Procedure · FW-SOP-001 · Version 1.0 · Approved by the ASF Expert Committee

Supports: 30.2

At a glance

- A member returning after injury, surgery or a medical event has documented medical clearance first (FW-FRM-002).
- The programme is built from a functional assessment (FW-FRM-003) and progresses at the pace of readiness.
- Staff are qualified for post-injury programming (FW-REG-001), and oversee or deliver it.
- The programme stops and the member is referred back when warning signs appear (FW-SOP-002).
- Stop and get help straight away if: a member who had knee surgery starts heavy lifting the next week.

1. Purpose

To make sure post-injury return to activity is safe, cleared, assessed, qualified and monitored (30.2 to 30.4).

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

A member who has had surgery or a serious injury must not start hard exercise without their doctor’s clearance. Without it, the exercise can undo the recovery or cause a new injury.

5. Responsibilities

Role	Responsibility	Competence
Fitness service lead	Owns the return-to-activity rule	Clinician or manager
Qualified rehabilitation instructor	Builds and delivers the programme	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. Clear.

- Obtain and record the medical clearance and its restrictions on FW-FRM-002.

Key point: Cleared.

Step 2. Assess and plan.

- Carry out the functional assessment and set the progression on FW-FRM-003.

Key point: Planned.

Step 3. Deliver under qualification.

- Deliver or oversee the programme with a qualified instructor.

Key point: Delivered.

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
Post-injury members with clearance, assessment and qualified oversee	100%	Monthly	Fitness service 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
FW-FRM-002	Medical clearance record	Record
FW-FRM-003	Functional assessment and programme record	Record

17. Evidence

Reference	Note
E-009	Based on the WHO guidance on digital health and data protection, the American College of Sports Medicine Guidelines for Exercise Testing and Prescription (11th ed., 2021), and the American Heart Association guidelines for cardiopulmonary resuscitation and emergency cardiovascular care (2020).
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

- Rehabilitation and Recovery Programs in Fitness and Wellness (FIT-10)

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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