



# CIHI's Operational Plan and Budget

2023–2024



Canadian Institute  
for Health Information

Institut canadien  
d'information sur la santé

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For permission or information, please contact CIHI:

Canadian Institute for Health Information

495 Richmond Road, Suite 600

Ottawa, Ontario K2A 4H6

Phone: 613-241-7860

Fax: 613-241-8120

[cihi.ca](http://cihi.ca)

[copyright@cihi.ca](mailto:copyright@cihi.ca)

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# Table of contents

Executive summary .....	4
Approach .....	5
Budget highlights .....	6
General considerations .....	6
Operating budget .....	6
Key activities for 2023–2024 .....	10
Strategic goal 1: A comprehensive and integrated approach to Canada’s health system data .....	11
Strategic goal 2: An expanded offering of analytics, indicators and tools to support health system decision-making .....	12
Strategic goal 3: Health information users who are better equipped and enabled to do their jobs .....	13
Our foundation .....	14
Strategic risk management .....	14
Strategic risk management for 2023–2024 .....	15
Performance measurement .....	20
Logic model .....	20
PMF indicators .....	20
Appendices .....	25
Appendix A: Summary of CIHI’s strategic plan for 2022 to 2027 .....	25
Appendix B: CIHI’s organizational profile .....	26
Appendix C: Text alternatives for images .....	29

# Executive summary

*CIHI's Operational Plan and Budget, 2023–2024* documents how the Canadian Institute for Health Information (CIHI) will make use of its financial and human resources to advance the goals outlined in CIHI's strategic plan for 2022 to 2027. This year's operational plan builds on past achievements and acknowledges that a renewed Health Canada contribution agreement is still in progress, while also considering opportunities to further CIHI's role as a pan-Canadian leader in health data. CIHI remains committed to meeting the needs of those who rely on our products and services to inform their work. We will also advance corporate foundational priorities such as technology and information security; privacy; and commitments related to diversity, equity and inclusion in the workplace.

In 2023–2024, we received a second extension of our current contribution agreement with Health Canada; discussions are underway to renew a 5-year agreement. This is also the first year of our renewed 3-year bilateral agreements with the provinces and territories.

The operational plan and budget for 2023–2024 is based on anticipated funding from Health Canada of up to \$111.6 million. It also accounts for \$20.5 million of provincial/territorial funding contributions relating to the Core Plan.

The total operational budget is \$139.2 million. A staff complement of 768 permanent employees has been established to respond to the program of work outlined in this document.

Detailed financial information and schedules are presented to support the operational plan. This document provides budget highlights and an operating budget, including operating sources of revenue and details relating to Core Plan and other funding.

CIHI's updated Performance Measurement Framework (PMF) includes a revised logic model and a set of indicators. This new PMF will help us to assess progress toward achieving the goals set out in our strategic plan for 2022 to 2027 and completing operational work, and will also facilitate a meaningful understanding of CIHI's impact on health systems.

On March 24, 2023, *CIHI's Operational Plan and Budget, 2023–2024* was approved by the Board of Directors following a review by the Finance and Audit sub-committee (February 16, 2023).

# Approach

CIHI's mandate supports health system improvement and performance monitoring, as well as population and Indigenous health across the continuum. Our 2022 to 2027 strategic plan reflects the importance of building strategic partnerships and responding to stakeholder priorities with innovative tools and approaches. Our annual operational plan and associated activities ensure that CIHI's work aligns with the priorities of our stakeholders and supports the advancement of our strategic plan and our mandate.

*CIHI's Operational Plan and Budget, 2023–2024* is based on the priorities of the jurisdictions and stakeholders we serve and is guided by the strategic goals and health information priorities from the 2022 to 2027 strategic plan ([Appendix A](#)). It also includes information on budget highlights and CIHI's organizational profile ([Appendix B](#)).

Along with operational work, CIHI will support stakeholders and partners to ensure that health information and related insight will be available to manage the ongoing effects of the pandemic and to inform renewal of health systems. The activities outlined in this plan reflect what we know about current needs and are subject to change.

# Budget highlights

## General considerations

In developing and presenting the 2023–2024 budget, CIHI adhered to Canadian generally accepted accounting principles (GAAP), more specifically the accounting standards for not-for-profit organizations.

In addition, the proposed budget was developed based on the 2022 to 2027 strategic plan, our key priority initiatives and our ongoing program of work based on our core functions.

## Operating budget

The proposed operating budget for 2023–2024 is \$139.2 million. The main source of revenue is an anticipated annual funding allocation of up to \$111.6 million from Health Canada, which includes

- \$92.7 million to support the Health Information Initiative (HII), as outlined in the 1-year extension of the multi-year agreement;
- \$4.6 million to fund the final year of a 5-year initiative to modernize the organ donation and transplantation data management and reporting system;
- \$3.2 million to fund a project to update pan-Canadian nursing supply data to adhere to CIHI's new Health Human Resources Minimum Data Set (this is the second year of a 2-year initiative with total funding of \$3.75 million);
- \$592,000 to fund the second year of a 3-year initiative to operationalize the Physician Resource Planning Tool;
- \$500,000 to fund pharmaceutical work to ensure real-world evidence for analysis of drug safety and effectiveness, outcomes and health system planning (a total of \$1 million in funding has been confirmed for the planning phase between 2022–2023 and 2023–2024); and
- An anticipated carryforward of a minimum of \$10.0 million from 2022–2023.<sup>i</sup>

The budget also includes \$20.5 million of provincial/territorial contributions toward CIHI's Core Plan, which reflects an annual 3% increase as outlined in the new 3-year bilateral agreements.

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i. Based on the Q3 reforecast as of December 31, 2022.

The funding associated with operating activities from the federal government and from the provincial/territorial governments and other sources represents 80% and 18% of total operating revenue, respectively. Details of the provincial/territorial governments' and other sources' related contributions are presented in Table 2.

Compensation is budgeted to accommodate 714 full-time equivalents (FTEs). This represents a staff complement of 768 discounted by the vacancy factor. Budget assumptions, as a percentage of base salaries, include

- A 14.6% benefits factor for employer statutory deductions and flexible benefits plan;
- A 9.7% pension expense for CIHI's participation in the Healthcare of Ontario Pension Plan, the British Columbia Municipal Pension Plan and a group RRSP for employees not eligible to participate in either of these pension plans;
- A provision of 4% for performance that will be administered within the parameters of the Performance Management Program; and
- A vacancy factor of 7.0%, reflecting anticipated staff turnover.

