



## Alternative Level of Care Categories and Definitions

# Definitions and Guidelines to Support ALC Designation in Acute Inpatient Care

## Introduction

Alternate Level of Care (ALC) is a system classification used in Canada that is applied when there is a mismatch between the intensity of care needs in relationship to the intensity of services/resources in that setting. This can occur in acute inpatient, mental health, rehabilitation, and chronic or complex continuing care. It has been recognized that there is a need for a standardized approach in considering patient status in ALC designation.

## Definitions

**Alternate Level of Care (ALC):** When a patient is occupying a bed in a facility and does not require the intensity of resources/services provided in that care setting.

### Contextual information

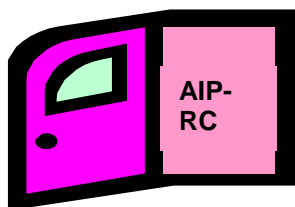
**Why:** The consistent use of ALC designation facilitates measurement of the access gap from one care setting to another. These gaps, once defined, inform system level planning to improve access.

**Where:** This guideline applies specifically to acute inpatient care.

**Who designates:** The patient must be designated ALC by the most appropriate care team member, which may be a physician, long-term care assessor, patient care manager, discharge planner or other care team member. The decision to assign ALC status is a clinical responsibility.

**When:** The ALC time frame starts on the date and at the time of designation as documented in the patient chart or record. The ALC time frame ends (1) on the date and at the time of departure from the ALC setting or (2) on the date and at the time the individual's care needs change such that the ALC designation no longer applies. For a patient who is ALC and reverts to acute status and then becomes ALC again, the patient's total count of ALC days should resume and not start again from 0. **Note: The discharge or transfer destination need not be known at the time of ALC designation.**

## Alternate Level of Care (ALC) Categories and Definitions



### AL 10 - Assessment in Progress (AIP-RC)

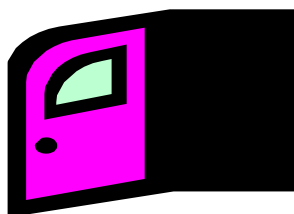
#### **Definition**

In order to determine the next most appropriate service an RAI-HC patient/client assessment has been ordered or is being conducted in hospital by the inter-professional team to determine whether the patient/client care needs indicate care in a Residential Care setting, and

- It is considered unsafe or inappropriate for the patient/client to have the assessment completed at home.

#### **Inclusions/Potential subcategories** (not exhaustive list)

- Includes patients/clients awaiting a RAI-HC Assessment to be completed in hospital
- Includes patients/clients for whom the RAI-HC assessment is in progress in hospital
- Includes patients waiting for assessment of eligibility



### AL 11 - Assessment in Progress (AIP-Other)

#### **Definition**

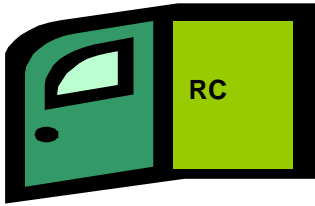
In order to determine the next most appropriate service a patient assessment has been ordered or is being conducted in hospital by the inter-professional team to determine whether the patient/client care needs indicate care in a specific setting or from a specific service. Examples of such settings and services include transitional or convalescent care, hospice, assisted living, subsidized housing, respite or private pay facility or home support, but this is not an exhaustive list. Furthermore

- It is considered unsafe or inappropriate for the patient/client to have the assessment completed at home.

#### **Inclusions/Potential subcategories** (examples, not an exhaustive list)

Includes patients/clients awaiting or undergoing:

- Assessment for transitional or convalescent care
- Assessment for hospice
- Assessment for assisted living
- Assessment for subsidized housing
- Assessment for respite
- Assessment for private pay facility or home support
- Assessment via family or case conference (e.g., “home first” conference, integrated care conference, discharge planning conference) - if wait is more than 48 hours)



## AL 0 - Awaiting Residential Care

### **Definition**

The inter-professional team has determined that the next, most appropriate care setting for the patient/client is residential facility care.

