

Data Elements for Public Reporting on WERS

Request	User Input	Definition
Report Date:		Date reported to the MOHLTC (Month, Day, Year).
Facility Number:		Input the facility number.
Institution Number:		Input the site specific identifier.
Person Reporting, Title:		Name and title of the person reporting the data (e.g., Jane Doe, ICP).
Reporting Period:		Input the reporting period (Month, Year).
Number of new nosocomial cases of CDI:		<p>Input the number of new cases of CDI (i.e., the patient has not had CDI in the past 8 weeks) where:</p> <ul style="list-style-type: none"> • CDI was not present on admission (i.e., the onset of symptoms is >72 hours after admission) OR • The infection was present on admission but related to a previous admission to the same facility within the last 4 weeks.
Number of new nosocomial cases of CDI associated with other health care facilities:		<p>Input the number of new cases of CDI where:</p> <ul style="list-style-type: none"> • CDI was present on admission OR • With symptom onset <72 hours after admission AND • The patient was exposed to any other health care facility (including LTC) within the last 4 weeks.
Number or new cases of CDI associated with a source other than a health care facility or unknown/indeterminate source:		<p>Input the number of new cases of CDI where:</p> <ul style="list-style-type: none"> • CDI was present on admission OR • With symptom onset <72 hours after admission AND • There was no exposure to any health care facility within the last 4 weeks OR • The source of infection cannot be determined.
Total number of patient days for the hospital reporting period:		The number of patient days for the hospital for the month of reporting (or the average number for the last 3 months for which data is available), excluding NICU patient days.