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

Supports: 44.2

At a glance

- The emergency entrance is marked from the road and inside the site.
- The entrance is open whenever emergency patients may arrive (WAY-REG-001).
- The ambulance bay is kept clear at all times.
- Any obstruction is cleared at once and recorded.
- Stop and get help straight away if: the emergency entrance is closed or obstructed while emergency patients may arrive.

1. Purpose

To make sure an emergency patient can always find and reach the emergency entrance (44.2).

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

In an emergency the patient must find the entrance at once. A marked, lit and open emergency entrance is part of the emergency plan.

5. Responsibilities

Role	Responsibility	Competence
Facilities manager	Owns the marking and the access standard	Service director
Security and reception staff	Keep the entrance open and clear and record checks	Facilities manager

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. Mark.

- Keep the emergency entrance marked from the road and inside the site.

Key point: Marked.

Step 2. Open.

- Keep the entrance open at all times emergency patients may arrive (WAY-REG-001).

Key point: Open.

Step 3. Clear.

- Keep the ambulance bay clear and clear any obstruction at once.

Key point: Cleared.

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
Checks showing the entrance open and clear	100%	Weekly	Facilities manager	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-001	Emergency entrance open-hours and clear-access check register	Register
ACS-POL-001	Environment and accessibility for safe movement (existing)	Policy

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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