

Review of six Commonwealth Government forms

**Report prepared for the
Productivity Commission**

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Summary

I have assessed the following six Commonwealth Government forms against my understanding of best practice for production of forms designed and used for information collection.

Form 1: Centrelink's new, eight-page *Disability Support Pension Treating Doctor's Report*

Form 2: Centrelink's new, one-page *Medical Certificate for Newstart, Youth Allowance and Sickness Allowance*

Form 3: Centrelink's 12-page *Carer Allowance Treating Doctor's Report for a child younger than 16*

Form 4: The Department of Health and Ageing's 20-page *Practice Incentives Program and General Practice Immunisation Incentives application form*

Form 5: The Department of Veterans' Affairs' six-page *Health Care Plans: A Guide for Local Medical Officers*

Form 6: The Department of Veterans' Affairs' one-page *Foot Condition: Medical Impairment Assessment*

In terms of their design and layout, navigability and readability, I believe that the forms fall short of best practice in a number of important ways, as follows.

1. The forms are not standardised in terms of their overall look, font sizes and styles, and textual content and consistency.
 - (a) The text should be set across two columns whenever possible so that readers' eyes don't tire as they're reading across wide measures of text.
 - (b) Many of the fonts are too small, and the text is therefore unnecessarily difficult to read. All fonts should be enlarged at least one point size.
 - (c) For the longer forms, a table of contents and the relevant page numbers should be placed directly under the masthead (logo and main title).
2. The forms are not written in plain, simple and grammatical English. The poor grammar and punctuation are a distraction and often an affliction for the reader, who shouldn't have to re-read a sentence in order to understand its key point or instruction.
 - (a) The passive voice should be changed to the active voice to avoid official, passive, unwelcoming language, corporate-speak and bureaucratise. For example, the introductory sentence 'This report may be used to:', followed by a bulleted list, should be changed to 'Use this report to:'.
 - (b) Reification – personification of concepts and inanimate objects – should be avoided in the interests of clarity and immediacy of meaning. For example, The sentence 'The *Freedom of Information Act 1982* allows for the disclosure of medical or psychiatric information directly to the individual concerned,' should be rewritten as 'Under the *Freedom of*

Information Act 1982, the doctor may disclose medical or psychiatric information directly to the patient in question.’

- (c) Nominalisation – use of too many nouns – should be avoided in favour of using as many verbs as possible (the ‘action’, ‘doing’, ‘being’ and ‘having’ words) to make it clear exactly what the doctor is expected to do when completing the forms. Without verbs consistently written in the correct tense, the action is muddled and the message often incomprehensible.
- (d) An editorial stylesheet (a word list) should be established and maintained to introduce consistency of spellings, styles and editorial conventions both within each form and between all the forms. The stylesheet should include frequently occurring and unusual spellings, italicisations, boldings, words that have an one or more initial capital letters, abbreviations, contractions, acronyms, and the various preferred punctuation marks in example sentences.
- (e) To encourage doctors to complete the forms, second-person pronouns (‘you’) should be used, and instructions should whenever possible commence with the word ‘Please’.
- (f) The same term should be used consistently throughout: the words ‘doctor’, ‘treating doctor’, ‘practitioner’, ‘medical practitioner’, and ‘provider’ are used interchangeably throughout and are distracting for the reader. Also, the word ‘form’ or ‘report’ should be used consistently in the longer forms.
- (g) Minimal, not maximal, capitalisation should be used for all the headings in all the forms. Minimal capitalisation is also known as sentence case, and maximal capitalisation is also known as title case. Minimal capitalisation is more reader friendly. If the form has too many initial capital letters in the headings as well as the special terms (such as ‘Local Medical Officer’), the reader is distracted from the main point of the form: completing it quickly and efficiently.

If these weaknesses were corrected, I believe that doctors would be better able to complete the forms quickly, accurately and efficiently, and the people who processed the forms would be better able to collate and incorporate the responses for whatever specific purpose the form was designed.

Following is an itemised assessment of each form, with reference to design and layout, navigability, and readability.

