BGH Consultants/Medics/Doctors

Reporter Guidance for completing NHS Borders web based Adverse Event form on Datix

1. Click on Internet Explorer icon and the NHS Borders Intranet page will open.
2. Under '**Jump to an Application'** click on **Datix Adverse Event Recording** from the drop down menu to access the system. Electronic Adverse Event Form will be open ready to complete.

RED ✱ Fields must be completed before form can be submitted

Click the ❓ for help with particular field

If you encounter any problems or require assistance please phone Risk & Safety on 01896 828250 (Mon – Fri 9am – 5pm), out with these hours please e-mail the helpdesk on datix.support@borders.scot.nhs.uk

Completing the Adverse Event reporting form -

Reporter Details (information about you as a reporter)	
Title	Mr/Mrs/Miss/Ms/Dr
✱ First Name(s)	Name of person completing Adverse Event form. This will help your manager review the Adverse Event.
✱ Surname	
Email address (this must be an NHS email address)	Please enter a valid email address so an acknowledgement can be sent to you
✱ Date of Birth	This will ensure correct identification of reporter
Contact number	Tel/Ext number at which you can be contacted
If you are reporting on behalf of someone else	Please enter contact details, name, address, telephone number.

Clinical Board / Service / Department (origin of clinical Adverse Events)	
✱ Clinical Board	Choose Primary, Acute & Community Services
✱ Service	Choose BGH Consultants/Medics/Doctors
✱ Dept / Ward	If it is a clinical issue choose the appropriate Clinical Service for the Adverse Event. If it is an injury to you choose your own Service.

Description of the Adverse Event (information about where the Adverse Event happened)	
✱ Location of Adverse Event	Choose from drop down menu If 'BGH' is selected a further drop down menu of BGH specific locations appears to choose from
✱ Specific Location	Choose from drop down menu
✱ Description of Adverse Event	Free text - Enter brief facts, no opinions. Do not enter names of people these will be asked for further down
✱ Adverse Event date 📅 (dd/mm/yyyy) ❓	Date can be entered using the calendar box or by entering date (requires full number for year)
Time (24hr – hh:mm)	Enter time of Adverse Event using 24 hour clock
Is there potential for this Adverse Event to be reported under RIDDOR ❓	This can be completed by the Manager if staff are uncertain
✱ Please select the appropriate category of person(s) potentially affected	Choose from the drop down menu. Double click to select the category of person(s).

Adverse Event Type (information about the type of Adverse Event)	
✱ Type of Adverse Event ❓	Choose from drop down menu - some categories will open other specific sections
✱ Sub Type 1	Choose from drop down menu
Sub Type 2 will only appear for specific Adverse Event types	Choose from drop down menu
Potential Contributing Factors	List of options – more than one can be added
How many times did this Adverse Event happen?	Enter how many times

Additional Information	
✱ Were there any employees involved / witness to the Adverse Event?	Clicking Yes will open a further information section

* Were there any other witnesses to the Adverse Event?	Clicking Yes will open a further information section
* Are there any documents to be attached to this record ⊘	Clicking Yes will open a further information section
Adverse Event Outcome	
* Was this a near miss or actual / adverse event?	Select whether this is a near miss or an adverse event
* If an actual event – grading of adverse event / actual outcome	Select appropriate grading (refer to Risk Matrix)
* Immediate actions taken at the time of the adverse event	Give a brief description of immediate actions taken
Further Actions	Please enter further actions from the drop down by double clicking your selection
* Risk Assessment	Enter the likelihood and consequence to give the risk grade
* Who has been informed of the adverse event happening?	Select who has been informed from the drop down
Please add any additional relevant information which has not already been recorded on the previous sections	Please be brief and factual.
Submit Cancel	