



Products and Services

GUIDE

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Canadian Institute
for Health Information

Institut canadien
d'information sur la santé

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ISBN 978-1-55465-533-5 (PDF)

© 2009 Canadian Institute for Health Information

How to cite this document:

Canadian Institute for Health Information, *Products and Services Guide, 2009–2010* (Ottawa, Ont.: CIHI, 2009).

Cette publication est aussi disponible en français sous le titre *Guide des produits et services 2009-2010*.

ISBN 978-1-55465-535-9 (PDF)



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Introduction

Welcome to the 2009–2010 edition of the *Products and Services Guide* of the Canadian Institute for Health Information (CIHI). This new and improved publication is produced to assist our many clients and stakeholders in obtaining relevant information on the various products and services that CIHI offers.

Home to 27 databases, we are a leading source of unbiased, credible and comparable information. This past year we continued to offer a range of data holdings, standards, publications and reports, as well as analysis and education workshops, that focused on areas that stakeholders have told us are critical to informing decisions about the health system and to population health.

At CIHI, our work is guided by several overarching strategic directions developed following extensive pan-Canadian consultations in 2007–2008. In addition to better meeting the needs of our stakeholders and allowing an overview of the range of our products and services, this guide has been significantly reworked to reflect our three strategic priorities:

- We are committed to **more and better data** by enhancing their scope, quality and timeliness.
- We are also committed to **relevant and actionable analysis** and will continue to produce quality information and analyses that are actionable and relevant to our stakeholders.
- Finally, we are committed to **improved understanding and use**. We have been working with our stakeholders to help them better understand and use our data and analyses.

Of course, everything we do at CIHI complies with our comprehensive privacy program to protect the confidentiality and security of our data holdings. A cornerstone of this program is CIHI's Privacy Policy that governs how we collect, store, analyze and disseminate data.

Organization of Guide

The products and services listed in this guide are organized into three major sections:

A The Big Picture

Part of our mandate involves generating public awareness about factors affecting good health, fostering a better understanding of these factors and contributing to the development of policies that improve health system management, reduce inequities and improve the health and well-being of Canadians. This is accomplished through using data from CIHI's data holdings to develop a broad array of analytic reports as well as health indicators.

B An In-Depth Look

Many of the products and services in this guide are connected with CIHI's data holdings, which are key to our health information activities. The broad range of health domains covered, in conjunction with the policies and practices applied to ensure confidentiality, data protection and data quality, make the holdings an excellent source of health data. Data disclosure for all data holdings is determined by CIHI's privacy policy and policies for the protection of health information.

C Our Foundation

Standards are key to collecting quality data and developing health information systems. CIHI continues to lead the evolution and creation of new national health information management standards.

Disease and intervention standards classify medical conditions and other characteristics of patients. They also classify health and medical services, procedures and interventions. These standards are applied at national, provincial/territorial and local levels to ensure consistency and to allow Canadian and international comparisons. The standards are chosen to facilitate the statistical study of diseases.

Grouping methodologies, such as Case Mix Group+ (CMG+), Day Procedure Groups (DPG), Comprehensive Ambulatory Classification System (CACS) and Resource Utilization Group III (RUG-III), are standards for grouping patients/clients with similar diagnoses and similar treatment requirements. They can help health care facilities predict a patient's length of stay and resource use for utilization management purposes.

Financial and administrative standards provide an integrated approach to collecting, processing, reporting and using financial and statistical data for management decision-making, such as evaluating, controlling, budgeting and planning.

Information is categorized according to CIHI's strategic directions—data, analysis and understanding and use—and the following categories of information are included, where applicable:

DESCRIPTION

Each section includes a basic description and contact information.

RESOURCES AND STANDARDS

CIHI's resources and standards are key to collecting quality data and developing health information systems. Where applicable, information regarding CIHI's resources and standards has been included within each section.

PUBLICATIONS

CIHI produces a number of publications derived from its extensive information holdings and data analysis activities. These publications address subjects topical to a broad audience. They are used to answer questions about Canadian health care and those factors that affect good health or to act as a starting point for additional research. As well, each year, CIHI produces Analysis in Brief documents on a wide variety of relevant topics. Where applicable, a listing of publications has been included within in each section.

SUBSCRIBER REPORTS

CIHI produces a number of subscriber reports derived from its extensive information holdings and data analysis activities. These reports contain information about data submitted to CIHI by health facilities and are available to Core Plan subscribers through CIHI's secure website under Client Services. Subscriber reports are used predominantly to manage health facilities more effectively, and information is included within individual data holdings, where applicable.

EDUCATION

CIHI is committed to aiding its clients to make more effective use of its health information products. The CIHI education program utilizes different learning media and methods to ensure the right learning opportunities are available to support our programs and clients. Information regarding education is included in each section, as applicable.

To make best use of the guide, please refer to our website at www.cihi.ca for more complete information on our products and services, including availability and pricing.

Core Plan Administration

1 Core Plan and Pricing

Most Canadian health facilities have access to a set of CIHI information products and services. These products and services are part of a Core Plan subscription provided through a bilateral agreement between CIHI and ministries of health. In addition, CIHI offers a number of products and services at no additional charge to regional health authorities (or similar) and ministries of health.

In this guide, Core Plan products are designated with **CORE**. Facilities under the plan receive the set of products and services for a fixed price. Clients who use CIHI services less frequently are covered on a price-per-service basis. Prices are listed on the CIHI website and are listed as either Price A or Price B. Price **A** applies to Canadian health facilities, governments, not-for-profit health agencies, universities, health professionals and researchers from the public sector. Price **B** applies to private commercial operations (including but not limited to software vendors and consultants), foreign clients and others not qualifying for Price A.

The standards-related products in PDF and HTML formats are generally offered with unlimited access to Core Plan subscribers via our website. Where these products are provided outside the Core Plan or to non-Core Plan subscribers, prices for these formats will normally represent a discounted price compared to the equivalent paper product.

Of note, to further increase public awareness about Canada's health system, CIHI publications and reports containing national health information, available in PDF format via our website, are offered to all clients at no charge.

2 Distribution Approach

The quantities of Core Plan elements are provided to health facilities according to their size (small, medium or large), which is determined on the basis of the health facility type, the total number of beds and the annual volume of case abstracts. Some Core Plan elements are subject to confidentiality and privacy restrictions and are provided taking into account any imposed limitation.

CORE PLAN—ACUTE CARE HOSPITALS

The size of a hospital is based on the total beds and volume of case abstracts submitted to the Discharge Abstract Database (DAD), the National Ambulatory Care Reporting System (NACRS), the National Rehabilitation Reporting System (NRS) and the Continuing Care Reporting System (CCRS). Core Plan elements provided to hospitals are products and services relevant to these programs as well as other health information publications and reports of general interest. For hospitals participating in select data holdings, the size of a hospital is determined on the basis of the total beds and the volume of case abstracts submitted to program(s) in which the hospital participates.

