FRAIL SCALE RISK ASSESSMENT

	QUESTION	SCORING	RESULT
F	**FATIGUE** How much of the time during the past 4 weeks did you feel tired? A = All or most of the time B = Some, a little or none of the time	A = 1 B = 0	
R	**RESISTANCE** In the last 4 weeks by yourself and not using aids, do you have any difficulty walking up 10 steps without resting?	Yes = 1 No = 0	
A	**AMBULATION** In the last 4 weeks by yourself and not using aids, do you have any difficulty walking 300 metres OR one block?	Yes = 1 No = 0	
I	**ILLNESS** Did your Doctor ever tell you that you have? ☐ Hypertension ☐ Diabetes ☐ Cancer (not a minor skin cancer) ☐ Chronic lung disease ☐ Heart attack ☐ Congestive heart failure ☐ Angina ☐ Asthma ☐ Arthritis ☐ Kidney disease	0 - 4 answers ✔ = 0 5 - 11 answers ✔ = 1	
L	**LOSS OF WEIGHT** Have you lost more than 5kg or 5% of your body weight in the past year?	Yes = 1 No = 0	
		TOTAL SCORE	

SCORING: ROBUST = 0 PRE-FRAIL = 1-2 FRAIL = >3

SYDNEY NORTH Health Network

CONTACT DETAILS

Contact us, if you would like to know more or be part of the Initiative

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www.snhn.org.au/programs/frailty

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Information for Clinicians

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Healthy Ageing & FRAILTY

The Northern Sydney Frailty Initiative SNHN and NSLHD

WHAT IS FRAILTY?

Frailty is a common syndrome that occurs from a combination of deconditioning and acute illness on a background of existing functional decline that is often under recognised.

Frailty can affect up to 25% people aged 70 and over, this equates to approximately 26,000 people residing in Northern Sydney.

Patients living with frailty have two to three times the health care utilisation of their non-frail counterparts and experience higher morbidity, mortality and lower quality of life. Their carers can also experience high levels of stress.

Many causes of frailty can be managed and, in some cases reversed, highlighting the importance of identifying older people who are living with frailty.

You may find the following risk screen "The FRAIL Scale" and management suggestions useful to identify and treat patients aged 75+ and over.

FRAILTY MANAGEMENT/ DECISION TOOL

	Assessment Score	Intervention	Referral/Follow up
	FRAIL scale 0 = robust	• Encourage ongoing activity levels • Provide Staying Active and on your feet and Eating Well resource	• Re-do FRAIL scale in 12 months • Community exercise with balance/resistance component. Try NSLHD Stepping On and Healthy Lifestyle classes. • Example of exercises in Staying Active and On Your Feet booklet and NSW exercise venues: ww.activeandhealthy.nsw.gov.au
	FRAIL scale	**If Frailty Score is positive, address underlying causes as suggested below**	
F	**Feeling fatigued most or all of the time**	• Consider screening for reversible causes of fatigue (sleep apnoea, depression, anaemia, hypotension, hypothyroidism, B12 deficiency) • Use EPWORTH scale, K10 or Geriatric Depression scale in Health Assessment	• Consider referral to Geriatrician /Specialist for complex care patients • Consider referral to Occupational Therapy for functional and home review • Consider referral Psychologist using Mental Health Care Plan • Consider referral to Aged Care organisation for loneliness support (isolation can be a cause of fatigue!)
R	**Resistance against gravity - Difficulty walking up 10 steps without resting**	• Consider referring to an individualised progressive exercise program with resistance and strength component	• Physiotherapy or Exercise Physiologist for exercise prescription • If has diabetes-> group session Medicare funded ex. physiologist • Healthy Lifestyle for group exercise prescription and/or Stepping On • Get Healthy for free telephone-based health coaching • NSHNS Safe and Steady program
A	**Ambulation- Difficulty walking 300 metres unaided**	• Consider referring to an Individualised progressive exercise program with resistance and strength component	• Physiotherapy or Exercise Physiologist for exercise prescription • Healthy Lifestyle for group exercise prescription and/or Stepping On • Get Healthy for free telephone-based health coaching • Exercise options https://www.activeandhealthy.nsw.gov.au
I	**Having 5 or more Illnesses**	• Review indication, side effects and use of medication (evidence for use of some medicines changes after 75!) • Consider discussing with pharmacist • Consider reducing/de-prescribing superfluous medication	• Pharmacist for comprehensive medication review, (HMR item 900) • Occupational Therapy for functional and home safety review • Self-management support from aged care org volunteer
L	**Loss of > 5% weight in 12 months**	• Consider screening for reversible causes of weight loss and consider • Protein and caloric supplementation/food fortification (75mg protein per day required- range of products available at pharmacy) • Advice and encourage healthy eating; provide "Eating Well" resource	• Weigh and assess BMI – record in patient record • Dietician for diet review and management • Add Sustagen • Meal Delivery Services • Speech pathologist for swallowing review • Dentist for dental review (pain/infection/ill fitting dentures) • Occupational Therapy for functional and home cooking ability review