The Fraser Institute

Hospital Report Card

Ontario 2008

by Nadeem Esmail and Maureen Hazel

9a Scores by Municipality

Inpatient Quality Indicators

FRASER INSTITUTE

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Contents

Data Tables and Appendices of the Hospital Report Card

The Fraser Institute

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Overview and Observations

Overview

The Fraser Institute's *Hospital Report Card: Ontario 2008* is constructed to help patients choose the best hospital for their inpatient care by providing them with information on the performance of Ontario acute-care hospitals. All of the information in this report, which is laid out in 12 documents, can be accessed in a convenient and interactive way through our websites, <www.fraserinstitute.org> and <www.hospitalreportcards.org>.

We set out to create a hospital report card that is easy to understand and accessible by the public, where individuals are able to look up a given condition or procedure and compare death rates, volumes of procedures, rates of adverse events, and utilization rates for their hospital to those of other hospitals in Ontario.

This is accomplished by using state-of-the-art indicators developed by the US Agency for Healthcare Research and Quality (AHRQ) in conjunction with Stanford University that have been shown to reflect quality of care inside hospitals. These indicators are presently in use in more than a dozen US states, including several of the more populous ones, New York, Texas, Florida and California.

We are using the Canadian Institute for Health Information's (CIHI) Discharge Abstract Database (DAD) as our primary information source. This information is derived from patient records provided to CIHI by all Ontario hospitals. Demographic, administrative, and clinical data are extracted from the Discharge Abstract Database for inpatient hospital stays from all acute care hospitals in Ontario, except for the Hospital for Sick Children in Toronto.

Since more specialized hospitals may treat more high-risk patients and some patients arrive at hospitals sicker than others, it is important to risk-adjust hospital death rates, adverse events rates, and utilization rates for patients with the same condition but a different health status. The international standard for risk adjustment, 3M™ APR™ DRG Classification System, [1] is employed to risk-adjust the data.

[1] 3M and APR are trademarks of 3M, used under license in Canada.

The Fraser Institute spent two years developing the methods, databases, and computer programs required to adapt the measures to Canadian circumstances. This work has been internally and externally peer-reviewed (Mullins, Menaker, and Esmail, 2006) and is supported by an extensive body of research based on the AHRQ approach.

Of Ontario's 136 acute-care hospitals, 30, representing 4.94% of inpatient records in Ontario in the latest year, granted us authorization to identify them by name in this report. This represents a significant drop from the previous report, in which we were authorized to identify 43 hospitals, representing 41% of inpatient records in Ontario in 2004/05. We applaud those hospitals who voluntarily agreed to be identified in this year's edition, the *Hospital Report Card: Ontario 2008.* These hospitals should be commended for their efforts to empower patients with information regarding the health care they receive and for their ongoing commitment to quality improvement through accountability and transparency.

The Fraser Institute's *Hospital Report Card: Ontario 2008* consists of 39 of AHRQ's indicators of quality (such as death due to a stroke) and patient safety (such as a foreign body left inside a patient during a procedure). The indicators are shown for all acute-care hospitals in Ontario from 1997 to 2006, comprising more than 9.5 million patient records. [2] We have also calculated the indicators for all municipalities in Ontario, based on patient location. This constitutes the most comprehensive and detailed publicly available measure of acute-care hospital performance and accountability in Canada at the present time.

[2] There are a total of 50 indicators in this report. Due to changes in diagnostic and procedural classifications, the availability of indicators varies from year to year. Years 2002 to 2004 report 42 main indicators. Due to changes in AHRQ software, three indicators were dropped in 2005 for a total of 39 indicators.

The indicators are expressed as observed rates (such as death due to hip replacement surgery) and risk-adjusted rates (the same rate adjusted for patient health status). Each institution was given a score from 0 to 100 for each indicator based on its risk-adjusted rate, where 100 is the best. The institutions were then ranked based on their scores, where 1 is the best.

The indicators are classified into three groups: those related to medical conditions, hospital procedures, and child birth. The indicators are further classified by type: death rates, volumes of procedures, utilization rates, and adverse events.

A Hospital Mortality Index (HMI) has been constructed to examine the overall performance of a hospital or municipality across indicators that measure death rates. It consists of up to nine indicators including:

- deaths due to hip replacement surgery
- deaths due to heart attacks
- deaths due to heart failure
- deaths due to acute strokes
- deaths due to bleeding from the esophagus, stomach, small intestine or colon
- deaths due to hip fractures
- deaths due to pneumonia infection
- deaths among patients that are considered unlikely to die in the hospital
- deaths in patients that developed complications of care during hospitalization

The final HMI is an average of the scores of these indicators, where 100 is the best. All institutions and municipalities were ranked based on their HMI score, where 1 is the best. It is important to note that the 39 indicators and the Hospital Mortality Index are applicable only to acute-care conditions and procedures for inpatient care. The results cannot be generalized to assessing the overall performance of any given hospital.

Since this report is based on administrative data, the results have limitations related to coding variations and other factors. Hospital deaths or complications will occur even when all standards of care are followed. Deciding on treatment options and choosing a hospital are decisions that should be made in consultation with a physician. It is not recommended to choose a hospital based solely on statistics and descriptions such as those given in this report.

That said, the DAD is a major data source used to produce various CIHI reports including annual reports on the performance of the hospitals and health-care system and for seven of the health indicators adopted by the federal, provincial, and territorial governments. These data have been used extensively in previous reports on health care performance, and form the basis for many journal articles.

A number of publications have addressed data-quality issues that are discussed in our report. Of note are CIHI's reabstraction studies that go back to the original patient charts and recode the information using a different set of expert coders. [3]

Overall, according to CIHI, [4] findings from their three-year DAD re-abstraction studies have confirmed the strengths of the database, while identifying limitations in certain areas resulting from inconsistencies in the coding of some data elements. In addition, the findings from the inter-rater data (that is, comparison between reabstractors) were generally similar to the findings from the main study data (that is, comparison between original coder and reabstractor). This suggests that the database is coded as well as can be expected using existing approaches in the hospital system.

In addition to the aforementioned reabstraction studies, the OECD published a report [5] that supports the AHRQ patient-safety indicator approach, noting that "this set of measures represents an exciting development and their use should be tested in a variety of countries" (p. 11). Further, a recently released report by the Manitoba Center for Health Policy that used the AHRQ Patient Safety Indicators [6] noted two important advantages to using the AHRQ approach. The first advantage is the breadth of coverage offered by the indicators in studying in-hospital patient safety. The second is that the AHRQ patient safety indicators were developed to measure complications of hospital-based care among a group of patients for whom the complications seemed preventable or highly unlikely.

[3] Reabstractors participating in the study were required to have several years of coding experience, experience coding in ICD-10-CA and CCI in particular, experience coding at a tertiary care centre, and attendance at specific CIHI educational workshops. They were also required to attend a one-week training session and to receive a passing score on the inter-rater test.

[4] Data Quality of the Discharge Abstract Database Following the First-year Implementation of ICD-10-CA/CCI. CIHI, 2004.

[5] Selecting Indicators for Patient Safety at the Health Systems Level in OECD Countries. John Millar, Soeren Mattke and the Members of the OECD Patient Safety Panel. Report available at <http://www.oecd.org/dataoecd/53/26/33878001.pdf>.

[6] Bruce S. et al., Application of Patient Safety Indicators in Manitoba: A First Look. Winnipeg, Manitoba Centre for Health Policy, June 2006.

Observations

A report based on more than 9.5 million patient records, shown across as many as 50 quality and safety indicators for 136 hospitals and 138 municipalities over nine years, is not something that can be summarized in a few words. In fact, the primary purpose of this research is to provide patients with access to information on specific medical procedures and conditions and understand the variation of hospital care across the entire system. It is for that reason that we have rates, scores, and ranks for each separate indicator and that information can be assessed by using this document and our associated interactive web-enabled database found through <www.fraserinstitute.org> or <www.hospitalreportcards.org>.

However, we have created one summary measure of mortality, based on the most important and reliable data in this study, the Hospital Mortality Index. The nine component indicators of the HMI were arrived at by a process of elimination. Starting with our complete group of indicators (39 in the latest year), we eliminated indicators that had no data for several years or relatively few hospitals with data. The resulting HMI has scores and rankings for 57 hospitals and 93 municipalities in the latest year.

Tables 1 (pages 6–7) and 2 (pages 9–11) show scores and rankings for the Hospital Mortality Index for 2005/06. [7] This is compared to the average score over the latest four years (2002/03–2005/06). The change column shows the improvement or deterioration in score between the two periods. Scores for fiscal years 2002, 2003 and 2004 are also presented. Comparisons of the Hospital Mortality Index for 2005/06 and previous years must be interpreted with caution.

[7] The use of 2002/03 and 2003/04 data possibly introduces a SARS effect to the HMI for some hospitals, as 44 patients died in Ontario from SARS between February and July 2003 and hospital operations were affected. However, we note that the median HMI score rose by 6.6 points in 2003 and dropped by 6.5 points in 2004, leaving the score virtually unchanged between 2002 and 2004 at 71.3.

Indeed, the number of hospitals and municipalities ranked fell from 66 to 57 and 106 to 93 respectively. Moreover, scores for 2005/06 may also be affected by changes in AHRQ's computation of risk-adjusted rates. [8]

[8] Prior to version 3, a linear regression model was used for risk-adjustment where the risk adjusted rate = observed rate - expected rate + population rate. With version 3, logistic regression was used, where the risk adjusted rate = observed rate / expected rate * population rate.

Hospital Mortality Index: Hospitals

Top-Ranked Hospitals

- The top hospital in Ontario is Anonymous Hospital 10, identity unknown, with a high HMI score of 91.2 out of 100. It has performed consistently well, ranking second in both the late 1990s and early 2000s.
- Anonymous hospitals 222 and 204 are ranked second and third respectively in 2005/06. These hospitals did not appear in previous report cards.
- Anonymous Hospital 50 was ranked first in 2002/05 and ranks 13th in 2005/06.
- The top identified hospital is Timmins and District Hospital in 15th place and a score of 88.3, followed closely by Stratford General Hospital (Stratford) in 19th place and a score of 88.2. Stratford ranked among the top five in previous years.
- Calculation of an HMI score was possible for only four of the identified hospitals, none of which are in the top ten. St. Thomas Elgin General Hospital and Orillia Soldiers' Memorial Hospital rank 39th and 49th, respectively. As noted above, Timmins and District ranked 15th and Stratford General, 19th.
- Anonymous Hospital 25, ranked 12th, has had the largest improvement in its HMI score of any hospital (up 20.7 points) since the early 2000s.[9]

[9] Comparisons of the Hospital Mortality Index for 2005/06 and previous years must be interpreted with caution. Indeed, the number of hospitals and municipalities ranked fell from 66 to 57 and 106 to 93, respectively. Moreover, scores for 2005/06 may also be affected by changes in AHRQ's computation of risk-adjusted rates and scores for 2002/03 and 2003/04 may be biased by a SARS effect.

Bottom-Ranked Hospitals

- Nine of the 10 bottom-ranked hospitals did not participate in the study. Of these, Anonymous Hospital 18, with a score of 72.8, is the lowest-ranked hospital. It also ranked in the bottom 10 in 2002/05.
- Anonymous Hospital 40 is the second lowest-ranked hospital, with a score of 73.8. Anonymous Hospital 55 is third lowest, with a score of 79.0; this hospital also experienced the smallest improvement in its HMI from the early 2000s among hospitals for whom an HMI could be calculated in 2005/06.
- Orillia Soldiers' Memorial Hospital is the lowest-ranked participating hospital and is ranked 49th. A score for previous years is unavailable.

Consistency

- There is some consistency of performance in the top and bottom hospitals.
- All of the bottom ten hospitals, except for Anonymous Hospitals 55 and 59, were either low ranked in the late 1990s and early 2000s or had inadequate data during that period to be ranked.

Table 1: Hospital Mortality Index—Hospitals

	2005/06		2002/05		Change 02/05–05/06		2002/03	2003/04	2004/05
	Score	Rank	Score	Rank	Score	Rank	Score	Score	Score
Hospital 10	91.2	1	79.6	2	11.6	20	73.0	86.0	79.9
Hospital 222	91.0	2	—	—	—	—	—	—	—
Hospital 204	90.4	3	—	—	—	—	—	—	—
Hospital 67	90.4	4	74.3	30	16.1	5	77.6	80.3	64.9
Hospital 29	90.3	5	75.5	24	14.8	11	71.9	80.8	73.8
Hospital 230	90.1	6	—	—	—	—	—	—	—
Hospital 223	90.1	7	—	—	—	—	—	—	—
Hospital 202	90.0	8	—	—	—	—	—	—	—
Hospital 226	89.6	9	—	—	—	—	—	—	—
Hospital 238	89.5	10	—	—	—	—	—	—	—
Hospital 228	89.4	11	—	—	—	—	—	—	—
Hospital 25	89.4	12	68.7	54	20.7	1	65.2	71.9	69.0
Hospital 50	89.2	13	80.9	1	8.3	31	78.5	86.0	78.1
Hospital 79	89.2	14	74.8	28	14.4	13	75.9	76.5	72.0
Timmins and District Hospital	88.3	15	—	—	—	—	—	—	—
Hospital 97	88.3	16	77	6	11.3	22	77.6	79.8	73.6
Hospital 178	88.3	17	—	—	—	—	—	—	—
Hospital 7	88.3	18	72.9	37	15.4	8	70.0	76.5	72.1
Stratford General Hospital	88.2	19	77.3	5	10.9	24	80.2	72.4	79.2
Hospital 200	88.2	20	—	—	—	—	—	—	—
Hospital 236	88.1	21	—	—	—	—	—	—	—
Hospital 220	88.0	22	—	—	—	—	—	—	—
Hospital 179	88.0	23	—	—	—	—	—	—	—
Hospital 70	88.0	24	68.2	57	19.8	2	57.3	78.8	68.4
Hospital 214	88.0	25	—	—	—	—	—	—	—
Hospital 76	87.8	26	71.9	43	15.9	7	68.5	75.8	71.4
Hospital 212	87.4	27	—	—	—	—	—	—	—
Hospital 15	87.2	28	70.7	47	16.5	4	69.9	76.5	65.9
Hospital 77	87.2	29	75.8	19	11.4	21	74.5	79.1	73.8
Hospital 62	86.6	30	76.4	12	10.2	26	78.5	83.1	67.5
Hospital 71	86.5	31	74.2	31	12.3	16	73.4	77.9	71.4
Hospital 106	86.3	32	70.3	48	16.0	6	74.1	73.2	63.6
Hospital 36	86.2	33	71.1	46	15.1	9	69.4	79.3	64.5
Hospital 211	86.0	34	—	—	—	—	—	—	—
Hospital 104	85.3	35	74.1	32	11.2	23	71.2	79.0	72.1
Hospital 218	85.2	36	—	—	—	—	—	—	—
Hospital 16	85.1	37	70.1	50	15.0	10	62.8	74.6	72.8
Hospital 109	85.0	38	74.9	26	10.1	27	75.3	79.6	70.0
St. Thomas-Elgin General Hospital	84.9	39	75.9	18	9.0	30	72.3	79.9	75.4
Hospital 8	84.9	40	70.3	49	14.6	12	64.7	74.1	72.2

Table 1: Hospital Mortality Index—Hospitals (continued)

	2005/06		2002/05		Change 02/05–05/06		2002/03	2003/04	2004/05
	Score	Rank	Score	Rank	Score	Rank	Score	Score	Score
Hospital 72	84.6	41	72.7	38	11.9	19	72.7	78.9	66.5
Hospital 108	84.4	42	72.3	42	12.1	17	69.8	75.8	71.2
Hospital 80	84.2	43	74.9	27	9.3	28	—	79.6	70.2
Hospital 180	83.7	44	—	—	—	—	—	—	—
Hospital 210	83.2	45	—	—	—	—	—	—	—
Hospital 38	83.1	46	72.3	41	10.8	25	70.4	75.1	71.3
Hospital 44	83.0	47	—	—	—	—	—	—	—
Hospital 59	82.9	48	75.6	23	7.3	32	—	80.0	71.1
Orillia Soldiers' Memorial Hospital	82.8	49	—	—	—	—	—	—	—
Hospital 22	82.4	50	69.3	53	13.1	15	70.0	71.0	67.0
Hospital 96	82.2	51	63	64	19.2	3	63.0	65.9	60.2
Hospital 31	82.2	52	68.2	56	14.0	14	73.1	74.9	56.7
Hospital 203	82.2	53	—	—	—	—	—	—	—
Hospital 43	79.3	54	67.3	59	12.0	18	63.2	71.9	66.8
Hospital 55	79.0	55	74.7	29	4.3	34	68.2	81.4	74.6
Hospital 40	73.8	56	64.6	62	9.2	29	59.8	69.5	—
Hospital 18	72.8	57	67.2	60	5.6	33	60.2	71.7	69.6

Hospital Mortality Index: Municipalities

Note: The Hospital Mortality Index (HMI) is calculated for municipalities using the residence of patients treated in Ontario's acute-care hospitals.

Top-Ranked Municipalities

- The top municipality is Maple with a high HMI score of 91.4 out of 100. This municipality ranked high at second place in 2002/05 but had inadequate data to show a score in the late 1990s.
- The second ranked municipality is Port Perry, with an HMI score of 90.9. Interestingly, Port Perry ranked a relatively low 61st over the period from 2002 to 2005. Data were not available to show a score in the late 1990s.
- The fourth-ranked municipality is Stratford, which also ranked consistently high at second place in the late 1990s and at third place in the early 2000s. Stratford General Hospital scored in the top 20 in 2005/06 and ranked consistently highly (fifth and first) over the previous two time periods, which is not surprising, given that more than 80% of Stratford inpatient stays occurred at that hospital.
- Larger population municipalities with high rankings are: Richmond Hill, ranked 14th; Brampton, ranked 15th; and Ottawa, ranked 20th.

Bottom-Ranked Municipalities

- The lowest-ranked municipality in Ontario is Fort Erie, with a low HMI score of 62.2 for the most recent period but inadequate data from the late 1990s.
- Most of the bottom-ranked municipalities are small and consistently low ranked over the two time periods. Examples are Brockville, Fort Erie, Collingwood, and Gananoque.
- Aylmer West, ranked 57th, sees almost 70% of its inpatients go to St. Thomas-Elgin General Hospital, which has an 39th-place ranking.
- Larger municipalities with low rankings are: Sault Ste. Marie, ranked 72nd; Markham, ranked 73rd; Brantford, ranked 74th; and Sudbury, ranked 80th.

Five Largest Municipalities

- The five largest municipalities in Ontario by number of inpatient stays are: Toronto, ranked 40th on the Hospital Mortality Index with a score of 83.7; Ottawa, ranked 20th with a score of 86.0; Scarborough, ranked 49th with a score of 81.2; Mississauga, ranked 42nd with a score of 83.7; and Hamilton, ranked 37th with a score of 84.3.

Table 2: Hospital Mortality Index—Municipalities

	2005/06		2002/05		Change 02/05–05/06		2002/03	2003/04	2004/05
	Score	Rank	Score	Rank	Score	Rank	Score	Score	Score
Maple	91.4	1	79.2	2	12.2	32	83.7	76.2	77.7
Port Perry	90.9	2	69.4	61	21.5	3	—	74.0	64.8
Orangeville	90.6	3	77.6	6	13.0	26	85.1	68.9	78.9
Stratford	88.9	4	79.1	3	9.8	55	81.9	74.1	81.3
Amherstburg	88.0	5	73.1	29	14.9	13	78.8	77.1	63.6
Wasaga Beach	87.9	6	—	—	—	—	—	—	—
Ajax	87.8	7	76.5	8	11.3	41	80.9	76.5	72.1
Alliston	87.5	8	63.8	92	23.7	2	59.0	58.6	73.9
Leamington	87.3	9	77.9	5	9.4	61	71.0	79.8	82.8
Whitby	87.2	10	74.9	15	12.3	31	74.8	73.1	76.8
Cornwall	87.1	11	70.2	54	16.9	7	71.0	69.5	70.0
Port Hope	86.8	12	66.5	81	20.3	4	72.8	72.1	54.5
Lively	86.7	13	61.2	100	25.5	1	66.0	55.1	62.5
Richmond Hill	86.5	14	72.3	35	14.2	19	78.3	64.7	73.9
Brampton	86.4	15	75.9	11	10.5	49	80.9	72.4	74.3
Bowmanville	86.4	16	74.4	18	12.0	33	69.0	75.7	78.5
Kingsville	86.3	17	70.7	53	15.6	10	—	66.8	74.6
Thornhill	86.3	18	76.7	7	9.6	58	82.2	72.5	75.5
Wallaceburg	86.1	19	68	72	18.1	6	70.3	64.3	69.4
Ottawa	86.0	20	72.8	33	13.2	24	77.2	68.8	72.5
Newmarket	86.0	21	70.7	52	15.3	12	75.8	70.6	65.7
Fergus	85.9	22	72.1	38	13.8	22	—	76.5	67.7
Woodbridge	85.6	23	73	31	12.6	30	72.8	71.9	74.2
Oshawa	85.5	24	73.5	26	12.0	34	76.4	71.1	72.9
Welland	85.4	25	71.2	44	14.2	20	75.6	64.8	73.2
Burlington	85.3	26	70.9	50	14.4	18	74.1	67.6	70.9
Cambridge	85.3	27	73.7	24	11.6	38	75.3	68.3	77.5
Georgetown	84.9	28	70	55	14.9	14	77.5	65.7	66.8
Other	84.8	29	74.4	17	10.4	52	76.4	73.9	73.0
Timmins	84.7	30	73.9	21	10.8	45	75.6	72.2	73.9
Arnprior	84.6	31	79.8	1	4.8	80	79.9	—	79.8
Carleton Place	84.5	32	—	—	—	—	—	—	—
Penetanguishene	84.5	33	78.2	4	6.3	76	—	77.7	78.7
Kitchener	84.4	34	69.5	60	14.9	15	73.9	65.2	69.4
Hawkesbury	84.3	35	—	—	—	—	—	—	—
Sarnia	84.3	36	73.7	23	10.6	47	76.7	71.3	73.1
Hamilton	84.3	37	73.7	22	10.6	48	76.3	69.5	75.5
Oakville	84.3	38	75.6	12	8.7	65	77.0	72.7	77.1
Willowdale	83.9	39	72.3	36	11.6	37	76.3	68.0	72.4
Toronto	83.7	40	72.1	39	11.6	36	74.5	69.8	71.9

Table 2: Hospital Mortality Index—Municipalities (continued)

	2005/06		2002/05		Change 02/05–05/06		2002/03	2003/04	2004/05
	Score	Rank	Score	Rank	Score	Rank	Score	Score	Score
Parry Sound	83.7	41	71	47	12.7	28	71.4	69.1	72.6
Mississauga	83.7	42	70.9	49	12.8	27	73.8	68.5	70.4
Etobicoke	83.5	43	68.8	69	14.7	16	71.2	67.7	67.4
Windsor	83.1	44	72.4	34	10.7	46	76.1	68.1	73.0
London	82.9	45	73	30	9.9	53	77.2	70.6	71.3
Barrie	82.2	46	75.1	14	7.1	73	78.7	75.7	71.0
Peterborough	81.8	47	65.4	86	16.4	8	75.4	57.8	62.9
Thunder Bay	81.4	48	73.9	20	7.5	69	77.9	70.3	73.6
Scarborough	81.2	49	69.7	57	11.5	39	75.1	64.3	69.6
Rural	81.1	50	71.3	43	9.8	56	74.9	68.4	70.8
Pickering	81.0	51	73.6	25	7.4	70	82.3	67.4	71.2
Weston	80.8	52	69.4	62	11.4	40	74.9	64.6	68.6
Downsview	80.7	53	65.2	88	15.5	11	71.4	62.3	62.0
Pembroke	80.3	54	64.1	90	16.2	9	64.1	63.8	64.6
Kingston	80.1	55	68.4	70	11.7	35	68.0	65.0	72.4
Aurora	79.7	56	72.2	37	7.5	68	75.2	69.7	71.7
Aylmer West	79.7	57	76.1	10	3.6	82	78.8	71.8	77.7
North York	79.6	58	67	78	12.6	29	73.5	54.5	73.0
Bolton	79.5	59	73.3	28	6.2	77	77.1	72.2	70.4
Bracebridge	79.4	60	69.6	59	9.8	54	77.5	67.8	63.5
Midland	79.3	61	66.3	84	13.0	25	78.7	59.8	60.5
Belleville	79.1	62	68	73	11.1	42	69.0	62.5	72.4
Cobourg	79.1	63	60.9	102	18.2	5	72.2	58.0	52.4
St. Catharine	79.0	64	67.9	74	11.1	43	73.9	63.3	66.4
Woodstock	78.8	65	69.1	64	9.7	57	72.1	70.2	64.8
Owen Sound	78.7	66	74.1	19	4.6	81	69.1	75.2	78.0
Milton	78.7	67	69.6	58	9.1	63	75.3	65.3	68.3
Stouffville	78.5	68	71.2	45	7.3	71	77.5	72.5	63.5
Chatham	78.4	69	69	66	9.4	60	72.7	63.9	70.3
Orillia	78.4	70	68.9	68	9.5	59	68.8	68.2	69.6
Grimsby	78.3	71	67.5	76	10.8	44	67.4	63.7	71.4
Sault Ste. Marie	78.3	72	74.9	16	3.4	83	81.3	72.2	71.1
Markham	78.0	73	64.2	89	13.8	21	69.9	60.4	62.2
Brantford	77.5	74	71.2	46	6.3	75	75.3	69.6	68.6
Bradford	77.5	75	72	40	5.5	78	67.8	76.3	—
Niagara Falls	77.4	76	66.9	79	10.5	50	73.1	63.1	64.6
Collingwood	77.1	77	62.5	96	14.6	17	72.8	59.3	55.3
Guelph	77.0	78	69.1	63	7.9	67	69.2	67.4	70.8
St. Thomas	76.9	79	66.4	83	10.5	51	69.1	60.7	69.4
Sudbury	76.2	80	70.7	51	5.5	79	71.2	70.5	70.5

Table 2: Hospital Mortality Index—Municipalities (continued)

	2005/06		2002/05		Change 02/05–05/06		2002/03	2003/04	2004/05
	Score	Rank	Score	Rank	Score	Rank	Score	Score	Score
Napanee	76.1	81	69	65	7.1	72	71.6	71.8	63.7
Gananoque	75.4	82	61.8	98	13.6	23	61.1	—	62.4
North Bay	75.4	83	66.1	85	9.3	62	68.6	59.3	70.5
Keswick	75.2	84	73	32	2.2	85	71.0	68.6	79.4
Innisfil	74.5	85	75.2	13	-0.7	86	83.7	67.3	74.6
Lindsay	73.9	86	71.5	41	2.4	84	70.6	73.3	70.6
Port Colborne	73.6	87	65.3	87	8.3	66	73.8	64.0	58.2
Tillsonburg	73.1	88	66.5	80	6.6	74	68.9	69.0	61.7
Brockville	71.7	89	62.6	95	9.1	64	—	63.8	61.4
Paris	71.3	90	—	—	—	—	—	65.1	—
Uxbridge	71.1	91	—	—	—	—	—	67.4	—
Huntsville	66.6	92	71.4	42	-4.8	88	—	62.6	80.2
Fort Erie	62.2	93	64	91	-1.8	87	71.0	58.2	62.8

Conclusion

The Fraser Institute's *Hospital Report Card: Ontario 2008* provides a comprehensive measure of inpatient acute-care conditions in Ontario hospitals. This is the second edition of an annual report card for patients in Ontario, and its publication follows the introduction of a similar report for patients in British Columbia (*Hospital Report Card: British Columbia 2008*). Future editions of The Fraser Institute's *Hospital Report Card* will include performance measurement of acute-care hospitals in other provinces. We welcome comments on the content and format of this report via <comments@hospitalreportcards.ca>.

Introduction and background

The goal of the Fraser Institute's *Hospital Report Card: Ontario 2008* is to contribute to the improvement of inpatient care in Ontario by providing hospital-specific information about quality of service directly to patients and to the general public. This series is the first in Canada to empower patients to make informed choices about their health-care delivery options by providing comparable, hospital-specific, performance measurements on clearly identified indicators. The Fraser Institute's *Hospital Report Card: Ontario 2008* has been published to promote accountability within hospitals, thereby stimulating improved performance through an independent and objective measurement of performance.

Introduction

In Canada, individuals have access to data identifying problem areas in an automobile from information willingly supplied by consumers, the vehicle's manufacturer, and industry experts. They can find which CD player is the best on the market for their needs. They can compare restaurants before heading out for an evening meal. Yet when it comes to health care, which many will consider more important for an individual's well being, consumers are left with remarkably little information about where the best services are available. They cannot even tell which hospitals offer the worst care or have the highest mortality rates (Esmail, 2003).

What Are Hospital Report Cards? [1]

[1] Daniel P. Kessler of Stanford University, Hoover Institution provides a helpful delineation of the field in a PowerPoint® slideshow entitled "Health Care Quality Report Cards."

Hospital report cards provide a set of consistent performance measurements to rank the products in question and help inform consumer choice. In some cases, these indicators may be subjective, or based on the opinions of survey respondents. In other cases, the indicators will be objective measures of performance or outcomes.

Hospital report cards are used to measure specific practices in hospitals such as the application of a specific drug or technology to certain events; or performance with respect to access to care or consumer friendliness; or to measure the likelihood of a positive outcome provided by health facilities in a specific jurisdiction.

The Four Primary Types of Hospital Report Cards

1 Process Report Cards This type of report card describes the inputs used by hospitals, health plans or individual physicians in the course of treating their patients. An example of these types of report cards can be found in those commissioned by The Leapfrog Group (Leapfrog Group, 2005). [2] The primary strength of a Process Report Card is that it can be developed from existing medi-

[2] Further information available at <http://www.leapfroggroup.org/>.

cal administrative databases with relative ease. The process report card, however, does not necessarily measure the appropriateness, the quality, or the importance of the inputs employed in ensuring good health, although these factors can be captured to some extent by the inclusion or exclusion of specific inputs.

2 Survey Report Cards These types of report cards are composed of patients' evaluations of their quality of care and/or customer service. An example of this type of report card is found in the Pacific Business Group on Health's (PBGH) *Healthscope* reports. Although survey-based report cards do provide valuable information on subjective areas of patient care, they cannot measure how treatment decisions by a doctor or hospital lead to objective improvements in patient care.

3 Outcomes Report Cards These report cards present average levels of adverse health outcomes based on mortality or complication rates experienced by patients as part of a health plan, as treated by a specific doctor, or in a specific hospital. An example of this type of report card can be found in the *Pennsylvania CABG* surgery reports (Pennsylvania Health Care Cost Containment Council, 2006). [3] These report cards provide objective measures of differences in the quality of care but are susceptible to being "gamed" by either doctors or hospitals. For example, the doctor or hospital may avoid exceptionally sick patients (that is, patients who are qualitatively more ill with a listed condition and who will consequently drag average results down) in favour of healthy patients (to skew results upward). This unintended effect can, however, be mitigated through the appropriate application of risk-adjustment in the measures. Outcomes report cards (including The Fraser Institute's *Hospital Report Card*) provide the most empirically sound basis for analyzing the quality of care.

[3] Further information available at <http://www.phc4.org/reports/cabg/>.

4 Balanced Scorecards The balanced scorecard was developed in the early 1990s by Drs. Robert Kaplan and David Norton to examine a business above and beyond the financial bottom line. Translated into the healthcare field, this results in four quadrants. In the case of the *Ontario Hospital Reports* series, a prime example of the use of a "balanced scorecard," these are [a] financial performance and conditions; [b] patient/client satisfaction; [c] clinical utilization and outcomes; and, [d] system integration and change. While this variant of report card is useful in determining the broadest view of a hospital's operations and functions, specific and relevant indicators regarding hospital performance may be overlooked.

Why Are Hospital Report Cards Published?

The publication of hospital report cards is based on the concept that publishing outcomes data can both improve the quality of care in hospitals and inform patients' healthcare decision-making. Armed with more information based on a set of repeatable measurements about the relative performance of caregivers, both patients and physicians are able to make a more informed choice about which

facility or provider to select for a given condition. This allows for a rational discussion of relative levels of quality of service provision and eliminates measurement based on anecdotal information, which can be misleading and ultimately harmful.

Where Are Hospital Report Cards Published?

The United States of America

The United States was one of the first nations to begin measuring, comparing, and publishing measurements of hospital performance. Hospital report card initiatives were first undertaken by the federal government, with state governments following its lead. Private-sector information providers offering several competing reports on provider quality have refined the reporting of information.

In 1987, the first US hospital report cards were published by the Health Care Financing Administration (HCFA). These reports detailed annual mortality rates that were measured from the records of hospitalized Medicare patients. However, due to extensive criticism regarding the accuracy, usefulness, and interpretability of the HCFA's mortality data, this initiative was withdrawn in 1993 (Berwick and Wald, 1990).

In the late 1980s, the state of New York began the Cardiac Surgery Reporting System (CSRS), which collected data from patients' medical histories and recorded whether they died in hospital following surgery. From these data, New York was able to report detailed physician-specific statistics. While the information contained in the CSRS was not originally intended to provide the public with information about the performance of their provider, the news media understood the public's desire for such data and saw the benefit in publishing the information. In December of 1990, the *New York Times* used this information to publish a list of local hospitals, which ranked facilities according to their mortality rates for Coronary Artery Bypass Surgery (CABG). Invoking the *Freedom of Information Act*, the *New York Newsday* sued the New York State Department of Health to obtain access to its database on bypass surgery and on cardiac surgeons. The goal was to publish physician-specific death rates for patients. The Supreme Court of New York ruled that it was in the public's best interests to have access to these mortality data in order to make informed decisions about their health care (Zinman, 1991). As a result, *New York Newsday* was able to publish the information on physician performance for citizens to assess where the best care was available. Driven by this development, the New York State Department of Health began publishing annual editions of the *Coronary Artery Bypass Surgery Report* in 1996 (New York State, Department of Health, 2005). [4]

Following the precedent set by this pioneering case, a wide variety of hospital performance reports began to be produced in the 1990s by a disparate group of authors that ranged from the news media, coalitions of large employers, consumer advocacy organizations, and state governments (Marshall et al., 2003). Many different development paths have been taken so that there is currently no "standardized" hospital report card or agreement on the indicators to measure.

[4] Links to the entire series of reports can be found at <http://www.health.state.ny.us/nysdoh/heart/heart_disease.htm>.

Furthermore, these different reports range widely in terms of both quality and comprehensiveness. Indeed, as Marshall and colleagues cheekily note: "Public reporting in the United States is now much like healthcare delivery in that country: It is diverse, is primarily market-based, and lacks an overarching organizational structure or strategic plan. Public reporting systems vary in what they measure, how they measure it and how (and to whom) it is reported." [5] Of course, for patients who are the beneficiaries of such competition between information providers, each of whom strives to deliver a product in some way superior to his competitors, this is no bad thing.

[5] Document available at <www.medscope.com/viewarticle/452953_3>.

Examples of American Private and Public Information Providers

[1] America's Best Hospitals—USNEWS & World Report <http://www.usnews.com>.

[2] Healthgrades <http://www.healthgrades.com>

[3] Leapfrog Group <http://www.leapfroggroup.org>

[4] National Committee for Quality Assurance (NCQA) <http://www.ncqa.org>

[5] National Quality Forum <http://www.qualityforum.org>

[6] Quality Check <http://www.jointcommission.org/PerformanceMeasurement/PerformanceMeasurement/>

[7] Cardiac Surgery in New Jersey <http://www.state.nj.us/health/reportcards.htm>

[8] Cardiac Surgery Reports <http://www.health.state.ny.us/nysdoh/healthinfo/index.htm>

[9] Pennsylvania Hospital Performance Reports <http://www.phc4.org>

[10] Indicators of Inpatient Care in New York Hospitals <http://www.myhealthfinder.com>

[11] Indicators of Inpatient Care in Texas Hospitals <http://www.dshs.state.tx.us/THCIC/>

[12] Maryland Hospital Performance Evaluation Guide <http://www.hospitalguide.mhcc.metro-data.com>

The United Kingdom

The hospital reporting universe in the United Kingdom is a fraction of the US market's size. League tables [6] of death rates for English hospitals were available from 1992 to 1996 (Leyland and Boddy, 1998) and mortality statistics for English hospitals were published by the Labour government in 1998. Although publicly released, these were intended for managerial use and had little discernible impact (Street, 2002). The first initiative designed for public consumption was the Patient's Charter (National Health Service, 1991), [7] which focused on waiting times as opposed to clinical quality.

[6] A league table ranks the performance of a range of institutions.

[7] Further information can be found at <http://www.pfc.org.uk/medical/pchrt-e1.htm#foreword>.

In 1998, the National Health Service (NHS, Britain's tax-funded and universal medical insurance program) adopted a new Performance Assessment

Framework (PAF) to report clinical outcomes at the hospital level (London: Department of Health, 1998). It focused on health gain, fair access, effective delivery of services, efficient delivery of services, health outcomes, and patient/career experience. This initiative received prominence in 2001 as the NHS Plan became the first government plan in the developed world to deal explicitly with report cards. Beginning in September 2001, the UK Department of Health began to publish a new rating system for all NHS non-specialist hospitals in England. The performance of hospitals included in this survey was classified into one of four categories, ranging from zero to three stars based on the hospital's performance on a range of indicators and the outcome of their clinical governance review by the Commission for Health Improvement (CHI). As an additional incentive for improvement, beyond that assumed to come with public reporting of performance, the Department of Health mandated that hospitals scoring at the high end of the scale would receive greater funding and autonomy, while those at the bottom of the scale would be subject to greater government oversight and intervention. For example, those receiving zero stars were subject to investigations and underwent changes in management where necessary.

Although the lion's share of reporting in Britain has been by and at the direction of government, an independent initiative entered the arena in the latter half of 2000 when Tim Kelsey and Jake Arnold-Forster, a pair of *Sunday Times* journalists, founded Dr. Foster to generate authoritative independent information about local health services on the web at <http://www.drfoster.co.uk>. The partnership is in the form of a 50:50 joint venture involving the new Health and Social Care Information Centre (a special health authority of the NHS) and Dr. Foster, a commercial provider of healthcare information. Numerous publications have emerged from this initiative including the *Good Birth Guide* and the annual *Good Hospital Guide*, which was first published in 2001 and continues to be published annually. These guides contain information about hospital-specific mortality rates; the total number of staff; wait times; numbers of complaints; as well as, uniquely, private hospital prices for services.

Canada

Hospital reporting initiatives, like those in both the United States and the United Kingdom, have emerged in Canada only recently. In 1998, the Ontario Hospital Association produced a report card comparing the hospitals covered by its organization. Undertaken by a research group at the University of Toronto, the publication focused upon inpatient acute care and reported results at both peer group and regional levels of aggregation, but not for individual facilities. *Hospital Report '99*, published the following year, saw the first reporting of hospital-specific acute-care hospital performance indicators in Canada. In 2000, the Government of Ontario joined as a partner in the enterprise and the scope of the report was expanded to include such areas as complex continuing care, mental health, rehabilitation, and emergency department care. In addition, specific reports dealing with women's health, the health of the population as a whole, and nursing care were also produced. These publications have since appeared annually. The

Hospital Report Series appears in a "balanced scorecard" format and assesses the performance of hospitals in four quadrants including: [a] financial performance and conditions; [b] patient/client satisfaction; [c] clinical utilization and outcomes; and [d] system integration and change.

