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ADMISSION TO LTC FACILITY PROGRAM

The Health and Emergency Medical Services Committee recommends the adoption of the recommendation contained in the following report, January 15, 2004, from the Commissioner of Health Services and the following additional recommendation:

2. That the Admissions to Long Term Care Facilities be reported to the Health and Emergency Medical Services Committee every six months.

1. RECOMMENDATION

It is recommended that:

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

2. PURPOSE

This report is provided to the 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-five (25) 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	84	Cognitive Care
Male	68	Cognitive Care
Female	81	Cognitive Care
Male	70	Cognitive Care
Male	83	Cognitive Care
Male	66	Cognitive Care
Female	78	Cognitive Care
Male	72	Cognitive Care
Female	64	Heavy Complex Care
Male	73	Heavy Complex Care
Female	80	Heavy Complex Care

Male	79	Heavy Complex Care
Female	82	Heavy Complex Care
Male	79	Heavy Complex Care
Female	73	Heavy Complex Care
Female	89	Heavy Complex Care
Male	73	Heavy Complex Care
Male	66	Heavy Complex Care
Female	82	Heavy Complex Care
Female	91	Heavy Complex Care
Female	85	Heavy Complex Care
Male	70	Heavy Complex Care
Male	82	Psychogeriatric Care
Female	72	Psychogeriatric Care
Female	76	Psychogeriatric Care

4. ANALYSIS AND OPTIONS

This report includes all applicants assessed and approved 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

Five applicants from our approved waiting list were admitted in the month of December 2003.

Female	85	Cognitive Care
Female	83	Cognitive Care
Male	74	Cognitive Care
Female	69	Cognitive Care
Male	78	Heavy Complex 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 five admissions in the month of December 2003 were as follows:

- Mental Disorders x 4
- Endocrine and Metabolic Disorders x 1

4.4 Wait List Summary

There were a total of 25 applicants assessed and approved in the reporting period and 5 applicants from the approved wait list were admitted. There are a total of 243 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 December 2003.

The Senior Management Group has reviewed this report.