

**LEGISLATIVE ASSEMBLY OF THE  
NORTHWEST TERRITORIES  
9<sup>TH</sup> ASSEMBLY, 2<sup>ND</sup> SESSION**

**TABLED DOCUMENT NO. 41-80(1)**

**TABLED ON MARCH 14, 1980**

TD 41-80(1)  
Tabled on March 14, 1980

# Annual Report



Territorial Hospital  
Insurance Services  
and Medicare  
1978-79

Territorial Hospital  
Insurance Services  
and Medicare



Annual Report  
for the period ending March 31, 1979

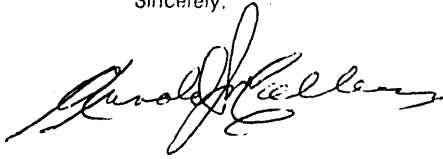
1 October 1979

Annual Report — T.H.I.S. and Medicare

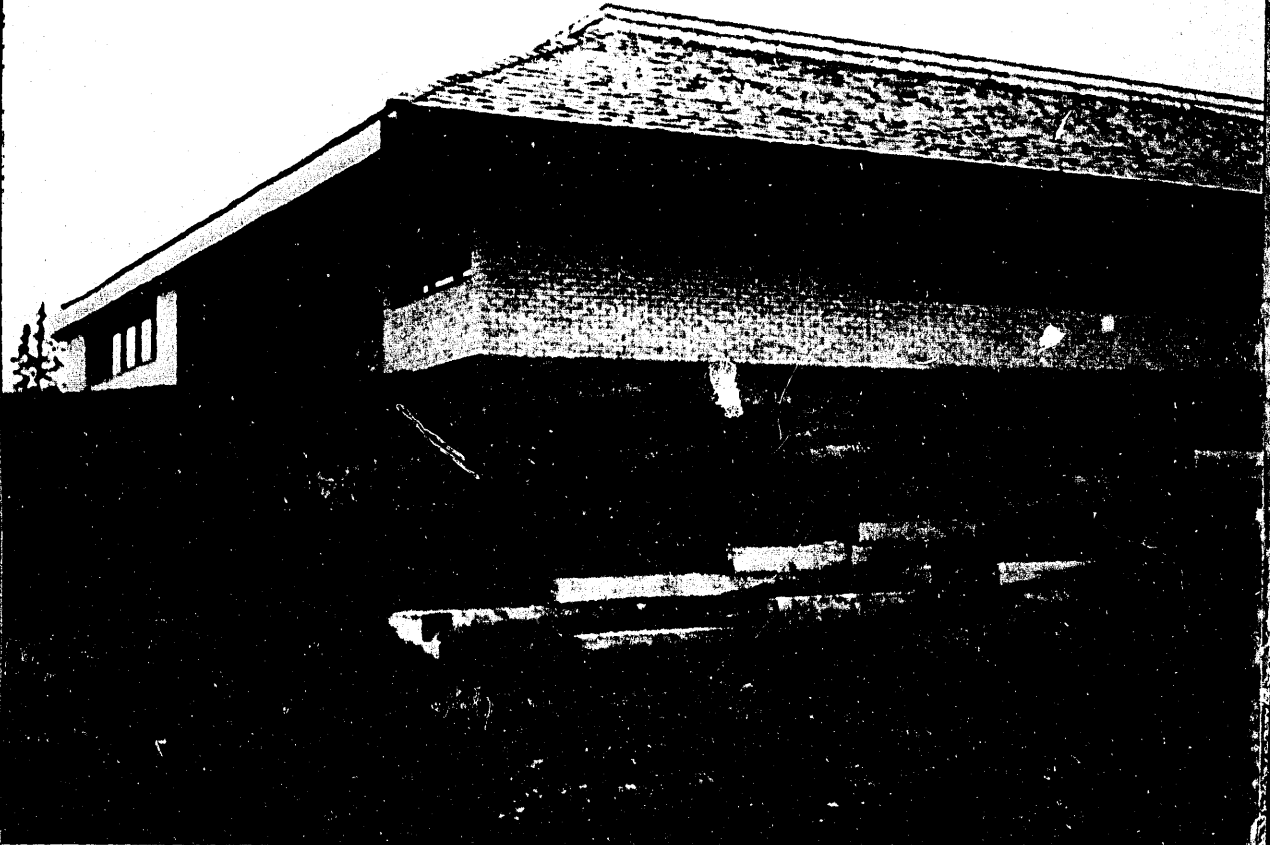
COMMISSIONER

I have the honour to present the Annual Report for  
T.H.I.S and Medicare, for the period ending 31 March  
1979.

Sincerely,

A handwritten signature in cursive script, appearing to read "Arnold J. McCallum".

Arnold J. McCallum,  
Minister

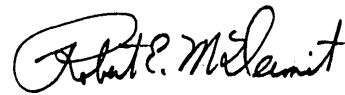


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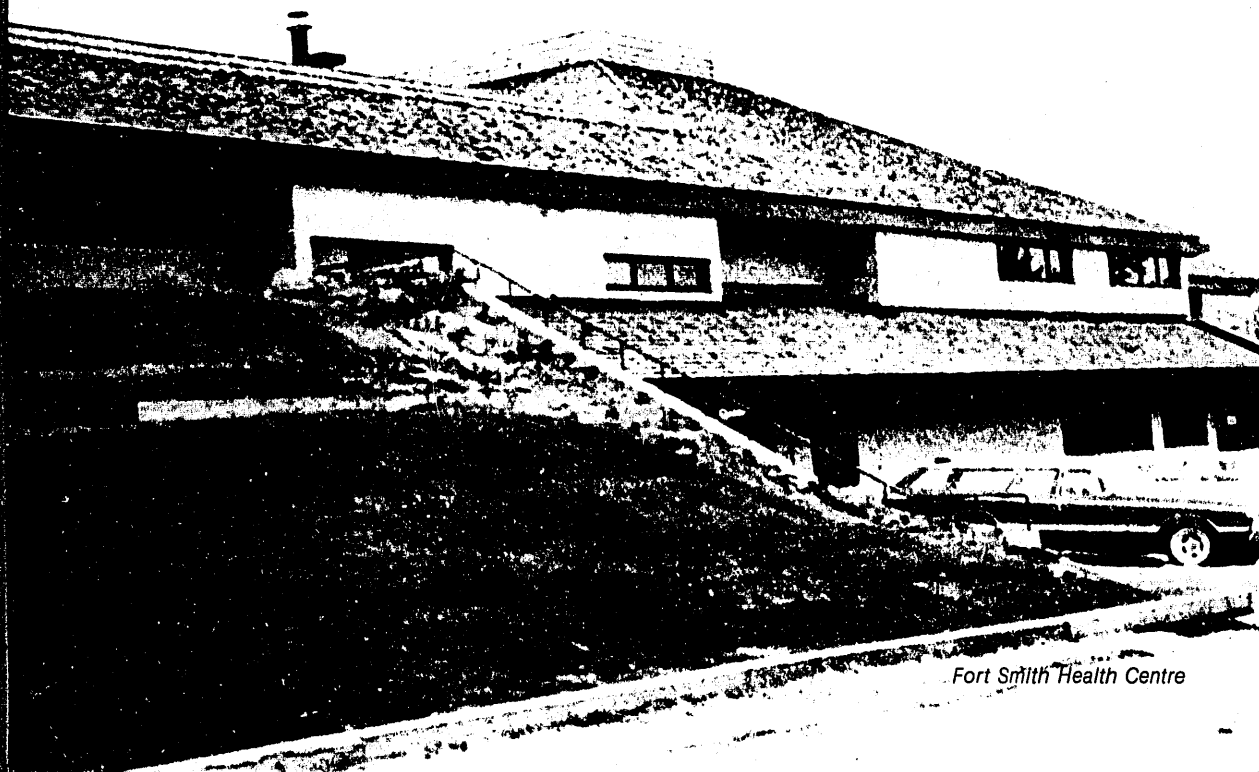
ARNOLD J. MCCALLUM,  
MINISTER OF HEALTH.

I am pleased to submit the Annual Report for T.H.I.S.  
and Medicare, for the period ending 31 March 1979.

Under the Territorial Hospital Insurance Services Or-  
dinance, and the Medical Care Ordinance, there is a re-  
quirement to submit an Annual Report.



Robert E. McDermit  
Director



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Arnold J. McCallum,  
Minister of Health



Robert McDermit, Director



Kathy Jang, Executive Assistant



Janet Lindquist, Chief,  
Health Programs & Standards



Michael Pontus, Chief  
Health Insurance Programs



Elaine Berthelet  
Program Officer



Margie Crown  
Program Officer



Joyce Balla, Supervisor  
Health Insurance Programs



Vilnis Muiznieks  
Program Policy Officer



Barry Brown  
Program Policy Officer



# Organizational Chart

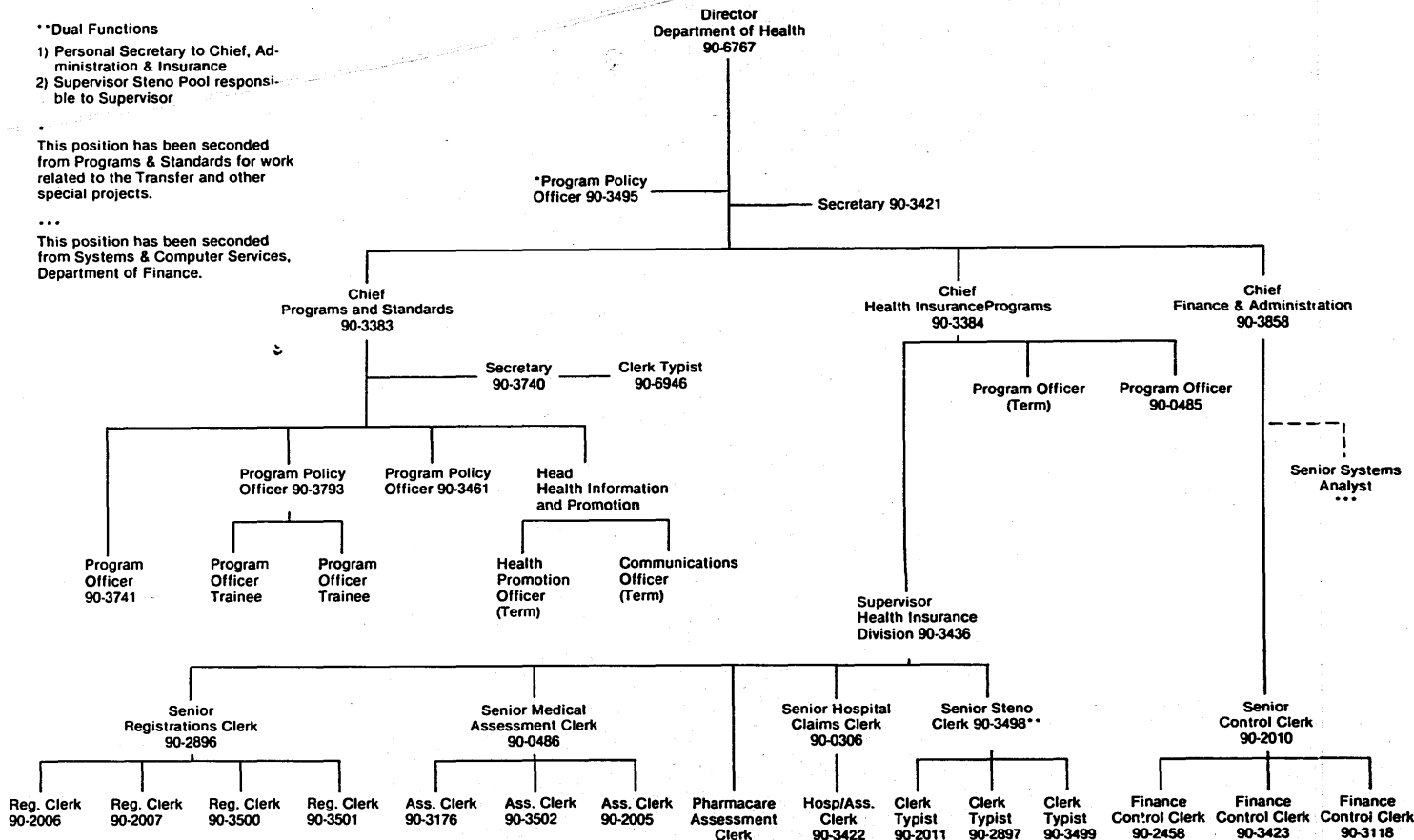
**\*\*Dual Functions**

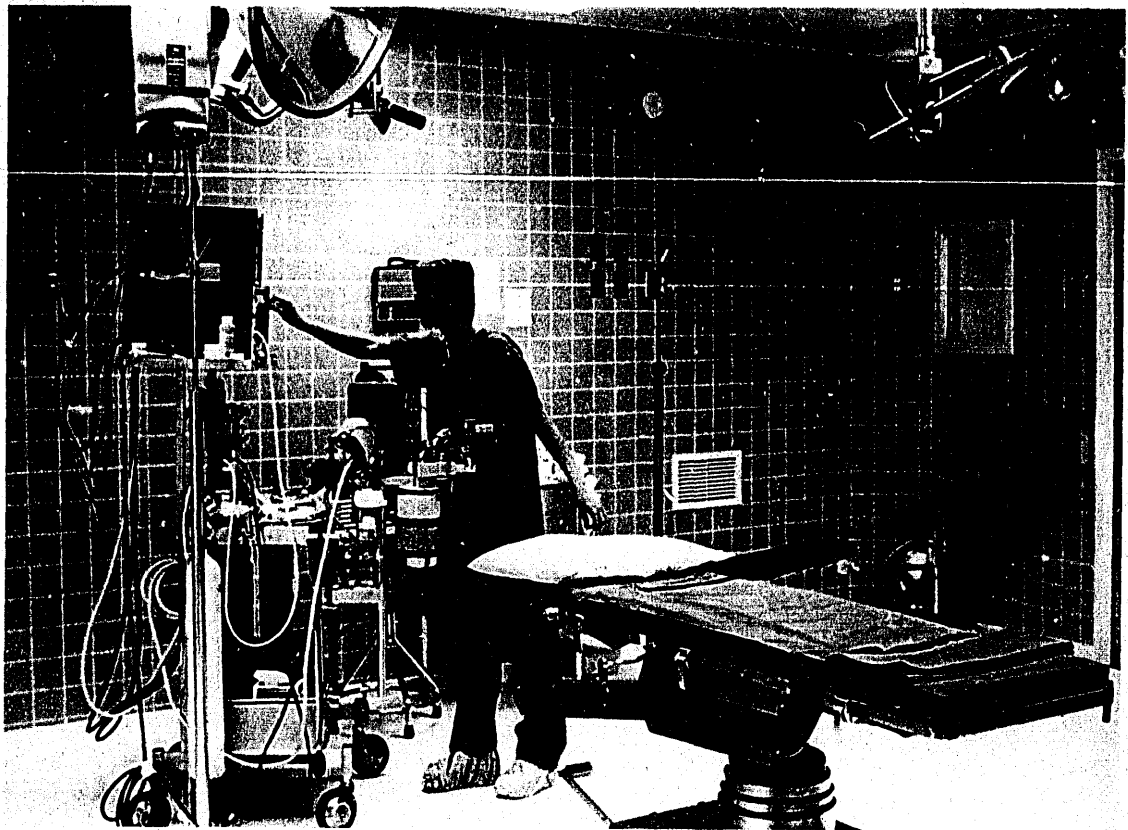
- 1) Personal Secretary to Chief, Administration & Insurance
- 2) Supervisor Steno Pool responsible to Supervisor

This position has been seconded from Programs & Standards for work related to the Transfer and other special projects.

...

This position has been seconded from Systems & Computer Services, Department of Finance.





## Highlights

- A separate Department of Health was created when the Department of Health and Social Services was split on August 14, 1978. T.H.I.S. and Medicare are an integral part of the Department. The Health Insurance Programs Branch is responsible for insurance services and budget review; the Programs and Standards Branch is responsible for program review and development, and consulting services.
- The Territorial Hospital Insurance Services Board was enlarged from five to ten members to better represent N.W.T. residents.
- The Fort Smith Health Centre was under construction.
- Two native administrative trainees joined the Department in September 1978. The training program includes training in the areas of T.H.I.S. and Medicare Services, as well as general health administration.
- The Yellowknife Mental Health Study was completed and discussions initiated for development of mental health services.
- Poison Control Information was distributed to health facilities in the N.W.T.
- A Poison Control program was initiated under the auspices of Stanton Yellowknife Hospital. Poison Control Information was distributed to health facilities in the N.W.T.
- Over 300,000 claims were processed for payment of insured health services on behalf of residents of the N.W.T.
- Health Career information including hospital and medical careers was distributed to schools in the N.W.T.
- A Medical Advisory Committee was formed to advise the Department of Health and T.H.I.S. on medical matters.
- Directions for the 1980's for the Department were developed.
- An Annual Registration system was developed, in order to update the registration file and to provide reliable statistics for the planning of programs and services.
- New procedures and budget formats were developed for use by Budget Review Hospitals in order to streamline the budgeting process.

## Introduction

The Government of the Northwest Territories retains constitutional responsibility for health services in the Northwest Territories. By Cabinet Memorandum, in 1954, the Northern Health Services program was established under the Federal Government to deliver health services on behalf of the Government of the Northwest Territories. Through the N.W.T. Health Coordinating Committee, the philosophies and programs of the two governments are coordinated.

The Government of the Northwest Territories administers in total the Territorial Hospital Insurance Services Program and the Medical Care Insurance Program. The Territorial Hospital Insurance Services Program is administered under the Territorial Hospital Insurance Services Board, to which the Department of Health acts as staff. The Medical Care Insurance Services Program is administered directly by the Department of Health.

