



Rehabilitation Centre
Pomezia

Service Charter

Revision 1.2 | June 23, 2025



Dear Sir / Madam

This **Service Charter** has been drawn up with the participation of the staff of the Cooperativa Sociale Onlus ETS Alteya and approved by the Administrative Management and the Health Management, in compliance with national legislation and the Lazio Region DCA (Commissioner's Decree) no. U000311/2014 of 06/10/2014 *"Guidelines for drawing up the Health Service Charter in the Lazio Region's healthcare companies and facilities"*.

This **Service Charter** is made available in electronic format on our website and in paper format at the facility's offices.

This **Service Charter** is our pledge to continuously enhance the quality of the services we provide, with the ultimate goal of achieving maximum user satisfaction. It serves as a key document for anyone engaging with our Facility, offering essential information on the available services, how to access and utilize them, the standards of quality we uphold, and our commitments and future plans.

The President
Claudio Dell'Anno





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1.0 Presentation
of the Pomezia
Rehabilitation Centre
of the non-profit
Cooperativa Sociale Onlus ETS
Alteya

1.1 ABOUT US

The **Cooperativa Sociale Onlus ETS Alteya** was established on 10 July 2013 in Rome in Via Antonio Bertoloni 26/B, where its registered offices are located. The cooperative was founded by its current President, Claudio Dell'Anno, who, after many years of experience in the social sector, particularly in personal assistance, decided to create an organisation dedicated to meeting people's needs and providing employment opportunities for disadvantaged persons.

Since its inception, the cooperative has focused, with passion and professionalism, on the design and delivery of social, socio-educational, healthcare and social-assistance services. These are provided both in-home and in residential facilities, catering to individuals with disabilities, minors, young people, adults, the elderly, families, and communities. The cooperative places strong emphasis on respecting the dignity and individuality of each person, recognising his or her rights, and ensuring his or her integration within the local community. Central to such approach is the involvement of the service recipients themselves.

Recent analyses of rehabilitation interventions for individuals with complex physical, psychological, sensory or combined disabilities have underscored the critical importance of early multidisciplinary, and highly personalised rehabilitation treatments. These targeted and intensive interventions are crucial for achieving better functional recovery. To address the regional shortage of specialised healthcare services, **Cooperativa Sociale Onlus ETS Alteya** set up a Rehabilitation Centre in Via del Mare, 2 in Pomezia, a town south of Rome where specific healthcare services are sorely lacking. The centre provides essential rehabilitation treatments, offering individuals the opportunity to regain vital functions and improve their quality of life.

Pomezia Rehabilitation Centre

The **Alteya Rehabilitation Centre** was established with the standards outlined in Art. 26 of Law no. 883/78, which regulates all aspects of care services for patients with physical, psychological and/or sensory disabilities.

The Centre aims to provide habilitative/rehabilitative treatments both on an outpatient basis and within the home environment. It serves individuals of all ages, particularly those of developmental age, who have complex, often multiple, physical, psychological, sensory or combined disabilities, with potential for permanent rehabilitation and who, in view of the impairment of several functions, require multi-professional treatments that support the recovery and preservation of residual abilities, the development of potential

and the enhancement of quality of life, We are committed to a continuous process of empowerment and autonomy for our patients, involving family members and caregivers in the treatment process. Treatments are offered in both extensive and maintenance modes within multidisciplinary settings.

1.2 AREA SCOPE

The **Alteya Rehabilitation Centre** is located in Via del Mare, 2 in Pomezia (RM) in the Roma 6.4 healthcare district. It cares for users residing throughout the ASL Roma6 healthcare district, mainly residing south of Rome and in neighbouring towns.

1.3 MISSION, COMMIT- MENTS AND VALUES

The **Cooperativa Sociale Onlus ETS Alteya** is dedicated to enhancing the living conditions and health of individuals and their caregivers. Our mission is to provide services that promote the highest possible level of well-being for both individuals and the broader community. We are committed to respecting the uniqueness, rights and community ties of each person we serve, ensuring his or her active participation in our services.

Our commitments

At the **Alteya Rehabilitation Centre**, we place individuals with disabilities at the heart of our rehabilitation and care efforts. We are strongly committed to:

- **Providing** personalised care and a more compassionate approach. We strive to offer the best possible care conditions within our facility, focusing on personalisation, compassion, comfort and health protection;
- **Promoting recovery.** We aim to restore lost or impaired functions in patients with physical, sensory and cognitive disabilities to the greatest extent possible;
- **Ensuring** service reliability. Our services are grounded in proven effectiveness, maintaining a high standard of care that our users can rely on;
- **Keeping** users informed
- **Welcoming** users and making them feel comfortable;
- **Fostering** a human resources management policy that motivates and involves our staff, encouraging their proactive participation in the life of the cooperative;
- **Prioritizing** the safety of our working environments and equipment, adhering to all internal specifications, laws and regulations (Legislative Decree 81/2008), to ensure a safe and comfortable workplace;
- **Maintaining** clear communication with the families of those we assist, understanding and addressing their needs, and implementing preventive and control measures;

- **Working** closely with local health authorities, municipalities, social services, schools and associations to provide comprehensive support for our patients;
- **Implementing** a communication strategy that strengthens the presence of **Cooperativa Sociale Onlus ETS Alteya** in the community, increasing user trust in our services;
- Through our website and printed materials, **striving** to enhance interaction between **Cooperativa Sociale Onlus ETS Alteya** and our users;
- **Working** to improve the efficiency and effectiveness of the services we offer..