- **Small hospital:** hospitals with 1 to 199 beds **and** a volume of no more than 50,000 case abstracts annually.
- **Medium hospital:** hospitals with 200 to 399 beds **and** a volume of no more than 100,000 case abstracts annually **OR** a hospital having 1 to 199 beds **and** a case abstracts volume in the range of 50,001 to 100,000 annually.
- **Large hospital:** hospitals with 400 or more beds **or** more than 100,000 case abstracts annually.

CORE PLAN—CONTINUING AND HOME CARE/REHABILITATION FACILITIES

The size of a continuing care/rehabilitation facility is based on the total beds as an indication of volume of case abstracts. Core Plan elements provided to continuing care/rehabilitation facilities are products and services relevant to CCRS and NRS as well as other health information publications and reports of general interest.

- **Small facility:** facilities with 1 to 30 beds.
- **Medium facility:** facilities with 31 to 99 beds.
- **Large facility:** facilities with 100 or more beds.

DISTRIBUTION OF PRODUCTS AND SERVICES TO CORE PLAN SUBSCRIBERS

The following table outlines the quantities of specific products and services provided to health facilities according to their size, as well as to regions and ministries of health.

Products and Services	Small	Medium	Large	Region	MOH
STANDARDS					
MIS Standards	1	1	2	1	2
ICD-10-CA/CCI	1	2	3	1	3
Disease/Intervention Classifications	1	1	1	1	1
Data Set and Grouping Methodology Standards Tables	1	2	3	1	3
PUBLICATIONS	1	1	1	1	1
EDUCATION (PARTICIPANTS)	2	3	5	5	3

Note

Core Plan products that are available electronically have unlimited access.

3 Education Administration

Hospitals, regional health authorities (or similar) and provincial and territorial ministries of health covered by the Core Plan receive core education sessions at no additional charge. See the distribution table for the quantity of participants that can attend. For all other registrations (for example, non-Core Plan clients or advanced-education offerings), please contact the Education department by sending an email to education@cihi.ca for further information.

The CIHI Education program uses the following methods of delivery:

- Distance-learning tools (for example eLearning programs, web, tele- and video conferences);
- Workshops;
- Self-learning products; and
- Blended delivery modes.

IN-HOUSE EDUCATION SERVICES

CIHI's in-house education services help individual facilities and their staff better use the various CIHI tools for effective management. This unique service allows the client to focus on individual education needs and to create an agenda that will target specific areas where detailed education is needed.

Topics can include:

- General overview of CIHI and current databases;
- Detailed education on various CIHI methodologies;
- Application of *MIS Standards* and CIHI reports; and
- Topics selected by the client relating to CIHI tools.

Please note that all of CIHI's regularly scheduled workshops can also be presented in an in-house education format.

For more information please contact education@cihi.ca.

4 CIHI Vendor License Agreements

The CIHI vendor license agreement gives software developers (vendors) the right to receive the CIHI products required to develop and support software that meets electronic-submission requirements for CIHI's data holdings and/or the use of ICD-10-CA/CCI in non-CIHI software. This service facilitates the automatic distribution of products as they become available and ensures that terms and conditions regarding use of the products for commercial and non-commercial purposes are established, both to protect CIHI and third-party proprietary rights in the products and to maintain the integrity of CIHI products. The license agreements include data-collection specifications, ICD-10-CA/CCI products and grouping-methodology specifications (that is, CMG+, DPG, expected length of stay [ELOS], Resource Intensity Weight [RIW], CACS and ambulatory cost weights [ACW]). Additional products may be added as development projects occur. This is an annual license that must be renewed each year in order for the vendor to receive the listed products from CIHI. Vendor license fees vary according to the product. For some products, additional licence fees may be required for authorized use by end users. For further information, please contact vendors@cihi.ca.

5 Data Requests and Analyses

Clients may request special analyses of CIHI data, or data files if clients choose to perform their own analyses. Data disclosure is determined by CIHI's principles and policies for the protection of health information. Cost estimates for consultation and production time will be quoted to clients upon request. For more information, please go to www.cihi.ca/requestdata.

GRADUATE STUDENT DATA ACCESS PROGRAM

The Graduate Student Data Access Program (GSDAP) provides data to qualified graduate students at no cost to undertake policy-relevant research related to health and health services to fulfill graduate or medical residency program requirements.

More information is available at www.cihi.ca/GSDAP.

6 Ordering

You can order products and services by mail, fax or electronically. Payment, as applicable, must accompany all orders.

CIHI Order Desk

495 Richmond Road, Suite 600

Ottawa, Ontario K2A 4H6

Phone: 613-241-7860

Fax: 613-241-8120

MAIL/FAX

You can order publications and products by completing an order form. You can access an order form by going to www.cihi.ca, going to the e-order desk and printing the fax form.

ONLINE ORDER/REGISTRATION DESK

You can order publications and products or register for workshops online, 24 hours a day, seven days a week. The online order/registration desk can be accessed from CIHI's home page at www.cihi.ca. Select either "Publications" or "Education" and follow the instructions.

SHIPPING AND HANDLING

Please allow 10 days for delivery. All orders within Canada include shipping and handling. Orders outside of Canada are subject to a shipping and handling charge.

RETURNS AND REFUNDS

To return any item, simply indicate the reason for your return, include a copy of the invoice and send the package to CIHI's Toronto office. We will issue a credit note once we have received and processed the returned item(s). Returns or claims for refunds must be initiated within 15 days of delivery of product.

Please contact any CIHI office for more information about our products or services.

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Fax: 416-481-2950

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Edmonton, Alberta T5J 3G1
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Fax: 709-576-0952

The Big

Picture

1 Health System Management

Using data from its data holdings and other sources, CIHI produces a broad array of analytical reports that shed light on relevant topics and issues across the health system.

Health System/Special Reports **CORE**

DATA

Description

Reports developed by CIHI regarding Canada's health system are produced using CIHI data and other data and information sources to build on the existing body of knowledge related to health and health care.

ANALYSIS

Publications

- *Patient Pathways: Transfers From Continuing Care to Acute Care*
- *A Framework for Health Outcomes Analysis: Diabetes and Depression Case Studies*
- *The Burden of Neurological Diseases, Disorders and Injuries in Canada*
- *Health Care Use at the End of Life in Western Canada*
- *Health Care in Canada*
- *The Cost of Hospital Stays: Why Costs Vary*
- *Exploring the 70/30 Split: How Canada's Health Care System Is Financed*
- *Giving Birth in Canada: The Costs*
- *Giving Birth in Canada: Providers of Maternity and Infant Care*
- *Giving Birth in Canada: A Regional Profile*
- *Waiting for Health Care in Canada: What We Know and What We Don't Know*

For more health system/special reports, please visit our website.

UNDERSTANDING AND USE

Understanding and use products and services are not available at this time.

Health Indicators **CORE**

DATA

Description

Health indicators are standardized measures by which to compare health status and health system performance and characteristics among different jurisdictions in Canada.

Health indicators aim to support regional health authorities in monitoring the health of their populations and the functioning of their local health systems through quality comparative information on:

- The overall health of the population served;
- The major non-medical determinants of health in the region;
- The health services received by the region's residents; and
- Characteristics of the community or the health system that provide useful contextual information.

