

All-Partners Meeting

April 22, 2016

1:00-3:00 p.m.

Wellesley Institute

AGENDA

Toronto/Ontario Community Health Profiles Partnership (TCHPP – OCHPP)

Friday April 22, 2016 – 1:00-3:00 p.m.

Location:  **Wellesley Institute, 10 Alcorn Avenue, Toronto
Community Meeting Room**

TIME	AGENDA ITEMS
1:00-1:10	Welcome & Light Refreshments
1:10-1:40	Partner Updates – What’s New? Brief Updates Toronto Community Health Profiles Partnership, Well Being Toronto, Toronto Public Health, Access Alliance, Institute for Clinical Evaluative Sciences, South East Toronto, Wellesley Institute, Toronto Central LHIN, Central LHIN
1:40-2:00	Presentation -Ontario Community Health Profiles Partnership (OCHPP) website demonstration -Questions
2:00-2:30	General Discussion Items <u>Part 1 – Governance & Priority Setting</u> -Governance: current structure -Work plan process: Eliciting partner priorities, how we currently update the data on the TCHPP/OCHPP sites & process for work flow <u>Part 2 – Website & Functionality Issues</u> -Updating income-related analyses on the site -Change in format of maps for site: discuss one type of indicator map? -Neighbourhood pdf profiles: discuss streamlined approach to formatting 245 neighbourhood profiles <u>Part 3</u> -Other business?
2:30-2:55	Partner Group Project -Identifying neighbourhood/region priorities -Creating neighborhood profiles by consolidating key indicators and summarizing patterns -Group discussion re project, resources
2:55-3:00	Next steps, Wrap-up

Partner Updates

TCHPP/OCHPP Team

Well Being Toronto

Toronto Public Health

Access Alliance

Institute for Clinical Evaluative Sciences (ICES)

South East Toronto

Wellesley Institute

Toronto Central LHIN

Central LHIN

Presentation

Ontario Community Health Profiles Partnership Website Demo

www.ontariohealthprofiles.ca

Round Table Discussion #1

Governance

Website & Functionality

Other Business

Round Table Discussion #2

Proposed Partner Project

TC LHIN Updates

April 22, 2016

TCHPP Partner's Meeting

TC LHIN Updates

1. Transition period with new directives for LHINs:
 - Patients First
 - Increased focus on primary care, home and community care
 - Alignment with Public Health
2. Integrated Service Delivery Regions – Sub-LHIN Regions
 - 5 SubLHINs – moving from sector specific silos to integrated service delivery
 - Health Links are now being rolled into Primary Care – part of the continuum
3. TC LHIN Strategic Plan 2015-2018 – focus on population health
4. A lot of data activity focused on these priorities. Used TCHPP extensively for Primary Care and Sub-LHIN profiles. Recent example is unattached patients with low continuity of care.
5. Continued use of TCHPP for other TCLHIN priorities e.g. diabetes
6. Continued standardized equity data collection by hospitals and CHCs
 - 2 Applied Health Research Questions (AHRQs) to ICES (administrative data & hospital equity data)
7. Regional Quality Tables (HQO/LHIN collaboration)

**Enhancing TCHPP/OCHPP Capacity:
Identifying Priorities in Neighborhoods/Regions Using
TCHPP/OCHPP data**

April 22, 2016

TCHPP Partner's Meeting

Cynthia Damba
Senior Planner/Epidemiologist

Common Questions Raised by Users of TCHPP Data

1. How do we select priorities for:
 - a) Neighbourhoods?
 - b) Bigger areas with aggregated neighbourhoods? E.g. SubLHINs, Health Links, LHINs
2. Can we overlay indicators to identify high risk/needs areas? E.g. disease rates and income level, language
3. Can we overlay locations of different health and social service providers with indicator information?
4. How can we compare to other similar areas to see who is doing well and learn best practices?
5. How can we identify priorities among the top poorest performers in a region (Sub-LHIN, Health Link, LHIN)?
6. Can we create health profiles of neighborhoods or regions that do not stigmatize areas with poor performance?
7. How can we leverage existing work – Wellbeing Toronto and Urban Heart, and prevent duplication?
8. Other questions?

Current Practices: How are Stakeholders Using the Data?

