


<b>NF07* Form</b>	Health Information and Quality Authority <b>Allegation of misconduct<sup>†</sup> by the registered provider or by a member of staff</b>	 <b>Health Information and Quality Authority</b> <small>An tÚdarás Um Fhaisnéis agus Cáilíocht Sláinte</small>
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Section 1. Centre details			For official use
Centre name			<input type="checkbox"/>
Centre ID (OSV)			<input type="checkbox"/>
Unit or ward name (if applicable)			<input type="checkbox"/>

Section 2. Allegation of misconduct				For official use
<b>Date</b> of alleged misconduct		<b>Date allegation reported</b>		<input type="checkbox"/>
Who is the person that <b>reported</b> the allegation of misconduct?	Resident		<input type="checkbox"/>	<input type="checkbox"/>
	Nursing staff		<input type="checkbox"/>	
	Care staff		<input type="checkbox"/>	
	Administrative staff		<input type="checkbox"/>	
	Visiting consultant		<input type="checkbox"/>	
	Relative		<input type="checkbox"/>	
	Friend		<input type="checkbox"/>	
	Volunteer		<input type="checkbox"/>	
	Other		<input type="checkbox"/>	

\* Please complete this form with HIQA's statutory notification guidance. You can download the guidance at [www.hiqa.ie](http://www.hiqa.ie)

<sup>†</sup> As defined in HIQA's statutory notification guidance.

Section 2. Allegation of misconduct			For official use
If you have ticked <b>other</b> , please provide details:			<input type="checkbox"/>
<b>Who</b> has the allegation of misconduct been made against?	Registered provider	<input type="checkbox"/>	<input type="checkbox"/>
	Staff member or staff members	<input type="checkbox"/>	
If a staff member or staff members, what is their <b>role or roles</b> at the designated centre?			<input type="checkbox"/>
Is there an <b>An Garda Síochána vetting</b> report on file for the staff member or staff members?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	<input type="checkbox"/>
Is the staff member or staff members currently <b>reporting for duty</b> ?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	<input type="checkbox"/>

Section 3. Details of the alleged misconduct		For official use
Please <b>provide details</b> of the alleged misconduct:		<input type="checkbox"/>

Section 3. Details of the alleged misconduct	For official use
<p>What <b>immediate</b> actions have you have taken?</p>	<input type="checkbox"/>
<p>Please provide an outline of the <b>internal investigation</b> and actions taken with the person or persons the allegation has been made against:</p>	<input type="checkbox"/>
<p>Please state the measures you have taken to ensure that <b>all residents<sup>‡</sup> are safe?</b></p>	<input type="checkbox"/>

<sup>‡</sup> Please note you are required to notify HIQA of any alleged abuse of a resident via an NF06 or any serious injury to a resident via an NF03.

**Section 3. Details of the alleged misconduct**

For  
official  
use

Please include any **additional information** applicable to this notification:

**Section 4. Follow up documentation**

**If requested** please submit a copy of the outcome of the investigation with the status of actions or recommendations to the Office of the Chief Inspector within **20 days** of the request

**Section 5. Declaration**For  
official  
use

I, the undersigned, declare that the information I have provided in this notification form is true to the best of my knowledge and belief.

Name (print)		<input type="checkbox"/>
Position	Person in charge <input type="checkbox"/>	<input type="checkbox"/>
	Authorised signatory for and on behalf of the registered provider <input type="checkbox"/>	
Signed		<input type="checkbox"/>
Date		<input type="checkbox"/>
Contact number (during office hours)		<input type="checkbox"/>

This form should be either:

- **emailed** to: [notify@hiqa.ie](mailto:notify@hiqa.ie) or,
- **posted** to: Notifications Team, Regulatory Support Services, Health Information and Quality Authority, Dublin Regional Office, George's Court, George's Lane, Smithfield, Dublin 7, D07 E98Y.

Telephone no: (01) 814 7400

Email: [notify@hiqa.ie](mailto:notify@hiqa.ie)