



# Health Indicators 2013



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Canadian Institute  
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## Our Vision

Better data. Better decisions.  
Healthier Canadians.

## Our Mandate

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Respect, Integrity, Collaboration,  
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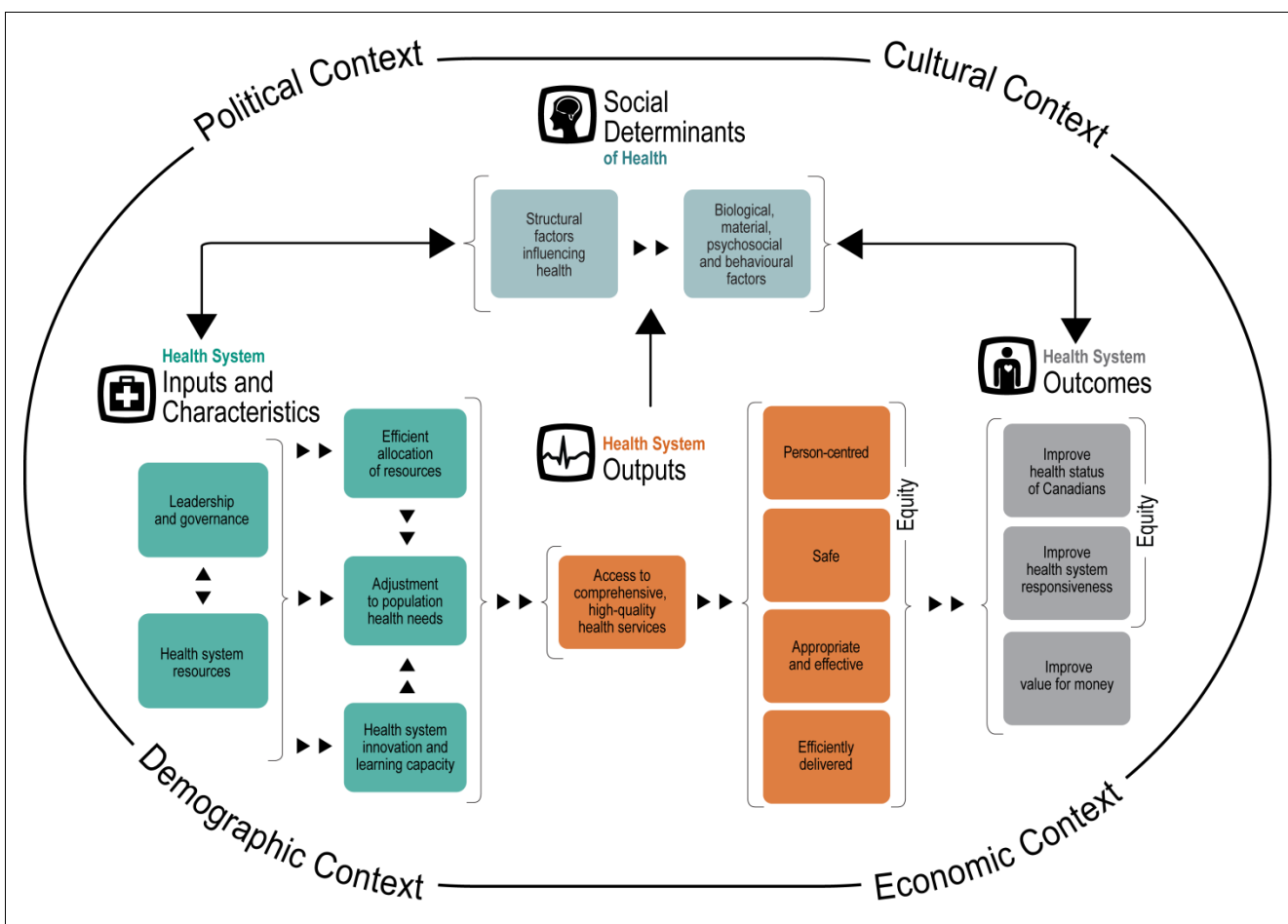
January 30, 2014

# Update to *Health Indicators 2013*

Figure 5 in *Health Indicators 2013* has been updated (page 15). In addition, the footnote underneath the figure has been removed (“\* This framework was still in development when this report was published. A final version will be available later in the year.”).

The updated figure is shown below:

**Figure 5: CIHI's New Health System Performance Measurement Framework**



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# About the Canadian Institute for Health Information

The Canadian Institute for Health Information (CIHI) collects and analyzes information on health and health care in Canada and makes it publicly available. Canada's federal, provincial and territorial governments created CIHI as a not-for-profit, independent organization dedicated to forging a common approach to Canadian health information. CIHI's goal: to provide timely, accurate and comparable information. CIHI's data and reports inform health policies, support the effective delivery of health services and raise awareness among Canadians of the factors that contribute to good health.



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The Health Statistics Division provides information about the health of the Canadian population, the determinants of health, and the utilization of Canada’s health care resources. The information is used to assist and support health planners and decision-makers at all levels of government to sustain demographic and epidemiological research, and to report to the Canadian public about their collective health and health care system.

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It should be noted that the analyses and conclusions in this report do not necessarily reflect the opinions of the experts or their affiliated organizations.

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We would also like to thank the many other CIHI staff members who compiled and validated the data; worked on the print, translation, communications, web design and distribution; and provided ongoing support to the core team.

## Executive Summary

Before *Health Indicators* moves to interactive, digital reporting in the spring of 2014, this final report in the 14-year series presents the initial objectives of the CIHI–Statistics Canada Health Indicators project and some accomplishments in reporting on the performance of the health system and on the health of Canadians.

The report also introduces a new program of work that CIHI initiated to support Canadian jurisdictions' efforts to stimulate health system performance. This new program provides structured and coordinated pan-Canadian reporting that is tailored to the information needs of different audiences and to the development of additional knowledge and capacities for performance improvement.

Finally, to provide some perspectives on the performance of the health system in Canada, *Health Indicators 2013* reports on 13 additional indicators by socio-economic status (SES) at national and provincial levels:

- Hospitalized stroke event
- Hospitalized hip fracture event
- Wait time for hip fracture surgery
- 30-day acute myocardial infarction in-hospital mortality
- 30-day stroke in-hospital mortality
- Self-injury hospitalization
- Ambulatory care sensitive conditions hospitalization
- 30-day readmission for mental illness
- 30-day readmission—patients age 19 and younger
- 30-day obstetric readmission
- 30-day medical readmission
- 30-day surgical readmission
- 30-day acute myocardial infarction readmission

For these 13 indicators, as well as the 2 reported by SES in previous reports (hospitalized acute myocardial infarction event rate and injury hospitalization rate), two summary measures of disparity are presented:

- Disparity rate ratio, which provides the magnitude of the socio-economic disparities for a health indicator when comparing the least affluent to the most affluent group in a jurisdiction.
- Potential rate reduction, which expresses—as a percentage—the reduction in a health indicator rate that would occur in the hypothetical scenario each neighbourhood income group experienced the rate of the most affluent neighbourhood income quintile.

These summary measures appear to effectively highlight the range of disparities in health and health care and the potential effect of interventions aimed at reducing these disparities.

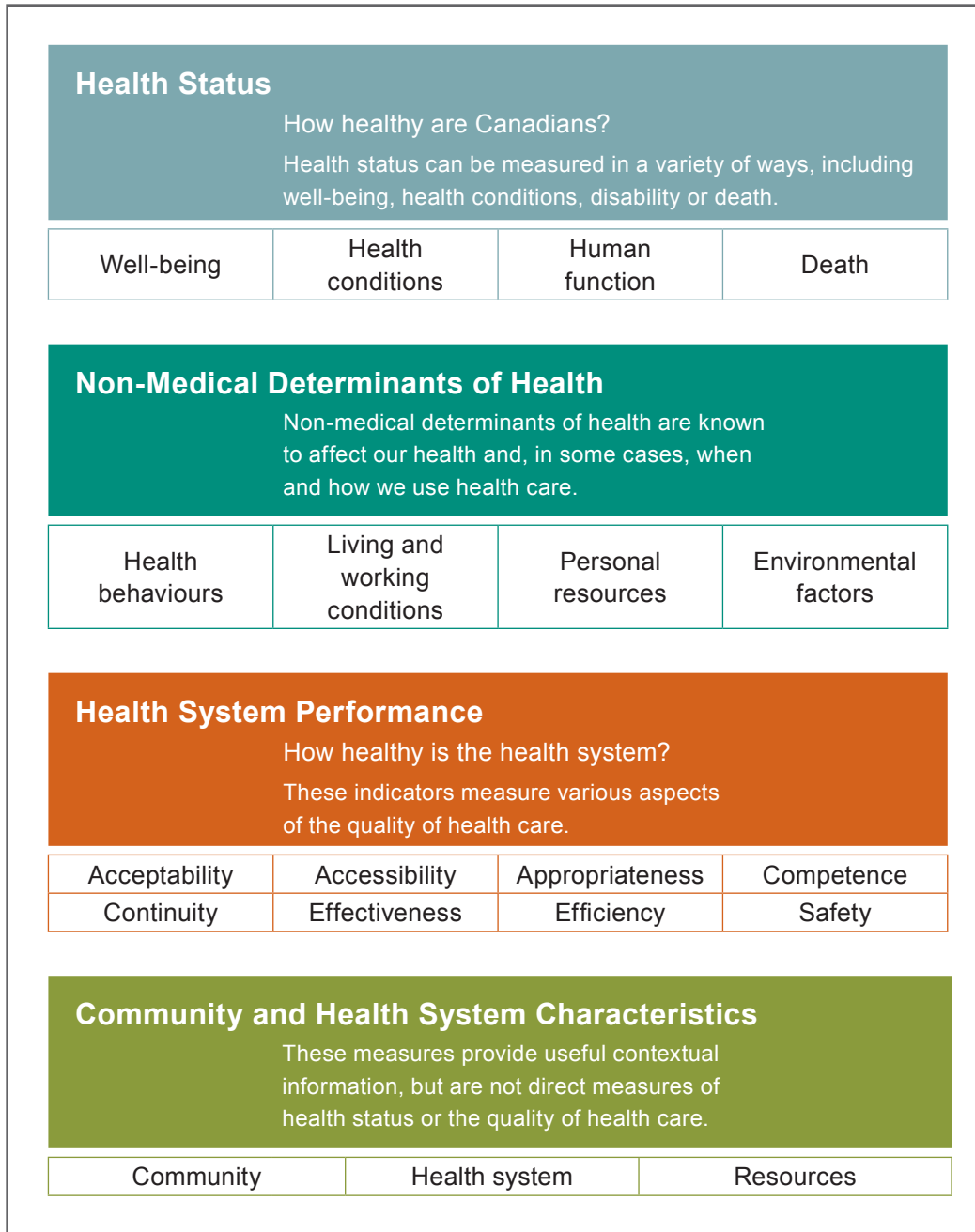


The key findings derived from these new measures are the following:

- Hospitalization rates for self-injury and for ambulatory care sensitive conditions (such as diabetes, heart failure and asthma) showed the highest potential rate reduction. Rates for these indicators would be 27% and 32% lower, respectively, if all Canadians experienced the same rates as those living in the most affluent neighbourhoods.
- An overall comparison of self-injury hospitalization rates across the provinces showed that rates were significantly higher than the national average in British Columbia, Saskatchewan, New Brunswick and Newfoundland and Labrador in 2011–2012. Among these provinces, Saskatchewan had the highest potential for rate reduction by addressing SES-related disparities (potential rate reduction of 51%).
- For hospitalization rates for ambulatory care sensitive conditions, examining the overall rates and the disparity measures by province highlighted that provinces that perform well overall may still have a significant potential for rate reduction related to health system disparities. For example, Ontario's overall rate was significantly below the national average, yet this province had the highest potential rate reduction, at 36%.

This information will allow health system managers and policy-makers to take a closer look at disparities by SES across many dimensions of health and the health system, and to provide information on the potential effects of interventions aimed at reducing disparities in health and health care.

# Health Indicator Framework







**In Focus**  
Health System Performance Reporting



## Introduction

In early 1998, more than 500 health administrators, researchers, caregivers, government officials, health advocacy groups and consumers came together to identify Canada's health information needs. In response, a national vision and an action plan for strengthening Canada's health information system was developed.<sup>1</sup>

The following priorities emerged from this conversation:

- Obtain better information to track current and emerging health issues.
- Reach consensus on common data and technical standards so that the research community can more efficiently share comparable findings.
- Address fragmented or incomplete data.
- Improve the value of the analysis of the health information being captured.
- Disseminate health information more broadly to improve the health of Canadians and the performance of their health system.<sup>1</sup>

The national vision and the associated plan were endorsed by ministers of health across the country at all levels and were subsequently called the Health Information Roadmap Initiative. Soon after, the 1999 federal budget identified specific priority projects in the health information field. An overall investment of \$90 million over three years was earmarked to implement the related work plan.<sup>1</sup>

At the time, Canada's total spending on health care was more than \$80 billion a year—this rose to an estimated \$207.4 billion in 2012<sup>2</sup>—but little information existed to really understand the quality of health care services delivered to Canadians or overall health system performance. Some argue that this problem still exists.<sup>3</sup> Yet over the past 15 years, there has been substantial progress in measuring and monitoring the performance of the health system and the health of Canadians.

Through the Health Information Roadmap Initiative<sup>1</sup> and the Health Indicators project, Statistics Canada and CIHI have delivered more pan-Canadian information than ever before. In addition, provincial organizations, such as health quality councils, and pan-Canadian organizations, such as the Canadian Patient Safety Institute and the Health Council of Canada, have stimulated conversations about how the health system performs and how healthy Canadians are. As a result, Canadian provinces and territories now share a more robust understanding of the performance of their health systems and of the health of their citizens.

The Health Indicators project is now releasing its final annual report in the current format; it will move to an electronic, interactive reporting format in 2014, with more frequent reporting for some of the performance indicators. This evolution is an opportunity to reflect on progress made in Canada in developing pan-Canadian indicators since 1999 and to present new ways in which we can use the high-quality performance information available to support more meaningful performance improvement efforts in Canadian jurisdictions. While the large amount of performance information available means it can be challenging to use,<sup>4</sup> efforts to align performance measurement with the improvement priorities of jurisdictions will create a practical platform for evidence-based decision-making that supports health system performance improvement in Canada.

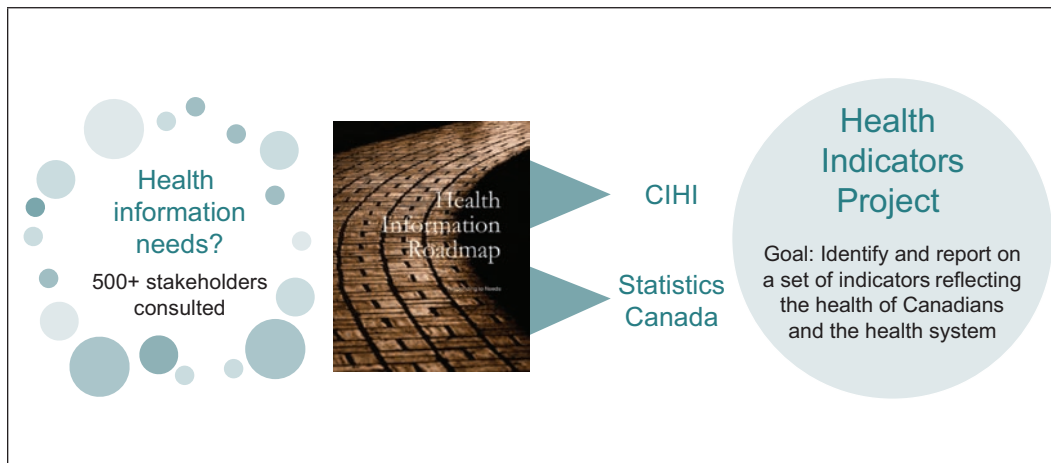
## Reporting on Health System Performance and the Health of Canadians: The Foundation

The Health Indicators project began in 1999 as a pan-Canadian health information reporting initiative co-led by CIHI and Statistics Canada.<sup>1</sup> At the time of the Health Information Roadmap Initiative, a growing demand to provide Canadians with the ability to make better-informed decisions, coupled with improving data technology, was changing the landscape of health information reporting in Canada.<sup>1</sup> Informed by a large-scale consultation, the report *Health Information Roadmap: Responding to Needs* highlighted the need for pan-Canadian health system reporting that was secure and that respected Canadians' privacy, but that was also consistent, relevant, flexible, integrated, user-friendly and accessible (Figure 1).<sup>1</sup>

Responding to this need, the scope of the Health Indicators project was to identify, develop and report on a set of performance indicators, primarily at the regional level, with the purpose of informing the following questions:

- How healthy is the health system?
- How healthy are Canadians?

Figure 1: Health Indicators Project Evolution

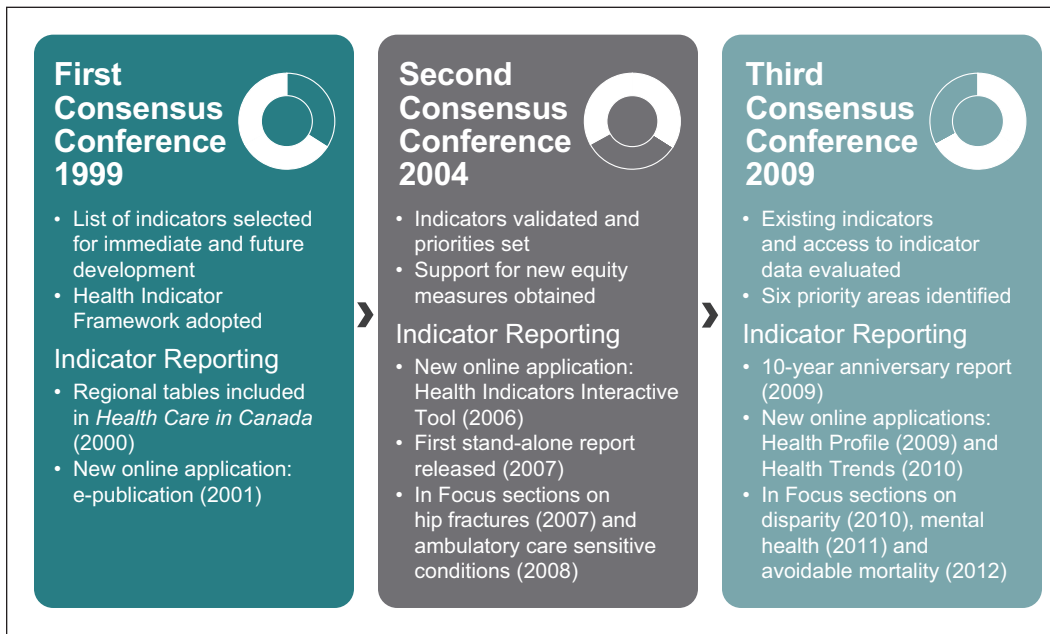


## Setting Priorities for Indicator Development and Reporting

The 1999 National Consensus Conference on Population Health Indicators was the first of three consultations to prioritize and select indicators for immediate and future development (Figure 2).<sup>5-7</sup> To achieve this, participants used the CIHI–Statistics Canada Health Indicator Framework (see page xi) as a conceptual guide to identify important dimensions of health and health system performance for indicator development. Over the course of the project, key priorities were to continue to be responsive to the needs of stakeholders and to develop relevant indicators for reporting at the regional level. In addition to the large-scale consensus conferences, advisory groups were set up to guide the technical development of new indicators. Regional and provincial contacts were also consulted on emerging indicator methodology and reporting. As shown in Figure 2, major developments over the course of the project included expanding the suite of indicators, providing more in-depth analysis on priority topics and improving access to indicator results through online applications.<sup>8-14</sup>



Figure 2: Health Indicators Project Development



The final consensus conference for the Health Indicators project was held in 2009. During that conference, a number of new priority areas were identified that are related to social determinants of health, mental health, health care outcomes, child and youth health, healthy environments and Aboriginal peoples' health.<sup>7</sup> In subsequent years, indicators for many of these priority areas were developed in response to these emerging information needs (Figure 3).<sup>8-10</sup>

Figure 3: Health Indicators Report Development Since the 2009 Consensus Conference



**Note**

SES: socio-economic status.

# Leveraging Public Reporting on Health System Performance

## The Need to Reposition Health System Performance Reporting in Canada

Despite remarkable progress in developing new comparable, standardized pan-Canadian performance indicators that reflect the health of Canadians and the performance of the health system, performance measurement in Canada is still largely under construction.

At a pan-Canadian level, the Health Council of Canada is mandated to monitor and make annual public reports on the implementation of the 2003 Health Accord,<sup>15</sup> and CIHI is mandated to lead the development and maintenance of comprehensive and integrated health information that enables sound policy and effective health system management. At a provincial level, several health (quality) councils have been established in recent years (in New Brunswick, Quebec, Ontario, Saskatchewan, Alberta and British Columbia) with a mandate to report to the public on health system performance.<sup>16–21</sup> Other initiatives in Canada and internationally complicate this landscape even more: the Organisation for Economic Co-operation and Development (OECD) and The Commonwealth Fund release comparative performance indicators every year or every other year,<sup>22–24</sup> pan-Canadian organizations such as the Canadian Partnership Against Cancer release performance reports on parts of the system,<sup>25</sup> and other national and international organizations release their own performance reports. This large number of organizations reporting concurrently and in an uncoordinated fashion on health system performance at various levels has led to confusion for health system decision-makers and Canadians alike. All of these factors have contributed to what many stakeholders in Canada are describing as a state of indicator chaos.

Cross-country consultations recently conducted by CIHI with health care system managers suggest that there is a need to

- Clarify and better position health system performance public reporting in Canada; and
- Ensure that reporting supports the performance improvement efforts of jurisdictions.

As a leading source of reliable, comparable and timely health information in Canada, CIHI has initiated a three-year plan to strengthen its work on pan-Canadian health system performance reporting to better support jurisdictional efforts to improve care and the health of Canadians. Specifically, the objectives of this work are to

- Provide structured and coordinated pan-Canadian reporting on health system performance that is tailored to the information needs of different audiences, including the general public, provincial health ministries, regional health authorities and health care facilities (Figure 4);
- Produce analytical tools and products that support provincial and territorial health system improvement priorities;
- Work with our partners in the health system to build capacity for using and understanding performance measurement and analytical tools; and
- Reduce indicator chaos in the health system by working with our partners to identify which health indicators are most important, how they relate to each other and how they can best support improvements to health care and the health of Canadians.

## Did You Know?

This initiative builds on more than 10 years of work and experience at CIHI in reporting on health system performance that includes

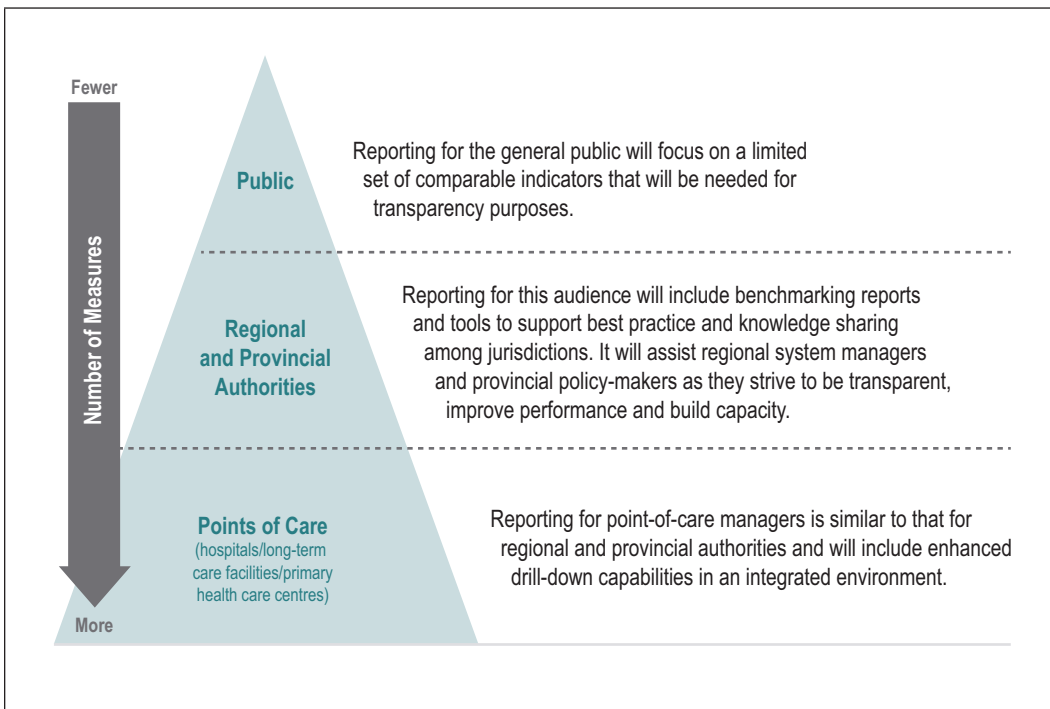
- The development of a well-established set of comparable, pan-Canadian health indicators aligned with international standards;
- The development, with Statistics Canada, of a Health Indicator Framework that is internationally recognized;
- Research in priority themes related to health system performance in Canada, such as quality of care, patient safety and health system efficiency; and
- Business intelligence and interactive web tools, such as the Canadian Hospital Reporting Project, that allow health system managers to track performance over time, view peer group comparisons and identify areas for improvement through drill-down capabilities.

## CIHI's Initiative in More Detail

### Addressing the Reporting Needs of Multiple Audiences

Different audiences are interested in different aspects of health system performance and require different levels of reporting (Figure 4). A teaching hospital, for example, may require detailed information to pinpoint which surgical programs and care processes require improvements, whereas a provincial policy-maker may need to see performance trends at a higher level to understand which parts of the system are working well and which could be improved. As users and funders of the health care system, Canadians also have a vested interest in health system performance and want to know whether they are receiving good care relative to the public expense of providing it.

**Figure 4: Tailored Health System Performance Reporting**



## New Information to Meet Evolving Needs

Until recently, health system performance reporting focused primarily on the acute care (hospital) sector. This focus stemmed from the high proportion of the health budget spent in the acute care sector (a projected 29% nationally in 2012).<sup>2</sup> Additionally, acute care databases are the most comprehensive data source, compared with those for other health sectors in Canada. As such, they have greater potential to be used to develop important, relevant indicators.

However, the situation has started to change in the past few years, with a rising demand for quality data sources in other key health care sectors. This has led to greater investment in data sources for primary care, palliative care, home and community-based care, and patients' experiences. As these data sources develop, they will make it possible to paint a more complete picture of the health care system and patients' experiences overall and across the continuum of care. Along with these investments in more information, the notion that Canada needs a true health system perspective on performance has become more prevalent, and priority-setting for indicator development should reflect this.

## Less Indicator Chaos

A national summit of measurement experts agreed that indicator chaos was a symptom of increasing commitment to improvement and measurement that yet lacks coordinated priorities and planning.<sup>26</sup> A pan-Canadian repository of health system performance indicators, with definitions and characteristics of each indicator summarized in a standard template, can help to consolidate and standardize definitions and methodologies. This will help cut through the chaos by reducing duplication. In addition, plans to develop new indicators and retire indicators that are no longer useful are needed. This planning has two benefits: it will help the health system stay focused on important measures and it will reduce the burden of producing and reporting on ones that are not.

## Enhanced Analytical Tools to Understand Performance Drivers

Information about performance must be timely, and it must be delivered in a way that allows health system managers and care providers to clearly understand and explore their performance results so they can focus their improvement efforts in priority areas. For example, clinicians may want to understand why their facilities have high readmission rates. They should be able to break those rates down by service area, such as medicine, surgery, pediatrics and obstetrics. They should further be able to delve into results by major diagnosis groups (for example, heart attack and stroke readmissions), the urgency of the initial admission (whether it was elective), sex and age. They should even know which specific cases resulted in urgent readmissions. The more they can analyze granular data, while maintaining the highest standards of privacy and confidentiality of that data, the more effective their improvement efforts can be.

## More Capacity to Use Performance Information to Improve Results

Health system decision-makers, managers and analysts must have the skills, competencies and abilities to use performance management data. While many organizations have been leading the way in this regard, building their own capacities to support skill development, we need to ensure that those responsible for performance improvement have access to the precise information proven to deliver results and understand how it can be used. Capacity-building activities that meet the varying needs of stakeholders are crucial to realizing an enhanced vision of health system performance reporting beyond 2013.

Table 1 below summarizes the vision that CIHI developed to support Canadian jurisdictions in their work to stimulate health system performance improvement.

**Table 1: Summary of Health System Performance Reporting Vision**

Vision of Health System Performance Reporting	What Can Get Us There
<b>Addressing the needs of multiple audiences</b>	<ul style="list-style-type: none"> <li>• Public engagement in reporting priorities</li> <li>• Cascading performance-relevant reports that meet the needs of respective audiences</li> </ul>
<b>Providing new information to meet evolving needs</b>	<ul style="list-style-type: none"> <li>• Indicator development that reflects priorities for information</li> <li>• Quality data sources that span the continuum of care</li> </ul>
<b>Ensuring less indicator chaos</b>	<ul style="list-style-type: none"> <li>• A repository of health system performance indicators that standardizes indicator definitions and methodologies</li> <li>• Plans for indicator development and retirement</li> </ul>
<b>Enhancing analytical tools to understand performance drivers</b>	<ul style="list-style-type: none"> <li>• An integrated analytical solution that automates indicator calculation and supports analysis of the factors that drive performance</li> </ul>
<b>Developing more capacity to use performance information to improve results</b>	<ul style="list-style-type: none"> <li>• Methods and tools to support benchmarking</li> <li>• Training and support to use performance information to support improvement</li> </ul>



# A Health System Performance Framework to Support Performance Improvement

## Why a New Health System Performance Framework?

The 1999 CIHI–Statistics Canada Health Indicator Framework for classifying health indicators is well-accepted nationally and is recognized internationally. Still, to support health system performance reporting and performance improvement, a framework that goes beyond classification is needed—one that identifies specific paths for improvement.

Building on the 1999 framework, CIHI, in consultation with performance experts, developed a dynamic framework that can support jurisdictional priorities for improvement. The new framework reflects developments in the area since 1999, incorporating the recent emphasis that end users and governments have placed on value for money, patient safety and patient-centredness.

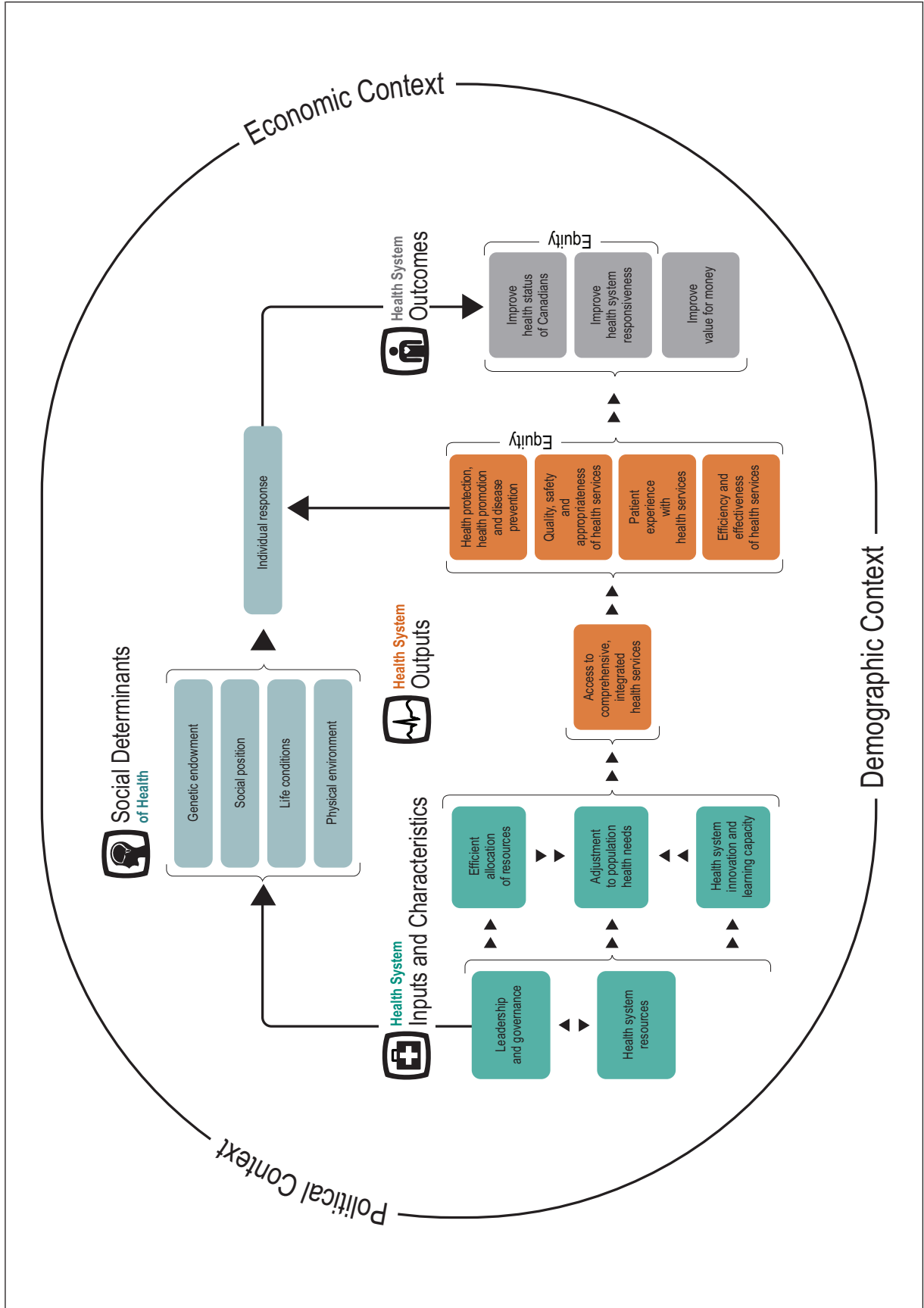
The World Health Organization in 2000 defined a health system as “all the activities whose primary purpose is to promote, restore, or maintain health.”<sup>27</sup> Simply put, the goal of the health system is to improve the health of the population.<sup>28</sup> Thus this framework includes services provided to individuals and groups, as well as public health services and policies. It illustrates how performance can be measured across various dimensions in the system and how these are related to the system’s ultimate outcome goals.

## Description of the New Health System Performance Framework

This new framework (Figure 5) has four inter-related quadrants: health system outcomes; social determinants of health; health system outputs; and health system inputs and characteristics. Each quadrant contains different dimensions of performance, with the dimension of equity spanning a number of these dimensions. The four quadrants sit within a demographic, political, economic and cultural context. This contextual environment influences the relationships among the dimensions of each quadrant and also the way they interact with each other. An assessment of how well the health system achieves its intermediate and ultimate goals is incomplete if it does not consider all performance dimensions and contextual elements included in this framework.

By mapping expected relationships across dimensions and quadrants, the framework can explain performance and help us understand the potential links between system transformations and improvements sought in outcomes.

Figure 5: CIHI's New Health System Performance Measurement Framework\*



**Note**

\* This framework was still in development when this report was published. A final version will be available later in the year.

## Conclusion

In the health sector, numerous countries are releasing annual performance reports with an increased emphasis on outcomes and value for money:

- In unitary systems, provisions for public reporting include annual quality accounts for all health care organizations in England and annual reporting on health system performance in the Netherlands, including international comparisons.<sup>29, 30</sup>
- In federal systems, the 2010 *Patient Protection and Affordable Care Act* in the United States mandates quarterly public reporting of performance information by institutions that care for Medicare patients, while in Australia, new legislation passed in 2010 mandates quarterly and annual reporting on health system performance.<sup>31, 32</sup>

In Canada, substantial progress has been made in reporting on health system performance and on the health of Canadians in a way that allows pan-Canadian comparisons to be made and that supports the efforts of Canadian jurisdictions to improve the performance of their health systems. The work CIHI has undertaken with a range of partners in the health system aims to do just that: further enable the health system performance improvement efforts of policy-makers, regional health authorities, facility managers and clinicians. This work includes producing metrics and reports tailored to many audiences and providing information that allows stakeholders to assess the performance of the system, including patient experiences across all sectors. It is an initiative supported by a health system performance reporting framework that can help all Canadians understand the value that their health system delivers to them.



## What's New in This Report?

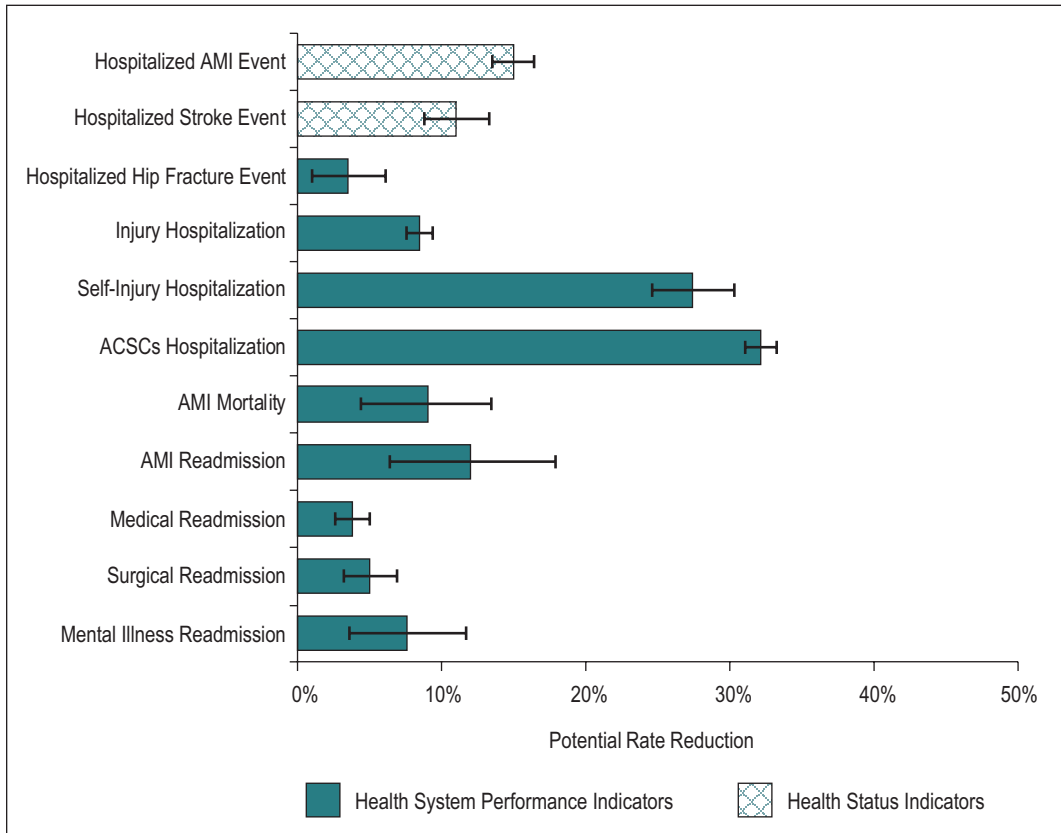


## Building on Priority Areas: Disparities Within the Health System

Improved population health and health equity are strategic priorities for many regional health authorities across Canada.<sup>33, 34</sup> To support their efforts to address health system disparities, indicators reported by socio-economic status (SES) are necessary and add useful information to the existing body of knowledge generated through the typical reporting of indicators by age or sex only. In 2010, the Health Indicators project began reporting indicators of heart attack event rates and injury hospitalizations by SES at the national and provincial levels and provided summary measures to help quantify the impact of SES disparity.<sup>8-10</sup> Please see the methodology box on page 21 for more information.

In this final edition of the *Health Indicators* annual report, an additional 13 indicators are reported by SES at the national and provincial levels. Reporting these indicators by SES highlights that considerable health system disparities exist. For example, the highest potentials for rate reduction (that is, if all Canadians experienced the same rate as those living in the most affluent neighbourhoods) were for hospitalizations for self-injury (27% reduction) and ambulatory care sensitive conditions (32% reduction) (Figure 6). Providing this type of information on an ongoing basis will allow jurisdictions to take a closer look at disparities by SES across the many dimensions of health of their particular populations and their health systems.

Figure 6: Potential Rate Reduction for Health Indicators, 2011–2012\*



**Notes**

\* AMI mortality potential rate reduction is based on pooled data from 2009–2010 to 2011–2012.

AMI: acute myocardial infarction.

ACSCs: ambulatory care sensitive conditions.

┌ represents 95% confidence intervals.

The potential rate reduction was not statistically different from 0% for all-cause readmission for obstetric patients, all-cause readmission for patients age 19 and younger, wait time for hip fracture surgery and stroke in-hospital mortality; therefore, these indicators are not included in the figure.

**Sources**

Discharge Abstract Database, National Ambulatory Care Reporting System and Ontario Mental Health Reporting System, Canadian Institute for Health Information; Fichier des hospitalisations MED-ÉCHO, ministère de la Santé et des Services sociaux du Québec; 2006 Census, Statistics Canada.

