

# DIF2 Incident Management

launch date 1<sup>st</sup> November 2020

If you require any further assistance please contact the  
[Datix Helpdesk](#) or via phone on 0151 254 2553

## Welcome – Please sign the Register:

- What is your knowledge of Incident Management on a Scale of 0-5?

Complete the register before and after the training.

- Please feel free to ask any questions you may have that are not answered during the training



**YOUR FEEDBACK  
MATTERS**

# Incident Management Training

**This training presentation is divided into 5 sections:**

- 1 – Incident Management Overview & Pathway**
- 2 – Incident Management Review & Approval (DIF2)**
- 3 – Rapid Review Investigation Section**
- 4 – Additional functions available**
- 5 – Incident Module Protocol and Review Timescales**

# Learning Objectives

- Establish an understanding of Incidents Module, as part of the Datix Risk Management system
- Introduction to Datix Incident Management
- How to review and manage an incident using  
**DIF2 = Datix Incident Management Form**
- Identify, **what** to manage and **how** to manage
- Identify, **lessons learned**

# SECTION 1

## **Incident Management Overview & Pathways**

# Datix Incidents Module Overview

- DATIX is an integrated Risk Management system used to record, monitor and report Risk and Performance Management (both internally and externally) across the Organisation.
- The Incident Module within Datix provides a repository to record and manage all Incidents, accidents and near misses. The Organisation recognises the importance of incident reporting as an integral part of the risk management strategy. The Organisation is committed to improving the quality of Health, Safety and Welfare of its patients, staff and visitors. This is achieved through consistent monitoring and review of incidents that result, or have the potential to result in harm, damage to person, property or reputation. Incident reporting is a fundamental tool of risk management. If incidents are not properly managed, they may result in a loss of public confidence in the organisation

# Incident Definition & Timescales

## **What is an incident?**

Any untoward or unexpected event that leads to actual or potential harm or loss to Person, property or reputation

## **When do we report an incident:**

All incidents need to be reported within 24 hours of them occurring or as soon as an incident comes to our attention.

## **Who Should Report Incidents on Datix:**

It is a requirement of all staff that they report any incident, accident or near miss which has caused or has the potential to cause harm, loss or damage to any individual involved or loss or damage in respect of property or premises for which the organisation is responsible.

**You do not require a Datix login or password to record an incident.**

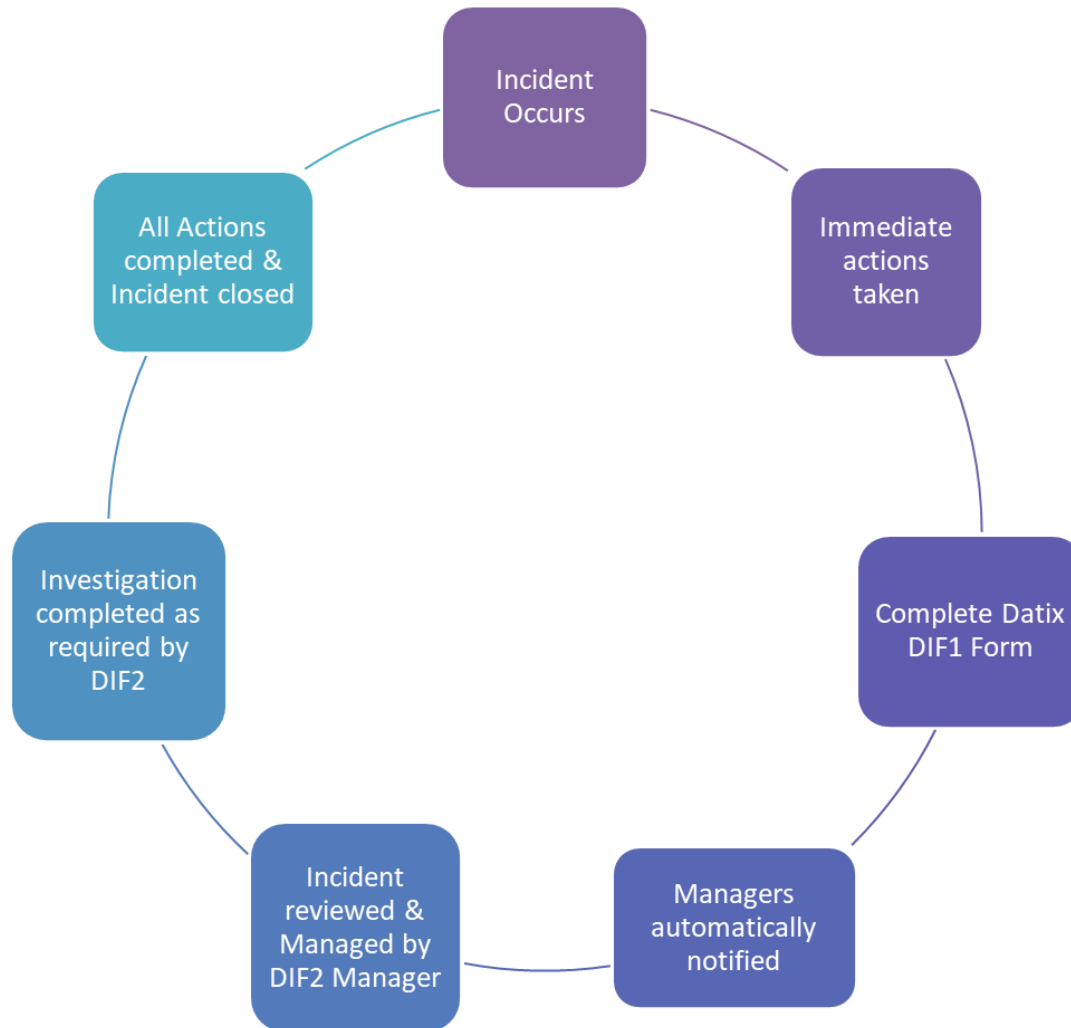
# Escalating incidents

In some circumstances, incidents will require immediate escalation to relevant managers within the organisation.  
This will depend on the incident level.

