

INSTRUCTIONS AND DEFINITIONS
FOR THE
ANNUAL RETURN OF HOSPITALS
1960

PART I

FACILITIES AND SERVICES, FORM HS-1

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 should be typed, if at all possible. 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 "worksheet" should be used for recording all original information in completing the return. Complete the return on the worksheet 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 to the Department of Health of the province as applicable. The hospital will retain the last copy for reference purposes.



Table of Contents

	Page	
	Manual	Return
Introduction	1	-
I. Classification of Hospital	3	2
A - Provincial approval	3	2
B - Status under Provincial Hospital Insurance Plan	3	2
C - Service	4	2
D - Ownership and operation	5	2
II. Beds	7	2
A - Type of unit	8	2
B - Type of accommodation	9	2
III. Utilization Data (service statistics)	10	3
A - Distribution of patient-days during year for adults and children	10	3
B - Total patient-days during year for newborn	12	3
C - Movement of in-patients	12	3
D - Distribution of separations and their patient-days of stay since admission	13	3
IV. Departmental Service Statistics	14	4
A - Laboratory	14	4
B - Deaths and autopsies	15	4
C - Radiology	16	5
D - Surgical services	19	6
E - Obstetrical services	20	6
F - Other services or treatments	21	6
G - Meal days	22	6
V. Personnel	23	7
A - Hospital administrator	25	7
B - Medical staff	25	7
C - Other professional and technical personnel	26	7
D - Nursing staff - directors and supervisors	27	8
E - Nursing staff - other	27	8
F - Other personnel	28	9
G - Total personnel	29	9
H - Distribution of paid hours of work	29	10
VI. Training Facilities	31	12

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. 14). 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. If complete breakdowns are not available, report sub-totals wherever possible.

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 31.

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 of 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).

This booklet follows the outline of the form and its 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.

Notwithstanding the foregoing, any and all hospitals or other facilities listed in the schedules 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 and location 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.

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.

^{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 (concluded)

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 diseases 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 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.

I. CLASSIFICATION OF HOSPITAL - continued

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.)

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.

I. CLASSIFICATION OF HOSPITAL - concluded

D. - Ownership and operation (concluded)

7. Other - Applies to any hospital whose ownership or operation is not included in the foregoing. Specify in detail.

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 bed-size of room and pay status of the accommodation. For this purpose bassinets will include incubators, and beds will include cribs and cots.

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. 8). The information on both rated bed capacity and beds set up is to be as at midnight on December 31 of the reporting 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 below). 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.

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

<u>Type of patient area</u>	<u>Square feet</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

II. BEDS - continued

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 December 31, whether or not actually occupied by a patient at that time; note particularly that the following items are to be included in, or excluded from, the count of beds, as specified:

- | <u>Include</u> | <u>Exclude</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 or examination only; |
| (4) Beds in corridors, sunrooms, etc.; | (4) Beds in employee quarters including those used for sick staff; |
| (5) Bassinets set up outside the nursery and normally used for infants other than newborn; | (5) Anaesthesia recovery beds; |
| (6) Equipment in use and occupied in place of beds (such as Stryker frames, iron lungs, and rocking beds). Do not count as two beds set up an iron lung and a rocking bed if both are being used by one patient. | (6) Beds in storerooms and workshops; |
| | (7) Stryker frames, iron lungs, and rocking beds, not in use. |

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 patients (see p.10 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.

II. BEDS - concluded

A - Type of unit (concluded)

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 - Type of accommodation

In this subsection enter the number of beds and cribs set up, as at mid-night December 31, distributed by number of beds in rooms and by pay status of the room (standard or preferred accommodation). Beds not in 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 distribution of beds in rooms. The total bed count will balance against the total count for beds set up in II,A. 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 distribution of patient days during the year by type of accommodation charged and by responsibility for payment; the movement of in-patients during the year; 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 as defined on p. 8 has been allocated. This category excludes stillbirths, as well as 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 born alive 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; should his pay-status subsequently change, he shall then be counted as a "child" admission. (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.) Discharge of a newborn is deemed to occur at the time of official release by the hospital or change of pay-status.