# Methodology

## Neighbourhood Income Quintile as a Measure of Socio-Economic Status

Neighbourhood income quintile is a useful method to group people by SES and to identify related disparities within the health system. Research has demonstrated correlations between place of residence and social determinants of health such as income, education, crime rate, quality of community services and unemployment, to name a few.<sup>35-42</sup> This measure is easily accessible, as it is based on the patient's place of residence (postal code), whereas SES factors such as income are not readily available at the individual level in administrative health databases.<sup>35-42</sup> A limitation of this measure is that people with a missing or invalid postal code, and those living in institutions, are not assigned a neighbourhood income quintile and therefore are not included in the summary measures of disparity.

Neighbourhood income quintiles categorize small geographic areas into five roughly equal population groups. Quintile 1 refers to the least affluent neighbourhoods, while quintile 5 refers to the most affluent. The quintiles were constructed according to methods developed by Statistics Canada.

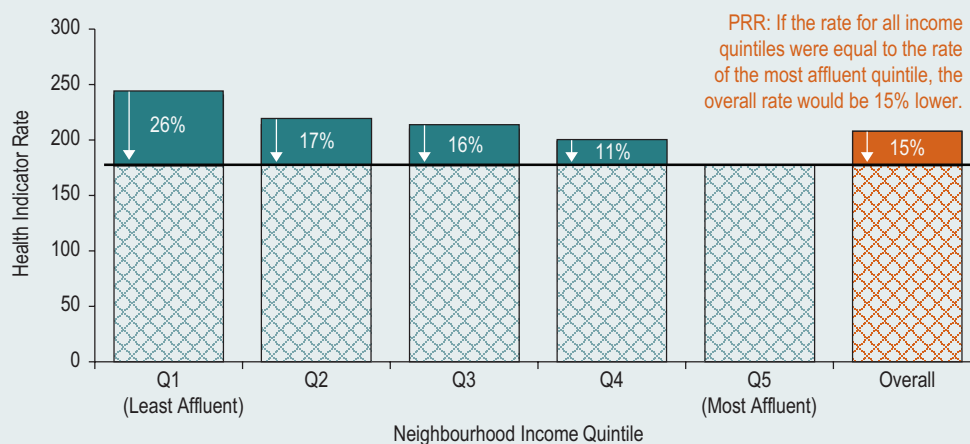
For a more detailed description of this methodology, please see the appendix on page 29.

## Summary Measures of Disparity

Two summary measures can be used to capture the magnitude of health disparities in a single number. The main difference between the measures is that potential rate reduction takes into account not only information from the most and least affluent groups, but also from the second, third and fourth income quintiles.

**Disparity rate ratio:** Ratio of a health indicator rate for the least affluent neighbourhood income quintile (Q1) to the rate for the most affluent neighbourhood income quintile (Q5). It provides a summary measure of the magnitude of the socio-economic disparities for a health indicator when comparing the least affluent to the most affluent group in a jurisdiction.

**Potential rate reduction (PRR):** Reduction in a health indicator rate that would occur in the hypothetical scenario that each neighbourhood income group experienced the rate of the most affluent neighbourhood income quintile, expressed as a percentage:





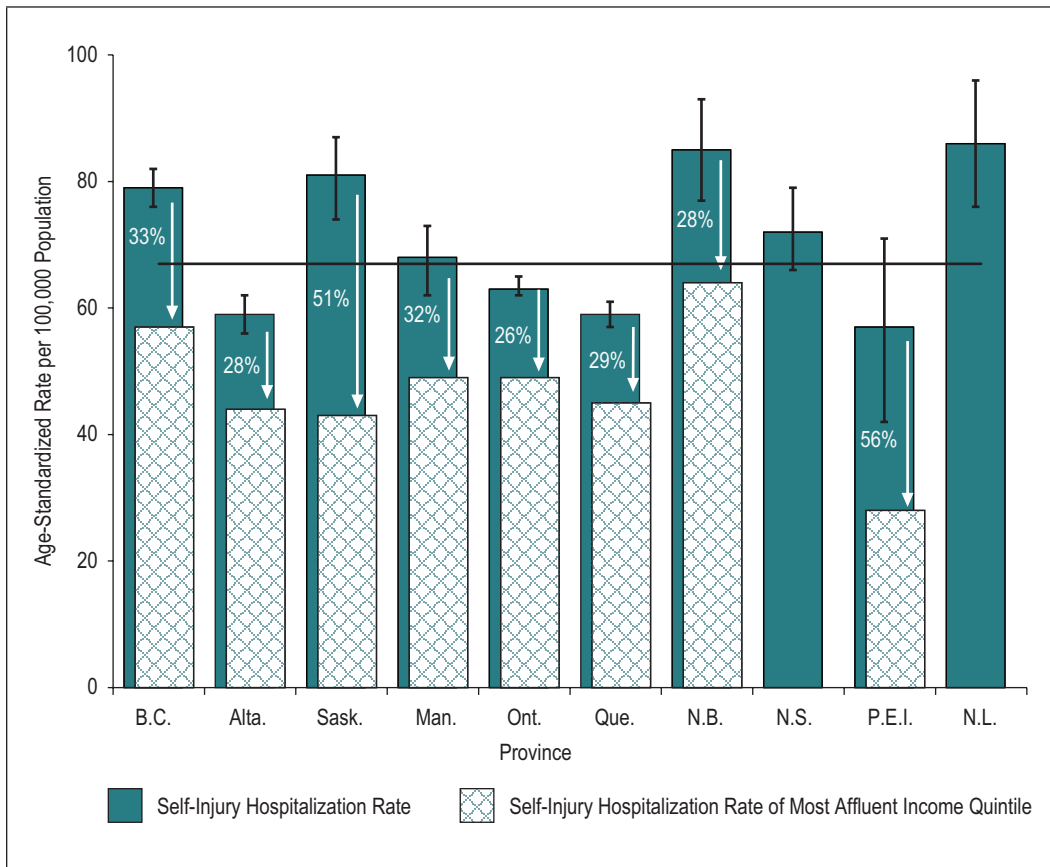
## Applying the Disparity Lens to Provincial Indicator Rates

An overall comparison of self-injury hospitalization rates across the provinces shows that rates were significantly higher than the national average in British Columbia, Saskatchewan, New Brunswick and Newfoundland and Labrador in 2011–2012 (Figure 7). By further unpacking these rates through the lens of SES-related disparities, however, a more nuanced story emerges, showing that SES does not have the same effect across provinces. Here we see that among the provinces with the highest overall self-injury rates, Saskatchewan had the highest potential for rate reduction by addressing SES-related disparities (PRR of 51%).

Figure 8 provides a similar picture for hospitalizations related to ambulatory care sensitive conditions across provinces; while the rates of hospitalization for these conditions were significantly lower than the national average in Ontario, British Columbia and Quebec, these provinces had potential rate reductions of at least 30%.

As illustrated in these examples, SES-disparity summary measures can act as screening tools to identify differences over time or between jurisdictions but, like other health indicators, they cannot tell you why these differences exist. Health indicators are intended to further our understanding of the health of Canadians, how the health care system works and what requires further improvement. They can also be used to inform health policy, manage the health care system, enhance our understanding of the broader determinants of health and identify gaps in health status and outcomes for specific populations.<sup>10</sup> The addition of 13 indicators reported by SES should raise new questions and highlight areas for future health system performance improvement.

**Figure 7: Self-Injury Hospitalization Rates and Potential Rate Reductions by Province, Canada, 2011–2012**



**Notes**

- I represents 95% confidence intervals.
- represents 2011–2012 Canada self-injury hospitalization rate.
- ↓ represents potential rate reduction.

The territories were not included due to small numbers.

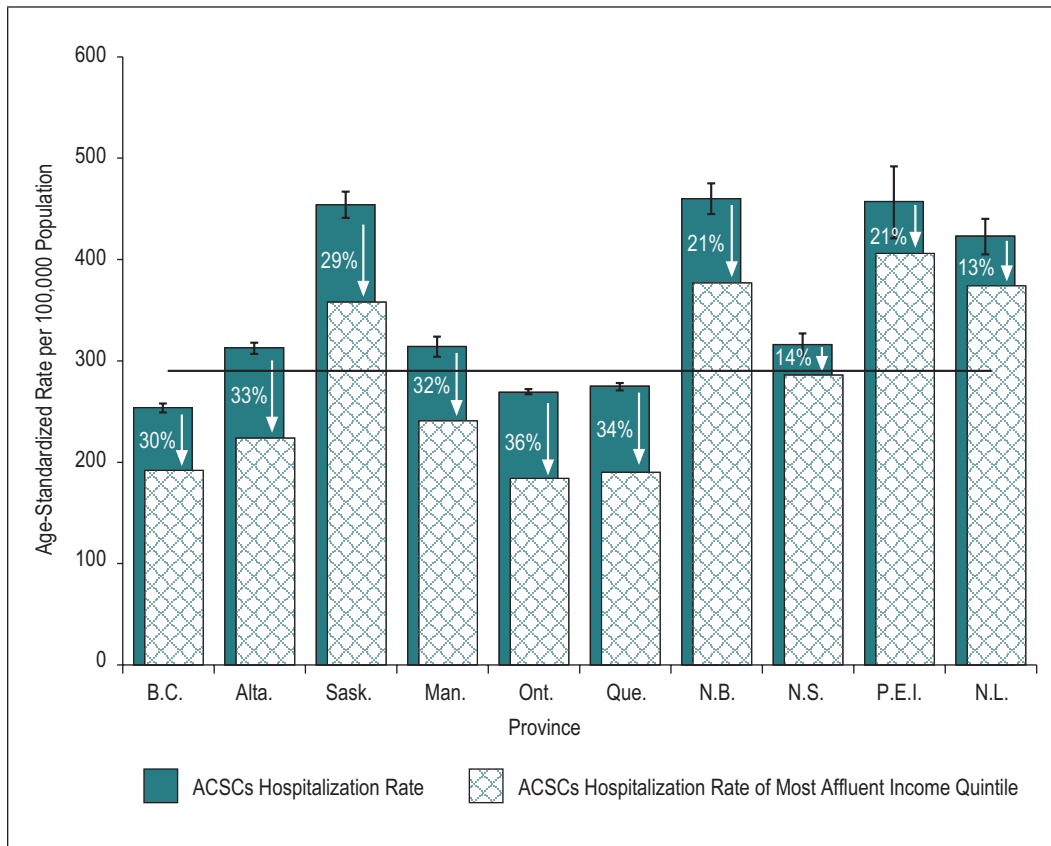
Nova Scotia and Newfoundland and Labrador did not have statistically significant PRRs; therefore, the PRRs for these provinces are not displayed in this figure.

Note that denominator cases with an invalid or missing postal code, and those living in long-term care facilities, cannot be assigned a neighbourhood income quintile and are not included in the PRR calculation. Please see the appendix, page 29, for more information.

**Sources**

Discharge Abstract Database, National Ambulatory Care Reporting System and Ontario Mental Health Reporting System, Canadian Institute for Health Information; Fichier des hospitalisations MED-ÉCHO, ministère de la Santé et des Services sociaux du Québec; 2006 Census, Statistics Canada.

Figure 8: Hospitalization Rates and Potential Rate Reductions for Ambulatory Care Sensitive Conditions by Province, Canada, 2011–2012



**Notes**

ACSCs: ambulatory care sensitive conditions.

I represents 95% confidence intervals.

— represents the 2011–2012 Canada hospitalization rate for ambulatory care sensitive conditions.

↓ represents potential rate reduction.

The territories were not included due to small numbers.

All PRRs were statistically significant for ambulatory care sensitive conditions.

Note that denominator cases with an invalid or missing postal code, and those living in long-term care facilities, cannot be assigned a neighbourhood income quintile and are not included in the PRR calculation. Please see the appendix, page 29, for more information.

**Sources**

Discharge Abstract Database and National Ambulatory Care Reporting System, Canadian Institute for Health Information; Fichier des hospitalisations MED-ÉCHO, ministère de la Santé et des Services sociaux du Québec; 2006 Census, Statistics Canada.

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# Appendix—Defining Neighbourhood Income Quintile to Measure Disparity

## Assigning Patients to Neighbourhood Income Quintiles

Each patient was assigned to a neighbourhood income quintile using Statistics Canada's Postal Code Conversion File Plus (PCCF+).<sup>1</sup> This software links six-character postal codes to standard Canadian census geographic areas (such as dissemination areas, census tracts and census subdivisions). By linking postal codes to census geography, the file facilitates extraction of the relevant census information (for example, income) for each geographic area.

The dissemination area (DA) is the smallest geographical unit available for analysis in the Canadian census, with a targeted population size of 400 to 700 persons.<sup>2</sup> Using PCCF+ (Version 5J),<sup>3</sup> the postal code of the patient's place of residence at the time of hospitalization was mapped to the corresponding 2006 Census DA, and the neighbourhood income quintile of that DA was assigned to the patient.

In the PCCF+, for postal codes that map to more than one DA, probabilistic assignment based on population size is used, meaning that the same postal code can be mapped to a different DA if the program is run more than once. To ensure that the same patient with the same postal code was always assigned to the same DA, a unique combination of encrypted health card number, birthdate and postal code was assigned to the same DA.

## Construction of Income Quintiles for Dissemination Areas

The neighbourhood income quintiles available in the PCCF+ were constructed according to the methods developed at Statistics Canada.<sup>4</sup> A short description of the method is provided below.

Neighbourhood income quintiles were based on the average income per single-person equivalent in a DA, which was obtained from the 2006 Census. This measure uses the person weights implicit in the Statistics Canada low-income cut-offs to derive "single-person equivalent" multipliers for each household size.<sup>3</sup> For example, a single-person household received a multiplier of 1.0, a two-person household received a multiplier of 1.24 and a three-person household received a multiplier of 1.53. To calculate average income per single-person equivalent for each DA, the total income of the dissemination area was divided by the total number of single-person equivalents. Income quintile for DAs with a household population of less than 250 was imputed based on the neighbouring DAs (where possible), because census data on income for these DAs was suppressed.



Next, quintiles of population by neighbourhood income were constructed separately for each census metropolitan area, census agglomeration or residual area within each province. DAs within each such area were ranked from the lowest average income per single-person equivalent to the highest, and DAs were assigned to five groups, such that each group contained approximately one-fifth of the total non-institutional population of each area. The quintile data was then pooled across the areas. Quintiles were constructed within each area before aggregating to the national or provincial level to minimize the potential effect of the differences in income, housing and other living costs across different areas in the country.

## Limitations

Neighbourhood income quintiles derived from linking postal codes to the census are less accurate in rural areas because rural postal codes cover larger geographical areas. Another limitation is that the measure excludes people living in long-term care facilities because income data from the 2006 Canadian Census is available only for non-institutional residents. As a result, not all people can be included in the rates by neighbourhood income quintile.

## Appendix References

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## Health Indicators Region by Region

90 692
40 751
45 385
5284
46 044
44 252
239 677
1 339
195
19

Health indicators are standardized measures of various aspects of health and health care that can be used to monitor the health status of the population and the performance and characteristics of the health system over time and across the country. As in previous years, the *Health Indicators* annual report provides up-to-date comparable information for health regions and provinces and territories. This information can be used by jurisdictions to evaluate progress and identify areas for improvement.

## There's More on the Web

CIHI and Statistics Canada jointly produce and maintain the *Health Indicators* e-publication. This free web-based product provides data for a broad range of health indicators from both CIHI and Statistics Canada in one integrated online publication. This interactive online resource provides easy access to the most recent health indicator results, as well as to data for all available years, maps, technical notes and other important information.

**Health Indicators e-publication:** to find more information on the latest readings on the health of Canadians—region by region—please visit [www.cihi.ca/indicators](http://www.cihi.ca/indicators) or [www.statcan.gc.ca](http://www.statcan.gc.ca).

## What Are Health Regions?

Health regions are administrative bodies, legislated by the provincial ministries of health. They are defined by geographical areas and are responsible for providing health services to their residents. The role of health regions in determining how resources are allocated and their relationship with local hospitals vary by province.

For this report, data is provided for all regions with a population of at least 50,000. In addition, data for the smaller regions, as well as for Nova Scotia zones and Ontario public health units, is included in the Health Indicators e-publication ([www.cihi.ca/indicators](http://www.cihi.ca/indicators) or [www.statcan.gc.ca](http://www.statcan.gc.ca)). Please see page 98 for a map of all the health regions in Canada.

## Interpreting the Indicators

Health indicators are reported based on where a patient lives, not where he or she was hospitalized. Consequently, these figures reflect the experience of residents of a region regardless of where they were treated, even if it was outside their own province, rather than showing the activity of hospitals in a given region. Confidence intervals are provided for most indicators to aid interpretation. The width of the confidence interval illustrates the degree of variability associated with the rate. Indicator values are estimated to be accurate within the upper and lower confidence interval 19 times out of 20 (95% confidence interval).

## Symbols and Abbreviations

..	Figures not available
*	Figures suppressed due to small numbers or incomplete data
▼	Interpret with caution
95% CI	95% confidence interval
◆	Statistically significantly different from the national (Canada) rate ( $p \leq 0.05$ )
◆◆	Statistically significant disparity measure (see page 75 for details)
ASSS	Agence de la santé et des services sociaux
HSDA	Health service delivery area
LHIN	Local health integration network
RHA	Regional health authority

Map Code	Health Region	Legend Name	Population ('000)	Population Age 65+ (%)	Dependency Ratio
			2011	2011	2011
<b>Newfoundland and Labrador</b>		<b>N.L.</b>	<b>511</b>	<b>15.8</b>	<b>57.2</b>
1011	Eastern Regional Integrated Health Authority	Eastern	305	14.6	54.0
1012	Central Regional Integrated Health Authority	Central	92	19.5	64.7
1013	Western Regional Integrated Health Authority	Western	77	18.3	62.3
<b>Prince Edward Island</b>		<b>P.E.I.</b>	<b>146</b>	<b>15.8</b>	<b>63.6</b>
<b>Nova Scotia</b>		<b>N.S.</b>	<b>945</b>	<b>16.5</b>	<b>59.6</b>
1211	South Shore District Health Authority	South Shore	58	21.7	66.0
1212	South West Nova District Health Authority	South West Nova	58	19.7	67.4
1223	Annapolis Valley District Health Authority	Annapolis Valley	83	18.9	68.4
1234	Colchester East Hants Health Authority	Colchester East Hants	73	16.9	67.3
1258	Cape Breton District Health Authority	Cape Breton	123	19.5	68.8
1269	Capital District Health Authority	Capital	429	13.1	50.9
<b>New Brunswick</b>		<b>N.B.</b>	<b>755</b>	<b>16.2</b>	<b>59.7</b>
1301	Zone 1	Zone 1 (Moncton area)	207	16.0	56.4
1302	Zone 2	Zone 2 (Saint John area)	176	15.6	62.7
1303	Zone 3	Zone 3 (Fredericton area)	175	14.7	59.3
1306	Zone 6	Zone 6 (Bathurst area)	77	18.8	58.4
<b>Quebec</b>		<b>Que.</b>	<b>7,980</b>	<b>15.7</b>	<b>59.7</b>
2401	ASSS du Bas-Saint-Laurent	Bas-Saint-Laurent	200	19.5	64.4
2402	ASSS du Saguenay–Lac-Saint-Jean	Saguenay–Lac-Saint-Jean	273	17.7	62.6
2403	ASSS de la Capitale-Nationale	Capitale-Nationale	701	17.3	56.8
2404	ASSS de la Mauricie et du Centre-du-Québec	Mauricie et Centre-du-Québec	496	18.9	65.1
2405	ASSS de l'Estrie	Estrie	312	17.2	63.8
2406	ASSS de Montréal	Montréal	1,958	14.9	54.0
2407	ASSS de l'Outaouais	Outaouais	368	12.8	55.7
2408	ASSS de l'Abitibi-Témiscamingue	Abitibi-Témiscamingue	146	14.9	62.7
2409	ASSS de la Côte-Nord	Côte-Nord	96	14.3	60.4
2411	ASSS de la Gaspésie–Îles-de-la-Madeleine	Gaspésie–Îles-de-la-Madeleine	93	20.4	64.1
2412	ASSS de Chaudière-Appalaches	Chaudière-Appalaches	406	16.8	63.4
2413	ASSS de Laval	Laval	404	15.5	64.0
2414	ASSS de Lanaudière	Lanaudière	470	14.4	61.1
2415	ASSS des Laurentides	Laurentides	556	14.7	61.5
2416	ASSS de la Montérégie	Montréal	1,457	15.1	62.1
<b>Ontario</b>		<b>Ont.</b>	<b>13,373</b>	<b>14.2</b>	<b>59.2</b>
3501	Erie St. Clair LHIN	Erie St. Clair	643	15.8	65.2
3502	South West LHIN	South West	963	15.9	64.4
3503	Waterloo Wellington LHIN	Waterloo Wellington	758	12.7	58.6
3504	Hamilton Niagara Haldimand Brant LHIN	Hamilton Niagara Haldimand Brant	1,417	15.9	63.5
3505	Central West LHIN	Central West	857	11.0	57.1
3506	Mississauga Halton LHIN	Mississauga Halton	1,180	11.3	58.5
3507	Toronto Central LHIN	Toronto Central	1,195	13.8	52.3
3508	Central LHIN	Central	1,769	12.5	55.9
3509	Central East LHIN	Central East	1,572	14.4	58.2
3510	South East LHIN	South East	492	18.0	64.0
3511	Champlain LHIN	Champlain	1,261	14.1	57.3
3512	North Simcoe Muskoka LHIN	North Simcoe Muskoka	462	15.9	63.6
3513	North East LHIN	North East	564	17.8	63.7
3514	North West LHIN	North West	240	15.2	64.5
<b>Manitoba</b>		<b>Man.</b>	<b>1,251</b>	<b>13.9</b>	<b>66.1</b>
4610	Winnipeg RHA	Winnipeg	706	13.9	58.2
4615	Brandon RHA	Brandon	52	14.9	62.2
4625	South Eastman Health	South Eastman	70	11.0	77.0
4630	Interlake RHA	Interlake	84	15.8	72.2
4640	RHA—Central Manitoba Inc.	Central	110	13.7	80.4
4645	Assiniboine RHA	Assiniboine	70	18.8	80.2

Map Code	Health Region	Legend Name	Population ('000)	Population Age 65+ (%)	Dependency Ratio
			2011	2011	2011
<b>Saskatchewan</b>		<b>Sask.</b>	<b>1,058</b>	<b>14.6</b>	<b>68.1</b>
4701	Sun Country Health Region	Sun Country	54	16.8	74.3
4702	Five Hills Health Region	Five Hills	53	18.7	74.2
4704	Regina Qu'Appelle Health Region	Regina	263	13.6	61.1
4705	Sunrise Health Region	Sunrise	54	22.0	85.1
4706	Saskatoon Health Region	Saskatoon	320	12.8	59.2
4709	Prince Albert Parkland RHA	Prince Albert	79	15.6	81.3
4710	Prairie North Health Region	Prairie North	72	12.8	76.6
<b>Alberta</b>		<b>Alta.</b>	<b>3,779</b>	<b>10.8</b>	<b>55.2</b>
4831	South Zone	South Zone	285	13.7	67.1
4832	Calgary Zone	Calgary Zone	1,413	9.8	51.0
4833	Central Zone	Central Zone	456	12.7	63.1
4834	Edmonton Zone	Edmonton Zone	1,193	11.3	52.9
4835	North Zone	North Zone	433	9.1	61.1
<b>British Columbia</b>		<b>B.C.</b>	<b>4,573</b>	<b>15.3</b>	<b>57.3</b>
5911	East Kootenay HSDA	East Kootenay	81	16.4	60.2
5912	Kootenay Boundary HSDA	Kootenay Boundary	80	18.5	62.4
5913	Okanagan HSDA	Okanagan	353	20.3	66.6
5914	Thompson Cariboo Shuswap HSDA	Thompson/Cariboo/Shuswap	224	17.3	62.0
5921	Fraser East HSDA	Fraser East	287	14.5	64.9
5922	Fraser North HSDA	Fraser North	616	11.7	49.8
5923	Fraser South HSDA	Fraser South	727	17.5	70.4
5931	Richmond HSDA	Richmond	198	12.7	50.1
5932	Vancouver HSDA	Vancouver	669	11.8	41.3
5933	North Shore/Coast Garibaldi HSDA	North Shore	287	15.5	57.8
5941	South Vancouver Island HSDA	South Vancouver Island	375	17.3	54.9
5942	Central Vancouver Island HSDA	Central Vancouver Island	266	20.3	66.2
5943	North Vancouver Island HSDA	North Vancouver Island	121	17.7	63.3
5951	Northwest HSDA	Northwest	76	12.0	62.1
5952	Northern Interior HSDA	Northern Interior	145	12.2	57.8
5953	Northeast HSDA	Northeast	70	8.7	58.7
<b>Yukon</b>		<b>Y.T.</b>	<b>35</b>	<b>8.8</b>	<b>47.4</b>
<b>Northwest Territories</b>		<b>N.W.T.</b>	<b>44</b>	<b>5.6</b>	<b>53.9</b>
<b>Nunavut</b>		<b>Nun.</b>	<b>33</b>	<b>3.2</b>	<b>79.1</b>
<b>Canada</b>		<b>Canada</b>	<b>34,483</b>	<b>14.4</b>	<b>59.1</b>

## Population

The number of people living in a geographic area. A population's size and age–sex composition may affect the health status of a region and its need for health services. Population data also provides the denominators used to calculate rates for most health and social indicators.

**Sources:** Demography Division, Statistics Canada. Data is derived from the census and administrative sources on births, deaths and migration. Population estimates for health regions in B.C. were provided by BC Stats. Population estimates for health regions in Quebec were derived from census division population estimates provided by the Institut de la statistique du Québec.

## Dependency ratio

The ratio of the combined population age 0 to 19 and the population age 65 and older to the population age 20 to 64. This ratio is presented as the number of dependants for every 100 people in the working-age population. Canadians age 65 and older and those younger than age 20 are more likely to be socially and/or economically dependent on working-age Canadians, and they may also put additional demands on health services.

**Source:** Demography Division, Statistics Canada.



Self-Reported Conditions								
Adult Body Mass Index (Age 18+) (25 or Greater) 2007 to 2010								
	First Nations		Métis		Inuit		Non-Aboriginal	
	%	95% CI	%	95% CI	%	95% CI	%	95% CI
N.L.	65.8	(58.3–73.4)	64.1	(54.8–73.3)	71.4	(55.9–86.8)	63.4	(61.8–65.0)
P.E.I.	81.4	(64.2–98.7)	*	**	..	.. ..	58.6	(56.5–60.6)
N.S.	64.2	(50.8–77.6)	58.2	(47.8–68.6)	*	**	60.5	(59.0–61.9)
N.B.	53.9	(40.2–67.6)	63.1	(47.7–78.5)	*	**	61.7	(60.3–63.1)
Que.	60.0	(52.1–67.9)	52.5	(43.8–61.3)	*	**	49.3	(48.6–50.1)
Ont.	61.9	(57.4–66.4)	59.0	(52.6–65.3)	75.2	(53.9–96.4)	51.6	(51.0–52.2)
Man.	72.4	(62.5–82.2)	62.2	(56.0–68.4)	*	**	56.4	(55.0–57.8)
Sask.	62.7	(55.3–70.0)	68.0	(62.2–73.8)	*	**	57.7	(56.4–59.0)
Alta.	55.1	(46.7–63.5)	56.1	(49.9–62.3)	*	**	52.8	(51.7–53.9)
B.C.	56.6	(49.9–63.3)	49.1	(41.8–56.4)	*	**	44.3	(43.4–45.2)
Y.T.	57.4	(49.0–65.8)	52.2	(35.4–69.0)	*	**	51.5	(48.2–54.8)
N.W.T.	55.0	(49.4–60.6)	62.9	(52.2–73.5)	58.4	(47.8–69.0)	61.4	(56.8–66.0)
Nun.	*	**	*	**	52.1	(45.9–58.4)	66.0	(60.1–71.9)
<b>Canada</b>	<b>60.6</b>	<b>(58.0–63.1)</b>	<b>57.8</b>	<b>(55.1–60.5)</b>	<b>61.7</b>	<b>(55.4–68.1)</b>	<b>51.2</b>	<b>(50.9–51.6)</b>

One or More Chronic Conditions 2007 to 2010								
	First Nations		Métis		Inuit		Non-Aboriginal	
	%	95% CI	%	95% CI	%	95% CI	%	95% CI
N.L.	62.6	(56.3–68.9)	59.2	(49.9–68.6)	47.4	(35.5–59.2)	59.8	(58.4–61.2)
P.E.I.	54.0▼	(33.0–75.0)	*	**	..	.. ..	57.2	(55.1–59.3)
N.S.	62.1	(50.8–73.4)	64.8	(55.6–74.1)	*	**	62.9	(61.6–64.1)
N.B.	57.9	(47.2–68.7)	77.1	(63.8–90.4)	*	**	58.7	(57.6–59.8)
Que.	61.0	(54.0–67.9)	61.4	(53.4–69.5)	*	**	51.2	(50.5–51.9)
Ont.	65.1	(61.3–69.0)	63.9	(58.9–69.0)	55.1▼	(32.8–77.3)	53.8	(53.3–54.4)
Man.	62.1	(54.6–69.7)	58.9	(54.1–63.6)	*	**	54.5	(53.1–55.9)
Sask.	53.7	(46.2–61.1)	55.0	(50.0–60.0)	*	**	56.4	(55.1–57.8)
Alta.	59.1	(52.5–65.6)	53.5	(48.0–59.0)	*	**	52.1	(51.1–53.2)
B.C.	55.8	(50.4–61.2)	59.4	(53.4–65.3)	91.9	(81.2–102.6)	52.1	(51.2–52.9)
Y.T.	55.7	(50.5–61.0)	49.8	(35.8–63.7)	*	**	48.3	(45.3–51.3)
N.W.T.	46.1	(40.7–51.4)	44.3	(35.5–53.2)	39.5	(29.0–50.0)	42.9	(39.2–46.6)
Nun.	*	**	*	**	33.1	(29.1–37.0)	51.0	(42.5–59.6)
<b>Canada</b>	<b>60.4</b>	<b>(58.2–62.6)</b>	<b>58.9</b>	<b>(56.7–61.0)</b>	<b>47.6</b>	<b>(41.9–53.4)</b>	<b>53.3</b>	<b>(53.0–53.7)</b>

Perceived Mental Health, Very Good or Excellent 2007 to 2010								
	First Nations		Métis		Inuit		Non-Aboriginal	
	%	95% CI	%	95% CI	%	95% CI	%	95% CI
N.L.	75.1	(68.7–81.4)	71.8	(63.3–80.3)	70.9	(61.4–80.4)	76.2	(74.7–77.6)
P.E.I.	60.3▼	(40.3–80.3)	*	**	..	.. ..	75.0	(73.2–76.8)
N.S.	76.6	(68.7–84.4)	67.4	(57.8–77.1)	*	**	73.0	(71.8–74.2)
N.B.	63.2	(52.3–74.2)	54.1	(39.5–68.8)	*	**	69.7	(68.6–70.9)
Que.	72.1	(64.5–79.7)	63.8	(55.7–71.8)	*	**	76.8	(76.2–77.4)
Ont.	62.9	(59.2–66.6)	66.3	(61.2–71.4)	64.0	(44.3–83.6)	74.7	(74.2–75.2)
Man.	55.5	(46.6–64.3)	65.6	(60.6–70.6)	*	**	72.5	(71.2–73.8)
Sask.	65.8	(59.3–72.4)	68.2	(63.7–72.6)	*	**	72.2	(71.1–73.2)
Alta.	64.0	(57.4–70.6)	67.0	(61.9–72.1)	70.5▼	(46.4–94.6)	74.8	(73.9–75.6)
B.C.	63.2	(57.9–68.4)	66.0	(60.0–72.0)	83.5	(64.4–102.6)	71.4	(70.6–72.3)
Y.T.	61.4	(56.4–66.3)	80.6	(69.6–91.6)	*	**	75.8	(73.2–78.4)
N.W.T.	49.3	(43.6–55.0)	60.6	(51.3–70.0)	49.1	(40.4–57.8)	72.5	(69.6–75.5)
Nun.	*	**	*	**	63.1	(59.2–67.1)	76.8	(71.3–82.3)
<b>Canada</b>	<b>64.2</b>	<b>(62.1–66.3)</b>	<b>66.2</b>	<b>(64.1–68.4)</b>	<b>65.8</b>	<b>(60.8–70.8)</b>	<b>74.5</b>	<b>(74.2–74.8)</b>

The data presented here represents a sample of a wider range of the health status indicators that are available in the *Health Indicators* e-publication.



[www.cihi.ca](http://www.cihi.ca) or [www.statcan.gc.ca](http://www.statcan.gc.ca)

### Adult body mass index

Proportion of household population age 18 and older with a body mass index (BMI) of 25 or greater. According to the World Health Organization and Health Canada guidelines, a BMI of 25 or greater is classified as overweight or obese, which is associated with increased health risk. BMI is calculated from weight and height collected from respondents by dividing body weight (in kilograms) by height (in metres) squared.

**Note:** Rates are based on four years of pooled data.

**Source:** Canadian Community Health Survey, Statistics Canada.

### One or more chronic conditions

Proportion of household population age 12 and older who reported being diagnosed by a health professional as having one or more of the following chronic conditions: asthma, arthritis (excluding fibromyalgia), back problems (excluding fibromyalgia and arthritis), high blood pressure, migraine headaches, chronic bronchitis, emphysema, chronic obstructive pulmonary disease, diabetes, heart disease, cancer, intestinal or stomach ulcers, effects of a stroke, urinary incontinence, a bowel disorder, Alzheimer's disease or any other dementia, a mood disorder and/or an anxiety disorder.

**Note:** Rates are based on four years of pooled data.

**Source:** Canadian Community Health Survey, Statistics Canada.

### Perceived mental health

Proportion of household population age 12 and older who reported perceiving their own mental health status as being either excellent or very good. Perceived mental health provides a general indication of the population suffering from some form of mental disorder, mental or emotional problems, or distress, which is not necessarily reflected in self-reported (physical) health.

**Note:** Rates are based on four years of pooled data.

**Source:** Canadian Community Health Survey, Statistics Canada.

Map Code	Health Region	Injury Hospitalization 2011–2012	
		Age-Standardized Rate per 100,000	95% CI
<b>Newfoundland and Labrador</b>		<b>+537</b>	<b>(517–557)</b>
1011	Eastern	+471	(447–495)
1012	Central	+459	(413–506)
1013	Western	+689	(629–749)
<b>Prince Edward Island</b>		<b>+617</b>	<b>(578–656)</b>
<b>Nova Scotia</b>		<b>+491</b>	<b>(477–504)</b>
1211	South Shore	546	(490–602)
1212	South West Nova	542	(483–602)
1223	Annapolis Valley	511	(463–558)
1234	Colchester East Hants	504	(454–555)
1258	Cape Breton	+575	(533–617)
1269	Capital	+417	(399–436)
<b>New Brunswick</b>		<b>+578</b>	<b>(561–594)</b>
1301	Zone 1 (Moncton area)	+455	(427–483)
1302	Zone 2 (Saint John area)	+482	(451–513)
1303	Zone 3 (Fredericton area)	+637	(601–673)
1306	Zone 6 (Bathurst area)	+577	(522–632)
<b>Quebec</b>		<b>512</b>	<b>(508–517)</b>
2401	Bas-Saint-Laurent	+632	(598–665)
2402	Saguenay–Lac-Saint-Jean	+671	(640–701)
2403	Capitale-Nationale	+481	(466–496)
2404	Mauricie et Centre-du-Québec	+622	(600–643)
2405	Estrie	+648	(620–675)
2406	Montréal	+403	(395–411)
2407	Outaouais	+443	(423–464)
2408	Abitibi-Témiscamingue	+770	(725–814)
2409	Côte-Nord	+568	(520–616)
2411	Gaspésie–Îles-de-la-Madeleine	+704	(650–758)
2412	Chaudière-Appalaches	512	(491–532)
2413	Laval	+448	(429–467)
2414	Lanaudière	+489	(469–508)
2415	Laurentides	+565	(546–584)
2416	Montérégie	+534	(523–546)
<b>Ontario</b>		<b>+409</b>	<b>(405–412)</b>
3501	Erie St. Clair	+415	(401–430)
3502	South West	+497	(484–511)
3503	Waterloo Wellington	+404	(391–418)
3504	Hamilton Niagara Haldimand Brant	+484	(473–495)
3505	Central West	+338	(326–351)
3506	Mississauga Halton	+315	(305–325)
3507	Toronto Central	+364	(354–375)
3508	Central	+309	(301–317)
3509	Central East	+335	(327–344)
3510	South East	+410	(393–426)
3511	Champlain	+387	(376–397)
3512	North Simcoe Muskoka	+472	(454–491)
3513	North East	+636	(616–656)
3514	North West	+792	(756–827)
<b>Manitoba</b>		<b>+657</b>	<b>(643–671)</b>
4610	Winnipeg	+481	(466–496)
4615	Brandon	+684	(616–751)
4625	South Eastman	+595	(538–652)
4630	Interlake	+750	(690–810)
4640	Central	+674	(627–722)
4645	Assiniboine	+868	(800–936)

Map Code Health Region		Injury Hospitalization 2011–2012	
		Age-Standardized Rate per 100,000	95% CI
<b>Saskatchewan</b>		<b>*789</b>	<b>(773–806)</b>
4701	Sun Country	*1,081	(996–1,167)
4702	Five Hills	*880	(802–957)
4704	Regina	*809	(775–842)
4705	Sunrise	*982	(898–1,067)
4706	Saskatoon	*544	(520–568)
4709	Prince Albert	*711	(650–771)
4710	Prairie North	*945	(873–1,017)
<b>Alberta</b>		<b>*706</b>	<b>(698–714)</b>
4831	South Zone	*779	(747–810)
4832	Calgary Zone	*554	(541–566)
4833	Central Zone	*903	(876–930)
4834	Edmonton Zone	*636	(622–650)
4835	North Zone	*1,055	(1,023–1,086)
<b>British Columbia</b>		<b>*545</b>	<b>(538–551)</b>
5911	East Kootenay	*792	(732–852)
5912	Kootenay Boundary	*759	(700–819)
5913	Okanagan	*638	(612–664)
5914	Thompson/Cariboo/Shuswap	*696	(661–730)
5921	Fraser East	*630	(603–658)
5922	Fraser North	514	(497–531)
5923	Fraser South	*478	(463–493)
5931	Richmond	*347	(323–372)
5932	Vancouver	*399	(385–414)
5933	North Shore	506	(481–531)
5941	South Vancouver Island	503	(481–524)
5942	Central Vancouver Island	*649	(618–680)
5943	North Vancouver Island	*648	(602–695)
5951	Northwest	*1,067	(991–1,142)
5952	Northern Interior	*739	(694–783)
5953	Northeast	*702	(638–767)
<b>Yukon</b>		<b>*1,159</b>	<b>(1,034–1,285)</b>
<b>Northwest Territories</b>		<b>*1,153</b>	<b>(1,037–1,269)</b>
<b>Nunavut</b>		<b>*871</b>	<b>(735–1,007)</b>
<b>Canada</b>		<b>516</b>	<b>(514–518)</b>

### Injury hospitalization

Age-standardized rate of acute care hospitalization due to injury resulting from the transfer of energy (excludes poisoning and other non-traumatic injuries), per 100,000 population. This indicator contributes to an understanding of the adequacy and effectiveness of injury prevention efforts, including public education, product development and use, community and road design, and prevention and treatment resources.

**Sources:** National Trauma Registry, Canadian Institute for Health Information; Fichier des hospitalisations MED-ÉCHO, ministère de la Santé et des Services sociaux du Québec.

