

FRAIL SCALE RISK ASSESSMENT

	QUESTION	SCORING	RESULT
F	Fatigue How much of the time during the past four 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 four weeks by yourself and not using aids, have you had any difficulty walking up 10 steps without resting?	Yes = 1 No = 0	
A	Ambulation In the last four weeks by yourself and not using aids, have you had any difficulty walking 300m OR one block?	Yes = 1 No = 0	
I	Illnesses Has your doctor ever told you that you have: <ul style="list-style-type: none"> <input type="checkbox"/> Hypertension? <input type="checkbox"/> Diabetes? <input type="checkbox"/> Cancer (not a minor skin cancer)? <input type="checkbox"/> Chronic lung disease? <input type="checkbox"/> Heart attack? <input type="checkbox"/> Congestive heart failure? <input type="checkbox"/> Angina? <input type="checkbox"/> Asthma? <input type="checkbox"/> Arthritis? <input type="checkbox"/> Kidney disease? 	0-4 ticked = 0 5-11 ticked = 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: 0=ROBUST 1-2= PRE-FRAIL >3=FRAIL			

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Healthy ageing and frailty

INFORMATION FOR CLINICIANS

An initiative of The Hunter New England and
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FRAILTY MANAGEMENT/DECISION TOOL

ASSESSMENT SCORE	INTERVENTION	REFERRAL/ FOLLOW UP
FRAIL scale 0 = robust	<ul style="list-style-type: none"> - Encourage ongoing activity levels - Provide Staying Active and On Your Feet and Eating Well resources 	<ul style="list-style-type: none"> - Re-do FRAIL scale in 12 months - Community exercise with balance/resistance component. - Try Stepping On and Healthy Lifestyle classes. - Example of exercises in Staying Active and On Your Feet booklet and NSW exercise venues: www.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	<ul style="list-style-type: none"> - 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 	<ul style="list-style-type: none"> - Consider referral to Geriatrician /Specialist for complex care patients - Consider referral to Occupational Therapy for functional and home review - Consider referral to 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	<ul style="list-style-type: none"> - Consider referring to an individualised progressive exercise program with resistance and strength component 	<ul style="list-style-type: none"> - Consider referral to Physiotherapist or Exercise Physiologist for exercise prescription - If diabetic -> group session Medicare funded ex. physiologist - Consider referral to Living Longer Living Stronger for group exercise prescription and/or Stepping On - Consider referral to “Get Healthy” for free telephone-based health coaching
A Ambulation– Difficulty walking 300 metres unaided	<ul style="list-style-type: none"> - Consider referring to an individualised progressive exercise program with resistance and strength component 	<ul style="list-style-type: none"> - Consider referral to Physiotherapy or Exercise Physiologist for exercise prescription - Consider referral to Living Longer Living Stronger for group exercise prescription and/or Stepping On - Consider referral to “Get Healthy” for free telephone-based health coaching - Explore exercise options at https://www.activeandhealthy.nsw.gov.au
I Having 5 or more illnesses	<ul style="list-style-type: none"> - Review indication, side effects and use of medication (evidence for use of some medicines changes after 75!) - Consider discussing with pharmacist or geriatrician - Consider reducing/de-prescribing superfluous medication 	<ul style="list-style-type: none"> - Consider referral to Pharmacist for comprehensive medication review, (HMR item 900) - Consider referral to Occupational Therapist for functional and home safety review - Explore self-management support from aged care org volunteer - Consider referral to geriatrician to review poly pharmacy
L Loss of > 5% weight in 12 months	<ul style="list-style-type: none"> - 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 	<ul style="list-style-type: none"> - Weigh and assess BMI – record in patient record - Consider referral to Dietician for diet review and management - Consider adding Sustagen - Explore meal delivery services - Consider referral to Speech Pathologist for swallowing review - Consider referral to dentist for dental review (pain infection/ill fitting dentures) - Consider referral to Occupational Therapist for functional and home cooking ability review

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. 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 FRAIL Scale” and management suggestions useful to identify and treat patients aged 75+.