# QUALITY POLICY

**The Department of Haematology / Blood Transfusion, Clyde Sector, NHS Greater Glasgow & Clyde, is committed to the provision of a comprehensive Clinical & Analytical Service of the highest quality. With this aim, the Department shall:**

* Operate a Quality Management System to integrate the organisation, its staff, procedures, processes and resources.
* Set and review quality objectives and plans in order to implement this Quality Policy, and to assure continual quality improvement of the service.
* Annually, as a minimum, review the suitability and effectiveness of this Quality Policy.
* Ensure that Departmental personnel are familiar with the Quality Manual, this Quality Policy, and related procedures and processes relevant to their work.
* Commit to the health, safety and welfare of all staff and visitors to the Department, in compliance with NHSGGC and National Legislation.
* Commit to NHSGGC and National Legislation relating to the environment.
* Uphold professional values and be committed to good professional practice and conduct.

The Department is committed to maintaining compliance with quality and competence standards, as set principally by UKAS (ISO: 15189 and associated standards), MHRA, Good Laboratory Practice, and including all other relevant quality standards. With this aim, the Department shall operate and regularly review systems for:

* Staff recruitment, training, development and retention, at all levels, to assure good professional practice, and the provision of a full and effective service to users of the service.
* The procurement and maintenance of equipment and other resources as required for the provision of the service.
* The collection, transport and handling of laboratory specimens in such a way as to ensure the correct performance of laboratory examination procedures.
* Validation, verification and review of examination procedures to assure the highest achievable quality of all tests performed.
* The reporting of results of examinations in ways which are timely, confidential, accurate and clinically useful, and that meet with the requirements of service users.
* The assessment of user satisfaction and the implementation of systems for internal audit and quality assessment (internal Quality Control, and external Quality Assurance) to benchmark and improve service quality.

**Signed on behalf of the Department**

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| **Signed** | **Dr Arshi Yasmin**  **(Laboratory Director)** |
| **Date** | **23.04.24** |