



Utilization Indicators

Calendar Year 2001

ABOUT THIS REPORT ON UTILIZATION INDICATORS

The charts in this publication are intended to provide aggregate and comparative data on the utilization trends of the District of Columbia hospital community for calendar year 2001. Trend data for five-year periods have been provided where available.

The source of the data is the District of Columbia Hospital Association's (DCHA) Monthly Utilization Survey and Quarterly Bed Capacity and Census Survey (self-reported by individual hospitals). The graphs in this report describe utilization trends in the aggregate for the District's acute care non-federal hospitals. It should be noted that data from D.C. General Hospital are included only through its closure in mid-2001.

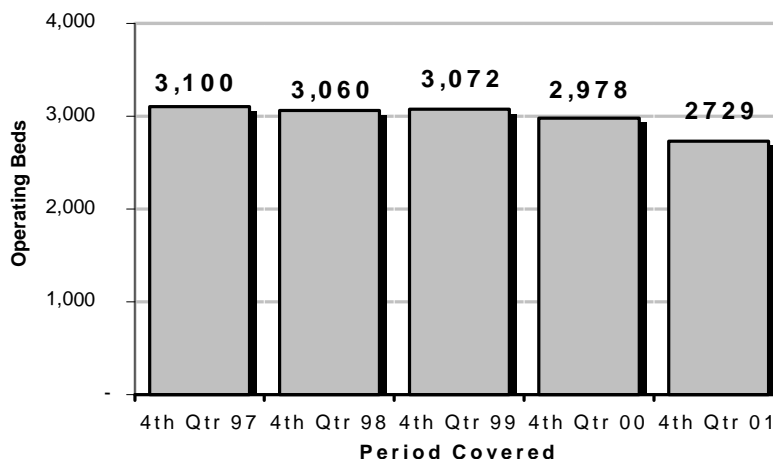
- Children's National Medical Center
- Columbia Hospital for Women Medical Center
- District of Columbia General Hospital
- George Washington University Hospital
- Georgetown University Hospital
- Greater Southeast Community Hospital
- Howard University Hospital
- Providence Hospital
- Sibley Memorial Hospital
- Washington Hospital Center

Specific utilization data for the eighteen DCHA hospitals are provided in table form.

Operating Bed Capacity

District of Columbia Acute Care Hospitals
Five-Year Trend: 1997 - 2001

From the fourth quarter of 1997 through the fourth quarter of 2001, the District's acute care non-federal hospitals decreased the number of operating beds from 3,100 to 2729, a decrease of 371 beds or 11.97 percent.



- Note:** Calculations are based on reported utilization figures for the District of Columbia acute care non-federal hospitals.
- Note:** Hadley Memorial Hospital converted to a long-term acute care facility, effective February 1, 2001, and is excluded from 2001 data.
- Note:** Columbia Hospital for Women Medical Center was unable to provide data for 2001.
- Definition:** Bed Capacity – The average number of staffed beds during the reporting period.
- Source:** DCHA Quarterly Occupancy and Bed Capacity Survey

