



Adottata dal Direttore Generale in data - 5 LUG. 2017

Oggetto: Affidamento servizio di verifica ispettiva ai fini del mantenimento dell'accREDITAMENTO JACIE, per il Centro di raccolta di cellule staminali – Aferesi, del Servizio Immunotrasfusionale dell'AOB. Art. n. 36, comma 2, lett. a) del D. Lgs n. 50/16. Operatore Economico JACIE Accreditation Office. Spesa complessiva € 9.750,00=Iva esclusa. Codice Cig ZA51EECD12.

Il Direttore Generale Dott. ssa Graziella Pintus
Coadiuvato dal
Direttore Amministrativo Dott. ssa Laura Balata
Direttore Sanitario Dott. Vinicio Atzeni

- 6 LUG. 2017

PUBBLICATA ALL'ALBO DELL'AZIENDA OSPEDALIERA "G. BROTZU" A PARTIRE DAL _____ per 15 gg. consecutivi e posta a disposizione per la consultazione.

Il Direttore Amministrativo

Su proposta del Servizio Acquisti Beni e Servizi;

Premesso che con atto deliberativo n. 586 del 29.07.2011 è stata assegnata, alla Ditta JACIE (Joint Accreditation Committee Isct Ebmt), la procedura di accREDITAMENTO agli standards di eccellenza europei, del Centro di raccolta di cellule staminali periferiche dell'AOB, per un importo complessivo pari a € 4.500,00=Iva esclusa (All. "A" fg. 3);

Dato atto che con nota prot. n. 159 del 07.06.2017 il Direttore del Servizio di Immunoematologia e Centro Trasfusionale, con il parere favorevole del Direttore Generale e del Direttore Sanitario dell'AOB, ha richiesto l'affidamento, alla Ditta JACIE, del servizio di verifica ispettiva, finalizzato al mantenimento dell'accREDITAMENTO per il Centro di raccolta di cellule staminali - Aferesi dell'AOB (All. "B" fg. 8);

Visto il preventivo n. C0000027 del 18.05.2017, emesso dalla Ditta Jacie, la quale si è resa disponibile ad effettuare n. 1 visita ispettiva, finalizzata al mantenimento dell'accREDITAMENTO del Centro di raccolta di cellule staminali periferiche dell'AOB, per un importo complessivo pari a € 9.750=Iva esclusa (All. "D" fg. 1);

Ritenuto pertanto, di dover affidare, ai sensi dell'art. 36, comma 2, lett. a) del D. Lgs n. 50/16, in favore della Ditta JACIE, il servizio di visita ispettiva, finalizzato al mantenimento dell'accREDITAMENTO del Centro di raccolta di cellule staminali periferiche – Aferesi dell'AOB, per un importo complessivo pari a € 9.750,00=Iva esclusa;

Visti il D. lgs n. 50/16 e la L.R. 10/06;

Con il parere favorevole del Direttore Amministrativo e del Direttore Sanitario;



Segue delibera n. 1370 del - 5 LUG. 2017

DELIBERA

Per i motivi esposti in premessa:

1. di affidare, ai sensi dell'art. 36, comma 2, lett. a) del D. Lgs n. 50/16, in favore della Ditta JACIE, il servizio di visita ispettiva, finalizzato al mantenimento dell'accreditamento del Centro di raccolta di cellule staminali periferiche dell'AOB, per un importo complessivo pari a € 9.750,00=Iva esclusa;
2. di dare atto che l'importo di € 9.750,00=Iva esclusa verrà imputato al conto n. A506030401 del Piano dei Conti – Centro di Costo P.O. San Michele 180320;
3. di dare atto che l'esecuzione del relativo contratto avrà inizio contestualmente alla pubblicazione del presente atto, ai sensi dell'art. 32, comma 13 del D.Lgs. n. 50/2016;
4. di autorizzare il Servizio Amministrativo dell'Azienda all'emissione dei relativi ordini di pagamento, a seguito di presentazione dei giustificativi recanti l'attestazione di regolarità della fornitura e dei lavori da parte degli Uffici competenti;

