

# Our Community, Our Services

A profile of the demographic, socioeconomic and health characteristics of the East Toronto community & the catchment area of Michael Garron Hospital



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*Thank you to the many community collaborators who made the completion of this report possible.*

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*Thanks also to community partner contributors, including Bruce Reeve, photographer & the Communications and Mental Health teams at MGH.*

# Executive Summary

## A Snapshot of the Michael Garron Hospital Community



### Neighbourhood Diversity:

- Diverse community of 22 neighbourhoods in east Toronto spanning from Midland Avenue to Bayview Avenue and from Lake Ontario to Eglinton Avenue.
- Five neighbourhoods with low equity scores are designated neighbourhood improvement areas by the City of Toronto.
- 37.5% immigrants; 64% in Flemingdon Park, 63.6% in Thorncliffe Park.
- 42% of residents are visible minorities; 79% in Thorncliffe Park & Flemingdon Park.
- Countries of origin include Bangladesh, Philippines, Pakistan and Syria.
- 50+ languages spoken; Urdu, Bengali & Chinese most common non-English languages.



### Income:

- 20% of families are low income; 45.5% in Thorncliffe Park; 44% in Oakridge.
- 75% of neighbourhoods have high rates of low income seniors.
- Hospital serves 3.5 times as many low income patients as high, five times as many low income moms and babies as high & most low income patients of any TC LHIN hospital.
- A few wealthy neighbourhoods; only 6.7% low income in Leaside-Bennington.



### Age:

- Seniors and middle-aged (45-64 years) growing as proportion of population.
- 32% of seniors live alone; 41.4% in Thorncliffe Park.
- Proportion of inpatients who are seniors increasing; 33.7% in 2016/17.
- Higher than average proportions of children and youth & high fertility rates.
- High rates of births to mothers not born in Canada (34.7%); 75.2% in Thorncliffe Park & 63.8% in Flemingdon Park.



### Health & Wellness:

- High levels of chronic disease - diabetes, COPD, heart disease.
- Over 80% of neighbourhoods have higher than average COPD & asthma rates.
- Diabetes rates highest in low income neighbourhoods; 14.7% in Oakridge (37.5% for seniors).
- Cancer prevention screening lower than average in many neighbourhoods, especially designated improvement areas.
- High rates of clinical visits for mental health; higher than average in 19 of 22 neighbourhoods.
- Taylor-Massey has the highest rate of mental health visits (12%) in the community, and highest annualized psychiatric hospital admission rate in the City.



### Access:

- One-fifth of population does *not* have a regular primary care practitioner.
- Emergency Department volumes high; 8.2% increase in last four years, 20% are complex.
- Many Alternate Level of Care (ALC) patients; many low income creating barriers to community discharge.

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# Introduction

Michael Garron Hospital | Toronto East Health Network (*formerly Toronto East General Hospital*) is committed to understanding the demographic and health characteristics of the community it serves in order to deliver patient-centred care, ensure equitable access for all, and to develop awareness of issues that could impact patient care and resource requirements.

This report provides an overview of key demographic, socioeconomic and health characteristics of Michael Garron Hospital's (MGH) service area and patients, comparing them to the Toronto Central Local Health Integration Network (TC LHIN) and the City of Toronto. The final section describes MGH's service performance within the local community, and the hospital's contribution to the broader healthcare system.

A variety of resources were used to compile the report. The primary resources are Statistics Canada census data, which is collected every five years, the most recent release being 2016, and the Ontario Community Health Profiles website ([www.ontariohealthprofiles.ca](http://www.ontariohealthprofiles.ca)). Other sources are referenced throughout the report.

## MGH in the local healthcare system

Michael Garron Hospital is the only acute care hospital located between the downtown core of the City of Toronto and Scarborough (*Figure 1*).

**Figure 1: GTA Hospitals & TC LHIN and MGH Service Area Boundaries**



Acute care hospitals provide three categories of care: primary, secondary and tertiary/quaternary. MGH is funded as a community teaching hospital, largely providing primary, secondary and complex continuing care, but has also become a centre for select tertiary care services, including a Progressive Weaning Centre of Excellence and a Level 1 thoracic surgery program.

The majority of the primary service community is located within the TC LHIN; however a small portion (Warden Avenue to Midland Avenue) is in the Central East LHIN.

The TC LHIN has the highest concentration of health services in Ontario<sup>1</sup> and funds over 170 health service providers. MGH is one of seven acute care hospitals funded by the TC LHIN and one of two community hospitals, the other being St. Joseph's Health Centre, which is now part of a health network with St. Michael's Hospital and Providence Health. The TC LHIN also funds three specialty and seven rehabilitation and complex continuing care hospitals.

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<sup>1</sup> <http://www.torontocentrallhin.on.ca/>







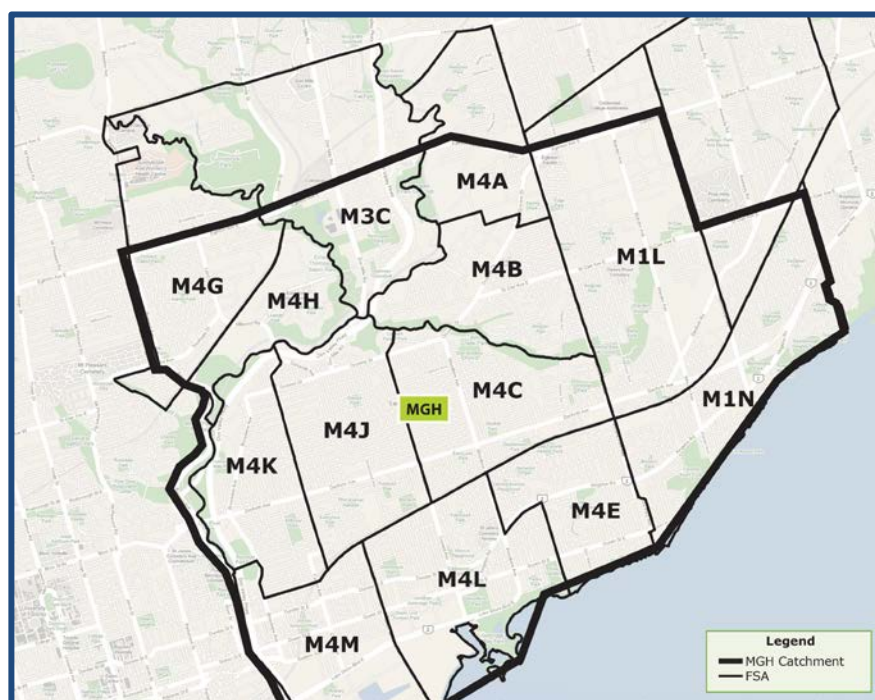


# The MGH Service Community

MGH's primary catchment area boundaries (*Figures 1 & 2*) are defined by the areas from which the hospital draws the majority of its patients - Midland Avenue in the east to Bayview Avenue in the west, and north from Lake Ontario to Eglinton Avenue. MGH serves many from the local community and more local residents than any other hospital in the TC LHIN.<sup>2</sup>

The hospital's service area<sup>3</sup> includes 13 FSAs (Forward Sortation Areas; the first three digits of a postal code); nine located completely within the defined area and four that are partially within the service area (*Figure 2*)<sup>4</sup>.

**Figure 2: MGH Service Area Forward Sortation Areas (FSA)<sup>5</sup>**



Toronto is divided into 140 neighbourhoods for smaller area planning created by aggregating Statistics Canada Census Tracts (CTs) into meaningful geographic units for planning and service delivery, each with populations averaging 7,000-10,000 people.<sup>6</sup> MGH's catchment area is comprised of 22 of these neighbourhoods (*Figures 3 & 4*).

<sup>2</sup> CRICH (Centre for Research on Inner City Health), *Hospital Care for All, An equity report on differences in household income among patients at Toronto Central Local Health Integration Network (TC LHIN) hospitals, 2008-2010*, May 2012, pg.18.

<sup>3</sup> The terms service area or catchment area are used interchangeably throughout this document.

<sup>4</sup> The following FSAs are 100% within MGH's catchment: M4M, M4L, M4E, M1N, M4C, M4J, M4K, M4H, M4B; the remaining FSAs are partially within the catchment: M3C, M4A, M4G, M1L.

<sup>5</sup> FSAs are the first three digits of a postal code.

<sup>6</sup> Information on how neighbourhoods were created: [www.toronto.ca/demographics/neighbourhoods.htm](http://www.toronto.ca/demographics/neighbourhoods.htm)

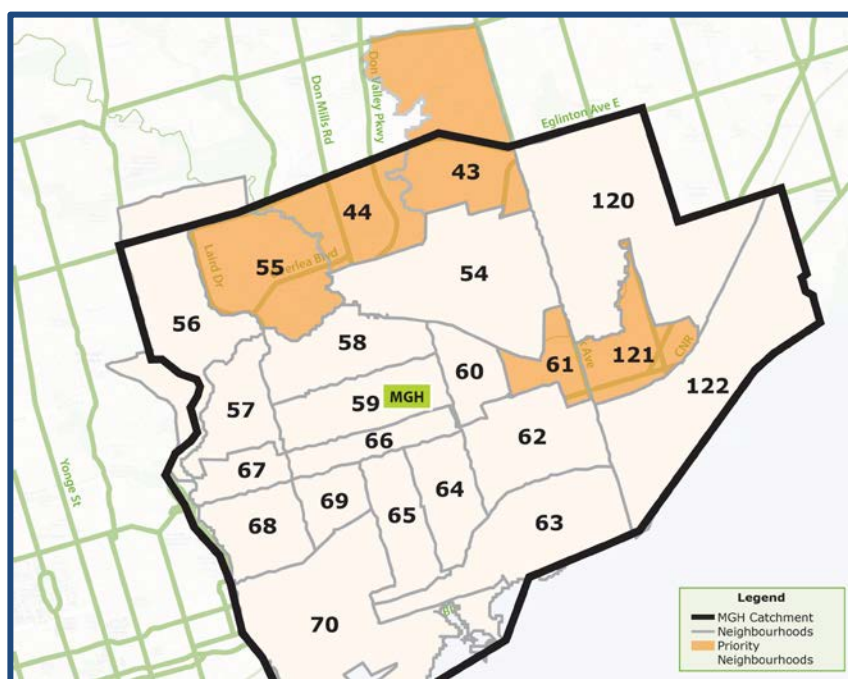
The Toronto Strong Neighbourhoods Strategy 2020 identified 31 neighbourhoods across the City that fall below the recommended 'Neighbourhood Equity Benchmark', indicating that action is required to strengthen the social, economic and physical conditions to enable equitable outcomes and improved well-being for the residents of these communities. The benchmark is determined by a variety of factors under the categories of: economic development, social development, physical surroundings, participating in decision-making (voting) and health factors (premature mortality, diabetes rates, mental health and preventable hospitalizations).<sup>7</sup> Five of these neighbourhoods are located in the MGH catchment area: *Thorncliffe Park, Flemingdon Park, Victoria Village, Taylor-Massey, and Oakridge*<sup>8</sup>.

**Figure 3: MGH Service Area Neighbourhoods**

43-Victoria Village*	44-Flemingdon Park*	54-O'Connor-Parkview
55-Thorncliffe Park*	56-Leaside Bennington	57-Broadview North
58-Old East York	59-Danforth-East York	60-Woodbine-Lumsden
61-Taylor-Massey*	62-East End-Danforth	63-The Beaches
64-Woodbine Corridor	65-Greenwood-Coxwell	66-Danforth
67-Playter Estates-Danforth	68-North Riverdale	69-Blake-Jones
70-South Riverdale	120-Clairelea-Birchmount	121-Oakridge*
122-Birchcliffe-Cliffside		

\*Shaded neighbourhoods are designated as key improvement areas (i.e. priority neighbourhoods).

**Figure 4: Map of MGH Service Area by Neighbourhoods**



<sup>7</sup>Social Policy Analysis and Research City of Toronto, TSNS 2020 NEIGHBOURHOOD EQUITY INDEX Methodological Documentation, March 2014, <https://www.toronto.ca/wp-content/uploads/2017/11/97eb-TSNS-2020-NEI-equity-index-methodology-research-report-backgroundfile-67350.pdf>

<sup>8</sup>City of Toronto, *Toronto Strong Neighbourhoods Strategy 2020*, April 2014; <https://www.toronto.ca/city-government/data-research-maps/research-reports/social-reports/toronto-strong-neighbourhoods-strategy-2020/>.







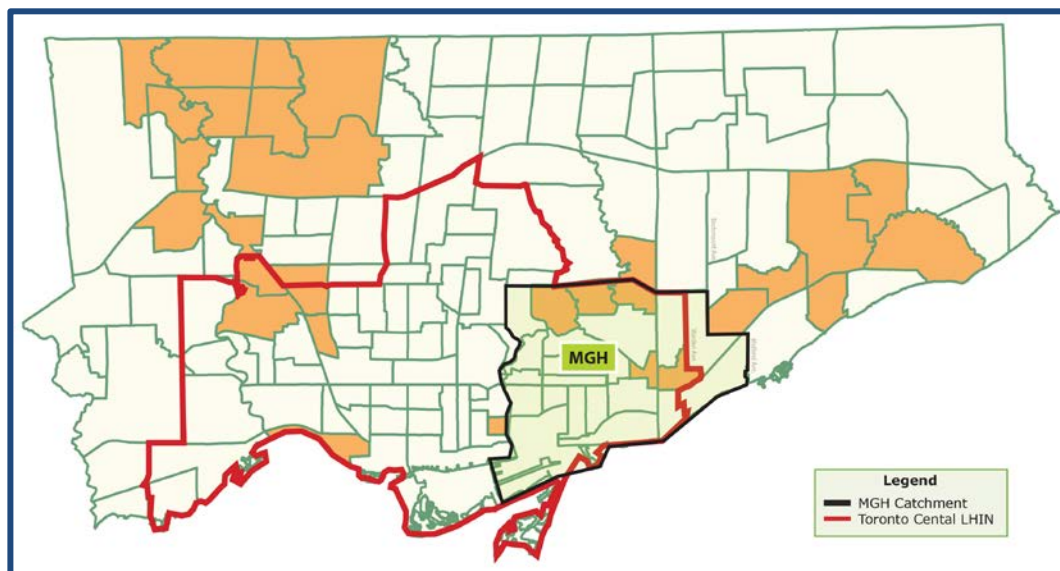


# A Demographic Profile of the Community

The MGH service area has many distinctive features. The hospital serves a low income population, has higher than average numbers of children and youth, many immigrants and visible minorities (especially in certain neighbourhoods), a growing senior population and many characteristics that may contribute to health inequities. It is also home to a number of well established, wealthy neighbourhoods, most notably Leaside-Bennington and The Beaches. These profound differences can result in health needs that may be quite varied.

As previously noted, five of the neighbourhoods within MGH's 22 neighbourhood service area are neighbourhood improvement areas, referred to as 'priority neighbourhoods' throughout this report. With only eleven designated neighbourhoods in the entire TC LHIN, having five located in the MGH service community is significant. A majority of the City's other improvement areas are located in Scarborough and the city's north-west (*Figure 5*).

**Figure 5: Neighbourhood Improvement (Priority) Areas in Toronto**



Thorncliffe Park and Flemingdon Park are two of the priority neighbourhoods in MGH's catchment area, described by the TC LHIN as communities with high mobility rates, low median household incomes, a high percentage of low income families, high percentage of rented dwellings, high unemployment rates, high percentage of recent immigrants and a high percentage of visible minorities.<sup>9</sup> A 2009 needs assessment of Thorncliffe described it as "a community where severe overcrowding and poverty is

<sup>9</sup> Toronto Central LHIN, *Thorncliffe Park and Flemingdon Park Data Package*, January 29, 2014.

heightening stress and ethnic tensions as housing, youth and mental health programs fail to keep up with the neighbourhood's growth.”

The Thorncliffe Park community has received special funding to reduce some of its inequities; TC LHIN funding to enhance access to primary care in 2014/15, and in 2016/17, funding from the Lawson Foundation to support Type 2 diabetes prevention in the neighbourhood, which has the highest rates of diabetes and gestational diabetes in the region.

Oakridge has the lowest equity score of all MGH neighbourhoods<sup>10</sup> and the fifth lowest in the City of Toronto. This is one of two neighbourhoods, the other being Taylor-Massey, that are the focus of the TC LHIN funded East Toronto Sub-Region initiative tasked with facilitating improved primary care, community care and social support services for the marginalized and underserved residents in these two neighbourhoods.

At the other end of the spectrum, the neighbourhoods of Leaside-Bennington, The Beaches and North Riverdale fall into the top 10% (of all 140 neighbourhoods in the City) in the equity rankings, alongside neighbourhoods like Bridle Path-Sunnybrook-York Mills, Yonge-Eglinton and Rosedale-Moore Park.

Providing equitable service for such distinct and diverse communities whose healthcare needs can be quite different, requires ongoing acknowledgement.

Detailed data on area demographics, including age, education, ethnic and racial diversity, income and language are available in *Appendix A: Demographic Profile of the MGH Community*. Highlights are discussed below.

## Population, Age and Gender

In 2016, MGH's primary service area had a population of just over 355,000 people, an increase of 6.5% in the last decade. The community is home to many young children under 14; 17.5% of the population in 2016, compared to only 14.4% in the TC LHIN and 14.6% in the *City* (*Appendix A, Figure A1*).

Many neighbourhoods have higher than average numbers of children 14 and under, but Thorncliffe Park has by far the most; more than one-quarter (26.5%) of its population. This is one of Toronto's fastest growing neighbourhoods and has had a very high fertility rate for many years. Its 2009 needs assessment indicated nearly twice the city average for children under four,<sup>11</sup> and the community is home to the largest elementary school in North America (Thorncliffe Park Public School) and Canada's largest (close to 700 students) all-kindergarten school, the Fraser Mustard Early Learning Academy.<sup>12</sup>

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<sup>10</sup> The lower the score, the higher the level of total overall inequities faced by the neighbourhood.

<sup>11</sup> Boston, Tony. *Understanding Thorncliffe Park*, *Thorncliffe Neighbourhood Office needs Assessment Report*, November 2009, p.13.

<sup>12</sup> The Globe and Mail, published August 11, 2011; updated May 3, 2018;

<https://www.theglobeandmail.com/news/toronto/all-kindergarten-school-promises-to-relieve-jammed-thorncliffe-park/article590233/>.

Most neighbourhoods served by MGH have high proportions of young children. In fact 20 of 22 neighbourhoods have higher percentages of children under 14 than either the TC LHIN or the City:

- Over one-quarter of the population in Thorncliffe Park.
- One-fifth of the population in Leaside-Bennington, Flemingdon Park and Oakridge.
- 18%-19% in Taylor-Massey, Woodbine Corridor & Blake-Jones.
- 17%-18% in Danforth-East York, East End-Danforth, The Beaches, Greenwood-Coxwell and Danforth.

The east end also has slightly higher than average numbers of middle-aged residents. Those aged 45-64 years are now 28.2% of the population; a 2.5% increase since 2006 and 5.9% increase over 15 years. This population represents the baby boom generation who are fast becoming seniors. The MGH service area has slightly higher proportions of its population in this age group than either the City or TC LHIN, so the future burden of caring for the elderly population may be greater than average for MGH.

