

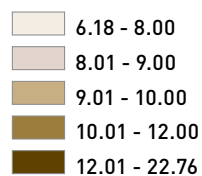
Diabetes Measures by Region

EXHIBIT 10.1

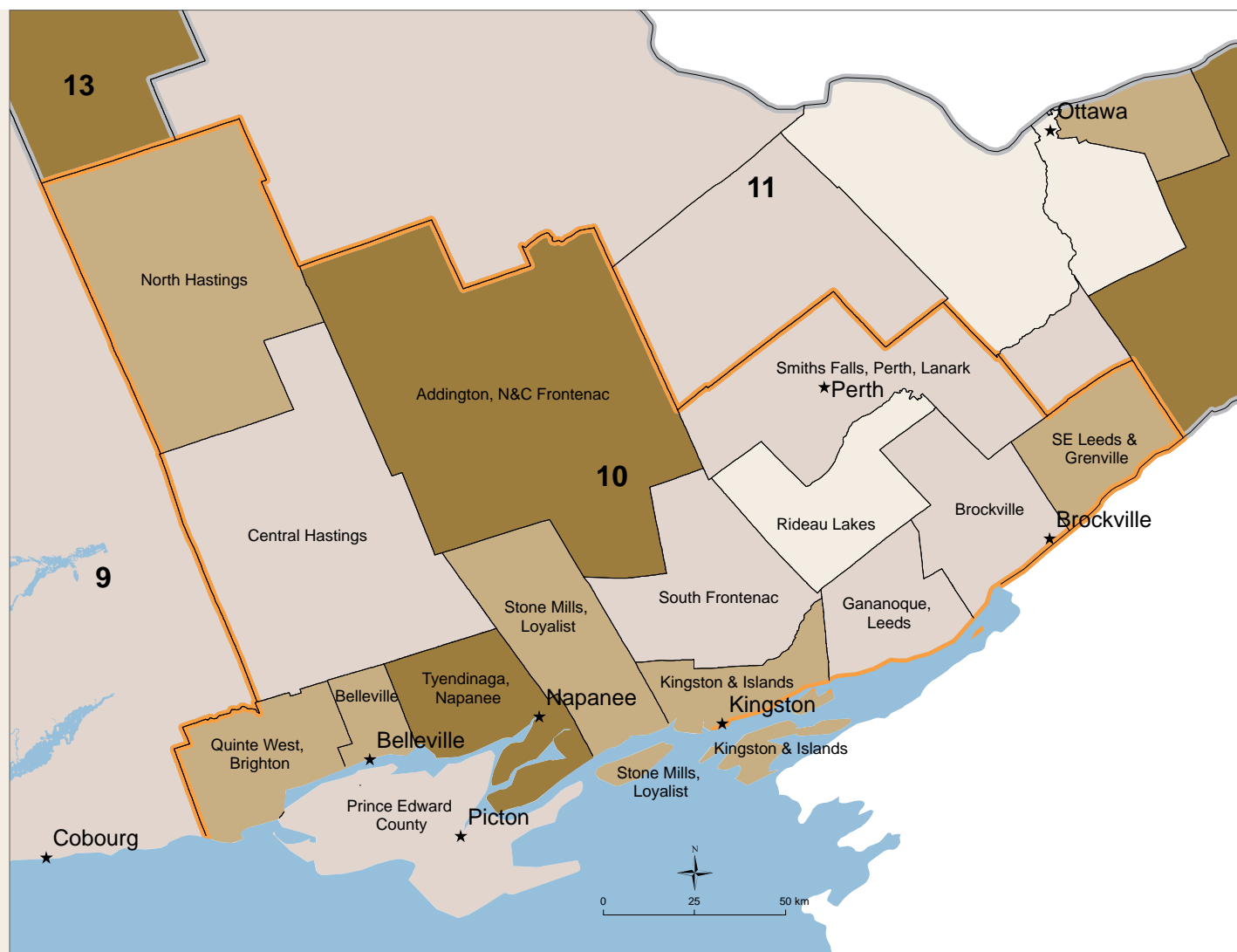
Diabetes prevalence per 100 adults in the South East LHIN (10), by subLHIN, on March 31, 2011

KEY FINDINGS

- For every 100 adults in the South East LHIN, about nine were living with diabetes. This prevalence (9.13 per 100) was slightly lower than the Ontario average (9.64 per 100).
- Diabetes prevalence was highest in Tyendinaga, Napanee (11.33 per 100) and in Addington, North & Central Frontenac (10.50 per 100).

PREVALENCE PER 100 ADULTS

— subLHIN boundary
 — LHIN boundary
 — LHIN 10 boundary



Data sources: Ontario Diabetes Database; Registered Persons Database.

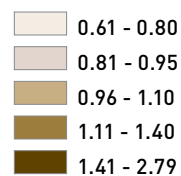
Technical note: Adults were defined as those aged 20 years and older. Rates were age- and sex-standardized using the 2001 Ontario population of the same age as the standard population.

EXHIBIT 10.2

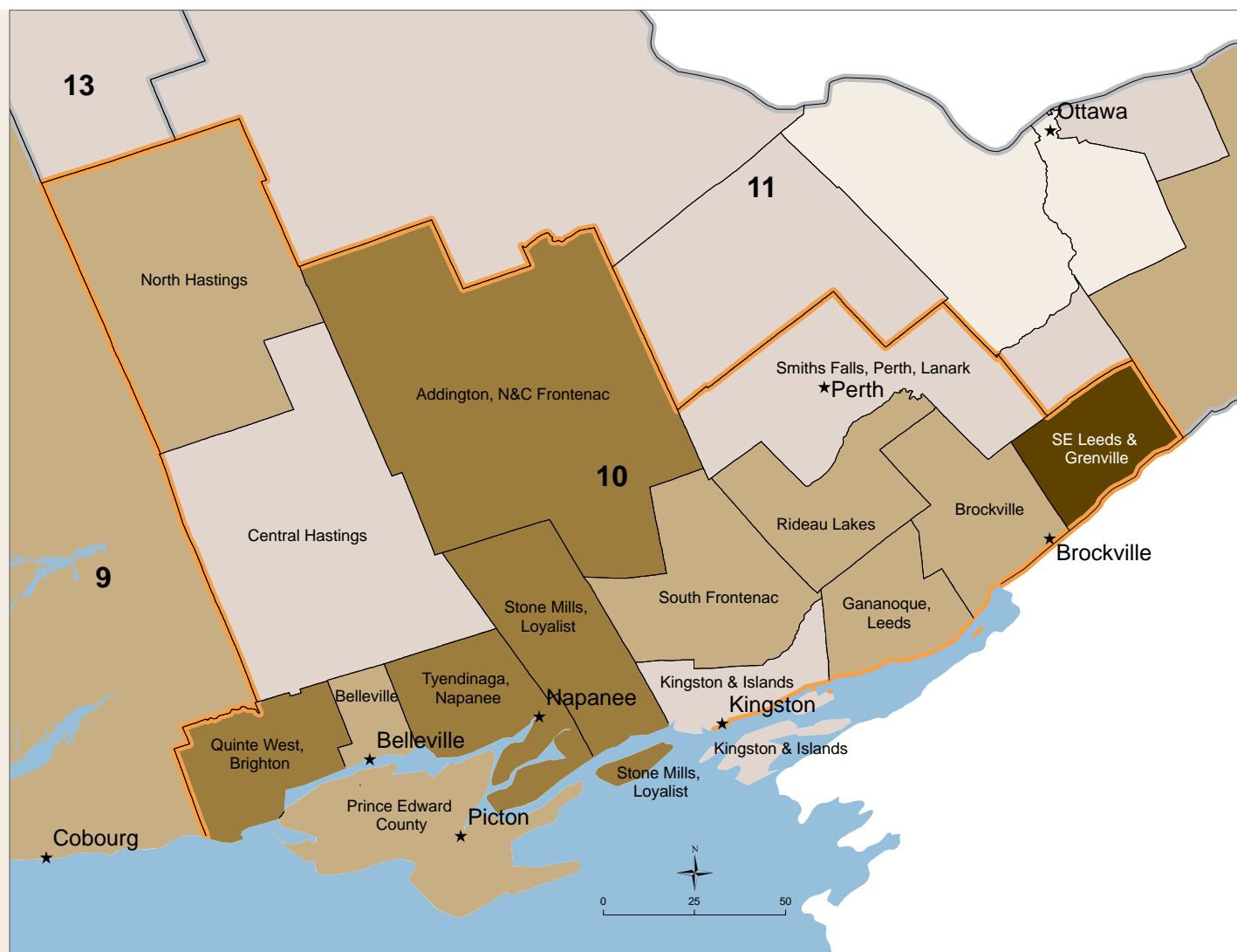
Diabetes incidence per 100 adults in the South East LHIN (10), by subLHIN, 2009/10

KEY FINDINGS

- For every 100 adults living in the South East LHIN who were free of diabetes in March 2009, about one was newly diagnosed with diabetes during the following year. This incidence rate (1.02 per 100) was only slightly higher than the Ontario average (0.97 per 100).
- The highest incidence rate was seen in South East Leeds & Grenville (1.41 per 100). Higher-than-average rates were also seen in a number of subLHINs in the southwest and north-central parts of the LHIN.

INCIDENCE PER 100 ADULTS

- subLHIN boundary
- LHIN boundary
- LHIN 10 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 10.3

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

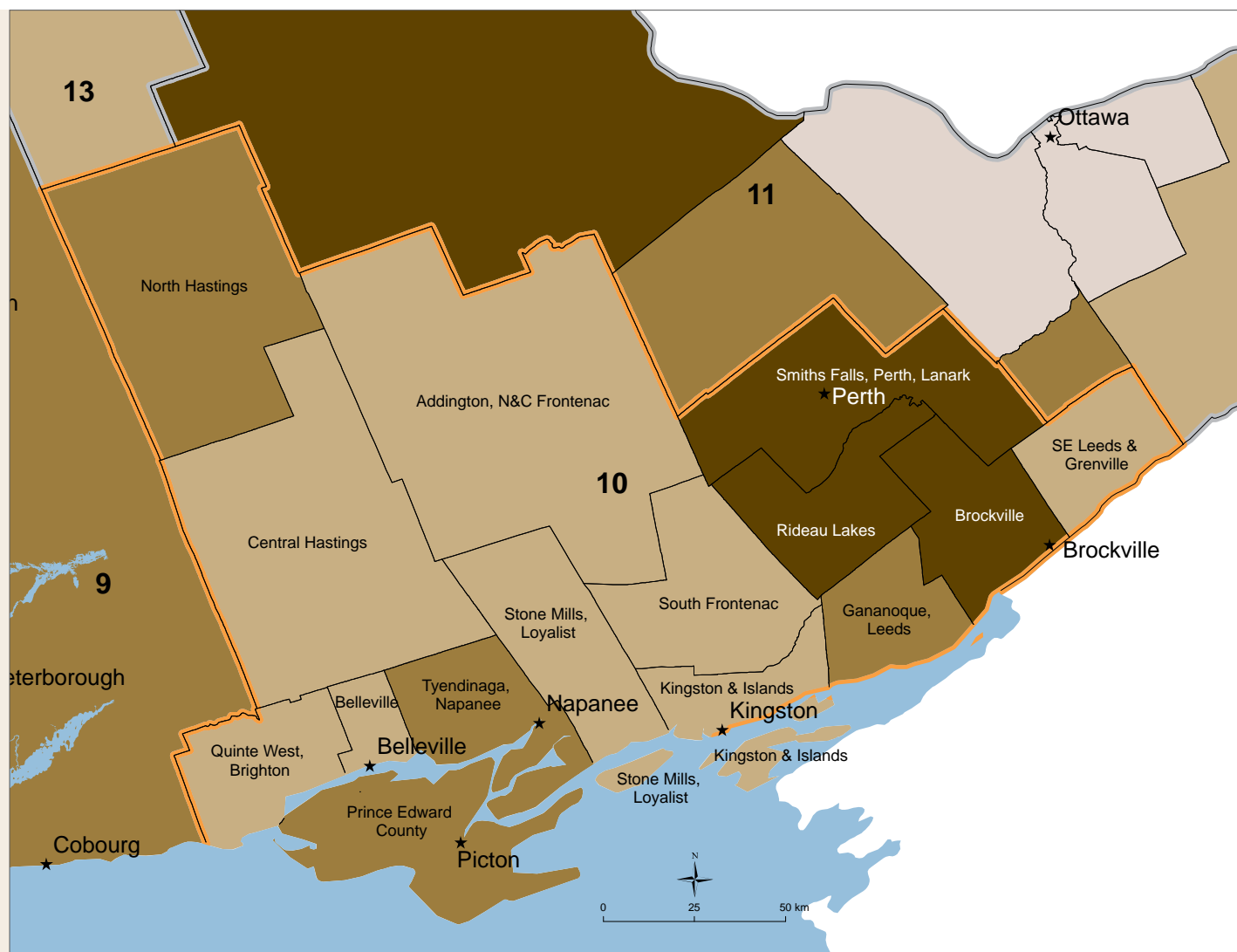
KEY FINDINGS

- Overall, for every 100 adults living with diabetes in the South East LHIN on March 31, 2006, about six had at least one hospitalization or emergency department (ED) visit for hyper- or hypoglycemia in the subsequent five years. This rate (613 per 10,000 adults with diabetes) was notably higher than the provincial average (486 per 10,000).
- The highest rates were seen in a number of subLHINs clustered in the east end of the LHIN: Smiths Falls, Perth, Lanark (818 per 10,000), Brockville (737 per 10,000) and Rideau Lakes (717 per 10,000).
- Higher-than-average rates were also seen in several subLHINs in the northwest, southwest and southeast ends of the LHIN.

NUMBER PER 10,000 ADULTS WITH DIABETES

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

- subLHIN boundary
- LHIN boundary
- LHIN 10 boundary



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

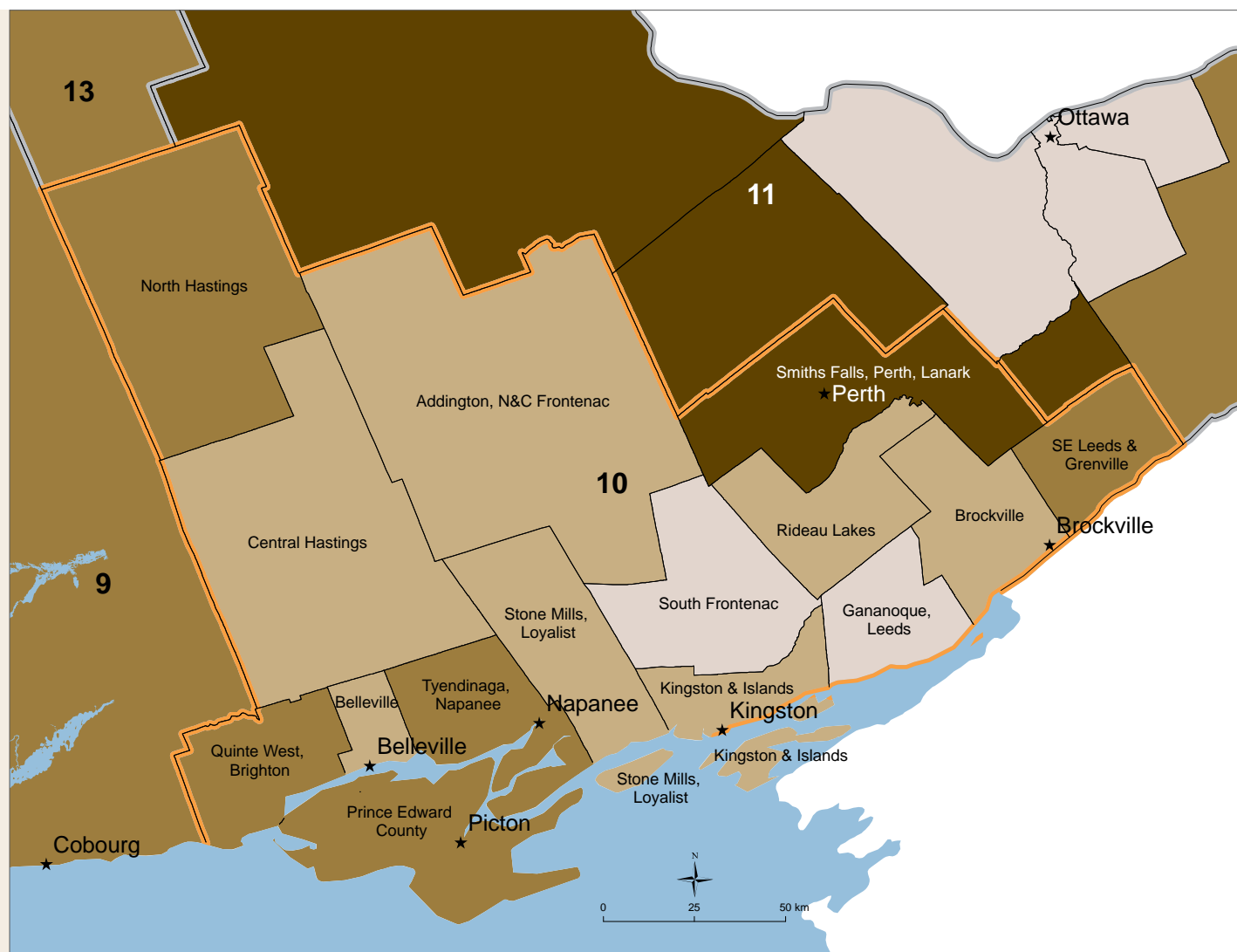
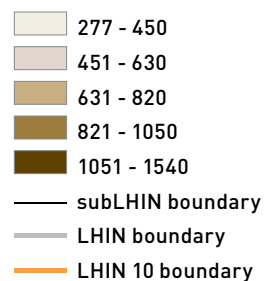
Technical note: Adults were defined as those aged 20 years and older. Rates were age- and sex-standardized using the same-aged population in the Ontario Diabetes Database on March 31, 2006 as the standard population.

EXHIBIT 10.4

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 East LHIN (10), by subLHIN, 2006/07–2010/11

KEY FINDINGS

- For every 100 adults living with diabetes in the South East LHIN in 2006, about eight had at least one hospitalization or emergency department (ED) visit for a skin and soft tissue infection or foot ulcer during the subsequent five years. This rate (812 per 10,000 adults with diabetes) was considerably higher than the provincial average (618 per 10,000).
- Rates varied by nearly 2.5-fold across subLHINs. The highest rates were found in a Smiths Falls, Perth & Lanark (1,201 per 10,000) and in a number of CSDs in the northwest, southwest and southeast ends of the LHIN.

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.

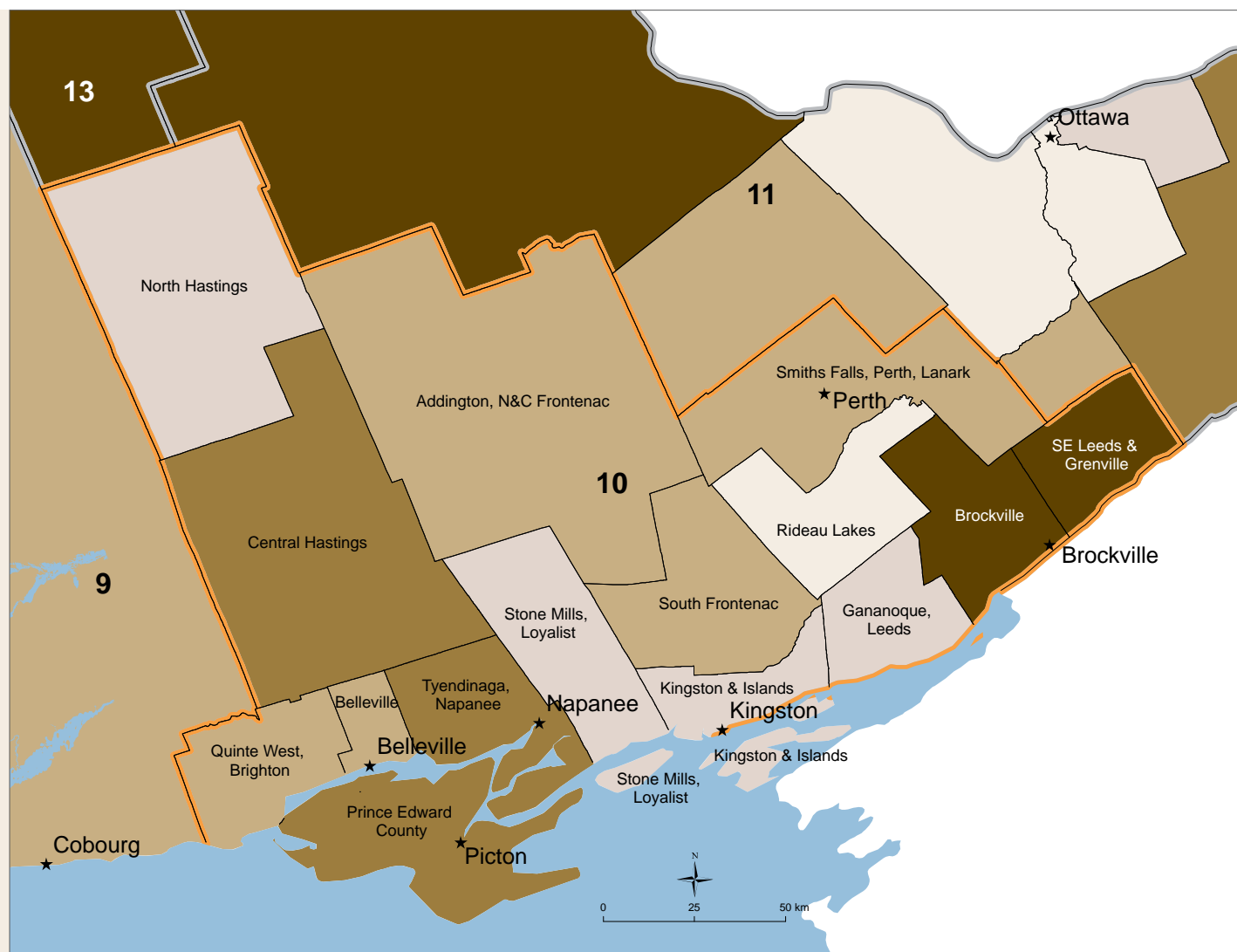
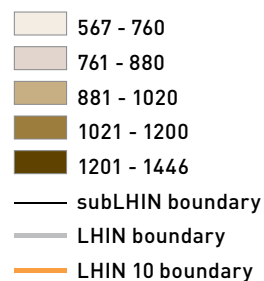
Technical note: Adults were defined as those aged 20 years and older. Rates were age- and sex-standardized using the same-aged population in the Ontario Diabetes Database on March 31, 2006 as the standard population.

EXHIBIT 10.5

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

KEY FINDINGS

- Approximately one in 10 adults with diabetes living in the South East LHIN in 2006 were hospitalized at least once for a cardiovascular condition in the ensuing five years. This rate (985 per 10,000 adults with diabetes) was above the provincial average (888 per 10,000).
- The highest rates of cardiovascular hospitalizations were seen in Brockville (1,262 per 10,000) and South East Leeds & Grenville (1,237 per 10,000). Higher-than-average rate were also seen in several subLHINs in the west and southwest end of the LHIN.

NUMBER PER 10,000 ADULTS WITH DIABETES

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

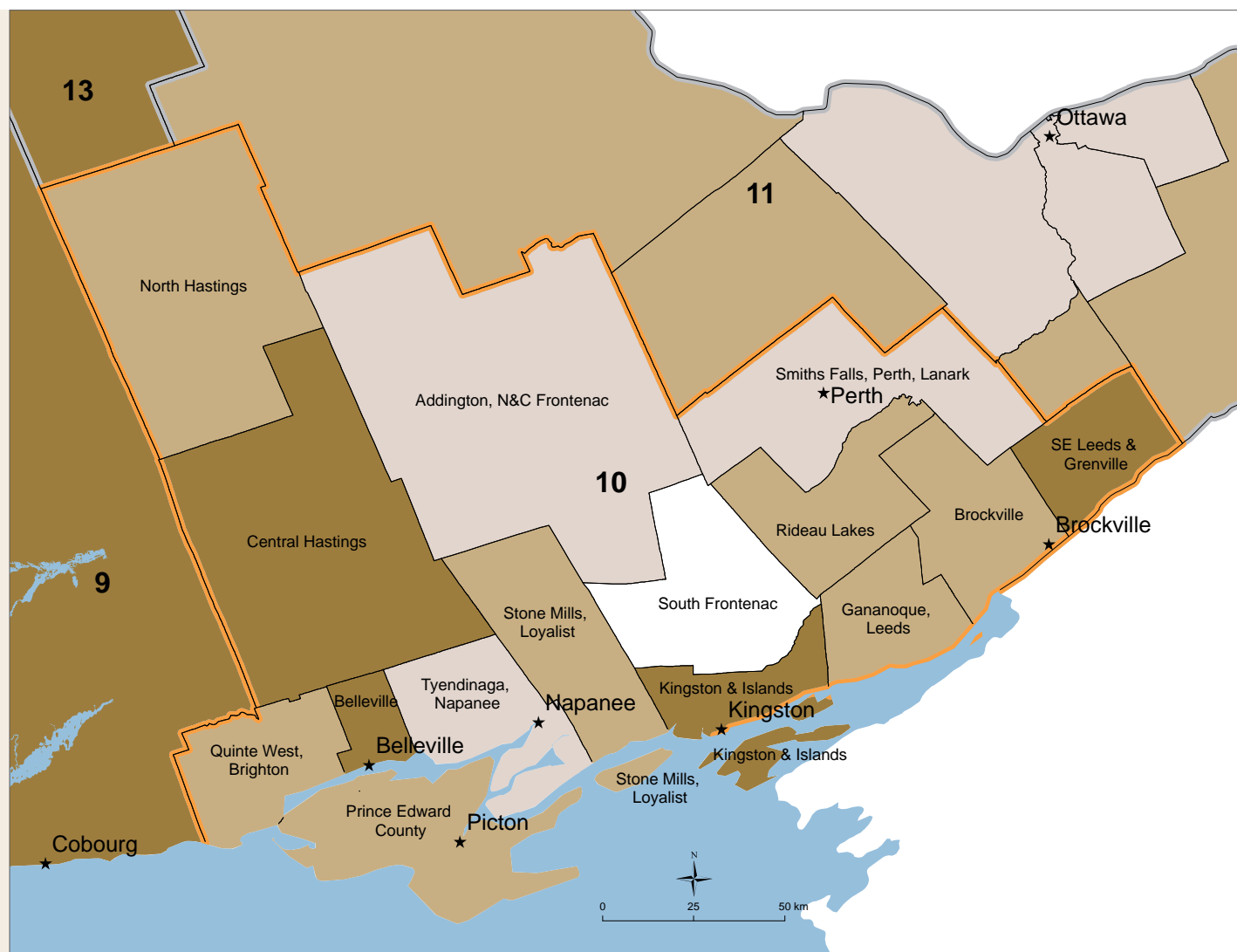
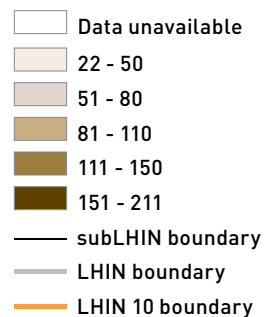
Technical notes: Adults were defined as those aged 20 years and older. Rates were age- and sex-standardized using the same-aged population in the Ontario Diabetes Database on March 31, 2006 as the standard population. Cardiovascular conditions included myocardial infarction, stroke, congestive heart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

EXHIBIT 10.6

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

KEY FINDINGS

- In the South East LHIN overall, about one 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 notably higher than the Ontario average (74 per 10,000).
- Rates varied by nearly three-fold across subLHINs: the highest rate was seen in Central Hastings (131 per 10,000) and the lowest in South Frontenac (47 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 10.7

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

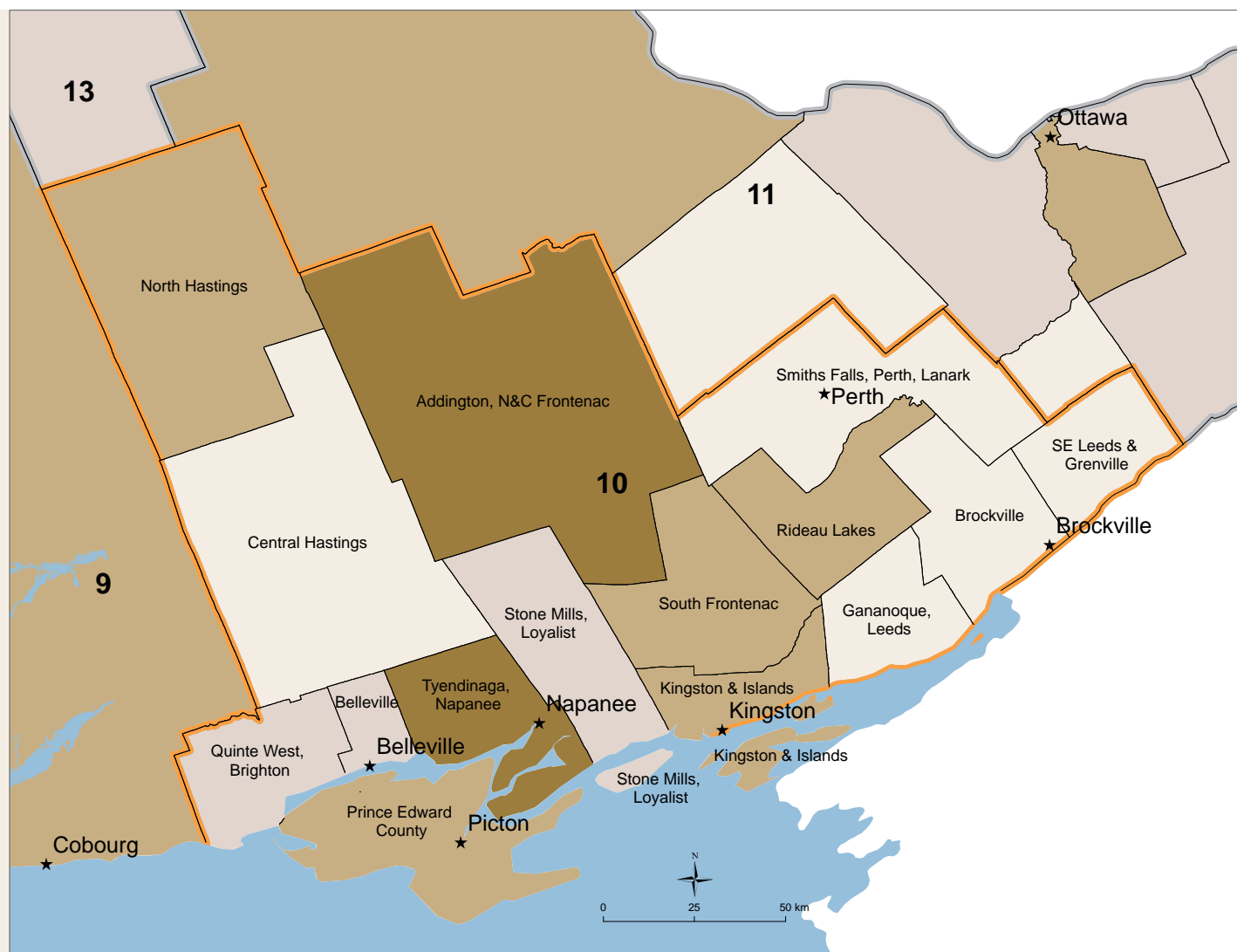
KEY FINDINGS

- Overall in the South East LHIN, the rate of chronic dialysis or kidney transplantation was 118 per 10,000 adults with diabetes, a level slightly below the provincial average (122 per 10,000).
- Rates varied by more than two-fold across subLHINs. The highest rates were seen in Addington, North & Central Frontenac (160 per 10,000) and in Tyendinaga, Napanee (151 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 10 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.