Incident Level	Escalation required
Level 1	<ul style="list-style-type: none"> <li>Report on Datix within 24 hours.</li> <li>No additional escalation required – automatic email notifications will be sent to relevant managers once reported.</li> </ul>
Level 2	<ul style="list-style-type: none"> <li>Additional escalation may be required, depending upon the nature of the incident. If this is the case, phone your Line Manager (In hours) or On Call Manager (Out of Hours).</li> <li>Report on Datix within 24 hours.</li> </ul>
Level 3	<ul style="list-style-type: none"> <li>Incident causing significant/major harm requires immediate escalation to your Line Manager (In hours) or On Call Manager (Out of Hours).</li> <li>Report on Datix within 24 hours.</li> </ul>



# Incident Reporting Cycle



# Incident Management Roles

## **DIF1 – Datix Incident Reporter**

Any member of staff can complete a DIF1 form to report an Incident, Accident or Near Miss.

All incidents must be reported within 24 hours.

Once completed the DIF1 reporter should select their relevant DIF2 Manager within the Manager field at the bottom of the DIF1 Form which will send them an automatic email notification of the incident

## **DIF2 – Datix Incident Managers**

Managers have been identified across the organisation that are responsible for reviewing and managing incidents to ensure all details are accurately completed and that any investigations, documents and action plans are updated and any lessons learned are shared within their area of responsibility.

# Incident Management Roles (Cont.)

## Key Leads

Senior Manager identified to provide the main link to the Quality & Governance team (Q&G) for all Datix requirements. They are responsible for keeping directorate profiles up-to-date, coordinating local training, ensuring investigations are completed in a timely manner and providing feedback on Datix operational issues and development requests.

## Specialist Leads

Staff identified across PC24 who will provide specialist expertise to managers dealing with a specific category related incident. Specialist leads include: Clinical Leads, Health & Safety, Safeguarding, Medication Management, Information Governance and IT.

# SECTION 2

## **Incident Management Review & Approval**

# How to access the Incidents Module

## System Access



- Click on the DATIX icon on your desktop



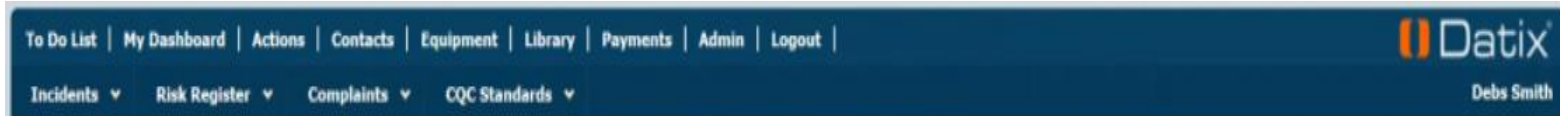
- A blank Incident Reporting Form (DIF1) will appear on screen
- Click login to sign in to the Datix System.
- A login and password are required. You will be notified of your login details.
- If you require assistance contact the Datix helpdesk at [Datix@pc24.nhs.uk](mailto:Datix@pc24.nhs.uk)

## Specific Record Access Email Notification

You can also access **specific** records from the link contained within any email notifications you receive about the incident. Once you have entered your login details the specific record will open

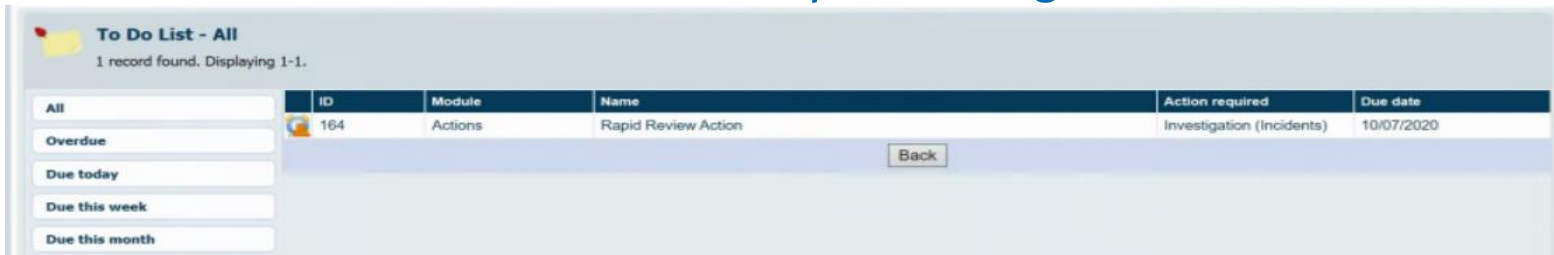
# Navigating the Datix System


Once you have logged into Datix you can navigate to the relevant module.



- The dark blue header bar will be customised depending upon your access permissions and is split into 2 rows:
- **Upper row** - System Wide sub-modules, My Dashboard, Actions & Contacts.
- **lower row** - CORE Modules to manage your Incidents, Risks & Complaints

**To Do List** – You will land on this when you first log in to Datix








- The To-Do List details all records requiring action. The To-Do list can be filtered using the tabs in the left hand menu.
- The alarm clock symbol flags records that are overdue 
- Alternatively, click on the relevant module name e.g. **Incidents** for all records

# Floating Toolbar



The floating toolbar is a navigation shortcut tool and is always located at the bottom left hand side of a Datix record.

-  Menu - lists all Sections in the left hand Panel.
-  Save - updates the record and saves your progress.
-  Cancel - closes and logs you out of the record
-  Next - moves to next record in the list.
-  Last - moves to last record in the list.

