The Royal Wolverhampton NHS Trust

SOP29
Dragon Medical Workflow Manager
Standard Operating Procedure

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Appendix 1 Business Continuity

1.0 Procedure Statement (Purpose / Objectives of the Procedure)

This document explains the operational procedures to follow when using Dragon Medical Workflow Manager (DMWM).

The aim of DMWM is to support document production that enables the creation and distribution of patient letters and reports. DMWM is primarily used for production of dictated letters.

The outcomes of this document are therefore:

- To define the procedures relevant to the use of DMWM
- To improve turnaround times for letters.
- To improve efficiency for Medical and Administration staff
- To improve communication between primary and secondary care

In adhering to this Policy, all applicable aspects of the Conflicts of Interest Policy must be considered and addressed. In the case of any inconsistency, the Conflicts of Interest Policy is to be considered the primary and overriding Policy.

2.0 Accountabilities

2.1 Senior Accountabilities

The Chief Medical Officer is the director responsible for Dragon Medical Workflow Manager and approves the system for use across the Trust.

2.2 All Users

All Users must ensure that they have received RWT's DMWM training prior to use of the system. It is the user's responsibility to ensure that any information entered into the application must be professional, timely, relevant, appropriate and accurate.

It is the responsibility of all users to ensure that they abide by the Trust's policies for using electronic systems. This includes never disclosing your username or password to other users and always ensuring confidentiality of patient information. For additional information see:

- OP07 Health Records Policy
- GOP06 IT Cyber Security Policy
- OP91 Data Quality Policy
- OP13 Information Governance Policy

2.3 Service Managers

Service Managers are responsible for ensuring all staff requiring access to DMWM have received appropriate training.

Service Managers/Line Manager approval for system access must be gained for transcriptionist users, department document managers, department read-only users and reports users.

Service Managers should ensure users have a Windows Login, and NHS email before access to DMWM is requested.

All access requests/changes to permissions must be submitted with line manager approval.

The Service Managers and secretarial leads should ensure that the team's system configuration meets the needs of that team e.g., document types are set up to service needs, including default recipients and templates, and that team auto-texts are managed within the services.

Service Managers are responsible for the monitoring of documents in the workflow, and timely turnaround of documents in the system. They may nominate users within the department to be Document Managers (with access to web admin dashboard) to support with this.

The Service Manager will identify a Service Contact within the department, who will be the named contact for the investigation of DMWM documents returned via Docman Connect to the GP Returns team.

If there is a change of Service Contact, the individual will confirm with their line manager who they will pass their role onto, and the GP Returns team/AST should be updated to the change in Service Contact.

Service Managers must inform the Digital System Support team, when DMWM users leave the department or no longer require access to DMWM.

Prior to leaving a department/the Trust, Service Managers should ensure that authors have actioned all documents held in their 'Draft' and 'Review' queues.

2.4 Clinical Directors

The Clinical Director should support clinical authors in the timely review and signing of letters for the department. In exceptional circumstances where an author is unable to sign a document due to unexpected absence, they may also enable processes for the signing of documents 'for and on behalf of' the absent author.

2.5 Authors

All DMWM authors must have completed an online author training package before access to the system can be enabled.

Authors should ensure that their eSignature details are accurate and alert the Digital System Support Team immediately, if changes are required.

When creating Clinic letters in DMWM Desktop, all authors are required to dictate from a clinic list in DMWM. This enables dictations/documents to be linked to the patients' visit in the system. Authors should familiarise themselves with search by Clinic Code / Responsible Clinician (including consultant users, who can utilise the 'My Appointments' function).

Authors should be aware when saving documents to 'Drafts' as the drafts queue should be reviewed routinely, to ensure no dictation requiring action is inadvertently saved as 'Draft'.

When preparing for planned leave, staff rotation or job move, authors must ensure that all documents in the workflow are expedited and signed off prior to leaving the department/Trust. Saved draft documents should be reviewed and deleted/actioned, as appropriate.

2.6 Transcriptionists

All DMWM transcriptionist users must have completed the RWT transcriptionist training, run by the Digital Training Team. Training can only be booked with Line Manager approval.

Transcriptionists should ensure that their telephone number appears accurately on letters typed, and alert the Digital System Support Team immediately, if this requires updating.

Transcriptionists should have access/or work with colleagues who have access to PAS, to ensure any updates to patient demographics/GP practice can be amended, as required.