Other notable reporting initiatives in Canada include Canadian Institute for Health Information's *Hospital Standardized Mortality Ratio* (discussed below), *Healthcare Performance Measurement in Canada: Who's Doing What?* (Baker et al., 1998), *Quality of Cardiac Care in Ontario* (ICES, 2004) [8] and *The State of Hospital Care in the GTA/905* (GTA/905 Healthcare Alliance, 2005). [9] Additionally, two publications that have reported on patient safety and adverse events are *The Ottawa Hospital Patient Safety Study* (Forster et al., 2004) [10] and *The Canadian Adverse Events Study* (Baker et al., 2004), though neither reported institution-specific measures. [11] Additionally, for the last 17 years, The Fraser Institute has published *Waiting Your Turn: Hospital Waiting lists in Canada*, a report that provides Canada's only national, comparable, and comprehensive measurement of waiting times for medically necessary treatment (Esmail and Walker with Bank, 2007). [12] Another Fraser Institute initiative is *How Good is Canadian Health Care? An International Comparison of Health Care Systems* (Esmail and Walker, 2007) [13], which compares Canada's health policies and healthcare performance with other nations that guarantee their citizens access to healthcare insurance.

Other avenues of hospital performance reporting and monitoring in Canada have largely been in the form of private hospital assessments of performance by a contracted third party using a proprietary performance indicator methodology. A prime example of this is the work done by the Hay Group in rating the performance of participating Ontario hospitals for a fixed fee per facility (Hay Group, 2005).

[8] Report available at <http://www.ices.on.ca/WebBuild/site/ices-internet-upload/file_collection/Ccort%5FFull%5FReport%2Epdf>.

[9] Further details available at <http://www.gta905health.com/mediaroom/2005-may3.html>. Report available at <http://www.gta905health.com/whatsnew/gta905-hospitalreport.pdf>.

[10] Article available at <http://www.pubmedcentral.gov/articlerender.fcgi?tool=pubmed&pubmedid=15078845>. Also, the Manitoba Center for Health Policy recently released an in-hospital patient safety report using the AHRQ Patient Safety Indicators (Bruce et al., 2006).

[11] Article available at <http://www.cmaj.ca/cgi/content/full/170/11/1678>.

[12] Report available at <http://www.fraserinstitute.org/commerce.web/publication_details.aspx?pubID=4962>.

[13] Report available at <http://www.fraserinstitute.org/commerce.web/publication_details.aspx?pubID=5035>.

Canadian Institute for Health Information's Hospital Standardized Mortality Ratio (HSMR)

The Canadian Institute for Health Information (CIHI) published its own measure of hospital and regional performances, the *Hospital Standardized Mortality Ratio* (HSMR), in 2007. While both CIHI's measure and the *Hospital Report Card: Ontario 2008* use data from CIHI's Discharge Abstract Database, there are several significant differences between the measure published by CIHI and those published by The Fraser Institute. These differences make comparisons between the two reports difficult and lead to the conclusion that CIHI and the *Hospital Report Card: Ontario 2008* are measuring mortality in two very different ways.

The most significant difference between the measures published by The Fraser Institute and those published by CIHI is the level of detail available. According to the CIHI report, the *Hospital Standardized Mortality Ratio* (HSMR) is a "big dot summary" measure (CIHI, 2007: 4), or a measure that "tracks progress on broad outcomes at a system level" (2007: vii). More specifically, the HSMR is a composite measure of mortality in diagnosis groups that comprise 80% of all deaths in acute-care facilities. These include:

- Acute pancreatitis
- Acute renal failure
- Adult respiratory distress syndrome
- Alcoholic liver disease
- Alzheimer's disease
- Acute myocardial infarction
- Angina pectoris
- Aortic aneurism and dissection
- Atrial fibrillation and flutter
- Cardiac arrest
- Cerebral infarction
- Chronic ischemic heart disease
- Chronic obstructive pulmonary disease
- Chronic renal failure
- Complications of procedures, not elsewhere classified
- Convalescence
- Diabetes mellitus type 2
- Diffuse non-Hodgkin's lymphoma
- Diverticular disease of intestine
- Fibrosis and cirrhosis of liver
- Heart failure
- Hepatic failure
- Hip fracture
- Intracerebral hemorrhage
- Intracranial injury
- Lymphoid leukemia
- Malignant neoplasm of bladder
- Malignant neoplasm of brain
- Malignant neoplasm of breast
- Malignant neoplasm of bronchus and lung
- Malignant neoplasm of colon
- Malignant neoplasm of liver and intrahepatic bile ducts
- Malignant neoplasm of pancreas
- Malignant neoplasm of prostate
- Malignant neoplasm of stomach
- Malignant neoplasm without specification of site
- Multiple myeloma and malignant plasma cell neoplasms
- Myeloid leukemia
- Other and unspecified types of non-Hodgkin's lymphoma
- Other bacterial intestinal infections
- Other diseases of digestive system
- Other diseases of intestine
- Other disorders of brain
- Other disorders of fluid, electrolyte and acid-base balance
- Other disorders of urinary system
- Other interstitial pulmonary diseases
- Other non-traumatic intracranial hemorrhage
- Paralytic ileus and intestinal obstruction without hernia
- Peritonitis
- Pleural effusion, not elsewhere classified
- Pneumonia
- Pneumonitis due to solids and liquids
- Post-procedural respiratory disorders, not elsewhere classified
- Pulmonary embolism
- Respiratory failure
- Secondary malignant neoplasm of other sites
- Secondary malignant neoplasm of respiratory and digestive organs
- Septicemia
- Shock, not elsewhere classified
- Stroke, not specified as hemorrhage or infarction
- Subarachnoid hemorrhage
- Unspecified dementia
- Unspecified renal failure
- Vascular disorders of intestine
- Volume depletion

By comparison, the measures published in the *Hospital Report Card: Ontario 2008* allow for the examination of hospital performance in specific and detailed areas, thus providing patients with a greater level of information regarding their particular interest or diagnosis and allowing providers greater insight into the areas of care that are of particular concern in their facilities. In the latest year of data, 39 specific and well-defined indicators of quality of care are examined in The Fraser Institute's report. The composite measure published in the *Hospital Report Card: Ontario 2008*, the Hospital Mortality Index (HMI), is also a more specific measure of mortality in acute-care hospitals than CIHI's composite measure and includes only the following nine measures:

- Hip replacement mortality (IQI 14)
- Acute myocardial infarction mortality (IQI 15)
- Congestive heart failure mortality (IQI 16)
- Acute stroke mortality (IQI 17)
- Gastrointestinal hemorrhage mortality (IQI 18)
- Hip fracture mortality (IQI 19)
- Pneumonia mortality (IQI 20)
- Death in low mortality Diagnosis Related Groups (PSI 2)
- Failure to rescue rates (PSI 4)

Further, the *Hospital Standardized Mortality Ratio* (HSMR) is a relative measure, giving a measure of a hospital's or region's performance relative to Canada's performance as a whole in 2004. The indicator measures the ratio of the actual number of deaths for a hospital or region given its case mix (age, sex, length of stay, diagnosis group, etc. of its patients) to the number of deaths that would be expected according to national estimates in 2004. [14] Conversely, the 39 indicators published in the Hospital Report Card [15] and the Hospital Mortality Index (HMI) composite measure give an absolute measure of patient safety or in-patient quality of care.

These significant differences in the approaches used by CIHI and the *Hospital Report Card: Ontario 2008* lead to the conclusion that the two measures cannot be compared with one another directly. Further, the relative rankings of hospitals are not necessarily comparable because of differences in what is being measured in the HSMR and the various indicators of the *Hospital Report Card: Ontario 2008* or the HMI composite measure, and because of the differences between an absolute and relative measure (i.e. for a given indicator, a hospital or region performing better than the Canadian average will not necessarily score highly if the Canadian average is low). In addition to these significant differences in approach is a difference in risk-adjustment methodologies: the indicators in the *Hospital Report Card: Ontario 2008* are risk-adjusted using the publicly-available 3M/AHRQ methodology/software and are not risk adjusted in the manner developed and employed by CIHI for the HSMR.

However, while the two sets of measures cannot be directly compared, it is nevertheless true that the HSMR provides a measure of hospital mortality that can be used in conjunction with the HMI and the other measures produced in the *Hospital Report Card: Ontario 2008*. [16] Both sets of measures are based on an internationally validated and commonly applied methodology, and both sets of measures can provide patients and providers with insight into where mortality rates are unacceptably high or exceptionally low. [17] In this sense, the authors of this report welcome CIHI's measure and hope that greater reporting of, and attention to, provider performances on mortality leads to improved outcomes from care for Canadians.

[14] The number of deaths is computed for the 65 diagnosis groups listed above, accounting for 80% of in-patient mortality.

[15] In some years, more than 39 indicators are available (see Appendix G).

[16] Note that the regional results published by CIHI are based on where patients were treated, while municipal measures published in the *Hospital Report Card* are based on where patients lived.

[17] It is worth noting that CIHI began working with the HSMR measure for Canada in 2005 while The Fraser Institute's research program on the *Hospital Report Card* began in 2004. Further, The Fraser Institute's *Hospital Report Card* was the first publicly available report in Canada that allowed the comparison of mortality rates in Canadian hospitals based on a standardized measure. A significant advantage of the CIHI's report over the *Hospital Report Card: Ontario 2008* is that it names all hospitals for which data is published while many hospitals in Ontario elected to remain unnamed in the report produced by The Fraser Institute.

What Are the Measurable Impacts of Patient Safety and Hospital Report Cards?

In the United States, hospital report cards have had a number of measurable impacts on performance and the quality of patient care. The first and most notable example came from the *New York State Cardiac Surgery Report*. Hannen et al. (1994)

reported an associated 41% decline in the risk-adjusted mortality rate of Coronary Artery Bypass Graft patients with the publication of these outcomes statistics and data. A similar overall trend was experienced in Pennsylvania and New Jersey following the publication of their report cards. [18]

These findings have also created controversy about the Cardiac Surgery Reporting System, the database used to create the New York State Surgery Report. Critics have raised pertinent questions regarding "up-coding" [19] and the possibility that hospitals have decided not to operate on some complex and critically ill patients and have referred such complex cases to out-of-state jurisdictions (McKee and Healy, 2000). In contrast, using data from the *Cardiac Surgery Reporting System Report* (CSRS) for the period from 1991 to 1999, researchers at the National Bureau of Economic Research found that the reporting program had an impact on the volume of cases and the future quality at hospitals identified as poor performers. Those identified as weaker hospitals lost some relatively healthy patients to competing facilities with better records. Subsequently, these "weaker" hospitals experienced a decline of 10% in the number of patients during the first 12 months after an initial report, and this decrease remained in place for three years. Consequently, patients choosing these hospitals demonstrated a decrease in their risk-adjusted mortality rate by approximately 1.2 percentage points (Cutler et al., 2004). [20]

Though subject to a number of caveats regarding the design and structure, report cards have had a beneficial impact on the quality of healthcare delivery in those regions where they are published.

[18] For Pennsylvania data, see *Cardiac Care: Pennsylvania's Guide to Coronary Artery Bypass Graft Surgery 1994–1995*, <http://www.phc4.org/reports/cabg/95/default.htm> (April 2, 2002). For New Jersey, see *Report Shows Cardiac Surgery Death Rates Decline to Lowest Level in a Decade* (press release), <http://nj.gov/cgi-bin/dhss/njnewsline/view_article.pl?id=3046> (March 2008). For the northern New England initiative, see G.T. O'Connor et al., "A Regional Intervention to Improve the Hospital Mortality Associated with Coronary."

[19] "Up-coding" is a term used to describe when financial incentives cause a physician or hospital to exaggerate or falsely represent patients' medical conditions and services provided in order to increase payment received from the government.

[20] <http://papers.nber.org/papers/w10489>.

Hospital Report Card: Ontario 2008

The primary focus of this project was the construction of a patient-friendly hospital and patient-care report card focused on clinical outcomes. The report itself includes information about all health facilities treating patients through the Ontario Health Insurance Program, 30 of which (out of a total of 136) are identified in the report. [21] The report is built on a recognized hospital-report-card methodology from the Agency for Healthcare Research & Quality (AHRQ) in the United States that is also used in more than 12 US States including New York, Texas, Colorado, [22] California, Florida, Kentucky, Maryland, Massachusetts, Minnesota, New Jersey, Oregon, Utah, Vermont, and parts of Wisconsin.

1 What Are the AHRQ Inpatient Quality and Patient Safety Indicators?

The first stage of the research process in producing this report was to acquire or create a methodology that was reliable, easily understood by the public and participants, and that produced an accurate measurement of provider performance. An initial period of examining performance indicator frameworks from earlier literature on hospital report cards provided a number of different examples of

[21] These facilities voluntarily participated in this project. Other facilities in Ontario either declined or offered no response to our requests for participation/identification. Readers should note that the participation rate declined from 43 facilities in FY 2004 to 30 facilities in FY 2005.

[22] New York <http://www.myhealthfinder.com; Texas <http://www.dshs.state.tx.us; Colorado <http://www.hospitalquality.org>.

accepted and proven methodologies that were not otherwise proprietary information and thus could be employed by The Fraser Institute. [23] The search also turned up methodologies that, though available, would be less effective in providing a patient-friendly clinical outcomes-focused hospital report card.

Further examination of these available methodologies led to the selection of the performance indicator framework developed by AHRQ in the United States. [24] AHRQ's indicator modules were chosen because they represent a comprehensive set of indictors that are widely used, highly regarded, and applicable to any hospital inpatient administrative data. They are readily available and relatively inexpensive to use. Importantly, they comprise an ideal set of indicators to allow a patient-friendly, clinical outcomes-focused, hospital-specific patient care report card.

The AHRQ indicators date from the mid-1990s when AHRQ developed a set of quality measures, or indicators, that required only the information found in routine hospital administrative data: diagnoses and procedures codes, patient age, gender, other basic demographic and personal information, source of admission, and discharge status. These indicators, 33 in all, made up the Healthcare Cost and Utilization Project (HCUP) Quality Indicators, designed to be used by hospitals to assess their inpatient quality of care as well as by the State and community to assess access to primary care. [25] Although they could not be used to provide definitive measures of the quality of health care directly, they are used to provide indicators of healthcare quality. They serve as the basis for subsequent in-depth investigation of issues of quality and patient safety at the facility level.

In the years following the release of the HCUP, both the knowledge base regarding quality indicators increased and newer risk adjustment methods developed. Following input from then-current users, as well as advances in the specific indicators themselves, AHRQ underwrote a project to develop and further refine the original Quality Indicators. This project was undertaken by the University of California San Francisco-Stanford Evidence-based Practice Centre. The results of this research were the AHRQ Quality Indicators, which are currently used to measure hospital performance in more than 12 US States including New York, Texas, Colorado, California, Florida, Kentucky, Maryland, Minnesota, New Jersey, Oregon, Utah, Vermont and parts of Wisconsin.

AHRQ indicators Are Organized in Four Modules [26]

[1] Prevention Quality Indicators (PQIs) [27] Consisting of ambulatory care sensitive conditions, these indicators pertain to hospital admissions that could have been prevented via high-quality outpatient care.

[2] Inpatient Quality Indicators (IQIs) These indicators reflect the quality of care inside hospitals and include such items as inpatient mortality; the utilization of procedures where there are questions of misuse, overuse, or underuse; and volume of procedures from which evidence shows that a higher volume of procedures is associated with a lower rate of mortality.

[23] For a clear example of how individual report card methodologies are proprietary, please refer to Healthgrades user agreement at <http://www.healthgrades.com/aboutus/index.cfm?fuseaction=modnw&modtype=content&modact=UserAgreement>.

[24] An agency of the US federal government's Department of Health and Human Services.

[25] Further information regarding the HCUP Quality Indicators can be found at <http://www.qualityindicators.ahrq.gov/hcup_archive.htm>.

[26] The Fraser Institute's *Hospital Report Card* is composed of 50 indicators from the quality and safety modules of the AHRQ system (see Appendix E for a list of all indicators used in this report). Not all indicators are available for all years.

[27] The PQIs identify the quality of care for ambulatory care-sensitive conditions and are measures of the overall healthcare system. Since the *Hospital Report Card* was designed to analyze the care inside acute-care hospitals, the PQIs were omitted from this report.

[3] Patient Safety Indicators (PSIs) These indicators focus upon preventable instances of harm to patients such as complications arising from surgery and other iatrogenic [28] events.

[4] Pediatric Quality Indicators (PDIs) [29] These indicators examine the quality of pediatric inpatient care, as well as the quality of outpatient care that can be inferred from inpatient data, such as potentially preventable hospitalizations. [30]

The Fraser Institute's *Hospital Report Card* uses the Inpatient Quality Indicators and Patient Safety Indicators indicators; it is made up of 50 of the 63 available indicators in these categories [31]. These two modules were chosen because of their widespread use and high quality record.

The AHRQ indicator modules are designed to be used with data from administrative databases in the United States, which themselves are primarily used by hospitals for billing purposes. This type of record, referred to as "administrative data" consists of diagnoses and procedures codes along with information about a patient's age, gender, and discharge status. The Canadian counterpart is the Canadian Institute for Health Information's Discharge Abstract Database (DAD), which contains demographic, personal, administrative, and clinical data for hospital discharges (inpatient acute, chronic, rehabilitation) and day surgeries.

The indicators in The Fraser Institute's *Hospital Report Card* analyze over 9.5 million patient records extracted from the DAD for the period of fiscal years 1997/98 to 2005/06. The data are also risk-adjusted using the 3M™ All Patient Refined™ DRG (APR™-DRG) software, commonly recognized to be the gold-standard system for risk-adjusting hospital data [32]. The AHRQ IQIs were in fact designed to be used in conjunction with 3M™ All Patient Refined Diagnosis Related Groups™ (APR™-DRG) software, which risk adjusts the IQIs for patients' clinical conditions and severity of illness or risk of mortality.

Participation in the report card project was not mandatory for hospitals in Ontario. Of Ontario's 136 acute care facilities, 30 hospitals, representing 54,316 inpatient records or 4.94% of inpatient records in Ontario (in Fiscal 2005/06), agreed to have their institution identified (see Appendix D for a list of participating institutions).

Since this report is based on administrative data, the results have limitations. Coding variations exist among hospitals and codes do not always provide specific details about a patient's condition at the time of admission or capture all that occurs during hospitalization. For these reasons, individual judgment often is required while reviewing the results from this report.

When reviewing mortality or other quality and patient safety measures, remember that medicine is not an exact science and death or complications will occur even when all standards of care are followed. Deciding on treatment options and choosing a hospital are decisions that should be made in consultation with a physician. It is not recommended to choose a hospital based solely on statistics and descriptions such as those given in this report.

[28] An iatrogenic event is one that is inadvertently caused by a physician, a medical/surgical treatment, or a diagnostic procedure.

[29] The PDI module became available in February 2006 and was therefore not used in the first edition of the *Hospital Report Card* for Ontario. The PDI module is being considered for future updates of the *Hospital Report Card*s.

[30] For details, please see <http://www.qualityindicators.ahrq.gov/pdi_download.htm>.

[31] Intrinsic differences between ICD9/CCP and ICD10CA/CCI resulted in several indicators being reported in either data coded in ICD9/CCP (DAD data from FY1997 to FY2001) or data coded in ICD10CA/CCI (DAD data from FY2002 to FY2005), but not both (see Appendix G for details). Moreover, three indicators were dropped in the last year due to changes in the AHRQ software.

[32] For further details, please refer to Appendix B and <http://www.3m.com/us/healthcare/his/products/coding/refined_drg.jhtml>.

2 Data Quality

CIHI's Discharge Abstract Database (DAD) contains information on hospital stays in Canada. Various CIHI publications note that the DAD is used extensively by a variety of stakeholder groups to monitor the use of acute-care health services, conduct analyses of health conditions and injuries, and increasingly to track patient outcomes. [33] The DAD is a major data source used to produce various CIHI reports, including annual reports on the performance of the hospitals and health-care system and for seven of the health indicators adopted by the federal, provincial, and territorial governments. [34] These data have been used extensively in previous reports on health-care performance and form the basis for many journal articles. [35]

In order to produce good information about data quality, CIHI established a comprehensive and systematic data-quality program, whose framework involves 24 characteristics relating to five data quality dimensions of accuracy, timeliness, relevance, comparability, and usability. [36]

There have been reports on data quality that we have assessed, including up-coding allegations in Ontario but those applied to information earlier in our dataset. We also considered the effect that SARS could have on the results, as 44 patients died in Ontario from SARS between February and July 2003 and hospital operations were affected. However, we note that the median HMI score rose by 6.6 points in 2003 and dropped by 6.5 points in 2004, leaving the score virtually unchanged between 2002 and 2004 at 71.3. It is difficult to discern a SARS effect in these data, something supported by recent research at ICES in Toronto. [37]

There are a number of publications that have addressed data-quality issues, which are discussed in our report. Of note are CIHI's reabstraction studies that go back to the original patient charts and recode the information using a different set of expert coders. [38]

The reabstraction studies note the following rates of agreement between what was initially coded compared to what was coded on reabstraction:

a) non-medical data: 96%–100%

b) selection of intervention codes (procedure codes): 90%–95%

c) selection of diagnosis codes: 83%–94%

d) selection of most responsible diagnosis: 89%–92%

e) typing of co-morbidities: pre-admit: 47%–69%; post-admit: 51%–69%

f) diagnosis typing (which indicates the relationship of the diagnosis to the patient's stay in hospital) continues to present a problem; discrepancy rates have not diminished with adoption of ICD-10-CA.

The coding issues in points **(e)** and **(f)** do not affect our results since the most responsible diagnosis is coded with a high degree of agreement and the AHRQ indicators do not discriminate among diagnosis types. Overall, when the rates of agreement in the third year of this reabstraction study (performed on data

[33] DAD Data Quality Reabstraction study. Combined findings for FY 1999/2000 and 2000/2001. Dec 2002.

[34] DAD Data Quality Reabstraction study. Combined findings for FY 1999/2000 and 2000/2001. Dec 2002.

[35] A joint initiative of the Ontario Hospital Association and the Government of Ontario. *Hospital Report 2006: Acute care*. <http://www.oha.com/Client/OHA/OHA_LP4W_LND_WebStation.nsf/resources/2007+Hospital+Reports/$file/OHA_Acute07_EN_final.pdf>..

[36] The CIHI Data Quality Framework. June 2005 Revision.

[37] *Research Utilization of Ontario's Health System during the 2003 SARS Outbreak. ICES 2004*. Report available at <http://www.ices.on.ca/file/SARS_report.pdf>.

[38] Reabstractors participating in the study were required to have several years of coding experience, experience coding in ICD-10-CA and CCI in particular, experience coding at a tertiary care centre, and attendance at specific CIHI educational workshops. They were also required to attend a one-week training session and to receive a passing score on the inter-rater test.

coded in ICD-10-CA) were compared to the rates of agreement of the previous years' data (coded in ICD-9-CCP), the rates were as well as, or better than, the rates previously.

However, with regard to the coding of pneumonia, a potential data quality issue exists because some reabstraction coders selected pneumonia instead of chronic obstructive pulmonary disease (COPD) as the most responsible diagnosis. [39] This could potentially create false positive results for Pneumonia mortality rate (IQI 20) since this indicator counts deaths due to pneumonia in situations where the primary diagnosis is a pneumonia diagnosis code. We have noted this proviso in our report.

With respect to specific conditions related to the health indicators examined, those that are procedure driven (i.e. cesarean section, coronary artery bypass graft, and total knee replacement) were coded well with low discrepancy rates. The following had less than a 5% rate of discrepancy: cesarean section, coronary artery bypass graft, hysterectomy, total knee replacement, vaginal birth after cesarean, and total hip replacement. The following had greater than a 5% discrepancy: acute myocardial infarction (AMI) (8.9%), hip fracture (6.0%), hospitalization due to pneumonia and influenza (6.9%), and injury hospitalization (5.3%). [40]

Discrepancy rates were noted in conditions that are diagnosis driven: AMI [41], stroke, pneumonia, and COPD [42] (as described above). Only the pneumonia codes are potentially affected in our report.

Overall, according to CIHI, findings from their three-year DAD reabstraction studies "have confirmed the strengths of the database, while identifying limitations in certain areas resulting from inconsistencies in the coding of some data elements." [43] In addition, the findings from the inter-rater data (that is, comparison between reabstractors) were generally similar to the findings from the main study data (that is, comparison between original coder and reabstractor). This suggests that the database is coded as well as can be expected using existing approaches in the hospital system.

In addition to the aforementioned reabstraction studies, the OECD published a report [44] in support of the AHRQ patient safety indicator modules noting that "this set of measures represents an exciting development and their use should be tested in a variety of countries" (p. 11). Further, a recently released report by the Manitoba Center for Health Policy that used the AHRQ Patient Safety Indicators [45] noted two important advantages to using the AHRQ module. The first advantage is the breadth of coverage offered by the indicators in studying in-hospital patient safety. The second is that the AHRQ patient-safety indicators were developed to measure complications of hospital-based care among a group of patients for whom the complications seemed preventable or highly unlikely.

[39] Canadian Coding Standards for ICD-10-CA and CCI 2004.

[40] DAD Data Quality Reabstraction study. Combined findings for FY 1999/2000 and 2000/2001. Dec 2002.

[41] DAD Data Quality, Reabstraction Study Combined finding for Fiscal Years 1999/2000 and 2000/2001. CIHI 2002: 8.

[42] Data Quality of the DAD following the First year implementation of ICD-10-CA/CCI. September 2004.

[43] Data Quality of the DAD following the First year implementation of ICD10CA/CCI. September 2004: 41.

[44] John Millar, Soeren Mattke, and the Members of the OECD Patient Safety Panel. *Selecting Indicators for Patient Safety at the Health Systems Level in OECD Countries*. <http://www.oecd.org/dataoecd/53/26/33878001.pdf>.

[45] Bruce et al., 2006.

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Methodology Overview

All hospital data used in The Fraser Institute's *Hospital Report Card: Ontario 2008* are from the Discharge Abstract Database (DAD) that was purchased from the Canadian Institute for Health Information (CIHI). The DAD is an administrative database containing demographic, administrative, and clinical data for hospital discharges (inpatient acute, chronic, rehabilitation) and day surgeries. Only inpatient acute records were used in this report (see Appendix A for details on which DAD data fields were used).

CIHI is unable to release the identity of specific institutions in DAD data releases unless those institutions have explicitly granted permission to the researchers requesting the data. For the years from 1997/98 to 2004/05, 43 of Ontario's 136 acute-care hospitals (representing 457,409 inpatient records or 41% of inpatient records in Ontario in 2004/05) voluntarily granted The Fraser Institute authorization to identify their institution-specific discharge data in the DAD. The total number of patient records for the province during these years was 8,588,784. For 2005/06, only 30 acute-care hospitals (representing 54,316 inpatient records or 4.94% of records in Ontario in 2005/06) granted their authorization (see Appendix D for a list of participating institutions).

These records were then grouped into diagnosis-related groups (DRGs) using The Centers for Medicare and Medicaid Services (CMS) Diagnosis Related Groups (DRG) Grouper software for fiscal years 1997 through 2004 and the CMS Grouper with Medicare Code Editor software for FY 2005. The program sorts patients' records into groups that are expected to have similar hospital resource use. The groupings are based on information extracted from diagnosis and procedure codes as well as the patients' age, sex, and the presence of complications or co-morbidities (see Appendix B for details). [1]

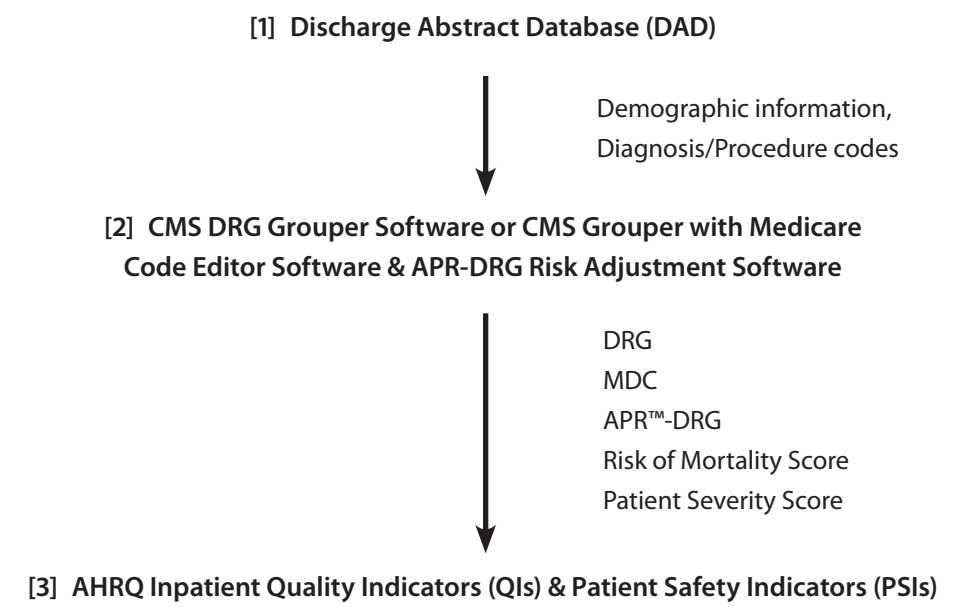
Since more specialized hospitals may treat more high-risk patients and some patients arrive at hospitals sicker than others, it is difficult to compare hospital mortality and utilization rates for patients with the same condition but a different health status. In order to compensate for this potential difference in hospital case mix, the international standard for risk adjustment, developed by 3M Corporation (for information, see <http://www.3m.com/us/healthcare/his/products/coding/refined_drg.jhtml>), was employed to risk-adjust the data. This was done to ensure that a hospital's final score reflected the performance grading that the hospital would have received if it had provided services to patients with the average mix of medical complications (see Appendix B for details).

The final step in the methodology was to produce separate indicators for hospital performance based on the methodology developed by the Agency for Healthcare Research and Quality's (AHRQ) Evidence-Based Practice Center (EPC) at the University of California San Francisco-Stanford [2] (for information, see <http://www.qualityindicators.ahrq.gov/>; see Appendix C for details). AHRQ's indicator modules use readily available discharge data and were chosen because they have been demonstrated to be a concise and effective tool by which to inform patients'

[1] In order to use the Centers for Medicare and Medicaid Services (CMS) - and All Patient Refined-Diagnosis Related Groups (APR™–DRG) Groupers as well as the Agency for Healthcare Research and Quality (AHRQ) Inpatient Quality Indicators (IQI) and Patient Safety Indicators (PSI) modules, the diagnosis and procedure codes had to be translated from ICD9/CCP (the *International Statistical Classification of Diseases, Injuries, and Causes of Death, Ninth Revision* [ICD-9] and the *Canadian Classification of Diagnostic, Therapeutic, and Surgical Procedures* [CCP]) (data from 1997/98 to 2001/02) or ICD10CA/CCI (ICD-10-CA is an enhanced version of ICD-10 developed by CIHI for morbidity classification in Canada; the companion classification to ICD-10-CA for coding procedures in Canada is CCI) (data from 2002/03 to 2005/06) to ICD-9-CM. Please see Appendix J for details.

[2] The AHRQ Quality Indicators were developed in response to the need for both multidimensional and accessible quality indicators. They include a family of measures that patients, providers, policymakers and researchers can use with easily accessible inpatient data to identify apparent variations in the quality of inpatient care.

Figure 1: Methodology Overview



Note: For FY 2005, the CMS Grouper with Medicare Code Editor Software was used rather than the CMS DRG Grouper Software. Also, for FY 2005, the AHRQ built-in limited APR-DRG Grouper provided by 3M was used.

decision-making about their health care. They are currently used to measure hospital performance in more than 12 US states including New York, Texas, Colorado, California, Florida, Kentucky, Maryland, Massachusetts, Minnesota, New Jersey, Oregon, Utah, Vermont and parts of Wisconsin. Figure 1 shows a graphical representation of the methodology. The Fraser Institute's *Hospital Report Card: Ontario 2008* comprises 39 indicators of the quality of inpatient care and patient safety (for a list of all indicators used in the report, see Appendix E). [3]

Inpatient Quality Indicators (IQIs) reflect the quality of care inside hospitals and include mortality rates, the utilization of procedures (where there are questions of misuse, overuse, or underuse), and volume of procedures (for which evidence shows that a higher volume of procedures is associated with a lower rate of mortality). Patient Safety Indicators (PSIs) focus on preventable complications acquired while in hospital, as well as adverse events following surgeries, procedures, and childbirth.

The indicators are expressed as observed rates (which are raw measures) and risk adjusted rates (incorporating patient severity and risk of mortality scores from the 3M™ software described above). IQI rates are expressed as rates per hundred patients while PSI rates are expressed per thousand. Each institution was also given a score from 0 to 100 for each indicator based on its risk-adjusted rate and was then ranked based on their scores (see Appendix F for details on calculating scores and ranks). [4]

A Hospital Mortality Index (HMI) was constructed to examine the overall performance of a hospital or municipality across mortality indicators. It consists of eight mortality indicators from 1997/98 to 2001/02 and nine mortality indicators from 2002/03 to 2005/06: [5] *hip replacement mortality* (IQI 14), *acute myocardial infarction mortality* (only included from 2002/03 to 2005/06) (IQI 15), *congestive heart failure mortality* (IQI 16), *acute stroke mortality* (IQI 17), *gastrointestinal hemorrhage mortality* (IQI 18), *hip fracture mortality* (IQI 19), *pneumonia*

[3] There are a total of 50 indicators in this report. Due to changes in diagnostic and procedural classifications, the availability of indicators varies across years. Years 2002 to 2004 report 42 main indicators. Due to changes in AHRQ software, 3 indicators were dropped in 2005 for a total of 39 indicators..

[4] Ranks are not used for comparisons of hospitals across indicators as they are based on a varying number of hospitals. It is advisable to rely on the scores (as in the HMI) to examine the overall performance of a hospital across indicators. The HMI also has a fairly large number of hospitals so any bias is insignificant.

[5] Intrinsic differences between the ICD9/CCP and ICD10CA/CCI resulted in several indicators being reported on in either data coded in ICD9/CCP (DAD data from FY1997 to FY2001) or data coded in ICD10CA/CCI (DAD data from FY2002 to FY2005), but not both (see Appendix G for details).

mortality (IQI 20), *low mortality DRGs* (PSI 2) and *failure to rescue rates* (PSI 4). The final HMI index score is based on an equal-weight construct of the separate indicators. For an indicator to be included in the HMI, hospitals representing at least 75% of the patient sample for that year had to have measured data in order to ensure an adequate number of hospitals for comparison. For example, in 2005/06 an indicator had to contain at least 824,770 records in order to be included in the HMI. [6] All institutions were ranked based on their HMI score, where the highest rank (1) corresponds to the highest score out of 100 (for details on calculating scores, ranks, the HMI, and rank of the HMI, please see Appendix F).

[6] The total number of patient records 2005/06 was 1,099,694.

Throughout the *Hospital Report Card*, several measures were taken in order to protect patient confidentiality. First, patient identifiers such as patients' names and addresses were removed prior to The Fraser Institute accessing the dataset. Also, postal codes were truncated to Forward Sortation Areas (FSAs) and grouped into municipalities in order to assess and compare care received by patients from those jurisdictions (please see Appendix H for details). Furthermore, results were omitted from publication if the patient population in any given indicator was less than, or equal to, 5 in any institution and/or municipality.

Legend for Sample Table

Use the sample table and the explanations below to help you understand how each indicator is displayed in the data tables of the *Hospital Report Card: Ontario 2008*.

[A] The name of the Agency for Healthcare Research and Quality's (AHRQ) Inpatient Quality Indicator (IQI) or Patient Safety Indicator (PSI). [7]

[7] Please see Appendix E for a complete list of the indicators used in the *Hospital Report Card*.

[B] All indicators were expressed as:

- **[a]** an Observed Rate (which are raw measures)
- **[b]** a Risk Adjusted Rate (incorporating patient severity and risk of mortality scores from 3M™ All Patient Refined Diagnosis Related Groups [APR™-DRG] Software) [8]
- **[c]** a Score [9]
- **[d]** a Rank

[8] Please see Appendix B for details.

[9] Please see Appendix F for details on calculating scores, ranks, HMI, and rank of the HMI.

Two additional measures were calculated to examine the overall performance of a hospital or municipality across mortality indicators: a Hospital Mortality Index (HMI) and a Rank of the Hospital Mortality Index.

[C] Indicators are stratified by Institution [10] and by Municipality. [11]

[10] Please see Appendix D for a list of participating institutions.

[11] Postal Codes were truncated to Forward Sortation Areas (FSAs) before The Fraser Institute accessed the dataset. All patient FSAs were grouped into corresponding municipalities as described by Canada Post. Please see Appendix H for details.

[D] All IQIs are expressed as percent. PSIs are expressed per thousand.

[E] All data used in the *Hospital Report Card* were extracted from the Discharge Abstract Database (DAD), which was purchased from CIHI for the period from Fiscal 1997 (April 1, 1997 to March 31, 1998) to Fiscal 2005 (April 1, 2005 to March 31, 2006).

[F] These lines indicate that it is not possible to compare data from 1997/98–2001/02 and 2002/03–2004/05 because of the change in coding classification from ICD9/CCP

to ICD10CA in 2002/03; and that it is not possible to compare data from 2002/03–2004/05 and 2005/06 because of changes in the AHRQ indicators for 2005/06.

[G] "—" indicates that either no data were available for that hospital for that year, that the institution did not exist in that year, or that the data were censored to protect patient confidentiality (when the denominator for a given indicator is 5).

[H] Indicators were calculated for all of Ontario's 136 acute-care hospitals. Forty-three hospitals agreed to participate in The Fraser Institute's *Hospital Report Card: Ontario 2006* (representing 41% of inpatient records in the Ontario in 2004/05) covering the period 1997/98 to 2004/05. Thirty hospitals agreed to participate in the *Hospital Report Card: Ontario 2008* (representing 4.94% of inpatient records in 2005/06). [12]

[12] Please see Appendix D for a list of participating institutions.

[I] The institution numbers from all acute-care hospitals that did not consent to be identified in the *Hospital Report Card* were encrypted by the Canadian Institute for Health Information (CIHI) prior to delivery. We assigned these institutions an arbitrary number.

[J] The average rate (Observed or Risk Adjusted) for all the acute-care hospitals in Ontario.

