

Results

PART B: DIABETES MEASURES BY REGION

Erie St. Clair

LOCAL HEALTH
INTEGRATION
NETWORK



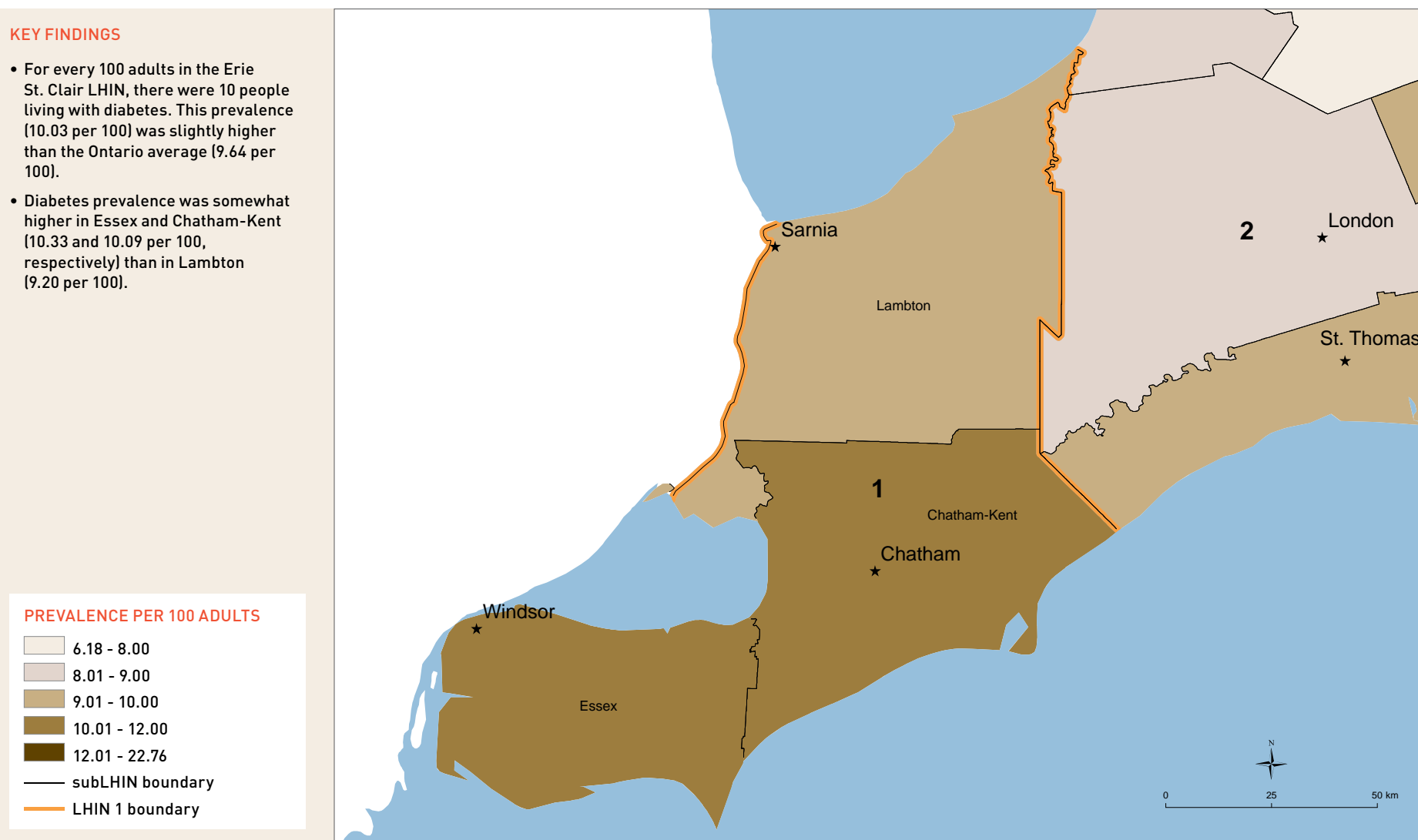
Diabetes Measures by Region

EXHIBIT 1.1

Diabetes prevalence per 100 adults in the Erie St. Clair LHIN (1), by subLHIN, on March 31, 2011

KEY FINDINGS

- For every 100 adults in the Erie St. Clair LHIN, there were 10 people living with diabetes. This prevalence (10.03 per 100) was slightly higher than the Ontario average (9.64 per 100).
- Diabetes prevalence was somewhat higher in Essex and Chatham-Kent (10.33 and 10.09 per 100, respectively) than in Lambton (9.20 per 100).



Data sources: Ontario Diabetes Database; Registered Persons Database.

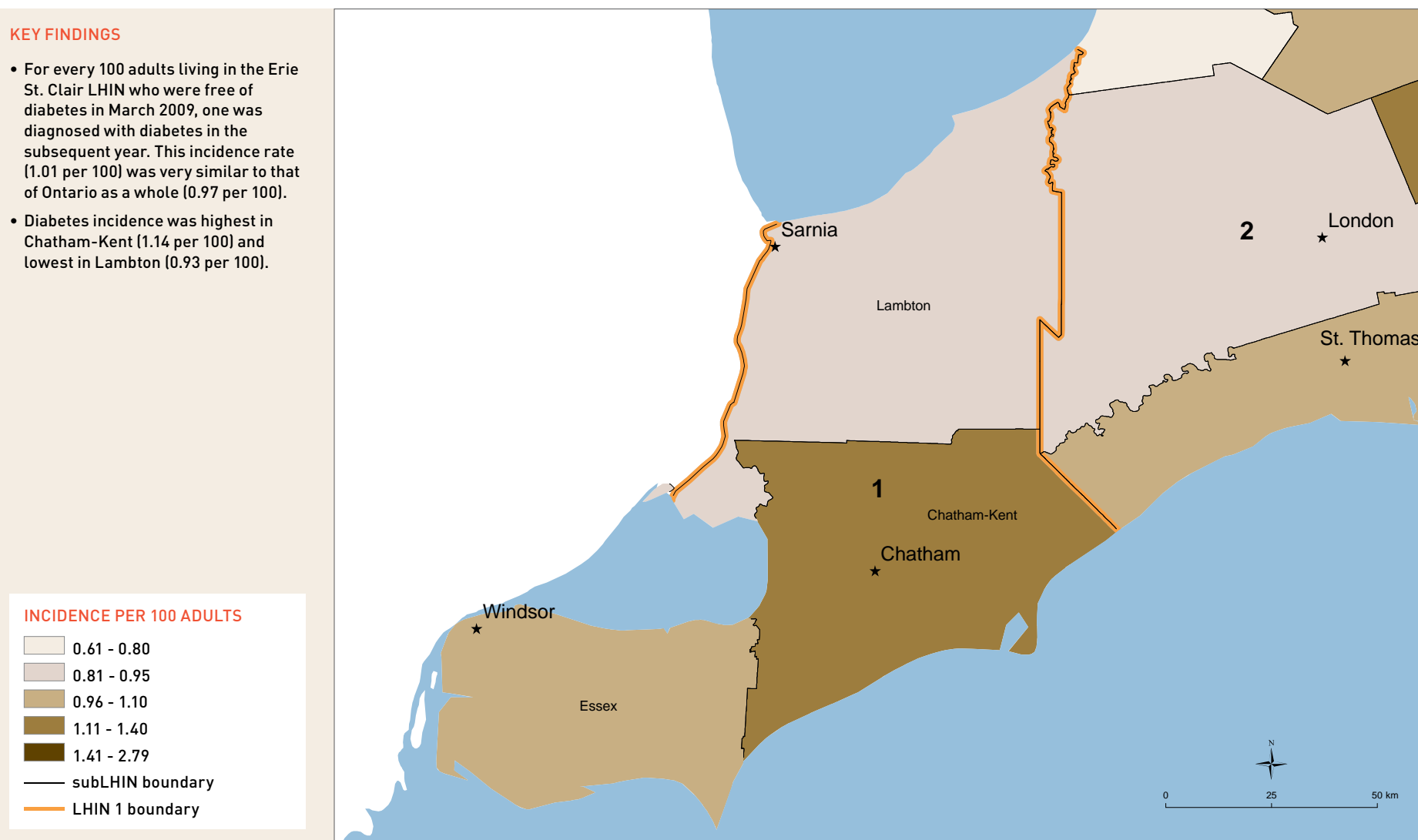
Technical note: Adults were defined as those aged 20 years and older. Rates were age- and sex-standardized using the 2001 Ontario population of the same age as the standard population.

EXHIBIT 1.2

Diabetes incidence per 100 adults in the Erie St. Clair LHIN (1), by subLHIN, 2009/10

KEY FINDINGS

- For every 100 adults living in the Erie St. Clair LHIN who were free of diabetes in March 2009, one was diagnosed with diabetes in the subsequent year. This incidence rate (1.01 per 100) was very similar to that of Ontario as a whole (0.97 per 100).
- Diabetes incidence was highest in Chatham-Kent (1.14 per 100) and lowest in Lambton (0.93 per 100).



Data sources: Ontario Diabetes Database; Registered Persons Database.

Technical note: Adults were defined as those aged 20 years and older. Rates were age- and sex-standardized using the 2001 Ontario population of the same age as the standard population.

EXHIBIT 1.3

Number, per 10,000 adults with diabetes, who had at least one hospitalization or emergency department visit for hyper- or hypoglycemia in the Erie St. Clair LHIN (1), by subLHIN, 2006/07–2010/11

KEY FINDINGS

- Overall, for every 100 adults living with diabetes in the Erie St. Clair LHIN on March 31, 2006, more than five had at least one hospitalization or emergency department (ED) visit for hyper- or hypoglycemia in the subsequent five years. This rate (547 per 10,000 adults with diabetes) was higher than the provincial average (486 per 10,000).
- Rates of hospitalizations/ED visits for hyper- or hypoglycemia varied substantially across subLHINs. The highest rate was in Chatham-Kent (693 per 10,000) and the lowest in Essex (495 per 10,000).

NUMBER PER 10,000 ADULTS WITH DIABETES

- 272 - 400
- 401 - 500
- 501 - 600
- 601 - 700
- 701 - 1001

— subLHIN boundary
— LHIN 1 boundary



Data sources: National Ambulatory Care Reporting System; Canadian Institute of Health Information Discharge Abstract Database; Ontario Diabetes Database.

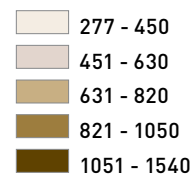
Technical note: Adults were defined as those aged 20 years and older. Rates were age- and sex-standardized using the same-aged population in the Ontario Diabetes Database on March 31, 2006 as the standard population.

EXHIBIT 1.4

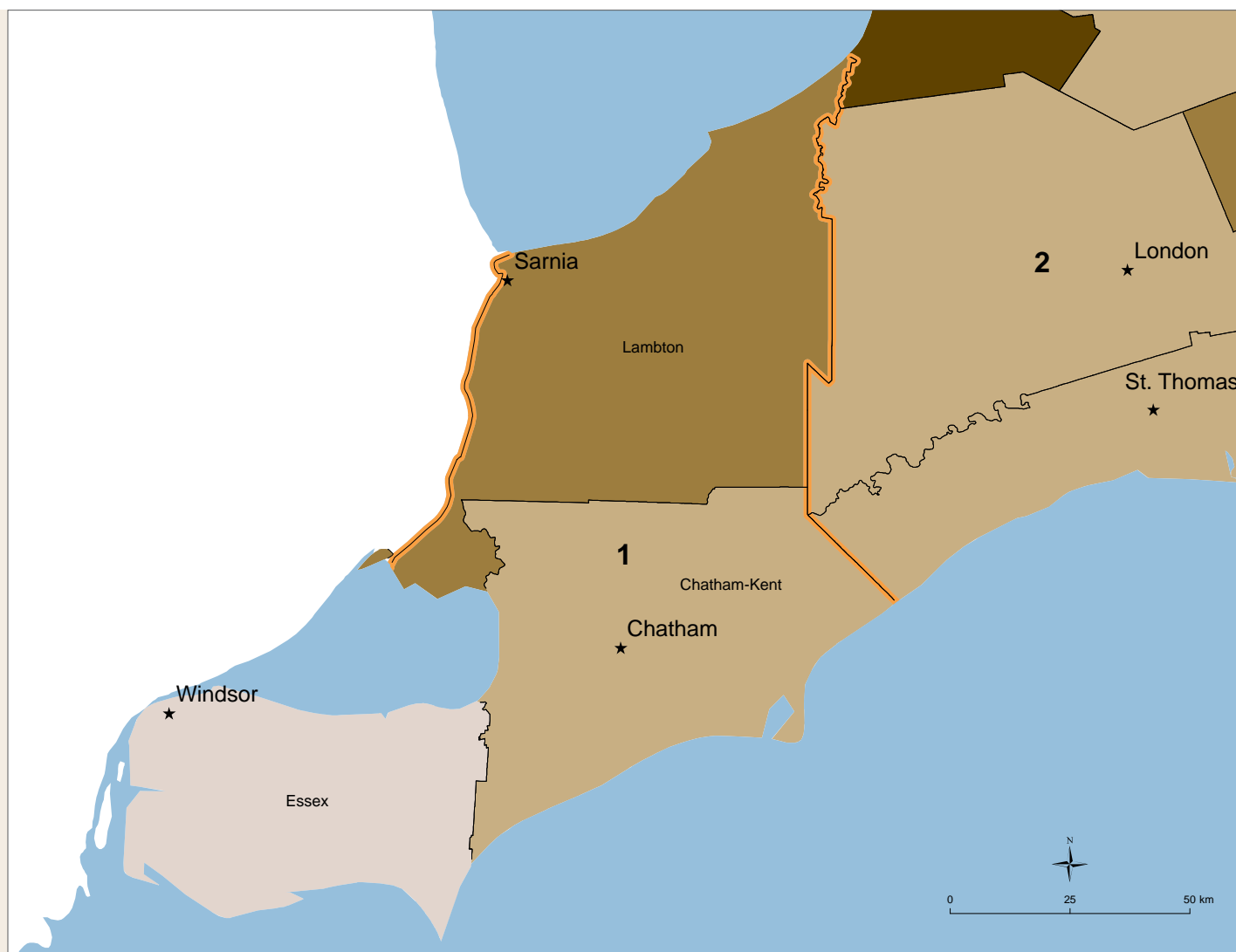
Number, per 10,000 adults with diabetes, who had at least one hospitalization or emergency department visit for skin and soft tissue infection or foot ulcer in the Erie St. Clair LHIN (1), by subLHIN, 2006/07–2010/11

KEY FINDINGS

- For every 100 adults living with diabetes in the Erie St. Clair LHIN in 2006, nearly seven had at least one hospitalization or emergency department visit for a skin and soft tissue infection or foot ulcer during the subsequent five years. This rate (684 per 10,000 adults with diabetes) was somewhat higher than the provincial average (618 per 10,000).
- Rates varied substantially across subLHINs, ranging from 566 per 10,000 in Essex to 981 per 10,000 in Lambton.

NUMBER PER 10,000 ADULTS WITH DIABETES

— subLHIN boundary
— LHIN 1 boundary



Data sources: National Ambulatory Care Reporting System; Canadian Institute of Health Information Discharge Abstract Database; Ontario Diabetes Database.

Technical note: Adults were defined as those aged 20 years and older. Rates were age- and sex-standardized using the same-aged population in the Ontario Diabetes Database on March 31, 2006 as the standard population.

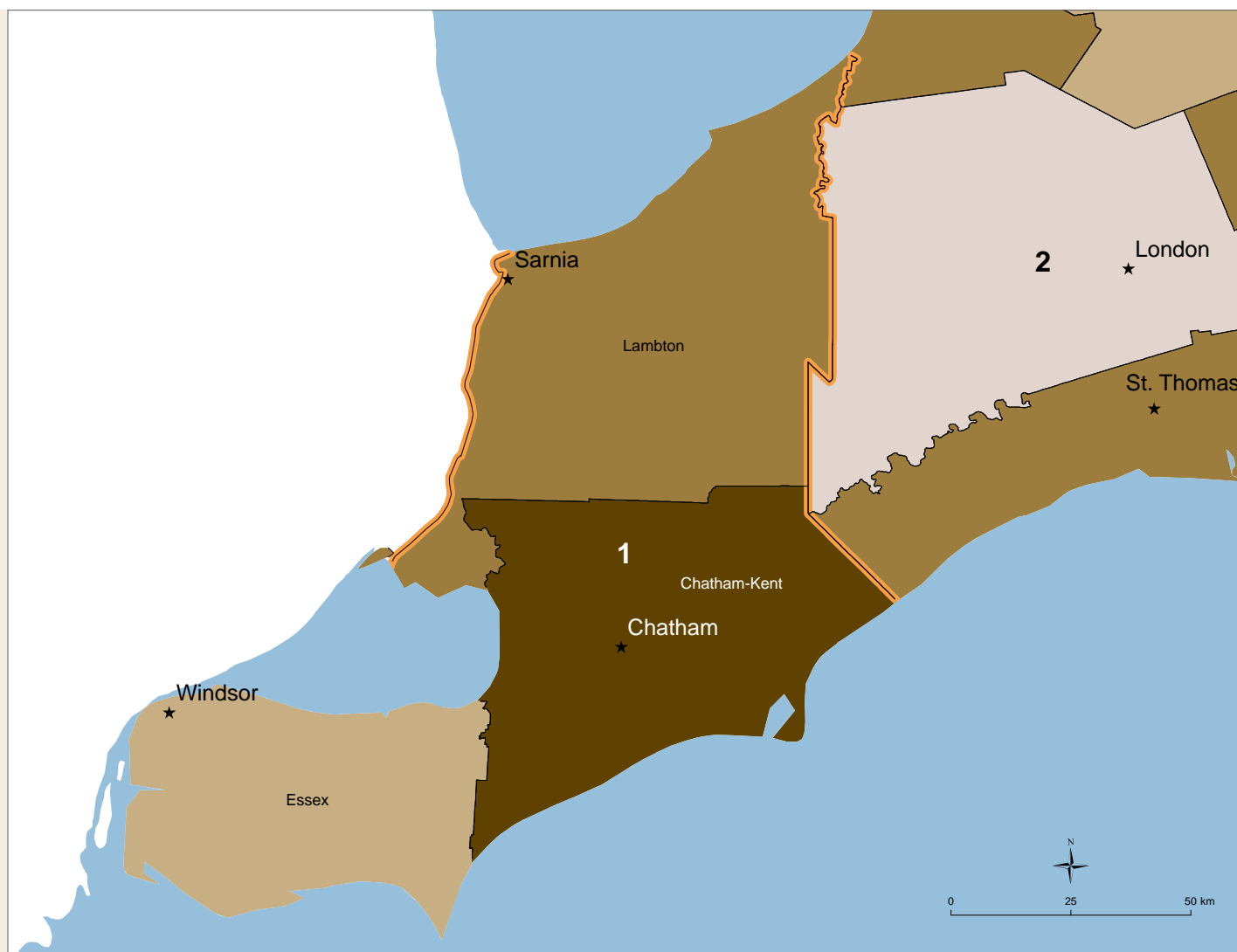
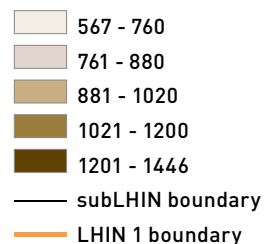
EXHIBIT 1.5

Number, per 10,000 adults with diabetes, who had at least one hospitalization for a cardiovascular condition in the Erie St. Clair (LHIN 1), by subLHIN, 2006/07–2010/11

KEY FINDINGS

- More than one in 10 adults with diabetes living in the Erie St. Clair LHIN in 2006 were hospitalized for a cardiovascular condition at least once in the ensuing five years. This rate (1,052 per 10,000 adults with diabetes) was higher than the provincial average (888 per 10,000).
- Rates varied across subLHINs, but all were above the provincial average. The highest rate of hospitalizations was in Chatham-Kent (1,298 per 10,000), followed by Lambton (1,081 per 10,000) and Essex (973 per 10,000).

NUMBER PER 10,000 ADULTS WITH DIABETES



Data sources: Canadian Institute of Health Information Discharge Abstract Database; Ontario Diabetes Database.

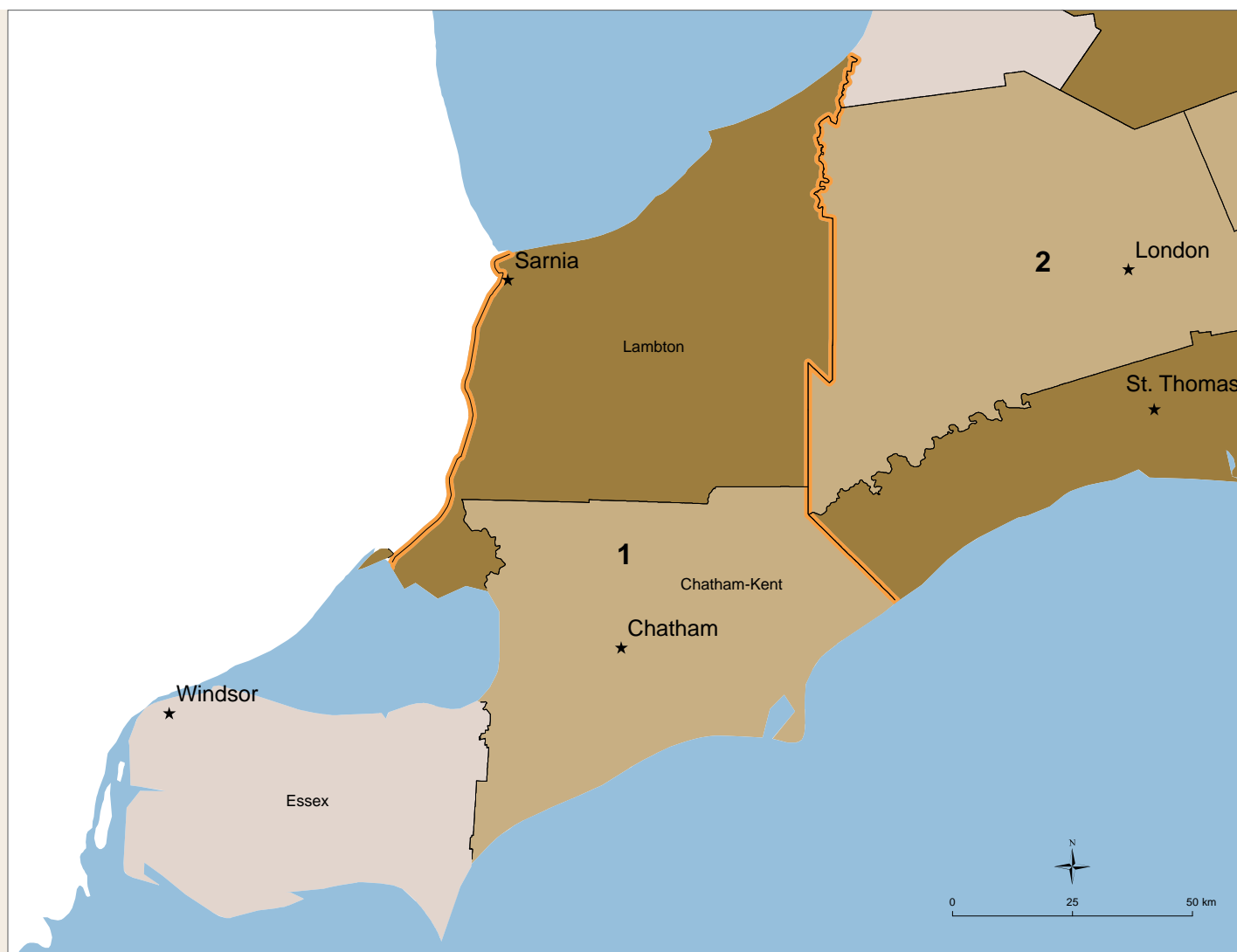
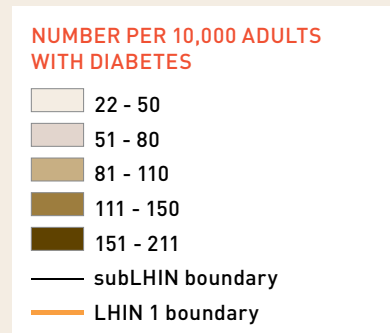
Technical notes: Adults were defined as those aged 20 years and older. Rates were age- and sex-standardized using the same-aged population in the Ontario Diabetes Database on March 31, 2006 as the standard population. Cardiovascular conditions included myocardial infarction, stroke, congestive heart failure, unstable angina and transient ischemic attack.

EXHIBIT 1.6

Number, per 10,000 adults with diabetes, who had a lower extremity amputation in the Erie St. Clair LHIN (1), by subLHIN, 2006/07–2010/11

KEY FINDINGS

- In the Erie St. Clair LHIN, nearly eight of every 1,000 adults with diabetes experienced a lower extremity amputation between 2006/07 and 2010/11. This rate (78 per 10,000 adults with diabetes) was slightly higher than the Ontario average (74 per 10,000).
- Rates varied by as much as two-fold across subLHINs: the highest rate was in Lambton (120 per 10,000) and the lowest in Essex (60 per 10,000).



Data sources: Canadian Institute of Health Information Discharge Abstract Database; Ontario Diabetes Database.

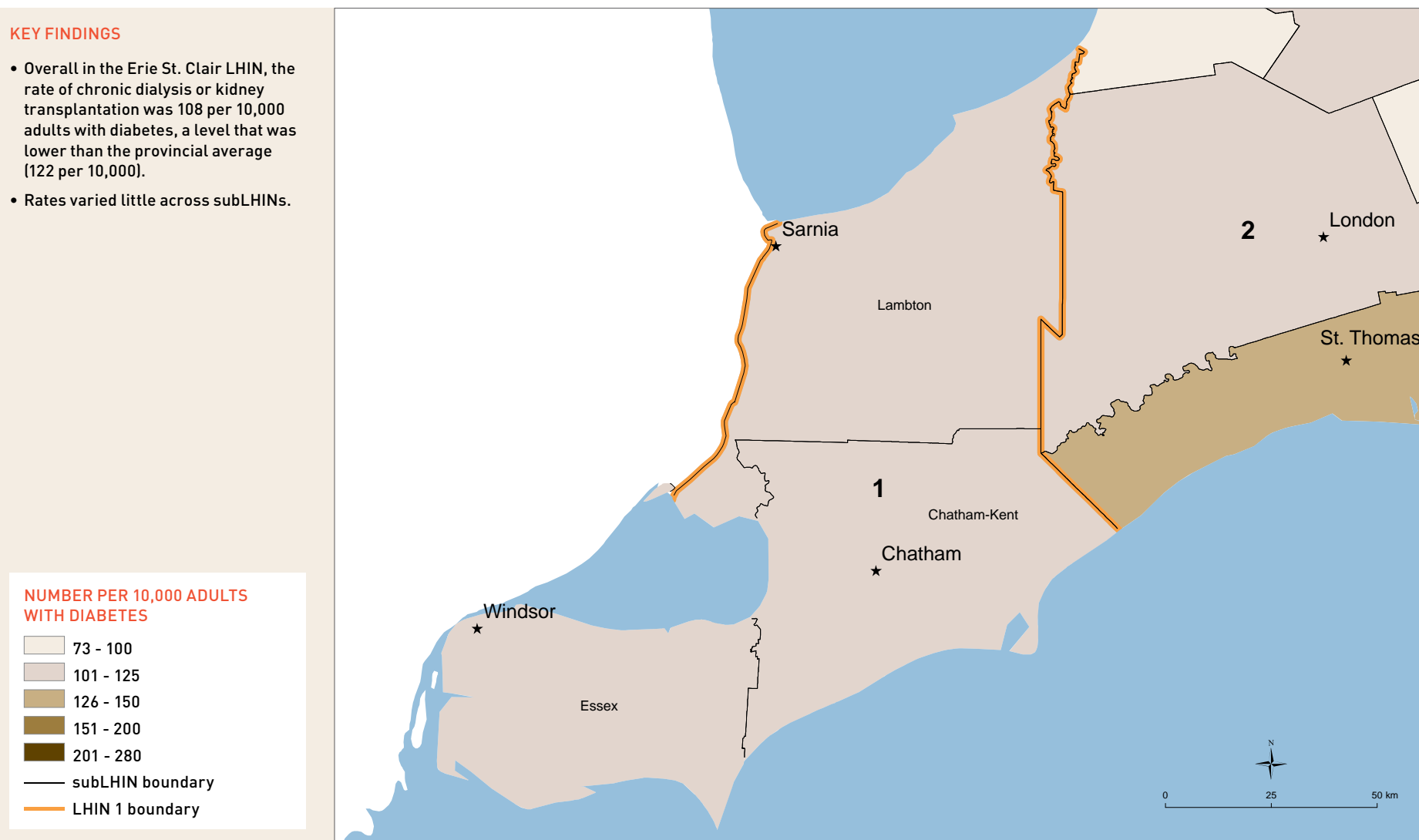
Technical note: Adults were defined as those aged 20 years and older. Rates were age- and sex-standardized using the same-aged population in the Ontario Diabetes Database on March 31, 2006 as the standard population.

