

In this chapter, we present data on differences between each LHIN and the provincial average, for selected indicators where data were available. In the first set of tables, we present data for each LHIN, identifying where its performance is better or worse than average. In the table at the end of this chapter, we present more detailed results for each indicator and each individual LHIN. Green shading shows that the LHIN was significantly better than the provincial average, while red shading shows the LHIN is worse than average.

Differences were considered significant if they were both statistically significant* and clinically significant. We used the following guideline to define clinically significant differences:

Type of indicator	Guidelines for a clinically significant difference between a LHIN and the provincial average
Wait times	Relative difference of 25%
Rate of a serious adverse outcome	Relative difference of 25%
Percentage adoption of a best practice (process measure, often with a target of 100%)	Absolute difference of 5%
Patient experience variable (e.g., percentage satisfied with x)	Absolute difference of 5%

Abbreviations used in this chapter are as follows:

ALC = alternate level of care (in this case, a hospital bed occupied by someone who could be better served in a different setting, such as a long-term care home)

AMI = acute myocardial infarction (heart attack)

CHF = congestive heart failure

COPD = chronic obstructive pulmonary disease (emphysema or chronic bronchitis)

ED = emergency department

FOBT = fecal occult blood test

LHIN = local health integration network

LTC = long-term care home

*For some indicators where data was obtained from other parties, confidence intervals were not available, but statistical significance was inferred based on estimates of the sample size and assumptions about the probability distribution of the variable. See the technical appendix to this document at www.ohqc.ca for more details.



ERIE ST. CLAIR LHIN	
Superior results, no room to improve	<ul style="list-style-type: none"> • None
Better than average results, still room to improve	<ul style="list-style-type: none"> • Shorter ED wait times and higher patient experience ratings in the ED • Shorter wait times for LTC placement from hospital and lower percentage of ALC hospital bed days • Higher mammography screening rates
Average results, still room to improve	<ul style="list-style-type: none"> • Access to primary care: percentage of adults without a family doctor and wait times to see a family doctor are comparable to the provincial average, even though the supply of family physicians and specialists is below average • Hospital care: use of right drugs for AMI after discharge; AMI, COPD and CHF readmissions; AMI and stroke mortality • Wait times for surgery: cancer, general surgery, cataract, hip and knee replacements • Chronic disease management: diabetes • LTC safety: use of potentially dangerous drugs in the elderly and falls • Hospital – patients discharged with the information they need • Most healthy behaviours: smoking, physical inactivity • Preventive health screening: pap test and FOBT • Rates of intentional self-harm and hospitalization for injuries • AMI incidence (rate of heart attacks)
Worse than average results, major room to improve	<ul style="list-style-type: none"> • Higher rates of obesity, drinking and inadequate fruit and vegetable intake • Lower hospital patient experience ratings (especially with getting answers or clear explanations) • Hospital care: fewer prescriptions for the right drugs for CHF after discharge • Chronic disease management: higher admission rate for ambulatory care sensitive conditions (where hospitalization might have been avoided with better primary care) • Lower rate of osteoporosis screening

SOUTH WEST LHIN	
Superior results, no room to improve	<ul style="list-style-type: none"> • None
Better than average results, still room to improve	<ul style="list-style-type: none"> • Shorter ED wait times and higher patient experience ratings in the ED • Shorter wait times for LTC placement for people in the community; the proportion of people who get their first choice of LTC is similar to the provincial average • Hospital patients have higher patient experience ratings and more are discharged with the information they need • Shorter wait times for CT scans
Average results, still room to improve	<ul style="list-style-type: none"> • Access to primary care: percentage of adults without a family doctor and wait times to see a family doctor • Percentage of ALC hospital bed days • Hospital care: use of right drugs for AMI after discharge; AMI, CHF, and COPD readmissions; AMI and stroke mortality • Chronic disease management: diabetes (complications, eye visits and drug use) and admissions for ambulatory care sensitive conditions • LTC safety: use of potentially dangerous drugs in the elderly and falls • Wait times for most surgeries: general surgery, cataract, hip and knee replacements; also MRI scans • Most healthy behaviours: smoking, physical inactivity, obesity, fruit and vegetable intake • Rates of intentional self-harm • Most preventive health screening: mammography, pap test and FOBT • Rate of heart attacks
Worse than average results, major room to improve	<ul style="list-style-type: none"> • Higher rate of hospitalization for injuries • Lower rate of osteoporosis screening • Longer wait times for cancer surgeries • Higher proportion of the population reporting heavy drinking

Note: South West LHIN is also a heavy user of clinical telemedicine services.