Our Values

In pursuing its objectives and conducting socio-medical and healthcare activities, **Cooperativa Sociale Onlus ETS Alteya** is guided by the following core values, which form the foundation of our organizational model and ensure the protection of our users:

- **Centrality of the individual:** We prioritize the rights of individuals with disabilities, ensuring their freedom to choose the place and method of care. We are committed to providing clear information about available services and the rules governing access to these services;
- **Equality:** We uphold the principle of equality in the provision of services and benefits, treating all users with fairness regardless of gender, religion, language, political beliefs and psychophysical and socioeconomic conditions;
- **Impartiality:** Our staff at the **Alteya Rehabilitation Centre** are dedicated to acting with impartiality, neutrality and objectivity in all their interactions and decisions;
- **Continuity and reliability:** We are committed to maintaining the regularity and consistency of our services. In the event of disruptions, we take appropriate measures to minimize inconvenience and ensure continuous care;
- **Right to choice:** We respect the right of users to make choices regarding their care. Within the constraints of our organisational and operational capacities, we strive to offer utmost service flexibility;
- **User participation:** We encourage active participation from our users in the activities and decision-making processes of the Cooperative. This includes collaboration with voluntary organizations and rights protection associations;
- **Efficiency and effectiveness;** We are dedicated to delivering services that produce positive outcomes for our users while ensuring the prudent use of resources, reflecting our commitment to efficiency and effectiveness;
- **Privacy and confidentiality:** We respect and protect the privacy of our users and staff, fully complying with current legislation on data protection (EU Regulation 2016/679).

1.4 THE FACILITY

The **Alteya Rehabilitation Centre** occupies approximately 400 square metres and is located on the second floor of a modern building, featuring a lift and barrier-free access. Situated in a convenient commercial area, the facility is easily accessible and offers ample public parking, both covered and uncovered. The centre complies with all structural, technological and organisational standards as outlined in current authorisation (Commissioner's Decree no. 434/2012 and Regional Decree no. 979/2020).

Inside, the facility includes:

- dedicated spaces for Home Care Services
- fully-equipped therapy rooms for specialised activities, including medical examinations, psychological support sessions, psychomotor therapy, educational activities, and neurocognitive treatments;
- a gymnasium;
- a waiting room;
- a reception desk;
- toilets;
- changing rooms;
- areas designated for staff and administrative activities..

1.5 HOW TO REACH US

The facility is easily accessible by car and by local urban and intercity public transport services.

Legal and administrative headquarters

Via Antonio Bertoloni, 26B 00197 Rome

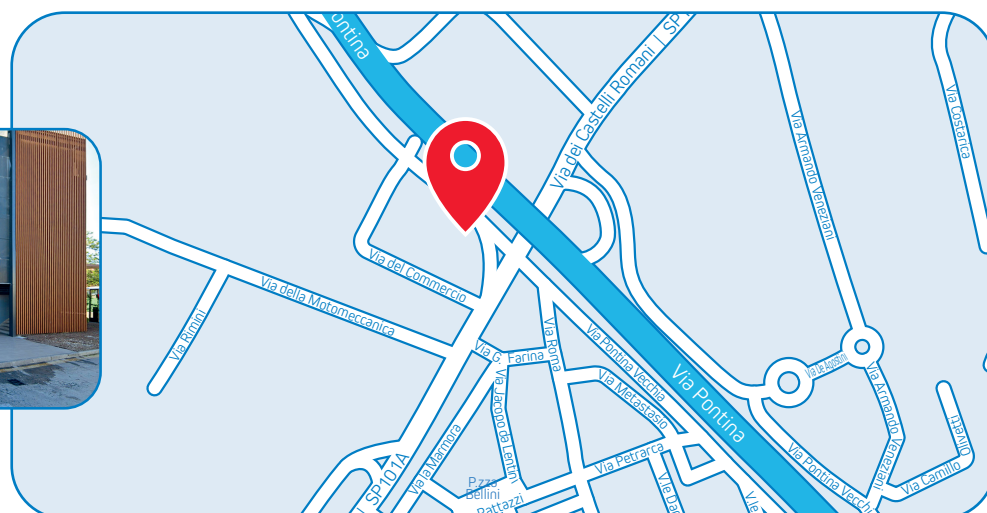
Operational Headquarters:

Alteya Rehabilitation Centre

Via del Mare, 2 | 00071 Pomezia (RM)

Telephone: 0693547939

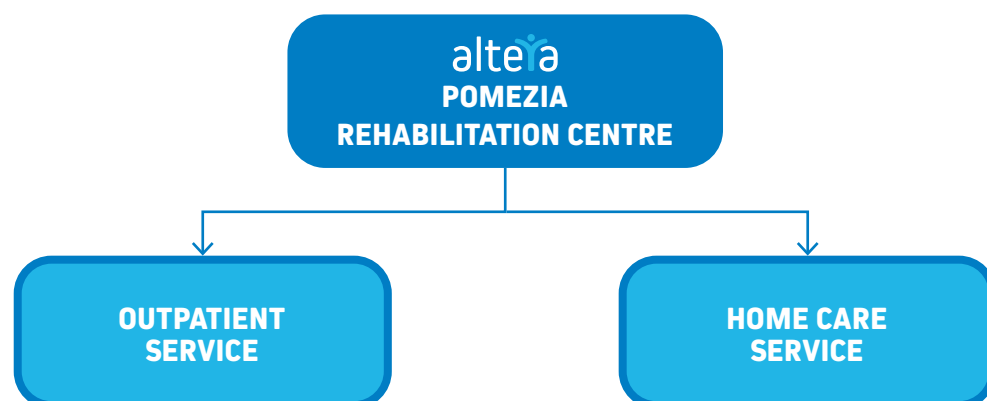
Visit our official website at: **www.alteya.it**





2.0 Descriptions of **services** and **benefits**

The **Alteya Rehabilitation Centre** in Pomezia offers comprehensive Territorial Rehabilitation services available on a non-residential basis and divided into *Outpatient* and *Home Care* Services..



2.1 OUTPATIENT SERVICE

The Outpatient Service of the **Alteya Rehabilitation Centre** in Pomezia provides specialised rehabilitation services for individuals with complex physical, psychological, sensory or combined, disabilities, often affecting multiple areas of function. These services prevalently involve minors, with possible permanent outcomes which, due to the impairment of several functions, require multi-professional rehabilitation treatments, which cannot be provided by specialist outpatient care centres. Our goal is to help these individuals to acquire new functional skills and competences, to facilitate their recovery and functional re-education, and preserve the abilities they have already developed.

