

SimpleAnalyzer™

Frailty Index Metrics

How frailty is calculated and predicted in SimpleLTC software

Using the SimpleLTC Frailty Index report

What is frailty?

[Frailty](#) is theoretically defined as a clinically recognizable state of increased vulnerability resulting from an aging-associated decline in reserve and function across multiple physiologic systems such that the ability to cope with everyday or acute stressors is compromised. Frailty is the global standard for clinical risk and a common language for describing a resident's condition in a nursing home setting.

The MDS is full of rich, data-driven insights that can empower you to better understand what is going on beneath the surface. Frailty helps us move beyond a list of data points to identify high-risk residents who are more likely to negatively impact other areas like quality metrics, readmission rates, and financial outcomes.

How does the SimpleLTC Frailty Index work?

The SimpleLTC Frailty Index provides a summary of morbidity risks in your facilities. Using machine learning, The Frailty Index aggregates MDS fields to calculate a resident frailty score of 0 to 100. A frailty score of 0 indicates a resident is likely to recover well. A score of 100 indicates a resident is extremely frail and may not recover at all. The score incorporates the resident's BIMS score, mood assessment, functional status, and the incidence of specific diseases.

How should I utilize the SimpleLTC Frailty Index report?

To get the most out of the Frailty Index in SimpleLTC, we recommend the following:

1. Identify residents at the highest risk on the frailty scale using the Frailty Index.
2. Identify specific deficits in each high-risk resident, and address through care planning and guidance to mitigate potentially negative outcomes and enhance quality of life.
3. Communicate with family members, care team, and/or hospice staff regarding the expectations, goals, and care plan.
4. Monitor changes in condition, identifying appropriate interventions or programs that could lessen decline or help recovery, and discuss during standup meetings.
5. Target interventions and allocate care resources to residents most at risk.
6. Evaluate the impact of submitting an IPA for PPS residents with increasing frailty.

Getting the most out of the Frailty Index

Regularly review resident frailty as a team

Every assessment could contribute to an increase in frailty and these changes should not go unnoticed. Do you know how many current residents are considered high-risk with a frailty score higher than the 90th percentile? These residents will likely require the most attention and intervention to recover well and any new residents in this category should be identified for all staff that contribute to their care.

You might find this tool useful in designing programs or appropriate interventions for residents. Those in the low-risk category will need different types of care than those in the high-risk category and this tool can give you insight into understanding how to best care for each resident.

Leverage frailty to trigger IPA review

As you monitor the condition of your residents, make sure you share these changes with the whole team. A resident with increasing frailty might have worsening mental or functional abilities or new comorbidities that increase risk. These inputs often overlap with the inputs used to determine financial reimbursement. Make sure these insights help paint the most comprehensive picture of a resident's condition during their stay.

Share this information in conversations with family or care partners

When properly understood, the frailty index can assist with setting meaningful goals and care plans. Incorporate the frailty index as a way to help family members understand the condition of their loved ones or in conversations with therapy or hospice partners that contribute to the care of the resident.

The frailty index is a common language for understanding each resident's condition internally but can also be an invaluable tool for communicating with other involved parties.