



**Health
Information
and Quality
Authority**

An tÚdarás Um Fhaisnéis
agus Cáilíocht Sláinte



**PROTECTED
DISCLOSURES ACT
2014, as amended
2025 Annual Report**

About the Health Information and Quality Authority

The Health Information and Quality Authority (HIQA) is an independent statutory body established to promote safety and quality in the provision of health and social care services for the benefit of the health and welfare of the public.

Reporting to the Minister for Health and engaging with relevant government Ministers and departments, HIQA has responsibility for the following:

- **Setting standards for health and social care services** — Developing person-centred standards and guidance, based on evidence and international best practice, for health and social care services in Ireland.
- **Regulating social care services** — The Chief Inspector of Social Services within HIQA is responsible for registering and inspecting residential services for older people and people with a disability, and children’s special care units.
- **Regulating health services** — Regulating medical exposure to ionising radiation.
- **Monitoring services** — Monitoring the safety and quality of permanent international protection accommodation service centres, health services and children’s social services against the national standards. Where necessary, HIQA investigates serious concerns about the health and welfare of people who use health services and children’s social services.
- **Health technology assessment** — Evaluating the clinical and cost effectiveness of health programmes, policies, medicines, medical equipment, diagnostic and surgical techniques, health promotion and protection activities, and providing advice to enable the best use of resources and the best outcomes for people who use our health service.
- **Health information** — Advising on the efficient and secure collection and sharing of health information, setting standards, evaluating information resources and publishing information on the delivery and performance of Ireland’s health and social care services.
- **National Care Experience Programme** — Carrying out national service-user experience surveys across a range of health and social care services, with the Department of Health and the HSE.

Visit www.hiqa.ie for more information.

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Introduction

Under section 22(5) of the Protected Disclosures Act 2014, as amended, (the 2014 Act) each public body is required to publish an annual report outlining the number of protected disclosures received in the previous year and the action taken (if any). This report must not result in the identification of persons making a protected disclosure. This report covers the period of 1 January to 31 December 2025.

You can learn more about protected disclosures on our website: [Protected Disclosures | HIQA](#).

Internal channel

In line with the 2014 Act, the Health Information and Quality Authority (HIQA) has in place an internal reporting channel and procedure for workers to make a protected disclosure. No protected disclosures were received internally in 2025 (see schedule 1).

External channel

In accordance with Section 7(2) of the 2014 Act the Chief Executive Officer (CEO) of HIQA is prescribed to receive disclosures of relevant wrongdoings relating to all matters relating to the standards of safety and care of persons receiving health and social care services in the public and voluntary healthcare sectors, and social care services in the case of the private healthcare sector, as provided for by the Health Act 2007. Any such disclosures made can only be dealt with in a way that is consistent with, and appropriate to the role, statutory rights and duties of HIQA.

In line with the requirements of the Act, HIQA has an external reporting channel and procedure for workers to make a report of a relevant wrongdoing to the CEO of HIQA, as a prescribed person. For further information on making a protected disclosure to HIQA's CEO as a prescribed person, please refer to our [Protected Disclosures to HIQA \(external channel and procedure\) – Procedure](#) on our website.

Breakdown of the protected disclosures received in 2025

In 2025, 419 new reports were assessed under the 2014 Act. Forty (40) were deemed not to be a protected disclosure and were either closed or managed under a different relevant procedure.

One further report was closed as the report was repetitive and contained no meaningful new information.

Thirty-nine (39)¹ were transmitted to another prescribed person or the Office of the Protected Disclosures Commissioner in line with section 7A (1)(b)(vi)(1)(A) and (B) of the Act, as the report contained matters that were not within the scope of HIQA.

In the case of a further 333, this information was logged and risk-assessed and in each case used to inform the most appropriate intervention by HIQA as a regulator of health and social care services and in compliance with its duties under the 2014 Act. Forty-nine (49) were closed because the report was minor and 284 warranted further follow-up, of which 35 remain under regulatory review at year end.

The remaining six remained under assessment at year end. Further information in relation to the activities of the external channel are available in schedule 2.