Il Direttore Amministrativo
Dott. ssa Laura Balata

Il Direttore Sanitario
Dott. Vinicio Atzeni

Il Direttore Generale
Dott. ssa Graziella Pintus



REGIONE AUTONOMA DELLA SARDEGNA
Azienda Ospedaliera Brotzu

29 LUG. 2011

Deliberazione n. 586

Adottata dal Direttore Generale in data

OGGETTO: Affidamento diretto - Ditta Jacie - per la procedura di accreditamento "Jacie" per il Centro raccolta di cellule staminali-Aferesi - Servizio Immunotrasfusionale, per un importo complessivo di euro 4.500,00+iva di legge se prevista. CIG 3043815B96
Art. 29 comma 2 L.R. n.10 del 28.07.06

IL DIRETTORE GENERALE Dr. Antonio Garau

Coadiuvato dal:

Direttore Amministrativo: Dr. Bruno Simola

Direttore Sanitario: Dr. Remigio Puddu

PUBBLICATA ALL'ALBO DELL'AZIENDA OSPEDALIERA "G. BROTTU" A PARTIRE DAL 29 LUG. 2011
per 15 gg. consecutivi e posta a disposizione per la consultazione.

Il Direttore Amministrativo

SU proposta del Servizio Provveditorato;

CONSIDERATO che la Struttura di Aferesi dell'Unità Operativa del Servizio Immunotrasfusionale è riconosciuta sia dal Cento Regionale Trapianti che dal Registro Italiano IBMDR come unico centro di riferimento in Sardegna per la raccolta di cellule staminali emopoietiche circolanti ai fini di trapianto allogenico e autologo;

ATTESO che con nota n.243 del 19/07/11 il Direttore del Servizio di Immunoematologia e il Capo Dipartimento hanno richiesto la procedura di accreditamento Jacie (joint accreditation committee isct ebmt) per il Centro raccolta di cellule staminali-Aferesi suddetto (all. A fg1),

CONSIDERATO che l'unica Azienda che può certificare tale servizio è la Jacie di cui si allega il preventivo di spesa, richiesto per le vie brevi, sotto la lettera B fg.1 per un importo complessivo di € 4.500,00 +iva di legge se prevista;

RITENUTO pertanto di dover procedere all'accREDITAMENTO Jacie a favore della ditta medesima per un importo complessivo pari ad euro 4.500,00;

VISTE le LL.RR. n° 10/06 e n° 10/97, il DPGR n° 168/96 ed il D.lgs 163 del 12.04.2006;

CON il parere favorevole del Direttore Sanitario e del Direttore Amministrativo;

D E L I B E R A

- 1) affidare alla ditta Jacie, per i motivi esposti in premessa, la procedura di accreditamento "Jacie" per un importo complessivo pari ad euro 4.500,00 +iva di legge se prevista, spesa che graverà sul n. 0506030105 del Piano dei Conti;
- 2) di autorizzare il Servizio Amministrativo all'emissione dei relativi ordini di pagamento dietro presentazione della documentazione giustificativa recante l'attestazione di regolarità della fornitura da parte degli uffici competenti;
- 3) di comunicare l'adozione del presente atto all'assessorato igiene e sanità ai sensi dell'art. 29 comma 2 della L.R. n.10 del 28.07.2006.

IL DIRETTORE AMMINISTRATIVO
Dott. Bruno Simola

IL DIRETTORE SANITARIO
Dr. Remigio Puddu

IL DIRETTORE GENERALE
Dr. Antonio Garau

Direttore Servizio Provveditorato: Dr. G. Casu.
Resp. del Proc.: Dr.ssa B. Martino

Handwritten initials



Azienda Ospedaliera Brotzu Cagliari

SERVIZIO PROVVEDITORATO
20 LUG. 2011
Prot. N. 2817

Dipartimento dei Servizi Speciali di Diagnosi e Cura
Direttore Dott. Pierapolo Bacchiddu

Struttura Complessa

Servizio di Immunoematologia e Centro Trasfusionale
Direttore Dott. Mario Pani

Prot. n° 243 del 19-07-2011

Azienda Ospedaliera "G. BROTTU"
CAGLIARI
DIREZIONE SANITARIA
19 LUG. 2011
Prot. N° 3420

Al Sig. Direttore Sanitario
Dott. Remigio Carlo Puddu
Sede

Oggetto: accreditamento Jacie del Centro Raccolta cellule staminali emopoietiche circolanti.

La Struttura di Aferesi di codesta Unità Operativa è riconosciuta, sia dal Centro Regionale Trapianti sia dal Registro Italiano IBMDR come unico centro in Sardegna di raccolta di cellule staminali emopoietiche circolanti ai fini di trapianto allogenico e autologo.

