User Guide

The Ontario Community Health Profiles Partnership (OCHPP) Website:
A Step-by-Step Guide to Data and Maps

April 2017

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1 Overview

This section provides an overview of the Ontario Community Health Profiles Partnership's (OCHPP) inception, framework of activities and the website's overall structure (sections 1.1 - 1.4). For step-by-step instructions on how to use the OCHPP website, you can skip this section and go to Sections 3 and 4.

1.1 About the OCHPP Partnership

The Ontario Community Health Profiles Partnership (OCHPP) was initially developed from collaboration between the Centre for Urban Health Solutions (formerly known as Centre for Research on Inner City Health) at St. Michael's Hospital, Toronto Public Health, Toronto District Health Council, the Southeast Toronto Project (SETo) and the Wellesley Central Health Corporation. The objective of this collaboration was to facilitate access to information for health planning. The rationale for creating this partnership was to better understand health inequalities in the City of Toronto in the hopes of being better able to address these issues.

The partnership has since expanded and now includes our main data partner, the Institute for Clinical Evaluative Sciences (ICES), WellBeing Toronto, Access Alliance Multicultural Health and Community Services and Wellesley Institute.

Two major partners, the Toronto Central Local Health Integration Network (Toronto Central LHIN) and the Central Local Health Integration Network (Central LHIN), provide funding for the project in addition to funding from St. Michael's Hospital. Specialized data at the neighbourhood level are provided for Toronto Central LHIN and Central LHIN.

All partners meet annually to review a work plan and discuss health-related topics that may be included in the year's activities. Partners share information and reports for posting on the site. The partnership's home is located at the Centre for Urban Health Solutions at St. Michael's Hospital and includes a team comprised of a family physician/staff scientist, medical geographer, epidemiologist/data analyst, webmaster, project manager and part-time GIS and analytic staff.

1.2 About the OCHPP Website

The Ontario Community Health Profiles Partnership (OCHPP) website, www.ontariohealthprofiles.ca, is a portal that provides comprehensive, reliable and validated data on health and health-relevant indicators. The website was created in response to continuing requests from community agencies and partners for data that could be used for local and agency health planning and program development.

Originally, the website only included data for the City of Toronto (140 Toronto neighbourhoods). Since expanding in 2016, the site now contains data that goes beyond the City of Toronto/Toronto Central LHIN boundaries. Hence, the name of the site was changed to OCHPP. Archived, older City of Toronto-specific data can still be found on the OCHPP site in the Archives section.

The OCHPP website makes detailed, area-level health data available to everyone. The indicators available on the site are those that are deemed as some of the most important for population health planning and resource allocation. Data are provided in easy to read PDF files, Excel spreadsheets and maps. All file types are downloadable. Users can combine select indicators across different neighbourhoods to review and compare differences in health service utilization and health outcomes by neighbourhood.

Moreover, data available on the OCHPP site can assist users in making decisions about long-term planning and resource allocation. For example, health service providers can examine data in relation to the neighbourhoods within their catchment area to help determine patterns, establish priorities and forecast future needs. The website is updated regularly and as data becomes available. New topics and indicators are added based on the Ontario Ministry's of Health & Long Term Care initiatives (e.g. Patients First) or partner suggestions and needs.

1.3 Access to Specialized Datasets

The OCHPP provides data at a macro-level for all 14 Ontario LHINs and 76 Ontario sub-regions. Data at a micro or neighbourhood level is currently only provided for the Toronto Central LHIN and Central LHIN. Neighbourhood-level data is important for health and policy planning in order to understand differences across boundaries and to provide analyses across neighbourhood populations.

1.4 Structure of the OCHPP Website (Site Map)

The main components of the website can be found under the "Data Tables and Maps" tab, which is easily accessible on every page of the website. The structure of the OCHPP website is summarized in Figure 1.