A B C D

Gastrointestinal Hemorrhage Mortality: Risk Adjusted Rate by Institution (percent)

Not statistically different from average | Worse than average | Better than average

Hospital	1997–1998	1998–1999	1999–2000	2000–2001	2001–2002	2002–2003	2003–2004	2004–2005	2005–2006
Arnprior and District Memorial Hospital (The)	1.05	6.84	14.35	8.33	0.00	1.22	1.56	0.78	8.40
Cambridge Memorial Hospital	4.17	1.05	0.00	2.28	3.17	3.08	4.03	1.66	—
Carleton Place and District Memorial Hospital	2.47	2.17	2.15	2.31	E	1.27	7.56	0.68	—
Clinton Public Hospital									
Dryden Regional Health Centre	0.00	0.00	4.04	5.93	5.36	5.75	2.40	1.14	—
[illegible] Hospital	2.96					16.50	1.81	2.89	
Hospital 234	—	—	—	—	—	—	—	—	—
Hospital 235	—	—	—	—	—	—	—	—	0.00
Hospital 236	—	—	—	—	—	—	—	—	6.71
Hospital 237	—	—	—	—	—	—	—	—	0.00
Hospital 238	—	—	—	—	—	—	—	—	5.92
Ontario Average	4.11	3.74	3.07	3.28	3.09	3.75	4.15	3.91	4.66

F F G H I J

Esophageal Resection Mortality: Score by Municipality

Municipality	1997–1998	1998–1999	1999–2000	2000–2001	2001–2002	2002–2003	2003–2004	2004–2005	2005–2006
Acton	—	—	—	—	—	—	—	—	—
Ajax	—	—	—	—	—	—	—	—	—
Alliston	—	—	—	—	—	—	—	—	—
Amherstburg	—	—	—	—	—	—	—	—	—
Arnprior	—	—	—	—	—	—	—	—	—
Aurora	—	—	—	—	—	—	—	—	—
Aylmer West	—	—	—	—	—	—	—	—	—
Barrie	—	—	—	—	—	—	—	—	—
Belleville	—	—	—	—	—	—	—	—	—
Bolton	—	—	—	—	—	—	—	—	—
Bowmanville	—	—	—	—	—	—	—	—	—
Bracebridge	—	—	—	—	—	—	—	—	—
Bradford	—	—	—	—	—	—	—	—	—
Brampton	—	—	80	—	—	—	—	9	—
Brantford	—	—	—	—	—	—	—	—	—
Brockville	—	—	—	—	—	—	—	—	—
Burlington	—	—	—	—	—	—	—	—	—
Caledon	—	—	—	—	—	—	—	—	—
Caledonia	—	—	—	—	—	—	—	—	—
Cambridge	—	—	—	—	—	—	—	—	—
Carleton Place	—	—	—	—	—	—	—	—	—
Chatham	—	—	—	—	—	—	—	—	—
Cobourg	—	—	—	—	—	—	—	—	—
Collingwood	—	—	—	—	—	—	—	—	—
Concord	—	—	—	—	—	—	—	—	—

Note: It is not possible to compare data from 1997-2001 with data from 2002-2004 because of the change in coding classification from ICD9CCP to ICD10CA in FY2002

"—" indicates either no data were available for that facility for that year, that the institution did not exist in that year, or that the data were censored to protect patient confidentiality (when the denominator for a given indicator < 5)

Esophageal Resection Mortality: Score by Municipality

Municipality	1997–1998	1998–1999	1999–2000	2000–2001	2001–2002	2002–2003	2003–2004	2004–2005	2005–2006
Cornwall	—	—	—	—	—	—	—	—	—
Cumberland	—	—	—	—	—	—	—	—	—
Delhi	—	—	—	—	—	—	—	—	—
Downsview	—	—	—	—	—	—	—	—	—
Dryden	—	—	—	—	—	—	—	—	—
Dunnville	—	—	—	—	—	—	—	—	—
East Gwillimbury	—	—	—	—	—	—	—	—	—
Elliot Lake	—	—	—	—	—	—	—	—	—
Elmira	—	—	—	—	—	—	—	—	—
Espanola	—	—	—	—	—	—	—	—	—
Essex	—	—	—	—	—	—	—	—	—
Etobicoke	0	—	—	—	—	—	—	—	—
Fergus	—	—	—	—	—	—	—	—	—
Fort Erie	—	—	—	—	—	—	—	—	—
Fort Frances	—	—	—	—	—	—	—	—	—
Gananoque	—	—	—	—	—	—	—	—	—
Garson	—	—	—	—	—	—	—	—	—
Georgetown	—	—	—	—	—	—	—	—	—
Goderich	—	—	—	—	—	—	—	—	—
Gravenhurst	—	—	—	—	—	—	—	—	—
Greely	—	—	—	—	—	—	—	—	—
Grimsby	—	—	—	—	—	—	—	—	—
Guelph	—	—	—	—	—	—	—	—	—
Hamilton	—	—	100	—	—	—	56	—	—
Hanmer	—	—	—	—	—	—	—	—	—

Note: It is not possible to compare data from 1997-2001 with data from 2002-2004 because of the change in coding classification from ICD9CCP to ICD10CA in FY2002

"—" indicates either no data were available for that facility for that year, that the institution did not exist in that year, or that the data were censored to protect patient confidentiality (when the denominator for a given indicator < 5)

Esophageal Resection Mortality: Score by Municipality

Municipality	1997–1998	1998–1999	1999–2000	2000–2001	2001–2002	2002–2003	2003–2004	2004–2005	2005–2006
Hanover	—	—	—	—	—	—	—	—	—
Hawkesbury	—	—	—	—	—	—	—	—	—
Huntsville	—	—	—	—	—	—	—	—	—
Ingersoll	—	—	—	—	—	—	—	—	—
Innisfil	—	—	—	—	—	—	—	—	—
Kapuskasing	—	—	—	—	—	—	—	—	—
Kenora	—	—	—	—	—	—	—	—	—
Keswick	—	—	—	—	—	—	—	—	—
Kincardine	—	—	—	—	—	—	—	—	—
King City	—	—	—	—	—	—	—	—	—
Kingston	—	—	—	—	—	—	—	—	—
Kingsville	—	—	—	—	—	—	—	—	—
Kirkland Lake	—	—	—	—	—	—	—	—	—
Kitchener	—	—	94	—	—	62	—	—	—
Leamington	—	—	—	—	—	—	—	—	—
Lindsay	—	—	—	—	—	—	—	—	—
Listowel	—	—	—	—	—	—	—	—	—
Lively	—	—	—	—	—	—	—	—	—
London	—	—	—	—	—	—	—	100	—
Manotick	—	—	—	—	—	—	—	—	—
Maple	—	—	—	—	—	—	—	—	—
Markham	—	—	—	—	—	—	—	—	—
Meaford	—	—	—	—	—	—	—	—	—
Midland	—	—	—	—	—	—	—	—	—
Milton	—	—	—	—	—	—	—	—	—

Note: It is not possible to compare data from 1997-2001 with data from 2002-2004 because of the change in coding classification from ICD9CCP to ICD10CA in FY2002

"—" indicates either no data were available for that facility for that year, that the institution did not exist in that year, or that the data were censored to protect patient confidentiality (when the denominator for a given indicator < 5)

Esophageal Resection Mortality: Score by Municipality

Municipality	1997–1998	1998–1999	1999–2000	2000–2001	2001–2002	2002–2003	2003–2004	2004–2005	2005–2006
Mississauga	—	—	—	—	—	—	—	0	100
Napanee	—	—	—	—	—	—	—	—	—
Navan	—	—	—	—	—	—	—	—	—
New Hamburg	—	—	—	—	—	—	—	—	—
Newmarket	—	—	—	—	—	—	—	—	—
Niagara Falls	—	—	—	—	—	—	—	—	—
North Bay	—	—	—	—	—	—	—	—	—
North York	—	—	—	—	—	—	—	—	—
Oakville	—	—	—	—	—	—	—	—	—
Orangeville	—	—	—	—	—	—	—	—	—
Orillia	—	—	—	—	—	—	—	—	—
Oshawa	—	—	—	—	—	—	—	—	—
Ottawa	—	—	38	100	100	100	100	96	66
Owen Sound	—	—	—	—	—	—	—	—	—
Paris	—	—	—	—	—	—	—	—	—
Parry Sound	—	—	—	—	—	—	—	—	—
Pembroke	—	—	—	—	—	—	—	—	—
Penetanguishene	—	—	—	—	—	—	—	—	—
Perth	—	—	—	—	—	—	—	—	—
Petawawa	—	—	—	—	—	—	—	—	—
Peterborough	—	—	—	—	—	—	—	—	—
Pickering	—	—	—	—	—	—	—	—	—
Port Colborne	—	—	—	—	—	—	—	—	—
Port Hope	—	—	—	—	—	—	—	—	—
Port Perry	—	—	—	—	—	—	—	—	—

Note: It is not possible to compare data from 1997-2001 with data from 2002-2004 because of the change in coding classification from ICD9CCP to ICD10CA in FY2002

"—" indicates either no data were available for that facility for that year, that the institution did not exist in that year, or that the data were censored to protect patient confidentiality (when the denominator for a given indicator < 5)

Esophageal Resection Mortality: Score by Municipality

Municipality	1997–1998	1998–1999	1999–2000	2000–2001	2001–2002	2002–2003	2003–2004	2004–2005	2005–2006
Port Stanley	—	—	—	—	—	—	—	—	—
Renfrew	—	—	—	—	—	—	—	—	—
Richmond Hill	—	—	—	—	—	—	—	—	—
Rockland	—	—	—	—	—	—	—	—	—
Russell	—	—	—	—	—	—	—	—	—
Sarnia	—	—	—	—	—	—	—	—	—
Sault Ste. Marie	—	—	—	99	—	—	—	—	—
Scarborough	—	89	77	—	—	0	0	4	100
Simcoe	—	—	—	—	—	—	—	—	—
Sioux Lookout	—	—	—	—	—	—	—	—	—
Smiths Falls	—	—	—	—	—	—	—	—	—
St. Catharine	—	—	—	—	—	—	—	—	—
St. Mary's	—	—	—	—	—	—	—	—	—
St. Thomas	—	—	—	—	—	—	—	—	—
Stouffville	—	—	—	—	—	—	—	—	—
Stratford	—	—	—	—	—	—	—	—	—
Strathroy	—	—	—	—	—	—	—	—	—
Sturgeon	—	—	—	—	—	—	—	—	—
Sudbury	—	—	—	—	—	—	—	—	—
Thornhill	—	—	—	—	—	—	—	—	—
Thunder Bay	—	—	—	—	—	—	—	—	—
Tillsonburg	—	—	—	—	—	—	—	—	—
Timmins	—	—	—	—	—	—	—	—	—
Toronto	100	0	0	26	—	85	55	8	65
Trenton	—	—	—	—	—	—	—	—	—

Note: It is not possible to compare data from 1997-2001 with data from 2002-2004 because of the change in coding classification from ICD9CCP to ICD10CA in FY2002

"—" indicates either no data were available for that facility for that year, that the institution did not exist in that year, or that the data were censored to protect patient confidentiality (when the denominator for a given indicator < 5)

Esophageal Resection Mortality: Score by Municipality

Municipality	1997–1998	1998–1999	1999–2000	2000–2001	2001–2002	2002–2003	2003–2004	2004–2005	2005–2006
Uxbridge	—	—	—	—	—	—	—	—	—
Val Caron	—	—	—	—	—	—	—	—	—
Wallaceburg	—	—	—	—	—	—	—	—	—
Wasaga Beach	—	—	—	—	—	—	—	—	—
Welland	—	—	—	—	—	—	—	—	—
Weston	—	—	—	—	—	—	—	—	—
Whitby	—	—	—	—	—	—	—	—	—
Willowdale	94	—	—	—	—	—	—	43	—
Windsor	—	—	—	—	—	—	—	—	—
Woodbridge	—	—	—	—	—	—	—	—	—
Woodstock	—	—	—	—	—	—	—	—	—
Rural	31	100	15	0	0	88	31	10	81
Other	—	—	—	—	—	—	—	—	—

Note: It is not possible to compare data from 1997-2001 with data from 2002-2004 because of the change in coding classification from ICD9CCP to ICD10CA in FY2002

"—" indicates either no data were available for that facility for that year, that the institution did not exist in that year, or that the data were censored to protect patient confidentiality (when the denominator for a given indicator < 5)

Pancreatic Resection Surgery Mortality: Score by Municipality

Municipality	1997–1998	1998–1999	1999–2000	2000–2001	2001–2002	2002–2003	2003–2004	2004–2005	2005–2006
Acton	—	—	—	—	—	—	—	—	—
Ajax	—	—	—	—	—	—	—	—	—
Alliston	—	—	—	—	—	—	—	—	—
Amherstburg	—	—	—	—	—	—	—	—	—
Arnprior	—	—	—	—	—	—	—	—	—
Aurora	—	—	—	—	—	—	—	—	—
Aylmer West	—	—	—	—	—	—	—	—	—
Barrie	—	—	—	—	—	—	—	—	—
Belleville	—	—	—	—	—	—	—	—	—
Bolton	—	—	—	—	—	—	—	—	—
Bowmanville	—	—	—	—	—	—	—	—	—
Bracebridge	—	—	—	—	—	—	—	—	—
Bradford	—	—	—	—	—	—	—	—	—
Brampton	—	—	46	—	—	—	—	—	—
Brantford	—	—	—	—	—	—	—	—	—
Brockville	—	—	—	—	—	—	—	—	—
Burlington	—	—	—	—	—	—	—	—	—
Caledon	—	—	—	—	—	—	—	—	—
Caledonia	—	—	—	—	—	—	—	—	—
Cambridge	—	—	—	—	—	—	—	—	—
Carleton Place	—	—	—	—	—	—	—	—	—
Chatham	—	—	—	—	—	—	—	—	—
Cobourg	—	—	—	—	—	—	—	—	—
Collingwood	—	—	—	—	—	—	—	—	—
Concord	—	—	—	—	—	—	—	—	—

Note: It is not possible to compare data from 1997-2001 with data from 2002-2004 because of the change in coding classification from ICD9CCP to ICD10CA in FY2002

"—" indicates either no data were available for that facility for that year, that the institution did not exist in that year, or that the data were censored to protect patient confidentiality (when the denominator for a given indicator < 5)

Pancreatic Resection Surgery Mortality: Score by Municipality

Municipality	1997–1998	1998–1999	1999–2000	2000–2001	2001–2002	2002–2003	2003–2004	2004–2005	2005–2006
Cornwall	—	—	—	—	—	—	—	—	—
Cumberland	—	—	—	—	—	—	—	—	—
Delhi	—	—	—	—	—	—	—	—	—
Downsview	—	—	—	—	—	—	—	—	—
Dryden	—	—	—	—	—	—	—	—	—
Dunnville	—	—	—	—	—	—	—	—	—
East Gwillimbury	—	—	—	—	—	—	—	—	—
Elliot Lake	—	—	—	—	—	—	—	—	—
Elmira	—	—	—	—	—	—	—	—	—
Espanola	—	—	—	—	—	—	—	—	—
Essex	—	—	—	—	—	—	—	—	—
Etobicoke	—	—	—	0	33	—	—	—	0
Fergus	—	—	—	—	—	—	—	—	—
Fort Erie	—	—	—	—	—	—	—	—	—
Fort Frances	—	—	—	—	—	—	—	—	—
Gananoque	—	—	—	—	—	—	—	—	—
Garson	—	—	—	—	—	—	—	—	—
Georgetown	—	—	—	—	—	—	—	—	—
Goderich	—	—	—	—	—	—	—	—	—
Gravenhurst	—	—	—	—	—	—	—	—	—
Greely	—	—	—	—	—	—	—	—	—
Grimsby	—	—	—	—	—	—	—	—	—
Guelph	—	—	—	—	—	—	—	—	—
Hamilton	77	0	0	59	78	55	5	88	3
Hanmer	—	—	—	—	—	—	—	—	—

Note: It is not possible to compare data from 1997-2001 with data from 2002-2004 because of the change in coding classification from ICD9CCP to ICD10CA in FY2002

"—" indicates either no data were available for that facility for that year, that the institution did not exist in that year, or that the data were censored to protect patient confidentiality (when the denominator for a given indicator < 5)

Pancreatic Resection Surgery Mortality: Score by Municipality

Municipality	1997–1998	1998–1999	1999–2000	2000–2001	2001–2002	2002–2003	2003–2004	2004–2005	2005–2006
Hanover	—	—	—	—	—	—	—	—	—
Hawkesbury	—	—	—	—	—	—	—	—	—
Huntsville	—	—	—	—	—	—	—	—	—
Ingersoll	—	—	—	—	—	—	—	—	—
Innisfil	—	—	—	—	—	—	—	—	—
Kapuskasing	—	—	—	—	—	—	—	—	—
Kenora	—	—	—	—	—	—	—	—	—
Keswick	—	—	—	—	—	—	—	—	—
Kincardine	—	—	—	—	—	—	—	—	—
King City	—	—	—	—	—	—	—	—	—
Kingston	—	—	—	—	—	—	—	—	—
Kingsville	—	—	—	—	—	—	—	—	—
Kirkland Lake	—	—	—	—	—	—	—	—	—
Kitchener	—	—	—	—	72	—	—	72	100
Leamington	—	—	—	—	—	—	—	—	—
Lindsay	—	—	—	—	—	—	—	—	—
Listowel	—	—	—	—	—	—	—	—	—
Lively	—	—	—	—	—	—	—	—	—
London	—	—	—	73	91	46	—	—	100
Manotick	—	—	—	—	—	—	—	—	—
Maple	—	—	—	—	—	—	—	—	—
Markham	—	—	—	—	—	100	—	—	—
Meaford	—	—	—	—	—	—	—	—	—
Midland	—	—	—	—	—	—	—	—	—
Milton	—	—	—	—	—	—	—	—	—

Note: It is not possible to compare data from 1997-2001 with data from 2002-2004 because of the change in coding classification from ICD9CCP to ICD10CA in FY2002

"—" indicates either no data were available for that facility for that year, that the institution did not exist in that year, or that the data were censored to protect patient confidentiality (when the denominator for a given indicator < 5)

Pancreatic Resection Surgery Mortality: Score by Municipality

Municipality	1997–1998	1998–1999	1999–2000	2000–2001	2001–2002	2002–2003	2003–2004	2004–2005	2005–2006
Mississauga	76	15	84	99	80	—	19	0	100
Napanee	—	—	—	—	—	—	—	—	—
Navan	—	—	—	—	—	—	—	—	—
New Hamburg	—	—	—	—	—	—	—	—	—
Newmarket	—	—	—	—	—	—	—	—	—
Niagara Falls	—	—	—	—	—	—	18	—	—
North Bay	—	—	—	—	—	—	—	—	—
North York	—	—	—	—	—	—	—	—	—
Oakville	—	—	—	—	76	—	—	—	—
Orangeville	—	—	—	—	—	—	—	—	—
Orillia	—	—	—	—	—	—	—	—	—
Oshawa	—	—	—	—	—	—	—	—	—
Ottawa	100	10	86	100	94	0	52	57	100
Owen Sound	—	—	—	—	—	—	—	—	—
Paris	—	—	—	—	—	—	—	—	—
Parry Sound	—	—	—	—	—	—	—	—	—
Pembroke	—	—	—	—	—	—	—	—	—
Penetanguishene	—	—	—	—	—	—	—	—	—
Perth	—	—	—	—	—	—	—	—	—
Petawawa	—	—	—	—	—	—	—	—	—
Peterborough	—	—	—	—	—	—	—	—	—
Pickering	—	—	—	—	—	—	—	—	—
Port Colborne	—	—	—	—	—	—	—	—	—
Port Hope	—	—	—	—	—	—	—	—	—
Port Perry	—	—	—	—	—	—	—	—	—

Note: It is not possible to compare data from 1997-2001 with data from 2002-2004 because of the change in coding classification from ICD9CCP to ICD10CA in FY2002

"—" indicates either no data were available for that facility for that year, that the institution did not exist in that year, or that the data were censored to protect patient confidentiality (when the denominator for a given indicator < 5)

Pancreatic Resection Surgery Mortality: Score by Municipality

Municipality	1997–1998	1998–1999	1999–2000	2000–2001	2001–2002	2002–2003	2003–2004	2004–2005	2005–2006
Port Stanley	—	—	—	—	—	—	—	—	—
Renfrew	—	—	—	—	—	—	—	—	—
Richmond Hill	—	—	—	—	—	—	—	—	—
Rockland	—	—	—	—	—	—	—	—	—
Russell	—	—	—	—	—	—	—	—	—
Sarnia	—	—	—	—	—	—	—	—	—
Sault Ste. Marie	—	—	—	—	—	—	—	—	—
Scarborough	6	22	100	83	39	48	100	73	79
Simcoe	—	—	—	—	—	—	—	—	—
Sioux Lookout	—	—	—	—	—	—	—	—	—
Smiths Falls	—	—	—	—	—	—	—	—	—
St. Catharine	—	—	—	—	—	—	—	—	—
St. Mary's	—	—	—	—	—	—	—	—	—
St. Thomas	—	—	—	—	—	—	—	—	—
Stouffville	—	—	—	—	—	—	—	—	—
Stratford	—	—	—	—	—	—	—	—	—
Strathroy	—	—	—	—	—	—	—	—	—
Sturgeon	—	—	—	—	—	—	—	—	—
Sudbury	—	—	—	—	—	—	—	—	—
Thornhill	—	—	—	—	—	—	—	—	—
Thunder Bay	—	—	—	—	—	—	—	—	—
Tillsonburg	—	—	—	—	—	—	—	—	—
Timmins	—	—	—	—	—	—	—	—	—
Toronto	0	100	62	80	100	61	16	28	80
Trenton	—	—	—	—	—	—	—	—	—

Note: It is not possible to compare data from 1997-2001 with data from 2002-2004 because of the change in coding classification from ICD9CCP to ICD10CA in FY2002

"—" indicates either no data were available for that facility for that year, that the institution did not exist in that year, or that the data were censored to protect patient confidentiality (when the denominator for a given indicator < 5)

Pancreatic Resection Surgery Mortality: Score by Municipality

Municipality	1997–1998	1998–1999	1999–2000	2000–2001	2001–2002	2002–2003	2003–2004	2004–2005	2005–2006
Uxbridge	—	—	—	—	—	—	—	—	—
Val Caron	—	—	—	—	—	—	—	—	—
Wallaceburg	—	—	—	—	—	—	—	—	—
Wasaga Beach	—	—	—	—	—	—	—	—	—
Welland	—	—	—	—	—	—	—	—	—
Weston	—	—	—	—	—	—	—	—	—
Whitby	—	—	—	—	—	—	—	—	—
Willowdale	—	—	—	—	—	—	0	20	90
Windsor	47	—	—	—	—	—	—	100	87
Woodbridge	—	—	—	—	—	—	—	—	—
Woodstock	—	—	—	—	—	—	—	—	—
Rural	51	100	95	73	70	32	45	4	100
Other	—	—	—	—	0	—	—	—	—

Note: It is not possible to compare data from 1997-2001 with data from 2002-2004 because of the change in coding classification from ICD9CCP to ICD10CA in FY2002

"—" indicates either no data were available for that facility for that year, that the institution did not exist in that year, or that the data were censored to protect patient confidentiality (when the denominator for a given indicator < 5)

Abdominal Aortic Artery (AAA) Repair Mortality: Score by Municipality

Municipality	1997–1998	1998–1999	1999–2000	2000–2001	2001–2002	2002–2003	2003–2004	2004–2005	2005–2006
Acton	—	—	—	—	—	—	—	—	—
Ajax	14	78	83	0	58	—	—	—	—
Alliston	—	—	66	—	—	—	—	—	—
Amherstburg	35	—	—	—	—	—	—	—	—
Arnprior	—	—	—	—	—	—	—	—	—
Aurora	—	—	—	—	—	—	—	—	—
Aylmer West	—	24	—	—	—	—	—	—	—
Barrie	88	92	49	45	96	—	—	—	—
Belleville	60	—	17	13	64	—	—	—	—
Bolton	—	—	—	—	—	—	—	—	—
Bowmanville	1	62	78	—	—	—	—	—	—
Bracebridge	—	7	—	—	—	—	—	—	—
Bradford	—	—	—	—	—	—	—	—	—
Brampton	38	82	36	61	34	—	—	—	—
Brantford	25	63	47	55	30	—	—	—	—
Brockville	—	—	—	65	—	—	—	—	—
Burlington	60	77	72	36	49	—	—	—	—
Caledon	—	—	—	—	—	—	—	—	—
Caledonia	—	—	—	—	—	—	—	—	—
Cambridge	51	54	88	49	64	—	—	—	—
Carleton Place	—	—	—	—	—	—	—	—	—
Chatham	—	—	—	—	—	—	—	—	—
Cobourg	53	—	65	—	51	—	—	—	—
Collingwood	—	—	—	—	56	—	—	—	—
Concord	—	—	—	—	—	—	—	—	—

Note: It is not possible to compare data from 1997-2001 with data from 2002-2004 because of the change in coding classification from ICD9CCP to ICD10CA in FY2002

"—" indicates either no data were available for that facility for that year, that the institution did not exist in that year, or that the data were censored to protect patient confidentiality (when the denominator for a given indicator < 5)

Abdominal Aortic Artery (AAA) Repair Mortality: Score by Municipality

Municipality	1997–1998	1998–1999	1999–2000	2000–2001	2001–2002	2002–2003	2003–2004	2004–2005	2005–2006
Cornwall	82	69	51	30	91	—	—	—	—
Cumberland	—	—	—	—	—	—	—	—	—
Delhi	—	—	—	—	—	—	—	—	—
Downsview	70	45	56	48	31	—	—	—	—
Dryden	—	—	—	—	—	—	—	—	—
Dunnville	—	—	—	—	—	—	—	—	—
East Gwillimbury	—	—	—	—	—	—	—	—	—
Elliot Lake	—	19	—	100	—	—	—	—	—
Elmira	—	—	—	—	—	—	—	—	—
Espanola	—	—	—	—	—	—	—	—	—
Essex	—	—	—	—	—	—	—	—	—
Etobicoke	43	65	34	22	64	—	—	—	—
Fergus	—	—	—	—	—	—	—	—	—
Fort Erie	—	—	—	—	—	—	—	—	—
Fort Frances	—	—	—	—	—	—	—	—	—
Gananoque	—	—	—	—	—	—	—	—	—
Garson	—	—	—	—	—	—	—	—	—
Georgetown	16	—	—	—	—	—	—	—	—
Goderich	—	—	—	—	—	—	—	—	—
Gravenhurst	—	—	—	—	—	—	—	—	—
Greely	—	—	—	—	—	—	—	—	—
Grimsby	—	—	—	—	71	—	—	—	—
Guelph	33	65	68	25	81	—	—	—	—
Hamilton	27	70	61	68	32	—	—	—	—
Hanmer	—	—	—	—	—	—	—	—	—

Note: It is not possible to compare data from 1997-2001 with data from 2002-2004 because of the change in coding classification from ICD9CCP to ICD10CA in FY2002

"—" indicates either no data were available for that facility for that year, that the institution did not exist in that year, or that the data were censored to protect patient confidentiality (when the denominator for a given indicator < 5)

Abdominal Aortic Artery (AAA) Repair Mortality: Score by Municipality

Municipality	1997–1998	1998–1999	1999–2000	2000–2001	2001–2002	2002–2003	2003–2004	2004–2005	2005–2006
Hanover	—	—	—	—	—	—	—	—	—
Hawkesbury	—	—	32	—	—	—	—	—	—
Huntsville	—	—	—	—	—	—	—	—	—
Ingersoll	—	—	—	—	—	—	—	—	—
Innisfil	—	—	—	—	65	—	—	—	—
Kapuskasing	—	—	—	—	—	—	—	—	—
Kenora	—	—	—	—	—	—	—	—	—
Keswick	—	—	—	—	—	—	—	—	—
Kincardine	—	—	—	—	—	—	—	—	—
King City	—	—	—	—	—	—	—	—	—
Kingston	16	74	70	41	45	—	—	—	—
Kingsville	—	—	—	—	—	—	—	—	—
Kirkland Lake	—	—	—	—	—	—	—	—	—
Kitchener	0	58	57	50	32	—	—	—	—
Leamington	—	—	—	—	—	—	—	—	—
Lindsay	—	57	84	—	0	—	—	—	—
Listowel	—	—	—	—	—	—	—	—	—
Lively	—	—	—	—	—	—	—	—	—
London	86	47	73	84	58	—	—	—	—
Manotick	—	—	—	—	—	—	—	—	—
Maple	—	—	—	—	—	—	—	—	—
Markham	32	100	36	91	83	—	—	—	—
Meaford	—	—	—	—	—	—	—	—	—
Midland	—	—	—	—	—	—	—	—	—
Milton	—	—	85	—	—	—	—	—	—

Note: It is not possible to compare data from 1997-2001 with data from 2002-2004 because of the change in coding classification from ICD9CCP to ICD10CA in FY2002

"—" indicates either no data were available for that facility for that year, that the institution did not exist in that year, or that the data were censored to protect patient confidentiality (when the denominator for a given indicator < 5)

Abdominal Aortic Artery (AAA) Repair Mortality: Score by Municipality

Municipality	1997–1998	1998–1999	1999–2000	2000–2001	2001–2002	2002–2003	2003–2004	2004–2005	2005–2006
Mississauga	26	68	73	79	67	—	—	—	—
Napanee	—	—	—	—	60	—	—	—	—
Navan	—	—	—	—	—	—	—	—	—
New Hamburg	—	—	—	—	—	—	—	—	—
Newmarket	77	—	49	—	—	—	—	—	—
Niagara Falls	5	55	71	87	29	—	—	—	—
North Bay	73	59	27	18	44	—	—	—	—
North York	55	0	45	0	—	—	—	—	—
Oakville	27	82	57	52	62	—	—	—	—
Orangeville	—	—	—	19	—	—	—	—	—
Orillia	60	10	88	58	57	—	—	—	—
Oshawa	42	65	61	44	52	—	—	—	—
Ottawa	53	58	57	54	67	—	—	—	—
Owen Sound	75	93	68	23	60	—	—	—	—
Paris	—	—	—	—	—	—	—	—	—
Parry Sound	—	—	—	—	—	—	—	—	—
Pembroke	51	53	—	—	—	—	—	—	—
Penetanguishene	—	—	—	—	—	—	—	—	—
Perth	28	—	—	—	—	—	—	—	—
Petawawa	—	—	—	—	—	—	—	—	—
Peterborough	67	64	59	68	86	—	—	—	—
Pickering	—	—	85	11	17	—	—	—	—
Port Colborne	64	61	—	—	—	—	—	—	—
Port Hope	—	53	—	—	—	—	—	—	—
Port Perry	—	—	—	—	—	—	—	—	—

Note: It is not possible to compare data from 1997-2001 with data from 2002-2004 because of the change in coding classification from ICD9CCP to ICD10CA in FY2002

"—" indicates either no data were available for that facility for that year, that the institution did not exist in that year, or that the data were censored to protect patient confidentiality (when the denominator for a given indicator < 5)

Abdominal Aortic Artery (AAA) Repair Mortality: Score by Municipality

Municipality	1997–1998	1998–1999	1999–2000	2000–2001	2001–2002	2002–2003	2003–2004	2004–2005	2005–2006
Port Stanley	—	—	—	—	—	—	—	—	—
Renfrew	—	—	—	—	—	—	—	—	—
Richmond Hill	14	40	31	—	—	—	—	—	—
Rockland	—	—	—	—	—	—	—	—	—
Russell	—	—	—	—	—	—	—	—	—
Sarnia	70	90	63	40	76	—	—	—	—
Sault Ste. Marie	41	74	65	73	58	—	—	—	—
Scarborough	38	63	57	63	59	—	—	—	—
Simcoe	—	85	—	—	—	—	—	—	—
Sioux Lookout	—	—	—	—	—	—	—	—	—
Smiths Falls	—	71	—	—	—	—	—	—	—
St. Catharine	41	58	66	66	36	—	—	—	—
St. Mary's	—	—	—	—	—	—	—	—	—
St. Thomas	100	—	—	—	—	—	—	—	—
Stouffville	—	—	—	—	—	—	—	—	—
Stratford	—	—	—	—	—	—	—	—	—
Strathroy	—	—	—	—	—	—	—	—	—
Sturgeon	—	—	—	—	—	—	—	—	—
Sudbury	89	77	64	11	45	—	—	—	—
Thornhill	98	67	60	89	60	—	—	—	—
Thunder Bay	44	50	50	53	31	—	—	—	—
Tillsonburg	—	—	—	—	—	—	—	—	—
Timmins	55	—	—	—	—	—	—	—	—
Toronto	27	63	59	48	55	—	—	—	—
Trenton	—	—	—	71	100	—	—	—	—

Note: It is not possible to compare data from 1997-2001 with data from 2002-2004 because of the change in coding classification from ICD9CCP to ICD10CA in FY2002

"—" indicates either no data were available for that facility for that year, that the institution did not exist in that year, or that the data were censored to protect patient confidentiality (when the denominator for a given indicator < 5)

Abdominal Aortic Artery (AAA) Repair Mortality: Score by Municipality

Municipality	1997–1998	1998–1999	1999–2000	2000–2001	2001–2002	2002–2003	2003–2004	2004–2005	2005–2006
Uxbridge	—	—	—	—	—	—	—	—	—
Val Caron	—	—	—	—	—	—	—	—	—
Wallaceburg	—	—	—	—	—	—	—	—	—
Wasaga Beach	—	—	—	—	—	—	—	—	—
Welland	32	70	38	12	87	—	—	—	—
Weston	15	48	0	41	27	—	—	—	—
Whitby	63	—	76	8	64	—	—	—	—
Willowdale	29	73	79	46	11	—	—	—	—
Windsor	14	76	61	37	72	—	—	—	—
Woodbridge	47	—	—	—	—	—	—	—	—
Woodstock	28	—	—	—	—	—	—	—	—
Rural	50	68	61	46	55	—	—	—	—
Other	15	28	100	45	78	—	—	—	—

Note: It is not possible to compare data from 1997-2001 with data from 2002-2004 because of the change in coding classification from ICD9CCP to ICD10CA in FY2002

"—" indicates either no data were available for that facility for that year, that the institution did not exist in that year, or that the data were censored to protect patient confidentiality (when the denominator for a given indicator < 5)

Coronary Artery Bypass Graft (CABG) Mortality: Score by Municipality

Municipality	1997–1998	1998–1999	1999–2000	2000–2001	2001–2002	2002–2003	2003–2004	2004–2005	2005–2006
Acton	—	96	89	61	34	92	46	92	100
Ajax	80	68	95	71	87	73	86	91	100
Alliston	100	50	87	49	0	84	13	79	48
Amherstburg	90	57	94	100	79	82	89	97	89
Arnprior	86	86	87	67	94	96	92	71	100
Aurora	91	94	65	84	79	73	38	55	87
Aylmer West	86	40	87	82	85	100	79	76	100
Barrie	71	94	91	73	74	63	80	85	92
Belleville	73	89	55	88	43	80	55	84	92
Bolton	86	85	92	86	100	89	45	37	100
Bowmanville	88	94	93	86	62	100	89	95	93
Bracebridge	100	45	97	89	80	95	88	100	100
Bradford	36	83	87	85	51	100	87	89	91
Brampton	68	85	81	77	70	77	74	86	90
Brantford	80	90	92	77	86	85	87	78	70
Brockville	85	75	61	21	71	93	66	86	93
Burlington	80	81	77	86	68	88	70	88	92
Caledon	—	—	—	—	—	—	—	—	100
Caledonia	90	90	76	—	—	55	48	66	91
Cambridge	78	86	76	79	60	77	83	89	94
Carleton Place	21	13	99	96	100	96	100	98	100
Chatham	69	89	96	71	86	87	83	99	92
Cobourg	89	85	83	73	87	89	74	85	63
Collingwood	92	88	92	92	88	84	80	89	100
Concord	—	—	—	94	10	48	82	98	100

Note: It is not possible to compare data from 1997-2001 with data from 2002-2004 because of the change in coding classification from ICD9CCP to ICD10CA in FY2002

"—" indicates either no data were available for that facility for that year, that the institution did not exist in that year, or that the data were censored to protect patient confidentiality (when the denominator for a given indicator < 5)

Coronary Artery Bypass Graft (CABG) Mortality: Score by Municipality

Municipality	1997–1998	1998–1999	1999–2000	2000–2001	2001–2002	2002–2003	2003–2004	2004–2005	2005–2006
Cornwall	93	83	88	82	72	86	80	97	86
Cumberland	—	—	—	—	—	100	—	89	—
Delhi	93	45	96	94	—	99	78	—	100
Downsview	77	77	79	77	85	87	85	92	100
Dryden	—	—	—	—	—	—	—	—	—
Dunnville	98	89	100	85	33	42	95	71	100
East Gwillimbury	91	—	94	83	88	96	—	52	—
Elliot Lake	56	90	0	83	84	65	87	84	78
Elmira	—	—	86	80	—	100	—	96	100
Espanola	85	—	—	89	5	—	77	—	—
Essex	52	95	87	84	—	87	95	—	91
Etobicoke	76	73	83	76	77	78	75	92	91
Fergus	85	84	93	—	92	—	100	93	100
Fort Erie	91	84	91	49	92	82	89	97	100
Fort Frances	—	—	—	—	—	—	—	—	—
Gananoque	85	0	57	43	84	88	86	—	100
Garson	87	83	85	23	95	100	—	—	—
Georgetown	57	70	84	84	94	84	81	63	100
Goderich	100	96	94	90	83	86	49	90	100
Gravenhurst	—	100	91	85	83	89	88	78	100
Greely	—	84	—	—	79	0	—	—	—
Grimsby	90	98	49	67	87	68	80	75	100
Guelph	93	68	77	74	82	71	75	92	100
Hamilton	74	72	85	65	84	83	79	88	90
Hanmer	86	83	65	81	77	26	82	89	—

Note: It is not possible to compare data from 1997-2001 with data from 2002-2004 because of the change in coding classification from ICD9CCP to ICD10CA in FY2002

"—" indicates either no data were available for that facility for that year, that the institution did not exist in that year, or that the data were censored to protect patient confidentiality (when the denominator for a given indicator < 5)

Coronary Artery Bypass Graft (CABG) Mortality: Score by Municipality

Municipality	1997–1998	1998–1999	1999–2000	2000–2001	2001–2002	2002–2003	2003–2004	2004–2005	2005–2006
Hanover	100	39	88	85	—	83	—	90	100
Hawkesbury	97	48	100	84	100	—	100	0	—
Huntsville	88	60	90	56	92	69	46	90	73
Ingersoll	88	40	45	97	99	85	82	94	100
Innisfil	—	—	—	83	37	84	89	79	100
Kapuskasing	85	82	85	90	78	95	96	93	—
Kenora	—	—	—	—	—	—	—	—	—
Keswick	98	91	91	85	78	95	87	94	100
Kincardine	96	88	56	100	78	94	91	67	100
King City	—	84	87	84	33	98	—	88	100
Kingston	82	76	77	64	69	82	67	81	96
Kingsville	66	100	96	98	77	4	85	62	100
Kirkland Lake	84	85	88	94	100	—	—	75	100
Kitchener	86	83	78	77	70	82	80	95	97
Leamington	69	56	86	100	78	95	77	56	94
Lindsay	96	57	83	78	84	69	65	80	86
Listowel	91	—	—	—	80	92	—	98	100
Lively	85	84	90	86	—	—	79	100	—
London	75	68	85	82	77	83	74	81	95
Manotick	—	81	94	93	—	99	—	—	—
Maple	100	90	87	83	99	83	89	91	100
Markham	81	86	81	72	67	85	61	91	100
Meaford	87	91	—	100	—	—	—	—	100
Midland	70	92	92	53	81	93	16	82	73
Milton	69	89	91	88	84	96	72	98	87

Note: It is not possible to compare data from 1997-2001 with data from 2002-2004 because of the change in coding classification from ICD9CCP to ICD10CA in FY2002

"—" indicates either no data were available for that facility for that year, that the institution did not exist in that year, or that the data were censored to protect patient confidentiality (when the denominator for a given indicator < 5)

Coronary Artery Bypass Graft (CABG) Mortality: Score by Municipality

Municipality	1997–1998	1998–1999	1999–2000	2000–2001	2001–2002	2002–2003	2003–2004	2004–2005	2005–2006
Mississauga	78	78	86	78	69	81	79	86	93
Napanee	90	83	87	91	55	56	92	91	92
Navan	—	—	—	—	—	—	—	—	—
New Hamburg	—	—	—	—	—	—	100	—	100
Newmarket	70	65	83	58	36	61	86	71	90
Niagara Falls	76	44	71	67	66	92	80	88	93
North Bay	71	78	84	68	81	90	93	94	66
North York	82	69	83	79	77	85	90	74	83
Oakville	90	75	83	91	78	90	85	88	96
Orangeville	92	45	90	86	47	92	58	70	100
Orillia	84	81	77	74	60	92	54	71	100
Oshawa	82	82	90	77	81	76	75	89	89
Ottawa	78	74	77	75	60	89	90	93	93
Owen Sound	78	84	69	60	97	90	95	85	100
Paris	85	—	87	45	87	32	—	93	100
Parry Sound	97	86	51	87	78	100	78	95	100
Pembroke	47	88	79	62	70	77	100	100	88
Penetanguishene	86	85	51	59	82	85	92	67	100
Perth	90	95	93	100	52	100	24	96	100
Petawawa	100	98	—	—	95	100	98	100	0
Peterborough	86	80	77	81	81	83	82	91	96
Pickering	82	76	79	88	73	64	98	92	92
Port Colborne	59	59	88	70	90	62	99	81	62
Port Hope	93	60	62	99	78	68	80	73	65
Port Perry	89	92	89	93	—	100	0	73	86

Note: It is not possible to compare data from 1997-2001 with data from 2002-2004 because of the change in coding classification from ICD9CCP to ICD10CA in FY2002

"—" indicates either no data were available for that facility for that year, that the institution did not exist in that year, or that the data were censored to protect patient confidentiality (when the denominator for a given indicator < 5)