WATERLOO WELLINGTON LHIN	
Superior results, no room to improve	<ul style="list-style-type: none"> • None
Better than average results, still room to improve	<ul style="list-style-type: none"> • Shorter wait times for hip and knee replacements, CT scans • For CHF patients in hospital, better drug treatment and lower readmission rate
Average results, still room to improve	<ul style="list-style-type: none"> • ED wait times — a mixed picture: longer wait times to see a doctor, but shorter wait times for a bed for those who are admitted • Access to primary care: percentage of adults without a family doctor and wait times to see a family doctor; supply of family physicians and nurse practitioners is also average, but specialist supply is below average • Wait times for most surgeries: cancer, general surgery, cataract; also MRI scans • Hospital care: use of right drugs for AMI after discharge; AMI, and COPD readmissions; AMI and stroke mortality • Hospital patient experience rating and % of patients discharged with the information they need • Chronic disease management: diabetes and admissions for ambulatory care sensitive conditions • LTC safety: use of potentially dangerous drugs in the elderly and falls • Healthy behaviours: smoking, drinking, physical inactivity, obesity, fruit and vegetable intake • Preventive health screening: mammography, pap test, FOBT and osteoporosis screening • Rate of hospitalization for injuries • Rate of heart attacks
Worse than average results, major room to improve	<ul style="list-style-type: none"> • Longer wait times for LTC placement, especially for people in the community; however, the percentage of people who get their first choice of LTC is similar to the provincial average • Higher percentage of ALC hospital bed days • Higher rate of intentional self-harm
HAMILTON NIAGARA HALDIMAND BRANT LHIN	
Superior results, no room to improve	<ul style="list-style-type: none"> • None
Better than average results, still room to improve	<ul style="list-style-type: none"> • Access to primary care: lower percentage of adults without a family doctor; however, wait times to see a family doctor are comparable to the provincial average
Average results, still room to improve	<ul style="list-style-type: none"> • Wait times for surgery: cancer, general surgery, cataract, hip and knee replacements • Hospital care: use of right drugs; AMI, CHF and COPD readmissions; AMI and stroke mortality • Hospital patient experience rating and % of patients discharged with the information they need • ED patient experience • Chronic disease management: diabetes and admissions for ambulatory care sensitive conditions • LTC safety: use of potentially dangerous drugs in the elderly and falls • Healthy behaviours: smoking, drinking, physical inactivity, obesity, fruit and vegetable intake • Preventive health screening: mammography, pap test, FOBT and osteoporosis screening • Rate of hospitalization for injuries and intentional self-harm • Rate of heart attacks
Worse than average results, major room to improve	<ul style="list-style-type: none"> • Longer ED wait times • Longer wait times for LTC placement, especially for people in hospital; however, the percentage of people who get their first choice of LTC is better than the provincial average • Higher percentage of ALC hospital bed days • Longer wait times for CT and MRI scans

CENTRAL WEST LHIN	
Superior results, no room to improve	<ul style="list-style-type: none"> • Prescribing of statins for patients hospitalized for AMI (91%)
Better than average results, still room to improve	<ul style="list-style-type: none"> • Shortest wait times in Ontario for LTC placement; however, lower rate of people who get their first choice of LTC • Lower percentage of ALC hospital bed days • Shorter wait times for CT and MRI scans • Hospital care: better drug prescribing practices for AMI ; lower stroke mortality • Lower rate of intentional self-harm
Average results, still room to improve	<ul style="list-style-type: none"> • Access to primary care: percentage of adults without a family doctor and wait times to see a family doctor • Wait times for surgery: cancer, general surgery, cataract, hip and knee replacements • Hospital care: drug prescribing practices and readmission for CHF; AMI mortality; COPD readmissions • Chronic disease management: diabetes and admissions for ambulatory care sensitive conditions • LTC safety: use of potentially dangerous drugs in the elderly and falls • Some healthy behaviours: smoking, obesity, fruit and vegetable intake • Preventive health screening: mammography, pap test, FOBT and osteoporosis screening • Rate of hospitalization for injuries • Rate of heart attacks
Worse than average results, major room to improve	<ul style="list-style-type: none"> • Hospital care: higher AMI readmissions • Longer ED wait times and lower patient experience ratings in the ED • Hospital- patients have lower patient experience ratings and fewer are discharged with the information they need • Higher proportion of the population reporting heavy drinking and physical inactivity
MISSISSAUGA HALTON LHIN	
Superior results, no room to improve	<ul style="list-style-type: none"> • None
Better than average results, still room to improve	<ul style="list-style-type: none"> • Lower rate of AMI readmissions • Chronic disease management: fewer admissions for ambulatory care sensitive conditions • Higher rate of osteoporosis screening • Lower rate of intentional self-harm
Average results, still room to improve	<ul style="list-style-type: none"> • Access to primary care: percentage of adults without a family doctor; however, wait times to see a family doctor are better than the provincial average • Wait times for surgery: cancer, general surgery, cataract, hip and knee replacements; also CT scans • Wait for LTC placement; however, lower rate of people who get their first choice of LTC • Percentage of ALC hospital bed days • Hospital care: drug prescribing practices; AMI and stroke mortality; COPD and CHF readmissions • Chronic disease management: diabetes; CHF and AMI one-year mortality • LTC safety: use of potentially dangerous drugs in the elderly and falls • Healthy behaviours: smoking, drinking, obesity, physical inactivity, fruit and vegetable intake • Most preventive health screening: mammography, pap test and FOBT • Rate of hospitalization for injuries • Rate of heart attacks
Worse than average results, major room to improve	<ul style="list-style-type: none"> • Longer wait times in the ED to transfer admitted patients to a bed, and lower patient experience ratings • Hospital patients have lower patient experience ratings and fewer are discharged with the information they need • Longer wait times for MRI scans

