

Definition/Description:

Bed counts by WRHA facility and by WRHA program at the end of fiscal years 2000 to 2004.

Method:

Bed rates by program are calculated with WRHA user population groups that would “typically” utilize the resource (refer to beds by program table for details).

Source:

WRHA Bed Bap
Manitoba Health Population Registry

Findings:

Hospital Beds per 1000 Residents by Facility - 2000 – 2004

Beds by Facility	2000	2001	2002	2003	2004	Net Bed Change 2000-2004
Concordia Hospital	196	155 ¹	177 ²	179	179	-17
Deer Lodge Centre	497	497	487	487	487	-10
Grace General Hospital	279	279	272	268	257	-22
Health Sciences Centre	804	812 ³	784 ⁴	766 ⁵	762	-42
Manitoba Adolescent Treatment Centre	25	17 ⁶	17	17	17	-8
Misericordia Health Centre	208	208	208	208	208	0
Riverview Health Centre	388	388	388	388	388	0
St. Boniface General Hospital	553	537	527 ⁷	522 ⁸	488 ¹⁰	-65
Seven Oaks General Hospital	297	276 ⁹	276	275	285 ¹¹	-12
Victoria General Hospital	231	231	231	228	224 ¹²	-7
Winnipeg Regional Health Authority	3478	3400	3367	3338	3295	

Notes:

1. Closure of interim beds.
2. Additional Family Medicine beds.
3. Paediatric Extended Care Unit (PECU) opened; Labour-Delivery-Recovery-Postpartum (LDRP) opened.
4. Clinical Teaching Unit (CTU) restructuring; Transfer chemical withdrawal to Mental Health program.
5. Revised; In-patient surgery beds converted to Day Surgery.
6. In-patient beds closed and re-directed to day program.
7. Clinical Teaching Unit (CTU) re-structuring.
8. In-patient surgery beds converted to Day Surgery.
9. Interim beds closed. Family Medicine beds opened. Post Acute Neurosurgical Unit (PANSU) opened.
10. St. Boniface General Hospital bed re-configuration.
11. Ten (10) additional Family Medicine beds funded.
12. Four (4) gynecology beds closed due to decreased volumes.

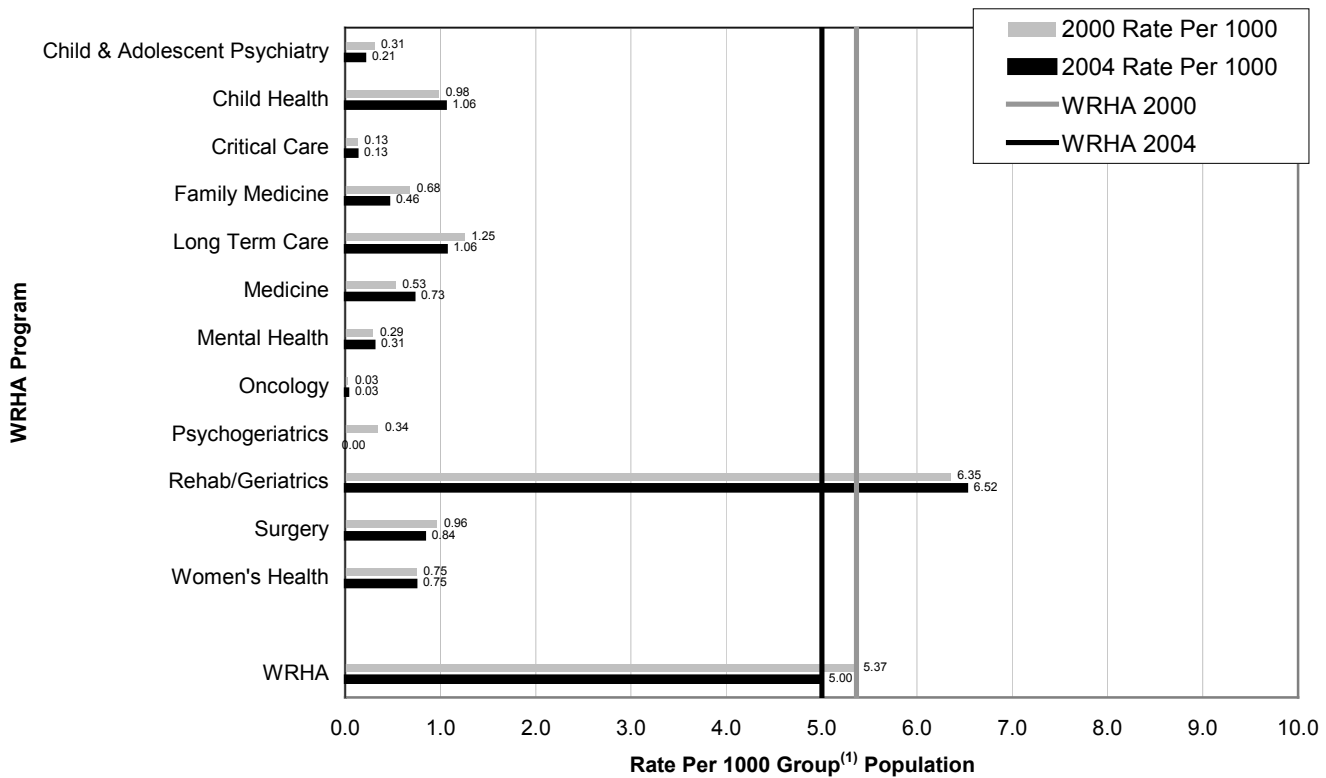
Hospital Beds per 1000 Residents by WRHA Program - 2000 – 2004