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.

A - Distribution of patient-days during year, for adults and children

In this subsection show the distribution of patient-days during 1960 for adults and children (in-patients) by type of accommodation charged and by responsibility for payment; these terms being defined as follows:

III. UTILIZATION DATA (service statistics) - continued

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

1. Type of accommodation charged - According to the rate of the gross charge actually made by the hospital to the patient's account 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 patients-days charged to the Provincial Hospital Insurance Plan of the province in which the hospital is located. In Ontario, record municipal indigents in (e), (see p. 12).

(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.

III. UTILIZATION DATA (service statistics) - continued

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

(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. 11).

(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 for payment by the Plan.

B - Total patient-days during year, for newborn

Enter here the total patient-days for newborn, accumulated during 1960.

C - Movement of in-patients (excluding stillbirths)

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

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 temporarily out of hospital on this date, 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 1960.

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 1960.

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 1960.

III. UTILIZATION DATA (service statistics) - concluded

C - Movement of in-patients (excluding stillbirths) (concluded)

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 1960. Stillbirths should not be included in this item (see p. 20).

6. Total separations during year - This is the sum of (4) discharges and (5) deaths during 1960.

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".

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

In this subsection, record the number of in-patients (adults and children, and newborn) separated from the hospital during 1960 (as in C(6)) and their accumulated patient-days since admission regardless of the year in which admitted; both sets of data are to be distributed according to the length-of-stay groupings in the table.

Under the heading "Number of separations", show the distribution of in-patients separated from the hospital during 1960 (total separations - C(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 1960 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 the 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 daygroups, 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 1960 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 a particular 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 subsections A and C for services with respect to 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 bassinnet has been allocated (as on p. 10).

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. Do not include routine staff health examinations.

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 of the reporting hospital.

(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 1960. Copies of the federal schedule of unit values of clinical laboratory procedures are available, upon request, from the Dominion Bureau of Statistics.

1. Done in your hospital - For each category of laboratory procedures shown in the stub of part 1 of this subsection, evaluate each laboratory procedure carried on 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 services from (i) to (n) check one or both of the two columns of check-boxes according to whether the work was done by personnel of your laboratory and/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 used; e.g., B.M.R.

IV. DEPARTMENTAL SERVICE STATISTICS - continued

A - Laboratory (concluded)

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 1960 for in-patients of the hospital as defined above (p. 14); enter under "Out-patients" work done (expressed in standard units) during 1960 for out-patients as defined above (p. 14). The laboratory units under "Referred in to your laboratory" are for laboratory procedures completed during 1960 on specimens or samples sent in to your hospital for analysis (see definitions p. 14).

Note - The total workload of the hospital is to be shown in Column 5, "Total for your hospital"; the workload derived from the hospital's patients is to be shown in Column 3, "Total patients", under the main heading "Patients of the hospital". The subtotals of Columns 1 and 2 together should equal the subtotal of Column 3. The subtotals of 3 and 4 together should equal the subtotal of Column 5.

2. Referred out to provincial laboratory - Enter the work done (expressed in standard units) during 1960 by provincial laboratories on clinical specimens and samples sent out from the hospital.

3. Referred out to other laboratory - Enter the work done (expressed in standard units) during 1960 by other laboratories on clinical specimens and samples sent out from the hospital, which is not included in (2) above.

4. Laboratory examinations done routinely on admission - 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. Appropriate unit values for these procedures will, of course, have been included above.

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 (excluding 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.

IV. DEPARTMENTAL SERVICE STATISTICS - continued

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

(c) Total - Count here all deaths in hospital during 1960 of in-patients who died during their period of stay in the hospital. This category excludes stillbirths.

2. Autopsies

(a) Autopsies of hospital deaths - Enter here the number of autopsies performed in the hospital during 1960 on bodies of in-patients who died during their period of stay in hospital.

(b) Autopsies of other deaths - Enter here the number of autopsies performed in the hospital during 1960, on bodies of persons whose death occurred outside of hospital, or of out-patients in hospital.

