Student Research
Hospital Questionnaire on the
Electronic Adverse Incident Recording
and Reporting System (Datix)

The purpose of this Study is to find out some of your views about the
Datix Adverse Incident Recording and Reporting System.

Your participation in this study is completely voluntary. Individual responses
will only be seen by Mr. Kerry Walsh (Glasgow Caledonian University),
and it will not be possible to identify you from your responses in the analysis /
feedback process.

Please contribute to this survey by returning your completed questionnaire
in the attached addressed envelope and send back by 31 May 2007,
to Karen Bell, R&D Manager, Flat 58, Lister Street, Crosshouse Hospital.

If you have any questions, please contact Mr Kerry Walsh on 01292 442861,
or on 07703334219 or walsh@knollpark.freeserve.co.uk.

Alternatively, you may contact Dr. Karen Bell, R&D Manager for
NHS Ayrshire & Arran on (01563) 825850.

Your opinions are much appreciated.

INSTRUCTIONS & BACKGROUND DETAILS

This questionnaire is asking your opinion about the Datix Electronic Adverse Incident Recording and Reporting System in your hospital. The aim of the research is to seek clinical and managerial staff views on the Datix Electronic Adverse Incident Recording and Reporting System. It will take 10-15 minutes to complete.

Definitions

Adverse Incident: Any event that causes, or has the potential to cause unwanted effects involving the safety of patients, users, staff or other persons or which results in loss or damage. Such incidents would include (amongst other examples):

- Accidents where there has been an obvious explanation; or
- Loss, harm or injury from a clinical procedure, treatment or episode of care; or
- Loss, harm or injury arising from unexpected hazards, or
- Actual / or physical / verbal abuse.

Near Miss Incident: An unwanted event is a situation, incident or omission; however no physical, psychological, economic harm or losses of equipment.

Incident / Risk Grading: The Matrix used to classify the significance of an incidence or potential risk.

RIDDOR: A RIDDOR reportable incident is an incident reportable to the Health & Safety Executive under the Reporting of Injuries, Diseases and Dangerous Occurrences Regulations 1995.

Section A

		Strongly Disagree	Disagree	Neither Agree nor Disagree	Agree	Strongly Agree	Don't know
1.	All Adverse Incidents are systematically identified on a continuous basis.	1	2	3	4	5	6
2.	Adverse Incidents are not systematically recorded on a continuous basis.	1	2	3	4	5	6
3.	The Datix Adverse Incident Recording and Reporting System does not monitor the progress of each individual Adverse Incident.	1	2	3	4	5	6
4.	There is not a systematic approach to validate Adverse Incident using the Datix Adverse Incident Recording and Reporting System.	1	2	3	4	5	6
5.	It has been agreed that incidents should be reported directly to my line manager rather than using the Datix system.	1	2	3	4	5	6
6.	The Datix Adverse Incident Recording and Reporting System does not support the immediate reporting of unexpected deaths of patients.	1	2	3	4	5	6
7.	The Datix Adverse Incident Recording and Reporting System collects information on Adverse Incidents throughout the hospital which are reported to your supervisor / management.	1	2	3	4	5	6

		Strongly Disagree	Disagree	Neither Agree nor Disagree	Agree	Strongly Agree	Don't know
8.	The Datix Adverse Incident Recording and Reporting System supports the grading of each Adverse Incident.	1	2	3	4	5	6
9.	The Datix Adverse Incident Recording and Reporting System has all categories of Adverse Incident in the drop down list for consideration.	1	2	3	4	5	6
10.	The Datix Adverse Incident Recording and Reporting Incident System does not improve communication of patient safety issues across all levels of the organisation.	1	2	3	4	5	6
11.	Risk assessments for each Adverse Incident are undertaken using the Risk Matrix in the Datix Adverse Incident Recording and Reporting System.	1	2	3	4	5	6
12.	The Datix Adverse Incident Recording and Reporting System records all the actions taken that have resulted from an Adverse Incident investigation.	1	2	3	4	5	6
13.	The Datix Adverse Incident Recording and Reporting System does not provide information on patient safety issues locally.	1	2	3	4	5	6
14.	The organisation is more informed of the number of Adverse Incidents by using the Datix Adverse Incident Recording and Reporting than paper system.	1	2	3	4	5	6
15.	Information is communicated to management on trends of adverse incidents recorded in the Datix Adverse Incident Recording and Reporting System.	1	2	3	4	5	6

Section B

YOUR VIEWS ON THE TECHNOLOGY WHICH SUPPORTS THE SYSTEM

Please use the scale below to indicate the extent to which you agree with the following statements. This section asks your views on technology and associated issues in relation to using the Datix Adverse Incident Recording and Reporting System.

