WA Health Datix Consumer Feedback Module (CFM)

User Guide
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Version 1.6
Disclaimer

All information and content in this material is provided in good faith by the Department of Health, Western Australia, and is based on sources believed to be reliable and accurate at the time of development. Due to changing system configurations, information provided in this User Guide may not be accurate at the time of reading and is only accurate as at the date of publication.

Please address any quality improvement suggestions to PSSU@health.wa.gov.au
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WA Health Datix CFM

The WA Health Datix Consumer Feedback Module (CFM) is a web-enabled module that has functions to allow electronic recording and reporting of consumer feedback as well as management of consumer complaints.

Consumer Complaints, Contacts or Compliments are entered into the WA Health Datix CFM by the notifier using the WA Health Datix CFM online feedback notification form.

About this Guide

1. In this guide, the web-based Datix CIMS application, available to all WA Health staff, is referred to as DatixWeb.
2. For clarity, the following font formatting has been used:
   - **Lavender** - functions, menu items and buttons in DatixWeb.
   - **Indigo** - hyperlinks to sections within this user guide.
   - **Teal** – web and email addresses.
3. Points to note are depicted in a box:
4. A red box drawn on an image draws attention to particular DatixWeb functions or menu items discussed in the guide:

Accessing WA Health Datix CIMS

**Window XP Computers**
To open the application on your computer screen,

- click Start
- ➔ Health
- ➔ Datix CIMS icon

**Window 7 Computers**
To open the application use the Windows icon,

- click
- ➔ Click All Programs, then click on Health
- ➔ Datix CIMS icon
Security access

User profiles need to be assigned to individual users of the system. Group email addresses should not be used.

<table>
<thead>
<tr>
<th>Datix CFM Profile</th>
<th>Security access description</th>
</tr>
</thead>
<tbody>
<tr>
<td>Feedback Notifier</td>
<td>Have permission to input/ notify data into a feedback record and read only access for that particular Health Service/ Service/ or Service Division.</td>
</tr>
<tr>
<td>Feedback Coordinator</td>
<td>Have permission to read write access to input data, apply recommendations/ actions, access to assign to or be assigned, analyse data and create reports, access to Dashboard and To Do List and can nominate investigators for that particular Health Service/ Service/ or Service Division. Feedback Coordinators have access at a particular Health Service/Service/Service Division or for a feedback record at any other location which they are nominated as Feedback Coordinator.</td>
</tr>
<tr>
<td>Investigator</td>
<td>Have permission to full read write access to complaints they are invited to comment on and read only for others in the same location only when they are lodged and not inactive, analyse data and create reports, access to Dashboard and To Do List for that particular Health Service/ Service/ or Service Division.</td>
</tr>
</tbody>
</table>

There is an interrelationship between user profiles for the Datix CFM and the Datix Clinical Incident Management System (CIMS). Queries in the first instance should be directed to site SQP staff and escalated to CIMS Support at Health Support Services if necessary.
Logging into WA Health Datix CFM

To log in click on “Login to Datix CIMS (User Identified)”. The log in box will then appear. Use your HE number and computer password to log in to the system.

![Login to Datix CIMS](image)

Logging out

To Log out of Datix CIMS, select the logout option at the top of the screen. Any unsaved work will be lost.

![Logout option](image)
WA Health Datix CFM Status Screen

Once logged in, click the ‘Consumer Feedback Module’ at the top of the screen:

![CFM landing page](image)

The CFM landing page is pictured below, consisting of two navigation menus: ‘Options’ and ‘Status’. The ‘Options’ menu displays different actions a user can perform. The ‘Status’ menu displays a count of feedback records that have been reported and their workflow status. A listing of all records in each status can be viewed by clicking the status name or the adjacent number of records.

![Options and Status](image)

Alternatively those complaint records at a particular status which have overdue elements can be viewed by clicking the number of records displayed as ‘Overdue’. As the ‘Overdue’ label is dependent on correct dates existing in the ‘Primary Complainant Chain’, these prompts should only be relied upon if the site is confident that their ‘Primary Complainant Chain’ dates are correct. This is further detailed on page 35.
<table>
<thead>
<tr>
<th><strong>Options</strong></th>
<th><strong>Status</strong></th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Add a new consumer feedback</strong> – click here to open a blank Feedback Notification Form to report a new consumer feedback.</td>
<td><strong>New Feedback</strong> – Complaints that have been notified but are in ‘Pending’ status and all open Compliments or Contacts.</td>
</tr>
<tr>
<td><strong>My reports</strong> – click here to access standard report suite.</td>
<td><strong>Complaints awaiting acknowledgement</strong> – Complaints that are lodged and awaiting acknowledgment to be sent to the complainant by the Feedback Coordinator.</td>
</tr>
<tr>
<td><strong>Design a report</strong> – click here to access individual design report suite.</td>
<td><strong>Complaints under investigation</strong> – Complaints that are in the process of investigation by allocated investigators.</td>
</tr>
<tr>
<td><strong>New search</strong> – click here to search for information within the CFM database.</td>
<td><strong>Complaints awaiting final reply</strong> – Complaints with completed investigation/s that are awaiting final communication with complainant.</td>
</tr>
<tr>
<td><strong>Saved queries</strong> – click here to access previously saved queries.</td>
<td><strong>Closed feedback</strong> – Complaints, Compliments or Contacts that are closed.</td>
</tr>
<tr>
<td><strong>Help</strong> – click here to access online help information.</td>
<td><strong>Inactive</strong> – Complaints, Compliments or Contacts that are NOT deemed to fall under the feedback module’s model e.g. duplicate entries, erroneously entered data or staff feedback.</td>
</tr>
</tbody>
</table>

Please note that some of these options are available only to those who have been assigned certain authorised security access, e.g. design a report.
General navigation information and Datix features

Common fields and icons
A number of features are common to many areas of the WA Health Datix CFM