The Territorial Government legislates ordinances which control health-related activities in the Northwest Territories. The Department of National Health and Welfare through Medical Services Branch, assists the Territorial Government in the administration of health ordinances.

Recently the Department of Health has become actively involved in the areas of legislation review and development, health career promotion, and health information and promotion. Programs are being developed for long-term care and home care. Concern for improved management statistical information has resulted in a cooperative review of the requirements by the Department of Health and Medical Services. These developments are complementary to Medicare programs and T.H.I.S.

This Annual Report includes information about the T.H.I.S. and Medicare programs, organizational structure, statistics, and financial statements.



## Territorial Hospital Insurance Services

### Board Members

Mr. R. McDermit, Yellowknife, Chairman  
Mr. D. Emery, Yellowknife  
Reverend K. Gaetz, Hay River  
Mr. D. Harkness, Edmonton  
Mr. P. Tatty, Rankin Inlet  
Mr. N. Wong, Yellowknife  
Mr. C. Peterson, Fort Smith  
Mr. P. Anderson, Rae-Edzo  
Mrs. B. Allen, Inuvik  
Mrs. G. Wood, Cambridge Bay  
Mr. M. Pontus, Yellowknife, Executive Secretary

In 1960, the Territorial Government entered into an agreement with the Federal Government to provide for an insurance program to cover the cost of approved hospital services for all residents.

The Territorial Hospital Insurance Services program operates under the direction of the Territorial Hospital Insurance Services Board, a body corporate whose members are appointed, by order of the Commissioner. The Director, Department of Health is appointed as Chairman of the Board, and departmental staff act as secretary and staff to the Board on matters falling under its jurisdiction.

In an effort to better represent Northern residents, the membership of the T.H.I.S. Board was increased from five to ten members in November, 1978.

The Board is responsible for the three Budget Review Hospitals, as well as for the payment of approved hospital services at approved rates for all participants in the Northwest Territories Hospital Insurance Plan, no matter if these services are obtained at Budget Review Hospitals, Federal Hospitals, or hospitals in the Provinces.

During the fiscal year, 1978/79, approximately 15,000 hospital insurance claims were processed for services received by residents of the N.W.T. \$4,600,000 was expended to purchase hospital services in the Provinces.



exclusive of the cost of travel and of medical care. The cost to the Government of the N.W.T. for provision of health services inside the N.W.T. was \$10,000,000, of which approximately 64% was spent in Budget Review Hospitals and 36% in Federal Hospitals.

Benefits under the program are:

- i) accommodation and meals at the standard or public ward level
- ii) necessary nursing services
- iii) laboratory, radiological, and other procedures together with the necessary interpretations for the purpose of assisting in the treatment of any injury, illness or disability
- iv) drugs, biologicals, and related preparations when administered in the hospitals
- v) use of operating room, case room and anaesthetic facilities including necessary equipment and supplies
- vi) routine surgical supplies
- vii) use of radiotherapy facilities, where available
- viii) use of physiotherapy facilities, where available
- ix) other services when provided in the hospital by employees

An insured person is entitled, without charge, to necessary outpatient treatment in a hospital, including x-ray, laboratory and other diagnostic services.