Coronary Artery Bypass Graft (CABG) Mortality: Score by Municipality

Municipality	1997–1998	1998–1999	1999–2000	2000–2001	2001–2002	2002–2003	2003–2004	2004–2005	2005–2006
Port Stanley	—	—	—	83	—	—	—	100	—
Renfrew	94	53	92	100	92	100	100	100	100
Richmond Hill	79	77	85	83	79	64	62	87	91
Rockland	44	83	—	95	90	81	—	—	—
Russell	—	—	—	—	—	—	—	—	—
Sarnia	85	74	72	74	77	84	77	82	87
Sault Ste. Marie	84	85	89	75	62	67	88	92	91
Scarborough	85	77	85	73	78	89	77	87	96
Simcoe	96	63	63	70	92	100	80	89	100
Sioux Lookout	—	—	—	—	—	—	—	—	—
Smiths Falls	64	71	91	93	95	59	95	100	100
St. Catharine	73	80	88	84	65	77	75	92	81
St. Mary's	100	—	—	84	100	81	—	88	100
St. Thomas	94	97	92	48	68	88	71	72	89
Stouffville	85	89	66	84	89	53	68	90	100
Stratford	76	92	68	66	84	74	91	93	100
Strathroy	95	—	59	27	12	100	78	94	100
Sturgeon	—	—	—	—	—	—	81	59	0
Sudbury	74	67	71	59	57	67	93	93	85
Thornhill	83	77	83	75	51	75	75	81	82
Thunder Bay	86	83	83	75	88	89	88	87	96
Tillsonburg	0	75	87	—	41	69	85	76	100
Timmins	69	87	77	72	62	52	82	72	24
Toronto	77	80	81	83	76	82	73	85	90
Trenton	59	64	100	88	42	94	77	64	100

Note: It is not possible to compare data from 1997-2001 with data from 2002-2004 because of the change in coding classification from ICD9CCP to ICD10CA in FY2002

"—" indicates either no data were available for that facility for that year, that the institution did not exist in that year, or that the data were censored to protect patient confidentiality (when the denominator for a given indicator < 5)

Coronary Artery Bypass Graft (CABG) Mortality: Score by Municipality

Municipality	1997–1998	1998–1999	1999–2000	2000–2001	2001–2002	2002–2003	2003–2004	2004–2005	2005–2006
Uxbridge	85	98	89	51	20	93	80	89	100
Val Caron	85	93	86	83	76	—	—	—	100
Wallaceburg	85	92	53	0	97	82	31	98	91
Wasaga Beach	—	—	—	—	—	—	—	—	100
Welland	78	75	71	98	68	73	75	80	92
Weston	73	62	90	82	66	82	72	85	92
Whitby	67	61	86	76	80	91	81	74	100
Willowdale	87	74	81	84	75	83	74	86	92
Windsor	79	78	76	83	77	80	76	84	99
Woodbridge	86	77	87	94	60	88	76	87	85
Woodstock	95	95	92	63	31	100	85	92	96
Rural	82	82	79	81	71	81	76	86	93
Other	75	73	83	79	84	79	68	89	91

Note: It is not possible to compare data from 1997-2001 with data from 2002-2004 because of the change in coding classification from ICD9CCP to ICD10CA in FY2002

"—" indicates either no data were available for that facility for that year, that the institution did not exist in that year, or that the data were censored to protect patient confidentiality (when the denominator for a given indicator < 5)

Craniotomy Mortality: Score by Municipality

Municipality	1997–1998	1998–1999	1999–2000	2000–2001	2001–2002	2002–2003	2003–2004	2004–2005	2005–2006
Acton	—	—	13	62	100	6	—	—	100
Ajax	84	51	33	66	94	78	89	76	100
Alliston	—	—	—	0	—	—	71	—	100
Amherstburg	94	84	76	64	—	100	—	48	92
Arnprior	—	—	—	—	—	—	—	—	—
Aurora	—	79	30	45	100	54	53	75	100
Aylmer West	—	—	—	—	—	—	—	—	—
Barrie	61	69	63	74	89	71	26	79	100
Belleville	89	94	21	60	70	79	94	100	91
Bolton	—	—	—	—	52	—	—	100	100
Bowmanville	59	50	87	63	41	81	88	1	100
Bracebridge	—	—	—	—	—	—	80	75	—
Bradford	—	—	—	—	—	—	—	—	79
Brampton	84	94	79	55	75	50	87	55	97
Brantford	66	54	0	75	98	92	58	56	90
Brockville	91	—	51	—	44	70	81	82	—
Burlington	80	86	76	44	87	75	67	80	96
Caledon	—	—	—	—	—	—	—	—	—
Caledonia	—	32	—	100	—	—	93	93	—
Cambridge	77	70	46	92	100	74	72	78	86
Carleton Place	—	—	—	—	—	—	—	74	100
Chatham	70	87	75	70	90	50	100	0	82
Cobourg	57	—	47	70	0	—	39	—	—
Collingwood	—	—	—	—	100	—	84	73	87
Concord	—	—	—	—	—	—	—	—	—

Note: It is not possible to compare data from 1997-2001 with data from 2002-2004 because of the change in coding classification from ICD9CCP to ICD10CA in FY2002

"—" indicates either no data were available for that facility for that year, that the institution did not exist in that year, or that the data were censored to protect patient confidentiality (when the denominator for a given indicator < 5)

Craniotomy Mortality: Score by Municipality

Municipality	1997–1998	1998–1999	1999–2000	2000–2001	2001–2002	2002–2003	2003–2004	2004–2005	2005–2006
Cornwall	50	19	80	90	78	84	51	30	100
Cumberland	—	—	—	—	—	—	—	—	—
Delhi	—	—	—	—	—	—	47	—	—
Downsview	83	68	66	55	81	72	45	56	89
Dryden	—	—	—	—	—	—	—	—	—
Dunnville	—	—	—	—	—	—	—	89	—
East Gwillimbury	—	—	83	—	—	—	—	—	—
Elliot Lake	—	53	—	76	40	11	73	34	49
Elmira	—	—	—	—	—	—	—	—	—
Espanola	—	—	—	—	—	—	—	—	—
Essex	—	0	68	—	—	67	—	—	86
Etobicoke	76	72	43	77	83	53	94	59	84
Fergus	—	—	—	—	—	—	39	—	—
Fort Erie	84	54	—	—	—	—	—	43	—
Fort Frances	—	—	—	—	—	—	—	—	—
Gananoque	—	—	—	—	—	—	—	—	—
Garson	—	—	—	—	—	—	—	—	—
Georgetown	88	37	86	75	59	91	74	41	100
Goderich	—	91	—	100	90	—	0	—	—
Gravenhurst	—	—	—	—	—	45	—	—	—
Greely	—	—	—	—	—	—	—	—	—
Grimsby	83	—	—	—	85	21	29	92	—
Guelph	83	66	73	15	76	46	46	68	79
Hamilton	71	66	36	33	68	77	46	56	84
Hanmer	—	—	—	—	—	—	—	—	—

Note: It is not possible to compare data from 1997-2001 with data from 2002-2004 because of the change in coding classification from ICD9CCP to ICD10CA in FY2002

"—" indicates either no data were available for that facility for that year, that the institution did not exist in that year, or that the data were censored to protect patient confidentiality (when the denominator for a given indicator < 5)

Craniotomy Mortality: Score by Municipality

Municipality	1997–1998	1998–1999	1999–2000	2000–2001	2001–2002	2002–2003	2003–2004	2004–2005	2005–2006
Hanover	—	—	—	—	—	—	—	—	—
Hawkesbury	—	—	—	78	—	—	—	—	—
Huntsville	—	—	—	—	—	—	—	—	—
Ingersoll	—	—	—	—	—	—	—	—	—
Innisfil	—	—	—	—	—	—	—	85	—
Kapuskasing	—	—	—	—	—	83	—	—	—
Kenora	—	—	—	—	—	—	—	—	—
Keswick	—	82	21	—	39	—	—	—	100
Kincardine	—	—	—	—	—	—	—	—	—
King City	—	—	—	—	—	—	—	—	—
Kingston	58	76	18	41	48	37	80	37	72
Kingsville	—	—	—	—	—	44	—	—	—
Kirkland Lake	—	—	—	—	—	—	—	—	—
Kitchener	83	72	72	51	76	70	57	66	96
Leamington	93	100	18	98	86	—	61	—	85
Lindsay	—	80	—	—	6	100	100	95	100
Listowel	—	—	—	—	—	—	—	—	—
Lively	—	—	—	—	—	—	—	—	—
London	81	70	70	75	85	75	71	60	85
Manotick	—	—	75	—	—	—	—	—	—
Maple	—	—	100	100	—	100	70	59	100
Markham	75	79	57	61	99	77	100	68	96
Meaford	60	—	—	—	—	—	—	—	—
Midland	—	100	87	15	—	—	—	—	84
Milton	90	55	—	99	86	0	99	56	100

Note: It is not possible to compare data from 1997-2001 with data from 2002-2004 because of the change in coding classification from ICD9CCP to ICD10CA in FY2002

"—" indicates either no data were available for that facility for that year, that the institution did not exist in that year, or that the data were censored to protect patient confidentiality (when the denominator for a given indicator < 5)

Craniotomy Mortality: Score by Municipality

Municipality	1997–1998	1998–1999	1999–2000	2000–2001	2001–2002	2002–2003	2003–2004	2004–2005	2005–2006
Mississauga	70	55	57	67	84	60	78	64	92
Napanee	100	—	—	—	96	—	—	—	—
Navan	—	—	—	—	—	—	—	—	—
New Hamburg	—	—	—	—	—	—	—	—	—
Newmarket	87	75	75	75	84	100	66	76	94
Niagara Falls	63	62	22	3	58	73	60	70	87
North Bay	85	76	64	34	54	52	74	59	100
North York	84	22	47	54	49	53	69	90	90
Oakville	72	46	8	35	74	73	49	69	76
Orangeville	90	—	22	68	86	99	37	26	100
Orillia	0	52	44	97	77	85	49	82	100
Oshawa	81	60	48	35	83	82	50	55	93
Ottawa	78	72	58	55	91	71	56	62	89
Owen Sound	65	4	100	56	96	—	73	—	—
Paris	—	—	—	100	—	—	—	—	100
Parry Sound	—	86	—	—	—	—	—	—	—
Pembroke	75	67	93	26	—	65	59	85	100
Penetanguishene	100	—	—	—	—	—	—	—	—
Perth	—	—	—	—	—	—	—	—	—
Petawawa	—	—	—	—	—	—	—	—	—
Peterborough	72	71	42	46	63	87	79	90	89
Pickering	83	80	57	10	77	60	59	35	95
Port Colborne	—	—	—	75	—	—	—	19	—
Port Hope	—	—	72	—	68	—	—	—	100
Port Perry	—	—	—	73	—	—	—	—	100

Note: It is not possible to compare data from 1997-2001 with data from 2002-2004 because of the change in coding classification from ICD9CCP to ICD10CA in FY2002

"—" indicates either no data were available for that facility for that year, that the institution did not exist in that year, or that the data were censored to protect patient confidentiality (when the denominator for a given indicator < 5)

Craniotomy Mortality: Score by Municipality

Municipality	1997–1998	1998–1999	1999–2000	2000–2001	2001–2002	2002–2003	2003–2004	2004–2005	2005–2006
Port Stanley	—	—	—	—	—	—	—	—	—
Renfrew	—	—	—	—	—	—	—	—	—
Richmond Hill	56	83	32	63	85	100	57	56	96
Rockland	—	—	—	—	—	—	—	—	—
Russell	—	—	—	—	—	—	—	—	—
Sarnia	67	89	32	94	93	86	78	60	88
Sault Ste. Marie	71	76	17	56	90	78	61	86	100
Scarborough	79	69	54	71	87	71	81	69	90
Simcoe	71	56	—	62	—	—	—	27	100
Sioux Lookout	—	—	—	—	—	—	—	—	—
Smiths Falls	89	—	73	—	78	—	—	85	—
St. Catharine	84	75	63	72	86	64	53	82	87
St. Mary's	—	—	67	—	—	—	—	—	—
St. Thomas	96	63	92	53	94	84	94	66	100
Stouffville	—	—	—	—	—	77	—	—	100
Stratford	—	—	76	74	98	—	76	85	—
Strathroy	—	—	—	—	—	—	50	—	100
Sturgeon	—	—	—	—	—	—	—	—	—
Sudbury	48	44	32	9	87	15	75	66	37
Thornhill	90	79	32	98	79	87	73	87	91
Thunder Bay	81	70	95	81	99	87	73	64	92
Tillsonburg	—	—	63	—	96	—	—	41	—
Timmins	—	66	79	47	86	100	—	—	100
Toronto	82	63	52	48	78	73	66	88	92
Trenton	90	—	—	—	60	27	54	100	100

Note: It is not possible to compare data from 1997-2001 with data from 2002-2004 because of the change in coding classification from ICD9CCP to ICD10CA in FY2002

"—" indicates either no data were available for that facility for that year, that the institution did not exist in that year, or that the data were censored to protect patient confidentiality (when the denominator for a given indicator < 5)

Craniotomy Mortality: Score by Municipality

Municipality	1997–1998	1998–1999	1999–2000	2000–2001	2001–2002	2002–2003	2003–2004	2004–2005	2005–2006
Uxbridge	—	—	—	—	—	—	—	—	—
Val Caron	—	—	—	—	—	—	—	—	—
Wallaceburg	—	—	—	—	—	94	—	—	—
Wasaga Beach	—	—	—	—	—	—	—	—	—
Welland	53	61	81	31	83	1	41	48	100
Weston	73	63	58	20	78	62	78	95	96
Whitby	79	90	47	51	52	80	88	58	87
Willowdale	77	83	47	4	84	74	67	58	93
Windsor	84	50	53	36	71	75	56	66	90
Woodbridge	89	77	60	89	56	63	72	53	92
Woodstock	88	100	100	—	73	67	82	79	100
Rural	75	70	56	63	85	70	69	68	92
Other	72	67	62	46	89	62	56	72	87

Note: It is not possible to compare data from 1997-2001 with data from 2002-2004 because of the change in coding classification from ICD9CCP to ICD10CA in FY2002

"—" indicates either no data were available for that facility for that year, that the institution did not exist in that year, or that the data were censored to protect patient confidentiality (when the denominator for a given indicator < 5)

Hip Replacement Mortality: Score by Municipality

Municipality	1997–1998	1998–1999	1999–2000	2000–2001	2001–2002	2002–2003	2003–2004	2004–2005	2005–2006
Acton	—	—	—	—	97	0	90	98	100
Ajax	98	95	93	98	100	99	93	96	100
Alliston	—	95	98	97	97	98	89	98	100
Amherstburg	99	0	89	98	98	100	89	96	100
Arnprior	97	—	—	—	97	99	88	97	100
Aurora	98	96	89	97	100	99	100	96	100
Aylmer West	99	96	98	—	98	98	89	99	100
Barrie	97	100	100	98	97	90	100	79	100
Belleville	99	97	91	98	100	100	93	97	100
Bolton	98	95	—	—	97	98	91	96	100
Bowmanville	98	96	89	98	98	99	100	96	100
Bracebridge	98	95	89	98	98	99	90	96	100
Bradford	97	96	—	98	—	25	92	—	100
Brampton	98	96	90	97	97	100	90	97	100
Brantford	98	96	95	98	100	99	100	79	100
Brockville	—	—	—	99	—	99	93	96	70
Burlington	98	96	98	90	89	99	98	98	100
Caledon	—	—	—	—	—	—	—	—	100
Caledonia	97	95	89	99	100	—	91	96	100
Cambridge	98	95	100	97	97	99	92	98	100
Carleton Place	—	—	—	—	—	—	93	98	100
Chatham	98	96	93	98	98	99	93	97	100
Cobourg	97	97	95	99	98	99	97	96	100
Collingwood	97	—	88	98	98	99	94	96	100
Concord	—	—	—	—	—	—	—	—	—

Note: It is not possible to compare data from 1997-2001 with data from 2002-2004 because of the change in coding classification from ICD9CCP to ICD10CA in FY2002

"—" indicates either no data were available for that facility for that year, that the institution did not exist in that year, or that the data were censored to protect patient confidentiality (when the denominator for a given indicator < 5)

Hip Replacement Mortality: Score by Municipality

Municipality	1997–1998	1998–1999	1999–2000	2000–2001	2001–2002	2002–2003	2003–2004	2004–2005	2005–2006
Cornwall	97	96	95	97	97	98	94	97	100
Cumberland	—	—	—	—	—	—	—	—	—
Delhi	98	96	—	98	98	—	89	96	100
Downsview	99	96	91	100	100	98	100	82	100
Dryden	—	—	89	—	—	100	—	96	—
Dunnville	—	96	91	97	98	40	89	96	100
East Gwillimbury	—	—	—	—	97	—	91	99	100
Elliot Lake	98	95	91	98	97	98	89	100	100
Elmira	98	—	88	98	—	98	90	11	100
Espanola	—	95	—	—	—	—	97	—	100
Essex	97	95	87	99	—	98	—	98	100
Etobicoke	92	96	76	100	93	93	97	98	97
Fergus	—	—	—	—	—	—	96	96	100
Fort Erie	97	96	89	99	97	98	90	96	100
Fort Frances	—	—	94	—	—	—	—	—	—
Gananoque	99	98	90	97	—	99	—	97	100
Garson	—	—	—	—	—	—	—	—	—
Georgetown	97	—	89	99	97	98	92	97	100
Goderich	98	96	89	97	99	98	98	96	100
Gravenhurst	98	—	98	—	97	63	89	98	100
Greely	—	—	—	—	—	—	—	—	—
Grimsby	98	99	89	98	98	98	96	97	100
Guelph	97	95	89	98	97	98	91	97	100
Hamilton	98	92	90	100	95	97	85	92	99
Hanmer	—	95	89	—	97	98	89	96	—

Note: It is not possible to compare data from 1997-2001 with data from 2002-2004 because of the change in coding classification from ICD9CCP to ICD10CA in FY2002

"—" indicates either no data were available for that facility for that year, that the institution did not exist in that year, or that the data were censored to protect patient confidentiality (when the denominator for a given indicator < 5)

Hip Replacement Mortality: Score by Municipality

Municipality	1997–1998	1998–1999	1999–2000	2000–2001	2001–2002	2002–2003	2003–2004	2004–2005	2005–2006
Hanover	—	—	—	—	—	—	89	96	100
Hawkesbury	—	—	—	—	—	—	—	95	100
Huntsville	97	95	100	97	97	98	91	96	100
Ingersoll	97	97	89	100	98	100	90	97	0
Innisfil	—	—	—	—	98	98	89	97	33
Kapuskasing	—	—	—	—	—	—	—	—	—
Kenora	—	—	94	—	—	—	—	—	—
Keswick	98	96	89	98	—	99	89	97	100
Kincardine	97	95	—	—	97	99	89	96	—
King City	—	—	—	97	—	—	88	96	—
Kingston	98	96	56	98	100	90	92	91	100
Kingsville	25	96	—	99	97	98	99	96	100
Kirkland Lake	—	—	—	—	—	—	—	—	—
Kitchener	98	96	97	98	98	99	95	91	100
Leamington	20	96	98	98	0	100	100	99	100
Lindsay	55	20	90	98	51	99	90	98	100
Listowel	—	—	—	—	—	98	—	98	100
Lively	—	—	—	98	97	99	89	97	100
London	98	91	90	98	95	92	84	83	99
Manotick	—	—	100	—	97	98	100	98	100
Maple	97	96	—	98	97	98	88	96	100
Markham	65	96	94	98	97	99	94	81	100
Meaford	—	95	—	97	—	98	—	—	100
Midland	97	95	91	—	98	98	93	0	100
Milton	—	97	91	97	97	99	89	96	95

Note: It is not possible to compare data from 1997-2001 with data from 2002-2004 because of the change in coding classification from ICD9CCP to ICD10CA in FY2002

"—" indicates either no data were available for that facility for that year, that the institution did not exist in that year, or that the data were censored to protect patient confidentiality (when the denominator for a given indicator < 5)

Hip Replacement Mortality: Score by Municipality

Municipality	1997–1998	1998–1999	1999–2000	2000–2001	2001–2002	2002–2003	2003–2004	2004–2005	2005–2006
Mississauga	99	98	90	98	99	99	78	92	100
Napanee	99	95	91	27	97	100	99	96	53
Navan	—	—	—	—	—	—	—	—	—
New Hamburg	—	—	—	—	—	—	91	97	100
Newmarket	98	95	91	97	98	100	91	97	100
Niagara Falls	78	95	90	75	79	95	90	96	100
North Bay	98	97	89	97	98	85	90	97	77
North York	98	96	29	98	98	99	10	98	88
Oakville	85	76	93	99	98	99	91	97	100
Orangeville	98	97	90	97	97	98	92	96	100
Orillia	98	1	92	98	97	99	89	97	100
Oshawa	98	96	90	98	86	99	100	100	100
Ottawa	98	100	80	98	95	98	87	92	100
Owen Sound	97	95	89	98	97	99	89	97	100
Paris	98	95	91	—	—	98	90	96	100
Parry Sound	97	98	89	97	36	98	94	100	100
Pembroke	98	96	—	97	97	98	92	96	100
Penetanguishene	—	95	89	97	97	99	93	96	100
Perth	—	—	—	—	—	98	95	97	100
Petawawa	—	—	—	—	—	98	91	—	100
Peterborough	98	96	93	98	98	99	68	84	100
Pickering	97	95	0	98	97	99	90	96	100
Port Colborne	100	95	88	97	97	98	92	98	100
Port Hope	0	99	92	0	97	98	90	97	100
Port Perry	99	97	100	98	97	100	93	95	100

Note: It is not possible to compare data from 1997-2001 with data from 2002-2004 because of the change in coding classification from ICD9CCP to ICD10CA in FY2002

"—" indicates either no data were available for that facility for that year, that the institution did not exist in that year, or that the data were censored to protect patient confidentiality (when the denominator for a given indicator < 5)

Hip Replacement Mortality: Score by Municipality

Municipality	1997–1998	1998–1999	1999–2000	2000–2001	2001–2002	2002–2003	2003–2004	2004–2005	2005–2006
Port Stanley	—	—	—	—	—	—	—	—	—
Renfrew	97	—	97	98	—	46	89	100	100
Richmond Hill	99	97	88	98	97	88	37	80	100
Rockland	—	—	—	—	—	34	—	96	100
Russell	—	—	—	—	—	—	—	—	—
Sarnia	98	96	39	98	100	98	90	80	100
Sault Ste. Marie	80	95	91	98	97	99	90	97	100
Scarborough	98	84	93	94	99	97	80	98	97
Simcoe	97	95	88	100	98	99	94	98	100
Sioux Lookout	—	—	—	—	—	—	—	—	—
Smiths Falls	97	96	89	—	97	99	89	96	100
St. Catharine	98	96	63	98	81	99	81	98	100
St. Mary's	97	—	—	—	—	—	89	96	100
St. Thomas	98	97	90	100	98	99	0	66	98
Stouffville	97	98	89	98	97	98	96	98	100
Stratford	63	97	91	98	97	99	91	98	100
Strathroy	—	96	89	100	98	99	95	96	14
Sturgeon	—	—	—	—	—	—	90	97	100
Sudbury	98	97	90	98	98	98	93	97	100
Thornhill	97	95	90	97	98	99	93	97	95
Thunder Bay	89	96	93	100	98	90	93	96	100
Tillsonburg	36	95	95	98	46	100	89	40	100
Timmins	97	94	92	98	97	100	99	99	100
Toronto	93	94	89	93	97	98	97	93	99
Trenton	97	95	90	98	97	99	100	96	100

Note: It is not possible to compare data from 1997-2001 with data from 2002-2004 because of the change in coding classification from ICD9CCP to ICD10CA in FY2002

"—" indicates either no data were available for that facility for that year, that the institution did not exist in that year, or that the data were censored to protect patient confidentiality (when the denominator for a given indicator < 5)

Hip Replacement Mortality: Score by Municipality

Municipality	1997–1998	1998–1999	1999–2000	2000–2001	2001–2002	2002–2003	2003–2004	2004–2005	2005–2006
Uxbridge	—	—	97	—	98	99	89	96	100
Val Caron	—	—	—	—	—	—	89	96	—
Wallaceburg	—	95	91	97	97	99	90	98	100
Wasaga Beach	—	—	—	—	—	—	—	96	100
Welland	99	99	92	98	98	100	96	98	99
Weston	98	96	91	86	100	83	92	96	100
Whitby	98	96	96	98	66	83	90	97	100
Willowdale	92	96	100	98	98	93	92	88	97
Windsor	91	96	97	98	98	100	73	97	98
Woodbridge	97	97	100	97	97	98	90	96	100
Woodstock	98	20	88	100	98	79	90	66	100
Rural	97	93	72	96	96	97	85	95	100
Other	97	95	91	98	98	99	93	97	100

Note: It is not possible to compare data from 1997-2001 with data from 2002-2004 because of the change in coding classification from ICD9CCP to ICD10CA in FY2002

"—" indicates either no data were available for that facility for that year, that the institution did not exist in that year, or that the data were censored to protect patient confidentiality (when the denominator for a given indicator < 5)

Acute Myocardial Infarction (AMI) Mortality: Score by Municipality

Municipality	1997–1998	1998–1999	1999–2000	2000–2001	2001–2002	2002–2003	2003–2004	2004–2005	2005–2006
Acton	—	—	—	—	—	40	75	64	69
Ajax	—	—	—	—	—	75	62	53	80
Alliston	—	—	—	—	—	75	9	41	88
Amherstburg	—	—	—	—	—	73	66	47	77
Arnprior	—	—	—	—	—	51	19	64	78
Aurora	—	—	—	—	—	72	42	66	79
Aylmer West	—	—	—	—	—	78	61	61	77
Barrie	—	—	—	—	—	73	55	58	71
Belleville	—	—	—	—	—	71	45	71	82
Bolton	—	—	—	—	—	81	69	63	46
Bowmanville	—	—	—	—	—	69	73	58	77
Bracebridge	—	—	—	—	—	68	28	60	66
Bradford	—	—	—	—	—	74	83	78	53
Brampton	—	—	—	—	—	73	56	66	78
Brantford	—	—	—	—	—	74	45	57	73
Brockville	—	—	—	—	—	64	32	51	71
Burlington	—	—	—	—	—	74	56	68	81
Caledon	—	—	—	—	—	—	—	—	100
Caledonia	—	—	—	—	—	92	79	67	100
Cambridge	—	—	—	—	—	71	39	57	76
Carleton Place	—	—	—	—	—	65	51	31	77
Chatham	—	—	—	—	—	74	55	52	78
Cobourg	—	—	—	—	—	62	67	49	68
Collingwood	—	—	—	—	—	52	59	44	65
Concord	—	—	—	—	—	72	76	77	64

Note: It is not possible to compare data from 1997-2001 with data from 2002-2004 because of the change in coding classification from ICD9CCP to ICD10CA in FY2002

"—" indicates either no data were available for that facility for that year, that the institution did not exist in that year, or that the data were censored to protect patient confidentiality (when the denominator for a given indicator < 5)

Acute Myocardial Infarction (AMI) Mortality: Score by Municipality

Municipality	1997–1998	1998–1999	1999–2000	2000–2001	2001–2002	2002–2003	2003–2004	2004–2005	2005–2006
Cornwall	—	—	—	—	—	62	45	60	85
Cumberland	—	—	—	—	—	63	—	76	88
Delhi	—	—	—	—	—	82	60	44	63
Downsview	—	—	—	—	—	74	46	48	76
Dryden	—	—	—	—	—	64	19	64	74
Dunnville	—	—	—	—	—	48	38	63	49
East Gwillimbury	—	—	—	—	—	52	—	77	—
Elliot Lake	—	—	—	—	—	55	38	54	37
Elmira	—	—	—	—	—	0	59	90	—
Espanola	—	—	—	—	—	59	63	72	100
Essex	—	—	—	—	—	85	83	49	87
Etobicoke	—	—	—	—	—	75	52	55	81
Fergus	—	—	—	—	—	74	31	47	86
Fort Erie	—	—	—	—	—	83	30	38	51
Fort Frances	—	—	—	—	—	54	28	63	39
Gananoque	—	—	—	—	—	74	54	35	100
Garson	—	—	—	—	—	100	—	70	63
Georgetown	—	—	—	—	—	76	40	60	81
Goderich	—	—	—	—	—	54	4	52	84
Gravenhurst	—	—	—	—	—	65	32	59	36
Greely	—	—	—	—	—	81	100	40	—
Grimsby	—	—	—	—	—	33	61	41	12
Guelph	—	—	—	—	—	64	40	58	53
Hamilton	—	—	—	—	—	71	59	62	80
Hanmer	—	—	—	—	—	75	81	76	100

Note: It is not possible to compare data from 1997-2001 with data from 2002-2004 because of the change in coding classification from ICD9CCP to ICD10CA in FY2002

"—" indicates either no data were available for that facility for that year, that the institution did not exist in that year, or that the data were censored to protect patient confidentiality (when the denominator for a given indicator < 5)

Acute Myocardial Infarction (AMI) Mortality: Score by Municipality

Municipality	1997–1998	1998–1999	1999–2000	2000–2001	2001–2002	2002–2003	2003–2004	2004–2005	2005–2006
Hanover	—	—	—	—	—	73	37	76	70
Hawkesbury	—	—	—	—	—	58	62	56	74
Huntsville	—	—	—	—	—	74	40	72	54
Ingersoll	—	—	—	—	—	93	44	73	61
Innisfil	—	—	—	—	—	82	65	69	72
Kapuskasing	—	—	—	—	—	60	53	43	100
Kenora	—	—	—	—	—	59	41	42	89
Keswick	—	—	—	—	—	63	62	65	86
Kincardine	—	—	—	—	—	84	53	84	100
King City	—	—	—	—	—	38	45	100	—
Kingston	—	—	—	—	—	75	55	60	83
Kingsville	—	—	—	—	—	57	47	78	94
Kirkland Lake	—	—	—	—	—	87	70	25	73
Kitchener	—	—	—	—	—	77	52	63	84
Leamington	—	—	—	—	—	78	40	86	87
Lindsay	—	—	—	—	—	68	79	63	79
Listowel	—	—	—	—	—	49	39	64	54
Lively	—	—	—	—	—	66	39	42	80
London	—	—	—	—	—	76	61	60	78
Manotick	—	—	—	—	—	87	81	98	53
Maple	—	—	—	—	—	74	47	61	100
Markham	—	—	—	—	—	69	52	50	74
Meaford	—	—	—	—	—	74	35	76	50
Midland	—	—	—	—	—	69	28	48	76
Milton	—	—	—	—	—	60	54	28	74

Note: It is not possible to compare data from 1997-2001 with data from 2002-2004 because of the change in coding classification from ICD9CCP to ICD10CA in FY2002

"—" indicates either no data were available for that facility for that year, that the institution did not exist in that year, or that the data were censored to protect patient confidentiality (when the denominator for a given indicator < 5)

Acute Myocardial Infarction (AMI) Mortality: Score by Municipality

Municipality	1997–1998	1998–1999	1999–2000	2000–2001	2001–2002	2002–2003	2003–2004	2004–2005	2005–2006
Mississauga	—	—	—	—	—	72	56	57	78
Napanee	—	—	—	—	—	71	71	54	56
Navan	—	—	—	—	—	—	81	—	100
New Hamburg	—	—	—	—	—	—	46	85	100
Newmarket	—	—	—	—	—	65	64	59	77
Niagara Falls	—	—	—	—	—	71	33	49	72
North Bay	—	—	—	—	—	65	44	59	78
North York	—	—	—	—	—	75	63	59	77
Oakville	—	—	—	—	—	68	48	64	80
Orangeville	—	—	—	—	—	74	32	68	90
Orillia	—	—	—	—	—	53	64	52	81
Oshawa	—	—	—	—	—	72	62	66	79
Ottawa	—	—	—	—	—	73	55	58	82
Owen Sound	—	—	—	—	—	69	61	69	72
Paris	—	—	—	—	—	85	57	78	85
Parry Sound	—	—	—	—	—	60	54	36	73
Pembroke	—	—	—	—	—	60	49	38	65
Penetanguishene	—	—	—	—	—	68	59	61	75
Perth	—	—	—	—	—	68	44	50	62
Petawawa	—	—	—	—	—	71	65	19	70
Peterborough	—	—	—	—	—	63	43	50	79
Pickering	—	—	—	—	—	84	48	58	68
Port Colborne	—	—	—	—	—	51	55	38	66
Port Hope	—	—	—	—	—	73	46	41	95
Port Perry	—	—	—	—	—	76	93	76	79

Note: It is not possible to compare data from 1997-2001 with data from 2002-2004 because of the change in coding classification from ICD9CCP to ICD10CA in FY2002

"—" indicates either no data were available for that facility for that year, that the institution did not exist in that year, or that the data were censored to protect patient confidentiality (when the denominator for a given indicator < 5)

Acute Myocardial Infarction (AMI) Mortality: Score by Municipality

Municipality	1997–1998	1998–1999	1999–2000	2000–2001	2001–2002	2002–2003	2003–2004	2004–2005	2005–2006
Port Stanley	—	—	—	—	—	68	55	77	—
Renfrew	—	—	—	—	—	86	49	43	94
Richmond Hill	—	—	—	—	—	74	64	68	78
Rockland	—	—	—	—	—	92	61	61	62
Russell	—	—	—	—	—	55	18	72	—
Sarnia	—	—	—	—	—	78	66	67	76
Sault Ste. Marie	—	—	—	—	—	71	53	59	77
Scarborough	—	—	—	—	—	75	49	55	77
Simcoe	—	—	—	—	—	67	64	36	66
Sioux Lookout	—	—	—	—	—	51	87	—	—
Smiths Falls	—	—	—	—	—	92	26	52	79
St. Catharine	—	—	—	—	—	64	45	50	70
St. Mary's	—	—	—	—	—	55	55	58	53
St. Thomas	—	—	—	—	—	67	63	68	82
Stouffville	—	—	—	—	—	88	48	67	87
Stratford	—	—	—	—	—	88	52	73	81
Strathroy	—	—	—	—	—	87	5	46	62
Sturgeon	—	—	—	—	—	2	24	44	56
Sudbury	—	—	—	—	—	73	47	49	64
Thornhill	—	—	—	—	—	80	58	60	91
Thunder Bay	—	—	—	—	—	64	54	53	78
Tillsonburg	—	—	—	—	—	57	62	61	76
Timmins	—	—	—	—	—	66	53	71	76
Toronto	—	—	—	—	—	70	55	60	78
Trenton	—	—	—	—	—	45	46	63	61

Note: It is not possible to compare data from 1997-2001 with data from 2002-2004 because of the change in coding classification from ICD9CCP to ICD10CA in FY2002

"—" indicates either no data were available for that facility for that year, that the institution did not exist in that year, or that the data were censored to protect patient confidentiality (when the denominator for a given indicator < 5)

Acute Myocardial Infarction (AMI) Mortality: Score by Municipality

Municipality	1997–1998	1998–1999	1999–2000	2000–2001	2001–2002	2002–2003	2003–2004	2004–2005	2005–2006
Uxbridge	—	—	—	—	—	71	15	40	45
Val Caron	—	—	—	—	—	61	0	33	75
Wallaceburg	—	—	—	—	—	74	40	79	78
Wasaga Beach	—	—	—	—	—	—	—	0	77
Welland	—	—	—	—	—	71	61	70	65
Weston	—	—	—	—	—	69	37	50	79
Whitby	—	—	—	—	—	76	54	67	83
Willowdale	—	—	—	—	—	63	55	65	79
Windsor	—	—	—	—	—	72	53	52	82
Woodbridge	—	—	—	—	—	73	45	48	77
Woodstock	—	—	—	—	—	71	73	69	72
Rural	—	—	—	—	—	71	52	56	75
Other	—	—	—	—	—	71	53	61	77

Note: It is not possible to compare data from 1997-2001 with data from 2002-2004 because of the change in coding classification from ICD9CCP to ICD10CA in FY2002

"—" indicates either no data were available for that facility for that year, that the institution did not exist in that year, or that the data were censored to protect patient confidentiality (when the denominator for a given indicator < 5)

Congestive Heart Failure (CHF) Mortality: Score by Municipality

Municipality	1997–1998	1998–1999	1999–2000	2000–2001	2001–2002	2002–2003	2003–2004	2004–2005	2005–2006
Acton	30	25	49	89	95	69	42	66	19
Ajax	52	41	81	74	67	77	66	52	91
Alliston	57	5	33	80	64	80	66	80	82
Amherstburg	49	71	90	79	72	87	57	45	94
Arnprior	81	58	73	89	50	70	62	58	76
Aurora	45	35	58	62	73	93	72	36	81
Aylmer West	68	41	86	83	43	91	51	80	80
Barrie	66	61	70	72	55	81	61	63	75
Belleville	78	56	55	66	64	80	59	76	82
Bolton	42	97	85	85	71	75	78	78	86
Bowmanville	57	55	46	65	25	65	66	49	84
Bracebridge	81	77	73	74	83	94	38	33	100
Bradford	93	53	100	95	15	81	99	42	100
Brampton	66	66	76	67	75	84	72	60	86
Brantford	67	61	75	80	65	82	67	49	84
Brockville	60	58	46	70	55	88	58	20	73
Burlington	73	53	66	78	67	81	55	66	87
Caledon	—	—	—	—	—	—	—	—	84
Caledonia	96	76	100	75	79	81	38	27	93
Cambridge	71	76	63	71	51	75	66	57	87
Carleton Place	84	73	63	69	87	83	68	97	88
Chatham	62	65	56	76	68	81	53	64	83
Cobourg	87	93	79	60	63	77	35	18	83
Collingwood	72	75	51	75	49	62	59	34	95
Concord	56	93	61	97	81	86	79	73	85

Note: It is not possible to compare data from 1997-2001 with data from 2002-2004 because of the change in coding classification from ICD9CCP to ICD10CA in FY2002

"—" indicates either no data were available for that facility for that year, that the institution did not exist in that year, or that the data were censored to protect patient confidentiality (when the denominator for a given indicator < 5)

Congestive Heart Failure (CHF) Mortality: Score by Municipality

Municipality	1997–1998	1998–1999	1999–2000	2000–2001	2001–2002	2002–2003	2003–2004	2004–2005	2005–2006
Cornwall	60	34	46	41	32	68	57	54	80
Cumberland	38	49	41	—	49	100	—	50	—
Delhi	42	85	94	47	12	69	61	54	59
Downsview	71	60	72	78	43	81	69	65	91
Dryden	35	23	74	96	15	70	65	72	100
Dunnville	48	50	38	67	11	63	50	52	5
East Gwillimbury	24	95	65	91	95	—	93	95	100
Elliot Lake	72	61	53	68	22	60	86	51	45
Elmira	77	72	36	46	99	100	52	66	82
Espanola	82	0	65	46	19	97	49	70	100
Essex	58	66	73	61	46	80	74	54	88
Etobicoke	69	62	62	71	64	81	64	59	90
Fergus	77	84	83	68	66	98	55	46	85
Fort Erie	74	64	55	58	60	68	51	66	61
Fort Frances	80	69	78	71	57	81	68	64	91
Gananoque	78	30	65	61	56	46	30	75	93
Garson	—	32	51	68	0	98	94	0	100
Georgetown	36	57	81	79	73	81	44	54	84
Goderich	64	76	83	75	62	88	54	51	92
Gravenhurst	95	53	77	62	84	90	68	67	95
Greely	—	89	—	—	—	—	—	18	100
Grimsby	70	33	66	21	38	81	43	88	76
Guelph	69	51	68	72	69	74	60	50	79
Hamilton	68	64	64	75	65	83	63	67	91
Hanmer	46	63	89	55	89	82	16	76	26

Note: It is not possible to compare data from 1997-2001 with data from 2002-2004 because of the change in coding classification from ICD9CCP to ICD10CA in FY2002

"—" indicates either no data were available for that facility for that year, that the institution did not exist in that year, or that the data were censored to protect patient confidentiality (when the denominator for a given indicator < 5)

