

100 Mile District General Hospital Facility Profile - 2023/24

This profile provides an overview of the services provided at 100 Mile District General Hospital in the areas of:

Inpatient Cases & Days | Inpatient Surgery & Surgical Day Care | Emergency Department

The information provided within this document reflects services provided at the hospital, regardless of patient residence. This report is based on adults and children only. Newborns have been excluded. For some indicators, small volumes (<5) have been suppressed.

NOTE: On March 16, 2020 a public health emergency was declared in British Columbia due to the COVID-19 global pandemic. Data from 2019/20 Q4 and onwards may have been impacted by changes in medical services in response to the COVID-19 Pandemic.



More information is available upon request from Interior Health Data and Analytics Service Department. Inquiries and comments can be addressed by emailing <u>IHAnalyticsandReporting@interiorhealth.ca</u>



Inpatients

Inpatient Data provides information about acute care hospitals and the patients who are admitted to them. This page includes the number of beds in operation, occupancy rates, patient age and residence, and admissions through the Emergency Department (ED), and the average Resource Intensity Weight (RIW).

TABLE 1. Number of Hospital Beds, 2021/22 - 2023/24

Hospital Bed Type	2021/22	2022/23	2023/24
Medical / Surgical Beds	16	16	16
Psychiatric Beds	-	-	-
ICU / CCU / HAU Beds	-	-	-
Rehabilitation Beds	-	-	-
Obstetric Beds	-	-	-
Pediatric Beds	-	-	-
Total Beds in Operation	16	16	16

SOURCE: MIS/GL; Excludes **Bassinets** 16

(March 31st).

TABLE 1. Beds funded and in

operation at fiscal year end

FIGURE 1. Percent of Inpatient Cases by Age Group, 2023/24

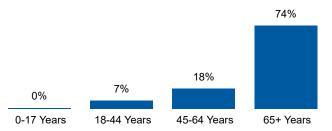


FIGURE 1. Elderly patients (65+ years of age) usually account for the largest percentage of inpatients cases at Interior Health hospitals. SOURCE: Discharge Abstracts Database

FIGURE 2. Percentage of Inpatient Cases by Patient Residence, 2023/24

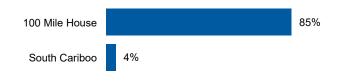
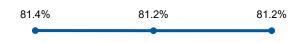


FIGURE 2. Shows the percentage of hospitalizations based on where the patients live. Only the most common LHAs are shown. SOURCE: Discharge Abstracts Database.

TABLE 2. Occupancy Rate and Average Resource Intensity Weight (RIW), 2021/22 - 2023/24

	2021/22	2022/23	2023/24
Occupancy Rate	96%	105%	97%
Average RIW	1.15	1.18	1.06

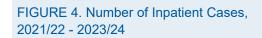


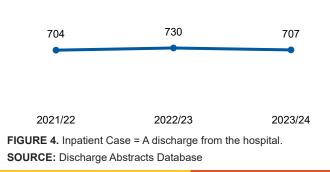


2021/22 2022/23 2023/24 FIGURE 3. The majority of inpatients at IH are usually admitted via the FD

SOURCE: Discharge Abstracts Database

TABLE 2. Occupancy Rates are presented as an average, based on the number of beds staffed at March 31st each year. RIWs provide the estimated cost per hospitalization relative to the average inpatient in Canada (RIW = 1.0). A higher RIW means a higher cost per patient case. SOURCE: Occupancy: MIS/GL; Excludes newborns and pediatrics in the nursery. RIW: Discharge Abstracts Database; CMG 2023







Inpatients

Grouping Methodologies categorize inpatients into similar groups for reporting purposes:

Major Clinical Categories (MCCs) are large groups generally related to body systems;

Case Mix Groups (CMGs) further categorize inpatients into groups based on similarities of diagnosis, intervention, length of stay, and resource requirements such as costs.

FIGURE 5. Number of Inpatient Cases by Most Common MCCs, 2023/24

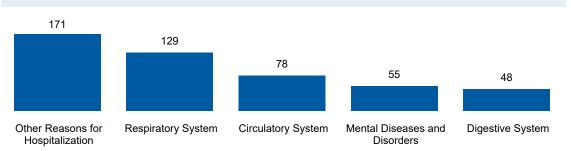
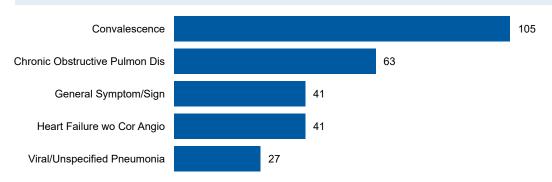


FIGURE 5 & 6. Show the most common types of inpatient cases. Meaning, the MCCs and CMGs which accounted for the most hospitalizations. Some conditions are split into several CMGs due to differences in treatment and/or costs. Example: Vaginal Deliveries are split into four CMGs.

