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INSTRUCTIONS AND DEFINITIONS
FOR THE
ANNUAL RETURN OF HOSPITALS

PART I
FACILITIES AND SERVICES, FORM HS-1
1959

General Directions

This booklet of Instructions and Definitions covers the Annual Return of Hospitals, Part I - Facilities and Services (Form HS-1). The Facilities and Services Return consists of a thirteen-page record of hospital operations during or at the end of the calendar year.

The return is printed on interleaf carbon paper in sets of six copies. All copies will be produced simultaneously on the typewriter, where possible, or by hand. Care should be taken to follow the special instructions regarding the use of interleaf carbon paper to avoid unnecessary marking or disfigurement of the form.

To assist in preparing the return in a first stage draft before the final six copies are completed, a "work-sheet" copy has been enclosed in this booklet. This work-sheet should be used for recording all original information in completing the return. Complete the return on the work-sheet before transferring the information to the interleaf six copy form. DO NOT forward the worksheet as a final copy of the return, but retain for reference purposes. If any changes in the recorded information must be made after completing the final six copies, make corrections by striking out the information to be deleted and typing in the correct information in the same cell of the form. Room has been provided for making such changes in every reporting item in the form.

On completion of the return, it should be certified by the hospital authority on page 1 as indicated. The hospital will then forward the five top copies to the hospital insurance administration authorities or the Department of Health of the province as applicable. The hospital will retain the sixth, bottom copy for reference purposes.

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INSTRUCTIONS AND DEFINITIONS

FOR THE

ANNUAL RETURN OF HOSPITALS

PART I - FACILITIES AND SERVICES

Introduction

The annual returns (Part I - Facilities and Services (Form HS-1); Part II - Financial (Form HS-2)) will provide basic information of value to the hospitals and the provincial governments. They will also serve the specific purposes of the two national agencies, the Department of National Health and Welfare and the Dominion Bureau of Statistics.

This booklet of instructions and definitions deals entirely with Part I - Facilities and Services Return; a separate booklet covers Part II - Financial Return.

In the case of a hospital listed in a schedule to a federal-provincial hospital insurance agreement, this return will fulfil a requirement for an annual return under the terms of the Hospital Insurance and Diagnostic Services Act. In all cases the return will fulfil the requirements of the Statistics Act. Generally, a completed annual return is required for every hospital in Canada (see definition of hospital, p. 2).

The facilities and services return must be certified as to its being a true statement by the responsible officer of the hospital, and in the case of a return for the Hospital Insurance and Diagnostic Services Act it must also be approved by the Provincial Plan authority.

The data will be used to compile national and provincial statistics as in previous years, although not every item will be aggregated in this way. The data for the hospitals will be analyzed for characteristics such as size-group, service type, and location, in terms of elements of the basic factors: accommodation, patient movement, regular and special services provided, staff, and training.

It is intended that each hospital prepare the return in detail. It is appreciated, however, that completion of this comprehensive return may require considerable time on the part of hospital staff. All items have been carefully evaluated from the standpoint of practicability and usefulness and it should be kept in mind that, as indicated, this one return will serve a number of purposes.

Should the hospital find it impossible to complete any section of the return in full some indication of the reason should be given (see also p. 17). In some instances the hospital may not operate a service of the specified type, in others it may be considered impossible to

provide the desired statistics; in any case please indicate clearly any reasons for difficulties in completing the return.

In some provinces certain sections of the return may be completed for the hospital by the provincial hospital insurance administration. Information concerning this arrangement will be provided by the provincial authority.

The return generally is for the complete specified calendar year, but some items are as at December 31st or other specified dates.

Notes on any significant changes in administration, organization, and/or operation of the hospital that have occurred during the year should form part of the return and be contained in an accompanying statement (six copies) giving the effective date, the duration, and nature and extent of the change.

Include specifically:

- (a) changes in bed accommodation through opening or closing of wards, wings, or floors of the hospital;
- (b) changes in salary scales for any large group of hospital personnel, or changes in other major items of cost;
- (c) major changes in staff composition, size, or conditions of employment.

In general, explanatory comments regarding aspects of the administration and operation of the hospital, relevant to this return, will be welcome. Such comments, and the statement referred to above regarding significant changes during the year, should be recorded on the blank space provided for the purpose on pages 1 and 13 of the return. If the space provided is not sufficient complete your statement on additional sheets uniform in size with the return (six copies).

Since the year 1959 will be the first year for which this return will be used, it is anticipated that some deficiencies, either in the returns themselves or in the Instructions and Definitions, may become evident. Your comments in this connection will be appreciated.

This booklet follows the outline of the form, and the alphabetic and numeric item designation system. The marginal line number is intended primarily for reference purposes.

Definition of "Hospital"

For purposes of this return, a hospital is defined as an institution which is operated for the medical, surgical, and/or obstetrical

care of in-patients, and which is licensed or approved as a hospital by the federal and/or a provincial government, or by a municipality duly authorized under the laws of the province.

Specifically excluded from this definition are institutions primarily for tuberculosis, mental disease, and mental defect (other forms of annual reporting are required for such institutions under the Statistics Act). Also excluded are institutions, the purpose of which is primarily the provision of custodial and/or domiciliary care (these may include nursing homes, homes for the aged, and infirmaries).

Notwithstanding the foregoing, any and all hospitals or other facilities listed in the schedule to an agreement under the Hospital Insurance and Diagnostic Services Act are considered to be hospitals for the purpose of this return.

ANNUAL RETURN OF HOSPITALS

PART I - Facilities and Services

(PAGE 1 OF FACILITIES AND SERVICES RETURN)

Name and Address

Enter the full name and street address of the hospital^{1/}. Where this does not represent the postal address, show also the postal address. The name of the hospital reporting must be entered at the top of each page of the annual return.

(PAGE 2 OF FACILITIES AND SERVICES RETURN)

I. CLASSIFICATION OF HOSPITAL

This section serves to identify the hospital in terms of (A) provincial approval, (B) status under the Provincial Hospital Insurance Plan, (C) type of service, and (D) ownership and operation. Complete all four subsections of the form for your hospital, i.e., each hospital will be classified under each of the four categories. The classification will be as at December 31 of the year covered by the return.

A - Provincial approval

In this subsection, indicate by a check mark in the appropriate space, whether the hospital is recognized by the province as a public hospital, or as a private hospital, or falls into neither category (e.g., Federal Government hospitals), in which case it should be classed as "Other".

Public - Applies to a hospital recognized by the province as a "public hospital". Such a hospital generally is not operated for profit, and accepts all patients regardless of their ability to pay.

Private - Applies to a hospital recognized by the province as a "private hospital". Such a hospital generally restricts its admissions to patients paying for the care provided at rates determined by the management.

Other - Refers to a hospital which is not officially designated as public or private by the provincial authority.

^{1/} The term "the hospital", as used throughout these Instructions and Definitions means the reporting hospital.

I. CLASSIFICATION OF HOSPITAL - continued

B - Status under Provincial Hospital Insurance Plan

Each province with a hospital insurance plan has the responsibility for negotiating the terms of payment with each hospital under the plan. Check the item describing the basis of payment to your hospital from the Hospital Insurance Plan.

Budget review - Applies to a hospital which submits an annual budget to the provincial hospital insurance administration for approval, and receives regular payments, based on that budget, for providing service to hospital insurance beneficiaries.

Contract - Applies to a hospital which enters into an agreement with the provincial hospital insurance authority to accept payment for service provided to beneficiaries under the Hospital Insurance Plan at rates set under contract with the Provincial plan.

Not applicable - Applies to a hospital which has no arrangement with the hospital insurance authority of the province for payment for care provided to beneficiaries of the Plan, or to a hospital in a province where there is no provincial plan in operation.

C - Service

A hospital may undertake to provide primarily for the treatment and care of a particular type of patient or condition, or may provide for a wide range of conditions; in this subsection indicate the service category of the hospital by a single check mark, or by specifying in "Other".

General - Applies to a hospital which provides for the treatment and care of all types of diseased or at least a wide range of conditions; for purposes of this return women's and children's hospitals will be classified as "general", unless they restrict admissions to particular conditions in these types of patients, respectively.

Chronic - Applies to a hospital which primarily provides for the treatment of conditions requiring long-term care.

Convalescent - Applies to a hospital which primarily provides for the treatment of patients who are considered to be in the recovery stage of an illness, especially where this is a long-term process.

Maternity - Applies to a hospital which primarily provides for the treatment and care of obstetrical patients and newborn infants.

Other - Applies to a hospital which primarily provides for the treatment of a particular type of disease, condition, or case; the

I. CLASSIFICATION OF HOSPITAL - continued

C - Service (concluded)

relevant type is to be specified in the return. Examples of such specified categories may include rehabilitation, geriatric, communicable disease, orthopaedic, neurological, and cancer hospitals. This category also may apply to a hospital which provides a combination of various types of service and cannot be classified in any one of the foregoing categories.

D - Ownership and operation

Consider the ownership and operation of the hospital as separate aspects of hospital functioning and check the appropriate category for each column heading as defined below.

Ownership - The owner of the hospital is the person, group of persons, agency, or corporate body, in whose name the lease to the real estate is held; or, if there is no lease, the registered owner according to the deed. Check only one appropriate category in the column under "Ownership", in accordance with the definitions below.

Operation - Refers to the person, group of persons, agency, or corporate body which bears the day-to-day responsibility for ensuring that the hospital is able to function and provide service. Check only one appropriate category in the column under "Operation", in accordance with the definitions below.

(1) Voluntary - Applies to a hospital owned and/or operated by a non-governmental agency to serve the community on a non-profit basis.

(a) Lay corporation - Applies to a voluntary hospital owned and/or operated by a voluntary lay body (under provincial laws and regulations). For purposes of this return this category excludes hospitals maintained by industrial or commercial corporations.

(b) Religious organization - Applies to a voluntary hospital owned and/or operated by a religious organization (under provincial laws and regulations).

