



**progettonemo**  
PER L'ETÀ EVOLUTIVA



**progettomaia**  
CURA ED ASSISTENZA DOMICILIARE

# Service Charter

Edition 1.0 – september 2021

*Dear User,*

*I am pleased to present the Service Charter of the Rehabilitation and Home Care Center "Progetto NEMO and Progetto MAIA" in Gaeta.*

*This document, with the valuable participation of our Assisted Users, allows us to provide you with a better service and offer all necessary and relevant information.*

*Our daily goal is to offer you qualified assistance through the experience, professionalism, and humanity of everyone working in our Organization.*

*The commitment of everyone enables the facility to implement ISO 9001:2015 Quality Certification, which guarantees the quality and efficiency of the services provided.*

*We thank you again for your collaboration and remain at your complete disposal for any information or needs not covered in this document.*

*Medical Director*

## **Authorization Titles:**

*Determination of Lazio Region G06717 of 04/06/2021*

*Health Authority: Latina*

## **Headquarters and Contacts:**

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## **Roles and Responsibilities:**

**Medical Director:** Antonio PARISI (Neurologist)

**Specialist Doctor:** Matteo ROSSO (Child Neuropsychiatrist)

**Medical Coordinator:** Sergio DI RUSSO (Orthopedic)

**Administrative Director:** Raffaella LA ROCCA

**Service Coordinator:** Giuseppe Errico

**Outpatient Services Coordinator:** Giuseppina Avitabile

**Home Services Coordinator:** Rosamaria MARZULLO

**Head of Protection and Prevention System:** Cristian LECCESE

**Quality Management System Manager:** Claudio DI SCHINO

**Data Protection Officer:** Cristian LECCESE

**Privacy Officer:** Giuseppe ERRICO

The "Service Charter" is aimed at Users of the facility to facilitate the use of the health and social services provided. Moreover, it serves as a tool for protecting the right to health, as it gives Citizens-Users the opportunity to monitor the services provided and their quality. This document is also intended for the entire local community and our stakeholders (Lazio Region,

Municipalities, Health Authorities, Social and Health Districts, etc.) to transparently and thoroughly communicate the activities and goals that underpin our daily work.

Through this document, the organization aims to foster behaviors that improve the relationship between public entities and citizens, in harmony with current national and regional laws governing this matter.

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## **Vision, mission, and values**

"Any man can be made into a man." With this principle by the pedagogue Comenius, we have built the path that has brought us here. We are convinced we can succeed in creating services and spaces that are always at the forefront, ensuring the highest quality and efficiency in rehabilitation care and assistance for the community. We have always aimed to value the person as a positive and strengthening element of society, consistently fighting against the marginalization and obstacles that society places between those with less and the rest of the Community.

The values that unite us in our work are innovation, experience, quality, solidarity, and integration. Innovation is driven by our inclination to discover new and useful things that can make our work more effective. The risk of providing low or monotonous quality in our work or becoming "accustomed" to the ordinary is a risk we cannot take. For this reason, "innovation" for us means improving, making our work more interesting and stimulating, and aiming for much higher standards of effectiveness.

Experience represents our history and, at the same time, our foundation. Quality guides us in designing and delivering services. It is the fundamental cornerstone of our activities.

Solidarity in human relationships and responsible social management is the value that distinguishes us the most. We are proudly cooperative for over thirty years, and we strongly believe in the social solidarity system of the social enterprise. For us, this value means participation and sharing in decision-making

processes, horizontal responsibility (i.e., responsibility of everyone, not just the organization's management), and mutual growth and training.

Our organization's mission is to "look beyond." Our society is constantly changing, both in economic and social aspects and in values and culture. It is especially the latter that concerns us, as a society lacking awareness of how important the values of solidarity, cooperation, and services towards the most vulnerable are, can dangerously inspire wrong decisions.

We cannot afford to live in a society where attention to those with less gradually disappears, where what is defined as a "social need" is slowly hidden and disguised by incorrect data and decisions, leading to irreparable and dangerous social hardships.

