



CIHI's Operational Plan and Budget

2024–2025



Canadian Institute
for Health Information

Institut canadien
d'information sur la santé

Production of this document is made possible by financial contributions from Health Canada and provincial and territorial governments. The views expressed herein do not necessarily represent the views of Health Canada or any provincial or territorial government.

Unless otherwise indicated, this product uses data provided by Canada's provinces and territories.

All rights reserved.

The contents of this publication may be reproduced unaltered, in whole or in part and by any means, solely for non-commercial purposes, provided that the Canadian Institute for Health Information is properly and fully acknowledged as the copyright owner. Any reproduction or use of this publication or its contents for any commercial purpose requires the prior written authorization of the Canadian Institute for Health Information. Reproduction or use that suggests endorsement by, or affiliation with, the Canadian Institute for Health Information is prohibited.

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
copyright@cihi.ca

© 2024 Canadian Institute for Health Information

How to cite this document:

Canadian Institute for Health Information. *CIHI's Operational Plan and Budget, 2024–2025*. Ottawa, ON: CIHI; 2024.

Cette publication est aussi disponible en français sous le titre *Budget et plan d'exploitation de l'ICIS, 2024-2025*.

Table of contents

Executive summary	4
Approach	5
Budget highlights	6
General considerations	6
Operating budget	6
Key activities for 2024–2025	10
Strategic goal 1: A comprehensive and integrated approach to Canada’s health system data	10
Strategic goal 2: An expanded offering of analytics, indicators and tools to support health system decision-making	11
Strategic goal 3: Health information users who are better equipped and enabled to do their jobs	12
Our foundation	13
Strategic risk management	13
Strategic risk management for 2024–2025	14
Performance measurement	19
PMF indicators	19
Appendices	23
Appendix A: Summary of CIHI’s strategic plan for 2022 to 2027	23
Appendix B: CIHI’s organizational profile	24
Appendix C: Text alternatives for images	27

Executive summary

CIHI's Operational Plan and Budget, 2024–2025 will mark the leading edge of a period of transformative change for the Canadian Institute for Health Information (CIHI). A series of events, considered together, are key drivers of this change: the recently released Pan-Canadian Health Data Strategy lays the groundwork for considering CIHI's future role within the broader health data ecosystem; a renewed focus on health data has prompted the federal government to make additional investments in CIHI; and new technologies and ways of working, driven by artificial intelligence (AI), allow us to contemplate a future that few could have imagined when CIHI was created 30 years ago.

This plan documents how CIHI will make use of its financial and human resources in 2024–2025 to advance the goals outlined in our strategic plan, even as we seek to assess whether the above events warrant an earlier strategic plan renewal. It builds on past achievements, aiming to further CIHI's role as a pan-Canadian leader in health data while at the same time transforming our own approach to data management. 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 including technology and information security; privacy; and commitments related to diversity, equity and inclusion in the workplace.

CIHI's current contribution agreement with Health Canada has been extended until March 31, 2025. Additionally, CIHI expects to have a renewed 2-year agreement in place for April 1, 2024. This is the second year of our current 3-year bilateral agreements with the provinces and territories.

The operational plan and budget for 2024–2025 is based on anticipated funding from Health Canada of up to \$131.6 million, as well as \$21.1 million of provincial/territorial funding contributions relating to the Core Plan.

The total operational budget is \$159.7 million. A staff complement of 814 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 includes a revised logic model and a refreshed set of indicators. These will help us actively manage our performance to achieve the goals set out in the 2022 to 2027 strategic plan and deliver key operational work, and will facilitate a meaningful understanding of CIHI's impact on health systems.

Approach

CIHI's mandate is to provide comparable and actionable data and information that are used to accelerate improvements in health care, health system performance and population health across Canada. Our 2022 to 2027 strategic plan ([Appendix A](#)) reflects the path that our key stakeholders need us to take and highlights the importance of building strategic partnerships and leveraging innovative tools and approaches to meet their needs.

CIHI's Operational Plan and Budget, 2024–2025 is based on the priorities of the jurisdictions and stakeholders we serve, and it is guided by CIHI's mandate and the strategic goals and health information priorities from our strategic plan. It includes the initiation of a broader program of transformation, supported through additional federal investment and aligned with provincial and territorial health information needs. Budget highlights and CIHI's organizational profile are included ([Appendix B](#)).

The activities outlined in this plan reflect what we know about current needs and budget, and are subject to change.

