



Management and Review Form

Record Managers/Verifiers are responsible for:

1. Cheing the content and factual accuracy of the report
2. Ensuring each contact is **APPROVED**
3. Selecting a RIDDOR status
4. Ensuring the **SEVERITY** is correct
5. Downgrading or upgrading the **SEVERITY** if appropriate
6. Selecting a **LIKELIHOOD OF RECURRENCE** grade
7. Moving the record to the **BEING REVIEWED (verified)** status
8. Adding information in the progress notes section on how you intend to proceed
9. Deciding if the **Statutory Duty of Candour** procedure applies
10. Recommending whether or not this record requires further review
11. Commencing a review process (if appropriate)
12. Providing meaningful feedback to the reporter of the record

Please adhere to national standards:

- All events should be verified within 72 hours
- All category 1 (severity) events must undergo an appropriate level of review
- Moderate events must be closed within 90 days if a review is conducted
- All minor and negligible (severity) events should be completed within 10 days

[CLICK HERE to view the NHST Adverse Event Management Policy](#)

[CLICK HERE to view the NHST Datix Verifier Guide](#)

Adverse Event (without harm) | 30324

Submitted/Viewed by Record Manager (Verifier)

Datix Event ID	30324
Date event submitted to verifier (dd/MM/yyyy)	20/01/2015
Date event first viewed by verifier (dd/MM/yyyy)	21/01/2015
Last updated	17/04/2026 13:47:34
Ref	30325
FOR USE BY CLINICAL GOVERNANCE TEAM ONLY	

Location where this event occurred

In which type of location did the event occur?	HEALTH CENTRE
In which location did the event occur?	LINKS HEALTH CENTRE, MONTROSE, ANGUS
What was the exact location?	OTHER, LINKS HEALTH CENTRE

Reporter's Care Division

Care Division/HSCP	Angus CHP (Archived)
Clinical Care Group/Locality	Primary Care (Angus HSCP)
Department	Minor Injuries Units (MIUs)
Reporter's Staff Group	Nursing

Type of Report

Who or what was affected by this event	
Was this an actual adverse event or a near miss?	Adverse Event (without harm)
Was anyone harmed as a result of this event?	No

Time and Date of the Event

Time (hh:mm)	18:40
Actual time the adverse event happened. Use approximate time if not known. Please enter in 00:00 format	
Event date (dd/MM/yyyy)	20/01/2015
Was the Event Out of Hours?	Yes
Person who was notified	Police

Category and Subcategory

Event Category	CLINICAL CHALLENGING BEHAVIOUR
CLICK HERE to view the full listing of Categories and Subcategories	

For assistance call ext. [redacted] or email [redacted]@nhs.scot.

Subcategory **INABILITY TO COMPREHEND RISKS/DANGERS**

Police called? **Yes**

Police attended? **Yes**

Was this event due to a clinical condition?

Did Healthcare IT (e.g. software or computer equipment) potentially contribute to this incident?

Does this event relate to a National Screening Programme?

[CLICK HERE to view the full listing of National Screening Programmes](#)

Details of the record

Circumstances of the Event
Enter facts, not opinions. Do not enter names of people in this free text box. Always refer to 'Patient A' or 'Nurse A' etc. Use the people affected section below to gather personal details. Please avoid the use of any abbreviations and, where possible, please avoid the use of medical terminology.

Patient brought round to Minor Injuries Unit by General Practitioner, who had found him in health centre toilets in main concourse. Requested that we see patient and refer to Mental Health Team, GP stated that he had found the patient to be paranoid and hallucinating. We were informed by the Gp that this was not his patient but had previously been a patient at his practice. Patient very agitated not happy to give details to nursing staff in MIU but eventually agreed. He admitted to HCA that he had taken Heroin and had attended health centre to seek medical advice about his right leg after doing this. He also informed HCA that he was just out of prison and was in the process of relocating and changing his GP. He then became very agitated and was crouching between outer and inner door, stating that people were watching him and were after him. Asked to return to waiting room area but refused. [REDACTED]. He then entered staff office stating he had injected bleach into his neck, found to have a needle hanging out of the left side of his neck but no evidence of a syringe or bleach. Asked to leave office and and place in treatment room 41 by SSN. By the time police had attended patient had removed needle from his neck himself.