FIGURE 6. Number of Inpatient Cases by Most Common CMGs, 2023/24



SOURCE: Discharge Abstracts Database; CMG 2023

FIGURE 7. Number of Inpatient Days by Most Common MCCs, 2023/24

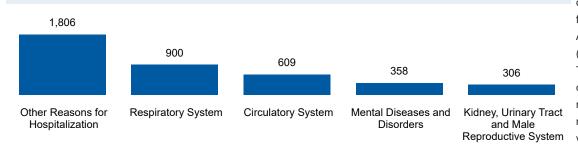


FIGURE 8. Number of Inpatient Days by Most Common CMGs, 2023/24

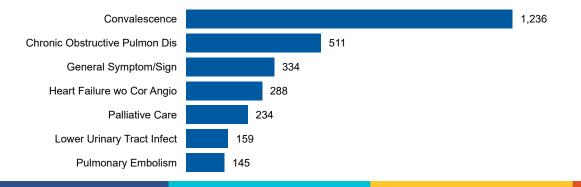


FIGURE 7 & 8. Show the conditions that accounted for the most inpatient days. Alternate Level of Care (ALC) Days are included. The most common conditions do not necessarily account for the most inpatient days and vice versa. Example: At most Interior Health hospitals, there are a large number of vaginal deliveries, but because those patients have very short hospital stays, they do not account for a significant proportion of the hospital days.

SOURCE: Discharge Abstracts Database; CMG 2023



Inpatients

Inpatient Days are calculated from admission date until discharge date, reported by: **Acute/Rehab:** Days where the patient received acute care or rehabilitation service; **Alternate Level of Care (ALC):** Days when acute services are no longer required, but patient remains in hospital waiting for other resources.

FIGURE 9. Number of Inpatient Days, 2021/22 - 2023/24

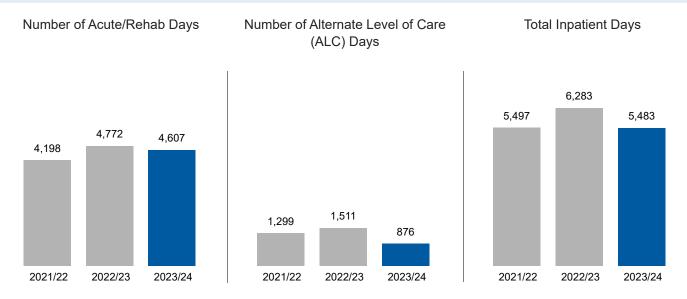


FIGURE 9. Shows the three year trend in the number of Acute/Rehab, ALC, and Total Inpatient Days utilized. **SOURCE:** Discharge Abstracts Database

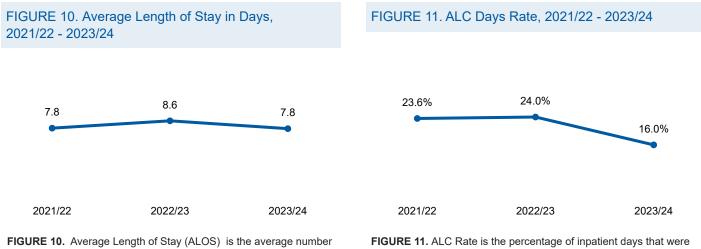


FIGURE 10. Average Length of Stay (ALOS) is the average number of days per hospitalization reported by Total Days (Including ALC). **SOURCE:** Discharge Abstracts Database

FIGURE 11. ALC Rate is the percentage of inpatient days that were designated as Alternate Level of Care. SOURCE: Discharge Abstracts Database

Inpatient Surgical Cases

Inpatient Surgeries are generally not performed at 100 Mile District General Hospital, therefore Figures 12 to 14 are omitted.



Surgical Day Care

Surgical Day Care (SDC) Case: A patient who undergoes a resource-intensive procedure, performed on an outpatient basis. The patient is not admitted and usually leaves on the same day as the procedure.

