

Indicator Library

Welcome to CIHI's Indicator Library

This library brings together metadata for health indicators in a convenient location on CIHI's website. For each indicator, definitions, methodologies and characteristics such as reporting level are summarized in a standard template. Indicator results can also be accessed from hyperlinks provided in the library. The indicators in the library are organized according to CIHI's [Health System Performance Measurement Framework](#), but the tool also allows you to search for indicators by [areas of need](#) and reporting levels

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Refine Indicator List

Select one or more categories of interest to refine indicator list

Health System Performance (HSP) Framework

1. Social Determinants of Health

Social and economic factors that influence the health of the population and inequalities in health

- 1.1 - Structural factors influencing health
- 1.2 - Biological, material, psychosocial and behavioural factors

2. Health System Inputs and Characteristics

Resources and characteristics that frame the health system

- 2.1 - Leadership and governance
- 2.2 - Health system resources
- 2.3 - Efficient allocation of resources
- 2.4 - Adjustment to population health needs
- 2.5 - Health system innovation and learning capacity

3. Health System Outputs

Characteristics of the health services (or outputs) produced by the health system

- 3.1 - Access to comprehensive, high-quality health services
- 3.2 - Person-centred
- 3.3 - Safe
- 3.4 - Appropriate and effective
- 3.5 - Efficiently delivered

Areas of Need

Indicators categorized under the Health System Outputs dimension of the Health System Performance framework, can be further categorized under Areas of Need.

- A - Staying Healthy Staying Healthy Health system services related to promoting and maintaining health (prevention)
- B - Getting Better Getting Better Health system services related to improving and restoring health (acute care)
- C - Living With Illness, Disability or Reduced Function Living With Illness, Disability or Reduced Function Health system services related to continuous and integrated care and support for chronic illness and disability and/or reduced function
- D - Coping With End of Life Coping With End of Life Health system services related to planning, care and support for life-limiting illness and bereavement

4. Health System Outcomes

High-level outcomes and goals of the health system

- 4.1 - Improve health status of Canadians
- 4.2 - Improve health system responsiveness
- 4.3 - Improve value for money

Refine Indicator List Clear All

Each column can be sorted (alphabetically or numerically) by selecting the column header (press Enter on your keyboard). Select the column header again to reverse the sorting order.

Showing all indicators

Reporting Levels

Indicator	HSP Framework	Areas of Need	Equity		National / Terr.		Prov. Region Facility	
			Yes	No	Yes	No	Yes	No
30-Day Acute Myocardial Infarction In-Hospital Mortality	3.4 Appropriate and effective	B Getting better	Yes	Yes	Yes	Yes	No	No
30-Day Acute Myocardial Infarction Readmission	3.4 Appropriate and effective	B Getting better	Yes	Yes	Yes	Yes	No	No
30-Day All-Cause Readmission Rate After Isolated Coronary Artery Bypass Graft (CABG)	3.4 Appropriate and effective	B Getting better	No	Yes	Yes	No	Yes	Yes
30-Day All-Cause Readmission Rate After Percutaneous Coronary Intervention (PCI)	3.4 Appropriate and effective	B Getting better	No	Yes	Yes	No	Yes	Yes
30-Day In-Hospital Mortality After Coronary Artery Bypass Graft (CABG) and Aortic Valve Replacement (AVR)	3.4 Appropriate and effective	B Getting better	No	Yes	Yes	No	Yes	Yes
30-Day In-Hospital Mortality After Isolated Aortic Valve Replacement (AVR)	3.4 Appropriate and effective	B Getting better	No	Yes	Yes	No	Yes	Yes
30-Day In-Hospital Mortality After Isolated Coronary Artery Bypass Graft (CABG)	3.4 Appropriate and effective	B Getting better	No	Yes	Yes	No	Yes	Yes
30-Day In-Hospital Mortality After Percutaneous Coronary Intervention (PCI)	3.4 Appropriate and effective	B Getting better	No	Yes	Yes	No	Yes	Yes
30-Day Readmission for Mental Illness	3.2 Person-centred	C Living with illness, disability or reduced function	Yes	Yes	Yes	Yes	No	No
30-Day Readmission for Mental Illness, Age 15+ (General Hospital Only)	3.2 Person-centred	C Living with illness, disability or reduced function	Yes	Yes	Yes	Yes	No	No
30-Day Readmission for Mood Disorders	3.2 Person-centred	C Living with illness, disability or reduced function	No	Yes	Yes	Yes	No	No
30-Day Stroke In-Hospital Mortality	3.4 Appropriate and effective	B Getting better	Yes	Yes	Yes	Yes	No	No
Age-Adjusted Public Spending per Person	2.2 Health system resources	-Not Applicable	No	No	Yes	No	No	No
All Patients Readmitted to Hospital	3.4 Appropriate and effective	B Getting better	No	Yes	Yes	Yes	Yes	Yes
Ambulatory Care Sensitive Conditions	3.4 Appropriate and effective	C Living with illness, disability or reduced function	Yes	Yes	Yes	Yes	No	No
Assisted Delivery Rate (Overall) Among Vaginal Deliveries	2.4 Adjustment to population health needs	-Not Applicable	No	Yes	Yes	Yes	No	No
Asthma Emergency Department Visits: Volume and Median Length of Stay	3.4 Appropriate and effective	C Living with illness, disability or reduced function	No	No	No	No	No	No
Average Gross Clinical Payment per Physician	2.2 Health system resources	-Not Applicable	No	No	Yes	No	No	No
Average Number of Drug Classes Used by Seniors on Public Drug Programs	3.4 Appropriate and effective	C Living with illness, disability or reduced function	No	No	Yes	No	No	No
Avoidable Deaths	4.1 Improve health status of Canadians	-Not Applicable	No	Yes	Yes	Yes	No	No

