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LONG TERM CARE ADMISSIONS – JANUARY TO JUNE 2005

The Health and Emergency Medical Services Committee recommends the adoption of the recommendation contained in the following report, August 10, 2005 from the Commissioner of Health Services:

1. RECOMMENDATION

It is recommended that:

1. Council receive and approve the following report regarding resident admissions to the Regional Long Term Care (LTC) Facility Program for the period January to June 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 January to June 2005.

3. BACKGROUND

One hundred and seventeen 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 117 approved applicants, 20 were approved for Cognitive Care, 90 were approved for Heavy Complex Care and 7 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

Forty-two applicants from our approved waiting list were admitted in the reporting period January to June 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 42 admissions in the reporting period were as follows:

Table 1
Primary Diagnoses of New Admissions to LTC Facilities for Reporting Period January to June 2005

Primary Diagnosis	Incidence*
Mental Disorders	20
Circulatory Diseases	15
Neurological Motor Dysfunctioning	10
Endocrine and Metabolic Disorders	5
Musculoskeletal Disabilities	5
Neoplasms	4
Blood Diseases and Blood Forming Organ Disorders	3
Digestive Disorders	3
Other	2
Pulmonary Diseases	2
Genitourinary Disorders	1
Sensory Disorders	1
Skin Diseases	1
Aids and Aids Related	0
Congenital Anomalies	0
Infectious Diseases	0

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

4.4 Wait List Summary

There were a total of 117 applicants assessed and approved in the reporting period and 42 applicants from the approved wait lists were admitted. As at June 30, 2005 there were a total of 144 individuals/applicants on the LTC Facility waiting lists for the Regional LTC centres. This is a decrease from 155 at the end of 2004.

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 2005.

The Senior Management Group has reviewed this report.