In light of this, we aim to achieve our objectives: ensuring our services with increasing standards of quality, humanity, innovation, and solidarity over time, while simultaneously promoting the importance of public and social attention to the most vulnerable in the community. Moreover, we emphasize the necessary importance of a welfare system that fosters and preserves the solidarity and humanity of a nation that has nothing to envy from others.

Our society's vision is fundamentally focused on the qualitative growth of the services and activities provided to achieve a unique level of efficiency in the field of social and healthcare rehabilitation.

Our reference policy is thus shaped by the elements described above, strongly emphasizing cultural and value aspects, and passing through the objectives that reflect the vision and mission of our reality.

## **Services Provided and Access Methods** **(The Outpatient Center)**

The "Progetto NEMO" Rehabilitation Center offers the following services:

The Outpatient Center for the developmental age treats minors suffering from neurological and/or neurodevelopmental disorders, in line with current regulations (DCA 101/2020 and subsequent amendments).

The rehabilitation process involves a complex set of activities and interventions delivered through a multidisciplinary and integrated approach. Specifically, the rehabilitation therapy includes evaluations and:

- Neurological consultation
- Neuromotor therapy
- Neuropsychomotor therapy
- Neuropsychological therapy
- Psychological therapy
- Speech therapy
- Educational interventions
- Occupational therapy

Access to care is provided through a referral from a specialist doctor (Child Neuropsychiatrist or another disability specialist), who prescribes the rehabilitation treatment, or directly following an evaluation by the relevant mental health department of the minor's local health authority (ASL).

With the specialist doctor's referral, the patient can schedule a medical visit at the rehabilitation center by calling the Reception Service at the center at +39

0771.740796, Monday to Friday, from 9:00 a.m. to 6:30 p.m.

Within 20 days of taking charge of the patient, the facility submits the Individual Rehabilitation Plan to the local ASL offices of the patient's residence and initiates it unless the ASL disagrees. The ASL Rehabilitation Office is responsible for ensuring the patient's continuity of care.

The Center is open from Monday to Saturday, 8:00 a.m. to 7:00 p.m.

Rehabilitation services are provided under two types of care: extensive and maintenance. Extensive rehabilitation is defined as a complex care activity for patients in the developmental age, with interventions aimed at ensuring continuous functional recovery.

Maintenance activities are designed to assist patients with stabilized outcomes from physical and mental conditions who require interventions aimed at maintaining residual functional abilities or containing their deterioration.

The facility uses a system to ensure appropriate quality standards according to ISO 9001:2015, with the collaboration of the certification body MTIC (<https://mticintercertsrl.mtic-group.org/it/management-system/qualita-iso-9001>).

The indicators used and periodic reviews are developed based on input and data received directly from the patient/user and/or their family members. The system also provides the possibility of filing complaints or reports using the appropriate forms available in the public access areas of the facility. The structure is required to respond to any complaint or report within 48 hours.



## ***(Home Care Services)***

Since January 1, 2020, the Lazio Region has launched a new organization for the Integrated Home Care Assistance (ADI) service. This new system allows patients or their caregivers to choose the provider, either public or private, accredited by the Lazio Region. This gives the patient the option to receive integrated social and healthcare services where they deem most appropriate, selecting the provider from whom they wish to receive ADI assistance.

### **How to Activate ADI in the Lazio Region:**

The General Practitioner (GP) or Family Pediatrician provides the patient/family with a request for ADI activation, using the Regional Prescription Form, specifying the need for home care assistance.

The Home Care Assistance Center (CAD) of the relevant local health authority (ASL) assesses the patient's care needs, drafts an Individual Care Plan (PAI), and sends it to the provider chosen by the patient or their caregiver.

### **THE OPERATIONS CENTER**

The Operations Center is composed of a healthcare team and an organizational team that work in close synergy to ensure a constant point of reference for the patient, for the network of territorial services: General Practitioner (GP)/Family Pediatrician (PdF), Local Health Authority (ASL), etc., and for the comprehensive management of the patient's needs.

Any significant events during care, such as service suspension due to holidays or hospitalization, requests for specialist consultations, changes in service access times, etc., must be promptly communicated to the Operations Center to enable all necessary corrections to be activated, ensuring continuity of care and the best possible assistance.