Refer to [Appendix B](#) for CIHI's organizational structure and profile, including a senior management organization chart.

There is no planned capital spending for 2023–2024. Amortization expenses of \$478,000 related to capital purchases in prior fiscal years are reflected in the operating budget in accordance with CIHI's amortization policy.<sup>ii</sup>

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ii. Information technology, telecommunications and office equipment: 5 years; office furniture: 10 years; leasehold improvements: terms of leases. Capital assets over \$5,000 acquired during the year are amortized based on the month of acquisition.

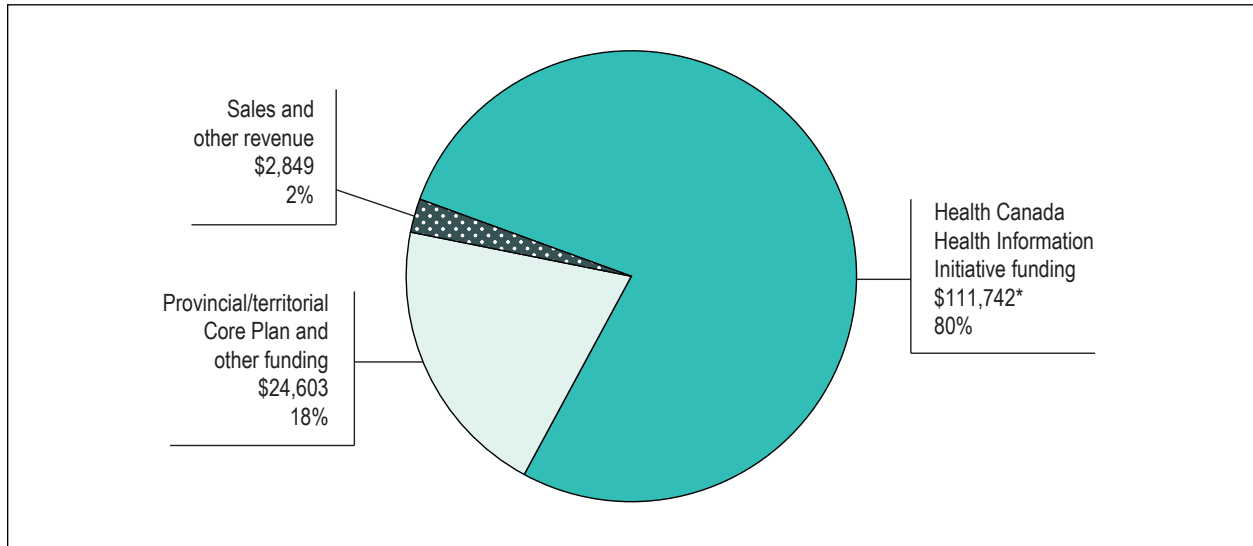


**Table 1** Operating budget for 2023–2024, projected expenditures prepared at December 31, 2022, and approved budget for 2022–2023 (in thousands of dollars)

Operating budget	2023–2024 budget \$	2022–2023 projection \$	2022–2023 budget \$
<b>Revenue</b>			
Sales	2,449	2,452	2,550
Core Plan	20,485	19,889	19,514
Health Information Initiative	111,742	100,407	102,515
Funding — other	4,118	3,961	3,917
Other revenue	400	324	40
<b>Total revenue</b>	<b>139,194</b>	<b>127,033</b>	<b>128,536</b>
<b>Expenses</b>			
Compensation	104,309	94,042	95,726
External and professional services	12,745	13,795	11,617
Travel and advisory committee	2,631	1,170	2,290
Office supplies and services	620	597	630
Computer and telecommunications	9,757	9,534	9,786
Occupancy	8,132	7,895	7,987
Corporate provision	1,000	—	500
<b>Total expenses</b>	<b>139,194</b>	<b>127,033</b>	<b>128,536</b>
<b>Surplus (deficit)</b>	<b>—</b>	<b>—</b>	<b>—</b>



**Table 2** 2023–2024 operating budget: Sources of revenue  
(in thousands of dollars)



Provincial/territorial governments and other sources	Provincial/territorial Core Plan <sup>†</sup> \$	Other funding \$	Total \$
Newfoundland and Labrador	418	30 <sup>‡</sup>	448
Prince Edward Island	89	—	89
Nova Scotia	662	—	662
New Brunswick	533	—	533
Quebec	4,443	—	4,443
Ontario	8,451	2,921 <sup>§</sup>	11,372
Manitoba	836	—	836
Saskatchewan	734	—	734
Alberta	1,839	—	1,839
British Columbia	2,418	305 <sup>**</sup>	2,723
Yukon	23	—	23
Northwest Territories	24	—	24
Nunavut	15	—	15
Other	—	862 <sup>††</sup>	862
<b>Total</b>	<b>20,485</b>	<b>4,118</b>	<b>24,603</b>

#### Notes

- \* Represents the funding associated with operating expenses, including the amortization of HII capital assets.
- † Core Plan contributions include a 3% increase over 2022–2023, reflecting the first year of the 3-year bilateral agreements.
- ‡ Represents a contribution from the Newfoundland and Labrador Department of Health and Community Services toward the implementation of the interRAI Community Mental Health and RAI–Mental Health (RAI-MH) instruments to support provincial and regional information needs.
- § Represents a contribution of \$909,000 from the Ontario Ministry of Health for the Ontario Mental Health Reporting System; \$761,000 for the Ontario Health Based Allocation Model; \$546,000 for Ontario Patient-Reported Outcome Measures reporting; \$394,000 for the National Ambulatory Care Reporting System (NACRS) Clinic Lite; \$235,000 for the Ontario Trauma Registry; and \$76,000 for the Ontario Opioid Overdose Surveillance System. Discussions are currently underway with the Ontario Ministry of Health to finalize the scope of work for these projects; as such, the revenue could change.
- \*\* Represents contributions to support various British Columbia initiatives.
- †† Represents a contribution of \$586,000 from the University of British Columbia to support the Strategy for Patient-Oriented Research initiative, \$256,000 from Public Health Agency of Canada to support the implementation of the National Dementia Strategy and \$20,000 from the Canadian Health Information Management Association for access to CIHI products and services.

## Key activities for 2023–2024

The 2023–2024 operational planning process was informed by CIHI's strategic plan for 2022 to 2027 along with priorities to support health system renewal in Canada. 2 material factors may impact our plan for the coming year:

- We anticipate that a renewed 5-year contribution agreement with Health Canada will be signed in 2023–2024, which may include incremental funding tied to further support of federal health information priorities. While many of the activities in this plan are well-aligned with these priorities, there may be additional work that is not reflected here. Details and timing are still to be determined.
- In a bid to modernize and diversify our analytical toolkit, CIHI will be converting a significant amount of our existing code to open-source tools over the next 2 years. The conversion work may impact scope and/or timing of some planned activities as well as our operational work. We will monitor progress through the year and communicate material impacts to relevant stakeholders.

