



*Your Care, Our Mission*

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# RELEASE NOTES

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## CCRS Changes 2015-2016

March 19, 2015

## Notice

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# SECTION 1 - OVERVIEW

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## 1.1 - Document Purpose

This document provides a breakdown of the 2015-2016 changes made for CCRS. These are all according to specifications as mandated by the Canadian Institute for Health Information (CIHI).

## 1.2 - Background

MED e-Care provides a full platform with an integrated Electronic Health Record (EHR) system, in French and English, for complete management of the Resident Care Lifecycle. From single-home independents to large chains, our healthcare software links an organization's clinical, medication, financial and business processes to manage and use information for progressive improvements. Increased operational effectiveness, funding opportunities, staff productivity, quality of resident care, and reduced risk to business are accomplished with MED e-care's software.

## 1.3 – Documentation

Product documentation is available in the Med e-Care *e-Care IV User manuals*. To view MED e-Care product documentation in PDF format, log into the application and navigate to the *Help* section. Manuals are printable from that location.

## 1.4 – Web Browser Compatibility

This application is fully compatible with Internet Explorer version 9 and compatible with versions 10 and 11 in Compatibility View mode. The current version of the application is also compatible with Mozilla Firefox in compatibility mode.

# SECTION 2 – What’s New for CCRS 2015-2016

## 2.1 E-Specification Version

- 2.1.0 The e-specification version for element Y18 has been changed from *MDS\_2\_0-3.0* to *MDS\_2\_0-4.0*.
- 2.1.1 ‘Mandatory for Ontario’ has been added to Value Description for the AD2 Bed Type element. This is an optional submission status.

## 2.2 Rules & Data Quality Audits

### 2.2.1 New Rules

No.	Element	Element Name	Error Message	Submission Type	Error #	Rule Action
1	I2f	Pneumonia	If the resident was previously assessed with pneumonia (I2f = 1) and if the assessment date (A3) in the current assessment is more than 60 days since the previous assessment, the pneumonia is likely resolved (I2f = 0) in the current assessment.	New or Correction	C1387	Accept with Flag
2	J1c	Dehydrated; e.g. output exceeds intake	If the resident was previously assessed with dehydration (J1c = 1) and if the assessment date (A3) in the current assessment is more than 60 days since the previous assessment, the dehydration is likely resolved (J1c = 0) in the current assessment.	New or Correction	C1388	Accept with Flag
3	J1h	Fever	If the resident was previously assessed with fever (J1h = 1) and if the assessment date (A3) in the current assessment is more than 60 days since the previous assessment, the fever is likely resolved (J1h = 0) in the current assessment.	New or Correction	C1389	Accept with Flag
4	J1j	Internal Bleeding	If the resident was previously assessed with internal bleeding (J1j = 1) and if the assessment date (A3) in the current assessment is more than 60 days since the previous assessment, the internal bleeding is likely resolved (J1j = 0) in the current assessment.	New or Correction	C1390	Accept with Flag
5	J1o	Vomiting	If the resident was previously assessed with vomiting (J1o = 1) and if the assessment date (A3) in the current assessment is more than 60 days since the previous assessment, the fever is likely resolved (J1o = 0) in the current assessment.	New or Correction	C1391	Accept with Flag
6	P1aa	Chemotherapy	If the resident has not been diagnosed with cancer (I1rr = 0), the resident should not be receiving chemotherapy (P1aa = 0).	New or Correction	C1392	Accept with Flag
7	P1ab	Renal Dialysis	If resident has not been diagnosed with renal failure (I1uu = 0), the resident should not be receiving renal dialysis (P1ab = 0).	New or Correction	C1393	Accept with Flag
8	P1ah	Radiation	If resident has not been diagnosed with cancer (I1rr = 0), the resident should not be receiving radiation therapy (P1ah = 0).	New or Correction	C1394	Accept with Flag
9	H1a H1b H3a	Bowel Continence Bladder Continence External (condom) catheter	If the resident is continent (H1a = 0 and H1b = 0) or incontinent (H1a = 4 and H1b = 4), the resident should not participate in a scheduled toileting plan (H3a = 1).	New or Correction	C1395	Accept with Flag
10	M5a M5b	Pressure relieving device(s)	If the resident is bedfast all or most of the time (G6a = 1), pressure relieving devices for chair (M5a = 1) or bed (M5b = 1) should be in place.	New or Correction	C1396	Accept with Flag