Figure 1: Structure of the OCHPP website (Site Map)
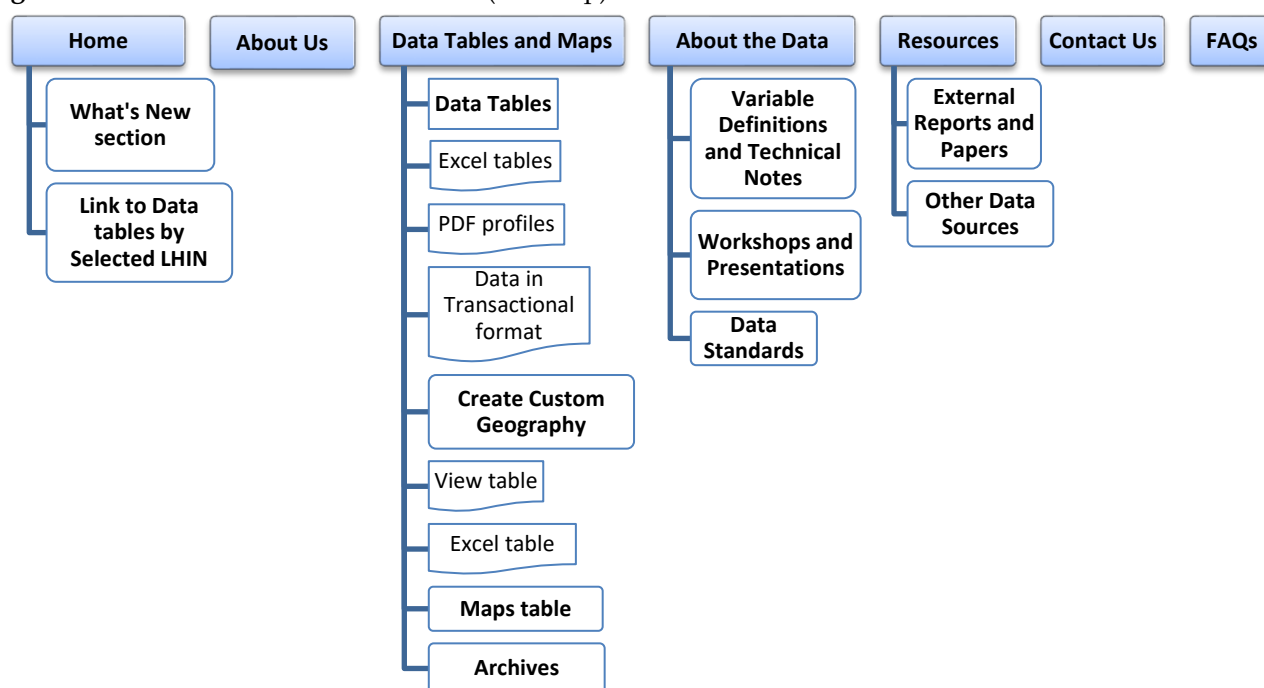
2 Ontario Geographic Levels

Data on the OCHPP site may be available at some or all of the following geographic levels:

1. Neighbourhoods: the most common and smallest geographic level;
2. Sub-regions: larger planning areas within a LHIN made up of a collection of neighbourhoods, Census Canada Dissemination Areas (DAs), or Census Subdivisions (CSDs);
3. LHINs: the 14 health authorities responsible for regional administration of public healthcare services in the province of Ontario.

Other historical geographic units can be found in the "Archives" section of the website. For more information on geographic levels, consult the "About the Data" page on the OCHPP website. The various geographic levels of data are shown in Figure 2.

Figure 2: a) Toronto neighbourhoods map with sub-regions, b) Sub-regions map with neighbourhoods in Toronto Central LHIN, c) Local Health Integration Networks (LHINs) map in Ontario