Avoidable Deaths From Preventable Causes	4.1 Improve health status of Canadians	-Not Applicable	No	Yes	Yes	Yes	Yes	No
Avoidable Deaths From Treatable Causes	4.1 Improve health status of Canadians	-Not Applicable	No	Yes	Yes	Yes	Yes	No
Caesarean Section Rate	3.4 Appropriate and effective	B Getting better	No	Yes	Yes	Yes	Yes	No
Cardiac Revascularization Rate	2.2 Health system resources	-Not Applicable	No	Yes	Yes	Yes	Yes	No
Children Vulnerable in Areas of Early Development	4.1 Improve health status of Canadians	-Not Applicable	No	Yes	Yes	Yes	Yes	No
Coronary Artery Bypass Graft (CABG) Rate	2.2 Health system resources	-Not Applicable	No	Yes	Yes	Yes	Yes	No
Corporate Services Expense Ratio	2.3 Efficient allocation of resources	-Not Applicable	No	Yes	Yes	Yes	Yes	Yes
Cost of a Standard Hospital Stay	3.5 Efficiently delivered	B Getting better	No	Yes	Yes	Yes	Yes	Yes
Days Waiting for Admission to Inpatient Rehabilitation	3.1 Access to comprehensive, high-quality health services	B Getting better	No	Yes	Yes	No	No	No
Emergency Department Wait Time for Inpatient Bed (Hours, Percentile)	3.1 Access to comprehensive, high-quality health services	B Getting better	No	Yes	Yes	Yes	Yes	Yes
Emergency Department Wait Time for Physician Initial Assessment (90% Spent Less, in Hours)	3.1 Access to comprehensive, high-quality health services	B Getting better	No	Yes	Yes	Yes	Yes	Yes
Epidural Rate for Vaginal Deliveries	2.4 Adjustment to population health needs	-Not Applicable	No	Yes	Yes	Yes	Yes	No
Experiencing Pain in Long-Term Care	3.4 Appropriate and effective	C Living with illness, disability or reduced function	No	No	Yes	Yes	No	No
Experiencing Worsened Pain in Long-Term Care	3.4 Appropriate and effective	C Living with illness, disability or reduced function	No	No	Yes	No	No	No
Falls in the Last 30 Days in Long-Term Care	3.3 Safe	C Living with illness, disability or reduced function	No	No	Yes	No	No	No
Final Treatment Modality for End-Stage Kidney Disease (ESKD) Patients on December 31	4.1 Improve health status of Canadians	-Not Applicable	No	Yes	Yes	No	No	No
Frequent Emergency Room Visits for Help With Mental Health and/or Addictions	3.1 Access to comprehensive, high-quality health services	B Getting better	No	Yes	Yes	No	No	No
Has a Regular Health Care Provider	3.1 Access to comprehensive, high-quality health services	B Getting better	No	Yes	Yes	Yes	Yes	No
Health Care Provider Supply by Employment Status and Type of Provider, per 100,000 Population	2.3 Efficient allocation of resources	-Not Applicable	No	Yes	Yes	Yes	Yes	No
Health Care Providers Employed in Direct Care by Type of Provider, Health Region and Jurisdiction	2.3 Efficient allocation of resources	-Not Applicable	No	Yes	Yes	Yes	Yes	No
Health Care Providers Employed in Direct Care per 100,000 Population, by Health Region and Jurisdiction	2.3 Efficient allocation of resources	-Not Applicable	No	Yes	Yes	Yes	Yes	No
Health Care Providers Employed in Direct Care per 100,000 Population, by Type of Provider and Jurisdiction	2.3 Efficient allocation of resources	-Not Applicable	No	Yes	Yes	Yes	Yes	No