FORM 1

Centrelink: new *Disability Support Pension Treating Doctor's Report* (8 pages)

Design and layout

1. Reset page 1 over two columns, not one column with side heads as at present, and add a table of contents over the two-column measure.
2. In the left-hand column, under the table of contents, insert the section headed 'Instructions for the patient'. In the right-hand column, insert the section headed 'Instructions for the doctor'.
3. Set all the text in each column flush left (aligned full out on the left margin within that column measure').
4. Place the side head 'Authority to release information' above its text: the four bulleted points commencing 'I authorise Centrelink . . .', and place the 'Patient's signature' panel above the blank panel, minus the arrowhead but including a concluding colon ('Patient's signature:').
5. Deepen the stipple for the reversed-out panels headed 'Instructions for the patient' and 'Instructions for the doctor'.
6. Retain the *sans serif* ('minus tails') fonts for all the headings: *sans serif* is more effective when used for display copy and headings only.
7. Use an uncondensed *serif* ('tails') face for the body text: *serif* faces are easier to read, especially when used for 'blocky', dense text, because the tails on the letters aid readability.
8. Enlarge the body text from 9 point to at least 10 point to aid readability.
9. Use a bolder (darker) font for the body text to aid readability.

Navigability

1. Add a table of contents, headed 'Contents', under the reversed-out Centrelink logo and title panel. Set out the table of contents as follows.

	Page
Instructions for the patient	1
Instructions for the doctor	1
Part A: Clinical details	2
Condition 1	
Diagnosis	2
Clinical features	2
Treatment	3
Impact on the patient's ability to function	3
Condition 2	
Diagnosis	4
Clinical features	4
Treatment	4
Impact on the patient's ability to function	5

Part B: Additional information	6
Part C: Certification	7
Notes	8

2. Change the wording of the headings to reflect the wording in the table of contents.

Readability

1. Call the document a medical report, not a form, consistently throughout, including in the reversed-out heading panel on page 1.
3. Rewrite the whole report in plain, simple and grammatical English.
4. Change the passive voice to active voice. For example, on page 1 under ‘Completing this report’ in ‘Instructions for the doctor’, change ‘In this report, you will be asked to provide clinical details of the patient’s medical conditions,’ to ‘In this medical report, we ask you to provide clinical details of the patient’s medical conditions.’
5. Use a spaced en rule (shorter dash), not an unspaced em rule (longer dash), for textual dashes, consistently.
6. On page 3, for example, delete ‘etc.’ at the end of ‘D: Current treatment’: there’s no need to write ‘etc.’ or ‘and so on’ if you’ve already written ‘such as’ or ‘for example’.
7. Consistently hyphenate compound adjectives, such as ‘nursing home’ in ‘nursing-home level of care’ and ‘work capacity’ in ‘work-capacity assessors’, to show the link between the compounded words placed before a noun such as ‘level’ and ‘assessors’.
8. For countable nouns such as ‘months’, use the adjective ‘fewer’, not ‘less’, e.g. ‘fewer than 3 months’ (page 3).
9. Write ‘3–24 months’, ‘3 to 24 months’ or ‘Between 3 and 24 months’ (page 3).
10. Make ‘the patient’ the subject of the sentence whenever possible. For example, change ‘If there are no other conditions which have a significant impact on ability to function, go to PART B on page 6,’ as ‘If the patient has no other conditions that have a significant impact on his or her ability to function, please go to PART B on page 6.’ (page 3)
11. Use ‘that’, not ‘which’, consistently, for defining clauses such as ‘that have a significant impact’.
12. Use the precise preposition and adjective. For example, change ‘in the last 12 months’ to ‘during the past 12 months’ (page 6); change ‘Your personal information is protected by law,’ to ‘Your personal information is protected under the law.’ (page 8); and change ‘. . . please identify it at Part C . . .’ to ‘. . . please identify it in Part C . . .’ (page 8).
13. Use a solidus, not parentheses, for singular and/or plural nouns, e.g. ‘medical condition/s’, not ‘medical condition(s)’.
14. Eliminate all other parentheses, which are very distracting for the reader. Weave the parenthesised words into the text instead.
15. Eliminate initial capital letters whenever possible, e.g. ‘Centrelink Psychologists, Disability Officers and Customer Service Officers’ should be ‘Centrelink

- psychologists, disability officers and customer-service officers'. Use initial capitals only when the person's title is linked to his or her name.
16. Use the plain-English choice for all words. For example, change 'medical officer' to 'doctor' and 'assistance'/'assist' to 'help'.
 17. Change the expression 'BLOCK LETTERS' to 'CAPITAL LETTERS'.
 18. Change the heading 'Information for patients about privacy' to 'Privacy information for patients' (page 8).
 19. Remove unwanted extra character spaces between words, e.g. in line 4 on page 8: 'suitability of services': a proofreader's task.
 20. Remove reification – personification of concepts and inanimate objects – throughout. For example, change 'The *Freedom of Information Act 1982* allows for the disclosure of medical or psychiatric information directly to the individual concerned,' to 'Under the *Freedom of Information Act 1982*, you can be asked to disclose medical or psychiatric information about the patient directly to him or her.'

