Standard operating procedure (SOP) · OHS-SOP-001 · Version 1.0 · Approved by the ASF Expert Committee

Supports: 14.3

At a glance

- Each hazard that needs surveillance is listed, with its interval (noise, chemicals, manual handling and others).
- Each exposed worker is on the surveillance schedule (OHS-REG-002).
- Results are recorded at each interval, and an abnormal result is reviewed within the set time.
- A worker who leaves the hazard keeps the record.
- Stop and get help straight away if: an exposed worker is off the schedule, or an abnormal surveillance result is not reviewed.

1. Purpose

To catch slow harm from workplace hazards at set intervals, before symptoms (14.3).

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

Workers exposed to noise, chemicals or dust can be harmed slowly, without symptoms at first. Health checks on a schedule find the harm early, while it can still be stopped.

5. Responsibilities

Role	Responsibility	Competence
Occupational physician	Owns the schedule and the hazard list	Clinician
Occupational health nurse	Runs the surveillance and records results	Nurse

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. List the hazards.

- Name each hazard and its surveillance interval.

Key point: Each hazard, each interval.

Step 2. Enrol each worker.

- Put each exposed worker on the schedule in OHS-REG-002.

Key point: Every exposed worker.

Step 3. Review.

- Review each abnormal result within the set time and act on it.

Key point: Abnormal reviewed in time.

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
Exposed workers on schedule	100%	Quarterly	Occupational physician	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
OHS-REG-002	Health surveillance register	Register

17. Evidence

Reference	Note
E-009	Based on ILO Convention No. 161 concerning Occupational Health Services (1985) and the WHO Healthy Workplaces framework (2010).
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

- Staff Health Screening & Wellness Standards (STAFF-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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