TORONTO CENTRAL LHIN	
Superior results, no room to improve	<ul style="list-style-type: none"> • None
Better than average results, still room to improve	<ul style="list-style-type: none"> • Shorter wait times for LTC placement • Lower percentage of ALC hospital bed days • Shorter wait times for knee replacements and MRI scans • Hospital- patients have higher patient experience ratings and more are discharged with the information they need • Lower rate of obesity
Average results, still room to improve	<ul style="list-style-type: none"> • Access to primary care: percentage of adults without a family doctor and wait times to see a family doctor • Wait times for surgery: cancer, general surgery, cataract, hip replacements; also CT scans • Hospital care: drug prescribing practices; AMI and CHF readmissions; AMI and stroke mortality • ED patient experience • Chronic disease management: diabetes and admissions for ambulatory care sensitive conditions • LTC safety: use of potentially dangerous drugs in the elderly and falls • Other healthy behaviours: smoking, drinking, physical inactivity, fruit and vegetable intake • Most preventive health screening: mammography, pap test, FOBT and osteoporosis screening • Rates of intentional self-harm and hospitalization for injuries • Rate of heart attacks
Worse than average results, major room to improve	<ul style="list-style-type: none"> • Longer ED wait times • Higher rate of COPD readmissions • Highest incidence of HIV in Ontario
CENTRAL LHIN	
Superior results, no room to improve	<ul style="list-style-type: none"> • None
Better than average results, still room to improve	<ul style="list-style-type: none"> • Access to primary care: lower percentage of adults without a family doctor; however, wait times to see a family doctor are comparable to the provincial average • Shorter wait times for knee replacements • Better drug prescribing practices for AMI hospital patients • Lower rate of COPD readmissions • Lower rates of smoking and obesity • Higher rate of osteoporosis screening • Lower rates of intentional self-harm and hospitalization for injuries • Lower rate of heart attacks • Chronic disease management: lower admission rate for ambulatory care sensitive conditions
Average results, still room to improve	<ul style="list-style-type: none"> • ED wait times • Wait times for most surgeries: cancer, general surgery, cataract, hip replacements; also CT scans • Wait times for LTC placement and percentage of people who get their first choice of LTC • Percentage of ALC hospital bed days • Hospital care: drug prescribing practices for CHF; AMI and CHF readmissions; AMI and stroke mortality • Hospital patient experience ratings and complete discharge instructions • Chronic disease management: diabetes and one-year mortality for CHF and AMI • LTC safety: use of potentially dangerous drugs in the elderly and falls • Healthy behaviours: physical inactivity, fruit and vegetable intake • Most preventive health screening: mammography, pap test and FOBT
Worse than average results, major room to improve	<ul style="list-style-type: none"> • Longer wait times for MRI scans • Lower patient experience ratings in the ED • Higher proportion of the population reporting heavy drinking

CENTRAL EAST LHIN	
Superior results, no room to improve	<ul style="list-style-type: none"> • None
Better than average results, still room to improve	<ul style="list-style-type: none"> • None
Average results, still room to improve	<ul style="list-style-type: none"> • Access to primary care: percentage of adults without a family doctor and wait times to see a family doctor • Wait times for surgery: cancer, general surgery, cataract, hip and knee replacements; also CT and MRI scans • Wait times for LTC placement and percentage of people who get their first choice of LTC • Percentage of ALC hospital bed days • Hospital care: drug prescribing practices for AMI, CHF; AMI, CHF and COPD readmissions; AMI and stroke mortality • Chronic disease management: diabetes and admissions for ambulatory care sensitive conditions • LTC safety: use of potentially dangerous drugs in the elderly and falls • Hospital patient experience ratings and complete discharge instructions • Most healthy behaviours: smoking, obesity, physical inactivity, fruit and vegetable intake • Preventive health screening: mammography, pap test, FOBT and osteoporosis screening • Rates of intentional self-harm and hospitalization for injuries • Rate of heart attacks
Worse than average results, major room to improve	<ul style="list-style-type: none"> • Longer ED wait times and lower patient experience ratings in the ED • Higher proportion of the population reporting heavy drinking
SOUTH EAST LHIN	
Superior results, no room to improve	<ul style="list-style-type: none"> • None
Better than average results, still room to improve	<ul style="list-style-type: none"> • Shorter ED wait times • More people physically active
Average results, still room to improve	<ul style="list-style-type: none"> • Access to primary care: percentage of adults without a family doctor • Wait times for surgery: cancer, general surgery, cataract, hip and knee replacements; also CT and MRI scans • Percentage of ALC hospital bed days • Hospital care: drug prescribing practices for AMI, CHF; AMI, CHF and COPD readmissions; AMI and stroke mortality • Hospital patient experience ratings and complete discharge instructions • Patient experience ratings in the ED • Chronic disease management: diabetes and admissions for ambulatory care sensitive conditions • LTC safety: use of potentially dangerous drugs in the elderly and falls • Healthy behaviours: drinking, fruit and vegetable intake • Most preventive health screening: mammography, pap test and FOBT • Rate of hospitalization for injuries • Rate of heart attacks
Worse than average results, major room to improve	<ul style="list-style-type: none"> • Longer wait times to see a family doctor • Longer wait times for LTC placement from hospital; however, percentage of people who get their first choice of LTC is comparable to the provincial average • Higher rates of smoking and obesity in the population • Lower rate of osteoporosis screening • Higher rate of intentional self-harm

