

Via Gualdesi, 2 Macerata Feltria (PU) – Tel. 0722/728198 email: villaverde@gruppoatena.it



SERVICE CHARTER

RICOVERO GIUSEPPE ANTIMI CLARI "VILLA VERDE"



GRUPPO ATENA Srl

info@gruppoatena.it www.gruppoatena.it



Written by: Athena SRL ref. " acdm ." Rev.04 of 10/04/2025 The Service Charter, displayed on the "Atena" notice board, is distributed and delivered to users and/or their families and is published on the website www.gruppoatena.it.

It is also distributed to voluntary associations, general practitioners, medical associations, pharmacies, health authorities, competent AGs and the Regional Control Body.



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1. PRESENTATION OF THE SERVICE CHARTER

The Service Charter is the instrument drawn up by the manager of the services of "Villa Verde" (Residenza Protetta Anziani - RP) company ATENA Srl with Sole Shareholder that guarantees the transparency of the operations and management of human and economic resources. It therefore offers a real tool for controlling the quality provided and can be considered a sort of pact between users, operators and administrators, it has the purpose of developing a sense of trust and security towards us.

It is a dynamic tool, subject to verification at least once a year and revised whenever necessary and is available to users at the operational headquarters of the service. The newly printed paper is distributed via PEC to the Health Services of the Marche Region, to the Districts of the AST Pesaro Urbino, Voluntary Associations (AUSER), the Order of Physicians and professional colleges, institutions, general practitioners, pharmacies.

Reference legislation:

Law n.328/2000

LR 20/2002 and subsequent implementing regulations: PCM Directive 27/01/1994 and Regional Regulation no. 1 of 2004

DGRM n. 1230/10 and subsequent amendments DGRM n. 282/2014, DGRM n. 1331/14, DGRM n. 1672/2019, DGRM n. 292/2020, DGRM n. 938/2020, DGRM n. 57/2022,

General Regulation for the "RP/R3" of the Vast Area 1

Internal Regulations of the Protected Residence RP/R3 "Villa Verde"

Clari Residential Care Home – "Villa Verde" is authorised with LR 21/2016 with provision prot.n.471 SUAP Practice 337/2024 authorisation n.1/2025 for: Residential Care Home for the Elderly (RP/R3) – 23 places issued by the Municipality of Macerata Feltria (PU).

2. THE SERVICE CHARTER

In summary, the service charter:

INFORMS: the citizen/user about the services offered by the residential center of "Villa Verde" managed by ATENA Srl with Sole Shareholder and about the methods for accessing them

COMMITS: the managing body to guarantee the provision of services and performances at certain quality levels, as described in this document

INDICATES: the rights and duties of the citizen/user

FACILITATE: a greater understanding of the service by the citizen/user, as well as by offices, bodies, institutions, private social organizations, voluntary associations, unions and anyone who works in the sector of services for non-self-sufficient individuals



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3. PRESENTATION OF MANAGEMENT BODY: GRUPPO ATENA

GRUPPO ATENA was born in 1992, from the idea and entrepreneurial will of Cav. Dott. Ferruccio Giovanetti, who still directs it with dedication and passion.

GRUPPO ATENA is a family of health professionals with certified experience that welcomes, assists and recovers suffering people with very different experiences and is one of the main private operators in the Italian market in the management of health and social health facilities operating in psychiatry and rehabilitation of mental, physical and sensory disabilities, at the service of Public and Private Health under a contract and accreditation regime . The facilities of GRUPPO ATENA are authorized and accredited by the Marche Region, have relationships with the PA of the national territory, regulated according to contractual agreements stipulated mainly with the Marche Health Authorities (AST) and the AUSL of the Romagna region.

With a workforce of over 300 employees and a turnover of over 15 million euros, GRUPPO ATENA is now a consolidated and appreciated reality, which operates through nine locations located in the suggestive setting of Montefeltro, one of the most beautiful Apennine routes in Italy, between Marche, Romagna and the Republic of San Marino . It provides residential care to over 350 adult patients with problems resulting from psychiatric, addiction, neurological, functional and disability pathologies, even in conditions of serious and complex co-morbidity, and increasingly frequently associated with restrictions of personal freedom. GRUPPO ATENA provides semi-residential care for dementia and the disabled, and also boasts a functional re-education clinic with dry and water interventions.

GRUPPO ATENA has started the certification process for the quality management system according to the UNI EN ISO 9001:2015 regulation for the services of "Design, management and provision of social-health, educational-rehabilitative and assistance services to individuals" (EA 38).

GRUPPO ATENA has defined adequate planning and management control tools through which it follows its ability to satisfy the needs of users without wasting resources. The effectiveness of assistance is strictly related to the adequacy and customization of the intervention. The objectives that GRUPPO ATENA wants to achieve with this document is to make available to the user of its services a real tool for controlling the quality provided.





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4. FUNDAMENTAL PRINCIPLES

The "Villa Verde" facility is a Protected Residence that guarantees the maintenance and improvement of the health and well-being of its guests through personalized assistance, health, protection and hotel activities. The service is aimed at guaranteeing its guests a safe and satisfying daily life in a family-sized environment. The services provided by the "Villa Verde" are therefore aimed at the needs of people, personalized in compliance with the specificity of individual guests. The fundamental principles are:

Involvement: the user's family must be encouraged and involved in the service delivery process and in the educational and care methods applied so as not to cause a separation from their family unit; relationships with the family must be facilitated during the service opening hours.

Equality: relationships with users are based on rules that are the same for everyone: under no circumstances can discriminatory forms be exercised against users (e.g. for reasons relating to sex, race, language, religion, social, economic and political conditions);

Fairness: All operators are committed to carrying out their activities in an impartial, objective and neutral manner towards all users.

Equality: with equal needs, services are provided equally to all users without distinction of race, sex, nationality, religion and political opinion.

Impartiality: all users are guaranteed the same conditions to access and enjoy the services offered according to a rule of impartiality and objectivity.

Continuity: means that the service is provided in an integrated, regular and continuous manner compatible with resources and constraints.

Professionalism: the service is provided in a professional manner, by adequately trained and constantly updated staff.

Integration: personalized care requires that different services work in close collaboration with each other; in this context, the "Villa Verde" represents an essential contribution to the system of social and health services in the area.

Right to choose: the user, where possible, is left free to choose whether or not to use the services after they have been carefully presented to him in every aspect.

Participation: the active participation of the user in all management aspects concerning him is encouraged; with this aim the user receives the necessary information regarding his rights and the methods with which to forward any complaints.

Efficiency and effectiveness: available resources are used in the most rational and prudent way possible in order to produce maximum results in terms of user well-being and staff gratification.

Humanity: the central attention is placed on the person with full respect for his dignity, whatever his physical or mental, cultural or social conditions, with courtesy, education, respect and availability on the part of all operators.

Respect for Private Life and Confidentiality: In managing its activities, the facility guarantees the protection of the rights and dignity of the user, respecting private life and confidentiality as well as privacy, to guarantee protection from any form of abuse, mistreatment, degrading treatment or negligence that could expose them to unjustified risks. All data and information are managed in a controlled manner (Legislative Decree 679/2016) and with correctness and professional ethics by healthcare professionals.

User satisfaction: the user is always considered as an individual with dignity, critical capacity and right to choose, to be satisfied on the services he receives; the quality of the services provided to the patient, therefore, must not be limited to the effectiveness of the rehabilitation service, but must also include functionality and reliability of the support services.



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5. "VILLA VERDE" HEALTH CARE RESIDENCE

5.1. PURPOSE AND CHARACTERISTICS

The RP/R3 "Villa Verde" Protected Residence for the Elderly is a 23-bed residential facility for non-self-sufficient elderly people (up to the age of 65), with the consequences of physical, mental, sensory or mixed pathologies that cannot be treated at home, which provides social and healthcare activities and includes hotel services. Assistance is provided through rehabilitation services, guardianship and social care, hotel services, and medical and nursing healthcare. Relief hospitalization is aimed at non-self-sufficient elderly people who, due to extraordinary events, find themselves without the care support necessary to remain at home, or at frail elderly people whose family members need to be relieved of the care burden due to events of various kinds. Access to the service is managed following an assessment by the Integrated Assessment Unit (UVI) on the proposal of the General Practitioner. Inside the Protected Residence there are 20 beds in agreement with AST Pesaro Urbino and 3 beds intended for hospitality in a free market regime mainly citizens resident in the territorial area of Macerata Feltria who have reached the age of sixty-five.

The general purpose of the sheltered residence "Villa Verde" is to improve the quality of life of elderly people in conditions of non-self-sufficiency, which is manifested by: absence of physical symptoms, emotional well-being, ability to carry out daily activities in a pleasant way, maintenance of interpersonal relationships, participation, enjoyment of social activities, slowing down the progression of aging and consequent prolongation of life expectancy. In taking care of its elderly, in fact, it bases its principles on respecting the following aspects:

- safeguard health and physical well-being through the employment of qualified personnel;
- promote environments conducive to well-being and health, placing a strong emphasis on the medicalhealth aspect without neglecting the importance of making the elderly person feel at "home" and trying to maintain their residual abilities even in cases where the person is dependent on the staff;
- promote an approach that respects the person in all their needs and specificities through the preparation of personalized interventions capable of ensuring psychophysical and spiritual well-being;
- consider the person's biography and specific needs resulting from their life experiences and the skills to be supported and stimulated;
- personalize life within the service to make it as similar as possible to life within one's own home, trying to preserve the private sphere and encourage individual autonomy. In the case of people with advanced cognitive decline, everything possible should be done to allow the person to carry out various activities at their own pace.

