

- 1. Relevant / Irrelevant**
- 2. Problem: Yes/No thinking**
- 3. Case notes**

Time:

5 mins to read
40 mins to write

How do I know what is relevant?

Relevant / Irrelevant



What is relevant?

What is needed by the Reader in order to do their job

For example:

A hospital Occupational Therapist writes a letter discharging patient Jack Spencer to the Occupational Therapist at the Care Centre where he will receive rehabilitation

What kind of information is relevant?

patient's children ✗

job (before he retired) ✗

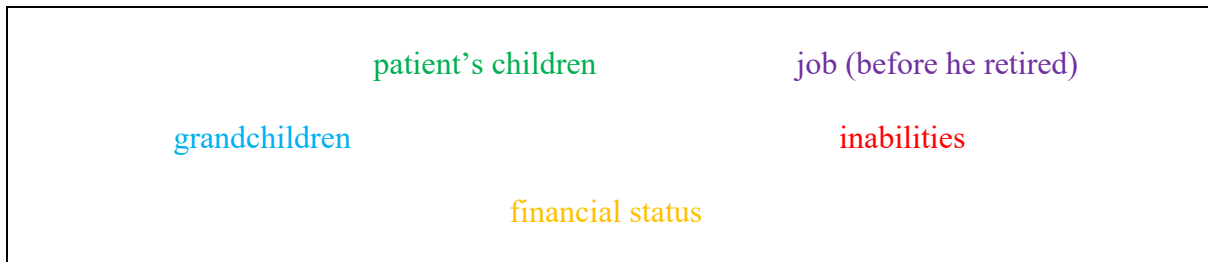
grandchildren ✗

inabilities ✓

financial status ✗

Another example:

The hospital nurse was writing a letter to a home care nursing team to request further care and assistance at home after leaving rehabilitation.



We should not have a binary approach to selecting case notes

Yes/No thinking



We should not think about case note yes or no (a binary way)...

What does OET say?

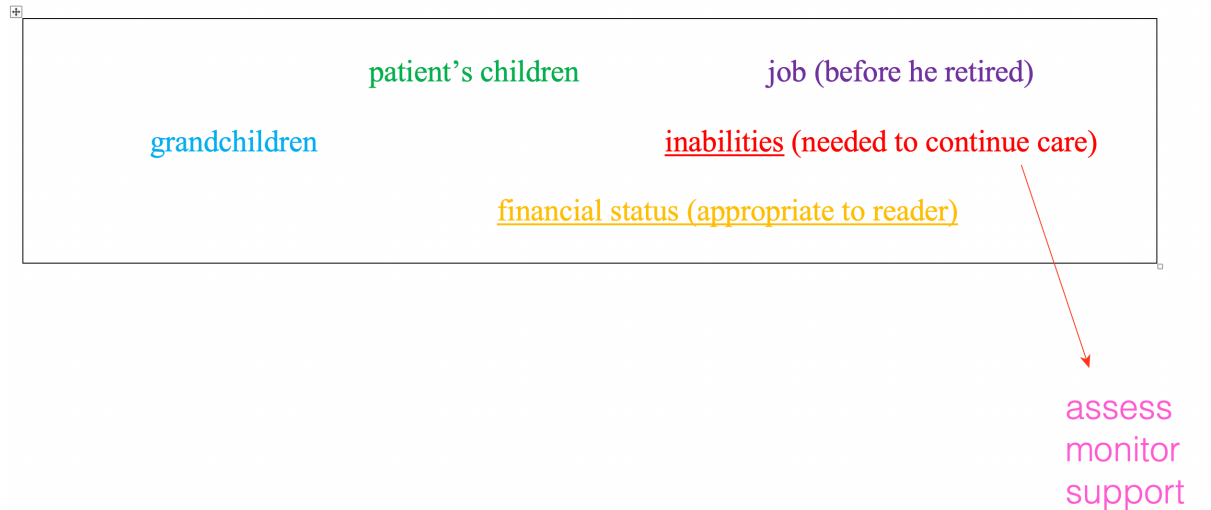
choose the relevant case notes

Band	Content
7	Content is <u>appropriate</u> to intended reader <u>and</u> addresses what is <u>needed</u> to continue care (key information is included; no important details missing); content from case notes is accurately represented

Relevant appropriate to the reader
Relevant - needed to continue care
Irrelevant

Another example:

The hospital nurse was writing a letter to a home care nursing team to request further care and assistance at home after leaving rehabilitation.



What does SET say?

For all relevant information there are 2 options for a nurse/doctor:

- Include the case notes and give detail
- Include the case notes and summarise them

Sometimes things are relevant but the reader actually *doesn't every single detail...*

In June last year, Mr Green had a number of eye issues.

Example with medication:

You are writing a Transfer letter to someone who will continue caring for Mr Dunbar. Mr Dunbar has problems with medication and dietary compliance. The reader will assist with ADLS and his daughter will monitor medication.

Current medication:

Metformin 500mg t.d.s (oral hypoglycaemic)
Ramipril 5mg daily (anti-hypertensive, ACE inhibitor) – for hypertension
Warfarin variable 3-5mg (anti-coagulant)
Sotalol 40mg daily (beta blocker)

← relevant & appropriate summarise

Please note he is taking metformin, ramipril, warfarin, and betablockers.