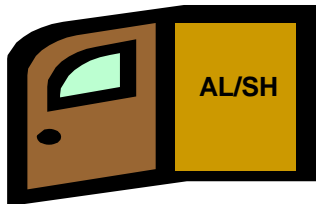
RAI-HC complete and any Home First Case conferences and approval processes for residential care have been completed. Referral is now with Priority Access.

### **Inclusions** (special populations)

- Patients/clients with behavioral needs who require a special care environment.
- Patients with complex respiratory needs such as ventilator dependent clients.
- Patients/clients who require peritoneal dialysis
- Patients/clients who have bariatric needs
- The patient/client is awaiting a private pay Residential Care facility

### **Potential subcategories**

- To be determined at a CoC/PHC level



## AL 1 - Awaiting Assisted Living or Supportive Housing

### **Definition**

The inter-professional team has determined that the next, most appropriate care setting/response for the patient/client is an Assisted Living facility or Supportive Housing.

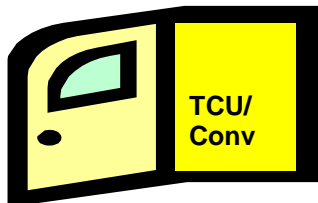
**Note:** In most circumstances it is most appropriate for the patient/client to be discharged home to await Assisted Living or Supportive Housing. Only in limited circumstances would it be appropriate for a patient/client to wait in an Acute Care setting for an Assisted Living or Supportive Housing vacancy.

### **Inclusions** (special populations)

- The patient/client will be discharged to a private pay Assisted Living facility

### **Potential subcategories**

- Awaiting Assisted Living
- Awaiting Supportive Housing
- Awaiting private pay Assisted Living



## AL 2 - Awaiting Transitional Care Unit or Convalescent Care

### Definition

The inter-professional team has determined that the next, most appropriate care setting/response for the patient/client is a Transitional Care Unit or Convalescent Care as the patient/client:

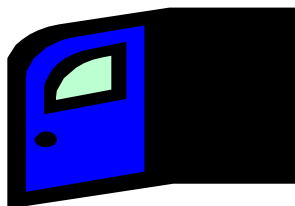
- Requires a period of time to improve functional abilities but cannot tolerate an acute level of rehabilitation and/or;
- Will be able to return home after a specified period of convalescence.

### Inclusions (not exhaustive list)

- Patients/clients who are expected to return home after a period of reconditioning in order to meet their functional goal.

### Potential subcategories

- Awaiting Transitional Care Unit
- Awaiting Convalescent Care Unit
- Receiving convalescent care in an acute care setting



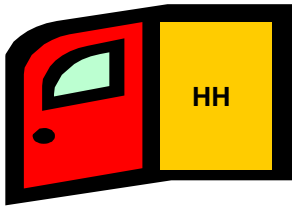
## AL 3 - Awaiting Hospice

### Definition

The patient/client has been assessed by the Palliative Access Line (PAL) Team as requiring hospice care in a Hospice Residence and it is unsafe or inappropriate for the patient/client to wait at home for these services to be arranged.

### **Note:**

- Patients/clients who are waiting to receive palliative/end of life care in a **Residential Care facility** are classified as ALC-RC
- Patients/clients who require palliative services in **Acute Care** to stabilize or treat symptoms are classified as Acute
- Patients/clients who require palliative care or hospice-type services at **home** are classified as ALC-HH
- Patients/clients who require hospice care and there is no hospice care available in the community, are classified as ALC-Hspc while they remain in Acute Care



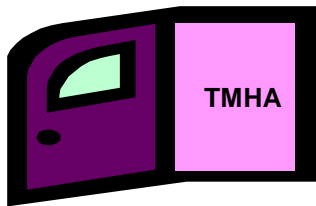
## AL 4 - Awaiting Home Health

### **Definition**

The inter-professional team has determined that the next, most appropriate care setting/response for the patient/client is in the home environment with interventions from skilled health professionals/personnel and it is unsafe or inappropriate for the patient/client to be discharged home until services are arranged.