The general objectives that the service intends to pursue are:

- a) With regards to the territory:
- allow for the maintenance of regular contacts with local services;
- promote awareness of aging and the culture of care;
- promote collaborative and exchange relationships with external organizations: voluntary associations, schools, parishes, informal groups aimed at achieving greater integration of elderly people and their territories of origin.
- b) Towards the elderly:
- identify and respect people's needs and desires, valuing their personal experiences and their need for health, social and welfare care;
- promote equality and fairness, without discrimination, ensuring equal dignity and protecting differences;
- ensure regularity and continuity of the service and social assistance activities to guarantee and promote the maintenance of residual personal and social skills;
- promote the participation of guests and families by allowing them to collaborate in improving the service and to know, monitor and evaluate its quality, also through the family committee;
- guarantee the right of choice for guests and their families with respect to the opportunities offered in the services, taking into account the objectives of their care plans and specific objectives;
- pursue the effectiveness and efficiency of the service to meet the needs of guests and their families.



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5.2. METHODOLOGICAL FRAMEWORK

The orientation of the residence is inspired by the pursuit of the highest quality of life, of well-being, of safeguarding the health of guests, in particular the most fragile ones for whom a good part of this quality is played out in the possibility of carrying out simple daily activities such as eating, drinking, going to the bathroom, washing, entertaining others and so on.

The quality of life of an elderly person is, therefore, linked, as for other ages, to the degree to which the person is able to satisfy his or her own needs, requirements, and desires. In the residence, the quality of life is linked to the health and autonomy that the structure is able to guarantee through the organization of its services, as a global response to the needs of the elderly person who is not divided into health, social and assistance parts, but presents himself or herself as a complete and unique person in his or her complexity.

It is therefore essential for the organization to act in a synergic way, that is, to act in connection with a unitary project that can simultaneously take into account the needs of individual elderly people and the organizational, logistical and operational conditions. For this purpose, organizational tools will be activated that will be:

- the adoption of a project-based work methodology: this is an operating method that sees the organization engaged in identifying health and well-being objectives for guests and in evaluating the health and well-being results actually achieved;
- the adoption of multidimensional assessment tools, or a specific commission aimed at ascertaining the needs of each individual elderly person, possibly integrated with other information deemed necessary, to ascertain their physical, psychological and relational condition;
- the activation of a team effort at department level, composed of various professional figures (doctor, nurse, social health worker, entertainer educator) who decides and prescribes an individual assistance project (PAI) that must be implemented by the specific services called for by the project.

5.3. STRUCTURE

The RP/R3 "Villa Verde" Residential Home for the Elderly is a permanent residential service open 24 hours a day, every day of the year. The goal is to maintain and, if possible, improve the health and well-being of the guest. The facility is open to the public from 8:00 to 20:00 and provides an information service on site. From 8:30 to 13:00 and from 15:00 to 18:00, from Monday to Friday, the information service is active at the administrative offices of the Atena Group in Mercatino Conca, via Salita Ponchielli, 10.

The RP/R3 "Villa Verde" Elderly Care Home is managed by the company Atena Srl with sole shareholder; it is immersed in the beautiful hills of the Marche region on the border with the Republic of San Marino and Romagna, located in the center of the municipality of Macerata Feltria – PU in Via Gualdesi, 2 and is easily reachable via the highway that connects Rimini to San Marino, adjacent to the A14 motorway and the Provincial Roads SP2 and SP3 in the Pesaro - San Marino, Cattolica - San Marino, Urbino - San Marino directions .

The RP/R3 "Villa Verde" Residential Care Home for the Elderly provides accommodation for a total of 23 beds. The building as a whole is made up of four floors, and is free of architectural barriers thanks to the availability of a large lift that serves all floors of the building and an easy access platform from the outside from the basement. The basement is used exclusively for general services while the ground, first and second floors contain the rooms with their services. The hospitalization area is composed as follows: on the ground floor there are 6 beds distributed across 3 double rooms with bathroom, on the first floor there are 8 beds distributed across 2 single rooms, of which 1 with an external bathroom and 3 double rooms with bathroom, on the second floor there are 9 beds distributed across 1 single room and 4 double rooms all with bathroom.

The General Services are divided into the following intended uses: on the Ground Floor there is the main entrance, positioned on the front elevation, with access to both the stairwell and elevator, and to the living room-dining room. Immediately inside, served by two hallways, there is a medical examination room and medicine storage room, equipped with a bathroom equipped for the non-self-sufficient and a staff room with an adjoining bathroom that also serves as an office/guardroom. The First Floor is accessed by an internal staircase and elevator, it consists of a large room used as a living room and equipped with a disabled bathroom with anteroom, and a room used as a Management Office. The Second Floor, similarly



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to the first floor, is accessed by both stairs and elevator, it consists of a living room and bathroom equipped for the non-self-sufficient and two rooms for clean linen and room cleaning storage. The basement is exclusively used for general services and common areas and is accessible both from the stairwell and the lift, and from the outside. There are technological rooms, a large multipurpose room (worship, family meeting, etc.), a food warmer room, the pantry, a changing room for staff with an adjacent bathroom, a storage room for materials for use and cleaning rooms, and rooms for dirty and clean linen. There are also two services, including a bathroom for the non-self-sufficient and an assisted bathroom and personal care with an adjacent changing room. From the outside it is accessed via a slight ramp that allows communication with both the stairwell and the lift, completing the path useful for the removal of architectural barriers. From the barrier-free path you can access the outside both the main entrance and the large park and spaces at the service of users.

The Residence is equipped with a large planted garden intended for a fitness playground for the elderly and space for recreational and/or reception activities where guests can enjoy the open air and a relaxing environment for many months of the year, on milder days. The paths are accessible to all elderly people, including those with walking aids or wheelchairs. The structure relies on the internal laundry service of the Atena Group for the personal clothes of the Guests, flat linen is managed by contract with an external laundry.

6. SERVICE DELIVERY

All the activities of the facility are oriented towards a philosophy of care centered on the person. The user is recognized as an active subject, as a person with a history, an identity and a personality. The operators are trained to develop a physical and emotional closeness with the user, to learn to communicate effectively with him. The user must feel free to express his desires, his emotions and any discomforts so that he can find the appropriate support. All the guests of the "Villa Verde" are guaranteed the possibility of socialization and creative activity through the organization of activities and events that favor these aspects.

All users are guaranteed the possibility of carrying out occupational, reactivation and maintenance therapies both through the activities proposed by the multidisciplinary team and through a specific health care program as provided for by the Individualized Care Project (PAI). The activities have been designed in compliance with the physiological rhythms of the users, ensuring their balance and participation. The services offered comply, in the times and methods established for definitive implementation, with the regional indications provided for by the authorization of the social health structures and by the Agreement with Area Vasta 1/ AST Pesaro Urbino.

The patient's suitability for access to the RP/R3 "Villa Verde" Protected Residence is decided, following a multidimensional assessment, by the Integrated Evaluation Unit (hereinafter UVI) on the proposal of the Patient's General Practitioner (hereinafter MMG).

The placement of the elderly person at "Villa Verde" is authorised with a specific act by the UVI Manager of AST Pesaro Urbino, following a report from the UVI certifying the need for hospitalisation for the specific care need in RP/R3.

In the case of patients coming from hospital facilities, the proposal for admission to RP/R3 is formulated to the UVI by hospital doctors.

6.1. ACCESS MODE: ADMISSION PHASE:

The methods of access to the facility are different based on the type of insertion:

- places under a subsidized regime
- free market places (long-term care/relief).

REQUEST FOR ACCESS UNDER AGREEMENT REGIME

In order to access the places under the agreed regime, it is necessary to submit an application to the socio-health district of residence (AST PesaroUrbino). The process begins with a proposal from the GP



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and after sending the application to the UVI. The evaluation process will conclude with the inclusion in the access rankings only with the favorable opinion of the UVI commission.

The UVI commission draws up a ranking based on the needs of the users and the District Manager draws up a waiting list that is sent to the entrance manager of the Atena Group Offices structure; the Guest can exercise a right of option by choosing the accredited structure where he/she prefers to be hosted. The facility's admissions manager contacts the Guests and/or caregivers on the list in chronological order to schedule entry; the District Manager, in agreement with the facility, defines the date of entry, transmitting the UVI report.

FREE MARKET ACCESS REQUEST

The application for admission to the free market places available in the facility is managed directly by the Admissions Manager or the Coordinator delegated for this purpose in agreement with the General Practitioner of the facility. Interested parties can contact the Coordination Office or the administrative offices of the Atena Group (Admissions/customers contact) in order to receive useful information regarding the services offered and visit the facility. During the interview with the family members, the staff in charge fills out a form, collecting all the information necessary to evaluate the admission of the elderly person to the Residenza Protetta Anziani. Once the compatibility of the conditions detected with the availability of places has been verified, the possible insertion is prepared.

Access is subject to the presentation to the Admissions Manager or delegated to the Coordinator of the Facility of the specific application for admission in the form of a self-certification, drawn up by the elderly person who, within the scope of their psychophysical condition, must express the will to be admitted. The application for admission must also express the commitment to pay the monthly fee by the user or by another family member obliged to provide maintenance pursuant to art. 433 of the Civil Code. The application for admission must be submitted accompanied by a certificate issued by the attending physician, attesting to the general state of health, the condition of self-sufficiency and the absence of diseases detrimental to life in the community. Non-residents, if they claim the right to integration of the fee by various Bodies or Associations, must attach to the application a commitment to expenditure, total or partial, by the interested Body, specifying the monthly amount to be paid by the same.

WAITING LIST MANAGEMENT

If the number of applications exceeds the number of places available, 2 waiting lists are activated: places in agreement and places in the free market. The position of the application within the list is determined by the date of submission of the same. Admission to the facility from the waiting list is also determined by any urgent conditions of a health and/or social nature.

When a bed becomes available, the Admissions Manager formally communicates the availability for reception. The customer service office defines the date of entry and all the information useful for access planning in agreement with the facility team.

Any postponement must be formally communicated by the sender and agreed with the Client Manager who has the right to not accept (the postponement). The average waiting times for entry cannot be quantified because they are subject to ongoing projects.