#### **Annual Registration Program**

During 1978, an annual registration program for all residents of the Northwest Territories was finalized and will come into effect as of 1 April 1979. This program will provide necessary demographic information to maintain up-to-date health coverage and population statistics.

#### **Employee Transfer**

Two of the Budget Review Hospitals, namely Stanton Yellowknife Hospital and the Fort Smith Health Centre, will as of 1 April 1979, transfer their employees under the Public Service Ordinance.

#### **Expansion of Services**

In keeping with the concept of establishing Stanton Yellowknife Hospital as a referral centre for the Western Arctic, services have continued to expand to better meet the requirements of patients from throughout the Territories. Recruitment of specialists and the development of regional services are on-going programs at Stanton Yellowknife Hospital.

#### **Capital Planning**

The new Fort Smith Health Centre is to be completed on schedule and within budget appropriations. The final

inspection is expected to take place sometime in July, 1979. Final arrangements will then be made for the transfer of patients from St. Ann's General Hospital to the new facility. This transfer will likely take place in early August, 1979. The date of the official opening for the new Health Centre has been set for 25 August 1979.

#### **Computerized Financial System**

As of 31 March 1979, both Stanton Yellowknife Hospital and the H.H. Williams Memorial Hospital, Hay River, will have completely adopted a computerized financial system. This system will also be implemented at the new Fort Smith Health Centre once it is in operation later this year. This program will contribute greatly to the availability of current financial and statistical information in the Territories.



## Medical Care Insurance Program

### A Synopsis of the Plan

**Comprehensiveness** - most services by physicians are insured for all eligible residents.

**Administration** - the plan is administered by officials of the Department of Health,

**Eligibility** - new residents of the N.W.T. are required to register and are provided with benefits from the first day of the third month they establish residence in the Territories.

**Payments** - there are no premiums to the patient. N.W.T. doctors bill the plan directly according to a fee schedule.

**Conditions** - Residency is the only condition. Irregardless of previous health problems, a beneficiary is eligible for all benefits

**Choice** - the patient may choose any physician. Any physician may decline any patient subject to his own medical restrictions.

### Coverage -

Outside N.W.T. - coverage is extended to any beneficiary anywhere in the world.  
 Within Canada - The N.W.T. Medical Care and Health

Insurance Plan pays for services at the approved provincial rate where the service is rendered.

Outside Canada - The patient will be reimbursed for approved services up to the rate applicable in the N.W.T.

**Funding** - the plan is supported through the appropriation of the Government of the N.W.T. to the Department of Health. The Government of the N.W.T. has entered into an agreement, the same as all provinces, called Established Program Financing (E.P.F.) 1977, with the Federal Government as part of the support of the Plan

In 1971, a universal medical care insurance program was established which pays for medical bills of all registered residents of the Northwest Territories. The program was initiated at the same time as the National Medicare Scheme and contributions to the program were received from the Federal Government under a cost-sharing arrangement.

This arrangement was replaced in 1977 by the Established Program Financing Act.

The funding of this program depends upon provisions of insurance coverage which is universal, portable,

accessible, and comprehensive; and administered on a non-profit basis by a public authority.

The plan is administered through the Health Insurance Program Branch of the Department of Health.

Assessment and management are provided by the Department.

Computer Services are provided by the Systems Services Section of the Department of Finance, Government of the N.W.T.

### Registration

Registration of beneficiaries with the Hospital Care Insurance Plan automatically registers them with the Medical Care Plan.

To be eligible in the N.W.T. the individual must establish residency. Coverage will be from the first day of the third month with the following exceptions:

- a) Discharged Federal inmates, who are granted first day coverage.
- b) Members of the National Defense, or the R.C.M.P. leaving the forces who are granted first day coverage.
- c) Landed immigrants who are granted first day coverage.
- d) Dew line employees who are eligible after one year.

The N.W.T. follows the guidelines of the portability and eligibility agreements between provinces.

### Benefits

Benefits under the program are all medically required services rendered by a physician or surgeon, at approved rates.

In the N.W.T. a Medical Schedule of benefits (fee schedule) is drawn up with costs per approved procedure established once per year.

Outside the N.W.T. but within Canada, fees for services provided by doctors are at the rate of the provincial plan where the service was rendered.

Outside Canada, fees for services provided by doctors are up to the rate for the particular service in the N.W.T.

### Statistical Information

Information is captured according to the International Classification of Diseases coding.

During the year, steps were taken to adopt a new diagnostic coding system known as ICD-9-CM (International Classification of Disease, 9th Revision, Clinical

Modification). This system will serve as a useful tool for the classification of data for medical care review, for the indexing of medical records, for ambulatory and other medical care programs, and for basic health statistics. Such a vehicle will expand the capability of recording diagnoses from 189 to 999 basic codes with subdivisions that could expand it to 10,000 codes if so desired.

The system will provide information and statistics necessary to evaluate, compare, and expand health services and programs.

### Activity

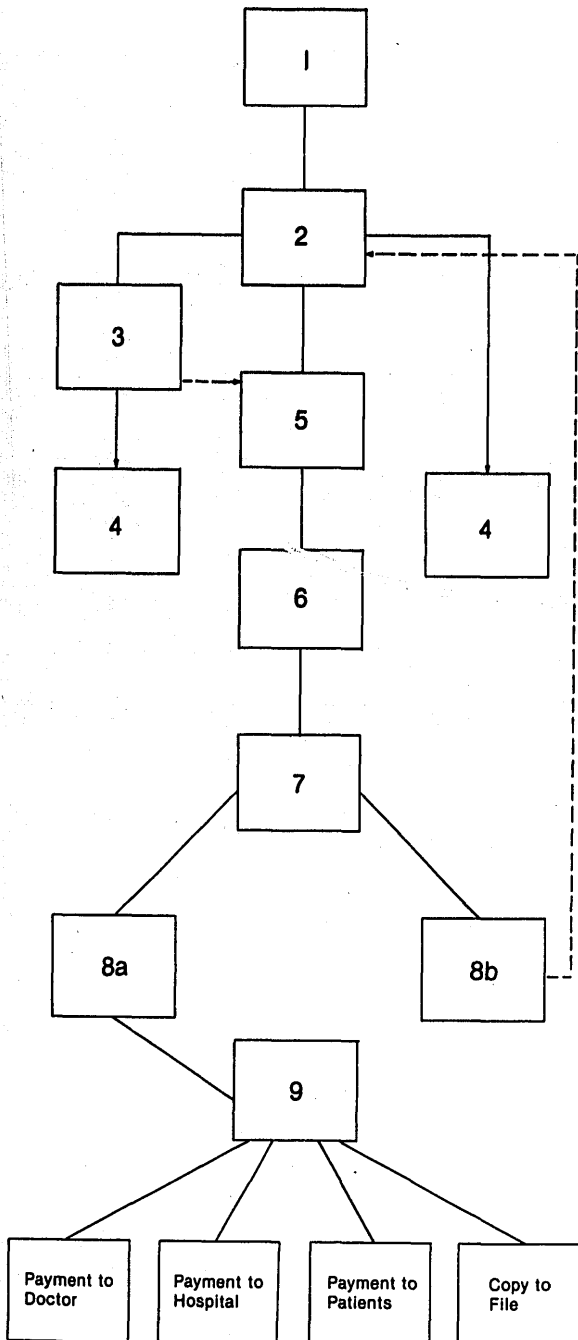
During the fiscal year 1978/79 approximately 189,000 claims were processed and paid for residents of the N.W.T. for a total of \$3,100,000.

