Comprehensive geriatric assessment for frail older people in acute hospitals: the HoW-CGA mixed-methods study

Simon Paul Conroy,1* Martin Bardsley,2 Paul Smith,2 Jenny Neuburger,2 Eilís Keeble,2 Sandeepa Arora,2 Joshua Kraindler,2 Cono Ariti,2 Chris Sherlaw-Johnson,2 Andrew Street,3 Helen Roberts,4 Sheila Kennedy,5 Graham Martin,6 Kay Phelps,6 Emma Regen,6 David Kocman,6 Patricia McCue,7 Elizabeth Fisher2 and Stuart Parker7

1Leicester Royal Infirmary, University Hospitals of Leicester NHS Trust, Leicester, UK
2Nuffield Trust, London, UK
3Department of Health Policy, London School of Economics and Political Science, London, UK
4Academic Geriatric Medicine, University of Southampton, Southampton General Hospital, Southampton, UK
5School of Health and Related Research (ScHARR), University of Sheffield, Sheffield, UK
6Department of Health Sciences, College of Life Sciences, University of Leicester, Leicester, UK
7Institute of Health & Society, Newcastle University, Newcastle upon Tyne, UK

*Corresponding author spc3@le.ac.uk

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Disclaimer: This report contains transcripts of interviews conducted in the course of the research and contains language that may offend some readers.

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Plain English summary

Older people in acute hospitals are at high risk of poor outcomes. Although holistic care can improve these outcomes, it is not routinely available across whole hospitals. Even within dedicated older people’s services, the provision of holistic care is variable and patchy.

Most older people will come in to contact with acute hospitals services over a 4-year period, especially those living in areas of deprivation. Routine hospital data can be used to identify older people in acute hospitals at particular risk of harm; for example, older people with features of frailty are at a 70% higher risk of dying, are 600% more likely to have prolonged hospital stays and are 50% more likely to be readmitted within 30 days of discharge than older people without features of frailty.

A clinical toolkit designed to help non-geriatric teams improve the care that they offer to frail older people was well received and thought to be useful. However, it did not achieve its stated aims of improving care, in part owing to competing priorities within cancer and surgical services, as well as the need for extended support to embed the intervention and support from specialist geriatricians.

Outcomes from this project include a tool to allow frailty to be identified across the whole country using routine hospital data, easy-to-use spreadsheets that can inform hospitals and local authorities about the nature of frailty in the populations for whom they care and a toolkit that is ready for further testing within specialist services.
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This report

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