******QuitManager New Group Clinic Set-up**

**Complete one form per clinic**

|  |  |
| --- | --- |
| **Advisor Name(s)[[1]](#footnote-1):**  |  |
| **Clinic Name** | *Guidance on naming the clinic appropriately is in the attached Guidance Note.* |
| **Type of group** | **Women’s only** [ ]  **Men’s only** [ ]  **Mixed Gender** [ ]  |
| **Is this clinic part of the SHC programme?**  | **Yes** [ ]  **No** [ ]  |
| **Location**  | *E.g. South County Dublin* |
| **CHO** | **If Clinic/Service is in the community then please state the CHO** *e.g. CHO 7* |
| **Hospital Group** | **If Clinic/Service is on an Acute Hospital Site, please state which Hospital Group:** *e.g. Saolta.* |
| **Day**  | **Mon**[ ]  | **Tues**[ ]  | **Wed**[ ]  | **Thurs**[ ]  | **Fri**[ ]  | **Sat**[ ]  | **Sun**[ ]  |
| **Start Date** |  |  |  |  |  |  |  |
| **Start Time** |  |  |  |  |  |  |  |
| **Finish****Time** |  |  |  |  |  |  |  |
| **Address** (if not included in the clinic name) |  |
| **Eircode****(Mandatory)** | Use Eircode look up if required. <https://finder.eircode.ie/#/>  |
| **Contact Person**  | May be clerical support, receptionist |
| **Telephone No** | Should be advisor’s direct contact, ideally mobile where possible |
| **Intervention setting** | *E.g. mental health acute, community, primary care, community, maternity, acute services etc.* |

1. You should include the name of the HSE Stop Smoking Advisor supporting this group [↑](#footnote-ref-1)