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

Supports: 13.2

At a glance

- Each deployment has a defined list of the equipment, medicines and emergency items for the services offered.
- The list is checked before the vehicle leaves (MOB-FRM-002).
- Medicines are carried and stored as the medicines rules require (PTR-REG-002).
- A missing item stops the service it supports, or the service is changed.
- Stop and get help straight away if: a deployment leaves without its emergency items, or a service runs without the item it needs.

1. Purpose

To make sure the unit carries what it needs for the services it offers, away from a hospital (13.2).

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 mobile unit away from a hospital has no second chance. The equipment, medicines and emergency drugs it needs must be on board, checked before each deployment.

5. Responsibilities

Role	Responsibility	Competence
Outreach lead	Owns the list for each service	Clinician
Driver or team member	Checks the vehicle against the list	Driver

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. Set the list.

- Define the equipment and medicines list for each service offered.

Key point: A list for each service.

Step 2. Check before leaving.

- Check the vehicle against the list on MOB-FRM-002 before departure.

Key point: Before departure.

Step 3. Record the gap.

- Record any missing item and the action taken.

Key point: Gap recorded.

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 that left with a complete list	100%	Each deployment	Outreach lead	Escalate to clinical 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
MOB-FRM-002	Deployment equipment and medicines check	Record
PTR-REG-002	Vehicle maintenance, equipment and medicines check register (existing, reused)	Register

17. Evidence

Reference	Note
E-009	Based on WHO classification and minimum standards for emergency medical teams (2013).
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 Medical Equipment & AED Readiness (MED-02)
- **Vehicle & Equipment Readiness for ASF Accreditation** (MT-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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