### **Information (*Who to Ask for What*)**

The switchboard number (Reception Service) of the facility is +39 0771.740796. It operates Monday to Friday from 9:00 a.m. to 6:30 p.m.

For electronic communications via email, the address [info@riabilitazione.lavalle.it](mailto:info@riabilitazione.lavalle.it) is available, as well as the certified email PEC [coop.lavalle@legalmail.it](mailto:coop.lavalle@legalmail.it).

Further information, such as a geolocated map, is also available in the "contacts" section of the website [www.riabilitazione.lavalle.it](http://www.riabilitazione.lavalle.it).

The Reception Service staff is available for:

- Scheduling medical appointments
- Scheduling certificates and documentation
- General information about services provided and operational procedures

Finally, the Reception Service will answer all inquiries and/or requests by consulting or forwarding the call to the appropriate area managers.

**Execution of the Rehabilitation Path and  
Implementation of the Individual Rehabilitation  
Plan (PRI)  
NEMO Center**

The activities and services provided are duly scheduled through the sharing of a calendar outlining the timing and types of activities, which are planned through a specific "rehabilitation project" overseen and directed by the medical staff and the rehabilitation team. These activities may undergo temporary and/or permanent changes depending on the organizational needs of the facility or the needs of the User. The Reception Office assists the User, in consultation with the Medical Management, to address any changes.

During the therapeutic process, the facility constantly collaborates with the User's family members to ensure that activities and commitments are carried out in the most effective way possible, for the benefit of the User's well-being and in harmony with the organization's schedule.

From a clinical perspective, the User's Rehabilitation Project is continuously evaluated and monitored by the Therapeutic Team, consisting of the therapists responsible for the User's care and the Medical Management.

The management of the Individual Rehabilitation Plan (PRI) defined for each patient by the Multidimensional Evaluation Unit consists of:

- I. Clinical diagnostic evaluation activities
- II. Implementation of the care pathway defined in the PRI through the drafting of the care plan
- III. Educational/relational/environmental activities

- IV. Therapeutic clinical activities
- V. Rehabilitation interventions

## **Execution of the Rehabilitation Path and Implementation of the Individual Care Plan (PAI) for Home Care (ADI)**

The activities and services provided are carefully scheduled through a shared calendar that outlines the timing and type of activities. These are planned through a specific "rehabilitation project" managed by the medical staff and the rehabilitation team. These activities may be subject to temporary and/or permanent changes based on the organizational needs of the facility or the needs of the User. In such cases, the Reception Office is available to assist the User, in consultation with the Medical Management.

During the therapeutic process, the facility maintains constant collaboration with the User's family members or caregivers to ensure that activities and commitments are carried out in the most effective manner possible, promoting the greatest well-being of the User and harmonizing with the organization's schedule.

From a clinical perspective, the User's Rehabilitation Project is continuously evaluated and monitored by the Therapeutic Team, which includes the therapists responsible for the User's care and the Medical Management.

The management of the Individual Care Plan (PAI), as defined for each patient by the Multidimensional Evaluation Unit, includes the following:

- Clinical evaluation and diagnostic activities
- Implementation of the care pathway outlined in the

PAI through the drafting of the care plan

- Pain evaluation and management
- Educational, relational, and environmental activities
- Therapeutic clinical activities
- Treatment of skin lesions and soft tissue disorders
- Medication administration
- Maintenance of homeostasis
- Rehabilitation interventions
- Services related to respiratory functions
- Services related to feeding functions
- Services related to excretory functions

### **The NEMO Center Team**

The outpatient rehabilitation center for developmental age, "NEMO," has the following therapeutic team:

- Medical Director
- Specialist Doctors
- Service and Activity Coordinators
- Nurses
- Psychologists
- Physiotherapists
- Neuropsychomotricists
- Speech Therapists
- Occupational Therapists
- Motor Activity Technicians
- Professional Educators
- Social Workers

The team works daily to ensure that services are provided effectively and promptly to meet User needs. What distinguishes our staff, in addition to their professionalism and punctuality, is a strong sense of

humanity essential for those working in this type of service. The cooperative environment in which we operate further facilitates and harmonizes these values and cultural traits.

