



Notification of Complex Continuing Care, Rehabilitation or Residential Hospice Bed Vacancy

Original Notification **Bed Flexing Update** (Only Applicable to GMCH)

Program Site:

- Grand River Hospital- Freeport
 Cambridge Memorial Hospital
 St. Joseph's Health Centre
 Groves Memorial Community Hospital
 Sunnyside Convalescent Care
 Innisfree House
 Lisaard House
 Hospice Wellington

Program Type:

- General Rehab
 Stroke Rehab
 Restorative Care
 Complex Medical
 Complex Vent
 End of Life
 Pain & Symptom Management

Bed Vacancy Room Number:	Available for Occupancy Date:
Bed Vacancy Date:	Bed Gender: <input type="checkbox"/> Male <input type="checkbox"/> Female <input type="checkbox"/> Any
Bed Vacated by Patient:	Infection Control Status:
Reason for Vacancy:	
Bed Matched to Patient:	
Other Details:	
Notified By:	Notification Date:

CCAC USE ONLY

PLACED PATIENT: **Patient Name** _____ **CHRIS #** _____ **Phone #** _____

Comments _____

Placement Coordinator _____ **Date** _____