Map Code	Health Region	Hospitalized Acute Myocardial Infarction Event 2011–2012		Hospitalized Stroke Event 2011–2012	
		Age-Standardized Rate per 100,000	95% CI	Age-Standardized Rate per 100,000	95% CI
<b>Newfoundland and Labrador</b>		<b>*292</b>	<b>(278–307)</b>	<b>*137</b>	<b>(127–147)</b>
1011	Eastern	*312	(292–332)	*144	(130–157)
1012	Central	*288	(257–320)	129	(107–151)
1013	Western	237	(204–269)	*97	(77–117)
<b>Prince Edward Island</b>		<b>*284</b>	<b>(257–311)</b>	<b>*144</b>	<b>(125–163)</b>
<b>Nova Scotia</b>		<b>*253</b>	<b>(243–263)</b>	<b>116</b>	<b>(109–123)</b>
1211	South Shore	*337	(293–381)	104	(82–126)
1212	South West Nova	*303	(261–346)	143	(115–172)
1223	Annapolis Valley	*241	(210–272)	108	(88–128)
1234	Colchester East Hants	*277	(240–314)	109	(85–132)
1258	Cape Breton	*321	(289–352)	117	(99–134)
1269	Capital	*185	(172–199)	*107	(96–117)
<b>New Brunswick</b>		<b>*257</b>	<b>(245–268)</b>	<b>128</b>	<b>(120–136)</b>
1301	Zone 1 (Moncton area)	*262	(240–284)	116	(102–130)
1302	Zone 2 (Saint John area)	*230	(208–253)	128	(112–145)
1303	Zone 3 (Fredericton area)	*306	(280–333)	122	(105–138)
1306	Zone 6 (Bathurst area)	206	(176–236)	111	(90–133)
<b>Quebec</b>		<b>*219</b>	<b>(216–223)</b>	<b>..</b>	<b>.. ..</b>
2401	Bas-Saint-Laurent	*230	(210–249)	..	.. ..
2402	Saguenay–Lac-Saint-Jean	*231	(214–248)	..	.. ..
2403	Capitale-Nationale	*228	(217–238)	..	.. ..
2404	Mauricie et Centre-du-Québec	*235	(222–247)	..	.. ..
2405	Estrie	*270	(252–287)	..	.. ..
2406	Montréal	*190	(184–197)	..	.. ..
2407	Outaouais	*237	(220–254)	..	.. ..
2408	Abitibi-Témiscamingue	*276	(249–303)	..	.. ..
2409	Côte-Nord	*244	(213–276)	..	.. ..
2411	Gaspésie–Îles-de-la-Madeleine	*394	(357–431)	..	.. ..
2412	Chaudière-Appalaches	199	(186–213)	..	.. ..
2413	Laval	*180	(167–193)	..	.. ..
2414	Lanaudière	*256	(241–271)	..	.. ..
2415	Laurentides	197	(185–209)	..	.. ..
2416	Montérégie	*221	(213–228)	..	.. ..
<b>Ontario</b>		<b>*198</b>	<b>(196–200)</b>	<b>*119</b>	<b>(117–121)</b>
3501	Erie St. Clair	*233	(222–245)	*133	(124–142)
3502	South West	207	(198–216)	119	(112–126)
3503	Waterloo Wellington	207	(196–218)	121	(112–129)
3504	Hamilton Niagara Haldimand Brant	*228	(220–236)	*115	(109–120)
3505	Central West	202	(191–213)	124	(116–133)
3506	Mississauga Halton	*146	(138–153)	*109	(102–116)
3507	Toronto Central	*137	(130–144)	116	(110–122)
3508	Central	*147	(141–153)	*114	(109–120)
3509	Central East	*184	(177–190)	*111	(106–117)
3510	South East	200	(188–212)	122	(112–131)
3511	Champlain	*193	(185–201)	*107	(101–113)
3512	North Simcoe Muskoka	*226	(213–240)	121	(111–131)
3513	North East	*325	(310–339)	*140	(131–150)
3514	North West	*309	(286–331)	*156	(140–173)
<b>Manitoba</b>		<b>*230</b>	<b>(221–239)</b>	<b>119</b>	<b>(112–125)</b>
4610	Winnipeg	212	(201–224)	116	(108–125)
4615	Brandon	*115	(85–145)	110	(80–139)
4625	South Eastman	221	(181–261)	124	(94–154)
4630	Interlake	*253	(219–287)	111	(88–133)
4640	Central	*281	(248–315)	118	(96–140)
4645	Assiniboine	209	(175–243)	*78	(58–97)

Map Code	Health Region	Hospitalized Acute Myocardial Infarction Event 2011–2012		Hospitalized Stroke Event 2011–2012	
		Age-Standardized Rate per 100,000	95% CI	Age-Standardized Rate per 100,000	95% CI
<b>Saskatchewan</b>		<b>200</b>	<b>(191–209)</b>	<b>126</b>	<b>(119–133)</b>
4701	Sun Country	220	(181–259)	123	(95–151)
4702	Five Hills	*271	(226–316)	115	(88–141)
4704	Regina	*172	(155–189)	128	(114–143)
4705	Sunrise	234	(195–274)	129	(102–156)
4706	Saskatoon	*171	(155–186)	131	(118–145)
4709	Prince Albert	*247	(212–282)	114	(89–140)
4710	Prairie North	207	(171–244)	145	(115–176)
<b>Alberta</b>		<b>201</b>	<b>(196–206)</b>	<b>*126</b>	<b>(122–130)</b>
4831	South Zone	203	(185–220)	124	(111–138)
4832	Calgary Zone	*156	(149–164)	120	(113–127)
4833	Central Zone	*269	(253–286)	129	(118–140)
4834	Edmonton Zone	*195	(186–203)	123	(116–130)
4835	North Zone	*270	(251–289)	*143	(129–157)
<b>British Columbia</b>		<b>*165</b>	<b>(161–169)</b>	<b>119</b>	<b>(115–122)</b>
5911	East Kootenay	*272	(237–307)	*156	(127–184)
5912	Kootenay Boundary	*282	(248–316)	130	(107–152)
5913	Okanagan	*192	(179–205)	125	(114–136)
5914	Thompson/Cariboo/Shuswap	*187	(170–204)	128	(114–142)
5921	Fraser East	201	(184–218)	*136	(122–149)
5922	Fraser North	*149	(139–160)	125	(115–135)
5923	Fraser South	*150	(141–159)	*111	(103–119)
5931	Richmond	*115	(100–131)	111	(95–126)
5932	Vancouver	*147	(137–157)	122	(113–131)
5933	North Shore	*161	(147–176)	117	(104–129)
5941	South Vancouver Island	*118	(108–129)	*90	(81–99)
5942	Central Vancouver Island	*175	(161–189)	*107	(95–118)
5943	North Vancouver Island	*153	(132–174)	126	(107–146)
5951	Northwest	208	(172–245)	*167	(134–199)
5952	Northern Interior	216	(190–242)	127	(106–147)
5953	Northeast	213	(170–255)	123	(90–156)
<b>Yukon</b>		<b>246</b>	<b>(180–313)</b>	<b>106</b>	<b>(58–155)</b>
<b>Northwest Territories</b>		<b>*337</b>	<b>(249–425)</b>	<b>135</b>	<b>(83–187)</b>
<b>Nunavut</b>		<b>*130</b>	<b>(66–195)</b>	<b>145</b>	<b>(51–239)</b>
<b>Canada</b>		<b>205</b>	<b>(204–207)</b>	<b>121</b>	<b>(119–122)</b>

### Hospitalized acute myocardial infarction event

Age-standardized rate of new acute myocardial infarction (AMI) events admitted to an acute care hospital, per 100,000 population age 20 and older. New event is defined as a first-ever hospitalization for an AMI or a recurrent hospitalized AMI occurring more than 28 days after the admission for the previous event in the reference period. AMI is one of the leading causes of morbidity and death. This indicator is important for planning and evaluating preventive strategies, allocating health resources and estimating costs.

**Sources:** Discharge Abstract Database, Canadian Institute for Health Information; Fichier des hospitalisations MED-ÉCHO, ministère de la Santé et des Services sociaux du Québec.

### Hospitalized stroke event

Age-standardized rate of new stroke events admitted to an acute care hospital, per 100,000 population age 20 and older. New event is defined as a first-ever hospitalization for stroke or a recurrent hospitalized stroke occurring more than 28 days after the admission for the previous event in the reference period. Stroke is one of the leading causes of long-term disability and death. This indicator is important for planning and evaluating preventive strategies, allocating health resources and estimating costs.

**Note:** Rates for Quebec are not available due to differences in data collection; the Canada rate does not include Quebec.

**Source:** Discharge Abstract Database, Canadian Institute for Health Information.

## Self-Reported Health Behaviours

Smoking  
2007 to 2010

	First Nations		Métis		Inuit		Non-Aboriginal	
	%	95% CI	%	95% CI	%	95% CI	%	95% CI
	N.L.	28.8	(21.6–35.9)	36.5	(28.1–44.9)	40.0	(29.2–50.9)	23.5
P.E.I.	33.6▼	(14.1–53.2)	*	**	..	.. ..	21.5	(19.8–23.2)
N.S.	22.8▼	(14.4–31.1)	34.4	(25.7–43.1)	*	**	23.5	(22.3–24.7)
N.B.	40.3	(28.8–51.8)	26.6▼	(11.6–41.6)	*	**	22.5	(21.4–23.6)
Que.	36.5	(29.3–43.7)	37.3	(29.1–45.5)	*	**	23.4	(22.8–24.0)
Ont.	41.5	(37.4–45.7)	34.5	(29.8–39.2)	39.0▼	(16.3–61.8)	19.2	(18.7–19.6)
Man.	51.7	(43.6–59.7)	38.0	(33.2–42.9)	*	**	19.1	(17.8–20.3)
Sask.	54.0	(47.5–60.5)	42.4	(37.2–47.5)	*	**	21.7	(20.6–22.9)
Alta.	43.4	(36.7–50.2)	38.8	(33.7–43.9)	*	**	21.8	(20.8–22.8)
B.C.	32.0	(26.9–37.2)	33.2	(27.3–39.0)	*	**	16.8	(16.1–17.5)
Y.T.	51.2	(46.1–56.2)	50.9	(36.4–65.5)	*	**	26.0	(22.8–29.3)
N.W.T.	51.6	(45.9–57.4)	36.7	(28.8–44.7)	54.5	(47.1–61.9)	25.9	(22.8–29.0)
Nun.	*	**	*	**	65.2	(61.2–69.2)	32.0	(24.4–39.7)
<b>Canada</b>	<b>40.1</b>	<b>(37.8–42.4)</b>	<b>36.8</b>	<b>(34.7–39.0)</b>	<b>49.0</b>	<b>(43.9–54.2)</b>	<b>20.5</b>	<b>(20.2–20.8)</b>

Heavy Drinking  
2007 to 2010

	First Nations		Métis		Inuit		Non-Aboriginal	
	%	95% CI	%	95% CI	%	95% CI	%	95% CI
	N.L.	28.6	(21.2–35.9)	19.9▼	(13.0▼–26.7▼)	32.3	(23.5–41.2)	23.7
P.E.I.	*	**	*	**	..	.. ..	19.0	(17.4–20.6)
N.S.	17.4▼	(10.5–24.4)	29.8	(21.0–38.5)	*	**	20.7	(19.5–21.8)
N.B.	23.3▼	(12.9–33.7)	*	**	*	**	19.7	(18.7–20.8)
Que.	20.1	(14.1–26.2)	18.2	(12.5–23.9)	*	**	17.7	(17.2–18.3)
Ont.	25.5	(22.2–28.7)	20.7	(17.0–24.5)	*	**	15.7	(15.3–16.1)
Man.	25.6	(17.8–33.5)	30.9	(25.8–36.0)	*	**	17.5	(16.3–18.7)
Sask.	26.3	(20.3–32.2)	23.3	(18.4–28.2)	*	**	18.3	(17.3–19.3)
Alta.	30.3	(23.4–37.1)	30.7	(25.7–35.7)	*	**	18.0	(17.1–18.8)
B.C.	21.5	(17.5–25.6)	22.0	(16.5–27.4)	*	**	15.1	(14.5–15.7)
Y.T.	38.4	(32.8–44.0)	33.6▼	(20.4–46.8)	*	**	22.7	(20.0–25.4)
N.W.T.	35.1	(29.9–40.2)	29.2	(21.1–37.2)	35.3	(26.0–44.6)	26.2	(22.7–29.8)
Nun.	*	**	*	**	17.7	(13.4–22.1)	24.3	(18.6–30.0)
<b>Canada</b>	<b>25.0</b>	<b>(23.1–26.8)</b>	<b>25.2</b>	<b>(23.2–27.2)</b>	<b>27.2</b>	<b>(21.1–33.2)</b>	<b>16.9</b>	<b>(16.6–17.1)</b>

Physical Activity During Leisure Time  
(Active/Moderately Active)  
2007 to 2010

	First Nations		Métis		Inuit		Non-Aboriginal	
	%	95% CI	%	95% CI	%	95% CI	%	95% CI
	N.L.	52.7	(45.6–59.8)	54.8	(44.1–65.6)	47.6	(37.3–57.8)	46.0
P.E.I.	64.2	(43.8–84.7)	*	**	..	.. ..	49.2	(47.3–51.2)
N.S.	49.4	(38.3–60.6)	52.9	(42.4–63.4)	*	**	50.7	(49.3–52.2)
N.B.	55.1	(43.2–66.9)	38.1▼	(21.2–55.0)	*	**	48.6	(47.3–50.0)
Que.	49.6	(42.4–56.7)	54.8	(46.7–62.9)	*	**	48.5	(47.7–49.3)
Ont.	56.7	(52.7–60.6)	55.9	(50.5–61.3)	54.2▼	(31.3–77.1)	50.0	(49.5–50.6)
Man.	39.4	(32.0–46.7)	59.7	(54.9–64.6)	*	**	53.1	(51.5–54.7)
Sask.	43.0	(36.5–49.6)	49.0	(43.1–55.0)	*	**	49.9	(48.5–51.3)
Alta.	49.9	(42.5–57.3)	58.6	(53.6–63.6)	*	**	55.1	(54.0–56.3)
B.C.	60.3	(55.4–65.2)	63.6	(58.0–69.2)	65.6▼	(40.0–91.3)	58.4	(57.5–59.2)
Y.T.	46.9	(41.3–52.5)	59.1	(43.7–74.6)	*	**	58.7	(56.0–61.4)
N.W.T.	41.8	(36.2–47.5)	49.7	(39.6–59.8)	38.5	(30.0–47.0)	48.5	(44.9–52.0)
Nun.	*	**	*	**	47.0	(41.8–52.2)	44.0	(36.6–51.5)
<b>Canada</b>	<b>53.1</b>	<b>(50.9–55.4)</b>	<b>57.2</b>	<b>(55.1–59.4)</b>	<b>48.2</b>	<b>(42.7–53.7)</b>	<b>51.3</b>	<b>(50.9–51.7)</b>



The data presented here represents a sample of a wider range of the non-medical determinants of health that are available in the *Health Indicators* e-publication.



[www.cihi.ca](http://www.cihi.ca) or [www.statcan.gc.ca](http://www.statcan.gc.ca)

### Smoking

Proportion of household population age 12 and older who reported being a current smoker on either a daily or occasional basis.

**Note:** Rates are based on four years of pooled data.

**Source:** Canadian Community Health Survey, Statistics Canada.

### Heavy drinking

Proportion of household population age 12 and older who reported drinking five or more drinks on at least one occasion per month in the past 12 months.

**Note:** Rates are based on four years of pooled data.

**Source:** Canadian Community Health Survey, Statistics Canada.

### Physical activity during leisure time

Proportion of household population age 12 and older who reported active or moderately active levels of physical activity, based on their responses to questions about the frequency, duration and intensity of their participation in leisure-time physical activity over the past three months.

**Note:** Rates are based on four years of pooled data.

**Source:** Canadian Community Health Survey, Statistics Canada.



## Self-Reported Personal Behaviours

Fruit and Vegetable Consumption  
(5+ per Day)  
2007 to 2010

	First Nations		Métis		Inuit		Non-Aboriginal	
	%	95% CI	%	95% CI	%	95% CI	%	95% CI
N.L.	35.1	(28.3–41.8)	32.4	(24.1–40.7)	27.7	(19.3–36.1)	29.7	(28.1–31.2)
P.E.I.	42.9▼	(20.9▼–65.0▼)	*	**	..	.. ..	36.8	(34.9–38.8)
N.S.	37.9	(26.4–49.5)	33.8	(23.8–43.9)	*	**	36.1	(34.6–37.5)
N.B.	35.0	(24.8–45.2)	51.6	(35.5–67.8)	*	**	38.6	(37.3–40.0)
Que.	46.8	(39.0–54.6)	47.6	(39.1–56.2)	*	**	52.3	(51.6–53.0)
Ont.	34.1	(30.3–38.0)	40.7	(35.3–46.1)	29.4▼	(11.9▼–46.9▼)	42.4	(41.8–43.0)
Man.	22.5	(16.9–28.2)	33.2	(27.8–38.6)	*	**	36.9	(35.3–38.5)
Sask.	27.6	(21.9–33.2)	37.6	(32.1–43.1)	*	**	39.1	(37.9–40.3)
Alta.	36.3	(29.0–43.6)	33.4	(28.8–38.0)	*	**	42.7	(41.5–43.9)
B.C.	39.7	(34.3–45.1)	42.3	(35.5–49.1)	*	**	43.7	(42.8–44.6)
Y.T.	34.7	(29.1–40.2)	42.9▼	(28.5▼–57.4▼)	*	**	46.5	(42.8–50.3)
N.W.T.	20.3	(16.6–24.0)	25.8	(19.4–32.1)	10.2▼	(4.6▼–15.7▼)	31.2	(27.2–35.2)
Nun.	*	**	*	**	22.8	(18.6–27.0)	32.1	(26.7–37.5)
<b>Canada</b>	<b>35.4</b>	<b>(33.4–37.4)</b>	<b>38.0</b>	<b>(35.7–40.2)</b>	<b>25.7</b>	<b>(20.8–30.6)</b>	<b>44.2</b>	<b>(43.9–44.6)</b>

Sense of Community Belonging  
(Very Strong or Somewhat Strong)  
2007 to 2010

	First Nations		Métis		Inuit		Non-Aboriginal	
	%	95% CI	%	95% CI	%	95% CI	%	95% CI
N.L.	77.8	(72.0–83.5)	77.9	(70.1–85.6)	83.6	(73.5–93.7)	80.3	(79.0–81.6)
P.E.I.	75.2	(58.3–92.1)	*	**	..	.. ..	73.5	(71.8–75.2)
N.S.	71.6	(60.2–83.1)	69.6	(61.5–77.7)	*	**	71.5	(70.2–72.9)
N.B.	71.4	(61.5–81.4)	53.9	(36.8–70.9)	*	**	71.0	(69.8–72.3)
Que.	56.3	(48.7–63.8)	58.5	(49.9–67.1)	*	**	57.3	(56.5–58.1)
Ont.	64.5	(60.6–68.5)	66.1	(60.6–71.5)	74.3	(56.0–92.5)	67.0	(66.3–67.6)
Man.	60.9	(51.5–70.2)	63.8	(58.2–69.4)	*	**	68.4	(66.9–69.8)
Sask.	61.4	(55.6–67.2)	60.2	(55.0–65.5)	*	**	71.9	(70.8–73.1)
Alta.	53.5	(46.2–60.8)	57.4	(51.9–62.8)	77.6	(55.9–99.3)	63.1	(61.9–64.2)
B.C.	64.5	(58.9–70.2)	63.5	(56.1–70.8)	81.5	(61.5–101.6)	68.9	(68.0–69.7)
Y.T.	79.1	(74.4–83.9)	62.7	(47.9–77.5)	*	**	75.7	(72.8–78.5)
N.W.T.	83.2	(78.7–87.8)	82.4	(75.9–89.0)	85.8	(74.8–96.8)	74.8	(70.8–78.8)
Nun.	*	**	*	**	87.8	(83.8–91.8)	73.0	(66.1–79.8)
<b>Canada</b>	<b>63.6</b>	<b>(61.4–65.9)</b>	<b>62.4</b>	<b>(60.0–64.8)</b>	<b>81.7</b>	<b>(77.1–86.3)</b>	<b>65.1</b>	<b>(64.8–65.5)</b>

Life Satisfaction  
(Satisfied or Very Satisfied)  
2007 to 2010

	First Nations		Métis		Inuit		Non-Aboriginal	
	%	95% CI	%	95% CI	%	95% CI	%	95% CI
N.L.	92.6	(89.6–95.5)	90.1	(83.2–97.0)	97.2	(94.7–99.8)	92.6	(91.7–93.6)
P.E.I.	84.7	(70.5–98.9)	*	**	..	.. ..	94.5	(93.5–95.4)
N.S.	92.5	(87.7–97.4)	89.0	(83.4–94.6)	*	**	92.0	(91.3–92.7)
N.B.	90.0	(84.4–95.7)	79.0	(65.8–92.3)	*	**	92.8	(92.1–93.5)
Que.	93.6	(90.1–97.1)	89.8	(85.3–94.3)	*	**	93.4	(93.0–93.8)
Ont.	87.6	(85.0–90.2)	87.6	(82.7–92.5)	94.0	(83.1–104.9)	91.2	(90.8–91.5)
Man.	85.3	(77.0–93.6)	88.7	(85.0–92.4)	*	**	92.0	(91.3–92.7)
Sask.	90.5	(86.9–94.0)	92.3	(89.8–94.7)	*	**	92.8	(92.2–93.4)
Alta.	85.6	(80.3–90.9)	91.8	(89.1–94.5)	94.7	(81.3–108.1)	91.8	(91.3–92.4)
B.C.	86.1	(81.7–90.5)	86.2	(81.8–90.7)	79.7	(57.8–101.6)	91.3	(90.8–91.8)
Y.T.	85.7	(82.0–89.5)	89.5	(80.4–98.5)	*	**	92.7	(91.1–94.3)
N.W.T.	87.5	(84.7–90.3)	93.1	(88.9–97.3)	89.6	(83.5–95.6)	95.4	(94.1–96.7)
Nun.	*	**	*	**	89.2	(86.1–92.4)	94.7	(91.3–98.2)
<b>Canada</b>	<b>88.1</b>	<b>(86.5–89.6)</b>	<b>89.2</b>	<b>(87.6–90.8)</b>	<b>92.0</b>	<b>(89.4–94.5)</b>	<b>92.0</b>	<b>(91.8–92.2)</b>

### Fruit and vegetable consumption

Proportion of household population age 12 and older who reported consuming fruits and vegetables five or more times per day, on average.

**Note:** Rates are based on four years of pooled data.

**Source:** Canadian Community Health Survey, Statistics Canada.

### Sense of community belonging

Proportion of household population age 12 and older who reported a very strong or somewhat strong sense of belonging to their local community. Research shows a high correlation between sense of community belonging and physical and mental health.

**Note:** Rates are based on four years of pooled data.

**Source:** Canadian Community Health Survey, Statistics Canada.

### Life satisfaction

Proportion of household population age 12 and older who reported being satisfied or very satisfied with their life in general.

**Note:** Rates are based on four years of pooled data.

**Source:** Canadian Community Health Survey, Statistics Canada.

Map Code	Health Region	Potentially Avoidable Mortality 2007 to 2009			
		Age-Standardized Mortality Rate per 100,000	95% CI	Age-Standardized PYLL† per 100,000	95% CI
<b>Newfoundland and Labrador</b>		<b>*211</b>	<b>(204–218)</b>	<b>*3,791</b>	<b>(3,574–4,007)</b>
1011	Eastern	*217	(207–226)	*3,807	(3,525–4,089)
1012	Central	189	(174–203)	3,359	(2,880–3,838)
1013	Western	*211	(194–229)	3,851	(3,279–4,424)
<b>Prince Edward Island</b>		<b>*197</b>	<b>(184–210)</b>	<b>3,372</b>	<b>(3,015–3,730)</b>
<b>Nova Scotia</b>		<b>*202</b>	<b>(197–207)</b>	<b>*3,517</b>	<b>(3,377–3,658)</b>
1211	South Shore	196	(177–215)	3,959	(3,279–4,638)
1212	South West Nova	*207	(187–226)	3,623	(3,029–4,217)
1223	Annapolis Valley	185	(170–201)	3,169	(2,696–3,642)
1234	Colchester East Hants	*204	(186–222)	3,844	(3,305–4,382)
1258	Cape Breton	*255	(240–270)	*4,680	(4,207–5,153)
1269	Capital	185	(178–193)	*3,078	(2,892–3,264)
<b>New Brunswick</b>		<b>*191</b>	<b>(185–196)</b>	<b>*3,520</b>	<b>(3,354–3,686)</b>
1301	Zone 1 (Moncton area)	174	(164–184)	3,456	(3,134–3,777)
1302	Zone 2 (Saint John area)	*206	(194–218)	3,608	(3,264–3,952)
1303	Zone 3 (Fredericton area)	194	(182–205)	3,491	(3,160–3,823)
1306	Zone 6 (Bathurst area)	*163	(148–178)	*2,793	(2,338–3,249)
<b>Quebec</b>		<b>183</b>	<b>(181–185)</b>	<b>*3,258</b>	<b>(3,211–3,306)</b>
2401	Bas-Saint-Laurent	187	(177–198)	*3,743	(3,391–4,095)
2402	Saguenay–Lac-Saint-Jean	*193	(184–203)	*3,697	(3,407–3,986)
2403	Capitale-Nationale	*170	(164–175)	*2,990	(2,835–3,146)
2404	Mauricie et Centre-du-Québec	*198	(191–204)	*3,858	(3,636–4,080)
2405	Estrie	*164	(156–171)	*3,069	(2,831–3,308)
2406	Montréal	181	(177–184)	*3,064	(2,975–3,153)
2407	Outaouais	*214	(206–223)	3,409	(3,200–3,617)
2408	Abitibi-Témiscamingue	*223	(210–237)	*4,160	(3,764–4,556)
2409	Côte-Nord	*230	(213–247)	*4,658	(4,107–5,208)
2411	Gaspésie–Îles-de-la-Madeleine	*232	(215–248)	*4,518	(3,918–5,117)
2412	Chaudière-Appalaches	*166	(159–172)	3,220	(3,002–3,438)
2413	Laval	*157	(150–164)	*2,720	(2,526–2,915)
2414	Lanaudière	*194	(187–201)	3,262	(3,072–3,451)
2415	Laurentides	*193	(187–200)	3,470	(3,282–3,658)
2416	Montérégie	*175	(171–179)	*3,027	(2,922–3,132)
<b>Ontario</b>		<b>*173</b>	<b>(172–174)</b>	<b>*3,084</b>	<b>(3,048–3,120)</b>
3501	Erie St. Clair	*204	(198–210)	3,435	(3,273–3,597)
3502	South West	*189	(184–194)	3,428	(3,285–3,572)
3503	Waterloo Wellington	*164	(158–169)	*2,773	(2,636–2,909)
3504	Hamilton Niagara Haldimand Brant	*198	(194–202)	3,464	(3,348–3,579)
3505	Central West	*149	(144–154)	*2,989	(2,841–3,137)
3506	Mississauga Halton	*131	(127–135)	*2,282	(2,179–2,384)
3507	Toronto Central	*169	(165–173)	*3,068	(2,953–3,183)
3508	Central	*124	(121–127)	*2,277	(2,187–2,366)
3509	Central East	*166	(163–170)	*3,040	(2,933–3,147)
3510	South East	*208	(201–215)	*3,718	(3,505–3,931)
3511	Champlain	*166	(162–170)	*2,830	(2,719–2,940)
3512	North Simcoe Muskoka	*193	(186–200)	3,416	(3,212–3,619)
3513	North East	*243	(236–250)	*4,456	(4,239–4,673)
3514	North West	*252	(241–264)	*5,569	(5,183–5,955)
<b>Manitoba</b>		<b>*224</b>	<b>(220–229)</b>	<b>*4,502</b>	<b>(4,357–4,647)</b>
4610	Winnipeg	*208	(202–215)	*3,954	(3,775–4,133)
4615	Brandon	*216	(192–239)	3,607	(3,031–4,183)
4625	South Eastman	*153	(134–171)	*2,762	(2,289–3,234)
4630	Interlake	*257	(237–277)	*5,046	(4,402–5,690)
4640	Central	*208	(191–224)	*4,178	(3,710–4,646)
4645	Assiniboine	*234	(213–254)	*4,957	(4,269–5,645)

Map Code	Health Region	Potentially Avoidable Mortality 2007 to 2009			
		Age-Standardized Mortality Rate per 100,000	95% CI	Age-Standardized PYLL† per 100,000	95% CI
<b>Saskatchewan</b>		<b>*219</b>	<b>(213–224)</b>	<b>*4,521</b>	<b>(4,363–4,680)</b>
4701	Sun Country	187	(166–208)	3,668	(3,038–4,298)
4702	Five Hills	*206	(185–228)	*4,076	(3,408–4,744)
4704	Regina	*209	(199–220)	*4,116	(3,817–4,416)
4705	Sunrise	*219	(198–241)	*4,434	(3,707–5,161)
4706	Saskatoon	*197	(188–206)	*3,803	(3,546–4,060)
4709	Prince Albert	*267	(245–288)	*6,047	(5,344–6,750)
4710	Prairie North	*268	(245–291)	*6,204	(5,493–6,914)
<b>Alberta</b>		<b>*193</b>	<b>(190–195)</b>	<b>*3,756</b>	<b>(3,683–3,828)</b>
4831	South Zone	*209	(199–219)	*4,344	(4,053–4,635)
4832	Calgary Zone	*163	(159–168)	*3,093	(2,984–3,201)
4833	Central Zone	*226	(218–234)	*4,500	(4,268–4,733)
4834	Edmonton Zone	*192	(187–197)	*3,698	(3,570–3,826)
4835	North Zone	*242	(233–251)	*4,924	(4,683–5,165)
<b>British Columbia</b>		<b>*169</b>	<b>(167–171)</b>	<b>*3,127</b>	<b>(3,065–3,188)</b>
5911	East Kootenay	*209	(191–227)	*4,146	(3,574–4,717)
5912	Kootenay Boundary	199	(182–216)	3,517	(3,014–4,020)
5913	Okanagan	*175	(168–183)	3,315	(3,072–3,558)
5914	Thompson/Cariboo/Shuswap	*218	(207–228)	*4,374	(4,032–4,717)
5921	Fraser East	*203	(193–212)	*3,651	(3,395–3,908)
5922	Fraser North	*150	(144–155)	*2,500	(2,357–2,643)
5923	Fraser South	*157	(152–162)	*2,929	(2,781–3,077)
5931	Richmond	*107	(99–116)	*1,840	(1,606–2,075)
5932	Vancouver	*154	(148–159)	*2,864	(2,709–3,019)
5933	North Shore	*134	(126–142)	*2,476	(2,242–2,710)
5941	South Vancouver Island	*157	(150–164)	*3,033	(2,811–3,255)
5942	Central Vancouver Island	*192	(183–201)	*3,920	(3,603–4,238)
5943	North Vancouver Island	188	(174–201)	3,593	(3,157–4,030)
5951	Northwest	*267	(245–288)	*5,106	(4,495–5,718)
5952	Northern Interior	*230	(216–245)	*4,129	(3,748–4,509)
5953	Northeast	*254	(231–278)	*4,884	(4,278–5,490)
<b>Yukon</b>		<b>*254</b>	<b>(221–288)</b>	<b>*5,043</b>	<b>(4,108–5,978)</b>
<b>Northwest Territories</b>		<b>*263</b>	<b>(229–298)</b>	<b>*5,723</b>	<b>(4,894–6,551)</b>
<b>Nunavut</b>		<b>*447</b>	<b>(382–512)</b>	<b>*9,501</b>	<b>(8,280–10,722)</b>
<b>Canada</b>		<b>183</b>	<b>(182–183)</b>	<b>3,353</b>	<b>(3,330–3,376)</b>

† Potential years of life lost.

### Potentially avoidable mortality

Deaths before age 75 that could potentially have been avoided through all levels of prevention (primary, secondary, tertiary). Expressed as the age-standardized mortality rate and potential years of life lost (PYLL) per 100,000 population. PYLL is the number of years of potential life not lived when a person dies before age 75. Avoidable mortality refers to untimely deaths that should not occur in the presence of timely and effective health care or other public health practices, programs and policy interventions. It serves to focus attention on the portion of population health attainment that can potentially be influenced by the health system.

**Note:** Rates are based on three years of pooled data.

**Source:** Vital Statistics—Death Database, Statistics Canada.

Map Code Health Region		Avoidable Mortality From Preventable Causes 2007 to 2009			
		Age-Standardized Mortality Rate per 100,000	95% CI	Age-Standardized PYLL† per 100,000	95% CI
<b>Newfoundland and Labrador</b>		<b>*128</b>	<b>(123–134)</b>	<b>2,180</b>	<b>(2,034–2,327)</b>
1011	Eastern	*130	(123–137)	2,065	(1,886–2,243)
1012	Central	113	(102–124)	1,979	(1,643–2,315)
1013	Western	*133	(119–147)	2,400	(1,983–2,816)
<b>Prince Edward Island</b>		<b>125</b>	<b>(114–135)</b>	<b>2,079</b>	<b>(1,817–2,341)</b>
<b>Nova Scotia</b>		<b>*132</b>	<b>(128–136)</b>	<b>*2,324</b>	<b>(2,215–2,433)</b>
1211	South Shore	*140	(123–156)	*2,903	(2,351–3,454)
1212	South West Nova	*138	(122–155)	2,573	(2,075–3,071)
1223	Annapolis Valley	119	(107–132)	2,082	(1,719–2,445)
1234	Colchester East Hants	*136	(121–151)	*2,624	(2,188–3,060)
1258	Cape Breton	*161	(149–173)	*3,029	(2,658–3,400)
1269	Capital	119	(113–125)	*1,942	(1,804–2,081)
<b>New Brunswick</b>		<b>*129</b>	<b>(125–134)</b>	<b>*2,349</b>	<b>(2,223–2,475)</b>
1301	Zone 1 (Moncton area)	118	(109–126)	2,298	(2,055–2,541)
1302	Zone 2 (Saint John area)	*136	(126–145)	2,277	(2,026–2,529)
1303	Zone 3 (Fredericton area)	*132	(122–142)	2,325	(2,071–2,578)
1306	Zone 6 (Bathurst area)	110	(98–123)	1,994	(1,623–2,364)
<b>Quebec</b>		<b>*121</b>	<b>(119–122)</b>	<b>2,062</b>	<b>(2,028–2,097)</b>
2401	Bas-Saint-Laurent	126	(117–134)	*2,458	(2,190–2,726)
2402	Saguenay–Lac-Saint-Jean	*131	(123–138)	*2,389	(2,173–2,606)
2403	Capitale-Nationale	*114	(109–118)	*1,918	(1,806–2,030)
2404	Mauricie et Centre-du-Québec	*135	(130–141)	*2,519	(2,356–2,682)
2405	Estrie	113	(107–120)	2,092	(1,907–2,278)
2406	Montréal	*114	(111–117)	*1,805	(1,746–1,865)
2407	Outaouais	*142	(135–149)	*2,290	(2,126–2,455)
2408	Abitibi-Témiscamingue	*153	(142–165)	*2,842	(2,524–3,159)
2409	Côte-Nord	*152	(138–166)	*2,885	(2,487–3,283)
2411	Gaspésie–Îles-de-la-Madeleine	*157	(143–171)	*2,900	(2,472–3,328)
2412	Chaudière-Appalaches	113	(107–119)	2,085	(1,925–2,246)
2413	Laval	*100	(94–105)	*1,582	(1,452–1,712)
2414	Lanaudière	*131	(125–137)	2,190	(2,041–2,340)
2415	Laurentides	*129	(124–135)	2,222	(2,083–2,361)
2416	Montérégie	*114	(111–117)	*1,898	(1,822–1,975)
<b>Ontario</b>		<b>*108</b>	<b>(107–109)</b>	<b>*1,804</b>	<b>(1,779–1,828)</b>
3501	Erie St. Clair	*131	(126–136)	2,164	(2,045–2,282)
3502	South West	120	(116–124)	2,071	(1,971–2,171)
3503	Waterloo Wellington	*102	(98–107)	*1,680	(1,582–1,778)
3504	Hamilton Niagara Haldimand Brant	*126	(123–130)	2,122	(2,041–2,203)
3505	Central West	*87	(83–91)	*1,545	(1,453–1,637)
3506	Mississauga Halton	*79	(76–82)	*1,241	(1,175–1,308)
3507	Toronto Central	*104	(101–108)	*1,795	(1,717–1,872)
3508	Central	*72	(70–75)	*1,189	(1,134–1,244)
3509	Central East	*102	(99–105)	*1,673	(1,605–1,741)
3510	South East	*135	(129–140)	*2,335	(2,182–2,488)
3511	Champlain	*103	(100–106)	*1,653	(1,579–1,727)
3512	North Simcoe Muskoka	*124	(119–130)	2,152	(2,002–2,302)
3513	North East	*157	(151–162)	*2,756	(2,603–2,909)
3514	North West	*167	(157–176)	*3,756	(3,454–4,057)
<b>Manitoba</b>		<b>*142</b>	<b>(138–146)</b>	<b>*2,820</b>	<b>(2,711–2,929)</b>
4610	Winnipeg	*128	(124–133)	*2,329	(2,206–2,452)
4615	Brandon	*137	(118–155)	2,254	(1,814–2,694)
4625	South Eastman	*96	(82–111)	*1,536	(1,209–1,863)
4630	Interlake	*167	(151–184)	*3,384	(2,859–3,910)
4640	Central	129	(116–141)	2,422	(2,079–2,765)
4645	Assiniboine	*147	(130–163)	*3,113	(2,587–3,639)

Map Code	Health Region	Avoidable Mortality From Preventable Causes 2007 to 2009			
		Age-Standardized Mortality Rate per 100,000	95% CI	Age-Standardized PYLL† per 100,000	95% CI
<b>Saskatchewan</b>		<b>*142</b>	<b>(138–147)</b>	<b>*3,042</b>	<b>(2,914–3,170)</b>
4701	Sun Country	130	(112–148)	*2,740	(2,187–3,294)
4702	Five Hills	133	(115–151)	*2,878	(2,297–3,458)
4704	Regina	*134	(126–143)	*2,691	(2,458–2,924)
4705	Sunrise	*136	(119–154)	*2,954	(2,356–3,552)
4706	Saskatoon	*126	(118–133)	*2,426	(2,231–2,621)
4709	Prince Albert	*176	(158–194)	*4,085	(3,508–4,663)
4710	Prairie North	*178	(159–196)	*4,511	(3,894–5,128)
<b>Alberta</b>		<b>*128</b>	<b>(126–130)</b>	<b>*2,468</b>	<b>(2,412–2,524)</b>
4831	South Zone	*141	(133–150)	*2,936	(2,703–3,168)
4832	Calgary Zone	*107	(104–111)	*1,982	(1,901–2,063)
4833	Central Zone	*149	(142–156)	*3,029	(2,843–3,215)
4834	Edmonton Zone	*127	(123–131)	*2,358	(2,264–2,452)
4835	North Zone	*165	(158–173)	*3,476	(3,276–3,677)
<b>British Columbia</b>		<b>*113</b>	<b>(111–115)</b>	<b>2,098</b>	<b>(2,051–2,145)</b>
5911	East Kootenay	*149	(134–164)	*3,055	(2,575–3,534)
5912	Kootenay Boundary	*141	(126–155)	*2,689	(2,239–3,138)
5913	Okanagan	122	(115–128)	*2,321	(2,129–2,512)
5914	Thompson/Cariboo/Shuswap	*156	(147–165)	*3,258	(2,971–3,545)
5921	Fraser East	*136	(129–144)	*2,519	(2,311–2,728)
5922	Fraser North	*98	(94–103)	*1,605	(1,501–1,709)
5923	Fraser South	*100	(96–104)	*1,853	(1,742–1,964)
5931	Richmond	*69	(62–76)	*1,136	(972–1,299)
5932	Vancouver	*100	(96–105)	*1,819	(1,711–1,927)
5933	North Shore	*87	(81–93)	*1,665	(1,485–1,846)
5941	South Vancouver Island	*103	(98–109)	2,021	(1,857–2,184)
5942	Central Vancouver Island	*131	(123–139)	*2,730	(2,475–2,985)
5943	North Vancouver Island	*130	(119–141)	2,416	(2,087–2,746)
5951	Northwest	*191	(172–209)	*3,846	(3,307–4,385)
5952	Northern Interior	*157	(145–169)	*2,891	(2,581–3,200)
5953	Northeast	*169	(150–189)	*3,250	(2,778–3,721)
<b>Yukon</b>		<b>*174</b>	<b>(146–201)</b>	<b>*3,562</b>	<b>(2,814–4,310)</b>
<b>Northwest Territories</b>		<b>*167</b>	<b>(140–194)</b>	<b>*3,635</b>	<b>(3,009–4,260)</b>
<b>Nunavut</b>		<b>*318</b>	<b>(263–372)</b>	<b>*6,790</b>	<b>(5,756–7,825)</b>
<b>Canada</b>		<b>118</b>	<b>(117–119)</b>	<b>2,097</b>	<b>(2,080–2,114)</b>

† Potential years of life lost.

### Avoidable mortality from preventable causes

Mortality from preventable causes is a subset of potentially avoidable mortality, representing deaths before age 75 that could potentially have been prevented through primary prevention efforts. Expressed as the age-standardized mortality rate and potential years of life lost (PYLL) per 100,000 population. PYLL is the number of years of potential life not lived when a person dies before age 75. This indicator informs efforts to reduce the number of initial cases (that is, incidence reduction); through these efforts, deaths can be prevented by avoiding new cases altogether.