FIRST INTERVIEW WITH THE USER AND THE FAMILY

The interview is conducted by telephone or in the presence of the user and/or his/her family members/guardians. During this interview, the facility is presented and the documents to be returned are handed over, duly completed. The following information is requested and provided:

- Patient's contact person-caregiver (name, telephone number, email) (useful information for receiving precise information on social and administrative aspects);
- information regarding the general practitioner (possible change of doctor);
- administrative documents to be presented upon entry (identity card, health card, drug exemptions, etc.);
- any aspects relating to the COVID vaccine;
- clothing and personal items to be handed over on the day of admission;
- health documents to be presented in the subsequent entry interview.



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In this phase, requests and needs regarding inclusion in the service are detected and the interests, preferences and expectations of the user are collected; it constitutes the first step of the institutional pact and lays the foundations of the pact of trust with the operational group. Before a new user enters the facility, the facility itself communicates to the entire team and to other users who attend the information of the user who will be inserted and that in the first few days the new

user will be helped by all the interested parties to overcome the critical issues of adaptation. Following the communication of availability of a suitable place, the Guest may generally enter within the following 15 days, a period within which the obligation to pay the fee will in any case start, even if the user's entry should be postponed for personal reasons and in any case no later than 30 days, under penalty of losing the place and archiving the application.

At the time of entry, in addition to the presentation of the structure, the Coordinator conducts a verbal interview useful for recording the delivery of structural rules and recovering the patient's documentation to be inserted. At the moment of the entrance the user, in fact, will have to be equipped with:

- identity document, health card and tax code, any disability certification, ticket exemption, cancellation of the general practitioner for care in the territory;
- indication of drug treatment;
- personal hygiene items and clothing necessary for life in the facility.

ENTRY TO THE STRUCTURE

From the defined day of entry, the admission phase begins with an initial observation, aimed at identifying resources, areas of proximal development, deficits and verifying the user's interests, preferences, desires and expectations.

During the observation period, the team will be careful to receive all the reactions not only of the new member but also of all the attendees to evaluate any inconsistencies and critical issues created in the coexistence in the facility, adopting all the actions to create a serene climate.

The coordinator and/or the nursing coordinator during the admission phase takes care of sharing and verbalizing with the family/guardian of the guest entered all the information collected and the shared documents, presenting the structure and all the characteristics of the service. On this occasion, he/she fills out the hospitality contract, the privacy consent and delivers the Service Charter (usually this has already been sent before admission by the Admissions Manager) and the Structure Regulations.

On the day of admission, the nurse meets with the patient and opens the integrated folder after having received all the health information received from outside and having recorded the vital parameters of the new patient. While waiting for the doctor's first visit, the nurse administers the prescribed drugs, received from outside, recording the activity on the therapy administration form. By the day of admission (or on the first available day after admission, in any case within 72 hours), the Doctor completes the integrated folder based on the assessment of the admitted patient and the data collected, prepares the therapy sheet and any restraint sheet. Within 7 days of admission (within 15 days, in case of difficulty adapting) the Animator conducts an interview with the new admitted person, filling in the socio-educational assessment form, useful for receiving all the information relating to the life context of the admitted elderly person on which to identify personalized objectives aimed at the well-being of the person. The admission phase ends with the preparation of the PAI where it will be possible to define personalized interventions based on the observations of the inserted user. From the first day, the new patient is inserted into daily activities with reports of any critical issues in the diary.

6.2. DEFINITION OF THE INDIVIDUALIZED PROJECT

An individualized Care Plan is prepared for each guest based on:

- the characteristics of the user, his needs and the social and family context;
- the expected results;
- organizational response capabilities.

Within the Individualized Care Plan, a case manager is defined for each guest included. The PAI is prepared with the sharing and participation of all interested parties: family members, any support administrator, and, where possible, with the guest.



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Within the PAI, individual measurable objectives and related interventions to be implemented in order to achieve these objectives are defined for each individual area.



Objectives and interventions are defined on the basis of measurement tools that allow objective monitoring of the relative achievement of the defined objectives. Once the PAI has been defined, the facility begins its implementation. All the information collected is entered into a personal folder for each guest containing the following documentation: personal data, social and health history data, PAI and identified path, traceability relating to the health and social health interventions functional to the PAI, results of periodic checks, individual dynamics and problems in relation to the group and results of the final verification.

The structure carries out a control activity of the interventions defined in the PAI in order to guarantee the defined project objectives. This control occurs by promptly recording the individualized interventions on which the reference operator operates to achieve the objective defined within the PAI. The team carries out a quarterly review of the PAI to verify the degree of achievement of the defined objectives and the possible definition of new objectives.

The results of the verification are recorded by reporting the achievement of the objectives and the need to extend or modify the objectives through the compilation of the intermediate verifications of the PAI. The results evaluation system is based on the criteria and values defined at the beginning of the PAI within the interventions of the single intervention area. In all phases of processing, verification and possible modification of the objective (due to changes in the conditions of the guest) the facility provides for sharing with the family members who are constantly informed and involved with respect to the objectives defined by the facility's team.

6.3. PLACE PRESERVATION

In the event of hospitalisation of a user admitted to RP/R3 "Villa Verde", the user has the right to retain his/her place until discharge from hospitalisation.

Unless following a reassessment by the UVI a hospitalization in another type of higher intensity facility is established, in this case for any hospitalizations, for example, in RSA the maximum duration for which the place will be kept is 60 days. The UVI has the right to verify the stability and suitability conditions of the user before returning to RP/R3. During these 60 days of place retention, the Guest and/or his/her family member/ADS/Guardian has the right to send formal written communication to the Management by registered mail of renunciation which must include 15 days' notice.

In the event of voluntary and duly documented absence of the user hospitalised in RP/R3, the bed space will be retained until formal communication of renunciation of the place by the Guest and/or his/her family member/ADS/Guardian, who must provide 15 days' notice.

6.4. RESIGNATION

A user can be dismissed from the Centre by:

- will of the guest and/or his/her family member/guardian/ADS of reference expressed with written notice of at least 15 days.
- For proven incompatibility with community life and the rules of coexistence.
- For serious failure to comply with the rules of conduct that regulate life in the facility by the user and/or his/her family members.
- For proven state of danger to himself and others.
- For proven and serious health reasons of the guest (aggravation) assessed by the UVI as requiring health care not compatible with the services offered by the "Villa Verde" Sheltered Residence.
- Resignations are automatically activated by the Management Body in the event of late payment of the hotel fee by the user.
- The Management of the facility may authorize the dismissal of a Guest, with at least 5 days' notice.

In the event of a patient being discharged and requiring them to return home, the "Villa Verde" Residence will communicate this event to the competent District of AST Pesaro Urbino, so that all parties involved can take action to ensure continuity of care.



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At the time of discharge that includes returning home, the healthcare staff of the Protected Residence will guarantee the relatives of reference all the information and training suitable for carrying out the correct care activities to be provided at home.

In any case, the needs for any discharge are assessed by the General Practitioner, the Reference Services, in collaboration with the center team. In the event of discharge, the documentation in the possession of the center including the "single therapy sheet", which will report the situation reached by the person at the time of his discharge in all the areas provided for by the Individualized Project. In the event that the guest is transferred to another facility, the center's contact person will also send the aforementioned documentation to the management of the new service.

6.5. DEATH

In the event of the death of the user, the facility will immediately notify the family and/or ADS, the guardian who will be responsible for activating the Funeral Services service; in the event of any delays in completing the procedures, the facility will operate in the manner provided for by the regulations and laws in force. Only for users who do not have family members, the Funeral Services service will be activated directly by the operators in charge, on the instructions of the Health Director.

The death is also communicated to the referents of the Sending Health Service.

6.6. ASPECTS OF THE SERVICE

In managing the service, the following aspects are taken into account:

HEALTH PROMOTION

From the moment they enter the facility, each user is duly monitored on all aspects of a health nature based on their healthcare/care needs. Based on all the indications received at various times of insertion and reception and observation, health interventions are defined with relative recording and monitoring of what has been defined. All activities are carried out on the basis of specific technical instructions duly defined and implemented within the Facility and on the basis of medical prescriptions that are updated from time to time by the doctors themselves, and sent by the families to the center. Both short- and long-term intervention results are regularly verified.

ACCESS TO CARE AND INTERVENTIONS

All the care management activities and prevention interventions are managed by the team of professionals who, on the basis of an integrated multidisciplinary work, carry out the relevant interventions in compliance with the care assigned to them, who plan, organize and manage the necessary residential interventions. The family and/or ADS, guardian takes care of assisting the user regarding any treatments and interventions to be carried out outside the facility (for example specialist visits).

The results of any interventions or checks carried out outside, once received by the families, are archived in the guest's file.

DRUG MANAGEMENT

In case of user needs, the facility takes charge of drug management in the following way:

- Doctor's prescription;
- Drug management
- Administration management

The doctor's prescription is recorded by the facility's doctor on the Therapy Card Module (where the methods, time and dosage of the drugs to be administered are indicated) and signed by the doctor himself.

The prescription must be carried out at each change in drug administration or, in the absence of changes, at least every two years.

Regarding the management of the drug, if the family provides to deliver the drugs, they are accepted only if in intact packaging. Non-compliant and/or expired packages are not accepted. Normally the supply of drugs is managed by the nursing staff of the Facility at the pharmacy of the village where the family members leave a cash fund for their payment. The incoming drug is checked by the nurse: he



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checks the expiry date and evaluates its integrity and correspondence (closed bottles, uncut blisters, medicines exclusively inside the blister and not opened, apparent good state of conservation), highlighting the expiry date on the package.

The expiry date of the medicine will be recorded in the specific "Medicine expiry control sheet". This last form is filed in a special container. At the end of each month, the person responsible for controlling the medicines checks the expiry dates of the medicines stored and disposes of the expiring medicines. In the presence of the nurse, the administration carried out is recorded in the specific form. The completed therapy sheet must be updated at each change of therapy of the user (following the presentation of a prescription) by the GP, and delivered by the family members. The nurse then replaces the previous sheet with the new one.

