

Accountable person and governance policy

Policy | APR-POL-001

Document type	Policy
Title	Accountable person and governance policy
Document ID	{{facility.code}}-APR-POL-001
Version and status	1.0 Issued for use. Pending ASF Expert Committee ratification
Prepared by	{{roles.quality_lead.name}}, Quality lead
Reviewed by	{{roles.clinical_director.name}}, Clinical director Date: _____
Approver and signature	{{roles.clinical_director.name}}, Clinical director Signature: _____ Date: _____
Effective date	{{document.effective_date}}
Next review	{{document.review_date}} (12 months, or sooner after any incident or change)
Replaces	None (new document)
Standards and criteria supported	Basis B2.1 (A Named Person Is Accountable for the Service)
Evidence basis	E-006, E-009
Status of this document	Recommended best-practice model. A hospital may adopt, adapt or replace it with an equivalent that meets the same criteria.

At a glance: what to do

1. One named person holds documented accountability for the safety and quality of the service.
2. Staff and patients can identify that person, and how to contact them.
3. A named deputy covers absences, and every handover of accountability is recorded.
4. The appointment is reviewed each year, and whenever the person changes.

Stop and get help straight away if: there is no named accountable person, or staff and patients cannot identify that person.

1. Purpose

To make sure one named person is accountable for the safety and quality of the service, and that everyone knows who that is (B2.1).

2. Scope

Applies to	Clinical and support staff in the hospital
Locations	All wards, clinics and departments of {{facility.legal_name}}
When	Whenever the activity described is carried out
Does not apply to	Activities covered by another document listed in section 15

3. Definitions and abbreviations

Term	Meaning in this SOP
Accountable person	The named individual who holds overall accountability for the safety and quality of the service.
Deputy	The named person who holds accountability while the accountable person is absent.

4. Background and rationale

To make sure one named person is accountable for the safety and quality of the service, and that everyone knows who that is (B2.1).

5. Responsibilities

Role	Duties in this SOP	Competence needed
Governing body	Appoints the accountable person in writing, and reviews the appointment each year	Board or owner
Accountable person	Holds accountability for safety and quality, signs the annual statement, and chairs the quality meeting	Governing body
Deputy	Holds accountability during absences, and records each handover	Accountable person
All staff	Know who the accountable person is and how to reach them	Ward or department lead

6. Equipment, materials and resources

Item	Specification or standard	Check before use
Records and forms named in this document	Current version	Checked before use

7. Safety and infection prevention

- Stop and call for help if a patient is at immediate risk. Do not delay urgent care to complete paperwork.

8. Before you start

- Confirm the forms and equipment named in this document are available and current.

9. Procedure

Follow the steps in order. Where a step says "If", take the action for the case that applies. Do not skip a step. If a step cannot be done, use section 11 and section 12.

Step	Action	How to do it	Key point
1	Appoint.	- The governing body appoints the accountable person in writing and names a deputy. - Record the appointment in the appointment record (APR-FRM-001).	Appointment recorded.
2	Declare.	- Publish the name, role and contact route on the noticeboard, on the website and in patient information. - Tell all staff at induction and in the annual update.	Name published.
3	Cover.	When the accountable person is absent, the deputy holds accountability, and the handover is recorded with the dates.	Cover recorded.
4	Review.	Review the appointment each year, and whenever the person changes. Record the review date and the signature of the governing body.	Appointment reviewed.

Decision points

- No decision points in this procedure.

10. Special situations

Situation	What to do
Out of hours	Follow the same steps. Use the on-call contact on the wall of the area.

11. Problems and escalation

- Any serious problem goes to the duty clinical lead at once and to the clinical director the same day.

12. Monitoring and compliance

What is checked	Target	How often	Who	If the target is missed
Named accountable person and deputy in place	100%	Quarterly	Governing body	Escalate to the governing body at once
Staff sampled who can name the accountable person	9 in 10 or more	Annually	Accountable person	Republish the name and retrain at induction
Annual review completed and signed	100%	Annually	Governing body	Escalate to the owner

13. Records

Record	Where it is kept	Kept for
Record named in this document	Patient record or the area file	{{facility.records_retention_years}} years

14. Training and competence

- The accountable person completes governance and leadership training within six months of appointment.
- Staff are told the name of the accountable person at induction.

15. Related documents

ID	Title	Relationship
APR-FRM-001	Accountable person appointment record (existing)	Form

16. Evidence

ID	Source and status
E-006	ASF Policy Framework v1.2. Adapted.
E-009	ASF Expert Committee consensus.

EC = ASF Expert Committee consensus. Items marked EC are reviewed by the Committee each year.

17. Change history

Version	Date	What changed	Approver and signature
1.0	{{document.effective_date}}	First version	Pending Expert Committee approval