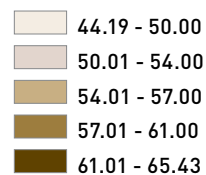
Technical note: Adults were defined as those aged 20 years and older. Rates were age- and sex-standardized using the same-aged population in the Ontario Diabetes Database on March 31, 2006 as the standard population.

EXHIBIT 10.8

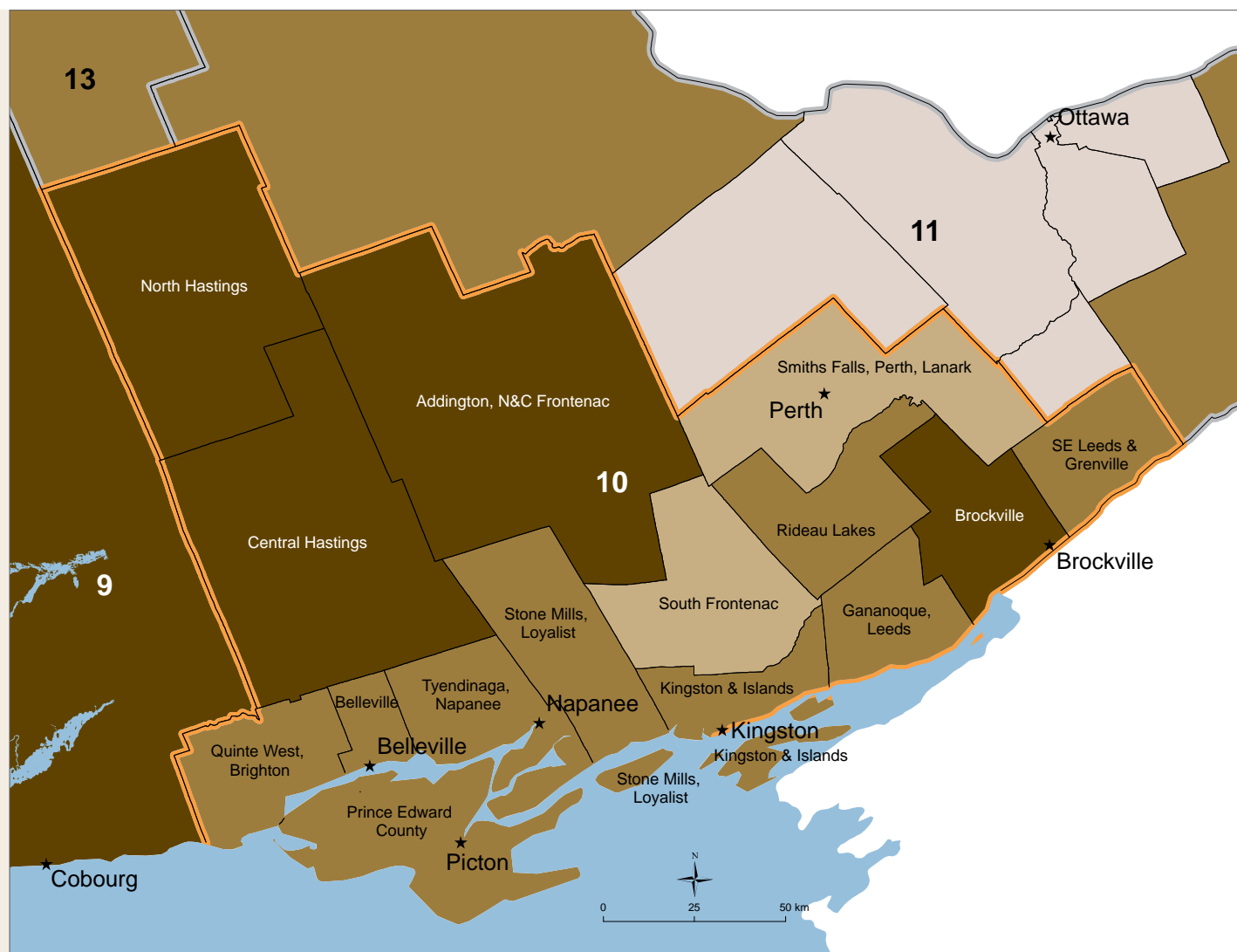
Number, per 100 adults with diabetes, who had an additional chronic medical condition in the South East LHIN (10), by subLHIN, 2006/07–2008/09

KEY FINDINGS

- In the South East LHIN overall, about 59 of every 100 adults with diabetes had at least one chronic medical condition besides diabetes between 2006/07 and 2008/09. This rate (59.43 per 100) was higher than the provincial average (54.84 per 100).
- The highest rates (above 61.00 per 100) were clustered in three northwestern subLHINs (North Hastings; Central Hastings; and Addington, North & Central Frontenac) and in Brockville.

NUMBER PER 100 ADULTS WITH DIABETES

- subLHIN boundary
- LHIN boundary
- LHIN 10 boundary



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

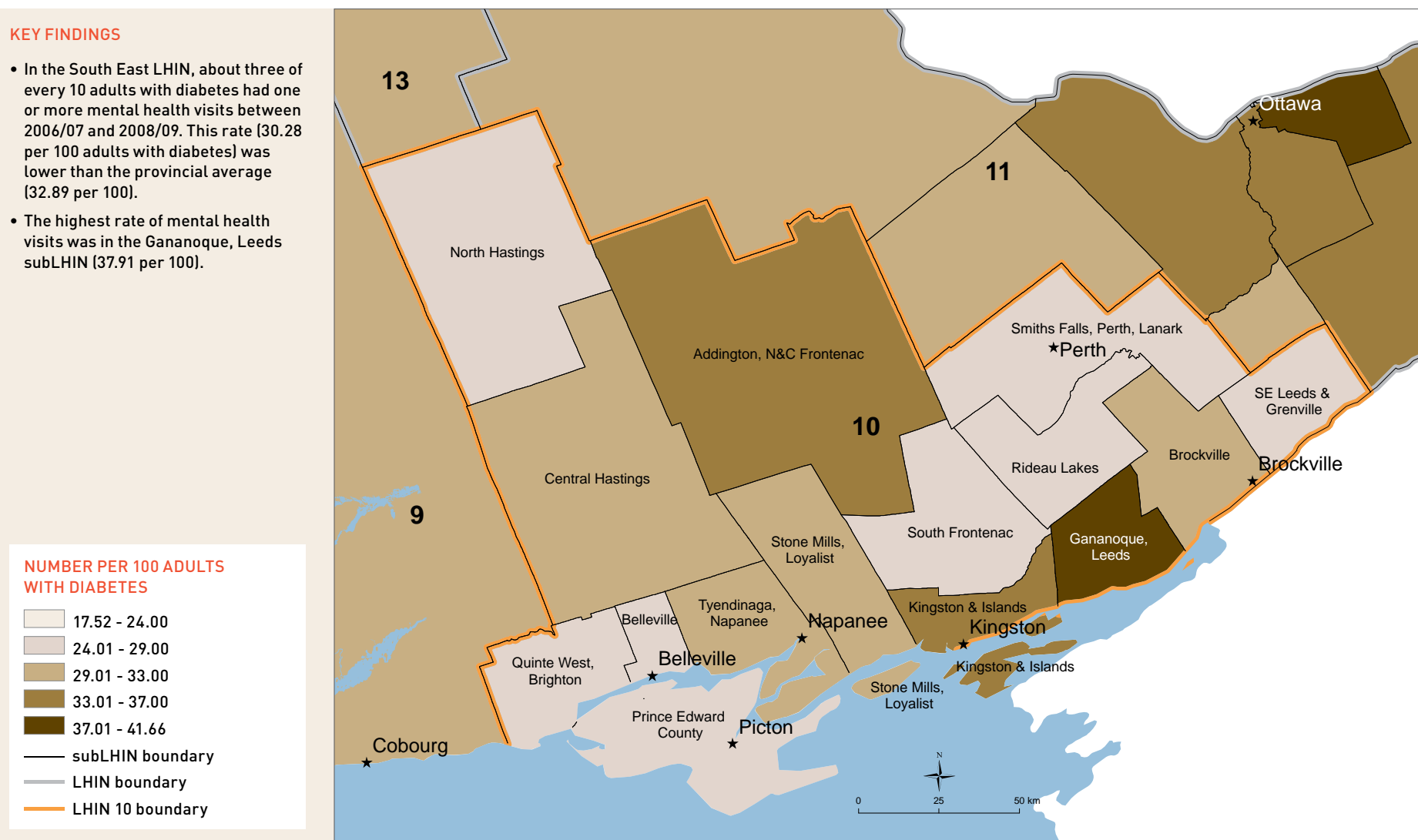
Technical note: Adults were defined as those aged 20 years and older. Rates were age- and sex-standardized using the same-aged population in the Ontario Diabetes Database on March 31, 2006 as the standard population.

EXHIBIT 10.9

Number, per 100 adults with diabetes, who made a mental health visit for a psychotic or nonpsychotic illness in the South East LHIN (10), by subLHIN, 2006/07–2008/09

KEY FINDINGS

- In the South East LHIN, about three of every 10 adults with diabetes had one or more mental health visits between 2006/07 and 2008/09. This rate (30.28 per 100 adults with diabetes) was lower than the provincial average (32.89 per 100).
- The highest rate of mental health visits was in the Gananoque, Leeds subLHIN (37.91 per 100).



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 10.10

Percentage of economic families with low income in the South East LHIN (10), by subLHIN, 2005

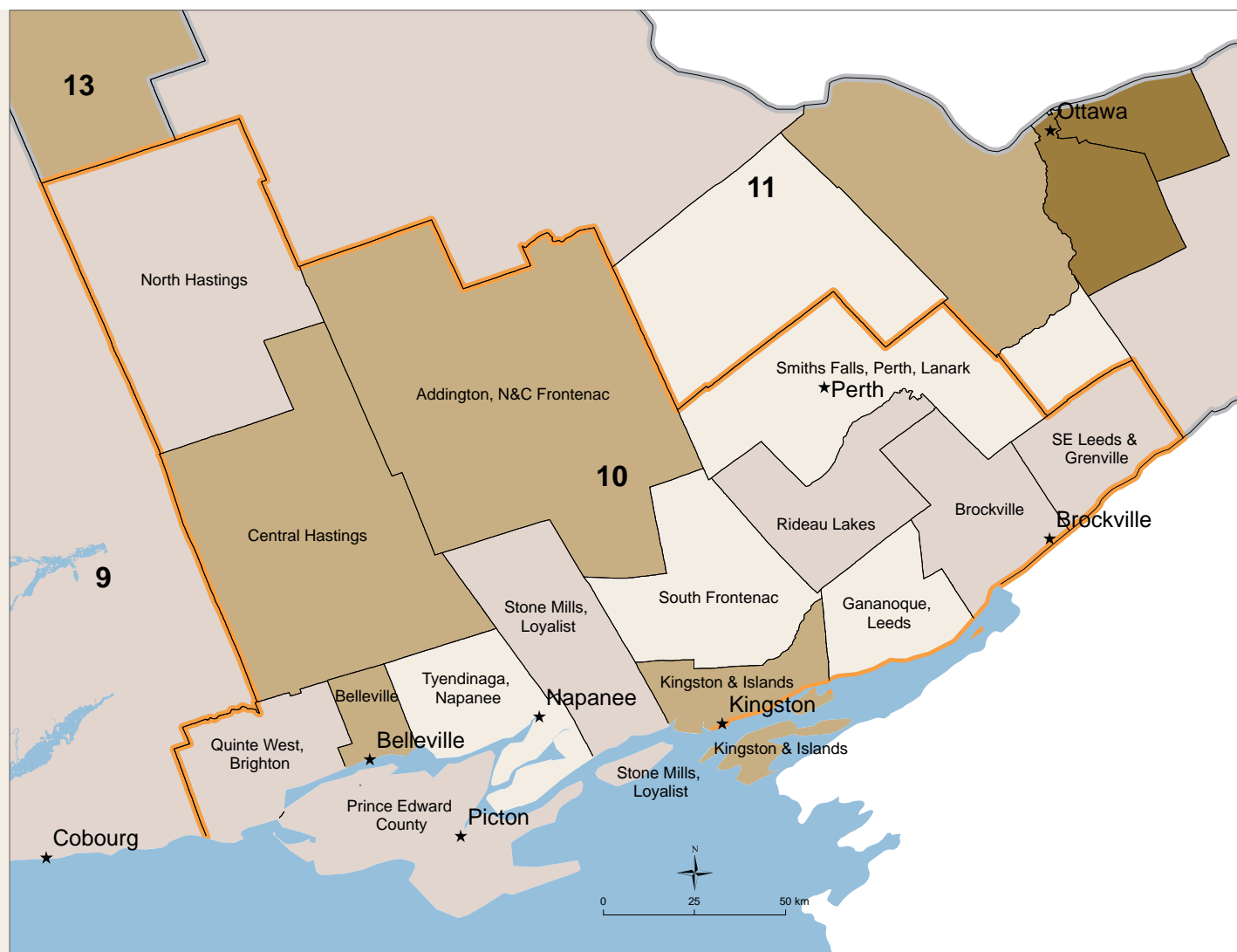
KEY FINDINGS

- In the South East LHIN overall, about six of every 100 families were living with low income in 2005. This percentage (5.6%) was notably lower than the provincial average of 8.6% of families.
- Higher levels of low income (although still below the provincial average) were seen in a number of subLHINs in the northwest and south parts of the LHIN.

PERCENTAGE OF LOW-INCOME ECONOMIC FAMILIES

- 2.2 - 4.0
- 4.1 - 6.0
- 6.1 - 8.0
- 8.1 - 14.0
- 14.1 - 25.3

- subLHIN boundary
- LHIN boundary
- LHIN 10 boundary

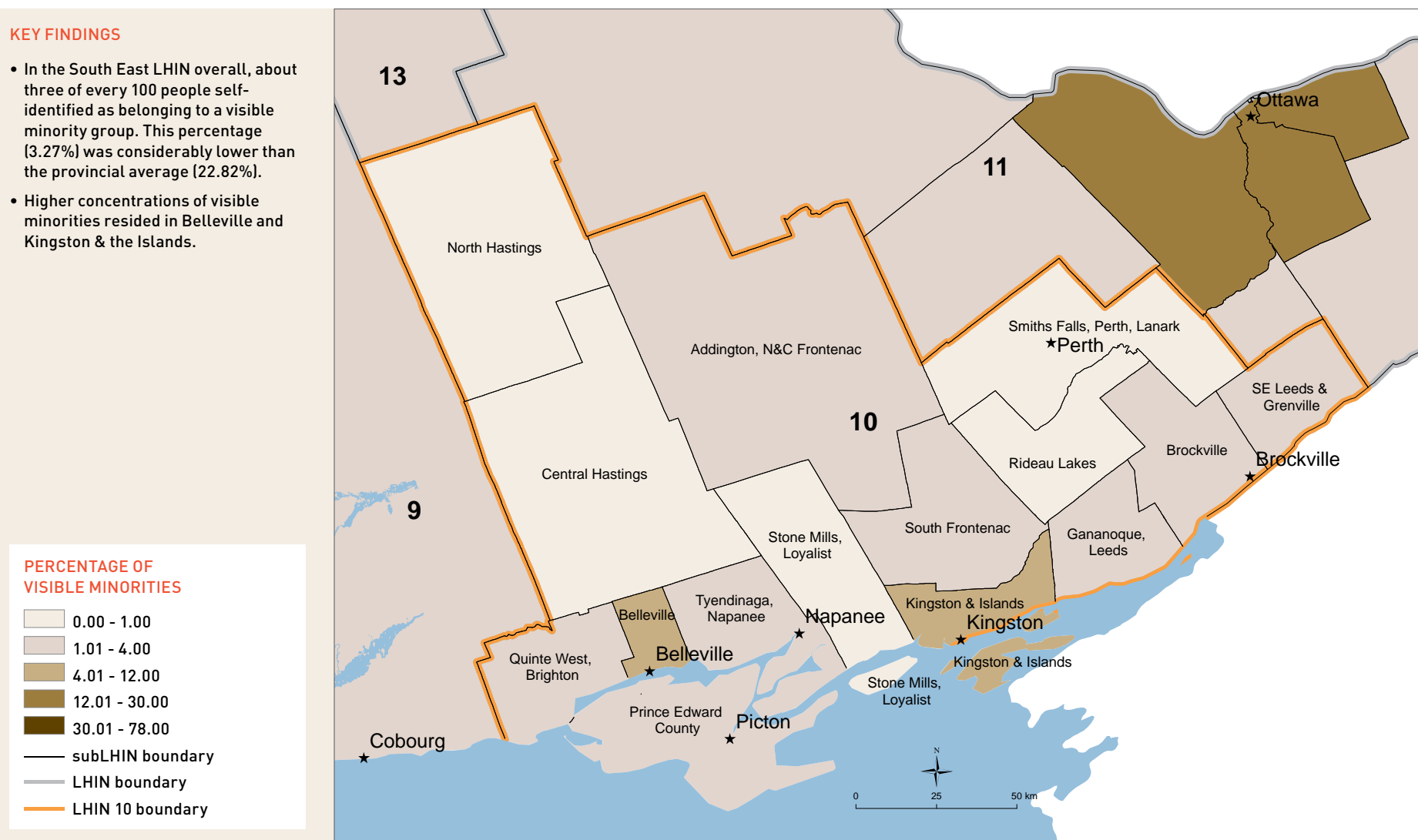


Data source: 2006 Census of Canada.

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 10.11**Percentage of visible minorities in the South East LHIN (10), by subLHIN, 2006****KEY FINDINGS**

- In the South East LHIN overall, about three of every 100 people self-identified as belonging to a visible minority group. This percentage (3.27%) was considerably lower than the provincial average (22.82%).
- Higher concentrations of visible minorities resided in Belleville and Kingston & the Islands.



Data source: 2006 Census of Canada.

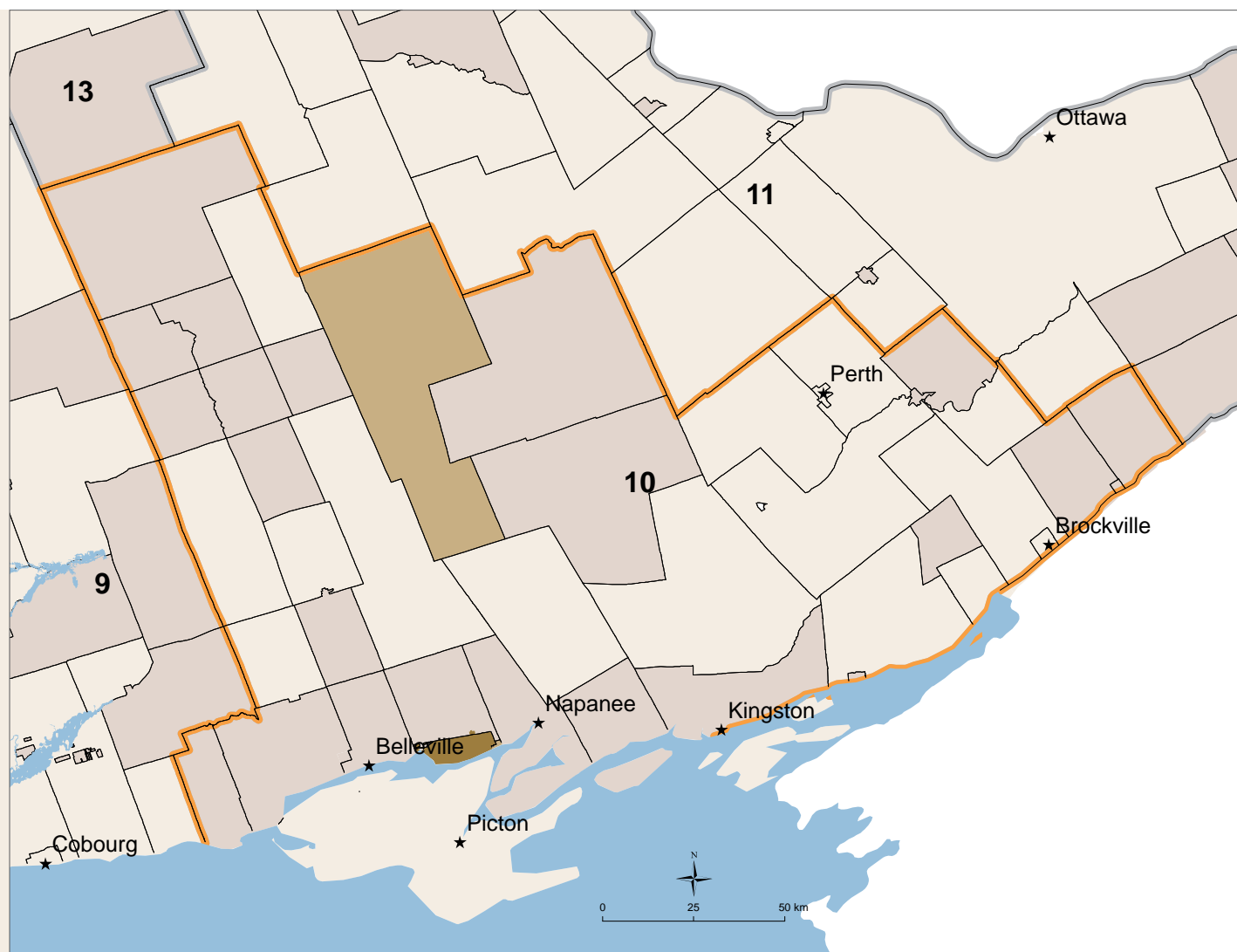
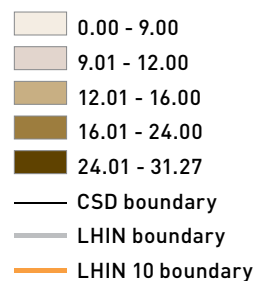
Technical note: Visible minorities include persons other than Aboriginal peoples who are non-Caucasian in race or non-white in colour.

EXHIBIT 10.12

Diabetes prevalence per 100 adults in the South East LHIN (10), by census subdivision, on March 31, 2011

KEY FINDINGS

- In most census subdivisions (CSDs) in the South East LHIN, the number of adults per 100 living with diabetes was in a range similar to the LHIN average (9.13 per 100) and the provincial average (9.64 per 100).
- Higher-than-average levels of diabetes prevalence were seen in a large, mostly rural CSD in the northwestern part of the LHIN and in the Tyendinaga Mohawk Territory east of Belleville.

INCIDENCE PER 100 ADULTS

Data sources: Ontario Diabetes Database; Registered Persons Database.

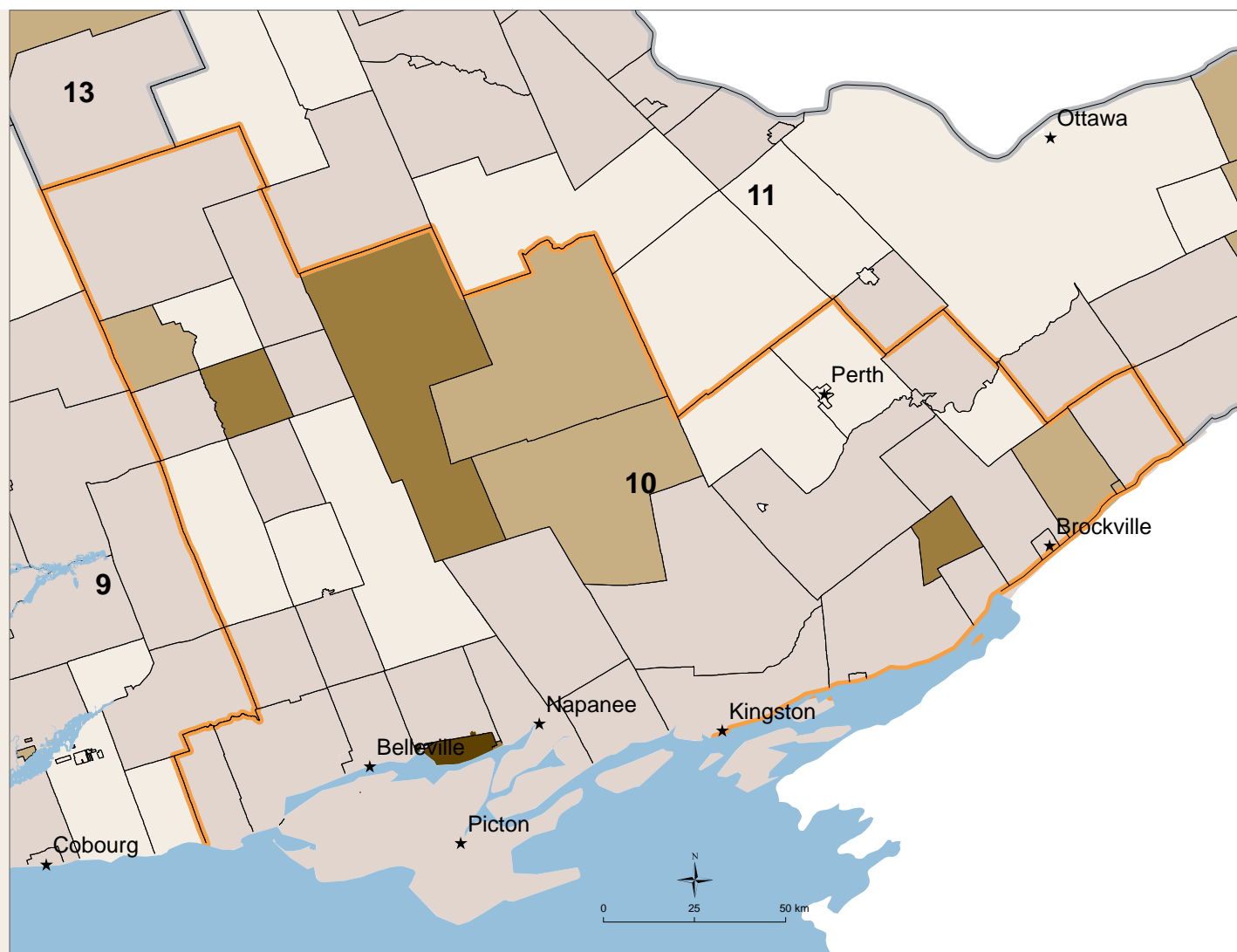
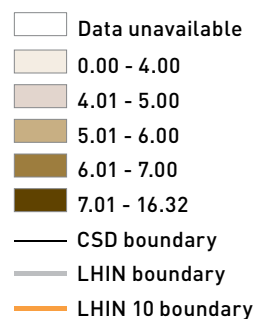
Technical note: Adults were defined as those aged 20 years and older. Rates were age- and sex-standardized using the 2001 Ontario population of the same age as the standard population.

EXHIBIT 10.13

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

KEY FINDINGS

- Across 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 (4.46 per 100 adults) and the provincial average (4.85 per 100 adults).
- The highest rate of diabetes incidence was seen in the Tyendinaga Mohawk Territory east of Belleville. Higher-than-average rates were also found in largely rural CSDs in the northwest, north-central and southeast parts of the LHIN.

INCIDENCE PER 100 ADULTS

Data sources: Ontario Diabetes Database; Registered Persons Database.

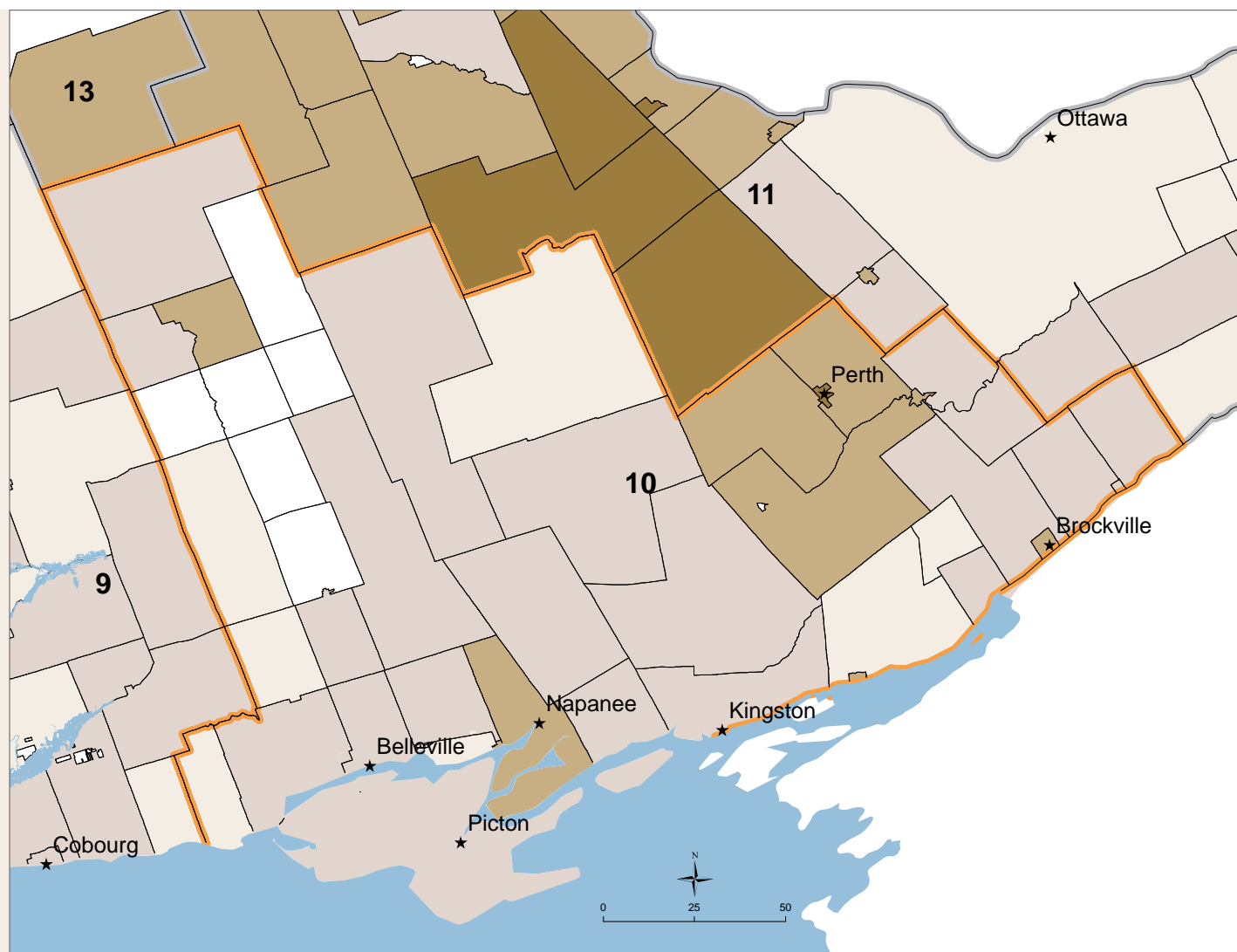
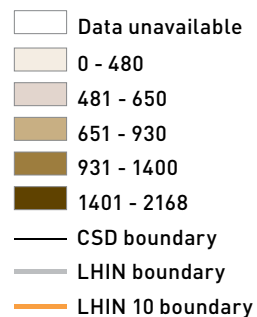
Technical note: Adults were defined as those aged 20 years and older. Rates were age- and sex-standardized using the 2001 Ontario population of the same age as the standard population.