Budget highlights

General considerations

In developing and presenting the 2024–2025 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 2024–2025 is \$159.7 million. The main source of revenue is an expected annual funding allocation of up to \$131.6 million from Health Canada, which includes

- Anticipated \$92.7 million to support the Health Information Initiative (HII);
- \$14.5 million from the second year of a 5-year Working Together funding agreement (totalling \$78.0 million between 2023–2024 and 2027–2028);
- \$5.0 million from the first year of a 4-year funding envelope to advance health data governance and further modernize CIHI's data/digital infrastructure (totalling \$100 million between 2024–2025 and 2027–2028);
- \$3.0 million to fund the expected ongoing operations of the modernized organ donation and transplantation data management and reporting system;
- \$800,000 to fund continuing work on drugs for rare diseases;
- \$600,000 to fund the final year of a 3-year initiative to operationalize the Physician Resource Planning Tool; and
- An anticipated carryforward of at least \$15.0 million from 2023–2024.

The budget also includes \$21.1 million of provincial/territorial contributions toward CIHI's Core Plan. This allocation reflects an annual 3% increase as outlined in the 3-year bilateral agreements, which started in 2023–2024.

Additional funding decisions are pending at the federal level related to Public Health Agency of Canada initiatives and pharmaceutical data. These activities are not included in this document, and we will amend this operational plan should new funding be confirmed.

The funding associated with operating activities from the federal government and from the provincial/territorial governments and other sources represents 82% and 16% 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 773 full-time equivalents (FTEs). This represents a staff complement of 814 discounted by a vacancy factor. Budget assumptions, as a percentage of base salaries, include

- A 14.8% 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 3.8% for performance that will be administered within the parameters of the Performance Management Program; and
- A vacancy factor of 5.0%, reflecting anticipated staff turnover.

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

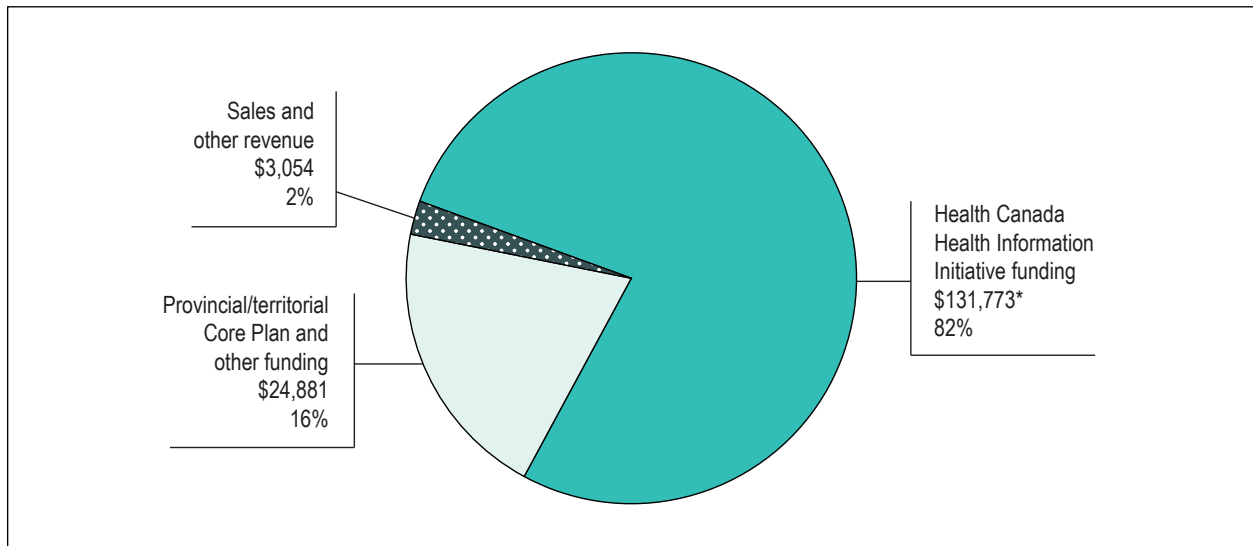
The total capital budget for 2024–2025 is \$202,000, which will be used to acquire information technology equipment. Amortization expenses of \$531,000 related to capital purchases in 2024–2025 and prior fiscal years are reflected in the operating budget in accordance with CIHI's amortization policy.ⁱ

i. 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 2024–2025, projected expenditures for 2023–2024 (prepared at December 31, 2023) and approved budget for 2023–2024 (in thousands of dollars)

Operating budget	2024–2025 budget \$	2023–2024 projection \$	2023–2024 budget \$
Revenue			
Sales	2,674	2,636	2,449
Core Plan	21,100	20,485	20,485
Health Information Initiative	131,773	123,272	111,742
Funding — other	3,761	3,815	4,118
Other revenue	400	800	400
Total revenue	159,708	151,008	139,194
Expenses			
Compensation	124,821	108,766	104,309
External and professional services	10,200	18,993	12,745
Travel and advisory committee	3,550	3,393	2,631
Office supplies and services	591	678	620
Computer and telecommunications	11,183	10,999	9,757
Occupancy	8,363	8,179	8,132
Corporate provision	1,000	—	1,000
Total expenses	159,708	151,008	139,194
Surplus (deficit)	—	—	—