FIGURE 15. Number of Surgical Day Care Cases, 2021/22 - 2023/24

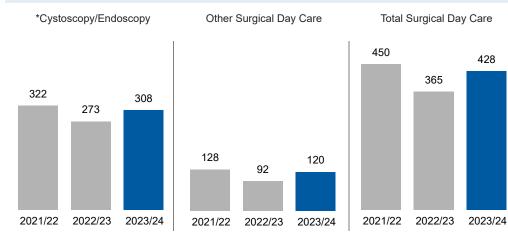


FIGURE 15. Provides the number of SDC cases broken down by *Cystoscopies and Endoscopies vs. other SDC procedures. * Cystoscopy and Endoscopy = Principal procedure of cystoscopy, gastrointestinal endoscopy as defined by the Ministry of Health. SOURCE: Discharge Abstracts Database

FIGURE 16. Number of SDC Cases by CACS Group (Excluding *Cystoscopy/Endoscopy), 2023/24

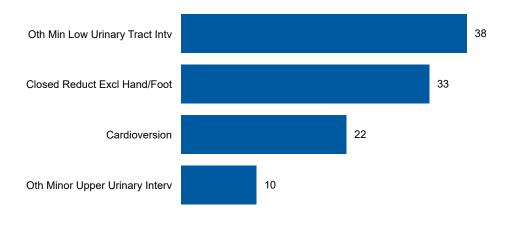


FIGURE 16. Shows the most common SDC cases excluding Cystoscopies and Endoscopies. The cases are reported based on the Comprehensive Ambulatory Classification System (CACS) grouping methodology. SOURCE: Discharge Abstracts Database; CACS 2023

FIGURE 17. Percentage of SDC Cases by Patient Residence, 2023/24

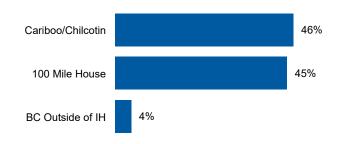


FIGURE 17. Shows who utilized SDC services based on what Local Health Area the patient lives. Only the most common LHAs are shown.

SOURCE: Discharge Abstracts Database

FIGURE 18. Percentage of SDC Cases by Age Group, 2023/24

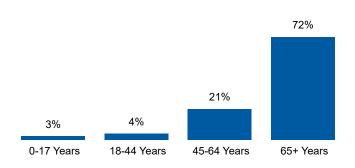


FIGURE 18. Elderly patients (65+ years of age) accounted for the most SDC cases at many of the Interior Health Hospitals. **SOURCE:** Discharge Abstracts Database



Emergency Department

Emergency Department (ED) data provides information on visits made to the Emergency Room. The data, unless specified otherwise, is based on unscheduled ED visits.

FIGURE 19. Number of Emergency Department Visits, Unscheduled vs. Scheduled, 2021/22 - 2023/24

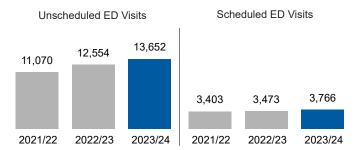


FIGURE 19. Shows the number and trend of ED visits. Fiscal Years with less than five scheduled ED visits are excluded. **SOURCE:** Unscheduled: Admissions Universe; Scheduled: MIS





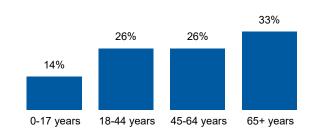


FIGURE 20. Unlike Inpatient Cases, elderly patients usually do not account for the most ED visits at many Interior Health Hospitals. SOURCE: Admissions Universe

FIGURE 22. Number of Unscheduled ED Visits

Admitted to Hospital, 2021/22 - 2023/24



FIGURE 23. Percentage of Unscheduled ED Visits by Triage Level, 2021/22 - 2023/24

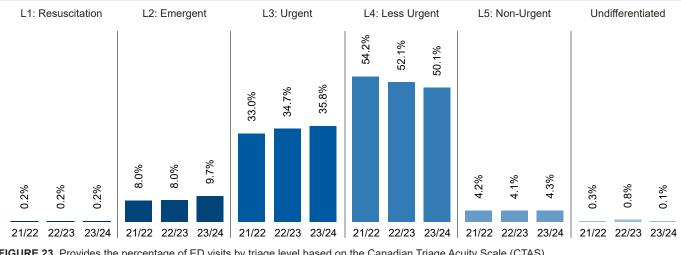


FIGURE 23. Provides the percentage of ED visits by triage level based on the Canadian Triage Acuity Scale (CTAS). **SOURCE:** Admissions Universe