# Incident Module

Incidents		
Options	Statuses	
 Add a new incident	 New Incidents, awaiting review	5 records 5 Overdue
 My reports	 Being reviewed	3 records 3 Overdue
 Design a report	 Approved - Still Open	1 records 1 Overdue
 New search	 Approved - Closed	3 records
 Saved queries	 Rejected	0 records
 Show staff responsibilities		
 Help		

- The Incident Module is split into 2 main sections:
- **Options** – This section will allow you to add new incidents, search for records, select saved queries, design and run reports. (see Reports Training)
- **Statuses** – This section will allow you to see the current management stage of incidents for you to access, review, update and close records.



# Approval Status & Timescales

## **New Incidents Awaiting Review** - (Open within 2 Working Days)

All New Incidents reported. Access permissions are based on Role Profiles.

## **Being Reviewed** - (2/3 Working Days)

All incidents currently under review by DIF2 Managers.

## **Approved – Still Open** - (Regular Weekly Review until closure)

All Approved Open Incidents requiring action.

**Level 2&3** Incidents remain here for quality review and closure by HoS

**Level 1** Incidents can be closed directly by DIF2 Managers.

**Approved – Closed Incidents** - All Approved and Closed Incidents, with investigations & actions completed and documents & evidence attached. Closed records can be accessed at any time.

**Rejected Incidents** - All rejected Incidents. These records will be regularly audited by Head of Service and Governance & Quality Assurance Team.

# Incident Level Management

## **Level 1 Incidents:**

- To be reviewed, managed, approved and closed by DIF2 Managers.

## **Level 2&3 Incidents:**

- To be reviewed, managed and approved by DIF2 Managers, but quality checked & closed by Senior Manager e.g. Head of Service or Deputy Director.

## **Level 2&3 Incidents requiring amendments:**

- Incidents requiring amendments to remain in “Approved – Still Open” with email notification sent to the DIF2 Manager for any amendments by Head of Service or Deputy Director.

# New Incidents awaiting Review


**Incidents with status: New Incidents, awaiting review**  
5 records found. Displaying 1-5.

Query:

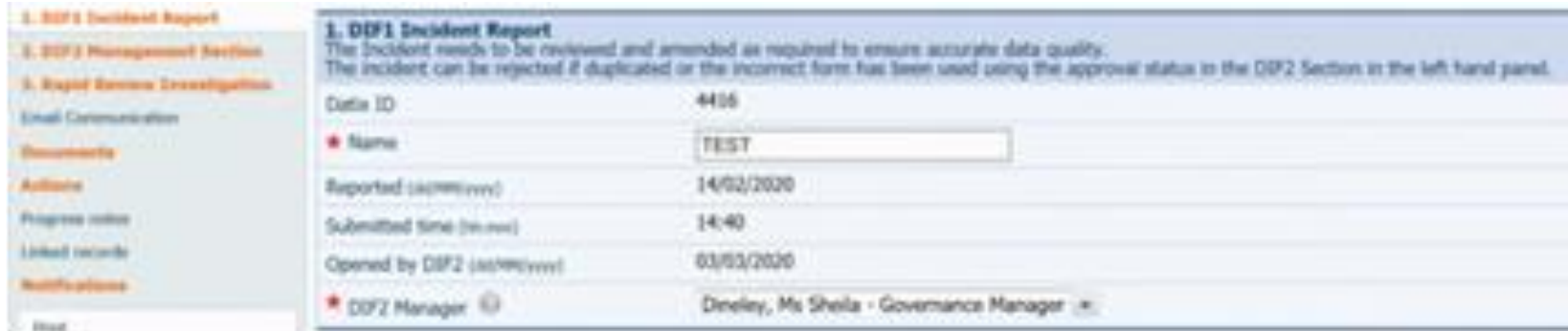
Save the current search as a query.

ID	Incident date	SDU	Service/Team	Type	Category	Sub category	Description	Result	Handler	Closed
4418	19/06/2020	Corporate	Governance and Quality	Patient	Medical Equipment	Failure of device/equipment (Not user error)	This is a TEST for DIF1 and DIF2 Form design	Level 2 (Amber)	TR	
4419	30/06/2020	Corporate	Governance and Quality	Staff	Accident	Burn or scald	This is a TEST Incident	Level 2 (Amber)	Ms Sheila Dineley	
4420	30/06/2020	Integrated Urgent Care	Out of Hours	Patient	Accident	Contact with electricity	THIS is a TEST	Level 3 (Red)	Ms Sheila Dineley	
4421	30/06/2020	Corporate	Governance and Quality	Staff	Accident	Injured by an animal	This is a TEST	Level 2 (Amber)	Ms Sheila Dineley	
4426	24/07/2020	Integrated Urgent Care	Primary Care Streaming	Patient	Abuse and Harm	Discriminatory	Test incident to test email notifications	Level 1 (Green)	CM	

Save the current search as a query.

- A list of records will be displayed dependant upon your access levels.
- Records can be “Sorted” by clicking on the dark blue heading. E.g. sort by Incident Level or Category.
-  This symbol indicates that the record is overdue
- To open an incident click anywhere on the Text

# Quality Check Incident Report



**1. DIF1 Incident Report**  
The Incident needs to be reviewed and amended as required to ensure accurate data quality.  
The incident can be rejected if duplicated or the incorrect form has been used using the approval status in the DIF2 Section in the left hand panel.

Date ID	4416
Name	TEST
Reported (yyyy/mm/dd)	14/02/2020
Submitted time (mm:ss)	14:40
Opened by DIF2 (yyyy/mm/dd)	03/03/2020
DIF2 Manager	Dineley, Ms Sheila - Governance Manager

## The Incident form is split into 2 parts:

- The left hand panel contains additional sections for review.
- On the right is the DIF1 Incident Report of the Incident record.