**Note:** Rates are based on three years of pooled data.

**Source:** Vital Statistics—Death Database, Statistics Canada.



		Avoidable Mortality From Treatable Causes 2007 to 2009			
Map Code	Health Region	Age-Standardized Mortality Rate per 100,000	95% CI	Age-Standardized PYLL† per 100,000	95% CI
<b>Newfoundland and Labrador</b>		<b>*83</b>	<b>(79–87)</b>	<b>*1,610</b>	<b>(1,451–1,770)</b>
1011	Eastern	*86	(81–92)	*1,742	(1,524–1,961)
1012	Central	*76	(67–85)	1,380	(1,038–1,722)
1013	Western	*78	(68–89)	1,452	(1,059–1,845)
<b>Prince Edward Island</b>		<b>*72</b>	<b>(65–80)</b>	<b>1,294</b>	<b>(1,050–1,538)</b>
<b>Nova Scotia</b>		<b>*70</b>	<b>(67–73)</b>	<b>1,193</b>	<b>(1,105–1,282)</b>
1211	South Shore	56	(46–66)	1,056	(659–1,453)
1212	South West Nova	68	(57–79)	1,050	(726–1,374)
1223	Annapolis Valley	66	(57–75)	1,087	(783–1,391)
1234	Colchester East Hants	68	(58–79)	1,220	(903–1,537)
1258	Cape Breton	*94	(85–103)	*1,651	(1,358–1,943)
1269	Capital	66	(62–71)	1,136	(1,011–1,260)
<b>New Brunswick</b>		<b>*61</b>	<b>(58–65)</b>	<b>1,171</b>	<b>(1,063–1,279)</b>
1301	Zone 1 (Moncton area)	*56	(51–62)	1,158	(947–1,368)
1302	Zone 2 (Saint John area)	70	(63–77)	1,331	(1,096–1,565)
1303	Zone 3 (Fredericton area)	62	(55–68)	1,167	(953–1,381)
1306	Zone 6 (Bathurst area)	*53	(45–61)	*800	(536–1,064)
<b>Quebec</b>		<b>*62</b>	<b>(61–63)</b>	<b>*1,196</b>	<b>(1,164–1,229)</b>
2401	Bas-Saint-Laurent	62	(56–68)	1,285	(1,057–1,513)
2402	Saguenay–Lac-Saint-Jean	63	(58–68)	1,308	(1,115–1,500)
2403	Capitale-Nationale	*56	(53–59)	*1,072	(964–1,180)
2404	Mauricie et Centre-du-Québec	62	(58–66)	1,339	(1,188–1,490)
2405	Estrie	*50	(46–55)	*977	(827–1,127)
2406	Montréal	*67	(65–69)	1,258	(1,192–1,324)
2407	Outaouais	*72	(67–77)	*1,118	(989–1,247)
2408	Abitibi-Témiscamingue	70	(62–77)	1,318	(1,081–1,554)
2409	Côte-Nord	*78	(68–88)	*1,773	(1,392–2,153)
2411	Gaspésie–Îles-de-la-Madeleine	*75	(65–84)	1,617	(1,198–2,037)
2412	Chaudière-Appalaches	*53	(49–57)	1,135	(987–1,282)
2413	Laval	*57	(53–61)	1,138	(993–1,283)
2414	Lanaudière	63	(59–67)	*1,071	(954–1,189)
2415	Laurentides	64	(60–68)	1,248	(1,121–1,374)
2416	Montérégie	*61	(59–63)	*1,129	(1,057–1,201)
<b>Ontario</b>		<b>65</b>	<b>(64–66)</b>	<b>1,281</b>	<b>(1,254–1,307)</b>
3501	Erie St. Clair	*73	(69–76)	1,271	(1,161–1,381)
3502	South West	*69	(66–72)	1,357	(1,255–1,460)
3503	Waterloo Wellington	61	(58–65)	*1,093	(997–1,188)
3504	Hamilton Niagara Haldimand Brant	*72	(69–74)	*1,341	(1,259–1,424)
3505	Central West	62	(59–65)	*1,444	(1,328–1,560)
3506	Mississauga Halton	*52	(50–55)	*1,040	(962–1,119)
3507	Toronto Central	65	(62–68)	1,274	(1,188–1,359)
3508	Central	*52	(50–54)	*1,088	(1,017–1,159)
3509	Central East	64	(62–66)	*1,367	(1,284–1,450)
3510	South East	*73	(69–77)	1,383	(1,235–1,531)
3511	Champlain	63	(61–66)	1,177	(1,094–1,259)
3512	North Simcoe Muskoka	*69	(65–73)	1,264	(1,126–1,402)
3513	North East	*86	(82–90)	*1,700	(1,546–1,854)
3514	North West	*86	(79–92)	*1,813	(1,572–2,055)
<b>Manitoba</b>		<b>*83</b>	<b>(80–86)</b>	<b>*1,682</b>	<b>(1,587–1,777)</b>
4610	Winnipeg	*80	(76–84)	*1,624	(1,494–1,755)
4615	Brandon	*79	(65–93)	1,353	(981–1,725)
4625	South Eastman	57	(46–68)	1,226	(885–1,566)
4630	Interlake	*90	(79–101)	*1,661	(1,289–2,033)
4640	Central	*79	(69–89)	*1,756	(1,438–2,074)
4645	Assiniboine	*87	(75–99)	*1,844	(1,400–2,288)

Map Code Health Region		Avoidable Mortality From Treatable Causes 2007 to 2009			
		Age-Standardized Mortality Rate per 100,000	95% CI	Age-Standardized PYLL† per 100,000	95% CI
<b>Saskatchewan</b>		<b>*76</b>	<b>(73–79)</b>	<b>*1,479</b>	<b>(1,385–1,574)</b>
4701	Sun Country	57	(46–68)	*928	(626–1,229)
4702	Five Hills	74	(61–86)	1,198	(867–1,530)
4704	Regina	*75	(69–81)	1,426	(1,237–1,614)
4705	Sunrise	*83	(70–96)	1,480	(1,066–1,894)
4706	Saskatoon	*71	(66–77)	1,377	(1,209–1,545)
4709	Prince Albert	*91	(79–103)	*1,961	(1,560–2,363)
4710	Prairie North	*90	(77–103)	*1,692	(1,338–2,046)
<b>Alberta</b>		<b>65</b>	<b>(63–66)</b>	<b>1,288</b>	<b>(1,241–1,334)</b>
4831	South Zone	67	(62–73)	1,409	(1,233–1,584)
4832	Calgary Zone	*56	(54–59)	*1,111	(1,038–1,183)
4833	Central Zone	*77	(72–81)	*1,471	(1,331–1,612)
4834	Edmonton Zone	65	(62–68)	1,341	(1,254–1,428)
4835	North Zone	*77	(71–82)	*1,447	(1,313–1,581)
<b>British Columbia</b>		<b>*56</b>	<b>(55–57)</b>	<b>*1,029</b>	<b>(990–1,069)</b>
5911	East Kootenay	60	(51–69)	1,091	(780–1,402)
5912	Kootenay Boundary	58	(50–67)	*828	(602–1,054)
5913	Okanagan	*54	(49–58)	*994	(845–1,143)
5914	Thompson/Cariboo/Shuswap	62	(56–67)	1,116	(929–1,304)
5921	Fraser East	66	(61–72)	1,132	(982–1,282)
5922	Fraser North	*51	(48–55)	*895	(797–993)
5923	Fraser South	*57	(54–60)	*1,076	(978–1,173)
5931	Richmond	*38	(33–44)	*705	(537–872)
5932	Vancouver	*53	(50–57)	*1,045	(934–1,156)
5933	North Shore	*47	(43–52)	*811	(662–960)
5941	South Vancouver Island	*54	(49–58)	*1,012	(863–1,162)
5942	Central Vancouver Island	61	(56–66)	1,190	(1,000–1,380)
5943	North Vancouver Island	58	(50–65)	1,177	(890–1,464)
5951	Northwest	*76	(65–87)	1,260	(972–1,548)
5952	Northern Interior	*73	(65–81)	1,238	(1,016–1,460)
5953	Northeast	*85	(71–99)	1,634	(1,253–2,016)
<b>Yukon</b>		<b>81</b>	<b>(62–100)</b>	<b>1,481</b>	<b>(920–2,042)</b>
<b>Northwest Territories</b>		<b>*96</b>	<b>(75–118)</b>	<b>*2,088</b>	<b>(1,545–2,631)</b>
<b>Nunavut</b>		<b>*129</b>	<b>(93–165)</b>	<b>*2,711</b>	<b>(2,062–3,361)</b>
<b>Canada</b>		<b>65</b>	<b>(64–65)</b>	<b>1,257</b>	<b>(1,241–1,273)</b>

† Potential years of life lost.

### Avoidable mortality from treatable causes

Mortality from treatable causes is a subset of potentially avoidable mortality, representing deaths before age 75 that could potentially have been avoided through secondary or tertiary prevention. Expressed as the age-standardized mortality rate and potential years of life lost (PYLL) per 100,000 population. PYLL is the number of years of potential life not lived when a person dies before age 75. The indicator informs efforts aimed at reducing the number of people who die once they have the condition, or case-fatality reduction.

**Note:** Rates are based on three years of pooled data.

**Source:** Vital Statistics—Death Database, Statistics Canada.



Map Code	Health Region	Hospitalized Hip Fracture Event		Wait Time for Hip Fracture Surgery (Proportion With Surgery Within 48 Hours)	
		2011–2012		2011–2012	
		Age-Standardized Rate per 100,000	95% CI	Risk-Adjusted Rate (%)	95% CI
<b>Newfoundland and Labrador</b>		<b>* 533</b>	<b>(484–582)</b>	<b>* 85.1</b>	<b>(81.3–88.8)</b>
1011	Eastern	* 543	(476–610)	85.9	(81.0–90.8)
1012	Central	461	(365–556)	87.8	(79.4–96.3)
1013	Western	* 594	(472–717)	80.9	(72.3–89.4)
<b>Prince Edward Island</b>		<b>478</b>	<b>(395–561)</b>	<b>81.1</b>	<b>(72.9–89.2)</b>
<b>Nova Scotia</b>		<b>458</b>	<b>(427–489)</b>	<b>79.6</b>	<b>(76.9–82.3)</b>
1211	South Shore	531	(412–649)	89.3	(80.4–98.3)
1212	South West Nova	402	(295–509)	*	**
1223	Annapolis Valley	452	(355–549)	* 91.7	(83.3–100.0)
1234	Colchester East Hants	473	(361–586)	72.4	(63.4–81.4)
1258	Cape Breton	480	(398–562)	* 89.8	(82.6–97.0)
1269	Capital	426	(376–477)	* 70.4	(65.7–75.0)
<b>New Brunswick</b>		<b>462</b>	<b>(427–498)</b>	<b>* 85.2</b>	<b>(82.1–88.2)</b>
1301	Zone 1 (Moncton area)	468	(400–535)	* 90.8	(85.4–96.2)
1302	Zone 2 (Saint John area)	402	(332–472)	82.9	(75.2–90.6)
1303	Zone 3 (Fredericton area)	483	(403–562)	76.1	(69.7–82.5)
1306	Zone 6 (Bathurst area)	414	(313–514)	89.2	(79.5–98.9)
<b>Quebec</b>		<b>* 403</b>	<b>(393–413)</b>	<b>..</b>	<b>.. ..</b>
2401	Bas-Saint-Laurent	* 373	(317–429)	..	.. ..
2402	Saguenay–Lac-Saint-Jean	* 363	(311–415)	..	.. ..
2403	Capitale-Nationale	* 384	(352–417)	..	.. ..
2404	Mauricie et Centre-du-Québec	* 368	(332–404)	..	.. ..
2405	Estrie	* 368	(320–417)	..	.. ..
2406	Montréal	440	(418–462)	..	.. ..
2407	Outaouais	432	(375–490)	..	.. ..
2408	Abitibi-Témiscamingue	369	(292–447)	..	.. ..
2409	Côte-Nord	* 272	(186–359)	..	.. ..
2411	Gaspésie–Îles-de-la-Madeleine	* 342	(265–419)	..	.. ..
2412	Chaudière-Appalaches	* 389	(344–433)	..	.. ..
2413	Laval	472	(422–523)	..	.. ..
2414	Lanaudière	397	(350–444)	..	.. ..
2415	Laurentides	399	(357–442)	..	.. ..
2416	Montréal	* 400	(374–425)	..	.. ..
<b>Ontario</b>		<b>* 424</b>	<b>(415–432)</b>	<b>81.3</b>	<b>(80.5–82.1)</b>
3501	Erie St. Clair	* 479	(440–519)	* 76.0	(72.6–79.5)
3502	South West	446	(415–476)	80.9	(78.2–83.6)
3503	Waterloo Wellington	463	(423–503)	* 93.4	(90.1–96.8)
3504	Hamilton Niagara Haldimand Brant	439	(414–464)	82.5	(80.2–84.8)
3505	Central West	* 339	(304–374)	* 69.6	(65.3–74.0)
3506	Mississauga Halton	* 361	(331–392)	* 75.7	(72.2–79.1)
3507	Toronto Central	* 391	(364–418)	79.8	(77.1–82.6)
3508	Central	* 369	(346–392)	83.0	(80.5–85.5)
3509	Central East	* 389	(365–412)	* 75.8	(73.4–78.2)
3510	South East	* 487	(444–529)	* 87.6	(84.1–91.1)
3511	Champlain	438	(409–466)	* 87.8	(85.2–90.4)
3512	North Simcoe Muskoka	468	(422–514)	* 67.4	(63.0–71.7)
3513	North East	* 488	(448–529)	83.4	(79.9–86.8)
3514	North West	480	(413–547)	* 90.3	(84.6–96.0)
<b>Manitoba</b>		<b>* 524</b>	<b>(493–555)</b>	<b>* 85.6</b>	<b>(83.3–87.9)</b>
4610	Winnipeg	* 541	(499–583)	* 84.7	(81.8–87.7)
4615	Brandon	403	(278–528)	*	**
4625	South Eastman	483	(338–628)	*	**
4630	Interlake	* 561	(442–681)	* 92.5	(83.9–100.0)
4640	Central	486	(388–583)	78.0	(70.0–85.9)
4645	Assiniboine	* 562	(449–675)	* 91.6	(83.9–99.2)

Map Code	Health Region	Hospitalized Hip Fracture Event 2011–2012		Wait Time for Hip Fracture Surgery (Proportion With Surgery Within 48 Hours) 2011–2012	
		Age-Standardized Rate per 100,000	95% CI	Risk-Adjusted Rate (%)	95% CI
<b>Saskatchewan</b>		<b>*521</b>	<b>(488–554)</b>	<b>81.3</b>	<b>(78.8–83.7)</b>
4701	Sun Country	578	(434–722)	90.0	(81.1–98.9)
4702	Five Hills	*635	(495–775)	*56.1	(47.5–64.6)
4704	Regina	*556	(485–627)	*89.4	(84.6–94.2)
4705	Sunrise	414	(307–521)	78.6	(69.3–88.0)
4706	Saskatoon	*513	(450–577)	76.4	(71.5–81.4)
4709	Prince Albert	452	(339–565)	80.9	(71.2–90.6)
4710	Prairie North	417	(294–541)	*	**
<b>Alberta</b>		<b>453</b>	<b>(434–472)</b>	<b>82.5</b>	<b>(80.8–84.2)</b>
4831	South Zone	462	(401–523)	*87.7	(82.4–93.0)
4832	Calgary Zone	420	(389–452)	*86.3	(83.3–89.4)
4833	Central Zone	*536	(481–591)	77.9	(73.6–82.2)
4834	Edmonton Zone	423	(391–456)	79.5	(76.4–82.6)
4835	North Zone	492	(425–559)	80.1	(74.3–86.0)
<b>British Columbia</b>		<b>443</b>	<b>(429–458)</b>	<b>*77.3</b>	<b>(76.0–78.6)</b>
5911	East Kootenay	484	(373–596)	76.5	(66.7–86.3)
5912	Kootenay Boundary	*555	(441–669)	*91.5	(83.7–99.3)
5913	Okanagan	*484	(437–530)	82.1	(78.3–85.8)
5914	Thompson/Cariboo/Shuswap	482	(416–548)	83.3	(77.7–88.9)
5921	Fraser East	466	(406–526)	*71.7	(66.4–77.1)
5922	Fraser North	477	(431–524)	*65.4	(61.5–69.3)
5923	Fraser South	*348	(318–379)	*56.9	(53.2–60.6)
5931	Richmond	*329	(265–393)	79.4	(71.8–87.0)
5932	Vancouver	*386	(346–426)	79.6	(75.7–83.5)
5933	North Shore	433	(377–488)	*74.3	(69.1–79.6)
5941	South Vancouver Island	443	(397–489)	*86.6	(82.8–90.4)
5942	Central Vancouver Island	*545	(488–602)	*88.5	(84.4–92.6)
5943	North Vancouver Island	492	(401–582)	*93.1	(85.2–100.0)
5951	Northwest	498	(353–643)	*	**
5952	Northern Interior	523	(417–630)	87.4	(79.1–95.8)
5953	Northeast	556	(369–742)	*	**
<b>Yukon</b>		<b>*848</b>	<b>(447–1,249)</b>	<b>*</b>	<b>**</b>
<b>Northwest Territories</b>		<b>*1,014</b>	<b>(611–1,417)</b>	<b>*</b>	<b>**</b>
<b>Nunavut</b>		<b>*</b>	<b>**</b>	<b>*</b>	<b>**</b>
<b>Canada</b>		<b>435</b>	<b>(430–440)</b>	<b>81.1</b>	

### Hospitalized hip fracture event

Age-standardized rate of new hip fractures admitted to an acute care hospital, per 100,000 population age 65 and older. New event is defined as a first-ever hospitalization for hip fracture or a subsequent hip fracture occurring more than 28 days after the admission for the previous event in the reference period. Hip fractures represent a significant health burden for seniors and for the health system.

As well as causing disability or death, hip fracture may have a major effect on independence and quality of life. This indicator is important for planning and evaluating preventive strategies, allocating health resources and estimating costs.

**Sources:** Discharge Abstract Database, Canadian Institute for Health Information; Fichier des hospitalisations MED-ÉCHO, ministère de la Santé et des Services sociaux du Québec.

### Wait time for hip fracture surgery

Proportion with surgery within 48 hours: The risk-adjusted proportion of hip fractures that were surgically treated within 48 hours of a patient's admission to hospital, among patients age 65 and older. While some hip fracture patients need medical treatment to stabilize their condition before surgery, research suggests patients typically benefit from timely surgery in terms of reduced morbidity, mortality, pain and length of stay in hospital, as well as improved rehabilitation. This indicator is intended to provide a comparable measure of access to care across the country and to be used as a tool to identify opportunities for improvement, using a national data source.

**Note:** Rates for Quebec are not available due to differences in data collection; the Canada rate does not include Quebec.

**Source:** Discharge Abstract Database, Canadian Institute for Health Information.

Map Code	Health Region	Ambulatory Care Sensitive Conditions 2011–2012		Caesarean Section 2011–2012	
		Age-Standardized Rate per 100,000	95% CI	%	95% CI
<b>Newfoundland and Labrador</b>		<b>*423</b>	<b>(405–440)</b>	<b>30.6</b>	<b>(29.3–32.0)</b>
1011	Eastern	*374	(352–395)	30.8	(29.1–32.6)
1012	Central	*451	(407–496)	31.4	(27.8–35.1)
1013	Western	*518	(469–568)	30.0	(26.3–33.6)
<b>Prince Edward Island</b>		<b>*457</b>	<b>(421–492)</b>	<b>28.9</b>	<b>(26.5–31.3)</b>
<b>Nova Scotia</b>		<b>*316</b>	<b>(305–327)</b>	<b>26.5</b>	<b>(25.6–27.5)</b>
1211	South Shore	275	(234–316)	30.2	(25.8–34.6)
1212	South West Nova	*471	(418–525)	26.2	(22.2–30.3)
1223	Annapolis Valley	286	(251–320)	27.5	(24.4–30.7)
1234	Colchester East Hants	*410	(365–455)	26.1	(23.0–29.2)
1258	Cape Breton	*461	(424–498)	28.5	(25.8–31.3)
1269	Capital	*212	(198–226)	25.2	(23.9–26.5)
<b>New Brunswick</b>		<b>*460</b>	<b>(445–475)</b>	<b>27.3</b>	<b>(26.3–28.3)</b>
1301	Zone 1 (Moncton area)	*366	(340–392)	28.0	(26.1–30.0)
1302	Zone 2 (Saint John area)	*392	(363–420)	20.4	(18.5–22.3)
1303	Zone 3 (Fredericton area)	*491	(459–523)	29.2	(27.0–31.3)
1306	Zone 6 (Bathurst area)	*514	(466–563)	27.8	(24.0–31.6)
<b>Quebec</b>		<b>*275</b>	<b>(271–278)</b>	<b>23.6</b>	<b>(23.3–23.9)</b>
2401	Bas-Saint-Laurent	313	(289–336)	23.5	(21.5–25.4)
2402	Saguenay–Lac-Saint-Jean	*376	(353–398)	24.4	(22.7–26.0)
2403	Capitale-Nationale	*218	(208–229)	24.4	(23.4–25.4)
2404	Mauricie et Centre-du-Québec	287	(272–301)	20.6	(19.5–21.8)
2405	Estrie	*314	(296–333)	17.7	(16.3–19.0)
2406	Montréal	*238	(231–244)	25.0	(24.4–25.5)
2407	Outaouais	276	(259–292)	28.0	(26.6–29.3)
2408	Abitibi-Témiscamingue	*415	(383–447)	23.6	(21.6–25.6)
2409	Côte-Nord	*429	(390–468)	21.0	(18.5–23.5)
2411	Gaspésie–Îles-de-la-Madeleine	*547	(503–591)	29.5	(26.2–32.8)
2412	Chaudière-Appalaches	*263	(248–278)	23.8	(22.6–25.1)
2413	Laval	*201	(187–214)	24.4	(23.1–25.7)
2414	Lanaudière	297	(282–312)	19.9	(18.8–21.0)
2415	Laurentides	*274	(261–287)	21.7	(20.6–22.8)
2416	Montérégie	*275	(267–283)	23.5	(22.8–24.1)
<b>Ontario</b>		<b>*269</b>	<b>(267–272)</b>	<b>28.6</b>	<b>(28.4–28.9)</b>
3501	Erie St. Clair	303	(290–316)	26.5	(25.4–27.6)
3502	South West	288	(278–299)	23.2	(22.4–24.1)
3503	Waterloo Wellington	*250	(238–261)	26.0	(25.1–27.0)
3504	Hamilton Niagara Haldimand Brant	*303	(294–312)	28.9	(28.1–29.7)
3505	Central West	*271	(260–282)	31.7	(30.8–32.6)
3506	Mississauga Halton	*183	(175–191)	27.4	(26.6–28.2)
3507	Toronto Central	*238	(229–247)	29.1	(28.4–29.9)
3508	Central	*175	(168–181)	29.4	(28.8–30.1)
3509	Central East	*246	(238–254)	30.2	(29.5–30.9)
3510	South East	*330	(315–346)	27.8	(26.4–29.1)
3511	Champlain	*239	(230–247)	29.3	(28.5–30.0)
3512	North Simcoe Muskoka	305	(290–321)	31.6	(30.1–33.0)
3513	North East	*492	(474–509)	30.8	(29.6–32.1)
3514	North West	*516	(487–545)	24.7	(23.0–26.4)
<b>Manitoba</b>		<b>*314</b>	<b>(304–324)</b>	<b>21.4</b>	<b>(20.8–22.1)</b>
4610	Winnipeg	*205	(194–215)	21.8	(20.8–22.7)
4615	Brandon	*405	(348–461)	31.7	(28.5–34.9)
4625	South Eastman	*229	(192–266)	18.8	(16.5–21.1)
4630	Interlake	*369	(330–409)	19.7	(17.0–22.4)
4640	Central	*349	(313–386)	19.4	(17.5–21.3)
4645	Assiniboine	*558	(503–613)	26.9	(23.9–29.9)

Map Code	Health Region	Ambulatory Care Sensitive Conditions 2011–2012		Caesarean Section 2011–2012	
		Age-Standardized Rate per 100,000	95% CI	%	95% CI
<b>Saskatchewan</b>		<b>*454</b>	<b>(441–467)</b>	<b>23.1</b>	<b>(22.4–23.8)</b>
4701	Sun Country	*488	(430–547)	24.3	(21.2–27.5)
4702	Five Hills	*517	(455–579)	27.7	(24.1–31.3)
4704	Regina	*490	(463–517)	23.5	(22.1–25.0)
4705	Sunrise	*711	(640–781)	27.6	(24.0–31.2)
4706	Saskatoon	298	(279–318)	22.7	(21.4–24.0)
4709	Prince Albert	*387	(344–431)	18.3	(15.9–20.6)
4710	Prairie North	*613	(555–672)	24.2	(21.9–26.5)
<b>Alberta</b>		<b>*313</b>	<b>(307–318)</b>	<b>27.4</b>	<b>(27.0–27.8)</b>
4831	South Zone	*400	(377–423)	25.0	(23.6–26.3)
4832	Calgary Zone	*235	(227–244)	27.6	(26.9–28.2)
4833	Central Zone	*399	(380–417)	29.3	(28.1–30.5)
4834	Edmonton Zone	*259	(250–269)	27.3	(26.6–28.0)
4835	North Zone	*554	(530–577)	26.6	(25.6–27.6)
<b>British Columbia</b>		<b>*254</b>	<b>(249–258)</b>	<b>32.0</b>	<b>(31.5–32.4)</b>
5911	East Kootenay	*385	(343–428)	33.4	(30.0–36.8)
5912	Kootenay Boundary	294	(256–331)	27.7	(24.1–31.2)
5913	Okanagan	283	(265–301)	30.3	(28.6–32.0)
5914	Thompson/Cariboo/Shuswap	288	(266–310)	33.4	(31.3–35.5)
5921	Fraser East	*353	(331–375)	31.9	(30.3–33.5)
5922	Fraser North	*213	(201–225)	34.5	(33.2–35.7)
5923	Fraser South	*228	(217–238)	34.0	(33.0–35.0)
5931	Richmond	*162	(143–180)	29.4	(27.1–31.7)
5932	Vancouver	*192	(181–203)	32.0	(30.8–33.1)
5933	North Shore	*205	(189–222)	33.2	(31.2–35.1)
5941	South Vancouver Island	*191	(176–206)	31.8	(30.2–33.5)
5942	Central Vancouver Island	285	(264–305)	25.8	(23.9–27.6)
5943	North Vancouver Island	297	(267–327)	30.9	(28.0–33.7)
5951	Northwest	*526	(473–578)	24.2	(21.3–27.0)
5952	Northern Interior	*488	(452–523)	30.4	(28.1–32.7)
5953	Northeast	*507	(451–562)	29.7	(27.0–32.5)
<b>Yukon</b>		<b>*507</b>	<b>(430–583)</b>	<b>25.0</b>	<b>(20.9–29.1)</b>
<b>Northwest Territories</b>		<b>*646</b>	<b>(555–737)</b>	<b>21.9</b>	<b>(18.8–25.0)</b>
<b>Nunavut</b>		<b>*892</b>	<b>(738–1,045)</b>	<b>11.3</b>	<b>(9.0–13.5)</b>
<b>Canada</b>		<b>290</b>	<b>(289–292)</b>	<b>27.1</b>	<b>(26.9–27.2)</b>

### Ambulatory care sensitive conditions

Age-standardized acute care hospitalization rate for conditions where appropriate ambulatory care prevents or reduces the need for hospitalization, per 100,000 population younger than age 75. Hospitalizations for ambulatory care sensitive conditions are considered to be an indirect measure of access to appropriate primary health care. While not all admissions for these conditions are avoidable, appropriate ambulatory care could potentially prevent the onset of this type of illness or condition, control an acute episodic illness or condition, or manage a chronic disease or condition.

**Sources:** Discharge Abstract Database, Canadian Institute for Health Information; Fichier des hospitalisations MED-ÉCHO, ministère de la Santé et des Services sociaux du Québec.

### Caesarean section

Proportion of women delivering babies in acute care hospitals by Caesarean section. Caesarean section rates provide information on the frequency of surgical birth delivery relative to all modes of birth delivery. Since unnecessary Caesarean section delivery increases maternal morbidity/mortality and is associated with higher costs, Caesarean section rates are often used to monitor clinical practices, with an implicit assumption that lower rates indicate more appropriate, as well as more efficient, care.

**Sources:** Discharge Abstract Database, Canadian Institute for Health Information; Fichier des hospitalisations MED-ÉCHO, ministère de la Santé et des Services sociaux du Québec.

Map Code	Health Region	30-Day Acute Myocardial Infarction In-Hospital Mortality 2009–2010 to 2011–2012		30-Day Stroke In-Hospital Mortality 2009–2010 to 2011–2012	
		Risk-Adjusted Rate (%)	95% CI	Risk-Adjusted Rate (%)	95% CI
<b>Newfoundland and Labrador</b>		<b>8.1</b>	<b>(7.2–9.0)</b>	<b>*20.4</b>	<b>(18.7–22.1)</b>
1011	Eastern	8.1	(6.9–9.2)	*20.4	(18.1–22.6)
1012	Central	8.9	(7.1–10.8)	*24.9	(21.1–28.7)
1013	Western	7.2	(4.8–9.7)	17.4	(12.6–22.3)
<b>Prince Edward Island</b>		<b>6.9</b>	<b>(5.2–8.6)</b>	<b>17.8</b>	<b>(14.4–21.3)</b>
<b>Nova Scotia</b>		<b>6.9</b>	<b>(6.2–7.5)</b>	<b>*17.9</b>	<b>(16.5–19.2)</b>
1211	South Shore	5.6	(3.5–7.8)	15.2	(10.9–19.6)
1212	South West Nova	8.2	(5.9–10.5)	*22.6	(18.0–27.2)
1223	Annapolis Valley	5.9	(3.7–8.0)	15.3	(11.1–19.6)
1234	Colchester East Hants	*4.7	(2.5–6.9)	18.5	(13.8–23.2)
1258	Cape Breton	7.2	(5.6–8.8)	15.2	(11.6–18.7)
1269	Capital	6.7	(5.4–7.9)	*18.0	(15.7–20.4)
<b>New Brunswick</b>		<b>7.4</b>	<b>(6.6–8.1)</b>	<b>14.9</b>	<b>(13.5–16.4)</b>
1301	Zone 1 (Moncton area)	6.8	(5.3–8.4)	15.3	(12.6–18.1)
1302	Zone 2 (Saint John area)	7.8	(6.0–9.5)	15.3	(12.1–18.5)
1303	Zone 3 (Fredericton area)	7.3	(5.8–8.9)	16.1	(12.8–19.3)
1306	Zone 6 (Bathurst area)	*10.8	(8.2–13.4)	14.0	(9.5–18.5)
<b>Quebec</b>		..	..	..	..
2401	Bas-Saint-Laurent	..	..	..	..
2402	Saguenay–Lac-Saint-Jean	..	..	..	..
2403	Capitale-Nationale	..	..	..	..
2404	Mauricie et Centre-du-Québec	..	..	..	..
2405	Estrie	..	..	..	..
2406	Montréal	..	..	..	..
2407	Outaouais	..	..	..	..
2408	Abitibi-Témiscamingue	..	..	..	..
2409	Côte-Nord	..	..	..	..
2411	Gaspésie–Îles-de-la-Madeleine	..	..	..	..
2412	Chaudière-Appalaches	..	..	..	..
2413	Laval	..	..	..	..
2414	Lanaudière	..	..	..	..
2415	Laurentides	..	..	..	..
2416	Montérégie	..	..	..	..
<b>Ontario</b>		<b>*7.6</b>	<b>(7.4–7.8)</b>	<b>14.8</b>	<b>(14.5–15.2)</b>
3501	Erie St. Clair	8.0	(7.2–8.8)	14.6	(13.2–16.0)
3502	South West	*8.6	(7.8–9.3)	*17.5	(16.3–18.7)
3503	Waterloo Wellington	7.1	(6.2–8.0)	*13.3	(11.7–14.9)
3504	Hamilton Niagara Haldimand Brant	7.7	(7.2–8.3)	15.0	(14.0–16.0)
3505	Central West	6.9	(6.0–7.8)	13.6	(12.0–15.2)
3506	Mississauga Halton	7.2	(6.4–8.0)	15.1	(13.8–16.5)
3507	Toronto Central	7.3	(6.5–8.1)	13.9	(12.7–15.1)
3508	Central	7.8	(7.1–8.4)	*12.3	(11.2–13.3)
3509	Central East	7.2	(6.6–7.8)	14.1	(13.1–15.2)
3510	South East	*8.3	(7.4–9.3)	*18.4	(16.8–20.1)
3511	Champlain	6.9	(6.2–7.6)	14.3	(13.1–15.6)
3512	North Simcoe Muskoka	*8.6	(7.6–9.6)	14.9	(13.1–16.7)
3513	North East	*8.7	(7.9–9.5)	*18.2	(16.7–19.7)
3514	North West	*5.8	(4.6–7.0)	15.2	(12.7–17.6)
<b>Manitoba</b>		<b>6.7</b>	<b>(6.1–7.3)</b>	<b>15.6</b>	<b>(14.5–16.8)</b>
4610	Winnipeg	*6.1	(5.4–6.9)	13.5	(12.0–15.0)
4615	Brandon	7.1	(3.7–10.4)	15.3	(9.5–21.0)
4625	South Eastman	5.6	(2.4–8.8)	*20.9	(15.5–26.2)
4630	Interlake	7.9	(5.7–10.1)	17.9	(13.2–22.7)
4640	Central	8.5	(6.5–10.4)	16.9	(12.8–20.9)
4645	Assiniboine	9.2	(6.6–11.8)	*22.7	(18.1–27.2)



Map Code	Health Region	30-Day Acute Myocardial Infarction In-Hospital Mortality 2009–2010 to 2011–2012		30-Day Stroke In-Hospital Mortality 2009–2010 to 2011–2012	
		Risk-Adjusted Rate (%)	95% CI	Risk-Adjusted Rate (%)	95% CI
<b>Saskatchewan</b>		<b>7.7</b>	<b>(7.0–8.4)</b>	<b>16.2</b>	<b>(14.9–17.4)</b>
4701	Sun Country	7.4	(3.9–10.8)	*21.9	(16.2–27.5)
4702	Five Hills	8.3	(5.6–11.0)	18.6	(13.8–23.5)
4704	Regina	*9.3	(7.8–10.8)	16.7	(14.1–19.3)
4705	Sunrise	*10.2	(7.5–12.9)	*19.5	(15.2–23.9)
4706	Saskatoon	6.8	(5.4–8.1)	*12.1	(9.8–14.3)
4709	Prince Albert	7.8	(5.4–10.2)	*20.0	(15.3–24.6)
4710	Prairie North	6.3	(3.3–9.3)	16.7	(11.7–21.7)
<b>Alberta</b>		<b>*6.4</b>	<b>(5.9–6.8)</b>	<b>*13.5</b>	<b>(12.8–14.3)</b>
4831	South Zone	7.7	(6.3–9.1)	14.9	(12.3–17.4)
4832	Calgary Zone	*5.9	(5.1–6.8)	*11.0	(9.6–12.4)
4833	Central Zone	7.0	(5.8–8.1)	16.9	(14.9–18.9)
4834	Edmonton Zone	*5.9	(5.1–6.7)	*12.8	(11.5–14.1)
4835	North Zone	6.8	(5.4–8.2)	*17.8	(15.3–20.3)
<b>British Columbia</b>		<b>7.0</b>	<b>(6.6–7.4)</b>	<b>14.6</b>	<b>(14.0–15.2)</b>
5911	East Kootenay	5.7	(3.5–7.8)	*20.4	(15.9–24.9)
5912	Kootenay Boundary	6.6	(4.5–8.7)	*19.9	(16.1–23.8)
5913	Okanagan	6.4	(5.3–7.5)	13.7	(12.0–15.4)
5914	Thompson/Cariboo/Shuswap	8.6	(7.1–10.0)	14.7	(12.3–17.1)
5921	Fraser East	7.8	(6.4–9.2)	16.2	(13.9–18.5)
5922	Fraser North	7.5	(6.3–8.7)	14.6	(12.8–16.3)
5923	Fraser South	6.7	(5.7–7.7)	13.4	(11.9–15.0)
5931	Richmond	8.7	(6.6–10.8)	12.8	(9.7–15.8)
5932	Vancouver	6.5	(5.4–7.6)	*12.3	(10.7–14.0)
5933	North Shore	6.4	(5.0–7.9)	*12.0	(9.8–14.3)
5941	South Vancouver Island	6.0	(4.7–7.4)	*18.4	(16.3–20.4)
5942	Central Vancouver Island	7.4	(6.0–8.7)	14.5	(12.2–16.7)
5943	North Vancouver Island	7.3	(4.8–9.8)	*21.0	(17.5–24.4)
5951	Northwest	5.7	(2.1–9.3)	16.2	(10.7–21.8)
5952	Northern Interior	7.9	(5.5–10.2)	12.8	(8.8–16.8)
5953	Northeast	9.3	(5.4–13.1)	15.7	(8.7–22.8)
<b>Yukon</b>		*	**	*	**
<b>Northwest Territories</b>		*	**	<b>9.4</b>	<b>(0.7–18.0)</b>
<b>Nunavut</b>		*	**	*	**
<b>Canada</b>		<b>7.3</b>		<b>15.0</b>	

### 30-day acute myocardial infarction in-hospital mortality

The risk-adjusted rate of all-cause in-hospital death occurring within 30 days of first admission to an acute care hospital with a diagnosis of acute myocardial infarction (AMI, or heart attack). Rates are based on three years of pooled data.

**Note:** Rates for Quebec are not available due to differences in data collection; the Canada rate does not include Quebec.

**Source:** Discharge Abstract Database, Canadian Institute for Health Information.

### 30-day stroke in-hospital mortality

The risk-adjusted rate of all-cause in-hospital death occurring within 30 days of first admission to an acute care hospital with a diagnosis of stroke. Rates are based on three years of pooled data.

**Note:** Rates for Quebec are not available due to differences in data collection; the Canada rate does not include Quebec.