(2) Municipality, union, or hospital district - Applies to a hospital owned and/or operated by cities, towns, counties, municipalities, or other municipal governments, or by unions or combinations of municipal governments, or by districts or other bodies which are empowered to levy taxes or to otherwise operate after the fashion of municipalities. Municipal operation, as well as ownership, would be indicated if the members of the governing body of the hospital are appointed, elected, or otherwise controlled by the municipal body or electorate. (The Charter of the hospital should be referred to in cases of doubt.)

I. CLASSIFICATION OF HOSPITAL - concluded

D - Ownership and operation (concluded)

(3) Provincial government - Applies to a hospital owned and/or operated by a branch, division, or department of a provincial government or a territorial government, or by a provincially controlled institution, such as a university.

(4) Federal government - Applies to a hospital owned and/or operated by the Government of Canada; operation will generally be by one of the departments, e.g., Veterans Affairs, National Health and Welfare, or National Defence.

(5) Proprietary - Applies to a hospital owned and/or operated by an individual or group (under provincial laws) on a profit-making basis.

(6) Industrial - Applies to a hospital owned and/or operated by an industrial or commercial enterprise (under provincial laws) to provide hospital care to employees only, or to employees and other members of the industrial community.

II. BEDS

This section is designed to report the hospital's accommodation for patients, in terms of beds and cribs for adults and children and bassinets for newborn. Included are the distribution of rated bed capacity and beds set up (terms defined below) by wards or units classified by the type of care provided, and the distribution of beds set up by room size and pay status of the accommodation. For this purpose bassinets will include incubators, and beds need not be distinguished from cribs. It is important to distinguish carefully between rated bed capacity, based on established standards of floor space area per bed (see below) and beds set up for use (see p. 9). The detailed information on both rated bed capacity and beds set up is to be as at midnight on December 31 of the reporting year, but in addition the hospital is to report total beds and cribs set up and total bassinets for newborn set up at specified quarterly dates during the year.

Rated Bed Capacity

Under "Rated Bed Capacity" show the number of beds, or of bassinets for newborn, that the hospital (or unit of the hospital) is designed to accommodate, on the basis of established standards of floor space area per bed or per bassinet.

In general, the federal minimum standards established for purposes of the Federal-Provincial Hospital Construction Grant are to be used (as specified on p. 9). However, if the hospital bed capacity is rated according to provincial standards which are more restrictive (i.e., result in fewer beds) than the federal minimum standards, then the rated bed capacity based on such provincial standards may be reported here. Where provincial standards are more generous (i.e., result in more beds), then the federal minimum standards should be used. In any case in the space provided, specify the standard on which the reported rated bed capacity is based.

Where the rated bed capacity has previously been computed for present accommodation, according to the standards specified above, a new estimate need not be made.

In computing the rated bed capacity, the free floor area usable for bed accommodation within the room is to be divided by the specified number of square feet per patient for the corresponding type of patient area. Note that the estimates are to be made room by room and expressed as the minimum whole number of beds which the unit is designed to accommodate on this basis, i.e., where a unit consists of several rooms the rated bed capacity is to be computed for each room separately and the resulting total number of beds are to be added for the unit; partial bed areas are not to be included and are not to be accumulated.

II. BEDS - continued

Rated Bed Capacity (concluded)

The federal minimum standards for floor areas for determining rated bed capacity are as follows:

<u>Type of patient area</u>	<u>Sq. ft.</u>
Single patient's room	100
Multiple bed room	80
Child's single room	80 (min. width 8 ft.)
Children's ward	50
Infant (not in nursery)	30
Bassinet (in nursery for newborn)	24

Beds Set Up

Under "Beds Set Up" show the number of beds (and cribs) actually set up in the hospital, and available for accommodation of in-patients as at the specified dates, whether or not actually occupied by a patient at that time; note particularly that the following items are to be included or excluded as specified:

<u>Include as beds</u>	<u>Exclude as beds</u>
(1) Observation ward and quiet-room beds;	(1) Labour or caseroom beds;
(2) Beds for sick staff if in the hospital proper and also available to patients;	(2) Beds in diagnostic or treatment areas designed for patient rest immediately after receiving service;
(3) Isolation beds;	(3) Beds in out-patient and emergency departments for rest only;
(4) Beds in corridors, sunrooms, etc.;	(4) Beds in employee quarters used for sick staff only;
(5) Bassinets set up outside the nursery and normally used for infants other than newborn.	(5) Anaesthesia recovery beds;
	(6) Beds in storerooms and workshops.

The count of bassinets for newborn set up should include all bassinets and incubators set up if normally used for newborn, whether located in the newborn nursery or not, e.g., if in rooms of maternity

II. BEDS - continued

Beds Set Up (concluded)

patients (see p.12 for definition of newborn).

A - Type of unit

In this subsection, both Rated Bed Capacity and Beds Set Up will be reported according to the type of service of the unit in which the beds are located. For purposes of this subsection, a unit is a group of beds or rooms, under an organized nursing staff, which is primarily for patients with a specified type of disease or condition.

Opposite Medicine-surgery enter all beds in surgical and/or medical wards or units as well as beds for general care.

Opposite each of the unit types, Obstetric, Orthopaedic, Paediatric, Psychiatric, Tuberculosis, and Isolation, enter all beds in wards or units for the particular category of patient indicated. In the case of a maternity, orthopaedic or children's hospital, etc., all beds in the hospital may be entered under the appropriate category.

Opposite Long-term, enter all beds in wards or units for chronic or long-term care patients, or for a mixture of long-term patients such as chronic, convalescent, geriatric, and rehabilitation. As indicated in the footnote on the schedule, when a unit is separately identifiable as chronic, convalescent, geriatric, rehabilitation, etc., the beds should be entered opposite Other and the type of unit should be specified.

In the category Other, specify and enter all beds in special types of units, not already mentioned, such as neurosurgery, ophthalmology, cardiology, etc., and also specialized long-term units as described in the preceding paragraph.

B - Quarterly summary

To provide data on any variation in beds set up during the year (since December 31 is usually not representative of the full year), total beds (and cribs) set up and bassinets for newborn are to be reported for the quarterly dates: March 31, June 30, September 30, December 31. The December 31 data correspond to the totals in Column 2, section II, A.

C - Type of accommodation

In this subsection enter the number of Beds and cribs set up, as at midnight December 31, distributed by bed-size of room and by pay status of the room (standard or preferred accommodation). Beds not in

II. BEDS - continued

C - Type of accommodation (concluded)

rooms or ward quarters (e.g., in sunrooms, corridors, etc.) will be included as "Beds not in rooms" and in the total counts of beds for each type of accommodation, but not in the size of room breakdown. The total bed count will balance against the total count for beds set up in II,A. The "Bed-size of room" is according to beds set up as at midnight December 31; type of accommodation is as follows:

Standard ward - Bed accommodation which the hospital normally allocates to standard ward patients.

Preferred accommodation - Bed accommodation which the hospital normally allocates to semi-private or private patients.

III. UTILIZATION DATA (service statistics)

(PAGE 3 OF FACILITIES AND SERVICES RETURN)

This section is designed to provide basic data on the movement of in-patients during the year; the distribution of patient days during the year by type of accommodation charged and by responsibility for payment; and the distribution of separated patients, and the corresponding patient days, by length of stay. For purposes of this return, the following definitions apply:

In-patient - A patient who is duly admitted to the hospital, and to whom a bed or bassinet has been allocated. This category excludes stillbirths, as well as psychiatric patients attending a day or night centre attached to the hospital.

Adults and children - All in-patients except newborn, as defined below.

Newborn - For purposes of this return an infant in-patient newly born in the hospital is a newborn during the period of his stay for which newborn rates are charged.

Admission - The formal acceptance and reception of a person (including an infant born alive in the hospital) as an in-patient. Reception involves the allocation of a hospital bed or bassinet to the patient. A person is counted as an admission each time he is formally admitted to the hospital, during the year. Admission of a newborn is deemed to occur at the time of birth. (Patients who leave a hospital to go directly to another hospital for in-patient care, i.e., transfers-in, are to be included as admissions of the receiving hospital.)

Discharge - The official release by the hospital of a live in-patient (this should not be confused with the medical discharge). (Patients who leave a hospital where they have received in-patient care to go directly to another hospital, i.e., transfers-out, are to be included as discharges of the hospital they leave.)

Death - The cessation of life of an in-patient after admission and before discharge. This category excludes stillbirths.

Separation - The discharge or death of an in-patient.

Patient day - The period of service to an in-patient between the census-taking hours on two successive days; the day of admission is a patient day, but the day of discharge or death is not a patient day; when the patient is admitted and discharged on the same day, only one day is to be counted.

III. UTILIZATION DATA (service statistics) - continued

A - Movement of in-patients (excluding stillbirths)

In this subsection, record the basic in-patient data, in accordance with the preceding definitions and the following directions:

(1) In hospital at start of year - Enter here the number of adults and children (Col.1), of newborn (Col.2), and the total of both groups (Col.3), assigned to a hospital bed or bassinet as at midnight on December 31 of the report year. Include any in-patient who was visiting out of hospital temporarily, but who had not been discharged.

(2) Admissions during year - Enter here the number of adults and children (Col.1), the number of newborns (Col.2), and the total of both groups (Col.3), who were admitted to the hospital during the year.

(3) Total under care during year - This is the sum of (1) the in-patients who were in hospital at the beginning of the year and (2) the admissions to the hospital during the year.

(4) Discharges during year - Enter here the number of adults and children (Col.1), of newborns (Col.2), and the total of both groups (Col.3), who were discharged alive during the year.

(5) Deaths during year - Enter here the number of adults and children (Col.1), of newborns (Col.2), and the total of both groups (Col.3), who died within the hospital during the year. Stillbirths should not be included in this item.

(6) Total separations during year - This is the sum of (4) discharges and (5) deaths during the year.