<table>
<thead>
<tr>
<th>Item</th>
<th>Item title</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>✭</td>
<td>Mandatory Field</td>
<td>This indicates the field is mandatory and you are required to complete it prior to saving or submitting the form.</td>
</tr>
<tr>
<td></td>
<td>Date field</td>
<td>Open the calendar to select a date or type in the date using dd/mm/yyyy.</td>
</tr>
<tr>
<td></td>
<td>Pick list</td>
<td>Type the first few letters of the required value and the pick list will generate a list of possible matches to select from. Alternatively click the arrow and scroll through the alphabetical list provided.</td>
</tr>
<tr>
<td></td>
<td>Free text field</td>
<td>Type text in to this field. Spell check function is available.</td>
</tr>
<tr>
<td>![Add Another]</td>
<td>Add another</td>
<td>Click on this to add an identical section without copying content.</td>
</tr>
<tr>
<td>![Copy Subject]</td>
<td>Copy subject</td>
<td>Click on this to add an identical section with content copied.</td>
</tr>
<tr>
<td>![Clear Section]</td>
<td>Clear section</td>
<td>This enables the section within the form to be cleared of all entered data.</td>
</tr>
<tr>
<td>![Spell check]</td>
<td>Spell check</td>
<td>Click to check your spelling.</td>
</tr>
<tr>
<td>![Pencil]</td>
<td>Pencil</td>
<td>Click to close spell check and return to entering text.</td>
</tr>
<tr>
<td>![Help]</td>
<td>Help Icons</td>
<td>Click to display additional information. Please note this may be general Datix help that is not specific to the WA Health system configuration.</td>
</tr>
<tr>
<td>Item</td>
<td>Item title</td>
<td>Description</td>
</tr>
<tr>
<td>------</td>
<td>------------</td>
<td>-------------</td>
</tr>
<tr>
<td><img src="image" alt="Round Radio Buttons" /></td>
<td>Round Radio Buttons</td>
<td>Round radio buttons allow a single selection only.</td>
</tr>
<tr>
<td><img src="image" alt="Square Tick Boxes" /></td>
<td>Square Tick Boxes</td>
<td>Square tick box buttons allow multiple selections</td>
</tr>
<tr>
<td><img src="image" alt="Delete" /></td>
<td>Delete</td>
<td>In a multi-select field, where more than one option can be chosen, highlight selected item, click icon to remove the selected value(s).</td>
</tr>
<tr>
<td><img src="image" alt="Browse" /></td>
<td>Browse</td>
<td>Allows the selection of documentation to be attached.</td>
</tr>
<tr>
<td><img src="image" alt="Floating menu" /></td>
<td>Floating menu</td>
<td>Floating menu located at the bottom left of screen with Menu, Save/Submit or Search and Cancel functions.</td>
</tr>
<tr>
<td><img src="image" alt="Save/Submit" /></td>
<td>Save/Submit</td>
<td>Save/Submit button located at the bottom of the ‘Feedback notification form’ or in floating menu (bottom left of page)</td>
</tr>
<tr>
<td><img src="image" alt="Search" /></td>
<td>Search</td>
<td>This allows a ‘search’ of the data to be conducted</td>
</tr>
<tr>
<td><img src="image" alt="Cancel" /></td>
<td>Cancel</td>
<td>The cancel function located at the bottom of the forms or in the floating menu (bottom left of page)</td>
</tr>
</tbody>
</table>
Timeout Feature

In order to maintain system security, the WA Health Datix CIMS will automatically end a session if it has been inactive for 5 minutes. Once the time limit has been reached, a message will appear on the screen advising that the session will be ended unless the option to ‘Extend session’ is selected.

![Alert Message]

Your session has been inactive for more than 5 minutes. For your security, your connection will be logged out if there is no activity after one further minute.

If you do not wish to be logged out, click ‘Extend session’ and your session will be extended for a further 5 minutes.

Seconds remaining: 60
Notification of feedback

To commence recording a reported feedback, click on ‘Add a new consumer feedback’ from the ‘Options’ menu to open the ‘Feedback Notification Form’.

Feedback notification form

Fields displayed on the feedback notification are dependent on selections made in some fields, e.g. Type of feedback. A navigation menu sits alongside the feedback notification form.
Details of feedback

Type
Select the type of feedback to be recorded from the single pick list.

Complaint
An expression of dissatisfaction about any aspect of service provided by a health service lodged by, or on behalf of, an individual consumer/carer.

Contact
Feedback lodged by, or on behalf of, an individual consumer/carer regarding any minor aspect of service where the individual a) is seeking information or assistance or b) does not wish to lodge a formal complaint or c) is satisfied that the feedback has been adequately addressed at point of contact. Issues must be minor and able to be resolved at first contact. Immediate resolution negates the need for any follow up actions.

Compliment
An expression of satisfaction and/or gratitude by, or on behalf of, an individual consumer/carer regarding a service provided by a health service.

Ministerial feedback
If the feedback has been identified as a ‘complaint’ or a ‘contact’ a mandatory single pick list will appear prompting the notifier to state whether the feedback is ministerial feedback. If ‘yes’ is selected, another mandatory free text box will appear requesting the ‘Ministerial reference number’. This field can be searched via the search form so an accurate reference number should be entered to facilitate this.

All ministerial feedback should be entered into Datix CFM. The notifier entering the feedback into the system is responsible for determining the type of feedback the ministerial constitutes. **Feedback that is ministerial in nature is not necessarily a complaint.**
Method of lodgement
Select the method by which the consumer lodged the feedback from the single pick list.

<table>
<thead>
<tr>
<th>Method of lodgement</th>
</tr>
</thead>
<tbody>
<tr>
<td>Email</td>
</tr>
<tr>
<td>Fax</td>
</tr>
<tr>
<td>Feedback form</td>
</tr>
<tr>
<td>In person</td>
</tr>
<tr>
<td>In writing</td>
</tr>
<tr>
<td>Internet</td>
</tr>
<tr>
<td>Telephone</td>
</tr>
<tr>
<td>Other</td>
</tr>
</tbody>
</table>

Summary of events
The summary of events is a free text box in which a description of the feedback is written. It is recommended not to use names or identifiers in this free text field. This should be a brief and informative outline of the feedback to optimise search and analysis functions. More descriptive details can be attached to the feedback record as a separate document.