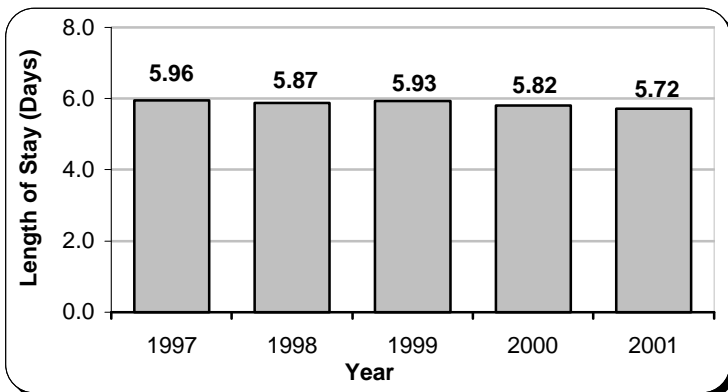
Operating Bed Capacity

DCHA Hospitals, 2001

	Beds In Operation		Percent Change
	4 th Quarter 1997	4 th Quarter 2001	
Acute Care			
Children's National Medical Center	188	188	0.00%
Columbia Hospital for Women Medical Center	110	N/A	N/A
District of Columbia General Hospital	265	0	-100.00%
George Washington University Hospital	266	231	-15.15%
Georgetown University Hospital	328	338	2.96%
Greater Southeast Community Hospital	285	320	10.94%
Howard University Hospital	286	291	1.72%
Providence Hospital	316	305	-3.61%
Sibley Memorial Hospital	235	256	8.20%
Washington Hospital Center	750	800	6.25%
ACUTE TOTAL	3029	2729	-10.99%
Other Specialty			
Hadley Memorial Hospital	71	45	-57.78%
National Rehabilitation Hospital	141	133	-6.02%
Psychiatric			
Psychiatric Institute of Washington, D.C.	99	104	4.81%
Saint Elizabeths Hospital/CMHS	797	553	-44.12%
Federal			
Veterans Affairs Medical Center	197	166	-18.67%
Walter Reed Army Medical Center	424	256	-65.63%
Malcolm Grow Medical Center, AAFB	N/A	68	N/A
National Naval Medical Center, Bethesda	N/A	185	N/A
SUBTOTAL - DC ONLY	4758	3986	-19.37%
GRAND TOTAL	N/A	4239	N/A

Definition: Bed Capacity – The average number of operating staffed beds during the reporting period.

Source: DCHA Quarterly Occupancy and Bed Capacity Survey



Average Length of Stay

District of Columbia Acute Care Hospitals
Five-Year Trend: 1997 - 2001

Average length of stay declined 4.03 percent between 1997 and 2001 for District acute care hospitals to 5.72 days. This continues to be a national trend due in large part to technological advances in medicine that have moved many procedures to the outpatient side, as well as to managed care that has required earlier discharges.

Note: Calculations are based on reported utilization figures for the District of Columbia acute care non-federal hospitals.

Note: Hadley Memorial Hospital converted to a long-term acute care facility, effective February 1, 2001, and is excluded from 2001 data.

Definition: Average Length of Stay (ALOS): average number of days per inpatient admission, derived by dividing the number of inpatient days by the number of admissions. The primary purpose of the ALOS calculation is to display trends and should not be confused with hospital internal LOS calculations that are defined as patient days/discharges.

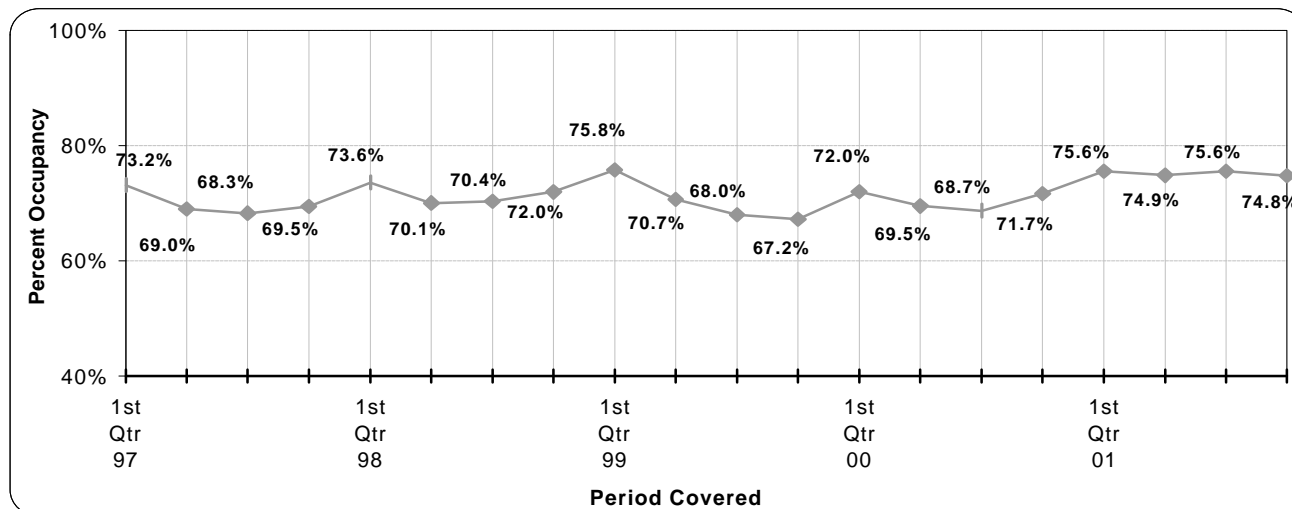
Source: DCHA Monthly Utilization Survey

Occupancy Rate

District of Columbia Acute Care Hospitals

Five-Year Trend: 1997 – 2001

Occupancy rate continues to be higher than most other states, where the rate is about 60 percent. This reflects the ongoing demand for tertiary services, as well as the hospitals' commitment to care for the uninsured, who are hospitalized at higher rates than the insured population.



