CHECKLIST 1. STRATEGIES AND POLICIES

No.	Component	LC	Example of result / type of evidence
1.1	Is the strategy of the nuclear medicine service (NMS) in accordance with specific objectives developed on the national/regional level?		Written documents showing strategies of the NMS and objectives at national/regional level
1.2	Is the strategy of the NMS in accordance with specific objectives developed by hospital management?		Written documents showing the NMS and institutional strategies
1.3	Is coordination with other services of the institution defined (radiology, oncology, cardiology, paediatrics, surgery, etc.)?		Written documents describing agreements with other services and their conditions
1.4	Does the NMS have an up to date written organizational chart, indicating channels of communication and lines of authority?		A copy of the organizational chart (it could be also verified using the quality manual)
1.5	Do the nuclear medicine diagnostic imaging and therapeutic services match the clinical demand?		Check the patient roster / verify if there is a waiting list
1.6	Do the objectives of the NMS include sufficient flexibility to accommodate urgent requests and emergency examinations?		Check relevant standard operating procedures (SOPs) and patient workflow
1.7	Do the objectives of the NMS include commitment to quality improvement through use of internal/external clinical audits?		Check quality objectives of the NMS
1.8	Does the NMS have a strategic development plan for its global activities?		Written documents establishing strategic development plans
1.9	Does the service have a plan to provide new developments in diagnosis and therapy?		Written documents describing new developments (may be verified using quality management)

CHECKLIST 1. STRATEGIES AND POLICIES (cont.)

No.	Component	LC	Example of result / type of evidence
1.10	If the NMS does not provide a full range of nuclear medicine services, is there a strategy/policy to guide access to such services in another institution?		Written agreements with other NMSs / general SOPs for clinical and therapeutic services
1.11	When providing services (e.g. technical and clinical) by using services of other hospitals, are responsibilities clearly defined?		Check definitions of responsibilities in the SOP of offered services
1.12	Is there a formal process ensuring the participation of the service in decision making of the hospital/institution?		Written SOP describing the process to ensure the role of the NMS in hospital decision making

Note: LC: level of conformance (range 0–4). 0: absent or inappropriate; 1: planned or approximate; 2: partial conformance or partial implementation; 3: near full conformance or near full implementation; 4: full conformance or full implementation.