Congestive Heart Failure (CHF) Mortality: Score by Municipality

Municipality	1997–1998	1998–1999	1999–2000	2000–2001	2001–2002	2002–2003	2003–2004	2004–2005	2005–2006
Hanover	72	95	76	81	93	68	82	79	92
Hawkesbury	48	24	34	2	24	61	56	22	85
Huntsville	50	56	67	56	99	66	79	89	82
Ingersoll	82	60	54	58	82	87	80	76	78
Innisfil	—	—	—	80	50	83	64	63	83
Kapuskasing	95	51	58	50	94	70	51	58	75
Kenora	57	72	90	74	57	79	69	64	63
Keswick	92	75	74	71	90	86	100	70	82
Kincardine	40	40	18	74	81	100	18	72	34
King City	100	83	99	93	8	98	71	93	100
Kingston	54	36	63	68	56	78	66	54	89
Kingsville	57	62	60	69	57	82	59	52	88
Kirkland Lake	80	46	58	58	73	86	81	66	79
Kitchener	70	55	69	70	59	79	54	73	87
Leamington	68	82	74	73	28	98	82	55	74
Lindsay	65	45	51	76	76	79	74	37	80
Listowel	57	33	65	25	96	40	97	97	100
Lively	94	100	45	0	100	79	13	49	85
London	60	48	59	62	57	82	66	59	87
Manotick	—	—	—	3	—	—	67	24	100
Maple	77	70	76	52	67	94	96	88	95
Markham	65	66	61	62	40	81	55	68	82
Meaford	40	97	38	83	62	68	76	92	77
Midland	61	54	60	56	62	83	50	66	66
Milton	83	89	24	55	57	80	58	63	77

Note: It is not possible to compare data from 1997-2001 with data from 2002-2004 because of the change in coding classification from ICD9CCP to ICD10CA in FY2002

"—" indicates either no data were available for that facility for that year, that the institution did not exist in that year, or that the data were censored to protect patient confidentiality (when the denominator for a given indicator < 5)

Congestive Heart Failure (CHF) Mortality: Score by Municipality

Municipality	1997–1998	1998–1999	1999–2000	2000–2001	2001–2002	2002–2003	2003–2004	2004–2005	2005–2006
Mississauga	58	51	52	62	61	81	60	62	87
Napanee	74	52	80	66	44	69	27	35	77
Navan	48	—	—	64	—	—	—	68	83
New Hamburg	—	—	—	—	—	—	91	25	90
Newmarket	70	49	65	87	68	85	59	75	93
Niagara Falls	68	52	60	69	48	74	43	51	74
North Bay	66	42	51	61	59	77	31	53	68
North York	60	68	74	81	68	80	49	69	93
Oakville	67	49	62	76	66	80	83	66	91
Orangeville	81	63	65	72	91	95	63	71	91
Orillia	68	67	69	79	76	63	55	55	76
Oshawa	57	58	52	69	59	78	66	71	86
Ottawa	66	51	59	68	78	79	55	67	90
Owen Sound	58	57	38	75	59	89	80	59	81
Paris	80	57	54	53	68	81	64	45	83
Parry Sound	57	80	75	89	91	87	73	69	78
Pembroke	60	52	59	65	35	82	63	49	70
Penetanguishene	61	58	65	70	86	85	81	75	71
Perth	60	72	56	63	39	96	18	28	78
Petawawa	7	40	74	35	69	0	62	100	100
Peterborough	43	47	53	68	65	81	49	50	81
Pickering	69	56	67	67	68	81	82	56	86
Port Colborne	80	40	77	70	58	79	52	47	88
Port Hope	63	79	25	92	41	80	53	46	72
Port Perry	53	55	82	72	67	82	100	68	84

Note: It is not possible to compare data from 1997-2001 with data from 2002-2004 because of the change in coding classification from ICD9CCP to ICD10CA in FY2002

"—" indicates either no data were available for that facility for that year, that the institution did not exist in that year, or that the data were censored to protect patient confidentiality (when the denominator for a given indicator < 5)

Congestive Heart Failure (CHF) Mortality: Score by Municipality

Municipality	1997–1998	1998–1999	1999–2000	2000–2001	2001–2002	2002–2003	2003–2004	2004–2005	2005–2006
Port Stanley	0	95	67	90	—	84	—	—	61
Renfrew	60	70	67	100	41	74	14	31	82
Richmond Hill	46	49	69	68	63	85	67	72	92
Rockland	59	67	0	100	87	74	0	73	93
Russell	—	—	—	—	—	100	92	86	—
Sarnia	69	52	68	65	62	80	53	62	77
Sault Ste. Marie	66	68	63	78	73	85	58	63	84
Scarborough	71	56	63	70	67	84	66	66	89
Simcoe	73	90	55	69	6	74	66	56	81
Sioux Lookout	55	34	61	—	90	100	57	61	27
Smiths Falls	50	72	68	41	52	76	46	65	85
St. Catharine	54	46	61	71	54	81	55	53	83
St. Mary's	82	52	74	39	64	89	56	69	84
St. Thomas	70	48	68	64	44	76	72	68	75
Stouffville	68	62	65	62	55	58	94	53	80
Stratford	86	84	72	90	80	78	51	80	90
Strathroy	75	39	59	57	2	91	60	47	62
Sturgeon	—	—	—	—	88	70	74	81	6
Sudbury	62	53	51	63	62	82	61	58	83
Thornhill	75	91	74	78	52	86	77	68	90
Thunder Bay	64	47	58	72	72	83	64	73	89
Tillsonburg	45	57	66	72	63	82	64	24	82
Timmins	70	71	75	82	63	82	70	63	100
Toronto	72	66	67	70	61	82	66	69	89
Trenton	91	61	73	73	34	88	46	21	79

Note: It is not possible to compare data from 1997-2001 with data from 2002-2004 because of the change in coding classification from ICD9CCP to ICD10CA in FY2002

"—" indicates either no data were available for that facility for that year, that the institution did not exist in that year, or that the data were censored to protect patient confidentiality (when the denominator for a given indicator < 5)

Congestive Heart Failure (CHF) Mortality: Score by Municipality

Municipality	1997–1998	1998–1999	1999–2000	2000–2001	2001–2002	2002–2003	2003–2004	2004–2005	2005–2006
Uxbridge	64	35	57	51	65	65	70	53	81
Val Caron	—	57	—	—	—	95	71	91	0
Wallaceburg	54	50	52	43	41	72	69	48	77
Wasaga Beach	—	—	—	—	—	—	—	51	48
Welland	58	62	65	68	78	72	43	65	90
Weston	73	69	67	72	76	87	77	55	87
Whitby	59	48	37	59	86	88	56	71	88
Willowdale	51	58	63	70	74	85	72	70	91
Windsor	63	59	64	75	61	84	66	60	91
Woodbridge	63	66	78	78	61	82	67	68	92
Woodstock	72	44	67	49	55	73	54	38	69
Rural	67	59	60	71	62	79	61	63	82
Other	63	70	70	78	60	80	76	53	91

Note: It is not possible to compare data from 1997-2001 with data from 2002-2004 because of the change in coding classification from ICD9CCP to ICD10CA in FY2002

"—" indicates either no data were available for that facility for that year, that the institution did not exist in that year, or that the data were censored to protect patient confidentiality (when the denominator for a given indicator < 5)

Acute Stroke Mortality: Score by Municipality

Municipality	1997–1998	1998–1999	1999–2000	2000–2001	2001–2002	2002–2003	2003–2004	2004–2005	2005–2006
Acton	21	25	11	24	79	55	17	41	—
Ajax	45	58	38	52	66	71	69	68	85
Alliston	59	76	14	47	58	39	30	87	78
Amherstburg	32	74	54	44	62	73	61	56	64
Arnprior	87	55	49	51	73	66	76	66	57
Aurora	66	61	47	63	45	59	54	74	64
Aylmer West	36	0	58	52	71	68	67	68	59
Barrie	64	51	68	80	81	69	64	75	84
Belleville	62	56	67	39	58	57	39	84	77
Bolton	4	46	38	24	81	83	35	65	87
Bowmanville	63	71	39	37	58	58	57	76	89
Bracebridge	53	74	27	25	80	54	39	41	87
Bradford	58	63	61	48	60	75	35	99	92
Brampton	55	76	43	76	75	73	74	71	85
Brantford	63	57	44	69	65	70	55	65	67
Brockville	43	38	36	36	54	47	49	51	62
Burlington	27	50	61	56	62	64	48	64	79
Caledon	—	—	—	—	—	—	—	—	—
Caledonia	74	57	40	48	87	84	45	50	64
Cambridge	58	48	43	46	41	62	55	64	74
Carleton Place	69	61	20	40	65	81	64	25	100
Chatham	67	57	47	67	60	56	53	62	67
Cobourg	36	38	32	37	55	50	30	64	59
Collingwood	13	39	61	31	32	74	40	35	74
Concord	23	76	—	64	65	81	46	22	75

Note: It is not possible to compare data from 1997-2001 with data from 2002-2004 because of the change in coding classification from ICD9CCP to ICD10CA in FY2002

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Acute Stroke Mortality: Score by Municipality

Municipality	1997–1998	1998–1999	1999–2000	2000–2001	2001–2002	2002–2003	2003–2004	2004–2005	2005–2006
Cornwall	41	42	38	40	53	49	45	46	70
Cumberland	—	—	—	—	—	—	—	—	—
Delhi	19	83	71	44	31	58	23	79	—
Downsview	47	52	64	45	39	63	49	61	77
Dryden	71	10	44	53	40	47	0	46	—
Dunnville	66	23	23	42	59	70	48	61	—
East Gwillimbury	55	88	91	84	89	—	73	—	81
Elliot Lake	33	20	32	57	61	0	30	66	—
Elmira	43	—	67	91	—	5	7	50	—
Espanola	6	72	39	68	—	67	100	—	—
Essex	24	51	59	55	77	97	77	64	71
Etobicoke	43	56	52	56	69	66	56	64	77
Fergus	72	62	59	49	81	67	72	45	83
Fort Erie	75	51	18	43	71	79	37	69	3
Fort Frances	80	60	28	57	86	58	41	77	—
Gananoque	42	49	61	16	50	48	64	27	82
Garson	7	38	70	72	65	—	85	—	—
Georgetown	31	72	48	72	61	71	48	50	70
Goderich	70	65	72	60	90	70	72	62	—
Gravenhurst	79	51	70	36	23	59	31	55	—
Greely	—	—	35	—	—	85	59	—	—
Grimsby	28	58	15	59	67	47	46	76	75
Guelph	50	48	46	48	49	59	57	52	75
Hamilton	48	61	50	63	67	69	61	70	78
Hanmer	63	92	80	69	73	74	—	66	63

Note: It is not possible to compare data from 1997-2001 with data from 2002-2004 because of the change in coding classification from ICD9CCP to ICD10CA in FY2002

"—" indicates either no data were available for that facility for that year, that the institution did not exist in that year, or that the data were censored to protect patient confidentiality (when the denominator for a given indicator < 5)

Acute Stroke Mortality: Score by Municipality

Municipality	1997–1998	1998–1999	1999–2000	2000–2001	2001–2002	2002–2003	2003–2004	2004–2005	2005–2006
Hanover	83	60	44	62	64	67	34	39	—
Hawkesbury	60	68	37	91	61	79	72	72	92
Huntsville	71	71	52	38	38	41	48	76	55
Ingersoll	46	46	41	50	67	73	52	0	—
Innisfil	—	—	—	100	77	77	60	87	55
Kapuskasing	65	80	44	27	49	88	31	53	—
Kenora	3	48	39	2	10	64	53	86	77
Keswick	29	80	41	49	74	72	63	80	83
Kincardine	47	88	22	40	51	58	49	59	65
King City	87	100	94	96	70	—	78	—	100
Kingston	50	69	41	54	56	56	43	66	55
Kingsville	73	43	69	76	65	83	72	63	73
Kirkland Lake	48	27	6	17	60	46	11	68	—
Kitchener	56	50	54	44	53	66	42	58	72
Leamington	65	78	61	66	73	67	73	100	88
Lindsay	58	65	58	53	83	51	43	60	74
Listowel	52	80	32	40	24	62	27	54	—
Lively	78	79	42	39	34	49	67	61	82
London	58	63	52	55	57	75	54	70	76
Manotick	100	95	71	82	—	—	40	59	70
Maple	61	64	58	80	100	99	64	73	88
Markham	49	53	39	51	54	72	49	63	83
Meaford	54	32	31	50	45	76	38	91	—
Midland	61	35	48	48	27	56	49	73	81
Milton	59	30	62	0	32	54	39	46	76

Note: It is not possible to compare data from 1997-2001 with data from 2002-2004 because of the change in coding classification from ICD9CCP to ICD10CA in FY2002

"—" indicates either no data were available for that facility for that year, that the institution did not exist in that year, or that the data were censored to protect patient confidentiality (when the denominator for a given indicator < 5)

Acute Stroke Mortality: Score by Municipality

Municipality	1997–1998	1998–1999	1999–2000	2000–2001	2001–2002	2002–2003	2003–2004	2004–2005	2005–2006
Mississauga	51	48	41	51	58	67	63	64	79
Napanee	81	78	25	29	55	40	68	68	70
Navan	—	—	—	58	—	—	93	—	—
New Hamburg	—	—	—	—	—	—	48	62	76
Newmarket	61	47	63	75	60	55	57	46	84
Niagara Falls	44	50	60	40	64	60	49	65	70
North Bay	61	41	32	43	42	49	39	73	79
North York	43	48	47	75	61	76	53	68	74
Oakville	45	46	46	46	54	65	68	69	69
Orangeville	70	31	58	58	56	72	62	71	79
Orillia	43	55	63	66	53	60	52	67	90
Oshawa	55	59	53	46	62	64	56	67	84
Ottawa	56	50	52	69	68	73	57	65	79
Owen Sound	73	20	62	54	71	61	69	74	54
Paris	45	94	32	56	69	83	60	63	100
Parry Sound	47	51	62	68	62	58	56	72	75
Pembroke	50	66	46	49	59	50	58	44	77
Penetanguishene	42	24	45	32	54	61	37	82	58
Perth	60	50	11	71	34	65	49	63	—
Petawawa	27	2	0	31	38	100	—	83	59
Peterborough	54	64	48	57	48	59	41	60	77
Pickering	57	64	50	57	44	58	59	71	71
Port Colborne	0	3	53	41	36	63	47	49	50
Port Hope	33	59	81	49	39	65	67	34	66
Port Perry	19	42	18	44	71	54	68	38	90

Note: It is not possible to compare data from 1997-2001 with data from 2002-2004 because of the change in coding classification from ICD9CCP to ICD10CA in FY2002

"—" indicates either no data were available for that facility for that year, that the institution did not exist in that year, or that the data were censored to protect patient confidentiality (when the denominator for a given indicator < 5)

Acute Stroke Mortality: Score by Municipality

Municipality	1997–1998	1998–1999	1999–2000	2000–2001	2001–2002	2002–2003	2003–2004	2004–2005	2005–2006
Port Stanley	—	—	—	—	86	71	—	—	—
Renfrew	32	38	58	97	24	50	45	33	—
Richmond Hill	44	68	65	58	75	76	60	71	82
Rockland	71	82	100	82	68	76	46	47	—
Russell	—	—	—	—	—	—	—	—	—
Sarnia	53	47	51	56	50	75	48	70	72
Sault Ste. Marie	57	63	50	62	57	71	59	60	61
Scarborough	54	57	50	57	61	69	58	71	76
Simcoe	17	22	9	66	35	51	44	47	—
Sioux Lookout	—	—	—	—	—	—	—	—	—
Smiths Falls	44	46	56	56	33	66	40	53	—
St. Catharine	50	64	47	52	50	64	51	65	76
St. Mary's	76	28	89	52	52	78	52	—	—
St. Thomas	53	52	43	55	67	65	60	56	78
Stouffville	48	26	32	31	6	80	68	69	79
Stratford	77	85	81	73	78	65	68	93	80
Strathroy	4	79	39	22	21	67	44	64	—
Sturgeon	—	—	—	—	92	86	7	54	—
Sudbury	58	58	31	51	50	60	50	70	54
Thornhill	69	68	54	62	71	83	60	67	78
Thunder Bay	53	65	57	57	64	70	52	63	75
Tillsonburg	44	66	61	23	0	71	56	44	80
Timmins	65	83	48	71	41	49	53	59	69
Toronto	53	59	49	56	64	71	60	74	79
Trenton	68	70	81	66	61	64	53	45	—

Note: It is not possible to compare data from 1997-2001 with data from 2002-2004 because of the change in coding classification from ICD9CCP to ICD10CA in FY2002

"—" indicates either no data were available for that facility for that year, that the institution did not exist in that year, or that the data were censored to protect patient confidentiality (when the denominator for a given indicator < 5)

Acute Stroke Mortality: Score by Municipality

Municipality	1997–1998	1998–1999	1999–2000	2000–2001	2001–2002	2002–2003	2003–2004	2004–2005	2005–2006
Uxbridge	65	20	67	49	53	24	73	44	59
Val Caron	68	65	94	66	69	86	68	—	72
Wallaceburg	42	24	46	40	73	66	54	77	76
Wasaga Beach	—	—	—	—	—	—	—	—	100
Welland	55	39	45	49	61	64	50	79	82
Weston	35	59	55	64	60	71	48	62	75
Whitby	56	74	47	39	31	71	70	69	88
Willowdale	49	58	59	49	65	67	57	65	79
Windsor	53	57	60	60	52	72	64	70	79
Woodbridge	52	53	48	84	55	73	67	82	83
Woodstock	54	50	54	57	69	76	39	62	61
Rural	52	58	54	55	60	64	51	66	75
Other	45	37	32	45	45	70	57	62	75

Note: It is not possible to compare data from 1997-2001 with data from 2002-2004 because of the change in coding classification from ICD9CCP to ICD10CA in FY2002

"—" indicates either no data were available for that facility for that year, that the institution did not exist in that year, or that the data were censored to protect patient confidentiality (when the denominator for a given indicator < 5)

Gastrointestinal Hemorrhage Mortality: Score by Municipality

Municipality	1997–1998	1998–1999	1999–2000	2000–2001	2001–2002	2002–2003	2003–2004	2004–2005	2005–2006
Acton	32	—	100	83	100	91	54	100	100
Ajax	88	93	92	64	90	99	96	66	91
Alliston	95	86	78	97	42	53	62	23	79
Amherstburg	52	100	71	99	76	95	71	5	100
Arnprior	96	63	92	18	100	96	90	84	100
Aurora	50	69	86	71	100	63	65	86	93
Aylmer West	90	77	80	100	81	93	81	90	91
Barrie	85	81	86	80	81	81	81	74	91
Belleville	90	62	65	69	82	49	73	51	83
Bolton	77	50	99	100	59	75	65	48	100
Bowmanville	82	84	93	50	94	79	83	98	94
Bracebridge	82	82	100	37	89	75	99	39	100
Bradford	99	97	44	67	100	75	91	67	71
Brampton	93	98	95	88	96	82	78	78	83
Brantford	84	92	84	83	90	77	77	67	69
Brockville	85	91	87	71	95	81	88	73	80
Burlington	91	85	100	88	93	66	79	65	88
Caledon	—	—	—	—	—	—	—	—	100
Caledonia	73	99	39	—	100	99	89	53	30
Cambridge	75	94	100	80	86	80	74	86	94
Carleton Place	93	94	90	100	100	99	100	53	31
Chatham	64	79	90	80	100	80	77	78	87
Cobourg	54	67	95	71	83	74	62	62	74
Collingwood	74	82	66	92	87	78	61	90	74
Concord	70	100	100	100	100	88	89	28	100

Note: It is not possible to compare data from 1997-2001 with data from 2002-2004 because of the change in coding classification from ICD9CCP to ICD10CA in FY2002

"—" indicates either no data were available for that facility for that year, that the institution did not exist in that year, or that the data were censored to protect patient confidentiality (when the denominator for a given indicator < 5)

Gastrointestinal Hemorrhage Mortality: Score by Municipality

Municipality	1997–1998	1998–1999	1999–2000	2000–2001	2001–2002	2002–2003	2003–2004	2004–2005	2005–2006
Cornwall	90	93	81	73	89	70	77	79	95
Cumberland	—	—	—	—	—	—	—	—	—
Delhi	96	81	100	100	100	85	28	12	71
Downsview	77	86	94	83	91	76	62	33	85
Dryden	99	86	62	35	82	63	90	91	42
Dunnville	95	56	87	91	93	67	98	52	69
East Gwillimbury	84	—	—	—	—	100	91	16	100
Elliot Lake	94	100	100	83	78	52	76	54	59
Elmira	—	40	—	100	100	1	0	77	100
Espanola	37	98	31	11	—	100	44	82	100
Essex	95	0	84	99	80	100	38	50	100
Etobicoke	79	89	84	89	89	76	63	57	84
Fergus	66	54	85	97	100	79	98	69	82
Fort Erie	83	91	99	69	69	91	91	30	63
Fort Frances	91	66	78	79	98	74	90	100	83
Gananoque	—	67	54	100	0	91	89	90	31
Garson	—	—	—	100	96	32	100	93	40
Georgetown	85	92	100	43	60	67	100	46	82
Goderich	80	94	100	70	95	80	93	88	88
Gravenhurst	100	—	100	0	100	63	92	59	63
Greely	—	—	—	—	—	—	37	100	—
Grimsby	70	66	53	100	65	74	92	31	86
Guelph	72	91	87	93	87	72	61	71	79
Hamilton	77	89	82	90	91	75	74	76	85
Hanmer	100	100	0	97	100	100	98	100	82

Note: It is not possible to compare data from 1997-2001 with data from 2002-2004 because of the change in coding classification from ICD9CCP to ICD10CA in FY2002

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Gastrointestinal Hemorrhage Mortality: Score by Municipality

Municipality	1997–1998	1998–1999	1999–2000	2000–2001	2001–2002	2002–2003	2003–2004	2004–2005	2005–2006
Hanover	50	77	94	83	94	76	95	41	73
Hawkesbury	100	100	100	100	51	84	33	100	79
Huntsville	84	100	100	65	100	73	70	86	53
Ingersoll	91	67	74	100	98	68	99	95	29
Innisfil	—	—	—	—	87	84	50	60	86
Kapuskasing	94	100	100	87	100	63	75	32	45
Kenora	97	73	73	58	100	60	76	88	100
Keswick	70	50	88	100	55	92	76	100	33
Kincardine	69	93	94	100	54	96	82	69	100
King City	84	100	—	26	—	90	34	64	100
Kingston	83	92	81	95	88	64	91	85	94
Kingsville	89	100	90	96	80	68	78	79	67
Kirkland Lake	90	87	99	83	92	71	97	59	75
Kitchener	83	81	70	90	87	85	81	64	86
Leamington	67	84	80	70	99	49	90	85	100
Lindsay	29	89	47	74	95	72	99	67	30
Listowel	56	52	53	60	76	17	90	61	67
Lively	100	70	100	100	100	100	57	45	100
London	78	85	84	72	97	83	70	70	86
Manotick	—	97	38	—	—	—	93	92	100
Maple	100	73	83	100	100	94	92	64	100
Markham	76	100	91	82	65	74	52	70	76
Meaford	91	67	94	55	42	84	89	92	42
Midland	50	63	78	75	73	70	53	86	89
Milton	90	98	95	100	71	98	70	93	79

Note: It is not possible to compare data from 1997-2001 with data from 2002-2004 because of the change in coding classification from ICD9CCP to ICD10CA in FY2002

"—" indicates either no data were available for that facility for that year, that the institution did not exist in that year, or that the data were censored to protect patient confidentiality (when the denominator for a given indicator < 5)

Gastrointestinal Hemorrhage Mortality: Score by Municipality

Municipality	1997–1998	1998–1999	1999–2000	2000–2001	2001–2002	2002–2003	2003–2004	2004–2005	2005–2006
Mississauga	86	95	98	96	94	79	83	78	87
Napanee	40	87	99	100	86	100	86	73	79
Navan	—	—	—	—	—	—	—	81	—
New Hamburg	—	—	—	—	—	—	—	28	85
Newmarket	57	79	96	40	84	87	93	41	85
Niagara Falls	63	88	84	84	81	79	72	48	82
North Bay	75	90	65	79	73	79	80	62	95
North York	73	74	100	82	94	65	69	82	77
Oakville	75	83	96	93	97	85	80	80	82
Orangeville	84	88	85	61	93	100	97	86	100
Orillia	72	87	36	74	57	83	83	63	89
Oshawa	68	86	76	67	94	83	78	44	97
Ottawa	72	82	76	63	87	84	79	68	88
Owen Sound	82	82	100	52	86	71	76	84	85
Paris	56	99	67	53	78	0	77	26	34
Parry Sound	100	84	35	94	100	81	57	86	100
Pembroke	80	88	97	82	80	43	68	49	95
Penetanguishene	100	100	86	65	90	55	98	68	100
Perth	49	54	86	99	95	75	93	57	87
Petawawa	87	—	88	—	94	100	88	0	100
Peterborough	97	82	86	100	72	72	74	56	85
Pickering	76	100	83	60	90	78	56	100	85
Port Colborne	87	84	82	99	82	76	66	41	73
Port Hope	93	100	100	60	63	63	96	46	100
Port Perry	100	100	100	44	62	100	94	69	100

Note: It is not possible to compare data from 1997-2001 with data from 2002-2004 because of the change in coding classification from ICD9CCP to ICD10CA in FY2002

"—" indicates either no data were available for that facility for that year, that the institution did not exist in that year, or that the data were censored to protect patient confidentiality (when the denominator for a given indicator < 5)

Gastrointestinal Hemorrhage Mortality: Score by Municipality

Municipality	1997–1998	1998–1999	1999–2000	2000–2001	2001–2002	2002–2003	2003–2004	2004–2005	2005–2006
Port Stanley	93	—	93	16	100	39	—	—	—
Renfrew	2	77	81	62	82	86	77	76	38
Richmond Hill	97	88	100	100	88	73	83	78	88
Rockland	97	—	94	100	—	87	28	59	100
Russell	—	—	—	—	—	—	—	91	—
Sarnia	75	82	73	88	83	84	82	69	92
Sault Ste. Marie	81	90	89	86	98	97	86	70	77
Scarborough	80	89	81	86	84	79	75	57	87
Simcoe	73	83	100	100	100	61	77	81	87
Sioux Lookout	88	95	17	—	96	90	84	—	100
Smiths Falls	0	52	93	68	94	35	48	18	100
St. Catharine	86	88	84	65	85	77	65	55	77
St. Mary's	44	72	94	49	94	80	57	82	100
St. Thomas	82	87	100	93	90	73	79	87	90
Stouffville	53	82	100	100	87	88	96	33	100
Stratford	98	99	100	100	89	97	100	60	100
Strathroy	81	100	62	64	73	93	69	18	70
Sturgeon	—	—	—	—	—	93	34	90	100
Sudbury	79	89	100	62	79	70	92	66	71
Thornhill	86	79	91	95	100	78	87	79	88
Thunder Bay	94	89	100	100	94	78	82	74	76
Tillsonburg	70	67	57	53	83	65	63	59	0
Timmins	89	91	95	88	94	88	80	59	90
Toronto	77	86	87	68	86	78	76	63	86
Trenton	72	100	100	65	86	100	71	96	71

Note: It is not possible to compare data from 1997-2001 with data from 2002-2004 because of the change in coding classification from ICD9CCP to ICD10CA in FY2002

"—" indicates either no data were available for that facility for that year, that the institution did not exist in that year, or that the data were censored to protect patient confidentiality (when the denominator for a given indicator < 5)

Gastrointestinal Hemorrhage Mortality: Score by Municipality

Municipality	1997–1998	1998–1999	1999–2000	2000–2001	2001–2002	2002–2003	2003–2004	2004–2005	2005–2006
Uxbridge	90	100	77	46	69	67	92	94	77
Val Caron	—	—	—	99	100	29	90	93	100
Wallaceburg	46	62	53	97	89	96	97	46	100
Wasaga Beach	—	—	—	—	—	—	—	74	100
Welland	85	76	67	94	91	66	62	70	100
Weston	78	88	71	63	97	82	71	56	79
Whitby	77	95	100	85	93	74	87	88	92
Willowdale	71	80	79	72	94	83	71	74	84
Windsor	86	93	87	70	83	69	79	73	87
Woodbridge	100	100	87	64	100	84	77	84	84
Woodstock	95	97	82	78	97	71	89	92	82
Rural	79	89	83	76	85	75	79	66	83
Other	67	77	93	68	83	83	85	71	90

Note: It is not possible to compare data from 1997-2001 with data from 2002-2004 because of the change in coding classification from ICD9CCP to ICD10CA in FY2002

"—" indicates either no data were available for that facility for that year, that the institution did not exist in that year, or that the data were censored to protect patient confidentiality (when the denominator for a given indicator < 5)

Hip Fracture Mortality: Score by Municipality

Municipality	1997–1998	1998–1999	1999–2000	2000–2001	2001–2002	2002–2003	2003–2004	2004–2005	2005–2006
Acton	93	—	95	43	—	—	45	91	100
Ajax	87	89	66	61	91	69	81	81	86
Alliston	—	87	95	57	71	61	76	91	100
Amherstburg	93	43	94	83	89	27	91	67	88
Arnprior	—	—	93	—	—	87	—	94	100
Aurora	70	93	59	30	95	80	76	50	100
Aylmer West	53	88	71	5	21	71	82	76	91
Barrie	92	62	88	84	91	69	80	67	77
Belleville	79	49	79	73	88	70	77	75	94
Bolton	86	92	81	94	100	48	92	65	39
Bowmanville	81	88	92	62	65	61	72	77	73
Bracebridge	95	92	80	97	95	100	70	91	92
Bradford	64	0	57	46	40	64	69	62	47
Brampton	74	61	81	67	57	81	70	70	94
Brantford	82	60	82	85	87	63	75	84	79
Brockville	60	53	80	59	59	34	76	73	60
Burlington	70	54	80	80	80	70	71	55	85
Caledon	—	—	—	—	—	—	—	—	100
Caledonia	—	96	—	37	99	51	94	56	20
Cambridge	89	73	91	73	93	79	87	91	93
Carleton Place	—	—	—	83	99	94	92	92	100
Chatham	89	70	88	74	92	86	72	63	88
Cobourg	65	56	61	73	71	91	93	57	100
Collingwood	77	92	84	55	58	71	69	89	86
Concord	—	—	—	—	—	—	100	62	—

Note: It is not possible to compare data from 1997-2001 with data from 2002-2004 because of the change in coding classification from ICD9CCP to ICD10CA in FY2002

"—" indicates either no data were available for that facility for that year, that the institution did not exist in that year, or that the data were censored to protect patient confidentiality (when the denominator for a given indicator < 5)

Hip Fracture Mortality: Score by Municipality

Municipality	1997–1998	1998–1999	1999–2000	2000–2001	2001–2002	2002–2003	2003–2004	2004–2005	2005–2006
Cornwall	87	69	68	51	92	85	85	64	93
Cumberland	—	—	—	—	—	—	—	—	—
Delhi	68	24	—	95	—	28	—	—	100
Downsview	83	64	85	61	51	67	64	65	77
Dryden	—	—	—	—	—	—	54	—	—
Dunnville	72	76	95	92	54	89	93	63	100
East Gwillimbury	—	—	—	—	67	90	—	—	—
Elliot Lake	0	48	52	77	94	89	68	61	100
Elmira	—	35	—	90	100	93	43	66	93
Espanola	—	—	—	—	46	—	—	—	—
Essex	93	—	69	100	0	36	55	45	100
Etobicoke	83	60	80	72	72	69	75	73	91
Fergus	76	64	82	96	36	—	93	88	100
Fort Erie	90	88	65	34	93	21	47	38	63
Fort Frances	79	69	60	90	57	74	79	68	100
Gananoque	84	92	57	53	40	0	45	45	100
Garson	92	—	65	—	—	—	—	—	—
Georgetown	100	97	74	31	91	72	83	62	93
Goderich	100	71	100	100	97	89	96	76	100
Gravenhurst	95	88	97	63	72	76	87	95	100
Greely	—	—	—	—	—	—	—	—	—
Grimsby	54	53	95	76	91	42	91	90	100
Guelph	87	73	80	87	85	60	87	81	81
Hamilton	77	56	74	63	70	77	76	79	87
Hanmer	39	—	—	—	—	—	—	—	100

Note: It is not possible to compare data from 1997-2001 with data from 2002-2004 because of the change in coding classification from ICD9CCP to ICD10CA in FY2002

"—" indicates either no data were available for that facility for that year, that the institution did not exist in that year, or that the data were censored to protect patient confidentiality (when the denominator for a given indicator < 5)

Hip Fracture Mortality: Score by Municipality

Municipality	1997–1998	1998–1999	1999–2000	2000–2001	2001–2002	2002–2003	2003–2004	2004–2005	2005–2006
Hanover	73	89	96	64	76	56	91	44	100
Hawkesbury	65	97	73	—	—	100	91	—	100
Huntsville	58	76	75	82	93	82	60	49	91
Ingersoll	90	87	94	87	93	43	73	38	89
Innisfil	—	—	—	—	76	100	66	90	100
Kapuskasing	—	94	100	—	—	—	94	—	—
Kenora	49	42	81	15	63	92	65	38	90
Keswick	77	84	76	45	75	47	63	89	42
Kincardine	62	—	—	99	47	—	71	52	—
King City	—	—	—	87	87	88	62	—	100
Kingston	77	66	84	66	59	50	49	66	79
Kingsville	26	38	54	100	86	32	89	25	100
Kirkland Lake	65	89	72	97	88	32	83	100	—
Kitchener	73	74	88	81	71	59	69	61	86
Leamington	73	96	96	72	76	58	78	93	93
Lindsay	72	17	90	96	75	82	81	75	100
Listowel	—	14	100	95	57	74	91	92	100
Lively	—	—	—	89	87	44	0	90	71
London	76	64	79	74	77	76	77	73	86
Manotick	—	—	—	—	—	—	—	—	—
Maple	—	30	100	0	8	89	73	78	85
Markham	77	55	75	83	49	37	73	72	73
Meaford	22	99	53	25	100	92	67	92	70
Midland	72	71	97	74	81	95	63	49	100
Milton	66	77	91	54	78	93	94	57	68

Note: It is not possible to compare data from 1997-2001 with data from 2002-2004 because of the change in coding classification from ICD9CCP to ICD10CA in FY2002

"—" indicates either no data were available for that facility for that year, that the institution did not exist in that year, or that the data were censored to protect patient confidentiality (when the denominator for a given indicator < 5)

Hip Fracture Mortality: Score by Municipality

Municipality	1997–1998	1998–1999	1999–2000	2000–2001	2001–2002	2002–2003	2003–2004	2004–2005	2005–2006
Mississauga	80	67	84	68	76	70	86	67	91
Napanee	92	44	26	88	59	73	70	64	100
Navan	—	—	—	—	—	—	—	—	—
New Hamburg	—	—	—	—	—	—	—	93	36
Newmarket	64	74	87	71	71	84	81	87	87
Niagara Falls	50	60	78	62	69	81	83	72	83
North Bay	56	45	59	11	30	49	54	46	82
North York	70	43	79	82	45	69	60	68	81
Oakville	82	65	91	71	79	80	72	82	89
Orangeville	82	81	83	73	100	98	73	75	91
Orillia	70	53	91	92	96	55	73	88	84
Oshawa	68	52	86	76	65	83	77	82	90
Ottawa	75	58	72	56	73	67	79	76	88
Owen Sound	95	57	89	42	72	55	77	83	77
Paris	74	91	100	47	100	58	81	89	100
Parry Sound	69	76	84	80	50	59	8	69	78
Pembroke	75	37	73	64	89	78	94	88	100
Penetanguishene	95	89	95	86	94	66	92	90	100
Perth	96	65	69	49	9	71	93	58	100
Petawawa	—	—	—	—	—	—	—	91	—
Peterborough	64	50	83	62	68	90	80	78	91
Pickering	93	49	95	52	41	96	75	50	97
Port Colborne	23	54	0	47	45	89	63	64	87
Port Hope	94	89	69	90	86	91	80	66	100
Port Perry	—	—	74	34	87	—	52	45	100

Note: It is not possible to compare data from 1997-2001 with data from 2002-2004 because of the change in coding classification from ICD9CCP to ICD10CA in FY2002

"—" indicates either no data were available for that facility for that year, that the institution did not exist in that year, or that the data were censored to protect patient confidentiality (when the denominator for a given indicator < 5)

Hip Fracture Mortality: Score by Municipality

Municipality	1997–1998	1998–1999	1999–2000	2000–2001	2001–2002	2002–2003	2003–2004	2004–2005	2005–2006
Port Stanley	—	—	—	—	—	—	—	—	—
Renfrew	63	25	96	89	94	67	95	60	—
Richmond Hill	96	66	76	78	69	75	84	68	91
Rockland	—	—	64	83	—	—	100	90	17
Russell	—	—	—	—	—	—	—	—	—
Sarnia	71	72	87	50	75	69	89	78	90
Sault Ste. Marie	79	85	79	66	85	77	76	72	77
Scarborough	75	67	77	71	71	73	74	69	86
Simcoe	63	100	91	21	100	66	67	81	83
Sioux Lookout	—	—	—	—	—	—	—	—	—
Smiths Falls	66	38	3	62	63	57	78	58	100
St. Catharine	66	38	67	68	61	88	69	70	82
St. Mary's	94	53	95	90	62	91	77	75	77
St. Thomas	70	54	86	30	79	74	67	72	87
Stouffville	92	50	99	77	64	89	80	88	83
Stratford	93	88	87	92	73	71	84	77	92
Strathroy	53	46	94	71	39	39	89	90	100
Sturgeon	—	—	—	—	—	86	—	0	—
Sudbury	60	50	83	69	50	64	74	81	93
Thornhill	85	99	92	95	77	83	77	62	90
Thunder Bay	82	70	78	92	80	89	80	64	78
Tillsonburg	93	46	80	87	100	57	77	76	100
Timmins	77	75	77	56	100	98	75	77	90
Toronto	74	60	82	60	65	68	76	71	91
Trenton	85	34	81	64	69	54	100	52	81

Note: It is not possible to compare data from 1997-2001 with data from 2002-2004 because of the change in coding classification from ICD9CCP to ICD10CA in FY2002

"—" indicates either no data were available for that facility for that year, that the institution did not exist in that year, or that the data were censored to protect patient confidentiality (when the denominator for a given indicator < 5)

Hip Fracture Mortality: Score by Municipality

Municipality	1997–1998	1998–1999	1999–2000	2000–2001	2001–2002	2002–2003	2003–2004	2004–2005	2005–2006
Uxbridge	92	89	73	39	87	—	93	—	100
Val Caron	—	—	—	—	—	91	91	44	43
Wallaceburg	72	70	93	57	90	66	76	66	88
Wasaga Beach	—	—	—	—	—	—	—	—	100
Welland	73	33	75	55	51	84	72	63	92
Weston	67	63	73	83	71	63	80	89	87
Whitby	78	81	75	48	88	70	82	84	85
Willowdale	74	61	77	58	71	73	81	73	91
Windsor	68	53	82	54	69	77	73	80	90
Woodbridge	56	68	86	100	56	55	78	74	90
Woodstock	84	80	80	44	71	52	89	66	81
Rural	76	67	82	69	73	75	77	70	87
Other	73	69	82	63	75	70	79	74	94

Note: It is not possible to compare data from 1997-2001 with data from 2002-2004 because of the change in coding classification from ICD9CCP to ICD10CA in FY2002

"—" indicates either no data were available for that facility for that year, that the institution did not exist in that year, or that the data were censored to protect patient confidentiality (when the denominator for a given indicator < 5)

