



Data Quality Documentation, National Ambulatory Care Reporting System — Current-Year Information, 2015–2016



Canadian Institute
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Abbreviations

Alta.	Alberta
B.C.	British Columbia
CAD	Clinical Administrative Databases
CC	cardiac catheterization (clinic)
CIHI	Canadian Institute for Health Information
DI	diagnostic imaging
DS	day surgery
ED	emergency department
HCN	Health Care Number
ICD-10-CA	International Statistical Classification of Diseases and Related Health Problems, 10th Revision, Canada
Man.	Manitoba
MIS FC	Management Information System Functional Centre
MH	mental health (clinic)
NACRS	National Ambulatory Care Reporting System
N.S.	Nova Scotia
OC	oncology clinic
Ont.	Ontario
P.E.I.	Prince Edward Island
RD	renal dialysis (clinic)
Sask.	Saskatchewan
Y.T.	Yukon

Purpose

This report, *Data Quality Documentation, National Ambulatory Care Reporting System — Current-Year Information*, is produced on a yearly basis and provides information on the quality of the data file for the given fiscal year. An associated report, [Data Quality Documentation, National Ambulatory Care Reporting System — Multi-Year Information](#), provides background information on the reporting system to help users decide whether the information fits their needs. [Data Quality Documentation, National Ambulatory Care Reporting System — Glossary of Terms](#) is also available.

Information on how to complete the National Ambulatory Care Reporting System (NACRS) abstract, including detailed data element descriptions and collection instructions, can be found in the [National Ambulatory Care Reporting System Abstracting Manual](#). For a summary of the mandatory and optional NACRS data elements by ambulatory care group, please refer to the [NACRS Data Elements](#) document on CIHI's website.

Coverage

Levels of care and submissions, by province/territory

NACRS contains data about hospital and community-based emergency and ambulatory care visits, including visits to day surgery (DS) and outpatient clinics. Data is collected from all submitting facilities in Canada on the care of patients who were registered in these facilities between April 1 and March 31 of the given fiscal year.

- In 2015–2016, a total of 21,548,195 records were submitted to NACRS (see Table 2 in Appendix A), which represents an increase of 2.5% compared with 2014–2015. For further information on submission levels, please see the report [Data Quality Documentation, National Ambulatory Care Reporting System — Multi-Year Information](#).
- Submission of DS data to NACRS: Mandated in Prince Edward Island, Nova Scotia, Ontario and Alberta. All other provinces/territories submit their DS data to the Discharge Abstract Database (DAD) or to the Hospital Morbidity Database (HMDB). Information about the DAD and the HMDB can be found in [DAD Metadata — Data Quality Documentation](#) and [HMDB Metadata — Data Quality Documentation](#), respectively.

- Submission of ED data to NACRS: Mandated in Ontario, Alberta and Yukon; partially mandated in Prince Edward Island, Nova Scotia, Manitoba, Saskatchewan and British Columbia; not mandated in Newfoundland and Labrador, New Brunswick, Northwest Territories and Nunavut.

Fully coded diagnosis and intervention information might not be available for abstracts submitted at Level 1 or Level 2.

Changes to the number of reporting facilities

Throughout the fiscal year, facilities may open, close or merge, resulting in changes to the number of reporting facilities.

- Facility numbers no longer valid in NACRS 2015–2016: 1 facility in Ontario.
- New facility numbers in NACRS 2015–2016: 5 facilities (3 from Ontario and 2 from Alberta).

Rate of over-coverage

- The rate of over-coverage from true duplicate records in 2015–2016 was 0.71%. There were 152,270 true duplicate records (see Table 5 in Appendix A).

Non-response

Unit non-response refers to incomplete data that is submitted from facilities in the frame, whether at the facility or record level. Additional unit non-response may occur with any outstanding rejected records that are not resubmitted during the data collection period.

Unit non-response rate at the facility level, due to facilities that did not submit any data to CIHI in NACRS 2015–2016:

- Nil

Unit non-response rates at the record level, due to missing records for all or some periods in NACRS 2015–2016:

- Estimated at 0.007% for ED, 0.018% for DS and 0.037% for all other levels of care. These rates were the result of 4 facilities not submitting data for some periods in 2015–2016 and 724 outstanding rejected records.

