

**Early Years Inspectorate COVID-19 Notification Form**  
**Child Care Act (Early Years Services) Regulations 2016**  
**Part VIII, Article 31**

**Service Name:**

**Service Address:**

**TU number:**

**Date:**

Please indicate the nature of the incident

**Confirmed case(s) of COVID-19 for any child attending the service**

**Confirmed case(s) of COVID-19 for any staff member**

**Potential closure of a service**

**Other relevant information**

**Summary of the Notification**

**Actions taken by the registered provider**

**Details of person completing this report:**

**Name:**

**Contact No :**