Statistics Canada reports that population aging in Canada will accelerate between 2010 and 2031 when all baby boomers will reach age 65. By 2036, the number of seniors will be more than double the number in 2009 and make up around a quarter of the population.

In Ontario, those aged 65 to 74 are expected to increase by 75% and the 75-84 age group to more than double over the next few years. The Toronto Vital Signs 2017/18 reports that, for the first time in history, there are more seniors in Toronto than children.<sup>13</sup>

## Seniors

As expected, seniors continue to be a significant and growing group (*Appendix A; Figure A1 and A2*), as they are across the City and TC LHIN. Those over 65 increased from 12.3% in 2006 to 13.8% in 2016, with the majority (1.2%) of the increase in the last five years.

Seniors as a percentage of the population increased in every neighbourhood but one between 2011 and 2016, with the proportion over 75 remaining stable at 6.1%. The neighbourhood of Victoria Village had the highest rate of seniors in 2016 at 19.5% (one-fifth) of its population. The continued trend of those over 65 increasing in proportion to the total population is significant given the correlation between age and health service usage.

Data from 2011 (comparable data for 2016 was not yet available at the time of publication) showed that many seniors in the community lived alone (close to one-third (32%), which is 5.2% higher than the City rate. This is consistent across the community with 20 of the 22 neighbourhoods having higher than average rates of

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<sup>13</sup>Toronto Foundation, *Toronto Vital Signs 2017/18*. <https://torontofoundation.ca/wp-content/uploads/2018/01/TF-VS-web-FINAL-4MB.pdf>

seniors who live alone - and many have very high rates. East End-Danforth has close to half of its senior population living alone (42.4%) followed by Thorncliffe Park at 41.4%.

The community is also home to many low income seniors, much higher than the City average (12.4% vs. 8.4%). In Thorncliffe Park, one-quarter of the senior population is classified as low income. However, low income seniors are distributed widely across east end neighbourhoods. Nearly three-quarters of neighbourhoods in the community (16 of 22) had a higher than average proportion of seniors classified as low income after tax in 2011 using the low income measure (LIM)<sup>14</sup>.

## Income

Poverty is a key determinant that strongly correlates with a variety of risks to health. Research suggests that lower income groups are exposed to greater health risk, have more complex health conditions and are not using preventative measures as much as those in the middle to high income groups.<sup>15</sup>

MGH's service area is less wealthy than the TC LHIN or City (*Appendix A, Figure A3*). In 2016, one-fifth (20.4%) of households were classified as low income after tax using the LIM measure, compared to 19.6% in the City and 18.3% in the TC LHIN. Already higher than average, this still masks the extremely high percentages of low income in some neighbourhoods. Nearly half of all households in Thorncliffe Park and Oakridge are low income and rates of low income (% LIM after tax) are high in all priority neighbourhoods:

- 45.5% in Thorncliffe Park,
- 44.5% in Oakridge,
- 35.8% in Flemingdon Park,
- 32.4% in Taylor-Massey, and
- 26% in Victoria Village.

In contrast, a few wealthier MGH neighbourhoods have very few low income households based on % LIM after tax:

- 6.7% in Leaside-Bennington, and
- 8.6% in The Beaches.

The *Hospital Care for All* report<sup>16</sup> analyzed differences in household income for patients served by TC LHIN hospitals and verifies that MGH's community is low income. This report, using 2008/10 hospital data, indicates that MGH serves very high numbers of low income patients relative to those with the highest incomes; admitting 3.51 times as many patients from the lowest income quintile as the highest. This ratio is significantly higher than that of any other hospital in the TC LHIN (*Figure 6*). In some

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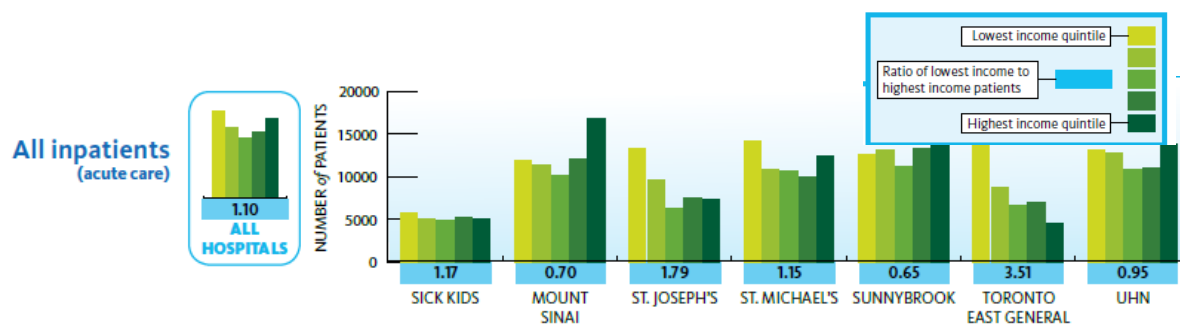
<sup>14</sup> The low income measure (LIM) is the most commonly used low income measure for the purpose of making international comparisons. Statistics Canada; <http://www.statcan.gc.ca/pub/75f0002m/2012002/lim-mfr-eng.htm>

<sup>15</sup> CRICH (Centre for Research on Inner City Health), *Hospital Care for All, An equity report on differences in household income among patients at Toronto Central Local health Integration Network (TC LHIN) hospitals, 2008-2010*, May 2012, pg.10.

<sup>16</sup> CRICH (Centre for Research on Inner City Health), *Hospital Care for All, An equity report on differences in household income among patients at Toronto Central Local health Integration Network (TC LHIN) hospitals, 2008-2010*, May 2012.

service areas, like obstetrics, MGH cared for more than five times as many low income moms and babies as high income.

**Figure 6: Household Income of Inpatients in TC LHIN Hospitals**



## Education

Education levels are not comparable over time due to differences in data collection and reporting.

The 2016 data shows that, as a whole, the MGH service community has similar educational levels to Toronto; with 29.8% of the population holding a university degree compared to 30.6% in the City (*Appendix A, Figure A4*), although the average in the TC LHIN is considerably higher.

At the other end of the spectrum, there are similar numbers of people in this community with no certificate, diploma or degree (i.e. not completed high school), 17.1% compared to 17.5%. The TC LHIN again has fewer individuals with no diploma or degree (15.9%).

Half of MGH neighbourhoods have lower education levels than the City. Once again, this includes all priority neighbourhoods. The wealthier, more established neighbourhoods have more university-educated residents; as high as 45.5% in Leaside-Bennington, which also has only 7.1% of residents without a high school diploma, compared to close to 1/5 of the population in all priority neighbourhoods.

Given that the priority neighbourhoods are home to large numbers of immigrants educated abroad, many in these communities who do hold a university degree will still face barriers having their credentials recognized in Canada, complicating their ability to find work they are qualified to do.

## Ethnic and Racial Diversity

In 2016, immigrants comprised 37.5% of the MGH service community (*Appendix A, Figure A5 & Figure 7*). While very diverse, this is slightly fewer immigrants than in 2011 when the percentage was 38.9%, and a slightly lower percentage than either the TC LHIN or the City.



There are, however, stark variations between neighbourhoods. Only six have higher percentages of immigrants and individuals in racialized groups (visible minorities),<sup>17</sup> than the City. These are the five priority neighbourhoods and Clairlea-Birchmount at the north-eastern edge of the service area. This is in stark contrast to 2011 when half (11 of 22) of the neighbourhoods in the community had more immigrants than the City.

Priority neighbourhoods clearly have the greatest ethnic diversity. All have very high numbers of immigrants and people in racialized groups, more than half the population. In some, visible minorities comprise three-quarters or more of the population; as high as 79.1% in Thorncliffe Park and 78.5% in Flemingdon Park (*Figure 7*).

**Figure 7: % Immigrants and Visible Minorities in MGH Priority Neighbourhoods 2016**

Neighbourhood	% Immigrants	% Visible Minorities	% Recent Immigrants
Thorncliffe Park	63.6%	79.1%	18.6%
Flemingdon Park	64%	78.5%	12.7%
Oakridge	54.3%	74%	12.7%
Taylor-Massey	55.5%	66%	15.9%
Victoria Village	52.5%	58%	9.7%
MGH Neighbourhood	37.5%	41.9%	6.1%
City of Toronto	46.3%	50.7%	6.9%

The five priority neighbourhoods are also home to large numbers of recent immigrants;<sup>18</sup> as high as 18.6% in Thorncliffe Park, compared to only 6.1% for the area overall and 6.9% and 5.7% in the City and TC LHIN.

In contrast, half of the catchment (11 of 22 neighbourhoods) has very few recent immigrants; 3% or less of their population, and many have fewer visible minorities than the City average of 50.7%. In The Beaches, for example, visible minorities are only 13.8% of the population.

Bangladesh was the top country of origin for immigrants in the MGH community in both 2011 and 2016, although this varies by neighbourhood. On the other hand, the Philippines is the most common country of origin in the City and TC LHIN. The MGH service area has eight neighbourhoods where the Philippines is the most common country of origin, but its overall immigrant profile is quite varied.

In 2016 China was the top country of origin in only two neighbourhoods, as compared to five in 2011, suggesting fewer immigrants from China are now settling in this community.

Immigrants from the United States or United Kingdom are more common in the wealthier neighbourhoods of Leaside-Bennington, The Beaches and Playter-Estates-Danforth.

<sup>17</sup> Government of Canada definition of racialized groups: persons, other than Aboriginal peoples, who are non-Caucasian in race or non-white in colour. Visible minority is a roughly comparable term.

<sup>18</sup> Recent immigrants are those who arrived within the last 5 years.

Thornccliffe Park is the only neighbourhood in the area where Pakistan is the primary country of origin for recent immigrants, and for the first time, Syria was the top country of origin in Victoria Village, confirming that east Toronto has become home to many Syrian refugee families.

Numbers of residents with Aboriginal identity are distributed throughout all neighbourhoods. The 1.5% of people in the community who identify as Aboriginal is slightly higher than the City or the TC LHIN averages.

The 2011 data indicated that people of Chinese heritage were the largest racialized group in the community, followed by South Asian and African/Caribbean/Black (*Appendix A, Figure A6*). Comparable data for 2016 was not yet available at the time of publication.

## Language

Many households in the community speak languages at home other than English or French (*Appendix A, Figure A6 & A7*). In 2016, Chinese continues to be the most common overall. Urdu and Bengali are also prevalent, although both are concentrated in a few specific neighbourhoods. Tagalog, Urdu and Bengali are the most common non-English language spoken in the priority neighbourhoods.

The MGH community is unique in the City in terms of people speaking Urdu and Bengali as their home language:

- Urdu is the top language spoken in Thornccliffe Park, with 17.3% of residents reporting this as their home language; the city-wide average is only 0.9%.
- Bengali continues to be commonly spoken in the two priority neighbourhoods that are the focus of the East Toronto Sub-Region, Oakridge (15.3%) and Taylor-Massey (12.5%), although these rates have declined somewhat from 2011. Bengali is the top home language for only 0.7% of households in Toronto.

Greek has been spoken throughout the MGH community for many years and, although declining, is still the primary language in many households; with rates higher than the City average dispersed across many MGH neighbourhoods (14 of 22).

In 2011 only 4.8% of households had no knowledge of English or French, fewer than would be expected given the ethnic and immigration profile of the community. This could suggest a lower burden of inequity related to language than might be expected based on the numbers of immigrants and new immigrants.







# A Health Profile of the Community

Understanding the community's overall health and incidence of chronic disease is important given the strong correlation between chronic disease and social inequity, and that "chronic disease now accounts for the large majority of our healthcare spending, with four per cent of patients who have chronic and/or complex diseases accounting for 90 per cent of the LHIN's health care expenses."<sup>19</sup>

High users of healthcare resources have the greatest expenditures associated with their healthcare utilization and are referred to as "the 1-5%". East Toronto has the highest volume and proportion of high users.<sup>20</sup> Hypertension and diabetes have been shown to be the most prevalent of chronic conditions for the 1% and 5% users in the TC LHIN,<sup>21</sup> and both are prevalent in the neighbourhoods served by MGH.

The East Toronto community has benefitted from funding targeted at alleviating inequities:

- In 2012, a local Health Link, the East Toronto Health Link (ETHeL), was established to focus on high needs populations and redesign the way care is delivered. Its service area covers MGH's catchment area and ETHeL has one of the highest senior populations and higher volumes and concentrations of 1% users under 65 than other Links.<sup>22</sup>
- Funding has been provided specifically to the Thorncliffe Park neighbourhood to improve primary care access and for Type 2 diabetes prevention.
- In 2017, the East Toronto Sub-Region initiative was funded to improve primary care and social support services for marginalized and underserved residents in two priority neighbourhoods, Oakridge and Taylor-Massey.

Highlights of the community's health status are discussed below. Detailed data is available in *Appendix B*.

## Incidence of Chronic Disease

Adult health and disease data for 2012 and 2015 – diabetes, asthma, COPD, high blood pressure and incidence of medical visits with mental health diagnoses – are outlined in *Appendix B, Figures B1 and B2*, for the overall population and for seniors.

This data shows a community with slightly improved rates of some chronic diseases, but great variability between neighbourhoods. The five priority neighbourhoods have notably higher rates of chronic disease than the City, TC LHIN and other neighbourhoods in the service area.

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<sup>19</sup> Toronto Central LHIN, *Delivering High-Value Local Health Care Through Collaborative Action*, Toronto Central Local Health Integration Network's 2010-2013 Integrated Health Service Plan, November 2009.

<sup>20</sup> Toronto Central LHIN, *Defining High Users (The 1% and 5% of the System)*, 2013.

<sup>21</sup> Presentation on the Toronto Community Health Profiles Website, *High Cost Health Care Users: A Focus on Health Links*, 2014, p. 20.

<sup>22</sup> Toronto Central LHIN, *Health Link Data: Initial Observations and Notes*, 2013.

## Diabetes

Adult diabetes rates in MGH's community declined by 1.7% between 2012 and 2015, similar to the City and TC LHIN. Rates for seniors showed an even greater decrease. However, diabetes rates did increase significantly between 2007 and 2015, by approximately 3% for all ages and 5% for seniors, and remain a significant health issue in this community.

- In 2015, seven MGH neighbourhoods had diabetes rates higher than the City average - all five priority neighbourhoods plus O'Connor-Parkview and Clairlea-Birchmount. The highest rates are in Oakridge and Thorncliffe Park at 14.7% and 13.3%, as compared to the City average of 10%.
- Oakridge has the highest diabetes rate for seniors at 37.5%, but other priority neighbourhoods are similar; all having more than one-third of their senior population diabetic, as does the Clairlea-Birchmount neighbourhood at 35.2%.
- Highest rates have consistently occurred in communities with the lowest incomes, including all priority neighbourhoods. Studies show that serious diabetes complications are higher in the lowest-income neighbourhoods as compared to the highest-income.<sup>23</sup>
- The wealthier neighbourhoods have very low rates of diabetes, some half or less than the City average (only 5% in the Beaches), and these rates tend to stay lower than average as their population ages.

This is an important health issue for this community. However the most recent data may suggest that improvements in the prevention, management and treatment of diabetes, or other factors such as immigration, could be having an impact on these rates. To understand this more fully would require further study.

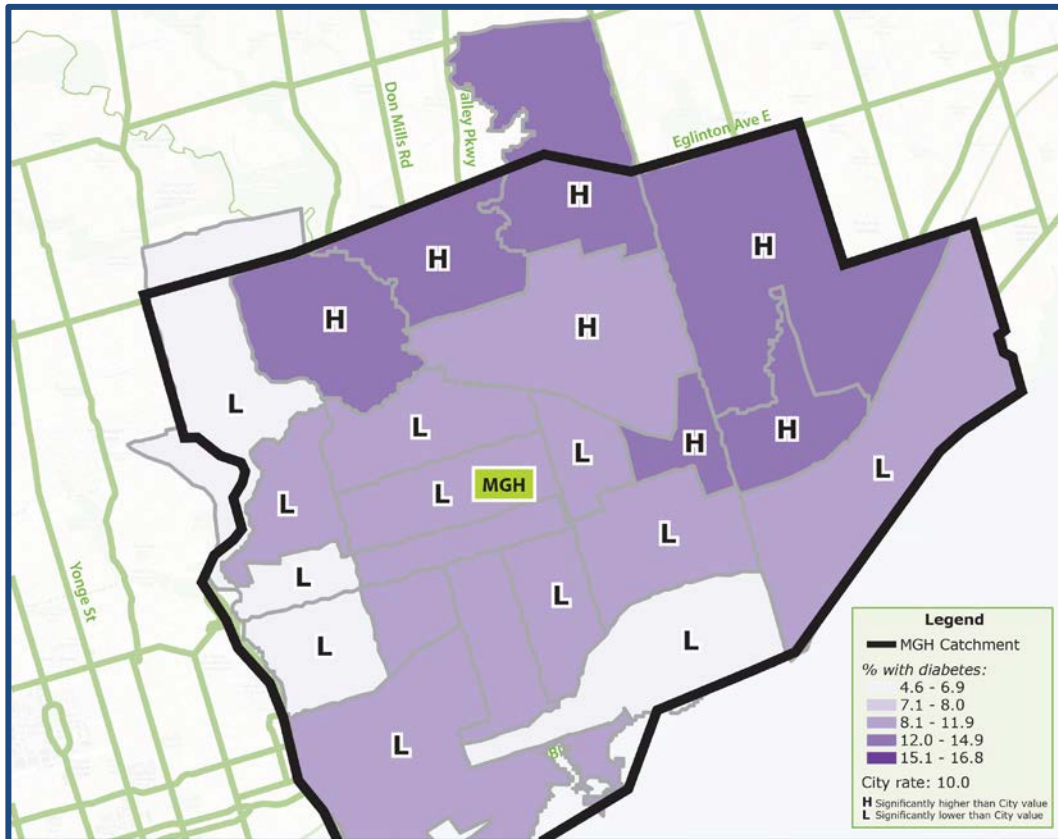
*Figure 8* shows the incidence of diabetes in the community in 2015, which clearly demonstrates that the highest rates are in the priority neighbourhoods and the lowest rates occur in The Beaches, Broadview North, Playter Estates-Danforth and Leaside-Bennington.

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<sup>23</sup> Health Quality Ontario, *Quality in Primary Care: Setting a Foundation for Monitoring and Reporting in Ontario*, 2015, p. 21.