EXHIBIT 1.7

Number, per 10,000 adults with diabetes, who received chronic dialysis or kidney transplantation in the Erie St. Clair LHIN (1), by subLHIN, 2006/07–2010/11

KEY FINDINGS

- Overall in the Erie St. Clair LHIN, the rate of chronic dialysis or kidney transplantation was 108 per 10,000 adults with diabetes, a level that was lower than the provincial average (122 per 10,000).
- Rates varied little across subLHINs.



Data sources: Ontario Health Insurance Plan Database; Canadian Organ Replacement Register Database; Canadian Institute of Health Information Discharge Abstract Database; Trillium Gift of Life Network Database; Ontario Diabetes Database.

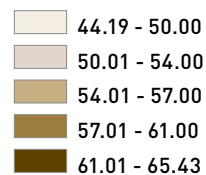
Technical note: Adults were defined as those aged 20 years and older. Rates were age- and sex-standardized using the same-aged population in the Ontario Diabetes Database on March 31, 2006 as the standard population.

EXHIBIT 1.8

Number, per 100 adults with diabetes, who had an additional chronic medical condition in the Erie St. Clair LHIN (1), by subLHIN, 2006/07–2008/09

KEY FINDINGS

- In the Erie St. Clair LHIN overall, approximately 59 of every 100 adults with diabetes had at least one chronic medical condition other than diabetes between 2006/07 and 2008/09. This rate (59.42 per 100) was somewhat higher than the provincial average (54.84 per 100).
- There was very little variation in rates across subLHINs.

NUMBER PER 100 ADULTS WITH DIABETES

— subLHIN boundary
— LHIN 1 boundary



Data sources: Ontario Health Insurance Plan Database; Ontario Diabetes Database.

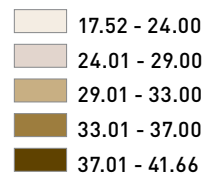
Technical note: Adults were defined as those aged 20 years and older. Rates were age- and sex-standardized using the same-aged population in the Ontario Diabetes Database on March 31, 2006 as the standard population.

EXHIBIT 1.9

Number, per 100 adults with diabetes, who made a mental health visit for a psychotic or nonpsychotic illness in the Erie St. Clair LHIN (1), by subLHIN, 2006/07–2008/09

KEY FINDINGS

- In the Erie St. Clair LHIN, approximately one-third of adults with diabetes had one or more mental health visits between 2006/07 and 2008/09. This rate (34.40 per 100) was slightly higher than the provincial average (32.89 per 100).
- There was a significant degree of variation in rates across subLHINs, ranging from 27.15 per 100 in Chatham-Kent to 37.58 per 100 in Essex.

NUMBER PER 100 ADULTS WITH DIABETES

— subLHIN boundary
— LHIN 1 boundary

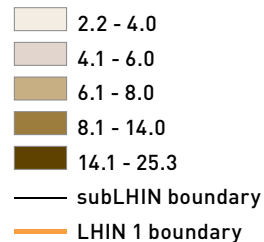


Data sources: Ontario Health Insurance Plan Database; Ontario Diabetes Database.

Technical note: Adults were defined as those aged 20 years and older. Rates were age- and sex-standardized using the same-aged population in the Ontario Diabetes Database on March 31, 2006 as the standard population.

EXHIBIT 1.10**Percentage of economic families with low income in the Erie St. Clair LHIN (1), by subLHIN, 2005****KEY FINDINGS**

- In the Erie St. Clair LHIN, more than six of every 100 families were living with low income in 2005. This percentage (6.6%) was lower than the provincial average (8.6%).
- The percentage of low-income families in Lambton and Chatham-Kent was lower than both the LHIN and provincial averages. Levels of low income were somewhat higher in the Essex subLHIN.

PERCENTAGE OF LOW-INCOME ECONOMIC FAMILIES

Data source: 2006 Census of Canada.

Technical note: Economic family refers to a group of two or more persons who live in the same dwelling and are related by blood, marriage, common law or adoption. Economic families with low income are defined as those that devote a larger share of their after-tax income (at least 20% more than average) to necessities of food, shelter and clothing. Performance of this measure is limited in rural and remote communities due to missing data from First Nations reserves.

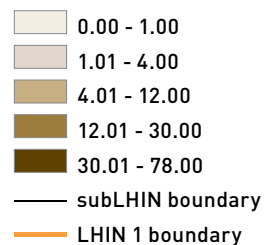
EXHIBIT 1.11

Percentage of visible minorities in the Erie St. Clair LHIN (1), by subLHIN, 2006

KEY FINDINGS

- In the Erie St. Clair LHIN, the overall percentage of residents who self-identified as belonging to a visible minority group (10.16%) was less than half the provincial average (22.82%).
- There were fewer visible minorities living in Lambton and Chatham-Kent compared with Essex.

PERCENTAGE OF VISIBLE MINORITIES



Data source: 2006 Census of Canada.

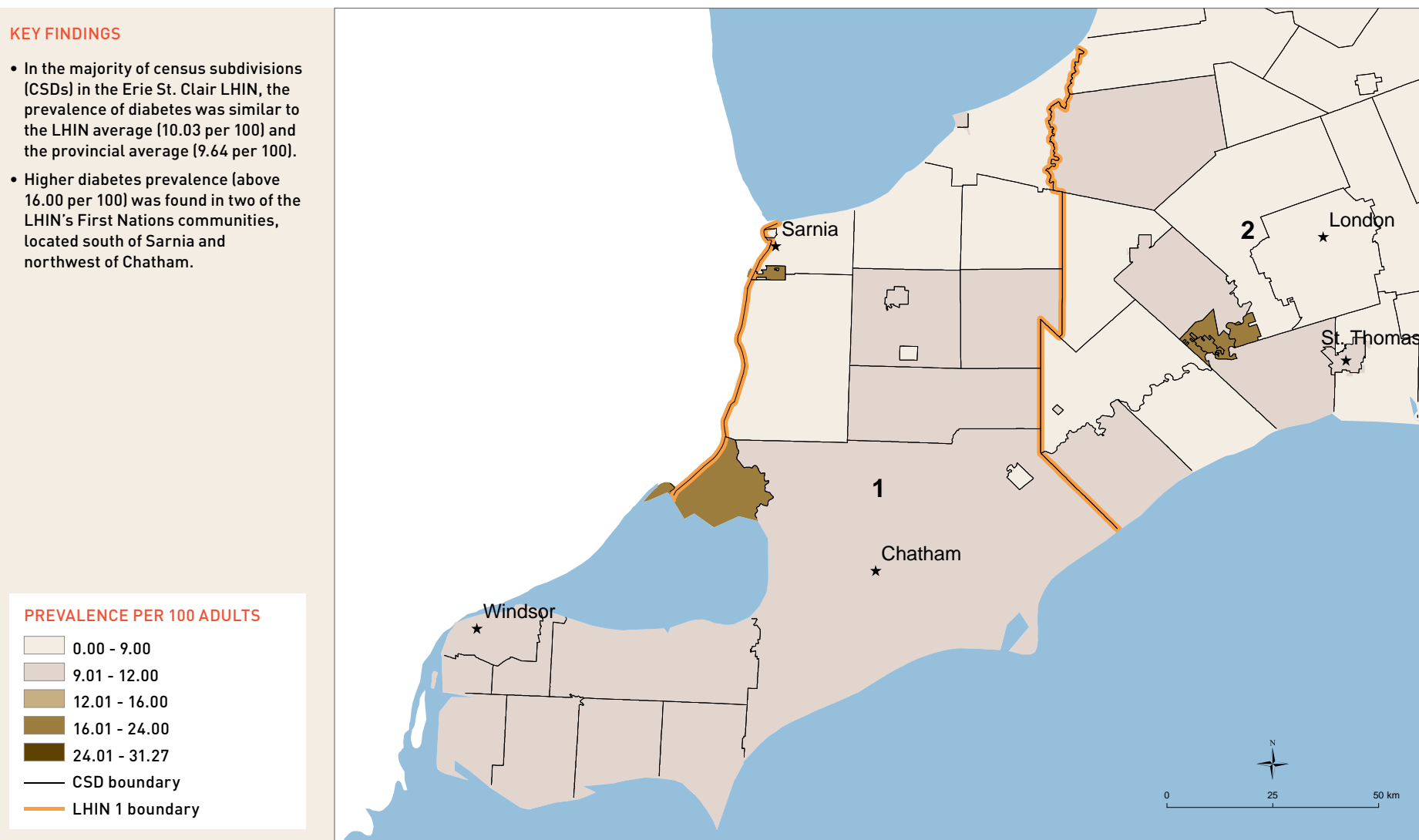
Technical note: Visible minorities include persons other than Aboriginal peoples who are non-Caucasian in race or non-white in colour.

EXHIBIT 1.12

Diabetes prevalence per 100 adults in the Erie St. Clair LHIN (1), by census subdivision, on March 31, 2011

KEY FINDINGS

- In the majority of census subdivisions (CSDs) in the Erie St. Clair LHIN, the prevalence of diabetes was similar to the LHIN average (10.03 per 100) and the provincial average (9.64 per 100).
- Higher diabetes prevalence (above 16.00 per 100) was found in two of the LHIN's First Nations communities, located south of Sarnia and northwest of Chatham.



Data sources: Ontario Diabetes Database; Registered Persons Database.

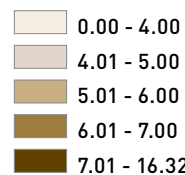
Technical note: Adults were defined as those aged 20 years and older. Rates were age- and sex-standardized using the 2001 Ontario population of the same age as the standard population.

EXHIBIT 1.13

Diabetes incidence per 100 adults in the Erie St. Clair LHIN (1), by census subdivision, 2005/06–2009/10

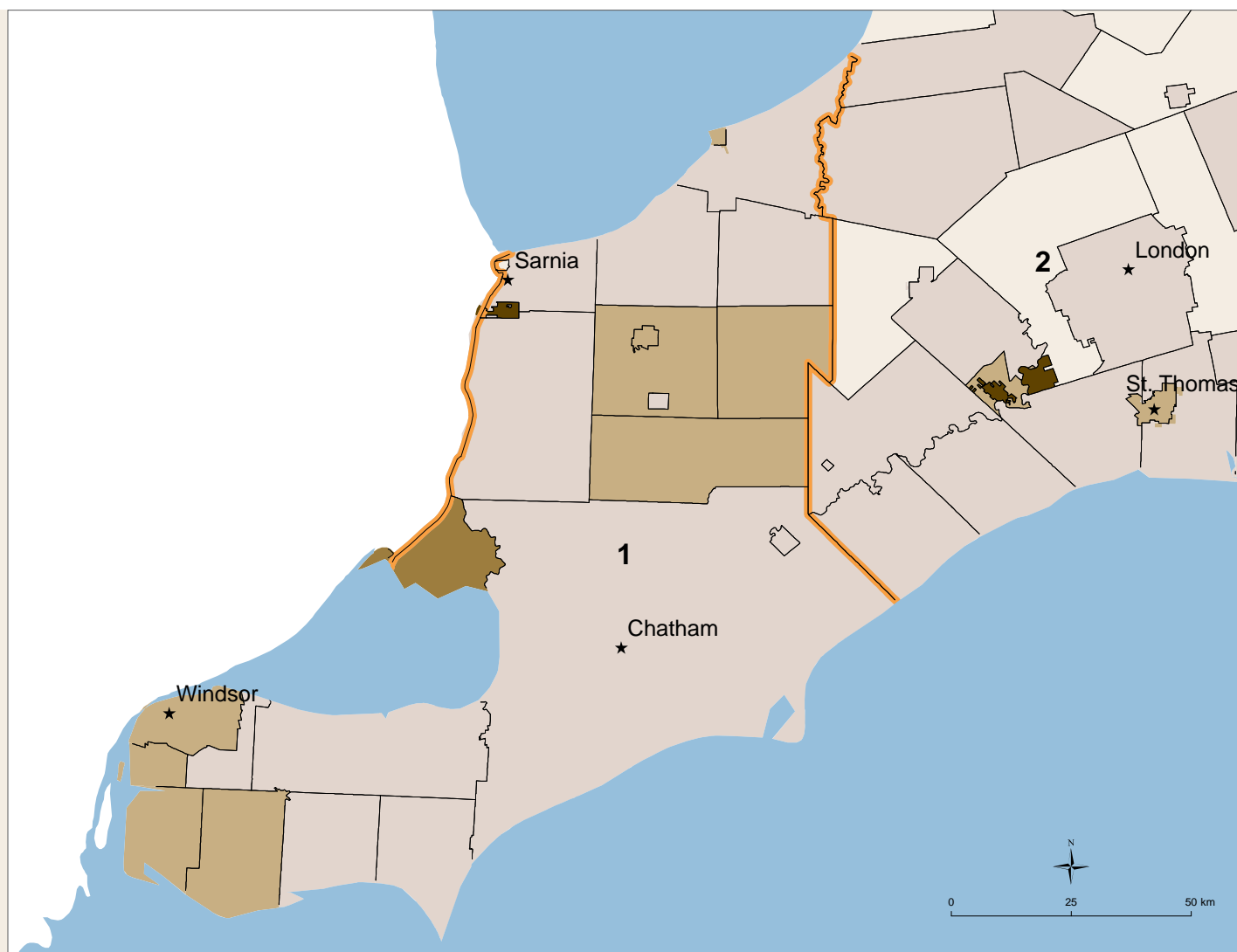
KEY FINDINGS

- In most census subdivisions (CSDs), the incidence of diabetes in adults over the five-year period between April 2005 and March 2010 was similar to the LHIN average (4.92 per 100) and the provincial average (4.85 per 100).
- The highest incidence rates were found in two of the LHIN's First Nations communities, located south of Sarnia and northwest of Chatham. These CSDs also had high levels of diabetes prevalence (see Exhibit 1.12).
- Higher-than-average rates were also found in several communities near Windsor and southeast of Sarnia.

INCIDENCE PER 100 ADULTS

— CSD boundary

— LHIN 1 boundary boundary



Data sources: Ontario Diabetes Database; Registered Persons Database.

Technical note: Adults were defined as those aged 20 years and older. Rates were age- and sex-standardized using the 2001 Ontario population of the same age as the standard population.

EXHIBIT 1.14

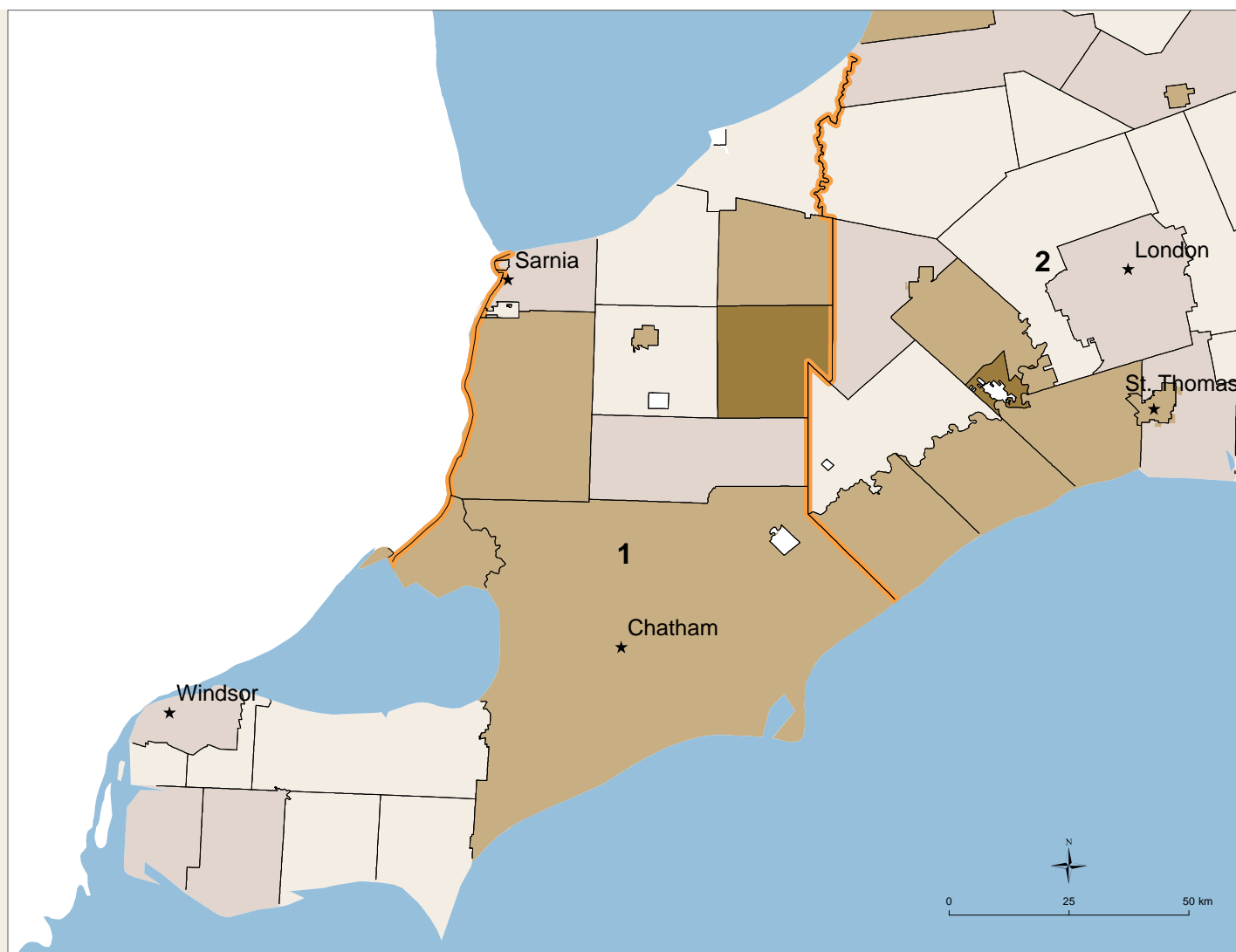
Number, per 10,000 adults with diabetes, who had at least one hospitalization or emergency department visit for hyper- or hypoglycemia in the Erie St. Clair LHIN (1), by census subdivision, 2006/07–2010/11

KEY FINDINGS

- In most census subdivisions (CSDs) in the Erie St. Clair LHIN, rates of hospitalizations or emergency department visits for hyper- or hypoglycemia were similar to the LHIN average (547 per 10,000 adults with diabetes) and the provincial average (486 per 10,000).
- Higher-than-average rates were found in several largely rural communities located along the central-west and central-east border of the LHIN and surrounding Chatham. The highest rate in the LHIN was 964 per 10,000.

NUMBER PER 10,000 ADULTS WITH DIABETES

- Data unavailable
- 0 - 480
- 481 - 650
- 651 - 930
- 931 - 1400
- 1401 - 2168
- CSD boundary
- LHIN 1 boundary



Data sources: National Ambulatory Care Reporting System; Canadian Institute of Health Information Discharge Abstract Database; Ontario Diabetes Database.

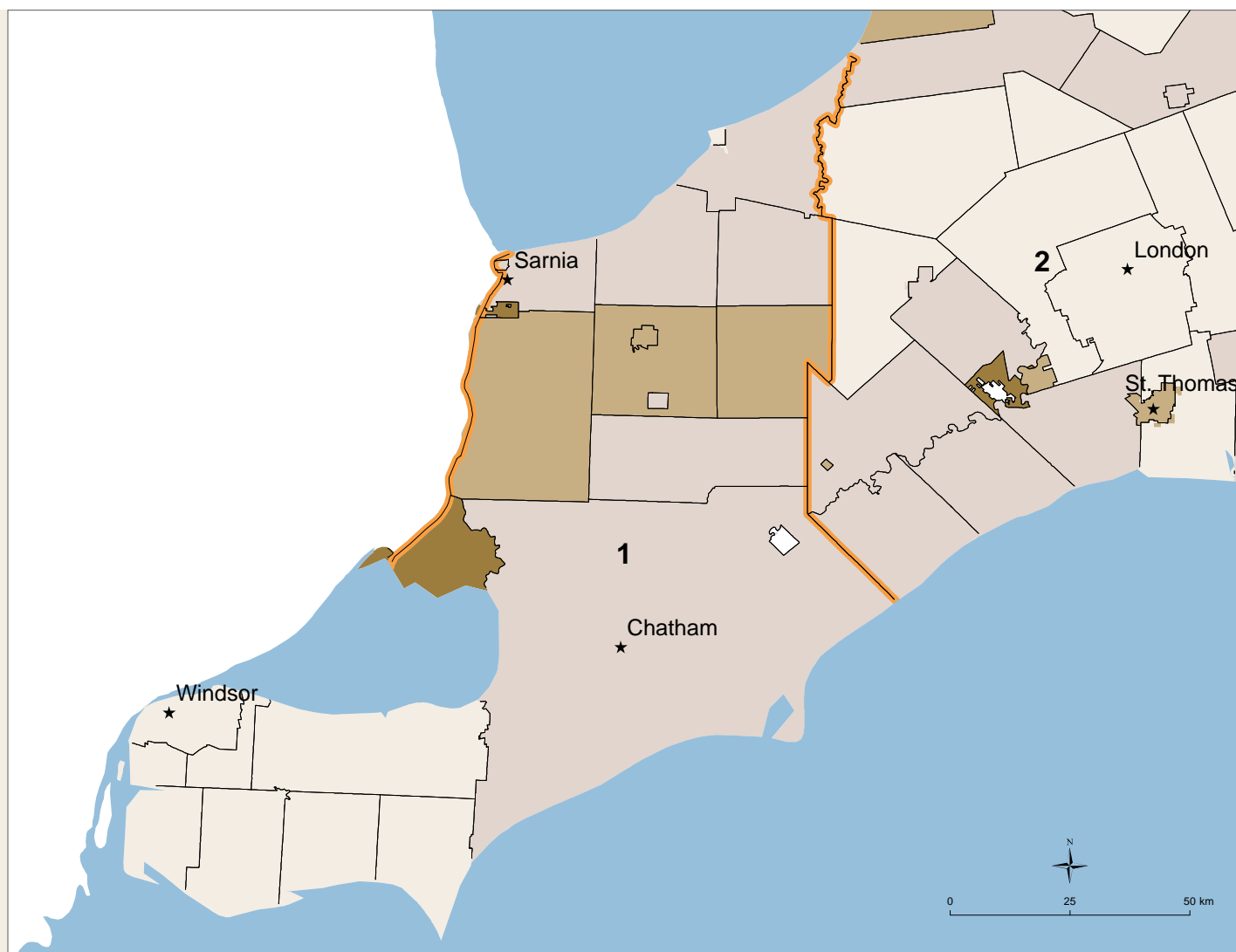
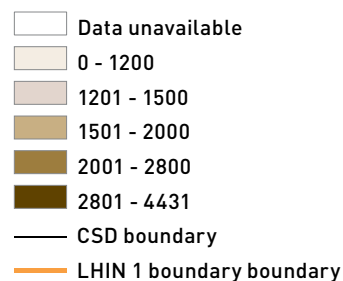
Technical note: Adults were defined as those aged 20 years and older. Rates were age- and sex-standardized using the same-aged population in the Ontario Diabetes Database on March 31, 2006 as the standard population.

EXHIBIT 1.15

Number, per 10,000 adults with diabetes, who had at least one hospitalization or emergency department visit for any acute complication in the Erie St. Clair LHIN (1), by census subdivision, 2006/07–2010/11

KEY FINDINGS

- Between 2006/07 and 2010/11, rates of hospitalizations or emergency department visits for acute complications in most census subdivisions (CSDs) were similar to the LHIN average (1,145 per 10,000 adults with diabetes) and the provincial average (1,029 per 10,000).
- Rates were highest in several of the LHIN's First Nations communities. The lowest rates were seen in a number of CSDs near Windsor.

NUMBER PER 10,000 ADULTS WITH DIABETES

Data sources: National Ambulatory Care Reporting System; Canadian Institute of Health Information Discharge Abstract Database; Ontario Diabetes Database.

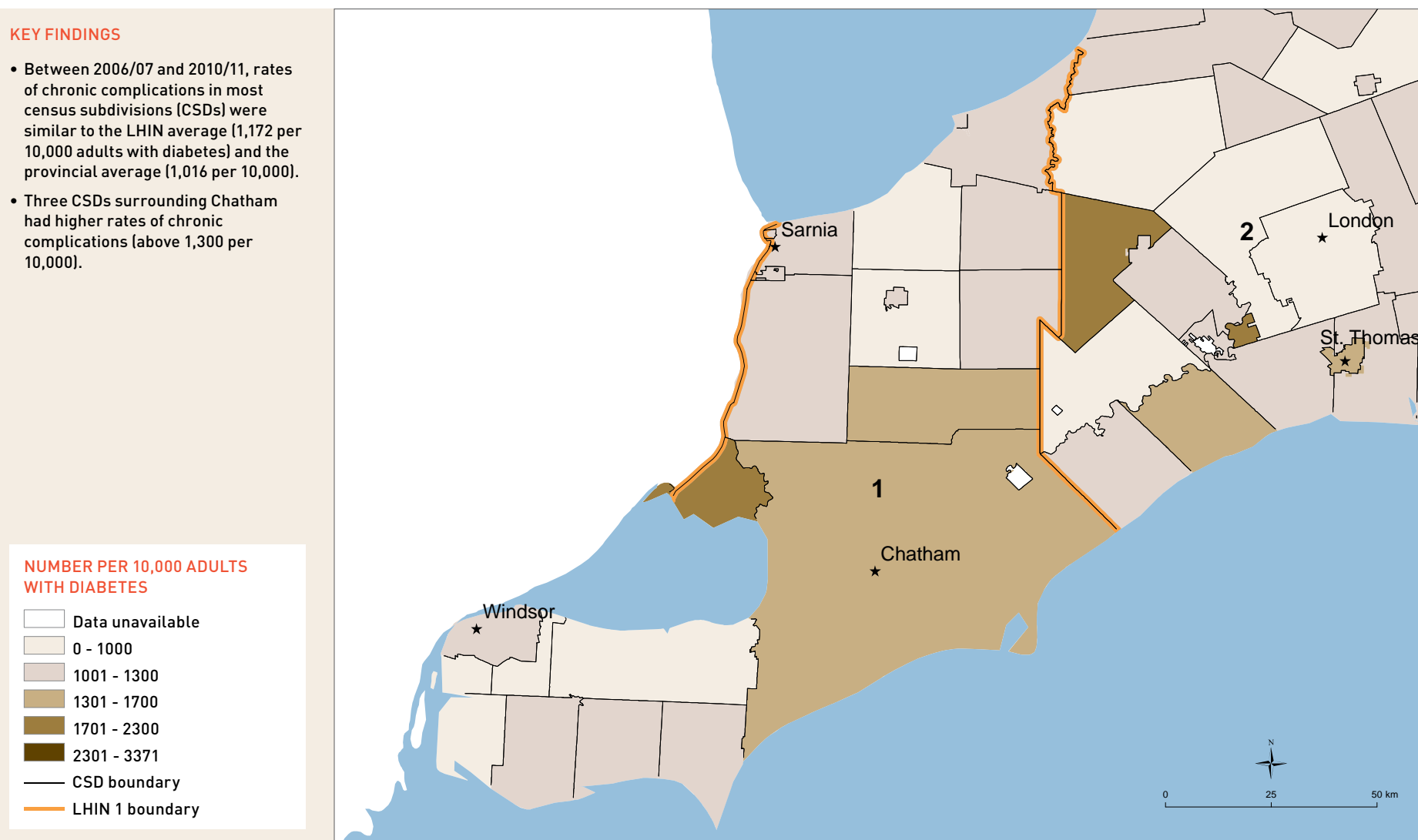
Technical notes: Adults were defined as those aged 20 years and older. Rates were age- and sex-standardized using the same-aged population in the Ontario Diabetes Database on March 31, 2006 as the standard population. Acute complications consisted of hyper- or hypoglycemia, skin and soft tissue infection or foot ulcer.

