

Health Information – Making a Difference

Breakfast with the Chiefs

November 15, 2005

Graham W.S. Scott, C.M., Q.C. Chair

Glenda Yeates, President and CEO



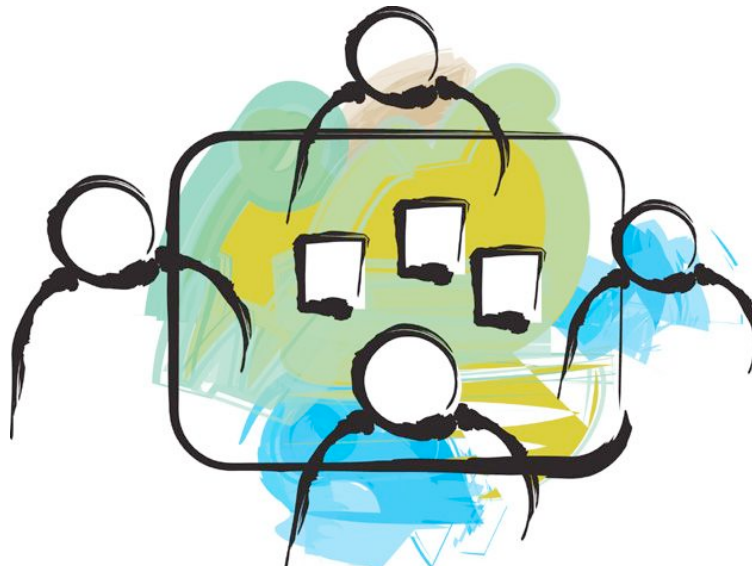
Canadian Institute
for Health Information
Institut canadien

Outline

- Who We Are
- Strategic Directions
- Looking Forward
- Recent Releases

Vision

- CIHI improves the health of Canadians and strengthens their health system by:
 - developing, integrating and disseminating timely and relevant health and health services information, and
 - by facilitating informed discussion and evidenced-based decision-making



Our Mandate

- To serve as a national coordination mechanism for health information in Canada
- To provide accurate and timely information that is required for:
 - **Sound health policy**
 - **Effective management of health care system**
 - **Public awareness of health determinants**
- Through the work carried out by the Canadian Population Health Initiative (CPHI), CIHI aims to:
 - **Foster a better understanding of factors that affect the health of individuals and communities; and**
 - **Contribute to developing policies that reduce inequities and improve the health and well being of Canadians**

Governance

- 16-member Board, proportionally constituted to:
 - Create a balance among health sectors and regions of Canada
 - Determine health information needs for F/P/T governments and non-government health delivery agencies
 - Provide strategic guidance to CIHI and Health Statistics Division of Statistics Canada
 - Advise the Conference of Deputy Ministers of Health.

Our Offices

Over 400 employees across Canada

Regional offices in Western Canada
with a new office in Montreal

New bilateral agreement with Québec



Edmonton

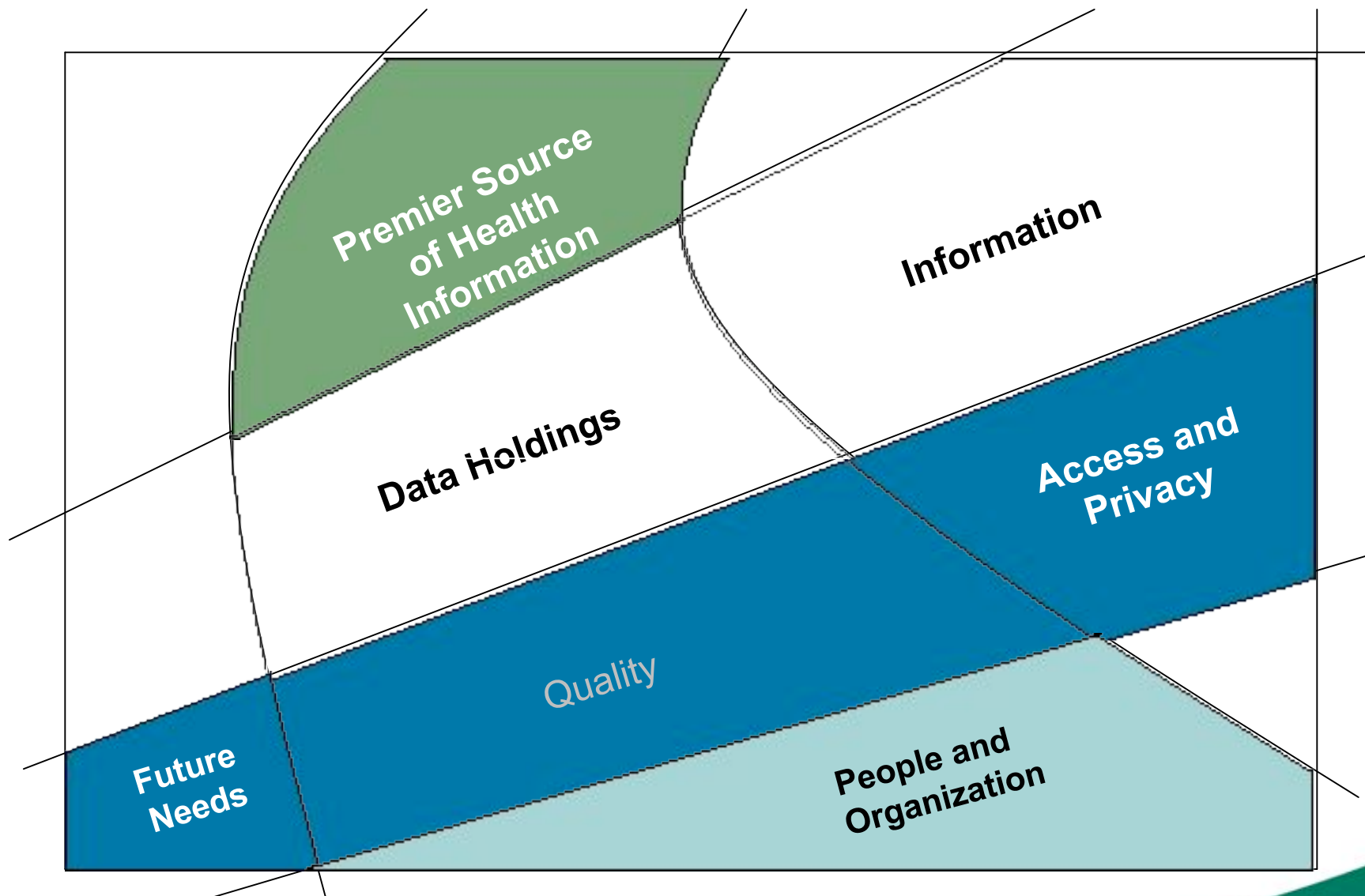
Victoria

Montreal

Ottawa

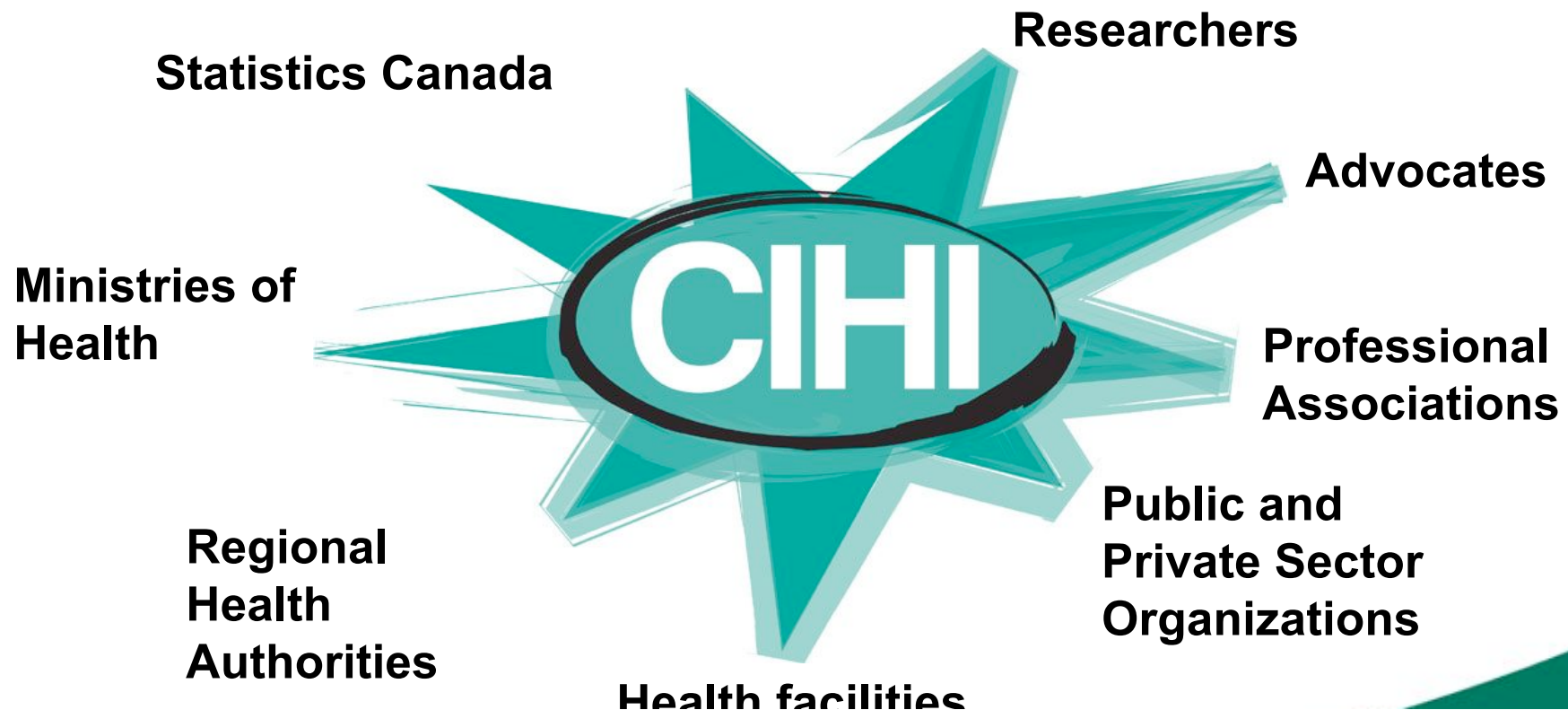
Toronto

CIHI's Strategic Directions



Premier Source of Information – Collaboration is key

- CIHI facilitates the collaboration of many different groups of stakeholders, who collectively join to form Canada's health information infrastructure.