**Source:** Discharge Abstract Database, Canadian Institute for Health Information.

Map Code	Health Region	30-Day Acute Myocardial Infarction Readmission 2011–2012		30-Day Medical Readmission 2011–2012	
		Risk-Adjusted Rate (%)	95% CI	Risk-Adjusted Rate (%)	95% CI
<b>Newfoundland and Labrador</b>		<b>11.6</b>	<b>(9.7–13.5)</b>	<b>*12.7</b>	<b>(12.3–13.2)</b>
1011	Eastern	11.0	(8.6–13.4)	*12.4	(11.7–13.0)
1012	Central	13.6	(9.5–17.7)	13.7	(12.6–14.7)
1013	Western	9.7	(4.8–14.7)	*12.2	(11.1–13.3)
<b>Prince Edward Island</b>		<b>11.6</b>	<b>(7.9–15.4)</b>	<b>12.6</b>	<b>(11.6–13.6)</b>
<b>Nova Scotia</b>		<b>10.4</b>	<b>(8.9–11.8)</b>	<b>*12.2</b>	<b>(11.8–12.6)</b>
1211	South Shore	9.7	(5.3–14.0)	12.2	(10.6–13.7)
1212	South West Nova	16.2	(11.5–20.8)	12.3	(10.9–13.7)
1223	Annapolis Valley	10.2	(5.4–14.9)	12.5	(11.1–13.9)
1234	Colchester East Hants	*5.5	(0.4–10.7)	12.3	(10.8–13.8)
1258	Cape Breton	11.8	(8.2–15.3)	*10.7	(9.7–11.7)
1269	Capital	9.3	(6.6–12.0)	*12.5	(11.8–13.3)
<b>New Brunswick</b>		<b>*14.2</b>	<b>(12.4–16.0)</b>	<b>13.4</b>	<b>(13.0–13.8)</b>
1301	Zone 1 (Moncton area)	12.8	(9.5–16.0)	*12.3	(11.5–13.1)
1302	Zone 2 (Saint John area)	11.1	(7.3–14.9)	13.2	(12.3–14.1)
1303	Zone 3 (Fredericton area)	*16.7	(13.5–19.9)	14.0	(13.2–14.8)
1306	Zone 6 (Bathurst area)	*19.4	(14.1–24.7)	13.2	(12.1–14.4)
<b>Quebec</b>		<b>*10.3</b>	<b>(9.7–10.9)</b>	<b>*13.0</b>	<b>(12.9–13.1)</b>
2401	Bas-Saint-Laurent	11.8	(8.5–15.0)	*14.3	(13.6–15.0)
2402	Saguenay–Lac-Saint-Jean	10.6	(7.7–13.4)	12.9	(12.2–13.5)
2403	Capitale-Nationale	9.9	(7.9–11.8)	*12.3	(11.8–12.8)
2404	Mauricie et Centre-du-Québec	9.8	(7.9–11.8)	*12.2	(11.6–12.7)
2405	Estrie	10.2	(7.7–12.7)	13.9	(13.3–14.5)
2406	Montréal	10.5	(9.3–11.7)	*12.9	(12.6–13.2)
2407	Outaouais	9.3	(6.6–12.0)	*12.4	(11.6–13.2)
2408	Abitibi-Témiscamingue	12.6	(9.0–16.3)	13.7	(12.8–14.6)
2409	Côte-Nord	14.6	(9.4–19.8)	*15.4	(14.3–16.5)
2411	Gaspésie–Îles-de-la-Madeleine	13.6	(10.2–17.0)	*15.0	(14.1–15.8)
2412	Chaudière-Appalaches	9.8	(7.3–12.4)	13.1	(12.5–13.7)
2413	Laval	*7.7	(4.8–10.5)	12.7	(12.1–13.4)
2414	Lanaudière	*8.4	(6.0–10.8)	*11.8	(11.2–12.5)
2415	Laurentides	12.8	(10.4–15.2)	*12.6	(12.0–13.2)
2416	Montérégie	*9.9	(8.6–11.3)	13.2	(12.8–13.5)
<b>Ontario</b>		<b>11.9</b>	<b>(11.5–12.4)</b>	<b>13.4</b>	<b>(13.3–13.5)</b>
3501	Erie St. Clair	12.1	(10.1–14.0)	*12.4	(11.9–12.9)
3502	South West	11.4	(9.8–13.1)	13.8	(13.4–14.2)
3503	Waterloo Wellington	*8.7	(6.8–10.7)	*12.5	(12.0–13.0)
3504	Hamilton Niagara Haldimand Brant	11.7	(10.4–13.0)	13.5	(13.1–13.8)
3505	Central West	13.2	(11.2–15.3)	13.2	(12.7–13.7)
3506	Mississauga Halton	11.2	(9.2–13.2)	*12.3	(11.9–12.8)
3507	Toronto Central	*14.4	(12.4–16.5)	*14.4	(14.0–14.8)
3508	Central	12.1	(10.5–13.7)	13.2	(12.8–13.5)
3509	Central East	12.2	(10.8–13.7)	13.2	(12.8–13.6)
3510	South East	12.3	(10.1–14.5)	14.0	(13.4–14.5)
3511	Champlain	*9.2	(7.6–10.7)	13.2	(12.8–13.6)
3512	North Simcoe Muskoka	11.4	(9.1–13.7)	13.3	(12.8–13.9)
3513	North East	*15.4	(13.8–17.1)	*14.2	(13.8–14.6)
3514	North West	12.3	(9.4–15.2)	*14.7	(14.1–15.3)
<b>Manitoba</b>		<b>*9.1</b>	<b>(7.7–10.6)</b>	<b>13.6</b>	<b>(13.2–13.9)</b>
4610	Winnipeg	*7.6	(5.7–9.5)	*11.2	(10.6–11.8)
4615	Brandon	*	**	*11.3	(9.6–13.0)
4625	South Eastman	12.1	(5.6–18.5)	12.5	(10.9–14.2)
4630	Interlake	9.3	(4.3–14.3)	14.1	(12.9–15.4)
4640	Central	10.8	(6.5–15.2)	*14.9	(13.8–16.0)
4645	Assiniboine	14.7	(8.5–20.8)	*15.7	(14.6–16.8)

Map Code	Health Region	30-Day Acute Myocardial Infarction Readmission 2011–2012		30-Day Medical Readmission 2011–2012	
		Risk-Adjusted Rate (%)	95% CI	Risk-Adjusted Rate (%)	95% CI
<b>Saskatchewan</b>		<b>*13.6</b>	<b>(11.9–15.4)</b>	<b>*14.7</b>	<b>(14.4–15.1)</b>
4701	Sun Country	*	**	*14.8	(13.5–16.1)
4702	Five Hills	12.1	(6.2–18.1)	13.8	(12.4–15.1)
4704	Regina	*15.6	(11.7–19.4)	*14.8	(14.1–15.4)
4705	Sunrise	15.0	(8.8–21.3)	*17.3	(16.3–18.3)
4706	Saskatoon	11.6	(7.9–15.3)	13.7	(12.9–14.4)
4709	Prince Albert	10.5	(5.2–15.9)	12.8	(11.4–14.2)
4710	Prairie North	12.1	(5.3–18.9)	13.7	(12.5–15.0)
<b>Alberta</b>		<b>10.9</b>	<b>(9.9–11.9)</b>	<b>13.4</b>	<b>(13.2–13.6)</b>
4831	South Zone	10.1	(6.9–13.3)	*14.5	(13.8–15.2)
4832	Calgary Zone	*9.3	(7.4–11.2)	*11.9	(11.5–12.3)
4833	Central Zone	13.5	(11.1–15.9)	*14.3	(13.8–14.8)
4834	Edmonton Zone	11.3	(9.4–13.1)	*12.9	(12.5–13.3)
4835	North Zone	10.6	(7.8–13.4)	*15.0	(14.4–15.5)
<b>British Columbia</b>		<b>*12.4</b>	<b>(11.6–13.3)</b>	<b>*14.2</b>	<b>(14.0–14.4)</b>
5911	East Kootenay	10.6	(6.0–15.1)	14.5	(13.3–15.6)
5912	Kootenay Boundary	12.2	(7.8–16.6)	12.5	(11.1–13.8)
5913	Okanagan	*14.2	(11.8–16.7)	*14.2	(13.7–14.8)
5914	Thompson/Cariboo/Shuswap	12.4	(8.8–16.0)	*14.2	(13.5–15.0)
5921	Fraser East	*15.2	(12.0–18.4)	*14.4	(13.7–15.0)
5922	Fraser North	14.0	(11.3–16.7)	14.0	(13.4–14.5)
5923	Fraser South	11.3	(9.0–13.6)	13.9	(13.4–14.4)
5931	Richmond	16.5	(11.5–21.5)	14.3	(13.3–15.4)
5932	Vancouver	11.3	(8.7–13.8)	*14.8	(14.2–15.3)
5933	North Shore	13.0	(9.8–16.3)	*14.3	(13.5–15.0)
5941	South Vancouver Island	9.8	(6.6–13.0)	*12.2	(11.5–12.9)
5942	Central Vancouver Island	11.8	(8.8–14.8)	*14.7	(14.0–15.4)
5943	North Vancouver Island	*18.3	(12.3–24.3)	14.2	(13.1–15.3)
5951	Northwest	*	**	*15.3	(14.0–16.5)
5952	Northern Interior	11.3	(6.5–16.2)	*14.9	(14.0–15.9)
5953	Northeast	*	**	*15.7	(14.0–17.3)
<b>Yukon</b>		<b>*</b>	<b>**</b>	<b>*16.0</b>	<b>(14.0–18.0)</b>
<b>Northwest Territories</b>		<b>*</b>	<b>**</b>	<b>14.2</b>	<b>(12.5–16.0)</b>
<b>Nunavut</b>		<b>*</b>	<b>**</b>	<b>11.6</b>	<b>(9.1–14.0)</b>
<b>Canada</b>		<b>11.5</b>		<b>13.4</b>	

### 30-day acute myocardial infarction readmission

The risk-adjusted rate of urgent readmission following discharge for acute myocardial infarction (AMI, or heart attack). Non-elective return to an acute care hospital for any cause is counted as a readmission if it occurs within 30 days of discharge from the index episode of inpatient care. Readmission rates after AMI can be influenced by a variety of factors, including the quality of inpatient and outpatient care, the effectiveness of the care transition and coordination, and the availability of appropriate diagnostic or therapeutic technologies during the initial hospital stay. While not all urgent readmissions are avoidable, interventions during and after a hospitalization can be effective in reducing readmission rates.

**Note:** Beginning with 2011–2012 data, this indicator was revised and is not comparable with the previously reported AMI readmission rates. Rates for previous years, calculated using the new definition, are provided in the *Health Indicators* e-publication to enable comparisons over time.

**Sources:** Discharge Abstract Database and National Ambulatory Care Reporting System, Canadian Institute for Health Information; Fichier des hospitalisations MED-ÉCHO, ministère de la Santé et des Services sociaux du Québec.

### 30-day medical readmission

Risk-adjusted rate of urgent readmission for medical patients age 20 and older. Non-elective return to an acute care hospital for any cause is counted as a readmission if it occurs within 30 days of discharge from the index episode of inpatient care. Urgent readmissions to acute care facilities are increasingly being used to measure institutional or regional quality of care and care coordination. While not all urgent readmissions are avoidable, interventions during and after a hospitalization can be effective in reducing readmission rates.

**Sources:** Discharge Abstract Database and National Ambulatory Care Reporting System, Canadian Institute for Health Information; Fichier des hospitalisations MED-ÉCHO, ministère de la Santé et des Services sociaux du Québec.



Map Code	Health Region	30-Day Surgical Readmission 2011–2012		30-Day Obstetric Readmission 2011–2012	
		Risk-Adjusted Rate (%)	95% CI	Risk-Adjusted Rate (%)	95% CI
<b>Newfoundland and Labrador</b>		<b>6.5</b>	<b>(6.1–6.9)</b>	<b>+2.6</b>	<b>(2.2–3.0)</b>
1011	Eastern	6.4	(5.8–6.9)	+2.8	(2.4–3.3)
1012	Central	7.0	(6.0–7.9)	2.4	(1.5–3.4)
1013	Western	6.2	(5.1–7.2)	1.8	(0.7–2.8)
<b>Prince Edward Island</b>		<b>6.3</b>	<b>(5.5–7.1)</b>	<b>2.1</b>	<b>(1.4–2.8)</b>
<b>Nova Scotia</b>		<b>6.3</b>	<b>(5.9–6.6)</b>	<b>+2.3</b>	<b>(2.1–2.6)</b>
1211	South Shore	5.5	(4.4–6.6)	*	**
1212	South West Nova	6.6	(5.3–7.8)	*	**
1223	Annapolis Valley	6.3	(5.2–7.3)	2.1	(1.1–3.0)
1234	Colchester East Hants	6.7	(5.5–7.8)	2.8	(1.9–3.6)
1258	Cape Breton	6.6	(5.8–7.4)	1.7	(0.8–2.5)
1269	Capital	6.2	(5.7–6.7)	2.3	(2.0–2.7)
<b>New Brunswick</b>		<b>6.7</b>	<b>(6.4–7.0)</b>	<b>+2.5</b>	<b>(2.2–2.8)</b>
1301	Zone 1 (Moncton area)	6.9	(6.2–7.5)	+2.9	(2.3–3.5)
1302	Zone 2 (Saint John area)	6.4	(5.7–7.1)	1.7	(1.0–2.3)
1303	Zone 3 (Fredericton area)	7.2	(6.5–8.0)	2.5	(1.9–3.1)
1306	Zone 6 (Bathurst area)	6.2	(5.3–7.2)	1.1	(0.0–2.2)
<b>Quebec</b>		<b>+6.1</b>	<b>(6.0–6.2)</b>	<b>1.9</b>	<b>(1.8–2.0)</b>
2401	Bas-Saint-Laurent	6.2	(5.5–6.9)	2.0	(1.2–2.7)
2402	Saguenay–Lac-Saint-Jean	6.3	(5.7–6.9)	2.1	(1.6–2.7)
2403	Capitale-Nationale	+5.5	(5.1–5.9)	1.8	(1.5–2.2)
2404	Mauricie et Centre-du-Québec	6.3	(5.8–6.7)	1.7	(1.3–2.2)
2405	Estrie	6.3	(5.8–6.9)	1.4	(0.8–2.0)
2406	Montréal	+6.3	(6.0–6.5)	2.1	(1.9–2.3)
2407	Outaouais	+5.1	(4.5–5.7)	+1.2	(0.8–1.7)
2408	Abitibi-Témiscamingue	+7.6	(6.7–8.4)	1.9	(1.2–2.5)
2409	Côte-Nord	+7.7	(6.7–8.7)	2.2	(1.3–3.2)
2411	Gaspésie–Îles-de-la-Madeleine	+7.7	(6.8–8.5)	2.8	(1.8–3.7)
2412	Chaudière-Appalaches	+5.6	(5.1–6.1)	1.8	(1.3–2.3)
2413	Laval	6.3	(5.8–6.8)	2.0	(1.6–2.5)
2414	Lanaudière	+5.4	(4.9–5.9)	2.0	(1.6–2.4)
2415	Laurentides	6.3	(5.8–6.7)	2.3	(1.9–2.7)
2416	Montérégie	+6.0	(5.7–6.3)	+1.7	(1.5–1.9)
<b>Ontario</b>		<b>+6.8</b>	<b>(6.7–6.9)</b>	<b>+1.7</b>	<b>(1.7–1.8)</b>
3501	Erie St. Clair	6.4	(6.0–6.8)	+1.1	(0.8–1.4)
3502	South West	+7.3	(6.9–7.6)	+1.5	(1.2–1.8)
3503	Waterloo Wellington	+5.5	(5.0–5.9)	1.8	(1.5–2.2)
3504	Hamilton Niagara Haldimand Brant	6.7	(6.4–7.0)	+1.7	(1.4–1.9)
3505	Central West	6.6	(6.2–7.1)	2.0	(1.7–2.3)
3506	Mississauga Halton	6.9	(6.5–7.3)	+1.4	(1.1–1.7)
3507	Toronto Central	+7.0	(6.7–7.4)	2.0	(1.7–2.2)
3508	Central	+7.1	(6.8–7.4)	1.7	(1.5–2.0)
3509	Central East	+6.2	(5.9–6.5)	1.9	(1.7–2.1)
3510	South East	6.8	(6.3–7.2)	1.5	(1.1–2.0)
3511	Champlain	6.7	(6.4–7.0)	1.9	(1.7–2.1)
3512	North Simcoe Muskoka	6.6	(6.1–7.1)	1.8	(1.3–2.2)
3513	North East	+7.4	(7.0–7.8)	+1.5	(1.1–1.8)
3514	North West	+7.9	(7.3–8.5)	+2.7	(2.2–3.2)
<b>Manitoba</b>		<b>+6.0</b>	<b>(5.7–6.3)</b>	<b>+2.8</b>	<b>(2.6–3.0)</b>
4610	Winnipeg	+5.3	(4.9–5.7)	+3.2	(2.9–3.5)
4615	Brandon	5.6	(4.3–7.0)	1.5	(0.4–2.5)
4625	South Eastman	6.2	(4.9–7.5)	+3.0	(2.4–3.6)
4630	Interlake	6.2	(5.1–7.3)	2.3	(1.4–3.2)
4640	Central	+7.8	(6.8–8.8)	+2.8	(2.3–3.4)
4645	Assiniboine	7.5	(6.4–8.6)	1.2	(0.4–2.1)

Map Code	Health Region	30-Day Surgical Readmission 2011–2012		30-Day Obstetric Readmission 2011–2012	
		Risk-Adjusted Rate (%)	95% CI	Risk-Adjusted Rate (%)	95% CI
<b>Saskatchewan</b>		<b>*7.7</b>	<b>(7.4–8.0)</b>	<b>2.2</b>	<b>(2.0–2.4)</b>
4701	Sun Country	7.9	(6.6–9.2)	2.3	(1.4–3.2)
4702	Five Hills	7.0	(5.8–8.2)	1.5	(0.6–2.3)
4704	Regina	*7.9	(7.3–8.5)	1.9	(1.5–2.4)
4705	Sunrise	*8.5	(7.4–9.6)	2.1	(1.2–2.9)
4706	Saskatoon	6.5	(5.9–7.1)	2.1	(1.6–2.5)
4709	Prince Albert	7.1	(5.8–8.3)	2.5	(1.7–3.2)
4710	Prairie North	7.8	(6.6–9.0)	*2.7	(2.2–3.3)
<b>Alberta</b>		<b>*6.8</b>	<b>(6.7–7.0)</b>	<b>1.9</b>	<b>(1.8–2.0)</b>
4831	South Zone	6.8	(6.2–7.5)	*1.4	(1.0–1.8)
4832	Calgary Zone	6.3	(6.0–6.6)	2.1	(1.9–2.3)
4833	Central Zone	7.1	(6.6–7.6)	1.8	(1.5–2.1)
4834	Edmonton Zone	*7.1	(6.8–7.4)	2.0	(1.8–2.2)
4835	North Zone	*7.8	(7.3–8.3)	1.9	(1.6–2.1)
<b>British Columbia</b>		<b>*7.2</b>	<b>(7.0–7.3)</b>	<b>*2.3</b>	<b>(2.2–2.5)</b>
5911	East Kootenay	7.6	(6.5–8.7)	1.7	(0.8–2.5)
5912	Kootenay Boundary	7.1	(6.1–8.1)	*3.9	(2.9–4.9)
5913	Okanagan	*8.1	(7.6–8.6)	2.4	(2.0–2.9)
5914	Thompson/Cariboo/Shuswap	*7.5	(6.9–8.2)	*2.8	(2.2–3.4)
5921	Fraser East	*8.0	(7.4–8.6)	*2.8	(2.3–3.2)
5922	Fraser North	*7.2	(6.7–7.6)	*2.6	(2.3–2.9)
5923	Fraser South	6.9	(6.4–7.3)	1.8	(1.5–2.1)
5931	Richmond	7.5	(6.6–8.4)	2.4	(1.7–3.1)
5932	Vancouver	*7.1	(6.7–7.6)	2.2	(1.9–2.6)
5933	North Shore	*7.4	(6.7–8.0)	*1.3	(0.7–1.9)
5941	South Vancouver Island	*6.0	(5.5–6.5)	2.1	(1.7–2.6)
5942	Central Vancouver Island	7.1	(6.5–7.7)	*2.7	(2.2–3.3)
5943	North Vancouver Island	6.9	(6.0–7.8)	1.6	(0.9–2.4)
5951	Northwest	7.3	(6.1–8.5)	2.3	(1.4–3.2)
5952	Northern Interior	7.4	(6.6–8.3)	*3.0	(2.4–3.6)
5953	Northeast	5.6	(4.0–7.1)	2.4	(1.5–3.3)
<b>Yukon</b>		<b>*9.6</b>	<b>(7.7–11.6)</b>	<b>2.8</b>	<b>(1.7–3.9)</b>
<b>Northwest Territories</b>		<b>8.3</b>	<b>(6.4–10.2)</b>	<b>1.4</b>	<b>(0.4–2.4)</b>
<b>Nunavut</b>		<b>8.1</b>	<b>(5.7–10.4)</b>	<b>*0.8</b>	<b>(0.1–1.4)</b>
<b>Canada</b>		<b>6.6</b>		<b>2.0</b>	

### 30-day surgical readmission

Risk-adjusted rate of urgent readmission for surgical patients age 20 and older. Non-elective return to an acute care hospital for any cause is counted as a readmission if it occurs within 30 days of discharge from the index episode of inpatient care. Urgent readmissions to acute care facilities are increasingly being used to measure institutional or regional quality of care and care coordination. While not all urgent readmissions are avoidable, interventions during and after a hospitalization can be effective in reducing readmission rates.

**Sources:** Discharge Abstract Database and National Ambulatory Care Reporting System, Canadian Institute for Health Information; Fichier des hospitalisations MED-ÉCHO, ministère de la Santé et des Services sociaux du Québec.

### 30-day obstetric readmission

Risk-adjusted rate of urgent readmission for obstetric patients. Non-elective return to an acute care hospital for any cause is counted as a readmission if it occurs within 30 days of discharge from the index episode of inpatient care. Urgent readmissions to acute care facilities are increasingly being used to measure institutional or regional quality of care and care coordination. While not all urgent readmissions are avoidable, interventions during and after a hospitalization can be effective in reducing readmission rates.

**Sources:** Discharge Abstract Database and National Ambulatory Care Reporting System, Canadian Institute for Health Information; Fichier des hospitalisations MED-ÉCHO, ministère de la Santé et des Services sociaux du Québec.

Map Code	Health Region	30-Day Readmission— Patients Age 19 and Younger 2011–2012		30-Day Readmission for Mental Illness 2011–2012	
		Risk-Adjusted Rate (%)	95% CI	Risk-Adjusted Rate (%)	95% CI
<b>Newfoundland and Labrador</b>		<b>5.9</b>	<b>(5.1–6.8)</b>	<b>*13.3</b>	<b>(11.7–14.9)</b>
1011	Eastern	6.4	(5.3–7.5)	10.3	(7.2–13.4)
1012	Central	5.1	(2.9–7.3)	15.1	(11.6–18.6)
1013	Western	4.3	(2.1–6.6)	12.2	(9.6–14.9)
<b>Prince Edward Island</b>		<b>5.5</b>	<b>(3.9–7.1)</b>	<b>12.7</b>	<b>(10.5–14.8)</b>
<b>Nova Scotia</b>		<b>6.1</b>	<b>(5.5–6.8)</b>	<b>12.6</b>	<b>(11.4–13.8)</b>
1211	South Shore	6.4	(3.4–9.5)	10.8	(4.5–17.1)
1212	South West Nova	8.0	(5.4–10.7)	9.0	(4.8–13.2)
1223	Annapolis Valley	6.0	(3.5–8.5)	*19.6	(14.3–24.9)
1234	Colchester East Hants	6.8	(4.7–9.0)	*3.7	(1.7–7.7)
1258	Cape Breton	5.9	(4.5–7.4)	13.2	(10.7–15.8)
1269	Capital	5.8	(4.8–6.9)	13.0	(10.8–15.1)
<b>New Brunswick</b>		<b>6.1</b>	<b>(5.4–6.7)</b>	<b>12.7</b>	<b>(11.6–13.7)</b>
1301	Zone 1 (Moncton area)	6.0	(4.7–7.2)	11.4	(9.3–13.6)
1302	Zone 2 (Saint John area)	6.0	(4.6–7.4)	8.6	(5.4–11.8)
1303	Zone 3 (Fredericton area)	6.5	(5.1–7.9)	*14.6	(12.0–17.1)
1306	Zone 6 (Bathurst area)	5.9	(4.1–7.6)	10.9	(7.9–13.9)
<b>Quebec</b>		<b>*6.1</b>	<b>(5.9–6.3)</b>	<b>*11.1</b>	<b>(10.7–11.5)</b>
2401	Bas-Saint-Laurent	*4.5	(3.0–6.0)	11.3	(9.3–13.3)
2402	Saguenay–Lac-Saint-Jean	6.5	(5.6–7.4)	*13.9	(12.3–15.4)
2403	Capitale-Nationale	6.2	(5.5–6.9)	*7.9	(6.3–9.5)
2404	Mauricie et Centre-du-Québec	*5.3	(4.6–6.1)	10.9	(9.6–12.2)
2405	Estrie	6.4	(5.3–7.5)	*17.0	(15.5–18.5)
2406	Montréal	6.6	(6.1–7.1)	*8.7	(7.7–9.8)
2407	Outaouais	6.5	(5.5–7.5)	*7.8	(5.9–9.8)
2408	Abitibi-Témiscamingue	6.6	(5.5–7.7)	10.7	(8.1–13.2)
2409	Côte-Nord	6.1	(4.6–7.7)	9.2	(6.3–12.1)
2411	Gaspésie–Îles-de-la-Madeleine	5.5	(3.6–7.3)	12.9	(9.8–15.9)
2412	Chaudière-Appalaches	7.0	(6.2–7.8)	12.1	(10.8–13.5)
2413	Laval	6.8	(5.9–7.8)	9.7	(7.6–11.8)
2414	Lanaudière	*5.3	(4.5–6.1)	11.6	(10.0–13.2)
2415	Laurentides	5.8	(5.0–6.6)	*9.8	(8.2–11.5)
2416	Montérégie	*5.6	(5.1–6.1)	11.5	(10.6–12.3)
<b>Ontario</b>		<b>*6.8</b>	<b>(6.6–7.0)</b>	<b>11.7</b>	<b>(11.4–12.0)</b>
3501	Erie St. Clair	6.5	(5.7–7.2)	10.4	(8.9–11.9)
3502	South West	*7.6	(7.0–8.3)	10.5	(9.3–11.6)
3503	Waterloo Wellington	6.6	(5.9–7.3)	11.8	(10.5–13.1)
3504	Hamilton Niagara Haldimand Brant	*7.1	(6.6–7.6)	12.0	(11.1–12.9)
3505	Central West	6.1	(5.5–6.8)	11.1	(9.8–12.4)
3506	Mississauga Halton	6.1	(5.5–6.7)	11.3	(10.1–12.6)
3507	Toronto Central	7.1	(6.4–7.7)	*12.7	(11.7–13.7)
3508	Central	*7.3	(6.8–7.8)	12.3	(11.3–13.2)
3509	Central East	*7.1	(6.6–7.6)	11.3	(10.4–12.2)
3510	South East	*7.5	(6.6–8.4)	12.6	(11.0–14.1)
3511	Champlain	6.0	(5.3–6.6)	11.4	(10.4–12.5)
3512	North Simcoe Muskoka	7.4	(6.4–8.4)	10.8	(9.4–12.3)
3513	North East	6.4	(5.6–7.1)	12.5	(11.5–13.5)
3514	North West	6.4	(5.3–7.5)	10.7	(9.2–12.2)
<b>Manitoba</b>		<b>6.5</b>	<b>(5.9–7.0)</b>	<b>*8.6</b>	<b>(7.7–9.6)</b>
4610	Winnipeg	6.6	(5.8–7.5)	*8.2	(6.9–9.6)
4615	Brandon	*2.2	(1.1–4.4)	*7.3	(3.6–11.1)
4625	South Eastman	5.0	(2.7–7.3)	10.8	(4.3–17.3)
4630	Interlake	5.8	(3.5–8.2)	6.9	(2.0–11.8)
4640	Central	5.7	(3.9–7.5)	*6.5	(1.9–11.1)
4645	Assiniboine	4.9	(2.2–7.5)	12.6	(9.1–16.1)

Map Code	Health Region	30-Day Readmission— Patients Age 19 and Younger 2011–2012		30-Day Readmission for Mental Illness 2011–2012	
		Risk-Adjusted Rate (%)	95% CI	Risk-Adjusted Rate (%)	95% CI
<b>Saskatchewan</b>		<b>6.8</b>	<b>(6.3–7.2)</b>	<b>10.8</b>	<b>(9.9–11.8)</b>
4701	Sun Country	5.2	(3.1–7.3)	13.3	(8.6–18.0)
4702	Five Hills	5.4	(3.7–7.2)	8.3	(4.3–12.2)
4704	Regina	*7.7	(6.8–8.5)	11.1	(9.1–13.0)
4705	Sunrise	6.5	(4.5–8.4)	9.9	(5.8–14.0)
4706	Saskatoon	6.6	(5.4–7.7)	*8.8	(6.7–10.9)
4709	Prince Albert	*9.1	(7.6–10.7)	13.4	(10.5–16.4)
4710	Prairie North	5.3	(3.8–6.7)	12.9	(10.1–15.7)
<b>Alberta</b>		<b>6.3</b>	<b>(6.0–6.6)</b>	<b>*9.9</b>	<b>(9.3–10.5)</b>
4831	South Zone	5.7	(4.7–6.7)	10.7	(9.1–12.2)
4832	Calgary Zone	6.0	(5.5–6.6)	*9.2	(8.3–10.2)
4833	Central Zone	6.6	(5.8–7.4)	*8.0	(6.2–9.8)
4834	Edmonton Zone	6.5	(5.9–7.1)	*9.5	(8.3–10.7)
4835	North Zone	6.5	(5.8–7.2)	12.2	(10.7–13.7)
<b>British Columbia</b>		<b>6.3</b>	<b>(5.9–6.6)</b>	<b>*13.0</b>	<b>(12.6–13.5)</b>
5911	East Kootenay	6.4	(4.2–8.5)	12.8	(9.4–16.2)
5912	Kootenay Boundary	5.8	(3.5–8.2)	11.7	(8.9–14.4)
5913	Okanagan	5.8	(4.7–7.0)	*15.6	(14.2–16.9)
5914	Thompson/Cariboo/Shuswap	6.1	(4.7–7.5)	11.3	(9.4–13.3)
5921	Fraser East	6.1	(4.9–7.2)	11.5	(9.9–13.1)
5922	Fraser North	5.8	(4.8–6.8)	11.3	(10.1–12.6)
5923	Fraser South	6.5	(5.7–7.2)	*13.5	(12.4–14.7)
5931	Richmond	7.1	(5.3–8.9)	*15.4	(13.2–17.6)
5932	Vancouver	6.0	(4.9–7.0)	*14.4	(13.3–15.4)
5933	North Shore	6.1	(4.7–7.4)	*13.7	(11.9–15.4)
5941	South Vancouver Island	7.0	(5.8–8.1)	12.5	(11.0–14.1)
5942	Central Vancouver Island	6.7	(5.5–8.0)	12.1	(10.3–13.9)
5943	North Vancouver Island	5.9	(3.7–8.1)	9.9	(6.6–13.1)
5951	Northwest	5.8	(3.8–7.8)	*14.4	(12.1–16.7)
5952	Northern Interior	6.6	(5.0–8.1)	12.1	(10.1–14.1)
5953	Northeast	5.6	(3.0–8.3)	9.9	(6.9–12.8)
<b>Yukon</b>		<b>5.9</b>	<b>(2.2–9.5)</b>	<b>8.6</b>	<b>(4.3–13.0)</b>
<b>Northwest Territories</b>		<b>*9.1</b>	<b>(6.8–11.4)</b>	<b>13.2</b>	<b>(10.5–15.9)</b>
<b>Nunavut</b>		<b>*9.0</b>	<b>(7.3–10.6)</b>	<b>11.0</b>	<b>(6.3–15.8)</b>
<b>Canada</b>		<b>6.5</b>		<b>11.6</b>	

### 30-day readmission—patients age 19 and younger

Risk-adjusted rate of urgent readmission for patients age 19 and younger. Non-elective return to an acute care hospital for any cause is counted as a readmission if it occurs within 30 days of discharge from the index episode of inpatient care. Urgent readmissions to acute care facilities are increasingly being used to measure institutional or regional quality of care and care coordination. While not all urgent readmissions are avoidable, interventions during and after a hospitalization can be effective in reducing readmission rates.

**Sources:** Discharge Abstract Database and National Ambulatory Care Reporting System, Canadian Institute for Health Information; Fichier des hospitalisations MED-ÉCHO, ministère de la Santé et des Services sociaux du Québec.

### 30-day readmission for mental illness

Risk-adjusted rate of readmission following discharge for a mental illness. A case is counted as a readmission in a general hospital if it is for a selected mental illness diagnosis and if it occurs within 30 days of discharge from the index episode of inpatient care. High rates of 30-day readmission could be interpreted as being a direct outcome of poor coordination of services and/or an indirect outcome of poor continuity of services after discharge.

**Sources:** Discharge Abstract Database, National Ambulatory Care Reporting System and Ontario Mental Health Reporting System, Canadian Institute for Health Information; Fichier des hospitalisations MED-ÉCHO, ministère de la Santé et des Services sociaux du Québec.

Map Code	Health Region	Patients With Repeat Hospitalizations for Mental Illness 2010–2011		Self-Injury Hospitalization 2011–2012	
		Risk-Adjusted Rate (%)	95% CI	Age-Standardized Rate per 100,000	95% CI
<b>Newfoundland and Labrador</b>		<b>11.0</b>	<b>(9.1–12.9)</b>	<b>*86</b>	<b>(76–96)</b>
1011	Eastern	*5.7	(2.5–8.8)	67	(56–77)
1012	Central	8.0	(3.0–13.0)	91	(66–117)
1013	Western	*18.7	(15.4–22.0)	*100	(71–129)
<b>Prince Edward Island</b>		<b>12.4</b>	<b>(10.0–14.8)</b>	<b>57</b>	<b>(42–71)</b>
<b>Nova Scotia</b>		<b>9.6</b>	<b>(8.3–11.0)</b>	<b>72</b>	<b>(66–79)</b>
1211	South Shore	*	**	54	(30–79)
1212	South West Nova	10.6	(6.3–14.8)	*38	(17–59)
1223	Annapolis Valley	6.9	(0.8–13.0)	*31	(17–45)
1234	Colchester East Hants	*5.1	(2.6–10.1)	80	(54–107)
1258	Cape Breton	12.7	(9.8–15.6)	*123	(97–148)
1269	Capital	8.9	(6.7–11.1)	66	(57–75)
<b>New Brunswick</b>		<b>11.7</b>	<b>(10.5–12.9)</b>	<b>*85</b>	<b>(77–93)</b>
1301	Zone 1 (Moncton area)	10.2	(7.9–12.6)	65	(52–78)
1302	Zone 2 (Saint John area)	*7.5	(4.2–10.8)	*89	(72–106)
1303	Zone 3 (Fredericton area)	*7.8	(4.9–10.7)	60	(47–74)
1306	Zone 6 (Bathurst area)	*14.4	(11.2–17.6)	72	(49–96)
<b>Quebec</b>		<b>*10.2</b>	<b>(9.8–10.6)</b>	<b>*59</b>	<b>(57–61)</b>
2401	Bas-Saint-Laurent	*14.0	(11.8–16.2)	*125	(105–145)
2402	Saguenay–Lac-Saint-Jean	*15.1	(13.3–16.9)	*81	(68–94)
2403	Capitale-Nationale	*7.8	(6.2–9.3)	60	(54–67)
2404	Mauricie et Centre-du-Québec	*12.8	(11.4–14.2)	*85	(75–95)
2405	Estrie	10.5	(8.7–12.2)	*96	(83–110)
2406	Montréal	*8.3	(7.3–9.3)	*24	(22–27)
2407	Outaouais	*6.2	(4.2–8.1)	69	(59–79)
2408	Abitibi-Témiscamingue	9.4	(6.7–12.2)	*97	(78–116)
2409	Côte-Nord	8.9	(5.9–11.9)	*100	(75–124)
2411	Gaspésie–Îles-de-la-Madeleine	7.7	(4.5–10.9)	*130	(100–160)
2412	Chaudière-Appalaches	*12.7	(11.2–14.3)	*92	(81–103)
2413	Laval	*7.7	(5.5–9.9)	*26	(21–32)
2414	Lanaudière	11.6	(10.0–13.3)	*55	(47–63)
2415	Laurentides	9.5	(7.8–11.1)	*55	(47–62)
2416	Montérégie	10.2	(9.2–11.1)	68	(63–73)
<b>Ontario</b>		<b>10.7</b>	<b>(10.3–11.0)</b>	<b>*63</b>	<b>(62–65)</b>
3501	Erie St. Clair	*8.3	(6.7–9.9)	*57	(50–64)
3502	South West	9.7	(8.4–11.0)	71	(65–78)
3503	Waterloo Wellington	11.5	(10.0–13.1)	*75	(68–82)
3504	Hamilton Niagara Haldimand Brant	10.4	(9.3–11.4)	71	(66–76)
3505	Central West	*9.2	(7.7–10.7)	*45	(40–50)
3506	Mississauga Halton	*9.4	(8.0–10.8)	*38	(34–42)
3507	Toronto Central	*13.6	(12.5–14.7)	*45	(40–49)
3508	Central	11.4	(10.3–12.5)	*33	(30–36)
3509	Central East	10.5	(9.4–11.5)	*50	(46–54)
3510	South East	*8.1	(6.3–9.9)	*79	(69–88)
3511	Champlain	*9.0	(7.9–10.2)	*60	(55–64)
3512	North Simcoe Muskoka	9.7	(8.0–11.4)	*119	(107–131)
3513	North East	*14.5	(13.3–15.6)	*151	(139–164)
3514	North West	11.5	(9.7–13.4)	*229	(205–253)
<b>Manitoba</b>		<b>10.1</b>	<b>(9.1–11.1)</b>	<b>68</b>	<b>(62–73)</b>
4610	Winnipeg	*9.2	(7.9–10.6)	*43	(38–49)
4615	Brandon	10.4	(6.3–14.5)	84	(55–113)
4625	South Eastman	7.7	(1.8–13.7)	76	(51–100)
4630	Interlake	7.2	(2.6–11.7)	50	(30–69)
4640	Central	7.7	(3.2–12.2)	57	(40–75)
4645	Assiniboine	14.5	(10.4–18.6)	68	(41–95)

Map Code	Health Region	Patients With Repeat Hospitalizations for Mental Illness 2010–2011		Self-Injury Hospitalization 2011–2012	
		Risk-Adjusted Rate (%)	95% CI	Age-Standardized Rate per 100,000	95% CI
<b>Saskatchewan</b>		<b>10.7</b>	<b>(9.7–11.8)</b>	<b>*81</b>	<b>(74–87)</b>
4701	Sun Country	*6.0	(1.3–10.7)	78	(50–106)
4702	Five Hills	14.6	(10.4–18.8)	75	(48–101)
4704	Regina	11.6	(9.5–13.7)	*84	(71–97)
4705	Sunrise	9.9	(5.5–14.3)	77	(45–109)
4706	Saskatoon	*8.3	(6.0–10.6)	*52	(43–61)
4709	Prince Albert	11.4	(8.1–14.8)	66	(44–89)
4710	Prairie North	13.7	(10.3–17.1)	*156	(121–190)
<b>Alberta</b>		<b>*9.5</b>	<b>(8.9–10.1)</b>	<b>*59</b>	<b>(56–62)</b>
4831	South Zone	11.3	(9.5–13.0)	*97	(84–110)
4832	Calgary Zone	10.0	(8.9–11.0)	*40	(36–44)
4833	Central Zone	9.3	(7.5–11.1)	63	(54–71)
4834	Edmonton Zone	*7.5	(6.3–8.7)	*55	(50–59)
4835	North Zone	10.5	(8.9–12.1)	*99	(89–110)
<b>British Columbia</b>		<b>*13.2</b>	<b>(12.7–13.7)</b>	<b>*79</b>	<b>(76–82)</b>
5911	East Kootenay	*14.6	(11.2–18.1)	*105	(78–131)
5912	Kootenay Boundary	*17.3	(14.0–20.6)	*107	(78–136)
5913	Okanagan	*14.9	(13.3–16.5)	*126	(112–141)
5914	Thompson/Cariboo/Shuswap	10.6	(8.5–12.8)	*107	(90–123)
5921	Fraser East	*13.9	(11.9–15.8)	*118	(103–133)
5922	Fraser North	*12.7	(11.3–14.1)	61	(54–68)
5923	Fraser South	12.0	(10.6–13.4)	72	(64–79)
5931	Richmond	*19.0	(16.0–21.9)	*37	(28–46)
5932	Vancouver	11.8	(10.6–13.1)	*42	(37–48)
5933	North Shore	*15.3	(13.1–17.5)	*47	(38–57)
5941	South Vancouver Island	*13.4	(11.6–15.2)	66	(56–75)
5942	Central Vancouver Island	12.6	(10.5–14.7)	*127	(110–144)
5943	North Vancouver Island	11.2	(7.9–14.6)	*88	(67–109)
5951	Northwest	13.7	(10.5–16.8)	*244	(198–290)
5952	Northern Interior	12.8	(10.5–15.1)	*98	(79–117)
5953	Northeast	12.7	(9.3–16.1)	*93	(67–120)
<b>Yukon</b>		<b>9.8</b>	<b>(5.2–14.4)</b>	<b>*175</b>	<b>(124–227)</b>
<b>Northwest Territories</b>		<b>*16.5</b>	<b>(13.1–19.9)</b>	<b>*210</b>	<b>(162–258)</b>
<b>Nunavut</b>		<b>9.7</b>	<b>(5.0–14.4)</b>	<b>*383</b>	<b>(310–456)</b>
<b>Canada</b>		<b>10.9</b>		<b>67</b>	<b>(66–68)</b>

### Patients with repeat hospitalizations for mental illness

Risk-adjusted percentage of individuals who had three or more episodes of care for a selected mental illness over all those who had at least one episode of care for a selected mental illness in general hospitals within a given year. This indicator is considered an indirect measure of appropriateness of care. Variations in this indicator across jurisdictions may reflect differences in the services that help individuals with mental illness remain in the community for a longer period of time without the need for hospitalization.

**Sources:** Discharge Abstract Database, National Ambulatory Care Reporting System and Ontario Mental Health Reporting System, Canadian Institute for Health Information; Fichier des hospitalisations MED-ÉCHO, ministère de la Santé et des Services sociaux du Québec.

### Self-injury hospitalization

Age-standardized rate of hospitalization in a general hospital due to self-injury, per 100,000 population age 15 and older. Self-injuries may be the result of suicidal and/or self-harming behaviours. In many cases, they can be prevented by early recognition of, intervention for and treatment of mental illnesses. While some risk factors are beyond the control of the health system, high rates of self-injury hospitalization could be interpreted as being the result of the system's failure to prevent self-injuries that are severe enough to require hospitalization.

**Sources:** Discharge Abstract Database, National Ambulatory Care Reporting System and Ontario Mental Health Reporting System, Canadian Institute for Health Information; Fichier des hospitalisations MED-ÉCHO, ministère de la Santé et des Services sociaux du Québec.



Hospitalized Acute Myocardial Infarction Event, 2011–2012							
	Neighbourhood Income Quintile†					Disparity Rate Ratio 95% CI	Potential Rate Reduction (%) 95% CI
	Q1 95% CI	Q2 95% CI	Q3 95% CI	Q4 95% CI	Q5 95% CI		
N.L.	320 (286–353)	280 (248–312)	284 (253–316)	289 (256–322)	239 (208–270)	**1.34 (1.13–1.58)	**15.4% (5.1%–24.8%)
P.E.I.	277 (215–339)	315 (248–383)	290 (225–355)	374 (299–449)	297 (235–359)	0.93 (0.68–1.26)	4.3% (-15.0%–21.1%)
N.S.	295 (270–320)	275 (252–298)	247 (224–269)	230 (209–251)	227 (204–249)	**1.30 (1.14–1.48)	**11.1% (2.8%–18.8%)
N.B.	270 (243–296)	259 (233–284)	294 (266–323)	231 (207–255)	273 (244–301)	0.99 (0.86–1.14)	-2.9% (-12.8%–6.3%)
Que.	255 (247–263)	235 (228–242)	220 (213–228)	219 (211–226)	194 (187–202)	**1.31 (1.25–1.38)	**13.8% (10.8%–16.8%)
Ont.	242 (235–248)	209 (203–215)	209 (203–215)	194 (188–199)	170 (165–175)	**1.42 (1.36–1.48)	**16.9% (14.5%–19.1%)
Man.	337 (309–365)	267 (245–289)	219 (200–238)	202 (183–221)	190 (171–208)	**1.78 (1.57–2.02)	**21.6% (14.3%–28.3%)
Sask.	248 (224–273)	193 (173–213)	193 (174–211)	187 (168–207)	181 (162–200)	**1.37 (1.19–1.59)	**9.5% (0.2%–18.0%)
Alta.	224 (211–236)	202 (190–213)	216 (204–229)	214 (202–227)	185 (174–197)	**1.21 (1.11–1.31)	**11.1% (5.8%–16.1%)
B.C.	192 (182–201)	177 (168–186)	174 (165–183)	167 (158–175)	145 (137–153)	**1.32 (1.22–1.42)	**15.0% (10.7%–19.2%)
Y.T.	*	*	*	*	*	*	*
N.W.T.	*	*	*	*	*	*	*
Nun.	*	*	*	*	*	*	*
<b>Canada</b>	<b>243</b> (239–246)	<b>216</b> (212–220)	<b>212</b> (208–216)	<b>201</b> (197–204)	<b>179</b> (175–182)	<b>**1.36</b> (1.32–1.39)	<b>**15.0%</b> (13.6%–16.5%)

† Age-standardized rates per 100,000 population.  
Q1 (Quintile 1) refers to the least-affluent neighbourhoods, while Q5 (Quintile 5) refers to the most affluent.

