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Foreword

The challenge of an ageing population motivated the European Commission (EC) and many of the Member States (MSs) of the European Union (EU) to co-fund the first Joint Action (JA) on the management of frailty: “A comprehensive approach to promote a disability-free advanced age in Europe: the ADVANTAGE initiative”. It was funded under the 2015 call of the Third European Health Programme of the EU 2014-2020.

A JA is a grant for actions co-financed with MSs or other countries participating in the Programme and the EC, to allow nominated authorities to take forward work on jointly identified issues that have a clear added value for the EU under the Health Programme.

The ADVANTAGE JA has brought together 34 partners, governments and non-governmental institutions (mainly academia), from 22 MSs for three years (2017-2019). It aimed to build a common understanding on frailty to be used in the MSs as a basis for a common approach to manage older people who have, or are at risk of developing, frailty to promote a disability-free advanced age in Europe, enhancing healthy ageing.

This report summarises nearly three years of work by the ADVANTAGE JA Consortium. It includes main results and clear recommendations for Promoting Healthy Ageing through a Frailty Prevention Approach (FPA) across Europe. The recommendations are based on systematic reviews and analysis of the existing knowledge base, consensus building, and surveys of the MSs within the Consortium. Other experts and external advisers commented on draft documents and participated in discussions at different points during the process. This has brought new insights to the debate and enriched our understanding of the different stakeholder perspectives including policy, political, management, professional and academic views.

We would like to thank all the partners of the Consortium, very specially to the work-package leaders and coleaders, and to the Expert Panel and the Advisory Board Members for their strong support throughout these years. Special mention and acknowledgment to Inés García-Sánchez, deputy coordinator of this project during the first two years. Without the motivation of all of them, their involvement, efforts and hard work this JA would not have achieved so much.

Leocadio Rodriguez-Mañas, Coordinator.
Cristina Alonso Bouzón, Deputy Coordinator.
Executive Summary

Ageing is one of the biggest challenges that Europe is facing (WHO 2015). Demographic trends suggest a future increase in age-related disability and dependency, which not only impacts on the well-being of individuals affected, but also the sustainability of health and social care systems (Murray and Lopez 2013). Nevertheless, recent data suggests that disability and dependency trajectories can be changed providing the opportunity for older adults to live longer and healthy lives (Christensen et al. 2013). There is evidence that prevention and early management of frailty can avoid many of the major negative health-related outcomes associated with ageing including functional decline and dependency (WHO, 2015).

The ADVANTAGE Joint Action (JA) is the first European action on frailty in people with advanced age. It is co-funded by the European Union and the Member States (MSs), involving 34 partners from 22 MSs.

Target groups

Policy makers involved in planning and developing health and social care policies for people with advanced age

Health and social care providers and formal and informal carers who can make changes in their practices

People living with frailty and those at risk of frailty

The aims

1. **Increase knowledge of frailty**
   
   To build a common understanding of frailty to be used by policy makers and other stakeholders, throughout the European Union (EU), in order to implement effective strategies in the prevention and management of frailty in older people who are living with or at risk of developing frailty.

2. **Develop the concept of the ‘Prevention of Frailty Approach’**
   
   To encourage consensus in health and social care services in building a common European framework on screening, early diagnosis, prevention, assessment, and management of frailty.

3. **Promote sustainable changes**
   
   To promote sustainable changes in the organization and implementation of the Health and Social Systems that consider the unique profiles of each MS. To develop a common framework to promote better health in older people and reduce the growing burden of health care demands.

These aims and objectives lead to improvements in diagnosis, care, research, and education of frailty, disability, and multi-morbidity. Additionally, the burden and inefficiency in care could be reduced by the MSs if they take into consideration the ADVANTAGE results and recommendations.
Frailty status in the EU Regions

Demographic change is one of the greatest challenges facing Europe today. The percentage of the population aged 65+ is expected to increase from 18% to 28% in the next few years. Of a total of more than 150 million older people in Europe by 2060, 12% will be over 80 years old.

Older people are at greatest risk of frailty and disability, having a negative impact on their quality of life, on their families and health and care systems. However, frailty is not seen as a top priority in the public health agenda at the European level. Therefore, there is an urgent need to address this challenge through coherent policies that will pursue a “health in all” policies approach and enable the health and care systems to adapt to this demographic shift.

Figure 1 - The shape of the demographic pyramid, in 2080, it will become similar to a “block”, with a large proportion of people over 85.

Frailty is not an inevitable consequence of ageing, it can be prevented by adopting healthy lifestyles. Frailty needs to be adequately assessed and managed because it is distinct from ageing, chronic diseases, and disability. It can be reversed through specific interventions. With adequate planning of services and social and health systems, it is possible to prevent frailty and to implement strategies that favour a long and healthy life.
The ADVANTAGE JA

The general objective of this joint action is to build a common understanding on frailty to be used in all MSs, which should be the basis for a tailored management both at individual and population level in each MS of older people who are living with frailty or at risk of developing frailty in the European Union.