EXHIBIT 1.16

Number, per 10,000 adults with diabetes, who had any chronic complication in the Erie St. Clair LHIN (1), by census subdivision, 2006/07–2010/11

KEY FINDINGS

- Between 2006/07 and 2010/11, rates of chronic complications in most census subdivisions (CSDs) were similar to the LHIN average (1,172 per 10,000 adults with diabetes) and the provincial average (1,016 per 10,000).
- Three CSDs surrounding Chatham had higher rates of chronic complications (above 1,300 per 10,000).



Data sources: Ontario Health Insurance Plan Database; Canadian Organ Replacement Register Database; Canadian Institute of Health Information Discharge Abstract Database; Trillium Gift of Life Network; Ontario Diabetes Database.

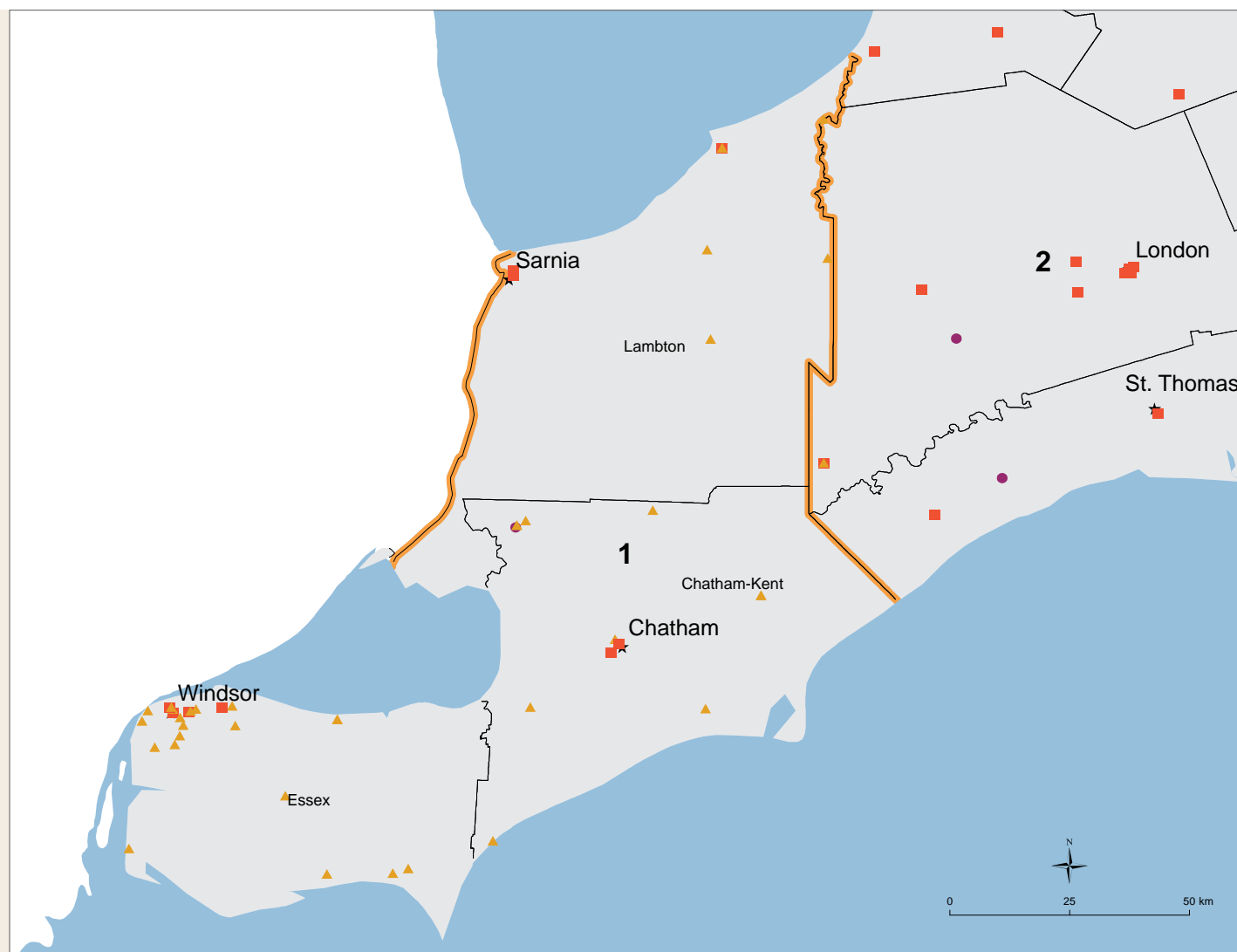
Technical note: Adults were defined as those aged 20 years and older. Rates were age- and sex-standardized using the same-aged population in the Ontario Diabetes Database on March 31, 2006 as the standard population. A chronic complication consisted of hospitalization for a cardiovascular condition or having a lower extremity amputation or end-stage renal disease (chronic dialysis or kidney transplantation).

EXHIBIT 1.17**Locations of diabetes education programs in the Erie St. Clair LHIN (1), 2011****KEY FINDINGS**

- In all subLHINs, the main diabetes education programs were located within or very near major urban centres (Sarnia, Chatham and Windsor).
- Outreach diabetes programs were more dispersed across the LHIN.

TYPE OF PROGRAM

- Main program
- Program satellite
- ▲ Outreach program
- subLHIN boundary
- LHIN 1 boundary



Data source: Diabetes Regional Coordination Centres.

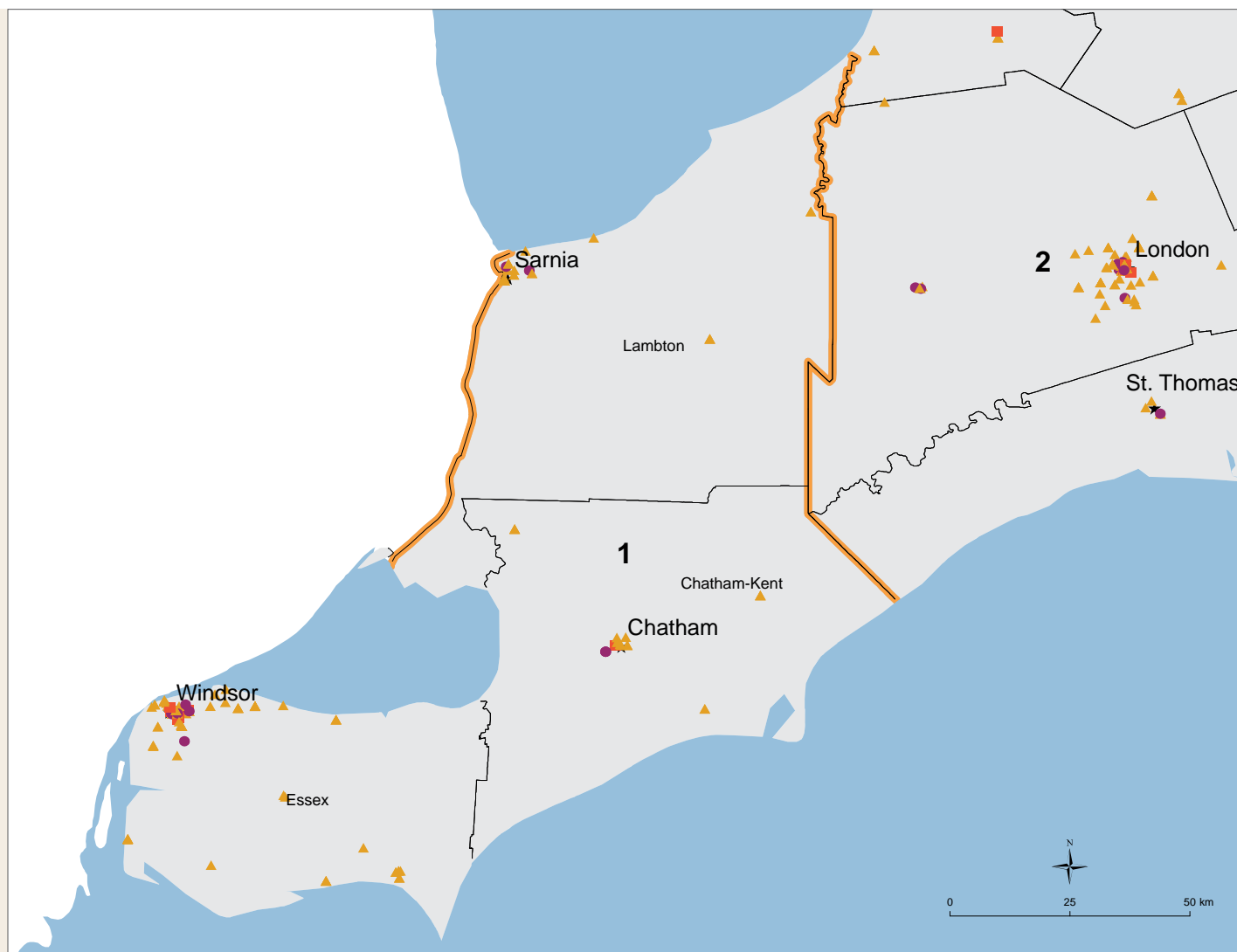
Technical note: Locations were designated based on six-digit postal codes using Statistics Canada's Postal Code Conversion File.

EXHIBIT 1.18**Locations of endocrinologists and eye specialists in the Erie St. Clair LHIN (1), 2010/11****KEY FINDINGS**

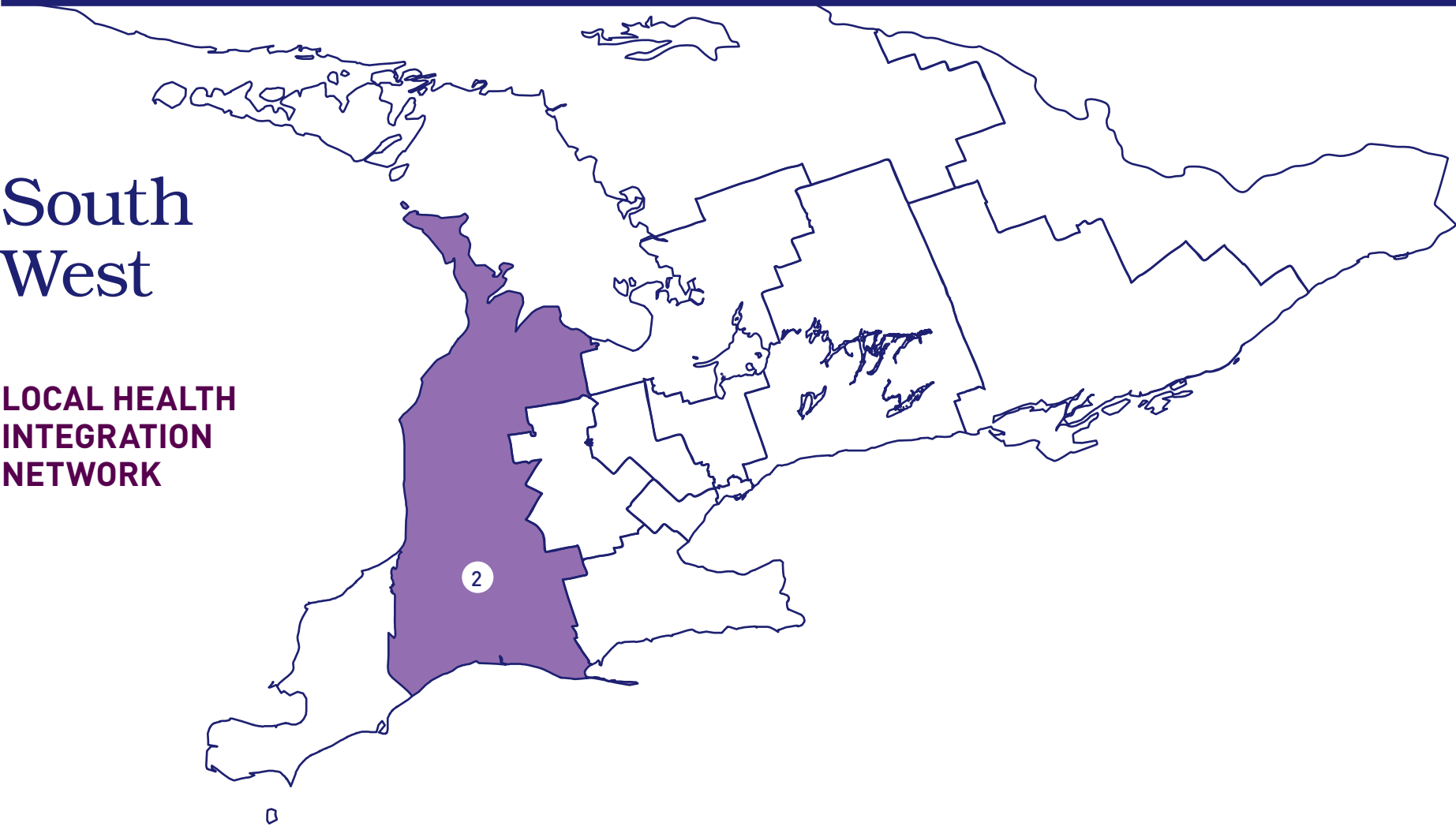
- Endocrinologists and eye specialists (optometrists and ophthalmologists) were generally clustered near major urban centres (Sarnia, Chatham and Windsor).
- There were no endocrinology practices in the Lambton subLHIN.
- Optometrists were the most numerous and were distributed more widely across the LHIN compared with endocrinologists and ophthalmologists.

TYPE OF SPECIALIST

- Endocrinologist
- Ophthalmologist
- ▲ Optometrist
- subLHIN boundary
- LHIN 1 boundary



Data sources: Locations of endocrinologists and ophthalmologists came from the ICES Physician Database, 2010; listings of optometrists came from the Corporate Provider Database, April 1, 2010 to March 31, 2011.
 Technical note: Locations were designated based on six-digit postal codes using Statistics Canada's Postal Code Conversion File.



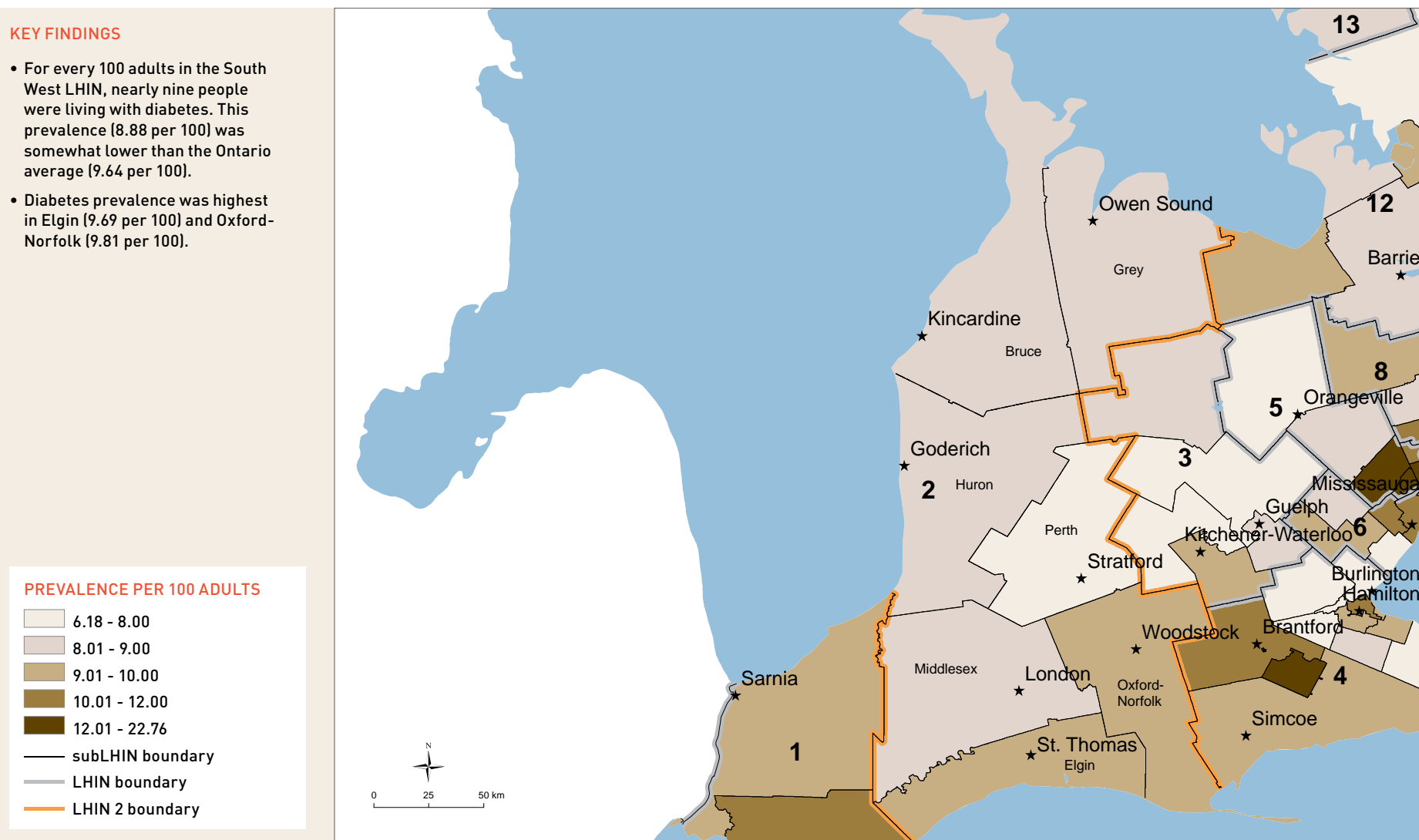
Diabetes Measures by Region

EXHIBIT 2.1

Diabetes prevalence per 100 adults in the South West LHIN (2), by subLHIN, on March 31, 2011

KEY FINDINGS

- For every 100 adults in the South West LHIN, nearly nine people were living with diabetes. This prevalence (8.88 per 100) was somewhat lower than the Ontario average (9.64 per 100).
- Diabetes prevalence was highest in Elgin (9.69 per 100) and Oxford-Norfolk (9.81 per 100).



Data sources: Ontario Diabetes Database; Registered Persons Database.

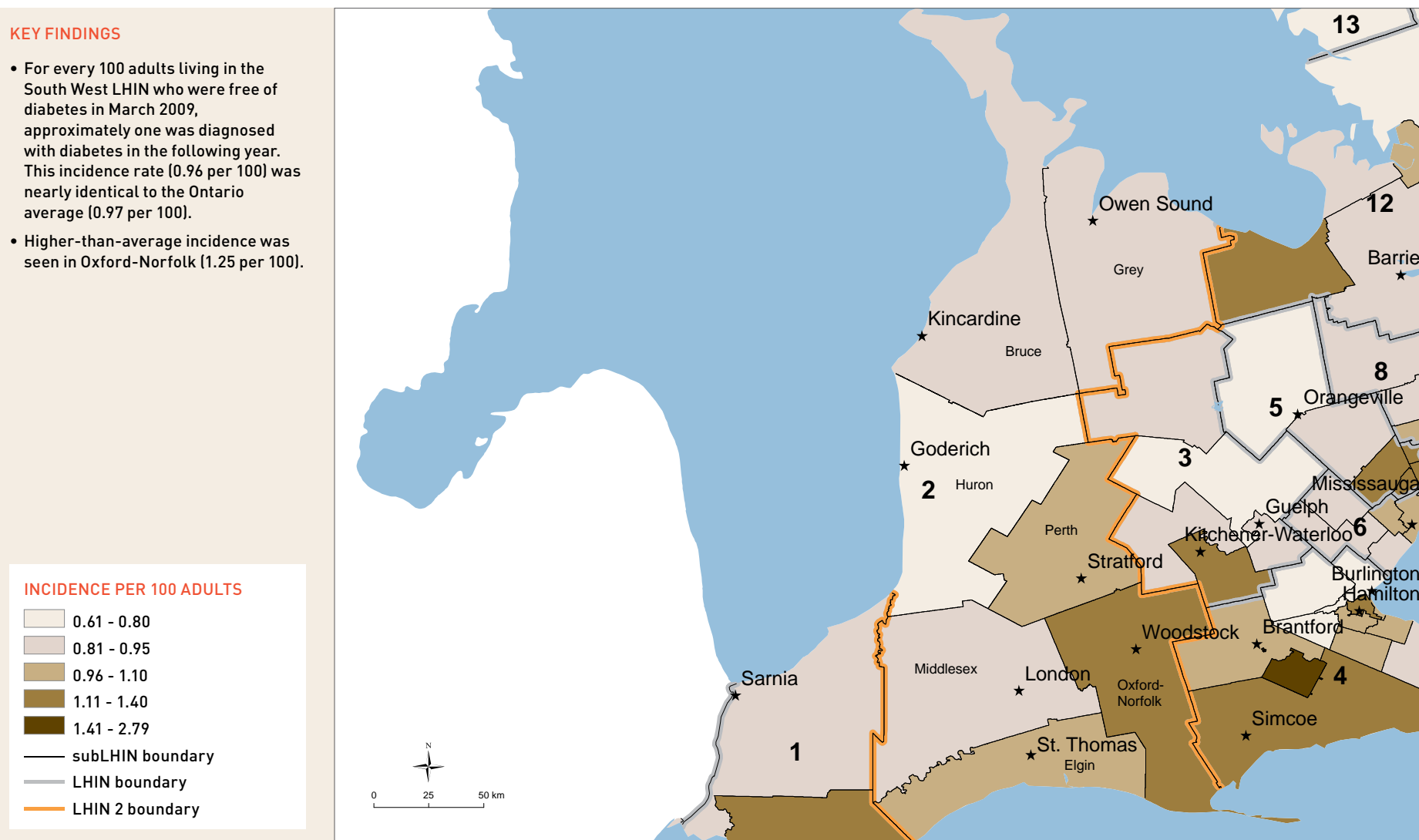
Technical note: Adults were defined as those aged 20 years and older. Rates were age- and sex-standardized using the 2001 Ontario population of the same age as the standard population.

EXHIBIT 2.2

Diabetes incidence per 100 adults in the South West LHIN (2), by subLHIN, 2009/10

KEY FINDINGS

- For every 100 adults living in the South West LHIN who were free of diabetes in March 2009, approximately one was diagnosed with diabetes in the following year. This incidence rate (0.96 per 100) was nearly identical to the Ontario average (0.97 per 100).
- Higher-than-average incidence was seen in Oxford-Norfolk (1.25 per 100).



Data sources: Ontario Diabetes Database; Registered Persons Database.

Technical note: Adults were defined as those aged 20 years and older. Rates were age- and sex-standardized using the 2001 Ontario population of the same age as the standard population.

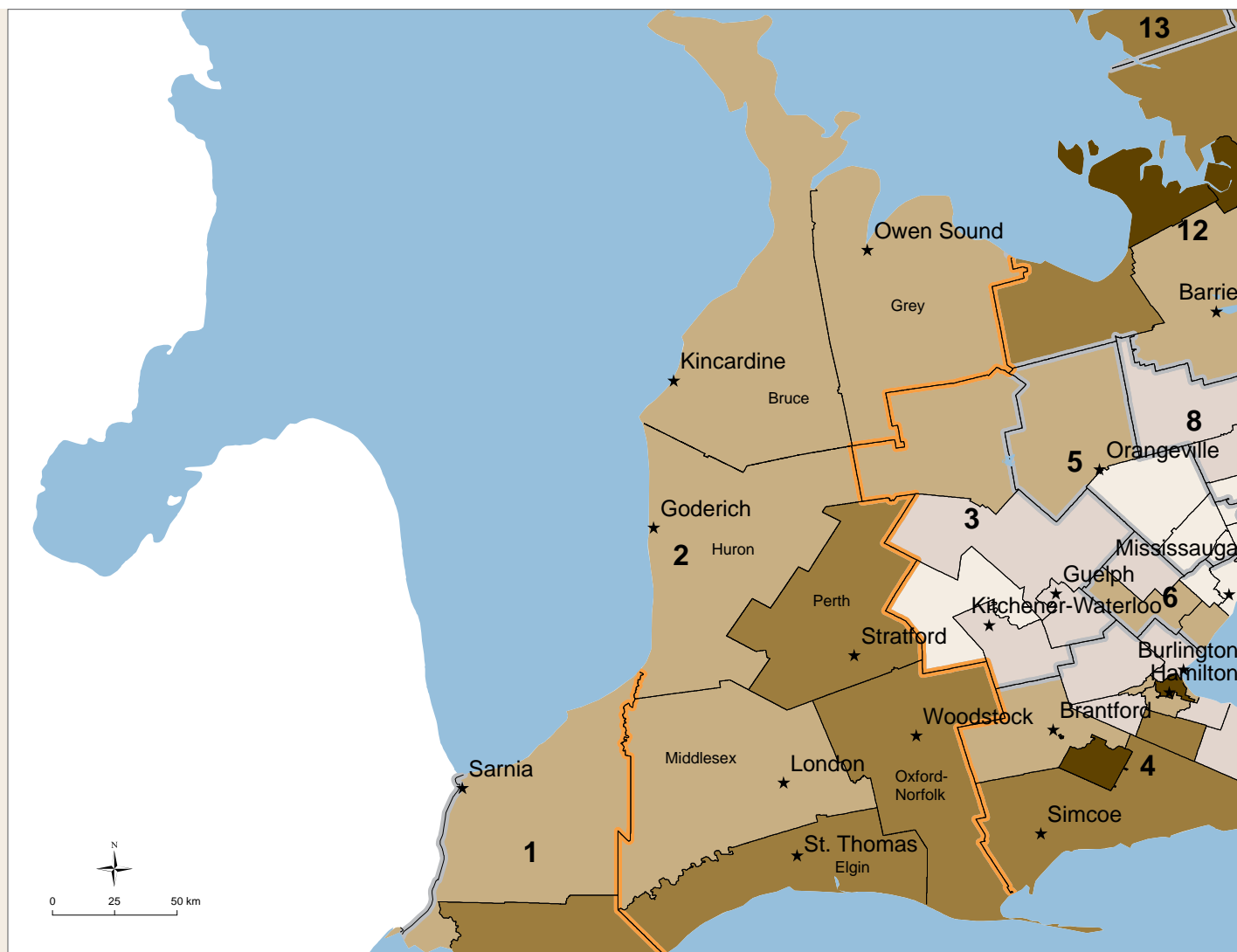
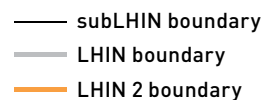
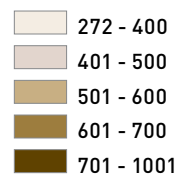
EXHIBIT 2.3

Number, per 10,000 adults with diabetes, who had at least one hospitalization or emergency department visit for hyper- or hypoglycemia in the South West LHIN (2), by subLHIN, 2006/07–2010/11

KEY FINDINGS

- Overall, for every 100 adults living with diabetes in the South West LHIN on March 31, 2006, six had at least one hospitalization or emergency department (ED) visit for hyper- or hypoglycemia in the subsequent five years. This rate (603 per 10,000 adults with diabetes) was notably higher than the provincial average (486 per 10,000).
- There was some variation in rates of hospitalization/ED visits for hyper- or hypoglycemia across subLHINs. The highest rates were seen in Elgin (692 per 10,000), Perth (643 per 10,000) and Oxford-Norfolk (632 per 10,000).

