

---

# Mater Aged Care in an Emergency (MACIAE)

Initiative Type

Model of Care

Status

Deliver

Added

18 August 2017

Last updated

01 February 2022

URL

<https://test.clinicalexcelsence.qld.gov.au/improvement-exchange/maciae>

## Summary

MACIAE is a service dedicated to supporting aged care facility residents, their families, facility carers and general practice; with the goal of providing seamless care transition between primary and tertiary sectors in order to ensure the highest and safest standards of care with the upmost compassion and dignity. MACIAE is facilitated by specialist aged care clinical nurses who co-ordinate with all key partners involved in the care delivery of this unique population.

---

## Key dates

Jun 2016

Aug 2017

## Key Contacts

Sophie Shrapnel

0051

[paul.blee@hiu](mailto:paul.blee@hiu)

Clinical Coordinator

Mater Adult Hospital

(07) 3163 1969

sophie.shrapnel@mater.org.au

## Aim

To undertake an impact evaluation of a specialised nursing Aged Care Facility (ACF) resident case management service within Mater Hospital Brisbane.

## Benefits

- Optimal healthcare outcomes and communication pathways for ACF residents.
- Reduced ward admissions of ACF residents

---

## Background

MAICE has collected data on ACF residents presenting to the Mater Hospital Brisbane Emergency Department over a three year period (2014-17) on the care they receive whilst at the Mater and the effect that specialised hospital nurse coordination had on the patient group. Data has also been collected relating to the complexity of the of the population group and the environment they reside – frailty, delirium risk, cognitive Impairment, polypharmacy, fall risk, advanced care planning, reasons for transfer and risk of re-admission/re-presentation.

## Evaluation and Results

Preliminary findings suggest;

- Reduced ward admissions of ACF residents by 40% to currently less than 36% (national average 60%).
- Reduced LOS from 6.5 to 4.0 days (national average 8.0 days).
- 88% of patients commenced on an End of Life (EoL) pathway were able to be transferred to their environment of preference, rather than experience EoL as an in- patient (admission Av LOS 5-7 days).
- Initiation of over 300 Advanced Care Plans.
- Positive feedback from ACF staff, GPs, Mater staff
- Voluntary positive feedback from families
- Cost benefit analysis 10:1
- Requests from internal and external stakeholders to expand this service through other facilities.

## Lessons Learnt

The analysis of MACIAE demonstrates significant impact improvement outcomes for patients/carers, for the organisation and potentially the system. It also demonstrates the potential returns of targeted patient management programs which could be expanded to the other patient cohorts.

## Resources

---

[MACIAE Fact Sheet](#)

[MACIAE Fact Sheet Update 2017](#)

PDF saved 24/11/2024