Table 2 2024–2025 operating budget: Sources of revenue
(in thousands of dollars)



Provincial/territorial governments and other sources	Provincial/territorial Core Plan [†] \$	Other funding \$	Total \$
Newfoundland and Labrador	430	30 [‡]	460
Prince Edward Island	92	—	92
Nova Scotia	681	—	681
New Brunswick	549	—	549
Quebec	4,576	—	4,576
Ontario	8,705	2,761 [§]	11,466
Manitoba	861	—	861
Saskatchewan	756	—	756
Alberta	1,894	—	1,894
British Columbia	2,491	252 ^{**}	2,743
Yukon	24	—	24
Northwest Territories	25	—	25
Nunavut	16	—	16
Other	—	718 ^{††}	718
Total	21,100	3,761	24,861

Notes

* Represents the funding associated with operating expenses, including the amortization of HII capital assets.

† Core Plan contributions include a 3% increase over 2023–2024, reflecting the second 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.

Notes (continued)

§ Represents the following contributions from the Ontario Ministry of Health: \$824,000 for the Ontario Mental Health Reporting System; \$598,000 for the Ontario Health Based Allocation Model; \$604,000 for Ontario Patient-Reported Outcome Measures reporting; \$450,000 for the National Ambulatory Care Reporting System (NACRS) Clinic Lite; \$216,000 for the Ontario Trauma Registry; and \$69,000 for the Ontario Opioid Overdose Surveillance System.

** Represents contributions to support various British Columbia initiatives.

†† Represents a contribution of \$707,000 from the University of British Columbia to support the Strategy for Patient-Oriented Research initiative, and \$11,000 from the Selkirk Mental Health Centre to support its use of the RAI-MH instrument.

Key activities for 2024–2025

The 2024–2025 operational plan is informed by CIHI's 2022 to 2027 strategic plan and reflects additional federal investment aligned with federal, provincial and territorial (FPT) priorities to support health system renewal in Canada and launch a modernized CIHI.

This section of the operational plan outlines the main activities CIHI will undertake in 2024–2025 to advance our strategic plan and continue to meet stakeholder needs.

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 advance the creation, validation and accessibility of more timely and complete health system data. We will seek collaborative opportunities 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:

- Launch work on the Common Health Data Stewardship Framework that will establish a common approach to trusted data sharing, use and access within and across jurisdictions, and that will be balanced with security and privacy.
- Develop the Pan-Canadian Health Data Content Framework, including new data content standards and architecture to support the creation of structured data at the point of collection, laying the foundation for interoperability. The initial focus will be on primary care.
- Develop, modernize and support the implementation of other data content standards in priority areas, including health workforce, acute care and health equity/social determinants of health.
- Begin work on iHospital, a single, integrated hospital data system that supports increased automated data sourcing from point-of-care systems and near-real-time data flow.

- Improve available long-term care and home care data by supporting provinces that are beginning submissions to the Integrated interRAI Reporting System (IRRS) and by transitioning provinces and territories that currently submit to the legacy systems (Continuing Care Reporting System [CCRS] and Home Care Reporting System [HCRS]).
- Implement the Canadian Organ Donation and Transplantation Data System (CanODT) in partnership with Canada Health Infoway. The emphasis this year will be to finish designing and building the system for a new living donation data repository, and to release ODT contextual measures and update existing ODT indicators.
- Address data gaps in other priority areas, including health workforce, pharmaceuticals and physician services.
- Expand the use of CIHI's Secure Access Environment (SAE) for accessing linked data sets, ensuring that appropriate privacy and security steps are in place. We will also expand the accessibility and functionality of the SAE by adding new analytical tools.
- Complete ICD-11 mapping for implementation in electronic medical records (EMRs) to support semi-automated coding.

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:

- Align indicator development and analysis with the 4 new Shared Health Priorities to support the improvement of integrated health care for Canadians: family health services, mental health and substance use, health workforce and backlogs, and modernizing health systems.
- Continue indicator reporting and capacity-building for the original Shared Health Priorities, including children and youth, community care, and mental health and substance use.
- Support the newly created Health Workforce Canada, including the advancement of HHR standards and data to strengthen access to data, modelling, planning and policy innovation in HHR.
- Work with Indigenous partners and others to identify core indicators to support measurement of cultural safety.
- Report on health information priorities — such as dementia in long-term care and home care settings and inequalities in hospital harm — using a variety of equity stratifiers. Capacity for this ad hoc analytical reporting is expected to be very limited in 2024–2025 and beyond, as we will likely need to reallocate a significant portion of these resources to accommodate expanded expectations for the new Shared Health Priorities work.