1. Focusing on City of Toronto Neighborhood Improvement Areas or other previously identified areas
2. Manual process using excel data or maps that involves several steps:
 - Review performance for indicators in different categories (e.g. Hospital Admissions or Adult Health & Disease) and select areas with highest rates
 - Determine if there are significant differences between TC LHIN or City of Toronto performance
 - Review socio-demographic characteristics, locations of services, other characteristics
 - Shortlist some priorities
 - Engage community members to provide feedback on findings and help prioritize
3. Example of looking at primary care enrollment and continuity of care for Toronto residents. **Nathalie Sava, April 14, 2016**
<http://www.torontohealthprofiles.ca/aboutTheData.php?varTab=HPDtbl>

Question/Task: Can these processes be enhanced and automated? How can we customize these processes to look at different issues?

1

Enrolled Patients in Primary Care Both Sexes, Age 19+ (March 31, 2013)

Toronto Neighbourhoods

Enrolled in PEMs or CHCs

North Toronto

Dovercourt-Wallace
Emerson Junction
Annex
University
Dufferin Grove

Thorncliffe Park

Rockcliffe-Smythe
Junction Area
Weston-Pellam Park

East York

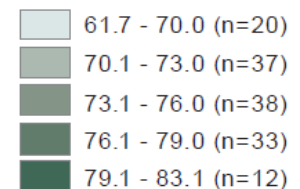
North
Riverdale

Waterfront-Communities
Niagara
Bay Street Corridor
Church-Yonge Corridor
North St. Jamestown
Moss Park

Mimico
New Toronto

1. What is the demographic composition of residents with low enrollment?
2. What is the mix of primary care providers in these neighbourhoods?
3. Do residents have poorer health outcomes in these neighbourhoods?

Enrolled patients as a
percent of total population
March 31, 2013



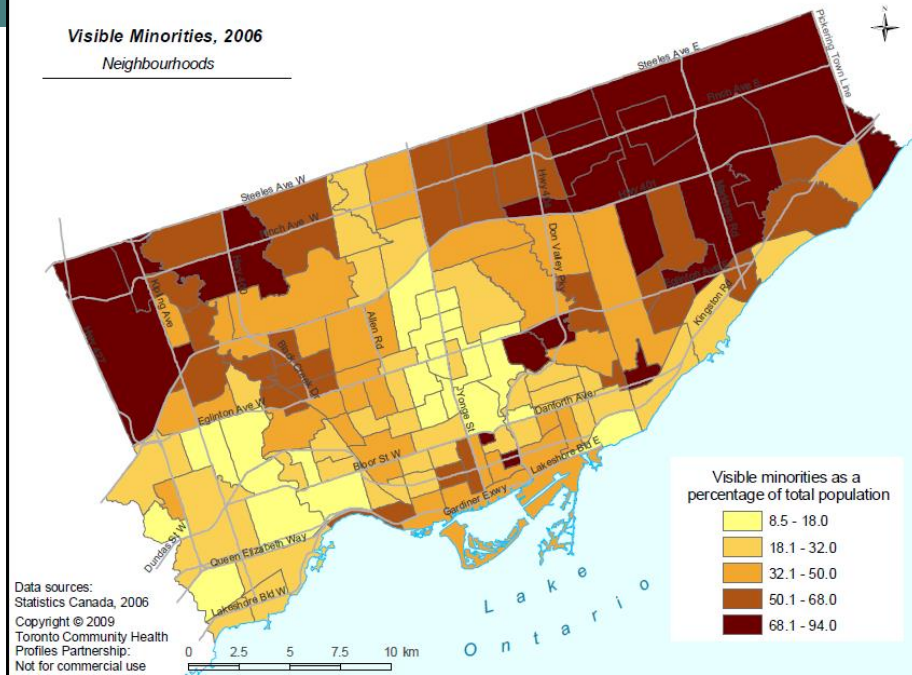
Classes created using rounded Natural Breaks