INFRASTRUCTURES AND SPACES

The host facility is arranged according to the type of guests for which it has obtained authorization/agreement according to the requirements defined by the relevant regional law. Annually, based on the type of users entered, the facility evaluates any need for new furniture or any purchase of accessories useful for the attending Patients.

PROPERTY MANAGEMENT

In the event that there is a need to manage money or assets, for each patient, the facility manages a small cash "cash" by keeping an individual journal (income/expenditure) with which small expenses are made for the user. The facility carries out monthly checks to ensure that the register corresponds to the money present and annually the documentation collected is accounted for and delivered to the family or support administrator, through the delivery of receipts. Periodically the family member or guardian/ADS is asked to make the replenishment to avoid being left without cash coverage.

Inside the Residence it is not recommended to keep valuables as highlighted during the entrance interview, in case of keeping it is expected to register it according to procedure. In case of hospitalization, a list of clothing and personal objects is prepared useful to keep track of what has left the structure, in order to be able to verify upon actual return what has been left.

In the event of discharge and/or death, all clothing, personal items and the user's cash box are returned to the family member or ADS/Guardian. In the event of items not collected by the Caregiver, after 6 months from the date of discharge and/or death, such items are disposed of or sent to the hospitalized users.

If the Caregiver requests the shipment of such items/clothing, this will be the responsibility of the applicant.

USER INFORMATION

To make information more accessible to the guest, augmentative communication methods are adopted where possible (e.g. weekly menus and meetings with guests).

For all information updates, different tools are used depending on the subject and recipients: weekly meeting for guests, verbal and/or written communications sent by the facility for family members and reported in writing in the daily diary (deliveries) for operators; other information relating to critical processes (e.g. safety, quality, etc.) are posted on special noticeboards.

The facility gives its users the opportunity to maintain contact with the local context also through the TVs available in the facility and by reading newspapers.

RESPECT FOR PRIVACY AND CONFIDENTIALITY

In managing its activities, the facility guarantees the protection of the rights and dignity of all users, respecting private life and confidentiality (sexual orientation, interpersonal relationships, political opinions and religious affiliations) as well as privacy, to ensure that the user within the service is protected from any form of abuse, mistreatment, degrading treatment or negligence that could expose them to unjustified risks.

RULES FOR VISITORS



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Guests can be visited during the opening hours of the service: normally at 9.30-10.30 and at GRUPF 15.30-16.30 every day for a maximum of 30 minutes per patient, no more than 2 family **ATENA** members by telephone appointment, any exceptions to the visiting time and duration can be agreed with the coordinators (service and health worker). Visits by family members and acquaintances must take place in compliance with the activities of the facility and the privacy of the guests. Visitors may therefore be asked to temporarily leave during hygiene and/or rest of the guests, normally visits to the hospital rooms are not permitted, except in serious health cases. Special rooms and spaces are available for visits.

It is not possible for family members and acquaintances, except in special situations authorized by the Center Coordinator, to visit the elderly person during the serving of lunch and/or dinner. In order to protect the health of the Guests (risk of food poisoning), it is possible to bring only packaged foods with a long shelf life and/or artisanal preparations accompanied by the purchase receipt.

The staff ensures their assistance to the Guest during meals, if necessary.

EDUCATIONAL AND ANIMATION DESIGN OF THE STRUCTURE

The center annually prepares a plan of group and individualized activities with a planned and shared cadence, involving guests based on their abilities/capabilities (found in the PAI). Particular attention is given to planning initiatives that presuppose the involvement of the different realities of the territory. The operators have the task of maintaining contact with the social fabric and the offers of the territory with the aim of promoting a non-discriminatory culture towards users that facilitates their social participation in collaboration with citizens and the Municipal Administration in the planning of outings, parties, trips, exhibitions, etc. and in the knowledge of the events of the territory, all within the limits of the resources available to a RP.

Educational/rehabilitative services are an integral part of the planning of training and rehabilitation activities and guarantee a meaningful working relationship with family members, with the aim of functional collaboration of the person in the community.

In planning/defining activities, the Structure pays attention to health promotion by proposing a healthy lifestyle model to the user.

THE EXITS PLANNED BY THE STRUCTURE

The entertainment service includes recreational activities throughout the year (birthdays, Christmas holidays, carnival, etc.), daily play activities (cards, board games, etc.).

INDIVIDUAL GUEST OUTINGS

The Guest who is able to orient himself can leave the facility, accompanied by a family member and/or an acquaintance, compatibly with his state of health and after completing the appropriate form to be requested from the operators. The exit entails the full responsibility of the Guest and/or the companion. Authorization to exit occurs after a positive evaluation by the Coordinator and/or the nurse present on duty. In the case of a Patient who is not completely autonomous, the exit requires that those accompanying the Guest (family members/ADS, etc.) always fill in the appropriate form above and the exit must always be authorized by the Coordinator and/or the nurse present on duty.

Patients enjoy maximum freedom within the facility, the only limitations are those imposed by the psycho-physical state of each individual and by the rules of civil coexistence.

ROOM PLAN MANAGEMENT

The arrangement of guests in the rooms is established by the Management in relation to the psychophysical conditions of the elderly person and may vary during the hospitalization, in relation to the changed conditions of the guests and the organizational-managerial needs of the service.

MANAGEMENT OF FOOD ASPECTS

Feeding represents an important moment in the life of the guest, it is a moment of socialization. Upon entering the facility, all user information is collected



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regarding eating habits also in compliance with religious precepts, any intolerances, diets, swallowing disorders, inability to feed oneself independently with which a personalized eating plan is prepared respecting what has been highlighted. The doctor may request any consultation with the dietician to formulate a suitable diet for each patient. It is not possible for family members and acquaintances, except in particular situations authorized by the Center Coordinator, to visit the user during the administration of lunch and/or dinner. In order to protect the health of the Guests (risk of food poisoning) it is possible to bring only packaged foods with a long shelf life and/or artisanal preparations accompanied by the purchase receipt.

The staff ensures their assistance to the Guest during meals.

ACCESS TO PERSONAL DOCUMENTATION

Each user has the right to view personal (health) documentation, upon written and/or verbal request to the staff responsible for the facility. Authorized viewing is carried out under the supervision of the assigned staff and, if conditions require it, specialized personnel are present to provide any answers to the patient's doubts.

REQUEST COPY OF MEDICAL RECORDS

After discharge, the user can request a photocopy of the medical record from the reference facility according to the following methods:

- Filling out the request using the specific form provided by the Administrative Offices;
- Advance payment of expenses (30 euros for collection of the folder);
- advance payment of the 10 euro shipping costs (pursuant to art. 26 of law 883/78).

After approximately 30 days from the request, the copy of the medical record can be collected personally by the user or by a person delegated in writing by showing a photocopy of the identity document of the requester or received at home by mail, upon explicit request. There is specific documentation for the collection prepared by the company that also takes into account the hypothesis of delegation.

7. PERFORMANCES AND SERVICES PROVIDED

At the RP/R3 "Villa Verde" Protected Residence, the following direct services are provided to individuals (all the services listed below are included in the fee):

DIRECT SERVICES

Health services and Nursing assistance service: consist of the activities carried out at the Care Home by the Health Director, by general practitioners of free choice or by the single GP doctor proposed by the Care Home, in accordance with current legislation, and by specialist doctors from the AST Pesaro Urbino district for consultations, and by the Medical Team (Neurologist, Cardiologist and Internist, all specialists who work at the Atena Group for consultations) and professional nurses, with the aim of taking charge of the Guest. The intervention consists, from the moment the Guest enters the facility, in monitoring all aspects of a health nature based on the User's healthcare/care needs and in building an individualized care plan by monitoring the objectives and interventions defined. All activities are carried out on the basis of specific technical instructions duly defined and implemented within the Center and on the basis of medical prescriptions that are updated from time to time by the doctors themselves. The doctor prepares the therapy sheet, the restraint sheet, updates the clinical diary, prescribes tests, etc. The nursing staff is present during the daytime hours for the minutes provided for by regional resolution and responds to the health needs of the guest by providing for the administration of drugs as provided for in the Single Pharmacological Therapy Card, monitoring vital parameters, carrying out dressings and collaborates with the operational staff of the Structure for the recovery and psycho-physical assistance of the guest by participating in the planning and updating of the PAI

Based on the clinical conditions of the guest, it evaluates the needs/urgencies of medical visits useful for the good health of the person. The results of the intervention are regularly verified both in the short and long term. The implementation of helpful communication-



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relationships with the user and the family is favored, for the integration and maintenance and recovery of the person.

Coordination Service: manages-plans-organizes activities within the facility, coordinates the staff assigned to assistance and hotel services, prepares work programs and/or staff shifts and provides for the replacement of absent staff, coordinates and involves other professional figures in the preparation and definition of protocols relating to individualized assistance, collaborates with the administrative offices of the Atena Group in the preparation and definition of protocols relating to assistance, etc.

<u>Physical rehabilitation services</u>: The rehabilitation intervention is aimed at maintaining the basic autonomy of the Guest and passes through the "indirect" physiotherapy activity, that is, through OSS who, on the prescription of the rehabilitation therapy of an external specialist (physiotherapist / orthopedist), adopt behaviors suitable for the rehabilitation purpose (e.g. assisted walking, mobilizations in bed, etc.). The Center does not perform physiotherapy services not foreseen for the type of structure but uses an external professional available to perform individual services for a fee.

<u>Personal assistance</u>: the specialized personnel (OSS) ensures personal assistance services (personal care and cleaning, help with daily living activities), while still encouraging the guest to use their own abilities. The OSS provides care services ensuring: satisfaction of primary needs (nutrition, personal care and hygiene); help in carrying out daily living activities (mobilization, socialization, etc.) while still encouraging the person to continue using their residual abilities; the correct execution of non-complex hygiene and health interventions, in close collaboration with the healthcare personnel. In collaboration with all other professional figures, they implement the individualized assistance plan (PAI) for each user. The OSS are present in the facility 24 hours a day.