Hospitalized Stroke Event, 2011–2012							
	Neighbourhood Income Quintile†					Disparity Rate Ratio 95% CI	Potential Rate Reduction (%) 95% CI
	Q1 95% CI	Q2 95% CI	Q3 95% CI	Q4 95% CI	Q5 95% CI		
N.L.	129 (107–151)	113 (93–132)	143 (120–167)	131 (109–154)	154 (129–179)	0.84 (0.66–1.06)	-14.9% (-32.0%–0.5%)
P.E.I.	198 (148–249)	151 (104–198)	133 (90–176)	194 (136–251)	114 (70–157)	**1.74 (1.10–2.76)	27.8% (-1.2%–49.5%)
N.S.	129 (112–145)	137 (120–154)	111 (97–126)	101 (87–114)	115 (98–131)	1.12 (0.93–1.36)	3.3% (-9.7%–15.0%)
N.B.	148 (129–167)	137 (119–155)	137 (118–157)	118 (101–135)	119 (101–138)	**1.24 (1.01–1.52)	9.6% (-3.8%–21.7%)
Que.	..	..	..	..	..	..	..
Ont.	143 (138–148)	127 (123–132)	120 (116–125)	114 (110–119)	109 (105–114)	**1.31 (1.24–1.38)	**11.0% (7.9%–14.0%)
Man.	184 (163–205)	131 (116–146)	106 (93–120)	109 (95–123)	93 (80–105)	**1.98 (1.66–2.37)	**25.1% (15.2%–34.1%)
Sask.	164 (144–184)	130 (114–146)	124 (109–140)	113 (98–128)	104 (89–118)	**1.58 (1.31–1.91)	**18.1% (6.8%–28.3%)
Alta.	132 (122–141)	135 (126–144)	136 (126–146)	124 (114–134)	124 (114–134)	1.07 (0.96–1.19)	4.8% (-2.2%–11.5%)
B.C.	134 (127–142)	131 (123–139)	125 (118–133)	120 (113–128)	108 (101–115)	**1.25 (1.14–1.36)	**12.9% (7.5%–18.0%)
Y.T.	*	*	*	*	*	*	*
N.W.T.	*	*	*	*	*	*	*
Nun.	*	*	*	*	*	*	*
<b>Canada</b>	<b>141</b> (138–145)	<b>129</b> (126–133)	<b>123</b> (120–126)	<b>116</b> (113–119)	<b>110</b> (107–113)	<b>**1.28</b> (1.24–1.33)	<b>**11.0%</b> (8.7%–13.2%)

† Age-standardized rates per 100,000 population.  
Q1 (Quintile 1) refers to the least-affluent neighbourhoods, while Q5 (Quintile 5) refers to the most affluent.

## Hospitalized Hip Fracture Event, 2011–2012

	Neighbourhood Income Quintile†					Disparity Rate Ratio 95% CI	Potential Rate Reduction (%) 95% CI
	Q1 95% CI	Q2 95% CI	Q3 95% CI	Q4 95% CI	Q5 95% CI		
N.L.	449 (352–546)	529 (420–638)	471 (375–566)	591 (473–709)	471 (365–577)	0.95 (0.70–1.30)	6.2% (-15.0%–24.1%)
P.E.I.	576 (372–779)	640 (407–873)	546 (327–765)	446 (236–655)	395 (222–569)	1.46 (0.83–2.56)	24.2% (-11.5%–50.1%)
N.S.	455 (386–524)	524 (448–601)	453 (380–526)	460 (391–528)	435 (365–505)	1.04 (0.84–1.30)	6.5% (-8.0%–19.4%)
N.B.	472 (393–551)	375 (306–444)	564 (463–665)	470 (394–546)	513 (416–611)	0.92 (0.71–1.18)	-8.3% (-28.3%–9.1%)
Que.	407 (385–429)	439 (416–462)	414 (389–438)	451 (423–478)	429 (401–457)	0.95 (0.87–1.03)	-0.6% (-6.7%–5.3%)
Ont.	465 (445–486)	421 (402–441)	448 (427–468)	435 (415–455)	423 (403–442)	**1.10 (1.03–1.17)	3.6% (-0.5%–7.5%)
Man.	606 (521–692)	513 (445–582)	565 (495–635)	441 (378–503)	544 (473–616)	1.11 (0.92–1.35)	-2.3% (-14.8%–9.2%)
Sask.	654 (563–744)	509 (438–580)	433 (370–496)	507 (435–579)	407 (339–475)	**1.61 (1.29–2.00)	**18.7% (5.3%–30.4%)
Alta.	451 (410–492)	412 (374–451)	459 (414–504)	481 (434–529)	523 (470–575)	**0.86 (0.75–0.99)	**13.1% (-23.5%–3.4%)
B.C.	544 (508–580)	439 (407–471)	490 (456–525)	426 (392–460)	385 (353–417)	**1.41 (1.27–1.57)	**16.0% (9.4%–22.1%)
Y.T.	*	*	*	*	*	*	*
N.W.T.	*	*	*	*	*	*	*
Nun.	*	*	*	*	*	*	*
<b>Canada</b>	<b>468</b> (456–481)	<b>435</b> (423–446)	<b>453</b> (440–465)	<b>447</b> (434–459)	<b>431</b> (419–444)	<b>**1.09</b> (1.04–1.13)	<b>**3.5%</b> (0.9%–6.0%)

† Age-standardized rates per 100,000 population.

Q1 (Quintile 1) refers to the least-affluent neighbourhoods, while Q5 (Quintile 5) refers to the most affluent.

## Injury Hospitalization, 2011–2012

	Neighbourhood Income Quintile†					Disparity Rate Ratio 95% CI	Potential Rate Reduction (%) 95% CI
	Q1 95% CI	Q2 95% CI	Q3 95% CI	Q4 95% CI	Q5 95% CI		
N.L.	542 (495–589)	528 (481–574)	515 (468–562)	575 (527–624)	549 (503–595)	0.99 (0.88–1.11)	-1.3% (-9.1%–6.1%)
P.E.I.	736 (636–836)	651 (554–747)	683 (585–781)	746 (641–851)	584 (487–681)	**1.26 (1.02–1.56)	**14.1% (0.5%–26.1%)
N.S.	531 (497–564)	528 (495–561)	502 (470–534)	495 (463–527)	495 (460–529)	1.07 (0.98–1.18)	3.0% (-3.1%–8.9%)
N.B.	640 (599–682)	594 (554–634)	644 (603–686)	564 (525–603)	561 (522–600)	**1.14 (1.04–1.26)	**6.7% (0.6%–12.4%)
Que.	557 (547–568)	547 (536–558)	527 (516–538)	545 (533–557)	492 (481–503)	**1.13 (1.10–1.17)	**7.8% (5.9%–9.7%)
Ont.	477 (468–485)	418 (411–426)	416 (408–423)	407 (400–415)	394 (387–402)	**1.21 (1.18–1.24)	**6.6% (5.0%–8.2%)
Man.	1,157 (1,113–1,202)	635 (604–667)	596 (566–626)	555 (525–585)	535 (504–566)	**2.16 (2.02–2.32)	**23.2% (19.1%–27.1%)
Sask.	1,205 (1,154–1,255)	804 (764–843)	713 (677–750)	752 (713–791)	729 (689–769)	**1.65 (1.54–1.77)	**13.2% (8.8%–17.5%)
Alta.	858 (837–879)	711 (692–730)	714 (694–734)	694 (675–713)	702 (682–723)	**1.22 (1.18–1.27)	**4.6% (2.1%–7.1%)
B.C.	650 (633–666)	593 (577–608)	570 (555–586)	561 (546–577)	522 (506–539)	**1.24 (1.19–1.29)	**9.8% (7.3%–12.3%)
Y.T.	*	*	*	*	*	*	*
N.W.T.	*	*	*	*	*	*	*
Nun.	*	*	*	*	*	*	*
<b>Canada</b>	<b>613</b> (608–619)	<b>531</b> (526–537)	<b>520</b> (515–525)	<b>514</b> (508–519)	<b>488</b> (483–494)	<b>**1.26</b> (1.24–1.27)	<b>**8.5%</b> (7.6%–9.4%)

† Age-standardized rates per 100,000 population.

Q1 (Quintile 1) refers to the least-affluent neighbourhoods, while Q5 (Quintile 5) refers to the most affluent.



Wait Time for Hip Fracture Surgery (Proportion With Surgery Within 48 Hours), 2011–2012							
	Neighbourhood Income Quintile <sup>‡</sup>					Disparity Rate Ratio 95% CI	Potential Rate Reduction (%) 95% CI
	Q1 95% CI	Q2 95% CI	Q3 95% CI	Q4 95% CI	Q5 95% CI		
N.L.	90.4 (81.7–99.1)	92.1 (83.9–100.3)	78.2 (70.2–86.3)	85.1 (76.6–93.6)	79.2 (70.6–87.8)	1.14 (0.99–1.32)	6.7% (-2.8%–15.5%)
P.E.I.	80.9 (67.0–94.7)	86 (67.7–104.2)	90.6 (71.4–109.7)	68.9 (45.7–92.0)	73.9 (52.7–95.1)	1.09 (0.78–1.53)	8.8% (-18.1%–30.4%)
N.S.	81.1 (75.3–86.9)	79.7 (73.8–85.6)	80.5 (74.0–87.0)	79.8 (74.1–85.5)	76.3 (70.0–82.6)	1.06 (0.95–1.18)	4.0% (-3.3%–10.9%)
N.B.	82.2 (75.6–88.7)	87.5 (80.5–94.5)	81.3 (74.1–88.5)	88.3 (82.1–94.5)	86.6 (79.0–94.1)	0.95 (0.84–1.07)	-1.6% (-10.0%–6.3%)
Que.	.. ..	.. ..	.. ..	.. ..	.. ..	.. ..	.. ..
Ont.	80.9 (79.2–82.7)	81.4 (79.6–83.3)	82.4 (80.6–84.3)	82.1 (80.2–83.9)	79.8 (77.9–81.7)	1.01 (0.98–1.05)	1.9% (-0.2%–4.0%)
Man.	87.7 (82.5–93.0)	84.8 (79.9–89.7)	87.8 (82.8–92.8)	82.8 (77.3–88.3)	84.9 (79.8–90.0)	1.03 (0.95–1.12)	0.9% (-4.6%–6.2%)
Sask.	79.8 (74.9–84.7)	82 (76.6–87.4)	83.5 (77.9–89.1)	79.4 (73.8–84.9)	82.9 (76.5–89.2)	0.96 (0.87–1.06)	-1.9% (-9.3%–5.1%)
Alta.	80 (76.4–83.6)	84 (80.2–87.8)	79.9 (75.9–84.0)	87.1 (83.1–91.1)	82.1 (78.0–86.2)	0.97 (0.91–1.04)	0.5% (-4.1%–5.0%)
B.C.	79.1 (76.5–81.7)	77 (74.1–79.8)	73.9 (71.1–76.8)	77.6 (74.4–80.7)	79 (75.6–82.4)	1.00 (0.95–1.06)	-2.1% (-6.3%–1.9%)
Y.T.	*	*	*	*	*	*	*
N.W.T.	*	*	*	*	*	*	*
Nun.	*	*	*	*	*	*	*
<b>Canada</b>	<b>80.9</b> (79.7–82.1)	<b>81.4</b> (80.2–82.7)	<b>80.7</b> (79.4–82.0)	<b>82</b> (80.7–83.3)	<b>80.4</b> (79.0–81.7)	<b>1.01</b> (0.98–1.03)	<b>0.9%</b> (-0.7%–2.4%)

‡ Risk-adjusted rates (%).

Q1 (Quintile 1) refers to the least-affluent neighbourhoods, while Q5 (Quintile 5) refers to the most affluent.

Ambulatory Care Sensitive Conditions, 2011–2012							
	Neighbourhood Income Quintile <sup>†</sup>					Disparity Rate Ratio 95% CI	Potential Rate Reduction (%) 95% CI
	Q1 95% CI	Q2 95% CI	Q3 95% CI	Q4 95% CI	Q5 95% CI		
N.L.	506 (461–551)	468 (427–509)	439 (396–482)	372 (335–410)	374 (335–412)	**1.35 (1.18–1.55)	**13.4% (5.1%–21.1%)
P.E.I.	737 (627–847)	570 (473–667)	488 (398–578)	376 (303–450)	406 (324–488)	**1.82 (1.41–2.33)	**20.9% (5.2%–34.4%)
N.S.	417 (387–447)	371 (342–399)	324 (299–350)	266 (242–290)	286 (260–313)	**1.46 (1.30–1.64)	**14.0% (6.5%–20.9%)
N.B.	667 (626–709)	499 (463–536)	465 (431–500)	385 (354–417)	377 (346–409)	**1.77 (1.59–1.96)	**21.3% (15.1%–27.1%)
Que.	410 (400–420)	310 (301–319)	278 (269–286)	255 (247–263)	190 (183–196)	**2.16 (2.07–2.26)	**34.3% (32.0%–36.5%)
Ont.	437 (428–445)	306 (299–313)	272 (266–279)	235 (229–241)	184 (179–190)	**2.37 (2.29–2.46)	**35.7% (33.9%–37.4%)
Man.	640 (605–675)	384 (358–410)	248 (227–268)	252 (232–273)	241 (220–263)	**2.65 (2.39–2.94)	**31.7% (26.0%–37.2%)
Sask.	814 (772–857)	522 (488–555)	437 (407–467)	377 (349–405)	358 (330–387)	**2.27 (2.06–2.50)	**28.5% (23.0%–33.6%)
Alta.	484 (467–500)	354 (340–369)	327 (313–341)	284 (271–297)	224 (212–236)	**2.16 (2.03–2.30)	**33.1% (29.7%–36.3%)
B.C.	372 (359–385)	293 (281–304)	265 (254–276)	241 (230–251)	192 (182–202)	**1.94 (1.82–2.06)	**29.5% (26.1%–32.7%)
Y.T.	*	*	*	*	*	*	*
N.W.T.	*	*	*	*	*	*	*
Nun.	*	*	*	*	*	*	*
<b>Canada</b>	<b>449</b> (444–454)	<b>329</b> (325–334)	<b>292</b> (288–296)	<b>257</b> (253–261)	<b>208</b> (205–212)	<b>**2.16</b> (2.11–2.20)	<b>**32.1%</b> (31.0%–33.2%)

† Age-standardized rates per 100,000 population.

Q1 (Quintile 1) refers to the least-affluent neighbourhoods, while Q5 (Quintile 5) refers to the most affluent.

## 30-Day Acute Myocardial Infarction In-Hospital Mortality, 2009–2010 to 2011–2012

	Neighbourhood Income Quintile <sup>‡</sup>					Disparity Rate Ratio 95% CI	Potential Rate Reduction (%) 95% CI
	Q1 95% CI	Q2 95% CI	Q3 95% CI	Q4 95% CI	Q5 95% CI		
N.L.	9.0 (7.1–11.0)	7.0 (5.1–9.0)	8.1 (6.2–10.0)	8.2 (6.1–10.2)	8.6 (6.4–10.8)	1.05 (0.75–1.47)	-4.9% (-32.1%–17.7%)
P.E.I.	9.5 (5.7–13.3)	5.1 (1.1–9.0)	7.5 (4.0–11.0)	6.3 (2.2–10.4)	5.8 (2.1–9.5)	1.64 (0.77–3.48)	14.9% (-46.4%–53.7%)
N.S.	7.6 (6.1–9.0)	6.4 (5.0–7.9)	6.3 (4.8–7.8)	7.0 (5.4–8.5)	6.9 (5.2–8.5)	1.10 (0.81–1.50)	-0.3% (-24.6%–20.0%)
N.B.	8.5 (6.8–10.1)	7.9 (6.3–9.5)	6.3 (4.5–8.1)	7.4 (5.7–9.1)	5.9 (4.0–7.8)	1.44 (0.98–2.10)	18.7% (-8.8%–40.2%)
Que.	..	..	..	..	..	..	..
Ont.	8.4 (8.0–8.8)	7.6 (7.2–8.1)	7.4 (7.0–7.9)	7.4 (7.0–7.9)	6.8 (6.3–7.3)	<b>**1.23</b> (1.13–1.35)	<b>**10.1%</b> (4.1%–15.8%)
Man.	7.1 (5.8–8.4)	6.7 (5.4–8.0)	5.8 (4.5–7.2)	6.8 (5.4–8.2)	6.9 (5.4–8.3)	1.04 (0.78–1.37)	-2.9% (-23.9%–15.2%)
Sask.	9.1 (7.7–10.6)	7.4 (6.0–8.8)	7.1 (5.5–8.7)	7.5 (5.8–9.1)	7.0 (5.2–8.8)	1.30 (0.96–1.76)	8.4% (-15.0%–27.7%)
Alta.	6.9 (5.9–7.8)	6.1 (5.1–7.0)	6.3 (5.3–7.3)	6.7 (5.6–7.7)	6.0 (4.8–7.1)	1.14 (0.90–1.46)	6.5% (-11.2%–21.7%)
B.C.	7.6 (6.8–8.3)	6.8 (6.0–7.6)	7.3 (6.4–8.1)	7.1 (6.2–8.0)	5.9 (5.0–6.9)	<b>**1.28</b> (1.06–1.54)	<b>**15.1%</b> (2.3%–26.5%)
Y.T.	*	*	*	*	*	*	*
N.W.T.	*	*	*	*	*	*	*
Nun.	*	*	*	*	*	*	*
<b>Canada</b>	<b>8.1</b> (7.8–8.4)	<b>7.2</b> (6.9–7.5)	<b>7.1</b> (6.8–7.4)	<b>7.3</b> (6.9–7.6)	<b>6.6</b> (6.3–7.0)	<b>**1.22</b> (1.14–1.30)	<b>**9.0%</b> (4.4%–13.4%)

<sup>‡</sup> Risk-adjusted rates (%).

Q1 (Quintile 1) refers to the least-affluent neighbourhoods, while Q5 (Quintile 5) refers to the most affluent.

## 30-Day Stroke In-Hospital Mortality, 2009–2010 to 2011–2012

	Neighbourhood Income Quintile <sup>‡</sup>					Disparity Rate Ratio 95% CI	Potential Rate Reduction (%) 95% CI
	Q1 95% CI	Q2 95% CI	Q3 95% CI	Q4 95% CI	Q5 95% CI		
N.L.	21.9 (17.8–26.0)	23.4 (19.3–27.4)	18.2 (14.5–21.8)	19.1 (15.3–22.9)	18.5 (14.6–22.3)	1.19 (0.89–1.57)	8.5% (-9.9%–24.5%)
P.E.I.	18.2 (11.4–25.0)	13.9 (6.5–21.3)	20.0 (12.0–28.0)	15.3 (7.2–23.5)	22.3 (14.2–30.4)	0.82 (0.49–1.37)	-24.8% (-71.1%–11.8%)
N.S.	19.0 (16.0–21.9)	18.7 (15.8–21.6)	18.9 (16.0–21.9)	15.0 (11.8–18.2)	17.4 (14.3–20.6)	1.09 (0.86–1.38)	2.6% (-14.6%–17.6%)
N.B.	14.9 (11.9–17.8)	14.4 (11.3–17.5)	12.6 (9.2–15.9)	15.2 (12.1–18.3)	18.0 (14.4–21.6)	0.83 (0.62–1.09)	-20.8% (-44.8%–0.0%)
Que.	..	..	..	..	..	..	..
Ont.	15.2 (14.5–16.0)	14.7 (13.9–15.4)	14.5 (13.7–15.3)	14.4 (13.6–15.2)	15.2 (14.4–16.1)	1.00 (0.93–1.07)	-3.0% (-8.1%–2.0%)
Man.	16.8 (14.3–19.3)	14.8 (12.4–17.2)	15.5 (13.0–18.1)	17.8 (15.1–20.6)	13.1 (10.3–16.0)	1.28 (0.98–1.66)	16.1% (-1.9%–31.4%)
Sask.	17.1 (14.4–19.8)	16.0 (13.4–18.5)	13.8 (11.1–16.6)	18.1 (15.2–21.0)	15.5 (12.4–18.7)	1.10 (0.85–1.42)	3.7% (-15.6%–20.3%)
Alta.	14.0 (12.4–15.7)	15.0 (13.3–16.6)	13.1 (11.4–14.9)	13.2 (11.4–15.1)	11.6 (9.8–13.5)	1.21 (0.99–1.47)	<b>**13.8%</b> (0.7%–25.6%)
B.C.	16.0 (14.7–17.2)	13.8 (12.5–15.0)	14.1 (12.8–15.5)	14.1 (12.7–15.5)	14.6 (13.1–16.0)	1.09 (0.97–1.24)	-0.2% (-9.6%–8.6%)
Y.T.	*	*	*	*	*	*	*
N.W.T.	*	*	*	*	*	*	*
Nun.	*	*	*	*	*	*	*
<b>Canada</b>	<b>15.6</b> (15.1–16.2)	<b>14.9</b> (14.3–15.4)	<b>14.5</b> (14.0–15.1)	<b>14.7</b> (14.1–15.3)	<b>14.9</b> (14.3–15.5)	<b>1.05</b> (0.99–1.10)	<b>0.2%</b> (-3.6%–3.8%)

<sup>‡</sup> Risk-adjusted rates (%).

Q1 (Quintile 1) refers to the least-affluent neighbourhoods, while Q5 (Quintile 5) refers to the most affluent.

## Self-Injury Hospitalization, 2011–2012

	Neighbourhood Income Quintile†					Disparity Rate Ratio 95% CI	Potential Rate Reduction (%) 95% CI
	Q1 95% CI	Q2 95% CI	Q3 95% CI	Q4 95% CI	Q5 95% CI		
N.L.	86 (64–108)	96 (72–119)	91 (67–114)	75 (53–97)	89 (67–112)	0.96 (0.67–1.39)	-2.1% (-27.4%–19.2%)
P.E.I.	91 (43–139)	72 (30–114)	73 (32–115)	56 (21–90)	28 (9–46)	**3.29 (1.41–7.67)	**56.4% (17.9%–77.8%)
N.S.	102 (84–119)	70 (55–85)	72 (58–87)	70 (54–86)	67 (51–84)	**1.51 (1.12–2.05)	11.8% (-9.7%–29.8%)
N.B.	126 (103–148)	84 (66–102)	85 (67–104)	85 (66–104)	64 (48–80)	**1.97 (1.45–2.68)	**28.4% (10.0%–43.5%)
Que.	83 (78–88)	69 (65–74)	58 (54–63)	54 (49–58)	45 (40–49)	**1.87 (1.67–2.09)	**28.5% (22.1%–34.5%)
Ont.	101 (96–105)	69 (65–73)	56 (53–59)	54 (51–58)	49 (45–52)	**2.07 (1.91–2.25)	**26.0% (21.1%–30.5%)
Man.	135 (118–153)	67 (54–79)	54 (42–66)	57 (45–69)	49 (38–61)	**2.76 (2.11–3.60)	**31.6% (15.5%–45.0%)
Sask.	155 (134–176)	90 (74–107)	85 (69–101)	66 (52–81)	43 (31–54)	**3.63 (2.68–4.93)	**51.2% (37.0%–62.5%)
Alta.	90 (82–98)	61 (55–68)	57 (50–63)	54 (48–60)	44 (38–50)	**2.04 (1.74–2.40)	**28.3% (19.0%–36.7%)
B.C.	117 (109–126)	94 (86–102)	82 (75–89)	74 (67–81)	57 (51–64)	**2.04 (1.78–2.34)	**32.5% (24.9%–39.4%)
Y.T.	*	*	*	*	*	*	*
N.W.T.	*	*	*	*	*	*	*
Nun.	*	*	*	*	*	*	*
<b>Canada</b>	<b>101</b> <b>(98–104)</b>	<b>73</b> <b>(70–75)</b>	<b>63</b> <b>(61–66)</b>	<b>59</b> <b>(57–61)</b>	<b>50</b> <b>(48–53)</b>	<b>**2.01</b> <b>(1.91–2.11)</b>	<b>**27.4%</b> <b>(24.5%–30.2%)</b>

† Age-standardized rates per 100,000 population.

Q1 (Quintile 1) refers to the least-affluent neighbourhoods, while Q5 (Quintile 5) refers to the most affluent.

## 30-Day Readmission for Mental Illness, 2011–2012

	Neighbourhood Income Quintile†					Disparity Rate Ratio 95% CI	Potential Rate Reduction (%) 95% CI
	Q1 95% CI	Q2 95% CI	Q3 95% CI	Q4 95% CI	Q5 95% CI		
N.L.	12.7 (9.1–16.4)	10.7 (7.1–14.3)	14.6 (10.9–18.3)	12.0 (8.1–16.0)	16.0 (12.9–19.2)	0.79 (0.56–1.12)	**21.5% (-44.9%–0.8%)
P.E.I.	14.8 (10.6–18.9)	11.0 (6.2–15.7)	13.3 (8.4–18.2)	13.5 (8.1–18.9)	10.0 (4.8–15.2)	1.48 (0.82–2.68)	21.2% (-24.9%–52.0%)
N.S.	14.3 (11.9–16.6)	12.6 (9.7–15.4)	11.4 (8.6–14.2)	13.6 (10.5–16.7)	10.6 (7.5–13.8)	1.35 (0.96–1.89)	16.4% (-9.1%–36.7%)
N.B.	12.8 (10.8–14.7)	13.3 (11.0–15.6)	11.4 (8.8–14.0)	13.2 (10.6–15.7)	11.9 (9.0–14.8)	1.07 (0.81–1.42)	5.5% (-17.7%–24.7%)
Que.	12.1 (11.4–12.8)	10.8 (10.0–11.7)	11.2 (10.3–12.1)	10.4 (9.4–11.4)	9.4 (8.3–10.5)	**1.29 (1.13–1.47)	**14.9% (5.0%–23.9%)
Ont.	12.1 (11.6–12.6)	11.5 (10.9–12.2)	11.5 (10.8–12.3)	11.5 (10.8–12.3)	11.3 (10.5–12.1)	1.07 (0.98–1.17)	3.3% (-3.6%–9.7%)
Man.	8.5 (6.9–10.1)	9.5 (7.4–11.6)	8.5 (6.0–11.0)	8.6 (5.8–11.3)	7.5 (4.8–10.1)	1.14 (0.76–1.71)	13.2% (-20.2%–38.2%)
Sask.	11.5 (9.8–13.1)	10.8 (8.7–12.9)	10.1 (7.9–12.3)	10.3 (7.8–12.7)	11.0 (8.6–13.4)	1.04 (0.80–1.36)	-1.5% (-23.6%–17.3%)
Alta.	9.5 (8.5–10.5)	12.1 (10.9–13.4)	9.0 (7.6–10.4)	9.0 (7.5–10.5)	8.7 (7.0–10.4)	1.09 (0.87–1.37)	11.4% (-6.1%–26.3%)
B.C.	13.8 (13.1–14.6)	14.3 (13.4–15.2)	12.3 (11.3–13.3)	12.1 (11.0–13.3)	11.2 (10.0–12.4)	**1.23 (1.10–1.39)	**14.0% (5.1%–22.1%)
Y.T.	*	*	*	*	*	*	*
N.W.T.	*	*	*	*	*	*	*
Nun.	*	*	*	*	*	*	*
<b>Canada</b>	<b>12.1</b> <b>(11.8–12.4)</b>	<b>11.9</b> <b>(11.5–12.3)</b>	<b>11.3</b> <b>(10.8–11.7)</b>	<b>11.2</b> <b>(10.7–11.6)</b>	<b>10.7</b> <b>(10.2–11.2)</b>	<b>**1.13</b> <b>(1.07–1.20)</b>	<b>**7.6%</b> <b>(3.5%–11.6%)</b>

‡ Risk-adjusted rates (%).

Q1 (Quintile 1) refers to the least-affluent neighbourhoods, while Q5 (Quintile 5) refers to the most affluent.

## 30-Day Readmission—Patients Age 19 and Younger, 2011–2012

	Neighbourhood Income Quintile <sup>‡</sup>					Disparity Rate Ratio 95% CI	Potential Rate Reduction (%) 95% CI
	Q1 95% CI	Q2 95% CI	Q3 95% CI	Q4 95% CI	Q5 95% CI		
N.L.	5.1 (3.1–7.2)	5.4 (3.5–7.3)	6.0 (4.1–7.9)	7.2 (5.3–9.1)	5.7 (3.9–7.5)	0.90 (0.54–1.51)	3.8% (-26.5%–28.4%)
P.E.I.	5.2 (1.4–9.0)	7.1 (3.8–10.4)	4.8 (1.1–8.5)	5.2 (1.6–8.7)	5.0 (0.9–9.0)	1.04 (0.35–3.13)	9.4% (-74.4%–57.9%)
N.S.	6.1 (4.8–7.5)	6.5 (5.0–8.0)	4.7 (3.2–6.3)	6.2 (4.7–7.7)	6.8 (5.3–8.2)	0.90 (0.66–1.23)	-11.5% (-34.4%–8.4%)
N.B.	6.9 (5.6–8.2)	5.5 (4.0–7.0)	5.3 (3.8–6.8)	6.4 (4.8–8.0)	6.2 (4.8–7.7)	1.11 (0.82–1.50)	-2.0% (-25.1%–17.8%)
Que.	6.2 (5.7–6.7)	6.1 (5.6–6.6)	6.2 (5.7–6.7)	6.1 (5.6–6.5)	5.9 (5.4–6.4)	1.04 (0.93–1.17)	2.7% (-4.7%–9.8%)
Ont.	7.0 (6.7–7.4)	6.9 (6.5–7.3)	6.3 (5.9–6.7)	7.0 (6.7–7.4)	6.7 (6.2–7.1)	1.06 (0.97–1.15)	2.2% (-3.6%–7.8%)
Man.	7.0 (6.0–7.9)	6.7 (5.4–8.1)	5.9 (4.4–7.3)	5.9 (4.6–7.3)	6.1 (4.7–7.5)	1.13 (0.87–1.48)	4.7% (-17.0%–22.9%)
Sask.	7.0 (6.2–7.9)	6.7 (5.6–7.7)	6.2 (5.0–7.4)	6.6 (5.5–7.6)	7.3 (6.1–8.5)	0.97 (0.79–1.18)	-7.4% (-24.1%–7.5%)
Alta.	7.1 (6.4–7.7)	6.3 (5.6–7.0)	5.7 (5.0–6.4)	6.1 (5.4–6.7)	5.9 (5.2–6.7)	**1.20 (1.03–1.40)	5.0% (-6.2%–15.2%)
B.C.	6.5 (5.8–7.3)	6.4 (5.7–7.2)	5.4 (4.7–6.1)	6.1 (5.4–6.9)	7.0 (6.2–7.7)	0.94 (0.80–1.10)	** -11.0% (-22.5%–-0.4%)
Y.T.	*	*	*	*	*	*	*
N.W.T.	*	*	*	*	*	*	*
Nun.	*	*	*	*	*	*	*
<b>Canada</b>	<b>6.8</b> (6.5–7.0)	<b>6.5</b> (6.3–6.7)	<b>6.1</b> (5.8–6.3)	<b>6.5</b> (6.2–6.7)	<b>6.4</b> (6.2–6.7)	<b>1.05</b> (1.00–1.11)	<b>0.3%</b> (-3.3%–3.8%)

‡ Risk-adjusted rates (%).

Q1 (Quintile 1) refers to the least-affluent neighbourhoods, while Q5 (Quintile 5) refers to the most affluent.

## 30-Day Obstetric Readmission, 2011–2012

	Neighbourhood Income Quintile <sup>‡</sup>					Disparity Rate Ratio 95% CI	Potential Rate Reduction (%) 95% CI
	Q1 95% CI	Q2 95% CI	Q3 95% CI	Q4 95% CI	Q5 95% CI		
N.L.	3.3 (2.4–4.1)	3.0 (2.2–3.7)	2.6 (1.8–3.5)	2.6 (1.8–3.4)	1.5 (0.7–2.4)	**2.13 (1.16–3.89)	**40.2% (4.0%–64.0%)
P.E.I.	1.8 (0.2–3.4)	2.2 (0.7–3.7)	0.8 (0.2–2.8)	1.8 (0.7–4.5)	3.4 (1.8–4.9)	0.53 (0.19–1.47)	** -70.8% (-156.7%–-2.4%)
N.S.	2.2 (1.7–2.7)	2.4 (1.9–3.0)	2.1 (1.6–2.7)	2.5 (1.9–3.1)	2.3 (1.7–3.0)	0.93 (0.65–1.33)	-1.5% (-28.1%–20.6%)
N.B.	2.7 (2.1–3.3)	2.5 (1.8–3.2)	1.8 (1.1–2.6)	2.4 (1.6–3.1)	2.7 (2.0–3.4)	1.01 (0.72–1.42)	-10.2% (-37.5%–13.0%)
Que.	2.1 (1.9–2.3)	2.0 (1.8–2.3)	1.8 (1.6–2.0)	1.9 (1.6–2.1)	1.8 (1.6–2.1)	1.16 (0.97–1.37)	4.7% (-7.7%–16.0%)
Ont.	1.9 (1.8–2.1)	1.7 (1.5–1.9)	1.8 (1.7–2.0)	1.5 (1.4–1.7)	1.6 (1.4–1.8)	**1.23 (1.06–1.42)	9.2% (-1.2%–18.8%)
Man.	3.0 (2.7–3.3)	2.9 (2.5–3.3)	2.7 (2.2–3.1)	2.5 (2.0–3.0)	2.8 (2.3–3.3)	1.07 (0.87–1.32)	0.3% (-17.5%–15.9%)
Sask.	2.6 (2.2–3.0)	2.1 (1.6–2.5)	2.3 (1.8–2.8)	2.0 (1.5–2.5)	1.8 (1.3–2.3)	**1.46 (1.05–2.02)	18.9% (-5.4%–38.2%)
Alta.	2.2 (1.9–2.4)	1.8 (1.6–2.1)	2.0 (1.7–2.2)	1.7 (1.5–2.0)	1.9 (1.6–2.2)	1.14 (0.95–1.37)	1.1% (-13.3%–13.9%)
B.C.	2.5 (2.2–2.8)	2.4 (2.1–2.6)	2.1 (1.9–2.4)	2.3 (2.0–2.5)	2.4 (2.1–2.7)	1.04 (0.88–1.23)	-2.8% (-15.8%–9.0%)
Y.T.	*	*	*	*	*	*	*
N.W.T.	*	*	*	*	*	*	*
Nun.	*	*	*	*	*	*	*
<b>Canada</b>	<b>2.2</b> (2.1–2.3)	<b>2.0</b> (1.9–2.1)	<b>2.0</b> (1.9–2.1)	<b>1.8</b> (1.7–1.9)	<b>1.9</b> (1.8–2.0)	<b>**1.17</b> (1.09–1.26)	<b>4.9%</b> (-0.3%–9.9%)

‡ Risk-adjusted rates (%).

Q1 (Quintile 1) refers to the least-affluent neighbourhoods, while Q5 (Quintile 5) refers to the most affluent.

30-Day Medical Readmission, 2011–2012							
	Neighbourhood Income Quintile <sup>‡</sup>					Disparity Rate Ratio 95% CI	Potential Rate Reduction (%) 95% CI
	Q1 95% CI	Q2 95% CI	Q3 95% CI	Q4 95% CI	Q5 95% CI		
N.L.	13.4 (12.4–14.4)	12.3 (11.2–13.4)	13.2 (12.1–14.3)	12.7 (11.6–13.8)	12.2 (11.0–13.3)	1.10 (0.98–1.24)	4.6% (-3.6%–12.3%)
P.E.I.	11.2 (9.2–13.2)	13.6 (11.4–15.8)	13.4 (11.1–15.6)	13.2 (11.0–15.4)	11.7 (9.3–14.1)	0.96 (0.73–1.26)	7.0% (-11.5%–22.9%)
N.S.	12.0 (11.1–12.9)	12.1 (11.2–13.0)	12.4 (11.4–13.3)	12.2 (11.3–13.2)	12.2 (11.2–13.3)	0.98 (0.88–1.10)	-0.3% (-8.2%–7.2%)
N.B.	13.5 (12.7–14.3)	13.7 (12.9–14.5)	13.8 (12.9–14.6)	12.8 (11.9–13.7)	13.2 (12.3–14.2)	1.02 (0.93–1.12)	1.5% (-5.2%–7.8%)
Que.	13.5 (13.2–13.7)	12.9 (12.6–13.2)	12.9 (12.5–13.2)	12.9 (12.6–13.2)	12.6 (12.3–13.0)	**1.06 (1.03–1.10)	**2.8% (0.2%–5.3%)
Ont.	14.3 (14.0–14.5)	13.6 (13.4–13.9)	12.9 (12.6–13.1)	13.3 (13.0–13.5)	12.8 (12.5–13.1)	**1.12 (1.09–1.15)	**4.7% (2.8%–6.5%)
Man.	14.6 (13.9–15.3)	13.4 (12.6–14.1)	12.8 (12.0–13.6)	13.7 (12.8–14.5)	13.1 (12.2–13.9)	**1.12 (1.03–1.21)	3.9% (-2.3%–9.8%)
Sask.	14.9 (14.2–15.5)	15.2 (14.5–15.9)	14.6 (13.8–15.3)	14.1 (13.3–14.9)	14.9 (14.0–15.7)	1.00 (0.93–1.07)	-0.8% (-5.8%–4.1%)
Alta.	13.9 (13.5–14.4)	13.6 (13.2–14.1)	13.5 (13.0–14.0)	13 (12.5–13.5)	12.4 (11.8–12.9)	**1.13 (1.07–1.19)	**7.4% (3.5%–11.2%)
B.C.	15.0 (14.7–15.4)	13.8 (13.4–14.2)	14.1 (13.7–14.6)	13.7 (13.3–14.2)	13.7 (13.2–14.2)	**1.10 (1.05–1.15)	**3.3% (0.1%–6.4%)
Y.T.	*	*	*	*	*	*	*
N.W.T.	*	*	*	*	*	*	*
Nun.	*	*	*	*	*	*	*
<b>Canada</b>	<b>14.1</b> (13.9–14.2)	<b>13.5</b> (13.3–13.6)	<b>13.2</b> (13.1–13.4)	<b>13.2</b> (13.0–13.4)	<b>12.9</b> (12.7–13.1)	<b>**1.09</b> (1.07–1.11)	<b>**3.8%</b> (2.6%–5.0%)

‡ Risk-adjusted rates (%).

Q1 (Quintile 1) refers to the least-affluent neighbourhoods, while Q5 (Quintile 5) refers to the most affluent.

30-Day Surgical Readmission, 2011–2012							
	Neighbourhood Income Quintile <sup>‡</sup>					Disparity Rate Ratio 95% CI	Potential Rate Reduction (%) 95% CI
	Q1 95% CI	Q2 95% CI	Q3 95% CI	Q4 95% CI	Q5 95% CI		
N.L.	6.4 (5.5–7.3)	6.8 (5.9–7.8)	6.7 (5.7–7.6)	6.3 (5.4–7.3)	6.4 (5.4–7.4)	1.00 (0.81–1.23)	1.9% (-12.3%–14.6%)
P.E.I.	5.5 (3.7–7.4)	6.0 (4.1–7.9)	6.9 (5.0–8.7)	6.7 (4.8–8.6)	6.6 (4.7–8.5)	0.84 (0.54–1.32)	-3.8% (-33.8%–20.9%)
N.S.	6.6 (5.9–7.3)	6.0 (5.3–6.6)	6.3 (5.6–7.0)	5.8 (5.1–6.5)	6.5 (5.8–7.3)	1.00 (0.86–1.17)	-5.1% (-16.0%–5.1%)
N.B.	6.7 (6.0–7.4)	7.3 (6.6–8.1)	6.8 (6.1–7.6)	5.9 (5.2–6.7)	6.7 (5.9–7.5)	1.01 (0.86–1.18)	0.4% (-10.7%–10.6%)
Que.	6.5 (6.3–6.8)	6.3 (6.0–6.5)	5.9 (5.7–6.2)	6.0 (5.7–6.3)	5.6 (5.3–5.9)	**1.17 (1.10–1.25)	**8.2% (4.0%–12.2%)
Ont.	7.3 (7.1–7.6)	6.9 (6.7–7.1)	6.5 (6.2–6.7)	6.7 (6.5–6.9)	6.4 (6.2–6.7)	**1.14 (1.09–1.19)	**4.7% (1.7%–7.6%)
Man.	6.9 (6.2–7.5)	6.1 (5.5–6.7)	5.7 (5.1–6.4)	5.3 (4.6–5.9)	6.0 (5.4–6.7)	1.13 (0.98–1.31)	-0.9% (-11.1%–8.7%)
Sask.	8.1 (7.5–8.8)	7.5 (6.8–8.2)	7.8 (7.1–8.4)	7.5 (6.8–8.1)	7.4 (6.7–8.2)	1.09 (0.96–1.24)	3.0% (-5.7%–11.1%)
Alta.	7.5 (7.1–7.9)	6.8 (6.4–7.2)	7.2 (6.8–7.6)	6.3 (5.9–6.7)	6.4 (6.0–6.8)	**1.17 (1.08–1.27)	**6.0% (0.5%–11.4%)
B.C.	7.5 (7.1–7.8)	7.5 (7.2–7.9)	7.3 (6.9–7.7)	6.8 (6.4–7.2)	6.7 (6.3–7.0)	**1.12 (1.04–1.20)	**6.7% (2.0%–11.2%)
Y.T.	*	*	*	*	*	*	*
N.W.T.	*	*	*	*	*	*	*
Nun.	*	*	*	*	*	*	*
<b>Canada</b>	<b>7.1</b> (7.0–7.2)	<b>6.8</b> (6.7–6.9)	<b>6.5</b> (6.4–6.7)	<b>6.4</b> (6.3–6.5)	<b>6.3</b> (6.2–6.4)	<b>**1.13</b> (1.10–1.16)	<b>**5.0%</b> (3.1%–6.8%)

‡ Risk-adjusted rates (%).