Transcriptionists with additional permission to create shared auto-text, should ensure new shared auto-texts are always saved at department level. (See Access and using shared auto-text for further details).

When leaving the Trust or moving departments, transcriptionists must ensure that any documents in their My Documents queue, or assigned to them in the Distribution queue are processed accordingly or rejected back to the main typing or distribution group.

2.7 Document Managers

All services should have at least one document manager user, to monitor the department's document turnaround/workloads. The department document manager has access to view the document manager 'dashboard' (based on permissions), reallocate documents to groups/users and identify documents waiting for signature by author for the department.

This role is normally allocated to Team Leaders/Managers or nominated persons (Note: re-allocating documents to groups, can also be done in Desktop dependent on permissions).

2.8 Document Manager - Read-only users

The Document Read-only user role, is specifically for services/teams that require urgent access to locate documents and view preliminary drafts waiting to be signed. Users include the cancer team and patient tracking teams, who require access to confirm documents have been created (i.e. following appointments etc.) and locate details on planned next steps in patient care.

No clinical decisions can be made from any documents accessed in DMWM, unless completed and available on the patient record i.e. Clinical Web Portal.

Access for document manager or document read-only user must be approved by a line manager with supporting narrative on why such access is required. A user guide will be sent to new users with their user account details.

2.9 Digital System Support Team

The Digital System Support Team will provide DMWM administrator support for:

- All DMWM user queries.

- User account management and creation (upon user's completion of DMWM training)
- Queries related to electronically distributed documents to GP practices.
- Change requests for DMWM departments, document types and groups.
- DMWM Template changing requests (Trust-wide)
- New recipient requests and amendments to recipients.
- Signpost to Digital Helpdesk for support with installation of software and peripheral devices (speech-mics, DPMs, headsets etc.)
- Regular monitor the import and distribution queues under Services in DMWM Web Admin.
- Restore deleted documents as per service request.

The Digital Helpdesk will respond to DMWM calls raised with them, to resolve themselves, via Digital Systems or escalate to Nuance. The Digital Helpdesk can be contacted during normal office hours 08:00-18:00 (excluding Bank Holidays) as follows:

Digital Systems & Applications Services

Internal / Extension: 88888 option 1 option 1. External

/ Direct Dial: 01902 442525 option 1 option 1 Email:

rwh-tr.softwareservices@nhs.net.

3.0 Procedure/Guidelines Detail / Actions 3.1 DMWM for document production

DMWM can be used to create documents using dictation or direct typing by the author. Transcriptionist users can create documents to be allocated to an author, but they cannot dictate or sign.

All documents require an electronic signature from an author and can only be approved for distribution by a transcriptionist.

DMWM retrieves all patient and GP details from PAS, and any changes to patient demographics or GP must be made in PAS.

Document types will automatically load to the patient record on Clinical Web Portal, unless configured to 'bypass' Clinical Web Portal, dependent on

individual service needs. The 'Bypass' configuration also disables the electronic distribution to GPs.

3.2 PAS data passed to DMWM

DMWM receives data from PAS and presents this within the system. This includes:

- All patient demographics
- Patient's GP and GP practice
- Referring GP
- Patient addresses (including Home, Temporary and Correspondence)
- Consultant name, Professional registration number and PAS id code.
- Outpatient Appointments details
- All patient demographics, including name, addresses (Home, Correspondence and Temporary) must be updated directly in PAS, to update DMWM.
- Changes to Consultant names (title, first name, last name) must also be updated in PAS.

3.3 Use of DMWM alongside other Administrative & Clinical Systems

The use of other clinical IT systems will continue as usual and independent of DMWM.

Clinical Web Portal should always be used as the main reference for documents held on the patient record. DMWM should not be used to locate patient correspondence as part of clinical consultation or to review patients past medical history.

3.4 User account creation

All users accounts are created and managed by Digital System Support team.

All users of DMWM Desktop must have completed the required training before a user account can be created. Users accounts will be created within 48 hours of confirmation of training completed.

All Desktop users must have a Windows login and NHS email address before a DMWM can be created.

3.5 Department Permissions

User permissions are enabled at a department level, via a department user role and groups. The department user roles enable users to create and access all documents within the department, and multiple departments can be enabled on one user account.

