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DEPARTMENTAL QUALITY POLICY

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Quality policy of the Department of Haematology, North Glasgow Sector NHS GG&C

The Department of Haematology, North Glasgow Sector NHS GG&C, is committed to providing a comprehensive Clinical & Analytical Service including:

Authorised By

- Blood transfusion services at Glasgow Royal Infirmary and Gartnavel General Hospital
- Haematology and Coagulation services on all sites (except West Glasgow ACH) with a rapid results service for both provided from Stobhill ACH and FBC's only from West Glasgow ACH.
- Immuno-Phenotyping in Haemato-oncology at Gartnavel General Hospital
- Haemopoetic Stem Cell Processing (under SLA with National Services Scotland) from Haemato-oncology at Gartnavel General Hospital
- Specialist Haemostasis investigations at Glasgow Royal Infirmary.
- Haemoglobinopathy screening at Glasgow Royal Infirmary.
- In addition the department supports out-reach anti-coagulant services.

The service provided on all sites shall be of the highest quality and shall be aware and take into consideration the needs and requirements of its users.

In order to ensure that the needs and requirements of users are met, the Department will:

- Operate a quality management system to integrate the organisation, procedures, processes and resources.
- Set quality objectives and plans in order to implement this Quality Policy.
- Ensure that all personnel are familiar with this Quality Policy and the Quality Manual to ensure user satisfaction.
- Commit to the health, safety and welfare of its staff. Visitors to the department will be treated with respect and due consideration will be given to their safety while on site.
- Commit to comply with relevant environmental legislation and practice.
- Uphold professional values and be committed to good professional practice and conduct.

The Department will comply with standards set by relevant regulatory and accreditation bodies authorities and is committed to:

- Staff recruitment, training, development, CPD and retention at all levels to provide a full and effective service to its users.
- The proper procurement and maintenance of equipment and other resources that are needed for the provision of the service.
- The collection, transport and handling of all specimens in such a way as to ensure the correct performance of laboratory examinations.
- The use of examination procedures that will ensure the highest achievable quality of all tests performed.
- Participation in relevant proficiency testing and inter laboratory comparisons that are available.
- Reporting results of examinations in ways which are timely, confidential, accurate and clinically useful.
- The assessment of user satisfaction, in addition to internal audit and external quality assessment, in order to produce continual quality improvement.

	Signed on be	half of the De	elartment	
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Date	10	04.202		

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