	Annualized Occupancy Rate		
	1997	2001	% Change
Acute Care			
Children's National Medical Center	86.74%	90.96%	4.86%
Columbia Hospital for Women Medical Center	48.56%	N/A	N/A
District of Columbia General Hospital	63.27%	63.32%	0.08%
George Washington University Hospital	61.88%	77.38%	25.04%
Georgetown University Hospital	72.60%	70.23%	-3.27%
Greater Southeast Community Hospital	72.66%	65.63%	-9.68%
Howard University Hospital	67.51%	76.58%	13.43%
Providence Hospital	71.38%	73.70%	3.25%
Sibley Memorial Hospital	66.31%	69.97%	5.51%
Washington Hospital Center	75.56%	79.26%	4.91%
ACUTE TOTAL	68.65%	75.22%	9.57%
Other Specialty			
Hadley Memorial Hospital	60.47%	46.92%	-22.41%
National Rehabilitation Hospital	65.52%	72.54%	10.71%
Psychiatric			
Psychiatric Institute of Washington, D.C.	59.58%	70.87%	18.95%
Saint Elizabeths Hospital/CMHS	94.21%	95.14%	0.99%
Federal			
Veterans Affairs Medical Center	68.02%	68.87%	1.25%
Walter Reed Army Medical Center	61.08%	71.41%	16.92%
Malcolm Grow Medical Center, AAFB	N/A	42.04%	N/A
National Naval Medical Center, Bethesda	N/A	46.75%	N/A
SUBTOTAL - DC ONLY	68.22%	77.02%	12.90%
GRAND TOTAL	N/A	75.01%	N/A

Note: Hadley Memorial Hospital converted to a long-term acute care facility, effective February 1, 2001, and is excluded from 2001 data.

Note: Columbia Hospital for Women Medical Center was unable to provide data for 2001.

Definition: Occupancy percentages are calculated based on the number of operating beds. Percent occupancy is defined as the average daily census divided by the number of operating beds.

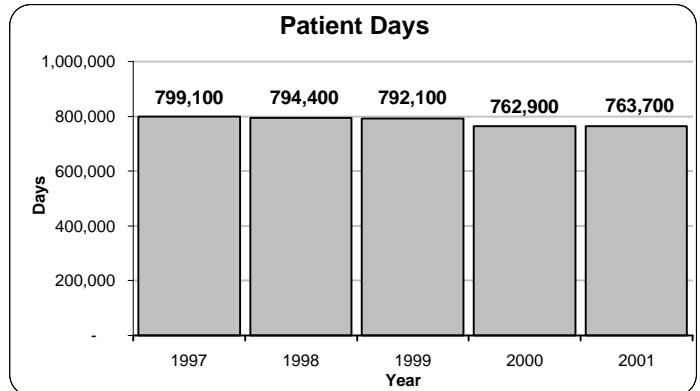
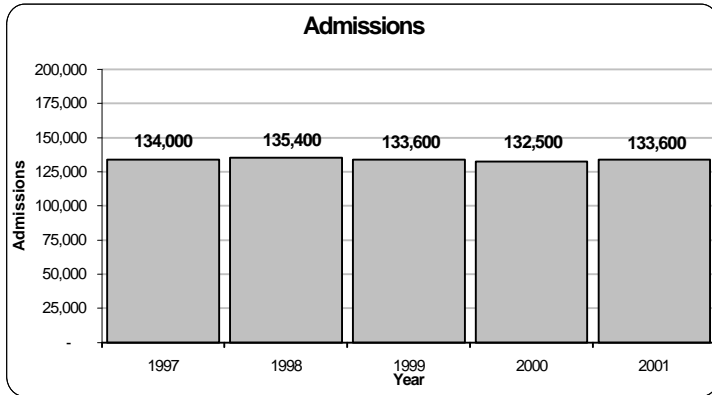
Source: DCHA Quarterly Occupancy and Bed Capacity Survey

Inpatient Admissions, Patient Days,

District of Columbia Acute Care Hospitals

Five-Year Trend: 1997 – 2001

Managed care and advanced technology have caused inpatient hospital admissions and patient days to decrease during the past decade. However, while patient days declined by 4.43 percent, the past five years have seen admission rates level off in the District.

