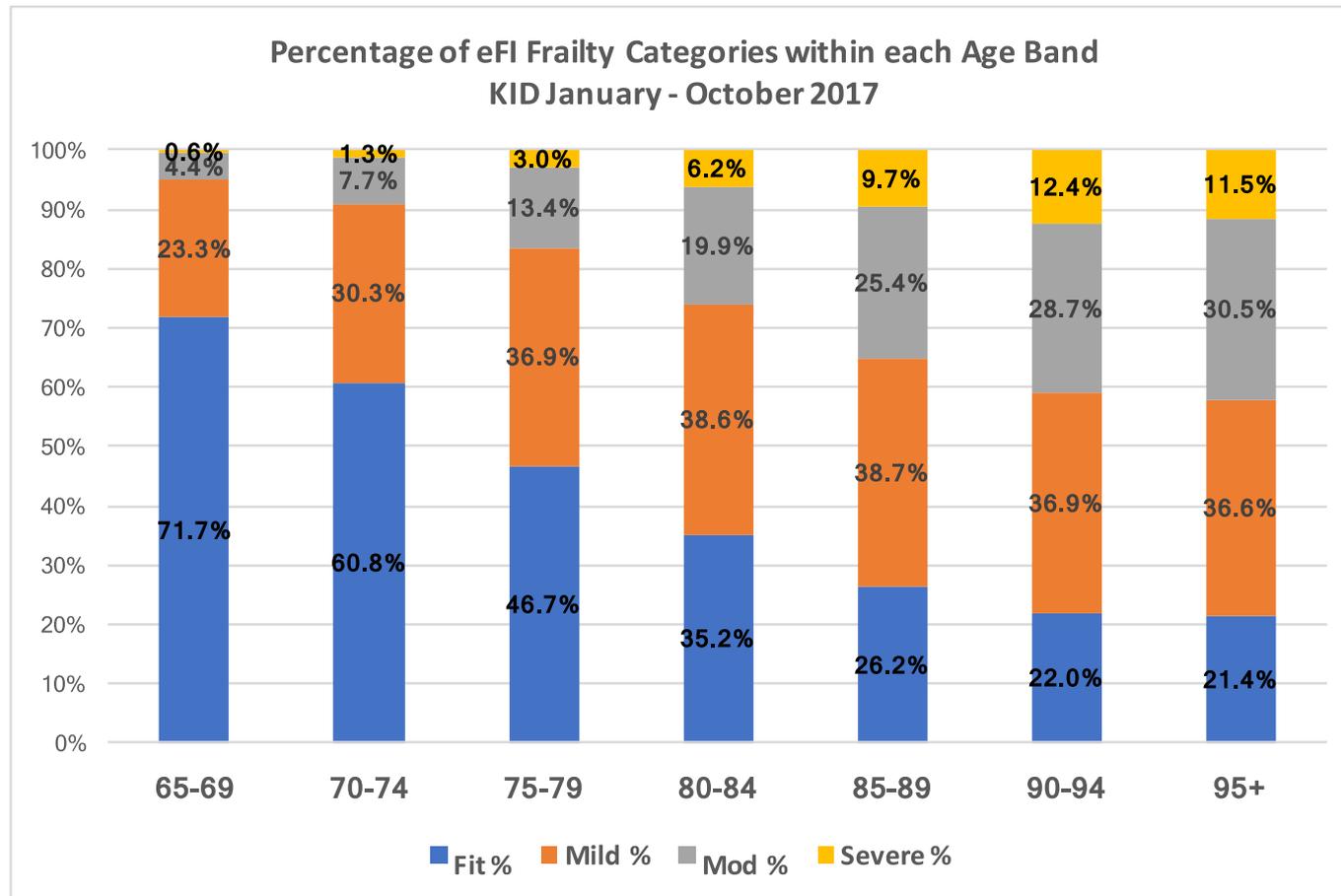


# Frailty is not good for you

Time (days) → 5 yrs