Health Care Providers Employed in Direct Care, by Age Group	2.2 Health system resources	-Not Applicable	No	Yes	Yes	Yes	Yes	No
Health Care Providers Employed in Direct Care, by Place of Work and Type of Provider	2.2 Health system resources	-Not Applicable	No	Yes	Yes	Yes	Yes	No
Health Care Providers Employed in Direct Care, by Top 15 Countries of Graduation and Type of Provider	2.2 Health system resources	-Not Applicable	No	Yes	Yes	Yes	Yes	No
Heavy Drinking	1.2 Biological material, psychosocial and behavioural factors of health	-Not Applicable	No	Yes	Yes	Yes	Yes	No
High Users of Hospital Beds	3.4 Appropriate and effective	-Not Applicable	No	Yes	Yes	Yes	Yes	No
Hip Fracture Surgery Within 48 Hours	3.1 Access to comprehensive, high-quality health services	B Getting better	No	Yes	Yes	Yes	Yes	Yes
Hip Replacement Rate	2.2 Health system resources	-Not Applicable	No	Yes	Yes	No	No	No
Hospital Deaths (HSMR)	3.4 Appropriate and effective	B Getting better	No	Yes	Yes	Yes	Yes	Yes
Hospital Deaths Following Major Surgery	3.4 Appropriate and effective	B Getting better	No	Yes	Yes	Yes	Yes	Yes
Hospital Harm	3.3 Safe	B Getting better	No	Yes	Yes	Yes	Yes	Yes
Hospital Stay Extended Until Home Care Services or Supports Ready	3.1 Access to comprehensive, high-quality health services	B Getting better	No	Yes	Yes	No	No	No
Hospital Stays for Harm Caused by Substance Use	3.1 Access to comprehensive, high-quality health services	B Getting better	No	Yes	Yes	No	No	No
Hospitalizations Entirely Caused by Alcohol	4.1 Improve health status of Canadians	A Staying healthy	No	Yes	Yes	Yes	Yes	No
Hospitalized Heart Attacks	4.1 Improve health status of Canadians	-Not Applicable	No	Yes	Yes	Yes	Yes	No
Hospitalized Hip Fracture Event	3.4 Appropriate and effective	A Staying healthy	Yes	Yes	Yes	Yes	Yes	No
Hospitalized Strokes	4.1 Improve health status of Canadians	-Not Applicable	No	Yes	Yes	Yes	Yes	No
Hysterectomy Rate	2.2 Health system resources	-Not Applicable	No	Yes	Yes	Yes	Yes	No
Improved Physical Functioning in Long-Term Care	3.4 Appropriate and effective	C Living with illness, disability or reduced function	No	No	Yes	No	No	No
In-Hospital Hip Fracture in Elderly (65+) Patients	3.3 Safe	B Getting better	No	Yes	Yes	Yes	Yes	Yes
In-Hospital Sepsis	3.3 Safe	B Getting better	No	Yes	Yes	Yes	Yes	Yes
Incidence of End-Stage Kidney Disease (ESKD), by Age Group, Sex, Province, Rate per Million Population	4.1 Improve health status of Canadians	-Not Applicable	No	Yes	Yes	No	No	No
Incidence of End-Stage Kidney Disease (ESKD), by Primary Diagnosis	4.1 Improve health status of Canadians	-Not Applicable	No	No	Yes	No	No	No
Inflow/Outflow Ratio	3.2 Person-centred	B Getting better	No	No	No	Yes	No	No
Injury Hospitalization	4.1 Improve health status of Canadians	-Not Applicable	No	Yes	Yes	Yes	Yes	No

