

**HSE Your Service Your Say   
Anonymised Learning Summary Casebook**

*Complaints Manager*

**Complaint Investigation  Review  Compliment**

**Completed: Q1  Q2  Q3  Q4**

**Location: Health Region** Click or tap here to enter text. **IHA** Click or tap here to enter text.

**Community Service – please specify (Older Persons, etc.)** Click or tap here to enter text.

**Hospital – please specify** Click or tap here to enter text.

**National Service - please specify** Click or tap here to enter text.

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| --- | --- | --- |
| **Feedback Category** Choose an item. | **Sub Category**  Choose an item. | **Issue** Type Issue Here. |
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**HCAT Classification: Severity** Click or tap here to enter text.  **Harm** Click or tap here to enter text.

**Complaint Status: Upheld  Partially Upheld  Not Upheld**

|  |
| --- |
| **Background to Complaint / Compliment (delete as appropriate)** |
| Click or tap here to enter text. |
| **Investigation / Nature of Positive Feedback (delete as appropriate)** |
| Click or tap here to enter text. |
| **Outcome and Learning** |
| Click or tap here to enter text. |

**Anonymised Learning Summary Casebook to be circulated as appropriate.**

**Issue to** [**nationalcglt@hse.ie**](mailto:nationalcglt@hse.ie) **as appropriate for inclusion in the National Feedback Learning Casebook.**