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

Supports: 25.2

At a glance

- Each patient is given plain-language information on their care and on how to use the health system.
- Understanding is checked by teach-back, not assumed from silence or a nod (HMG-FRM-002).
- Information is given in the patient's language, through a competent interpreter.
- A patient who has not returned is followed up, and the reason recorded.
- Stop and get help straight away if: a patient does not return because no one explained the follow-up.

1. Purpose

To make sure each patient understands their care and how to move through the health system (25.2).

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 migrant who does not know how the health system works, or how to book a visit, may give up on care. Helping them understand their own care and how to use the system keeps them engaged.

5. Responsibilities

Role	Responsibility	Competence
Clinical lead for migrant health	Owns the information rule	Clinician
Treating clinician and navigator	Gives the information and checks understanding	Clinician or staff

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. Explain in plain language.

- Explain the care and the health system in plain language, in the patient’s language.

Key point: Explained.

Step 2. Check understanding.

- Check understanding by teach-back, and record it (HMG-FRM-002).

Key point: Checked.

Step 3. Follow up.

- Follow up any patient who does not return, and record the reason.

Key point: Followed up.

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
Patients whose understanding is checked by teach-back	90%	Monthly	Clinical lead for migrant health	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
HMG-FRM-002	Understanding check record	Record

17. Evidence

Reference	Note
E-009	Based on the WHO and IOM Global Competency Standards for Refugee and Migrant Health and the WHO mhGAP Intervention Guide (2019).
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

- **Refugee & Migrant Health — Endorsement Course** (H-09)

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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