

Organisation name Site or unit		STANDARD OPERATING PROCEDURE Population data review	
Document ID	PHC-SOP-005	Version	1.0
Status	Blank form, to adapt	Issue date	
Review date		Replaces	
Owner		Approved by	
Signature			

Standards > **Standard S3** > **Standard operating procedures (SOPs)**

Standard operating procedure (SOP) · PHC-SOP-005 · Version 1.0 · Approved by the ASF Expert Committee

Supports: System S3 (Primary care practice), criterion S3.6

At a glance

- Review the register each quarter to find patients overdue for care.
- Record each gap in care with its owner.
- Act on each gap and check it closes.
- Report the gaps to the practice meeting.
- Stop and get help straight away if: gaps in care are found and not reviewed for six months.

1. 1. Purpose

To use the practice's own list to find patients who need care and to show where care is missing (S3.6).

2. 2. Scope

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

3. 3. Definitions

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

4. 4. Background

A practice that does not look at its own list cannot find the patients who are overdue for care. Simple data on the register shows where care is missing.

5. 5. Responsibilities

Role	Responsibility	Competence
Practice manager	Runs the quarterly review	Management
Clinical lead	Agrees actions for gaps	Clinician

6. 6. Materials and equipment

Item	Requirement	Condition
Records and forms named in this document	Current version	Checked before use

7. 7. Safety

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

8. 8. Before you start

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

9. 9. Procedure

Step 1. Run the review.

- Pull the list of patients overdue for each measure from the register.

Key point: Use the whole list, not a sample.

Step 2. Record the gaps.

- Enter each gap on PHC-REG-004 with an owner and a date.

Key point: A gap needs a name.

Step 3. Act and check.

- Contact the patients.
- Check each gap closes by its date.

Key point: Closure is the measure.

10. 10. Decision points

- No decision points in this procedure.

11. 11. Special situations

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

12. 12. Escalation

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

13. 13. Monitoring

Measure	Target	Frequency	Owner	If not met
Quarterly reviews done	100%	Quarterly	Practice manager	Escalate to chief executive
Gaps with owner and date	100%	Quarterly	Clinical lead	Escalate to clinical lead

14. 14. Records

Record	Kept in	Retention
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Record named in this document	Patient record or the area file	the period set by the facility's records policy years

15. 15. Training

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

16. 16. Related documents

ID	Title	Use
<u>PHC-REG-004</u>	Care gaps register	Register

17. 17. Evidence

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

18. 18. Change history

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

No e-learning course is linked to this document yet.

19. 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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Related standard

- [Standard 59: Outpatient Medical Specialties](#)