NF06

Notification Form

Allegation of Abuse¹ of a Recipient





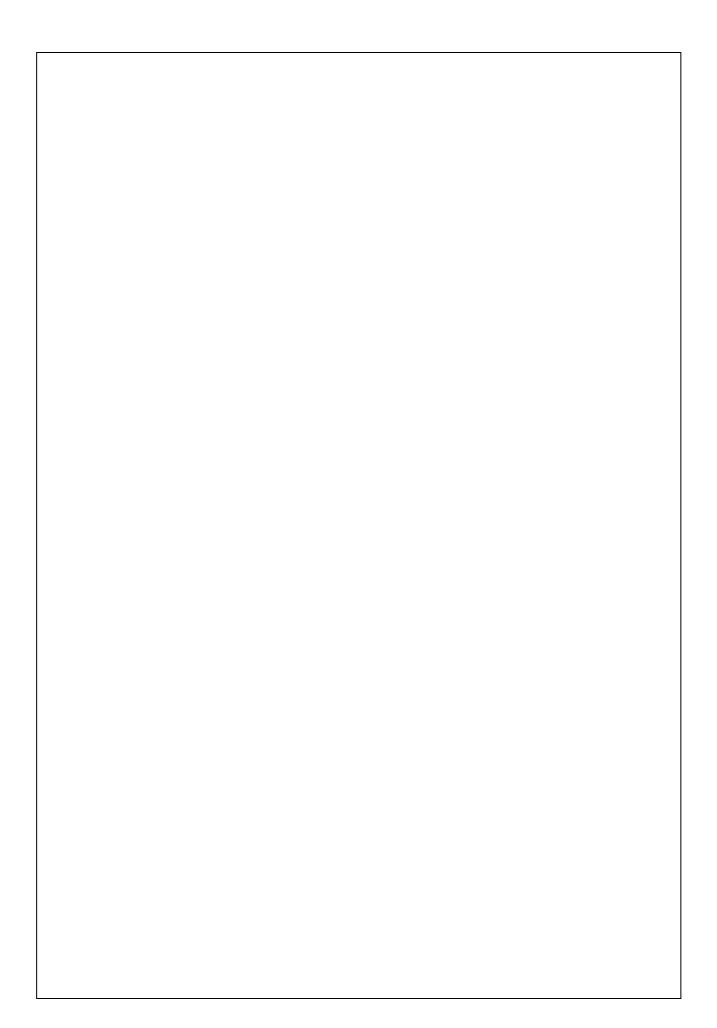
Section 1. IPAS centre details				
Centre name				
Centre ID (OSV)				
Section 2. Recipient's d	etails			
Recipient's unique identifier				
Is this recipient under the age of 18?		Yes 🗆 No 🗆		
Describe the current status of the recipient , such as physical or mental state:				
Has an NF06 form been suppost 12 months?	ubmitted for this person in the	Yes 🗌 No 🔲		
If yes, how many NF06 forms have been previously				
submitted?				

¹ Abuse means mistreatment of any kind and includes the physical, financial or material, psychological, sexual or discriminatory mistreatment or neglect of a recipient

Section 3. Details of the allegation					
Date of alleged abuse Time of alleged abuse		Retrospective allegation of abuse ² ?	Yes 🗆 No 🗆		
Who reported the alleged abuse? Please select one of the following options: Staff Recipient Relative Visitor Other					
If you have ticked other , please provide details:					
Date allegation was reported		Did the alleged abuse take place in the centre	Yes No No		
Role of the person to allegation was reported					
		Physical			
		Sexual (including sexual exploitation)			
		Psychological			
What type of abuse has been alleged? Please tick the relevant box or boxes		Financial or material			
		Neglect			
		An act of omission			
		Discriminatory			
		Institutional violence			
		Violation of personal ir	ntegrity		
		Domestic Violence			
		Other			
If you have ticked oth	1er , please provide de	etails:			

 $^{^{\}rm 2}$ abuse which occurred, or is alleged by adults to have occurred in the past when they were children

	Staff member				
Who is the person alleged to have	Relative				
abused the recipient?	Friend				
Please tick the relevant box or boxes	Volunteer				
	Unknown				
	Other				
If you have ticked other , please provide	details:				
If you have identified a staff member , i	s the employee				
currently reporting for duty?	Yes No C				
Please provide details of alleged abuse and immediate actions taken including:					
1. actions taken with the recipient .					
1. actions taken with the recipient .		J			
 actions taken with the recipient. actions taken with the person the 					



Section 4. Additional information
Please state the measures you have taken to ensure that all recipients are safe:
Please state if you have notified the recipient's family of the alleged abuse (where appropriate) and provide details:
Please state if you have notified An Garda Síochána of the alleged abuse:

Please state if in the case of a recipient under the age of 18 years , you have notified		
the Child and Family Agency (Tusla) of the alleged abuse:		
Section 5. Declaration		
I, the undersigned, declare that the information I have provided in this notification		
form is true to the best of my knowledge and belief.		

Please return the completed, signed form by email to ipasmonitoring@hiqa.ie
Please ensure NF06 is clearly stated in the subject bar of the email

Type your name in the signature field

Name

Job title

Signature

Contact number

(during office hours)

Date