L'attività del Centro oltre che regionale e nazionale, ha anche valenza internazionale poiché le cellule staminali raccolte possono essere richieste da ogni parte del mondo.

Si ricorda che il nostro Centro Prelievi supporta nella sola Cagliari ben tre Centri Trapianto di midollo e cellule staminali. Per i motivi sopra esposti onde poter proseguire l'attività è necessario ottenere l'accreditamento Jacie (joint accreditation committee isct ebmt).

Per tutto il 2010 e 2011 i medici e il personale si sono dedicati alla stesura delle procedure, dei manuali di istruzione e della qualità per il raggiungimento di tale attestato.

A ottobre p.v. è prevista la visita ispettiva dei supervisor Jacie per la quale si invia pertanto preventivo di spesa.

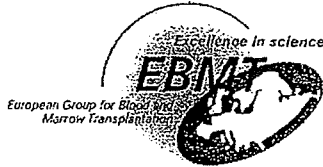
Distinti saluti

Il Direttore

Dott. Mario Pani

19-7-11
S.A.Z. osp. Brotzu
IL DIRETTORE SANITARIO
D. Remigio C. Puddu

9 LUG. 2011
Direttore del Dipartimento
dei Servizi Speciali di Diagnosi e Cura
DOTT. PIERAPOLO BACCHIDDU



ALL. " A " Pag. N. 3 dir. 3

ALL. " B " Pag. N. 1 di Fig. 1

INVOICE

fac simile

JACIE
joint accreditation committee
iscrt ebmt

European Group for Blood & Marrow Transplantation
JACIE Accreditation Office
C/ Rosselló 140, 1º-1ª
E-08036 Barcelona
SPAIN
Tel.: +34-93-453-8711
Fax.: +34-93-451-9583
jacie@ebmt.org

Azienda Ospedaliera Brotzu
Struttura semplice funzionale di aferesi
Piazzale Ricchi 1
09134 Cagliari
Italy

Invoice date. 02/06/2011
Invoice ref. JACIE-375

Your VAT no. IT02315520920

| Description | Total (Euro) |
|---------------------------|----------------------|
| Registration Fees | 1.500,00 |
| Collection Apheresis Unit | 2.000,00 |
| Interim Audit | 1.000,00 |
| Total | Euro 4.500,00 |

Full payment is due within 30 days of the invoice date.

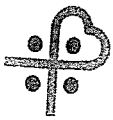
Please transfer the amount payable to:

Account Name: JACIE/E.B.M.T./Cornelissen
Bank: Rabobank
Address: Maastricht, The Netherlands
IBAN: NL87RABO0129252638
BIC: RABONL2U
Payment currency: Euro
EBMT VAT No: NL 804217257

- Please include the invoice reference when making payment
- Please note that we are unable to accept payment by cheque
- Please use the IBAN and BIC code when making payment

Netherlands VAT has not been charged on the JACIE accreditation application fee. This is based on the reverse charge mechanism of article 21-1-b of the 6th EU VAT Directive. The accreditation service provided is subject to VAT in the country where the centre is registered. Please ensure any local VAT regimes are respected.

EBMT Registered Office:
P.O. Box 3151, 6202 ND Maastricht, The Netherlands, Maastricht, The Netherlands
Registration Number: 41166105 • VAT Number: NL 804217257B01



AO Brotzu

Struttura Complessa
Servizio di Immunoematologia e Centro Trasfusionale
Direttore Dott. Mario Pani

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Sistema Sanitario
Regione Sardegna

Dipartimento Servizi

Prot. n° 158 del 07/06/2012

Alla Cortese Attenzione della dott.ssa Agnese Foddis

Oggetto: Pagamento fattura Ente Accrediatore JACIE

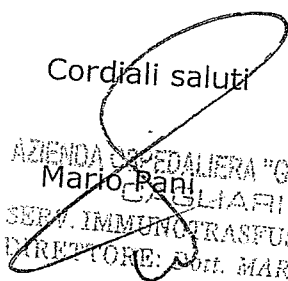
Si chiede cortesemente di provvedere al pagamento dell'allegata fattura a favore del JACIE, Ente preposto all'accreditamento dei Piani Trapianto di Midollo Osseo e dei Centri di Raccolta di Cellule Staminali Periferiche ai fini del trapianto.

