



The Mater Misericordiae University Hospital Pathology Laboratory Quality Policy

The Pathology Department is committed to implementing the Hospital Mission Statement and specifically to providing a high quality, efficient, cost effective and comprehensive pathology service to its users. A service is provided to Mater Misericordiae University Hospital clinicians, other hospitals and General Practice's in the area. The Pathology Department is committed to providing high quality standards with regards to all aspects of the clinical laboratory service to ensure a high standard of patient care.

- **Blood Transfusion** provides a routine and emergency blood grouping and compatibility testing service for surgical and medical patients and provides a stock of manufactured blood products. It includes haemovigilance and traceability functions.
- **Clinical Chemistry and Diagnostic Endocrinology** provides a routine, point of care and emergency service in clinical chemistry and immunodiagnosics and involves the investigation & monitoring of endocrine, bone & reproductive disorders.
- **Haematology** provides a routine, point of care and emergency service in haematology and investigates haematological abnormalities. The department also provides a routine and specialised coagulation service.
- **Histopathology / Cytopathology** provides a diagnostic histopathology and cytopathology service (excluding cervical cytology). The service includes BreastCheck and the Symptomatic Breast Service and the other cancer specialties.
- **Immunology** provides a diagnostic service for the investigation of disorders affecting the immune system, including a multiple myeloma service, autoimmunity and rheumatic diseases testing, HIV monitoring, allergy investigations and immunochemistry.
- **Microbiology** provides a routine and emergency diagnostic service in the investigation of bacterial, fungal and parasitic infection. It also contributes to disease surveillance and infection prevention and control.

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

- Develop and maintain a Quality Management System, that integrates the processes required for the conduct of examinations and which sets and regularly reviews quality objectives, and implements a continuous quality improvement programme.
- Ensure all staff are familiar with the contents of the quality manual and all procedures relevant to their work.
- Aim to be a centre of excellence, committed to best professional practice and conduct, including the safeguarding of patient information, the quality of examinations and compliance with the Quality Management System.
- Ensure the health, safety and welfare of all staff and visitors to the laboratory.
- Ensure compliance with all relevant environmental legislation.
- Ensure continuing compliance as set by ISO 15189:2012, AML-BB, INAB regulations, relevant EU Directives and Irish Legislation - Statutory Instruments S.I. 360 of 2005, S.I. 547 of 2006, and S.I. 562 of 2006.
- Ensure the Quality Policy is communicated, understood and implemented throughout the laboratory and is reviewed for suitability and effectiveness at annual management review.

The Pathology Laboratory Management Team is committed to;

- Staff recruitment, induction, and motivation
- Maintenance of competent, well-trained staff through internal and external education, training, and development opportunities
- Proper procurement and management of equipment, external services and supplies to ensure quality of examination results
- Adherence to appropriate technical /professional standards or guideline, performing examinations that are fit for intended use
- Ensuring staff implement all policies and procedures relevant to their work, to ensure correct performance of examinations
- Reporting of results of examinations to ensure their timeliness, accuracy, clinical usefulness and confidentiality
- Monitoring performance through data review, audit, equipment maintenance and quality control programmes

Management and staff are committed to creating a quality culture within the Pathology Department, by continuously evaluating and improving the services provided, based on the results of internal quality audits and the assessment of user's and patients' needs and requirements.


Dr. Peter O'Gorman, MB FRCP FRCPATH PhD
Consultant Haematologist Mater University Hospital
Director MBE (Life) Career
www.materinstitute.com
SICR Number 14420

Signed: _____ Pathology Laboratory Director

Date: 25/11/2015