(c) Autopsies of hospital stillbirths - Enter here the number of autopsies performed in the hospital during 1960 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 - In this subsection include as indicated all diagnostic examinations, films taken, and films read in your department during 1960, 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. 14).

(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.

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

IV. DEPARTMENTAL SERVICE STATISTICS - continued

C - Radiology (continued)

(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.

Films taken in your department - Enter here the number of films taken for each category of patient examined by the hospital. 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. 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 by a member of your medical staff - Enter here the number of films taken and developed by the hospital radiology department and interpreted by the staff of the department, including radiologists under contract. Each film is to be reported once only, regardless of the number of times read. Exclude spoiled films from the count of films read by a member of your 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. Do not include films reported under (iii) above.

Own films referred out for reading - Enter here the number of films taken and developed in the hospital's radiology department and referred out for interpretation to some outside agency or other institution or private practice radiologist not under contract.

(v) Referred out to Provincial T.B. Authority - A film referred out to the Provincial Tuberculosis Authority for which there is no direct charge to the hospital or patient.

(vi) Referred elsewhere and 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.

(vii) Referred elsewhere and not charged to your hospital - 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.

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's radiology department for interpretation by hospital staff (but not as part of their private practice).

IV. DEPARTMENTAL SERVICE STATISTICS - continued

C - Radiology (continued)

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 specified 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 the
In-patient	)	the year (see definitions on p. 14). " <u>A patient</u> "
Out-patient	)	here is a person receiving services during one
Total	)	admission to the hospital, or during one series of
	)	appointments for treatment as an out-patient during
	)	the year.

Number of Treatments:	)	Enter here only a count of treatments provided
In-patient	)	during the year (see definitions on p. 14). " <u>A</u>
Out-patient	)	<u>treatment</u> " here is an exposure or series of ex-
	)	posures of a patient to radiation therapy during
	)	the course of <u>one</u> attendance at the department for
	)	treatment during the year.

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

IV. DEPARTMENTAL SERVICE STATISTICS - continued

C - Radiology (concluded)

(ii) Miniature - Include here the count of 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 the count of installed X-ray units used for radiography or fluoroscopy, or fluorography, other than mobile, portable, or miniature. Indicate separately the number of these stationary units that are used for fluoroscopy.

(b) Therapeutic X-ray machines - Enter here the count of 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 count 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. Include separately operations carried out in the emergency unit of the hospital. Enter the number of operations carried out during the year on (a) in-patients and (b) out-patients (see definitions on p. 14).

2. Total elapsed time of operations carried out in operating room (s) (hours) - Enter here the accumulated time spent (in hours) during 1960 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 1960 occurring in the hospital during an operation or within ten days subsequent to the time of an operation in the hospital.

IV. DEPARTMENTAL SERVICE STATISTICS - continued

D - Surgical services (during year) (concluded)

(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 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 1960. 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 1960. 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 1960 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. Note that any maternal deaths occurring during or within ten days of any Caesarean sections carried out in an operating room will also have been included in the number of hospital deaths during or after operations under "Surgical services".

4. Stillbirths - Enter here the number of stillbirths occurring in the hospital during 1960. For this purpose a stillbirth is as defined in the legislation governing the vital statistics of the province for the year 1960.

5. Live births - Enter here the number of infants, including immatures, born alive in the hospital during 1960. For this purpose a live birth is as defined in the legislation governing the vital statistics of the province for the year 1960.