CHAMPLAIN LHIN	
Superior results, no room to improve	<ul style="list-style-type: none"> • None
Better than average results, still room to improve	<ul style="list-style-type: none"> • Higher patient experience ratings in the ED • Better drug prescribing practices for AMI hospital patients • More people physically active • Higher rate of FOBT
Average results, still room to improve	<ul style="list-style-type: none"> • ED wait times • Access to primary care: percentage of adults without a family doctor and wait times to see a family doctor; the supply of family doctors and specialists is higher than average • Wait times for some surgeries: cancer, general surgery, cataract; also MRI scans • Percentage of ALC hospital bed days • Hospital care: drug prescribing practices for CHF; AMI, CHF and COPD readmissions; AMI and stroke mortality • Chronic disease management: diabetes and admissions for ambulatory care sensitive conditions • LTC safety: use of potentially dangerous drugs in the elderly and falls • Hospital patient experience ratings and complete discharge instructions • Most healthy behaviours: smoking, drinking, obesity, fruit and vegetable intake • Most preventive health screening: mammography, pap test and osteoporosis screening • Rates of intentional self-harm and hospitalization for injuries • Rate of heart attacks
Worse than average results, major room to improve	<ul style="list-style-type: none"> • Highest overall wait times for LTC placement in the province (more than double the provincial average); wait times for those waiting in the community are particularly high; the percentage of people who get their first choice of LTC is comparable to the provincial average • Longer wait times for hip and knee replacements and CT scans • Higher incidence of HIV
NORTH SIMCOE MUSKOKA LHIN	
Superior results, no room to improve	<ul style="list-style-type: none"> • None
Better than average results, still room to improve	<ul style="list-style-type: none"> • Shorter wait times for CT scans
Average results, still room to improve	<ul style="list-style-type: none"> • ED wait times — mixed: length of stay for the typical patient is shorter than the provincial average, but patients who are admitted wait longer to be admitted • ED patient experience ratings • Percentage of ALC hospital bed days • Wait times for surgery: cancer, general surgery, cataract, hip and knee replacements; also MRI scans • Hospital care: drug prescribing practices for CHF, AMI; AMI, CHF and COPD readmissions; AMI and stroke mortality • Hospital patient experience ratings and complete discharge instructions • Chronic disease management: diabetes and admissions for ambulatory care sensitive conditions; however, one-year AMI mortality is higher than average • Healthy behaviours: obesity, physical inactivity • Most preventive health screening: mammography, pap test, FOBT and osteoporosis screening • Rate of intentional self-harm • Rate of heart attacks • Access to primary care: percentage of adults without a family doctor and wait times to see a family doctor • LTC safety: use of potentially dangerous drugs in the elderly
Worse than average results, major room to improve	<ul style="list-style-type: none"> • Longer wait times for LTC placement, especially for those in hospital; the percentage of people who get their first choice of LTC is comparable to the provincial average • More ED visits from LTC that might have been avoided • LTC safety: more falls presenting to the ED • Higher rates of smoking, drinking, low fruit and vegetable intake • Higher rate of hospitalization for injuries

NORTH EAST LHIN	
Superior results, no room to improve	<ul style="list-style-type: none"> • None
Better than average results, still room to improve	<ul style="list-style-type: none"> • Shorter ED wait times • Higher rate of physical activity • Shorter wait times for CT scans
Average results, still room to improve	<ul style="list-style-type: none"> • Wait times for some surgeries: cancer, general surgery, cataract; also MRI scans • Wait times to see a family doctor • Hospital- patient experience ratings and percentage of patients discharged with the information they need • Patient experience ratings in the ED • Most preventive health screening: mammography, pap test and FOBT • LTC safety: falls • Hospital care: drug prescribing practices; readmissions for CHF and COPD; stroke mortality • Healthy behaviours: fruit and vegetable intake
Worse than average results, major room to improve	<ul style="list-style-type: none"> • Highest percentage of ALC beds in the province • Highest wait times for LTC placement for hospital patients in the province; however, a higher percentage of people who get their first choice of LTC • Highest proportion of patients admitted to LTC who may not need to be there • LTC safety: greater use of potentially inappropriate “Beers list” drugs • Higher percentage of adults without a family doctor; family physician supply is slightly above average and nurse practitioner supply is much higher than average, but specialist supply is a lot lower; other research suggests that many rural and remote family doctors perform tasks that many specialists do, and that helps to explain why access to family doctors is still a problem • Longer wait times for hip and knee replacements • Chronic disease management: higher rates of complications from diabetes and more admissions for ambulatory care sensitive conditions (where hospitalization might have been avoided with better primary care) • Hospital care: worse AMI management (fewer prescriptions for the right drugs; higher mortality; higher readmissions) • Higher rates of smoking, drinking, obesity, low fruit and vegetable intake • Lower rate of osteoporosis screening • Higher rates of intentional self-harm and hospitalization for injuries • Higher rate of heart attacks

Note: North East LHIN is also a very heavy user of clinical telemedicine services.