NUMBER PER 10,000 ADULTS WITH DIABETES



Data sources: National Ambulatory Care Reporting System; Canadian Institute of Health Information Discharge Abstract Database; Ontario Diabetes Database.

Technical note: Adults were defined as those aged 20 years and older. Rates were age- and sex-standardized using the same-aged population in the Ontario Diabetes Database on March 31, 2006 as the standard population.

EXHIBIT 2.4

Number, per 10,000 adults with diabetes, who had at least one hospitalization or emergency department visit for skin and soft tissue infection or foot ulcer in the South West LHIN (2), by subLHIN, 2006/07–2010/11

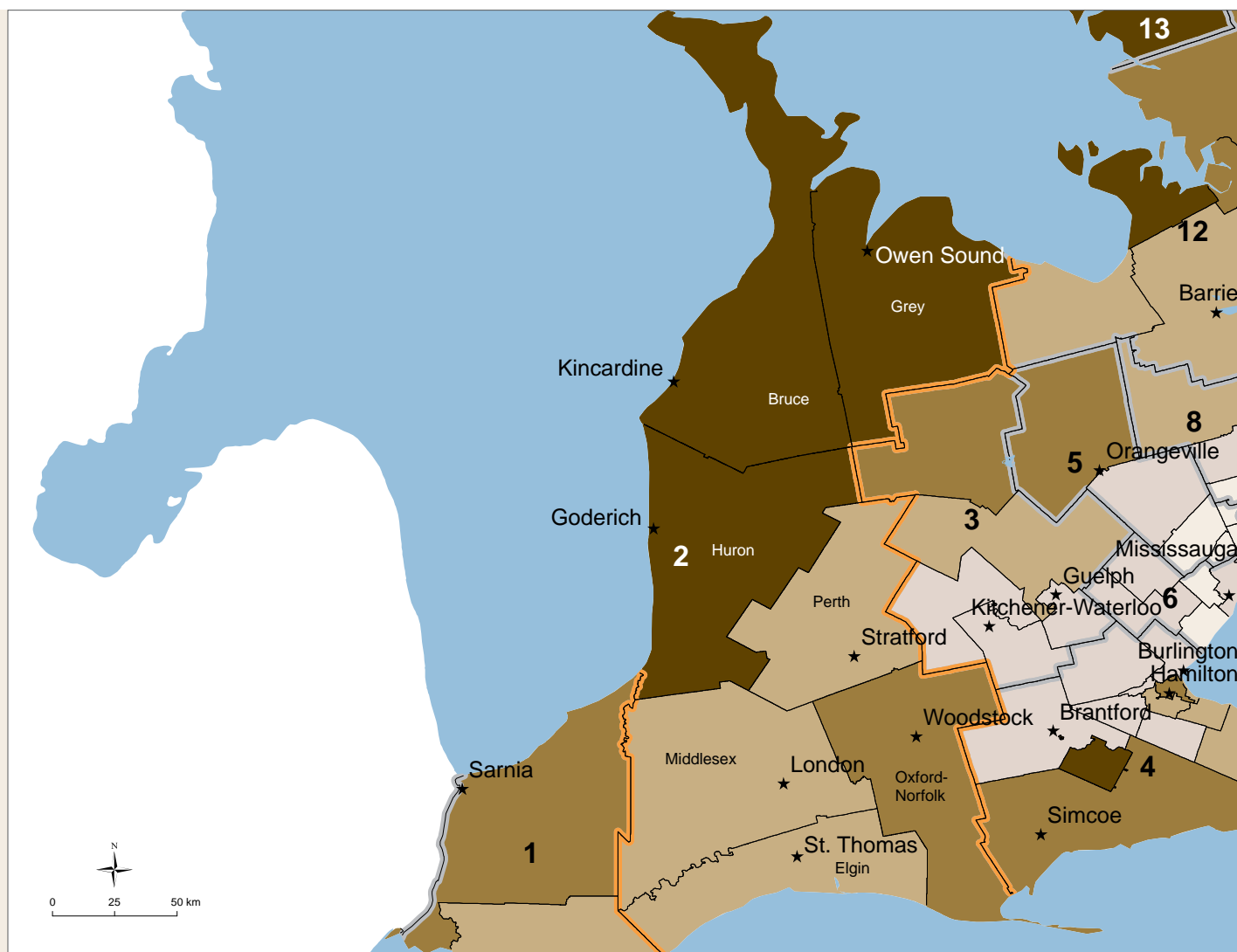
KEY FINDINGS

- For every 100 adults living with diabetes in the South West LHIN on March 31, 2006, nearly nine had at least one hospitalization or emergency department visit for a skin and soft tissue infection or foot ulcer during the subsequent five years. This rate (869 per 10,000 adults with diabetes) was substantially higher than the provincial average (618 per 10,000).
- Rates were highest (about two-fold higher than the provincial average) in the three northern subLHINs of Huron, Bruce and Grey.

NUMBER PER 10,000 ADULTS WITH DIABETES

- 277 - 450
- 451 - 630
- 631 - 820
- 821 - 1050
- 1051 - 1540

- subLHIN boundary
- LHIN boundary
- LHIN 2 boundary



Data sources: National Ambulatory Care Reporting System; Canadian Institute of Health Information Discharge Abstract Database; Ontario Diabetes Database.

Technical note: Adults were defined as those aged 20 years and older. Rates were age- and sex-standardized using the same-aged population in the Ontario Diabetes Database on March 31, 2006 as the standard population.

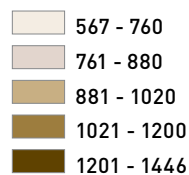
EXHIBIT 2.5

Number, per 10,000 adults with diabetes, who had at least one hospitalization for a cardiovascular condition in the South West LHIN (2), by subLHIN, 2006/07–2010/11

KEY FINDINGS

- About one in 10 adults with diabetes living in the South West LHIN in 2006 was hospitalized for a cardiovascular condition at least once in the ensuing five years. This rate (961 per 10,000 adults with diabetes) was higher than the provincial average (888 per 10,000).
- Above-average rates of hospitalizations were seen across most subLHINs. The highest rates were seen in Bruce (1,149 per 10,000) and Elgin (1,188 per 10,000).

NUMBER PER 10,000 ADULTS WITH DIABETES



— subLHIN boundary
— LHIN boundary
— LHIN 2 boundary



Data sources: Canadian Institute of Health Information Discharge Abstract Database; Ontario Diabetes Database.

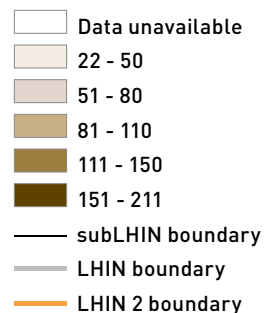
Technical notes: Adults were defined as those aged 20 years and older. Rates were age- and sex-standardized using the same-aged population in the Ontario Diabetes Database on March 31, 2006 as the standard population. Cardiovascular conditions included myocardial infarction, stroke, congestive heart failure, unstable angina and transient ischemic attack.

EXHIBIT 2.6

Number, per 10,000 adults with diabetes, who had a lower extremity amputation in the South West LHIN (2), by subLHIN, 2006/07–2010/11

KEY FINDINGS

- In the South West LHIN, about 1 of every 100 adults with diabetes experienced a lower extremity amputation between 2006/07 and 2010/11. This rate (99 per 10,000 adults with diabetes) was higher than the Ontario average (74 per 10,000).
- Rates varied by nearly two-fold across subLHINs: the highest rate was in Elgin (140 per 10,000) and the lowest in Huron (73 per 10,000).

NUMBER PER 10,000 ADULTS WITH DIABETES

Data sources: Canadian Institute of Health Information Discharge Abstract Database; Ontario Diabetes Database.

Technical note: Adults were defined as those aged 20 years and older. Rates were age- and sex-standardized using the same-aged population in the Ontario Diabetes Database on March 31, 2006 as the standard population.

EXHIBIT 2.7

Number, per 10,000 adults with diabetes, who received chronic dialysis or kidney transplantation in the South West LHIN (2), by subLHIN, 2006/07–2010/11

KEY FINDINGS

- In the South West LHIN overall, the rate of chronic dialysis or kidney transplantation was 107 per 10,000 adults with diabetes, a level that was lower than the provincial average (122 per 10,000).
- Rates varied by more than 1.5-fold across subLHINs: the highest rate was in Elgin (135 per 10,000) and the lowest in Huron (84 per 10,000).



Data sources: Ontario Health Insurance Plan Database; Canadian Organ Replacement Register Database; Canadian Institute of Health Information Discharge Abstract Database; Trillium Gift of Life Network Database; Ontario Diabetes Database.

Technical note: Adults were defined as those aged 20 years and older. Rates were age- and sex-standardized using the same-aged population in the Ontario Diabetes Database on March 31, 2006 as the standard population.

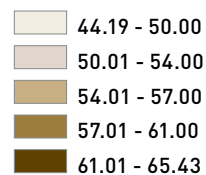
EXHIBIT 2.8

Number, per 100 adults with diabetes, who had an additional chronic medical condition in the South West LHIN (2), by subLHIN, 2006/07–2008/09

KEY FINDINGS

- In the South West LHIN overall, about 56 of every 100 adults with diabetes had at least one chronic medical condition other than diabetes between 2006/07 and 2008/09. This rate (56.46 per 100) was slightly higher than the provincial average (54.84 per 100).
- There was some variation in rates across subLHINs, ranging from 51.50 per 100 in Perth to 58.99 per 100 in Elgin.

NUMBER PER 100 ADULTS WITH DIABETES



— subLHIN boundary
— LHIN boundary
— LHIN 2 boundary



Data sources: Ontario Health Insurance Plan Database; Ontario Diabetes Database.

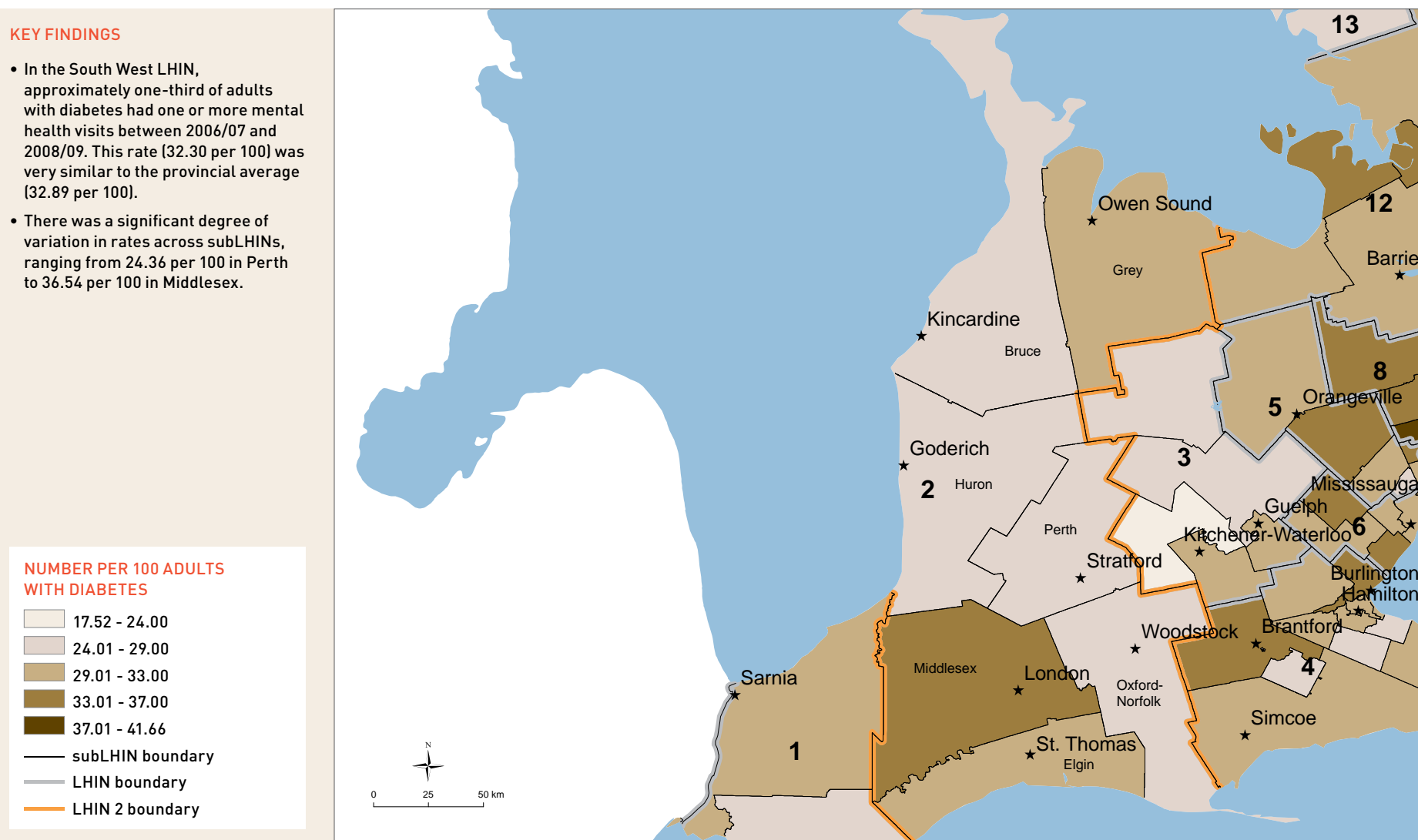
Technical note: Adults were defined as those aged 20 years and older. Rates were age- and sex-standardized using the same-aged population in the Ontario Diabetes Database on March 31, 2006 as the standard population.

EXHIBIT 2.9

Number, per 100 adults with diabetes, who made a mental health visit for a psychotic or nonpsychotic illness in the South West LHIN (2), by subLHIN, 2006/07–2008/09

KEY FINDINGS

- In the South West LHIN, approximately one-third of adults with diabetes had one or more mental health visits between 2006/07 and 2008/09. This rate (32.30 per 100) was very similar to the provincial average (32.89 per 100).
- There was a significant degree of variation in rates across subLHINs, ranging from 24.36 per 100 in Perth to 36.54 per 100 in Middlesex.



Data sources: Ontario Health Insurance Plan Database; Ontario Diabetes Database.

Technical note: Adults were defined as those aged 20 years and older. Rates were age- and sex-standardized using the same-aged population in the Ontario Diabetes Database on March 31, 2006 as the standard population.

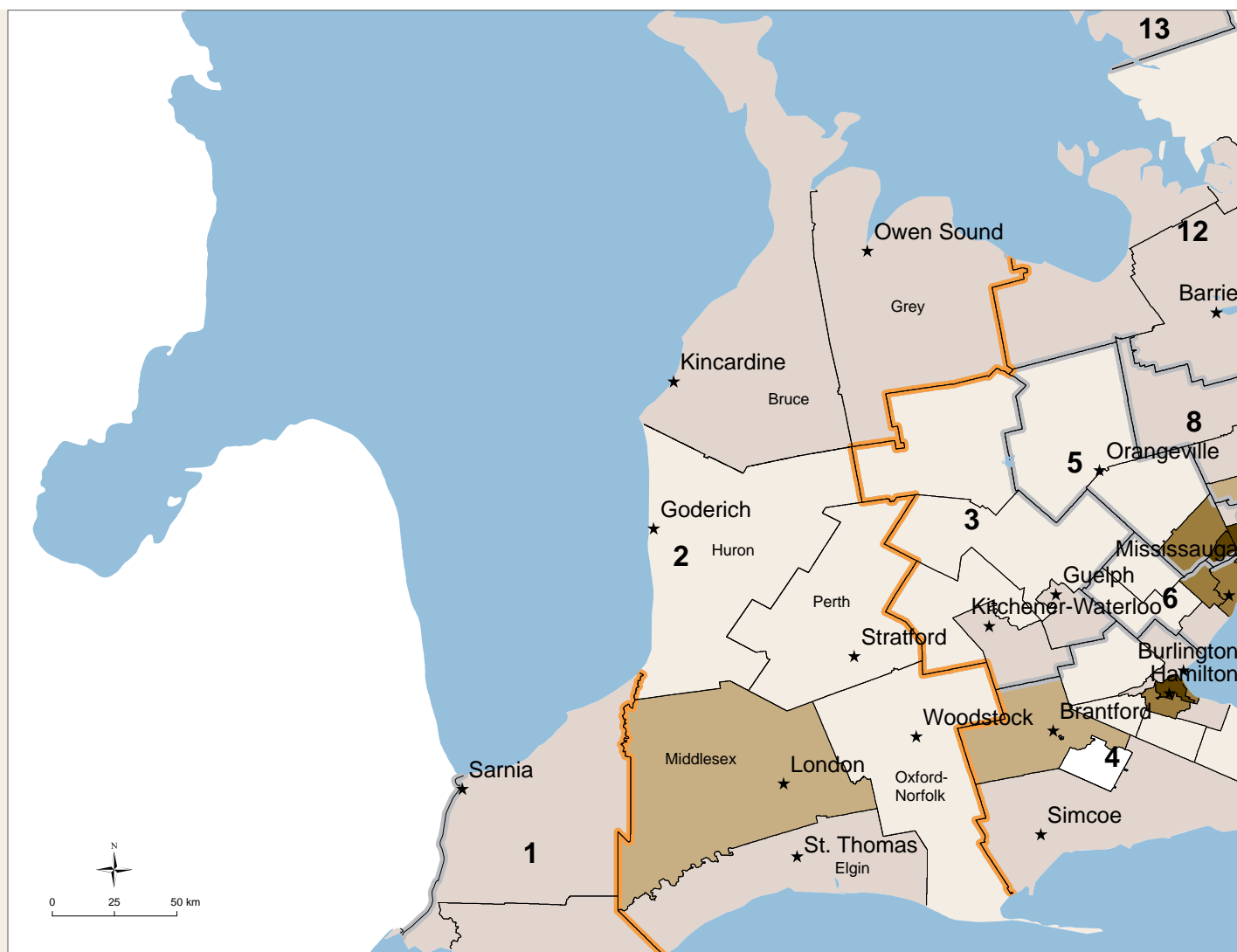
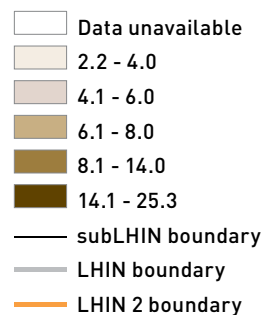
EXHIBIT 2.10

Percentage of economic families with low income in the South West LHIN (2), by subLHIN, 2005

KEY FINDINGS

- In the South West LHIN, more than five of every 100 families were living with low income in 2005. This percentage (5.5%) was lower than the provincial average (8.6%).
- The percentage of low income families was highest in Middlesex, although still below the provincial average.

PERCENTAGE OF LOW-INCOME ECONOMIC FAMILIES



Data source: 2006 Census of Canada.

Technical note: Economic family refers to a group of two or more persons who live in the same dwelling and are related by blood, marriage, common law or adoption. Economic families with low income are defined as those that devote a larger share of their after-tax income (at least 20% more than average) to necessities of food, shelter and clothing. Performance of this measure is limited in rural and remote communities due to missing data from First Nations reserves.

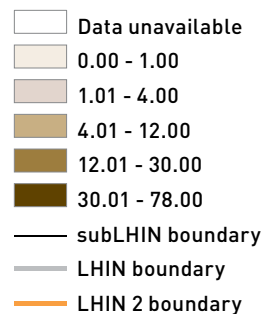
EXHIBIT 2.11

Percentage of visible minorities in the South West LHIN (2), by subLHIN, 2006

KEY FINDINGS

- In the South West LHIN, nearly seven of every 100 people self-identified as belonging to a visible minority group. This percentage (6.57%) was significantly lower than the provincial average (22.82%).
- There was very little variation in the percentage of visible minorities across subLHINs. The highest percentage was in Middlesex.

PERCENTAGE OF VISIBLE MINORITIES



Data source: 2006 Census of Canada.

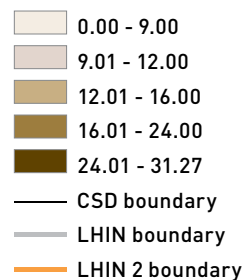
Technical note: Visible minorities include persons other than Aboriginal peoples who are non-Caucasian in race or non-white in colour.

EXHIBIT 2.12

Diabetes prevalence per 100 adults in the South West LHIN (2), by census subdivision, on March 31, 2011

KEY FINDINGS

- In the majority of census subdivisions (CSDs) in the South West LHIN, the number of adults per 100 living with diabetes was in a range similar to the LHIN average (8.88 per 100) and the provincial average (9.64 per 100).
- A cluster of smaller First Nations communities west of St. Thomas had above-average levels of diabetes prevalence.

PREVALENCE PER 100 ADULTS

Data sources: Ontario Diabetes Database; Registered Persons Database.

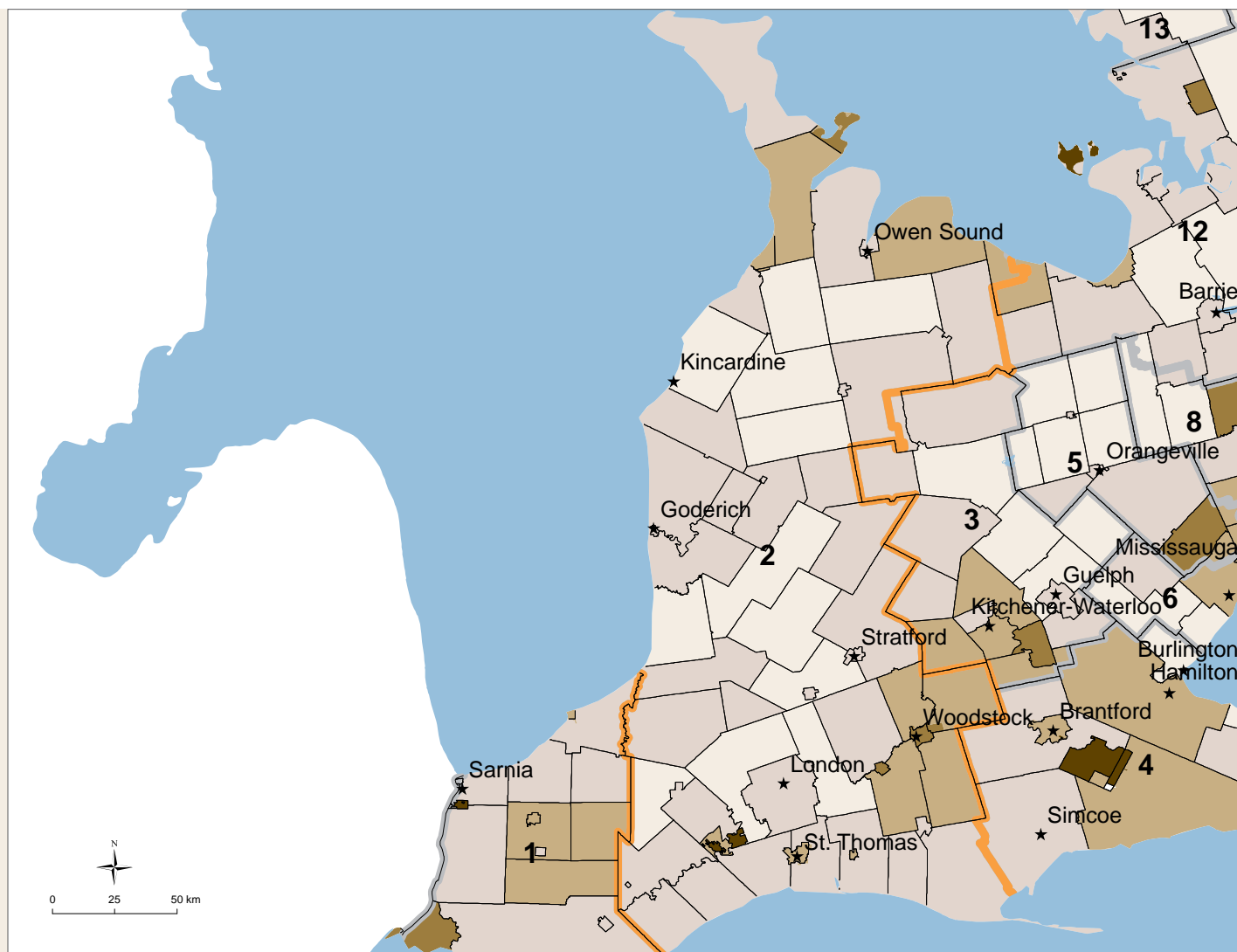
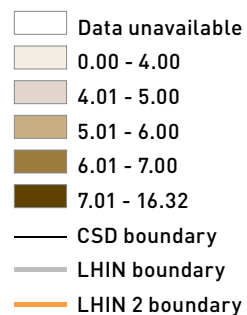
Technical note: Adults were defined as those aged 20 years and older. Rates were age- and sex-standardized using the 2001 Ontario population of the same age as the standard population.

EXHIBIT 2.13

Diabetes incidence per 100 adults in the South West LHIN (2), by census subdivision, 2005/06–2009/10

KEY FINDINGS

- In most census subdivisions (CSDs), the incidence of diabetes in adults over the five-year period between April 2005 and March 2010 was similar to the LHIN average (4.53 per 100) and the provincial average (4.85 per 100).
- Diabetes incidence was highest in two First Nations communities west of St. Thomas.
- Above-average incidence rates were also noted in northern rural communities located east and west of Owen Sound and in the south, in St. Thomas, Woodstock, and neighbouring communities.

INCIDENCE PER 100 ADULTS

Data sources: Ontario Diabetes Database; Registered Persons Database.

