

# CHAPTER 1: OVERVIEW

## 1.1. INTRODUCTION

**GUIDE relates to Workers Compensation Matter SAMPLE related to Litigated Public Liability Matter (adaptable to most injury matters).**

The feedback from insurance companies and solicitors often indicated they are unhappy with some investigators' reports for reasons such as they are not factual, they are presumptuous, they are prejudicial.

Keeping in mind that an investigation report may be subpoenaed or tendered in evidence in court proceedings, it is crucial that a factual investigation report remains factual and does not prejudice either the investigator or his client.

**Many investigators struggle with factual reports for two reasons:**

- They do not have a sufficient command of the English language
- They do not recognize the issues relevant to liability

This report writing guide is just that, a guide. It cannot adequately cover all the scenarios and solve all report writing problems. Complete and comprehensive e-Book or interactive tutorials on factual and fraud investigations are available from [www.investigateway.com](http://www.investigateway.com)

Explanatory notes are **red colour**. This guide assumes the investigator has a basic grasp of insurance and workers' compensation or other injury matters.

## 1.2. SAMPLE REPORT 1

**PLEASE NOTE:**

***This Example is an authentic investigation report with private information obscured and it includes explanatory comments (in **red colour**).***

*For the use of client legal advisers - Privileged*

*This sentence is intended to ensure the report remains inaccessible to the plaintiff or claimant in legal proceedings, however, is generally considered not to be guaranteed protection because a report can be called in evidence.*

28 February, 2000

Mr Brian Smith  
XYZ Insurance Australia Limited  
DX 1000  
SYDNEY

*A factual report is always written to the company and never to the individual, no matter that an individual issued the instruction to investigate. Persons must not be addressed directly in the report, rather if reference is needed to an instructing officer, it should always be in the form of "Your Mr Brian Smith informed us..."*

Dear Sir/Madam

### REPORT

**Re:** YOUR REF: MDA  
AAA PTY LIMITED  
ats DANIEL JONES  
OUR REF: JNS:OOO/000000

We refer to your instructions of 15 September, 2000 to carry out a factual investigation in the matter of the above mentioned claim. We have completed our investigation and now submit our report for your perusal.

*All reports are written in the plural, hence there must never be any terminology that implies the investigator personally is speaking to an individual at the client company.*

*Whether we address the worker as Claimant, Applicant or Plaintiff in the report depends on the kind of instructions we received.*

*Usually we refer to the injured person as the claimant, rarely the applicant. Even if an Application for Determination has been issued, it's the claimant. If the instructions are from a solicitor and it's a common law action, then it's always the Plaintiff. The policy holder, thus the insured, generally is referred to as the Insured. It is rarely the Defendant unless the instructions are somehow holier than thou.*

*It is important to consistently refer to the claimant as the claimant, or insured as the insured and not to vary between Joe Jones Pty Limited and the Insured or Mr George Bent and the claimant. It's always the claimant, or always the insured, or whatever title we gave them.*

*We maintain a consistent and true terminology pattern on how we report "information", "evidence", "comments", "statements". Thus:*