

Provisions for the treatment and control of cancer, which include a treatment centre and a nursing home at Vancouver, consultative and diagnostic clinics located throughout the Province and a free province-wide biopsy service, are the responsibility of the British Columbia Cancer Foundation, an official agent of the Provincial Government. The Province pays the operating costs of the Foundation. The Province also helps finance voluntary programs concerned with the physical rehabilitation of paraplegics and cerebral palsied children, the care and treatment of arthritics, and the maintenance of blood transfusion services.

Institutions for the care of tubercular and mental patients and infirmaries for persons with incapacitating disabilities are operated by the Province. Indigents are hospitalized in these institutions at public expense while other patients pay in accordance with their ability. Rehabilitation and visiting homemaker services are available to tubercular patients.

Standard hospital care is available to all residents through a compulsory prepayment plan. The plan is financed by annual premiums, amounting in 1952 to \$30 for a person without dependants and \$42 for a person with one or more dependants, supplemented by provincial and municipal contributions and additional patient payments up to a family maximum of \$35 per year. Full medical, surgical and obstetrical, dental and optical care, and some drugs are provided old-age and blind pensioners, mothers' allowance recipients and their dependants, who are also covered by the hospital plan, their premiums being paid by the Province. A similar program, with costs of some services shared by the municipalities, is provided for social-assistance groups including provincial wards.

### Section 3.—Institutional Statistics\*

This Section provides a brief outline of hospital conditions in Canada. The figures included in the tables are for 1950 (except for mental institutions) while those published in the 1951 Year Book are for 1948. Figures for the intervening year may be obtained from the *Annual Report of Hospitals 1949* and the *Annual Report of Tuberculosis Institutions 1949*, available from the Dominion Statistician, Ottawa.

For statistical purposes hospitals are divided into three main groups on the basis of their admission policies—public hospitals, federal hospitals and private hospitals. Public hospitals are subdivided into acute disease hospitals, chronic disease hospitals, mental institutions and tuberculosis sanatoria. Hospitals with a relatively rapid turnover of patients, i.e., acute disease hospitals, are further subdivided according to the type of medical care provided into general and special hospitals. The latter group includes contagious diseases, women's, children's, convalescent and unclassified hospitals.

The number of hospitals in Canada which reported for 1950 is shown in Table 1, classified according to type and province. The significance of facilities in Canadian hospitals is shown in Table 2 which indicates the distribution of bed capacity in 1950, by provinces, according to type of hospital. A comparison of data in both tables will reveal the relative size of hospitals of various types.

\* Except where otherwise indicated, this Section has been revised in the Institutions Section of the Health and Welfare Division, Dominion Bureau of Statistics.