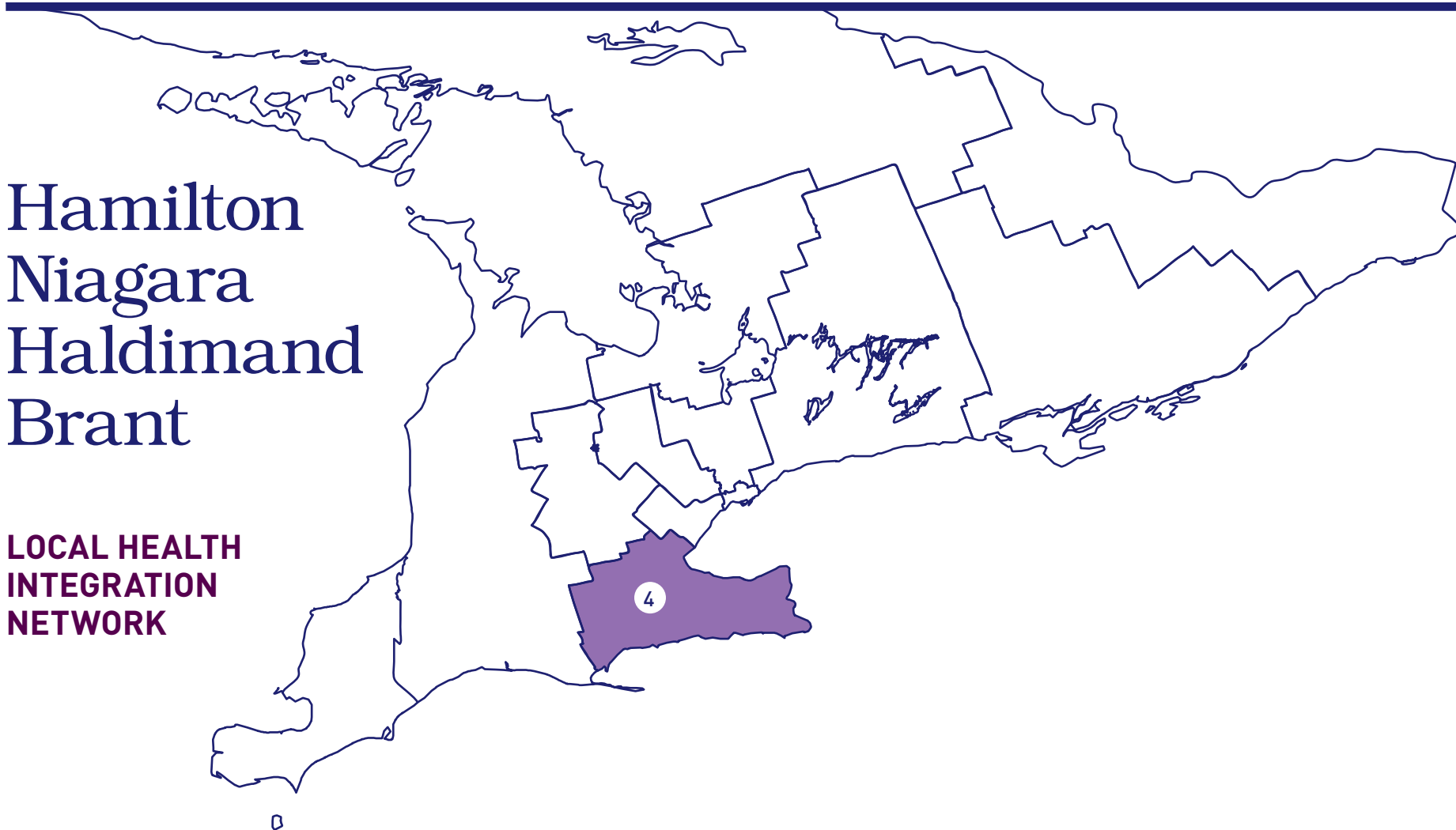


Hamilton
Niagara
Haldimand
Brant

LOCAL HEALTH
INTEGRATION
NETWORK



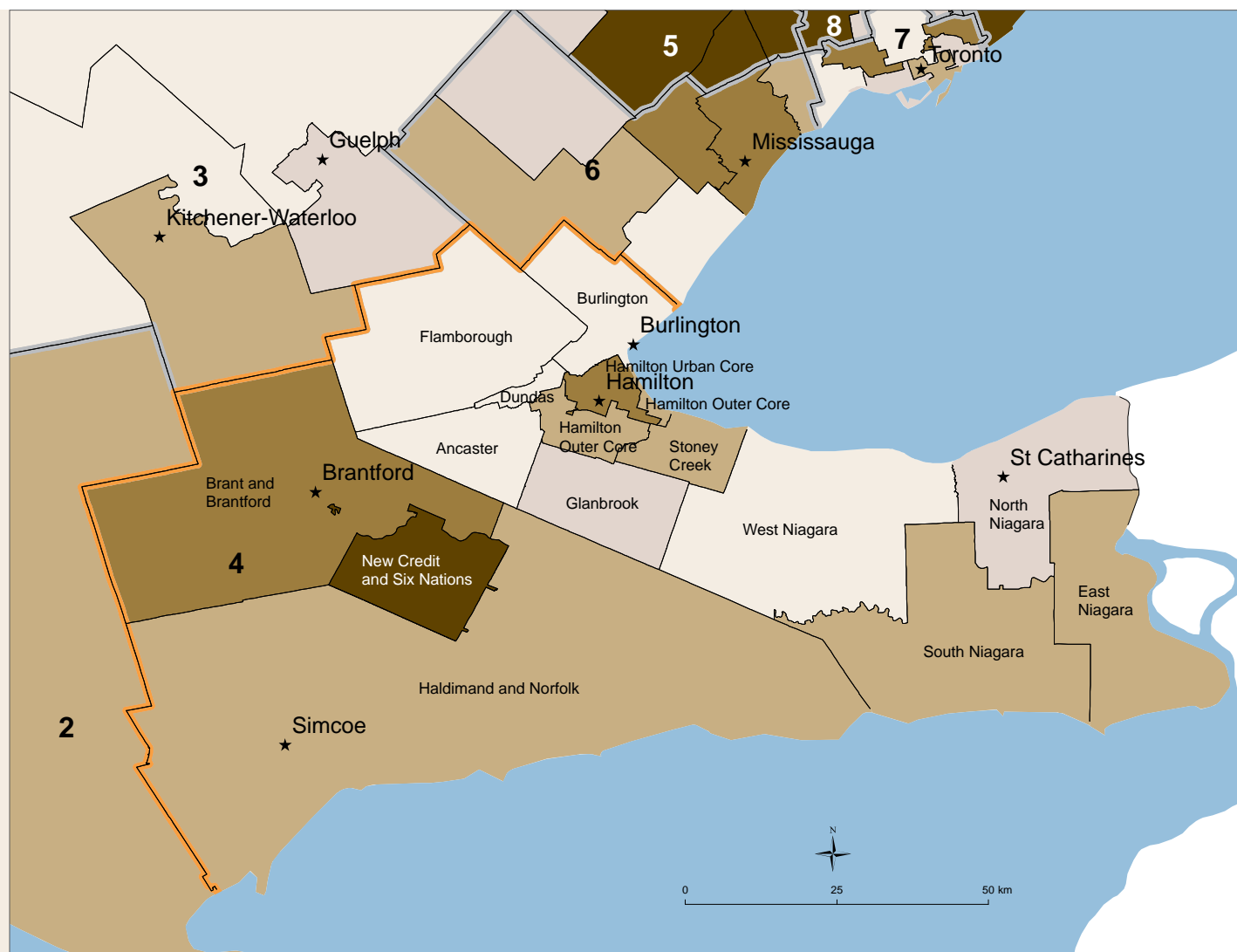
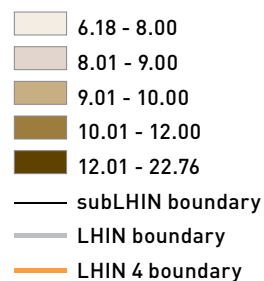
Diabetes Measures by Region

EXHIBIT 4.1

Diabetes prevalence per 100 adults in the Hamilton Niagara Haldimand Brant LHIN (4), by subLHIN, on March 31, 2011

KEY FINDINGS

- For every 100 adults in the Hamilton Niagara Haldimand Brant LHIN, there were about nine people living with diabetes. This prevalence (9.15 per 100) was slightly lower than the Ontario average (9.64 per 100).
- The highest prevalence was in the New Credit and Six Nations subLHIN (22.76 per 100). Higher levels of prevalence (above 10 per 100) were also found in Brant and Brantford and in Hamilton Urban Core.

PREVALENCE PER 100 ADULTS

Data sources: Ontario Diabetes Database; Registered Persons Database.

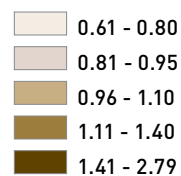
Technical note: Adults were defined as those aged 20 years and older. Rates were age- and sex-standardized using the 2001 Ontario population of the same age as the standard population.

EXHIBIT 4.2

Diabetes incidence per 100 adults in the Hamilton Niagara Haldimand Brant LHIN (4), by subLHIN, 2009/10

KEY FINDINGS

- For every 100 adults living in the Hamilton Niagara Haldimand Brant LHIN who were free of diabetes in March 2009, nearly one was diagnosed with diabetes in the subsequent year. This incidence rate (0.96 per 100) was nearly identical to that for Ontario as a whole (0.97 per 100).
- Diabetes incidence was highest in the New Credit and Six Nations subLHIN (2.75 per 100). Above-average rates (above 1.10 per 100) were also seen in Hamilton Urban Core and in Haldimand and Norfolk.

INCIDENCE PER 100 ADULTS

- subLHIN boundary
- LHIN boundary
- LHIN 4 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 4.3

Number, per 10,000 adults with diabetes, who had at least one hospitalization or emergency department visit for hyper- or hypoglycemia in the Hamilton Niagara Haldimand Brant LHIN (4), by subLHIN, 2006/07–2010/11

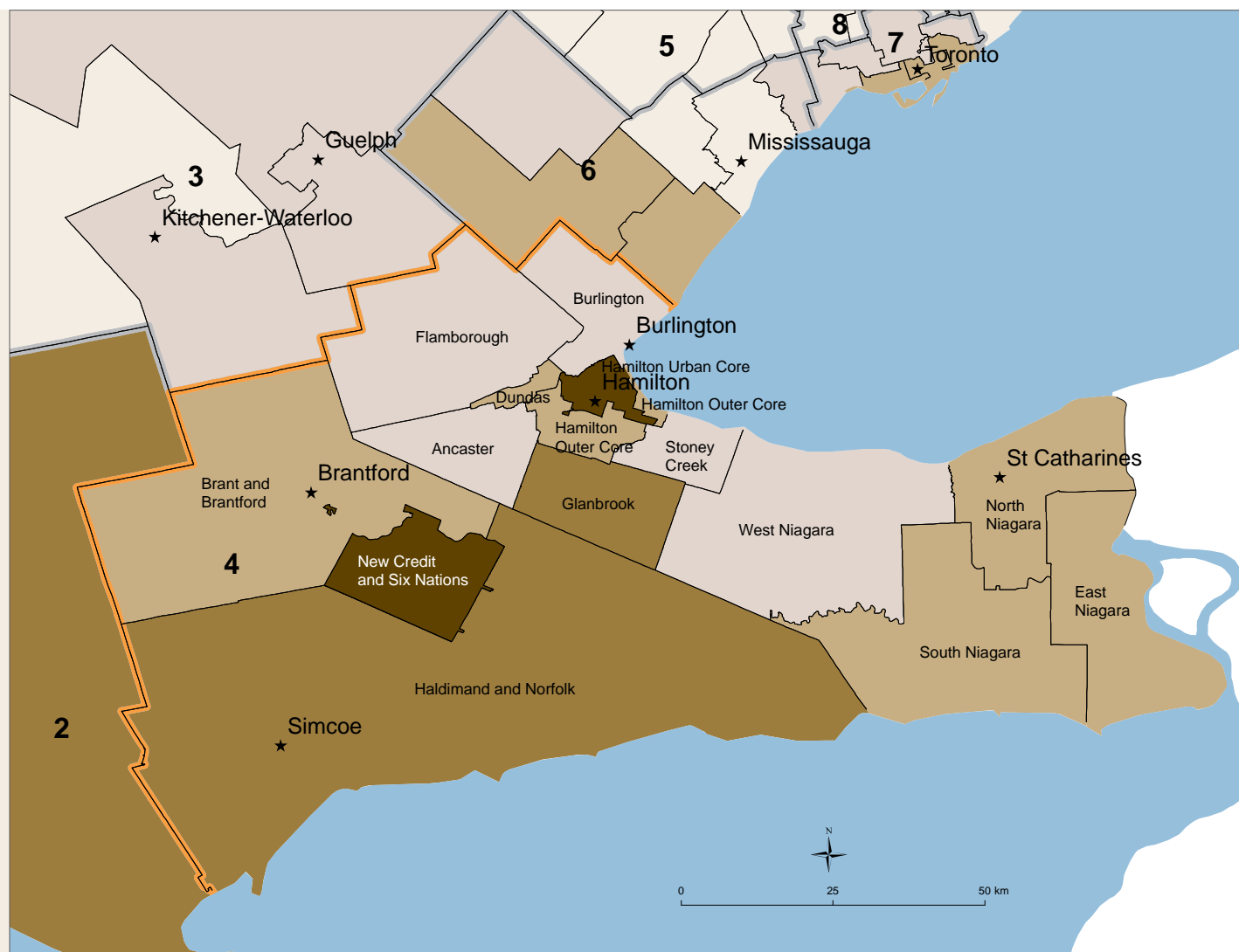
KEY FINDINGS

- Overall, for every 100 adults living with diabetes in the Hamilton Niagara Haldimand Brant LHIN on March 31, 2006, approximately six had at least one hospitalization or emergency department visit for hyper- or hypoglycemia in the subsequent five years. This rate (565 per 10,000 adults with diabetes) was higher than the provincial average (486 per 10,000).
- Rates varied by nearly two-fold across subLHINs. The highest rates were found in New Credit and Six Nations (1,001 per 10,000) and in Hamilton Urban Core (814 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 4 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 4.4

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 Hamilton Niagara Haldimand Brant LHIN (4), by subLHIN, 2006/07–2010/11

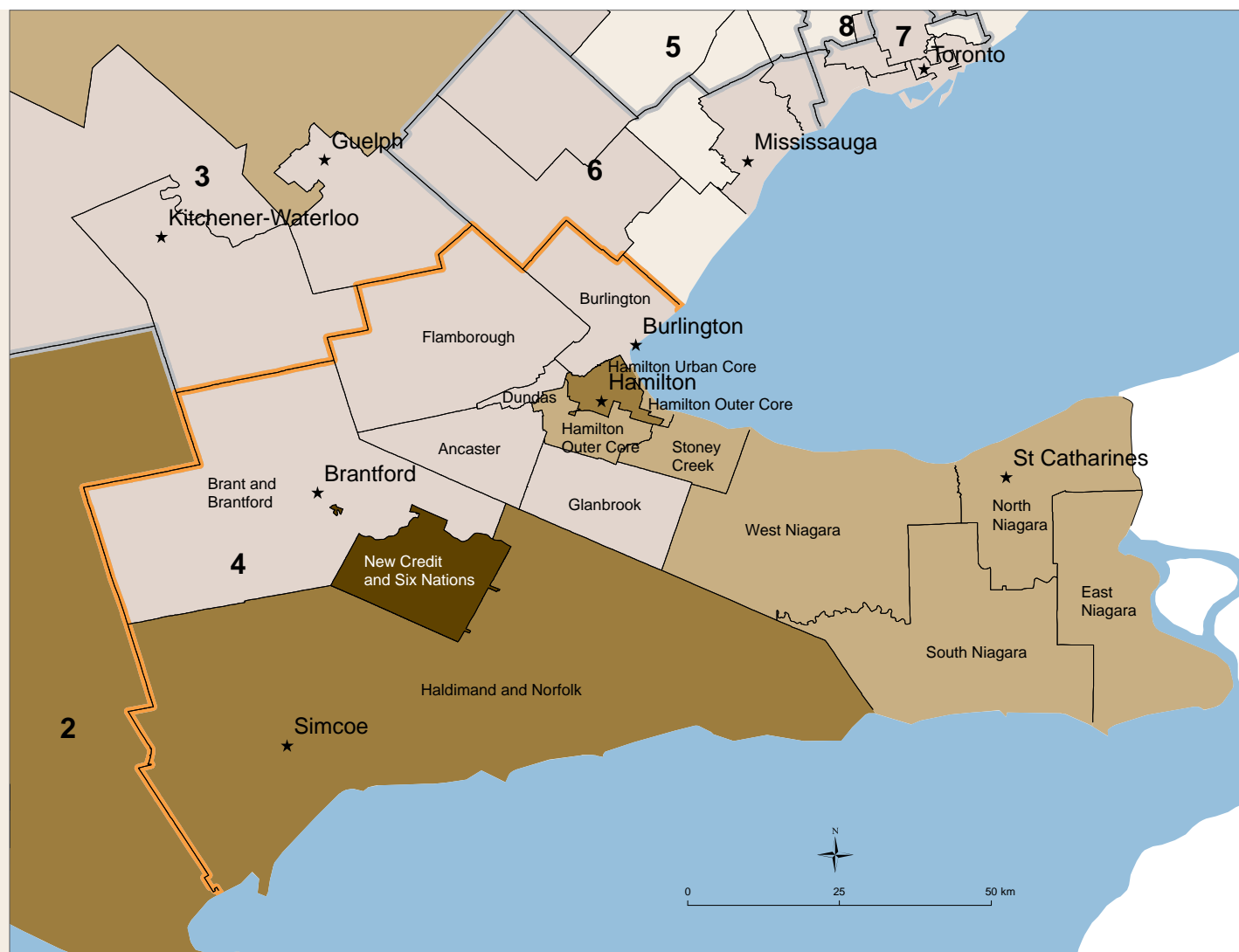
KEY FINDINGS

- For every 100 adults living with diabetes in the Hamilton Niagara Haldimand Brant LHIN in March 2006, more than 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 (711 per 10,000 adults with diabetes) was higher than the provincial average (618 per 10,000).
- Rates varied by nearly 2.5-fold across subLHINs, ranging from 474 per 10,000 in Ancaster to 1,133 per 10,000 in New Credit and Six Nations.

NUMBER PER 10,000 ADULTS WITH DIABETES

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

- subLHIN boundary
- LHIN boundary
- LHIN 4 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.

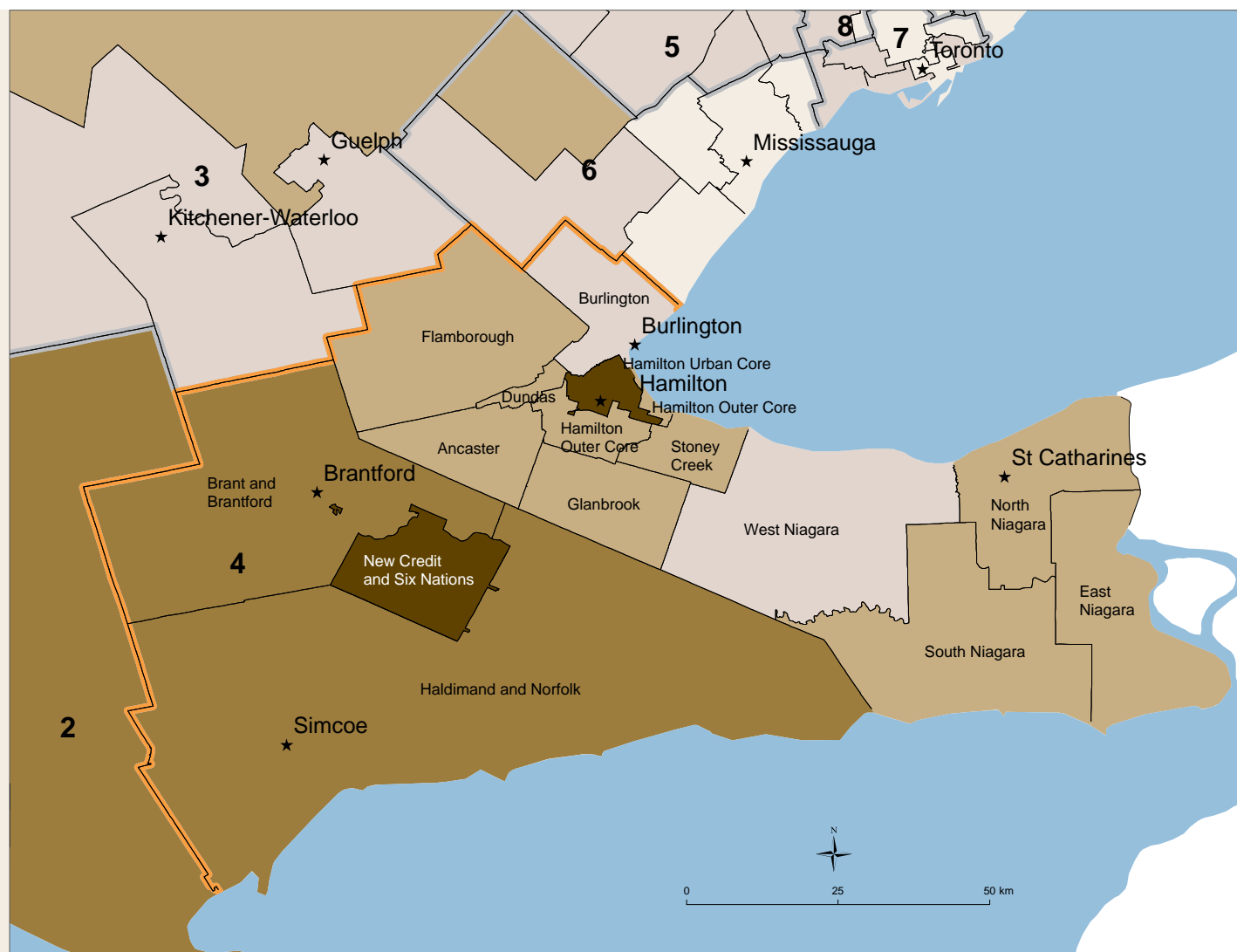
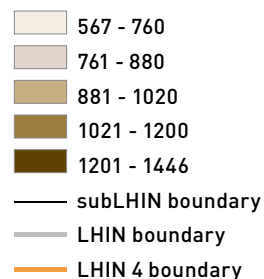
EXHIBIT 4.5

Number, per 10,000 adults with diabetes, who had at least one hospitalization for a cardiovascular condition in Hamilton Niagara Haldimand Brant LHIN (4), by subLHIN, 2006/07–2010/11

KEY FINDINGS

- Approximately one in 10 adults with diabetes living in the Hamilton Niagara Haldimand Brant LHIN in 2006 was hospitalized at least once for a cardiovascular condition in the ensuing five years. This rate (1,005 per 10,000 adults with diabetes) was higher than the provincial average (888 per 10,000).
- Rates varied by more than 1.5-fold across subLHINs. The highest rates of hospitalizations for cardiovascular conditions were in Hamilton Urban Core (1,270 per 10,000) and New Credit and Six Nations (1,245 per 10,000).

NUMBER PER 10,000 ADULTS WITH DIABETES



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

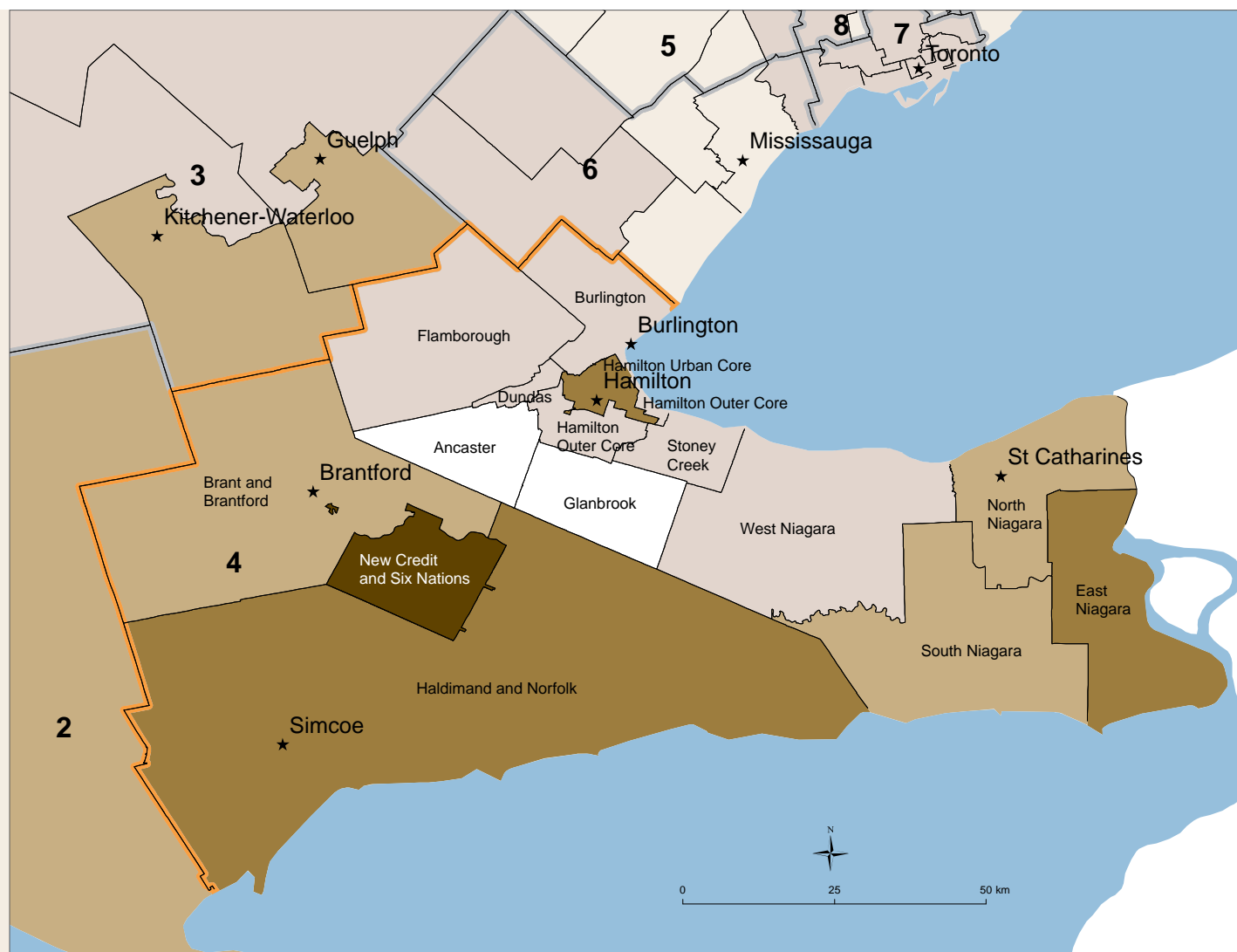
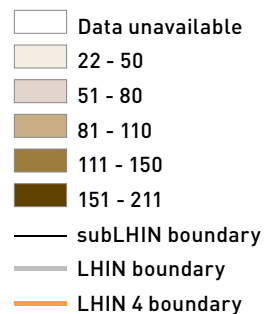
Technical notes: Adults were defined as those aged 20 years and older. Rates were age- and sex-standardized using the same-aged population in the Ontario Diabetes Database on March 31, 2006 as the standard population. Cardiovascular conditions included myocardial infarction, stroke, congestive heart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

EXHIBIT 4.6

Number, per 10,000 adults with diabetes, who had a lower extremity amputation in the Hamilton Niagara Haldimand Brant LHIN (4), by subLHIN, 2006/07–2010/11

KEY FINDINGS

- In the Hamilton Niagara Haldimand Brant LHIN, nearly nine of every 1,000 adults with diabetes experienced a lower extremity amputation between 2006/07 and 2010/11. This rate (89 per 10,000 adults with diabetes) was higher than the Ontario average (74 per 10,000).
- Rates varied by more than eight-fold across subLHINs.
- The highest rate was in the New Credit and Six Nations subLHIN (187 per 10,000). High rates were also seen in Hamilton Urban Core, East Niagara, and Haldimand and Norfolk.

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 4.7

Number, per 10,000 adults with diabetes, who received chronic dialysis or kidney transplantation in the Hamilton Niagara Haldimand Brant LHIN (4), by subLHIN, 2006/07–2010/11

KEY FINDINGS

- Overall in the Hamilton Niagara Haldimand Brant LHIN, the rate of chronic dialysis or kidney transplantation was 135 per 10,000 adults with diabetes, a level that was higher than the provincial average (122 per 10,000).
- Rates varied by as much as three-fold across subLHINs, ranging from 90 per 10,000 in Dundas to 280 per 10,000 in New Credit and Six Nations. Higher rates were also found in Hamilton Urban Core and in North and East Niagara.