(7) In hospital at end of year - Enter here the number of adults and children (Col.1), of newborns (Col.2), and the total of both groups (Col.3), who were assigned to a hospital bed or bassinet as at midnight on the last day of the report year. This number should coincide with the number obtained by subtracting (6) "Total separations during year" from (3) "Total under care during year".

B - Distribution of patient days during year for adults and children

In this subsection show the distribution of patient days during the year for adults and children (in-patients) by type of accommodation charged and by responsibility for payment; these terms being defined as follows:

(1) Type of accommodation charged - According to the rate of the gross charge actually made by the hospital to the patient's account

III. UTILIZATION DATA (service statistics) - continued

B - Distribution of patient days during year for adults and children
(continued)

for his period of stay during the year (whether or not the patient occupied accommodation of this type for all the patient days involved). Patients charged for more than one type of accommodation will have their patient days allocated accordingly.

(a) Standard ward - Enter patient days during the year for which the hospital has charged the patient's account at the standard ward rate only.

(b) Semi-private room - Enter patient days during the year for which the hospital has charged the patient's account at the semi-private rate (whether or not the full or differential amount was charged).

(c) Private room - Enter patient days for which the hospital has charged the patient's account at the private rate (whether or not the full or differential amount was charged).

(2) Responsibility for payment - This subsection shows the distribution of patient days according to the agency or person to whom the charge for the patient days of care is made. In provinces with a plan under the Hospital Insurance and Diagnostic Services Act, "the charge" means the basic daily payment for each day of care; it does not refer to authorized special charges or additional charges for preferred accommodation.

For purposes of this return "Resident of the province" means, Hospital Insurance and Diagnostic Services Act, Regulations 3(2), 3(2A), a person legally entitled to remain in Canada, who makes his home, and is ordinarily present in the province; this does not include a tourist, transient, or visitor to the province. A person who moves to another province is deemed to continue to be a resident of the original province for such length of time, not exceeding three months, as he is entitled under the law of that province to receive insured services.

A non-resident of the province is a person who does not meet the foregoing definition of a resident of that province.

An insured resident is a resident of the province who is eligible for and entitled to insured services under the Provincial Plan.

An uninsured resident is a resident of the province who does not meet the foregoing definition of insured resident.

(a) Provincial Plan - Enter patient days charged to the Provincial Hospital Insurance Plan (or to a municipality, as part of the Hospital

III. UTILIZATION DATA (service statistics) - continued

B - Distribution of patient days during year for adults and children (concluded)

Insurance Plan) of the province in which the hospital is located.

(b) Federal government - Enter patient days charged to the Department of National Health and Welfare, the Department of Veterans Affairs, the Department of National Defence, or any other federal government department or agency, whether or not the patient is a resident.

(c) Workmen's compensation boards - Enter patient days charged to any Workmen's Compensation Board, whether or not the patient is a resident of the province.

(d) Non-resident of the province - Enter patient days charged directly to a non-resident of the province, or to a voluntary prepayment agency, or provincial plan of another province, on behalf of a non-resident of the province (see definition on p. 14).

(e) Uninsured resident of the province - Enter patient days charged directly to a patient, or to a voluntary prepayment agency or municipality on behalf of a patient, who is either a resident of the province if it is a non-participating province, or has attained residence status in a participating province but who is not insured under the Provincial Plan. Do not include those patient days which were charged to any Workmen's Compensation Board or to the Federal Government.

(f) Insured resident, care not responsibility of Provincial Plan - Enter patient days not included in (b) or (c) above and charged directly to an insured resident patient, or to a voluntary prepayment agency on behalf of such a patient, because the Provincial Plan deems the care provided to be either unnecessary or not hospital care recognized by the Plan.

C - Total patient days during year for newborn

Enter here the total patient days for newborn, accumulated during the year.

D - Distribution of separations (discharges plus deaths) and their patient days of stay since admission

In this subsection, record the number of patients (adults and children, and newborn) separated from the hospital during the year (as in A(6)) and their accumulated patient days since admission; both sets of data are to be distributed according to the length-of-stay groupings in the table.

III. UTILIZATION DATA (service statistics) - concluded

D - Distribution of separations (discharges plus deaths) and their patient days of stay since admission (concluded)

Under the heading "Number of separations", show the distribution of in-patients separated from the hospital during the year (total separations - A(6)), according to each patient's length of stay in the hospital since admission, even if admitted in a previous year. Each separated in-patient must be allocated to a length-of-stay grouping by individual days up to 10 days, or by broader groups as indicated, in accordance with the number of patient days since admission. Adults and children separated during the year are to be entered in Column 1 and newborn separations in Column 2.

An in-patient who has been separated from the hospital more than once during the year will be considered independently for each separation; i.e., he will be entered in the length-of-stay grouping according to the duration of his first stay and will be counted again according to the number of patient days of the second stay, and so on.

Under the heading "Total patient days, since admission, of separations", show the distribution of the total patient days of in-patients separated during the year, according to length of stay in hospital of each separation since admission (even if in a prior year).

Enter, in Column 3 for adults and children and in Column 4 for newborn, the total number of patient days for all separated patients in the corresponding length-of-stay group since admission. (For single day groups, 1 to 10 days, the patient days will, of course, be the product of the number of days' stay and the number of separations.) The patient days of in-patients separated more than once during the year will be treated independently for each separation.

IV. DEPARTMENTAL SERVICE STATISTICS

This section of the return consists of a report of special services provided and activities undertaken by various special departments or units of the hospital. Do not include activities not under direct administration of the hospital staff, e.g., those operated by volunteers; exclude also services provided by a unit or staff not operating within the hospital's budget.

If the departmental service or activity was not available at all, indicate this by writing N.A. in the appropriate space. In completing the detail of any subsection, indicate the absence of a particular service or activity by placing a dash in the space for reporting that item on the return. It will be noted that in subsections A, C, and F, separate column headings have been provided for reporting services to in-patients and to out-patients, and in subsection A for services with respect to work referred in. For laboratory and radiological departments a separate count is to be made for work referred in to your hospital and referred out by your hospital.

In this section the following definitions will apply:

In-patient - A patient duly admitted to the hospital and to whom a bed or bassinets has been allocated (as on p. 12).

Out-patient - A patient who receives services of the hospital in attendance at the hospital, under the direction of the professional personnel of the hospital, but who is not admitted as an in-patient.

Referred in - A specimen, sample, or film referred in to the hospital for professional service on behalf of a person who is not in attendance at the hospital for the service, i.e., on behalf of a person who is neither an in-patient nor an out-patient.

(PAGE 4 OF FACILITIES AND SERVICES RETURN)

A - Laboratory

In this subsection, laboratory work activities are to be measured and reported according to the schedule of unit values for clinical laboratory procedures used in your hospital (indicate schedule used). For each laboratory procedure, a standard value will be allocated according to the unit system (based on time) and shown in the schedule. In each cell of the table, enter the total count of time units accumulated for each of the designated classes of laboratory procedures carried out during the year.

(1) Done in your hospital

For each category of laboratory procedures shown in the stub of

IV. DEPARTMENTAL SERVICE STATISTICS - continued

A - Laboratory (continued)

part (1) of this subsection, evaluate each laboratory procedure carried out in terms of standard time units as provided in the schedule used and enter the accumulated totals in the table.

For each class of laboratory service from (i) to (m) check one or other of the first two columns according to whether the work was done by personnel of your laboratory or by personnel of other departments of your hospital.

Include work done in the hospital but outside the laboratory if it falls into the categories specified in the schedule of unit values; e.g., B.M.R. tests done outside the laboratory will be represented by the appropriate number of work units entered opposite the item "B.M.R.". "Procurement of specimens", however, would be counted opposite the item "Other".

In this subsection enter under "In-patients" work done (expressed in standard units) during the year for in-patients of the hospital as defined above (p. 17); enter under "Out-patients" work done (expressed in standard units) during the year for out-patients as defined above (p. 17). The laboratory units under "Referred in to your laboratory" are for laboratory procedures completed during the year on specimens or samples sent in to your hospital for analysis (see definitions p. 17).

Note - The total workload of the hospital is to be shown in Column 7, "Total for your hospital"; the workload derived from the hospital's patients is to be shown in Column 5 "Total patients" under the main heading "Patients of the hospital". The subtotals of Columns 3 and 4 together should equal the subtotal of Column 5. The subtotals of 5 and 6 together should equal the subtotal of Column 7.

(2) Referred out to other laboratory

Enter the work done (expressed in standard units) during the year by outside laboratories on clinical specimens and samples sent out from the hospital, subdivided as follows:

(a) Charged to your hospital - Enter here all referred-out laboratory work for which a charge is made to the hospital, whether or not the charge is passed on to the patient.

(b) Other - Enter here all referred-out laboratory work for which no charge is made to the hospital, whether or not a charge be made to some other agency.

Column 5 represents the sum of Columns 3 and 4 as well as the sum

IV. DEPARTMENTAL SERVICE STATISTICS - continued

A - Laboratory (continued)

of Columns 6 and 7 under the headings "Provincial laboratory" and "Other".

If the bulk of the laboratory work for your hospital is being done by an outside agency which will not be completing a hospital return, give a breakdown of your referred-out work, according to the categories in the stub of (1), in a supplementary statement (six copies).

Column Headings

Provincial laboratory - Enter unit values of procedures carried out for the hospital by provincial laboratories; classified as in 2(a) and 2(b) above.

Other - Enter unit values of procedures carried out for the hospital by any other outside laboratories; classified as in 2(a) and 2(b) above.

(3) Laboratory examinations done routinely on admissions

Indicate by check marks those procedures done routinely on admission to your hospital; leave blank if not done. Specify any other routine laboratory examinations in the space provided.

Urinalysis - Basic routine examination of characteristics of urine such as specific gravity, reaction, protein, sugar, and bile.

Haemoglobin - Routine tests of the haemoglobin in the blood.

