

Mental Health Services

Non-Acute Admitted Patient & Residential Client



Public Hospital Monthly Return

115 S5

Refer to the Agency Information Management System Manual for instructions on completing this form.

Agency:	
Output:	Period:
	Year:
	Current Month
Separations for Hospital Non-Acute Admitted Patients	
1 Hospital Based Rehabilitation	
2 Extended Care Inpatient Services	
3 Sub Total (= 1 + 2)	
Separations for Community Residential Clients	
4 Designated Community Care Unit	
5 Designated Nursing Home	
6 Sub Total (= 4 + 5)	
Separations for Other Admitted Patients	
7 Other Admitted Patients	
8 TOTAL (= 3+6+7)	
Patient days for Hospital Non-Acute Admitted Patients	
9 Hospital Based Rehabilitation	
10 Extended Care Inpatient Services	
11 Sub Total (= 9+10)	
Patient Days for Community Residential Clients	
12 Designated Community Care Unit	
13 Designated Nursing Home	
14 Sub Total (= 12+13)	
Patient Days for Other Admitted Patients	
15 Other Admitted Patients	
16 TOTAL (= 11+14+15)	
Average Available Beds for Month	
17 Hospital Based Rehabilitation Beds	
18 Extended Care Inpatient Services Beds	
19 Designated Community Care Unit Beds	
20 Designated Nursing Home Beds	
21 Other Non-Acute Beds	
22 TOTAL (= 17 to 21)	
Signed (Chief Executive Officer):	
Date:	