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Appendix A: Self-Harm, Including Suicide, breakdown by type of harm event, 2018–2019

Appendix D: Text alternatives for fgures

About this report

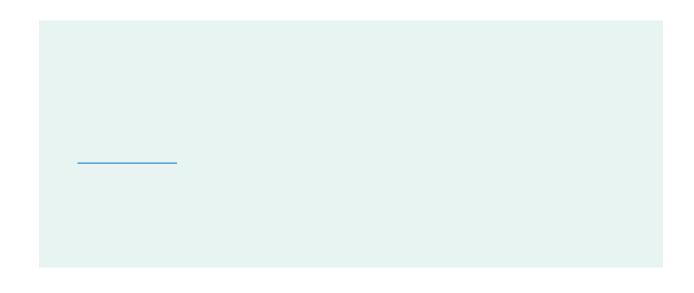
Long-term care

Background

Indicator selection



New indicators and results



Data limitations and caveats

underestimates

minimum

Key results

There is a 7-fold variation in Self-Harm, Including Suicide rates across provinces and territories

Figure 1 Age-standardized rate of Self-Harm, Including Suicide per 100,000, by province and territory, 2018–2019

Figure 3 Percentage of patients with self-harm who had repeat hospital stays for self-harm within a year, by age and sex, 2018–2019

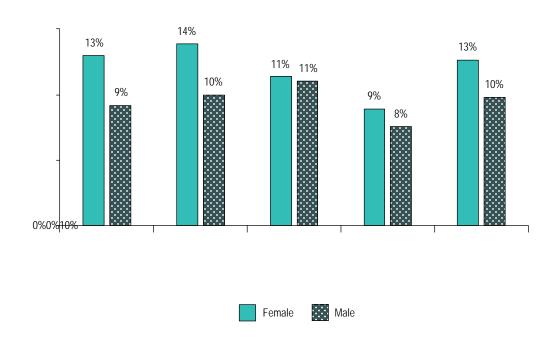
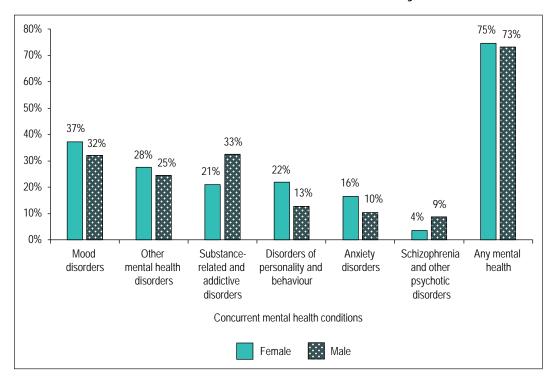


Figure 4 Percentage of hospital stays for self-harm with a concurrent mental health condition, by sex, 2018–2019



Note

Sources

Lir	nks to other (CIHI resc	urces		
	Self-Harm and Ass	ault: A Close	er Look at	: Children a	and Youth
Lir	nks to other S	Statistics	Canad	da reso	urces
Ca	aregiver D	istress	<u> </u>		
De	finition				

Rationale

Calculation

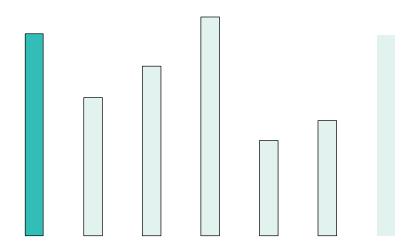
Table 3 Data availability for Caregiver Distress

Data source	Year	Coverage
Home Care Reporting System		

Note

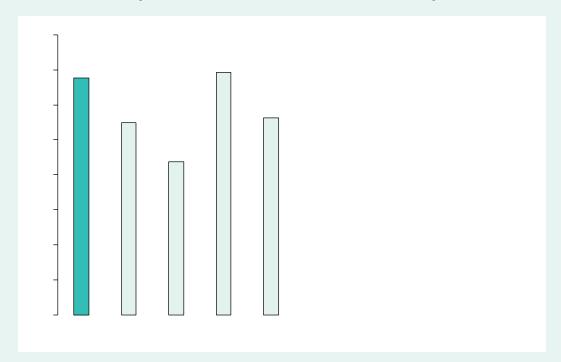
Data limitations and caveats

Figure 5 Risk-adjusted rate of Caregiver Distress by province and territory, 2018–2019



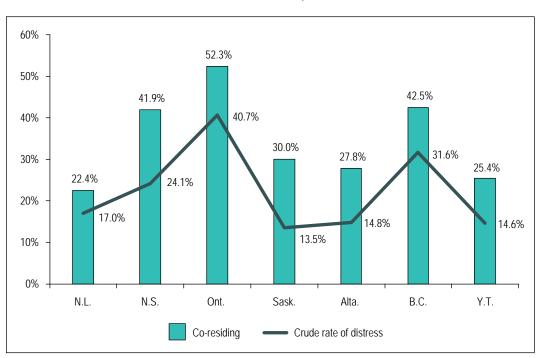
Survey snapshot

Figure 6 Percentage of Canadian caregivers who reported their caregiving responsibilities were stressful or very stressful in the General Social Survey, 2018



