

FIGLIE DI SANTA MARIA DELLA PROVVIDENZA OPERA FEMMINILE DON GUANELLA

Charter of Services

Rev. 04

March 06 2025

Casa S. Maria della Provvidenza Centro di Riabilitazione per disabili

Via della Nocetta 23/27, Roma

This Service Charter is a document that certifies the operation of the Casa Santa Maria della Provvidenza Rehabilitation Centre in compliance with the regulations governing its activities. At the same time, it provides *citizens/users* with accessible and transparent information on how it operates, the services it provides, the tools it uses and the conditions under which its activities are carried out.

The Health Services Charter was created as an agreement between the facilities that provide health services and citizens/users, according to the following guiding principles:

- impartiality in the provision of services and equal rights of access to services;
- full information for citizens/users on the services offered and how they are provided;
- definition of standards and commitments by the provider with regard to promoting service *quality* and determining methods for its ongoing assessment;
- organisation of structured methods for the protection of citizens' rights; listening to
 opinions and judgements on the quality of the service, expressed by citizens directly
 or through the associations that represent them, using methods and tools for participation and involvement.

This Service Charter affirms the principle that a healthcare organisation that provides services and benefits must ensure that they are delivered in an optimal manner to its users through a process of clear and effective communication, thereby promoting a full understanding of the characteristics, meaning and usefulness of the services offered.

This Service Charter also serves to affirm the right to information in the more general context of the health protection process and, in this sense, represents a tool for guaranteeing users and safeguarding their rights.

The essential purpose of this Service Charter is to implement an innovative process in the relationship between the user and the healthcare facility they are addressing, activated through the evidence of procedures and methods that provide the user with adequate information in advance and enable the facility to anticipate, in terms of information, the characteristics of the services it provides and the activities it carries out, so as to be able to control communication mechanisms and constantly improve the quality of the relationship established with the user.

The Service Charter of the Casa S. Maria della Provvidenza Rehabilitation Centre is essentially aimed at users to facilitate the use of the services offered.

It can also be considered a tool for protecting the right to health, as it gives citizens/users the possibility of effective control over the services provided and their quality.

The facility's operators and patients are informed of the existence of the Charter, which is given to patients and their families upon admission to the Centre and at each subsequent update; the document is made available in all areas of activity.

This Service Charter was updated in March 2025.

Summary:

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1. INTRODUCTION

The Service Charter presented here is intended to be a handy information tool through which Casa Santa Maria presents its organisation, the services it offers and how to access them.

Casa S. Maria della Provvidenza is a religious institute belonging to the Congregation of the 'Daughters of St. Mary of Providence - Opera Femminile San Luigi Guanella'.

The Centre is accredited for the provision of rehabilitation treatments pursuant to Law 833/78, Article 26, in residential and semi-residential settings, suitable and specialised for wo-men with intellectual and mental disabilities.

The legal representative is the Superior and Director General, Sister Michela Carrozzino.

The Casa Santa Maria della Provvidenza Rehabilitation Centre is located in Rome at Via della Nocetta 23/27.

Telephone numbers: 06.66158744, fax 06.66141627.

It is a complex that occupies a large area on the border between the Casali valley and Villa Doria Pamphilj in the Gianicolense-Monteverde district.



By car: from Rome's Grande Raccordo Anulare ring road, follow signs for Exit 1 Aurelia towards the city centre and Vatican City. At the intersection with Via Leone XIII, turn right. At the first traffic lights, turn onto Via della Nocetta, numbers 23 and 27.

By public transport: from Termini station, take Metro A towards Battistini. Get off at Valle Aurelia and take bus line 31 towards Laurentina (MB) and get off at the 'Bel Respiro' stop.

The founder, Saint Luigi Guanella

Luigi Guanella was born in Fraciscio in Val Chiavenna on 19 December 1842 and became a priest in 1866. He was a parish priest in worship and religious education, a teacher and an apostle of charity: during his pastoral experience in Valtellina and through his contacts with Don Bosco and Cottolengo, he developed a vocation to care for all those in need.

He lived through difficult years due to misunderstandings with civil and religious authorities; relegated to the mountains, he was then recalled and took care of a work for orphans, leading a small group of consecrated young women; in Como, he opened 'the little House of Divine Providence' for all those in need, followed by several other works in Italy and abroad to continue his charitable work among the poor. He founded two religious congregations and died in Como on 24 October 1915.

On 25 October 1964, he was beatified by Paul VI and canonised on 23 October 2011 by Benedict XVI.

His closeness to Don Bosco and the years he spent with him helped Don Luigi Guanella to develop the idea of an educational style based on the 'preventive method', considered the

central and unifying core of educational activity.