Pneumonia Mortality: Score by Municipality

Municipality	1997–1998	1998–1999	1999–2000	2000–2001	2001–2002	2002–2003	2003–2004	2004–2005	2005–2006
Acton	66	69	96	91	20	26	40	78	100
Ajax	50	59	53	73	58	76	64	60	86
Alliston	55	20	68	33	29	48	28	63	84
Amherstburg	68	59	90	26	13	96	79	63	96
Arnprior	68	71	47	63	68	74	61	82	67
Aurora	44	34	31	53	9	45	54	66	67
Aylmer West	41	73	40	53	60	33	51	59	75
Barrie	65	57	66	54	54	65	64	57	85
Belleville	49	48	49	41	36	65	50	60	73
Bolton	65	60	69	81	16	48	50	84	76
Bowmanville	47	55	55	60	51	56	57	73	92
Bracebridge	40	56	67	57	0	41	65	73	60
Bradford	37	65	79	88	23	71	63	59	87
Brampton	43	62	69	65	65	68	51	60	87
Brantford	64	54	75	80	48	57	52	63	72
Brockville	53	32	79	47	38	34	22	35	81
Burlington	63	53	76	71	43	54	46	61	86
Caledon	—	—	—	—	33	—	—	—	—
Caledonia	74	50	100	93	57	75	69	87	100
Cambridge	56	61	66	68	50	52	46	71	88
Carleton Place	63	55	80	64	75	59	74	58	89
Chatham	51	55	52	62	37	40	39	68	58
Cobourg	58	47	69	32	31	53	21	27	79
Collingwood	68	65	74	54	40	68	34	36	66
Concord	48	37	98	10	5	26	58	65	100

Note: It is not possible to compare data from 1997-2001 with data from 2002-2004 because of the change in coding classification from ICD9CCP to ICD10CA in FY2002

"—" indicates either no data were available for that facility for that year, that the institution did not exist in that year, or that the data were censored to protect patient confidentiality (when the denominator for a given indicator < 5)

Pneumonia Mortality: Score by Municipality

Municipality	1997–1998	1998–1999	1999–2000	2000–2001	2001–2002	2002–2003	2003–2004	2004–2005	2005–2006
Cornwall	47	62	57	65	54	51	66	61	79
Cumberland	—	69	—	—	—	36	—	—	—
Delhi	65	68	72	52	24	73	55	55	100
Downsview	52	41	58	45	21	50	45	49	75
Dryden	58	45	65	64	68	33	73	83	90
Dunnville	42	26	66	72	29	51	59	52	62
East Gwillimbury	0	100	0	97	77	—	62	72	—
Elliot Lake	32	56	72	46	49	40	79	68	60
Elmira	83	38	41	93	99	69	51	30	94
Espanola	81	68	51	72	30	69	51	69	100
Essex	46	49	46	16	68	70	43	46	77
Etobicoke	47	52	57	40	32	39	46	37	78
Fergus	67	56	70	82	56	78	51	81	66
Fort Erie	33	25	70	58	60	73	44	45	68
Fort Frances	60	29	60	62	86	66	33	51	94
Gananoque	36	45	76	78	47	81	74	49	86
Garson	55	49	52	0	56	17	84	9	—
Georgetown	61	45	53	82	78	65	52	72	85
Goderich	83	73	82	62	49	65	74	77	87
Gravenhurst	69	54	59	53	38	67	17	50	82
Greely	—	—	—	—	27	100	—	73	—
Grimsby	43	28	72	55	72	65	49	58	75
Guelph	42	57	70	53	40	47	57	59	87
Hamilton	58	56	69	61	59	58	55	66	89
Hanmer	54	39	46	67	59	85	83	38	100

Note: It is not possible to compare data from 1997-2001 with data from 2002-2004 because of the change in coding classification from ICD9CCP to ICD10CA in FY2002

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Pneumonia Mortality: Score by Municipality

Municipality	1997–1998	1998–1999	1999–2000	2000–2001	2001–2002	2002–2003	2003–2004	2004–2005	2005–2006
Hanover	84	69	77	70	61	45	69	68	90
Hawkesbury	64	61	84	72	35	55	62	95	58
Huntsville	34	51	65	52	55	59	62	75	92
Ingersoll	42	56	50	53	52	77	40	68	85
Innisfil	—	—	—	87	85	73	79	67	80
Kapuskasing	52	54	78	51	60	67	73	70	83
Kenora	51	23	67	34	13	29	29	38	75
Keswick	28	51	46	59	57	38	39	66	87
Kincardine	67	53	66	75	49	66	68	66	92
King City	66	76	56	85	20	39	31	52	—
Kingston	37	52	63	66	59	53	46	68	90
Kingsville	53	56	64	72	30	59	51	84	81
Kirkland Lake	61	47	69	69	30	65	36	27	81
Kitchener	55	46	67	52	46	51	49	52	91
Leamington	53	80	70	74	55	56	81	60	85
Lindsay	56	60	79	54	65	63	58	64	78
Listowel	35	51	66	46	60	57	69	61	76
Lively	1	35	99	65	49	65	72	53	100
London	61	51	64	56	63	60	67	64	89
Manotick	—	—	56	100	100	95	46	100	100
Maple	23	36	44	81	66	57	64	63	87
Markham	61	67	68	35	41	38	35	27	73
Meaford	71	84	68	16	68	78	70	62	100
Midland	37	59	50	58	66	66	39	69	74
Milton	46	73	72	75	40	61	37	58	79

Note: It is not possible to compare data from 1997-2001 with data from 2002-2004 because of the change in coding classification from ICD9CCP to ICD10CA in FY2002

"—" indicates either no data were available for that facility for that year, that the institution did not exist in that year, or that the data were censored to protect patient confidentiality (when the denominator for a given indicator < 5)

Pneumonia Mortality: Score by Municipality

Municipality	1997–1998	1998–1999	1999–2000	2000–2001	2001–2002	2002–2003	2003–2004	2004–2005	2005–2006
Mississauga	45	51	57	49	39	42	42	53	80
Napanee	50	53	58	68	42	62	65	51	100
Navan	100	—	—	46	—	75	—	—	—
New Hamburg	—	—	—	—	—	—	100	13	—
Newmarket	41	55	54	64	49	46	59	43	79
Niagara Falls	66	63	62	66	49	57	58	52	68
North Bay	56	43	60	75	61	66	55	74	62
North York	42	46	51	32	38	42	44	59	85
Oakville	65	51	74	56	35	56	46	57	83
Orangeville	55	63	83	73	57	67	54	68	91
Orillia	74	69	63	56	47	62	41	61	77
Oshawa	54	48	60	62	48	61	49	67	87
Ottawa	59	49	67	60	60	62	56	62	87
Owen Sound	71	71	75	71	60	56	49	83	77
Paris	57	50	51	77	50	31	50	82	100
Parry Sound	74	60	70	51	59	41	81	65	92
Pembroke	42	49	51	36	54	49	30	58	74
Penetanguishene	41	50	58	63	50	65	58	67	90
Perth	29	31	45	60	18	48	56	33	87
Petawawa	22	30	62	70	61	75	82	88	100
Peterborough	50	32	57	52	24	43	38	45	77
Pickering	60	58	68	76	31	70	60	57	86
Port Colborne	54	42	46	60	82	78	44	49	70
Port Hope	41	54	52	53	3	54	57	22	63
Port Perry	79	24	49	86	79	35	8	48	89

Note: It is not possible to compare data from 1997-2001 with data from 2002-2004 because of the change in coding classification from ICD9CCP to ICD10CA in FY2002

"—" indicates either no data were available for that facility for that year, that the institution did not exist in that year, or that the data were censored to protect patient confidentiality (when the denominator for a given indicator < 5)

Pneumonia Mortality: Score by Municipality

Municipality	1997–1998	1998–1999	1999–2000	2000–2001	2001–2002	2002–2003	2003–2004	2004–2005	2005–2006
Port Stanley	89	0	80	18	98	—	—	—	—
Renfrew	38	43	60	51	58	46	76	68	83
Richmond Hill	41	62	68	60	41	70	41	60	86
Rockland	40	92	32	85	51	63	59	69	91
Russell	7	—	—	—	—	—	—	—	—
Sarnia	64	40	59	71	57	50	56	69	77
Sault Ste. Marie	56	50	61	78	59	75	55	58	76
Scarborough	47	42	51	43	31	44	32	48	74
Simcoe	68	63	54	46	52	46	36	64	87
Sioux Lookout	28	64	33	58	61	20	26	85	100
Smiths Falls	51	30	48	17	19	36	42	44	61
St. Catharine	51	53	62	67	33	60	53	51	80
St. Mary's	52	80	52	60	80	77	79	65	79
St. Thomas	42	54	72	64	66	37	53	63	69
Stouffville	65	37	83	26	51	36	28	66	62
Stratford	70	65	83	84	63	76	64	63	87
Strathroy	86	62	58	60	33	38	43	78	87
Sturgeon	—	—	—	—	15	0	41	51	0
Sudbury	48	47	55	42	36	60	58	65	79
Thornhill	61	70	66	49	48	64	55	72	90
Thunder Bay	65	51	63	60	51	66	59	77	88
Tillsonburg	49	60	69	67	57	67	60	76	59
Timmins	69	68	75	50	63	64	64	77	84
Toronto	51	47	55	49	35	53	47	57	84
Trenton	60	69	66	69	51	61	24	43	80

Note: It is not possible to compare data from 1997-2001 with data from 2002-2004 because of the change in coding classification from ICD9CCP to ICD10CA in FY2002

"—" indicates either no data were available for that facility for that year, that the institution did not exist in that year, or that the data were censored to protect patient confidentiality (when the denominator for a given indicator < 5)

Pneumonia Mortality: Score by Municipality

Municipality	1997–1998	1998–1999	1999–2000	2000–2001	2001–2002	2002–2003	2003–2004	2004–2005	2005–2006
Uxbridge	73	61	56	53	49	34	20	53	73
Val Caron	27	30	50	44	58	90	0	0	85
Wallaceburg	67	56	58	63	62	50	44	56	79
Wasaga Beach	—	—	—	—	—	—	—	71	100
Welland	76	57	77	72	41	68	67	65	80
Weston	61	58	67	58	48	60	40	65	80
Whitby	38	51	59	46	48	59	64	50	87
Willowdale	51	38	45	42	31	58	41	51	87
Windsor	46	45	55	54	46	58	55	62	81
Woodbridge	75	43	74	65	41	35	66	57	88
Woodstock	37	65	45	55	67	53	37	53	87
Rural	61	58	66	59	51	59	57	66	79
Other	48	53	66	58	57	60	61	73	82

Note: It is not possible to compare data from 1997-2001 with data from 2002-2004 because of the change in coding classification from ICD9CCP to ICD10CA in FY2002

"—" indicates either no data were available for that facility for that year, that the institution did not exist in that year, or that the data were censored to protect patient confidentiality (when the denominator for a given indicator < 5)

Percutaneous Transluminal Coronary Angioplasty (PTCA) Mortality: Score by Municipality

Municipality	1997–1998	1998–1999	1999–2000	2000–2001	2001–2002	2002–2003	2003–2004	2004–2005	2005–2006
Acton	—	96	95	94	0	—	—	—	—
Ajax	90	93	93	95	81	—	73	94	97
Alliston	84	4	88	99	95	—	83	100	100
Amherstburg	91	66	97	94	95	—	82	98	100
Arnprior	81	90	88	96	90	—	38	87	100
Aurora	82	93	89	94	89	—	95	99	82
Aylmer West	—	90	0	97	89	—	84	93	—
Barrie	91	93	94	93	85	—	48	91	88
Belleville	48	69	68	91	93	—	93	88	100
Bolton	90	—	87	55	26	—	85	89	100
Bowmanville	24	94	55	95	94	—	88	94	91
Bracebridge	100	50	91	96	95	—	92	100	100
Bradford	83	91	89	96	92	—	100	96	89
Brampton	74	92	92	95	92	—	82	79	94
Brantford	63	96	75	95	92	—	63	77	86
Brockville	92	91	89	91	80	—	94	86	94
Burlington	76	85	77	95	80	—	76	74	83
Caledon	—	—	—	—	—	—	—	—	100
Caledonia	82	—	88	100	47	—	100	90	—
Cambridge	87	91	90	95	89	—	70	96	97
Carleton Place	79	45	96	100	100	—	86	75	100
Chatham	88	56	90	95	80	—	68	93	100
Cobourg	—	72	89	97	89	—	83	76	100
Collingwood	—	95	90	49	93	—	100	69	59
Concord	—	—	88	94	89	—	99	—	100

Note: It is not possible to compare data from 1997-2001 with data from 2002-2004 because of the change in coding classification from ICD9CCP to ICD10CA in FY2002

"—" indicates either no data were available for that facility for that year, that the institution did not exist in that year, or that the data were censored to protect patient confidentiality (when the denominator for a given indicator < 5)

Percutaneous Transluminal Coronary Angioplasty (PTCA) Mortality: Score by Municipality

Municipality	1997–1998	1998–1999	1999–2000	2000–2001	2001–2002	2002–2003	2003–2004	2004–2005	2005–2006
Cornwall	95	95	81	93	87	—	71	94	100
Cumberland	—	—	—	—	88	—	—	86	100
Delhi	—	—	—	—	100	—	89	—	—
Downsview	13	77	87	93	70	—	90	67	97
Dryden	—	—	—	—	—	—	—	—	—
Dunnville	—	—	100	95	89	—	100	87	—
East Gwillimbury	—	—	—	94	91	—	9	89	100
Elliot Lake	100	100	88	81	96	—	96	72	94
Elmira	—	—	—	—	—	—	—	90	—
Espanola	—	100	89	94	96	—	90	—	100
Essex	91	90	90	95	89	—	81	91	100
Etobicoke	70	87	89	95	88	—	81	87	95
Fergus	—	—	—	95	100	—	87	90	—
Fort Erie	90	0	—	71	26	—	99	90	24
Fort Frances	—	—	—	—	—	—	—	—	—
Gananoque	—	92	57	78	32	—	44	22	100
Garson	—	100	100	61	87	—	86	88	100
Georgetown	89	91	97	95	55	—	91	100	100
Goderich	—	91	97	100	90	—	91	100	100
Gravenhurst	—	90	91	63	94	—	0	46	100
Greely	—	—	—	94	—	—	83	100	100
Grimsby	88	12	94	97	91	—	85	94	100
Guelph	89	95	94	96	93	—	83	97	100
Hamilton	58	88	76	86	80	—	72	82	91
Hanmer	100	100	89	70	89	—	95	88	100

Note: It is not possible to compare data from 1997-2001 with data from 2002-2004 because of the change in coding classification from ICD9CCP to ICD10CA in FY2002

"—" indicates either no data were available for that facility for that year, that the institution did not exist in that year, or that the data were censored to protect patient confidentiality (when the denominator for a given indicator < 5)

Percutaneous Transluminal Coronary Angioplasty (PTCA) Mortality: Score by Municipality

Municipality	1997–1998	1998–1999	1999–2000	2000–2001	2001–2002	2002–2003	2003–2004	2004–2005	2005–2006
Hanover	100	—	—	96	—	—	82	—	—
Hawkesbury	91	91	47	57	90	—	81	60	100
Huntsville	100	100	90	96	90	—	99	36	100
Ingersoll	100	—	90	69	94	—	85	100	—
Innisfil	—	—	—	—	87	—	82	96	79
Kapuskasing	100	100	92	96	99	—	89	92	100
Kenora	—	—	—	—	—	—	—	—	—
Keswick	92	89	91	95	93	—	96	58	74
Kincardine	—	90	97	94	88	—	84	88	100
King City	—	—	88	95	100	—	92	99	71
Kingston	84	74	80	93	71	—	63	79	94
Kingsville	81	—	—	100	90	—	82	52	—
Kirkland Lake	100	100	95	96	92	—	100	64	100
Kitchener	75	94	93	94	89	—	82	88	94
Leamington	81	90	89	95	89	—	88	92	100
Lindsay	82	97	69	85	69	—	87	83	89
Listowel	—	—	—	—	—	—	—	88	100
Lively	100	—	87	94	—	—	100	40	85
London	48	76	63	94	81	—	55	76	87
Manotick	—	91	89	100	100	—	85	93	100
Maple	82	7	97	95	92	—	51	89	100
Markham	89	92	91	95	89	—	85	80	95
Meaford	—	—	—	95	98	—	—	0	100
Midland	93	100	88	95	91	—	81	100	100
Milton	82	90	100	97	88	—	22	100	41

Note: It is not possible to compare data from 1997-2001 with data from 2002-2004 because of the change in coding classification from ICD9CCP to ICD10CA in FY2002

"—" indicates either no data were available for that facility for that year, that the institution did not exist in that year, or that the data were censored to protect patient confidentiality (when the denominator for a given indicator < 5)

Percutaneous Transluminal Coronary Angioplasty (PTCA) Mortality: Score by Municipality

Municipality	1997–1998	1998–1999	1999–2000	2000–2001	2001–2002	2002–2003	2003–2004	2004–2005	2005–2006
Mississauga	80	89	90	93	87	—	72	81	96
Napanee	0	94	20	99	97	—	69	67	64
Navan	—	—	—	—	—	—	—	89	100
New Hamburg	—	—	—	—	—	—	83	100	—
Newmarket	88	93	72	95	92	—	88	95	88
Niagara Falls	65	76	79	83	88	—	72	76	100
North Bay	73	100	79	96	97	—	69	92	100
North York	73	88	83	94	70	—	93	78	95
Oakville	86	86	91	96	91	—	97	84	100
Orangeville	82	99	92	97	93	—	91	91	100
Orillia	91	92	89	97	92	—	85	79	100
Oshawa	71	92	90	96	95	—	91	85	93
Ottawa	69	84	84	93	85	—	81	83	93
Owen Sound	85	95	98	95	93	—	85	92	100
Paris	—	90	—	96	88	—	100	88	100
Parry Sound	—	100	—	94	89	—	81	88	79
Pembroke	89	93	93	96	92	—	86	92	94
Penetanguishene	99	—	92	75	91	—	89	89	100
Perth	79	90	65	81	92	—	83	89	100
Petawawa	—	90	88	—	100	—	26	85	71
Peterborough	92	85	82	97	90	—	79	87	100
Pickering	60	93	76	97	90	—	73	90	100
Port Colborne	87	90	95	78	92	—	96	73	—
Port Hope	100	92	100	94	88	—	83	88	100
Port Perry	97	94	88	98	95	—	93	43	100

Note: It is not possible to compare data from 1997-2001 with data from 2002-2004 because of the change in coding classification from ICD9CCP to ICD10CA in FY2002

"—" indicates either no data were available for that facility for that year, that the institution did not exist in that year, or that the data were censored to protect patient confidentiality (when the denominator for a given indicator < 5)

Percutaneous Transluminal Coronary Angioplasty (PTCA) Mortality: Score by Municipality

Municipality	1997–1998	1998–1999	1999–2000	2000–2001	2001–2002	2002–2003	2003–2004	2004–2005	2005–2006
Port Stanley	—	—	—	—	—	—	—	—	—
Renfrew	95	94	89	95	90	—	100	70	100
Richmond Hill	83	93	81	92	86	—	55	80	88
Rockland	95	90	100	95	—	—	87	99	100
Russell	—	—	—	99	93	—	81	91	100
Sarnia	84	92	79	95	91	—	75	90	100
Sault Ste. Marie	100	100	93	92	85	—	87	94	100
Scarborough	72	91	88	92	87	—	80	80	95
Simcoe	92	89	89	95	93	—	84	95	100
Sioux Lookout	—	—	—	—	—	—	—	—	—
Smiths Falls	50	99	92	62	99	—	100	100	100
St. Catharine	84	94	89	96	78	—	88	79	93
St. Mary's	—	—	91	95	—	—	100	89	—
St. Thomas	89	74	99	68	93	—	100	100	100
Stouffville	100	94	91	98	89	—	85	57	100
Stratford	91	93	92	98	100	—	86	52	100
Strathroy	—	95	94	95	89	—	100	14	—
Sturgeon	—	—	—	—	—	—	98	96	100
Sudbury	100	100	93	83	73	—	84	84	95
Thornhill	83	77	56	96	90	—	90	88	100
Thunder Bay	85	91	89	91	86	—	85	85	94
Tillsonburg	—	97	92	0	99	—	100	89	—
Timmins	100	100	94	95	100	—	55	89	94
Toronto	76	88	87	92	80	—	73	84	95
Trenton	82	90	57	98	75	—	70	92	85

Note: It is not possible to compare data from 1997-2001 with data from 2002-2004 because of the change in coding classification from ICD9CCP to ICD10CA in FY2002

"—" indicates either no data were available for that facility for that year, that the institution did not exist in that year, or that the data were censored to protect patient confidentiality (when the denominator for a given indicator < 5)

Percutaneous Transluminal Coronary Angioplasty (PTCA) Mortality: Score by Municipality

Municipality	1997–1998	1998–1999	1999–2000	2000–2001	2001–2002	2002–2003	2003–2004	2004–2005	2005–2006
Uxbridge	—	—	91	98	91	—	82	89	100
Val Caron	—	—	91	95	89	—	41	87	100
Wallaceburg	83	99	90	67	87	—	80	88	—
Wasaga Beach	—	—	—	—	—	—	—	—	100
Welland	86	93	92	97	90	—	79	74	100
Weston	88	84	94	91	73	—	80	88	91
Whitby	86	95	75	100	83	—	88	82	100
Willowdale	75	87	82	92	88	—	87	87	96
Windsor	87	91	87	91	92	—	78	91	97
Woodbridge	84	92	89	95	91	—	92	91	95
Woodstock	81	93	54	95	100	—	31	100	100
Rural	89	91	82	93	85	—	83	86	95
Other	85	86	82	85	86	—	92	91	97

Note: It is not possible to compare data from 1997-2001 with data from 2002-2004 because of the change in coding classification from ICD9CCP to ICD10CA in FY2002

"—" indicates either no data were available for that facility for that year, that the institution did not exist in that year, or that the data were censored to protect patient confidentiality (when the denominator for a given indicator < 5)

Carotid Endarterectomy Mortality: Score by Municipality

Municipality	1997–1998	1998–1999	1999–2000	2000–2001	2001–2002	2002–2003	2003–2004	2004–2005	2005–2006
Acton	—	—	—	—	—	—	—	—	—
Ajax	—	100	—	—	—	—	—	—	—
Alliston	—	—	—	—	—	—	—	89	—
Amherstburg	—	—	—	—	—	—	—	—	—
Arnprior	90	—	—	—	—	—	—	—	—
Aurora	—	91	—	—	—	—	—	—	100
Aylmer West	—	—	—	—	—	—	—	—	—
Barrie	0	100	100	97	100	97	90	34	96
Belleville	91	90	100	—	100	—	84	88	100
Bolton	—	—	—	—	—	—	—	—	—
Bowmanville	—	99	—	—	—	—	—	—	100
Bracebridge	93	—	—	—	—	—	—	100	—
Bradford	—	—	—	—	—	—	—	—	—
Brampton	50	100	96	95	98	98	100	100	100
Brantford	92	96	92	97	100	94	90	89	100
Brockville	—	91	92	—	—	—	—	—	—
Burlington	94	91	11	92	97	100	88	100	100
Caledon	—	—	—	—	—	—	—	—	—
Caledonia	—	—	—	—	—	—	—	—	—
Cambridge	92	91	—	92	100	95	85	0	100
Carleton Place	—	—	—	—	—	—	—	89	—
Chatham	94	90	95	97	96	—	80	—	—
Cobourg	—	99	—	—	96	—	80	—	100
Collingwood	—	100	92	—	—	95	100	100	—
Concord	—	—	—	—	—	—	—	—	—

Note: It is not possible to compare data from 1997-2001 with data from 2002-2004 because of the change in coding classification from ICD9CCP to ICD10CA in FY2002

"—" indicates either no data were available for that facility for that year, that the institution did not exist in that year, or that the data were censored to protect patient confidentiality (when the denominator for a given indicator < 5)

Carotid Endarterectomy Mortality: Score by Municipality

Municipality	1997–1998	1998–1999	1999–2000	2000–2001	2001–2002	2002–2003	2003–2004	2004–2005	2005–2006
Cornwall	100	91	100	100	95	10	—	—	100
Cumberland	—	—	—	—	—	—	—	—	—
Delhi	—	—	—	—	—	—	—	—	—
Downsview	91	100	48	92	99	100	100	32	100
Dryden	—	—	—	—	—	—	—	—	—
Dunnville	—	—	—	—	—	—	—	—	—
East Gwillimbury	—	—	—	—	—	—	—	—	—
Elliot Lake	91	91	97	98	100	93	—	86	0
Elmira	—	—	—	—	—	—	—	—	—
Espanola	—	94	—	—	—	—	—	—	—
Essex	—	—	—	—	—	—	—	—	—
Etobicoke	92	0	67	95	96	0	87	27	100
Fergus	—	—	—	—	—	—	—	—	—
Fort Erie	—	—	—	—	100	—	—	—	—
Fort Frances	—	—	—	—	—	—	—	—	—
Gananoque	—	—	—	—	—	—	—	—	—
Garson	—	—	—	—	—	—	—	—	—
Georgetown	—	—	—	—	—	—	—	—	—
Goderich	—	—	—	—	—	—	—	—	—
Gravenhurst	—	—	—	—	—	—	—	—	—
Greely	—	—	—	—	—	—	—	—	—
Grimsby	—	—	—	—	—	—	—	—	—
Guelph	90	94	100	92	96	52	79	89	—
Hamilton	46	94	55	95	99	78	96	82	91
Hanmer	88	—	91	—	—	93	80	—	—

Note: It is not possible to compare data from 1997-2001 with data from 2002-2004 because of the change in coding classification from ICD9CCP to ICD10CA in FY2002

"—" indicates either no data were available for that facility for that year, that the institution did not exist in that year, or that the data were censored to protect patient confidentiality (when the denominator for a given indicator < 5)

Carotid Endarterectomy Mortality: Score by Municipality

Municipality	1997–1998	1998–1999	1999–2000	2000–2001	2001–2002	2002–2003	2003–2004	2004–2005	2005–2006
Hanover	—	—	—	—	—	—	—	—	—
Hawkesbury	—	—	—	—	—	—	—	—	—
Huntsville	—	92	—	—	—	—	—	—	—
Ingersoll	—	—	—	—	—	—	—	—	—
Innisfil	—	—	—	92	100	100	86	88	100
Kapuskasing	90	—	93	—	96	—	—	—	—
Kenora	—	—	—	—	—	—	—	—	—
Keswick	—	100	—	—	—	—	—	—	100
Kincardine	—	—	—	—	—	—	—	—	—
King City	—	—	—	—	—	—	—	—	—
Kingston	100	91	91	97	99	97	81	88	100
Kingsville	—	—	—	—	—	—	—	—	—
Kirkland Lake	—	—	—	—	0	—	—	—	—
Kitchener	30	96	93	97	60	99	80	88	100
Leamington	—	—	92	—	—	—	—	—	—
Lindsay	—	100	—	—	100	—	—	88	—
Listowel	—	—	—	—	—	—	—	—	—
Lively	—	99	—	—	—	—	—	—	—
London	93	97	92	93	98	96	84	94	96
Manotick	—	—	—	—	—	—	—	—	—
Maple	—	—	—	—	—	—	—	—	—
Markham	100	100	91	—	100	—	—	—	100
Meaford	—	—	—	—	—	—	—	—	—
Midland	90	90	100	92	97	—	—	—	—
Milton	—	—	—	—	—	—	—	—	—

Note: It is not possible to compare data from 1997-2001 with data from 2002-2004 because of the change in coding classification from ICD9CCP to ICD10CA in FY2002

"—" indicates either no data were available for that facility for that year, that the institution did not exist in that year, or that the data were censored to protect patient confidentiality (when the denominator for a given indicator < 5)

Carotid Endarterectomy Mortality: Score by Municipality

Municipality	1997–1998	1998–1999	1999–2000	2000–2001	2001–2002	2002–2003	2003–2004	2004–2005	2005–2006
Mississauga	53	95	95	96	96	93	97	47	100
Napanee	—	—	—	—	—	—	—	—	—
Navan	—	—	—	—	—	—	—	—	—
New Hamburg	—	—	—	—	—	—	—	—	—
Newmarket	99	90	92	92	—	—	81	100	—
Niagara Falls	90	91	0	100	96	95	100	88	100
North Bay	90	91	100	92	98	94	79	92	100
North York	93	91	100	97	100	100	92	100	100
Oakville	100	99	100	92	96	100	—	89	100
Orangeville	—	—	—	—	96	—	—	—	—
Orillia	91	93	97	92	100	95	82	87	100
Oshawa	91	90	100	100	95	100	94	100	100
Ottawa	43	80	100	83	89	100	100	68	100
Owen Sound	—	—	—	94	—	—	—	—	—
Paris	—	—	—	—	—	—	—	—	—
Parry Sound	91	94	93	97	100	94	82	88	—
Pembroke	90	—	92	91	—	100	—	—	—
Penetanguishene	—	—	100	—	96	—	—	—	—
Perth	92	—	92	—	—	—	—	—	—
Petawawa	—	—	—	—	—	—	—	—	—
Peterborough	95	96	94	93	98	100	85	88	100
Pickering	89	—	100	—	100	—	—	—	—
Port Colborne	—	—	91	100	—	—	—	—	—
Port Hope	—	—	—	—	—	—	—	—	—
Port Perry	—	—	—	—	—	—	—	—	—

Note: It is not possible to compare data from 1997-2001 with data from 2002-2004 because of the change in coding classification from ICD9CCP to ICD10CA in FY2002

"—" indicates either no data were available for that facility for that year, that the institution did not exist in that year, or that the data were censored to protect patient confidentiality (when the denominator for a given indicator < 5)

Carotid Endarterectomy Mortality: Score by Municipality

Municipality	1997–1998	1998–1999	1999–2000	2000–2001	2001–2002	2002–2003	2003–2004	2004–2005	2005–2006
Port Stanley	—	—	—	—	—	—	—	—	—
Renfrew	—	—	—	—	—	—	—	—	—
Richmond Hill	90	91	100	98	100	94	96	100	100
Rockland	—	—	—	—	—	—	—	—	—
Russell	—	—	—	—	—	—	—	—	—
Sarnia	90	92	92	92	96	—	82	—	—
Sault Ste. Marie	41	94	94	93	95	96	0	96	100
Scarborough	65	66	98	82	100	75	38	97	100
Simcoe	—	—	—	93	—	—	—	—	—
Sioux Lookout	—	—	—	—	—	—	—	—	—
Smiths Falls	92	—	93	—	—	—	—	—	100
St. Catharine	32	99	96	100	97	100	100	97	100
St. Mary's	—	—	—	—	—	—	—	—	—
St. Thomas	94	90	—	98	97	—	—	—	—
Stouffville	—	—	—	—	—	—	—	—	—
Stratford	100	91	—	—	—	—	—	88	—
Strathroy	—	—	—	—	—	—	—	—	—
Sturgeon	—	—	—	—	—	—	—	90	—
Sudbury	92	54	53	52	96	94	85	32	100
Thornhill	99	93	93	100	98	—	83	100	—
Thunder Bay	51	95	95	95	96	96	100	44	100
Tillsonburg	—	92	—	—	—	—	—	—	—
Timmins	36	100	96	100	98	—	79	—	100
Toronto	74	64	62	90	89	100	100	99	100
Trenton	89	90	—	—	—	—	—	—	—

Note: It is not possible to compare data from 1997-2001 with data from 2002-2004 because of the change in coding classification from ICD9CCP to ICD10CA in FY2002

"—" indicates either no data were available for that facility for that year, that the institution did not exist in that year, or that the data were censored to protect patient confidentiality (when the denominator for a given indicator < 5)

Carotid Endarterectomy Mortality: Score by Municipality

Municipality	1997–1998	1998–1999	1999–2000	2000–2001	2001–2002	2002–2003	2003–2004	2004–2005	2005–2006
Uxbridge	—	—	—	—	—	—	—	—	—
Val Caron	—	—	—	—	—	—	—	—	—
Wallaceburg	—	—	93	—	—	—	—	—	—
Wasaga Beach	—	—	—	—	—	—	—	—	100
Welland	92	91	91	94	96	100	99	87	—
Weston	6	93	24	99	99	100	95	88	100
Whitby	89	93	91	93	95	—	100	—	100
Willowdale	33	96	93	100	97	100	90	100	100
Windsor	98	92	94	47	83	100	100	100	100
Woodbridge	—	—	—	—	95	94	80	98	100
Woodstock	—	—	93	—	—	—	—	—	—
Rural	82	93	81	79	90	98	55	87	94
Other	94	95	91	0	96	100	100	94	100

Note: It is not possible to compare data from 1997-2001 with data from 2002-2004 because of the change in coding classification from ICD9CCP to ICD10CA in FY2002

"—" indicates either no data were available for that facility for that year, that the institution did not exist in that year, or that the data were censored to protect patient confidentiality (when the denominator for a given indicator < 5)

Acute Myocardial Infarction (AMI), without Transfer Cases Mortality: Score by Municipality

Municipality	1997–1998	1998–1999	1999–2000	2000–2001	2001–2002	2002–2003	2003–2004	2004–2005	2005–2006
Acton	—	—	—	—	—	—	—	—	74
Ajax	—	—	—	—	—	69	74	86	80
Alliston	—	—	—	—	—	—	0	79	—
Amherstburg	—	—	—	—	—	—	65	—	76
Arnprior	—	—	—	—	—	—	—	67	80
Aurora	—	—	—	—	—	100	—	—	80
Aylmer West	—	—	—	—	—	93	40	—	76
Barrie	—	—	—	—	—	69	82	73	65
Belleville	—	—	—	—	—	74	42	75	80
Bolton	—	—	—	—	—	68	—	—	68
Bowmanville	—	—	—	—	—	0	88	50	76
Bracebridge	—	—	—	—	—	—	—	—	78
Bradford	—	—	—	—	—	—	—	—	45
Brampton	—	—	—	—	—	86	60	50	76
Brantford	—	—	—	—	—	55	67	65	69
Brockville	—	—	—	—	—	68	56	62	75
Burlington	—	—	—	—	—	49	49	73	81
Caledon	—	—	—	—	—	—	—	—	—
Caledonia	—	—	—	—	—	—	—	—	100
Cambridge	—	—	—	—	—	43	55	26	80
Carleton Place	—	—	—	—	—	—	—	—	74
Chatham	—	—	—	—	—	59	68	66	77
Cobourg	—	—	—	—	—	—	—	—	65
Collingwood	—	—	—	—	—	—	—	—	76
Concord	—	—	—	—	—	—	—	—	62

Note: It is not possible to compare data from 1997-2001 with data from 2002-2004 because of the change in coding classification from ICD9CCP to ICD10CA in FY2002

"—" indicates either no data were available for that facility for that year, that the institution did not exist in that year, or that the data were censored to protect patient confidentiality (when the denominator for a given indicator < 5)

Acute Myocardial Infarction (AMI), without Transfer Cases Mortality: Score by Municipality

Municipality	1997–1998	1998–1999	1999–2000	2000–2001	2001–2002	2002–2003	2003–2004	2004–2005	2005–2006
Cornwall	—	—	—	—	—	58	64	70	79
Cumberland	—	—	—	—	—	—	—	—	82
Delhi	—	—	—	—	—	—	—	—	61
Downsview	—	—	—	—	—	72	—	—	72
Dryden	—	—	—	—	—	—	—	—	74
Dunnville	—	—	—	—	—	—	—	—	71
East Gwillimbury	—	—	—	—	—	—	—	—	—
Elliot Lake	—	—	—	—	—	—	—	—	27
Elmira	—	—	—	—	—	—	—	—	—
Espanola	—	—	—	—	—	—	—	—	100
Essex	—	—	—	—	—	80	90	67	87
Etobicoke	—	—	—	—	—	68	57	52	82
Fergus	—	—	—	—	—	—	—	—	82
Fort Erie	—	—	—	—	—	—	—	—	38
Fort Frances	—	—	—	—	—	—	—	44	41
Gananoque	—	—	—	—	—	—	—	—	100
Garson	—	—	—	—	—	—	—	—	62
Georgetown	—	—	—	—	—	—	—	—	82
Goderich	—	—	—	—	—	—	—	25	83
Gravenhurst	—	—	—	—	—	—	—	41	51
Greely	—	—	—	—	—	—	100	71	—
Grimsby	—	—	—	—	—	46	—	22	19
Guelph	—	—	—	—	—	74	51	52	53
Hamilton	—	—	—	—	—	67	75	69	80
Hanmer	—	—	—	—	—	—	—	—	100

Note: It is not possible to compare data from 1997-2001 with data from 2002-2004 because of the change in coding classification from ICD9CCP to ICD10CA in FY2002

"—" indicates either no data were available for that facility for that year, that the institution did not exist in that year, or that the data were censored to protect patient confidentiality (when the denominator for a given indicator < 5)

Acute Myocardial Infarction (AMI), without Transfer Cases Mortality: Score by Municipality

Municipality	1997–1998	1998–1999	1999–2000	2000–2001	2001–2002	2002–2003	2003–2004	2004–2005	2005–2006
Hanover	—	—	—	—	—	—	—	—	63
Hawkesbury	—	—	—	—	—	46	—	—	—
Huntsville	—	—	—	—	—	—	—	—	46
Ingersoll	—	—	—	—	—	100	80	—	51
Innisfil	—	—	—	—	—	—	—	—	61
Kapuskasing	—	—	—	—	—	—	—	—	100
Kenora	—	—	—	—	—	27	—	—	100
Keswick	—	—	—	—	—	—	—	—	86
Kincardine	—	—	—	—	—	—	—	—	100
King City	—	—	—	—	—	—	—	—	—
Kingston	—	—	—	—	—	64	67	57	82
Kingsville	—	—	—	—	—	61	74	84	94
Kirkland Lake	—	—	—	—	—	—	—	34	63
Kitchener	—	—	—	—	—	62	30	43	84
Leamington	—	—	—	—	—	84	66	87	82
Lindsay	—	—	—	—	—	47	71	70	78
Listowel	—	—	—	—	—	—	—	—	40
Lively	—	—	—	—	—	—	—	—	80
London	—	—	—	—	—	72	78	74	78
Manotick	—	—	—	—	—	—	87	99	53
Maple	—	—	—	—	—	—	—	—	100
Markham	—	—	—	—	—	66	—	72	68
Meaford	—	—	—	—	—	—	—	—	45
Midland	—	—	—	—	—	—	—	—	65
Milton	—	—	—	—	—	65	—	—	76

Note: It is not possible to compare data from 1997-2001 with data from 2002-2004 because of the change in coding classification from ICD9CCP to ICD10CA in FY2002

"—" indicates either no data were available for that facility for that year, that the institution did not exist in that year, or that the data were censored to protect patient confidentiality (when the denominator for a given indicator < 5)

Acute Myocardial Infarction (AMI), without Transfer Cases Mortality: Score by Municipality

Municipality	1997–1998	1998–1999	1999–2000	2000–2001	2001–2002	2002–2003	2003–2004	2004–2005	2005–2006
Mississauga	—	—	—	—	—	69	61	52	79
Napanee	—	—	—	—	—	65	—	59	65
Navan	—	—	—	—	—	—	—	—	100
New Hamburg	—	—	—	—	—	—	—	—	—
Newmarket	—	—	—	—	—	—	54	—	74
Niagara Falls	—	—	—	—	—	95	9	39	72
North Bay	—	—	—	—	—	37	58	93	77
North York	—	—	—	—	—	44	71	89	78
Oakville	—	—	—	—	—	43	73	61	79
Orangeville	—	—	—	—	—	—	—	—	93
Orillia	—	—	—	—	—	51	77	31	70
Oshawa	—	—	—	—	—	76	66	47	78
Ottawa	—	—	—	—	—	76	78	71	82
Owen Sound	—	—	—	—	—	71	60	51	70
Paris	—	—	—	—	—	—	—	—	81
Parry Sound	—	—	—	—	—	—	—	—	67
Pembroke	—	—	—	—	—	35	—	0	65
Penetanguishene	—	—	—	—	—	—	—	—	72
Perth	—	—	—	—	—	67	—	—	54
Petawawa	—	—	—	—	—	—	—	—	—
Peterborough	—	—	—	—	—	58	—	87	77
Pickering	—	—	—	—	—	85	67	67	70
Port Colborne	—	—	—	—	—	70	81	70	78
Port Hope	—	—	—	—	—	—	—	71	100
Port Perry	—	—	—	—	—	—	—	—	63