Rehabilitation-social/entertainment service: concerns the implementation and verification of the activities proposed by the facility based on the detection of the residual abilities, interests and personal aptitudes of the guests. The activities will be proposed in relation to the personalized educational-rehabilitation objectives through the identification of specific areas of intervention. The activities, divided into hours and internal/external spaces of the facility based on the organization of the day at the "Villa Verde", will be proposed in relation to the personalized educational-rehabilitation projects and through the identification of specific areas of intervention. Educational services are an integral part of the planning of training and rehabilitation activities and guarantee a significant working relationship with family members, with the aim of functional collaboration of the person in the "Villa Verde".

<u>Hotel service</u>: includes all residential services necessary for a suitable stay of the guest. <u>Cleaning:</u> the service guarantees the cleanliness and hygiene of the premises according to the program and procedures established in the cleaning and sanitization plan, with the use of non-toxic and differentiated equipment and products for cleaning the various environments. Ordinary daily cleaning and scheduled extraordinary cleaning of all living areas of the guest, furnishings and equipment are guaranteed. laundry rooms and guest staff.

Laundry and wardrobe: upon entering the facility, the user must have all the personal items necessary for their stay. The user has the right to entrust, at their own expense, the washing of their personal items to external laundries or to the facility's internal laundry service, recognizing an additional fixed monthly fee of €100.00. Items that cannot be washed with water are excluded. The family must pay for these items at their own expense. The washing and sanitization service for flat linen (sheets, towels, tablecloths, underpads, etc.) is entrusted to an external specialized company and is included in the fee.

<u>Catering service</u>: the service is prepared in the internal kitchen of the "Badesse" structure of the Atena Group, which provides for the delivery of meals according to HACCP rules, the structure provides for the administration of meals with adequately trained staff.

Guests are served 3 main meals daily: breakfast, lunch and dinner; during the afternoon a snack is also served and drinks are served at any time of the day. Main meals are served in the dining room or in the rooms according to the needs and requirements of the users verified by the healthcare staff.



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The administration of meals and the distribution in rations necessary for the needs, takes place under the control of the staff in charge who guarantees that each guest takes the meal in accordance with the diet defined for him. It is possible to choose between different daily menus diversified between lunch and dinner and depending on the season (summer and winter menu); special personalized diets are also guaranteed for guests with particular needs or preferences (pathologies, intolerances, religious reasons).

Activities aimed at socialization: These are all activities aimed at promoting the integration of the guest of the "Villa Verde" in the social context, in particular initiatives that presuppose the involvement of the different realities of the territory will be planned. It will be the responsibility of the operators to maintain the appropriate relationships with the various formal and non-formal groups, with the volunteers, with the citizens and the Sending Bodies in the planning of parties, exhibitions of small artisan works, etc. Networking in the territory is a basic condition for the development action of the "Villa Verde". Through this approach it is possible to obtain phenomena of promotion and strengthening of the capacity for personal autonomy. The opening to the territory represents the possibility of building a sense of belonging of the guests, developing knowledge, critical awareness and participation and also promoting the sense of responsibility with respect to social choices. The "Villa Verde" is also available to welcome volunteers / interns or trainees. All figures must be accompanied in the activities carried out in the structure by the dependent staff.

<u>Transport service</u>: emergency transport is guaranteed by the NHS with regards to ambulance transport in the case of, for example, specialist medical visits, transport is paid for by the guest or his/her representative.

<u>Hairdressing - barber service</u>: the service included in the fee includes the management of haircuts and beard and moustache trimming by OSS staff. Additional services may be provided upon request with economic costs entirely borne by the guests.

<u>Valuables storage service</u>: the "Villa Verde" Protected Residence suggests not keeping personal items of particular value or large sums of money. The "Villa Verde" Protected Residence is not responsible for any thefts, and declines all responsibility of the residence staff and the administration for loss or theft of any valuables or items of particular value such as prostheses. Sums of money can be deposited in the Coordinator's Office in a special safe.

Religious service: the user is guaranteed religious assistance in accordance with his/her faith. To guarantee this right, access is guaranteed to ministers of all faiths. The user also has the right to choose the menu in accordance with his/her religious affiliation.

GENERAL SERVICES

Administrative Management: instructs the technical management of the "Villa Verde" Structure on the general corporate objectives and monitors the achievement of the defined results; is responsible for the services provided and the general administrative organization.

Health Management: The Health Director, as the person responsible for the Health Care of the "Villa Verde" Protected Residence, supervises the technical-functional organization and operation of the health services provided, approving and verifying the implementation of the organizational and technical procedures specific to the facility. The Health Director is responsible for coordinating, monitoring and integrating the various professionals involved in social-health functions, including GPs, in order to ensure the best psycho-physical conditions for all hosted users. He also verifies the operation of the diagnostic and therapeutic equipment, medical equipment, waste disposal, disinfection and sterilization and compliance with all the rules for the protection of workers and patients with respect to the risks arising from the activities carried out. The Health Director is responsible for ensuring that privacy protection and informed consent are applied, as well as storing and issuing requested health documentation and supervising the storage and control of expiry dates for drugs, narcotics and psychotropic substances. The formal request for a copy of the user's Health Record must be addressed to the Health Director; the facility undertakes to issue it within 30 days of discharge/death. However, the



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health records during hospitalization are accessible with an email request by the User or delegate (AdS, Guardian, ...) to which a response is given within a maximum of 10 days.

<u>Human Resources Manager</u>: ensures the completion of all human resources management and organization practices and the planning of training activities;

<u>Customer and Quality Manager</u>: coordinates and ensures the completion of all administrative procedures related to Customers, hospitality contracts, problems of fee collections, invoice issuance, for all management aspects, verification of the service. Handles the completion of administrative procedures required by contracts, Conventions and in accordance with what is established by regional regulations. Handles relationships with the Territorial Services referents. Manages waiting lists.

<u>Administrative services</u>: are guaranteed by the Atena Group at the central offices for all management aspects, payroll, accounting, etc.

<u>Information service:</u> guaranteed by staff at the headquarters of the Atena Group in Via Salita Ponchielli Mercatino Conca (PU), from Monday to Friday from 8.30 to 13.00 and from 15.00 to 18.00 or directly at the "Villa Verde" Centre from 8.00 to 20.00.

8. SERVICE COSTS

The fee applied for the "Villa Verde" sheltered residence, a bed-space under agreement, is established by the DGRM 1331/14, subsequent agreement act, as well as the agreement with AST Pesaro Urbino and includes a fee to be paid by the local health authority and a social/hotel fee to be paid by the user or by the person required by law.

FEE FOR AGREEMENT GUESTS: The participation fee for the cost of the service (Fee), decided annually by the Administration of the Management Body, in accordance with specific regional legislation, is set at €48.10 per day for guests residing in a double room and €53.44 per day for guests residing in a single room; fee VAT Exempt Art.10. The ISTAT increase may be applied to the above daily amounts, subject to communication by the Management Body.

FREE MARKET GUEST FEE: the cost of the service (fee), decided annually by the Administration of the Management Body, is set at € 57.65 per day for guests residing in a double room and € 63.90 per day for guests residing in a single room; fee VAT Exempt Art.10. The ISTAT increase may be applied to the above daily amounts, subject to communication by the Management Body.

WHAT THE FEE INCLUDES: the fee includes services related to health, social and hotel services: nursing and health services, dressing materials, drugs and parapharmaceuticals included in the handbook on prescription by the Guest's doctor (band A), educational rehabilitation service, recreational, cultural and occupational activities, personal assistance, pedicure service (for those who do not need a podiatrist), hair, beard and nail cutting, basic guardianship assistance, religious assistance, food day, supply and washing of flat linen.

WHAT THE FEE DOES NOT INCLUDE: the fee does not include the following services: individualized supplementary assistance (1:1 ratio), assistance during hospitalization, physiotherapy services (in addition to prescribed interventions), drugs not included in band A by the health service; aids not recognized by the SSN, diapers in addition to the supply paid for by the SSN, laboratory tests and specialist tests not covered by the health service, transport and accompaniment for medical care, medical rehabilitation therapies, specialist visits and hospitalizations at specialized centers or on request for other reasons, expenses for the purchase of clothing, underwear and other personal accessories, other consumer goods, funeral expenses in the event of the death of the guest, expenses for hairdressers, beauticians and podiatrists, if necessary in addition to the basic care provided.



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ANY ADDITIONAL SERVICES: it is possible to request additional individualized services, this request will be subject to evaluation, in the event of a positive outcome of signing a further Service Supply Contract, the applied rates will be communicated following the development of the "supply of additional services" project.

PAYMENT METHODS

The start of the payment of the fee cannot be deferred by more than 15 days from the date on which the acceptance of the request is communicated, even if the entry, for personal reasons of the elderly person or family members, will occur later. The fee must be paid within the first ten days of the month, by bank transfer to the bank account in the name of Atena Srl. The term of cessation of payment starts from the day on which the discharge from the Protected Residence occurs, subject to compliance with the obligation of at least 15 days' notice by written communication by registered mail to be sent to the Management. There are no reductions in the daily fee in the event of absence agreed with the Management or due to hospitalization or temporary return to the family. The payment methods are included in the contract signed between the managing body and the user and/or his/her family member and/or ADS/guardian. The fee may be revalued annually, the revaluation cannot be lower than the ISTAT consumer price index for families. The Guest or his/her applicant must also communicate the intention to request any financial contribution for the integration of the fee to the Social Service of the Municipality of origin, but until the end of the relevant investigation, the user is required to pay the fee in full. In the event of a positive outcome of the investigation, the user or the Municipality itself must present a copy of the resolution adopted with the relative commitment of expenditure in order to obtain a review of the amounts divided between the user and the Municipality. From that moment on, the amounts to be paid by the user, divided with the Municipality, will be reviewed.