Throughout his life, Don Luigi Guanella always showed a particular fondness for the 'mentally challenged', whom he affectionately called 'good children' in imitation of Cottolengo, to indicate their innocence. He thus encouraged his priests and nuns: 'Do not put those who should be first, the most abject and abandoned, in last place in your home'. From a pedagogical point of view, he believed that everyone is educable and that something can be done for everyone to improve their living conditions. He was one of the pioneers in rehabilitating people 'of limited intelligence' through work.

Luigi Guanella's legacy is the Guanellian family, made up of two congregations, one female and one male, and a group of committed lay people:

- the Daughters of St. Mary of Providence
- the Servants of Charity
- the Guanellian Cooperators

The two congregations carry out their mission in various countries around the world, in accordance with Guanellian operating principles.

The various charitable works are organised as follows:

- Centres for people with intellectual disabilities
- Homes for the elderly
- Educational institutions for minors
- Collaboration in parishes for liturgical animation and pastoral care
- Assistance to the new poor in various forms (soup kitchens, shelters, etc.)

As a testament to the sisters and priests, he leaves this recurring phrase in his writings: "it cannot end as long as there are poor people to help".

The action proposed by St. Luigi Guanella therefore points to the material and moral, human and spiritual elevation of individuals and groups, especially the weakest, with respect for their history and culture, and a work of constant awareness so that no one is left behind in life and, indeed, is enabled to participate in the progress of civilisation.

Objectives of the Centre:

- to meet the needs of users with regard to the types and volumes of services requested, in collaboration with the Local Health Authorities (ASL) for accredited activities.
- To guarantee respect for the patient's time and dignity through:
 - transparent procedures;
 - a comfortable, clean environment that guarantees privacy;
 - professionalism and courtesy on the part of all staff and willingness to provide information;
 - respect for privacy; achieving and maintaining product and service standards as planned, with the aim of pursuing continuous improvement.

Quality Improvement

In order to ensure the well-being of individuals and respond appropriately to their needs, the Centre has complied with current legislation by adopting a UNI EN ISO 9001-2015 Quality Management System, whose certification is currently valid until June 2024.

Staff training and refresher courses

All operators working at Casa Santa Maria participate annually in refresher courses provided for in the annual company training plan and in accordance with national employment contracts and company and provincial trade union agreements.

This is achieved in practice through the periodic identification of projects proposed by the operators themselves for professional/interprofessional groups, in the belief that quality objectives must be shared and participated in order to be achieved. The empowerment of operators at all levels and their constant involvement are considered essential conditions for improving the quality of life of each guest.

2. OPERATION of the REHABILITATION CENTRE

The Centre is organised into two distinct services: Residential and Semi-Residential.

How to access the Centre

Patient access to our rehabilitation facility is subject to a multidimensional assessment by the relevant ASL services in accordance with DPCA 39/2012.

To access the Centre, an application must be submitted. The case is examined by the Centre's team and then placed on the waiting list, which is divided into two sections for the Residential and Semi-Residential services. After the application has been submitted, a preliminary visit is scheduled during which any clinical documentation is examined and the compatibility of each patient's clinical condition with the specific resources and characteristics of the Rehabilitation Centre is assessed. Once compatibility has been verified, the patient's name is added to the waiting list.

The waiting list is managed according to the chronological order of booking, as well as other possible relevant factors (the patient's age, the severity of the condition, conditions of severe disadvantage and socio-familial hardship, and any concurrent rehabilitation interventions at other facilities). These elements must be documented by the relevant local health authority representatives.

When a place becomes available at the facility, patients on the waiting list are contacted, in accordance with the criteria of the list, the urgency of the case and the suitability of the condition for the availability of beds in the living group best suited to meet the rehabilitation needs. If the request for admission is confirmed, the admission is organised.

In this case, family members or guardians must sign all the forms required for admission and provide the necessary clinical documentation.

With the admission and clinical observation of the new user, the Individualised Rehabilitation Project (PRI) begins, which is shared with family members and sent electronically to the SIAR and the local health authorities.

Each IRP has a specific duration and care period, in accordance with the provisions of the current healthcare organisation of the Lazio Region, which regulates rehabilitation treatments. At the end of each Project, a meeting is held with all members of the multidisciplinary team

to review the results achieved, assess the appropriateness of a renewal request and identify any new objectives.

Discharge

The Project may be temporarily suspended or permanently closed for the following reasons:

- at the express request of the user and/or their family members;
- the management team considers that the minimum conditions necessary to provide a
 quality service are no longer met (e.g. insufficient/lack of cooperation from family
 members);
- the Management Team assesses that the objectives set out in the Project have been achieved.

