

# Community-based interventions for people with frailty: an evidence bundle to inform commissioning

Authors: Sharon Wiener-Ogilvie, Sarah Harley, Nathan Devereux and Graham Ellis

## Background

A person with frailty can experience serious adverse consequences following even a relatively minor illness. If frailty is identified at an early stage and individuals are offered evidence-based interventions that can effectively manage frailty, or reverse it, this can improve people's quality of life and wellbeing<sup>1,2</sup>. This reduces the likelihood that they will need to access unplanned services due to a crisis, which, in turn, reduces the use of expensive, unscheduled care.

The ihub is currently working with health and social care partnerships (HSCPs) in Scotland to improve the identification (through the eFrailty Index) and care of people with frailty by maximising the impact of community services.

The Evidence and Evaluation for Improvement Team (EEViT), based in the ihub, works with ihub teams in the design and delivery of improvement programmes so that they are informed by the best available evidence. The team encourages the use of evidence in informing improvement work.

## Purpose

We wanted to provide evidence to health and social care organisations to inform decisions about which interventions would be used to support people with frailty in their local areas.

Our aim was therefore to create an 'evidence bundle' on community-based interventions for frailty which summarises the best available evidence supporting their use for improved outcomes.

## What we did

Together with the clinical lead, EEViT conducted a rapid evidence review, focusing on community-based interventions for frailty.

An initial search of secondary evidence (systematic reviews, meta-analysis and literature reviews) was undertaken by an information scientist. After discarding duplications and obviously irrelevant results, results were reviewed and interventions grouped thematically amongst the reviewing team which included a health service researcher and a clinical lead.

Papers relating to acute frailty interventions (those that take place in hospital) were discarded. Health service researchers reviewed these remaining papers and requested additional searches where necessary.

Final selection of interventions was guided by the evidence available and relevance as determined by the clinical lead.

Evidence summaries were produced for the following interventions:

- exercise interventions and physical activity
- polypharmacy review
- immunisation
- primary care interventions
- community geriatric services
- lifestyle factors – physical activity diet, obesity, smoking alcohol and their relation to frailty
- nutritional interventions for the prevention and treatment of frailty
- hospital at home – admission prevention and early discharge
- reablement (including rehabilitation)
- bed-based intermediate care, and
- anticipatory care planning.

The resulting evidence bundle summarises the key features of each intervention and the benefits that could be expected in relation to improved outcomes for people with frailty<sup>3</sup>. For each intervention, a detailed evidence summary describes the components of each intervention, outlines the rationale for its use, and summarises reported benefits and findings from secondary evidence.

We also created visual abstracts for each intervention, which allow readers to compare the different interventions at a glance, and provided links to the more detailed evidence summaries and further reading (see Figure 1).

The visual abstracts include:

- a description of the intervention
- information on the potential benefits of each intervention
- rating for the quality of the evidence
- rating for costs (based on expert opinion in the absence of information from the literature), and
- frailty level the intervention is suitable for.

Evidence in relation to each intervention was linked to research papers supporting the evidence.

The evidence summaries together with the visual abstracts form the complete evidence bundle.

## Feedback

We are continuing to gather feedback on the impact of our evidence frailty bundle.

An example of the way it helped an HSCP comes from Kenneth O'Brien, a Service Manager for Aberdeen City Health and Social Care Partnership. Keith has a leading role in improving earlier identification and support of people with frailty. It illustrates the value of the bundle in gaining support for improvement work:

*"The collated summary...has proven immensely useful. Firstly, it's actually helped my colleagues and I get an overview of what the evidence genuinely says.*

*Secondly, it's also proven invaluable in supporting us bringing on board colleagues and partners to work with us on this project.*

*Trying to do such a review locally would have been exceptionally challenging."*

## How was the evidence bundle disseminated?

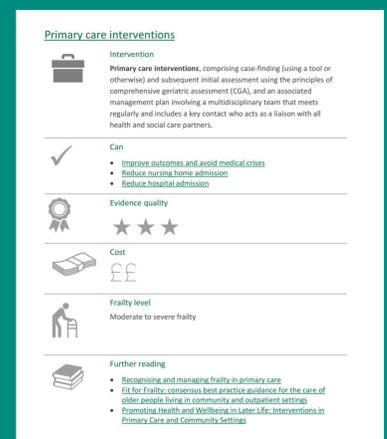


Figure 1: Evidence bundle

- The evidence bundle was published on the ihub website and viewed more than **400** times between August and November 2018.
- The use of the bundle was promoted by the ihub's Living Well in the Community team using Webex, newsletters, twitter and the online platform for the ihub's frailty programme.

## Conclusions

- The evidence bundle achieved its aim of enabling HSCPs to understand complex and plentiful evidence on the interventions that can support people with frailty.
- This facilitated the HSCPs to identify the services and models of care in their own communities that would be used to support people who are identified through the eFrailty Index.

## References:

1. Healthcare Improvement Scotland (2017). *Frailty screening and assessment tools comparator*. Available from: <https://ihub.scot/media/1742/frailty-screening-and-assessment-tools-comparator.pdf> [Accessed 21 February 2019]
2. Healthcare Improvement Scotland (2018). *Living Well in Communities with Frailty: Evidence for what works*. Available from: [https://ihub.scot/media/4742/lwic-frailty\\_evidence-for-what-works\\_jul18.pdf](https://ihub.scot/media/4742/lwic-frailty_evidence-for-what-works_jul18.pdf) [Accessed 21 February 2019]
3. Healthcare Improvement Scotland (2018). *Palliative care identification tools comparator*. Available from: <https://ihub.scot/media/2079/palliative-care-identification-tools-comparator.pdf> [Accessed 21 February 2019]