What immediate action was taken?
 Enter action taken at the time of the Event

Mental Health Team contacted initially for advice but once patient was found to have inserted a needle in his neck then 999 called and Police contacted. Patient taken into police custody for assessment whilst in custody.

Enter facts, not opinions. Do not enter names of people in this free text box. Please avoid the use of any abbreviations and, where possible, please avoid the use of medical terminology.

Ligature Incidents

Did this event involve any kind of ligature?

Click the names below to approve people involved

ANY RECORD INVOLVING A PERSON MUST INCLUDE THEIR PERSONAL DETAILS.

- Please review each of the **UNAPPROVED** contacts listed below as they need to be **APPROVED**
- Click on a contact's name to display the record to approve them or add further details.
- Click the 'Check for matching contacts button
- If you can identify the contact from the list, select choose, the contact will **APPROVE** automatically, then click create new link
- If the contact does not appear in the list after clicking 'Check for matching contacts' then click cancel and manually change the field from **UNAPPROVED** to **APPROVED**
- Click Save.

Patient or Person Affected/Involved

	Approval status	ID	Forenames	Surname	Opened	Closed	Email	Type (Complainant)	Subtype	Contact role	Date of birth	CHI
▶	Approved	[REDACTED]	[REDACTED]	[REDACTED]				Witness of incident	Other	Person Injured or Affected		
▶	Approved	[REDACTED]	[REDACTED]	[REDACTED]			[REDACTED]@nhs.scot	Employee	Nursing/midwifery	Person Injured or Affected		

Other people involved in the event

	Approval status	ID	Forenames	Surname	Opened	Closed	Email	Type (Complainant)	Subtype	Contact role	Date of birth	CHI
▶	Approved	[REDACTED]	[REDACTED]	[REDACTED]				Patient or former patient	Out patient	Other		
▶	Approved	[REDACTED]	[REDACTED]	[REDACTED]				General Practitioner (GP)		Person Making Clinical Referral		
▶	Approved	[REDACTED]	[REDACTED]	[REDACTED]			[REDACTED]@nhs.scot	Employee	Nursing/midwifery	Reporter of Event		

	Approved	35964	David	Standish				Patient or former patient		Other	05/03/1970	0503700053
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Employees/Witnesses to the event

No Employees

Hate Crimes/Harassment/Discrimination

Is this a hate crime?

Hate Crime is the term used to describe behaviour which is both criminal and rooted in prejudice – this can be verbal/physical abuse in relation to the protected characteristics:

- Race
- Disability
- Gender Reassignment
- Sexual Orientation
- Religion/Belief.

Violence and aggression/self harm/clinical challenging behaviour

Was the individual's movement restricted in any way? None
 Yes
 No

Was rapid tranquilisation administered?

Trainee/Junior Doctor or Dentist

Was a Trainee/Junior Doctor/Dentist directly involved in this Event?

Controlled Drugs Incident?

Are controlled drugs associated with this event? i.e. Use, Documentation, Possession, Storage, Disposal?

[CLICK HERE to view guidance on Controlled Drugs](#)

Reporter

Full name ██████████

Reporter's Telephone Number ██████████

Reporter's Email Address ██████████@nhs.net

Please ensure the reporter email address is correct. If you are unsure, please [CLICK HERE](#) then click Search directory to confirm the reporter's email address.

When approving, please ensure you select the correct staff member as more than one person can have the same name. Please do not link to any staff entries with an email address ending @nhs.net as these are now obsolete.

FAILURE TO CORRECTLY APPROVE CONTACTS CAN RESULT IN REPORTERS NOT RECEIVING FEEDBACK OR FEEDBACK/EMAILS BEING SENT TO THE WRONG INDIVIDUAL.