b) Sub-Regions and Neighbourhoods in Toronto Central LHIN, 2017

c) Local Health Integration Networks in Ontario
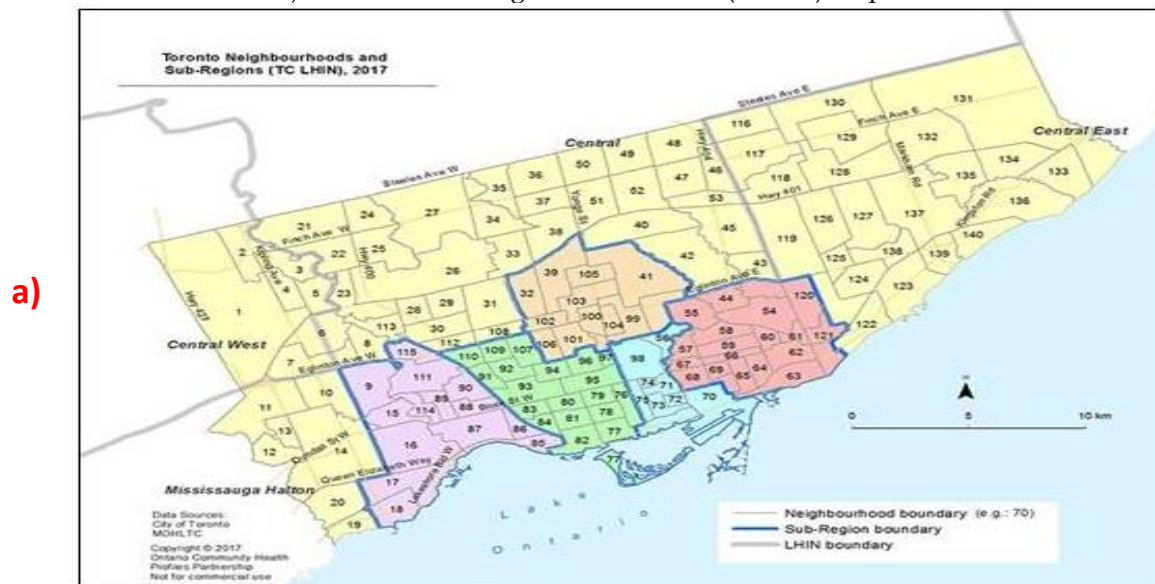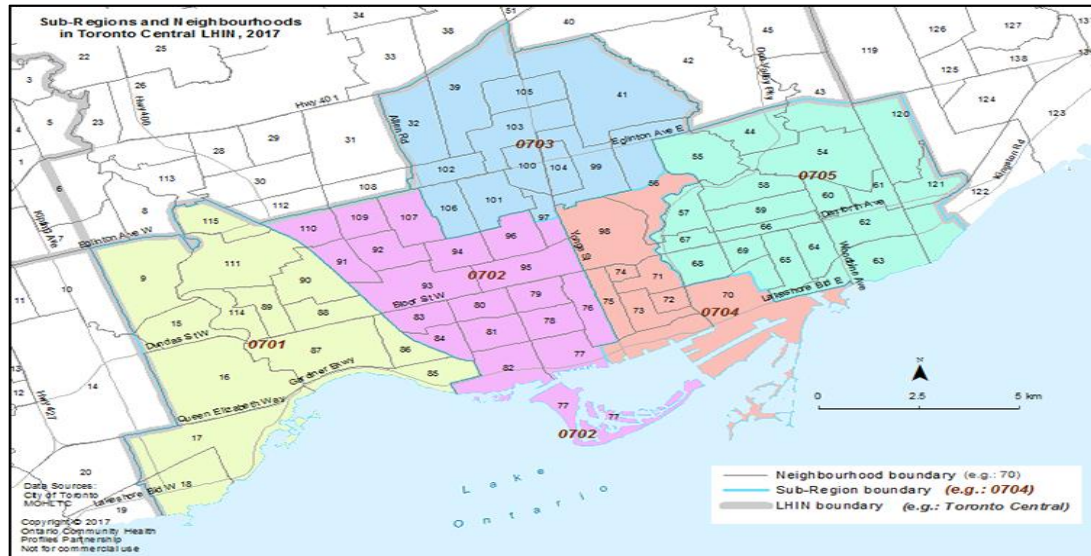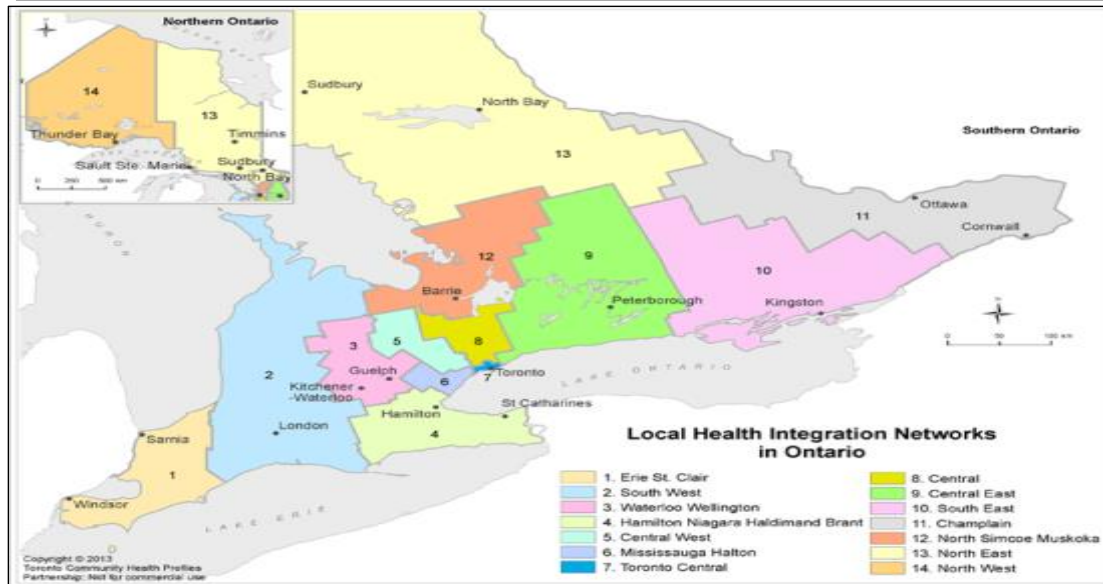
3 Data Representations