Tale accreditamento è necessario per poter continuare l'attività di raccolta, senza la quale non potrebbero essere svolte le normali attività trapiantologiche.

Questa struttura è già in possesso dell'accreditamento JACIE, che deve essere rinnovato, come da protocollo, ogni 4 anni.

Si allega il parere favorevole del Direttore Generale dell'Azienda, Dott.ssa Graziella Pintus, e del Direttore Sanitario aziendale, Dott. Vinicio Atzeni.

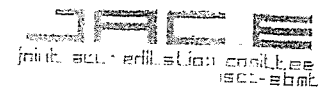
Cordiali saluti


AZIENDA OSPEDALIERA "G. BROTZU"
CAGLIARI
SERV. IMMUNO-TRASFUSIONALE
DIRETTORE: Dott. MARIO PANI

Sistema Sanitario Regione Sardegna
Azienda Ospedaliera G. Brotzu
P.le Ricchi, 1 - 09134 - Cagliari
P.iva: 02315520920

Struttura Complessa
Servizio di Immunoematologia
Tel./fax 070 539246
Mail: sitcagliari@aob.it

Ospedale San Michele
P.le Ricchi, 1
09134 - Cagliari
www.aobrotzu.it



Standard Agreement for JACIE Accreditation

Related document: quotation for application fees ID 2017040

The parties in this agreement are:

The European Society of Blood and Marrow Transplantation, hereafter referred to as 'the EBMT', established in Leiden, The Netherlands, and being the legal entity for the Joint Commission of the ISCT and EBMT, a Committee of the EBMT, hereafter referred to as "JACIE", legally represented by the EBMT Executive Director

and

[INSTITUTION] STRUTTURA SEMPLICE FUNZIONALE DI AFERESI, SERVIZIO DI IMMUNOEMATOLOGIA E CENTRO TRASFUSIONALE, AZIENDA OSPEDALIERA BROTZU, (JACIE ID¹ [781]) hereafter referred to as "the applicant", established in [CITY] CAGLIARY, ITALY and legally represented by [NAME & FAMILY NAME]:

[POSITION]: DIRETTORE GENERALE

AZIENDA OSPEDALIERA "G. BROTZU"
IL DIRETTORE GENERALE
Dot. ssa Graziella Pintus
Graziella Pintus

Given that

- The EBMT, through the work of the JACIE Committee and the JACIE accreditation programme, has the goal of contributing to the improvement of the quality of care and services related to haematopoietic cellular therapy provided by transplant programmes and facilities;
- JACIE offers accreditation of compliance with international standards by periodically inspecting transplant programmes or their component units and sites on request, via a standardised and established process and on the basis of pre-established standards
- The applicant wishes to participate in the JACIE accreditation programme;
- JACIE awards accreditation to the applicant if conformity is determined to exist with the standards;
- A durable relationship is required between the EBMT and the applicant characterized by integrity, trust and rigour;

The parties therefore wish to establish the rights and obligations in this agreement and have agreed to the following:

1. Participation in accreditation programme

1.1. JACIE will assess the applicant's activities for conformity with the edition of the FACT-JACIE International Standards valid at the time of the application and will apply the

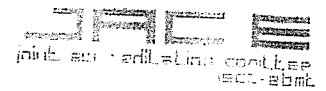
¹ Provided by the JACIE Office

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Alena

Name of Document: F-009-03-Standard
Agreement for JACIE Accreditation-
781.docx
Approved by: Eoin McGrath
Responsible: Eoin McGrath
Entry: Apply for JACIE Accreditation

Creation date: 22/12/2015
Effective date: 07/03/2016
Review date: 30/03/2016
Modification: include signature

ALL. " § " Pag. N. 3 di Fig. 8



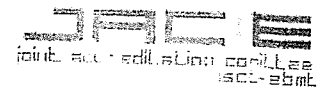
Standard Agreement for JACIE Accreditation

