

Action Plan

Service Name:	Life Fit Wellness Ltd
Service number:	01090
Service Provider:	Life Fit Wellness Ltd
Address:	Falkirk Business Hub, Weir Street, Falkirk FK1 1RA
Date Inspection Concluded:	19 August 2021

Requirements and Recommendations	Action Planned	Timescale	Responsible Person
Recommendation a: The service should further develop its current programme of audits to cover key aspects of care and treatment such as infection prevention and control.	We have planned further audits to address the areas that were identified in the report.	3 months	David Bowmaker
Recommendation b: The service should ensure that each patient care record documents when aftercare information is given to the patient.	This has already been actioned and all patients who are provided with aftercare information get this documented in their notes.	Done	David Bowmaker

File Name: 20190121 Action Plan Template	Version: 1.0	Date: 21 January 2019		
Produced by: IHC Team	Page:1 of 2	Review Date:		
Circulation type (internal/external): Internal/External				



implement a qu	tion c: The service should rality improvement plan to and direct the way it measures	We have planned a meeting to do this and what we do. A qua plan will be instigated as the re	ality improvement	3 months	David Bowmaker
Name	David Bowmaker				
Designation	Director				
Signature	David S Bowmaker		Date 30 / 06	5 /2021	
In signing this f	orm, you are confirming that yo	u have the authority to complete it	on behalf of the servi	ce provider.	

File Name: 20190121 Action Plan Template	Version: 1.0	Date: 21 January 2019		
Produced by: IHC Team	Page:2 of 2	Review Date:		
Circulation type (internal/external): Internal/External				