Who we serve – Our Target Audiences

- Policy-makers
- Health System Managers
- Members of the Public

Where we have made progress

- More Databases
- More analyses
- Timeliness
- Data Quality

Data Holdings - 1994

- **Health Services**

- DAD
- Hospital Morbidity
- Hospital Mental Health
- Therapeutic Abortions
- Organ Registry (CORR)
- Trauma Registry (OTR)

- **Health Professionals**

- Physician
 - NPDB
 - SMDB
- Nursing
 - RNDB
- Health Personnel

- **Health Expenditures**

- Provincial, regional, and local (CMDB)
- National (NHEX)
- International (OECD)

Data Holdings - 2005

Health Services

- Discharge Abstract Database (DAD)
- Hospital Morbidity
- Ambulatory Care (NACRS)
- Hospital Mental Health
- Therapeutic Abortions
- Organ Registry (CORR)
- Trauma Registry (NTR/OTR)
- Joint Replacement Registry (CJRR)
- Continuing Care (CCRS)
- Rehabilitation (NRS)
- Ontario Mental Health Reporting System (OMHRS)
- Medical Imaging Technology (MIT)

UNDER DEVELOPMENT

- Home Care Reporting System
- Pharmaceutical (NPDUIS)
- Medication Incident Reporting (CMIRPS)

Health Professionals

- Physician
 - NPDB, SMDB
- Nursing
 - RNDB, LPNDB
 - RPNDB
- Health Personnel
- Five new HHR databases under development e.g. Pharmacists and O.T.

Health Expenditures

- Provincial, regional, and local (CMDB)
- National (NHEX)
- International (OECD)

Publications

2000-2001:

- Total number of analytical reports released = **18**
- CIHI released its first Annual **Health Care in Canada** Report.

2005-2006:

- Total number of analytical reports planned/released = **48**

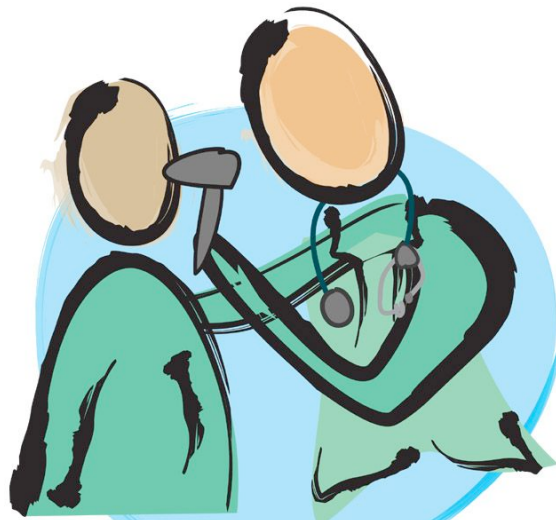
Major Releases – Some examples

- **Flagship Reports Reports**
 - Health Care in Canada
 - Improving the Health of Canadians-Report Series
- **Special/Thematic Reports**
 - Funding Report
 - The Nurse Practitioner Workforce
 - Giving Birth in Canada
 - E.D. Wait Times
- **Media Releases/Analytical Bulletins**
 - Family Doctors
 - Childhood drowning
 - Alcohol and motor vehicle accidents
- **Annual Database Reports**
 - National Health Expenditures (NHEX)
 - Drug Expenditures in Canada
 - Medical Imaging Technology
 - Workforce Trends of RNs, LPNs and RPNs
 - Hospital Mental Health Care in Canada
 - Inpatient Rehabilitation in Canada
 - Supply, Distribution and Migration of Canadian Physicians
 - Health Personnel Trends in Canada

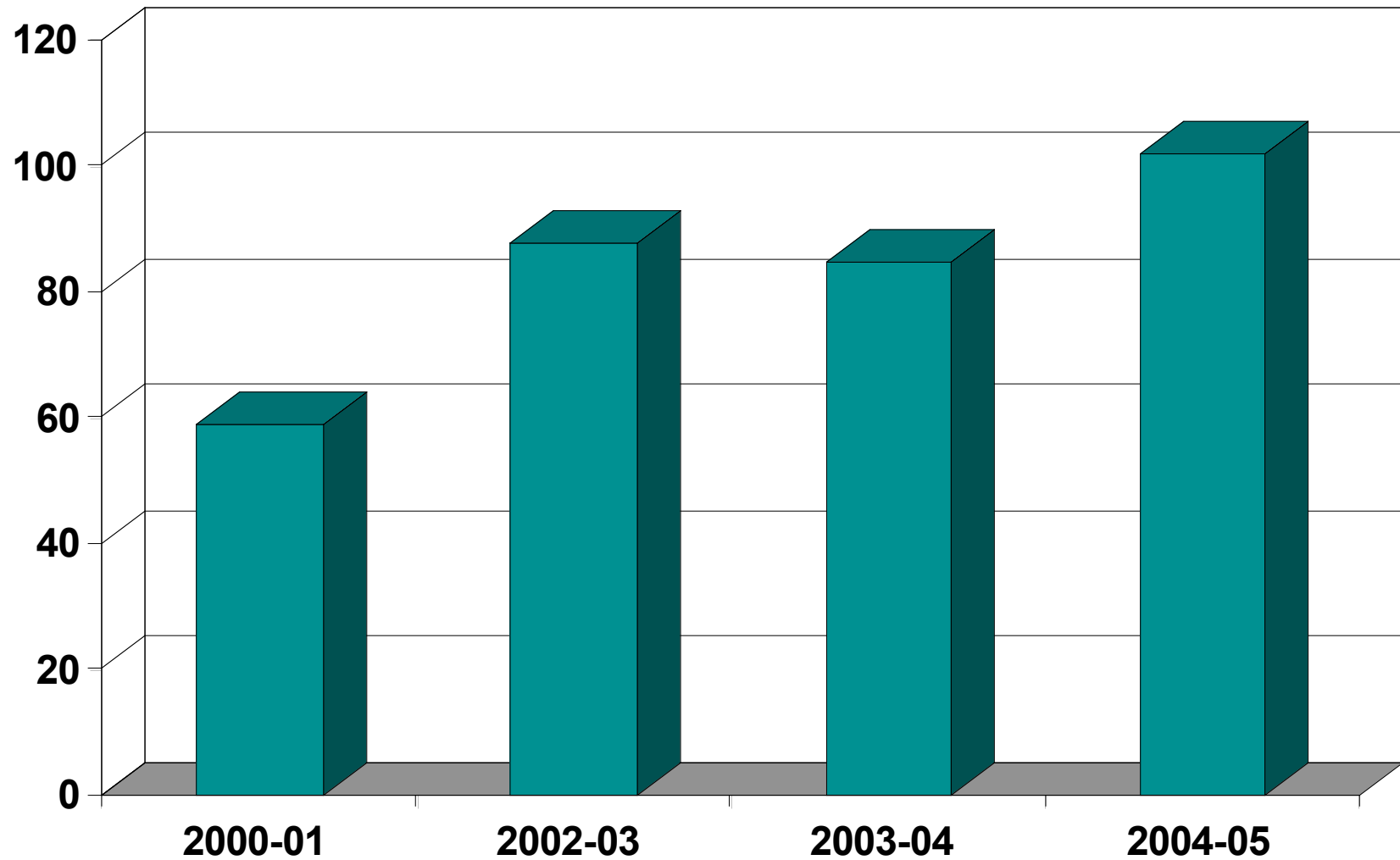
- So what's the impact?
- How does CIHI's health information make a difference?

Supporting Health Care Managemen

- **Health indicators** ➡ Used by the University of Ottawa Heart Institute and area hospitals to re-organize and improve services for AMI patients
- **Continuing Care Reporting System (CCRS) data** ➡ Used by a Toronto-based regional rehabilitation centre to reduce the rate of bed sores



Journal Citations

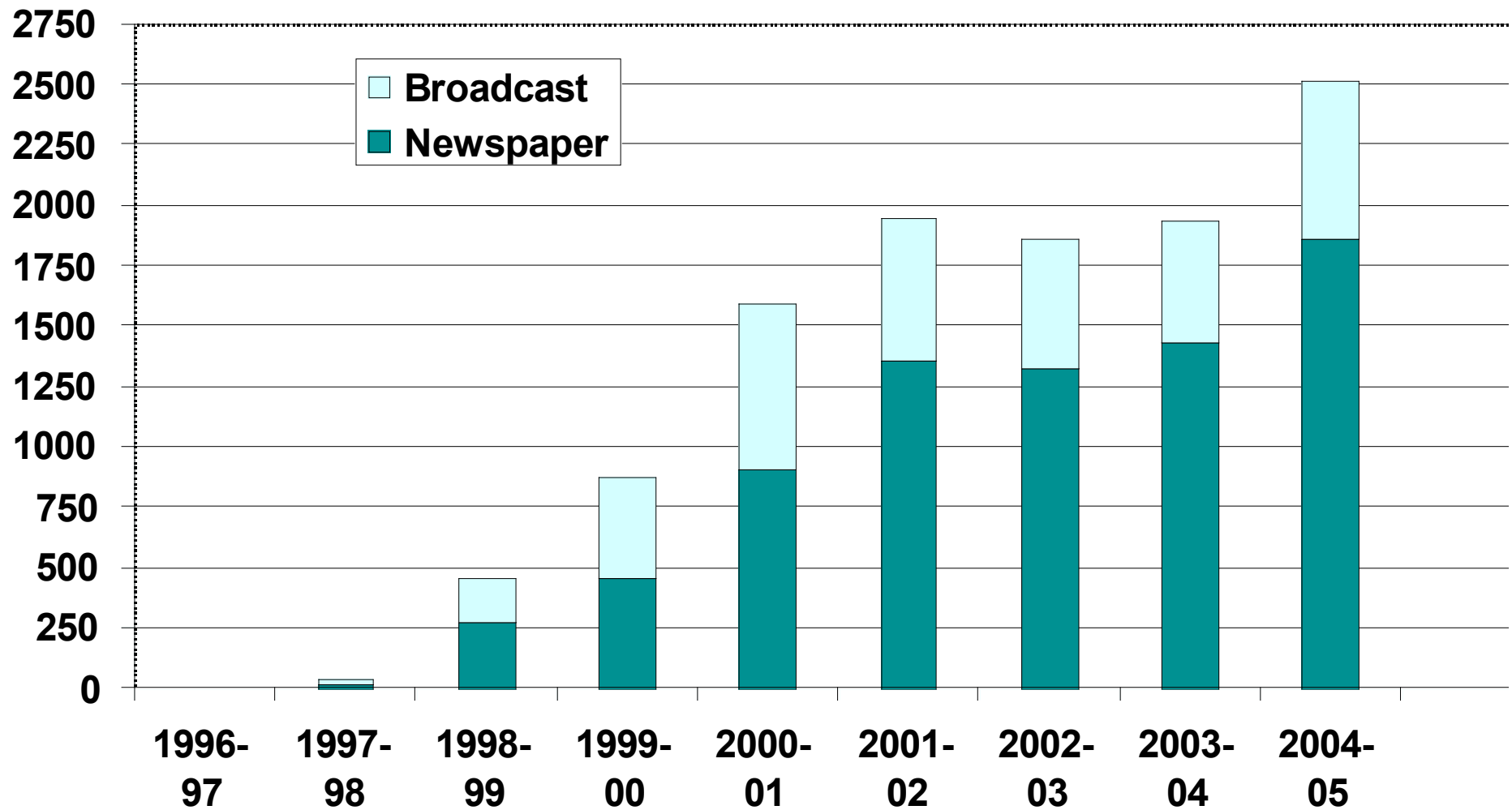


Supporting Policy-makers

- National Trauma Registry featured in SafeKids Canada's report: *Booster Seat Use in Canada: A National Challenge*
- Ontario government legislation making booster seats mandatory introduced May 2004, passed in December 2004



