

CCO Data Holdings List and HINP Services

Prescribed Entity

Data Holding	(1) Statement of Purpose & (2) Need for PHI	Data	Source
Brachytherapy Funding Program	<ol style="list-style-type: none"> The purpose of this data holding is to (1) maintain data related to reimbursement for prostate cancer patients in accordance with program guidelines for CCO's prescribed entity purpose and (2) to provide reimbursement for eligible prostate cancer patients that meet program guidelines on behalf of the MOHLTC PHI is required to (1) conduct analyses and reporting to the MOHLTC on the Brachytherapy Program for health system planning purposes and (2) to reimburse eligible patients. 	This dataset contains: <ul style="list-style-type: none"> Clinical data Demographic data 	Referring physicians
Canadian Community Health Survey (CCHS)	<ol style="list-style-type: none"> The CCHS is a Statistics Canada Survey that collects information related to health status, health care utilization, and health determinants for the Canadian population, for the purpose of monitoring the impact of prevention programs and policies. CCO requires the data to monitor and report on the prevalence of cancer risk factors in Ontario and in particular subpopulations (e.g., First Nations, Inuit, Metis populations). The data are also used to monitor factors that influence exposure to cancer risk factors (e.g., socio-demographic characteristics, implementation of household smoking bans, etc.) and to quantify the burden of various cancers. 	This dataset contains: <ul style="list-style-type: none"> Demographic data (e.g., birth date, sex, health problems, occupation and Ontario geographic codes) Health-related self-ratings (e.g., re: healthy behaviours, health services utilization) 	MOHLTC Ontario Sharing Files were provided by Statistics Canada and modified by MOHLTC before being shared with CCO.
Cancer Activity Level Reporting (ALR)	<ol style="list-style-type: none"> ALR data is collected for reporting and analysis purposes. It represents the basic set of data 	This dataset contains: <ul style="list-style-type: none"> Clinical data 	RCCs, hospitals and other healthcare delivery organizations

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	<p>elements required to produce the quality, cost and performance indicators for the cancer system.</p> <p>2. The PHI collected supports multiple programs at CCO, including the following: Radiation; Systematic; Psychosocial Oncology; Palliative; Smoking Cessation; Symptom Management; and the OCR.</p>	<ul style="list-style-type: none"> • Patient-level data 	
Case-By-Case Review Program (CBCRP)	<p>1. The CBCRP database stores patient and treatment information about systemic therapy drug utilization at Ontario hospitals, for which reimbursement is being sought through the CBCRP according to strict eligibility criteria for both CCO's prescribed entity purpose and in order to process reimbursements on behalf of the MOHLTC .</p> <p>2. PHI is required to (1) conduct analysis and reporting to the MOHLTC on the CBCRP for health system planning purposes and (2) to reimburse eligible patients.</p>	<p>This dataset contains:</p> <ul style="list-style-type: none"> • Administrative Data • Clinical Data (eligibility criteria) • Demographic Data 	Hospitals
Collaborative Staging	<p>1. The Collaborative Staging dataset is a standardized set of data elements that describe how far a cancer has spread at the time of diagnosis. It contains patient, tumour and additional disease-site specific factors that together derive the stage of the patient at the time of diagnosis.</p> <p>2. CCO submits provincial stage data annually to NAACCR and Statistics Canada. Along with data from the OCR, cancer stage data is necessary to</p>	<p>The dataset contains:</p> <ul style="list-style-type: none"> • Administrative data • Clinical data • Demographic data • Facility data 	<p>OCR</p> <p>Pathology Data Mart</p> <p>Hospital patient health records</p>

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	<p>support cancer system surveillance, planning and management. PHI is necessary to enable comprehensive analysis and for linking to the OCR, screening, and treatment data.</p>		
<p>Complex Continuing Care Reporting and Complex Continuing Care (CCRS) – Institute for Clinical Evaluative Studies (ICES)</p>	<ol style="list-style-type: none"> 1. The CCRS is used to support standardized reporting in LTCHs, personal care homes, and nursing homes. 2. CCO requires the data to support 4 business streams: <ol style="list-style-type: none"> a. ATC: develop patient flow models for Ontario, support evaluation of Ministry-led initiatives, and support the Ontario’s Seniors Strategy b. ORN: conduct analyses to understand how CKD patients interact with the healthcare system. c. Strategic Analysis & Modelling: develop patient flow models d. Cancer Program: explore barriers in palliative care access 	<p>This dataset contains:</p> <ul style="list-style-type: none"> • Administrative data • Clinical data • Demographic data 	<p>Institute for Clinical Evaluative Science (ICES)</p>
<p>Complex Continuing Care Reporting and Complex Continuing Care (CCRS) – Ministry of Health and Long Term Care (MOHLTC)</p>	<ol style="list-style-type: none"> 1. This data is used for the purpose of patient-based funding analysis. 2. CCO requires the data to carry out patient-based funding analysis 	<p>Data elements include health card number, sex, and birth date and client postal code.</p>	<p>MOHLTC</p>