2.1.1 AREA OF INTERVENTION

Our rehabilitation services focus on the prevention, diagnosis and treatment of physical, psychological and sensory disabilities, particularly in individuals from birth to 18 years of age. We specialise in addressing neuropsychiatric disorders within this developmental age group, including:

- 1** – Infantile Cerebral Palsy
- 2** – Autism Spectrum Disorders
- 3** – Intellectual Disabilities
- 4** – Neurodevelopmental disorders:
 - a** – Psychomotor Retardation
 - b** – Mixed Developmental Disorders
 - c** – Specific Language Disorders
 - d** – Specific Learning Disabilities (e.g. dyslexia, dysorthography, dyscalculia)
 - e** – Specific Motor Coordination Disorders
 - f** – Borderline Intellectual Functioning
- 5** – Children with Hearing Impairments (Deafness or Hard of Hearing)

In addition, rehabilitation treatment is provided for adult users with the following conditions:

- 1** – Hereditary and Degenerative Diseases of the Central Nervous System
- 2** – Other Disorders of the Central and Peripheral Nervous System
- 3** – Circulatory System Diseases (including Cerebrovascular Diseases)
- 4** – Osteoarticular System Diseases
- 5** – Post-Traumatic and Post-Surgical Conditions Affecting the Osteoarticular System

2.1.2 PROFESSIONAL FIGURES

The user receives comprehensive care from a multidisciplinary team, composed of professionals with the necessary qualifications to address the user's specific needs. Due to the complexity of the disabilities treated, an Individual Rehabilitation Project (IRP) is developed by this specialized team consisting of:

- Medical specialists (Child Neuropsychiatrist, Psychiatrist, Neurologist, Psychiatrist)
- Rehabilitation Health Professionals (Speech Therapists, Neuro and Developmental Psychomotricity Therapists, Physiotherapists, Professional Educators, Occupational Therapists)
- Sector Coordinator
- Clinical Psychologists

The physician in charge of the Service is a specialist in Child Neuropsychiatry and the healthcare personnel involved carry out continuous and specific training according to their respective areas of interest, both through "Continuing Medical Education" (CME) training and within seminar and extended team activities aimed at the clinical discussion of cases.

The assignment of healthcare personnel to carry out therapies is established by the Physician in charge and the Sector Coordinator on the basis of the type of intervention required and staff availability.

2.1.3 AVAILABLE SERVICES

Each user receives a personalised Individual Rehabilitation Project (IRP), designed in alignment with the biopsychosocial model. This project is developed and implemented by a rehabilitation team in consultation with the user and/or his or her family, and outlines objectives, resources, timeframes, interventions and monitoring strategies, utilising standardised assessment tools to track and evaluate the progress and modifications of the disability.

Rehabilitation treatments are tailored to the specific health condition and age of the user and include:

- 1** – Rehabilitation treatments in direct contact with the user:
 - a** – Specialist medical examinations, assessments and observations by rehabilitation professionals
 - b** – Speech therapy (Logopaedic rehabilitation)
 - c** – Cognitive-neuropsychological rehabilitation
 - d** – Neuromotor rehabilitation
 - e** – Psychomotor rehabilitation
 - f** – Psychological therapy
 - g** – Educational interventions
- 2** – Interventions in the absence of the user related to specific rehabilitation needs, taking into account the developmental profile and the specific developmental moment.
 - a** – Multidisciplinary team collaboration to share intervention goals, leading to the formulation and revision of the Individual Rehabilitation Project (IRP)
 - b** – Counselling, parent training, parent coaching, classroom observation and mediation as support activities for primary and secondary caregivers
 - c** – participation in GLO (Operational Working Group) in accordance with Law 104/1992

Rehabilitation services, whether provided individually or in small groups, last either 60 or 50 minutes, depending on the user's age and health condition. Each session includes both direct intervention with the patient and clinical feedback to a family member.

Both simple and complex habilitative/rehabilitative treatments are scheduled throughout the day in appropriately equipped environments, and may be conducted individually or in groups.

If treatment needs to continue beyond the timeframe defined by the IRP, a brief report must be submitted to the Local Health Authority (ASL) outlining the results achieved and the reasons for requesting an extension. Any extension must be authorised by the competent ASL services, which will conduct a re-evaluation of the user's needs in coordination with the referring multi-professional rehabilitation team, based on the provided documentation. The extension plan will be determined by the objectives achieved and the user's clinical needs, and may differ from the initial authorisation in both duration and level of care.

The Outpatient Department operates from Monday to Friday from 8 a.m. to 7 p.m. and on Saturdays from 8 a.m. to 2 p.m. Any suspensions of the service during the summer and/or Christmas period will be communicated in good time to the ASL and by means of a notice displayed to users.

2.1.4 HOW TO MAKE ACCESS

To access outpatient rehabilitation treatment, patients must register on the Waiting List by submitting the following documentation to the Rehabilitation Centre Secretariat:

- A Multidimensional Referral/Assessment issued by a specialist from the Territorial Services of the Health District in which the user resides (e.g., T.S.M.R.E./CAD), specifying the current medical condition for which rehabilitation treatment is requested
- Identity document and health card of the parent or guardian handling the admission
- The user's health card
- Proxy of other parent if the user is a minor

2.1.5 CLINICAL PATHWAY

If rehabilitation treatments are available, the Doctor in charge of the Outpatient Service will select a user from the waiting list based on the facility's current resources, the type of medical condition, and the user's age and residence. The family will be contacted to schedule an initial visit with the specialist child neuropsychiatrist/physiologist, who will oversee the project. At this visit, it is necessary to present any available medical records, evaluations and previous assessments.

Following the specialist examination and functional assessment, the Doctor in charge of the Project, in collaboration with the rehabilitation team, will analyse the user's needs, formulate a diagnosis and create the IRP. The most suitable methods and strategies for addressing or improving the disabilities will be chosen and the family will be informed and asked to sign the Informed Consent.

