

Allied Health: Right Model, Right Mix

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Early-Assessment Medical Unit
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Medical Assessment Units

- Developed in response to
 - ↑ medical presentations
 - Restrictions in inpt medical beds
 - ↑ ED pressures
- Right care in the right place, **first time.**
- Provide short term assessment and / or therapy
- “Pull concept”
- Front load resources

Medical Assessment Units

- **Emphasis on :**
 - enhancing patient flow
 - proactive management
 - appropriate dedicated nursing, medical and AH staffing
 - multidisciplinary approach to patient care
- **Useful for older person**
- **Alternative pathways to admission**

MAU Models of Care

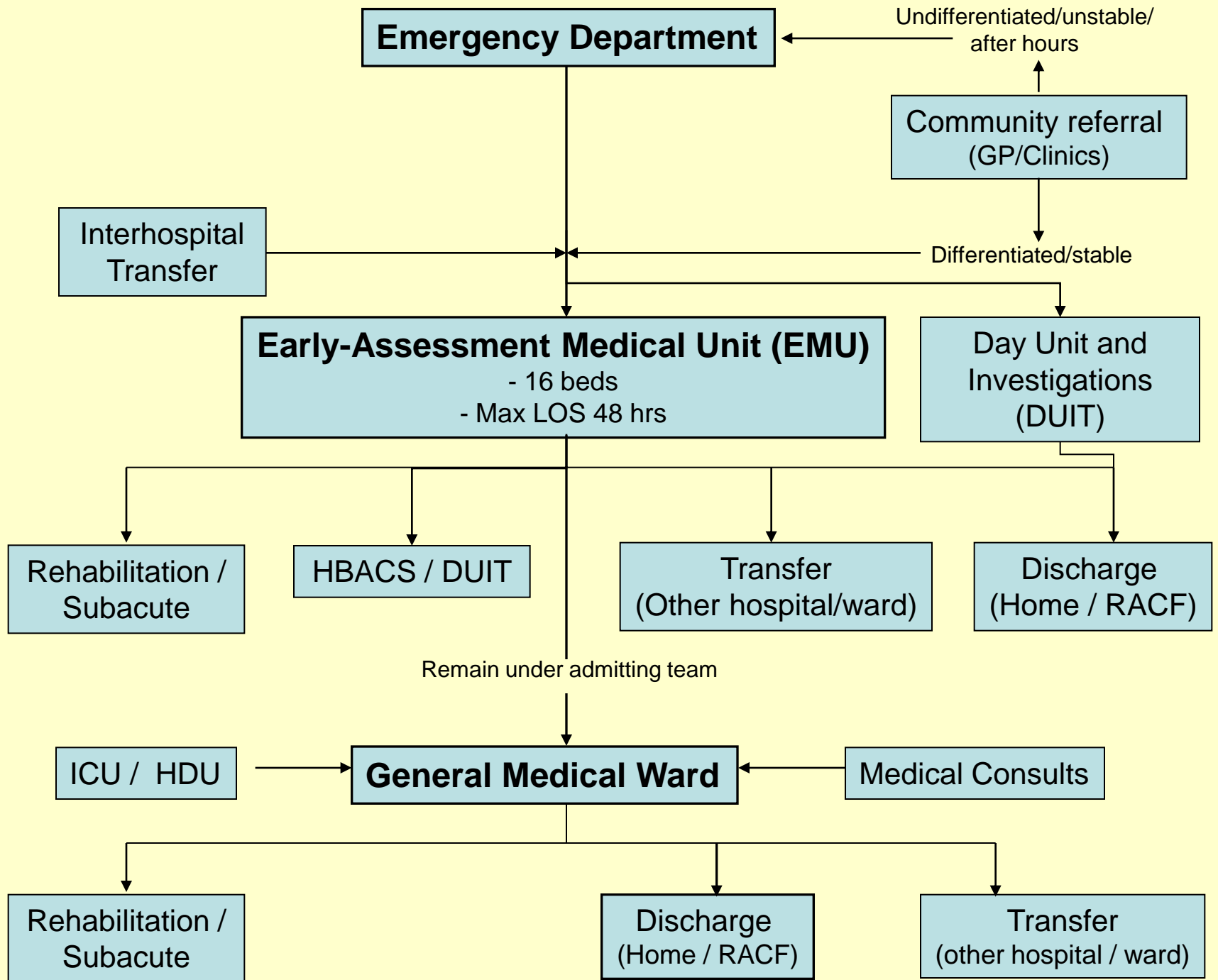
- Remove road blocks to care
 - Provide immediate access to skilled clinicians, responsive and appropriate care
- Proactive interventions
- Prevention interventions
- Daily consultant led ward rounds
- Daily MDT Board Rounds