1. What is the demographic composition of residents with low enrollment?

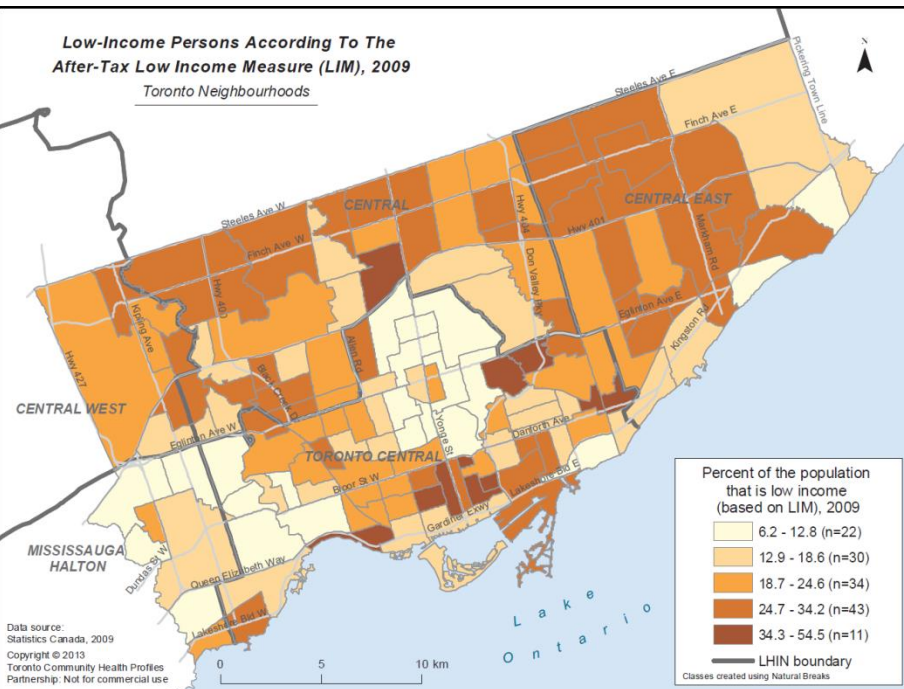
TCHPP contains a wide range of sociodemographic data at the neighbourhood, Health Link, LHIN, and City of Toronto level to support demographic analysis, including:

- Population (Youth, Seniors)
- Persons Living Alone
- Lone parent families
- Median household income
- Low income families
- % occupied private dwellings
- Education
- Mobility
- Languages Spoken
- Immigration
- Visible Minorities
- Aboriginal Population
- Ontario Marginalization Index

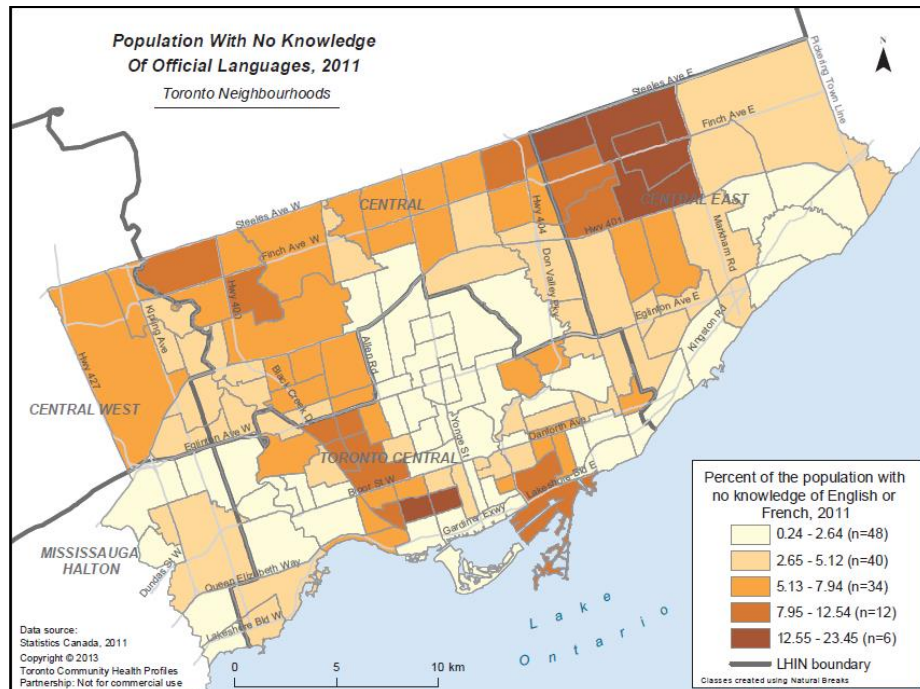
Visible Minorities, 2006
Neighbourhoods



Low-Income Persons According To The After-Tax Low Income Measure (LIM), 2009
Toronto Neighbourhoods



