



The Townsville Hospital MAPU Audit

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NSW
opens
16 new
MAPU
s in
2008.

Medical Assessment Units provide specialist treatment for elderly patients - NSW Department of - Windows Internet Explorer

http://www.health.nsw.gov.au/news/2008/20080409_00.html

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Home Page Home > About NSW Health > News > Medical Assessment Units provide specialist treatment for elderly patients

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History
News
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Doing Business with Us
Initiatives
Legal & Legislative Services
Freedom of Information
Privacy

A-Z Health Topics
Drug & Alcohol
Employment
Health Professionals
Health Services
Hospitals
Mental Health
Nursing and Midwifery
Publications & Resources
Public Health
Research
Rural Health

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09 April 2008

Medical Assessment Units provide specialist treatment for elderly patients

NSW Minister for Health, Reba Meagher, today announced a major step forward in the way our public hospitals treat elderly patients and those with chronic diseases.

Ms Meagher said Medical Assessment Units were being opened in 16 public hospitals to provide faster and better coordinated care for older patients within the hospital, community and home.

"The number of people aged 75 years and older who are going to public hospital emergency departments is rising by 20 per cent each year," Ms Meagher said.

"The key challenge for our health professionals and for Government is to find the best way to provide the right type of care that these patients need.

"People with life-threatening or critical injury and illnesses will continue to be treated in the emergency department.

"But the evidence tells us that often these patients don't need emergency care and a busy emergency department is therefore not the best place for them.

"Medical Assessment Units are a new type of ward where specialist doctors, nurses and allied health professionals design and lead the care of older patients with chronic illnesses."

Ms Meagher said Medical Assessment Units had already opened their doors at 11 hospitals:

- John Hunter
- Liverpool
- Royal Prince Alfred

Internet 100%

Observation Medicine Guidelines 2009

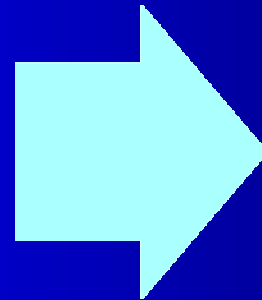
Depending on their exact role, observation medicine units are known locally as:

- short-stay (observation) units (SOU or SSU)^[3-5]
- emergency medical units (EMU)^[5, 6]
- clinical decision units^[2, 7-9]
- medical assessment (and planning) units (MAU or MAPU)^[6, 10, 11], medical short-stay units^[2], short-term geriatric assessment units^[12]
- chest pain evaluation units (CPEA or CPEU)^[9, 13, 14]
- psychiatric assessment and planning units (PAPU) or psychiatric (observation) intensive care units^[15]
- emergency department observation units (EOU)^[3, 7]
- children's or paediatric observation (short stay) units.^[2, 16-18]

Potential Confounding

Different model

Length of Stay
Pre MAPU



Length of Stay
Post MAPU

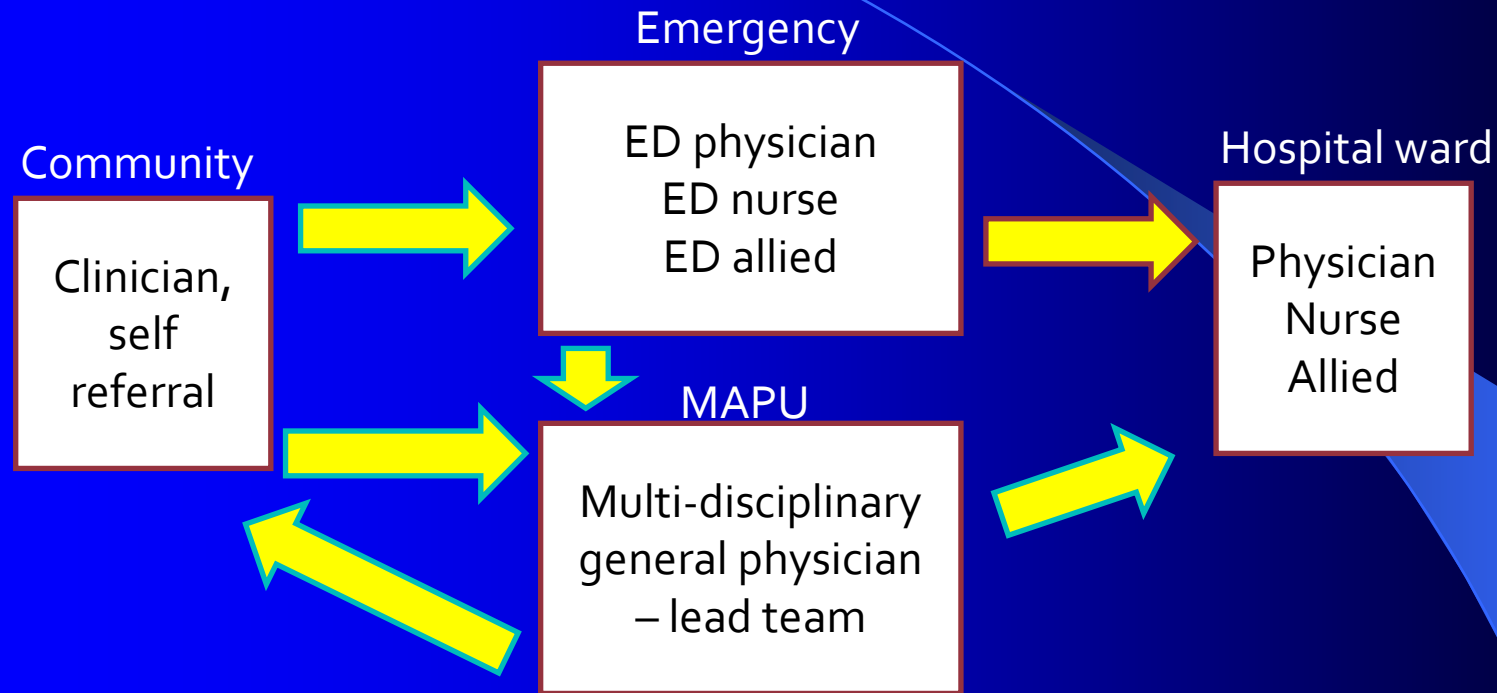
Increased
resources





- Tertiary referral university teaching hospital to 700,000 people
- 500 beds, 140 medical
- >100% inpatient bed occupancy → access block
- >3% annual population growth
 - ageing population

