

1. Complaint Investigation Checklist

1. Please respond to each of the following:

	Yes	No	Not Applicable
Receipt of complaint acknowledged within 5 working days	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Client advised re 5 day timeframe to deny access to confidential files by authorised personnel	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Contact with complainant to clarify scope of complaint?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Additional information requested from client?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Meeting with client offered?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Invitation for meeting declined?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Meeting(s) held with other relevant parties, including staff?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Was the complaint excluded under Part 9 but within scope of HSE complaint procedures?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Report completed within timeframe (30 working days of acknowledgment)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Update provided every 20 working days after initial 30 day timeframe?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Did the complaint contain a clinical judgment component?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
If yes, was it referred to the General Manager	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Did the complaint contain any issues that do not fall within the remit of the procedure manual (p.41-42)?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
If yes, was it referred to the appropriate person/body?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Are all case notes, reports, letters etc. included in the file?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

2. Does the Report include the following:

	Yes	No
Summary of complaint	<input type="checkbox"/>	<input type="checkbox"/>
Summary of Investigation process undertaken	<input type="checkbox"/>	<input type="checkbox"/>
Findings	<input type="checkbox"/>	<input type="checkbox"/>
Recommendations	<input type="checkbox"/>	<input type="checkbox"/>
Advise client re right to request a review of their complaint	<input type="checkbox"/>	<input type="checkbox"/>
Timeframe for review request	<input type="checkbox"/>	<input type="checkbox"/>
Right of Review to the Office of the Ombudsman/Ombudsman for Children and provision of relevant contact details	<input type="checkbox"/>	<input type="checkbox"/>

3. Did you use the current template/letters and template report issued by the Consumer Affairs Office (Sept. 2009) when responding?

☐ Yes

☐ No

4. Has a copy of the Report been sent to each of the following?

	Yes	No
Complainant	<input type="checkbox"/>	<input type="checkbox"/>
Relevant Manager(s)	<input type="checkbox"/>	<input type="checkbox"/>
Members of staff complained against	<input type="checkbox"/>	<input type="checkbox"/>

5. Any additional comments?

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6. Keep copy on file. Ensure that the file is complete, signed and dated.

Complaints Officer's Signature, Case Reference Number and Date:

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