		Strongly Disagree	Disagree	Neither Agree nor Disagree	Agree	Strongly Agree	Don't know
16.	The Datix Adverse Incident Recording and Reporting System is time consuming for recording an Adverse Incident or Near Miss.	1	2	3	4	5	6
17.	The Datix Adverse Incident Recording and Reporting System is not fully integrated with other Department information systems.	1	2	3	4	5	6
18.	The Datix Adverse Incident Recording and Reporting System technology does not support the collection of individual costs associated with individual Adverse Incidents.	1	2	3	4	5	6
19.	The Datix Adverse Incident Recording and Reporting System technology supports the collection on clinical issues directly related to patient safety.	1	2	3	4	5	6
20.	The Datix Adverse Incident Recording and Reporting System technology supports the collection of financial costs associated with Adverse Incidents.	1	2	3	4	5	6
21.	The Datix Adverse Incident Recording and Reporting System does not have easy to use processes to capture all details associated with an Adverse Incident or Near Miss.	1	2	3	4	5	6

Section C

PATIENT SAFETY OBJECTIVES AND VALUES

Please use the scale below to indicate the extent to which you agree with the following statements. This section asks your views on patient safety issues in relation to using the Datix Adverse Incident Recording and Reporting System.

	Strongly Disagree	Disagree	Neither Agree nor Disagree	Agree	Strongly Agree	Don't know
22. I believe every mistake once found and discussed openly becomes an opportunity to make improvements.	1	2	3	4	5	6
23. I believe all staff should consider themselves responsible for reporting Adverse Incidents on the Datix system.	1	2	3	4	5	6
24. Every Adverse Incident recorded is a shared problem, and everyone is willing to have a go at fixing it.	1	2	3	4	5	6
25. The Datix Adverse Incident Recording and Reporting System has not raised the awareness of quality issues in my Service / Directorate.	1	2	3	4	5	6
26. Health & Safety Reporting (RIDDOR), has improved due to the Datix Adverse Incident Recording and Reporting System.	1	2	3	4	5	6
27. Investigation measures are acted on after Adverse Incidents and Near Misses have been recorded on the Datix Adverse Incident Recording and Reporting System.	1	2	3	4	5	6
28. In general clinical staff believe that Adverse Incident information is never theirs, but always the patients.	1	2	3	4	5	6
29. Adverse Incident information collected by the Datix Adverse Incident Recording and Reporting System is not easily available to all of the care team, regardless of whether it concerns medical, nursing, or any other component of care.	1	2	3	4	5	6

Section D

STAFFING & SKILLS

Please use the scale below to indicate the extent to which you agree with the following statements. This section asks your views on the impact on staffing and training in relation to using the Datix Adverse Incident Recording and Reporting System.

		Strongly Disagree	Disagree	Neither Agree nor Disagree	Agree	Strongly Agree	Don't know
30.	Staff are not aware that they have a role in the Datix Electronic Adverse Incident Recording and Reporting System.	1	2	3	4	5	6
31.	I received training in the Datix Adverse Incident Recording and Reporting System.	1	2	3	4	5	6
32.	Staff have regular feedback of the actions taken following each Adverse Incident or Near Miss incident.	1	2	3	4	5	6
33.	Non clinical staff do not fully participate in the collecting and processing of Adverse Incident management.	1	2	3	4	5	6
34.	All new staff have received corporate Datix instruction on the importance of collecting information on Adverse Incidents.	1	2	3	4	5	6
35.	All new staff do receive a local department Datix instruction on the importance of collecting information on Adverse Incidents.	1	2	3	4	5	6
36.	Staff do not have enough time to complete the information within the Datix Adverse Incident Recording and Reporting System relating to an Adverse Incident.	1	2	3	4	5	6
37.	The Medical Profession does not fully participate in the collecting and processing of Adverse Incident management on the Datix Adverse Incident Recording and Reporting System.	1	2	3	4	5	6

	Strongly Disagree	Disagree	Neither Agree nor Disagree	Agree	Strongly Agree	Don't know
38. The Nursing Profession fully participates in the collecting and processing of Adverse Incident management on the Datix Adverse Incident Recording and Reporting System.	1	2	3	4	5	6
39. The Pharmacy Department does not fully participate in the collecting and processing of Adverse Incident management on the Datix Adverse Incident Recording and Reporting System.	1	2	3	4	5	6

Section E

MANAGEMENT & STRUCTURE

Please use the scale below to indicate the extent to which you agree with the following statements. This section asks your views on the impact on management activity and the organisation structure in relation to using the Datix Adverse Incident Recording and Reporting System.