The MAPU system



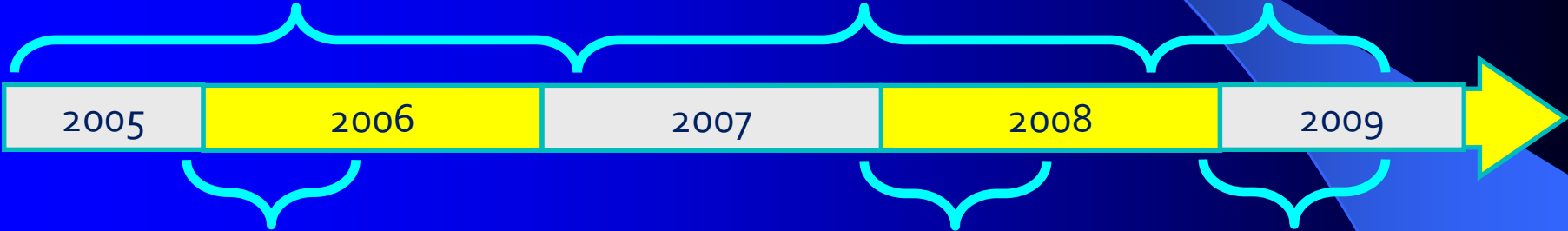
Principles

Frontload resources (medical, nursing, allied, investigations)
Rapid treatment & "disposal" (24-48 hours)

Pre MAPU

MAPU

Hybrid



7 month intervals
Avoid seasonal variation
Avoid 'run-in' periods

Pre-

- 4 general medicine teams – take system
- ‘VMO-type’ consultant input (2 ward rounds/wk)
- 4 medical registrars + 4 interns

MAPU

- ◆ MAPU team & MAPU ward
- ◆ Dedicated MAPU consultant (2 ward rd/day)
- ◆ 8 registrars + 8 interns
- ◆ 1 PT, OT, SW, pharm, dietician
- ◆ 24 new beds + nursing FTE
- ◆ +1.4 consultant FTE
- ◆ +16.0 JHO/PHO FTE
- ◆ +5.0 allied FTE