## DIF1 Incident Report

- ID field refers to the number automatically given to the record.
- The Name field can be used to label the record: Category & Service
- Opened date indicates the date the Incident was opened by DIF2
- Submitted time indicates the time the Incident submitted on the DIF1 form.
- DIF2 manager assigned to manage the incident.

# Contacts Section

## People affected or Involved (Contacts Section):

- The Contact Section **MUST** be reviewed and approved first to avoid mandatory fields on the incident form displaying.



**People affected**  
Please ensure all contacts are approved. Remember "Blue you need to do" whereas "Green has been seen".  
Click [HERE](#) to open the Contact Approval Guidance.

Approval status	Forenames	Surname	Type	Patient/staff number	Injury (Primary)	Body part (Primary)	Treatment received	Contact role
Unapproved	Micky	Mouse	Patient	123456	Bruise	Cheek (Right)	First Aid	Person Injured/Affected

Create a new Person Affected link

**All other people involved**

Approval status	Forenames	Surname	Type	Patient/staff number	Job Title	Email	ID	Contact role
Approved	Sheila	Dineley	Employee/Member of Staff		Health, Safety & Governance Manager	sheila.dineley@pc24.nhs.uk	112	Person Responsible
Approved	Debs	Smith	Employee/Member of Staff		Consultancy Support	debssmith27@gmail.com	1061	Reporter

Create a new Other Contact link

- Ensure all contacts are approved:
- Names in "blue you need to do" whereas "Green has been seen".
- Open Contact Approval guidance for 3 step process.
- Ensure all relevant contacts involved with the incident have been added to the record, i.e. Person affected by the incident, person responsible for causing the incident, any witnesses or Responders
- Only approved Contacts are linked to a persons main Datix contact record
- Contacts can be unlinked by DIF2 Managers if wrong Contact has been added.

# Incident Details

This section describes the Category and incident Description details:

Incident details	
Incident date (dd/MM/yyyy)	30/06/2020
Time (hh:mm)	12:00
Incident affecting <small>The primary person affected by the incident. If no person was affected by the incident, 'Incident affecting the Organisation' should be selected.</small>	Patient
Category	Accident
Sub category	Contact with electricity
Description <b>BRIEF INCIDENT SUMMARY</b> <b>WHAT</b> was the incident? <b>ONLY</b> use facts not opinions <b>WHERE</b> did the incident happen? <b>WHO</b> was involved? <b>USE</b> initials and role only in line with data confidentiality	<p>This is where the DIF1 Reporter would have described a factual account of the incident including where it happened and who was involved.</p> <p>The DIF1 Reporter would refer to the person affected by their role and initials eg GP JJ or Receptionist DS. They would also describe any injuries sustained and anyone else that witnessed or was responsible for causing the incident or accident.</p>
Immediate action taken <small>Immediate action taken at the time of the incident.</small>	<p>This is where the DIF1 Reporter would indicate what immediate action was taken following the incident or accident. It would include if they contacted emergency services eg Ambulance or police or if they contacted safeguarding for advice.</p>

- Check the Incident date compared to the Reported date.
- Is the Primary person affected correct, if not select the correct one.
- Has the reporter selected the correct Category and Subcategory if not amend.
- Ensure the Description is factual. Remove any names and replace with persons role and initials in line with data confidentiality.

**NB: Any amendments to records have a full audit trail.**

# Incident Location

**This section describes where the incident happened and which Service is responsible for managing the incident:**

Where Incident Happened	
The Exact location and Site where the Incident happened, the area will automatically populate.	
Exact Location	Car park
Sites	Wavertree HQ
Area	Liverpool
Which service area does this incident belong to?	
The Service/Team responsible for managing this Incident, the SDU will automatically populate.	
Service / Team	Out of Hours
Service Delivery Unit (SDU)	Integrated Urgent Care
<input type="button" value="Save"/> <input type="button" value="Cancel"/>	

- Check the exact location details are correct
- Is the correct Site selected, if not amend.
- Has the correct Service/Team been selected to manage the incident

**NB: Any amendments to records have a full audit trail.**



# Category Specific Sections

- Additional Sections may have been completed depending upon the category or type of incident reported.
- Check the details and complete any **MANDATORY** DIF2 Fields required.

Some examples of common Category Specific Sections are:

## Information Governance & Safeguarding Sections

- This section opens when Information Governance category is selected

Information Governance	
★ Type of data involved?	<input type="text"/>
★ Type of media?	<input type="text"/>
★ Type of premises?	<input type="text"/>
★ Potential number affected?	<input type="text"/>
★ Type of security?	<input type="text"/>

- Safeguarding opens for all Patient affected incidents

Safeguarding	
■ Is Safeguarding Required?	<input type="text" value="Yes"/>
■ Type of Safeguarding	<input type="text"/>
■ Was capacity considered?	<input type="text"/>
■ Was consent to share concerns sought?	<input type="text"/>
■ Safeguarding referral action taken	<input type="text"/>



# DIF2 Management Section

<b>1. DIF1 Incident Report</b> <b>2. DIF2 Management Section</b> <b>3. Rapid Review Investigation</b> Email Communication <b>Documents</b> <b>Actions</b> Progress notes Linked records <b>Notifications</b> <b>Quality review section</b> Print Show DIF1 snapshot Show DIF1 values Audit trail + Add a new incident + Copy + Generate from My reports Design a report New search Saved queries Show staff responsibilities	<b>2. DIF2 Management Section</b> <b>Degree of Harm &amp; Incident Level</b> Please <b>REVIEW</b> to ensure the physical harm and Incident Level are correctly recorded and <b>AMEND</b> if required. Degree of Harm: Severe (Permanent or long term harm caused) Please ensure the <b>actual physical harm</b> caused by the Incident is correct and re-grade if required. Incident Level: Level 3 (Red) Click <a href="#">HERE</a> for Incident Level guidance V1 Sept 2020 ★ Level amendment required? Yes DIF2 Manager to <b>REVIEW</b> in line with Incident Level guidance. ★ Level direction? Level increased ★ Rationale for level amendment The Incident level has been increased from Level 2 to Level 3 due to the Severe harm caused to the Patient.
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- Check the Degree of harm. Is it consistent with the description. Ensure any injuries are documented for the Person affected on the DIF1 Incident Report.
- Check the Incident Level is correct – Refer to the Incident Level Guidance
- If the incident Level is amended, give a rationale and feedback to the Reporter.