Approximately \$800,000 was expended to pay for medical services received outside the N.W.T. and \$2,300,000 for services rendered in the N.W.T.



## Claims Processing System

- 1) Claims are received from physicians/hospital/ patients and date stamped.
- 2) Assessment staff scan for completeness.
- 3) Out of Province claims for N.W.T. residents eligibility confirmed.
- 4) Incomplete claim returned to physician/hospital/patient.
- 5) Diagnostic coding scan applied if required and manual follow up where necessary.
- 6) Claims batched for computer run once per week.
- 7) Computer edit and assessment.
- 8) a) Clean claims forwarded for payment run.  
b) Reject claims returned to No. 2 (assessment)
- 9) Payment Run





## Medical Advisory Committee

### Members:

Dr. G. Gibson, Yellowknife, Chairman  
Mr. R. McDermit, Yellowknife  
Dr. S. Sethi, Hay River  
Dr. C. Moisey, Yellowknife  
Dr. E. Covert, Hay River  
Mr. B. Funston, Yellowknife  
Mr. M. Pontus, Yellowknife, Secretary

The Medical Advisory Committee to the Department of Health was established to provide a formal mechanism for the Department to obtain advice from the profession and from the N.W.T. Medical Association.

Matters pertaining to licensure, and privileges, as well as policy and program development proposals relating to medical practice, are referred to the Committee.

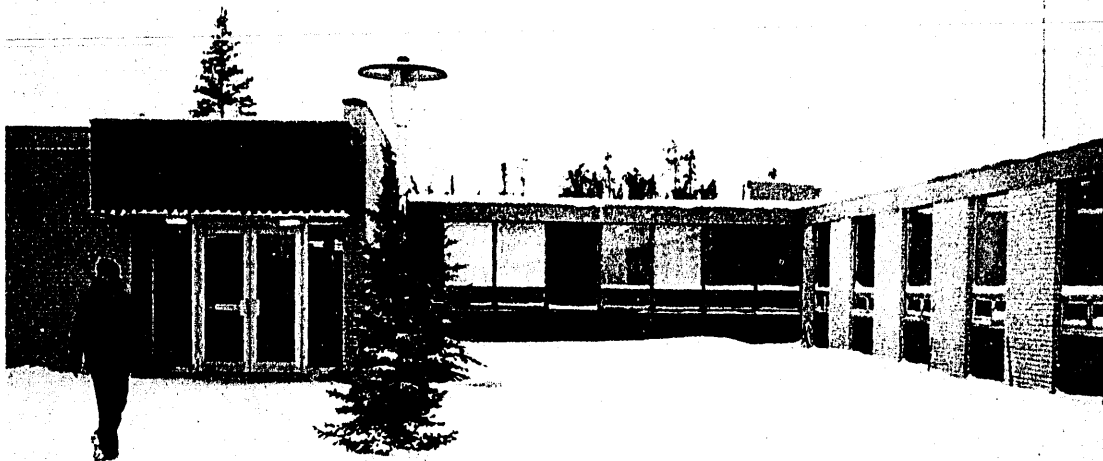
## N.W.T. Health Coordinating Committee

### Members

Mr. D. Harkness, Chairman  
Mr. J. Buck  
Mr. R. McDermit  
Miss J. Lindquist

The purpose of the N.W.T. Health Coordinating Committee is to provide a meeting place for discussion, joint development, and approval of new and existing programs and policies between the Department of Health and Medical Services, Health and Welfare Canada. During the year, the Committee proved increasingly useful in increasing understanding and cooperative effort between the two departments.





*Stanton Yellowknife Hospital*

## **Health Programs and Standards**

The work performed by this branch in the area of program and standard development enhances and supports the provision of health services in the N.W.T. The efforts are directed towards ensuring the existence of Health services of acceptable quantity and quality.

### **Legislation**

The Department of Health has identified the need for a thorough review of a number of existing ordinances, including the Public Health Ordinance, the Mental Health Ordinance, and the Territorial Hospital Insurance Services Ordinance and their regulations. This review commenced during this fiscal year and it is anticipated that revised legislation will go forward to the Legislative Assembly in 1980.

Further, because both the number and types of health practitioners wishing to practice in the N.W.T. in recent years has increased substantially, the Department is working in cooperation with professional and interest groups, to develop legislation to govern the practice and licensing of these practitioners.

### **Health Information and Promotion**

Emphasis is being directed at making people more aware of health risks and educating people how to become responsible for their own health.

Activities such as the development of health education materials, a resource centre, and use of the media are methods that the Department is using to promote health.

Attention is also being directed at informing the public regarding the various services and programs of the Department as well as establishing better communications among health professionals and the general public.

### **Rae-Edzo Health Awareness Program**

A pilot project ran by a native women's group aimed at increasing health awareness in the communities of Rae-Edzo was funded and supported by the Department of Health.

The aim of the program is to make as many persons as possible more aware of ways to maintain and improve the health of their children and themselves.

The native women in cooperation with the various health professionals have undertaken a number of community projects aimed at health promotion. Activities included: information nights, distribution of pamphlets, use of films, clean up campaigns, home visits, broadcasting of health information and general encouragement to improve health conditions in the two communities.

The Department is interested in supporting the approach of having local groups involved in health promotion in the communities.

### **N.W.T. Poison Control Program**

The Department of Health and the Stanton Yellowknife Hospital have combined to establish a coordinated poison control program.

All hospitals, nursing stations and health centres have been provided with poison control reporting forms and a set of poison control cards which provide detailed information on the signs and symptoms of poisonings and make specific recommendations for their treatment.

Completed poison control reporting forms are forwarded to the Stanton Yellowknife Hospital which prepare bi-monthly summary statistics. By analyzing these statistics, it is possible to monitor for any poisoning trends and when necessary, remedial action may be promptly taken.

### **Services for the Aged and Disabled**

The Department of Health has developed an "Information Package on Services to the Aged and Disabled." The package outlines for Health and Social Services personnel in communities the various programs which could be developed, a process whereby they can assess the needs and service capabilities of communities, and provides guidelines for the development of a program proposal. Thus, responsibility for program development is being placed on personnel in the community to propose and develop services and programs for the aged and disabled appropriate to the needs of that community.