<table>
<thead>
<tr>
<th>Summary of events</th>
</tr>
</thead>
<tbody>
<tr>
<td>Description of feedback to be written here</td>
</tr>
</tbody>
</table>

Desired outcome for the person reporting the feedback
If the feedback is a complaint, a multi pick list for recording the desired outcome of the person reporting the feedback is displayed.

<table>
<thead>
<tr>
<th>Desired outcome for the person reporting the feedback</th>
</tr>
</thead>
<tbody>
<tr>
<td>Hospital/health service accepts responsibility</td>
</tr>
<tr>
<td>Initiate a change in policy or practice</td>
</tr>
<tr>
<td>Obtaining a refund/compensation</td>
</tr>
<tr>
<td>Obtaining access to service</td>
</tr>
<tr>
<td>Other outcomes not listed here</td>
</tr>
<tr>
<td>Receipt of an apology</td>
</tr>
<tr>
<td>Receipt of an explanation</td>
</tr>
<tr>
<td>Registration of concern</td>
</tr>
<tr>
<td>Resolve adverse outcome (non-clinical, non-financial outcome)</td>
</tr>
</tbody>
</table>
Mental health episode of care?
The Mental health episode of care refers to the services about which the person is lodging the feedback. The help icon contains a definition for clarification:

Mental health episode of care refers to the services about which the person is lodging the feedback. Mental health service includes:

a) any service provided by a mental health practitioner acting in his/her capacity as a mental health practitioner; and/or

b) any service provided in psychiatric hospitals; or in designated psychiatric units in acute hospitals; or in services whose primary function is to provide treatment, rehabilitation or community health support targeted towards people with a mental disorder or psychiatric disability.

‘Yes’ should be selected for any episode of care provided by a Mental Health Service.

‘No’ should be selected if the episode of care is not a Mental health episode of care, i.e. general health episode of care.

‘Not applicable’ should be selected if the feedback is not directly related to an episode of care, e.g. parking availability.

‘Unknown’ should be selected if the feedback is related to an episode of care but it is not known whether the care is mental health or general health.

How did the contact person hear about the feedback mechanism?
Select how the person reporting the feedback became aware of the WA Health feedback mechanism from the single pick list.
Reply timeframe
If the feedback is a complaint, a reply timeframe of 30 working days will be displayed. This is in accordance with WA Health Complaints Management Policy, which states that Health Services shall resolve complaints within 30 working days following receipt of the complaint.

Date of feedback
As per the WA Health Complaints Management Policy, the date the feedback was received by the organisation determines the time frames for acknowledgment and response. The system does not have any validation mechanisms to ensure dates are logical except for preventing future dates from being entered. Care should be taken to ensure dates entered are accurate.

Date received by organisation
Enter the date the initial feedback was received by the organisation.

Date feedback entered into the system
The date the feedback is entered into the system is read-only and will automatically populate with the date the feedback is entered into the Datix CFM system.

Date relevant event occurred
If the date the relevant event occurred is known it can be entered here.

Authorisation to release information
If a complaint has been lodged by a third party (not the person affected), then authorisation to release information must be obtained from the person affected in order for confidential information to be shared with the person reporting the feedback. This functionality is hidden for compliments and contacts. Selecting ‘yes’ will generate a single pick list asking if authorisation to release information has been obtained. Populating this field will then generate a free text box so notes on authorisation to release information can be added.
Feedback Coordinator

Select an appropriate feedback coordinator to allocate to the feedback record from the single pick list. Appropriate staff to select as feedback coordinator will vary between sites. Refer to your local SQP team for further details about appropriate feedback coordinators. The allocated coordinator will have access to the feedback record regardless of the location selected (see Location of primary event below). The feedback coordinator will receive an automated email notification upon submission of the feedback containing a link to the Datix CFM record.

Location of primary event

In a feedback record, the primary event is that which is judged to be the most serious in nature. The location at which this event occurred should be entered in this field.

The location entered in this field will affect which users are able to view the feedback record. **Private hospitals and health services should not be selected in this field.** These services do not have access to Datix CFM or CIMS. These organisations exist in the WA Health Organisational Tree for purposes related to Datix CIMS. If an incorrect location is entered in this section that prevents appropriate users from accessing the record, it can be corrected by either:

- requesting the feedback coordinator to amend the location, or;
- placing a service call with CIMS Support quoting the Datix ID and explaining the requested change.

This field consists of six location tiers comprised of single pick lists, five of which are mandatory, with an additional free text box for ‘Specific location’. The pick lists are based on the WA Health Organisational Tree and are regularly updated. If a required location is not available in the Organisational Tree, contact your SQP team.

The six tiers have a downward parent-child relationship which means that a selection entered in a tier will filter the options available for the next tier down. For example, entering the ‘Organisation’ will restrict options in the pick list for ‘Health Service’, but not ‘Service’.

The six tiers also have an upward autofill function. For example, entering ‘Place of incident / event’ will cause the rest of the tiers to autofill, whereas entering ‘Health Service’ will only cause ‘Organisation’ to autofill.
Selections can be deleted from tiers by highlighting the text and pressing backspace or delete on the keyboard.

<table>
<thead>
<tr>
<th>Location of primary event</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Place of Incident / Event</td>
<td></td>
</tr>
<tr>
<td>★ Service Sub-Division</td>
<td></td>
</tr>
<tr>
<td>★ Service Division (subjects)</td>
<td></td>
</tr>
<tr>
<td>★ Service</td>
<td></td>
</tr>
<tr>
<td>★ Health Service</td>
<td></td>
</tr>
<tr>
<td>★ Organisation (Subjects)</td>
<td></td>
</tr>
<tr>
<td>Specific location</td>
<td></td>
</tr>
</tbody>
</table>

Details of the person reporting the feedback

This section accommodates the details of the person reporting the feedback. This may be the person affected or they may be reporting the feedback on behalf of another person that has been affected.

