



Continuing Care Reporting System

Interpreting RUG Weighted Patient Day Reports



Canadian Institute
for Health Information
Institut canadien
d'information sur la santé

Production of this document is made possible by financial contributions from Health Canada and provincial and territorial governments. The views expressed herein do not necessarily represent the views of Health Canada or any provincial or territorial government.

All rights reserved.

The contents of this publication may be reproduced unaltered, in whole or in part and by any means, solely for non-commercial purposes, provided that the Canadian Institute for Health Information is properly and fully acknowledged as the copyright owner. Any reproduction or use of this publication or its contents for any commercial purpose requires the prior written authorization of the Canadian Institute for Health Information. Reproduction or use that suggests endorsement by, or affiliation with, the Canadian Institute for Health Information is prohibited.

For permission or information, please contact CIHI:

Canadian Institute for Health Information
495 Richmond Road, Suite 600
Ottawa, Ontario K2A 4H6

Phone: 613-241-7860

Fax: 613-241-8120

www.cihi.ca

copyright@cihi.ca

© 2017 Canadian Institute for Health Information

Cette publication est aussi disponible en français sous le titre *Système d'information sur les soins de longue durée : interpréter les rapports sur les jours-patients pondérés par RUG*.

Table of contents

Introduction	4
CCRS RUG-III (44-group) grouping methodology	4
CCRS RUG-III (44-group) CMI values	4
CCRS RUG-III (34-group) grouping methodology	5
CCRS Ontario LTC RUG-III (34-group) CMI values	5
What is RWPDP?	6
CCRS RWPDP report dates	8
Refresh of historical data	8
Making corrections to CCRS data	8
Types of RWPDP reports in CCRS eReports	9
Facility RWPDP Report	11
Facility RWPDP Report cover page — Facility summary	13
Facility RWPDP Report — Resident details	17
Comparative RWPDP Reports	29
Trending RWPDP Reports	31
Appendix 1: Example of a 2010–2011 Facility RWPDP Report (fictitious data)	34
Appendix 2: Example of a 2014–2015 Comparative RWPDP Report (fictitious data).	36
Appendix 3: Example of a 2014–2015 Trending RWPDP Report (fictitious data).	37

Introduction

This document will help facilities that submit data to the Continuing Care Reporting System (CCRS) at the Canadian Institute for Health Information (CIHI) review their facility-specific RUG Weighted Patient Day (RWPD) reports.

CCRS RUG-III (44-group) grouping methodology

In Canada, many facilities collect administrative and clinical data during a resident's period of care and report that information to CCRS.

The Resource Utilization Groups (RUG-III) grouping methodology categorizes assessments into groups that have similar clinical characteristics and levels of resource use. Based on level of acuity, the RUG-III methodology supports evidence-based system- and facility-level planning, quality improvement and case mix–adjusted resource allocation.

CCRS data reported for Canadian facilities is grouped using the 44-group version of RUG-III. See the CIHI methodology product [*Resource Utilization Groups III \(RUG-III 44-Group\) Grouping Methodology: Flow Charts, SAS Code, and CMI Values, CCRS Version*](#) for details.

CCRS RUG-III (44-group) CMI values

CIHI produces fiscal year–specific Case Mix Index (CMI) values for use in CCRS based on a methodology developed by the former Ontario Joint Planning Policy Commission. The CMI is a cost weight reflecting the relative resource use of an individual within a specific RUG group compared with the overall average resource use for all Ontario complex continuing care (CCC) residents. The CMI is not a direct measure of the cost of care. More accurately, the CMI provides a means to account for differences in the way that resources are used by groups of residents with distinct therapeutic needs.

The CCRS RUG-III (44-group) Ontario CMI values are available as a separate document in the Resources section of CCRS eReports.

These CMI values are also available in the CIHI product [*Resource Utilization Groups III \(RUG-III 44-Group\) Grouping Methodology: Flow Charts, SAS Code, and CMI Values, CCRS Version*](#).

Please note that the RUG-III (44-group) CMI values will be used as examples throughout this document.

CCRS RUG-III (34-group) grouping methodology

CCRS data reported for Ontario long-term care (LTC) facilities is grouped using the 34-group version of RUG-III. See the CIHI methodology product [*Resource Utilization Groups III \(RUG-III\) \(34-Group\) Grouping Methodology: Flowcharts, SAS Code and CMI Values, CCRS Version*](#) for details.

CCRS Ontario LTC RUG-III (34-group) CMI values

The Ontario Ministry of Health and Long-Term Care produces fiscal year-specific CMI values for use in Ontario LTC facilities. The CMI is a cost weight reflecting the relative resource use of an individual within a specific RUG group compared with the overall average resource use for all Ontario LTC residents. The CMI is not a direct measure of the cost of care. More accurately, the CMI provides a means to account for differences in the way that resources are used by groups of residents with distinct therapeutic needs.

The CCRS RUG-III (34-group) Ontario CMI values are available as a separate document in the Resources section of CCRS eReports.

These CMI values are also available in the CIHI product [*RUG-III \(34-Group\) Grouping Methodology and CMI Values*](#).

What is RWPD?

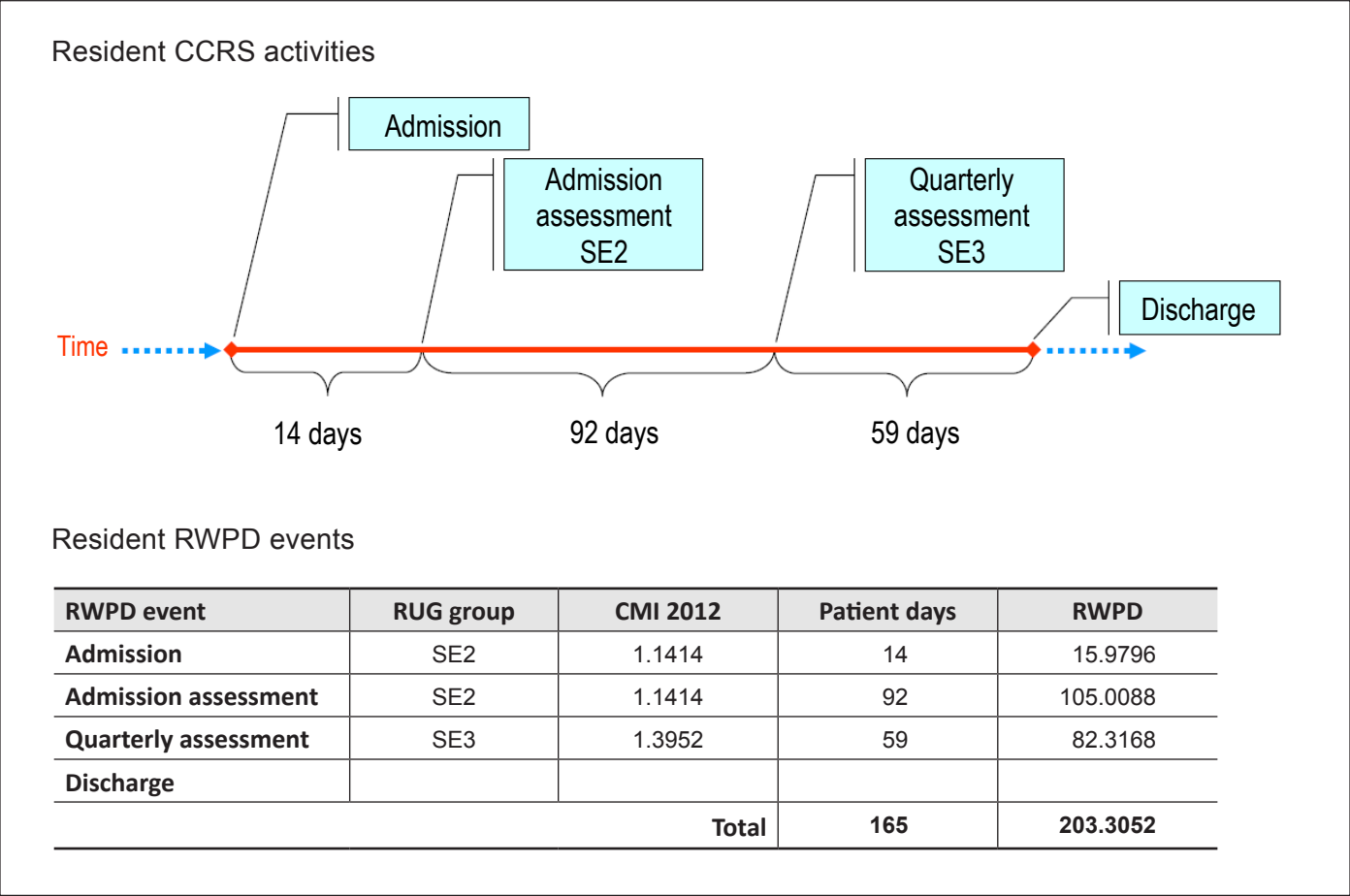
Producing **RUG Weighted Patient Day (RWPD)** reports can be thought of as an accounting process through which CCRS data (admissions, assessments, re-entries, discharges, etc.) is converted into the lines of a ledger (see Figure 1).