Transcriptionist users also have permissions to the department's groups (typing and distribution) which enables access to the documents in a department's group only. When the department permission is also enabled, the transcriptionist is able to search and access all the documents in a department, create documents under the department, and access the department's 'Shared Auto-texts'.

Access to departments/groups is enabled, at the request of service managers.

3.6 Letter Templates

Letter templates can be created, edited and deleted by Digital Systems support. Requests for change should be submitted to Digital System support via the Change Request form.

DMWM templates are standardised and in line with Trust and NHS brand guidelines. To support this, templates are locked with the exception of the (non-portal document template) so they cannot be changed by the Services. However, each template includes editable regions that can be typed in.

3.7 Software Installs

The DMWM Desktop application and DMWM Audio Importer software (required for Digital Pocket Memo - DPM docking) can be downloaded by the user via the Portal Manager.

If Portal Manager is inaccessible or install attempts fail, users should contact the Digital Helpdesk for further support.

No additional software is required for Document Manager or Document Read-only users. The DMWM admin dashboard, which is accessible via web browser.

3.8 Logging into DMWM Desktop

DMWM Desktop is Windows enabled, and all authors and transcriptionists will access the system using their own Windows User credentials.

DMWM Web admin users will be allocated a personal DWMM username and password, and access web admin via a web browser.

3.9 Outsourcing documents from DMWM

Documents can be sent for outsourced transcription by a third-party company (DICT8). The outsourced company will transcribe the audio and the transcribed results are sent back in Dragon Medical Workflow Manager and displayed in the body of the letter.

Departments must register for this service by contacting Dict8 and requesting a quote. Once the quote is received, they should raise a purchase order via procurement. This is done by a service manager/budget holder.

Digital System Support should inform the outsourced transcription company (DICT8) of any new departments created in DMWM so that DICT8 can set them up for outsourcing should the department raise a purchase order.

The Department ID and Author license numbers in DMWM must meet the following criteria to be supported by DICT8.

Department ID:

- Can be a maximum length of 16 characters
- A-Z, 0-9 (alphanumeric) a dash (-) and an underscore (_) characters only are accepted

Author License Number

- Can be a maximum length of 16 characters
- A-Z,0-9 (alphanumeric) only is accepted
- It must not include spaces or special characters

Digital Systems Support will enable the Outsourced documents permissions (View, Send, Recall) in DMWM for a user at an appropriate level, as agreed with the service. This is usually a Service Manager/Secretary Manager who

will be responsible for selecting and sending documents for outsourced transcription. The user will require Desktop typist access to perform this task.

When sending documents from DMWM for outsourced transcription, the user must note the following:

- DO NOT send documents that have already been typed by the author – their typing will be lost if outsourced. Only send documents that have a dictation only associated with the document.
- The dictation associated with the document must be at least 5 seconds long.
- If a document with 'Sent' status in the Outsourced list is recalled, the outsourced transcriptionist (at DICT8) will transcribe and return as normal, but the transcribed version of the letter will not be received, and the service may still be charged. If under any circumstance a document that has already been outsourced is recalled, please contact the outsource provider (DICT8).

The secretary (DMWM transcriptionist) is responsible for undertaking a quality check of the returned document (from the shared typing list), before sending for review and signature. In addition to checking the quality of transcription, they should also watch out for the following areas of formatting:

- Bullets/numbering (can amend as required)
- Text alignment (can amend as required)
- Extra paragraph lines appended at the end of the transcription (can delete as required).

3.10 Review documents following transcription

All documents dictated in DMWM must be reviewed by an author before signing. Authors should make amendments to the document content (main body text) when reviewing.

Due to the automated address field on the letter template, when changes to recipient names or addresses are required, a comment must be added to alert the secretary of this to ensure accurate distribution of the document.

3.11 Signing documents in DMWM

To adhere to Health Records policy, all documents created in DMWM must have an author's electronic signature before being distributed from the system. The electronic signature is added following approval by the Author.

DMWM supports an electronic signature on all documents. The eSignature links to the authors DMWM user account (name, title, job role, professional registration number) and Windows credentials (users system login). Each signature is date and time stamped, details of which are also recorded on the document's audit trail.

Multiple signatures on documents can be supported within DMWM, when the signees are existing DMWM authors. However, services should be aware that the turnaround time of documents with multiple signees, may be impacted if the document is edited by each author.

The system will wait for all parties to agree the same version of the letter before proceeding to distribution.

