Policy · EDP-POL-002 · Version 1.0 · Approved by the ASF Expert Committee

Supports: 7.6

At a glance

- The dispatch system has back-up power, communication and equipment.
- Each back-up is tested on a set schedule, and the test is recorded.
- A failure moves calls to the back-up within the set time.
- The back-up is part of the contingency plan.
- Stop and get help straight away if: the system fails and calls cannot be answered or dispatched on the back-up.

1. Purpose

To keep calls answered when the power, the lines or the system fail (7.6).

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 the power, phone lines or the system fail during a busy shift, calls must still be answered. A back-up that has been tested is the only way to know it will work.

5. Responsibilities

Role	Responsibility	Competence
Operations manager	Owns the back-up and its tests	Management
IT and facilities lead	Tests and maintains the back-up	Technical

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. Have a back-up.

- Keep back-up power, a second communication line and a back-up dispatch system.

Key point: Each failure has a back-up.

Step 2. Test.

- Test each back-up on the schedule and record it (EDP-REG-003).

Key point: A back-up not tested is not a back-up.

Step 3. Switch.

- Switch to the back-up within the set time when a failure happens, and record the switch.

Key point: Switch within the time.

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
Back-ups tested on schedule	100%	Quarterly	IT and facilities lead	Escalate to chief executive
Failures switched to back-up within the set time	100%	Yearly	Operations manager	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
EDP-REG-003	Back-up test log	Log
PTR-SOP-012	Contingency, breakdown, surge and diversion	Contingency

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

- **Emergency Preparedness and Fire Safety** (T-10)
- Emergency Escalation for the Remote Patient (TM-04)

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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