Media Citations



Supporting the Community

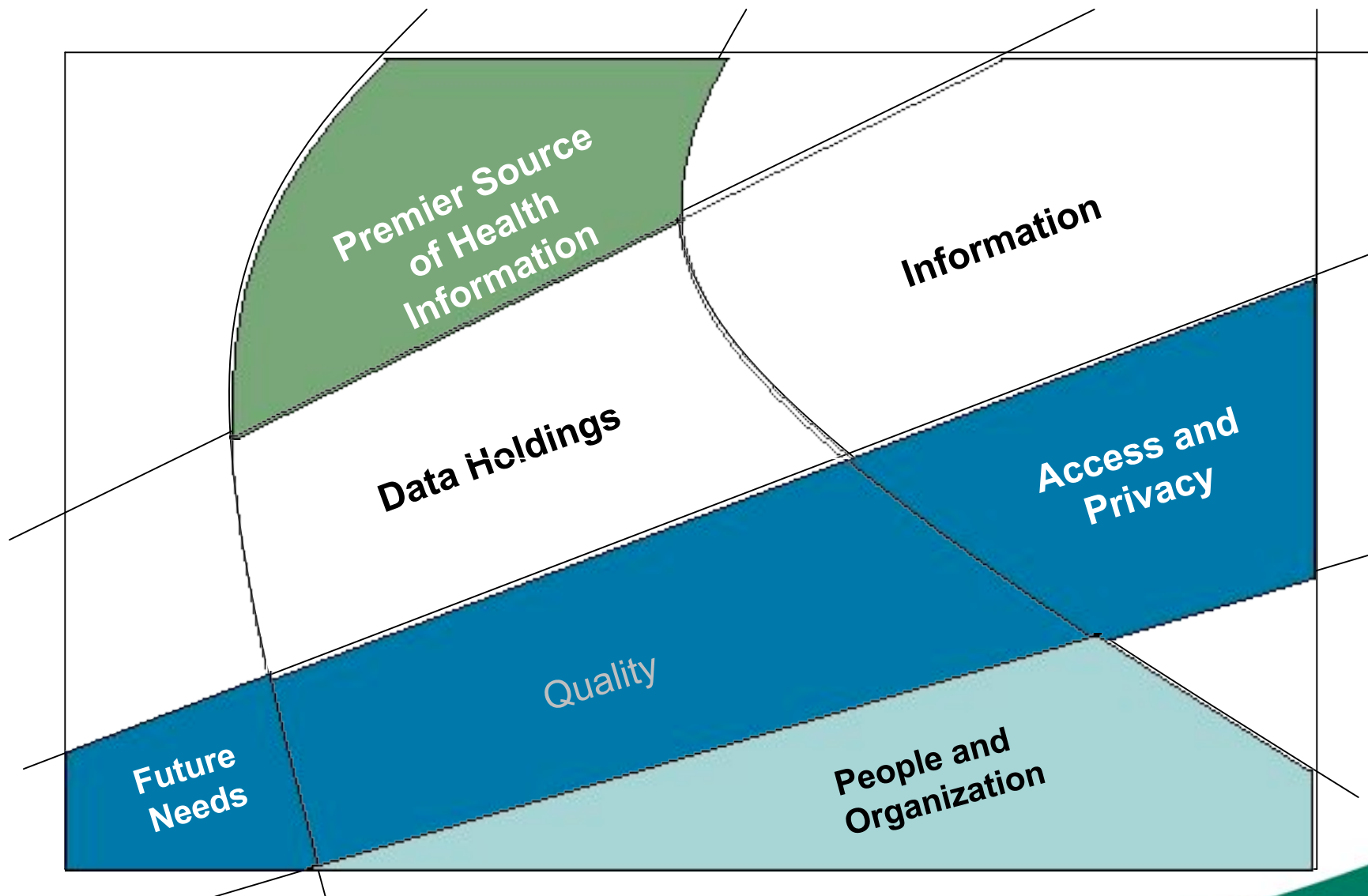
- CPHI-funded research on childhood obesity was used to kick-off School Council discussion of healthy food at school events.
- Next Spring Fair: free carrot sticks and apple slices (but cotton candy still available!)



Where we need your help

- Timeliness of our data
 - reliance on providers to supply timely data
- Data Quality
 - Support with our data quality strategies

CIHI's Strategic Directions – Looking Forward



Looking Forward

- Enhanced analytical products
- Continued database development
- Increased emphasis on data quality
- New tools for better access to information
- Regional connections

Enhanced Analytical Products

- Access to care/Wait times
- Quality/Outcomes of health services
- Health Human Resources
- Population Health activities
- Costs/expenditures

New Indicator Development

- Safer Healthcare Now!
- Hospital Standardized Mortality Rates (HSMR)
- Primary Health Care Indicators

Continued Database Development

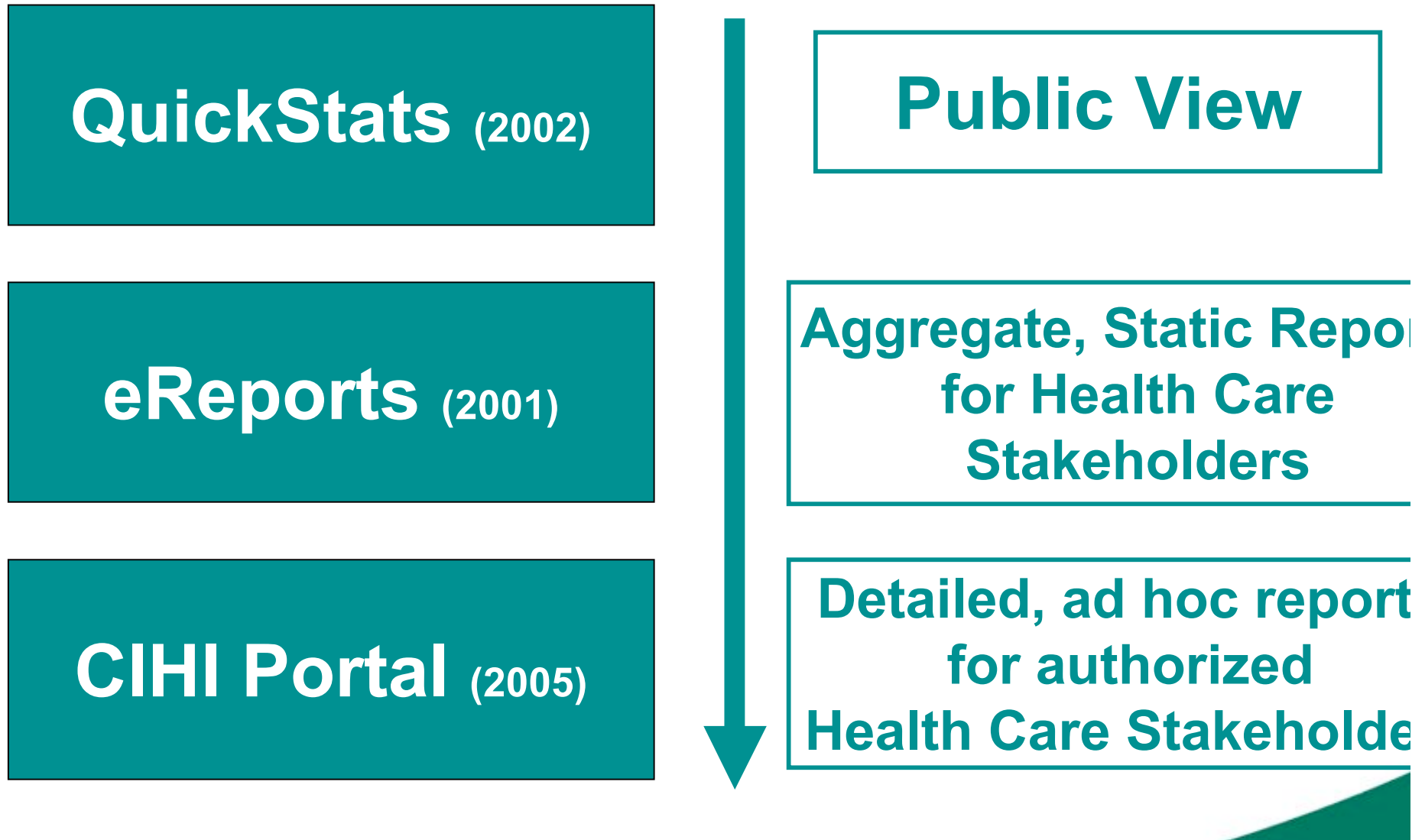
- Drug Utilization Database
- Medication Incident Reporting
- Health Human Resources
- Focus on adding new jurisdictions to existing databases e.g.
 - Ambulatory Care/E.R.
 - Home Care Reporting System

Addressing Data Quality

- Timeliness
- Data Quality Strategy including re-abstraction studies
- Data Quality Progress Reports to Deputy Ministers of Health



