

OPERATIONAL INSTRUCTION

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The current Admission Policy for WA Hospitals, which is set out in Technical Bulletin 17/0 (Operational Instruction 0911/97), identifies a number of criteria for admission of patients. It also states that there may be instances where the treating clinician decides to admit a patient notwithstanding that none of the formal criteria are met, and lists examples of 'Exceptional Patients', such as an admission to monitor suspected premature labour.

These highlight the need for the treating clinician to be vigilant and sensitive to the special needs of individual patients. In particular, the usual admitting criteria may not always be present in a number of 'high risk' patient groups (see also HDWA's 'A Policy Framework for Hospital Discharge Planning', September 1992). These include (but are not restricted to) the aged and the very young, patients with past and/or present psychiatric problems, patients with ongoing disabilities, patients from different cultural backgrounds, and patients from rural or remote areas.

Accordingly, when making decisions about patient admission, the treating clinician should consider not only the full clinical details of each patient but be aware of the specific individual circumstances. By giving consideration to all factors, the treating clinician may, in fact, decide that optimal patient management requires an overnight stay in circumstances where none of the formal admission criteria are strictly present.

In such circumstances, the treating clinician's reasons for deciding to admit a patient should be documented clearly in the patient's medical record.

The hospital's admission protocols should meet both the patient's need to be provided with high quality care in a professional and compassionate manner, as well as management needs for efficient use of limited hospital resources.

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COMMISSIONER OF HEALTH