Inpatient Rehabilitation Length of Stay Efficiency	3.5 Efficiently delivered	B Getting better	No	Yes	Yes	No	No
Joint Replacement Wait Times	3.1 Access to comprehensive, high-quality health services	B Getting better	No	Yes	Yes	Yes	No
Knee Replacement Rate	2.2 Health system resources	-Not Applicable	No	Yes	Yes	No	No
Life Expectancy at Age 65	4.1 Improve health status of Canadians	-Not Applicable	Yes	Yes	Yes	Yes	No
Life Expectancy at Birth	4.1 Improve health status of Canadians	-Not Applicable	Yes	Yes	Yes	Yes	No
Low Birth Weight Rate (<2,500 Grams, Excluding <500 Grams)	4.1 Improve health status of Canadians	-Not Applicable	No	Yes	Yes	Yes	No
Low-Risk Caesarean Sections	3.4 Appropriate and effective	B Getting better	No	Yes	Yes	Yes	Yes
Medical Patients Readmitted to Hospital	3.4 Appropriate and effective	B Getting better	Yes	Yes	Yes	Yes	Yes
Mental Health General Hospital Inpatient Separations as a Percentage (Pan-Canadian) of All General Hospital Inpatient Separations, by Province, Diagnosis Category, Sex and/or Age Group	2.2 Health system resources	-Not Applicable	No	Yes	Yes	No	No
Mental Illness Hospitalization	3.2 Person-centred	C Living with illness, disability or reduced function	Yes	Yes	Yes	Yes	No
Mental Illness Patient Days	3.2 Person-centred	C Living with illness, disability or reduced function	Yes	Yes	Yes	Yes	No
Nursing-Sensitive Adverse Events for Medical Patients	3.3 Safe	B Getting better	No	Yes	Yes	Yes	Yes
Nursing-Sensitive Adverse Events for Surgical Patients	3.3 Safe	B Getting better	No	Yes	Yes	Yes	Yes
Obesity (Age 18 and Older)	1.2 Biological material, psychosocial and behavioural factors of health	-Not Applicable	No	Yes	Yes	Yes	No
Obstetric Patients Readmitted to Hospital	3.4 Appropriate and effective	B Getting better	Yes	Yes	Yes	Yes	Yes
Obstetric Trauma (With Instrument)	3.3 Safe	B Getting better	No	Yes	Yes	Yes	Yes
Obstetric Trauma: Vaginal Delivery Without Instrument	3.3 Safe	B Getting better	No	Yes	Yes	Yes	Yes
Organ Donors, by Donor Type, Sex and Province	4.1 Improve health status of Canadians	-Not Applicable	No	Yes	Yes	No	No
Pan-Canadian Age-Standardized (or Crude) Mental Illness Separations per 100,000 Population, by Province and/or Region	2.2 Health system resources	-Not Applicable	No	No	Yes	Yes	No
Pan-Canadian Percentage of Total Days Stayed in General Hospitals for Mental Illness, by Province, Diagnosis Category, Sex and/or Age Group	2.2 Health system resources	-Not Applicable	No	Yes	Yes	No	No
Patient Flow for Hip Replacement	3.2 Person-centred	B Getting better	No	No	No	Yes	No
Patients With Repeat Hospitalization for Mental Illness, Age 15+ (General Hospital Only)	3.2 Person-centred	C Living with illness, disability or reduced function	No	Yes	Yes	Yes	No
Pediatric Patients Readmitted to Hospital	3.4 Appropriate and effective	B Getting better	Yes	Yes	Yes	Yes	Yes

