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

Supports: 7.9

At a glance

- A clinician is available to call takers at all hours.
- Call takers use the clinician for cases the protocol does not cover, and for every escalation.
- Each piece of advice is recorded with its outcome.
- The clinician checks the advice is followed up.
- Stop and get help straight away if: a case outside the protocol is handled with no clinician involved, or advice is given with no record.

1. Purpose

To give call takers a clinician when the protocol is not enough (7.9).

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

Call takers face cases the protocol does not cover. A clinician who can be reached at any hour gives them support before a decision is made alone.

5. Responsibilities

Role	Responsibility	Competence
Clinical lead	Runs the clinician rota	Clinician
Clinician on duty	Gives advice and records it	Clinician

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. Call.

- The call taker contacts the clinician on duty for any case outside the protocol or any escalation.

Key point: No case without a clinician.

Step 2. Advise.

- The clinician gives advice and records it on EDP-FRM-003.

Key point: The advice is recorded.

Step 3. Follow up.

- Record the outcome of the advice on the call record.

Key point: The outcome is known.

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
Advice requests answered by a clinician	100%	Monthly	Clinical lead	Escalate to chief executive
Advice with outcome recorded	100%	Monthly	Clinical lead	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-003	Clinical advice and escalation record	Record

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 Escalation for the Remote Patient (TM-04)
- **Medical Emergency Protocol Development** (MED-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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