3.12 Signing on behalf of clinical colleagues in an author's absence

In exceptional circumstances, when an author is unavailable to sign, the 'sign on behalf' of function should be used. This enables the electronic signature to accurately reflect that the letter was signed for and on behalf of the dictating author.

The clinical director of the service should determine the appropriateness of who should sign documents in an author's absence, and additional text can be added to the document to support this decision.

3.13 Supervisee signing

Where a consultant routinely signs documents on behalf of their registrars, juniors or nurse teams, the consultant's signature can replace the original dictating author, when the document is sent for review.

This will result in the document moving directly to the consultant for signing, rather than the dictating author. To support this process, 'dictating author' has been included on the main clinic letter and admin letter Trust templates.

If this process is utilised, service managers should ensure that the 'dictating author' field is included on all document types used. Additional text to clarify

a supervisee process for a document can be added by the secretary, if required by the consultant/service.

Supervisee authors can view all their supervisor signed documents, via their own completed queue.

3.14 Document approval and distribution

DMWM requires that all signed documents are approved by a transcriptionist before distribution to recipients and/or the patient record.

3.15 Transcriptionist's amending signed documents

The approval stage allows for minor amendments (i.e. formatting, spelling errors) and recipient additions/removal to be completed by the secretary, before the document is distributed to recipients and/or uploaded to the patient record.

Amendments made by secretaries, must not impact the content of the document. Where a correction may have an implication on the document's content, the secretary must return the document back to the author for review and re-sign.

Authors can request specific amendments (to be made by secretaries before distribution). All requests must be made via 'Comments', at the point of signing the document. This ensures the request is recorded against the document and the secretary is able to acknowledge, before distributing the document.

3.16 Electronic Distribution to GP Practice

All GP recipients in DMWM are enabled for electronic distribution via Docman Connect. When a GP practice is not available on Docman-Connect, the document will be routed to either email or post (via Health Records Team).

When distributing a document to a GP practice only, the document will move immediately to the completed queue. All attachments added to a document in DMWM, will also be delivered to the GP practice. See 'Attaching documents in DMWM'.

The Digital System Support Team will regularly monitor the distribution queue in DMWM, to check for failures, and re-try distribution, if required. Once distributed from DMWM, the distribution to Docman Connect, is monitored by the Software Services Team.

The GP Returned Correspondence Team receive all rejected and queried documents back to the Trust via Docman Connect.

All returned DMWM documents with related queries, will be forwarded back to the originating department's service contact, for review. It is the responsibility of the service to communicate back to the GP practice directly, sending copy documents manually from DMWM, as required.

For queries regarding the distribution of a document to a GP practice, users should contact the Digital Systems Support Team on Ext 88888 or via email to rwhtr.SoftwareServices@nhs.net in the first instance.

3.17 Amendment process (for distributed documents)

Once a document is completed and distributed in DMWM, it cannot be changed. If an amendment to a completed document is required, a new document must be created, which must be signed by the author, approved and distributed to the original recipients.

The amendment document should be created using the 'clone' function and must include the original document's reference and created date. The letter content should clearly highlight the amendment to the recipients, which will also include staff accessing the letter in Clinical Web Portal.

In accordance with Health Records policy the original document must remain on the patient record. Except for when a document has been created/loaded to the wrong patient record, in which case a request to remove the document from the record is acceptable, and should be requested via the Digital Systems Support Team on Ext 88888 or via email to rwh-tr.SoftwareServices@nhs.net

3.18 Deleting documents in DMWM

All DMWM Desktop users can delete documents for the departments/groups they have permissions to. When deleting documents, where a document is linked to a patient (or for Embrace users, when a document includes patient demographics) a 'Reason for deletion' must be recorded, when prompted by the system.

Only Digital Systems Support and DMWM Document Managers have access to view deleted documents.

3.19 Restoring of deleted documents

Deleted documents can be restored back to the workflow upon originating service/user request. All requests should be forwarded to the Digital Systems Support team on Ext 88888 or via email to rwh-tr.SoftwareServices@nhs.net

To restore a deleted document, the user must be able to provide:

- Name of creating/dictating author
- Date created (or nearest estimate)
- Document id (if known)
- Hospital number (when known)

3.20 Unmerge scenario in DMWM

When patient records are merged in PAS, both records are also merged in DMWM with all existing documents (both in the workflow and those completed) are moved to the one patient record. This happens automatically following the merge process in PAS.