- Provide stakeholders with contextualized, local analytics at more granular jurisdictional levels.
- Inform international health system comparisons through collaboration and the provision of Canadian statistics.
- Deliver CIHI's Hub program of work for 2024–2025. Hub is a significant multi-year initiative to transform CIHI's business and technical infrastructure to improve data users' experience. The emphasis is on modernizing Your Health System: In Brief and In Depth 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 leaders and organizations on matters 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 Shared Health Priorities 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 and expand 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.
- Mobilize health care system stakeholders by leveraging a collective impact approach to advance health data charter principles and modernization of health data systems, building on lessons and approaches set up by the Alberta Virtual Care Coordinating Body.
- Continue patient engagement by expanding our network with diverse groups of patient partners and organizations, and by embedding patient and family voices in more of our work.
- Facilitate dialogue and exchange of knowledge and best practices among health system leaders and experts through the Canadian Health Information Podcast, CIHI-hosted webinars and expert advisory group meetings.
- Work with Healthcare Excellence Canada to bring together rural health system leaders to exchange knowledge, innovation and best practices.

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 2024–2025, we will carry out the following activities:

- Continue to deliver on CIHI's diversity and inclusion workplan, 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.
- Update and evolve our information technology, including the automation of selected data and reporting production processes as part of the Hub program.
- Develop an approach to cloud optimization and start to implement CIHI's AI strategy. This will help us leverage AI to better serve our operational and strategic needs, meet the needs of our stakeholders and continue to deliver on our mandate.
- To modernize and diversify CIHI's analytical skills and software environment, continue to migrate to open-source tools over the next year. The conversion work may impact the scope and/or timing of some planned activities as well as our operational work. We will monitor progress through the year and communicate the impacts to relevant stakeholders.

Strategic risk management

The goal of CIHI's Strategic Risk Management Program is to foster reasonable risk-taking and serves to ensure management excellence, strengthen accountability and improve future performance. It 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 CIHI's business continuity or reputation. Strategic risks are identified and assessed annually. Risk action plans focus on activities that will mitigate the residual risk — that is, the risk that remains after considering existing strategies.

Strategic risk management for 2024–2025

The strategic risks and associated mitigation strategies identified for 2024–2025 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>Current and emerging technology needs Inability to maintain existing technologies and to keep pace with emerging technologies.</p> <p>Risk assessment 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 apply only minimal investments in current and emerging infrastructure requirements. Furthermore, available human resources are 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"> 1. Expand and implement the comprehensive IT Asset Portfolio Assessment Program for CIHI's technology and application assets, including technology remediation and implementation of relevant emerging technologies (E). 2. Ensure that new projects relying on technology align with the expanded IT Asset Portfolio Assessment (E). 3. Balance workload allocation to support key infrastructure and projects (E). 4. Leverage CIHI's AI strategy to enhance or develop controls related to this emerging risk (N).

Strategic risk	Description	Mitigation strategies (E) = Existing strategy (N) = New strategy
<p>Current and emerging timely data supply Inability to acquire or gain access to timely data.</p> <p>Risk assessment Likelihood: Likely Impact: Very high</p>	<p>CIHI is recognized as the main steward of pan-Canadian health system data and information. There is a risk of losing that leadership position if we cannot demonstrate access to new, complete and quality data, and disseminate it in a timely manner. The current human resources pressure and competing priorities in health care may translate to impacts on CIHI's data supply chain. While investments are being made in jurisdictions and CIHI, organizations have many priorities for digital health with their constrained resources. The costliness of high-quality patient-generated data may influence some jurisdictions to make it a lower priority than competing health transformation initiatives.</p> <p>Digital system implementations in health systems are progressing, but not always with pan-Canadian standards that ensure consistency of data and opportunity for comparable reporting. CIHI's approaches must accommodate the emergence of new players in the collection of expanded health data, notably private-sector vendors of hospital information systems (HIS), electronic health records (EHRs) and EMRs.</p>	<ol style="list-style-type: none"> 1. Manage risks to existing data supply, including monitoring completeness and timeliness and essential data quality reporting (E). 2. Implement existing and new data advancement initiatives, including regular engagement with key stakeholders regarding emerging data needs and new data flows (E). 3. Transition provinces and territories to modernized CIHI data systems (E). 4. Modernize CIHI's standards, systems and processes, as well as timeliness of reporting (N).

