HQCA
Health Quality Council of Alberta

IDENTIFYING INFORMATION	
Name:	**Frailty and risk of health decline**
Short/Other Names:	Percentage of long term care residents showing signs of frailty and risk of decline in health

BACKGROUND, INTERPRETATION AND BENCHMARKS	
Description:	This measure reports information about the percentage of long term care (LTC) residents with frailty, health instability, and decline in health status using the Changes in Health, End-Stage Disease, Signs and Symptoms (CHESS) Scale. The CHESS Scale detects risk of frailty and health decline and is part of the Resident Assessment Instrument – Minimum Data Set 2.0 (RAI-MDS) assessment. Nine items are used: change in cognitive status, change in activities of daily living function, end-stage disease, edema, shortness of breath, vomiting, dehydrated, weight loss, and leaving food uneaten. [25]
	A summary score is determined, using specific codes (0 = no symptoms present; 1 = 1 symptom present; and, 2 = 2+ symptoms present), for each of the following symptoms: dehydration, edema, shortness of breath, vomiting, weight loss, and decline in food intake.
	To this summary score, 1 point is added to each to the following items to create an overall summary score: worsening of decision making over previous 90 days, decline in activities of daily living over previous 90 days, and end-stage disease.
	In the summary score a range of values exists, which is 0 to 5. 0 represents (no health stability) and 5 represents (very high health instability).
Rationale:	To provide information on the proportion of LTC residents with risk of frailty and health decline. This information can be used to inform system-level planning for quality improvement, program development, and resource allocation. This is because this data, when reported at an aggregate level, provides a description of the population that requires services in relation to risk of frailty and health decline. It does not describe the quality of care or services provided at a site.

[25] Hirdes, JP, Frijters, D, Teare, G. The MDS CHESS scale: a new measure to predict mortality in the institutionalized elderly. J Am Geriatr Soc. 2003;51(1):96-100.

Interpretation:	Each category in this chart illustrates the proportion of LTC residents with: ▪ Low risk of decline/stable (score of 0) ▪ Intermediate risk of decline/moderately stable (score of 1) ▪ High risk of decline/unstable (score of 2 or greater)
Target/Benchmark:	Benchmark is not appropriate because the measure is intended to describe the clinical characteristics of long term care residents.

INDICATOR CALCULATION

Calculation:	Percent of residents in each outcome scale category = $$\left(\frac{\text{Number of LTC residents scored within a given category}}{\text{Number of LTC residents with a valid outcome scale score}}\right) \times 100$$ **Type of Measure:** Percentage **Adjustment Applied:** None
Denominator:	The total number of LTC residents with a valid outcome scale score.
Numerator:	The total number of LTC residents with a valid outcome scale score, who were scored within a given category (as indicated above).

DATA DETAILS

Data Sources:	Alberta Continuing Care Information System (ACCIS), Alberta Health
Reporting Frequency:	**Type of Year:** Fiscal year [starts April 1, ends March 31] **First Available Year:** 2015/16 **Last Available Year:** 2019/20
Geographic Coverage:	The province of Alberta excluding the military, prisoners, and indigenous persons living on reserves.
Reporting Levels:	Province, zone