## Conference Abstract:

Mulla E, Orton E, Kendrick D. GP views on the routine identification of older people living with frailty in primary care. British Journal of General Practice 2020; 70 (Supplement 1): bjgp20X711437 <a href="https://doi.org/10.3399/bjgp20X711437">https://doi.org/10.3399/bjgp20X711437</a>

## Abstract

Background: To meet the challenges of an ageing population, the updated 2017/18 NHS GP contract requires primary care providers to use evidence-based frailty identification tools to risk-stratify all patients aged >65 years. Those patients flagged as moderately or severely frail should be clinically reviewed and if severe frailty is confirmed, providers have been asked to consider offering relevant interventions, with the overall aim of enabling these patients to live well for longer. However, there is limited knowledge about how this frailty contractual requirement is being operationalised in primary care.

Aim: To improve understanding of the barriers and facilitators GPs encounter when routinely identifying, risk-stratifying and providing interventions for people living with frailty in primary care.

Method: This was a two-part study: an initial survey via online questionnaire, with participants selected by maximum variation sampling to be followed up with a semi-structured telephone interview. All GPs working in the East Midlands region (Derbyshire, Leicestershire, Lincolnshire, Nottinghamshire, and Northamptonshire) were eligible to take part. The online questionnaire was analysed using descriptive statistics. Interview transcripts were analysed using framework analysis to identify key themes.

Results: In total, 188 GPs responded to the survey. Eighteen GPs were interviewed. Four themes were identified: 1) beliefs about stratification and pro-active identification of frailty; 2) frailty stratification tools; 3) managing complexity, resources and models of care; and 4) drivers of GP behaviour.

Conclusion: The study findings will inform the further development of NHS England policy on the frailty contractual requirement for primary care providers.