- pre-established and publicised procedure and method to all centres in an equal manner. All of the activities in relation to this procedure will hereafter be referred to as the 'accreditation process'
- 1.2. By participating in the programme, the applicant agrees to meet the obligations in or pursuant to this agreement.
 2. **Respective obligations in the accreditation process**
 - 2.1. JACIE shall assign an Accreditation Coordinator who will serve as the principle contact person in JACIE for the applicant.
 - 2.2. The applicant will designate a contact person for each accreditation cycle to communicate on behalf of the applicant and will notify JACIE of any changes to this contact in a timely manner.
 - 2.2.1. JACIE will not be responsible for internal communication within the applicant's team
 - 2.3. The applicant shall give JACIE and its representatives all the cooperation necessary within reason to carry out the accreditation process and in particular in determining whether the applicant meets the requirements set by JACIE.
 - 2.4. JACIE shall ensure to the best of its abilities that all tasks within the accreditation process are performed by persons qualified to do this.
 - 2.5. JACIE will nominate an inspection team to perform the on-site inspection of the applicant's facilities.
 - 2.5.1. The applicant will be invited to consult the public list of JACIE inspectors and indicate to JACIE those inspectors to whom the applicant objects to participating in the inspection team on the grounds of conflict of interest or other reasons.
 - 2.5.1.1. JACIE reserves the right to seek further information on the reasons for rejection of inspector candidates and to assess whether the objection is reasonable.
 - 2.6. The applicant will provide the JACIE inspection team with all the information, arrange for the cooperation of all members of staff, offer documents for inspection – within the limits of any applicable legal regulations – and give JACIE access to all areas that require inspection in order to adequately follow the accreditation process. The applicant is also expected to proactively provide any information which they reasonably understand to be important for the assessment of compliance.
 - 2.7. The applicant will facilitate the task of the JACIE inspection team including but not limited to providing access to relevant information sources, private meeting space, meals and refreshments, and electrical power supply.
 - 2.8. JACIE will ensure that the provision of the Summary Report and the decision about accreditation status take place within a reasonable amount of time (expected to be within 90 days of the inspection ending)

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ALL " 3 " Pag. N. 4 of Pg. 8




Standard Agreement for JACIE Accreditation

3. Accreditation status

- 3.1. Should JACIE determine that the applicant meets the standards, JACIE will award accreditation for a specific period of time for the sites and activities indicated in the Application Form and subjected to inspection and assessment.
 - 3.1.1. JACIE reserves the right to place conditions on the accreditation status in the form of time period or required actions.
- 3.2. Until the applicant has received formal notification of accreditation from the JACIE Office in the form of the accreditation certificate and letter, the applicant is not permitted to communicate or create the impression that they have been granted accreditation.
- 3.3. The accreditation status will be granted for a specific period but not exceeding 4 years from final confirmation by the Accreditation Committee that they are satisfied that all aspects have been assessed to be compliant with the Standards.
- 3.4. For each specific period, the applicant will receive an accreditation certificate from JACIE stating the accreditation status of the applicant and which activities are covered by the accreditation drawn from the list below:
 - Autologous & Allogeneic Transplantation in Adult Patients
 - Autologous & Allogeneic Transplantation in Paediatric Patients
 - Collection of HPC, Marrow
 - Collection of HPC, Apheresis
 - Cell Processing - minimally manipulated
- 3.5. The applicant shall not use the accreditation information in such a manner as to bring JACIE into disrepute and shall not make any statement regarding accreditation that JACIE may consider misleading or unauthorized.
- 3.6. The applicant may use the logo of JACIE within the guidelines of JACIE, using the format as provided by JACIE free of charge.
- 3.7. When, during the terms of validity of the accreditation status, facts or circumstances occur or change or facts or circumstances become known which the applicant in all reasonableness understands to be important for the judgement of JACIE about the accreditation status or the conditions attached to it, the applicant will report them to JACIE in writing within one month after such fact becomes known or such circumstances change.
- 3.8. JACIE may decide to suspend or withdraw the accreditation status on the grounds of one or several of the following circumstances:
 - 3.8.1. the applicant not meeting the conditions attached to the accreditation status by JACIE;
 - 3.8.2. the discovery of facts and circumstances about the applicant which are of such a serious nature that they lead to the presumption that the accreditation status cannot be maintained.

