

Quality Policy



The company "IATRIKO ATHINON E.A.E." (ATHENS MEDICAL CENTER S.A.) was founded in 1984 and its founder's goal was to upgrade the level of healthcare services in the country by providing Greek society with a center for the application of the most modern technology in the field of medicine, comparable to research centers in the United States and European countries.

His intention was to ensure the conditions and prerequisites that would prevent Greek patients from seeking treatment abroad. His greatest achievement was to establish Greece's position among the largest health centers in Europe and the Balkans, a position that would ensure the admission of foreign patients even from the most advanced countries.

The "IATRIKO ATHINON E.A.E." and its affiliated entities have long been recognized for their strategic vision and development plan, which remain firmly rooted in the founding principles of integrity, consistency, respect for human dignity, and social contribution.

This Policy reflects the general principles and objectives of the Quality Management System applied to the provision of healthcare services, in alignment with international quality standards. It emphasizes the continuous assurance of up-to-date, state-of-the-art technological equipment across all hospital units of the IATRIKO ATHINON Group, the support of pioneering medical methods, the promotion of international scientific achievements, and the investment in their implementation—with full respect for human dignity, through the use of modern technology and advanced medical practices. This commitment represents a core mission of the IATRIKO ATHINON Group throughout its history.

Specifically, the Quality Management System of the IATRIKO ATHINON Group aims to maximize patient health and well-being, taking into consideration the benefits inherent in every stage of the care process. It maintains a human-centered approach, placing the patient at the core of all activities and decisions.

Through the continuous development of its individual clinics, the IATRIKO ATHINON Group aims to provide ever-improving and comprehensive healthcare services in both primary and secondary care. The Group strives to maintain its leading position, held since 1984, as one of the most reliable and advanced healthcare organizations at the national, European, and international levels. The foremost priority of the IATRIKO ATHINON Group is the delivery of evidence-based medical and nursing care, ensuring the continued trust of patients and their families in an ever-evolving healthcare environment.

ISO 9001:2015 standard

The Quality Management System of the IATRIKO ATHINON Group has been developed based on the international standard ISO 9001:2015. Responsibility for its development, operation, and continuous improvement lies with the Group's Directorate of Quality Management Systems and Clinical Performance Measurement, aiming to:

- ensure strict compliance with the applicable legal framework and all regulatory provisions governing the National Health System of the country
- Manage operations based on the real-time analysis and documentation of all processes taking place within the clinical facilities of the Athens Medical Group.
- Monitor, analyze, and compare performance indicators and outcomes with national and international data, applying a risk-based approach that is essential for the effectiveness of the Quality Management System,

in order to ensure the continuous increase of satisfaction among patients and all recipients of the services provided by the Group's clinics.

The Quality Management System of the IATRIKO ATHINON Group, beyond the developed management procedures and guidelines of the ISO 9001:2015 standard, incorporates the process model approach into its development so as to enable:

- 1. understanding and consistency in meeting requirements
- 2. viewing processes in terms of added value
- 3. achieving effective process performance
- 4. improving process effectiveness based on the evaluation of data and information, and includes:

 - □ Development of Good Practices

 - □ Group Processes and Procedures

 - Measurement of Quality and Hospital Indicators

Standard EN 15224:2017

The Group Quality Directorate, within the scope of ISO 15224:2017 implementation, is committed to:

- ensuring the protection of confidential customer information
- ensuring the protection of patients' and employees' personal data by complying with the European General Data Protection Regulation (GDPR)
- 🛮 continuously monitoring operations through a framework of indicators that are updated at regular intervals
- Monitoring and managing incidents, near misses, and adverse events
- ☑ defining and applying Key Performance Indicators (KPIs) to measure and monitor the 11 quality dimensions specified in the EN 15224:2017 standard
- Ensuring the rigorous monitoring and effective management of all clinical processes within the Unit, as well as any clinical risks associated with them
- □ Continuous improvement of the System's effectiveness
- Monitoring the clinical processes of the Clinic and integrating them into the procedures of the Sector within a specific framework of approvals and training
- ★ the continuous provision of high-quality health, safety, and customer service that complies with the requirements of the 11 dimensions of quality as described in EN 15224:2017:
 - √ Appropriate and correct care
 - √ Availability
 - √ Continuity of care
 - √ Effectiveness
 - √ Efficiency (cost-effectiveness, etc.)
 - / Equity



