

All practices Surrey and Sussex LMCs

2nd October 2017

Dear Colleagues

Update: Frailty; Guidance on Batch -coding

NHS England has issued specific guidance, agreed with GPC, on batch-coding, which confirms earlier GPC guidance on the 2017/18 GP Contract Agreement around frailty, and the importance of clinical judgement in making a diagnosis.

A number of GP Electronic Patient Record Systems are configured to convert the eFi [electronic frailty index] result directly into a Read-coded diagnosis within the patient's electronic health record. Batch-coding cohorts of patients in this way effectively automates the process of clinical diagnosis, without clinical judgement, and I am sure all GP colleagues will be both pleased and relieved to know that this is not what NHS England wants to happen; NHS England therefore recommends against eFi batch-coding and says, "The diagnosis of frailty requires the judgement of a clinician, taking into account an individual's complete clinical procedure".

The original GPC/NHSE guidance on this element of the contract explains the expected process: NHS England does anticipate most practices will use the eFi as this is embedded in GP systems and is the best validated tool. This should be used for patents aged 65 years and older.

Once an eFi index outcome is available, GPs should supplement this opportunistically with their clinical knowledge of the patient, including other information available in the healthcare record. On this basis, patients will be diagnosed as having mild frailty [there is no requirement to code] or moderate or severe frailty, which should be coded. There is no requirement to use a call/recall or invitation system; it is anticipated that all, or nearly all, patients who are at significant risk of frailty will be seen frequently within the GP practice.

For patients identified as living with severe frailty, the practice should, when the patient is seen: -

- Offer an annual medication review
- Ask, if clinically appropriate, whether the patient has had a fall in the past twelve months, and take any appropriate action based on the response
- If the patient does not already have an enriched Summary Care Record, promote this by seeking informed patient consent Local Medical Committees for

Croydon, Kingston & Richmond, Surrey, East Sussex and West Sussex

The White House T: 01372 389270

18 Church Road F: 01372 389271

Leatherhead Surrey KT22 8BB

www.sslmcs.co.uk

Based on the coding above, NHS England will collect data on:

- The number of patients recorded (coded) as having a diagnosis of moderate frailty
- The number of patients recorded (coded) as having a diagnosis of severe frailty
- The number of patients coded as having severe frailty who have
 - o Had an annual medication review
 - o Had a fall in the preceding twelve months
 - o Consented to activate an enriched SCR

This data will not be used for benchmarking or performance management purposes.

This really is it: anyone with fond memories of the AUA DES should discuss these thoughts with their appraiser.

With best wishes

Yours sincerely

Dr Julius Parker Chief Executive