IV. DEPARTMENTAL SERVICE STATISTICS - continued

E - Obstetrical services (during year) (concluded)

6. Immature ("premature") births - Enter here the number of infants who were born alive in the hospital during 1960 and who weighed 5-1/2 lbs. (2500 grams) or less at birth.
7. Deaths of immature ("premature") newborns (in hospital) - Enter the number of deaths in the hospital during 1960 of newborns who weighed 5-1/2 lbs. (2500 grams) or less at birth.
8. Neonatal deaths of mature and immature newborns (in hospital) - Enter the number of deaths in the hospital during 1960 of newborns (mature and immature) who died within the first twenty-eight days following birth.
9. Newborns with staphylococcal infections - Include here all infants found during 1960 to be suffering from a staphylococcal 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 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, or an interview by a member of the department's staff, during a single day in which he received service under appropriate professional direction; or a treatment, examination, or transfusion of blood or blood derivative given during a single day under professional direction to a patient in the unit or elsewhere in the hospital. In cases other than social service the patient is in attendance in the hospital; for social service, he may or may not be in attendance in the hospital. Physiotherapy treatments, including diathermy and other, 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 1960 to in-patients (Col. 1), and to out-patients (Col. 2) (as defined on p. 14). Show also the sum of in-patient and out-patient services under "Total" (Col. 3).

IV, DEPARTMENTAL SERVICE STATISTICS - concluded

F - Other services or treatments (concluded)

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

In this subsection record the total services expressed as patients, and/or visits, provided during 1960 on an out-patient basis, (i.e., to patients not under treatment as in-patients) by the organized out-patient department, by special departments or units, and by the organized 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 emergency unit - An organized unit (associated usually with the out-patient department) set up to provide emergency care to persons suffering from injury, shock, or other acute conditions requiring emergency treatment. Enter the number of visits to the emergency unit during 1960. Count as one visit the attendance by a patient one or more times during a single day at the emergency unit of the hospital.

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 organized 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 service department of the hospital. Attendance at different departments by the same patient in the same day shall be counted as separate visits.

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.

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 meal days for 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 1960 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 full- or part-time 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).

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 1960 by all personnel whether or not actually paid during the year. Gross salaries and wages shall comprise the following:

V. PERSONNEL - continued

Gross salaries and wages (during year)(concluded)

- (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 salaries 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 employee 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 1960, 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 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 whether perquisites are included or not 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.

V. PERSONNEL - continued

(PAGE 7 OF FACILITIES AND SERVICES RETURN)

A - Hospital administrator

This subsection refers exclusively to the chief administrative officer of the hospital who has the over-all responsibility for the daily operation of the hospital (excluding any Board member); information for assistant hospital administrators will be entered elsewhere (V, C(1)k and C(2)k). Where the medical superintendent, director of nursing, or secretary is also the hospital administrator, complete this subsection for him, not subsections B(1), D(1), or F(1)(a).

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. Registered Nurse - This item will be checked if the administrator holds current registration as a nurse in the province in which the hospital is located.
4. 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.
5. 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".
6. 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.

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. In the column "Number with specialist qualifications", indicate for full- and part-time staff the number with specialist certification. This is by the Royal College of Physicians and Surgeons of Canada, 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.

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").

V. PERSONNEL - continued

B - Medical staff (concluded)

2., 3. Radiologist, Pathologist - Enter here information for physicians employed in the specialties indicated.

4., 5. Residents and interns - Include in 4 all junior rotating interns and in 5 all residents and senior interns.

6. 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, who will be entered opposite the appropriate category.

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 Food and Nutrition, or 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.

V. PERSONNEL - continued

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

(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 including assistant hospital administrators. Professional qualification will require either graduation in the appropriate course from a recognized university, or qualifications accepted by the appropriate professional organization.

(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 of full- and part-time staff 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 as directors and supervisors of nursing services. Exclude private duty nurses.

(a) Graduate nurses - Persons who have graduated from a school of nursing approved by the legally appointed body in the province. 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.

V. PERSONNEL - continued

E - Nursing staff - other (concluded)

(c) Nursing assistants and aides

(i) Qualified - Persons who have completed a formal course of training, which has been approved by a provincial authority or a recognized national organization, 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, which has been approved by a provincial authority or a recognized national organization, 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. Specifically, this category would include persons trained on the job by the hospital, which training is not recognized as stated in items (a) to (d) above.

(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 administrative 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, professional or otherwise, primarily engaged in operating the heating, cooling, air conditioning, lighting, power, water, and sewage disposal units of the hospital.

