

Quality Policy

Date January 2025

Version number 7.0

This document is a Policy.

A policy is a formal statement of principles and commitment. It informs volunteers and employees about the organisation, mission, strategy and goals. Compliance with policies is mandatory to protect the organisation, its personnel and service users from risk. St John People must adhere to St John policy at all times. Please ensure that you refer to St John Connect for the most up-to-date copy of this policy.

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1 Purpose and Scope

- 1.1 This quality policy describes the intentions and direction of St John Ambulance. It also provides a framework for the setting of Directorate and personal objectives.

2 Regulation and Legislation

- 2.1 This Policy complies with the requirements of ISO9001:2015.

3 Policy Statement

Our overall objective is to ensure that St John Ambulance delivers a consistently high level of service throughout our extensive and diverse business and charitable activities.

We believe in the power of communities to improve the health of the nation. Communities that preserve and protect life through volunteering for health and first aid.

All of our policies are designed to contribute to the organisation's promises, which are:

- To **serve** humanity without judgement
- To take time to **care**
- To be **skilled** to meet health needs
- To **develop** new and better ways to preserve and protect life

4 Values in Action

These promises are underpinned by our values, which guide our thinking and actions. They set out 'the way we do things' at St John Ambulance. Collectively, our values spell out **HEART** – an important reminder that our people and our shared values are at the heart of our organisation.

HUMANITY

Treating others with compassion and respect

EXCELLENCE

Pride in doing an excellent job

ACCOUNTABILITY

Delivering what we promise

RESPONSIVENESS

Continuously learning and improving

TEAMWORK

Working together effectively

5 Policy Content

We are committed to continuous improvement and have implemented a quality management system to ensure we achieve our objectives. We will therefore:

- work with customers, patients and partners to develop our services to meet their needs;
- conduct our business in a way that reflects our core values;
- create an environment that promotes continuous improvement and knowledge sharing across all stakeholders;

- ensure compliance with the law and the requirements of ISO 9001 and other applicable regulatory requirements;
- educate and train our people to support the delivery of high-quality services.

We establish measurable objectives within our business planning which are communicated and cascaded to all members of staff. They provide a framework for improvement in our effectiveness and in meeting specified requirements, customer expectations, and to enhance their satisfaction. This will effectively provide our customers with the confidence that the provision of service will be delivered consistently to predetermined high standards.

Within our planning, we identify the risks that might influence our objectives and plan accordingly to mitigate those risks.

We recognise the importance of monitoring and reviewing our quality management system and by doing so, we work to identify improvements to our processes, products and services.

Everyone connected with St John Ambulance is supported according to their individual needs with personal development, training and resources.

Our quality policy is regularly reviewed to ensure it remains relevant to our business, our objectives and our values.

6 Accountability and Responsibilities

While all staff in St John Ambulance have a responsibility to uphold the values and quality objectives of the organisation, within our ISO 9001:2015 Scope of registration, staff in the Enterprise Directorate and Ambulance Operations have particular accountability and responsibilities as follows:

6.1 Leaders in Enterprise and Ambulance Operations and their respective management teams

- Demonstrate a commitment to fulfilling the intentions as stated in this policy.
- Ensure this policy is communicated, understood and applied by personnel in Enterprise and Ambulance Operations.
- Make the quality policy, as appropriate, available to relevant interested parties, such as suppliers, customers, partners and regulatory agencies.
- Review the policy periodically to determine if it is still appropriate to the purpose of the organisation.

6.2 Enterprise and Ambulance Operations personnel

- Understand the policy and how its application can contribute to the effectiveness of the organisation.

7 Definitions

7.1 This document contains the following key words.

Shall/Must	Equals 'is required to'. It is used to indicate mandatory requirements to be followed to conform to the standard and from which no deviation is permitted.
Should	Refers to items regarded by SJA as minimum good practice, but for which there is no specific legal requirement. Volunteers and employees should follow the good practice guidance unless there is an agreed reason not to.

Adapted from Charity Commission standard definitions (charitycommission.gov.uk)

8 Policy Compliance

8.1 How compliance with this policy will be measured, by whom and how frequently:

Compliance measures – what will we measure?	How will it be measured?	Who will measure it?	Frequency	Who will it be reported to?
Check understanding and application by SJA Enterprise and Ambulance Operations personnel.	Questioning of personnel	Internal Audit	At each relevant internal audit	Appropriate Directors and functional managers
Communication and availability of this policy	Connect, SJA Website Within the staff induction programme	Internal Audit	At each relevant internal audit	Appropriate Directors and functional managers
Policy is reviewed	Management review Meeting minutes In line with the statement in this Policy document	Internal Audit	At each relevant internal audit	Appropriate Directors

If volunteers or employees become aware of non-compliance with any aspect of this policy or its supporting procedures, this should be raised to the head of function or Director through the line management structure. The head of function (Chief) or Director must ensure that any risks arising from noncompliance are recorded on the relevant risk register and proportionate mitigation action is put in place.

9 Policy Review and Maintenance

9.1 This policy will be reviewed every year, or if there is a change to external regulatory requirements or a change to internal processes.

10 Document Control

Title	Quality Policy
Version	7.0
Review by	January 2026
Date approved by ELT	January 2025
Policy live date	February 2025
Policy owner	Paul Kear – Quality, Standards and Improvement Manager
Stakeholders consulted in development	Directors and Management representatives from Enterprise and Ambulance Operations
EDI Impact Assessment Completed	Yes
For action	All SJA Enterprise and Ambulance Operations personnel
For information	All SJA personnel
Supersedes	6.0 date January 2024
Supporting procedures and guidelines	This policy is supported by the relevant procedures and other guidelines, which are available on the SJA Intranet.
Associated policies	None directly

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