Reports of wrongdoing received in 2025	Number
Reports made directly to HIQA	406
Reports transmitted to HIQA from another prescribed person or the Protected Disclosures Commissioner	16
Investigations opened by HIQA following reports received in 2025	285
Investigations closed by HIQA following reports received in 2025	253
Investigations closed by HIQA in 2025 following reports received prior to 2025	23

As reported in 2024, one disclosure received in 2023 remained under regulatory review at the end of 2024 and this report was closed in 2025. Of the 383 new disclosures received in 2024, seven awaited completion of assessment at year end and a further 23 remained under regulatory review. Of the 30 that remained open at the end of 2024, one remains under regulatory review at the end of 2025.

Speaking up

The aim of the 2014 Act is to encourage, support and protect workers to speak up about wrongdoings that may be occurring in their workplace.

As we reflect on the past year, HIQA's protected disclosures external channel continues to foster a safe, secure and supportive environment that staff from services that HIQA regulates feel they can trust to raise concerns about wrongdoings

¹ Three of these were transmitted back to HIQA by the Protected Disclosures Commissioner under section 10D(1)(b)(ii) of the Act and of these, one required follow-up and two were closed as the report was deemed minor.

occurring in their workplace because they believe this channel is independent, fair and protective.

The protected disclosures that HIQA received in 2025 — mirroring 2024 — highlights a persistent challenge. Many staff report that they do not trust their own organisation's protected disclosures internal channel for raising concerns. The reasons they give are significant:

- fear of losing their job if they speak up
- dependence on their employer for their work permit, which creates a power imbalance
- a belief that internal reporting mechanisms are not safe or confidential
- a perception that raising concerns may lead to retaliation or negative consequences.

These issues point to systemic cultural and structural barriers that prevent staff from feeling protected within their own workplace.

When internal channels are not trusted, wrongdoing is more likely to go unreported or unresolved. It also means:

- staff feel vulnerable and unsupported
- employers may be unaware of—or fail to address—serious risks.

It is therefore vital that employers take proactive steps to ensure they have a robust, clearly defined and well-communicated protected disclosures policy and procedure in place. These internal channels must be designed so that staff can raise concerns confidently and without fear of penalisation.

For this to happen, employers need to:

- provide clear, accessible information on how concerns can be raised internally
- demonstrate that disclosures will be handled fairly, confidentially and without retaliation
- foster a culture where speaking up is encouraged and valued
- ensure additional safeguards for workers who may be particularly vulnerable, including those whose immigration or work permit status is tied to their employer.

When staff trust their internal systems, issues can be addressed earlier, risks can be mitigated more effectively, and organisations can build healthier, safer working environments

Schedule 1: Internal Reports made under section 6 of the Act

Protected Disclosures Act 2014

Form PDA-1

Annual Report of Statistics - Internal Reports made under section 6 of the Act

Section 22(1) of the Protected Disclosures Act 2014 requires every public body to make an annual report, no later than **1 March** each year, to the Minister for Public Expenditure, NDP Delivery & Reform on the number of protected disclosures made to the public body in respect of the immediately preceding calendar year.

This table must be completed and returned to the Minister even if no protected disclosures have been made in the calendar year that is the subject of this report.

The information provided in this table should cover **ONLY** reports made by workers connected to the public body using the **INTERNAL** reporting channels established under section 6(3) of the Act. For reports received under other sections of the Act, please use Form PDA-2.

Completed reports should be sent to: pdreporting@per.gov.ie by 1 March each year.

Detailed guidance on the completion of this form is set in Section 14 of the Statutory Guidance on the operation of the Protected Disclosures Act for public bodies and prescribed persons, published in November 2023 and available from: www.gov.ie/protected-disclosures.

1 Identification

1.1 Name of Public Body:

1.2 Calendar year covered by this report:

2 Reports received in calendar year

2.1 How many reports were received via internal reporting channels in the calendar year? **Instructions:** "Reports" means reports that tend to show "relevant wrongdoings" (as defined in section 5(3) of the Act). The term **does not refer** to reports or complaints about **penalisation against reporting persons**. All reports that trigger (or will trigger) an acknowledgement under the Act should be counted.

3 Assessment of reports

3.1 Of the total number of reports received in the calendar year, how many were:

	(a) Fully	(b) Partially
3.1.1 Awaiting completion of assessment at year end?		
3.1.2 Assessed as warranting further follow-up?		
3.1.3 Referred to another more relevant procedure?		
3.1.4 Closed with no further action taken?	1	

Instructions: Where there is a single outcome to an assessment, please enter under column (a), Fully. Where multiple outcomes arise (e.g. if a report contains a range of allegations, which require a range of responses, please enter all that apply under column (b), Partially.