V. PERSONNEL - continued

F - Other personnel (concluded)

(g) Maintenance of the physical plant - Include here all persons, professional or otherwise, 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.

(PAGES 10 AND 11 OF FACILITIES AND SERVICES RETURN)

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

In this subsection, accumulated hours of work are to be reported for all hospital-paid personnel employed by the hospital at any time during 1960. (It should be noted that salaries and wages for all such personnel should be reported on Form HS-2, either separately by departments on pages 9 and 10 or included in items such as special research projects and ambulance service on page 11.) For purposes of this subsection, "Persons employed" includes all persons who, in 1960, earned salaries or wages payable to them by the hospital, and persons who were under contract to the hospital and earned fees or other remuneration (see p. 23). Also included are physicians and others who received payments or special allowances for services rendered to the hospital.

Accumulated paid hours of work are to be reported for full-time and part-time personnel employed at any time during the year, whether or not still in the employ of the hospital on December 31. Hours covering paid holiday time and other paid leave are to be included for all categories of personnel, including students. For student nurses, probationers, affiliates-in, nursing assistant trainees, and other students, include duty and classroom hours even if not paid.

The hours of work of hospital personnel are to be allocated as far as possible to the various departments of the hospital according to the personnel categories designated. In each instance the departmental allocation of hours of work should follow the allocation of the "Gross salaries and wages" on pages 9 and 10 of Form HS-2, Financial Return. For personnel employed in more than one capacity or in several departments, during the year, their hours of work are to be allocated appropriately as far as possible. Only where hours cannot be allocated to particular departments through lack of any service record or financial record within the hospital should such hours be entered under 1 (a), "Undistributed as to department", page 10.

The definitions of the individual departments for purposes of compiling hours of work correspond to the definitions provided in the Revenue Fund Expense section of the Instructions and Definitions, Part II, - Financial Return.

V. PERSONNEL - concluded

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

For Nursing Education enter all classroom hours in the appropriate category for each type of student or trainee employed in the hospital. Enter here also in Columns 2 and 6, as appropriate, hours of work spent in giving class instruction. Hours of work for out-patient services provided by hospitals not having an organized out-patient department will be included with the hours of work of the direct care nursing units or the appropriate special service department doing the work. For organized out-patient departments and organized emergency units, the hours of work will be shown separately.

Column headings (see also definitions on pages 25-29)

Total - Column 1 is the sum of Columns 2 to 6 and represents the total hours of work for all personnel of the hospital during the year.

Graduate nurses - Includes the paid hours of work for all personnel of the hospital who are qualified graduates from an approved school of nursing.

Student nurses - Includes the hours of work for all hospital personnel 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. Do not include qualified nursing assistants or nursing assistant trainees, who are to be included under "Other nursing staff".

Orderlies - Includes paid hours of work for all orderlies and student orderlies employed by the hospital.

Other nursing staff - Includes paid hours of work for all other members of the nursing team. Specifically include all qualified and trainee nursing assistants and aides, other nursing auxiliaries, and ward clerks.

Other paid staff - Includes paid hours of work for all professional, technical, and other non-nursing employees of the hospital, and related trainees, i.e., other than those categories specified in Columns 2 to 5.

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.

In answering items A and B, the hospital is to report training facilities here only where the institution is considered in A to provide both classroom and clinical facilities, or in B to provide only the basic clinical facilities, for a training program. Hospitals which provide only clinical experience in a specialty to students from some other nursing school will not report their facilities on page 12 of the Return, but only on page 13.

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 for the category 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 graduate nurses. Where affiliation is applicable to the training of nursing assistants or technical personnel, information concerning such affiliation should be entered in the blank space at the bottom of page 13.

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.

ANNUAL RETURN OF HOSPITALS

For the year ended

December 31, 1960

PART I - FACILITIES AND SERVICES

Make constant reference
to Instructions and Def-
initions, Part I, when com-
pleting this form.

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.

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.