## **Rights and Duties of Users**

The NEMO MAIA Center, in the course of its institutional activities, as an organization committed to protecting and promoting the well-being and fundamental rights and dignity of the person, adopts and enforces the following **\*\*User Rights\*\*** within its operations:

### **The 14 Patient Rights**

#### **1. Right to Preventive Measures**

Every individual has the right to appropriate services to prevent illness.

#### **2. Right to Access**

Every individual has the right to access the healthcare services required by their health condition. These services must ensure equal access for everyone, without discrimination based on financial resources, place of residence, type of illness, or timing of service access.

#### **3. Right to Information**

Every individual has the right to access all information concerning their health status, healthcare services, and how to use them, as well as any information made available by scientific research and technological innovation.

#### **4. Right to Consent, Respect for Values, and Beliefs**

Every individual has the right to access all information that enables them to actively participate in decisions regarding their health. This information is a prerequisite for any procedure or treatment, including participation in scientific research.

#### **5. Right to Free Choice**

Every individual has the right to freely choose between different healthcare procedures and providers, based on adequate information.

#### **6. Right to Privacy and Confidentiality**

Every individual has the right to the confidentiality of personal information, including health status and possible diagnostic or therapeutic procedures. They also have the right to privacy protection during diagnostic exams, specialist visits, and medical-surgical treatments.

#### **7. Right to Respect for Patients' Time**

Every individual has the right to receive necessary healthcare services within a short, predetermined, and certain period. This right applies to every stage of treatment.

#### **8. Right to Quality Standards**

Every individual has the right to access healthcare services of high quality, based on the definition and respect of precise standards.

#### **9. Right to Safety**

Every individual has the right to be free from harm resulting from poor healthcare service functioning, malpractice, or medical errors. They also have the right to access healthcare services and treatments that ensure high safety standards.

#### **10. Right to Innovation**

Every individual has the right to access innovative



procedures, including diagnostic procedures, in accordance with international standards, regardless of economic or financial considerations.

**11. Right to Avoid Unnecessary Suffering and Pain**

Every individual has the right to avoid as much suffering as possible at every stage of their illness.

**12. Right to Personalized Treatment**

Every individual has the right to diagnostic or therapeutic programs tailored as closely as possible to their personal needs.

**13. Right to Complaint**

Every individual has the right to file a complaint whenever they have suffered harm and to receive a response or another form of redress.

**14. Right to Compensation**

Every individual has the right to receive adequate compensation within a reasonably short time whenever they have suffered physical, moral, or psychological harm caused by healthcare service treatments.

**15. Right to Refuse Treatment**

The patient or the family member of the minor/user has the right to a conscious refusal of medical care. Conscious means that the refusal of care must be chosen by the patient after comprehensive information has been provided by the attending doctor. The minor's family can formalize this refusal by using and signing the pre-printed form available at the facility's reception.

## Patient Duties

Active participation in fulfilling certain duties is essential to fully exercise one's rights. Personal commitment to these duties shows respect for the social community and the healthcare services enjoyed by all citizens. Fulfilling a duty also means improving the quality of the services we provide.

- 1) When accessing the Center, the User is expected to: act responsibly at all times; respect and understand the rights of other Users; and cooperate with the Medical and Technical Staff.
- 2) Accessing the Center implies a relationship of trust and respect between the Citizen-User and the Healthcare Staff, which is essential for establishing an appropriate therapeutic and care program.
- 3) Every patient is obligated to promptly inform the Center's staff of their intention to refuse, according to their will, any previously scheduled care or therapeutic services.
- 4) Before receiving treatments, every User must duly sign the documentation related to consent for social-health treatments, authorization for the processing of personal data, and provide their contact information and residence/domestic address at the Reception Service. Additionally, it is the User's duty to inform the Center about any other social-health services they benefit from through the National Health Service (SSN), and, when necessary, sign a declaration to that effect.
- 5) The User is expected to respect the facility, its equipment, and furnishings to ensure the highest quality of services and to prevent damage that could

compromise the proper provision of services.