Record Manager (Verifier)

Event Verifier ██████████ - Charge Nurse, MIU, WHCCC

VERIFIER INFORMATION
If you are planning A/L, please ensure you agree with colleagues who should be named as verifier during this time at the point of submitting records. In doing this, you will avoid returning to events requiring

verification/completion.

If you require additional staff to view the record, please click the "Click here to share this record with other users" link on the left hand panel. Unfortunately, CGRM staff are unable to do this without the verifier's written agreement.

Event Severity

Impact **MODERATE (YELLOW): Category 2 Event**

Extreme (red): Category 1 event - (Death or major incapacity, permanent loss of service, severe financial loss, inability to meet objectives)

Major (Amber): Category 1 event - (Major injury, sustained loss of services, major financial loss, significant project/objective over-run)

Mortality Learning Events (purple): Used only for deaths considered to be mortality learning events.

Moderate (Yellow): Category 2 - (Significant injury, externally reportable e.g. RIDDOR, some disruption to service, significant financial loss)

Minor (Green): Category 2 event - (Minor injury or illness, short term disruption to service, minor financial loss, minor reduction in scope of objectives)

Negligible (White): Category 3 event - (Negligible/no injury or illness, negligible/no disruption to service, negligible/no financial loss, negligible/no reduction in scope of objectives)

[CLICK HERE for the Traffic Lights and Consequence Matrix](#)

Do you need to up/downgrade this event?

Likelihood of Recurrence

Recurrence Risk Assessment

The likelihood of the Event occurring again and the potential consequences if it did so.

Likelihood of recurrence	Consequence				
	Negligible (Category 3)	Minor (Category 2)	Moderate (Category 2)	Major (Category 1)	Extreme (Category 1)
Almost certain - could occur frequently	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Likely - could occur several times	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>
Possible - may occur occasionally	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Unlikely - not expected to happen but might	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Rare - cannot believe this event would happen	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Grade: <input type="text" value="Amber (Category 2) (Hig"/>					

Record managers/verifiers must complete both mandatory fields with a red star below and then change the approval status from In holding area, awaiting review (Unverified) to Being Reviewed (Verified) **WITHIN 72 HOURS** of receiving the report

Is this event RIDDOR reportable?

The following types of Events are **not** RIDDOR reportable - Medication Events, Inappropriate Staffing Levels, Missing Patient Documentation, Absconding/Missing Patients, Verbal Aggression, Healthcare Associated Infections, Patient Suicide.

RIDDOR ?

No

For further help please contact NHS Health and Safety Team:

tay.safety@nhs.scot

[CLICK HERE for RIDDOR Guidance](#)

Take note of the RIDDOR Ref No and download the HSE generated RIDDOR report to your PC, prior to leaving the HSE website. Ref No to be inserted into the box below and HSE RIDDOR Record form uploaded to the DATIX, please use documents section on Datix to upload your RIDDOR Record form.

Business Continuity Plan

Did this event require the department's/service's Business Continuity Plan to be invoked?

Review

Type of Review Required (YELLOW)

[Click here to upload documents](#)

No documents.

Event Approval

For 2222 Calls please ensure you complete all the screening fields above and complete the report as soon as possible

Current approval status Approved (Complete)

Date Complete 21/01/2015

Lessons Learned and Actions Taken

The reporter of the event will receive an automatic email from the system containing the information you enter in these fields when the event is complete

Lessons Learned
Please summarise lessons learned from review or team discussion

Actions Taken
List any agreed actions from review or team discussion

[Click here to add progress notes](#)

No progress notes.

Notifications

Recipient Name	Recipient E-mail	Date/Time	Contact ID	Telephone Number	Job title
██████████	██████████@nhs.net	20/01/2015 21:35:03	██████████		Charge Nurse, MIU, WHCCC

[Click here to send an email](#)

RIGHT CLICK HERE AND SELECT OPEN IN NEW TAB TO CHECK YOUR EMAIL ADDRESS IN STAFFNET DIRECTORY

Recipients

Message

Message history				
Date/Time	Sender	Recipient	Body of Message	Attachments
No messages				

[Click here to link records](#)

No Linked Records.

[Click here to assign actions for this record](#)

No actions