



## STANDARD OPERATING PROCEDURE FOR THE PREPARATION AND REVIEW OF POLICIES FOR TAYSIDE MEDICAL SCIENCE CENTRE

SOP NUMBER:	TASC SOP044 v11
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EFFECTIVE DATE:	04 Apr 2023
REVIEW DATE:	04 Apr 2025

### 1. PURPOSE

To document the procedure for the preparation and control of TASC policies to ensure that they are presented in a standard format.

### 2. SCOPE

This Standard Operating Procedures (SOP) applies to any individual delegated the task to write or review policies for TASC.

### 3. RESPONSIBILITIES

#### ***TASC Quality Assurance (QA) team:***

- will control and manage TASC policies to ensure that the current versions are available on the TASC website.
- notify TASC staff and researchers of new or revised versions of policies by email (via Hot Tips).
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#### ***Researchers and other users:***

- must always refer to the TASC website to make sure that they are using the current version of a TASC policy.

### 4. PROCEDURE

#### 4.1 Preparation of a new policy

- 4.1.1 A policy should be written as soon as the need is identified. Authors should be recognised as being appropriately qualified and experienced to carry out this task. Policies should be written by an individual nominated by the TASC Quality Assurance (QA) Manager, TASC Senior Manager or R&D Director.
- 4.1.2 Each new policy will be prepared using the TASC policy template (Doc Ref 089). Each policy will be unique in the information it provides therefore it is up to the author to decide how to present it.

- 4.1.3 The author should discuss and present the draft policy to any relevant committee or individual/individuals who has/have specialist knowledge (by job title and experience) of the policy content. They may be external to University of Dundee or NHS Tayside if required.
- 4.1.4 Once it has been agreed that the policy content is accurate, the author will email the draft version to the TASC QA team ([TASC SOPs@dundee.ac.uk](mailto:TASC SOPs@dundee.ac.uk)) who will forward it to the TASC Research Governance & Oversight Committee for review within stated timelines.
- 4.1.5 Comments and suggested changes will be considered and included if there is agreement from the author and reviewers.
- 4.1.6 When the policy is approved by TASC Research Governance & Oversight Committee, the TASC QA team will assign a unique policy number, version number, effective date, and review date.
- 4.1.7 The Chair of the TASC Research Governance and Oversight Committee will confirm approval of the policy on behalf of CRGC, by email to the TASC QA team.
- 4.1.8 The R&D Director will confirm approval of the policy by email to the TASC QA team.
- 4.1.9 TASC QA Manager or delegate will ensure that new policies are available on the TASC policy webpage.

## **4.2 Review of a policy**

- 4.2.1 TASC policies will be formally reviewed every 2 years unless changes in legislation or procedures require an earlier review.
- 4.2.2 TASC QA team will notify the policy author to review the current policy. If an author is unavailable, the TASC QA Manager, Senior R&D Manager or R&D Director will allocate the role of author to an appropriately qualified and experienced person. This does not necessarily mean that this individual will automatically become the author. However, if an author is no longer available in the long term, the TASC QA Manager, Senior R&D Manager or R&D Director will reallocate the role to an appropriately qualified and experienced person.
- 4.2.3 TASC QA team will provide the author with a Word version of the policy. The author should bring any amendments to the attention of any relevant committee or individual/individuals who has/have specialist knowledge (by job title and experience) of the policy content. They may be external to University of Dundee or NHS Tayside.
- 4.2.4 If amendments are required, the author may track changes, insert comments into the policy, and summarise the amendments in the Document History table. If the

policy is reviewed with no changes required, this should also be recorded in the Document History table.

- 4.2.5 The draft policy will then be emailed to the TASC QA team ([TASC SOPs@dundee.ac.uk](mailto:TASC SOPs@dundee.ac.uk)) who will forward it to the TASC Research Governance & Oversight Committee for dissemination to members to review within the stated timelines.
- 4.2.6 Comments and suggested changes will be considered and included if there is agreement from the author and reviewers. If the author made no changes to the policy at review date, the committee will be informed.
- 4.2.7 When the policy is approved by TASC Research Governance & Oversight Committee, an updated version number, effective date and review date will be provided by TASC QA team. The policy version number will increase by an increment of 1.
- 4.2.8 The Chair of the TASC Research Governance and Oversight Committee will confirm approval of the policy on behalf of CRGC, by email to TASC QA team.
- 4.2.9 The R&D Director will confirm approval of the policy by email to the TASC QA team.
- 4.2.10 TASC QA Manager or delegate will ensure that new policies are available on the TASC policy webpage.

### 4.3 Policy management

TASC QA team will:

- store the Master policies securely in the TASC Controlled Documents Folder. Access to the TASC Controlled Documents Folder will be restricted to the TASC QA Manager and delegates as appropriate.
- archive superseded policies in designated folders indefinitely.

## 5. ABBREVIATIONS & DEFINITIONS

QA	Quality Assurance
SOP	Standard Operating Procedure
TASC	Tayside Medical Science Centre

## 6. ASSOCIATED DOCUMENTS & REFERENCES

Doc Ref 89: TASC Policy Template

## 7. DOCUMENT HISTORY

*History prior to 2021 is in the archived SOPs available from TASC Quality Assurance Dept.*

<b>Version Number:</b>	<b>Reviewed By (Job Title):</b>	<b>Effective Date:</b>	<b>Details of editions made:</b>
9	Tracy Petrie (Quality Assurance Support Officer)	18/01/2021	Uploaded to new TASC SOP template which shows the new TASC website in the footer. Physical scan converted to electronic pdf as a requirement for upload to new TASC website.
10	Valerie Godfrey (TASC QA Manager)	15/11/2021	Scheduled review – no changes made.
11	Valerie Godfrey (TASC QA Manager)	04/04/2023	Transferred to updated policy template which is Accessibility compliant. Signatures are no longer required from the 2 Approvers.

## 8. APPROVALS

<b>Approved by:</b>	<b>Date:</b>
Dr Valerie Godfrey, TASC Quality Assurance Manager, on behalf of TASC Clinical Research Guidelines Committee	03 Apr 2023