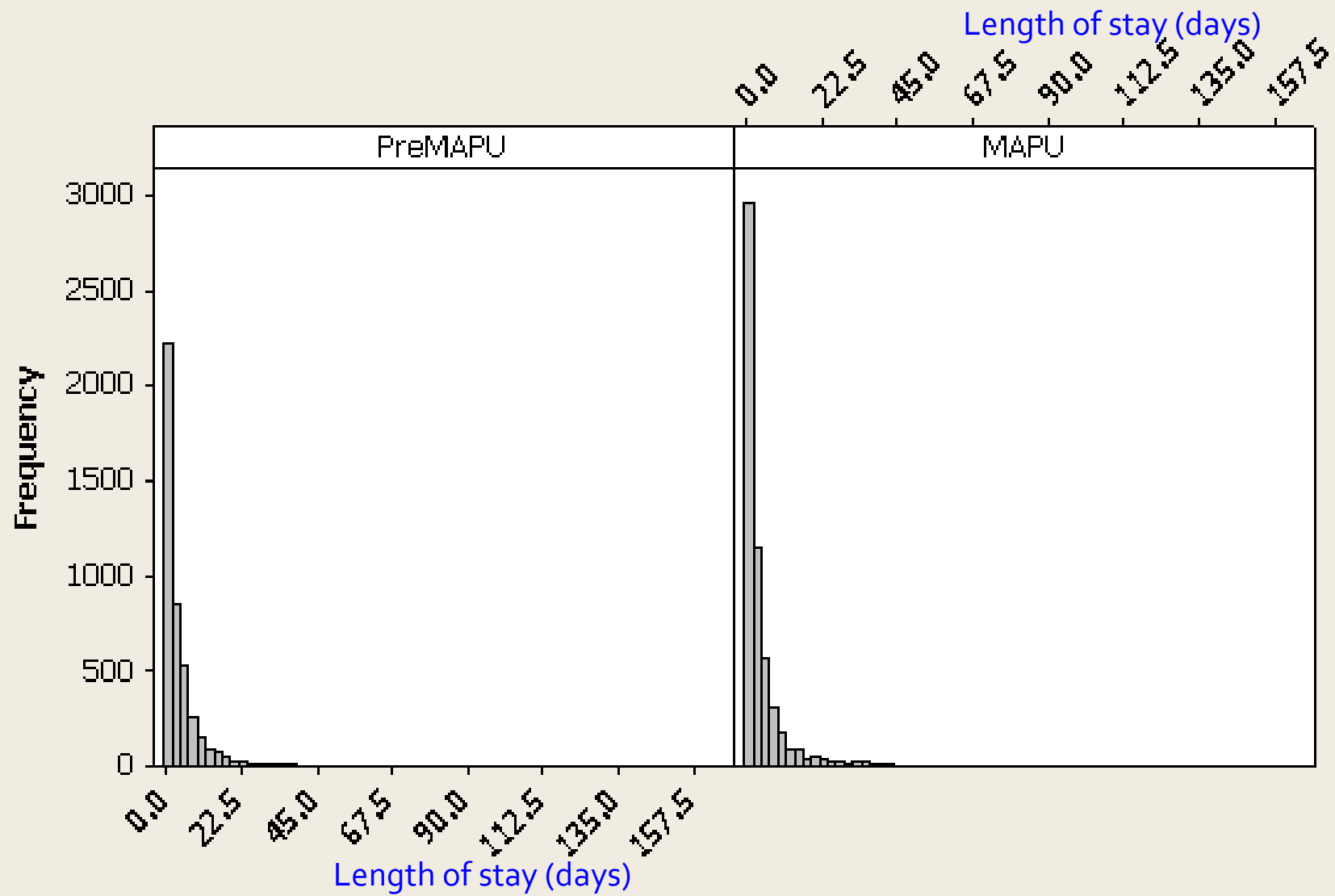
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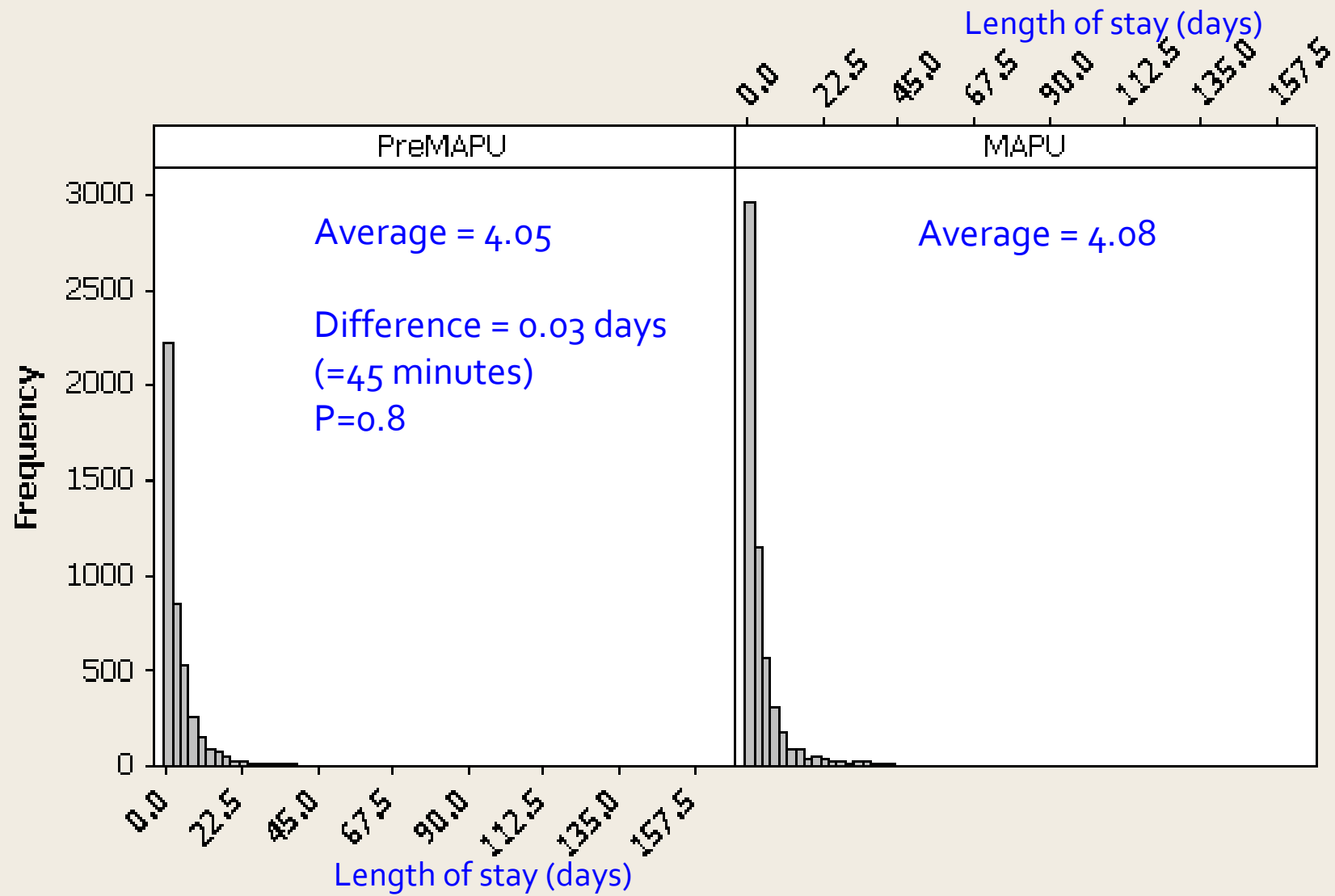
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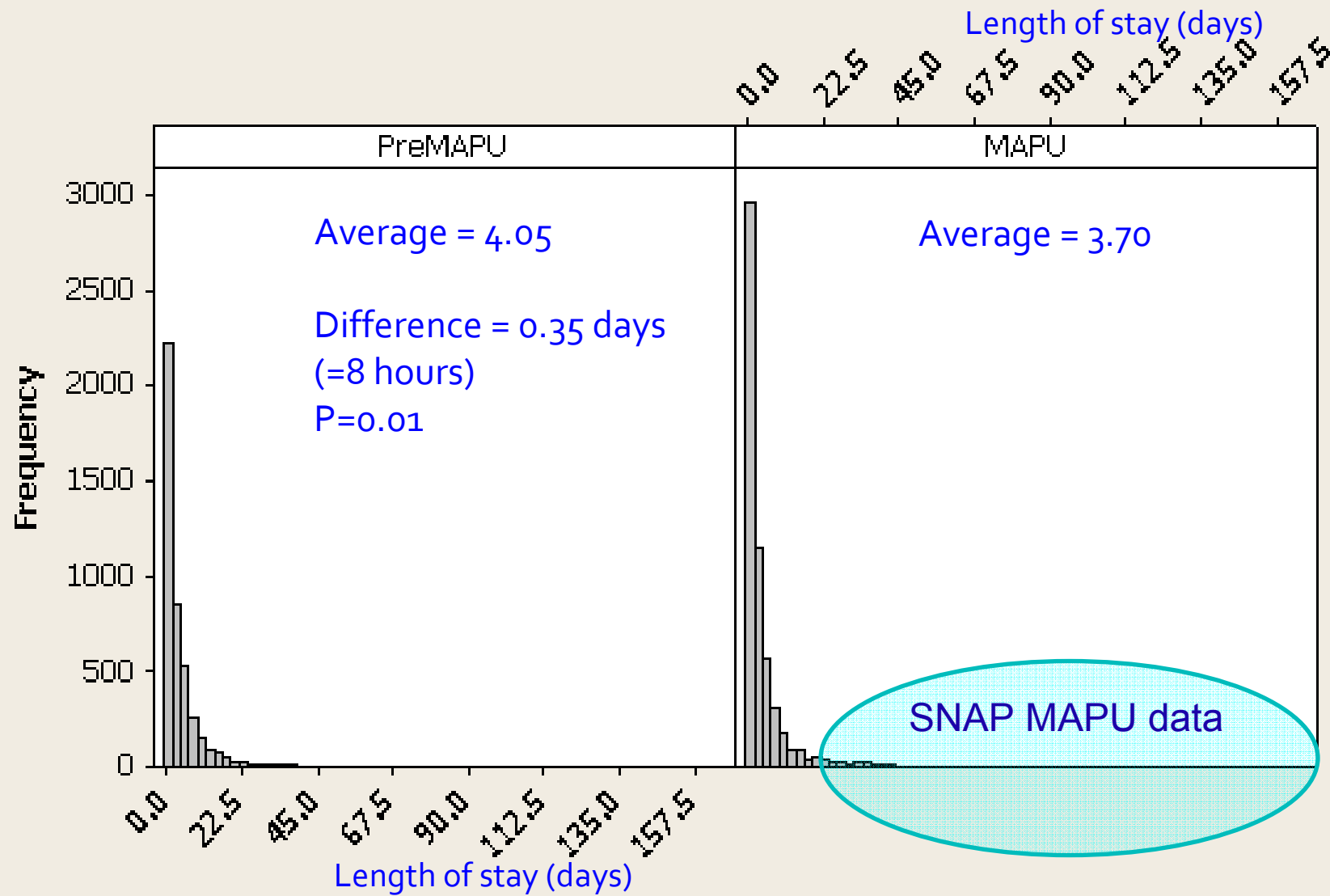
- acute admissions to Medicine
- Subspecialty
 - cardiology, respiratory, gastroenterology, neurology, nephrology, rheumatology, infectious diseases
- General Medicine