NORTH WEST LHIN	
Superior results, no room to improve	<ul style="list-style-type: none"> • None
Better than average results, still room to improve	<ul style="list-style-type: none"> • Shorter ED wait times • Shorter wait times for CT and MRI scans • Highest rate of diabetes eye exams in the province (perhaps due to the mobile eye van that travels to remote communities) • Higher rate of physical activity
Average results, still room to improve	<ul style="list-style-type: none"> • Percentage of ALC hospital bed days • Wait times for most surgeries: cancer, cataract, hip and knee replacements • Hospital care: drug prescribing practices for AMI (however, drug prescribing practices for CHF are worse than average); AMI, CHF and COPD readmissions; AMI and stroke mortality • LTC safety: use of potentially dangerous drugs in the elderly and falls • Most preventive health screening: mammography, pap test and FOBT • Patient experience ratings in the ED
Worse than average results, major room to improve	<ul style="list-style-type: none"> • Longest wait times for LTC placement in the province for people in the community (410 days — more than one year); wait times for LTC placement from hospital are close to the provincial average, and the percentage of people who get their first choice of LTC is comparable to the provincial average • Access to primary care: higher percentage of adults without a family doctor and longer wait times to see a family doctor; family physician supply is slightly above average and nurse practitioner supply is much higher than average, but specialist supply is a lot lower; other research suggests that many rural and remote family doctors perform tasks that many specialists do³⁶⁵, and that helps to explain why access to family doctors is still a problem • Chronic disease management: higher rates of complications from diabetes and more admissions for ambulatory care sensitive conditions (where hospitalization might have been avoided with better primary care) • Lower hospital patient experience ratings (especially with getting information or questions answered) • Longer wait times for general surgery • More unnecessary pre-operative chest X-rays for cataract surgery • More ED visits from LTC that might have been avoided • Higher rates of smoking, drinking, obesity and lower fruit and vegetable intake • Higher rates of intentional self-harm and hospitalization for injuries • Higher rate of heart attacks • Lower rate of osteoporosis screening

Note: North West LHIN is also a very heavy user of clinical telemedicine services.

Attribute/Theme	Indicator	Desired Direction	Ontario	Erie St. Clair	South West	Waterloo Wellington	Haldimand Niagara	Central West	Mississauga	Toronto Central	Central	Central East	South East	Champlain	North Simcoe Muskoka	North East	North West
Accessible 2.1 Wait Times in emergency departments	Percentage of patients who left without being seen, 2008	BETTER	5.7%	5.1%	3.0%	6.9%	5.5%	6.0%	5.2%	5.5%	5.5%	5.6%	*	5.0%	4.5%	3.3%	3.1%
	Median time (hours) to MD assessment by overall Canadian Triage and Acuity Scale (CTAS) level, 2008/09	BETTER	1.2	1.1	0.9	1.6	1.1	1.5	1.4	1.6	1.5	1.3	0.9	1.3	0.9	0.9	0.8
	Median time (hours) from admission to transfer to bed by overall Canadian Triage and Acuity Scale (CTAS) level, 2008/09	BETTER	3.0	1.8	1.6	1.7	5.0	3.3	5.0	4.4	3.6	3.8	2.4	2.9	4.9	1.9	0.8
	Percentage of emergency department patient care completed within recommended timeframe by overall Canadian Triage and Acuity Scale (CTAS) level, Apr-Jun 09	BETTER	78%	85%	87%	76%	73%	69%	79%	64%	75%	76%	85%	74%	87%	88%	85%
Accessible 2.2 Access to primary care	Percentage of adults who are without a regular doctor, 2008/09	BETTER	6.8%	8.5%	8.6%	5.6%	3.4%	4.6%	6.8%	9.3%	3.9%	6.4%	5.2%	8.4%	6.8%	13%	13%
	Percentage of adults who were able to see their doctor on the same or next day the last time they were sick or needed medical attention, 2008/09	BETTER	48%	44%	44%	45%	44%	52%	60%	54%	49%	50%	35%	45%	38%	48%	32%
	Percentage of cancer surgeries done within priority 4 wait time target	BETTER	96%	98%	89%	99%	97%	97%	95%	95%	99%	97%	96%	95%	98%	96%	99%
	Percentage of general surgeries done within priority 4 wait time target	BETTER	97%	98%	96%	99%	98%	99%	99%	98%	99%	98%	94%	96%	96%	97%	97%
Accessible 2.3 Surgical wait times**	Percentage of cataract surgeries done within priority 4 wait time target	BETTER	98%	100%	99%	100%	99%	96%	97%	99%	100%	97%	98%	98%	98%	99%	97%
	Percentage of hip replacement done within priority 4 wait time target	BETTER	93%	95%	95%	100%	93%	92%	95%	97%	98%	92%	94%	82%	88%	88%	91%
	Percentage of knee replacement done within priority 4 wait time target	BETTER	90%	94%	92%	100%	88%	94%	89%	89%	96%	93%	93%	80%	86%	61%	86%
	Percentage of CT scans done within priority 4 wait time target	BETTER	82%	91%	87%	89%	71%	92%	79%	82%	80%	83%	89%	67%	87%	91%	93%
Accessible 2.3 Access to specialists (telemedicine)	Percentage of MRI scans done within priority 4 wait time target	BETTER	42%	52%	45%	48%	33%	48%	26%	50%	32%	43%	39%	38%	39%	44%	75%
	Rate of telemedicine use for clinical patient consultations per 100,000 population, 2008/09	BETTER	416	239	989	41	45	12	1.9	113	4.2	107	148	327	470	2758	6850