# We don't all age in the same way



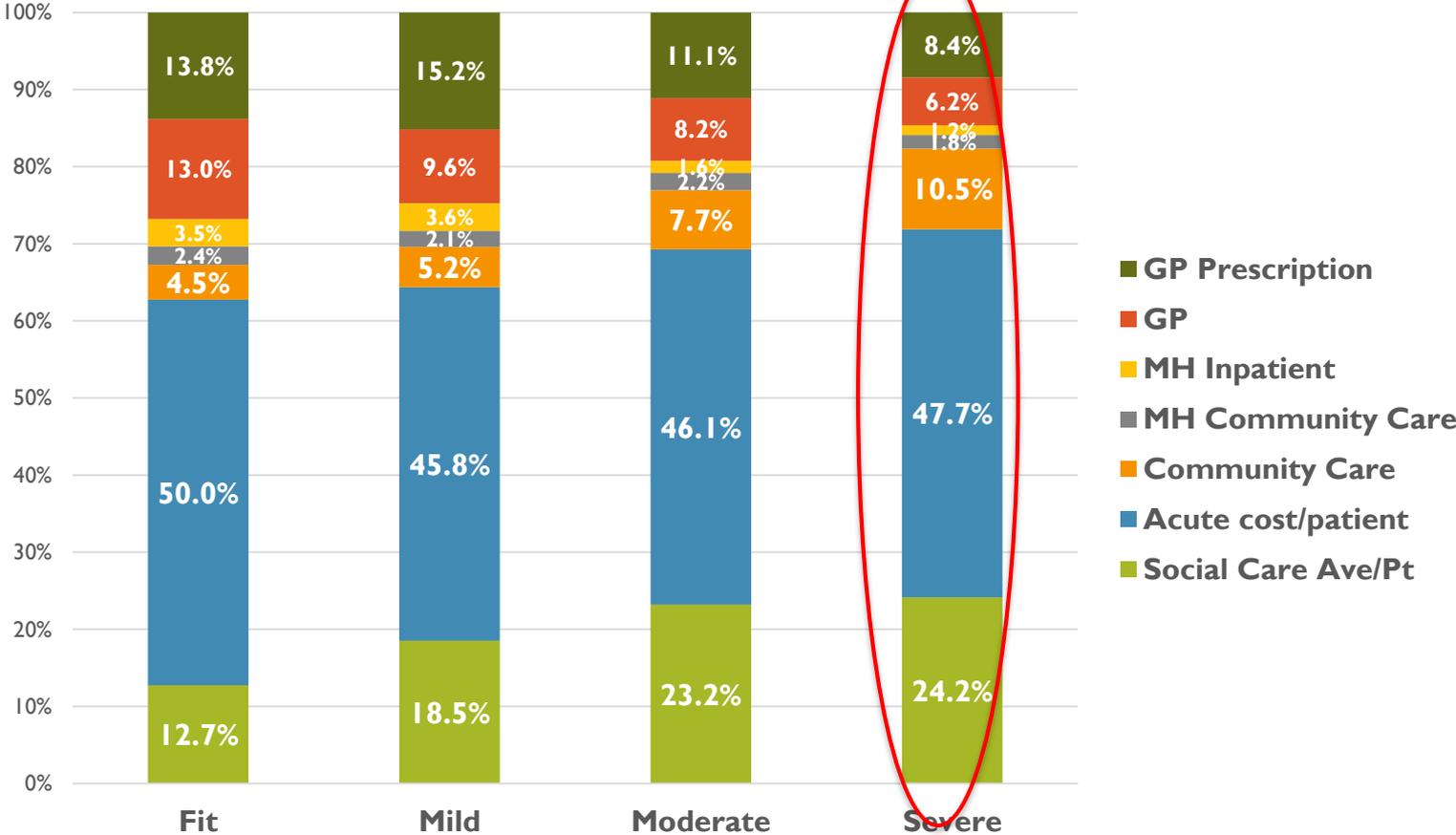
**Also, consider inequalities carefully:**