If the person reporting the feedback is an official body (e.g. HaDSCO, Minister for Health, etc.) reporting feedback following contact from a consumer/consumer representative, then the details of the consumer/consumer representative originally raising the feedback should be entered in this section. Details of the official body can be entered under ‘Other contacts’ by the Feedback Coordinator once the feedback has been submitted.

If several people are involved in reporting the feedback, enter the details of the person that the service actually received the feedback from or has had most interaction with. Additional persons can be added to the record under ‘Other contacts’ by the Feedback Coordinator once the feedback has been submitted.

Unit Medical Record Number (UMRN) is available

If the person reporting the feedback is a WA Health patient with an UMRN, enter this in the ‘Record/patient number’ field and click ‘Search’ to check for matching contacts. If a matching contact is available, click ‘Choose’. Once the matching contact has been chosen, the remaining fields will auto-populate with details retrieved from WebPAS. If a matching contact is not available, close the search box and refer to the section below, Unit Medical Record Number (UMRN) is not available.
Unit Medical Record Number (UMRN) is not available
If the person reporting the feedback does not have an UMRN, the notifier should manually populate the fields with the available information, leaving ‘Record/patient number’ blank.

Details of person reporting feedback not known
If details of the person reporting the feedback are not known, leave all optional fields blank and complete the two mandatory fields only. These are:

- Last name – enter ‘Unknown’. Do not enter ‘Anonymous’, ‘Not reported’ or similar. It is important for reporting purposes that treatment is consistent across users.
- Gender – enter ‘Not stated/unknown gender’.

Person reporting the feedback versus person affected
If the person reporting the feedback is providing feedback about an experience they themselves have had, then the question ‘Is the person reporting the feedback the person affected?’ should be answered ‘Yes’. In this case this persons details have already been captured in ‘Details of the person reporting the feedback’ and therefore do not need to be entered again. For example, a patient may complain about their level of care or a visitor may complain about the price of food at an onsite food outlet.

If the person reporting the feedback is providing feedback about an experience someone else had then the question ‘Is the person reporting the feedback the person affected?’ should be answered ‘No’. This will generate a secondary single pick list asking the relationship of the person reporting the feedback to the person affected. Examples may include a daughter complaining about their mother’s care or if feedback is received from a Member of Parliament on behalf of a member of the public.
Details of the person affected by the feedback

If the person reporting the feedback is not also the person affected by the details of the feedback then details for the person affected by the feedback need to be captured in the record. The default option for ‘Do you need to add details for the person affected’, is ‘Yes’. If ‘No’ is selected, the secondary contact details section titled ‘Details of person affected by the feedback’ is removed. If selecting ‘Yes’, follow the instructions for entering the details of the person affected outlined in ‘Details of the person reporting the feedback’.

If there is more than one person affected, there is an option to ‘Add Another’ by clicking the button at the bottom of this section. This will result in a duplicate of the above being generated. It is also possible for the Feedback Coordinator to add additional people affected once the record has been submitted.

Additional demographic details of person reporting the feedback and person affected

This section is present to collect information not collected elsewhere in the module that WA Health is required by legislation to provide to the Health and Disability Services Complaints Office (HaDSCO). It is present for both the person reporting the feedback and the person affected. Information should only be entered in this section if it is known. Assumptions should not be made. These demographic details are only collected for the primary person reporting the feedback and the primary person affected in the event that there are multiple people/bodies reported within these categories.

Interpreter

Selecting ‘yes’ an interpreter is required for the person reporting the feedback/person affected will open an additional single pick list that provides a language field from which to identify the language of the person. An ‘Other’ value is available if the appropriate language is not available.

Aboriginal / Torres Strait Islander descendant

A yes or no answer can be selected from the single pick list to identify if the person reporting the feedback/person affected is an Aboriginal/ Torres Strait Islander descent.
Country of birth
From the single pick list select country of birth of the person reporting the feedback. Most common country of births are listed and if the required selection is not in the list, select ‘Other’.

Disabilities
If the person reporting the feedback/person affected identifies any disabilities, select these from the multi pick list. These must be reported by the individual involved and must not be assumed or observed by the staff receiving the feedback.

Age band
Clicking the drop down box will provide an age band range to select suitable age band. Staff are encouraged to calculate this age if the information is available to improve completeness of data able to be provided to HaDSCO. Please note the age bands available are different for the person reporting the feedback and the person affected.
Post code
Clicking the drop down box will provide a post code range. Select the post code of the person reporting feedback/person affected from the range provided. **Note the specific post code is not required**.

![Post code selection interface](image)

Treating specialty
Identify the treating specialty of person affected from the single pick list. This is only applicable if the person affected is/was a patient.

Person affected care status
This is a multi pick list. All care status types relevant to the episode(s) of care central to the feedback should be selected.

![Person affected care status interface](image)
Issues

If the feedback is a complaint or a contact, an issue/s section is generated in the feedback notification form. This provides the notifier with a single pick list containing the WA Health Complaint Categorisation list from which to categorise the issue/s. Some complaints/contacts may have many issues identified by the person reporting the feedback. Additional issues can be added by:

- clicking ‘Copy Subject’ which copies all details entered in the previous issue. This is useful when the same issue is applicable to multiple locations, or more than one tier apply to the issue;
- clicking ‘Add Another’ which creates a new blank issues section; or
- adding additional issues once the complaint/contact has been submitted via the Issues page discussed later.

The issue order entered will cause the individual issues to be sorted numerically by issue order upon saving. Numbers can be up to three digits long. Un-numbered issues will be sorted to the end. There is no further functionality associated with the issue order. **Note – the issues order number has to be manually entered. The main issue of the ‘Primary Event’ identified at ‘Location of primary event’ would be expected to be the first issue identified and given the number ‘1’ at the ‘Issues Order’ section.

The three tier issue category has a parent-child relationship, where selections at tier 1 filter options at tier 2, as does tier 2 selections filter tier 3 options. Tiers 1 and 2 are mandatory fields. While tier 3 is not mandatory, it is encouraged that it is completed where possible to improve richness of data extracted on trends. The WA Health Complaints Management Policy contains the full Complaint Categorisation List. Some categories do not have a tier 3.

