

THE BRIEF FRAILTY ASSESSMENT (BFA)

WHAT NOW?



1. Self Rated Health

- Approach the remaining questions with an increased index of suspicion in looking for modifiable factors that could produce a more favourable response to this question in the future



2. Recent Hospitalization

- Proceed with a heightened awareness for impacts on these areas in particular: mobility, nutrition, continence, polypharmacy.
- Specific interventions will be considered as each area is assessed in the BFA.



3. Social Supports

- What supports are available to them?
- Are there friends/family who could be approached about creating a support network?
- Are there community organizations that could be consulted to provide supports or act as a resource in an emergency?
- Who could be enlisted to assist in creating an emergency plan? - Friends/family? Social work? Home Care Case coordinator?
- Consider discussing an emergency call bell system such as Lifeline
- Facilitate connection to social programs - Seniors Resource finders, Seniors Centres, A&O, Adult Day Program



4. ADL's

- discuss the level of difficulty and the person's goals.
- assessment and intervention by OT/PT - private, CTS, Day Hospital, My Health Teams,
- accept a person's right to be independent. Some people would prefer to do things slowly and independently rather than have outside help, and this can be a very reasonable choice.
- if they do need more help, discuss available resources - family/friends, private or public home care, Care Possible



5: IADL's

- Are there friends/family who could be approached to assist where there are needs?
- Depending on the needs, consider community resources such as grocery delivery, meal delivery, private housekeeping, Transportation Options Network for Seniors, Home Maintenance Program, bubble packing of pills, home care(public or private), automatic bill payments, Support Services to Seniors website contains many resources for these issues
- Referral to a home assessment service or program could be considered such as Healthy Aging Resource Teams or GPAT/GMHT
- Referral to a system navigator like Seniors Resource Finders or 211 Manitoba to find services for specific needs
- If more supportive environment considered, see A&O Housing directory or Long Term and Continuing Care Association for information about Assisted Living etc.



6. Cognition

- if there are changes in cognition that are not associated with a known diagnosis, a medical workup should be done to rule out other causes of changes to cognition
- a more thorough cognitive assessment may be required - Consider: OT through My Health Teams, Geriatric Outreach teams, day hospital/geriatric clinic for geriatrician assessment, geriatric psychiatry, Neurology/Psychiatry - Corydon Neurology Associates & Crescentwood Memory Clinic (<65 years old)
- if there is a positive screen, keep this in mind for the rest of the assessment as this may impact other decisions and care planning such as medication management
- If the person has adequate supports or if they have a known dementia diagnosis, the primary care plan may be continued monitoring for supports and safety
- remember that for a person with a dementia, repeated cognitive screens are often less valuable than collateral information and assessments of function and how the cognitive changes are affecting daily life
- consider supports for the client and support people through community organizations such as the Alzheimer's Society of Manitoba First Link program, home care, day programs, A&O Caregiver supports
- consider transportation issues - are they driving? Should there be intervention or assessment? Drive able



7. Visual Impairment

- eye and vision assessment should be facilitated
- referral to specialists as required
- connection to community programs such as CNIB
- OT assessment
- Vision loss resources on Misericordia Eye Care website



8: Hearing Impairment

- referral to services and supports - audiologist, hearing centres that provide services such as Hearing tests, Custom hearing protection and hearing aid products, Assistive listening devices, including products for your phone and TV, Canadian Hard of Hearing Association

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9: Urinary Incontinence

- medication review
- physical assessment to determine causes
- interventions may include pelvic floor muscle exercises (could refer to physio for this), medication, vaginal pessaries, penile clamp, lifestyle changes



11. Mobility

- gait aids, environmental assessment - referral to OT/PT private services/CTS
- multidisciplinary assessment and intervention - GPAT, Day Hospitals
- falls prevention programs - Day Hospital/ A&O Safety Aid program
- community exercise programs - Reh Fit, Wellness Centre, Seniors Centres, YM-YWCA, Leisure Guide, Seniors Resource Finders, Manitoba 211
- medical/medication review for contributing factors (cardiovascular, diabetes, medications)



12. Depression

- referral to services for counselling
- My Health Teams Brief Treatment counselling where available
- Shared Care
- CMHA Navigator for resources
- A&O counselling, Mood Disorders Association of Manitoba for support groups and education
- Treatment with medications - refer to RACE Psychiatry with questions about management
- CBTM (Cognitive Behavioural Therapy with Mindfulness) in person or virtual classes
- Seniors Resource Finders or Manitoba 211 for connection to community based enrichment opportunities
- **Crisis Services:** - Clinic Crisis lines - Crisis Response Centre



14. Financial

- referral to social work or other financial services and supports - My Health Teams
- refer to services specific to areas where financial needs are not met - Seniors Resource Finders or Manitoba 211
- Community Financial Counselling Services provides in depth financial assessments and a complete review of the options available, information and education about finances and managing your money, assistance with tax preparation and benefits, budgeting, debt management, education



10. Nutrition

- medical exam to rule out medical causes
- referral to dentist/denturist services
- low income/options include Deer Lodge Dental Centre - Home Dental Care program - U of M College of dentistry
- meal prep and grocery access options - meal programs, meals on wheels, grocery delivery, food banks - See the Support Services to Seniors website for listings or Food Matters Community Area Facilitators, Home Care
- Dial a Dietitian 204-788-8248 for people who have questions about nutrition
- Private dietitian services can be found here: (insurance) <https://www.collegeofdietitiansmb.ca/find-a-dietitian/private-practice/>
- Self referral to dietitian (no insurance) <https://wrha.mb.ca/nutrition/dietitian/>
- Referral to Seniors Resource Finders or Manitoba 211 for navigation



13. Medications

- Discussion with community pharmacist
- Medications should be reviewed yearly with an eye to de-prescribing
- Set goals for treatment - allow for adjustments to be made and medications to be discontinued if required
- Adverse Drug Events can appear non-specific and be passed off as other geriatric syndromes
- May precipitate confusion, falls or incontinence
- Medications that someone has taken for a long time, can cause problems as the person's body changes
- Consult RACE geriatrics for advice about medication management
- Geriatric Day Hospital Clinic for polypharmacy



15. POA/HCP

- refer to a lawyer to establish these documents
- if finances are an obstacle, A&O may be able to offer assistance for POA
- Legal Help Centre
- ERIK kit can be provided which includes health care directive
- Advance Care Planning Canada website for resources and education
- Information can be found at this site: gov.mb.ca/seniors/safety.html



16. Substance Abuse

- discuss concerns with the individual, provide education
- monitor
- referral to appropriate resources - AFM
- Rapid Access to Addictions Medicine (RAAM) clinic
- Manitoba Addictions Helplines 1-855-662-6605



REMEMBER

- Include the person and their support people in the planning
- there is no one size fits all approach
- one symptom often has multiple contributing factors
- ask the questions and plan around the answers