6) Users must adhere to the visiting hours set by the Medical Management to allow for the proper conduct of healthcare services and to ensure the smooth operation of other patients' therapies.

7) The User is required to inform the facility in advance if they will be absent from scheduled treatments.

8) The User must sign daily attendance logs confirming the administration of therapies, as well as any other necessary documentation required by the ASL for their services.

9) The User is expected to follow the Service Circulars issued by the facility's management, displayed on the notice board in the waiting room. The User must also comply with verbal instructions given by the facility staff regarding service organization.

10) Users, their family members, and visitors should move within the designated areas of the facility and avoid entering restricted areas to prevent potential safety risks and discomfort to other patients undergoing treatment.

### **Our Comforts**

The La Valle Center was created with the goal of providing Users and their families with a healthy and comfortable environment, designed to make people feel at ease and offer small moments of daily relaxation. For this reason, the location of the Piana di Sant'Agostino was chosen, an area surrounded by greenery on the western coast of the city of Gaeta, just two kilometers from the sea. Centrally located near the

cities of Gaeta, Formia, and Itri, the facility is only two kilometers from the Flacca highway that connects Rome to Naples, and three kilometers from the Via Appia. The facility's external parks relieve Users from the hassle of looking for parking, an often stressful task that can discourage them from attending regular health treatments.

The waiting room of the facility is equipped with a TV, free Wi-Fi, air conditioning, music, magazines, and a snack bar. Outdoor waiting areas are also available.

During the spring, summer, and autumn, the mild climate typical of our region allows for pleasant outdoor waiting, surrounded by olive trees and Mediterranean plants. The waiting environment is designed to provide family members or companions with a pleasant and relaxing experience while the therapies are conducted.

All of our staff are available to assist Users with specific requests, always respecting the needs of everyone. Some of our staff are trained in English and Spanish to ensure a warm welcome for foreign Users.

### **Innovation in Our Work**

For us, innovation means stimulating more effective treatments and improving the User's well-being. But innovation also means constantly challenging our work and our preparation; it is a moment of growth that eliminates the risk of becoming "accustomed to the ordinary."

Driven by our desire to innovate, our facility has been

equipped with various spaces that allow us to carry out activities that complement the rehabilitation process more effectively. Experimental projects are underway, aimed solely at improving public territorial services, in which we firmly believe.

### **Facility Visit**

It is possible to visit the facility, either as part of a group (schools, professionals, families, associations, etc.) or as an individual who wishes to learn more about our work. To do so, a simple request must be sent by email, accompanied by the identity document of the person or group, to the following email address: [info@riabilitazione.lavalle.it](mailto:info@riabilitazione.lavalle.it).

### **Complaints**

The organization and functioning of the facility are based on a quality management system that follows European standards (ISO 9001:2015).

The system places special attention on input from Users, particularly regarding complaints. Any User/citizen wishing to file a complaint or bring any situation to the attention of the Management, or even offer a suggestion, can use the forms available in the public waiting area. These forms can be signed and submitted to the Reception Service at the Center, or sent via email/PEC to the addresses [info@riabilitazione.lavalle.it](mailto:info@riabilitazione.lavalle.it) or [coop.lavalle@pec.it](mailto:coop.lavalle@pec.it). Management is required to respond to complaints/communications within five business days. The Management's response is deposited with the

Reception Service, and the interested User can retrieve the document. The standard response time for complaints received is 15 days from the date the User's complaint is received.

## **User Satisfaction Surveys**

La Valle Center conducts an annual survey on User satisfaction with the services and treatments provided by the facility.

This survey is conducted following the European standard ISO 9001:2015. In particular, at the end of each rehabilitation program, Users are asked to complete a questionnaire to express their opinion on various aspects of the service they received.