Location of the each particular issue should be entered. The location may be different for each issue in the complaint and different from the location of the primary event.
The ‘Notes’ section is a free text box in which a description of the issue is inputted. It is recommended not to use names or identifiers in this free text field. This should be a brief and informative outline of the issue to optimise search and analysis functions. More descriptive details can be attached to the feedback record as a separate document.

‘Date complete’ section should not be entered when first notified. The feedback coordinator will utilise this field during the resolution process.

Select the designation of the main party involved with the issue identified from the single pick list. Additional staff designations involved can be mentioned in the notes section. It is not appropriate to duplicate an issue in order to record a secondary main party involved as this will artificially inflate the count of issues for the particular location.

<table>
<thead>
<tr>
<th>Issues</th>
<th>Clear Section</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Issue Category Tier 1</strong></td>
<td></td>
</tr>
<tr>
<td><strong>Issue Category Tier 2</strong></td>
<td></td>
</tr>
<tr>
<td><strong>Issue Category Tier 3</strong></td>
<td></td>
</tr>
<tr>
<td>Place of Incident / Event (Subject)</td>
<td>Test Location1 (Place of Incident)</td>
</tr>
<tr>
<td>Service Sub-Division</td>
<td>Test Location1 (Service Sub-Division)</td>
</tr>
<tr>
<td>Service Division</td>
<td>Test Location1 (Service Division)</td>
</tr>
<tr>
<td>Service</td>
<td>Test Location1 (Service)</td>
</tr>
<tr>
<td>Health Service</td>
<td>Test Location1 (Health Service)</td>
</tr>
<tr>
<td>Organisation</td>
<td>Test Location1 (Organisation)</td>
</tr>
<tr>
<td>Notes</td>
<td>Input particular relevant to this issue, explain what happened. Do not include names.</td>
</tr>
</tbody>
</table>

**Seriousness Assessment Matrix (SAM)**

The Seriousness Assessment Matrix provides a framework for assessing the risk associated with the events that are the subject of a complaint.

Rating the severity of the complaint will assist in determining:

- who needs to be notified of the complaint
- the priority for the health service’s response and the mode of response
- who will need to be involved in the investigation and response.

The initial SAM score allocated to the complaint should not be indicative of the estimated veracity of any allegations made by the person reporting the feedback. The initial SAM score is based entirely on the information provided by the complainant and should reflect the most
serious issue identified, e.g. a complaint with an issue that would be categorised as SAM 1 and an issue that would be categorised as SAM 4 would overall be identified as a SAM 1 complaint. It is recognised that the SAM rating for a complaint may change based on the findings of an investigation; the confirmed SAM score will be identified by the Feedback Coordinator following investigation of the complaint.

An image of the Seriousness Assessment Matrix is available by clicking the Datix help question mark shown below. Further clarification can be gained from the WA Health Complaints Management Policy.

**Documents**

Additional information associated with the consumer feedback information may need to be added. Ticking the box ‘Would you like to attach any documents?’ will open the document attachment function.

‘Link as’ identifies the type of document to be attached.

‘Description’ allows for a brief description of the attachment e.g. complaint letter.

Clicking ‘Browse’ will allow the notifier to locate the file to be attached.
Add another allows for additional documents to be added.

**Details of person lodging the feedback**

Details of person lodging the feedback auto-populate. Confirm your details are correct prior to submitting the feedback. If there are any errors click ‘Clear Section’ which will enable all fields to be manually completed.

**Lodgement status**

Lodgement status is to remain ‘Pending’ for all new feedback. Pressing ‘submit’ with the lodgement status set as pending will cause the feedback to be recorded in the system and move the record to ‘New Feedback’ ready for review by the nominated feedback coordinator.

When submitted successfully, the screen will display the unique identifying record ID and display the name of the coordinator who received a notification email.
The consumer feedback has been saved with approval status.

Emails were sent to the following users:

Project Officer Betty Chew

**Feedback overview**

<table>
<thead>
<tr>
<th>Name and reference</th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Name</td>
<td>UNKNOWN</td>
<td></td>
</tr>
<tr>
<td>Reference</td>
<td>CFM21662</td>
<td></td>
</tr>
<tr>
<td>Datix ID</td>
<td>21662</td>
<td></td>
</tr>
</tbody>
</table>

**People Involved**
Submitted Feedback

Once a feedback record is submitted it will be allocated the status of ‘New Feedback’ and be accessible from the status page shown below. The feedback coordinator will assume handling of the feedback record from this point.

<table>
<thead>
<tr>
<th>Status</th>
<th>Records</th>
<th>Overdue</th>
</tr>
</thead>
<tbody>
<tr>
<td>New Feedback</td>
<td>7 records</td>
<td></td>
</tr>
<tr>
<td>Complaints awaiting acknowledgement</td>
<td>3 records</td>
<td>3 Overdue</td>
</tr>
<tr>
<td>Complaints under investigation</td>
<td>1 records</td>
<td>1 Overdue</td>
</tr>
<tr>
<td>Complaints awaiting final reply</td>
<td>1 records</td>
<td>1 Overdue</td>
</tr>
<tr>
<td>Closed Feedback</td>
<td>2 records</td>
<td></td>
</tr>
<tr>
<td>Inactive</td>
<td>20 records</td>
<td></td>
</tr>
</tbody>
</table>

Submitted complaint records will be progressed through the first five of these status categories by entering relevant dates in the ‘Primary Complainant Chain’ (explained below) until being closed.

Submitted contacts and compliments do not progress through the ‘Primary Complainant Chain’ and therefore should only ever exist in:

- New feedback;
- Closed feedback; or
- Inactive.

It should be noted that Datix CFM is primarily a complaints module. Compliments and contacts are recorded within Datix CFM in order for the system to provide a count of these types of feedback. It is not intended that Datix CFM provides a means of management of these kinds of feedback.