Note: It is not possible to compare data from 1997-2001 with data from 2002-2004 because of the change in coding classification from ICD9CCP to ICD10CA in FY2002

"—" indicates either no data were available for that facility for that year, that the institution did not exist in that year, or that the data were censored to protect patient confidentiality (when the denominator for a given indicator < 5)

Acute Myocardial Infarction (AMI), without Transfer Cases Mortality: Score by Municipality

Municipality	1997–1998	1998–1999	1999–2000	2000–2001	2001–2002	2002–2003	2003–2004	2004–2005	2005–2006
Port Stanley	—	—	—	—	—	—	—	—	—
Renfrew	—	—	—	—	—	100	79	34	100
Richmond Hill	—	—	—	—	—	75	79	75	76
Rockland	—	—	—	—	—	—	—	90	75
Russell	—	—	—	—	—	—	—	—	—
Sarnia	—	—	—	—	—	83	70	—	74
Sault Ste. Marie	—	—	—	—	—	58	74	100	77
Scarborough	—	—	—	—	—	59	59	62	77
Simcoe	—	—	—	—	—	—	56	76	62
Sioux Lookout	—	—	—	—	—	—	—	—	—
Smiths Falls	—	—	—	—	—	71	—	—	76
St. Catharine	—	—	—	—	—	62	41	43	72
St. Mary's	—	—	—	—	—	28	—	59	33
St. Thomas	—	—	—	—	—	57	61	77	79
Stouffville	—	—	—	—	—	81	—	—	87
Stratford	—	—	—	—	—	100	—	48	82
Strathroy	—	—	—	—	—	—	—	—	68
Sturgeon	—	—	—	—	—	—	—	10	44
Sudbury	—	—	—	—	—	66	48	—	65
Thornhill	—	—	—	—	—	99	100	—	91
Thunder Bay	—	—	—	—	—	41	76	63	79
Tillsonburg	—	—	—	—	—	—	—	—	79
Timmins	—	—	—	—	—	—	52	81	77
Toronto	—	—	—	—	—	65	70	80	78
Trenton	—	—	—	—	—	92	—	—	41

Note: It is not possible to compare data from 1997-2001 with data from 2002-2004 because of the change in coding classification from ICD9CCP to ICD10CA in FY2002

"—" indicates either no data were available for that facility for that year, that the institution did not exist in that year, or that the data were censored to protect patient confidentiality (when the denominator for a given indicator < 5)

Acute Myocardial Infarction (AMI), without Transfer Cases Mortality: Score by Municipality

Municipality	1997–1998	1998–1999	1999–2000	2000–2001	2001–2002	2002–2003	2003–2004	2004–2005	2005–2006
Uxbridge	—	—	—	—	—	—	69	—	20
Val Caron	—	—	—	—	—	—	—	—	76
Wallaceburg	—	—	—	—	—	—	—	—	80
Wasaga Beach	—	—	—	—	—	—	—	—	100
Welland	—	—	—	—	—	57	38	—	57
Weston	—	—	—	—	—	88	—	—	76
Whitby	—	—	—	—	—	92	58	76	84
Willowdale	—	—	—	—	—	44	87	80	77
Windsor	—	—	—	—	—	70	77	69	83
Woodbridge	—	—	—	—	—	—	—	25	72
Woodstock	—	—	—	—	—	96	74	—	75
Rural	—	—	—	—	—	64	72	62	73
Other	—	—	—	—	—	67	68	74	77

Note: It is not possible to compare data from 1997-2001 with data from 2002-2004 because of the change in coding classification from ICD9CCP to ICD10CA in FY2002

"—" indicates either no data were available for that facility for that year, that the institution did not exist in that year, or that the data were censored to protect patient confidentiality (when the denominator for a given indicator < 5)

Cesarean Section Delivery: Score by Municipality

Municipality	1997–1998	1998–1999	1999–2000	2000–2001	2001–2002	2002–2003	2003–2004	2004–2005	2005–2006
Acton	—	—	—	—	—	36	56	56	75
Ajax	—	—	—	—	—	56	43	48	67
Alliston	—	—	—	—	—	44	66	53	48
Amherstburg	—	—	—	—	—	33	61	42	74
Arnprior	—	—	—	—	—	48	44	31	83
Aurora	—	—	—	—	—	70	61	63	83
Aylmer West	—	—	—	—	—	65	71	56	80
Barrie	—	—	—	—	—	65	45	58	68
Belleville	—	—	—	—	—	57	41	54	65
Bolton	—	—	—	—	—	60	53	47	77
Bowmanville	—	—	—	—	—	46	41	38	55
Bracebridge	—	—	—	—	—	0	0	11	24
Bradford	—	—	—	—	—	72	48	50	81
Brampton	—	—	—	—	—	52	46	54	72
Brantford	—	—	—	—	—	65	64	62	84
Brockville	—	—	—	—	—	29	47	47	52
Burlington	—	—	—	—	—	56	56	63	73
Caledon	—	—	—	—	—	73	100	22	85
Caledonia	—	—	—	—	—	67	56	63	75
Cambridge	—	—	—	—	—	65	55	67	76
Carleton Place	—	—	—	—	—	50	40	58	62
Chatham	—	—	—	—	—	77	61	62	74
Cobourg	—	—	—	—	—	63	28	52	58
Collingwood	—	—	—	—	—	66	57	48	80
Concord	—	—	—	—	—	45	56	58	77

Note: It is not possible to compare data from 1997-2001 with data from 2002-2004 because of the change in coding classification from ICD9CCP to ICD10CA in FY2002

"—" indicates either no data were available for that facility for that year, that the institution did not exist in that year, or that the data were censored to protect patient confidentiality (when the denominator for a given indicator < 5)

Cesarean Section Delivery: Score by Municipality

Municipality	1997–1998	1998–1999	1999–2000	2000–2001	2001–2002	2002–2003	2003–2004	2004–2005	2005–2006
Cornwall	—	—	—	—	—	41	40	44	59
Cumberland	—	—	—	—	—	42	60	58	70
Delhi	—	—	—	—	—	43	30	58	82
Downsview	—	—	—	—	—	52	44	58	65
Dryden	—	—	—	—	—	34	46	47	60
Dunnville	—	—	—	—	—	40	29	20	64
East Gwillimbury	—	—	—	—	—	63	68	81	100
Elliot Lake	—	—	—	—	—	20	21	27	0
Elmira	—	—	—	—	—	75	46	58	70
Espanola	—	—	—	—	—	36	54	55	82
Essex	—	—	—	—	—	55	52	74	86
Etobicoke	—	—	—	—	—	63	55	62	76
Fergus	—	—	—	—	—	60	57	53	73
Fort Erie	—	—	—	—	—	63	67	61	45
Fort Frances	—	—	—	—	—	32	6	19	32
Gananoque	—	—	—	—	—	66	50	65	47
Garson	—	—	—	—	—	32	15	31	48
Georgetown	—	—	—	—	—	60	59	67	81
Goderich	—	—	—	—	—	46	77	67	73
Gravenhurst	—	—	—	—	—	42	1	18	34
Greely	—	—	—	—	—	45	81	51	54
Grimsby	—	—	—	—	—	45	23	50	75
Guelph	—	—	—	—	—	64	60	59	77
Hamilton	—	—	—	—	—	61	61	61	73
Hanmer	—	—	—	—	—	57	57	43	71

Note: It is not possible to compare data from 1997-2001 with data from 2002-2004 because of the change in coding classification from ICD9CCP to ICD10CA in FY2002

"—" indicates either no data were available for that facility for that year, that the institution did not exist in that year, or that the data were censored to protect patient confidentiality (when the denominator for a given indicator < 5)

Cesarean Section Delivery: Score by Municipality

Municipality	1997–1998	1998–1999	1999–2000	2000–2001	2001–2002	2002–2003	2003–2004	2004–2005	2005–2006
Hanover	—	—	—	—	—	32	78	62	59
Hawkesbury	—	—	—	—	—	73	70	81	82
Huntsville	—	—	—	—	—	40	21	31	21
Ingersoll	—	—	—	—	—	59	80	70	71
Innisfil	—	—	—	—	—	56	41	60	72
Kapuskasing	—	—	—	—	—	11	8	29	29
Kenora	—	—	—	—	—	70	51	44	69
Keswick	—	—	—	—	—	64	61	63	86
Kincardine	—	—	—	—	—	40	57	44	75
King City	—	—	—	—	—	58	79	81	65
Kingston	—	—	—	—	—	59	56	65	75
Kingsville	—	—	—	—	—	42	36	55	56
Kirkland Lake	—	—	—	—	—	17	29	0	52
Kitchener	—	—	—	—	—	59	49	55	66
Leamington	—	—	—	—	—	37	39	41	51
Lindsay	—	—	—	—	—	45	45	39	57
Listowel	—	—	—	—	—	62	37	58	75
Lively	—	—	—	—	—	50	72	55	78
London	—	—	—	—	—	74	69	69	87
Manotick	—	—	—	—	—	85	62	81	67
Maple	—	—	—	—	—	63	56	63	65
Markham	—	—	—	—	—	67	60	66	79
Meaford	—	—	—	—	—	59	66	100	74
Midland	—	—	—	—	—	32	27	31	40
Milton	—	—	—	—	—	53	63	68	82

Note: It is not possible to compare data from 1997-2001 with data from 2002-2004 because of the change in coding classification from ICD9CCP to ICD10CA in FY2002

"—" indicates either no data were available for that facility for that year, that the institution did not exist in that year, or that the data were censored to protect patient confidentiality (when the denominator for a given indicator < 5)

Cesarean Section Delivery: Score by Municipality

Municipality	1997–1998	1998–1999	1999–2000	2000–2001	2001–2002	2002–2003	2003–2004	2004–2005	2005–2006
Mississauga	—	—	—	—	—	70	65	69	84
Napanee	—	—	—	—	—	43	39	38	66
Navan	—	—	—	—	—	54	83	48	83
New Hamburg	—	—	—	—	—	46	40	60	65
Newmarket	—	—	—	—	—	77	62	65	82
Niagara Falls	—	—	—	—	—	68	55	64	77
North Bay	—	—	—	—	—	39	33	39	52
North York	—	—	—	—	—	54	55	62	74
Oakville	—	—	—	—	—	71	57	68	82
Orangeville	—	—	—	—	—	46	33	40	58
Orillia	—	—	—	—	—	45	31	40	46
Oshawa	—	—	—	—	—	39	33	41	55
Ottawa	—	—	—	—	—	67	59	62	78
Owen Sound	—	—	—	—	—	63	30	38	66
Paris	—	—	—	—	—	92	74	67	69
Parry Sound	—	—	—	—	—	43	23	34	36
Pembroke	—	—	—	—	—	61	44	52	77
Penetanguishene	—	—	—	—	—	35	25	34	45
Perth	—	—	—	—	—	47	56	43	67
Petawawa	—	—	—	—	—	54	37	67	84
Peterborough	—	—	—	—	—	70	41	53	51
Pickering	—	—	—	—	—	63	50	55	66
Port Colborne	—	—	—	—	—	43	34	35	48
Port Hope	—	—	—	—	—	28	30	48	78
Port Perry	—	—	—	—	—	44	30	52	53

Note: It is not possible to compare data from 1997-2001 with data from 2002-2004 because of the change in coding classification from ICD9CCP to ICD10CA in FY2002

"—" indicates either no data were available for that facility for that year, that the institution did not exist in that year, or that the data were censored to protect patient confidentiality (when the denominator for a given indicator < 5)

Cesarean Section Delivery: Score by Municipality

Municipality	1997–1998	1998–1999	1999–2000	2000–2001	2001–2002	2002–2003	2003–2004	2004–2005	2005–2006
Port Stanley	—	—	—	—	—	17	96	29	51
Renfrew	—	—	—	—	—	58	30	47	64
Richmond Hill	—	—	—	—	—	59	55	63	76
Rockland	—	—	—	—	—	73	46	63	65
Russell	—	—	—	—	—	100	50	85	83
Sarnia	—	—	—	—	—	73	53	64	81
Sault Ste. Marie	—	—	—	—	—	48	33	57	66
Scarborough	—	—	—	—	—	60	53	59	76
Simcoe	—	—	—	—	—	29	47	51	63
Sioux Lookout	—	—	—	—	—	49	23	32	68
Smiths Falls	—	—	—	—	—	42	34	53	46
St. Catharine	—	—	—	—	—	64	51	58	71
St. Mary's	—	—	—	—	—	46	59	50	70
St. Thomas	—	—	—	—	—	70	59	75	83
Stouffville	—	—	—	—	—	77	78	67	88
Stratford	—	—	—	—	—	32	4	51	68
Strathroy	—	—	—	—	—	60	50	45	58
Sturgeon	—	—	—	—	—	3	25	44	30
Sudbury	—	—	—	—	—	53	57	61	77
Thornhill	—	—	—	—	—	62	47	63	78
Thunder Bay	—	—	—	—	—	66	65	72	88
Tillsonburg	—	—	—	—	—	76	49	68	92
Timmins	—	—	—	—	—	43	36	42	54
Toronto	—	—	—	—	—	60	53	61	74
Trenton	—	—	—	—	—	62	38	53	67

Note: It is not possible to compare data from 1997-2001 with data from 2002-2004 because of the change in coding classification from ICD9CCP to ICD10CA in FY2002

"—" indicates either no data were available for that facility for that year, that the institution did not exist in that year, or that the data were censored to protect patient confidentiality (when the denominator for a given indicator < 5)

Cesarean Section Delivery: Score by Municipality

Municipality	1997–1998	1998–1999	1999–2000	2000–2001	2001–2002	2002–2003	2003–2004	2004–2005	2005–2006
Uxbridge	—	—	—	—	—	55	50	72	81
Val Caron	—	—	—	—	—	56	63	53	79
Wallaceburg	—	—	—	—	—	77	66	58	76
Wasaga Beach	—	—	—	—	—	—	45	84	84
Welland	—	—	—	—	—	34	44	36	52
Weston	—	—	—	—	—	57	55	56	71
Whitby	—	—	—	—	—	51	42	52	60
Willowdale	—	—	—	—	—	57	46	60	74
Windsor	—	—	—	—	—	61	49	60	72
Woodbridge	—	—	—	—	—	62	51	60	71
Woodstock	—	—	—	—	—	59	50	61	79
Rural	—	—	—	—	—	57	50	56	71
Other	—	—	—	—	—	68	59	63	78

Note: It is not possible to compare data from 1997-2001 with data from 2002-2004 because of the change in coding classification from ICD9CCP to ICD10CA in FY2002

"—" indicates either no data were available for that facility for that year, that the institution did not exist in that year, or that the data were censored to protect patient confidentiality (when the denominator for a given indicator < 5)

Vaginal Birth after Cesarean Section (VBAC) Delivery: Score by Municipality

Municipality	1997–1998	1998–1999	1999–2000	2000–2001	2001–2002	2002–2003	2003–2004	2004–2005	2005–2006
Acton	—	—	—	—	—	13	30	47	12
Ajax	—	—	—	—	—	44	31	27	19
Alliston	—	—	—	—	—	17	39	61	13
Amherstburg	—	—	—	—	—	34	90	47	17
Arnprior	—	—	—	—	—	16	23	0	22
Aurora	—	—	—	—	—	19	56	27	33
Aylmer West	—	—	—	—	—	24	100	38	47
Barrie	—	—	—	—	—	30	27	23	22
Belleville	—	—	—	—	—	28	29	15	24
Bolton	—	—	—	—	—	34	43	44	22
Bowmanville	—	—	—	—	—	35	54	26	24
Bracebridge	—	—	—	—	—	25	11	0	11
Bradford	—	—	—	—	—	39	16	36	40
Brampton	—	—	—	—	—	26	30	29	23
Brantford	—	—	—	—	—	49	62	49	43
Brockville	—	—	—	—	—	30	44	12	17
Burlington	—	—	—	—	—	36	56	32	32
Caledon	—	—	—	—	—	63	—	—	0
Caledonia	—	—	—	—	—	68	67	68	23
Cambridge	—	—	—	—	—	55	43	48	40
Carleton Place	—	—	—	—	—	46	31	32	25
Chatham	—	—	—	—	—	48	63	45	38
Cobourg	—	—	—	—	—	51	48	21	20
Collingwood	—	—	—	—	—	28	47	35	50
Concord	—	—	—	—	—	26	48	43	10

Note: It is not possible to compare data from 1997-2001 with data from 2002-2004 because of the change in coding classification from ICD9CCP to ICD10CA in FY2002

"—" indicates either no data were available for that facility for that year, that the institution did not exist in that year, or that the data were censored to protect patient confidentiality (when the denominator for a given indicator < 5)

Vaginal Birth after Cesarean Section (VBAC) Delivery: Score by Municipality

Municipality	1997–1998	1998–1999	1999–2000	2000–2001	2001–2002	2002–2003	2003–2004	2004–2005	2005–2006
Cornwall	—	—	—	—	—	24	19	24	21
Cumberland	—	—	—	—	—	42	72	—	28
Delhi	—	—	—	—	—	—	81	42	0
Downsview	—	—	—	—	—	26	42	34	23
Dryden	—	—	—	—	—	25	31	60	0
Dunnville	—	—	—	—	—	16	11	19	16
East Gwillimbury	—	—	—	—	—	21	1	2	33
Elliot Lake	—	—	—	—	—	45	—	—	20
Elmira	—	—	—	—	—	50	30	18	49
Espanola	—	—	—	—	—	—	42	74	—
Essex	—	—	—	—	—	42	45	0	27
Etobicoke	—	—	—	—	—	35	40	40	31
Fergus	—	—	—	—	—	53	32	53	49
Fort Erie	—	—	—	—	—	29	16	18	77
Fort Frances	—	—	—	—	—	10	41	14	38
Gananoque	—	—	—	—	—	26	64	—	32
Garson	—	—	—	—	—	0	47	20	19
Georgetown	—	—	—	—	—	35	11	19	23
Goderich	—	—	—	—	—	19	70	51	0
Gravenhurst	—	—	—	—	—	20	0	0	0
Greely	—	—	—	—	—	21	95	24	27
Grimsby	—	—	—	—	—	35	21	20	39
Guelph	—	—	—	—	—	44	66	46	28
Hamilton	—	—	—	—	—	45	51	42	35
Hanmer	—	—	—	—	—	0	65	10	49

Note: It is not possible to compare data from 1997-2001 with data from 2002-2004 because of the change in coding classification from ICD9CCP to ICD10CA in FY2002

"—" indicates either no data were available for that facility for that year, that the institution did not exist in that year, or that the data were censored to protect patient confidentiality (when the denominator for a given indicator < 5)

Vaginal Birth after Cesarean Section (VBAC) Delivery: Score by Municipality

Municipality	1997–1998	1998–1999	1999–2000	2000–2001	2001–2002	2002–2003	2003–2004	2004–2005	2005–2006
Hanover	—	—	—	—	—	40	87	—	71
Hawkesbury	—	—	—	—	—	100	0	100	72
Huntsville	—	—	—	—	—	36	0	27	0
Ingersoll	—	—	—	—	—	31	89	68	53
Innisfil	—	—	—	—	—	0	34	43	17
Kapuskasing	—	—	—	—	—	10	0	0	0
Kenora	—	—	—	—	—	58	34	39	79
Keswick	—	—	—	—	—	52	42	15	28
Kincardine	—	—	—	—	—	40	90	63	33
King City	—	—	—	—	—	—	—	—	22
Kingston	—	—	—	—	—	55	51	61	30
Kingsville	—	—	—	—	—	29	37	20	20
Kirkland Lake	—	—	—	—	—	0	85	40	0
Kitchener	—	—	—	—	—	49	42	40	29
Leamington	—	—	—	—	—	25	28	35	33
Lindsay	—	—	—	—	—	21	27	8	26
Listowel	—	—	—	—	—	67	42	19	58
Lively	—	—	—	—	—	0	26	33	—
London	—	—	—	—	—	82	84	62	67
Manotick	—	—	—	—	—	—	62	27	29
Maple	—	—	—	—	—	32	29	29	12
Markham	—	—	—	—	—	46	45	27	36
Meaford	—	—	—	—	—	29	—	—	0
Midland	—	—	—	—	—	40	23	9	27
Milton	—	—	—	—	—	25	41	30	23

Note: It is not possible to compare data from 1997-2001 with data from 2002-2004 because of the change in coding classification from ICD9CCP to ICD10CA in FY2002

"—" indicates either no data were available for that facility for that year, that the institution did not exist in that year, or that the data were censored to protect patient confidentiality (when the denominator for a given indicator < 5)

Vaginal Birth after Cesarean Section (VBAC) Delivery: Score by Municipality

Municipality	1997–1998	1998–1999	1999–2000	2000–2001	2001–2002	2002–2003	2003–2004	2004–2005	2005–2006
Mississauga	—	—	—	—	—	43	43	37	29
Napanee	—	—	—	—	—	11	52	20	30
Navan	—	—	—	—	—	61	72	30	—
New Hamburg	—	—	—	—	—	—	30	59	49
Newmarket	—	—	—	—	—	69	46	28	33
Niagara Falls	—	—	—	—	—	17	57	50	36
North Bay	—	—	—	—	—	29	15	36	24
North York	—	—	—	—	—	33	51	27	37
Oakville	—	—	—	—	—	36	27	26	17
Orangeville	—	—	—	—	—	13	18	9	13
Orillia	—	—	—	—	—	16	7	4	10
Oshawa	—	—	—	—	—	29	21	25	23
Ottawa	—	—	—	—	—	44	45	36	31
Owen Sound	—	—	—	—	—	19	51	37	56
Paris	—	—	—	—	—	92	63	76	22
Parry Sound	—	—	—	—	—	30	0	0	0
Pembroke	—	—	—	—	—	36	55	19	20
Penetanguishene	—	—	—	—	—	0	0	12	0
Perth	—	—	—	—	—	23	32	1	31
Petawawa	—	—	—	—	—	18	27	33	40
Peterborough	—	—	—	—	—	38	30	18	14
Pickering	—	—	—	—	—	37	37	35	34
Port Colborne	—	—	—	—	—	0	15	42	0
Port Hope	—	—	—	—	—	35	41	0	39
Port Perry	—	—	—	—	—	21	29	0	0

Note: It is not possible to compare data from 1997-2001 with data from 2002-2004 because of the change in coding classification from ICD9CCP to ICD10CA in FY2002

"—" indicates either no data were available for that facility for that year, that the institution did not exist in that year, or that the data were censored to protect patient confidentiality (when the denominator for a given indicator < 5)

Vaginal Birth after Cesarean Section (VBAC) Delivery: Score by Municipality

Municipality	1997–1998	1998–1999	1999–2000	2000–2001	2001–2002	2002–2003	2003–2004	2004–2005	2005–2006
Port Stanley	—	—	—	—	—	—	—	—	—
Renfrew	—	—	—	—	—	30	23	0	11
Richmond Hill	—	—	—	—	—	33	30	29	24
Rockland	—	—	—	—	—	47	47	12	15
Russell	—	—	—	—	—	92	64	—	33
Sarnia	—	—	—	—	—	88	41	52	56
Sault Ste. Marie	—	—	—	—	—	45	22	41	28
Scarborough	—	—	—	—	—	45	49	38	40
Simcoe	—	—	—	—	—	40	60	26	55
Sioux Lookout	—	—	—	—	—	—	30	66	33
Smiths Falls	—	—	—	—	—	10	0	23	11
St. Catharine	—	—	—	—	—	46	36	34	24
St. Mary's	—	—	—	—	—	30	94	25	72
St. Thomas	—	—	—	—	—	71	58	50	42
Stouffville	—	—	—	—	—	41	31	28	24
Stratford	—	—	—	—	—	40	21	14	32
Strathroy	—	—	—	—	—	78	74	25	9
Sturgeon	—	—	—	—	—	28	53	0	18
Sudbury	—	—	—	—	—	36	49	40	35
Thornhill	—	—	—	—	—	28	35	30	26
Thunder Bay	—	—	—	—	—	51	81	58	59
Tillsonburg	—	—	—	—	—	48	35	33	83
Timmins	—	—	—	—	—	6	0	9	20
Toronto	—	—	—	—	—	43	35	34	30
Trenton	—	—	—	—	—	61	28	15	19

Note: It is not possible to compare data from 1997-2001 with data from 2002-2004 because of the change in coding classification from ICD9CCP to ICD10CA in FY2002

"—" indicates either no data were available for that facility for that year, that the institution did not exist in that year, or that the data were censored to protect patient confidentiality (when the denominator for a given indicator < 5)

Vaginal Birth after Cesarean Section (VBAC) Delivery: Score by Municipality

Municipality	1997–1998	1998–1999	1999–2000	2000–2001	2001–2002	2002–2003	2003–2004	2004–2005	2005–2006
Uxbridge	—	—	—	—	—	51	23	18	13
Val Caron	—	—	—	—	—	0	1	28	44
Wallaceburg	—	—	—	—	—	73	81	36	40
Wasaga Beach	—	—	—	—	—	—	—	—	100
Welland	—	—	—	—	—	13	27	23	41
Weston	—	—	—	—	—	31	42	38	27
Whitby	—	—	—	—	—	35	18	27	21
Willowdale	—	—	—	—	—	34	29	37	22
Windsor	—	—	—	—	—	48	59	38	42
Woodbridge	—	—	—	—	—	29	26	21	22
Woodstock	—	—	—	—	—	48	28	42	48
Rural	—	—	—	—	—	41	43	34	35
Other	—	—	—	—	—	53	49	44	37

Note: It is not possible to compare data from 1997-2001 with data from 2002-2004 because of the change in coding classification from ICD9CCP to ICD10CA in FY2002

"—" indicates either no data were available for that facility for that year, that the institution did not exist in that year, or that the data were censored to protect patient confidentiality (when the denominator for a given indicator < 5)

Laparoscopic Cholecystectomy: Score by Municipality

Municipality	1997–1998	1998–1999	1999–2000	2000–2001	2001–2002	2002–2003	2003–2004	2004–2005	2005–2006
Acton	42	38	76	87	91	83	48	—	71
Ajax	55	59	54	48	57	69	83	67	75
Alliston	—	68	89	100	—	99	—	—	—
Amherstburg	25	23	28	56	22	31	61	32	53
Arnprior	65	73	70	72	49	85	98	83	100
Aurora	89	50	66	83	61	82	88	83	90
Aylmer West	75	68	66	80	82	86	88	75	87
Barrie	74	86	77	67	71	88	90	87	92
Belleville	75	64	46	65	69	73	58	84	95
Bolton	77	56	52	73	98	88	70	57	76
Bowmanville	74	71	60	80	74	75	64	63	61
Bracebridge	72	100	67	99	67	84	82	55	73
Bradford	79	80	80	66	68	—	97	98	92
Brampton	76	85	74	71	77	82	84	78	84
Brantford	57	58	66	75	71	74	73	72	73
Brockville	35	0	49	22	56	47	67	29	80
Burlington	83	78	84	88	82	86	77	70	83
Caledon	—	—	—	—	—	—	—	—	—
Caledonia	79	67	36	100	62	79	49	59	81
Cambridge	59	55	55	62	64	68	67	74	83
Carleton Place	76	53	58	61	40	66	—	87	—
Chatham	59	57	51	65	55	68	61	64	66
Cobourg	38	3	17	53	70	62	19	47	—
Collingwood	75	64	64	25	62	56	53	61	68
Concord	—	72	100	—	58	87	79	99	—

Note: It is not possible to compare data from 1997-2001 with data from 2002-2004 because of the change in coding classification from ICD9CCP to ICD10CA in FY2002

"—" indicates either no data were available for that facility for that year, that the institution did not exist in that year, or that the data were censored to protect patient confidentiality (when the denominator for a given indicator < 5)

Laparoscopic Cholecystectomy: Score by Municipality

Municipality	1997–1998	1998–1999	1999–2000	2000–2001	2001–2002	2002–2003	2003–2004	2004–2005	2005–2006
Cornwall	69	76	68	74	70	71	80	44	74
Cumberland	—	—	—	—	—	—	—	81	—
Delhi	53	39	5	62	54	84	82	48	71
Downsview	74	66	78	75	74	88	89	80	85
Dryden	90	87	87	82	69	88	88	97	—
Dunnville	67	61	79	77	84	80	56	38	85
East Gwillimbury	72	—	98	83	63	80	53	—	—
Elliot Lake	98	76	71	100	91	86	71	—	65
Elmira	88	70	74	100	—	—	61	—	—
Espanola	47	53	77	—	—	—	60	—	—
Essex	49	67	82	56	49	45	99	—	86
Etobicoke	59	53	53	68	69	77	73	73	85
Fergus	61	70	65	76	38	64	—	36	0
Fort Erie	87	80	88	57	67	93	76	82	79
Fort Frances	93	88	84	81	75	88	81	77	84
Gananoque	100	100	—	100	92	—	71	—	—
Garson	76	74	45	—	—	—	—	—	—
Georgetown	66	69	45	84	76	97	69	77	100
Goderich	93	92	79	91	35	—	50	—	81
Gravenhurst	45	77	53	74	71	—	81	—	—
Greely	—	—	77	—	—	—	82	—	—
Grimsby	85	77	82	70	60	74	46	58	86
Guelph	73	71	72	79	75	82	72	66	82
Hamilton	71	64	64	71	77	81	76	70	78
Hanmer	91	78	53	77	—	86	35	—	—

Note: It is not possible to compare data from 1997-2001 with data from 2002-2004 because of the change in coding classification from ICD9CCP to ICD10CA in FY2002

"—" indicates either no data were available for that facility for that year, that the institution did not exist in that year, or that the data were censored to protect patient confidentiality (when the denominator for a given indicator < 5)

Laparoscopic Cholecystectomy: Score by Municipality

Municipality	1997–1998	1998–1999	1999–2000	2000–2001	2001–2002	2002–2003	2003–2004	2004–2005	2005–2006
Hanover	79	78	79	90	67	92	64	68	78
Hawkesbury	80	74	68	79	87	87	72	98	96
Huntsville	73	49	70	71	70	88	72	87	86
Ingersoll	72	92	51	90	87	77	78	87	82
Innisfil	—	—	—	—	73	86	58	100	—
Kapuskasing	44	74	86	80	80	89	39	—	81
Kenora	41	68	67	63	79	77	73	70	79
Keswick	64	56	86	75	86	83	79	55	84
Kincardine	92	90	89	85	82	73	94	98	—
King City	—	81	—	—	34	—	43	—	—
Kingston	69	70	77	81	76	83	83	81	83
Kingsville	81	80	89	79	71	58	60	81	88
Kirkland Lake	92	83	50	71	70	68	75	88	95
Kitchener	80	61	56	65	76	74	58	51	69
Leamington	81	90	74	76	89	84	81	87	96
Lindsay	66	69	79	88	89	88	76	67	88
Listowel	80	61	14	0	43	32	25	—	—
Lively	53	69	—	77	59	100	—	—	—
London	51	40	44	55	58	64	45	52	67
Manotick	99	—	—	65	100	—	—	—	—
Maple	67	98	63	86	79	81	72	75	91
Markham	59	59	61	70	69	78	74	60	83
Meaford	47	44	52	71	60	—	100	—	—
Midland	66	78	78	74	58	75	75	45	96
Milton	76	57	68	73	58	88	74	88	97

Note: It is not possible to compare data from 1997-2001 with data from 2002-2004 because of the change in coding classification from ICD9CCP to ICD10CA in FY2002

"—" indicates either no data were available for that facility for that year, that the institution did not exist in that year, or that the data were censored to protect patient confidentiality (when the denominator for a given indicator < 5)

Laparoscopic Cholecystectomy: Score by Municipality

Municipality	1997–1998	1998–1999	1999–2000	2000–2001	2001–2002	2002–2003	2003–2004	2004–2005	2005–2006
Mississauga	67	61	63	62	70	80	80	84	88
Napanee	57	48	69	68	100	76	47	69	100
Navan	—	—	—	61	—	60	—	—	—
New Hamburg	—	—	—	—	—	—	100	82	—
Newmarket	78	84	73	80	80	91	80	73	89
Niagara Falls	65	63	58	66	59	63	67	75	78
North Bay	68	68	84	79	81	93	80	81	87
North York	86	79	74	77	72	84	90	88	84
Oakville	73	63	65	73	78	82	85	73	93
Orangeville	89	70	46	58	56	95	87	45	67
Orillia	38	21	22	50	79	81	61	58	80
Oshawa	63	55	58	59	67	79	73	55	81
Ottawa	73	72	61	73	74	74	73	75	81
Owen Sound	36	37	10	49	59	66	0	—	55
Paris	51	21	65	76	72	75	98	—	—
Parry Sound	48	62	70	44	78	79	51	48	68
Pembroke	57	66	57	53	80	88	60	86	83
Penetanguishene	87	90	64	66	36	62	53	12	68
Perth	60	65	14	—	38	—	37	—	—
Petawawa	65	45	—	—	—	—	80	53	—
Peterborough	68	61	53	67	69	82	81	79	87
Pickering	66	49	59	59	73	76	79	48	73
Port Colborne	40	71	48	63	70	70	60	—	96
Port Hope	58	64	64	70	70	72	—	—	74
Port Perry	95	46	25	69	96	68	—	100	—

Note: It is not possible to compare data from 1997-2001 with data from 2002-2004 because of the change in coding classification from ICD9CCP to ICD10CA in FY2002

"—" indicates either no data were available for that facility for that year, that the institution did not exist in that year, or that the data were censored to protect patient confidentiality (when the denominator for a given indicator < 5)

Laparoscopic Cholecystectomy: Score by Municipality

Municipality	1997–1998	1998–1999	1999–2000	2000–2001	2001–2002	2002–2003	2003–2004	2004–2005	2005–2006
Port Stanley	—	57	92	82	62	—	95	—	75
Renfrew	22	1	32	22	0	0	2	0	44
Richmond Hill	66	54	66	68	71	79	75	69	75
Rockland	70	78	69	71	56	99	35	—	59
Russell	84	—	—	84	—	—	53	—	—
Sarnia	67	66	54	64	68	73	67	60	64
Sault Ste. Marie	75	62	48	63	51	60	61	81	69
Scarborough	66	58	64	68	73	79	75	71	81
Simcoe	64	42	21	67	85	84	60	59	85
Sioux Lookout	59	75	82	75	75	99	88	88	93
Smiths Falls	82	66	63	78	75	—	76	—	—
St. Catharine	41	33	30	44	61	72	64	77	71
St. Mary's	—	—	—	25	23	—	27	—	—
St. Thomas	83	78	79	86	83	79	87	81	80
Stouffville	79	68	70	53	63	100	67	—	—
Stratford	37	26	17	44	42	69	30	34	37
Strathroy	87	76	77	77	87	80	74	92	—
Sturgeon	—	—	—	—	87	87	89	80	—
Sudbury	70	66	49	56	59	66	55	44	63
Thornhill	85	73	75	75	71	87	66	72	87
Thunder Bay	28	32	13	40	36	38	33	42	50
Tillsonburg	36	45	57	62	64	79	78	93	82
Timmins	0	16	0	47	36	72	65	77	78
Toronto	73	66	68	74	82	80	82	78	86
Trenton	85	74	77	73	69	87	87	73	89

Note: It is not possible to compare data from 1997-2001 with data from 2002-2004 because of the change in coding classification from ICD9CCP to ICD10CA in FY2002

"—" indicates either no data were available for that facility for that year, that the institution did not exist in that year, or that the data were censored to protect patient confidentiality (when the denominator for a given indicator < 5)

Laparoscopic Cholecystectomy: Score by Municipality

Municipality	1997–1998	1998–1999	1999–2000	2000–2001	2001–2002	2002–2003	2003–2004	2004–2005	2005–2006
Uxbridge	58	26	56	—	—	—	49	—	—
Val Caron	64	72	31	—	—	—	—	—	—
Wallaceburg	98	81	62	70	91	80	81	88	78
Wasaga Beach	—	—	—	—	—	—	—	—	72
Welland	56	60	77	79	78	85	81	90	86
Weston	65	62	54	64	82	74	78	75	86
Whitby	66	65	57	61	67	80	72	72	79
Willowdale	83	73	74	80	84	84	75	81	85
Windsor	53	51	47	60	49	39	43	44	63
Woodbridge	84	67	67	83	80	92	86	69	92
Woodstock	81	76	61	79	84	79	82	89	92
Rural	65	64	61	67	72	77	72	67	78
Other	70	66	66	70	75	78	70	66	82

Note: It is not possible to compare data from 1997-2001 with data from 2002-2004 because of the change in coding classification from ICD9CCP to ICD10CA in FY2002

"—" indicates either no data were available for that facility for that year, that the institution did not exist in that year, or that the data were censored to protect patient confidentiality (when the denominator for a given indicator < 5)

Incidental Appendectomy among the Elderly: Score by Municipality

Municipality	1997–1998	1998–1999	1999–2000	2000–2001	2001–2002	2002–2003	2003–2004	2004–2005	2005–2006
Acton	62	18	99	100	19	—	—	—	—
Ajax	51	79	76	99	83	—	—	—	—
Alliston	99	97	100	98	100	—	—	—	—
Amherstburg	100	99	100	97	73	—	—	—	—
Arnprior	98	33	100	97	100	—	—	—	—
Aurora	73	95	99	98	73	—	—	—	—
Aylmer West	100	100	76	98	96	—	—	—	—
Barrie	85	63	56	87	83	—	—	—	—
Belleville	73	42	0	43	67	—	—	—	—
Bolton	100	91	50	100	99	—	—	—	—
Bowmanville	100	66	100	82	90	—	—	—	—
Bracebridge	97	45	93	48	22	—	—	—	—
Bradford	100	100	100	95	99	—	—	—	—
Brampton	87	76	87	90	91	—	—	—	—
Brantford	90	87	99	96	100	—	—	—	—
Brockville	96	92	98	97	85	—	—	—	—
Burlington	87	98	88	83	75	—	—	—	—
Caledon	—	—	—	—	—	—	—	—	—
Caledonia	100	100	92	99	99	—	—	—	—
Cambridge	99	91	92	94	93	—	—	—	—
Carleton Place	95	100	100	100	100	—	—	—	—
Chatham	100	85	89	70	91	—	—	—	—
Cobourg	84	72	100	84	99	—	—	—	—
Collingwood	76	98	100	100	97	—	—	—	—
Concord	100	—	—	100	100	—	—	—	—

Note: It is not possible to compare data from 1997-2001 with data from 2002-2004 because of the change in coding classification from ICD9CCP to ICD10CA in FY2002

"—" indicates either no data were available for that facility for that year, that the institution did not exist in that year, or that the data were censored to protect patient confidentiality (when the denominator for a given indicator < 5)

Incidental Appendectomy among the Elderly: Score by Municipality

Municipality	1997–1998	1998–1999	1999–2000	2000–2001	2001–2002	2002–2003	2003–2004	2004–2005	2005–2006
Cornwall	84	31	92	90	54	—	—	—	—
Cumberland	—	—	—	—	—	—	—	—	—
Delhi	69	12	95	0	0	—	—	—	—
Downsview	96	92	93	93	92	—	—	—	—
Dryden	100	93	100	95	98	—	—	—	—
Dunnville	99	92	67	74	100	—	—	—	—
East Gwillimbury	—	—	—	97	—	—	—	—	—
Elliot Lake	100	100	100	100	100	—	—	—	—
Elmira	24	99	100	100	98	—	—	—	—
Espanola	—	95	99	100	100	—	—	—	—
Essex	97	97	99	53	100	—	—	—	—
Etobicoke	89	81	94	94	87	—	—	—	—
Fergus	97	100	99	96	97	—	—	—	—
Fort Erie	94	100	98	100	60	—	—	—	—
Fort Frances	95	45	48	100	100	—	—	—	—
Gananoque	55	38	47	100	100	—	—	—	—
Garson	—	100	97	100	94	—	—	—	—
Georgetown	81	100	97	99	75	—	—	—	—
Goderich	85	100	100	56	98	—	—	—	—
Gravenhurst	96	60	71	69	57	—	—	—	—
Greely	100	—	—	—	—	—	—	—	—
Grimsby	97	31	98	80	39	—	—	—	—
Guelph	89	74	85	85	78	—	—	—	—
Hamilton	91	93	93	91	98	—	—	—	—
Hanmer	100	93	100	96	100	—	—	—	—