EXHIBIT 10.14

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

KEY FINDINGS

- In most census subdivisions (CSDs), rates of hospitalizations or emergency department (ED) visits for hyper- or hypoglycemia were similar to the LHIN average (613 per 10,000 adults with diabetes) and the provincial average (486 per 10,000).
- Higher rates of hospitalizations/ED visits were found in Perth and surrounding communities along the southeast LHIN border in Brockville, Gananoque (east of Kingston) and Greater Napanee, and in a largely rural CSD in the northwest part of the LHIN.

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.

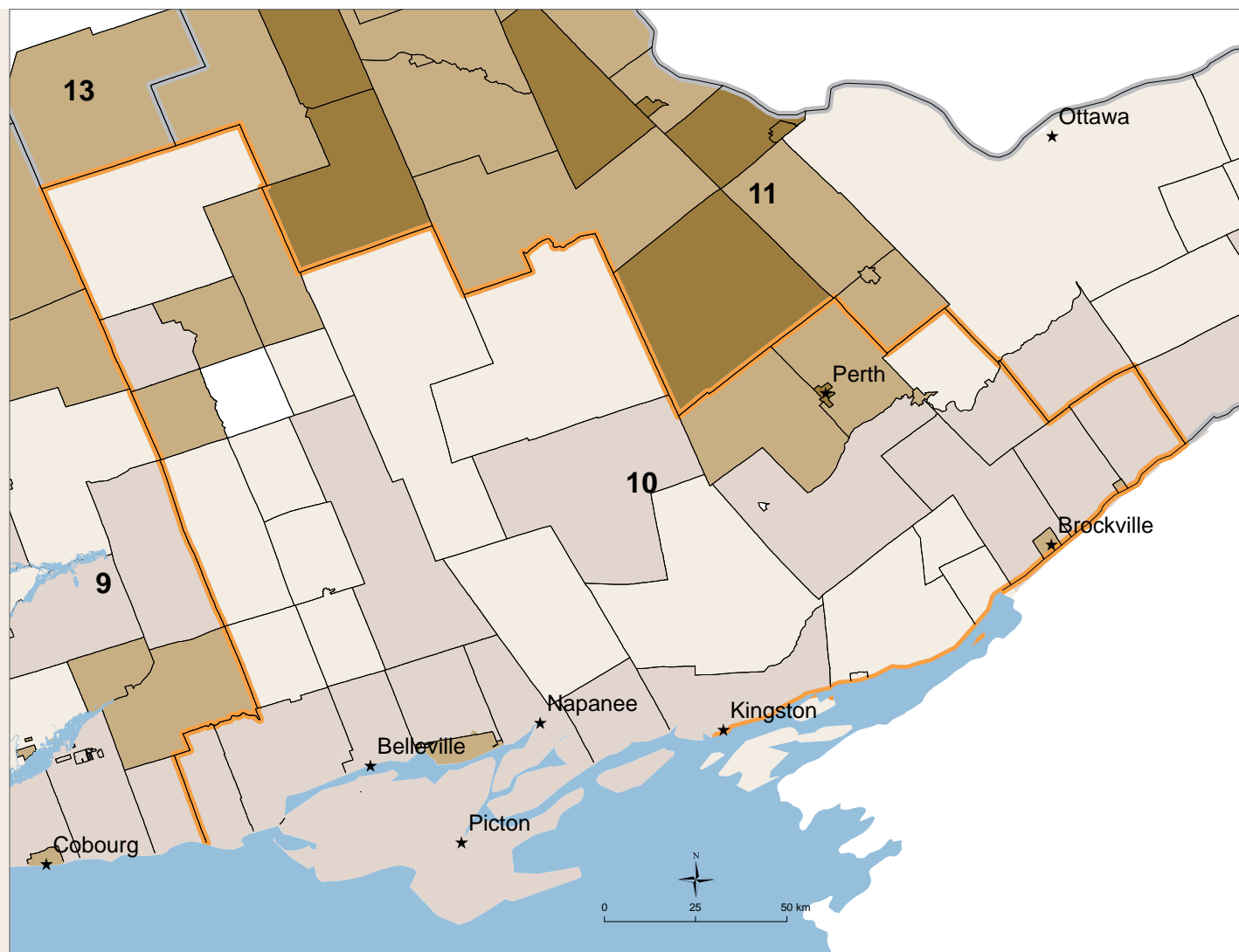
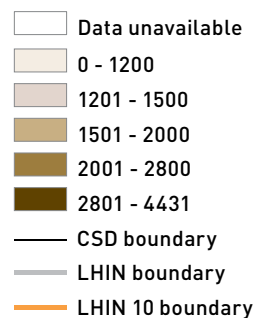
Technical note: Adults were defined as those aged 20 years and older. Rates were age- and sex-standardized using the same-aged population in the Ontario Diabetes Database on March 31, 2006 as the standard population.

EXHIBIT 10.15

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

KEY FINDINGS

- Between 2006/07 and 2010/11, rates of hospitalizations or emergency department (ED) visits for acute complications in the majority of census subdivisions (CSDs) were in the same range as the LHIN average (1,323 per 10,000 adults with diabetes) and the provincial average (1,029 per 10,000).
- The highest rates of hospitalizations/ED visits in the LHIN were found in Perth. Higher-than-average rates were noted in the CSDs surrounding Perth, as well as in Brockville, the Tyendinaga Mohawk Territory east of Belleville, and several largely rural CSDs in the northwest part of LHIN.

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.

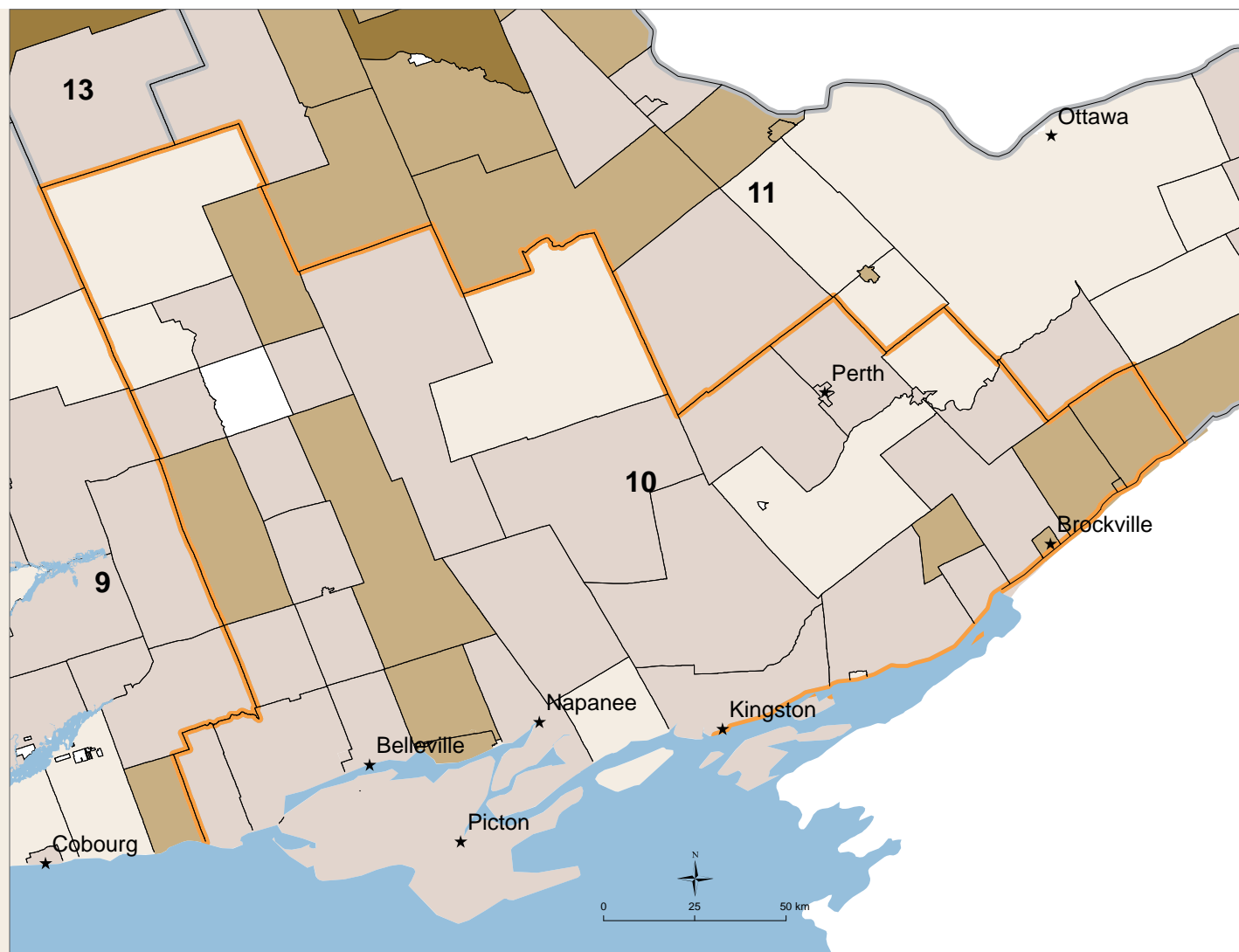
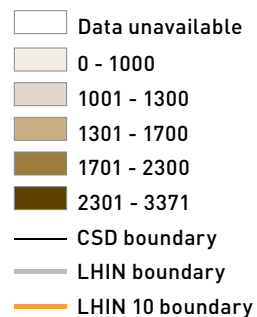
Technical notes: Adults were defined as those aged 20 years and older. Rates were age- and sex-standardized using the same-aged population in the Ontario Diabetes Database on March 31, 2006 as the standard population. Acute complications consisted of hyper- or hypoglycemia, skin and soft tissue infection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

EXHIBIT 10.16

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

KEY FINDINGS

- Between 2006/07 and 2010/11, rates of chronic complications in all census subdivisions (CSDs) were in the same range as the LHIN average (1,137 per 10,000 adults with diabetes) and the provincial average (1,016 per 10,000).
- Higher rates of chronic complications were seen in a number of CSDs in the west, northwest and southeast parts of 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.

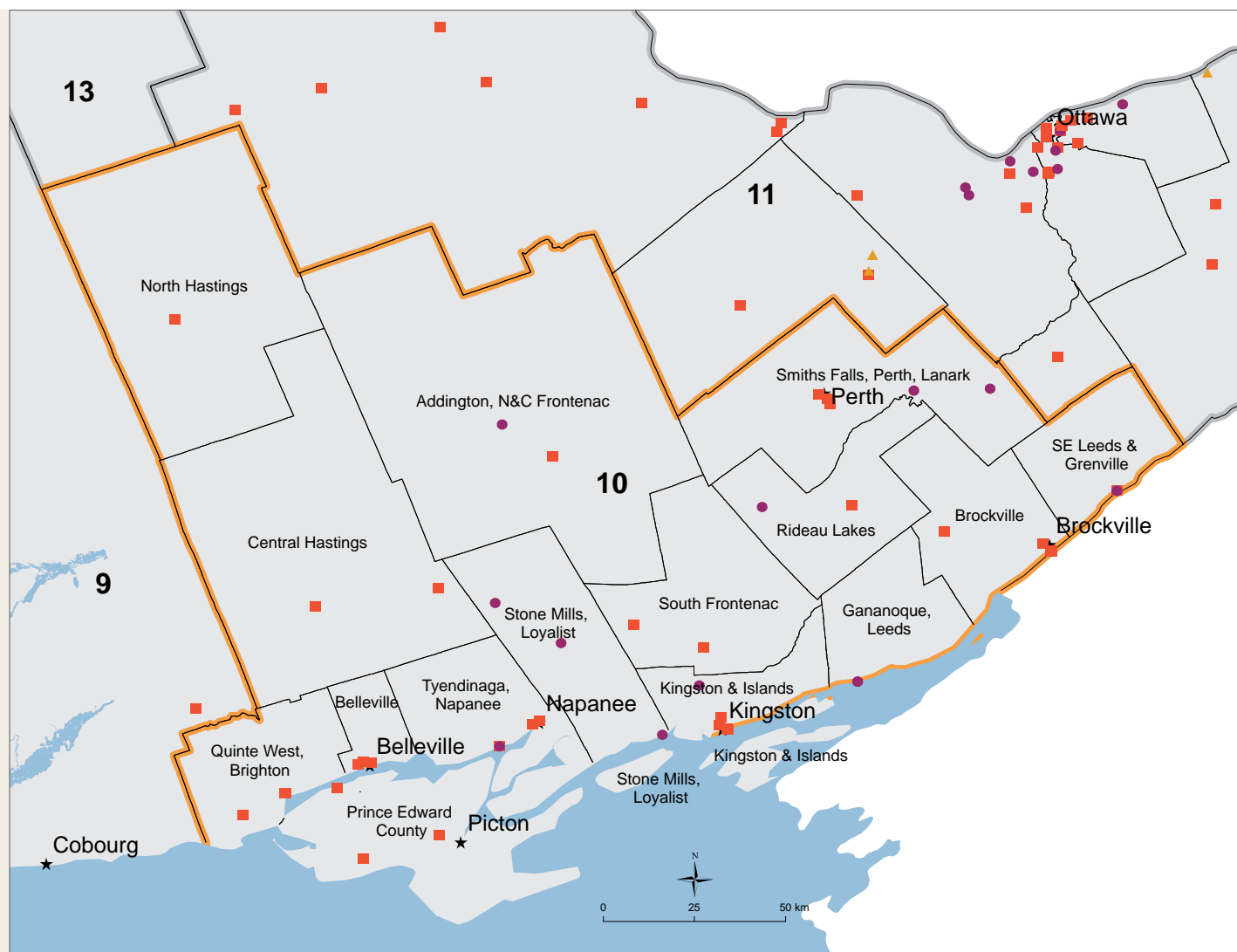
Technical note: Adults were defined as those aged 20 years and older. Rates were age- and sex-standardized using the same-aged population in the Ontario Diabetes Database on March 31, 2006 as the standard population. A chronic complication consisted of hospitalization for a cardiovascular condition or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

EXHIBIT 10.17**Locations of diabetes education programs in the South East LHIN (10), by subLHIN, 2011****KEY FINDINGS**

- Main diabetes education programs were generally well distributed across the South East LHIN, with some clustering in or near larger urban centres, such as Kingston and Brockville. At least one such program was located in every subLHIN.
- Diabetes education program satellites were less numerous but were distributed more widely across the LHIN.
- There were no outreach programs in the South East LHIN.

TYPE OF PROGRAM

- Main program
- Program satellite
- ▲ Outreach program
- subLHIN boundary
- LHIN boundary
- LHIN 10 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 10.18

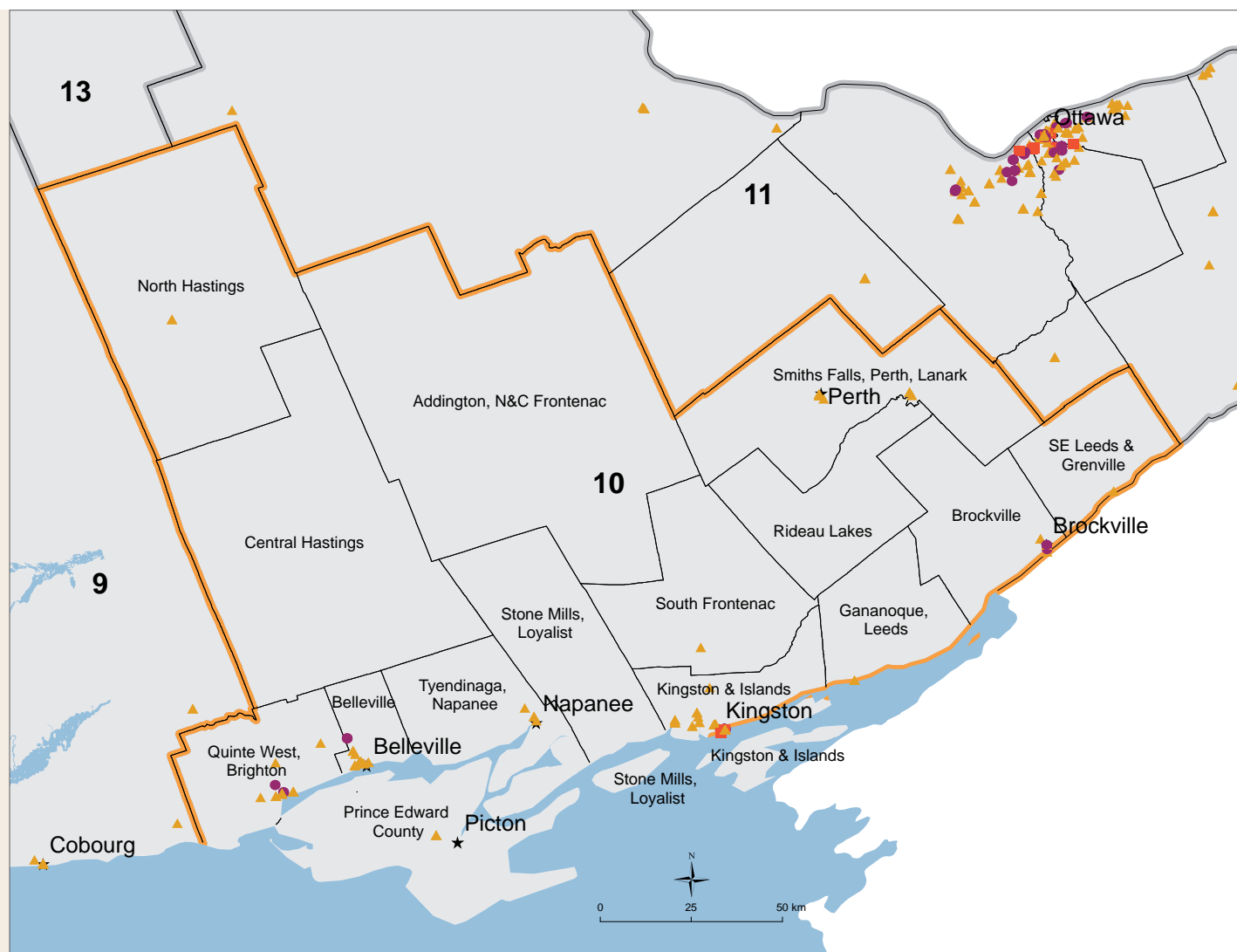
Locations of endocrinologists and eye specialists in the South East LHIN (10), by subLHIN, 2010/11

KEY FINDINGS

- Endocrinology practices were found only in Kingston.
- Eye specialists (ophthalmologists and optometrists) were generally clustered in or near major urban areas, with the majority of located along the southern border of the LHIN.
- Optometrists were more numerous and more widely distributed across the LHIN compared with endocrinologists and ophthalmologists.

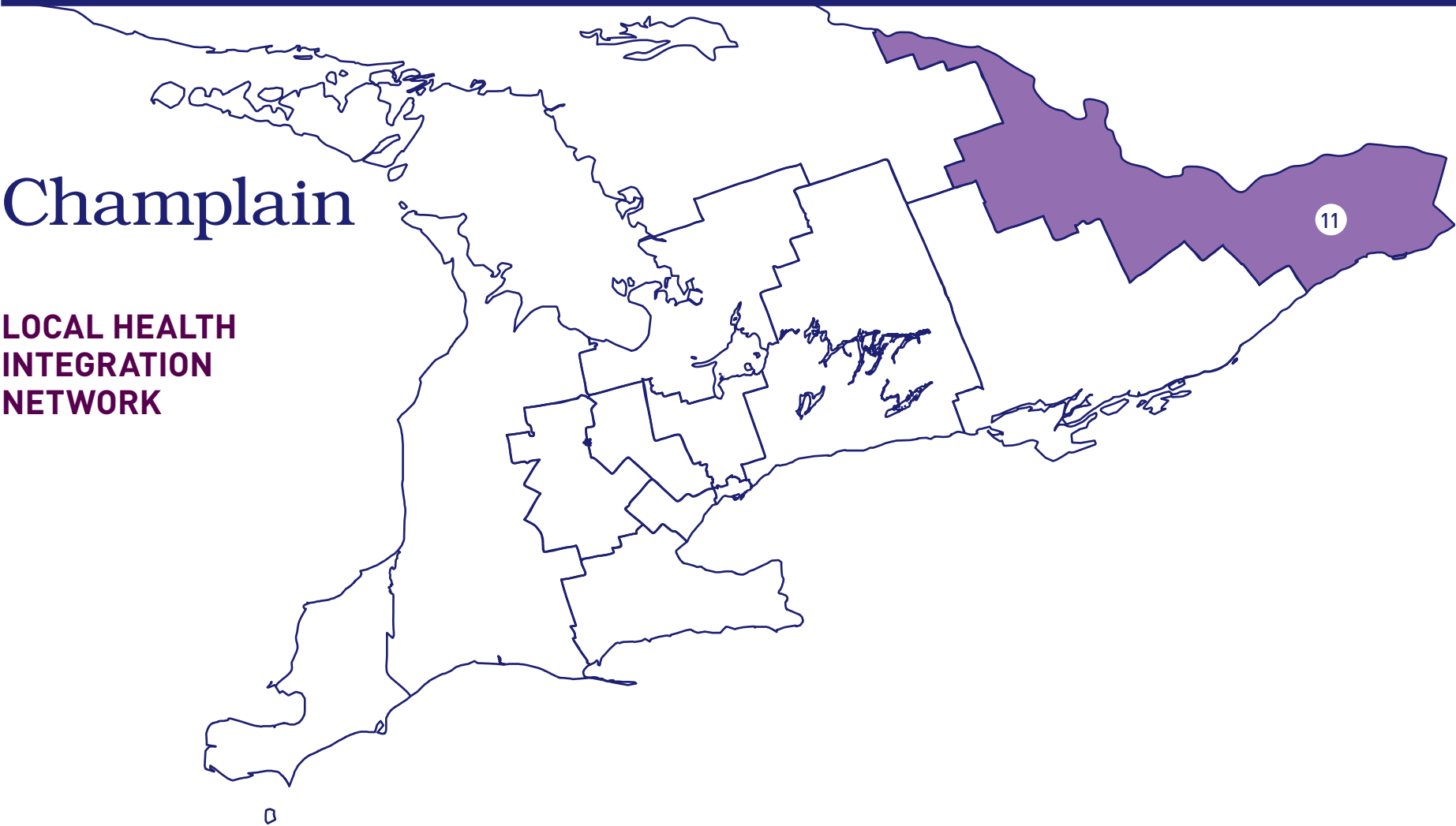
TYPE OF SPECIALIST

- Endocrinologist
- Ophthalmologist
- ▲ Optometrist
- subLHIN boundary
- LHIN boundary
- LHIN 10 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.



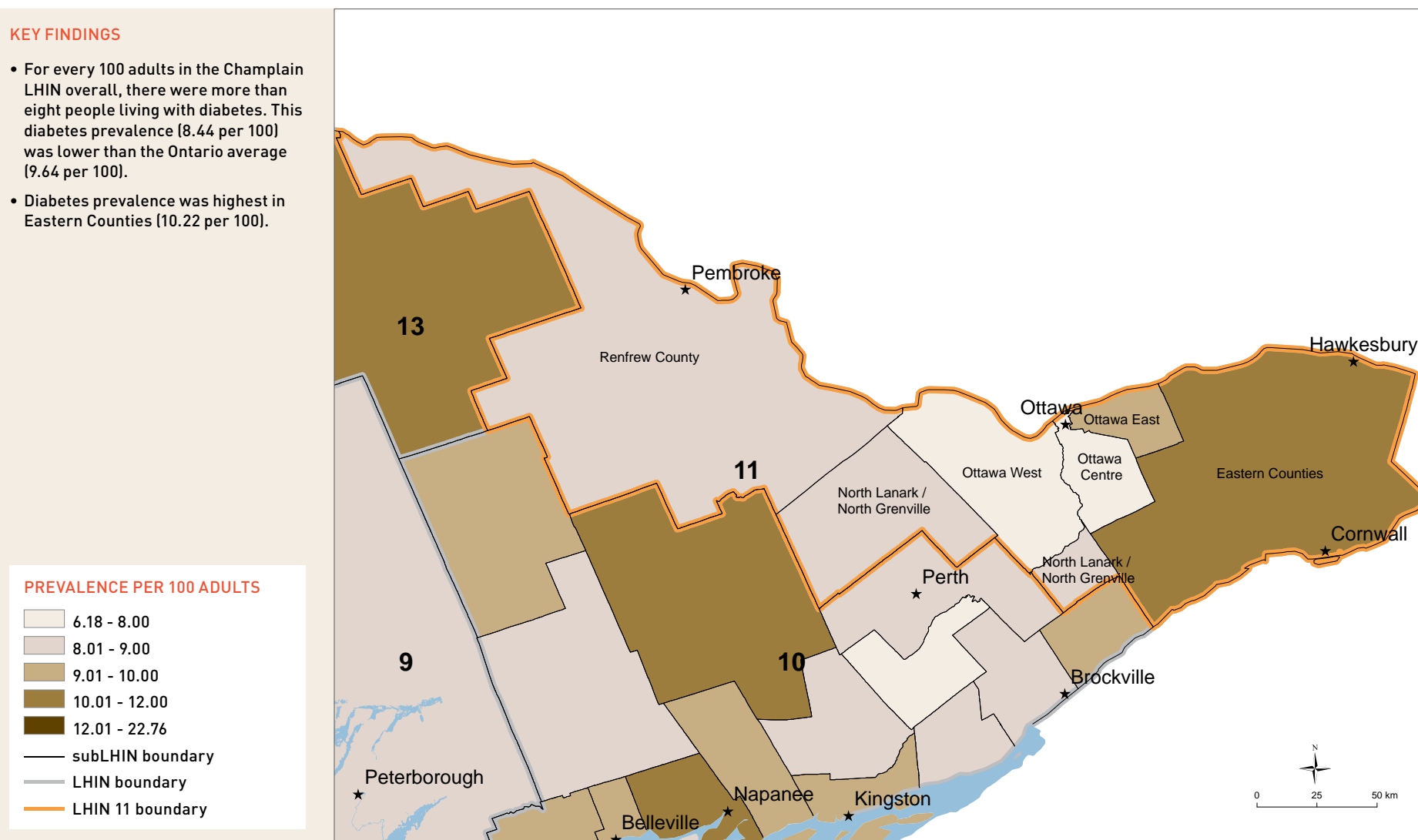
Diabetes Measures by Region

EXHIBIT 11.1

Diabetes prevalence per 100 adults in the Champlain LHIN (11), by subLHIN, on March 31, 2011

KEY FINDINGS

- For every 100 adults in the Champlain LHIN overall, there were more than eight people living with diabetes. This diabetes prevalence (8.44 per 100) was lower than the Ontario average (9.64 per 100).
- Diabetes prevalence was highest in Eastern Counties (10.22 per 100).



Data sources: Ontario Diabetes Database; Registered Persons Database.

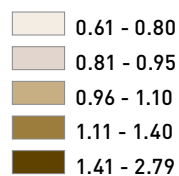
Technical note: Adults were defined as those aged 20 years and older. Rates were age- and sex-standardized using the 2001 Ontario population of the same age as the standard population.

EXHIBIT 11.2

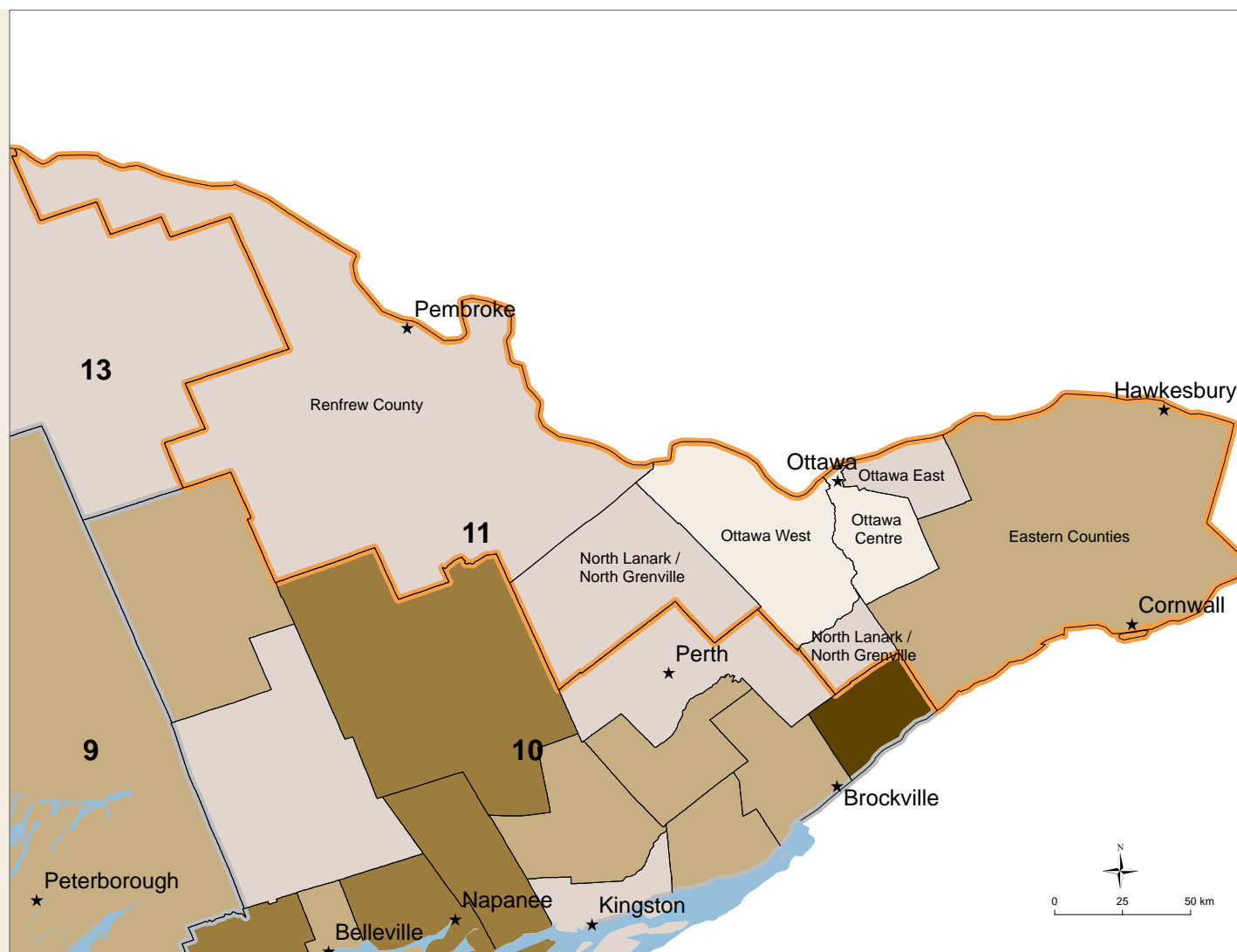
Diabetes incidence per 100 adults in the Champlain LHIN (11), by subLHIN, 2009/10

KEY FINDINGS

- For every 100 adults living in the Champlain LHIN who were free of diabetes in March 2009, approximately one was diagnosed with diabetes in the subsequent year. This incidence rate (0.82 per 100) was lower than that of Ontario as a whole (0.97 per 100 adults).
- Diabetes incidence was highest in Eastern Counties (1.08 per 100) and lowest in Ottawa Centre (0.66 per 100).

INCIDENCE PER 100 ADULTS

— subLHIN boundary
 — LHIN boundary
 — LHIN 11 boundary



Data sources: Ontario Diabetes Database; Registered Persons Database.

