sequeli Skills

Structuring the report

Core Competency 5A: Report writing and publication

Hints on report writing

You will need to find your personal way of managing the task of drafting the report.

Using any templates required in guidance, create a skeleton including a chronology section, then add material gradually, creating sub-sections and cross-referencing by page number as you methodically go through reports, policy documents and other material. As an aide memoire this will prove invaluable later. You will need to prune this working document for the final report.

Flesh out the chronology. Avoid paraphrasing and let the contemporaneous records speak for themselves. Original wording can be contrasted with commentary from interviews and reports in your analysis section (known as 'triangulation')

Be careful to avoid premature findings. If discrepancies appear in the chronology, make a note for now. Include your thoughts in an Analysis Section as they occur to you. They can be developed later.

As you draft the report, beware of expressing your opinions. Keep focussed on those who have contributed to the review. Quote from them rather than paraphrase. Produce an evidence-based report.

Wherever possible, include commentary not only from those who provided services but also from those who received services. Their words should be heard throughout the report.

The creation of a skeleton draft may be helpful

Make sure you know who is responsible for deciding upon the content of the final report, even though sections of it may be written by other panel members or experts. Your report will be the human face of the review or investigation and should demonstrate that you have approached the task with compassion, being thorough as to content and meticulous as to procedure. The report should take the reader on a journey which reads logically. Ensure there is a clear thread from events prior to the death, actions taken and decisions made, through to the service and professional practice context, then to any findings or conclusions you reach and recommendations you make.

Accept that catharsis is a legitimate function of the review or investigation. Be aware of the potential power of your report to bring together opposing views and provide some resolution, even reconciliation.

Suggestions for structuring the report

Even if you are following a template or national guidance, there are general approaches which fit with principles of accountability, proportionality, independence, impartiality, openness and transparency and are applicable to all.

Preface	Give the name of the commissioning organisation and the dates on which the independent reviewer, chair, report writer and any other panel members were appointed, with details of their occupation, professional or management status and the agency in which they are employed. If there are any conflicts of interest these should be stated.
Acknowledgements	This should include thanks to the family, professionals, experts and others who contributed their time to the review and those who provided administrative support and transcription services. It is appropriate to mention here that the report is anonymised and explain why (NOTE: Although you should usually completely anonymise contributors to the report (for example Dr A, Nurse B), you will find that when confidential draft versions are circulated, it will be necessary to semi-anonymise (for example Dr BF) so that everyone knows to whom extracts refer).
Contents page	This need not be detailed, but should enable the reader to find his or her way quickly to specific content.
Introduction	Set out the purpose of the review or investigation in terms of improving services and preventing similar deaths or serious injury. Describe the legal requirement as contained in national guidance. Express your condolences to the victim's family, friends and others. Explain that the family have been offered the opportunity to contribute their views. The methodology adopted for the review or investigation should be described, with mention made of the number of agencies involved and interviews carried out over which dates. There may have been internal reviews, in which case reference should be made to them. Any factors causing delay should be included, as should any complicated features such as joint commissioning or difficulty over disclosure of documents. Commissioning decisions as to the scope of the review and any limitations imposed by cost should be mentioned, with the rationale explained in terms of proportionality. Any evidential omissions should be noted. There should be a statement as to the degree of independence of the lead reviewer, chair and other reviewers/panel members and the review/ investigation administrator from professional and management involvement with the case, provider organisations and commissioners.
Summary	Briefly set out the background facts, including the date of the death or serious injury and such details about the individual who died or was harmed as are appropriate and necessary, whether there were any criminal charges and if so their outcome or the current state of the proceedings. If there have been other proceedings such an inquest or care proceedings they should be mentioned here, as should links with parallel reviews. There should be an overview of the agencies involved with the family and services received. Summarise the key issues which arose in the review or investigation, the conclusions reached and the recommendations which flowed from them.
Chronology	This section may also be entitled 'History'. Depending on the complexity and scope of the review, this section can be divided into sub-sections. It should usually be a shortened version of the working chronology which will have been developed to help with analysis.
Specialist sections	Here the report should show it is responding to the particular features of the review. This is where the analysis will take place. Sections might be general or specific, for example 'Risk assessment in Upstone Mental Health NHS Trust in March 2012' or 'Fostering of children with learning disability'.
Views of family, victims and alleged perpetrators	It is important to devote a whole section to this as the family are key to ensuring the review takes a 'wide-angle view'. Explain that any family, friends and even alleged perpetrators may be able to shed light on the system-wide provision of services.
Conclusions	Acknowledge that hindsight can distort analysis but that every effort has been made to avoid this through examination of events as they took place at the time, with contextual factors taken into account.
Recommendations	These are generally best categorised according to the agency which will be responsible for their implementation.
Appendices	Appendices will usually include terms of reference, a glossary of terms used, a list of organisations participating in the review and a list of individuals who have contributed (generally anonymously according to their profession, employment or role). There should be an Appendix containing professional/ employment details of the lead and other reviewers/panel setting out any conflicts of interest.

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