Perceived Health	4.1 Improve health status of Canadians	-Not Applicable	No	Yes	Yes	Yes	No
Percentage of Claims Accepted by Public Drug Programs for Generic Drugs	2.3 Efficient allocation of resources	-Not Applicable	No	No	Yes	No	No
Percentage of Prescribed Drug Spending Financed by Public Sector	2.2 Health system resources	-Not Applicable	No	Yes	Yes	No	No
Percentage of Public Drug Program Spending on Generic Drugs	2.3 Efficient allocation of resources	-Not Applicable	No	No	Yes	No	No
Percentage of Residents Who Had a Newly Occurring Stage 2 to 4 Pressure Ulcer	3.3 Safe	C Living with illness, disability or reduced function	No	No	Yes	Yes	No
Percentage of Residents Whose Behavioural Symptoms Improved	3.4 Appropriate and effective	C Living with illness, disability or reduced function	No	No	Yes	Yes	No
Percentage of Residents Whose Behavioural Symptoms Worsened	3.4 Appropriate and effective	C Living with illness, disability or reduced function	No	No	Yes	No	No
Percentage of Residents Whose Bladder Continence Worsened	3.4 Appropriate and effective	C Living with illness, disability or reduced function	No	No	Yes	No	No
Percentage of Seniors on Public Drug Programs With Accepted Claims	2.5 Health system innovation and learning capacity	-Not Applicable	No	No	Yes	No	No
Percentage Rate of Chronic Beers Drug Use Among Seniors on Public Drug Programs	3.4 Appropriate and effective	C Living with illness, disability or reduced function	No	No	Yes	No	No
Percutaneous Coronary Intervention (PCI) Volume by Province and Centre	3.4 Appropriate and effective	B Getting better	No	Yes	Yes	No	Yes
Percutaneous Coronary Intervention Rate	2.2 Health system resources	-Not Applicable	No	Yes	Yes	Yes	No
Physical Activity (Age 18 and Older)	1.2 Biological material, psychosocial and behavioural factors of health	-Not Applicable	No	Yes	Yes	Yes	No
Physicians per 100,000 Population, by Specialty	2.2 Health system resources	-Not Applicable	No	Yes	Yes	Yes	No
Potentially Inappropriate Medication Prescribed to Seniors	3.4 Appropriate and effective	C Living with illness, disability or reduced function	No	No	Yes	No	No
Potentially Inappropriate Use of Antipsychotics in Long-Term Care	3.2 Person-centred	C Living with illness, disability or reduced function	No	No	Yes	Yes	No
Prescribed Drug Spending per Capita	2.2 Health system resources	-Not Applicable	No	Yes	Yes	No	No
Proportion of Physicians in Rural Areas	2.2 Health system resources	-Not Applicable	No	Yes	Yes	No	No
Radiation Treatment Wait Times	3.1 Access to comprehensive, high-quality health services	B Getting better	No	Yes	Yes	No	No

