

### Understanding frailty

'Frailty' is a term that's used a lot, but is often misunderstood. When used properly, it refers to a person's mental and physical resilience, or their ability to bounce back and recover from events like illness and injury.<sup>1</sup>



### Older population

In Gloucestershire in 2021 the percentage of the total **resident population who are aged 65 years or over** was **21.8%**, higher than England (18.5%).<sup>2</sup>

**3% were aged 85 years or over**, higher than England (2.5%)<sup>3</sup>

Research suggests that around **10% of people aged over 65 may have some degree of frailty**, rising to between a quarter and half of those aged 85 years.<sup>4</sup>



“Frailty is not inevitable as you age. There are things that can be done to prevent it developing in the first place, slow its progression and reduce its impact on a person's life. These three elements are the focus of One Glos ICS frailty strategy and work plan over the next few years.”  
- Dr Alan Gwyn

### Life expectancy

In Gloucestershire, between 2018-20 **life expectancy at birth<sup>5</sup>** was significantly better than England:



**80.2 years for males**  
(79.4 in England)



**83.9 years for females**  
(83.1 in England)

**Healthy life expectancy<sup>6</sup>** in Gloucestershire was also significantly better than England:



**67.4 years for males**  
(63.1 in England)

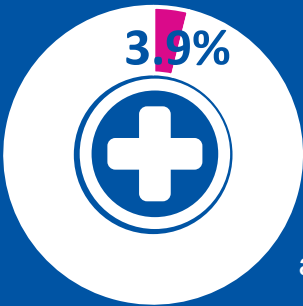


**66.4 years for females**  
(63.9 in England)

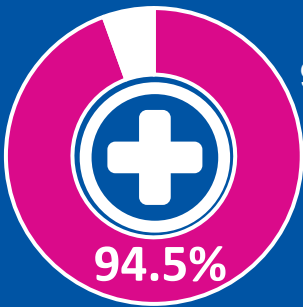
Gloucester district has the lowest life expectancy at birth for males (78.1) and females (82.6) compared to the other districts in Gloucestershire.<sup>7</sup>

## Independent living and Care homes

In Gloucestershire in 2021/22:



**3.9% of people aged 65+ were offered reablement services following discharge from hospital**  
which is better than the South West (3.3%) and significantly better than England (2.8%) <sup>8</sup>



**94.5% of people aged 65+ were still at home 91 days after discharge from hospital into reablement services**  
which is better than the South West (79.2%) and significantly better than England (81.8%) <sup>9</sup>

**418**  
per 100,000  
aged 65+

**permanent admissions to residential and nursing care homes**  
which is comparable to the South West (439 per 100,000) and England (539 per 100,000) <sup>10</sup>

## Carers

Carers have a crucial role in supporting frail older people and they can often be frail themselves. Below is information from the Adult Social Care Outcome Framework ([ASCOF](#)) in 2021/22<sup>10a</sup>:

Indicator	ASCOF score	
	Gloucestershire	England
Social care related quality of life age 65+	18.8	18.5
Carer related quality of life age 65+	7.2	7.5
Proportion of carers who reported they have as much social contact as they would like 65+	22.6	28.8

## Falls and fractures

In 2021/22 in Gloucestershire, for every 100,000 residents there were:

**1,665 emergency hospital admissions due to falls in people aged 65+**<sup>11</sup>  
which was significantly better than 2,100 in England



**4,267 emergency hospital admissions due to falls in people aged 80+**<sup>12</sup>  
which was significantly better than 5,311 in England



**573 emergency hospital admissions due to hip fractures**<sup>13</sup>  
in people aged 65+ which was comparable to 551 in England

## Dementia

In 2020 in Gloucestershire:



