Standard operating procedure (SOP) · DAY-SOP-003 · Version 1.0 · Approved by the ASF Expert Committee

Supports: 6.7

At a glance

- Each planned day case admitted unplanned is reviewed.
- The review asks why the patient was not sent home as planned.
- Each finding has an action with an owner.
- Findings are reported each quarter.
- Stop and get help straight away if: an unplanned admission is not reviewed, or a finding has no action.

1. Purpose

To learn from each day case that could not go home as planned (6.7).

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. Definitions

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

4. Background

When a patient planned for same-day discharge is admitted, something went wrong in the planning. Reviewing each one shows the cause and stops it happening again.

5. Responsibilities

Role	Responsibility	Competence
Clinical director	Leads the quarterly review	Clinician
Lead nurse	Completes the review for each admission	Nurse

6. Materials and equipment

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

7. Safety

- 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

Step 1. Review.

- Within 7 days, complete the review for each unplanned admission (DAY-REG-002).

Key point: Within 7 days.

Step 2. Find the cause.

- Record the reason: selection, complication, pain, nausea, or other.

Key point: The cause, not the blame.

Step 3. Act.

- Agree an action with an owner and a date, and close it at the next review.

Key point: Learning is an action.

10. Decision points

- No decision points in this procedure.

11. Special situations

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

12. Escalation

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

13. Monitoring

Measure	Target	Frequency	Owner	If not met
Unplanned admissions reviewed within 7 days	100%	Quarterly	Clinical director	Escalate to chief executive
Review actions closed on time	At least 90%	Quarterly	Clinical director	Escalate to chief executive

14. Records

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

15. Training

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

16. Related documents

ID	Title	Use
DAY-REG-002	Unplanned admission review register	Register
DAY-POL-001	Patient selection for same-day surgery	Selection

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. Change history

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

E-learning for this document

- **Incident Reporting, Just Culture and Open Disclosure** (T-09)
- Aftercare & Follow-up: Standards for Safe Discharge (H-06)

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)

Download this document as PDF

Download this document as an editable Word file