If either of the above end up significantly impacting CIHI's 2023–2024 operational plan, we will issue an amended plan during the year.

## Strategic goal 1: A comprehensive and integrated approach to Canada's health system data

Goal 1 focuses on CIHI's commitment to leading the transformation of health system data for the benefit of all people who live in Canada. As part of these efforts, we will continuously improve our performance in the creation, validation and accessibility of health system data. We will seek collaborative opportunities with stakeholders and Indigenous partners, with an eye to improving health system data and information, and health data governance. To advance this goal, we will carry out the following activities:

- Develop new data content standards in priority areas, including an interoperable common data standard for primary health care. We will modernize standards for patient engagement surveys, mental health and substance use, and the health workforce.
- Address data gaps in priority areas including long-term care, home care, health workforce, physician billing, insured persons, pharmaceutical data, primary health care and emergency departments.
- Strengthen CIHI's data governance by enhancing our life cycle approach to data content standards development and maintenance with partner organizations, including Canada Health Infoway and Statistics Canada.
- Continue to implement the national Organ Donation and Transplantation Data and Performance Reporting System in partnership with Canada Health Infoway.
- Continue work with the Canadian Agency for Drugs and Technologies in Health to expand and enhance the pharmaceutical data foundation ("all drugs, all people").
- Improve the data supply for long-term care and home care through further investment in our Integrated interRAI Reporting System.
- Expand the use of CIHI's secure analytic environment (SAE) for linked data sets, ensuring appropriate privacy and security steps are in place. We will also expand the accessibility and functionality of the SAE by adding new analytical tools.
- Obtain ICD-11 implementation recommendations through the pan-Canadian Implementation Task Force.
- Support semi-automated coding of data by operationalizing SNOMED CT-to-ICD mapping in priority areas.

## Strategic goal 2: An expanded offering of analytics, indicators and tools to support health system decision-making

Goal 2 focuses on ensuring that CIHI's advanced analytics, indicators and tools continue to support meaningful discovery and decision-making, and that the analysis we provide is tailored to meet the needs of diverse health systems and jurisdictions in Canada.

To advance this goal, we will carry out the following activities:

- Report on priority themes such as mental health and substance use, home and community care, seniors and aging, and health system performance, including insights into virtual care and the impact of the COVID-19 pandemic on health systems. This includes reporting related to the Shared Health Priorities commitment.
- Expand integrated analytical reporting to inform health workforce priority areas.
- Improve the functionality/usability of the Physician Resource Planning Tool (a predictive modelling tool) and develop interactive digital maps of nurse and physician supply and distribution.
- Enhance capacity for routine equity stratification across CIHI data and analyses.
- Advance CIHI's commitment to cultural safety and humility with Indigenous partners and others by identifying core indicators to support measurement of cultural safety.
- Provide stakeholders with contextualized, local analytics at a more granular jurisdictional level.
- Inform international health system comparisons through collaboration and the provision of Canadian statistics.
- Enhance the methodology and features of the Population Grouper. Provide updates to the Case Mix Group+ (CMG+) and the Comprehensive Ambulatory Classification System (CACS) resource indicators, and support stakeholders in their various applications of CIHI's suite of case-mix groupers.
- Deliver CIHI's Hub program of work — a major initiative to transform CIHI's business and technical infrastructure to improve data users' experience. Emphasis this year is on creating a common data platform for hospital-related indicators and statistics to enable integrated data and reporting capabilities.

## Strategic goal 3: Health information users who are better equipped and enabled to do their jobs

This goal commits CIHI to a new level of impact with users — equipping, connecting and supporting them to make the best use of the data we provide. This means user access to products, tools and services is appropriate, timely and reliable — characteristics that are key to sound health system decision-making. In addition to maintaining strong jurisdictional outreach across the provinces and territories, CIHI will engage Indigenous partners on matters that are of importance to them and the communities they represent. To advance this goal, we will carry out the following activities:

- Support increased provincial- and territorial-level capacity to use indicators related to navigating mental health and substance use services, early intervention for mental health or substance use among children and youth, and death at home.
- Establish additional strategic partnerships with First Nations, Inuit and Métis organizations to advance CIHI's commitment to support Indigenous health data priorities.
- Work with jurisdictions to better equip and enable them to use and integrate CIHI data with local data and information.
- Deliver on the Patient Engagement Strategy by expanding our network with diverse groups of patient partners and organizations, and by embedding patient and family voices in more of our work.
- Develop an integrated communications and marketing plan to further orient users to our products and services.
- Facilitate dialogue and exchange of knowledge and best practices among health system leaders and experts through the Canadian Health Information Podcast, webinars and expert advisory group meetings.
- Execute on the collaborative with Healthcare Excellence Canada regarding promising practices in rural health human resources.
- Refresh our digital strategy to improve access to products on [cihi.ca](https://cihi.ca).

## Our foundation

CIHI's foundation is built on our commitments to our people, stakeholder engagement and partnerships, privacy and security, and information technology. Our success in meeting the needs of our stakeholders and partners rests on the strength and resilience of these foundations. During 2023–2024, we will carry out the following activities:

- Deliver on the next stage of CIHI's diversity and inclusion work with a focus on how we learn, govern and practise. We will implement a program to advance diversity and inclusion assessment and awareness at the Board level.
- Establish targeted and strategic partnerships with key organizations to advance the above priorities.
- Modernize and diversify CIHI's analytical skills and software environment, including transitioning a substantial amount of code to open-source tools.
- Update and evolve our information technology, including the automation of selected data and reporting production processes as part of the Hub program.
- Participate in and respond to the Information and Privacy Commissioner of Ontario's review process for renewal of CIHI's prescribed entity status.

## Strategic risk management

CIHI's Strategic Risk Management Program is focused on identifying risks that could impede our ability to achieve our strategic goals and meet our commitment to stakeholders, or that might significantly impact our business continuity or reputation. Strategic risks are identified and assessed annually by members of the executive team. Risk action plans focus on activities that will mitigate the residual risk — that is, the risk that remains after considering existing strategies.

The goal of CIHI's Strategic Risk Management Program is to foster reasonable risk-taking based on risk tolerance, and serves to ensure management excellence, strengthen accountability and improve future performance.

