





## **Ageing Well Tool**

The **Ageing Well Tool** detects common mental disorders and risk factors for dementia, including cardiovascular risk, depression, anxiety, and social isolation. This involves personalised risk reports and treatment recommendations with immediate feedback.

**Recruitment Target:** 30 patients complete baseline measurement in 3-6 months (1-2 patients per week).

## **ELIGIBILITY CRITERIA**

- ✓ 60-70 years of age with a life expectancy of 5+ years
  - Exclude patients with a significant medical condition who don't have capacity to engage in recommendations over the next 12 months.
- ✓ Normal cognition
  - o Exclude patients with mild cognitive impairment or dementia.
- ✓ Community dwelling
  - o Exclude aged care.
- ✓ Able to read and write in English at a sufficient level (for consent)

## RECRUITMENT PROCESS STEPS

- 1. GP/practice identifies patients eligible for screening (see eligibility criteria).
- 2. Pass patient details to your practice manager/administrator to introduce the study, manage the booking, and get informed consent from patients. Sarah Hatem informs the practice when the patient completes the consent form.
- 3. BASELINE ASSESSMENT: 30 minutes before appointment or online at home, patient completes the online survey on a tablet/home device.
- 4. GP/practice nurse completes 5 medical questions at the end of the online survey on the tablet. HbA1c and cholesterol data are needed.
  - ✓ You can use existing data within ≤12 months for baseline or ±2 months for the 6- and 12-month follow-up. However, for the 6-month measurement, if you believe nothing has changed, you can carry forward measurements from the baseline survey.
  - ✓ You can resume the Ageing Well Tool survey using the Participant's Study ID after getting bloodwork.

When survey is complete, full risk factor results are visible on the tablet, as well as being emailed through to your practice manager/administrator. GP/practice nurse discusses results with the patient and makes recommendations as appropriate, gives the patient a recommendations handout, and records recommendations in survey software.

- 5. Your practice manager/administrator attaches the emailed report to the patient's record.
- 6. Sarah Hatem tracks patient timeline and informs practice when 6- and 12-month follow-up appointments are needed.
- 7. FOLLOW-UP ASSESSMENTS: Patient risks re-measured on the online survey in 6 and 12 months and compared to (auto-populated) baseline scores through the survey software. Survey software also pulls previous GP recommendations to see what the patient did/didn't do. GP gives further recommendations if needed.
- 8. Practices will receive a one-off \$100 payment per patient. There are also CPD opportunities. Patients receive a one-off \$50 payment at the completion of the study.

