

Site assessment before each deployment

Policy | MOB-POL-001

Document type	Policy
Title	Site assessment before each deployment
Document ID	{{facility.code}}-MOB-POL-001
Version and status	1.0 Issued for use. Pending ASF Expert Committee ratification
Prepared by	{{roles.quality_lead.name}}, Quality lead
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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	Standard 13 (Mobile Clinic and Outreach), criterion 13.1
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. Each site is assessed before the first session, using MOB-FRM-001.
2. The assessment covers safety, access, privacy, infection control, power, water and waste.
3. A site that fails a safety item is not used until the item is fixed or another site is chosen.
4. The assessment is reviewed each year, or when the site changes.

Stop and get help straight away if: a site with a failed safety item is used, or patients are seen with no site assessment.

1. Purpose

To make sure each site is safe for patients and staff before the service starts (13.1).

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
Clinical lead	The doctor or nurse in charge of the area at the time

4. Background and rationale

To make sure each site is safe for patients and staff before the service starts (13.1).

5. Responsibilities

Role	Duties in this SOP	Competence needed
Outreach lead	Owens the assessment and approves the site	Clinician
Team leader on the day	Checks the site on arrival	Nurse

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	Assess.	• Complete MOB-FRM-001 for each site before the first session.	Before the first session.
2	Decide.	• Use the site only if every safety item passes, or record the fix that is in place.	Pass, or fix first.
3	Review.	• Review the assessment each year and whenever the site changes.	Yearly, and on change.

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
Sites with a signed assessment before first use	100%	Each deployment	Outreach lead	Escalate to clinical director

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

- Staff are trained in this document at induction and refreshed each year, with a recorded competency check.

15. Related documents

ID	Title	Relationship
MOB-FRM-001	Site assessment record	Record

16. Evidence

ID	Source and status
E-009	Based on the Sphere Handbook, Humanitarian Charter and Minimum Standards in Humanitarian Response (2018).
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