ANALYSIS

Publications

- *Health Indicators* annual reports
- *Health Indicators*: e-publication
- Hospital Standardized Mortality Ratio (HSMR) reports
- *National Consensus Conference on Population Health Indicators Final Report*
- *The Health Indicators Project: The Next 5 Years*

UNDERSTANDING AND USE

Subscriber Reports

- Electronic Hospital Standardized Mortality Ratio (eHSMR) reports, offered through electronic Hospital Specific Reports (eHSR)

Education

The education program for health indicators is intended for those individuals responsible for assessing health status and health-system performance in their jurisdictions and developing and/or using health indicators for their facility, region or province/territory.

indicators@cihi.ca

2 Population Health

Canadian Population Health Initiative **CORE**

CANADIAN POPULATION HEALTH INITIATIVE

Description

The Canadian Population Health Initiative (CPHI) was created in 1999 to foster a better understanding of factors that affect the health of individuals and communities and to contribute to the development of policies that reduce inequities and improve the health and well-being of Canadians.

Priority Themes

CPHI's key areas of focus for 2007 to 2012 are:

- Mental health and resilience;
- Reducing gaps in health;
- Place and health; and
- Promoting healthy weights.

Publications

- *Improving the Health of Canadians: Exploring Positive Mental Health* (2009)
- *Reducing Gaps in Health: A Focus on Socio-Economic Status in Urban Canada* (2008)
- *Improving the Health of Canadians: Mental Health, Delinquency and Criminal Activity* (2008)
- *Improving the Health of Canadians: Mental Health and Homelessness* (2007)
- *How Healthy Are Rural Canadians? An Assessment of Their Health Status and Health Determinants* (2006)

Workshop Proceedings Reports

- *Mental Health and Homelessness in Canada—Workshop Proceedings Report*
- *Healthy Urban Places: Moving From Knowledge to Action*
- *Reducing Gaps in Health: Knowledge Synthesis, Translation and Exchange Workshop Proceedings Report*

UNDERSTANDING AND USE

Funded Research and Other Reports

- *The Canadian Population Health Initiative: Action Plan 2007–2010*
- *Retrospect and Prospect: Assessment of CPHI's Impact in Recent Years (2004–2007) and Possible Directions for the Future (2007–2010)*
- CPHI-funded research results summaries (available online)
- *Mentally Healthy Communities: A Collection of Papers* (2008)
- *State of the Evidence Review on Urban Health and Healthy Weights* (2008)

Education

The CPHI education program is designed for those who are interested in health planning and decision-making and who want to learn more about applying population health concepts to their work, including interdisciplinary health-planning teams, district/regional/provincial health authorities, public health units and decision-makers beyond the health sector. The CPHI education program includes both workshop and elearning opportunities.

cphi@cihi.ca

3 Primary Health Care

Primary Health Care **CORE**

DATA

Description

The Primary Health Care Information program collaborates with key stakeholders across Canada to address priority primary health care (PHC) information needs. Our goal is to establish new pan-Canadian data sources which can be used to better understand PHC across Canada, report on a subset of PHC indicators and inform health policy- and decision-making at various levels.

ANALYSIS

Publications

- *Primary Health Care (PHC) Indicators Chartbook: An Illustrative Example of Using PHC Data for Indicator Reporting* (downloadable slide deck available)
- *Quality of Diabetes Care in Canada—Analysis in Brief*
- *Patients' Experiences With Primary Health Care—Analysis in Brief*

UNDERSTANDING AND USE

Education

This program is intended for PHC providers, health system planners and managers, researchers, e-health experts, electronic medical record vendors and other individuals responsible for coordinating or administering primary health care, chronic disease prevention and management or health indicators programs. Information will be shared through conferences and workshops.

phc@cihi.ca

An In-Depth

Look

Many of the products and services in this guide are connected with CIHI's data holdings, which are key to our health information activities. The broad range of health domains covered, in conjunction with the policies and practices applied to ensure confidentiality, data protection and data quality, make the holdings an excellent source of health data.

For further information on CIHI's data holdings, please visit the CIHI website at www.cihi.ca.

1 Acute and Ambulatory Care

Discharge Abstract Database **CORE**

DATA

The Discharge Abstract Database (DAD) is a data holding that captures administrative, clinical and demographic information on hospital inpatient and day surgery events. Discharge data are received from all acute care facilities across Canada, with the exception of Quebec.

Resources and Standards

- File layout and code structure documents are available from CIHI.
 - *Discharge Abstract Database Abstracting Manual*
 - *CMG+ Directory*
 - *DPG Directory*
- See details regarding the CMG+ and DPG grouping methodologies on pages 41 and 42.

ANALYSIS

- *Inpatient Hospitalizations and Average Length of Stay Trends in Canada, 2003–2004 and 2004–2005*
- *Trends in Acute Inpatient Hospitalizations and Day Surgery Visits in Canada, 1995–1996 to 2005–2006*
- *Giving Birth in Canada: Regional Trends From 2001–2002 to 2005–2006*
- *Too Early, Too Small: A Profile of Small Babies Across Canada*
- *Highlights of 2006–2007 and 2007–2008 Inpatient Hospitalizations and Emergency Department Visits*
- Selected statistics are available for this database on CIHI’s website under Quick Stats.

UNDERSTANDING AND USE

Subscriber Reports

- Electronic Hospital Specific Reports (eHSR), offered quarterly and annually
- Electronic Comparison of Hospital Activity Program (eCHAP), offered quarterly

Education

The DAD education program is intended for health record professionals and others who have responsibility for coding and abstracting patient records and data submission to CIHI or who work directly with the data.

dad@cihi.ca

Hospital Morbidity Database **CORE**

DATA

The Hospital Morbidity Database (HMDB) is a national data holding that captures administrative, clinical and demographic information on hospital inpatient events. It provides national discharge statistics from Canadian health care facilities by diagnoses and procedures. Discharge data are received from acute care facilities in Quebec and are combined with a subset of discharge data from DAD to complete the national picture.

Resources and Standards

- *Discharge Abstract Database Abstracting Manual*

ANALYSIS

- *Inpatient Hospitalizations and Average Length of Stay Trends in Canada, 2003–2004 and 2004–2005*
- *Trends in Acute Inpatient Hospitalizations and Day Surgery Visits in Canada, 1995–1996 to 2005–2006*
- *Giving Birth in Canada: Regional Trends From 2001–2002 to 2005–2006*
- *Tabular Reports: 1994–1995 to 2000–2001*
- Selected statistics are available for this database on CIHI's website under Quick Stats.

UNDERSTANDING AND USE

Understanding and use products and services are not available at this time.

morbidity@cihi.ca

National Ambulatory Care Reporting System **CORE**

DATA

The National Ambulatory Care Reporting System (NACRS) has the potential to include data for all hospital-based and community-based ambulatory care: day surgery, outpatient clinics and emergency departments. Ambulatory care grew significantly in recent years to become the largest volume of patient activity in Canadian health care.