Strategic risk	Description	Mitigation strategies (E) = Existing strategy (N) = New strategy
<p>Balancing priority needs and expectations of funders and data suppliers</p> <p>CIHI will not be able to balance the priority needs and expectations of its key stakeholders: our various funders and data suppliers.</p> <p>Risk assessment Likelihood: Likely Impact: Very high</p>	<p>In an environment as complex 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. Additional tranches of federal funding for CIHI may exacerbate the challenge of balancing needs and expectations. Given stakeholders' limited capacities to engage, determining whether needs are being met may continue to prove difficult. CIHI may continue to experience challenges achieving alignment of funding with expected deliverables.</p> <p>If CIHI does not demonstrate neutrality and 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"> 1. Regularly engage with and participate at stakeholder tables to help us understand and respond to emerging needs, and to articulate CIHI's strengths, neutrality and value to health systems (E). 2. Leverage the data standards and advancement strategies to ensure alignment with FPT priorities and capacity (E). 3. Continue alignment with the strategic plan by complementing the strengthened analytic gating process with enhanced quarterly planning and reporting, and with deliberate approaches to evergreening of products (N). 4. Conduct a survey to support the refreshed Performance Measurement Framework (N). 5. Implement a new stakeholder engagement framework and government relations strategy (N). 6. Develop and leverage the transformation narrative to support engagement and priority-setting with provincial/territorial stakeholders (N).

Strategic risk	Description	Mitigation strategies (E) = Existing strategy (N) = New strategy
<p>Susceptibility to a major privacy and security breach</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>Risk assessment Likelihood: Possible Impact: Extreme</p>	<p>A major privacy or security breach could have a significant impact on business continuity and/or reputation. 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 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"> 1. Maintain the Privacy and Security Risk Management Program, including the Privacy and Security Audit Program and ongoing review and assessment (E). 2. Sustain appropriate processes for supplier frameworks and cloud computing (E). 3. Provide privacy and security training and awareness program for all staff (E). 4. Ensure CIHI's Information Security Management System continues to comply with ISO/IEC 27001:2013 (E). 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). 6. Sustain the demonstrable accountability program of work for a role-based approach to privacy and information security (E). 7. Leverage CIHI's new AI strategy to enhance or develop controls related to this emerging risk (N).

Strategic risk	Description	Mitigation strategies (E) = Existing strategy (N) = New strategy
<p>Resource, funding and operational management</p> <p>There is a risk that CIHI will not be able to make progress on strategic initiatives and/or fully deliver operational commitments due to organizational stresses related to federal funding agreements and the work to update our analytical tools.</p> <p>Risk assessment Likelihood: Likely Impact: Very high</p>	<p>CIHI's main source of revenue is the Health Canada funding agreement. A renewed 2-year Health Canada agreement is anticipated starting in April 2024. This agreement term will create risks for CIHI of initiating significant new programs of work without a corresponding long-term funding commitment. Funding is subject to federal priorities and fiscal realities, and the level of uncertainty around the future timing and exact scale of agreements beyond 2025–2026 continues to impede the development of robust multi-year plans.</p> <p>Health Canada has signalled that a “demonstration of progress” will inform the renewal of CIHI's funding agreement beyond 2025–2026, including a set of outcomes and indicators. It may be difficult to meet expectations of progress with only 5% of funding in the first year and some initiatives not receiving any funding in 2024–2025. Renewal discussions are anticipated to start even before the 2-year agreement is up.</p> <p>CIHI must accommodate a significant analytical tool transition that will affect our operational work and strategic initiatives, including infrastructure modernization.</p> <p>Competition in the labour market for needed specialized skills continues to pose a risk to CIHI in achieving the more transformative initiatives required to remain relevant.</p> <p>To maintain priority programs, products and services, CIHI will need to continue with prioritization exercises to allocate and reallocate resources to areas of greatest priority to our funders and other stakeholders.</p>	<ol style="list-style-type: none"> 1. Work with Health Canada to renew base funding and incremental funding for specific objectives (E). 2. Prioritize strategic initiatives to meet the most significant priorities first, based on stakeholder needs and confirmed level of funding (E). 3. Monitor the budget quarterly and reallocate underspending to priority strategic investments and pressure points (E). 4. Leverage mechanisms to flexibly deploy staff to areas of high need (E). 5. Leverage oversight/decision processes supporting prioritization related to analytical transition work and ensure clear communication with stakeholders regarding impacts on products or services (N). 6. Enhance portfolio management and operational planning, and undertake a mid-point strategic plan review (N). 7. Following completion of the new agreement, reinstitute multi-year business planning (N). 8. Adopt a new marketing strategy that reflects the transformational program, promoting CIHI as an employer of choice (N). 9. Develop an approach to sustainably manage significant core operations while supporting transformational work (N). 10. Develop progress indicators aligned with the agreed-upon scope of Wave 2 work, and closely monitor through project and portfolio management (N).