The ADVANTAGE JA structure

The JA is structured in 8 Work Packages (WPs), aimed to foster the development of strategies of prevention and management in the field of frailty. Through all of its features, the ADVANTAGE JA intends to develop the concept of the ‘Frailty Prevention Approach’ (FPA) in health and social care services, while building consensus on the convenience of addressing frailty independently from long-term conditions and chronic diseases.

| WP1 | JA overall Coordination and management of the activities amongst the participating Member States. |
| WP2 | Communication, awareness, and dissemination strategies of the results developed by the JA partners. |
| WP3 | Evaluation to secure high standards of quality in the activities and deliverables of the JA. |
| WP4 | A systematic review of frailty at individual level that explores various tools that can be engaged in screening and diagnosing frailty, and the relationship between frailty and multimorbidity. |
| WP5 | Systematic reviews of literature on frailty prevalence, incidence, trajectories, transitions between different stages of frailty, and population-based approaches to screening, surveillance and monitoring of frailty. |
| WP6 | Management mechanisms of frailty; six fields of intervention: prevention, clinical management, nutrition, physical exercise, medicines, and information and communication technologies (ICTs). |
| WP7 | Models of integrated care and support used to prevent, delay or reverse frailty. Effectiveness of models of care for frailty in hospital settings, and at the interface between hospitals and community. |
| WP8 | Aims at extending and expanding knowledge on frailty, by assessing models for education and training of professionals involved in the Frailty Prevention Approach and signalling future research needs. |
Main results

State of the art Report (SOAR)

The SoAR provides an overview of the existing evidence for effective approaches for the prevention and management of frailty.

As a result of the research made for the SoAR, the ADVANTAGE JA partners adopted the World Health Organization (WHO) definition of frailty as "a progressive age-related decline in physiological systems that results in decreased reserves of intrinsic capacity, which confers extreme vulnerability to stressors and increases the risk of a range of adverse health outcomes."

The SoAR main results (link: http://advantageja.eu/images/SoAR-AdvantageJA_Fulltext.pdf) are structured into five topics:

1. Frailty, Disability and Multimorbidity – are the terms used to identify vulnerable older adults. While these terms are often used interchangeably and are often correlated, it is important to understand they are different.

2. Importance of Frailty – As European population ages, an increase in frailty prevalence is predicted.

3. Recommendations for Health Care and Social Systems – a holistic, integrated, anticipatory approach based-on-functional outcomes is recommended for managing a frail population. Recommendations for an adapted health care and social systems, include the need to provide new education opportunities for the workforce and improve the coordination of services.

4. Frailty Screening, Diagnosis, Prevention and Management – all persons older than 70 years old should be screened for frailty when receiving health care, using one of the many validated screening tools. If frailty is detected, the gold standard for its management is the Comprehensive Geriatric Assessment (CGA). In terms of reverting frailty, interventions that focus on physical exercise, nutrition and avoiding inappropriate drugs and polypharmacy are indicated. To prevent the onset and development of frailty, healthy life-style choices such as increasing physical activity, reducing alcohol consumption, not smoking and a healthy diet are recommended.

5. Research: Further research is needed not only to better understand the nature of frailty, but also to improve screening and diagnostic tools and test the effectiveness of interventions. In this regard, ADVANTAGE JA has identified a number of areas that will benefit from EU research funding.
The policy brief (link: http://advantageja.eu/images/Policy_brief.pdf) is intended to support policymakers in handling frailty-related policies for European older population. It focuses on three main ideas: comprehension, prevention and management, and increased awareness and preparation of the workforce. To this end, ADVANTAGE JA offers key policy recommendations.
Dissemination activities

Social media accounts were created to engage interested professionals, policymakers and citizens across Europe:

Facebook: https://www.facebook.com/advantageJA/
LinkedIn: https://www.linkedin.com/company/advantage-joint-action/
Twitter: https://twitter.com/Advantage_JA

Social media platforms were used to disseminate the JA implementation process, results, events and activities. We shared news regarding frailty-related activities and periodical updates on ADVANTAGE JA. We managed to gather interested followers on these three platforms, our posts being viewed by more than 1.000 people.

All the information regarding ADVANTAGE JA news, milestones and outputs 2017-2019 is on the project website (www.advantgeja.eu), and is available in 5 languages (English, Spanish, Italian, French and German) to increase accessibility across Europe.