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Mortality Data	<ol style="list-style-type: none"> The purpose of this data holding is for CCO to receive mortality data which contains the date of death and cause of death for Ontario residents who have died in Ontario for planning and management purposes. PHI is collected to measure cancer survival. 	The dataset contains: <ul style="list-style-type: none"> Administrative data Demographic data 	Ministry of Government Services Office of the Registrar General
Diagnostic Assessment Program – Electronic Pathway Solution (DAP-EPS)	<ol style="list-style-type: none"> The purpose of the data holding is to securely store data (including PHI) collected from all regional cancer programs for DAP oversight. PHI is collected to evaluate the impact DAPs have on patients in the diagnostic phase of the cancer journey. 	This data holding contains the following categories of data: <ul style="list-style-type: none"> Administrative data Clinical data Demographic data Usage data Wait Times data 	Hospitals
Diagnostic Assessment Program – Diagnostic Data Upload Tool (DAP – DDUT)	<ol style="list-style-type: none"> The purpose of the data holding is to securely store data (including PHI) collected from all regional cancer programs for DAP oversight. PHI is collected to evaluate the impact DAPs have on patients in the diagnostic phase of the cancer journey. 	This data holding contains the following categories of data: <ul style="list-style-type: none"> Administrative data Clinical data Demographic data Usage data Wait times data 	Hospitals
Discharge Abstract Database (DAD)	DAD contains summary diagnostic and treatment information about patients who have received healthcare services as an inpatient (including acute care, chronic care and rehabilitation care) in Ontario hospitals.	The dataset contains: <ul style="list-style-type: none"> Administrative data Clinical data Demographic data 	CIHI
Dyspnea Management Program	<ol style="list-style-type: none"> The purpose of the data holding is to securely store data (including PHI) collected from 6 hospital sites for the dyspnea management pilot project. PHI is collected to evaluate the impact that dyspnea management 	This dataset contains: <ul style="list-style-type: none"> Clinical data Demographic data 	Hospitals

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	has on lung cancer patients, whether a subset of patients benefit from counselling and to determine if counselling results in any secondary impacts on the health system.		
Emergency Department (ED) Patient Satisfaction Survey Data	<ol style="list-style-type: none"> 1. To assist with patient satisfaction reporting. All P4R hospitals were required to conduct patient satisfaction surveys and ATC reported back on the results across the province. 2. ATC did not need the PHI for the operational reporting there have been ad-hoc requests that involve linking data to other administrative databases (<i>i.e.</i>, NACRS). 	Demographic information (age, postal code, gender), visit information (chart # reg #, site, timestamps)	Hospitals
Emergency Room National Ambulatory Reporting System Initiative (ERNI)	<ol style="list-style-type: none"> 1. The purpose of this data holding is to evaluate ER wait times for provincial ER/ALC Strategy, including but not limited to return on investment, performance improvement, Ministry LHIN Performance Agreements and data quality assessment. 2. PHI is collected to determine and remove duplicate data entry errors from the analysis as well as to calculate percentage of patients returning to an ER within a specified time period as a measure of quality of care and potential negative impact of ER focus. 	The dataset contains: <ul style="list-style-type: none"> • Clinical data • Demographic data 	Hospital sites submit to CIHI NACRS. Extract of file is transferred securely from CIHI to ATC Informatics within CCO using Tumbleweed
eOutcomes – Head & Neck Cancer	<ol style="list-style-type: none"> 1. The purpose of the data holding is to capture and monitor outcomes data for patients with head and neck cancer treated with radiotherapy in a provincial, systematic way. 	This dataset contains: <ul style="list-style-type: none"> • Clinical data (<i>e.g.</i>, outcomes, diagnosis, radiotherapy details) 	Physicians/Data Managers (outcomes) ALR Data (diagnosis, radiotherapy details)

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	<ol style="list-style-type: none"> PHI is collected to ensure accurate capture of patients' outcomes post-radiotherapy, and to facilitate the identification of inadvertent duplicate cases. 	<ul style="list-style-type: none"> Demographic data (patient name, MRN) 	
ePath	<ol style="list-style-type: none"> The Pathology Database is comprised of patient and tumour information for cancer and cancer-related pathology reports (tissue, cytology), submitted from public hospital (and some commercial) laboratories. ePath documents patient, facility, and report identifiers, and tumour identifiers, such as site, histology and behaviour. PHI is used to support management decision-making, planning, disease surveillance and research, as well as contributing to resolved incidence case data in the OCSR. 	<p>The dataset contains:</p> <ul style="list-style-type: none"> Administrative data Clinical data Demographic data Facility data 	<p>Hospitals</p> <p>Some commercial laboratories</p>
Evidence-Based Program (EBP)	<ol style="list-style-type: none"> The EBP database stores patient and treatment information about systemic therapy drug utilization at Ontario hospitals. PHI is required to conduct analysis and reporting to the MOHLTC on the EBP for health system planning purposes. a. 	<p>This dataset contains:</p> <ul style="list-style-type: none"> Administrative Data Clinical Data (eligibility criteria) Demographic Data 	Hospitals
Health Based Allocation Model (HBAM) Inpatient Group (HIG)	<ol style="list-style-type: none"> The purpose of this dataset is to inform the funding methodology being used for cancer quality-based procedures. This data is needed to determine funding at a patient level for cancer quality-based procedures. 	<p>This dataset contains replica components of DAD and NACRS data</p>	CIHI
Lung Cancer Screening Pilot at High Risk (HR LCSP) Data	<ol style="list-style-type: none"> Performance management and evaluation of the HR LCSP program Improve data accuracy Educational and training purposes 	<p>This dataset contains:</p> <ul style="list-style-type: none"> Clinical Data (e.g. radiology reports, 	Participating Pilot Hospitals