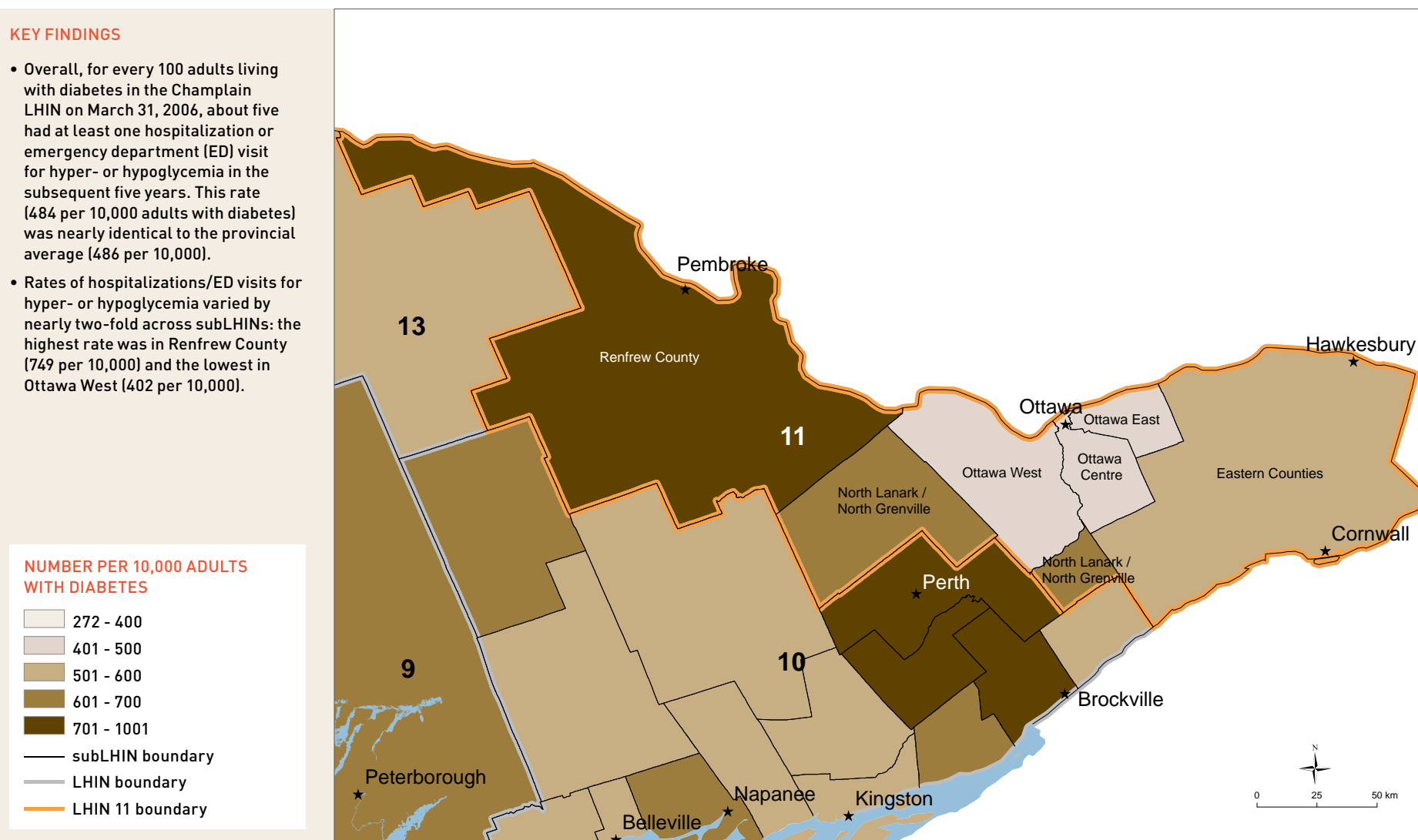
Technical note: Adults were defined as those aged 20 years and older. Rates were age- and sex-standardized using the 2001 Ontario population of the same age as the standard population.

EXHIBIT 11.3

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

KEY FINDINGS

- Overall, for every 100 adults living with diabetes in the Champlain LHIN on March 31, 2006, about five had at least one hospitalization or emergency department (ED) visit for hyper- or hypoglycemia in the subsequent five years. This rate (484 per 10,000 adults with diabetes) was nearly identical to the provincial average (486 per 10,000).
- Rates of hospitalizations/ED visits for hyper- or hypoglycemia varied by nearly two-fold across subLHINs: the highest rate was in Renfrew County (749 per 10,000) and the lowest in Ottawa West (402 per 10,000).



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

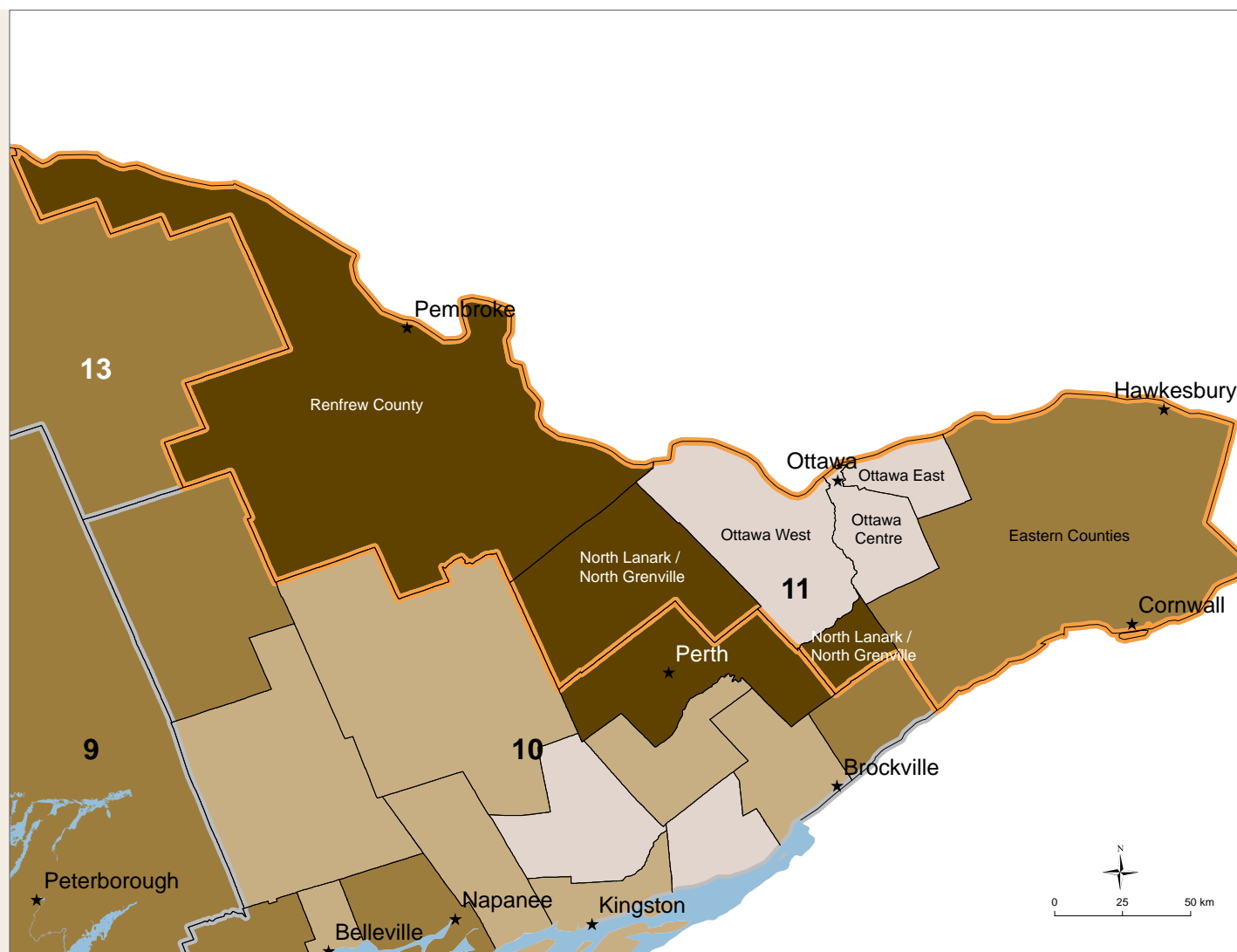
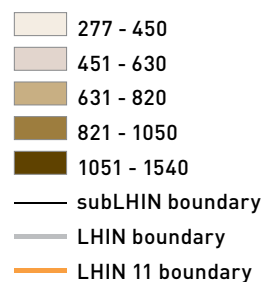
Technical note: Adults were defined as those aged 20 years and older. Rates were age- and sex-standardized using the same-aged population in the Ontario Diabetes Database on March 31, 2006 as the standard population.

EXHIBIT 11.4

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 Champlain LHIN (11), by subLHIN, 2006/07–2010/11

KEY FINDINGS

- For every 100 adults with diabetes in the Champlain 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 (677 per 10,000 adults with diabetes) was somewhat higher than the provincial average (618 per 10,000).
- Rates varied by more than two-fold across subLHINs. The highest rates were in Renfrew County (1,256 per 10,000) and North Lanark/North Grenville (1,145 per 10,000) and the lowest were in the subLHINs surrounding Ottawa.

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 11.5

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

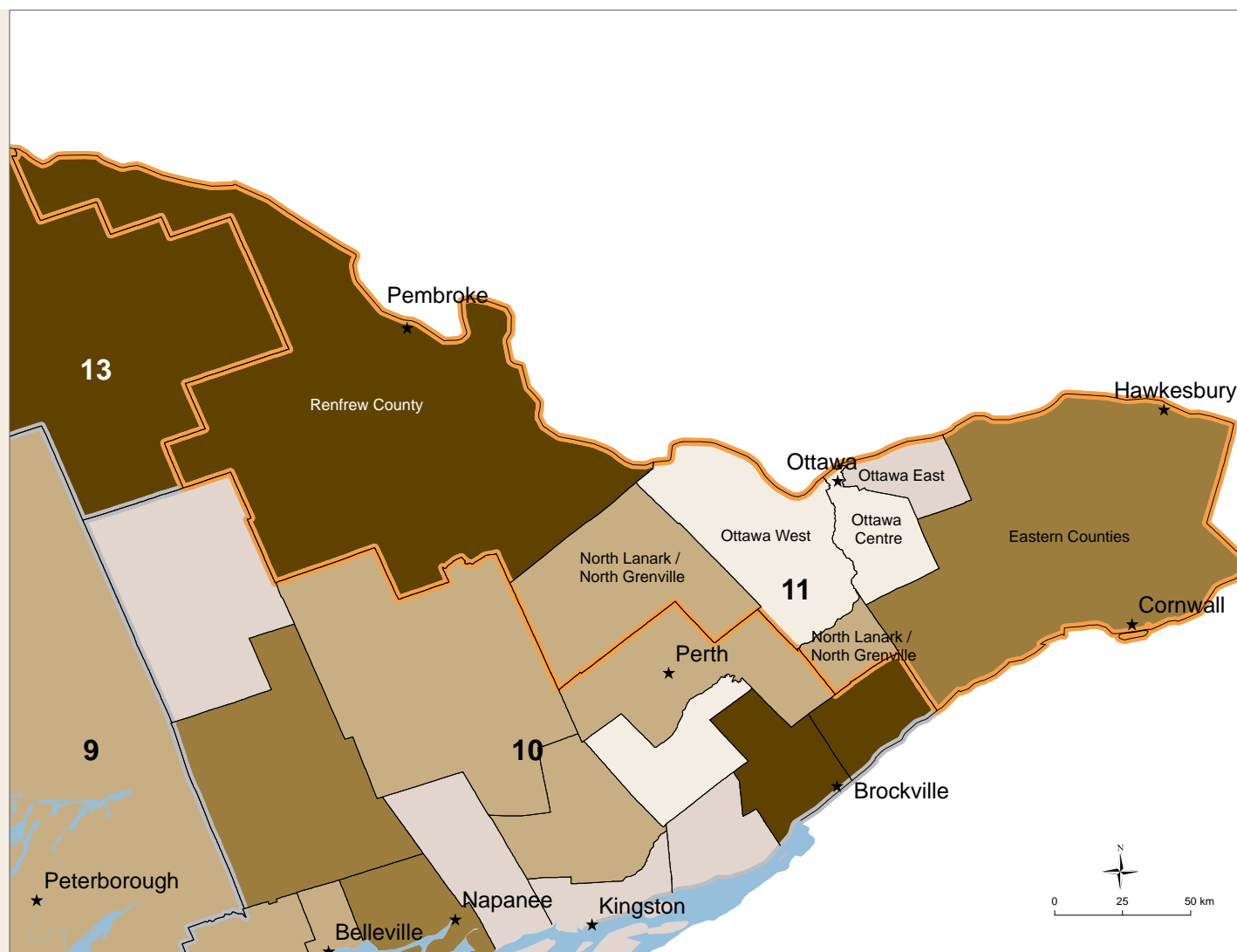
KEY FINDINGS

- Approximately nine of 100 adults with diabetes in the Champlain LHIN in 2006 were hospitalized for a cardiovascular condition at least once in the ensuing five years. This rate (873 per 10,000 adults with diabetes) was slightly lower than the provincial average (888 per 10,000).
- Rates of hospitalization varied across subLHINs by more than 1.5-fold: the highest rate was in Renfrew County (1,204 per 10,000) and the lowest in Ottawa Centre (727 per 10,000).

NUMBER PER 10,000 ADULTS WITH DIABETES

- 567 - 760
- 761 - 880
- 881 - 1020
- 1021 - 1200
- 1201 - 1446

- subLHIN boundary
- LHIN boundary
- LHIN 11 boundary



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

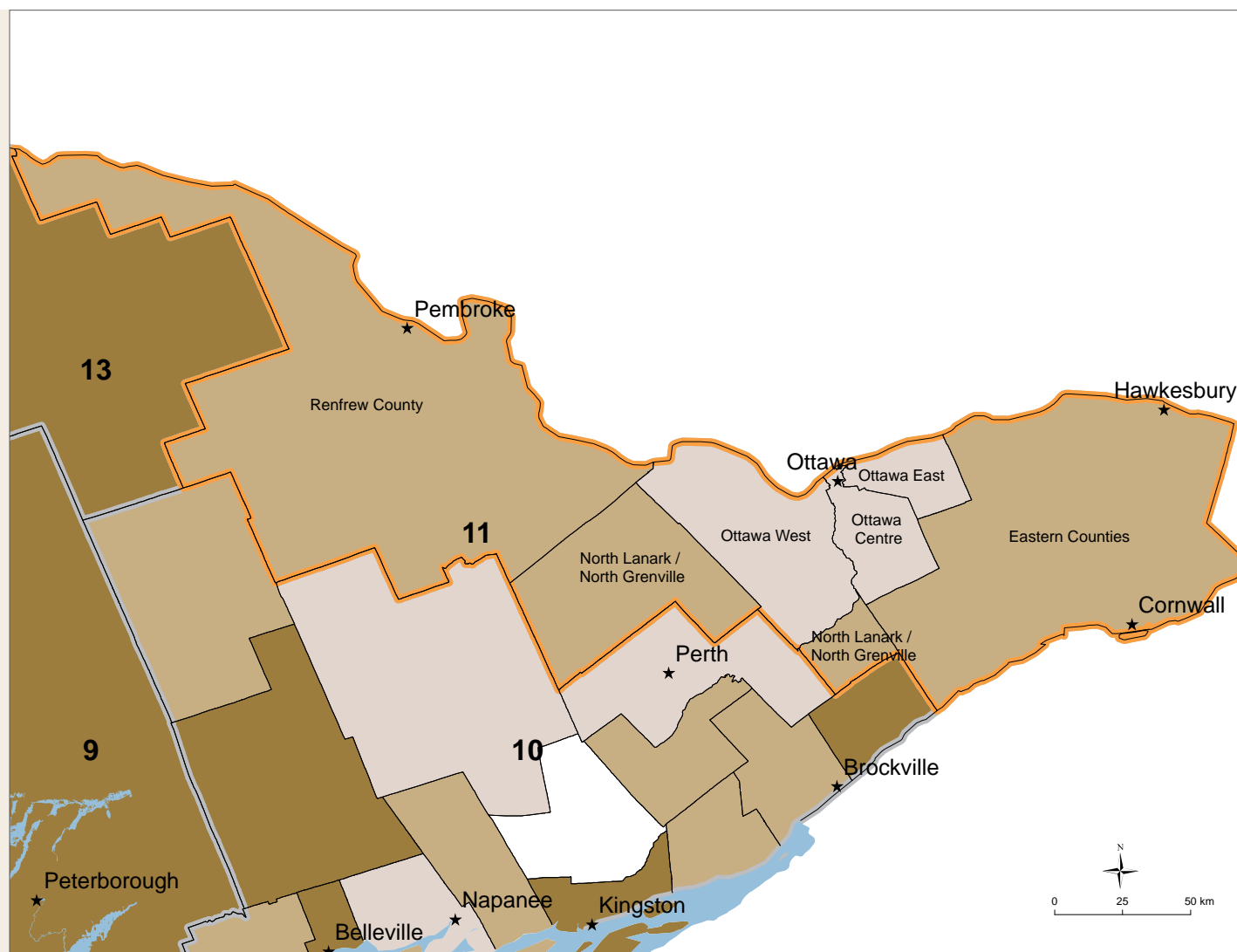
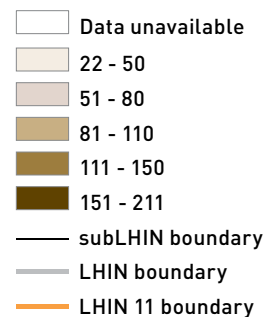
Technical notes: Adults were defined as those aged 20 years and older. Rates were age- and sex-standardized using the same-aged population in the Ontario Diabetes Database on March 31, 2006 as the standard population. Cardiovascular conditions included myocardial infarction, stroke, congestive heart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

EXHIBIT 11.6

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

KEY FINDINGS

- In the Champlain LHIN overall, eight of every 1,000 adults with diabetes experienced a lower extremity amputation between 2006/07 and 2010/11. This rate (80 per 10,000 adults with diabetes) was slightly higher than the Ontario average (74 per 10,000).
- There was some variation in amputation rates across subLHINs. The highest rate was in North Lanark/North Grenville (102 per 10,000) and the lowest in Ottawa East (70 per 10,000).

NUMBER PER 10,000 ADULTS WITH DIABETES

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

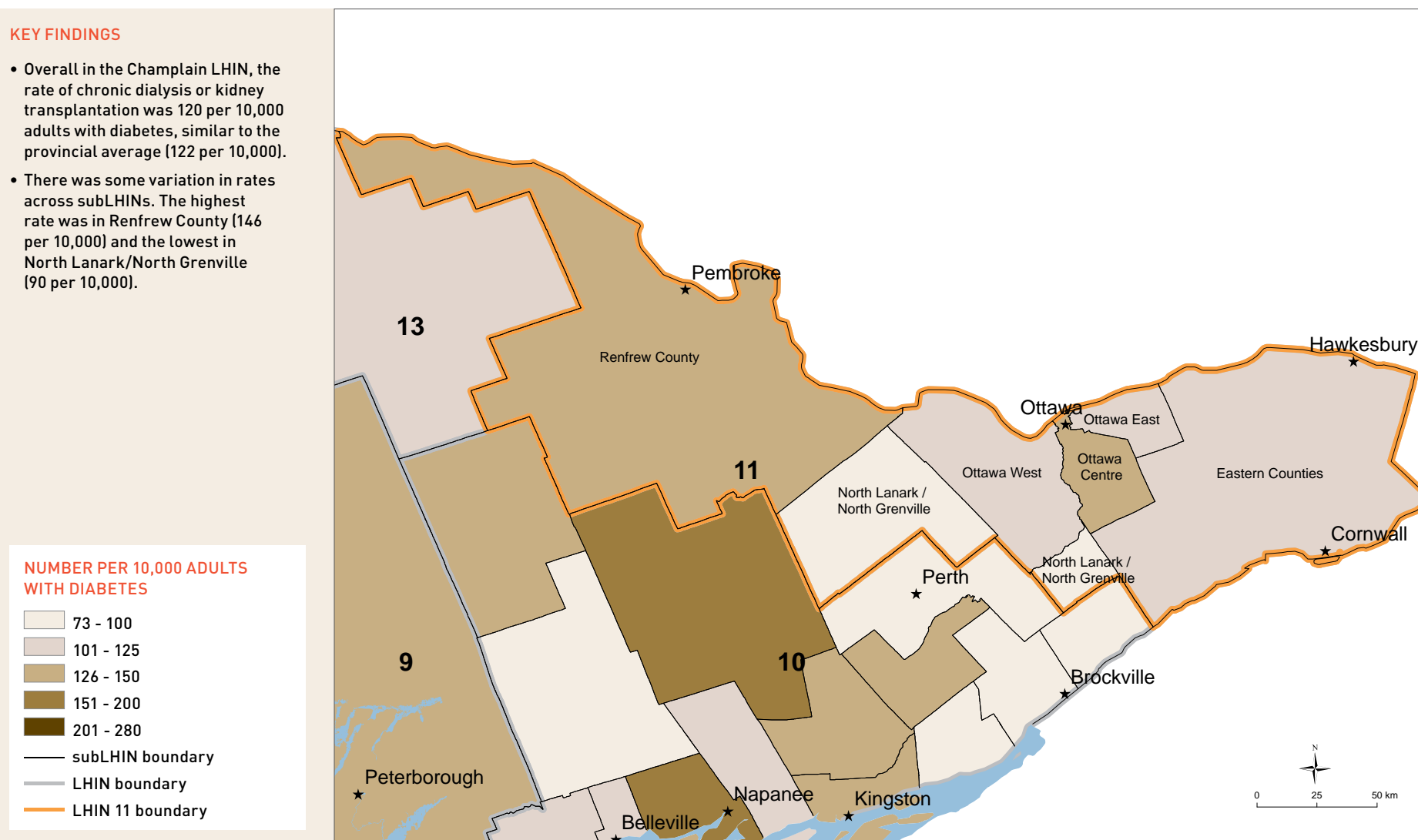
Technical note: Adults were defined as those aged 20 years and older. Rates were age- and sex-standardized using the same-aged population in the Ontario Diabetes Database on March 31, 2006 as the standard population.

EXHIBIT 11.7

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

KEY FINDINGS

- Overall in the Champlain LHIN, the rate of chronic dialysis or kidney transplantation was 120 per 10,000 adults with diabetes, similar to the provincial average (122 per 10,000).
- There was some variation in rates across subLHINs. The highest rate was in Renfrew County (146 per 10,000) and the lowest in North Lanark/North Grenville (90 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.

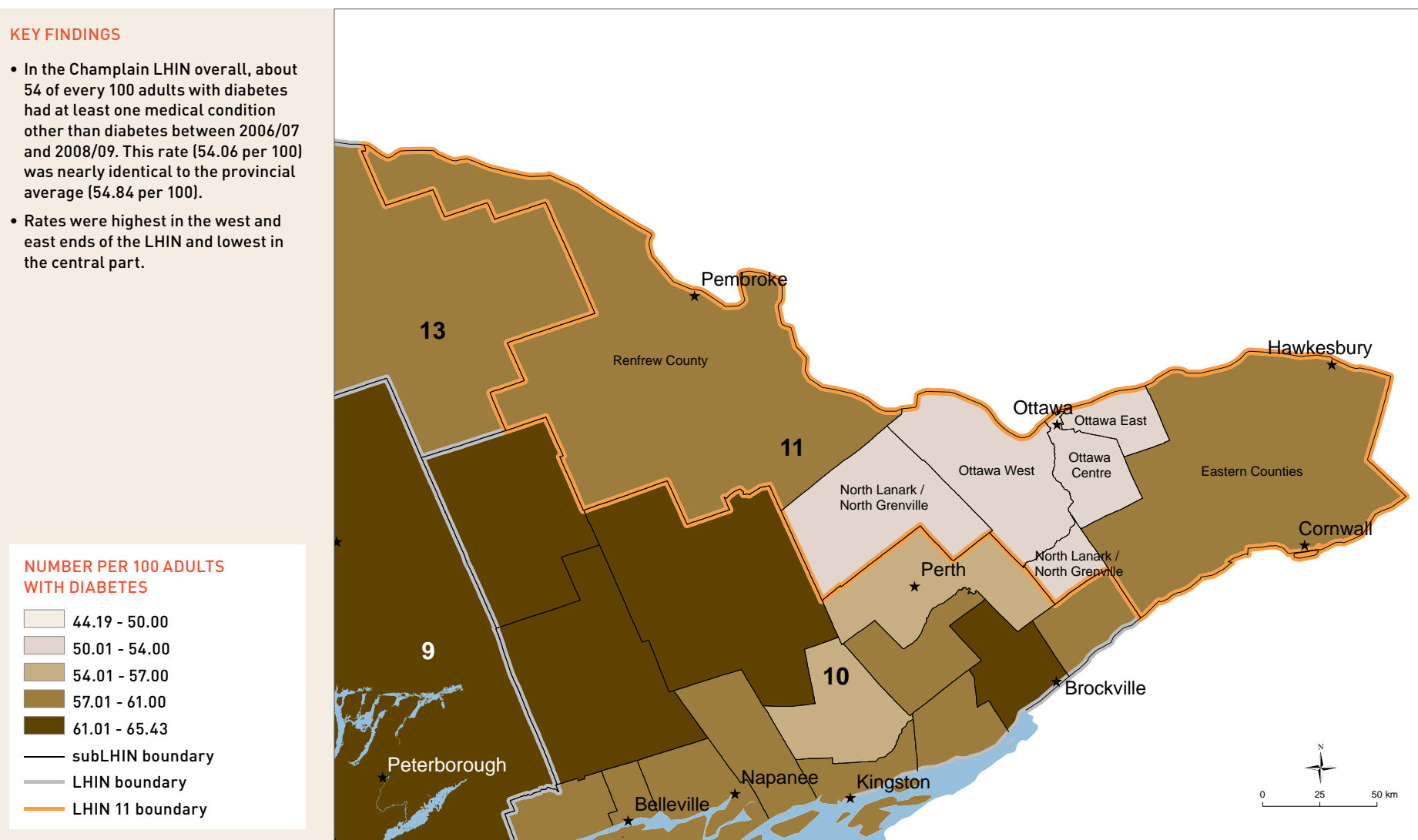
Technical note: Adults were defined as those aged 20 years and older. Rates were age- and sex-standardized using the same-aged population in the Ontario Diabetes Database on March 31, 2006 as the standard population.

EXHIBIT 11.8

Number, per 100 adults with diabetes, who had an additional chronic medical condition in the Champlain LHIN (11), by subLHIN, 2006/07–2008/09

KEY FINDINGS

- In the Champlain LHIN overall, about 54 of every 100 adults with diabetes had at least one medical condition other than diabetes between 2006/07 and 2008/09. This rate (54.06 per 100) was nearly identical to the provincial average (54.84 per 100).
- Rates were highest in the west and east ends of the LHIN and lowest in the central part.



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

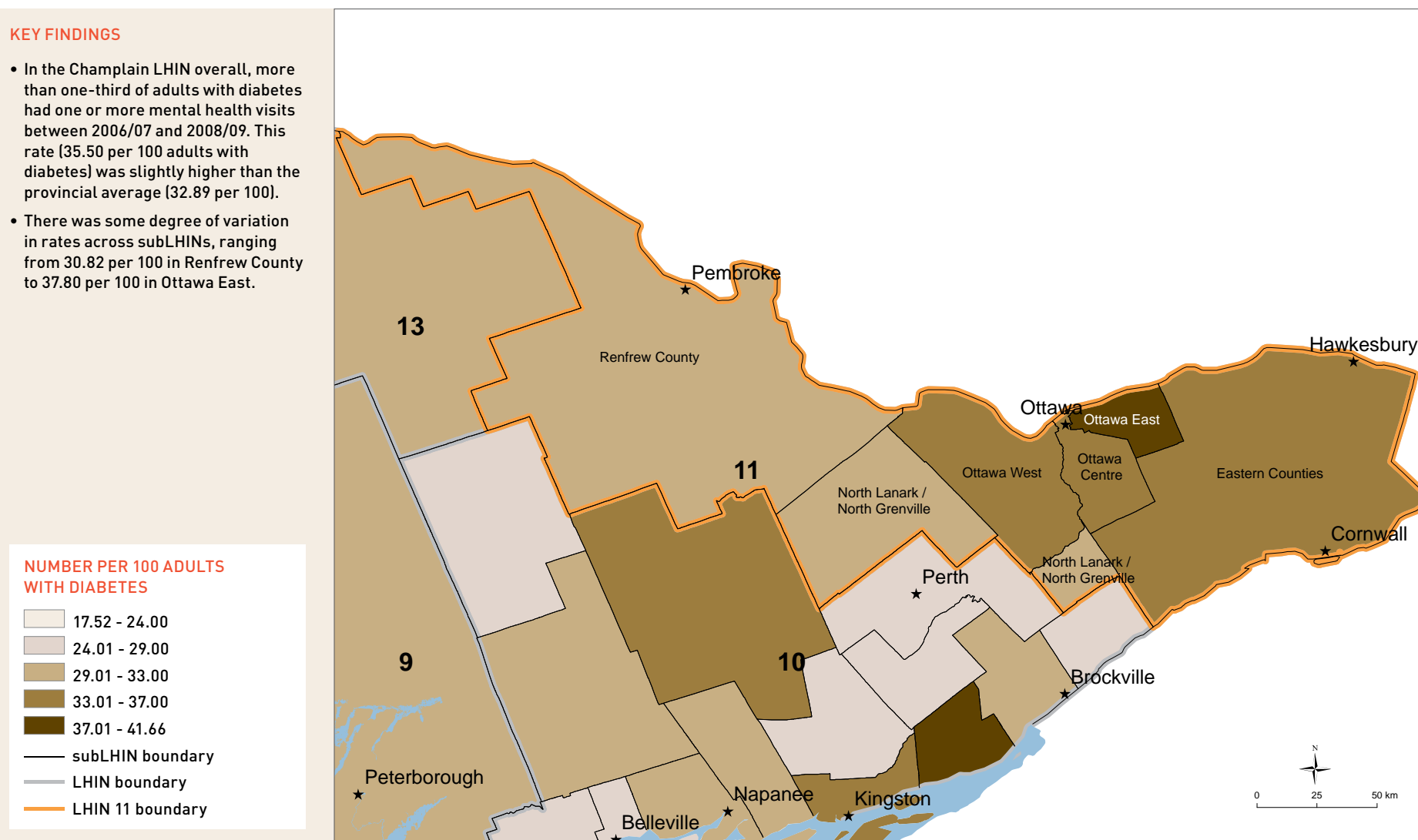
Technical note: Adults were defined as those aged 20 years and older. Rates were age- and sex-standardized using the same-aged population in the Ontario Diabetes Database on March 31, 2006 as the standard population.

EXHIBIT 11.9

Number, per 100 adults with diabetes, who made a mental health visit for a psychotic or nonpsychotic illness in the Champlain LHIN (11), by subLHIN, 2006/07–2008/09

KEY FINDINGS

- In the Champlain LHIN overall, more than one-third of adults with diabetes had one or more mental health visits between 2006/07 and 2008/09. This rate (35.50 per 100 adults with diabetes) was slightly higher than the provincial average (32.89 per 100).
- There was some degree of variation in rates across subLHINs, ranging from 30.82 per 100 in Renfrew County to 37.80 per 100 in Ottawa East.