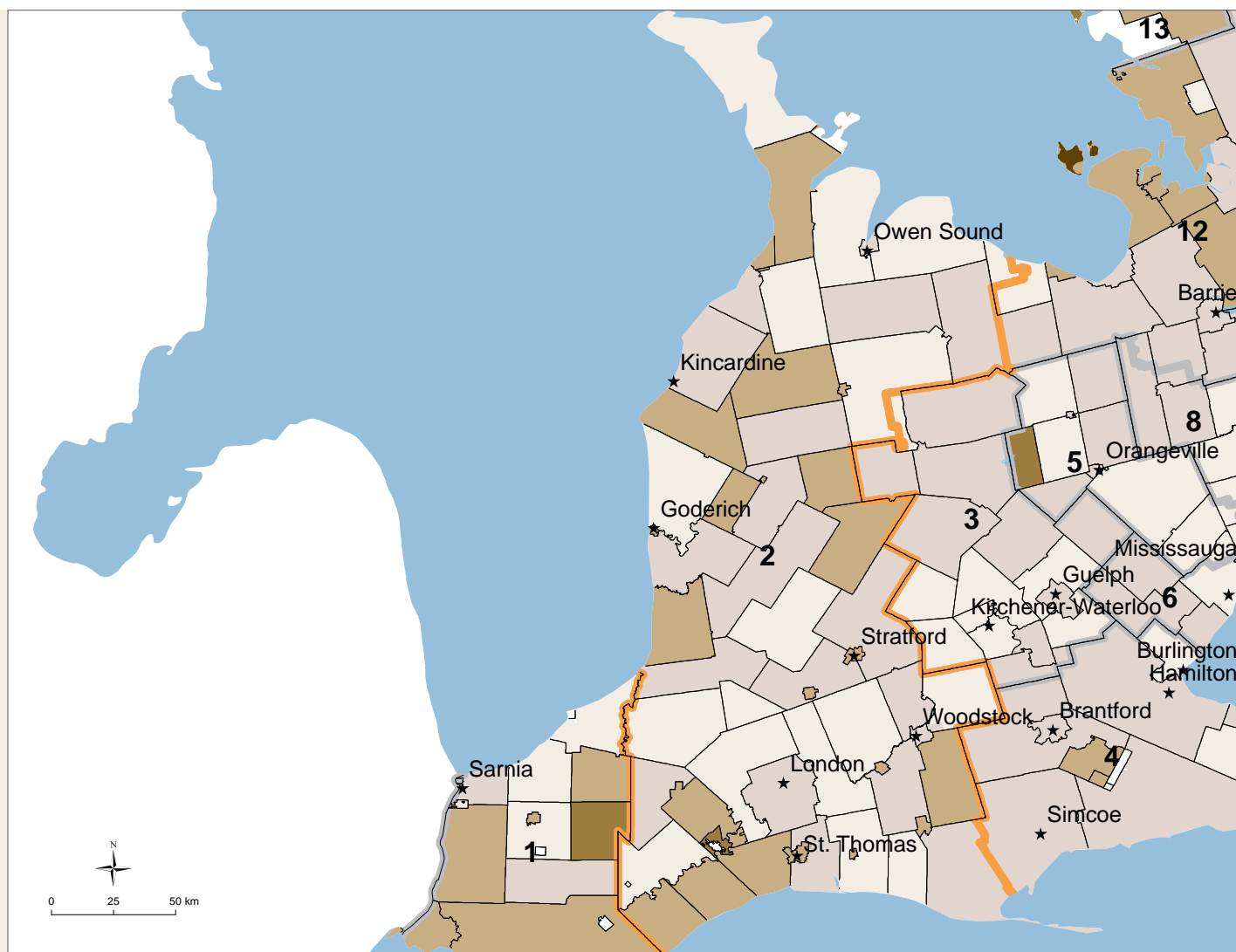
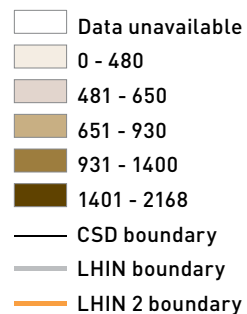
Technical note: Adults were defined as those aged 20 years and older. Rates were age- and sex-standardized using the 2001 Ontario population of the same age as the standard population.

EXHIBIT 2.14

Number, per 10,000 adults with diabetes, who had at least one hospitalization or emergency department visit for hyper- or hypoglycemia in the South West LHIN (2), by census subdivision, 2006/07–2010/11

KEY FINDINGS

- In many census subdivisions (CSDs), rates of hospitalizations or emergency department visits for hyper- or hypoglycemia were similar to the LHIN average (603 per 10,000 adults with diabetes) and the provincial average (486 per 10,000).
- Higher-than-average rates were found in both larger and smaller CSDs throughout the region. The highest rate was seen in a First Nations community west of St. Thomas.

NUMBER PER 10,000 ADULTS WITH DIABETES

Data sources: National Ambulatory Care Reporting System; Canadian Institute of Health Information Discharge Abstract Database; Ontario Diabetes Database.

Technical note: Adults were defined as those aged 20 years and older. Rates were age- and sex-standardized using the same-aged population in the Ontario Diabetes Database on March 31, 2006 as the standard population.

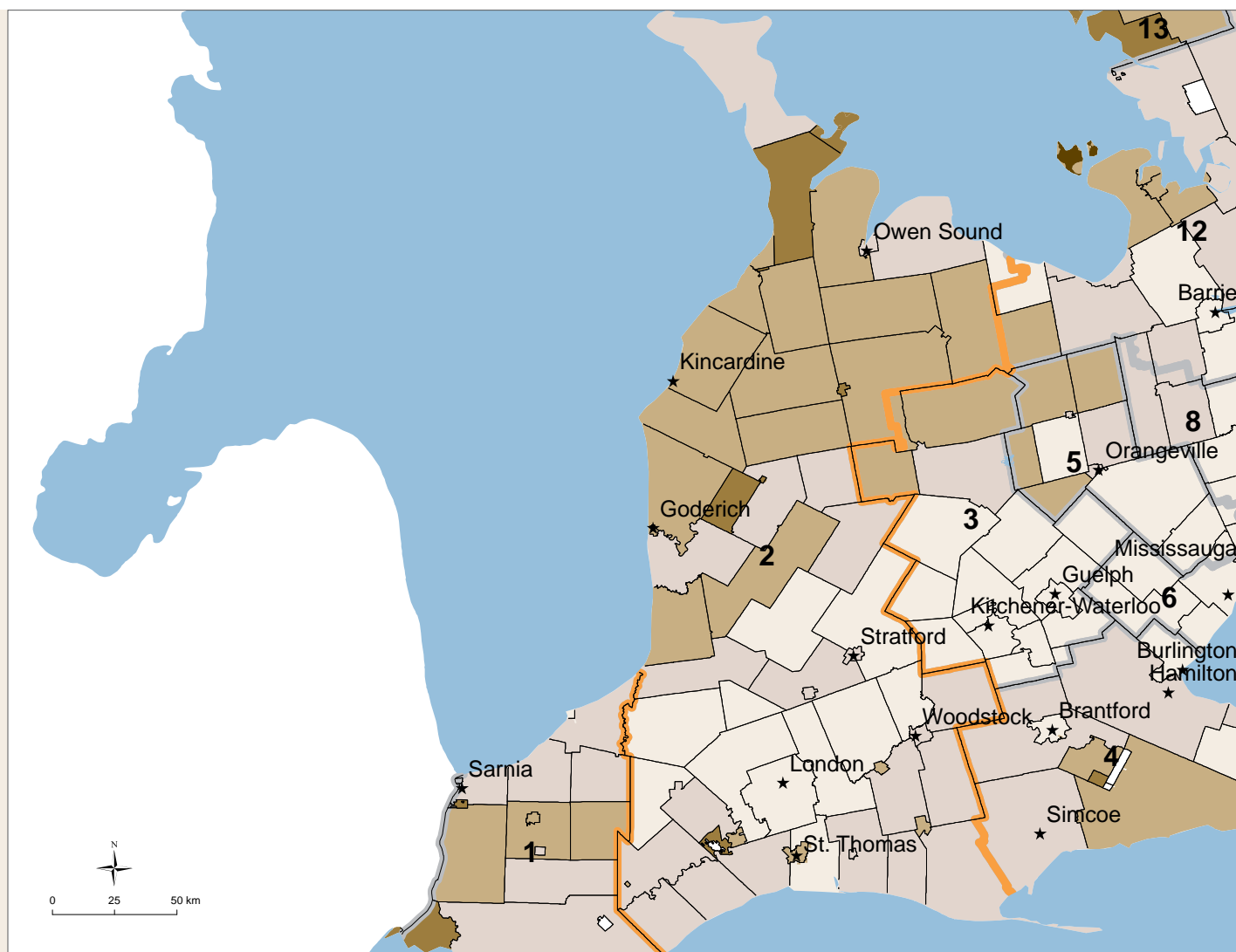
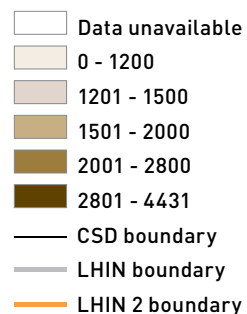
EXHIBIT 2.15

Number, per 10,000 adults with diabetes, who had at least one hospitalization or emergency department visit for any acute complication in the South West LHIN (2), by census subdivision, 2006/07–2010/11

KEY FINDINGS

- Between 2006/07 and 2010/11, rates of hospitalizations or emergency department visits for acute complications in most southern census subdivisions (CSDs) were similar to the LHIN average (1,369 per 10,000 adults with diabetes) and the provincial average (1,029 per 10,000).
- Above-average rates were seen in several central and most northern CSDs. Higher-than-average rates were also seen in a number of smaller communities in the south.

NUMBER PER 10,000 ADULTS WITH DIABETES



Data sources: National Ambulatory Care Reporting System; Canadian Institute of Health Information Discharge Abstract Database; Ontario Diabetes Database.

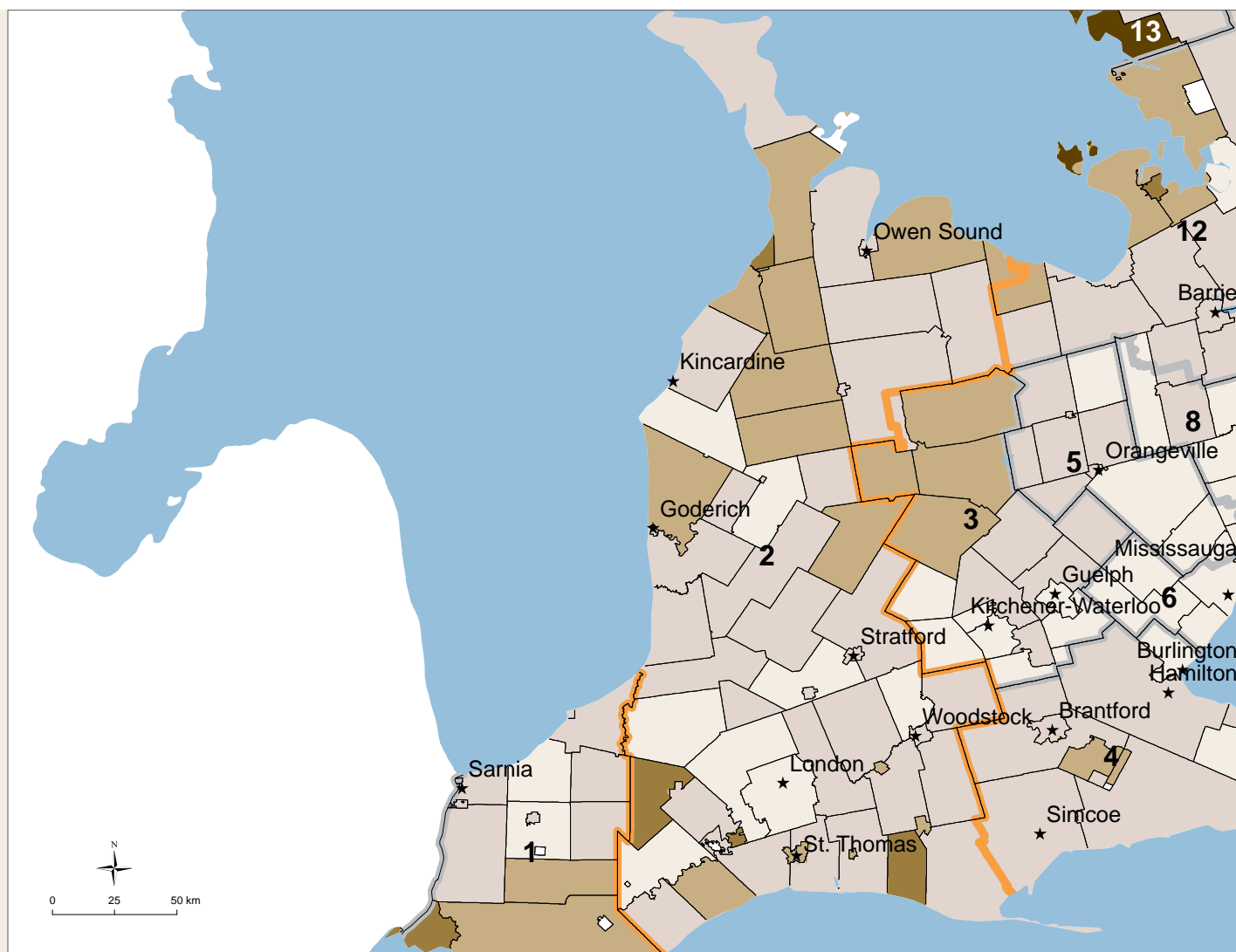
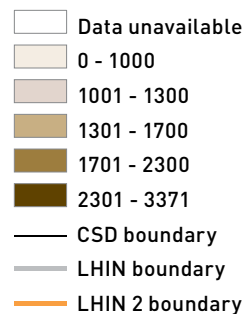
Technical notes: Adults were defined as those aged 20 years and older. Rates were age- and sex-standardized using the same-aged population in the Ontario Diabetes Database on March 31, 2006 as the standard population. Acute complications consisted of hyper- or hypoglycemia, skin and soft tissue infection or foot ulcer.

EXHIBIT 2.16

Number, per 10,000 adults with diabetes, who had any chronic complication in the South West LHIN (2), by census subdivision, 2006/07–2010/11

KEY FINDINGS

- Between 2006/07 and 2010/11, rates of chronic complications in most central and southern census subdivisions (CSDs) were similar to the LHIN average (1,104 per 10,000 adults with diabetes) and the provincial average (1,016).
- Rates were higher than average in a number of northern and southern CSDs.

NUMBER PER 10,000 ADULTS WITH DIABETES

Data sources: Ontario Health Insurance Plan Database; Canadian Organ Replacement Register Database; Canadian Institute of Health Information Discharge Abstract Database; Trillium Gift of Life Network; Ontario Diabetes Database.

Technical note: Adults were defined as those aged 20 years and older. Rates were age- and sex-standardized using the same-aged population in the Ontario Diabetes Database on March 31, 2006 as the standard population. A chronic complication consisted of hospitalization for a cardiovascular condition or having a lower extremity amputation or end-stage renal disease (chronic dialysis or kidney transplantation).

EXHIBIT 2.17

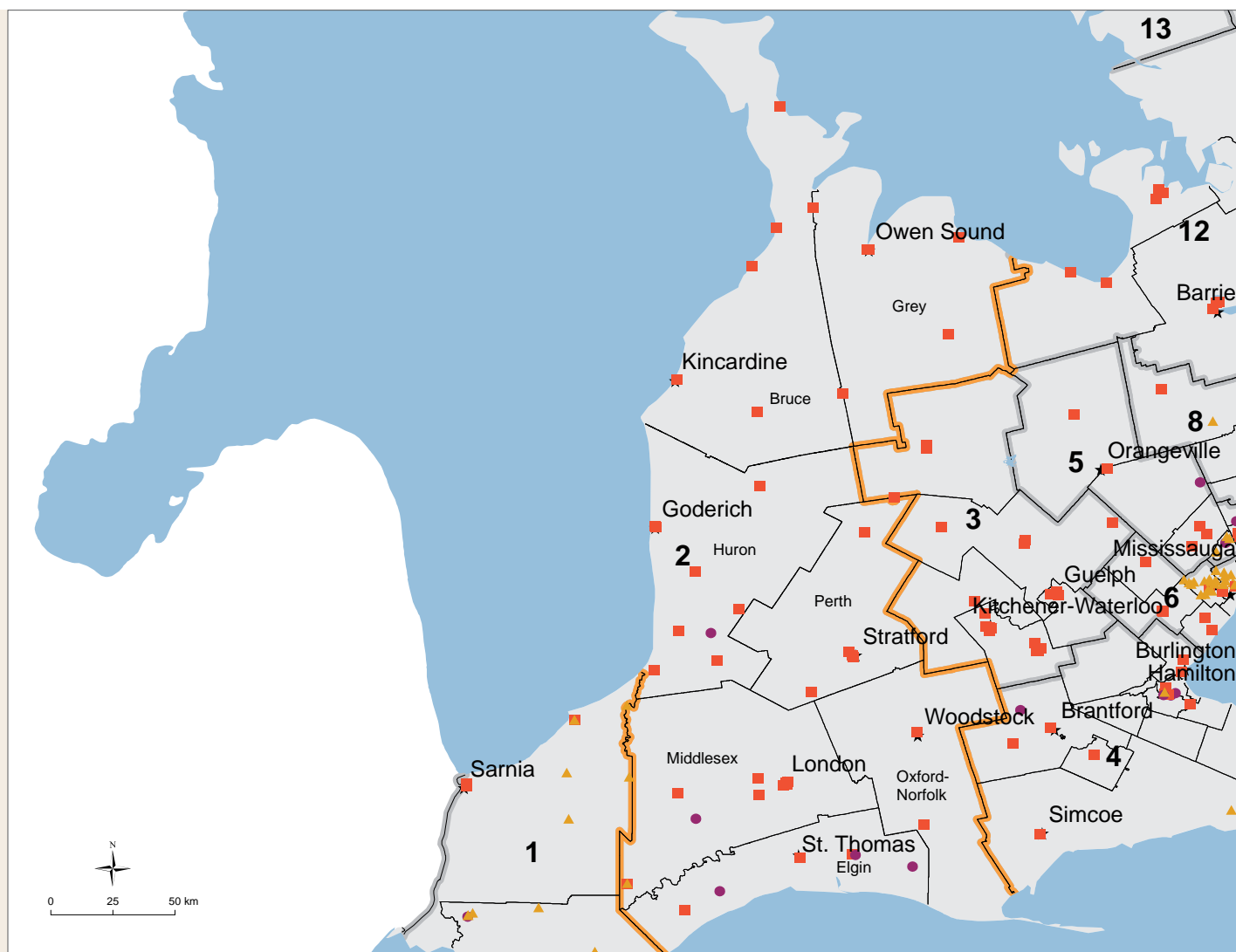
Locations of diabetes education programs in the South West LHIN (2), 2011

KEY FINDINGS

- Diabetes education programs were generally well distributed across the South West LHIN. Many were located in or near major urban centres, such as London and St. Thomas.
- Diabetes education program satellites were found only in the south and central parts of the LHIN.

TYPE OF PROGRAM

- Main program
- Program satellite
- ▲ Outreach program
- subLHIN boundary
- LHIN boundary
- LHIN 2 boundary



Data source: Diabetes Regional Coordination Centres.

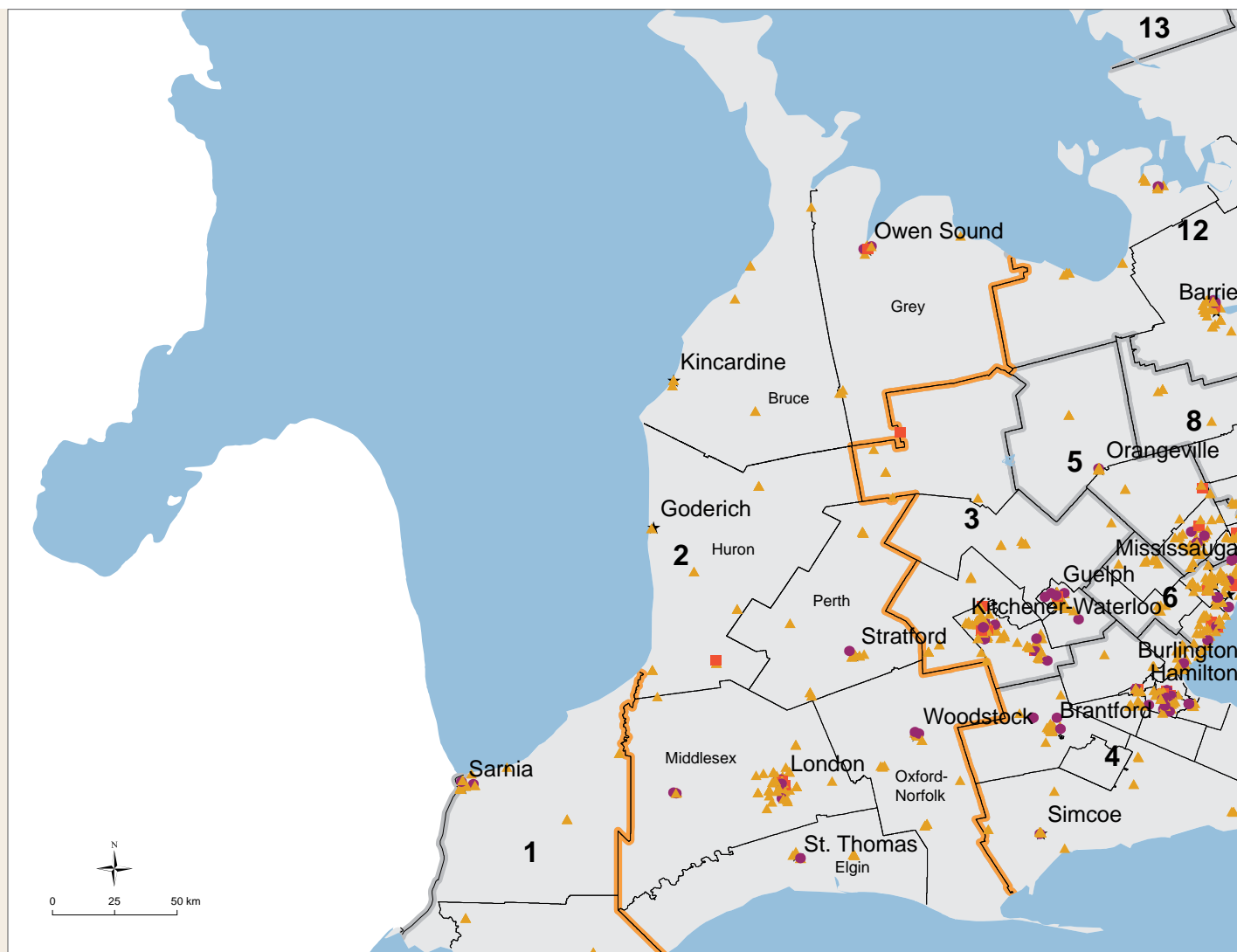
Technical note: Locations were designated based on six-digit postal codes using Statistics Canada's Postal Code Conversion File.

EXHIBIT 2.18**Locations of endocrinologists and eye specialists in the South West LHIN (2), 2010/11****KEY FINDINGS**

- There was a clustering of endocrinologists and eye specialists (optometrists and ophthalmologists) in the London area. The only other endocrinology practice was located in the Huron subLHIN.
- Ophthalmology practices were located only in the south part of the LHIN in major urban centres such as London and Stratford.
- Optometrists were more numerous and more widely distributed across the LHIN than endocrinologists and ophthalmologists.

TYPE OF SPECIALIST

- Endocrinologist
- Ophthalmologist
- ▲ Optometrist
- subLHIN boundary
- LHIN boundary
- LHIN 2 boundary

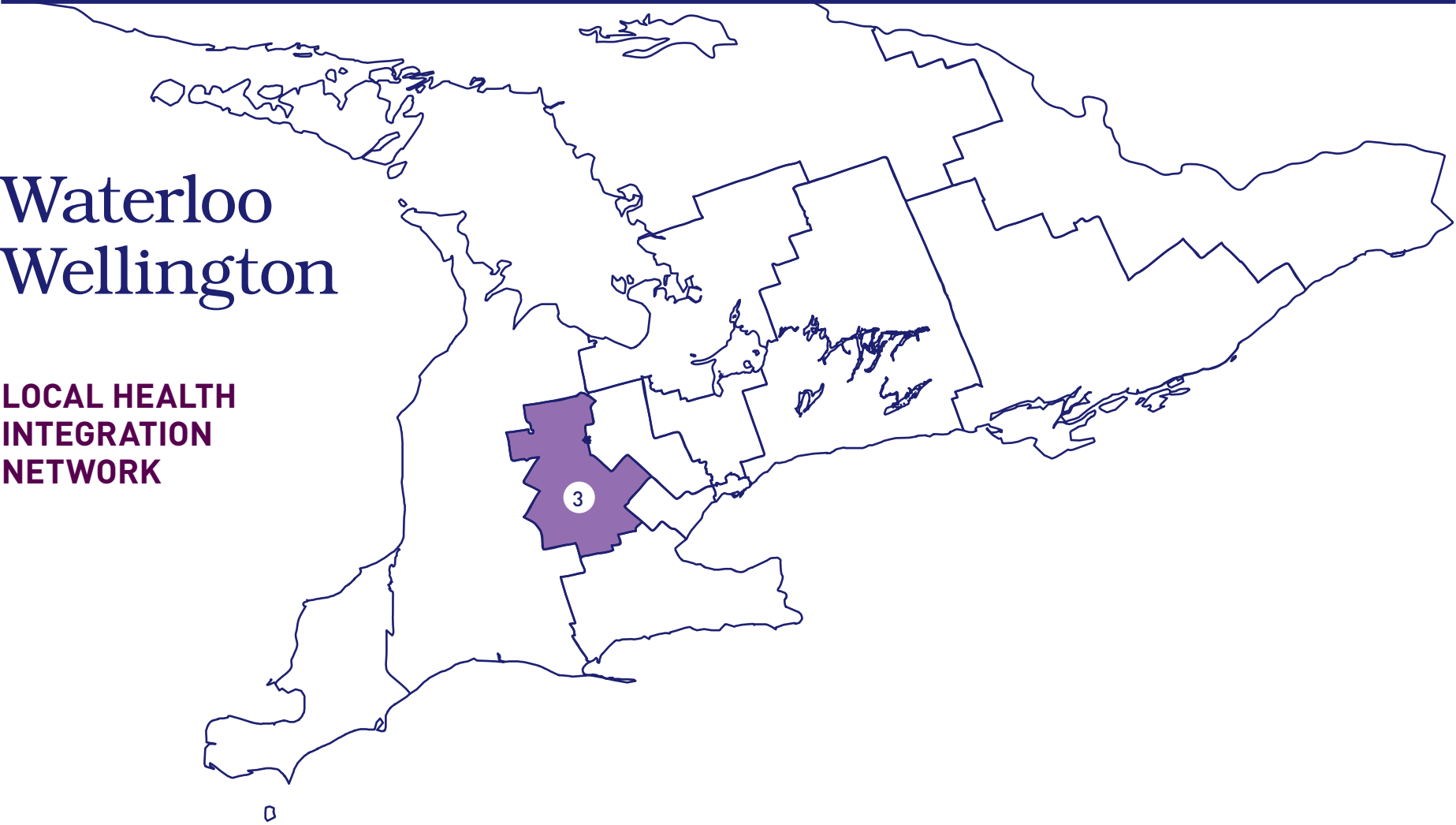


Data sources: Locations of endocrinologists and ophthalmologists came from the ICES Physician Database, 2010; listings of optometrists came from the Corporate Provider Database, April 1, 2010 to March 31, 2011.

Technical note: Locations were designated based on six-digit postal codes using Statistics Canada's Postal Code Conversion File.

