

**NHS Foundation Trust** 

Appendix E

#### Guidelines for staff on preparation of statements

#### Guidance notes for witnesses

You may have been asked to attend and give evidence or to provide a written statement of evidence to a Serious Incident Inquiry or Clinical Review panel. These notes have been prepared to explain the purpose of the Panel; how it works and why your help is needed. It also includes specific guidance in providing a written statement.

The guidance may also help to reassure you about the scope and limitations of the process.

The Inquiry / Review will be conducted in compliance with the Trust's Adverse Events (Reporting and Investigating) Policy.

The purpose of the Inquiry is to establish and present the facts relating to an incident and, in the light of its findings, to make recommendations for appropriate action to prevent the recurrence of any similar incident. In addition, it is acknowledged that well investigated facts may assist the Trust in an external inquiry and / or any legal action which might follow. The final report of the Inquiry and witness statements are not legally privileged information and may, therefore, be released to the Coroner, a Plaintiff's legal representative and/or the patient.

It is not the purpose of the Inquiry to consider or recommend disciplinary action against staff but you may choose to seek advice from a professional association or trade union, be represented at the Inquiry, or be accompanied by a work colleague.

Concern is sometimes expressed that the Trust leaves itself and its staff vulnerable to criticism and jeopardises its defence in law by investigating and reporting pre-emptively. The Trust's view, supported by its legal advisers, is that it is far better to investigate potential problems arising from an incident concisely, unambiguously and before external scrutiny rather than leaving the problem to be discovered at a later date.

You will have an opportunity to study the draft final report of the Inquiry / Review and to make comment upon it both as to factual accuracy and content. **It is vital that you raise any concerns that you may have at this time as the report may go on to be used as evidence in Coroner's Inquest or legal proceedings.** Your comments will be appended to the final report sent to the Chief Executive although the Panel may choose, on balance of all the facts, not to amend the report itself as a result of your comments.



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#### **Guidelines for staff on preparation of statements**

#### 1. Introduction

With an increasing number of complex queries and complaints, it is becoming more common for staff to be asked to provide statements as a result of a complaint/claim/untoward incident. When writing a statement, it is important to remember that, although the majority of statements will go no further, your statement may be released to the complainant/family, the Parliamentary and Health Service Ombudsman, the coroner, or used as evidence in defending a legal claim. Please remember, however, that the Trust indemnifies all its staff and will be responsible for any complaint and claim made.

### 2. Personal Information

The statement should include:

- Your full name and address / department
- Reference number of the case
- Your professional qualifications, grade and relevant experience
- Your current post
- The post held at the time of the incident.

## 3. Content

### DOS

- Use chronological order.
- If you wish to support the reasons for a decision made by you please give reference to the protocol, text book or Trust policy etc.
- Stick to the facts. Make clear what part is from memory, what part from the notes and what part from your recollection of your standard practice at that time.
- Identify other staff involved.
- Avoid ambiguous statements.
- Make it as simple as possible, explaining any difficult terms or abbreviations. It may be read by non-medical people.
- Comment on any allegations made concerning your involvement.
- As detailed as possible, giving dates, times, locations and amounts.
- Aim to respond to the specific issues of concern (if responding to a patient complaint).
- Refer to policies/procedures/guidelines in use (if appropriate) and explain the reasons for deviating from these guidelines.
- If writing your statement by hand, please use black ink/biro only and ensure your writing is legible.

## DON'Ts

- Just regurgitate what is in the case notes.
- Speculate on what others were doing or thinking unless you know something as a fact.
- Give opinions on the care given or actions taken by other staff or blame other staff or departments.
- Attempt to write the statement without access to all the medical records.
- Be hostile, rude or unnecessarily defensive to the complainant (remember that complainants may request sight of your statement, which they are entitled to).
- Be subjective (e.g. this is indefensible).
- Relate conversations that you were told by someone else.
- Anticipate evidence of another witness or questions, which may arise.

ADVERSE EVENTS REPORTING POLICY – APPENDIX E AUTHOR: HEAD OF RISK MANAGEMENT



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- Make reference to any solicitor's correspondence or statements of other witnesses.
- Use abbreviations.

### 4. Advice

Please remember that you can seek advice from a number of sources:

- Your department manager/Head of Risk/Head of Customer Care/Head of Litigation
- Your clinical lead/supervisor
- Director of Nursing or other Executive Director
- Your Trade Union or professional organisation.

### 5. Conclusion

Your statement should conclude with the phrase:" The contents of this statement are true to the best of my knowledge and belief". and the date and your signature.

### You should retain a copy of your statement for your information.