Investigation Template – please complete all sections

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| --- | --- | --- | --- |
| Datix Reference No. |  | Risk Grading, Department, actual effect on patient/service and severity of incident |  |
| Date Incident/ Complaint received |  |  |  |
| Is this StEIS Reported Yes/No |  |  |  |
| Incident Detail |  |  |  |
| Duty of Candour / Involvement, support patient relatives, staff |  |  |  |
| Investigation Type(Concise, Comprehensive, Independent) |  |  |  |
| Investigation Lead / Team |  |
| Terms of Reference |  |
| Date Investigation Commenced |  |
| Target Date for Completion |  |
| Case / Adastra Number |  |
| Contributory factors (internal / External) |  |
| Care & Service Delivery Issues |  |
| Investigation findings/conclusion |  |
| Planned actions – please detail who these actions are assigned to (please use separate action plan if required). |  |
| Feedback to individuals concerned |  |
| Lessons Learnt |  |
| Details of any disseminated learning/feedback |  |
| Date investigation completed |  |  |  |