**Figure 8: % with Diabetes (20+) in MGH Service Area Neighbourhoods, 2015**



## Respiratory Diseases

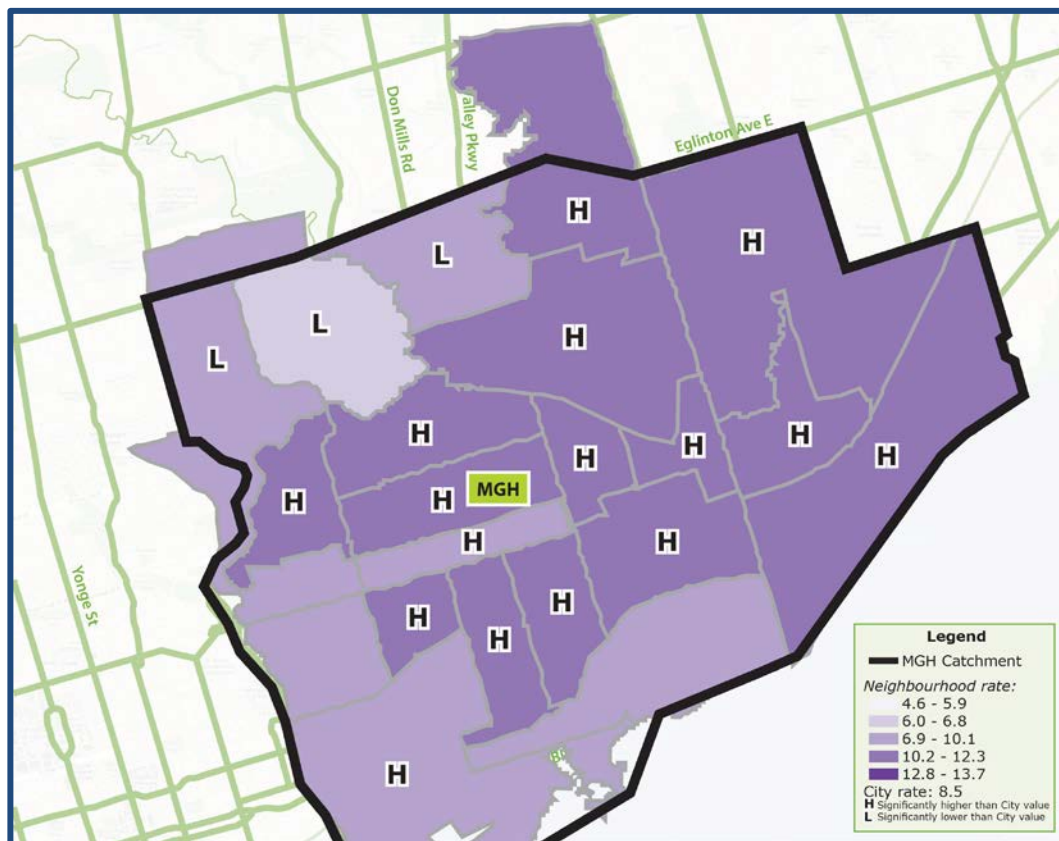
Rates of respiratory disease have long been a concern in east Toronto related to air quality issues and smoking rates, which were shown by a recent Toronto Public Health report<sup>24</sup> to be high in the Danforth/East Toronto area. The same study indicates that smoking rates are higher amongst those reporting lower income and education levels.

In the MGH community:

- COPD and asthma rates (*Figure 9*) are higher than average across much of the community.
- Asthma and COPD show a different pattern than other disease rates – they are similar and sometimes lower in priority neighbourhoods as compared to other parts of the community.
- Blake-Jones and Danforth-East York have the highest COPD rates in seniors.
- Over 85% of neighbourhoods in the MGH catchment area (19 of 22) have higher than average rates of COPD in seniors.
- Eighty per cent (18 of 22) neighbourhoods have higher than average adult asthma rates and 64% (14 of 22) have higher than average rates for seniors. Asthma rates are highest in Birchcliffe-Cliffside and Old East York.

<sup>24</sup> Toronto Public Health, Toronto Health Indicator Series: Smoking, <http://www.toronto.ca/health/map/indicators/index.htm>

**Figure 9: COPD Rates in MGH Service Area Neighbourhoods, 2015**



## Mental Health and Addictions

Mental health and addictions have a major impact on quality of life for many individuals and are a major healthcare cost and a significant reason for Emergency visits and hospital readmissions.<sup>25</sup> In the MGH community, the percentage of the population with clinical visits for mental health diagnoses is higher than the City or the TC LHIN (Figure 10 & Appendix B, Figures B1 & B2).

Rates are high right across the community. Over half (12 of 22) of MGH neighbourhoods had more than 10% of their population record a doctor's visit for a symptom related to mental health in 2015, and all but three neighbourhoods recorded mental health visit rates higher than the City.

Taylor-Massey, a priority neighbourhood, has the highest rate of adult mental health visits in the catchment (at 12%). A recent MGH study<sup>26</sup> showed that between 2012 and 2014, Taylor-Massey also had the highest annualized psychiatric hospital admission rate in the City. Features associated with higher admission rates included increased low income households and population density. Taylor-Massey was the fifth

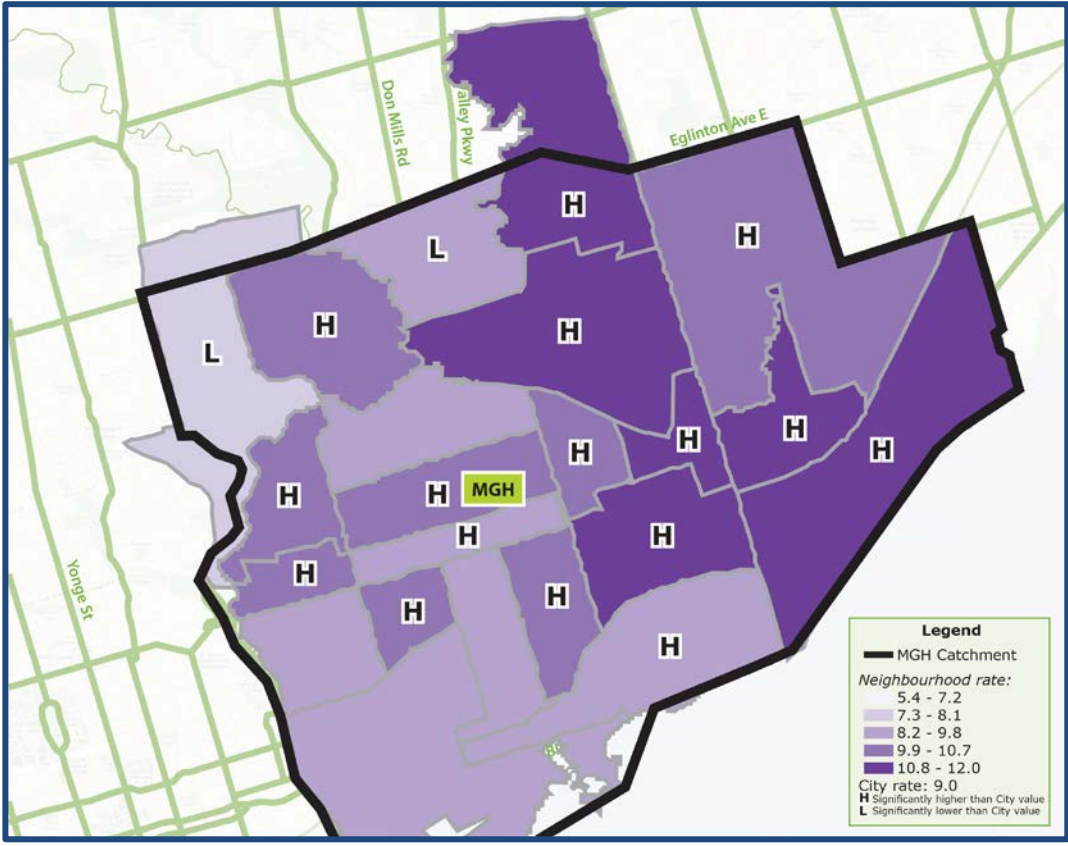
<sup>25</sup> Toronto Central LHIN, *Partners in Action, Delivering Excellent Care for All, Report to the Community 2011/12*, p. 21.

<sup>26</sup> Doan R, Miettinen A, & Doan K: "Won't you be my neighbour? Social determinants of health, mental health admission, and Michael Garron Hospital." Mental Health Grand Rounds, Michael Garron Hospital, Toronto, January 12, 2018.

highest in both these domains out of Toronto's 140 neighbourhoods. Controlling for these and other demographic factors, the strongest associations with increased mental health admissions were residences in need of major repairs, an increase in people living in collective dwellings, higher crime rates, and an increase in people who are single (as opposed to married or living common-law). Therefore, it seems likely that the high population density, low-income households, aging, and sub-standard housing options found in this community could be associated with mental health status.

The *Hospital Care for All* research study showed that the majority of mental health patients cared for at MGH are TC LHIN residents and that the ratio of lowest to highest income for mental health inpatients served by MGH is 3.12, well above the TC LHIN hospital average of 1.64<sup>27</sup>.

**Figure 10: % with Mental Health Visits in MGH Service Area Neighbourhoods, 2015**



**Premature Mortality and Disability**

Premature mortality<sup>28</sup> refers to deaths under 75 years and is a measure that gives more weight to the deaths of younger people, as these deaths are often preventable. It

<sup>27</sup>CRICH (Centre for Research on Inner City Health), *Hospital Care for All. An equity report on differences in household income among patients at Toronto Central Local health Integration Network (TC LHIN) hospitals, 2008-2010*, May 2012, pg.14.

<sup>28</sup> The premature mortality rate is the number of deaths/100,000 persons, age-adjusted to the 1991 Canada Standard population, and is a measure that gives more weight to the death of younger people than to older people as these deaths often preventable. The Age Standardized Mortality Rate is the number of deaths that would occur

is used as an overall indicator of population health, with high premature mortality rates indicating poor health.<sup>29</sup>

Disability/activity limitation rates for those aged 25-64 are considered to be the best indication of disability and long-term physical or mental health conditions that result in difficulties with daily activities and the reduction in the amount or kind of activities an individual can take part in (have lasted or are expected to last six months or more).<sup>30</sup>

Data for both premature mortality and disability has not been published for several years. However, 2006-08 data showed a community with high overall disability rates, greater than the TC LHIN or City averages, as well as high rates of premature mortality. It also showed the most favourable rates for both in the wealthier neighbourhoods, particularly Leaside-Bennington and The Beaches (*Appendix B, Figures B3 & B4*).

In 2008, ischaemic heart disease was the leading cause of premature mortality in 16 of 22 MGH neighbourhoods, followed by lung cancer in the remaining six. Other secondary causes of premature mortality include a variety of cancers, diabetes, cerebrovascular diseases, intentional self-harm, HIV/AIDS and chronic lower respiratory diseases.

## Screening & Prevention

Health prevention can play a key role in reducing or minimizing the impact of disease. However, the uptake of health promotion and screening is often lower for disadvantaged groups.

Screening rates for colorectal cancer, mammograms and Pap smears vary across MGH's neighbourhoods (*Appendix B, Figure B5*) and tend to be lower in the priority neighbourhoods, although some rates have improved over the last four years.

- In 2015, colorectal cancer screening rates are lower than average in most of the community (16 of 22 neighbourhoods) but have improved by nearly 3% since 2011, from 56.7% to 59.5%.
- Colorectal screening rates are particularly low in priority neighbourhoods – for example, 48.1% in Thorncliffe Park compared to the City average of 61.3%, the TC LHIN of 60.3% and catchment area average of 59.5%.
- Pap smear screening rates were at or above average in all neighbourhoods except the five priority neighbourhoods which were all lower than average. The 2015 rates cannot be compared with previous data because of changes in guidelines for frequency of Pap smear screening.

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for a given population if that population had the same age distribution as the 1991 Canadian population. The rate is calculated as number of deaths per 100,000 population.

<sup>29</sup> University of Manitoba, Manitoba Centre for Health Policy, September 26, 2007; <http://mchp-appserv.cpe.umanitoba.ca/viewDefinition.php?definitionID=103380>

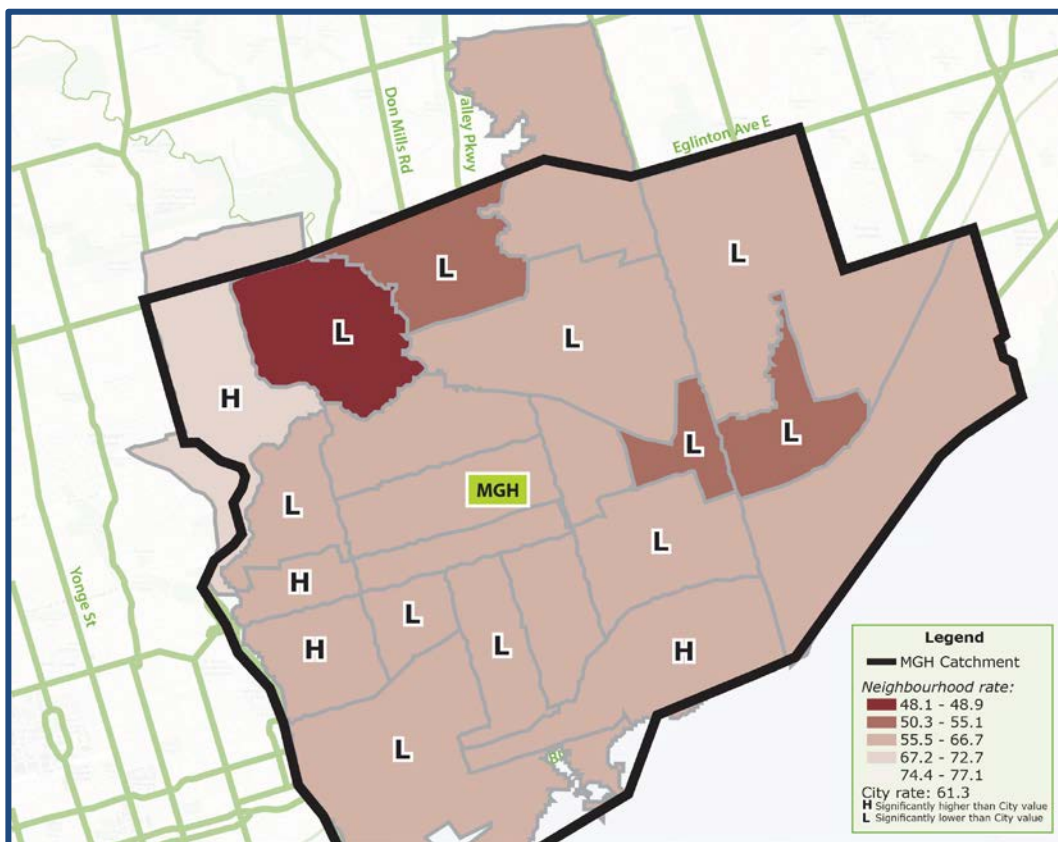
<sup>30</sup> Analysis conducted by Steps to Equity in 2010 recommended that inequalities in "functional health" using the disability/activity difficulties measure (from the 2006 census) would be best determined by using a younger adult age group (age 25-64) where these differences were more attributable to long term physical and mental health conditions rather than to aging-related mobility reductions.



- Mammography screening rates are low in only a few MGH neighbourhoods, particularly the priority neighbourhoods of Flemington Park and Thorncliffe Park where the rates of 53.6% and 52.7% are lower than the catchment overall (60.4%) or that of the City (60.8%) or TC LHIN (59%).
- By and large, wealthier neighbourhoods have much higher screening rates than the rest of the community.

Figure 11 depicts colorectal screening rates in the community, indicating that many neighbourhoods have lower than average rates of screening, with the lowest rates in the more disadvantaged communities and highest in neighbourhoods like Leaside-Bennington, North Riverdale and The Beaches.

**Figure 11: Colorectal Screening Rates in MGH Service Area Neighbourhoods, 2015**



## Children and Families

As demographic data indicates, the MGH service area has high proportions of young children, higher than the City or TC LHIN averages. This has been the case for many years and seems likely to continue given the community's continued high fertility rate<sup>31</sup> (Appendix B, Figure B6).

Fertility rates are high across the community, higher than the City's average in 19 of 22 neighbourhoods. Notably, Thorncliffe Park's fertility rate is 70.4 births per 1,000

<sup>31</sup> Number of births per 1,000 females aged 15-49.



women, compared to the next highest of 58.5 in Oakridge and 52 in Danforth-East York. The City-wide average fertility rate is only 39.7.

Birth statistics are one way in which the populations of priority neighbourhoods contrast with others in the community. Most MGH neighbourhoods have low rates of births to mothers not born in Canada, well below the City average of 34.6% and as low as 12.8% in The Beaches. On the other hand, 75.2% of births in Thorncliffe Park and 63.8% in Flemingdon Park were to mothers not born in Canada. All other priority neighbourhoods also have higher than average rates – much higher than the community's overall average of 34.6%, which is significantly lower than the City average, even with such high rates in priority neighbourhoods

Many patients from the catchment area who come to MGH for maternity care (close to 3,000 births annually) come from these neighbourhoods where a majority of mothers were not born in Canada, potentially impacting the expectations of these families during their birthing experience.

### **Access to Primary Care & Other Healthcare Providers**

Studies indicate that the TC LHIN has the highest percentage of adults without family doctors in the Province and the lowest rate of physicians operating in patient enrolment models (such as family health teams)<sup>32</sup>, which enable greater patient access, enhance navigation and support interprofessional team-based models of care.<sup>33</sup>

A recent Health Quality Ontario report suggests the degree of access to health care in Ontario is not equal for all, fewer recent immigrants have a primary care provider they see regularly, and that immigrants may be less likely than Canadian-born patients to get a same-day response from their provider.<sup>34</sup> This is a significant finding given the immigrant profile of this community; for example, in terms of its implications for non-urgent Emergency visits.

MGH maintains a database of community family physicians to help connect patients with local doctors. In early 2018, this database showed approximately 280 family physicians with community-based practices in the area.<sup>35</sup> Many are concentrated in specific areas, particularly on or near the Danforth and there are very few physicians in some neighbourhoods. A number of the practices are walk-in service only and do not provide comprehensive family medicine care, and many are part-time practitioners, so the number of full-time equivalent physicians is considerably fewer than 280. In addition, few practices are taking new patients (excluding walk-in only).

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<sup>32</sup>Enrolment models refer to patients in organized group practice settings, i.e. not solo practitioners.

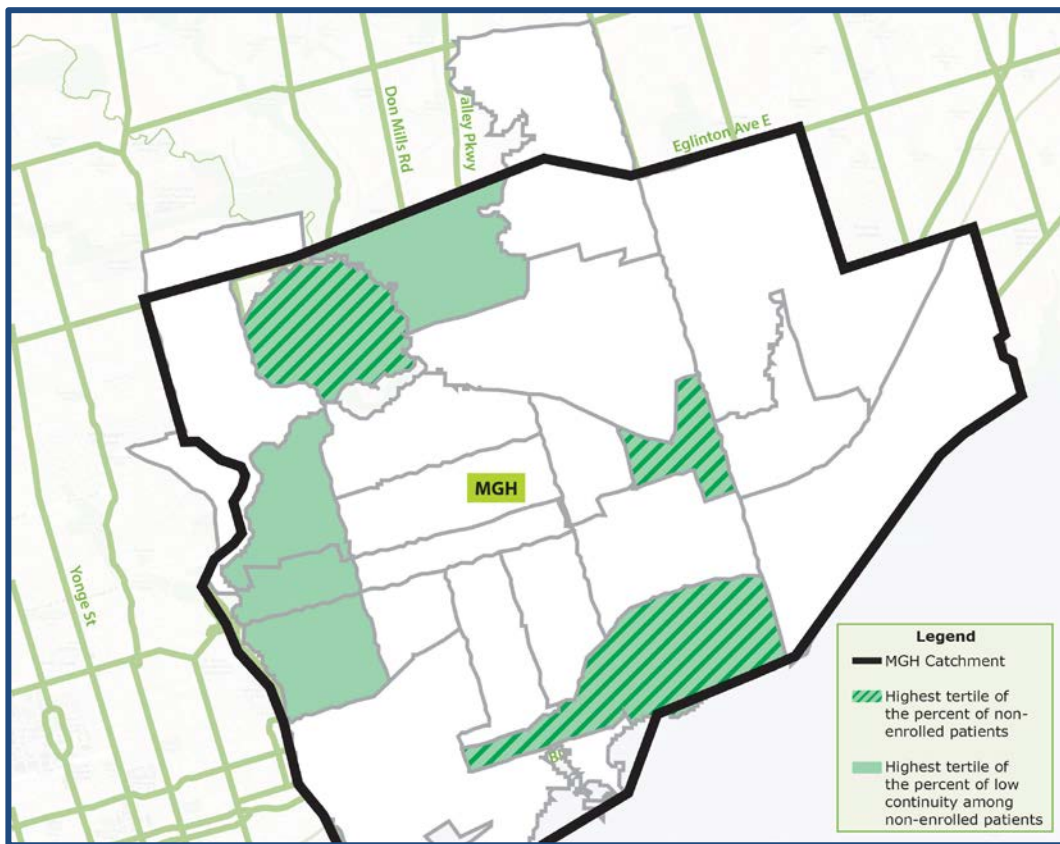
<sup>33</sup>Toronto Central LHIN, *Continuing the Evolution of Primary Care in the Toronto Central LHIN: Our Starting Point*, Interim Report: Findings from Phase 1, September 2012 & Toronto Central LHIN, *Integrated Health Service Plan 2013-16*, Feb 2013, p. 72.

