Policy · GOV-POL-002 · Version 1.1 · Approved by the ASF Expert Committee

Supports: 2A.2

At a glance

- Behave with honesty, respect and care for patients and colleagues at all times.
- Report safety concerns, mistakes and harm at once.
- Declare any conflict of interest before it affects a decision.
- Protect patient and staff information.
- Speak up if you see behaviour that breaks this code, and you will be protected from retaliation.
- Stop and get help straight away if: you are asked to act against patient safety or this code. Do not do it. Report it through the speak-up procedure.

1. Purpose

To state the standards of personal and professional conduct expected of everyone who acts for the facility [E-006, EC].

2. Scope

Applies to	All staff, students, volunteers, contractors and governing body members
Locations	Everywhere the person works for the facility, including remote and home visits
When	From the first day of engagement, and throughout
Does not apply to	Clinical standards of practice, which are set by the professional bodies and the clinical policies

3. Definitions

Term	Meaning
Conduct	How a person behaves at work, including in writing and online

Retaliation	Any action taken against a person for raising a concern in good faith

4. Background

Patients and colleagues depend on people behaving reliably and honestly. A code of conduct sets the expectation, makes it clear what happens when it is broken, and protects people who speak up.

The code is the reference for criterion 2A.2 and is adapted from the ASF Policy Framework (Policy 16, Policy 67 and Form F12).

5. Responsibilities

Role	Responsibility	Competence
Every person covered	Read, sign and follow the code; report breaches	Induction
Managers	Model the code; act on concerns; keep records of breaches	Management training
HR lead	Keeps signed acknowledgements; runs the disciplinary process	HR competence
Chief executive	Approves the code and reports breaches to the governing body	Executive leadership

6. Materials and equipment

Item	Requirement	Condition
Signed acknowledgement (FRM-N10)	Signed on engagement and after each change	Complete
Speak-up form (FRM-N04)	Current	Available to all

7. Safety

- Do not share patient information outside the approved record, including on social media.
- Never accept gifts or favours that could influence your work above the limit in the gift policy.

8. Before you start

- Read the code before you start work.
- Sign the acknowledgement before you work alone.

9. Procedure

Step 1. Act with honesty and integrity.

- Tell the truth about your work, including mistakes.
- Do not falsify records, timesheets, certificates or claims.

Key point: Honesty is the basis for safety. A hidden mistake is a larger risk than a reported one.

Step 2. Treat everyone with respect.

- Do not discriminate on any ground, harass, bully or abuse a patient, relative or colleague.
- Use a professional tone in all communication.

Key point: Harm from disrespect is real, even if no one is physically hurt.

Step 3. Report safety concerns at once.

- Report any incident, near miss, unsafe condition or harm through INC-POL-001 on the same shift.
- Do not wait to be sure.

Key point: Reporting is a duty, not a judgment about a colleague.

Step 4. Declare conflicts of interest.

- Complete FRM-N01 on appointment and when a new interest arises.
- Declare before a decision, not after.

Key point: Conflicts that are declared can be managed. Undeclared ones damage trust.

Step 5. Protect information.

- Keep patient information confidential, follow the records and privacy policies, and do not share passwords.
- Report any breach at once through DIG-SOP-001.

Key point: Confidentiality is what allows patients to speak frankly.

Step 6. Speak up when you see a breach.

- Raise the concern with your manager or through the speak-up route (SOP-N21 and FRM-N04).
- Concerns raised in good faith are protected. Retaliation is a breach of this code.

Key point: People stay silent when they think nothing will change or that they will be punished. Both must be untrue here.

10. Decision points

- If the instruction you receive conflicts with patient safety, do not carry it out. Inform the most senior available clinician and record the conflict.

11. Special situations

Situation	Action
Students and volunteers	Briefed on the code at induction; supervisors are responsible for compliance.

12. Escalation

- Breaches are reported to the line manager; serious ones to the HR lead and the chief executive.
- A concern about a senior person goes to the chair of the governing body.

13. Monitoring

Measure	Target	Frequency	Owner	If not met
Signed acknowledgement on file for each person	100%	Each engagement; yearly check	HR lead	Acknowledge within 14 days or stop access
Breaches reported and closed within 30 days	90% (EC)	Quarterly	HR lead	Review by chief executive
Staff who can describe the speak-up route (sample)	80% (EC)	Yearly	Quality lead	Briefing

14. Records

Record	Kept in	Retention
Signed acknowledgement (FRM-N10)	HR file	Duration of employment plus the period set by the facility’s records policy years
Breach records and outcomes	HR file (restricted)	the period set by the facility’s records policy years

15. Training

- Code of conduct is covered at induction for every person (EC).
- Refresher each year and after any change (EC).

16. Related documents

ID	Title	Use
GOV-PLN-001	Strategic Plan	The code is part of the plan
FRM-N10	Policy Acknowledgement and Code of Conduct Declaration	Signed acknowledgement
FRM-N04	Confidential Integrity Report (Speak-Up)	Speak-up form
SOP-N21	Whistleblowing and Speak-Up Procedure	Speak-up route
SOP-N01	Conflict of Interest and Impartiality Policy	Declarations

17. Evidence

Reference	Note
E-006	ASF Policy Framework v1.2.
E-009	ASF Expert Committee consensus.

18. Change history

Version	Date	What changed	Approval

1.0	the date of approval	First version adapted from ASF Policy 16	Approved by the ASF Expert Committee
1.1	the date of approval	Internal quality review: corrected cross-references, status wording and document control	Approved by the ASF Expert Committee

E-learning for this document

- Quality Management in Healthcare (A-02)
- Safety Management System & Leadership (MGMT-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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