The technical-methodological approach used will adhere to the ministerial "Rehabilitation Guidelines", regional regulations and the Commissioner ad Acta Decree no. U00101 dated 22/07/2020 "Eligibility Criteria for Territorial Rehabilitation Pathways". Since June 2007, it has also followed the Quality System management procedure.

The IRP will be conducted according to the non-residential outpatient system, with extensive or maintenance assistance modalities and varying levels

of rehabilitation commitment (mild, medium or high). The duration of the Individual Rehabilitation Project is determined by the multi-professional rehabilitation team in collaboration with the Service for the Protection of Mental Health and Rehabilitation in the Age of Development (TSMREE)/CAD of the patient's Local Health Authority. During the therapy cycle, children will be treated individually or in small groups, with the frequency set by the Rehabilitation Project team.

The clinical situation and effectiveness of the rehabilitation treatment will be periodically assessed. For any needs or clarifications in this regard, an interview can be requested with the Doctor in charge of the Project. It is also important for the health personnel to be informed by the family of any additional diagnoses or treatments received at other facilities.

Discharge will be coordinated with the family and with the TSMREE/CAD of the patient's Local Health Authority, and a clinical discharge report will be provided to facilitate continuity of care with other services.

2.1.6 TEMPORARY ABSENCES

Acceptance of the Rehabilitation Project requires a commitment to consistent participation. Any unforeseen interruptions of the Rehabilitation Project by the family must be communicated to the Secretariat with appropriate advance notice.

A limited number of absences are permitted, provided they do not compromise the effectiveness of the treatment. If this threshold is exceeded, unless otherwise determined by the multi-professional rehabilitation team, the facility will discharge the patient and notify the relevant Local Healthcare Authority in advance.

2.2 HOME CARE SERVICE

The Home Care Service of the **Alteya Rehabilitation Centre** in Pomezia (RM), provides home-based care for individuals of all ages with complex, often multiple disabilities. These individuals may face permanent conditions and have no significant care needs, but are unable to access outpatient services due to specific clinical circumstances or other barriers. The service focuses on promoting recovery, preserving residual abilities, developing potential, and enhancing the quality of life through an ongoing process of empowerment and autonomy, with the active involvement of family members (the presence of the caregiver is recommended).

2.2.1 AREA DI INTERVENTO

Eligible for home rehabilitation treatment are individuals with complex disabilities, including those caused by::

- Hereditary and degenerative diseases of the central nervous system (e.g. Alzheimer's disease, senile brain degeneration, Parkinson's disease, Friedreich's ataxia, spinocerebellar diseases, Amyotrophic Lateral Sclerosis, etc.).
- Other disorders of the central and peripheral nervous system (multiple sclerosis and other demyelinating diseases, infantile cerebral palsy, epilepsy, quadriplegia, paraplegia, hemiplegia, diplegia etc.)
- Diseases of the circulatory system - Cerebrovascular diseases
- Diseases of the osteoarticular system (rheumatoid arthritis, arthrosis, intervertebral disc disease etc.)
- Post-traumatic, post-surgical diseases of the osteoarticular system (fractures of the limbs, neck and trunk, intracranial traumas, arthroplasty surgery etc.)
- Congenital malformations (hydrocephalus, holoprosencephaly, lissencephaly, Charge syndrome etc.)

2.2.2 PROFESSIONAL FIGURES

The complexity of the treated disabilities requires the preparation of an Individual Rehabilitation Project (IRP) for each user which, taking into account the biopsychosocial model, will be proposed and implemented by a team that, in collaboration with the user and/or his/her family/guardian/caregiver, will define objectives, resources, timeframes, interventions and methods for monitoring and verification. The multi-professional team will be composed of:

- Medical Specialists (Physiatrist, Child Neuropsychiatrist, Neurologist, Psychiatrist);
- Rehabilitation Health Professionals (Speech Therapists, Neuro and Developmental Psychomotricity Therapists, Physiotherapists, Vocational Educators, Occupational Therapists);
- Sector Coordinator;
- Clinical Psychologists;
- Social Worker.

The Service is led by a specialist in Physiatrics, with all healthcare personnel continuously engaged in targeted training specific to their areas of expertise. This training is conducted through Continuing Medical Education (CME) programs as well as seminars and extended team activities focused on clinical case discussions.

The assignment of healthcare personnel for rehabilitation services is determined by the Physician in charge in collaboration with the Sector Coordinator, based on the nature of the intervention required, the user's place of residence, and the availability of personnel in the area.

2.2.3 AVAILABLE SERVICES

Each user receives an Individual Rehabilitation Project (IRP) designed in alignment with the biopsychosocial model. This plan is developed collaboratively by the rehabilitation team in consultation with the user and/or family. The IRP outlines objectives, resources, timeframes, interventions and monitoring strategies, utilising standardised assessment tools to track and evaluate the progress and modifications of the disability.

Rehabilitation treatments vary according to the specific disorder and age of the user and include:

- 1** – Rehabilitation treatments in direct contact with the user:
 - a** – Specialist medical examinations, assessment and observation by rehabilitation professionals;
 - b** – Neuromotor rehabilitation;
 - c** – Psychomotor rehabilitation;
 - d** – Neuropsychological cognitive rehabilitation;
 - e** – Speech therapy (Logopaedic rehabilitation);
 - f** – Psychological therapy;
 - g** – Educational interventions.
- 2** – Interventions in the absence of the user related to specific rehabilitation needs:
 - a** – Multidisciplinary team collaboration to share intervention goals, leading to the formulation and revision of the IRP;
 - b** – Participation in GLOs in accordance with Law 104/1992.
 - c** – Home counselling, observation and mediation as a support activity for caregivers.

The total duration of rehabilitation services for all users of the Home Care Service is 50 minutes, including at least 45 minutes of actual treatment.