NACRS fields

- Unknown values in NACRS fields for 2015–2016: See Table 4 in Appendix A.
- NACRS fields evolution by fiscal year: See Appendix B.

Appendix A: NACRS data tables

The NACRS 2015–2016 population of reference included 427 facilities in Canada.

Table 1 Number of facilities submitting to each ambulatory care group in NACRS, by province/territory, 2015–2016

Prov./ terr.	Total no. of submitting facilities	ED			DS	Clinic					DI	Other ambulatory care
		Level 1	Level 2	Level 3		CC	RD	OC	MH	Other		
P.E.I.	2	0	0	1	2	0	0	0	0	0	0	0
N.S.	20	4	0	7	19	1	0	1	0	15	8	4
Ont.	191	1	0	178	150	23	54	87	0	82	14	9
Man.	8	7	0	1	0	0	0	0	0	0	0	0
Sask.	6	4	2	0	0	0	0	0	0	0	0	0
Alta.	168	0	0	107	93	4	4	7	28	109	120	121
B.C.	29	0	29	0	0	0	0	0	0	0	0	0
Y.T.	3	0	0	3	0	0	0	0	0	0	0	0
Total	427	16	31	297	264	28	58	95	28	206	142	134

Notes

For a listing of how the ambulatory care groups are defined using the national Management Information System Functional Centre (MIS FC) account codes, please refer to Appendix D of the *NACRS Abstracting Manual*.

The Clinic — Other category includes the following clinic subcategories: medical, surgical, cardiac, gynecology, neurology, obstetrics, pediatric, rehabilitation, rheumatology, ophthalmology, orthopedic, family practice and special day/night care, among others.

B.C.'s data submission level is based on the reporting mandate.

Source

National Ambulatory Care Reporting System, 2015–2016, Canadian Institute for Health Information.

Table 2 Summary of all visits for NACRS, by province/territory and ambulatory care group, 2015–2016

Prov./ terr.	ED			DS	Clinic					DI	Other ambulatory care	Total N (%)
	Level 1	Level 2	Level 3		CC	RD	OC	MH	Other			
P.E.I.	0	0	24,340	13,725	0	0	0	0	0	0	0	38,065 (0.18)
N.S.	169,811	0	124,956	104,363	2,312	0	875	0	17,596	4,109	81	424,103 (1.97)
Ont.	1,389	0	6,277,642	1,239,006	55,498	1,265,073	1,188,277	0	108,716	10,280	9,633	10,155,514 (47.13)
Man.	279,818	0	39,019	0	0	0	0	0	0	0	0	318,837 (1.48)
Sask.	153,121	102,217	0	0	0	0	0	0	0	0	0	255,338 (1.18)
Alta.	0	0	2,336,794	354,452	11,195	340,053	14,356	523,935	2,565,627	734,718	1,863,424	8,744,554 (40.58)
B.C.	0	1,570,180	0	0	0	0	0	0	0	0	0	1,570,180 (7.29)
Y.T.	0	0	41,604	0	0	0	0	0	0	0	0	41,604 (0.19)
Total	604,139	1,672,397	8,844,355	1,711,546	69,005	1,605,126	1,203,508	523,935	2,691,939	749,107	1,873,138	21,548,195 (100.00)

Notes

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Source

National Ambulatory Care Reporting System, 2015–2016, Canadian Institute for Health Information.

Table 3 Percentage change in volume of NACRS records between 2014–2015 and 2015–2016, by province/territory and ambulatory care group