The health and health-related indicators are organized in three geographic levels: the LHIN, sub-region and neighbourhood levels. Data for each geographic level is presented in table and/or map formats in two possible file types: PDF (for tables and maps) or Excel (for tables). Figure 3 summarizes the ways in which data are represented.

Figure 3: Summary of data representations and formats
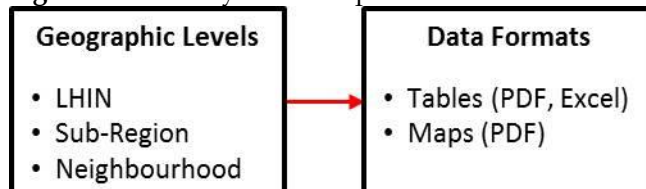
Health and health-related indicators are provided in two basic forms:

1. **Community-level health indicators**: this micro-data provides detailed statistics about populations living in communities by sex and relevant age group for each health indicator. We also provide information about how the community compares with the overall geography values and whether this difference is meaningful.
2. **Ontario-wide health indicators**: this macro-data provides an overview of how different communities within Ontario compare with each other in terms of specific health indicators. These data are shown on maps with different colours representing different values across communities.

OCHPP provides data about the use of health services such as cancer screening rates, emergency department admissions, primary care enrollment and hospital admissions at different levels of geography. Data related to chronic disease in adults, such as diabetes, asthma and high blood pressure, are also provided. An example is shown in Figure 4.

Figure 4: Diabetes data for a) An individual neighbourhood, West Humber-Clairville (PDF format) , b) All neighbourhoods (Excel table), and c) Neighbourhoods' health data map (PDF format) in the City of Toronto and LHIN 7
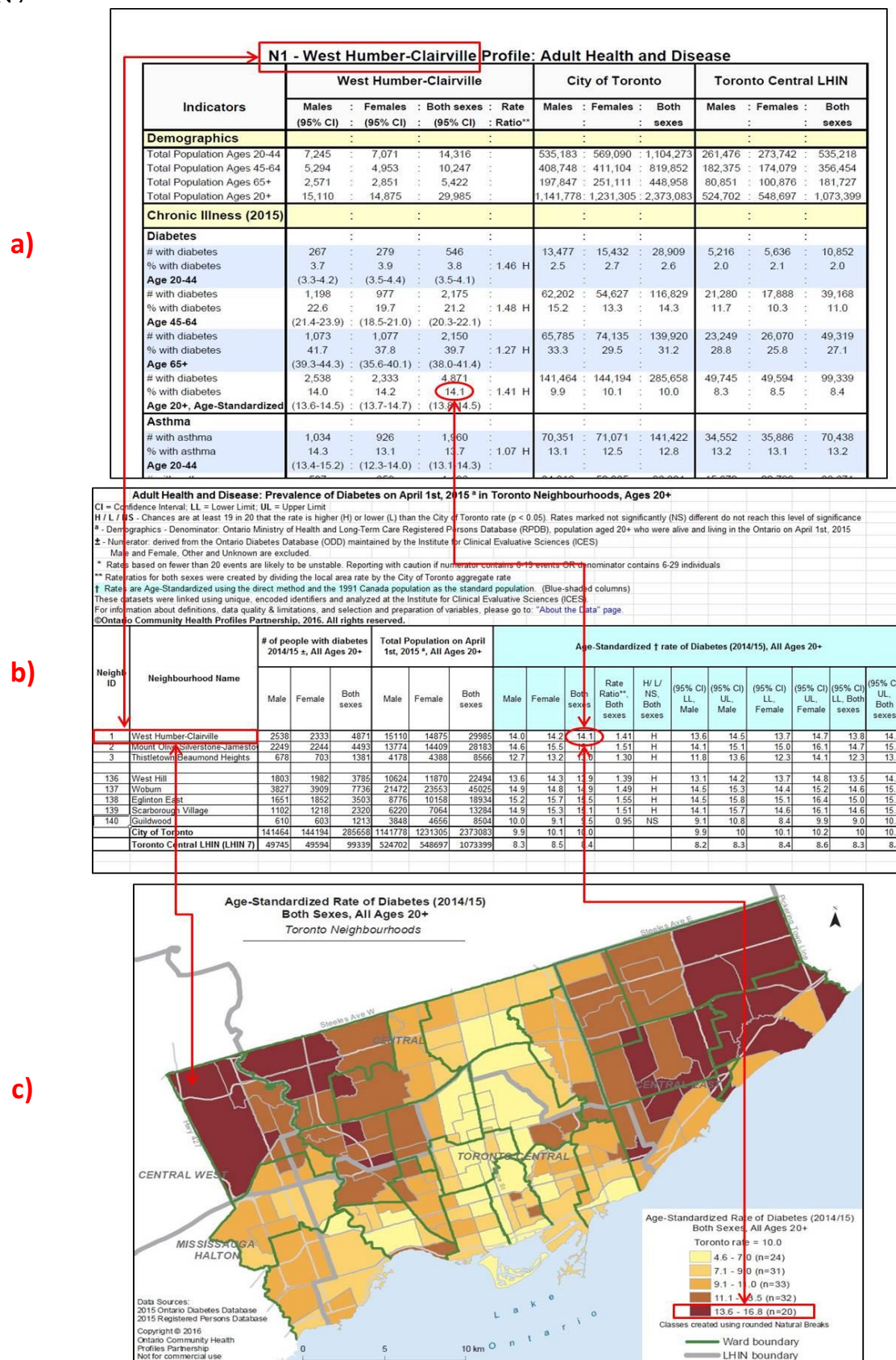
3.1 Data in Excel Format