## Strategic risk management for 2023–2024

The strategic risks and associated mitigation strategies identified for 2023–2024 are briefly described in Table 3. Each risk has a fulsome action plan that will be reviewed quarterly by the executive team over the coming fiscal year.

**Table 3** Description and assessment of each strategic risk and mitigation strategies

Strategic risk	Description	Mitigation strategies (E) = Existing strategy (N) = New strategy
<p><b>Current and emerging technology needs</b></p> <p>There is a risk that the organization will not achieve its strategic goals because of our inability to maintain existing technologies and to keep pace with emerging technologies.</p> <p><b>Risk assessment</b></p> <p>Likelihood: Likely Impact: Very high</p>	<p>CIHI is at risk of falling behind technological advancements and potentially losing its competitive advantage in the health information sector in Canada.</p> <p>While other industries have embraced new technologies, CIHI has been able to make only minimal investments in current and emerging infrastructure requirements. Furthermore, human resource availability is limited for old technologies.</p> <p>If CIHI does not take advantage of new technology, our strategic plan, including our commitment to stakeholders, cannot be realized.</p>	<ol style="list-style-type: none"> <li>1. Expand and implement the comprehensive IT Roadmap Program for CIHI's technology and application assets, including technology remediation and implementation of relevant emerging technologies (E).</li> <li>2. Ensure that new projects relying on technology align with the expanded IT Roadmap (E).</li> <li>3. Balance workload allocation supporting key infrastructure and projects (E).</li> </ol>



Strategic risk	Description	Mitigation strategies (E) = Existing strategy (N) = New strategy
<p><b>Current and emerging timely data supply</b></p> <p>There is a risk that CIHI will not fulfill its strategic objectives due to an inability to acquire or gain access to timely data.</p> <p><b>Risk assessment</b> Likelihood: Likely Impact: Very high</p>	<p>Health system and policy stakeholders have expressed the need for timelier and expanded data to quickly respond to emerging priorities since the start of the pandemic.</p> <p>CIHI is currently recognized as the main steward of pan-Canadian health system data and information. However, there is a risk of losing that leadership position if we cannot demonstrate acquisition of or access to new, complete and high-quality data, and disseminate it in a timely manner. The current human resources pressure in health care may translate to impacts on CIHI's data supply chain.</p> <p>Digital system implementations within the health system are progressing, but there are no pan-Canadian standards to ensure consistency of data and alignment with CIHI's reporting requirements.</p>	<ol style="list-style-type: none"> <li>1. Implement existing and new data advancement initiatives, including regular engagement with key stakeholders regarding emerging data needs and new data flows (E).</li> <li>2. Collate data from a mix of data sources to produce timelier data, while ensuring data quality (E).</li> <li>3. Investigate new technologies to provide near-term flexible data collection mechanisms to support data supply (E).</li> <li>4. Expand the provisional data program (E).</li> </ol>

Strategic risk	Description	Mitigation strategies (E) = Existing strategy (N) = New strategy
<p><b>Balancing priority needs and expectations of funders and data suppliers</b></p> <p>There is a risk that CIHI will not be able to balance the priority needs and expectations of its key stakeholders: our various funders and data suppliers.</p> <p><b>Risk assessment</b> Likelihood: Possible Impact: Very high</p>	<p>In an environment as complex and ever-changing as health care, it can be difficult to balance the needs of diverse stakeholders. With 14 funding agreements, CIHI has a range of stakeholder priorities and expectations to meet. Federal priorities may not always align with provincial/territorial priorities and/or their capacity to participate, particularly as jurisdictional health systems remain under significant strain. Given stakeholders' limited capacities to engage arising from the current health care landscape, determining whether needs are being met may continue to prove difficult.</p> <p>If CIHI does not demonstrate equitable prioritization of competing demands, as well as responsiveness to stakeholder challenges, support and funding may stagnate or decrease.</p>	<ol style="list-style-type: none"> <li>1. Regularly engage with stakeholders and participate at stakeholder tables to help understand and respond to emerging needs, and to articulate CIHI's strengths, neutrality and value to health systems (E).</li> <li>2. Leverage the Data Standards and Data Advancement strategies to ensure alignment with federal, provincial and territorial priorities and capacity (E).</li> <li>3. Strengthen our internal analytic gating process in alignment with the new strategic plan (E).</li> <li>4. Implement the refreshed PMF to help measure CIHI's progress on strategic goals and overall mandate (N).</li> <li>5. Take a refreshed, deliberate approach to stakeholder management, priority partnerships and evergreening of CIHI products (N).</li> </ol>

Strategic risk	Description	Mitigation strategies (E) = Existing strategy (N) = New strategy
<p><b>Susceptibility to a major privacy and security breach</b></p> <p>There is a risk that current privacy and security risk mitigation strategies are not sufficient to prevent a major privacy or security breach.</p> <p><b>Risk assessment</b> Likelihood: Possible Impact: Extreme</p>	<p>A major privacy or security breach could have an impact on achieving CIHI's strategic goals, as privacy and security are foundational elements of the strategic plan. Potential impacts include data loss, loss of new data sources and partnerships, financial repercussions, and harm to CIHI's reputation and prescribed entity status.</p> <p>Any non-compliance with privacy and security policies and procedures is a systemic risk. Non-compliance — coupled with increasingly more advanced and sophisticated hacking and social engineering techniques and a hybrid work environment — increases the risk of a compromised system.</p> <p>As CIHI considers new initiatives, there will be an increase in the risks associated with any new technological and business processes.</p>	<ol style="list-style-type: none"> <li>1. Maintain the Privacy and Security Risk Management (PSRM) Program, including the Privacy and Security Audit Program and ongoing review and assessment (E).</li> <li>2. Monitor resource requirements to ensure continued adoption and success of PSRM (E).</li> <li>3. Provide privacy and security training and awareness for all staff (E).</li> <li>4. Ensure CIHI's Information Security Management System continues to be compliant with ISO/IEC 27001:2013 (E).</li> <li>5. Conduct outreach and monitor the privacy and security landscape to ensure that CIHI continues to respond to emerging risks and evolving privacy needs of our stakeholders, regulators and funders (E).</li> <li>6. Sustain the demonstrable accountability program of work for a role-based approach to privacy and information security (E).</li> </ol>