Resources and Standards

- File layout and code structure documents are available from CIHI.
- *National Ambulatory Care Reporting System Manual*
- Comprehensive Ambulatory Classification System (CACS)
 - *Comprehensive Ambulatory Classification System Directory*
 - *Comprehensive Ambulatory Classification System 2008 RIW and Title Tables*
 - *Comprehensive Ambulatory Classification System Assignment Table (ICD-10-CA/CCI)*

► See details regarding the CACS grouping methodology on page 43.

ANALYSIS

- *Understanding Emergency Department Wait Times: Who Is Using Emergency Departments and How Long Are They Waiting?* (2005)
- *Understanding Emergency Department Wait Times: How Long Do People Spend in Emergency Departments in Ontario?* (2007)
- *Understanding Emergency Department Wait Times: Access to Inpatient Beds and Patient Flow* (2007)
- *Emergency Departments and Children in Ontario* (2008)
- Selected statistics are available for this database on CIHI's website under Quick Stats.

UNDERSTANDING AND USE

Subscriber Reports

- eNACRS reports, offered quarterly
- Emergency department wait time indicator reports, offered monthly

Education

The education program for NACRS is primarily intended for health information management professionals, clinicians, finance/MIS personnel, and decision support and utilization management staff who work directly with CIHI's ambulatory care patient data and reports for decision-making.

nacrs@cihi.ca

Therapeutic Abortions Database **CORE**

DATA

The Therapeutic Abortions Database (TADB) is a national data holding that captures administrative, clinical and demographic information on women obtaining an induced abortion in Canada.

ANALYSIS

Abortion statistics are released annually in Statistics Canada's *The Daily*.

UNDERSTANDING AND USE

Understanding and use products and services are not available at this time.

ta@cihi.ca

2 Continuing and Specialized Care

Hospital Mental Health Database **CORE**

DATA

The Hospital Mental Health Database (HMHDB) contains hospitalization data for mental illness across Canada.

Resources and Standards

- *Hospital Mental Health Database Data Dictionary*

ANALYSIS

- *Hospital Mental Health Services in Canada* (historical annual report)
- Selected statistics are available for this database on CIHI's website under Quick Stats.

UNDERSTANDING AND USE

Understanding and use products and services are not available at this time.

hmhdb@cihi.ca

Ontario Mental Health Reporting System

DATA

The Ontario Mental Health Reporting System (OMHRS) contains client data collected from Ontario facilities with designated inpatient mental health beds.

Resources and Standards

- *Ontario Mental Health Reporting System (OMHRS) Resource Manual, March 2009 Edition*
- *System for Classification of In-Patient Psychiatry (SCIPP) Grouping Methodology: Flowcharts and SAS Code, OMHRS Version*
- *System for Classification of In-Patient Psychiatry (SCIPP) Grouping Methodology Case Mix Index (CMI) Values, OMHRS Version*

- ▶ See details regarding the SCIPP grouping methodology and SCIPP–Weighted Patient Day (SWPD) products on page 44.

ANALYSIS

- Selected statistics are available for this database on CIHI's website under Quick Stats.

UNDERSTANDING AND USE

Subscriber Reports

- OMHRS comparative reports, offered quarterly

Education

The education program for OMHRS is intended for representatives of Ontario facilities that are implementing OMHRS. Designated site coordinators, mental health clinicians and staff involved in case management, quality improvement, program evaluation, administration and decision support would find this program beneficial.

omhrs@cihi.ca

National Rehabilitation Reporting System **CORE**

DATA

The National Rehabilitation Reporting System (NRS) contains client data collected from participating adult inpatient rehabilitation facilities and programs across Canada.

Resources and Standards

- *Rehabilitation Minimum Data Set Manual, February 2009 Edition*
- FIM Video: *Assessing Function With FIM instrument* (English only)
- *Rehabilitation Patient Groups (RPG) Grouping Methodology: Flowcharts and SAS Code, NRS Version*
- *Rehabilitation Patient Group (RPG) Grouping Methodology and Weights, NRS 2009–2010 Version*

► See details regarding the Rehabilitation Patient Grouping methodology on page 43.

ANALYSIS

- *Inpatient Rehabilitation in Canada, 2007–2008*
- *Clients Returning to Inpatient Rehabilitation*
- *Clients Transitioning From Inpatient Rehabilitation to Complex Continuing Care or Home*
- *Life After Traumatic Spinal Cord Injury: From Inpatient Rehabilitation Back to the Community*
- *Multiple Sclerosis and Inpatient Rehabilitation: A Snapshot of Care*
- Selected statistics are available for this database on CIHI's website under Quick Stats.

UNDERSTANDING AND USE

Subscriber Reports

- eNRS comparative reports, offered quarterly

Education

The education program is intended for representatives from facilities that have an end user license agreement with CIHI for the NRS. Those participating in the collection and submission of rehabilitation data, as well as rehabilitation clinicians, administrators, decision support and utilization staff interested in program evaluation and process improvement would find this education valuable.

rehab@cihi.ca

Continuing Care Reporting System **CORE**

DATA

The Continuing Care Reporting System (CCRS) collects and reports information on residents of continuing care facilities, both hospital- and residential-based, in Canada.

Resources and Standards

- *RAI-MDS 2.0 and RAPs Canadian Version User's Manual, Second Edition, March 2005*
- *Continuing Care Reporting System Specifications Manual*
- *Clinical Assessment Protocols (CAPs) Manual: For Use With RAI-MDS 2.0 and RAI-HC Assessment Instruments*
- *Resource Utilization Group III (RUG-III) Grouping Methodology: Flowcharts and SAS Code, CCRS Version*
- *Resource Utilization Group III (RUG-III) Grouping Methodology Case Mix Index (CMI) Values, CCRS Version*
- *CCRS Technical Document—Ontario RUG Weighted Patient Day (RWPD) Methodology*

- ▶ See details regarding the RUG-III grouping methodology on page 44.

ANALYSIS

- *Facility-Based Continuing Care in Canada*
- *Caring for Nursing Home Residents with Behavioural Symptoms: Information to Support a Quality Response*
- *The “Younger” Generation in Ontario Complex Continuing Care*
- *Resident Safety: An Analysis of Characteristics Associated With Falling in Ontario Complex Continuing Care*

- *Complex Continuing Care in Ontario: Resident Demographics and System Characteristics, 1996–1997 to 2002–2003*
- *Short Stays in Ontario Complex Continuing Care Facilities, 2001–2002*
- Selected statistics are available for this database on CIHI's website under Quick Stats.

UNDERSTANDING AND USE

Subscriber Reports

- eCCRS comparative reports, updated quarterly

Education

The education program for CCRS is intended for educators and staff involved in clinical assessment and data collection, as well as managers, RAI coordinators and others responsible for case management, quality improvement, program evaluation and decision support.

ccrs@cihi.ca

Home Care Reporting System **CORE**

DATA

The Home Care Reporting System (HCRS) collects and reports information on clients who receive publicly funded home care in Canada.

Resources and Standards

- *RAI-Home Care (RAI-HC) Manual, Canadian Version, Second Edition, October 2002*
- *Home Care Reporting System Specifications Manual*
- *Clinical Assessment Protocols (CAPs) Manual: For Use With RAI-MDS 2.0 and RAI-HC Assessment Instruments*
- *Resource Utilization Group III–Home Care (RUG-III-HC) Grouping Methodology: Flowcharts and SAS Code, HCRS Version*

► See details regarding the RUG-III-HC grouping methodology on page 45.