Q1 (Quintile 1) refers to the least-affluent neighbourhoods, while Q5 (Quintile 5) refers to the most affluent.

## 30-Day Acute Myocardial Infarction Readmission, 2011–2012

	Neighbourhood Income Quintile <sup>‡</sup>					Disparity Rate Ratio 95% CI	Potential Rate Reduction (%) 95% CI
	Q1 95% CI	Q2 95% CI	Q3 95% CI	Q4 95% CI	Q5 95% CI		
N.L.	14.7 (10.8–18.5)	7.4 (3.2–11.6)	13.7 (9.9–17.6)	8.8 (4.5–13.2)	13.1 (8.3–18.0)	1.12 (0.71–1.76)	-12.5% (-56.7%–21.1%)
P.E.I.	2.3 (0.3–13.9)	10.5 (2.3–18.8)	13.5 (4.9–22.0)	16.4 (8.5–24.3)	-13.0 (5.2–20.8)	0.18 (0.00–10.90)	-12.1% (-83.0%–37.2%)
N.S.	9.3 (6.2–12.3)	12.9 (9.8–15.9)	12.2 (8.9–15.5)	8.5 (5.1–11.8)	8.8 (5.3–12.3)	1.05 (0.63–1.76)	15.2% (-20.5%–41.7%)
N.B.	13.3 (9.4–17.2)	15.8 (11.9–19.6)	17.6 (13.7–21.5)	10.6 (6.5–14.7)	12.8 (8.7–16.9)	1.04 (0.67–1.60)	9.1% (-20.2%–32.5%)
Que.	11.6 (10.5–12.8)	10.5 (9.3–11.7)	9.3 (8.0–10.5)	10.9 (9.5–12.3)	8.3 (6.8–9.8)	**1.40 (1.15–1.72)	**19.1% (4.9%–31.5%)
Ont.	13.5 (12.5–14.5)	12.0 (11.0–13.1)	11.5 (10.4–12.6)	11.4 (10.3–12.5)	10.9 (9.7–12.0)	**1.25 (1.09–1.42)	8.9% (-0.3%–17.4%)
Man.	13.5 (10.3–16.7)	8.8 (5.8–11.8)	7.8 (4.6–10.9)	7.0 (3.7–10.3)	8.3 (4.8–11.8)	**1.62 (1.00–2.62)	9.5% (-30.5%–39.0%)
Sask.	15.6 (12.0–19.3)	11.3 (7.5–15.1)	13.3 (9.5–17.1)	14.0 (10.0–18.1)	13.2 (8.8–17.5)	1.19 (0.79–1.78)	2.7% (-29.7%–28.3%)
Alta.	13.1 (10.9–15.2)	11.6 (9.4–13.8)	10.4 (8.1–12.7)	9.1 (6.8–11.4)	9.9 (7.4–12.4)	1.32 (0.97–1.78)	8.8% (-14.5%–28.0%)
B.C.	14.2 (12.5–16.0)	13.7 (11.8–15.6)	12.3 (10.4–14.2)	11.3 (9.3–13.3)	9.7 (7.6–11.7)	**1.47 (1.15–1.89)	**21.7% (5.3%–35.7%)
Y.T.	*	*	*	*	*	*	*
N.W.T.	*	*	*	*	*	*	*
Nun.	*	*	*	*	*	*	*
<b>Canada</b>	<b>12.9</b> (12.3–13.5)	<b>11.7</b> (11.1–12.3)	<b>11.2</b> (10.5–11.8)	<b>10.9</b> (10.2–11.6)	<b>10.1</b> (9.3–10.8)	<b>**1.29</b> (1.18–1.40)	<b>**12.0%</b> (6.1%–17.6%)

<sup>‡</sup> Risk-adjusted rates (%).

Q1 (Quintile 1) refers to the least-affluent neighbourhoods, while Q5 (Quintile 5) refers to the most affluent.

### Neighbourhood income quintile

Small geographic areas divided into five roughly equal population groups. Quintile 1 refers to the least affluent neighbourhoods, while quintile 5 refers to the most affluent. The quintiles were constructed according to the methods developed at Statistics Canada.

### Disparity rate ratio (RR)

Ratio of a health indicator rate for the least affluent neighbourhood income quintile (Q1) to the rate for the most affluent neighbourhood income quintile (Q5). It provides a summary measure of the magnitude of the socio-economic disparity for a health indicator in a jurisdiction. It should be evaluated together with other measures, such as the indicator rate for each neighbourhood income quintile as well as the potential rate reduction. The 95% confidence interval (CI) is provided to assist interpretation. When the 95% CI does not contain a value of 1, RR indicates a statistically significant disparity between Q1 and Q5 rates within the jurisdiction, as indicated by the \*\* symbol.

### Potential rate reduction (PRR)

Reduction in a health indicator rate that would occur in the hypothetical scenario that each neighbourhood income group experienced the rate of the most affluent neighbourhood income quintile (Q5), expressed as a percentage. This measure is based on the concept of the excess morbidity or mortality that could be prevented and provides a summary measure of the overall effect of socio-economic disparities on a health indicator. It should be evaluated together with other measures, such as the indicator rate for each neighbourhood income quintile as well as the disparity rate ratio. The 95% CI is provided to assist interpretation. When the 95% CI does not contain a value of 0, PRR indicates a statistically significant potential reduction in the overall indicator rate within the jurisdiction, as indicated by the \*\* symbol.



Map Code	Health Region	Mental Illness Hospitalization 2011–2012		Mental Illness Patient Days 2011–2012	
		Age-Standardized Rate per 100,000	95% CI	Age-Standardized Rate per 10,000	95% CI
<b>Newfoundland and Labrador</b>		<b>*415</b>	<b>(386–444)</b>	<b>*505</b>	<b>(448–563)</b>
1011	Eastern	*180	(158–201)	*260	(221–299)
1012	Central	*629	(531–728)	*889	(717–1,061)
1013	Western	*989	(866–1,112)	*1,184	(869–1,499)
<b>Prince Edward Island</b>		<b>*838</b>	<b>(767–910)</b>	<b>*1,012</b>	<b>(885–1,139)</b>
<b>Nova Scotia</b>		<b>*401</b>	<b>(381–422)</b>	<b>*581</b>	<b>(521–641)</b>
1211	South Shore	*302	(239–366)	534	(298–770)
1212	South West Nova	577	(471–682)	740	(471–1,008)
1223	Annapolis Valley	*249	(190–308)	*354	(156–552)
1234	Colchester East Hants	*368	(308–429)	*396	(288–504)
1258	Cape Breton	*745	(668–822)	*899	(759–1,040)
1269	Capital	*275	(250–299)	*456	(385–527)
<b>New Brunswick</b>		<b>*631</b>	<b>(603–660)</b>	<b>*859</b>	<b>(794–924)</b>
1301	Zone 1 (Moncton area)	*543	(496–590)	*938	(773–1,104)
1302	Zone 2 (Saint John area)	*324	(286–363)	609	(485–732)
1303	Zone 3 (Fredericton area)	456	(407–505)	*499	(429–569)
1306	Zone 6 (Bathurst area)	*811	(713–908)	*1,057	(869–1,246)
<b>Quebec</b>		<b>*434</b>	<b>(427–441)</b>	<b>*893</b>	<b>(866–920)</b>
2401	Bas-Saint-Laurent	*726	(663–790)	*1,064	(919–1,210)
2402	Saguenay–Lac-Saint-Jean	*825	(762–888)	*1,281	(1,125–1,436)
2403	Capitale-Nationale	*310	(292–327)	744	(682–807)
2404	Mauricie et Centre-du-Québec	*587	(552–622)	*934	(853–1,015)
2405	Estrie	*668	(609–727)	*1,356	(1,201–1,510)
2406	Montréal	*257	(248–267)	*844	(787–900)
2407	Outaouais	*396	(368–425)	*588	(515–661)
2408	Abitibi-Témiscamingue	*640	(573–707)	841	(478–1,205)
2409	Côte-Nord	*734	(653–816)	*1,974	(1,050–2,897)
2411	Gaspésie–Îles-de-la-Madeleine	*716	(622–809)	*1,018	(773–1,262)
2412	Chaudière-Appalaches	*701	(659–742)	*1,123	(1,019–1,228)
2413	Laval	*294	(270–318)	*855	(736–975)
2414	Lanaudière	482	(450–513)	*895	(793–997)
2415	Laurentides	*357	(332–382)	750	(661–839)
2416	Montréal	493	(475–512)	*904	(849–959)
<b>Ontario</b>		<b>*442</b>	<b>(437–448)</b>	<b>*547</b>	<b>(532–562)</b>
3501	Erie St. Clair	*400	(376–425)	668	(611–725)
3502	South West	*458	(437–480)	*544	(509–578)
3503	Waterloo Wellington	*411	(388–434)	*546	(489–603)
3504	Hamilton Niagara Haldimand Brant	483	(464–501)	*517	(485–548)
3505	Central West	*395	(375–414)	*426	(396–456)
3506	Mississauga Halton	*312	(297–327)	*396	(367–424)
3507	Toronto Central	*404	(387–421)	*529	(492–565)
3508	Central	*329	(316–343)	*366	(345–387)
3509	Central East	*400	(385–415)	*465	(439–491)
3510	South East	457	(424–489)	*526	(480–572)
3511	Champlain	*390	(373–406)	*514	(484–545)
3512	North Simcoe Muskoka	*608	(572–644)	*515	(414–617)
3513	North East	*1,007	(959–1,055)	*1,661	(1,374–1,948)
3514	North West	*1,098	(1,023–1,174)	*1,280	(1,035–1,525)
<b>Manitoba</b>		<b>488</b>	<b>(470–506)</b>	<b>*811</b>	<b>(760–862)</b>
4610	Winnipeg	*427	(405–448)	*911	(838–984)
4615	Brandon	*799	(690–907)	*1,428	(1,000–1,855)
4625	South Eastman	*234	(181–286)	*293	(191–394)
4630	Interlake	*294	(242–346)	*279	(201–356)
4640	Central	*277	(229–325)	*253	(194–311)
4645	Assiniboine	*707	(606–809)	*995	(754–1,236)

Map Code	Health Region	Mental Illness Hospitalization 2011–2012		Mental Illness Patient Days 2011–2012	
		Age-Standardized Rate per 100,000	95% CI	Age-Standardized Rate per 10,000	95% CI
<b>Saskatchewan</b>		<b>*609</b>	<b>(586–633)</b>	<b>*770</b>	<b>(727–813)</b>
4701	Sun Country	546	(442–650)	*555	(419–691)
4702	Five Hills	*702	(595–809)	*1,045	(824–1,266)
4704	Regina	*546	(503–588)	*855	(761–949)
4705	Sunrise	*740	(630–849)	*1,147	(867–1,427)
4706	Saskatoon	*378	(347–409)	658	(583–734)
4709	Prince Albert	*837	(731–943)	753	(594–912)
4710	Prairie North	*952	(827–1,076)	864	(694–1,035)
<b>Alberta</b>		<b>*427</b>	<b>(417–437)</b>	<b>*665</b>	<b>(639–691)</b>
4831	South Zone	*718	(668–767)	*906	(817–996)
4832	Calgary Zone	*376	(361–390)	746	(695–796)
4833	Central Zone	*448	(422–475)	*548	(497–599)
4834	Edmonton Zone	*345	(327–363)	*605	(561–648)
4835	North Zone	*592	(556–628)	*504	(450–558)
<b>British Columbia</b>		<b>*646</b>	<b>(634–659)</b>	<b>*759</b>	<b>(737–781)</b>
5911	East Kootenay	*649	(564–735)	*457	(367–547)
5912	Kootenay Boundary	*936	(790–1,081)	739	(610–867)
5913	Okanagan	*874	(816–931)	*821	(746–897)
5914	Thompson/Cariboo/Shuswap	*722	(664–780)	*594	(526–662)
5921	Fraser East	*693	(645–740)	750	(676–825)
5922	Fraser North	*578	(549–607)	684	(629–738)
5923	Fraser South	*534	(505–562)	*639	(593–685)
5931	Richmond	*423	(372–474)	*469	(382–556)
5932	Vancouver	*625	(595–654)	*1,017	(944–1,089)
5933	North Shore	*607	(559–656)	659	(576–742)
5941	South Vancouver Island	*591	(552–631)	*903	(808–998)
5942	Central Vancouver Island	*716	(659–773)	799	(695–903)
5943	North Vancouver Island	503	(438–569)	605	(483–727)
5951	Northwest	*1,272	(1,110–1,434)	*875	(709–1,041)
5952	Northern Interior	*880	(805–955)	*936	(803–1,070)
5953	Northeast	*907	(801–1,014)	952	(704–1,199)
<b>Yukon</b>		<b>*787</b>	<b>(653–921)</b>	<b>*541</b>	<b>(388–693)</b>
<b>Northwest Territories</b>		<b>*1,544</b>	<b>(1,353–1,735)</b>	<b>*1,094</b>	<b>(808–1,381)</b>
<b>Nunavut</b>		<b>*737</b>	<b>(611–863)</b>	<b>*418</b>	<b>(326–511)</b>
<b>Canada</b>		<b>489</b>	<b>(485–492)</b>	<b>707</b>	<b>(697–717)</b>

### Mental illness hospitalization

Age-standardized rate of separations from general hospitals through discharge or death following a hospitalization for a selected mental illness, per 100,000 population age 15 and older. The hospitalization rate in general hospitals is a partial measure of hospital utilization in acute settings. This indicator may reflect differences between jurisdictions, such as the health of the population, different health service delivery models and variations in the availability and accessibility of specialized, residential and/or ambulatory and community-based services.

**Sources:** Discharge Abstract Database and Ontario Mental Health Reporting System, Canadian Institute for Health Information; Fichier des hospitalisations MED-ÉCHO, ministère de la Santé et des Services sociaux du Québec.

### Mental illness patient days

Age-standardized rate of total number of days in general hospitals for selected mental illness, per 10,000 population age 15 and older. The patient days rate in general hospitals is a partial measure of hospital utilization in acute settings. This indicator may reflect differences between jurisdictions, such as the health of the population, differing health service delivery models and variations in the availability and accessibility of specialized, residential and/or ambulatory and community-based health services.

**Sources:** Discharge Abstract Database and Ontario Mental Health Reporting System, Canadian Institute for Health Information; Fichier des hospitalisations MED-ÉCHO, ministère de la Santé et des Services sociaux du Québec.



Map Code	Health Region	Hip Replacement 2011–2012		Knee Replacement 2011–2012	
		Age-Standardized Rate per 100,000	95% CI	Age-Standardized Rate per 100,000	95% CI
<b>Newfoundland and Labrador</b>		<b>*88</b>	<b>(80–96)</b>	<b>165</b>	<b>(154–176)</b>
1011	Eastern	104	(92–116)	172	(157–186)
1012	Central	*85	(66–104)	165	(142–189)
1013	Western	*53	(38–68)	147	(121–172)
<b>Prince Edward Island</b>		<b>111</b>	<b>(94–129)</b>	<b>178</b>	<b>(156–200)</b>
<b>Nova Scotia</b>		<b>106</b>	<b>(100–113)</b>	<b>*187</b>	<b>(178–195)</b>
1211	South Shore	97	(76–119)	*220	(187–253)
1212	South West Nova	88	(65–111)	*131	(104–158)
1223	Annapolis Valley	105	(83–127)	186	(159–214)
1234	Colchester East Hants	109	(86–133)	155	(127–182)
1258	Cape Breton	118	(100–135)	*261	(235–287)
1269	Capital	107	(97–117)	171	(158–185)
<b>New Brunswick</b>		<b>108</b>	<b>(101–115)</b>	<b>169</b>	<b>(160–178)</b>
1301	Zone 1 (Moncton area)	*126	(111–141)	*202	(183–221)
1302	Zone 2 (Saint John area)	116	(100–132)	*200	(179–221)
1303	Zone 3 (Fredericton area)	106	(90–122)	*150	(132–169)
1306	Zone 6 (Bathurst area)	*63	(47–80)	*110	(89–132)
<b>Quebec</b>		<b>*76</b>	<b>(74–78)</b>	<b>*123</b>	<b>(120–125)</b>
2401	Bas-Saint-Laurent	*83	(71–95)	*138	(123–152)
2402	Saguenay–Lac-Saint-Jean	*71	(61–80)	156	(142–170)
2403	Capitale-Nationale	*65	(59–71)	*107	(100–115)
2404	Mauricie et Centre-du-Québec	*76	(69–84)	*133	(124–143)
2405	Estrie	*83	(73–93)	*126	(114–138)
2406	Montréal	*72	(68–76)	*96	(91–100)
2407	Outaouais	103	(92–114)	166	(152–180)
2408	Abitibi-Témiscamingue	*78	(64–93)	*129	(110–147)
2409	Côte-Nord	*84	(65–103)	170	(144–197)
2411	Gaspésie–Îles-de-la-Madeleine	*49	(35–62)	*104	(86–122)
2412	Chaudière-Appalaches	*72	(64–80)	*139	(128–150)
2413	Laval	*65	(57–73)	*109	(99–119)
2414	Lanaudière	*90	(81–99)	*134	(123–145)
2415	Laurentides	*76	(68–83)	*112	(103–121)
2416	Montérégie	*80	(76–85)	*133	(127–139)
<b>Ontario</b>		<b>*112</b>	<b>(110–114)</b>	<b>*192</b>	<b>(189–194)</b>
3501	Erie St. Clair	*130	(121–138)	*195	(184–206)
3502	South West	*136	(129–144)	*221	(211–230)
3503	Waterloo Wellington	*126	(118–135)	*182	(171–193)
3504	Hamilton Niagara Haldimand Brant	*126	(120–131)	*228	(220–236)
3505	Central West	*75	(68–81)	*196	(185–207)
3506	Mississauga Halton	104	(97–110)	*158	(150–167)
3507	Toronto Central	*99	(93–105)	*121	(114–127)
3508	Central	*87	(82–91)	*145	(139–151)
3509	Central East	103	(98–109)	*190	(182–197)
3510	South East	*117	(108–126)	*245	(232–258)
3511	Champlain	*113	(107–119)	*199	(191–207)
3512	North Simcoe Muskoka	*125	(115–136)	*195	(182–207)
3513	North East	*128	(119–136)	*259	(246–271)
3514	North West	*153	(137–169)	*236	(216–256)
<b>Manitoba</b>		<b>*118</b>	<b>(111–124)</b>	<b>*189</b>	<b>(181–197)</b>
4610	Winnipeg	*119	(110–127)	*182	(171–193)
4615	Brandon	*143	(109–178)	209	(166–252)
4625	South Eastman	114	(85–144)	208	(169–247)
4630	Interlake	91	(70–111)	174	(147–202)
4640	Central	124	(101–147)	196	(167–225)
4645	Assiniboine	118	(93–143)	192	(160–224)

Map Code	Health Region	Hip Replacement 2011–2012		Knee Replacement 2011–2012	
		Age-Standardized Rate per 100,000	95% CI	Age-Standardized Rate per 100,000	95% CI
<b>Saskatchewan</b>		<b>*128</b>	<b>(121–136)</b>	<b>*213</b>	<b>(204–222)</b>
4701	Sun Country	109	(81–138)	181	(145–218)
4702	Five Hills	115	(87–142)	*235	(194–276)
4704	Regina	100	(86–113)	176	(159–194)
4705	Sunrise	*146	(113–179)	*210	(174–245)
4706	Saskatoon	*144	(129–158)	*238	(219–256)
4709	Prince Albert	*166	(136–197)	*247	(211–282)
4710	Prairie North	124	(94–153)	170	(136–204)
<b>Alberta</b>		<b>*128</b>	<b>(124–132)</b>	<b>*199</b>	<b>(194–204)</b>
4831	South Zone	*139	(124–154)	*263	(243–284)
4832	Calgary Zone	*126	(119–133)	*181	(172–189)
4833	Central Zone	*140	(128–152)	*251	(235–267)
4834	Edmonton Zone	*124	(117–131)	*186	(177–195)
4835	North Zone	*121	(108–134)	176	(161–192)
<b>British Columbia</b>		<b>*113</b>	<b>(109–116)</b>	<b>*157</b>	<b>(153–161)</b>
5911	East Kootenay	*149	(122–175)	*227	(195–258)
5912	Kootenay Boundary	*151	(126–176)	190	(162–218)
5913	Okanagan	*132	(121–143)	176	(163–189)
5914	Thompson/Cariboo/Shuswap	*156	(140–173)	*233	(214–252)
5921	Fraser East	108	(95–121)	*203	(185–220)
5922	Fraser North	*88	(79–96)	*119	(109–128)
5923	Fraser South	*85	(78–92)	*145	(136–154)
5931	Richmond	*74	(60–87)	*100	(85–116)
5932	Vancouver	*76	(69–84)	*81	(74–89)
5933	North Shore	*126	(113–139)	158	(143–172)
5941	South Vancouver Island	*123	(111–134)	*137	(125–148)
5942	Central Vancouver Island	*142	(128–155)	*187	(173–202)
5943	North Vancouver Island	*163	(141–185)	*204	(181–227)
5951	Northwest	*157	(126–188)	*235	(198–272)
5952	Northern Interior	*165	(142–187)	*290	(260–320)
5953	Northeast	*149	(114–184)	152	(116–188)
<b>Yukon</b>		<b>112</b>	<b>(63–161)</b>	<b>165</b>	<b>(111–219)</b>
<b>Northwest Territories</b>		<b>*53</b>	<b>(19–86)</b>	<b>*63</b>	<b>(28–97)</b>
<b>Nunavut</b>		<b>*</b>	<b>**</b>	<b>*390</b>	<b>(249–530)</b>
<b>Canada</b>		<b>105</b>	<b>(103–106)</b>	<b>169</b>	<b>(168–171)</b>

## Hip replacement

Age-standardized rate of unilateral or bilateral hip replacement surgery performed on inpatients in acute care hospitals, per 100,000 population age 20 and older. Hip replacement surgery has the potential to improve functional status, reduce pain and contribute to other gains in health-related quality of life. Wide inter-regional variation in hip replacement rates may be attributable to numerous factors, including the availability of services, provider practice patterns and patient preferences.

**Sources:** Discharge Abstract Database, Canadian Institute for Health Information; Fichier des hospitalisations MED-ÉCHO, ministère de la Santé et des Services sociaux du Québec.

## Knee replacement

Age-standardized rate of unilateral or bilateral knee replacement surgery performed on patients in acute care hospitals or same-day surgery facilities, per 100,000 population age 20 and older. Knee replacement surgery has the potential to improve functional status, reduce pain and contribute to other gains in health-related quality of life. Wide inter-regional variation in knee replacement rates may be attributable to numerous factors, including the availability of services, provider practice patterns and patient preferences.

**Sources:** Discharge Abstract Database and National Ambulatory Care Reporting System, Canadian Institute for Health Information; Fichier des hospitalisations MED-ÉCHO, ministère de la Santé et des Services sociaux du Québec.

Map Code	Health Region	Percutaneous Coronary Intervention 2011–2012		Coronary Artery Bypass Graft Surgery 2011–2012	
		Age-Standardized Rate per 100,000	95% CI	Age-Standardized Rate per 100,000	95% CI
<b>Newfoundland and Labrador</b>		<b>*157</b>	<b>(146–168)</b>	<b>*71</b>	<b>(64–78)</b>
1011	Eastern	166	(151–181)	71	(61–81)
1012	Central	*137	(115–159)	76	(60–91)
1013	Western	*137	(112–162)	67	(50–85)
<b>Prince Edward Island</b>		<b>*144</b>	<b>(125–164)</b>	<b>62</b>	<b>(49–75)</b>
<b>Nova Scotia</b>		<b>*157</b>	<b>(149–165)</b>	<b>*56</b>	<b>(52–61)</b>
1211	South Shore	156	(126–186)	59	(42–76)
1212	South West Nova	169	(137–201)	68	(48–87)
1223	Annapolis Valley	160	(134–186)	62	(46–77)
1234	Colchester East Hants	167	(138–196)	64	(46–82)
1258	Cape Breton	162	(139–186)	61	(48–74)
1269	Capital	*153	(141–166)	*49	(42–56)
<b>New Brunswick</b>		<b>*203</b>	<b>(193–213)</b>	<b>*73</b>	<b>(67–79)</b>
1301	Zone 1 (Moncton area)	184	(165–202)	63	(52–74)
1302	Zone 2 (Saint John area)	*253	(230–277)	72	(59–84)
1303	Zone 3 (Fredericton area)	*234	(211–257)	70	(57–83)
1306	Zone 6 (Bathurst area)	195	(165–224)	78	(60–95)
<b>Quebec</b>		..	.. ..	<b>61</b>	<b>(59–62)</b>
2401	Bas-Saint-Laurent	..	.. ..	62	(52–72)
2402	Saguenay–Lac-Saint-Jean	..	.. ..	68	(58–77)
2403	Capitale-Nationale	..	.. ..	*69	(63–75)
2404	Mauricie et Centre-du-Québec	..	.. ..	*54	(48–60)
2405	Estrie	..	.. ..	*45	(37–52)
2406	Montréal	..	.. ..	*55	(51–58)
2407	Outaouais	..	.. ..	*52	(44–60)
2408	Abitibi-Témiscamingue	..	.. ..	68	(55–82)
2409	Côte-Nord	..	.. ..	76	(59–94)
2411	Gaspésie–Îles-de-la-Madeleine	..	.. ..	*88	(71–106)
2412	Chaudière-Appalaches	..	.. ..	68	(60–76)
2413	Laval	..	.. ..	*53	(46–60)
2414	Lanaudière	..	.. ..	59	(52–66)
2415	Laurentides	..	.. ..	62	(55–69)
2416	Montérégie	..	.. ..	*66	(62–71)
<b>Ontario</b>		<b>171</b>	<b>(169–173)</b>	<b>*66</b>	<b>(65–68)</b>
3501	Erie St. Clair	168	(158–178)	*82	(75–89)
3502	South West	*132	(125–140)	64	(59–69)
3503	Waterloo Wellington	*105	(97–113)	62	(56–68)
3504	Hamilton Niagara Haldimand Brant	*187	(179–194)	*79	(74–84)
3505	Central West	*202	(191–213)	*73	(66–80)
3506	Mississauga Halton	*146	(139–154)	*67	(62–73)
3507	Toronto Central	*144	(136–151)	*42	(38–46)
3508	Central	*158	(152–165)	*53	(50–57)
3509	Central East	171	(165–178)	*55	(51–59)
3510	South East	182	(171–194)	*96	(88–105)
3511	Champlain	176	(168–184)	*56	(52–61)
3512	North Simcoe Muskoka	175	(163–187)	*85	(77–94)
3513	North East	*259	(246–272)	66	(60–72)
3514	North West	*270	(249–291)	*105	(92–118)
<b>Manitoba</b>		<b>*198</b>	<b>(190–207)</b>	<b>*71</b>	<b>(66–76)</b>
4610	Winnipeg	*191	(180–202)	*71	(65–78)
4615	Brandon	144	(109–178)	*42	(23–61)
4625	South Eastman	189	(152–226)	75	(51–99)
4630	Interlake	190	(160–221)	57	(41–73)
4640	Central	*218	(188–248)	76	(58–94)
4645	Assiniboine	200	(167–233)	*44	(29–59)

Map Code	Health Region	Percutaneous Coronary Intervention 2011–2012		Coronary Artery Bypass Graft Surgery 2011–2012	
		Age-Standardized Rate per 100,000	95% CI	Age-Standardized Rate per 100,000	95% CI
<b>Saskatchewan</b>		<b>*202</b>	<b>(193–211)</b>	<b>*69</b>	<b>(64–75)</b>
4701	Sun Country	176	(139–213)	44	(27–62)
4702	Five Hills	183	(145–220)	61	(39–83)
4704	Regina	*194	(176–212)	71	(60–83)
4705	Sunrise	*257	(215–300)	75	(54–96)
4706	Saskatoon	*211	(193–228)	62	(53–72)
4709	Prince Albert	*220	(186–253)	76	(56–97)
4710	Prairie North	166	(133–198)	60	(40–79)
<b>Alberta</b>		<b>173</b>	<b>(168–178)</b>	<b>*45</b>	<b>(42–47)</b>
4831	South Zone	*137	(122–151)	*46	(38–55)
4832	Calgary Zone	*152	(144–159)	*36	(32–40)
4833	Central Zone	*193	(179–207)	*43	(36–49)
4834	Edmonton Zone	174	(166–183)	*49	(45–54)
4835	North Zone	*227	(210–245)	59	(50–69)
<b>British Columbia</b>		<b>*163</b>	<b>(160–167)</b>	<b>*56</b>	<b>(53–58)</b>
5911	East Kootenay	159	(131–186)	*38	(25–52)
5912	Kootenay Boundary	153	(127–178)	*44	(31–58)
5913	Okanagan	*139	(127–151)	*37	(31–43)
5914	Thompson/Cariboo/Shuswap	*139	(124–154)	*42	(34–50)
5921	Fraser East	*235	(217–254)	*77	(66–87)
5922	Fraser North	172	(160–183)	63	(56–70)
5923	Fraser South	*190	(180–200)	64	(58–70)
5931	Richmond	*126	(109–143)	51	(40–62)
5932	Vancouver	*127	(118–137)	*50	(44–56)
5933	North Shore	*142	(128–156)	59	(50–68)
5941	South Vancouver Island	*157	(144–169)	*53	(46–60)
5942	Central Vancouver Island	183	(169–198)	58	(49–66)
5943	North Vancouver Island	*151	(130–172)	57	(45–70)
5951	Northwest	*210	(174–245)	63	(43–83)
5952	Northern Interior	190	(166–214)	68	(54–83)
5953	Northeast	186	(147–225)	57	(35–79)
<b>Yukon</b>		<b>196</b>	<b>(138–254)</b>	<b>82</b>	<b>(40–124)</b>
<b>Northwest Territories</b>		<b>215</b>	<b>(149–280)</b>	<b>*17</b>	<b>(1–33)</b>
<b>Nunavut</b>		<b>117</b>	<b>(56–178)</b>	<b>64</b>	<b>(11–116)</b>
<b>Canada</b>		<b>172</b>	<b>(171–174)</b>	<b>62</b>	<b>(61–62)</b>

### Percutaneous coronary intervention

Age-standardized rate of percutaneous coronary intervention (PCI) performed on patients in acute care hospitals, same-day surgery facilities or catheterization laboratories, per 100,000 population age 20 and older. In many cases, PCI serves as a nonsurgical alternative to coronary artery bypass graft (CABG) surgery and is undertaken for the purpose of opening obstructed coronary arteries. The choice of revascularization mode (that is, PCI or CABG) depends on numerous factors, including severity of coronary artery disease, physician preferences, availability of services, referral patterns and differences in population health and socio-economic status.

**Note:** Rates for Quebec are not available due to differences in data collection; the Canada rate does not include Quebec.

**Sources:** Discharge Abstract Database and National Ambulatory Care Reporting System, Canadian Institute for Health Information.

### Coronary artery bypass graft surgery

Age-standardized rate of coronary artery bypass graft (CABG) surgery performed on inpatients in acute care hospitals, per 100,000 population age 20 and older. As with other types of surgical procedures, variations in CABG surgery rates can be attributed to numerous factors, including differences in population demographics and health status, physician practice patterns and availability of services. In cases amenable to treatment with less invasive procedures, percutaneous coronary intervention (PCI), an alternative treatment to improve blood flow to the heart muscle, may be used. Variations in the extent to which PCI is utilized may result in variations in bypass surgery.

**Sources:** Discharge Abstract Database, Canadian Institute for Health Information; Fichier des hospitalisations MED-ÉCHO, ministère de la Santé et des Services sociaux du Québec.

Map Code	Health Region	Cardiac Revascularization 2011–2012		Hysterectomy 2011–2012	
		Age-Standardized Rate per 100,000	95% CI	Age-Standardized Rate per 100,000	95% CI
<b>Newfoundland and Labrador</b>		<b>226</b>	<b>(213–239)</b>	<b>*396</b>	<b>(368–423)</b>
1011	Eastern	235	(217–252)	*366	(332–401)
1012	Central	213	(186–240)	*435	(365–506)
1013	Western	*200	(170–231)	*473	(392–555)
<b>Prince Edward Island</b>		<b>*207</b>	<b>(183–230)</b>	<b>*381</b>	<b>(326–435)</b>
<b>Nova Scotia</b>		<b>*213</b>	<b>(204–222)</b>	<b>*411</b>	<b>(389–432)</b>
1211	South Shore	215	(181–250)	319	(241–396)
1212	South West Nova	235	(198–272)	402	(310–494)
1223	Annapolis Valley	222	(192–253)	*593	(496–690)
1234	Colchester East Hants	230	(196–264)	*585	(487–684)
1258	Cape Breton	223	(197–250)	*421	(358–483)
1269	Capital	*202	(188–216)	*291	(265–316)
<b>New Brunswick</b>		<b>*268</b>	<b>(256–280)</b>	<b>*421</b>	<b>(397–446)</b>
1301	Zone 1 (Moncton area)	247	(225–268)	*411	(366–456)
1302	Zone 2 (Saint John area)	*325	(298–351)	*437	(387–488)
1303	Zone 3 (Fredericton area)	*303	(277–330)	351	(305–396)
1306	Zone 6 (Bathurst area)	*272	(238–307)	352	(281–424)
<b>Quebec</b>		..	.. ..	<b>*289</b>	<b>(283–295)</b>
2401	Bas-Saint-Laurent	..	.. ..	*414	(363–465)
2402	Saguenay–Lac-Saint-Jean	..	.. ..	*434	(390–478)
2403	Capitale-Nationale	..	.. ..	*230	(212–248)
2404	Mauricie et Centre-du-Québec	..	.. ..	*361	(332–389)
2405	Estrie	..	.. ..	*392	(355–430)
2406	Montréal	..	.. ..	*201	(191–211)
2407	Outaouais	..	.. ..	*267	(240–294)
2408	Abitibi-Témiscamingue	..	.. ..	*472	(411–534)
2409	Côte-Nord	..	.. ..	335	(275–395)
2411	Gaspésie–Îles-de-la-Madeleine	..	.. ..	*427	(350–503)
2412	Chaudière-Appalaches	..	.. ..	*374	(342–405)
2413	Laval	..	.. ..	*267	(242–291)
2414	Lanaudière	..	.. ..	314	(288–339)
2415	Laurentides	..	.. ..	307	(284–331)
2416	Montérégie	..	.. ..	310	(296–325)
<b>Ontario</b>		<b>*236</b>	<b>(233–238)</b>	<b>*306</b>	<b>(301–310)</b>
3501	Erie St. Clair	*249	(237–261)	*407	(381–433)
3502	South West	*195	(186–204)	*408	(386–430)
3503	Waterloo Wellington	*166	(156–176)	*375	(353–397)
3504	Hamilton Niagara Haldimand Brant	*265	(256–273)	*365	(349–381)
3505	Central West	*274	(261–287)	*258	(241–275)
3506	Mississauga Halton	*211	(202–220)	*210	(197–223)
3507	Toronto Central	*184	(175–192)	*171	(160–183)
3508	Central	*211	(203–218)	*237	(226–247)
3509	Central East	226	(218–234)	309	(295–322)
3510	South East	*275	(261–290)	*359	(331–388)
3511	Champlain	230	(222–239)	326	(310–342)
3512	North Simcoe Muskoka	*259	(245–274)	*369	(340–398)
3513	North East	*324	(310–339)	*489	(457–521)
3514	North West	*374	(349–399)	354	(313–394)
<b>Manitoba</b>		<b>*268</b>	<b>(258–278)</b>	<b>*358</b>	<b>(340–375)</b>
4610	Winnipeg	*261	(248–273)	309	(288–330)
4615	Brandon	*186	(146–225)	*461	(367–554)
4625	South Eastman	257	(214–300)	*470	(381–559)
4630	Interlake	246	(212–281)	*402	(326–478)
4640	Central	*293	(258–328)	*423	(356–490)
4645	Assiniboine	242	(206–278)	*529	(435–623)



Map Code	Health Region	Cardiac Revascularization 2011–2012		Hysterectomy 2011–2012	
		Age-Standardized Rate per 100,000	95% CI	Age-Standardized Rate per 100,000	95% CI
<b>Saskatchewan</b>		<b>*269</b>	<b>(258–279)</b>	<b>*469</b>	<b>(447–491)</b>
4701	Sun Country	217	(176–257)	*527	(416–638)
4702	Five Hills	243	(200–287)	*587	(470–704)
4704	Regina	*261	(240–282)	*418	(377–459)
4705	Sunrise	*332	(285–380)	*659	(533–784)
4706	Saskatoon	*271	(251–291)	*456	(417–495)
4709	Prince Albert	*296	(257–335)	296	(231–361)
4710	Prairie North	225	(188–263)	*581	(479–684)
<b>Alberta</b>		<b>*217</b>	<b>(212–222)</b>	<b>*376</b>	<b>(366–386)</b>
4831	South Zone	*183	(166–200)	*478	(433–522)
4832	Calgary Zone	*187	(178–195)	*300	(285–314)
4833	Central Zone	236	(220–251)	*517	(481–553)
4834	Edmonton Zone	*222	(213–232)	*342	(325–359)
4835	North Zone	*287	(267–306)	*536	(497–574)
<b>British Columbia</b>		<b>*218</b>	<b>(213–222)</b>	<b>*285</b>	<b>(277–293)</b>
5911	East Kootenay	*197	(166–228)	379	(309–448)
5912	Kootenay Boundary	*197	(168–226)	*412	(335–488)
5913	Okanagan	*175	(162–189)	*381	(347–416)
5914	Thompson/Cariboo/Shuswap	*181	(164–198)	*498	(445–551)
5921	Fraser East	*312	(290–333)	*476	(433–518)
5922	Fraser North	234	(221–248)	*210	(192–227)
5923	Fraser South	*253	(241–265)	*235	(217–253)
5931	Richmond	*176	(156–196)	*181	(153–209)
5932	Vancouver	*176	(165–187)	*137	(123–150)
5933	North Shore	*199	(183–215)	*184	(160–208)
5941	South Vancouver Island	*207	(193–221)	*275	(248–303)
5942	Central Vancouver Island	238	(222–255)	*498	(450–546)
5943	North Vancouver Island	*208	(183–232)	*425	(358–493)
5951	Northwest	271	(230–312)	345	(274–416)
5952	Northern Interior	257	(229–285)	*575	(506–643)
5953	Northeast	240	(195–285)	332	(259–405)
<b>Yukon</b>		<b>278</b>	<b>(206–349)</b>	<b>368</b>	<b>(265–470)</b>
<b>Northwest Territories</b>		<b>232</b>	<b>(164–299)</b>	<b>310</b>	<b>(217–403)</b>
<b>Nunavut</b>		<b>181</b>	<b>(100–261)</b>	<b>289</b>	<b>(161–416)</b>
<b>Canada</b>		<b>233</b>	<b>(231–235)</b>	<b>320</b>	<b>(317–323)</b>

### Cardiac revascularization

Age-standardized rate of coronary artery bypass graft (CABG) surgery performed on inpatients in acute care hospitals or percutaneous coronary intervention (PCI) performed on patients in acute care hospitals, same-day surgery facilities or catheterization laboratories, per 100,000 population age 20 and older. The choice of revascularization mode (that is, PCI or CABG) depends on numerous factors, including severity of coronary artery disease, physician preferences, availability of services, referral patterns and differences in population health and socio-economic status. The combined cardiac revascularization rate represents total activity of cardiac revascularization in a jurisdiction.

**Note:** Rates for Quebec are not available due to differences in data collection; the Canada rate does not include Quebec.

**Sources:** Discharge Abstract Database and National Ambulatory Care Reporting System, Canadian Institute for Health Information.

### Hysterectomy

Age-standardized rate of hysterectomy provided to patients in acute care hospitals or same-day surgery facilities, per 100,000 women age 20 and older. Similar to other types of surgical procedures, variations in hysterectomy rates can be attributed to numerous factors, including differences in population demographics and health status, physician practice patterns and availability of services.

**Sources:** Discharge Abstract Database and National Ambulatory Care Reporting System, Canadian Institute for Health Information; Fichier des hospitalisations MED-ÉCHO, ministère de la Santé et des Services sociaux du Québec.