Data tables for different geographic levels in Ontario can be downloaded in Excel files (i.e. profiles by all neighbourhoods, all sub-regions and all LHINs). The steps for obtaining the data tables are as follows:

Step 1. To view Data Tables, either select the desired LHIN from the drop-down list, the map or click on the "Data Tables and Maps" tab. To select City of Toronto, click on the "Select City of Toronto" button.

Step 2. Select the "Data Tables" tab. Next, select the appropriate Excel file associated with the desired health topic category, geographic level and year.

3.2 Individual Neighbourhood Data in PDF Format

Individual neighbourhood data for any indicator can be accessed in PDF health profiles. The steps to getting to the health profiles are as follows:

Step 1. To view Data Tables, either select the desired LHIN from the drop-down list or directly from the map. Alternatively, select the "Data Tables and Maps" tab. To select City of Toronto, click on the "Select City of Toronto" button.

Step 2. Select the "Data Tables" tab. Next, select the appropriate entry under the "Individual Neighbourhood" field for the health topic category of your choice (for example, Primary Care in 2011/13).

Step 3. Select a specific neighbourhood (for example, 63 The Beaches) for which data are required by selecting the neighbourhood in one of three ways:
   a. directly on the interactive map,
   b. from the alphabetical list of neighbourhood names, or
   c. from the neighbourhood ID list.
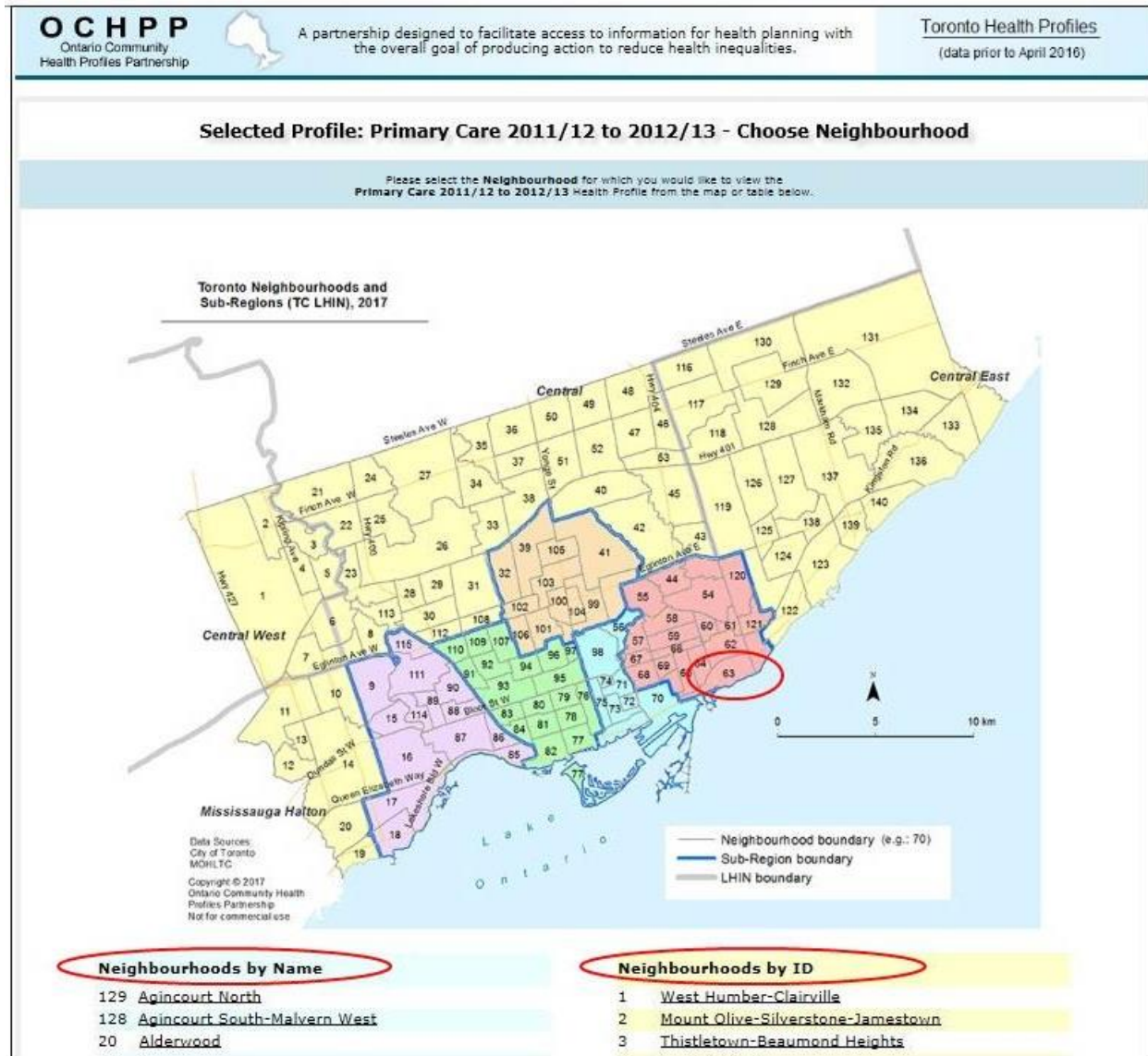
3.3   Health Data Maps in PDF Format

Maps give an overview of how the health of different communities within Ontario compare with each other. They are a visual illustration of spatial characteristics of data. Maps help to identify areas of concern. For example, maps can show if there are high concentrations of factors negatively impacting health outcomes locally, or if there are regions with elevated rates of diseases. Maps can also be considered as a complementary element to tabular data. They help identify spatial patterns and formulate additional hypotheses based on those patterns.