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		images, risk assessments) <ul style="list-style-type: none"> • Administrative data (e.g. wait times, diagnosis codes) • Demographic Data 	
Incident Case Level Stage Data	<ol style="list-style-type: none"> 1. This linked data set indicates staging data created from OCRIS and ALR source records using SAS and is a characteristic of cases of cancer in the OCR. 2. This PHI is needed to accurately attribute the correct stage to its case, and accurately present the real person, case and stage for granular analysis (e.g., one hospital, one local, one cancer type, patient contact studies, etc.). Note that “person” is only defined by a machine generated ID number. 	The dataset contains <ul style="list-style-type: none"> • Clinical data • Patient-level data 	OCRIS and ALR
Interactive Symptom Assessment and Collection (ISAAC)	<ol style="list-style-type: none"> 1. ISAAC is required to generate Physician Reports for the purpose of quality management 2. ISAAC data is also used for analysis and reporting to support health system management 	<ul style="list-style-type: none"> • Patient enrollment and demographic data • Physician Identifiers • Patient Reported Outcomes (PROs) (Symptom management data) • Patient Experience Real Time Measurement data (patient feedback about their experiences) 	<ul style="list-style-type: none"> • Participating ISAAC sites; and • Orthopedic clinics and assessment centres

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		throughout their cancer journey)	
Interim Annotated Tumour Project (ATP) Database	<ol style="list-style-type: none"> 1. The Interim ATP Database provides an integrated set of data, combining tumour information from the Ontario Institute for Cancer Research (OICR)'s Tumour Bank with CCO's OCSR, for the purpose of increasing the accuracy and utility of the information for both researchers and CCO planners. 2. PHI is used by researchers to study the association between genetics and response to cancer drugs. CCO also uses the PHI in this data holding to create clinical guidelines for the care and treatment of cancer patients in Ontario. 	<p>The dataset contains:</p> <ul style="list-style-type: none"> • Administrative data • Clinical data • Demographic data 	<p>OICR CCO's Cancer Registry</p>
Magnetic Resonance Imaging (MRI)	<ol style="list-style-type: none"> 1. The MRI Efficiency data is used to produce the MRI Efficiency Program Dashboard to understand wait times for MRI procedures in Ontario hospitals. 2. MRN number is used to calculate MRI wait times for each unique patient. 	<p>The Dataset contains:</p> <ul style="list-style-type: none"> • MRN • Patient Type • Procedure Name 	Hospitals
Multidisciplinary Cancer Conference (MCC)	<ol style="list-style-type: none"> 1. The purpose of the data holding is to obtain a better understanding of the outcome of individuals being discussed at MCCs (e.g., other patient conditions, or other patient treatments), as well as to analyze patient movement within and between facilities. 2. PHI is collected to conduct analysis and provide operational advice with respect to MCC initiatives in Ontario, to 	<p>This dataset contains:</p> <ul style="list-style-type: none"> • Administrative data • Clinical data 	Hospitals

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	the MOHLTC, the MCC facilities, and the LHINs.		
National Ambulatory Care Reporting System (NACRS)	NACRS contains summary diagnostic and treatment information about patients who have received outpatient surgery or selected other treatments (chemotherapy, emergency department visits, dialysis and cardiology) in Ontario hospitals.	The dataset contains: <ul style="list-style-type: none"> • Administrative data • Clinical data • Demographic data 	CIHI
National Rehabilitation Reporting System (NRS)	<ol style="list-style-type: none"> 1. NRS contains client data collected from participating adult inpatient rehabilitation facilities and programs across Canada. 2. CCO requires the data to support 4 business streams: <ol style="list-style-type: none"> a. ATC: develop patient flow models for Ontario, support evaluation of Ministry-led initiatives, and support the Ontario's Seniors Strategy. b. ORN: conduct analyses to understand how CKD patients interact with the healthcare system. c. Strategic Analysis & Modelling: develop patient flow models. d. Cancer Program: explore barriers in palliative care access. 	Data elements include: <ul style="list-style-type: none"> • Administrative data • Clinical data • Demographic data 	<p>Institute for Clinical Evaluative Sciences (ICES)</p> <p>Participating adult inpatient rehabilitation facilities and programs across Canada (e.g., hospital rehabilitation units, designated rehabilitation beds)</p>

