Frail Scale Risk Assessment

	Question	Scoring	Result
F	**Fatigue** How much of the time during the past four weeks did you feel tired? A = All or most of the time B = Some, a little or none of the time	A = 1 B = 0	
R	**Resistance** In the last four weeks by yourself and not using aids, do you have any difficulty walking up 10 steps without resting?	Yes = 1 No = 0	
A	**Ambulation** In the last four weeks by yourself and not using aids, do you have any difficulty walking 300 metres OR one block?	Yes = 1 No = 0	
I	**Illness** Did your Doctor ever tell you that you have: ☐ Hypertension ☐ Diabetes ☐ Cancer (not a minor skin cancer) ☐ Chronic lung disease ☐ Heart attack ☐ Congestive heart failure ☐ Angina ☐ Asthma ☐ Arthritis ☐ Kidney disease	☑ 0-4 answers = 0 ☑ 5-11 answers = 1	
L	**Loss of weight** Have you lost more than 5kg of 5 per cent of your body weight in the past year?	Yes = 1 No = 0	
		Total score	

Scoring: Robust = 0 Pre-frail = 1-2 Frail = >3

Frailty management/decision support tool

	Assessment Score	Intervention	Referral/follow up
	FRAIL scale 0= robust	Encourage ongoing activity levels. Provide physical activity and nutrition resources	Re-do FRAIL Scale in 12 months Community exercise with balance/resistance component. Provide physical activity and nutrition resources.
	FRAIL scale 1-2 = Pre-frail >3 = Friail	If FRAIL Score is positive, address underlying causes as suggested below	
F	**Feeling fatigued most or all of the time**	• Consider screening for reversible causes of fatigue (sleep apnoea, depression, anaemia, hypotension, hypothyroidism, B12 deficiency). • Use EPWORTH scale, K10 or Geriatric Depression Scale in Health Assessment.	• Consider referral to Geriatrician / Specialist for complex care patients • Consider referral to OT for functional and home review • Consider referral to Psychologist using Mental Health Care Plan • Consider referral to Aged Care organisation for loneliness support (isolation can be a cause of fatigue).
R	**Resistance against gravity - difficulty walking up 10 steps without resting**	• Consider referring to an individualised progressive exercise program with resistance and strength component.	• Physiotherapist or exercise physiologist for exercise prescription. • For diabetes –group session Medicare funded exercise physiologist Community exercise with balance/resistance component. Telephone-based health coaching.
A	**Ambulation - difficulty walking 300 metres unaided**	• Review indication, side effects and use of medication (evidence for use of some medicines change after 75). Consider discussing with pharmacist. • Consider reducing/de- prescribing superfluous medication.	
I	**Having 5 or more illnesses**	• Review indication, side effects and use of medication (evidence for use of some medicines change after 75). Consider discussing with pharmacist. • Consider reducing/de- prescribing superfluous medication.	• Pharmacist for comprehensive medication review (HMR item 900). • OT for functional and home safety review. • Self-management support from aged care organisation volunteer.
L	**Loss of > 5 per cent weight in 12 months**	• Consider screening for reversible causes of weight loss • Consider protein and caloric supplementation/food fortification (75g protein per day required –range of products available at pharmacy). • Advice and encourage healthy eating; provide nutrition resources.	• Weight and assess BMI – record in patient record • Dietitian for diet review and management • Meal Delivery Services • Speech Pathologist for swallowing review • Dentist for dental review (pain/infection/ill-fitting dentures) • OT for functional and home cooking ability/review.