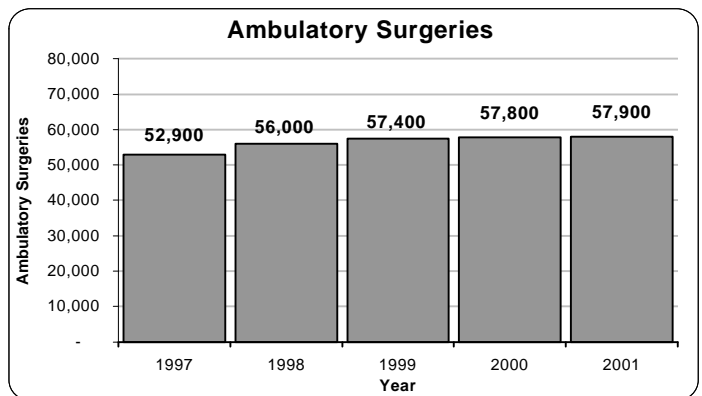
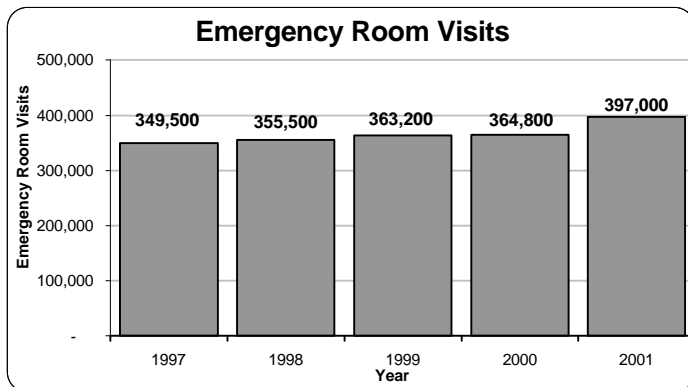


Emergency Department Visits and Ambulatory Surgeries

District of Columbia Acute Care Hospitals

Five-Year Trend: 1997 – 2001

Emergency department visits increased 13.59 percent, and ambulatory surgeries increased 9.45 percent over the past five years. The increase in emergency care is part of a national trend, which is not yet understood. In addition, the emergency rooms in the District faced a change in the city's health care delivery system and the anthrax incidents in 2001, which caused an 8.82 percent increase from 2000. The increase in ambulatory surgeries has encouraged hospitals to develop satellite facilities throughout the entire metropolitan area.



Note: Calculations are based on reported utilization figures for the District of Columbia acute care non-federal hospitals.

Note: Hadley Memorial Hospital converted to a long-term acute care facility, effective February 1, 2001, and is excluded from 2001 data.

- Definition:**
- Ambulatory Surgeries - The number of scheduled surgical services provided to patients who do not remain in the hospital overnight.
 - Emergency Department Visits - The number of visits to the hospital's emergency unit, including those resulting in admissions.
 - Inpatient Admissions - The number of patients, excluding newborns, accepted for inpatient services during the entire reporting period.
 - Inpatient Days - The number of adult and pediatric days of care, excluding newborn days of care, rendered during the entire reporting period.

Source: DCHA Monthly Utilization Survey

Admissions and Patient Days

DCHA Hospitals, 2001

The overall decrease in admissions and patient days is indicative of increased managed care and improving technology. However, the rate of decline in inpatient admissions and patient days dropped from over four percent a year to less than one percent ending in 2001 when a slight increase can be seen. While the overall rate change is minimal, individual hospitals in the District experienced an average 6.36 percent and 5.63 percent increase in admissions and patient days, respectively, in 2001 due to the closure of D.C. General Hospital.

For specialty hospitals – rehabilitation and psychiatric facilities – rates of admissions and patient days are mixed over the past year. At smaller, private facilities, rates are increasing. At the public psychiatric hospital, rates are decreasing.

DCHA has just begun to collect data for all four federal hospitals, so no trends can yet be determined.