Strategic risk	Description	Mitigation strategies (E) = Existing strategy (N) = New strategy
<p><b>Resource, funding and operational management</b></p> <p>There is a risk that CIHI will not be able to make progress on strategic initiatives and deliver on funding agreements due to ongoing funding uncertainty, the work to update our analytical tools and the competitive labour market.</p> <p><b>Risk assessment</b> Likelihood: Likely Impact: Very high</p>	<p>CIHI's main source of revenue is the Health Canada contribution agreement, which is up for renewal in 2023–2024. Funding is subject to political priorities and fiscal realities, and the extensions to our current agreement have impeded the development of multi-year plans and resource projections. Any new incremental funding for delivery of specific objectives may also introduce new stresses to the organization.</p> <p>CIHI must accommodate a significant analytical tool transition that will affect the priorities the organization can move forward on as well as its ability to evolve its infrastructure.</p> <p>The competitive labour market continues to pose a risk that CIHI will not achieve its goals and commitments to stakeholders due to a lack of specialized human resources.</p> <p>To maintain priority programs, products and services, CIHI will need to continue with prioritization exercises, and with efficiency and stop plans, in order to allocate resources to areas of greatest priority to our funders and other stakeholders.</p>	<ol style="list-style-type: none"> <li>1. Continue discussions underway with Health Canada regarding renewal of base funding and incremental funding for specific objectives (E).</li> <li>2. Prioritize strategic initiatives to meet the most significant priorities first, based on stakeholder needs and confirmed level of funding (E).</li> <li>3. Monitor budget and reallocate any underspending to high-priority strategic investments and pressure points (E).</li> <li>4. Leverage mechanisms to flexibly deploy staffing to areas of high need (E).</li> <li>5. Leverage oversight/decision processes supporting prioritization related to analytical transition work and ensure clear communication with stakeholders regarding any impacts on products or services (N).</li> </ol>

# Performance measurement

CIHI's new PMF has been updated with a revised logic model and a set of indicators to monitor progress from our strategic priorities and operational work. The framework will help us assess the impact of our 2022 to 2027 strategic plan and help facilitate a more meaningful understanding of CIHI's impact. CIHI will continually monitor, learn from and connect with stakeholders and partners to refine our activities and adapt our outputs to improve their outcomes and their efforts to achieve better data, better decisions and healthier Canadians.

## Logic model

A logic model is a visual representation of causal relationships between activities undertaken to achieve specific outcomes. CIHI's updated logic model (Figure 1) reflects the breadth of our business and the desired outcomes associated with our work.

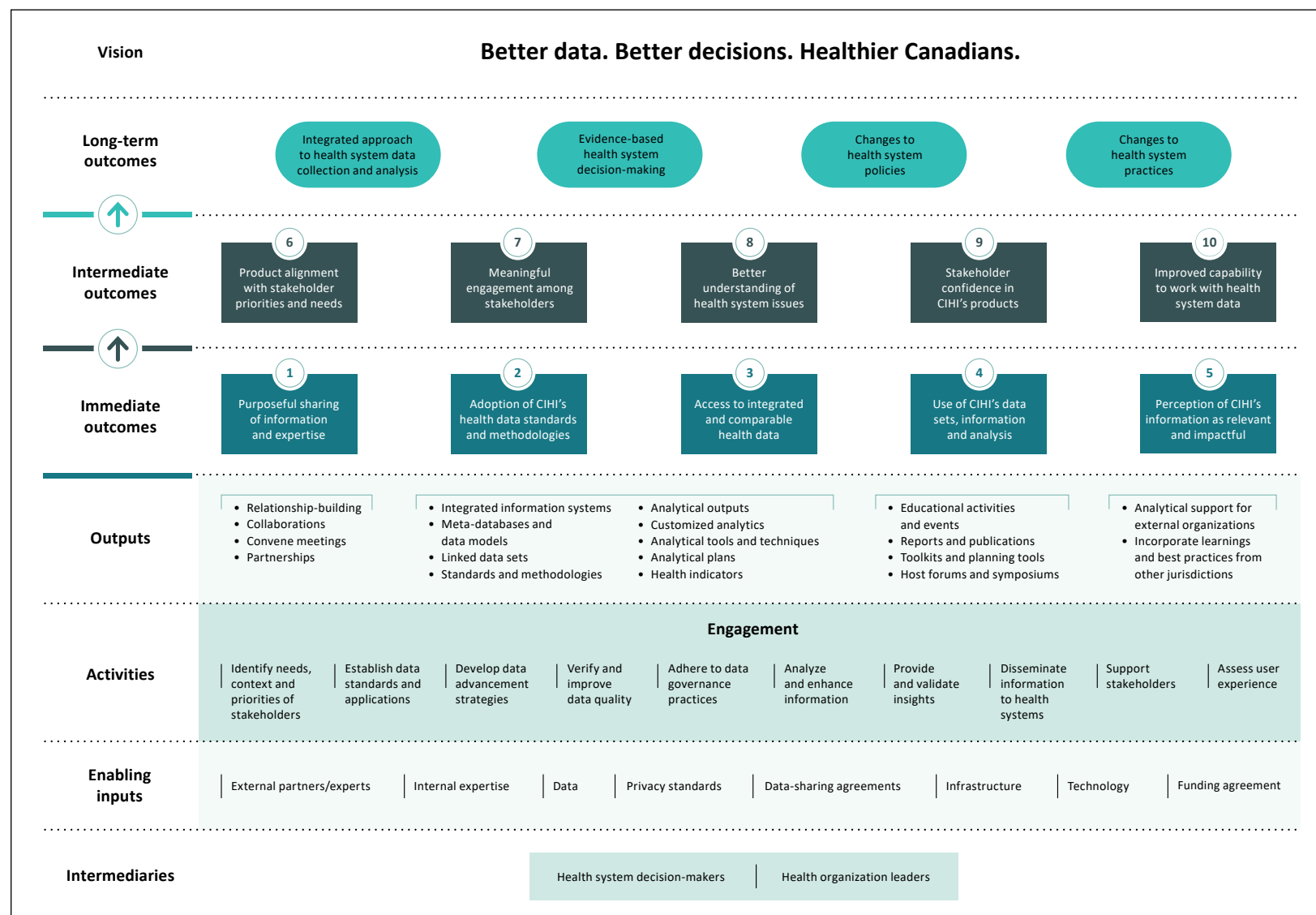
## PMF indicators

CIHI's revised framework and associated indicators represent an integrated approach to gathering information for management, learning and accountability purposes. CIHI's PMF has 18 indicators grouped into 2 categories: strategic indicators and watch metrics.

**Strategic indicators** will provide a focus for strategic and operational improvement, as well as data and information for decision-making. Targets will be identified to drive improvements in key areas related to our strategic plan and outcomes.