ANALYSIS

- *Home Care in Canada*
- *The Yukon: Pioneers in Home Care Information*
- *Development of National Indicators and Reports for Home Care Phase II—Final Project Report*
- Selected statistics are available for this database on CIHI's website under Quick Stats.

UNDERSTANDING AND USE

Subscriber Reports

- eHCRS comparative reports, offered quarterly

Education

The education program for HCRS is intended for educators and staff involved in clinical assessment and data collection, as well as managers, RAI coordinators and others responsible for case management, quality improvement, program evaluation and decision support.

homecare@cihi.ca

Canadian Organ Replacement Register **CORE**

DATA

The Canadian Organ Replacement Register (CORR) records, analyzes and reports on the level of activity and outcomes of vital organ transplantation and renal dialysis activities in Canada.

Resources and Standards

- *Instruction Manual—Transplant Recipient and Organ Donor Information, 2009*
- *Instruction Manual—Chronic Renal Failure Patients on Renal Replacement Therapy, 2009*

ANALYSIS

- *Canadian Organ Replacement Register Report*
- *Canadian Organ Replacement Register Directory, 2009*
- Centre-specific comparison indicators reports for quality assurance purposes, offered annually
- Selected statistics are available for this database on CIHI's website under Quick Stats.

UNDERSTANDING AND USE

Education

The education program for CORR is intended for nephrologists, managers of dialysis, clinical nurses, research assistants and data coordinators in dialysis units across Canada.

corr@cihi.ca

National Trauma Registry **CORE**

DATA

The National Trauma Registry (NTR) provides national statistics on injury-related hospitalizations in Canada.

The NTR has two data sets:

- The Minimum Data Set (MDS) includes demographic, diagnostic and procedural information on all patients hospitalized in Canada due to injury.
- The Comprehensive Data Set (CDS) contains data on patients hospitalized with major trauma.

Resources and Standards

- *National Trauma Registry (NTR) Data Dictionary*

ANALYSIS

- *National Trauma Registry Report: Injury Hospitalizations*
- *National Trauma Registry Report: Major Injury in Canada*
- Selected statistics are available for this database on CIHI's website under Quick Stats.

UNDERSTANDING AND USE

Understanding and use products and services are not available at this time.

ntr@cihi.ca

Ontario Trauma Registry

DATA

The Ontario Trauma Registry identifies, describes and quantifies trauma injury–related hospitalizations in Ontario.

The OTR has three data sets:

- The Minimum Data Set (MDS) contains demographic, diagnostic and procedural data on all patients hospitalized in Ontario due to injury.
- The Comprehensive Data Set (CDS) contains detailed data on patients hospitalized in 11 participating hospitals in Ontario due to major trauma, including demographic, pre-hospital and hospital care, patient outcomes and six-month follow-up.
- The Death Data Set (DDS) contains data on all deaths in Ontario due to injury, including demographic data, cause of death, injury details, motor vehicle crash information and factors contributing to death (such as alcohol).

Resources and Standards

- *Ontario Trauma Registry (OTR) Data Dictionary*

ANALYSIS

- *Ontario Trauma Registry Report: Injury Hospitalizations*
- *Ontario Trauma Registry Report: Major Injury in Ontario*
- *Ontario Trauma Registry Report: Injury Deaths in Ontario*
- Selected statistics are available for this database on CIHI's website under Quick Stats.

UNDERSTANDING AND USE

Education

Data analyst training workshops: this education program is intended for new trauma data analysts and designated site coordinators to ensure consistent and accurate capture of trauma hospitalization information.

Canadian Joint Replacement Registry **CORE**

DATA

The Canadian Joint Replacement Registry (CJRR) captures information on hip and knee joint replacements performed in Canada and follows joint-replacement patients over time to monitor their revision rates.

Resources and Standards

- Data element documentation and definitions
- Web-based submission user manual

ANALYSIS

- CJRR reports
- Selected statistics are available for this database on CIHI's website under Quick Stats.

UNDERSTANDING AND USE

Understanding and use products and services are not available at this time.

cjrr@cihi.ca

3 Pharmaceuticals

National Prescription Drug Utilization Information System Database **CORE**

DATA

The National Prescription Drug Utilization Information System (NPDUIS) Database is designed to provide data for the critical analyses of drug utilization and cost trends so that Canada's health system has more comprehensive, accurate information on how prescription drugs are being used.

ANALYSIS

- *Bisphosphonates in Osteoporosis: An Analysis Focusing on Drug Claims by Seniors, 2001 to 2007*

UNDERSTANDING AND USE

NPDUIS Plan Information Document

- This document, updated twice annually, provides high-level information regarding the design and policies of public drug programs to assist in the interpretation of drug utilization information.

drugs@cihi.ca

4 Health Human Resources

Health Personnel Database **CORE**

DATA

The Health Personnel Database (HPDB) contains aggregate, supply-based trend information by province/territory and year for 24 health occupations in Canada.

Resources and Standards

- *Health Personnel Database Technical Report*

ANALYSIS

- *Canada's Health Care Providers, 1997 to 2006, A Reference Guide*
- *Canada's Health Care Providers—2007 Provincial Profiles*
- *Guidance Document for the Development of Data Sets to Support Health Human Resources Management in Canada*
- *Distribution and Internal Migration of Canada's Health Care Workforce*

UNDERSTANDING AND USE

Understanding and use products and services are not available at this time.

hpdb@cihi.ca

National Physician Database **CORE**

DATA

The National Physician Database (NPDB) contains data on physician payments and services in Canada.

Resources and Standards

- *National Physician Database Data Submission Specifications Manual*

ANALYSIS

- *Physicians in Canada: Average Gross Fee-for-Service Payments, 2005–2006*
- *Physicians in Canada: Fee-for-Service Utilization, 2005–2006*
- *National Grouping System Categories (NGS) Report, Canada*
- *Reciprocal Billing (RB) Report, Canada*
- *Physicians in Canada: The Status of Alternative Payment Programs*
- *The Practicing Physician Community in Canada, 1989–1990 to 1998–1999*

- *From Perceived Surplus to Perceived Shortage: What Happened to Canada’s Physician Workforce in the 1990s*
- *The Evolving Role of Canada’s Family Physicians, 1992–2001*
- *The Evolving Role of Canada’s Fee-for-Service Family Physicians, 1994 to 2003: Provincial Profiles*
- *Geographic Distribution of Physicians in Canada: Beyond How Many and Where*
- Selected statistics are available for this database on CIHI’s website under Quick Stats.

UNDERSTANDING AND USE

Understanding and use products and services are not available at this time.

npdb@cihi.ca

Scott’s Medical Database **CORE**

DATA

Scott’s Medical Database (SMDB) provides information on the supply, distribution and migration patterns (between jurisdictions and between countries) of Canadian physicians.

