

SERVICE CHARTER



**LABORATORIO
VIA DIEGO ANGELI**
LABORATORIO ANALISI CHIMICO - CLINICHE

VAT number 02150821003

Via Giuseppe Donati 138/144 – 00159 Rome



Carta dei Servizi

Rev. Ed.

04

del

28.05.2024

CDS



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Drafted in collaboration with Ecosafety Group



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Timbro e Firma della Rappresentante Legale
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Il D.S. per

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PREMISE

Dear user,

The Service Charter is the communication tool between the Patient and the Facility, as it aims to make known the activities and services made available and how to access them. The Service Charter also represents the commitment to assist, with competence, professionalism and efficiency, those who turn to our Laboratory to offer complete and detailed information on the services provided.

LABORATORIO DI VIA DIEGO ANGELI SRL through the Service Charter wants to respond to the recommendations dictated by the Decree of the President of the Council of Ministers of 19 May 1995 "General scheme of reference of the Charter of Public Health Services", as well as by the Decree of the Commissioner ad Acta of 6 October 2014, n. U00311 "Guidelines for the elaboration of the Charter of Health Services of the Health Companies and Structures of the Lazio Region" with the aim of providing the Patient is a valid tool for obtaining effective assistance and ensuring compliance with precise commitments regarding the quality and quantity of services provided by the Facility.

Attention to patient care is a priority in defining the organizational, technological and structural choices of the Facility in the belief that these aspects can be further improved thanks to the participation and collaboration of those who, by reading this document, will want to report perceived objective difficulties.

This Service Charter will also be periodically updated with suggestions, proposals, changes and additions that you and other users are invited to submit at any time.

To this end, we invite you to fill in, anonymously, the questionnaire on the "Degree of User Satisfaction" that will be available in the waiting room. In this way, you will be able to express your opinion and submit your comments on the services offered. Each of your indications will be taken into consideration in order to meet, in the most complete way possible, your expectations and needs.

In addition, to report malfunctions or complaints, you can contact the staff on duty who can be identified by the identification card.

A copy of the Service Charter can be sent to associations representing Citizen Patients operating in the area.

Cordially

The Legal Representative

SECTION ONE**Presentation of the Structure and Fundamental Principles**

The LABORATORY OF VIA DIEGO ANGELI SRL operates in via Giuseppe Donati on an entire floor located on the ground floor of the building, where it is able to guarantee high quality assistance in the fields of Basic Analysis, Allergology, Angiology, Cardiology, General Surgery, Vascular Surgery, Sports Medicine, Endocrine Diseases of Metabolism and Nutrition, Geriatrics, Occupational Medicine, neurosurgery, neurology, child neuropsychiatry, obstetrics and gynecology, psychiatry, urology, gastroenterology, pulmonology and rheumatology. Particular attention has been paid to the design of a reception area that is as comfortable as possible, air-conditioned, characterized by modern rooms and equipped with an automated catering service.

The Legal Representative has adopted a Quality System that complies with, but is not certified to, the UNI EN ISO 9001/2015 standard and requires strict compliance with all mandatory regulations affecting the activities of the Laboratory.

The Laboratory is also accredited with the SSN of the Lazio Region having obtained the DCA Regional Accreditation n° U00261 of 12.11.2012.

The Management has also approved and adopted the Organizational Model referred to in Legislative Decree 231/2001, integrating what is already defined in the Quality System and imposing strict compliance with all mandatory regulations affecting the activities of the Laboratory.

The structural, technological and organizational structure guarantees the quality of the services provided and the reliability of the instrumentation.

The Structure

The facility is located on the ground floor of a civil building and consists of a waiting room with check-in desk, three sampling rooms, a laboratory room, four doctors' offices, an administrative office, dirty storage room, clean storage, three toilets for staff and users.

There are no architectural barriers in the structure and there are facilities for the disabled.

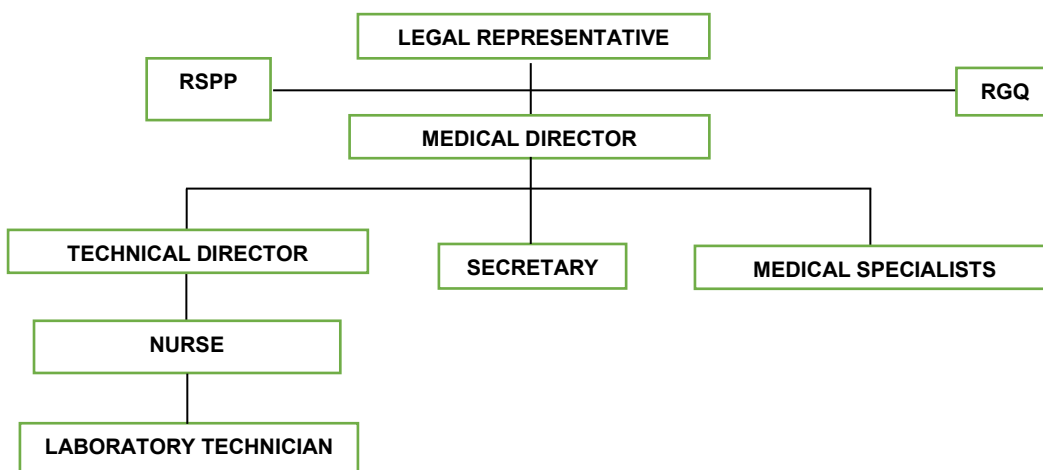
The Presidium also meets the structural requirements of current regulations regarding the compliance of electrical systems, the full application of Law 81/08 and subsequent amendments, the removal of architectural barriers, the disposal of special waste, and the cleanliness and comfort of the premises.

The structure is equipped with modern equipment for the provision of services, pursues a policy of constant improvement of the same, adaptation to all the most modern technologies as well as efficiency control and all periodic inspections required by law and/or recommended by the manufacturers.

The staff employed is trained in the use of the equipment present in the structure and participates in internal refresher courses whenever the acquisition of new, more technologically advanced equipment requires it.

The Organization

Our organization is represented as follows:



The Presidium's Legal Representative is Dr. Jacopo Giulianini

The Legal Representative's task is to: carry out process monitoring and measurements; determine commercial strategies and policies, determine the objectives and requirements of the offers, establish the investment budget, supervise general and financial affairs, define the requirements of the service offered; supervise and manage the Administration/Secretarial area.

He is also in charge of managing relations with the Institutions and personnel management .

The Medical Director of the facility is Dr. Massimo Chimenti, enrolled in the Order of Surgeons of Rome, with the number 23659 and specialized in Endocrinology who is entrusted with the responsibility of the medical emergency.

The Technical Director of the Basic Analysis Laboratory is Dr. Alessandra Scornajenghi; She is responsible for supervising the sector's health activities;

Healthcare personnel, medical and non-medical, based on their professional profile, are responsible for the implementation of the services entrusted to them, they use the same protocols, guidelines and technical data sheets in order to standardize processes and guarantee, in addition to personalized treatment also a quality standard that falls within the requirements of the NHS/R, the mandatory regulations and the quality standards that the Structure pursues.

Basics

This Service Charter, with reference to Ministerial Guidelines No. 2/95, is inspired by the following fundamental principles:

Equality and respect: the provision of the service is inspired by an equal consideration for every single person. This does not mean uniformity of interventions but, on the contrary, that each activity is personalized considering the uniqueness of each one. Each intervention is managed with respect for the dignity of the person and individual specificities, without distinction of ethnicity, sex, religion, language, economic conditions and political opinions.

Impartiality and objectivity: every person who provides a service within the Laboratory operates with impartiality, objectivity and justice in order to guarantee adequate assistance.

Continuity: the organization ensures the continuity of the service through the preparation of work shifts that guarantee adequate levels of assistance during the hours for which the Laboratory is in operation. Any interruptions are expressly regulated by industry regulations to cause users as little inconvenience as possible.

Right to choose: every person, whatever their health condition, has the right to have their autonomy recognized and promoted. The patient has the right to choose the facility that he believes can best meet his needs according to the regulations in force.

Participation: The Laboratory guarantees the patient correct, clear and complete information regarding participation in the provision of the service; the Patient can participate in the continuous improvement of the Laboratory, by filling, for example, the "Customer Satisfaction Evaluation" form, which is made available to Patients in the waiting room, and then entered, filled in, in the relevant box.

Effectiveness and efficiency: these are guaranteed by the implementation of the Quality System aimed at determining an optimal relationship between the resources used, the activities carried out and the results obtained.

Information: Patient care is provided through: verbal and paper information transmitted by the Reception, the Technical Director, the delivery of specialist information documentation and advertising posters.

Reception: access to the facility is facilitated by the availability of the staff, always present in the facility, from the waiting room equipped with the necessary spaces to ensure respect for privacy and the needs of the patient.

Protection: the Protection of Patients' Rights is guaranteed by compliance with the Procedures, Operating Instructions and Regulations defined in the Quality System, as well as by the respective control and supervision mechanisms put in place, paying particular attention to patient safety, through the prevention of clinical risk and procedures relating to Privacy.

Quality Standards: The quality of the services provided by the Laboratory is ensured by the definition of quality standards contained in ISO 9001, the standard to which the Laboratory's activity conforms, as well as by the minimum authorization requirements. The guarantee of compliance with these standards arises from the audits to which the Laboratory is subjected.

The Legal Representative of the **Laboratory** committed to adopting the "**Charter of International Patients' Rights**" Below is a summary.

Right to life Every person must receive timely, necessary, appropriate assistance for the satisfaction of the basic needs of life (nutrition, hydration, ventilation, hygiene, environmental protection, movement, evacuation, rest, sleep, etc.).

Right to care and assistance Every person must be cared for in science and conscience and with respect for his or her wishes.

Right of defence Every person in disadvantaged psycho-physical conditions must be defended from speculation and/or deception and damage deriving from the surrounding environment.

Right to prevention Each person must be ensured, as far as possible, with activities, tools, health aids, information aimed at preventing deterioration and/or damage to health and autonomy.

Right to speak and to be heard Every person must be listened to and their requests must be met as far as possible.

Right to information Each person must be informed about the procedures and motivations behind the interventions to which he or she is subject.

Right to participate Each person must be able to participate in decision-making that affects themselves (according to their cognitive abilities).

Right to Criticism Each person can freely express his or her thoughts and criticisms concerning the activities and dispositions that concern him/her.

Right to respect and modesty Each person must be called by his or her first and last name, and his or her confidentiality and concept of modesty must be respected.

Right of thought and religion Every person must be able to express his philosophical, social and political ideologies and practice his or her own religious confession.

Patients' Rights

The organization ensures:

- > **The Right to Information-Informed Consent:** The Patient has the right to be informed about the therapeutic process to be pursued, expressing his/her willingness to be informed, by signing the "Informed Consent" form. In addition, the Patient has the right to receive all the clarifications he or she deems appropriate from the doctors;
- > **The Right to Privacy:** During the Acceptance Phase, consent to the processing of sensitive data is requested in accordance with the provisions of Legislative Decree 196/03 "Personal Data Protection Code" and RUE 2016/679. Professional secrecy is guaranteed with regard to all information of a private and personal nature that arises during the provision of the service. Under no circumstances is telephone information provided. Physicians are authorized to inform only those persons authorized by the Patient and equipped with an Identity Document.

Objectives of the Company

The objectives set out in the Management Review are pursued through

- The performance of a Basic Analysis Laboratory under an authorized and accredited regime
- Outpatient services under an authorised regime

These objectives are monitored through the computer tools for data acquisition ("Astrolabio" management program) and thanks to the participation and collaboration of users and all the freelance staff of the Laboratory.

Vision , Mission

The Vision

Our strategy is to make the Facility a reference in its catchment area for the offer of Basic Analysis Laboratory services, allergology, angiology, cardiology, general surgery, vascular surgery, sports medicine, endocrine diseases of turnover and nutrition, geriatrics, occupational medicine, neurosurgery, neurology, child neuropsychiatry, obstetrics and gynecology, psychiatry, urology, gastroenterology, pulmonology and rheumatology.

The implementation of this strategy is pursued through the following points:

- make a profit to be reinvested in technological and human resources
- achieve and maintain high quality technical performance
- satisfy all the requests of the citizen user with reference to the reality of Rome, covering all types of services that can be conceived, current and prospective
- excel in service delivery

The Mission

The organization's mission is reflected in the following standards we pursue for our staff and patients:

Professional performance

A control over the processes that assures our patients of the appropriateness of the result.

Provision of Services to the User

Ensure the standards set out in the Service Charter and improve the performance perceived by users in general.

Technology Resources

Renewal of the instrumentation for a continuous improvement of performance.

Human resources

Ensure the continuous maintenance of staff skills through CME training courses to offer a professionally appropriate service.

Institutional Recognition

Maintain health clearance within the National Health Service and accreditation for the Analysis Laboratory.

Obtain and maintain health authorization within the National Health Service for allergology, angiology, cardiology, general surgery, vascular surgery, sports medicine, endocrine diseases of turnover and nutrition, geriatrics, occupational medicine, neurosurgery, neurology, child neuropsychiatry, obstetrics and gynecology, psychiatry, urology, gastroenterology, pulmonology and rheumatology.

The Organization develops its commitment to continuous improvement through plans and actions aimed at improving services, processes and performance through the achievement of the measurable objectives that the structure sets itself every year during the Management Review.

SECTION TWO

Information on the structure and the services provided

Where we are and how to reach us

The property is located in Via Giuseppe Donati 138/144 – 00159, Rome.

The property is easily accessible by car and public transport ("Balsamo Crivelli" bus stop)

Parking: Ample and free of charge and with a garage located in Via R. Calzini n.6

Open to the Public/ Secretary's Office:

Monday to Friday from 7:30 a.m. to 6:00 p.m.

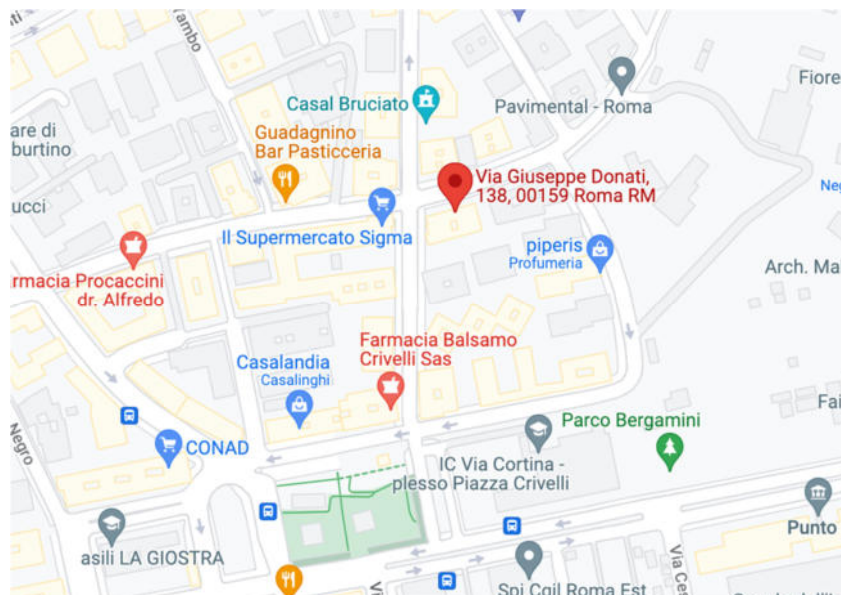
Saturday from 7:30 a.m. to 12:30 p.m.

Pick-up time: Monday to Saturday 7:30 am to 10:30 am

Collection of reports: Monday to Friday from 10:30 a.m. to 6:00 p.m.

Saturday from 10:30 a.m. to 11:30 a.m.

Information material may direct foreign users to the use of our services.



Type of services provided**ANALYSIS LABORATORY (AUTHORIZED AND ACCREDITED)**

The Laboratory, directed by Dr. Alessandra Kathelin Scornajenghi, graduated in Biology and enrolled in the Register of Biologists of Rome with no. 048398 with a specialization in Clinical Pathology, performs the following services:

- Clinical Chemistry
- Hematology and Coagulation
- Enzyme Immunoassay

Other collaborators are Fabiola Tassi (Laboratory Technician) and Veronica di Renzo (Infirmaries)

The Laboratory is in network with the Laboratorio Gruppo Ippocrate srl. Therefore, some analyses are performed at the lead laboratory.

OUTPATIENT CLINIC (PRIVATE)

The facility carries out visits to:

- Angiology (Code 05)
 - Cardiology (Code 08)
 - General Surgery (Code 09)
 - Vascular Surgery (code 14)
 - Sports Medicine (cod. 15)
 - Endocrine, metabolic and nutritional diseases (code 19)
 - Occupational Medicine (cod. 25)
 - Neurosurgery (Code 30)
 - Neurology (cod. 32)
 - Child Neuropsychiatry (cod. 33)
 - Obstetrics and Gynecology (code 37)
 - Urology (Code 43)
 - Dermatology (Code 52)
 - Pulmonology (Code 71)
- Further information and brochures illustrating the services provided are available at the Reception of the Facility.

How to Book:**LABORATORY**

The booking of **services is only necessary** for some particular types (e.g. glycemic and insulinemic curve, lactose breath test, lactulose, Helicobacter pylori and home blood samples).

To make a reservation, you must go to the Laboratory or call.

Based on the availability of the chosen professional and the needs of the User, the service will be booked.

Only in the event of **an emergency** justified in writing by the requesting doctor is it possible to manage the request with a criterion of priority over the others by going to the Reception Desk.

Priority access is allowed for pregnant women, people with disabilities and serious disabling diseases.

Required Documents

To access the services and services provided by the Centre, the patient must present himself at the facility with the following documentation:

- Valid identity document;
- Health Card;
- Signature of the Privacy Consent (at the time of admission, the patient is also informed through posted signs, pursuant to Legislative Decree no.196/03, regarding the processing of sensitive data. The administrative staff is available for any information regarding the legislative provisions on privacy).

Depending on the type of service, it must present:

A. SERVICES IN ACCREDITATION WITH THE NHS

- 1) Recipe compiled on mod. ASL by the family doctor. No more than eight analyses may be required in each recipe. Prescriptions without the stamp and signature of the attending physician are considered invalid. Prescriptions are valid for 1 year from the date of their completion.
- 2) Non-exempt patients will have to pay on their own, at the rate of the SSN, the services up to a maximum of € 36.15 per prescription, except for services not provided by the NHS.
- 3) For patients who are totally exempt from the ticket, nothing is due, except for services outside the NHS, as well as for those exempt by pathology regarding the analyses related to the specific pathology.

The doctor's prescription (pink or dematerialized) must contain the following information:

- Name, surname
- Health card number, specifying any rights of exemption from the payment of the service.
- Patient Tax Code
- Type of service requested
- Doctor's stamp and signature
- Date

B. PRIVATE BENEFITS

To perform analyses privately, it is sufficient to indicate to the staff at the reception the exams to be carried out, upon presentation of an identity document.

For any documented inconvenience, please contact the reception office.

For all services, the staff of the Reception Desk will provide all the necessary information to the Patient, in order to best meet his needs (e.g. treatment preparations).

AMBULANT

PRIVATE BENEFITS

To carry out the visits privately, it is sufficient to indicate to the staff in reception the services to be carried out, upon presentation of an identity document.

For any documented inconvenience, please contact the reception office.

For all services, the staff of the Reception Desk will provide all the necessary information to the Patient, in order to best meet his needs (e.g. treatment preparations).

Patient Care

LABORATORY

Acceptance

The acceptance will verify the documentation delivered by the Patient and will enter the patient's data in the computer system of the "Astrolabe" facility.

The patient is informed, in accordance with European Regulation 2016/679, about the processing of health and sensitive data. Acceptance is available for any information regarding the legislative provisions on privacy.

After acceptance and/or verification of any booking, users wait for the call in the waiting room through a screen that will identify the individual patient.

Home withdrawals can be provided at the user's request.

Delivery of reports and availability of results

The reports are delivered directly to the interested party, upon presentation of the invoice or withdrawal slip of which they are in possession at the time of acceptance, or to a delegated person, in which case the invoice or withdrawal slip must bear the authorization for the proxy duly signed at the bottom.

The **date of collection of the reports** is specified on the receipt delivered at the time of acceptance and in any case the maximum deadline for the delivery of the reports based on the complexity of the test is variable **from 7 to 15 working days**.

In particular situations and in derogation from normal processing times, the Laboratory allows the urgent delivery of reports. The cases for the urgent collection of reports are:

- patients undergoing monitoring on anticoagulant therapy;
- patients undergoing antineoplastic therapy;
- patients with suspected diagnosis requiring urgent hospitalization.