Further, Departmental personnel have acted as consultants to health agencies and staff regarding the establishment and the operation of programs which serve aged and disabled people, such as extended/chronic care and home care programs.

### **Professional Training Bursary Program**

The Department of Health offers training bursaries to individuals involved in, or wishing to pursue, health care careers. The bursary helps cover the educational costs associated with full-time university or college study, and students enrolled in part-time programs or extension courses are also offered assistance. Under an agreement with the Territorial Government, when bursary recipients graduate, they will return to the Northwest Territories to work in the health care field for a period of time at least equal to the length of their studies.

Applicants for the bursary are chosen by a selection committee on the basis of their employment history, personal references, their interest and the demand in the Territories for their kind of skills. In the 1978-79 year, 10 bursaries were awarded, 6 for full-time study and 4 for extension programs.

### **Administrative Training Program**

One of the Department's objectives is to involve Northerners in the planning and delivery of health services in the N.W.T. To expedite this process, two native staff joined the Department in 1978 as Program Officer Trainees. Their training program will be 3 years in length, the first year being primarily designed to in-



roduce the trainees to health services and concepts through both instruction and field experience. The second and third years of the program will be spent in completion of the Canadian Hospital Association extension program in Health Care Organization and Management. On completion, the trainees will be employed as Program Officers involved in the planning and administration of health care services in the N.W.T.

### **Health Career Promotion**

To interest Northerners in considering a career in the health care field, the Department of Health has prepared a slide-tape show and an information kit about health service careers. The kit contains more than 30 career profiles, each profile including a brief description of the duties, place of work, educational requirements, and resources that can provide for further information about the job.

The health career information kits have been widely distributed to schools, hospitals, nursing stations and other key centres throughout the North.

The Department provides copies to individuals or groups on request, and arrangements can also be made to borrow the slide-tape show.

N.W.T. COMMUNITY PRESS

Assistance will also be provided to arrange for speakers, and displays, for career discussions at high schools.

### **Health and Social Services Training Project**

The cooperative efforts of the Departments of Education and Social Services, Health and Welfare Canada, and the Department of Health during the past three years have resulted in the development of a concept for training health and social services personnel in the N.W.T. The program will consist of a number of levels from which students may exit to employment, but, hopefully from which they will choose to proceed to a further level of qualification. The program will be offered in larger communities in the N.W.T.

Curriculum development for the first level, "Community Service Work, An Introduction to Health and Social Work", was commenced by the Department of Education in 1978, with the intention to run a pilot project in the fall of 1979. At that time, curriculum development for the second level, preparing students to function as community health representatives and child care workers, will commence.

### **Consulting Services**

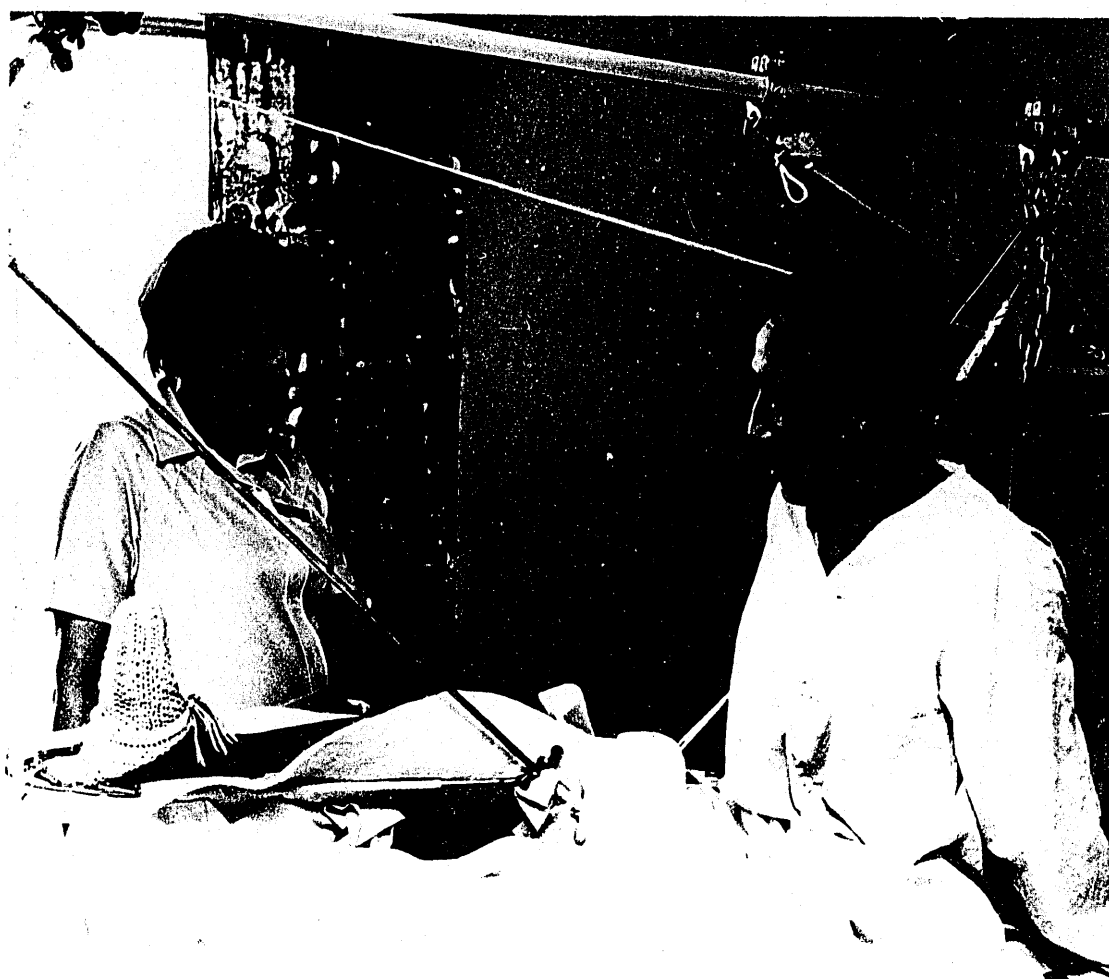
Through an agreement with Stanton Yellowknife Hospital, the Department of Health provides consulting services in the areas of Nutrition and Dietetics, and Physiotherapy to Budget Review Hospitals. These consultants advise the Department on professional matters and represent the Department as requested.

The Department of Health has internal capability for consulting services in the areas of administration, nursing, functional planning, construction planning and facility design, program development and evaluation, and in-service and management training. The staff of the Department undertake special studies, staffing reviews, and program and service evaluations.

## Finance and Administration

The Finance and Administration section of the Department is responsible for financial, personnel and office administration activities. During 1978/79, the position of Chief, Finance and Administration was vacant and is expected to be filled early in the next fiscal year. For this period the functions of this Branch were performed by the staff in the Health Insurance Services Branch.

A major emphasis for the next year will be in the coordinating of a rewrite of the Health Information System. It is anticipated that the rewritten system will provide a more efficient means of providing information for the management of health programs.