Note: It is not possible to compare data from 1997-2001 with data from 2002-2004 because of the change in coding classification from ICD9CCP to ICD10CA in FY2002

"—" indicates either no data were available for that facility for that year, that the institution did not exist in that year, or that the data were censored to protect patient confidentiality (when the denominator for a given indicator < 5)

Incidental Appendectomy among the Elderly: Score by Municipality

Municipality	1997–1998	1998–1999	1999–2000	2000–2001	2001–2002	2002–2003	2003–2004	2004–2005	2005–2006
Hanover	98	100	97	100	99	—	—	—	—
Hawkesbury	96	46	100	100	100	—	—	—	—
Huntsville	98	100	98	83	81	—	—	—	—
Ingersoll	100	100	97	99	90	—	—	—	—
Innisfil	—	—	—	100	97	—	—	—	—
Kapuskasing	100	44	99	99	99	—	—	—	—
Kenora	94	99	100	98	57	—	—	—	—
Keswick	100	100	100	93	100	—	—	—	—
Kincardine	100	100	72	98	95	—	—	—	—
King City	0	0	—	28	93	—	—	—	—
Kingston	93	87	63	96	85	—	—	—	—
Kingsville	100	48	98	100	100	—	—	—	—
Kirkland Lake	95	100	96	56	100	—	—	—	—
Kitchener	94	90	93	92	93	—	—	—	—
Leamington	65	72	81	77	68	—	—	—	—
Lindsay	49	76	80	100	89	—	—	—	—
Listowel	51	100	100	100	95	—	—	—	—
Lively	100	99	96	100	92	—	—	—	—
London	94	84	93	97	87	—	—	—	—
Manotick	100	92	100	97	93	—	—	—	—
Maple	31	21	52	100	99	—	—	—	—
Markham	72	100	79	100	92	—	—	—	—
Meaford	98	100	100	100	98	—	—	—	—
Midland	100	100	20	64	100	—	—	—	—
Milton	100	72	97	87	77	—	—	—	—

Note: It is not possible to compare data from 1997-2001 with data from 2002-2004 because of the change in coding classification from ICD9CCP to ICD10CA in FY2002

"—" indicates either no data were available for that facility for that year, that the institution did not exist in that year, or that the data were censored to protect patient confidentiality (when the denominator for a given indicator < 5)

Incidental Appendectomy among the Elderly: Score by Municipality

Municipality	1997–1998	1998–1999	1999–2000	2000–2001	2001–2002	2002–2003	2003–2004	2004–2005	2005–2006
Mississauga	92	96	90	91	91	—	—	—	—
Napanee	97	96	100	81	100	—	—	—	—
Navan	97	—	—	—	—	—	—	—	—
New Hamburg	—	—	—	—	—	—	—	—	—
Newmarket	99	98	100	99	88	—	—	—	—
Niagara Falls	95	95	98	100	94	—	—	—	—
North Bay	83	87	100	93	97	—	—	—	—
North York	91	81	86	80	89	—	—	—	—
Oakville	96	74	100	78	87	—	—	—	—
Orangeville	79	100	62	99	100	—	—	—	—
Orillia	96	97	86	74	89	—	—	—	—
Oshawa	96	87	100	93	84	—	—	—	—
Ottawa	94	89	95	95	95	—	—	—	—
Owen Sound	100	99	98	100	98	—	—	—	—
Paris	100	98	100	100	100	—	—	—	—
Parry Sound	98	64	93	100	96	—	—	—	—
Pembroke	85	96	84	87	100	—	—	—	—
Penetanguishene	97	100	55	76	100	—	—	—	—
Perth	100	100	99	96	96	—	—	—	—
Petawawa	—	100	—	98	—	—	—	—	—
Peterborough	88	58	91	90	59	—	—	—	—
Pickering	42	57	51	82	89	—	—	—	—
Port Colborne	88	97	98	98	100	—	—	—	—
Port Hope	74	67	65	100	63	—	—	—	—
Port Perry	63	94	100	73	36	—	—	—	—

Note: It is not possible to compare data from 1997-2001 with data from 2002-2004 because of the change in coding classification from ICD9CCP to ICD10CA in FY2002

"—" indicates either no data were available for that facility for that year, that the institution did not exist in that year, or that the data were censored to protect patient confidentiality (when the denominator for a given indicator < 5)

Incidental Appendectomy among the Elderly: Score by Municipality

Municipality	1997–1998	1998–1999	1999–2000	2000–2001	2001–2002	2002–2003	2003–2004	2004–2005	2005–2006
Port Stanley	—	—	97	100	91	—	—	—	—
Renfrew	100	93	99	35	100	—	—	—	—
Richmond Hill	47	29	92	82	47	—	—	—	—
Rockland	97	92	100	100	100	—	—	—	—
Russell	—	99	—	96	—	—	—	—	—
Sarnia	96	100	88	87	84	—	—	—	—
Sault Ste. Marie	95	100	96	100	100	—	—	—	—
Scarborough	90	76	84	92	95	—	—	—	—
Simcoe	85	8	31	38	49	—	—	—	—
Sioux Lookout	—	—	100	—	100	—	—	—	—
Smiths Falls	99	97	100	99	98	—	—	—	—
St. Catharine	92	79	92	95	83	—	—	—	—
St. Mary's	100	86	100	100	100	—	—	—	—
St. Thomas	91	83	83	83	91	—	—	—	—
Stouffville	96	98	71	100	100	—	—	—	—
Stratford	100	100	100	85	99	—	—	—	—
Strathroy	98	100	72	95	98	—	—	—	—
Sturgeon	—	—	—	—	100	—	—	—	—
Sudbury	93	95	91	100	96	—	—	—	—
Thornhill	78	73	81	87	93	—	—	—	—
Thunder Bay	90	88	96	93	100	—	—	—	—
Tillsonburg	99	98	41	100	100	—	—	—	—
Timmins	99	98	74	55	99	—	—	—	—
Toronto	89	84	90	93	93	—	—	—	—
Trenton	100	62	100	100	39	—	—	—	—

Note: It is not possible to compare data from 1997-2001 with data from 2002-2004 because of the change in coding classification from ICD9CCP to ICD10CA in FY2002

"—" indicates either no data were available for that facility for that year, that the institution did not exist in that year, or that the data were censored to protect patient confidentiality (when the denominator for a given indicator < 5)

Incidental Appendectomy among the Elderly: Score by Municipality

Municipality	1997–1998	1998–1999	1999–2000	2000–2001	2001–2002	2002–2003	2003–2004	2004–2005	2005–2006
Uxbridge	97	100	100	100	47	—	—	—	—
Val Caron	100	—	100	100	100	—	—	—	—
Wallaceburg	96	100	79	96	100	—	—	—	—
Wasaga Beach	—	—	—	—	—	—	—	—	—
Welland	99	91	99	100	100	—	—	—	—
Weston	95	90	99	100	91	—	—	—	—
Whitby	90	98	100	90	87	—	—	—	—
Willowdale	94	75	90	93	95	—	—	—	—
Windsor	87	83	93	86	86	—	—	—	—
Woodbridge	100	79	100	90	91	—	—	—	—
Woodstock	90	55	78	98	97	—	—	—	—
Rural	90	81	89	89	87	—	—	—	—
Other	82	96	96	96	96	—	—	—	—

Note: It is not possible to compare data from 1997-2001 with data from 2002-2004 because of the change in coding classification from ICD9CCP to ICD10CA in FY2002

"—" indicates either no data were available for that facility for that year, that the institution did not exist in that year, or that the data were censored to protect patient confidentiality (when the denominator for a given indicator < 5)

Bilateral Cardiac Catheterization: Score by Municipality

Municipality	1997–1998	1998–1999	1999–2000	2000–2001	2001–2002	2002–2003	2003–2004	2004–2005	2005–2006
Acton	14	—	—	99	89	—	—	—	—
Ajax	72	83	92	100	80	—	—	—	—
Alliston	50	90	66	71	85	—	—	—	—
Amherstburg	89	100	69	53	100	—	—	—	—
Arnprior	71	82	83	92	99	—	—	—	—
Aurora	62	55	91	98	88	—	—	—	—
Aylmer West	56	70	100	100	57	—	—	—	—
Barrie	45	78	61	52	75	—	—	—	—
Belleville	87	80	87	54	91	—	—	—	—
Bolton	64	64	—	100	100	—	—	—	—
Bowmanville	68	76	56	50	93	—	—	—	—
Bracebridge	84	70	3	100	80	—	—	—	—
Bradford	98	39	98	94	100	—	—	—	—
Brampton	78	85	68	80	82	—	—	—	—
Brantford	78	61	76	78	87	—	—	—	—
Brockville	79	73	83	85	86	—	—	—	—
Burlington	76	84	84	77	95	—	—	—	—
Caledon	—	—	—	—	—	—	—	—	—
Caledonia	74	58	71	63	93	—	—	—	—
Cambridge	87	77	87	72	88	—	—	—	—
Carleton Place	80	100	91	99	100	—	—	—	—
Chatham	95	61	80	69	91	—	—	—	—
Cobourg	79	83	91	58	67	—	—	—	—
Collingwood	63	88	11	0	96	—	—	—	—
Concord	94	16	—	97	42	—	—	—	—

Note: It is not possible to compare data from 1997-2001 with data from 2002-2004 because of the change in coding classification from ICD9CCP to ICD10CA in FY2002

"—" indicates either no data were available for that facility for that year, that the institution did not exist in that year, or that the data were censored to protect patient confidentiality (when the denominator for a given indicator < 5)

Bilateral Cardiac Catheterization: Score by Municipality

Municipality	1997–1998	1998–1999	1999–2000	2000–2001	2001–2002	2002–2003	2003–2004	2004–2005	2005–2006
Cornwall	86	82	91	87	98	—	—	—	—
Cumberland	93	—	0	—	90	—	—	—	—
Delhi	41	100	100	8	100	—	—	—	—
Downsview	73	73	78	55	62	—	—	—	—
Dryden	48	—	—	—	—	—	—	—	—
Dunnville	100	57	99	85	76	—	—	—	—
East Gwillimbury	95	82	100	72	100	—	—	—	—
Elliot Lake	—	—	—	—	—	—	—	—	—
Elmira	—	—	—	—	—	—	—	—	—
Espanola	—	—	—	—	—	—	—	—	—
Essex	—	100	100	100	100	—	—	—	—
Etobicoke	74	81	85	81	89	—	—	—	—
Fergus	56	59	—	81	100	—	—	—	—
Fort Erie	63	28	89	95	89	—	—	—	—
Fort Frances	98	—	—	—	—	—	—	—	—
Gananoque	78	84	100	100	92	—	—	—	—
Garson	—	—	—	—	—	—	—	—	—
Georgetown	94	77	69	81	95	—	—	—	—
Goderich	65	74	91	100	100	—	—	—	—
Gravenhurst	44	52	98	85	100	—	—	—	—
Greely	92	88	—	79	86	—	—	—	—
Grimsby	77	99	95	88	90	—	—	—	—
Guelph	80	80	84	79	84	—	—	—	—
Hamilton	87	87	87	88	97	—	—	—	—
Hanmer	—	—	—	—	—	—	—	—	—

Note: It is not possible to compare data from 1997-2001 with data from 2002-2004 because of the change in coding classification from ICD9CCP to ICD10CA in FY2002

"—" indicates either no data were available for that facility for that year, that the institution did not exist in that year, or that the data were censored to protect patient confidentiality (when the denominator for a given indicator < 5)

Bilateral Cardiac Catheterization: Score by Municipality

Municipality	1997–1998	1998–1999	1999–2000	2000–2001	2001–2002	2002–2003	2003–2004	2004–2005	2005–2006
Hanover	99	100	90	95	63	—	—	—	—
Hawkesbury	82	90	82	64	95	—	—	—	—
Huntsville	53	96	22	79	50	—	—	—	—
Ingersoll	100	100	100	70	55	—	—	—	—
Innisfil	—	—	—	100	—	—	—	—	—
Kapuskasing	—	—	—	—	—	—	—	—	—
Kenora	—	—	—	—	—	—	—	—	—
Keswick	98	94	33	100	75	—	—	—	—
Kincardine	0	—	48	99	70	—	—	—	—
King City	54	34	—	1	0	—	—	—	—
Kingston	79	87	87	60	89	—	—	—	—
Kingsville	66	—	—	32	100	—	—	—	—
Kirkland Lake	—	—	—	—	—	—	—	—	—
Kitchener	77	54	79	71	83	—	—	—	—
Leamington	0	19	93	100	86	—	—	—	—
Lindsay	77	79	70	31	70	—	—	—	—
Listowel	98	100	64	93	100	—	—	—	—
Lively	—	—	—	—	—	—	—	—	—
London	93	100	88	97	98	—	—	—	—
Manotick	86	96	92	63	98	—	—	—	—
Maple	94	0	61	32	46	—	—	—	—
Markham	76	78	88	65	82	—	—	—	—
Meaford	99	100	—	49	100	—	—	—	—
Midland	68	83	33	90	100	—	—	—	—
Milton	38	66	100	94	71	—	—	—	—

Note: It is not possible to compare data from 1997-2001 with data from 2002-2004 because of the change in coding classification from ICD9CCP to ICD10CA in FY2002

"—" indicates either no data were available for that facility for that year, that the institution did not exist in that year, or that the data were censored to protect patient confidentiality (when the denominator for a given indicator < 5)

Bilateral Cardiac Catheterization: Score by Municipality

Municipality	1997–1998	1998–1999	1999–2000	2000–2001	2001–2002	2002–2003	2003–2004	2004–2005	2005–2006
Mississauga	78	81	89	92	95	—	—	—	—
Napanee	32	94	92	60	80	—	—	—	—
Navan	—	—	79	—	87	—	—	—	—
New Hamburg	—	—	—	—	—	—	—	—	—
Newmarket	44	49	100	100	91	—	—	—	—
Niagara Falls	74	66	71	58	76	—	—	—	—
North Bay	94	88	100	100	98	—	—	—	—
North York	76	86	88	73	86	—	—	—	—
Oakville	66	61	89	73	84	—	—	—	—
Orangeville	97	57	52	40	86	—	—	—	—
Orillia	59	66	66	79	75	—	—	—	—
Oshawa	72	69	53	50	70	—	—	—	—
Ottawa	89	84	88	82	93	—	—	—	—
Owen Sound	49	96	93	98	62	—	—	—	—
Paris	99	100	100	77	100	—	—	—	—
Parry Sound	—	—	—	32	—	—	—	—	—
Pembroke	96	75	74	90	85	—	—	—	—
Penetanguishene	58	47	20	25	93	—	—	—	—
Perth	90	95	72	75	87	—	—	—	—
Petawawa	73	91	90	89	93	—	—	—	—
Peterborough	80	82	80	54	88	—	—	—	—
Pickering	72	79	96	100	100	—	—	—	—
Port Colborne	97	95	93	98	95	—	—	—	—
Port Hope	86	11	83	31	98	—	—	—	—
Port Perry	56	92	62	100	100	—	—	—	—

Note: It is not possible to compare data from 1997-2001 with data from 2002-2004 because of the change in coding classification from ICD9CCP to ICD10CA in FY2002

"—" indicates either no data were available for that facility for that year, that the institution did not exist in that year, or that the data were censored to protect patient confidentiality (when the denominator for a given indicator < 5)

Bilateral Cardiac Catheterization: Score by Municipality

Municipality	1997–1998	1998–1999	1999–2000	2000–2001	2001–2002	2002–2003	2003–2004	2004–2005	2005–2006
Port Stanley	—	—	—	—	—	—	—	—	—
Renfrew	95	86	80	96	99	—	—	—	—
Richmond Hill	59	41	63	41	49	—	—	—	—
Rockland	90	88	46	85	86	—	—	—	—
Russell	—	81	—	83	88	—	—	—	—
Sarnia	85	97	80	99	90	—	—	—	—
Sault Ste. Marie	100	100	100	100	100	—	—	—	—
Scarborough	88	89	100	100	100	—	—	—	—
Simcoe	77	94	85	82	99	—	—	—	—
Sioux Lookout	—	—	—	—	—	—	—	—	—
Smiths Falls	84	68	78	100	100	—	—	—	—
St. Catharine	69	73	75	70	82	—	—	—	—
St. Mary's	100	100	44	96	100	—	—	—	—
St. Thomas	83	92	68	73	82	—	—	—	—
Stouffville	99	92	99	99	97	—	—	—	—
Stratford	46	68	100	64	46	—	—	—	—
Strathroy	71	96	75	23	98	—	—	—	—
Sturgeon	—	—	—	—	—	—	—	—	—
Sudbury	49	100	77	100	100	—	—	—	—
Thornhill	74	63	55	7	50	—	—	—	—
Thunder Bay	94	100	100	100	100	—	—	—	—
Tillsonburg	84	100	100	100	100	—	—	—	—
Timmins	86	84	43	96	100	—	—	—	—
Toronto	77	81	78	50	77	—	—	—	—
Trenton	58	78	85	44	90	—	—	—	—

Note: It is not possible to compare data from 1997-2001 with data from 2002-2004 because of the change in coding classification from ICD9CCP to ICD10CA in FY2002

"—" indicates either no data were available for that facility for that year, that the institution did not exist in that year, or that the data were censored to protect patient confidentiality (when the denominator for a given indicator < 5)

Bilateral Cardiac Catheterization: Score by Municipality

Municipality	1997–1998	1998–1999	1999–2000	2000–2001	2001–2002	2002–2003	2003–2004	2004–2005	2005–2006
Uxbridge	96	29	59	54	100	—	—	—	—
Val Caron	—	—	—	—	—	—	—	—	—
Wallaceburg	100	100	86	35	99	—	—	—	—
Wasaga Beach	—	—	—	—	—	—	—	—	—
Welland	85	71	79	78	89	—	—	—	—
Weston	65	81	96	28	83	—	—	—	—
Whitby	70	61	64	60	66	—	—	—	—
Willowdale	72	67	64	70	85	—	—	—	—
Windsor	67	50	91	87	100	—	—	—	—
Woodbridge	70	75	57	91	71	—	—	—	—
Woodstock	72	98	100	100	100	—	—	—	—
Rural	78	76	82	67	88	—	—	—	—
Other	76	88	84	80	91	—	—	—	—

Note: It is not possible to compare data from 1997-2001 with data from 2002-2004 because of the change in coding classification from ICD9CCP to ICD10CA in FY2002

"—" indicates either no data were available for that facility for that year, that the institution did not exist in that year, or that the data were censored to protect patient confidentiality (when the denominator for a given indicator < 5)

Primary Cesarean Delivery: Score by Municipality

Municipality	1997–1998	1998–1999	1999–2000	2000–2001	2001–2002	2002–2003	2003–2004	2004–2005	2005–2006
Acton	—	—	—	—	—	57	59	53	65
Ajax	—	—	—	—	—	61	39	53	55
Alliston	—	—	—	—	—	47	71	58	35
Amherstburg	—	—	—	—	—	40	48	45	67
Arnprior	—	—	—	—	—	62	39	46	75
Aurora	—	—	—	—	—	82	58	65	73
Aylmer West	—	—	—	—	—	81	71	74	82
Barrie	—	—	—	—	—	73	47	62	63
Belleville	—	—	—	—	—	65	44	62	61
Bolton	—	—	—	—	—	63	50	48	70
Bowmanville	—	—	—	—	—	52	36	42	44
Bracebridge	—	—	—	—	—	0	9	26	29
Bradford	—	—	—	—	—	80	51	57	63
Brampton	—	—	—	—	—	60	47	61	64
Brantford	—	—	—	—	—	70	64	63	73
Brockville	—	—	—	—	—	39	40	60	46
Burlington	—	—	—	—	—	60	53	66	63
Caledon	—	—	—	—	—	93	100	21	80
Caledonia	—	—	—	—	—	69	59	72	63
Cambridge	—	—	—	—	—	67	54	67	64
Carleton Place	—	—	—	—	—	56	41	65	53
Chatham	—	—	—	—	—	82	60	66	67
Cobourg	—	—	—	—	—	68	20	58	52
Collingwood	—	—	—	—	—	83	47	49	82
Concord	—	—	—	—	—	53	49	65	65

Note: It is not possible to compare data from 1997-2001 with data from 2002-2004 because of the change in coding classification from ICD9CCP to ICD10CA in FY2002

"—" indicates either no data were available for that facility for that year, that the institution did not exist in that year, or that the data were censored to protect patient confidentiality (when the denominator for a given indicator < 5)

Primary Cesarean Delivery: Score by Municipality

Municipality	1997–1998	1998–1999	1999–2000	2000–2001	2001–2002	2002–2003	2003–2004	2004–2005	2005–2006
Cornwall	—	—	—	—	—	58	47	53	58
Cumberland	—	—	—	—	—	75	53	38	100
Delhi	—	—	—	—	—	41	21	74	81
Downsview	—	—	—	—	—	60	46	63	58
Dryden	—	—	—	—	—	53	69	46	58
Dunnville	—	—	—	—	—	44	58	44	62
East Gwillimbury	—	—	—	—	—	68	81	93	92
Elliot Lake	—	—	—	—	—	24	2	22	0
Elmira	—	—	—	—	—	82	55	63	73
Espanola	—	—	—	—	—	32	60	81	57
Essex	—	—	—	—	—	65	56	79	85
Etobicoke	—	—	—	—	—	69	55	65	67
Fergus	—	—	—	—	—	72	54	52	57
Fort Erie	—	—	—	—	—	73	80	66	18
Fort Frances	—	—	—	—	—	55	7	24	21
Gananoque	—	—	—	—	—	74	51	70	41
Garson	—	—	—	—	—	37	0	42	45
Georgetown	—	—	—	—	—	69	63	71	74
Goderich	—	—	—	—	—	56	66	72	76
Gravenhurst	—	—	—	—	—	65	8	27	21
Greely	—	—	—	—	—	48	76	49	45
Grimsby	—	—	—	—	—	61	19	59	61
Guelph	—	—	—	—	—	67	50	61	68
Hamilton	—	—	—	—	—	66	61	63	62
Hanmer	—	—	—	—	—	67	59	58	55

Note: It is not possible to compare data from 1997-2001 with data from 2002-2004 because of the change in coding classification from ICD9CCP to ICD10CA in FY2002

"—" indicates either no data were available for that facility for that year, that the institution did not exist in that year, or that the data were censored to protect patient confidentiality (when the denominator for a given indicator < 5)

Primary Cesarean Delivery: Score by Municipality

Municipality	1997–1998	1998–1999	1999–2000	2000–2001	2001–2002	2002–2003	2003–2004	2004–2005	2005–2006
Hanover	—	—	—	—	—	34	91	62	45
Hawkesbury	—	—	—	—	—	70	73	75	73
Huntsville	—	—	—	—	—	37	24	30	10
Ingersoll	—	—	—	—	—	68	80	65	59
Innisfil	—	—	—	—	—	58	47	60	61
Kapuskasing	—	—	—	—	—	33	4	42	40
Kenora	—	—	—	—	—	83	53	49	59
Keswick	—	—	—	—	—	68	59	66	82
Kincardine	—	—	—	—	—	57	47	43	74
King City	—	—	—	—	—	53	72	76	55
Kingston	—	—	—	—	—	60	55	65	67
Kingsville	—	—	—	—	—	54	44	74	58
Kirkland Lake	—	—	—	—	—	37	10	0	55
Kitchener	—	—	—	—	—	62	47	57	56
Leamington	—	—	—	—	—	51	56	53	54
Lindsay	—	—	—	—	—	49	50	49	48
Listowel	—	—	—	—	—	67	36	63	59
Lively	—	—	—	—	—	68	99	62	69
London	—	—	—	—	—	71	63	68	70
Manotick	—	—	—	—	—	85	52	92	70
Maple	—	—	—	—	—	72	58	64	59
Markham	—	—	—	—	—	68	59	73	68
Meaford	—	—	—	—	—	67	66	100	75
Midland	—	—	—	—	—	29	31	47	38
Milton	—	—	—	—	—	58	60	69	68

Note: It is not possible to compare data from 1997-2001 with data from 2002-2004 because of the change in coding classification from ICD9CCP to ICD10CA in FY2002

"—" indicates either no data were available for that facility for that year, that the institution did not exist in that year, or that the data were censored to protect patient confidentiality (when the denominator for a given indicator < 5)

Primary Cesarean Delivery: Score by Municipality

Municipality	1997–1998	1998–1999	1999–2000	2000–2001	2001–2002	2002–2003	2003–2004	2004–2005	2005–2006
Mississauga	—	—	—	—	—	75	67	73	76
Napanee	—	—	—	—	—	60	38	50	53
Navan	—	—	—	—	—	57	76	56	70
New Hamburg	—	—	—	—	—	59	43	67	54
Newmarket	—	—	—	—	—	82	64	70	69
Niagara Falls	—	—	—	—	—	84	50	64	66
North Bay	—	—	—	—	—	44	40	42	51
North York	—	—	—	—	—	57	56	65	63
Oakville	—	—	—	—	—	78	58	72	74
Orangeville	—	—	—	—	—	55	30	42	56
Orillia	—	—	—	—	—	58	40	50	48
Oshawa	—	—	—	—	—	44	32	49	48
Ottawa	—	—	—	—	—	68	56	64	66
Owen Sound	—	—	—	—	—	75	25	42	59
Paris	—	—	—	—	—	89	73	60	69
Parry Sound	—	—	—	—	—	55	26	30	32
Pembroke	—	—	—	—	—	62	42	60	70
Penetanguishene	—	—	—	—	—	46	44	52	35
Perth	—	—	—	—	—	68	64	53	64
Petawawa	—	—	—	—	—	67	32	69	72
Peterborough	—	—	—	—	—	77	48	58	47
Pickering	—	—	—	—	—	69	48	56	50
Port Colborne	—	—	—	—	—	52	35	37	38
Port Hope	—	—	—	—	—	37	17	74	66
Port Perry	—	—	—	—	—	70	26	62	63

Note: It is not possible to compare data from 1997-2001 with data from 2002-2004 because of the change in coding classification from ICD9CCP to ICD10CA in FY2002

"—" indicates either no data were available for that facility for that year, that the institution did not exist in that year, or that the data were censored to protect patient confidentiality (when the denominator for a given indicator < 5)

Primary Cesarean Delivery: Score by Municipality

Municipality	1997–1998	1998–1999	1999–2000	2000–2001	2001–2002	2002–2003	2003–2004	2004–2005	2005–2006
Port Stanley	—	—	—	—	—	8	84	23	43
Renfrew	—	—	—	—	—	68	23	48	81
Richmond Hill	—	—	—	—	—	64	55	66	70
Rockland	—	—	—	—	—	72	36	79	52
Russell	—	—	—	—	—	100	54	88	67
Sarnia	—	—	—	—	—	74	51	67	71
Sault Ste. Marie	—	—	—	—	—	52	44	59	58
Scarborough	—	—	—	—	—	64	52	62	65
Simcoe	—	—	—	—	—	38	52	67	56
Sioux Lookout	—	—	—	—	—	42	17	23	52
Smiths Falls	—	—	—	—	—	61	52	62	39
St. Catharine	—	—	—	—	—	71	52	63	65
St. Mary's	—	—	—	—	—	52	56	57	51
St. Thomas	—	—	—	—	—	71	56	76	77
Stouffville	—	—	—	—	—	90	83	69	83
Stratford	—	—	—	—	—	48	4	56	60
Strathroy	—	—	—	—	—	59	43	56	55
Sturgeon	—	—	—	—	—	10	14	48	20
Sudbury	—	—	—	—	—	59	55	68	70
Thornhill	—	—	—	—	—	68	49	69	68
Thunder Bay	—	—	—	—	—	74	63	75	80
Tillsonburg	—	—	—	—	—	83	53	70	84
Timmins	—	—	—	—	—	55	35	58	42
Toronto	—	—	—	—	—	59	49	62	61
Trenton	—	—	—	—	—	70	43	69	60

Note: It is not possible to compare data from 1997-2001 with data from 2002-2004 because of the change in coding classification from ICD9CCP to ICD10CA in FY2002

"—" indicates either no data were available for that facility for that year, that the institution did not exist in that year, or that the data were censored to protect patient confidentiality (when the denominator for a given indicator < 5)

Primary Cesarean Delivery: Score by Municipality

Municipality	1997–1998	1998–1999	1999–2000	2000–2001	2001–2002	2002–2003	2003–2004	2004–2005	2005–2006
Uxbridge	—	—	—	—	—	64	62	80	75
Val Caron	—	—	—	—	—	66	73	64	70
Wallaceburg	—	—	—	—	—	75	69	71	78
Wasaga Beach	—	—	—	—	—	—	18	84	60
Welland	—	—	—	—	—	43	46	44	39
Weston	—	—	—	—	—	64	58	62	63
Whitby	—	—	—	—	—	58	37	57	49
Willowdale	—	—	—	—	—	60	40	57	64
Windsor	—	—	—	—	—	62	48	64	63
Woodbridge	—	—	—	—	—	69	52	66	61
Woodstock	—	—	—	—	—	61	55	65	67
Rural	—	—	—	—	—	65	51	62	64
Other	—	—	—	—	—	71	55	68	64

Note: It is not possible to compare data from 1997-2001 with data from 2002-2004 because of the change in coding classification from ICD9CCP to ICD10CA in FY2002

"—" indicates either no data were available for that facility for that year, that the institution did not exist in that year, or that the data were censored to protect patient confidentiality (when the denominator for a given indicator < 5)

Vaginal Birth after Cesarean Section (VBAC), All: Score by Municipality

Municipality	1997–1998	1998–1999	1999–2000	2000–2001	2001–2002	2002–2003	2003–2004	2004–2005	2005–2006
Acton	—	—	—	—	—	12	31	54	11
Ajax	—	—	—	—	—	43	30	26	19
Alliston	—	—	—	—	—	33	50	56	24
Amherstburg	—	—	—	—	—	43	84	45	17
Arnprior	—	—	—	—	—	15	25	0	18
Aurora	—	—	—	—	—	23	58	28	32
Aylmer West	—	—	—	—	—	23	90	38	54
Barrie	—	—	—	—	—	34	29	22	23
Belleville	—	—	—	—	—	36	29	13	24
Bolton	—	—	—	—	—	44	53	41	21
Bowmanville	—	—	—	—	—	36	58	26	26
Bracebridge	—	—	—	—	—	27	10	0	10
Bradford	—	—	—	—	—	43	23	36	48
Brampton	—	—	—	—	—	31	33	29	24
Brantford	—	—	—	—	—	52	67	47	41
Brockville	—	—	—	—	—	31	41	11	16
Burlington	—	—	—	—	—	39	60	35	31
Caledon	—	—	—	—	—	68	—	—	26
Caledonia	—	—	—	—	—	76	70	68	20
Cambridge	—	—	—	—	—	60	45	46	42
Carleton Place	—	—	—	—	—	46	33	29	25
Chatham	—	—	—	—	—	53	70	46	37
Cobourg	—	—	—	—	—	53	49	25	19
Collingwood	—	—	—	—	—	30	45	42	50
Concord	—	—	—	—	—	27	50	46	9

Note: It is not possible to compare data from 1997-2001 with data from 2002-2004 because of the change in coding classification from ICD9CCP to ICD10CA in FY2002

"—" indicates either no data were available for that facility for that year, that the institution did not exist in that year, or that the data were censored to protect patient confidentiality (when the denominator for a given indicator < 5)

Vaginal Birth after Cesarean Section (VBAC), All: Score by Municipality

Municipality	1997–1998	1998–1999	1999–2000	2000–2001	2001–2002	2002–2003	2003–2004	2004–2005	2005–2006
Cornwall	—	—	—	—	—	27	19	26	19
Cumberland	—	—	—	—	—	46	77	—	28
Delhi	—	—	—	—	—	67	86	52	0
Downsview	—	—	—	—	—	29	44	35	24
Dryden	—	—	—	—	—	27	40	59	0
Dunnville	—	—	—	—	—	18	10	18	16
East Gwillimbury	—	—	—	—	—	23	1	2	28
Elliot Lake	—	—	—	—	—	43	—	—	33
Elmira	—	—	—	—	—	46	42	16	47
Espanola	—	—	—	—	—	66	45	73	—
Essex	—	—	—	—	—	43	48	0	27
Etobicoke	—	—	—	—	—	39	42	38	32
Fergus	—	—	—	—	—	52	30	50	43
Fort Erie	—	—	—	—	—	29	15	18	77
Fort Frances	—	—	—	—	—	10	50	14	36
Gananoque	—	—	—	—	—	66	68	—	30
Garson	—	—	—	—	—	0	50	46	35
Georgetown	—	—	—	—	—	38	11	21	22
Goderich	—	—	—	—	—	19	75	50	0
Gravenhurst	—	—	—	—	—	22	0	0	0
Greely	—	—	—	—	—	41	83	41	25
Grimsby	—	—	—	—	—	38	20	29	42
Guelph	—	—	—	—	—	49	68	45	30
Hamilton	—	—	—	—	—	46	55	41	35
Hanmer	—	—	—	—	—	0	69	10	60

Note: It is not possible to compare data from 1997-2001 with data from 2002-2004 because of the change in coding classification from ICD9CCP to ICD10CA in FY2002

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Vaginal Birth after Cesarean Section (VBAC), All: Score by Municipality

Municipality	1997–1998	1998–1999	1999–2000	2000–2001	2001–2002	2002–2003	2003–2004	2004–2005	2005–2006
Hanover	—	—	—	—	—	35	86	0	71
Hawkesbury	—	—	—	—	—	98	0	99	72
Huntsville	—	—	—	—	—	35	0	27	0
Ingersoll	—	—	—	—	—	57	84	56	50
Innisfil	—	—	—	—	—	12	39	41	15
Kapuskasing	—	—	—	—	—	10	0	0	0
Kenora	—	—	—	—	—	63	37	39	79
Keswick	—	—	—	—	—	56	44	15	34
Kincardine	—	—	—	—	—	43	96	62	33
King City	—	—	—	—	—	34	—	—	22
Kingston	—	—	—	—	—	63	55	59	30
Kingsville	—	—	—	—	—	30	39	19	20
Kirkland Lake	—	—	—	—	—	0	91	40	0
Kitchener	—	—	—	—	—	53	43	40	28
Leamington	—	—	—	—	—	26	35	33	33
Lindsay	—	—	—	—	—	19	29	8	33
Listowel	—	—	—	—	—	73	42	16	58
Lively	—	—	—	—	—	0	28	28	—
London	—	—	—	—	—	88	88	61	65
Manotick	—	—	—	—	—	—	67	24	29
Maple	—	—	—	—	—	36	35	29	11
Markham	—	—	—	—	—	49	47	30	35
Meaford	—	—	—	—	—	49	—	—	0
Midland	—	—	—	—	—	38	23	8	25
Milton	—	—	—	—	—	26	40	29	20

Note: It is not possible to compare data from 1997-2001 with data from 2002-2004 because of the change in coding classification from ICD9CCP to ICD10CA in FY2002

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Vaginal Birth after Cesarean Section (VBAC), All: Score by Municipality

Municipality	1997–1998	1998–1999	1999–2000	2000–2001	2001–2002	2002–2003	2003–2004	2004–2005	2005–2006
Mississauga	—	—	—	—	—	46	46	36	30
Napanee	—	—	—	—	—	12	50	19	28
Navan	—	—	—	—	—	66	58	29	—
New Hamburg	—	—	—	—	—	—	30	59	49
Newmarket	—	—	—	—	—	76	52	30	31
Niagara Falls	—	—	—	—	—	25	57	49	44
North Bay	—	—	—	—	—	33	20	37	23
North York	—	—	—	—	—	38	54	33	34
Oakville	—	—	—	—	—	42	29	26	16
Orangeville	—	—	—	—	—	17	19	17	13
Orillia	—	—	—	—	—	21	7	7	9
Oshawa	—	—	—	—	—	31	26	24	23
Ottawa	—	—	—	—	—	47	46	34	31
Owen Sound	—	—	—	—	—	18	52	37	53
Paris	—	—	—	—	—	100	61	76	22
Parry Sound	—	—	—	—	—	30	0	1	0
Pembroke	—	—	—	—	—	35	61	17	18
Penetanguishene	—	—	—	—	—	0	0	11	0
Perth	—	—	—	—	—	23	34	1	26
Petawawa	—	—	—	—	—	18	29	49	37
Peterborough	—	—	—	—	—	41	31	17	13
Pickering	—	—	—	—	—	39	42	38	32
Port Colborne	—	—	—	—	—	0	15	39	0
Port Hope	—	—	—	—	—	43	40	0	36
Port Perry	—	—	—	—	—	20	29	14	0

Note: It is not possible to compare data from 1997-2001 with data from 2002-2004 because of the change in coding classification from ICD9CCP to ICD10CA in FY2002

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Vaginal Birth after Cesarean Section (VBAC), All: Score by Municipality

Municipality	1997–1998	1998–1999	1999–2000	2000–2001	2001–2002	2002–2003	2003–2004	2004–2005	2005–2006
Port Stanley	—	—	—	—	—	—	—	—	—
Renfrew	—	—	—	—	—	26	38	0	10
Richmond Hill	—	—	—	—	—	38	34	28	23
Rockland	—	—	—	—	—	40	68	20	15
Russell	—	—	—	—	—	100	68	68	33
Sarnia	—	—	—	—	—	89	40	49	56
Sault Ste. Marie	—	—	—	—	—	48	26	38	26
Scarborough	—	—	—	—	—	50	52	38	40
Simcoe	—	—	—	—	—	47	65	24	54
Sioux Lookout	—	—	—	—	—	67	28	50	28
Smiths Falls	—	—	—	—	—	10	0	18	10
St. Catharine	—	—	—	—	—	49	39	36	25
St. Mary's	—	—	—	—	—	33	100	54	66
St. Thomas	—	—	—	—	—	78	56	46	44
Stouffville	—	—	—	—	—	40	31	48	44
Stratford	—	—	—	—	—	42	23	14	30
Strathroy	—	—	—	—	—	86	78	27	8
Sturgeon	—	—	—	—	—	30	56	0	28
Sudbury	—	—	—	—	—	38	51	35	35
Thornhill	—	—	—	—	—	30	37	29	26
Thunder Bay	—	—	—	—	—	56	92	56	60
Tillsonburg	—	—	—	—	—	52	33	39	83
Timmins	—	—	—	—	—	6	5	8	19
Toronto	—	—	—	—	—	47	40	33	30
Trenton	—	—	—	—	—	68	33	23	18

Note: It is not possible to compare data from 1997-2001 with data from 2002-2004 because of the change in coding classification from ICD9CCP to ICD10CA in FY2002

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Vaginal Birth after Cesarean Section (VBAC), All: Score by Municipality

Municipality	1997–1998	1998–1999	1999–2000	2000–2001	2001–2002	2002–2003	2003–2004	2004–2005	2005–2006
Uxbridge	—	—	—	—	—	56	24	18	12
Val Caron	—	—	—	—	—	0	1	28	44
Wallaceburg	—	—	—	—	—	79	78	36	38
Wasaga Beach	—	—	—	—	—	—	—	100	100
Welland	—	—	—	—	—	14	28	23	37
Weston	—	—	—	—	—	36	44	36	26
Whitby	—	—	—	—	—	39	20	26	22
Willowdale	—	—	—	—	—	38	31	36	23
Windsor	—	—	—	—	—	51	63	38	42
Woodbridge	—	—	—	—	—	32	28	22	22
Woodstock	—	—	—	—	—	57	33	47	43
Rural	—	—	—	—	—	44	45	34	35
Other	—	—	—	—	—	55	53	42	36

Note: It is not possible to compare data from 1997-2001 with data from 2002-2004 because of the change in coding classification from ICD9CCP to ICD10CA in FY2002

"—" indicates either no data were available for that facility for that year, that the institution did not exist in that year, or that the data were censored to protect patient confidentiality (when the denominator for a given indicator < 5)