

RCSLT Bulletin

Guidelines for feature articles

The Bulletin editorial team welcomes submissions for feature articles which showcase members' valuable experience and expertise in areas of professional practice.

Feature articles should fall into one of the following article types:

- [Service evaluation](#)
- [Audit](#)
- [Quality improvement](#)
- [Research](#)
- [Case study](#)
- [Clinical idea](#)

These guidelines will help you to structure your article according to the article type and ensure it has the details we need to be able to consider it for inclusion in Bulletin.

When writing the article make sure:

- The article is between 500-2,000 words (If you anticipate your feature article being over the above word count, please [get in touch](#) before writing.)
- The article is interesting and relevant to readers (Remember members of the RCSLT are varied – including retired members, students, and overseas members).
- You write in a narrative style (not in the style of a journal article).
- The article is grounded in the latest evidence.
- You provide in-text references for any facts you may present and a reference list using Harvard style. You may also include links to any resources you have used, developed, or would recommend.
- You carefully consider and acknowledge the limits of your knowledge/learning.
- You have specified which article types your piece fits into and considered the specific guidelines for this. Our reviewers will use the same guidelines when reviewing your work.

Service evaluation

These articles present a service evaluation which looks at how well your service is achieving its aims.

Section	Recommendation
Introduction	<p>The rationale for doing the service evaluation, i.e. why it is of interest to the profession is clearly explained.</p> <p>A short paragraph to provide a broad overview of the evidence base is provided. Where possible, this should draw from recent reviews of evidence in the area.</p>
Aims and objectives	<p>The aim and objectives are clearly stated.</p> <ul style="list-style-type: none"> • Aim - Defines the overall purpose of the project. • Objectives - Defines the individual steps that were taken to achieve the aim. <p>Service evaluations usually ask questions such as: 'What standard does this service achieve?'</p>
Methods	<p>The data collected is clearly described including what data was collected, how it was collected and how it was analysed. Details on the following are considered:</p> <ul style="list-style-type: none"> • Population • Retrospective/prospective data collection • How patients were identified • Sample size • Time period • Data collection method • Who was responsible for data collection? • Method of data input and analysis
Results	<p>The results for each objective are presented.</p> <p>The number of service-users/patients participating are documented. 1 x graph/table may be used to present key data if it adds value.</p> <p>Any incomplete data is explained.</p>
Discussion	<p>The findings are interpreted and discussed in relevance to the wider literature.</p> <p>How the evaluation has contributed to understanding the problem posed in the introduction is explained.</p> <p>Strengths and limitations are included.</p>
Conclusion	<p>The conclusions supported by the data are described.</p> <p>The comments or recommendations from the evaluation or the next steps are explained.</p> <p>Suggestions for improvement that are realistic and achievable are described.</p>

Remember:

- Claims must be supported by the evidence and proportionate to a service-evaluation design. Never make claims that are not supported by the evidence.
 - Objective, factual statements must be used e.g. a comment such as 'clearly what is happening here is...' should be avoided.
 - Any links for key resources are added.
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Audit

These articles showcase an audit and present how you have evaluated your service in line with an identified standard, for example a NICE guideline.

Section	Recommendation
Introduction	<p>The rationale for doing the audit, i.e. why it is of interest to the profession is clearly explained.</p> <p>A short paragraph to provide a broad overview of the evidence base is provided. Where possible, this should draw from recent reviews of evidence in the area.</p>
Aims and objectives	<p>The aim and objectives are clearly stated.</p> <ul style="list-style-type: none"> • Aim - Defines the overall purpose of the project. • Objectives - Defines the individual steps that were taken to achieve the aim.
Standards	<p>The standards used are clearly detailed.</p> <p>Where possible, published national, regional, or local standards are used and the sources of evidence, criteria, target specified.</p>
Methods	<p>The data collected is clearly described including what data was collected, how it was collected and how it was analysed. Details on the following are considered:</p> <ul style="list-style-type: none"> • Population • Retrospective/prospective data collection • How patients were identified • Sample size • Time period • Data collection method • Who was responsible for data collection? • Method of data input and analysis
Results	<p>The results for each standard are presented to establish which standards were met, and which were not.</p> <p>The number of service-users/patients participating are documented.</p> <p>1 x graph/table may be used to present key data if it adds value.</p> <p>Any incomplete data is explained.</p>
Discussion	<p>The findings are interpreted and discussed in relevance to the wider literature.</p> <p>Strengths and limitations are included.</p>
Conclusion	<p>The conclusions supported by the data are described.</p> <p>The recommendations from the audit or the next steps or are explained. This may include any plans for reaudit. Suggestions for improvement that are realistic and achievable are described.</p>

Remember:

- Claims must be supported by the evidence and proportionate to an audit design. Never make claims that are not supported by the evidence.
 - Objective, factual statements must be used e.g. a comment such as 'clearly what is happening here is...' should be avoided.
 - Any links for key resources are added.
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Quality improvement

Adapted from Standards for Quality Improvement Reporting Excellence¹

These articles present a project to address a block in the system using improvement methodology.