The Home Care Sector operates from Monday to Friday from 8 a.m. to 7 p.m. and on Saturdays from 8 a.m. to 2 p.m.

If treatment needs to continue beyond the timeframe defined by the IRP, a brief project closing report must be submitted to the Local Health Authority (ASL) outlining the results achieved and the reasons for requesting an extension. Any extension must be authorised by the competent ASL services, which will conduct a re-assessment of the user's needs in coordination with the referring multi-professional rehabilitation team, based on the provided documentation. The continuation plan will be determined by the objectives achieved and the user's clinical needs, and may differ from the initial authorisation in both duration and level of care.

2.2.4 HOW TO MAKE ACCESS

The Home Care Rehabilitation Service can be accessed on the basis of a specific proposal from the Medical Specialist or from the ASL Territorial Service. To be included on the waiting list, the user must contact the Secretariat at the Operational Headquarters in Via del Mare, 2 in Pomezia (RM) and submit photocopies of the following documents:

- A Multidimensional Referral/Assessment issued by a specialist from the Territorial Services of the Health District in which the user resides (e.g., T.S.M.R.E./CAD), specifying the current disorder for which rehabilitation treatment is requested.
- User's identity document front/back;
- User's health card front/back;
- Identity document of family member making the registration front/back;
- Health card of the family member/caregiver making the registration front/back;
- Registration request form;
- Data processing consent form;
- Proxy of the other parent of the user allowing inclusion in the list in the case of a minor or proxy of the patient in the case of an adult unable to travel.

2.2.5 CLINICAL PATHWAY

When rehabilitation treatments are available, the user will be contacted to schedule an initial appointment with a specialist doctor. At this visit, it is essential to bring the user's medical records, evaluations and prior assessments. The multi-professional team will assess the patient based on clinical access criteria and the availability of internal resources, assuming responsibility for the user's care. The users' Individual Rehabilitation Projects will be coordinated with the relevant territorial health services. The intervention approach will be based on the global assumption of responsibility for the user in line with the provisions of the ministerial "Rehabilitation Guidelines" and the regional norms, following the biopsychosocial conceptual model outlined in the ICF (International Classification of Functioning, Disability and Health -2001). This model views disability as "the consequence or result of a complex interaction between a person's health condition, personal factors, life situation involvement, and environmental factors representing the circumstances in which the individual lives". Family members will receive appropriate information about the user's care. The clinical situation and the effectiveness of the rehabilitation intervention will be periodically evaluated. For any need or clarification in this regard, an interview may be requested with the Physician in charge of the Project. It is also important for the health personnel to be informed by the family of any additional diagnoses or treatments received at other Facilities.

Discharge is agreed upon with the family and with the CAD/TSMREE of the Local Healthcare Authority where the patient resides, and on that occasion a clinical discharge report is provided to facilitate continuity of care with other services.

2.2.6 TEMPORARY ABSENCES

Acceptance of the rehabilitation project entails the user's commitment to constant attendance. Unscheduled interruptions of the rehabilitation project by the family must be communicated with suitable notice to the Secretariat.

A limited number of absences that does not compromise the effectiveness of the treatment is allowed. Once the limits have been exceeded, unless otherwise evaluated by the multi-professional rehabilitation team, the facility discharges the patient, informing the relevant Local Healthcare Authority services in advance.

3.0 Patient's **rights** and **duties**

The **Cooperativa Sociale Onlus ETS Alteya** has developed a Charter of Patients' Rights and Duties, aligning with the European Charter of Patients' Rights (Brussels, 15 Nov. 2002) and integrating it into our Service Charter. Our staff, who are both informed and trained on these rights and duties, are committed to understanding and respecting the needs of patients and their families. We also encourage patients to adhere to their duties/responsibilities.

3.1 PATIENT'S RIGHTS

Right to preventive measures

Everyone has the right to appropriate services to prevent illness.

Right to access

Everyone has the right to access the health services that his or her health condition requires without discrimination on the basis of financial resources, place of residence, type of medical condition or time of access to the service.

Right to information

Everyone has the right to access all information concerning his or her health condition, health services and how to use them, as well as all information that scientific research and technological innovation makes available.

Right to consent

Everyone has the right to access all information that may enable him or her to actively participate in decisions concerning his or her health. This information is a prerequisite for any procedure and treatment, including participation in trials.

Right to freedom of choice

Everyone has the right to freely choose between different healthcare procedures and providers on the basis of adequate information.

Right to privacy and confidentiality

Everyone has the right to confidentiality of information of a personal nature, including information concerning his or her state of health and possible diagnostic or therapeutic procedures, as well as the right to the protection of his or her privacy during the performance of diagnostic examinations, specialist visits and medical and surgical treatments in general.

The right to respect patients' time

Everyone has the right to receive necessary medical treatment in a short and predetermined time. This right applies to every stage of treatment.

Right to respect quality standards

Everyone has the right to access high quality healthcare services, based on the definition of and adherence to well-defined standards.

Right to safety

Everyone has the right not to be harmed by the malfunctioning of health services or medical errors and has the right to access health services and treatment that provide high safety standards.

Right to innovation

Everyone has the right to access innovative procedures, including diagnostic procedures, in line with international standards, regardless of economic or financial considerations.

Right to avoid unnecessary suffering and pain

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

Right to personalised treatment

Everyone has the right to diagnostic or therapeutic programmes tailored as closely as possible to his or her personal needs.

Right to complain

Everyone has the right to complain whenever they have suffered harm and to receive a response.

Right to compensation

Everyone has the right to receive adequate compensation, within a reasonably short period of time, whenever he or she has suffered physical, moral or psychological harm caused by health services. Without the undersigned consent of the assisted person, medical personnel may not undertake any diagnostic and treatment activities, except in cases provided for by law: necessity and urgency; or when the person, at the time incapable of expressing his or her own will, is in danger of death.

3.2 PATIENT'S DUTIES

Adopt responsible behaviour at all times, with the willingness to collaborate with all hospital staff, respecting and understanding other patients.