NUMBER PER 10,000 ADULTS WITH DIABETES

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

- subLHIN boundary
- LHIN boundary
- LHIN 4 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 4.8

Number, per 100 adults with diabetes, who had an additional chronic medical condition in the Hamilton Niagara Haldimand Brant LHIN (4), by subLHIN, 2006/07–2008/09

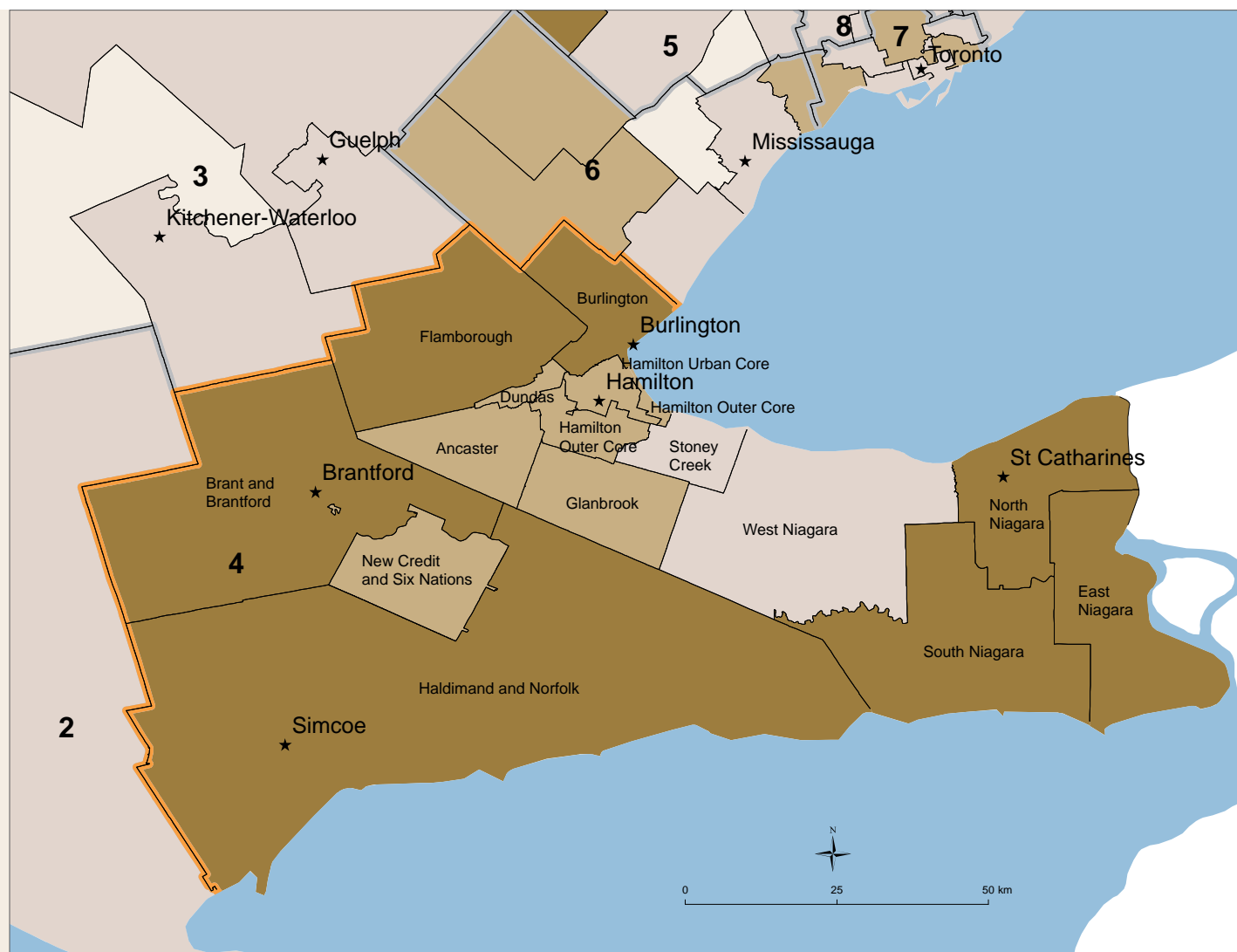
KEY FINDINGS

- In the Hamilton Niagara Haldimand Brant LHIN overall, 57 of every 100 adults with diabetes had at least one chronic medical condition other than diabetes between 2006/07 and 2008/09. This rate (57.01 per 100) was slightly higher than the provincial average (54.84 per 100).
- There was some variation in rates across subLHINs, with higher rates seen in the peripheral subLHINs and lower rates elsewhere.

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 4 boundary



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

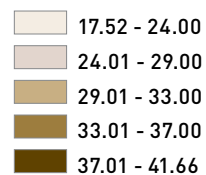
Technical note: Adults were defined as those aged 20 years and older. Rates were age- and sex-standardized using the same-aged population in the Ontario Diabetes Database on March 31, 2006 as the standard population.

EXHIBIT 4.9

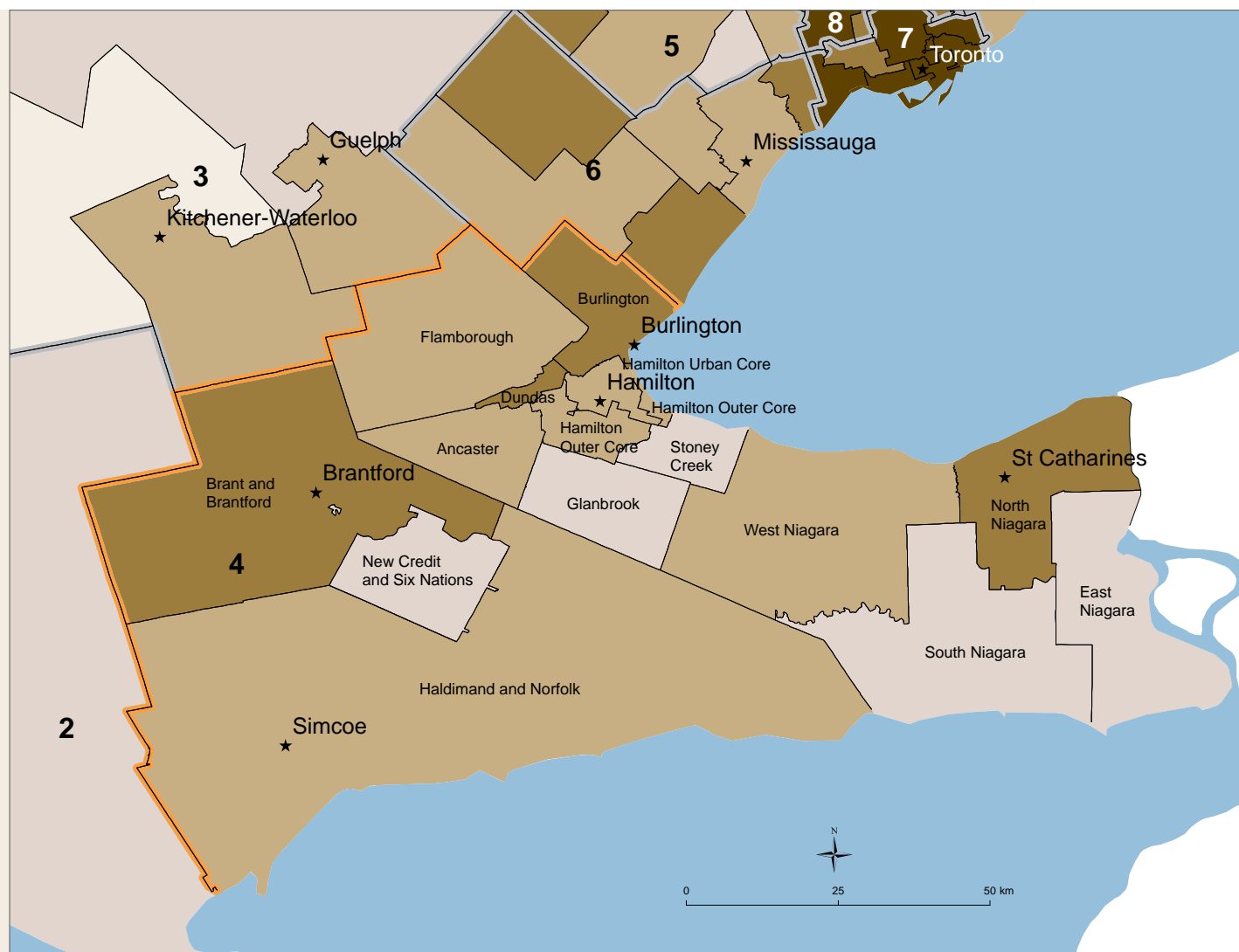
Number, per 100 adults with diabetes, who made a mental health visit for a psychotic or nonpsychotic illness in the Hamilton Niagara Haldimand Brant LHIN (4), by subLHIN, 2006/07–2008/09

KEY FINDINGS

- In Hamilton Niagara Haldimand Brant, nearly one in three adults with diabetes had one or more mental health visits between 2006/07 and 2008/09. This rate (31.59 per 100) was slightly lower than the provincial average (32.89 per 100 adults with diabetes).
- The highest rates (above 33 per 100) were seen in Brant and Brantford, Burlington, Dundas and North Niagara.

NUMBER PER 100 ADULTS WITH DIABETES

- subLHIN boundary
- LHIN boundary
- LHIN 4 boundary



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

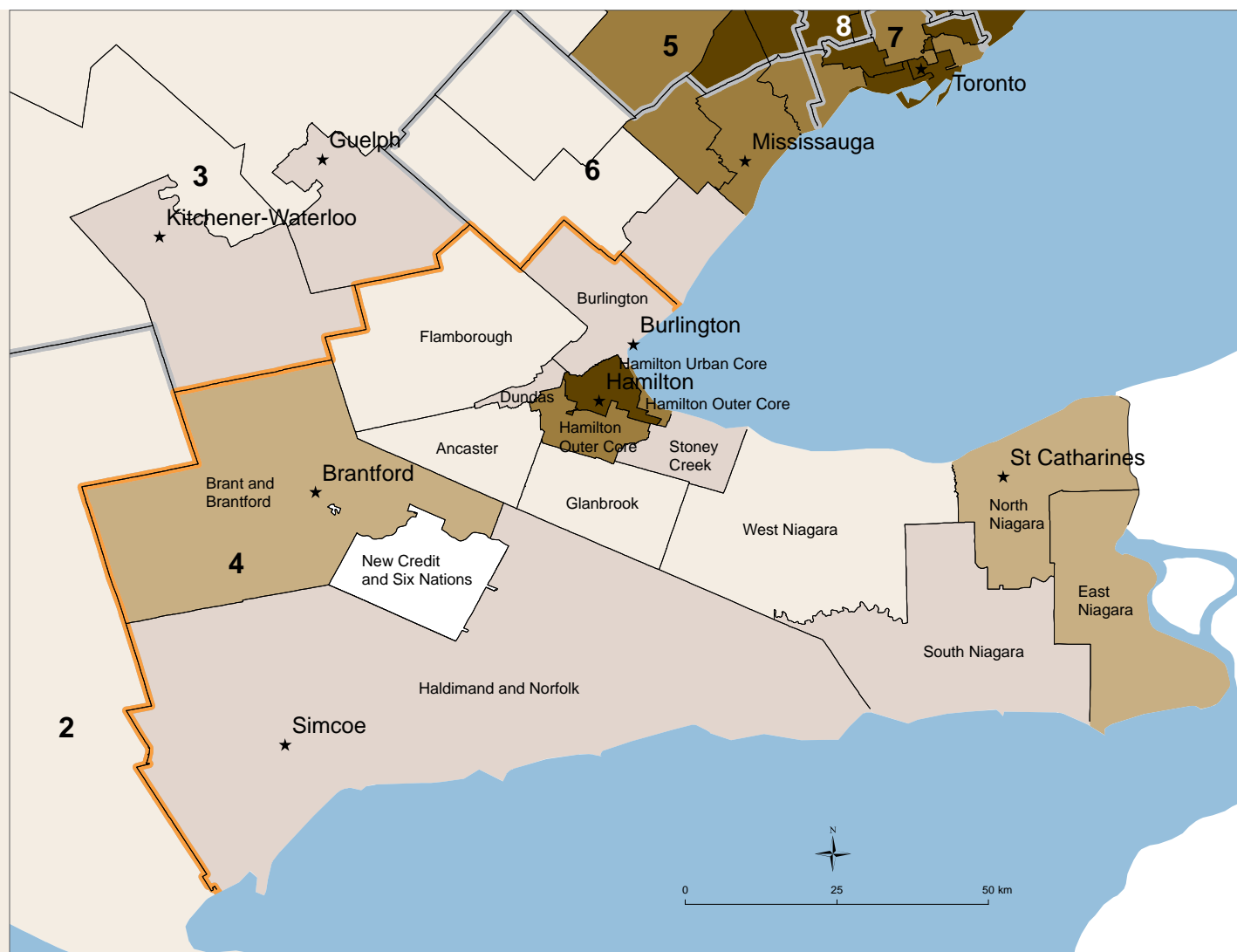
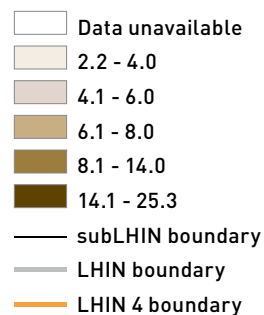
Technical note: Adults were defined as those aged 20 years and older. Rates were age- and sex-standardized using the same-aged population in the Ontario Diabetes Database on March 31, 2006 as the standard population.

EXHIBIT 4.10

Percentage of economic families with low income in the Hamilton Niagara Haldimand Brant LHIN (4), by subLHIN, 2005

KEY FINDINGS

- In the Hamilton Niagara Haldimand Brant LHIN, nearly eight of every 100 families were living with low income in 2005. This percentage (7.5%) was lower than the provincial average of 8.6% of families.
- Levels of low income were highest in Hamilton Urban Core, followed by Hamilton Outer Core.

PERCENTAGE OF LOW-INCOME ECONOMIC FAMILIES

Data source: 2006 Census of Canada.

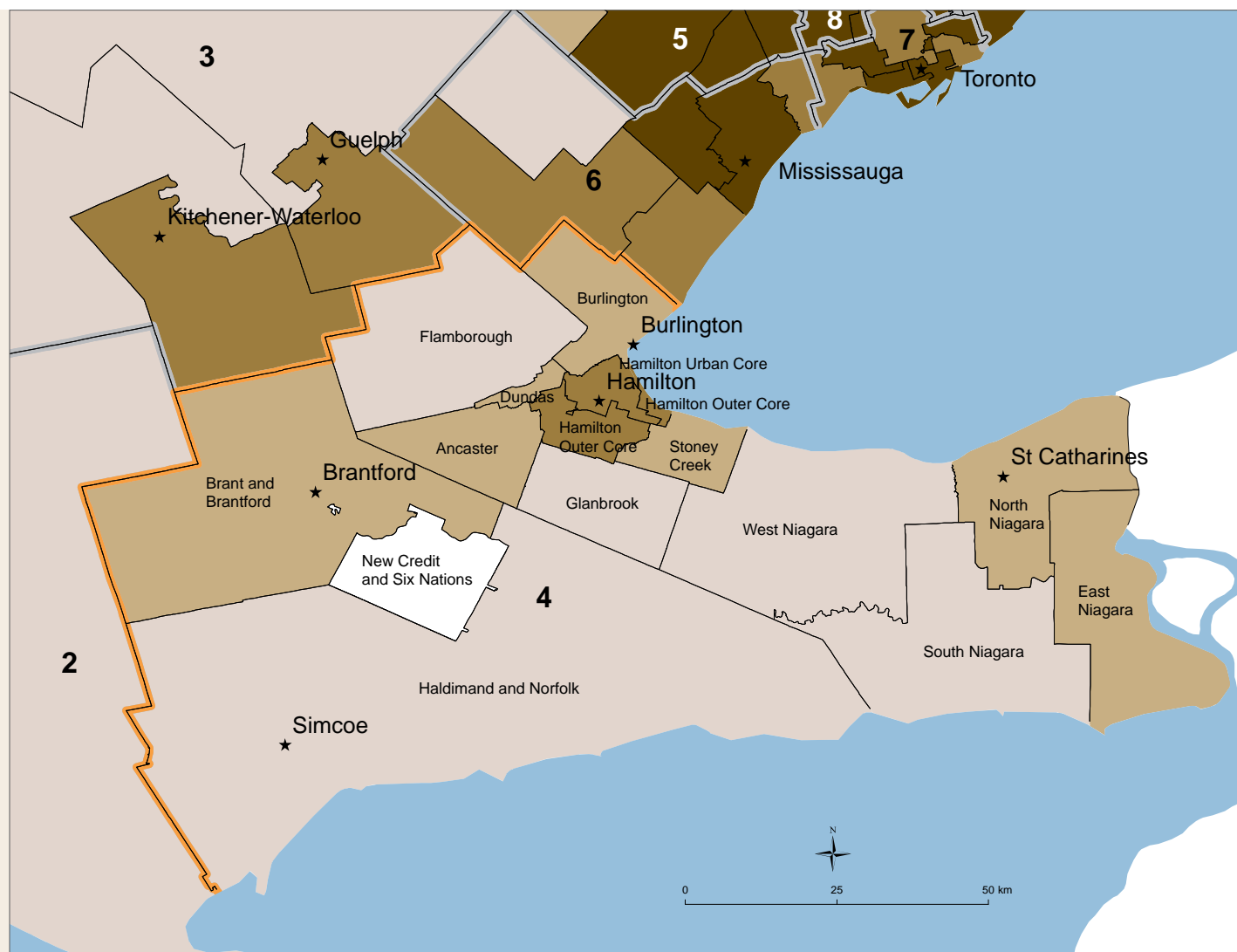
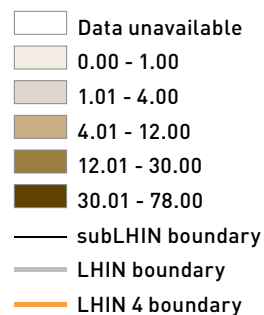
Technical note: Economic family refers to a group of two or more persons who live in the same dwelling and are related by blood, marriage, common law or adoption. Economic families with low income are defined as those that devote a larger share of their after-tax income (at least 20% more than average) 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 4.11

Percentage of visible minorities in the Hamilton Niagara Haldimand Brant LHIN (4), by subLHIN, 2006

KEY FINDINGS

- In the Hamilton Niagara Haldimand Brant LHIN, the overall percentage of residents who self-identified as belonging to a visible minority group (9.10%) was less than half the provincial average (22.82%).
- The highest percentages of visible minorities were living in Hamilton Urban Core and Hamilton Outer Core.

PERCENTAGE OF VISIBLE MINORITIES

Data source: 2006 Census of Canada.

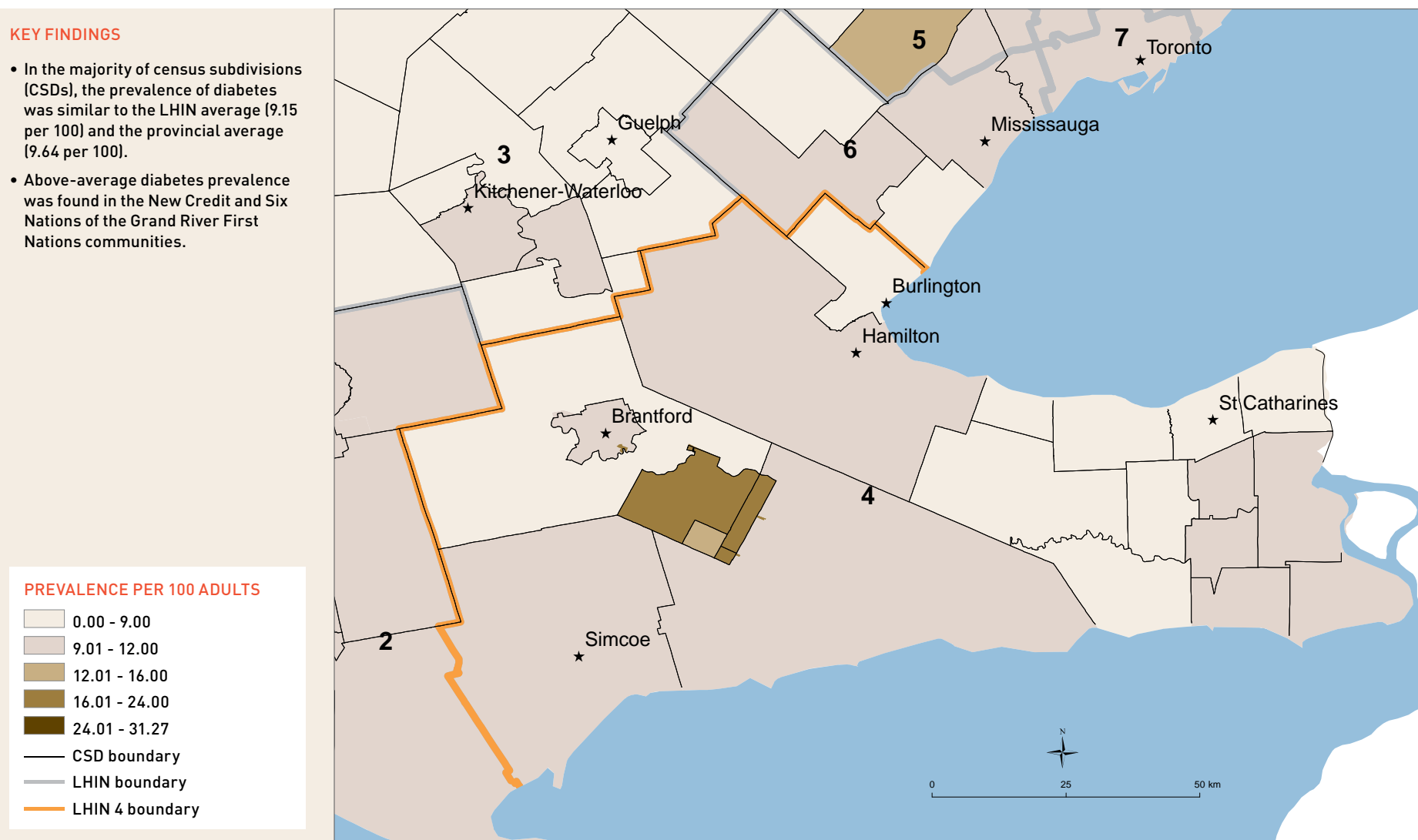
Technical note: Visible minorities include persons other than Aboriginal peoples who are non-Caucasian in race or non-white in colour.

EXHIBIT 4.12

Diabetes prevalence per 100 adults in the Hamilton Niagara Haldimand Brant LHIN (4), by census subdivision, on March 31, 2011

KEY FINDINGS

- In the majority of census subdivisions (CSDs), the prevalence of diabetes was similar to the LHIN average (9.15 per 100) and the provincial average (9.64 per 100).
- Above-average diabetes prevalence was found in the New Credit and Six Nations of the Grand River First Nations communities.



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 4.13

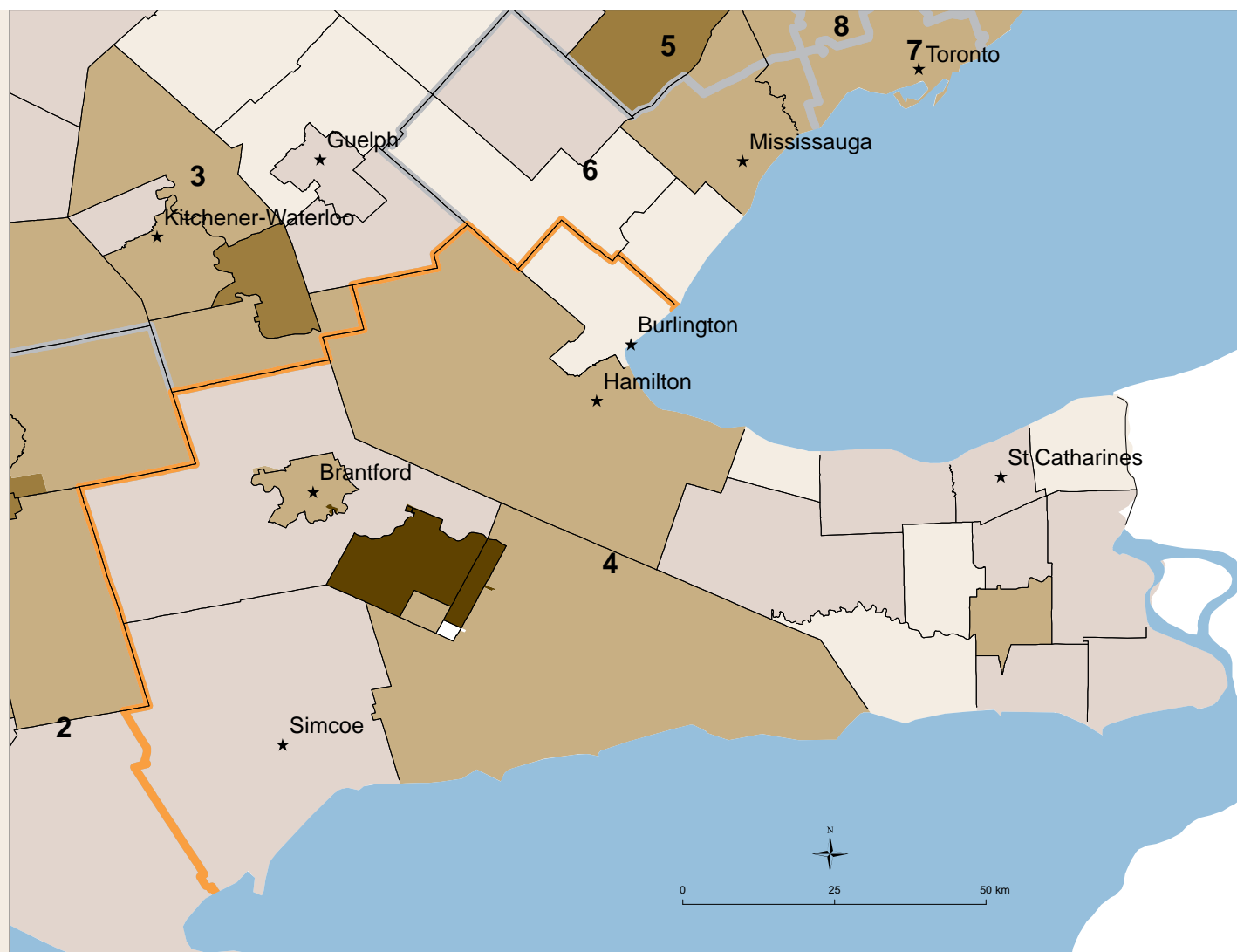
Diabetes incidence per 100 adults in the Hamilton Niagara Haldimand Brant LHIN (4), by census subdivision, 2005/06–2009/10

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 (4.74 per 100) and the provincial average (4.85 per 100).
- The highest incidence rates were found in the Six Nations of the Grand River First Nations communities. Higher-than-average rates were also seen in Hamilton, Brantford, New Credit, Haldimand County (south of Hamilton) and Welland (south of St. Catharines).

INCIDENCE PER 100 ADULTS

- Data unavailable
- 0.00 - 4.00
- 4.01 - 5.00
- 5.01 - 6.00
- 6.01 - 7.00
- 7.01 - 16.32
- CSD boundary
- LHIN boundary
- LHIN 4 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 4.14

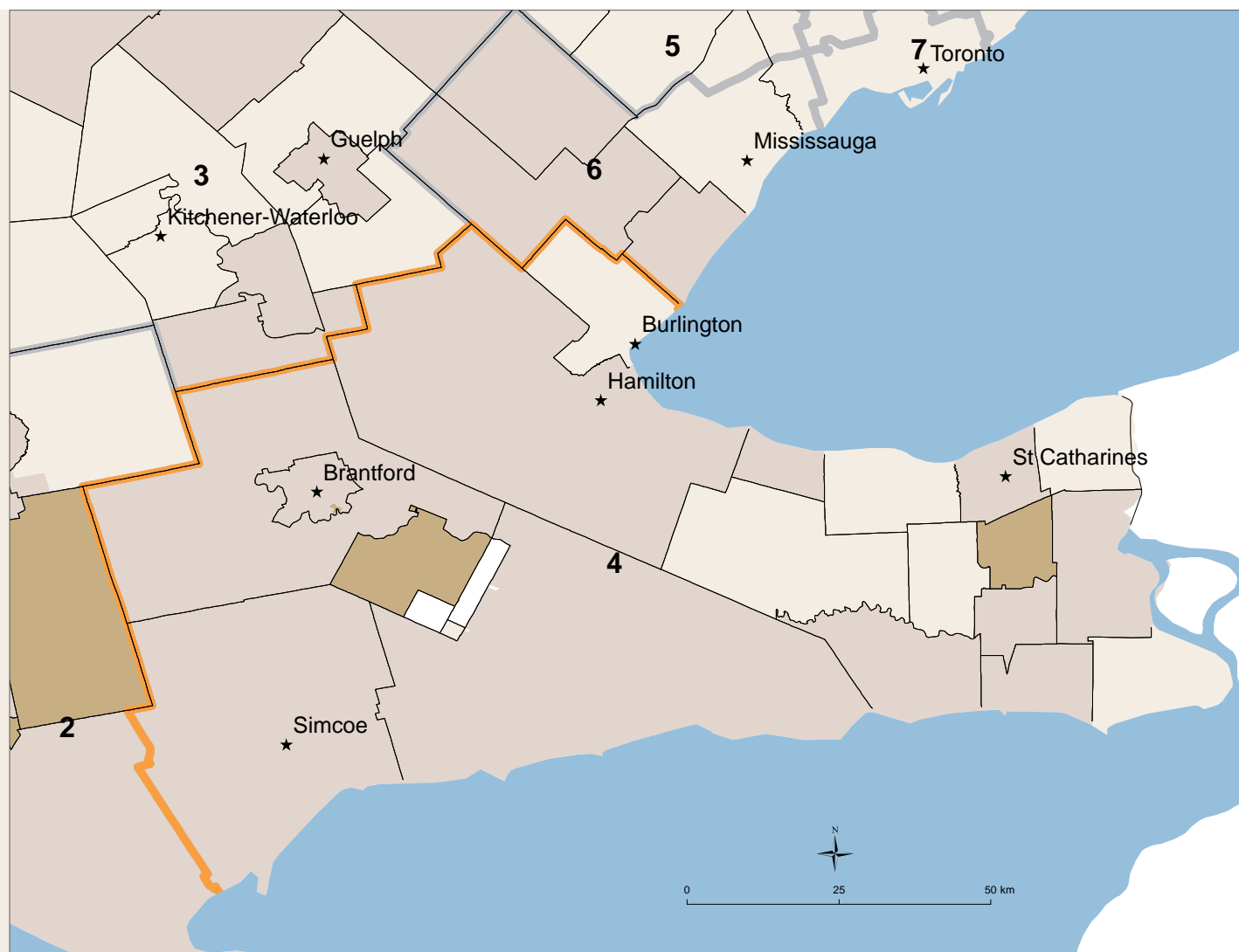
Number, per 10,000 adults with diabetes, who had at least one hospitalization or emergency department visit for hyper- or hypoglycemia in the Hamilton Niagara Haldimand Brant LHIN (4), by census subdivision, 2006/07–2010/11

KEY FINDINGS

- In most census subdivisions (CSDs) in the Hamilton Niagara Haldimand Brant LHIN, rates of hospitalization or emergency department visits for hyper- or hypoglycemia were similar to the LHIN average (565 per 10,000 adults with diabetes) and the provincial average (486 per 10,000).
- Higher rates were found in two smaller CSDs, one located southeast of Brantford (Six Nations of the Grand River) and the other south of St. Catharines (Thorold).