For each reporting period, the first step is to create events for each resident using the data accepted into the CCRS database. Clinical and administrative data is then used to assign a RUG group to each assessment. Next, the number of days covered by each assessment (patient days) is calculated. Finally, weighted RWPD events are created by multiplying the number of patient days by the CMI value.

For most RWPD events, the CMI value is assigned based on the RUG group from the associated assessment.

The top part of Figure 1 shows a fictitious timeline of CCRS activities for a resident's period of care. The bottom part of Figure 1 illustrates how the CCRS activities are converted into corresponding RWPDP events in the resident's RWPDP report.

Figure 1 CCRS data and corresponding RWPDP data



CCRS RWPD report dates

From 2014–2015 onward, the RWPD reports will be run quarterly after the final CCRS data submission deadline. All RWPD reports (Facility RWPD, Comparative RWPD and Trending RWPD) are cumulative throughout a fiscal year (e.g., the Q2 reports cover Q1 and Q2). RWPD dates and reporting periods for 2014–2015 are shown in Table 1.

Table 1 RWPD dates and reporting periods for 2014–2015

Period	CCRS early submission deadline	CCRS final submission deadline	RWPD report period		End date for RWPD patient day calculations
			RWPD start date	RWPD end date	
2014–2015 Q1	Aug. 15, 2014	Aug. 31, 2014	Apr. 1, 2014	June 30, 2014	July 1, 2014
2014–2015 Q2	Nov. 15, 2014	Nov. 30, 2014	Apr. 1, 2014	Sept. 30, 2014	Oct. 1, 2014
2014–2015 Q3	Feb. 14, 2015	Feb. 28, 2015	Apr. 1, 2014	Dec. 31, 2014	Jan. 1, 2015
2014–2015 Q4	May 15, 2015	May 31, 2015	Apr. 1, 2014	Mar. 31, 2015	Apr. 1, 2015

Refresh of historical data

Each time the RWPD reports are created, all historical data is refreshed with the most recent data in the CCRS database. If facilities require information regarding a specific time period (such as a specific fiscal quarter), they should download and save their RWPD reports quarterly.

Making corrections to CCRS data

The RWPD reports are created using data taken from the CCRS database. If problems with data are found while reviewing the RWPD reports, corrective actions should be taken:

- If episode admission/re-entry or discharge dates are incorrect, correct them following the process outlined in the CCRS Data Submission User Manual.

- If an assessment in the CCRS database is found to contain incorrect information, submit a correction to it (see the CCRS Data Submission User Manual).
 - Please note that as of 2013–2014, the data submitted in Significant Correction of Prior Full Assessment and Significant Correction of Quarterly Assessment records overwrites the data submitted in the original assessment accepted in the CCRS database. This means that these records automatically correct the relevant full or quarterly assessment and do not show up as separate events in the RWPD reports.
- If an assessment was completed but does not appear in the RWPD report, submit it to CCRS.

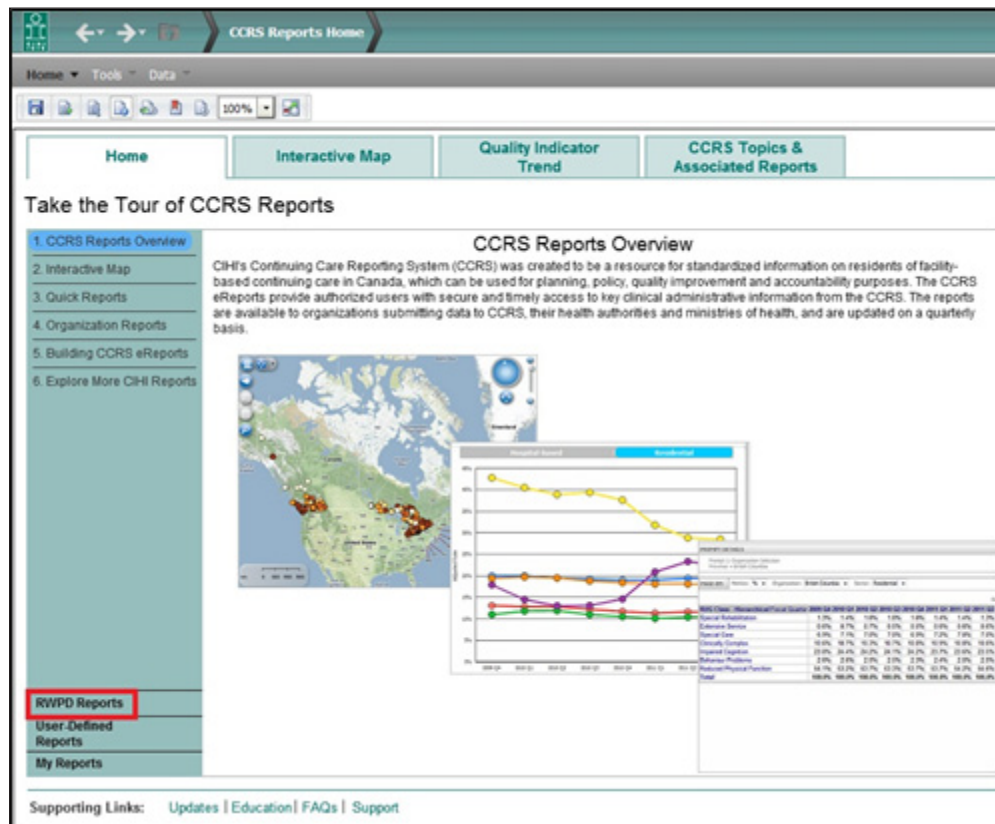
Types of RWPD reports in CCRS eReports

3 types of RWPD reports are available to CCRS clients in CCRS eReports:

- Facility RWPD Reports
- Comparative RWPD Reports
- Trending RWPD Reports

You may access RWPD reports through the CCRS eReports home page by selecting “RWPD Reports” on the lower left-hand side.

Figure 2 CCRS eReports landing page



Facility RWPD Reports are updated quarterly and contain summary and detailed facility- and resident-specific RWPD information for a particular facility. Only those individuals who have permission to access a particular facility's RWPD report will be able to access this report for that facility in CCRS eReports.

Comparative RWPD Reports are updated quarterly and contain summary facility RWPD information for a particular jurisdiction. All individuals who have access to a particular jurisdiction's RWPD reports will be able to access Comparative RWPD Reports for that jurisdiction in CCRS eReports.

Trending RWPD Reports are updated annually and contain summary facility RWPD information for the past several fiscal years for a particular facility. As with Comparative RWPD Reports, all individuals who have access to a particular jurisdiction's RWPD reports will be able to access Trending RWPD Reports for all facilities within that jurisdiction in CCRS eReports.

Because CMI values can change annually, all reports can be run using different sets of CMI values. Further details are provided in the following sections.

Facility RWPD Report

Please see Appendix 1 for an example of a Facility RWPD Report using fictitious data.

In the Facility RWPD Report, you can select 1 fiscal year to display your report results by. You are also required to select 1 facility to display RWPD results. If you have access to only 1 facility, only that facility will be available for selection. If you have access to multiple facilities, all facilities for which you have access will be available for selection. Once the results are displayed, you may be able to choose from 6 further selections at the top of the report:

Facility: This gives you the option to select specific Facility RWPD Reports that you may have access to in CCRS eReports. Many users will have access to the RWPD report for only 1 facility, which will be set as the default facility.