Newsletters and leaflets summarise the most important results of the JA and the main frailty-related news. Advantage JA partners used key international and national conferences to present research findings to the scientific community in order to disseminate results, establish collaborations and gain support for future policy on frailty. To date ADVANTAGE JA has been presented in 59 events and results published in 16 papers accepted in peer-reviewed journals. Additionally, JA partners have been active in disseminating the preliminary results of the project in other professional journals at the local and international level for a total of over 80 additional publications. Dissemination activities will continue beyond the end of the project.
Face-up-to-frailty campaign

The target audience for the #faceuptofrailty campaign is policy and decision makers, health and social care professionals and citizens because only by acting at all levels can we integrate the concept of frailty into our communities and create practical solutions for those in need. We need a collaborative approach with the involvement and commitment of all stakeholders for proper dissemination of our campaign message.

Aims of the #faceuptofrailty campaign

- To give visibility to the ADVANTAGE JA recommendations among the health workforce, policy makers, managers, and older people and their carers.
- To integrate the social sector contribution to implementing ADVANTAGE JA recommendations and have tangible results in everyday life, thus putting knowledge and evidence into practice.
- To raise awareness of the impact of frailty for individuals, their families, communities and systems.
- To raise awareness of best practices in tackling frailty around Europe and to Support the adopting of local initiatives at European Level.
- To support people to share their stories about living with frailty.
- To help people from all sectors to understand what they can do to prevent and manage frailty.
The Frailty Prevention Approach document (link: http://advantageja.eu/images/FPA%20Core%20ADVANTAGE%20doc.pdf) summarizes the results of the ADVANTAGE JA and provides specific recommendations to address frailty at European level. Changes to the healthcare systems are necessary to efficiently address the needs of the older population. For instance, the new framework suggests a focus on functional ability and not just disease, and on preventive health, care and support, with a more coordinated and integrated approach rather than episodic and fragmented care.

The FPA intends to be the core guidance for policy decision makers, technical advisors, managers, health care professionals, academics, and all stakeholders involved in the development of national or regional frameworks to address frailty.

Specific recommendations are set out as ten domains or areas of action. Each domain includes a brief rationale, actions, possible indicators and is illustrated by a case study example.

The FPA is not just a guideline. It incorporates the commitment of the participating MSs to take actions aligned with these recommendations during the next four years. These Road Maps of actions, illustrate how the prevention and management of frailty can be enhanced in different socio-economic and cultural contexts.
ADVANTAGE roadmaps represent a series of steps and activities, tailored for each MS that will be implemented in order to develop and implement national policy to prevent and manage frailty. Roadmaps were developed by each of the 22 MSs in the ADVANTAGE JA consortium, and debated with high-profile stakeholders. Each MS created its own roadmap tailored to their specific national context and building on the baseline identified through a survey of key informants in each MS. The roadmaps address the key gaps identified by MS self-assessment against the FPA and set out realistic timelines for actions to address these gaps.

Activities **promoted in the roadmap at European level are classified in ten domains or areas of action:**

- Raising awareness, engaging stakeholders and empowering older people
- Commitment to action on frailty
- Promotion of healthy ageing and frailty prevention
- Early diagnosis of frailty
- Appropriate clinical management of frailty
- Establish and continually improve an integrated model of care to completely address frailty
- Education and training
- Research
- Implementation support (finance and information and communication technologies (ICTs))
- Monitor quality and evaluate cost-effectiveness
The ADVANTAGE JA Consortium recommends MS adopt the following key messages in their health and social care policies:

- Frailty is very common – it affects almost 1 in 5 of all people over 65 years old, therefore its prevention should be an EU public health priority with a “health in all” policies approach.

- Frailty can be prevented – it is not an inevitable part of ageing. We can face up to it!

- The sooner we detect it, the earlier we can do something about it!

- In order to tackle frailty, we need to focus on three-steps: 1) Screening of frailty. 2) Diagnosis of frailty. 3) Management of frailty.

- The best way to manage frailty is to work together to coordinate care based on a Comprehensive Geriatric Assessment and personalised care plan to address medical, physical, cognitive, social, and spiritual needs.

- We can reduce the impact of frailty through individualised exercise, proper nutrition, careful management of chronic diseases, avoiding inappropriate medications and promoting recovery and independence after illness.

- Integrating health and social care is the most effective model to manage frailty.

- Trained professionals are the key for the prevention and management of frailty, but also in the planning and development of services, policies and research.

- Further research is highly needed not only to better understand the nature of frailty, but also to improve its management.
ADVANTAGE Joint Action partners

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ADVANTAGE JOINT ACTION

Managing Frailty. A comprehensive approach to promote disability-free advanced age in Europe: the ADVANTAGE initiative

DISCLAIMER

This publication arises from the Joint Action ADVANTAGE, which has received funding from the European Union, in the framework of the 3rd Health Programme, under the grant agreement n° 724099. This document reflects only the authors' views and neither the European Commission nor any person on its behalf is liable for any use that may be made of the information contained herein.