

# Laboratory policy

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**Green Biotech Hellas is a B2B biology research services company active in the field since 2008, offering a wide range of innovative industrial and environmental services to companies and organizations and has been awarded the innovation award in green biotechnology in 2012, 2016, 2017 & 2023 in the EU and 2018, 2020 & 2023 in the US. Green Biotech Hellas is an accredited and certified laboratory that fully complies with international scientific standards and guidelines in the field of analytical technologies and holds the EN ISO/IEC 17025 accreditation and ISO 9001 certification. Green Biotech Hellas participates in inter-laboratory proficiency testing schemes and audits by the State General Chemistry Department, ELQA Bio & Med Labs and the International Research Cloud for Biochemistry and Biotechnology.**

## **Impartiality**

The Laboratory implements a Quality Management System that meets the requirements of the ISO/IEC 17025:2017 Standard. The Quality Policy is signed and posted. The Confidentiality Statement is signed by each staff member and is in their file. The organizational chart can be found in the Quality Manual (Version 1.1/07.06.2024). The personnel employed in the company's Laboratory perform their duties without any influence from any internal and external commercial, financial and/or other pressure, which could affect the impartiality, independence and integrity of their professional judgement, the quality of their work and the reliability of the results issued.

## **Confidentiality**

The Laboratory applies procedures to ensure the confidentiality of information concerning its clients and which become known to it during the provision of its services (including cases where the information comes from third parties), including procedures for protection, electronic storage and transmission of results. More specifically: The staff of the Laboratory sign a declaration of confidentiality (which also covers the requirements of impartiality). The declaration of confidentiality is also signed by third parties other than the staff of the Laboratory (such as subcontractors, staff of external organizations or people acting on behalf of the Laboratory) to whom, due to their duties, confidential information may be disclosed. The Laboratory keeps all records of the results in a suitably protected area. Staff use passwords to electronic files related to measurement results. Electronic files are backed up and electronic files are updated. People who do not work in the Laboratory do not enter the laboratory premises without being accompanied by Laboratory personnel. The Laboratory has taken all the necessary preventive security measures to prevent the entry of people during the hours when it is not working. The Laboratory treats information concerning its customers as confidential, even if it comes from third parties. The lab demonstrates its commitment to managing impartiality. The responsibilities and responsibilities of personnel involved in performing the analyses have been defined to avoid potential conflicts of interest and to maintain impartiality. It identifies and addresses risk to its impartiality on an ongoing basis. It includes the risk arising from its activities, its relationships, or the relationships of the staff, where it exists. If a risk to impartiality arises, the laboratory takes steps to eliminate or minimize it.

## **Management reviews**

The Quality Council Review includes all the necessary topics and the evaluation of the laboratory's procedures and services. Indicators/goals have included the number of customer complaints, successful internal and external quality control, adherence to a calibration program for measuring equipment.

## **Actions to address risks and opportunities**

The Laboratory has drawn up a Risk Management Procedure and tabulated detailed risk assessment (risk assessment). The risk of damage to main equipment, error in sending the Measurement Report, delay in delivering results to customers, old/unsuitability of the measuring equipment, etc. have been included.

## **Review of requests, tenders and contracts**

The laboratory performs analysis on customer samples according to the requests. Although the Laboratory may assign to third parties (subcontractors) part of its services (which are included in the scope of accreditation), nevertheless, in no case is this assignment of a lasting or permanent nature. Assignments to third parties can only be made in exceptional cases of customer service impossibility (e.g. workload, staff illness, lack of equipment due to shipment for verification) and if the customer wishes to be served immediately.

## **General resource requirements**

The laboratory has the personnel, facilities, equipment, systems and support services required to manage and carry out field laboratory activities.

## **Personnel**

The Laboratory Staff have documented technical competence to perform the analyses. It is authorized for all the responsibilities described in the Job Descriptions. The Quality Advisor is authorized to carry out internal inspections. According to the Personnel Management Process, personnel evaluation is done annually. Technical proficiency criteria have been added. The training program of the Laboratory for the staff is successfully implemented. There is provision for the integration of newly hired staff.

## **Facilities and environmental conditions**

The premises of the Laboratory have all the necessary electromechanical equipment required for the correct execution of the measurements. The Laboratory observes suitable environmental conditions in the areas where the measurements are carried out, which are defined in the methods and dictated by the specifications of the manufacturers of the equipment and consumables. The Laboratory staff takes the necessary protection measures against extreme conditions such as high temperature, dust, humidity, and exposure to sunlight. All laboratory areas are properly ventilated and air-conditioned. The Laboratory staff systematically records the temperature in the laboratory areas and storage areas. Measurements are not implemented when environmental conditions are outside the specified limits. The Technical Manager monitors the temperature in the Laboratory every day. He also completes the Temperature Record form which he files in the Temperatures file.

## **Equipment**

There are procedures for managing, maintaining and calibrating equipment. The laboratory's equipment is coded, suitable for the tests it implements and has been verified by an externally accredited body. The laboratory is equipped with all the equipment for the correct execution of the tests. It has an external verification program and is used by experienced staff. Equipment is properly maintained and marked, and a complete record is kept.

## **Handling of test or calibration items**

The check of receipt of the samples is done by the Technical Manager. Upon receipt of the samples, the identity of the samples, the suitability of the samples and their packaging are checked.

## **Ensuring the validity of results**

The pre-analytical and post-analytical procedures are followed according to the recorded instructions of the Quality Management System. The Laboratory successfully participates in interlaboratory schemes for testing. The Laboratory participates in inter-laboratory audits by the State General Chemistry Department and has drawn up a justified 5-year participation program in Inter-Laboratory Proficiency Testing Schemes. A satisfactory internal quality control program is in place for the test.

Dr. Dimitris Panagopoulos, CEO