- √ Evidence-based, protocol-based
- Patient-centered care (including physical, psychological, and social integrity)
- √ Patient involvement
- √ Patient safety
- √ Timeliness/accessibility

ISO 22000:2018 standard

To ensure food hygiene and quality, the IATRIKO ATHINON Group has implemented the ISO 22000:2018 Food Service Management System with high individual assurance and control objectives, in line with the broader quality objectives of the Clinic, as a leader in the field of health. More specifically, through this Management System, all risks related to food quality, hygiene, and food safety. To determine and manage the relevant risks, as well as the Critical Control Points (CCPs), the need to care for hospitalised patients, the applicable legislation, the recommendations of the competent authorities, and the resulting scientific data are considered first and foremost.

The Group's Directorate of Quality Management Systems is responsible for developing and continuously improving the ISO 22000:2018 system, while overall responsibility for the operation and strict compliance with ISO 22000:2018 is assigned to the local Food Safety coordination teams of the clinics, which operate under the supervision of the Hospital Infection Committees and are provided with the corresponding responsibilities assigned to them. To achieve the above, the Management is committed to ensuring that the policy on Food Quality, Hygiene, and Safety is understood, implemented, and adhered to at all levels of the Hospital's organization. It is committed to supporting the Hospital Infections Committee, the Quality Department, and the Food Safety coordination teams with all the necessary means and resources so that:

- ★ the ISO 22000:2018 system operates efficiently and consistently fulfils its intended purpose.
- In the effectiveness of the System is periodically reviewed to ensure that any necessary corrective actions are implemented
- ★ the organoleptic quality (appearance, taste, etc.) to which we are committed
- ★ the implementation of an environmental culture and policy that reflects corporate awareness, current trends, and obligations for environmental protection
- ★ the Food Safety Management System (FSMS), its processes, and objectives are continuously reviewed to align with the evolving external business environment
- ensuring the professional competence of both external and internal partners
- □ all those involved adhere to the ISO 22000:2018 System Procedures and actively contribute to its consistent establishment and continual improvement.

ISO 15189:2022 Standard

The IATRIKO ATHINON Group, wishing to ensure the provision of reliable tests, has installed a Quality System in accordance with ISO 15189:2022 at the Biopathological Laboratory of the Marousi Clinic, the applicable regulatory and legislative provisions, as well as any other specifications related to the Laboratory's activities.

The Management of the Group and the Clinic is committed to supporting the operation of the Quality System, which has been established in accordance with the ISO 15189:2022 standard, and to continually improving its effectiveness related to quality, by providing all necessary resources to:

- 🛛 continuously enhance the quality of the Laboratory's services
- Maintain excellent infrastructure and facilities

- □ uphold good professional practice
- comply with the principles of internationally accepted scientific
 ethics and standards of conduct
- Maintaining impartiality and integrity
- ensuring staff confidentiality regarding patient data
- ensuring the quality of examinations performed, aiming to achieve and sustain the highest possible level of quality in the services provided
- □ Continuously increase the Laboratory's contribution to delivering reliable results and meeting the needs and expectations of all service recipients.

The effective operation of the Laboratory is based on the consistent implementation of the Quality System's policies and procedures, and on the fact that all personnel affecting quality are aware of, and properly trained in, the application of the procedures related to their respective duties. Each employee, by utilizing the training provided and the resources made available, is required to be familiar with and comply with the Quality System procedures, to contribute to its continual establishment and improvement, and to meet the needs and requirements of the Laboratory's service recipients. All personnel must act with impartiality, maintain the required confidentiality regarding patient data, and adhere to all applicable legal and regulatory requirements.

This Policy was approved by BoD Decision No. 904 dated 29/09/2025 and shall be revised whenever deemed necessary.