Promptly **inform** healthcare professionals of any changes to your address.

Inform doctors and healthcare staff of anything that may be useful and necessary for better prevention, diagnosis, therapy, and assistance.

Upon admission, **express** your preferences (using the appropriate forms provided) regarding who is authorized to receive information about your health condition.

Promptly **communicate** the decision to cancel scheduled healthcare services to avoid wasting time and resources.

Respect the environment, equipment, and furnishings inside the facility, considering them the property of everyone, including yourself.

Adhere to rules ensuring the proper conduct of care and therapeutic activities.

Respect the schedules established by the health management to allow the regular conduct of care and therapeutic activities.

Avoid any behaviour that may cause disturbance or discomfort to other patients.

Comply with the smoking ban and the limits on mobile phone use within the wards, taking care of your personal belongings and never leave them unattended.

4.0 Quality Standards, Commitments, Programmes, and Protection and Verification Mechanisms

4.1 QUALITY COMMITMENTS

The **Cooperativa Sociale Onlus ETS Alteya** conducts continuous monitoring and control of services and responses to users' needs so as to continually improve quality standards. The commitments that the **Alteya Rehabilitation Centre** undertakes to achieve towards its users are as follows:

- 1 – **Reliability:** Commitment to providing services punctually and precisely.
- 2 – **Material Structures:** Commitment to improving environmental structures, equipment, and tools necessary for providing services.
- 3 – **Competence:** Commitment to enhancing the skills, competences, and experiences of operators to provide increasingly qualified services.
- 4 – **Courtesy:** Commitment to improving the respect, kindness, consideration, and cordiality of front-line staff.
- 5 – **Credibility:** Commitment to maintaining the honesty, loyalty, and reliability of the service provider.
- 6 – **Safety:** Commitment to ensuring the absence of risks for the user in accordance with current laws.
- 7 – **Accessibility:** Commitment to facilitating contact with the company and easing access for users through appropriate signage on entry routes and services.
- 8 – **Communication:** Commitment to listening to and maintaining relationships with all users, including foreign ones.
- 9 – **Understanding:** Commitment to knowing and meeting users' needs and expectations as best as possible, ensuring respect for patients' values and beliefs.
- 10 – **Procedures:** Commitment to respecting and improving the procedures in place for service delivery.

4.2 QUALITY STANDARDS

Based on these commitments, the main "*quality factors*" on which the user's perception of service quality is based are listed below:

- User information
- Timeliness
- Waiting list
- Complaint management
- User satisfaction
- Hospitality, comfort, and safety
- Hygiene and sanitary conditions
- Social and human relations
- User care

4.3 QUALITY STRATEGIES

The management of **Cooperativa Sociale Onlus ETS Alteya** is aware that operating according to "Quality" principles allows achieving set objectives with maximum effectiveness and efficiency and fully satisfying both expressed and implicit user needs, in compliance with laws and regulations.

Therefore, and especially to ensure continuous improvement of its performance, it has implemented a Quality Management System with the following certifications:

- On 4 December, 2013: Evaluated and judged compliant with the requirements of the **ISO 9001:2015 Management System standard**. The validity of the certification issued in compliance with the LL-C Technical Regulation: CODE EA:38 (NACE 86, 88) (Certificate No.3912023) expires on 01-12-2025.
- On 27 October, 2017: Evaluated and judged compliant with the requirements of the **ISO 14001:2015 Management System standard**. The validity of the certification issued in compliance with the LL-C Technical Regulation: CODE EA:38 (NACE 86, 87, 88) (Certificate No.390667) expires on 26-10-2026.
- On 1 March, 2021: Evaluated and judged compliant with the requirements of the **ISO 37001:2016 Management System standard**. The validity of the certification issued in compliance with the GLOBAL STD Technical Regulation: CODE EA:38 (NACE 86, 87, 88) (Certificate No. GSC37KIT121) expires on 28-02-2024.

The crucial point of a quality-inspired management system is the provision of efficient solutions and services, in line with current regulations and, above all, adhering to the expectations of the end users.

The **Cooperativa Sociale Onlus ETS Alteya** is committed to respecting the relationship between: Centre Performance/User needs and expectations.

4.4 PROTECTION AND VERIFICATION MECHANISMS

Periodic checks are carried out on the commitments made through the standards to detect their achievement and/or any deviations, and to identify corrective actions and/or improvements in service levels. The protection and verification systems consist of:

- 1 – Complaint management.
- 2 – User satisfaction surveys.
- 3 – Verification of compliance with standards and commitments.

4.4.1 COMPLAINT MANAGEMENT

The **Cooperativa Sociale Onlus ETS Alteya** ensures user protection against acts or behaviours that deny or limit access to services, and more generally, against service failures, ensuring the possibility to file complaints and/or reports in any form (oral or written). User complaints/reports can be submitted via email to the following address: amministrazione@alteya.it or

by filling out the appropriate form available at the Rehabilitation Centre's reception in Via del Mare, 2 Pomezia 06/93547939.

Following complaints or reports, the **Cooperativa Sociale Onlus ETS Alteya**, in accordance with the Decree of the Presidency of the Council of Ministers dated 19/05/95, activates procedures to investigate the causes and plan appropriate measures to eliminate them, with full satisfaction of users who receive a reply to written complaints within 7 working days. Users can also provide suggestions for service improvement.

4.4.2
USER
SATISFACTION
SURVEY

A satisfaction questionnaire is systematically provided to all users, allowing them to express their suggestions and level of satisfaction regarding the services used. These questionnaires are collected, analysed, and used to improve the services offered.

4.4.3
VERIFICATION
OF COMPLIANCE
WITH STANDARDS
AND COMMITMENTS

Every year, the **Cooperativa Sociale Onlus ETS Alteya** checks the achievement of defined standards and takes measures to eliminate any negative results and to improve the quality standards of the services offered, possibly defining new indicators and new standards. The quality factors, with related indicators, commitments, and verification tools, are summarised in section 4.5.