<sup>34</sup> Health Quality Ontario, *Quality in Primary Care: Setting a Foundation for Monitoring and Reporting in Ontario*, 2015, p. 16.

<sup>35</sup> MDMD Phone Line Database, maintained by Michael Garron Hospital on behalf of East Metro Health Group. The data excludes many physicians classified by the CPSO as GPs who are actually “GP specialists” who perform a single service such as sports medicine or psychotherapy, but do not provide comprehensive family practice services.

Appendix C and Figure 12 show primary care enrolment<sup>36</sup> and continuity of care in the area in 2013. This measures the proportion of visits to a patient's most frequent primary care group over three years. Those 'unattached' and with low continuity are more likely to not have a primary care provider and to use walk-in clinics or Emergency when they need care. In the 2013 data, Thorncliffe Park, the Beaches and Taylor-Massey have high percentages of low continuity and non-enrolled primary care patients suggesting access issues for the residents.

**Figure 12: Non-enrolled Patients and Low Continuity in Primary Care, 2013**



It is estimated that at least one-third of the family doctors in MGH's service community are over 50, which is similar to Ontario where in 2008 the College of Physicians and Surgeons indicated that the average age of physicians to be 51.2 years and the median 51.0 years.<sup>37</sup>

In East Toronto about 30% of physicians are in solo (or duo) practices and the vast majority of these are older physicians. Several physicians have retired or moved out of the area each year for the past decade, estimated to be at least 75 in the past 15

<sup>36</sup> Patients enrolled in practices with enrolment models like Family Health Team, Family Health Groups and Community Health Centres.

<sup>37</sup> College of Physicians and Surgeons of Ontario, *2007 Registration Statistics and Survey Findings*, April 2008.

years,<sup>38</sup> but the community does have four Community Health Centres - South Riverdale CHC, Flemingdon, East End CHC and Access Alliance (AccessPoint on the Danforth) – and there have been new developments in primary care in recent years:

- Four family health teams located in or just outside the community in the past decade: the South East Toronto Family Health Team (two locations), Don Mills Family Health Team, Bridgepoint Family Health Team and the Victoria Health Centre.
- Capacity was increased at the Albany Clinic and a number of Family Health Groups have been created.
- A few new solo or small group practices have opened.
- Appletree Clinics and Comprehensive Health Network (CHN) operate in the area. These are clinics managed by a centralized system to handle the administrative side of medicine for groups of physicians.
- Magenta Health, a group practice which also uses a medical clinic management company for administration, opened a large clinic on Queen Street in the South Riverdale area with plans to expand to the Beaches and Leslieville.
- The TC LHIN funded both Health Links and the East Toronto Sub-Region to work with community providers to increase access to comprehensive primary care for complex and underserved patients in this community.

Many individuals, especially isolated seniors and those with complex needs, however continue to have difficulty accessing consistent primary care.

Many other TC LHIN-funded community health and support service agencies within MGH's service community also help to provide care and support for area residents including: eight long-term care providers, 15 community mental health and addiction treatment organizations, 13 community support service agencies and other specialty organizations.<sup>39</sup>

There are also many agencies funded by sources other than the Ministry of Health that make significant contributions to the health and well-being of the populations served by the hospital.<sup>40</sup>

MGH works collaboratively with many of these organizations to enhance care for shared patients in the community, particularly to improve the transition of patients from the hospital to community-based care through *Solutions – East Toronto's Health Collaborative* voluntary network<sup>41</sup>, East Toronto Sub-Region and other partnerships.

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<sup>38</sup> *MDMD Phone Line Database* maintained by the Michael Garron Hospital on behalf of East Metro Health Group.

<sup>39</sup> Adalsteinn Brown, Dalla Lana School of Public Health, *Gain-sharing, risk transfer, and the evolution of health system structure and financing*, Michael Garron Hospital, May 22, 2018 presentation.

<sup>40</sup> For example, the Thorncliffe Neighbourhood Office is a primary service provider offering an Ontario Early Years Centre, counseling, settlement services, language classes, employment assistance services etc. funded by a variety of organizations (Citizenship & Immigrations, Community and Social Services etc.).

<sup>41</sup> For information about Solutions: [www.solutionshealthcollaborative.ca](http://www.solutionshealthcollaborative.ca).







# A Profile of MGH Patients

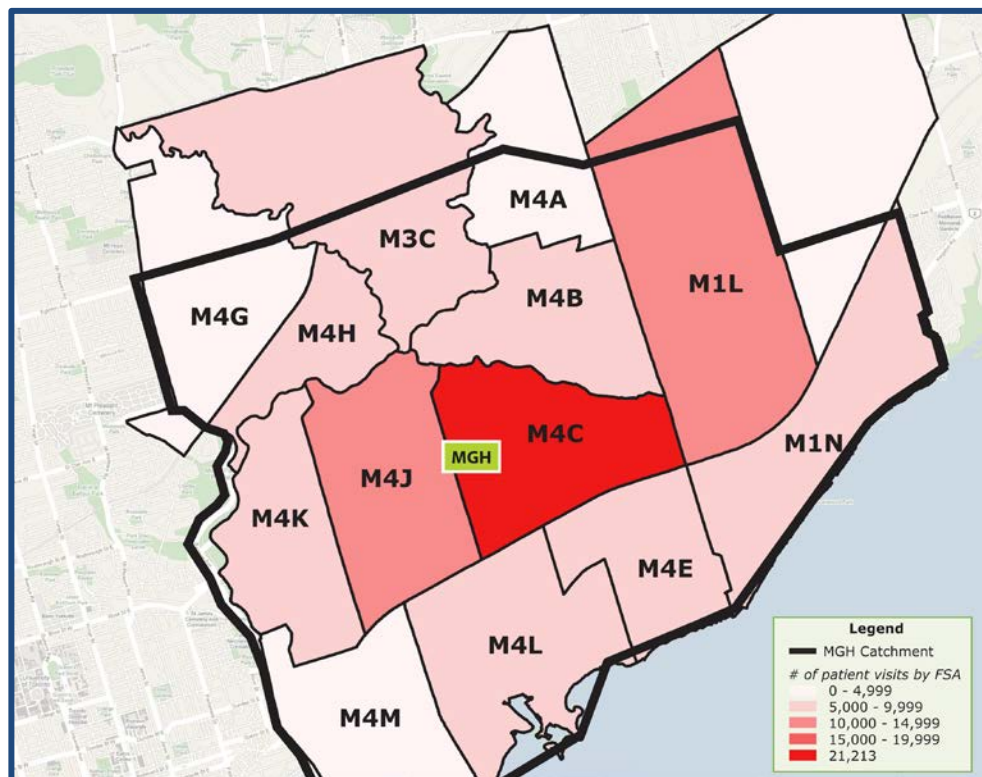
A majority of patients receiving care at MGH reside within the hospital's primary service area. In 2016/17, this varied between 64.2% and 80.2% depending on the service area (*Figure 13*).<sup>42</sup> As a full-service hospital and the only one in the eastern portion of the City, this would be expected. However, local-area patients have trended downward slightly from 2014/15 to 2016/17.

**Figure 13: % of Patients Who Reside in MGH's Primary Service Area**

Year	Emergency	Acute Inpatient	Complex Continuing Care	Mental Health	Paediatrics <sup>43</sup>	Newborn
2014/15	80.1%	68.8%	85.3%	69.1%	75.7%	63.6%
2015/16	78.8%	69.0%	85.5%	70.7%	69.1%	63.9%
2016/17	78.6%	68.6%	80.2%	64.2%	72.5%	65.1%

*Figure 14* shows visits based on the patient's residence<sup>44</sup>, which demonstrates that of the people served who live in the catchment area, the highest volumes are from neighbourhoods closest to the hospital and volumes generally decline with distance.

**Figure 14: Number of Visits by FSA, 2016/17**



<sup>42</sup> Data Source for MGH patient data: Ontario Ministry of Health and Long-Term Care: IntelliHEALTH ONTARIO.

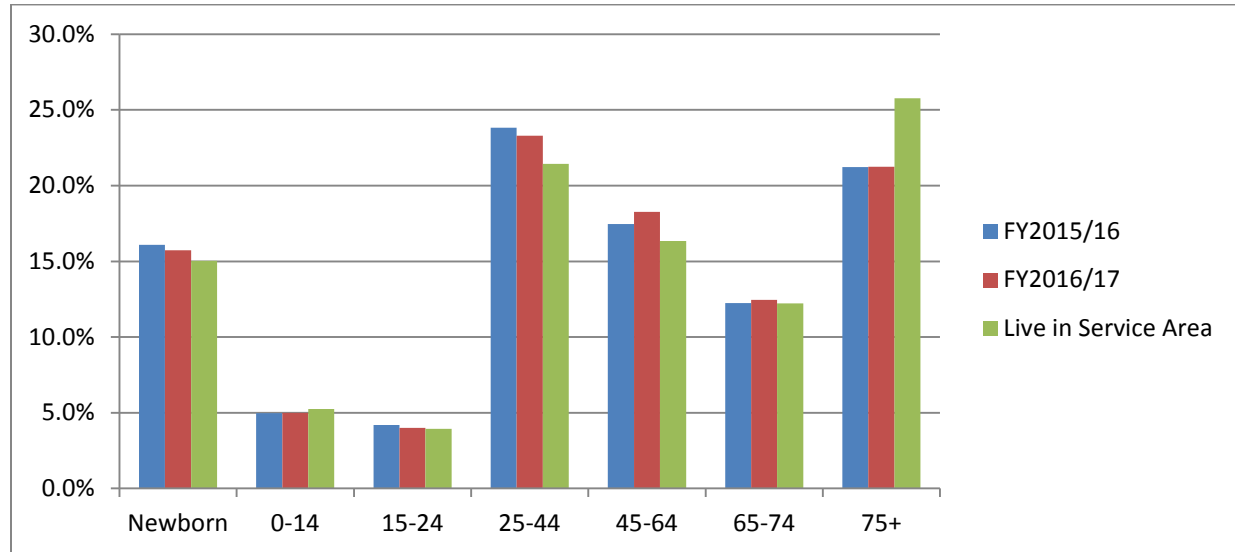
<sup>43</sup> Aged 0-17 excluding newborn.

<sup>44</sup> Calculated by discharges – inpatient, outpatient and Emergency)

## Age

Excluding newborns, the majority of inpatients cared for at MGH are 25 or older; only 9% are under 24. *Figure 15* shows that those aged 25-44 comprise nearly one-quarter of inpatient admissions (23.3%) and this has been fairly consistent for years.

**Figure 15: MGH Acute Inpatients by Age 2015/16 & 2016/17**



Elderly patients (65+) accounted for one-third of inpatients in 2016/17 (33.7%) and closer to 40% of patients who reside in the service area. The proportion of elderly inpatients has been gradually increasing. In fiscal 2012/13, for example, seniors accounted for only 30.4% of total inpatients and in 2016/17 for 33.7% (*Appendix D*).

It is expected that the number of very elderly (75+) will continue to increase. MGH data shows that inpatients over 75 have increased from 19.9% to 21.3% of inpatients cared for over the last four years, a relatively small but significant growth.

These figures highlight a key issue facing MGH; the increasing burden of caring for a growing elderly population

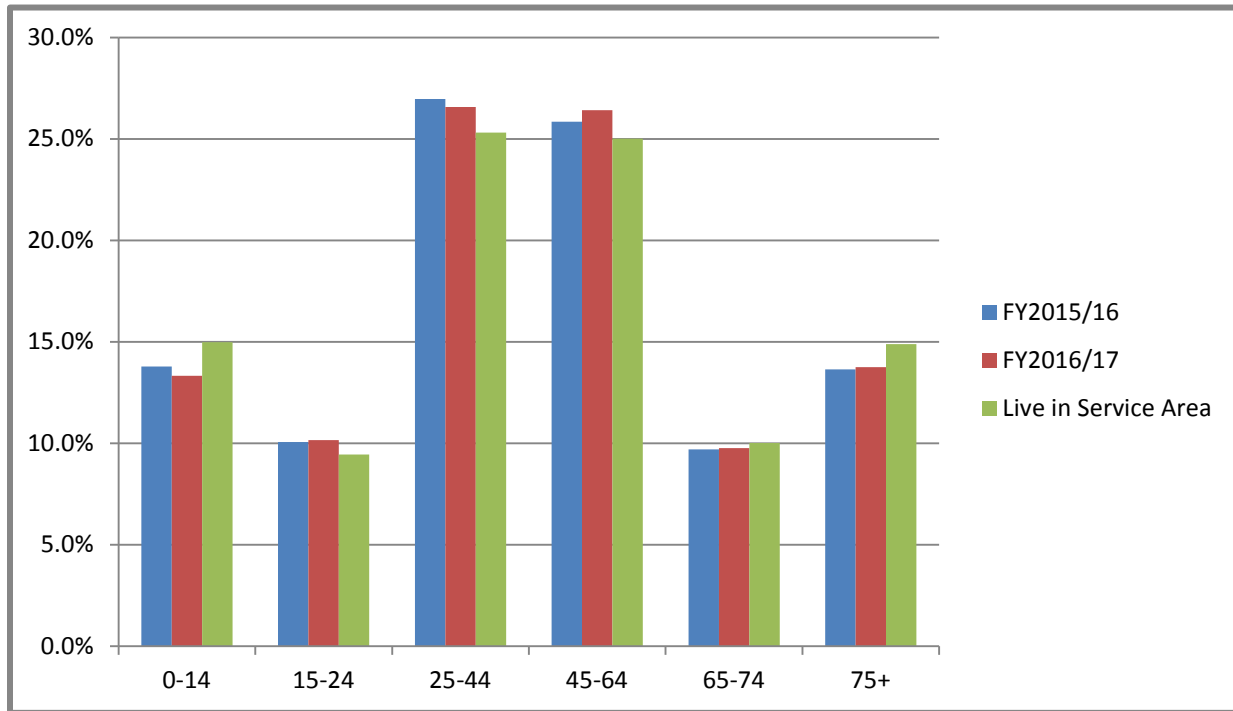
*Figure 16* indicates that nearly one-quarter of MGH's Emergency visits were for children and youth, compared to only 9% of inpatient visits in 2016/17. Adults aged 25-44 and 45-64 each make up approximately one-quarter of Emergency visits.

Seniors (65+) account for just under one-quarter of Emergency visits and have increased as a proportion of total visits between 2012/13 and 2016/17, although only slightly, from 22.4% to 23.6%.

*Appendix D* contains more detailed data on the age trends of MGH patients, both inpatient and Emergency, over five years.



**Figure 16: Emergency Department Patients by Age 2015/16 & 2016/17**



## Gender

MGH serves more females than males (*Figure 17*), except in paediatrics. This has been consistent for many years. The gender difference is slight in most areas, with the exception of acute inpatients, where 61.5% are female and only 38.5% are male, which is almost certainly related to maternity admissions

**Figure 17: MGH Patients (inpatient & Emergency) by Gender 2015/16 & 2016/17**

Year	Emergency		Acute IP		CCC		Mental Health		Paediatrics	
	2015/16	2016/17	2015/16	2016/17	2015/16	2016/17	2015/16	2016/17	2015/16	2016/17
<b>Male</b>	48.0%	48.4%	38.5%	39.2%	43.3%	49.2%	48.4%	50.9%	52.6%	52.8%
<b>Female</b>	52.0%	51.6%	61.5%	60.7%	56.7%	50.8%	51.6%	49.1%	47.4%	47.1%

## Language

MGH's telephone interpretation service provides medical interpretation for patients with limited English and is an excellent indicator of the diversity of the hospital's patients and of changing demographics in the community. In 2017 the line averaged around 80 calls per month. *Figure 18* shows that 46 different languages were requested during 2016 and 2017, clearly demonstrating the community's diversity.

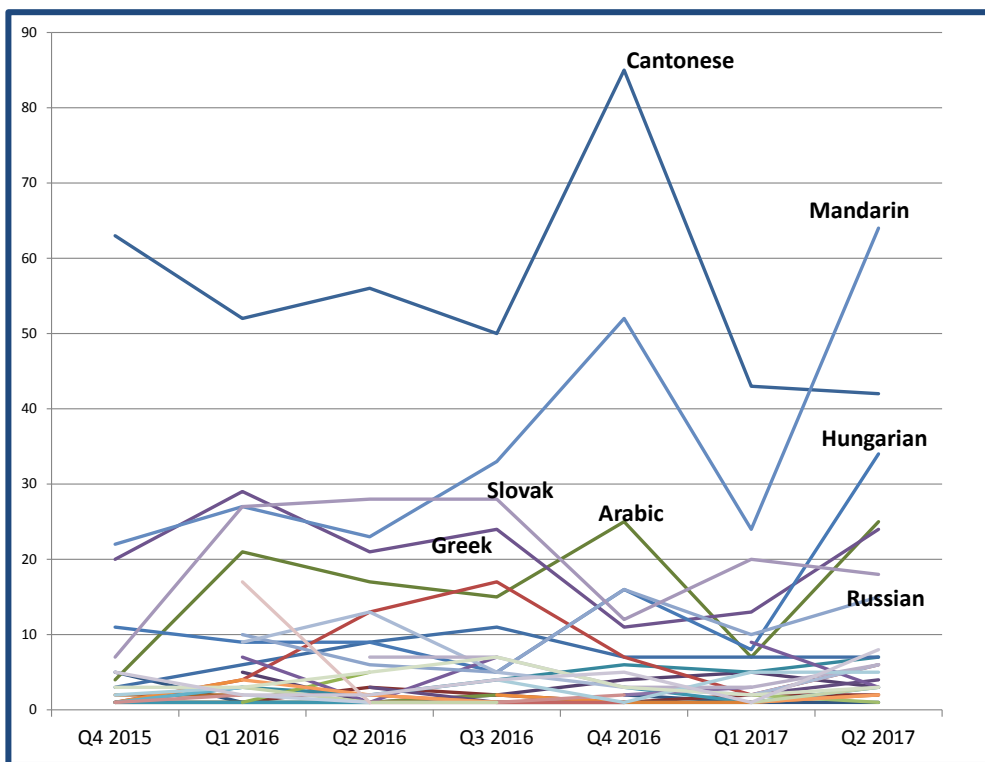


**Figure 18: Telephone Interpretation Service Requested Languages 2016-17**

Albanian	Gujarati	Sinhalese
Amharic	Hindi	Slovak
Arabic	Hungarian	Somali
Bengali	Italian	Sorani
Bosnian	Japanese	Spanish
Bulgarian	Korean	Swahili
Cantonese	Latvian	Tagalog
Chin	Macedonian	Tamil
Croatian	Mandarin	Tigrinya
Czech	Pashto	Toishanese
Dari	Polish	Turkish
Estonian	Portuguese	Ukranian
Farsi	Punjabi	Urdu
French	Romanian	Vietnamese
Fuzhou	Russian	
Greek	Serbian	

Chinese languages (Mandarin and Cantonese) have been most frequently requested since the service was introduced, consistent with census data for the community, TC LHIN and City. Still frequently requested, the proportion compared to all other languages has declined, and from 2015-2017, Slovak, Greek, Arabic, Hungarian and Russian have also been commonly requested (*Figure 19*).