.....
Hospital Administrator.....
Provincial Authority.....
Date.....
Date

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

ANNUAL RETURN OF HOSPITALS - PART I

(Name of hospital)

(City, Town, etc.)

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	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
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"/>

II. BEDS

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

10 Check whether ☐ federal or ☐ provincial standards have been used for Rated Bed Capacity.

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

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

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

	Item	Beds and cribs set up, Dec. 31		
		Standard ward	Preferred accommodation	Total
25	1) Number of beds in rooms having 1 bed each			
26	2) Number of beds in rooms having 2 beds each			
27	3) Number of beds in rooms having 3 beds each			
28	4) Number of beds in rooms having 4 beds each			
29	5) Number of beds in rooms having 5-7 beds each			
30	6) Number of beds in rooms having 8-10 beds each			
31	7) Number of beds in rooms having 11-15 beds each			
32	8) Number of beds in rooms having 16-25 beds each			
33	9) Number of beds in rooms having 26-35 beds each			
34	10) Number of beds in rooms having over 35 beds each			
35	11) Number of beds not in rooms			
36	Total beds and cribs (Col. 3 agrees with line 22, Col. 2, above)			

ANNUAL RETURN OF HOSPITALS - PART I

(Name of hospital)

(City, Town, etc.)

III. UTILIZATION DATA (service statistics)

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

Item	Patient-days	Item	Patient-days
1. Type of accommodation charged:		2. Responsibility for payment:	
(a) Standard ward		(a) Provincial Plan	
(b) Semi-private room		(b) Federal government	
(c) Private room		(c) Workmen's compensation boards	
Total patient-days during year		(d) Non-residents of the province	
		(e) Uninsured residents of the province	
		(f) Insured residents, care not responsibility of Provincial Plan	
		Total patient-days during year	

* Total for B 1 equals total for B 2, each representing total patient-days during year for all adults and children.

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

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

Item	Adults and children	Newborn	Total
1. In hospital at start of year			
2. Admissions during year			
3. Total under care during year (1 plus 2)			
4. Discharges during year			
5. Deaths during year			
6. Total separation during year (4 plus 5) (agrees with Line 33, Columns 1 and 2, below)			
7. In hospital at end of year (3 minus 6)			

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

Length of stay SINCE ADMISSION	Number of separations		Total patient-days, SINCE ADMISSION, of separations	
	Adults and children	Newborn	Adults and children	Newborn
1) 1 day				
2) 2 days				
3) 3 days				
4) 4 days				
5) 5 days				
6) 6 days				
7) 7 days				
8) 8 days				
9) 9 days				
10) 10 days				
11) 11-14 days				
12) 15-19 days				
13) 20-29 days				
14) 30-59 days				
15) 60 or more days				
Total (Separations agree with line 16 above.)				

ANNUAL RETURN OF HOSPITALS - PART I

(Name of hospital)

(City, Town, etc.)

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

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

1	Check or specify schedule of unit values that has been used: <input type="checkbox"/> federal <input type="checkbox"/> provincial Other (specify): _____				
---	--	--	--	--	--

Item	Patients of the hospital			Referred in to your laboratory	Total for your hospital
	In-patients	Out-patients	Total patients		
I. Done in your hospital:	1	2	3	4	5
(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					
	Check whether work done by				
	Lab.	Other			
(i) Blood bank	<input type="checkbox"/>	<input type="checkbox"/>			
(j) B.M.R.	<input type="checkbox"/>	<input type="checkbox"/>			
(k) E.C.G.	<input type="checkbox"/>	<input type="checkbox"/>			
(m) E.E.G.	<input type="checkbox"/>	<input type="checkbox"/>			
(n) Other (specify)	<input type="checkbox"/>	<input type="checkbox"/>			
15 Total (lines 2 to 14)					
16 2. Referred out to provincial laboratory					
17 3. Referred out to other laboratory					
18 GRAND TOTAL (lines 15, 16 & 17)					

4. Laboratory examinations done routinely on admission (please check or specify):

19	<input type="checkbox"/> Urinalysis	<input type="checkbox"/> Haemoglobin	<input type="checkbox"/> Serology	Other (specify) _____
----	-------------------------------------	--------------------------------------	-----------------------------------	-----------------------

B. Deaths and autopsies (during year)

Item	Number
1. Deaths in hospital (excluding stillbirths) (a) Under 48 hours	
(b) 48 hours and over	
Total (agrees with page 3, line 15, col. 3)	
2. Autopsies - (a) of hospital deaths	
(b) of other deaths	
(c) of hospital stillbirths	

ANNUAL RETURN OF HOSPITALS - PART I

(Name of hospital)

(City, Town, etc.)