The standard rates defined are listed below:

GUEST FEE	RP agreed bed space in double room	RP agreed bed space in a single room	RP private bed space double room	RP private bed space single room
Private Fee Month *	€ 1.463,04	€ 1.625,47	€ 1.723,52	€1,943.62
Monthly health fee*	€ 1.146,70	€ 1.146,70	\	\
Private Fee per day *	€48.10	€53.44	€ 57,65	€63.90*
Health quota per day*	€37.70	€37.70	\	\

[°] The monthly fee is calculated with an estimate on an annual basis of 365 days and divided by the 12 monthly payments * The amounts indicated are to be understood as VAT Exempt art.10.

The possibility of compensation / reimbursement is foreseen, after adequate verification of an invoicing error (of the service rendered) or incorrect overpayment by the beneficiary. In this case, the company management will resolve the problem encountered.

The facility has stipulated a specific RCT/RCO liability policy providing guarantees on liability for damage to property and persons that may arise for any reason, in relation to the performance of the service. It is understood that the Company does not assume any civil or criminal liability regarding events caused by incorrect behavior of the guest, including damage to third parties. It also does not assume civil or criminal liability for theft, fire, loss, destruction, removal of property, money, clothing of the guest.

^{*}The fee of ϵ 63.90 is also applied to double room accommodation in the event of relief hospitalisation.



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9. COMMUNICATION WITH FAMILIES AND WITH THE TERRITORY

9.1. RELATIONSHIPS WITH FAMILY MEMBERS

The guests of the Protected Residence "Villa Verde" are continuously stimulated to a continuous exchange with the external reality. Family members, friends, associations, institutions can confer with the guests, guaranteeing them serenity and privacy and organize the most varied initiatives in favor of the guests themselves.

The family is an active subject in the Guest's care process, which must be shared. It can be the holder of resources and knowledge that must be recognized, valued and implemented in the program and in the achievement of objectives. The family is, as much as possible, directly involved in order to participate in the evolution of the program, in ways agreed with the team, for example, where possible, through coparticipation in laboratory activities (social parties, etc.) and in meetings (individual interviews, group meetings, etc.). The family must be given the opportunity to strengthen its ability to manage the user even in the most difficult moments, through possible direct support in the emotional load and in the case of disability it must be trained to facilitate the guests' movements. In the case of discharge they must be trained in nursing before discharge.

In respect of all guests, activities, scheduled outings and the organization of the "Villa Verde", visits are carried out outside the following times of the day:

- Personal hygiene operations - Main meals of the day - Afternoon relaxation moments Relatives who wish to visit guests can access the facility from 9.30 to 10.30 and from 15.30 to 16.30. The duration of visits and/or different times are agreed with the Responsible Coordinator in compliance with the organization of the "Villa Verde" and the needs of the guests. During visiting hours, the user may leave with prior authorization from family members, guardians, curators and/or legal representatives as per the documentation present in "Villa Verde".

It is possible to visit the facility, by appointment. The guests' relatives are required to collaborate with the staff of the "Villa Verde" with regards to:

- Maintaining meaningful relationships with your family member.
- When washing guests' non-washable clothes at the facility.
- To keep the seasonal change of clothes that cannot be placed at the "Villa Verde";
- To the renewal of clothes, footwear and personal underwear.

SUPPLY CONTRACT, COMMITMENT LETTER AND HOSPITALITY CONTRACT

The rules defined between the guest and the "Villa Verde" Protected Residence are described and shared (with family members and/or AdS / Guardians) within the Service Supply Contract Commitment Letter Hospitality Contract which is drawn up and signed at least one day before the guest enters the facility or on the day of entry itself. The hospitality contract model is made up of:

- Guest personal data;
- where applicable, personal details of the administrator/guardian;
- assignment of bed-space and services provided according to the type of facility (agreed/free market);
- description of the charges borne by the facility;
- commitment to pay the fee (according to the type of accredited module), with definition of timeframes, methods including rules for maintaining the position in the event of absence/hospitalization, failure to pay and discharge/notice;
- rules of the structure;
- responsibility for guest behavior and/or accidental events that occur (theft, fire, loss, theft of things, money, clothing, etc.);
- compliance with provisions, instructions and regulations issued by the facility.

The Facility Regulations, which define the rules of conduct for guests and family members/guardians within the facility itself, are also delivered attached to the Supply Contract.



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9.2. NETWORKING AND RELATIONSHIP WITH SERVICES

The structure is in constant contact with the territory (Referral Services (District), Institutions

public, public and private services and agencies, etc.) to guarantee users a connection with the context in which the facility itself is located and to offer continuity of care based on their health condition.

The facility promotes connection with all the services of:

- District, Hospitals, other Health Services;
- Local Government Services.

The criteria for maintaining connection and collaboration are:

- promotion and protection of the user's health and physical and mental well-being;
- foster relationships with family members;
- promote possible and feasible activities in the territory in order to promote the primary objectives mentioned above.

With the Reference Services, meetings are planned in case of need related to the health status of the guest or for modification of the project (request for UVI re-evaluation) and above all for the definition and sharing of the objectives of the Individualized Care Project (via SIRTE- RUG).

Specifically, the relationships with the sending Services are structured according to three fundamental principles:

◆ CHECK

That is, the need, on the part of the Sending Service, to check that the work in the services is qualitatively and quantitatively adequate to what is provided for by the Regional law and in the signed contract. For this purpose, the "Villa Verde" sends the information of the users' PAI via the Sirte - RUG platform. This report arises from the work carried out by the operators in the team, and is under the direct supervision of the Nursing Coordinator of the Structure.

The service also presents, before the beginning of each calendar year, communication regarding the permanence of the authorization and the minimum requirements for the Exercise to the SUAP of the relevant Municipality and a summary table on a nominative basis of the personnel employed at the AST Pesaro Urbino Management and to the District Director.

♦ SURVEILLANCE

That is, the need to ensure that what is planned is actually carried out. The verification and control function on the provision of services occurs as foreseen by LR 21/2016. The Referring Service (like the other control bodies defined by L.21/16) can go to the "Villa Verde" at any time in a scheduled manner to verify the progress of the results of individual patients.

Furthermore, as defined by the Quality Management System, the facility is subjected to periodic internal audits of various types (quality audits, clinical audits, adverse event audits, HACCP audits, safety audits, etc.) to verify compliance with the defined rules.

In this way, the "Villa Verde" is subjected to two types of control: an internal one by the Atena Group, and an external one by the sending Service.

♦ COLLABORATION AND SUPPORT

That is, the need for the "Villa Verde" to find in the Referents of the Sending District points of reference and comparison for the management of the Service. Networking in the territory is a basic condition for the development action of the "Villa Verde". Through this approach it is possible to obtain phenomena of promotion and strengthening of the capacities of personal autonomy.

The presence of local services represents the possibility of building a "sense of belonging to the territory", "development of knowledge, critical awareness and participation" and of promoting a "sense of responsibility" with respect to social choices.



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10. ORGANIZATION OF THE CENTER

The proposals are structured through a criterion of flexibility and elasticity with respect to the individual and with constant attention to the complexity of the service. An educational program is prepared annually, differentiated for each center.

Typical day at the "Villa Verde" Residential Center

typical day is described below, without prejudice to the need for programming tailored to the specific service.

- 6.00-9.00 Wake up, check the environment, personal hygiene (self-care, dressing, etc.) and tidying up and cleaning the ward rooms according to the work plan.
- 8.30-9.30 Breakfast in the dining room or in the room independently or with the help of the operators and subsequent administration/taking of the therapy (as per medical prescription) by the nursing staff, tidying up of the canteen and kitchen areas.
- 9.45 -11.30 Recreational activities, group gymnastics, reading, listening to music, going out with family or friends.
- Setting up of the rooms used for eating lunch, and eating lunch in the dining room or in the room independently or with the help of the operators; the menu offers various alternatives and respects personalized diets. The staff dispenses the meal and implements methods of assistance aimed at promoting autonomy and support in drinking and eating. The staff on duty is also involved in the relationship, reassurance of the guests with functions, when necessary, of mediation with respect to interpersonal relationships. The staff on duty takes care of tidying up the canteen together with the users. The nursing staff administers the therapy (as per medical prescription). The cleaning staff/OSS take care of tidying up and cleaning the canteen according to the work plan.
- 1.00pm-3.30pm At the end of the tidying up, a moment of community relaxation is planned in which it is possible to watch TV, listen to music, rest in bed, etc. and personal hygiene is taken care of with the help of the operators.
- 15.30-16.00 Rising from afternoon rest, serving and consuming snacks and drinks.
- 15.30-16.30 Recreational activities according to the weekly program, welcoming families and friends of guests.
- 16.30-18.00 Preparation of the rooms used for eating meals. Dinner. The staff dispenses the meal and implements methods of assistance aimed at promoting autonomy and support in drinking and eating. The staff on duty is also involved in the relationship, reassurance of the guests with functions, if necessary, of mediation with respect to interpersonal relationships. After dinner, the rooms are tidied up and any pharmacological administration is administered.
- 19.00-20.00 Some patients remain in the room for recreational activities (card games and TV). The healthcare staff takes care of personal care and subsequently putting the guests to bed.
- 20.00-7.00 Guests are escorted to bed. During the night the staff on duty constantly checks, at regular intervals, each guest and provides hygiene if necessary.

The recreational and play activities have been studied in compliance with the physiological rhythms of the users, ensuring their balance and participation. "Villa Verde" has activities aimed at maintaining residual abilities such as: music therapy, drawing, painting, décupagé, reading, board or card games, bingo, etc.