**Lowest economic quartile** frailty commences **earlier** in the life course and **progresses more rapidly**, contributing to **reduced life expectancy**

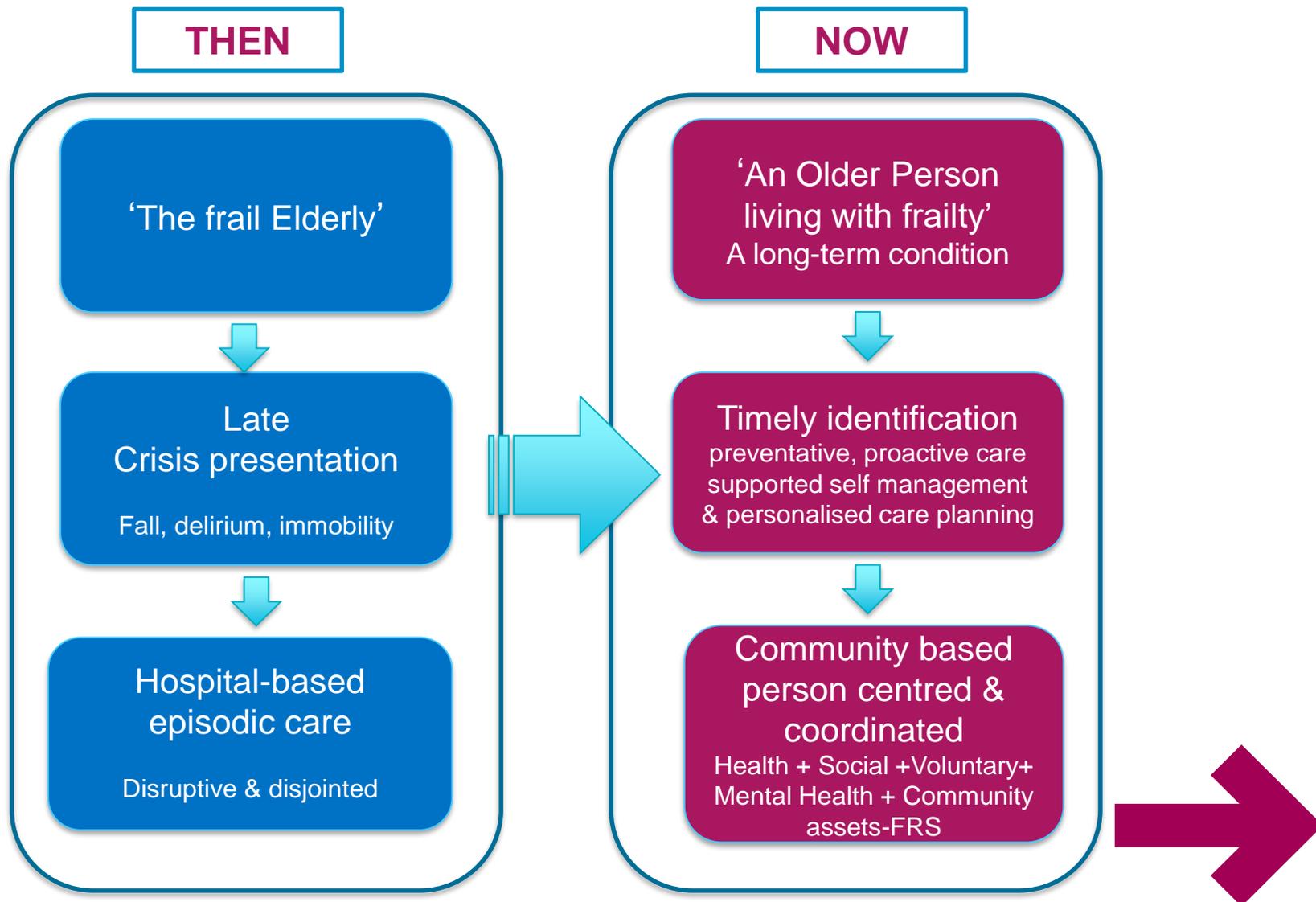