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

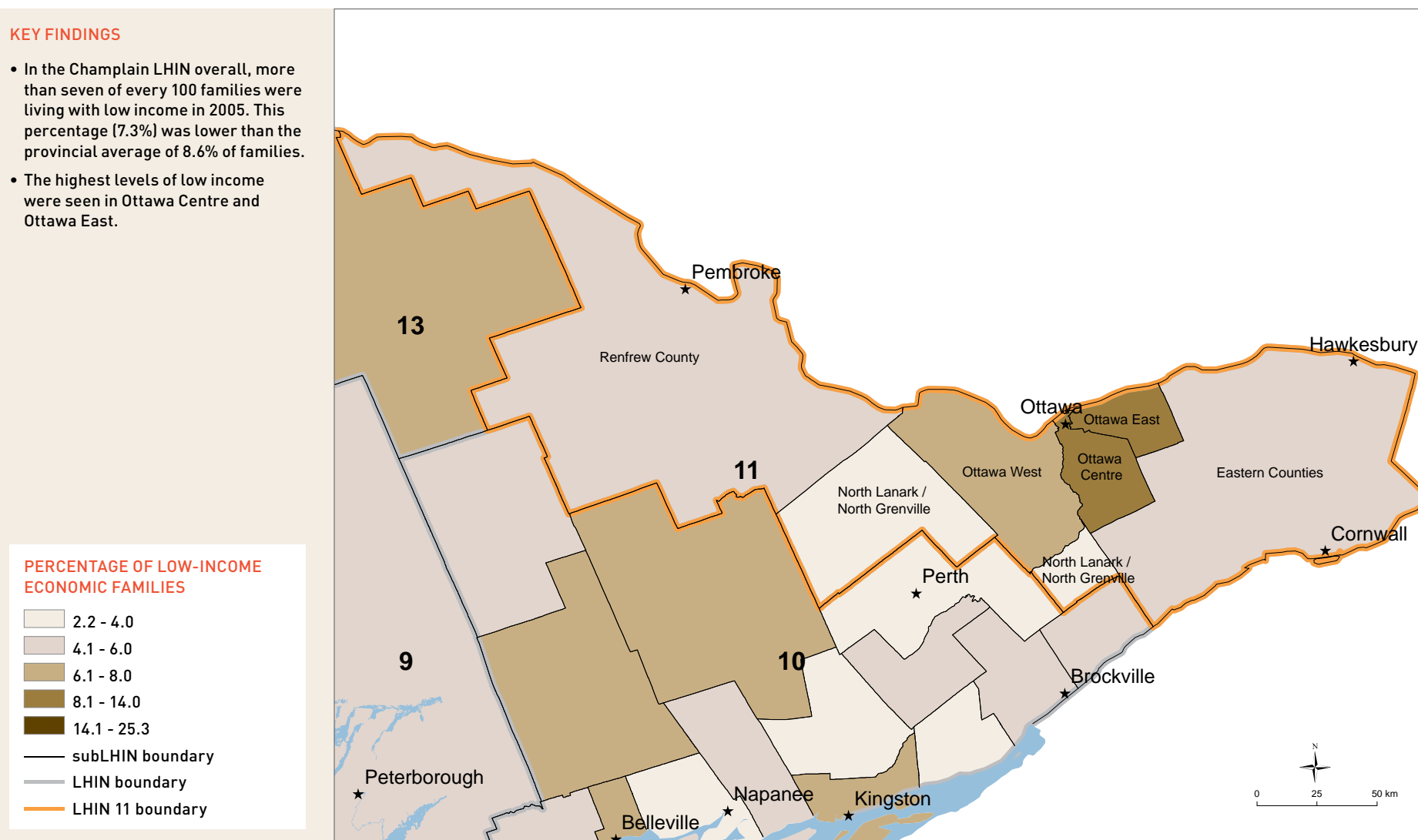
Technical note: Adults were defined as those aged 20 years and older. Rates were age- and sex-standardized using the same-aged population in the Ontario Diabetes Database on March 31, 2006 as the standard population.

EXHIBIT 11.10

Percentage of economic families with low income in the Champlain LHIN (11), by subLHIN, 2005

KEY FINDINGS

- In the Champlain LHIN overall, more than seven of every 100 families were living with low income in 2005. This percentage (7.3%) was lower than the provincial average of 8.6% of families.
- The highest levels of low income were seen in Ottawa Centre and Ottawa East.



Data source: 2006 Census of Canada.

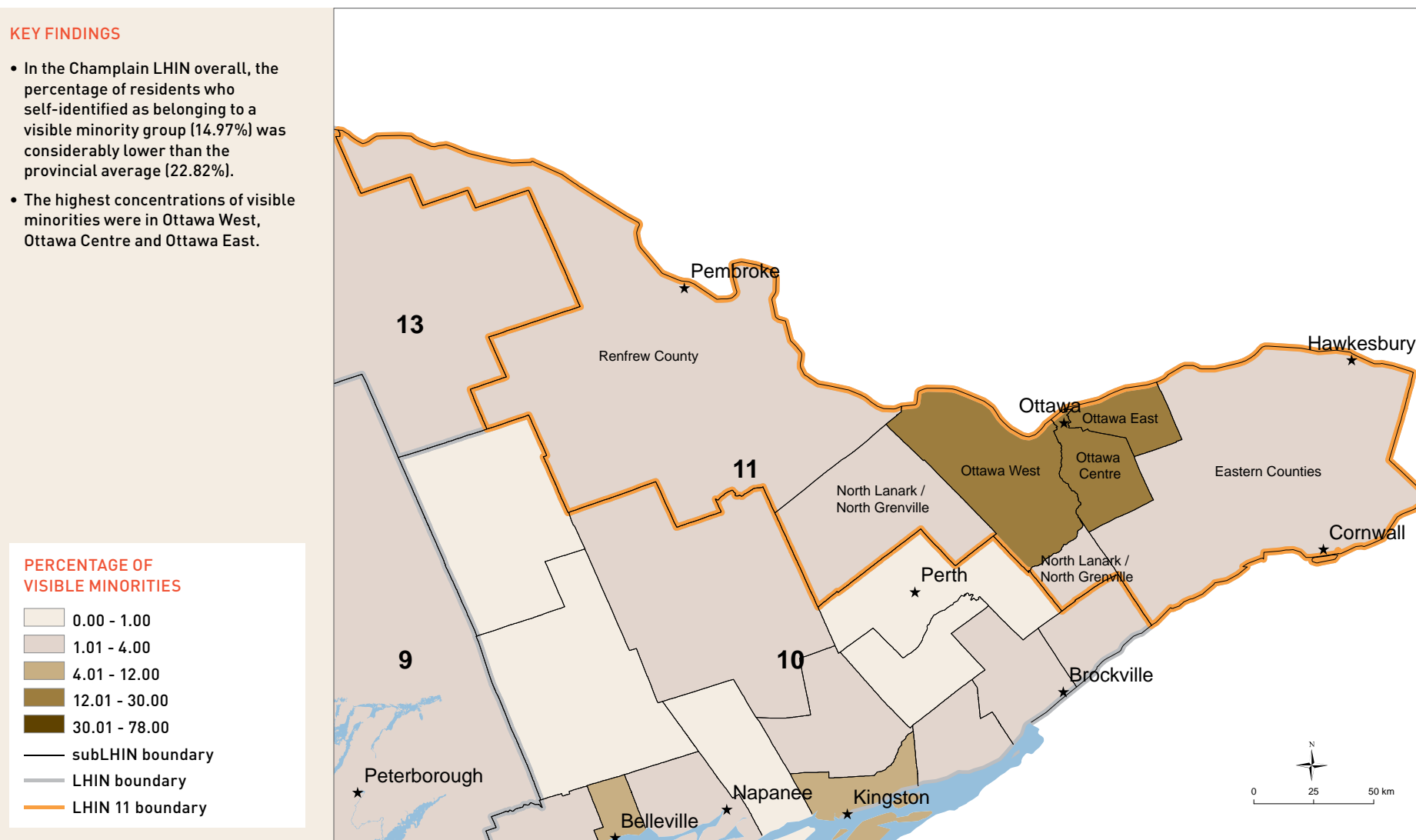
Technical note: Economic family refers to a group of two or more persons who live in the same dwelling and are related by blood, marriage, common law or adoption. Economic families with low income are defined as those that devote a larger share of their after-tax income (at least 20% more than average) 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 11.11

Percentage of visible minorities in the Champlain LHIN (11), by subLHIN, 2006

KEY FINDINGS

- In the Champlain LHIN overall, the percentage of residents who self-identified as belonging to a visible minority group (14.97%) was considerably lower than the provincial average (22.82%).
- The highest concentrations of visible minorities were in Ottawa West, Ottawa Centre and Ottawa East.



Data source: 2006 Census of Canada.

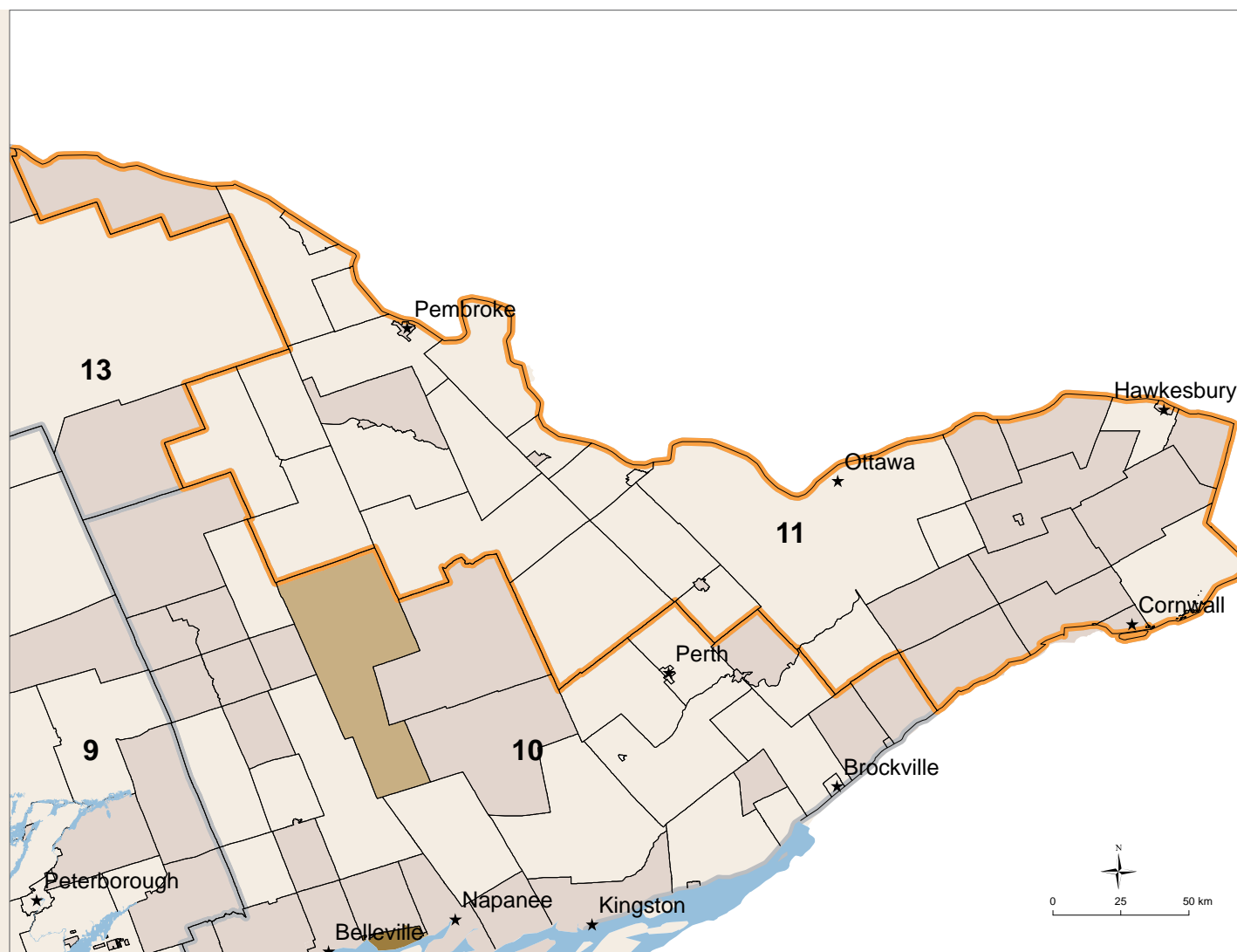
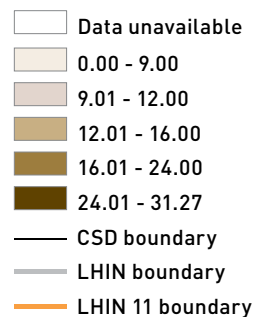
Technical note: Visible minorities include persons other than Aboriginal peoples who are non-Caucasian in race or non-white in colour.

EXHIBIT 11.12

Diabetes prevalence per 100 adults in the Champlain LHIN (11), by census subdivision, on March 31, 2011

KEY FINDING

- In all census subdivisions (CSDs) in the Champlain LHIN, the number of adults per 100 living with diabetes was in a range similar to the LHIN average (8.44 per 100 adults) and the provincial average (9.64 per 100 adults).

PREVALENCE PER 100 ADULTS

Data sources: Ontario Diabetes Database; Registered Persons Database.

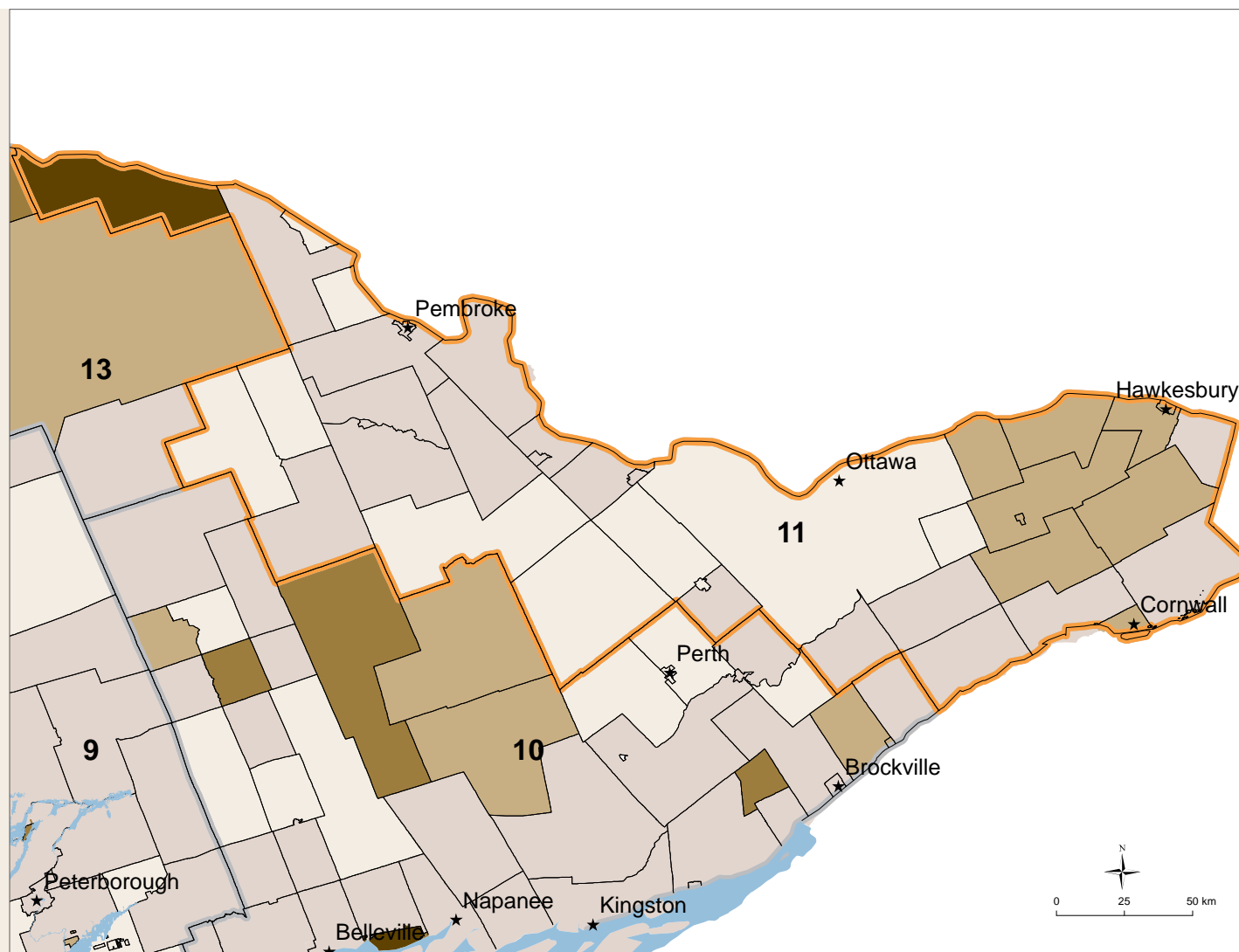
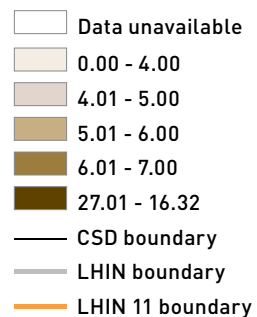
Technical note: Adults were defined as those aged 20 years and older. Rates were age- and sex-standardized using the 2001 Ontario population of the same age as the standard population.

EXHIBIT 11.13

Diabetes incidence per 100 adults in the Champlain LHIN (11), 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 (4.15 per 100) and the provincial average (4.85 per 100).
- The highest diabetes incidence was seen in the most northwestern area of the LHIN.
- Higher-than-average rates of diabetes incidence were also seen in the east end of the LHIN in Cornwall and in the largely rural CSDs surrounding Hawkesbury.

INCIDENCE PER 100 ADULTS

Data sources: Ontario Diabetes Database; Registered Persons Database.

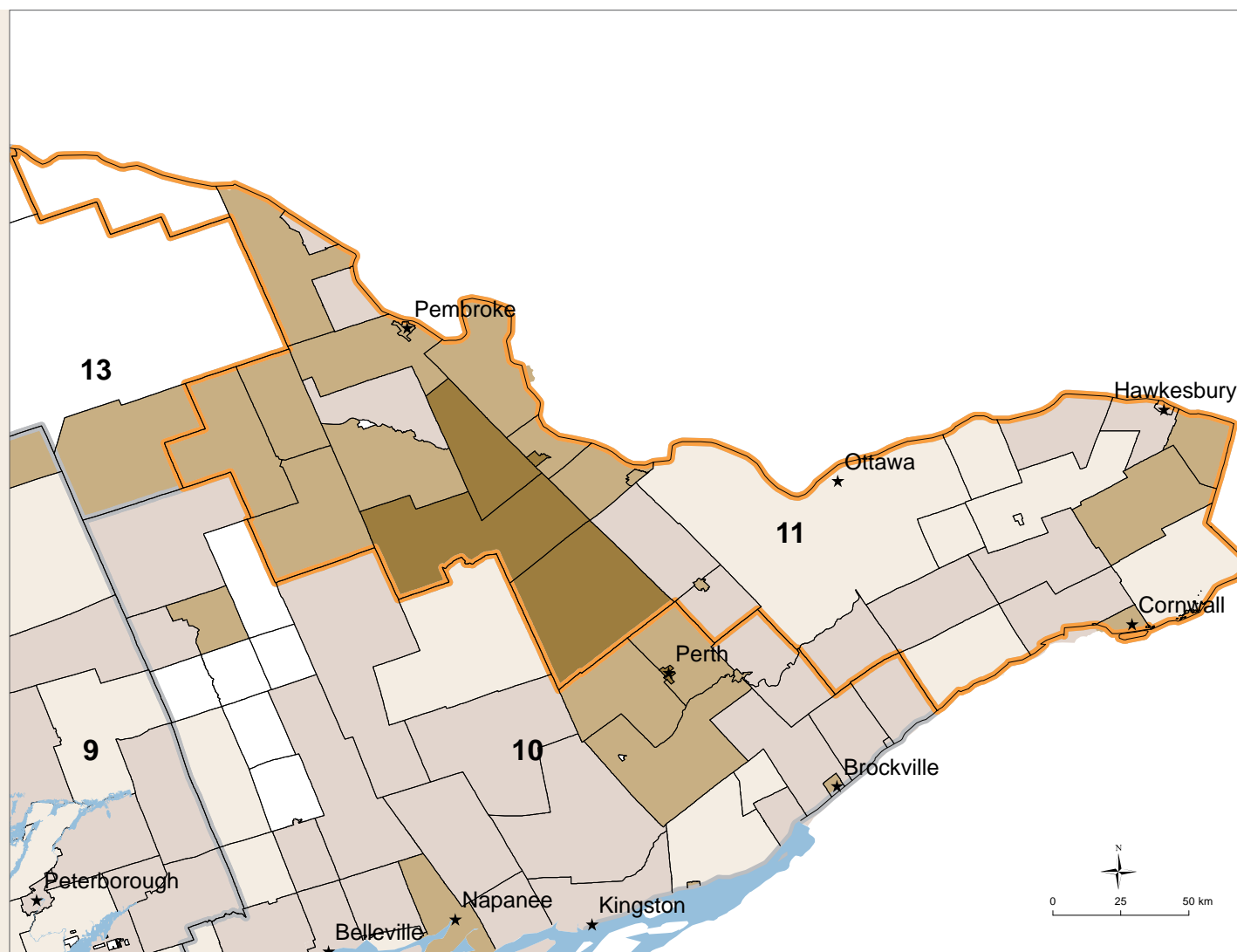
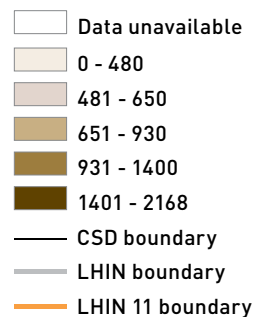
Technical note: Adults were defined as those aged 20 years and older. Rates were age- and sex-standardized using the 2001 Ontario population of the same age as the standard population.

EXHIBIT 11.14

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

KEY FINDINGS

- In most census subdivisions (CSDs), rates of hospitalizations or emergency department visits for hyper- or hypoglycemia were similar to the LHIN average (484 per 10,000 adults with diabetes) and the provincial average (486 per 10,000).
- The highest rates were seen in a number of mainly rural areas along the central-west border of the LHIN and in Renfrew. Above-average rates were also noted in Pembroke and surrounding areas, and in the east end of the LHIN in Cornwall and rural areas south of Hawkesbury.

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.

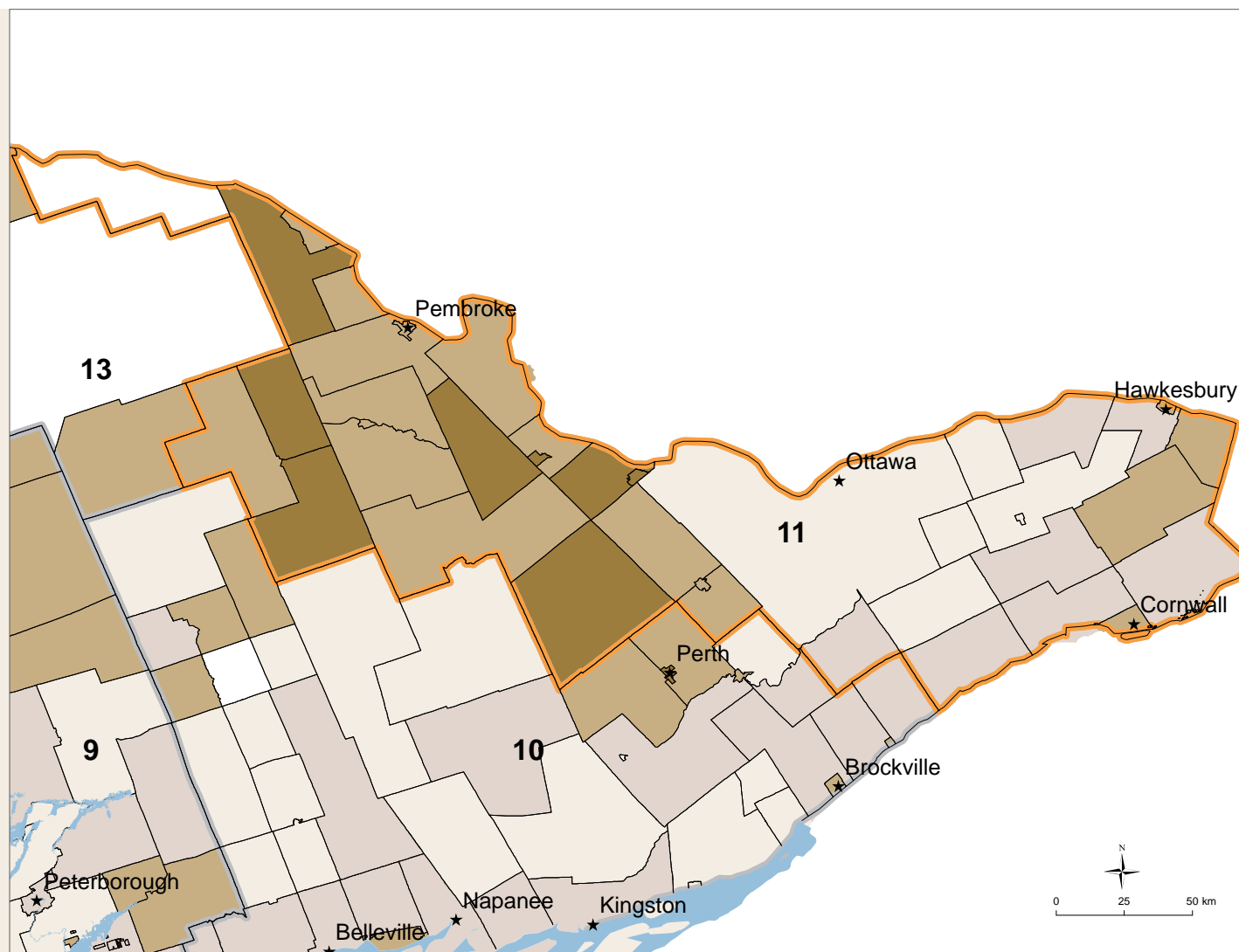
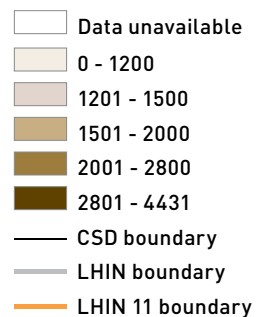
Technical note: Adults were defined as those aged 20 years and older. Rates were age- and sex-standardized using the same-aged population in the Ontario Diabetes Database on March 31, 2006 as the standard population.

EXHIBIT 11.15

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

KEY FINDINGS

- Between 2006/07 and 2010/11, rates of hospitalizations or emergency department (ED) visits for acute complications of diabetes in most central and eastern census subdivisions (CSDs) were similar to the LHIN average (1,083 per 10,000 adults with diabetes) and the provincial average (1,029 per 10,000).
- Higher rates of hospitalizations/ED visits were seen throughout the largely rural areas in the northwest and west parts of the LHIN, as well as in Renfrew and Arnprior, and in a few CSDs in the east end, including Cornwall.

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.

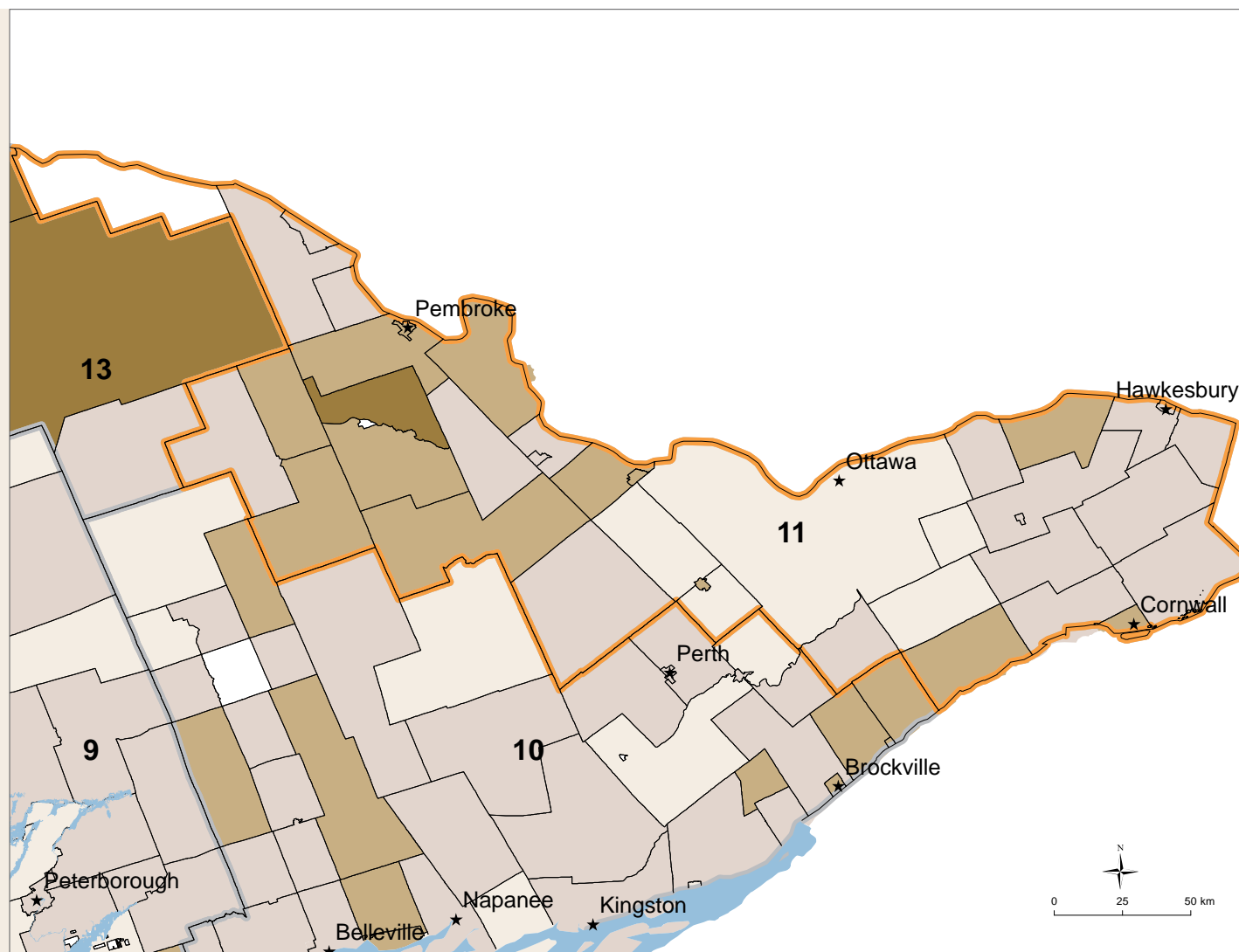
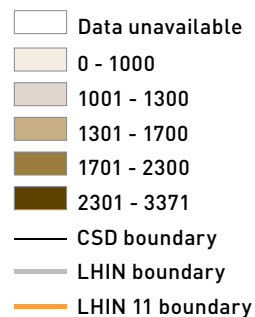
Technical notes: Adults were defined as those aged 20 years and older. Rates were age- and sex-standardized using the same-aged population in the Ontario Diabetes Database on March 31, 2006 as the standard population. Acute complications consisted of hyper- or hypoglycemia, skin and soft tissue infection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

EXHIBIT 11.16

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

KEY FINDINGS

- Between 2006/07 and 2010/11, rates of chronic complications of diabetes in many census subdivisions (CSDs) were in a range similar to the LHIN average (1,003 per 10,000 adults with diabetes) and the provincial average (1,016 per 10,000).
- The highest rate was seen in a rural area in the northwest part of the LHIN. Above-average rates were also noted in Pembroke and neighbouring rural areas, in Carleton Place (a small community southwest of Ottawa) and in several areas along the northeast and southeast borders.