NUMBER PER 10,000 ADULTS WITH DIABETES

- Data unavailable
- 0 - 480
- 481 - 650
- 651 - 930
- 931 - 1400
- 1401 - 2168
- CSD boundary
- LHIN boundary
- LHIN 4 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 4.15

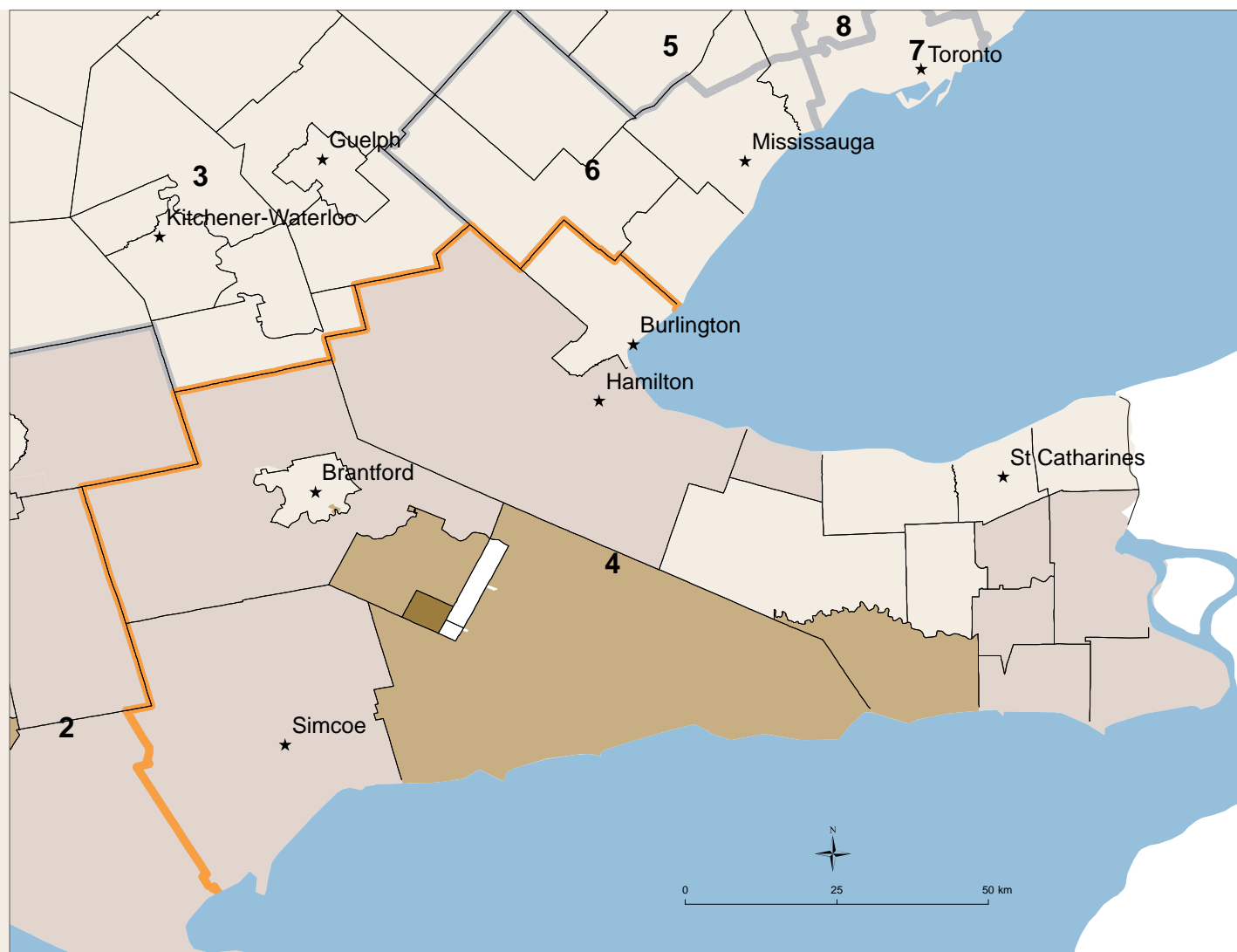
Number, per 10,000 adults with diabetes, who had at least one hospitalization or emergency department visit for any acute complication in the Hamilton Niagara Haldimand Brant LHIN (4), by census subdivision, 2006/07–2010/11

KEY FINDINGS

- Between 2006/07 and 2010/11, rates of hospitalizations or emergency department visits for acute complications of diabetes were similar in most census subdivisions (CSDs) to the LHIN average (1,182 per 10,000 adults with diabetes) and the provincial average (1,029 per 10,000).
- Higher rates of acute complications were seen in several CSDs in the southern part of the LHIN.

NUMBER PER 10,000 ADULTS WITH DIABETES

- Data unavailable
- 0 - 1200
- 1201 - 1500
- 1501 - 2000
- 2001 - 2800
- 2801 - 4431
- CSD boundary
- LHIN boundary
- LHIN 4 boundary



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

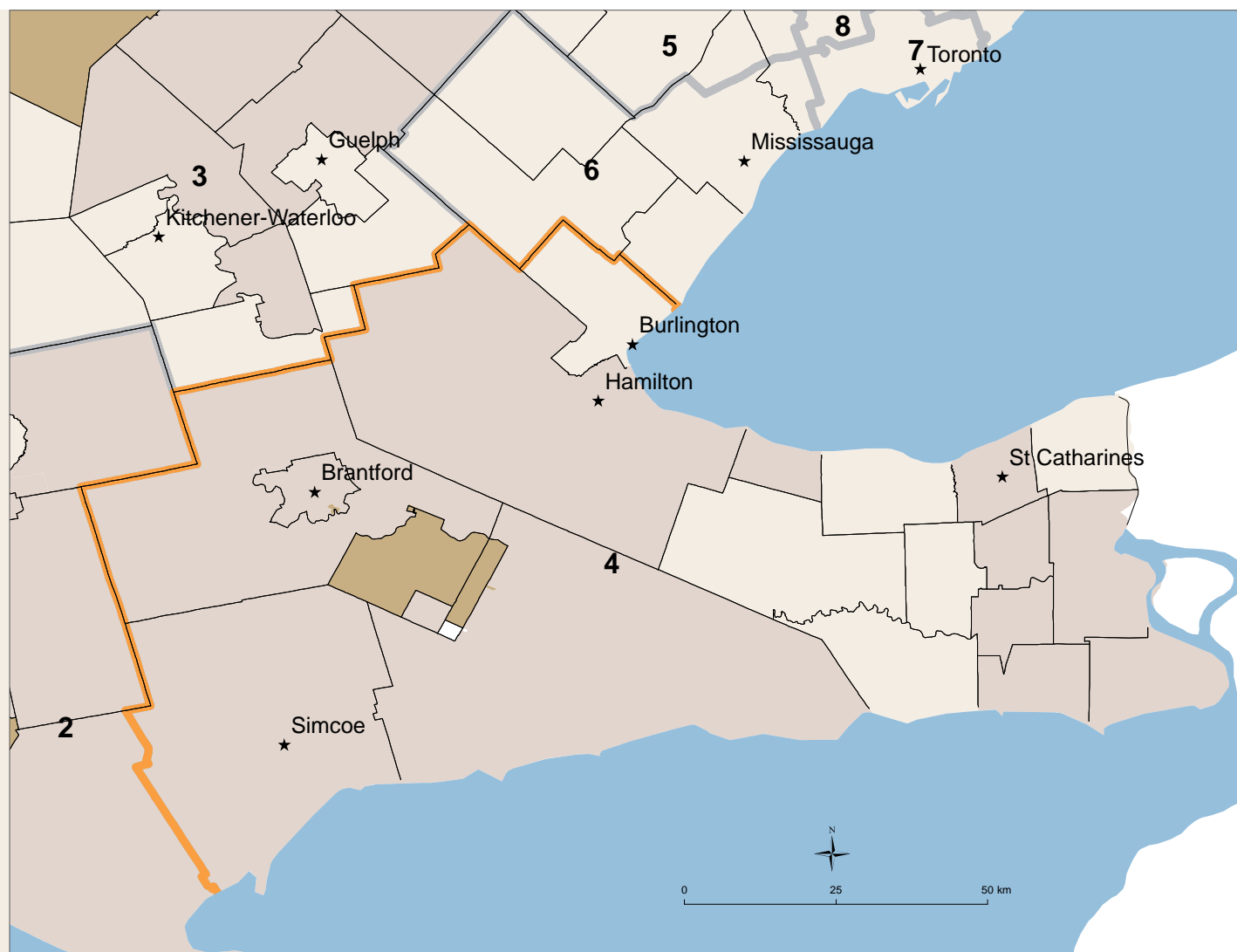
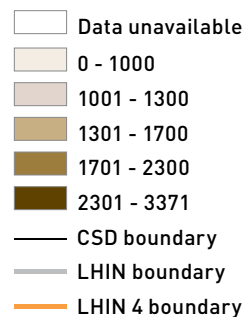
Technical notes: Adults were defined as those aged 20 years and older. Rates were age- and sex-standardized using the same-aged population in the Ontario Diabetes Database on March 31, 2006 as the standard population. Acute complications consisted of hyper- or hypoglycemia, skin and soft tissue infection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

EXHIBIT 4.16

Number, per 10,000 adults with diabetes, who had any chronic complication in the Hamilton Niagara Haldimand Brant LHIN (4), 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 (1,151 per 10,000 adults with diabetes) and the provincial average (1,016 per 10,000).
- Higher rates (above 1,300 per 10,000) were seen in the Six Nations of the Grand River First Nations communities southeast of Brantford.

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.

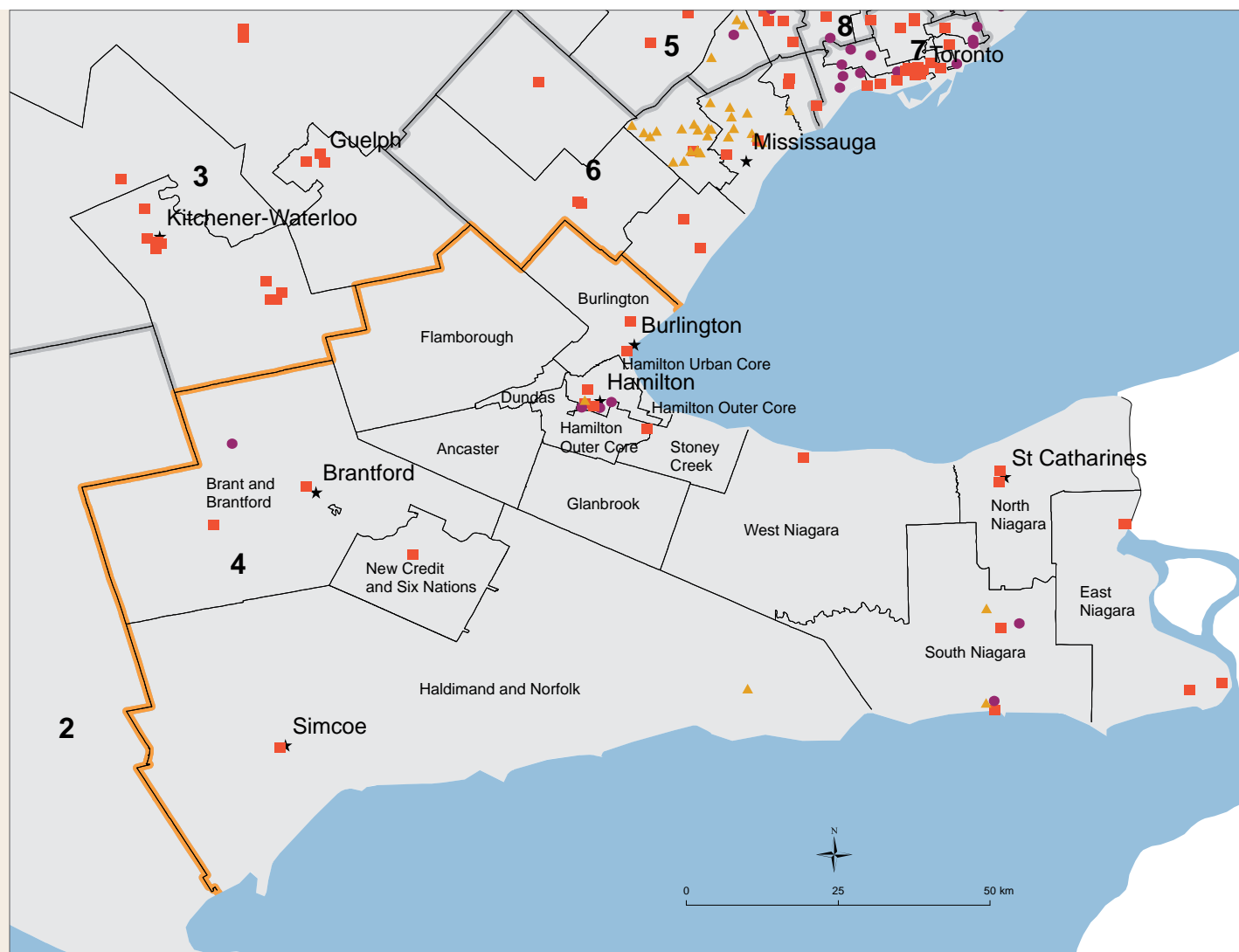
Technical note: Adults were defined as those aged 20 years and older. Rates were age- and sex-standardized using the same-aged population in the Ontario Diabetes Database on March 31, 2006 as the standard population. A chronic complication consisted of hospitalization for a cardiovascular condition or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

EXHIBIT 4.17**Locations of diabetes education programs in the Hamilton Niagara Haldimand Brant LHIN (4), 2011****KEY FINDINGS**

- Main diabetes education programs were scattered fairly widely across the LHIN, but most were located in or near major urban centres. In addition, one program was located in the New Credit and Six Nations subLHIN.
- Satellites of diabetes education programs were found near Hamilton and in the northwest and southeast areas of the LHIN.
- A few outreach programs were located near Hamilton and in the southeast end of the LHIN.

TYPE OF PROGRAM

- Main program
- Program satellite
- ▲ Outreach program
- subLHIN boundary
- LHIN boundary
- LHIN 4 boundary

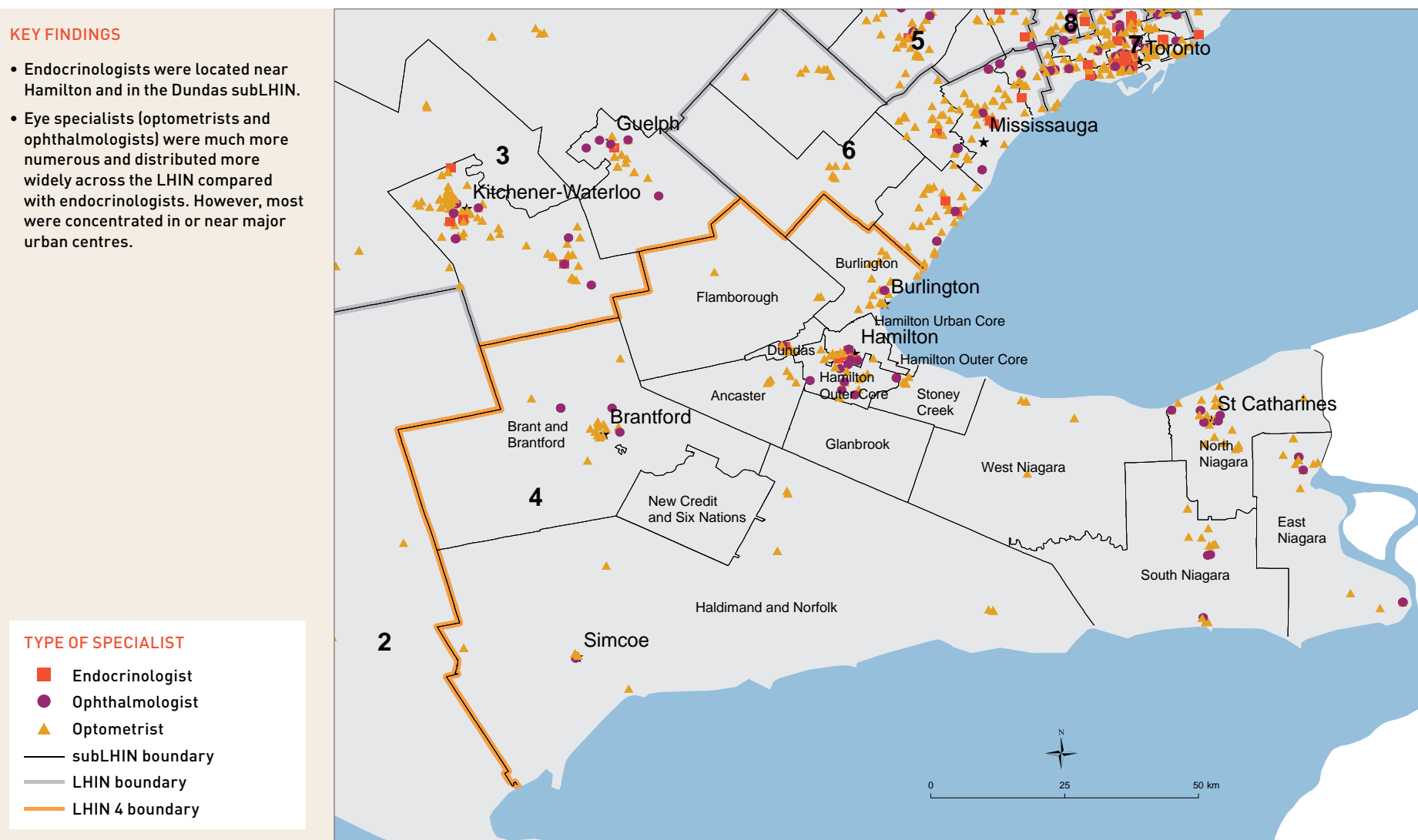


Data source: Diabetes Regional Coordination Centres.

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

EXHIBIT 4.18**Locations of endocrinologists and eye specialists in the Hamilton Niagara Haldimand Brant LHIN (4), 2010/11****KEY FINDINGS**

- Endocrinologists were located near Hamilton and in the Dundas subLHIN.
- Eye specialists (optometrists and ophthalmologists) were much more numerous and distributed more widely across the LHIN compared with endocrinologists. However, most were concentrated in or near major urban centres.

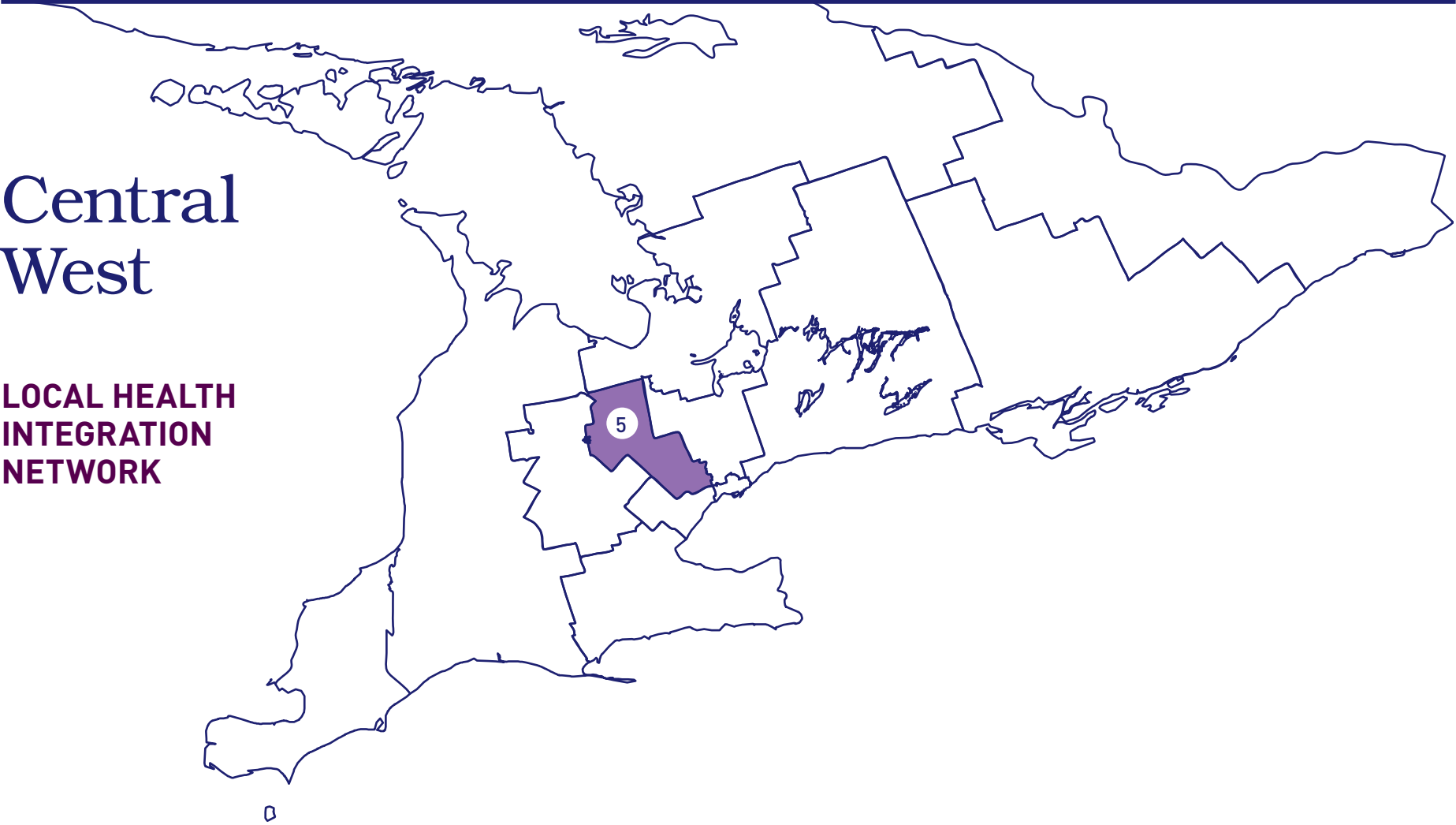


Data sources: Locations of endocrinologists and ophthalmologists came from the ICES Physician Database, 2010; listings of optometrists came from the Corporate Provider Database, April 1, 2010 to March 31, 2011.

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

Central West

LOCAL HEALTH
INTEGRATION
NETWORK



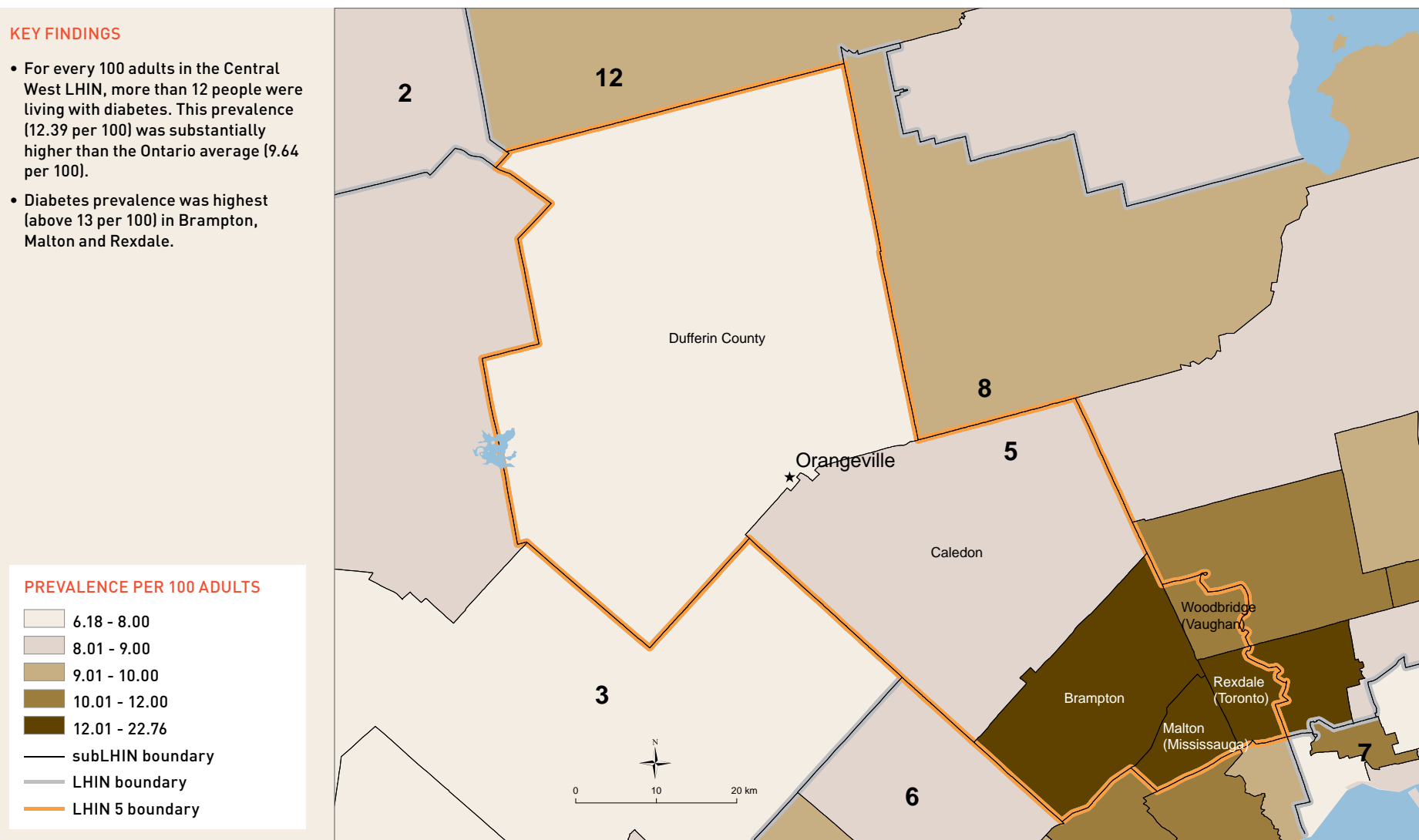
Diabetes Measures by Region

EXHIBIT 5.1

Diabetes prevalence per 100 adults in the Central West LHIN (5), by subLHIN, on March 31, 2011

KEY FINDINGS

- For every 100 adults in the Central West LHIN, more than 12 people were living with diabetes. This prevalence (12.39 per 100) was substantially higher than the Ontario average (9.64 per 100).
- Diabetes prevalence was highest (above 13 per 100) in Brampton, Malton and Rexdale.

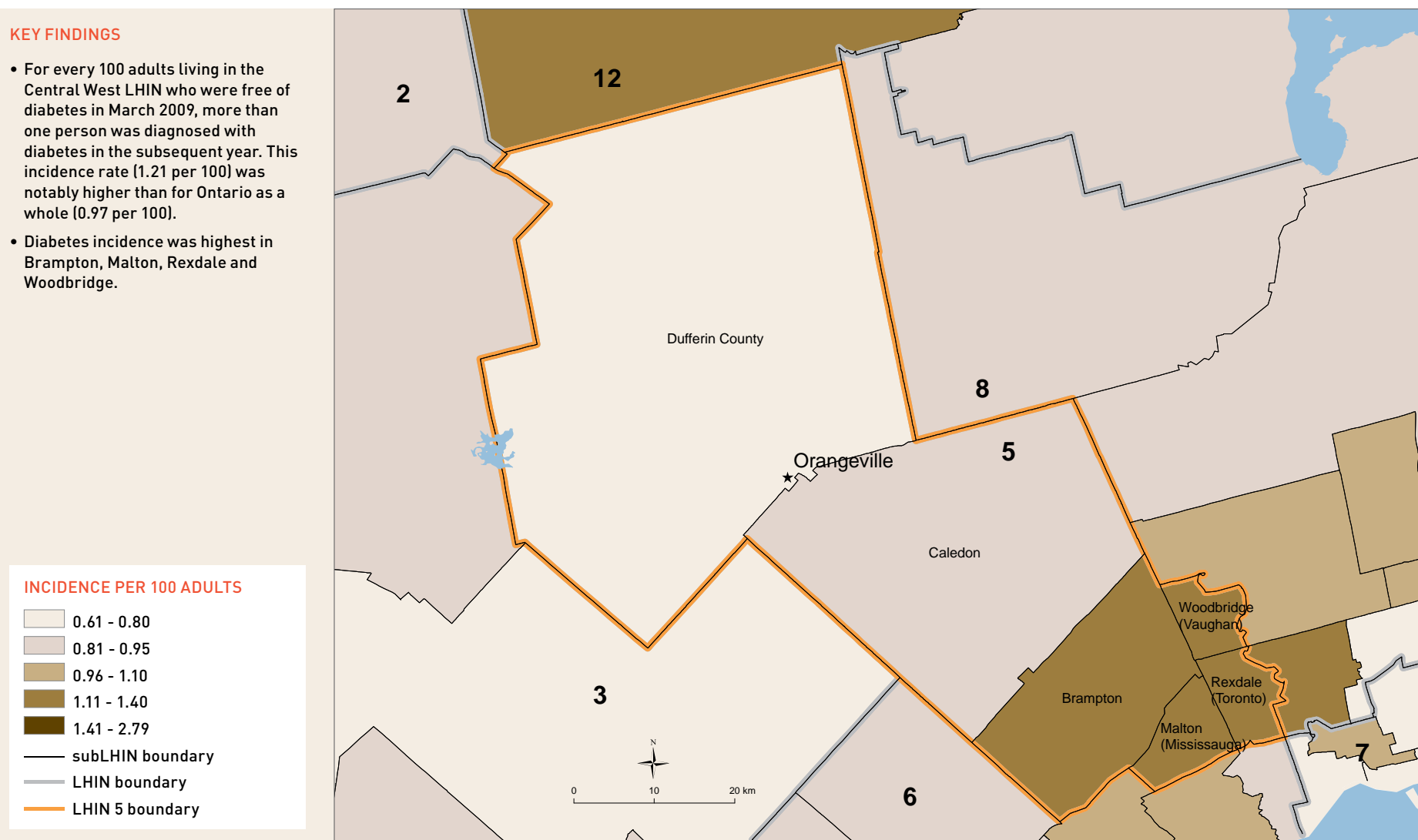


Data sources: Ontario Diabetes Database; Registered Persons Database.

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 5.2**Diabetes incidence per 100 adults in the Central West LHIN (5), by subLHIN, 2009/10****KEY FINDINGS**

- For every 100 adults living in the Central West LHIN who were free of diabetes in March 2009, more than one person was diagnosed with diabetes in the subsequent year. This incidence rate (1.21 per 100) was notably higher than for Ontario as a whole (0.97 per 100).
- Diabetes incidence was highest in Brampton, Malton, Rexdale and Woodbridge.



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.