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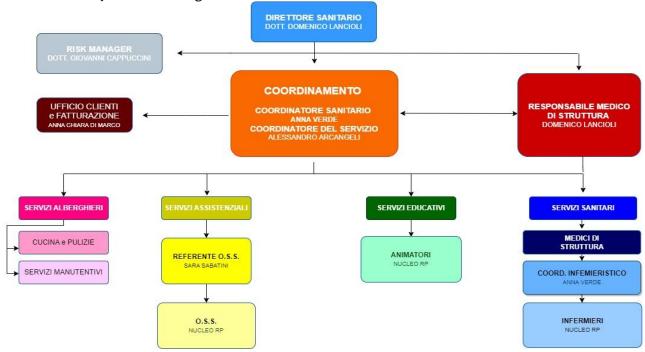
11. THE STAFF

11.1. PROFESSIONAL FIGURES

All personnel hired by "Villa Verde" through the central office of the Atena Group are selected on the basis of compliance with the following rules:

- Compliance with legislative requirements for the role to be assumed;
- Suitability for work to carry out the planned activities;
- Training and information on the job and related workplace safety rules;
- Training and support defined by professional figure (CCNL), through expert personnel with the same role (tutors);
- Skills assessment at the end of the probationary period and annual reassessment with improvement objectives;
- Annual ongoing training with particular attention to the mandatory ECM requirement where applicable, defined on the basis of the training needs and improvement of the structure's skills.

All social health rehabilitation assistance staff carry out activities in an integrated manner aimed at achieving the objectives set for each guest in the PAI. All members of the service team display an identification badge (provided by the company) both inside and outside "Villa Vede" for the entire work shift. The organization of the service is explained in the organizational chart posted in a visible area at the entrance to the facility. The organizational chart in which all the figures of the multidisciplinary team are explained is reviewed annually and with each change in the staff. It is displayed on a notice board inside the facility and visible to guests and visitors.



The "Villa Verde" provides for the following figures based on the DGRM1331/2014 and DGRM 938/2020 regulations:

n.1 General Management Atena Srl with Sole Shareholder, n.1 Health Director, n. 1 Risk Manager and n.1 figure supporting the Risk Manager shared among all the modules of the Atena Group structures.

DD/Da Madula	n. 1 doctor responsible as DS, n.1 Service coordinator, n.1 Nursing coordinator, n.1 nurse, n.10
RP/R3 Module	OSS, n.1 entertainer, n.1 ADB, n.2 cleaning assistants.

The following are the minutes per module:

MODLO MINUTES	RP/R3	MODLO MINUTES	RP/R3
GP DOCTOR	Weekly access and for any need/emergency	oss	100 m/ paz /day
COORDINATOR	9 m/ paz /day	ANIMATOR	4 m/ paz /day
NURSE	20 m/ patient /day	CLEANING AUXILIARY	6.5 m/ patient /day



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Shifts are expected according to the current contractual regulations. The employees employed in each module are used for the minutes indicated exclusively in the module itself.

The personnel organization charts specify whether the operator is employed exclusively in the module or if he/she completes the weekly hours in other modules of the Atena Group structures, as a substitute. During the night hours, the presence of 2 OSS is guaranteed

The team elaborates in an integrated way annual programming and Individual Projects that are verified at least annually. The specific contribution of each professional figure allows a comprehensive vision of the person, which looks at educational, assistance, health and social aspects. The operators compare, define proposals, decline individual and group objectives. The perspective with which we work is that of the recomposition of each path within the general project of the service. Periodically the structure provides team meetings with promotion to group work. These meetings regarding the needs of the user are constantly minuted and stimulate the operators to team work and to share objectives.

Steering Committee – Delivery Area Services: it is the reference for the Coordinators of the Atena Group Centres and for external knowledge of the Centres, their functioning and their organisation.

Customer Contact: coordinates and plans the activities of the commercial function and manages relationships with Customers, Institutions and counterparts regarding issues related to commercial activities (relationship between Sending Services and Municipalities and Private Individuals), with a focus on managing the programming of admissions and company promotion. Coordinates admissions and transfers with the Atena Group structures in compliance with the medical assessment, authorizations and type of forms, verifying the economic coverage during the access phase by all parties involved: health company, municipality, private individual. Supervises invoicing, related obligations. Manages the contractualization with AST and the management of fee adjustments. Prepares reports by region, AST and reporting obligations: ISTAT, TS System, Res Sanitarie surveillance, in addition to issuing hospitalization certificates for ISEE, pensions, ... and municipal contributions .

Medical Director: is the ultimate guarantor of health care for patients and coordination of the health personnel working in the facility. The DS carries out management tasks and functions, in particular: development and control of the logistics of health environments; protection of hygiene of the environments; coordination and control of waste management; management of measures to be applied in the event of widespread infectious diseases; infection control; verifies the organization of shifts and availability; organization and control of hotel and catering services; management of documentation/medical records of hospitalized patients; correct storage of documentation and delivery to the user in case of request; support in monitoring information flows as well as control and monitoring of the correctness of the data; verification and analysis aimed at improving clinical documentation; completeness of health information provided to users; fulfillment of pharmacovigilance and mortuary police activities required by current legislation.

Risk Manager: is the Clinical Risk Manager who has the task of recording events, reporting on SIMES, analyzing the event, managing and verbalizing AUDIT, defining improvement actions and verifying effectiveness.

Doctor: treats, protects and promotes the health of people through the practice of medical science. The doctor visits patients, prescribes medical tests and check-ups, makes a diagnosis and proposes a pharmacological therapy according to guidelines and monitors its progress, respecting the freedom and dignity of the human person, without discrimination of age, sex, religion, nationality, social condition, ideology and in all the conditions in which he is called to carry out his mission. He facilitates and promotes therapeutic intervention of the team by helping to direct the specific attributions with respect to the professionalisms involved; he collaborates actively in situations of health emergency.

Health and Service Coordinator: has the task of managing the activity of the unit within the assigned budget to ensure the overall well-being of users by guaranteeing a unitary governance of the service, acting as a figure of general direction and coordination of the activities, in particular with regard to the integration between social assistance and health processes. He deals with the daily relational and organizational aspects of the RP unit, and is the direct contact in the relationship with families and with



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the operators on duty. Maintains the relationship with the Steering Committee - Service Delivery Area of the Managing Body .

Nursing Coordinator: plays a liaison role between the clinical-organizational care part and the company objectives. Has the task of assisting the Doctors and directing, planning and supervising the work of all nurses. Organizes, manages and verifies the various health and social-health processes related to the nursing function, ensuring correct compilation and management of health documentation. Plans and manages technical-instrumental resources, health and pharmacological devices. Participates in meetings with operators for the definition of protocols/procedures and the multidimensional evaluation of the guest, collaborates in verifying the quality of the service with the Coordinator and ensures the definition/implementation of procedures for continuity of care between the structure and hospital and territorial services.

Nurse: responds to the guest's health needs, administers medications as indicated in the Pharmacology Therapy Sheet and based on any specific needs, assesses the guest's medical visits needs and accompanies him. Collaborates with the operational staff of the Facility in the psycho-physical assistance of the guest by participating in the design and updating of the individual care-educational-rehabilitation plans.

Animator: is the referent of educational projects and activities with attention to capturing the distinctive characteristics of the person. Accompany the guest in structured activities in internal and external spaces and collaborates with the psychotherapist in managing relationships with the territorial services of reference for the users. The educator, together with the care staff, supports the guests in basic daily activities (getting up, distributing meals), is present in the relationship with the guests who remain in the common areas during the moment of relaxation, proposing activities and moments of social and exchange.

The psychiatric rehabilitation technician assists the psychotherapist in administering the tests.

Social-health worker: ensures attention to the aspects of personal care and hygiene of each guest and environmental cleaning and hygiene, meal administration, supervision of guests, and guardianship assistance. Supports entertainers and educators by collaborating on activities aimed at maintaining residual psychophysical abilities, re-education, reactivation and functional recovery, carries out simple diagnostic and therapeutic support activities. Collaborates in the identification of the needs and conditions of risk - damage of the user, collaborates in the implementation of care interventions and assists the nurse in care activities based on the organization of the functional unit to which they belong, following the directives of the nursing staff.

Kitchen assistant: carries out and/or coordinates all portioning and meal serving activities, carries out acceptance checks on materials or meals, detects non-conformities during the process, draws up all defined sheets.

Produces indications during the review of the self-control system documents, carries out the checks required by the HACCP plan and attends the Plan review activities. Complies with the menu authorized by the DS The service is managed within another structure of the Atena Group.

Cleaner: carries out cleaning and sanitization activities of the premises, furnishings and furnishings, in compliance with the schedules provided in the relevant detail sheet, in order to guarantee a welcoming and clean environment. Manages the relevant material (tools and various cleaning products). The staff will also take care of waste management and disposal, in compliance with the specific procedure prepared with the Consultant.

Laundry Attendant (outsourced service): washes and irons guests' clothing, correctly manages the equipment (washing machines, dryers, irons), sorts the linen between the various locations. The service is managed within another facility of the Atena Group for the Guest's personal linen only, while for flat linen the service is outsourced.

Maintenance worker: performs small ordinary maintenance of furniture and equipment, carries out mowing of green areas, cleaning of paths and external appurtenances, treatment of drains and wells. Reports malfunctions of devices, equipment, systems.



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11.2. TRAINING

All staff working at the facility have the qualifications and experience required by law. The ATENA GROUP promotes and supports the constant updating of staff by planning continuous training interventions and targeted updates. These meetings are aimed at an ever-increasing involvement of staff in "taking care" of the user.

On an annual basis, the training needs analysis is administered to all staff and on the basis of of the results collected, training and refresher courses are organized, internal to the facility or external, managed by medical personnel or sector specialists. Specifically, the courses include a part

intended for theoretical lessons in which notions of geriatrics, psychiatry, assistance, psychology and hygiene are covered, use of the instruments provided, and a practical part where the techniques relating to the use of the aforementioned instruments, their maintenance, and the

first aid techniques. The staff also attends refresher courses on guest reception management, operator/user relationship, and operator/operator relationship.

Doctors and nurses registered in their respective professional registers are required to participate in training sessions on topics pertinent to their specialization, relating to new knowledge, technologies and diagnostic and therapeutic procedures applicable within the facility for the purposes of professional updating, as required by current legislation on continuing medical education (ECM). The satisfaction of training credits by the Staff is a requirement to be met for the purposes of practicing the profession which is verified annually by the Health Directorate.