		Strongly Disagree	Disagree	Neither Agree nor Disagree	Agree	Strongly Agree	Don't know
40.	I would be comfortable allowing my Line Manager to investigate my Adverse Incident using the Datix Adverse Incident Recording and Reporting System.	1	2	3	4	5	6
41.	I would be reluctant to tell my Line Manager that I have been involved in an Adverse Incident.	1	2	3	4	5	6
42.	I would not be willing to discuss a patient safety issue related problem with my Line Manager, even if it could potentially be used to disadvantage me.	1	2	3	4	5	6
43.	I would be willing to let my Line Manager have complete control over Health and Safety issues that affect me.	1	2	3	4	5	6
44.	I would not be willing to share my ideas with my Line Manager about how to improve the Datix Adverse Recording and Reporting System.	1	2	3	4	5	6
45.	My Line Manager uses the Datix Adverse Incident information in a reactive manner with respect to patient safety.	1	2	3	4	5	6
46.	The Management / Organisations structure matches the Datix Adverse Incident Recording and Reporting Structure.	1	2	3	4	5	6
47.	Management action is sometimes out of the proportion to the grading of the Adverse Incident.	1	2	3	4	5	6
48.	I always receive feedback from Incident / Near-Miss reports.	1	2	3	4	5	6

	Strongly Disagree	Disagree	Neither Agree nor Disagree	Agree	Strongly Agree	Don't know
49. Staff have regular feedback of the actions taken following each Adverse Incident or Near Miss Incident.	1	2	3	4	5	6
50. Quality audits are not carried out on the information obtained from the Datix System.	1	2	3	4	5	6
51. My Line Manager checks to see if we are complying with the Adverse Incident Policy and Supporting Procedures.	1	2	3	4	5	6
52. A Committee or Group has been established to review and manage Adverse Incidents information.	1	2	3	4	5	6
53. My Line Manager does not review all of my Adverse Incident Reports, which will have been recorded on the Datix Incident Recording and Reporting system.	1	2	3	4	5	6
54. There are routine statistics collected from the Datix Adverse Incident Recording and Reporting System.	1	2	3	4	5	6
55. The data collection from the Datix Incident Recording and Reporting system is useful to identifying areas of concern in relation to patient safety.	1	2	3	4	5	6

Section G

The increase in reporting of Adverse Incidents by using the Datix Adverse Incident Recording and Reporting System has:

(please answer the following)

		Strongly Disagree	Disagree	Neither Agree nor Disagree	Agree	Strongly Agree	Don't know
56.	not increased Pharmaceutical workload.	1	2	3	4	5	6
57.	increased Medical workload.	1	2	3	4	5	6
58.	not increased Nursing workload.	1	2	3	4	5	6
59.	not increased Secretarial workload.	1	2	3	4	5	6
60.	increased Health & Safety workload.	1	2	3	4	5	6
61.	not increased Management workload.	1	2	3	4	5	6
62.	increased Directors workload.	1	2	3	4	5	6
63.	not increased Allied Health Professionals workload.	1	2	3	4	5	6

**Thank you for taking time to complete these questions.
To interpret the results it would be helpful if you could provide
the following detail:**

64. **About you** Please tick as appropriate.

a. Gender: Male ☐ 1   Female ☐ 2

b. Age: 16-20 ☐ 1   21-30 ☐ 2   31-40 ☐ 3   41-50 ☐ 4   51-65 ☐ 5   66+ ☐ 6

65. **What is your current Hospital?**

Ayr Hospital ☐ 1   Crosshouse Hospital ☐ 2

Biggart Hospital ☐ 3   Ayrshire Central Hospital ☐ 4

66. **How long have you been in your current job?**

Less than 1 year ☐ 1   3 - 5 years ☐ 3   11 - 15 years ☐ 5

1 - 2 years ☐ 2   6 - 10 years ☐ 4   More than 15 years ☐ 6

67. **Working hours**

a. How many hours per week are you contracted to work? ....

b. On average, how many additional hours do you work
    per week above your contracted hours? ....

68. **During the last year…** Please tick as appropriate.

a. Have you been involved in an incident for which you
    sought medical attention?   Yes ☐ 1   No ☐ 2

b. Have you been involved in a near-miss?   Yes ☐ 1   No ☐ 2

c. Have you witnessed an incident or near-miss?   Yes ☐ 1   No ☐ 2

d. Have you reported an incident or near-miss using the
    Datix Electronic Adverse Incident Recording and
    Reporting System?   Yes ☐ 1   No ☐ 2

69. What type of work do you do? Please tick as appropriate.

Please tick

a.	Nurse / midwife	☐ A
b.	Nurse Charge Nurse	☐ B
c.	Nurse Specialist	☐ C
d.	Junior Doctor	☐ D
e.	Consultant Please state type of consultant	☐ E
f.	Administrator	☐ F
g.	First line manager	☐ G
h.	General Manager	☐ H
I.	Senior Manager	☐ I
J.	Director	☐ J
K.	Pharmacist	☐ K
L.	Domestic	☐ L
M.	Facilities	☐ M
N.	Porter	☐ N
0.	Gardener	☐ O
P.	Secretary	☐ P
Q.	Human Resources	☐ Q
R.	Allied Health Professional	☐ R
S.	Other, Please Specify:	☐ S

70. **Please use the space below to make any comments you might have.**

Thank you for completing this questionnaire.
Please return your completed questionnaire in the stamped addressed envelope provided.