# Costs distribute differently as frailty progresses

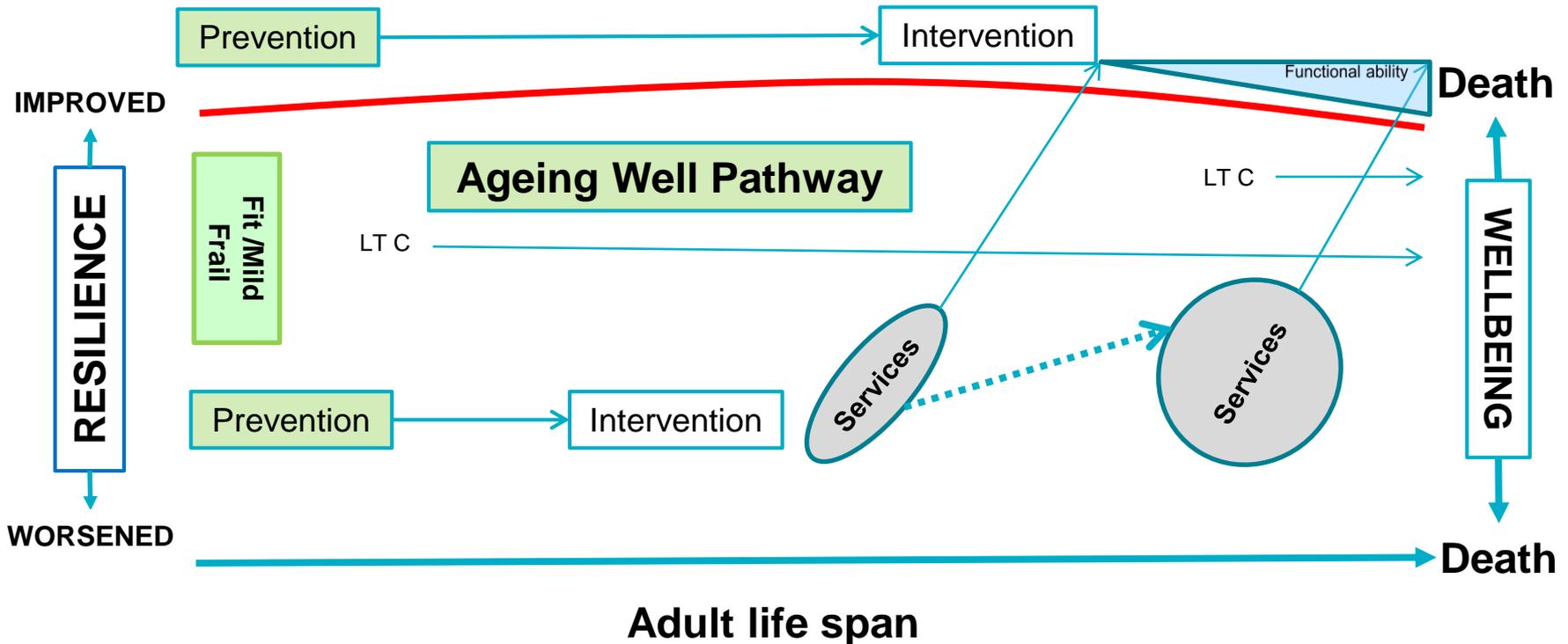
Percent total spend by category within eFI band  
 Patients 65+ KID Jan - Oct 2017 activity data