## 2.2.2 Modified Rules

No.	Element	Element Name	Error Message	Submission Type	Error #	Rule Action
1	AA5a	Health Card Number	Resident from the same facility (AA6) with the same health record number (A6a) already exists in the CIHI system with a different health card number (AA5a). Please check all personal identifiers.	New or Correction re	C1275	Reject Record
2	P1baB	Speech Therapy - Minutes	Total number of minutes that the resident received speech therapy during the last 7 days (P1baB) should be less than 450 minutes.	New or Correction	C1018	Accept with Flag
3	P1bbB	Occupational Therapy - Minutes	Total number of minutes that the resident received occupational therapy during the last 7 days (P1bbB) should be less than 450 minutes.	New or Correction	C1020	Accept with Flag
4	P1bcB	Physical Therapy - Minutes	Total number of minutes that the resident received physical therapy during the last 7 days (P1bcB) should be less than 450 minutes.	New or Correction	C1022	Accept with Flag
5	P1beB	Psychological Therapy - Minutes	Total number of minutes that the resident received psychological therapy during the last 7 days (P1beB) should be less than 450 minutes.	New or Correction	C1026	Accept with Flag
6	P5	Hospital Stays	Number of times that the resident was admitted to hospital in the last 90 days (P5) should not be greater than 4 times.	New or Correction	C1040	Accept with Flag
7	P6	Emergency Room (ER) Visits	Number of times that the resident visited ER in the last 90 days (P6) should not be greater than 6 times.	New or Correction	C1041	Accept with Flag

## 2.2.3 Disabled Rules

No.	Rule	Element	Element Name
1	C1158	M5a, M5b & M5c	Pressure Relieving Device(s) for Chair
2	C1114	M5c	Turning or Repositioning Program
3	C1122	H1b	Bladder Continence
4	C1169	P1ae	Monitoring Acute Medical Condition
5	C1112	M5a	Pressure relieving device(s) for chair
6	C1113	M5b	Pressure relieving device(s) for bed

## 2.3 Medication List

No.	Type of Change	Classification	Common Brand Name	For RAI-MDS Use Only
1	New Drug	ANTIPSYCHOTICS NEUROLEPTICS	LATUDA	
2	Removed Drug - No longer on the market.	ANTIDEPRESSANTS	ETRAFON APO PERAM PMS-LEVAZINE	
3	Removed Drug	ANTI-ANXIETIES	FRISIUM	
4	New Drug	ANTI-ANXIETIES	RIVOTRIL	
5	New Drug	ANALGESICS	ZONALON	
6	New Drug	ANALGESICS	OPIUM & BELLADONA	
7	New Brand Name	ANALGESICS	ZYTRAM RALIVIA DURELA	
8	New Drug	DIURETICS	EDARBYCLOR	✓
9	New Brand Name	DIURETICS	ATACAND PLUS CANDESARTAN PLUS	✓
10	New Drug	DIURETICS	DIUREX	✓
11	New Drug	DIURETICS	SAMSCA	✓

## 2.4 Language Codes

The New CIHI standard language code pick-list has been implemented for 2015-2016. It includes 167 unique living language codes that are relevant to Canada and are a subset of the current ISO 639-3 standard.

New language codes based on the CIHI Standard:

1. oth - Other
2. unk - Unknown

## 2.5 ICD-10-CA Pick-List Changes

Common ICD-10-CA codes have been added to pick list to align with new interRAI suite:

- A047 Enterocolitis due to Clostridium difficile
- A1691 Respiratory tuberculosis unspecified, without mention of bacteriological or histological confirmation, without cavitation or unspecified
- A419 Sepsis, unspecified
- A568 Sexually transmitted chlamydial infection of other sites
- B24 Human immunodeficiency virus [HIV] disease
- E079 Disorder of thyroid, unspecified
- E1030 Type 1 diabetes mellitus with background retinopathy
- G10 Huntington's disease

G1220 Amyotrophic lateral sclerosis  
G809 Cerebral palsy, unspecified  
H409 Glaucoma, unspecified  
I100 Benign hypertension  
I739 Peripheral vascular disease, unspecified  
I802 Phlebitis and thrombophlebitis of other deep vessels of lower extremities  
M1399 Arthritis, unspecified, unspecified site  
S099 Unspecified injury of head  
T793 Post-traumatic wound infection, not elsewhere classified  
T814 Infection following a procedure, not elsewhere classified



