

07 March 2023

Dear colleague,

‘FEED’ study

Frailty in European Emergency Departments

Invitation to participate

This cross-sectional study will describe the prevalence of frailty and methods for its assessment for people receiving emergency healthcare in Europe. Using a ‘flash mob’ design, we will collect a large amount of data from many sites in a short period of time.

We would like to invite participation by emergency departments (hospital settings where people can attend for unscheduled healthcare) caring for adults aged 18+ in Europe. A site co-ordinator will be appointed at each department and will be responsible for obtaining local permissions and indemnity to participate. All site team members will be named on outputs as collaborators under the authorship ‘European Taskforce on Geriatric Emergency Medicine’.

The study involves a short survey on hospital characteristics, sent to site co-ordinators. The core element of the study then follows with a twenty-four-hour period of data collection. We plan to collect these data on **Tuesday 04 July 2023**: sites may select the timings that best suit their roster, and there is some flexibility to choose a different day that week.

We wish to collect anonymous data for every adult attending the emergency department during those twenty-four hours, including basic demographic details, attendance times and outcomes, initial vital signs, and the Clinical Frailty Scale (in routine use in many but not all European departments). The data will be passed to University of Leicester for analysis, for which we have secured the necessary research approvals. Where sites already collect all fields in an electronic health record then the data can be passed as an anonymised exported spreadsheet.

Analysis will enable description of age and frailty prevalence at site, country, and European levels and we will compare this to the local assessment methods, hospital capacities, and resources available. We will assess for frailty associations with immediate outcomes from emergency care, including length of stay, mortality, use of resuscitation areas, and admissions. This knowledge will inform population-attuned configuration of Geriatric Emergency Medicine services and education.

Thank you for considering the FEED study and we hope you are able to participate.

Best wishes,

James van Oppen

on behalf of the European Taskforce on Geriatric Emergency Medicine