Waterloo Wellington

LOCAL HEALTH
INTEGRATION
NETWORK



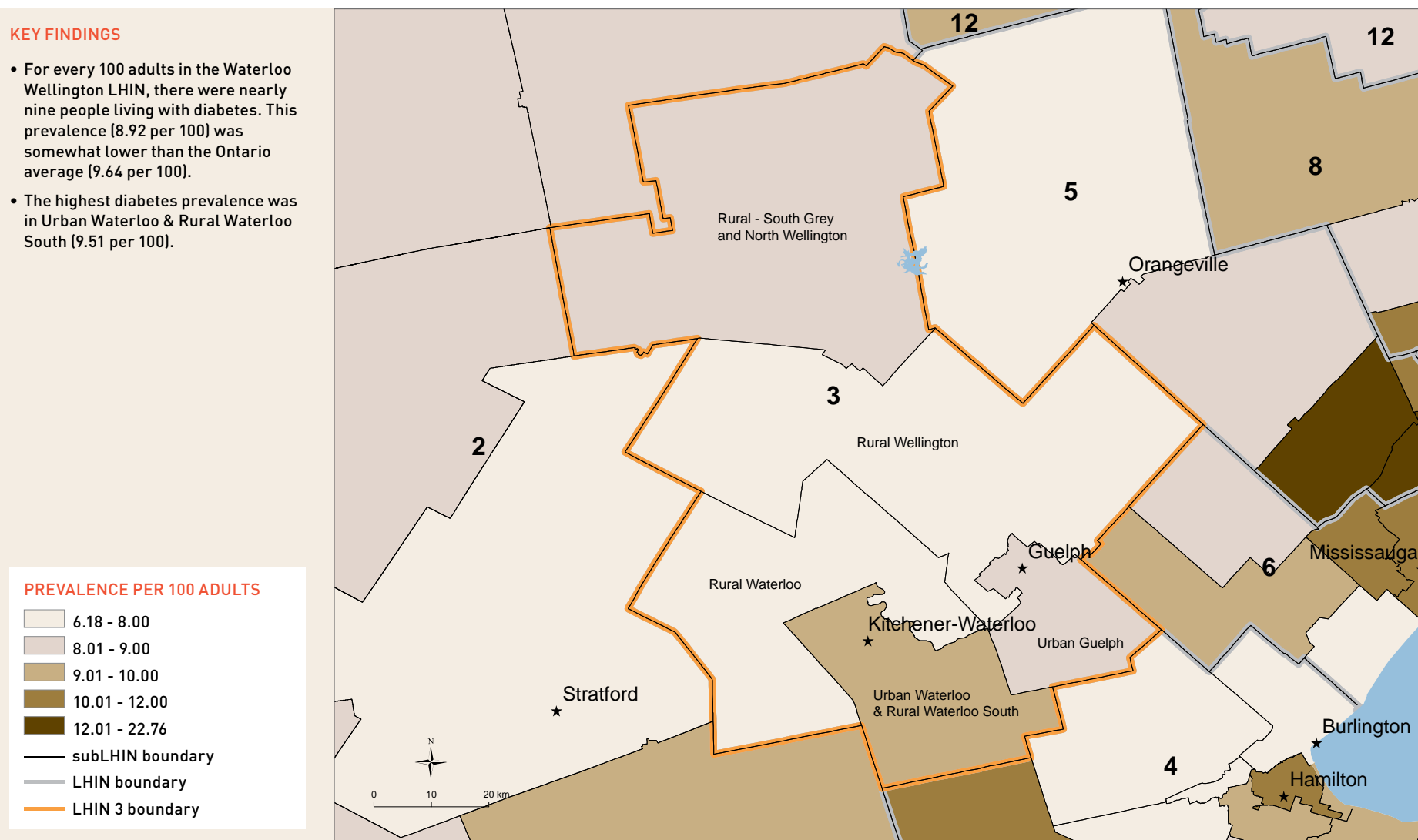
Diabetes Measures by Region

EXHIBIT 3.1

Diabetes prevalence per 100 adults in the Waterloo Wellington LHIN (3), by subLHIN, on March 31, 2011

KEY FINDINGS

- For every 100 adults in the Waterloo Wellington LHIN, there were nearly nine people living with diabetes. This prevalence (8.92 per 100) was somewhat lower than the Ontario average (9.64 per 100).
- The highest diabetes prevalence was in Urban Waterloo & Rural Waterloo South (9.51 per 100).



Data sources: Ontario Diabetes Database; Registered Persons Database.

Technical note: Adults were defined as those aged 20 years and older. Rates were age- and sex-standardized using the 2001 Ontario population of the same age as the standard population.

EXHIBIT 3.2

Diabetes incidence per 100 adults in the Waterloo Wellington LHIN (3), by subLHIN, 2009/10

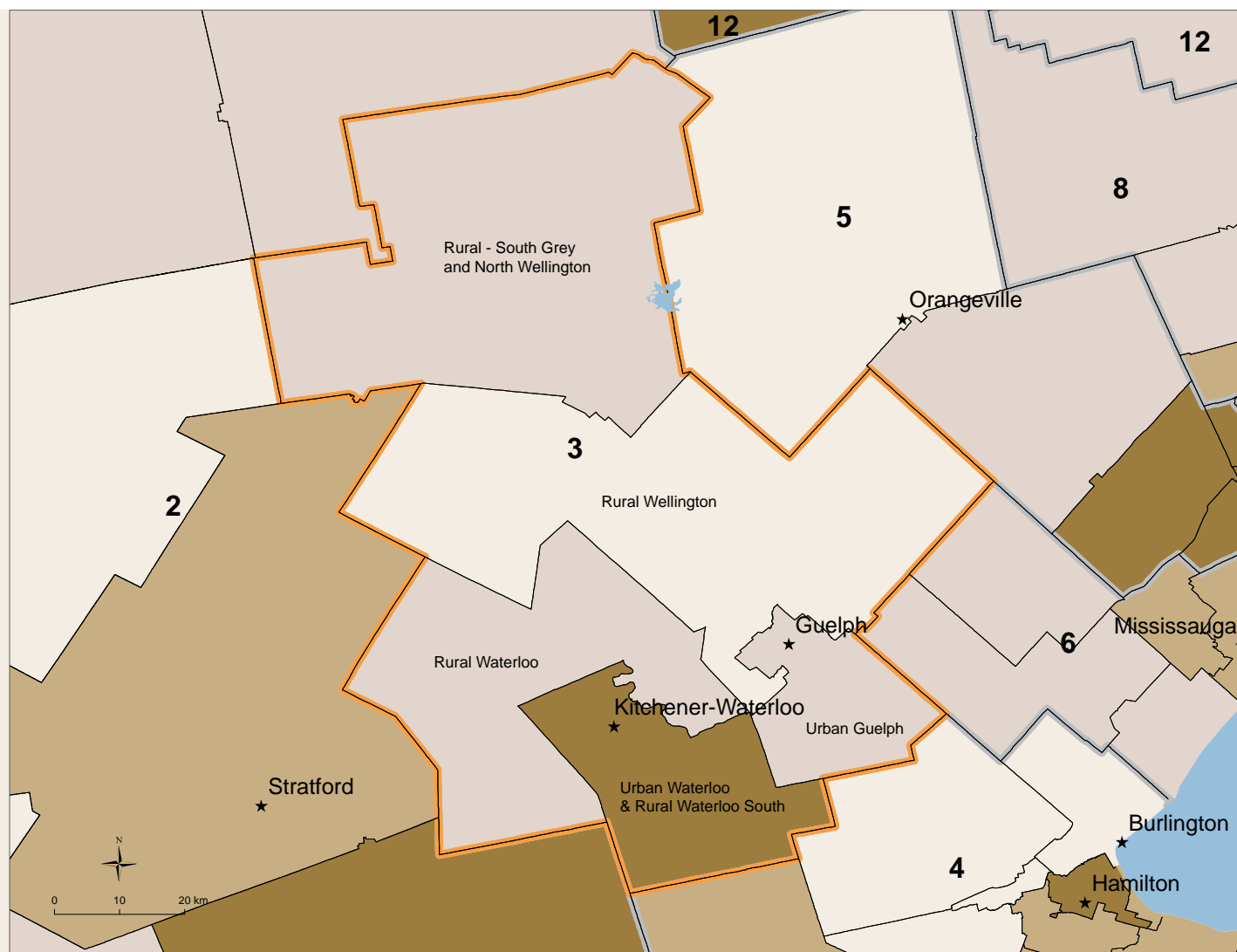
KEY FINDINGS

- For every 100 adults living in the Waterloo Wellington LHIN who were free of diabetes in March 2009, about one was diagnosed with diabetes in the subsequent year. This incidence rate (1.06 per 100) was only slightly higher than that of Ontario as a whole (0.97 per 100 adults).
- Diabetes incidence was highest in Urban Waterloo & Rural Waterloo South (1.16 per 100) and lowest in Rural Wellington (0.79 per 100).

INCIDENCE PER 100 ADULTS

- 0.61 - 0.80
- 0.81 - 0.95
- 0.96 - 1.10
- 1.11 - 1.40
- 1.41 - 2.79

- subLHIN boundary
- LHIN boundary
- LHIN 3 boundary



Data sources: Ontario Diabetes Database; Registered Persons Database.

Technical note: Adults were defined as those aged 20 years and older. Rates were age- and sex-standardized using the 2001 Ontario population of the same age as the standard population.

EXHIBIT 3.3

Number, per 10,000 adults with diabetes, who had at least one hospitalization or emergency department visit for hyper- or hypoglycemia in the Waterloo Wellington LHIN (3), by subLHIN, 2006/07–2010/11

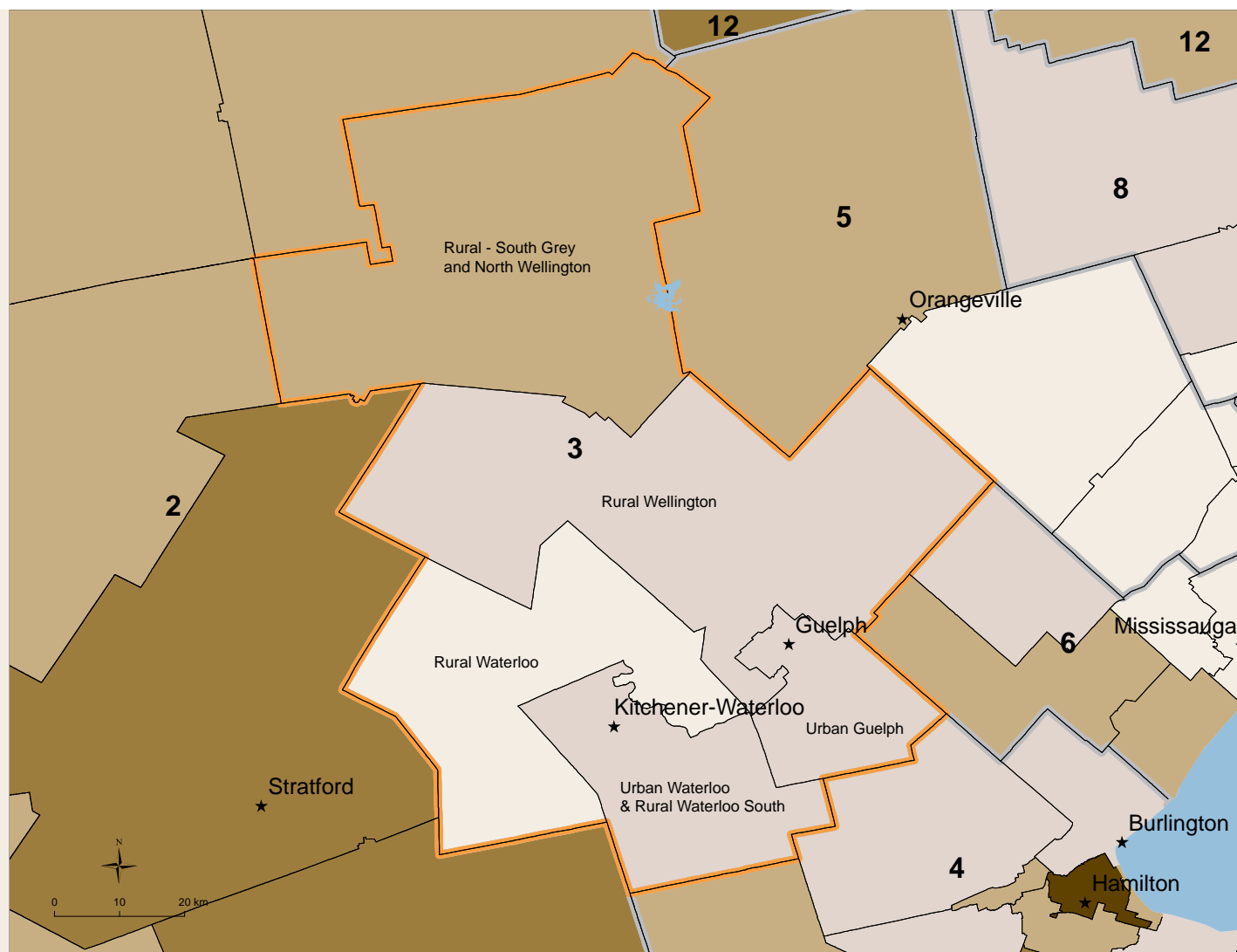
KEY FINDINGS

- Overall, for every 100 adults living with diabetes in the Waterloo Wellington LHIN on March 31, 2006, about five had at least one hospitalization or emergency department visit for hyper- or hypoglycemia in the subsequent five years. This rate (477 per 10,000 adults with diabetes) was slightly lower than the provincial average (486 per 10,000).
- Rates varied by nearly two-fold across subLHINs: the highest rate was in Rural South Grey and North Wellington (533.74 per 10,000) and the lowest in Rural Waterloo (289.84 per 10,000).

NUMBER PER 10,000 ADULTS WITH DIABETES

- 272 - 400
- 401 - 500
- 501 - 600
- 601 - 700
- 701 - 1001

- subLHIN boundary
- LHIN boundary
- LHIN 3 boundary



Data sources: National Ambulatory Care Reporting System; Canadian Institute of Health Information Discharge Abstract Database; Ontario Diabetes Database.

Technical note: Adults were defined as those aged 20 years and older. Rates were age- and sex-standardized using the same-aged population in the Ontario Diabetes Database on March 31, 2006 as the standard population.

EXHIBIT 3.4

Number, per 10,000 adults with diabetes, who had at least one hospitalization or emergency department visit for skin and soft tissue infection or foot ulcer in the Waterloo Wellington LHIN (3), by subLHIN, 2006/07–2010/11

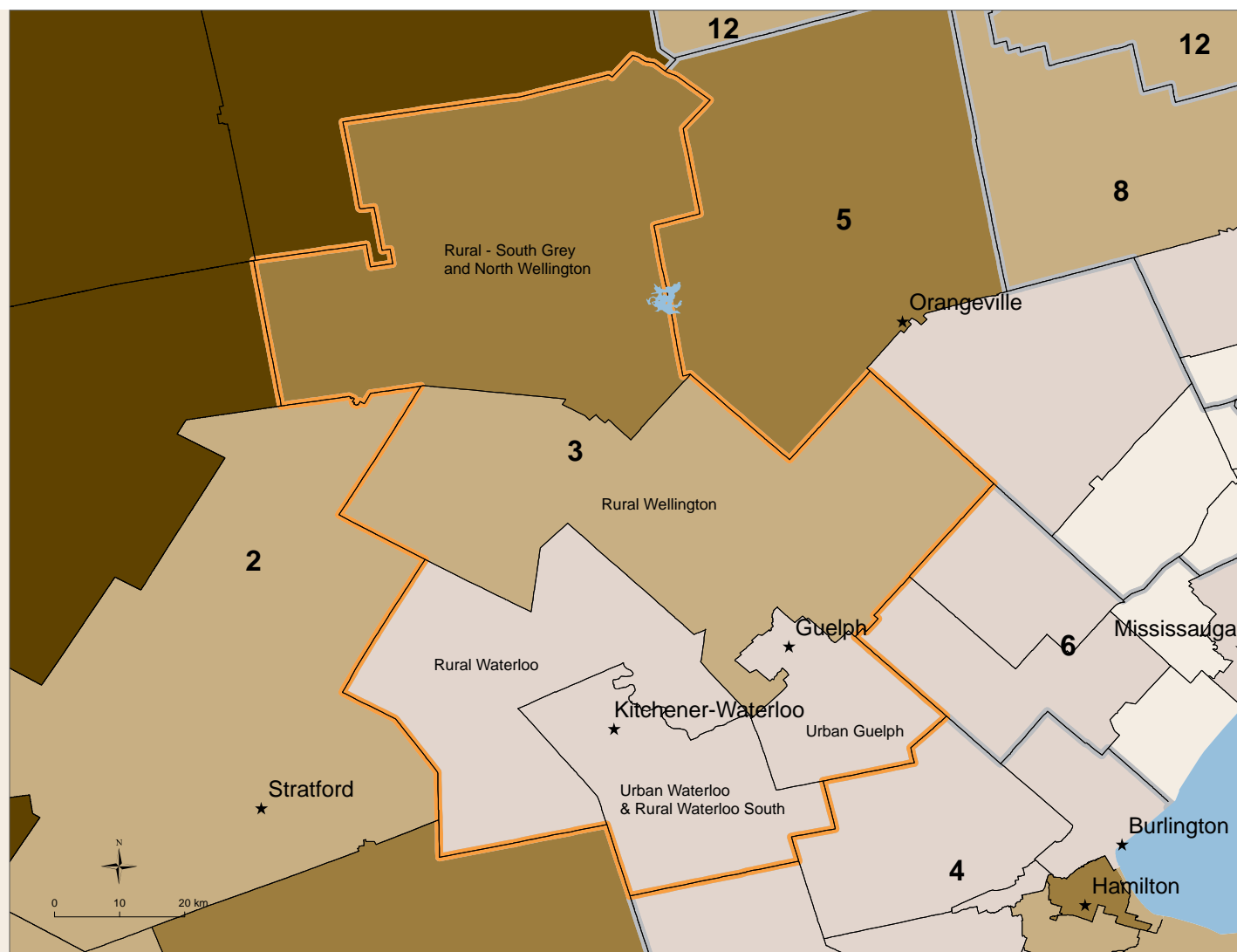
KEY FINDINGS

- For every 100 adults living with diabetes in the Waterloo Wellington LHIN in 2006, about six had at least one hospitalization or emergency department visit for a skin and soft tissue infection or foot ulcer during the subsequent five years. This rate (565 per 10,000 adults with diabetes) was lower than the provincial average (618 per 10,000).
- Rates varied by as much as two-fold across subLHINs, ranging from 502 per 10,000 in Rural Waterloo to 1,041 per 10,000 in Rural South Grey and North Wellington.

NUMBER PER 10,000 ADULTS WITH DIABETES

- 277 - 450
- 451 - 630
- 631 - 820
- 821 - 1050
- 1051 - 1540

- subLHIN boundary
- LHIN boundary
- LHIN 3 boundary



Data sources: National Ambulatory Care Reporting System; Canadian Institute of Health Information Discharge Abstract Database; Ontario Diabetes Database.

Technical note: Adults were defined as those aged 20 years and older. Rates were age- and sex-standardized using the same-aged population in the Ontario Diabetes Database on March 31, 2006 as the standard population.

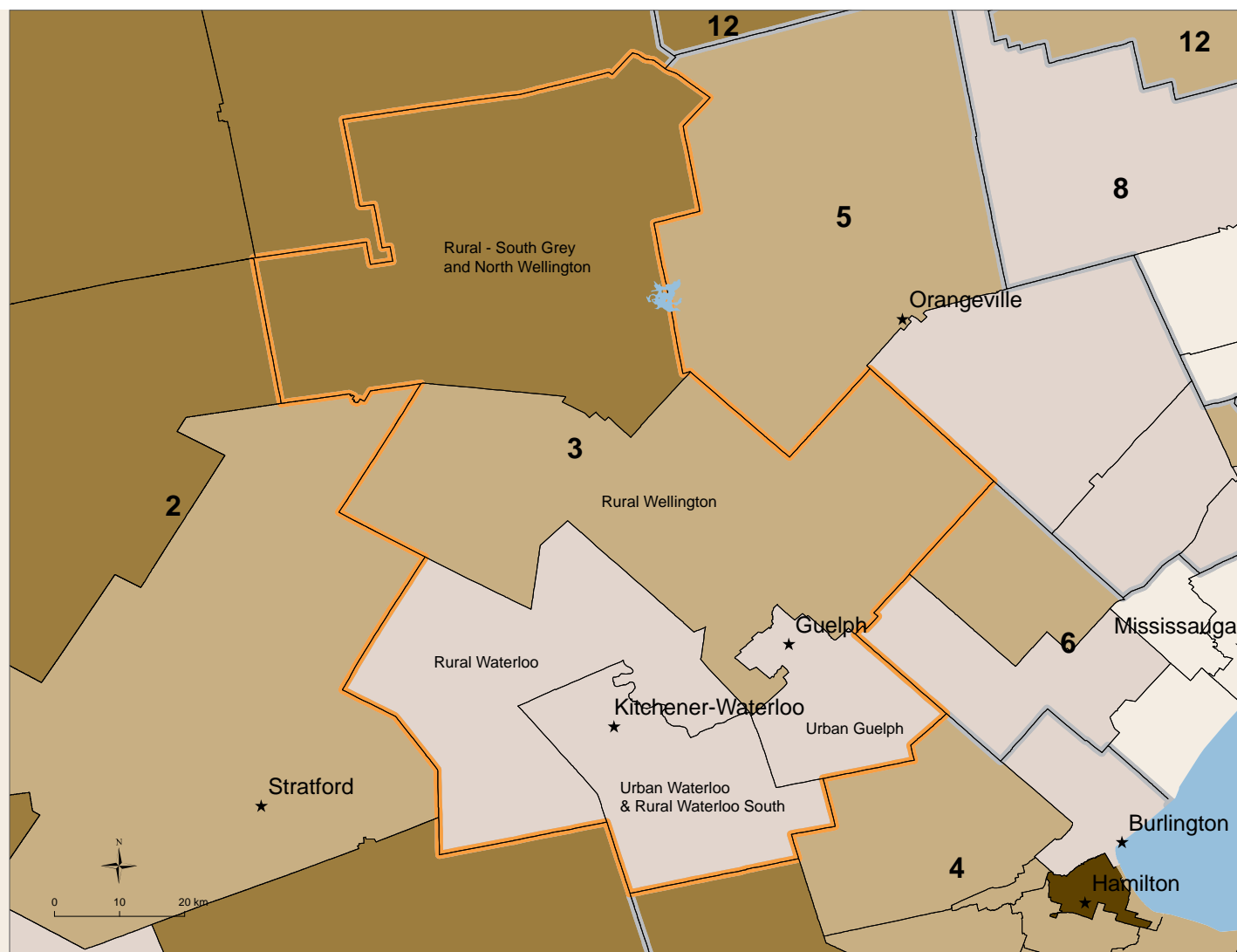
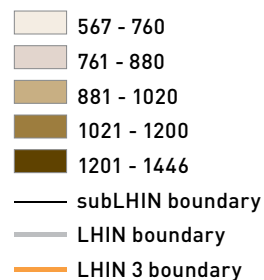
EXHIBIT 3.5

Number, per 10,000 adults with diabetes, who had at least one hospitalization for a cardiovascular condition in the Waterloo Wellington LHIN (3), by subLHIN, 2006/07–2010/11

KEY FINDINGS

- Nearly nine of every 100 adults with diabetes living in the Waterloo Wellington LHIN in 2006 were hospitalized at least once for a cardiovascular condition in the ensuing five years. This rate (874 per 10,000 adults with diabetes) was very similar to the provincial average (888 per 10,000).
- The highest rates of hospitalizations were seen in Rural South Grey and North Wellington (1,170 per 10,000) and in Rural Wellington (1,012 per 10,000).

NUMBER PER 10,000 ADULTS WITH DIABETES



Data sources: Canadian Institute of Health Information Discharge Abstract Database; Ontario Diabetes Database.

Technical notes: Adults were defined as those aged 20 years and older. Rates were age- and sex-standardized using the same-aged population in the Ontario Diabetes Database on March 31, 2006 as the standard population. Cardiovascular conditions included myocardial infarction, stroke, congestive heart failure, unstable angina and transient ischemic attack.

EXHIBIT 3.6

Number, per 10,000 adults with diabetes, who had a lower extremity amputation in the Waterloo Wellington LHIN (3), by subLHIN, 2006/07–2010/11

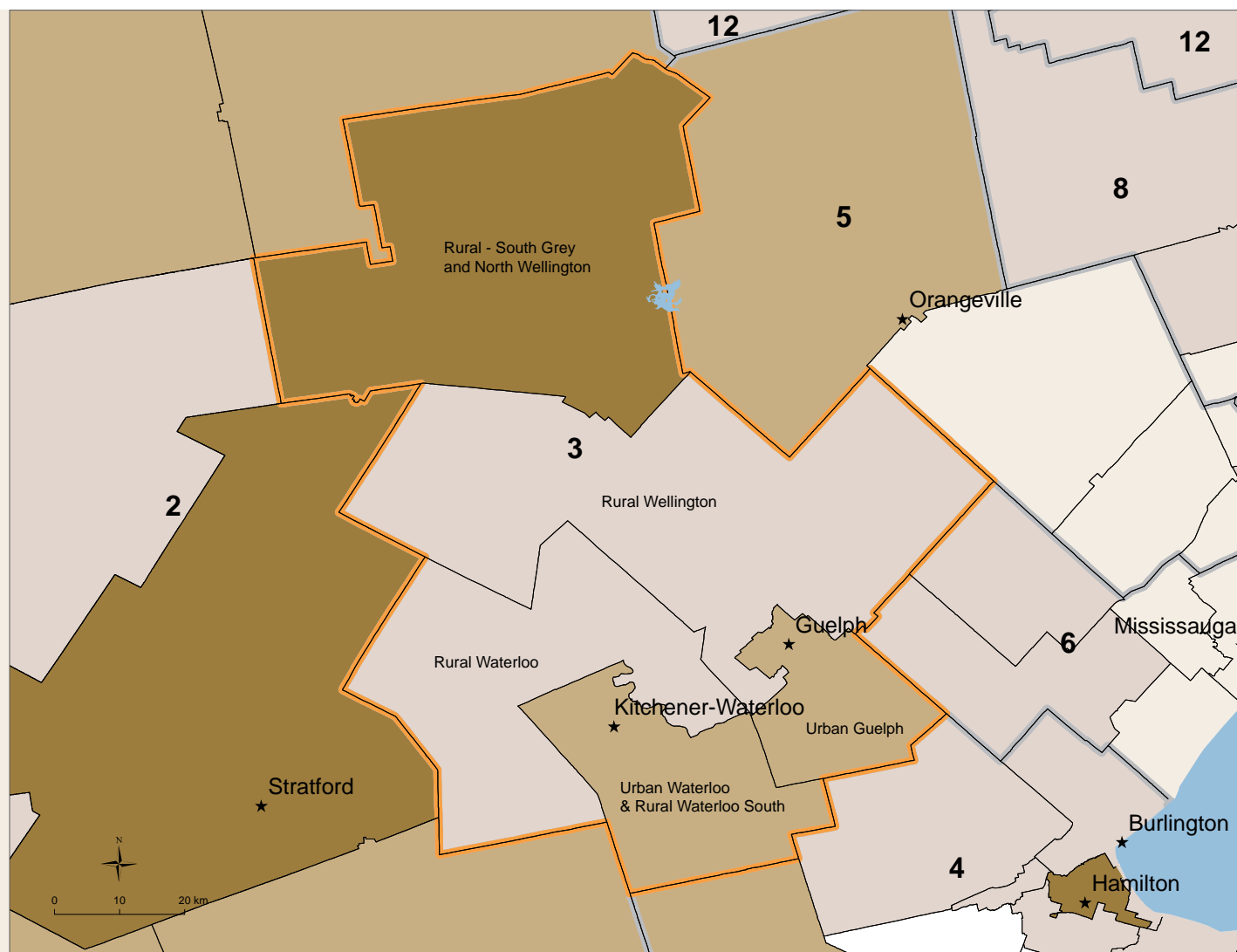
KEY FINDINGS

- In the Waterloo Wellington LHIN, more than eight of every 1,000 adults with diabetes experienced a lower extremity amputation between 2006/07 and 2010/11. This rate (85 per 10,000 adults with diabetes) was slightly higher than the Ontario average (74 per 10,000).
- Rates varied by nearly two-fold across subLHINs: the highest rate was in Rural South Grey and North Wellington (112 per 10,000), and the lowest was in Rural Waterloo (63 per 10,000).

NUMBER PER 10,000 ADULTS WITH DIABETES

- 22 - 50
- 51 - 80
- 81 - 110
- 111 - 150
- 151 - 211

- subLHIN boundary
- LHIN boundary
- LHIN 3 boundary



Data sources: Canadian Institute of Health Information Discharge Abstract Database; Ontario Diabetes Database.

Technical note: Adults were defined as those aged 20 years and older. Rates were age- and sex-standardized using the same-aged population in the Ontario Diabetes Database on March 31, 2006 as the standard population.