Prov./ terr.	ED			DS	Clinic					DI	Other ambulatory care	Total
	Level 1	Level 2	Level 3		CC	RD	OC	MH	Other			
P.E.I.	n/a	n/a	-6.9	5.2	n/a	n/a	n/a	n/a	n/a	n/a	n/a	-2.9
N.S.	1.2	n/a	24.2	2.0	-8.2	n/a	9.5	n/a	3.1	9.9	6.6	7.4
Ont.	n/a	n/a	2.3	1.5	3.6	2.7	5.4	n/a	-5.8	-9.0	28.4	2.6
Man.	0.9	n/a	-2.4	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a	0.5
Sask.	1.6	4.0	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a	2.5
Alta.	n/a	n/a	-2.3	3.4	0.7	3.8	1.4	-1.3	4.5	-2.4	4.2	1.5
B.C.	n/a	372.5*	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a	6.3
Y.T.	n/a	n/a	16.4	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a	16.4
Total	-65.3	288.3	1.3	1.9	2.7	2.9	5.4	-1.3	4.1	-2.4	4.3	2.5

Notes

* The large percentage change is because of the shift in reporting method to reflect mandate, starting in 2014–2015, of all 29 facilities in B.C. to submit Level 2 ED data.

n/a: Not applicable.

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The Clinic — Other category includes the following clinic subcategories: medical, surgical, cardiac, gynecology, neurology, obstetrics, pediatric, rehabilitation, rheumatology, ophthalmology, orthopedic, family practice and special day/night care, among others.

Source

National Ambulatory Care Reporting System, 2014–2015 and 2015–2016, Canadian Institute for Health Information.

Table 4 Proportion of unknown data reported for selected NACRS data elements

Data element number	Data element	Definition	Unknown value	NACRS 2014–2015 proportion when applicable (%)	NACRS 2015–2016 proportion when applicable (%)	Percentage change between 2014–2015 and 2015–2016
02	HCN	HCN data is not available	All zeros	1.12	1.12	0.00
03	Province/ Territory Issuing HCN	Province/Territory Issuing HCN indicates the provincial/territorial or federal government from which the HCN was issued	99	0.61	0.62	0.01
05	Postal Code*	Client is a resident of Canada and the postal code is unknown or invalid	2-digit alpha code or invalid 6-digit code	1.28	1.07	-0.21
09	Birth Date	Birth Date is unknown or invalid	9999010199 990901 Combination of age code “U” and age unit “0”	<0.01	<0.01	0.00
25	Triage Time	Unknown	9999	0.85	0.71	-0.14
26	Triage Level	Unknown	99	1.09	0.86	-0.23
30	Time of Physician Initial Assessment	Unknown	9999	10	8.09	-1.91
45	Other Problem(s)	Unknown codes for place of occurrence with injuries	U98.9	66.8	66.97	0.17
100	Glasgow Coma Scale	Not available	99 or blank	45.26	44.45	-0.81
101	Seatbelt Indicator	Unknown	99	37.43	35.58	-1.85

Data element number	Data element	Definition	Unknown value	NACRS 2014–2015 proportion when applicable (%)	NACRS 2015–2016 proportion when applicable (%)	Percentage change between 2014–2015 and 2015–2016
102	Helmet Indicator	Unknown	99	71.37	70.99	-0.38
115	Disposition Time	Unknown	9999	2.56	2.60	0.04
117	Time Patient Left ED	Unknown	9999	0.47	0.40	-0.07
137 and 44	ED Discharge Diagnosis and Main Problem [†]	Missing	Blank	7.03	7.00	-0.02
136	Presenting Complaint [†]	Missing	Blank	29.29	19.50	-9.79

Notes

* Full 6-digit postal codes that were not found in the latest Postal Code Conversion File from Statistics Canada (2014 version) are deemed invalid. Mini-postal codes that refer to a Canadian province/territory or to persons who are transient/homeless are deemed unknown.

† The collection instructions for ED fields Discharge Diagnosis, Main Problem and Presenting Complaint vary across jurisdictions based on submission level. The percentages of missing values for these fields reflect the completeness of submissions rather than a data quality issue.

Source

National Ambulatory Care Reporting System, 2014–2015 and 2015–2016, Canadian Institute for Health Information.

