



BIOGENIX

POLICY PROCEDURE FOR GENERAL COMMUNICATION

NAME		DESIGNATION	SIGNATURE	DATE
Prepared by	MS. PREETY RAHEJA	QUALITY MANAGER		30/06/2020
Reviewed by	DR. JULIET TEDDY	DEPUTY DIRECTOR		01/07/2020
Approved by	DR. SALLY ABDULLA IBRAHIM	LABORATORY DIRECTOR		01/07/2020



POLICY PROCEDURE FOR GENERAL COMMUNICATION

Document Control: BG/PP/GEN/002

BIOGENIX

VERSION: 1.0

DATE OF EFFECTIVITY: 01/07/2020

PAGE 2 OF 9

NEXT REVIEW DATE: 30/06/2022

1. TABLE OF CONTENT

1. TABLE OF CONTENT	2
2. REVISION HISTORY	3
3. REVIEW HISTORY	4
4. POLICY STATEMENT	5
5. PURPOSE	5
6. SCOPE	5
7. DEFINITIONS	5
8. ACRONYMS	6
9. RESPONSIBILITIES	6
10. PROCEDURE	6
11. CROSS REFERENCE	9
12. RELEVANT DOCUMENTS & RECORDS	9





POLICY PROCEDURE FOR GENERAL COMMUNICATION

Document Control: BG/PP/GEN/002

BIOGENIX

VERSION: 1.0

DATE OF EFFECTIVITY: 01/07/2020

PAGE 3 OF 9

NEXT REVIEW DATE: 30/06/2022

2. REVISION HISTORY

#	Version	Date	Changes Made by	Reason for Changes	Clause Changed
1	1.0				





POLICY PROCEDURE FOR GENERAL COMMUNICATION

Document Control: BG/PP/GEN/002

BIOGENIX

VERSION: 1.0

DATE OF EFFECTIVITY: 01/07/2020

PAGE 4 OF 9

NEXT REVIEW DATE: 30/06/2022

3. REVIEW HISTORY

#	Version	Date	Changes Made by	Reason for Changes	Clause Changed
1	1.0				





POLICY PROCEDURE FOR GENERAL COMMUNICATION

Document Control: BG/PP/GEN/002

BIOGENIX

VERSION: 1.0

DATE OF EFFECTIVITY: 01/07/2020

PAGE 5 OF 9

NEXT REVIEW DATE: 30/06/2022

4. POLICY STATEMENT

Effective communication at any point helps the staff and other stakeholders to understand the BIOGENIX's mission, values, objectives, developments and issues.

5. PURPOSE

The purpose of this procedure is to exchange information between various departments of BIOGENIX Laboratory and also with the stake holders to maintain good internal and external communication.

All communications activities are:

- 5.1. accessible to all in line with the laboratory commitment to equality legislation, including the provision of material in alternative formats and languages on request;
- 5.2. Reflect a commitment to using plain English;
- 5.3. open and honest;
- 5.4. relevant, accurate, sensitive and timely;
- 5.5. Enable meaningful engagement with stakeholders;
- 5.6. Recognize the importance and value of engaging with service users, patients, clients and staff;
- 5.7. Ensure that the laboratory listens to stakeholders, acts on information received when appropriate and provides feedback;

This procedure is as per clause no 4.1.2.6 of ISO 15189:2012 Medical Laboratories – Requirement for Quality and Competence

6. SCOPE

- 5.1. The principles are aimed at reducing the risk to both the patient and the organization as far as is practicably possible, optimizing the quality of patient care and safety by improving the methods used during handover to all staff.
- 5.2. Target Audience: All BIOGENIX staff

7. DEFINITIONS





POLICY PROCEDURE FOR GENERAL COMMUNICATION

Document Control: BG/PP/GEN/002

BIOGENIX

VERSION: 1.0

DATE OF EFFECTIVITY: 01/07/2020

PAGE 6 OF 9

NEXT REVIEW DATE: 30/06/2022

- 7.1. **Internal Communication:** is the transmission of information between organizational members or parts of the organization. It takes place across all levels and organizational units of an organization.
- 7.2. **External Communication:** is the transmission of information between a business and another person or entity in the company's external environment. Examples of these people and entities include customers, potential customers, suppliers, investors, shareholders, and society at large.
- 7.3. **Handover/Endorsement or Handoff:** It is the transfer of information, from one shift of staff to another. It is predominantly related to the client's health and social care.

8. ACRONYMS

N.A>

9. RESPONSIBILITIES

- 9.1. BIOGENIX staff are responsible to abide to this policy.

