

Sub-Acute Services

Admitted Patients by Streams of Care

Public Hospital Monthly Return



305 S4

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

Agency:	
Output:	Period:
	Year:
	Current Month
Total Separations (Includes Hospital in the Home)	
1 Geriatric Evaluation & Management Program	
2 Designated Rehabilitation Program—Level 1	
3 Designated Rehabilitation Program—Level 2	
4 Designated Rehabilitation Program—Level 3	
5 Interim Care	
6 Geriatric Respite - Planned and Unplanned	
7 TOTAL (= 1 to 6)	
Total Patient Days (Includes Hospital in the Home)	
8 Geriatric Evaluation & Management Program	
9 Designated Rehabilitation Program—Level 1	
10 Designated Rehabilitation Program—Level 2	
11 Designated Rehabilitation Program—Level 3	
12 Interim Care	
13 Geriatric Respite - Planned and Unplanned	
14 TOTAL (= 8 to 13)	
Hospitals in the Home Separations	
15 Geriatric Evaluation & Management Program	
16 Designated Rehabilitation Program—Level 2	
17 Designated Rehabilitation Program—Level 3	
18 TOTAL (= 15 to 17)	
Hospitals in the Home Patient Days	
19 Geriatric Evaluation & Management Program	
20 Designated Rehabilitation Program—Level 2	
21 Designated Rehabilitation Program—Level 3	
22 TOTAL (= 19 to 21)	
Average Available Beds	
23 Sub-Acute Average Available Beds	
Signed (Chief Executive Officer):	Date: