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SERVICE CHARTER

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L.A.B. S.R.L. CLINICAL ANALYSIS LABORATORY Via Mario Nicoletta, 31 – 88900 CROTONE

SERVICE CHARTER

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1 - PURPOSE AND SCOPE

This Service Charter regulates the relationship between the user and the Clinical Analysis Laboratory L.A.B. S.R.L.

The Service Charter is an instrument to protect the right to health and gives the user the possibility of effective control over the services provided and their Quality.

This Service Charter implements the principles on the provision of public services contained in the Prime Ministerial Decree of 19/05/1995 "General Reference Guide to the Charter of Public Health Services", although it does not refer to private facilities regarding their duties towards users for the purposes of respecting their health rights and the Quality of the services offered to them.

This is in order to pursue customer satisfaction in the context of continuous improvement, through documented evidence of the organisational and Quality characteristics of the services provided by the Laboratory.

In this way it is also possible to put the customer in a position to assess the Quality of the services provided with respect to the declared standards.

2 - BASIC PRINCIPLES OF SERVICE PROVISION

The provision of services by "L.A.B. S.R.L." progressively conforms to the following principles enshrined in the Prime Minister's directive of 27 January 1994

- EQUALITY: services are provided according to equal rules for all regardless of sex, race, language, religion, political opinion. Equality is to be understood as the prohibition of any unjustified discrimination and not as uniformity of services in terms of personal and social conditions;
- IMPARTIALITY: an objective, impartial, neutral, humane behaviour shall be maintained in the provision of the service to users;
- CONTINUITY: services are provided with continuity over time;
- right of choice: where permitted by current legislation, users have the right to choose the service provider of their choice.

The right to choose concerns, in particular, services distributed throughout the territory;

- PARTICIPATION: the user is guaranteed participation in the provision of the service. The right of access is exercised in the manner governed by current legislation and by the regulations adopted by the Structure.
- EFFICIENCY AND EFFECTIVENESS: the service is rendered in such a way as to guarantee the efficiency and effectiveness of the services.
- USER SATISFACTION: the Laboratory conducts user satisfaction surveys by means of questionnaires and/or direct interviews, paying attention to the reports and suggestions that emerge.

The Clinical Analysis Laboratory L.A.B. S.R.L. takes all appropriate measures to achieve these objectives.

3 – OUR SERVICES

- ⇒ The Laboratory is open to the public from 07.00 to 13.00 and from 16.30 to 17.30 Monday to Friday, and from 07.00 to 12.00 on Saturdays.
- ⇒ Samples are normally taken from 07.00 to 10.30, but, in cases of necessity, can be taken at any opening time, by agreement with the Laboratory Manager.

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- ⇒ It is also possible to take blood samples at home in cases where the user cannot walk.
- ⇒ Reservations can be made the day before or, in urgent cases, even the same morning before 09.00.
- ⇒ Biological samples, as soon as they have been taken or delivered to the laboratory, are sorted to specialised areas to be prepared for the analytical phase. Timely preparation for analysis immediately after the sample is taken is a guarantee of Quality assurance, as many analyses are unstable and can lead to incorrect results if analysed several hours after collection.
- ⇒ Reports are delivered as quickly as possible, usually within two days after collection, some examinations are ready for delivery the same day except for particularly complex examinations. Reports can be collected in the morning from 10.45 a.m. to 1 p.m. Monday to Friday and from 10.45 a.m. to noon on Saturdays, and in the afternoon from 4.30 p.m. to 5.30 p.m. Monday to Friday. Reports can also be delivered via the ONLINE delivery service, offered by the laboratory management system, to the e-mail address indicated by the user using the unique credentials issued at the time of acceptance.
- ⇒ The laboratory management system used by our facility has a cloud-based storage system, so the data it contains is strictly protected with appropriate firewalls that prevent access and/or intrusion by any unauthorised internal or external parties, in addition to the procedures for saving data locally.
- ⇒ The laboratory undertakes to promptly inform users if, for technical reasons, the scheduled delivery date cannot be met.
- ⇒ The report specifies for each investigation carried out the method, the unit of measurement, where applicable, and the normal values. Some analyses of particular importance are also represented by the relevant graphs and reports. In order to ensure the obligation to control the Quality of the services provided (Legislative Decree 517/93), the Laboratory participates in external Quality Evaluation programmes: (VEQ) for investigations in Clinical Chemistry, Immunology, Haematology, Coagulation, Electrophoresis. It also carries out Internal Quality Control programmes using reference standards.
- ⇒ The laboratory undertakes to disclose the SSN tariffs, free professional tariffs and any copayments to any user who requests them at the facility's acceptance office.
- ⇒ The structure aims to achieve a high level of computerisation and automation of equipment to obtain increasingly real and accurate analytical results. The instrumentation is therefore frequently updated.
- ⇒ The laboratory has built a waiting room with an adequate number of seats in relation to peaks in the frequency of accesses, although the flow of people is monitored to avoid crowds, and a "queue-elimination" system using access numbering with a display and voice call;
- ⇒ The laboratory has also dedicated three separate rooms for taking samples to allow the user's privacy to be respected and three check-in desks to reduce waiting times, as well as separate toilets for internal staff, users and the disabled.
- ⇒ The hospital has adopted all the procedures envisaged for containing and combating the spread of the Sars Cov-2 virus, taking the utmost care in disinfecting the premises, drawing rooms and waiting rooms, and equipping itself with an air purifier in constant operation;
- ⇒ It is equipped with a thermo-column scanner, located at the entrance, for monitoring body temperature;
- ⇒ The facility is equipped with a power accumulator that allows work to be carried out without interruption, even in the event of an electrical BLACK-OUT dedicated to the primary equipment and the computer network system.