Serology - Routine blood test for detection of syphilis.

B - Deaths and autopsies (during year)

(1) Deaths in hospital - total - Count here all deaths in hospital during the year of in-patients who died during their period of stay in the hospital. This category excludes stillbirths.

(a) Under 48 hours - Deaths of in-patients occurring less than 48 hours following admission to the hospital.

(b) 48 hours and over - Deaths of in-patients occurring 48 hours or more following their admission to the hospital.

(2) Autopsies of hospital deaths - Enter here the number of

IV. DEPARTMENTAL SERVICE STATISTICS - continued

B - Deaths and autopsies (during year) (concluded)

autopsies performed in the hospital during the year on bodies of in-patients who died during their period of stay in hospital.

(3) Autopsies of other deaths - Enter here the number of autopsies performed in the hospital during the year, on bodies of persons whose death occurred outside of hospital, or of out-patients in hospital.

(4) Autopsies of hospital stillbirths - Enter here the number of autopsies performed in the hospital during the year on hospital stillbirths.

(PAGE 5 OF FACILITIES AND SERVICES RETURN)

C - Radiology

In this subsection information is to be obtained on the radiology and beam therapy services and facilities of the hospital, both for the hospital's patients and for others. In addition, data are sought regarding work done for the hospital by outside agencies, classified as "referred-out" items. The services of radiologists as part of their private practice and of other persons not receiving remuneration from the hospital, and the use of equipment not operated by the hospital, will be included in the "referred-out" category insofar as they represent services to patients of the hospital.

(1) Diagnostic radiology - Enter as indicated the number of examinations and films during year.

In this subsection include as indicated all diagnostic examinations, films taken, and films read in your department, classified as to whether for in-patients or out-patients. Include also the number of films for in- and out-patients referred out for reading, and report the number of films referred in to your department.

Column headings (see definitions on p. 17).

(a) Number of examinations - Enter the number of examinations. An examination shall be defined as the procedure involving one completed film or series of films, or one or more exposures for fluoroscopy, directed at one anatomical site or region of the body during one attendance of the patient at the X-ray department (or one elsewhere in the hospital if mobile equipment is used).

(i) Routine admission chest X-rays - Film chest examinations made by the hospital on patients at the time of their admission or visit, as a screening test.

IV. DEPARTMENTAL SERVICE STATISTICS - continued

C - Radiology (continued)

(ii) Other radiographic examinations - Include all other diagnostic films or film series taken by the radiology department on in- or out-patients.

(iii) Fluoroscopic examinations - All examinations by means of the fluoroscope by the radiology department of the hospital.

(b) Number of films - Count one film for each of the following: (1) a single exposed frame on a roll of miniature X-ray film, e.g., in chest screening; (2) one sheet of exposed standard X-ray film, regardless of the number of separate exposures made in different sections of the sheet. Include spoiled films if the patient was exposed to the radiation. Exclude films used to test equipment or material, if the patient was not exposed.

Films taken in your department - Enter here the number of films taken for each category of patient examined by the hospital. Indicate the breakdown of films into standard and miniature.

(i) Standard - Films taken on standard X-ray equipment.

(ii) Miniature - Fluorographic (photofluoroscopic) films.

Own films read in your department - Enter here the number of films taken and developed by the hospital radiology department and interpreted by the staff of the department.

(iii) By own radiologist - Films read by a staff doctor recognized by the hospital as a qualified radiologist.

(iv) By others - Films read by any other doctor of the hospital or other member of the radiology department not recognized by the hospital as a qualified radiologist.

Own films referred out for reading - Enter here the number of films taken and developed in the hospital radiology department and referred out to some outside agency or other institution or private practice radiologist for interpretation.

(v) Charged to your hospital - A referred-out film for which there is a direct charge to the hospital (whether passed on to the patient or not) for the interpretation.

(vi) Other - A referred-out film for which there is no direct charge to the hospital (whether there is a charge to the patient or not) for the interpretation.

IV. DEPARTMENTAL SERVICE STATISTICS - continued

C - Radiology (continued)

(vii) Films referred in to your department for reading - Enter here the number of films taken by some outside agency or other institution, referred in to the hospital radiology department for interpretation by hospital staff (but not as part of their private practice).

(2) Therapeutic radiology - Include all services of the hospital providing radiation exposure (X-, beta, gamma rays) to patients, as a form of treatment.

(a) Superficial X-ray therapy - Include here only services designed to provide for direct surface irradiation of the body for treatment of the patient.

(b) Deep X-ray therapy - Include here only services designed with suitable equipment to concentrate radiation on internal organs of the body for treatment of the patient.

(c) Radium therapy - Include only services in which direct rays from radium serve as the source for the treatment of the patient.

(d) Other radioactive therapy - Include here only services in which the direct rays from some radioactive substance, other than radium, such as radioiodine, radiophosphorous, and cobalt 60, serve as the radiation source for the treatment of the patient by either internal or external administration. Enter separate data for each type of radioactive substance used in the hospital for the treatment of patients.

Column Headings

Number of Patients:)	Enter here a count of patients treated during
In-patient)	the year (see definitions on p. 17). " <u>A</u>
Out-patient)	<u>patient</u> " here is a person receiving services
Total)	during one admission to the hospital, or dur-
)	ing one series of appointments for treatment
)	as an out-patient during the year.
Number of Treatments:)	Enter here only a count of treatments pro-
In-patient)	vided during the year(see definitions on p.17).
Out-patient)	" <u>A treatment</u> " here is an exposure or series
)	of exposures of a patient to radiation ther-
)	apy during the course of <u>one</u> attendance at
)	the department for treatment during the year.

(3) X-ray and beam therapy units (Enter number of machines or units of specified types) - This part of the return is intended to provide an inventory of X-ray equipment, both diagnostic and therapeutic, and

IV. DEPARTMENTAL SERVICE STATISTICS - continued.

C - Radiology (concluded)

gamma ray beam therapy units operated by the hospital as at December 31. Do not include equipment owned by a private agency or radiologist and merely using rented space in the hospital to carry on an independent radiology service.

(a) Diagnostic X-ray machines - Enter here all X-ray units, whether used for radiology or fluoroscopy, or for fluorography (photofluoroscopy).

(i) Mobile or portable - Include here small units up to 80 kilovolts with current up to 30 milliamperes that do not need to be installed and can be used in different locations (e.g., patient's bedside) to produce film for diagnostic purposes.

(ii) Miniature - Include here fluorographic units (photofluoroscopic units) that are designed to provide miniature photographs from a fluoroscopic exposure for diagnostic purposes.

(iii) Stationary (excl. (i) and (ii)) Total - Include here all installed X-ray units used for radiography or fluoroscopy, or fluorography, other than mobile, portable, or miniature. Indicate separately the number of stationary units that are used for fluoroscopy.

(b) Therapeutic X-ray machines - Enter here all machines designed to provide a continuous X-ray beam for treatment of patients.

(i) Deep - Include installations, usually over 200 kilovolts, providing a continuous X-ray beam which can be focused on internal organs of the body.

(ii) Superficial - Include machines providing a continuous beam of X-ray to surface areas of the body.

(c) Gamma ray beam therapy units - Installations which use radioactive substance as their source of radiation for treatment of patients for medical conditions; specify separately the number of each of the types of unit: (i) Cobalt - cobalt 60 bomb; (ii) Radium - bomb therapy unit; (iii) Cesium - cesium 137 bomb.

(PAGE 6 OF FACILITIES AND SERVICES RETURN)

D - Surgical services (during year)

(1) Operations carried out in an operating room of the hospital

Operation is defined as the surgical or other operative procedure performed on one or more anatomical sites or regions of a patient during one attendance in an operating room of the hospital. Do not include operations carried out in the emergency unit of the hospital. Enter

IV. DEPARTMENTAL SERVICE STATISTICS - continued

D - Surgical services (during year) (concluded)

the number of operations carried out during the year on (a) in-patients and (b) out-patients.

(2) Total elapsed time of operations carried out in the operating room (hours)

Enter here the accumulated time spent (in hours) during the year by the operating room units carrying out operative procedures on patients in the operating room. The elapsed time of an operation will be measured from the moment of making the incision or other beginning of the operative procedure to the time the procedure is completed. Do not include time spent preparing the patient, clean-up time, "stand-by time", or time spent moving the patient to or from the operating room, even if this work is done by employees of the operating room.

(3) Hospital deaths during or after operations

Enter here all deaths during the year occurring in the hospital during an operation or within ten days subsequent to the time of an operation in the hospital.

(a) Deaths occurring during operations - Deaths in hospital occurring while the patient is undergoing an operation.

(b) Post-operative deaths under 48 hours - Deaths in hospital of post-operative patients within 48 hours from the time the operation was completed.

(c) Post-operative deaths 48 hours to 10 days - Deaths in hospital of post-operative patients after 48 hours to within 10 full days following the operation.

(4) Clean surgical cases

Enter here a count for the year of surgical cases from the operating room in which the wound was clean and without infection at the time of the operation.

(5) Post-operative infections in clean surgical cases

Enter here a count for the year of post-operative infections in clean surgical cases in which the infection occurred at the site of the surgery.

E - Obstetrical services (during year)

If the hospital provides a maternity service, complete the relevant

IV. DEPARTMENTAL SERVICE STATISTICS - continued

E - Obstetrical services (during year) (continued)

items in this part of the form even if there is not a formally organized obstetrical department.

(1) Total deliveries

Enter here the number of deliveries which took place in the hospital during the year. For this purpose a delivery is a single live birth or stillbirth, or multiple live births or stillbirths, or a combination of these, resulting from one pregnancy.

(2) Caesarean sections

Enter here the number of maternity cases delivered by Caesarean section in the hospital during the year. Note that any Caesarean sections carried out in an operating room will also have been included in the number of operations under Surgical services.

(3) Maternal deaths (in hospital)

Enter here the number of deaths in the hospital during the year in which the cause of death is attributed to some condition of pregnancy, to some complication of labour, or to the mother's condition in the immediate post-partum period.