**Watch metrics** are “business as usual” measures where established thresholds will help to identify trends or potential issues to address.

Tables 4 and 5 outline the immediate and intermediate outcomes of the framework, including what we want to achieve and the indicators that will help assess that achievement and quantify our value to stakeholders. Since this is a new framework, we will use 2023–2024 to establish baseline data, develop the indicator methodology and refine the methodology for new survey indicators.

**Figure 1** CIHI's logic model


**Table 4** Performance Measurement Framework immediate outcome indicators

Immediate outcome	What do we want to achieve?*	Starting set of indicators	Data sources
Purposeful sharing of information and expertise	CIHI's activities foster regular sharing of information and expertise in health data and information (whether pushed or asked) and these activities are seen as valuable by recipients.	1.1W Number of CIHI products released over the past 12 months	Administrative
		1.2W Number of fulfilled data requests	Administrative
Adoption of CIHI's health data standards and methodologies	CIHI's health data content standards are used/accessed/ adopted by the provinces/ territories and other key stakeholders.	2.1S Percentage of CIHI data standards adopted by provinces/territories	Administrative
		2.2S Percentage of CIHI cross-sectoral and patient-centric standards adopted by provinces/territories	Administrative
Access to integrated and comparable health data	CIHI provides access to comparable and/or integrated data, including with external data sources.	3.1W Access to selected products that provide integrated and comparable data	Administrative
Use of CIHI's data sets, information and analysis	External stakeholders are accessing CIHI's products and using them to support their work.	4.1S Satisfaction of end user with accessibility and usability of products	Survey
		4.2S Uptake of selected CIHI tools and products	Administrative
Perception of CIHI's information as relevant and impactful	CIHI's information is used because it is perceived as relevant and impactful based on sound data quality and methodology, and on the timeliness of our products.	5.1W Number of times CIHI has been cited or referenced in annual reports, the press, online media and social media	Administrative

**Notes**

\* A few indicators will need to evolve to get us to where we can measure the full intent of the described outcomes.

S: Strategic indicator.

W: Watch metric.



**Table 5** Performance Measurement Framework intermediate outcome indicators

Immediate outcome	What do we want to achieve?*	Starting set of indicators	Data sources
Product alignment with stakeholder priorities and needs	CIHI produces products that align with and respond to our key stakeholders' priorities and needs.	6.1S Number of identified information gaps addressed by new or significantly enhanced data collections in relation to health information priorities	Administrative
		6.2S Proportion of new knowledge products aligned with health information priorities	Administrative
Meaningful engagement among stakeholders	CIHI can facilitate well-attended knowledge exchange activities and these activities are perceived as useful and meaningful to stakeholders.	7.1W Percentage of engagement activities that meet their expected attendance goals	Administrative
		7.2W Percentage of participants who have rated engagement activities as useful and meaningful	Survey following engagement activity
Better understanding of health system issues	Provinces and territories understand their health system issues because of CIHI's work.	8.1S Percentage of health system leaders who reported better understanding of health system issues through our engagement activities and products and who reported that CIHI helps them to do their job and make decisions	Survey
		8.2W Ability to support and fulfill local-level analytics	Administrative
Stakeholder confidence in CIHI's products	Stakeholders have confidence in CIHI's products by continuing to engage and partner with us, request data, collaborate with us and fund us.	9.1W Client-reported confidence in CIHI and its products	Survey
		9.2S Number of active formal partnerships (including new and retained) that align with CIHI priorities	Administrative

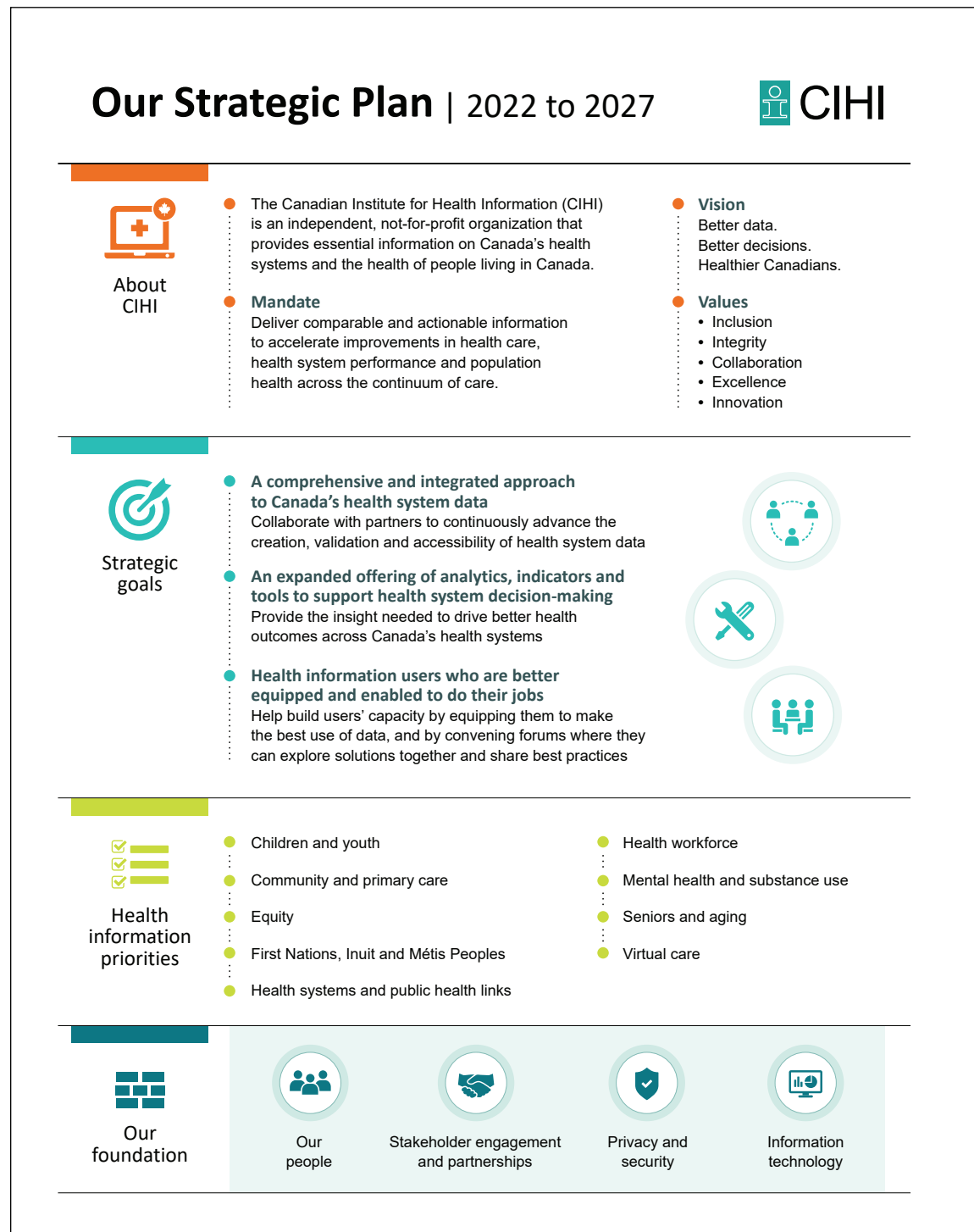
Immediate outcome	What do we want to achieve?*	Starting set of indicators	Data sources
Improved capability to work with health system data	Stakeholders (including individuals and organizations) have increased capacity and capability to work with health system data.	10.1S Health system decision-makers reported their perception that their jurisdiction has increased its capability to work with health system data	Survey
		10.2S Impact stories report specific elements of built capacity in stakeholders or other elements of our long-term outcomes	Qualitative information