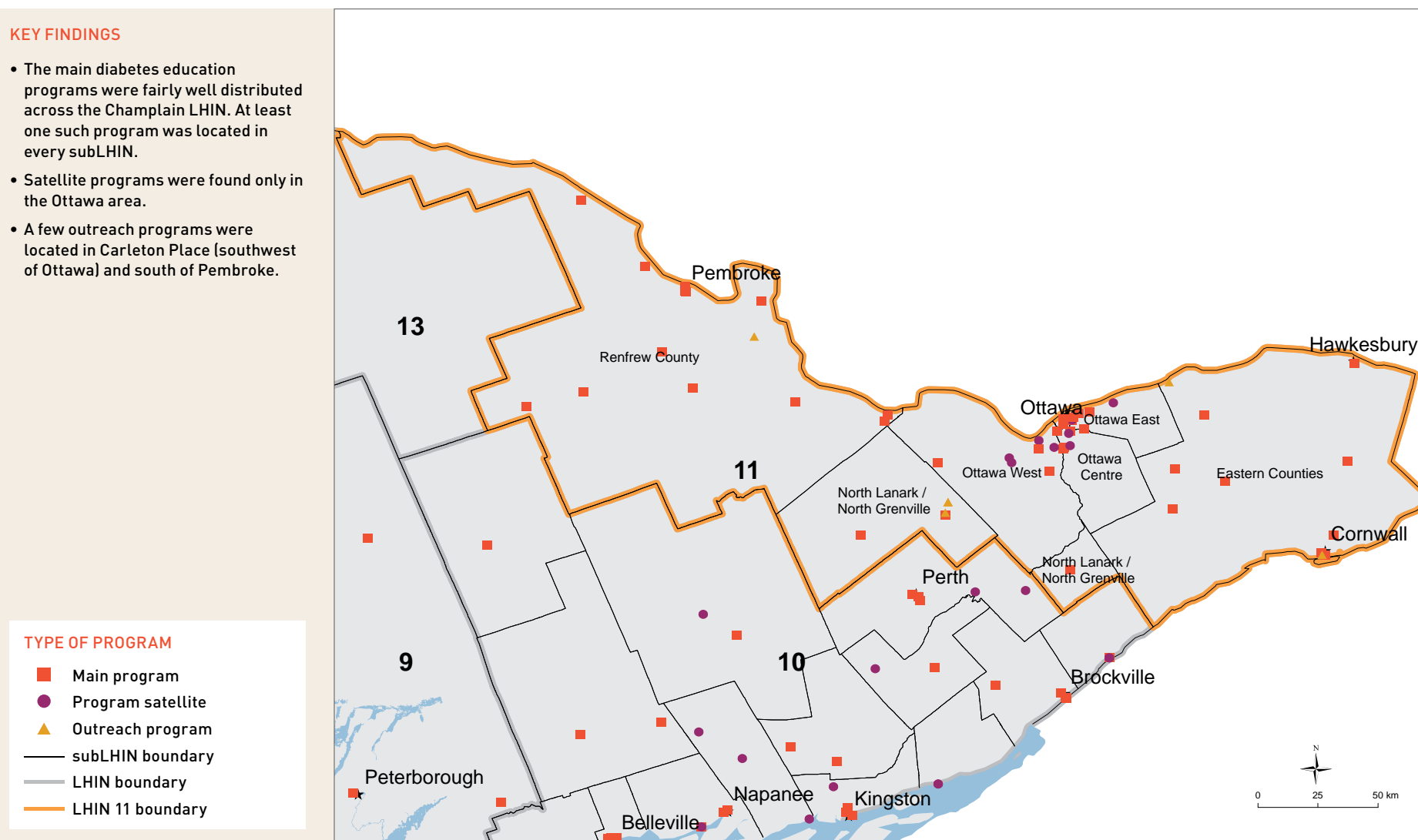
NUMBER PER 10,000 ADULTS WITH DIABETES

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 11.17**Locations of diabetes education programs in the Champlain LHIN (11), 2011****KEY FINDINGS**

- The main diabetes education programs were fairly well distributed across the Champlain LHIN. At least one such program was located in every subLHIN.
- Satellite programs were found only in the Ottawa area.
- A few outreach programs were located in Carleton Place (southwest of Ottawa) and south of Pembroke.

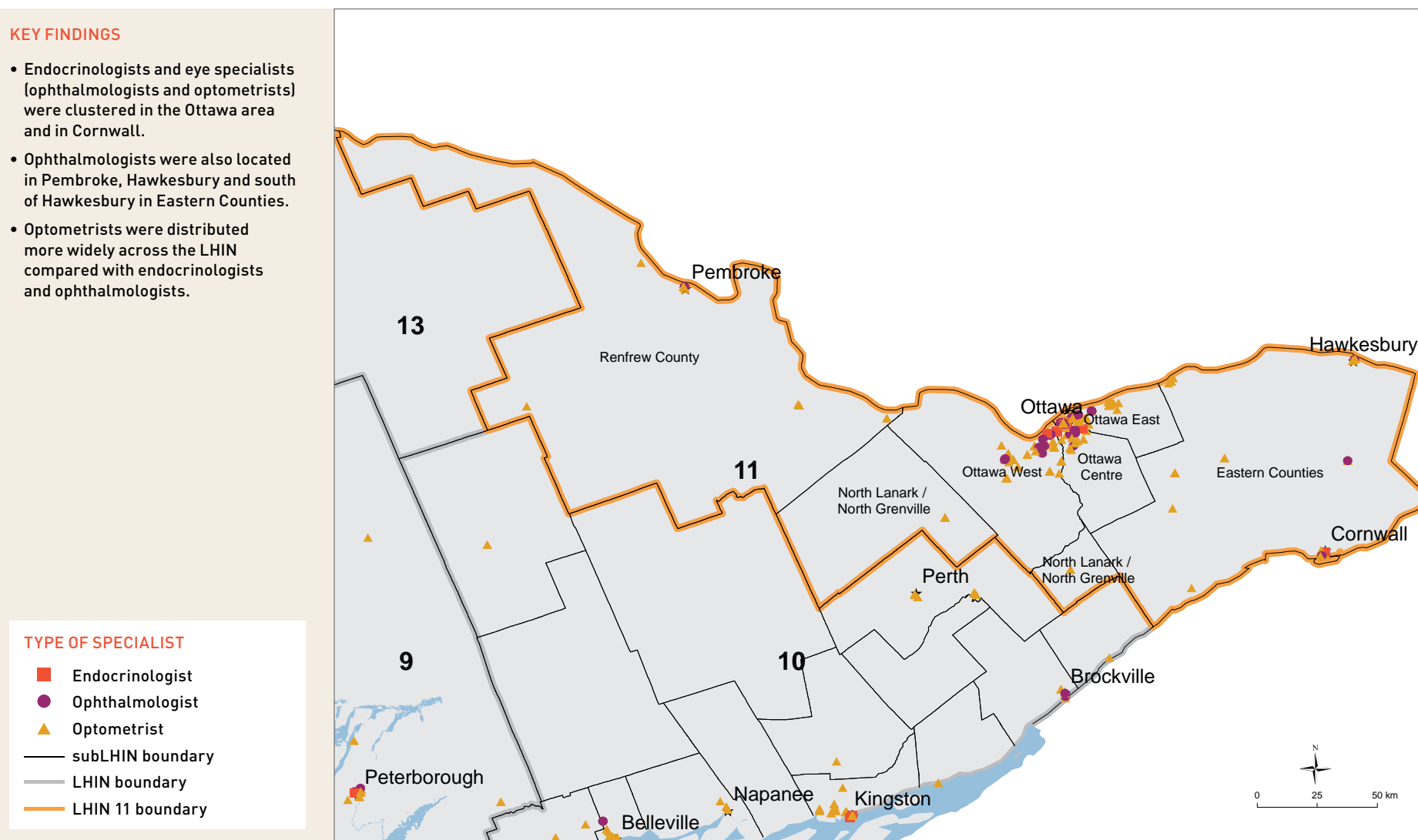


Data source: Diabetes Regional Coordination Centres.

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

EXHIBIT 11.18**Locations of endocrinologists and eye specialists in the Champlain LHIN (11), 2010/11****KEY FINDINGS**

- Endocrinologists and eye specialists (ophthalmologists and optometrists) were clustered in the Ottawa area and in Cornwall.
- Ophthalmologists were also located in Pembroke, Hawkesbury and south of Hawkesbury in Eastern Counties.
- Optometrists were distributed more widely across the LHIN compared with endocrinologists and ophthalmologists.

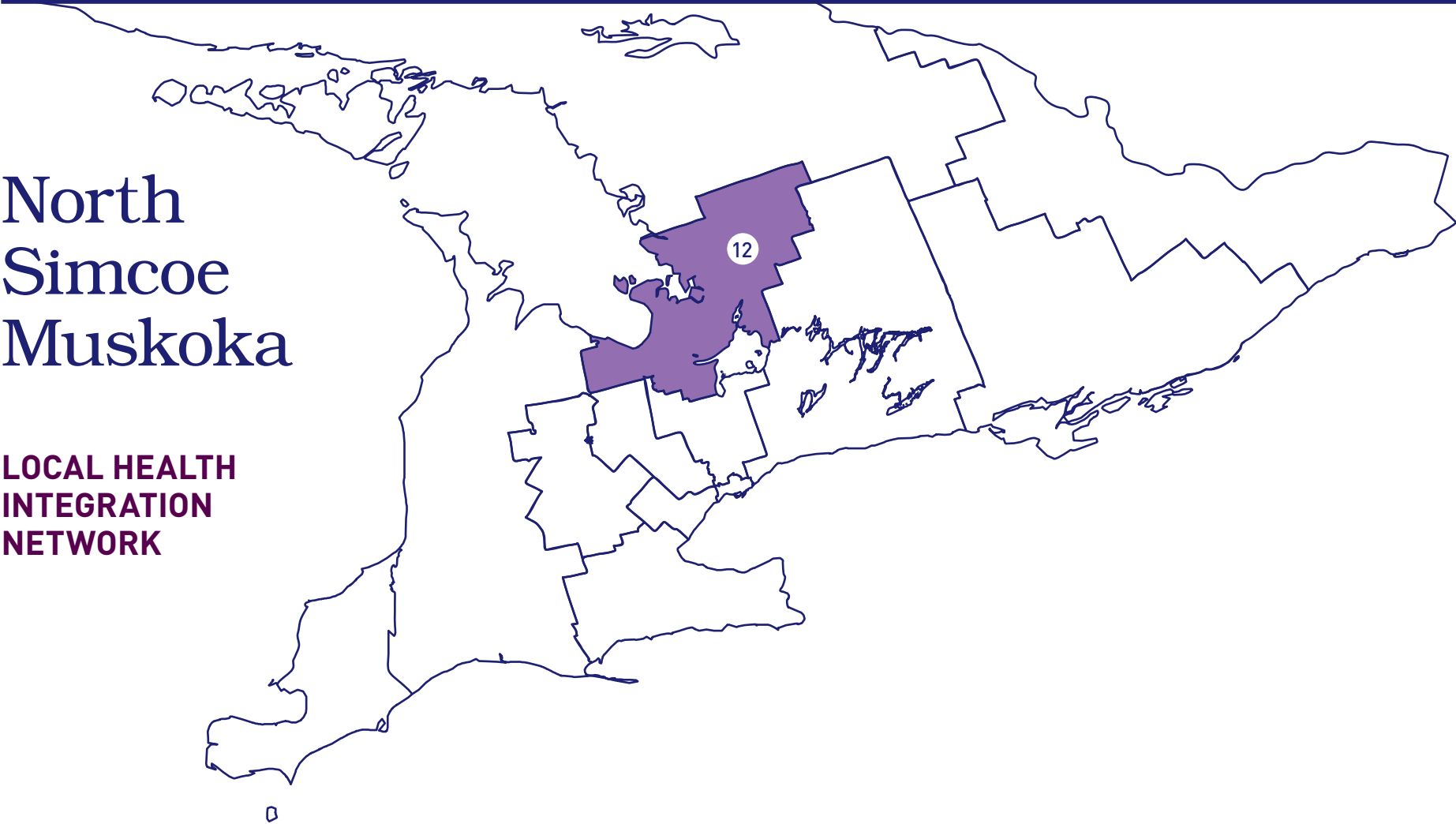


Data sources: Locations of endocrinologists and ophthalmologists came from the ICES Physician Database, 2010; listings of optometrists came from the Corporate Provider Database, April 1, 2010 to March 31, 2011.

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

North Simcoe Muskoka

LOCAL HEALTH
INTEGRATION
NETWORK



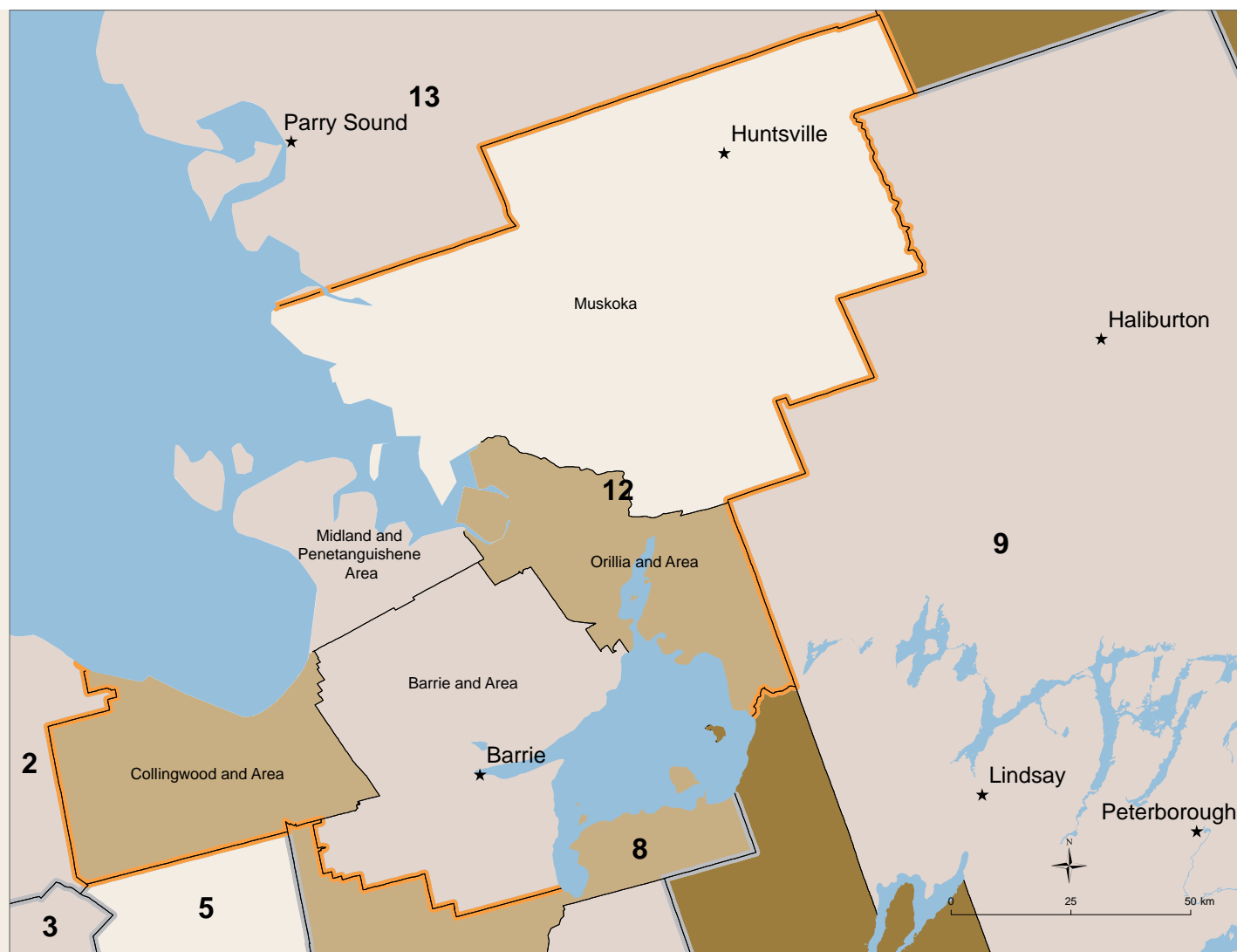
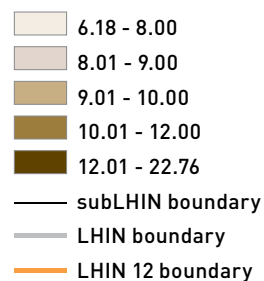
Diabetes Measures by Region

EXHIBIT 12.1

Diabetes prevalence per 100 adults in the North Simcoe Muskoka LHIN (12), by subLHIN, on March 31, 2011

KEY FINDINGS

- For every 100 adults in the North Simcoe Muskoka LHIN overall, there were about nine people living with diabetes. This prevalence (8.79 per 100) was lower than the Ontario average (9.64 per 100).
- A higher diabetes prevalence (but very similar to the provincial average) was seen in Orillia and Area and in Collingwood and Area.

PREVALENCE PER 100 ADULTS

Data sources: Ontario Diabetes Database; Registered Persons Database.

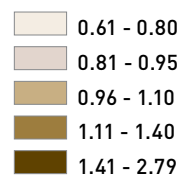
Technical note: Adults were defined as those aged 20 years and older. Rates were age- and sex-standardized using the 2001 Ontario population of the same age as the standard population.

EXHIBIT 12.2

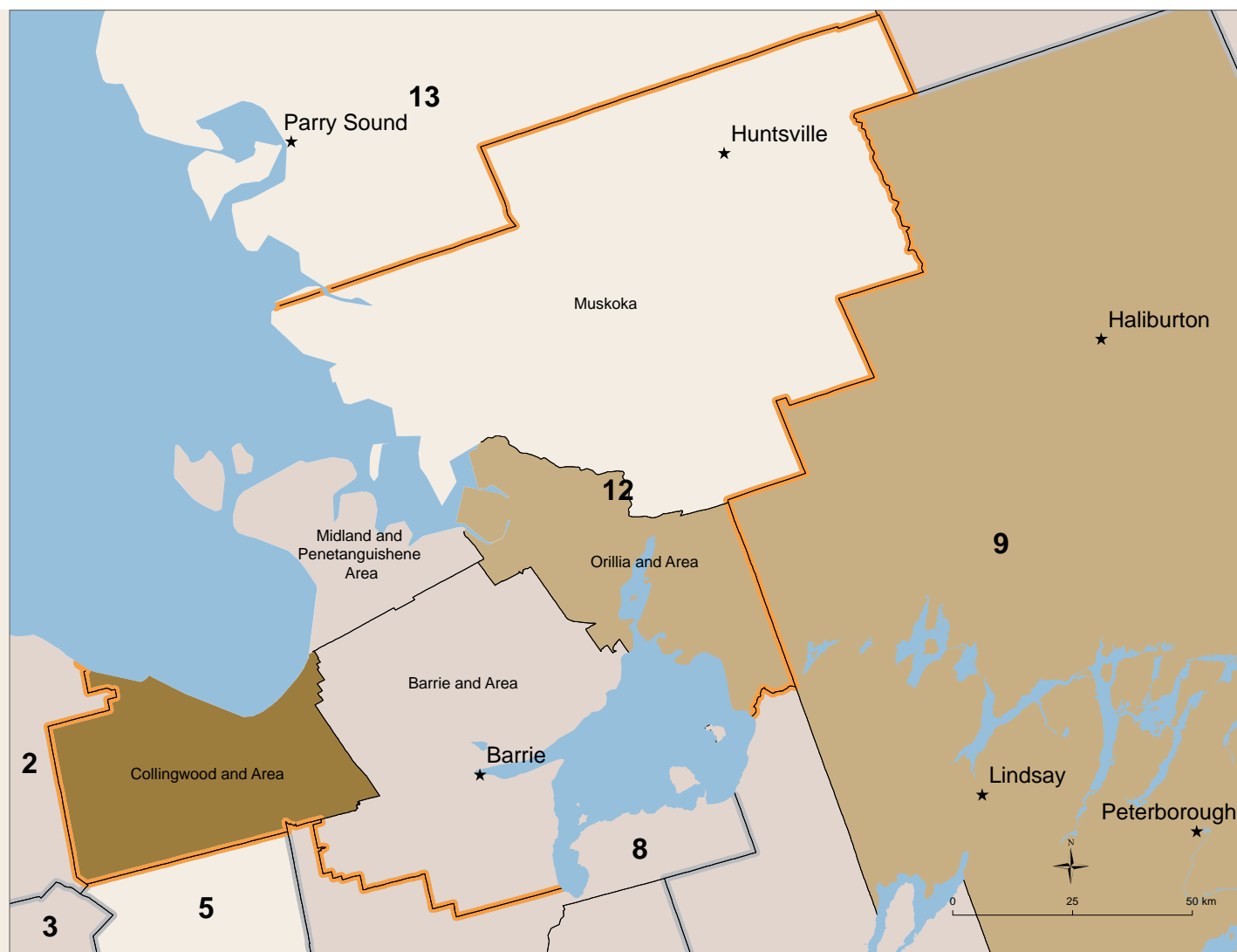
Diabetes incidence per 100 adults in the North Simcoe Muskoka LHIN (12), by subLHIN, 2009/10

KEY FINDINGS

- For every 100 adults living in the North Simcoe Muskoka LHIN who were free of diabetes in March 2009, approximately one was diagnosed with diabetes in the subsequent year. This incidence rate (0.97 per 100) was identical to the provincial average.
- Diabetes incidence was highest in Collingwood and Area (1.21 per 100).

INCIDENCE PER 100 ADULTS

- subLHIN boundary
- LHIN boundary
- LHIN 12 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 12.3

Number, per 10,000 adults with diabetes, who had at least one hospitalization or emergency department visit for hyper- or hypoglycemia in the North Simcoe Muskoka LHIN (12), by subLHIN, 2006/07–2010/11

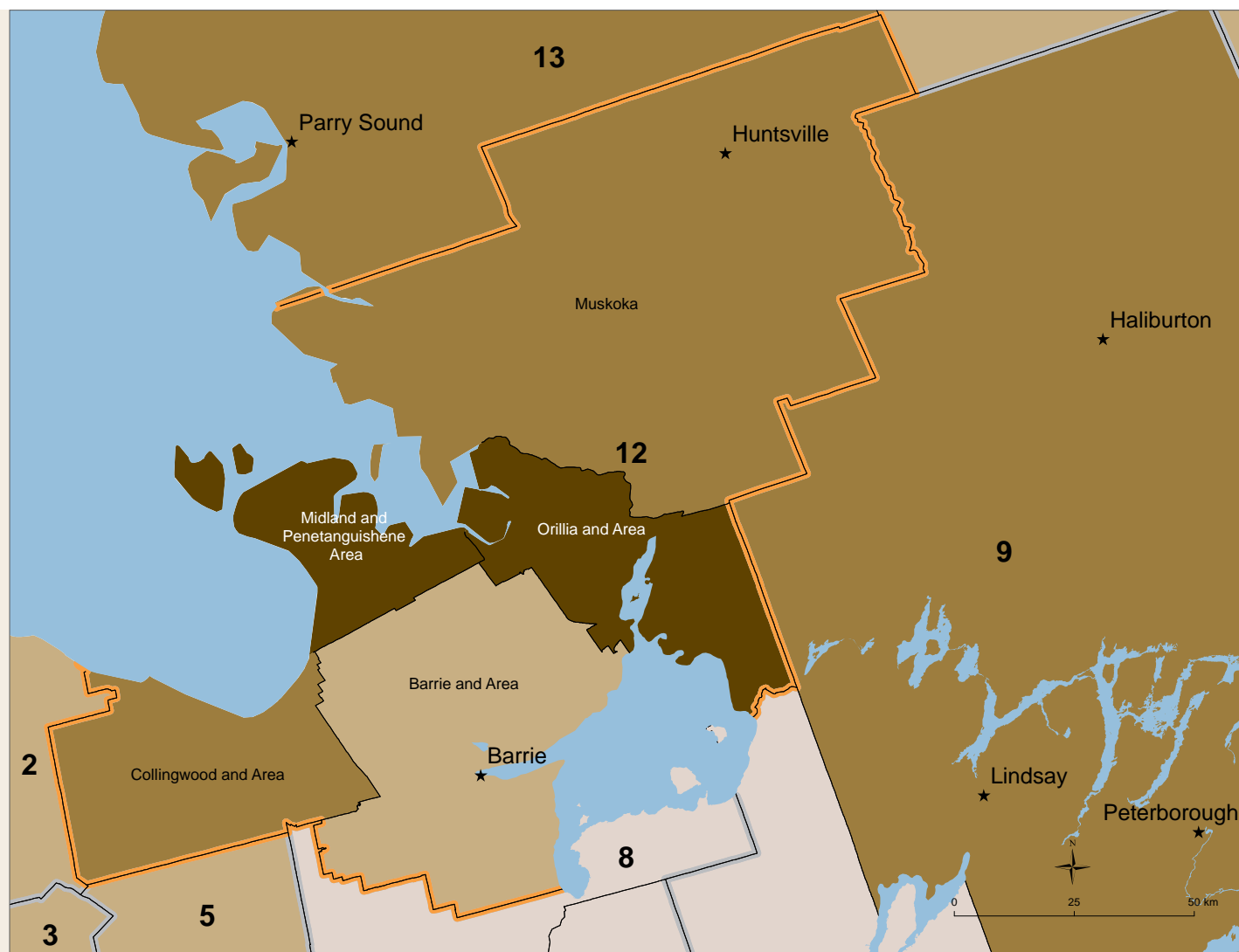
KEY FINDINGS

- Overall, for every 100 adults living with diabetes in the North Simcoe Muskoka LHIN on March 31, 2006, more than six had at least one hospitalization or emergency department (ED) visit for hyper- or hypoglycemia in the subsequent five years. This rate (643 per 10,000 adults with diabetes) was notably higher than the provincial average (486 per 10,000).
- Rates of hospitalizations/ED visits were highest across the central part of the LHIN in Orillia and Area (782 per 10,000) and in Midland and Penetanguishene Area (774 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 12 boundary



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

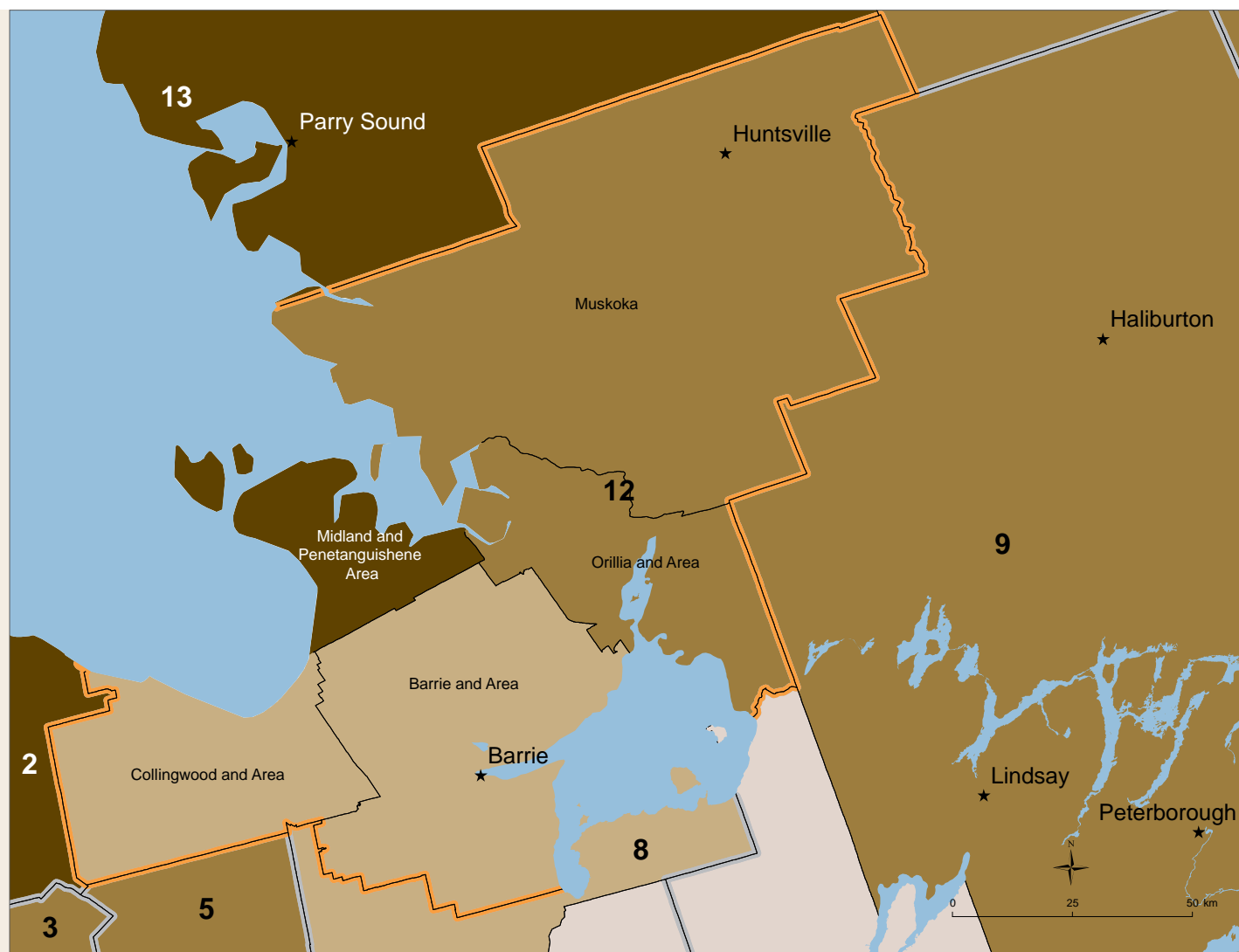
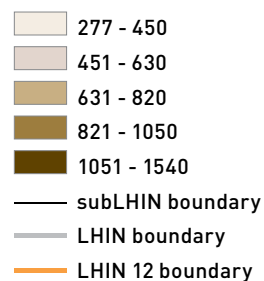
Technical note: Adults were defined as those aged 20 years and older. Rates were age- and sex-standardized using the same-aged population in the Ontario Diabetes Database on March 31, 2006 as the standard population.

EXHIBIT 12.4

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 North Simcoe Muskoka LHIN (12), by subLHIN, 2006/07–2010/11

KEY FINDINGS

- For every 100 adults living with diabetes in the North Simcoe Muskoka LHIN in 2006, more than eight 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 (815 per 10,000 adults with diabetes) was notably higher than the provincial average (618 per 10,000).
- Rates varied by nearly two-fold across subLHINs and all were above the provincial average. The highest rate was in Midland and Penetanguishene Area (1,122 per 10,000) and the lowest in Barrie and Area (651 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.

