An Environmental Scan of Medical Assessment Units in Canada

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TABLE 2.
Hospitals with Medical Assessment Units

Hospital Province	Unit Name	Unit Characteristics	Physician Staffing	Nurse Staffing	Dedicated Staff	Quality Indicators	Restrictions to Admission	Managed Protocols
British Columbia Established July 2011	Medical Assessment Unit	Separate Unit <48 hours 5 Beds unknown patients/month	No Dedicated Staff 0% coverage Emerg Physicians 0% coverage Internist/Hospitalist No Residents	Med/Surg Nurse 1:1 ratio	On Request: Physiotherapy Social Worker Pharmacist		No isolation area, No monitored beds	
Quebec Established 1998	Short Stay Unit	Separate Unit <48-72hours 12 beds 100 patients/month	1 physician (4 day rotation) Weekends 8-5pm 0% coverage Emerg Physicians 0% coverage Internist/Hospitalist No Residents	Ed Nurse Staffing 1:6 ratio	On Request: Physiotherapy Social Worker Pharmacist Geriatric Liaison Nurse	Length of Stay Patient Satisfaction	Must be stable patients, discharged in reasonable time, no mental health, no post op/surgical patients	DKA/ hypoglycemia
Ontario Established Sept 2011	Short Stay Unit	Separate Unit 48-72 hours 16 beds 106 patients/month	Team: Physician on call, Sr Resident always available, Jr Resident 0% coverage Emerg Physicians 100% coverage Internist/Hospitalist Residents	Combination Staffing Day: 4:1 Night 6:1	On Request: Physiotherapy Social Worker Dedicated: Step Down Care Facilitator	Length of Stay Readmission	No surgery, no mental health, 3 days or less, admission from home, no palliative	

Hospital Province	Unit Name	Unit Characteristics	Physician Staffing	Nurse Staffing	Dedicated Staff	Quality Indicators	Restrictions to Admission	Managed Protocols
Alberta Established Feb 2008	Medical Assessment Unit	Separate Unit <24hours 12-14beds 400 patients/month	No Dedicated Staff 0% coverage Emerg Physicians 25% Internist/75% Hospitalist Staffing Residents	GIM/FP/Combination staffing 1:4 ratio	Dedicated Physiotherapy Social Worker Nursing Attendant Unit Clerk	None	No Mental Health. no cardiac monitoring, no airborne isolation, no surgical patients	None
Alberta Established Jan 2011	Medical Assessment Unit	Separate Unit < 72 hours 27 beds 300 patients/month	1 Physician 0% coverage Emerg Physicians 100% Internist/Hospitalist Staffing Residents	ED/GIM/FP/ Combination staffing 1:5 down to 1:2	On Request Physiotherapy Social Worker Pharmacist Care Coordinator Respiratory Speech Language Pathologist	None	No Restrictions	Delirium
Ontario Established June 2011	Short Stay Unit	Separate Unit < 72hours 11 beds unknown patients/ month	Round morning, afternoon No physician on nights 0% coverage Emerg Physicians 100% Internist/Hospitalist Staffing Residents Residents (Family Medicine)	GIM staffing 3 days 1 night	Dedicated/On Request Social Worker Clinical Nutritionist Occupational Therapy + Therapeutic Touch	Length of Stay Patient Satisfaction	No mental health, < 48 hours No Telemetry	None
British Columbia Re-opened 2008	Emergency Holding Unit	Separate Unit ALOS 3.3 days 12+7 overflow beds 17.5 discharges /month	0% coverage Emerg Physicians 40% Hospitalist 40% Clinical Teaching Unit 20% Other	GIM staffing 1:3-4	Dedicated Physiotherapy Social worker Pharmacist Occupational Therapy	Quality Indicators used by Fraser Health	ELOS < 72 hrs, Age < 75, no high flow oxygen	All of the protocols

Hospital Province	Unit Name	Unit Characteristics	Physician Staffing	Nurse Staffing	Dedicated Staff	Quality Indicators	Restrictions to Admission	Managed Protocols
Quebec Established March 2008	Short Stay Unit	Separate Unit ALOS 65hrs 15 beds 120 patients/month	1 Physician on call 24hrs	ED Staffing 1:3 typical days 1:4 typical nights/ weekends	On Request Physiotherapy Social Worker Pharmacist 2 Orderly 1 Clerk	None	No Surgical, no mental health, no backlog, no pediatrics, no cardiac monitoring 3 isolation rooms	Constipation, end of life/terminal sedition
British Columbia Established November 2011	Diagnostic and Treatment Unit	Separate Unit 4 beds	100% ED Staffing Days – Added 5hrs for 24hrs Nights - Absorbed into Current Staffing	ED Staffing 1:4 Isolation 2:1 (safety)	On Request Physiotherapy Social Worker Pharmacist Nurse Practitioner	Length of Stay Readmission	10 pathway protocol	Chest pain, asthma, CPOD, Pneumonia, UGI/LGI bleed, Dehydration, Geriatric, Allergic, General/ Open, Renal/Colic