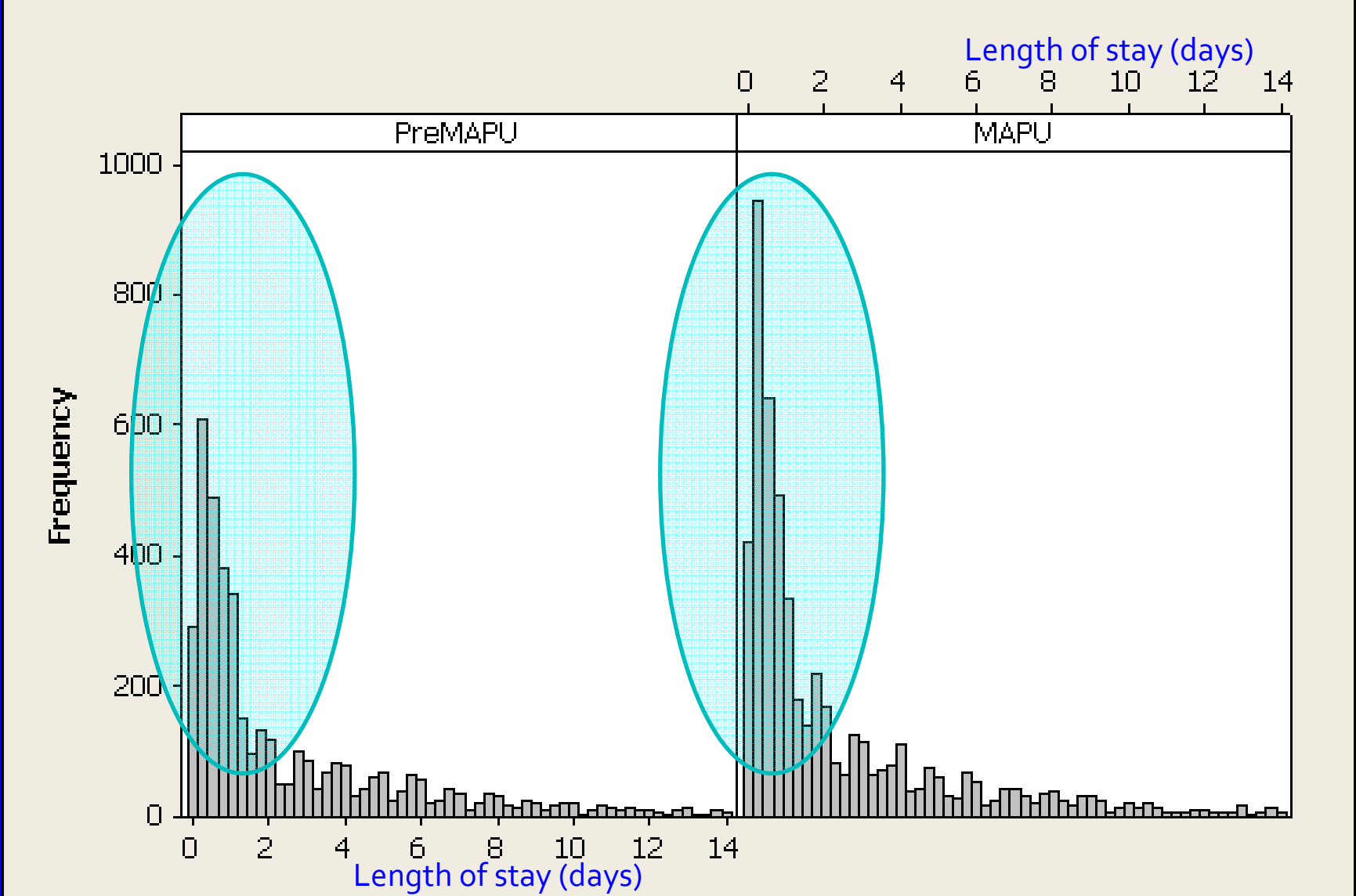
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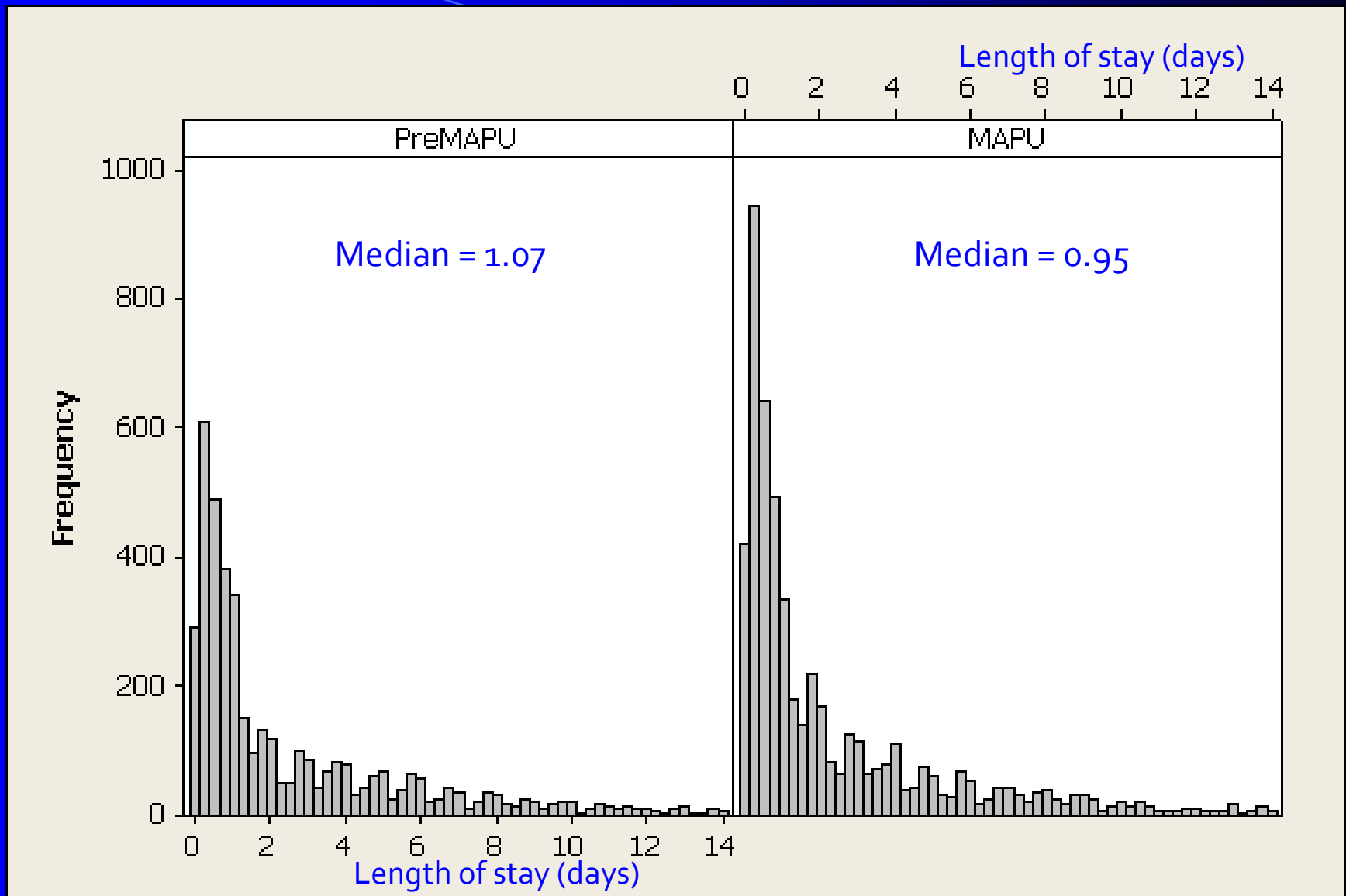
- Day centre admissions
- Dialysis