Section	Recommendation
Introduction	<p>The rationale for doing the project is clearly explained, i.e. why it is of interest to the profession.</p> <p>A short paragraph to provide a broad overview of the evidence base is provided. Where possible, this should draw from recent reviews of evidence in the area.</p>
Study question	<p>The primary improvement-related question and any secondary questions are stated. Typically, a quality improvement project asks: 'how could this service improve?'.</p>
Methods	<p>The data collected is clearly described including what data was collected, how it was collected and how it was analysed. This may include information on:</p> <ul style="list-style-type: none"> • Ethical considerations. • The setting or elements of the local care environment that influenced change. • The intervention, its components and how the intervention was implemented. • The plan for assessing how well the intervention was implemented and the study design. • The methods of evaluation, including the instruments and processes used to assess the effectiveness of the intervention and the methods used to ensure data quality. • The qualitative or quantitative methods used to draw inferences from the data.
Results	<p>The findings for the study are presented. This may include information on:</p> <ul style="list-style-type: none"> • The nature of the setting and improvement intervention. • The relevant elements of the setting that provided context for the intervention. • The course of the intervention (i.e. sequence of steps, events, phases, types and number of participants at key points, a timeline diagram could be used here). • Degree of success in implementing the intervention components. • How and why the initial plan evolved, and important

	<p>lessons learnt.</p> <ul style="list-style-type: none"> • Data on changes observed in the care delivery process. • Data on changes in processes of care and patient outcomes associated with the intervention. • Any unexpected results, benefits, harms, problems, missing data.
Discussion	<p>The findings are interpreted and discussed in relevance to the wider literature. This includes explaining how the project has contributed to understanding the problem posed in the introduction.</p> <p>Strengths and limitations are described.</p>
Conclusion	<p>The conclusions supported by the data are described. Practical usefulness of the intervention and future implications are considered. Suggestions for improvement are realistic and achievable.</p> <p>Remember:</p> <ul style="list-style-type: none"> • Claims must be supported by the evidence and proportionate to an improvement design. Never make claims that are not supported by the evidence. • Objective, factual statements must be used e.g. a comment such as ‘clearly what is happening here is...’ should be avoided. • Add links for key resources.
Funding	<p>Funding sources, if any, and the role of the funding organisation in design, implementation, interpretation, and publication of study are described.</p>

¹<http://www.squire-statement.org/index.cfm?fuseaction=Page.ViewPage&PageID=471>

Research

These articles present the methods and findings of clinical research. This could be a small piece of practice-based research; a large, international, multi-centre randomised controlled trial; a survey; implementation research; or any other kind of design.

Section	Recommendation
Introduction	<p>The rationale for doing the research is clearly explained i.e. why it is of interest to the profession.</p> <p>A short paragraph to provide a broad overview of the evidence base is provided. Where possible (and if appropriate), this should draw from recent reviews of evidence in the area.</p>
Aims and objectives	<p>The aim and objectives are clearly stated.</p> <ul style="list-style-type: none"> • Aim - defines the overall purpose of the project. • Objectives - defines the individual steps that were taken to achieve the aim.
Methods	<p>The data collected is clearly described including what data was collected, how it was collected and how it was analysed. This may include information on:</p> <ul style="list-style-type: none"> • Population • Retrospective/prospective data collection • How patients were identified • Sample size • Time period • Data collection method • Who was responsible for data collection? • Method of data input and analysis • Ethical approvals gained or, if not, explain why.
Results	<p>The findings for the study are presented.</p> <p>The number of service-users/patients participating are documented. 1 x graph/table may be used to present key data if it adds value. Any incomplete data is explained.</p>
Discussion	<p>The findings are interpreted and discussed in relevance to the wider literature.</p> <p>How the research has contributed to understanding the problem posed in the introduction is explained.</p> <p>Strengths and limitations to the research are included.</p>
Conclusion	<p>The conclusions supported by the data are described. The recommendations or the next steps from the project are explained.</p> <p>Remember:</p> <ul style="list-style-type: none"> • Claims must be supported by the evidence and proportionate to the research design. Never make claims that are not

supported by the evidence.

- Objective, factual statements must be used e.g. a comment such as 'clearly what is happening here is...' should be avoided.
 - Any links for key resources are added.
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Case study

These articles showcase a case study of a client you have been working with. Case studies help to bridge the gap between an explanation of how something is done in theory and being able to replicate it in practice.

Section	Recommendation
Introduction	<p>The rationale for presenting the case is clearly explained, i.e. why it is of interest to the profession.</p> <p>A short paragraph to provide a broad overview of the evidence base is provided. Where possible, this should draw from recent reviews of evidence in the area.</p> <p>How the case contributes to the existing literature is clearly described.</p>
The case description / summary	<p>Key details are clearly described in chronological order such as:</p> <ul style="list-style-type: none"> • Demographic information, ensuring client confidentiality • Differential diagnosis • Relevant history • Assessment results • Clinical presentation • Treatments and follow up provided
Discussion	<p>Key findings of the case are summarised and interpreted.</p> <p>Clinically useful conclusions are drawn, and reference is made to the current evidence base.</p> <p>Experiences learnt from case and how things can be managed differently in future cases are explained.</p>

Clinical idea

These articles share an interesting idea which has been developed through your clinical practice. It may be an idea you've tried out, or an idea you're still tinkering with.

Section	Recommendation
Introduction	<p>The rationale for presenting the clinical idea is clearly explained, i.e. the clinical background and/or why it is of interest to the profession.</p> <p>A short paragraph to provide a broad overview of the evidence base is provided. Where possible, this should draw from any evidence in the area to suggest why the clinical idea might be valuable.</p>
The clinical idea	<p>An overview of the clinical idea is presented.</p> <p>This may include information on:</p> <ul style="list-style-type: none"> • The context, e.g. population, the setting or environment • How the idea was developed and who was involved
Discussion	<p>Ideas are summarised and interpreted.</p> <p>Specific acknowledge that the idea is in the early stages of clinical development will likely be required assuming it has yet been carefully/fully evaluated.</p> <p>Experiences learnt and recommendations are made for 'what's next'. This will likely include the need for careful evaluation.</p>