

A QI project of frailty assessment in patients with COPD to enable care planning

Anjali Patel¹, Reshma Rasheed¹
Abstract ID: 353



Aim

Patients with COPD have increased incidence of frailty due to their respiratory compromise. A QI project to undertake frailty reviews using the Comprehensive Geriatric Assessment (CGA) toolkit to enable proactive community care planning in primary care was undertaken.

Conclusion

The CGA framework is a holistic assessment appropriate for frail patients with multiple co-morbidity including COPD and enabled proactive care planning encompassing both physical, social and psychological needs. During the covid pandemic proactive health and social care planning contributed to improved patient safety and helped reduce unplanned hospital admissions.

Method

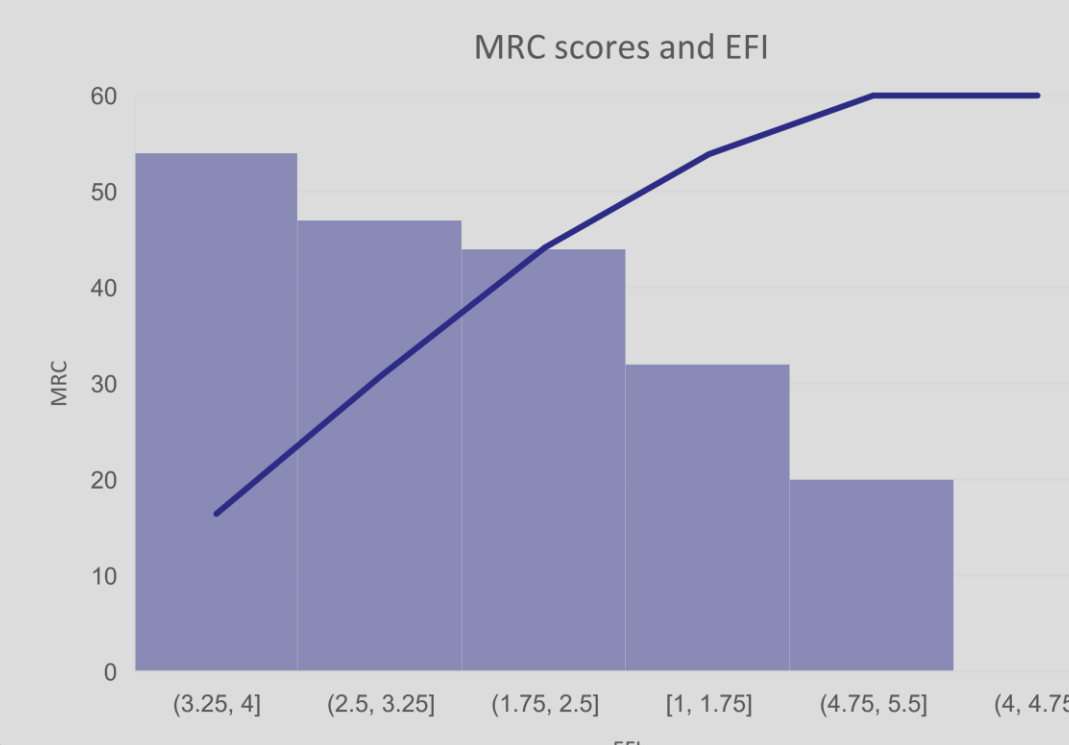
198 patients on the COPD register were offered a CGA across three sites in order to assess their health and social care needs over a period of 12 months. Doing a CGA enabled proactive future care planning and were escalated to the health and social care MDT. The CGA enabled identification of physical functional social and environmental needs and in addition psychological assessment to identify anxiety and depression and undertake structured medication reviews.



Results

We found of the 198 patients there was a correlation between the MRC scores and Electronic frailty indices a correlation coefficient of $r= 0.7686$ a p value of 0.05. In addition, the EFI and MRC scores showed a correlation with depression PHQ9 ($r= 0.5808$) and Anxiety GAD ($r=0.5016$).

Analysis



A positive correlation exists between rising EFI and MRC scores The exponential relationship plateaus when the EFI reaches 4

