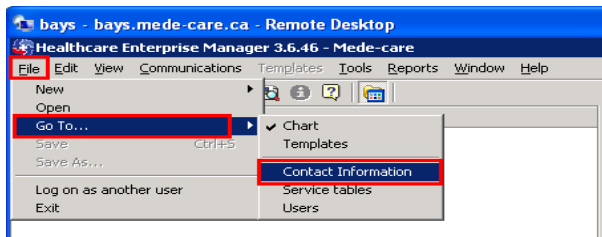


Version 3 CCRS Contact Information Submission Process

CIHI has required facilities to submit Contact Information (CI) every year prior to submitting Quarter 1 assessments.

How to Update the Facility Contact Information:

1. Go to CCRS > File > Go To > Contact Information:



2. Complete the facility and contact information. Highlighted areas are mandatory. **Internal Data Submission contact 1**, **RAI Coordinator 1** and **Administrator** contact information must be filled in and **Auto Notification** must be selected as 'Yes'

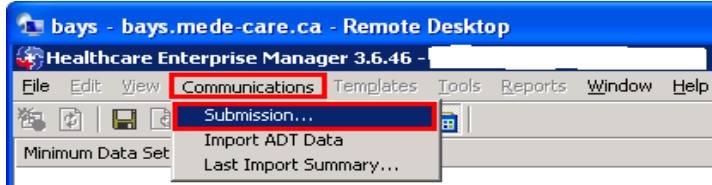
Contact Information	
You must fill in the contact information before creating any patient records.	
AF1	Facility name : Mede-care
AF2	Site name : Mede-care
AA6	Facility number :
Z2	Internal Data Submission Contact 1 Internal Data Submission Contact 1 : Internal contact 1 Internal Data Submission Contact 1 Telephone : (416)686-8592 Internal Data Submission Contact 1 Extension : Internal Data Submission Contact 1 Email Address : internal@mede-care.com Internal Data Submission Contact 1 Auto-Notification : 1 <input checked="" type="checkbox"/> yes
Z3	Internal Data Submission Contact 2 Internal Data Submission Contact 2 : Internal Data Submission Contact 2 Telephone : () - Internal Data Submission Contact 2 Extension : Internal Data Submission Contact 2 Email Address : Internal Data Submission Contact 2 Auto-Notification :
Z4	External Data Submission Contact 1 External Data Submission Contact 1 : External Data Submission Contact 1 Telephone : () - External Data Submission Contact 1 Extension : External Data Submission Contact 1 Email Address : External Data Submission Contact 1 Auto-Notification : External Data Submission Contact 1 Org ID :
Z5	External Data Submission Contact 2 External Data Submission Contact 2 : External Data Submission Contact 2 Telephone : () - External Data Submission Contact 2 Extension : External Data Submission Contact 2 Email Address : External Data Submission Contact 2 Auto-Notification : External Data Submission Contact 1 Org ID :
Z6	RAI Coordinator 1 RAI Coordinator 1 : RAI Coordinator 1 RAI Coordinator 1 Telephone : (416)686-8592 RAI Coordinator 1 Extension : RAI Coordinator 1 Email Address : rai@mede-care.com RAI Coordinator 1 Auto-Notification : 1 <input checked="" type="checkbox"/> yes
Z7	RAI Coordinator 2 RAI Coordinator 2 : RAI Coordinator 2 Telephone : () - RAI Coordinator 2 Extension : RAI Coordinator 2 Email Address : RAI Coordinator 2 Auto-Notification :
Z8	Administrator Administrator : Administrator Administrator Telephone : (416)686-8592 Administrator Extension : Administrator Email Address : admin@mede-care.com Administrator Auto-Notification : 1 <input checked="" type="checkbox"/> yes

3. Click on 'Save'



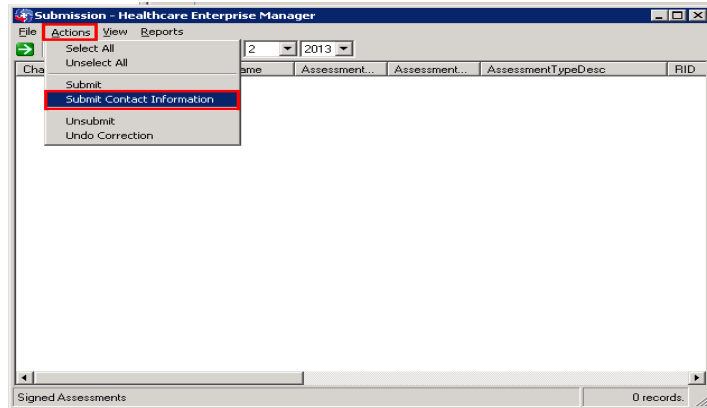
How to create facility Contact Information submission file:

4. Go to: Communication > Submission

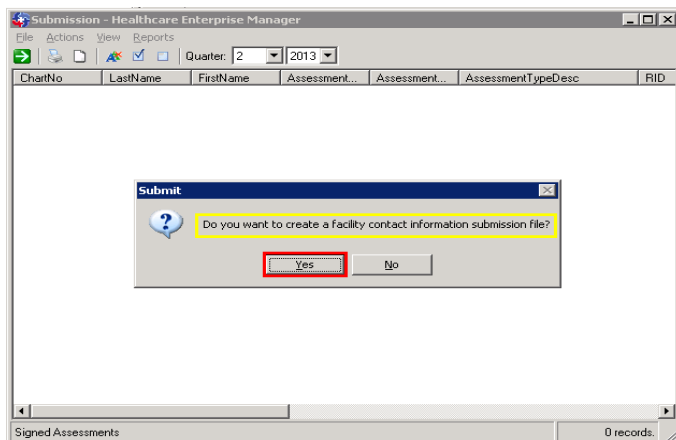


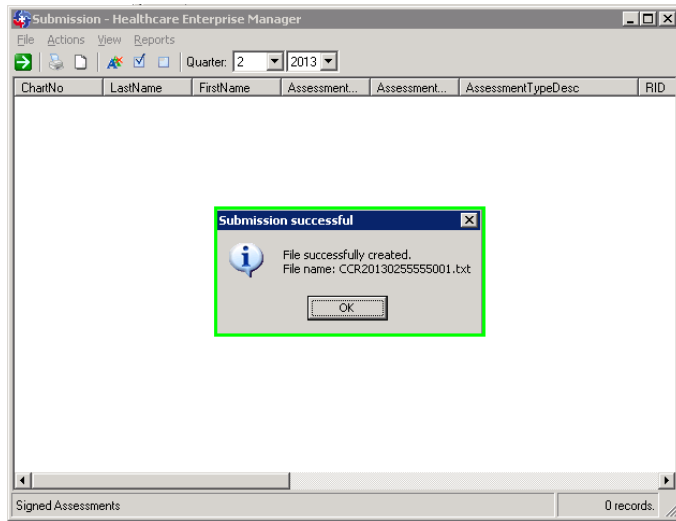
The submission window opens

5. Go to: Actions > Submit Contact Information



6. Click on 'Yes' to accept the message below and create the CI file





Note: The Contact Information file is created and submitted under the quarter when the file was created; i.e. if the CI file was created in July 2013, it appears under Q2-2013 and it will be uploaded under period 2 at CIHI.