**Figure 19: Use of MGH Language Line by Language**



The need for Greek and Italian interpretation in this community is longstanding but has steadily declined for years. Requests for South Asian languages are less frequent than would be expected based on the community's immigrant profile, but this is consistent with census data on language spoken at home (*Appendix A, Figure A5 & A6*).







# MGH Service Performance

MGH delivers acute generalist care to the complex community described in this report and to the broader region for specific services like thoracic and progressive weaning, contributing to the healthcare system locally and also at the City and Provincial level.

## Expenses and Service Volumes

MGH has the smallest budget of acute care hospitals in the TC LHIN and provides the broadest range of generalist services; one of only three hospitals to provide a full complement of inpatient services including rehab, complex continuing care and significant mental health volumes.

In 2016/17, MGH provided 9.3% of the inpatient activity, 9.2% of acute care activity and 20% of mental health inpatient days of the six hospitals with published data. This care was provided at the lowest inpatient cost per patient day, less than St. Joseph's, the other large community hospital provider in the TC LHIN. Both community hospitals provide care well below the cost per day of the large teaching hospitals (*Figure 20*).

**Figure 20: TC LHIN Acute Care Hospital Activity 2016/17**

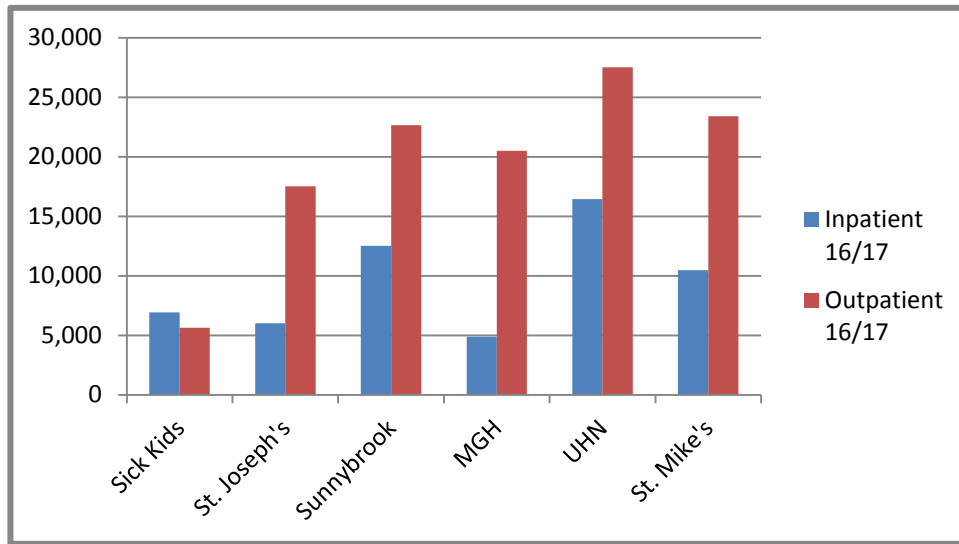
Acute Care Hospital	Inpatient Days						Total Inpatient Days	Inpatient Cost per Patient Day
	Acute	ICU-CCU	Mental Health	Rehab	CCC			
Mount Sinai	n/a	n/a	n/a	n/a	n/a	n/a	n/a	
SickKids	77,799	27,127	-	-	-	104,926	\$1,249	
St Joseph's	122,866	7,228	15,555	-	-	145,649	\$542	
St Michael's	126,972	21,935	11,893	-	-	160,800	\$861	
Sunnybrook	163,229	35,405	11,376	55,823	114,479	380,312	\$595	
MGH	76,324	7,199	12,699	4,407	26,406	127,035	\$509	
UHN	264,696	33,240	10,881	69,942	65,492	444,251	\$695	
Total	831,886	132,134	62,404	130,172	206,377	1,362,973	-	
Average	138,648	22,022	12,481	43,391	68,792	227,162	\$742	

Source: Ministry of Health and Long-Term Care, Health Data Branch, Healthcare Indicator Tool.

MGH also performed substantial volumes of outpatient surgeries in 2016/17; 20,493 or 17.5% of the total performed in the six hospitals; more than St. Joseph's and only slightly fewer than Sunnybrook.

MGH performed fewer inpatient surgeries than the other TC LHIN hospitals (*Figure 21*). Volumes of inpatient surgeries have, however, grown slowly over the years and in 2016/17 MGH performed 382 more inpatient surgical cases than in 2013/14.

**Figure 21: TC LHIN Hospitals Inpatient & Outpatient Surgical Volumes, 2016/17**



Source: Ministry of Health and Long-Term Care, Healthcare Indicator Tool.

### **Ambulatory & Emergency Care**

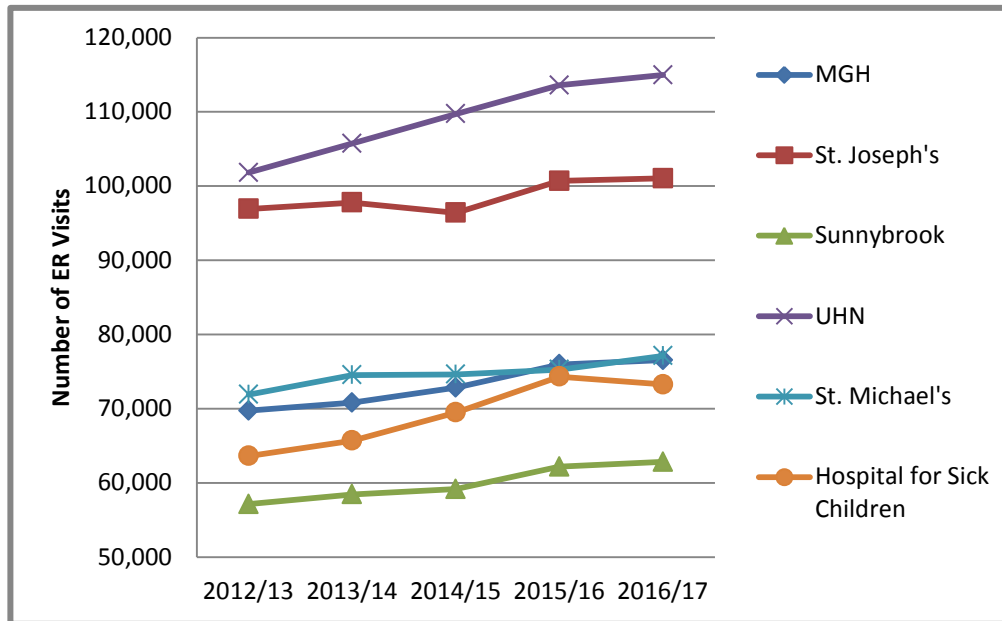
Ambulatory visits have increased steadily from 239,371 in 2009/10 to 268,312 in 2016/17, although MGH's ambulatory visits are the lowest amongst acute care TC LHIN hospitals.

Emergency volumes at MGH are high, comparable to most of the acute care hospitals in the TC LHIN and higher than Sunnybrook (*Figure 22*).

In 2016/17, MGH treated 76,546 people in its Emergency Department, an average of 210/day and an increase of 16/day over four years, an overall increase of 8.2%. One-quarter of these patients arrive by ambulance and 20% (one in five) are considered complex by the Canadian Triage Acuity Score.

As a local community hospital, a majority of inpatient admissions come through Emergency and one in nine patients are admitted.

**Figure 22: TC LHIN Acute Hospital Emergency Visit Trends 2012/13-2016/17**



Source: Ministry of Health and Long-Term Care, Healthcare Indicator Tool.

Alternate Level of Care (ALC) describes patients who are occupying a hospital bed and no longer require acute hospital services, but cannot be discharged while they await a community placement.

ALC rates have been increasing LHIN-wide for years and MGH has high levels of ALC patients. The 2012 *Hospital Care for All* report showed that MGH served more ALC patients from the TC LHIN (and likely from the hospital's own community) than all other TC LHIN hospitals, and that the income profile for ALC patients is generally lower than for the total inpatient population. This led the study's authors to speculate that income is likely a barrier to discharging ALC patients to home and community care.<sup>45</sup>

Given that MGH provides service to an aging population impacted by socioeconomic and equity issues and has few available community providers for long-term and primary care, ALC is likely to be an ongoing issue for the hospital that will require resources and strategies to successfully manage in the coming years.

## Teaching and Research

MGH is an active teaching hospital and plays a unique role as a leader in community-based research.

The role of community hospitals in teaching medical and allied health professionals has increased due to expanding interest in interprofessional education and generalist

<sup>45</sup> CRICH (Centre for Research on Inner City Health), *Hospital Care for All, An equity report on differences in household income among patients at Toronto Central Local Health Integration Network (TC LHIN) hospitals, 2008-2010*, May 2012, pgs. 7 & 11.



learning.<sup>46</sup> MGH was the first community teaching hospital to provide interprofessional education opportunities for health professionals and prides itself on being Ontario's leading community teaching hospital.

Affiliated with the University of Toronto, each year MGH welcomes first year family medicine residents, and provides undergraduate medical clerkship rotations and postgraduate specialty rotations in Anaesthesia, General Surgery, Medicine, Obstetrics and Gynaecology, Orthopaedics, Otolaryngology (Ear, Nose and Throat), Pediatrics, and Psychiatry. MGH also has teaching partnerships with many other organizations; for example, Centennial and George Brown Colleges, the Joint Centre for Bioethics, the Michener Institute and Ryerson and McMaster Universities.

MGH Medical Education is recognized for high student satisfaction scores and has been ranked the #1 choice for family medicine training at community teaching hospitals for a number of years, attracting the brightest medical graduates from Canadian and international medical schools looking for the experience that a busy, urban community hospital can provide.

MGH has conducted over 737 research projects since 1988 and since 2007, a reinvigorated community-based research program has demonstrated a commitment to and growing expertise in patient inspired innovation that makes a practical difference to the health of the local community. In 2017, 119 active studies were undertaken.

The program is an important support for the hospital's medical teaching program and for promoting research that will improve how the hospital care for patients and treats health conditions common to the patients and community it serves.

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<sup>46</sup> The Association of Faculties of Medicine of Canada, *The Future of Medical Education in Canada (FMEC): A Collective Vision for MD Education*, [www.afmc.ca/fmec](http://www.afmc.ca/fmec)







# Conclusion

This report offers an overview of MGH's diverse and unique community, a snapshot of its patient population and its role in providing care in this community, as well as the role it plays at the system level.

Given the demographics and health-related information, it is clear that MGH serves an area that is arguably the most diverse in the City and perhaps the country. Differences between neighbourhoods – rich/poor, young/old, newcomers/Canadian-born, language and health status – enhance the complexities of service planning and point to a continued need for interventions to reduce inequities, especially in the priority improvement neighbourhoods.

# Appendix A: Demographic Profile of the MGH Community

A1: Population by Age Group, 2011 & 2016

Neighbourhood	Total		Age 0-14		Age 15-24		Age 25-44		Age 45-64		Age 65-74		Age 75+	
	2011	2016	2011	2016	2011	2016	2011	2016	2011	2016	2011	2016	2011	2016
43 - Victoria Village	17170	17510	<b>15.9%</b>	<b>15.0%</b>	11.0%	11.6%	28.3%	26.5%	26.3%	<b>27.4%</b>	<b>8.4%</b>	<b>9.2%</b>	<b>10.0%</b>	<b>10.3%</b>
44- Flemington Park	22170	21933	<b>20.1%</b>	<b>20.0%</b>	<b>13.9%</b>	<b>14.0%</b>	29.3%	28.5%	24.5%	24.0%	6.8%	7.8%	5.3%	5.8%
54 - O'Connor-Parkview	18320	18675	<b>17.4%</b>	<b>16.7%</b>	12.6%	<b>12.8%</b>	26.6%	26.1%	<b>29.6%</b>	<b>30.2%</b>	7.0%	7.8%	6.7%	6.6%
55 - Thorncliffe Park	19235	21108	<b>26.4%</b>	<b>26.5%</b>	11.5%	11.6%	<b>32.8%</b>	<b>30.8%</b>	19.1%	19.9%	5.1%	5.4%	5.1%	5.8%
56 - Leaside-Bennington	17015	16828	<b>20.1%</b>	<b>19.5%</b>	12.0%	<b>12.9%</b>	22.5%	20.1%	<b>29.6%</b>	<b>32.1%</b>	7.0%	<b>8.6%</b>	<b>8.8%</b>	6.5%
57- Broadview North	11560	11499	13.7%	12.8%	9.8%	9.0%	<b>35.0%</b>	<b>33.6%</b>	<b>28.1%</b>	<b>28.3%</b>	7.2%	<b>9.1%</b>	6.2%	7.0%
58 - Old East York	9115	9233	15.0%	<b>15.9%</b>	10.0%	9.9%	27.5%	25.8%	<b>32.2%</b>	<b>31.7%</b>	<b>7.6%</b>	<b>8.9%</b>	<b>7.7%</b>	7.4%
59 - Danforth-East York	16725	17180	<b>15.6%</b>	<b>17.6%</b>	9.2%	8.4%	<b>32.3%</b>	30.4%	<b>28.7%</b>	<b>28.1%</b>	7.2%	<b>8.4%</b>	<b>7.1%</b>	7.1%
60 - Woodbine-Lumsden	7835	7865	13.7%	<b>14.8%</b>	9.8%	8.6%	<b>31.0%</b>	<b>31.6%</b>	<b>31.9%</b>	<b>31.2%</b>	<b>7.5%</b>	8.0%	6.1%	5.9%
61 - Taylor-Massey	15595	15683	<b>19.5%</b>	<b>18.8%</b>	11.3%	10.8%	<b>34.2%</b>	<b>34.2%</b>	24.7%	25.3%	5.1%	5.6%	5.2%	5.3%
62 - East End-Danforth	20840	21381	<b>17.0%</b>	<b>17.5%</b>	10.7%	10.3%	<b>31.9%</b>	29.9%	<b>29.8%</b>	<b>29.9%</b>	5.8%	7.6%	4.7%	4.8%
63 – The Beaches	21125	21567	<b>17.5%</b>	<b>17.7%</b>	10.0%	9.6%	30.0%	27.2%	<b>31.6%</b>	<b>31.8%</b>	6.7%	<b>9.2%</b>	4.3%	4.5%
64 - Woodbine Corridor	11705	12541	<b>17.4%</b>	<b>18.5%</b>	9.6%	8.3%	<b>34.4%</b>	<b>32.6%</b>	<b>29.6%</b>	<b>29.5%</b>	5.0%	6.5%	4.0%	4.5%
65 -Greenwood-Coxwell	14085	14417	15.3%	<b>17.1%</b>	10.6%	9.1%	<b>34.7%</b>	<b>35.1%</b>	<b>28.1%</b>	<b>27.4%</b>	6.1%	6.3%	5.2%	5.0%
66 - Danforth	9440	9666	<b>16.3%</b>	<b>17.3%</b>	10.8%	9.5%	<b>31.6%</b>	<b>30.9%</b>	<b>27.1%</b>	26.6%	<b>7.8%</b>	<b>8.9%</b>	6.6%	6.7%
67- Playter Estates-Danforth	7665	7804	14.8%	<b>14.7%</b>	9.5%	9.4%	<b>32.7%</b>	<b>32.4%</b>	<b>29.0%</b>	<b>27.8%</b>	7.0%	<b>8.5%</b>	6.9%	7.2%
68 - North Riverdale	12190	11916	15.6%	<b>16.4%</b>	10.0%	9.8%	<b>31.0%</b>	28.8%	<b>31.5%</b>	<b>31.1%</b>	7.0%	<b>8.6%</b>	5.0%	5.3%
69 - Blake-Jones	7770	7727	<b>17.5%</b>	<b>18.2%</b>	12.2%	11.5%	<b>32.6%</b>	<b>31.3%</b>	<b>27.2%</b>	<b>27.6%</b>	5.9%	6.8%	4.8%	4.7%
70 - South Riverdale	25655	27876	13.4%	14.3%	10.6%	8.8%	<b>37.7%</b>	<b>38.3%</b>	<b>27.3%</b>	26.7%	5.5%	6.7%	5.5%	5.2%
120 -Clairlea-Birchmount	24760	26984	<b>17.1%</b>	<b>16.9%</b>	12.7%	<b>13.0%</b>	29.5%	28.0%	<b>27.9%</b>	<b>28.7%</b>	5.8%	7.0%	7.0%	6.4%
121 - Oakridge	13505	13845	<b>21.3%</b>	<b>20.7%</b>	12.3%	12.1%	30.4%	29.1%	25.0%	26.1%	5.7%	6.5%	5.3%	5.3%
122 -Birchcliffe-Cliffside	21835	22291	14.7%	<b>15.0%</b>	11.7%	10.9%	24.4%	23.7%	<b>34.1%</b>	<b>32.8%</b>	<b>7.6%</b>	<b>9.9%</b>	<b>7.5%</b>	<b>7.7%</b>
MGH Neighbourhood*	345315	355529	<b>17.3%</b>	<b>17.5%</b>	11.2%	10.8%	<b>30.8%</b>	29.6%	<b>28.1%</b>	<b>28.2%</b>	6.5%	7.7%	6.1%	6.1%
City of Toronto	2614855	2731570	15.3%	14.6%	12.8%	12.5%	30.6%	30.6%	26.9%	26.7%	7.2%	8.2%	7.2%	7.4%
TC LHIN	1190610	1231125	14.0%	14.4%	11.8%	12.1%	34.6%	36.8%	26.5%	27.2%	6.7%	8.2%	6.4%	6.8%

Data Source: Statistics Canada, 2011 & 2016 Census of Population.

\*MGH neighbourhood: Total of the 22 neighbourhoods in the service area.  
Numbers are bolded if higher than the City of Toronto rate.