Table 5 NACRS duplicates

Fiscal year		2014–2015 N (%)	2015–2016 N (%)
ED	Level 1	787 (0.50)	675 (0.44)
ED	Level 2	0 (0.00)	0 (0.00)
ED	Level 3	23 (0.01)	6 (0.00)
DS		987 (0.63)	982 (0.32)
Clinic	CC	2 (0.00)	0 (0.00)
Clinic	RD	3,153 (2.02)	4,397 (2.89)
Clinic	OC	21 (0.01)	130 (0.09)
Clinic	MH	121,333 (77.7)	110,343 (72.47)
Clinic	Other	23,016 (14.74)	21,338 (14.01)
DI		397 (0.25)	100 (0.07)
Other ambulatory care		6,429 (4.12)	14,299 (9.39)
Total		156,148	152,270
Proportion of NACRS		~0.74%	~0.71%

Note

The majority of the duplicates were from Alberta in both 2014–2015 (99.5%) and 2015–2016 (99.5%).

Source

National Ambulatory Care Reporting System, 2014–2015 and 2015–2016, Canadian Institute for Health Information.

Appendix B: NACRS data element evolution by fiscal year

This appendix is intended to be used in conjunction with the NACRS Manual; please refer to it for details.

Legend	
*	No change to existing data element
C	Change in data element definition (including code or change/collection of new data)
F	Change in data element format
R	Retired data element
N	New data element
O	Data element did not exist that year

Data element ID number	Description	2004–	2005–	2006–	2007–	2008–	2009–	2010–	2011–	2012–	2013–	2014–	2015–
		2005	2006	2007	2008	2009	2010	2011	2012	2013	2014	2015	2016
00A	Reporting Facility's Province/Territory	*	*	*	*	*	*	*	*	*	*	*	*
00B	Reporting Facility's Ambulatory Care Number	*	*	*	*	*	*	*	*	C	*	*	*
00C	Submission Fiscal Year	*	*	*	*	*	*	*	*	*	*	*	*
00D	Submission Period	*	*	*	*	*	*	*	C	C	*	*	*
00E	Abstract Identification Number	*	*	*	*	*	*	*	*	*	*	*	*
00F	Coder Number	*	*	*	*	*	*	F	*	*	C	*	*
00G	Primary Abstract ID Number	O	N	R	O	O	O	O	O	O	O	O	O

Data element ID number	Description	2004–	2005–	2006–	2007–	2008–	2009–	2010–	2011–	2012–	2013–	2014–	2015–
		2005	2006	2007	2008	2009	2010	2011	2012	2013	2014	2015	2016
01	Chart Number	*	*	*	*	*	*	*	*	C	*	*	*
02	Health Care Number	*	*	*	*	*	*	C	C	C	*	C	C
03	Province/Territory Issuing Health Care Number	*	*	*	*	*	*	C	C	C	*	*	*
04	Responsibility for Payment	*	*	*	*	*	*	C	C	C	*	C	*
05	Postal Code	*	*	*	*	*	*	C	C	*	*	*	*
06	Residence Code (Geographic Code)	*	*	*	*	*	C	C	C	*	*	*	*
07	Gender	*	*	*	*	*	*	C	*	C	*	*	*
08	Birth Date	*	*	*	*	*	*	*	C	*	*	*	*
09	Birth Date Is Estimated	*	*	*	*	*	*	C	C	*	*	*	*
10	Family Physician Flag	*	*	*	C	*	R	O	O	O	O	O	O
11	Ambulatory Registration Number	*	*	*	*	*	*	*	C	*	*	*	*
12	Ambulatory Registration/ Encounter Sequence Number	*	*	*	*	*	*	*	*	*	*	*	*
13	Visit MIS FC Account Code	*	*	*	*	*	*	C	C	*	*	*	*
14	Admit via Ambulance	*	*	C	*	*	*	C	*	*	*	*	*
15	Ambulance Call Number	*	*	*	*	*	*	C	*	*	*	*	*
16	Living Arrangement	*	*	*	*	*	*	*	*	*	*	*	*
17	Residence Type	*	*	*	*	*	*	*	*	*	*	*	*
18	Visit Type	*	*	*	*	C	C	C	R	O	O	O	O

