

THE REGIONAL MUNICIPALITY OF YORK

**REPORT NO. 3
OF THE COMMISSONER OF COMMUNITY SERVICES,
HOUSING AND HEALTH SERVICES**

**For Consideration by
The Council of The Regional Municipality of York
on November 23, 2006**

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LONG TERM CARE ADMISSIONS – JANUARY TO JUNE 2006

1. RECOMMENDATIONS

It is recommended that:

1. Council receive and approve the following report regarding resident admissions to the Region Long Term Care (LTC) Facility Program for the period January to June 2006.

2. PURPOSE

This report is provided to Regional Council, as the governing body of the Regional LTC Facility Program, in accordance with applicable legislation in order to give details on the applications and admissions for the period of January to June 2006.

3. BACKGROUND

One hundred and sixty applicants to the Regional LTC Facility Program have been assessed and properly documented by the LTC Admissions and Discharge Committees for the period January to June 2006. They have been found to be eligible for admission under the terms of the *Long-Term Care Act* and meet the admission policies of the Region. Of the 160 approved applicants, 29 were approved for Cognitive Care, 88 were approved for Heavy Complex Care, 10 were approved for Psychogeriatric Care and 33 were approved for Convalescent Care.

4. ANALYSIS AND OPTIONS

This report includes all applicants assessed and approved by the LTC Admissions and Discharge Committees in the reporting period.

4.1 Wait List Administration and Triage

Once applicants are approved by the LTC Admissions and Discharge Committees, they are placed on a waiting list that is administered by the Community Care Access Centre (CCAC). Applicants on the waiting list are categorized and prioritized according to risk level, type of care, level of care and accommodation requested (private/standard) and are admitted according to that criteria. Those individuals who are at greatest risk and/or inappropriately placed in an acute care setting are given the highest priority for placement.

4.2 Reporting Period Admissions

Twenty-seven applicants from our approved waiting list were admitted to the LTC facilities in the reporting period January to June 2006.

In addition, 33 clients were admitted to and 26 were discharged from the Convalescent Care Program at the Newmarket Health Centre for the same reporting period. Since inception 2,147 acute hospital days have been avoided as a result of client placements in the Convalescent Care Program and 84.8% of clients have successfully reached their targeted goals for rehabilitation and discharge.

4.3 Primary Diagnosis of New Admissions

Admissions to LTC facilities are categorized by 16 primary diagnostic codes. It should be noted that more than one primary diagnosis can exist for each resident. The primary diagnoses of the 27 admissions in the reporting period were as follows:

Table 1
Primary Diagnoses of New Admissions to LTC Facilities
for Reporting Period January to June 2006

Primary Diagnosis	Incidence*
Mental Disorders	9
Circulatory Diseases	6
Neurological Motor Dysfunctioning	8
Musculoskeletal Disabilities	11
Neoplasms	0
Endocrine and Metabolic Disorders	4
Genitourinary Disorders	0
Pulmonary Diseases	1
Sensory Disorders	1

Infectious Diseases	0
Aids and Aids Related	0
Blood Diseases and Blood Forming Organ Disorders	1
Congenital Anomalies	0
Digestive Disorders	1
Skin Diseases	0
Other	1

*More than one primary diagnosis can exist for each resident.

4.4 Wait List Summary

There were a total of 160 applicants assessed and approved in the reporting period and 60 applicants from the approved wait lists were admitted. As at June 30, 2006 there were a total of 216 individuals/applicants on the LTC Facility waiting lists for the Regional LTC centres.

5. FINANCIAL IMPLICATIONS

There are no financial implications associated with this report.

6. LOCAL MUNICIPAL IMPACT

There is no local municipal impact associated with this report.

7. CONCLUSION

This report provides detailed and complete information regarding the approval of applications and admissions to the Region's LTC Facilities for the reporting period January to June 2006.

The Senior Management Group has reviewed this report.

Respectfully submitted,

**November 23, 2006
Newmarket, Ontario**

**J. Simmons
Commissioner of Community
Services, Housing and
Health Services**

(Report No. 3 of the Commissioner of Community Services, Housing and Health Services was adopted, without amendment by Regional Council at its meeting held on November 23, 2006.)