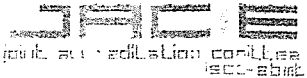
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| ALL." 8 " Pag. N. 5 di Fig. 8 |
|  Joint Accreditation Committee EBMT |

Standard Agreement for JACIE Accreditation

- 3.8.2.1. JACIE reserves the right to grant the applicant a period of time in which the situation must be resolved, and during which period accreditation will be suspended;
- 3.9. The decision for suspension or withdrawal comes into force as soon as this decision and the reasons for it are communicated to the health care organisation via certified mail or post. In the decision, JACIE will state the procedure and period of time in which the applicant can appeal the decision.
- 3.10. In the case of and during the period of the suspension or following withdrawal, the applicant is not permitted to communicate or give the impression that they continue to maintain their accreditation status.
- 4. Publicity and confidentiality**
- 4.1. JACIE shall not divulge the status of a centre's application, except its accreditation status, to third parties without the express permission of the applicant.
- 4.2. Accredited centres will be listed publically on the JACIE web site indicating the valid dates and accredited activities.
- 4.3. With due regard to the publication policy, JACIE will observe confidentiality about all the knowledge gained about the organisation in the context of the accreditation process. This is in relation to all information which is not legally accessible for the public or third parties. For this purpose, JACIE will have all persons connected to JACIE, in whatsoever capacity, sign a declaration of confidentiality, which remains in force after the affiliation with JACIE has ceased.
- 4.4. JACIE will file information about the organisation in a reliable manner which is not accessible for unauthorized persons and should the case arise, ensure that it is adequately destroyed.
- 5. Payments**
- 5.1. The organisation will remunerate EBMT with a registration fee and an accreditation fee at the time of application and in advance of the scheduled inspection date. Fees are based on the fees established by the Board of EBMT as published on the JACIE web site on the invoice date. Payment is required within 30 days of when JACIE issues the invoice to the organisation. Non-payment of fees within the 30 day period may result in the application process being suspended.
- 5.2. Acceptance of this agreement implies acceptance of the accreditation fees as indicated in Quotation ID 2017040 referred to at the start of this document.
- 5.3. In the registration fee and the accreditation fee, all the costs for the accreditation programme are included with the exception of expenses associated with follow-up onsite visits other than the full inspections. In the event of a revisit being required following the full inspection, travel, subsistence and accommodation costs of the inspectors will be charged to the organisation.
- 5.4. The Registration Fee is non-refundable.

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| Name of Document: F-009-03-Standard Agreement for JACIE Accreditation-781.docx Approved by: Eoin McGrath Responsible: Eoin McGrath Entry: Apply for JACIE Accreditation | Creation date: 22/12/2015 Effective date: 07/03/2016 Review date: 30/03/2016 Modification: include signature | ALL " 9 " Pag. N. 6 di Eq. 8  |
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Standard Agreement for JACIE Accreditation

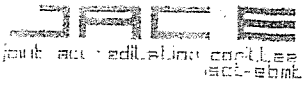
- 5.5. If there is a considerable change in the size or function of the organisation that may affect the accreditation fee (for example, in the case whereby the number of locations and/or care provisions change) the organisation shall notify JACIE so that any necessary adjustments can be made.
- 5.6. If the agreement is terminated for whatever reason, then the obligations which were already due should be met and there will be no right to restitution for payments which have already been met on account of this agreement.
- 5.7. If the organisation wishes to restart a paused application after 12 months from date of approval by JACIE and if JACIE fees have increased since the date of application, the applicant must pay any difference between the previous fees and the fees at the time of resubmitting the application.

6. Liability

- 6.1. The EBMT is not liable for any damage the organisation suffers during the accreditation process, unless intentional or gross negligence can be said to exist on the part of one or more persons appointed by JACIE.
- 6.2. The EBMT is not liable for any repercussions the organisation suffers by participating in the accreditation programme, through JACIE granting, continuing or deferring the accreditation status or not and through EBMT continuing or terminating this agreement.
- 6.3. The organisation safeguards the EBMT from all agreements with third parties which stem from the participation of the organisation in the accreditation programme and the decisions which JACIE takes in this context.
- 6.4. Payment of application fees does not guarantee that accreditation will be granted. Accreditation is subject to demonstrated compliance with the standards and approval by the Accreditation Committee.