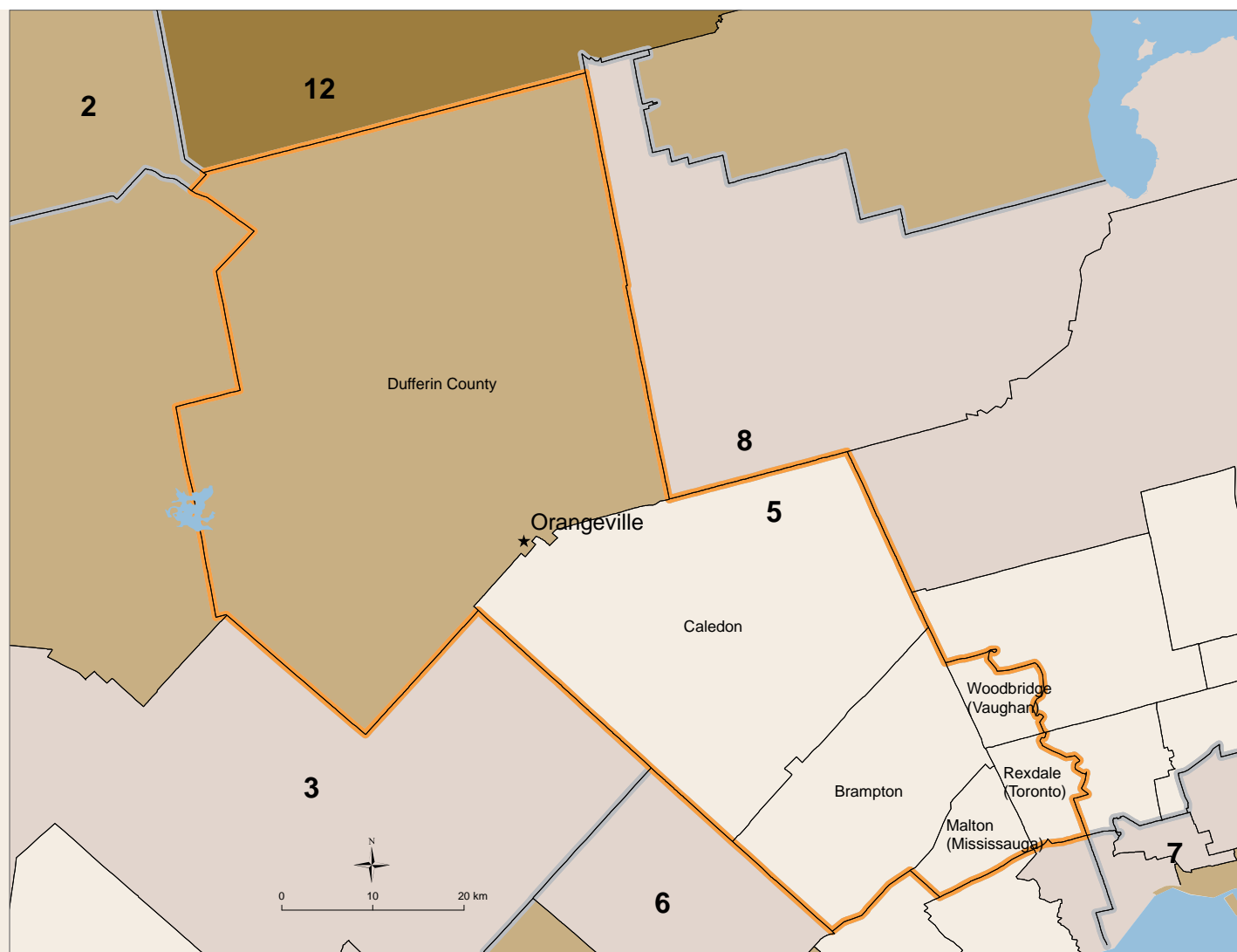
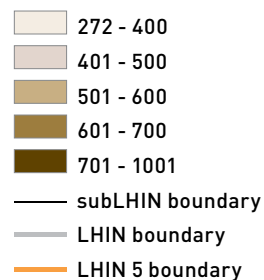
EXHIBIT 5.3

Number, per 10,000 adults with diabetes, who had at least one hospitalization or emergency department visit for hyper- or hypoglycemia in the Central West LHIN (5), by subLHIN, 2006/07–2010/11

KEY FINDINGS

- Overall, for every 100 adults living with diabetes in the Central West LHIN on March 31, 2006, approximately four had at least one hospitalization or emergency department (ED) visit for hyper- or hypoglycemia in the subsequent five years. This rate (390 per 10,000 adults with diabetes) was notably lower than the provincial average (486 per 10,000).
- There was little variation in rates of hospitalizations/ED visits for hyper- or hypoglycemia across subLHINs, except in Dufferin County where the rate was above average at 595 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.

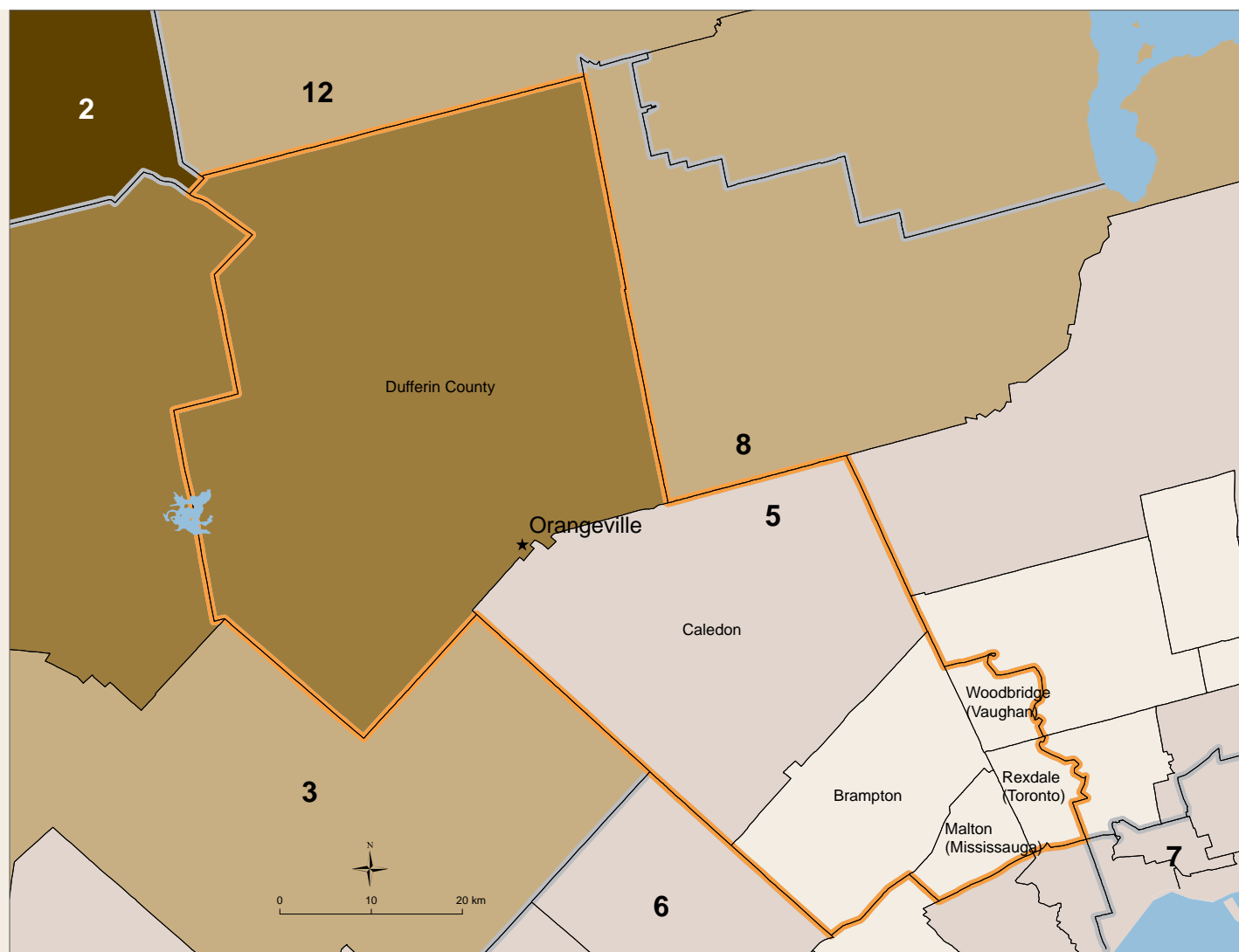
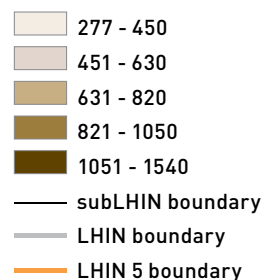
Technical note: Adults were defined as those aged 20 years and older. Rates were age- and sex-standardized using the same-aged population in the Ontario Diabetes Database on March 31, 2006 as the standard population.

EXHIBIT 5.4

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 Central West LHIN (5), by subLHIN, 2006/07–2010/11

KEY FINDINGS

- For every 100 adults with diabetes in the Central West LHIN in 2006, more than four 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 (410 per 10,000 adults with diabetes) was notably lower than the provincial average (618 per 10,000).
- There was relatively little variation in rates across subLHINs, except in Dufferin County where the rate (947 per 10,000) was above average.

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.

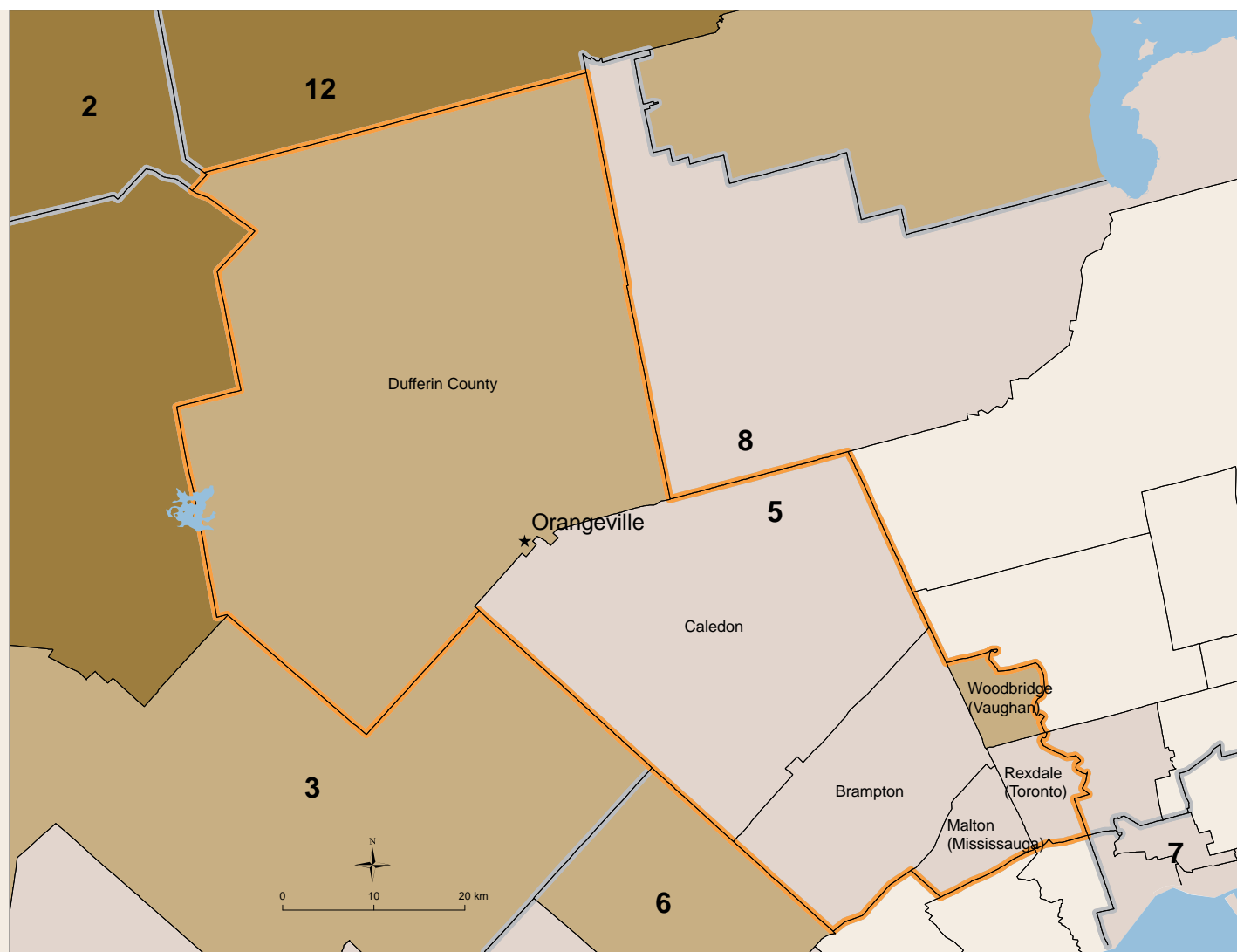
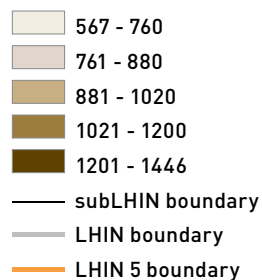
EXHIBIT 5.5

Number, per 10,000 adults with diabetes, who had at least one hospitalization for a cardiovascular condition in the Central West LHIN (5), by subLHIN, 2006/07–2010/11

KEY FINDINGS

- More than eight in 100 adults with diabetes in the Central West LHIN in 2006 were hospitalized at least once in the ensuing five years. This rate (811 per 10,000 adults with diabetes) was lower than the provincial average (888 per 10,000).
- The highest rate of hospitalizations was in Dufferin County (973 per 10,000), followed by Woodbridge (929 per 10,000).

NUMBER PER 10,000 ADULTS WITH DIABETES



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

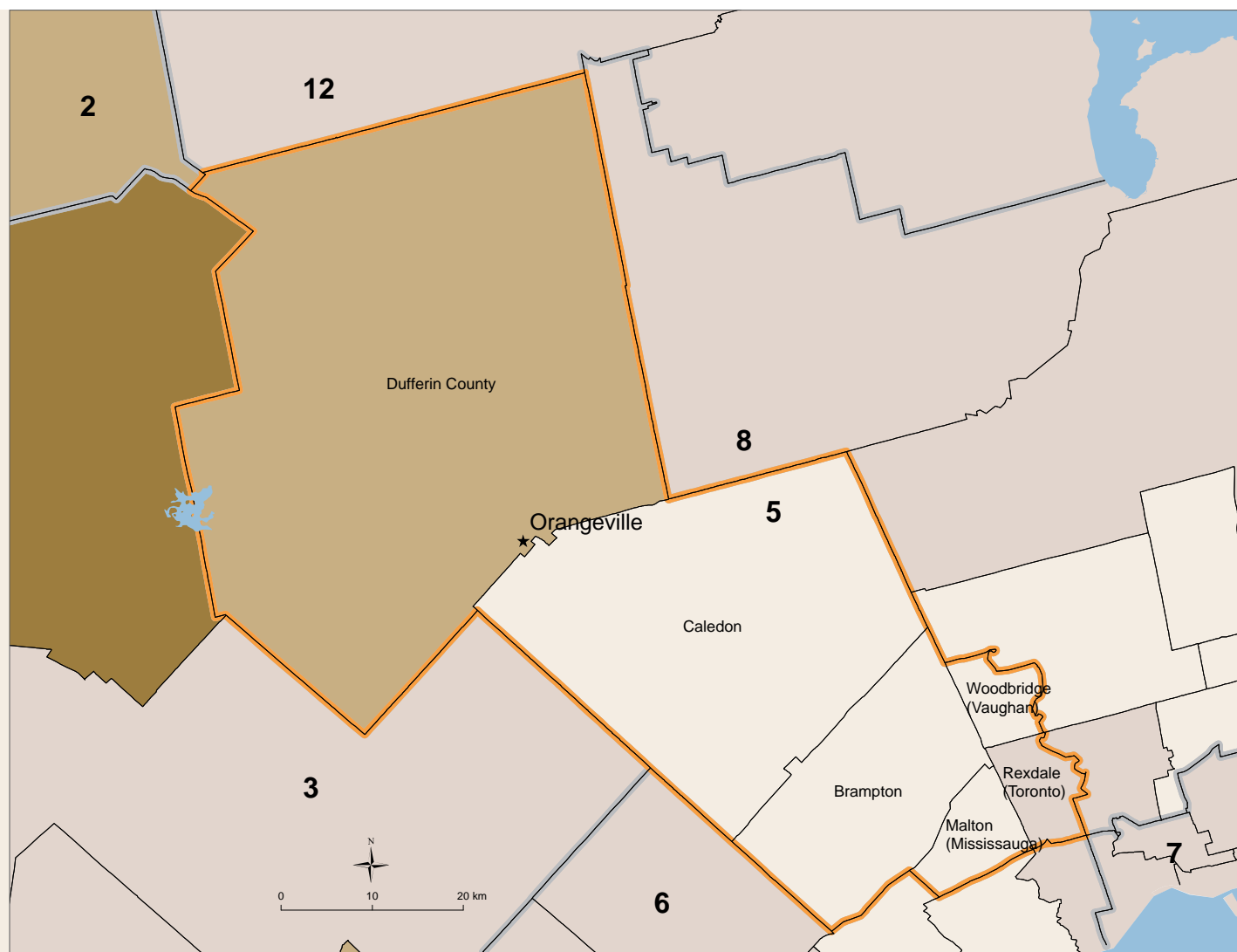
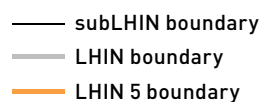
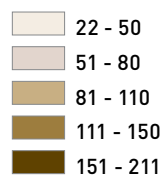
Technical notes: Adults were defined as those aged 20 years and older. Rates were age- and sex-standardized using the same-aged population in the Ontario Diabetes Database on March 31, 2006 as the standard population. Cardiovascular conditions included myocardial infarction, stroke, congestive heart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

EXHIBIT 5.6

Number, per 10,000 adults with diabetes, who had a lower extremity amputation in the Central West LHIN (5), by subLHIN, 2006/07–2010/11

KEY FINDINGS

- In the Central West LHIN, nearly five of every 1,000 adults with diabetes experienced a lower extremity amputation between 2006/07 and 2010/11. This rate (48 per 10,000 adults with diabetes) was notably lower than the Ontario average (74 per 10,000).
- Rates varied by nearly three-fold across subLHINs: the highest rate was in Dufferin County (99 per 10,000) and the lowest in Woodbridge (36 per 10,000).

NUMBER PER 10,000 ADULTS WITH DIABETES

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

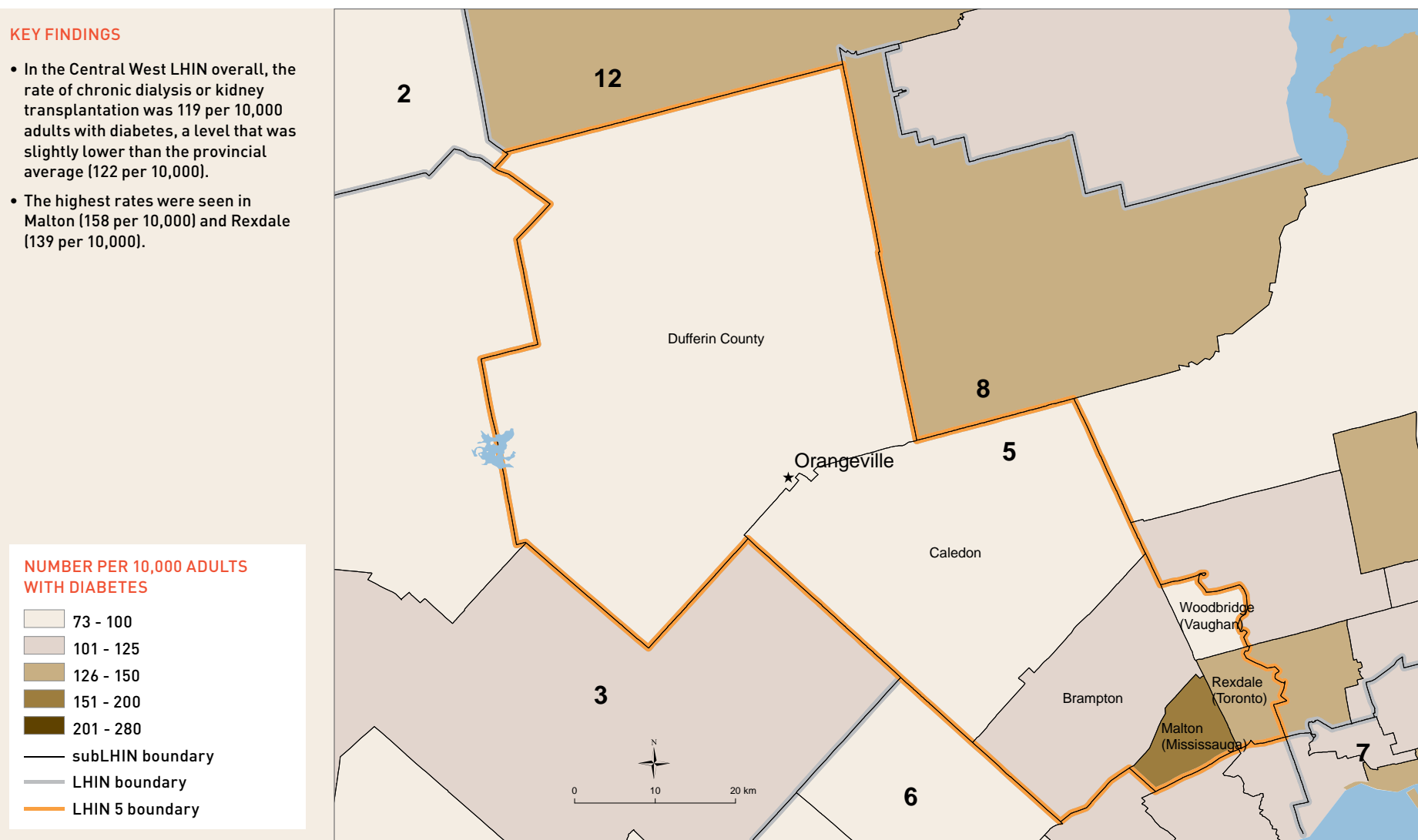
Technical note: Adults were defined as those aged 20 years and older. Rates were age- and sex-standardized using the same-aged population in the Ontario Diabetes Database on March 31, 2006 as the standard population.

EXHIBIT 5.7

Number, per 10,000 adults with diabetes, who received chronic dialysis or kidney transplantation in the Central West LHIN (5), by subLHIN, 2006/07–2010/11

KEY FINDINGS

- In the Central West LHIN overall, the rate of chronic dialysis or kidney transplantation was 119 per 10,000 adults with diabetes, a level that was slightly lower than the provincial average (122 per 10,000).
- The highest rates were seen in Malton (158 per 10,000) and Rexdale (139 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 5.8

Number, per 100 adults with diabetes, who had an additional chronic medical condition in the Central West LHIN (5), by subLHIN, 2006/07–2008/09

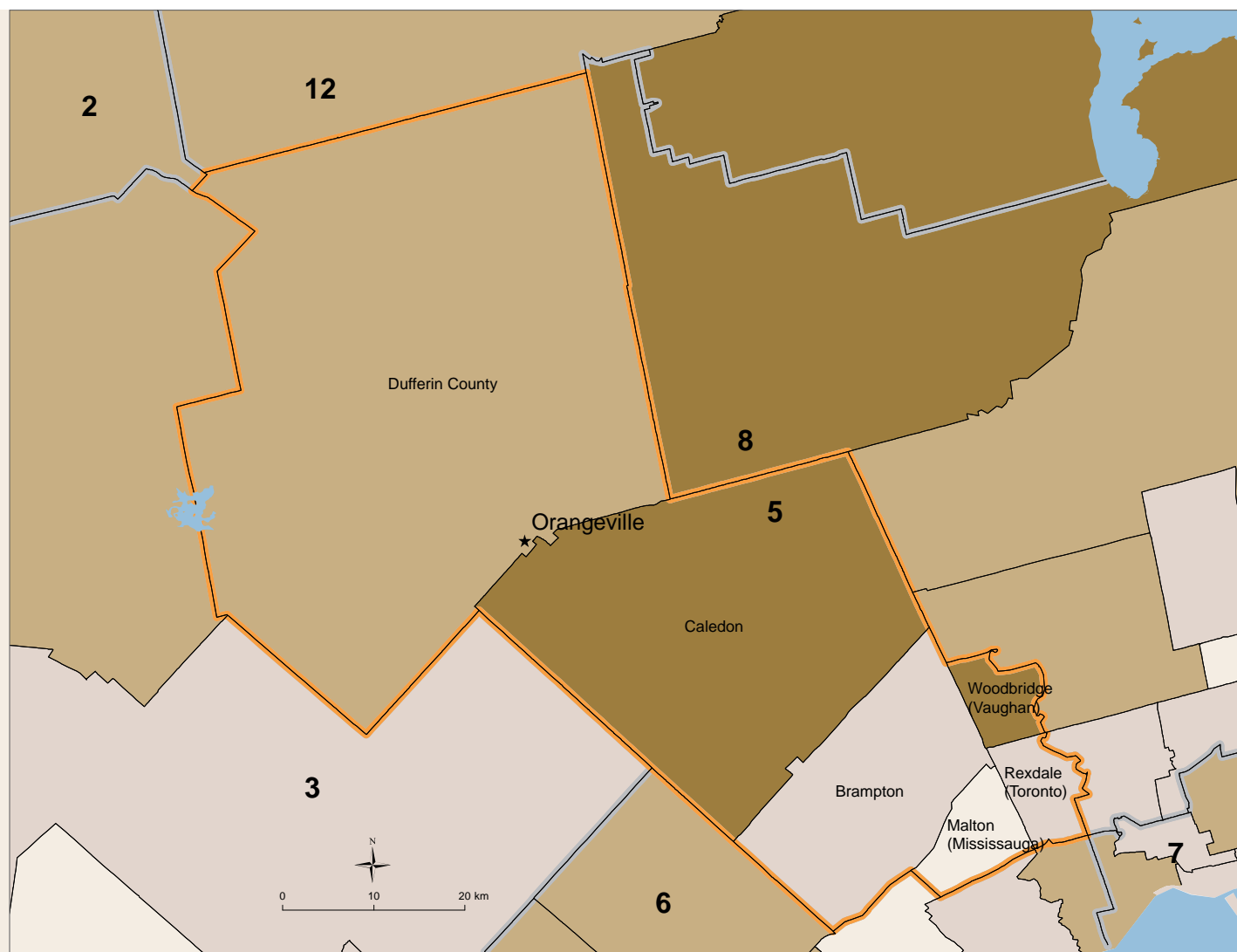
KEY FINDINGS

- In the Central West LHIN overall, about 52 of every 100 adults with diabetes had at least one chronic medical condition other than diabetes between 2006/07 and 2008/09. This rate (51.56 per 100) was slightly lower than the provincial average (54.84 per 100).
- There was relatively little variation in rates across subLHINs. The highest rates were seen in Woodbridge (57.58 per 100) and Caledon (57.04 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 5 boundary



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

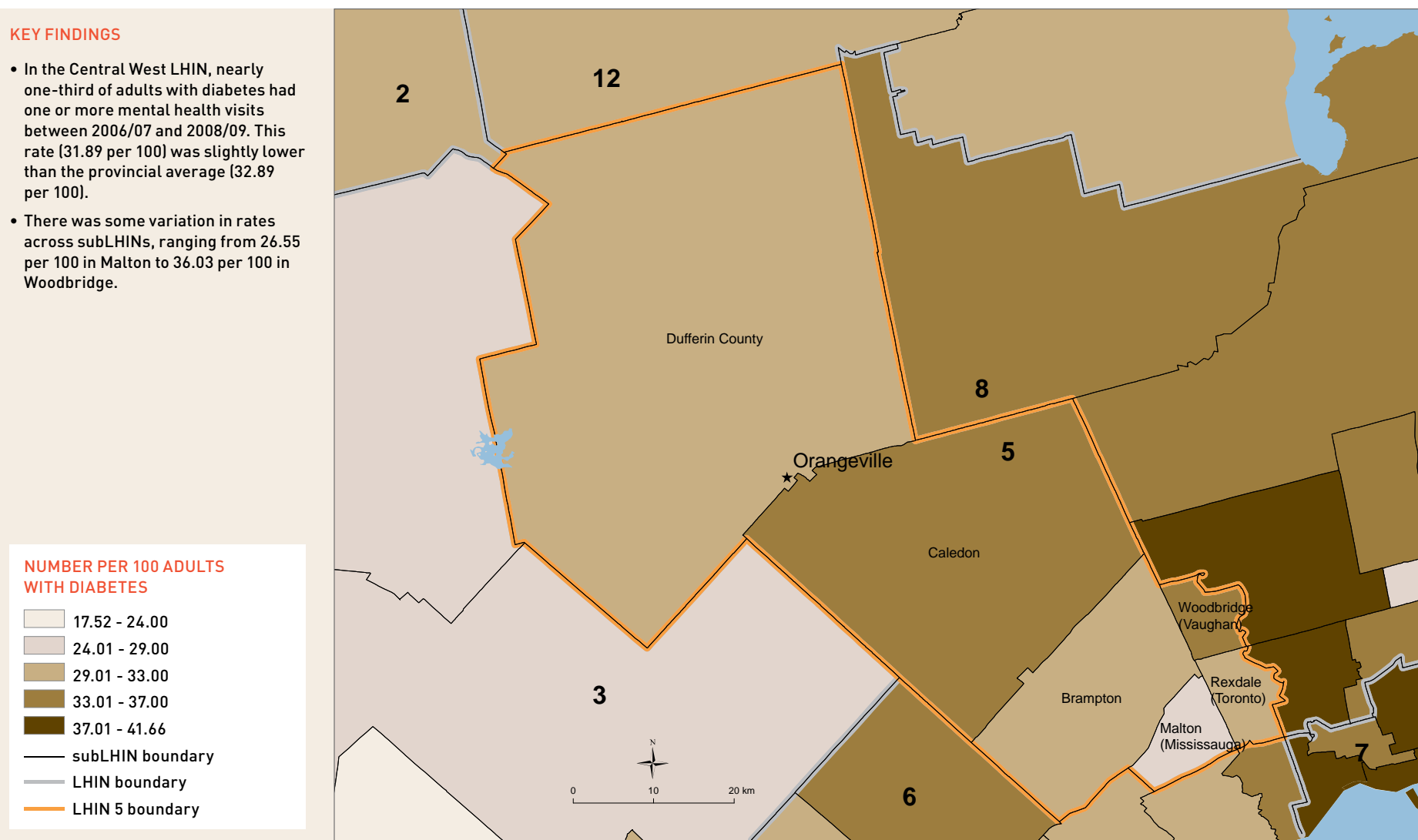
Technical note: Adults were defined as those aged 20 years and older. Rates were age- and sex-standardized using the same-aged population in the Ontario Diabetes Database on March 31, 2006 as the standard population.

EXHIBIT 5.9

Number, per 100 adults with diabetes, who made a mental health visit for a psychotic or nonpsychotic illness in the Central West LHIN (5), by subLHIN, 2006/07–2008/09

KEY FINDINGS

- In the Central West LHIN, nearly one-third of adults with diabetes had one or more mental health visits between 2006/07 and 2008/09. This rate (31.89 per 100) was slightly lower than the provincial average (32.89 per 100).
- There was some variation in rates across subLHINs, ranging from 26.55 per 100 in Malton to 36.03 per 100 in Woodbridge.



