

## Invermere & District Hospital Facility Profile - 2023/24

This profile provides an overview of the services provided at Invermere & District 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
202

Medical / Surgical Beds
Psychiatric Beds

Psychiatric Beds
ICU / CCU / HAU Beds

Rehabilitation Beds
Obstetric Beds

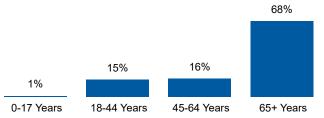
Obstetric Beds
Pediatric Beds

Total Beds in Operation
Image: Comparison of Comp

| 2023/24 | 2022/23 | 021/22 |
|---------|---------|--------|
| 8       | 8       | 8      |
| -       | -       | -      |
| -       | -       | -      |
| -       | -       | -      |
| -       | -       | -      |
| -       | -       | -      |
| 8       | 8       | 8      |
|         |         |        |

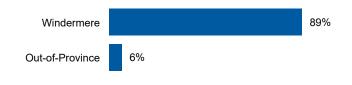
**TABLE 1.** Beds funded and inoperation at fiscal year end(March 31st).**SOURCE:** MIS/GL; ExcludesBassinets

# 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 | 82%     | 92%     | 99%     |
| Average RIW    | 0.87    | 0.91    | 0.95    |

FIGURE 3. Percentage of Inpatient Cases Admitted Through the ED, 2021/22 - 2023/24

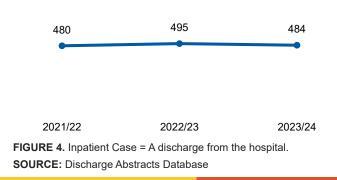


2021/22 2022/23 2023/24 FIGURE 3. The majority of inpatients at IH are usually admitted via the ED.

SOURCE: Discharge Abstracts Database

**TABLE 2.** Occupancy Rates are presented as an average, based on thenumber of beds staffed at March 31st each year. RIWs provide theestimated cost per hospitalization relative to the average inpatient inCanada (RIW = 1.0). A higher RIW means a higher cost per patient case.**SOURCE:** Occupancy: MIS/GL; Excludes newborns and pediatrics in thenursery. 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

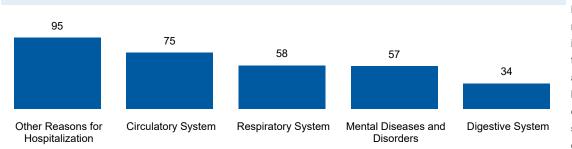


FIGURE 5 & 6. Show the most common types of inpatient cases. Meaning, the MCCs and CMGs which accounted for the most hospitalizations. Some conditions are split into several CMGs due to differences in treatment and/or costs. Example: Vaginal Deliveries are split into four CMGs.

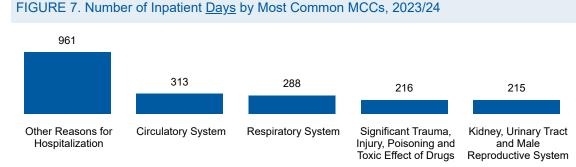
SOURCE: Discharge

2023

Abstracts Database; CMG

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

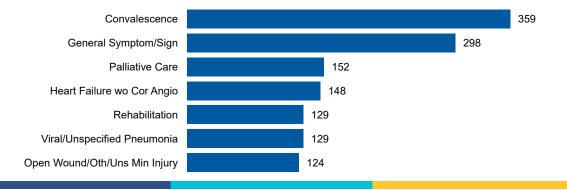




#### FIGURE 7 & 8. Show the conditions that accounted for the most inpatient days. Alternate Level of Care (ALC) Days are included. The most common conditions do not necessarily account for the most inpatient days and vice versa. Example: At most Interior Health hospitals, there are a large number of 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

#### FIGURE 8. Number of Inpatient <u>Days</u> by Most Common CMGs, 2023/24

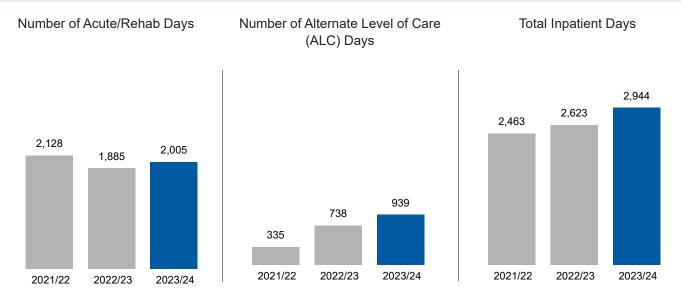




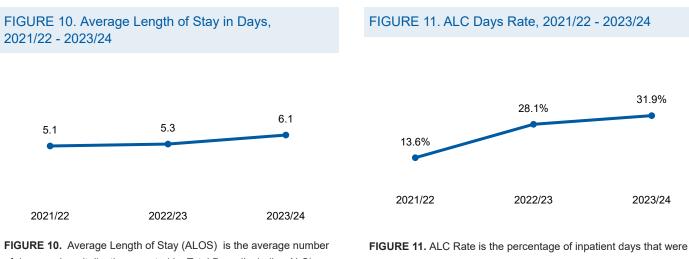
### Inpatients

**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.

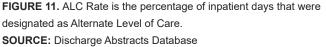
#### FIGURE 9. Number of Inpatient Days, 2021/22 - 2023/24



**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



### **Inpatient Surgical Cases & Surgical Day Care**

Inpatient Surgeries are generally not performed at Invermere & District Hospital,

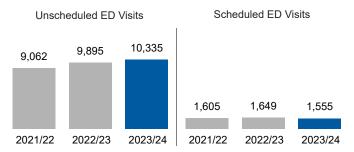
therefore Figures 12 to 18 are omitted.



### **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



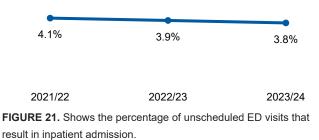


FIGURE 20. Percentage of Unscheduled ED Visits by Age Groups, 2023/24

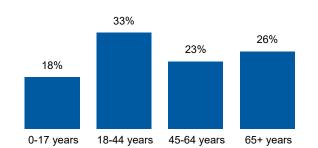
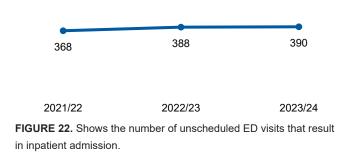


FIGURE 20. Unlike Inpatient Cases, elderly patients usually do not account for the most ED visits at many Interior Health Hospitals. SOURCE: Admissions Universe

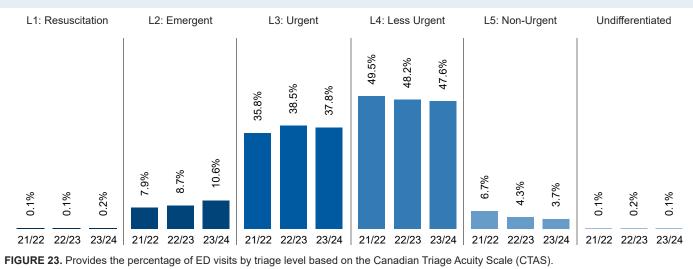
FIGURE 22. Number of Unscheduled ED Visits

Admitted to Hospital, 2021/22 - 2023/24



SOURCE: Admissions Universe

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



SOURCE: Admissions Universe

SOURCE: Admissions Universe