CMI Fiscal Year: This gives you the option to modify the Case Mix Index (CMI) values assigned to the RUGs for assessments in the facility displayed in the report. This option defaults to the CMI fiscal year associated with the fiscal year originally selected. A subsequent fiscal year can be selected instead so that the CMI assignment will be made using the CMI values associated with that fiscal year. For example, if fiscal year 2013–2014 is selected before the results are displayed, the report will, by default, use the CMI values associated with 2013–2014. Changing the CMI Fiscal Year value to 2014 will then display results using the CMI values associated with 2014–2015. Please note that CMI values are updated and released each January. For example, the CMI values for 2015–2016 will be available after January 2015.

RUG Methodology: You cannot modify this option, as it is associated with the facility that is displayed. This defaults to the RUG-III (44-group) IM option, which means groups are assigned using the RUG-III (44-group) index-maximizing approach. For the Ontario residential care sector, this option defaults to the RUG-III (34-group) IM option, which means groups are assigned using the RUG-III (34-group) index-maximizing approach.

Health Record Number: This gives you the option to select a specific resident's health record number to display in the Facility RWPDP Report. By default, this option displays all records in the report unless you make a selection.

URI: This gives you the option to select a specific resident's Unique Registration Identifier (URI) to display in the Facility RWPDP Report. By default, this option displays all records in the report unless you make a selection.

Date of Entry: This selection is not functional at this point and will always have the value "All."

There are several RWPDP metrics in this report, which are described in detail in the following sections.

The date the report was extracted is also displayed in the lower left-hand corner of this report.

Please note that these metrics are updated each fiscal quarter with any new data submitted to CCRS, including data for historical fiscal years. CIHI advises RWPDP report users to save RWPDP reports in their secure network folders (associated with their organization) each fiscal quarter.

Please also note that there may be several pages in the report; you can access additional pages by scrolling to the bottom of the report and clicking on the linked page numbers in the lower left-hand corner.

Facility RWPD Report cover page — Facility summary

The first page of the Facility RWPD Report contains a summary of the facility's resident RWPD events for a specified time period. In the example in Figure 3, the reporting period includes all of fiscal year 2014–2015.

This page also provides information relating to the RWPD data, such as the RWPD time period covered. Each cell (1) through (20) shown in Figure 3 is described in Table 2.

Figure 3 Facility summary

Facility Code: 50001			CMI Fiscal Year:		2014	
Facility Name: CCRS Facility (fictitious test data)			RUG Methodology:		RUG-III (44-Group) Index Maximizing	
			Period Covered:		Apr. 1, 2014, to Mar. 31, 2015	
			RUG Weighted Patient Days			
	Patient Days (PD)	(1)	(RWPD)	(9)	CMI Value	(17)
Assessed on Time	1,454	(2)	1,087.6279	(10)		
Assessed Late	49	(3)	43.7160	(11)		
Assessed (Total)	1,503	(4)	1,131.3439	(12)	0.7527	(18)
Unassessed 13	25	(5)	18.8181	(13)		
Unassessed 14	38	(6)	14.6642	(14)		
Unassessed (Total)	63	(7)	33.4823	(15)		
Total	1,566	(8)	1,164.8262	(16)	0.7438	(19)
DISCHARGE ASSUMED NOTICE (20)						
WARNING: There is 1 resident that has been ASSUMED to be discharged from the facility.						

Table 2 Facility summary

Cell	Details
Patient Days (1)	<p>Each day that a resident is reported as staying in a facility counts as 1 patient day.</p> <p>When an assessment is associated with a period of care, the patient days are called assessed patient days. If there is no assessment covering the period, the patient days are considered unassessed.</p> <p>Considerations</p> <p>CCRS guidelines require that an admission assessment be completed within 14 days of admission. For ongoing periods of care, assessments must be completed at least every 92 days.</p>
Patient Days Assessed on Time (2)	<p>This is the total number of patient days that are associated with assessments for the reporting period. These patient days are covered by assessments that have been completed according to guidelines and have been successfully accepted into the CCRS database before the submission deadline.</p> <p>Patient Days Assessed on Time (2) = 1,454</p>
Patient Days Assessed Late (3)	<p>This is the total number of late patient days for the reporting period.</p> <p>These patient days are associated with an assessment; however, the assessment was not completed within the time frame required by CCRS guidelines:</p> <ul style="list-style-type: none"> • The initial admission assessment is due within 14 days of the entry date. • For ongoing periods of care, an assessment is due within 92 days of the prior assessment. <p>Patient Days Assessed Late (3) = 49</p> <p>Considerations</p> <p>If all assessments have been completed, submitted and successfully accepted into the CCRS database according to CCRS guidelines, this count should be 0.</p>
Patient Days Assessed (Total) (4)	<p>This is the sum of all patient days that are associated with an assessment (on time and late patient days).</p> <p>Patient Days Assessed (Total) (4) = Patient Days Assessed on Time (2) + Patient Days Assessed Late (3) = 1,454 + 49 = 1,503</p>

Cell	Details
Patient Days Unassessed 13 (5)	<p>This is the sum of patient days that could not be associated with an assessment where the episode of care was less than or equal to 13 days. This situation occurs when a resident is admitted to a facility for 13 days or less and does not receive an assessment.</p> <p>Patient Days Unassessed 13 (5) = 25</p> <p>Considerations</p> <p>Verify that this number represents unassessed short-stay residents for whom no assessment was completed.</p> <p>Review the resident RWPDP report and locate residents having unassessed 13 patient days (see Table 4, column M).</p>
Patient Days Unassessed 14 (6)	<p>This is the sum of patient days that could not be associated with an assessment where the episode of care was 14 days or more. This situation occurs when a resident is admitted to a facility for 14 days or more and does not have an assessment completed.</p> <p>Patient Days Unassessed 14 (6) = 38</p> <p>Considerations</p> <p>The ideal situation is to have patient days unassessed 14 equal to 0, which indicates completion of assessment and discharge records per CCRS guidelines.</p> <p>Review the resident RWPDP report and locate residents having unassessed 14 patient days (see Table 4, column N).</p>
Patient Days Unassessed (Total) (7)	<p>This is the total number of patient days that could not be associated with a RUG group.</p> <p>Patient Days Unassessed (Total) (7) = Patient Days Unassessed 13 (5) + Patient Days Unassessed 14 (6) = 25 + 38 = 63</p>
Patient Days (Total) (8)	<p>This is the total number of patient days for your facility within the reporting period. It includes both assessed and unassessed patient days for your facility.</p> <p>Patient Days (Total) (8) = Patient Days Assessed (Total) (4) + Patient Days Unassessed (Total) (7) = 1,503 + 63 = 1,566</p>
RUG Weighted Patient Day (RWPDP) (9)	<p>RWPDPs are patient days weighted using an appropriate cost weight.</p> <p>Assessed patient days are weighted using the CMI for the RUG group associated with each patient day.</p> <p>Unassessed 13 patient days are weighted using the facility-assessed CMI value, while unassessed 14 patient days are weighted using the lowest CMI value.</p>
RWPDP Assessed on Time (10)	<p>This is the sum of all weighted patient days for RWPDP events assessed on time (see cell 2).</p> <p>RWPDP Assessed on Time (10) = 1,087.6279</p>
RWPDP Assessed Late (11)	<p>This is the sum of all weighted patient days for RWPDP events assessed late (see cell 3).</p> <p>RWPDP Assessed Late (11) = 43.7160</p>