Services provided in the Residential and Semi-Residential Services

The following rehabilitation services are provided at this facility:

- Specialist psychiatric consultation;
- Specialist neurological examination;
- Specialist physiatric consultation;
- Specialist geriatric consultation;
- Administration of psychometric tests;
- Neuromotor rehabilitation;
- Psychological therapy;
- Educational intervention;
- Nursing intervention;
- Social service intervention;
- Counselling for family members.

Each PRI is drawn up by a multidisciplinary team consisting of a Project Manager (and any specialist doctors such as physiatrists), a social worker, a psychologist, professional educators and any other figures involved in the rehabilitation treatment (physiotherapists, nurses, heal-thcare assistants and auxiliary staff, etc.).

Activities

Both the Residential and Semi-Residential Services provide daily educational and rehabilitation interventions through occupational and craft activities carried out in various multi-purpose workshops.

The workshops offer manual and craft activities involving the processing of various materials using different techniques (paper, leather, fabric, wood, rope, flowers, wax, h gardening, etc.).

The rehabilitation workshop provides occupation and meaningful engagement in the daily life of the disabled person, offering emotional and practical support. Professional educators coordinate and manage the activities of each group in order to promote the following for each user:

- practical and manual skills in the process of creating the craft product (from design to finishing);
- personal autonomy and creative potential;

- moments of discussion and debate in the group, teaching each person to express themselves spontaneously and listen to others;
- the creation of a network of relationships where people can find a climate of emotional security, acceptance and belonging;
- the development of the self and the formation of a social identity through craft activities:
- the quality of the relationship with the environment by mediating and harmonising the dynamics of each group to contain any conflicts;
- the consolidation and improvement of the community life experience;
- possible social reintegration, where feasible.

In addition to the above objectives, educational and rehabilitative interventions aim, where possible, to develop basic adaptive and socio-cultural skills. Users are offered the opportunity, both in their reference groups and in selected subgroups, to develop and maintain cultural and social skills. In this sense, reading the newspaper in a group, discussing and reflecting on world events, watching films, learning about and using money, and using public transport are among the most suitable tools for achieving these objectives.

Educational and rehabilitative activities aimed at potentially expanding social skills and relational experiences

The Centre offers:

- 'Sensory' educational and rehabilitation interventions that take place in equipped spaces with specific materials selected to work on the sensory channels. These interventions are offered mainly to guests with severe cognitive disabilities to promote nonverbal communication, emotional well-being and meaningful relational experiences
- Musical and artistic-creative expressive activities. In some specific environments, activities are carried out that use music and other artistic-creative expressive channels to engage users and stimulate them to communicate through languages other than verbal ones.
- Ethical-religious education activities aimed at learning and developing tools for participating in community and religious life. In particular, attention is paid to general knowledge and participation in the most important religious holidays (Christmas and Easter) and related liturgical celebrations that take place at the Centre. In particular, for older people, peaceful accompaniment is provided to help them accept the twilight of life.
- Physical activity: currently includes bocce, movement and games, orienteering, walks
 in the villa and neighbourhood. An additional swimming pool activity is available upon
 request from families.
- Raccont'arte space: actively listening to people's stories, promoting a sense of belonging and the expression of their own point of view, offering opportunities to feel useful and valued for their unique characteristics. In concrete terms, it responds to the social and relational needs of guests aged 65 and over, whose lives risk being limited to the satisfaction of basic physiological and care needs.
- Summer stays: these are organised to complement the projects carried out during the
 year and in line with the therapeutic objectives set. Depending on the users' pathologies, holidays are favoured with the aim of social inclusion at all levels and which in-

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- clude therapeutic activities at sea. Currently, the stays take place in houses belonging to the Congregation used as summer residences: at the seaside in Ardea (RM) and Scalea (CS) and in the mountains in Chitignano (AR).
- Annual celebrations: at Christmas, Carnival, the beginning of summer and on anniversaries linked to the Founder, the staff and guests organise community celebrations with particular care. The celebrations are a special opportunity to meet with family members and to open up to the local community, raising awareness of the activities carried out at the centre.

Specific rehabilitation therapies

Users who attend the Rehabilitation Centre are offered specific rehabilitation therapies. These are based on individual needs and take place in small groups, in cycles or continuously, as defined by the individual rehabilitation projects (PRI).

Specific rehabilitation treatments currently include physiotherapy and neuromotor rehabilitation.

Medical records

A medical record is created for each user, in which the specialist assessments and all documentation relating to the daily health and rehabilitation treatments are recorded by the authorised personnel. An integral part of the medical record is the individual rehabilitation plan (IRP SIAR user form), which specifies the days of treatment, the type and method of rehabilitation interventions (including the number of visits and any changes to them).