4 Follow-up of reports

4.1 How many follow-up procedures were opened in the calendar year? **Instructions:** "Follow-up procedures" means any form of follow-up action to a report taken to establish the veracity of the information reported. This could include an investigation, audit, inspection, etc. The term **does not refer** to follow-up or investigation of claims of **penalisation against reporting persons**.

4.2 How many open follow-up procedures were carried over from the previous year?

4.3 How many follow-up procedures were closed in the calendar year?

4.4 How many follow-up procedures remained open at the end of the calendar year?

4.5 Of the number of follow-up procedures reported as still open in response to Q4.4, how many are:

4.5.1 Open less than 1 year?	
4.5.2 Open more than 1 year but less than 3 years?	
4.5.3 Open more than 3 years but less than 5 years?	
4.5.4 Open 5 or more years?	

4.6 What was the **average** length (in weeks) of the follow-up procedures closed in the calendar year?

4.7 What was the **median** length (in weeks) of the follow-up procedures closed in the calendar year?

The response to Q.5.2 should also include all open follow-up procedures carried over that commenced prior to the commencement of the Protected Disclosures (Amendment) Act 2022 (i.e. before 1 January 2023).

5 Matters followed-up

5.1 Of the follow-up procedures opened in calendar year reported in response to Q4.1, how many involved:

5.1.1 Criminal offences?	
5.1.2 Breaches of a legal obligation?	
5.1.3 Miscarriage of justice?	
5.1.4 Endangerment of health and safety?	
5.1.5 Damage to the environment?	
5.1.6 Unlawful or improper use of public funds?	
5.1.7 Acts or omissions that are oppressive, discriminatory or grossly negligent or constitute gross mismanagement?	
5.1.8 Breaches of the EU laws within the scope of Article 2 of Directive (EU) 2019/1937 (the Whistleblowing Directive)?	
5.1.9 Concealment or destruction of information tending to show any matter falling within items 6.1.1 to 6.1.8?	

Instructions: Where a follow-up procedure falls under more than one of the headings listed at 5.1.1 to 5.1.9, please report under each heading that applies. For example, if a follow-up procedure was opened during the year that concerned both a breach of a legal obligation and damage to the environment, this should be recorded under both headings 5.1.2 **and** 5.1.5.

If any follow-up procedures have been opened under heading 5.1.8 (breaches of EU law), please also complete Q6. Otherwise proceed to Q7.

6 Follow-up of matters related to breaches of EU law

6.1 Of the follow-up procedures reported as opened in response to Q5.1.8 (breaches of EU law), if any, how many involved breaches of:

Instructions:

Complete this section **ONLY** if one or more follow-up procedures have been opened in respect of breaches of the EU laws within the scope of Article 2 of Directive (EU) 2019/1937 (the Whistleblowing Directive).

6.1.1	Public procurement?	
6.1.2	Financial services, products and markets, and prevention of money laundering and terrorist financing?	
6.1.3	Product safety and compliance?	
6.1.4	Transport safety?	
6.1.5	Protection of the environment?	
6.1.6	Radiation protection and nuclear safety?	
6.1.7	Food and feed safety and animal health and welfare?	
6.1.8	Public health?	
6.1.9	Consumer protection?	
6.1.10	Protection of privacy and personal data and security of network and information systems?	
6.1.11	The financial interests of the EU?	
6.1.12	The functioning of the EU Internal Market?	

7 Outcome of follow-up procedures

(a) Fully (b) Partially

7.1 Of the follow-up procedures reported as closed in response to Q4.3, how many were closed because no wrongdoing was found or insufficient evidence of wrongdoing could be found?

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Instructions:

"Further proceedings or sanctions" means any further internal actions taken by the public body once it has been established a relevant wrongdoing has occurred. This includes any disciplinary action taken against persons responsible for the wrongdoing.

7.2 Of the follow-up procedures reported as closed in response to Q4.3 and the result of the follow-up procedure was that a wrongdoing was found to have occurred, how many resulted in:

7.2.1 Further proceedings or sanctions?

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7.2.2 Referral or transmission to another body for further follow-up?

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"Referral or transmission to another body for further follow-up" means any further external action taken by the public body. It includes referral of a matter to An Garda Síochána for further follow-up or self-reporting of a wrongdoing to a relevant regulatory or supervisory authority.