The areas covered in the survey include:

- The behavior and competence of our staff/operators
- Punctuality in providing the service
- The condition and functionality of the equipment and tools used
- The effectiveness of the communication system
- The administrative staff's competence
- The ability to manage emergencies
- The clarity of the information provided
- Flexibility in meeting specific needs
- The overall image of the organization

In recent years, the average total satisfaction rate from Users has been 97.20%, with a steady increase.

## **Our Quality Standards**

In the management and application of the Quality System, the facility constantly evaluates and monitors the following standards, which holistically demonstrate the compliance of organizational practices with pre-established quality indicators:

- Training and competence of personnel
- Supplier evaluation
- Planning and execution of routine maintenance interventions
- Service organization procedures
- Complaints and non-compliance
- User satisfaction
- Staff satisfaction

Additionally, the facility adheres to the guidelines of the most recognized clinical and scientific best practices in the execution of its socio-healthcare and rehabilitation services.

## **Protection and Prevention System**

In accordance with Legislative Decree 81/2008 on workplace safety and the implementation of Protection and Prevention Systems against potential and actual risks, the facility is equipped with a Manual that governs all aspects potentially posing a risk to the health and safety of workers and guests of the Center.

The manual is periodically updated, and operational procedures are reviewed and controlled through the collaboration of an external company and professional consultants.

Throughout the facility, maps of the Center are visible and ready for use, indicating emergency exits, potential hazards, and actions to be taken in various emergency situations. Special signage distinguishes emergency exits, fire extinguishers, and fire alarms.

Each bathroom, accessible to wheelchair users, is equipped with an alarm and panic exit.

Facility staff are trained in the actions to take in the event of an emergency.

### **Privacy Management System**

In accordance with Legislative Decree No. 196/2003, Legislative Decree No. 101/2018, and the EU Regulation 679/2016, the facility has implemented a privacy management system that follows all operational principles and procedures outlined by the aforementioned regulations. This system ensures the maximum confidentiality and protection of the personal data of Users, staff, and all other interested parties.

The contact details of the Data Protection Officer (DPO) and the Data Controller are provided in the contact details section of this document.

### **Organization, Management, and Control System**

In compliance with Legislative Decree No. 231/2001 and subsequent amendments, the Center has adopted a model for the management and monitoring of procedures to prevent the risk of crimes against public administration, the environment, and other corporate offenses.



The organizational and management model (or "model pursuant to Legislative Decree No. 231/2001") in Italian law refers to an organizational model adopted by a legal entity or association without legal personality aimed at preventing the criminal liability of the entities themselves.

This legislation, which governs "the administrative liability of legal persons, companies, and associations even without legal personality," in effect since July 4, 2001, introduced a new regime of responsibility, known as "corporate criminal liability," resulting from the commission or attempted commission of certain types of crimes in the interest or to the advantage of the entities themselves.

### **Involvement of External Parties**

To provide for the involvement of the staff, local community representatives, and associations that protect patients, the Cooperative intends to activate a communication channel for reporting potential input that can be sent to the Cooperative. These inputs can be considered as elements for study or analysis related to the drafting/approval of institutional activity planning documents for the Cooperative.

For this purpose, information or suggestions can be sent to the Cooperative via email at [info@riabilitazionevalle.it](mailto:info@riabilitazionevalle.it) with the subject line "involvement in decision-making processes."

The Cooperative is open to collaborations/interactions with local associations representing patients and users of the services managed, with the aim of collaborating for the improvement of services and to promote

initiatives to protect the users themselves, as well as enhancing sharing and institutional collaboration. For these purposes, a collaboration was signed in 2019 with the "Il Cielo è di Tutti" Association, an association of parents of minors (or adults) who benefit from rehabilitation treatments and dedicated social and healthcare assistance.

### **Responsibility for Patient Care**

In order to establish a transparent and certain system regarding the responsibility for the care of patients/Users associated with the facility, the following guidelines govern the management of patient care within the organization "La Valle Rehabilitation Center":

- The person responsible for the care of the User is the Medical Director of the facility.
- Responsibility for the development/planning of the individual rehabilitation project rests with the specialist doctor.
- The organization of therapies and activities is managed by the service coordinator, who collaborates daily with the Medical Director to oversee activities and address any emerging issues.
- Administrative and accounting matters are managed by the administrative manager.
- Data and information management is the responsibility of the designated data controller, who is the Medical Director.
- Patient safety is managed through an internal document, which is also available on the facility's

website at the following link:  
[<https://riabilitazionelavalle.it/trasparenza/legge24-2017>](<https://riabilitazionelavalle.it/trasparenza/legge24-2017>)

For any further information, please contact the facility via certified email at [coop.lavalle@legalmail.it](mailto:coop.lavalle@legalmail.it).

