

TRANSFERRING INFORMATION TO THE INVESTIGATORY REPORT

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- Demonstrate the investigator's persistence in searching for information.
- Demonstrate the investigator's curiosity and knowledge of where to look.
- Findings factually and objectively written – including conclusions if allowed.
- Written in a clear and concise manner that a non-clinical board member, staff attorney, or judge can understand.
- Written free from errors and grammatically correct.

OBJECTIVES OF PRESENTING PROFESSIONAL REPORTS



BUILD A SOLID INVESTIGATIVE FILE

- Report: synopsis of everything in your file.
- Organized according to policy, if necessary.
- Report on top; evidence follows.
- Evidence paginated and referenced in report.
- Authentication: foundation for evidence admitted at hearing.
- *Do not* include attorney-client privileged information or emails.



BE PERSISTENT, CURIOUS, KNOWLEDGABLE

- What applies to the investigation applies to your report.
- Be a copious note-taker.
- Make reference to the evidence.
- Did a statement produce a need to follow up?
- Can you refute the allegation?



INVESTIGATORY REPORT: *THE FINAL WORK PRODUCT*



- The backbone of the investigative process; main information source for decision makers.
- Detailed, factual, unbiased picture of the reported incident, investigative steps, and findings.
- Credibility is paramount: could the nurse refute your facts?
- Defense attorneys dislike a good report writer.
- Well written reports that reflect a thorough investigation are less likely to be contested at a hearing.

SO WHO NEEDS THE REPORT?

- Supervisors determine if the investigation is complete.
- Staff attorneys determine if evidence supports a violation.
- Decision makers rely on facts and relevant observations presented in the report to make a decision.
- Prosecutors must be able to proceed to hearing on the report as it accurately represents the investigative file.
- Ideally, a great report with air-tight evidence may finesse a settlement before hearing, without testimony.

HOW ELSE IS IT USED?

- Defense attorneys will exploit holes, inconsistencies, and perception of bias to diminish the investigator's credibility and pick apart the testimony.
- Or, the report may never be introduced as evidence.
- Must withstand motions to suppress evidence or dismiss.
- Potential to be defended in appellate court or state Supreme Court.
- So important! It will refresh the investigator's memory long after writing.



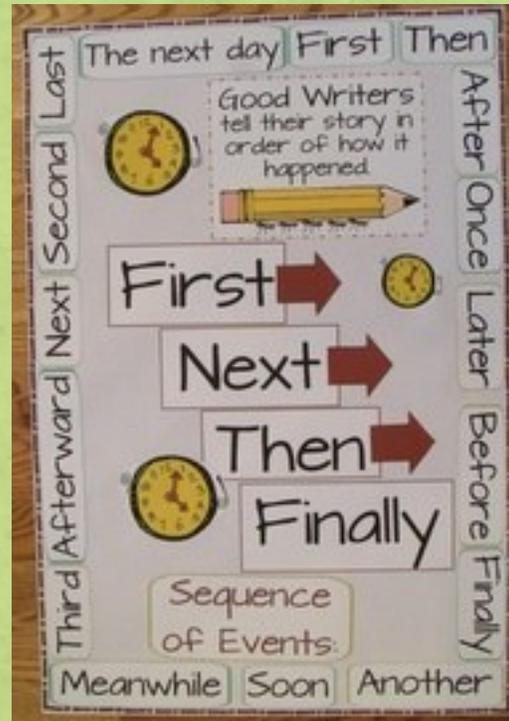
CHARACTERISTICS
OF EFFECTIVE
INVESTIGATIVE
REPORTS

FAIR CORRECT
TIMELY INFORMATIVE
READABLE ACCURATE
PERTINENT
CONCISE CLEAR COMPLETE
UNBIASED FACTUAL
BRIEF CURRENT
FORMAT

REPORT FORMATS

DEFINED IN POLICY?

- Activity log style or attach separately?
- Global narrative, tell-the-story style
- Linear, bulleted format
- Summary of allegations, complaint, evidence



NECESSARY COMPONENTS

- Title page with name, case number, investigator
- All evidence indexed
- Footers or headers?
- Align your report

WRITE FINDINGS FACTUALLY AND OBJECTIVELY

- Organize the facts.
- Begin with synopsis of allegations.
- Tackle writer's block.
- Stick to suitable design that matches evidence.
- Write free from opinions and speculation.
- Do you include a conclusion?
- Capture the elements of the violation and evidence to support the allegations.
- Burden of proof in your jurisdiction.



“Vigorous writing is concise. A sentence should contain no unnecessary words, a paragraph no unnecessary sentences, for the same reason that a drawing should contain no unnecessary lines and a machine no unnecessary parts. This requires not that the writer make all his sentences short, or that he avoid all unnecessary detail and treat his subjects only in outline, but that every word tell.” *Elements of Style*, Strunk and White, 1972

“The best sentence? The shortest.” -Anatole France

LET THE WRITING BEGIN! OMIT NEEDLESS WORDS

TALE OF TWO VOICES

ACTIVE VOICE

- The subject performs the action of the verb.
- Direct, vigorous, strong.
- No guessing who did what to who.
- Shortens each sentence, each paragraph, each report.



PASSIVE VOICE

- *Indirect, limp, weak, sneaky.*
- *Weakness is anonymity.*
- *The 'Nobody voice.'*

THE PLAN FOR SELF PROTECTION

1. As soon as you pick the subject of a sentence, supply it with a verb that makes it do something.
2. If you use a passive verb, try to change it.
3. If you can't change it, try a new sentence.
4. If that doesn't work, try skipping the sentence altogether.
5. As a last resort, use passive voice.