From the ‘status’ page, selecting the name of a stage (e.g. New Feedback) or the number of records listed adjacent to the name of a stage will open the listing of all feedback records in that stage. Selecting the overdue records will display a listing of all complaint records in that stage that have an overdue date in the ‘Primary Complainant Chain’.

<table>
<thead>
<tr>
<th>ID</th>
<th>Coordinator</th>
<th>Name</th>
<th>Date received by organisation</th>
<th>Date feedback lodged</th>
<th>Type</th>
<th>Summary of events</th>
<th>Ref</th>
</tr>
</thead>
<tbody>
<tr>
<td>21524</td>
<td>Feedback Coordinator cdm_c02 Demo</td>
<td>BLOGGS JOE</td>
<td>24/05/2016</td>
<td>26/05/2016</td>
<td>Complaint</td>
<td>Summary of Event</td>
<td>CFM21524</td>
</tr>
</tbody>
</table>

Selecting any part of the details of a particular feedback record will open the ‘Feedback Management Form’ for that record. The ‘Feedback Management Form’ will open in the ‘Feedback overview’ page. There will be a navigation menu on the left that will allow movement.
between the different pages. Information entered by the notifier will be split between the ‘Feedback overview’, ‘People Involved’ and ‘Issues’ pages. The title of pages that contain any information will be displayed in orange font in the navigation menu.

**Primary Complainant Chain**

Feedback records identified as complaints (i.e. not contacts and compliments) will progress through each stage in the Primary Complainant Chain. The chain refers to each stage of the Complaint Management process and includes:

- Date received;
- Acknowledged date;
- Actioned/Investigated date; and
- Replied date.

Saving a complaint record with the ‘Done’ field for any of the stages listed above will cause the complaint record to progress to the next stage.
**New Feedback**

Feedback coordinators will receive automated email notification of all new feedback records to which they are assigned. All new feedback (complaints, contacts and compliments) should be reviewed by the feedback coordinator to ensure they are completed correctly and appropriately (e.g. de-identification of free-text fields). In addition, feedback coordinators should review the listed people involved.

**People involved (Approving contacts)**

From the navigation menu left of the ‘Feedback Management Form’ select ‘People Involved’.

![Feedback Management Form](image)

Actions required by the feedback coordinator are to:

- Approve people involved if workflow status is set as ‘unapproved’ **Note if contact is already in system (i.e. match is found) it will appear approved.**
- and/or to add additional Other Contacts by clicking ‘Create a new Other contact link’

To move workflow status of person involved to approve, click on ‘unapproved’ in the ‘Workflow status’ column.
This action will open the ‘complainant details’ page as pictured below. Review information within the details page. If further information is available, input these details.
Once complainant details are confirmed click ‘Check for matching contacts’. This action will display a ‘Matching contacts’ page that will provide a list of available contacts or a message advising no matching contacts were identified in the system.

![Matching contacts](image)

Or

![Matching contacts](image)

Clicking ‘Cancel’ will close that window and return you to the ‘Person affected details’ page. At the bottom of this page, the ‘Approval status’ now has a drop down box from which to select ‘Unapproved’ or ‘Approved’. Choose required approval status and click ‘Save’ to return to ‘People involved’ page. The workflow status will update to the status selected.

![Approval status](image)

![People Involved](image)
New complaints

In addition to reviewing complaint records as outlined above, the feedback coordinator must check the date entered in ‘Date received’ in the ‘Primary Complaint Chain’.

The ‘Date received by organisation’ in the ‘Key dates’ section should drive the due dates in the ‘Primary Complainant Chain’ as per the WA Health Complaint Management Policy. However the dates in the ‘Primary Complainant Chain’ are auto-calculated from the ‘Date received’ which the system automatically populates with the date that the ‘Primary Complainant Chain’ is generated, i.e. the date the complaint record is entered into the system. Therefore the Feedback Coordinator is responsible for ensuring that the ‘Date received by organisation’ is copied into the ‘Date received’ field in the ‘Primary Complaint Chain’. Once the ‘Date received’ has been changed, click ‘Save’ to enable the system to re-calculate the due dates.

‘Date received’ in ‘Primary Complaint Chain’ has been changed in below shot to correctly reflect ‘Date received by organisation’ in ‘Key Dates’. **Note due dates have also changed.
It is important that the 'Date received' is updated and the record saved prior to the record being saved with any Done dates completed. Entry of a Done date prevents the system from recalculating Due dates in the 'Primary Complaint Chain'.

**Lodging new complaints**

Once a 'Pending' complaint record has been checked for:

- Fields are appropriately completed;
- 'People Involved' are approved; and
- 'Date received' matches 'Date received by organisation';

the complaints coordinator should then move the 'Lodgement status after save' to 'Lodged'. This will move the complaint to 'Complaints awaiting acknowledgement' upon saving.

Alternatively the 'Lodgement status after save' can be saved as 'Rejected' for complaint records that should not be lodged (refer to page 48). This will cause the record to move to 'Inactive' and therefore the complaint will not progress through the 'Primary Complainant Chain'.

<table>
<thead>
<tr>
<th>Lodgement status after save</th>
<th>Pending</th>
<th>Lodged</th>
<th>Rejected</th>
</tr>
</thead>
<tbody>
<tr>
<td>Current lodgement status</td>
<td>Pending</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
**New contacts/compliments**

New contact and compliment records should remain in ‘New Feedback’ until they are ready to be closed. Therefore their lodgement status must remain as ‘Pending’ until they are ready to be closed.

**Closing contacts/compliments from New Feedback**

When a contact/compliment has been managed and is ready to be closed, the feedback coordinator should:

1. Change the ‘Lodgement status after save’ to ‘Lodged’
2. Enter the ‘Closed date’
3. Press save

If step 1 is missed, the record will remain in New Feedback. If step 2 is missed, the record will move to ‘Complaints awaiting acknowledgement’. As contacts/compliments are not associated with a ‘Primary Complainant Chain’, they should not enter this status as there is a high-risk they will be lost and never closed. Errors can be corrected by finding the feedback record and completing the missed step in order to move the record to ‘Closed feedback’.