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New Drug Funding Program (NDFP)	<ol style="list-style-type: none"> 1. The NDFP database stores patient and treatment information about systemic therapy drug utilization at Ontario hospitals. 2. . PHI is required to conduct analysis and reporting to the MOHLTC on the NDFP for health system planning purposes. 	This dataset contains: <ul style="list-style-type: none"> • Administrative data • Clinical data (eligibility criteria) • Demographic data 	Hospitals
Ontario Drug Benefit (ODB)	<ol style="list-style-type: none"> 1. The ODB database stores patient and treatment information about systemic therapy drug utilization at Ontario hospitals. 2. CCO (in particular the NDFP and PDRP) need information about the volumes of oral chemotherapy drug units that are dispensed. 	Data elements include: <ul style="list-style-type: none"> • Drug identifier • LTC indicator • Patient pharmacy • Physician identifiers Each record is a separate drug claim.	Institute for Clinical Evaluative Sciences (ICES) The pharmacist submits a claim for each prescribed drug that is covered under the ODB formulary, and each dispensed claim forms a record in the ODB database.
Ontario Association of Community Care Access Centres (OACCAC): - Home Care Database - Resident Assessment Instrument (RAI) – Home Care - RAI – Contact Assessment - RAI – Palliative Care	<ol style="list-style-type: none"> 1. The OACCAC contains data on Ontario’s 14 CCACs, and includes four data holdings. The data is used for the purpose of home care, care in the community, and hospice and palliative care. 2. Purposes are divided into 4 business streams, per below: <ol style="list-style-type: none"> a. Health System Funding Reform: analyze service utilization and enhance quality-based funding model based on the findings. b. ATC: pathway modelling for ALC patients c. ORN: understand wait times for LTC and dialysis service utilization by patients with end-stage renal disease; understand 	Data elements include: <ul style="list-style-type: none"> • Demographic data (e.g., HIN, sex, birth date, geography) • Clinical data (e.g., outcomes of RAI assessment in home care, receipt of health services) • Administrative data (e.g., HIN, admission and discharge date for home care) 	Ontario’s CCACs

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	<p>community service utilization for patients with CKD; using this knowledge to identify potential areas for coordination of care</p> <p>d. Cancer Clinical Programs: understand end-of-life care for cancer patients.</p>		
<p>Ontario Cancer Registry Information System (OCRIS)</p>	<ol style="list-style-type: none"> 1. The OCR is a computerized database of information on all Ontario residents who have been newly diagnosed with cancer ("incidence") or who have died of cancer ("mortality"). All new cases of cancer are registered, except non-melanoma skin cancer. This information is used to support management decision-making, planning, disease surveillance and research. 2. PHI is collected to link records and establish which records belong to which patient. The PHI is frequently required by internal and external researchers. The Canadian Cancer Registry MOU contains the requirement that PHI be included in CCO annual submissions of newly diagnosed patients. 	<p>The dataset contains:</p> <ul style="list-style-type: none"> • Administrative data • Clinical data • Demographic data 	<p>CIHI (DAD, NACRS)</p> <p>ALR (RCC and PMH reporting through Databook)</p> <p>Pathology Information Management System (PIMS), anatomical pathology reports from Ontario public and private laboratories</p> <p>Ontario Registrar General's Office, Mortality files enhanced by death certificate notifications from Statistics Canada for Ontario residents deaths in other provinces/territories</p> <p>Out of Province, notifications from other provinces/territories of Ontario residents diagnosed or treated in the notifying P/T</p>

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Ontario Cancer Symptom Management Collaborative (OCSMC) Symptom Management Database	<ol style="list-style-type: none"> The Symptom Management Reporting Database was developed in order to assess the goal of OCSMC, which is to improve symptom management and collaborative palliative care planning through earlier identification, documentation and communication of patients' symptoms and performance status. PHI is collected to evaluate the provision of symptom management and palliative care planning for cancer patients in Ontario. 	This dataset contains: <ul style="list-style-type: none"> Clinical data Demographic data 	Hospitals
Ontario Laboratories Information System (OLIS)	<ol style="list-style-type: none"> To support CCO's ORN and DAP-EPS Programs in accordance with CCO's Data Privacy Agreement with the MOHLTC as a PE, as amended. PHI is required to enable CCO to link OLIS data with its patient records within other PE data holdings – such linkage is required to carry out health analytics. 	This dataset contains: <ul style="list-style-type: none"> Laboratory test result information from patients across Ontario 	MOHLTC (via eHealth Ontario)
Ontario Mental Health Reporting Systems (OMHRS)	<ol style="list-style-type: none"> The OMHRS collects data on patients in adult designed inpatient mental health beds. This includes beds in General, Provincial Psychiatric, and Specialty Psychiatric facilities. RAI – Mental Health is used to collect the data. CCO's ATC requires the information to better understand ALC in Ontario, and to support Ministry-led initiatives such as Ontario's Seniors Strategy. 	Data elements include: <ul style="list-style-type: none"> Administrative data Clinical data Demographic data 	Institute for Clinical Evaluative Sciences (ICES) Originally collected from general, provincial psychiatric, and specialty psychiatric facilities.