Population With No Knowledge Of Official Languages, 2011
Toronto Neighbourhoods



Examples

1. Wellbeing Toronto

<http://map.toronto.ca/wellbeing/>

- *Tool informs planning by measuring neighbourhood “wellbeing”, across neighbourhoods and over time. Includes City operational metrics, socio-demographics and infrastructure service data, for each of the City’s 140 neighbourhoods. Uses an interactive online mapping interface that can help users to better understand the communities they serve.*

2. Urban Health Equity Assessment and Response Tool – Urban HEART

<http://www.torontohealthprofiles.ca/urbanheartattoronto.php>

- *Framework designed by the World Health Organization and adapted locally for use in Toronto. Focuses on 5 domains: Physical Environment & Infrastructure, Social & Human Development, Economic Opportunity, Governance, and General Population Health. Red, yellow, and green report card for Toronto neighborhoods*

Examples

3. County Health Ranking and Roadmaps: How Healthy is your county?

<http://www.countyhealthrankings.org/>

- *Looks at overall rankings in health outcomes (length of life, quality of life) & overall rankings in health factors (healthy behaviours (30%), clinical care (20%), socio and economic factors (40%), physical environment (10%)*

4. Health Neighborhoods in Durham Region

<http://image.durham.ca/HealthNeighbourhoods/index.html>

- *Website has 4 areas: Points of interest, demographics, Early childhood development, and Health indicators. These are mapped for the Durham neighborhoods*

5. Building on Health in Priority Neighborhoods: Durham Region Health Department

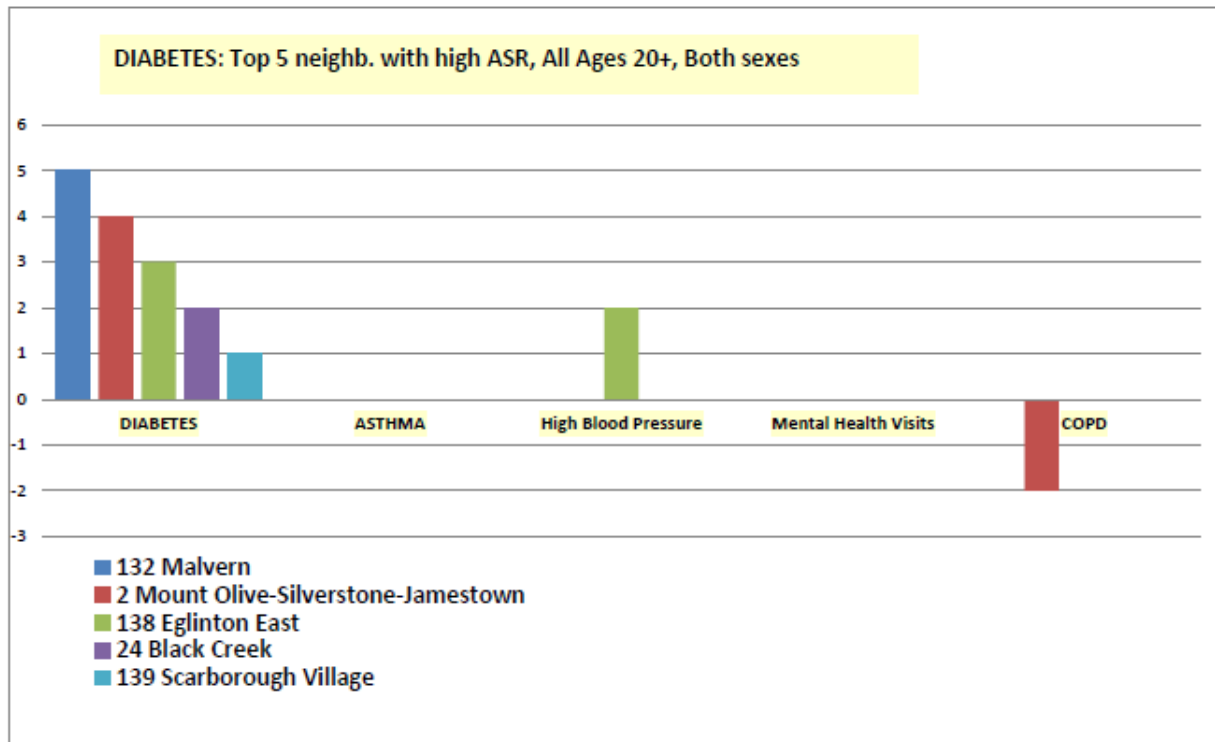
[Durham Health Priority Neighborhoods](#)