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 - (i) Standard			
5	(ii) Miniature			
6	Total (i plus ii)			
7	Own films read by a member of your medical staff - (iii) By own radiologist			
8	(iv) By others			
9	Total (iii plus iv)			
10	Own films referred out for reading - (v) Referred to Provincial T.B. Authority			
11	(vi) Referred elsewhere and charged to your hospital			
12	(vii) Referred elsewhere and not charged to your hospital			
13	Total (v plus vi plus vii)			
14	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
15 (a) Superficial X-ray therapy					
16 (b) Deep X-ray therapy					
17 (c) Radium therapy					
Other radioactive therapy (specify):					
18 (d)					
19 (e)					

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

20 (a) Diagnostic X-ray machines: (i) Mobile or portable	(ii) Miniature
21 (iii) Stationary (excl. i and ii) Total ..	of (iii) No. used for fluoroscopy
22 (b) Therapeutic X-ray machines: (i) Deep	(ii) Superficial
23 (c) Gamma ray beam therapy units: (i) Cobalt	(ii) Radium
	(iii) Cesium

me of hospital)

(City, town, etc.)

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

[illegible]

D. Surgical services (during year)

- [illegible]

E. Obstetrical services (during year)

1. Total deliveries
2. Caesarean sections
3. Maternal deaths (in hospital)
4. Stillbirths
5. Total live births (including immature births reported on line 16 below)
6. Immature ("premature") births
7. Deaths of immature ("premature") newborn (in hospital)
8. Neonatal deaths of mature and immature newborns (in hospital)
9. Newborns with staphylococcal infections

F. Other services or treatments

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

Type of unit, clinic, 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	Interview	XXX	XXX	
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			
	(p) Other (specify type and unit of service, and give number of units)				
35					
36	(q)				
37	(r)				

2. Summary of out-patient and organized emergency work of the hospital during year (see Definitions and Instructions, Part I)

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

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

* Must agree with patient days page 3, line 7, col. 1

(1) In-patients*

(2) Staff and other

(3) Total

ANNUAL RETURN OF HOSPITALS - PART I

(Name of hospital)

(City, Town, etc.)

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

A. Hospital administrator - Check or make entry for each item as applicable. Do not include this person in subsections B to F.

- 1 ☐ 1. Degree or diploma in hospital administration ☐ 2. Medical degree ☐ 3. Registered Nurse
- 2 4. Extension course graduate in hospital administration (specify) _____
- 3 5. Other related training (specify) _____
- 4 6. Years of experience in hospital administration _____
- 5 7. Specify other hospital responsibilities, if any _____

B. Medical staff

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

* Certification in specialty related to hospital duties for both full-time and part-time personnel.

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
1. Full-time:	No.	No.	No.	No.	Hours	\$	\$
13 (a) Dietitians							
14 (b) Medical record librarians							
15 (c) Laboratory technicians							
16 (d) Radiological technicians							
17 (e) Physiotherapists							
18 (f) Occupational therapists							
19 (g) Pharmacists							
20 (h) Psychologists							
21 (i) Medical social workers							
22 (j) Other social workers							
23 (k) Other professional-technical personnel							
24 Total full-time							
2. Part-time:							
25 (a) Dietitians							
26 (b) Medical record librarians							
27 (c) Laboratory technicians							
28 (d) Radiological technicians							
29 (e) Physiotherapists							
30 (f) Occupational therapists							
31 (g) Pharmacists							
32 (h) Psychologists							
33 (i) Medical social workers							
34 (j) Other social workers							
35 (k) Other professional-technical personnel							
36 Total part-time							

ANNUAL RETURN OF HOSPITALS - PART I

(Name of hospital)

(City, Town, etc.)