Performance measurement

CIHI's new Performance Measurement Framework (PMF) includes a logic model (see figure below) and a set of indicators (below) to track effort on our strategic priorities and operational work. The framework helps us assess progress on our 2022 to 2027 strategic plan and supports a more meaningful understanding of CIHI's impact. We will continually monitor, learn from and connect with stakeholders and partners to refine our activities and adapt our outputs to best help achieve better data, better decisions and healthier Canadians.

The PMF is subject to attestation by Health Canada as part of a renewed contribution agreement expected in April 2024. CIHI's PMF may change because of the attestation process.

PMF indicators

The indicators associated with our performance framework reflect an integrated approach to gathering information to support effective management, learning and accountability. We have 18 indicators grouped into strategic indicators and watch metrics.

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

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

Tables 4 and 5 outline the framework's immediate and intermediate outcomes and the indicators that will help assess that achievement and quantify our value to stakeholders.

Figure CIHI's logic model

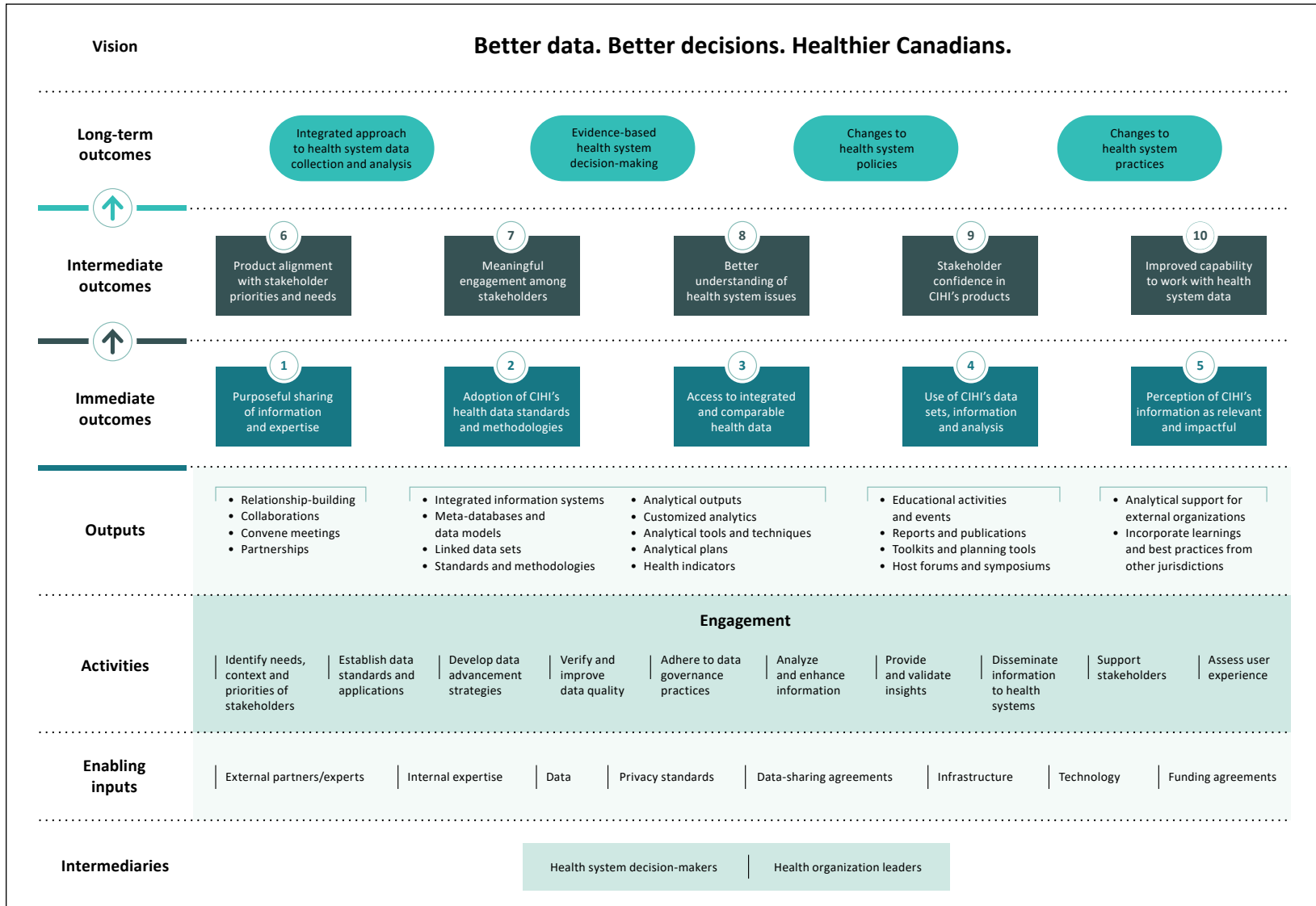


Table 4 Performance Management Framework* immediate outcome indicators

Immediate outcome	Starting set of indicators	Data sources	Baseline	2024–2025 threshold/target
Purposeful sharing of information and expertise	1.1W: Number of CIHI products released over the past 12 months	Administrative	45	45
	1.2W: Number of fulfilled data requests over the past 12 months	Administrative	145	145
Adoption of CIHI's health data standards and methodologies	2.1S: Percentage of CIHI health data content standards adopted by provinces/territories	Administrative	47%	56%
Access to integrated and comparable health data	3.1W: Percentage increase in access to key products with integrated and comparable data	Administrative	3%	3%
Use of CIHI's data sets, information and analysis	4.1S: End-user satisfaction with accessibility and usability of products	Survey	TBD based on 2024–2025 data	Not available
	4.2S: Percentage increase in regular uptake of CIHI tools and products	Administrative	3%	5%
Perception of CIHI's information as relevant and impactful	5.1W: Number of CIHI data and product mentions	Administrative	875	900

Notes

* CIHI's PMF needs to be approved by Health Canada as part a renewed contribution agreement anticipated in April 2024. Further adjustments to indicators may be required.