### **Resolution of Bureaucratic Issues**

To resolve and manage any issues related to bureaucratic, prescriptive, and certification processes, the facility's Reception Office takes responsibility for the following:

- a) Receiving any reports from Users regarding such issues
- b) Analyzing the problem/issue encountered
- c) Proposing the necessary and/or possible solution

### **Facilitated Access to Services**

The facility guarantees facilitated access to socio-health services for citizens and Users who find themselves in particular circumstances and are unable to easily activate the standard procedures for managing these processes. In such cases, the User can contact the facility's social worker, available at +39 0771.741739 from Monday to Friday, from 8:30 a.m. to 5:00 p.m., to request direct assistance.

This assistance includes:

- Listening to specific needs
- Assistance in preparing documents
- Identifying potential issues

- Coordinating with other operational units of the National Health Service (SSN)
- Providing help and support to home care patients

Alternatively, the service can also be activated via email ([info@riabilitazionevalle.it](mailto:info@riabilitazionevalle.it)).

The time required to process cases referred to the social worker for facilitated access to care is three business days.

### **User/Family Involvement**

The facility guarantees a system of involvement for Users and their families in the management of the care process. This system operates through the shared planning of the rehabilitation project, the monitoring and execution of activities, and the evaluation and reporting of results.

In particular, the patient/User and/or their family members/caregivers can participate in the planning of the rehabilitation project by contributing to the definition of the care pathway proposed by the responsible physician, whenever compatible with the User's specific conditions. Additionally, the User has the right to know the strategies for delivering the service and achieving the results in order to consciously participate in defining the activities undertaken.

Furthermore, the facility implements a process for involving patients/Users in the management of clinical

risk. Upon the initiation of the rehabilitation project, Users or family members in the case of minors receive from the responsible physician all relevant information regarding the risks involved. This includes an explanation of the guidelines adopted by the facility through the implementation of the document “Annual Clinical Risk Management Plan,” and information is provided to train/educate the family on potential critical situations.

### **Annual Activity and Quality Plan**

Every year, the facility defines an activity plan to illustrate the services to be provided, along with a quality plan that follows the guidelines of the ISO 9001:2015 quality management system, particularly concerning User and staff satisfaction.

For 2020, the facility will provide the following activities:

- Rehabilitation services pursuant to Article 26, delivered on an outpatient basis, for individuals in the developmental age.

In terms of quality, the plan is structured according to the ISO 9001:2015 management manual, particularly regarding the User satisfaction process and staff satisfaction.

The activity objectives focus on proper planning of services “budgeted” by the competent ASL to ensure

the continuous care of patients within the facility through public services. Analytically, the following data is represented: the assigned 2020 budget (1/12 of 2019) = €854,000 (€71,200/month). Unfortunately, the economic budget allocation does not meet the demand in the area, limiting the facility's ability to open further rehabilitation projects, even though they are duly authorized and accredited by the Lazio Region. The objectives are therefore mandatory until additional resources are allocated.

The quality objectives, in an analytical manner, are based on the results of the reports from the surveys administered to various stakeholders involved in the quality process. In particular, User satisfaction must be  $\geq 90\%$ , and staff satisfaction must be  $\geq 97\%$ .

At the end of the reporting process, the Quality System Manager (RSGQ) verifies the objectives and reports on the activities carried out, applying procedures for any identified non-conformities.

The participation of citizens in defining the objectives, as described above, is not mandatory in terms of "necessity," given the nature of the facility, but it is optional. The facility advertises and opens its doors to citizen/patient/association involvement; however, it is not required in this particular context.

THE END

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