Cell	Details
RWPD Assessed (Total) (12)	<p>This is the sum of RWPDs for assessed patient days (see Table 4, column L).</p> $\text{RWPD Assessed (Total) (12)} = \text{RWPD Assessed on Time (10)} + \text{RWPD Assessed Late (11)} = 1,087.6279 + 43.7160 = 1,131.3439$
RWPD Unassessed 13 (13)	<p>This is the sum of RWPDs for unassessed patient days from episodes of less than or equal to 13 patient days (see Table 4, column M).</p> <p>See Table 4, column M for information on how these unassessed patient days are weighted.</p> $\text{RWPD Unassessed 13 (13)} = 18.8181$
RWPD Unassessed 14 (14)	<p>This is the sum of RWPDs for unassessed patient days from episodes of 14 or more patient days (see Table 4, column N for information on how these unassessed patient days are weighted).</p> $\text{RWPD Unassessed 14 (14)} = 14.6642$
RWPD Unassessed (Total) (15)	<p>This is the sum of all weighted unassessed 13 (cell 13) and unassessed 14 (cell 14) patient days that were not associated with an assessment.</p> $\text{RWPD Unassessed (Total) (15)} = \text{RWPD Unassessed 13 (13)} + \text{RWPD Unassessed 14 (14)} = 18.8181 + 14.6642 = 33.4823$
RWPD (Total) (16)	<p>This is the total RWPDs for your facility.</p> <p>It includes patient days associated with a RUG group (assessed) and those patient days that were not associated with a RUG group (unassessed).</p> $\text{RWPD (Total) (16)} = \text{RWPD Assessed (Total) (12)} + \text{RWPD Unassessed (Total) (15)} = 1,131.3439 + 33.4823 = 1,164.8262$
CMI Value (17)	<p>The CMI is defined for each facility based on the patient days and RWPD values. See cells 18 and 19 below.</p>
CMI Value Assessed (Total) (18)	<p>The facility-assessed CMI is the facility-assessed RWPDs divided by the total patient days assessed. This CMI covers assessed periods of care only.</p> $\text{CMI Value Assessed (Total) (18)} = \text{RWPD Assessed (Total) (12)} \div \text{Patient Days Assessed (Total) (4)} = 1,131.3439 \div 1,503 = 0.7527$ <p>Considerations</p> <p>The facility-assessed CMI for your facility gives an indication of the relative complexity of residents. For Ontario CCC facilities, the average assessed resident has a CMI of 1.0000.</p>

Cell	Details
CMI Value (Total) (19)	<p>The facility total CMI is the facility total RWPDs divided by the facility total patient days. This CMI covers assessed and unassessed periods of care.</p> <p>CMI Value (Total) (19) = RWPD (Total) (16) ÷ Patient Days (Total) (8) = 1,164.8262 ÷ 1,566 = 0.7438</p> <p>Considerations</p> <p>The facility total CMI for your facility gives an indication of the relative complexity of residents.</p>
Discharge Assumed Notice (20)	<p>This note is generated only if there is at least one discharge assumed for missing assessment/discharge events within the resident RWPD report. These events are created when data was expected by CIHI but was not received; either the resident was discharged but a discharge record was not submitted and accepted successfully, or the resident is still in the facility but an assessment was missed.</p> <p>Considerations</p> <p>If the count is not 0, review the resident RWPD report for discharge assumed events (see Table 5).</p>

Facility RWPD Report — Resident details

The pages following the Facility RWPD Report cover page contain details of RWPD events for each resident in the facility during the reporting period. Each column [A] through [N] shown in Table 3 is described in Table 4. Additional information for Event [E] is contained in Table 5.

Table 3 Resident events for Facility 50001 (see Appendix 1)

RWPD Report Period: April 1, 2012, to March 31, 2013

Health Record Number [A]	URI [B]	Date of Entry [C]	Discharge Date [D]	Event [E]	RUG Weighting Period Start Date [F]	RUG Weighting Period End Date [G]	Patient Days [H]	Associated Assessment Date [I]	RUG [J]	CMI [K]	RWPD Assessed [L]	RWPD Unassessed 13 [M]	RWPD Unassessed 14 [N]
Ex. 1	—	Apr. 26	Aug. 26	Admission	Apr. 26	May 10	14	May 10	RUC	—	—	—	—
		—	—	Admission Assessment	May 10	Aug. 10	92	May 10	RUC	—	—	—	—
		—	—	Quarterly Assessment	Aug. 10	Aug. 24	14	Aug. 10	RVB	—	—	—	—
		—	—	Significant Change in Status	Aug. 24	Aug. 26	2	Aug. 24	RMA	—	—	—	—
		—	—	Discharge	Aug. 26	—	—	—	—	—	—	—	—
		—	—	Total	—	—	122	—	—	—	—	—	—
Ex. 2	—	Jan. 4	Jan. 17	Admission	Jan. 4	Jan. 17	13	—	—	—	—	—	—
		—	—	Discharge	Jan. 17	—	—	—	—	—	—	—	—
		—	—	Total	—	—	—	—	—	—	—	—	—
Ex. 3	—	Aug. 7	Aug. 31	Admission	Aug. 7	Aug. 31	24	—	—	—	—	—	—
		—	—	Discharge	Aug. 31	—	—	—	—	—	—	—	—
		—	—	Total	—	—	—	—	—	—	—	—	—

Table 4 Resident events

Column	Details
Health Record Number [A]	This is a unique resident identifier assigned by the facility that remains unchanged over time, including over multiple admissions, re-entries and discharges. The number is included in reports so RWPD data can be matched to a specific resident.
Unique Registration Identifier (URI) [B]	The URI uniquely identifies a resident admission, beginning with the admission full assessment. If a resident is discharged from the facility and re-enters prior to his or her next scheduled assessment, the URI remains unchanged. This number is included in the report so facilities can match the RWPD data included in the report to a specific resident.
Date of Entry [C]	This is the date on which a resident was admitted to or re-entered a facility.
Discharge Date [D]	<p>This is the date on which a resident was discharged from a facility.</p> <p>Considerations</p> <p>Ensure that discharge dates are correct and that a discharge record has been successfully submitted to CCRS for each resident who has been discharged from the facility.</p> <ul style="list-style-type: none"> For ongoing periods of care, the discharge date is left blank until a discharge record is completed.
Event [E]	<p>Each line in the resident RWPD report has an associated event description identifying the nature of the event that occurred during the resident's stay. See Table 5 for more information about each of these RWPD events.</p> <p>The following RWPD events may be created within the RWPD process:</p> <ul style="list-style-type: none"> Admission Assessment (late) Discharge assumed for missing assessment/discharge Discharge prior to completing initial assessment Discharge: return anticipated Discharge: return not anticipated Full or annual assessment Admission assessment Quarterly assessment Re-entry Significant change in status Start of fiscal year

Column	Details
RUG Weighting Period Start Date [F]	<p>This date marks the start of the period covered by the RWPD event.</p> <p>The RUG weighting period start date [F] is the</p> <ul style="list-style-type: none"> • Date of entry [C] for admissions or re-entry events; • Discharge date [D] for discharge events; and • Associated assessment date [I] for assessment events. <p>For late assessment events, the RUG weighting period start date [F] is the first date that patient days are considered late:</p> <ul style="list-style-type: none"> • 14 days after the date of entry [C]; and • 92 days after the associated assessment date [I] of the prior assessment.
RUG Weighting Period End Date [G]	<p>This date marks the end of the period covered by the RWPD event.</p> <p>RWPD reporting periods and RUG weighting period end date [G]</p> <p>If the resident continues to have resident status at the end of the RWPD reporting period (she or he has not been discharged from the facility), the RUG weighting period end date will be set as the day after the RWPD reporting period.</p> <p>For example, for Q2 RWPD reports, the RWPD reporting period is April 1 through September 30. If the RWPD event continues into Q3, the RUG weighting period end date will be set to October 1 for the Q2 RWPD report.</p> <p>Considerations</p> <p>This field is blank for discharge events.</p>

Column	Details
Patient Days [H]	<p>This is the number of patient days covered by the RWPD event.</p> <p>When counting patient days, the first day of the RWPD event is counted but the last day is not. For example, an RWPD event covering Monday through Friday will have 4 patient days (Monday, Tuesday, Wednesday and Thursday are counted; Friday is not).</p> <p>In most cases</p> <p>Patient Days [H] = RUG Weighting Period End Date [G] – RUG Weighting Period Start Date [F]</p> <p>Special case: patient days = 0</p> <ul style="list-style-type: none"> When an assessment is updated using a significant correction assessment, the RWPD event for the original assessment will be assigned 0 patient days. The significant correction assessment must have the same assessment reference date as the original assessment. When an assessment reference date is the same as the discharge date, the patient days for that assessment event will be set to 0. <p>Special case: patient days = 1</p> <p>For the following situations, when the patient days [H] derivation is 0, the patient days value is assigned a value of 1:</p> <ul style="list-style-type: none"> There is a same-day admit and discharge. There is a same-day re-entry and discharge. There is a same-day admit and assessment and discharge. <p>Considerations</p> <p>For discharge events, the patient days [H] is blank.</p>
Associated Assessment Date [I]	<p>This is the assessment reference date from the RAI-MDS assessment associated with the RWPD event.</p> <p>Considerations</p> <p>For unassessed episodes, the associated assessment date [I] is blank.</p>
RUG [J]	<p>The RUG [J] is</p> <ul style="list-style-type: none"> The RUG-III (44-group) value assigned to the assessment associated with the RWPD event. Note that RUG-III (34-group) values are applied to Ontario LTC facilities. Blank for discharge events. Blank for admission events (when no assessment is completed for the episodes). Blank for an admission event where there is an admission adjustment. <p>Considerations</p> <p>For each RUG group, there is a related cost weight that is used to weight patient days (see CMI [K] below).</p> <p>For unassessed periods of care, the RUG [J] is blank. See RWPD unassessed 13 [M] and RWPD unassessed 14 [N] below.</p>