# What is the national approach?



# Population segmentation: Prevention

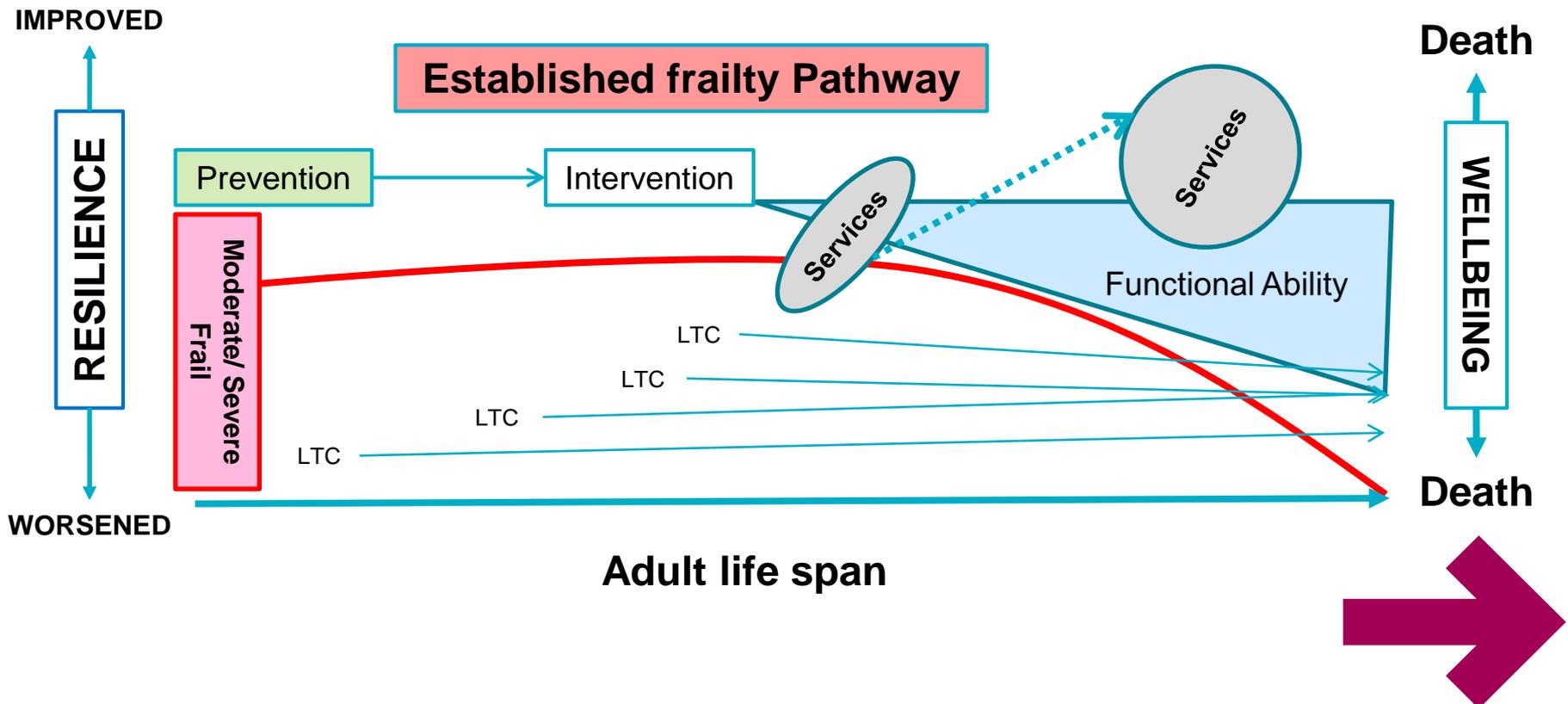


- **Maintained functional ability & wellbeing** throughout life
- Emphasis on **activation and self help**
- **Timely, well planned & proportionate** service support for needs
- **Lower level support** towards end of life
- **Key Outcome: Increased care free life years**



# Population sub-segmentation: Intervention

- **Earlier** declining function & need for **service support**
- **Timely identification** of risk and **managed escalating need**
- Early **opportunity to trigger planning** & decisions
- Timely **support towards end of life**
- With declining function, **maintained wellbeing key is a key outcome**



