# **Toronto Central LHIN** Use of TCHPP Data in Community Health Planning

Nathalie Sava Date: October 30, 2015



Local Health Integration Network

## **Primary Care Enrollment/Continuity Data**

Table → Primary Care: Enrolment and Continuity of Care (Both sexes, Ages 19+) for Toronto Neighbourhoods and Toronto Central LHIN, 2012/13

#### **Population Enrolled:**

• Population rostered with a Patient Enrolment Model (PEM) or registered with a Community Health Centre (CHC)

#### **Population Non-Enrolled:**

• Population not rostered with a PEM or a CHC. May include patients that visit walk-in clinics, solo family physicians (i.e. fee for service), etc.

#### Continuity

Measurement of Continuity is limited to those with at least 3 primary visits in the previous 2 years:

- **Low:** <50% of total visits to the same provider
- **Medium:** 50-80% of totals visits of the same provider
- **High:** >80% of total visits to the same provider

## **Primary Care Enrollment/Continuity Data**

#### Enrollment

	Population Enrolled			Population Non-Enrolled			Total Population Enrolled & Non-Enrolled		
Oakwood Vaughan Neighbourhood	Total Pop. Enrolled	Pop. with No Visits	Pop. with 1 or 2 Visits	Total Pop. Non- Enrolled	Pop. with No Visits	Pop. with 1 or 2 Visits	Total Pop. Enrolled & Non- Enrolled	Pop. with No Visits	Pop. with 1 or 2 Visits
Oakwood Village	12083	761	1971	4902	973	1001	16985	1734	2972

### Continuity

Oakwood Vaughan Neighbourhood	Population with 3+ Visits	Low Continuity (<50%)	Medium Continuity (50-79%)	High Continuity (80+%)	% Low Continuity	% Medium Continuity	% High Continuity
Population <b>Enrolled</b> with at Least 3 Visits in the Previous 2 years	9351	2348	1973	5030	25.1	21.1	53.8
Population <b>Non-Enrolled</b> with at Least 3 Visits in the Previous 2 years	2928	1158	378	1392	39.5	12.9	47.5
Total Population <b>Enrolled &amp; Non-Enrolled</b> with at Least 3 Visits in the Previous 2 years	12279	3506	2351	6422	28.6	19.1	52.3

Source: TCHPP, 2015

### **Primary Care Enrollment/Continuity Data**

# Top 10 Neighbourhoods with Lowest % Enrollment

Neighbourhood Name	Total Population, Both sexes, Ages 19+	Total Population Enrolled	% Enrolled	
University	7584	4683	61.7	
Bay Street Corridor	16280	10391	63.8	
North St. James Town	14944	10047	67.2	
Moss Park	16032	10869	67.8	
Rockcliffe-Smythe	18124	12317	68.0	
Thorncliffe Park	13861	9436	68.1	
York University Heights	22629	15443	68.2	
Long Branch	7928	5435	68.6	
New Toronto	9018	6188	68.6	
Annex	25459	17525	68.8	

What factors in these neighbourhoods contribute to **low enrollment rates**?

# Top 10 Neighbourhoods with Highest % of Low Continuity and Non-Enrolled

Neighbourhood Name	Total Population, Both sexes, Ages 19+	Total Population Non- Enrolled	Low Continuity (<50%)	% Low Continuity and Non- Enrolled
Thorncliffe Park	13861	4425	1507	10.9
Mount Olive- Silverstone- Jamestown	25140	7504	2596	10.3
Thistletown- Beaumond Heights	8548	2566	844	9.9
West Humber- Clairville	27552	7457	2701	9.8
University	7584	2901	740	9.8
New Toronto	9018	2830	871	9.7
Niagara	24701	7540	2360	9.6
North St. James Town	14944	4897	1382	9.2
Rustic	7584	2274	679	9.0
Bay Street Corridor	16280	5889	1454	8.9

What factors in these neighbourhoods contribute to **low continuity** amongst non-enrolled patients?





### 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)

- Education





# 2. What is the mix of primary care providers in these neighbourhoods?



Large number of primary care providers concentrated near:

> Yonge/ Eglinton

Yonge/Bloor

Downtown Core

Danforth

## **3.** Do residents have poorer health outcomes in these neighbourhoods?

TCHPP contains a wide range of health outcome data at the neighbourhood, Health Link, LHIN:

- Chronic Disease Prevalence Rates (e.g. Diabetes, Asthma, High Blood Pressure, Mental Health, COPD)
- Hospital Admission Rates (Medical, Surgical, Prenatal, MH)
- ALC Days
- ED Visits (All Visits, Low Triage, Repeat Visits)
- Rates of Eye Exams
- Prevention Indicators (e.g. Mammography, Pap Smears, Colorectal Cancer, FOBT)
- High Cost Users (Top 1 and 5%)







### **Summary of Primary Care Data and Future Uses**

#### Various factors to consider when using planning data for primary care:

- How do <u>demographic</u> variations affect continuity? (e.g. are there sufficient language or ethno-cultural specific providers in the neighbourhood?)
  - Example: Analyze availability of ethno-cultural providers in West Toronto
- Which areas of the LHIN exhibit low <u>physician volumes</u>? (e.g. do areas with low physician volumes demonstrate low continuity rates?)
  - Action: Analyze per capita rates of physicians at the neighbourhood level. Plan future coverage of areas with low physician volumes.
- How do <u>health outcomes</u> vary by geographic region?
  - Action: How can primary care/community care providers in these regions collaborate to support better health outcomes? Track outcomes overtime to determine whether health outcomes have improved.

## **Other Examples of Use of TCHPP Data**

### • Diabetes

- Determine areas of high prevalence cross-examined with catchment areas and availability of providers for Diabetes Education Programs/Diabetes Education Centres (i.e. gap analysis)
- **Neighbourhood Planning** (Thorncliffe/Flemingdon Park)
  - Examined high risk health factors impacting population health of two neighbourhoods in planning new community resources

### Health Links

 Provided complete profile of Health Link regions to assist HL Leads in determining neighbourhood level variations and most prevalent health issues impacting the region