* Data not reported for this indicator for South East LHIN due to data quality issues.
 ** These indicators differ from the ones listed in section 2.3 as data for each priority level for each type of procedure was not available by LHIN. Totals here represent an average from January to October 2009.
 = better than average = not significantly different from average = worse than average

Attribute/Theme	Indicator	Desired Direction	Ontario	Erie St. Clair	South West	Waterloo Wellington	Hamilton Niagara Haldimand Brant	Central West	Mississauga Halton	Toronto Central	Central	Central East	South East	Champlain	North Simcoe Muskoka	North East	North West
Accessible 2.4 Access to long-term care	Median number of days to LTC home placement overall, Apr-Jun 09	BETTER	105	97	86	156	144	40	122	78	124	88	112	237	120	130	118
	Median number of days to LTC home placement for those placed from hospital, Apr-Jun 09	BETTER	53	26	44	42	79	25	47	56	56	84	84	47	71	104	45
	Median number of days to LTC home placement for those placed from home, Apr-Jun 09	BETTER	173	131	125	246	169	104	201	147	214	136	141	301	174	150	410
	Percentage of residents placed into LTC who got their first choice of home the first time around, Apr-Jun 09	BETTER	39%	40%	39%	35%	45%	30%	33%	38%	38%	37%	39%	37%	37%	37%	41%
Effective 3.1 Use of right treatments in hospital	Percentage of elderly patients with AMI who, within 90 days of discharge, filled a prescription for the recommended drugs all three at once : Statin, Beta-blocker, and ACE/ARB, 2008/09 *	BETTER	60%	57%	63%	62%	58%	66%	58%	60%	65%	60%	61%	66%	58%	47%	56%
	Percentage of elderly patients with CHF who, within 90 days of discharge, filled a prescription for the recommended drugs both at once : ACE/ARB and Beta-blocker, 2008/09	BETTER	51%	43%	47%	60%	51%	55%	50%	53%	54%	52%	49%	53%	49%	46%	43%
	Percentage of diabetic patients who, in the past 12 months, had an eye exam, 2008	BETTER	51%	51%	48%	50%	52%	33%	57%	39%	55%	57%	58%	51%	56%	52%	72%
	Percentage of elderly diabetic patients (aged 66+) who, in the past year, regularly filled prescriptions for both at once: ACE/ARB and Statin, 2008/09	BETTER	46%	45%	43%	45%	47%	45%	45%	47%	45%	45%	45%	45%	45%	46%	44%
Effective 3.2 Chronic disease management	Percentage of people with diabetes for more than a year who had a serious diabetes complications (death, heart attack, stroke, surgery for circulation problem (including amputation), kidney failure) within a year: 2008/09	BETTER	4.5	4.8	4.7	4.7	5.0	3.9	3.7	4.4	3.6	4.2	5.3	4.6	5.1	5.8	5.7
	Adjusted mortality rate (chance of death) in the year after a CHF hospitalization, 2007/08	BETTER	36	39	39	36	35	34	32	35	35	36	42	40	39	36	35
	Adjusted rate of death per 100 heart attack patients between 30 days and one year after their first heart attack, 2007/08	BETTER	8.8	10	10	8.6	10	7.3	7.3	7.5	8.6	7.9	9.2	8.7	13	11	8.6
	Hospital admission rates per 100,000 population for all ambulatory care sensitive conditions, 2008/09	BETTER	296	378	315	257	338	294	215	246	186	338	277	268	341	551	556
Effective 3.3 Readmissions	Medical readmission rates for CHF, 2008/09	BETTER	11	13	9.1	6.0	11	12	11	13	13	12	8.7	10	7.7	12	13
	Medical readmission rates for AMI (heart attack), 2008/09	BETTER	5.1	5.8	4.8	4.9	4.4	7.7	3.1	4.9	4.5	4.3	3.8	4.0	4.0	7.7	7.2
	Medical readmission rates for COPD, 2008/09	BETTER	7.7	8.9	7.3	8.0	8.6	7.2	7.4	10	5.8	6.7	7.6	7.4	8.2	7.5	7.5

* For this indicator, the best results for individual drugs after AMI admission were: statins, Central West (91%); beta blockers, South West (86%); and ACE/ARBs, Central West (85%)
 = better than average = worse than average