7.2.3 Changes to policies and/or procedures?

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7.2.4 Recovery of lost funds?

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7.3 Of the follow-up, procedures reported as closed in response to Q4.3, what (where relevant) is the estimated financial damage to the public body arising from the wrongdoing reported?

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"Financial damage" refers to damage caused by the relevant wrongdoing reported. The calculation of "financial damage" should include any fines, financial penalties or other damages imposed on the public body arising directly from the wrongdoing reported. It does **not** relate to any **finances or compensation awarded or paid to a reporting person** arising from a claim of penalisation or any **financial damage suffered by the reporting person due to penalisation**.

7.4 Of the follow-up procedures reported as closed in response to Q4.3, what (where relevant) is the estimated amount of funds recovered by the public body arising from its follow-up?

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8 Anonymous reports

8.1 Of the total number of reports received in response to Q2, how many were made anonymously?

0

8.2 How many follow-up procedures were opened in response to anonymous reports in the calendar year?

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8.3 How many anonymous reporting persons subsequently disclosed their identity to the Designated Person in the calendar year?

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Schedule 2: Internal Reports made under section 6 of the Act

Protected Disclosures Act 2014

Form PDA-2

Annual Report of Statistics - External Reports made or transmitted under sections 7, 7A, 10C and 10D of the Act

Section 22(1) of the Protected Disclosures Act 2014 requires every public body to make an annual report, no later than **1 March** each year, to the Minister for Public Expenditure, NDP Delivery & Reform on the number of protected disclosures made to the public body in respect of the immediately preceding calendar year.

This table must be completed and returned to the Minister even if no protected disclosures have been received or are on hand in the calendar year that is the subject of this report.

The information provided in this table should cover **ONLY** reports made by workers to prescribed persons using the **EXTERNAL** reporting channels established under section 7(2A) of the Act or transmitted under sections 7A(1)(b)(vi), 10C(1)(b) and 10D(1)(b)(ii) of the Act. For internal reports received under section 6 of the Act, please use Form PDA-1.

Completed reports should be sent to: [INSERT EMAIL ADDRESS] by 1 March each year.

Detailed guidance on the completion of this form is set in [INSERT SECTION] of the Statutory Guidance on the operation of the Protected Disclosures Act for public bodies and prescribed persons, published on [DATE] and available from: www.gov.ie/protected-disclosures.

1 Identification

1.1	Name of Prescribed Person:	Angela Fitzgerald, Health Information and Quality Authority
1.2	Calendar year covered by this report:	2025

2 Reports received in calendar year

2.1	Of the reports received in the calendar year that is the subject of this report, how many were:		Instructions: "Reports" means reports that tend to show "relevant wrongdoings" (as defined in section 5(3) of the Act). The term does not refer to reports or complaints about penalisation against reporting persons .
2.1.1	Received via the external reporting channel established under section 7(2B) of the Act?	406	All reports that trigger an acknowledgement under the Act (or would have triggered an acknowledgement but the reporting person requested otherwise) should be counted.
2.1.2	Transmitted by another prescribed person under section 7A(1)(b)(vi) of the Act?	6	Where the same relevant wrongdoing is reported by the same person and reported both directly to the body and transmitted to the body by another prescribed person or the Protected Disclosures Commissioner, it should be counted as a single report under heading 3.1.1.
2.1.3	Transmitted by the Protected Disclosures Commissioner under section 10C(1)(b) of the Act?	5	
2.1.4	Transmitted by the Protected Disclosures Commissioner under section 10D(1)(b)(ii) of the Act?	5	
2.1.5	Total number of reports received	422	

3 Assessment of reports

3.1	Of the total number of reports received in the calendar year, how many were:	(a) Fully	(b) Partially	
3.1.1	Awaiting completion of assessment at year end?	6		Instructions: Where there is a single outcome to an assessment, please enter under column (a), Fully. Where multiple outcomes of an assessment arise (e.g. if a report contains a range of allegations which require a range of responses, please enter all that apply under column (b), Partially).
3.1.2	Assessed as warranting further follow-up?	285		
3.1.3	Transmitted to another prescribed person or the Protected Disclosures Commissioner?	39	111	
3.1.4	Closed because the report was clearly minor?	51		
3.1.5	Closed because it was a repetitive report containing no meaningful new information?	1		
3.1.6	Referred to another more relevant procedure?	33		
3.1.7	Assessed as warranting no further follow-up?	7		