# Integrated Care for Older People (ICOP)

## Current position

### Ageing population

2040 nearly one in seven will be over 75

### Frailty prevalence increasing

A person with mild frailty has twice the mortality risk of a fit older person at the same age

Currently people with frailty don't always get the care they need in the right setting and at the right time

Hospital interventions for some people with frailty are limited in efficacy

### Opportunities for prevention

There are currently 4000 hospital admissions a day for people with frailty

### Intermediate care gap

National audit data (NAIC 2017) suggests intermediate care capacity needs to double

## 10 Year Vision

### An NHS priority

To help older people stay healthy and live independently in their communities: work already underway

The NHS now has an opportunity to be world leading in our approach to population ageing & caring for older people

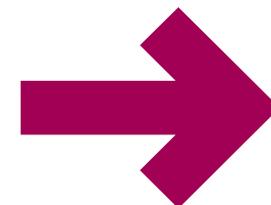
Implementing at scale support for people in community settings

- Working with social care we will take a new joined up approach
- Using population segmentation to focus appropriate care on the needs of older people vulnerable to the effects of frailty
- We will continue to support older people with advancing frailty in their communities to the end of their life

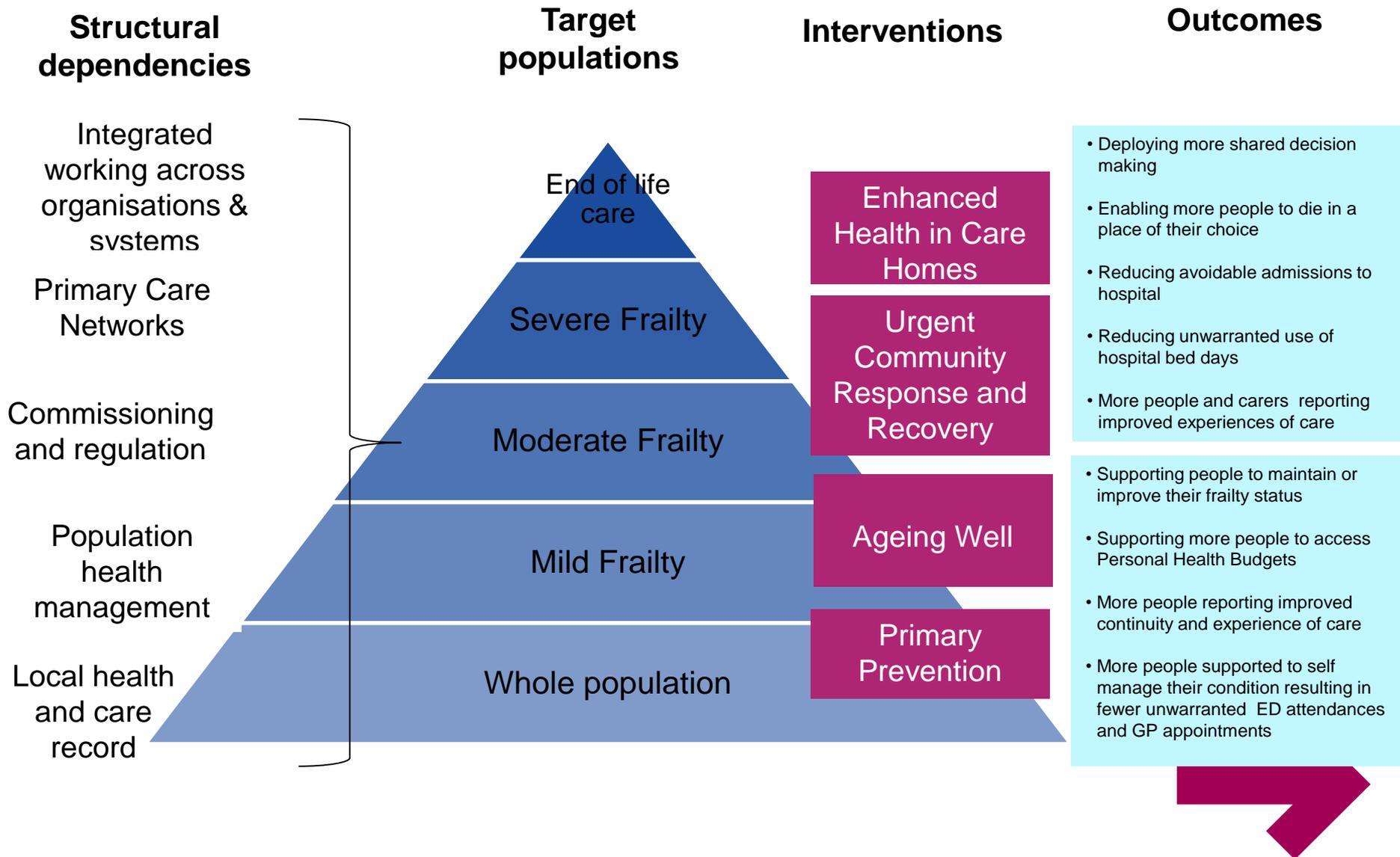
## Proposed Service model

1. Ageing Well (MDT) Service
2. Urgent Community Response and Recovery Service
3. Enhanced health in Care Homes (EHCH)

Implementation will be developed from existing and best practice in an adoption and improvement approach.



# Integrated Care for Older People (ICOP)



# Want to know and share more? [england.clinicalpolicy@nhs.net](mailto:england.clinicalpolicy@nhs.net)

## Supporting Older People living with Frailty

- Frailty Webinars 2017
- Resources (shared)
- Case studies
- Guidance documents
- futureNHS collaboration platform - key documents
- Frailty Fulcrum Animation
- Falls webinar and Resource Pack - Routine frailty identification in the GP contract
- Archive
- BLOG: Be careful using the F-word with frail patients: Professor Martin J Vernon
- Calendar
- Discussion Forum
- Organisation Contacts