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

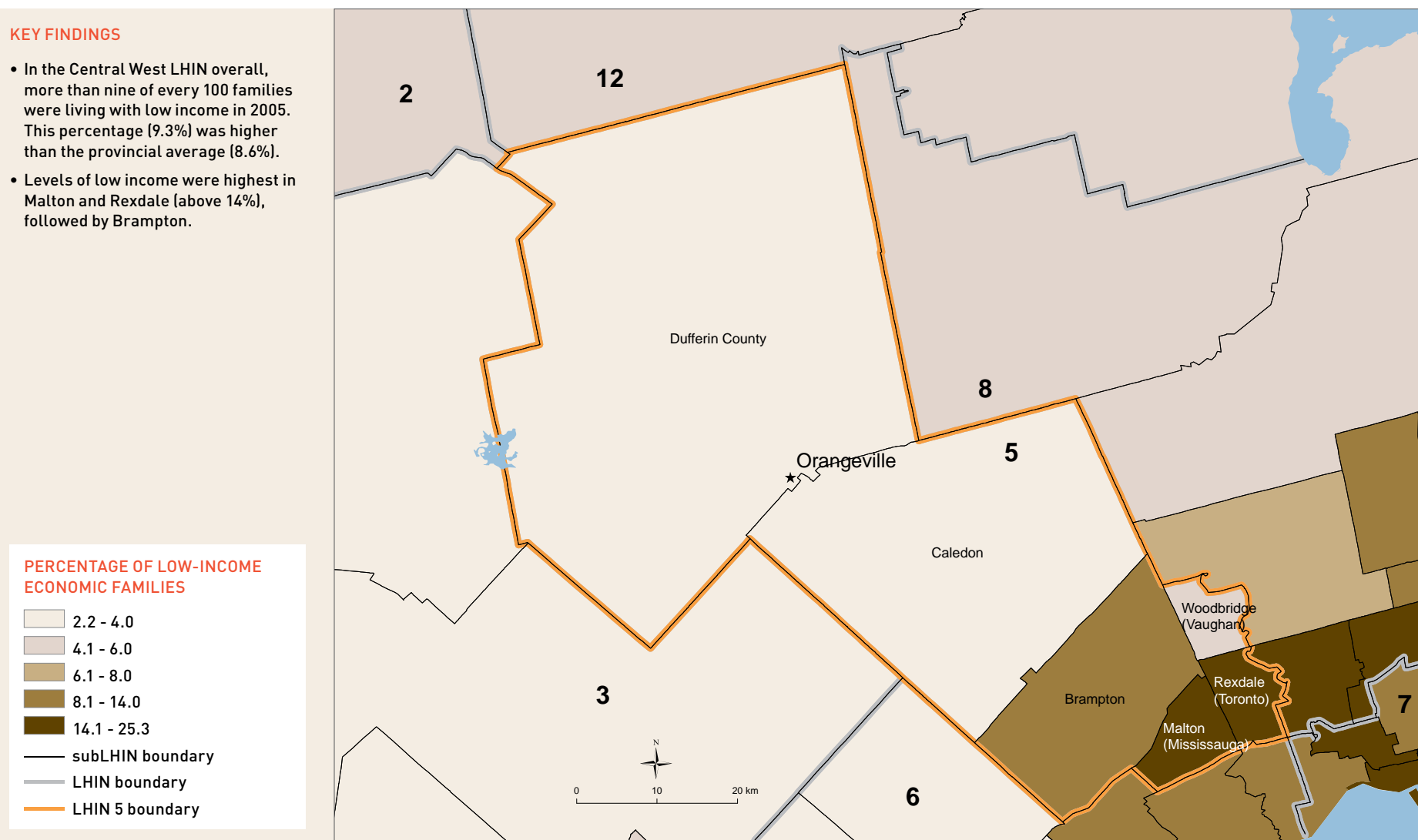
Technical note: Adults were defined as those aged 20 years and older. Rates were age- and sex-standardized using the same-aged population in the Ontario Diabetes Database on March 31, 2006 as the standard population.

EXHIBIT 5.10

Percentage of economic families with low income in the Central West LHIN (5), by subLHIN, 2005

KEY FINDINGS

- In the Central West LHIN overall, more than nine of every 100 families were living with low income in 2005. This percentage (9.3%) was higher than the provincial average (8.6%).
- Levels of low income were highest in Malton and Rexdale (above 14%), followed by Brampton.



Data source: 2006 Census of Canada.

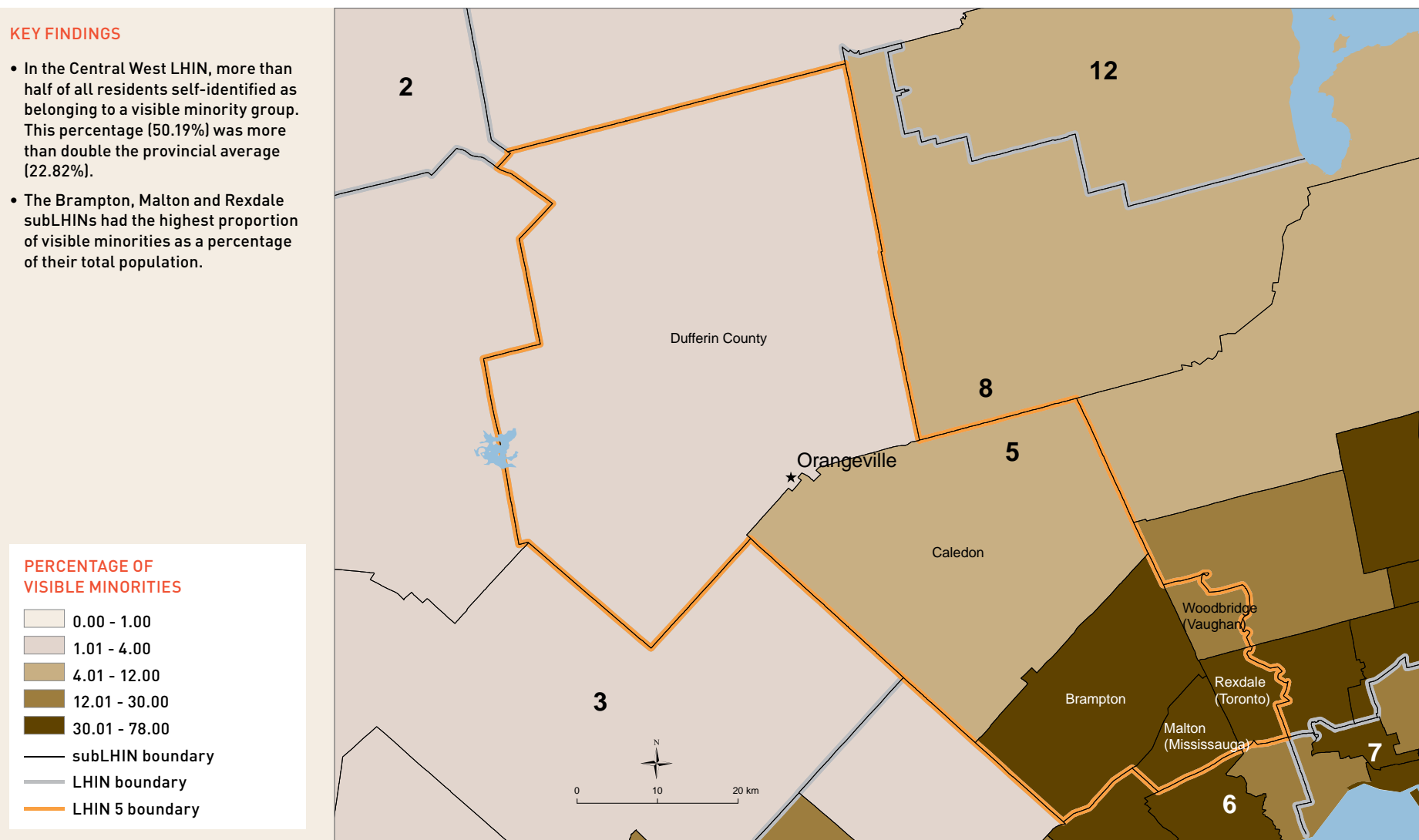
Technical note: Economic family refers to a group of two or more persons who live in the same dwelling and are related by blood, marriage, common law or adoption. Economic families with low income are defined as those that devote a larger share of their after-tax income (at least 20% more than average) 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 5.11

Percentage of visible minorities in the Central West LHIN (5), by subLHIN, 2006

KEY FINDINGS

- In the Central West LHIN, more than half of all residents self-identified as belonging to a visible minority group. This percentage (50.19%) was more than double the provincial average (22.82%).
- The Brampton, Malton and Rexdale subLHINs had the highest proportion of visible minorities as a percentage of their total population.



Data source: 2006 Census of Canada.

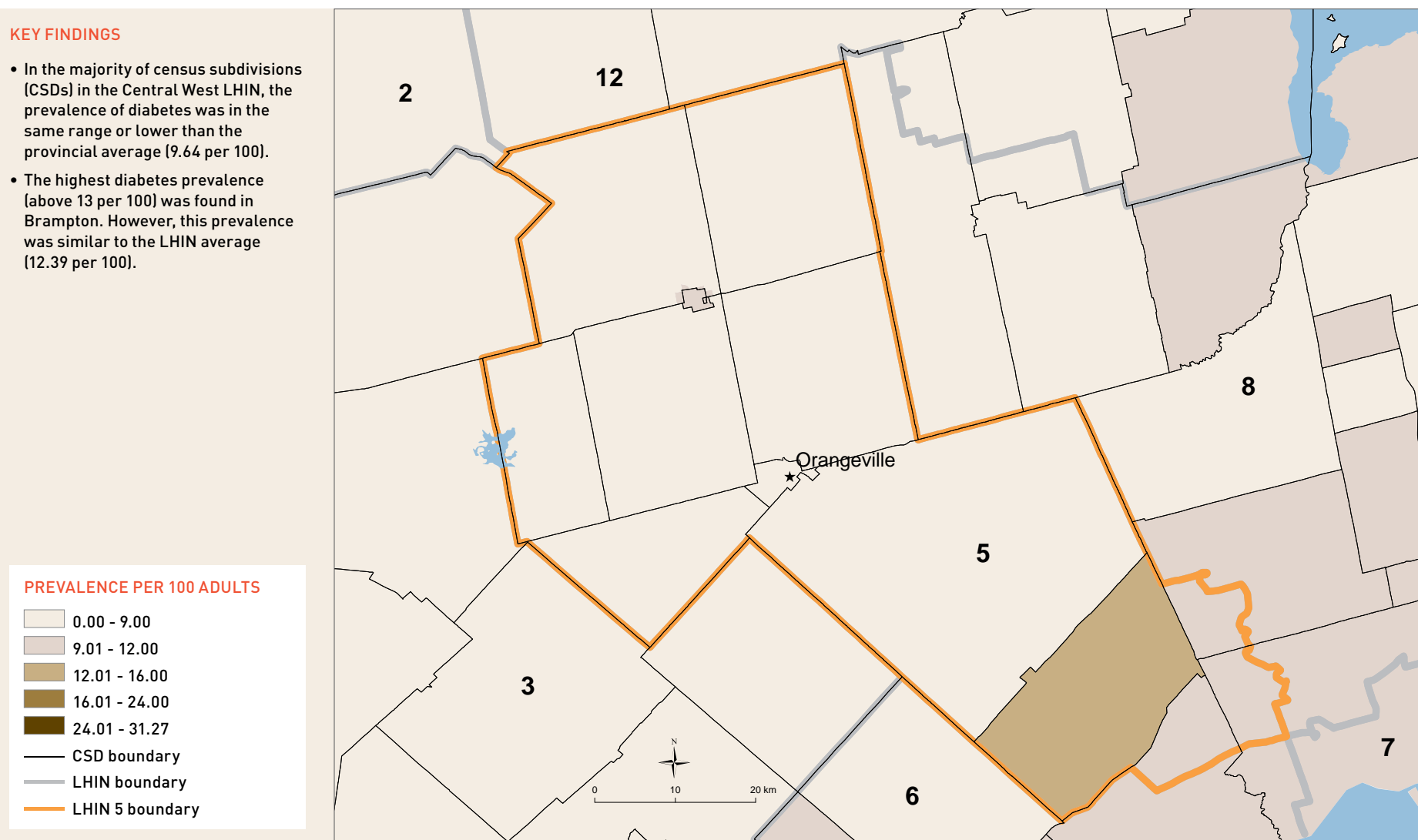
Technical note: Visible minorities include persons other than Aboriginal peoples who are non-Caucasian in race or non-white in colour.

EXHIBIT 5.12

Diabetes prevalence per 100 adults in the Central West LHIN (5), by census subdivision, on March 31, 2011

KEY FINDINGS

- In the majority of census subdivisions (CSDs) in the Central West LHIN, the prevalence of diabetes was in the same range or lower than the provincial average (9.64 per 100).
- The highest diabetes prevalence (above 13 per 100) was found in Brampton. However, this prevalence was similar to the LHIN average (12.39 per 100).

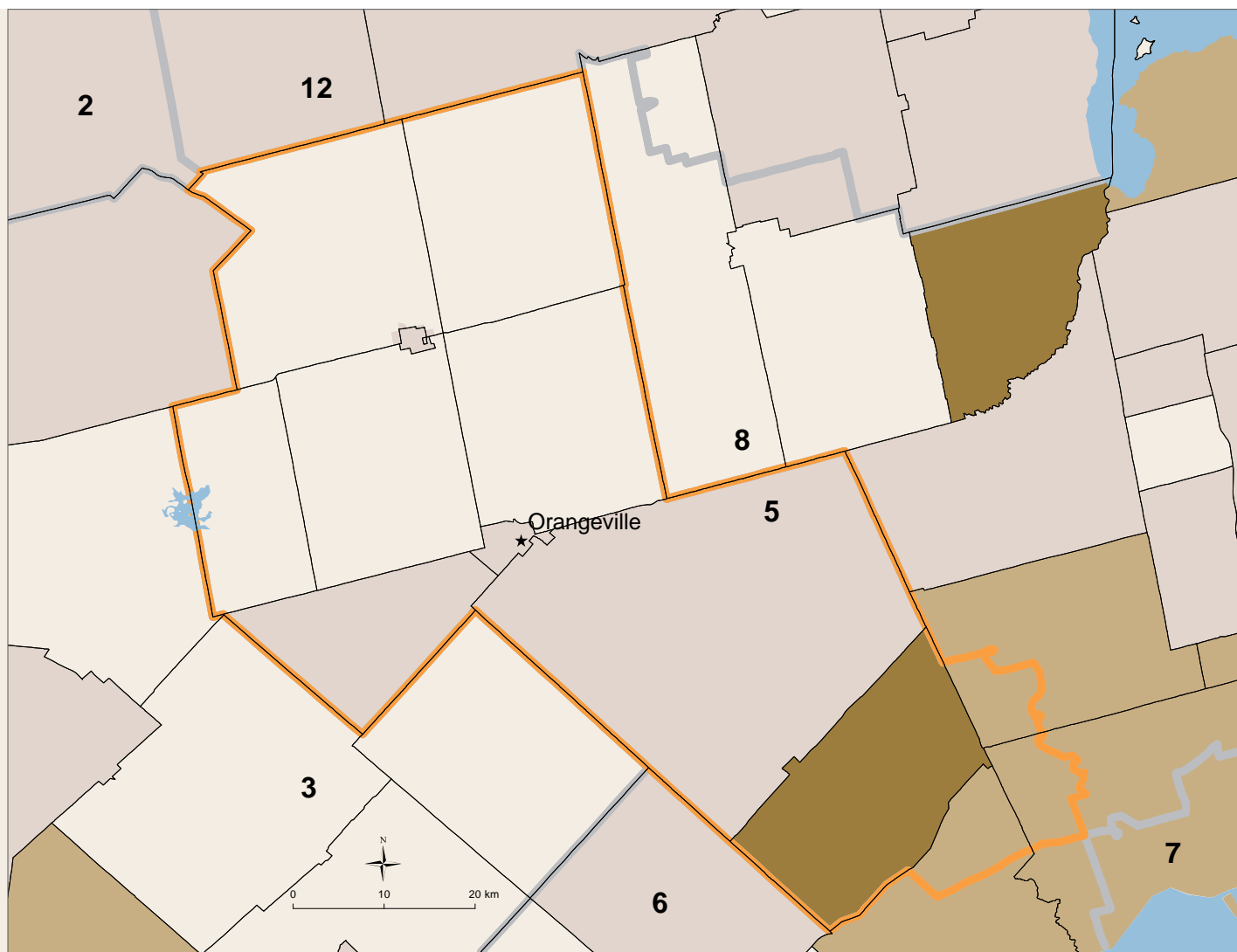
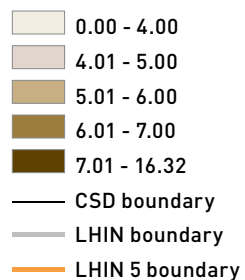


Data sources: Ontario Diabetes Database; Registered Persons Database.

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 5.13**Diabetes incidence per 100 adults in the Central West LHIN (5), by census subdivision, 2005/06–2009/10****KEY FINDINGS**

- In the central and northern census subdivisions (CSDs), the incidence of diabetes in adults over the five-year period between April 2005 and March 2010 was similar to the provincial average (4.85 per 100).
- In the CSDs located in the south, diabetes incidence was higher and more similar to the LHIN average (5.98 per 100).

INCIDENCE PER 100 ADULTS

Data sources: Ontario Diabetes Database; Registered Persons Database.

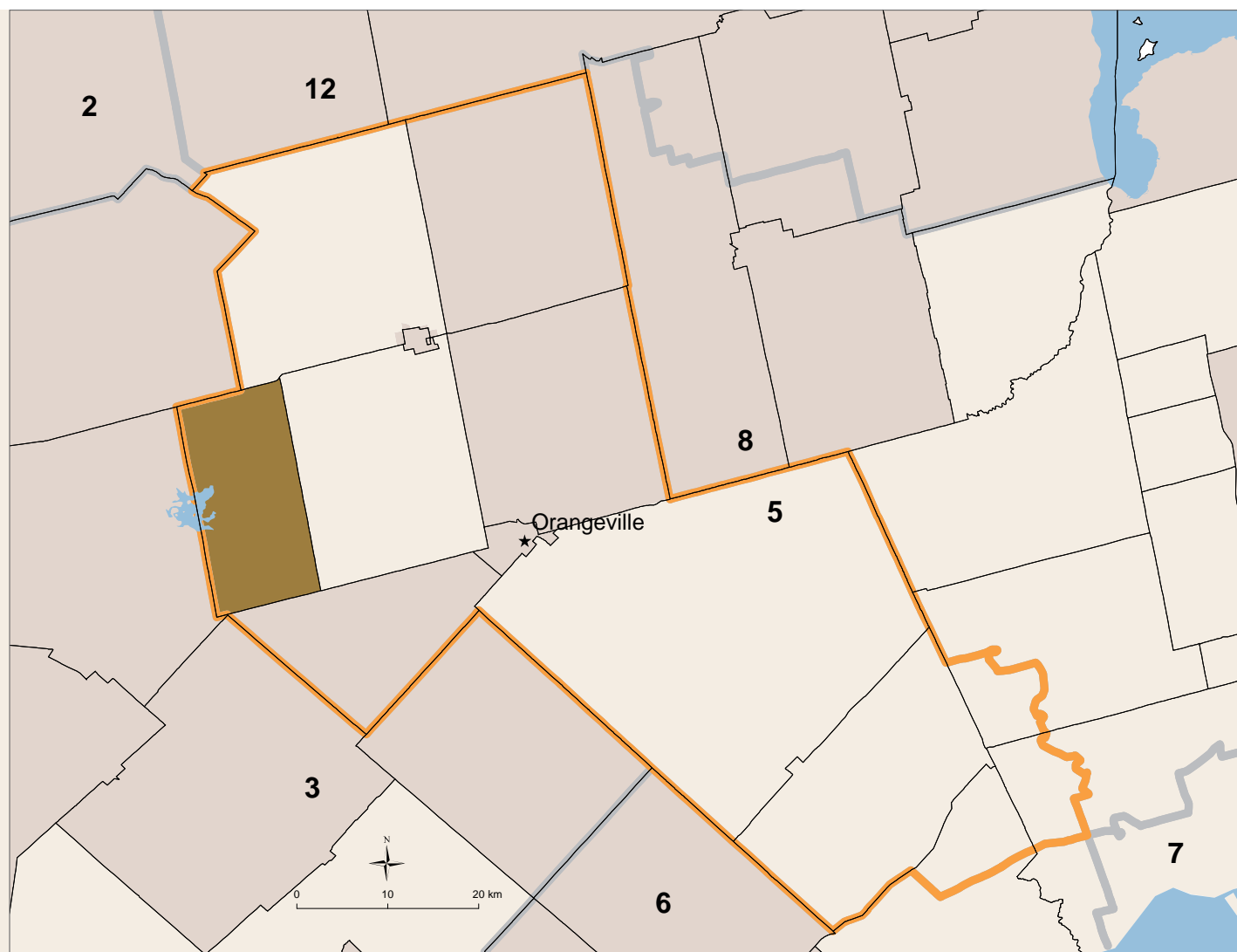
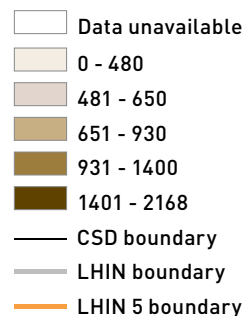
Technical note: Adults were defined as those aged 20 years and older. Rates were age- and sex-standardized using the 2001 Ontario population of the same age as the standard population.

EXHIBIT 5.14

Number, per 10,000 adults with diabetes, who had at least one hospitalization or emergency department visit for hyper- or hypoglycemia in the Central West LHIN (5), by census subdivision, 2006/07–2010/11

KEY FINDINGS

- In most census subdivisions (CSDs), rates of hospitalization or emergency department (ED) visits for hyper- or hypoglycemia were similar to the LHIN average (390 per 10,000 adults with diabetes) and the provincial average (486 per 10,000).
- A higher-than-average rate of hospitalizations/ED visits was found in a largely rural CSD located in the northwest portion 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.

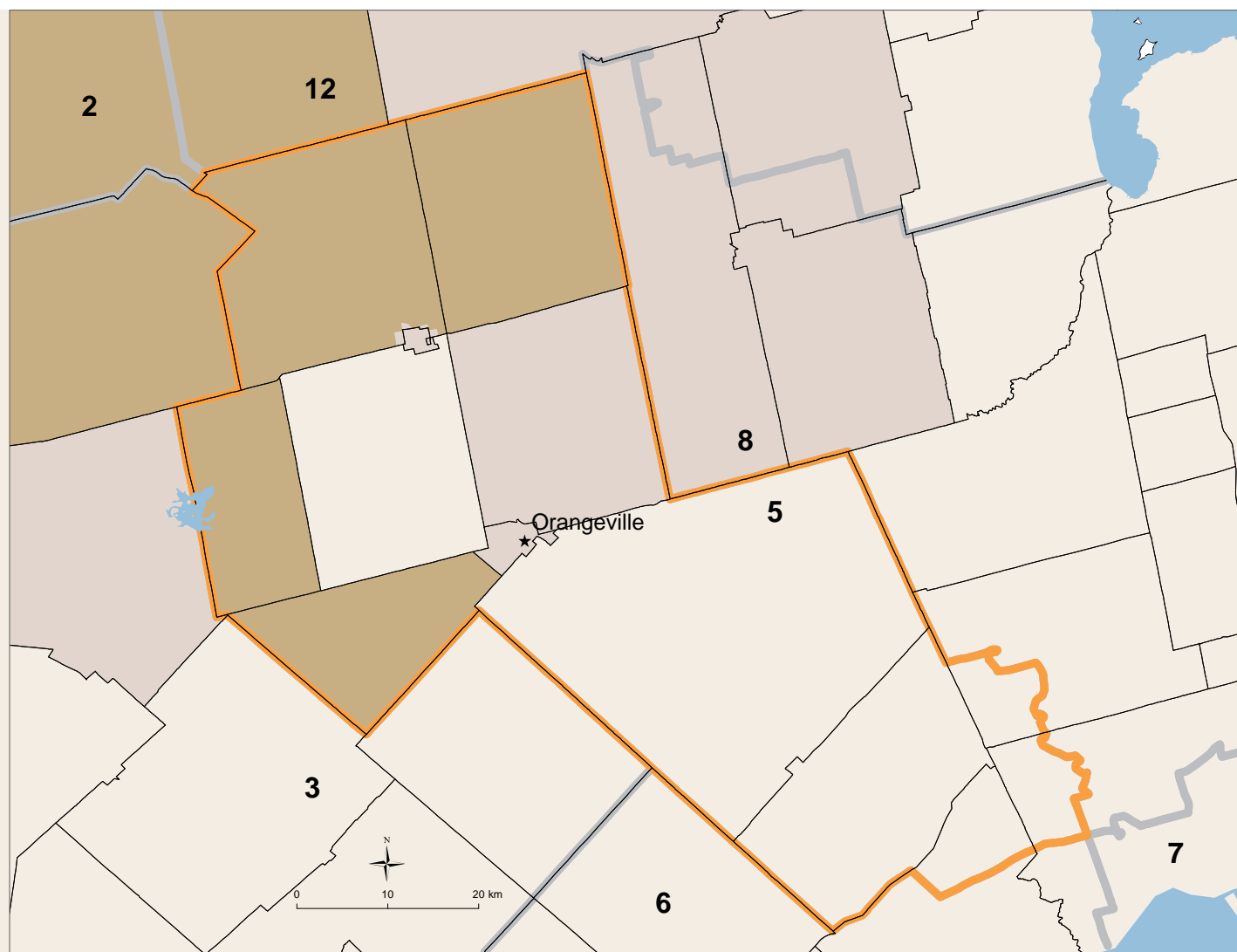
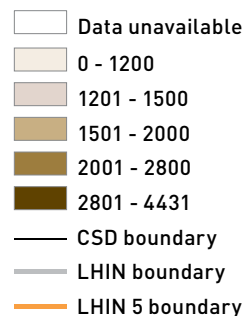
Technical note: Adults were defined as those aged 20 years and older. Rates were age- and sex-standardized using the same-aged population in the Ontario Diabetes Database on March 31, 2006 as the standard population.

EXHIBIT 5.15

Number, per 10,000 adults with diabetes, who had at least one hospitalization or emergency department visit for any acute complication in the Central West LHIN (5), by census subdivision, 2006/07–2010/11

KEY FINDINGS

- In census subdivisions (CSDs) located in the south and in one CSD northwest of Orangeville, five-year rates of hospitalizations or emergency department visits for any acute complication of diabetes were similar to the LHIN average (750 per 10,000 adults with diabetes).
- In several northern CSDs, rates were higher and more similar to the provincial average (1,029 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.

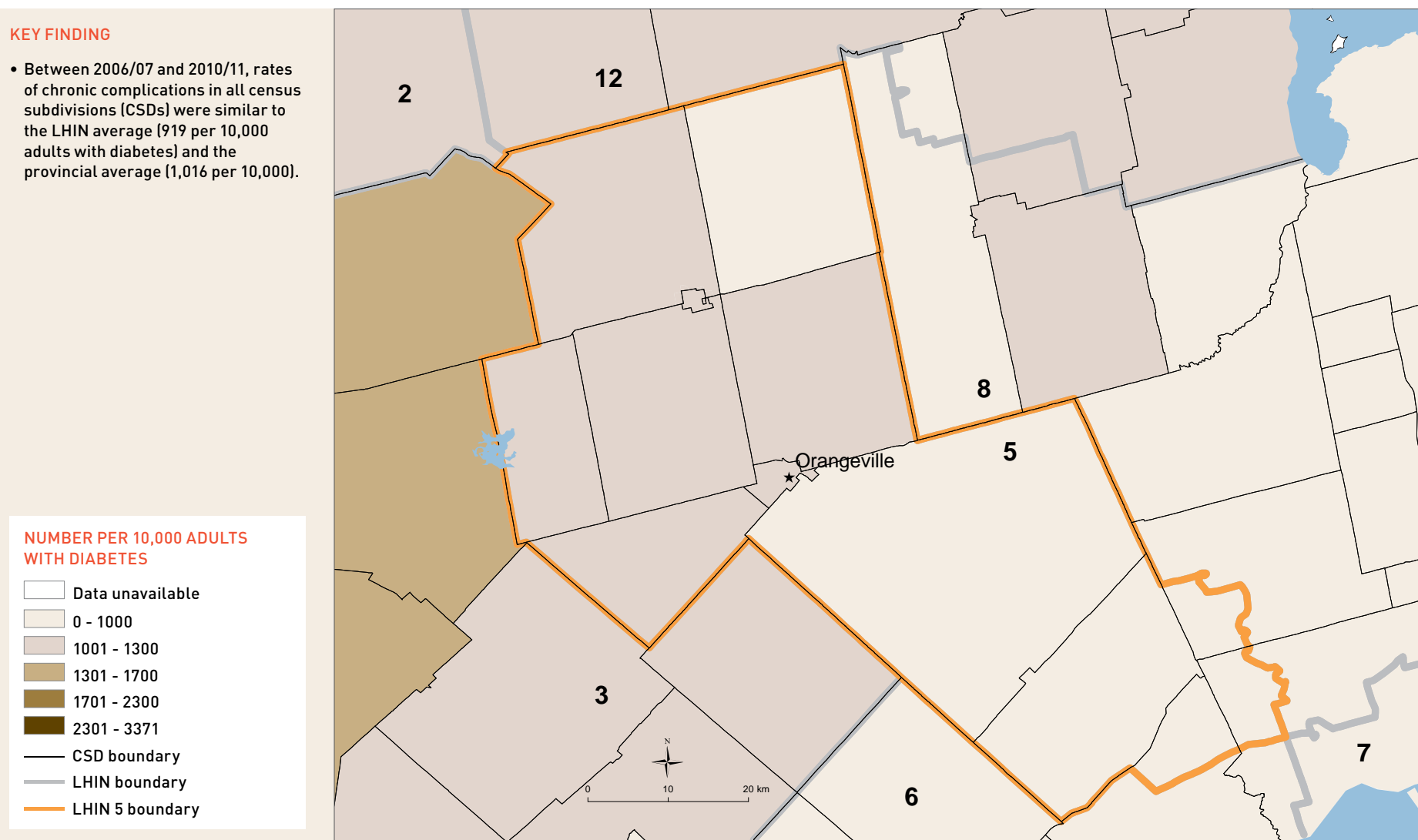
Technical notes: Adults were defined as those aged 20 years and older. Rates were age- and sex-standardized using the same-aged population in the Ontario Diabetes Database on March 31, 2006 as the standard population. Acute complications consisted of hyper- or hypoglycemia, skin and soft tissue infection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

EXHIBIT 5.16

Number, per 10,000 adults with diabetes, who had any chronic complication in the Central West LHIN (5), by census subdivision, 2006/07–2010/11

KEY FINDING

- Between 2006/07 and 2010/11, rates of chronic complications in all census subdivisions (CSDs) were similar to the LHIN average (919 per 10,000 adults with diabetes) and the provincial average (1,016 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.