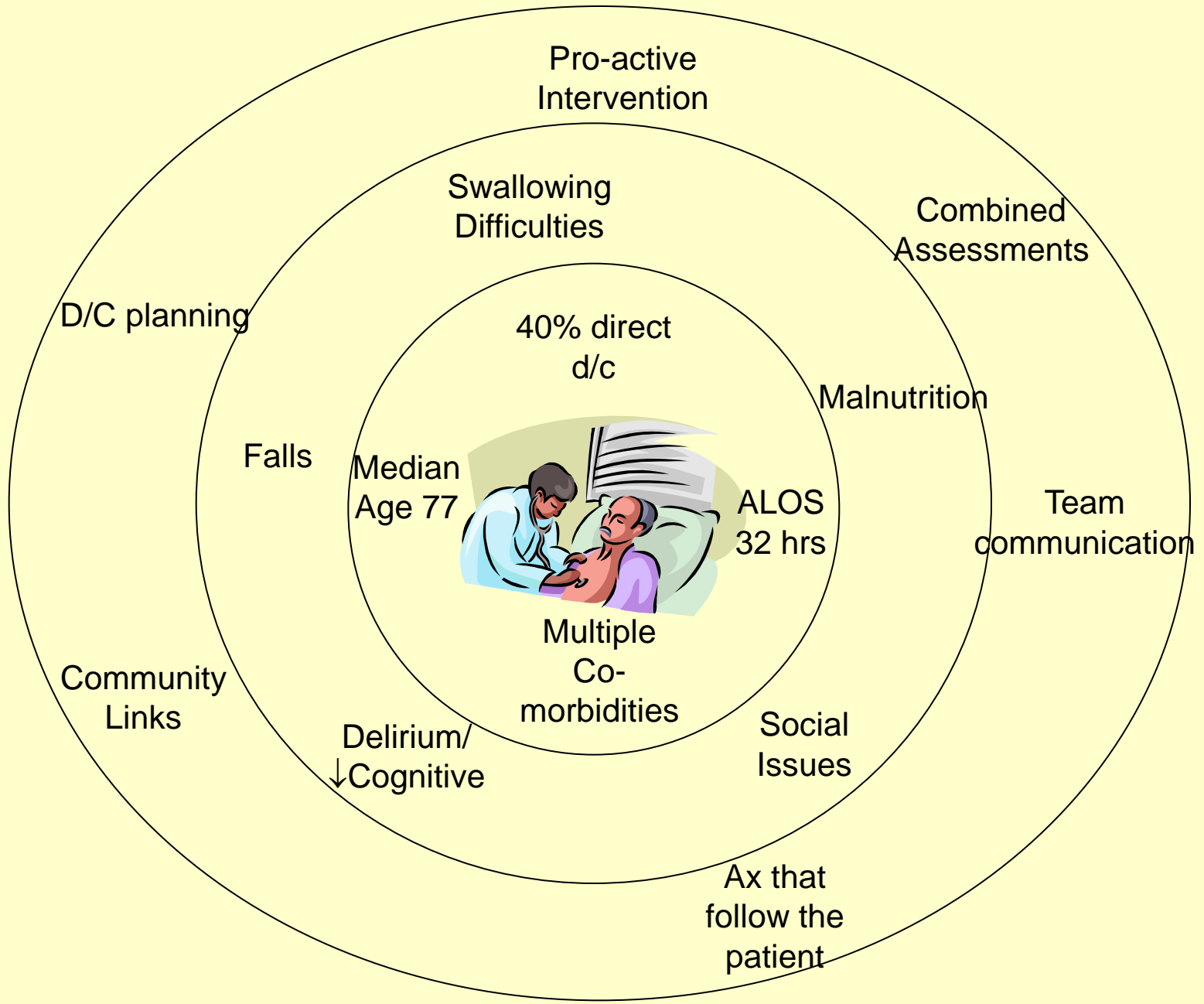


Early-assessment Medical Unit (EMU)

