Organisation name Site or unit		FORM **Bed, mobility equipment and call system check**	
Document ID	ACS-FRM-003	**Version**	1.0
Status	Blank form, to adapt	**Issue date**	
Review date		**Replaces**	
Owner		**Approved by**	
Signature			

Form · ACS-FRM-003 · Version 1.0 · Approved by the ASF Expert Committee

1. Purpose

Records the check of each bed, its brakes and call system, and the mobility equipment.

2. How to complete

- Check each bed at the start of each shift.
- Check mobility equipment on the schedule.
- Tag any faulty item.

3. Checks

Check	Entry
Bed low when occupied	Yes
Brakes locked	Yes
Call system within reach	Yes
Personal items within reach	Yes
Walking aids and wheelchairs working	Yes
Checked by and time	Yes

4. Evidence

Reference	Note
E-009	ASF Expert Committee consensus.
E-006	ASF Policy Framework v1.2. Adapted.
E-009	ASF Expert Committee consensus.

5. Change history

Version	Date	What changed	Approval
1.0	the date of approval	First version	set Expert Committee approval

6. References

- Accréditation Sans Frontières (2026). ASF Policy Framework v1.2. (E-006)
- Accréditation Sans Frontières (2026). ASF Expert Committee consensus on Standard 1. (E-009)

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