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Ontario Evidence-Based Positron Emission Tomography (EB-PET) Program	<ol style="list-style-type: none"> The purpose of this data holding is to carry out CCO's mandate to operate the evidence-based PET Scans Ontario Program. PHI is collected by CCO to: <ul style="list-style-type: none"> Provide direction to the PET Steering Committee and/or MOHLTC Link to other data holdings for reporting and analysis for the evaluation and management of the PET Scans Ontario Program. 	<p>This dataset contains:</p> <ul style="list-style-type: none"> Administrative data Clinical data Patient demographic data Physician demographic data 	<p>Referring physicians</p> <p>Diagnostic centres</p>
Ontario Renal Network (ORN)	<ol style="list-style-type: none"> The purposes of the ORN data holding are: <ul style="list-style-type: none"> Performance measurement and management; Monitoring of system quality; Funding; Data quality; System planning; and CKD funding model development. PHI is used to support management, funding, data QA, decision-making, planning, and disease surveillance and research activities. 	<p>The dataset contains:</p> <ul style="list-style-type: none"> Clinical data Demographic data Service volumes 	<p>Hospitals (ORRS)</p> <p>MOHLTC Sunnybrook Research Institute (SRI)</p>
Out-of-Country (OOC)	<ol style="list-style-type: none"> The OOC data holding stores information about reimbursement for out of province/OOC cancer drugs or treatment. We use it as a PE to monitor trends in OOC services – for example to identify if a trend is occurring for one treatment, and to identify if and when it is more effective to deliver 	<p>This dataset contains:</p> <ul style="list-style-type: none"> Administrative data Clinical data 	<p>MOHLTC</p>

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	<p>treatments in the province. It is also used for purposes of reimbursing patients on behalf of the MOHLTC.</p> <p>2. PHI is needed to (1) conduct analysis and reporting to the MOHLTC on the OOC program for health system planning purposes (2) to reimburse eligible patients.</p>		
Out of Province (OOP) Data	<p>1. This data holding contains persons with OCSR reportable diseases. The purpose of these records is to serve as source records to create incident cases for the EDW-OCSR. Both alone, and as source records for incident cases, OOP data support management decision-making, planning, disease surveillance and research.</p> <p>2. PHI is collected to ensure accuracy in linking records in EDW. PHI is used by internal and external researchers at the source record level.</p>	<p>This dataset will contain:</p> <ul style="list-style-type: none"> • Administrative data • Clinical data • Demographic data 	<p>Out of Province</p> <p>Notifications from other provinces/territories of Ontario residents diagnosed or treated for cancer in the notifying P/T</p>
Pathology Data Mart	<p>1. This data holding is derived from the PIMS data holding and uploaded into the EDW for planning and management purposes.</p> <p>2. PHI is used to support management decision-making, planning, disease surveillance and research, as well to contribute to resolving incidence case data in the OCSR.</p>	<p>This dataset contains:</p> <ul style="list-style-type: none"> • Administrative data • Clinical data • Demographic data • Facility data 	PIMS
Registered Persons Database (RPDB) Data Mart	<p>The RPDB is a listing of all persons insured under OHIP. This data is used to ensure that individuals in other data sources are identified correctly and to support analysis by demographic groups and geography.</p>	<p>This dataset contains:</p> <ul style="list-style-type: none"> • Administrative data • Demographic data 	MOHLTC

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		<ul style="list-style-type: none"> • HIN 	
Specialized Services Oversight Information System (SSOIS)	<ol style="list-style-type: none"> 1. The purpose of the SSOIS data is to support planning, funding and forecasting for specialized cancer services within Ontario. 2. PHI is collected to calculate specific indicators and measures to gain a better understanding of volume and performance of specialized cancer services. 	This dataset contains: <ul style="list-style-type: none"> • Administrative data • Clinical data • Patient Demographic data 	Hospitals
Stem Cell Transplant (SCT)	<ol style="list-style-type: none"> 1. The purpose of the SCT data set is to support planning, funding and forecasting of SCTs within Ontario. 2. PHI is collected to calculate specific indicators and measures that are required to support the Goals and Objectives framework for the SCT project. 	This dataset contains: <ul style="list-style-type: none"> • Clinical/SCTs data • File descriptor data • Patient demographic data 	Hospitals
Systemic Treatment Funding Model (STFM)	<ol style="list-style-type: none"> 1. The purpose of the STFM PHI is to determine a funding model driven by systemic treatment activity data reported by cancer centres and hospitals. 2. PHI is needed to determine funding allocations for hospitals, on a patient-level basis. 	This data holding includes: <ul style="list-style-type: none"> • Clinical • patient level data (Same as ALR) 	From CCO's Activity-Level Reporting (ALR) data holding. Files originate from treating cancer centres and hospitals and are reported on a monthly basis.
Wait Times Information System (WTIS)	<ol style="list-style-type: none"> 1. The purpose of the WTIS data holding is to enable the monitoring of wait times. The Ontario Wait Time Strategy implemented the web-based WTIS to facilitate wait time management and to provide the public with wait time information on surgical and diagnostic procedures. 2. PHI is collected from hospitals and the Enterprise Master Patient 	This dataset contains: <ul style="list-style-type: none"> • Administrative data • Clinical data • Demographic data 	Hospitals EMPI

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	Index (EMPI) (which interfaces with the WTIS in order to organize patient information) and is used for the planning and management of the healthcare system.		