Attribute/Theme	Indicator	Ontario	Erie St. Clair	South West	Waterloo Wellington	Hamilton Niagara Haldimand Brant	Central West	Mississauga	Toronto Central	Central	Central East	South East	Chaplain	North Simcoe Muskoka	North East	North West
Effective 3.7 Avoidable emergency department visits	Percentage of emergency department visits in major cities for conditions that could be managed elsewhere, 2008/09	3.9%	2.2%	6.2%	3.7%	6.4%	2.4%	2.7%	2.5%	3.3%	4.0%	8.0%	2.4%	4.0%	1.2%	4.2%
	Number of avoidable emergency department visits and low acuity emergency department visits per 100 LTC residents per year, 2008/09 *	44	45	43	37	36	44	39	45	47	49	40	48	57	48	58
Safe 4.3 Mortality in hospital	Adjusted rate of death within 30 days per 100 patients admitted for heart attack, 2007/08	9.8	11	11	8.6	11	9.4	10	12	11	10	12	10	12	13	10
	Adjusted in-hospital rate of death within 30 days per 100 patients admitted for stroke, 2006	18	18	19	20	18	13	18	17	17	18	21	17	18	19	14
Safe 4.4 Drug safety	Percentage of elderly LTC residents prescribed a drug that should be avoided in the elderly (Beers list), 2008/09	17%	18%	19%	15%	18%	16%	14%	14%	16%	16%	18%	13%	19%	23%	18%
	Rate of falls per year among LTC senior residents (aged 65+) resulting in an emergency department visit or inpatient hospitalization per 100 resident-years in LTC homes, 2008/09	14.0	13	12	12	12	16	16	13	14	15	13	15	18	15	17
Patient-centred 5.1 Patient experience in emergency department care	Would you recommend this emergency department to your friends and family? 2008/09	57%	62%	68%	56%	55%	34%	45%	56%	43%	49%	60%	64%	54%	55%	54%
	Would you recommend this hospital to your friends and family? 2008/09	74%	65%	73%	74%	71%	55%	67%	83%	73%	70%	68%	74%	70%	66%	69%
Patient-centred 5.1 Patient experience in acute care hospital **	Percentage of patients who felt they were treated with respect and dignity 2008/09	82%	82%	87%	83%	80%	69%	75%	85%	81%	81%	84%	84%	86%	82%	80%
	Percentage of hospital patients who usually waited less than five minutes before getting the help they needed 2008/09	73%	76%	84%	79%	70%	61%	53%	76%	74%	72%	77%	71%	79%	74%	75%
	Do you think that the staff did everything they could to help control your pain? 2008/09	50%	47%	52%	53%	52%	41%	45%	51%	51%	47%	47%	51%	52%	54%	50%
	Did you get all the medical information that you need? 2008/09	51%	48%	55%	53%	49%	43%	42%	55%	50%	48%	52%	53%	57%	55%	44%
	When you had important questions to ask a nurse, did you get the answers you could understand? 2008/09	69%	71%	75%	73%	67%	57%	60%	70%	67%	69%	72%	74%	73%	74%	61%
	When you had important questions to ask a doctor, did you get the answers you could understand? 2008/09	73%	68%	75%	75%	70%	65%	72%	77%	73%	73%	75%	75%	80%	74%	66%
	Did someone explain the results of the tests in a way that you could understand? 2008/09	69%	63%	70%	70%	69%	66%	64%	73%	69%	66%	68%	70%	72%	72%	60%

* This indicator is a combination of two indicators in section 3.7 on potentially preventable ED visits and low acuity ED visits from long-term care.

** All indicator values within the theme represent patients who responded "yes" to the questions.

█ = better than average █ = not significantly different from average █ = worse than average

Attribute/Theme	Indicator	Desired Direction	Ontario	Erie St. Clair	South West	Waterloo Wellington	Haldimand Brant	Central West	Mississauga	Toronto Central	Central	Central East	South East	Chaplain	North Simcoe Muskoka	North East	North West	
Efficient 7.2 Right service in the right place	Percentage of acute care bed days that are designated as ALC, 2008/09	BETTER ↓	16%	11%	13%	20%	24%	11%	13%	11%	13%	15%	17%	14%	19%	28%	18%	
	Percentage of clients placed into an LTC home with high or very high MAPLE scores (i.e. appropriately), Jul-Sep 2009/10	BETTER ↑	76%	73%	77%	81%	79%	77%	78%	77%	73%	77%	78%	80%	79%	61%	77%	
Efficient 7.3 Avoiding unnecessary drugs and tests	Rate of pre-operative chest X-ray testing per 100 cataract surgeries, 2008/09	BETTER ↓	4.1	3.2	3.1	3.0	3.1	3.3	4.0	5.7	5.7	4.5	3.5	3.8	3.9	3.4	11	
	Percentage of elderly patients with uncomplicated hypertension treated with diuretics as a first-line treatment, 2008/09	BETTER ↑	31%	30%	37%	37%	30%	27%	27%	27%	29%	25%	40%	37%	35%	33%	40%	
Appropriately resourced 8.4 Health human resources	Supply of family doctors per 100,000 people, 2008		87	63	82	80	78	62	72	137	81	68	105	115	89	95	109	
	Supply of specialists per 100,000 people, 2008		97	60	108	61	102	45	59	285	70	59	109	131	55	65	70	
	Supply of nurse practitioners per 100,000 people, 2009		8.6	10	11	10	8.5	1.8	2.4	14	2.4	4.5	15	11	10	22	26	
Integrated 9.1 Discharge/transitions	Percentage of patients who have all the information they need after discharge from emergency department, 2008/09	BETTER ↑	24%	26%	31%	17%	24%	19%	20%	21%	17%	21%	25%	29%	24%	26%	22%	
	Percentage who know danger signals to watch for after going home, 2008/09	BETTER ↑	49%	47%	53%	46%	54%	36%	47%	49%	46%	44%	51%	54%	49%	52%	47%	
	Percentage who knew whom to call if they needed help or had more questions after leaving hospital, 2008/09	BETTER ↑	60%	65%	71%	59%	62%	44%	48%	48%	56%	56%	65%	62%	61%	63%	58%	
	Percentage who had someone explain to them how to take new medications, 2008/09	BETTER ↑	19%	21%	21%	19%	21%	19%	19%	16%	18%	15%	16%	22%	21%	26%	18%	
	Percentage who had someone tell them about medication side effects to watch for, 2008/09	BETTER ↑	37%	43%	43%	29%	42%	37%	37%	36%	34%	34%	33%	39%	39%	48%	34%	
	Percentage of patients who have all the information they need after discharge from hospital, 2008/09	BETTER ↑	26%	25%	24%	28%	23%	24%	24%	18%	31%	29%	23%	24%	25%	27%	22%	
	Percentage who know danger signals to watch for after going home, 2008/09	BETTER ↑	59%	57%	59%	62%	57%	51%	51%	50%	65%	57%	55%	55%	60%	61%	56%	
	Percentage who had someone explain to them the purpose of medications, 2008/09	BETTER ↑	71%	71%	72%	74%	69%	65%	65%	69%	78%	73%	70%	68%	70%	68%	71%	60%
	Percentage who had someone tell them about medication side effects to watch for, 2008/09	BETTER ↑	41%	38%	36%	40%	36%	35%	35%	32%	50%	42%	36%	35%	42%	36%	39%	33%
	Percentage who were told when to resume usual activities, 2008/09	BETTER ↑	51%	47%	50%	55%	48%	46%	46%	45%	52%	52%	49%	52%	51%	54%	52%	50%
Percentage who knew whom to call if they needed help or had more questions after leaving hospital, 2008/09	BETTER ↑	81%	80%	86%	82%	82%	74%	74%	75%	84%	79%	78%	83%	79%	85%	82%	77%	