Map Code	Health Region	Inflow/Outflow Ratio, 2011–2012					
		Overall	Hip Replacement	Knee Replacement	Hysterectomy	Percutaneous Coronary Intervention	Bypass Surgery
<b>Newfoundland and Labrador</b>		..	..	..	..	..	..
1011	Eastern	1.10	1.01	0.98	1.08	1.62	1.79
1012	Central	0.84	0.93	1.05	0.91	0.00	0.00
1013	Western	0.93	1.08	1.06	0.99	0.00	0.00
<b>Prince Edward Island</b>		<b>0.91</b>	<b>0.91</b>	<b>0.95</b>	<b>0.96</b>	<b>0.00</b>	<b>0.00</b>
<b>Nova Scotia</b>		..	..	..	..	..	..
1211	South Shore	0.67	0.00	0.00	0.80	0.00	0.00
1212	South West Nova	0.74	0.00	0.00	0.63	0.00	0.00
1223	Annapolis Valley	0.99	1.60	1.61	1.21	0.00	0.00
1234	Colchester East Hants	0.58	0.00	0.00	0.99	0.00	0.00
1258	Cape Breton	0.90	1.06	1.07	0.72	0.00	0.00
1269	Capital	1.43	1.46	1.48	1.25	2.81	3.40
<b>New Brunswick</b>		..	..	..	..	..	..
1301	Zone 1 (Moncton area)	1.11	1.21	1.28	1.23	0.00	0.00
1302	Zone 2 (Saint John area)	1.14	1.00	0.96	0.99	3.63	4.24
1303	Zone 3 (Fredericton area)	0.91	0.99	1.09	0.87	0.00	0.00
1306	Zone 6 (Bathurst area)	0.93	1.07	0.96	0.88	0.00	0.00
<b>Quebec</b>		..	..	..	..	..	..
2401	Bas-Saint-Laurent	0.93	0.95	0.99	0.96	..	0.00
2402	Saguenay–Lac-Saint-Jean	0.99	1.01	1.03	1.05	..	1.00
2403	Capitale-Nationale	1.32	1.05	1.09	1.37	..	2.44
2404	Mauricie et Centre-du-Québec	0.90	0.94	1.08	0.98	..	0.00
2405	Estrie	1.09	0.66	0.54	1.05	..	1.61
2406	Montréal	1.40	1.68	1.73	1.63	..	3.14
2407	Outaouais	0.77	0.85	0.84	0.50	..	0.00
2408	Abitibi-Témiscamingue	0.96	0.92	1.07	1.02	..	0.00
2409	Côte-Nord	0.78	0.83	0.81	0.74	..	0.00
2411	Gaspésie–Îles-de-la-Madeleine	0.72	0.63	0.75	0.62	..	0.00
2412	Chaudière-Appalaches	0.78	1.25	1.12	0.76	..	0.00
2413	Laval	0.77	0.46	0.54	0.78	..	0.00
2414	Lanaudière	0.72	0.74	0.62	0.56	..	0.00
2415	Laurentides	0.76	0.62	0.68	0.70	..	0.00
2416	Montérégie	0.78	0.70	0.75	0.77	..	0.00
<b>Ontario</b>		..	..	..	..	..	..
3501	Erie St. Clair	0.88	0.91	0.90	0.85	0.56	0.00
3502	South West	1.07	0.95	0.95	1.11	1.09	1.55
3503	Waterloo Wellington	0.91	1.00	0.99	0.90	1.43	1.43
3504	Hamilton Niagara Haldimand Brant	1.00	0.95	0.95	1.05	0.98	1.12
3505	Central West	0.76	0.78	0.67	0.57	0.14	0.00
3506	Mississauga Halton	0.97	0.83	0.98	0.80	1.56	1.43
3507	Toronto Central	1.90	2.41	2.50	2.56	3.08	4.69
3508	Central	0.88	0.91	1.03	0.90	0.79	1.03
3509	Central East	0.82	0.70	0.83	0.80	0.57	0.00
3510	South East	0.96	1.06	1.09	1.01	0.97	0.94
3511	Champlain	1.11	1.02	1.00	1.13	1.11	1.41
3512	North Simcoe Muskoka	0.87	0.68	0.71	0.89	0.00	0.00
3513	North East	0.93	0.77	0.80	0.89	0.91	0.79
3514	North West	0.92	0.96	0.98	0.79	0.94	0.00
<b>Manitoba</b>		..	..	..	..	..	..
4610	Winnipeg	1.40	1.51	1.56	1.60	1.85	1.81
4615	Brandon	1.61	1.00	2.02	2.34	0.00	0.00
4625	South Eastman	0.56	0.00	0.00	0.33	0.00	0.00
4630	Interlake	0.51	0.00	0.00	0.29	0.00	0.00
4640	Central	0.77	1.18	1.01	0.11	0.00	0.00
4645	Assiniboine	0.54	0.00	0.00	0.06	0.00	0.00

Map Code	Health Region	Inflow/Outflow Ratio, 2011–2012					
		Overall	Hip Replacement	Knee Replacement	Hysterectomy	Percutaneous Coronary Intervention	Bypass Surgery
<b>Saskatchewan</b>		..	..	..	..	..	..
4701	Sun Country	0.51	0.00	0.00	0.35	0.00	0.00
4702	Five Hills	0.82	0.42	0.30	0.83	0.00	0.00
4704	Regina	1.23	1.42	1.34	1.21	1.95	1.95
4705	Sunrise	0.83	0.00	0.00	1.06	0.00	0.00
4706	Saskatoon	1.37	1.91	1.94	1.41	1.86	1.99
4709	Prince Albert	0.98	0.70	0.76	1.04	0.00	0.00
4710	Prairie North	1.03	0.00	0.00	1.30	0.00	0.00
<b>Alberta</b>		..	..	..	..	..	..
4831	South Zone	0.92	1.10	1.29	0.94	0.00	0.00
4832	Calgary Zone	1.07	1.10	1.01	1.08	1.43	1.55
4833	Central Zone	0.80	0.66	0.67	0.76	0.00	0.00
4834	Edmonton Zone	1.25	1.21	1.23	1.26	1.85	1.71
4835	North Zone	0.78	0.67	0.66	0.65	0.00	0.00
<b>British Columbia</b>		..	..	..	..	..	..
5911	East Kootenay	0.84	0.75	0.80	0.63	0.00	0.00
5912	Kootenay Boundary	0.84	0.71	0.79	0.80	0.00	0.00
5913	Okanagan	1.04	1.04	1.02	0.98	1.88	0.00
5914	Thompson/Cariboo/Shuswap	0.92	0.59	0.73	1.04	0.00	0.00
5921	Fraser East	0.92	0.73	0.89	0.91	0.00	0.00
5922	Fraser North	1.03	0.66	0.74	0.80	2.57	2.19
5923	Fraser South	0.78	0.50	0.62	0.64	0.00	0.00
5931	Richmond	0.97	1.41	2.20	0.94	0.00	0.00
5932	Vancouver	1.61	3.31	2.99	2.54	3.49	4.38
5933	North Shore	0.88	0.80	0.97	0.81	0.00	0.00
5941	South Vancouver Island	1.15	0.99	0.96	1.09	2.29	2.88
5942	Central Vancouver Island	0.85	0.81	0.89	0.86	0.00	0.00
5943	North Vancouver Island	0.84	1.08	1.14	1.01	0.00	0.00
5951	Northwest	0.82	0.39	0.55	0.94	0.00	0.00
5952	Northern Interior	0.91	0.80	0.85	0.71	0.00	0.00
5953	Northeast	0.86	0.84	1.12	0.83	0.00	0.00
<b>Yukon</b>		<b>0.83</b>	<b>0.00</b>	<b>0.60</b>	<b>0.96</b>	<b>0.00</b>	<b>0.00</b>
<b>Northwest Territories</b>		<b>0.98</b>	<b>0.18</b>	<b>0.13</b>	<b>0.85</b>	<b>0.00</b>	<b>0.00</b>
<b>Nunavut</b>		<b>0.43</b>	<b>0.00</b>	<b>0.00</b>	<b>0.23</b>	<b>0.00</b>	<b>0.00</b>
<b>Canada</b>		..	..	..	..	..	..

### Inflow/outflow ratio

A ratio of the number of discharges from relevant facilities (acute care/same-day surgery) within a given region divided by the number of discharges generated by residents of that region. An overall ratio is calculated for discharges associated with any diagnosis or procedure for acute care discharges only and separately for hip replacement, knee replacement, hysterectomy, percutaneous coronary intervention (PCI) and coronary artery bypass surgery procedures from all relevant facilities. A ratio of less than one indicates that health care utilization by residents of a region exceeded care provided within that region, suggesting an outflow effect. A ratio greater than one indicates that care provided by a region exceeded the utilization by its residents, suggesting an inflow effect. A ratio of one indicates that care provided by a region is equivalent to the utilization by its residents, suggesting that inflow and outflow activity, if it exists at all, is balanced. A ratio of zero is an indication that none of the institutions in the region provided the service and residents received care outside of their region.

**Note:** The PCI inflow/outflow ratios for Quebec are not available due to differences in data collection.

**Sources:** Discharge Abstract Database and National Ambulatory Care Reporting System, Canadian Institute for Health Information; Fichier des hospitalisations MED-ÉCHO, ministère de la Santé et des Services sociaux du Québec.



Map Code	Health Region	General/Family Physicians 2011		Specialist Physicians 2011	
		Rate per 100,000	95% CI	Rate per 100,000	95% CI
<b>Newfoundland and Labrador</b>		<b>123</b>	<b>(113–132)</b>	<b>108</b>	<b>(99–117)</b>
1011	Eastern	126	(113–138)	136	(123–149)
1012	Central	123	(100–145)	69	(52–86)
1013	Western	116	(92–140)	74	(55–93)
<b>Prince Edward Island</b>		<b>97</b>	<b>(81–113)</b>	<b>80</b>	<b>(66–95)</b>
<b>Nova Scotia</b>		<b>122</b>	<b>(115–129)</b>	<b>119</b>	<b>(112–126)</b>
1211	South Shore	114	(86–141)	59	(39–78)
1212	South West Nova	91	(66–115)	44	(27–62)
1223	Annapolis Valley	108	(85–130)	82	(63–102)
1234	Colchester East Hants	93	(71–115)	56	(39–73)
1258	Cape Breton	112	(93–131)	85	(68–101)
1269	Capital	141	(130–152)	181	(168–194)
<b>New Brunswick</b>		<b>113</b>	<b>(106–121)</b>	<b>100</b>	<b>(93–107)</b>
1301	Zone 1 (Moncton area)	114	(99–128)	118	(104–133)
1302	Zone 2 (Saint John area)	107	(91–122)	123	(106–139)
1303	Zone 3 (Fredericton area)	110	(94–125)	74	(62–87)
1306	Zone 6 (Bathurst area)	117	(93–141)	86	(65–106)
<b>Quebec</b>		<b>114</b>	<b>(111–116)</b>	<b>117</b>	<b>(115–120)</b>
2401	Bas-Saint-Laurent	140	(124–157)	104	(90–118)
2402	Saguenay–Lac-Saint-Jean	124	(110–137)	87	(76–98)
2403	Capitale-Nationale	157	(148–166)	184	(174–194)
2404	Mauricie et Centre-du-Québec	107	(98–116)	81	(73–89)
2405	Estrie	131	(118–144)	146	(132–159)
2406	Montréal	122	(117–127)	214	(208–221)
2407	Outaouais	94	(84–104)	61	(53–69)
2408	Abitibi-Témiscamingue	134	(115–153)	84	(69–99)
2409	Côte-Nord	147	(123–171)	63	(47–78)
2411	Gaspésie–Îles-de-la-Madeleine	195	(167–224)	96	(76–115)
2412	Chaudière-Appalaches	108	(98–118)	75	(67–84)
2413	Laval	90	(80–99)	71	(63–79)
2414	Lanaudière	85	(76–93)	56	(49–63)
2415	Laurentides	94	(86–102)	51	(45–56)
2416	Montréal	95	(90–100)	66	(62–70)
<b>Ontario</b>		<b>95</b>	<b>(94–97)</b>	<b>99</b>	<b>(98–101)</b>
3501	Erie St. Clair	72	(66–79)	60	(54–65)
3502	South West	93	(87–99)	111	(104–118)
3503	Waterloo Wellington	84	(78–91)	61	(56–67)
3504	Hamilton Niagara Haldimand Brant	87	(82–91)	103	(97–108)
3505	Central West	65	(60–71)	44	(40–49)
3506	Mississauga Halton	79	(74–84)	63	(59–68)
3507	Toronto Central	170	(163–178)	300	(290–310)
3508	Central	85	(81–90)	71	(68–75)
3509	Central East	73	(69–77)	59	(55–63)
3510	South East	114	(105–124)	113	(104–122)
3511	Champlain	124	(118–130)	134	(128–141)
3512	North Simcoe Muskoka	92	(83–101)	56	(49–63)
3513	North East	99	(90–107)	69	(62–76)
3514	North West	116	(102–130)	69	(59–80)
<b>Manitoba</b>		<b>105</b>	<b>(99–110)</b>	<b>93</b>	<b>(88–99)</b>
4610	Winnipeg	114	(106–122)	152	(143–161)
4615	Brandon	166	(131–201)	87	(61–112)
4625	South Eastman	63	(45–82)	*	**
4630	Interlake	79	(60–98)	18	(9–27)
4640	Central	95	(76–113)	15	(7–22)
4645	Assiniboine	94	(71–117)	*	**

Map Code	Health Region	General/Family Physicians 2011		Specialist Physicians 2011	
		Rate per 100,000	95% CI	Rate per 100,000	95% CI
<b>Saskatchewan</b>		<b>100</b>	<b>(94–106)</b>	<b>80</b>	<b>(75–86)</b>
4701	Sun Country	72	(49–94)	*	**
4702	Five Hills	98	(71–124)	43	(26–61)
4704	Regina	103	(91–115)	96	(84–107)
4705	Sunrise	85	(60–110)	28	(14–42)
4706	Saskatoon	115	(103–127)	148	(134–161)
4709	Prince Albert	118	(94–142)	61	(44–78)
4710	Prairie North	104	(81–128)	25	(13–37)
<b>Alberta</b>		<b>111</b>	<b>(107–114)</b>	<b>106</b>	<b>(103–109)</b>
4831	South Zone	97	(86–109)	62	(53–71)
4832	Calgary Zone	119	(113–125)	127	(121–133)
4833	Central Zone	92	(84–101)	35	(29–40)
4834	Edmonton Zone	123	(117–129)	151	(144–158)
4835	North Zone	85	(77–94)	23	(19–28)
<b>British Columbia</b>		<b>117</b>	<b>(114–120)</b>	<b>95</b>	<b>(92–98)</b>
5911	East Kootenay	150	(123–177)	42	(28–56)
5912	Kootenay Boundary	163	(135–191)	51	(36–67)
5913	Okanagan	120	(109–132)	89	(79–99)
5914	Thompson/Cariboo/Shuswap	110	(96–123)	59	(49–69)
5921	Fraser East	94	(83–105)	45	(37–53)
5922	Fraser North	81	(74–88)	73	(66–79)
5923	Fraser South	79	(72–85)	48	(43–53)
5931	Richmond	88	(74–101)	64	(53–75)
5932	Vancouver	165	(155–174)	263	(251–275)
5933	North Shore	129	(116–142)	69	(60–79)
5941	South Vancouver Island	156	(143–169)	128	(116–139)
5942	Central Vancouver Island	130	(117–144)	61	(52–70)
5943	North Vancouver Island	157	(134–179)	69	(54–84)
5951	Northwest	128	(103–154)	30	(18–43)
5952	Northern Interior	129	(110–147)	55	(43–67)
5953	Northeast	88	(66–110)	16	(6–25)
<b>Yukon</b>		<b>169</b>	<b>(126–212)</b>	<b>32</b>	<b>(13–50)</b>
<b>Northwest Territories</b>		<b>65</b>	<b>(41–89)</b>	<b>23</b>	<b>(9–37)</b>
<b>Nunavut</b>		<b>33</b>	<b>(13–52)</b>	<b>*</b>	<b>**</b>
<b>Canada</b>		<b>106</b>	<b>(105–107)</b>	<b>103</b>	<b>(102–104)</b>

## Physicians

**General/family physicians** (family medicine and emergency family medicine specialists) and **specialist physicians** (medical, surgical and laboratory specialists) on December 31 of the reference year, per 100,000 population. The data includes active physicians in clinical practice and those not working in a clinical practice. Active physicians are defined as physicians who have an MD degree, are registered with a provincial/territorial medical college and have a valid mailing address. The data excludes residents and non-licensed physicians who requested that their information not be published in the *Canadian Medical Directory* as of December 31 of the reference year. Generally, specialist physicians include certificants of the Royal College of Physicians and Surgeons of Canada (RCPSC) and/or the Collège des médecins du Québec (CMQ), with the exception of Saskatchewan, Newfoundland and Labrador, Nova Scotia, New Brunswick, Yukon and Alberta, where specialists also include physicians who are licensed as specialists but who are not certified by the RCPSC or the CMQ (that is, non-certified specialists). For all other jurisdictions, non-certified specialists are counted as general practitioners. With the exception of the criteria just noted, all other physicians are counted as family practitioners, including certificants of the College of Family Physicians of Canada. For further methodological information, please see *Supply, Distribution and Migration of Canadian Physicians* ([www.cihi.ca](http://www.cihi.ca)). Physician-to-population rates are useful indicators and are published by a variety of agencies to support health human resources planning. However, due to differences in data collection, processing and reporting methodology, CIHI's results may differ from provincial and territorial data. Readers are cautioned to avoid inferences regarding the adequacy of provider resources based on supply ratios alone.

**Source:** Scott's Medical Database, Canadian Institute for Health Information.

Selected Health Professionals†											
2011											
	Nurses			Dental			Occupational	Physio-	Chiro-		Psychologists
	RNs	LPNs	Pharmacists	Dentists	Hygienists	Dietitians	Therapists	therapists	practicers	Optometrists	
N.L.	1,184	485	127	35	34	34	34	43	12	10	38
P.E.I.	1,040	426	122	50	62	47	30	42	5	12	25
N.S.	982	392	125	57	70	52	43	60	13	11	54
N.B.	1,087	384	101	42	57	45	42	60	8	15	57
Que.	838	267	99	59	68	35	49	48	16	17	96
Ont.	705	234	81	64	95	25	34	46	32	15	25
Man.	961	225	104	50	54	33	44	58	21	11	22
Sask.	927	263	113	38	52	29	28	57	18	13	46
Alta.	792	202	104	54	72	27	40	56	24	15	70
B.C.	656	185	92	67	72	25	38	62	24	13	24
Y.T.	1,101	218	89	126	77			97	23	26	..
N.W.T.	1,405	212	44	125	58	30	24	..	..	0	148
Nun.		166	90	195	15			..	..	0	57
<b>Canada</b>	<b>781</b>	<b>244</b>	<b>94</b>	<b>60</b>	<b>77</b>	<b>29</b>	<b>39</b>	<b>51</b>	<b>24</b>	<b>15</b>	<b>49</b>

† Rates per 100,000 population.

Health Expenditure										
Total Health Expenditure										
	Current Dollars (\$ '000,000)			GDP (%)	Public Sector (%)	By Use of Funds (Percentage Distribution of \$ '000,000), 2010				
	Actual 2010	Forecast 2011	Forecast 2012			Institutional Services	Professional Services	Drugs	Public Health	Capital and Other Health
N.L.	3,299	3,456	3,594	11.7	77.1	51.3	18.6	14.6	3.2	12.3
P.E.I.	846	889	927	16.9	73.5	43.4	19.4	15.2	4.4	17.6
N.S.	5,812	6,009	6,146	16.0	68.6	44.1	21.5	17.0	3.1	14.2
N.B.	4,529	4,691	4,778	15.4	69.5	45.3	21.0	17.3	3.3	13.1
Que.	40,525	42,329	43,976	12.7	70.6	41.5	22.5	19.5	3.1	13.5
Ont.	74,764	77,112	79,137	12.2	68.3	37.3	26.4	16.4	6.0	14.0
Man.	7,664	7,942	8,226	14.1	74.3	42.3	21.6	13.4	7.0	15.7
Sask.	6,234	6,671	6,933	9.8	76.4	41.9	22.6	14.0	8.4	13.0
Alta.	23,918	24,892	26,021	9.1	73.7	41.7	25.3	12.8	5.8	14.3
B.C.	24,396	25,456	26,486	12.0	70.3	35.2	27.9	13.0	6.7	17.3
Y.T.	289	313	313	12.4	79.1	40.8	18.2	9.1	17.6	14.3
N.W.T.	434	444	434	9.3	84.3	46.5	17.7	7.1	9.1	19.6
Nun.	403	418	447	22.9	93.2	45.3	17.1	5.3	11.3	21.0
<b>Canada</b>	<b>193,114</b>	<b>200,622</b>	<b>207,417</b>	<b>11.9</b>	<b>70.5</b>	<b>39.5</b>	<b>24.8</b>	<b>15.9</b>	<b>5.4</b>	<b>14.4</b>

	Public Sector Health Expenditure by Use of Funds (\$ per Capita), 2010					Private Sector Health Expenditure by Use of Funds (\$ per Capita), 2010				
	Institutional Services	Professional Services	Drugs	Public Health	Capital and Other Health	Institutional Services	Professional Services	Drugs	Public Health	Capital and Other Health
N.L.	3,036	831	292	204	614	274	368	652	0	183
P.E.I.	2,205	729	269	258	871	357	413	628	0	166
N.S.	2,354	787	366	193	521	361	536	683	0	352
N.B.	2,416	764	287	197	520	310	500	757	0	265
Que.	1,863	670	423	159	503	262	483	576	0	187
Ont.	1,712	913	347	340	548	397	577	578	0	241
Man.	2,304	845	314	435	713	325	494	520	0	260
Sask.	2,233	872	371	503	582	270	480	467	0	193
Alta.	2,423	969	332	373	641	258	659	492	0	281
B.C.	1,676	844	232	360	675	219	657	468	0	254
Y.T.	2,577	1,100	395	1,476	1,071	840	422	367	0	123
N.W.T.	3,873	1,459	371	900	1,753	737	299	332	0	189
Nun.	5,384	1,908	327	1,387	2,422	170	192	326	0	149
<b>Canada</b>	<b>1,920</b>	<b>843</b>	<b>345</b>	<b>306</b>	<b>576</b>	<b>316</b>	<b>561</b>	<b>555</b>	<b>0</b>	<b>236</b>

## Health professionals

**Registered nurses (RNs), licensed practical nurses (LPNs), pharmacists** (with the exception of Quebec and Nunavut), **physiotherapists** and **occupational therapists**: rates reflect health professionals registered with active-practising status and who are employed in these health professions. For other health professionals, data reflects personnel regardless of employment status and includes the number of active registered **dentists**, registered **dental hygienists**, registered **dietitians**, registered **chiropractors**, active registered **optometrists** and active registered **psychologists**.

**Notes:** Personnel-per-population rates are revised annually using the most recent Statistics Canada population estimates and therefore may differ slightly from previously published figures. Rates may differ from data published by provincial/territorial regulatory authorities due to the CIHI collection, processing and reporting methodology. Please consult *Canada's Health Care Providers, 1997 to 2011—A Reference Guide* for more detailed methodological notes, data quality issues and profession-specific information, or contact us at [hpd@cihi.ca](mailto:hpd@cihi.ca).

**Sources:** Health Personnel Database, Canadian Institute for Health Information.  
Statistics Canada. *Quarterly Demographic Estimates*. March 2012;25(4). 91-002-X.

## Total health expenditure

Total health expenditure includes any type of expenditure for which the primary objective is to improve or prevent the deterioration of health status. Presented in current dollars and as a proportion of gross domestic product (GDP). This definition allows economic activities to be measured according to primary purpose and secondary effects. Activities that are undertaken with the direct purpose of providing or maintaining health are included. Other activities are not included, even though they may impact health. For example, funds aligning with housing and income support policies that have social welfare goals as their primary purpose are not considered to be health expenditures, yet they are recognized as powerful factors in determining population health.

**Source:** National Health Expenditure Database, Canadian Institute for Health Information.

## Proportion of public sector

Public-sector health expenditure presented as a proportion of total health expenditure. Public sector includes health care spending by governments and government agencies.

**Source:** National Health Expenditure Database, Canadian Institute for Health Information.

## Total health expenditure by use of funds

Percentage distribution of total health expenditure by health-spending category. **Institutional services** includes hospitals and residential care types of facilities that are approved, funded or operated by provincial/territorial governments. **Professional services** includes expenditures on primary professional fees paid to physicians in private practice as well as for the services of privately practising dentists, denturists, chiropractors and other health professionals. This category does not include the remuneration of health professionals on the payrolls of hospitals or public-sector health agencies. Physician expenditures generally represents amounts that flow through provincial medical care plans. **Drugs** includes expenditures on prescribed drugs and non-prescribed products purchased in retail stores. This category does not include drugs dispensed in hospitals and other institutions. **Public health** is that provided by governments and governmental agencies and includes expenditures for items such as food and drug safety, health inspections, health promotion, community mental health programs, public health nursing, measures to prevent the spread of communicable diseases and other related activities. **Capital and other health** includes expenditure on construction, machinery, equipment and some software for hospitals, clinics, first-aid stations and residential care facilities (capital); the cost of providing health insurance programs by the government and private health insurance companies, and all costs for the infrastructure to operate health departments (administration expenditures); and, at the aggregate level, expenditures on home care, medical transportation (ambulances), hearing aids, other appliances and prostheses, health research and miscellaneous health care (other health).

**Source:** National Health Expenditure Database, Canadian Institute for Health Information.



## General Notes

- The methodology used for the indicators was designed to maximize inter-regional, interprovincial and interterritorial comparability given the characteristics of available national data sets. For this reason, there may be differences between definitions, data sources and extraction procedures used in some local, regional or provincial/territorial reports when compared with those described here. In addition, discrepancies may exist due to ongoing updates to the databases. Data presented here includes the latest updates available at the time of publication.
- Health regions are defined by provincial governments as areas of responsibility for regional health boards (that is, legislated) or as regions of interest to health care authorities. In order to determine what health region a patient belongs to, postal codes are first mapped to census geography using Statistics Canada's Postal Code Conversion File (PCCF, Vintage May 2011) and then to a health region using another Statistics Canada product, "Health Regions: Boundaries and Correspondence With Census Geography." Boundaries are those that were in effect as of December 2007, with the exception of Alberta zones, which are current as of December 2010.
- In Nova Scotia, there are new region codes for district health authorities and zones. Names remain unchanged.
- Data for regions with a population of at least 50,000 is reported. This threshold ensures stability in rates and reduces the risk of suppression stemming from privacy and confidentiality issues.
- Records with invalid, missing or partial postal codes cannot be mapped to a health region and therefore are not included in the regional rates. However, they are included in the provincial rates when possible. Non-Canadian residents are excluded from Canada rates; they are identified by mini-postal codes relating to one of the U.S. states or by a postal code value or other relevant data element indicating out-of-country residents.
- For indicators under the Equity dimension, patients were assigned neighbourhood-level income quintiles using Statistics Canada's Postal Code Conversion File Plus (PCCF+, Version 5J). The postal code of a patient's place of residence at the time of hospitalization was mapped to the smallest geographical unit available for analysis in the 2006 Canadian census—the dissemination area (DA)—and the corresponding neighbourhood income quintile of that DA was assigned to the patient.
- Unless otherwise specified, hospitalizations include discharges and deaths for inpatients in acute care hospitals for the reference period. Same-day surgery (outpatient) cases are included in several indicators. Patients admitted to non-acute care hospitals (for example, chronic care, psychiatric or rehabilitation facilities) are not included in the totals.

- For procedure-derived indicators (for example, hip and knee replacement, percutaneous coronary intervention and coronary artery bypass), rates are based on the total number of discharges rather than the total number of interventions. For example, a bilateral knee replacement provided at the same admission is counted as one event. Procedure-derived indicators include discharges from acute care hospitals and same-day surgery facilities, where applicable.
- Wherever information is available, procedures that were performed out of hospital and procedures that were abandoned after onset are excluded from the calculations.
- Standardized rates are adjusted by age (collapsed to five-year groupings) using a direct method of standardization based on the July 1, 1991, Canadian population.
- Beginning with 2011–2012 data, the acute myocardial infarction readmission indicator is revised to capture all-cause readmissions rather than readmissions for selected conditions. This indicator is now calculated using one year of data rather than three years of pooled data, counts readmissions within 30 days and, for the first time, includes data submitted by Quebec. Rates for previous years, calculated using the new definition, are provided in the *Health Indicators* e-publication.
- Beginning with 2011–2012 data, the name of the 30-day pediatric readmission indicator has been changed to 30-day readmission—patients age 19 and younger.
- For the mental health–related indicators (30-day readmission for mental illness [MI], repeat hospitalizations for MI, MI hospitalization, MI patient days and self-injury hospitalization), the population of interest includes discharges from general hospitals. All free-standing psychiatric hospitals identified by the owners of the databases used were not included. For the Discharge Abstract Database (DAD), these include all institutions identified as psychiatric hospitals; for hospitalization data from Quebec (MED-ÉCHO), these include all *centres hospitaliers de soins psychiatriques*. A list of psychiatric hospitals in the Ontario Mental Health Reporting System (OMHRS) was provided by the OMHRS program area at CIHI. Specialized acute services can be provided in general hospitals or psychiatric hospitals, and service delivery may differ slightly across jurisdictions. Therefore, interjurisdictional comparisons should be done with caution.
- The mental illnesses selected for the mental health–related indicators (except self-injury hospitalization) are substance-related disorders; schizophrenia, delusional and non-organic psychotic disorders; mood disorders; anxiety disorders; and selected disorders of adult personality and behaviour.
- For indicators that include data from OMHRS, data that is available up until September of the next fiscal year is used. For example, rates for 2011–2012 include OMHRS data submitted to CIHI up until September 2012.
- Starting with the *Health Indicators 2012* report, Weyburn Mental Health Centre in Saskatchewan is included in all mental health–related indicators (30-day readmission for MI, repeat hospitalizations for MI, MI hospitalization, MI patient days and self-injury hospitalization). As a result, rates for 2010–2011 and onwards for Sun Country Health Region (4701) are not comparable with those reported in previous years.



- For 30-day readmission for MI, MI hospitalization, MI patient days and self-injury hospitalization for North East LHIN, rates for 2009–2010 are not comparable with those reported in later years. This is because Brant Community Healthcare System—Brantford General Hospital did not submit its 2009–2010 data to the Ontario Mental Health Reporting System as of the reporting deadline for the *Health Indicators 2011* report.
- To ensure interprovincial comparability of indicators, diagnosis codes representing diabetes without complications (E10.9, E11.9, E13.9, E14.9) were recoded to diabetes with complications as per the Canadian coding standards on applicable records for Quebec MED-ÉCHO data. Details are available upon request.
- Due to differences in data submission, the same Manitoba or Quebec resident treated in and outside of the respective province could not be identified as the same individual. This may affect a small number of cases for indicators that require tracking patients beyond one hospitalization.
- See the *Health Indicators* e-publication ([www.cihi.ca](http://www.cihi.ca) or [www.statcan.gc.ca](http://www.statcan.gc.ca)) for diagnosis and procedure codes used to extract the indicator data, detailed definitions and technical notes. Indicator rates for years prior to those appearing in this publication are also available in the e-publication.





# Indicator Index

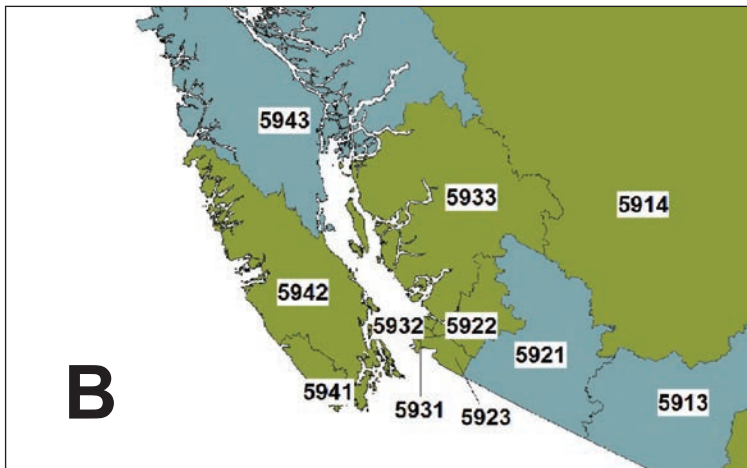
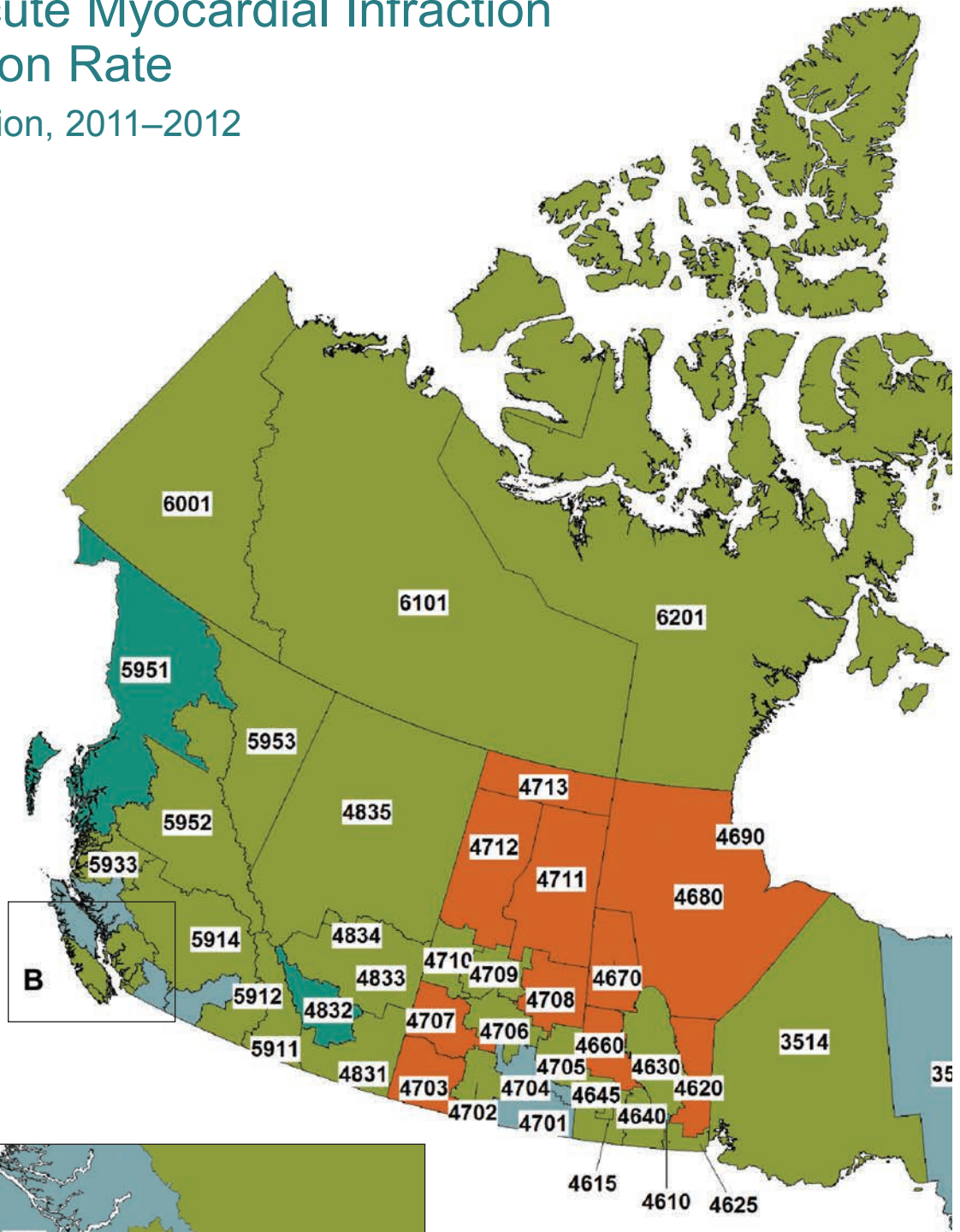
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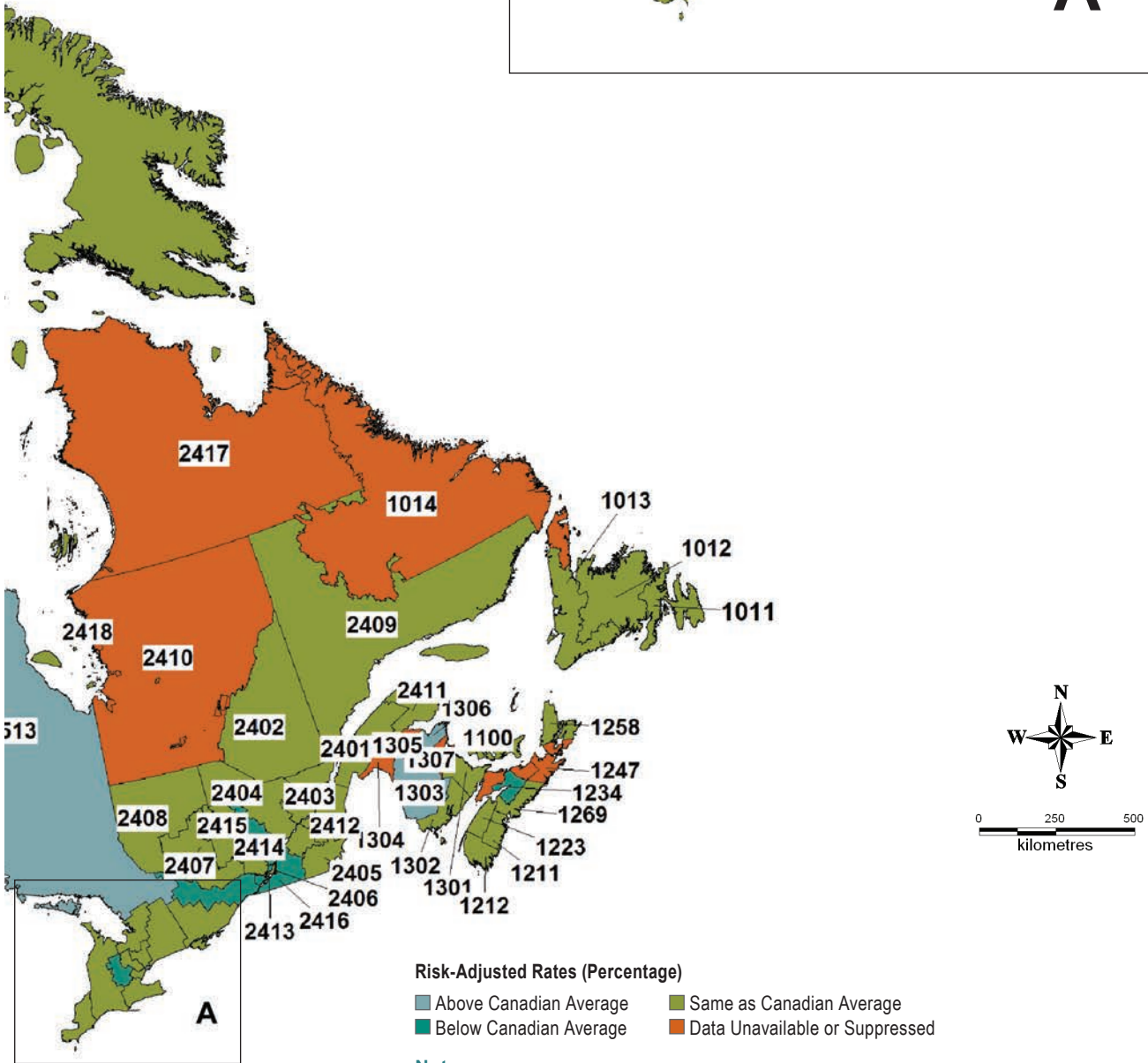
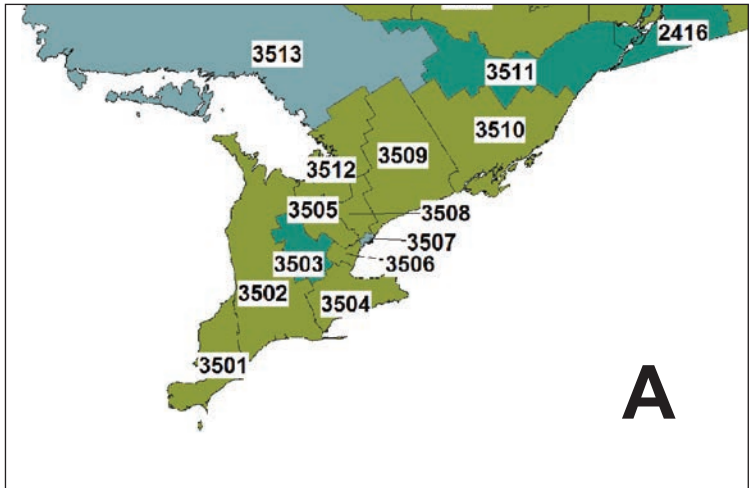
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# 30-Day Acute Myocardial Infraction Readmission Rate

by Health Region, 2011–2012





# From COVER to e-COVER

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