4.5
QUALITY
CERTIFICATION

ISO 9001:2015
CERTIFICATION



CERTIFICATO

N. 3912023



Questo documento certifica che il Sistema di Gestione per la Qualità di

Cooperativa Sociale Onlus Alteya

Via Antonio Bertoloni, 26/B
00197 Roma (RM)
Italia

Altre sedi:

Via Appia Nuova, 54 - Località Gallaro 00072 Ariccia (RM)
Via San Francesco D'Assisi 21/b, 00041 Albano Laziale (RM)

è conforme alla Norma

ISO 9001:2015

per i seguenti settori di attività

Progettazione ed erogazione di servizi socio-sanitari, sanitari e di trasporto rivolti ad anziani, disabili e minori. Erogazione di servizi socio sanitari ed assistenziali presso strutture di tipo ospedaliero in regime residenziale o ambulatoriale. Erogazione di prestazioni infermieristiche in regime ambulatoriale. Progettazione ed erogazione di servizi socio assistenziali e sanitari in regime domiciliare rivolti anche a pazienti oncologici. Progettazione ed erogazione di servizi di assistenza domiciliare sociale (SAD) ad anziani, minori, disabili ed anziani (gestione centri diurni).

Codice EA: 38 (NACE 86, 88)

La certificazione è rilasciata con il numero No. **3912023** Data del presente certificato 2 dicembre 2022 e scadenza del certificato 1 dicembre 2025.
La data di prima emissione del certificato è il 4 dicembre 2013.


confermato da


stampato da



codice di validità **36D8AECC-9C0**

Verificare la validità del certificato usando questo codice su: www.ll-c.info

LL-C (Certification) Czech Republic a.s. | Pobřežní 620/3, 186 00 Praha 8

ISO 14001:2015
CERTIFICATION



CERTIFICATO

N. 390667



Questo documento certifica che il Sistema di Gestione per l'Ambiente di

Cooperativa Sociale Onlus Alteya ETS

Via Antonio Bertoloni, 26/B
00197 Roma (RM)
Italia

Sedi operative:

Via San Francesco d'Assisi 21/B - 00041 Albano Laziale (RM)
Via Appia Nuova 54 - 00040 Ariccia (RM)

è conforme alla Norma

ISO 14001:2015

per i seguenti settori di attività

Progettazione ed erogazione di servizi socio-sanitari, sanitari e di trasporto rivolti ad anziani, disabili e minori. Erogazione di servizi socio-sanitari ed assistenziali presso strutture di tipo ospedaliero in regime residenziale o ambulatoriale. Erogazione di prestazioni infermieristiche in regime ambulatoriale. Progettazione ed erogazione di servizi socio assistenziali e sanitari in regime domiciliare rivolti anche a pazienti oncologici. Progettazione ed erogazione di servizi di assistenza domiciliare (SAD) a minori, disabili ed anziani (gestione centri diurni).

Codice EA: 38 (NACE 86, 87, 88)

La certificazione è rilasciata con il numero No. **390667** Data del presente certificato 27 ottobre 2023 e scadenza del certificato 26 ottobre 2026.
La data di prima emissione del certificato è il 27 ottobre 2017.


confermato da


stampato da



codice di validità **62D5BA3B-A64**

Verificare la validità del certificato usando questo codice su: www.ll-c.info

LL-C (Certification) Czech Republic a.s. | Pobřežní 620/3, 186 00 Praha 8

ISO 37001:2016
CERTIFICATION

ISO 37001 CERTIFICATE

www.globalstd.com



Cooperativa Sociale Onlus Alteya

Principal Site: Via Antonio Bertoloni 26/b, 00197, Roma, Italia.

Site 2: Via Appia Nuova, 54 - Località Gallaro 00072 Ariccia, Italia.

Site 3: Via San Francesco D'Assisi 21/b, 00041 Albano Laziale, Italia.

Has been assessed and complies with the requirements of:

ISO 37001:2016

Anti-bribery Management Systems

General Scope: Progettazione ed erogazione di servizi socio-sanitari, sanitari e di trasporto rivolti ad anziani, disabili e minori. Gestione di strutture socio sanitarie e socio assistenziali. Erogazione di servizi socio-sanitari ed assistenziali presso strutture di tipo ospedaliero in regime residenziale o ambulatoriale. Erogazione di prestazioni infermieristiche in regime ambulatoriale. Progettazione ed erogazione di servizi socio assistenziali e sanitari in regime domiciliare rivolti anche a pazienti oncologici. Progettazione ed erogazione di servizi di assistenza domiciliare (SAD) a minori, disabili ed anziani (gestione centri diurni). (Applicabile a tutti i siti).



CERTIFICATE NUMBER
GSC37KIT121

Initial registration date
March 01, 2021

Date of certification decision
March 01, 2021

Registration period
01/MAR/21
28/FEB/24

Certification scheme
Single Site
Last update
March 01, 2021

Executive Director
GlobalSTD Certification



Global Standards, S.C. Pedro Moreno 1677 Piso 4-3 Col. Americana, C.P. 44160, Guadalajara, Jalisco, México

UNI/PDR 125:2022
CERTIFICATION



Certificato di Conformità n° PDR061/25

Si certifica che l'Organizzazione

Cooperativa Sociale Onlus ALTEYA ETS

Sede Legale: Via Antonio Bertoloni 26/b - 00197 Roma (RM)

Sede Operativa: Via Appia Nuova 54 - 00072 Ariccia (RM)

Sede Operativa: Via San Francesco D'Assisi 21/b - 00041 Albano Laziale (RM)

con sistema di gestione per la parità di genere
certificato ai sensi della

UNI/PdR 125:2022

dall'Organismo di Certificazione Cersist S.r.l. con Marchio UNI

Misure per garantire la parità di genere nel contesto lavorativo
valide per il seguente campo di applicazione:

PROGETTAZIONE ED EROGAZIONE DI SERVIZI SOCIO SANITARI, SANITARI E DI TRASPORTO RIVOLTI AD ANZIANI, DISABILI E MINORI. EROGAZIONE DI SERVIZI SOCIO SANITARI ED ASSISTENZIALI PRESSO STRUTTURE DI TIPO OSPEDALIERO IN REGIME RESIDENZIALE O AMBULATORIALE. EROGAZIONE DI PRESTAZIONI INFERMIERISTICHE IN REGIME AMBULATORIALE. PROGETTAZIONE ED EROGAZIONE DI SERVIZI SOCIO ASSISTENZIALI E SANITARI IN REGIME DOMICILIARE RIVOLTI ANCHE A PAZIENTI ONCOLOGICI. PROGETTAZIONE ED EROGAZIONE DI SERVIZI DI ASSISTENZA DOMICILIARE SOCIALE (SAD) AD ANZIANI, MINORI, DISABILI. GESTIONE CENTRI DIURNI. SERVIZIO DI INTERVENTI E SUPPORTO (FISICO, PSICHICO, SOCIALE) FINALIZZATO AL CONTRASTO DELLA VIOLENZA DI GENERE. EROGAZIONE DI SERVIZI DI RIABILITAZIONE TERRITORIALE IN REGIME NON RESIDENZIALE E ICT. PROGETTAZIONE E SVILUPPO DI SOLUZIONI IN AMBITO ICT

IL PRESENTE CERTIFICATO È SOGGETTO AL RISPETTO DEL REGOLAMENTO PER LA CERTIFICAZIONE
DEI SISTEMI DI GESTIONE PER LA PARITÀ DI GENERE

LA VALIDITÀ DEL PRESENTE CERTIFICATO È SUBORDINATA ALLA SORVEGLIANZA PERIODICA ANNUALE E
AL RIESAME COMPLETO DEL SISTEMA DI GESTIONE CON PERIODICITÀ TRIENNALE

Per informazioni puntuali ed aggiornate circa eventuali variazioni intervenute nello stato di certificazione
di cui al presente certificato, si prega di contattare il numero telefonico 079.243604
oppure l'indirizzo e-mail info@cersist.it o cersist@pec.it

Data di prima emissione
05/02/2025

Data revisione corrente
05/02/2025

Data di scadenza
04/02/2028



La Direzione



SGQ N° 108A
Membro degli Accordi di Mutuo Riconoscimento
EA, IAF e ILAC
Signatory of EA, IAF and ILAC Mutual Recognition
Agreements



Cersist srl - Via Torres 2/a - 07100 Sassari (SS)

MG080-PDR Rev. 01 del 03.10.2023

QUALITY FACTORS	QUALITY INDICATORS	OBJECTIVES COMMITMENTS	VERIFICATION TOOLS
User Information	Information on services and access procedures	Simple and clear information	Analysis of satisfaction questionnaires
	User Satisfaction Questionnaire administration	Once a year to all users	Presence of yearly analysis report
	Received complaints	No complaints	Complaints register
	Availability of the Service Charter	Always present and updated	Random sampling of presence of Service Charter
	Internal Sector Regulations	Provided during initial meetings to the user and/or family members	Presence in folder of Regulations signed by user/family member
Timeliness	Respect for waiting times for therapy commencement (time interval between the user's entry into the facility and the start of therapy)	Zero minutes	Sample collection of waiting times
User Satisfaction	Global satisfaction index	Positive evaluation for at least 80% of users of various services	Yearly satisfaction analysis report
Social and Human Relations. Professionalism	Listening ability of operators; courtesy and availability of operators; respect for users' rights; professionalism and competence of operators	Service satisfaction monitoring. Continuous staff updating	Staff training monitoring
Welcome	Welcoming and accompanying users to therapy areas and escorting them to the exit at the end of the session	Immediate	Satisfaction questionnaire analysis
User and Staff Privacy Protection	Availability of forms for information and consent; staff training; data security as regards both paper and digital documentation	Users and staff receive information as required by current privacy regulations, and personal data are equally protected	Periodic verification of the Data Processor
Work Environment and Hygiene-Sanitary Conditions	Cleanliness of environments	Periodic checks recorded	Hygiene and cleanliness of the environments are implemented and controlled daily
	Materials and instruments necessary for rehabilitation treatments	Present and recorded in a specific list	Annual verification by the Health Directorate on the need for additional instruments
	Maintenance and/or verification of equipment and instruments	Equipment/instruments constantly maintained and/or verified according to the specific maintenance plan	Periodic revisions recorded by technicians

QUALITY FACTORS	QUALITY INDICATORS	OBJECTIVES COMMITMENTS	VERIFICATION TOOLS
Possibility for Users to Submit Observations, Suggestions, and Complaints	Availability of forms for submitting observations, suggestions, and complaints	Resolution of users' issues and monitoring of causes of potential dissatisfaction	User Satisfaction Questionnaire analysis
Taking charge of user	Presence of a Medical Record	Complete, updated, and protected medical record	Sample verification by Physician in charge of services
	Operators involved in the Individual Rehabilitation Project (IRP)	Presence of a multidisciplinary team	Team meeting minutes
	Regular meetings with users' families to inform them about the therapeutic progress	All required by current regulations and additional if necessary	Interviews recorded in the medical record
	Periodic functional checks for the user	At the beginning, middle, and end of the IRP and additional if necessary	Application of appropriate evaluation scales
	Effectiveness of rehabilitation treatments	Periodic monitoring through appropriate outcome indicators	Comparison of evaluation scale application results
Request for Medical Documentation	Commitment to delivering documentation within 15 days	Deliver requested documentation as quickly as possible	Monitoring of delivery times within 15 days
Quality System Management	Adoption of a Management System	Management System according to: ISO 9001:2015 ISO 14001:2015 ISO 37001:2016	Updated certifications



Registered office

Via Antonio Bertoloni 26/B
00197 Roma

Operating facilities

Via Appia Nuova 54
Loc. Galloro | 00072 Ariccia (RM)

0693547939
www.alteya.it