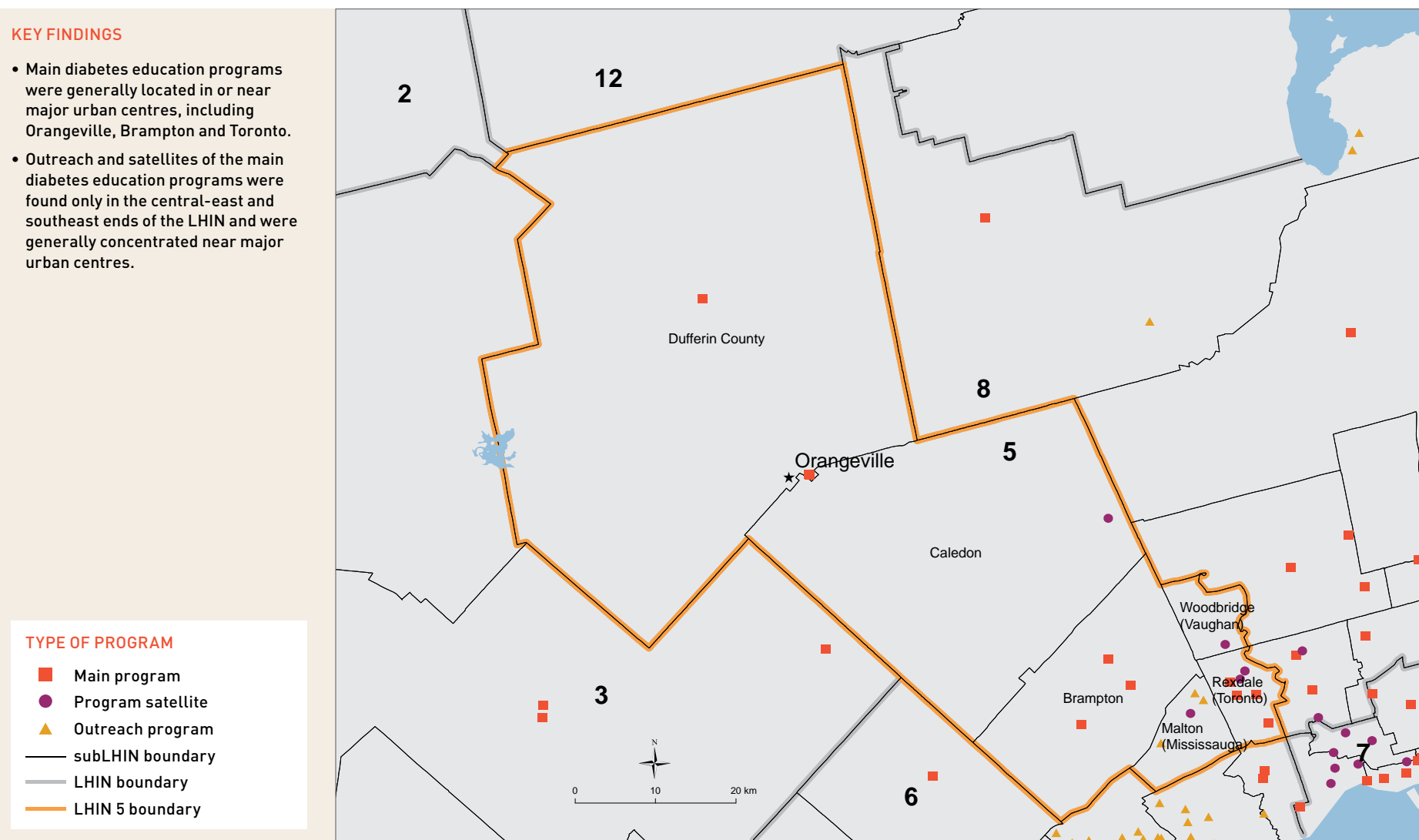
Technical note: Adults were defined as those aged 20 years and older. Rates were age- and sex-standardized using the same-aged population in the Ontario Diabetes Database on March 31, 2006 as the standard population. A chronic complication consisted of hospitalization for a cardiovascular condition or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

EXHIBIT 5.17

Locations of diabetes education programs in the Central West LHIN (5), 2011

KEY FINDINGS

- Main diabetes education programs were generally located in or near major urban centres, including Orangeville, Brampton and Toronto.
- Outreach and satellites of the main diabetes education programs were found only in the central-east and southeast ends of the LHIN and were generally concentrated near major urban centres.



Data source: Diabetes Regional Coordination Centres.

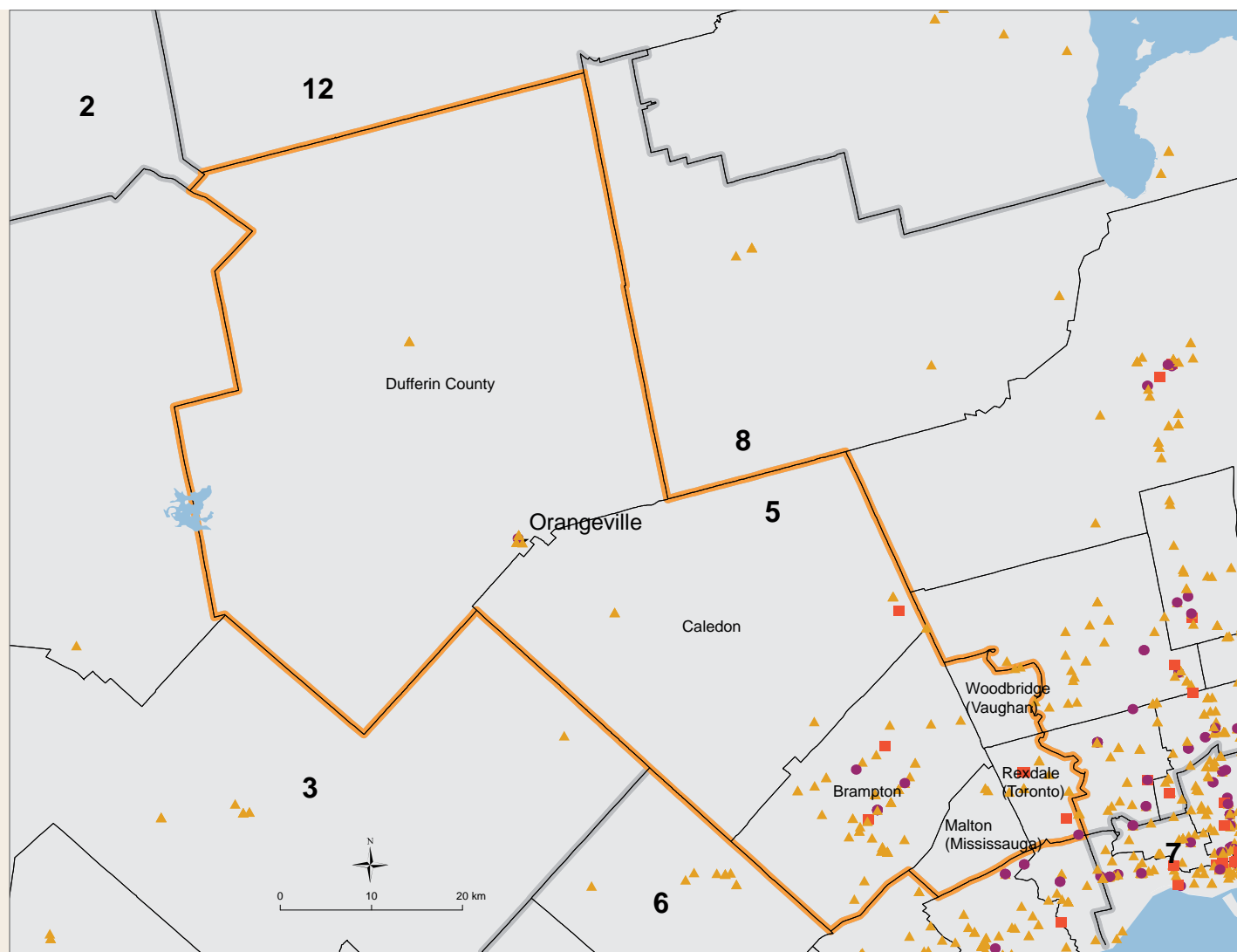
Technical note: Locations were designated based on six-digit postal codes using Statistics Canada's Postal Code Conversion File.

EXHIBIT 5.18**Locations of endocrinologists and eye specialists in the Central West LHIN (5), 2010/11****KEY FINDINGS**

- Endocrinologists were located in the central-east and southeast parts of the LHIN, with some clustering within major urban centres (Brampton and Toronto).
- Ophthalmologists were located only in Orangeville and Brampton. However, several ophthalmology practices were located on or just outside the Central West LHIN's southern border.
- In contrast, optometrists were distributed more widely throughout the LHIN, with locations in urban areas (Brampton and Toronto) as well as rural areas (Dufferin County and Caledon).

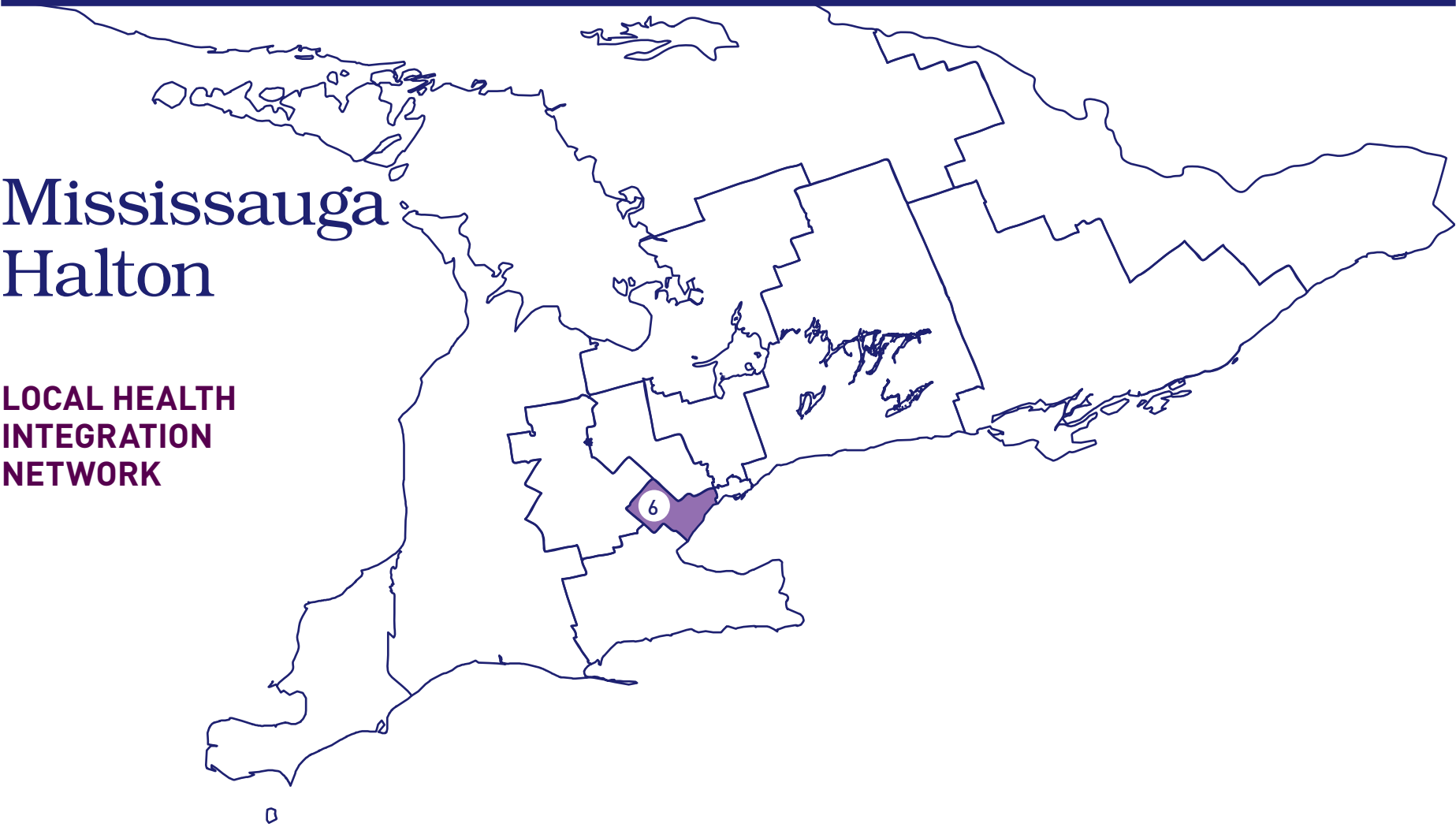
TYPE OF SPECIALIST

- Endocrinologist
- Ophthalmologist
- ▲ Optometrist
- subLHIN boundary
- LHIN boundary
- LHIN 5 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.



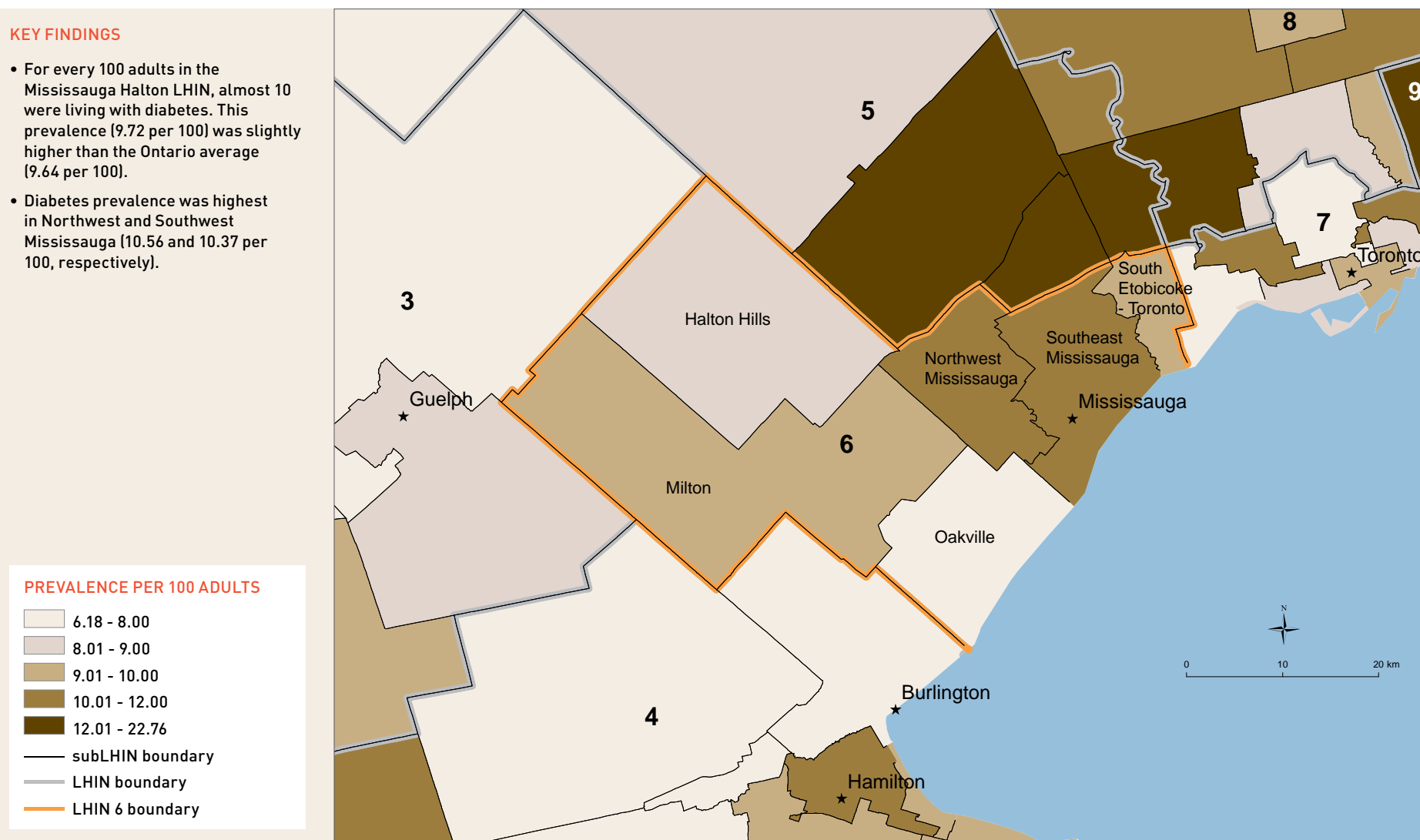
Diabetes Measures by Region

EXHIBIT 6.1

Diabetes prevalence per 100 adults in the Mississauga Halton LHIN (6), by subLHIN, on March 31, 2011

KEY FINDINGS

- For every 100 adults in the Mississauga Halton LHIN, almost 10 were living with diabetes. This prevalence (9.72 per 100) was slightly higher than the Ontario average (9.64 per 100).
- Diabetes prevalence was highest in Northwest and Southwest Mississauga (10.56 and 10.37 per 100, respectively).



Data sources: Ontario Diabetes Database; Registered Persons Database.

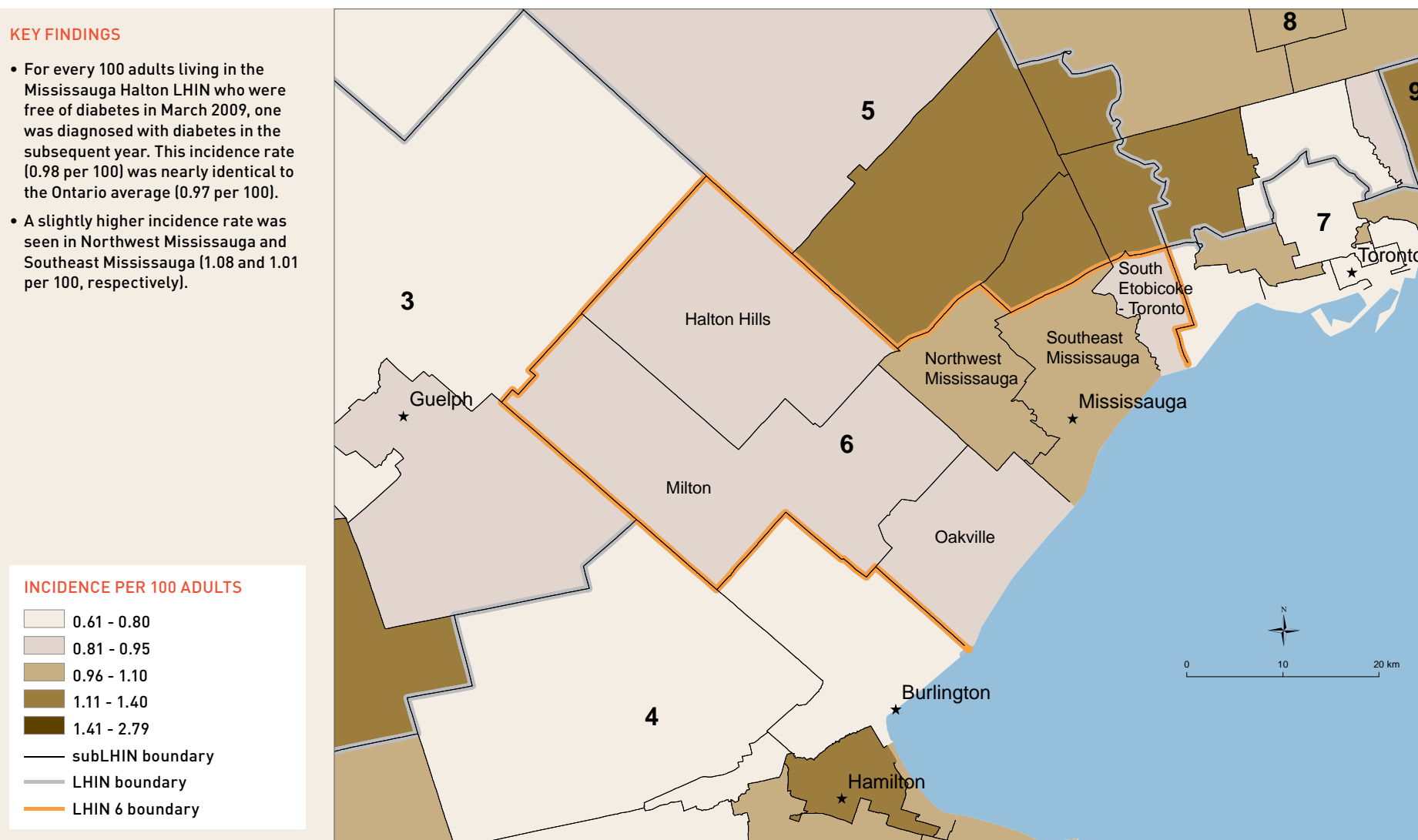
Technical note: Adults were defined as those aged 20 years and older. Rates were age- and sex-standardized using the 2001 Ontario population of the same age as the standard population.

EXHIBIT 6.2

Diabetes incidence per 100 adults in the Mississauga Halton LHIN (6), by subLHIN, 2009/10

KEY FINDINGS

- For every 100 adults living in the Mississauga Halton LHIN who were free of diabetes in March 2009, one was diagnosed with diabetes in the subsequent year. This incidence rate (0.98 per 100) was nearly identical to the Ontario average (0.97 per 100).
- A slightly higher incidence rate was seen in Northwest Mississauga and Southeast Mississauga (1.08 and 1.01 per 100, respectively).



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 6.3

Number, per 10,000 adults with diabetes, who had at least one hospitalization or emergency department visit for hyper- or hypoglycemia in the Mississauga Halton LHIN (6), by subLHIN, 2006/07–2010/11

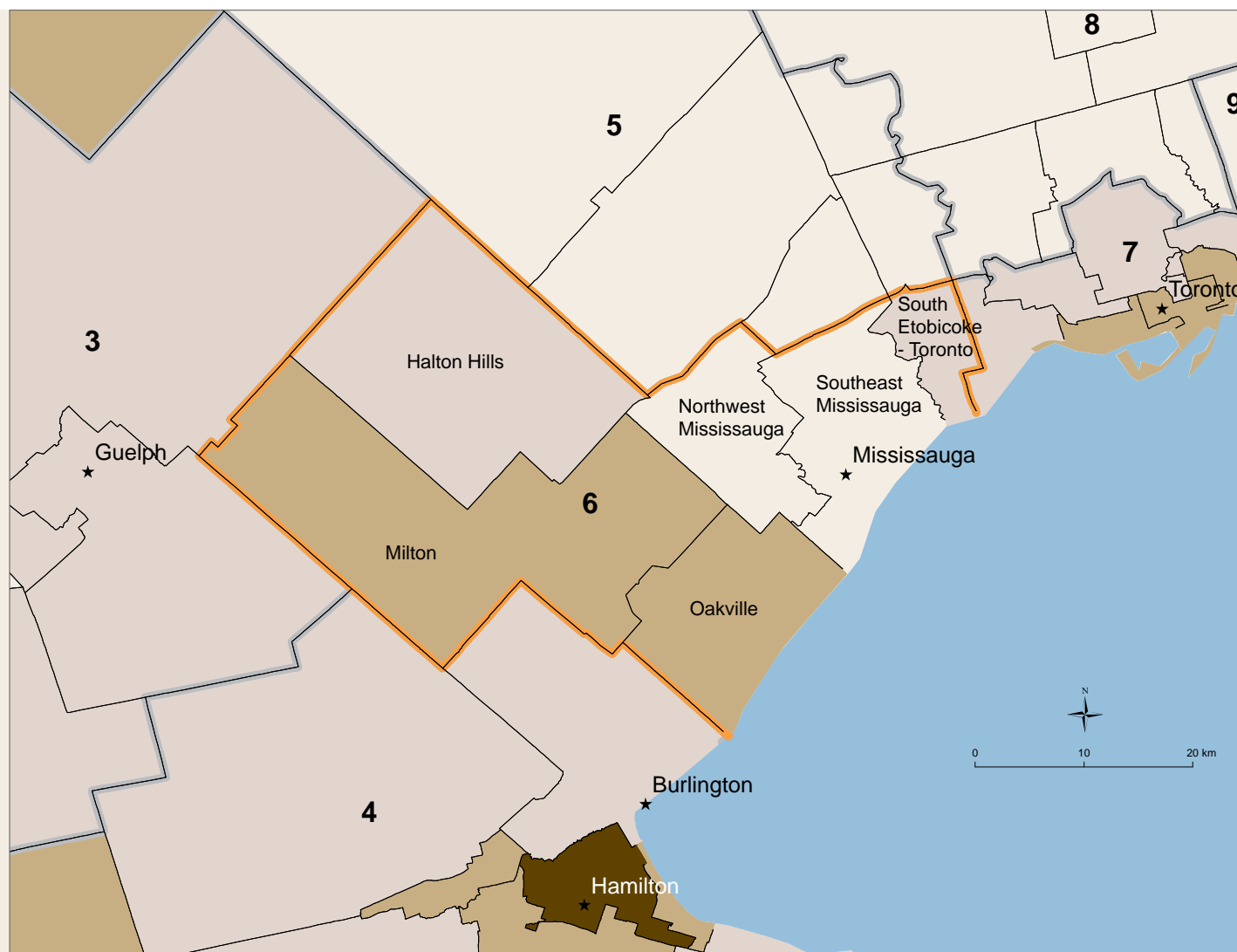
KEY FINDINGS

- Overall, for every 100 adults living with diabetes in the Mississauga Halton LHIN on March 31, 2006, about four had at least one hospitalization or emergency department (ED) visit for hyper- or hypoglycemia in the subsequent five years. This rate (413 per 10,000 adults with diabetes) was lower than the provincial average (486 per 10,000).
- Rates of hospitalizations/ED visits for hyper- or hypoglycemia varied by more than 1.5-fold across subLHINs. The highest rates were seen in Milton (567 per 10,000) and Oakville (562 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 6 boundary



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

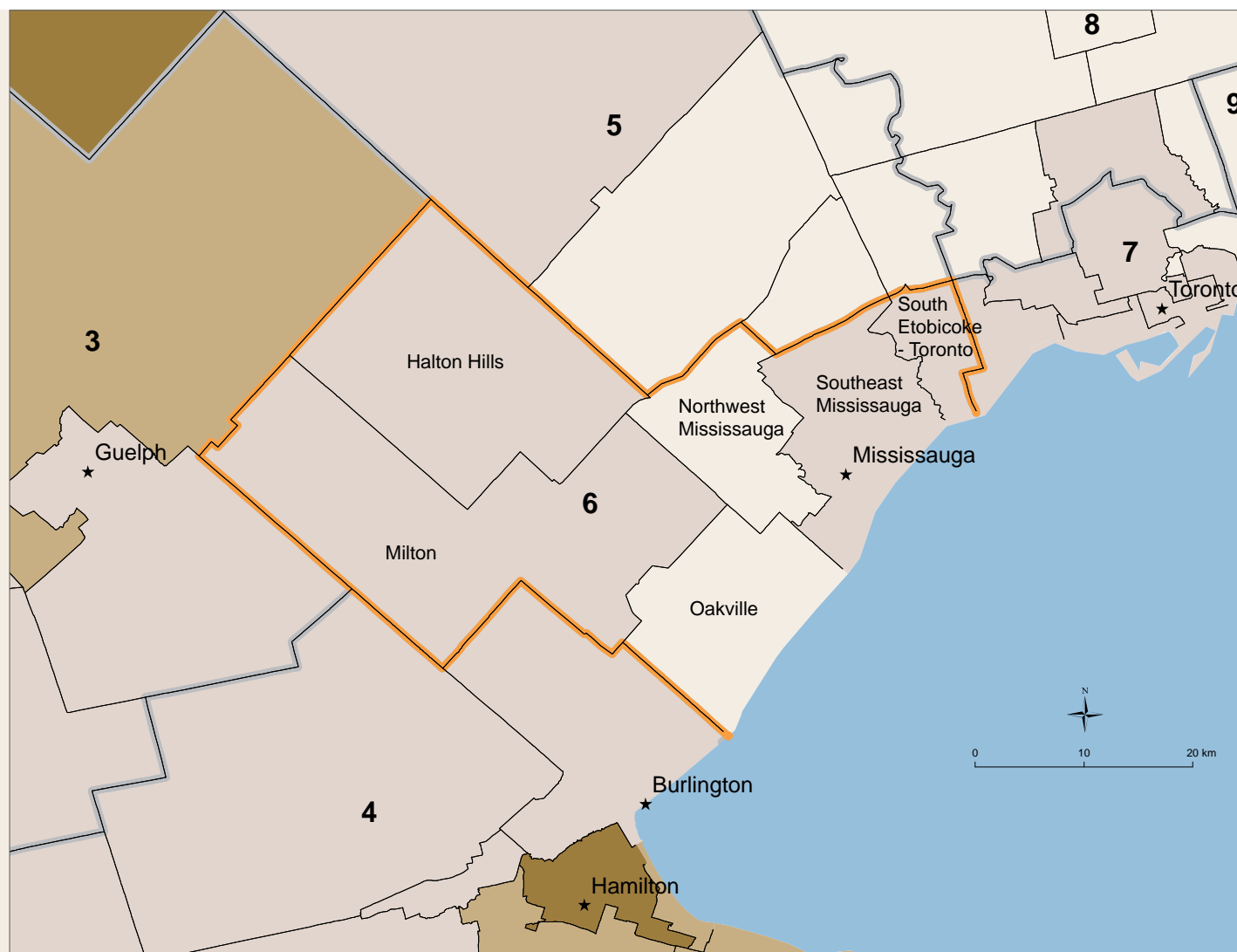
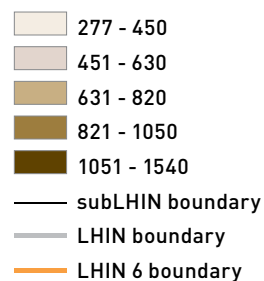
Technical note: Adults were defined as those aged 20 years and older. Rates were age- and sex-standardized using the same-aged population in the Ontario Diabetes Database on March 31, 2006 as the standard population.

EXHIBIT 6.4

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 Mississauga Halton LHIN (6), by subLHIN, 2006/07–2010/11

KEY FINDINGS

- For every 100 adults living with diabetes in the Mississauga Halton LHIN in 2006, nearly five 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 (452 per 10,000 adults with diabetes) was notably lower than the provincial average (618 per 10,000).
- There was some variation in rates across subLHINs, ranging from 330 per 10,000 in Northwest Mississauga to 621 per 10,000 in South Etobicoke-Toronto.

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.