Prescribed Person

Data Holding	(1) Statement of Purpose & (2) Need for PHI	Data	Source
Colon Cancer Check (CCC) Interim Solution	<p>System no longer used, required for Data migration, Archive and Audit only</p> <p>1. The purpose of the data holding is to securely store data (including PHI) to support CCC Screening Operations.</p> <p>2. PHI is collected for CCC client management and operations including, clinical results, direct client interactions and correspondence.</p>	<p>This dataset contains:</p> <ul style="list-style-type: none"> • Clinical data • Demographic and address data • Call Centre operational activities data 	<ul style="list-style-type: none"> • MOHLTC • Laboratories • FH • Call Centre direct data entry.
Colon Cancer Check (CCC) List Management System (LMS)	<p>1. The purpose is to support CCC Screening Operations.</p> <p>2. PHI is collected for data exchange to and from Health Service Providers via secure web portal (“OMD”) as well as for validation of patient lists and electronic distribution of Provider Reports.</p>	<p>This dataset contains:</p> <ul style="list-style-type: none"> • Clinical data • Client Demographic data • Provider Demographic and Address data 	<ul style="list-style-type: none"> • CCC - Siebel
Siebel	<p>1. The purpose of this data holding is to support Integrated Screening Operations, Planning and Performance.</p> <p>2. Integrated Screening Siebel CRM system. It is a front end system for InScreen client management and operations including, Clinical Results, direct client interaction and Correspondence.</p>	<p>This dataset contains:</p> <ul style="list-style-type: none"> • Clinical data • Demographic and address data • Call Centre operational activities data 	<ul style="list-style-type: none"> • MOHLTC (RPDB, HNS, CHDB, CPDB, CAPE) • Laboratory (LRT) • Hospital (CIRT) • FH • Statistics Canada (PC to LHIN) • Call Centre direct data entry

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Screening Hub Integration	<p>1. The purpose of this data holding is to support Integrated Screening Operations, Planning and Performance.</p> <p>2. InScreen Integration Hub (Customer Data Integration) to support downstream InScreen information and data requirements. <i>E.g.</i>, Siebel InScreen and Data Mart reporting. Various sources from MOHLTC, Siebel InScreen, Statistics Canada and CCO are standardized, cleansed and integrated for downstream operations.</p>	<p>This dataset contains:</p> <ul style="list-style-type: none"> • Clinical data • Demographic and address data • Call Centre operational activities data 	<ul style="list-style-type: none"> • MOHLTC (RPDB, HNS, CHDB, CPDB, CAPE) • Laboratory (LRT) • Hospital (CIRT) • FH (Correspondence) • Statistics Canada (PC to LHIN) • Siebel Call Centre
Screening Hub Stage – Client Agency Program Enrollment (CAPE)	<p>1. The CAPE data set will be used to identify physicians in Ontario who have rostered patients.</p> <p>2. This information will be used to compile a list of eligible rostered patients who will be invited to participate in the CCC program.</p>	<p>This dataset contains:</p> <ul style="list-style-type: none"> • Administrative Physician Data • HIN 	<ul style="list-style-type: none"> • MOHLTC
Screening Hub Stage – Claims History Database (CHDB)	<p>1. The claims data received will be used to determine volumes of non-program FOBT kits processed and validating performance of facilities and physicians who have conducted Colonoscopies.</p> <p>2. It will also be used as criteria for identifying the candidate population for the invitation pilot.</p>	<p>This dataset contains:</p> <ul style="list-style-type: none"> • Administrative Care • Clinical Data • PHI 	<ul style="list-style-type: none"> • MOHLTC
Screening Hub Stage – Colonoscopy Interim Reporting Tool (CIRT)	<p>1. The purpose of this data holding is to understand colonoscopy activity conducted within participating facilities.</p> <p>2. The data collected through CIRT will be used to understand colonoscopy activity conducted within participating facilities from volume, wait time and quality perspectives. It is also used to determine funding and volume allocations across participating facilities.</p>	<p>This dataset contains:</p> <ul style="list-style-type: none"> • Administrative Care • Clinical Data • PHI 	<ul style="list-style-type: none"> • Hospitals