(4) Stillbirths

Enter here the number of stillbirths occurring in the hospital during the year. For this purpose a stillbirth is defined as the birth of a foetus after at least 28 weeks' pregnancy which, after complete separation from the mother, does not show any sign of life.

(5) Live births

Enter here the number of infants born alive in the hospital during the year. (This will coincide with the number of newborn only if all infants born alive were admitted as in-patients; see p. 12).

(6) Premature births

Enter here the number of infants who were born alive in the hospital during the year and who weighed less than 5 1/2 lbs. at birth.

(7) Deaths of premature newborns (in hospital)

Enter the number of deaths in the hospital during the year of newborns who weighed less than 5 1/2 lbs. at birth.

IV. DEPARTMENTAL SERVICE STATISTICS - continued

E - Obstetrical services (during year) (concluded)

(8) Neonatal deaths of newborns (in hospital)

Enter the number of deaths in the hospital during the year of newborns (premature or full term) who died within the first twenty-eight days following birth.

(9) Newborns with staphylococcal skin infections

Include here all infants found during the year to be suffering from a staphylococcal skin infection while in the newborn nursery, whether established by clinical or laboratory diagnosis. Give the number of such infected infants. (A special check should be made for possible staphylococcal infection on all cases of pemphigus or impetigo of the newborn or infant pustules reported.)

F - Other services or treatments

In the following parts of this subsection, basic data are to be reported for other special services provided by the hospital. Do not include activities not under the direct administration of the hospital staff, e.g., those operated by volunteers.

(1) Services provided by organized units of the hospital

For each clinic, unit, or department recognized by the hospital as a unit under appropriate professional direction, give an account of the services provided during the year; the number of services is to be reported separately for in-patients and out-patients.

For purposes of this return, a unit of service means either a visit by a patient to the department, or a visit to a patient in the hospital by a member of the department's staff, during which he received service under appropriate professional direction; or a treatment, examination, or transfusion of blood or blood derivative, given under professional direction to a patient in the unit or elsewhere in the hospital. In all cases the patient is in attendance in the hospital. Physiotherapy treatments will be reported whether or not the physiotherapy unit operates as part of a physical medicine department.

Enter opposite the appropriate types of service the number of units of service provided during the year to in-patients (Col. 1), and to out-patients (Col. 2) (as defined on p. 17). Show also the sum of in-patient and out-patient services under "Total" (Col. 3).

IV. DEPARTMENTAL SERVICE STATISTICS - continued

F - Other services or treatments (concluded)

(2) Summary of out-patient and emergency work of the hospital (during year)

In this subsection record the total services expressed as persons, and/or visits, provided during the year on an out-patient basis, (i.e., to persons not under treatment as in-patients) by the organized out-patient department, by special departments or units, and by the emergency unit of the hospital. Visits will be reported independently under these three headings. As before only a visit involving service under professional direction will be included.

Column headings

Organized out-patient department - A department organized as such by the hospital and set up with a separate departmental budget and under appropriate administrative direction to receive, and to provide care for, patients who are not admitted as in-patients to the hospital. Such a department normally keeps a register of the patients who attend for services. Enter opposite "Patients" the number of such patients, i.e., the number of different individuals who attended one or more times during the year. Enter visits to the organized out-patient department opposite "Visits". Count as one visit the attendance by a patient one or more times during a single day at the organized out-patient department of the hospital. One visit shall be counted for such attendance in any single day regardless of the number of services received.

Other out-patients - Record here any out-patient services (in terms of visits) provided by special service departments of the hospital (other than the emergency unit) whether or not they form part of an organized out-patient service. Count here as a visit the attendance one or more times during a single day of an out-patient at one special department of the hospital. Attendance at different departments by the same patient in the same day shall be counted as separate visits.

Emergency unit - An organized unit (associated usually with the out-patient department) set up to provide emergency care to persons (other than in-patients) suffering from injury, shock, or other acute conditions requiring emergency treatment. Enter the number of visits to the emergency unit during the year. Count as one visit the attendance by a patient one or more times during a single day at the emergency unit of the hospital.

G - Meal days (excluding newborn) (during year)

The meal day is defined as the full amount of food provided to a person during one day.

IV. DEPARTMENTAL SERVICE STATISTICS - concluded

G - Meal days (excluding newborn) (during year) (concluded)

(1) In-patients - For in-patients (adults and children) the number of meal days will correspond with the number of patient days of care provided to adults and children during the calendar year. Note that newborn are excluded.

(2) Staff and other - The number of meal days for staff, out-patients, visitors, etc., is obtained by dividing the number of meals served to such persons during the year by three. In the event that the calculation of the number of meals served is other than by direct count, e.g., by dividing cafeteria receipts by an arbitrary sum, indicate the method used in a supplementary statement attached (six copies).

(3) Total - The sum of (1) and (2).

V. PERSONNEL

This section is to provide information, as at December 31 of the reporting year, on the number of positions established and the number of persons employed on a full- or part-time basis, for all categories of personnel. In addition, information is to be entered on professional qualifications, gross salaries and wages, the length of the normal workweek, and staff separations for the specified categories of personnel. A further subsection provides data on the distribution of accumulated paid hours of work.

For purposes of this section, the following definitions and instructions will apply throughout.

Employment category - Classification of hospital employment to which the major portion of the working time of a person or position is allocated.

Positions established - Any position, whether filled or unfilled, for which, as at December 31, a budget has been set up and approved by the hospital's board of trustees.

Full-time established position - A position, the duties of which are to be performed throughout the full hospital workweek on a regular basis.

Part-time established position - A position, the duties of which are to be performed only on selected days or partial days in the hospital workweek on a regular basis.

Persons employed - Persons working in the hospital as at December 31, who have, during the year, had salary or wages payable to them or on their account by the hospital in respect of their employment by the hospital or who are under contract to the hospital. Include interns, members of religious orders occupying established positions, student nurses and affiliates in, trainee nursing assistants, and aides. Exclude unpaid voluntary workers.

Full-time persons employed - Incumbents of established positions employed on a full-time basis, i.e., regularly employed throughout the full hospital workweek, whether or not the positions they fill are full- or part-time positions.

Part-time persons employed - Incumbents of established positions, employed on a part-time basis, i.e., regularly employed on selected days or partial days in the hospital workweek, whether or not the positions they fill are full- or part-time positions; e.g., a dietitian employed on a part-time basis but occupying a full-time position will be included in Column 2 (and Column 3 if professionally qualified) of subsection C(2); the position will be included in Column 1 of subsection C(1).

V. PERSONNEL - continued

Where one person on the hospital staff fills more than one position, that individual is to be counted once only, i.e., for the category of employment in which he spends the major portion of his time.

Gross salaries and wages (during year) - The gross salaries and wages earned during the year by all personnel whether or not actually paid during the year. Gross salaries and wages shall comprise the following:

- (1) Salaries, wages, and other remuneration earned by paid personnel including special allowances paid and perquisites supplied to such personnel; include any payments, perquisites, and special allowances to physicians for services rendered.

Special note

- (1) The distribution of the gross salary or wages of an employee working in more than one department of a hospital shall normally be made proportionately to the number of paid hours of work done by the employees in each of the several departments; however, if the employee receives separate remuneration for services in each department, these amounts shall determine the distribution.
- (2) The value of contributed services of regular staff members working without pay, calculated on the basis of salary scales for similar services in the community; and perquisites supplied to such personnel.

Special note

- (2) In the evaluation of contributed service, only that provided by regular staff members should be considered; exclude contributed services of volunteers, campaign workers, and employees of other organizations.

Separations (during year) - The number of persons of each category of personnel designated who, during the year, have ceased to be employed by the hospital, or who have left employment in the category in the hospital through transfer, promotion, or reassignment to another category of employment within the hospital. A separation involving a person who has filled more than one position will be counted only for the category to which the major portion of his time had been allocated, i.e., the employee's category of employment applicable to him immediately prior to the separation.

Normal workweek (hours) - The standard or regular working hours per week (excluding overtime) in this hospital for full-time personnel of the

V. PERSONNEL - continued

category designated.

Salary range (monthly) - The full range of monthly salary rates established by the hospital for the category of personnel designated, at December 31 (including, where applicable, the value of board and room allowances). If salaries paid for certain categories have been substantially outside this reported range during the year, please indicate in a supplementary statement (six copies) the minimum and/or maximum amounts actually payable to individuals in the categories concerned, and the number of employees and positions involved. Indicate by footnote if perquisites are included in the rates stated. For personnel categories having several grades with different salary ranges, give here the overall range, i.e., the minimum and maximum for the category, but include in a supplementary statement (six copies) a specification of the grades and the corresponding minima and maxima as well as the number of positions and persons involved.

(PAGE 7 OF FACILITIES AND SERVICES RETURN)

A - Hospital administrator

This subsection refers exclusively to the chief administrative officer of the hospital; information for assistant hospital administrators will be entered elsewhere (V, C(1)k and C(2)k). Where the medical superintendent is also the hospital administrator, complete this subsection for him, not subsection B(1).

(1) Degree or diploma in hospital administration - Enter a check mark for a degree or diploma if the administrator has completed full-time formal training as a hospital administrator in a recognized school or centre for training hospital administrators.

(2) Medical degree - This item will be checked if the administrator holds a medical degree from a recognized school of medicine.

(3) Extension course graduate in hospital administration - When the hospital administrator has completed a course of training in hospital administration through a recognized extension course from a school of hospital administration, specify the course completed.

(4) Other related training - Enter here other training such as short-term formal training in hospital administration or other formal training, such as at university. For persons with only practical experience as administrators, enter "practical experience".

(5) Years of experience in hospital administration - Include only those years spent working as a hospital administrator, whether as an assistant administrator or in full charge of a hospital.