EXHIBIT 3.7

Number, per 10,000 adults with diabetes, who received chronic dialysis or kidney transplantation in the Waterloo Wellington LHIN (3), by subLHIN, 2006/07–2010/11

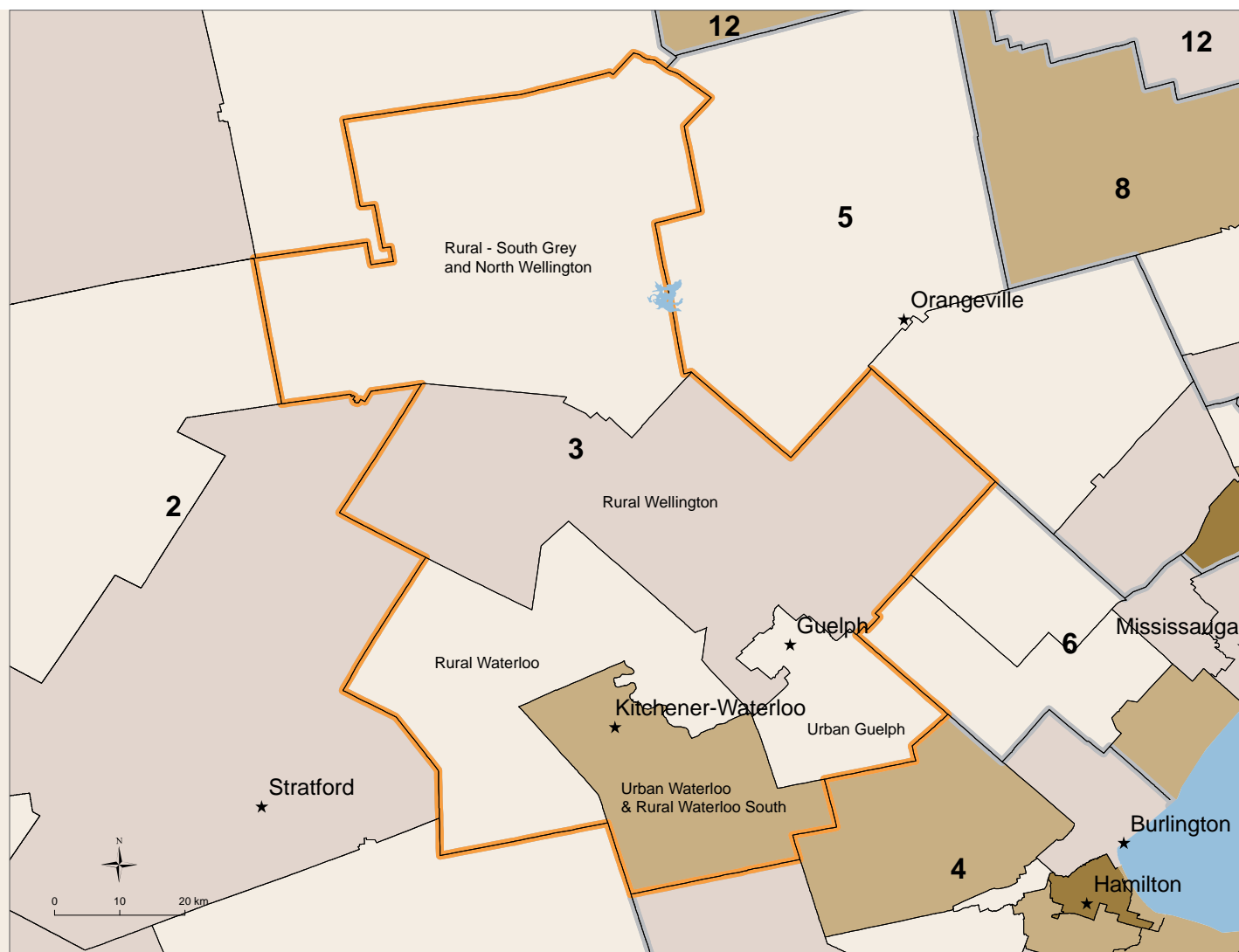
KEY FINDINGS

- Overall in the Waterloo Wellington LHIN, the rate of chronic dialysis or kidney transplantation was 121 per 10,000 adults with diabetes, a level nearly identical to the provincial average (122 per 10,000).
- There was some variation in rates across subLHINs. The highest rate was in Urban Waterloo & Rural Waterloo South (141 per 10,000) and the lowest in Urban Guelph (81 per 10,000).

NUMBER PER 10,000 ADULTS WITH DIABETES

- 73 - 100
- 101 - 125
- 126 - 150
- 151 - 200
- 201 - 280

- subLHIN boundary
- LHIN boundary
- LHIN 3 boundary



Data sources: Ontario Health Insurance Plan Database; Canadian Organ Replacement Register Database; Canadian Institute of Health Information Discharge Abstract Database; Trillium Gift of Life Network Database; Ontario Diabetes Database.

Technical note: Adults were defined as those aged 20 years and older. Rates were age- and sex-standardized using the same-aged population in the Ontario Diabetes Database on March 31, 2006 as the standard population.

EXHIBIT 3.8

Number, per 100 adults with diabetes, who had an additional chronic medical condition in the Waterloo Wellington LHIN (3), by subLHIN, 2006/07–2008/09

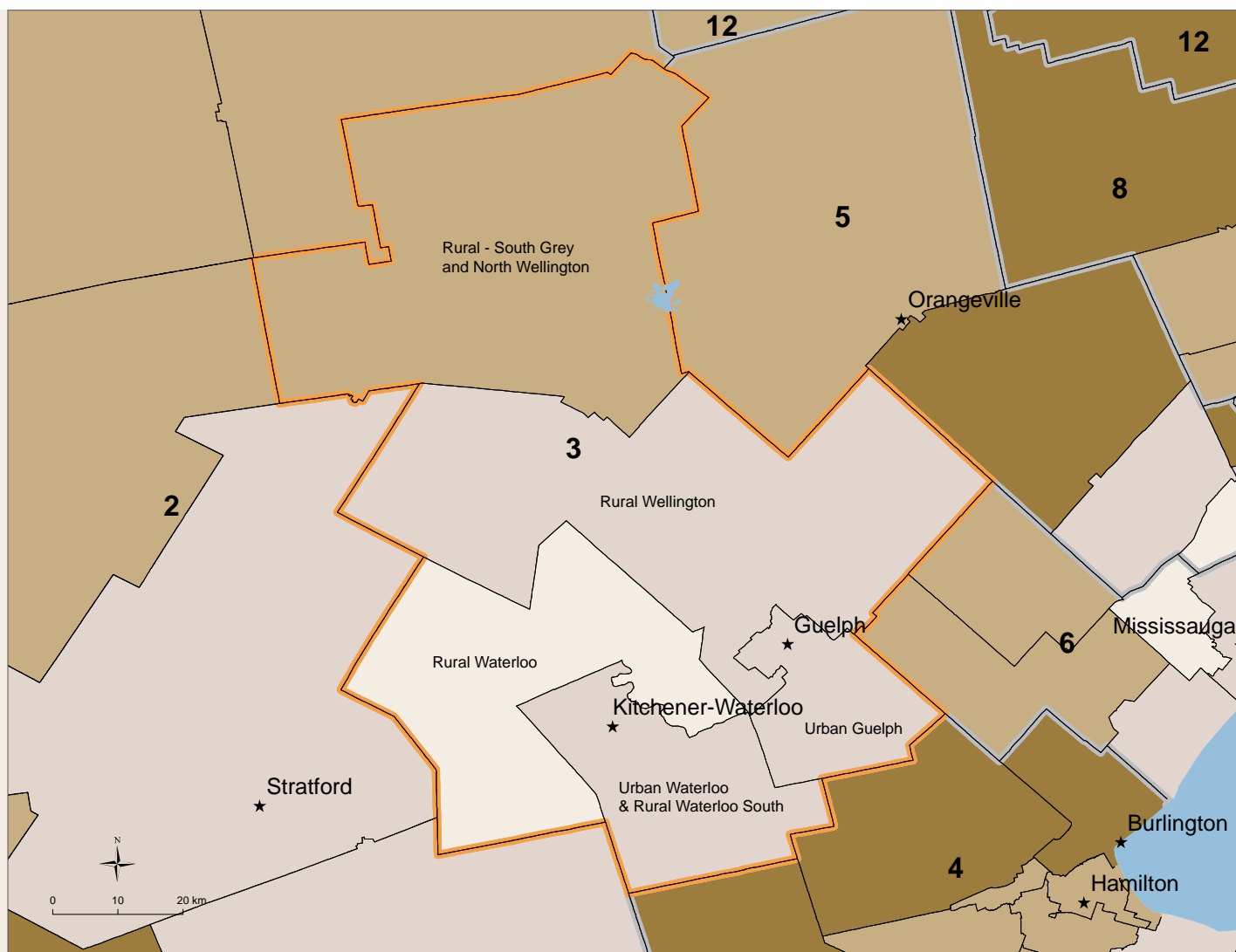
KEY FINDINGS

- In the Waterloo Wellington LHIN overall, 53 of every 100 adults with diabetes had at least one chronic medical condition other than diabetes between 2006/07 and 2008/09. This rate (53.00 per 100 adults with diabetes) was slightly lower than the provincial average (54.84 per 100).
- There was some variation in rates across subLHINs, ranging from 47.73 per 100 in Rural Waterloo to 55.94 per 100 in Rural South Grey and North Wellington.

NUMBER PER 100 ADULTS WITH DIABETES

- 44.19 - 50.00
- 50.01 - 54.00
- 54.01 - 57.00
- 57.01 - 61.00
- 61.01 - 65.43

- subLHIN boundary
- LHIN boundary
- LHIN 3 boundary



Data sources: Ontario Health Insurance Plan Database; Ontario Diabetes Database.

Technical note: Adults were defined as those aged 20 years and older. Rates were age- and sex-standardized using the same-aged population in the Ontario Diabetes Database on March 31, 2006 as the standard population.

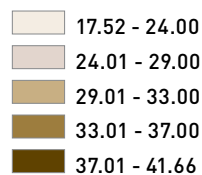
EXHIBIT 3.9

Number, per 100 adults with diabetes, who made a mental health visit for a psychotic or nonpsychotic illness in the Waterloo Wellington LHIN (3), by subLHIN, 2006/07–2008/09

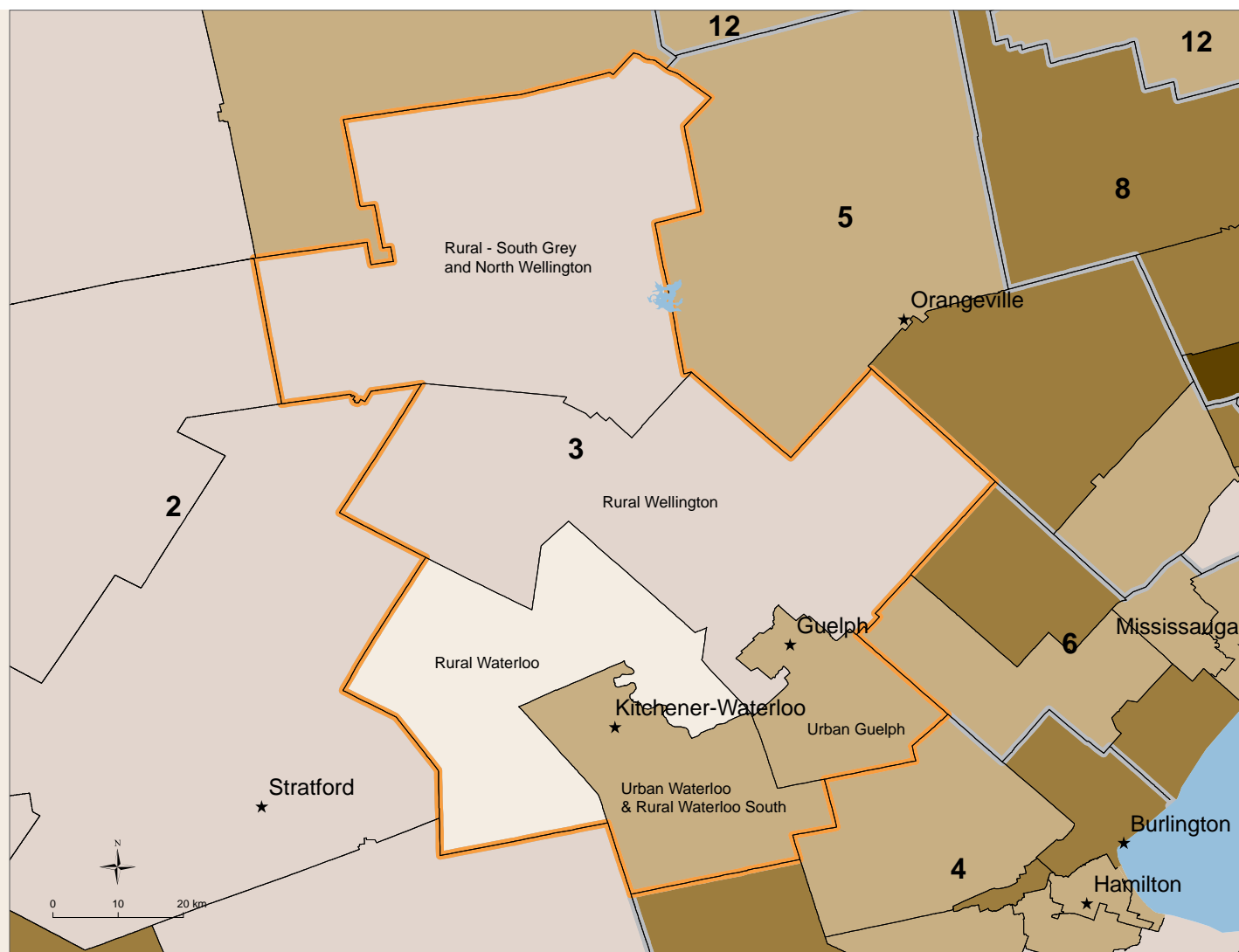
KEY FINDINGS

- In the Waterloo Wellington LHIN, nearly three of every 10 adults with diabetes made one or more mental health visits between 2006/07 and 2008/09. This rate (29.19 per 100 adults with diabetes) was slightly lower than the provincial average (32.89 per 100).
- There was some variation in rates across subLHINs, ranging from 23.21 per 100 adults in Rural Waterloo to 29.87 per 100 in Urban Waterloo & Rural Waterloo South.

NUMBER PER 100 ADULTS WITH DIABETES



- subLHIN boundary
- LHIN boundary
- LHIN 3 boundary



Data sources: Ontario Health Insurance Plan Database; Ontario Diabetes Database.

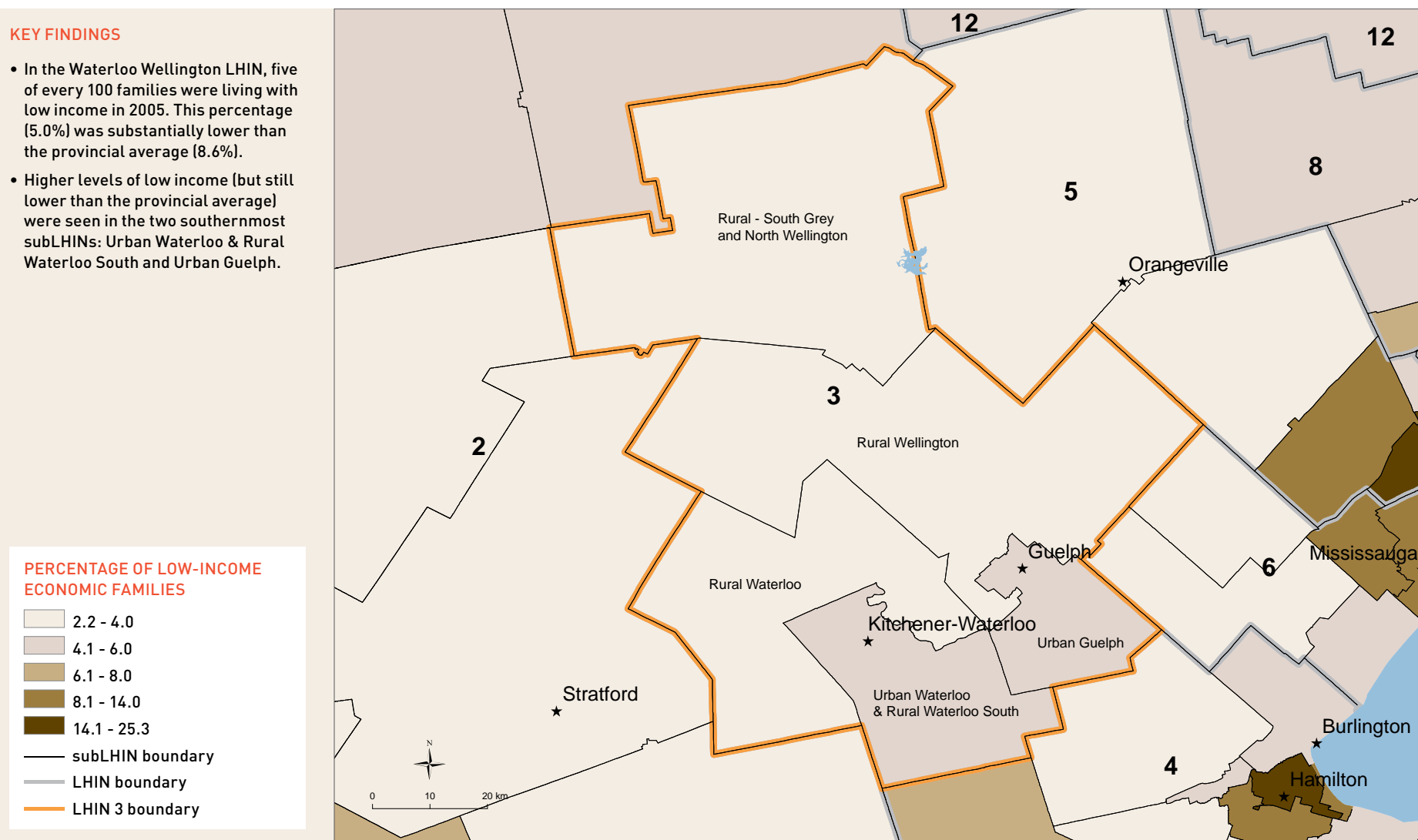
Technical note: Adults were defined as those aged 20 years and older. Rates were age- and sex-standardized using the same-aged population in the Ontario Diabetes Database on March 31, 2006 as the standard population.

EXHIBIT 3.10

Percentage of economic families with low income in the Waterloo Wellington LHIN (3), by subLHIN, 2005

KEY FINDINGS

- In the Waterloo Wellington LHIN, five of every 100 families were living with low income in 2005. This percentage (5.0%) was substantially lower than the provincial average (8.6%).
- Higher levels of low income (but still lower than the provincial average) were seen in the two southernmost subLHINs: Urban Waterloo & Rural Waterloo South and Urban Guelph.



Data source: 2006 Census of Canada.

Technical note: Economic family refers to a group of two or more persons who live in the same dwelling and are related by blood, marriage, common law or adoption. Economic families with low income are defined as those that devote a larger share of their after-tax income (at least 20% more than average) to necessities of food, shelter and clothing. Performance of this measure is limited in rural and remote communities due to missing data from First Nations reserves.

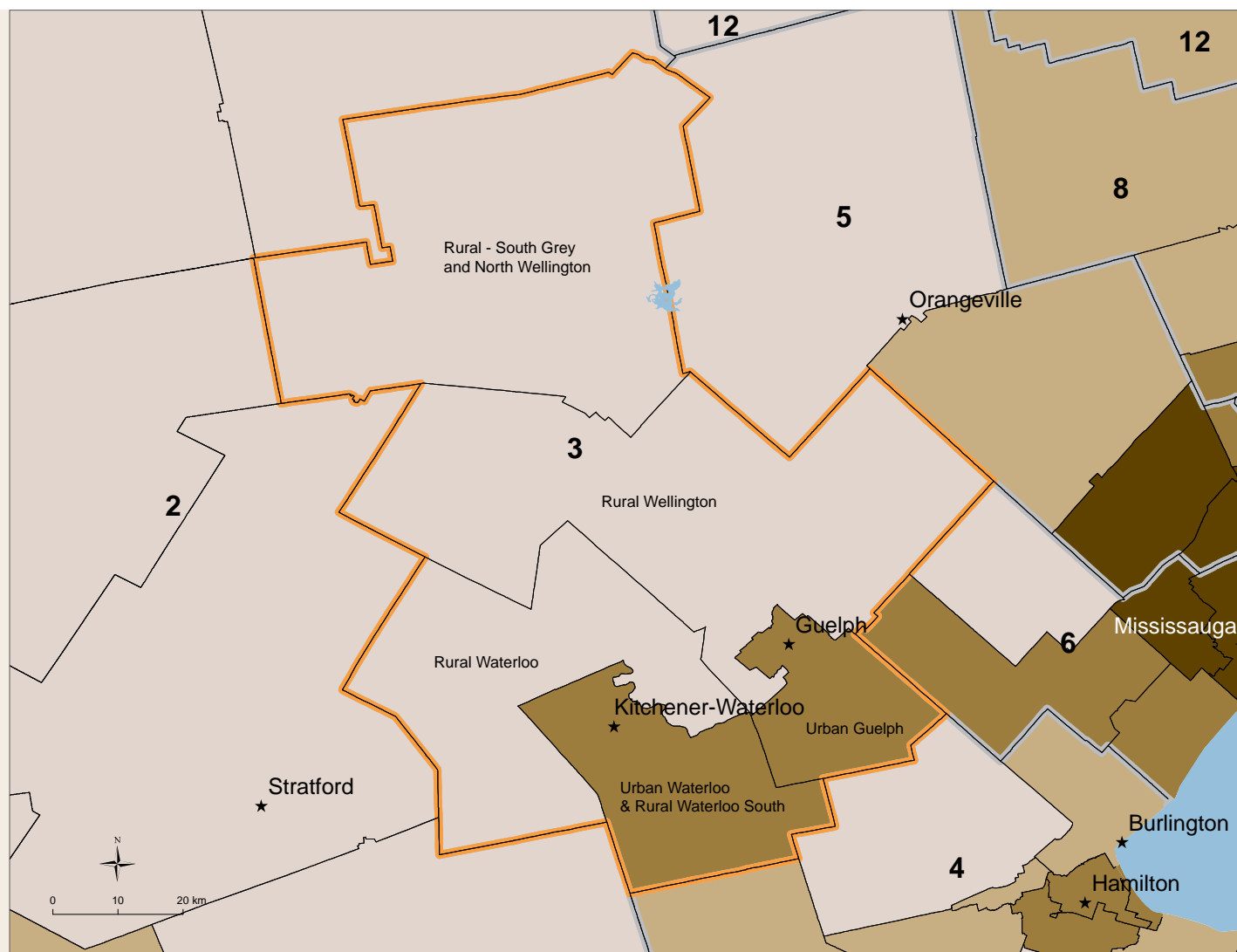
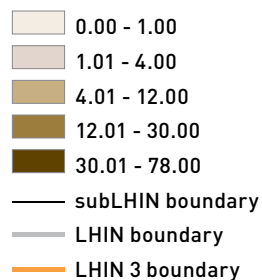
EXHIBIT 3.11

Percentage of visible minorities in the Waterloo Wellington LHIN (3), by subLHIN, 2006

KEY FINDINGS

- In the Waterloo Wellington LHIN, nearly 12 of every 100 people self-identified as belonging to a visible minority group. This percentage (11.57%) was half the provincial average (22.82%).
- The highest percentages of visible minorities were living in Urban Waterloo & Rural Waterloo South and in Urban Guelph.

PERCENTAGE OF VISIBLE MINORITIES



Data source: 2006 Census of Canada.

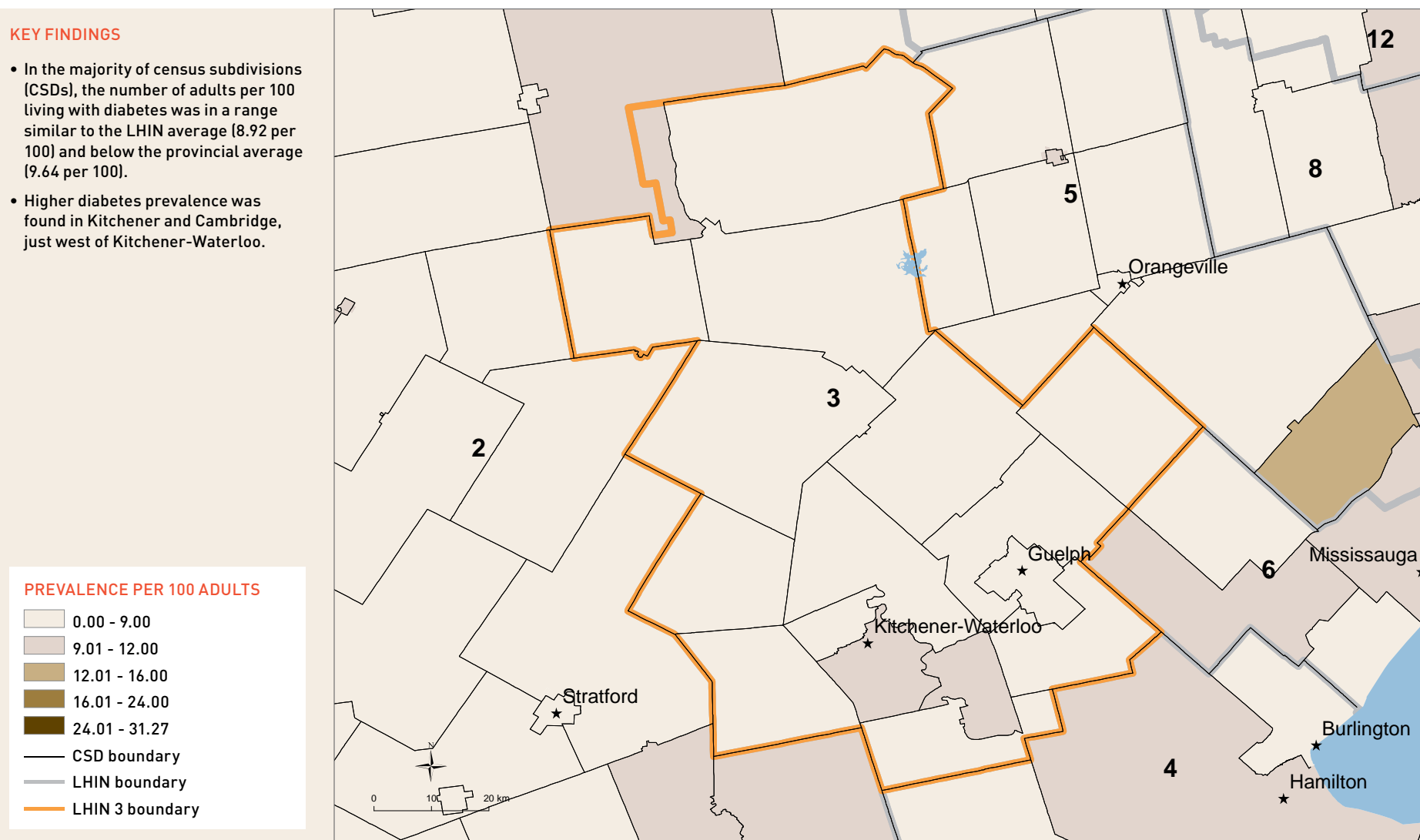
Technical note: Visible minorities include persons other than Aboriginal peoples who are non-Caucasian in race or non-white in colour.

EXHIBIT 3.12

Diabetes prevalence per 100 adults in the Waterloo Wellington LHIN (3), by census subdivision, on March 31, 2011

KEY FINDINGS

- In the majority of census subdivisions (CSDs), the number of adults per 100 living with diabetes was in a range similar to the LHIN average (8.92 per 100) and below the provincial average (9.64 per 100).
- Higher diabetes prevalence was found in Kitchener and Cambridge, just west of Kitchener-Waterloo.



Data sources: Ontario Diabetes Database; Registered Persons Database.