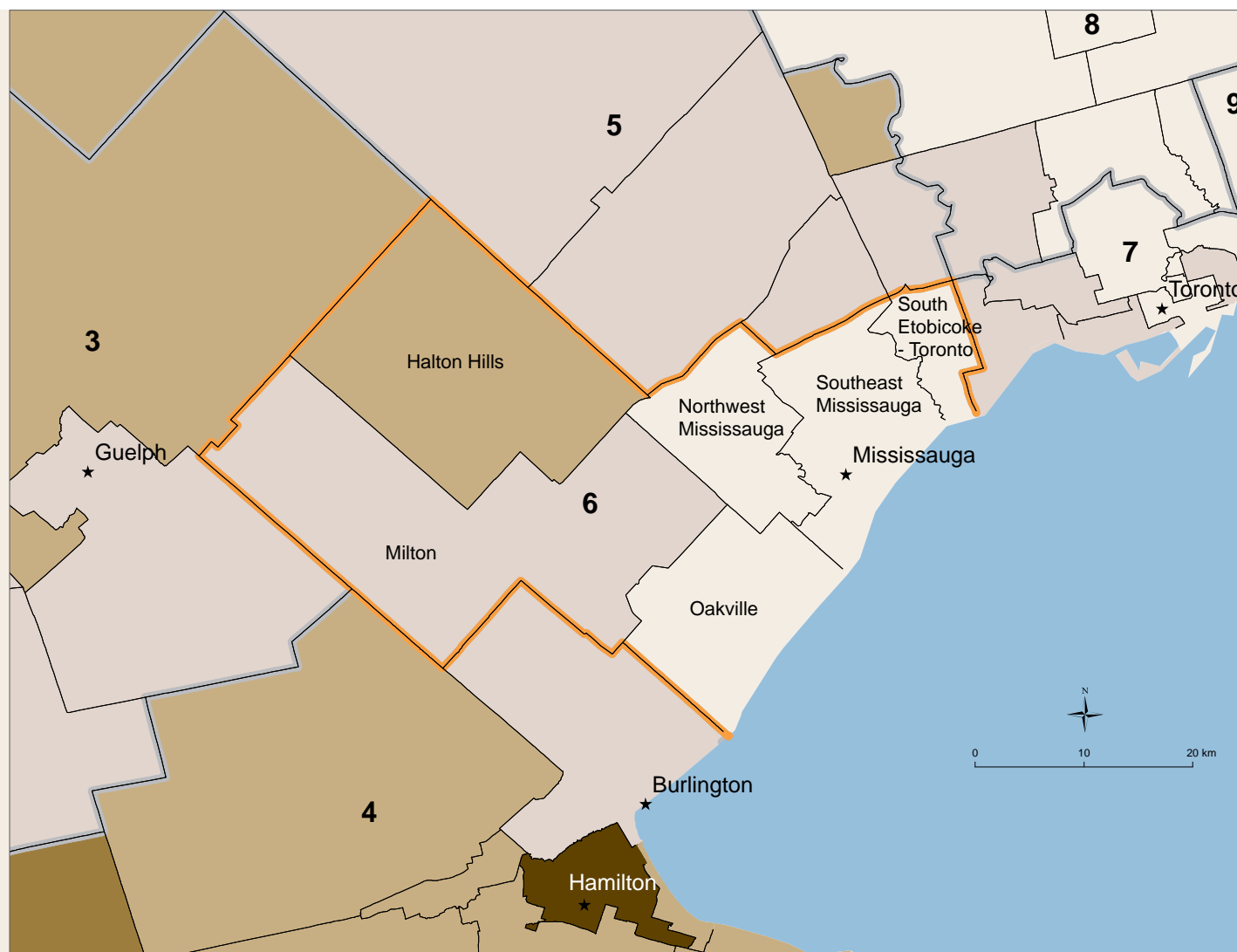
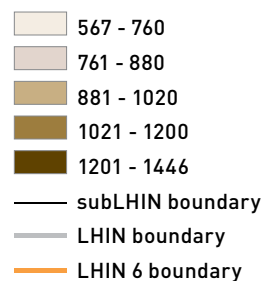
EXHIBIT 6.5

Number, per 10,000 adults with diabetes, who had at least one hospitalization for a cardiovascular condition in the Mississauga Halton LHIN (6), by subLHIN, 2006/07–2010/11

KEY FINDINGS

- More than seven in 100 adults with diabetes living in the Mississauga Halton LHIN in 2006 were hospitalized for a cardiovascular condition at least once in the ensuing five years. This rate (734 per 10,000 adults with diabetes) was well below the provincial average (888 per 10,000).
- The highest rate of cardiovascular hospitalizations was seen in Halton Hills (917 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 6.6

Number, per 10,000 adults with diabetes, who had a lower extremity amputation in the Mississauga Halton LHIN (6), by subLHIN, 2006/07–2010/11

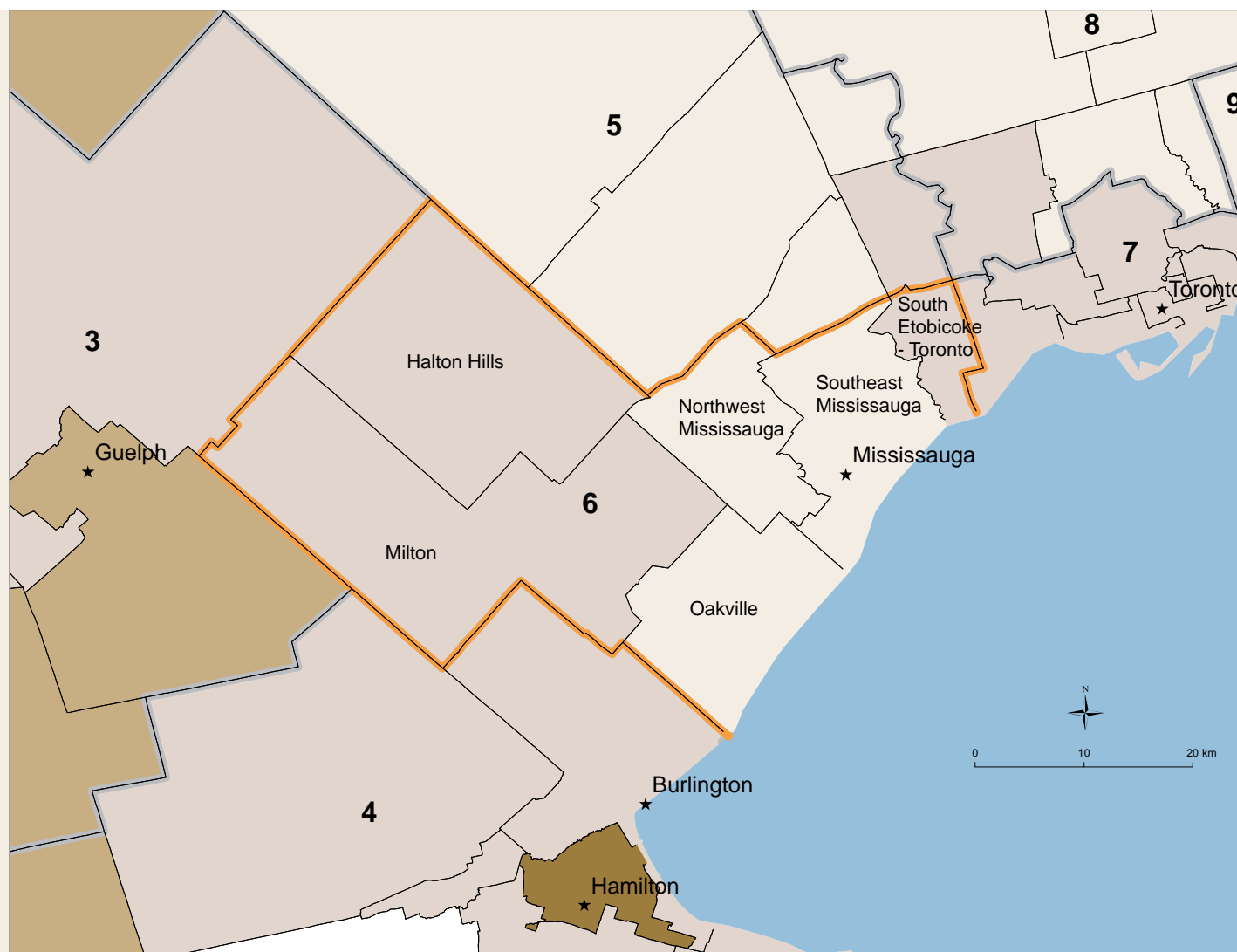
KEY FINDINGS

- In the Mississauga Halton LHIN, about four of every 1,000 adults with diabetes experienced a lower extremity amputation between 2006/07 and 2010/11. This rate (42 per 10,000 adults with diabetes) was much lower than the Ontario average (74 per 10,000).
- Rates varied by nearly two-fold across subLHINs, although all were below the provincial average. The highest rates were seen in Milton (58 per 10,000) and South Etobicoke-Toronto (56 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 6 boundary



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

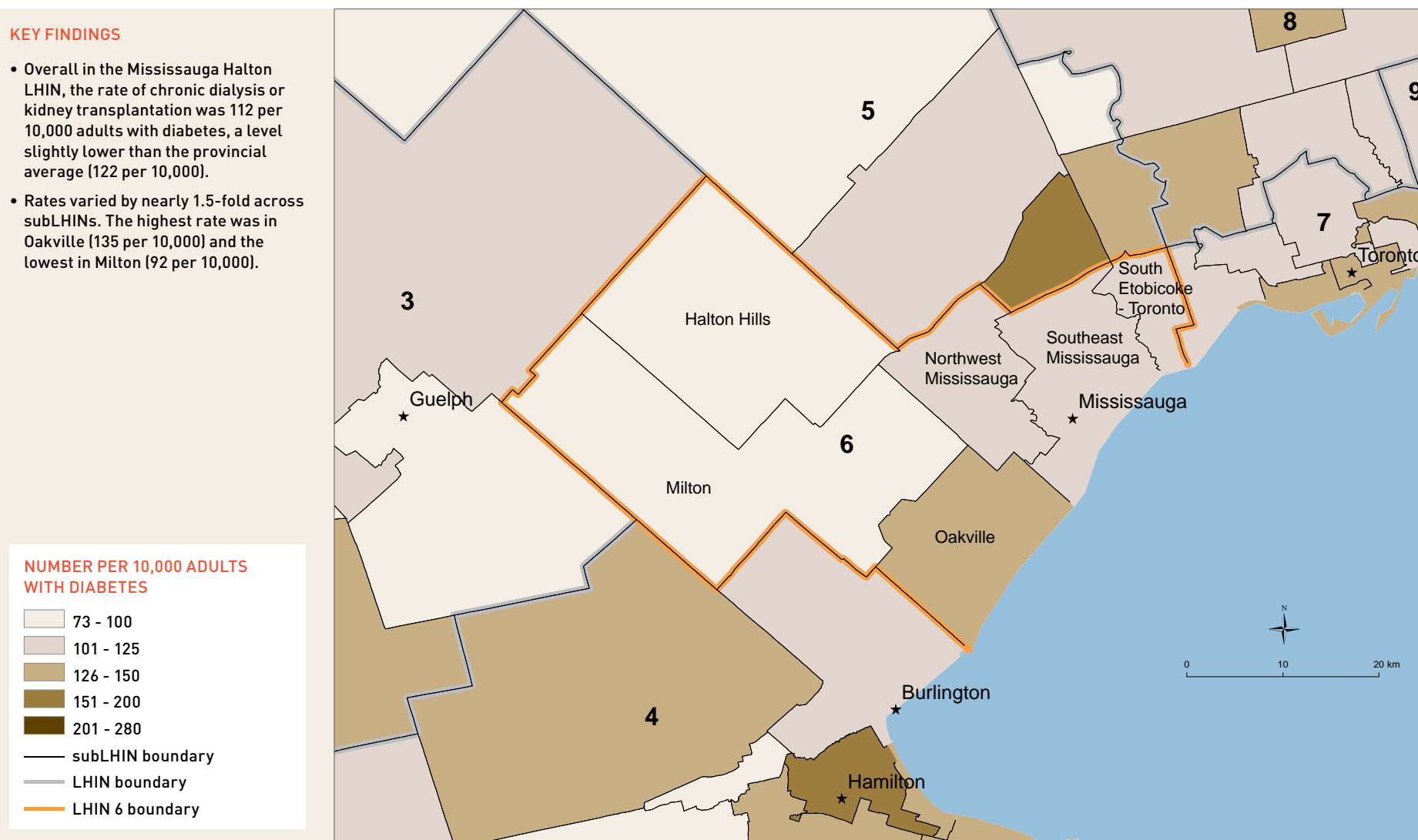
Technical note: Adults were defined as those aged 20 years and older. Rates were age- and sex-standardized using the same-aged population in the Ontario Diabetes Database on March 31, 2006 as the standard population.

EXHIBIT 6.7

Number, per 10,000 adults with diabetes, who received chronic dialysis or kidney transplantation in the Mississauga Halton LHIN (6), by subLHIN, 2006/07–2010/11

KEY FINDINGS

- Overall in the Mississauga Halton LHIN, the rate of chronic dialysis or kidney transplantation was 112 per 10,000 adults with diabetes, a level slightly lower than the provincial average (122 per 10,000).
- Rates varied by nearly 1.5-fold across subLHINs. The highest rate was in Oakville (135 per 10,000) and the lowest in Milton (92 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.

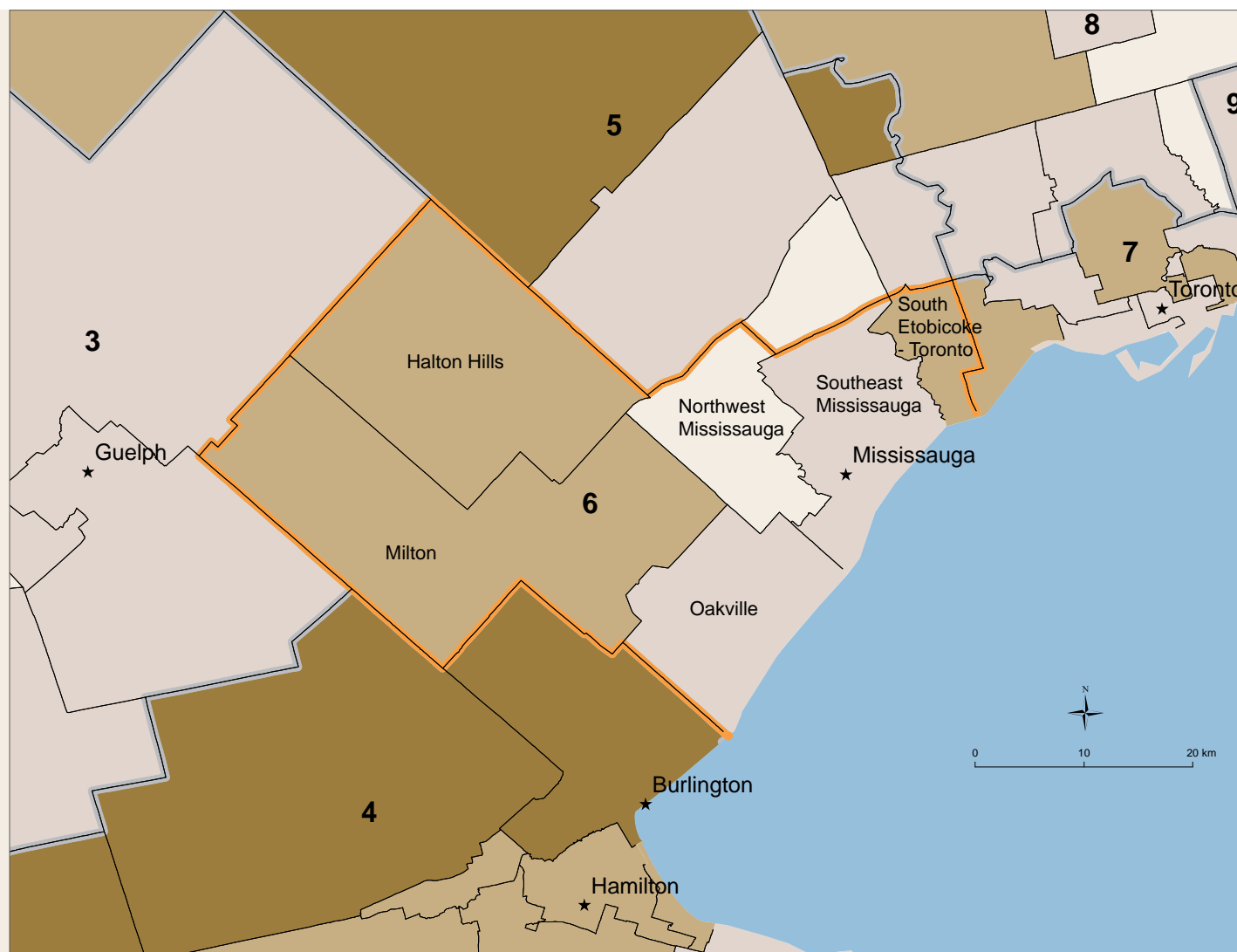
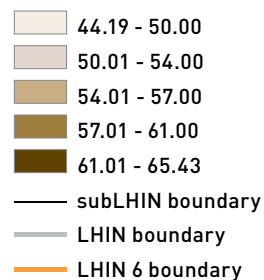
Technical note: Adults were defined as those aged 20 years and older. Rates were age- and sex-standardized using the same-aged population in the Ontario Diabetes Database on March 31, 2006 as the standard population.

EXHIBIT 6.8

Number, per 100 adults with diabetes, who had an additional chronic medical condition in the Mississauga Halton LHIN (6), by subLHIN, 2006/07–2008/09

KEY FINDINGS

- In the Mississauga Halton LHIN overall, about 51 of every 100 adults with diabetes had at least one chronic medical condition other than diabetes between 2006/07 and 2008/09. This rate (51.24 per 100) was lower than the provincial average (54.84 per 100).
- There was some variation in rates across subLHINs, ranging from 47.96 per 100 in Northwest Mississauga to 55.79 per 100 in Milton.

NUMBER PER 100 ADULTS WITH DIABETES

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

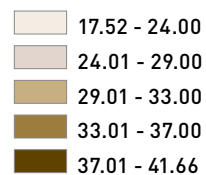
Technical note: Adults were defined as those aged 20 years and older. Rates were age- and sex-standardized using the same-aged population in the Ontario Diabetes Database on March 31, 2006 as the standard population.

EXHIBIT 6.9

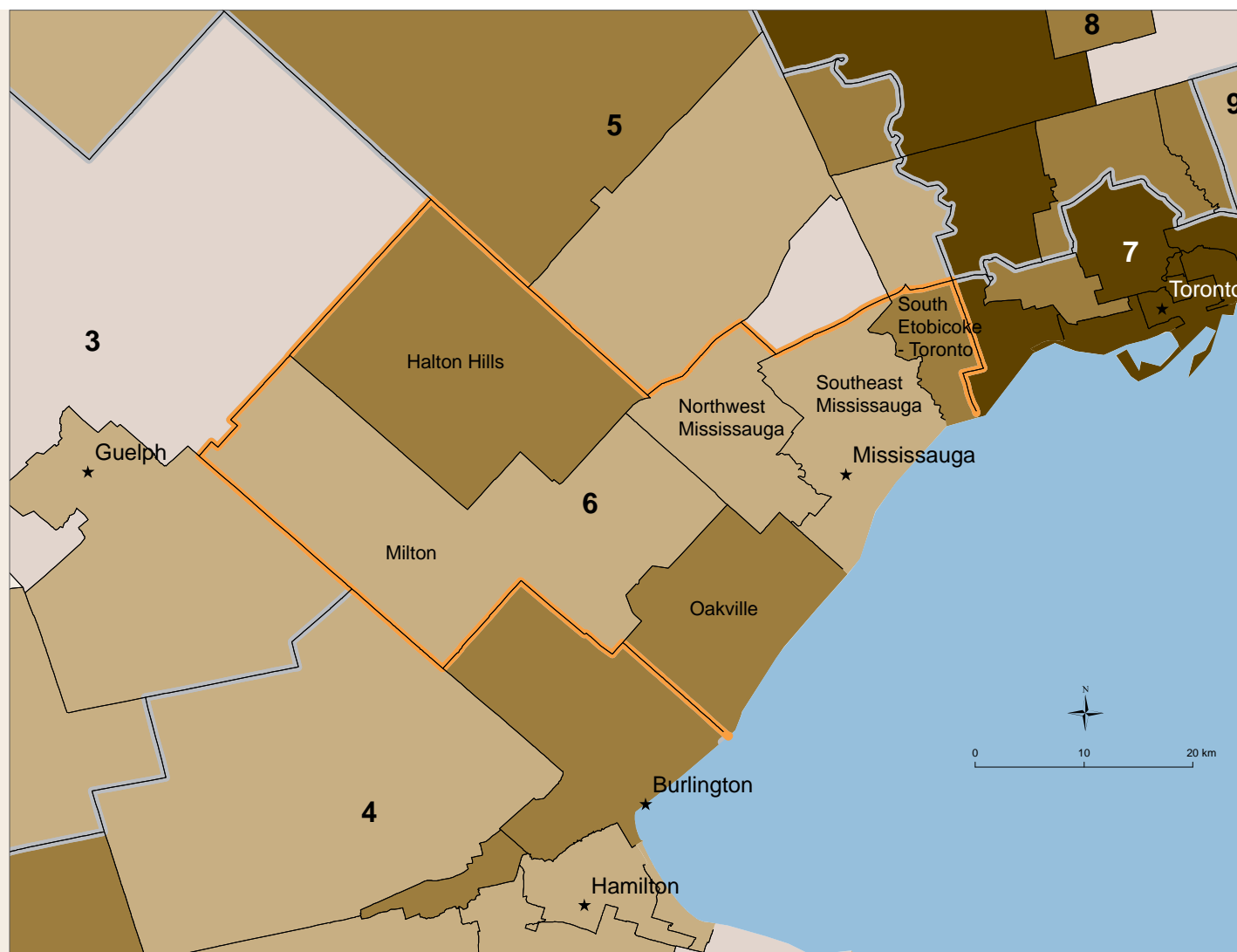
Number, per 100 adults with diabetes, who made a mental health visit for a psychotic or nonpsychotic illness in the Mississauga Halton LHIN (6), by subLHIN, 2006/07–2008/09

KEY FINDINGS

- In the Mississauga Halton LHIN, one-third of adults with diabetes made one or more mental health visits between 2006/07 and 2008/09. This rate [33.07 per 100 adults with diabetes] was very similar to the provincial average (32.89 per 100).
- There was some degree of variation in rates across subLHINs, ranging from 29.65 per 100 in Northwest Mississauga to 36.80 per 100 in Oakville.

NUMBER PER 100 ADULTS WITH DIABETES

- subLHIN boundary
- LHIN boundary
- LHIN 6 boundary



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

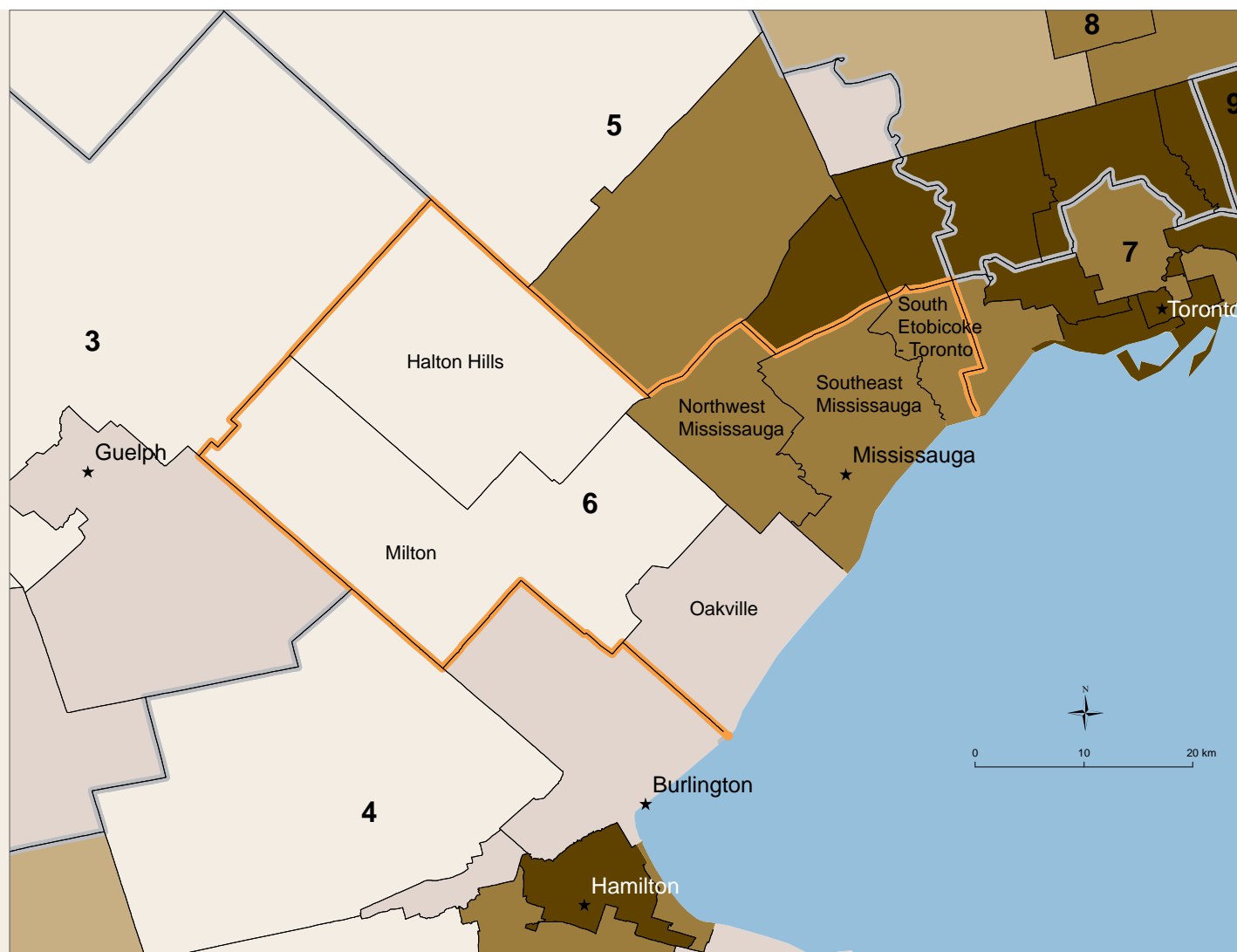
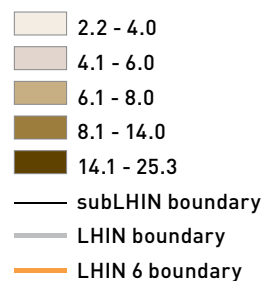
Technical note: Adults were defined as those aged 20 years and older. Rates were age- and sex-standardized using the same-aged population in the Ontario Diabetes Database on March 31, 2006 as the standard population.

EXHIBIT 6.10

Percentage of economic families with low income in the Mississauga Halton LHIN (6), by subLHIN, 2005

KEY FINDINGS

- In the Mississauga Halton LHIN, nearly nine of every 100 families were living with low income in 2005. This percentage (8.7%) was nearly identical to the provincial average of 8.6% of families.
- Levels of low income were highest in Northwest Mississauga, Southeast Mississauga and South Etobicoke-Toronto.

PERCENTAGE OF LOW-INCOME ECONOMIC FAMILIES

Data source: 2006 Census of Canada.

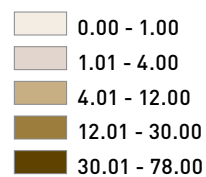
Technical note: Economic family refers to a group of two or more persons who live in the same dwelling and are related by blood, marriage, common law or adoption. Economic families with low income are defined as those that devote a larger share of their after-tax income (at least 20% more than average) 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 6.11

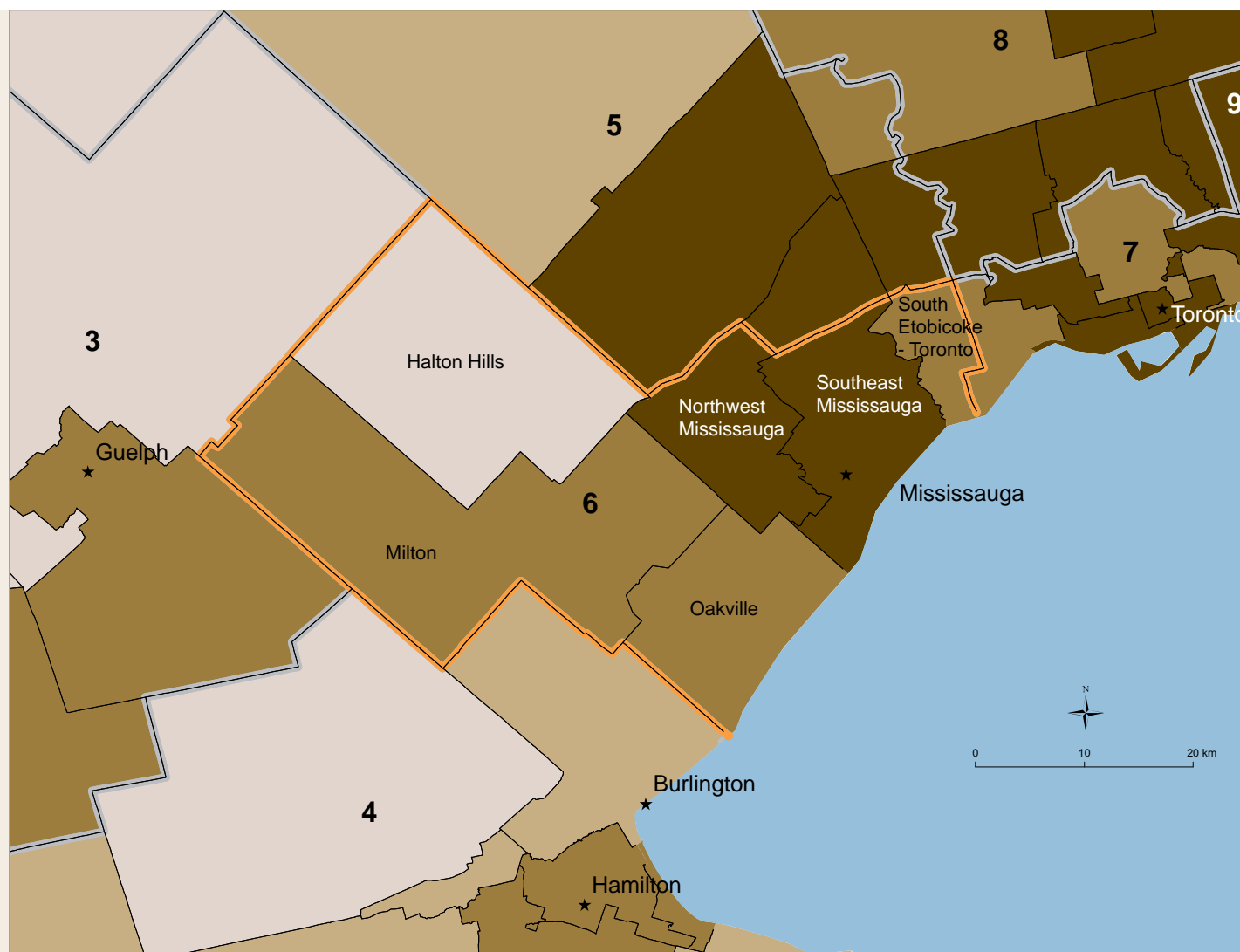
Percentage of visible minorities in the Mississauga Halton LHIN (6), by subLHIN, 2006

KEY FINDINGS

- In the Mississauga Halton LHIN, more than 36 of every 100 people self-identified as belonging to a visible minority group. This percentage (36.37%) was substantially higher than the provincial average of 22.82%.
- Higher concentrations of visible minorities resided in Northwest and Southeast Mississauga, and in South Etobicoke-Toronto.