V. PERSONNEL - continued

B - Medical staff

Complete this subsection for all physicians and surgeons receiving remuneration from the hospital, including doctors under contract to the hospital, and interns and residents.

(1) Medical superintendent - Enter here information relating to a medical superintendent or medical director who has not already been reported under "Hospital administrator", above; (include any assistant medical superintendents under "Other medical staff").

(2,3) Specialist staff - Enter here information for physicians employed in the specialties indicated. Indicate specialist certification when by the Royal College of Physicians and Surgeons of Canada, the College of Physicians and Surgeons of the Province of Quebec, the American Examining Board in Medical Specialties (Accredited), or equivalent bodies in the United Kingdom, Australia, or New Zealand, but only when the certification relates to the specialty in which engaged in the hospital.

(4) Residents and interns - Include here all interns, junior or senior, and residents.

(5) Other medical staff - Include here physicians, such as general practice physicians, or specialists not indicated above, if they meet the above definition of Medical staff.

C - Other professional and technical personnel (excluding nursing staff)

Complete this subsection for all professional and technical positions and persons employed as specified below. Assistant hospital administrators will be entered under "Other" in this subsection (C(1)k and C(2)k), as will also E.E.G. technicians, Speech therapists, etc., if on the payroll or under contract to the hospital. Exclude the chief Hospital administrator, Medical staff, and Nursing staff (V, A,B,D, and E).

Persons employed - Total - Includes professionally qualified persons as defined below, as well as unqualified persons, who are incumbents of established positions in the specified employment categories; the latter will include persons receiving on-the-job training.

Persons employed - Professionally qualified - Include only those persons holding the relevant professional or technical qualifications recognized by the appropriate professional or technical associations as specified below.

(a) Dietitian - Successful completion of an approved dietetic internship following a degree in Household Science or Home Economics from a recognized university, with major credit in Foods and Nutrition, or

V. PERSONNEL - continued

C - Other professional and technical personnel (excluding nursing staff)
(concluded)

qualifications approved by the Canadian Dietetic Association.

(b) Medical record librarian - Registration with the Canadian Association of Medical Record Librarians as a qualified medical record librarian.

(c) Laboratory technician - Registration by the Canadian Association of Laboratory Technologists as a qualified laboratory technologist.

(d) Radiological technician - Registration with the Canadian Society of Radiological Technicians or the American Registry of Radiological Technicians, as a qualified radiological technician.

(e) Physiotherapist - Graduation in a course in physiotherapy from a recognized university; or qualifications approved by the Canadian Physiotherapy Association.

(f) Occupational therapist - Graduation in a course in occupational therapy from a recognized university, or qualifications approved by the Canadian Association of Occupational Therapy.

(g) Pharmacist - Graduation in a course in pharmacy from a recognized university, or registration under the Pharmacy Act of the province.

(h) Psychologist - Successful completion of a post-graduate degree course in a recognized university, with specialization in psychology.

(i) Medical social worker - Graduation from a school of social work of a recognized university, or qualifications approved by the Canadian Association of Social Workers; plus specialized training or experience in medical social work.

(j) Other social worker - Graduation from a school of social work of a recognized university, or qualifications approved by the Canadian Association of Social Workers.

(k) Other Professional and technical personnel - Include here information for any other professional or technical categories. Professional qualification will require either graduation in the appropriate course from a recognized university, or qualifications accepted by the appropriate professional organization.

V. PERSONNEL - continued

(PAGE 8 OF FACILITIES AND SERVICES RETURN)

D - Nursing staff - directors and supervisors

Complete this subsection for the nursing directors and supervisors of the nursing services designated. For each category of nursing service give the number who have completed formal post-graduate specialty training in a recognized university or hospital when the training is related to the nursing service in which the person is now employed.

E - Nursing staff - other

Complete this subsection for all personnel engaged in nursing other than directors and supervisors of nursing services. Exclude private duty nurses.

(a) Graduate nurses - Persons who have graduated from an approved school of nursing. This term includes both registered and non-registered graduate nurses.

(b) Student nurses - Persons who are undertaking a formal course of study and are undergraduates in an approved school of nursing. This includes probationers and affiliates-in, but excludes affiliates-out.

An "affiliate-in" is a person who is enrolled in another hospital's school of nursing but who is receiving training in the reporting hospital; an "affiliate-out" is a person who is enrolled in the reporting hospital's school of nursing but who is receiving training in another hospital.

(c) Nursing assistants and aides

(i) Qualified - Persons who have completed a formal course of training below the course of a graduate nurse and/or who have been licensed or certified. This term includes nursing aides, practical nurses, and persons of similar status.

(ii) Trainee - Persons who are at present undertaking a formal course of training below the course of graduate nurse. This includes affiliates-in and excludes affiliates-out.

(d) Orderlies - Includes orderlies and student orderlies employed by the hospital.

(e) Other Nursing personnel - The total of any other nursing personnel not entered elsewhere, including ward clerks.

V. PERSONNEL - continued

(PAGE 9 OF FACILITIES AND SERVICES RETURN)

F - Other personnel

Complete this subsection for any personnel of the hospital not previously recorded.

(a) Administration - This will include any administration staff not elsewhere enumerated.

(b) Dietary - Include all persons, employed in the dietary department, such as cooks, pantry maids, kitchen help, etc., but exclude dietitians and dietitians in training.

(c) Laundry - Include here all persons employed in the laundry department.

(d) Linen service - Include here all persons employed in the bedding and linen department.

(e) Housekeeping - Include here all persons employed in the housekeeping department, such as cleaning helpers, ward maids, etc.

(f) Operation of the physical plant - Include here all persons primarily engaged in operating the heating, cooling, air conditioning, lighting, power, water, and sewage disposal units of the hospital.

(g) Maintenance of the physical plant - Include here all those persons primarily engaged in repairing and maintaining the buildings and plumbing, heating, and electrical systems of the hospital as well as hospital furniture, fixtures, and other non-medical equipment.

(h) Other - Include here all personnel employed in the hospital and not enumerated elsewhere above.

G - Total personnel

In this subsection enter the total of positions established, persons employed, and separations during the year, for the hospital. This is the total of subsections A to F, except in the case of separations.

(PAGES 10 AND 11 OF FACILITIES AND SERVICES RETURN)

H - Distribution of paid hours of work (during year)

In this subsection enter the accumulated paid hours of work during the year for all persons employed at any time during the year by the hospital, full- or part-time. Accumulated paid hours of work includes paid holidays and other paid leave. For student nurses,

V. PERSONNEL - continued

H - Distribution of paid hours of work (during year) (concluded)

probationers, affiliates-in, and nursing assistant trainees, include student hours in the hospital, even if not paid, but only duty and classroom hours. All paid hours of work for each type of personnel shown in the column headings should be allocated to the department concerned. The hours of work for personnel who are employed in more than one capacity or in several departments are to be allocated appropriately to the different personnel categories and service departments concerned, bearing in mind that throughout this subsection allocation is to be made in line with that for the Revenue Fund Expenses Statement. (See Definitions and Instructions, Part II - Financial Return.)

For definitions of various categories of personnel, see instructions under section V (pp. 31-35).

For definitions of hospital departments, see instructions for Annual Return of Hospitals, Part II - Financial Return (pp. 22-25).

VI. TRAINING FACILITIES

(PAGES 12 AND 13 OF FACILITIES AND SERVICES RETURN)

This section deals with the training facilities which are provided within the hospital, either under the auspices of the hospital itself or in affiliation or by arrangement with other agencies. The items are largely self-explanatory. Each of items C to M is to be answered for the types of training specified at the top of each column for which an affirmative answer is given to item A or item B or an agency is specified in item B. In item D, the approval referred to is that by a provincial government department, a provincial or national association of the type of personnel concerned, or other official body. For item G, potential yearly enrolment capacity for the course, and item H, total enrolment, affiliates-out are to be included and affiliates-in are to be excluded. Items N to Q are to be answered with respect to schools or formal courses which lead to qualification as registered nurses. Item R refers to internship facilities provided for certain types of personnel.

If there are any other courses given by the hospital or operated by other agencies in the hospital, please indicate in a supplementary statement (six copies) the type of training, duration, and enrolment capacity of the course, and enrolment at December 31.

Make constant reference
to Instructions and Def-
initions when completing
this form

ANNUAL RETURN OF HOSPITALS

For the year ended

December 31, 19____

PART I - FACILITIES AND SERVICES

Name of hospital _____ Street and number _____

City, town, etc. _____ County or district _____ Province _____

CERTIFICATION

I hereby certify that to the best of my knowledge the data con-
tained in this return represents a true statement concerning the
facilities and services of this hospital.

.....
Hospital Administrator.....
Date

This return has been completed in accordance with the Statis-
tics Act and, in participating provinces, with the requirements of
the Hospital Insurance and Diagnostic Services Act, the Regula-
tions thereunder, and the Agreement, and is approved.

.....
Provincial Authority.....
Date

Special explanatory notes on significant changes during the year, as described in the Instructions and Definitions:

Name of hospital

I. CLASSIFICATION OF HOSPITAL - Check all appropriate items in each subsection A, B, C, D (as at Dec. 31).

1	A. Provincial approval (check one):	<input type="checkbox"/> Public	<input type="checkbox"/> Private	<input type="checkbox"/> Other
2	B. Status under Provincial Hospital Insurance Plan (check one):	<input type="checkbox"/> Budget review	<input type="checkbox"/> Contract	<input type="checkbox"/> Not applicable
3	C. Service (check one or specify):	<input type="checkbox"/> General	<input type="checkbox"/> Chronic	<input type="checkbox"/> Convalescent
4		<input type="checkbox"/> Maternity	Other (specify)	
D. Ownership and operation (Check the appropriate category: one only in each column.):				
	1. Voluntary:	Ownership	Operation	
5	(a) Lay corporation	<input type="checkbox"/>	<input type="checkbox"/>	4. Federal government..... <input type="checkbox"/>
6	(b) Religious organization	<input type="checkbox"/>	<input type="checkbox"/>	5. Proprietary
7	2. Municipality, union, or			6. Industrial
8	hospital district.....	<input type="checkbox"/>	<input type="checkbox"/>	7. Other (specify):
9	3. Provincial government	<input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>

II. BEDS

A. Type of unit - Enter Rated Bed Capacity* and Beds Set Up as at Dec. 31.

	Unit	Rated Bed Capacity	Beds Set Up, Dec. 31
10	1. Beds and cribs:		
11	(a) Medicine - surgery		
12	(b) Obstetric (maternity).....		
13	(c) Orthopaedic		
14	(d) Paediatric (children).....		
15	(e) Psychiatric.....		
16	(f) Tuberculosis		
17	(g) Isolation		
18	(h) Long-term**		
19	(i) Other (specify).....		
20	(j)		
21	(k)		
22	Total beds and cribs		
23	2. Bassinets for newborn		

* Check whether ☐ federal or ☐ provincial standards have been used.