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- ⇒ The Laboratory ensures that user satisfaction surveys are carried out through direct observation, the use of questionnaires and by promoting the externalisation of complaints. The results of these surveys are periodically reviewed by the Management.
- ⇒ The Laboratory has put in place procedures to protect privacy and professional secrecy.
- ⇒ All laboratory personnel carry personal identification badges;
- ⇒ All the facility's Quality procedures are included in a "Quality Manual" that the laboratory makes available to clients/users;
- ⇒ The laboratory obtained certification of its quality system according to ISO 9001 (ed. 2000) in September 2004 and updated according to ISO 9001 (ed. 2008) from September 2009 to date;
- ⇒ The Laboratory undertakes to disseminate this "Service Charter" to users

4 - COMPLAINTS MANAGEMENT

The Facility guarantees the protection of the user also through the possibility for the user to lodge a complaint following a disservice, act or behaviour which has denied or limited the functionality of the services.

The complaint must be made by filling in the appropriate form available at the Acceptance office. The Laboratory Staff will facilitate and support the outsourcing of the complaint.

The Laboratory Staff will provide an immediate response to the user for reports and complaints that are of immediate resolution.

In other cases, the Laboratory Manager prepares the preliminary investigation and the user will receive a written reply within a maximum of fifteen days from receipt of the complaint.

5 - PRESENTATION AND ORGANISATION OF THE LABORATORY

LAB Laboratory was founded in 1980 and immediately established itself as a reference centre for high quality diagnostic results at local and regional level.

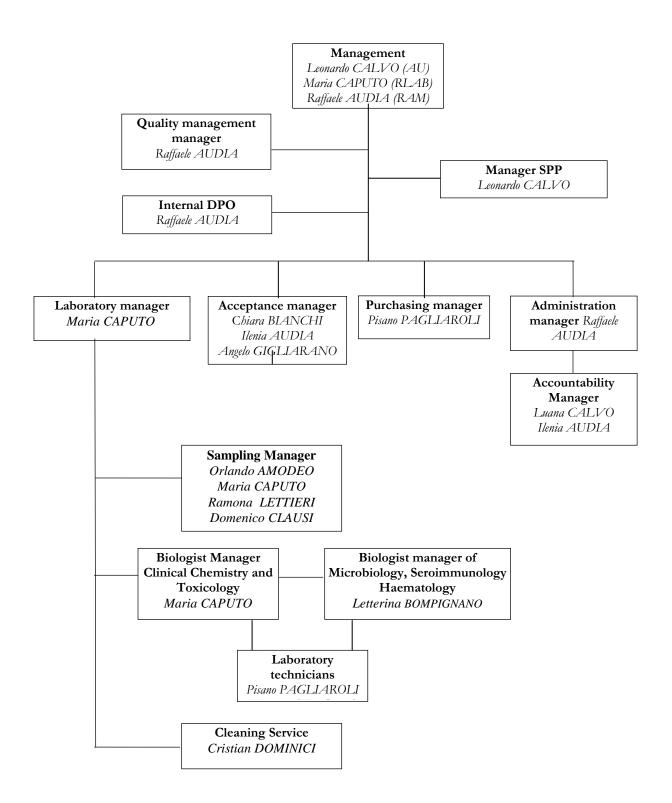
In 1982 the Laboratory moved to its present location, transforming itself from a limited liability company (S.A.S.) to a limited liability company (S.R.L.).

It is a laboratory accredited with the S.S.N. with specialised sectors in Clinical Chemistry, Toxicology, Haematology, Microbiology and Serum Immunology, carrying out examinations for the diagnosis of Allergies, Food Intolerances, Gastric Monitoring, Occupational Medicine, Male Infertility, promoting the culture of quality at all levels, according to the standards dictated by ISO 9001 vision 2008, certified by WCS (World Certification Services), since 2004 and until September 2013 and subsequently with SIQ -IQNET until 31/10/2016. Currently UNI EN ISO 9001:2015 certified, by the prestigious QS Quality Service.

Right from its earliest years of activity, it has adopted internationally recognised methods and technologies, applying the guidelines of scientific societies and collaborating with Italian and foreign health centres to verify the analytical results obtained, with the aim of achieving maximum user satisfaction both in terms of services and the reliability of results, and using high quality technological equipment that is constantly checked and updated, with the commitment of staff with over thirty years' experience in the sector.

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ORGANIGRAM OF THE CLINICAL ANALYSIS LABORATORY L.A.B. S.R.L.



Sign AU: Dott. Leonardo CALVO