Users can find information about OCHPP geographies and how to read the maps in the "About the Data" section on the OCHPP website.

To view maps, take the following steps:

Step 1. Select the desired LHIN from the drop-down list (or directly from the map). Alternatively, click on the "Data Tables and Maps" tab. To select City of Toronto, click on the "Select City of Toronto" button.

Step 2. Select the "Maps" tab. Next, select the Thematic Map Category for which you would like to view the list of available indicators.

Step 3. Select the desired indicator from the list of available indicators (for example, the Diabetes indicator from the Adult Health and Disease category). To view more details about the data or maps, click on the ⓘ icon.

3.4 Archived Data

The Ontario Health Links data and sub-LHINs data for LHIN 7 and LHIN 8 have been archived. These data are available and accessible on the "Archived Data" page. To view the "Archived Ontario Geographies no longer in use (from 2017)" table, go to the "Data Tables" tab and click on the "Archives" tab.

4 Create Custom Geography Tool

The OCHPP website has a useful tool for compiling data for a custom collection of neighbourhoods. The "Create Custom Geography" tool is available for LHIN 7 and LHIN 8.

Steps to generate data for a custom geography:

1. To view Data Tables, select the desired LHIN from the drop-down list or directly from the map. Alternatively, click on the "Data Tables and Maps" tab. To select City of Toronto, click on the "Select City of Toronto" button.

2. Select the "Create Custom Geography" tab.

3. Step 1. Click-select (or deselect) from the map one or more neighbourhoods for which you would like to view data. Alternatively, use the checkbox list on the right to select the desired neighbourhoods.

   Step 2. Submit your neighbourhood selection.

