<table>
<thead>
<tr>
<th>Domain</th>
<th>Areas to Consider</th>
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| Social Environment     | • Main carer & carer network  
                          • Next of kin & wider family  
                          • Friends & community  
                          • Preferred methods of interaction                                                                 |
| Physical Environment   | • Think from the skin outwards  
                          • Clothing & footwear  
                          • Main daily living areas  
                          • Beyond the doorstep & transport                                                                 |
| Systems of Care        | • Health & social care integration  
                          • Sharing information & care records  
                          • Respite & carer support  
                          • Funding & benefits                                                                 |
| Psychological Status   | • Recognised conditions or symptoms  
                          • Motivation & confidence  
                          • Emotional wellbeing  
                          • Spiritual & cultural fulfilment                                                                 |
| Multimorbidity         | • Treatment burden of multiple long term conditions  
                          • Physical & mental health  
                          • Vision, hearing, dentition, continence  
                          • Strength & mobility                                                                 |
| Acute Health Events    | • Frailty syndromes: delirium, falls, immobility, incontinence, medication side-effects  
                          • Planned acute care (e.g. surgery)                                                                 |
Frailty Syndromes
Non-specific acute presentations

**Delirium**
- Seeming ‘muddled’, ‘not usual self’
- Acute confusion: delirium, dementia, depression or combination - how are they normally?
- Drowsiness & disorientation (time, place or person)
- May be agitated and irritable or quiet and withdrawn
- Identify and manage possible underlying cause
- Reassure and reorientate

**Falls**
- ‘Found on floor’, ‘legs gave way’
- Collapse, faint or slips/trips
- Complications of long period on floor
- Look for multiple injury sites
- Consider impact of medications

**Immobility**
- ‘Stuck in toilet’, ‘slept in chair’
- Sudden change in mobility
- ‘Off legs’ can hide many diagnoses
- Comprehensive assessment to focus on urgent & important issues

**Incontinence**
- Having ‘accidents’
- New onset or worsening condition
- May affect bladder, bowel or both
- Risk from over diagnosis of UTI, inappropriate antibiotics & diarrhea
- Consider skin integrity and effects of catheterisation

**Medication side-effects**
- Greater susceptibility due to “Polypharmacy” (4+ medications)
- Wide range of symptoms & interaction with other syndromes
- Ensure availability of time critical medications
- Consider opportunities for deprescribing