When a patient record is unmerged in PAS, the system supplier is required to manually re-allocate the documents, back to the correct patient record.

When an unmerge occurs in PAS, the Digital Systems Support Team require details of all documents for each patient involved in the unmerge. The supplier will then re-allocate the documents between the records to restore.

3.21 Logging out of DMWM Desktop

DMWM Desktop and Web admin accounts only lock when the users Windows screen lock enables.

For this reason, all users must ensure that they have logged out of any DMWM application, when they move away from the computer, and be advised to avoid the use of any DMWM application on computers where shared generic logins are used.

3.3 Monitoring document distribution from DMWM

3.31 Documents failing to distribute from DMWM

The system and application support team will monitor the distribution of documents from DMWM via the Web admin document dashboard and Distribution Queue.

Documents that fail to distribute from DMWM, will be reported to Nuance for completion. If the document cannot be successfully completed in DMWM, the originating secretary will be contacted with further actions, as required.

3.32 DMWM documents failing to distribute to Docman Connect

The Digital Systems team monitor the delivery of DMWM documents to Docman Connect. Digital Systems Support Team will be provided with the document ids of any documents that fail to deliver via EDT and will contact the originating secretary (identified via the document audit trail) to request the document is manually printed, posted and uploaded to CWP, as required.

3.33 Users with Reports Access

The DMWM SQL performance dashboard reports are Trust-wide and high level data on all DMWM departments can be accessed. There is no access to documents via the reports, however some limited patient details (name and hospital number) can be viewed on specific service reports.

For this reason, reports access is limited to managers only or staff nominated by Directorate Managers. All users with access to the Trust-wide reports must have signed and adhere to the GOP06 – IT Cyber Security Policy. Failure to do so may result in disciplinary action.

3.34 Subject Access Requests

Subject Access Requests will be handled by Health Records. Please email:

rwh-tr.healthrecordsaccess@nhs.net

3.35 DMWM Change Requests

All Service requests for change should be forwarded to the Digital Systems Support Team via the Request for Change form.

DMMW service change requests will include:

- New Document type requests
- Changes to existing document types (Name, linked template, default recipient etc.)
- Department name on documents
- New typing/distribution groups

- New department creation

3.36 Business Continuity

In the event of the DMWM system being unavailable, please refer to Appendix 1 – Business Continuity

4.0 Equipment Required

Software installs required for all Desktop Users:

- DMWM Desktop application (latest version)

For DPM users (on the docking computer):

- DMWM Audio Importer (latest version)

Services are responsible for providing the additional hardware below:

- Speech-Mic - recommended 'Philips SPEECHMIKE PRO' (as @ February 2023) for authors only.
- Headphones (USB, Blue-tooth or jack) for transcriptionists.
- Foot pedal - recommended 'VEC infinity' (as @ February 2023) for transcriptionists.

5.0 Training

For secretaries and administrative staff requiring access to DMWM, DMWM Transcriptionist training must be completed (via Line Manager approval and the IT Training Team).

For authors, DMWM Author online training package must be completed. This is accessible via the DMWM pages on the RWT intranet.

Document Managers and Document Read-only user accounts are set up following line manager approval only and issued with supporting users guides.

6.0 Financial Risk Assessment

1	Does the implementation of this document require any additional Capital resources	No
2	Does the implementation of this document require additional revenue resources	No
3	Does the implementation of this document require additional manpower	No
4	Does the implementation of this document release any manpower costs through a change in practice	No
5	Are there additional staff training costs associated with implementing this document which cannot be delivered through current training programs or allocated training times for staff.	No
	Other comments	

7.0 Equality Impact Assessment

An equality analysis has been carried out and it indicates that:

Tick	Options
✓	A. There is no impact in relation to Personal Protected Characteristics as defined by the Equality Act 2010.
	B. There is some likely impact as identified in the equality analysis. Examples of issues identified, and the proposed actions included

8.0 Maintenance

The Digital Systems team will maintain the DMWM SOP and update as necessary.

9.0 Communication and Training

Future DMWM user communications will be via Trust all user bulletins.

10.0 Audit Process

All documents in DMWM include a full audit trail, which is enabled to all users.

The audit trail records the username (full name) and device number (computer number) where the document was accessed. The action of user is recorded, including all views, edits and processes (transcription, review, signing, distribution).