Notes

\* A few indicators will need to evolve to get us to where we can measure the full intent of the described outcomes.  
S: Strategic indicator.  
W: Watch metric.

# Appendices

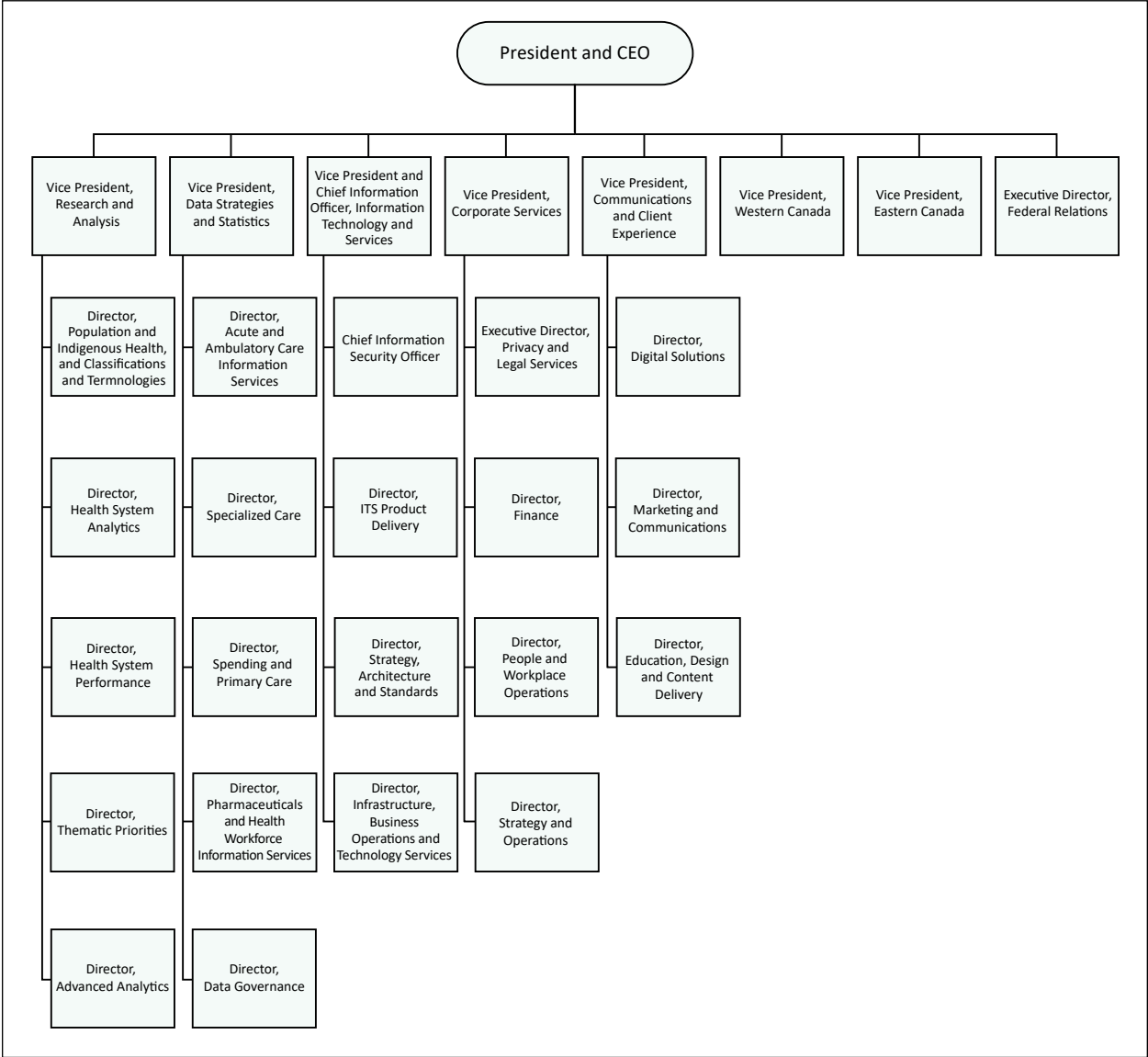
## Appendix A: Summary of CIHI's strategic plan for 2022 to 2027



# Appendix B: CIHI’s organizational profile

## Senior management organization chart

As of December 31, 2022



## Organizational profile

The total staff complement is 768, which represents 714 FTEs for 2023–2024. The budget includes an average vacancy factor of 7.0%.

**Table B1** Number of CIHI positions by division and staff category, as of April 1, 2023

Division	Executive/ senior management	Managers	Professional/ senior technical	Support	Total
Office of the President and CEO	2	1	1	1	5
Research and Analysis	6	17	107	13	143
Data Strategies and Statistics	6	20	186	45	257
Information Technology and Services	5	13	105	29	152
Corporate Services	5	9	51	20	85
Communications and Client Experience	4	7	62	32	105
Eastern Canada	1	4	5	0	10
Western Canada	1	5	4	1	11
<b>Total</b>	<b>30</b>	<b>76</b>	<b>521</b>	<b>141</b>	<b>768</b>

## Employee demographics

The tables below profile CIHI's employees by years of service, age and gender. Average age and tenure at CIHI have remained relatively steady over the years.

**Table B2** CIHI's employees\* by years of service, as of December 31, 2022

Tenure	Number of employees	Percentage of employees
5 years and less	235	33%
6–10 years	135	19%
11–15 years	197	28%
16+ years	143	20%
<b>Total</b>	<b>710</b>	<b>100%</b>

**Note**

\* Includes permanent employees only; excludes contract staff.

