



# Notification of Inspection by External Body



Eagraíocht Cúram Sláinte  
Pobail,  
Lár Tíre, An Lú, An Mhí  
Midlands Louth Meath  
Community Health  
Organisation

(Click on the box to insert X: Click or tap field to enter text)

1.	<p> <b>Mental Health</b> <input type="checkbox"/>    <b>Disabilities</b> <input type="checkbox"/>  <b>Older Persons</b> <input type="checkbox"/>    <b>Primary Care</b> <input type="checkbox"/>  <b>Residential</b> <input type="checkbox"/>    <b>Non-residential</b> <input type="checkbox"/>    <b>Administration</b> <input type="checkbox"/>  <b>Name of Service:</b> Click or tap here to enter text.   <b>Address:</b> Click or tap here to enter text.   <b>Local Manager:</b> Click or tap here to enter text.   <b>Telephone No:</b> Click or tap here to enter text. <b>Email:</b> Click or tap here to enter text.   <b>Head of Service:</b> Click or tap here to enter text.   <b>Telephone No:</b> Click or tap here to enter text. <b>Email:</b> Click or tap here to enter text.         </p>
2.	<p><b>Name of Inspection Body</b></p> <p>           HIQA <input type="checkbox"/>    MHC <input type="checkbox"/>    Professional Body : <input type="checkbox"/> Click or tap here to enter text.            HSA <input type="checkbox"/>    Other State Agency: <input type="checkbox"/> Click or tap here to enter text.         </p>
3.	<p> <b>Announced Visit</b> <input type="checkbox"/>                      <b>Unannounced Visit</b> <input type="checkbox"/> </p>
4.	<p> <b>Date:</b> Click or tap to enter a date.    <b>Time Commenced:</b> Click or tap here to enter text.         </p>
5.	<p><b>Name of Inspectors:</b></p> <p>           1 Click or tap here to enter text.                      2 Click or tap here to enter text.            3 Click or tap here to enter text.                      4 Click or tap here to enter text.         </p>
6.	<p><b>Purpose of Inspection</b></p> <hr/> <hr/> <hr/> <hr/> <hr/> <hr/> <hr/> <hr/> <hr/> <hr/>

[illegible]

Email completed Form to:

Chief Officer ☐

Head of Service ☐Quality & Risk Lead ☐Health & Safety Officer ☐ (HSA inspections only)

Head of QSSI ☐

General Manager ☐