Previous versions of documents can also be restored from the audit trail view, if required.

11.0 References - Legal, professional or national guidelines

- OP07 Health Records Policy
- GOP06 IT Cyber Security Policy
- OP13 Information Governance Policy
- OP41 Induction and Mandatory Training Policy

Part A - Document Control

Procedure/ Guidelines number and version SOP29 Version 2.0	**Title of Procedure/Guidelines** Dragon Medical Workflow Manager SOP	**Status:** Final		**Author:** Lucy Curtis (Business Analyst), Cheryl Duke (Business Analyst), Suki Uppal (IT Project Manager) **For Trust-wide Procedures and Guidelines Chief Officer Sponsor:** Group Chief Medical Officer
Version / Amendment History	Version	Date	Author	Reason
	1.0	June 2023	Business Analyst and IT Project Manager	Implementation of SOP
	2.0	October 2026	Head of Service	Revision following internal system changes.
Intended Recipients: This SOP applies to all staff at The Royal Wolverhampton NHS Trust using Dragon Medical Workflow Manager				
Consultation Group / Role Titles and Date:				

Name and date of group where reviewed	Executive Sponsor Endorsement – October 2026 – Version 2.0
Name and date of final approval committee (if trust-wide document)	Executive Sponsor Endorsement – October 2026 – Version 2.0
Date of Procedure/Guidelines issue	October 2026
Review Date and Frequency (standard review frequency is 3 yearly unless otherwise indicated – see section 3.8.1 of Attachment 1)	October 2029 (every 3 years)

The Royal Wolverhampton NHS Trust

Training and Dissemination: This document will be made available to all staff required to use DMWM via the trust Intranet site.	
To be read in conjunction with:	
Initial Equality Impact Assessment: N/A **Completed Yes / No Full Equality Impact assessment (as required):** N/A **Completed** N/A If you require this document in an alternative format e.g., larger print please contact Policy Management Officer 85887 for Trust-wide documents or your line manager or Divisional Management office for Local documents.	
Contact for Review	Simon Parton
Monitoring arrangements	Dragon Medical Workflow Manager Steering Group
Document summary/key issues covered. This operational procedure explains the process to follow when using Dragon Medical Workflow Manager. The aim of the Dragon Medical Workflow Manager system is to support document production that enables the creation and distribution of patient letters and reports. DMWM is primarily used for production of dictated letters	
Key words for intranet searching purposes	DMWM Dragon Medical Workflow Manager

Event – DMWM unavailable

User Group	Time Scale (Hours) and Action			
	0hr < x > 0.5hr	**0.5hr < x > 3.5hr**	**3.5hr < x > 48hr**	**x > 48hr**
Authors	**Dictation** - Dragon Medical Workflow Manager if open - If not make notes and dictate once available	**Dictation** - Dictate using portable devices if available - If not make notes and dictate once available	**Dictation** - Dictate using portable dictaphones if available to the author - If not make notes and dictate once available	**Dictation** - Dictate using portable dictaphones if available to the author - If not make notes and dictate once available
	Workflow - Clinic lists via PAS	**Workflow** - Clinic lists via PAS	**Workflow** - Clinic lists via PAS	**Workflow** - Clinic lists via PAS
Secretaries	**Transcription** - No action	**Transcription** -No action	**Transcription** - Type into MS Word	**Transcription** - Type into MS Word
	Workflow - No action	**Workflow** - No action	**Workflow** - Manual distribution - POD to CWP	**Workflow** - Manual distribution - POD to CWP
Service Delivery Team	**Escalation** - Nuance (supplier) and Tech Services to diagnose - Senior management	**Escalation** - Service Management - Senior management	**Escalation** **-** Senior management	**Escalation** **-** Senior management
	Communications - End user notification of unavailability	**Communications** - Updated end user notification - Notification to identified staff to initiate BC plan	**Communications** - Updated end user notification - Notification to identified staff to initiate BC plan	**Communications** - Updated end user notification - Notification to identified staff to initiate BC plan
	Follow-On Actions - Route Cause Analysis request/production	**Follow-On Actions** - Importation of letters into DMWM that were created in MS Word	**Follow-On Actions** - Importation of letters into DMWM that were created in MS Word	**Follow-On Actions** - Importation of letters into DMWM that were created in MS Word