Sydney Children’s Hospital MAU

Business Rules for the use of Medical Assessment Unit beds in C3W

Overview
The aim of the MAU for paediatrics patients is to improve the efficiency in the admission, care planning and discharge processes for patients (either through the emergency department or direct admissions) that require admission that is estimated to be longer than 24 hours and less than 48 hours.

8 beds on C3W will be the Medical Assessment Unit (MAU). These designated MAU beds will be beds 13 & 14, 15 & 16, & 17-20. The MAU beds will appear in iPM as C_MAU_3W.

The NUM of C3W will manage the MAU. Care of the MAU patients will be coordinated by the MAU CNC and/or allocated CNS.

Dedicated medical staff coverage will be provided to MAU. There will be support by the general medical teams and SCH after hours JMO teams.

Admission Criteria
Any patient admitted via the Emergency Department under the general medical team with an expected length of stay of < 48 hours.

Categories of patients admitted to the MAU will be respiratory patients (including asthma and bronchiolitis), patients with an infection (known or unknown source) and gastroenteritis.

Exclusion Criteria
Patients with an expected LOS > 48 hours.
Patients requiring critical care or HDU.
Patients requiring bipap/cpap, IV salbutamol or that have tracheostomies.
Patients with behavioural psychiatric/psychological conditions.
Long term oncology patients.

Staff Coverage
Nursing staff coverage: CNC Monday to Friday, CNS Saturday and Sunday
Medical Staff coverage: MAU Reg 0900 – 2000 Monday to Friday, 0900 – 1900 Saturday and Sunday.

Process
Paediatric patients will still have to be assessed by the appropriate medical staff before being accepted and transferred to the MAU. This may occur in the ED, clinics or consultant rooms (during business hours). Admission will be under the general paediatrician on call.

Requests for transfers in and out of the MAU will be via the bed manager during hours and the hospital coordinator after hours.
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Patients that are admitted to the MAU and then after assessment identified as requiring a longer length of stay will be transferred to an appropriate ward bed.

Admissions to the MAU during the hours of the extended medical cover (0800 – 2000) can be expedited from ED in consultation with the CNC or nurse in charge.

Patient admissions outside these hours will have to be fully assessed in ED prior to transfer to the MAU.

Use of beds for patients that do not meet the MAU criteria

When the hospital is at demand escalation stage 2 and there are patients waiting for beds in the ED that could be placed in the MAU beds approval to use the MAU for these patients must be obtained from:

In hours - Medical or Nurse Manager Patient Flow
After hours - executive on call or delegate.

In order to meet timelines for care the following should occur:

Within first 2 hours of patient arrival to the Emergency Department
- Clinical assessments completed by nursing and medical staff
- Commencement of management plan
- Initial diagnostic tests ordered and performed
- If patient presents within hours of medical and CNC coverage, admission may be expedited to MAU.

Within first 4 hours of patient arrival to MAU (0800 – 1800)
- All assessments initiated (including Allied health)
- Care management plans completed and communicated to patient/family/carer
- **Results of any tests checked.**
- Estimated date of discharge (EDD) allocated

Within first 24 hours of patient admission
- Review of EDD
- Multidisciplinary team co-ordination
- **All test results checked.**
- Discharge requirements determined and initiated (e.g. discharge letter, pharmacy, appliance centre equipment, transport, community services referral etc)
- Outpatient clinic / follow up arrangements post discharge determined and organised

Within first 48 hours of patient admission
- As above
- All care management activities determined and implemented
- Confirm and execute all care management activities
- Enable transition out of MAU (e.g discharge home, or to an alternative inpatient unit).