Quality Policy

Our Aim: To provide a high quality Pathology service including Cellular Pathology Services, Clinical Biochemistry, Haematology & Blood Transfusion and Microbiology that meets the expectations agreed with its users, and conforms to the standard and regulations of BS EN ISO 15189:2022 and other relevant legislation and regulatory bodies.

This will be achieved by:

- Operating a high quality service that takes account of and meets the needs and requirements of users.
- Setting measurable quality objectives and plans in order to implement this quality policy in conjunction with its users.
- Ensuring that the integrity of the management system is maintained when changes to the management system are planned and implemented.
- Providing quality indicators to evaluate performance throughout key aspects of pre-examination, examination, and post-examination processes and monitor performance in relation to objectives
- Ensuring that all Pathology personnel understand the needs of users and are familiar with the contents of the Quality Manual, including this policy, and all procedures relevant to their work.
- Provision of a quality management system that integrates the processes required for the conduct of its examinations, documents these processes and keeps records that provide evidence of the proper conduct of its activities, while also being committed to achieving continual quality improvement.
- Providing adequate resources for the provision of this service including the health, safety, respect and welfare of all staff, visitors and patients including compliance with relevant environmental legislation.
- Upholding professional values in accordance with Trust Policies and relevant Professional regulations and be committed to good professional practice and conduct.

The Pathology Directorate will undergo UKAS accreditation comply with the standards of BS EN ISO 15189:2022 the requirements of the Blood Safety and Quality Regulations 2005, (BSQR 2005, as amended), and Human Tissue Authority (Human Tissue Act 2004). In doing so it is committed to:

- Recruitment, training, development and retention of staff at all levels in a manner that ensures that they are competent to perform the tasks they are contracted to do.
- Procurement and management of all external services, equipment and consumables in a manner that ensures the quality of its examination results.
- Handling of all patient samples is a way that ensures the correct performance of laboratory investigations.
- Provide examination procedures that fulfil their intended use and ensure the highest achievable quality of all examinations performed
- Reporting of results of examinations in ways that ensure the timeliness, accuracy and clinical usefulness while at all times maintaining confidentiality
- Reviewing the Quality Policy for suitability and effectiveness at the annual management review.

Dr Sherin Jos Payyappilly
Consultant Clinical Scientist & Pathology Clinical Director