Column	Details
CMI [K]	<p>The CMI is a measure of resource use by a resident within 1 RUG group relative to the average resident.</p> <p>For most RWPDP events, the CMI [K] value is obtained using the RUG [J] and the associated CMI value for that group within the reporting fiscal year.</p> <p>Considerations</p> <p>For discharge events, the CMI [K] is blank.</p>
RWPDP Assessed [L]	<p>For each resident, an RWPDP value is calculated for each RWPDP event with an associated assessment date.</p> <p>The RWPDP value for assessed events is equal to the number of patient days for the event multiplied by the CMI for the RUG group that corresponds to the assessment for the event.</p> <p>$\text{RWPDP Assessed [L]} = \text{Patient Days [H]} \times \text{CMI [K]}$</p>
RWPDP Unassessed 13 [M]	<p>If the resident is discharged prior to the completion of an assessment and the discharge was within 14 days of admission, the episode is referred to as unassessed 13.</p> <p>The RWPDP for these episodes is calculated using the facility-assessed CMI (cell 18) (see Table 2, cell 18) and the number of patient days for the event patient days [H] (see Table 4).</p> <p>$\text{RWPDP Unassessed 13 [M]} = \text{Patient Days [H]} \times \text{CMI Value Assessed (Total) (18)}$</p>
RWPDP Unassessed 14 [N]	<p>If the resident is discharged prior to the completion of an assessment 14 days or more after admission, the episode is referred to as unassessed 14.</p> <p>The RWPDP for these episodes is calculated using the lowest CMI for the fiscal year and the number of patient days for the event patient days [H].</p> <p>$\text{RWPDP Unassessed 14 [N]} = \text{Patient Days [H]} \times \text{Lowest CMI}$</p>

The events created within the RWPD process are described in Table 5 below.

Events directly related to assessments are described first:

- Initial admission assessment
- Full or annual assessment
- Significant change in status assessment
- Quarterly assessment

These are followed by a description of the non-assessment events:

- Admission
- Assessment (late)
- Discharge assumed for missing assessment/discharge
- Discharge prior to completing initial assessment
- Discharge: return anticipated
- Discharge: return not anticipated
- Re-entry
- Start of fiscal year

An event is produced for each assessment completed for the resident with an assessment reference date within the RWPD reporting period. The AA8 value (reason for assessment) is used to determine the type of event.

For full assessments

- **Admission assessment** (full assessment form AA8 = 01)
- **Full annual assessment** (full assessment form AA8 = 02)
- **Significant change in status assessment** (full assessment form AA8 = 03)

For quarterly assessments

- **Quarterly review assessment** (quarterly assessment form AA8 = 05)

Considerations

The **RUG weighting period start date [F]** and **associated assessment date [I]** for these events are the assessment reference date.

The **RUG weighting period end date [G]** is

- The date of the next assessment (if the next assessment occurs within the RWPD reporting period);
- The discharge date (if the discharge occurs within the RWPD reporting period);
- The RWPD reporting period end date (if the next assessment or discharge occurs after the RWPD reporting period); or
- The RWPD reporting period end date (for all other assessment events not described above).

RUG [J] and **CMI [K]** are assigned based on the RUG-III (44-group) grouping methodology. The RUG-III (34-group) methodology is applied to Ontario LTC data.

RWPD assessed [L] is the weighted patient days value for the event (**patient days [H]** × **CMI [K]**).

Table 5 Event [E] description and related RWPDP details

Event	Description
Admission	<p>Admission events are created to mark the start of a period of care. Information about the admission is submitted to CCRS using the CCRS admission/re-entry record.</p> <p>The admission event may be for an assessed or unassessed period of care. For assessed periods of care, the admission event is weighted using information from the admission assessment.</p> <p>Considerations</p> <p>The RUG weighting period start date [F] for these events is the admission/re-entry date (AB1). The RUG weighting period end date [G] is</p> <ul style="list-style-type: none"> • The date of the first assessment (if the first assessment occurs within the RWPDP reporting period); • The date of an assessment (late) event; • The date of the discharge (if the discharge occurs within the RWPDP reporting period); or • The RWPDP reporting period end date (if the first assessment or discharge occurs after the RWPDP reporting period). <p>Patient days [H] is the number of patient days since admission within the current fiscal year.</p> <p>If the period of care is assessed (an assessment is associated with the admission),</p> <ul style="list-style-type: none"> • The associated assessment date [I], RUG [J] and CMI [K] columns will report values taken from the admission assessment; and • RWPD assessed [L] = patient days [H] × CMI [K]. <p>The RWPD unassessed 13 [M] and RWPD unassessed 14 [N] values will be blank for assessed periods.</p> <p>If the period of care is unassessed and the episode (admission to discharge) covers 13 patient days or less,</p> <ul style="list-style-type: none"> • CMI [K] = CMI value assessed (total) (18); and • RWPD unassessed 13 [M] = patient days [H] × CMI [K]. <p>The associated assessment date [I], RUG [J], RWPD assessed [L] and RWPD unassessed 14 [N] columns are blank.</p> <p>If the period of care is unassessed and the episode (admission to discharge) covers 14 patient days or more,</p> <ul style="list-style-type: none"> • CMI [K] = lowest CMI; and • RWPD unassessed 14 [N] = patient days [H] × CMI [K]. <p>The associated assessment date [I], RUG [J], RWPD assessed [L] and RWPD unassessed 13 [M] columns are blank.</p>

Event	Description
Assessment (late)	<p>Late patient days (LATE PD) are counted for data quality purposes and refer to patient days for which an assessment was not completed according to CCRS guidelines.</p> <ul style="list-style-type: none"> • The initial admission assessment is due within 14 days of the entry date. • For ongoing periods of care, an assessment is due within 92 days of the prior assessment. <p>Assessment (late) events are created to cover patient days for which the assessment is late.</p> <p>Considerations</p> <p>Often, assessments are completed by the facility but are not successfully submitted to CCRS. In these cases, there will be a large number of late patient days. Check the facility data for a completed assessment and determine whether it was completed; if the assessment was not successfully submitted to CCRS, determine the reason and take the appropriate action.</p> <p>The RUG weighting period start date [F] for these events is</p> <ul style="list-style-type: none"> • 14 days after the admission date if the assessment (late) is for an initial admission assessment; or • 92 days after the assessment reference date of the most recent assessment if the assessment (late) is for an ongoing period of care. <p>The RUG weighting period end date [G] is</p> <ul style="list-style-type: none"> • The date of the next assessment (if the next assessment occurs within the RWPD reporting period); • The RWPD reporting period end date (if the next assessment occurs after the RWPD reporting period); • The discharge date (if the discharge occurs within the RWPD reporting period); or • The RWPD reporting period end date (if the next assessment has not been completed).

