Guidelines for writing a final project report
July 2012

FoNS has a strong commitment to disseminating the work of the project teams that we support. Developing and changing practice to improve patient care is complex and we therefore believe it is essential to share the outcomes, learning and experiences of those involved in such work. This contributes to the growing knowledge base about effective ways of leading and facilitating positive patient outcomes and sustainable changes in practice.

An effective means of achieving this is the production of a final report. All completed projects have an individual web page on the FoNS website from which copies of the final reports can be downloaded. Visit www.fons.org/library/projectreports.aspx for examples.

Submission process
FoNS acknowledges that some project leaders/teams may have limited experience of writing project reports or be unused to writing about the processes and outcomes of developing practice. The FoNS Practice Development Facilitators are therefore happy to offer guidance and support in the report writing process as appropriate e.g. help with developing a report outline; providing feedback and critique on draft reports etc. This help will start during the project following the submission of interim reports, and therefore project leaders should expect to dedicate/allocate some specific and continued time for the writing process as part of their project.

Once a draft final report has been submitted to FoNS, it will be reviewed. At this point, as with the submission of articles to journals, it is highly likely that some revisions, additions etc. will be suggested. These will be based upon the desire to produce reports that provide reliable and credible information upon which future development work can be based. We are aiming to achieve a standard that would be accepted for journal publication.

Who is the reader?
Project reports are accessed by nurses and healthcare practitioners from all over the UK and beyond via the FoNS website. You should therefore assume that the reader is someone who does not know anything about your project but who may be interested in replicating your work in their own healthcare setting. Your report should therefore include all the details about the 'what?', 'why?' and 'how?' that would enable someone to do this.

Writing in the third person
We would strongly advise that reports are written in the third person. This provides a greater sense of objectivity and distance as the focus is on what is being said rather than who is saying it. To write in the third person you write as if you are an outsider reporting on the aims, methods and outcomes of your project, rather than writing as though they are happening to you. First person

pronouns such as "I" and "We" are replaced with third person pronouns such as "the project leader/team", "he/she, "it" and "they".

Your report may however also include some reflections and it is of course appropriate if these sections are written in the first person.

FoNS Dissemination Series: Improvement Insights
In most cases, final reports will be edited by FoNS to create a one page summary which will be published as part of the FoNS Dissemination Series: Improvement Insights. This editing is undertaken by FoNS to ensure that the summaries fit with the house style of this series; however, the summary will be sent to project leaders for approval before publication. This summary will include the web site address of the web page where your full final report can be accessed.

This series has an ISSN number and is therefore searchable on most databases. It is also sent to all nursing and healthcare libraries UK wide and is available to download, free of charge from the FoNS website (see http://www.fons.org/library/dissemination-series.aspx, volumes 6 onwards).

Project Report Template
A report template is provided on the following pages which includes suggested headings and brief content guidance. Further support can be provided by the FoNS Practice Development Facilitators.

Project Report Template

Project Title

Keywords:
Identify approximately 5 key words/phrases that will be used to facilitate searching

Duration of project:
Month Year – Month Year
Date report submitted for publication: Month Year

Project leader or team:
Name(s) and job title (s)

Contact details:
Email address of main contact

Summary of project
Approximately 200 words. We strongly recommend that you write this when the report is finished. It should briefly outline what you did, why you did it, key outcomes and recommendations.

Background or Introduction
This section should briefly outline the reason for doing the project and provide an overview of key supporting evidence i.e. identification of local need, research evidence, policy drivers etc. Relevant contextual information can also be included e.g. information about patients/service users, staff, healthcare setting etc.

Body of report
The headings included in the body of the report will vary for each project. However, it is likely that these will include:
- the aims and objectives of the project
- the methods and approaches that were used to meet the aims
- the outcomes of the project
- discussion

Aim(s) (and objectives) of the project
Clearly identify the aim(s) (and objectives if you have them) of the project

Aim – **what** you are trying to achieve

Objectives – **how** you will achieve the aim

Your outcomes and discussion sections should refer back to the aims and objectives to identify if the aims have been met and if the objectives were effective in enabling you to meet these.

