**East Suffolk & North Essex NHS Foundation Trust (ESNEFT) Pathology Quality Policy**

East Suffolk and North Essex NHS Foundation Trust (ESNEFT) is the legal entity for Pathology Services at Colchester and Ipswich Hospitals. The commitment of the organisation is as follows in the following disciplines:

* Biochemistry, Cellular Pathology, Mortuary, Haematology, Immunology, Blood Transfusion, Point of Care Testing, LAMP, Microbiology & Molecular Departments
* It is the policy of ESNEFT to perform all its work to the highest possible level of quality and compliance. ISO 15189, MHRA and HTA are the minimum foundations upon which the standards of work are based.
* This policy statement reinforces to both our customers and staff, the commitment that management of ESNEFT has to high standards of quality compliance and service.

**User needs and requirements**

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

* Operate a quality management system that integrates the processes required to conduct its examinations and to facilitate the continual improvement of the service.
* Ensure that this policy is communicated & understood by all members of staff.
* Monitor compliance with these documented policies and procedures. Set & review quality objectives and plans in order to implement this quality policy.
* Ensure that all personnel are familiar with this quality policy to ensure user satisfaction.
* Commit to the health, safety and welfare of its entire 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.
* Uphold professional values and be committed to good professional practice and conduct.
* Comply with Caldicott Guardian, Freedom of Information Act, Clinical Governance, Quality Care Commission, NHS Litigation Authority and General Data Protection Regulation (GDPR).

**Complying with standards**

ESNEFT will comply with standards set by ISO 15189 and the UK’s Blood safety and quality regulations and EU Guidance on Good Manufacturing Practice. There is commitment to:

* Staff recruitment, training, development, competency and retention at all levels to provide a full and effective service to its users.
* Appropriate procurement and maintenance of such facilities, equipment and other resources as are needed for the provision of the service.
* The collection, transport and handling of all specimens in a compliant way so as to ensure the correct performance of laboratory examinations.
* Ensuring all data held on electronic or manual systems is secure, accurate, complete, relevant and allows interpretation for clinical or managerial purposes.
* The use of examination procedures that will ensure the highest achievable quality of all tests performed.
* Reporting results of examinations in ways, which are timely, confidential, accurate and clinically useful.
* Periodic review of the Quality Policy and Management System at least yearly.
* The assessment of user satisfaction, internal and external quality assessment and staff suggestion evaluation in order to produce continual quality improvement.

This policy will be reviewed as part of the ESNEFT Pathology management review meetings to ensure its continued suitability and effectiveness in the continual improvement process. There is one quality policy across pathology, which can be found on Q-Pulse – see document PATH-ALL-GP-2.

Signed on behalf of East Suffolk and North Essex NHS Foundation Trust by:

  

Alison Power– Dr Catherine Street – Sarah Stalley –

Director of Operations Consultant Clinical Scientist Head of Operations

ESNEFT Clinical Director for Pathology Pathology