CIHI's Evolving External Electronic Data Access & Analytical Sophistication



Portal Features

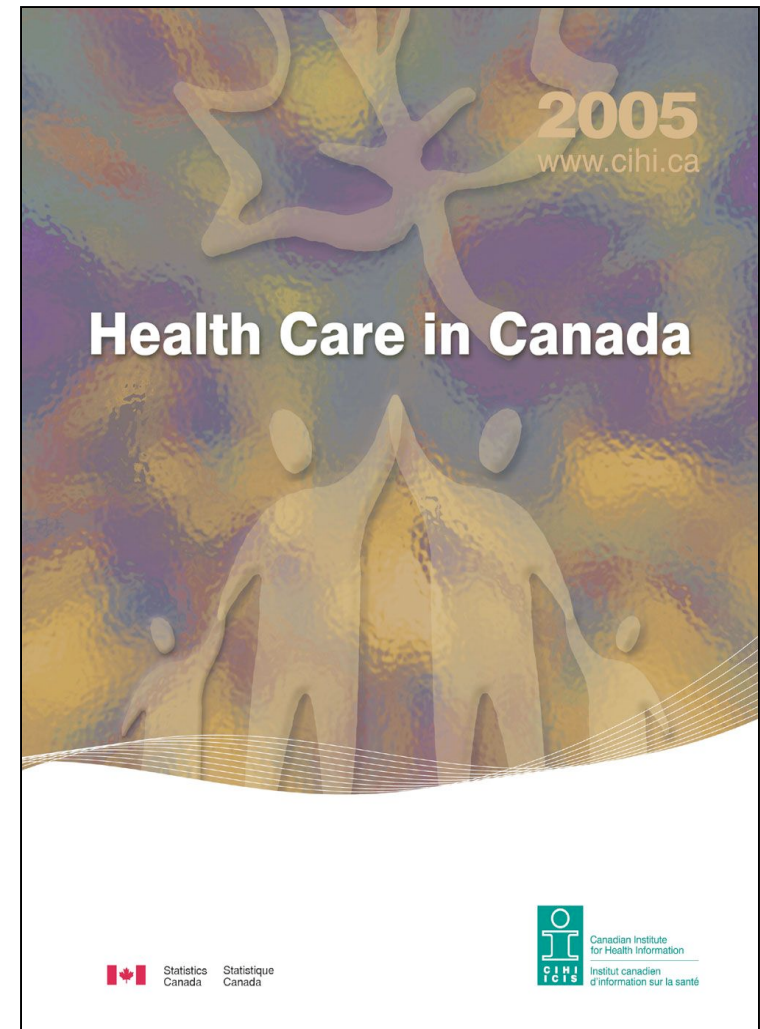
- Secure access to pan-Canadian CIHI data
- Powerful web-based analytical tools
- Custom facility comparisons
- Patient de-identified analysis
- Standardized templates
- Peer collaboration
- User-specific e-Learning

Capturing the Portrait of Health Care

Some recent examples

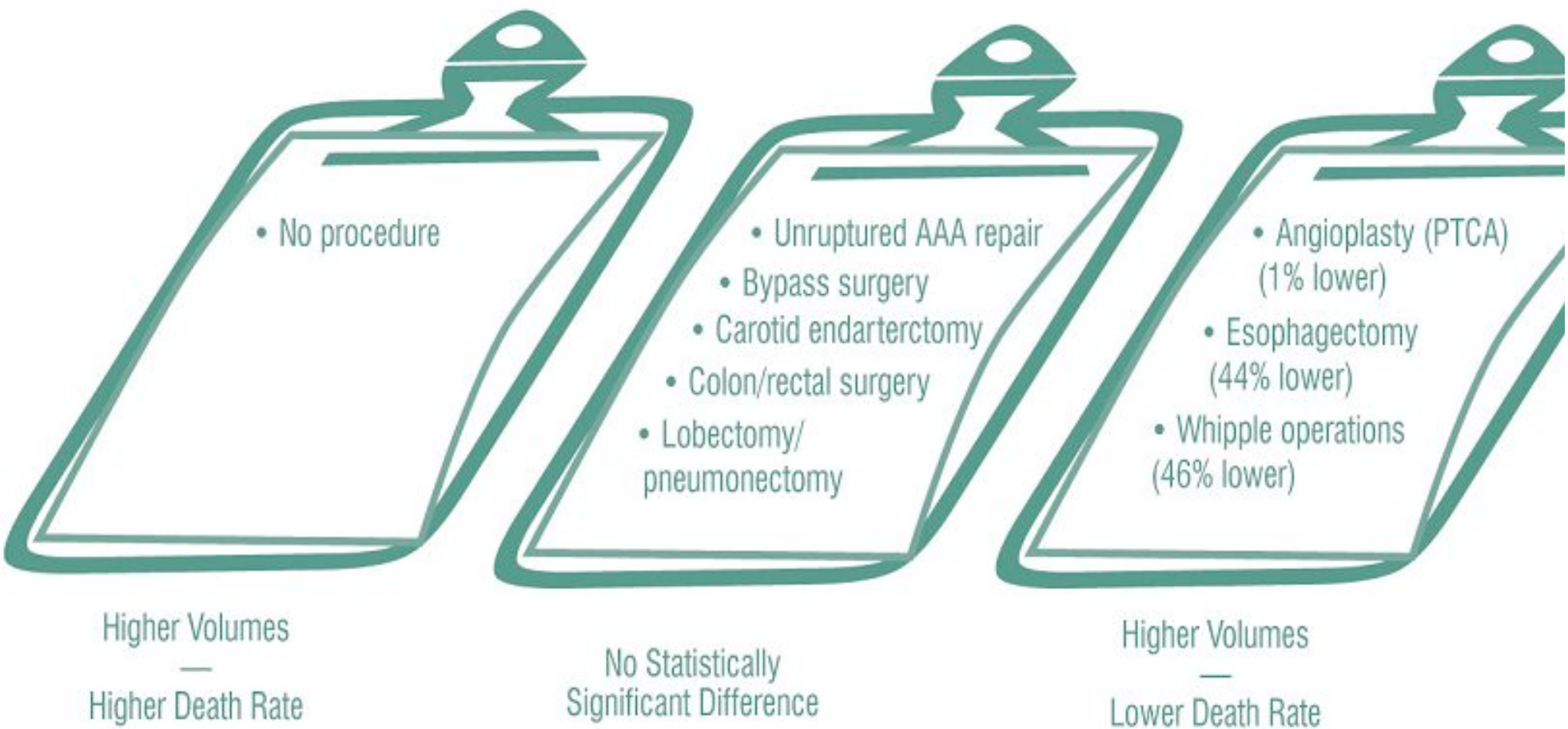
On Quality and Outcomes- *Health Care in Canada*

- This report was released in June 2005 and focused on volumes and outcomes

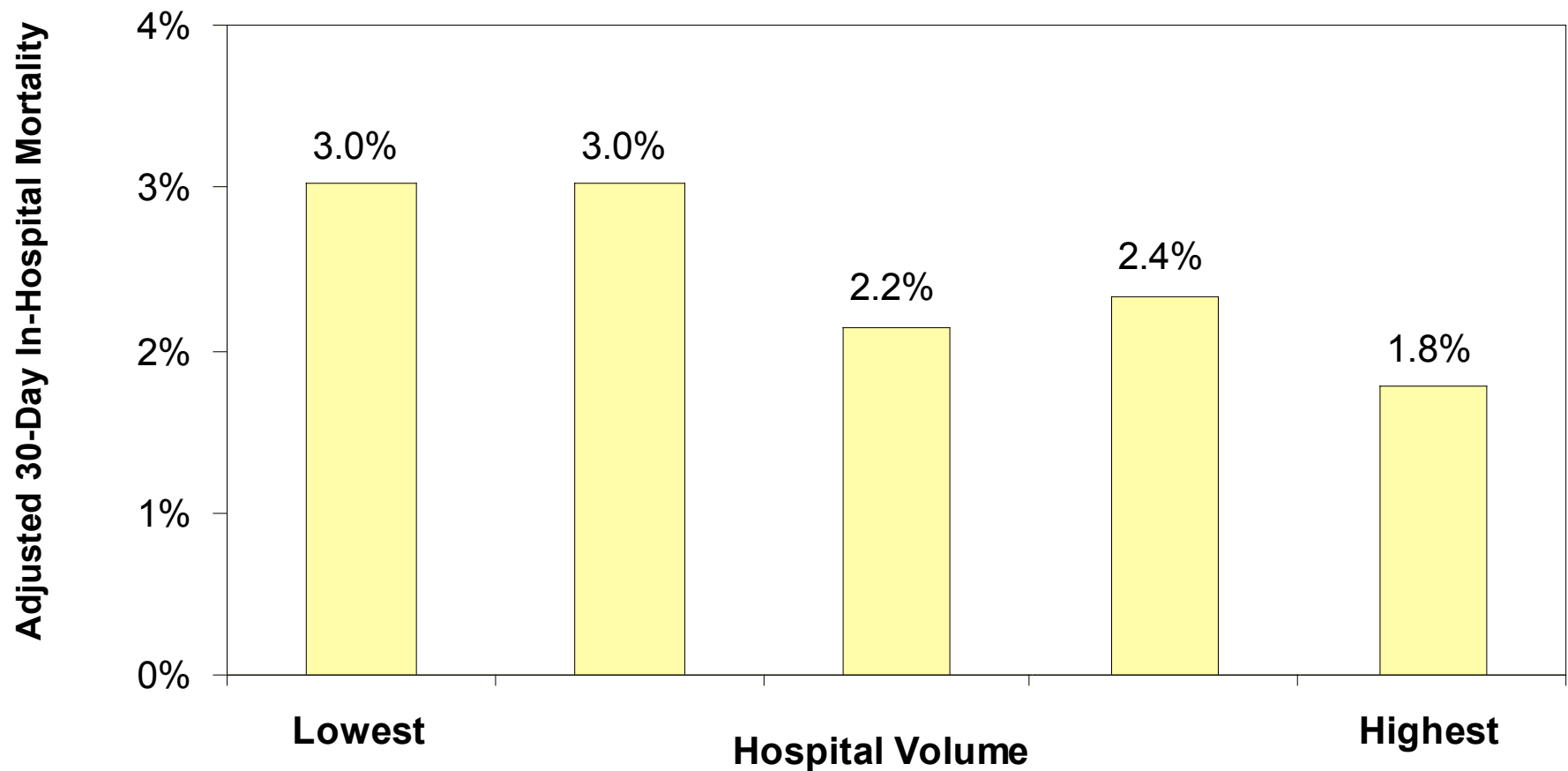


Low Volumes

What Are The Odds?