- *Report with highlights of the 7 priority neighborhoods identified in Durham Region. Uses 62 indicators that provide a picture of how health varies – include population, income, education, births, breastfeeding, early child development, injury, smoking, physical activity, obesity, infectious disease, life expectancy, and more.*

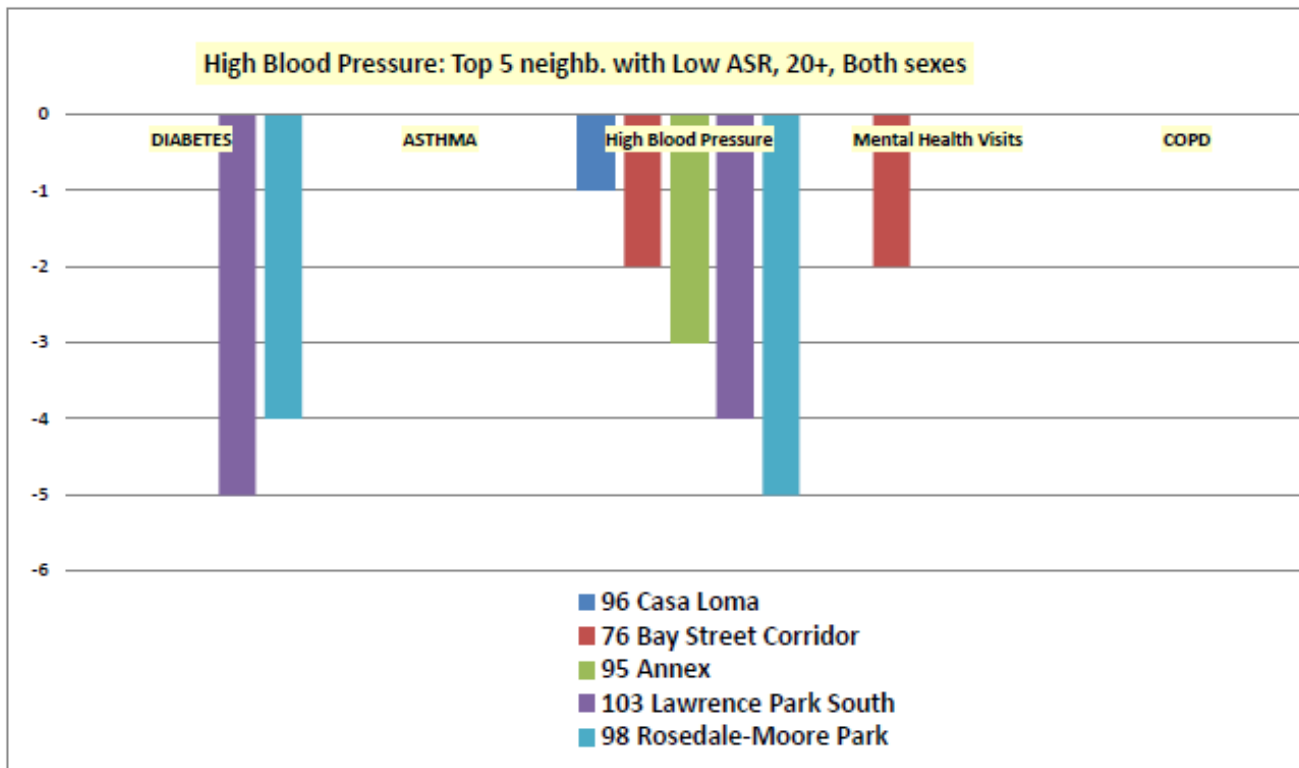
How can looking at top poorest performers in a region assist in selecting priorities?

(Data & examples developed by Mohammad – internal use only)

Adult Health and Disease (2012): Top 5 Neighbourhoods, High Age-Standardized Rate (ASR)
Diabetes, Asthma, High Blood Pressure, Mental Health Visits: All Ages 20+, Both sexes
Chronic Obstructive Pulmonary Disease (COPD): All Ages 35+, Both sexes



How can looking at top best performers in a region assist in selecting priorities?



Questions for Group Discussion

- **What are the pros and cons of this work?**
- **Are there other examples of websites and jurisdictions that we can look at?**
- **How can we achieve this goal - resources, etc.?**
- **What is a feasible target/plan for the coming year?**

Wrap Up & Next Steps