**To:** Registered Manager

**CC:** Contracts Performance & Quality Manager, Dementia Academy

**Subject:** Observation Report – Action Plan (Name (**Initials**) of service user), (Name of care home)

**Attachment:** Action Plan

**Importance:** High (Read/ delivery receipt)

Private & Confidential  - FAO ##### ###### (Registered Manager)

Good morning/ afternoon,

Following my/ the visit to (Name of care home) by our Dementia Care Mapper/s, ###### ####### and ##### ####### on day /date /month /, year, please find attached a copy of the Action Plan that was agreed on the day.

Thank you for being responsive to the recommendations and suggestions included within the Observation report.

We would be grateful if you could confirm your agreement to the action plan as soon as possible.

Please don’t hesitate to contact us should you require any further information regarding your Action Plan.

In order to ensure our best possible service and our commitment to performance and quality we would welcome your feedback / comments regarding:

* The Observation process (referral process/ DCM response/ collating of information.
* The actual observation visit and initial verbal feedback.
* The subsequent observation report including its clarity of reading/ understanding.
* The feedback/ action plan meeting.

Please don’t hesitate to contact us should you require any further information,

Kind regards

*##### #######*

**##### #######**

Dementia Care Mapper

**Contract Performance & Quality Team**

**Dementia Mapping Service**

Adult Social Care

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*‘A Life not a Service’*

