Mobile Assessment & Treatment Service (MATS)

GP Liaison by Stealth

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Dr Netta Duggan

MATS

- Innovative service
- Alfred initiative
- Funded by DHS
- Commenced 2001
- Clinical service provided by 1 EFT GP, 1 nurse manager and 1 nurse clinician.

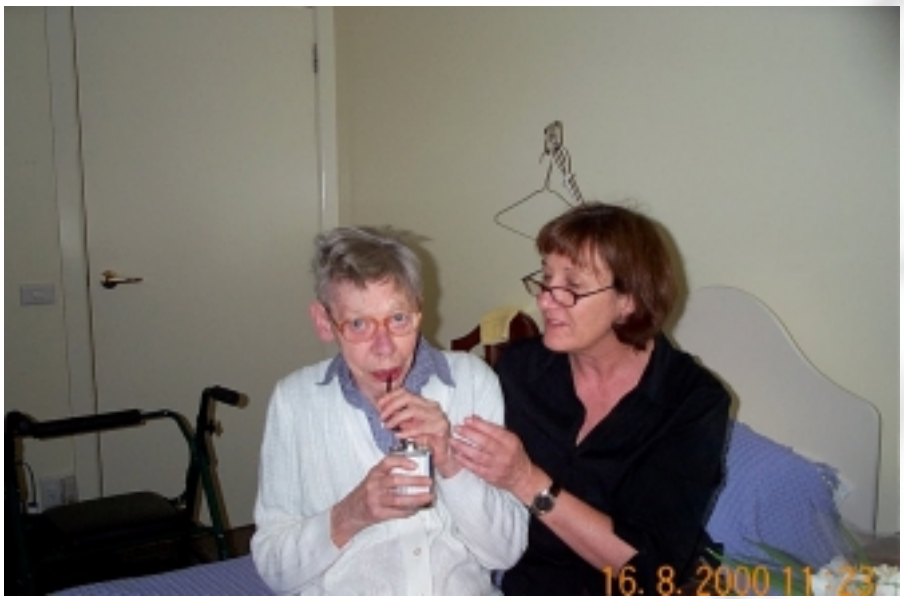
MATS Background

- Ageing population
- Growth in presentations and admissions to acute sector
- Concern about the safety and appropriateness of acute facilities to deal with the frail aged
- Availability of community based services

MATS Objectives

- Provide high standard care in the community for acutely unwell NH residents;
- More effectively utilise acute and community resources;
- 24 hr access to clinical expertise of The Alfred, integrated into community-based services;
- Minimise unnecessary ED presentations and admissions.

NH residents



- Old
- Highly dependant
- Access to full nursing care present
- In decline
- Disadvantaged by transfer
- Expensive to transfer

The Alfred

- Old
- Big
- Complex
- Highly specialised
- No culture of aged care
- No GPLO

MATS Experience

- 125 referrals from nursing homes;
  - 76 community referrals
    - 90% from nursing home staff, GPs
  - 49 in hospital referrals
    - 65% from ED
- Median age 82 yrs
- Cognitive impairment

Diagnosis – Community referrals

Infectious disease	*18%*
PEG/IDC complications	24%
Wound Mx	21%
Dying	18%
Trauma	6%
Other	13%

Barriers to 1° Care

NEED IDENTIFIED	POSSIBLE SOLUTIONS
Time and timeliness	Access locums
Technology/technician	Access to HITH
Information	IT advances
Expertise	Remote access
Medico-legal concerns	Colleagues
FUNDING	

Hospital referrals n=49

Assessment and treatment post-discharge	*29%*
Co-ordinate complex post-discharge care	18%
Complex information delivered to NH/GP – usually palliative care	45%
NH/GP request information	8%

Strategies used to enable Primary Care

- Notifying GP/NH of changed status and appropriate management
- Predict post discharge problem and provide clinical advice from team
- Reassure hospital staff that *their patient* is appropriately F/U
- Provide education and support
- Provide “goal of care” management plan

MATS: In Evolution

CONCEPT	EVOLUTION
Acute sector work	Primary care service
Part of PGMU	Links with but independent of AH units
HITH for NH	Supports GPs and NH to continue care
Service for >65yo	Restricted to NH residents

Successful Model

- Patient care
- Cost effective
- Popular
- Practical

But…….

- No clinical champion
- No GP champion
- Not purpose designed
- Boutique service
- Sustainability

Summary

- MATS is an innovative service established to solve a relatively minor problem;
- It has identified more significant problems;
- It has been able to address some of the problems identified by providing an effective GPL service;
- The risk is that it adds another layer to an already fragmented health care system.

Service
The
ALTER