Attribute/Theme	Indicator	Desired Direction	Ontario	Erie St. Clair	South West	Waterloo Wellington	Haldimand Brant	Central West	Mississauga	Toronto Central	Central	Central East	South East	Champlain	North Simcoe Muskoka	North East	North West	
Focused on Population Health 10.1 Healthy behaviour	Percentage of the population who smoke daily, 2008	BETTER ↓	16%	16%	17%	17%	17%	12%	15%	12%	11%	15%	22%	15%	20%	21%	23%	
	Percentage of the population who are heavy drinkers, 2008	BETTER ↓	21%	25%	24%	23%	13%	18%	15%	20%	15%	16%	23%	21%	27%	29%	25%	
	Percentage of the population who are obese, 2008	BETTER ↓	18%	23%	20%	20%	15%	17%	13%	11%	13%	18%	23%	18%	21%	21%	22%	
	Percentage of the population who are physically inactive, 2008	BETTER ↓	50%	54%	48%	52%	61%	53%	55%	50%	55%	54%	44%	42%	46%	44%	39%	
	Percentage of the population with inadequate fruit and vegetable intake, 2008	BETTER ↓	59%	64%	57%	62%	55%	55%	60%	58%	60%	62%	58%	56%	65%	60%	64%	
	HIV incidence per 100,000 people, 2007	BETTER ↓	8.3	3.6	3.5	3.4	5.8	4.1	4.2	4.2	42	4.7	4.4	2.3	12	1.4	4.6	6.0
Focused on Population Health 10.4 Preventive measures	Percentage of Ontario women aged 50 to 69 who reported having a mammogram in the two years prior to the survey, 2008	BETTER ↓	73%	82%	69%	68%	61%	72%	72%	77%	81%	71%	64%	77%	79%	70%	77%	
	Percentage of Ontario women aged 20 to 69 who reported having a pap test in the three years prior to the survey, 2008	BETTER ↑	80%	83%	78%	80%	79%	74%	74%	82%	80%	78%	82%	82%	84%	81%	79%	
	Percentage of people aged 50 to 74 who reported having a fecal occult blood test in the two years prior to the survey, 2008	BETTER ↑	31%	36%	32%	34%	29%	34%	35%	35%	24%	25%	30%	30%	40%	30%	32%	31%
	Percentage of women aged 65 who had a bone mineral densitometry test since turning 55 years of age, 2008/09	BETTER ↓	80%	71%	73%	81%	83%	83%	87%	87%	84%	87%	83%	75%	83%	81%	71%	56%
	Acute myocardial infarction (AMI) incidence per 100,000 people aged 20 and over, 2008/09	BETTER ↓	210	237	237	225	206	256	163	163	165	155	197	237	192	233	297	349
	Rate of emergency department visits for intentional self-harm per 100,000 people, 2008/09	BETTER ↓	88	79	106	123	66	106	65	65	68	47	86	122	85	106	160	228
Rate of injury-related hospitalizations per 100,000 people, 2008/09	BETTER ↓	354	364	466	382	281	408	281	281	307	256	317	314	319	486	592	680	

= better than average
 = not significantly different from average
 = worse than average