Ratio of Health Care Providers Employed in Direct Care to Supply, by Type of Provider	2.2 Health system resources	-Not Applicable	No	Yes	Yes	Yes	Yes	No
Repeat Hospital Stays for Mental Illness	3.2 Person-centred	C Living with illness, disability or reduced function	No	Yes	Yes	Yes	Yes	No
Restraint Use in Long-Term Care	3.2 Person-centred	C Living with illness, disability or reduced function	No	No	Yes	No	No	No
Self-Harm Hospitalizations	4.1 Improve health status of Canadians	-Not Applicable	Yes	Yes	Yes	Yes	Yes	No
Small for Gestational Age Rate	4.1 Improve health status of Canadians	-Not Applicable	No	Yes	Yes	Yes	Yes	No
Smoking	1.2 Biological material, psychosocial and behavioural factors of health	-Not Applicable	No	Yes	Yes	Yes	Yes	No
Surgical Patients Readmitted to Hospital	3.4 Appropriate and effective	B Getting better	Yes	Yes	Yes	Yes	Yes	Yes
Time in Emergency Department Until Disposition Decision (Hours, Percentile)	3.1 Access to comprehensive, high-quality health services	B Getting better	No	Yes	Yes	Yes	Yes	Yes
Total Time Spent in Emergency Department (Hours, Percentile)	3.1 Access to comprehensive, high-quality health services	B Getting better	No	Yes	Yes	Yes	Yes	Yes
Total Time Spent in Emergency Department for Admitted Patients (90% Spent Less, in Hours)	3.1 Access to comprehensive, high-quality health services	B Getting better	No	Yes	Yes	Yes	Yes	Yes
Total Time Spent in Emergency Department for Non-Admitted Patients (Hours, Percentile)	3.1 Access to comprehensive, high-quality health services	B Getting better	No	Yes	Yes	No	No	No
Transplants, by Organ Type	2.2 Health system resources	-Not Applicable	No	No	Yes	No	No	No
Wait Time for Hip Fracture Surgery, Age 65+ (Proportion With Surgery Within 48 Hours)	3.1 Access to comprehensive, high-quality health services	B Getting better	No	Yes	Yes	Yes	Yes	Yes
Wait Times for Bypass Surgery	3.1 Access to comprehensive, high-quality health services	B Getting better	No	Yes	Yes	No	No	No
Wait Times for Cataract Surgery (Percentage Meeting Benchmark)	3.1 Access to comprehensive, high-quality health services	B Getting better	No	Yes	Yes	No	No	No
Wait Times for Cataract Surgery (Percentiles)	3.1 Access to comprehensive, high-quality health services	B Getting better	No	Yes	Yes	No	No	No
Wait Times for CT Scan	3.1 Access to comprehensive, high-quality health services	B Getting better	No	No	Yes	No	No	No
Wait Times for Hip Fracture Repair: From ED Registration (Percentage Meeting Benchmark)	3.1 Access to comprehensive, high-quality health services	B Getting better	No	No	Yes	No	No	No
Wait Times for Hip Fracture Repair: From ED Registration (Percentiles)	3.1 Access to comprehensive, high-quality health services	B Getting better	No	No	Yes	No	No	No

Wait Times for Hip Replacement (Percentage Meeting Benchmark)	3.1 Access to comprehensive, high-quality health services	B Getting better	No	Yes	Yes	Yes	No
Wait Times for Hip Replacement (Percentiles)	3.1 Access to comprehensive, high-quality health services	B Getting better	No	Yes	Yes	Yes	No
Wait Times for Knee Replacement (Percentage Meeting Benchmark)	3.1 Access to comprehensive, high-quality health services	B Getting better	No	Yes	Yes	Yes	No
Wait Times for Knee Replacement (Percentiles)	3.1 Access to comprehensive, high-quality health services	B Getting better	No	Yes	Yes	Yes	No
Wait Times for MRI Scan	3.1 Access to comprehensive, high-quality health services	B Getting better	No	No	Yes	No	No
Wait Times for Radiation Therapy (Percentiles)	3.1 Access to comprehensive, high-quality health services	B Getting better	No	Yes	Yes	No	No
Worsened Depressive Mood in Long-Term Care	3.4 Appropriate and effective	C Living with illness, disability or reduced function	No	No	Yes	No	No
Worsened Physical Functioning in Long-Term Care	3.4 Appropriate and effective	C Living with illness, disability or reduced function	No	No	Yes	Yes	No
Worsened Pressure Ulcer in Long-Term Care	3.3 Safe	C Living with illness, disability or reduced function	No	No	Yes	No	No

Enter keywords in the search box below.

- Multiple keywords can be searched for by using the "OR" operator. *For example, to search for the keywords "mortality" and "readmission," type "mortality OR readmission" into the search box.*
- Indicators on the [Your Health System](#) web tool can be searched for by typing "Your Health System" into the search box.

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