	Admissions			Patient Days		
	2000	2001	% Change	2000	2001	% Change
Acute Care						
Children's National Medical Center	9,618	10,364	7.76%	55,394	61,279	10.62%
Columbia Hospital for Women Medical	5,182	3,512	-32.23%	15,078	11,617	-22.95%
District of Columbia General Hospital	9,627	2,856	-70.33%	56,046	17,108	-69.48%
George Washington University Hospital	11,824	13,761	16.38%	57,295	60,915	6.32%
Georgetown University Hospital	12,363	13,751	11.23%	66,465	76,674	15.36%
Greater Southeast Community Hospital	9,391	10,687	13.80%	65,373	74,109	13.36%
Howard University Hospital	11,386	12,604	10.70%	75,790	80,373	6.05%
Providence Hospital	12,398	12,808	3.31%	87,184	83,334	-4.42%
Sibley Memorial Hospital	11,233	12,489	11.18%	58,285	62,138	6.61%
Washington Hospital Center	39,526	40,768	3.14%	225,953	236,158	4.52%
ACUTE TOTAL	132,548	133,600	0.79%	762,863	763,705	0.11%
Other Specialty						
Hadley Memorial Hospital	1,583	348	-78.02%	11,329	7,691	-32.11%
National Rehabilitation Hospital	1,717	1,713	-0.23%	39,031	36,306	-6.98%
Psychiatric						
Psychiatric Institute of Washington, D.C.	1,726	2,014	16.69%	24,864	26,577	6.89%
Saint Elizabeths Hospital/CMHS	2,064	1,966	-4.75%	221,707	201,270	-9.22%
Federal						
Veterans Affairs Medical Center	6,399	6,709	4.84%	45,566	42,296	-7.18%
Walter Reed Army Medical Center	10,448	10,974	5.03%	74,421	66,442	-10.72%
Malcolm Grow Medical Center, AAFB	3,222	3,060	-5.03%	11,745	10,418	-11.30%
National Naval Medical Center	7,636	7,680	0.58%	33,907	33,771	-0.40%
SUBTOTAL – DC ONLY	156,485	157,324	0.54%	1,179,781	1,144,287	-3.01%
GRAND TOTAL	167,343	168,064	0.43%	1,225,433	1,188,476	-3.02%

Definition:

- Inpatient Admissions - The number of patients, excluding newborns, accepted for inpatient services during the entire reporting period.
- Inpatient Days - The number of adult and pediatric days of care, excluding newborn days of care, rendered during the entire reporting period.

Source: DCHA Monthly Utilization Survey

Emergency Department Visits and Ambulatory Surgeries

DCHA Hospitals, 2001

The pattern of emergency department visits reflects a national trend, as well as several local issues. Nationally, emergency room visits have risen 5 percent from 2000 to 2001, while the District has seen an overall increase of 8.82 percent. Individually, D.C. hospitals experienced an average increase of 15.68 percent, due in large part to the change in status of the emergency department at D.C. General Hospital. The anthrax incidents in the fall also contributed to the large increase, as emergency department visits in October 2001, compared to the same time period in the previous year, increased 14.9 percent, with several hospitals topping well over 25 percent increase.

The continuing increase in ambulatory surgeries demonstrates improved clinical practice to provide care on the outpatient side.

	Emergency Department Visits			Ambulatory Surgeries		
	2000	2001	% Change	2000	2001	% Change
Acute Care						
Children's National Medical Center	47,706	62,847	31.74%	5,189	5,017	-3.31%
Columbia Hospital for Women Medical Center	N/A	N/A	N/A	3,679	2,718	-26.12%
District of Columbia General Hospital	51,491	34,541	-32.92%	3,325	1,306	-60.72%
George Washington University Hospital	44,854	46,338	3.31%	5,323	5,452	2.42%
Georgetown University Hospital	21,756	25,559	17.48%	8,259	8,160	-1.20%
Greater Southeast Community Hospital	37,429	44,972	20.15%	2,557	3,977	55.53%
Howard University Hospital	43,784	48,435	10.62%	4,858	6,278	29.23%
Providence Hospital	35,862	41,437	15.55%	6,250	6,923	10.77%
Sibley Memorial Hospital	23,115	25,739	11.35%	7,261	7,690	5.91%
Washington Hospital Center	58,826	67,130	14.12%	11,071	10,385	-6.20%
ACUTE TOTAL	364,823	396,998	8.82%	57,772	57,906	0.23%
Federal						
Veterans Affairs Medical Center	14,520	16,374	12.77%	3,120	3,158	1.22%
Walter Reed Army Medical Center	20,195	19,482	-3.53%	11,088	9,960	-10.17%
Malcolm Grow Medical Center, AAFB	28,440	30,331	6.65%	2,967	2,194	-26.05%
National Naval Medical Center, Bethesda	19,521	20,010	2.50%	N/A	6,099	N/A
SUBTOTAL – DC ONLY	399,538	432,854	8.34%	71,980	71,024	-1.33%
GRAND TOTAL	447,499	483,195	7.98%	74,947	79,317	5.83%

Note: Includes data for all hospitals providing emergency room services and ambulatory surgeries.

Definition: • Ambulatory Surgeries - The number of scheduled surgical services provided to patients who do not remain in the hospital overnight.
• Emergency Department Visits - The number of visits to the hospital's emergency unit, including those resulting in admissions.

Source: DCHA Monthly Utilization Survey

Source: AHA Survey of Emergency Department (ED) and Hospital Capacity, April 2002.



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