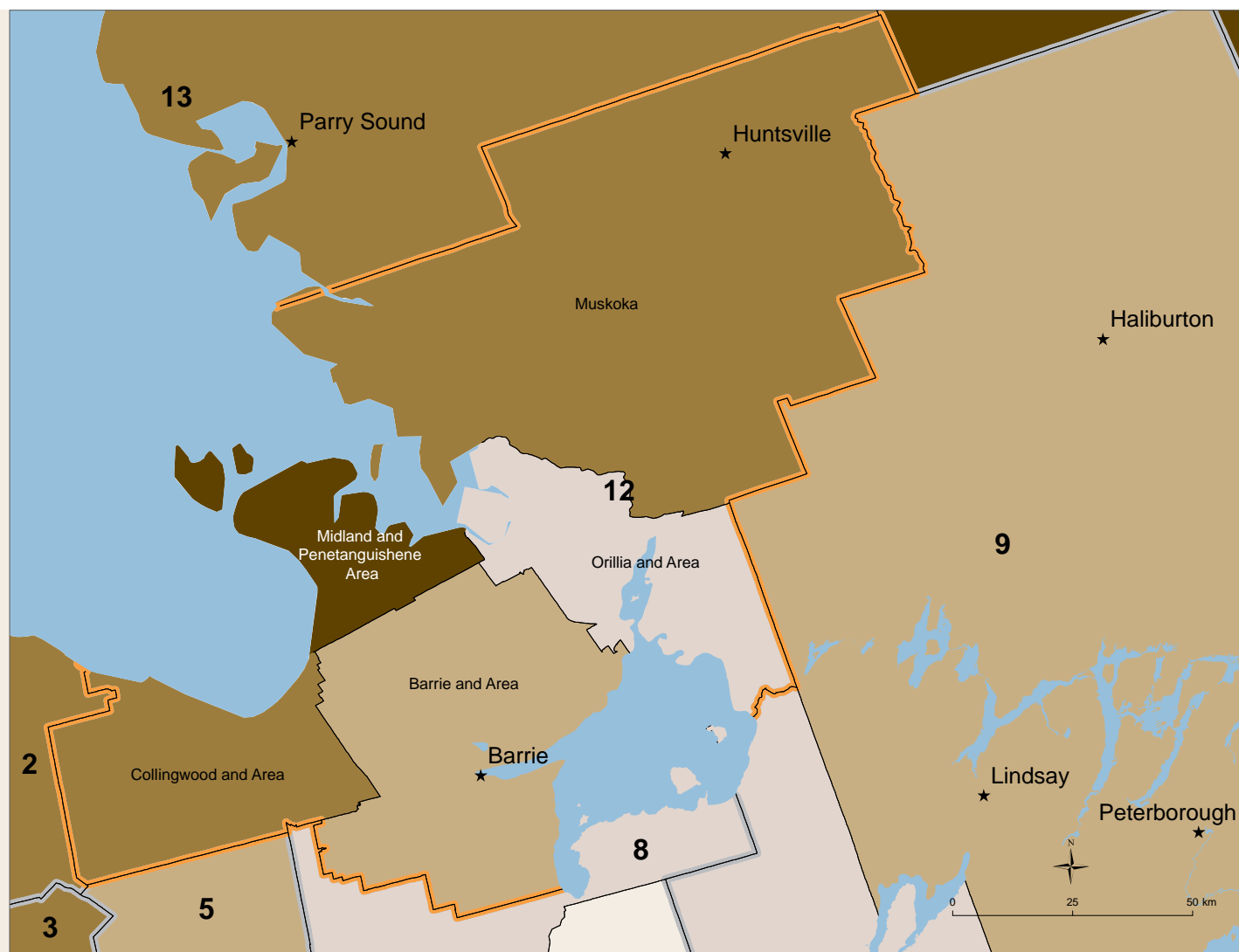
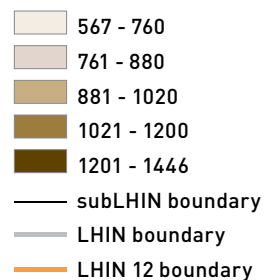
Technical note: Adults were defined as those aged 20 years and older. Rates were age- and sex-standardized using the same-aged population in the Ontario Diabetes Database on March 31, 2006 as the standard population.

EXHIBIT 12.5

Number, per 10,000 adults with diabetes, who had at least one hospitalization for a cardiovascular condition in the North Simcoe Muskoka LHIN (12), by subLHIN, 2006/07–2010/11

KEY FINDINGS

- More than one in 10 adults with diabetes living in the North Simcoe Muskoka 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).
- The highest rate was seen in Midland and Penetanguishene Area (1,440 per 10,000). Above-average rates were seen across all other subLHINs, except for Orillia and Area.

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 12.6

Number, per 10,000 adults with diabetes, who had a lower extremity amputation in the North Simcoe Muskoka LHIN (12), by SubLHIN, 2006/07–2010/11

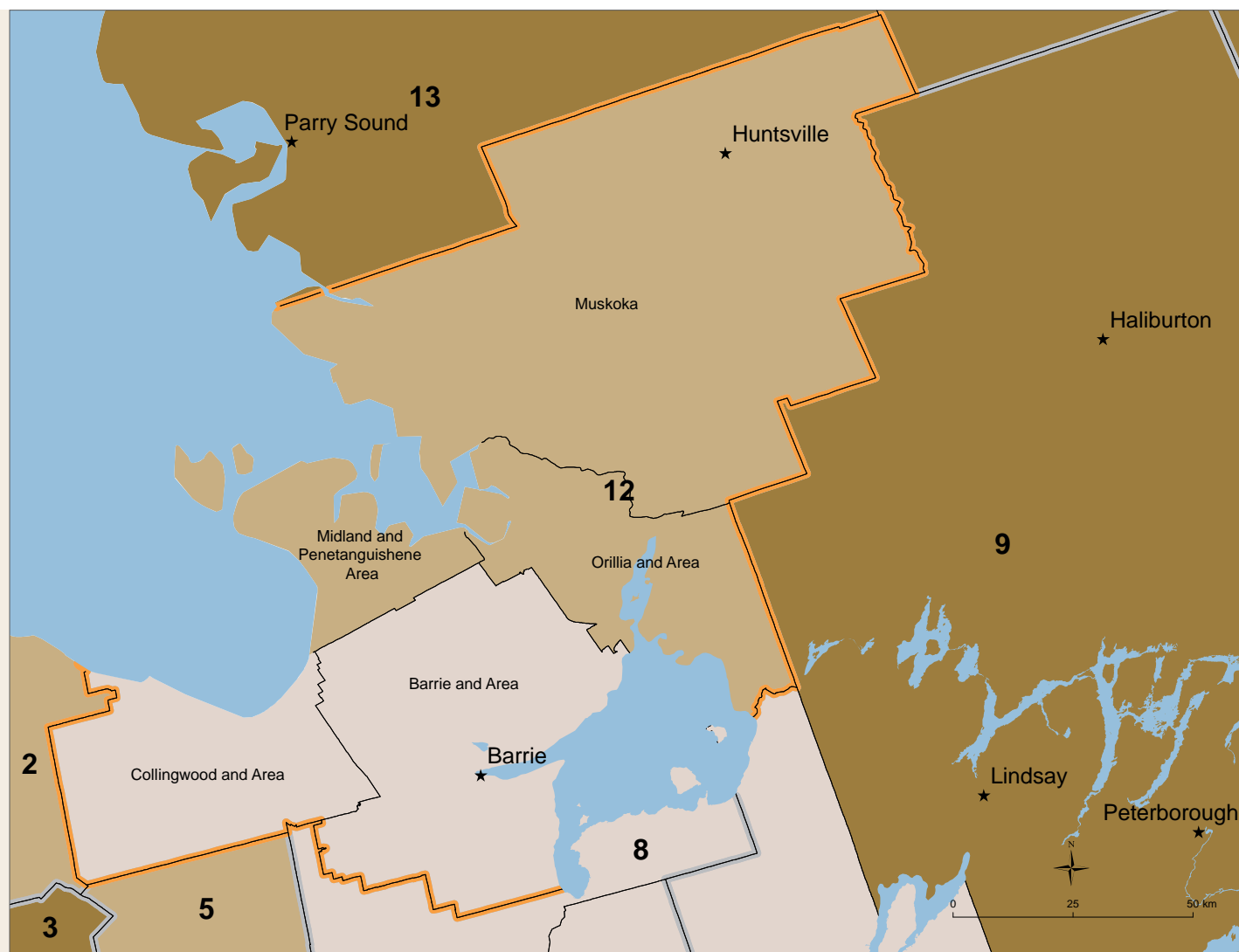
KEY FINDINGS

- In the North Simcoe Muskoka LHIN overall, eight of every 1,000 adults with diabetes experienced a lower extremity amputation between 2006/07 and 2010/11. This rate (80 per 10,000 adults with diabetes) was higher than the Ontario average (74 per 10,000).
- Higher rates (above 85 per 10,000) were seen across all areas north of Barrie and Area.

NUMBER PER 10,000 ADULTS WITH DIABETES

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

- subLHIN boundary
- LHIN boundary
- LHIN 12 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 12.7

Number, per 10,000 adults with diabetes, who received chronic dialysis or kidney transplantation in the North Simcoe Muskoka LHIN (12), by subLHIN, 2006/07–2010/11

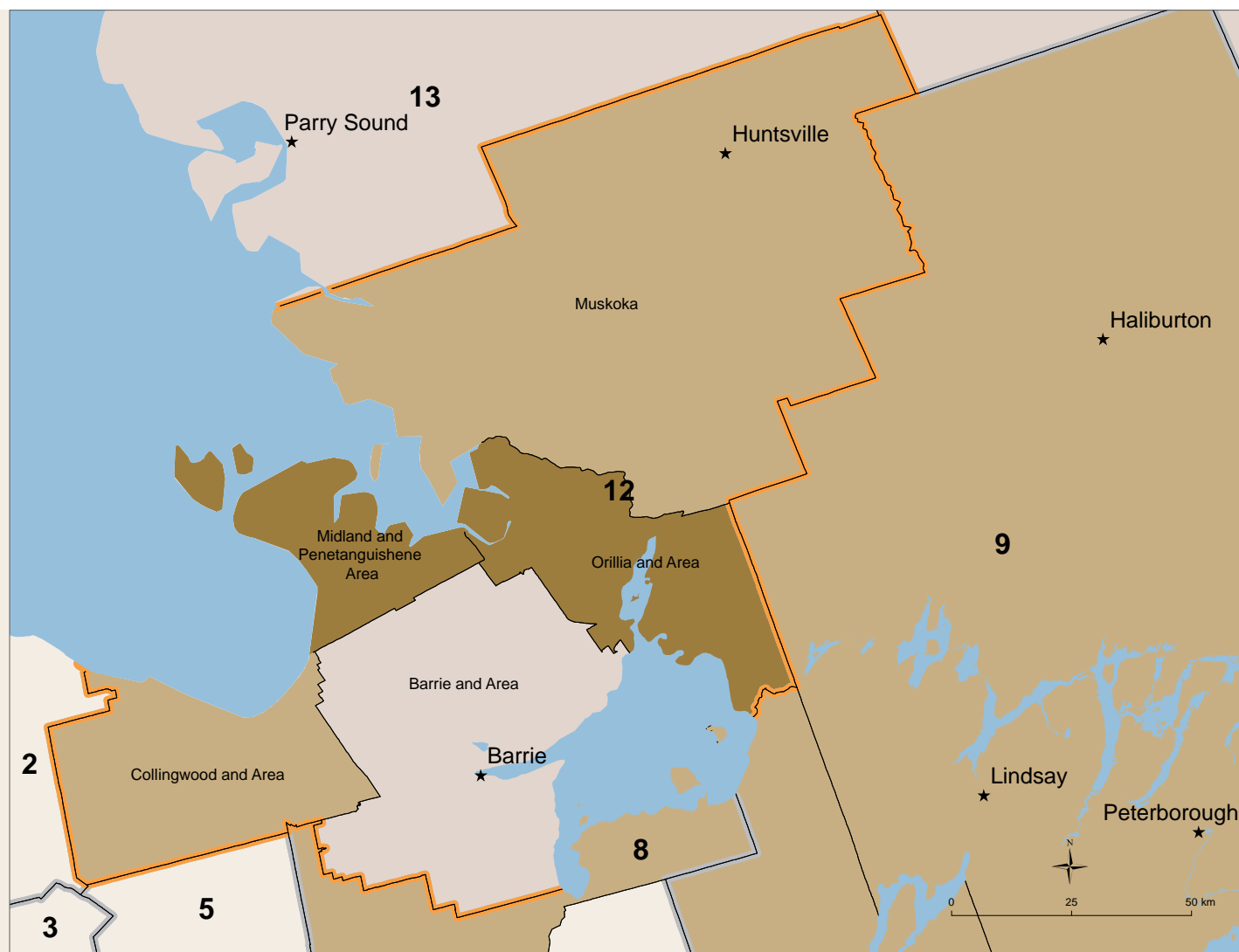
KEY FINDINGS

- In the North Simcoe Muskoka LHIN overall, the rate of chronic dialysis or kidney transplantation was 149 per 10,000 adults with diabetes, a level that was higher than the provincial average (122 per 10,000).
- The highest rates were seen across the central part of the LHIN in Midland and Penetanguishene Area (193 per 10,000) and in Orillia and Area (181 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 12 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 12.8

Number, per 100 adults with diabetes, who had an additional chronic medical condition in the North Simcoe Muskoka LHIN (12), by subLHIN, 2006/07–2008/09

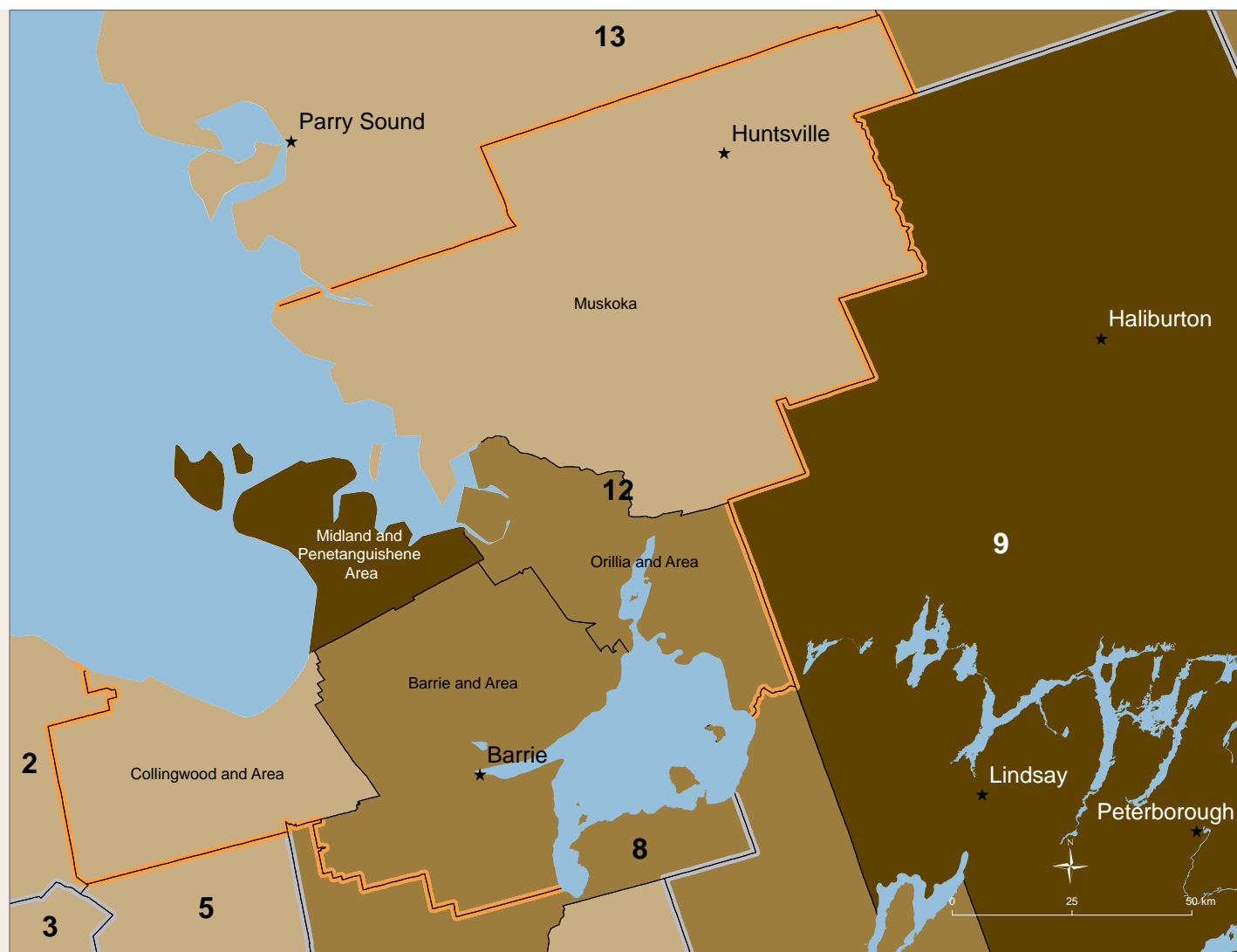
KEY FINDINGS

- In the North Simcoe Muskoka LHIN overall, more than 57 of every 100 adults with diabetes had at least one medical condition other than diabetes between 2006/07 and 2008/09. This rate (57.34 per 100) was higher than the provincial average (54.84 per 100).
- Rates were highest in Midland and Penetanguishene Area (61.56 per 100). Above-average rates were found in Orillia and Area (57.95 per 100) and in Barrie and Area (57.01 per 100).

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 12 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 12.9

Number, per 100 adults with diabetes, who made a mental health visit for a psychotic or nonpsychotic illness in the North Simcoe Muskoka LHIN (12), by subLHIN, 2006/07–2008/09

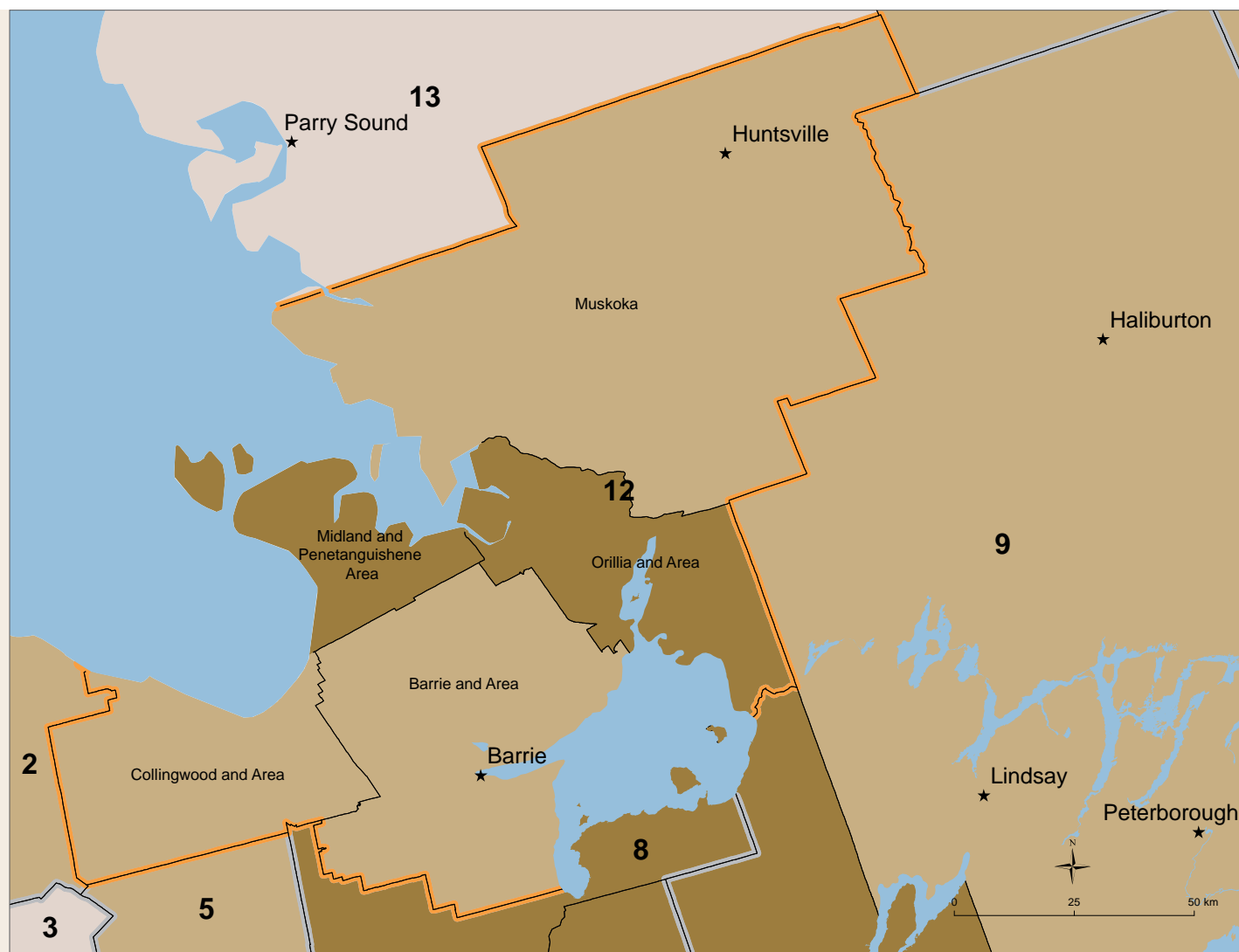
KEY FINDINGS

- In the North Simcoe Muskoka LHIN overall, about one-third of adults with diabetes had one or more mental health visits between 2006/07 and 2008/09. This rate (33.41 per 100 adults with diabetes) was very similar to the provincial average (32.89 per 100).
- There was relatively little variation in rates across subLHINs. The highest rates were seen in Midland and Penetanguishene Area (36.59 per 100) and in Orillia and Area (35.71 per 100).

NUMBER PER 100 ADULTS WITH DIABETES

- 17.52 - 24.00
- 24.01 - 29.00
- 29.01 - 33.00
- 33.01 - 37.00
- 37.01 - 41.66

- subLHIN boundary
- LHIN boundary
- LHIN 12 boundary



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

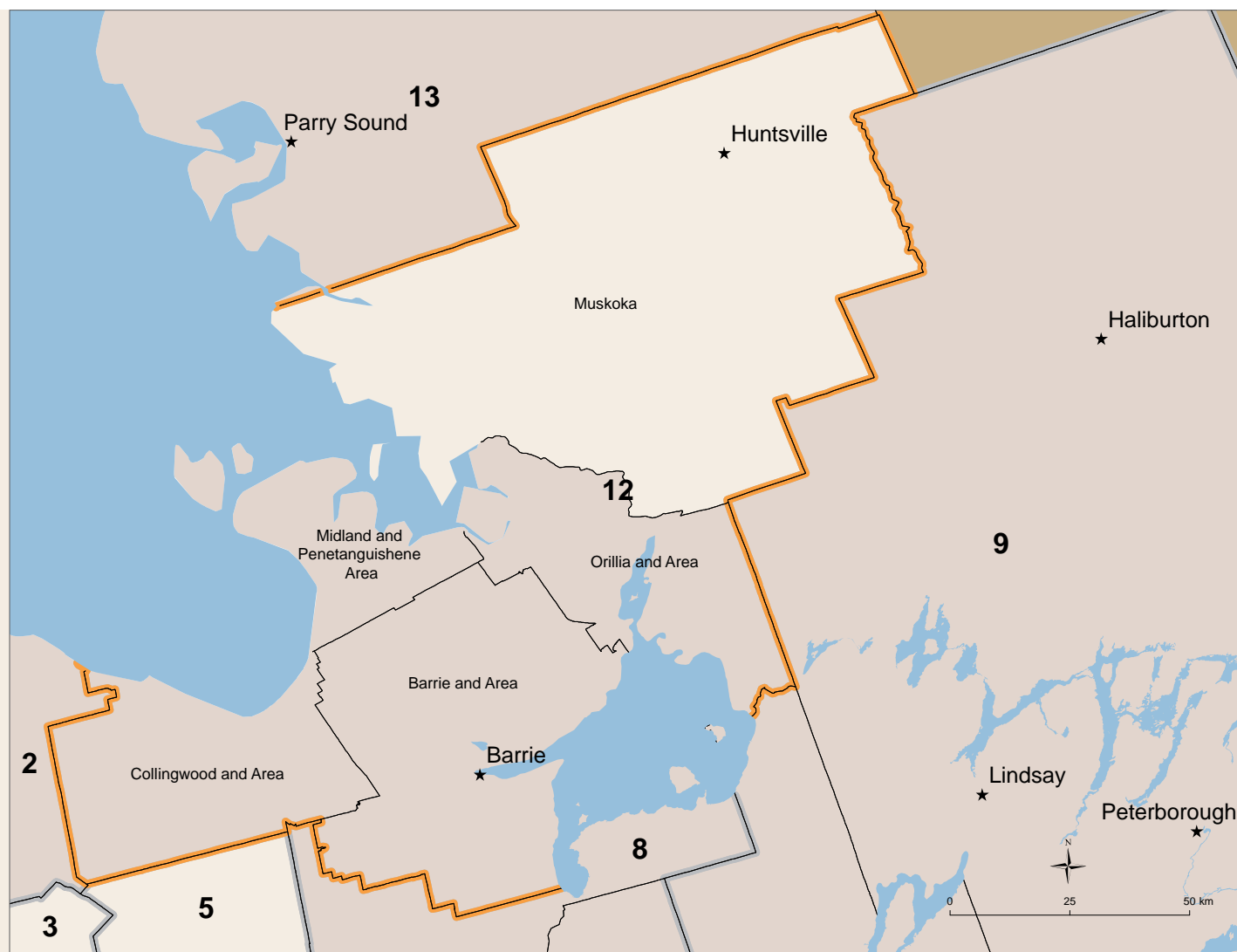
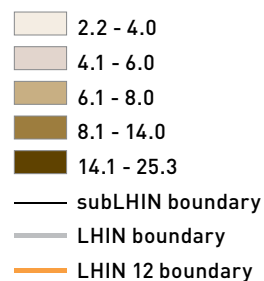
Technical note: Adults were defined as those aged 20 years and older. Rates were age- and sex-standardized using the same-aged population in the Ontario Diabetes Database on March 31, 2006 as the standard population.

EXHIBIT 12.10

Percentage of economic families with low income in the North Simcoe Muskoka LHIN (12), by subLHIN, 2005

KEY FINDINGS

- In the North Simcoe Muskoka LHIN overall, about five of every 100 families were living with low income in 2005. This percentage (5.1%) was notably lower than the provincial average of 8.6% of families.
- Higher levels of low income (although still well below the provincial average) were found in all areas south of Muskoka.

PERCENTAGE OF LOW-INCOME ECONOMIC FAMILIES

Data source: 2006 Census of Canada.

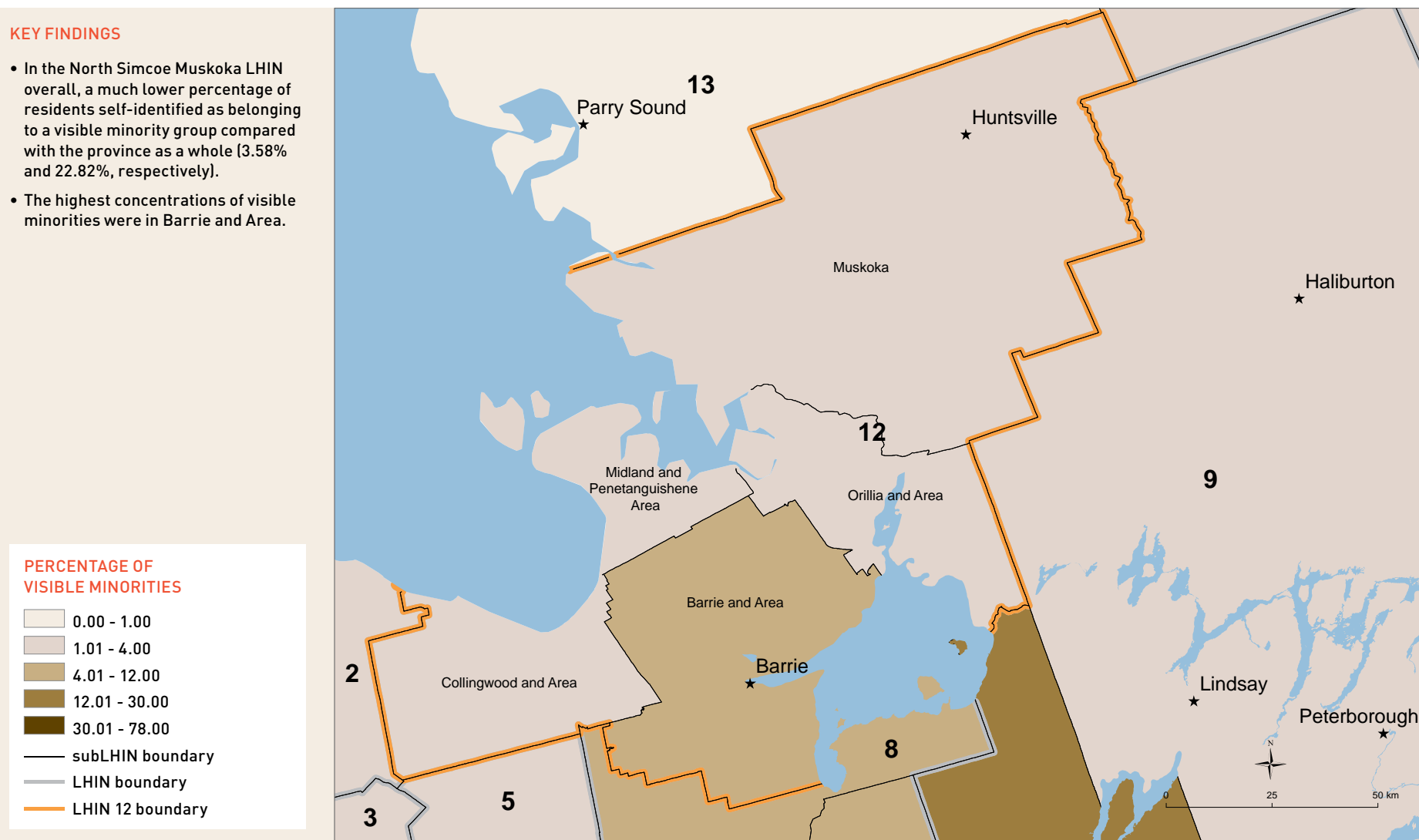
Technical note: Economic family refers to a group of two or more persons who live in the same dwelling and are related by blood, marriage, common law or adoption. Economic families with low income are defined as those that devote a larger share of their after-tax income (at least 20% more than average) 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 12.11

Percentage of visible minorities in the North Simcoe Muskoka LHIN (12), by subLHIN, 2006

KEY FINDINGS

- In the North Simcoe Muskoka LHIN overall, a much lower percentage of residents self-identified as belonging to a visible minority group compared with the province as a whole (3.58% and 22.82%, respectively).
- The highest concentrations of visible minorities were in Barrie and Area.



Data source: 2006 Census of Canada.