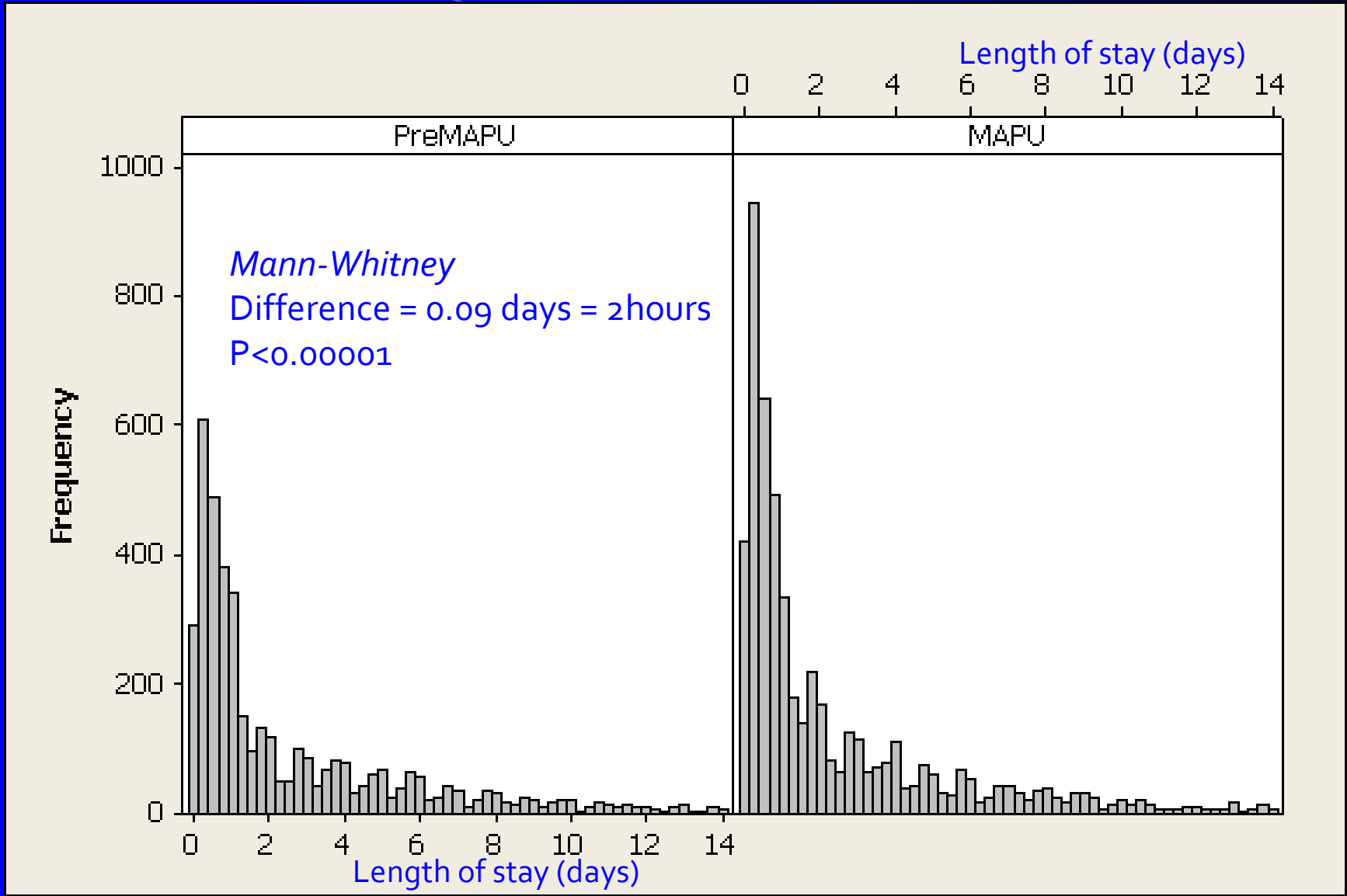




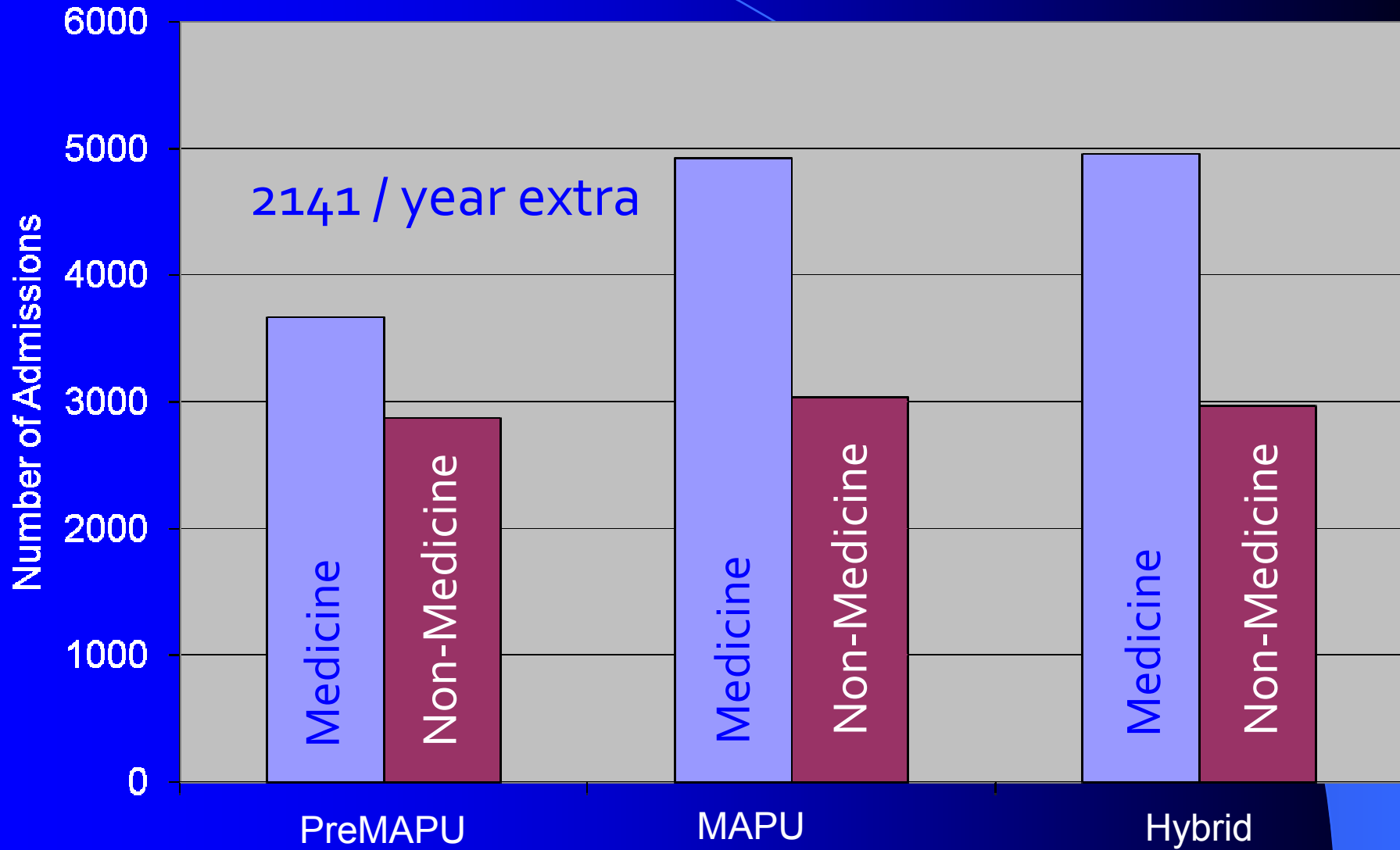


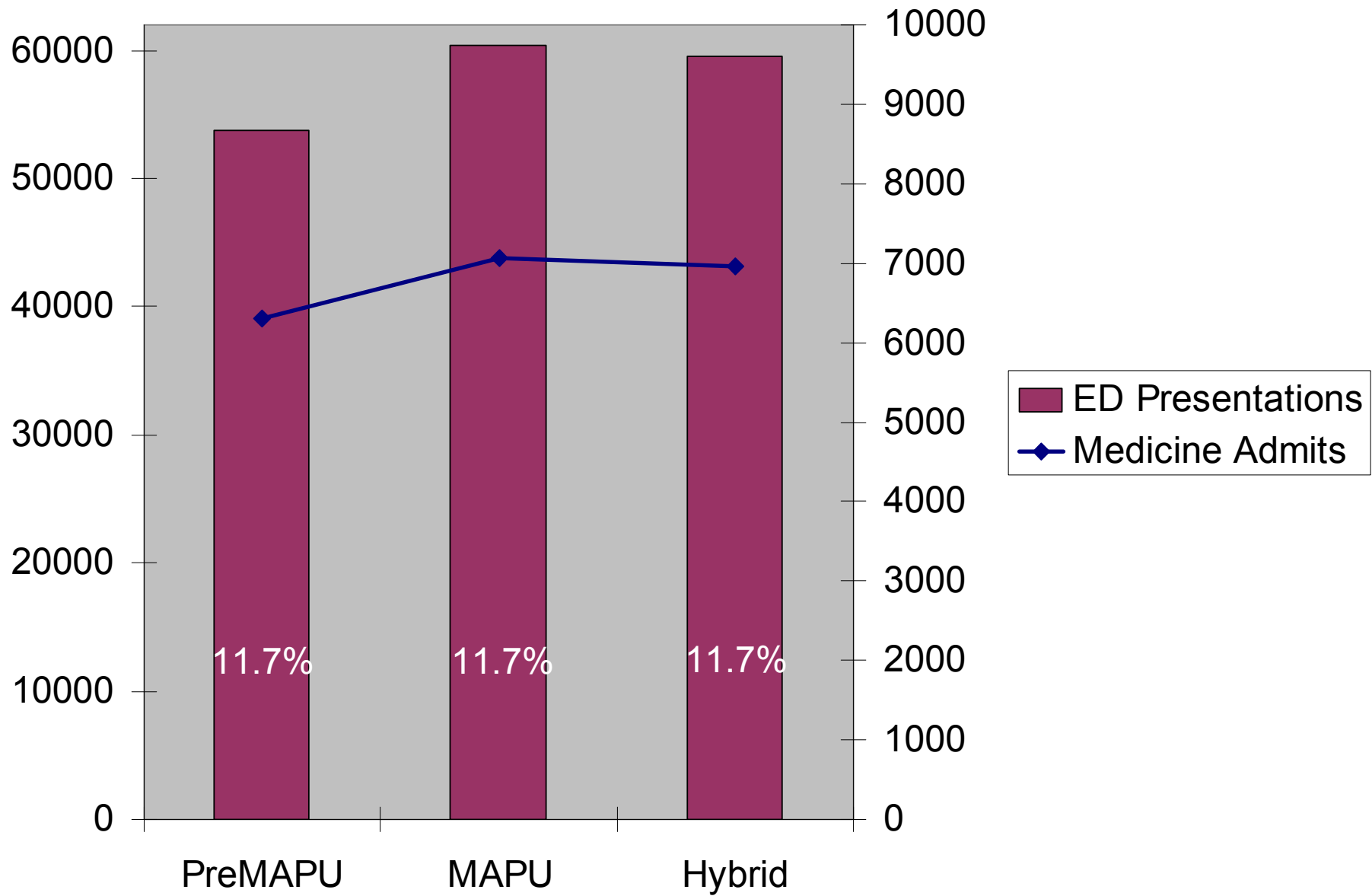


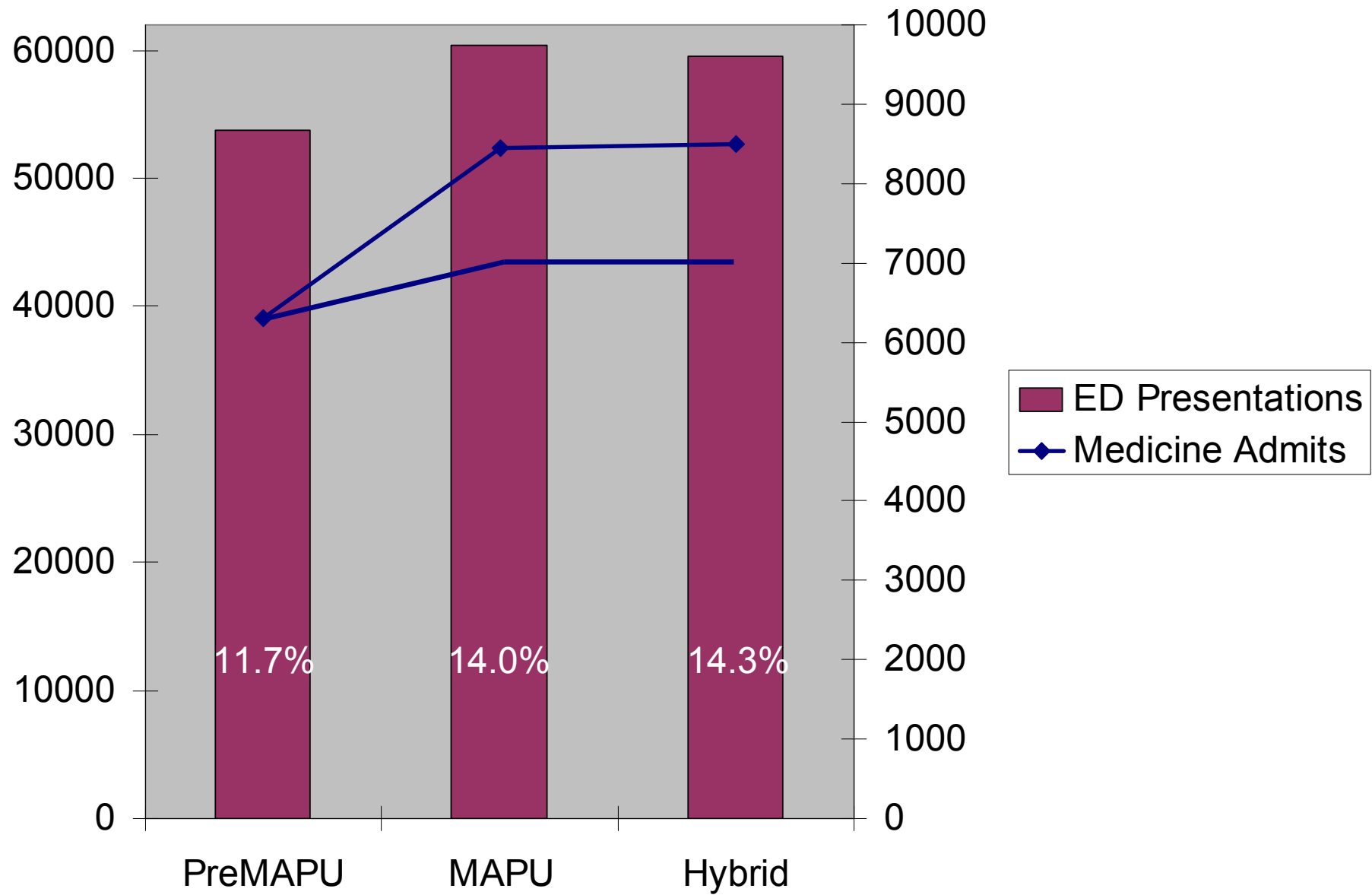


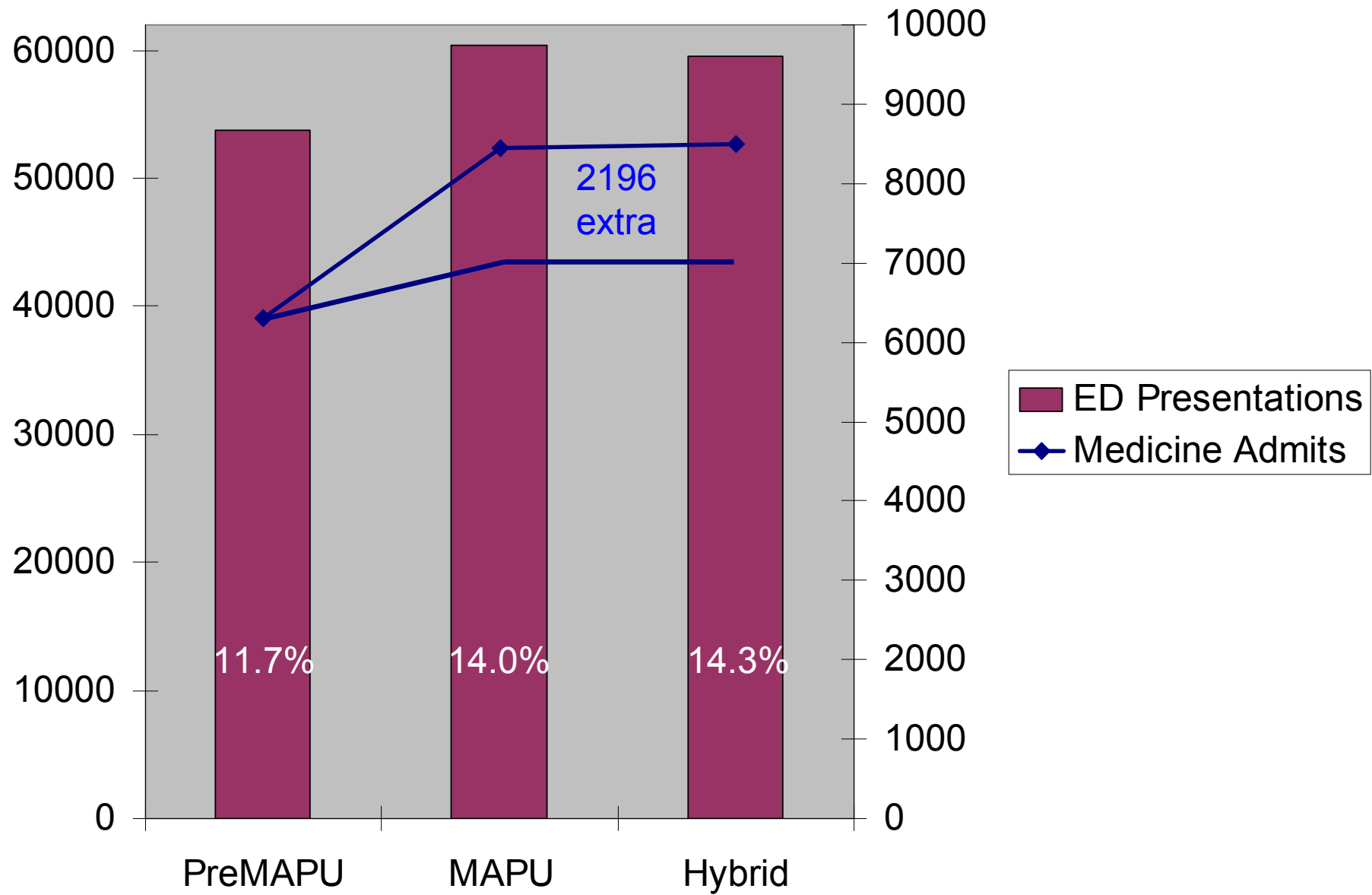


Admissions - Medicine vs rest of Hospital









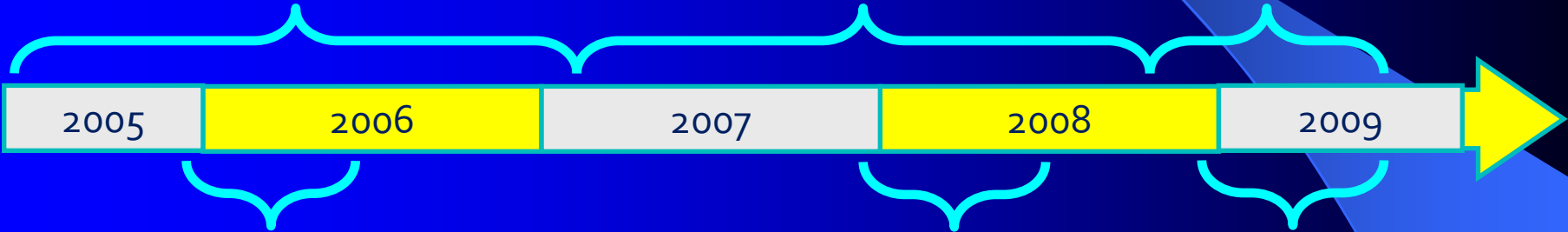
