

Acute Care Beds Per Catchment Area Population – FOI Request

Request:

For each BC Health Authority and BC: The most recent table, spreadsheet or other record of acute care beds per 1,000 population, adjusted for age structure and inter-regional flows including to PHSA.

Beds per capita

British Columbia averaged 8,620 acute care beds or 1.86 acute care beds per 1,000 population in 2015/16¹, not including NICU beds and children under one year old. Statistics on the number of beds per 1,000 population are sometimes reported in an attempt to compare capacity across jurisdictions or time. It is important to point out that these types of rates are not adjusted for age, the health status of the population, or other factors that put a region's capacity in the context of the needs of the population it is serving.

Beds per catchment area

The beds per catchment area population adjusts for the age structure of a region's population as well as inter-regional flows. This adjusted rate ranges from a low of 1.56 in Vancouver Coastal Health Authority to a high of 2.38 in the North.²

Table 1: 2015/16 Beds per Population

	Interior	Fraser	Vancouver Coastal	Island	Northern	BC
Beds per 1,000 population (NOT age adjusted)	1.96	1.55	1.80	2.03	1.63	1.86
Beds per 1,000 catchment population (adjusted for age structure and inter-regional flows including to PHSA)	1.85	1.95	1.56	1.83	2.38	1.86

Source: OASIS/HAMIS Average of 2015/16 Quarterly Bed Reports, DAD 2015/2016 and PEOPLE2016

Note: Excludes NICU beds and population under 1 year old

The number of hospital beds that are needed to serve a population depends on many factors:

1. **Age structure of the population.** A population with a large proportion of seniors would generally require more beds per capita than an area with a small proportion of seniors.
2. **Health status of the population.** A healthier population would generally require fewer beds per capita than a population of people with poorer health.
3. **Location of tertiary services.** Tertiary services generally require highly specialized personnel and equipment. Also, tertiary services are generally centralized in a single location, such as the BC Children's Hospital, to provide care to all BC residents.
4. **Isolation of the population.** Because of the distance between communities, a province or region with isolated communities would require more hospital beds per capita than urban regions.

As such, the beds per 1000 population measure is not meaningful when considering the underlying age structure and the amount of tertiary and provincial services provided in Vancouver Coastal Health or Provincial Health Services Authority facilities. While the beds per catchment area population adjusts for age and inter-regional flows, the health status of the population and remoteness have not been taken into account, so this must also be taken into consideration when interpreting these statistics.

¹ *Historic_Bed_Series_updated_Quarterly, OASIS/HAMIS as of January 2017*, 2016 Population estimates (PEOPLE2016) (OASIS/HAMIS).

² Adjustments for inter-regional flows of weighted cases by age, excluding newborns (Discharge Abstract Database 2015/16). PHSA beds are included in the BC total and accounted for in the inter-regional flows.