FRAILsafe: Experience of utilizing a pilot frailty screening tool in the Acute Medical Unit

Balakrishnan T, Soong J, Lee P, Bell D, FRAILsafe Network

Methods
Between August and December 2013, 2 researchers screened prospectively collected data from 127 emergency medical admissions to Chelsea and Westminster Hospital using the FRAILsafe™ tool[1] and patient electronic and paper records. Descriptive statistics was done on SPSS™ v21 and Microsoft Excel™ 2010.

Results
A total of 127 patients triggered phase 1 of the FRAILsafe tool. Of these, 117(92%) patients were over 65 years. The average number of medication prescribed on admission was 7 (0-15) and the average number of co-morbidities was 5(0-11). Frailty syndromes were common: 23 patients had dementia (18%), 21 patients had incontinence (16%) and 65 patients presented with falls (51%). These vulnerable patients had significant poor clinical outcomes. There were 11(9%) inpatient deaths and 21(17%) readmissions within 30 days.

Discussion
FRAILsafe revealed gaps in system assessment and intervention e.g Only 29% of patients assessed to have reduced mobility had documented mobility plan at 24hrs. However, 9 patients subsequently found to have an AMT < 8 were not identified as confused at phase 1.

Conclusion
FRAILsafe is a sensitive tool for screening patients for frailty in acute care. It identifies gaps in frailty assessment and management whilst driving multidisciplinary team working. It is simple to use, pragmatic and identifies areas for service improvement.

References