## A2: A Profile of Seniors Aged 65+, 2011 & 2016

Neighbourhood	% Seniors		Males		Females		% Living Alone	% Low-income (below LIM* After Tax)
	2011	2016	2011	2016	2011	2016	2011	2011
43 - Victoria Village	<b>18.4%</b>	<b>19.5%</b>	38.8%	38.5%	<b>61.2%</b>	<b>61.4%</b>	<b>34.3%</b>	<b>16.1%</b>
44- Flemingdon Park	12.1%	13.6%	<b>43.3%</b>	<b>43.3%</b>	56.7%	56.7%	<b>29.0%</b>	<b>12.3%</b>
54 - O'Connor-Parkview	13.7%	14.4%	41.2%	<b>43.5%</b>	<b>58.8%</b>	<b>56.9%</b>	<b>28.9%</b>	6.1%
55 - Thorncliffe Park	10.2%	11.2%	37.9%	39.3%	<b>62.1%</b>	<b>60.9%</b>	<b>41.4%</b>	<b>24.7%</b>
56 - Leaside-Bennington	<b>15.8%</b>	15.1%	<b>46.1%</b>	43.1%	53.9%	<b>57.1%</b>	<b>34.2%</b>	1.6%
57- Broadview North	13.4%	<b>16.1%</b>	<b>43.0%</b>	<b>43.7%</b>	57.0%	56.0%	<b>36.5%</b>	<b>19.0%</b>
58 - Old East York	<b>15.3%</b>	<b>16.3%</b>	<b>43.8%</b>	<b>44.7%</b>	56.2%	54.6%	<b>28.4%</b>	4.6%
59 - Danforth-East York	<b>14.3%</b>	15.5%	42.5%	<b>44.1%</b>	<b>57.5%</b>	55.9%	<b>29.2%</b>	<b>16.0%</b>
60 - Woodbine-Lumsden	13.6%	13.9%	<b>45.8%</b>	<b>46.6%</b>	54.2%	53.0%	<b>34.1%</b>	<b>21.5%</b>
61 - Taylor-Massey	10.3%	10.9%	39.4%	41.3%	<b>60.6%</b>	<b>58.7%</b>	<b>33.8%</b>	<b>12.9%</b>
62 - East End-Danforth	10.5%	12.4%	42.3%	<b>44.0%</b>	<b>57.7%</b>	55.7%	<b>42.4%</b>	<b>15.2%</b>
63 – The Beaches	11.0%	13.7%	<b>44.2%</b>	<b>45.2%</b>	55.8%	54.5%	<b>32.9%</b>	4.7%
64 - Woodbine Corridor	9.0%	11.0%	42.8%	<b>43.5%</b>	57.2%	<b>57.6%</b>	<b>33.7%</b>	<b>10.2%</b>
65 - Greenwood-Coxwell	11.3%	11.3%	<b>43.8%</b>	<b>43.6%</b>	56.2%	56.4%	<b>33.2%</b>	<b>17.4%</b>
66 - Danforth	<b>14.4%</b>	15.6%	<b>48.7%</b>	<b>50.2%</b>	51.3%	49.8%	<b>35.5%</b>	<b>17.4%</b>
67 - Playter Estates-Danforth	13.9%	<b>15.7%</b>	42.7%	<b>45.5%</b>	57.3%	54.9%	<b>34.7%</b>	<b>24.4%</b>
68 - North Riverdale	12.0%	13.9%	<b>42.8%</b>	<b>45.2%</b>	57.2%	54.5%	<b>27.2%</b>	7.3%
69 - Blake-Jones	10.7%	11.5%	<b>44.4%</b>	<b>43.6%</b>	55.6%	55.3%	<b>30.2%</b>	<b>20.7%</b>
70 - South Riverdale	11.0%	11.9%	<b>46.1%</b>	<b>47.7%</b>	53.9%	52.6%	26.8%	8.1%
120 -Clairlea-Birchmount	12.8%	13.4%	41.8%	42.1%	<b>58.2%</b>	<b>57.6%</b>	20.1%	4.2%
121 - Oakridge	11.0%	11.8%	40.7%	39.0%	<b>59.3%</b>	<b>60.7%</b>	<b>38.7%</b>	<b>20.4%</b>
122 -Birchcliffe-Cliffside	<b>15.1%</b>	<b>17.6%</b>	42.2%	43.2%	<b>57.8%</b>	56.6%	<b>30.5%</b>	<b>10.8%</b>
MGH Neighbourhood**	12.6%	13.8%	42.7%	<b>43.4%</b>	57.3%	56.5%	<b>32.0%</b>	<b>12.4%</b>
City of Toronto	14.2%	15.6%	42.7%	43.2%	57.3%	56.8%	26.8%	8.4%
TC LHIN	13.1%	15.0%	42.5%	<b>43.3%</b>	<b>57.5%</b>	56.7%	33.8%	11.9%

Data Source: Canadian Council on Social Development & Statistics Canada.

Numbers are bolded if higher than the City of Toronto rate.

\*MGH neighbourhood: Total of the 22 neighbourhoods in the service area.

\*LIM - Low Income Measure – see definition next page.



### A3: Prevalence of Low Income, 2011 & 2016

Neighbourhood	2011 % Low-income (LIM*) After Tax	2016 % Low-income (LIM*) After Tax	2011 % Low-income (LICO**) After Tax	2016 % Low-income (LICO**) After Tax
43 - Victoria Village	<b>22.7%</b>	<b>26.0%</b>	<b>20.7%</b>	<b>20.3%</b>
44- Flemingdon Park	<b>30.5%</b>	<b>35.8%</b>	<b>25.9%</b>	<b>28.3%</b>
54 - O'Connor-Parkview	<b>20.5%</b>	<b>22.6%</b>	<b>18.3%</b>	<b>20.2%</b>
55 - Thorncliffe Park	<b>39.1%</b>	<b>45.5%</b>	<b>33.0%</b>	<b>36.2%</b>
56 - Leaside-Bennington	7.0%	6.7%	6.7%	5.6%
57- Broadview North	<b>24.2%</b>	<b>22.1%</b>	<b>21.0%</b>	<b>18.1%</b>
58 - Old East York	11.8%	13.0%	11.4%	11.2%
59 - Danforth-East York	13.2%	13.2%	11.1%	10.8%
60 - Woodbine-Lumsden	<b>16.2%</b>	15.8%	12.9%	13.9%
61 - Taylor-Massey	<b>35.0%</b>	<b>32.4%</b>	<b>32.6%</b>	<b>26.9%</b>
62 - East End-Danforth	<b>16.8%</b>	<b>19.7%</b>	<b>16.1%</b>	<b>17.4%</b>
63 – The Beaches	9.2%	8.6%	8.4%	7.5%
64 - Woodbine Corridor	<b>15.0%</b>	15.9%	13.3%	14.0%
65 - Greenwood-Coxwell	<b>18.6%</b>	<b>19.7%</b>	<b>18.6%</b>	<b>17.6%</b>
66 - Danforth	14.2%	13.5%	<b>13.8%</b>	12.9%
67 - Playter Estates-Danforth	12.3%	13.5%	13.1%	12.6%
68 - North Riverdale	12.4%	10.9%	12.7%	10.4%
69 - Blake-Jones	<b>24.4%</b>	<b>23.3%</b>	<b>23.0%</b>	<b>20.2%</b>
70 - South Riverdale	<b>17.6%</b>	17.1%	<b>17.7%</b>	16.4%
120 -Clairlea-Birchmount	<b>19.0%</b>	18.3%	<b>18.6%</b>	15.2%
121 - Oakridge	<b>40.4%</b>	<b>44.5%</b>	<b>36.3%</b>	<b>36.4%</b>
122 -Birchcliffe-Cliffside	14.7%	19.3%	12.7%	<b>17.1%</b>
MGH Neighbourhood***	<b>20.1%</b>	<b>20.4%</b>	<b>18.4%</b>	<b>17.4%</b>
City of Toronto	14.9%	19.6%	13.5%	17.0%
TC LHIN	18.6%	18.3%	17.9%	16.7%

Data Source: Canadian Council on Social Development (2011) and Statistics Canada (2016). Data collection methodologies were different in 2011 vs 2016. 2011 was based on the National Household Survey (NHS) with 30% sample data; in 2016 it is for 100% Statistics Canada data.

\*LIM - Low Income Measure. The LIM is a fixed percentage (50%) of median adjusted household income, where "adjusted" indicates that household needs are taken into account.

\*\* LICO - Low Income cut-off. LICOs are income thresholds below which a family will likely devote a larger share of its income on the necessities of food, shelter and clothing than the average family.

\*\*\*MGH neighbourhood: Total of the 22 neighbourhoods in the service area.

Numbers are bolded if they are higher than the City of Toronto rate.

#### A4: Education 2006, 2011 & 2016

Neighbourhood	% with no certificate, diploma or degree*			% of University certificate, diploma or degree at bachelor level or above		
	2006**	2011	2016	2006	2011	2016
43 - Victoria Village	<b>20.5%</b>	<b>22.0%</b>	<b>19.1%</b>	<b>17.2%</b>	<b>37.8%</b>	<b>21.5%</b>
44- Flemingdon Park	15.8%	<b>24.3%</b>	<b>20.7%</b>	23.6%	<b>38.7%</b>	<b>22.4%</b>
54 -O'Connor-Parkview	<b>19.7%</b>	<b>22.8%</b>	<b>19.9%</b>	<b>20.2%</b>	<b>35.3%</b>	<b>21.2%</b>
55 - Thorncliffe Park	16.2%	<b>19.9%</b>	<b>19.1%</b>	24.9%	45.7%	<b>24.3%</b>
56 - Leaside-Bennington	5.6%	8.0%	7.1%	40.5%	73.6%	45.5%
57- Broadview North	16.9%	<b>23.5%</b>	<b>18.6%</b>	<b>19.2%</b>	49.5%	<b>30.5%</b>
58 - Old East York	<b>20.3%</b>	<b>18.3%</b>	<b>17.7%</b>	<b>20.5%</b>	47.1%	<b>26.4%</b>
59 - Danforth-East York	<b>24.3%</b>	<b>21.8%</b>	15.5%	<b>22.5%</b>	51.7%	30.6%
60 - Woodbine-Lumsden	<b>22.8%</b>	<b>20.7%</b>	<b>19.7%</b>	<b>15.4%</b>	<b>40.9%</b>	<b>28.5%</b>
61 - Taylor-Massey	15.8%	<b>20.9%</b>	<b>18.4%</b>	<b>21.7%</b>	50.3%	<b>28.9%</b>
62 - East End-Danforth	15.3%	<b>17.0%</b>	15.2%	24.5%	58.6%	32.1%
63 - The Beaches	6.6%	9.1%	10.7%	35.5%	76.8%	42.8%
64 - Woodbine Corridor	15.6%	<b>17.1%</b>	15.0%	26.0%	55.9%	33.7%
65 - Greenwood-Coxwell	<b>23.7%</b>	<b>26.7%</b>	<b>18.4%</b>	<b>18.7%</b>	48.3%	31.8%
66 - Danforth	<b>25.0%</b>	<b>22.4%</b>	15.0%	<b>22.5%</b>	62.0%	34.1%
67 - Playter Estates-Danforth	11.1%	12.1%	10.2%	32.0%	73.3%	43.3%
68 - North Riverdale	13.2%	13.8%	11.3%	34.0%	76.8%	43.5%
69 - Blake-Jones	<b>21.2%</b>	<b>26.8%</b>	16.4%	23.1%	54.0%	31.5%
70 - South Riverdale	<b>26.4%</b>	<b>25.6%</b>	<b>19.1%</b>	<b>21.6%</b>	56.9%	33.8%
120 -Clairlea-Birchmount	<b>22.5%</b>	<b>22.0%</b>	<b>20.3%</b>	<b>16.3%</b>	<b>37.8%</b>	<b>21.3%</b>
121 - Oakridge	<b>20.9%</b>	<b>26.1%</b>	<b>22.2%</b>	<b>16.8%</b>	<b>34.5%</b>	<b>21.3%</b>
122 -Birchcliffe-Cliffside	<b>18.2%</b>	<b>19.9%</b>	<b>19.7%</b>	<b>17.6%</b>	<b>40.6%</b>	<b>23.2%</b>
MGH Neighbourhood***	<b>18.0%</b>	<b>20.1%</b>	17.1%	23.3%	51.2%	<b>29.8%</b>
City of Toronto	17.8%	15.8%	17.5%	23.1%	41.0%	30.6%
TC LHIN	16.4%	17.6%	15.9%	26.4%	59.6%	39.6%

Data Source: Statistics Canada & Canadian Council on Social Development.

Please note: Changes in data collection and reporting between census years means that education data is not exactly comparable between years.

\*No high school diploma

\*\*Aged 25 years and above

\*\*\*MGH neighbourhood: Total of the 22 neighbourhoods in the service area.

Numbers are bolded: 1) if higher than the City rate for no high school/diploma; 2) if lower than the City rate for % with University Degree

### A5: Ethnic and Racial Diversity, 2011 & 2016

Neighbourhood	Total % Immigrants		% Recent Immigrants (< 5 years)		Top Country of Recent Immigration		% with Aboriginal Identity		% in Racialized Groups	
	2011	2016	2011	2016	2011	2016	2011	2016	2011	2016
43 - Victoria Village	<b>52.5%</b>	<b>52.5%</b>	<b>9.3%</b>	<b>9.7%</b>	Philippines	Syria	1.3%	1.4%	<b>54.7%</b>	<b>58.0%</b>
44- Flemingdon Park	<b>63.9%</b>	<b>64.0%</b>	<b>13.8%</b>	<b>12.7%</b>	India	Philippines	0.5%	0.4%	<b>77.2%</b>	<b>78.5%</b>
54 -O'Connor-Parkview	<b>36.4%</b>	36.9%	<b>7.1%</b>	6.7%	Bangladesh	Philippines	<b>1.8%</b>	<b>2.0%</b>	<b>35.0%</b>	37.3%
55 - Thorncliffe Park	<b>64.8%</b>	<b>63.6%</b>	<b>21.7%</b>	<b>18.6%</b>	Pakistan	Pakistan	0.2%	0.5%	<b>76.8%</b>	<b>79.1%</b>
56 - Leaside-Bennington	18.8%	20.0%	2.2%	2.1%	United States	United States	0.4%	<b>0.9%</b>	12.8%	17.4%
57- Broadview North	<b>45.4%</b>	41.7%	<b>9.0%</b>	5.9%	Philippines	Philippines	<b>1.1%</b>	<b>1.3%</b>	22.7%	27.3%
58 - Old East York	<b>35.9%</b>	32.7%	2.4%	3.5%	Philippines	Philippines	<b>1.4%</b>	<b>1.4%</b>	25.4%	26.7%
59 - Danforth-East York	34.2%	32.4%	2.5%	2.4%	China	Philippines	<b>1.4%</b>	<b>1.5%</b>	26.2%	29.6%
60 - Woodbine-Lumsden	32.5%	27.8%	2.0%	1.7%	Pakistan	Philippines	<b>2.5%</b>	<b>2.4%</b>	30.0%	30.9%
61 - Taylor-Massey	<b>55.7%</b>	<b>55.5%</b>	<b>20.3%</b>	<b>15.9%</b>	Bangladesh	Bangladesh	<b>1.8%</b>	<b>1.4%</b>	<b>64.1%</b>	<b>66.0%</b>
62 - East End-Danforth	27.0%	27.7%	5.2%	4.7%	Philippines	Bangladesh	<b>2.3%</b>	<b>2.1%</b>	28.1%	30.3%
63 – The Beaches	19.2%	19.6%	2.4%	1.8%	U.K.	U. K.	<b>1.3%</b>	<b>1.4%</b>	10.6%	13.8%
64 - Woodbine Corridor	27.0%	23.4%	2.2%	2.1%	China	United States	<b>2.0%</b>	<b>2.2%</b>	25.8%	27.0%
65 -Greenwood-Coxwell	<b>36.0%</b>	30.4%	3.8%	2.3%	India	China	<b>1.6%</b>	<b>2.4%</b>	<b>41.4%</b>	39.0%
66 - Danforth	31.4%	29.6%	1.7%	2.4%	Philippines	Australia	0.6%	<b>1.6%</b>	25.5%	25.7%
67- Playter Estates-Danforth	26.4%	23.0%	2.3%	3.0%	United States	U.K.	<b>1.5%</b>	<b>1.0%</b>	17.2%	20.0%
68 - North Riverdale	26.1%	24.5%	2.1%	1.6%	China	United States	<b>1.0%</b>	0.8%	23.3%	23.6%
69 - Blake-Jones	<b>34.9%</b>	31.3%	4.8%	2.7%	China	United States	<b>1.1%</b>	<b>3.1%</b>	<b>36.4%</b>	38.3%
70 - South Riverdale	<b>36.0%</b>	29.5%	4.5%	2.9%	China	China	<b>1.9%</b>	<b>1.8%</b>	<b>44.4%</b>	40.3%
120 -Clairlea-Birchmount	<b>48.4%</b>	<b>48.6%</b>	<b>8.5%</b>	6.7%	Philippines	Philippines	0.4%	<b>1.3%</b>	<b>54.1%</b>	<b>59.7%</b>
121 - Oakridge	<b>57.4%</b>	<b>54.3%</b>	<b>19.1%</b>	<b>12.7%</b>	Bangladesh	Bangladesh	<b>1.1%</b>	<b>1.7%</b>	<b>67.5%</b>	<b>74.0%</b>
122 -Birchcliffe-Cliffside	25.4%	27.3%	2.3%	2.2%	Bangladesh	Philippines	<b>1.5%</b>	<b>1.8%</b>	20.3%	25.7%
MGH Neighbourhood*	<b>38.9%</b>	37.5%	<b>7.3%</b>	6.1%	Bangladesh	Bangladesh	<b>1.3%</b>	<b>1.5%</b>	<b>39.4%</b>	41.9%
City of Toronto	34.7%	46.3%	6.2%	6.9%	India	Philippines	0.6%	0.8%	32.2%	50.7%
TC LHIN	<b>37.1%</b>	38.2%	<b>6.5%</b>	5.7%	Philippines	Philippines	<b>0.9%</b>	<b>1.2%</b>	32.4%	37.6%

Data Source: Canadian Council on Social Development. & Statistics Canada.

Numbers are bolded if higher than the City of Toronto rate.

\*MGH neighbourhood: Total of the 22 neighbourhoods in the service area.



### A6: Racialized Groups, Language & Immigration – Total MGH Area, City & TC LHIN – 2006 & 2011

	Total MGH Area		TC LHIN		City of Toronto	
	2006	2011	2006	2011	2006	2011
% in Racialized Groups	39.0%	39.4%	32.4%	32.4%	46.9%	32.2%
Chinese	9.3%	17.1%	7.6%	14.1%	11.4%	12.1%
South Asian	13.5%	13.8%	7.0%	6.9%	12.2%	7.0%
African/Caribbean/Black:	5.7%	13.8%	6.0%	13.2%	8.4%	14.1%
West Asian/Arab	2.0%	2.5%	1.5%	1.8%	2.6%	2.0%
Top 5 countries of recent immigration	<b>Pakistan</b>	<b>Bangladesh</b>	<b>China</b>	Philippines	<b>China</b>	Philippines
	<b>China</b>	Pakistan	Pakistan	China	<b>India</b>	India
	<b>Bangladesh</b>	Philippines	Philippines	India	Philippines	China
	India	India	India	Bangladesh	Pakistan	Iran
Bold if >1% of the population	Philippines	China	Bangladesh	Pakistan	Sri Lanka	Bangladesh
% No Knowledge English or French	4.6%	4.8%	4.5%	4.2%	5.2%	5.3%
Top home languages (other than English). Bold is spoken by >2% of the population*	<b>Chinese</b>	<b>Chinese</b>	<b>Chinese</b>	<b>Chinese</b>	<b>Chinese</b>	<b>Chinese</b>
	<b>Urdu</b> Greek Bengali Tagalog	<b>Urdu</b> <b>Bengali</b> Greek Tagalog	<b>Portuguese</b> Spanish Italian Tagalog	<b>Portuguese</b> Spanish Tagalog Italian	<b>Tamil</b> Italian Spanish Portuguese	Tamil Spanish Italian Portuguese

Data Source: 2006 and 2011 Census, Community Social Data Strategy

\*Chinese includes Cantonese, Chinese not otherwise specific, and Mandarin in that rank order.