Methods and approaches

Brief overview

It is helpful, if possible to start this section with a few sentences to briefly overview the approaches that you used. For example:

A number of approaches were used to facilitate the changes in practice. These included:
- Observation of practice
- Patient interviews
- Staff focus groups …

You can then use these bullet points as sub-headings in the report

'What?', 'why?' and 'how?'

This section should include the 'what?', 'why?' and 'how?' of your project to enable others to learn from your experience and build on your work. So for example, if your project involved patient interviews (the **what?**), include a brief explanation about **why** you decided to use this approach; then provide clear details about **how** the interviews were undertaken. This should include details about:
- The interview schedule – how it was developed and by who
- How patients were selected
- Who conducted the interviews
- Ethical issues e.g. informed consent, data collection and storage, confidentiality, use of data
- How many interviews were conducted
- How data was recorded
- How the data was analysed and used to inform the project

Similarly, if your project involved staff questionnaires (**what?**), include a brief explanation about **why** you decided to use this approach; then provide clear details about **how** the questionnaires were distributed, collected and analysed. This should include details about:
- How the questionnaire was selected or developed
- How the questionnaire was distributed and returned – including how many and to who
- Ethical issues e.g. data collection and storage, anonymity/confidentiality, use of data
- How the data was analysed and used to inform the project

You may have facilitated workshops for staff; again the report should identify the purpose of the workshops (**what?**); **why** you decided that this was an appropriate approach for your project; and **how** they were facilitated including:
- How the workshop programme was developed
- How staff were invited and/or selected to attend and how many attended
- An overview of the content
- Evaluation feedback from participants including how this was collected

Outcomes/Findings/Evaluation

This section should report on the outcomes or findings from the project. Ideally, this information should enable the reader to determine if the aims of the project have been achieved.

The outcomes of your project should be identified and then illustrated with supportive evidence. This evidence should be tangible rather than purely anecdotal or opinion based e.g. 'care has improved', 'patients are more satisfied'.

For example, a questionnaire was used to evaluate the impact of a staff workshop on dignity in care in a number of ways:
- Quantitative evidence - 92% of respondents reported that the care they gave had changed …
- Qualitative evidence – 'When a patient is upset, angry and aggressive, I now try and see it from their point of view…'

For example, mealtime practice was observed and the following changes in practice (as compared with practice before the project commenced) were noted:
- Drug round no longer takes place at the same time as meals
- All nurses are involved in mealtimes
- Meal presentation given high priority
- Handovers observed to be more patient centred that task focused

Discussion
Some discussion, critique, reflection on your project should be included in your report. A separate section could be created for this or it could be incorporated into the relevant sections of the report. Readers will be interested to learn from the experiences of the project teams and therefore the following questions may be useful to consider:
- Was the project successful in meeting its aims?
- What went well – and why?
- What didn't go well – and why?
- What would you do differently – and why?

Conclusion
A summary of the previous major headings (with no new material added) and conclusions drawn or recommendations for the future.

Recommendations
Some projects will have identified a number of recommendations and these should be included here.

References
All references should be provided in full.

In the text, the following format should be used:
… there is no evidence to suggest that the standard of care has improved (Breslin, 2009).

Shaw (2009) argues that much of the success of practice development …

Reason and Bradbury (2001, p1) suggest that action research: 'seeks to bring …'
N.B. page numbers for direct quotes must be included.

In the reference list, the following format should be used:

Atree, M. (2001) Patients and relatives experiences of "good and not so good" quality care. *Journal of Advanced Nursing*. Vol. 33. No. 4. pp 456-466.

Lipley, N. (2006) Government plans 'dignity nurses' for older patients. Retrieved from: www.nursing-standard.co.uk/nursingmanagement/news2.asp. (Last accessed 1st September 2009).

Manley, K. (2004) Transformational culture: a culture of effectiveness. Chp 4 *in* McCormack, B., Manley, K. and Garbett, R. (Eds) (2004) *Practice Development in Nursing.* Oxford: Blackwell Publishing.

Scott, T., Mannion, R., Davies, H. and Marshall, M. (2003) *Healthcare Performance and Organisational Culture*. Oxford: Radcliffe Medical Press Ltd.

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