Mortality by Hospital Volume Quintile: Abdominal Aortic Aneurysm Repair

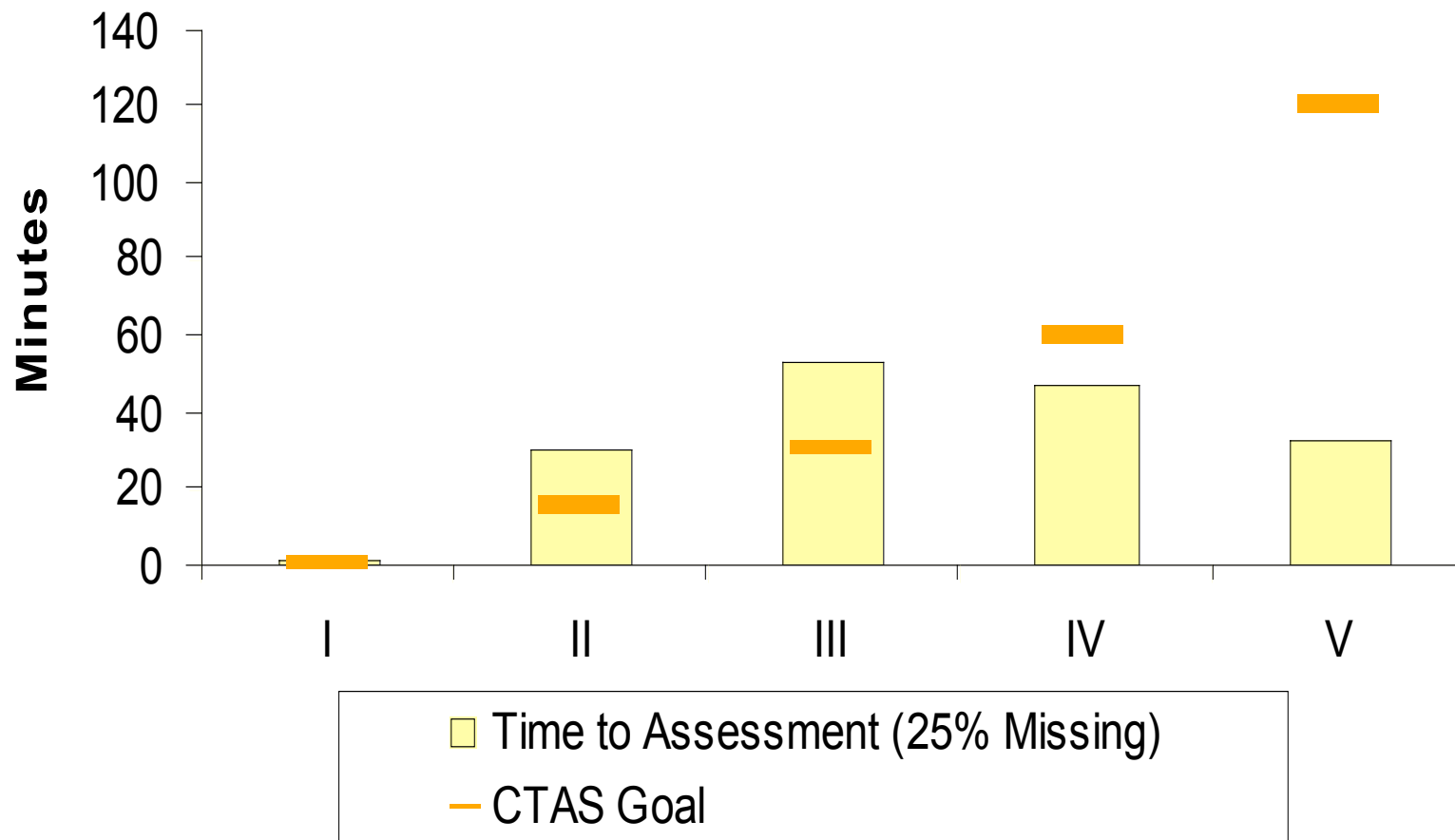


On Access to Care/Wait times

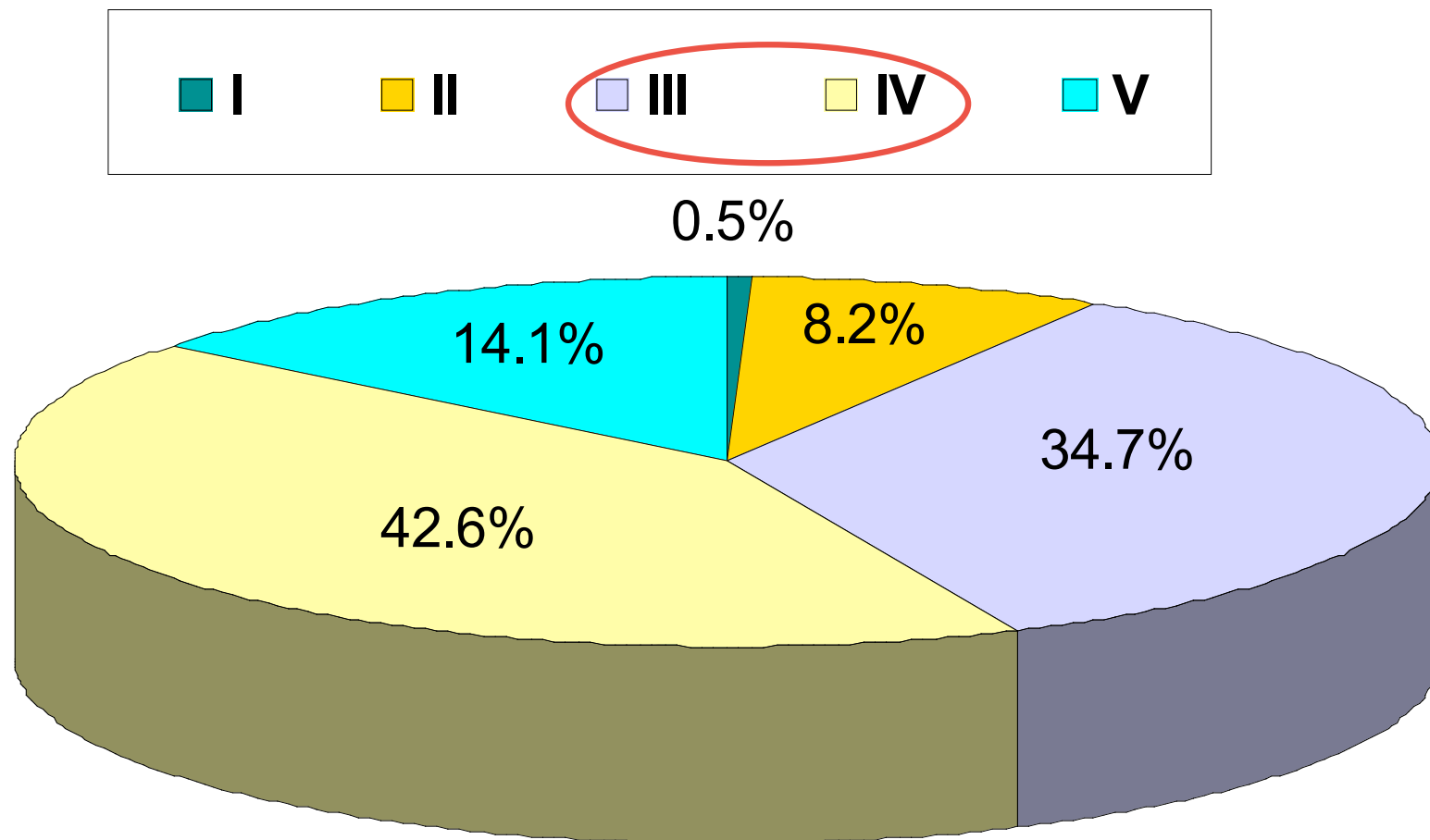
Emergency Department Wait Times Report

- In September 2005 *Understanding Emergency Department Wait Times: Who Is Using Emergency Departments and How Long Are They Waiting?*, 2005 was released.
- It is the first of three reports focusing on selected Canadian emergency departments.

Time to Initial Patient Assessment by CTAS Category: Ontario



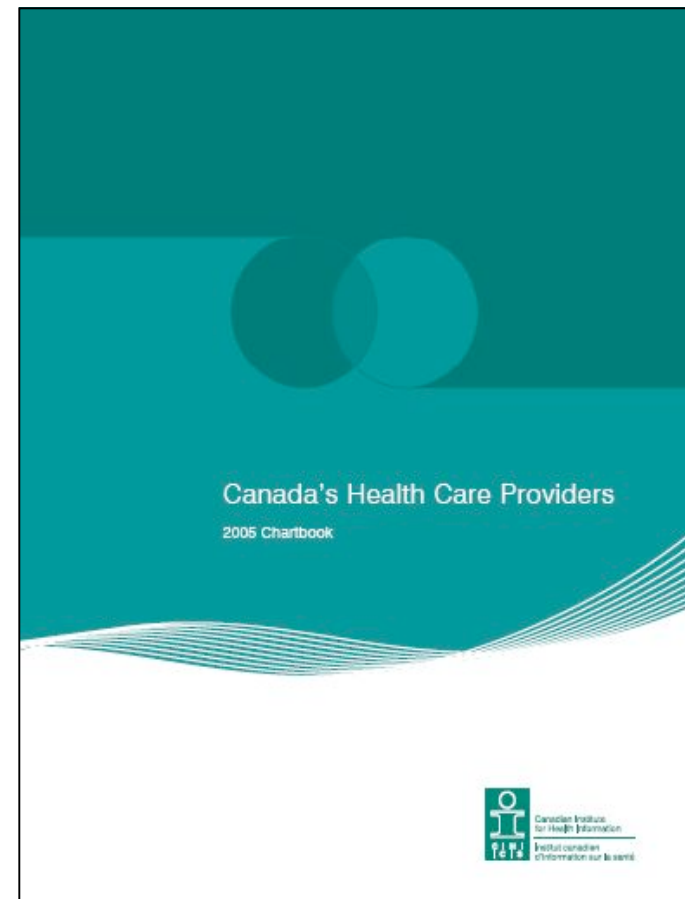
Visits and Triage Level: Ontario



On Health Human Resources

Canada's Health Care Providers

- In June 2005, CIHI released an update of a report released in 2001 on *Canada's Health Care Providers*.
- It addresses issues such as the supply, distribution, education, regulation, scopes of practice, work life, and health of these individuals.