**4.1% of people aged 65+ were diagnosed with dementia**<sup>14</sup>  
which was comparable to 3.97% in England

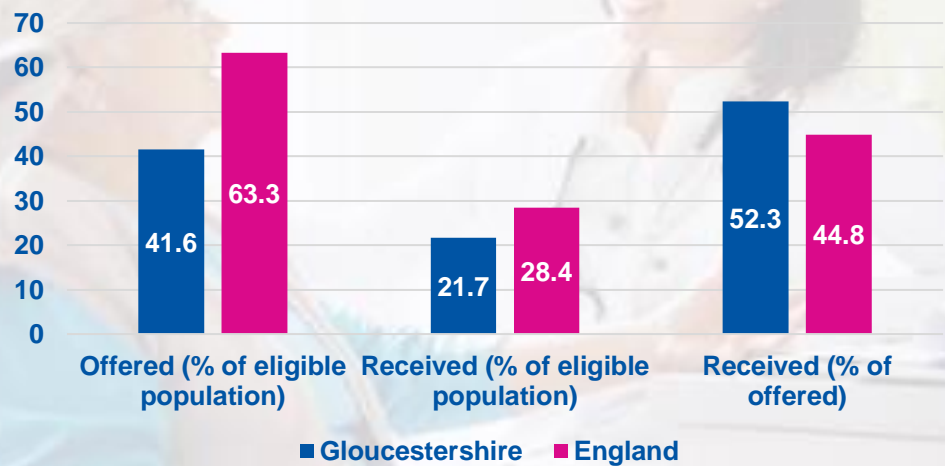
**2.8% of all those with dementia are under 65**<sup>15</sup>  
which was lower than England 3.5% and South West 2.7%

## Osteoporosis

**1% of people aged 50+ in Gloucestershire had Osteoporosis**  
compared to 0.8% in England and 1.2% in South West in 2021/22<sup>16</sup>



**NHS Health Checks**  
In Gloucestershire 2017/18 - 2021/22<sup>17</sup>:

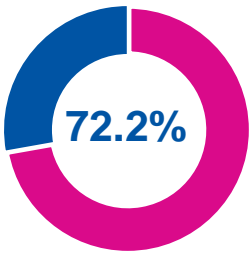


**Physical activity**

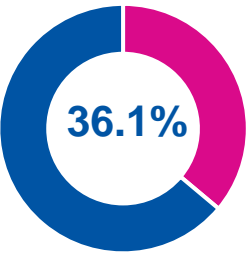
The benefits of physical activity for older adults is well evidenced, with multiple health benefits including promoting general health, cognitive function, lower risk of falls and reduced likelihood of some long-term conditions and diseases. For more information on physical activity in Gloucestershire visit the [JSNA](#) here.



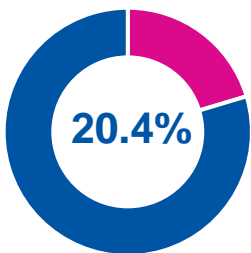
**Social factors**  
In Gloucestershire in 2021/22:



of Adult Social Care Service Users aged over 65 **have control over their daily lives** (similar to England 73.3%)<sup>18</sup>



of Adult Social Care Service Users aged over 65 have **as much social contact as they would like** (similar to England 37.3%)<sup>18</sup>








of adults in 2019/20 **felt lonely** often / always or some of the time (significantly better than England 22.3%)<sup>18</sup>

In 2019, **Income deprivation affecting older people** Index (IDAOPI) was **9.8%** for Gloucestershire, significantly less than England (14.2%). IDAOPI was highest in the district of Gloucester at 13.2% when compared to the other districts in Gloucestershire.<sup>19</sup>

In 2020, **Fuel poverty** in Gloucestershire was **10.8%** which was lower than 13.2% in England. Fuel poverty was highest in the district of Forest of Dean at 12.5% when compared to other districts in Gloucestershire.<sup>20</sup>

# What are we doing locally?

-  Developing a frailty pathway that will reduce variation, improve quality of care, support integrated working and deliver positive outcomes for the individual and their carers.
-  Carrying out a baseline assessment of services available in Gloucestershire such as volunteer driving, lunch clubs, Men's Sheds, Faith Groups and befriending services.
-  Developing a Training and Education strategy for staff.
-  Promoting personalised care using the Gloucestershire 'Personalisation into Practice' approach, asking people what matters to them, upskilling citizens and colleagues.
-  Promoting the use of personal health budgets to support individuals with self-management and recovering in their own homes.

## Key evidence

- [Multimorbidity: clinical assessment and management: NICE](#)
- [Older people with social care needs and multiple long-term conditions: NICE](#)
- [Fit for Frailty model: British Geriatric Society](#)

# Areas of Best Practice

The British Geriatric Society suggest there is evidence that in individuals with frailty, a person-centred, goal-orientated comprehensive approach reduces poor outcomes and may reduce hospital admission. Any interaction between an older person and a health or social care professional should include an assessment which helps to identify if the individual has frailty.

Gloucestershire Integrated Care System (ICS), working together with its partners and stakeholders, adopted a Frailty Strategy 2022-2027 which aims to prevent, identify and manage frailty, as well as developing its workforce. At its core is a transition from a reactive to a proactive model of support that is delivered in people's homes or community locations. It will prevent, halt, slow or reduce the impact of frailty, promoting healthy lifestyles that build resilience and help to anticipate and plan for change.