**PERCENTAGE OF
VISIBLE MINORITIES**

— subLHIN boundary
 — LHIN boundary
 — LHIN 6 boundary



Data source: 2006 Census of Canada.

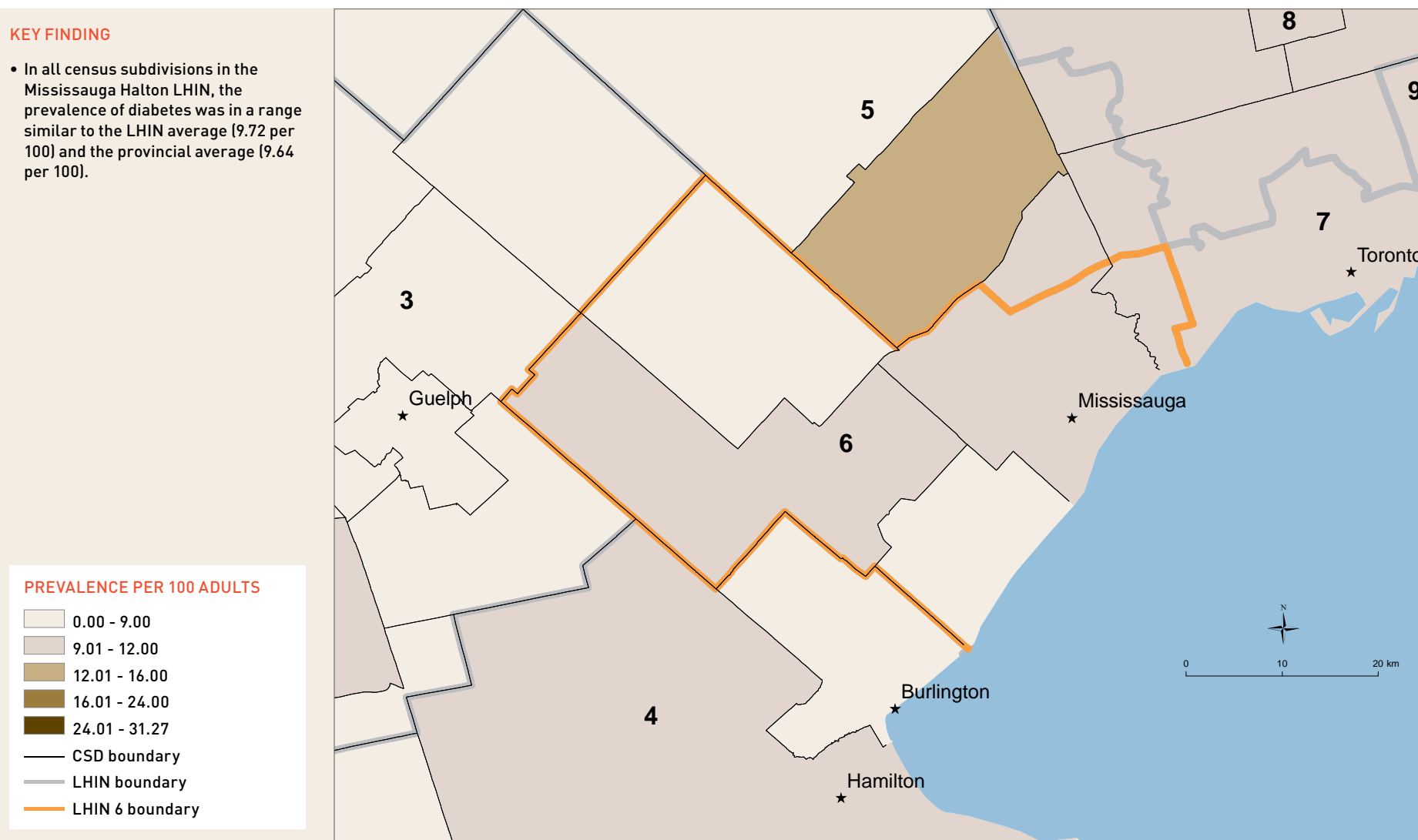
Technical note: Visible minorities include persons other than Aboriginal peoples who are non-Caucasian in race or non-white in colour.

EXHIBIT 6.12

Diabetes prevalence per 100 adults in the Mississauga Halton LHIN (6), by census subdivision, on March 31, 2011

KEY FINDING

- In all census subdivisions in the Mississauga Halton LHIN, the prevalence of diabetes was in a range similar to the LHIN average (9.72 per 100) and the provincial average (9.64 per 100).



Data sources: Ontario Diabetes Database; Registered Persons Database.

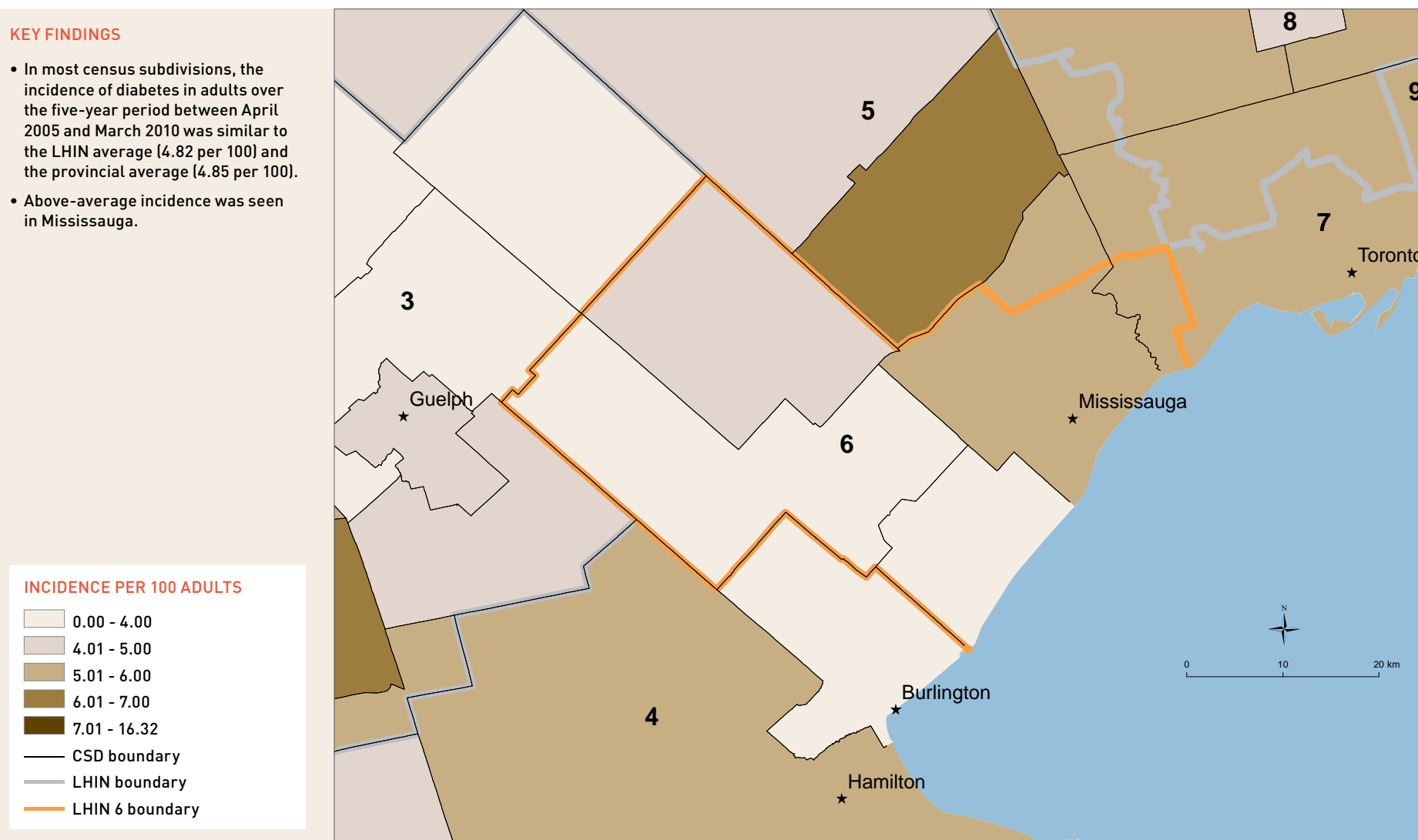
Technical note: Adults were defined as those aged 20 years and older. Rates were age- and sex-standardized using the 2001 Ontario population of the same age as the standard population.

EXHIBIT 6.13

Diabetes incidence per 100 adults in the Mississauga Halton LHIN (6), 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 (4.82 per 100) and the provincial average (4.85 per 100).
- Above-average incidence was seen in Mississauga.



Data sources: Ontario Diabetes Database; Registered Persons Database.

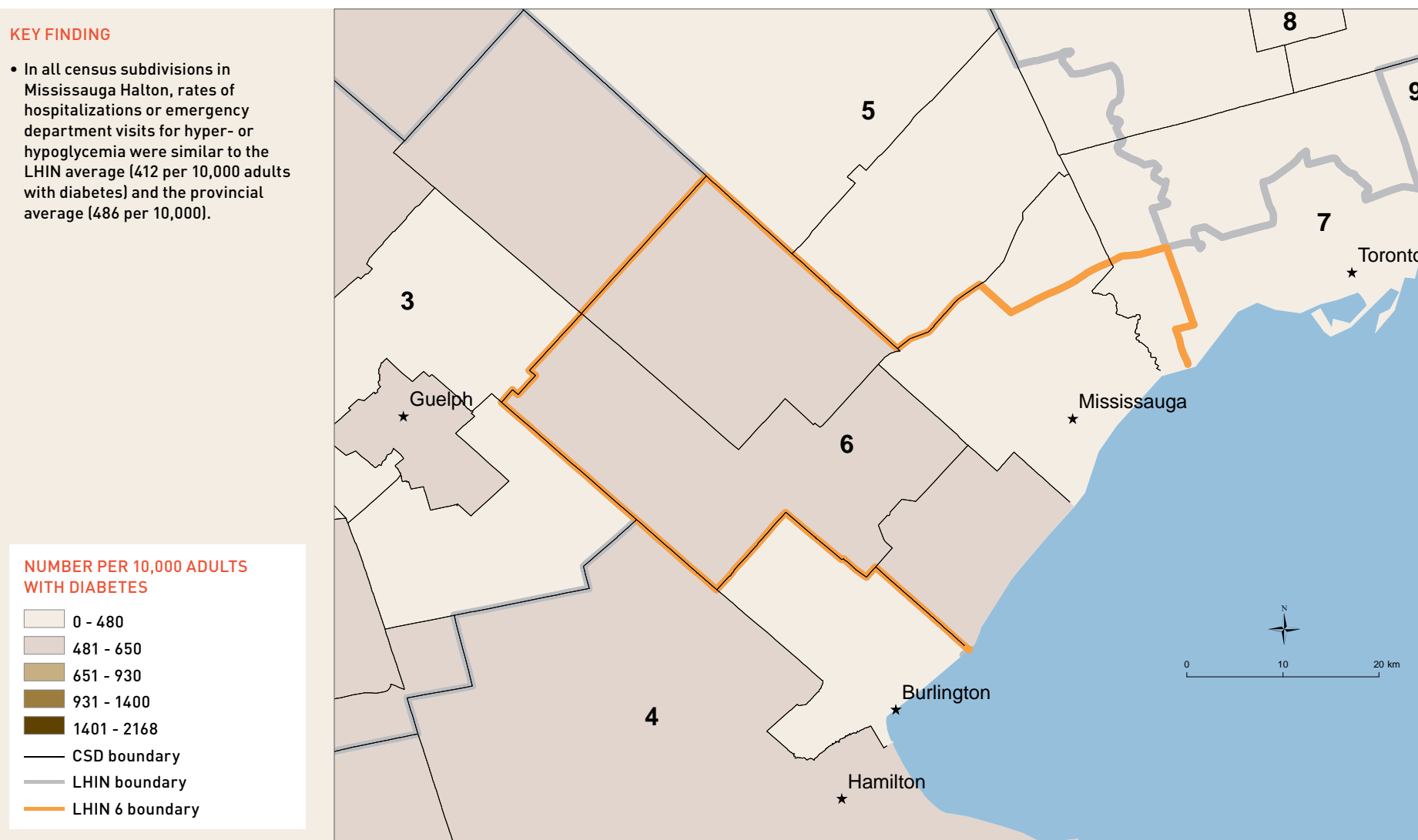
Technical note: Adults were defined as those aged 20 years and older. Rates were age- and sex-standardized using the 2001 Ontario population of the same age as the standard population.

EXHIBIT 6.14

Number, per 10,000 adults with diabetes, who had at least one hospitalization or emergency department visit for hyper- or hypoglycemia in the Mississauga Halton LHIN (6), by census subdivision, 2006/07–2010/11

KEY FINDING

- In all census subdivisions in Mississauga Halton, rates of hospitalizations or emergency department visits for hyper- or hypoglycemia were similar to the LHIN average (412 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.

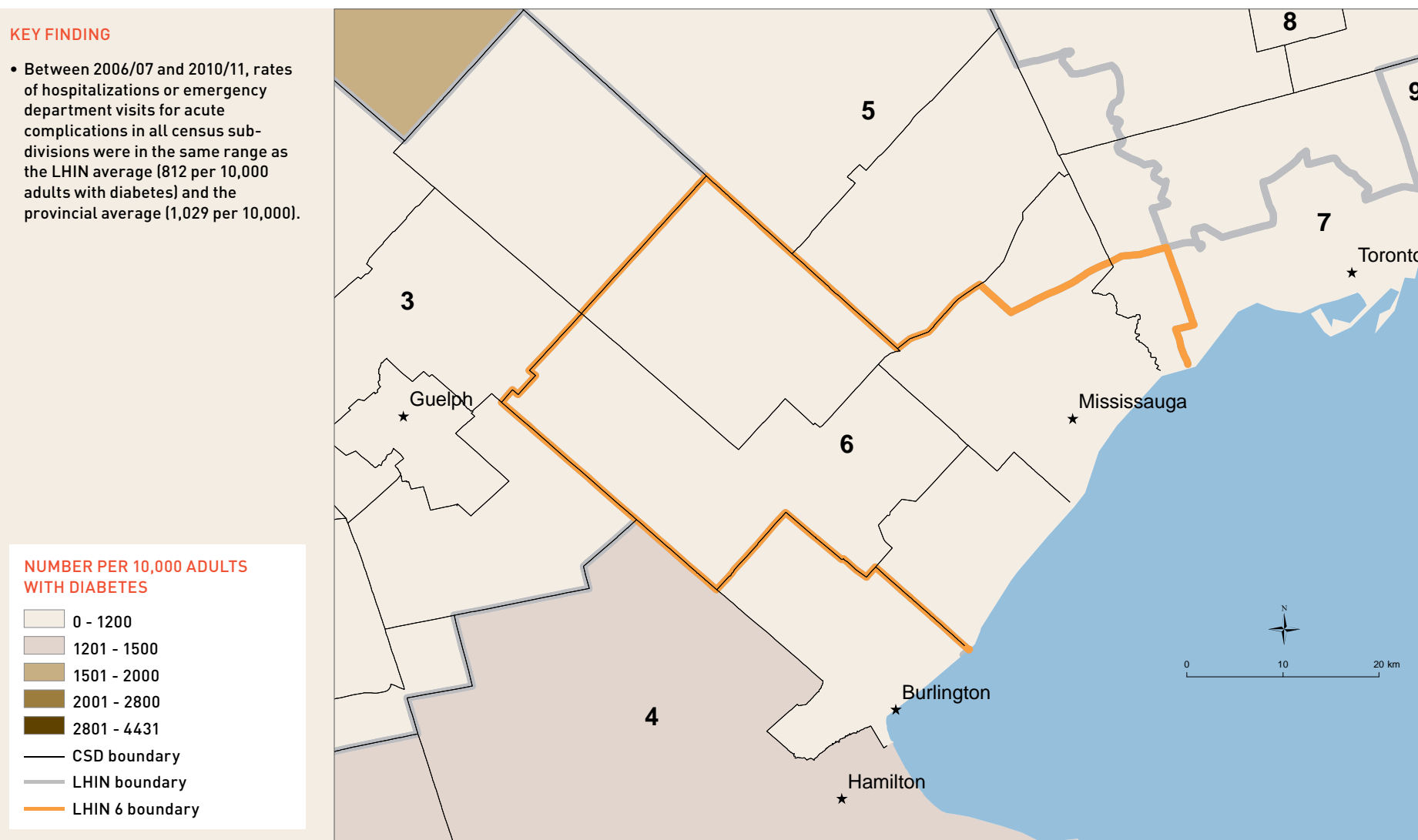
Technical note: Adults were defined as those aged 20 years and older. Rates were age- and sex-standardized using the same-aged population in the Ontario Diabetes Database on March 31, 2006 as the standard population.

EXHIBIT 6.15

Number, per 10,000 adults with diabetes, who had at least one hospitalization or emergency department visit for any acute complication in the Mississauga Halton LHIN (6), by census subdivision, 2006/07–2010/11

KEY FINDING

- Between 2006/07 and 2010/11, rates of hospitalizations or emergency department visits for acute complications in all census subdivisions were in the same range as the LHIN average (812 per 10,000 adults with diabetes) and the provincial average (1,029 per 10,000).



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

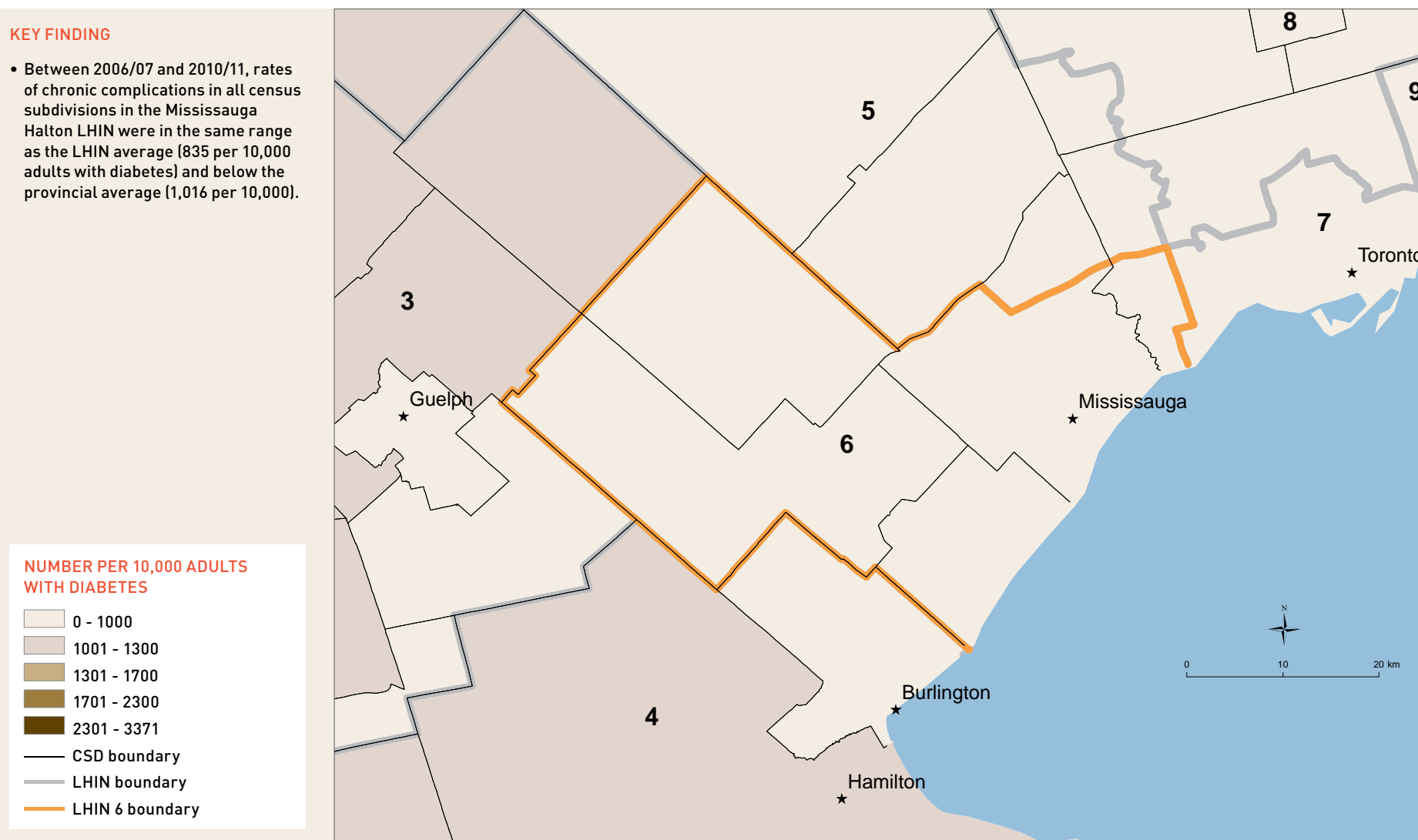
Technical notes: Adults were defined as those aged 20 years and older. Rates were age- and sex-standardized using the same-aged population in the Ontario Diabetes Database on March 31, 2006 as the standard population. Acute complications consisted of hyper- or hypoglycemia, skin and soft tissue infection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

EXHIBIT 6.16

Number, per 10,000 adults with diabetes, who had any chronic complication in the Mississauga Halton LHIN (6), by census subdivision, 2006/07–2010/11

KEY FINDING

- Between 2006/07 and 2010/11, rates of chronic complications in all census subdivisions in the Mississauga Halton LHIN were in the same range as the LHIN average (835 per 10,000 adults with diabetes) and below the provincial average (1,016 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 6.17

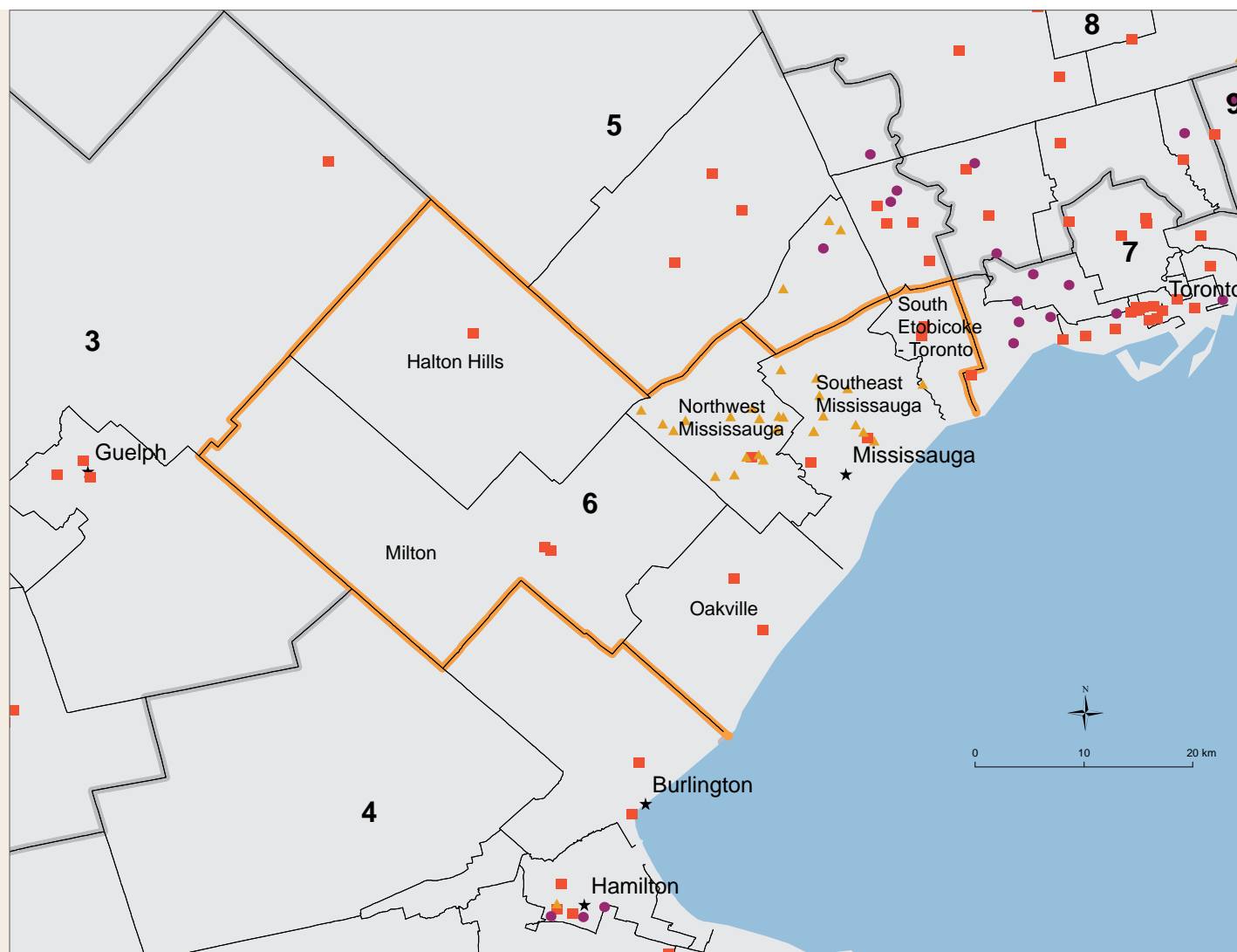
Locations of diabetes education programs in the Mississauga Halton LHIN (6), by subLHIN, 2011

KEY FINDINGS

- Main diabetes education programs were generally well distributed across the Mississauga Halton LHIN. At least one such program was located in every subLHIN.
- Outreach diabetes education programs were found only in Northwest and Southeast Mississauga.

TYPE OF PROGRAM

- Main program
- Program satellite
- ▲ Outreach program
- subLHIN boundary
- LHIN boundary
- LHIN 6 boundary



Data source: Diabetes Regional Coordination Centres.

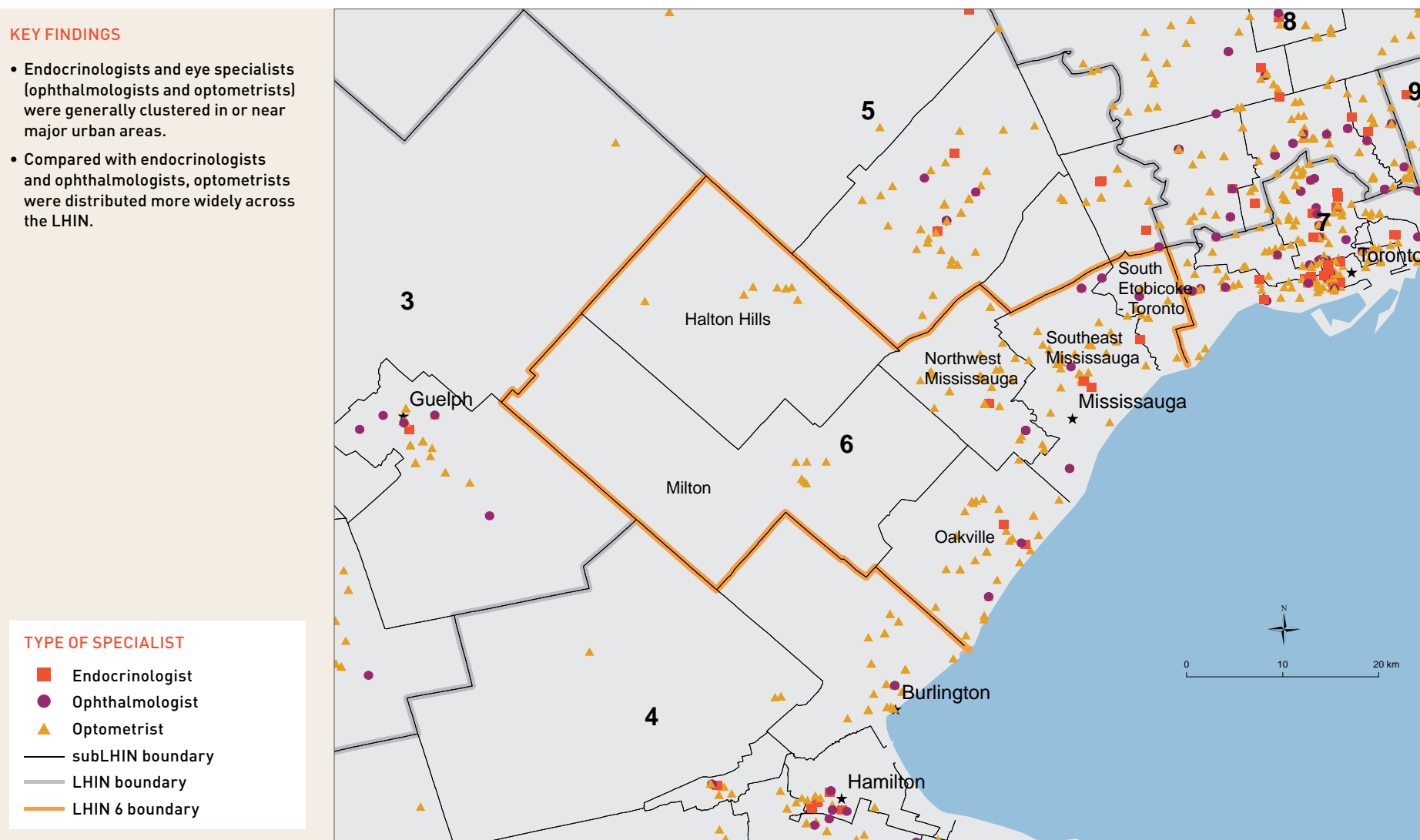
Technical note: Locations were designated based on six-digit postal codes using Statistics Canada's Postal Code Conversion File.

EXHIBIT 6.18

Locations of endocrinologists and eye specialists in the Mississauga Halton LHIN (6), by subLHIN, 2010/11

KEY FINDINGS

- Endocrinologists and eye specialists (ophthalmologists and optometrists) were generally clustered in or near major urban areas.
- Compared with endocrinologists and ophthalmologists, optometrists were distributed more widely across the LHIN.



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.