The Health of Health Workers

Average Days Lost in 2004

Health Occupations

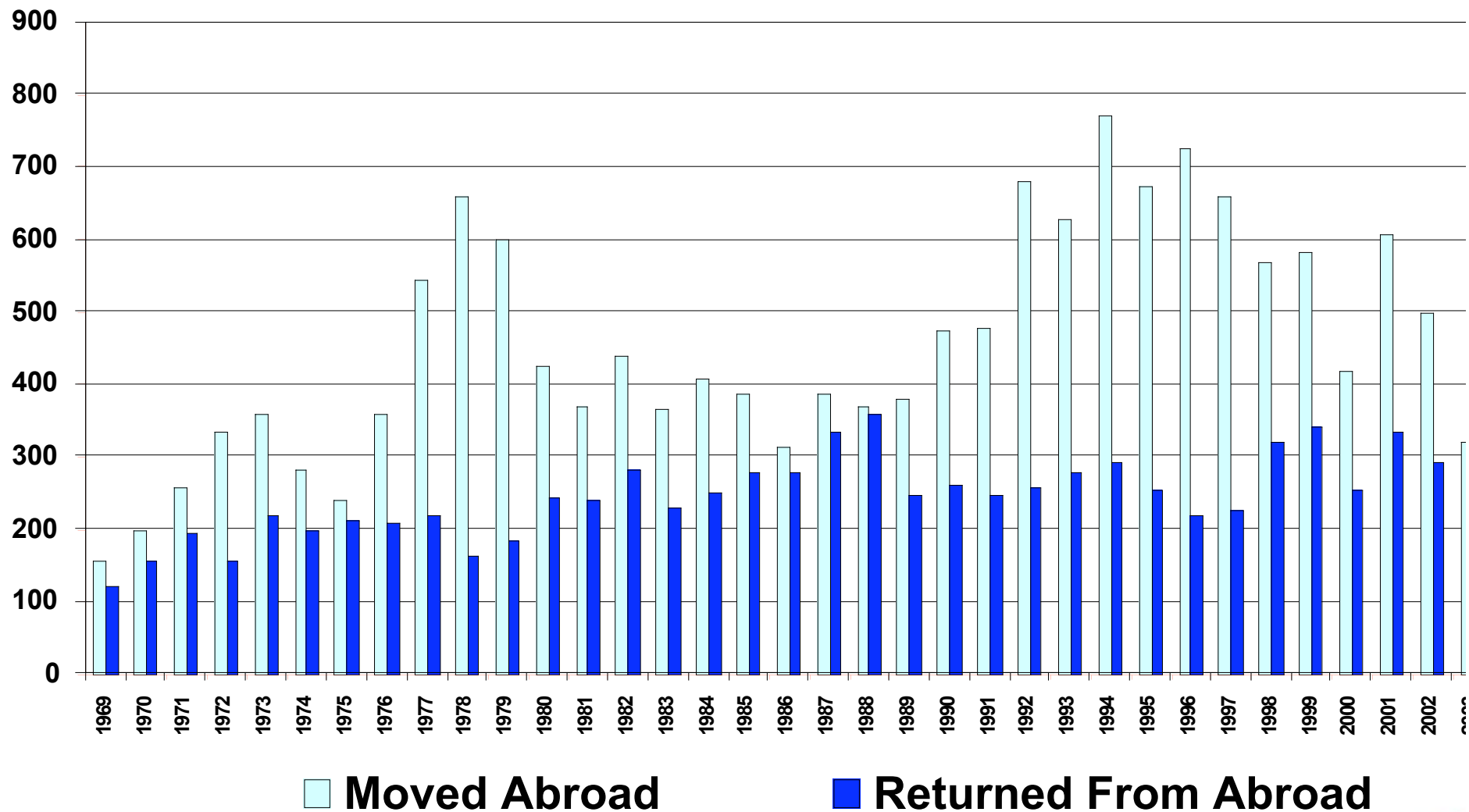
12.8

All Other Occupations

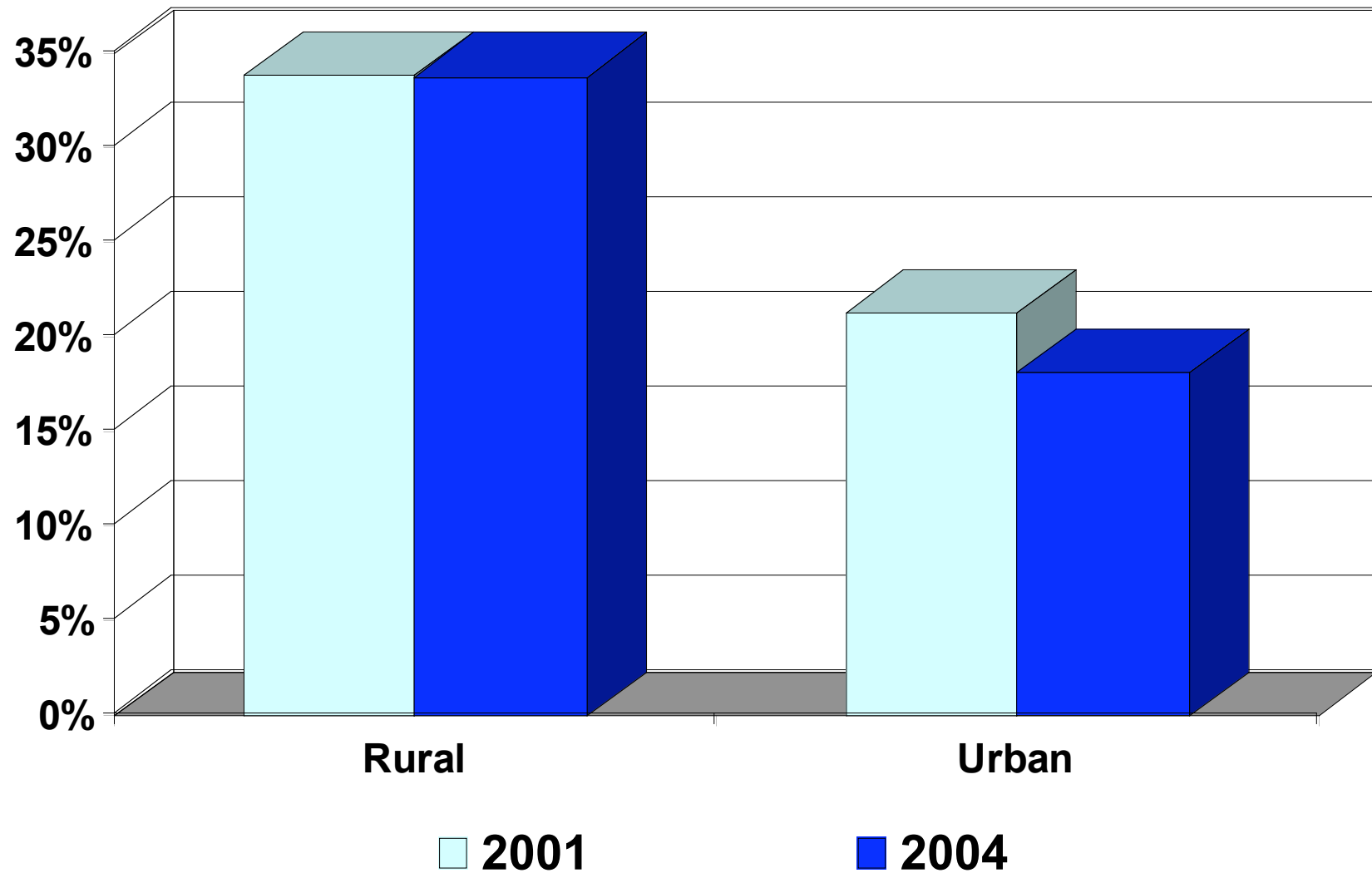
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Number of Physicians Moving Abroad and Returning From Abroad, Canada, 1969-2004



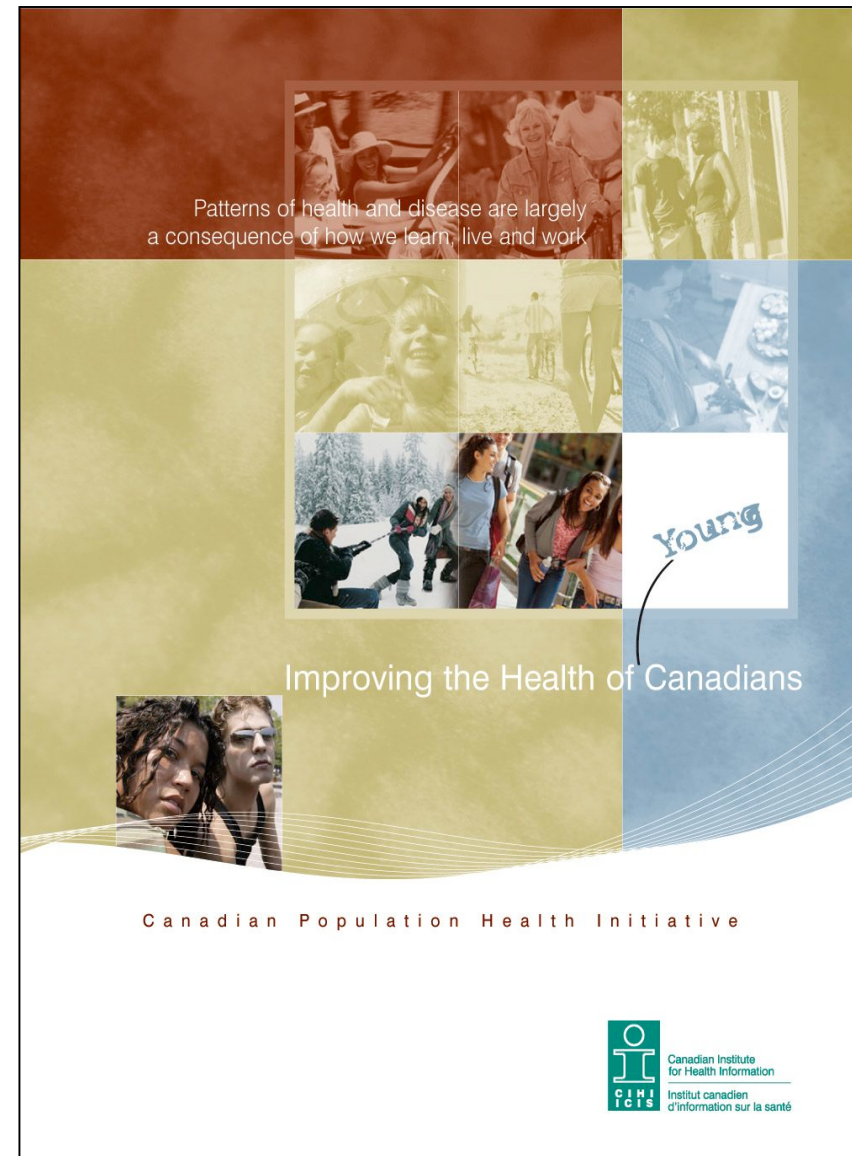
Percent of Rural and Urban Family Physicians Accepting New Patients, Canada, 2001 and 2004