4 Investigation of reports

4.1	How many investigations were opened in the calendar year?	288	Instructions: "Investigation", for the purposes of this exercise, refers to any form of follow-up action to a report taken to establish the veracity of the information reported. The term does not refer to investigations of claims of penalisation against reporting persons . Examples of investigations include but are not limited to: setting up of investigative committees or commissions, inspections, audits, etc. The response to Q5.2 should also include all open investigations carried over that commenced prior to the commencement of the Protected Disclosures (Amendment) Act 2022 (i.e. before 1 January 2023).
4.2	How many open investigations were carried over from the previous year?	24	
4.3	How many investigations were closed in the calendar year?	276	
4.4	How many investigations remained open at the end of the calendar year?	36	
4.5	Of the number of investigations reported as still open in response to Q5.4, how many are:		
4.5.1	Open less than 1 year?	35	
4.5.2	Open more than 1 year but less than 3 years?	1	
4.5.3	Open more than 3 years but less than 5 years?	0	
4.5.4	Open 5 or more years?	0	
4.6	What was the average length of the investigations closed in the calendar year?	8	
4.7	What was the median length of the investigations closed in the calendar year?	7	

5	Matters investigated		
5.1	Of the investigations opened in calendar year reported in response to Q4.1, how many involved:		Instructions: Where an investigation falls under more than one of the headings listed at 5.1.1 to 5.1.9, please report under each heading that applies. For example, if one investigation was opened during the year that concerned both a breach of a legal obligation and damage to the environment, enter '1' under both headings 5.1.2 and 5.1.5.
5.1.1	Criminal offences?	12	If any investigations have been opened under heading 5.1.8 (breaches of EU law), please also complete Q6. Otherwise proceed to Q7.
5.1.2	Breaches of a legal obligation?	271	
5.1.3	Miscarriage of justice?	2	
5.1.4	Endangerment of health and safety?	76	
5.1.5	Damage to the environment?	0	
5.1.6	Unlawful or improper use of public funds?	4	
5.1.7	Acts or omissions that are oppressive, discriminatory or grossly negligent or constitute gross mismanagement?	1	
5.1.8	Breaches of the EU laws within the scope of Article 2 of Directive (EU) 2019/1937 (the Whistleblowing Directive)?	1	
5.1.9	Concealment or destruction of information tending to show any matter falling within items 5.1.1 to 5.1.8?	0	

6	Matters investigated - Breaches of EU laws		
6.1	Of the investigations reported as opened in response to Q6.1.8 (breaches of EU law), how many involved breaches of:		Instructions: Complete this section ONLY if one or more investigations have been opened in respect of breaches of the EU laws within the scope of Article 2 of Directive (EU) 2019/1937 (the Whistleblowing Directive).
6.1.1	Public procurement?	0	
6.1.2	Financial services, products and markets, and prevention of money laundering and terrorist financing?	0	
6.1.3	Product safety and compliance?	0	
6.1.4	Transport safety?	0	
6.1.5	Protection of the environment?	0	
6.1.6	Radiation protection and nuclear safety?	1	
6.1.7	Food and feed safety and animal health and welfare?	0	
6.1.8	Public health?	0	
6.1.9	Consumer protection?	0	
6.1.10	Protection of privacy and personal data and security of network and information systems?	0	
6.1.11	The financial interests of the EU?	0	
6.1.12	The functioning of the EU Internal Market?	0	

7	Proceedings initiated		
7.1	How many proceedings were initiated on foot of investigations in the calendar year?	6	Instructions: "Proceedings" covers all types of formal enforcement action taken by a prescribed person triggered wholly or mainly by a report of a relevant wrongdoing. Examples include: warning/improvement notices; fines or other financial penalties; and any judicial proceedings taken (civil or criminal). It does not include any proceedings concerning penalisation of a reporting person .
7.2	How many cases were referred to another body to initiate proceedings in the calendar year?	0	"Cases referred to another body" could include referral of a matter to the DPP for prosecution. Cases referred to other bodies to initiate proceedings should not be counted in the average and median times reported under Q7.3 and Q7.4.
7.3	What was the average length (in weeks) of the proceedings that concluded in the calendar year?	12	
7.4	What was the median length (in weeks) of the proceedings that concluded in the calendar year?	9	