S: Strategic indicator.

W: Watch metric.

TBD: To be determined.

Table 5 Performance Measurement Framework* intermediate outcome indicators

Intermediate outcome	Starting set of indicators	Data sources	Baseline	2024–2025 threshold/target
Product alignment with system priorities and needs	6.1S: Percentage of identified information gaps addressed by new or significantly enhanced data collections related to health information priorities	Administrative	14%	35%
	6.2S: Percentage of knowledge products aligned with health information priorities	Administrative	60%	70%
Meaningful engagement among stakeholders	7.1W: Percentage of CIHI-convened events with sufficient organizational representation	Administrative	100%	100%
	7.2W: Percentage of participants who rated CIHI-convened events as meaningful	Survey following activity	TBD based on 2024–2025 data	Not available
Better understanding of health system issues	8.1S: Percentage of health system leaders who report better understanding of health system issues and enhanced ability to make decisions	Survey	TBD based on 2024–2025 data	Not available
	8.2W: Percentage of CIHI products that provide information at the health region (or lower) level	Administrative	30%	30%
Stakeholder confidence in CIHI's products	9.1W: Client-reported confidence in CIHI and its products	Survey	TBD based on 2024–2025 data	Not available
	9.2S: Number of active and formal partnerships that align with CIHI's priorities	Administrative	14	16
Improved capability to work with health system data	10.1S: Percentage of health system leaders who reported that their province or territory has increased its capability to work with health system data	Survey	TBD based on 2024–2025 data	Not available
	10.2S: Stories of how CIHI's work has led to improvements in health systems or the health of Canadians	Qualitative information	Not applicable	Not applicable

Notes

* CIHI's PMF needs to be approved by Health Canada as part of a renewed contribution agreement expected in April 2024. Further adjustments to indicators may be required.

S: Strategic indicator.


W: Watch metric.


TBD: To be determined.

Appendices

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


Our Strategic Plan | 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.
- **Mandate**
Deliver comparable and actionable information to accelerate improvements in health care, health system performance and population health across the continuum of care.
- **Vision**
Better data.
Better decisions.
Healthier Canadians.
- **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