ANALYSIS

- *Supply, Distribution and Migration of Canadian Physicians, 2007*
- *Supply, Distribution and Migration of Canadian Physicians, Selected Years, 1961 to 1995*
- *International and Interprovincial Migration of Physicians, Canada*

UNDERSTANDING AND USE

Understanding and use products and services are not available at this time.

smdb@cihi.ca

Registered Nurses Database **CORE**

DATA

The Registered Nurses Database (RNDB) contains supply and distribution information for registered nurses (RNs) in Canada.

Resources and Standards

- *Registered Nurses System Data Dictionary and Processing Manual*

ANALYSIS

- *Regulated Nurses: Trends, 2003 to 2007*
- *Highlights From the Regulated Nursing Workforce in Canada*
- *Workforce Trends of Registered Nurses in Canada*
- *Supply and Distribution of Registered Nurses in Rural and Small Town Canada*
- *Future Development of Information to Support the Management of Nursing Resources: Recommendations*
- *The Regulation and Supply of Nurse Practitioners in Canada*
- Selected statistics are available for this database on CIHI's website under Quick Stats.

UNDERSTANDING AND USE

Understanding and use products and services are not available at this time.

nursing@cihi.ca

Licensed Practical Nurses Database **CORE**

DATA

The Licensed Practical Nurses Database (LPNDB) contains supply and distribution information for licensed practical nurses (LPNs) in Canada.

Resources and Standards

- *Licensed Practical Nurses System Data Dictionary and Processing Manual*

ANALYSIS

- *Regulated Nurses: Trends, 2003 to 2007*
- *Highlights From the Regulated Nursing Workforce in Canada*
- *Workforce Trends of Licensed Practical Nurses in Canada*
- Selected statistics are available for this database on CIHI's website under Quick Stats.

UNDERSTANDING AND USE

Understanding and use products and services are not available at this time.

nursing@cihi.ca

Registered Psychiatric Nurses Database **CORE**

DATA

Registered psychiatric nurses are educated and regulated as a separate profession in British Columbia, Alberta, Saskatchewan and Manitoba. The Registered Psychiatric Nurses Database (RPNDB) contains supply and distribution information for registered psychiatric nurses (RPNs) registered in these provinces.

Resources and Standards

- *Registered Psychiatric Nurses System Data Dictionary and Processing Manual*

ANALYSIS

- *Regulated Nurses: Trends, 2003 to 2007*
- *Highlights From the Regulated Nursing Workforce in Canada*
- *Workforce Trends of Registered Psychiatric Nurses in Canada*
- Selected statistics are available for this database on CIHI's website under Quick Stats.

UNDERSTANDING AND USE

Understanding and use products and services are not available at this time.

nursing@cihi.ca

National Survey of the Work and Health of Nurses **CORE**

DATA

The National Survey of the Work and Health of Nurses (NSWHN) was undertaken in partnership with Statistics Canada and Health Canada. The survey was administered to a sample of LPNs, RNs and RPNs from across the country. Data from the survey help to identify relationships between selected health outcomes, the work environment and work–life experiences.

ANALYSIS

- *Findings From the 2005 National Survey of the Work and Health of Nurses*
- *Part-Time Nurses, Full-Time Ambitions . . . What Do We Know?*
- *The Work and Health of Nurses . . . How Do Nurses' Perceptions Vary Across Canada?*
- *Absenteeism of Nurses—What Do We Know . . . How Do They Compare?*
- *A Lift for Patients . . . A Relief for Nurses?*
- *Satisfaction and Respect on the Job . . . How Do They Relate to the Absenteeism of Nurses?*
- *How Satisfied Are Nurses With Being a Nurse and With Their Current Job?*

UNDERSTANDING AND USE

Understanding and use products and services are not available at this time.

nursing@cihi.ca

Occupational Therapist Database **CORE**

DATA

The Occupational Therapist Database (OTDB) contains supply and distribution information for occupational therapists (OTs) in Canada.

Resources and Standards

- *Occupational Therapist Database Data Dictionary*
- *Occupational Therapist Database Data Submission Specifications Manual*

ANALYSIS

- *Workforce Trends of Occupational Therapists in Canada*

UNDERSTANDING AND USE

Understanding and use products and services are not available at this time.

otdb@cihi.ca

Pharmacist Database **CORE**

DATA

The Pharmacist Database (PDB) contains supply and distribution information for pharmacists in Canada.

Resources and Standards

- *Pharmacist Database Data Dictionary*
 - *Pharmacist Database Data Submission Specifications Manual*
-

ANALYSIS

- *Workforce Trends of Pharmacists for Selected Provinces and Territories in Canada*
-

UNDERSTANDING AND USE

Understanding and use products and services are not available at this time.

pdb@cihi.ca

Physiotherapist Database **CORE**

DATA

The Physiotherapist Database (PTDB) contains supply and distribution information for physiotherapists (PTs) in Canada.

Resources and Standards

- *Physiotherapist Database Data Dictionary*
 - *Physiotherapist Database Data Submission Specifications Manual*
-

ANALYSIS

- *Workforce Trends of Physiotherapists in Canada*
-

UNDERSTANDING AND USE

Understanding and use products and services are not available at this time.

ptdb@cihi.ca

5 Health Expenditures

National Health Expenditure Database **CORE**

DATA

The National Health Expenditure Database (NHEX) provides an overview of all health spending in Canada, by spending category and source of finance.

ANALYSIS

- *National Health Expenditure Trends*
- *Drug Expenditure in Canada*
- *Public-Sector Expenditures and Utilization of Home Care Services in Canada: Exploring the Data*
- *The Cost of Acute Care Hospital Stays by Medical Condition in Canada, 2004–2005*
- Selected statistics are available for this database on CIHI's website under Quick Stats.

UNDERSTANDING AND USE

Understanding and use products and services are not available at this time.

nhex@cihi.ca

Canadian MIS Database **CORE**

DATA

The Canadian MIS Database (CMDDB) contains financial and statistical information on hospitals and regional health authorities across Canada.

Resources and Standards

- *MIS Standards*

► See details regarding the *MIS Standards* on page 40.

ANALYSIS

- *Canadian MIS Database, Hospital Financial Performance Indicators Report*
- Selected statistics are available for this database on CIHI's website under Quick Stats.

UNDERSTANDING AND USE

Subscriber Reports

- eMIS Reports, offered twice annually

Education

The MIS education program is primarily intended for managers, directors and facility/regional MIS coordinators who are responsible for coordinating or administering the financial and statistical information necessary for effective decision-making.

cmdb@cihi.ca

OECD Health Database (Canadian Segment) **CORE**

DATA

The OECD Health Database contains information on health care spending, health care services and health status among member countries of the Organisation for Economic Co-operation and Development (OECD) (www.oecd.org). CIHI and Statistics Canada maintain the Canadian segment of the OECD Health Database.

ANALYSIS

The OECD produces an annual electronic publication, *OECD Health Data*, and a biennial paper publication, *Health at a Glance*. CIHI will respond to research and analysis requests based on the Canadian segment supplied to the OECD.