Beds by Program	2000		2001		2002		2003		2004		Net Bed Change 2000- 2004
	Beds	Rate Per 1000	Beds	Rate Per 1000	Beds	Rate Per 1000	Beds	Rate Per 1000	Beds	Rate Per 1000	
Child & Adolescent Psychiatry ^(a)	46	0.31	38 ⁸	0.25	31	0.21	31	0.21	31	0.21	-15
Child Health ^(a)	148	0.98	148	0.99	144	0.96	156 ⁹	1.05	156	1.06	8
Critical Care ^(b)	84	0.13	84	0.13	84	0.13	84	0.13	84	0.13	0
Family Medicine ^(b)	440	0.68	455	0.70	470 ²	0.72	467	0.71	304 ¹⁰	0.46	-136
Long Term Care ^(b)	811	1.25	711 ^{1,7}	1.09	701	1.07	701	1.07	701	1.06	-110
Medicine ^(b)	341	0.53	341	0.52	305 ^{3,5}	0.47	297	0.45	478 ¹⁰	0.73	137
Mental Health ^(b)	189	0.29	189	0.29	202 ³	0.31	201	0.31	201	0.31	12
Oncology ^(b)	19	0.03	19	0.03	19	0.03	19	0.03	19	0.03	0
Psychogeriatrics ^(c)	31	0.34	31	0.34	31	0.03	31	0.03	0 ¹¹	0.00	-31
Rehab/Geriatrics ^(c)	571	6.35	576	6.37	575	6.33	575	6.32	596 ¹¹	6.52	25
Surgery ^(b)	624	0.96	637	0.98	624	0.95	598 ^{4,6}	0.91	550 ¹²	0.84	-74
Women's Health ^(d)	174	0.75	171	0.73	181	0.77	178	0.76	175	0.75	1
WRHA	3478	5.37	3400	5.22	3367	5.15	3338	5.09	3295	5.00	-183

Notes:

- a) Crude rates are based on WHR population in the 0-17 age group.
 - b) Crude rates are based on total WHR population.
 - c) Crude rates are based on WHR population aged 65 and older.
 - d) Crude rates are based on WHR female population aged 14 and older.
1. Closure of interim beds.
 2. Additional Family Medicine beds.
 3. Clinical Teaching Unit (CTU) restructuring; Transfer chemical withdrawal to Mental Health program.
 4. Revised; In-patient surgery beds converted to Day Surgery.
 5. Clinical Teaching Unit (CTU) re-structuring.
 6. In-patient surgery beds converted to Day Surgery.
 7. Interim beds closed. Family Medicine beds opened. Post Acute Neurosurgical Unit (PANSU) opened.
 8. In-patient beds closed and re-directed to day program.
 9. Revised. Intermediate Care Nursery (IMCN) at St. Boniface General Hospital now reported as beds instead of bassinets.
 10. Beds transferred from Family Medicine to Medicine at Victoria General Hospital Grace General Hospital.
 11. Beds now rolled up in Rehab-Geriatrics program.
 12. 10 beds at Victoria General Hospital transferred to Medicine. St. Boniface General Hospital bed re-configuration.

WRHA Bed Crude Rates by Program



1) Rates are calculated using the WHR population groups that "typically" utilize a bed dedicated to a program. Refer to program beds table footnotes.

Highlights:

- Over the 5 years shown, the region saw a small decrease in the number of beds per 1000 Winnipeg residents from 5.37 per 1000 on March 31, 2000 to 5.00 per 1000 on March 31, 2004. Among the programs, Rehab/Geriatrics represented the greatest coverage of any population segment using program beds. The actual number of beds for Rehab Geriatrics netted a 25 bed increase across the five years shown due to the amalgamation of Psycho-Geriatric beds into the program.
- Long Term care beds were reduced from 1.25 per 1000 WHR residents, on March 31, 2000 to 1.06 per 1000 WHR residents on March 31, 2004. Most program rate increases are due to re-distribution of beds among programs and facilities. No bed rate changes are apparent in Women's Health, Oncology or Critical Care.