** Including chronic, convalescent, geriatric, rehabilitation, etc., where not distinguished; if separate units, specify each under "Other".

B. Quarterly summary - Enter number of beds and cribs, and bassinets for newborn, set up as at dates specified.

	Item	March 31	June 30	Sept. 30	Dec. 31
24	1. Beds and cribs set up				
25	2. Bassinets for newborn set up				

C. Type of accommodation - Enter number of beds and cribs set up as at Dec. 31.

	Bed-size of rooms (rooms having)	Beds and cribs set up, Dec. 31		
		Standard ward	Preferred accommodation	Total
26	1) 1 bed			
27	2) 2 beds			
28	3) 3 beds			
29	4) 4 beds			
30	5) 5 - 7 beds			
31	6) 8 - 10 beds			
32	7) 11 - 15 beds			
33	8) 16 - 25 beds			
34	9) 26 - 35 beds			
35	10) Over 35 beds			
36	11) Beds not in rooms			
37	Total beds and cribs			

ANNUAL RETURN OF HOSPITALS - PART I

Name of hospital:

III. UTILIZATION DATA (service statistics)

A. Movement of in-patients (excluding stillbirths) - Enter number of in-patients.

Item		Adults and children	Newborn	Total
1	1. In hospital at start of year			
2	2. Admissions during year			
3	3. Total under care during year (1 plus 2)			
4	4. Discharges during year			
5	5. Deaths during year			
6	6. Total separations during year (4 plus 5)			
7	7. In hospital at end of year (3 minus 6)			

B. Distribution of patient days during year, for adults and children - Enter number of patient days.

Item		Patient days	Item	Patient days
8	1. Type of accommodation charged:		2. Responsibility for payment:	
9	(a) Standard ward		(a) Provincial Plan	
10	(b) Semi-private room		(b) Federal government	
11	(c) Private room		(c) Workmen's compensation boards	
12			(d) Non-residents of the province	
13			(e) Uninsured resident of the province	
14	Total patient days during year		(f) Insured resident, care not responsibility of Provincial Plan	
15	* Total for B 1 equals total for B 2, each representing total patient days during year for all adults and children.		Total patient days during year	
16				

17 C. Total patient days during year, for newborn - Enter number of patient days.....

D. Distribution of separations (discharges plus deaths) and their patient days of stay since admission - Enter, as indicated, number of separations and patient days.

Length of stay since admission		Number of separations		Total patient days, since admission, of separations	
		Adults and children	Newborn	Adults and children	Newborn
18	1) 1 day				
19	2) 2 days				
20	3) 3 days				
21	4) 4 days				
22	5) 5 days				
23	6) 6 days				
24	7) 7 days				
25	8) 8 days				
26	9) 9 days				
27	10) 10 days				
28	11) 11 - 14 days				
29	12) 15 - 19 days				
30	13) 20 - 29 days				
31	14) 30 - 59 days				
32	15) 60 or more days				
33	Total				

ANNUAL RETURN OF HOSPITALS - PART I

Name of hospital:

IV. DEPARTMENTAL SERVICE STATISTICS (services during year, unless otherwise specified)

A. Laboratory - Enter number of standard units* during year.

Item	Patients of the hospital			Referred in to your laboratory	Total for your hospital
	In-patients 3	Out-patients 4	Total patients 5		
1. Done in your hospital:					
(a) Haematology.....					
(b) Biochemistry - urines					
(c) Biochemistry - bloods					
(d) Biochemistry - other					
(e) Autopsy and surgical pathology					
(f) Bacteriology (excl. g).....					
(g) Public health bacteriology					
(h) Cytology					
	Work done by				
	Lab.	Other			
	1	2			
(i) Blood bank					
(j) B.M.R.....					
(k) E.C.G.....					
(m) E.E.G.....					
(n) Other					
Total of 1					
2. Referred out to other laboratory:				Provincial laboratory	Other
(a) Charged to your hospital					
(b) Other					
Total of 2					
GRAND TOTAL (1 plus 2).....					

* Specify schedule of unit values that has been used

3. Laboratory examinations done routinely on admissions (please check or specify):

☐ Urinalysis☐ Haemoglobin☐ Serology

Other (specify) _____

B. Deaths and autopsies (during year)

Item	Number
1. Deaths in hospital - total (excluding stillbirths)	
(a) Under 48 hours	
(b) 48 hours and over	
2. Autopsies of hospital deaths	
3. Autopsies of other deaths	
4. Autopsies of hospital stillbirths.....	

ANNUAL RETURN OF HOSPITALS - PART I

Name of hospital:

IV. DEPARTMENTAL SERVICE STATISTICS (services during year, unless otherwise specified) - continued

C. Radiology

1. Diagnostic radiology - Enter, as indicated, the number of examinations and films during year.

Item		In-patients	Out-patients	Total for your department
(a) Number of examinations:				
1	(i) Routine admission chest X-rays			
2	(ii) Other radiographic examinations			
3	(iii) Fluoroscopic examinations			
(b) Number of films:				
4	Films taken in your department - Total (i plus ii)			
5	(i) Standard			
6	(ii) Miniature			
7	Own films read in your department - Total (iii plus iv)			
8	(iii) By own radiologist			
9	(iv) By others			
10	Own films referred out for reading - Total (v plus vi)			
11	(v) Charged to your hospital			
12	(vi) Other			
13	(vii) Films referred in to your department for reading			

2. Therapeutic radiology - Enter, as indicated, number of patients and treatments during year.

Item		Number of patients			Number of treatments	
		In-patients	Out-patients	Total	In-patients	Out-patients
14	(a) Superficial X-ray therapy					
15	(b) Deep X-ray therapy					
16	(c) Radium therapy					
	Other radioactive therapy (specify):					
17	(d)					
18	(e)					

3. X-ray and beam therapy units - Enter number of machines or units of specified types, as at December 31:

19	(a) Diagnostic X-ray machines:	(i) Mobile or portable	(ii) Miniature
20		(iii) Stationary (excl. i and ii) Total	Used for fluoroscopy
21	(b) Therapeutic X-ray machines:	(i) Deep	(ii) Superficial
22	(c) Gamma ray beam therapy units:	(i) Cobalt	(ii) Radium (iii) Cesium

ANNUAL RETURN OF HOSPITALS - PART I

Name of hospital:

IV. DEPARTMENTAL SERVICE STATISTICS - concluded

Enter numbers of events and services in the hospital during year.

Number

D. Surgical services (during year)

- 1 1. Operations carried out in an operating room of the hospital - Total
- 2 (a) In-patient operations
- 3 (b) Out-patient operations
- 4 2. Total elapsed time of operations carried out in the operating room(s) - (hours)
- 5 3. Hospital deaths during or after operations - Total
- 6 (a) Deaths occurring during operations
- 7 (b) Post-operative deaths under 48 hours
- 8 (c) Post-operative deaths 48 hours to 10 days
- 9 4. Clean surgical cases
- 10 5. Post-operative infections in clean surgical cases

E. Obstetrical services (during year)

- 11 1. Total deliveries
- 12 2. Caesarean sections
- 13 3. Maternal deaths (in hospital)
- 14 4. Stillbirths
- 15 5. Live births
- 16 6. Premature births
- 17 7. Deaths of premature newborn (in hospital)
- 18 8. Neonatal deaths of newborn (in hospital)
- 19 9. Newborns with staphylococcal skin infections

F. Other services or treatments

1. Services provided by organized units of the hospital - Enter number of units of service during year.

Type of organized unit (clinic, unit, or department)		Unit of service	In- patients	Out- patients	Total
20	(a) Arthritis	Visit			
21	(b) Cancer	Visit			
22	(c) Dental	Visit			
23	(d) Mental health	Visit			
24	(e) Psychology	Visit			
25	(f) Prenatal	Visit			
26	(g) Social service	Visit			
27	(h) Physical medicine	Visit			
28	(i) Physiotherapy	Treatment			
29	(j) Occupational therapy	Treatment			
30	(k) Speech therapy	Treatment			
31	(l) Electroshock therapy	Treatment			
32	(m) Electrocardiography	Examination			
33	(n) Electroencephalography	Examination			
34	(o) Blood service	Transfusion			
35	(p) Other (specify type and unit of service, and give number of units)				
36	(q)				
37	(r)				

2. Summary of out-patient and emergency work of the hospital during year

Item		Organized O.-P. dept.	Other out- patients	Emergency unit
38	(a) Patients (individuals attending during year)		xxx	xxx
39	(b) Visits (during year)			

G. Meal days (excluding newborn) (during year)

40	(1) In-patients ...	(2) Staff and other	(3) Total
----	---------------------	------------------------------	-----------

ANNUAL RETURN OF HOSPITALS - PART I

Name of hospital: _____

V. PERSONNEL (as at December 31, unless otherwise specified)

A. Hospital administrator - Check or make entry for each item as applicable.

- 1 ☐ 1. Degree or diploma in hospital administration ☐ 2. Medical degree
- 2 3. Extension course graduate in hospital administration (specify) _____
- 3 4. Other related training (specify) _____
- 4 5. Years of experience in hospital administration _____

B. Medical staff

Category	Full-time		Part-time		Number with specialist qualifications*	Gross salaries and wages during year
	Positions established	Persons employed	Positions established	Persons employed		
	No.	No.	No.	No.	No.	\$
5 1. Medical superintendent						
6 2. Radiologist						
7 3. Pathologist						
8 4. Residents and interns						
9 5. Other med. staff						
10 Total						

* Certification in specialty related to hospital duties.