10. PROCEDURE

10.1. INTERNAL COMMUNICATION:

The Organization is committed to providing timely and appropriate information to staff in order to:

- 10.1.1. Ensure staff awareness of the BIOGENIX laboratory: -
 - 10.1.1.1. Vision, Mission and values
 - 10.1.1.2. Objectives
 - 10.1.1.3. Structure
 - 10.1.1.4. Policy and procedures
 - 10.1.1.5. Significant important alerts, risks or changes
- 10.1.2. Handover/ Endorsement applies to the end of the shift.
Laboratories maintains endorsement register
- 10.1.3. Methods of communication used are:
 - 10.1.3.1. Notices;
 - 10.1.3.2. Reports;
 - 10.1.3.3. Memos;
 - 10.1.3.4. Face to face;





POLICY PROCEDURE FOR GENERAL COMMUNICATION

Document Control: BG/PP/GEN/002

BIOGENIX

VERSION: 1.0

DATE OF EFFECTIVITY: 01/07/2020

PAGE 7 OF 9

NEXT REVIEW DATE: 30/06/2022

- 10.1.3.5. WhatsApp
- 10.1.3.6. Emails.
- 10.1.3.7. Verbal communication over the phone
- 10.1.4. Maintain and monitor formalized methods of communication such as:
 - 10.1.4.1. Team/Staff meetings: Staff meetings are held on monthly basis and records are maintained.
 - 10.1.4.2. Laboratory staff on day to day basis put “hurdles” in the WhatsApp group accordingly Incident reports are If any concern requires urgent attention then issue is discussed and action is taken on top priority.
 - 10.1.4.3. In-service training and induction: Whenever any change in laboratory happen, proper training is given to the staff to make them familiar with the changes.
 - 10.1.4.4. One to one interviews / meetings: If any staff is having any concerns it is resolved by having one to one meetings and interview with the staff involved.
 - 10.1.4.5. Staff performance appraisal: Refer to Procedure for Personnel Management;
 - 10.1.4.6. Staff suggestions on day to day problems are taken during the meetings and recorded in the minutes of the meetings. On Annual basis formal staff suggestion is take, in this way there is staff participation in growth of the lab and also staffs feel the sense of responsibility.
- 10.1.5. To achieve timely communication of relevant information to staff, there is a WhatsApp group with lab. Director, Deputy director, Lab. Staff and Lab. Coordinators are also part of this group. At times this group is found handy as important information related to lab. Work endorsement can be circulated through this when the same information is to pass on to all lab staff and reception staff.

10.2. EXTERNAL COMMUNICATION:





POLICY PROCEDURE FOR GENERAL COMMUNICATION

Document Control: BG/PP/GEN/002

BIOGENIX

VERSION: 1.0

DATE OF EFFECTIVITY: 01/07/2020

PAGE 8 OF 9

NEXT REVIEW DATE: 30/06/2022

10.2.1. The Organization recognizes the importance of engaging with key stakeholders about key developments in a timely manner. The BIOGENIX achieves this by:

10.2.1.1. Ensuring there is awareness amongst stakeholders of relevant information regarding the Organizations business and services.

10.2.1.2. Promoting a positive corporate identity.

10.2.2. Methods of external communication such as:

10.2.2.1. Letters

10.2.2.2. Fax

10.2.2.3. Direct mail

10.2.2.4. Internet

10.2.2.5. Telephone

10.2.2.6. Advertising

10.2.2.7. Websites

10.2.2.8. Organization website

10.2.2.9. Feed back

10.2.3. Maintain and monitor formalized methods of communication such as:

10.2.3.1. **Referral lab.:** Communication with referral lab is important. We are communicating with them through mail and over the telephone.

10.2.3.2. **DoH:** We refer to DoH website for updated information on rules and policies. We exchange emails with DoH for Audit reports and when in doubt. Infection control cases we are uploading on DoH website through e. notification.

10.2.3.3. **Other health care facilities:** frequent meetings with the clinician of another Hospital/center and annually. We are taking Feedback from them and analyze them. Any result which require attention of physician, lab. Coordinator is calling them and informing or ask for the details.

10.2.3.4. **Insurance companies:** Laboratory Coordinator actively participates in day to day





POLICY PROCEDURE FOR GENERAL COMMUNICATION

Document Control: BG/PP/GEN/002

BIOGENIX

VERSION: 1.0

DATE OF EFFECTIVITY: 01/07/2020

PAGE 9 OF 9

NEXT REVIEW DATE: 30/06/2022

activities related to insurance and doing meetings as and when required.

10.2.3.5. **Suppliers:** Laboratory director and Procurement personnel are in direct contact with the suppliers. We are meeting them to discuss the concerns for the purposes of improvement. Annually we are taking feed backs from them and accordingly action is taken both side.

10.2.3.6. **Direct Patients:** Staff helps patients to fill the request form and give all the required information. Patient feedback form and Complaint form are available in Laboratory for patients.

11. CROSS REFERENCE

- 11.1. ISO 15189 Third Edition 2012-11-01 corrected version 2014-08-15, Medical laboratories- Requirements for quality and Competence
- 11.2. HAAD clinical laboratory standards version I.

12. RELEVANT DOCUMENTS & RECORDS

- 12.1. BG/REC/GEN/030 Endorsement Register
- 12.2. [BG/REC/GEN/034 Minutes of Meeting](#)
- 12.3. [BG/REC/GEN/001 Attendance sheet](#)