UNDERSTANDING AND USE

Understanding and use products and services are not available at this time.

oeedcs@cihi.ca

6 Medical Imaging

Medical Imaging Technologies Database **CORE**

DATA

The Medical Imaging Technologies Database contains the results from the National Survey of Selected Medical Imaging Equipment. The survey is completed annually and captures information on the number, distribution and key characteristics of eight selected imaging technologies across Canada.

Additional information, varying depending on the type of equipment, is also captured:

- Configuration (for example, angiography suites—single-plane/bi-plane; MRI—closed bore/open bore);
- Level of technology (for example, CT—number of slices; MRI—field strength); and
- Number of exams (CT and MRI only).

ANALYSIS

- *Medical Imaging in Canada*

UNDERSTANDING AND USE

Understanding and use products and services are not available at this time.

cmdb@cihi.ca

Our

Foundation

Standards are key to collecting quality data and developing health information systems. CIHI continues to lead the evolution and creation of new national health information management standards. Standards help provide a framework for collecting and reporting on health information.

For further information on CIHI's standards and grouping methodologies, please visit the CIHI website at www.cihi.ca.

1 Coding and Classifications

ICD-10-CA/CCI **CORE**

STANDARDS

International Statistical Classification of Diseases and Related Health Problems, 10th Revision, Canada (ICD-10-CA)

The 10th revision of the International Statistical Classification of Diseases and Related Health Problems (ICD-10) was approved by the World Health Organization in 1990 and has been available for implementation since 1993. On CIHI's recommendation, the federal, provincial and territorial governments approved ICD-10 as the Canadian disease-classification standard to maintain consistency with international reporting. ICD-10-CA is an enhanced version of ICD-10 that reflects current medical practices in Canada.

Canadian Classification of Health Interventions (CCI)

CCI classifies a broad range of interventions. CCI has been designed to be service-provider and service-setting neutral and can be used comprehensively throughout the health system. CCI was introduced in Canada in conjunction with ICD-10-CA, replacing the Canadian Classification of Diagnostic, Therapeutic and Surgical Procedures (CCP) and the procedure volume of ICD-9-CM.

Resources

- *ICD-10-CA/CCI*
- *Canadian Coding Standards for ICD-10-CA and CCI*
- *Code Title Tables: ICD-10-CA, CCI*
- *Category/Rubric Tables: ICD-10-CA and CCI*
- *Validation Tables: ICD-10-CA, CCI*
- *ICD-10-CA and CCI Evolution Tables*
- *Conversion Tables: ICD-10-CA/CCI to ICD-9/CCP or ICD-10-CA/CCI to ICD-9 CM*
- *Equivalency Tables: ICD-9-CM/ICD-9 Diagnoses, ICD-9-CM/CCP Procedures, 1999*
- *Validation Tables: ICD-9-CM or ICD-9/CCP, 1999*

Format

- CD-ROM
- PDF
- Zip File
- Zip File
- Zip File
- PDF
- Zip File
- Disk
- Disk

UNDERSTANDING AND USE**Education**

The education program for ICD-10-CA and CCI is primarily intended for health information management professionals who are responsible for coding acute care patient records and submitting data to CIHI. Other health information professionals who rely on data and reports influenced by the new classification standards and require a sound understanding of ICD-10-CA and CCI would also find this education beneficial.

For inquiries regarding the ICD-10-CA/CCI CD-ROM and the Canadian Coding Standards, please contact ccicd@cihi.ca.
For inquiries related to the tables, please contact vendors@cihi.ca.
www.cihi.ca/coding

2 Management Information Systems

Standards for Management Information Systems in Canadian Health Service Organizations (MIS Standards) **CORE**

STANDARDS

The *MIS Standards* provide a standardized framework for the collection and reporting of financial and statistical data on the day-to-day operations of health service organizations across the continuum of care.

Resources and Standards

- *MIS Standards*

Format

- CD-ROM

► Also see the Canadian MIS Database on page 35.

UNDERSTANDING AND USE

Education

The MIS education program is primarily intended for managers, directors and facility/regional MIS coordinators who are responsible for coordinating or administering the financial and statistical information necessary for effective decision-making.

mis@cihi.ca

3 Case Mix

Case Mix Groups+ **CORE**

GROUPING METHODOLOGY

The Case Mix Groups+ (CMG+) methodology is designed to aggregate acute care inpatients with similar clinical and resource-utilization characteristics. The CMG+ methodology is updated annually. CMG+ is designed to take advantage of the increased clinical specificity of ICD-10-CA and CCI. This methodology, developed using multiple years of acute care inpatient activity and cost records, introduces and enhances several grouping factors to improve the ability to clinically group inpatients and to define length of stay and resource use indicators.

Resources and Standards

- *CMG+ Directory*
- *CMG Title Table*
- *Comorbidity Code Finder Table*
- *Flagged Intervention Code Table*
- *DAD Resource Intensity Weights (RIW) and Expected Length of Stay (ELOS)*
- *Base DAD Resource Intensity Weights (RIW) and Expected Length of Stay (ELOS) Table*
- *Case Mix Decision Support Guide: CMG+*

► Also see the Discharge Abstract Database on page 17.

UNDERSTANDING AND USE

Education

The education program for CMG+ is intended for all users of health information who are exposed to CMG+, RIW or ELOS from either a coding or analytical perspective.

casemix@cihi.ca

For inquiries regarding the tables, please contact vendors@cihi.ca.

www.cihi.ca/casemix

Day Procedure Groups **CORE**

GROUPING METHODOLOGY

Day Procedure Groups (DPG) is a national classification system for ambulatory hospital patients that focuses on the area of day surgery. Patients are assigned to categories according to the most significant procedure recorded on the patient abstract. Patients assigned to the same DPG group represent a homogeneous cluster with similar clinical episodes and requiring similar resources. The DPG grouping methodology continues to be based on the CCI and is the result of an extensive review and revision process using Canadian case–cost data. Each DPG group is assigned a DPG Resource Intensity Weight (RIW) value, which is used to standardize the expression of hospital day surgery volumes, recognizing that not all day surgery patients require the same health care resources. The volume of day surgery cases is then expressed as total day surgery weighted cases; these weighted cases can be directly compared to the inpatient weighted cases.

Resources and Standards

- *DPG Directory*
- *DPG 2009 Title Table*
- *Day Procedure Groups (DPG) RIW and Title Table*
- *Day Procedure Groups (DPG) Code Finder Table*
- *Day Procedure Groups (DPG) Directory*
- *Day Procedure Groups (DPG) RIW and Title Table*
- *Day Procedure Groups (DPG) Code Finder Table*

► Also see the Discharge Abstract Database on page 17.

UNDERSTANDING AND USE

Education

The education program for DPG is intended for all users of health information who are exposed to DPGs or RIWs.

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For inquiries regarding the tables, please contact vendors@cihi.ca.

Comprehensive Ambulatory Classification System **CORE**

GROUPING METHODOLOGY

The Comprehensive Ambulatory Classification System (CACS) is a national grouping methodology for ambulatory care patients that includes emergency departments, clinics and same-day surgery. Patients are grouped according to main diagnosis, most resource-intensive intervention and visit disposition data collected via the National Ambulatory Care Reporting System (NACRS).

