

# Our Services

- Providing help and advice
- Providing information about our service
- Listening to you and answering your questions
- Advocating for you if things go wrong
- Investigating your complaints

If you are making a complaint, please provide us with your consent regarding access to personal information:

I hereby consent for CHI to access my child's Healthcare Record for the purposes of investigating my complaint.

Please tick  YES  NO

*Please note that refusing access to your child's Healthcare Record may impact on our ability to properly investigate your complaint.*

Signature:

Date:



# Contact Us

E-mail address:  
[PALS@tuh.ie](mailto:PALS@tuh.ie)

Write to us:  
PALS  
CHI at Tallaght  
Tallaght Hospital  
Dublin 24

Visit our Website:  
<https://childrenshealthireland.ie/Tallaght/>

- ONCE COMPLETED PLEASE RETURN FORM BY EMAIL / POST OR LEAVE IN:
- PALS POSTBOX IN TALLAGHT HOSPITAL FOYER
  - FEEDBACK BOX IN CHI AT TALLAGHT RECEPTION
  - HAND TO ANY MEMBER OF CHI STAFF

Thank you

# Are We Doing A Good Job?

Let us know if we're doing a good job or help us to identify ways to improve

Tell us about your experience



Patient Advocacy and Complaints



# Feedback Form



\*REQUIRED INFORMATION:



\*Date:

\*Name:

I am a:

- Patient       Carer  
 Family Member       Friend  
 Guardian       Visitor  
 Other (Please specify):

Email:

\*Telephone:

\*Address:

\*Nature of feedback:

- Comment/suggestion  
 Compliment  
 Complaint

\*Would you like us to respond to your feedback?

- Yes       No

\*If yes, how would you like us to contact you?

- Email       Post  
 Phone

Please tell us which area you are giving feedback on:  
Ward – Beech/Maple/Oak  
Theatre  
Emergency Care Unit  
Outpatients  
Radiology  
Other:

Your Feedback:

Additional Comments:

Thank you