### A7: % of Top 10 Non-Official Home Language, 2016

Neighbourhood	Chinese*	Bengali	Urdu	Greek	Tagalog (Filipino)	Persian (Farsi)	Spanish	Gujarati	Arabic	Tamil
43 - Victoria Village	2.4%	0.7%	<b>1.4%</b>	<b>2.1%</b>	<b>2.1%</b>	<b>2.0%</b>	1.3%	<b>1.2%</b>	<b>3.5%</b>	1.3%
44 - Flemingdon Park	3.2%	<b>1.9%</b>	<b>4.6%</b>	<b>1.7%</b>	<b>3.2%</b>	<b>4.6%</b>	1.1%	<b>3.6%</b>	<b>1.5%</b>	<b>2.6%</b>
54 - O'Connor-Parkview	1.3%	<b>1.3%</b>	<b>1.1%</b>	<b>2.1%</b>	<b>1.9%</b>	1.2%	0.7%	0.2%	0.4%	0.7%
55 - Thorncliffe Park	0.9%	<b>1.3%</b>	<b>17.3%</b>	<b>1.1%</b>	<b>2.2%</b>	<b>3.8%</b>	1.1%	<b>2.9%</b>	<b>2.9%</b>	0.8%
56 - Leaside-Bennington	0.9%	0.1%	0.1%	0.2%	0.2%	0.5%	0.5%	0.0%	0.1%	0.0%
57 - Broadview North	1.7%	0.1%	0.3%	<b>5.4%</b>	1.2%	0.3%	1.1%	0.1%	0.3%	0.2%
58 - Old East York	2.3%	0.1%	0.7%	<b>4.8%</b>	0.9%	0.2%	0.5%	0.1%	0.2%	0.0%
59 - Danforth-East York	3.8%	0.1%	0.5%	<b>4.5%</b>	0.8%	0.2%	0.5%	0.6%	0.1%	0.2%
60 - Woodbine-Lumsden	4.6%	0.4%	0.1%	<b>1.3%</b>	0.7%	0.3%	1.0%	0.0%	0.1%	0.0%
61 - Taylor-Massey	2.2%	<b>12.5%</b>	<b>2.7%</b>	0.3%	1.0%	0.9%	0.7%	<b>0.8%</b>	0.6%	0.9%
62 - East End-Danforth	2.4%	<b>1.5%</b>	<b>1.1%</b>	0.2%	0.8%	0.3%	0.6%	0.1%	0.4%	0.1%
63 - The Beaches	0.3%	0.0%	0.0%	0.1%	0.1%	0.1%	0.4%	0.0%	0.0%	0.0%
64 - Woodbine Corridor	3.3%	0.2%	0.4%	0.4%	0.2%	0.0%	0.4%	0.0%	0.2%	0.0%
65 - Greenwood-Coxwell	<b>8.4%</b>	0.2%	<b>1.5%</b>	<b>0.6%</b>	0.3%	0.2%	0.6%	0.2%	0.0%	0.1%
66 - Danforth	3.7%	0.0%	0.5%	<b>3.3%</b>	0.2%	0.2%	0.5%	<b>1.2%</b>	0.2%	0.1%
67 - Playter Estates-Danforth	1.3%	0.0%	0.0%	<b>3.1%</b>	0.3%	0.1%	0.6%	0.1%	0.1%	0.0%
68 - North Riverdale	5.2%	0.0%	0.0%	<b>1.6%</b>	0.1%	0.0%	0.5%	0.0%	0.0%	0.0%
69 - Blake-Jones	<b>7.1%</b>	0.2%	0.6%	<b>1.6%</b>	0.3%	0.3%	0.3%	<b>2.0%</b>	0.4%	0.1%
70 - South Riverdale	<b>13.3%</b>	0.1%	0.2%	0.1%	0.3%	0.2%	0.4%	0.0%	0.1%	0.1%
120 - Clairlea-Birchmount	4.7%	<b>5.5%</b>	<b>2.0%</b>	<b>1.2%</b>	<b>2.9%</b>	0.7%	0.7%	0.1%	0.3%	1.1%
121 - Oakridge	3.4%	<b>15.3%</b>	<b>1.8%</b>	0.5%	1.6%	<b>1.8%</b>	0.4%	0.2%	<b>0.8%</b>	1.1%
122 - Birchcliffe-Cliffside	1.9%	<b>1.9%</b>	0.2%	0.4%	0.6%	0.3%	0.3%	0.1%	0.2%	0.3%
MGH Neighbourhood**	3.7%	<b>2.1%</b>	<b>2.0%</b>	<b>1.4%</b>	1.1%	1.0%	0.7%	0.6%	0.6%	0.5%
City of Toronto	6.6%	0.7%	0.9%	0.5%	1.6%	1.2%	1.5%	0.6%	0.6%	1.5%
TC LHIN	3.5%	<b>0.8%</b>	0.7%	<b>0.6%</b>	1.0%	0.7%	1.4%	0.2%	0.5%	0.3%

Data Source: Statistics Canada Census 2016.

\*All Chinese languages including Cantonese and Mandarin.

Numbers are bolded if higher than the City of Toronto rate.

\*\*MGH neighbourhood: Total of the 22 neighbourhoods in the service area.

# Appendix B: Health Profile of the MGH Community

**B1: Adult Health and Disease Rates, 2012/13 & 2014/15**

Neighbourhood	% with Diabetes 20+; Age-Standardized†		% with Asthma 20+; Age-Standardized†		% with COPD Age 35+; Age-Standardized†		% with High Blood Pressure 20+; Age-Standardized†		% with Mental Health Visits Age 20+; Age-Standardized†	
	2012	2015	2012	2015	2012	2015	2012	2015	2012	2015
43 - Victoria Village	<b>13.7</b>	<b>12.1</b>	<b>13.6</b>	<b>14</b>	<b>11.5</b>	<b>10.4</b>	<b>25.6</b>	<b>23.6</b>	<b>9.7</b>	<b>10.9</b>
44- Flemingdon Park	<b>14.2</b>	<b>12.9</b>	10.5	10.8	8.0	7.5	<b>23.5</b>	<b>21.1</b>	7.4	8.3
54 -O'Connor-Parkview	<b>12.3</b>	<b>10.7</b>	<b>15.6</b>	<b>15.6</b>	<b>13.5</b>	<b>12.3</b>	<b>24.3</b>	<b>21.9</b>	<b>10.5</b>	<b>10.9</b>
55 - Thorncliffe Park	<b>16.3</b>	<b>13.3</b>	9.4	9.5	7.6	6.7	<b>25.6</b>	<b>22.7</b>	<b>9.2</b>	<b>10.1</b>
56 - Leaside-Bennington	7.0	5.4	<b>13.6</b>	<b>15</b>	7.1	6.9	18.5	16.8	7.0	8.1
57- Broadview North	10.6	9.1	<b>13.8</b>	<b>13.8</b>	<b>12.5</b>	<b>11</b>	21.9	19.5	<b>8.6</b>	<b>10.5</b>
58 - Old East York	10.3	8.9	<b>15.0</b>	<b>15.8</b>	<b>12.6</b>	<b>11.2</b>	22.6	20.1	<b>8.7</b>	<b>9.7</b>
59 - Danforth-East York	11.0	9.1	<b>14.5</b>	<b>14.4</b>	<b>12.4</b>	<b>11</b>	<b>23.0</b>	<b>20.5</b>	<b>8.3</b>	<b>9.9</b>
60 - Woodbine-Lumsden	10.9	9.1	<b>15.1</b>	<b>15.5</b>	<b>13.1</b>	<b>11.5</b>	21.9	19.8	<b>8.9</b>	<b>10.6</b>
61 - Taylor-Massey	<b>14.6</b>	<b>12.6</b>	12.7	12.6	<b>11.9</b>	<b>10.5</b>	<b>24.5</b>	<b>22.2</b>	<b>10.4</b>	<b>12</b>
62 - East End-Danforth	10.8	8.7	<b>14.5</b>	<b>14.9</b>	<b>12.7</b>	<b>11.2</b>	21.9	19.5	<b>9.8</b>	<b>10.8</b>
63 - Beaches	6.5	5	<b>13.1</b>	<b>13.3</b>	<b>9.8</b>	8.5	17.2	15.3	<b>9.5</b>	<b>9.8</b>
64 - Woodbine Corridor	9.9	8.4	<b>14.0</b>	<b>14.3</b>	<b>11.8</b>	<b>10.2</b>	21.3	19.2	<b>9.2</b>	<b>10.3</b>
65 - Greenwood-Coxwell	11.3	9.2	<b>14.0</b>	<b>14.2</b>	<b>12.6</b>	<b>10.5</b>	21.9	19.3	<b>9.3</b>	<b>9.4</b>
66 - Danforth Village	11.2	8.9	<b>13.8</b>	<b>13.7</b>	<b>12.0</b>	<b>10.1</b>	21.6	18.4	<b>8.5</b>	<b>9.8</b>
67 - Playter Estates-Danforth	9.0	6.8	<b>13.7</b>	<b>13.4</b>	<b>10.4</b>	<b>9</b>	19.0	16.9	<b>8.5</b>	<b>10.4</b>
68 - North Riverdale	8.3	6.8	12.6	<b>13.2</b>	<b>9.8</b>	<b>8.8</b>	19.0	16.4	<b>8.2</b>	<b>9.4</b>
69 - Blake-Jones	10.5	8.8	<b>13.4</b>	<b>13.7</b>	<b>13.0</b>	<b>11.2</b>	21.0	17.8	<b>9.7</b>	<b>10.2</b>
70 - South Riverdale	11.0	9	<b>13.1</b>	<b>13.5</b>	<b>11.8</b>	<b>9.9</b>	20.3	17.7	<b>8.5</b>	8.9
120 -Clairlea-Birchmount	<b>13.8</b>	<b>12.5</b>	<b>13.2</b>	<b>13.7</b>	<b>11.9</b>	<b>10.9</b>	<b>26.1</b>	<b>24.5</b>	<b>8.8</b>	<b>9.3</b>
121 - Oakridge	<b>16.0</b>	<b>14.7</b>	12.4	12.8	<b>12.7</b>	<b>11.5</b>	<b>27.4</b>	<b>25.2</b>	<b>9.4</b>	<b>11.2</b>
122 -Birchcliffe-Cliffside	10.7	9.4	<b>15.7</b>	<b>16.7</b>	<b>13.7</b>	<b>12.3</b>	<b>23.2</b>	<b>20.9</b>	<b>9.6</b>	<b>11.5</b>
MGH Neighbourhood*	11.5	9.8	<b>13.5</b>	<b>13.7</b>	<b>11.5</b>	<b>10.1</b>	22.5	20.2	<b>9.0</b>	<b>10</b>
City of Toronto	11.8	10	12.7	12.9	9.6	8.5	22.7	20.4	8.1	9
TC LHIN	10.3	8.4	12.7	12.7	<b>10.0</b>	<b>8.6</b>	20.8	18.3	8.4	<b>9.4</b>

Source: Ontario Community Health Profiles Partnership (<http://www.ontariohealthprofiles.ca/>). For specific information about data sources and definitions; [http://torontohealthprofiles.ca/ont/o\\_documents/aboutTheDataON/1\\_AboutTheData\\_AdultHealthDisease.pdf](http://torontohealthprofiles.ca/ont/o_documents/aboutTheDataON/1_AboutTheData_AdultHealthDisease.pdf)

† Rates are Age-Standardized using the direct method and the 1991 Canada population as the standard population. Numbers are bolded if they are higher than the City of Toronto rate.

\*MGH Neighbourhood: The 22 neighbourhoods in the service area.

## B2: Health and Disease Rates for Population 65+, 2012/13 & 2014/15

Neighbourhood	% with Diabetes 65+		% with Asthma 65+		% with COPD 65+		% with High Blood Pressure 65+		% with Mental Health Visits 65+	
	2012	2015	2012	2015	2012	2015	2012	2015	2012	2015
43 - Victoria Village	<b>42.3</b>	<b>36.3</b>	<b>16.8</b>	<b>16.6</b>	<b>23.1</b>	<b>21.7</b>	<b>77.8</b>	<b>73.7</b>	<b>10.3</b>	<b>10.7</b>
44- Flemingdon Park	<b>40.1</b>	<b>35.6</b>	<b>15.4</b>	<b>14.7</b>	16.7	16.3	71.5	65.8	7.3	7.9
54 -O'Connor-Parkview	<b>37.7</b>	<b>31</b>	<b>16.9</b>	<b>16.8</b>	<b>25.7</b>	<b>23.8</b>	<b>75.1</b>	<b>69.6</b>	<b>10.5</b>	<b>9.6</b>
55 - Thorncliffe Park	<b>44.2</b>	<b>34.7</b>	<b>17.0</b>	<b>16</b>	18.4	16.5	<b>76.1</b>	<b>69.5</b>	<b>10.5</b>	<b>9.5</b>
56 - Leaside-Bennington	24.5	18.6	12.0	12.4	16.1	16.4	64.6	60.8	6.7	8
57- Broadview North	36.8	30.5	<b>15.5</b>	<b>15.3</b>	<b>23.1</b>	<b>21.5</b>	<b>74.0</b>	<b>67.8</b>	8.4	<b>9.9</b>
58 - Old East York	35.4	29.5	<b>14.9</b>	<b>15.2</b>	<b>24.7</b>	<b>23</b>	<b>75.4</b>	<b>69.2</b>	7.9	<b>9.5</b>
59 - Danforth-East York	<b>38.6</b>	<b>31.9</b>	<b>16.1</b>	<b>15.3</b>	<b>27.2</b>	<b>25.1</b>	<b>75.5</b>	<b>69.8</b>	<b>8.9</b>	<b>10</b>
60 - Woodbine-Lumsden	<b>38.1</b>	30.4	14.4	13.9	<b>27.9</b>	<b>24.8</b>	<b>73.5</b>	65.9	<b>8.9</b>	<b>9.2</b>
61 - Taylor-Massey	<b>40.8</b>	<b>35</b>	<b>18.1</b>	<b>16.6</b>	<b>24.1</b>	<b>20.6</b>	<b>73.9</b>	<b>67.2</b>	<b>9.3</b>	<b>9.9</b>
62 - East End-Danforth	36.3	27.5	<b>16.8</b>	<b>16.4</b>	<b>27.9</b>	<b>24.4</b>	71.9	65.4	<b>10.8</b>	<b>9.6</b>
63 - Beaches	24.6	16.6	12.8	12.3	<b>21.0</b>	<b>18</b>	59.8	54.9	<b>9.8</b>	<b>10.2</b>
64 - Woodbine Corridor	35.7	29	<b>15.1</b>	13.1	<b>25.8</b>	<b>21.5</b>	72.0	66.6	<b>10.2</b>	<b>9.6</b>
65 - Greenwood-Coxwell	36.8	29.5	14.5	<b>14.3</b>	<b>27.2</b>	<b>23.6</b>	72.0	65.4	<b>9.6</b>	7.5
66 - Danforth Village	<b>41.7</b>	<b>32.3</b>	<b>15.8</b>	13.8	<b>26.6</b>	<b>23.6</b>	<b>74.4</b>	66.1	<b>9.4</b>	<b>9.1</b>
67 - Playter Estates-Danforth	33.2	24.1	14.4	13.6	<b>23.8</b>	<b>22.3</b>	68.0	62.2	<b>8.6</b>	<b>9.2</b>
68 - North Riverdale	32.1	25	11.9	12.3	<b>22.2</b>	<b>19.5</b>	66.6	60.1	<b>8.6</b>	8.7
69 - Blake-Jones	<b>35.0</b>	29.1	<b>15.5</b>	<b>15.6</b>	<b>27.3</b>	<b>25.9</b>	71.0	60.4	<b>10.2</b>	<b>10.6</b>
70 - South Riverdale	<b>39.4</b>	31.2	<b>15.1</b>	<b>13.5</b>	<b>26.2</b>	<b>22.4</b>	71.8	63.5	8.2	7.6
120 -Clairlea-Birchmount	<b>40.8</b>	<b>35.2</b>	<b>14.8</b>	<b>15.6</b>	<b>24.0</b>	<b>22.1</b>	<b>77.9</b>	<b>74.6</b>	7.9	7.7
121 - Oakridge	<b>42.7</b>	<b>37.5</b>	<b>16.5</b>	<b>16.7</b>	<b>27.6</b>	<b>23.6</b>	<b>75.7</b>	<b>71.2</b>	<b>9.4</b>	<b>9.7</b>
122 -Birchcliffe-Cliffside	35.7	29.1	14.2	13.8	<b>27.6</b>	<b>24</b>	<b>73.1</b>	<b>68.7</b>	<b>8.6</b>	<b>9.2</b>
MGH Neighbourhood*	37.1	30.1	<b>15.2</b>	<b>14.7</b>	<b>24.1</b>	<b>21.5</b>	72.6	66.7	<b>9.0</b>	<b>9.1</b>
City of Toronto	37.4	31.2	14.5	13.9	20.0	17.8	72.7	67.5	8.5	8.7
TC LHIN	34.6	27.1	14.5	13.9	<b>21.1</b>	<b>18.8</b>	69.5	63.2	8.9	<b>9.2</b>

Source: Ontario Community Health Profiles Partnership (<http://www.ontariohealthprofiles.ca/>). For specific information about data sources and definitions; [http://torontohealthprofiles.ca/ont/o\\_documents/aboutTheDataON/1\\_AboutTheData\\_AdultHealthDisease.pdf](http://torontohealthprofiles.ca/ont/o_documents/aboutTheDataON/1_AboutTheData_AdultHealthDisease.pdf)

Numbers are bolded if they are higher than the City of Toronto rate.

\*MGH neighbourhood: The 22 neighbourhoods in the service area.