On Population Health

Improving the Health of Young Canadians

- First in the series of reports for 2005-2006
- Canadian youth aged 12 to 19 years
- Explores links between adolescents' social environment and their health
- Discusses themes from current research
- Reviews relevant programs and policies



Just the Facts: Pediatric Obesity

- Youth 12-17 years:
 - Rates of overweight/obesity among 12-17 year olds increased from **14%** in 1978/79 to **29%** in 2004
 - **26%** of children and youth (2-17 years) were overweight or obese in 2004
 - Among girls, **43%** trying to lose weight, 3% trying to gain, 21% trying to maintain and 33% doing nothing
 - Among boys, **19%** trying to lose weight, 19% trying to gain, 14% trying to maintain and 47% were not doing
 - youth (12-15 years) who report a high level of parental nurturance, parental monitoring, school engagement, peer connectedness and who volunteer report better perceptions of their appearance than those who report medium-low levels

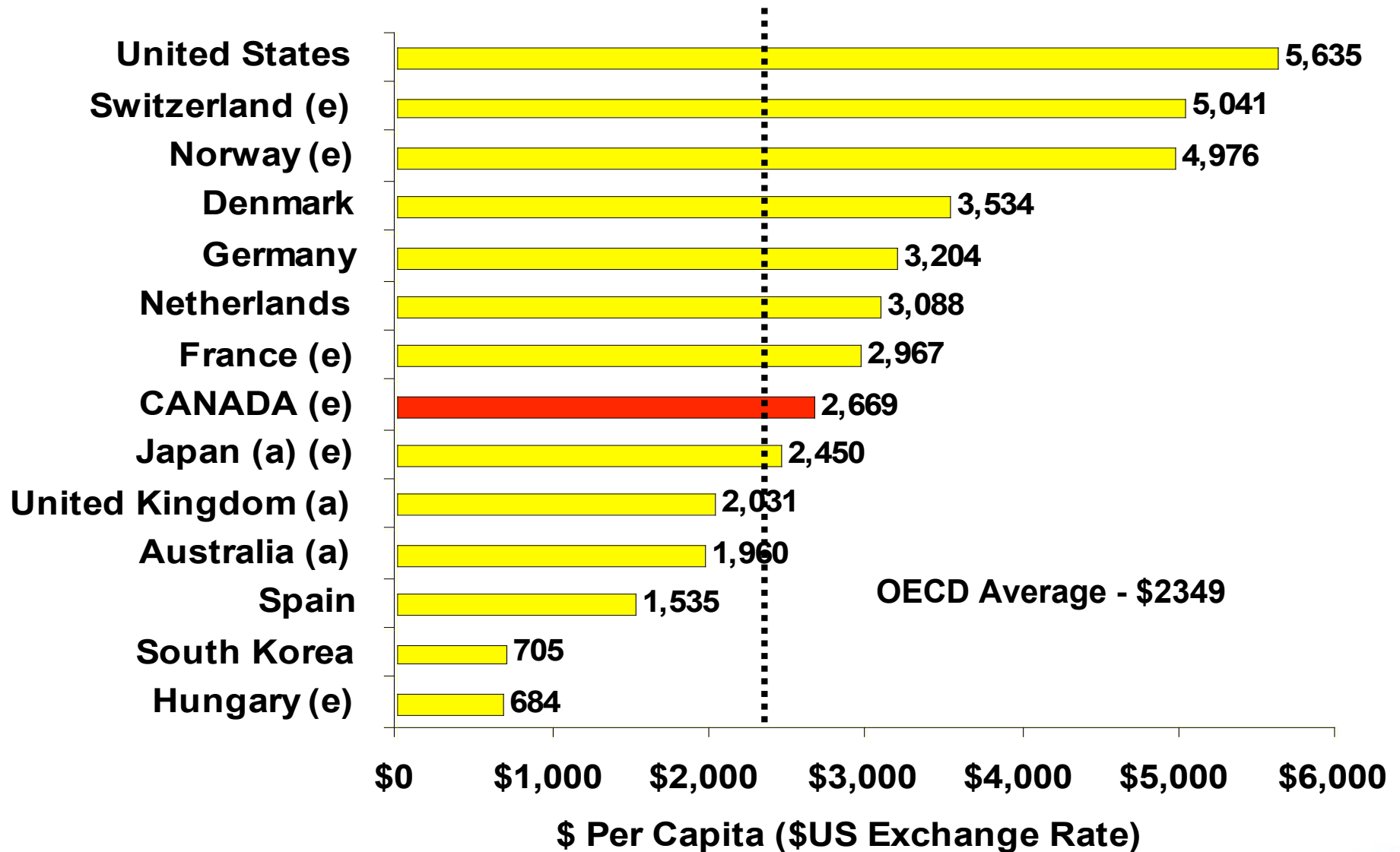
On Costs and Expenditures

Exploring the 70/30 Split: How Canada's Health Care System Is Financed

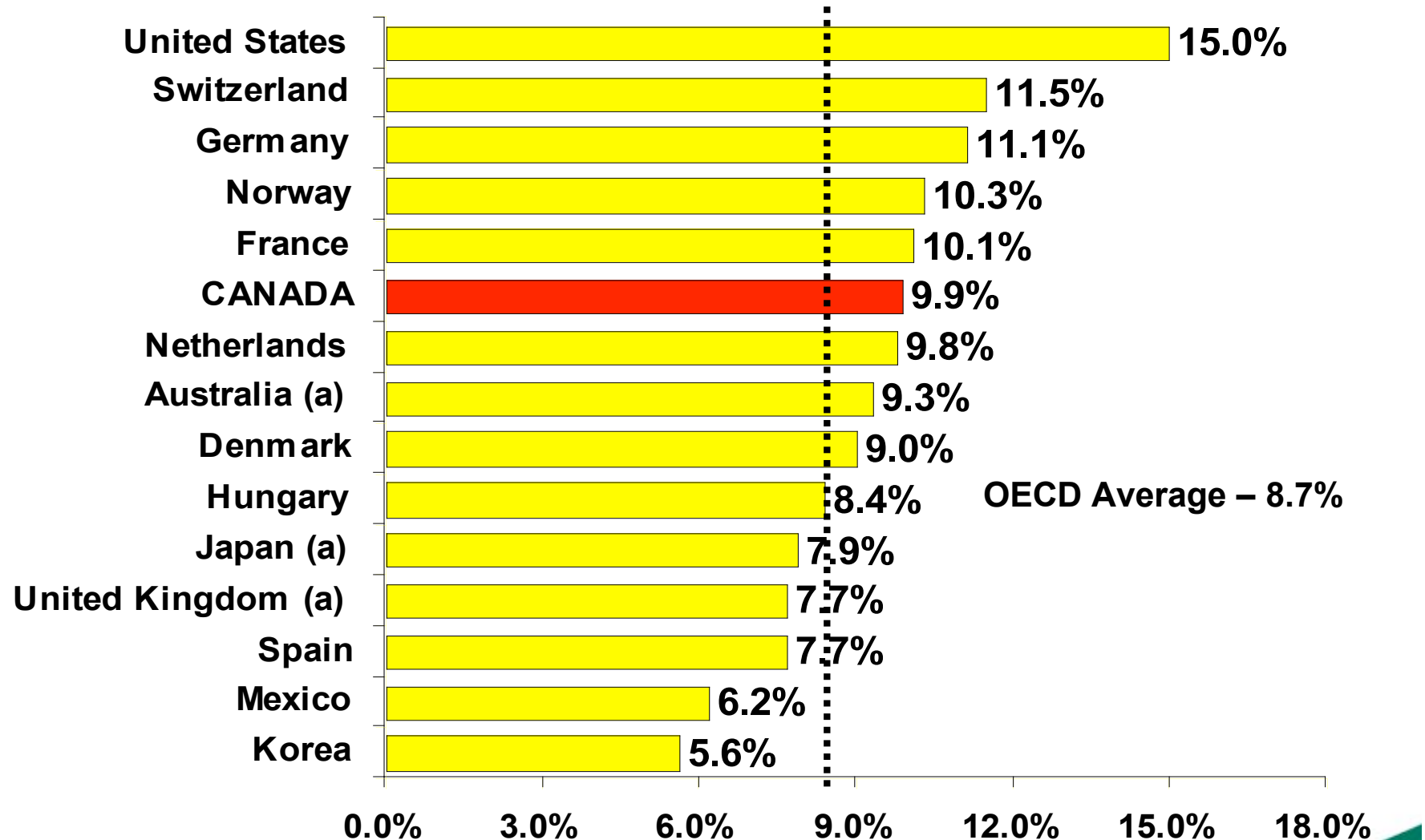
- Today, about 70% of total Canadian health expenditures comes from the public purse. The remainder (about 30%) comes from private sources.
- This report, which was released in September 2005 looks at trends in financing and at variations in this 70/30 split across provinces