**Complaints awaiting acknowledgement**

Lodged complaint records move to the ‘Complaints awaiting acknowledgement’ status section which is accessible from the ‘status’ page. Complaint records located in this status group require communication with the person reporting the feedback to acknowledge the complaint and clarify or obtain additional information if necessary. A template complaint acknowledgement letter is available in the system for use if desired.

**Complaint Acknowledgement Letter**

Use the navigation menu to access the ‘Documents and Templates’ section. From the pick list in the ‘Templates’ section select ‘Complaints Acknowledgement Letter’.
Note that the merge function (automatic population of complainant’s details) may not be compatible with older versions of Microsoft Word (i.e. Word 2003) and these may have to be manually entered by the user.

A letter template will appear when the **Merge in MS Word** button is clicked.

Clicking on the acknowledgment letter as outlined in the red box in the above picture opens a word letter template. Write the acknowledgement letter to the complainant and save the document. Click on the ‘attach a new document’ button to attach the edited letter and then follow the steps as outlined on page 27.

The documents and templates page will re-open showing the recently attached letter. Click save.
Acknowledged date

Once acknowledgement has been provided to the person reporting the feedback, the Done date in the ‘Primary Complainant Chain’ should be updated. Saving the record with this field completed will move the record to the next step in the Complaint Management process: ‘Complaints under investigation’. Ensure the ‘Date received’ has been updated to reflect the same date as the ‘Date received by organisation’ and that the record has been saved to ensure due dates are updated prior to entering this done date. See page 35 for further details.

<table>
<thead>
<tr>
<th>Primary Complainant Chain</th>
</tr>
</thead>
<tbody>
<tr>
<td>Date received by organisation: 25/07/2018</td>
</tr>
<tr>
<td>Acknowledged date: 01/08/2016</td>
</tr>
<tr>
<td>Actioned/Investigated date: 29/08/2016</td>
</tr>
<tr>
<td>Replied date: 06/09/2016</td>
</tr>
</tbody>
</table>

Complaints under investigation

The investigation function within Datix CFM allows a feedback coordinator to assign investigators to the complaint issue/s.

Feedback Coordinator role

Navigate to the ‘Investigation’ page and select investigators from the multi pick list.
Saving the record with the investigators selected will result in an automated email being sent to the investigator advising them that they have been assigned to the complaint investigation. However the feedback coordinator should send a separate communication via the communication page with particulars about the investigation required, particularly in complex complaints with multiple issues, e.g. Please investigate and provide comment on issues number 2 and 3.

**Investigator role**

Once the investigation is complete the investigator is responsible for entering relevant information in to the Datix CFM record. The issues the particular investigator investigated should be identified at ‘Issue number’. Details about their investigation should be entered in the ‘Comment’ section. They should enter their identification details and sign the completed investigation with their HE number.
If an investigator accesses the complaint record and the investigation comment is already completed by another investigator, an additional comment section can be generated by changing the answer to ‘Add another investigation comment?’ to ‘Yes’. Up to 10 investigators can comment on any one complaint record.

Investigators should utilise the ‘Communication’ tab to notify the Feedback Coordinator once they have completed their portion of the investigation.

**Third party comment**

If applicable to the complaint, Datix CFM can be used to invite comments from third parties to assist in the resolution of the complaint. Users with the appropriate profile can be selected from the multi pick list on the ‘Third party comment’ tab.
This action provides permission for the nominated personnel to read the complaint and provide comment. It DOES NOT automatically send an email notification to the nominated user. The user must be notified via the ‘Communication’ tab with their invitation and relevant information so that they can comment on the complaint.

**Recommendations/Actions**

The development of recommendations/actions is a fundamental component in consumer feedback management and provides the framework for quality improvement in a health care service. Recommendations/actions can be entered for open or closed complaints, however not every complaint will generate a recommendation/action. To add a recommendation/action, open the relevant complaint record and from the ‘Feedback Management Form’ menu select ‘Actions’. To generate a new action, click ‘Create a new action’.

You will be taken to a ‘Complaints Recommendations/ Action Form’ as shown below.
The Recommendation/Action Details section should provide enough detail for a user to understand what the recommendation/action is and how it relates to the consumer feedback. It should also provide detail on how it is proposed that the recommendation/action is implemented. This description should be entered into the free text section labelled ‘Recommendation / Action Text’.

The ‘Assigned To’ field can be a WA Health employee with Datix CFM profile permissions. Assigning an employee here provides permission for the nominated user to read the recommendation and provide comment.

The ‘Outcome measure’ is an indication of which measures will be used in evaluation of the recommendation/action, i.e. the desired result in change of service the service is expecting to see after the recommendation/action has been implemented and how the service is planning to determine the successfulness of this implementation.

The ‘Due date’ is set by the person creating the recommendation/action. It should be set at a reasonable time that allows the recommendation/action to be implemented in order to achieve a reasonable quality and sustainable change yet in a time frame that is going to minimise the risk of repeat events occurring.

Single pick lists with yes/no answers exist for ‘Executive concur?’ and ‘Senior staff discussed recommendations & actions with staff member(s) involved?’. Completion of these fields assists
future users to understand the extent of consultation around the recommendation/action in the service.

The ‘Key dates’ section comprises of a start date and completed date. The start date auto-populates with the date the action is generated in the system. This can be changed if necessary. The date completed should be entered once the implementation and evaluation process is completed.

The ‘Action details’ section provides a summary of recommendation/action and consists of three mandatory fields. Priority must be set as low, medium or high and should reflect the potential impact the improvement would have on the safety and quality of the health care provided. It would be generally expected that the priority would reflect the confirmed SAM score, i.e. a complaint with a SAM score of 1 would be associated with actions of high priority, whereas a complaint with a SAM score of 4 would be associated with actions of low priority. For example a complaint about a surgery being performed incorrectly would be expected to generate recommendations with higher priority than a complaint about the price of food at a hospital cafeteria. The type of action is selected from the pick list which covers common, but not all, methods of acting on recommendations. Further details can be entered in to the free text description field below to assist with explanation of the action.