# Incident Level Guidance

## Incident Level:

- The incident level is used to grade the incident and determine the type of investigation required by the DIF2 Manager. A link to the guidance is available on the DIF2 Form.
- Ensure you review the Incident Level Guidance to confirm it has been correctly graded. This will determine the type of investigation and timescales.

Incident Level Guidance: Version 2 July 2020			
CATEGORY DESCRIPTION	LEVEL 1 INSIGNIFICANT/MINOR (Low or no harm/ Low near miss) Reviewed and closed within 5 working days.	LEVEL 2 MODERATE (Moderate harm/ Near miss) Initial review completed within 3 working days.	LEVEL 3 SIGNIFICANT/MAJOR (Serious incident) Immediate escalation, initial strategy meeting and identification of Investigating Officer, followed by Rapid Review (RR) within 3 working days. If RCA required to be completed within further 60 days.
Level of Investigation required.	Managed Locally within Service and remedial action taken with 2 Working Days.	Managed within the service. Remedial actions taken. Escalation of any residual risks/gaps identified within 3 working days. May require use of some of the tools within the RCA framework.	RR to be completed within 3 working days. If the incident is STEIS reportable and involves a clinical member of staff, this decision must be ratified by the Medical Director. Potential requirement to complete full RCA Investigation as advised by outcome of RR.
ABUSE & HARM	Incident causing minor harm to Staff, Patient or Visitor, this includes Verbal abuse. Potential to cause harm. Identified financial loss.	Incident causing moderate harm to Staff, Patient or Visitor, this includes Physical, Emotional or Neglect abuse and may require police assistance, medical treatment and / or Safeguarding Referral.	Incident causing significant/major/serious/SI harm to Staff, Patient or Visitor, this includes Physical abuse, Sexual assault, Hate crimes and will require police intervention, possible medical treatment and / or Safeguarding Referral/PREVENT referral.
ACCIDENT	Accident with no harm or minor harm which may require first aid.	Accident with moderate harm requiring medical attention (over and above local first aid provision). OR Work related accident resulting in any Staff absence from work (for less than 7 days)	Accident with major harm requiring urgent medical treatment including fractures or loss of consciousness (includes members of public if affected as a result of PC24 work activity, acts or omissions). Work related accident resulting in Staff absence from work for more than 7 days. Any RIDDOR reportable accident.

# Type of Investigation

**DIF2 Management & Approval Section**  
Please **COMPLETE** this section and select the required investigation based on the Incident level.

Type of Investigation ?	Locally Managed (LM) ▼
<b>Locally Managed Description</b> Please describe action taken to manage this incident locally.	Describe the action taken locally to manage this incident, including any escalation for external reporting to Safeguarding, CQC, HSE, ICO etc.  
DIF2 Approver	Smith, Debs - Consultancy Support ▼
DIF2 Approval Date	22/09/2020 
Incident ready for closure? Select "Yes" once: 1.DIF1 Report quality checked. 2.DIF2 Management Section done. 3.Relevant documents attached. 4.Completed Investigation (if required). 5.Completed all actions. 6.Emailed HoS for L2&3 Closure Review	Yes ▼

## Select what type of Investigation is required:

- **Managed Locally** - Level 1 or 2 incidents dealt with locally by the DIF2 Manager
- **Cluster Themed Investigation (CTI)** - to review emerging trends of level 1 or 2 category specific incidents with high volume in more detail.
- **Rapid Review (RR) Investigation** is required for all **Level 3 incidents** and requires updating in the Investigation section in the left hand panel.

# SECTION 3

## Rapid Review

## Investigation Section

# Rapid Review Investigation

- The Rapid Review Investigation **MUST** be completed for all Level 3 Incidents.
- It may also be used for some Level 2 Incidents which require a further in-depth review recommended by Q&G or HoS
- Cluster Themed Investigation (CTI) may also be commissioned where a pattern of low level similar category incidents has occurred.

**3. Rapid Review Investigation**  
 The purpose of a Rapid Review is to carry out preliminary enquiries. It is a review of the circumstances and events leading up to the incident with the aim of identifying **what** happened, **why** it happened and **identifying where lessons can be learned** in order to prevent similar type incidents occurring in the future. It is not to apportion blame on any individual involved.

It is important that you start by establishing a timeline and gathering any supporting statements or documents to inform your investigation. Your recommendations should be outlined and managed within the action plans section for monitoring and closure.

**Additional Investigators**  
 Additional investigators can be assigned by selecting their name and double clicking to give them access to the incident, automatic emails will be sent to notify them.

McLoughlin, Chloe - Quality Governance Officer

Date of strategy meeting: 01/07/2020

Date Rapid Review due: 01/07/2020

Date Rapid Review started: 29/06/2020

**Incident summary**  
 This should be a concise summary of the incident requiring investigation.

This section is used to provide an incident summary of the incident requiring investigation.