**T.H.I.S./Medicare  
Financial Information  
For the Period April 1, 1978 to March 31, 1979 - unaudited**

	Operating 000's	Capital 000's	Total 000's
<b>Territorial Hospital Insurance Services</b>			
Budget Review Hospitals	\$ 6425	\$	\$ 6425
Fort Smith Health Centre		4542	4542
Hospitals outside N.W.T.	4627		4627
Federal Hospitals	3688		3688
Contract Hospitals	43		43
	14783	4542	19325
<b>Medicare</b>			
Doctors inside N.W.T.	2271		2271
Doctors outside N.W.T.	831		831
	3102		3102
<b>N.W.T. Share of Northern Health Services</b>			
Payments to Medical Services for Government of the N.W.T. Share of Facility Operations	1890	758	2648
<b>Administration</b>			
Salaries	547		547
Other O & M	150		150
	697		697
<b>Total Expenditures</b>	<b>20472</b>	<b>5300</b>	<b>25772</b>

<b>Revenue Recoveries</b>	<b>000's</b>
Fort Smith Health Centre (Medical Services Contribution)	\$ 250
Recoveries under E.P.F. - (hospitals)	4,681
Grants for Hospital Care - Indians and Inuit	4,917
Recoveries under E.P.F. - (medicare)	1,576
Grants for Medicare - Indians and Inuit	552
Other - Recovery of Previous Year Expenditures	34
<b>Total</b>	<b>\$12,010</b>

## Medical Care Services

The Northwest Territories Medical Care Plan began operations on April 1, 1971. Results of the last two years of the plan are as follows:

	1978/79		1977/78	
	\$	%	\$	%
<b>N.W.T. Doctors</b>				
Private Practice	1,458,000	47.0	1,387,000	46.2
*Federal	813,000	26.2	795,000	26.5
<b>Sub Total</b>	<b>2,271,000</b>	<b>73.2</b>	<b>2,182,000</b>	<b>72.7</b>
Alberta	507,000	16.3	508,000	16.9
Manitoba	165,000	5.3	155,000	5.2
B.C.	36,000	1.2	45,000	1.5
Quebec	47,000	1.5	37,000	1.2
Ontario	40,000	1.3	38,000	1.3
Saskatchewan	15,000	.5	14,000	.5
Yukon	8,000	.3	9,000	.4
Other	13,000	.4	12,000	.3
<b>Sub Total</b>	<b>831,000</b>	<b>26.8</b>	<b>818,000</b>	<b>27.3</b>
<b>TOTAL</b>	<b>3,102,000</b>	<b>100.0</b>	<b>3,000,000</b>	<b>100.0</b>

Total Number Claims Paid	191,259	210,086
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Average Payment per Claim Paid	16.21	14.28
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Total lines Processed Medicare/T.H.I.S.	299,724
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\*This includes a minimal amount paid to Federal doctors in Alberta and Manitoba.

**Rated Bed Capacity -  
Hospitals in the Northwest Territories - 1977/78 & 1978/79**

<b>Location</b>	<b>Name</b>	<b>Beds</b>	<b>Cribs</b>	<b>Bassinets</b>
<b>Approved (Budget)</b>				
Fort Smith	St. Ann's General (incl. chronic care 22)	40		7
Hay River	H.H. Williams Memorial (including chronic care 10)	50		10
Yellowknife	Stanton Yellowknife	72		9
<b>Total at year-end</b>		<b>162</b>		<b>26</b>

**Federal Hospitals and  
Nursing Stations**

Frobisher Bay Inuvik	Frobisher Bay General Inuvik General (chronic care 10, T.B.10)	25 55	10 15	4 13
Fort Simpson	Fort Simpson General	9	4	3
Rae-Edzo	Edzo Cottage Hospital	5	5	2
Aklavik	Aklavik N/S	5		2
Arctic Bay	Arctic Bay N/S	1	1	1
Baker Lake	Baker Lake N/S	3	2	1
Belcher Island (Sanikiluaq)	Belcher Islands N/S	2		2
Broughton Island	Broughton Island N/S	3	1	1
Cambridge Bay	Cambridge Bay N/S	10		2
Cape Dorset	Cape Dorset N/S	3	1	1
Chesterfield Inlet	Chesterfield Inlet N/S (Rehab. 1 - opened 7 July, 1977)	4		
Clyde River	Clyde River N/S	3	1	1
Coppermine	Coppermine N/S	5		1
Coral Harbour	Coral Harbour N/S	4		2
Eskimo Point	Eskimo Point N/S	4		2
Fort Franklin	Fort Franklin N/S	5		2
Fort Good Hope	Fort Good Hope N/S	4		1
Fort Liard	Fort Liard N/S	3		1
Fort McPherson	Fort McPherson N/S	5		2
Fort Norman	Fort Norman N/S	4		1
Fort Providence	Fort Providence N/S	5		1
Fort Resolution	Fort Resolution N/S	5		4
Fort Wrigley	Fort Wrigley N/S	4		2
Gjoa Haen	Gjoa Haven N/S	5		1
Grise Fiord	Grise Fiord N/S	1	1	1



<b>Location</b>	<b>Name</b>	<b>Beds</b>	<b>Cribs</b>	<b>Bassinets</b>
Hall Beach	Hall Beach N/S (Foxe)	2	1	1
Holman Island	Holman Island N/S	2		1
Igloodik	Igloodik N/S	1	1	1
Lake Harbour	Lake Harbour N/S	1	1	1
Nanisivik	Nanisivik N/S	4		1
Norman Wells	Norman Wells N/S	10		2
Pangnirtung	Pangnirtung N/S	5	2	1
Pelly Bay	Pelly Bay N/S	2		1
Pond Inlet	Pond Inlet N/S	1	1	1
Port Burwell	Port Burwell N/S	1	1	1
Rankin Inlet	Rankin Inlet N/S	5	2	2
Repulse Bay	Repulse Bay N/S	2		2
Resolute Bay	Resolute Bay N/S	2		1
Sachs Harbour	Sachs Harbour N/S	4		
Snowdrift	Snowdrift N/S	2		1
Spence Bay	Spence Bay N/S	5		1
Tuktoyaktuk	Tuktoyaktuk N/S	5		1
Whale Cove	Whale Cove N/S	1	1	2
<b>Total at year-end</b>		<b>237</b>	<b>51</b>	<b>75</b>
<b>Total Rated Capacity at Year End</b>		<b>339</b>	<b>51</b>	<b>101</b>

**Separation and Days of Care of Insured Adults and Children  
By Hospital Location (1977/78 and 1978/79)**

Location	Name	1977/78		1978/79	
		Sep	Days of Care	Sep	Days of Care
<b>Approved (Budget)</b>					
Fort Smith	St. Ann's General (including chronic care 22)	443	2,423	306	1,904
Hay River	H.H. Williams Memorial (incl. chronic care 10)	1,403	7,559	1,488	9,904
Yellowknife	Stanton Yellowknife	2,514	17,997	2,327	17,097
<b>Total at year-end</b>		<b>4,360</b>	<b>27,979</b>	<b>4,121</b>	<b>28,905</b>

