

# Thank you

More than **50,000** medication incidents are being shared in NSIR.

National System for Incident Reporting



## Collect. Analyze. Share. Learn.



Welcome to the electronic bulletin for the National System for Incident Reporting (NSIR). In our efforts to keep you informed, we highlight recent program developments, preview ongoing projects and feature key topics to support data quality and continuous learning from incident data.

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## Highlights

### NSIR system downtime, June 2 and 3



The Canadian Institute for Health Information (CIHI) has scheduled a database migration for the weekend of June 2 and 3, 2018. NSIR will **not** be available on these days.

If you have any questions or concerns, please email [nsir@cihi.ca](mailto:nsir@cihi.ca).

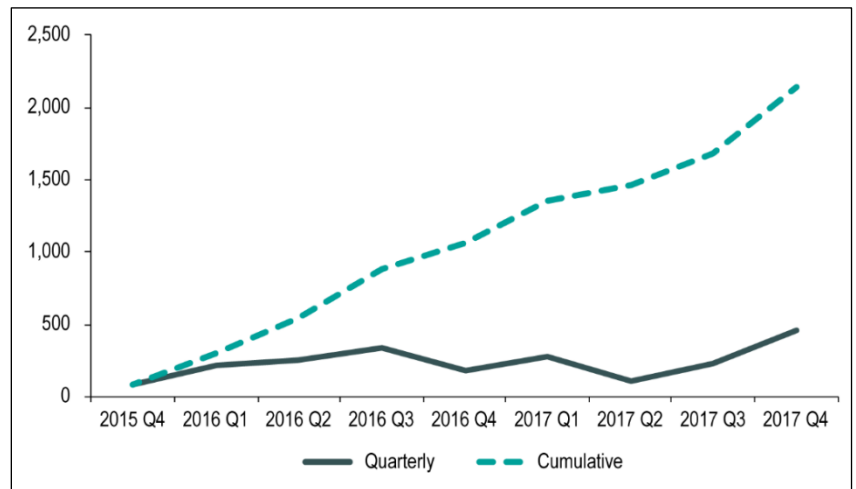
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## NSIR-RT update

### Participation

There are currently 24 facilities from 5 provinces participating in NSIR–Radiation Treatment (NSIR-RT). The chart on the right shows the quarterly and cumulative submissions since launching the pilot phase in late 2015. Quarterly submissions ranged from 81 in the fourth quarter of 2015 to 460 in the final quarter of 2017. Cumulative submissions rose steadily, with the most received in the final quarter of 2017 (over 2,100). We encourage everyone to continue to submit incidents!

**Figure** Radiation treatment incidents submitted, by quarter



### Use of *other* since implementing changes to NSIR-RT data elements

By the middle of the pilot phase, it was noted that *other* was the most frequently used value for Problem Type and accounted for more than 40% of the values selected. Anecdotal feedback and pilot user survey results indicated that the available values for Problem Type did not represent a complete set and that the value labels did not describe issues in a familiar way. The Canadian Partnership for Quality Radiotherapy (CPQR) expert working group examined all of the available feedback and redesigned the value set for Problem Type. At the same time, Process Step Where Incident Occurred, Process Step Where Incident Was Detected and Contributing Factors were changed based on feedback and questionnaire responses. The changes were implemented last July.

The table below shows the use of *other* before and after changes were made to the system. While still relatively high, the use of *other* for Problem Type is nearly half of what it was during the pilot. This is evidence that the changes, coupled with coding instruction delivered through the CPQR’s Incident Investigation course, have resulted in more precise coding of Problem Type.

At the same time, an increase in the use of *other* for Process Step Where Incident Occurred was noted. The reasons for this are unknown. We welcome feedback from users if there are concepts not represented in the data elements. Ultimately, the use of *other* for any data element should be limited to exceptional cases.