Explanations

- 1. Demographic changes?
 - Would usually be gradual
- 2. Prior underservicing?
- 3. ED culture change?
 - Easier pathway – human nature
 - The role of the ED – dispatch vs definitive care

Pre MAPU

MAPU

Hybrid



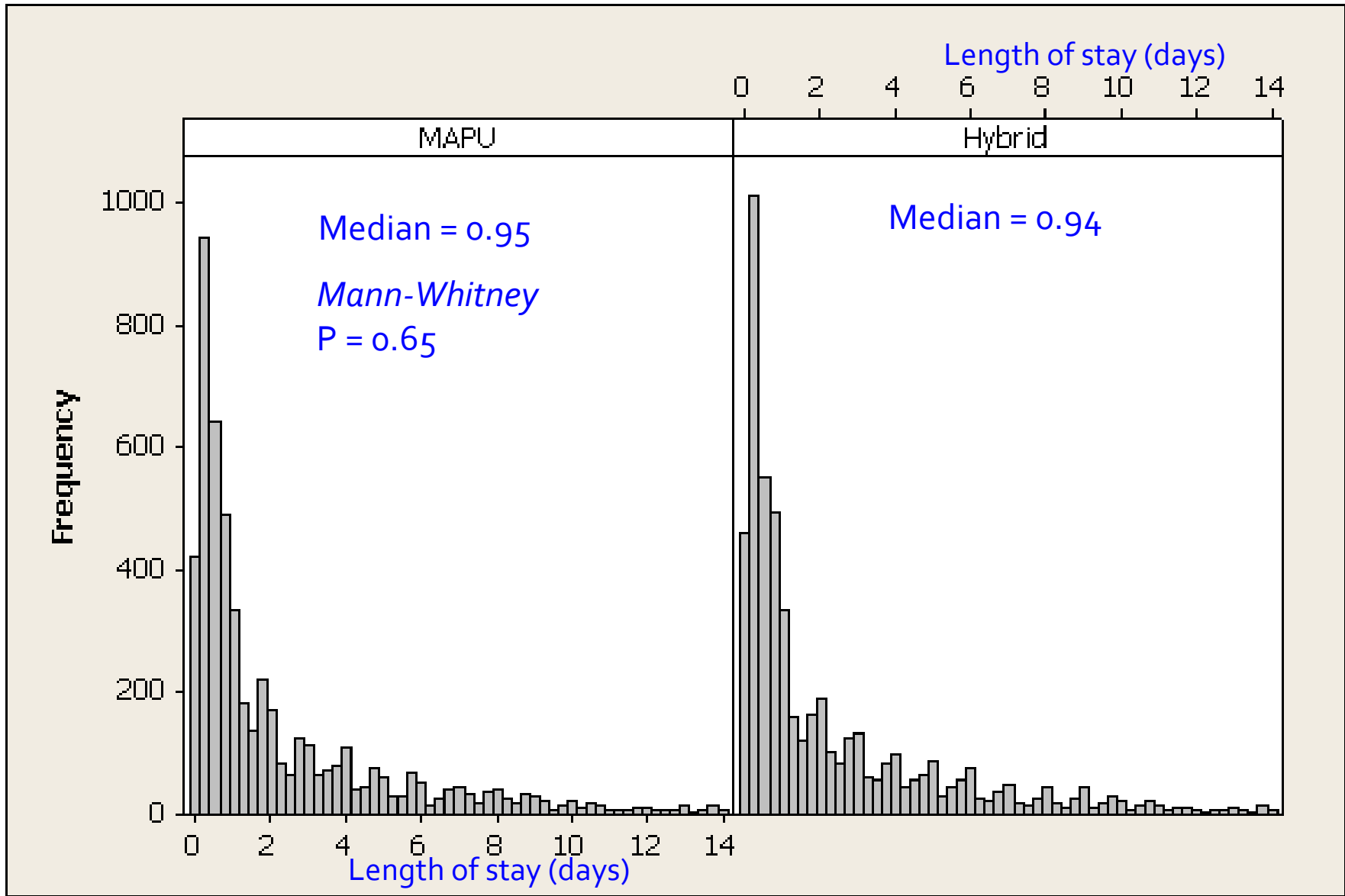
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Post-

- ◆ 4 general medicine teams – take system & MAPU ward
- ◆ Dedicated consultant rounds (4+ per week)
- ◆ No change in FTE



Summary - Townsville MAPU

1. MAPU introduction in Townsville probably had a detrimental impact on efficiency of medical patient care.
2. A cross-sectional resourcing strategy to medical care can lead to a transfer of work rather than improvements in efficiency.
3. A strategy of resourcing and measurement across the continuum of care might be more rational.

Acknowledgments

- Data – Clinical Information Services (TTH)
 - Rachael Payne
 - Liz Lea
 - Alycia Snell