**Contract**

Chesterfield Inlet	Ste. Theresa de l'Enfant Jesus (closed 6 July/77)	2	2		
<b>Total at year-end</b>		<b>2</b>	<b>2</b>		

**Federal Hospital and  
Nursing Stations**

Frobisher Bay	Frobisher Bay General	980	5,312	1,007	7,155
Inuvik	Inuvik General (chronic care 10 - T.B. 10)	1,132	7,347	747	4,577
Fort Simpson	Fort Simpson General	177	872	147	962
Rae-Edzo	Edzo Cottage Hospital	246	1,449	192	1,365
Aklavik	Aklavik N/S	8	15		
Arctic Bay	Arctic Bay N/S	18	52	21	46
Baker Lake	Baker Lake N/S	22	36	22	38
Belcher Islands (Sanikiluaq)	Belcher Islands N/S	12	30	9	19
Broughton Island	Broughton Island N/S	27	41	24	59
Cambridge Bay	Cambridge Bay N/S	41	52	43	56
Cape Dorset	Cape Dorset N/S	46	68	27	46
Chesterfield Inlet	Chesterfield Inlet N/S	10	17	13	16
Clyde River	Clyde River N/S	23	40	31	50
Coppermine	Coppermine N/S	23	32	18	25

Location	Name	1977/78		1978/79	
Coral Harbour	Coral Harbour N/S	12	28	13	20
Eskimo Point	Eskimo Point N/S	8	8	55	69
Fort Franklin	Fort Franklin N/S	19	31	31	54
Fort Good Hope	Fort Good Hope N/S	39	57	13	18
Fort Liard	Fort Liard N/S	38	54	11	11
Fort McPherson	Fort McPherson N/S	21	32	14	31
Fort Norman	Fort Norman N/S			4	6
Fort Providence	Fort Providence N/S	19	29	12	23
Fort Resolution	Fort Resolution N/S	11	18	13	23
Fort Wrigley	Fort Wrigley N/S	6	8	9	10
Gjoa Haven	Gjoa Haven N/S	12	14	16	23
Grise Fiord	Grise Fiord N/S	6	6	4	12
Hall Beach	Hall Beach N/S (Foxe)	16	26	22	27
Holman Island	Holman Island N/S	11	16	9	10
Igloodik	Igloodik N/S	23	58	33	57
Lake Harbour	Lake Harbour N/S	20	27	9	12
Nanisivik	Nanisivik N/S	6	11	10	12
Norman Wells	Norman Wells N/S	14	15	4	6
Pangnirtung	Pangnirtung N/S	65	144	91	119
Pelly Bay	Pelly Bay N/S	21	29	10	11
Pond Inlet	Pond Inlet N/S	23	37	14	29
Port Burwell	Port Burwell N/S	1	1		
Rankin Inlet	Rankin Inlet N/S	60	74	72	96
Repulse Bay	Repulse Bay N/S	19	25	18	20
Resolute Bay	Resolute Bay N/S	24	36	11	25
Sachs Harbour	Sachs Harbour N/S	11	22	1	1
Snowdrift	Snowdrift N/S	13	15	15	15
Spence Bay	Spence Bay N/S	25	34	27	38
Tuktoyaktuk	Tuktoyaktuk N/S	36	46	21	28
Whale Cove	Whale Cove N/S	9	9	16	19
<b>Total at Year-End</b>		<b>3,353</b>	<b>16,273</b>	<b>2,879</b>	<b>15,239</b>
<b>Total in N.W.T. patient days</b>		<b>7,715</b>	<b>44,254</b>	<b>7,000</b>	<b>44,144</b>
<b>Total out of N.W.T. patient days</b>			<b>33,494</b>		<b>28,684</b>
<b>TOTAL</b>		<b>77,748</b>		<b>72,828</b>	

**Inpatient Adults and Children Services by Category of Hospital  
1977, 1977/78 and 1978/79**

Category	1977		1977/78		1978/79	
	Sep	Days of Care	Sep	Days of Care	Sep	Days of Care
Budget Review Hospitals	4,119	25,234	4,360	27,979	4,121	28,905
Contracts	6	9	2	2		
Federal	3,479	16,782	3,353	16,273	2,879	15,239
Outside N.W.T.		31,926		33,494		28,684
<b>Total</b>		<b>73,951</b>		<b>77,748</b>		<b>72,828</b>

**Hospital Inpatient Days  
Outside N.W.T. by Province  
1977, 1977/78 and 1978/79**

Province	Days		
	1977	1977/78	1978/79
		<b>Adults and Children</b>	
Yukon	77	113	91
B.C.	668	704	793
Alberta	20,319	22,068	15,613
Saskatchewan	201	233	194
Manitoba	5,239	5,230	6,419
Ontario	1,473	1,563	1,628
Quebec	3,724	3,444	3,730
Maritimes	225	139	216
<b>Total</b>	<b>31,926</b>	<b>33,494</b>	<b>28,684</b>

Province	Days		
	1977	1977/78	1978/79
		<b>Newborn</b>	
Yukon	8	12	7
B.C.	100	97	59
Alberta	467	545	597
Saskatchewan	12	19	29
Manitoba	680	837	643
Ontario	162	161	99
Quebec	57	60	96
Maritimes	24	34	32
<b>Total</b>	<b>1,510</b>	<b>1,765</b>	<b>1,562</b>

**Payment to Hospitals  
1977, 1977/78 and 1978/79**

Category of Hospitals	Payments		
	1977	1977/78	1978/79
Budget Review	5,333,629.84	5,647,020.53	6,425,001.53
Contract	41,263.26	2,827.32	42,500.19
Federal	3,477,473.00	3,790,089.50	3,688,411.00
Outside N.W.T.	4,111,289.43	4,482,367.76	4,626,688.65
<b>Total</b>	<b>12,963,655.53</b>	<b>13,922,305.11</b>	<b>14,782,601.37</b>

**Total Cost of Insured Services  
Cost Per Insured Person, and Average Cost Per Patient Day  
1977, 1977/78 and 1978/79**

Cost of Insured Services	1977	1977/78	1978/79
<b>Inpatient</b>			
—Adults and children	12,692,131	13,649,926	14,499,395
—Newborn	106,818	104,967	117,531
Out-Patient	164,707	167,412	165,675
<b>TOTAL</b>	<b>12,963,656</b>	<b>13,922,305</b>	<b>14,782,601</b>

**Cost Per Insured Person**

Insured Population			
1976 - 37,900	302.00	323.77	328.50
1977 - 42,800			
1977/78 - 43,000			
1978/79 - 45,000			

**Average Cost Per Patient Day**

**Hospitals in the N.W.T.**

Adults and Children	185.83	201.17	226.51
Newborn	14.47	14.42	14.54

**Hospitals Outside N.W.T.**

Adults and Children	125.74	130.40	156.88
Newborn	16.27	17.25	21.50

**All Hospitals**

Adults and Children	161.43	171.41	199.09
Newborn	14.85	15.14	16.02

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