- The Investigation section is self explanatory and based on Root Cause analysis methodology.
- Once finalised Investigation Summary or Full Reports can be generated using Investigation Templates (see Documents Section)

# Rapid Review Investigation (Cont.)

Duty of Candour assessment <span>Yes</span>	
Confirm that a Duty of Candour assessment has been completed and evidenced in the DIF2 Management Section	
Background and context Provide a brief summary and type of relationship with PC24, Patient usual presentation (if applicable) and the Circumstances leading up to and including the incident.	Background and context Provide a brief summary and type of relationship with PC24, Patient usual presentation (if applicable) and the Circumstances leading up to and including the incident.
Documentation review Specify documents in place, any case notes or systems & equipment information and whether reviewed/amended following the incident.	Background and context Provide a brief summary and type of relationship with PC24, Patient usual presentation (if applicable) and the Circumstances leading up to and including the incident.
Care delivery problems Review the care delivery provided and whether any concerns identified	Care delivery problems Review the care delivery provided and whether any concerns identified
Service delivery problems Review the Service delivery provided and whether any concerns identified	Care delivery problems Review the care delivery provided and whether any concerns identified
Human factors Review the people involved during the incident and whether any concerns identified	Human factors Review the people involved during the incident and whether any concerns identified
Relevant training What training was in place, was this up to date and was any additional training needs identified?	Relevant training What training was in place, was this up to date and was any additional training needs identified?



# Rapid Review Investigation (Cont.)

<p><b>Good Practice Identified</b></p> <p>Use this section to share any good practice identified by staff managing the incident</p>	<p><b>Good Practice Identified</b></p> <p>Use this section to share any good practice identified by staff managing the incident</p>
<p><b>Investigation Findings</b></p> <p>Please list your main findings - Care delivery problems identified eg deviation from Policy &amp; Procedures, weaknesses in local systems &amp; processes, human error etc.</p>	<p><b>Investigation Findings</b></p> <p>Please list your main findings - Care delivery problems identified eg deviation from Policy &amp; Procedures, weaknesses in local systems &amp; processes, human error etc.</p>
<p><b>Investigation Recommendations</b></p> <p>Please number your recommendations. There are two types:  1. To improve existing systems, safeguards or barriers AND/OR  2. To implement missing systems, safeguards or barriers.</p>	<p>The recommendations were good we had 2 as follows:-</p> <ol style="list-style-type: none"> <li>1. Need to test all the system</li> <li>2. Need to do training across the organisation</li> </ol>
<p><b>Lessons learned</b></p>	<p>There have been a number of lessons learned from this investigation that will support future changes required.</p>
<p><b>Date Rapid Review completed</b></p>	<p>03/07/2020</p>
<p><b>Rapid Review completed by</b></p>	<p>Dineley, Ms Sheila - Health, Safety &amp; Governance Manager</p>
<p><b>Rationale if overdue</b></p>	<p>I was late getting the investigation and was on annual leave etc.</p>

# Rapid Review Investigation (Cont.)

- A Specialist Lead will be assigned to the Investigation to provide advice and support and will provide comments and sign off before Operational Sign off by Head of Service or Corporate Manager.

<b>Specialist Lead Review</b> This Section <b>MUST</b> be completed prior to Operational sign off, and should include any additional instructions for the Investigators.	
Specialist Lead Area	Governance and Quality
Specialist Lead Comments	Carol had a quick look at made comments on the investigation
Specialist Lead sign off by	Carol Rogers
Specialist Lead sign off date	03/07/2020
<b>Operational Review &amp; Sign Off</b> The Head of Service or relevant Corporate Lead should sign off the section below to <b>CONFIRM</b> that the investigation is fully completed to a satisfactory level.	
Operational Comments	The Operational review was completed by Stacey for testing
Head of Service / Corporate sign off by	Stacey Shields
Head of Service / Corporate sign off date	03/07/2020
<input type="button" value="Save"/> <input type="button" value="Cancel"/>	