4. Step 3. Select one or more Health Topic Categories from the drop-down list below. For example, for "Children and Youth," select "Asthma, Mental Health and Addiction Visits."

   Step 4. Click on "SUBMIT REQUEST & See RESULTS Below" to submit your request and to generate the results.

5. The resulting table summarizing results for the Custom Selected Area will be displayed on the webpage and will be similar to this example:

6. The report output can be sent to an Excel spreadsheet by clicking on the button "Export RESULT TABLE to Excel File."

5 Other Services

OCHPP provides consulting services if a local health network makes a specific request. The scope, parameters and deliverables of specific requests are worked out with the LHIN. The resulting analysis is prepared and presented for each specific request. In addition, occasional workshops are delivered to help partners maximize the potential benefits of available OCHPP services.

6 How to Join OCHPP

Partners have access to a highly-specialized team of experts including a medical geographer, primary care physician/scientist, epidemiologist and webmaster. Data is provided at the "neighbourhood" or a micro-level of geography meaningful to the partner's needs. Data that is usually difficult or expensive to access is provided to partners as part of the annual fee. A limited number of custom analyses as well as workshop and webinar training may also be provided.

To find out more about the partnership contact one of the following people:

- Anne-Marie Tynan
  OCHPP Manager
  Anne-Marie.Tynan@unityhealth.to
  416-864-6060 ext. 77481

- Dr. Rick Glazier
  Research Lead
  Rick.Glazier@unityhealth.to
  416-864-6060 ext. 77444

Appendix A: List of Indicators and Maps for Health Categories

Health Topic Category	Indicator(s)	Geographic Level(s)	Time	Maps
Primary Care	• Enrolment and Continuity of Care	**Neighbourhoods**: Individual, All **Sub-Regions:** All Neighbourhoods in sub-regions **LHINs:** All	2011/13	• **Primary Care Enrolment and Continuity indicators (Neighbourhoods)** 1. % of Enrolled Patients in Primary Care among Total Population 19+, Both Sexes+ 2. % of Population Non-Enrolled in Primary Care among Total Population 19+ 3. Non-Enrolled Population in Primary Care, Both Sexes, Age 19+ 4. % of Population with no Primary Care Visits among Total Population 19+ 5. Population with no Primary Care Visits, Both Sexes, Age 19+ 6. % of Population with Low Continuity of Care among All Enrolled and Non-Enrolled Population with 3+ Visits within two years, Both Sexes, Age 19+ 7. Population with Low Continuity of Care among Population with 3+ Visits within two years, Both Sexes, Age 19+ 8. % of Population Non-Enrolled in Primary Care and with no Primary Care Visits among Total Population 19+ 9. Population Non-Enrolled in Primary Care and with no Primary Care Visits, Both Sexes, Age 19+ 10. % of Non-Enrolled Population with Low Continuity in Primary Care among All Enrolled and Non-Enrolled Population with 3+ Visits within two years, Both Sexes, Age 19+ 11. Non-Enrolled Population with Low Continuity in Primary Care among Non-Enrolled Population with 3+ Visits within two years, Both Sexes, Age 19+ 12. Non-Enrolled Patients Levels in Primary Care, Both Sexes, Age 19+, Poisson Model Analysis 13. Low Continuity Levels Among Non-Enrolled Patients in Primary Care, Both Sexes, Age 19+, Poisson Model Analysis 14. Areas with High Percentages of Non-Enrolled Patients and Low Continuity Among Non-Enrolled Patients in Primary Care, Both Sexes, Age 19+ • **Locations of Primary Care Services in Toronto indicators (Neighbourhoods)** 1. Number of Comprehensive Primary Care Doctors by Model 2. FTE of Comprehensive Primary Care Doctors by Model • **Primary Care Enrolment and Continuity indicators (LHINs)**

