

NSIR-RT UPDATE

Canadian Partnership for Quality Radiotherapy | Canadian Institute for Health Information

NSIR-RT by the Numbers

Over **50** registered users from **21** sites in **5** provinces.

Almost 800 incidents submitted

Upcoming Lunch and Learns and Tutorials

Not an NSIR-RT member or user but want more information on how national incident reporting can benefit your centre? Join us for a fall Lunch and Learn

09/ 27 @ 12:00 EST

10/13 @ 12:00 EST

NSIR-RT user looking for tips and tricks to help make incident entry more efficient, or to understand how to make the analytic tool work for you? Come to a tutorial session

09/28 @ 2:00 EST

10/14 @ 2:00 EST

Beyond BETA testing

The NSIR-RT pilot launched 12 months ago in September 2015 and has seen a steady increase both in registered users and submitted incidents. Our team has been reviewing trends in submitted incidents, and tracking user feedback in an effort to improve usability and functionality as we move beyond the BETA pilot.

System Changes

- Minor typos have been corrected
- Latent medical harm will no longer be applicable if dosimetric severity is NONE.
- Omissions (can you believe we forgot breast as a site?!) will be rectified in post-pilot enhancements.

What you experience

New skip logic enhancements will be rolling out as part of the post-pilot phase and will facilitate rapid incident submission and improved data quality. In March NSIR-RT launched its analytics tool. Analytics allow your centre to conduct detailed analysis to compare your centre to national aggregate incident trends. Use the “drill” functionality to begin drill down to a case listing summary and then link to the individual record detail. This helps to contextualize the data to enhance understanding.

Next Steps

CIHI plans to end the pilot this month. You won't notice a difference at the front end and we expect all users will continue to submit incidents. Behind the scenes CIHI and CPQR will work together to analyze incident trends and refine the structure to improve the system for our users. Contact us at nsir@cihi.ca with feedback!

Subject: NSIR-RT incident alert / Avertissement d'incident dans le NSIR-RT

La version française suit...

Subject line: NSIR-RT incident alert

Dear NSIR-RT user,

We have been notified of a serious incident submitted to NSIR-RT that could potentially recur at another cancer centre.

NSIR-RT Alerts

Why use an alert?

The purpose of the NSIR-RT alert system is to bring certain incidents to the attention of users as quickly as possible. These incidents are preventable, likely to reoccur, and cause harm.

The aim is to rapidly notify NSIR-RT users in order to prevent similar events elsewhere in the country.

What is an alert?

NSIR-RT sends notifications of incidents that sites have identified as serious and potentially dangerous. They are distributed by e-mail to NSIR-RT users, with a guide of how to locate the incident in the database and any other information provided by the submitting facility.

How to: Send a Message

1. Click on the MESSAGES tab to open the communication tool
2. Click on COMPOSE MESSAGE to open up a new message
3. Type CIHI in the TO line and the relevant subject under SUBJECT such as "NSIR-RT Incident Alert"
4. Include the NSIR case ID# and any additional information in the body of the message.

Wanted: NSIR-RT Super Users

It's no surprise that during our development of NSIR-RT we have cultivated some "super-users". Brian Liszewski, Crystal Angers, Michael Milosevic and Kathryn Moran can all classify an incident in their sleep. As we look towards the creation of a CIHI NSIR-RT Advisory Committee, we would like to foster more experts across the country. These "super-users" will help promote uptake and consolidate practice across the country and will:

- provide input on NSIR-RT functionality and system improvements
- facilitate local uptake of, and education on, NSIR-RT through examples developed from the BETA
- Support the creation of a pan-Canadian Advisory Committee to analyze national incident trends

Does this sound up your alley? We are convening 1-2 regional workshops over the winter - contact us to confirm your interest.

When should we use an alert?

An alert should be used when a facility recognizes that an incident that has occurred has **potential to reoccur** elsewhere, causing **harm to a patient**. The incident could have a high likelihood of latent medical or **the potential to cause** acute medical harm.

How do we action an alert?

If your centre recognizes an incident that should be communicated to all other users, enter as much information as possible into the NSIR-RT database. Although the incident may not yet be fully investigated, there is benefit to distributing this information in a timely manner. Incidents can be released by CIHI back to the facility at a later date so that further information can be added once the investigation is complete.

The next step is to communicate the incident to CIHI using the NSIR-RT communication tool. Check out the "How To" inset on this page.

 NSIR-RT Pilot Survey - We need your input!

Help us interpret the results of the pilot test as we evaluate the successes and challenges of NSI-RT. On August 22 you should have received an invite to participate in a survey of the NSIR-RT, powered by Questback.

Your responses to the survey will inform and inspire changes and improvements to the system including:

- What resources and training are made available for your staff?
- What are the relevant incident details that need to be captured for sharing and learning?
- What reports are most helpful to your centre for the implementation of prevention strategies?

Did you know?

- Almost half of reported incidents have "other" as **problem type**?
- Coding of **reportable circumstance** was the most common topic of questions asked by users

The survey deadline is September 16th, 2016. The survey will take approximately 20-30 minutes. You will have the option to quit and save your responses should you require more than one sitting to complete. All responses will remain confidential and results will be aggregated. Contact nsir@cihi.ca if you require us to re-send the survey link.

Pilot Feedback: We're listening!

Over the course of the pilot, users have contacted us with feedback on the NSIR-RT Minimum Data Set (MDS) and system. Here's a sample of their comments:

Alert Notification	Suggest adding more information about the incident in the alert message text.
Incident Impact	Need clarification on definition of "Reportable Circumstance" and "Near Miss"
Incident Discovery	Missing values in "Health Care Providers"
Incident Details	Several users came across problem toes and processes which were not listed in the NSIR-RT tool
Incident Investigation	Missing values in "Ameliorating Actions" and "Actions Taken"
	The "Safety Barriers" list is too extensive

With the pilot wrapping up and enhancements on the way, have your say and let us know how we can improve NSIR-RT.