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ADMISSION TO LTC FACILITY PROGRAM

The Health and Emergency Medical Services Committee recommends the adoption of the recommendations contained in the following report, December 8, 2003, from the Commissioner of Health Services:

1. RECOMMENDATION

It is recommended that:

1. Health and Emergency Medical Services Committee receive and approve the following report regarding Resident Admissions for November 2003.

2. PURPOSE

This report is provided to Health and Emergency Medical Services Committee and Regional Council, as the governing body of the Regional LTC Facility Program, in accordance with applicable legislation.

3. BACKGROUND

Twenty-two applicants to the Regional LTC Facility Program have been assessed and properly documented by the LTC Admissions and Discharge Committee. 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.

Male	77	Cognitive Care
Male	85	Cognitive Care
Male	68	Cognitive Care
Male	88	Cognitive Care
Female	89	Cognitive Care
Female	90	Heavy Complex Care
Female	73	Heavy Complex Care
Female	83	Heavy Complex Care
Male	74	Heavy Complex Care
Female	81	Heavy Complex Care
Female	83	Heavy Complex Care
Female	88	Heavy Complex Care
Female	70	Heavy Complex Care
Female	79	Heavy Complex Care
Female	81	Heavy Complex Care
Male	70	Heavy Complex Care
Female	81	Heavy Complex Care

Male	93	Heavy Complex Care
Female	65	Heavy Complex Care
Male	80	Heavy Complex Care
Male	80	Heavy Complex Care
Female	82	Psychogeriatric Care

4. ANALYSIS AND OPTIONS

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

4.1 Wait List Administration and Triage

Once applicants are approved by the Admissions and Discharge Committee, 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 that 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

Four applicants from our approved waiting list were admitted in the month of November 2003.

Female	84	Heavy Complex Care
Male	87	Heavy Complex Care
Female	81	Heavy Complex Care
Female	84	Psychogeriatric Care

4.3 Primary Diagnosis of New Admissions

Admissions to Long Term Care Facilities are categorized by sixteen primary diagnostic codes. The primary diagnosis of the four admissions in the month of November 2003 were as follows:

- Mental Disorders x 1
- Musculoskeletal Disabilities x 1
- Genitourinary Disorders x 1
- Circulatory Diseases x 1

4.4 Wait List Summary

There were a total of 22 applicants assessed and approved in the reporting period and 4 applicants from the approved wait list were admitted. There are a total of 248 individuals/applicants on the LTC Facility waiting lists.

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 Long Term Care Facilities for the month of November 2003.

The Senior Management Group has reviewed this report.