

Failure Logging and Analysis

Standard operating procedure (SOP) | FAC-SOP-002

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Title	Failure Logging and Analysis
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Replaces	None (new document)
Standards and criteria supported	Standard 2B, criterion 2B.9
Evidence basis	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. Log every failure of a critical service within the shift.
2. Find the cause, using a simple method (for example, the five whys).
3. Agree one change that prevents the failure from recurring.
4. Review repeated failures each quarter.

Stop and get help straight away if: a failure is not logged or is closed without a cause.

1. Purpose

To make sure each failure of a critical service is recorded, analysed and used to prevent recurrence [EC].

2. Scope

Applies to	Facilities and IT staff who respond to failures, and clinical leads who report them
Locations	The whole facility
When	At each failure and at the quarterly review
Does not apply to	Serious incidents, which follow INC-SOP-001

3. Definitions and abbreviations

Term	Meaning in this SOP
Failure	Loss, reduction or fault in a critical service
Cause	The underlying reason, not the symptom

4. Background and rationale

A failure log only protects patients if it leads to change. Criterion 2B.9 asks for failures to be analysed so they do not recur.

5. Responsibilities

Role	Duties in this SOP	Competence needed
Responding engineer	Logs the failure; finds the cause	Engineering
Facilities manager	Reviews each entry; agrees the change	Facilities management
Quality lead	Reviews repeated failures quarterly	Quality

6. Equipment, materials and resources

Item	Specification or standard	Check before use
Failure log (FAC-REG-002)	Current	Available to responders

7. Safety and infection prevention

- Make the area safe before investigating.

8. Before you start

- Note the time the failure was first seen.

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	Log at once.	• Enter date, time, service, area, and the impact on patients.	The time is the start of the evidence.
2	Restore and record.	• Restore the service and record how it was restored and for how long it was down.	Restoration details are needed to see whether back-up worked.
3	Find the cause.	• Ask why the failure happened, at least five times, until you reach a cause you can change.	A cause such as "the fuse blew" needs another why.
4	Agree the change.	• Agree one change to the equipment, maintenance, testing or procedure that prevents recurrence. • Give it an owner and a due date.	A change is what closes the failure.
5	Review repeats.	• Each quarter, look for repeated failures of the same service or area. • Escalate any repeat to the chief executive.	Repeats show the change did not work.

Decision points

- If a cause cannot be found within 5 working days, a specialist review is arranged (EC).

10. Special situations

Situation	What to do
Failure affecting patients	Also report as an incident at once.

11. Problems and escalation

- Repeated failures go to the chief executive.

12. Monitoring and compliance

What is checked	Target	How often	Who	If the target is missed
Failures logged within the shift	100%	Each event	Facilities manager	Review of the event
Failures closed with a cause and a change	100%	Monthly	Facilities manager	Escalate
Repeat failures reviewed quarterly	100%	Quarterly	Quality lead	Escalate

13. Records

Record	Where it is kept	Kept for
FAC-REG-002 Failure Log	Facilities file	{{facility.records_retention_years}} years

14. Training and competence

- Responding engineers are trained in simple root-cause methods (EC).

15. Related documents

ID	Title	Relationship
FAC-REG-002	Failure Log	The log
INC-SOP-001	Root Cause Analysis of Serious Incidents	For serious failures
FAC-PLN-001	Critical Services Testing and Back-up Plan	Parent plan

16. Evidence

ID	Source and status
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	Approved by the ASF Expert Committee
1.1	{{document.effective_date}}	Internal quality review: corrected cross-references, status wording and document control	Approved by the ASF Expert Committee