Data element ID number	Description	2004–2005	2005–2006	2006–2007	2007–2008	2008–2009	2009–2010	2010–2011	2011–2012	2012–2013	2013–2014	2014–2015	2015–2016
19	Ambulatory Visit Status	*	*	*	*	*	*	*	*	*	*	*	*
20	Mode of Visit/Contact	*	*	*	*	*	*	C	C	C	*	*	*
21	Highest Level of Education	*	*	*	*	*	*	*	*	*	*	*	*
22	Arrival Date	*	*	*	*	*	C	*	*	*	*	*	*
23	Arrival Time	*	*	*	*	*	C	*	*	*	*	*	*
24	Triage Date	*	*	*	*	*	*	*	C	*	*	*	*
25	Triage Time	*	*	*	C	*	*	*	C	*	*	*	*
26	Triage Level	*	*	C	*	*	C	C	C	*	*	*	
27	Date of Registration/Visit	*	*	*	*	*	*	*	*	*	C	*	C
28	Registration/Visit Time	*	*	*	*	*	*	*	*	*	C	*	C
29	Date of Physician Initial Assessment	*	*	*	*	*	C	C	C	C	*	*	*
30	Time of Physician Initial Assessment	*	*	*	*	*	C	C	C	*	*	*	*
31	Referral Source Prior to Ambulatory Care Visit	C	*	*	*	C	C	C	C	*	*	*	*
32	Institution From	*	*	*	*	C	C	C	*	*	*	*	*
33	Decision to Admit Date	*	*	*	R	O	O	O	O	O	O	O	O
34	Decision to Admit Time	*	*	*	R	O	O	O	O	O	O	O	O
35	Visit Disposition	*	C	*	*	*	C	C	C	C	*	*	C
36	Date Visit Completed	*	*	*	R	O	O	O	O	O	O	O	O
37	Time Visit Completed	*	*	C	R	O	O	O	O	O	O	O	O

Data element ID number	Description	2004–2005	2005–2006	2006–2007	2007–2008	2008–2009	2009–2010	2010–2011	2011–2012	2012–2013	2013–2014	2014–2015	2015–2016
38	Referred To — After Completion of Ambulatory Care Visit	C	*	*	*	*	C	*	C	*	*	*	*
39	Institution To	*	*	*	*	C	C	C	C	*	*	*	*
40	Provider Type	*	*	*	C	*	C	C	C	C	*	*	*
41	Service Provider	*	C	C	C	C	C	C	C	C	C	C	*
42	Service Provider ID Number	*	*	*	*	*	C	C	C	*	F, C	*	*
43, 43 (a–i)	Main and Other Problem Prefix	*	*	C	*	C	C	C	C	*	*	*	*
44	Main Problem	*	*	*	*	*	*	C	*	*	*	*	*
45 (a–i)	Other Problem(s)	*	*	*	*	*	C	C	*	*	*	*	*
46	Main Intervention	*	*	*	*	*	*	*	*	*	*	*	C
47 (a–i)	Other Intervention(s)	*	*	*	*	*	*	*	*	*	C	*	*
48 (a–i)	Status Attribute (Main and Other)	*	*	*	*	*	*	C	C	*	*	*	*
49 (a–i)	Location Attribute (Main and Other)	*	*	*	*	*	*	C	C	*	*	*	*
50 (a–i)	Extent Attribute (Main and Other)	*	*	*	*	*	*	C	C	*	*	*	*
51 (a–i)	Duration of Ambulatory Care Intervention for Main and Other Interventions	*	*	*	*	*	*	C	C	C	*	*	*
52 (a–i)	Intervention Location Code for Main and Other Interventions	*	*	*	*	*	*	*	C	*	C	*	*
53	Anaesthetic Technique	*	C	*	*	*	C	*	C	*	F, C	*	C
54	Died During Intervention Flag	*	*	*	*	*	*	R	O	O	O	O	O

