

QM 2.0 Quality Policy

2.1 Midland Fertility Services - Building futures, transforming lives.

2.2 This aspirational mission is delivered by compliance with our four tier quality management system prepared to satisfy - BS EN ISO 9002:1994, and subsequently developed to meet the requirement of BS EN ISO 9001:2000 and more recently BS EN ISO 9001:2008; the Human Fertilisation and Embryology Act 1990 as amended 2008, the Code of Practice (current edition) published by the Human Fertilisation and Embryology Authority and all associated documents; the Health and Social Care Act 2008 (Regulated Activities) Regulations 2010 and the Care Quality Commission (Registration) Regulations 2009; and Clinical Pathology Accreditation (UK) Ltd. accreditation standards. This system is mandatory for all personnel within the organisation.

2.3 We believe our clients should be confident in the knowledge that they will receive a consistent and continually improving quality of service. That they too have the opportunity to feed directly into the process of improving service provision through our customer satisfaction strategy (this includes the complaint's procedure).

2.4 Personnel working within the organisation as an integral part of their training (either introductory/continuing) shall be made aware of the organisation's quality policy and the workings of its quality system.

2.5 This Quality Policy shall be reviewed for ongoing suitability and compliance as part of the annual management review process. Where appropriate changes shall be identified and the policy shall be passed back to the Board for ratification.

2.6 The Board shall be responsible for setting the strategic direction of MFS. Annual strategic **quality objectives** shall be set and communicated to all staff at a unit training day and made available electronically with the quality documentation. The Board will identify the objectives, their resource requirements, a plan for achievement and responsibilities for such. These objectives shall have regard for continual improvement in service delivery and outcome. They are likely to reflect in whole or part the following ethos and long term strategic aims of Midland Fertility Services and include key performance indicators:

- Quality - to continually improve the delivery of our service. To implement a customer satisfaction strategy to allow customers to feedback into the improvement loop.
- Success rates - to maximise the opportunity of a successful outcome for all patients.
- Service development - to continually review the scope of service delivery
- Licensing obligations - to at all times comply with our licensing requirements under the Human Fertilisation and Embryology Act 1990, and to adhere to the CQC - essential standards of quality and safety.
- Financial - to effectively manage the profit and loss account, balance sheet and cash flow to ensure the continuation and growth of the business.
- Human Resource Management - to promote best practice HR. To offer training and continual professional development to all staff.
- Risk management - to maintain an effective risk management system that allows for the identification of adverse incidents and near misses in a blame free environment and promotes the use of these to feed into the quality management and clinical governance systems allowing for continual improvement. To utilise this system to identify, manage and plan for any events that may impact on business continuity.
- Business generation - to maintain our presence as a market leader and to ensure that all potential customers are aware of the service we provide and can access the information they need to make an informed choice.
- Ethical - to maintain our reputation as a responsible, open access unit.
- Environmental - to manage, minimise and where possible reduce the impact of the organisations business on the environment.

QM 2.0 Quality Policy

2.7 Progress towards annual quality objectives shall be reviewed as appropriate as an agenda item at Board meetings and fed back to staff at unit training days. Statutory reporting obligations are complied with ie; financial, HFEA data requisition. MFS publishes an annual report in which statistics, achievements and other information are conveyed to third parties.

2.8 The Board shall have regard to resource requirements for service delivery and achievement of quality objectives. Such resources shall include:

- Human Resources - managed through the employee handbook, induction and training policy. The need for additional human resources shall be identified at a departmental level with managers responsible for ensuring that there are adequate staffing levels to provide a safe and efficient service.
- Infrastructure - managed and identified at Board and/or Departmental level as appropriate.
Buildings/workspace and utilities - responsibility of the Board. Facilities manager will maintain as requested by departmental managers.
- Process equipment - responsibility of departmental managers, all products used should be fit for purpose and CE marked where appropriate. Requests for equipment should be passed to the appropriate Director and where necessary Board approval sought. Supporting services - responsibility for the maintenance of telephone and fax services is the primary responsibility of the office manager. Responsibility for the maintenance of the computer network and internet access is the primary responsibility of the third party IT support providers. Requests for equipment should be passed to the appropriate Director and where necessary Board approval sought. Line managers are responsible as appropriate for ensuring all resources are used in compliance with the requirements of this quality management system, any manufacturers kit inserts, maintenance programmes are identified and followed and that internal and external quality control is performed and within normal limits.
- Work environment - departmental managers shall ensure that they identify any needs to maintain an environment that enables service delivery.

2.9 Responsibilities and authorities are defined within the detailed job description for each role within the organisation (*ref figure1 (page 2): Organisation Chart*). In some instances, as deemed appropriate by the author, individual / collective responsibility for a particular process will be identified in the quality procedure / work instruction. Responsibility / authority for departmental work instructions is determined by the work instruction pre-cursor (A - admin, C - clinical, L - laboratory, MFS - generic, BC - business continuity, M - maintenance) and the author.

2.10 Figure 2 demonstrates the contribution of the above elements to service realisation as required by BS EN ISO 9001:2008, section 7, supported by the third tier of the quality management system "work instructions" and evidenced by the fourth tier "forms". (7.4 Purchasing and 7.6 Control of monitoring and measuring devices - are detailed in Quality Procedures).