**Table** Use of *other* before and after changes to NSIR-RT system

Data element	Process Step Where Incident Occurred	Process Step Where Incident Was Detected	Problem Type	Contributing Factors
Pre-change	2%	3%	41%	5%
Post-change	10%	3%	22%	4%

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## NSIR-RT education

In fall 2017, the CPQR organized and delivered the course Radiation Treatment Incident Investigation and Learning. Interest exceeded capacity, so CPQR created a waiting list for future sessions. The next session started on April 3 and will run for 7 weeks on Tuesday from 2 to 3:30 p.m. ET. Please visit [CPQR's website](#) or contact Erika Brown, Executive Director, at [erika.brown@cpqr.ca](mailto:erika.brown@cpqr.ca) for more information.

## NSIR-RT Advisory Committee

The inaugural meeting of the NSIR-RT Advisory Committee was held on February 15, 2018, in Calgary, Alberta. The committee oversees the operation and evolution of NSIR-RT to ensure that it meets the current and future needs of the Canadian radiation treatment community. The committee will work with CIHI to identify patterns and trends in the radiation treatment incident data, and will provide context for quality and safety improvements based on these trends. A new NSIR-RT bulletin will be created to provide the radiation treatment community, cancer agencies and the broader health system with information that supports improved program quality and safety. We are working to release our first issue later this year!

## Recent and upcoming CIHI releases



### Opioid reporting

In September 2017, CIHI released [Opioid-Related Harms in Canada](#). This chartbook provides an overview of opioid harms in Canada, including 2016–2017 data on emergency department visits in Ontario and Alberta and hospitalizations due to opioid poisoning at the national and provincial levels, and for some municipalities.



### Drug Use Among Seniors in Canada

On May 17, 2018, CIHI will release *Drug Use Among Seniors in Canada, 2016*. This report provides information on the number and types of drugs prescribed to seniors in the community and in long-term care facilities. It also examines vulnerable populations at risk of polypharmacy and inappropriate medication use by measuring inequalities according to sex, age, neighbourhood income and geographic location. Visit [cihi.ca](http://cihi.ca) in May to read the full report!

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## Reporting and learning

### ISMP Canada's recent alerts and safety bulletins

- [Alert: Polyethylene Glycol and Propylene Glycol Mix-Up Causes Harm](#)
- [Death Associated With an IV Compounding Error and Management of Care in a Naturopathic Centre](#)
- [Students Have a Key Role in a Culture of Safety: A Multi-Incident Analysis of Student-Associated Medication Incidents](#)

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# Additional information

## Conferences of interest



### [Canadian Association of Pharmacy in Oncology Conference \(Gatineau, Que.\)](#)

May 3 to 6, 2018

The conference program was developed around the theme *Better Together*. It features a diverse slate of plenary and concurrent sessions, as well as hot topic discussions to engage participants and inform them of advances in oncology pharmacy.

### [e-Health 2018 \(Vancouver, B.C.\)](#)

May 27 to 30, 2018

Now in its 18th year, the e-Health conference offers top-quality learning and an opportunity to network with organizations and people who value quality health information as well as effective integrated system solutions. e-Health's vision is to *Celebrate, Grow and Inspire Bold Action in Canada's Digital Health Community*.

### [Canadian Pharmacists Annual Conference \(Fredericton, N.B.\)](#)

June 2 to 5, 2018

CPhA 2018 is an opportunity for pharmacists from across Canada to network with colleagues and to share new and exciting ideas, research and innovation. Presentations provide an opportunity for members of the pharmacy community to engage in sessions that promote evidence-based practice and decision-making.

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## Contact us



Thank you for taking the time to read the NSIR eBulletin. Unless otherwise stated, the reported NSIR findings are based on the voluntary reporting of medication incidents at participating health care facilities across Canada from 2008 to the present.

If there is anything you would like to see featured in an upcoming edition, please contact us at [nsir@cihi.ca](mailto:nsir@cihi.ca).

The NSIR eBulletin is distributed on a quarterly basis. Previous editions can be found on [cihi.ca](http://cihi.ca).

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