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LONG TERM CARE ADMISSIONS – JULY TO DECEMBER 2005

The Health and Emergency Medical Services Committee recommends the adoption of the recommendation contained in the following report, April 12, 2006, from the Commissioner of Community Services, Housing and Health Services:

1. RECOMMENDATION

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 July to December 2005.

2. PURPOSE

This report is provided to 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 July to December 2005.

3. BACKGROUND

One hundred and forty-six applicants to the Regional LTC Facility Program have been assessed and properly documented by the LTC Admissions and Discharge Committees. 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 146 approved applicants, 26 were approved for Cognitive Care, 111 were approved for Heavy Complex Care and 9 were approved for Psychogeriatric 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

Thirty-eight applicants from our approved waiting list were admitted in the reporting period July to December 2005.

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 38 admissions in the reporting period were as follows:

Table 1
Primary Diagnoses of New Admissions to LTC Facilities
Reporting Period July to December 2005

Primary Diagnosis	Incidence*
Mental Disorders	17
Circulatory Diseases	17
Neurological Motor Dysfunctioning	9
Musculoskeletal Disabilities	8
Neoplasms	6
Endocrine and Metabolic Disorders	5
Genitourinary Disorders	1
Pulmonary Diseases	0
Sensory Disorders	0
Infectious Diseases	0
Aids and Aids Related	0
Blood Diseases and Blood Forming Organ Disorders	0
Congenital Anomalies	0
Digestive Disorders	0
Skin Diseases	0
Other	0

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

4.4 Wait List Summary

There were a total of 146 applicants assessed and approved in the reporting period (July to December 2005) and 38 applicants from the approved wait lists were admitted. As at December 31, 2005 there were a total of 184 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 July to December 2005.

The Senior Management Group has reviewed this report.