Data element ID number	Description	2004–2005	2005–2006	2006–2007	2007–2008	2008–2009	2009–2010	2010–2011	2011–2012	2012–2013	2013–2014	2014–2015	2015–2016
55	Out-of-Hospital Indicator	*	*	*	*	*	*	C	*	*	*	*	C
56	Out-of-Hospital Institution Number	*	*	*	*	*	*	*	*	*	*	*	*
57	Blood Transfusion Indicator	*	*	*	*	*	*	C	*	*	*	*	*
58	Blood Components/ Products — Red Blood Cells	*	*	*	*	*	C	C	*	*	*	C	*
59	Platelets	*	*	*	*	*	C	C	*	*	*	C	*
60	Plasma	*	*	*	*	*	C	C	*	*	*	C	*
61	Albumin	*	*	*	*	*	C	C	*	*	*	C	*
62	Other	*	*	*	*	*	C	C	*	C	C	C	*
63	Autologous Blood Transfusion	C	*	*	*	*	C	C	*	C	*	C	*
64	Units of Blood Transfused — Red Blood Cells	*	*	*	*	*	*	*	*	*	*	*	*
65	Platelets	*	*	*	*	*	*	*	*	*	*	*	*
66	Plasma	*	*	*	*	*	*	*	*	*	*	*	*
67	Albumin	*	*	*	*	*	*	*	*	*	*	*	*
68	Other	*	*	*	*	*	*	*	*	*	*	*	*
69	Therapeutic Abortion Information — Number of Previous Term Deliveries	*	*	*	*	*	C	C	C	*	*	*	*
70	Number of Previous Preterm Deliveries	*	*	*	*	*	C	C	C	*	*	*	*

Data element ID number	Description	2004–2005	2005–2006	2006–2007	2007–2008	2008–2009	2009–2010	2010–2011	2011–2012	2012–2013	2013–2014	2014–2015	2015–2016
71	Number of Previous Spontaneous Abortions	*	*	*	*	*	C	C	C	*	*	*	*
72	Number of Previous Therapeutic Abortions	*	*	*	*	*	C	C	C	*	*	*	*
73	Gestational Age — Therapeutic Abortion	*	*	*	*	*	C	C	C	*	*	*	*
74	Date of Last Menses	*	*	*	*	*	C	C	C	*	*	*	*
75 (a–j)	MIS FC Account Code	F	*	*	*	*	*	C	C	*	*	*	*
76	Service Recipient–Specific Direct Cost	R	O	O	O	O	O	O	O	O	O	O	O
77	Service Recipient–Specific Indirect Cost	R	O	O	O	O	O	O	O	O	O	O	O
78	Traceable Supplies	R	O	O	O	O	O	O	O	O	O	O	O
79–96 (a–e)	Special Project	*	*	*	*	*	*	C	C	*	C	*	O
97	PCTAS Indicator	*	*	*	*	*	*	R	O	O	O	O	O
98	Program Area	*	*	*	*	*	*	C	C	*	*	*	*
99	Scheduled ED Visit Indicator	*	*	*	*	C	*	C	R	O	O	O	O
100	Glasgow Coma Scale	*	*	*	*	C	C	C	*	*	C	*	*
101	Seatbelt Indicator	*	*	*	*	*	*	*	C	*	*	*	*
102	Helmet Indicator	N	*	*	*	C	*	*	C	*	*	*	*
103	Level of Care/ Service Recipient	N	*	*	*	*	*	*	*	R	O	O	O

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Data element ID number	Description	2004–2005	2005–2006	2006–2007	2007–2008	2008–2009	2009–2010	2010–2011	2011–2012	2012–2013	2013–2014	2014–2015	2015–2016
104	Referral Date	N	*	*	*	*	*	*	*	*	*	*	*
105	Vendor MAC	N	*	*	*	*	*	*	*	*	*	*	*
106	Vendor CACS	N	*	*	*	*	*	*	*	*	*	*	*
107	Vendor RIW [†]	N	*	C	*	*	*	*	*	F	*	*	*
108	Complete Record	N	*	*	*	*	*	*	*	*	*	*	*
109	Main Intervention Start Date	N	*	*	*	*	*	C	C	C	C	*	*
110	Main Intervention Start Time	N	*	*	*	*	*	C	C	C	C	*	*
111 (a–i)	Other Intervention Start Date	N	*	*	*	*	*	C	C	C	C	*	*
112 (a–i)	Other Intervention Start Time	N	*	*	*	*	*	C	C	C	C	*	*
113	Reason for Visit/Chief Complaint [‡]	O	O	N	*	*	C	*	R	O	O	O	O
114	Disposition Date	O	O	O	N	*	*	*	C	C	C	*	*
115	Disposition Time	O	O	O	N	*	*	*	C	C	C	*	*
116	Date Patient Left Emergency Department	O	O	O	N	*	*	C	*	C	*	*	C
117	Time Patient Left Emergency Department	O	O	O	N	*	*	C	*	C	*	*	C
118	Ambulance Arrival Date	O	O	O	O	O	N	C	C	*	*	*	*
119	Ambulance Arrival Time	O	O	O	O	O	N	C	C	*	*	*	*
120	Ambulance Transfer of Care Process Date	O	O	O	O	O	N	C	C	C	*	*	*
121	Ambulance Transfer of Care Process Time	O	O	O	O	O	N	C	C	C	*	*	*