12. QUALITY OF SERVICE

For the good management of the facility according to the certification standards, the facility carries out periodic monitoring regarding the achievement of the objectives defined in the policy and in the activities described in the Service Charter. Quality standards can be considered as the *minimum levels* of quality guaranteed by the service. Users and citizens can therefore verify and evaluate in a concrete and immediate manner the service provided, comparing what is 'committed' on the service charter and what is actually 'provided' by the structure.

Quality from the resources assigned

Quality factors	Quality standards
Staff Growth	Evaluation and improvement of staff skills Refresher/training courses (no. courses and average training hours) Team and collective meetings
Management Resources Human	Overall turnover Nursing and care service minutes Efficiency in managing volunteer/internship staff
Adequacy from the structure	Customer survey of pleasantness of internal and external spaces Structural complaints/non-conformities Evidence from internal and external controls (quality, safety, HACCP, Ast)
Procurement	Non-conformity of supply and Resolution times for supply failure Evidence from HACCP audit minutes
Safety structural	Emergency and evacuation drills First aid kit checks Missed accidents
Company climate	Customer Operator Detection Results presentation meetings Improvement actions



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Quality of the Services provided

Quality factors	Quality standards
Health management	Average frequency of access by doctors - Infectious disease monitoring Monitoring of detected sores, detected and healed pressure sores Physical Restraint Monitoring – Fall Monitoring Correct and timely administration of drug prescriptions and prescribed treatments
Design Individual	Individualized planning (N. PAI completed) PAI goals achieved Individual PAI sharing meetings
Animation activities	Number of activities/workshops proposed and carried out Participation in scheduled activities Annual hours of animation
Management assistance	Frequency of hygiene activities – Frequent monthly bathing and showering Failure to comply with planned activities related to the department Problems found in hygiene guests
Services hotel (canteen)	Meals produced in the period and % diversified meals Satisfaction with the quality and variety of meals served
Cleaning and laundry service	Non-conformities regarding sanitization and cleaning Satisfaction with hygiene and cleanliness of the premises Problems encountered in the laundry service

Quality perceived

Quality factors	Quality standards
Customer Satisfaction	Average satisfaction through questionnaire administration Complaints from family members / Institutions Average time to close complaints from family members / institutions
Service Management	Assembly meetings for planning, monitoring and verification Meetings held with families and/or senders Presentations, events, spaces open to the territory
Quality Controls	Internal/External Inspection Visits Non-conformities recorded

These monitorings are structured in the "structural indicators" table and in the Service Quality Plan, and highlight whether or not the established acceptability has been achieved.

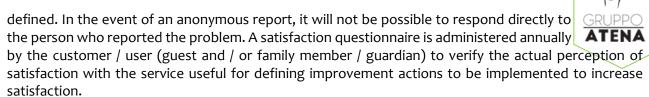
The quality of the services provided at "Villa Verde" and the satisfaction of the guests are also monitored through user satisfaction surveys (administration of questionnaires) and through adequate management of complaints. The facility, in fact, guarantees users, family members, Territorial Services and various accredited organizations, the possibility of filing a report/complaint for possible poor service, acts or behaviors deemed incorrect. The methods for submitting the report can be:

- in writing via email/postal service to the facility's address or using the specific report/complaint form contained in the Service Charter (to be inserted in the complaints box present in the facility);
- by verbal communication to the management of the facility.

Once the report (dispute/complaint) has been received, the facility will take charge of the problem encountered and evaluate any actions to be implemented to resolve it and respond in writing within 30 days of the date of the report. In the event of a report made in writing, the management will respond by email / written communication to the person who filed the complaint, highlighting the actions



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Compared to the results of the previous year, annual CUSTOMER SATISFACTION and INDICATOR ANALYSIS reports are prepared and posted on the notice board and delivered to stakeholders.

13. SERVICE SECURITY

Athena Srl , provides the activity at the "Villa Verde" facility owned by the Antimi Clari Foundation , ensuring maximum attention to the health and safety of its workers, guests, family members and visitors. The Owner Company manages and monitors all the facilities in the facility and the equipment in use, ensuring the correct and timely execution of ordinary and extraordinary maintenance through specialized maintenance workers. Atena srl monitors and, if necessary, communicates to the Foundation the need to intervene to maintain Safety. All staff are regularly trained in compliance with applicable legislation (Legislative Decree 81/08 and subsequent amendments) and equipped with protective devices to be used during the activity to protect them and the guests present, in compliance with what is defined by the Prevention and Protection Service of the ATENA GROUP.

Health and safety management within the facility is guaranteed in both ordinary and emergency conditions. The Company has structured a Safety Organization Chart indicating all the necessary functions, including an emergency management team with workers trained in first aid and fire prevention, whose task is to coordinate activities and intervene personally in all emergency situations that may arise in the facility (health, fire, earthquake, flood, blackout, ...). There is an emergency plan, shared with the emergency team, where the procedures to be adopted have been defined, which are periodically tested with all staff. Specific emergency plans are posted within the facility that indicate the escape routes, emergency exits and the external meeting point.

14. GUESTS' RIGHTS AND DUTIES

Every guest has the right to:

- to be assisted and treated with care and attention, with maximum safety and quality of care and in compliance with one's own ethical and religious beliefs;
- be considered as an individual bearer of ideas and values with the right to express one's opinions, suggestions, criticisms or complaints (to be examined and fulfilled to the extent possible);
- Receive respect for one's own opinion or political or religious choice and one's sexuality with selfrespect, within the limits of guarantee and protection of the person;
- Receive respect for your privacy, confidentiality and personal dignity, with particular attention to information relating to your pathology;
- **complete and comprehensible information** from the facility regarding the services that will be provided, including any impossibility of the planned services;
- live in a peaceful environment where you can be listened to and involved in decisions that concern you;
- to be able to **personalize the environment**, enriching your room with your own objects;
- cultivate affections, meet relatives, friends and acquaintances;
- receive the maximum guarantee of safety and protection in case of emergency and danger;
- maintain the retention of the position, in the event of absence falling within the terms set out in the regulation.



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The Family Member and/or Guardian/ADS has the right to:

- always be informed about what concerns your loved one, in a clear and transparent way, in particular
 about the objectives of the therapeutic-rehabilitative project;
- be **promptly notified** by the facility in the event of health and behavioral emergencies/urgencies;
- take advantage of privileged spaces (and/or leave the facility, after a health assessment) to spend time with their loved one (they can access the facility, after having agreed the day of the visit with the facility team);
- **express one's opinions** towards the organization, in a constructive, transparent and respectful manner of the professionalism of the interlocutor, also through reporting of facts, episodes or circumstances deemed inadequate to be verified by those responsible.

Each guest and/or family member has the duty to:

- Respect the rules of coexistence and safety by following the instructions of the designated personnel
- Observe the rules of hygiene of the environment and of the person, behaving with education and a sense of civility towards everyone, including the service personnel.
- do not bring alcoholic beverages, animals, equipment or objects that are dangerous to yourself or others into the facility;
- Take care of the good maintenance of the room and common areas, the furnishings, the systems, the
 equipment and the furnishings and ensure the correct use according to your abilities
- **observe the structure's timetables**, meal times and inform the staff in case of any exits;
- Avoid tips and compensation of any kind to staff
- do not use external personnel, unless authorized by Management
- do not expect performances not included in the normal daily program
- respect the smoking ban inside the facility (to be carried out only in permitted outdoor areas)
- **knock before entering the room** when the door is closed, respecting privacy
- pay the fee regularly and communicate in good time your intention to renounce scheduled services, in order to avoid wasting time and resources to the detriment of others;
- respect the ban on practicing different therapies, in addition to those prescribed by the doctor and reported in the medical record, prohibiting the possession of unauthorized drugs in the hospitalization areas



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15. REPORTS / POOR SERVICES / COMPLAINTS AND SUGGESTIONS / PRAISES

REPORTS/COMPLAINTS FORM
Date
Name and Surname guest *
Nucleus / Department / Sector
Name and Surname of the person making the report (in the case of a family member of a guest)*
\square suggestion \square complaint \square praise \square other
Subject of the report:
Date The undersigned expresses his/her consent for the personal data provided to be processed for the administrative
management of complaints, in compliance with GDPR 2016/679.
Date Signature

*in the event of an anonymous report, it will not be possible to communicate to the person who reported the actions taken to resolve the report. We will highlight in the annual report any improvement activities to resolve anonymous reports



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Dear guests and family,

We know that choosing to entrust the care of your loved ones to others is an important and delicate decision, and for this reason we are committed to providing the highest quality in our work.

Our team of highly qualified professionals works tirelessly to ensure the best psychological support, personalized medical care and the best possible care.

We are honored to offer our service and hope to be able to make every patient feel at home.

Thank you for choosing Gruppo Atena and for the trust you have placed in us.

Dr. Ferruccio Giovanetti





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16. CONTACTS AND USEFUL NUMBERS

For information and clarifications, you can contact the Service Coordinator and/or the Manager directly at the following telephone numbers and e-mail addresses:

Health Director and Medical Director Dr. Domenico Lancioli Service Coordinator: Alessandro Arcangeli Health Coordinator: Anna Verde Landline telephone number of the facility: 0722728198 e-mail villaverde@gruppoatena.it

Customer Contact for the Center: Anna Chiara Di Marco Landline telephone number of the administration: 0541972194 ext.11 e-mail chiara.dimarco@gruppoatena.it

Contact details of the facility:

Green Villa
Gualdesi Street, 2
61023 - Macerata Feltria (PU)
Tel. 0722/728198
E-mail villaverde@gruppoatena.it

PEC: atena.srl@pec.it

Srl Company Contact Details

Administrative offices Atena srl:
Via Salita Ponchielli, 10
61013 Conca Market
Tel 0541972194 - Fax 0541975273
E-mail info@gruppoatena.it PEC atena.srl@pec.it
www.gruppoatena.it