AMBULANT

The acceptance will verify the documentation delivered by the Patient and will enter the patient's data in the computer system of the "Astrolabe" facility.

The patient is informed, in accordance with European Regulation 2016/679, about the processing of health and sensitive data. Acceptance is available for any information regarding the legislative provisions on privacy.

After acceptance and/or verification of any booking, users wait for the call in the waiting room through a screen that will identify the individual patient.

Informed consent

If the service requires it, a specific informed consent is drawn up at the medical act

Payment of benefits

The payment of the services of the Basic Facility is made before the execution of the same or at the latest when the reports are collected.

Payment of services can be made by: Cash, Debit Card/Credit Card and Bank Transfer.

The administrative staff is available for any clarification.

SECTION THREE

Quality Standards, Commitments, and Programs

Quality Factors and Standards

The user who has concrete experience of a particular service and/or performance is able to perceive the quality of the service offered through certain aspects (quality factors).

The management considers the following quality factors for its services:

1. Hours and methods of performance of the service
2. Information given to the patient by the doctor about the therapeutic treatment

The Management has established a specific objective for each quality factor (Quality Standard):

1. Respect for booking time
2. Compliance with the timing indicated on the invoice

Motivation	Date
0	First Issue
03.06.2018	1
General Update	06.10.2020

Commitments and plans

The Legal Representative undertakes to periodically monitor the quality of the services offered through appropriate questionnaires to be submitted to guests and to activate specific programs to improve the quality of the service.

Waiting Lists

The Facility does not provide waiting lists for the analysis laboratory under the accreditation regime as patients present themselves directly on the day they intend to perform the service.

SECTION FOUR

Safeguards and verification mechanisms

In order to make the protection of the user effective, the Legal Representative has identified the procedures to be observed for the acceptance and settlement of complaints - in whatever form they are presented - with the drafting of a specific procedure.

Complaints

In guaranteeing the protection function, the Legal Representative offers the user the possibility of filing a complaint following a disservice, act or conduct that has denied or limited the usability of the services.

Patients have the opportunity to express their evaluation on the different aspects of the Service, enter Observations, make Complaints or propose Suggestions, on the Perceived Quality sheet and/or on the complaint form; These cards are available in the waiting room.

Complaints are addressed to the Facility Manager and/or Quality Manager during the opening hours of the Facility, by filling out the appropriate form in the waiting room.

In the event of a written complaint, a response will be made within 15 days of receipt of the request.

Patient protection bodies

The Legal Representative informs the kind users of the existence of patient protection bodies to which they can turn for any violation of their rights that they believe they have suffered at our or others' Health Facility.

The Tribunal for Patients' Rights (TDM) is an initiative of Cittadinanzattiva, founded in 1980 to protect and promote the rights of citizens in the field of health and welfare services and to contribute to a more humane, effective and rational organization of the national health service.

The TDM is

Cittadinanzattiva onlus
Via Cereate, N. 6 - 00183 Roma
Tel. 06.3671.81
Fax 06.3671.8333

Find out more about Cittadinanzattiva, its activities and its offices in the area

mail@cittadinanzattiva.it

For information on the activities of the Patients' Rights Tribunal (NOT FOR CITIZENS' REPORTS)
tdm@cittadinanzattiva.it

For information on the activities of the National Coordination of Associations of Chronically Ill
cnamc@cittadinanzattiva.it

For information on the activities of Citizens' Prosecutors (NOT FOR CITIZENS' REPORTS)
procuratori@cittadinanzattiva.it

For information on the activities of Justice for Rights (NOT FOR CITIZENS' REPORTS)
giustizia@cittadinanzattiva.it

Verification of commitments and organizational adjustments

Status of Standards Report

The Structure ensures the verification of the implementation of the commitments to improve quality standards through an Annual Review that takes into account the results achieved, both those not achieved, analyzing the causes that did not allow them to be achieved.

The Review, drawn up by the Management, with the presence of the Heads of Departments, will be made known to the staff. The purpose of the report is to monitor the progress and continuous improvement of the quality of services.

User Satisfaction Surveys

The Structure guarantees the realization of surveys on the degree of satisfaction of users by promoting the administration of questionnaires, surveys and direct observations.