7. Duration and termination of agreement

- 7.1. This agreement applies to the duration of the accreditation process and any eventual accreditation award period related to the application for accreditation.
- 7.2. Terminating the agreement on the part of EBMT shall not take place other than on the following grounds:
 - 7.2.1. If the organisation persistently, and despite repeated appeals, does not promptly or adequately meet one or more of the obligations in this agreement;
 - 7.2.2. Failure by the applicant to progress to an onsite inspection within twelve (12) months from approval of the application by JACIE
 - 7.2.3. If, during a continuous period of at 12 months from issuance of the Summary Report, the organisation has not achieved accreditation and no reasonable prospect exists that the organisation will be granted it;

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| Name of Document: F-009-03-Standard Agreement for JACIE Accreditation-781.docx Approved by: Eoin McGrath Responsible: Eoin McGrath Entry: Apply for JACIE Accreditation | Creation date: 22/12/2015 Effective date: 07/03/2016 Review date: 30/03/2016 Modification: include signature | ALL. " B " Pag. N. 7 di Fog. 8  |
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Standard Agreement for JACIE Accreditation

- 7.2.4. If facts, circumstances or behaviour occur at the organisation whereby JACIE in all reasonableness cannot be expected to continue the agreement.
 - 7.3. The organization may terminate this Agreement at any time for an objectively justified reason upon thirty (30) days prior written notice to EBMT.
 - 7.4. After terminating the agreement, the organisation is not permitted to communicate or give the impression that it has achieved JACIE accreditation.
- 8. Changes to the agreement and unforeseen circumstances**
- 8.1. The terms and conditions of this agreement may only be amended by the mutual written consent of the parties to this agreement. For avoidance of doubt EBMT reserves the right to amend the accreditation standard as referred to in Clause 3.1 hereinabove (among others) unilaterally at its sole discretion..
 - 8.2. Where circumstances arise which are not described in this agreement, the EBMT Board will arrive at a decision, after having received a written notification from the organisation describing their position.
- 9. Disputes**
- 9.1. Complaints about the implementation of the accreditation process, about the publication of information about the organisation or any other aspect of how JACIE functions, can be lodged with JACIE and will be dealt with according to the procedure regarding complaints and appeals.
 - 9.2. Appeals against decisions by EBMT can be registered with EBMT and will be dealt with according to the procedure regarding complaints and appeals.
 - 9.3. Dutch law is applicable to this agreement.
 - 9.4. All disputes which may occur as a result of this agreement will exclusively be submitted to the competent court in The Hague, The Netherlands.

Drawn up and signed in duplicate:

On behalf of << INSTITUTION >>

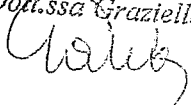
Name: GRAZZIELLA PINTUS

Position: DIRETTORE

In: CAGLIARI

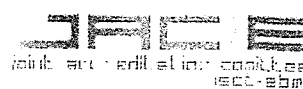
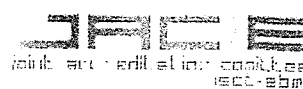
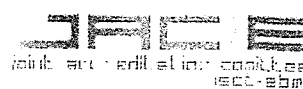
Date: 6/06/2014

Signature:

AZIENDA OSPEDALIERA "G. BROTZU"
IL DIRETTORE GENERALE
Dot.ssa Graziella Pintus


On behalf of EBMT:

Name: Andreu Gusi, MA

| | | | | | | | | |
|--|---|--|----------|-------------|----------|---|--|--|
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| ALL. " 3 | " Pag. N. 8 | di Fg. 8 | | | | | | |
|  <small>Joint Accreditation Committee</small> | | | | | | | | |

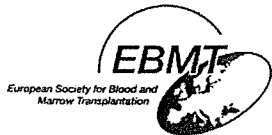
Standard Agreement for JACIE Accreditation

Position: Director

In: Barcelona

Date:

Signature:



European Society for Blood and Marrow Transplantation
JACIE Accreditation Office
jacie@ebmt.org

Azienda Ospedaliera Brotzu
Struttura semplice funzionale di aferesi
Piazzale Ricchi 1

09134 Cagliari
Italy

QUOTATION

Quotation date : 18/05/2017
Quotation ref. : **C0000027/2017040**
VAT No: NL 8143.70.822.B01

Your VAT no. IT02315520920

| Description | VAT | Total (Euro) |
|----------------------------|--------------------|----------------------|
| 2017 inspection fee 1 area | 0 % | 9.750,00 |
| Total (excl. VAT) | | 9.750,00 |
| | VAT reverse charge | 0,00 |
| Total (incl. VAT) | | Euro 9.750,00 |

If VAT reverse charge has been applied, this is according EU VAT Directives. The accreditation service provided is subject to VAT in the country where the centre is registered. Please ensure any local VAT regimes are respected.