Workspace home

### Workspace Home

#### Welcome

Welcome to the supporting older people living with frailty in primary care platform. You are invited to use this platform to build an informal frailty network or community that can share and discuss issues and good practice quickly and easily.

We hope that this platform will **support the smooth and orderly introduction of changes to the GP contract with regards to the routine identification of frailty.**

#### Introduction from GP and Associate National Clinical Director Dawn Moody

For everyone in general practice, supporting people living with frailty is a large and growing part of our work. However, frailty is a relatively new and rapidly developing subject with pockets of good ideas and practice dispersed across the country. This means that more and more people are developing an interest in frailty and that those of us who have had an interest in frailty for a number of years are still learning! My hope as a GP is that this forum grows into an active and supportive

#### Latest News: Frailty Core Capabilities Framework

Update regarding the Health Education England, NHS England and Skills for Health collaboration to develop a 'Frailty Core Capabilities Framework.'

The consultation has now closed. The feedback is currently being analysed to incorporate into the document with a plan to publish in late April 2018. Plans are being agreed on methods and approach for dissemination and evaluation. You can also access further information here: <http://www.skillsforhealth.org.uk/services/item/607-frailty-core-capabilities-framework>.

#### Help requested with research regarding what frailty means

**Can you help with research on 'Frailty in the new General Medical Services contract—what does it mean to Primary Care Providers?'** A PhD researcher from the University of Manchester is looking at exploring how is frailty understood and enacted by healthcare professionals in their daily practice and how does this compare with the new GP contract. Participants will receive 20 minutes

<https://future.nhs.uk/connect/ti/frailtyinprimarycare/groupHome>

[www.england.nhs.uk/ourwork/ltc-op-eolc](http://www.england.nhs.uk/ourwork/ltc-op-eolc)