### **Inclusions/Potential subcategories** (not exhaustive list)

- Home/environmental assessment
- Equipment or home modifications
- Home-based palliative care
- Other Home Health services:
  - Home Care Nursing
  - Occupational Therapist (OT), Physiotherapist (PT), Dietitian
  - Home support services
  - Home Intravenous (IV)
- Private arrangements in progress for care in the home



## AL 5 - Awaiting Specialized/Tertiary Mental Health & Addictions Services

### **Definition**

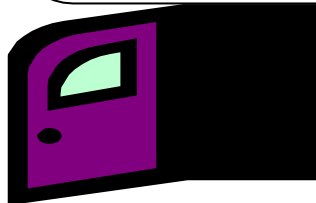
The inter-professional team has determined that the next, most appropriate care setting for the patient/client is a specialized/tertiary mental health & addictions setting and it is unsafe or inappropriate for the patient/client to wait at home for these services.

Note that the psychiatric ICU is an acute service, not included here.

### **Inclusions/Potential subcategories**

Tertiary Mental Health Facility (e.g., not exhaustive list):

- Willow Pavilion Unit
- BC Psychosis
- Trout Lake
- PHC Parkview or Alder/Langara Unit
- Gibsons Adult Rehab
- Burnaby Centre



## AL 6 - Awaiting Mental Health & Addiction Community Services

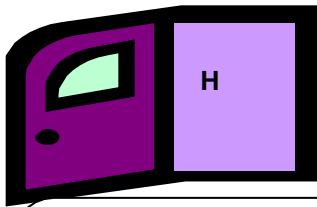
### **Definition**

The inter-professional team has determined that the next, most appropriate care setting for the patient/client is community based mental health or addiction services and it is unsafe or inappropriate for the patient/client to wait at home for these services.

Patients/clients requiring mental health or addiction services have agreed to participate in the recommended program.

### **Inclusions/Potential subcategories** (not exhaustive list)

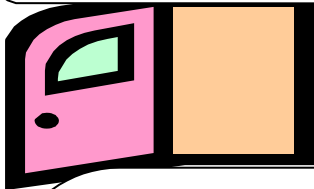
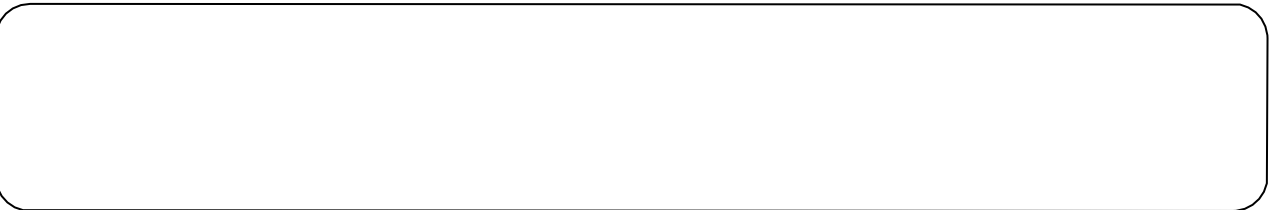
- MH Child & Youth
- MH Adult
- MH Older Adult
- MH Consumer
- MH Community
- MHA Child & Youth
- Alcohol & Addiction Services, including CTCT & Pennsylvania Suites
- MHA Ambulatory Clinics
- MHA Integrated Program
- MHA Housing
- MHA Community