Resources and Standards

- *CACS Directory*
- *CACS RIW and Title Table*
- *CACS Code Finder Table (ICD-10-CA/CCI)*

► Also see the NACRS data holding on page 19.

UNDERSTANDING AND USE

Education

The education program for CACS is intended for all users of health information who are exposed to CACS or Resource Intensity Weights (RIW).

casemix@cihi.ca

Rehabilitation Patient Group **CORE**

GROUPING METHODOLOGY

The Rehabilitation Patient Group (RPG) methodology assigns each completed episode to one of 83 RPG groups for the National Rehabilitation Reporting System (NRS).

Resources and Standards

- *Rehabilitation Patient Group (RPG) Grouping Methodology and Weights, NRS Version*

► Also see the NRS data holding on page 22.

UNDERSTANDING AND USE

Education

The education program for RPG is intended for all users of health information who are exposed to RPG grouping methodology and weights.

casemix@cihi.ca

System for Classification of In-Patient Psychiatry

GROUPING METHODOLOGY

The System for Classification of In-Patient Psychiatry (SCIPP) grouping methodology is used within the Ontario Mental Health Reporting System (OMHRS). The methodology uses MDS-MH assessment data to assign mental health assessments to SCIPP groups.

Resources and Standards

- *System for Classification of In-Patient Psychiatry (SCIPP) Grouping Methodology: Flow Charts and SAS Code, OMHRS Version*

▶ Also see the OMHRS data holding on page 21.

UNDERSTANDING AND USE

Education

The education program for SCIPP is intended for all users of health information who are exposed to the SCIPP grouping methodology and SCIPP Weighted Patient Day reports.

casemix@cihi.ca

Resource Utilization Groups III **CORE**

GROUPING METHODOLOGY

The Resource Utilization Groups III (RUG-III) methodology is used within the Continuing Care Reporting System (CCRS). The methodology assigns continuing care assessments to resource utilization groups using the RAI-MDS 2.0 assessment data and appropriate Case Mix Index (CMI) values.

Resources and Standards

- *Resource Utilization Groups III (RUG-III) Grouping Methodology Case Mix Index (CMI) Values, CCRS Version*
- *Resource Utilization Groups III (RUG-III) Grouping Methodology: Flow Charts and SAS Code, CCRS Version*
- *Resource Utilization Groups III (RUG-III) Grouping Methodology and Case Mix Index (CMI) Values for Ontario Long-Term Care, CCRS Version*
- *CCRS Ontario CCC RWPD Methodology Technical Document*

▶ Also see the CCRS data holding on page 23.

UNDERSTANDING AND USE

Education

The education program for RUG-III is intended for users of health information who are exposed to RUG-III and RUG Weighted Patient Day reports.

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Resource Utilization Groups III–Home Care **CORE**

GROUPING METHODOLOGY

The Resource Utilization Groups III–Home Care (RUG-III-HC) is the grouping methodology applied to RAI-HC Canadian Version assessment data submitted to the Home Care Reporting System (HCRS). The RUG-III-HC methodology assigns each assessment to one of 23 groups.

Resources and Standards

- *Resource Utilization Groups III–Home Care (RUG-III-HC) Grouping Methodology: Flowcharts and SAS Code, HCRS Version*

► Also see the HCRS data holding on page 24.

UNDERSTANDING AND USE

Education

The education program for RUG-III-HC is intended for users of health information who are exposed to the RUG-III-HC grouping methodology.

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Appendix—Abbreviations

CACS	Comprehensive Ambulatory Classification System
CAP	Clinical Assessment Protocol
CCI	Canadian Classification of Health Interventions
CCRS	Continuing Care Reporting System
CIHI	Canadian Institute for Health Information
CJRR	Canadian Joint Replacement Registry
CMDB	Canadian MIS Database
CMG	Case Mix Group
CMI	Case Mix Index
CORR	Canadian Organ Replacement Register
CPHI	Canadian Population Health Initiative
CT	computed tomography
DAD	Discharge Abstract Database
DPG	Day Procedure Groups
eCHAP	electronic Comparison of Hospital Activity Program
eHSR	electronic Hospital Specific Report
ELOS	expected length of stay
eNACRS	NACRS web-based comparative reporting
FIM™ instrument ⁱ	a measure of functional independence
HCRS	Home Care Reporting System
HMDB	Hospital Morbidity Database
HMHDB	Hospital Mental Health Database
HPDB	Health Personnel Database
ICD-10-CA ⁱⁱ	International Statistical Classification of Diseases and Related Health Problems, 10th Revision, Canada

i. © 1997, Uniform Data System for Medical Rehabilitation, a division of UB Foundation Activities, Inc. The FIM™ instrument, data set and impairment codes referenced herein are the property of Uniform Data System for Medical Rehabilitation, a division of UB Foundation Activities, Inc.

ii. Based on the International Statistical Classification of Diseases and Related Health Problems, 10th Revision (ICD-10) copyright World Health Organization, 1992–1994. All rights reserved. Modified by permission for Canadian government purposes.

LPNDB	Licensed Practical Nurses Database
MDS	Minimum Data Set
MDS-MH ⁱⁱⁱ	Minimum Data Set–Mental Health
MIS	Management Information System
MRI	magnetic resonance imaging
NACRS	National Ambulatory Care Reporting System
NHEX	National Health Expenditure Database
NPDB	National Physician Database
NPDUIS Database	National Prescription Drug Utilization Information System Database
NRS	National Rehabilitation Reporting System
NSWHN	National Survey of the Work and Health of Nurses
NTR	National Trauma Registry
OECD	Organisation for Economic Co-operation and Development
OMHRS	Ontario Mental Health Reporting System
OTDB	Occupational Therapist Database
OTR	Ontario Trauma Registry
PDB	Pharmacist Database
PHC	primary health care
RAI	Resident Assessment Instrument
RAI-HC ^{iv}	Resident Assessment Instrument–Home Care
RAI-MDS 2.0 ^v	Resident Assessment Instrument–Minimum Data Set 2.0
RAI-MH ⁱⁱⁱ	Resident Assessment Instrument–Mental Health
RAP	Resident Assessment Protocol
RIW	Resource Intensity Weight
RNDB	Registered Nurses Database
RPG	Rehabilitation Patient Group

iii. © Government of Ontario; Ontario Hospital Association; interRAI.

iv. © interRAI, 2001. Modified with permission for Canadian use under licence to the Canadian Institute for Health Information.

v. © interRAI, 1997, 1999. Modified with permission for Canadian use under licence to the Canadian Institute for Health Information.

RPNDB	Registered Psychiatric Nurses Database
RUG-III	Resource Utilization Group III
RUG-III-HC	Resource Utilization Group III–Home Care
RWPD	Resource Weighted Patient Day Report
SCIPP	System for Classification of In-Patient Psychiatry
SMDB ^{vi}	Scott's Medical Database (formerly Southam Medical Database)
TADB	Therapeutic Abortions Database

vi. SMDB contains information on physicians in Canada and is maintained by Scott's Directories, a division of Business Information Group.