Event	Description
Discharge assumed for missing assessment/discharge	<p>These events indicate that data was expected by CIHI but was not successfully submitted — either a discharge record for a discharged resident or an assessment for a resident still in the facility. For this event, at least one full reporting period would have passed without an assessment or a discharge being successfully submitted.</p> <p>For the purpose of RWPD reporting, discharges are assumed to occur on the first day of the quarter following the last quarter in which data was submitted. This assumed discharge date is used only within this report. It is not added to the CCRS database.</p> <p>Considerations</p> <p>Review the information for residents who have a discharge assumed event.</p> <p>For residents who have not been discharged</p> <ul style="list-style-type: none"> • If an assessment was completed within the reporting period, submit it to CCRS. • If an assessment is missing, complete and submit it. <p>For residents who have been discharged</p> <ul style="list-style-type: none"> • Submit a discharge record with the correct discharge date. <p>The discharge date [D] is blank for discharge assumed events.</p> <p>The RUG weighting period start date [F] for these events is the first day of the quarter following the last quarter in which data was submitted.</p> <p>The RUG weighting period end date [G] is blank for discharge assumed events.</p>
Discharge prior to completing initial assessment Discharge: return anticipated Discharge: return not anticipated	<p>Discharge events are created to mark the end of a period of care. Information about the discharge is submitted to CCRS using the CCRS discharge record.</p> <p>The name of the discharge event is based solely on the AA9 value reported on the discharge record.</p> <ul style="list-style-type: none"> • Discharge: return not anticipated (discharge form AA9 = 06) • Discharge: return anticipated (discharge form AA9 = 07) • Discharge prior to completing initial assessment (discharge form AA9 = 08) <p>Considerations</p> <p>A value of AA9 = 08 should not be reported if the initial assessment has been completed.</p> <p>The discharge date [D] for these events is the discharge date (discharge form R4).</p> <p>The RUG weighting period start date [F] for these events is the discharge date (discharge form R4).</p> <p>The RUG weighting period end date [G] is blank for discharge events.</p>

Event	Description
Re-entry	<p>Re-entry events are created to mark the continuation of a period of care interrupted by a resident's earlier discharge from the facility. Information about the re-entry is submitted to CCRS using the CCRS admission/re-entry form.</p> <p>The RUG group and associated CMI value from the most recent assessment prior to discharge are used to weight patient days for these events.</p> <p>Considerations</p> <p>The RUG weighting period start date [F] for these events is the re-entry date on the admission/re-entry form (AB1).</p> <p>The RUG weighting period end date [G] is</p> <ul style="list-style-type: none"> • The date of the next assessment (if the next assessment occurs within the RWPD reporting period); • The date of the next discharge (if the next discharge occurs within the RWPD reporting period); • The RWPD reporting period end date (if the next assessment or discharge occurs after the RWPD reporting period); or • The RWPD reporting period end date (for all other re-entry events not described above).
Start of fiscal year	<p>A start of fiscal year event identifies an ongoing period of care (there has not been a discharge) that started in the prior fiscal year and continues into the new fiscal year. Only the patient days within the current RWPD reporting period are counted within the current report. The event may be for an assessed or unassessed period of care.</p> <p>Considerations</p> <p>The RUG weighting period start date [F] for these events is the start of the RWPD reporting period; for 2014–2015, this is April 1, 2014.</p> <p>The RUG weighting period end date [G] is</p> <ul style="list-style-type: none"> • The date of the next assessment (if the next assessment occurs within the RWPD reporting period); • The date of the next discharge (if the next discharge occurs within the RWPD reporting period); • The RWPD reporting period end date (if the next assessment or discharge occurs after the RWPD reporting period); or • The RWPD reporting period end date (for all other start of fiscal year events). <p>Patient days [H] is the number of patient days within the current fiscal year.</p> <p>If the period of care is assessed (an assessment is associated with the event),</p> <ul style="list-style-type: none"> • The associated assessment date [I], RUG [J] and CMI [K] columns will report values taken from the assessment; and • RWPD assessed [L] = patient days [H] × CMI [K].

Event	Description
Start of fiscal year (cont'd)	<p>The RWPD unassessed 13 [M] and RWPD unassessed 14 [N] values will be blank for assessed periods.</p> <p>If the period of care is unassessed and the episode (admission to discharge) covers 13 patient days or less,</p> <ul style="list-style-type: none"> • CMI [K] = CMI value assessed (total) (18); and • RWPD unassessed 13 [M] = patient days [H] × CMI [K]. <p>The associated assessment date [I], RUG [J], RWPD assessed [L] and RWPD unassessed 14 [N] columns are blank.</p> <p>If the period of care is unassessed and the episode (admission to discharge) covers 14 patient days or more,</p> <ul style="list-style-type: none"> • CMI [K] = lowest CMI; and • RWPD unassessed 14 [N] = patient days [H] × CMI [K]. <p>The associated assessment date [I], RUG [J], RWPD assessed [L] and RWPD unassessed 13 [M] columns are blank.</p>

Comparative RWPD Reports

Please see Appendix 2 for an example of a Comparative RWPD Report using fictitious data.

In the Comparative RWPD Report, you may select 1 fiscal year to display your report results by. Once the results are displayed, you may be able to choose from 4 further selections at the top of the report:

CMI Fiscal Year: This gives you the option to modify the Case Mix Index (CMI) values assigned to the RUGs for assessments in the facility displayed in the report. This option defaults to the CMI fiscal year associated with the fiscal year originally selected. A subsequent fiscal year can be selected instead so that the CMI assignment will be made using the CMI values associated with that fiscal year. For example, if fiscal year 2013–2014 is selected before the results are displayed, the report will, by default, use the CMI values associated with 2013–2014. Changing the CMI Fiscal Year value to 2014 will then display results using the CMI values associated with 2014–2015. Please note that CMI values are updated and released each January. For example, the CMI values for 2015–2016 will be available after January 2015.

Region: This gives you the option to modify the report to display results for a particular region in a given jurisdiction. This value defaults to “Total,” meaning all regions within a jurisdiction are displayed when the report is first run.

Sector: This gives you the option to display results for the hospital-based or residential sector for Ontario, if you have access to this jurisdiction for Comparative RWPD Reports. You may also select “Total” to display both sectors simultaneously.

RUG Methodology: Much like the sector prompt, this gives you the option to display results for either the hospital-based or residential sector for Ontario, if you have access to this jurisdiction for Comparative RWPD Reports. You can display results for the hospital-based sector in Ontario by selecting the option “RUG-III (44-Group) IM,” which means groups are assigned using the RUG-III (44-group) index-maximizing approach. To display results for the Ontario residential care sector, you can select the option “RUG-III (34-Group) IM,” which means groups are assigned using the RUG-III (34-group) index-maximizing approach. Please note that if you select “Total” for the sector prompt, either the “RUG-III (44-Group) IM” option or the “RUG-III (34-Group) IM” option will be displayed.

There are several RWPD metrics in this report:

- PD Total: Refers to the total patient days.
- PD Unass’d: Refers to the total patient days associated with unassessed residents.
- PD Unass’d 13: Refers to the total unassessed patient days where the residents were discharged after staying 13 days or less.
- PD Unass’d 14: Refers to the total unassessed patient days where the residents were discharged after staying 14 days or more.
- PD Assessed: Refers to the total assessed patient days.
- RUG Ass’d Wt’d PD: Refers to the RWPDs for all assessed patient days.
- Facility CMI RUG Ass’d: Refers to the CMI value for assessed patient days.
- RUG Wt’d PD (RWPD): Refers to the RUG weighted patient days for all patient days.
- Facility CMI: Refers to the CMI value for all patient days.

The date the report was extracted is also displayed in the lower left-hand corner of this report.

Please note that these metrics are updated each fiscal quarter with any new data submitted to CCRS, including data for historical fiscal years. CIHI advises RWPD report users to save RWPD reports in their secure network folders (associated with their organization) each fiscal quarter.

Trending RWPD Reports

Please see Appendix 3 for an example of a Trending RWPD Report using fictitious data.

When creating your Trending RWPD Report, you have the option to identify which organization level you would like to use:

Facility: Allows you to select a specific facility in the province or territory for which you have access.

Corporation: Allows you to select a specific corporation in the province or territory for which you have access. You will then be able to view the facilities associated within that corporation for which you have access.

Region: Allows you to select a specific health region in the province or territory for which you have access. You will then be able to view the facilities associated within that region for which you have access.

Ministry: Allows you to select a specific province or territory for which you have access. You will then be able to view the facilities associated within that province or territory for which you have access.