8	Subject of proceedings initiated		
8.1	Of the proceedings initiated or referred to another body in the calendar year reported in response to Q7.1, how many involved:		Instructions: Where proceedings fall under more than one of the headings listed at 8.1.1 to 8.1.9, please include under each heading that applies. For example, if one set of proceedings was opened during the year that concerned both a breach of a legal obligation and damage to the environment, enter '1' under both headings 8.1.2 and 8.1.5.
8.1.1	Criminal offences?	0	If any proceedings have been opened under heading 8.1.8 (breaches of EU law), please also complete Q9. Otherwise proceed to Q10.
8.1.2	Breaches of a legal obligation?	0	
8.1.3	Miscarriage of justice?	0	
8.1.4	Endangerment of health and safety?	0	
8.1.5	Damage to the environment?	0	
8.1.6	Unlawful or improper use of public funds?	0	
8.1.7	Acts or omissions that are oppressive, discriminatory or grossly negligent or constitute gross mismanagement?	0	
8.1.8	Breaches of the EU laws within the scope of Article 2 of Directive (EU) 2019/1937 (the Whistleblowing Directive)?	0	
8.1.9	Concealment or destruction of evidence of any of the above wrongdoing?	0	

9 Subject of proceedings initiated - Breaches of EU laws

9.1 Of the proceedings reported as initiated in response to Q8.1.8 (breaches of EU law), how many involved breaches of:

Instructions:

Complete this section **ONLY** if one or more proceedings have been initiated in respect of breaches of the EU laws within the scope of Article 2 of Directive (EU) 2019/1937 (the Whistleblowing Directive).

9.1.1	Public procurement?	0
9.1.2	Financial services, products and markets, and prevention of money laundering and terrorist financing?	0
9.1.3	Product safety and compliance?	0
9.1.4	Transport safety?	0
9.1.5	Protection of the environment?	0
9.1.6	Radiation protection and nuclear safety?	0
9.1.7	Food and feed safety and animal health and welfare?	0
9.1.8	Public health?	0
9.1.9	Consumer protection?	0
9.1.10	Protection of privacy and personal data and security of network and information systems?	0
9.1.11	The financial interests of the EU?	0
9.1.12	The functioning of the EU Internal Market?	0

10 Outcome of proceedings

10.1 Of the proceedings reported as initiated how many resulted in:

Instructions:

"Other enforcement action" refers to any other action taken to address the relevant wrongdoing other than those listed under Qs 10.1.1 to 10.1.4. It could include: formal warnings, improvement notices, confiscation of offending items/materials, closure orders, cease and desist orders etc.

10.1.1	Criminal prosecution?	0
10.1.2	Fines or other financial penalties?	0
10.1.3	Recovery of lost funds?	0
10.1.4	Award of damages?	0
10.1.5	Other enforcement action?	0
10.1.6	No outcome?	0

"Financial damage" relates to damage caused by the relevant wrongdoing reported. It does **not** relate to **financial damage suffered by the reporting person due to penalisation**.

For the calculation of "financial damage", the ascertainment of the damage by any public body (including the courts) should be taken into account.

10.2 Of the proceedings reported as initiated, what (where relevant) is the estimated financial damage arising from the wrongdoing reported?

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The calculation of "financial damage" **should not include** any **fin**es or other **financial penalties** imposed. (These are to be reported on under headings 10.3 and 10.4.)

10.3 Of the proceedings reported as initiated, what (where relevant) is the total value of fines and/or other financial penalties imposed as a result of these proceedings?

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Fines and other financial penalties **should not include** any **damages awarded to a reporting person** or any **fin**es/penalties imposed for **penalisation of a reporting person**.

10.4 Of the proceedings reported as initiated, what (where relevant) is the estimated amount of funds recovered as a result of proceedings?

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11 Anonymous reports

11.1 Of the total number of reports received in response to Q2, how many were made anonymously?

114

11.2 How many investigations were opened in response to anonymous reports in the calendar year?

80

11.3 How many proceedings were opened in response to anonymous reports in the calendar year?

1

11.4 How many anonymous reporting persons subsequently disclosed their identity in the calendar year?

2

Published by the Health Information and Quality Authority (HIQA).

For further information please contact:

Health Information and Quality Authority
Dublin Regional Office
George's Court
George's Lane
Smithfield
Dublin 7
D07 E98Y

Phone: +353 (0) 1 814 7400
info@hiqa.ie
www.hiqa.ie

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