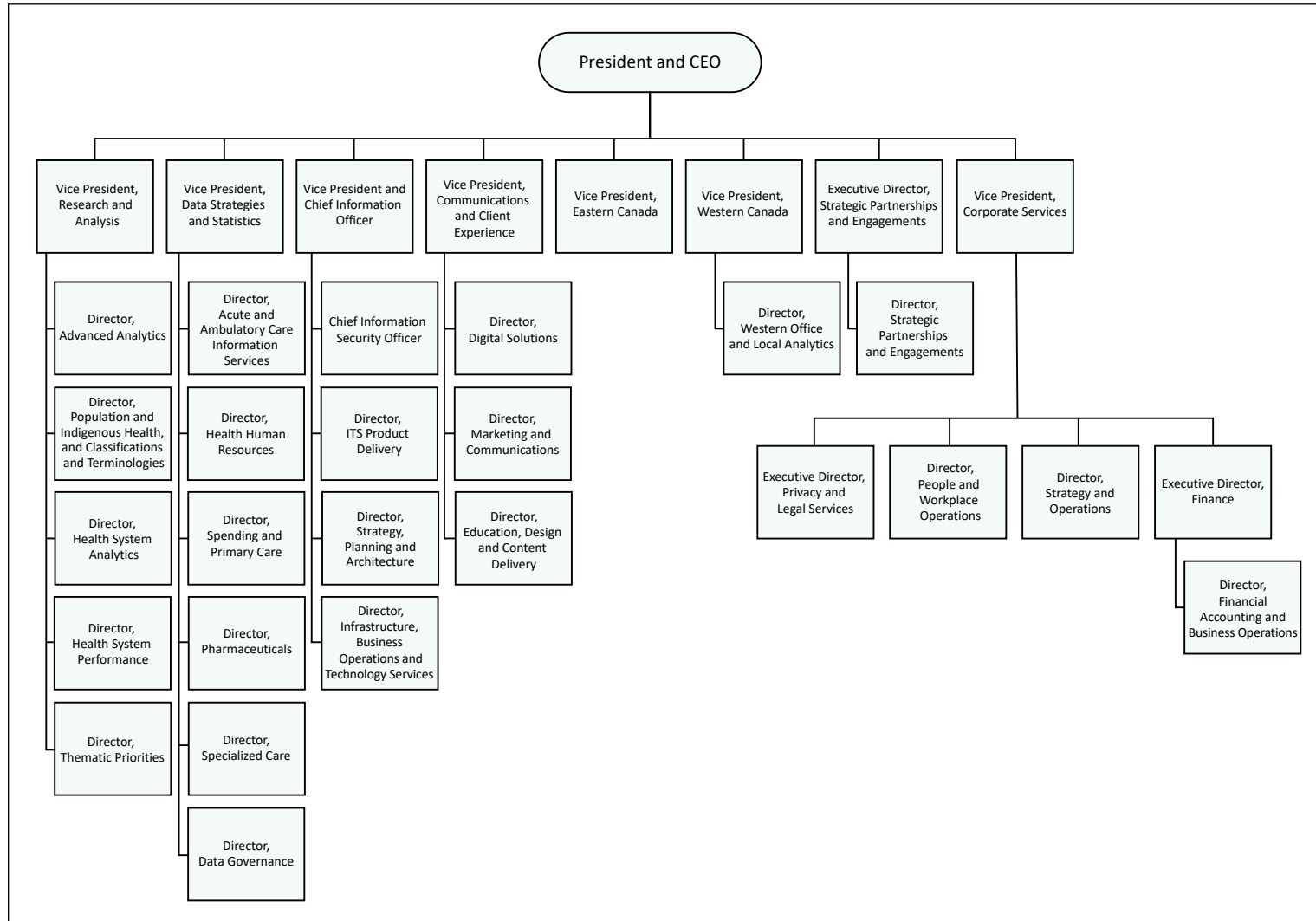
Privacy and
security

Information
technology

Appendix B: CIHI's organizational profile

Senior management organization chart

As of April 1, 2024



Organizational profile

The total staff complement is 808, which represents 768 FTEs for 2024–2025. The budget includes an average vacancy factor of 5.0%.

Table B1 Number of CIHI positions by division and staff category, as of April 1, 2024

Division	Executive/ senior management	Managers	Professional/ senior technical	Support	Total
Office of the President and CEO	2	2	1	1	6
Research and Analysis	6	18	119	14	157
Data Strategies and Statistics	6	20	204	43	273
Information Technology and Services	5	13	110	29	157
Corporate Services	6	10	54	22	92
Communications and Client Experience	4	7	63	34	108
Eastern Canada	1	4	5	0	10
Western Canada	1	5	4	1	11
Total	31	79	560	144	814

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, 2023

Tenure	Number of employees	Percentage of employees
5 years and less	287	37%
6–10 years	145	19%
11–15 years	179	23%
16+ years	167	21%
Total	778	100%

Note

* Includes permanent employees only; excludes contract staff.

Table B3 CIHI's employees* by age, as of December 31, 2023

Age	Number of employees	Percentage of employees
Younger than 30	62	8%
30–39	208	27%
40–49	245	31%
50+	263	34%
Total	778	100%

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, 2023

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

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, 2024

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, Strategic Partnerships and Engagements.

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, Health Human Resources
- Director, Pharmaceuticals; 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, Communications and Client Experience are

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

Reporting to Vice President, Western Canada is

- Director, Western Office and Local Analytics.

Reporting to Executive Director, Strategic Partnerships and Engagements is

- Director, Strategic Partnerships and Engagements.

Reporting to Vice President, Corporate Services are

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

Reporting to Executive Director, Finance is

- Director, Financial Accounting and Business Operations.



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 511
Montréal, Que.
H3A 2R7
514-842-2226

cihi.ca

49434-0324