The Trending RWPD Report is organized into 3 sections, with facility-identifying information located on the upper left-hand side of the report. Any 1 or all 3 sections of the report can be displayed:

Section A contains summary information regarding the facility RWPD metrics over the past 5 fiscal years using the upcoming or current fiscal year's CMI values. These metrics are created using Option 1, which means that late patient days are weighted using the fiscal year– and RUG group–specific CMI value (as opposed to Option 2, in which late patient days are weighted using the lowest CMI value). See pages 3 and 4 of the *CCRS Technical Document for RWPD Methodology 2014–2015* located in the Resources section of CCRS eReports for more information regarding Option 1 and Option 2.

Section B contains summary information regarding the facility RWPD metrics over the past 5 fiscal years using the last fiscal year's CMI values. These metrics are also created using Option 1.

Section C contains summary information regarding the facility RWPD metrics over the past few fiscal years using the CMI values associated with each fiscal year.

Once the results of your Trending RWPDP Report are displayed, you may be able to choose from 2 further selections at the top of the report:

Facility: This gives you the option to select a specific facility within the jurisdiction that you have access to. By default, the first facility in the alphabetized list of facilities for that jurisdiction will be displayed.

CMI: This gives you the option to display specific sections of the Trending RWPDP Report using different CMI values.

- If you select “Current Fiscal Year,” you will see only Section A, which displays the facility results using the CMI values for the current fiscal year relative to the fiscal year originally selected before the report was run.
- If you select “Last Fiscal Year,” you will see only Section B, which displays the facility results using the CMI values for the last fiscal year relative to the fiscal year originally selected before the report was run.
- If you select “RWPDP Event Year,” you will see only Section C, which displays the facility results using the CMI values for the respective fiscal years for each year displayed.

By default, all 3 sections will be displayed when you select the option “(All).”

All 3 sections of the Trending RWPDP Report contain the same metrics for the facility and each fiscal year:

- Total PD: Refers to the total patient days.
- Total Unassessed PD: Refers to the total patient days associated with unassessed residents.
- Total Unassessed 13 PD: Refers to the total unassessed patient days where the residents were discharged after staying 13 days or less.
- Total Unassessed 14 PD: Refers to the total unassessed patient days where the residents were discharged after staying 14 days or more.
- CMI Used: Refers to the fiscal year CMI value used.
- Facility-Assessed RWPDP: Refers to the RUG weighted patient days for assessed patient days.
- Facility-Assessed CMI: Refers to the CMI value for assessed patient days.

- Overall Assessed CMI: Refers to the CMI value for assessed patient days for the jurisdiction the facility belongs to. In Ontario, this value is further broken down by sector (Ontario LTC facilities see the overall assessed CMI value for all Ontario LTC facilities, while Ontario CCC facilities see the overall assessed CMI value for Ontario CCC facilities).
- Facility Total RWPD: Refers to the RUG weighted patient days for all patient days.
- Facility Total CMI: Refers to the CMI value for all patient days.
- Overall Total CMI: Refers to the CMI value for all patient days for the jurisdiction the facility belongs to. For example, the trending report for an Alberta facility would show the overall CMI value for all patient days in Alberta facilities. In Ontario, this value is further broken down by sector (Ontario LTC facilities see the overall total CMI value for all Ontario LTC facilities, while Ontario CCC facilities see the overall total CMI value for Ontario CCC facilities).

The date the report was extracted is also displayed in the lower left-hand corner of this report.

Please note that these metrics are updated each fiscal quarter with any new data submitted to CCRS, including data for historical fiscal years. CIHI advises RWPD report users to save RWPD reports in their secure network folders (associated with their organization) each fiscal quarter.

Appendix 1: Example of a 2010–2011 Facility RWPD Report (fictitious data)

Facility RWPD Report

Home ▾ Tools ▾ Data ▾

GROUPING: Facility: 50001 CMI Fiscal Year: 2010 RUG Methodology: RUG-III (44-Group) IM Health Record Number: (All) URI: (All) Date of Entry: (All)

Continuing Care Reporting System – Facility RWPD Report

Fiscal Year: 2010-2011 Facility Number: 50001 Facility Name:

Facility Number: 50001 CMI Fiscal Year: 2010
Facility Name: RUG Methodology: RUG-III (44-Group) IM
Period Covered: April 1, 2010 to March 31, 2011


	Patient Days (PD)	RUG Weighted Patient Days (RWPD)	CMI Value
Assessed On Time	94	47.5450	
Assessed Late	0	0.0000	
Assessed (Total)	94	47.5450	0.5058
Unassessed 13	0	0.0000	
Unassessed 14	0	0.0000	
Unassessed (Total)	0	0.0000	
Total	94	47.5450	0.5058

DISCHARGE ASSUMED NOTICE
WARNING: There is 0 resident that has been ASSUMED to be discharged from the facility

Continuing Care Reporting System: Interpreting RUG Weighted Patient Day Reports

Facility RWPD Report													
Home Tools Data													
GROUPING: Facility: 50001 CMG Fiscal Year: 2010 RUG Methodology: RUG-III (44-Group) IM Health Record Number: (All) URI: (All) Date of Entry: (All)													
Health Record Number	URI	Date of Entry	Discharge Date	Event	- RUG Weighting Period -		Patient Days	Associated Assess Date	RUG	CM	RWPD Assessed	RWPD Unass'd 13	RWPD Unass'd 14
Example 01	50001201004260000001	4/26/2010	5/26/2010	Discharge: return not anticipated	4/26/2010	5/26/2010	0		NA		0.0000	0.0000	0.0000
				URI Total			0				0.0000	0.0000	0.0000
				Health Record Number Total			0				0.0000	0.0000	0.0000
Example 04	50001201008070000004	5/7/2010	5/31/2010	Discharge: return not anticipated	5/7/2010	5/31/2010	0		NA		0.0000	0.0000	0.0000
				URI Total			0				0.0000	0.0000	0.0000
				Health Record Number Total			0				0.0000	0.0000	0.0000
Example 05	50001201006020000005	5/2/2010	7/9/2010	Discharge: return anticipated	5/2/2010	7/9/2010	0		NA		0.0000	0.0000	0.0000
				URI Total			0				0.0000	0.0000	0.0000
Example 05	50001201006020000005	7/26/2010	8/7/2010	Re-Entry	7/26/2010	8/7/2010	12	5/15/2010	RUA	1.2415	14.8980		
				Discharge: return not anticipated	8/7/2010	8/7/2010	12		NA		14.8980	0.0000	0.0000
				URI Total			12				14.8980	0.0000	0.0000
				Health Record Number Total			12				14.8980	0.0000	0.0000
Example 06	50001201006020000006	5/2/2010	7/9/2010	Discharge: return not anticipated	5/2/2010	7/9/2010	0		NA		0.0000	0.0000	0.0000
				URI Total			0				0.0000	0.0000	0.0000
Example 06	50001201007260000006	7/26/2010	8/7/2010	Discharge: return not anticipated	7/26/2010	8/7/2010	0		NA		0.0000	0.0000	0.0000
				URI Total			0				0.0000	0.0000	0.0000
				Health Record Number Total			0				0.0000	0.0000	0.0000
Example 07	50001201004030000007	4/3/2010	12/7/2010	Discharge: return anticipated	4/3/2010	12/7/2010	0		NA		0.0000	0.0000	0.0000
				URI Total			0				0.0000	0.0000	0.0000
				Health Record Number Total			0				0.0000	0.0000	0.0000
Example 08	50001201004040000008	4/4/2010	5/7/2010	Discharge: return anticipated	4/4/2010	5/7/2010	0		NA		0.0000	0.0000	0.0000
				URI Total			0				0.0000	0.0000	0.0000
Example 08	50001201004040000008	5/31/2010	5/31/2010	Re-Entry	5/31/2010	5/31/2010	1	4/18/2010	RMC	1.3324	1.3324		
				Discharge: return not anticipated	5/31/2010	5/31/2010	1		NA		1.3324	0.0000	0.0000
				URI Total			1				1.3324	0.0000	0.0000
				Health Record Number Total			1				1.3324	0.0000	0.0000
Example 11	50001201003070000011	3/7/2010	5/31/2011	Start of fiscal year	4/1/2010	6/21/2010	81	3/21/2010	PA1	0.3886	31.3146		
				URI Total			81				31.3146	0.0000	0.0000
				Health Record Number Total			81				31.3146	0.0000	0.0000
Facility Total							94				47.5450	0.0000	0.0000
End of Report													

Appendix 2: Example of a 2014–2015 Comparative RWPD Report (fictitious data)