FORM 2

Centrelink: new *Medical Certificate for Newstart, Youth Allowance and Sickness Allowance* (1 page)

Design and layout

1. Retain the sans *serif* face for all the headings.
2. Change the *sans serif* body-text font to a *serif* one.
3. Enlarge the font size of the boxed text headed 'Your personal information' and 'Authority to release medical information' from 8 point to 9 point.

Navigability

1. Create a table for the section commencing 'Diagnosis' and ending 'Prognosis'. Enlarge the headings 'Diagnosis' and 'Prognosis' from 10 point to 12 point to make them more prominent. In the table, label and bold the three column heads 'Condition 1', 'Condition 2' and 'Condition 3' (not '1', '2' and '3' as at present). Retain the three-column layout for the table but design the sections within the table so they look more related to each other.
2. Deepen the stipple in the box headed 'Certification by the medical practitioner' to distinguish the boxed text from the rest of the text on the certificate.
3. Change the heading in the certification box to 'Certification by the doctor', and use the noun 'doctor' rather than 'medical practitioner' consistently (see 'Doctor's signature' at the bottom of the box).
4. In the 'certification' box, add the line 'Please use CAPITAL LETTERS.'

Readability

1. Remove all parentheses and dashes, e.g. in 'Diagnosis – Please list . . .' and 'Prognosis – Symptoms are . . .'
2. Change 'Surname' to 'Family name'.
3. In the new table, change 'Is this condition (Tick one for each condition)' to 'This condition is (tick one box for each condition):'. Change 'Temporary', 'Permanent' and 'Exacerbation of existing condition' to 'temporary.', 'permanent.' and 'an exacerbation of an existing condition.'
4. For singular nouns such as 'the patient', use the singular pronouns 'his or her', not the plural pronoun 'their'.
5. Change 'your patient' to 'the patient' consistently.
6. Under 'Treatment', change 'treatment regime' to 'treatment regimen'.
7. Use the word 'Phone', not 'Telephone'.
8. In the certification box, change '(Area code)' to 'Area code: ()'.
(Note: The original text has a blank space in parentheses, which has been preserved in the HTML output.)
9. Rewrite the whole certificate in plain, simple and grammatical English.

FORM 3

Centrelink: Carer Allowance Treating Doctor's Report for a child younger than 16 (12 pages)

Design and layout

1. Enlarge all the body text and side heads at least one point size, from 9 point to at least 10 point.
2. Retain the *sans serif* faces for all headings, including side heads, but use a *serif* face for the body text.
3. Space the text on pages 2 and 3 so the layout is more 'airy' and the text less bunched up.
4. Make the bold italicised headings bold only, on pages 2 and 3: italic text is harder to read, especially in a *sans serif* face such as the one used in the existing report.

Navigability

1. Add a table of contents under the Centrelink and 'Carer Allowance' reversed-out title panel. Set out the table of contents, headed 'Contents', as follows.

	Page
To be completed by the child's parent or guardian	1
For the treating doctor	
Notes about this medical report (TDR)	2
Notes about 'Part C: Functional assessment'	3
Part A: Diagnosis	4–5
Part B: Details for the Health Care Card	6
Part C: Functional assessment	7–11
Part D: Contact details for the treating doctor	12

2. On page 1, insert a reversed-out panel, using 20 point text as for the other major headings, to read 'To be completed by the child's parent or guardian'.
3. Add the word 'continued' to the 'Part A: Diagnosis' reversed-out head on page 5 and to the reversed-out head 'Part C: Functional assessment' on pages 8, 9, 10 and 11.

Readability

1. Change the sentence to the left of the 'TDR' masthead to 'If you are claiming Carer Allowance, please fill in page 1 only. Then give this medical report to your child's treating doctor to complete.'
2. Change the report's title to 'Carer Allowance: Treating Doctor's Report for a Child Younger than 16'.
3. Change 'name(s)' to 'name/s'.
4. Change 'Parent/guardian's details' to 'Parent's or guardian's details'.
5. Change 'Refer to **page 4–5** of the notes booklet for information,' to 'For information, please see **pages 4 and 5** of the notes booklet.'