Total Health Expenditure Per Capita, 15 Selected Countries, 2003

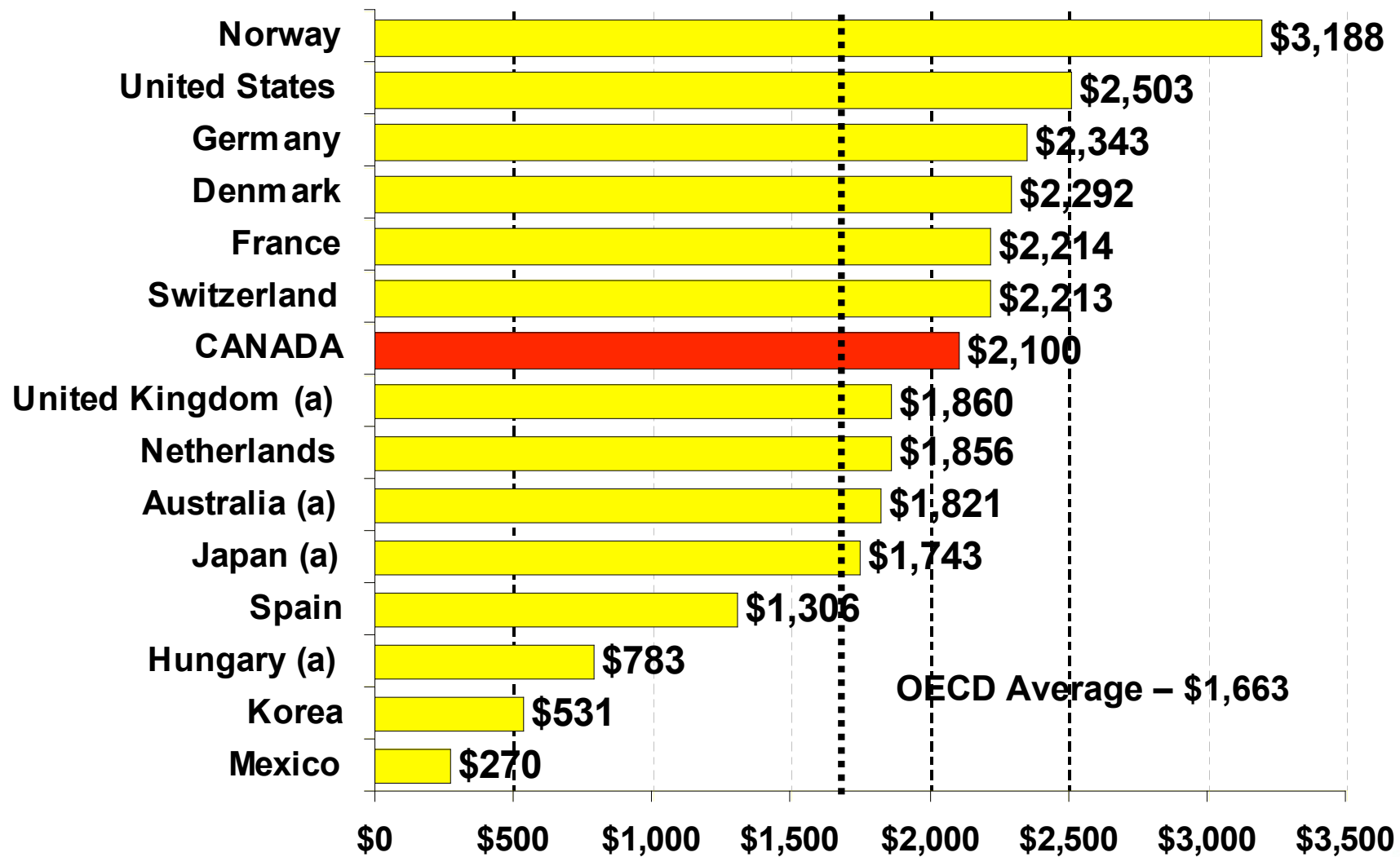


Total Health Expenditure as a Percent of GDP, 15 Selected Countries, 2003



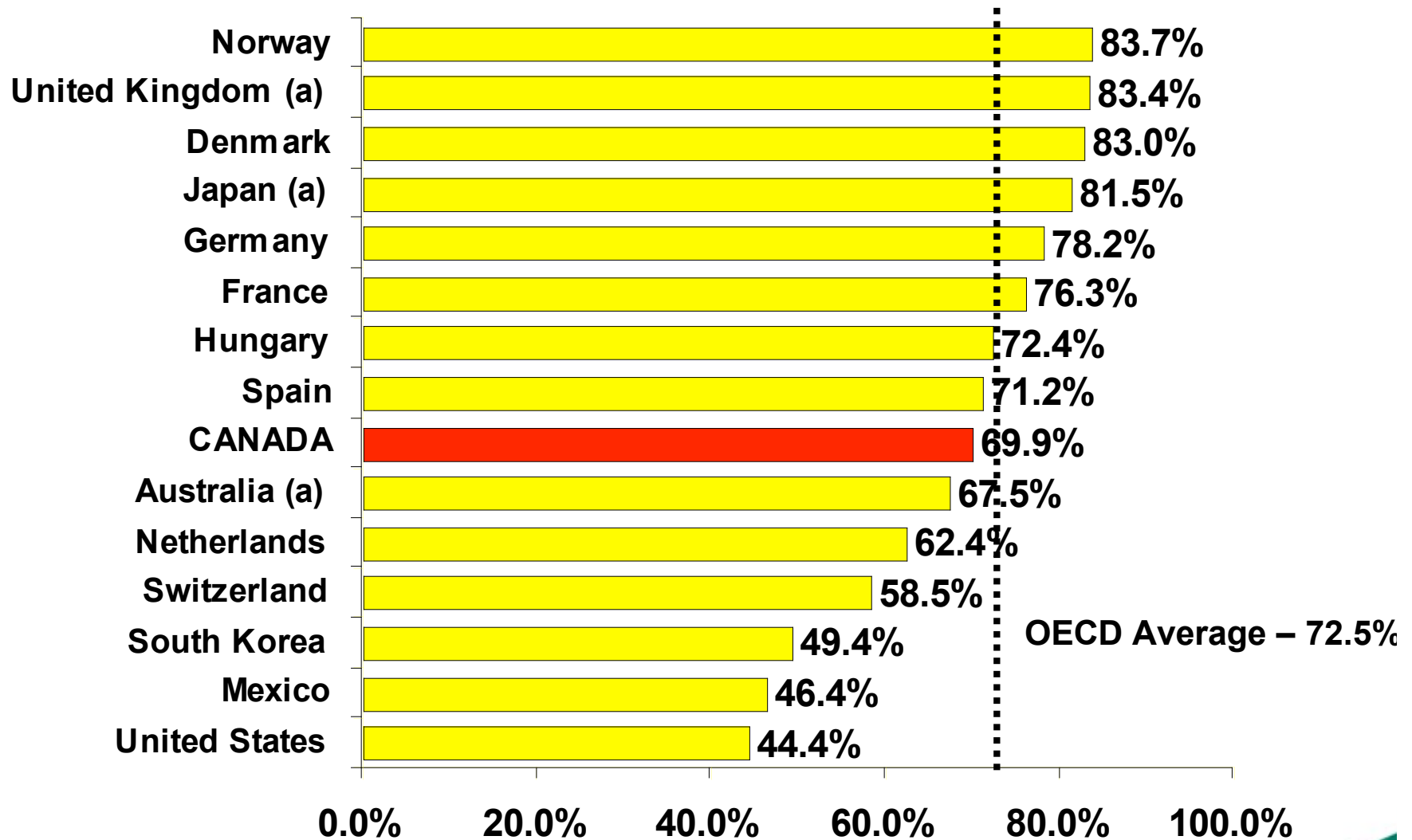
Public Sector Health Expenditure Per Capita in USD, 15 Selected Countries, 2003

Taking health information further
How we guard the information sur la s



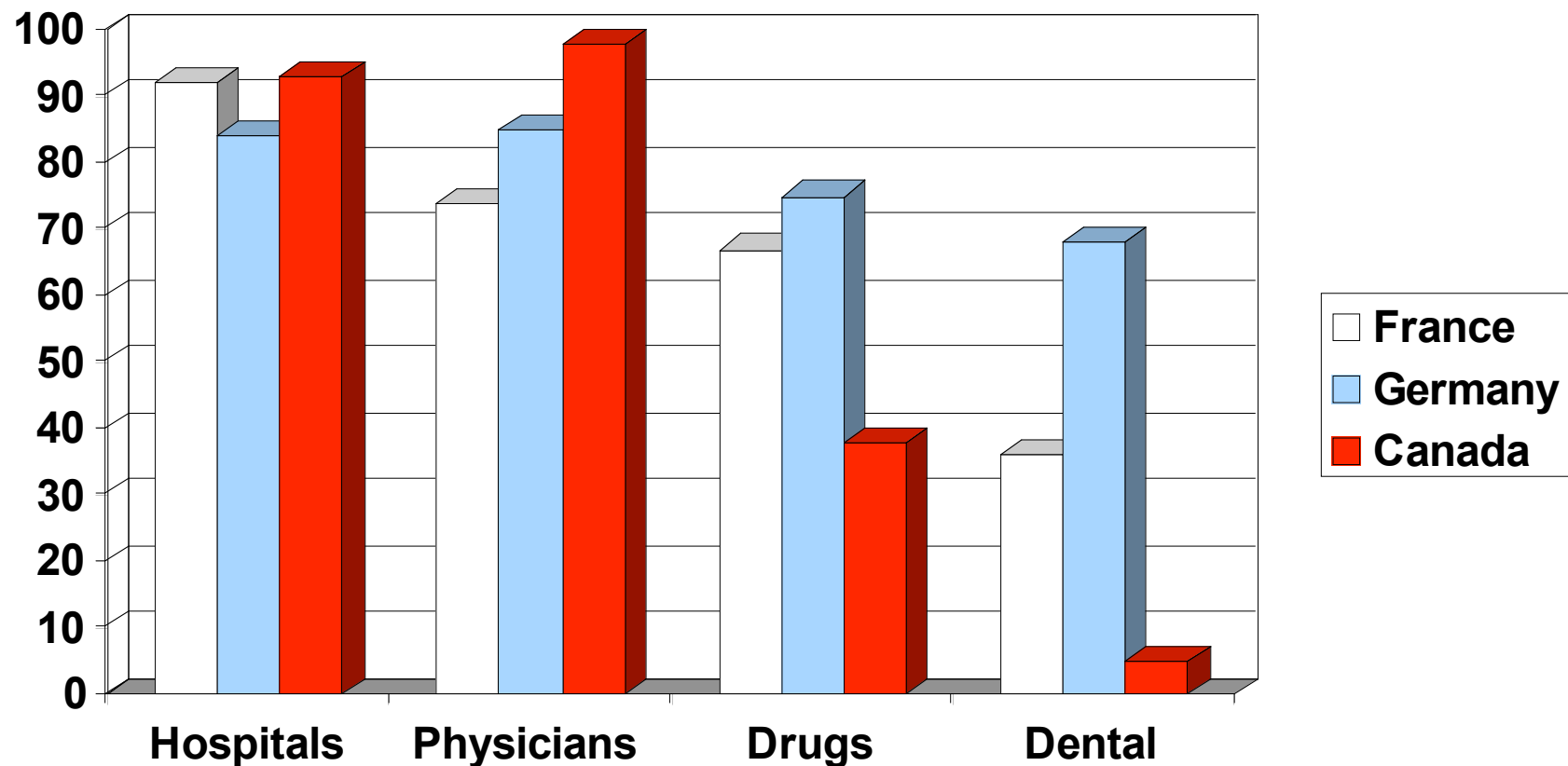
Source: OECD Health Data 2005.

Public Share of Total Health Expenditure 15 Selected Countries, 2003



Public Spending in 2003

Percentage of Services Covered by Public Funds



Source: OECD Health Data 2005

Local Health Integration Networks - LHINs

- October 2004 – the first information bulletin on LHINs was released where the 14 geographic boundaries were outlined
- June 2005 – Chairs and CEOs announced for the 14 LHINs
- June 2005 – CIHI released its *Health Care in Canada Report and Health Indicators 2005*
- For the first time, reported health indicators based on the LHIN boundaries

Looking Forward

- Increasing demand for quality data
- Ensuring that the data is used and understood
- Being innovative and creative
- Collaborate with partners - old and new

Thank you!