 **Canadian Institute for Health Information**
Better Data. Better Decisions. Healthier Canadians.

[Continuing Care Reporting System \(CCRS\)](#) > [Shared Reports](#) > [RWPD Reports](#) > Comparative RWPD Report

DOCUMENT HOME TOOLS DATA


GROUPING: CHI Fiscal Year: 2014 Region: Total Sector: Hospital-based RUG Methodology: RUG-III (44-Group) IM

Continuing Care Reporting System - Comparative RWPD Report

Province: Ontario Methodology: RUG-III (44-Group) IM
Fiscal Year: 2014-2015 Period Covered: April 1, 2014 to March 31, 2015

Facility Number	Facility Name	PD Total	PD Unass'd	PD Unass'd 13	PD Unass'd 14	PD Assessed	RUG Ass'd Wt'd PD	Facility CMI RUG Ass'd	RUG Wt'd PD (RWPD)	Facility CMI
99999	Ontario Facility A	1,671	1	1	0	1,670	1,300.5046	0.7787	1,301	0.7787
99969	Ontario Facility W	8,441	225	39	186	8,216	6,931.8159	0.8437	7,036	0.8335
99970	Ontario Facility X	3,763	76	26	50	3,687	2,254.0141	0.6113	2,289	0.6083
99971	Ontario Facility Y	2,627	439	262	177	2,188	1,496.0087	0.6837	1,743	0.6634
99972	Ontario Facility ZZ	2,410	29	0	29	2,381	1,807.3185	0.7591	1,818	0.7545
99973	Ontario Facility C	67,230	595	595	0	66,635	73,495.9798	1.1030	74,152	1.1030
99974	Ontario Facility YY	1,540	6	6	0	1,534	986.9311	0.6434	991	0.6434
99975	Ontario Facility YYZ	3,646	0	0	0	3,646	2,399.6699	0.6582	2,400	0.6582
99976	Ontario Facility M	21,333	163	163	0	21,170	19,210.7506	0.9075	19,359	0.9075
99977	Ontario Facility N	11,652	619	619	0	11,033	11,333.9185	1.0273	11,970	1.0273
99978	Ontario Facility Q	15,768	1,198	1,198	0	14,570	14,846.2563	1.0190	16,067	1.0190
99979	Ontario Facility R	60,734	916	916	0	59,818	68,483.2462	1.1449	69,532	1.1449
99980	Ontario Facility G	48,041	19	19	0	48,022	53,407.6967	1.1122	53,429	1.1122
99981	Ontario Facility B	14,133	960	882	78	13,173	11,375.3779	0.8635	12,167	0.8609
99982	Ontario Facility H	5,606	100	100	0	5,506	4,972.4610	0.9031	5,063	0.9031
99983	Ontario Facility K	507	13	13	0	494	445.4400	0.9017	457	0.9017
99984	Ontario Facility V	3,212	0	0	0	3,212	3,515.2629	1.0944	3,515	1.0944
99985	Ontario Facility TT	716	0	0	0	716	443.7744	0.6198	444	0.6198
99986	Ontario Facility S	1,267	37	37	0	1,230	877.4529	0.7134	904	0.7134

Appendix 3: Example of a 2014–2015 Trending RWPD Report (fictitious data)

 **Canadian Institute for Health Information**
Better Data. Better Decisions. Healthier Canadians.

Continuing Care Reporting System (CCRS) > Shared Reports > RWPD Reports > Trending RWPD Report

DOCUMENT HOME TOOLS DATA

GROUPING: Facility: Facility A (99999) CMI: (All)

**Continuing Care Reporting System (CCRS)
Trending RWPD Report**

Facility Number: 99999
Facility Name:

Section A - CMI: Current Fiscal Year Facility Patient Day (PD) and RUG Weighted Patient Day (RWPD) totals - weighted using CMI-2016 Values and RWPD Option 1.

Facility Number	Fiscal Year	Patient Day (PD) information					CMI Used	Assessed RWPD information			Total RWPD information		
		Total PD	Total Unassessed PD	Total Unassessed 13 PD	Total Unassessed 14 PD	Total Assessed PD		Facility Assessed RWPD	Facility Assessed CMI	Overall Assessed CMI	Facility Total RWPD	Facility Total CMI	Overall Total CMI
99999	2011-2012	70,145	1,053	1,053	0	69,092	CMI-2016	75,032.7	1.0860	0.9599	76,176.2	1.0860	0.9581
99999	2012-2013	71,168	894	894	0	70,274	CMI-2016	75,769.8	1.0782	0.9690	76,733.7	1.0782	0.9669
99999	2013-2014	68,878	717	717	0	68,161	CMI-2016	72,021.9	1.0566	0.9820	72,779.5	1.0566	0.9811
99999	2014-2015	67,230	595	595	0	66,635	CMI-2016	71,396.1	1.0715	0.9982	72,033.6	1.0715	0.9973
99999	2015-2016	71,411	548	548	0	70,863	CMI-2016	79,694.2	1.1246	1.0052	80,310.5	1.1246	1.0036

Section B - CMI: Last Fiscal Year Facility Patient Day (PD) and RUG Weighted Patient Day (RWPD) totals - weighted using CMI-2015 Values and RWPD Option 1.

Facility Number	Fiscal Year	Patient Day (PD) information					CMI Used	Assessed RWPD information			Total RWPD information		
		Total PD	Total Unassessed PD	Total Unassessed 13 PD	Total Unassessed 14 PD	Total Assessed PD		Facility Assessed RWPD	Facility Assessed CMI	Overall Assessed CMI	Facility Total RWPD	Facility Total CMI	Overall Total CMI
99999	2011-2012	70,145	1,053	1,053	0	69,092	CMI-2015	76,328.4	1.1047	0.9765	77,491.7	1.1047	0.9746
99999	2012-2013	71,168	894	894	0	70,274	CMI-2015	77,078.4	1.0968	0.9857	78,059.0	1.0968	0.9836
99999	2013-2014	68,878	717	717	0	68,161	CMI-2015	73,268.1	1.0749	0.9989	74,038.8	1.0749	0.9980
99999	2014-2015	67,230	595	595	0	66,635	CMI-2015	72,636.0	1.0901	1.0154	73,284.6	1.0901	1.0145
99999	2015-2016	71,411	548	548	0	70,863	CMI-2015	81,076.5	1.1441	1.0225	81,703.5	1.1441	1.0209

Section C - CMI: RWPD Event Year Facility Patient Day (PD) and RUG Weighted Patient Day (RWPD) totals - weighted using CMI Values from the respective fiscal years and RWPD Option 1.

Facility Number	Fiscal Year	Patient Day (PD) information					CMI Used	Assessed RWPD information			Total RWPD information		
		Total PD	Total Unassessed PD	Total Unassessed 13 PD	Total Unassessed 14 PD	Total Assessed PD		Facility Assessed RWPD	Facility Assessed CMI	Overall Assessed CMI	Facility Total RWPD	Facility Total CMI	Overall Total CMI
99999	2011-2012	70,145	1,053	1,053	0	69,092	CMI-2011	78,665.1	1.1386	1.0060	79,864.0	1.1386	1.0040
99999	2012-2013	71,168	894	894	0	70,274	CMI-2012	79,244.6	1.1277	1.0130	80,252.7	1.1277	1.0108
99999	2013-2014	68,878	717	717	0	68,161	CMI-2013	75,036.9	1.1009	1.0227	75,826.2	1.1009	1.0217
99999	2014-2015	67,230	595	595	0	66,635	CMI-2014	73,496.0	1.1030	1.0280	74,152.2	1.1030	1.0271
99999	2015-2016	71,411	548	548	0	70,863	CMI-2015	81,076.5	1.1441	1.0225	81,703.5	1.1441	1.0209



CIHI Ottawa

495 Richmond Road
Suite 600
Ottawa, Ont.
K2A 4H6

613-241-7860

CIHI Toronto

4110 Yonge Street
Suite 300
Toronto, Ont.
M2P 2B7

416-481-2002

CIHI Victoria

880 Douglas Street
Suite 600
Victoria, B.C.
V8W 2B7

250-220-4100

CIHI Montréal

1010 Sherbrooke Street West
Suite 602
Montréal, Que.
H3A 2R7

514-842-2226

cihi.ca

15217-0517