6. Change passive voice to active voice throughout. For example, change 'Authorisation for release of medical details by the child's legal guardian' to 'Authorisation for the child's legal guardian to release the child's medical details'.
7. Delete the full stop after any headings, e.g. 'Health Care Card and fortnightly payment.' (page 2)
8. Change the prepositions 'with' and 'without' to 'who has' and 'who does not have', respectively; e.g. '. . . a child of the same age who does not have a disability'.
9. Hyphenate compound adjectives placed before a noun, , e.g. 'special-care needs'.
10. Add a full stop to complete-sentence instructions such as 'Tick only the boxes that apply', and change the wording to 'Tick the applicable boxes only.'

FORM 4

Department of Health and Ageing: *Practice Incentives Program and General Practice Immunisation Incentives application form* (20 pages)

Design and layout

1. Retain the *sans serif* heads, but don't use a condensed *serif* body-text font: remove the condensing and use normal letter kerning.
2. The unjustified (ragged-right) setting looks good, but it's not necessary to use 'soft hyphenation' on turnaround lines, such as on page 2, under 'Accreditation details', where three turnaround lines have a soft hyphen in them. Either take the whole word over to the next line or take it back to the previous line.
3. Stipple the checklist box on page 2; use a sans serif face for the checklist questions to distinguish them from the other text on the page; and make the tick boxes white, not stippled.
4. Eliminate all *italics* and replace them with a roman (plain, medium) font, from page 3 to page 19.
5. In all the boxes in which text is to be handwritten, enlarge the text and column heads from 6 point to 9 point.
6. Improve the spacing on all the 'part' pages to reduce the amount of blank space.
7. Enlarge the size of the font for the text in boxes such as on page 3 from 6 point to at least 8 point.
8. Replace all dotted lines with hairline (0.5 point) rules, e.g. on page 5.

Navigability

1. Add a table of contents, headed 'Contents', at the top of page 2. Word the table as follows.

	Page
To the applicant	2
Part A: Practice details	
<i>All applicants, please complete this part.</i>	3
Part B: Practice profile	
<i>All applicants, please complete this part.</i>	4–5
Part C: Practice arrangements	
<i>PIP applicants, please complete this part.</i>	6–7
Part D: Practice-ownership declaration	
<i>All applicants, please complete this part.</i>	8–9
Part E: Practitioner-details summary	
<i>All applicants, please complete this part, and include details for all medical practitioners working at the practice.</i>	10
Part F: Individual-practitioner details	

*All applicants, please complete this part:
one page for each medical practitioner working
at the practice* 11–18

Part G: Additional- or new-practitioner details
*If this part is applicable, please complete it
and mail or fax it.* 19–20

2. On page 2, add the heading ‘To the applicant’ and place it within the black panel at the top of the page, in 34 point, as for the part titles on the other pages.
3. Create a stippled box around the text headed ‘Instructions to applicants’ but reduce the heading to be ‘Instructions’ only.
4. Add the word ‘continued’ to the reversed-out part headings on pages 5, 7, 9 and 20.
5. In parts B to G, for all bolded words that are questions rather than statements, add the word ‘Question’ before the identifying question number and place the heading, such as ‘Question 3 (a),’, above its text.
- 6.

Readability

1. Use the word ‘practitioner’ or ‘doctor’, not ‘provider’ and/or ‘practitioner’, consistently throughout.
2. Rewrite the whole application form in plain, simple and grammatical English.
3. Change passive voice to active voice throughout.
4. Use the abbreviation ‘e.g.’ (‘example given’), not ‘eg.’.
5. Write ‘practice/s’, not ‘practice(s)’.
6. Use the words ‘CAPITAL LETTERS’, not ‘BLOCK LETTERS’.
7. Use ‘that’ for defining clauses.
8. Avoid using the words ‘above’ and ‘below’ as cross-references. For example, change ‘Please return the form to the address above,’ to ‘Please mail the completed application to the abovementioned address,’ and change ‘Contact details of the two of these organisations are provided below,’ to ‘The contact details for these two organisations are as follows.’ (page 2)
9. Replace ‘STD’ with ‘Area code’ (page 3).
10. Use single, not double, quotation marks, consistently throughout.
11. Change ‘. . . the enclosed “*Notification of ABN and RCTI Agreement*” form’ to ‘. . . the enclosed ‘Notification of ABN and RCTI Agreement’ form’.
12. Use minimal capitalisation, not a mixture of minimal and maximal capitalisation, consistently, throughout, e.g. ‘Accreditation Details’ on page 2 should be ‘Accreditation details’.
13. Use the precise preposition, e.g. ‘about’, not ‘regarding’.
14. Add a question mark to questions placed next to ‘tick’ boxes, e.g. on page 5: ‘Is the additional practice accredited in its own right’.
15. Lower case all unnecessary initial capital letters such as in ‘Branch Practice’ (page 5).
16. Remove all parentheses: let the text within them stand independently.