**Table B3** CIHI's employees\* by age, as of December 31, 2022

Age	Number of employees	Percentage of employees
Younger than 30	40	6%
30–39	167	23%
40–49	257	36%
50+	246	35%
<b>Total</b>	<b>710</b>	<b>100%</b>

**Note**

\* Includes permanent employees only; excludes contract staff.

Over the years, gender distribution has remained steady, with an overall average ratio of 69% female to 31% male.

**Table B4** CIHI's management team and employees\* by gender, as of December 31, 2022

Staff category	Female	Male	Other
Management team	65%	35%	0%
<b>Total CIHI employees</b>	<b>69%</b>	<b>31%</b>	<b>0%</b>

**Notes**

\* Includes permanent employees only; excludes contract staff.

As part of our human resources onboarding process, CIHI staff are invited to self-identify their gender as male, female or other.

# Appendix C: Text alternatives for images

## CIHI's logic model

The logic model describes CIHI's enabling inputs, activities, outputs and outcomes (immediate, intermediate and long-term) leading to a vision of Better data. Better decisions. Healthier Canadians.

Intermediaries include health system decision-makers and health organization leaders.

Our enabling inputs are external partners/experts, internal expertise, data, privacy standards, data-sharing agreements, infrastructure, technology and funding agreements.

With these inputs, the following activities, through engagement, are being conducted:

- Identify needs, context and priorities of stakeholders
- Establish data standards and applications
- Develop data advancement strategies
- Verify and improve data quality
- Adhere to data governance practices
- Analyze and enhance information
- Provide and validate insights
- Disseminate information to health systems
- Support stakeholders
- Assess user experience

The outputs will result as follows:

- Relationship-building
- Collaborations
- Convene meetings
- Partnerships
- Integrated information systems
- Meta-databases and data models
- Linked data sets
- Standards and methodologies
- Analytical outputs
- Customized analytics
- Analytical tools and techniques



- Analytical plans
- Health indicators
- Educational activities and events
- Reports and publications
- Toolkits and planning tools
- Host forums and symposiums
- Analytical support for external organizations
- Incorporate learnings and best practices from other jurisdictions

The outputs will ideally produce the following immediate outcomes:

1. Purposeful sharing of information and expertise
2. Adoption of CIHI's health data standards and methodologies
3. Access to integrated and comparable health data
4. Use of CIHI's data sets, information and analysis
5. Perception of CIHI's information as relevant and impactful

The aim of the immediate outcomes is to produce the following intermediate outcomes:

6. Product alignment with stakeholder priorities and needs
7. Meaningful engagement among stakeholders
8. Better understanding of health system issues
9. Stakeholder confidence in CIHI's products
10. Improved capability to work with health system data

The intermediate outcomes will ideally produce the following long-term outcomes:

- Integrated approach to health system data collection and analysis
- Evidence-based health system decision-making
- Changes to health system policies
- Changes to health system practices

All of which will ultimately lead to CIHI's vision: Better data. Better decisions. Healthier Canadians.

# Summary of CIHI's strategic plan for 2022 to 2027

## About CIHI

The Canadian Institute for Health Information (CIHI) is an independent, not-for-profit organization that provides essential information on Canada's health systems and the health of people living in Canada.

## Vision

Better data. Better decisions. Healthier Canadians.

## Mandate

Deliver comparable and actionable information to accelerate improvements in health care, health system performance and population health across the continuum of care.

## Values

- Inclusion
- Integrity
- Collaboration
- Excellence
- Innovation

## Strategic goals

A comprehensive and integrated approach to Canada's health system data

- Collaborate with partners to continuously advance the creation, validation and accessibility of health system data

An expanded offering of analytics, indicators and tools to support health system decision-making

- Provide the insight needed to drive better health outcomes across Canada's health systems

Health information users who are better equipped and enabled to do their jobs

- Help build users' capacity by equipping them to make the best use of data, and by convening forums where they can explore solutions together and share best practices

## Health information priorities

- Children and youth
- Community and primary care
- Equity
- First Nations, Inuit and Métis Peoples
- Health systems and public health links
- Health workforce
- Mental health and substance use
- Seniors and aging
- Virtual care

## Our foundation

- Our people
- Stakeholder engagement and partnerships
- Privacy and security
- Information technology

## Senior management organization chart

As of April 1, 2023

Reporting to CIHI's President and CEO are

- Vice President, Research and Analysis;
- Vice President, Data Strategies and Statistics;
- Vice President and Chief Information Officer;
- Vice President, Corporate Services;
- Vice President, Communications and Client Experience;
- Vice President, Western Canada;
- Vice President, Eastern Canada; and
- Executive Director, Federal Relations.

Reporting to Vice President, Research and Analysis are

- Director, Population and Indigenous Health, and Classifications and Terminologies;
- Director, Health System Analytics;
- Director, Health System Performance;
- Director, Thematic Priorities; and
- Director, Advanced Analytics.

Reporting to Vice President, Data Strategies and Statistics are

- Director, Acute and Ambulatory Care Information Services;
- Director, Specialized Care;
- Director, Spending and Primary Care;
- Director, Pharmaceuticals and Health Workforce Information Services; and
- Director, Data Governance.

Reporting to Vice President and Chief Information Officer, Information Technology and Services are

- Chief Information Security Officer;
- Director, ITS Product Delivery;
- Director, Strategy, Architecture and Standards; and
- Director, Infrastructure, Business Operations and Technology Services.

Reporting to Vice President, Corporate Services are

- Executive Director, Privacy and Legal Services;
- Director, Finance;
- Director, People and Workplace Operations; and
- Director, Strategy and Operations.

Reporting to Vice President, Communications and Client Experience are

- Director, Digital Solutions;
- Director, Marketing and Communications; and
- Director, Education, Design and Content Delivery.



**CIHI Ottawa**

495 Richmond Road  
Suite 600  
Ottawa, Ont.  
K2A 4H6  
**613-241-7860**

**CIHI Toronto**

4110 Yonge Street  
Suite 300  
Toronto, Ont.  
M2P 2B7  
**416-481-2002**

**CIHI Victoria**

880 Douglas Street  
Suite 600  
Victoria, B.C.  
V8W 2B7  
**250-220-4100**

**CIHI Montréal**

1010 Sherbrooke Street West  
Suite 602  
Montréal, Que.  
H3A 2R7  
**514-842-2226**

cihi.ca

27999-0323

