

Table 13.1 | POWER Study Leading Set of Health Equity Indicators†

Prevention and Population Health

1. Activity limitations

Percentage of adults aged 25 and older who reported that their activities at home, school, or work had been limited due to a long-term physical condition, mental condition, or health problem

2. Fall-related hospitalizations among seniors

Rate of fall-related hospitalizations per 100,000 adults aged 65 and older

3. Health behaviours that increase the risk of chronic disease

Percentage of adults aged 25 and older who reported the following health behaviours that increase the risk of chronic diseases:

- Physical inactivity
- Inadequate fruit and vegetable intake
- Being overweight or obese
- Smoking

4. Diabetes prevalence

Prevalence of diabetes among adults aged 20 and older in Ontario

5. Cancer screening

• **Screening for breast cancer**

Percentage of women aged 50–69 with no history of breast cancer who had a mammogram in the last two years

• **Screening for colorectal cancer**

Percentage of adults aged 50–74 with no history of colorectal cancer who had one or more fecal occult blood tests (FOBT) in the last two years

• **Screening for cervical cancer**

Percentage of women aged 18–70 with no history of cervical cancer, and who have not had a hysterectomy, who had at least one Papanicolaou (Pap) test in the last three years

• **Follow up of abnormal Pap tests**

Percentage of patients whose Pap test showed a low-grade lesion (ASCUS or LGSIL) and who had either a repeat Pap test or colposcopy within six months of the initial Pap test

Chronic Disease Management

6. Mental health: integrated depression care

• **Physician visits for depression after a hospitalization for depression**

Percentage of patients aged 15 and older hospitalized for depression who had a physician visit for depression within 30 days of discharge

• **Emergency department visits for any reason within 30 days after a hospitalization for depression**

Percentage of Ontarians aged 15 and older who were hospitalized for depression who had an emergency department visit (but were not readmitted) within 30 days of being discharged

• **Hospital readmission for depression within 30 days after a hospitalization for depression**

Percentage of Ontarians aged 15 and older who were readmitted to hospital for depression in the 30 days post-discharge after a hospital stay for depression

Table 13.1 | POWER Study Leading Set of Health Equity Indicators[†] (Continued)**Chronic Disease Management (continued)****7. Emergency department visits after a hospitalization for heart failure**

Percentage of patients aged 45 and older admitted to hospital for heart failure who visited an emergency department within 30 days and within one year following hospital discharge

- All-cause emergency department visits
- Cardiovascular disease-related emergency department visits
- Heart failure-specific emergency department visits

8. Hospital readmission after a hospitalization for heart failure

Percentage of patients aged 45 and older admitted to hospital for heart failure who had a non-elective readmission within 30 days and within one year following hospital discharge

- All-cause readmissions
- Cardiovascular disease-related readmissions
- Heart failure-specific readmissions

9. Angiography for acute myocardial infarction

Percentage of patients aged 45 and older admitted to hospital for an acute myocardial infarction who underwent or were referred for coronary angiography within three months of hospital discharge

10. Hospital admission rates for ambulatory care sensitive conditions

The rates of acute care hospitalizations per 100,000 adults aged 25 and older for the following conditions where effective ambulatory care can prevent or reduce the need for admission to hospital:

- Heart failure
- Chronic obstructive pulmonary disease
- Asthma
- Diabetes

11. Emergency department visits for ambulatory care sensitive conditions

The rates of emergency department visits per 100,000 adults aged 25 and older for the following conditions where effective ambulatory care can prevent or reduce the need for emergency care:

- Heart failure
- Chronic obstructive pulmonary disease
- Asthma
- Diabetes

12. Specialist care for adults with rheumatoid arthritis

Percentage of people aged 25 and older with rheumatoid arthritis who were seen by a specialist (rheumatologist, orthopaedic surgeon, general internist, or physical medicine specialist) in a one-year period

13. Diagnosis and treatment post-fracture for older adults

Percentage of adults aged 66 and older who suffered a low-trauma fracture who received neither a bone mineral density (BMD) test nor prescription drug treatment within one year after their fracture

14. Baseline bone mineral density (BMD) testing in older adults

Percentage of adults aged 68–70 who had not had a BMD test between the ages of 55–65 and who received a BMD test after they turned age 65

Table 13.1 | POWER Study Leading Set of Health Equity Indicators[†] (Continued)

Chronic Disease Management (continued)

15. Eye examination for adults with new onset diabetes

Percentage of adults aged 30 and older with newly diagnosed diabetes who had a visit to a general practitioner/family physician, optometrist, or ophthalmologist for an eye examination within two years of diagnosis

16. Hospitalizations related to diabetes complications

Number of adults (per 100,000) aged 20 and older with diabetes who had at least one hospitalization over a one year period for:

- Hyper or hypoglycemia
- Acute myocardial infarction
- Heart failure
- Stroke
- Major lower-extremity amputation (below hip and above ankle)
- Minor lower-extremity amputation (ankle or lower)

17. Chronic dialysis for adults with diabetes

Number of adults (per 100,000) aged 20 and older with diabetes who received chronic dialysis (dialysis duration of 90 days or more) over a one-year period

Access to Care

18. Difficulty accessing routine or ongoing health care

Percentage of the population aged 25 and older who reported no difficulties obtaining routine or ongoing primary health care for themselves or their family members over the past 12 months

19. Difficulties accessing primary care for an urgent, non-emergent health problem

Percentage of the population aged 25 and older who reported no difficulties making an appointment for immediate care for an urgent, non-emergent health problem from their family doctor over the past 12 months

20. Dental care

Percentage of the population aged 25 and older who did not visit a dentist in the past 12 months

Reproductive Health

21. Rate of caesarean section

Rate of caesarean section per 100 women:

- who gave birth
- who had a previous caesarean section
- with full-term (37 and more weeks of gestation), singleton, vertex deliveries

22. Live births to teenage women

Live births to teenage women (per 1,000 women aged 15–19)

23. Proportion of hysterectomies for benign conditions that are performed vaginally or laparoscopically

Percentage of women aged 15–84 who had a hysterectomy for a benign gynaecological condition who had either a vaginal or a laparoscopically-assisted hysterectomy

Table 13.1 | POWER Study Leading Set of Health Equity Indicators[†] (Continued)**Reproductive Health (continued)****24. Obstetrical complications among pregnant women with diabetes**

Percentage of pregnant women aged 20 and older with pregestational diabetes, gestational diabetes, and no diabetes who delivered over a five-year period who had the following obstetrical complications:

- A diagnosis of hypertension (pre-existing or pregnancy-induced) in the six months before or at delivery
- Preeclampsia/eclampsia in the six months before or at delivery
- Any obstructed labour (including shoulder dystocia)
- Shoulder dystocia at delivery
- Caesarean section

Social Determinants of Health**25. Low income**

Percentage of adults aged 25 and older who reported a low annual household income

26. Low education

Percentage of adults aged 25 and older who reported lower levels of educational attainment

27. Food insecurity

Percentage of adults aged 25 and older who reported food insecurity

[†] For detailed definitions of these indicators, please refer to the relevant POWER Study chapters.

POWER Study