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

Supports: 7.7

At a glance

- Review a sample of calls each month, chosen at random and across shifts.
- Score each call against the protocol and the standard.
- Use the findings to change the protocols and the training.
- Report the findings to the operations meeting.
- Stop and get help straight away if: a review finding has no action, or the sample is not random.

1. Purpose

To find where the protocols and the training fall short, and to improve them (7.7).

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

Reviewing a sample of calls shows where the protocols and the training fall short. The findings are useful only if they change the protocols and the training.

5. Responsibilities

Role	Responsibility	Competence
Quality lead	Runs the review and the report	Clinician or quality lead
Operations manager	Acts on the findings	Management

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. Sample.

- Choose a random sample of calls each month across all shifts.

Key point: Random, not selected.

Step 2. Score.

- Score each call on the review form (EDP-FRM-002).

Key point: Against the standard.

Step 3. Improve.

- Agree a change to the protocol or the training for each finding, with an owner and a date.

Key point: A finding leads to a change.

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
Calls reviewed each month	At least 1% of calls	Monthly	Quality lead	Escalate to chief executive
Findings with an action	100%	Monthly	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-FRM-002	Call review form	Form
EDP-REG-002	Call-taker training and competence register	Register

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)
- **Safety Training Programme & Competency Assessment** (TRAIN-01)

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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