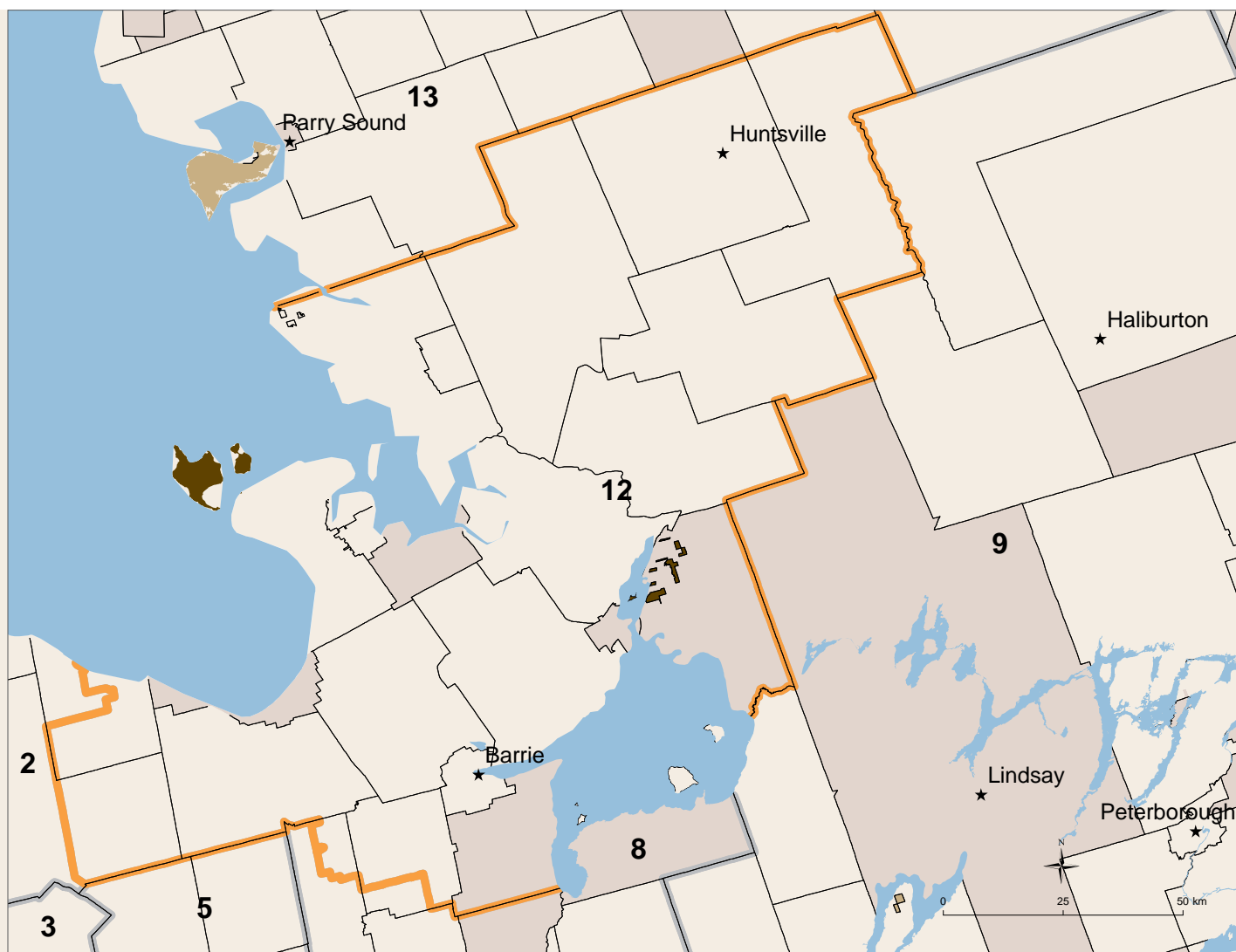
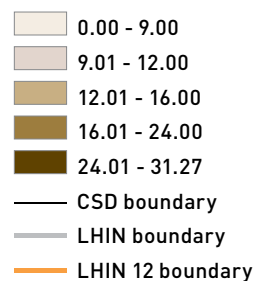
Technical note: Visible minorities include persons other than Aboriginal peoples who are non-Caucasian in race or non-white in colour.

EXHIBIT 12.12

Diabetes prevalence per 100 adults in the North Simcoe Muskoka LHIN (12), by census subdivision, on March 31, 2011

KEY FINDINGS

- In most census subdivisions across the North Simcoe Muskoka LHIN, the number of adults per 100 living with diabetes was similar to the LHIN average (8.79 per 100) and the provincial average (9.64 per 100).
- The highest levels of diabetes prevalence were in several of the LHIN's First Nations communities located northwest of the Midland and Penetanguishene area and northeast of Orillia.

PREVALENCE PER 100 ADULTS

Data sources: Ontario Diabetes Database; Registered Persons Database.

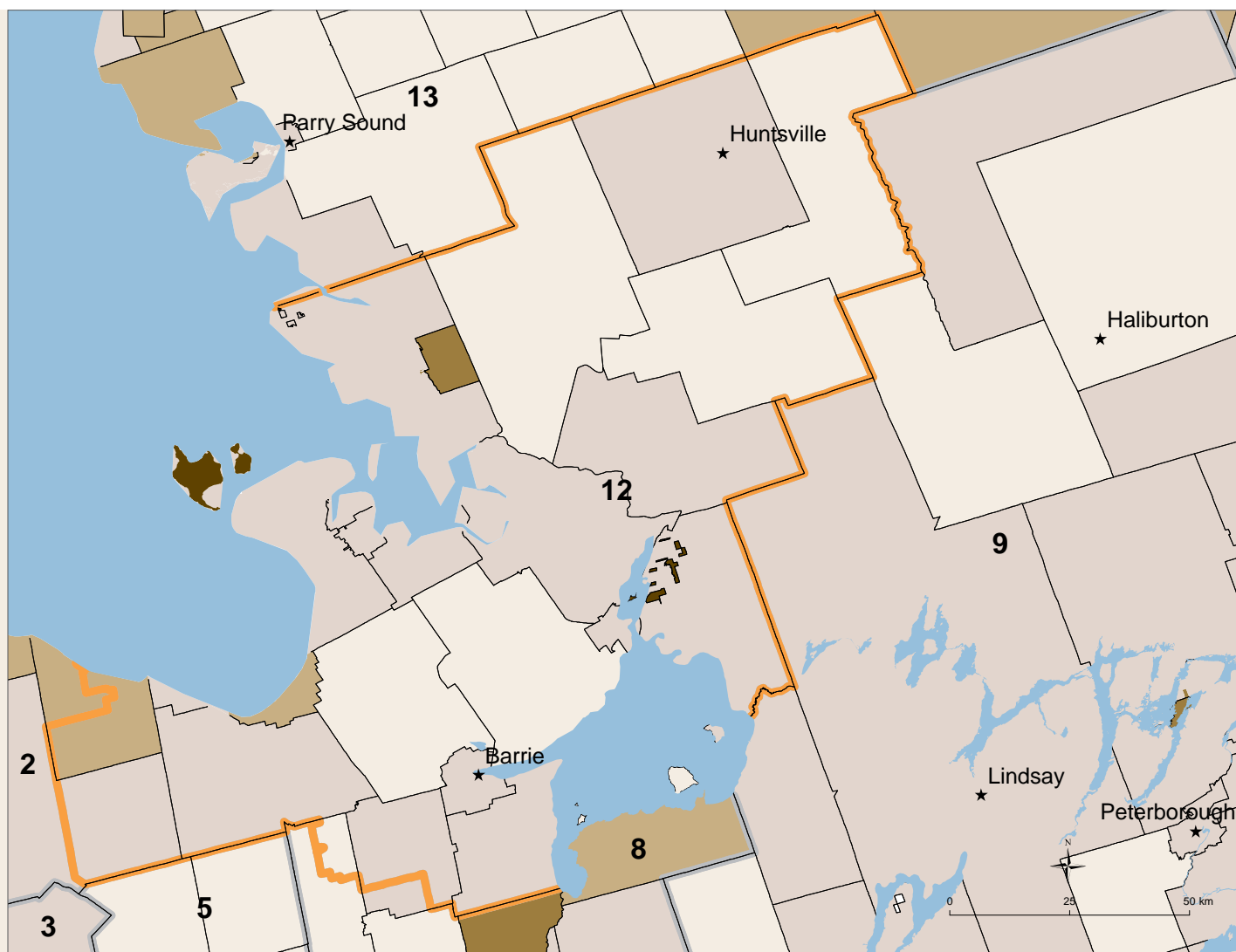
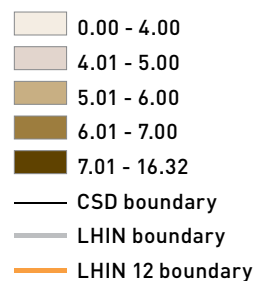
Technical note: Adults were defined as those aged 20 years and older. Rates were age- and sex-standardized using the 2001 Ontario population of the same age as the standard population.

EXHIBIT 12.13

Diabetes incidence per 100 adults in the North Simcoe Muskoka LHIN (12), by census subdivision, 2005/06–2009/10

KEY FINDINGS

- In most census subdivisions, the incidence of diabetes in adults over the five-year period between April 2005 and March 2010 was similar to the LHIN average (4.38 per 100) and the provincial average (4.85 per 100).
- The highest diabetes incidence was seen in several of the LHIN's First Nations communities located northwest of Penetanguishene, northeast of Orillia, and northwest in the Muskoka area.

INCIDENCE PER 100 ADULTS

Data sources: Ontario Diabetes Database; Registered Persons Database.

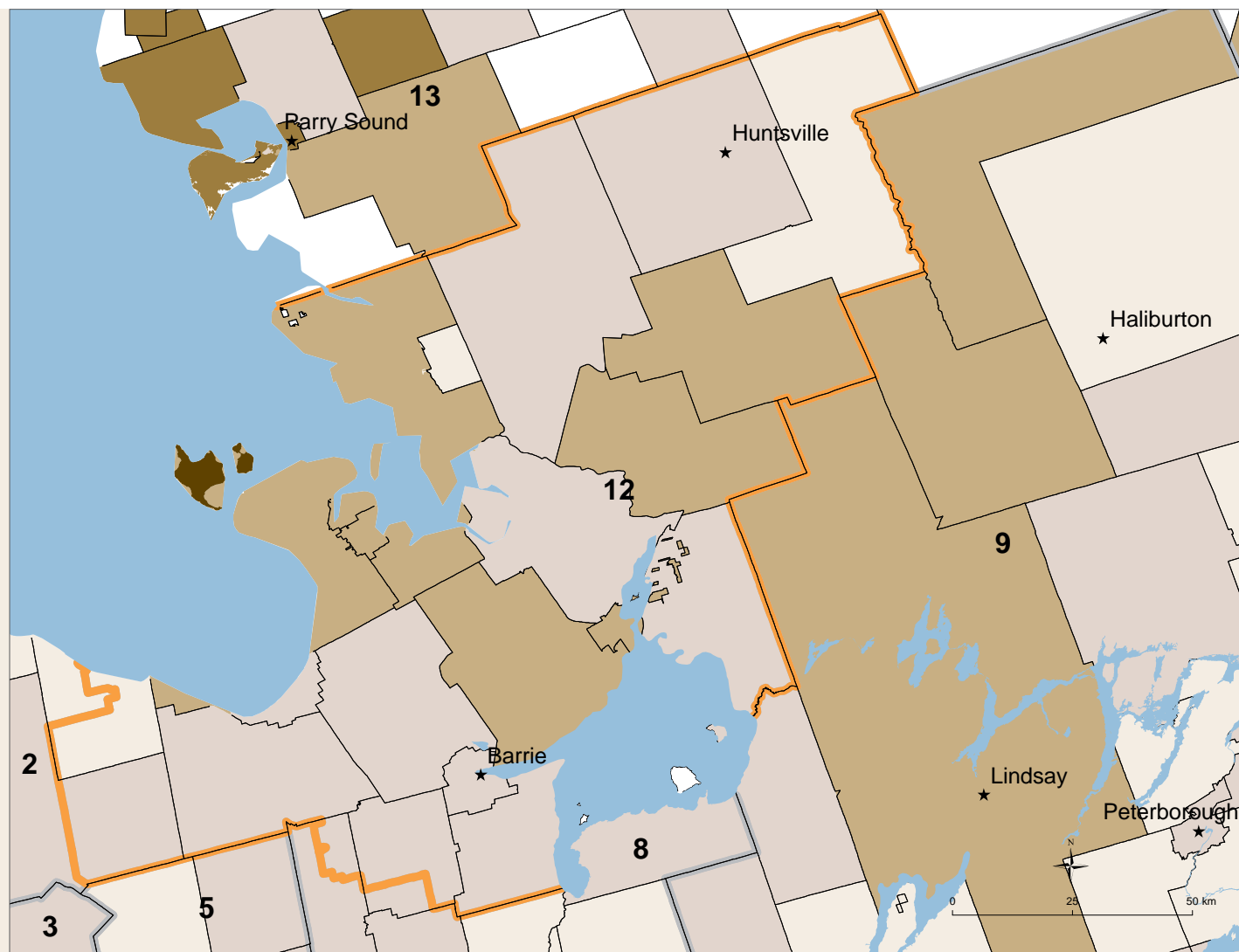
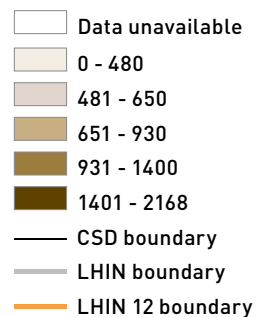
Technical note: Adults were defined as those aged 20 years and older. Rates were age- and sex-standardized using the 2001 Ontario population of the same age as the standard population.

EXHIBIT 12.14

Number, per 10,000 adults with diabetes, who had at least one hospitalization or emergency department visit for hyper- or hypoglycemia in the North Simcoe Muskoka LHIN (12), by census subdivision, 2006/07–2010/11

KEY FINDINGS

- In most census subdivisions (CSDs), rates of hospitalizations or emergency department visits for hyper- or hypoglycemia were similar to the LHIN average (643 per 10,000 adults with diabetes) and the provincial average (486 per 10,000).
- The highest rate was seen in a First Nations community located northwest of the Midland and Penetanguishene area.

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.

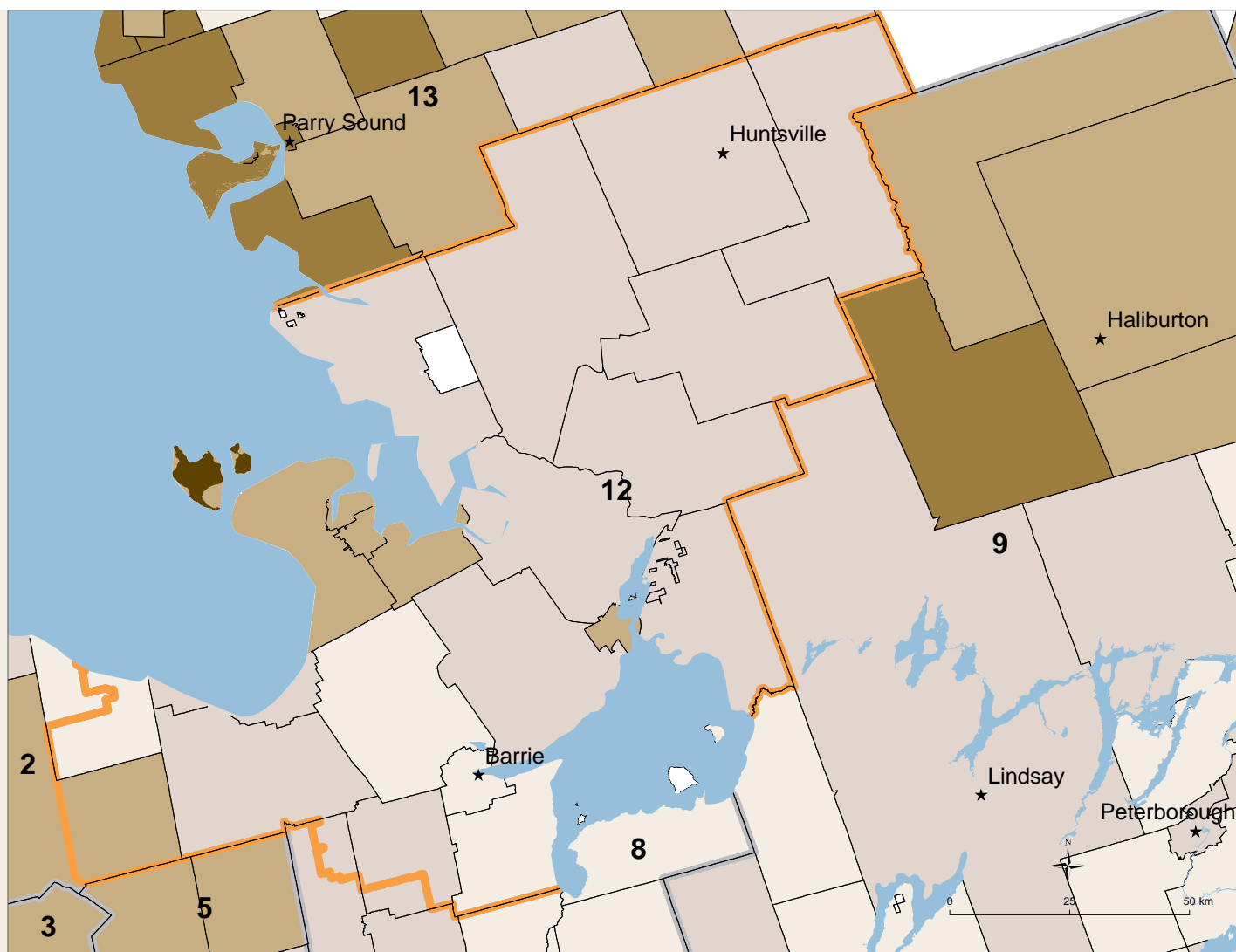
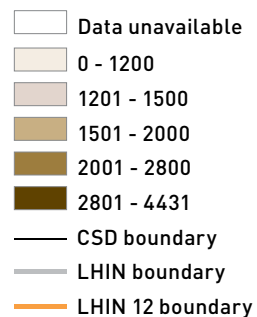
Technical note: Adults were defined as those aged 20 years and older. Rates were age- and sex-standardized using the same-aged population in the Ontario Diabetes Database on March 31, 2006 as the standard population.

EXHIBIT 12.15

Number, per 10,000 adults with diabetes, who had at least one hospitalization or emergency department visit for any acute complication in the North Simcoe Muskoka LHIN (12), by census subdivision, 2006/07–2010/11

KEY FINDINGS

- In most census subdivisions between 2006/07 and 2010/11, rates of hospitalizations or emergency department (ED) visits for acute complications of diabetes were similar to the LHIN average (1,342 per 10,000 adults with diabetes) and the provincial average (1,029 per 10,000).
- The highest rate of hospitalizations/ED visits was found in a First Nations community northwest of Penetanguishene.

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.

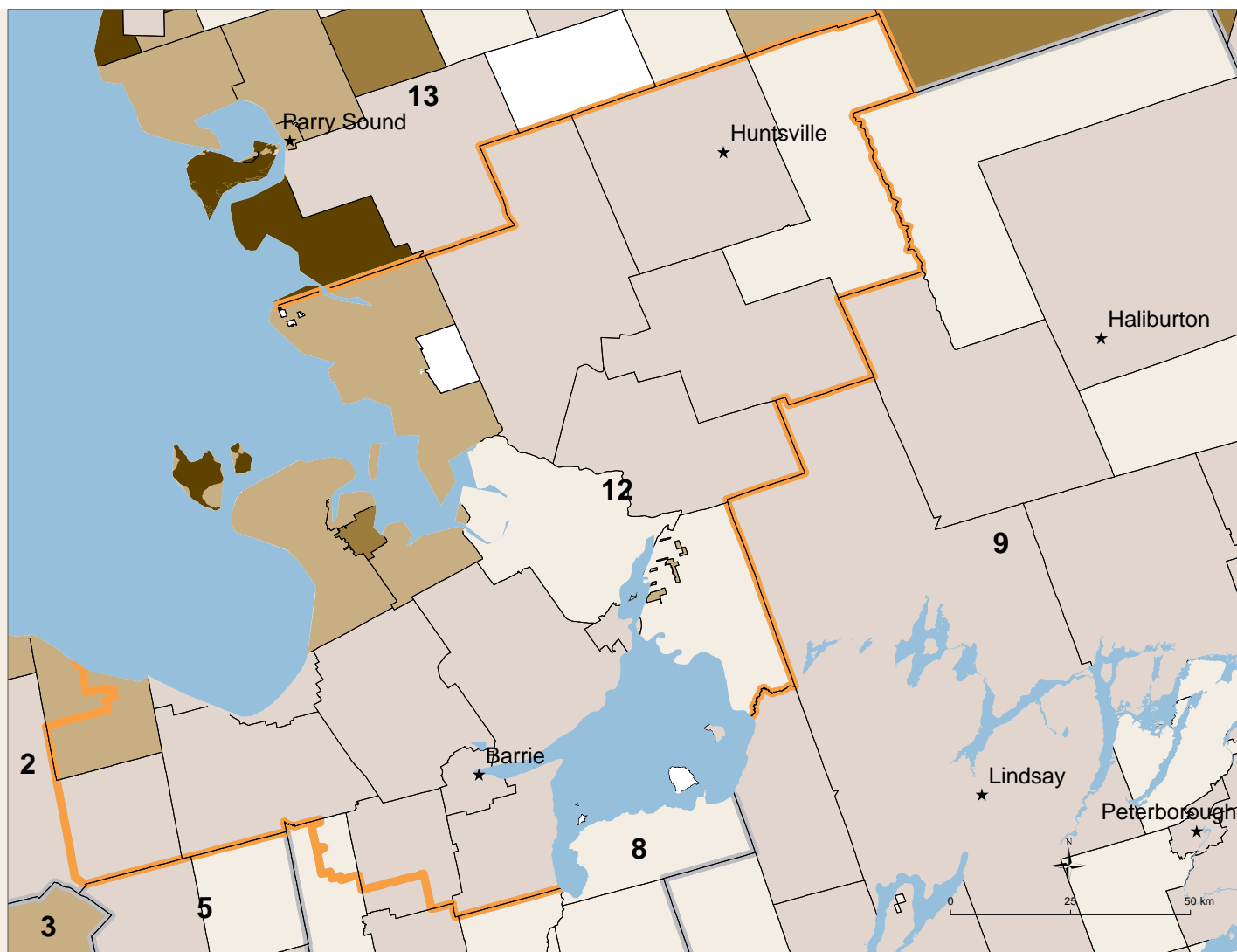
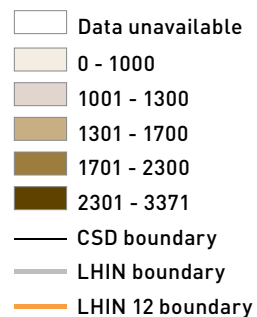
Technical notes: Adults were defined as those aged 20 years and older. Rates were age- and sex-standardized using the same-aged population in the Ontario Diabetes Database on March 31, 2006 as the standard population. Acute complications consisted of hyper- or hypoglycemia, skin and soft tissue infection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

EXHIBIT 12.16

Number, per 10,000 adults with diabetes, who had any chronic complication in the North Simcoe Muskoka LHIN (12), by census subdivision, 2006/07–2010/11

KEY FINDINGS

- Between 2006/07 and 2010/11, rates of chronic complications of diabetes in most census subdivisions were a range similar to the LHIN average (1,205 per 10,000 adults with diabetes) and the provincial average (1,016 per 10,000).
- The highest rate was seen in a First Nations community northwest of Penetanguishene. Above-average rates were also noted in Midland and in several largely rural communities situated along Georgian Bay.

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.

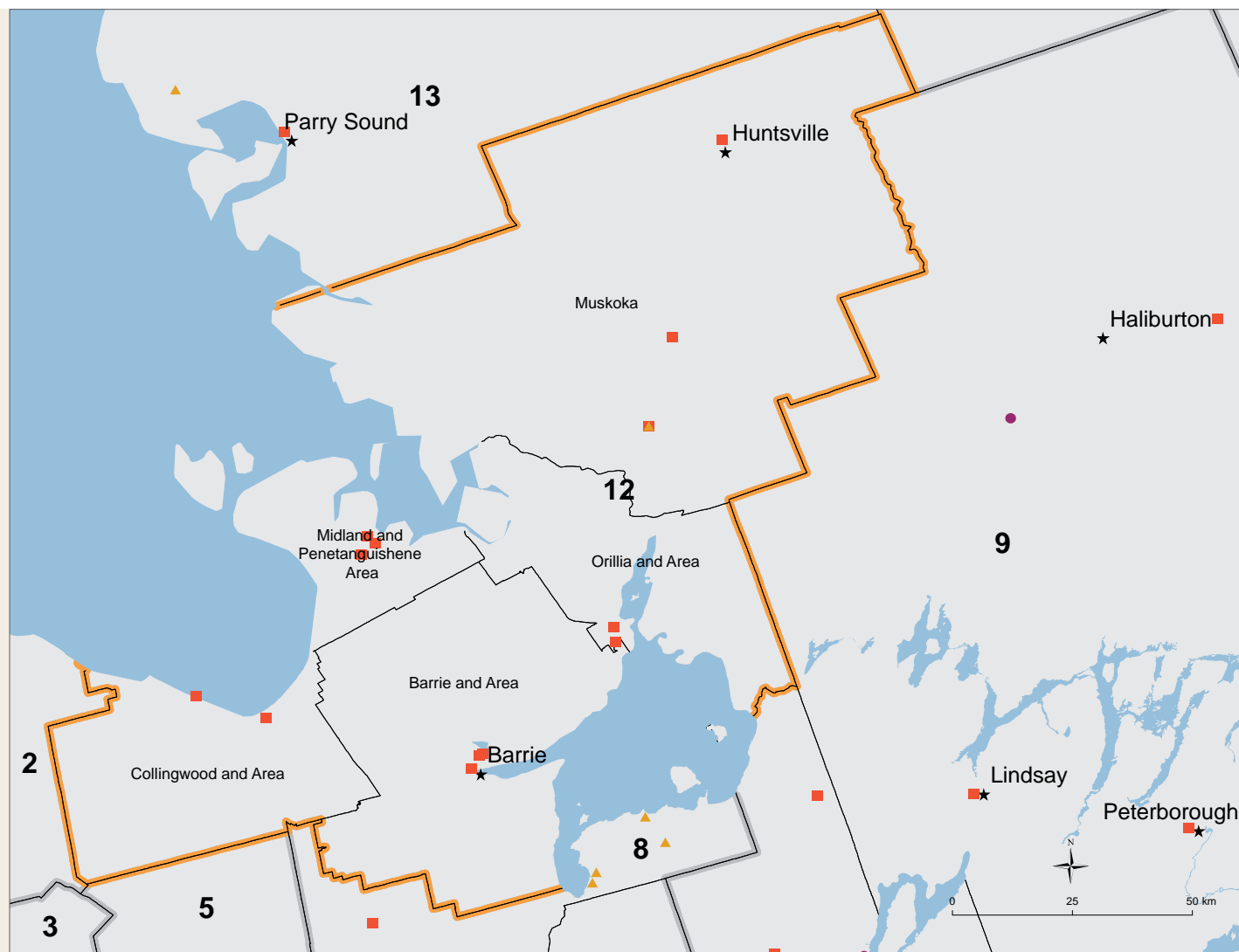
Technical note: Adults were defined as those aged 20 years and older. Rates were age- and sex-standardized using the same-aged population in the Ontario Diabetes Database on March 31, 2006 as the standard population. A chronic complication consisted of hospitalization for a cardiovascular condition or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

EXHIBIT 12.17**Locations of diabetes education programs in the North Simcoe Muskoka LHIN (12), 2011****KEY FINDINGS**

- Main diabetes education programs were concentrated in the more urban centres, such as Midland, Orillia and Barrie.
- There was one outreach program located in the south part of Muskoka.

TYPE OF PROGRAM

- Main program
- Program satellite
- ▲ Outreach program
- subLHIN boundary
- LHIN boundary
- LHIN 12 boundary

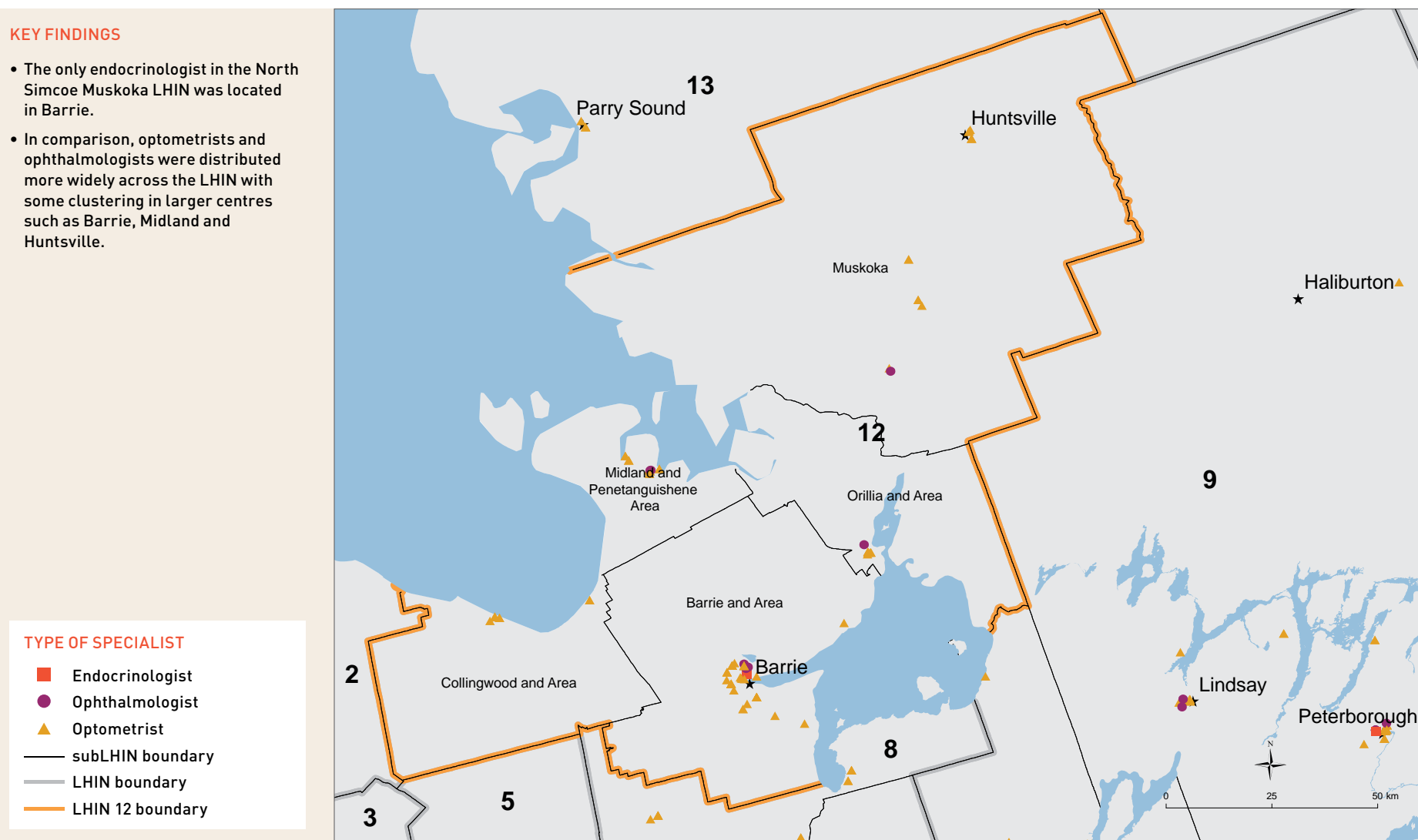


Data source: Diabetes Regional Coordination Centres.

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

EXHIBIT 12.18**Locations of endocrinologists and eye specialists in the North Simcoe Muskoka LHIN (12), 2010/11****KEY FINDINGS**

- The only endocrinologist in the North Simcoe Muskoka LHIN was located in Barrie.
- In comparison, optometrists and ophthalmologists were distributed more widely across the LHIN with some clustering in larger centres such as Barrie, Midland and Huntsville.



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.