Data Holding	(1) Statement of Purpose & (2) Need for PHI	Data	Source
Screening Hub Stage – Lab Reporting Tool (LRT)	<p>1. The purpose of this data holding is to gather information from laboratories on FOBT results.</p> <p>2. The data collected through the LRT are FOBT results that is used for (a) generate participant communications; and (b) monitoring and reporting on FOBT volumes, geographic differences, test quality, variations between participating laboratories and highlighting the need for further awareness or education programs.</p>	<p>This dataset contains:</p> <ul style="list-style-type: none"> • Administrative Care • Clinical Data • PHI 	<ul style="list-style-type: none"> • Laboratories
Screening Hub Stage - Ontario Public Drug Programs (OPDP)	<p>1. The purpose of this data holding is to gather information of FOBT dispensed by pharmacies.</p> <p>2. This data will be used to evaluate the level of dispensing of FOBT kits at the pharmacies.</p>	<p>This dataset contains</p> <ul style="list-style-type: none"> • Administrative Pharma Data • PHI 	<ul style="list-style-type: none"> • MOHLTC
Screening Hub Stage – Ontario Cancer Registry OCR	<p>1. The OCR is a computerized database of information on all Ontario residents who have been diagnosed with cancer ("incidence") and/or who have died of cancer ("mortality"). All new cases of cancer are registered, except non-melanoma skin cancer.</p> <p>2. This information is used to support OCSR by identifying individuals who are ineligible for colorectal and cervical screening.</p>	<p>This dataset contains:</p> <ul style="list-style-type: none"> • Administrative Care • Clinical Data • PHI 	<ul style="list-style-type: none"> • CCO as PE
Screening Hub Stage – Registered Persons Database (RPDB)	<p>1. This data holding contains information from Registered Person Database. This data is used in operationalization of colorectal and cervical screening.</p> <p>2. This data will be used to identify Ontarians who are eligible and could be invited to participate in the CCC program. It will also be used for identity validation and data linking for client cancer journey assessment.</p>	<p>The dataset contains:</p> <ul style="list-style-type: none"> • Administrative Care • Clinical Data • PHI 	<ul style="list-style-type: none"> • MOHLTC
Screening Hub Stage - Siebel	<p>1. The purpose of this data holding is to integrate information for InScreen.</p> <p>2. Recent Client, Address and Screening related activity within Siebel InScreen, required in the Screening Hub for integration purposes.</p>	<p>The dataset contains:</p> <ul style="list-style-type: none"> • Client demographics and address information • PHI 	<ul style="list-style-type: none"> • Integration Hub • Call Centre direct entry

Data Holding	(1) Statement of Purpose & (2) Need for PHI	Data	Source
Primary Care Provider Reporting This is the same as the Primary Care Screening Activity Report (PC SAR)	1. This data holding contains information on primary care providers. 2. This is used to store primary care provider SARs. The reports summarize client level information for providers.	This dataset contains: <ul style="list-style-type: none"> • Clinical data • PHI 	<ul style="list-style-type: none"> • Integration Hub • Siebel
Cytobase	1. The purpose of this data holding is: -to carry out the mandate of the CSP -to facilitate the provision of health care related to cervical cancer screening to allow CCO to notify participants of their results -to maintain the OCSR -to conduct cancer planning and management as well as to perform quality and program management functions.	This dataset contains: <ul style="list-style-type: none"> • Demographic data about the patient, the requesting physician and the laboratory that assessed the test • Health information number • cervical test result 	CytoBase
Oracle Business Intelligence Enterprise Edition (OBIEE)	1. The purpose of this data holding is to provide segmentation of data which enables Siebel CRM, via Campaign Management, to generate invitation, reminder, recall and test result notification correspondence for each of the three Cancer Screening modules (CCC, OCSP and OBSP).	This dataset contains: <ul style="list-style-type: none"> • Clinical data • Demographic and address data • Call Centre operational activities data 	<ul style="list-style-type: none"> • This dataset is populated with data from Siebel CRM and the Integration Hub.
Mortality Data	1. The purpose of this data holding is for CCO to receive mortality data which contains the date of death and cause of death for Ontario residents who have died in Ontario for planning and management purposes. 2. PHI is collected to identify cases for the Ontario Cancer Screening Registry and for measuring cancer survival.	The dataset contains: <ul style="list-style-type: none"> • administrative data • demographic data 	<ul style="list-style-type: none"> • Ministry of Government Services • Office of the Registrar General
Integrated Client Management System – Ontario Breast Cancer Screening Program (ICMS-OBSP)	OBSP screening data entered directly from screenings sites into the CCO ICMS Oracle database – this is the operational database used for recruiting, registering, booking, capturing results and reporting results to clients and physicians, film tracking, assessment results capture, recall letters, and operational & management level reporting 1. The purpose of this data holding is to store screening	Clinical data (screening results, clinical history, assessments information, Screening appointment information, Demographic data, Physician information	

Data Holding	(1) Statement of Purpose & (2) Need for PHI	Data	Source
	<p>information for those clients participating in the OBSP program.</p> <p>2. PHI is collected to implement, plan, manage, evaluate, allocate resources to and report on performance of the OBSP. PHI is also collected for OBSP client management and operations, including clinical results, direct client interactions and correspondence.</p>		
<p>Data Submission Portal (DSP) – Registered Nurse Flexible Sigmoidoscopy (RNFS)</p>	<p>Registered Nurse Flexible Sigmoidoscopy information as reported by participating sites for use within the CCC Screening Program</p> <p>1. This is the landing area for the raw data submissions from participating hospitals, use the Integration Hub or Siebel for standardized and integrated information.</p>	<p>Program participant, responsible physician, nurse and Flexible Sigmoidoscopy procedure details</p>	
<p>Hub: Fulfilment House (FH)</p>	<p>Correspondence feedback file information regarding Address corrections, Mailing Status and Return Mail from the FH for InScreen Campaign/Correspondence operations.</p> <p>1. This is the landing area for the raw data extracts from the FH, use the Integration Hub or Siebel for standardized and integrated information.</p>		