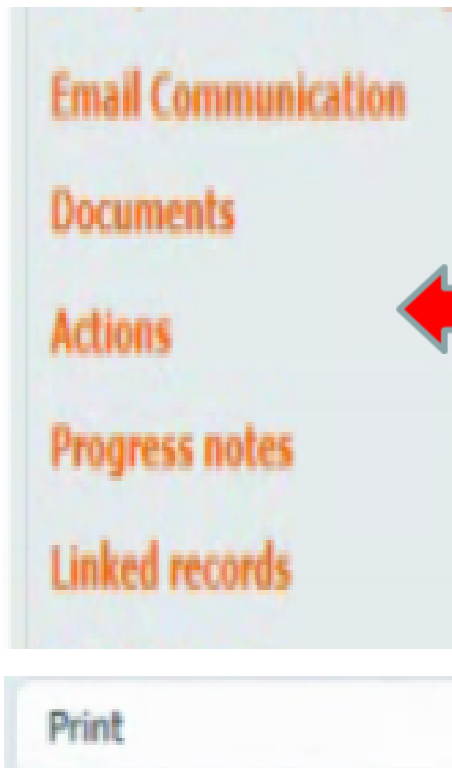


# SECTION 4

## **Additional Functions available**

## Step 4 - Additional Functions

On the left hand panel you will also see other functions available



Use to send emails within the Datix record for a full audit trail

Attach Documents and generate investigation reports

Create action plans and monitor progress

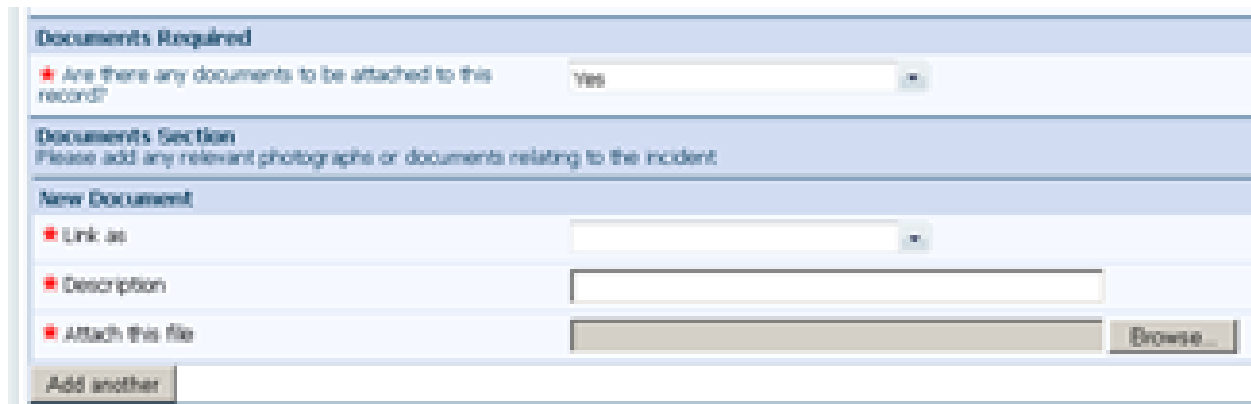
Add updates or further information that comes to light

Link relevant records e.g. Incident and subsequent complaint

Individual records can be printed if required.

# How to upload documents

- Documents can be attached to the Incident record.
- Select the type of document e.g. Accident forms, add a brief description and browse to the electronic folder where you have saved the document to upload.



The screenshot shows a web form titled 'Documents Required'. It contains a dropdown menu for 'Are there any documents to be attached to this record?' with 'Yes' selected. Below this is a section titled 'Documents Section' with the instruction 'Please add any relevant photographs or documents relating to the incident.' Underneath is a 'New Document' section with three fields: 'Link as' (a dropdown menu), 'Description' (a text input field), and 'Attach this file' (a file selection field with a 'Browse...' button). At the bottom of the 'New Document' section is an 'Add another' button.

Clicking Browse will open your network drive for you to find the relevant document.

# How to generate Templates

Select the Documents and Templates tab in the left hand panel and in the Template field, select the template required from the drop down menu.



**Templates**

**Word template**  
Choose a document template

Merge in MS Word

Own GP Safeguarding referral notification letter  
Rapid Review Full Investigation Report  
Rapid Review Summary Template

Select the template required then click "Merge in MS word".

Document added.

Documents		
Created	Type	Description
22/09/2020	Form	Rapid Review Full Investigation Report (merged on 22/09/2020)

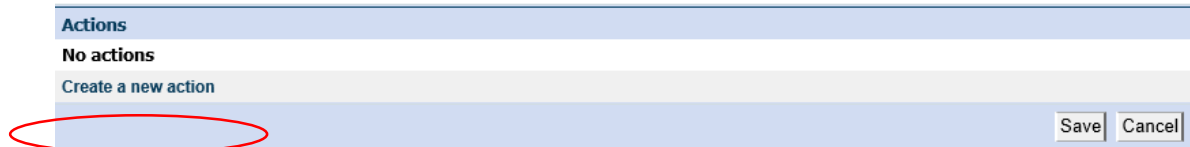
An auto-generated investigation report will appear in the Documents section.

You will have the option to open or save the document and amend as required.

If you update the investigation section a new report can be generated

# How to Create an Action

Select the **Actions** tab in the left hand panel and Click 'Create a new action' to upload any required actions identified.



Ensure that your status is accurate at all times.

