

6.8.2 Hospital statistics

Canadian hospitals are categorized, for statistical purposes, according to type of ownership — public, private or federal — and type of service — general, allied special (chronic, convalescent, rehabilitation, maternity, communicable diseases, children's or orthopedic), mental or tuberculosis. General hospitals, which account for the largest proportion of beds, are divided into teaching (full and partial teaching) and non-teaching (with and without long-term units) types, which are further subdivided into varying bed-size groups based on rated bed capacity.

Data pertaining to the number of hospitals in operation (Table 6.13), their classification and rated bed capacity (Table 6.14) were available as at January 1, 1972 at the time of preparation of this text but 1970 data were the latest available for all other tables in this Section.

Table 6.13 shows that the number and bed capacity of hospitals operating in Canada have remained relatively stable in recent years.

Table 6.14 gives the number and bed capacity of public, private and federal hospitals operating in Canada in 1971 and 1972, classified by province and by service type. In 1972 public hospitals accounted for 93.8% of total rated bed capacity of all hospitals followed by federal hospitals (3.6%) and private hospitals (2.6%). Corresponding 1971 proportions of 93.7%, 3.7% and 2.6%, respectively, were almost identical. The proportion of rated beds in general and allied special hospitals as a group has been increasing in recent years while rated bed capacity in mental hospitals and tuberculosis sanatoria on the whole has decreased. In 1972, general hospitals accounted for 57.4% of total rated beds as compared to 57.1% in 1971 (5.6 beds per 1,000 population in both years). Provincially, Saskatchewan had the highest ratio of general hospital beds per 1,000 population (7.4) in both 1971 and 1972 while Quebec and Newfoundland reported the lowest ratio with 4.8 in 1971 and 4.7 in 1972. The rated bed capacity of mental hospitals declined from 28.5% of total rated beds in 1971 (2.8 per 1,000 population) to 27.8% in 1972 (2.7 per 1,000 population); allied special hospitals went from 12.8% in 1971 (1.3 per 1,000 population) to 13.4% in 1972 (1.4 per 1,000 population); tuberculosis sanatoria constituted 1.6% in 1971 (0.2 per 1,000 population) declining to 1.4% in 1972 (0.1 per 1,000 population). Rated beds per 1,000 population for all hospitals as a group remained constant from 1971 to 1972 at 9.9.

Total adult and child admissions to all Canadian hospitals increased 4.2% between 1969 and 1970 reaching in excess of 3.6 million or 168.7 patient admissions per 1,000 population. A study of Table 6.15 reveals that admissions to public general hospitals, the major factor in this rise, increased by 4.4% from 1969 to reach almost 3.3 million in 1970; the number of patient admissions per 1,000 population rose from 147.8 to 152.1. Admissions to public mental hospitals increased 3.2% totalling more than 56,800 in 1970 as admissions per 1,000 population went from 2.6 to 2.7. Over the same period, admissions to public tuberculosis sanatoria dropped by almost 20.0% to 6,000, a decline per 1,000 population from 0.4 to 0.3. The average daily population in all Canadian hospitals decreased 0.3% from 178,559 in 1969 to 177,995 in 1970. Public general hospitals made up slightly more than one half (50.7%) of the 1970 average daily population compared with 49.4% in 1969. Public mental hospitals, the second largest group, accounted for 31.0% of the 1970 average daily population as against 32.5% in 1969. There was considerable variation in percentage occupancy by type of hospital in 1970; private mental hospitals as a group recorded the highest percentage occupancy, 98.6%, and public tuberculosis sanatoria the lowest, 55.8%.

The average length of stay of adults and children in public general hospitals decreased from 10.3 days in 1969 to 10.1 days in 1970 (Table 6.16). Average length of stay was significantly correlated to bed capacity in general hospitals, rising from 7.2 days in the 1-to-24-bed group of non-teaching general hospitals to 12.0 days in full-teaching general hospitals with 500 or more beds, a reflection of the fact that larger hospitals tend to provide more diversified and complex services. Provincially, average length of stay for public general hospitals as a group ranged from 8.8 days in Alberta to 10.8 days in New Brunswick and Quebec. Within the allied special group of hospitals there was considerable variation in the average length of stay, extending from 8.7 days for children's hospitals to 14.4 days for the "other" group (maternity, neurological, orthopedic and cancer hospitals) and then climbing sharply to 45.5 days for the convalescent/rehabilitation hospitals and to 219.7 days for