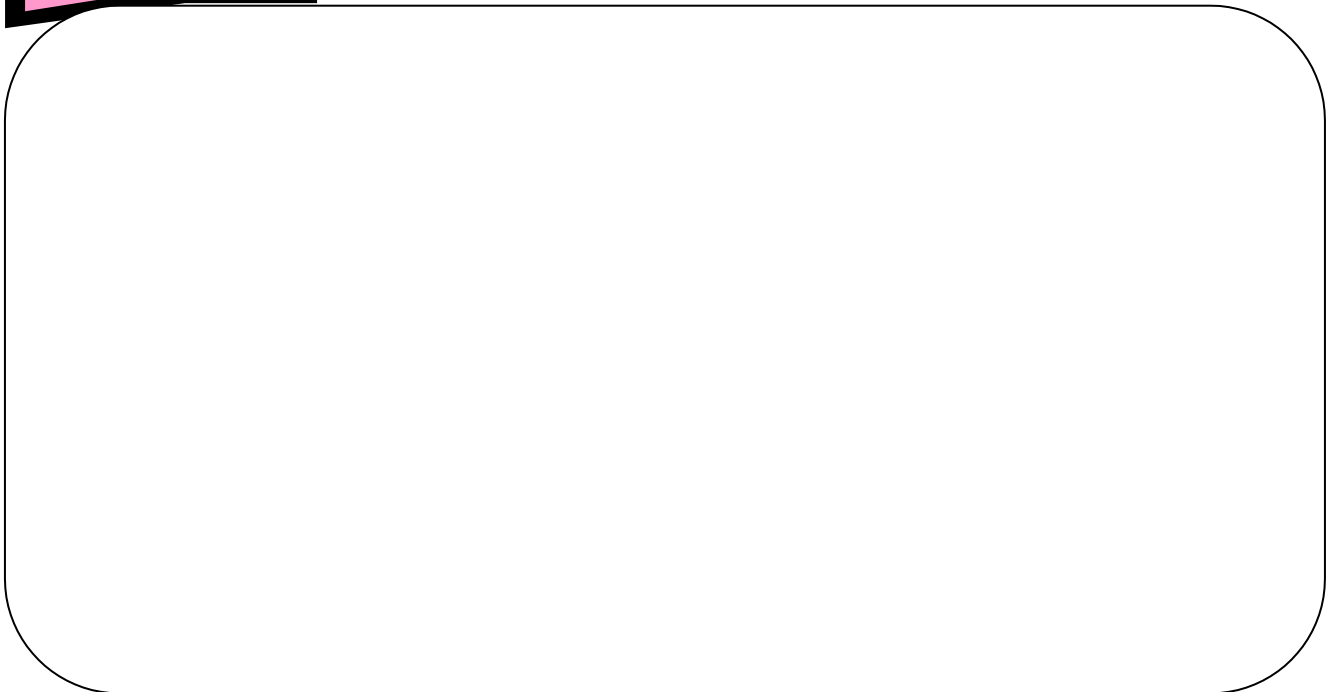
## AL 7 - Awaiting Housing

### **Definition**

The inter-professional team has determined that the next, most appropriate setting/response is discharge (and access to services is not the barrier), but the patient/client is unable to return to their previous living situation and arrangements are being made for housing.



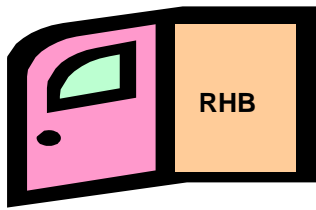
## AL 8 - Awaiting Family or Social Services



### **Inclusions** (not exhaustive list)

- Child/youth issues:
  - Adoption when it is inappropriate or unsafe to be arranged from home
  - Emergent apprehension or foster care
- IV therapy, wound, or other treatments, that could be managed with a home-based level of care but there is an external or environmental reason which poses unacceptable risk
- Unwilling to be discharged





## AL 9 - Awaiting Specialized Rehabilitation Services

### **Definition**

The inter-professional team has determined that the next, most appropriate care setting for the patient/client is a specialized rehabilitation setting and it is unsafe or inappropriate for the patient/client to wait at home for these services.

### **Inclusions** (not exhaustive list)

- awaiting a specialized rehab bed at GFS, HFH, LGH Acute Rehab
- awaiting a specialized rehab bed in FHA or other HA
- awaiting outpatient services while an inpatient at GFS (unable to go home to wait)

Appendix A  
 Non-ALC Categories

It is suggested that there also be provision for tracking of the following categories of waits that are not considered Alternate Level of Care waits

<b>Non-Alternate Level of Care Categories</b>
Waiting - for non-ALC transfer to acute facility destination or service
Awaiting transfer to Hospital-based Palliative Care
Awaiting transfer to Specialized Acute inpatient care
Awaiting Repatriation to Acute Care in another facility (whether same CoC, another CoC or another HA)
Awaiting transfer for Specialized Diagnostic or Intervention Procedure (e.g., MRI, CT, Cath Lab)
Awaiting transfer to Subacute unit