# REMINDER

## ZENDESK and HELP LINKS

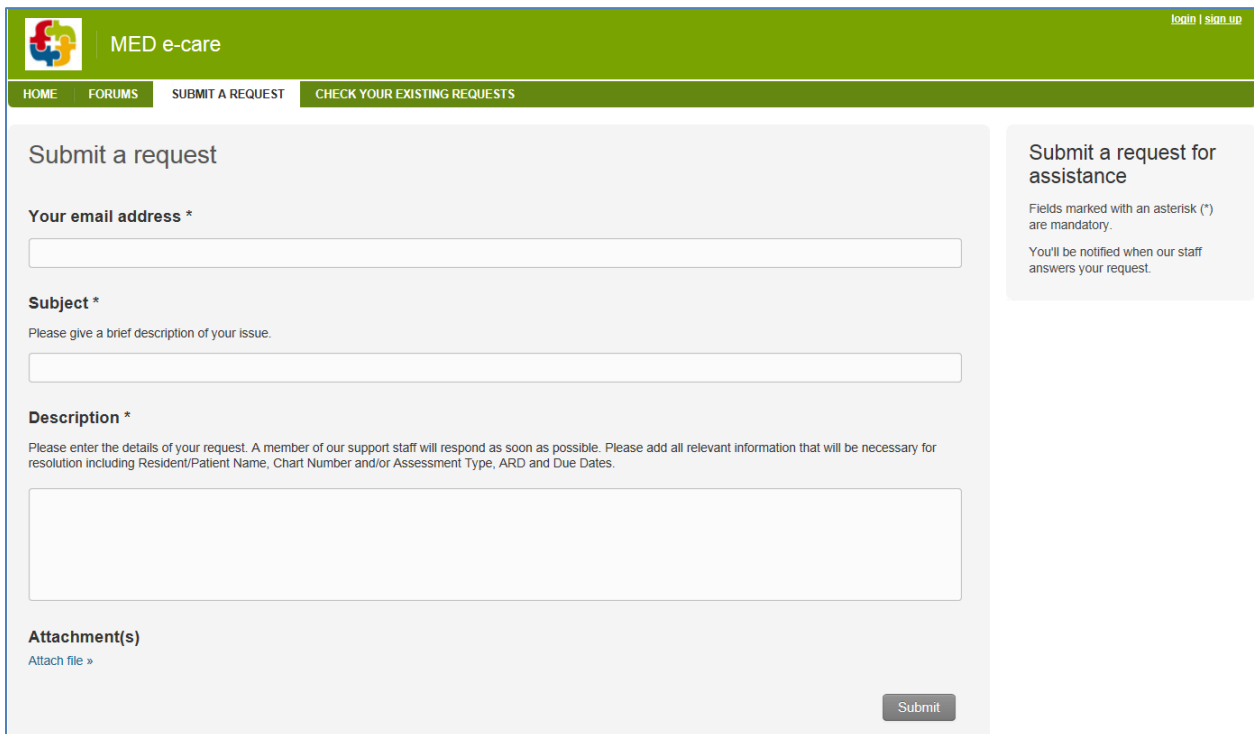
### Check out our Forums page on Zendesk!

Zendesk operates primarily as our online ticket tracker, but there are a host of resources built to help you make the best use of your MED e-Care software.

For instance, under our *Community Help* section, the question was asked ‘How do I print completed RAI assessments’ and another user answered. In FAQ/Tips and Tricks you’ll find how-to articles such as, ‘How to create a Delete record’ and ‘How to add a Custom Etiology to Care Plan’.

### There is a whole lot more! So go ahead and check it out!

For those new to Zendesk, it’s easy to sign up – just click <https://medecare.zendesk.com> or click the ‘Support’ link in the top right hand corner of the software and follow the simple steps.



The screenshot shows the MED e-care Zendesk support interface. At the top, there is a green header with the MED e-care logo and navigation links for HOME, FORUMS, SUBMIT A REQUEST, and CHECK YOUR EXISTING REQUESTS. The main content area is titled 'Submit a request' and contains several input fields: 'Your email address \*', 'Subject \*', and 'Description \*'. The 'Description \*' field has a detailed instruction: 'Please enter the details of your request. A member of our support staff will respond as soon as possible. Please add all relevant information that will be necessary for resolution including Resident/Patient Name, Chart Number and/or Assessment Type, ARD and Due Dates.' Below the description field is an 'Attachment(s)' section with an 'Attach file »' link. A 'Submit' button is located at the bottom right of the form. On the right side of the page, there is a sidebar titled 'Submit a request for assistance' with a note: 'Fields marked with an asterisk (\*) are mandatory. You'll be notified when our staff answers your request.'

Reference materials are just one click away from within the software too! Select the ‘Help’ link, located at the top, right-hand corner of the MED e-Care screen and a new window will appear with links to **Manuals**, **Release Notes** and **other useful documentation**.