Caregivers are nearly twice as likely to be distressed if they live with the person receiving home care

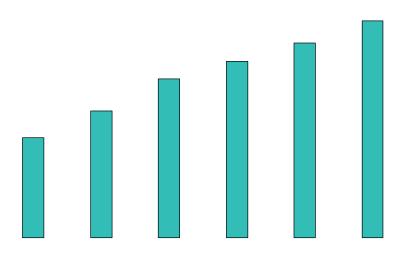
Figure 7 Rate of Caregiver Distress and percentage of individuals who co-reside, 2018–2019



Source

For caregivers in distress, time spent caring is the equivalent of a full-time job

Figure 9 Percentage of caregivers reporting distress by number of personal care activities requiring substantial help, 2018–2019



New Long-Term Care Residents Who Potentially Could Have Been Cared for at

Table 5 Data availability for New Long-Term Care Residents Who Potentially Could Have Been Cared for at Home

Data source	Year	Coverage
Continuing Care Reporting System		

Notes

There is wide provincial and territorial variation in the proportion of new residents who potentially could have been cared for at home

Figure 10 Risk-adjusted percentage of New Long-Term Care Residents Who Potentially Could Have Been Cared for at Home, by province and territory, 2018–2019

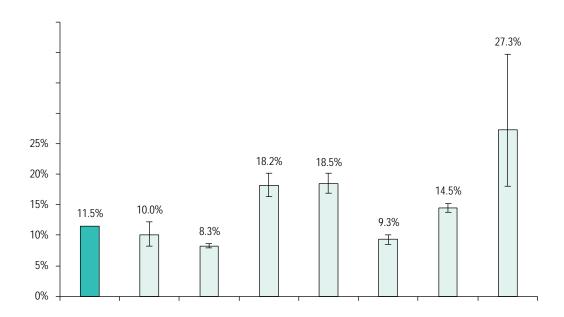


Table 6 Location and living arrangement prior to being admitted to long-term care

Resident characteristic	Potentially could have been cared for at home	Total new long-term care admissions	Those who potentially could have been cared for at home as percentage of total new admissions
Rural			
Urban			
Lived alone prior to admission			
Did not live alone			

Notes

Links to other CIHI resources

CIHI

Developing working definitions for home care wait times and community mental health

 Table 7
 Indicator development progress

Indicator	Year and stream	Status of standard definition	Data sources	Coverage by jurisdiction
Hospital Stays for Harm Caused by Substance Use				
Frequent Emergency Room Visits for Help With Mental Health and/or Addictions				

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Conclusion

indicators also refect complex public health challenges with no easy fxes. The impact of the

better information is a good place to start

Appendix B: New Long-Term Care Residents Who Potentially Could Have Been Cared for at Home

Table B1

Appendix C: Methodology notes for qualitative study

Families identify health system navigation and financial difficulties as barriers to remaining at home

provincial/regional resident and family councils, CIHI's client afairs managers and CIHI's Patient Engagement Of ce. A pre-screening survey and telephone interview identifed about

Appendix D: Text alternatives for figures

Figure 2: Rate of Self-Harm, Including Suicide per 100,000, by age and sex, 2018–2019

Age group	Self-harm deaths, female	Self-harm deaths, male	Self-harm hospitalizations, female	Self-harm hospitalizations, male
10 to 24				
25 to 44				
45 to 64				
65+				

Sources

Figure 3: Percentage of patients with self-harm who had repeat hospital stays for self-harm within a year, by age and sex, 2018–2019

Age group	Female	Male
10 to 24		
25 to 44		
45 to 64		
65+		
All ages		

Sources

Figure 4: Percentage of hospital stays for self-harm with a concurrent mental health condition, by sex, 2018–2019

Figure 7: Rate of Caregiver Distress and percentage of individuals who co-reside, 2018–2019

Jurisdiction	Crude rate of distress	Co-residing
N.L.		
N.S.		
Ont.		
Sask.		
Alta.		
B.C.		
Y.T.		

Source

Figure 8: Average number of caregiver hours per week, 2018–2019

Figure 10: Risk-adjusted percentage of New Long-Term Care Residents Who Potentially Could Have Been Cared for at Home, by province and territory, 2018–2019

Jurisdiction	Rate	Lower confidence interval	Upper confidence interval
Canada			
N.L.			
Ont.			
Man.			
Sask.			
Alta.			
B.C.			
Y.T.			

Notes

The confidence interval (CI) is used to establish whether the indicator result is statistically different from the average. The width

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