The medical records are kept in accordance with current legislation on the protection of personal data. Each patient, or their guardian, may request a copy of their medical records after discharge. To request certification relating to ongoing rehabilitation treatment, a clinical report or a copy of the records, a specific form must be completed and requested from the secretariat.

Each user referred to the Residential Service is placed in a ward (Life Group) which has a staff of permanent educational figures supported by auxiliary staff and, in some cases, religious personnel. Within each Life Group, the oper tors present follow and support the users in the common activities of daily life (independence, personal hygiene, meals, care of their living spaces, etc.). The day is structured for the guests according to their needs and rehabilitation potential. Individual and group activities are carried out which, in addition to rehabilitation work on strengthening and/or maintaining autonomy, include daily participation in craft and occupational workshops, neuromotor therapy and more.

Description of a typical day

Residential service:

7.30	guests wake up
8.00	personal hygiene, breakfast, tidying up rooms
9.30	Activities (workshops, additional activities outside and inside

	the group or the Home, physiotherapy, etc.)
12.30	lunch in groups and break
14.30 - 17.00	activities in workshops/departments/free time
17:00 - 18:00	spiritual time: participation, for those who wish, in church ser-
	vices
6.30pm/7pm	Dinner and recreation
21:00	Rest

Semi-residential service

9:00 a.m.	Arrival at the centre and initial welcome
9.30	Educational and rehabilitation activities
12.30	Lunch (and assistance with personal hygiene activities)
14:00	Educational and rehabilitation activities
16:30	return to family

On Saturdays and Sundays, rehabilitation activities, physiotherapy services and workshops are suspended.

3. PATIENT BILL OF RIGHTS

The person at the centre: for a quality life.

The Home is committed to ensuring that the rights of its guests are always guaranteed and respected in accordance with the European Charter of Patients' Rights. This Charter is available from the Management and in each living group.

- o Patients and their families are informed, upon admission to Casa Santa Maria, of the existence of patient protection bodies such as the patients' rights tribunal.
- In particular, upon admission to the Centre, the patient is adequately informed about the proposed treatment and the possible risks arising from total or partial non-compliance with the treatment itself.
- After receiving adequate information, the patient, or her legal representative, gives her consent to the treatment (informed consent).
- The patient and her family members are kept constantly informed about her state of health and involved in any changes to the rehabilitation programme.
- The patient or family members have the right to request a copy of the medical records.
- The right to confidentiality of personal information, including information concerning health status, and privacy throughout the duration of treatment is guaranteed.
- The patient's right to access services that meet quality standards is guaranteed.
- The right to user safety is guaranteed and, to this end, possible risk factors are continuously monitored.
- The right to personalised treatment is guaranteed by the adoption of flexible rehabilitation programmes tailored to the needs of the individual.

- The right to complain and receive a response is guaranteed. Complaints can be submitted through standard procedures, as defined in the Quality Management System (QMS).
- Although the Centre professes the Catholic religion, it is open to users of other religious beliefs, without discrimination, respecting their values, customs and habits in accordance with the principles and spirit of the Home and the rehabilitation and organisational requirements of the service.
 - If necessary, adequate cultural mediation support is guaranteed.
 - In addition to providing guests with a room for the practice of religions other than Catholicism, Casa Santa Maria allows families to accompany our guests in activities related to their religious beliefs.

The staff employed at Casa Santa Maria are informed about the nature of the rights of patients and their families and are trained in the operating procedures to ensure that these rights are respected.

As part of its quality control system, the facility has implemented a procedure for self-assessment of respect for patients' rights through the administration of satisfaction questionnaires, which are provided annually to users of both services.

4. COMPLAINTS

Complaints regarding any disservices or other reports can be submitted in writing to the Management (using the appropriate form to be placed directly in the designated box in the entrance hall) or by email to the following address:

reclami@casasantamariaroma.it.

If the Centre receives non-anonymous written complaints, the Complaints Manager will report the content to the Management so that they can examine the complaint and take any corrective and/or preventive action. A written response will be provided to the person who submitted the complaint to inform them of the action taken.

5. VOLUNTEERING AND PROFESSIONAL TRAINING INTERNSHIPS

The Centre is open to collaboration with members of non-profit organisations or other voluntary associations recognised at regional or national level.

Interested parties can submit a written application to the management of the House, which will organise the collaboration in the most appropriate manner, identifying a tutor to supervise and guide the voluntary activity on a case-by-case basis.

For many years, Casa Santa Maria has welcomed internships for professionals in educational, welfare and psychological rehabilitation through active agreements with universities in Rome and sectoral training institutions.

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Sister Michela Carrozzino Superior and General Director Casa Santa Maria della Provvidenza

Rome, March 2025