Policy · HUM-POL-004 · Version 1.0 · Approved by the ASF Expert Committee

Supports: 39.5

At a glance

- Each deployment has a staff security plan before it starts.
- Rotation is scheduled and kept.
- Every staff member can reach psychosocial support.
- Each incident affecting staff is recorded and reviewed (HUM-REG-002).
- Stop and get help straight away if: staff work in a deployment with no security plan.

1. Purpose

To keep staff safe and well during a deployment (39.5).

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

Staff working in emergencies face danger, stress and exhaustion. A security plan, rotation and psychosocial support keep them safe enough to keep working, and keep the service running.

5. Responsibilities

Role	Responsibility	Competence
Deployment lead	Owns the security plan and the rota	Operations director
Staff welfare focal point	Arranges psychosocial support and checks wellbeing	Deployment lead

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. Plan security.

- Write the security plan before the deployment starts.

Key point: Planned.

Step 2. Rotate.

- Keep to the rotation schedule and record any change.

Key point: Rotated.

Step 3. Review incidents.

- Record each staff incident and review it (HUM-REG-002).

Key point: Reviewed.

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
Deployments with a security plan before start	100%	Quarterly	Deployment lead	Escalate to the operations 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
HUM-REG-002	Staff incident register	Register

17. Evidence

Reference	Note
E-009	Based on the Sphere Handbook (2018) minimum standards, the IASC Six Core Principles relating to sexual exploitation and abuse (2019), and the WHO Global Patient Safety Action Plan 2021–2030.
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 Preparedness and Fire Safety** (T-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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