

## Action Plan

Service Name:	Heal Physiotherapy Limited
Service number:	01459
Service Provider:	Heal Physiotherapy Limited
Address:	14 Dudhope Street, Dundee DD1 1JU
Date Inspection Concluded:	29 September 2022

Requirements and Recommendations	Action Planned	Timescale	Responsible person
<b>Requirement 1:</b> The provider must ensure a full assessment of each patient is carried out, and health conditions, allergies, medications and previous treatments are documented in the patient care record.	A form has been built using clinic software which is now sent out to all clients automatically booking an appointment with either the Orthopaedic Consultants/Sports Medicine Doctor. This is not performed for Physiotherapy clients as all physiotherapy already detail this. The form asks for all these details and once the client completes the form this is automatically uploaded into the clients electronic record.	Completed	Lynne Falconer
<b>Requirement 2:</b> The provider must ensure that all medications given are recorded accurately in the patient care record.	Medical Team (Orthopaedic Consultant and Sports Medicine Doctor) note audit has been altered to include requirements 1 and 2 and is currently under way monthly for 3 months and then as required depending on results.	Commenced – completed plan in action, ongoing note audit	Lynne Falconer
<b>Recommendation a:</b> The service should document next of kin or emergency contact details in patient care records.	This is asked for as part of the consent process at the time of booking in but clients are not consistently filling this section in. This	Completed	Lynne Falconer

File Name: 20190121 Action Plan Template	Version: 1.0	Date: 21 January 2019
Produced by: IHC Team	Page:1 of 3	Review Date:
Circulation type (internal/external): Internal/External		

	is now being checked as new clients attend for their first appointment at the clinic by our administration team and completed on arrival at the clinic.		
<b>Recommendation b:</b> The service should further develop its patient care record audit to review the content and quality of patient care records and ensure all relevant information is documented.	This is a recommendation for Medical Team clinical record audit as physiotherapy clinical record audit is already comprehensive. This has already been actioned as per Requirements 1 and 2	Completed	Lynne Falconer
<b>Recommendation c:</b> The service should ensure reference checks are carried out for all staff working in the service.	The requirement for 2 references has been added to the Practising Privileges Application Form and process	Completed	Lynne Falconer
<b>Recommendation d:</b> The service should develop a quality improvement plan to formalise and direct the way it drives and measures improvement.	Quality Improvement is addressed throughout the year at Management Team/Quality Clinical Governance Meetings. Actions plans are made throughout the year. There is a plan for a Quality Improvement Planning Meeting in January 2022 with Clinical Quality Advisor, Lynsey Kemlo.	January 2023	Lynne Falconer/Avril McKenzie

Name	Lynne Falconer		
Designation	Director		
Signature	E sig L Falconer	Date	07 / 11 /2022

**In signing this form, you are confirming that you have the authority to complete it on behalf of the service provider.**

File Name: 20190121 Action Plan Template	Version: 1.0	Date: 21 January 2019
Produced by: IHC Team	Page:2 of 3	Review Date:
Circulation type (internal/external): Internal/External		

File Name: 20190121 Action Plan Template	Version: 1.0	Date: 21 January 2019
Produced by: IHC Team	Page:3 of 3	Review Date:
Circulation type (internal/external): Internal/External		