Policy · DIA-POL-001 · Version 1.0 · Approved by the ASF Expert Committee

Supports: 26.1

At a glance

- Water for dialysis fluid and dialyser reprocessing meets the documented chemical and microbiological requirements.
- Water is tested on the schedule set in WAT-SOP-001, and each result is recorded (WAT-FRM-001).
- Every result is reviewed, and an out-of-range result stops use until acted on.
- No patient is dialysed on water that has not been tested in date.
- Stop and get help straight away if: patients are dialysed on water that was never tested.

1. Purpose

To make sure the water used for dialysis is tested to a documented standard, and acted on (26.1).

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

The water used to make dialysis fluid goes into the patient’s blood. Impure water can cause serious harm within a single session, so it must be treated and tested to a written standard.

5. Responsibilities

Role	Responsibility	Competence
Dialysis unit lead	Owns the water standard and the test schedule	Clinician or manager
Water technician or nurse	Tests and records each result	Staff

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. Test on schedule.

- Test the water on the schedule, and record each result on WAT-FRM-001.

Key point: Tested.

Step 2. Review.

- Review each result against the requirement.

Key point: Reviewed.

Step 3. Act.

- Stop use of the water on an out-of-range result, and act before use resumes.

Key point: Acted on.

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
Water tests in date and within requirement	100%	Monthly	Dialysis unit lead	Escalate to medical director

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
WAT-FRM-001	Water test record (existing, reused)	Record

17. Evidence

Reference	Note
E-009	
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

- **Dialysis & Renal Replacement Therapy** (AMB-12)

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