“Grunt up Front”

- 16 Bed Unit
- Intensive period of **assessment** and **planning** by the MDT (measure activity in hours not days)
- Target max 48 hour LOS
- Emphasis on care planning
 - move patients to most appropriate place for ongoing care
 - home, acute, subacute
- EDD + criteria for D/c within 24 hours of admission
- Appropriate skill mix





Pro-active
Intervention

Swallowing
Difficulties

Combined
Assessments

D/C planning

40% direct
d/c

Malnutrition

Falls

Median
Age 77



ALOS
32 hrs

Team
communication

Multiple
Co-
morbidities

Community
Links

Delirium/
Cognitive

Social
Issues

Ax that
follow the
patient

The Team

Allied Health



Support Services



Medical



Nursing

“The Team” Together Everyone Achieves More

Current KPI Data

- 299 admissions / month
- Average LOS ~ 26 hours
- Directly discharge home ~40%
- 28 Day Readmission rate 1.45%
- Age range 14 – 101 yrs, ~ 60% female
- Care of older person core business

Allied Health in MAU's

“Senior Clinicians and Adequate Resourcing”

- Well positioned to provide care
 - Particularly the complex older patient
- Emerging area of specialty
- Provision of adequate resourcing

Allied Health MAU Model of Care

- *Dedicated senior clinical staff*
- *Adequate resourcing*
- *Standardised practice*
- *Care coordination*
- *Governance*

Allied Health MAU Model of Care

- *Dedicated senior clinical staff*
 - Dedicated AH staff who are clinically, operationally and strategically involved in the unit
 - Senior and Expert AH clinical decision makers
 - Broad skill base
 - Full utilisation of AH scope and skills
 - Quick decision making
 - Community linkages
 - Capacity for interdisciplinary working
 - Appropriate staffing levels
- *“Culture of Permission and Trust”*

Allied Health MAU Model of Care

- *Adequate Resourcing*
 - Allows full utilisation of AH scope and skills
 - Proactive risk screening
 - Comprehensive assessment and intervention
 - Reduce risks associated with hospitalisation
 - Drive patient flow
 - Creates capacity for :
 - opportunistic patient education
 - Facilitate self management of chronic disease
 - Linkages with community services to reduce unnecessary hospital readmissions

Allied Health MAU Model of Care

■ *Standardised practice*

- Open referral
 - Combined daily MDT team meetings
 - Risk screening (eg. mouthcares, falls, GDS)
 - Combined MDT assessments (lean thinking, reduce duplication)
 - OT and PT
 - SW and CHIP nurse
 - SP and Dietitian
 - Early D/C risk screening
 - Team allocation of EDD
- Routine Work Practices :
 - Protected Mealtimes
 - Cognitive Screening > 65 (RUDAS, MMSE)
 - Mobility and balance assessment > 65
 - Malnutrition Screening
 - Mouth care assessment
 - Home environment assessment
 - ADL performance
 - Pharmacy medication history interview

Allied Health MAU Model of Care

■ *Care coordination*

- Avoid delays or obstacles of care
 - consistent referral processes,
 - proactively seek referrals
 - reduce delays / waits
- D/c planning starts at entry to service
- Electronic Patient Journey Board
- Assessments follow patients where they go
- Use EDD and Criteria Led Discharge to navigate the patient journey
- Electronic discharge summary
- Emphasis on utilisation of community services
- Track changes to patient functional level / circumstances

Allied Health MAU Model of Care

- *Governance*

- Patient flow is everybody's responsibility
- Implicitly express 'this is how we work'
- Know our core business
- Actively involved in operational meetings and decision making
- Contribute to and lead development of guidelines and procedures
- Informed and aware of key performance indicators

Challenges for AH in MAU

- Relentless patient flow
 - Risk of burn out
- Focus on assessment and planning
 - Risk of deskilling
- Balancing departmental responsibilities within own discipline
 - Senior clinician
 - management

Future

- Rapid growth of MAU model
- Extended Hours
- Exploring links with Community
- Interdisciplinary research
- National Benchmarks
- Specialty ??

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