				1. % of Population Non-Enrolled in Primary Care among Total Population 19+ 2. Non-Enrolled Population in Primary Care, Both Sexes, Age 19+ 3. % of Population with no Primary Care Visits among Total Population 19+ 4. Population with no Primary Care Visits, Both Sexes, Age 19+ 5. % of Population with Low Continuity of Care among All Enrolled and Non-Enrolled Population with 3+ Visits within two years, Both Sexes, Age 19+ 6. Population with Low Continuity of Care among Population with 3+ Visits within two years, Both Sexes, Age 19+ 7. % of Population Non-Enrolled in Primary Care and with no Primary Care Visits among Total Population 19+ 8. Population Non-Enrolled in Primary Care and with no Primary Care Visits, Both Sexes, Age 19+ 9. % of Non-Enrolled Population with Low Continuity in Primary Care among All Enrolled and Non-Enrolled Population with 3+ Visits within two years, Both Sexes, Age 19+ 10. Non-Enrolled Population with Low Continuity in Primary Care among Non-Enrolled Population with 3+ Visits within two years, Both Sexes, Age 19+
Emergency Department (ED) Care	• All ED Visits • ED Visits by High Urgency • ED Visits by Low Urgency	**Neighbourhoods:** Individual, All **Sub-Regions:** All Neighbourhoods in sub-regions **LHINs:** All	2014/15	• **Emergency Department Care indicators (Neighbourhoods and LHINs)** **All ED Visits** 1. Age-Standardized rate of ED visits per 1,000 population, Total Population, All Ages 0+, Both Sexes 2. Age-Standardized % of the population with one or more ED visits, Total Population, All Ages 0+, Both Sexes **All ED Visits That are High Urgency** 1. Age-Standardized rate of ED visits per 1,000 population that are High Urgency, Total Population, All Ages 0+, Both Sexes 2. Age-Standardized % of ED visits that are High Urgency, Total Population, All Ages 0+, Both Sexes **All ED Visits That are Low Urgency** 1. Age-Standardized rate of ED visits per 1,000 population that are Low Urgency, Total Population, All Ages 0+, Both Sexes 2. Age-Standardized % of ED visits that are Low Urgency, Total Population, All Ages 0+, Both Sexes

Prevention	• Mammograms • Pap Smears • Any Colorectal Cancer Screening • Colonoscopy • Fetal Occult Blood Testing	**Neighbourhoods:** Individual, All **Sub-Regions:** All Neighbourhoods in sub-regions **LHINs:** All	2013/15	• **Prevention Indicators (Neighbourhoods and LHINs)** 1. Age-Standardized rate of Mammography Among Women 50-69 2. Age-Standardized rate of Pap Smears Among Women 21-69 3. Age-Standardized rate of Any Colorectal Cancer Screening, Both Sexes, Age 50-74 4. Age-Standardized rate of Colonoscopy Screening, Both Sexes, Age 50-74 5. Age-Standardized rate of Fecal occult blood testing (FOBT) Screening, Both Sexes, Age 50-74
Adult Health and Disease	• Diabetes • Asthma • High Blood Pressure • Mental Health and Addiction Related Visits • Chronic Obstructive Pulmonary Disease	**Neighbourhoods:** Individual, All **Sub-Regions:** All Neighbourhoods in sub-regions **LHINs:** All	2014/15	• **Adult Health and Disease indicators (Neighbourhoods and LHINs)** 1. Diabetes, All Ages 20+, Both Sexes 2. Asthma, All Ages 20+, Both Sexes 3. High Blood Pressure, All Ages 20+, Both Sexes 4. Mental Health Visits, All Ages 20+, Both Sexes 5. Chronic Obstructive Pulmonary Disease (COPD), All Ages 35+, Both Sexes
Children and Youth	• Asthma • Mental Health and Addiction Related ED Visits • Injuries (All Admissions and ED Visits)	**Neighbourhoods:** Individual, All **Sub-Regions:** All Neighbourhoods in sub-regions **LHINs:** All	2014/15	
Mother and Babies	• Mother and Babies	**Neighbourhoods:** All **LHINs:** All	2012/15	
Injuries	• All Admissions and ED Visits	**Neighbourhoods:** All **LHINs:** All	2014/16	
Hospital Admissions	• Mental Health and Addiction related Hospital Admissions • Ambulatory Care Sensitive Conditions Hospitalizations	**LHINs:** All	2012/14	• **Hospital Admissions Indicators (LHINs)** **All Hospital Admissions** 1. Age-Adjusted Annual Hospitalization Rates (all cause) per 1,000 population, Both Sexes, All Ages 0+ **Alternate Level of Care (ALC) Days** 1. Age-Adjusted Rates of Hospital Days That Are Alternate Level of Care (ALC) per 1,000 population, Both Sexes, All Ages 0+ **Medical Hospital Admissions** 1. Age-Adjusted Annual Hospitalization Rates for Medical Conditions per 1,000 population, Both Sexes, All Ages 0+

				Surgical Hospital Admissions
				   1. Age-Adjusted Annual Hospitalization Rates for Surgical Conditions per 1,000 population, Both Sexes, All Ages 0+
				Prenatal Hospital Admissions
				   1. Age-Adjusted Annual Hospitalization Rates for Prenatal Conditions per 1,000 Women, Ages 15-49