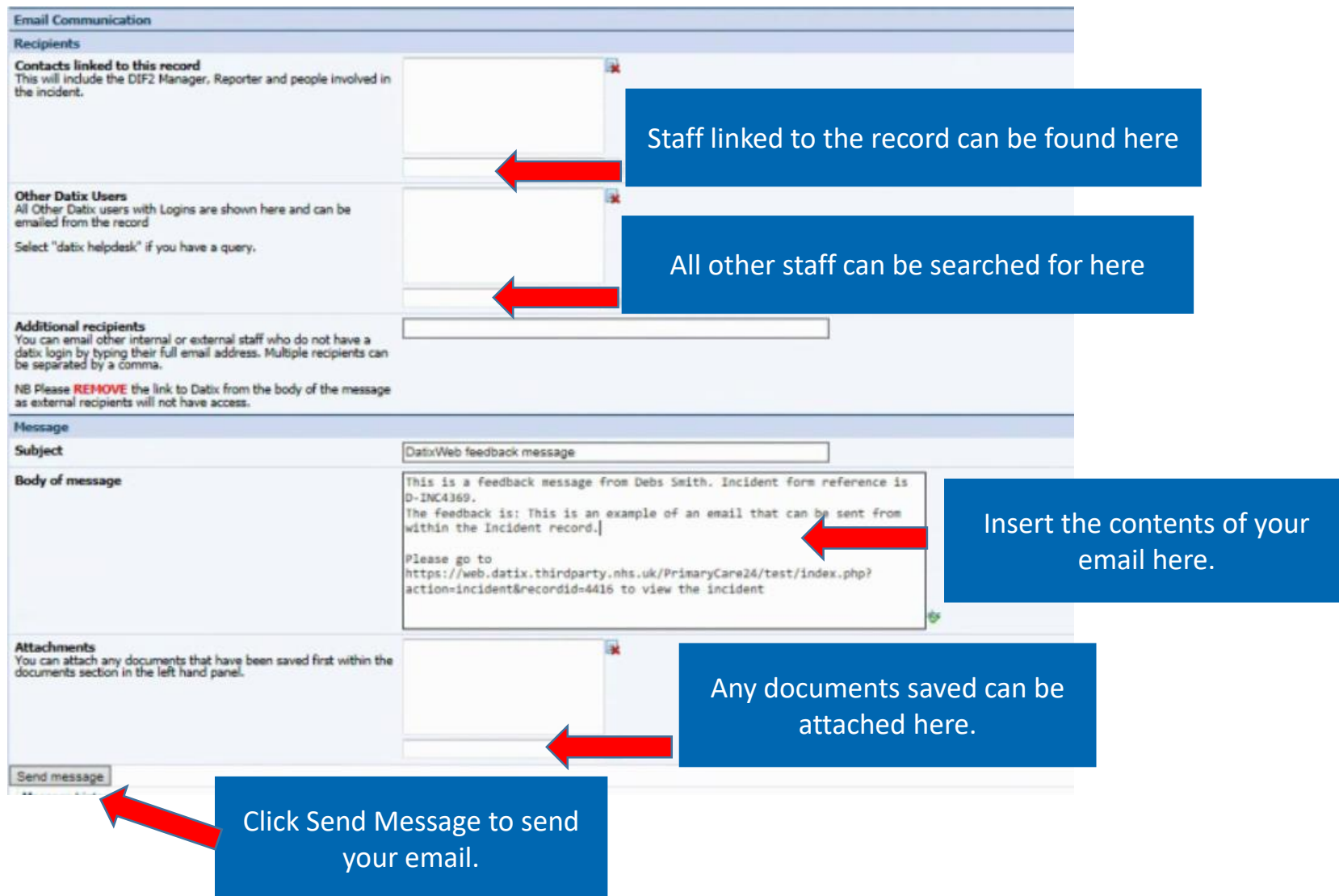


The Action lead can add progress notes in the specific action section once your action has been created.

Select the **Type** of action, add the **Specific Action** description and choose a person to be responsible (Action Lead). Add timescales into the Action timescales section

# How to send an Email

Select the Email Communication tab in the left hand panel.



The screenshot shows the 'Email Communication' tab in the Datix interface. It includes sections for Recipients, Message, and Attachments. Red arrows point from blue callout boxes to specific fields in the interface.

**Recipients**

**Contacts linked to this record**  
This will include the DIF2 Manager, Reporter and people involved in the incident.

**Other Datix Users**  
All Other Datix users with Logins are shown here and can be emailed from the record.  
Select "datix helpdesk" if you have a query.

**Additional recipients**  
You can email other internal or external staff who do not have a datix login by typing their full email address. Multiple recipients can be separated by a comma.  
NB Please **REMOVE** the link to Datix from the body of the message as external recipients will not have access.

**Message**

**Subject**  
DatixWeb feedback message

**Body of message**  
This is a feedback message from Debs Smith. Incident form reference is D-INC4369.  
The feedback is: This is an example of an email that can be sent from within the Incident record.  
Please go to  
<https://web.datix.thirdparty.nhs.uk/PrimaryCare24/test/index.php?action=incident&recordid=4416> to view the incident

**Attachments**  
You can attach any documents that have been saved first within the documents section in the left hand panel.

**Send message**

**Annotations:**

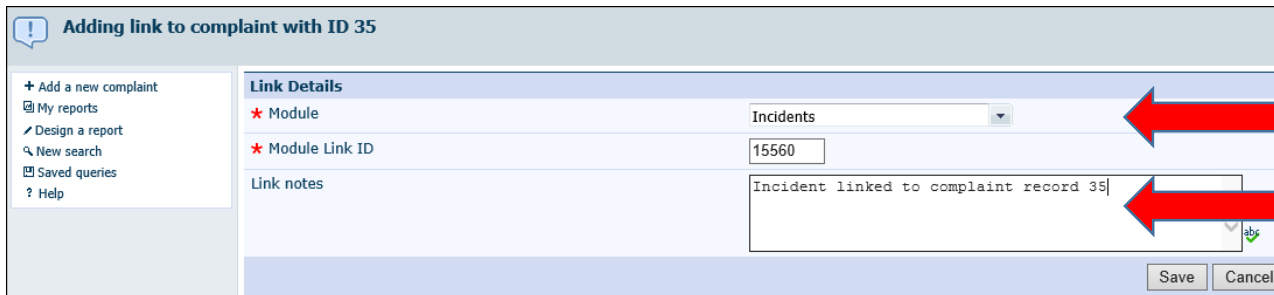
- Staff linked to the record can be found here
- All other staff can be searched for here
- Insert the contents of your email here.
- Any documents saved can be attached here.
- Click Send Message to send your email.

## Content of emails

- To ensure Primary Care 24 comply with Confidentiality and GDPR guidelines, it is important to note that no personally identifiable or sensitive information can be shared via email, unless this is done via a secure connection such as between two nhs.net email accounts.
- Whilst the information is secure on Datix, this security cannot be guaranteed across emails, which can be intercepted. It is best practice to share anonymised information where possible and refrain from including identifiable information in any communications.

# How to Link Records

- Records from any of the CORE Datix Modules can be linked together
- Incidents relating to the same Person can be Linked
- Incidents relating to a similar cluster e.g. Missed Dose Medication
- Incidents can be linked to a subsequent Complaint or risk



**Adding link to complaint with ID 35**

**Link Details**

★ Module: Incidents

★ Module Link ID: 15560

Link notes: Incident linked to complaint record 35

Save Cancel

Select the Relevant Module e.g. **Incidents**

Enter the Datix ID for the incident here, add a link note then **SAVE** the record.

The 2 records will now be linked and can be accessed via the linked records tab



# Additional Support & Guidance

If you require any further assistance  
please contact

Datix Helpdesk [datix@pc24.nhs.uk](mailto:datix@pc24.nhs.uk) via email  
or call 0151 2542553