### B3: Premature Mortality Rates 2006/08 (Deaths/100,000 age < 75)

Neighbourhood	Age Standardized Mortality Rate per 100,000 population Males <75 Age-Standardized†	Age Standardized Mortality Rate per 100,000 population Females <75 Age-Standardized†	Age Standardized Mortality Rate per 100,000 population Both Sexes <75 Age-Standardized†
43 - Victoria Village	<b>355.2</b>	147.5	<b>240.2</b>
44- Flemingdon Park	230.3	<b>173.3</b>	199.4
54 -O'Connor-Parkview	<b>331.1</b>	142.5	<b>230.3</b>
55 - Thorncliffe Park	257.7	<b>172.1</b>	<b>211.2</b>
56 - Leaside-Bennington	167.3	132.0	147.4
57- Broadview North	<b>276.6</b>	<b>187.0</b>	<b>226.9</b>
58 - Old East York	<b>278.5</b>	<b>188.7</b>	<b>233.3</b>
59 - Danforth-East York	252.6	<b>194.4</b>	<b>220.3</b>
60 - Woodbine-Lumsden	<b>377.0</b>	<b>159.5</b>	<b>260.5</b>
61 - Taylor-Massey	<b>366.0</b>	<b>194.4</b>	<b>272.2</b>
62 - East End-Danforth	<b>415.9</b>	<b>257.5</b>	<b>330.7</b>
63 – The Beaches	267.8	<b>178.3</b>	<b>221.2</b>
64 - Woodbine Corridor	<b>373.1</b>	<b>288.4</b>	<b>323.1</b>
65 - Greenwood-Coxwell	<b>419.4</b>	<b>206.7</b>	<b>308.8</b>
66 - Danforth Village	<b>307.4</b>	<b>243.8</b>	<b>276.0</b>
67 - Playter Estates-Danforth	<b>282.7</b>	142.6	206.1
68 - North Riverdale	<b>364.0</b>	<b>190.0</b>	<b>274.5</b>
69 - Blake-Jones	<b>359.9</b>	<b>219.9</b>	<b>288.0</b>
70 - South Riverdale	<b>391.1</b>	<b>183.7</b>	<b>282.8</b>
120 -Clairlea-Birchmount	<b>348.6</b>	<b>220.6</b>	<b>281.3</b>
121 - Oakridge	<b>368.5</b>	<b>214.1</b>	<b>288.1</b>
122 -Birchcliffe-Cliffside	<b>421.7</b>	<b>222.3</b>	<b>318.1</b>
MGH Neighbourhood	<b>329.8</b>	<b>193.1</b>	<b>256.8</b>
City of Toronto	268.6	156.3	208.7
TC LHIN	304.8	164.3	230.5

Source: Toronto Community Health Profiles, <http://www.torontohealthprofiles.ca/>, For specific information about data sources and definitions; <http://www.torontohealthprofiles.ca/aboutTheData.php>,

<sup>a</sup> Denominator: Total Population - Statistics Canada, 2006 Census of Canada.

<sup>±</sup> Numerator: Number of Deaths, Ontario Mortality Data 2006-2008, Ontario Ministry of Health and Long-Term Care, IntelliHEALTH ONTARIO.

† Age Standardized Mortality Rate (ASMR) - the number of deaths that would occur for a given population if that population had the same age distribution as the 1991 Canadian population. The rate is calculated as number of deaths per 100,000 population. Numbers are bolded if they are higher than the City of Toronto rate.

#### B4: Percentage with Disability/Activity Limitations, 2006

Neighbourhood	% With Disability/AL, Age 25-64 <sup>a</sup> , Age-Adjusted Rate †, Male	% With Disability/AL, Age 25-64 <sup>a</sup> , Age-Adjusted Rate †, Female	% With Disability/AL, Age 25-64 <sup>a</sup> , Age-Adjusted Rate †, Both sexes
43 - Victoria Village	14.4	<b>17.8</b>	<b>16.1</b>
44- Flemingdon Park	<b>17.1</b>	<b>19.5</b>	<b>18.3</b>
54 -O'Connor-Parkview	<b>16.0</b>	16.5	<b>16.3</b>
55 - Thorncliffe Park	13.8	15.9	14.9
56 - Leaside-Bennington	9.7	7.1	8.4
57- Broadview North	16.8	<b>16.9</b>	<b>16.8</b>
58 - Old East York	14.4	12.8	13.6
59 - Danforth-East York	<b>15.9</b>	16.8	16.4
60 - Woodbine-Lumsden	<b>18.2</b>	<b>23.8</b>	<b>21.0</b>
61 - Taylor-Massey	<b>17.9</b>	<b>21.7</b>	<b>19.8</b>
62 - East End-Danforth	<b>15.3</b>	16.6	15.9
63 - Beaches	11.3	11.2	11.3
64 - Woodbine Corridor	<b>16.7</b>	<b>18.2</b>	<b>17.4</b>
65 - Greenwood-Coxwell	<b>18.8</b>	<b>18.3</b>	<b>18.5</b>
66 - Danforth Village	<b>16.8</b>	14.5	15.6
67 - Playter Estates-Danforth	12.9	13.6	13.2
68 - North Riverdale	10.0	12.2	11.1
69 - Blake-Jones	<b>16.8</b>	<b>17.0</b>	<b>16.9</b>
70 - South Riverdale	<b>19.0</b>	<b>19.7</b>	<b>19.3</b>
120 -Clairlea-Birchmount	<b>17.6</b>	<b>18.9</b>	<b>18.3</b>
121 - Oakridge	<b>20.0</b>	<b>24.5</b>	<b>22.2</b>
122 -Birchcliffe-Cliffside	<b>15.5</b>	<b>17.9</b>	<b>16.7</b>
MGH Neighbourhood	<b>15.7</b>	<b>16.8</b>	n/a
City of Toronto	14.8	16.0	15.4
TC LHIN	14.6	15.5	15.1

Source: 2006 Census, Community Social Data Strategy Toronto Community Health Profiles, Steps to Equity. Data prepared by: Dianne Patychuk, Steps to Equity Research Services - based on census data and health indicator data produced by the Toronto Community Health Profiles Partnership; ([www.torontohealthprofiles.ca](http://www.torontohealthprofiles.ca)), [www.torontohealthprofiles.ca/aboutTheData.php](http://www.torontohealthprofiles.ca/aboutTheData.php).

† Rates are age-adjusted using the direct method and the 1991 Canada population as the standard population, where noted.

### B5: Prevention Screening Indicators, 2009/2011 & 2013/2015

Neighbourhood	% eligible** women 50-69 having a mammogram last 3 years, Age- Standardized†	% eligible** women 50-69 having a mammogram last 3 years, Age- Standardized†	% all eligible** women having a pap smear last 3 years, aged 21-69 Age- Standardized†	% all eligible** women having a pap smear last 3 years, aged 21-69 Age- Standardized†	Population having any colorectal cancer screening***, aged 50-74 Age- Standardized†	Population having any colorectal cancer screening***, aged 50-74 Age- Standardized†
	2011	2015	2011	2015	2011	2015
43 - Victoria Village	<b>60.9</b>	62.9	<b>62.3</b>	<b>51</b>	<b>55.1</b>	<b>60.2</b>
44- Flemingdon Park	<b>54.3</b>	<b>53.6</b>	<b>56.9</b>	<b>45.6</b>	<b>50.1</b>	<b>54.6</b>
54 -O'Connor-Parkview	62.9	62.6	64.8	53.6	<b>55.4</b>	<b>57.8</b>
55 - Thorncliffe Park	<b>49.7</b>	<b>52.7</b>	<b>54.5</b>	<b>47</b>	<b>45.5</b>	<b>48.1</b>
56 - Leaside-Bennington	67.5	68.4	74.5	60.9	73.0	71.3
57- Broadview North	<b>59.2</b>	<b>60.2</b>	<b>64.0</b>	<b>52.8</b>	<b>55.5</b>	<b>59.4</b>
58 - Old East York	61.9	61.8	67.9	56.9	58.2	63.1
59 - Danforth-East York	62.8	60.9	69.9	59.2	<b>56.0</b>	<b>60.8</b>
60 - Woodbine-Lumsden	<b>59.5</b>	62.8	66.5	56.7	<b>54.2</b>	<b>59.5</b>
61 - Taylor-Massey	<b>58.0</b>	<b>58.4</b>	<b>58.4</b>	<b>49.8</b>	<b>51.8</b>	<b>51.6</b>
62 - East End-Danforth	<b>60.7</b>	<b>59.8</b>	67.3	57.3	<b>55.0</b>	<b>58.2</b>
63 – The Beaches	64.6	<b>60.6</b>	73.6	58.3	62.7	65.3
64 - Woodbine Corridor	<b>61.2</b>	62.5	71.4	59.8	<b>57.3</b>	<b>60.4</b>
65 - Greenwood-Coxwell	<b>58.0</b>	<b>57.5</b>	65.0	55.6	<b>53.3</b>	<b>57</b>
66 - Danforth	<b>58.8</b>	63.1	67.2	57.2	<b>53.6</b>	<b>59.5</b>
67-Playter Estates-Danforth	67.1	61.5	72.1	57.8	63.2	64.1
68 - North Riverdale	63.4	<b>59.8</b>	71.1	58.7	65.4	65.4
69 - Blake-Jones	<b>57.4</b>	<b>58.6</b>	66.9	57.1	<b>55.7</b>	<b>58.6</b>
70 - South Riverdale	<b>53.8</b>	<b>57.5</b>	<b>64.2</b>	55	<b>55.8</b>	<b>59.2</b>
120 -Clairlea-Birchmount	61.5	62.9	64.6	53.1	<b>55.8</b>	<b>58.5</b>
121 - Oakridge	<b>57.5</b>	<b>58.1</b>	<b>60.6</b>	<b>49.9</b>	<b>51.6</b>	<b>53.4</b>
122 -Birchcliffe-Cliffside	<b>59.4</b>	62	67.7	56.6	58.6	<b>60.2</b>
MGH Neighbourhood	<b>60.0</b>	<b>60.4</b>	65.6	54.6	<b>56.7</b>	<b>59.5</b>
City of Toronto	61.4	60.8	64.4	52.9	58.1	61.3
TC LHIN	<b>61.0</b>	<b>59</b>	<b>65.8</b>	53.8	58.3	<b>60.8</b>

Source: Ontario Community Health Profiles Partnership (<http://www.ontariohealthprofiles.ca/>). For specific information about data sources and definitions; [http://torontohealthprofiles.ca/ont/o\\_documents/aboutTheDataON/1\\_AboutTheData\\_Prevention\\_PR.pdf](http://torontohealthprofiles.ca/ont/o_documents/aboutTheDataON/1_AboutTheData_Prevention_PR.pdf). Data is derived from documentation available from the Institute for Clinical Evaluative Sciences (ICES) and is comprised of a variety of hospitalization data, physician service and lab claims.

\*\*Please refer to Ontario Health Profiles, About the Data, Cancer Prevention for details of eligibility and exclusion.

\*\*\*Screening includes: Fecal occult blood testing; Colonoscopy, rigid or flexible sigmoidoscopy; single or double contrast barium enema.

† Age-Standardized rate – rate of mammography among women aged 50-69 in Ontario created using 5 year age groups and the 1991 Canada Census population as the standard population.

Numbers are bolded if they are lower than the City of Toronto rate.

## B6: Fertility and Birth Statistics, 2009/11 & 2012/15

Neighbourhood	Total number of Hospital Births		Fertility Rate: 3-year Avg Births /1,000 women 15-49 years		% Singleton LBW (Birthweight <2500 grams)		% of Births to Mothers not Born in Canada	
	2009-11	2012-15	2009-11	2012-15	2009-11	2012-15	2009-11	2012-15
43 - Victoria Village	657	556	<b>51.5</b>	<b>43.6</b>	<b>5.7</b>	6.3	61.3	<b>45.2</b>
44- Flemingdon Park	989	909	<b>56.0</b>	<b>51.4</b>	<b>6.5</b>	6.9	<b>85.7</b>	<b>63.8</b>
54 -O'Connor-Parkview	601	585	<b>43.7</b>	<b>42.2</b>	<b>6.7</b>	<b>7.2</b>	37.3	30.9
55 - Thorncliffe Park	1,297	1,059	<b>84.7</b>	<b>70.4</b>	5.3	7	<b>91.9</b>	<b>75.2</b>
56 - Leaside-Bennington	445	468	38.4	<b>41.1</b>	3.8	4.1	20.3	16.2
57- Broadview North	431	360	<b>44.5</b>	37.3	4.8	<b>8.3</b>	51.1	32.8
58 - Old East York	271	260	40.4	39.6	3.1	<b>8.1</b>	30.8	16.1
59 - Danforth-East York	715	663	<b>54.9</b>	<b>52</b>	2.8	5	25.4	15.7
60 - Woodbine-Lumsden	265	254	42.7	<b>41.8</b>	5.3	5.5	30.9*	19.1
61 - Taylor-Massey	723	655	<b>56.4</b>	<b>51.7</b>	<b>7.1</b>	<b>9</b>	<b>79.0</b>	<b>54</b>
62 - East End-Danforth	818	765	<b>47.9</b>	<b>45.6</b>	4.4	7.1	35.8	22.9
63 – The Beaches	705	656	42.1	<b>39.9</b>	3.9	<b>7.2</b>	23.4	12.8
64 - Woodbine Corridor	543	484	<b>53.8</b>	<b>49.6</b>	<b>6.3</b>	7	20.1	15.1
65 - Greenwood-Coxwell	623	592	<b>53.9</b>	<b>51.6</b>	4.3	6.3	32.1	18.6
66 - Danforth	373	375	<b>49.7</b>	<b>51.7</b>	4.8	5.1	26.5	15.9
67 - Playter Estates-Danforth	206	204	33.8	34.2	<b>6.8</b>	5.9	24.6	15
68 - North Riverdale	398	386	40.9	<b>41</b>	3.6	5.7	29.9	16
69 - Blake-Jones	365	297	<b>55.6</b>	<b>46.6</b>	4.0	6.7	28.7	30.9
70 - South Riverdale	1,108	1,019	<b>50.2</b>	<b>46.7</b>	4.5	<b>7.2</b>	35.0	22.7
120 -Clairlea-Birchmount	963	919	<b>49.7</b>	<b>47.9</b>	4.7	<b>9</b>	<b>62.5</b>	<b>50.6</b>
121 - Oakridge	663	615	<b>62.2</b>	<b>58.5</b>	<b>6.0</b>	<b>8.9</b>	<b>79.1</b>	<b>62.5</b>
122 -Birchcliffe-Cliffside	622	636	40.1	<b>41.5</b>	5.3	<b>7.2</b>	34.0	21.6
MGH Neighbourhood*	13,781	12,717	<b>50.6</b>	<b>47.3</b>	5.0	7	47.9	34.6
City of Toronto	90,861	82,021	43.4	39.7	5.6	7.1	61.4	44.8
TC LHIN	39,544	35,344	<b>54.0</b>	37.2	5.1	7	47.8	31.5

Source: Ontario Community Health Profiles Partnership (<http://www.ontariohealthprofiles.ca>). For information about definitions, data quality & limitations, and selection and preparation of variables; [http://www.torontohealthprofiles.ca/aboutTheDataON/1\\_AbouthTheData\\_MothersAndBabies\\_MB.pdf](http://www.torontohealthprofiles.ca/aboutTheDataON/1_AbouthTheData_MothersAndBabies_MB.pdf). 2012-15 data may not be comparable to the previous Mothers and Babies 2009-2011 data from the Toronto Community Health Profiles Partnership (<http://www.torontohealthprofiles.ca>) website due to changes in data sources and years of data compared.

\*MGH Neighbourhood: Total of 22 neighbourhoods in the service area.

Numbers are bolded if they are higher than the City of Toronto rate.



# Appendix C: Primary Care Enrolment & Continuity 2012/13

Primary Care Enrolment & Continuity<sup>47</sup>, 2012/13

Neighbourhood	% Enrolled	% Low Continuity & Enrolled	% Non-enrolled	% Low Continuity & Non-Enrolled	% Low Continuity (Enrolled and Non-Enrolled)
43 - Victoria Village	74.8	<b>14.9</b>	25.2	<b>6.8</b>	<b>21.7</b>
44- Flemingdon Park	75.5	<b>17.6</b>	24.5	<b>6.7</b>	<b>24.3</b>
54 -O'Connor-Parkview	75.7	14.0	24.3	6.1	20.1
55 - Thorncliffe Park	<b>68.1</b>	<b>16.9</b>	<b>31.9</b>	<b>10.9</b>	<b>27.8</b>
56 - Leaside-Bennington	78.0	11.4	22.0	4.7	16.1
57- Broadview North	76.6	<b>14.8</b>	23.4	6.4	<b>21.2</b>
58 - Old East York	77.5	12.7	22.5	5.2	17.8
59 - Danforth-East York	76.7	12.5	23.3	5.6	18.1
60 - Woodbine-Lumsden	74.8	12.8	25.2	6.1	18.8
61 - Taylor-Massey	<b>71.3</b>	<b>15.6</b>	<b>28.7</b>	<b>7.7</b>	<b>23.3</b>
62 - East End-Danforth	<b>72.5</b>	13.2	<b>27.5</b>	<b>7.2</b>	20.4
63 – The Beaches	<b>72.0</b>	<b>14.7</b>	<b>28.0</b>	<b>7.5</b>	<b>22.2</b>
64 - Woodbine Corridor	77.3	13.9	22.7	5.5	19.4
65 - Greenwood-Coxwell	78.2	13.2	21.8	5.0	18.2
66 - Danforth	74.1	12.8	25.9	6.1	18.9
67 - Playter Estates-Danforth	78.7	13.2	21.3	5.2	18.5
68 - North Riverdale	79.7	12.8	20.3	5.1	17.9
69 - Blake-Jones	77.4	13.7	22.6	5.0	18.7
70 - South Riverdale	77.8	13.4	22.2	5.1	18.5
120 - Clairlea-Birchmount	75.6	<b>14.9</b>	24.4	6.4	<b>21.3</b>
121 - Oakridge	<b>73.5</b>	<b>16.0</b>	<b>26.5</b>	<b>7.0</b>	<b>23.0</b>
122 - Birchcliffe Cliffside	74.1	12.6	25.9	6.3	18.9
MGH Neighbourhood*	75.2	14.1	24.8	6.4	20.5
City of Toronto	74.0	14.5	26.0	6.6	21.1
TC LHIN	72.3	14.5	27.7	6.9	21.4

Source: Toronto Community Health Profiles, <http://www.torontohealthprofiles.ca/>. For information about definitions, data quality & limitations, selection and preparation of variables: <http://www.torontohealthprofiles.ca/aboutTheData.php>.

<sup>47</sup> Continuity measures the proportion of visits to a patient's most frequent primary care group. It can be surmised that those with low continuity likely do not have a primary care doctor.

# Appendix D: MGH Patient Data by Age

**MGH Acute Inpatients by Age 2012/13 – 2016/17**

Fiscal Year	Newborn	0-14	15-24	25-44	45-64	65-74	75+
2012/13	18.5%	4.4%	5.2%	24.8%	16.7%	10.5%	19.9%
2013/14	17.4%	4.8%	4.8%	24.7%	17.5%	10.8%	20.1%
2014/15	16.7%	5.0%	4.1%	24.4%	17.2%	11.3%	21.3%
2015/16	16.1%	5.0%	4.2%	23.8%	17.5%	12.2%	21.2%
2016/17	15.7%	5.0%	4.0%	23.3%	18.3%	12.5%	21.2%

**MGH Emergency Department Patients by Age 2012/13 – 2016/17**

Fiscal Year	Newborn	0-14	15-24	25-44	45-64	65-74	75+
2012/13	0.00%	14.6%	10.5%	26.9%	25.7%	8.3%	14.1%
2013/14	0.00%	14.4%	10.5%	26.8%	26.2%	8.5%	13.6%
2014/15	0.00%	14.1%	10.7%	26.8%	25.4%	9.2%	13.9%
2015/16	0.00%	13.8%	10.1%	27.0%	25.8%	9.7%	13.6%
2016/17	0.00%	13.3%	10.2%	26.6%	26.4%	9.8%	13.8%





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