Health Information Network Provider (HINP)

Data Holding	Description of Services	Source
<p>Diagnostic Assessment Program – Electronic Pathway Solution (DAP-EPS)</p>	<p>CCO provides the Diagnostic Assessment Program – Electronic Pathway Solution (DAP-EPS), a navigational web-based tool, for the purposes of connecting Referring Physicians, primary care providers, patients, staff at DAP Facilities and specialists that are part of the patient’s DAP Team, in order to facilitate the communication of information to patients and their designated caregivers, and providing patients and health information custodians with a centralized view of the information relating to the patients’ cancer diagnosis</p>	<ul style="list-style-type: none"> • Referring Physicians; • Primary Care Providers; • Patients; • DAP Facilities; • Specialists; • Designated Health Care Providers
<p>eClaims Solution</p>	<p>CCO provides the eClaims solution for the purposes of operating CCO’s Provincial Drug Reimbursement Programs (PDRP). The PDRP is the provinces operational unit responsible for administering cancer drug funding to hospitals. The solution offers a web-based portal or interfaces with existing hospital systems, enabling clinicians (pharmacists and physicians) to access and track patient’s historical treatment records, including ones submitted by other treatment facilities, and submit treatment orders. Additionally, it is used by CCO adjudicators and hospital users for drug claims reimbursement and the adjudication of drug eligibility.</p>	<ul style="list-style-type: none"> • Treatment Facilities; • Physicians; and • Pharmacists
<p>Electronic Canadian Triage and Acuity Scale (eCTAS)</p>	<p>CCO provides the eCTAS solution, a clinical decision support tool, to participating hospitals across the province. Patient information required to calculate a Canadian Triage Acuity Scale (CTAS) score is collected/entered into eCTAS. This information includes patient demographics (e.g. age), presenting complaints (why the patient came to the emergency department), and patient vital signs (e.g. blood pressure). Patient information is used to calculate an accurate CTAS score and provide safe, consistent patient care. Participating hospitals have access to a patient’s triage record for a period of 10 days to support the delivery of consistent care when a patient visits multiple hospitals.</p>	<ul style="list-style-type: none"> • Hospitals
<p>Integrated Client Management System (ICMS)</p>	<p>CCO provides ICMS for the purpose of supporting the scheduling and case management needs of sites for OBSP purposes. The sites input data of those clients for whom they provide OBSP Screening Services, using it for client registration, follow-up and case management. The intent is to foster the delivery of cancer services closer to the point of care, improve efficiencies and ensure greater accountability.</p>	<ul style="list-style-type: none"> • Participating OBSP Sites

Data Holding	Description of Services	Source
Interactive Symptom Assessment and Collection (ISAAC)	<p><u>Cancer Related PROs:</u></p> <p>Facilitate the exchange of cancer related PROs between participating ISAAC sites for the purpose of improving symptom screening and assessment, symptom control and access to coordinated palliative support for cancer patients.</p> <p><u>Hip and Knee Surgery PROs:</u></p> <p>Facilitate the exchange of Hip and Knee Surgery PROs between orthopedic clinics and assessment centres.</p> <p>PHI is required to support local quality improvement and research initiatives, and the evaluation of the appropriateness and effectiveness of surgical interventions.</p>	<ul style="list-style-type: none"> • Participating ISAAC sites • Participating Orthopedic clinics and assessment centres
Ontario Renal Reporting Systems (ORRS)	<p>CCO provides the ORRS web application to Ontario healthcare facilities that treat patients with Chronic Kidney Disease for the purposes of connecting these facilities when a patient transfers from one Site to another. ORRS allows the new or Transferring-In Site to determine if a patient has previously been treated at a different Site (the Transferring-Out Site) and, if so, access certain PHI related to the treatment that the patient received in the past. This facilitates the care and treatment by the Transferring-In Site by, for example, avoiding duplicate testing and the requirement for the patient to repeat their health history to their new healthcare providers.</p>	<ul style="list-style-type: none"> • Transferring-In sites; and • Transferring-Out sites
Positron Emission Tomography (PET) Scans Ontario Web Application	<p>CCO provides the PET Scans Ontario web application to physicians and PET Centres for the purposes of supporting the activities of the uninsured program domains (PET Registry, PET Clinical Trials and the PET Access Program) and insured PET scan services under the EB-PET Program. The PET Scans Ontario web application provides the ability for physicians, through the use of web-based forms, to request PET scans for their patients and the ability for PET Centres, through the use of web-based forms, to submit results from PET scans performed at their institutions. Health Information Custodians, authorized users, are required to accept a Terms of Use prior to being authorized to use the web application.</p>	<ul style="list-style-type: none"> • Referring physicians • PET Centres