The Lively Art of Writing, Lucile Vaughan Payne, 1965



CHANGING PASSIVE TO ACTIVE

1. We were taught about investigative reports at the conference.
Catherine taught us about investigative reports at the conference.
2. The injured were taken to the hospital by the firefighters.
The cops got there first and transported the injured. (!)
3. The hospital was destroyed by the flood.
The flood destroyed the hospital.
4. The patient was accidentally killed with a medication overdose.
(Who?) Nurse Hot Lips Houlihan accidentally killed the patient with a medication overdose.
5. The nurse who was diverting drugs was caught by staff.
(Who?) Dr Leonard McCoy caught the nurse diverting drugs.

FREE FROM ERRORS & GRAMMATICALLY CORRECT



- Spell check is not your friend.
- *Google* or use medical dictionaries (Mosby or Taber) to get correct medical terminology; use 'add to dictionary' tool for future use.
- Word review tool for readability, corrections, and percent passive voice.
- An apostrophe is a small mark that has two primary uses: to signify possession or omitted letters. Unless it's *its*.
- Use words correctly: *remember homonyms? See handout #8.*
- Punctuation usually goes inside quotation marks.

Ah, synonym rolls...
Just like Grammar used
to make!



WORD REVIEW TOOL

- Home
- Review
- Spelling and Grammar

To activate:

- File
- Options
- Proofing
- Settings
- Passive voice, etc...

The past, the present,
and the future
walked into a bar.
It was tense.

MORE EDITS I COMMONLY SEE

- If you use quotation marks, must be *exact* quote.
- Avoid run-on sentences. Don't join independent clauses by a comma.
- Spell out numbers one through ten; numeric for the rest.
- Be sure to include the year when referring to dates.
- Spell out abbreviations the first time with the abbreviation in parenthesis: Medical Review Officer (MRO).
- Don't use jargon or colloquialisms unless you're quoting someone you interviewed.

<u>lc</u>	lower case letter
<u>LC</u>	Set in <u>LOWER CASE</u>
<u>C</u>	capital letter
<u>Caps</u>	SET IN <u>capitals</u>
<u>c+lc</u>	Set in lower case with <u>INITIAL CAPITALS</u>
<u>sc</u>	SET IN <u>small CAPITALS</u>
<u>c+sc</u>	SET IN <u>SMALL CAPITALS with initial capitals</u>
<u>rom</u>	Set in <u>roman</u> type
<u>ital</u>	Set in <u>italic</u> type
<u>ital caps</u>	SET IN <u>ITALIC capitals</u>
<u>lf</u>	Set in <u>lightface</u> type
<u>bf</u>	Set in <u>boldface</u> type
<u>bf caps</u>	Set in <u>boldface CAPITALS</u>
↑	Superior letter ↓
↓	Inferior figure ↑
Position	
⌋	Move to right
⌈	Move to left
<u>ctr</u>	Center
⌋	Lower letters <u>or</u> words
⌈	Raise letters <u>or</u> words

BE CONSISTENT



- In use of time: 1300hrs or 1 pm
- April 26, 2017 or 04-26-2017 but not April 26th 2017
- Capitalize the same words throughout, or NOT
- Spaces after periods in sentences (old school or modern?)
- Use names *or* identifiers: Kathy Russell *or* Respondent
- Font **size** and **type**
- Verb tense

CAN THESE PARAGRAPHS BE SAVED?

The Respondent is a Washington licensed Registered Nurse, employed at Providence Mount St. Mary in Carnation, Washington where it has been reported that on May 20, 2016 and during care of Ms. Somebody DOB: 4/26/1916, on the evening shift, the Respondent allegedly over medicated this patient by having, "given several dosages of Roxanol over the eight hour shift, instead of hourly". Specifically, 20mg liquid morphine (Roxanol) was reportedly given to the patient several times over an 8 hour period instead of hourly as prescribed. Reportedly, following the Respondent's shift at approximately 11:00 PM the patient was reported to have been hallucinating, confused, took a deep breath and died. The complaint alleges these symptoms are consistent with opioid overdose.

**Editing &
Proofreading
~1 cent per word**

The complaint reports that as a Washington State licensed Registered Nurse and Advance Practice Registered Nurse, Patient Morgan Stanley, was seen by the Respondent on December 3, 2015 at Holy Trinity Hospital while the Respondent did rounds for Dr. Levi Jeans and reportedly stated to the patient and his wife, "I hate sending people home with catheters". The Respondent reportedly discharged the patient, despite his being unable to void completely on his own, after his urinary catheter was removed. The patient reportedly had undergone a TURP on December 2, 2015 at Holy Trinity Hospital.



While working as a Nurse Manager at Rocks Over the Edge, in Selah, Washington the staff were allegedly unsupervised by the Respondent who failed to assure that equipment was working properly. Specifically, a staff nurse was reportedly allowed by the Respondent to have processed orders from 3/30/16, for labs and medications, which resulted in errors found on 4/1/16. The errors reportedly are due to the staff member not knowing how to correctly process the orders. Reportedly, since being informed of this situation, nothing has been done by the Respondent to correct the problem. Reportedly, this continues as an ongoing problem in the facility.

HEADLINES IN THE NEWS

- Typhoon rips through cemetery; hundreds dead
- New study of obesity looks for larger test group
- Man struck by lightning faces battery charge
- Red tape holds up new bridges
- Cold wave linked to temperatures
- Panda mating fails; veterinarian takes over
- Toilet out of order; please use floor below
- Miners refuse to work after death





How can I help you write a better report?

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