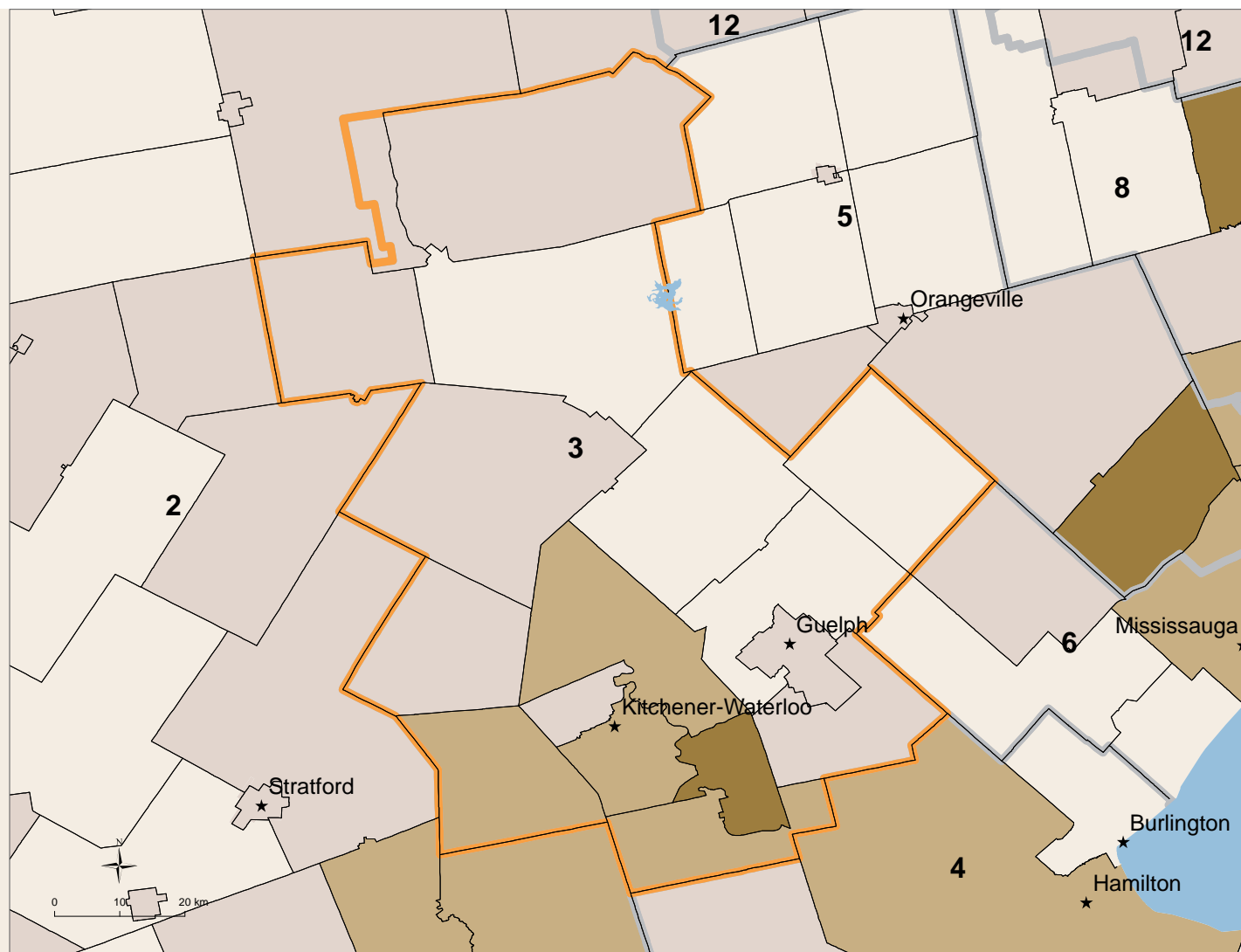
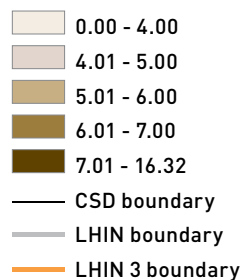
Technical note: Adults were defined as those aged 20 years and older. Rates were age- and sex-standardized using the 2001 Ontario population of the same age as the standard population.

EXHIBIT 3.13

Diabetes incidence per 100 adults in the Waterloo Wellington LHIN (3), by census subdivision, 2005/06–2009/10

KEY FINDINGS

- In most census subdivisions (CSDs), the incidence of diabetes in adults over the five-year period between April 2005 and March 2010 was similar to the LHIN average (5.03 per 100) and the provincial average (4.85 per 100).
- The highest incidence rate was found in Cambridge, west of Kitchener-Waterloo.

INCIDENCE PER 100 ADULTS

Data sources: Ontario Diabetes Database; Registered Persons Database.

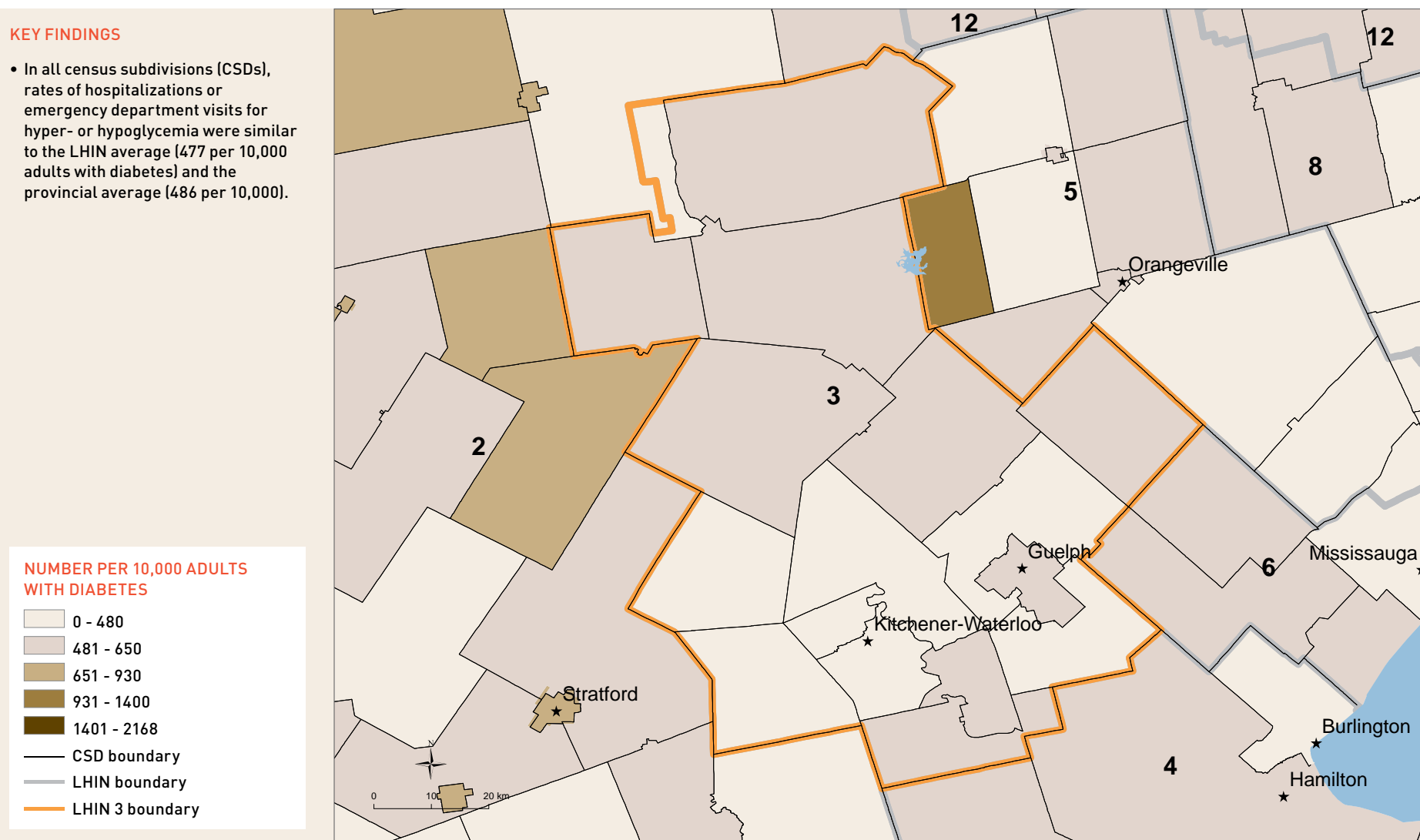
Technical note: Adults were defined as those aged 20 years and older. Rates were age- and sex-standardized using the 2001 Ontario population of the same age as the standard population.

EXHIBIT 3.14

Number, per 10,000 adults with diabetes, who had at least one hospitalization or emergency department visit for hyper- or hypoglycemia in the Waterloo Wellington LHIN (3), by census subdivision, 2006/07–2010/11

KEY FINDINGS

- In all census subdivisions (CSDs), rates of hospitalizations or emergency department visits for hyper- or hypoglycemia were similar to the LHIN average (477 per 10,000 adults with diabetes) and the provincial average (486 per 10,000).



Data sources: National Ambulatory Care Reporting System; Canadian Institute of Health Information Discharge Abstract Database; Ontario Diabetes Database.

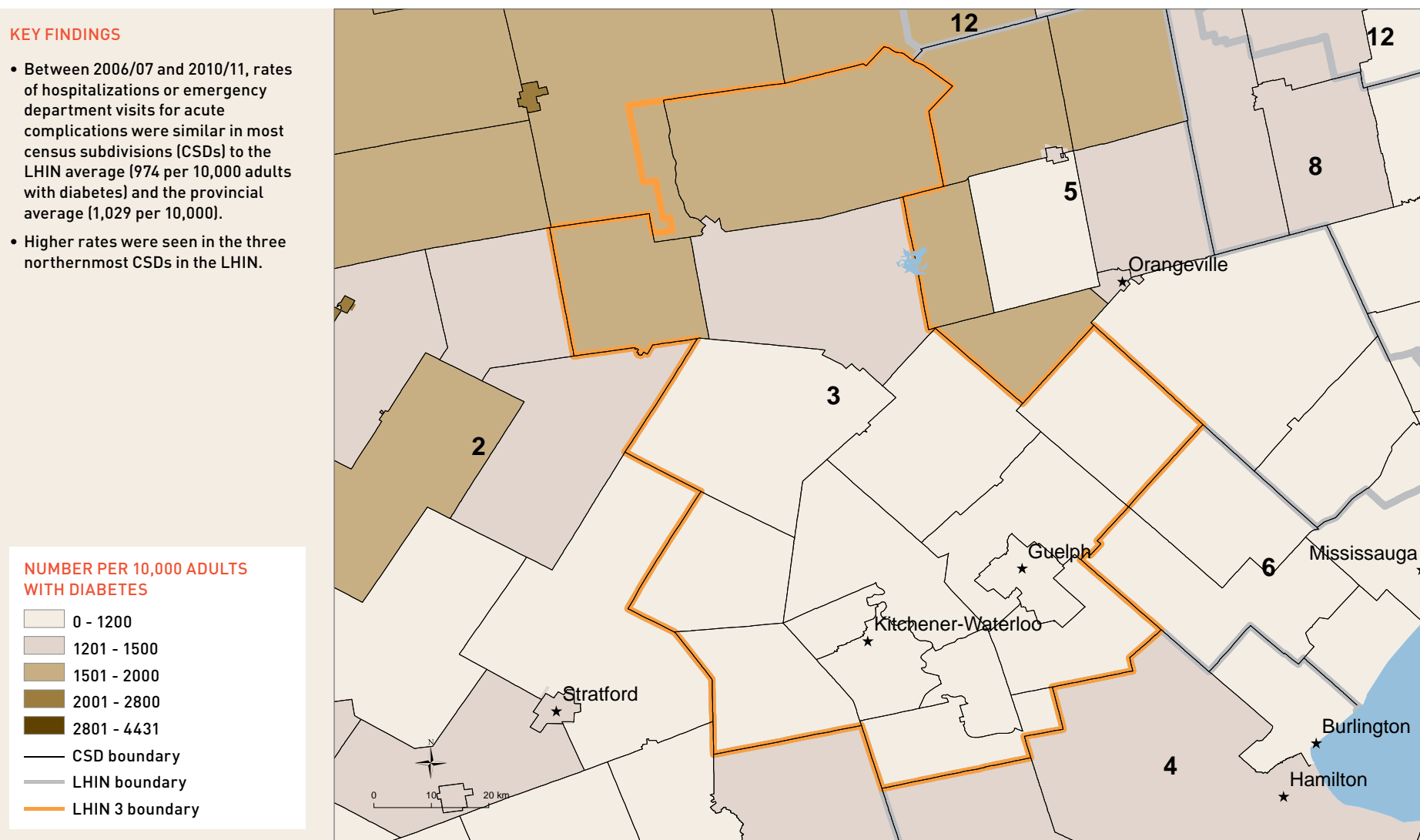
Technical note: Adults were defined as those aged 20 years and older. Rates were age- and sex-standardized using the same-aged population in the Ontario Diabetes Database on March 31, 2006 as the standard population.

EXHIBIT 3.15

Number, per 10,000 adults with diabetes, who had at least one hospitalization or emergency department visit for any acute complication in the Waterloo Wellington LHIN (3), by census subdivision, 2006/07–2010/11

KEY FINDINGS

- Between 2006/07 and 2010/11, rates of hospitalizations or emergency department visits for acute complications were similar in most census subdivisions (CSDs) to the LHIN average (974 per 10,000 adults with diabetes) and the provincial average (1,029 per 10,000).
- Higher rates were seen in the three northernmost CSDs in the LHIN.



Data sources: National Ambulatory Care Reporting System; Canadian Institute of Health Information Discharge Abstract Database; Ontario Diabetes Database.

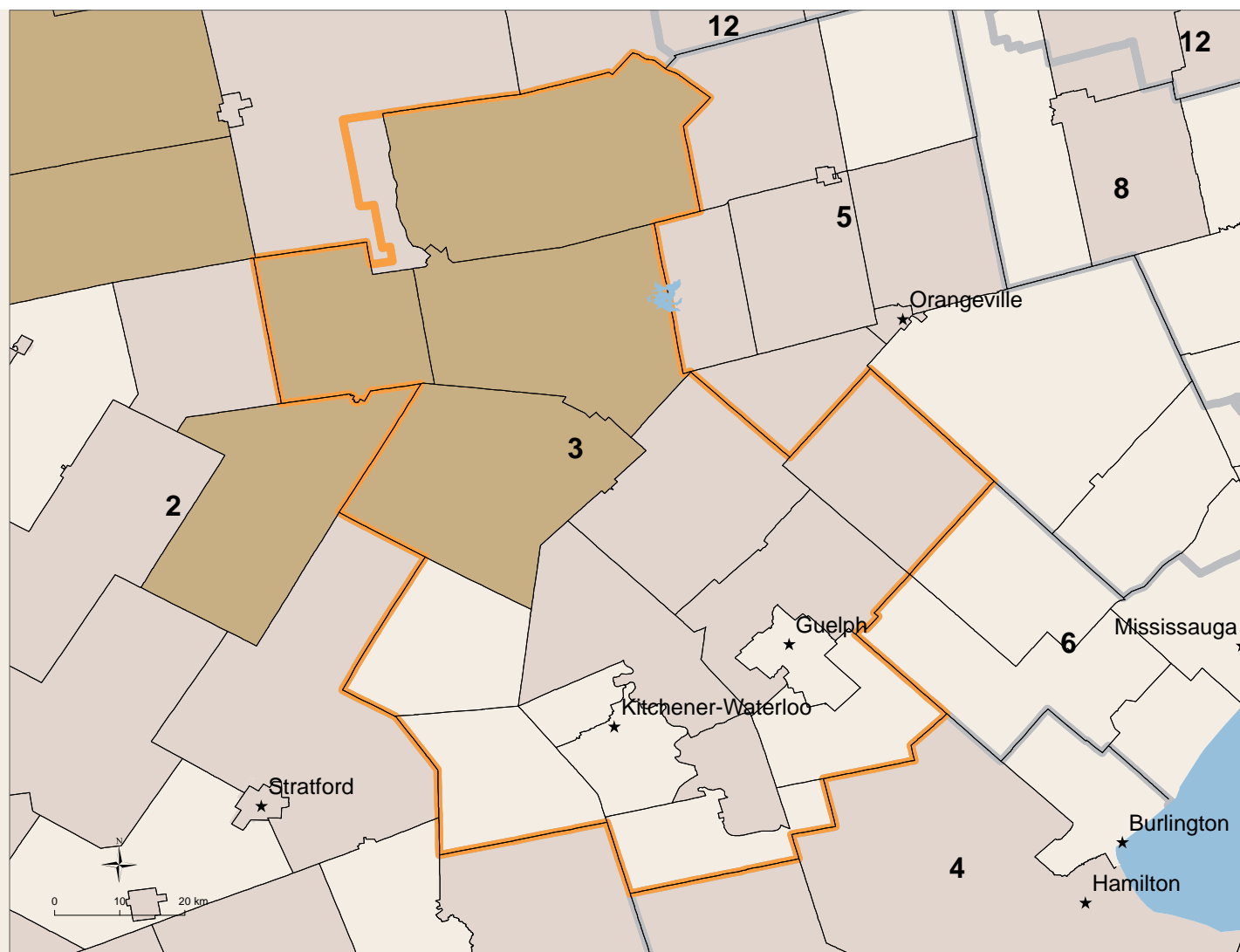
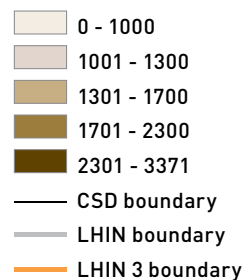
Technical notes: Adults were defined as those aged 20 years and older. Rates were age- and sex-standardized using the same-aged population in the Ontario Diabetes Database on March 31, 2006 as the standard population. Acute complications consisted of hyper- or hypoglycemia, skin and soft tissue infection or foot ulcer.

EXHIBIT 3.16

Number, per 10,000 adults with diabetes, who had any chronic complication in the Waterloo Wellington LHIN (3), by census subdivision, 2006/07–2010/11

KEY FINDINGS

- Between 2006/07 and 2010/11, rates of chronic complications were similar in most census subdivisions (CSDs) to the LHIN average (1,009 per 10,000 adults with diabetes) and the provincial average (1,016 per 10,000).
- Higher rates of chronic complications (above 1,300 per 10,000) were seen in the four northernmost CSDs in the LHIN.

NUMBER PER 10,000 ADULTS WITH DIABETES

Data sources: Ontario Health Insurance Plan Database; Canadian Organ Replacement Register Database; Canadian Institute of Health Information Discharge Abstract Database; Trillium Gift of Life Network; Ontario Diabetes Database.

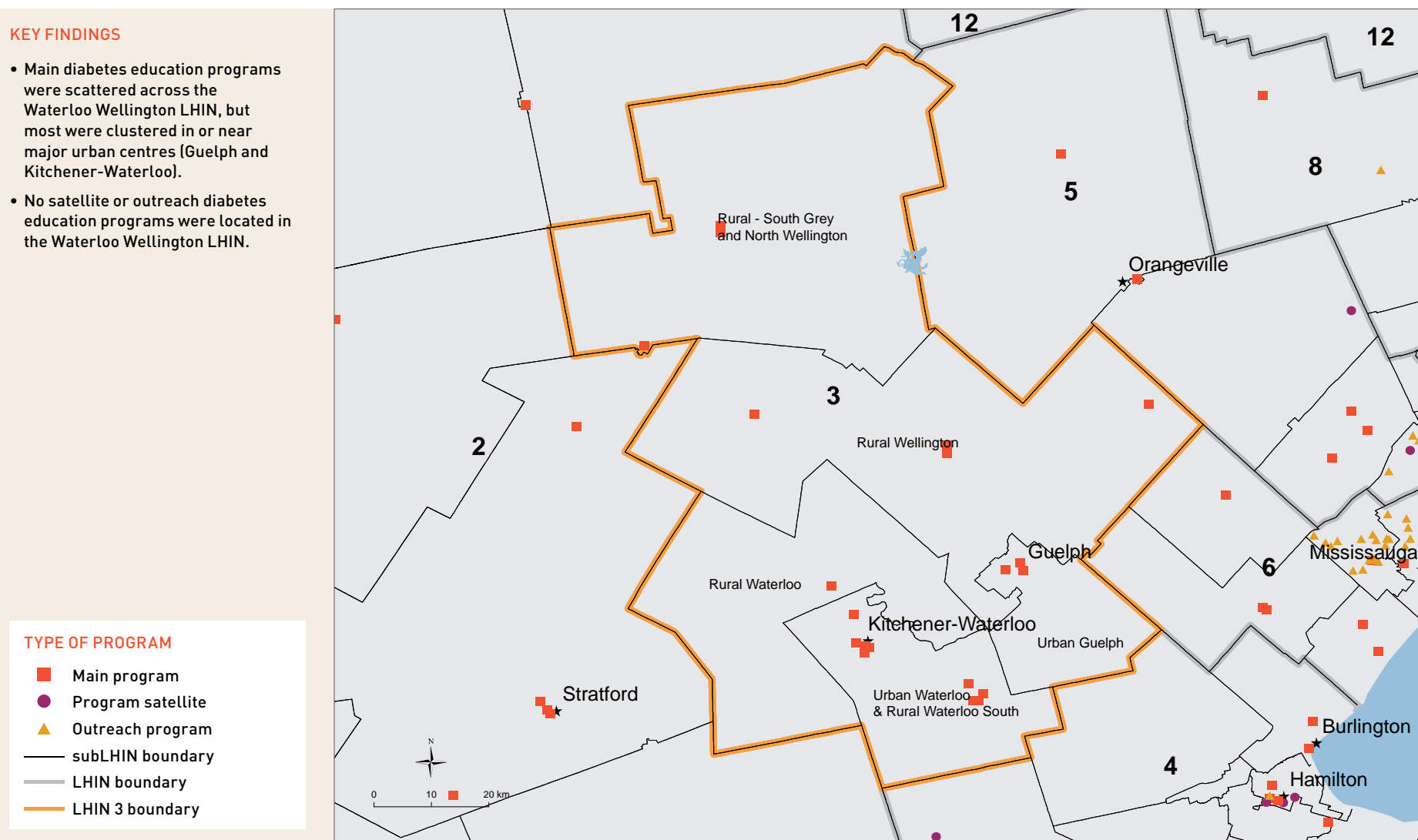
Technical note: Adults were defined as those aged 20 years and older. Rates were age- and sex-standardized using the same-aged population in the Ontario Diabetes Database on March 31, 2006 as the standard population. A chronic complication consisted of hospitalization for a cardiovascular condition or having a lower extremity amputation or end-stage renal disease (chronic dialysis or kidney transplantation).

EXHIBIT 3.17

Locations of diabetes education programs in the Waterloo Wellington LHIN (3), 2011

KEY FINDINGS

- Main diabetes education programs were scattered across the Waterloo Wellington LHIN, but most were clustered in or near major urban centres (Guelph and Kitchener-Waterloo).
- No satellite or outreach diabetes education programs were located in the Waterloo Wellington LHIN.



Data source: Diabetes Regional Coordination Centres.

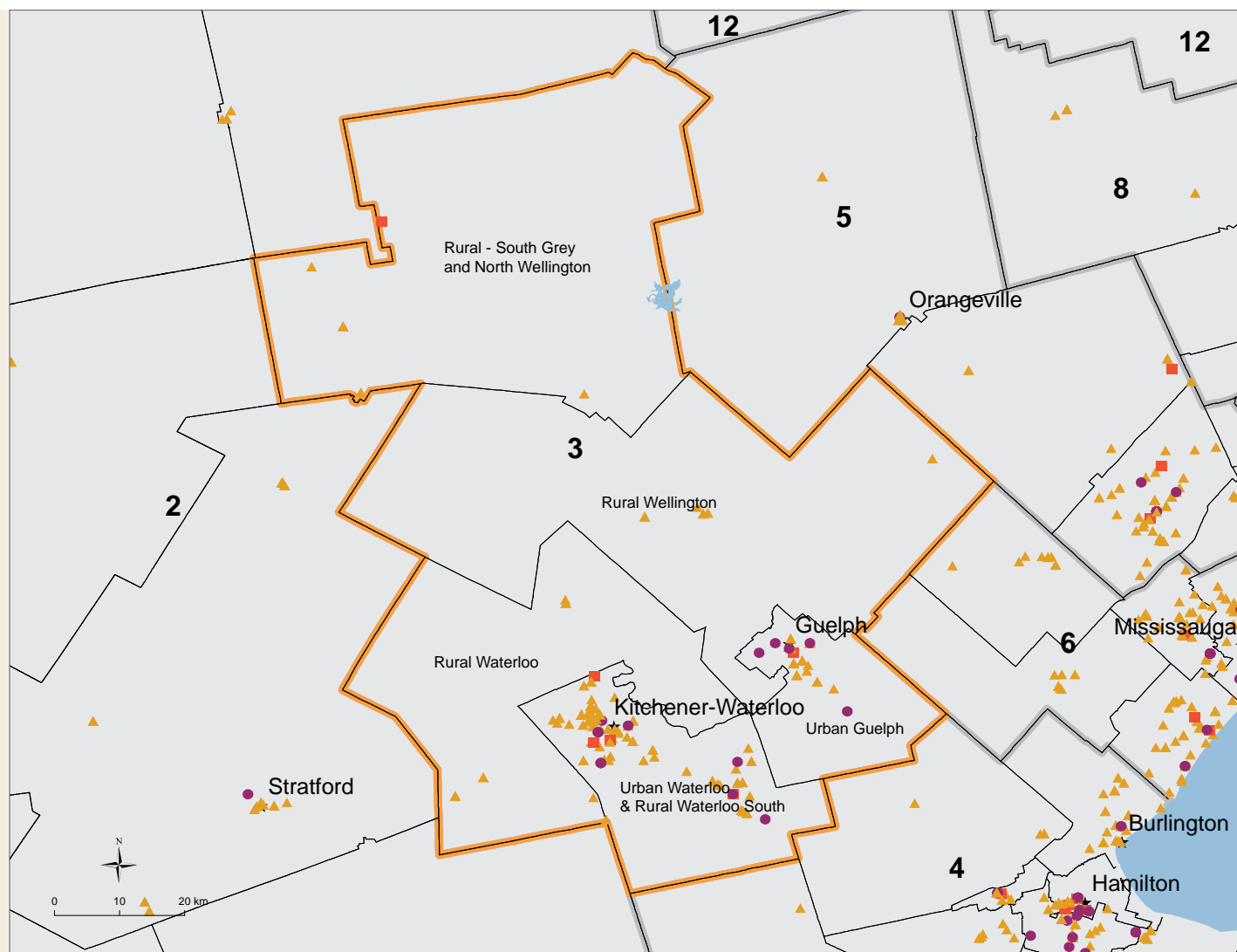
Technical note: Locations were designated based on six-digit postal codes using Statistics Canada's Postal Code Conversion File.

EXHIBIT 3.18**Locations of endocrinologists and eye specialists in the Waterloo Wellington LHIN (3), 2010/11****KEY FINDINGS**

- In the Waterloo Wellington LHIN, most endocrinology and all ophthalmology practices were located in the south, near Kitchener-Waterloo and Guelph.
- Optometrists were the most numerous and were also scattered more widely across the LHIN compared with endocrinologists and ophthalmologists.

TYPE OF SPECIALIST

- Endocrinologist
- Ophthalmologist
- ▲ Optometrist
- subLHIN boundary
- LHIN boundary
- LHIN 3 boundary



Data sources: Locations of endocrinologists and ophthalmologists came from the ICES Physician Database, 2010; listings of optometrists came from the Corporate Provider Database, April 1, 2010 to March 31, 2011.

Technical note: Locations were designated based on six-digit postal codes using Statistics Canada's Postal Code Conversion File.