Data element ID number	Description	2004–2005	2005–2006	2006–2007	2007–2008	2008–2009	2009–2010	2010–2011	2011–2012	2012–2013	2013–2014	2014–2015	2015–2016
122	Clinical Decision Unit/Observation Unit Flag	O	O	O	O	O	N	C	C	*	*	*	*
123	Clinical Decision Unit Date In	O	O	O	O	O	N	C	C	C	*	*	*
124	Clinical Decision Unit Time In	O	O	O	O	O	N	C	C	C	*	*	*
125	Clinical Decision Unit Date Out	O	O	O	O	O	N	C	C	C	*	*	*
126	Clinical Decision Unit Time Out	O	O	O	O	O	N	C	C	C	*	*	*
127, 127 (a–i)	Problem Cluster for Main Problem (Main and Other)	O	O	O	O	O	N	*	C	C	*	*	*
128	Submission Level Code	O	O	O	O	O	N	C	*	*	*	*	*
129	Access to Primary Health Care Code	O	O	O	O	O	N	*	*	*	*	*	*
130 (a–c)	Consult Request Date	O	O	O	O	O	O	N	C	C	*	*	*
131 (a–c)	Consult Request Time	O	O	O	O	O	O	N	C	C	*	*	*
132 (a–c)	Consult Request Service	O	O	O	O	O	O	N	C	C	*	*	*
133	Date of Non-Physician Initial Assessment (DNPIA)	O	O	O	O	O	O	N	C	C	*	*	*
134	Time of Non-Physician Initial Assessment (TNPIA)	O	O	O	O	O	O	N	C	C	*	*	*
135	Non-Physician Initial Assessment Provider Service (NPIAPS)	O	O	O	O	O	O	N	C	C	C	*	*

Data element ID number	Description	2004–2005	2005–2006	2006–2007	2007–2008	2008–2009	2009–2010	2010–2011	2011–2012	2012–2013	2013–2014	2014–2015	2015–2016
136 (a-c)	Presenting Complaint List	O	O	O	O	O	O	N	C	C	*	*	C
137 (a-c)	Emergency Department Discharge Diagnosis	O	O	O	O	O	O	N	C	C	C	*	*
138	Status After Triage	O	O	O	O	O	O	O	N	*	*	*	*
139	ED Visit Indicator	O	O	O	O	O	O	O	N	*	*	*	*
140	Vendor Age Category	O	O	O	O	O	O	O	N	*	*	*	*
141	Vendor Anaesthetic Category	O	O	O	O	O	O	O	N	*	*	*	*
142	Vender IT Total Count	O	O	O	O	O	O	O	N	*	*	*	*
143 (a-c)	Consult Arrival Date	O	O	O	O	O	O	O	N	C	*	*	*
144 (a-c)	Consult Arrival Time	O	O	O	O	O	O	O	N	C	*	*	*
146–169	Project Data Fields	O	O	O	O	O	O	O	O	O	O	O	C, F

Notes

† From 2004–2005 to 2005–2006, the name of data element 107 was Vendor ACW.

‡ From 2004–2005 to 2005–2006, Reason for Visit (data element 113) was captured as value “R” in Main Problem Prefix (data element 43).

Contact

For more information, please contact CIHI by email (cad@cihi.ca).

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