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Feasibility, appropriateness and meaningfulness analysis of the Sunfrail Tool to the European Portuguese population during cross-cultural adaptation process

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BACKGROUND
Frailty is an **age-related condition** characterized by **increased vulnerability** to **negative physical, psychological and social outcomes** (Rodriguez-Manas et al., 2013).

Recent systematic reviews have highlighted that frailty is **malleable** and its early diagnosis may help **improve care** for older adults (Apóstolo et al., 2017; 2018).
Screening tools that cover different domains of individual functioning, reliably predict future adverse outcomes and can be generalizable to healthcare settings other than primary care need to be developed (Apóstolo et al., 2017).
The Sunfrail Tool (ST) is an easy-to-use 9-item screening tool that enables early identification of frailty and multimorbidity. (Cesari et al., 2018).

ST is a three dimensional tool (bio-physical, psychological-cognitive and socio-economic), and it has two response options (yes/no).

There is no Portuguese version of the ST.
FRAILTY

Sunfrail Tool

(Cesari et al., 2018)

- ST can be administrated by different professionals and informal carers within health, social and community settings.
ST allows **first alert** generation, **activation** of a referral for **comprehensive assessment** and **diagnostic investigation** and **timely response** from the social and community sectors (Cesari et al., 2018).
To perform a cross-cultural adaptation of the ST for the European Portuguese population;

To perform the feasibility, appropriateness and meaningfulness analysis of the ST Portuguese version.
METHODS
Cross-cultural adaptation process

METHODS

Translation → Synthesis

Back translation → Creation of consensual version

METHODS

Content Validity

Appropriateness

Meaningfulness

Feasibility

End users

Older adults, informal caregivers, health and social care professionals
RESULTS
• Frailty concept was considered suitable for European Portuguese population.

• A consensus version was reached by an expert panel after considering the results of two forward and two back-translations.

• This pre-final consensus version was endorsed to the author of the original instrument.
• Content validity was performed by healthcare professionals \( (n = 7) \), patients \( (n = 18) \) and informal caregivers \( (n = 3) \).

• ST was found as moderately comprehensible and ambiguous. Five items required changes for cultural adaptation.
CONCLUSIONS
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• ST seems to be an appropriate instrument for the early identification of frailty in the European Portuguese context.

• It enables informing clinical decision on preventive responses.
CONCLUSIONS

- There is a need to define **cut-off points** for detection of different frailty levels to **ensure effectiveness** on **activation of pathways** for frailty management.

- **Guidelines** supporting **interview process** are desirable.
REFERENCES


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Thank you so much
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