**Outstanding Care,
Compassionate People,
Healthier Communities**

**NHS**
**Sherwood Forest Hospitals**
**NHS Foundation Trust**

# Learning From Incidents and Inquests

## Factual Recollection of Events

The reason we recommend you undertake a factual recollection of events following a Patient Safety incident or a death involving the coroner is in recognition of the fact that human memory is fallible. The further time passes from an incident, the accuracy of recall is likely to diminish. The purpose of an early factual recollection is to ensure that you have an accurate account of the incident in question and are able to provide more detailed information at a later date whether as part of an Incident Learning Review or a Coronial/Legal enquiry.

*This factual recollection belongs to you. This is **not** a reflective account. You should use it if invited to a Rapid Review Panel investigating a Patient Safety Incident or to produce a statement if requested by the Coroner. You may also be prepared to allow Incident Review team's access to this document for the period of the review and you should also be aware that your notes may be considered for disclosure if requested by the relevant legal bodies.*

| | |
|---|---|
| **Name:** | |
| **Position:** | |
| **Qualifications:** | |
| **Experience:** | *General  and /or Speciality experience:* |
| **Role in the incident:** | |
| **Date and Time of Incident/Death:** | |
| **Location of incident/death:** | |
| **Factual Account guidance notes:** | ***Your Recollection of events  should:***<br>• *Consist of a complete factual account with sequential dates, times and venues (as precise as possible).* |

- *Be clear and concise.*
- *We recommend your FROE should be completed and stored on a Trust computer*
- *If you keep hand written/electronic notes for personal storage outside of this process you must comply with information governance and anonymise completely.*
- *Refer not only to what is recorded in the notes but also to any other detail that can be recalled.  If you cannot remember, do not make it up.*
- *Explain where the notes have been relied upon it assist your factual record by using the phrase 'According to the notes….'*
- *Be concerned only with what you actually did and why.*
- *Include any mitigating/relevant circumstances if an error/incident has been identified, e.g. "The ward was extremely busy at the time….."*
- *Include any relevant conversations using direct speech and inverted commas, e.g. Dr A said 'I will return in….'*
- *Where possible, type rather than handwrite your  recollection as this may need to be photocopied if disclosed*
- *Describe in as much detail as you can a factual account of the incident*
- *At what point did you recognise that things were not going according to plan*
- *Describe how you recognised that things weren't going to plan? E.g. what did you observe, what did you hear? What was the patient doing?*
- *Where there any actions you performed to recognise and recover the situation?*
- *What happened in the hours/days leading up to the incident? ( e.g. was the patient chronically unwell, were they at high risk of sudden deterioration)*

***Your Factual Recollection  should not:***

- *Be a simple regurgitation of written case notes.- your recollection is to supplement the clinical records.*
- *Comment on areas outside of your responsibility.*
- *Include irrelevant, subjective comments about the patient or colleagues.*
- *Include abbreviations or clinical terminology. It should be written in a way that is understandable to a layperson.*
- *Include statements that cannot be proven, e.g. 'I think he was drunk', without qualification e.g. 'because he smelt strongly of alcohol.'*
- *Contain reflections on what you might or should have done*
- *Allow patient or staff identification if document stored personally*

| Factual Account: | |
|---|---|
| | |

| Statement of Truth: | . *'I believe that the facts stated in this recollection of events are true'.* |
|---|---|
| Signed: | |
| Print: | |
| Date: | |
| | |