

The Quality Policy of the Department of Pathology County Durham and Darlington Foundation Trust

The scope of the service of the Pathology Department is to provide a high quality, comprehensive laboratory diagnostic service, encompassing the main disciplines of Clinical Biochemistry, Haematology including Blood Transfusion, Immunology, Microbiology, Cellular Pathology (including Histology, Cytology and Mortuary) and to develop and provide management of selected point of care testing.

The Pathology Department will ensure a drive for equity of service for patients across County Durham and Darlington. Operating under a common, clinically led and patient focused quality framework, aligned to ISO 15189, the department will adopt the following principles:

- Providing a service of the highest quality ensuring that the needs of patients and service users are met and compliance is achieved with relevant regulatory bodies such as UKAS, MHRA, HTA, HSE and SQAS.
- Good professional practice & conduct ensuring the prioritisation of health, safety & welfare of all staff, patients and visitors to the laboratory
- Compliance with relevant environmental legislation and continuing compliance with the Quality Standards written or assessed by the United Kingdom Accreditation Scheme ISO15189:2022 (UKAS), The Human Tissue Authority (HTA), MHRA and Screening Quality Assurance Service (SQAS) and National Standards governed by the Department of Health.
- Effective communication throughout the department, care group, Trust and external organisations
- The assessment of user satisfaction and the use of internal audit and external quality assessment, in order to support continual quality improvement.
- Effective staff recruitment, training, development and retention at all levels.
- Provision of an effective service utilising suitable procurement and maintenance of equipment and other resources as needed for the provision of the service.
- Achieving continuous improvement of all processes involved in the provision of a quality laboratory service, from collection, transport and handling of laboratory specimens, through examination and the reporting of timely, confidential, accurate and clinically useful results

The Pathology Department identifies that the purpose of the Management System is to integrate the organisation, procedures; processes and resources needed to fulfil the Quality Policy and meet the needs and requirements of the users and this will be defined within the Quality Manual.

In order to ensure that quality is assured, the Pathology Department Management will:

- Operate a management system to integrate the organisation, procedures, processes and resources
- Assess performance through key performance indicators, quality indicators, audit, internal and external assessment (assessment and regulatory bodies mentioned above).
- Ensure that managerial meetings provide assurance to Care Group on the delivery of relevant clinical and business matters in relation to the Department.
- Set quality objectives and plans in order to implement this quality policy
- Ensure that all personnel are familiar with this quality policy, the quality manual and all procedures relevant to their work
- Ensure that this policy is communicated, understood, available and appropriately implemented throughout the laboratory and is consistent with policies within the wider Trust
- Ensure this policy is annually reviewed for suitability and effectiveness at the Annual Management Review
- Ensure that this policy is signed and issued by individuals with appropriate authority

Signed on behalf of the Directorate of Pathology

Dr Paul Barrett
15/02/2024

_____Date 15/2/2024_____

Mrs Rebecca Sedman

Date

| *Clinical Director*

— *Quality Manager*