4. General Requirements

4.1 Impartiality

4.1.1 *Laboratory activities shall be undertaken impartially and structured and managed so as to safeguard impartiality.*

4.1.2 *The laboratory management shall be committed to impartiality.*

Conflict-of-interest agreements shall be established along with appropriate conflict-of-interest training programs for personnel. Training shall consist of initial and refresher training. The laboratory shall define a schedule for refresher training and renewal of conflict-of-interest agreements.

Note*:* Conflict of interest can exist in multiple places, including, but not limited to, consultants, employees, business owners, laboratory investors, and financial or personnel interest in other related businesses, such as cultivation facilities, product manufacturers, testing laboratories, retail, etc.

4.1.3 *The laboratory shall be responsible for the impartiality of its laboratory activities and shall not allow commercial, financial or other pressures to compromise impartiality.*

4.1.4 *The laboratory shall identify risks to its impartiality on an on-going basis. This shall include those risks that arise from its activities, or from its relationships, or from the relationships of its personnel. However, such relationships do not necessarily present a laboratory with a risk to impartiality.*

Note 1: A relationship that threatens the impartiality of the laboratory can be based on ownership, governance, management, personnel, shared resources, finances, contracts, marketing (including branding), and payment of a sales commission or other inducement for the referral of new customers, etc.

Note 2: Impartiality can be compromised in many situations, for example, the laboratory feels pressured to release test results without full quality assurance or defensibility of data or testing; personnel performing multiple roles, for example, laboratory operations and management or sales personnel who review and authorize release of test data.

4.1.5 *If a risk to impartiality is identified, the laboratory shall be able to demonstrate how it eliminates or minimizes such risk.*

4.2 Confidentiality

4.2.1 *The laboratory shall be responsible, through legally enforceable commitments, for the management of all information obtained or created during the performance of laboratory activities. The laboratory shall inform the customer in advance, of the information it intends to place in the public domain. Except for information that the customer makes publicly available, or when agreed between the laboratory and the customer (e.g., for the purpose of responding to complaints), all other information is considered proprietary information and shall be regarded as confidential.*

4.2.2 *When the laboratory is required by law or authorized by contractual arrangements to release confidential information, the customer or individual concerned shall, unless prohibited by law, be notified of the information provided.*

Note **(CANNABIS)**: The laboratory shall notify the customer or individual concerned when customer data and other confidential information is required to be released to a third-party database, such as METRC, LEAF, or other regulatory specified system.

4.2.3 *Information about the customer obtained from sources other than the customer (e.g., complainant, regulators) shall be confidential between the customer and the laboratory. The provider (source) of this information shall be confidential to the laboratory and shall not be shared with the customer, unless agreed by the source.*

4.2.4 *Personnel, including any committee members, contractors, personnel of external bodies, or individuals acting on the laboratory's behalf, shall keep confidential all information obtained or created during the performance of laboratory activities, except as required by law.*

5. Structural Requirements

5.1 *The laboratory shall be a legal entity, or a defined part of a legal entity, that is legally responsible for its laboratory activities.*

The cannabis or hemp testing laboratory shall be registered as a legal business operating within and compliant with applicable regulatory requirements established by local, jurisdictional, state, provincial and/or federal specifications.

Note: For the purposes of this document, a governmental laboratory is deemed to be a legal entity on the basis of its governmental status.

5.2 *The laboratory shall identify management that has overall responsibility for the laboratory.*

5.3 *The laboratory shall define and document the range of laboratory activities for which it conforms with this document. The laboratory shall only claim conformity with this document for this range of laboratory activities, which excludes externally provided laboratory activities on an ongoing basis.*

5.4 *Laboratory activities shall be carried out in such a way as to meet the requirements of this document, the laboratory's customers, regulatory authorities and organizations providing recognition. This shall include laboratory activities performed in all its permanent facilities, at sites away from its permanent facilities, in associated temporary or mobile facilities or at a customer's facility.*

5.5 *The laboratory shall:*

(a) define the organization and management structure of the laboratory, its place in any parent organization, and the relationships between management, technical operations and support services;

(b) specify the responsibility, authority and interrelationship of all personnel who manage, perform or verify work affecting the results of laboratory activities;

(c) document its procedures to the extent necessary to ensure the consistent application of its laboratory activities and the validity of the results.

For cannabis laboratories, the laboratory shall define quality management personnel to:

(a) Manage laboratory activities to ensure compliance, reduce and manage occurrences of nonconformances, and seek continual process improvement and effectiveness to the management system