FORM 5

Department of Veterans' Affairs: *Health Care Plans: A Guide for Local Medical Officers* (6 pages)

Design

1. Use a *sans serif face* for all the headings.
2. Retain the *serif face* for the body text.
3. Avoid setting the text on page 1 across one column: it's too hard to read, and the reader's eye gets tired.

Navigability

1. Add a table of contents above the first heading, and label it 'Contents'. Set the table out as follows.

	Page
Which veterans will benefit from having a Health Care Plan?	1
The patient's health status: self-rated health and clinical diagnoses	2–3
Medication management	4
Health screening	4
Psychological and social assessment	4
Specialist and other reviews and referrals	5
Future co-ordination and liaison	5
Local Medical Officer details	6
The patient's signature and declaration	6

2. Retain the heading 'Which veterans will benefit from having a Health Care Plan' on page 1 but place it and its text in a box under the table of contents.
3. Under this first section of text, insert the four sections of text on page 2 that commencing with the heading 'Individualised management and support' and ending with the words '. . . found in 'Notes for Local Medical Officers'.
4. Move all the encapsulated sections of text on pages 1 and 2 to be with their relevant sections within the rest of the form, as follows.
5. Move the section headed 'The patient's health status: self-rated health and clinical diagnoses' on page 1 to page 2, and reword it to avoid repetition with the enclosed text at present at the top of page 3 under the heading 'Health Care Plan'. Let the text now flow on to the next page (page 3).
6. Move the section headed 'Medication management' on page 1 to the top of page 4.
7. Move the section headed 'Health screening' on page 1 to the top of page 4.
8. Move the section headed 'Psychological and social assessment' on page 2 to page 4.
9. Move the section headed 'Specialist and other reviews and referrals' on page 2 to page 5.
10. Move the section headed 'Future co-ordination and liaison' on page 2 to page 5.

11. On page 5 (formerly page 4), give the section headed 'Future co-ordination and liaison' half a page of space for the doctor to use, and retain the box headed 'State frequency of LMO review over the next 12 months'.
12. From page 6 (formerly page 4), move 'Local Medical Officer Details' and 'Patient signature and declaration' to the new page 6.

Readability

1. On pages 1 and 2, the bulleted lists should be converted to sentences and have a half line of space between them.
2. Use minimal, not maximal, capitalisation in headings consistently throughout.
3. Rewrite the whole form in plain, simple and grammatical English.
4. Establish an editorial stylesheet (a word list) for this and all the other forms.

FORM 6

Department of Veterans' Affairs: *Foot Condition: Medical Impairment Assessment* (1 page)

Design and layout

1. The overall look is tired and oldfashioned, and should be revamped and made visually consistent with other government forms.
2. Enlarge the logo and department title at the top left and the form title at the top right, and reverse out both in a panel.
3. Use a *serif* face throughout.
4. Remove all parentheses from around the italicised instructions.
5. Make the instructions roman, not *italic*, to aid readability.
6. Enlarge the font size for the italicised instructions from 7 point to 9 point.
7. Lower all the relevant lines of words, such as 'Distance walked without needing to rest', to be on the same baseline as the hairline rules.
8. Leave two more points of space above the hairline rules used for answering the questions.

Navigability

1. The one-page text and instructions are easily navigable.

Readability

1. Commence all the instructions with a capital letter and conclude them with a full stop, e.g. 'List the symptoms, and describe their severity, frequency and duration.'
2. Change 'if' to 'whether', e.g. 'Indicate whether the pain is intermittent . . .'
3. Use 'that' for defining clauses or eliminate it altogether if it's unnecessary.
4. Change Question 6 to 'Does [] have any restriction when he or she is going up or down stairs?'
5. Change the instruction in Question 6 to 'Indicate whether [] relies on a hand rail, a walking stick or another type of support, and list the restricting symptoms.'
6. Place semi-colons, not commas, after the main list items in Questions 8 and 9.
7. Change '10.' to 'If you answered NO to Question 9, please list . . .'
8. Add a hairline (0.5 point) rule to the three boxes at the bottom of the form.
9. Change 'eg.' to 'e.g.' ('example given').
10. Extend the hairline rules in Question 6 to be closer to the text that precedes them.