Standard operating procedure (SOP) · WAY-SOP-003 · Version 1.0 · Approved by the ASF Expert Committee

Supports: 44.4

At a glance

- The route to each key service is marked on the site.
- Each route is tested with real users at the defined interval (WAY-REG-002).
- Each building change triggers a new route test.
- Problems found in testing are fixed and retested.
- Stop and get help straight away if: a key route is never tested with patients or users.

1. Purpose

To make sure the route to each key service works for the people who use it, not only for staff (44.4).

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 patient who gets lost on the way to a service may miss their appointment or arrive late. Routes marked and tested with real people show where the problems are.

5. Responsibilities

Role	Responsibility	Competence
Facilities manager	Owns the route marking and the test schedule	Service director
Patient experience lead	Runs the user tests with patients and records them	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.

- Mark each key route on the site.

Key point: Marked.

Step 2. Test.

- Test each route with real users at the defined interval and record the result (WAY-REG-002).

Key point: Tested.

Step 3. Fix and retest.

- Fix any problem found and retest the route.

Key point: Retested.

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
Key routes tested at the defined interval	100%	Quarterly	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-002	Route test register	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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