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

Supports: 44.5

At a glance

- The service names who is responsible for access information.
- Each change to the site, entrance, hours or services triggers an update (WAY-REG-003).
- Public information is checked against the site after each change.
- The responsible person signs off each update.
- Stop and get help straight away if: a change to the entrance, hours or services is made and public information is not updated.

1. Purpose

To keep access information correct through every change to the site or the service (44.5).

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

Access information changes when a building is altered, a door is moved or a route is closed. Someone must be responsible for keeping it current, or the information becomes wrong.

5. Responsibilities

Role	Responsibility	Competence
Service director	Names the responsible person and approves the policy	Board or governing body
Responsible access lead	Triggers, makes and signs off each update	Service director

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. Name.

- Name the responsible access lead and publish the name internally.

Key point: Named.

Step 2. Trigger.

- Trigger an update for each change to the site, entrance, hours or services (WAY-REG-003).

Key point: Triggered.

Step 3. Verify.

- Check the public information against the site after each change and sign off.

Key point: Verified.

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
Changes with public information updated within the defined time	100%	Quarterly	Responsible access lead	Escalate to the service 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
WAY-REG-003	Access information change log	Register

17. Evidence

Reference	Note
E-009	Based on the WHO Global Patient Safety Action Plan 2021–2030 for communication and patient access, the WHO Emergency Care Systems framework for emergency access, and the ASF Hospital standard for facility access.
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

- Access & Arrival: Getting Patients Through the Door (H-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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