

Noguchi Memorial Institute for Medical Research Institutional Policy

Number : Mgt-035-1.0

Title : Institutional Quality Policy

Department : All Departments

This policy supersedes: None or older versions Draft, Photocopied, and Obsolete versions of this document are not to be used.

EFFECTIVE: 14th June 2024

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Mgt-035-1.0 Institutional Quality Policy

1. Introduction

The Noguchi Memorial Institute for Medical Research, University of Ghana (NMIMR, UG)

quality policy formally describes IMC intentions and direction as related to quality. The policy

is management commitment to the establishment, implementation and maintenance of quality

in all processes and activities of the Institute.

2. Definitions

Quality management system: Set of interrelated or interacting elements of an organization to

establish policies and objectives and processes to achieve those objectives

Process: set of interrelated or interacting activities that use inputs to deliver intended result

Staff: anyone who has official business in the Institute for any period of time

3. Purpose

This policy covers:

a. quality management systems requirement and activities implemented in all

departments/units of the Institute.

b. the requirement of the current versions of ISO 15189 (Minimum requirement for quality

and competence: Medical Laboratories), ISO 9001 (Quality Management Systems) and

ISO 17025 (testing and calibration laboratories)

4. Roles and Responsibilities

4.1 Institute Management Committee (IMC):

The IMC shall provide resources and policy direction and ensure implementation of the quality

objectives at all levels of the Institute.

4.2 Institutional Quality Office (IQO):

The Institutional Quality Office shall implement the implementation of the quality policy at all

levels of the Institute.

4.3 Staff:

Staff: shall adhere to the quality policy.

5. Quality Policy

The Institute is committed to providing service of the highest quality and shall take into consideration the needs and requirements of its users. To ensure that the needs and requirements of users are met, the Institute shall:

- a. Operate a Quality Management System to the International Standard Organization requirements (ISO 15189:2022, ISO 9001:2015 and ISO 17025:2017) within the organizational procedures, processes, and resources.
- b. Set quality objectives and develop plans to implement the Quality Policy.
- c. Ensure that staff are familiar with this Quality Policy to ensure user satisfaction.
- d. Ensure that staff are familiar with the contents of the Quality Binder and all procedures relevant to their work.
- e. Commit to the health, safety, and welfare of its staff.
- f. Ensure that visitors to the Institute are treated with respect and due consideration given to their safety while on site.
- g. Uphold professional Code of Ethics.
- h. Advise and implement, where applicable, all current legislation relating to the Health and Safety of staff and visitors.
- i. Comply with all relevant environmental legislation.
- i. Conform to confidentiality and ethical code of conduct of the University of Ghana
- k. Ensure continual quality improvement.
- 1. Ensure continuous review of the quality policy for suitability.

The Institute shall comply with the requirements of ISO 15189:2022, ISO 9001:2015, and ISO 17025 standards for the scope of its practices as well as complying with the policies and procedures of the Ministry of Education and the University of Ghana, and is committed to:

- a. Staff recruitment, training, development, and retention at all levels to provide a full and effective service to its users.
- b. The proper procurement and maintenance of the equipment and other resources needed for the provision of the service.
- c. The collection, transport and handling of all specimens to ensure the correct performance of laboratory examinations.
- d. The use of analytical procedures to ensure the quality of all tests performed.
- e. Reporting results which are timely, confidential, and accurate.

f. The assessment of user satisfaction, internal audit, external quality, benchmarking, identification, and reduce non-conformities to produce continual quality improvement.

6. Attachments

a. n/a

7. Related documents

Policy Name
1. Scientific misconduct
2. Equipment management policy
3. Quality management policy
4. Personnel management policy
5. Information security
6. SOP on training
7. Communication policy
8. Risk management policy
9. Whistleblower policy
10. Transport policy
11. Research Ethics Policy
Process Name
1. Continual improvement process
Audit process
Complaints process
2. Equipment management process
 Equipment preventive maintenance process
Equipment corrective maintenance process
3. Document management process
 Document control process
4. Personnel management process
Staff training
Customer satisfaction process
5. Specimen management process
6. Service agreement process

8. References

• n/a

9. Approval Page

Approved by Director

Name: Prof. Dorothy Yeboah-Manu

Signature: Date: 10th June 2024

10. Policy Revision History

Policy #: Mgt-035-1.0

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Revised: