**Infection Prevention and Control Audit Action Plan Template**

**Action Plan**

KEY

|  |  |
| --- | --- |
| 1 | Recommendation agreed but not yet actioned |
| 2 | Action in progress |
| 3 | Recommendation fully implemented |
| 4 | Recommendation never actioned (please state reasons) |
| 5 | Other (please provide supporting information) |

|  |  |
| --- | --- |
| **Action Plan Lead** |  |

| **Issue Identified** | **Action Taken** | **Person Responsible** | **Date Action Completed** | **Action Status** |
| --- | --- | --- | --- | --- |
| ***Example:***  *PPE is not readily available.* | *Implemented PPE dispensers* | *Care Home Manager* | *1/1/24* | *3* |
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