C. Other professional and technical personnel (excluding nursing staff)

Category	Positions established	Persons employed		Separations during year	Normal work-week	Salary range (monthly)	
		Total	Professionally qualified			Minimum	Maximum
	No.	No.	No.	No.	Hours	\$	\$
1. Full-time:							
11 (a) Dietitians							
12 (b) Medical record librarians							
13 (c) Laboratory technicians							
14 (d) Radiological technicians							
15 (e) Physiotherapists							
16 (f) Occupational therapists							
17 (g) Pharmacists							
18 (h) Psychologists							
19 (i) Medical social workers							
20 (j) Other social workers							
21 (k) Other prof.-tech. personnel							
22 Total full-time							
2. Part-time:							
23 (a) Dietitians							
24 (b) Medical record librarians							
25 (c) Laboratory technicians							
26 (d) Radiological technicians							
27 (e) Physiotherapists							
28 (f) Occupational therapists							
29 (g) Pharmacists							
30 (h) Psychologists							
31 (i) Medical social workers							
32 (j) Other social workers							
33 (k) Other prof.-tech. personnel							
34 Total part-time							

ANNUAL RETURN OF HOSPITALS - PART I

Name of hospital:

V. PERSONNEL (as at December 31 unless otherwise specified) - continued

D. Nursing staff - directors and supervisors only (for other nursing staff, complete subsection E)

Category	Full-time		Part-time		Number with specialist qualifications*	Gross salaries and wages during year
	Positions established	Persons employed	Positions established	Persons employed		
	No.	No.	No.	No.	No.	\$
1 1. Administration						
2 2. Education						
3 3. Operating room						
4 4. Recovery room						
5 5. Obstetrics						
6 6. Paediatrics						
7 7. Psychiatry						
8 8. OP and emergency						
9 9. Other (including medical - surgical)						
10 Total						

* Post-graduate or post-basic training in specialty related to hospital duties.

E. Nursing staff - other

Category		Positions established	Persons employed	Separations during year	Normal workweek	Salary range (monthly)	
						Minimum	Maximum
		No.	No.	No.	Hours	\$	\$
1. Full-time:							
(a) Graduate nurses:							
11 (i) Head nurses							
12 (ii) General duty nurses							
13 (iii) Other graduate nurses							
14 (b) Student nurses							
(c) Nursing assistants and aides:							
15 (i) Qualified							
16 (ii) Trainee							
17 (d) Orderlies							
18 (e) Other nursing personnel							
19 Total full-time							
2. Part-time:							
(a) Graduate nurses:							
20 (i) Head nurses							
21 (ii) General duty nurses							
22 (iii) Other graduate nurses							
23 (b) Student nurses							
(c) Nursing assistants and aides:							
24 (i) Qualified							
25 (ii) Trainee							
26 (d) Orderlies							
27 (e) Other nursing personnel							
28 Total part-time							

DOMINION BUREAU OF STATISTICS - DEPARTMENT OF NATIONAL HEALTH AND WELFARE

ANNUAL RETURN OF HOSPITALS - PART I

Name of hospital:

V. PERSONNEL (as at December 31, unless otherwise specified) - continued

F. Other personnel (excluding personnel in subsections A, B, C, D, and E)

Category		Positions established	Persons employed	Separations during year	Normal workweek
		No.	No.	No.	Hours
1. Full-time:					
1	(a) Administration*				
2	(b) Dietary**				
3	(c) Laundry				
4	(d) Linen service				
5	(e) Housekeeping				
6	(f) Operation of physical plant				
7	(g) Maintenance of physical plant				
8	(h) Other				
9	Total full-time				
2. Part-time:					
10	(a) Administration*				
11	(b) Dietary**				
12	(c) Laundry				
13	(d) Linen service				
14	(e) Housekeeping				
15	(f) Operation of physical plant				
16	(g) Maintenance of physical plant				
17	(h) Other				
18	Total part-time				

* Excluding hospital administrator and assistant hospital administrator(s).

** Excluding dietitians and dietitians in training.

G. Total personnel

Category	Full-time			Part-time		
	Positions established	Persons employed	Separations during year	Positions established	Persons employed	Separations during year
	No.	No.	No.	No.	No.	No.
19 Total personnel						

ANNUAL RETURN OF HOSPITALS - PART I

Name of hospital:

V. PERSONNEL - continued

H. Distribution of paid hours of work (during year)

Department	Accumulated paid hours during year					
	Total	Nurses		Orderlies	Other nursing staff	Other paid staff
		Graduate	Student*			
1. Patient service departments:						
1 (a) Undistributed as to department						
2 (b) Nursing administration						
(c) Direct care nursing units:						
3 (i) Adults and children						
4 (ii) Newborn nursery						
5 (iii) Total in-patient (i plus ii)						
6 (iv) Emergency unit						
7 (v) Unorganized out-patient dept.						
8 (vi) Total out-patient (iv plus v)						
9 Total direct care (iii plus vi)						
(d) Special services:						
10 (i) Operating room						
11 (ii) Central supply room						
12 (iii) Pharmacy						
13 (iv) Delivery room						
14 (v) Laboratory						
15 (vi) Radiology						
16 (vii) Physiotherapy						
Other (specify)						
17 (viii)						
18 (ix)						
19 Total special services (i to ix)						

* Include all student hours, duty and classroom, even if not paid.

DOMINION BUREAU OF STATISTICS - DEPARTMENT OF NATIONAL HEALTH AND WELFARE

ANNUAL RETURN OF HOSPITALS - PART I

Name of hospital:

V. PERSONNEL - concluded

H. Distribution of paid hours of work (during year) - concluded

Department	Accumulated paid hours during year				
	Total	Nurses		Orderlies	Other nursing staff
		Graduate	Student*		
1. Patient service departments (concluded):					
(e) Supplemental services:					
1 (i) Medical records and library					
2 (ii) Nursing education					
3 (iii) Medical education					
4 (iv) Social service					
Other (specify):					
5 (v)					
6 (vi)					
7 Total supplemental services (i to vi)					
8 Total patient service (sum of a, b, c, and d on page 10 and e above)					
2. General service departments:					
9 (a) Administration					
10 (b) Dietary					
11 (c) Laundry					
12 (d) Linen service					
13 (e) Housekeeping					
14 (f) Operation of physical plant					
15 (g) Maintenance of physical plant					
16 (h) Total general services (a to g)					
17 3. Other (incl. research, ambulance, ancillaries)					
18 4. GRAND TOTAL (sum of 1, 2, and 3)					

* Include all student hours, duty and classroom, even if not paid.

DOMINION BUREAU OF STATISTICS - DEPARTMENT OF NATIONAL HEALTH AND WELFARE

ANNUAL RETURN OF HOSPITALS - PART I

Name of hospital: _____

VI. TRAINING FACILITIES

Item	Registered nurses	Nursing assistants	Orderlies	Technicians		Med. record librarians
				Radiological	Laboratory	
	1	2	3	4	5	6
1 A. Does your hospital operate a school, or provide a formal course, to train persons to be: (yes or no).....						
2 B. Does your hospital provide facilities for a course operated by another agency? (if yes, specify agency).....						
3 C. Does the course lead to a degree, diploma, or certificate? (if yes, specify)						
4 D. By whom is the course (in A or B) formally approved? (specify)						
5 E. Total length of course, in months						
6 F. Number of courses begun during year						
7 G. Potential yearly enrolment capacity of course (which present facilities will accommodate)						
8 H. Total enrolment: (1) At December 31						
9 (2) During year						
10 I. Total graduated (or successfully completing course) during year						
11 J. Number who discontinued training during year (without graduating or completing course).....						
12 K. Number of residence beds hospital provides for trainees						
13 L. Is a charge made for the training? (1) To the trainee? (yes or no).....						
14 (2) To other agency? (if yes, specify agency)						
15 M. Is the trainee paid a salary or stipend at any stage of the training? (specify stage and amount).....						

NOTE: If items (e.g., C, D, L2) require more space, or if you have any training programs not mentioned above, please make a supplementary statement in an appendix (six copies).

DOMINION BUREAU OF STATISTICS - DEPARTMENT OF NATIONAL HEALTH AND WELFARE

ANNUAL RETURN OF HOSPITALS - PART I

Name of hospital: _____

VI. TRAINING FACILITIES - concluded

N, O, P, AND Q APPLY TO PAGE 12, COLUMN 1 (REGISTERED NURSES) ONLY

(Note that provision is made in questions O, P, and Q for up to three fields in each case. For each field you mention, state also length of training and kind of institution as appropriate. Use space at bottom of the page for additional information as required.)

1 N. Have you an Advisory Nursing School Committee? ☐ Yes ☐ No

2 O. In what fields is training provided to affiliates?

3 (specify) (1) Field(s)

(2) Length of training for each field

Field		
1	2	3

4 P. Is part of the training provided by affiliated institutions?

(if so, specify) (1) Field(s)

5 (2) Institution(s) for each field

6 (3) Length of training for each field

Field		
1	2	3

7 Q. For what specialties are post-graduate courses provided?

(specify) (1) Field(s)

8 (2) Length of training for each field

Field		
1	2	3

9 R. Does hospital provide approved internships for (check or specify):

☐ Medical
interns

☐ Dietitians

☐ Medical
social
workers

10 Others (specify) _____

Use this space for explanatory comments relevant to this return (see Instructions and Definitions).

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