![Action details](image)

**Action investigated date**

Once the investigation process is complete, the Feedback Coordinator should enter the ‘Actioned/Investigated’ Done date in the ‘Primary Complainant Chain’. Saving the record with this field completed will move the record to ‘Complaints awaiting final reply’.
Complaints awaiting final reply

This list reflects all complaint records that have completed the investigation process and are ready for final communication with the complainant regarding the outcome of the investigation in to their complaint.

Documents and templates

To access the ‘Complaint Reply Letter’, go to ‘Documents and templates’ from menu. Click on the drop down arrow and select ‘Complaint Reply Letter’. Refer to page 37 for details on how to complete the merge process.

Outcomes

Selecting ‘Outcomes’ from the menu will open this page where you can input the resolutions of the complaint, add comments and confirm the SAM Score.
The 'Resolution' field includes a multi pick list to allow multiple selections for the resolution achieved.

- Agreement not reached
- Apology provided
- Change in policy effected
- Change in practice/procedure effected
- Compensation paid
- Complaint has been withdrawn
- Concern registered
- Costs refunded or reduced
- Explanation Provided

‘Time taken to resolve complaint’ is a single pick list to reflect the number of days between the date the feedback is received and the date the final reply is sent to the complainant. The Feedback Coordinator must calculate this value and select the appropriate time bracket. This field is required for legislative reporting to HaDSCO, completed by DOH. An excel based calculator tool is provided for use if desired.
Confirmed Seriousness Assessment Matrix Score

The confirmed Seriousness Assessment Matrix score should be entered following completion of investigation into the complaint. The confirmed SAM Score reflects that of the complaints most serious issue. See page 27 for a detailed description of the SAM Score.

Replied date

Once the ‘Outcome’ fields have been completed and final reply has been sent to the person reporting the feedback, the Feedback Coordinator should complete the ‘Replied date’ Done in the ‘Primary Complaint Chain’. Saving the record with this field completed will move the complaint to ‘Closed Feedback’.
Other features

Closed Feedback

‘Closed Feedback’ includes:

- Contacts and Compliments that have been ‘Lodged’ and had the ‘Closed date’ completed prior to saving; and
- Complaints that have had the ‘Replied date’ Done completed in the ‘Primary Complainant Chain’ prior to saving.

Re-opening a Closed Complaint

In certain circumstances it may be necessary to re-open a previously closed complaint. This may, for example, be due to:

- Missed information not considered in the investigation which needs to be added to the complaint;
- A change or development in circumstances central to the complaint; or
- Following resolution, the complaint is escalated to another body, e.g. HaDSCO

It should be noted that if a complaint is received about how a complaint has been handled or about the resolution achieved then this should be entered in Datix as a new complaint. If a user is unsure whether a complaint should be re-opened or entered as a new complaint, considering and comparing the issues that are central to the original and current complaint can usually indicate whether it is a new complaint or not.

To re-open a closed complaint, enter a date in the ‘Re-opened (Complainant)’ field of the ‘Primary Complaint Chain’.

Saving the record with this field populated will move the complaint record into ‘Complaints Awaiting Acknowledgment’. The date of re-opening becomes the updated ‘Date received’ with the due dates in the “Primary Complaint Chain’ re-calculated based on this date.

**Note: ‘Date received by organisation’ and ‘Date received’ will be different values and should not be altered.**
Contacts and compliments cannot be re-opened. Information can however be added to the closed feedback record if necessary.

**Inactive**

Feedback records may be moved into the ‘Inactive’ group if they are out of scope of the CFM. Reasons this may occur include:

- duplicate entries;
- erroneously entered data; or
- staff feedback.

An inactive record is read-only and the documents and templates are no longer accessible.

**Making a record inactive**

To inactivate a record, the ‘Lodgement status’ should be changed from ‘Pending’ or ‘Lodged’ to ‘Rejected’ and then saved.

Inactivation of a record can be reversed by changing the ‘Lodgement status’ back to ‘Pending’ or ‘Lodged’ and saving the record. This action will move ‘Pending’ records to ‘New Feedback’ and ‘Lodged’ records to ‘Complaints awaiting acknowledgement’. Remember that Compliments and Contacts should not sit in ‘Complaints awaiting acknowledgement’ and the ‘Closed date’ should be entered in order to move these lodged records to ‘Closed Feedback’.

**Linked records**

‘Linked records’ facilitates other feedback records or clinical incidents within the Datix system to be linked to feedback records in order to provide more complete information and the sharing of information across modules. Linking clinical incident records to consumer feedback records may be particularly relevant in complaints relating to the quality of clinical care.
Clicking on ‘Link a record’ opens the ‘Link Details’ page.

The ‘Module’ single pick list identifies which module the linked record will be located in, i.e.:

- Clinical Incident Management System (CIMS); or
- Consumer Feedback Module (CFM).

The ‘Module Link ID’ identifies which record is to be linked to the current record. This field refers to the Datix ID, not the CIMS/CFM Reference number.

Notes about the relationship between the linked records should be entered in the ‘Notes’ free text box.

Click ‘Save’. Linked records can be accessed from the ‘Linked Records’ page within the feedback/clinical incident record. The ‘edit’ section allows the user to remove the link if required.
Changing the type of feedback

Once a feedback record has been submitted by the notifier, the type of feedback is unable to be changed. There may be instances however where the person reporting the feedback may request that a contact becomes a complaint or vice versa. In this situation, a new feedback record should be generated and the original feedback record should be closed with an appropriate resolution selected. For example, in the instance where the person reporting the feedback wishes that their contact becomes a complaint this resolution may be ‘Agreement not reached’, or when a complaint is to become a contact ‘Complaint has been withdrawn’. The system does not allow for a change in feedback type because:

- It is recognised that significant resource may have been spent in attempting resolution of the contact/complaint. If these records were to be merged the activity of the consumer liaison department may be misrepresented.
- There are differing amounts of functionality associated with each feedback type. Changing the feedback type once these fields have been completed may result in the loss of information.

If the above situation does occur, the Feedback Coordinator should ensure that the records are linked so that relevant information is not lost.