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		Separations during year		Number with specialist qualifications*	Gross salaries and wages during year
	Positions established	Persons employed	Positions established	Persons employed	Full-time	Part-time		
	No.	No.	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. Out-patient and emergency								
9 9. Medical-surgical								
10 10. Other								
11 Total								

* Post-graduate or post-basic training in specialty related to hospital duties for both full-time and part-time personnel.

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:						
12 (i) Head nurses						
13 (ii) General duty nurses						
14 (iii) Other graduate nurses						
15 (b) Student nurses						
(c) Nursing assistants and aides:						
16 (i) Qualified						
17 (ii) Trainee						
18 (d) Orderlies						
19 (e) Other nursing personnel						
20 Total full-time						
2. Part-time:						
(a) Graduate nurses:						
21 (i) Head nurses						
22 (ii) General duty nurses						
23 (iii) Other graduate nurses						
24 (b) Student nurses						
(c) Nursing assistants and aides:						
25 (i) Qualified						
26 (ii) Trainee						
27 (d) Orderlies						
28 (e) Other nursing personnel						
29 Total part-time						

ANNUAL RETURN OF HOSPITALS - PART I

(Name of hospital)

(City, Town, etc.)

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 (see page 7, lines 1-5) and assistant hospital administrators (see page 7, lines 6, 23, 35)
 ** Excluding dietitians and dietitians in training. (see page 7, lines 13, 25)

G. Total personnel (subsections A to F, including Administrator)

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)

(City, Town, etc.)

V. PERSONNEL - continued

H. Distribution of paid hours of work (during year) Include in the appropriate column all student hours, duty and classroom, even if not paid.

Department		Accumulated paid hours during year					
		Total	Graduate Nurses	Student Nurses	Orderlies	Other nursing staff	Other paid staff
		1	2	3	4	5	6
I. 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) Organized emergency unit						
6	(iv) Organized out-patient department						
7	Total direct care (i to iv)						
(d) Special services:							
8	(i) Operating room						
9	(ii) Central supply room						
10	(iii) Pharmacy						
11	(iv) Delivery room						
12	(v) Laboratory						
13	(vi) Radiology						
14	(vii) Physiotherapy						
	Other (specify):						
15	(viii)						
16	(ix)						
17	Total special services (i to ix)						

ANNUAL RETURN OF HOSPITALS - PART I

(Name of hospital)

(City, Town, etc.)

V. PERSONNEL - concluded

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

Include in the appropriate column all student hours, duty and classroom, even if not paid.

Department	Accumulated paid hours during year					
	Total	Graduate Nurses	Student Nurses	Orderlies	Other nursing staff	Other paid staff
	I	2	3	4	5	6
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 Total general services (a to g)						
3. Other (incl. research, ambulance, ancillaries)						
4. GRAND TOTAL (sum of 1, 2, and 3)						

ANNUAL RETURN OF HOSPITALS - PART I

(Name of hospital)

(City, Town, etc.)

VI. TRAINING FACILITIES

Item	Registered nurses	Nursing assistants	Orderlies	Technicians		Medical 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:						
9 (1) At December 31						
(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)						
(2) To other agency? (if yes, specify agency)						
14 M. Is the trainee paid a salary or stipend at any stage of the training? (if yes, 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).

ANNUAL RETURN OF HOSPITALS - PART I

(Name of hospital)

(City, Town etc.)

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

O. In what fields is training provided to affiliates?

Field

1

2

3

2 (Specify) (1) Field(s)

3 (2) Length of training for each field ..

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

Field

1

2

3

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

5 (2) Institution(s) for each field

6 (3) Length of training for each field

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

Field

1

2

3

7 (specify) (1) Field(s)

8 (2) Length of training for each field ..

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, Part I)

